REVIEW OF IMPLEMENTATION: SDG 3

This session was chaired by Nabeel Murin, Vice President of the UN Economic and Social Council (ECOSOC), and moderated by Nata Menabde, World Health Organization (WHO).

Providing statistics related to SDG 3, Francesca Perucci, UN Statistics Division (UNSD), highlighted reduced maternal mortality and improved child survival rates, but stressed that rates of progress must increase.

Highlighting that 14 of the 17 SDGs can be linked directly to health, Panelist Laura Flores, Permanent Representative of Panama to the UN, urged national sectoral bodies to address these interlinkages.

Panelist Michael Myers, The Rockefeller Foundation, stressed the need for: deliberate efforts to address equity; addressing future challenges; and collaboration across sectors.

Citing an emerging consensus among policymakers that the current system of biomedical innovation is “deeply broken,” discussant Rachel Cohen, Drugs for Neglected Diseases Initiative, called for: practical approaches to biomedical innovation; strategies to promote collaboration in science; and approaches that strengthen and utilize research capacity in all countries.

Discussant Marie Hauerslev, International Federation of Medical Students Associations, said political will, policy coherence, and investments in health are needed to achieve SDG 3.

During the discussion, the NETHERLANDS, speaking on behalf of 18 developed and developing countries, stressed the interconnections between SDGs 3 and 5. AZERBAIJAN said that his country’s public allocations for healthcare increased 18-fold between 2000 and 2015. CUBA emphasized the need to address structural causes of poverty by reforming the global economic order.

CHILDREN AND YOUTH called for universal health coverage by making pharmaceutical products accessible through supportive trade measures. VANUATU identified working in silos as a barrier for better health outcomes in SIDS.

MALDIVES, for the Alliance of Small Island States (AOSIS), urged addressing non-communicable diseases (NCDs) such as cancer and mental health. LOCAL AUTHORITIES pointed to the links between organic food production and safe working conditions for workers. KENYA called for supportive work environments for working mothers to promote breastfeeding and children’s health.

CHINA emphasized the role of safety nets in poverty reduction and highlighted support for disease control centers in Africa.

INDONESIA highlighted the role of insurance in facilitating access to health services. SIERRA LEONE emphasized the need to understand the social determinants of health, including infrastructure, electricity supply, and illiteracy. RWANDA noted approaches that address health concerns at the local level.

SWITZERLAND called for efforts to address antimicrobial resistance.

ALGERIA noted that his country provides free healthcare to all segments of the population. SUDAN stressed the challenges of cross-border health threats and water-borne diseases. NIGERIA highlighted a national health insurance scheme and the importance of ensuring the health and well-being of women and girls.

The RUSSIAN FEDERATION underscored efforts to combat NCDs. INDIGENOUS PEOPLES emphasized the need to ensure: data disaggregation based on ethnicity; non-discrimination of health services; and provisions for mental health. The EU highlighted support to partner countries to build resilient health systems.

BUSINESS AND INDUSTRY highlighted efforts towards nutrition labeling systems and voluntarily restricted marketing to children. WORKERS AND TRADE UNIONS called attention to a shortage of 40 million healthcare workers by 2030 and, with WOMEN and PERSONS WITH DISABILITIES, stressed the importance of the SDG 5 target to ensure, by 2030, universal access to sexual and reproductive health-care services.

NGOs highlighted the need for: greater interdisciplinarity in developing novel diagnostics and treatments; and access to quality services across the spectrum of care. The stakeholder group on AGEING highlighted unacceptable barriers to health services for older persons. Reporting that nearly a quarter of annual deaths are due to environmental factors, UN ENVIRONMENT underlined that a healthy environment is key to delivery of SDG 3.

Closing the discussion, Myres echoed the need for “diagonal” multi-sectoral collaboration.

REVIEW OF IMPLEMENTATION: SDG 5

Marie Chatardova, Permanent Representative of the Czech Republic to the UN and ECOSOC Vice President, opened this session. Craig Mokhiber, Office of the UN High Commissioner for Human Rights, moderated.

Providing a statistical update on indicators, Francesca Perucci, UNSD, highlighted: persistence of violence against women; the gap between engagement of women and men in household work; and approaches that strengthen and utilize research capacity in all countries.

Discussant Marie Hauerslev, International Federation of Medical Students Associations, said political will, policy coherence, and investments in health are needed to achieve SDG 3.

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emphases and stressed the importance of incorporating gender into planning.

Panelist Jane Sanyu Mpagi, Ministry of Gender, Labour, and Social Development, Uganda, highlighted her country’s initiative to make “gender compliance certificates” a prerequisite for obtaining funds from Parliament, and recommended enacting laws and policies that tackle root causes of inequality.

Discussant Roberto Bissio, Third World Institute, highlighted funding to transform previously unpaid care work, and “women-washing” by corporations. Discussant Nalini Singh, Fiji Women’s Rights Movement, stressed the importance of autonomous feminist movements.

NIGERIA called for eliminating discrimination against property rights for women. VIET NAM, SWEDEN, ROMANIA, CROATIA, ANDORRA, ALGERIA, AUSTRALIA, the US, and the PHILIPPINES highlighted their countries’ efforts to promote gender equality. WORKERS AND TRADE UNIONS called for laws and policies to protect workers in the formal and informal economy. The UN INDUSTRIAL DEVELOPMENT ORGANIZATION shared examples of its support for women’s entrepreneurship. CHILDREN AND YOUTH underscored that achievement of equality should be anchored in intergenerational partnerships and drew attention to the lack of recognition of sexual rights in the 2030 Agenda. The SCIENTIFIC AND TECHNOLOGICAL COMMUNITY said it stands ready to provide data, conduct studies, and facilitate opportunities for women.

INDIGENOUS PEOPLES emphasized the importance of sexual and reproductive rights. CHINA identified structural transformation as a necessity to achieve gender equality. WOMEN urged defending women’s rights defenders and preventing gender-based violence. INDONESIA highlighted: reduced violence against women; increased school enrollment rates; and increased representation in the legislative branch. BELGIUM noted increasing participation of women in parliament and in boards of businesses.

CHILE emphasized the crosscutting nature of gender equality throughout the SDGs. DENMARK urged access to comprehensive sexuality education; youth-friendly health services; and legal, economic, and social rights. SWITZERLAND called for recognizing unpaid work. IRELAND stressed the gender impact of climate change and the need for gender disaggregated data. ARGENTINA stressed the importance of economic empowerment and protection from violence. FINLAND called for the full realization of sexual and reproductive rights. MALDIVES said legislative measures need to be supported by engagement of women in all parts of the economy.

Calling attention to systemic barriers, UN WOMEN called for discussing gender equality as a crosscutting issue at all times throughout the 2030 Agenda. The EU highlighted efforts to promote a better work-life balance through a combination of legislative and non-legislative elements. NGOs said investment in gender equality has the highest returns across the 2030 Agenda.

In closing, Nims called for “a feminist theory” to deal with the whole system. Mpagi underscored women’s involvement in SDG monitoring and implementation.

THEMATIC REVIEW: ERADICATING POVERTY AND PROMOTING PROSPERITY IN A CHANGING WORLD: HOW IT AFFECTS COUNTRIES IN SPECIAL SITUATIONS: LDCS AND LLDCS, AND SPECIAL CHALLENGES OF MICS

This session was chaired by Melet, and moderated by Swanmig Wagle, National Planning Commission, Nepal.

Panelist Amira Gormass, Committee on World Food Security, said investments in smallholder agriculture will benefit SDGs 3, 5, and 13 (climate action) and highlighted the Framework for Action for Food Security and Nutrition in Protracted Crises.

While highlighting Bangladesh’s recent graduation to lower-MIC status, panelist Farah Kabir, Action Aid, warned of the “feminization of poverty.” Panelist Nikhil Seth, UN Institute for Training and Research, underscored the need for: sub-national engagement; a nexus-approach; stakeholder engagement; and better data and harnessing of technology.

Discussant Masud Bin Momen, Permanent Representative of Bangladesh to the UN, underscored: resilience building; migration as a development enabler; and technology, innovation, and data. Discussant Larysa Belskaya, Belarus, called for greater support for sustainable development in MICs. Discussant Lazarous Kapambwe, Permanent Representative of Zambia to the UN, identified unemployment as the greatest challenge for LDCs.

In the discussion, COLOMBIA stressed the specific development needs of post-conflict countries. SRI LANKA expressed concern about the fragmentation of development planning. HONDURAS noted specific challenges of MICs. BELGIUM urged support for LDCs. NIGER said a global partnership is necessary to address security needs. SUDAN called for resources for data.

In closing, panelists stressed the role of statistical capacity to leverage interventions; action on climate change; and the importance of agriculture.

IN THE CORRIDORS

Participants brought SDG 5 (gender equality) to vivid focus on Wednesday morning through a mix of evocative imagery and visual color. Are we comfortable living in a world, one participant asked, where the equivalent of two jumbo jets full of women die every day for lack of access to reproductive health services? Another noted that eight individuals — all men — own more wealth than half the world’s population put together. A third warned “women-washing” by corporations, to rival greenwashing. Meanwhile, supporters wore orange scarves to symbolize the structural barriers to gender equality.

Did the session signal a green light for real change on the ground? This remains to be seen, but there were rumors that gender still remains one of the unresolved elements of the draft ministerial declaration, which has once again been re-opened for discussion.