



Intersectoral Collaboration for SDGs and Health

Status of Domestication in 7 Countries

(Implications for UHC and Family Planning Services)

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NEAPACOH Conference

Kampala, 31st October 2019



Presentation outline

- SDGs as a new global compact for human development of protecting the planet earth
- THINK SDGs Global Initiative

HPTT Scoping study in 2017

- key findings and recommendations
- Follow-up of scoping study in Uganda: Intersectoral collaboration (ISC) for Health
 - key findings and recommendations



17 SDGs - a new global compact for human development



- 1: No Poverty
- 2: Zero Hunger
- 3: Good Health and Well-being
- 4: Quality Education
- 5: Gender Equality
- 6: Clean Water and Sanitation
- 7: Affordable and Clean Energy
- 8: Decent Work and Economic Growth
- 9: Industry, Innovation and Infrastructure
- 10: Reduced Inequality
- 11: Sustainable Cities and Communities
- 12: Responsible Consumption and Production
- 13: Climate Action
- 14: Life Below Water
- 15: Life on Land
- 16: Peace and Justice Strong Institutions
- 17: Partnerships to achieve the Goal

THINK SDGs Global Initiative



- Policy Think Tanks supporting achievement of SDGs
- Secretariat at the Graduate Institute in Geneva - ACHEST is African Hub
- Policy Research Institutions based in each country with a view to building momentum in Eastern and Southern Africa.
- HPTT did Scoping study in Ethiopia, Kenya, Rwanda, Tanzania, Uganda, Zambia and Zimbabwe in 2017
 - Focus on level of preparedness and domestication of the SDGs



Key Findings of Scoping Study

- All 7 countries have integrated SDGs in national development plans
- SDGs are interconnected and integrated and call for ISC for their achievement, but **current planning and budgets are in silos**
- Timely, disaggregated data for planning, budgeting and tracking progress is lacking
- Need for Policy Research Institutions and Think Tanks in each country
- The level of implementation of health related SDGs in study countries is slow due to over reliance on donors and low domestic funding



Role of Policy Think Tanks

- Have potential to support governments on cross sectoral implementation of SDGs:
 - Generating high quality policy focused on research evidence, disaggregated data for achievements of SDGs
 - Prepare for annual voluntary thematic reporting on SDG implementation to the UN forum
 - Supporting civil society to hold governments accountable
 - Learning by sharing of experience across countries



Challenges identified

- Poverty levels still high in all countries
- High dependency ratios - due to large young dependent population
- Inadequate funding from domestic resources and declining FDA
- High debt burden
- Capital flight from countries - arising from tax evasion, illicit financial transactions
- Countries experiencing double burden of infectious and non-communicable diseases (NCDs)
- Impact of climate change
- Governance short comings, including mindset



Recommendations and next steps

- HPTTs should strengthen their support to governments for effective participation of countries in the Annual UN voluntary reporting on health related SDGs.
- Collaboration of HPTTs within and across countries and linkage to other ongoing SDG-Health initiatives in the region.
- African HPTTs take the lead in undertaking the generation of high quality research evidence and in mobilizing policy think tanks in other sectors to generate relevant research in those sectors.
- In-depth Uganda Study on ISC - undertaken by ACHES to implement above recommendations

Objectives of ISC Study in Uganda



- To establish the current arrangements for inter-sectoral collaboration and partnerships for Health
- To understand the roles of stakeholders in ISC: MDAs, Parliament, Districts and Sub-districts, DPs, CSOs and others

Study carried out from November 2018 – April 2019, involving social sector ministry Hqs, 4 districts and consultation with stakeholders



Definition of ISC



WHO defines ISC

... as “a **recognized relationship** between part or parts of the health sector with parts of another sector which has been formed **to take action on an issue** to achieve health outcomes (or intermediate health outcomes) in a way that is **more effective, efficient or sustainable than could be achieved by the health sector acting alone**”.

Methodology



The methodology for the study included:

- Literature review
- Key informant interviews
- Focus group discussions
- Structured questionnaires
- Stakeholder consultations

Appropriate approvals from UNCST and UNHRO, with ethical clearance from MakSSREC

Study findings:



Uganda SDG Coordination arrangements:

Committee	Committee Role
SDG Policy Coordination Committee (SDG-PCC)	a) This comprises of members of Cabinet, Heads of UN Agencies, and Heads of Missions, chaired by the Prime Minister. This committee provides policy guidance and direction to MDAs on SDGs, and reviews implementation.
SDG Implementation Steering Committee (SDG-ISC)	This comprises of Permanent Secretaries, Heads of Agencies, and Development Partners, chaired by Head of Public Service and Secretary to Cabinet. The role of the Committee will review progress and make recommendations to the PCC.
SDG National Task Force (SDG-NTF)	a) This comprises of technical officers from OPM, MoFPED, MoFA, MoLG, NPA, UN, NGO Forum, and PSFU. The Committee is chaired by the Permanent Secretary in the OPM. The committee meets quarterly to review reports from Technical Working Groups for consideration by ISC.
SDGs Technical Working Groups (SDG-TWGs)	This is to engage various ministries as follows: Coordination, Monitoring, Evaluation and Reporting TWG led by the Office of the Prime Minister (OPM); Data TWG led by UBOS; Planning TWG led by NPA; Communication and Advocacy TWG led by OPM; and Finance TWG led by MoFPED.



Study findings ctd...,

- Budgets and financial flows at national level are sector based
- Conditional grants to Districts are sector based
- Auditor General Report 2016 on Financing of Local Government through Central Government grant:- **shows that sectors retain the biggest allocations despite devolved responsibility for service delivery**
- Limited collaboration between sectors:- **for example, Youth department of MoGLSD, Adolescent health division of MoH and sexuality education unit of MoES do not plan and implement jointly**



Study findings ctd...,

- Some central policies and strategies are not reaching the District:- *There is no visible national strategy to market SDGs and NDPs*
- Donor driven fragments of SDGs and NDPs implementation have higher visibility:
 - e.g. “OBULAMU” TV and Radio adverts on family planning
 - *Some DPs initiate projects without due consultation with local authorities*

Case study



In one of the sub-counties in the study districts, we found that there are many young people who drop out of school, are unemployed and see no future for themselves. They have resorted to taking drugs, congregating around commercial centers and displaying delinquent behaviors, resulting in teenage pregnancies and insecurity.

Issues:

There are no holistic programmes for addressing the needs of out of school young people



Recommendations

1. SDGs are interconnected and inter-dependent and require a mindset change in government planning and implementation of Programs at all levels. **NPA should work with OPM to operationalize existing structures that facilitate ISC**
2. **Unconditional grants to Districts be increased to enhance ISC. Central line ministries should strengthen supervision, standard setting, resource mobilization and human resource capacity building as stipulated in the decentralization law**



Recommendations ctd...,

3. There are key central government policies and strategies such as SDGs and NDPs that do not reach District and Sub-district levels: **OPM and NPA should develop advocacy strategies to popularize government programmes in the country NDPs.**
4. Collaboration between sectors: departments in MoGLSD, MoH and MoES in the case of Youth friendly services, **should start to plan and implement programmes jointly, facilitated by OPM and NPA. This approach should be developed across the entire government to accelerate SDGs achievement.**

Recommendations ctd...,



5. Donor driven projects should be integrated into national and District plans. **OPM, Parliament and NPA should advocate and strengthen the implementation of Sector Wide Approaches (Swaps) or similar arrangements**
6. **The MoGLSD should take the lead and collaborate with other sectors to develop holistic programmes for out of school youths**
7. **As a matter of urgency OPM, NPA, District authorities, cultural leaders, civil society organization and religious leaders should work together to strengthen societal governance and develop dedicated and holistic programmes to address the needs of rural and urban Youths so as to realize the Demographic Dividend**

THANK YOU