Women’s and Children’s Health in the Post 2015 Development Agenda: where are we, and where should we be heading?

Summary:

The PMNCH Post 2015 Working Group and the Board, and the broader partnership, have, throughout 2013 advocated for a people centric, human rights, equity focused and gender sensitive approach to development. Successes of the Post 2015 Working Group included a summary statement endorsed by over 240 members. In 2014, PMNCH will continue to work under the guidance of the Post 2015 Working Group to promote the adequate reflection of women’s and children’s health in the Post 2015 framework.

Purpose

This paper serves to inform the PMNCH Board on the positioning of health in the Post 2015 deliberations and on the projected work of the PMNCH Post 2015 Working Group in 2014.

To do this, it:

1. Reviews the Post 2015 Development Agenda process and progress to date.
2. Reviews the current positioning of health and in particular women’s and children’s health in key Post-2015 papers and discussions.
3. Provides an overview of opportunities for engagement of the Post-2015 process in 2014 by the PMNCH Post 2015 Working Group, with the aspiration that the targets and indicators which centrally position women’s and children’s health at the heart of sustainable development are included in the final outcome documents.

Action required from the Board:  The Board is invited to take note, in relation to the June 2013 Board discussions, and to confirm that the process outlined is in accordance with its decisions.
1. Purpose

This paper reviews the progress of the development of the post-2015 development agenda, with a focus on the current positioning of health and in particular women’s and children’s health in key Post-2015 papers and discussions, and provides an overview of opportunities for engagement of the Post-2015 process in 2014 by PMNCH Post 2015 Working Group.

2. Context

Global goals play a critical role in shaping health and development priorities. Over the past twelve years, the Millennium Development Goals (MDGs) have significantly influenced the global policy agenda. The MDGs helped set shared targets, mobilise resources, and promote mutual accountability for results. Importantly, they represented a global recommitment to social justice – reducing poverty, improving health and education, and promoting environmental sustainability.

With the deadline for achieving the MDGs fast approaching, the world has turned to the Post 2015 sustainable development agenda, to provide a comprehensive framework that can promote inclusive economic development, environmental sustainability and social development, while building on past successes and lessons, carrying forth unfinished agendas and integrating new and previously ignored development issues.

Health in general and women’s and children’s health more specifically is inextricably linked with the four dimensions of sustainable development as defined by the UN System Task Team on the Post 2015 Sustainable Development Agenda: social development; economic development; environmental sustainability; and peace and security. Fulfilling the fundamental human right of enabling women and children access to a healthy life is just as vital for sustainable development now as when the MDGs were agreed in 2000. Yet, while the health of women and children has improved globally, mortality and morbidity rates remain unacceptably high and inequitable.

The PMNCH Post 2015 Working Group has, throughout 2013 advocated for a population centric, human rights, equity focused and gender sensitive approach to development. It has called for a Post 2015 development framework that aims to improve healthy lives and end preventable deaths and morbidity, especially amongst women and children through the inclusion of a health specific goal and the integration of health indicators in goals related to social, economic and environmental determinants of health.

2013 has seen reports on the Post 2015 Development Agenda issued by the High Level Panel of Eminent Persons(HLP) and UN Secretary General (UNSG) among others. These reports have highlighted health as a key priority, and indicate that there is a high likelihood that the Post 2015 framework will include a health goal, and a number of goals on important social determinants of health such as education; agriculture, food security and nutrition; water and sanitation; gender and women’s empowerment among others. The Post 2015 working group in 2014 should consolidate
these gains and work towards aligning partner efforts around the recommendations on specific targets and indicators. This paper will provide an overview of the Post 2015 process and content to date as well as opportunities for PMNCH engagement in 2014.

Section 3 of this paper will provide an overview of the Post 2015 development agenda process to date and an assessment of where women and children have featured in the various discussions. Section of 4 of this paper will provide an overview of opportunities for engagement of the Post-2015 process in 2014 by PMNCH Post 2015 Working Group.

3. Post-2015 process to date and status of women’s and children’s health issues in discussions

Post 2015 process to date

The Formal Post 2015 discussions have been shaped by the following streams of work (Figure 1)

1. The UN Secretary General set up a UN System Task Team (UNSTT) on the Post-2015 Sustainable Development Agenda to support system-wide preparations for the post-2015 UN development agenda. The UNSTT, which brings together over 60 UN entities and agencies and international organizations, had as a primary objective to provide analytical input into the Post-2015 discussions. In May 2012, the UNSTT issued its report Realizing the Future We Want for All, which proposed a post-2015 framework that explicitly incorporates three guiding principles: equality, sustainability and human rights and is developed along four, interdependent dimensions: social development; economic development; environmental sustainability; and peace and security.

2. In 2012-2013, the United Nations Development Group (UNDG) led a “global conversation” on the post-2015 agenda through a series of at least 100 national consultations, regional consultations facilitated by the United Nations Regional Economic Commissions, a citizen outreach programme, and a series of thematic global consultations on: population dynamics; health; education; growth and employment; conflict and fragility; governance; environmental sustainability; food security and nutrition; energy; and water.

3. In June 2012 the UN Secretary General convened a High-level Panel of Eminent Persons, co-chaired by the Presidents of Indonesia and Liberia and the Prime Minister of the United Kingdom of Great Britain and Northern Ireland. The Panel after three consultations rendered its report to the UN Secretary General in June 2013. Mrs Graça Machel, PMNCH Chair since April 2013, was a member of the High Level Panel. The report proposed twelve goals and 54 targets including a goal on healthy lives.

4. An Open Working Group composed of 30 groups of countries (composed of 69 Member States), chaired by Kenya and Hungary was set up following the Rio+20 conference to
prepare a set of sustainable development goals. The OWG is currently organizing a set of thematic consultations and will present its recommendations for deliberation at the 69th United Nations General Assembly in September 2014. (Annex 3 – list of Open Working Group members).

5. The UN Secretary General has also established a network of academics convened by Professor Jeffrey Sachs- the Sustainable Development Solutions Network - to focus on practical solutions to sustainable development issues. A thematic report on health was produced for consultation in October 2013.

6. The UN Secretary General has also set up a committee on Committee on Sustainable Development Financing to think through what different outcomes might mean for future financing.

7. The UN Secretary General has also appointed a Special Adviser on Post-2015 Development Planning to ensure coordination among all parts of the consultative process.

8. At the regional level, the African Union is leading the development of an African Common Position on the Post-2015 Development Agenda. To support this process the African Union has established a High Level Commission of ten Heads of States on Post-2015 led by H.E. President Ellen Johnson Sirleaf of Liberia. The African Common Position is currently being revised and will be presented for endorsement by Heads of States at the January 2014 African Union Summit. The current African Common Position includes a goal on universal and equitable access to health care.
Figure 1: Processes feeding into the Post 2015 Development Agenda

Post 2015 process - PMNCH engagement to date

Under the guidance of the Post 2015 working group, PMNCH has been very engaged in the Post-2015 process. Annex 1 provides a summary of PMNCH efforts to date.

In June 2013 the PMNCH Board requested that PMNCH scale up its advocacy efforts around the Post 2015 development agenda. In light with this recommendation, the secretariat has coordinated the development of PMNCH position papers on health and its linkages with other Post 2015 thematic areas and has kept abreast of partner led efforts in New York based advocacy. The Post 2015 working group was expanded to ensure greater alignment of partners and better access to key discussions. Under the guidance of the Post 2015 Working Group PMNCH revised its proposed engagement in 2014 (section 4).
Health and women’s and children’s health in Post 2015 discussions

This section provides an overview of how health in general and women’s and children’s health in particular is reflected in key papers that have been produced in the Post 2015 process to date. Six papers were reviewed and include the following:

- Sustainable Development Solutions Network -Health in the Framework of Sustainable Development (SDSN)
- Open Working Group Interim Report (OWG)
- UN Secretary General – A Life of Dignity (UNSG)
- High Level Panel – A New Global Partnership: Eradicate Poverty and Transform Economies through Sustainable Development (HLP)
- African Union – African Common Position (ACP)

Framing a health goal

Health features as a goal across all key Post 2015 institutional papers (table 1) with most papers calling for the improvement of health and wellbeing.

Universal Health Coverage (UHC) is recognized as a critical component of improved health. Three of the six papers the UNSG, SDSN and HTC propose UHC as a target. The ACP proposes it as a goal. The HLP report does not include UHC as a goal or target but notes that its attainment is implicit to other health targets. The OWG interim report notes that UHC, healthy lives and healthy life expectancy have all three been proposed as goals.

See Annex for Table 1: Proposed health related goals in Post 2015 institutional papers

The Unfinished agenda: positioning MDGs 4, 5 and 6 in Post 2015 discussions

There is a strong consensus on carrying forward the unfinished MDG agenda. All six papers analysed propose to address the MDGs, with all papers except the HTC and the OWG papers specifically outlining targets related to women’s and children’s health and HIV/AIDS, TB and Malaria (table 2). There is a strong focus on reducing maternal and child mortality. The HLP, UNSG and SDSN reports aim to end preventable deaths. The SDSN paper proposes targets of 20 per 1,000 births for under five mortality and 40 per 100,000 live births for maternal mortality. While other reports do not provide specific numeric targets, the HLP report leaves space for a numeric target for the maternal mortality ratio. There is also agreement amongst key papers so far on the need to promote sexual and reproductive health or rights and family planning. There are some differences in framing. The UNSG, OWG and HLP reports and the ACP explicitly call
for reproductive health and rights while the SDSN paper calls for reproductive health services. A continued focus on HIV/AIDS, tuberculosis and malaria also remains. The UNSG and HLP reports and the ACP all include specific targets on HIV/AIDS, TB and malaria. While the SDSN does not include a specific target on MDG 6 it includes the prevention and treatment of communicable diseases under the target on UHC.

See Annex for Table 2: Integration of MDGs 4, 5 and 6 in key institutional Post 2015 papers

**Health in all policies: how social determinants are being positioned**

Four reports were reviewed for this section: HLP, UNSG, OWG and ACP. All four reports address key social, economic and environmental determinants of health, with gender and women’s empowerment; education; agriculture, nutrition and food security; and water and sanitation among others proposed as critical goals. (table 3).

While the OWG report does not include a section on gender because it has not yet had a session on gender, all other reports propose goals around gender – with various targets. Early marriage features as a target in all three reports as does eliminating violence against women. All four reports propose a goal or a focus on nutrition. The HLP and UNSG report both propose the reduction of stunting as target while the OWG calls for a focus on the 1000 day period from pregnancy through a child’s second birthday. All four reports propose a goal or focus on education, with all reports calling for increases in primary education. Reports also address the need to improve quality of education. All four reports also call for improved access to water and sanitation, particularly in rural areas.

See Annex for Table 3: Framing of goals and targets on key social determinants of health in four Post 2015 institutional reports

**A focus on inequalities and youth**

Inequalities have been recognized as a cross cutting issue which needs to be addressed. The UNSG’s report and ACP propose specific goals on inequality. The HLP identifies it as a cross cutting theme, noting that all proposed goals and targets would only be achieved if they are met for all relevant income and social groups. Within the health discussions, the SDSN promotes UHC as a means for reducing health sector inequalities. Both the SDSN and the HTC paper recognize the need to address within household and within country inequalities which also impact health.

Another recurring theme is a potential focus on adolescents. While no goals on adolescents are proposed yet, there is strong reference to a need to focus on this population – this reference is made most often in regards to education and the creation of employment opportunities.

See Annex for Table 4: Framing on inequalities and youth in key institutional Post 2015 papers

Health in general and women’s and children’s health in particular are well captured in the all reports including the High Level Panel and UN Secretary General’s report highlight, with a focus on both a health goal and improvements in critical social, economic and environmental determinants of health. However, continued advocacy will be required to ensure that the processes that are leading the debate in 2014 maintain health on the agenda. Advocacy in 2014 will also need to promote specific targets and indicators to be considered for the Post 2015 framework. The following is based on preliminary discussions of the Post 2015 Working Group and will be refined in subsequent meetings.

Key processes to influence in 2014 will include:

1. Open working group
2. Sustainable solutions development network
3. African Common Position
4. World Health Assembly
5. UN General Assembly

A proposed way forward for consideration by the Post 2015 working group in 2014 includes:

- **Being fit for purpose.** Much of the work in 2014 will centre on missions in New York (NY) as the Open Working Group takes the lead on drafting its report and as countries begin negotiations. To better respond to shift in environment, the Post 2015 working group is being reshaped to include NY based advocacy partners which will be critical in conducting outreach to member states during the negotiation phase; and members of the Open Working Group to ensure and alignment (annex 2 – list of original and additional working group members)

- **Aligning voices within and outside of the health community:** Various positions have been advanced by health advocates ranging from the positioning of universal health coverage as a means, to its positioning as an end in and of itself. There have also been varied levels of commitment to the integration of determinants of health as a key component of health advocacy in Post 2015. The PMNCH working group will support aligned advocacy and will need to revisit the PMNCH position in line with existing reports (by health and non-health groups) and propose a set of targets and indicators for health goals and relevant indicators for critical determinants. The Post 2015 working group based on a recent analysis of the Post 2015 landscape proposes to continue to advocate for:

  - A people centered, human rights based, and equity focused approach to sustainable development,
A multi-sectoral approach to health which addresses critical social, economic and environmental determinants of health,

- A focus on critical population groups such as youth and newborns, and
- A focus on improving local evidence to improve progress and accountability.

**Targeted advocacy:** Use this PMNCH position to guide advocacy to critical processes including:

- Open working group meetings
  - Sixth session of the OWG - 9 Dec 2013 - 13 Dec 2013 – Special needs of African countries and LDCs
  - Seventh session of the OWG – 6 Jan 2014 - 10 Jan 2013 – Sustainable cities, transport, consumption
  - Eighth session of the OWG – 3 Feb 2014 -7 Feb 2014 -Promoting equality, including social equity, gender equality and women’s empowerment

- Bilateral meetings / mission briefings in Geneva and New York

- UN General Assembly and thematic sessions organized by the president of the General Assembly

- Commission on the Status of Women 10-21 March 2014

- Commission on Population and Development -7-11 April 2014

- Partners in Population and Development Executive Board meeting (Zimbabwe)

- High Level Taskforce for ICPD

- African Common Position.
## ANNEX 1- PMNCH 2013 Engagement in the Post 2015 Discussions

<table>
<thead>
<tr>
<th>Key processes in the post 2015 agenda</th>
<th>PMNCH engagement</th>
<th>Outcomes and next steps</th>
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<tbody>
<tr>
<td><strong>Shaping the health goal and targets: UNDG Global Health consultation</strong></td>
<td>PMNCH and Working Group developed a position paper positioning women’s and children’s health as a key health and development priority for the coming 15 years. Position paper submitted as part of the Health Thematic Consultation and used to advocate to various stakeholders in the health consultation, including members of the health group that met in Botswana in March 2013 and to participants of the World Bank and WHO Ministerial level Meeting on Universal Health Coverage held in February 2013 in Geneva.</td>
<td>The report of the Health Thematic Consultation refers to the PMNCH position. The outcomes of the Gaborone meeting, in line with Working Group’s recommendations called for a goal to “maximize healthy lives and called for a focus on equity and increased attention to social and environmental determinants of health.</td>
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<tr>
<td><strong>Integrating health across all themes: UNDG Global thematic consultations</strong></td>
<td>PMNCH and Working Group developed 11 thematic summaries of the position paper - which point to the health considerations pertinent to the different groups and urge for the adoption of health and gender sensitive approaches. These were submitted to the leaders of all consultations and through the online consultations.</td>
<td>PMNCH received responses including from the leaders of the thematic consultations on population and food security congratulating them for efforts to integrate agendas and confirming that women’s and children’s health would be reflected in the discussions.</td>
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<tr>
<td><strong>Prioritizing health within the larger Post 2015 discussion: High Level Panel</strong></td>
<td>PMNCH and Working Group developed a summary statement of the PMNCH position paper. - endorsed by over 240 signatories- to encourage a focus on health in the drafting of the high level panel report. In person briefing meetings with the advisors of 16 HLP members on the sides of the Bali consultation in March 2013. Statement sent to the HLP members and HLP secretariat during the drafting phase of the HLP report. PMNCH supported the Office of the President's Special Envoy on MDGs in the organization of outreach meetings attended by HLP members during the Bali consultation. Position paper was presented at these events.</td>
<td>The HLP report issued on 30 May 2013 reflects many of the Post 2015 Working Group’s recommendations including the overarching health goal - healthy lives -, targets around ending child deaths and reducing maternal deaths, targets under other thematic goals around stunting, child marriage, education, access to water and sanitation and gender equity among others. The HLP report also calls for a focus on the most vulnerable.</td>
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## Key processes in the post 2015 agenda

### Prioritizing health in regional consultations: African Union

PMNCH and various partners in the African region supported the African Union in the development of a multistakeholder position paper on “health at the core of Post 2015”. This paper was used as the basis for the development of the health section in the African Common Position on the Post 2015 Development. PMNCH supported advocacy efforts on women’s and children’s health at regional consultations on the development of the African Common Position. PMNCH and partners supported a briefing for experts at the Sixth African Union Conference of Ministers of Health during which this document was reviewed and endorsed.

“Health at the core of Post 2015” will be presented to Heads of States for review during the July 2013 Abuja +12 Summit. Following endorsement this document will be used to guide African group negotiations on health in the Post 2015 development agenda. PMNCH will be supporting a briefing of Ministers of Foreign Affairs (who play an important role in UNGA negotiations) and health on this document on the sides of the Abuja +12 Summit. The African Common Position which includes a goal on health was endorsed by Ministers of Health and Finance and reviewed by Heads of States at the May 2013 AU Summit. The Heads of States also established a high level group on Post 2015 led by H.E. President Ellen Johnson Sirleaf.

### Linking women’s and children’s health and sustainable development: Open Working group

PMNCH and the Working group have developed an evidence based summary on the linkages between nutrition and sustainable development which was circulated to the members of the Open Working Group during their second consultation on the theme of food and nutrition security in May 2013. PMNCH and the Working group have developed an evidence piece on the links between women’s and children’s health and the dimensions of sustainable development which is scheduled for publication in the July issue of the WHO Bulletin. This paper was circulated to OWG members ahead of their June 2013 discussion on social development.

A longer evidence piece on the links between women’s and children’s health and sustainable development is currently being developed for publication in World Development.
ANNEX 2 – List of members for the Post 2015 Working Group

Post 2015 working group members

Countdown to 2015 - Jennifer Requejo
DfID - Gillian Mann
GIZ - Barbara Kloss-Quiroga (chair)
Government of India - Anuradha Gupta
Government of Indonesia - Diah Saminarsih
Government of Nigeria - Tinuola Taylor
Johnson and Johnson - Sharon d’Agostino
Results for Development - Julian Schweitzer
Save the Children - Francesco Aureli, Patrick Watt, Lara Brearley
UNICEF - Geeta Rao Gupta, Kumanan Rasanathan
UNF - Susan Myers
UNFPA - Kate Gilmore
Universal Ecological Fund - Liliana Hisas
World Vision International - Kate Eardley

Additional working group members

Unilever - Miguel Pestana
Sustainable Development Solutions Network - Guido Schmidt-Traub
High Level Panel – NY Mission of Liberia and Magda Roberts, Adviser to Mrs Machel
Open Working Group – NY Missions of: China, India, Colombia, Brazil
Women Deliver - Jill Sheffield
CHESTRAD - Lola Dare
African Development Bank – Agnes Soucat
World Congress of Muslim Philanthropists - Tariq H. Cheema
International Medical Students Association - Joško Miše
WHO – Maria Neira
ANNEX 3: List of the Open Working Group Members

Membership of the Open Working Group on Sustainable Development Goals

1. Algeria/Egypt/Morocco/Tunisia
2. Ghana
3. Benin
4. Kenya
5. United Republic of Tanzania
6. Congo
7. Zambia/Zimbabwe
8. Nauru/Palau/Papua New Guinea
9. Bhutan/Thailand/Viet Nam
10. India/Pakistan/Sri Lanka
11. China/Indonesia/Kazakhstan
12. Cyprus/Singapore/United Arab Emirates
13. Bangladesh/Republic of Korea/Saudi Arabia
14. Iran (Islamic Republic of)/Japan/Nepal
15. Colombia/Guatemala
16. Bahamas/Barbados
17. Guyana/Haiti/Trinidad and Tobago
18. Mexico/Peru
19. Brazil/Nicaragua
20. Argentina/Bolivia (Plurinational State of)/Ecuador
21. Australia/Netherlands/United Kingdom of Great Britain and Northern Ireland
22. Canada/Israel/United States of America
23. Denmark/Ireland/Norway
24. France/Germany/Switzerland
25. Italy/Spain/Turkey
26. Hungary
27. Belarus/Serbia
28. Bulgaria/Croatia
29. Montenegro/Slovenia
30. Poland/Romania
### Table 1: Proposed health related goals in Post 2015 institutional papers

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<tbody>
<tr>
<td>Health related goal</td>
<td>Achieve Health And Wellbeing At All Ages</td>
<td>maximize health at all stages of life; or maximize healthy life expectancy or universal health coverage</td>
<td>Improve health</td>
<td>Ensure Healthy Lives</td>
<td>Universal and Equitable Access to Healthcare</td>
<td>Maximizing Healthy Lives</td>
</tr>
<tr>
<td>Reference to universal health coverage</td>
<td>Proposed as target: Ensure universal coverage of quality healthcare including the prevention and treatment of communicable diseases, NCDs, SRH, family planning, routine immunization, and mental health, according the highest priority to primary health care</td>
<td>Proposed as possible goal: universal health coverage</td>
<td>Proposed as target: Address universal health-care coverage, access and affordability</td>
<td>No reference as goal or target</td>
<td>Proposed as a goal: Universal and Equitable Access to Healthcare</td>
<td>Proposed as target: Ensure universal health coverage and access</td>
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</tbody>
</table>

Proposed as target: Ensure universal coverage of quality healthcare including the prevention and treatment of communicable diseases, NCDs, SRH, family planning, routine immunization, and mental health, according the highest priority to primary health care

Proposed as possible goal: universal health coverage

Proposed as target: Address universal health-care coverage, access and affordability

No reference as goal or target

Proposed as a goal: Universal and Equitable Access to Healthcare

Proposed as target: Ensure universal health coverage and access
### Table 2: Integration of MDGs 4, 5 and 6 in key institutional Post 2015 papers

<table>
<thead>
<tr>
<th>MDGs 4 and 5 related targets</th>
<th>SDSN</th>
<th>OWG</th>
<th>UNSG</th>
<th>HLP</th>
<th>ACP</th>
<th>HTC</th>
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</thead>
<tbody>
<tr>
<td>Target: End preventable deaths by reducing child mortality to 20 or fewer deaths per 1000 births, maternal mortality to 40 or fewer deaths per 100,000 live births</td>
<td>No target but notes: the advancement and completion of the most off-track MDGs is the starting point, the <em>sine qua non</em>, of the SDGs</td>
<td>Target: End preventable maternal and child deaths; Target: Realize women's reproductive health and rights; Target: Increase immunization coverage;</td>
<td>Target: End preventable infant and under-5 deaths</td>
<td>Target: Increase by x% the proportion of children, adolescents, at-risk adults and older people that are fully vaccinated</td>
<td>Target: End preventable infant and under-5 deaths</td>
<td></td>
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<tr>
<td>Also notes: Sustained progress is needed on vaccination against common childhood diseases</td>
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<td></td>
<td>Target: Decrease the maternal mortality ratio to no more than x per 100,000</td>
<td>Target: Ensure universal sexual and reproductive health and rights</td>
<td>Target: Accelerate the MDG agenda</td>
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<tr>
<td>And: The importance was highlighted of respecting and promoting SRH, and protecting and fulfilling reproductive rights in accordance with the Programme of Action of the ICPD…</td>
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<tr>
<th>MDG 6 related targets</th>
<th>SDSN</th>
<th>OWG</th>
<th>UNSG</th>
<th>HLP</th>
<th>ACP</th>
<th>HTC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target: Ensure universal coverage of quality healthcare including the prevention and treatment of communicable and non-communicable diseases…</td>
<td>No target but notes: the advancement and completion of the most off-track MDGs is the starting point, the <em>sine qua non</em>, of the SDGs</td>
<td>Target: Eradicate malaria and realize the vision of a future free of AIDS and tuberculosis;</td>
<td>Target: Reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases</td>
<td>Target: Reduced incidence of communicable diseases (HIV/AIDS, Malaria and TB),</td>
<td>Target: Accelerate the MDG agenda</td>
<td></td>
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<tr>
<td>Also notes: as well as on prevention and treatment of communicable diseases like gastrointestinal disorders, malaria, HIV/AIDS and tuberculosis</td>
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Table 3: Framing of goals and targets on key social determinants of health in four Post 2015 institutional reports

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<thead>
<tr>
<th></th>
<th>Open Working Group</th>
<th>UN Secretary General</th>
<th>High Level Panel of Eminent Persons</th>
<th>Africa Common Position</th>
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<tbody>
<tr>
<td><strong>Gender/Women empowerment</strong></td>
<td>No discussion – OWG gender session planned for February 2014</td>
<td>Proposed goal on empowering women and girls includes focus on: eliminating violence against women and early child marriage</td>
<td>Proposed gender goal includes targets on: Prevent and eliminate all forms of violence against girls and women End child marriage</td>
<td>Proposed gender equality and women’s empowerment goal includes focus on: gender parity in education, with special emphasis on secondary and tertiary; eliminating gender-based wage inequality; increasing women’s access to and control over land and other productive assets; eradicating violence against women and children and harmful practices such as FGM and early marriage and eliminating gender-based discrimination in political and decision-making processes</td>
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<tr>
<td><strong>Nutrition/Food security</strong></td>
<td>Nutrition discussion proposes as focus on adequate nutrition during the critical 1,000 days from beginning of pregnancy through a child’s second birthday merits a particular focus</td>
<td>Proposed nutrition goal looks at improving nutrition outcomes and reducing stunting</td>
<td>Proposed nutrition includes the following target: Reduce stunting by x%, wasting by y%, and anaemia by z% for all children under five</td>
<td>Proposes a goal on agriculture, food security and nutrition</td>
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<tr>
<td><strong>Education</strong></td>
<td>Education discussion points to the need to reach MDG goal on primary education while improving quality of education</td>
<td>Education goal aims to provide quality education and lifelong learning; Young people should be able to receive high-quality education and learning, from early childhood development to post-primary schooling, including not only formal schooling, life skills and vocational education and training</td>
<td>Proposed education goal includes following target; Increase by x% the proportion of children able to access and complete pre-primary education</td>
<td>Proposed goal and targets - Education and Human Capacity Development: enhancing access to quality primary, secondary and technical and vocational education; strengthening curricula for primary and secondary education to include life skills, civic, sexuality and reproductive health education</td>
</tr>
<tr>
<td>Water and sanitation</td>
<td>Open Working Group</td>
<td>UN Secretary General</td>
<td>High Level Panel of Eminent Persons</td>
<td>Africa Common Position</td>
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<tr>
<td>Water and sanitation discussion points to the need for improved access particularly in rural areas</td>
<td>No water and sanitation goal – water and sanitation included under gender, health and urbanization headings</td>
<td>Water and sanitation goal includes following target: Provide universal access to safe drinking water at home, and in schools, health centres, and refugee camps. End open defecation and ensure universal access to sanitation at school and work, and increase access to sanitation at home by x%</td>
<td>Water resources management goal includes following target: enhanced access to safe drinking water in urban and rural areas</td>
<td></td>
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<tr>
<td></td>
<td>SDSN</td>
<td>OWG</td>
<td>UNSG</td>
<td>HLP</td>
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<tr>
<td><strong>Inequalities</strong></td>
<td>Addressing inequalities is highlighted as critical with UHC seen as a means to reducing inequalities. While UHC is seen as a good strategy for reducing health inequalities paper calls on concerted efforts to reduce within house and within country inequalities</td>
<td>Paper notes that there is a need to set universal coverage targets with respect to these essentials of human well-being would <em>ipso facto</em> address inequalities – as meeting the targets would require that even the poorest and most vulnerable be covered</td>
<td>Proposes a goal – focus on inequality: <strong>Tackle exclusion and inequality.</strong> By creating inclusive economies in which men and women have access to decent employment, legal identification, financial services, infrastructure and social protection etc</td>
<td>Targets will only be considered achieved if they are met for all relevant income and social groups</td>
</tr>
<tr>
<td><strong>Youth</strong></td>
<td>Paper highlights links between health and educational attainment of children and adolescents. Also calls for a life cycle approach which includes adolescent and child health and provides some indicators related to adolescents – particularly around behavioural changes</td>
<td>Section on - <strong>Employment and decent work; social protection; education and culture; youth – includes a focus on youth employment and education</strong></td>
<td>No youth goal 'reference to a focus on youth in regards to education and employment'</td>
<td>Identified as cross cutting theme with particular importance in relations to health, education and employment 'reference to the need to engage them as active participants in the development discussions'</td>
</tr>
</tbody>
</table>