Background

In accordance with <u>GA Resolution 71/313</u>, the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (IAEG-SDGs) will conduct a Comprehensive Review of the global indicator framework in 2024 with the aim to submit its proposed revisions, replacements, additions and deletions to the 56^{th} session of the United Nations Statistical Commission in March 2025 for its consideration.

Types of proposal

Proposals will fall into one of these four groups:

- A. **Replacements**: a proposal to replace an existing indicator for an SDG target with a different indicator; will be considered if the existing indicator does not map well to the target or does not track the target well.
- B. **Revisions/adjustments**: a proposal to revise or adjust an existing indicator for an SDG target; will be considered if the current indicator does not map well to the target or does not track the target well.
- C. Additions: a proposal to add an additional indicator for an SDG target; may be considered only in exceptional cases when a crucial aspect of a target is not being monitored by the current indicator(s) or to address a critical or emerging new issue that is not monitored by the existing indicators.
- D. **Deletions**: a proposal to delete an existing indicator for an SDG target; may be considered when a tier II indicator has not been able to submit any data to the global SDG monitoring or is proven to be challenging for countries to implement. A proposal to delete an indicator will not be considered if it is the only indicator monitoring the corresponding target.

Guideline/checklist

To help prepare the proposal, below are some guiding principles and helpful and/or required information. The IAEG-SDGs will <u>not</u> be able to properly review and consider submissions without the required information.

- The review aims to maintain the same number of indicators currently in the framework to not alter significantly the original framework, which is already being implemented in most countries and to not increase the reporting burden on national statistical systems.
- A proposed indicator must have an agreed methodology (tier III indicator proposals will not be considered) and data available for at least 40% of countries and of the population across the different regions where the indicator is relevant and be suitable for global monitoring.
- The addition of a sub-indicator within an existing indicator is discouraged as it adds to the reporting burden.
- Each submission proposal must include:
 - o Background and rationale for the indicator proposal
 - o Information on how and when the methodology has become an international standard and who is the governing body that approves it (except for proposals to only delete an indicator)
 - o Link to available data and/or link to where data can be located (except for proposals to delete an indicator)
 - Completed metadata template (except for proposals to only delete an indicator). The metadata of proposed revisions/adjustments must be submitted with the track changes.
- Except for proposals to delete an indicator, it is highly recommended to consult the appropriate custodian agency(ies) prior to submitting the proposal to use their indicator.

For more information on the 2025 Comprehensive Review process, please refer to the following webpage.

ALL PROPOSALS MUST BE SUBMITTED ONLINE. PLEASE SUBMIT THE COMPLETED FORMS AT:

bit.ly/2025 review BY 30 APRIL 2024

If you encounter issues with the online form, please contact the IAEG-SDGs Secretariat (statistics@un.org).

To be completed by and submitted to the Secretariat for the IAEG-SDGs review during the 2025 Comprehensive Review. All fields are required unless otherwise indicated; incomplete forms will not be considered. *Please use one submission form per proposal. If you have more than one proposal, please submit one form for each proposal.*

Submitter information

Please enter information about the focal point of this submission.

revise/adjust:

Full Name:	Click or t	Click or tap here to enter text.		
Agency/organization name:	Brazilian Institute of Geography and Statistics - IBGE			
Email address:	Click or tap here to enter text.			
Please list other contacts and c	ther agen	cies/organizations (if any) associated wi	th this submission below.	
Full Name		Agency/organization name:	Email address:	
Click or tap here to enter text.		Brazilian Institute of Geography and Statistics- IBGE	Click or tap here to enter text.	
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		Type of proposal		
1. This is a proposal for a(n): (p	lease sele	ct only one):		
☐ REPLACEMENT : to r	eplace an	existing indicator for an SDG target with	a different indicator.	
□ REVISION/ADJUSTM	1ENT : to re	evise or adjust an existing indicator for ar	n SDG target.	
\square ADDITION : to add an additional indicator for an SDG target.				
☐ DELETION : to delete an existing indicator for an SDG target.				
2. Please enter the SDG Target this proposal is for (please enter the SDG target number. For example, 11.c):				
3.9 By 2030, substantially red pollution and contamination	uce the nu	umber of deaths and illnesses from haza	rdous chemicals and air, water and soil	
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	:LETION"	proposals, please enter the indicator nar	ne <u>and</u> number you are proposing to	
replace or delete:				
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3b. For "AUDITION" proposals,	piease en	ter the name of the indicator you are pr	oposing to add:	
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3c. For "REVISION/ADJUSTMENT" proposals, please enter the existing indicator name and number you are proposing to

3.9.2 Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe Water, Sanitation and Hygiene for All (WASH) services)

Overview of proposal

4. Background and rationale for the proposal (please provide a summary of the rationale for the proposal)

As Brazil understands that the 2022 revision of this indicator was very inadequate, this proposal aims to return to the old methodology to calculate indicator 3.9.2. This implies (i) not to include Acute Respiratory Infections (ICD10: H65-H66, J00-J22, P23 and U04) in the set of diseases related to inadequate WASH services; and (ii) not to introduce the attributable risk methodology in the calculation, an aspect that was not clear on the previous version of the metadata and that is explicit now.

Adding acute respiratory infections to the list of diseases considered in deaths from poor sanitation is a complex issue. The calculation uses the same attributable fraction and relative risk methodology as indicator 3.9.1, which in Brazil we discussed a lot with the Ministry of Health. Do we have adequate benchmarks to estimate the share of deaths from respiratory issues (especially SARS) attributable to sanitation? Probably, these values have been heavily impacted by the COVID-19 pandemic. Therefore, it is perhaps too early to have reliable parameters. It is precisely the argument (the COVID-19 pandemic) used to include them, but this "pollutes" an already more or less consolidated indicator that contributes to really assessing the impacts of the lack of sanitation. If we want to measure something related to the pandemic, it may be better to create new indicators and not adapt the old ones and propose them in the 2025 Comprehensive Review.

Regarding the calculation method and the data required for the estimates of indicator 3.9.2, we know that the indicator already mentioned attributable factors previously, but it was not explicit in the methodology. So, until the last metadata update, we understood that it was enough to calculate only the sum of mortality rates from these diseases, which is being proposed here. Now, it is noteworthy that not all necessary indicators are monitored and available in Brazil. This is the case of the hand washing and personal hygiene indicator. Others have not yet been discussed in greater depth, such as the population that practices water treatment at home with filtration, chlorination, or solar disinfection, which implies a certain fragility in the calculation of estimates for the country. The current indicator requires, for most countries, data from international surveys or imputed data, which is even worse. We believe that it is not adequate for monitoring and evaluating policies and comparing different countries. Furthermore, some of these risk factors are poorly specified in metadata, as well as the parameters for calculating attributable factors which are in a very recent bibliography with some texts without public access. Metadata affirms that OMS is still planning a way to make it possible for each country to calculate the indicator by itself, which is a concern since we are only six years away from the end of the 2030 agenda.

Therefore, we argue that a simple indicator, such as a mortality rate from diseases related to unsafe water, unsafe sanitation, and lack of hygiene (exposure to unsafe Water, Sanitation, and Hygiene for All (WASH) services), is easier to understand and to calculate for all countries and their sub-regions for the period we have to analyze (2015 - 2030). It is important to remember that a good indicator should be measurable, feasible, valid, timely, replicable, sustainable, relevant, and comprehensive.

5. Please indicate how and when the methodology has become an international standard and who is the governing body that approves it (except for proposals to only delete an indicator).

The methodology proposed here is simpler and requires less data then the one which is described on metadata nowadays. The list of diseases without acute respiratory infections is definitely more consensual than the current list. So, we consider that indicator described here is more internationally validated than the current one.

6. Link(s) to available data and/or to where data can be located to demonstrate the 40% coverage threshold (except for proposals to only delete an indicator)

The simpler indicator which is being proposed here requires some data that are included in the indicator described on SDG's metadata. So, all countries which have the current 3.9.2 are able to calculate the simpler one. This link shows data about the current 3.9.2. As SDG's data is not desaggregated for each part of the indicator, there is not mortality rate from diseases related to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe Water, Sanitation and Hygiene for All (WASH) services), but it is possible to say that at least these countries (94.8%) can calculate the proposed indicator here. The advantage is that countries which today depends on international surveys or imputation to calculate the indicator, such as Brazil, could calculate the simpler version with their own data. https://unstats.un.org/sdgs/dataportal/database

7. In case the current data coverage is below 50%, is there a plan for how the data coverage will be expanded? Please elaborate on it (except for proposals to only delete an indicator).

Click or tap here to enter text.	
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8. Conclusion/other comments (please enter any other information about the proposal):

Despite the agreement that major changes on methodologies of SDG indicators would be discussed only in 2025, the proposal to include respiratory issues among the considered diseases and introduce explicitly the attributable risk factor was presented in 2022. Brazil was against it, but it was approved. However, we would like an opportunity to discuss it in the appropriate space. The ones who proposed the current 3.9.2 must expose the advantages of using this more complex indicator; the reliability and availability of data about the risk factors and the methodology, which is based on a very recent bibliography; and reflect if the benefits of an indicator that could not be calculated by some countries by themselves are worth the costs.

- 9. Metadata file (except for proposals to only delete an indicator).
- ☑ I/We have attached the appropriate metadata file to this proposal.
- 10. Acknowledgement.
- ☑ I/We have read and understand the information regarding the guiding principles, criteria and requirements for the 2025 Comprehensive Review proposals listed above.