

Stakeholders Statement
2nd Meeting of the Interagency and Expert Group on SDG Indicators
Bangkok, 26 October, 2015

THEME : Global Indicators Goals 3 & 4 - Secure education, health and basic services for all

THEME 2: Global Indicators under Goal 3 and 4 -Secure education, health and basic service for all

Introduction

Firstly we reiterate our support for the principles and the indicator framework presented in the first statement by stakeholder groups.

We feel that there needs to be a process for incorporating comments made by member states and other stakeholders on the green” indicators (especially in the goal on education) since many are not completely reflective of the respective targets. This should be done transparently, with participation of all stakeholders.

Health and education, are at the heart of achieving the SDG agenda. It is important that the indicators measure universal access to inclusive and quality health and education, including sexual and reproductive health and rights and ensure measures of accountability for fulfillment of indicators. They need to cover the entire lifespan, be disaggregated by all background characteristics and end all forms of discrimination and be based on both existing data sets and on future ones yet to be developed, and be suitable, feasible and relevant

We support the proposal for indicators for target 1a made by Brazil and Portugal for inclusion of expenditure on health and education as % of GDP or as part of total government spending; gender inclusive budgeting is additionally critical.

We also support the inclusion of health and education as basic services under target 1.4.1. On target 17.17, we strongly believe that indicators for partnerships should include measures other than financial PPPs with the private sector and call for indicators to measure existence and implementation of binding human rights and environmental protection frameworks for regulation of PPPs, including periodic impact assessment.

Our specific indicator proposals under Goals 3 and 4 include:

Specifically on Goal 3, we call for indicator proposals under respective targets:

Health under Goal 3 needs to be holistically looked in line with WHO definition as including highest attainable standards of physical, mental, social well-being and not just absence of disease or infirmity.

Target 3.1: We call for the inclusion of post-natal care coverage for mother and baby either at home or in a facility and within two days of delivery (1+ visit). We call for disaggregation by cause of death in the case of MMR indicator.

Target 3.3: We propose the inclusion of an indicator on ART lifelong coverage for all including for pregnant women.

Target 3.4: We strongly reject the concept of premature mortality based on chronological age, and the current proposed indicator focused on the probability of dying of cardiovascular disease, cancer, diabetes, or chronic respiratory disease between ages 30 and 70.

We support the call from 9 member states to modify the indicator to not restrict the indicator to only the age bracket-ages 30-70. We additionally support Colombia, WHO, and UNSD on the indicator on promotion of mental health and well-being.

3.7: We call for inclusion of the following additional indicator although it requires further methodological work which is currently ongoing- Percentage of primary health care facilities that offer essential SRH services. This indicator will come closest to adequately monitor progress towards target 3.7.

3.8: Tracer interventions should include access to water, sanitation and hygiene including menstrual health hygiene management at home, school and in health centres. In addition we call for an indicator to measure hygiene that includes handwashing facilities with water and soap at home school and health centre (target 6.2.2)

We support the inclusion of social determinants of health including the mentions of water and sanitation and menstrual health management under targets 6.1 and 6.2.

Target 3.9: We recommend simplifying the indicator 3.9.1 so that it accounts for air pollution in urban, peri-urban, and rural settings. The revised indicator 3.9.1 reads “Mean air pollution of particulate matter (PM10 and PM2.5).” This indicator would be measured by WHO.

The indicator framework must also account for mortality from air pollution. Therefore, we recommend an additional indicator 3.9.2: “Number of premature deaths attributable to ambient and household air pollution.” The WHO already measures this indicator as a part of the Burden of Disease, so this indicator would not impose new work on statistics offices. It would, however, help the international community prioritize combating the fourth greatest health risk for death in the world.

On Goal 4, we prefer the following alternative indicators proposed by member states.

Target 4.1. Support the alternative proposal made by the Philippines on completion rate at primary, lower and upper secondary since it better reflects the scope of the target and is more readily available. We also support the statement of Denmark for inclusion of an indicator of “free education.” A single global proficiency standard will not be applicable for all countries, national and regional measurement efforts can contextualize this indicator.

Target 4.2. : We welcome the acceptance of the inclusion of the indicator for participation rate in organized learning (one year before the official primary entry age) made by Spain

Target 4.3: Support Africa’s proposal gross enrolment ratios for technical, vocational and tertiary education since it better corresponds to the target

Target 4.4: Agree with Ecuador that “relevant skills for people of all ages” needs to be defined and not be restricted to only ICT

Target 4.5: Support Germany’s proposal that parity indices for all indicators must include persons with disabilities, indigenous peoples, and all other categories mentioned in the target.

Target 4.6: to include literacy proficiency for all ages.

Indicator 4.7: The indicators should measure knowledge and attitude across all areas included in target 4.7, include comprehensive sexuality education and address gender- and other stereotypes and discrimination.

We additionally support the proposals by the UNSSO to include percentage of educational institutions providing sustainable development and climate change education, (including all aspects) under targets 12.8 and 13.3 respectively.

Target 4a: Indicators must include percentage of single sex sanitation facilities (as proposed by UNFPA/Denmark), adapted infrastructure and materials for students with disabilities (as proposed by Cabo Verde) and capture non-violent environment in school.

Thank you