

Extended Abstract submitted for the UAPS 8th African Population Conference

Title

Linking the implementation of the Nationally Determined Contributions (NDCs) and Sustainable Development Goals (SDGs) in East Africa: Perspectives and Experiences of Population, Health and Environment Integration.

Authors

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Significance/background

In 2015, the Intended Nationally Determined Contributions (INDCs) became the instrument for implementing the UNFCCC Paris Agreement. In the same year, the UN General Assembly adopted the 2030 Agenda, including the 17 Sustainable Development Goals (SDGs), which are meant to be implemented through national strategies for sustainable development. Meeting both agendas will require unprecedented cooperation and collaboration among all sectors and stakeholders. It is clear there is a need for increasing attention to approaches which facilitate multisectoral integration efforts across policies and programs that transcend traditional vertically-oriented programming. In East Africa, communities face many interconnected challenges with substantial vulnerability to climate change impacts that require more effective approaches to address interrelated challenges, strengthening community and household resilience.

The presentation will (1) elaborate the connections between NDC and SDGs, (2) provide East African country insights in implementation challenges and (3) share insight on how an integrated population, health and environment approach can create opportunities to explicitly link SDGs and NDCs using examples from Health of People and Environment in the Lake Victoria Basin (HoPE-LVB). It will highlight key levers for delivering both sets of goals jointly to maximize synergies, overcome trade-offs, optimize resources and ultimately scale up impact. (197 words)

Main question/interventions

HoPE-LVB's long-term aim, since implementation in 2011, was to reduce threats to biodiversity conservation and ecosystem degradation in the Basin, while simultaneously increasing access to sexual and reproductive health (SRH) services to both meet women's and couple's need for contraception and improve maternal and child health in project communities. Pathfinder International in partnership with local and regional organizations led implementation in Uganda and Kenya to introduce proven interventions to communities representing the population, health, and environment sectors that could be scaled up by communities, local, national and regional governments. Examples of interventions included agro-forestry, sustainable fisheries, FP service strengthening/demand generation, WASH and safe motherhood efforts.

Methodology

Results to be presented derive from HoPELVB internal midline and endline evaluations, routine monitoring over the project period and observations from the authors as participant observers in the implementation and scale up process. Various quantitative and qualitative study methodologies were used to capture the results which included: Secondary analysis of service statistics; and a quantitative

survey of “PHE model households” and others. The Model Household survey was conducted to assess their FP, MNCH, WASH, conservation and agriculture knowledge and practices prior to the HoPE-LVB project and practices in the present. A self-administered questionnaire was conducted with health care providers to determine their knowledge and capacity to provide quality FP/MNCH services. Semi-structured group discussions were conducted to capture the perceptions, behaviours and practices of the communities in HoPE-LVB Project sites. Key informant interviews were conducted with PHE Champions, District leadership and national level PHE network members, as well as Sub-County and County Health Management Team Members (S/CHMTs) members to assess the enabling environment at County/District level and its effect on the provision of quality FP/MNCH, WASH and nutrition services.

Results/key findings

Experience from HoPELVB has shown that integrated PHE programmes provide multiple benefits. Not only can the primary project goals be reached, such as environmental protection and improved reproductive health, but also multiple thematic SDGs and NDCs areas and targets like poverty alleviation, increased gender equality, food security and nutrition, health, environment, climate change, economic growth, energy, water sanitation and hygiene, and greater community participation/empowerment among others. The project reported strong results in: family planning, MNCH, WASH, natural resource management (tree planting, sustainable agriculture and fishing), livelihoods, gender roles/women’s empowerment, integration, and sustainability. The presentation will concentrate mainly on results relates to the SDGs goals which stress the importance of the international and national community proactively tackling: Goal 3 (good health and well-being), Goal 6 (clean water and sanitation), Goal 7 (affordable and clean energy), Goal 11 (sustainable cities and communities), Goal 12 (responsible consumption and production), Goal 13 (climate action), Goal 14 (life below water), and Goal 15 (life on land). Results on policy advocacy at national and sub-national will be shared especially those related to climate change actions and NDCs.

Knowledge contribution/lessons

PHE approaches recognize the interconnectedness between people and their environment and encourage multi-sector coordination for integrating population and family planning/reproductive health with multiple thematic SDGs areas such as food security and nutrition, health, environment, climate change, economic growth, energy, water sanitation and hygiene, gender equality among others.

Achieving the SDGs and NDCs will demand interdisciplinary, practical, locally relevant, and long-lasting solutions. As is increasingly agreed by now at the highest levels of government in Uganda and Kenya PHE integrated approaches represent a promising strategy for implementing and attainment of the SDGs and Paris Climate Change Agreement in East Africa. However, this understanding is not universally held down through the ranks, and operational frameworks for implementing integrated services are not yet in place. Similarly, both governmental and donor funding streams continue to be highly verticalized, and support for integration across sectors is scarce.

Multisectoral programming and partnerships are critical to the success of the SDGs and Paris Agreement. Policies and action designed to implement the Climate Agreement and the SDGs must be aligned and integrated

There is a need to ensure integrated funding streams and programs which encourage multisectoral

collaboration, including health, conservation, climate and sustainable-development financing mechanisms.

Despite the added value conferred by integrated programming across sectors, the siloed structure and reporting lines of respective government ministries (e.g., standalone ministries addressing health, environment, and agriculture) and the funding environment still favor single-sector interventions, which poses challenges for the implementation and achievement of both SDGs and NDCs in East Africa.