## **BRIEFING**



**Action for Global Health Briefing** 

First 100 Days





Action for Global Health (AfGH) is a UK-based network of over 50 organisations working towards a world where the universal right to health is realised. AfGH acts as the coordinator between the UK government and global health civil society, convening regular meetings and sharing learning from across our network.



# First 100 Days

### Introduction

Since 2015, the world has seen a decline in population health outcomes globally. Childhood vaccinations have experienced the largest declines in three decades, while deaths from tuberculosis and malaria have increased compared to pre-pandemic levels. Insufficient progress is being made in reducing maternal mortality <sup>1</sup> and expanding universal health coverage (UHC).

Expansion of access to essential health services has slowed compared to pre-2015 gains and there has been no significant progress in reducing financial hardship in accessing prevention, early diagnosis, treatment and care.

At the global level, we have also witnessed missed opportunities to highlight the importance of Global Health Equity, including:

Pact of the Future	!	Omits any reference to global health.
Nutrition for Growth Summit and COP Summit	!	Outcomes failed to integrate ambitious visions for building resilient, inclusive health systems and achieving UHC.
Vertical health programmes	!	Lessons from decades of such programmes have not been learned and acted upon.  Insufficient action on cross-sectoral collaboration to address the social and environmental determinants of health, nor changes made to health financing architecture that will enable this collaboration.
Political and financial commitments for National Action Plans on AMR	!	UK missed opportunities to galvanise political commitments to finance and implement these, despite the proven links between AMR and mortality.

Disadvantaged communities continue to face significant disparities in accessing healthcare and related services, coupled with increased exposure to health risks. This was highlighted by the vaccine inequity seen during the COVID-19 pandemic.

<sup>1</sup> https://www.who.int/news/item/09-05-2023-global-progress-in-tackling-maternal-and-newborn-deaths-stalls-since-2015--un



Realising sexual and reproductive health and rights (SRHR) for women and adolescent girls has been an ongoing challenge for many years, which the impact of the COVID-19 pandemic further compounded. Further challenges have arisen as a result of the growing political rollback on SRHR - most clearly demonstrated by the overturning of Roe vs. Wade in the USA.

Conflict and climate change have become increasingly important determinants of health. The wars in Ukraine, Sudan and Occupied Palestinian Territories have brought sharply into focus the impact that conflict has on decimating health care – highlighting that it is often the most vulnerable populations, such as persons with disabilities, who are impacted the greatest.

As climate conditions change, the world is witnessing more frequent and more intense weather and climate events, such as storms, floods, droughts and wildfires. As the climate crisis has worsened, we have seen a surge in the number of cholera outbreaks across the world. In 2022, there was an alarming 145% increase from the previous five-year average, according to UNICEF. Extreme weather events such as tropical storms, heavy rains and flooding are destroying critical water and sanitation infrastructure, causing untreated sewage to spill into clean water sources and increasing the risk of cholera. This has been the recent reality for tens of thousands of people across southern Africa.

The World Health Organization's (WHO) World Health Statistics highlighted climate change as 'one of the greatest health challenges of the 21st century.' <sup>2</sup> These weather and climate events affect health both directly and indirectly, increasing the risk of death; Non-Communicable Diseases; the emergence and spread of infectious diseases, as well as; interrupting the provision of essential health and care services.

At the halfway point to the Sustainable Development Goals (SDGs) target date, the world is faced with multiple challenges to ensuring global health equity and governments around the world – including the UK – must come together to meet their commitments and are re-energised to achieve SDG3 to ensure healthy lives for all.

#### The UK's Current Role in Global Health

In recent years, the UK's role in advancing global health equity has waned as cuts to the overall official development assistance (ODA) budget have impacted the UK's ODA for health and as the UK's response to the global COVID-19 pandemic has pivoted UK health spending towards a greater focus on global health security and in-country refugee costs.

Health programmes have been severely affected by ODA cuts over recent years, including flagship health programmes aimed at ending preventable maternal, newborn and child deaths, improving access to sexual and reproductive health services, increasing access to water, sanitation and hygiene and tackling non-COVID-19 communicable and non-communicable diseases. This has resulted in essential health programmes reducing services and closing programmes in some of the poorest countries, as well as impacting long-term investments in health system strengthening and progress towards UHC. This has undermined trust in the UK government, and diminished its credibility and influence on the global stage.

https://www.who.int/about/accountability/results/who-results-report-2022-mtr/who-at-75-years-combatting-21st-century-health-challenges#:~:text=Today%2C%20climate%20change%20is%20recognized,infectious%20diseases%20and%20food%20production



AfGH's recent analysis of the UK's funding for global health<sup>3</sup> has revealed significant overall declines in funding for the health sector, whilst the Foreign, Commonwealth and Development Office's (FCDO) own equalities impact assessment highlighted the devastating impact that the UK's cuts to ODA have had on flagship global health programmes, such as the Women's Integrated Sexual Health Programme and the ASCEND Neglected Tropical Disease Programme.

Despite this, there have been signs that the UK remained committed to advancing global health, with a specific focus on global health equity. Since 2022, the UK launched three new global health papers:

- Approach paper on Ending Preventable Deaths of Mothers, Babies and Children by 2030.4
- Position paper on Health System Strengthening for Global Health Security and Universal Health Coverage.5
- Global Health Framework.6

These papers all have a strong focus on global health equity and support for building stronger health systems in pursuit of UHC. In addition, the UK Government has produced a disability, inclusion and rights strategy as well as a women and girls' strategy, both of which include reference to the importance of health.

However, whilst there are commendable aims set out in these strategies and policy papers, these aims cannot be met without substantially reversing the cuts to health programmes that have been witnessed in recent years. These papers also fail to include clear monitoring and evaluation frameworks and fall short of being a comprehensive global health strategy. Additionally, these papers lacked any meaningful historical contextualisation of how the UK's global impact has affected these crucial issues.

Similarly, the UK took significant steps to promote it's global health diplomacy in recent years through the appointment of a UK Ministerial Champion on Ending the Preventable Deaths of Mothers, Newborns and Children and the appointment of Dame Sally Davies as the Special Envoy for tackling antimicrobial resistance (AMR). However, without clear funding, a cross-departmental and comprehensive Global Health Equity strategy, the strides these champions and envoys can take in addressing global health and achieving the SDGs are limited.

Critical gaps have also been identified in both funding and programming areas, most notably noncommunicable diseases (NCDs) and water, sanitation and hygiene (WASH) - both of which require significant investment to enable SDG3 to be achieved. An essential component of infection prevention and control, WASH is vital in tackling AMR - with half of healthcare facilities worldwide lacking basic hand hygiene service. NCDs affect 41 million people every year, 77% of whom are in low- and middle-income countries.

We also need to see increased recognition in health programming of the impacts of conflict and climate change on health outcomes.

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### Recommendations: Regaining Britain's Reputation in Global Health

There is a distinct opportunity for the UK to rebuild its reputation in Global Health and place itself as a global partner in addressing the underlying issues that impact health equity – including supporting the most marginalised and tackling climate change – to achieve the SDGs.

For the UK Government to rebuild its reputation as a key supporter of global health equity, ambitions set forward must be supported by clear financial commitments, implementation plans and accountability mechanisms.

AfGH sets forward the below recommendations to develop an approach that truly leaves no one behind:

Recommendations | The UK Government should rebuild its reputation and impact on health equity and clarify how it will address key global health equity challenges, through:

- 1. Championing the importance of global health at the Summit of the Future:
- Consultatively developing a comprehensive, cross-government Global Health Equity Strategy in 2025;
- **3. Developing a Localisation Strategy** focused on increasing financing and equitable partnerships with LMICs;
- 4. Linking global health with crossgovernmental strategies for marginalised communities, including women's rights, girls' rights, people with disabilities, older people, and LGBTQIA+ groups;
- 5. Taking a cross-government and cross-sector One Health approach, including linking global health equity with broader health agendas including pandemic preparedness and response, antimicrobial resistance, water, sanitation and hygiene and ensuring that climate considerations are integrated into all health programming;

- 6. The UK Government should appoint a Special Envoy for Universal Health Coverage, to champion interventions and approaches to improve global health equity and ensure the most marginalised have access to health services;
- 7. The UK government should build on its role as a global leader on AMR action, through increased ODA and a cross-governmental approach to addressing AMR, as well as promoting greater accountability for progress towards the Global Action Plan on AMR by other UN Member States.



#### **Actions for MPs**



Encouraging cross-ministerial collaboration across Government departments on global health equity (e.g. uniting FCDO, DHSC, DEFRA on AMR issues).



Connecting the APPGs on global health issues to champion their importance (e.g. Malaria and Neglected Tropical Diseases APPG; HIV/ AIDs APPG; Tuberculosis APPG; Vaccinations for All APPG).



Prioritise generating high-quality evidence on climate-sensitive health risks to inform national adaptation and mitigation plans.



