The **SDG’s** were developed by the **United Nations** and came into action in 2016 covering the period **2016-2030**

Have 5 broad areas of importance - **people, planet, prosperity, peace and partnership.**

The **SDG’s** were unanimously adopted by the **UN’s 193 member states** at a summit in September 2015.

The un secretary-general at the time - **ban ki-moon** said “The **17 SDG’s** are our shared vision of humanity and a social contract between the world leaders and the people - they are a to-do list for people and the planet, and a blueprint for success - ensuring that no one is left behind.”

The three dimensions of sustainability that underpin the **SDG’s** are social, economic and environmental.
Rationale/reasons for the introduction of the SDG's:
- there was a need for a new set of goals to guide global actions when the MDG's expired in 2015
- there was uneven progress across regions and countries
- there are now new global challenges that have emerged that need to be addressed, such as climate risks and increasing numbers of displaced people

Objectives of the SDG's are:
- to end extreme poverty
- fight inequality and injustice
- address climate change

The SDG's are all interconnected and their achievement requires collaboration across all sectors
Why is each objective so important -

End extreme poverty - many people in the world still live in extreme poverty which is less than $1.90 US a day they cannot afford the basic resources of life such as food, clean water, sanitation and many people die from preventable deaths.

Fight inequality and injustice - many people in the world face persecution due to sex, religion and race - and these people are not able to lead a happy and healthy life and develop to their full potential.

Tackle climate change - the natural environment provides the world's people with the basic resources for us to live - food and water - and changes to our climate impact on our fragile world.
SDG 3 – Good Health and Wellbeing

Ensure healthy lives and promote well-being for all at all ages

Seeks to:
- reduce maternal and child mortality rates
- end epidemics of communicable diseases
- reduce premature mortality from communicable diseases
- reduce substance misuse, particularly from alcohol and tobacco smoking
- reduce deaths from air, water and soil pollution
- reduce traffic accidents
- promote mental health and wellbeing

KEY FEATURES:
- Maternal and Child Health & Wellbeing
- Communicable Diseases
- Non-communicable Diseases
SDG 3 includes providing universal health coverage and access to essential medicines, universal health coverage has two main elements – expanding health services and reducing the costs of healthcare.

Maternal health can be improved by better access to prenatal care and the presence of skilled birth attendants during delivery and by increasing access to reproductive health services so the number of children a family will have will be controlled and births are spaced apart.

The communicable diseases are: malaria, HIV/AIDS, TB, hepatitis - HIV/AIDS more common in low-income countries - no cure - no vaccine - but using ART antiretroviral medication can delay the HIV virus turning into AIDS.
SDG 3 – Good health and wellbeing cont-

**Malaria** – transmitted by an infected mosquito bite prevented by using insecticide-treated bed nets and spraying insecticide in the home and using antimalarial medicines

**Tuberculosis** – disease that affects the lungs and is spread through coughing and sneezing, treated with medication and prevented through vaccination

**Neglected tropical diseases** include 18 different diseases mainly occurring in tropical areas where people lack access to safe water and sanitation and healthcare

**Hepatitis** is caused by a virus that leads to inflammation of the liver. B and C are spread through bodily fluids A and E are from ingested contaminated water and food.

**Non-communicable diseases** CVD, cancer, diabetes, and chronic respiratory disease can affect people in low, middle and high income countries – with tobacco use, lack of physical activity, alcohol use and poor diet

**Air pollution** accounts for the greatest burden of disease from using fuels such as wood, charcoal, coal and dung indoors
**LINKS BETWEEN SDG 1, 2, 4, 5, 6, AND 13 TO SDG 3**

**SDG 1 AND 3 - SDG No Poverty** - when a country is poor there is not enough money to provide public health services such as safe water and sanitation, healthcare, education and social security benefits - poverty contributes to low levels of childhood vaccinations, low levels of literacy and high death rates from infectious diseases such as measles, TB, whooping cough, cholera, malaria and tetanus.

**SDG 2 and SDG 3 - SDG 2 Zero Hunger** - Hunger and malnutrition lead to child mortality - it causes 45% of preventable deaths in children under 5

**SDG 4 and SDG 3 - Quality education** - an educated and skilled workforce brings about greater economic growth - economic growth provides resources to invest in universal health care, essential medicines etc
SDG 5 AND SDG 3 - SDG 5 Gender Equality - achieving gender equality means girls can access education and women can gain employment - and thereby accessing healthcare and food and safe water. Women are underrepresented in political and economic decision-making processes and are often discriminated against by the laws that currently exist - improving gender equality ensures women and girls are empowered, can stay healthy and get work.

SDG 6 and SDG 3 - SDG 6 - Clean water and sanitation - Diarrhoea is the most widely known disease linked to contaminated water, others are cholera, dysentery, hep A, typhoid.

SDG 13 and SDG 3 - SDG 13 - Climate Action - global warming and rising sea levels - affects food production and clean water amongst other issues.
The Work of WHO - World Health Organisation

Set norms and standards and promote and monitor their implementation
Provide leadership and create partnerships to promote H and WB
Conduct research and provide H and WB information
Develop policies to help countries take action to promote H and WB
Provide technical support and help build sustainable health systems
Monitor H and WB and assess H and WB trends

6 WHO leadership priorities
S - social, economic and environmental determinants
H - Health-related SDGs
U - Universal Health Coverage
N - Non-communicable diseases - mental health, violence, injuries and disabilities
I - International health regulations (2005)
I - Increasing access to medical products

Silly Sentence
Some People Can Dance, Prance and Muster
Types of Aid

Emergency Aid is provided for immediate distress to relieve suffering during and after emergencies, such as conflict and natural disasters, and includes food, water, medicines and shelter.

Bilateral Aid is provided by the government of one country to another. Its purpose is to help reduce poverty and bring about long-term sustainable development. Bilateral programs can range from small, community based programs to large infrastructure projects - a criticism of this aid is that the donor country could benefit the donor country and not the recipient country.

Multilateral aid is aid that is provided through international organisations such as World Bank, United Nations or the World Health Organisations. This aid is often to address global issues that require a global response.

NGO’s oxfam, world vision, red cross - provide assistance and they usually focus on smaller projects and work in collaboration with government and local aid agencies to improve H and WB and HD.
Features of Effective Aid

- **Ownership by recipient country** - country to be involved in the decision making process to make it more meaningful, programs to be implemented in a culturally sensitive way e.g. local languages used

- **Transparency and shared responsibility** - information is made available to everyone, this ensures funding goes to where it should

- **Partnerships** - with NGO’s, different levels of Government and local communities- assists them to continue the program after the aid agencies have left

- **Results Focused** - program effectiveness is monitored and assessed, therefore changes can be made if it is not as effective as first thought. Can see whether the program was effective in what it’s goals were trying to achieve.

- **You will need to be able to evaluate an Aid Program using these features (comment on whether it is successful or not)**
DFAT - DEPARTMENT OF FOREIGN AFFAIRS AND TRADE

- administers the Australian Government’s aid program - The purpose of our aid program is to promote Australia’s national interests by contributing to sustainable economic growth and poverty reduction. The Australian government works in partnership with other government departments and agencies, NGOs, businesses and community groups in Australia and overseas to deliver our aid program

Most of our aid budget goes to bilateral aid, but some goes to international organisations through multilateral aid, some to humanitarian assistance and to registered NGOs. Multilateral aid is one third of our aid budget
Why does the government provide funding for NGO’s?

- Non-government organisations often work on smaller scale development projects in communities. They often have a specific focus and can reach people that Australia’s aid program may not normally reach.
- Non-government organisations often have specialised skills. By funding these groups, projects are put into place that otherwise would not have eventuated.
AUSTRALIAN AID PRIORITY AREAS

GABEEI is the acronym for the 6 priority areas of Australia’s aid program - main aims being breaking the cycle of poverty and improving H and WB and improving HD

G - gender equality and empowering women and girls
A - agriculture, fisheries and water
B - building resilience, humanitarian assistance, disaster risk reduction and social protection
E - education and health
E - effective governance policies, institutions and functioning economies
I - infrastructure trade and international competitiveness
How do partnerships between the Aus. Gov. (DFAT) and other areas promote these priorities?

Partnership between DFAT and other government sectors

- E.g. Federal Police - This partnership can assist in promoting peace and security in low- and middle-income countries and uphold the rights of women which promotes ‘gender equality and empowering women and girls.

Partnership between DFAT and Private Sector

- An example of this is working with private energy companies to assist in providing electricity to isolated communities. This assists in working towards the priority ‘infrastructure, trade facilitation and international competitiveness’.

Partnership between DFAT and Multilateral Organisations

- Provides funding for multilateral organisations such as the World Food Programme. This funding is then used to ensure people in low-income countries are adequately nourished which improves immune system function which promotes the priority ‘education and health’.
SOCIAL ACTION

Doing something to help create positive change.

Volunteering- saves organisations time and money they can utilise for programs in low income countries

Donating Money- to NGO’s such as World Vision, Oxfam etc. to help them carry out their work

Support campaigns by signing petitions- a powerful way to show government that issues are important and need attention

Purchasing power- buying products that are fair trade or environmentally friendly e.g. Who Gives a Crap

Lobby governments – write letters to politicians, newspapers and invite local members of government to attend community gatherings that are raising awareness of issues

Start a social enterprise activity - identify an issue, research it, plan a solution, develop an action plan and then take action!