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Health

A priority for the SDC



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Swiss Agency for Development
and Cooperation SDC

Why is health a priority for the SDC?

- ▶ At the beginning of the 21st century the UN adopted the Millennium Development Goals (MDGs), three of which referred explicitly to health. They have yielded promising results: globally, child mortality and maternal mortality have been halved and the numbers of new HIV infections and malaria-related deaths have declined substantially. Nevertheless, the formal health-related MDG targets set for 2015 have not been reached and significant inequalities in health persist. **The SDC is continuing to work towards the unmet goals to ensure the greatest health and well-being for all.**
- ▶ The world is changing rapidly, and so is the public health situation. New challenges are emerging. With a growing population that is living longer and increasingly in urban areas, non-communicable diseases like cardiovascular diseases, diabetes and cancer are on the rise. They are nowadays the leading cause of death worldwide, with rapid expansion in developing countries. The globalisation of trade and international mobility has

raised the risk of rapidly spreading epidemics. Health care costs are increasing everywhere, forcing governments to reconsider their priorities and generate new resources. **The SDC supports its partner countries in tackling these new challenges while pursuing its overall cooperation goal of focusing on poor and vulnerable groups.**

- ▶ Health is directly linked to people's socio-economic status and the quality of their environment. The poorest have less access to information and quality healthcare, and their situation often makes it hard to live healthily. In order to realise the right of every human being to the highest attainable standard of health, a comprehensive approach is required which addresses the underlying determinants of health, such as access to water, education, and gender equality. **In the context of the post-2015 agenda for sustainable development, the SDC favours an approach that considers social, cultural, economic, environmental and political factors.**



How does the SDC work?

In the health sector, the SDC supports locally-implemented projects. At the same time, it engages in political dialogue with the authorities in partner countries and is part of international debate on health issues. It works at three levels:

- ▶ The SDC implements **bilateral cooperation programmes** in selected African, Asian and Eastern European countries. With its extensive experience in bilateral cooperation on health issues and technical know-how, Switzerland has a competitive advantage in this area. At country level, the SDC works with a wide range of governmental (national ministries, local governments, universities) and non-governmental (local communities, NGOs, private sector) partners.
- ▶ As global health issues require global action, the SDC also cooperates with **multilateral and international actors**. It provides funding and expertise to support specialised multilateral institutions, international NGOs, research centres and public-private partnerships. The SDC created its Global Programme

Health to make its global health strategy more coherent and effective and to develop initiatives in line with the “Swiss Health Foreign Policy”. The SDC often plays the role of a proactive agent, for instance in establishing a global mechanism for research and development of medicinal products against neglected diseases (e.g. sleeping sickness, helminth diseases) that disproportionately affect developing countries.

- ▶ In the event of a crisis, the SDC carries out direct **humanitarian aid** with the help of the experts of the Swiss Humanitarian Aid Unit. It also supports specialised humanitarian organisations (e.g. International Committee of the Red Cross, Swiss Red Cross, Médecins Sans Frontières).

The three levels of intervention complement each other. A continuity between emergency relief and longer-term assistance is fostered. Furthermore, the needs and challenges identified in the bilateral projects help the SDC advocate for reforms or new priorities in multilateral fora.



Three focuses for better health

The SDC concentrates most of its operations on primary health care, which is the first recourse for poor and vulnerable people. The SDC's activities aim to:

- ▶ **Strengthen public health systems to increase people's access to services.** Good governance and efficient management of qualified health staff, infrastructure, equipment and technology are key factors in a well-functioning health sector. The SDC strives to ensure access to services for poor and vulnerable groups, and is thereby contributing to universal health coverage.
- ▶ **Reduce the burden of communicable and non-communicable diseases.** The SDC supports prevention, treatment and research on communicable diseases such as malaria, HIV/AIDS and neglected tropical diseases. It is also working with local communities to promote healthy lifestyles and prevent non-communicable diseases (such as cancer, diabetes, cardiovascular and respiratory diseases, and mental disorders).

- ▶ **Improve maternal, newborn and child health as well as sexual and reproductive health and rights.** The SDC is committed to ensuring better health care for mothers, newborns and children. It promotes the sexual and reproductive health and rights for all, as well as self-determination for women, men and young people.

The SDC's engagement aims at strengthening a **continuum of services**, from health promotion, to disease prevention, care and rehabilitation.

The **needs of the partner countries and of local populations** steer all cooperation projects. The SDC's programme priorities are adapted to specific national and regional contexts.

Improving the health status of a population provides opportunities for improved livelihoods and well-being and thus **reduces poverty and vulnerability**.



Projects

Moldova: Health services for young people

With the support of the SDC, the “Youth Friendly Health Services” project aims to improve the quality and comprehensiveness of the services provided in the domain of sexual and reproductive health. Its activities create support for young men and women, particularly the vulnerable and those most at risk, to help them adopt a healthier lifestyle and seek assistance. As of 2015, 38 youth-friendly health centres have been officially set up throughout the country. Young people’s access to health counselling increased from 5% in 2009 to 20% in 2013.



Switzerland: Development of new antimalarial medicine

The SDC supports the non-profit organisation Medicines for Malaria Venture, based in Geneva, which since 1999 has developed new anti-malarial drugs affordable for all, in partnership with more than 140 public and private institutions. A syrup version designed specifically for children was registered by the organization in 2009 and since then, 250 million treatments have been delivered to 50 malaria-endemic countries.





Kyrgyzstan: Health promotion at village level

The SDC is contributing to about 1,700 Village Health Committees run by 18,000 volunteers. Health awareness has improved in 87% of the villages of Kyrgyzstan, in which 65% of the country's total population live. The village volunteers act as partners for the professional health workers. This "community action for health" model is now being fully integrated into the public health system, thus ensuring its sustainability.



Great Lakes: Strengthening decentralised health systems

In Rwanda, Burundi and the eastern part of the Democratic Republic of Congo, the SDC contributes to strengthening the health facilities and authorities at district level. As a result, scarce resources are better managed, and service delivery gains in efficiency. The availability of good quality care motivates the population to visit the health facilities. In 2014 almost 3 in 4 people living in the regions where the SDC is operating went to consult a health professional at least once, compared with 2 in 4 in 2011.



Facts and figures

Since 2000 substantial progress towards public health has been made globally. Switzerland has made a definite contribution to this.

-49% decline in the child mortality rate between 1990 and 2013

Mortality among children under 5 years of age declined globally, from an estimated rate of 90 deaths per 1,000 live births to 46 deaths per 1,000 live births. Since 1990 almost 100 million children under five have been saved. As diarrhoeal disease is the second leading cause of death in children of this age group, access to safe drinking water is essential. In Central Asia, Ukraine and Moldova for instance, 103,000 people had gained access to drinkable water by the end of 2013 thanks to SDC support.

450 million Number of insecticide-treated mosquito nets distributed between 2002 and 2014

A considerable increase in malaria prevention efforts (including through the distribution of mosquito nets) and improved access to effective

diagnosis and treatment saved an estimated 4.3 million lives during the 2000–2013 period. In Sub-Saharan Africa, 92% of those who die from the disease are children under 5 years. In Tanzania, the SDC has been helping the central and district health authorities to ensure universal coverage with malaria intervention since 1995.

6,6 million Number of lives saved between 1995 and 2013 by supplying antiretroviral therapy to HIV-infected people

A major drop in AIDS-related mortality has been seen in many high prevalence countries. In 2013 an estimated 1.5 million people died of AIDS globally; a 35% reduction from 2005. However progress for children is lagging behind. In Malawi and Zambia the SDC worked with the health ministries to establish special sexual and reproductive health services for young people which include HIV tests, counselling and access to contraception.



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“In Zimbabwe, nearly 15% of people aged 15 to 49 are HIV positive. The Newlands Clinic in Harare gave me new prospects by offering me the antiretroviral therapy I needed. Today I can give other HIV-positive people the support I received.”

Jacob M., volunteer councillor

Zimbabwe The SDC has been supporting the pioneering approach of the Newlands Clinic to treating HIV-positive patients and people suffering from AIDS since 2004.



“After the experience I had during the birth of my first child, I swore I'd never have another. But in the space of a few years many things have changed: hospital rooms are now pleasant and the personnel is professional and caring.”

Yulia V., mother of two

Ukraine The SDC has been helping the authorities develop a more modern and professional health sector since 2008.

“With the increase of its contribution to the Global Fund, Switzerland is sending a clear signal that we can sustain momentum in our efforts to raise money in the fight against HIV, tuberculosis and malaria.”

Mark Dybul, Executive Director of the Global Fund

The Global Fund to Fight AIDS, Tuberculosis and Malaria

Switzerland supports the work of the Global Fund with an annual contribution of CHF 20 million.



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