Goal 3 SDGs

BPS-Statistics Indonesia

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SDGs : Histories

The global indicator framework was developed by the Inter-Agency and Expert Group on SDG Indicators (IAEG-SDGs)

as a practical starting point at the 47th session of the UN Statistical Commission held in March 2016.

The report of the Commission, which included the global indicator framework, was then taken note of by ECOSOC at its 70th session in June 2016

SDGs set out quantitative objectives across social, economic and environmental dimensions of sustainable development:

- People : end poverty and hunger in all their forms

- Planet: protect the planet from degradation

- Prosperity: ensure all human beings can enjoy prosperous lives

- Peace: foster peaceful, justice and inclusive societies

- Partnership: mobilize the means required for implementing the 2030 Agenda

Formulated in 17 Goals, 169 Targets and 241 Indicators

Challenges in SDGs Implementation

- Integrated social, economic and environmental aspects:

  ➤ complex relationship between goals, targets and indicators

  ➤ complex coordination and budget arrangement between custodians

Challenges in SDGs Implementation

- Data availability: Not only at national level, but also for subnational level

- National Statistical Office cannot provide data to support all SDGs indicators → Role of relevant ministries/gov't institution also central to support SDGs

- Some indicators need to be collected based on laboratory testing or measurement

SDGs Goal 3

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

Targets and Indicators

3.1

By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births

3.1.1

Maternal mortality ratio

3.1.2

Proportion of births attended by skilled health personnel

Targets and Indicators

3.2
By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births

3.2.1
Under-five mortality rate
3.2.2
Neonatal mortality rate

Targets and Indicators

3.3

By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases

3.3.1

Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations

3.3.2

Tuberculosis incidence per 1,000 population

3.3.3

Malaria incidence per 1,000 population

3.3.4

Hepatitis B incidence per 100,000 population

3.3.5

Number of people requiring interventions against neglected tropical diseases

Targets and Indicators

3.4

By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

3.4.1

Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease

3.4.2

Suicide mortality rate

Targets and Indicators

3.5

Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

3.5.1

Coverage of treatment interventions (pharmacological, psychosocial and rehabilitation and aftercare services) for substance use disorders

3.5.2

Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in litres of pure alcohol

Targets and Indicators

3.6

By 2020, halve the number of global deaths and injuries from road traffic accidents

3.6.1

Death rate due to road traffic injuries

Targets and Indicators

3.7

By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs

3.7.1

Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods

3.7.2

Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group

Targets and Indicators

3.8

Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

3.8.1

Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population)

3.8.2

Number of people covered by health insurance or a public health system per 1,000 population

Targets and Indicators

3.9

By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

3.9.1

Mortality rate attributed to household and ambient air pollution

3.9.2

Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe Water, Sanitation and Hygiene for All (WASH) services)

3.9.3

Mortality rate attributed to unintentional poisoning

Targets and Indicators

3.a

Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate

3.a.1

Age-standardized prevalence of current tobacco use among persons aged 15 years and older

Targets and Indicators

3.b
Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all

3.b.1
Proportion of the population with access to affordable medicines and vaccines on a sustainable basis

3.b.2
Total net official development assistance to medical research and basic health sectors

Targets and Indicators

3.c
Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States

3.c.1
Health worker density and distribution

Targets and Indicators

3.d

Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks

3.d.1

International Health Regulations (IHR) capacity and health emergency preparedness

Implications of A Large Data Gap Availability (1)

- **Strengthening statistical capacity**:
  - ➢ NSO and other Ministries/Gov't Institutions
  - ➢ Modernize statistical system to improve the current sources in producing official data (Census, household survey, agricultural survey, geospatial data/infrastructure and facility inventories, CRVS, administrative data, economic statistics, and environmental data)
- **Capitalizing on data revolution**:
  - ➢ A more sophisticated approach should be adopted in data production
  - ➢ Using Big Data and non official sources (scanners, satellite imagery, road sensors, mobile phones, administrative data, etc) to support SDGs

Implications of A Large Data Gap Availability (2)

- Involving academics and researchers in filling data gap and providing information to support the monitoring process in the SDGs implementation:
  - Modeling:
    - Waste
    - Diseases
    - Mortality
    - Etc.
  - Big Data:
    - Critical land
    - Road accident
    - Sentiment analysis
    - Tourism

Conclusion

- The success of implementation of SDG heavily relies on the data availability and a good coordination among stakeholders

- Enhancing National Statistical System is necessary to support SDG implementation both at national and regional level

- The fact that there is still a large gap in data availability, innovation in data collection should be developed

- Involvement of Academia and Researchers is inevitable in the SDGs implementation process

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Thank you