

Placing children and adolescents at the centre of the Sustainable Development Goals will deliver for current and future generations

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Abstract

Child and Youth health is taking the back seat in development strategies. In summarising a newly released collaborative report, this paper calls for a novel conceptual model where child and youth health takes centre stage in relation to the 2030 Agenda and the Sustainable Development Goals. It lays out five principles by which renewed effort and focus would yield the most benefit for children and youths. These include: re-defining global child health in the post 2015 era by placing children and adolescents at the centre of the Sustainable Development Goals; striving for equity; realizing the rights of the child to thrive throughout the life-course; facilitating evidence informed policy-making and implementation; and capitalizing on interlinkages within the SDGs to galvanize multi-sectoral action. These five principles offer models that together have the potential of improving design, return and quality of global child health programs while re-energizing the 2030 Agenda and the Sustainable Development Goals.

KEYWORDS: Child health, children, Youth, Sustainable Development Goals, multi-sectoral, health equity

Introduction

Advancing global child and adolescent health involves much more than achieving gains towards the under-five and neonatal mortality targets enshrined within the United Nation's 2030 Agenda. Progress should not only be defined by survival of our youngest, but the recognition and realization of these children's right to thrive and to lead fulfilling lives throughout the life course [1].

While mortality indicators are essential for monitoring progress, they do not provide a comprehensive picture of the burden of disease borne by children and adolescents, and are a poor benchmark for measuring how best to ensure the wellbeing of the next generation [2].

Children and adolescents need to thrive, empowered with sufficient resilience to withstand looming global challenges such as climate change, armed conflict, forced migration and an evolving burden of non-communicable disease. Moreover, the health and wellbeing of children and adolescents forms the core of what will become society's future human capital, a resource to create tomorrow's affluence [3].

Through an interdisciplinary collaboration between the Swedish Institute for Global Health Transformation (SIGHT) and the Swedish Society of Medicine, a road map for global child health in the era of the Sustainable Development Goals (SDGs) has been developed [4].

The initial framework for this originated from a roundtable meeting on how Sweden can best contribute to global child health within the context of the SDGs. The meeting was hosted at the Royal Swedish Academy of Sciences by SIGHT in Stockholm in April 2017. From this a writing group of contributors with backgrounds in pediatrics, public health, psychology, economics, and environmental sciences was formed.

Early in the process a review of the vast literature concerning global child health was undertaken, with a particular emphasis on current trends and priorities within the post-2015 era. Continuous meetings and discussion within the writing group facilitated an interdisciplinary approach to the analysis.

In calling for a transformative agenda of child-centered development, this road map outlines how exploring interlinkages between child and adolescent health and other sectors, whilst harnessing synergies within the SDGs for children and adolescents (Figure 1), could together rejuvenate efforts and lead to lasting progress [2].

The road map identifies and focuses attention on five main principles:

(1) Redefining global child health in the post-2015 era: Placing children at the centre of the SDGs through a life-course perspective.

Comprising 17 goals and 169 targets the SDGs present a complex adaptive system, which from a child health perspective highlights challenges and opportunities. Increasing epidemiological diversity risks scattering the development agenda and disrupting advocacy and cooperation efforts, and thus demands renewed efforts to highlight the importance of investing in the health and wellbeing of children.

Our narrative offers a new perspective of the SDG framework by recognizing children and adolescents as both leaders and beneficiaries of development, symbolized by placing them at the centre of the SDGs [2]. Such a perspective will also promote meaningful inter-sectoral engagement and galvanize much needed public support for the goals.

(2) Striving for equity: Ensuring no child is left behind

Despite reductions in global infant and child mortality during recent decades, progress has been uneven. A central tenant of the SDGs agenda, reducing inequity is essential to drive efforts to reach and target populations in greatest need.

Investment in, and ensuring access to interventions proven to reduce morbidity and mortality must be supported by continuous scientific and contextual evaluation of their impact, including age and sex-aggregated data, to ensure no child or adolescent is left behind [5]. Here strategic leadership and transparent governance and accountability is paramount, especially from national governments.

(3) Enabling a child's right to thrive throughout the life-course

We promote adjusting the perception of the child from a disease-focused to a holistic, relational and child rights perspective. A rights-based approach to child health will guide policies at a national level towards ensuring that children have the best opportunity to not only survive, but also to thrive [6].

Adopting a life-course approach that defines and recognizes the specific child rights needs of different age groups is essential. Such a life-course approach, which considers the long-term

effects of physical and social exposures during different life stages on disease risks [7], in line with the determinants of health hypothesis is central to this child-centred perspective within the SDGs [1,8].

(4) Bridging the 'know-do gap': Facilitating evidence informed policy-making and implementation

In spite of rapid growth in knowledge and technological innovation, evidence-based preventive measures and lifesaving interventions are often of sub-optimal quality and still fail to reach those who need them most [9].

Projects such as the World Bank-led Disease Control Priorities (DCP3) initiative and WHO's Evidence-Informed Policy Network (EVIPNet) aim to make cost-effective strategies available to assist governments and policy-makers to priorities key interventions. Expanding translational research programs and implementation research that engage and build capacity within local communities plays a vital role in combating emerging global health challenges.



Figure 1: Redefining global child health in the post-2015 era: Placing children at the centre of the Sustainable Development Goals.

(5) Capitalizing on interlinkages within the SDGs to galvanize multi-sectoral action

Identifying and capitalizing on interconnections within and between the SDGs and their convergence on the health and wellbeing of children and adolescents is fundamental for promoting effective multi-sectoral partnerships that strengthen the sustainability and resilience of health and social systems. Understanding the nature of these interlinkages will be instrumental, as harnessing synergies may open up for possible win-win, or even win-win-win opportunities [10] whilst the limited number of trade-offs [11] demand diplomacy and facilitation.

The latter can be illustrated by the traditional, and false, diversion of the economy and the environment, where short term economic focus on gross domestic product growth does not take into account the harmful environmental externalities and subsequent detrimental effects on children's health and wellbeing [12]. At a time when political instability and competing investment demands place many global health priorities in jeopardy [13, 14], it is more important than ever to articulate the interlinked nature of child health. However, by situating child health within the complex framework of the SDGs and engaging with a wider range of stakeholders in all sectors, there is a real risk of inaction on critical child health aspects as responsibilities are shared more broadly.

Conclusion

Acknowledging that basic human rights are still unrealized for millions of children and adolescents globally, there is an urgency to reformulate and revitalize the narrative around global child and adolescent health. It is our ambition that the principles laid out here can initiate such a discussion. Placing children and adolescents firmly at the centre of the SDGs will ensure that they realise the right to survive and thrive throughout the life-course, as the true beneficiaries of the 2030 Agenda. Further, we believe that this will reenergize the overall 2030 Agenda.

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