Investments in health are critical to achieving the Sustainable Development Goals (SDGs) and to fulfilling the global commitments of Agenda 2030, in particular SDG 3: Ensure healthy lives and promote well-being for all at all ages. Health is a priority for the Swedish Government and Sida. Many global health challenges are linked to inequalities between men and women, most notably sexual and reproductive health and rights (SRHR). In 2020, Sida disbursed around SEK 2.6 billion for global, regional and country level programs, representing about 10 percent of the total support provided through Sida.

MAIN AREAS OF SUPPORT
Sweden has a leading role in global health with a particular focus on SRHR and gender equality. Sida’s health support focuses on increased awareness of and access to SRHR, equity of access to essential health services with a focus on women, adolescents and children, and resilient and sustainable national health systems and institutions (figure 1). Access to clean water, sanitation and hygiene is an integrated part in the health portfolio. Sida’s total support to SRHR, amounted to approximately SEK 1.5 billion or 60 percent of Sida’s development assistance for health in 2020. Geographically, the majority of Sida’s health support benefits countries in Africa (figure 2).

Sida works with partners that enable women and girls, men and boys, adolescents and Lesbian, Gay, Bisexual, Transgender, Intersex & Queer (LGBTIQ) to make informed decisions about their bodies. This includes support to prevent unintended pregnancies and diseases through access to information, products and services including access to safe and legal abortion. The support also includes efforts to address menstrual health. Further, Sida supports programs that aim to prevent; new HIV infection, female genital mutilation, gender based violence and to protect the rights of and service needs to LGBTIQ. Engaging boys and men to change social norms and behaviour is also a priority.

Sida’s support to essential health services includes programs in several countries in Africa (Democratic Republic of Congo, Somalia, South Sudan, Uganda, Zambia and Zimbabwe) and beyond. Efforts to increase the availability of educated midwives are critical to reducing maternal and new-born mortality.

Resilient and integrated health systems including safe water, sanitation and hygiene, are a prerequisite for equitable health. Sida supported programs include activities to strengthen national systems.

Within Sida’s research support, there are health programs with focus on; vaccines, diagnostics, health policy and systems research, and antimicrobial resistance.

Sida’s humanitarian assistance also include health interventions such as provision of health services to the most vulnerable and services to those having experienced gender based violence in humanitarian and conflict settings.

DEVELOPMENT IN THE WORLD
The global health situation has developed positively in recent decades; the number of women dying in childbirth decreased by 38 percent between 2000 and 2017 1 and child mortality halved, from 14 percent to 7 percent, in the two decades prior to 2020 2 . Fewer children were reported to have contracted HIV 3.

1 WHO (2021), Maternal Mortality https://www.who.int/news-room/fact-sheets/detail/maternal-mortality downloaded 31 March 2021
Results

However, 2020 was dominated by the COVID-19 pandemic, which continues to have an unprecedented global impact. The pandemic spares no country or sector and often disproportionately affects the most vulnerable and marginalized. The number of people falling into extreme poverty increased in 2020 for the first time over the last 25 years. It is yet to be seen to what extent the COVID pandemic will affect these and other positive health achievements. The pandemic has put an enormous pressure on health systems to care for those falling ill while maintaining the provision of other essential services. This has been particularly challenging in already resource poor settings.

A further challenge is an increased backlash against SRHR, in particular abortion, which has been noted in recent years. Progress made in Latin America to protect SRHR of women and girls is under threat by a growing anti-rights movement and such organisations have also intensified their efforts in Africa, pushing back against progressive reforms.

COVID-19

The COVID-19 pandemic has profoundly affected all of Sida’s support. Out of Sida’s total pandemic response (SEK 1.5 billion), SEK 360 million targeted health-specific efforts to curb the spread of the virus and to strengthen health systems (figure 1, other sectors). Sida provided additional funds for efforts to counter the negative effects of the pandemic, including to maintain and adapt sexual and reproductive health services, to improve water and sanitation and to mitigate the risks of increased gender-based violence due to the pandemic.

Sida and its partners have all had to make adjustments to on-going and planned activities and some of the work has had to be undertaken through new methods or through new partners.

SIDA’S SUPPORT

- Through support to the Africa Centres for Disease Control and Prevention (Africa CDC), a new partner, countries strengthened their capacity to monitor and address challenges related to COVID-19 and around 4,000 health workers received training in nine countries.
- Within the European Union (EU), Sida was instrumental in the integration of a strong SRHR perspective in the EU’s strategy for Sub-Saharan Africa. Sida further supported the Team Europe Initiative (TEI) to strengthen the African Union’s (AU) COVID-19 strategy.
- Population Services International (PSI) in collaboration with the Swedish Embassy in Zimbabwe, held a national campaign around menstrual health called “Let’s Talk”, broadcasted on local radio stations and online.
- The UN-Female Genital Mutilation (FGM) program contributed to 645,000 girls and women getting access to FGM prevention and care and to the engagement of over 2.8 million people in the work to end FGM.
- In Somalia, the midwife training programs developed online platforms and in Democratic Republic of Congo, 118 midwives in two provinces were able to graduate in 2020. In South Sudan, Sida’s support to UNFPA contributed to increasing the number of births supervised by skilled attendants from 43 percent in 2016/17 to 76 percent in 2019/20.
- The support to the organisation DKT 1.7 million unsafe abortions were prevented through access to medicinal abortion products in 17 countries in Africa.
- The importance of hygiene became even more evident in the pandemic. Sida’s partners reached over 530,000 people in 215 poor areas with hand-washing services in Bangladesh.
- In Palestine Sida’s partner Palestinian Medical Relief Society (PMRS) established digital services to support women exposed to gender based violence within the family during lockdown.
- Sida’s partner organisation ReAct contributed to awareness creation among thousands of children in Latin America and Kenya and strengthened their knowledge of antimicrobial resistance.