

Remarks to UNICEF Executive Board members by Dr Peter A. Singer, Special Advisor to WHO Director-General and Senior Lead of the SDG3 Global Action Plan Secretariat

I want to start by thanking UNICEF for its important collaboration to the Global Action Plan for Healthy Lives and Wellbeing for All (SDG3 GAP). We thank ED Fore for her contributions to the Principals group and welcome ED Russell. We thank Drs Aboubacar Kampo, Luwei Pearson and Lakshmi Balaji for co-leading the PHC accelerator and contributing to the agency focal points group. And we thank Robert McCouch for expertly guiding the Evaluability Assessment of GAP while at WHO.

The topic of global health architecture is important. It features highly in the agency's Boards and this year's G20 and G7 Presidency programmes. Thanks to Germany, Ghana and Norway, for initiating SDG3 GAP in 2018 — and to the many Member States who are now actively supporting it.

Why is SDG3 GAP important? Because the world is very far behind on the health-related Sustainable Development Goals. For example, WHO estimates that 1 billion more people will need UHC between 2018 and 2023 to stay on track. But the shortfall in this number was 730 m people before COVID and up to 840 m people, factoring in the impact of COVID.

The world needs to accelerate progress to reach the SDGs. One key way of accelerating is to ensure the multilateral agencies are not only effective individually but also collectively. It doesn't matter if the world's best violinist is playing if the orchestra is a cacophony.

Stronger collaboration for better health is exactly what the SDG3 GAP does. If it didn't exist, we would have to invent it because there is still room for improved collaboration. Although it's called the GLOBAL action plan, the action is at the country level where the struggle to achieve SDGs must be won.

In the two years of its existence, GAP has strengthened greatly the infrastructure for collaboration — both hard infrastructure (like accelerators) and soft (like relationships). You will hear much about this in our response to the extremely helpful evaluability assessment. This evaluability assessment is the first time the evaluation offices of the 13 agencies have worked all together and is therefore a case in point.

But the deeper lesson of GAP is the importance of incentives for collaboration in the global health architecture. These happen at Board meetings of the agencies when Member States demand stronger collaboration. They happen through joint funding of agencies to work together at the country level — as we have piloted in GAP. And they happen by monitoring how well the agencies are supporting national priorities and working together — as we are assessing in the GAP monitoring framework— and by evaluation — as in this assessment.

As Dr Tedros said at the launch of GAP: collaboration is the path, impact is the destination. The 2030 Agenda, supported by all member states of the UN, is THE international frame of reference for our commitment to sustainable development. We must be able to better consolidate separate actions and resources from multiple global health actors and scale-up

collaborations to have a chance of meeting these ambitious goals. Naturally, the lessons learned in SDG3 GAP are applicable to accelerating progress on other SDGs.

In summary, speaking both on behalf of the SDG3 GAP Secretariat and WHO, I want to thank UNICEF for your excellent collaboration in SDG3 GAP — and also thank you, the Member States, for your engagement on this important topic. My ask to Member States is to continue to incentivise the Global Health Architecture towards stronger collaboration, as you are doing today with this important meeting.