



# Science in the City

Building Participatory Urban Learning Community Hubs  
through Research and Activation





# GOOD HEALTH AND WELL-BEING: WHY IT MATTERS

Spending  
**\$1 billion**  
in immunization  
coverage  
can save  
**1 million**  
children's lives  
each year

# 3 GOOD HEALTH AND WELL-BEING



Ensuring healthy lives and promoting the well-being at all ages is essential to sustainable development.

Significant strides have been made in increasing life expectancy and reducing some of the common killers associated with child and maternal mortality, but working towards achieving the target of less than 70 maternal deaths per 100,000 live births by 2030 would require improvements in skilled delivery care.

Achieving the target of reducing premature deaths due to incommunicable diseases by 1/3 by the year 2030 would also require more efficient technologies for clean fuel use during cooking and education on the risks of tobacco.

Many more efforts are needed to fully eradicate a wide range of diseases and address many different persistent and emerging health issues. By focusing on providing more efficient funding of health systems, improved sanitation and hygiene, increased access to physicians and more tips on ways to reduce ambient pollution, significant progress can be made in helping to save the lives of millions.

## What's the goal here?

To ensure healthy lives and promote well-being for all at all ages.

## Why?

Ensuring healthy lives and promoting wellbeing for all at all ages is important to building prosperous societies. Major progress has been made in improving the health of millions of people. Maternal and child mortality rates have been reduced, life expectancy continues to increase globally, and the fight against some infectious diseases has made steady progress. However, in the case of other diseases such as malaria and tuberculosis, progress has slowed or stalled. At least half the world's population are still without access to essential health services.

In rich and poor countries alike, a health emergency can push people into bankruptcy or poverty. Concerted efforts are required to achieve universal health coverage and sustainable financing for health; address the growing burden of non-communicable diseases, tackle antimicrobial resistance and environmental factors contributing to ill health.



## What progress have we made so far?

Major progress has been made in several areas, including in child and maternal health as well as in addressing HIV/AIDS. Despite this progress, maternal mortality continues to affect women in low- and middle-income countries disproportionately. The total number of deaths of children under 5 years of age dropped from 9.8 million in 2000 to 5.4 million in 2017. Half of those deaths occurred in sub-Saharan Africa, and another 30 per cent in Southern Asia. Yet stark disparities persist across regions and countries



## How much will it cost to achieve these targets?

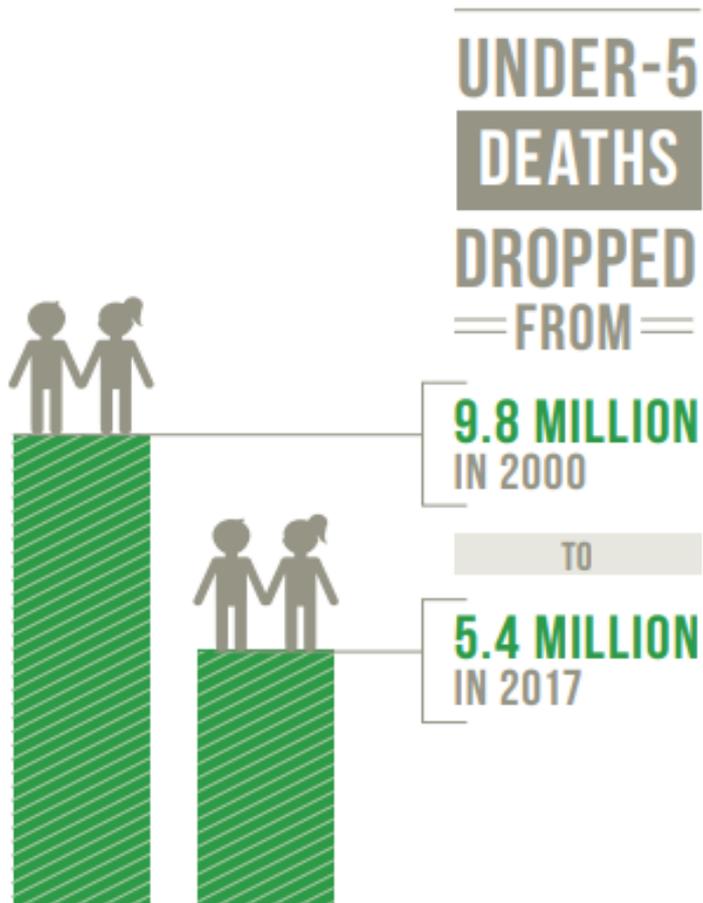
Ensuring healthy lives for all requires a strong commitment, but the benefits outweigh the cost. Healthy people are the foundation for healthy economies. For example, if we spent \$1 billion in expanding immunization coverage against influenza, pneumonia and other preventable diseases, we could save 1 million children's lives each year. In the past decade, improvements in health and health care led to a 24 per cent increase in income growth in some of the poorest countries. The cost of inaction is greater—millions of children will continue to die from preventable diseases, women will die in pregnancy and childbirth, and health care costs will continue to plunge millions of people into poverty. Noncommunicable diseases alone will cost low- and middle-income countries more than \$7 trillion in the next 15 years.



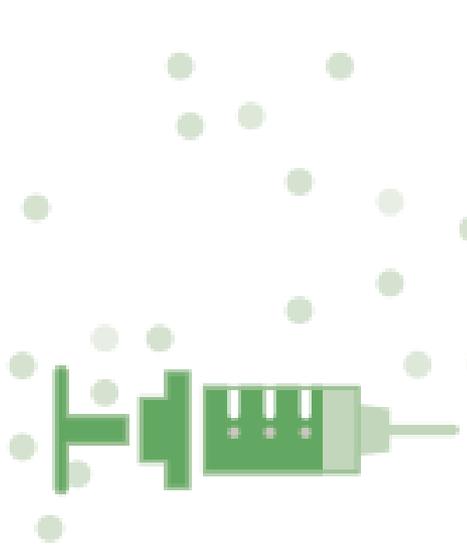
## What can I do to help?

You can start by promoting and protecting your own health and the health of those around you, by making well-informed choices, practicing safe sex and vaccinating your children. You can raise awareness in your community about the importance of good health, healthy lifestyles as well as people's right to quality health care services, especially for the most vulnerable such as women and children. You can also hold your government, local leaders and other decisionmakers accountable to their commitments to improve people's access to health and health care.



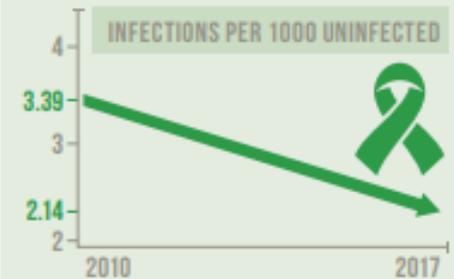


THE TUBERCULOSIS INCIDENCE RATE DECLINED BY **21%** BETWEEN 2000 AND 2017; NONETHELESS **10 MILLION** PEOPLE DEVELOPED TUBERCULOSIS IN 2017



**VACCINATIONS  
RESULTED IN AN  
80% DROP  
IN MEASLES DEATHS  
BETWEEN 2000 AND 2017**

**THE INCIDENCE OF HIV  
AMONG ADULTS  
15–49 YEARS OLD IN  
SUB-SAHARAN AFRICA  
DECLINED BY 37%  
BETWEEN 2010 AND 2017**



**THERE WERE AN ESTIMATED 3.5 MILLION MORE MALARIA CASES  
IN THE 10 HIGHEST-BURDEN AFRICAN COUNTRIES IN 2017 COMPARED TO 2016**



## Facts & Figures

### Child health

- 17,000 fewer children die each day than in 1990, but more than five million children still die before their fifth birthday each year.
- Since 2000, measles vaccines have averted nearly 15.6 million deaths.
- Despite determined global progress, an increasing proportion of child deaths are in Sub-Saharan Africa and Southern Asia. Four out of every five deaths of children under age five occur in these regions.
- Children born into poverty are almost twice as likely to die before the age of five as those from wealthier families.
- Children of educated mothers—even mothers with only primary schooling—are more likely to survive than children of mothers with no education.



## Facts & Figures

### Maternal health

- Maternal mortality has fallen by 37% since 2000.
- In Eastern Asia, Northern Africa and Southern Asia, maternal mortality has declined by around two-thirds.
- But maternal mortality ratio – the proportion of mothers that do not survive childbirth compared to those who do – in developing regions is still 14 times higher than in the developed regions.
- More women are receiving antenatal care. In developing regions, antenatal care increased from 65 per cent in 1990 to 83 per cent in 2012.
- Only half of women in developing regions receive the recommended amount of health care they need.
- Fewer teens are having children in most developing regions, but progress has slowed. The large increase in contraceptive use in the 1990s was not matched in the 2000s.
- The need for family planning is slowly being met for more women, but demand is increasing at a rapid pace.



## Facts & Figures

### HIV/AIDS, malaria and other diseases

- 36.9 million people globally were living with HIV in 2017.
- 21.7 million people were accessing antiretroviral therapy in 2017.
- 1.8 million people became newly infected with HIV in 2017.
- 940 000 people died from AIDS-related illnesses in 2017.
- 77.3 million people have become infected with HIV since the start of the epidemic.
- 35.4 million people have died from AIDS-related illnesses since the start of the epidemic.
- Tuberculosis remains the leading cause of death among people living with HIV, accounting for around one in three AIDS-related deaths.
- Globally, adolescent girls and young women face gender-based inequalities, exclusion, discrimination and violence, which put them at increased risk of acquiring HIV.
- HIV is the leading cause of death for women of reproductive age worldwide.
- AIDS is now the leading cause of death among adolescents (aged 10–19) in Africa and the second most common cause of death among adolescents globally.
- Over 6.2 million malaria deaths have been averted between 2000 and 2015, primarily of children under five years of age in sub-Saharan Africa. The global malaria incidence rate has fallen by an estimated 37 per cent and the mortality rates by 58 per cent

## Goal 3 Targets

- 3.1** By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.
- 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.
- 3.3** By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.
- 3.4** By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.
- 3.5** Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.
- 3.6** By 2020, halve the number of global deaths and injuries from road traffic accidents.
- 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 programmes.



## Goal 3 Targets

**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.

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

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

**3.B** Support the research and development of vaccines and medicines for the communicable and noncommunicable 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.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.D** Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.



## Links

[World Health Organization](#)

[WHO – Reducing Child Mortality](#)

[UN Children’s Fund](#)

[UN Development Programme](#)

[UNAIDS](#)

[Roll Back Malaria](#)

[UN Population Fund](#)

[UN Women](#)

[UN Water](#)

[Stop Tuberculosis Partnership](#)

[UNFPA HIV & AIDS](#)

[UNFPA Sexual & reproductive health](#)

[UNFPA Obstetric fistula](#)

[UNFPA Midwifery](#)

[UNFPA Maternal health](#)





To find out more about Goal #3 and the other Sustainable Development Goals, visit:

<http://www.un.org/sustainabledevelopment>

