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IDRC GRANT / SUBVENTION DU CRDI : - BUILDING A CONSORTIUM TO ADDRESS COMPLEX CHALLENGES INFLUENCING HUMAN HEALTH TO IMPROVE PROGRESS TOWARDS HEALTH AND HEALTH-RELATED SDGS

**Driving Inter-sectoral Strategies to Progress on Health and Health-related
Sustainable Development Goals (HHSDGs):
Building a Consortium to address Climate Change, Health, and Complex
Challenges (CHOICE)**

Grant No.: 109839-001

**Annual Update for the
First Technical Progress Report
(February 1st, 2022 – January 31st, 2023)**

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Project:	Driving Inter-sectoral Strategies to Progress on Health and Health-related Sustainable Development Goals (HHSDGs): Building a Consortium to address Climate Change, Health, and Complex Challenges (CHOICE)
Total Project Budget:	CAD \$2,000,0000 (IDRC: CAD \$1,000,000; AKFC: CAD \$600,000; AKU: CAD \$400,000)
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¹ Tanzania has replaced Madagascar as a target country following approval from IDRC. Further details are presented in the report.

This technical progress report highlights the steps undertaken by the Aga Khan University (AKU) and the Hospital for Sick Children (SickKids) in the first year of implementation of “Driving Inter-sectoral Strategies to Progress on Health and Health-related Sustainable Development Goals (HHSDGs): Building a Consortium to address Climate Change, Health, and Complex Challenges (CHOICE)”, between February 1st, 2022, and January 31st, 2023. The synthesis provides key programmatic highlights, followed by an overview of the research problem, progress from the first year of implementation, challenges and programmatic adaptations, cross-cutting themes, and financial progress.

Synthesis

“Building a Consortium to Address Complex Challenges Influencing Human Health to improve progress towards health and health-related SDGs (CHOICE) is a project being implemented by AKU and SickKids with contributions from IDRC, AKFC, and AKU. The conceptual objective of the project is to improve health and wellbeing and address inequality through ensuring the implementation of HHSDGs using the expertise of multisectoral Think Tanks and regional consortia to provide cross-cutting solutions. To achieve this the project works towards the following empirical objectives: (1) Create or activate in-country multisectoral Think Tanks to facilitate work towards achieving the HHSDGs; (2) Conduct in-depth five country case studies focusing on supporting local cross-cutting solutions for improved health, including mental health, climate change, nutrition, food systems, and gender equity; and (3) Advocate and create a framework to track the progress towards the HHSDGs with government and civil society stakeholders. The project is being implemented in five countries (Kenya, Ghana, Tanzania, Pakistan, and Kyrgyz Republic)². SickKids will lead implementation in Kyrgyz Republic and Ghana. AKU will lead implementation in Kenya, Tanzania, and Pakistan.

During the reporting period, the CHOICE team began compiling a list of Global Guidance Group members to provide buy-in and help refine the project scope. The team established the CHOICE think tank in Pakistan. We identified project partners to lead national activities in Kenya, Ghana, and Kyrgyzstan, and are in the process of identifying a lead in Tanzania, after which we will establish think tanks in these countries. A global systematic review of relevant literature is ongoing. The project team began conducting a situational analysis and review of relevant policies, programs, and data to kickstart research in Pakistan. Situational analyses and reviews will also be commenced in the other project countries once think tanks have been established there. Advocacy, monitoring, impact analysis and dissemination of findings will begin in future reporting periods.

Research Problem & Focus

Progress towards the health and health-related sustainable development goals (HHSDGs) has been inconsistent. At present, many countries are not on target to meet the HHSDGs.³ Advancements towards the HHSDGs have been hampered by mounting risks associated with population growth, urbanization, COVID-19, gender, social and economic inequality, and climate change.⁴ The nexus of COVID-19 associated

² Afghanistan and Madagascar were originally two of the five project countries. Afghanistan was removed due to the change in the country's political setup in 2021. Madagascar was replaced by Tanzania in January 2023 due to the lack of availability of a local research partner meeting project requirements. All changes in project countries were approved by IDRC.

³ Bhutta ZA, Siddiqi S, Aftab W, et al. What will it take to implement health and health-related sustainable development goals? *BMJ Global Health* 2020;5(9):e002963.

⁴ Gulseven O, Al Harmoodi F, Al Falasi M, et al. How the COVID-19 pandemic will affect the UN sustainable development goals? Available at SSRN 3592933 2020

economic disruption and rapid climate change has compounded challenges for countries in the recovery process and is a significant focus on COP26, the global climate change conference in Glasgow (Oct 31-Nov 12, 2021).

Climate change threatens to jeopardize improvements in public health globally.⁵ A changing climate may have economic impacts and require the diversion of development funds and human resources to deal with climate shocks, natural disasters, and changing weather patterns.⁶ Moreover, climate-related disruption of food systems can worsen nutrition and health outcomes.⁷ Estimates suggest that climate change-related temperature changes and climate shocks are responsible for significant crop yield reductions from 1.8% to 5.6% between 1981 and 2019.⁸ Climate change can also lead to increased vector-borne disease transmission such as malaria and dengue.⁹ It is also widely recognized that climate change can disproportionately impact women, and ignoring gender dimensions can hamper progress. The São Paulo Declaration on Planetary Health is a global call to action from the planetary health community charting a path forward to support a more equitable and resilient post-pandemic world. The Declaration's cross-cutting recommendations were drafted during the 2021 Planetary Health Annual Meeting and Festival. The Lancet Countdown, which is a collaboration between 24 academic institutions and intergovernmental organizations, also suggests that impacts of climate change are projected to worsen with time and would have delirious effects on health, including altered growing vectorial capacity to transmit more infections.

Climate change is one of the many major threats obstructing HHSDG progress. Devastating impacts are evident from a wide range of additional complex challenges: entrenched societal inequities, demographic problems; disease outbreaks; war and civil unrest; economic hardship, and other factors driving involuntary migration – just to name a few. Addressing the HHSDGs in light of these multidimensional threats necessitates a collaborative strategy. All stakeholders, including funders and governments, must work together to develop coordinated action plans consistent with each country's National Adaptation Plans and address implementation challenges. In so doing, these complex challenges can be managed more effectively and more efficiently – an essential consideration in settings where financial resources and human capital are constrained.

Project Implementation and Management

Progress Towards Milestones

The project works towards three empirical objectives and is implemented in three stages as presented in Table 1. This report presents progress towards milestones under Stages 1 and 2 which were planned during the reporting period.

Table 1

Empirical Objectives

⁵ Watts N, Amann M, Arnell N, et al. The 2020 report of The Lancet Countdown on health and climate change: responding to converging crises. The Lancet 2020

⁶ Bhutta ZA, Siddiqi S, Aftab W, et al. What will it take to implement health and health-related sustainable development goals? BMJ Global Health 2020;5(9):e002963.

⁷ Ibid.

⁸ Gulseven O, Al Harmoodi F, Al Falasi M, et al. How the COVID-19 pandemic will affect the UN sustainable development goals? Available at SSRN 3592933 2020

⁹ Ibid.

<p>(1) Create or activate in-country multisectoral Think Tanks to facilitate work towards achieving the HHSDGs.</p> <p>(2) Conduct in-depth five country case studies focusing on supporting local cross-cutting solutions for improved health, including mental health, climate change, nutrition, food systems, and gender equity.</p> <p>(3) Advocate and create a framework to track the progress towards the HHSDGs with government and civil society stakeholders.</p>
<p>Stages</p>
<p>Stage 1: Inception Phase & Establishment of Consortia (first 9 months), Objective 1</p> <ul style="list-style-type: none"> • Global online workshops with key stakeholders (3G) including academic researchers, NGOs, UN agencies, think tanks, and other implementing agencies to obtain buy-in and refine the project's scope • Selection of focus countries through expert consultation • Identification of suitable in-country partner to lead national activities • Establishment of in-country multisectoral groups (Think Tanks) • Update the systematic review
<p>Stage 2: Concurrent Research, Advocacy, and Monitoring (months 9-36), Objectives 2 & 3</p> <ul style="list-style-type: none"> • Consortia will lead multidisciplinary analysis and implementation research focusing on bottlenecks to accelerate HHSDG progress • Rapid situational analysis, gap mapping, gender analysis, and policy review through a series of consultative meetings with key stakeholders and in-country Think Tanks • The research will contribute to the development of strategies for integrated implementation and effective multisectoral action towards the HHSDGs • Advocacy activities and engagement of CSOs and government stakeholders to create partnerships and translate research into action • Continuous monitoring and accountability activities and identification of government stewards
<p>Stage 3: Final Impact Analysis and Dissemination of Findings (months 24-36), Objectives 2 & 3</p> <ul style="list-style-type: none"> • Final impact analysis • Publications • Global, regional, and in-country dissemination meetings to share findings and evidence-based practices

Empirical Objective 1: Create or activate in-country multisectoral Think Tanks to facilitate work towards achieving the HHSDGs.

1a. Global Guidance Group (3G)

The CHOICE team is currently compiling a list of 3G members. This is expected to be finalized once all country think tanks are finalized.

1b. Selection of countries, identification of in-country partners, and establishing think tanks

Pakistan

The Pakistan think tank has been established. It comprises a diverse set of members representing different groups, including academia, civil society, social activists, government, and development agencies. The members are as follows:

- Dr Abid Suleri (Executive Director, Sustainable Development Policy Institute)
- Dr Nausheen H Anwar (Professor and Network Director, Karachi Urban Lab, Institute of Business Administration (IBA), Karachi)
- Ms. Maha Qasim (Consultant, Environment and Social Impact)
- Dr Kauser A Malik (Dean of Postgraduate Studies, Forman Christian College)
- Dr Naseer Memon (Consultant on Disasters and Development, World Bank)
- Mr. Ali T Sheikh (Principal Advisor, Planning Commission of Pakistan)
- Dr Zulfiqar Durrani (Provincial Representative and Head of Office, UNDP)
- Ms. Tabassum Adnan (Human Rights Activist, Founder and Chair, Khwendo Jirga)
- Ms. Sara Hayat (Consultant & Lawyer, Climate Change and Policy)
- Ms. Hadiqa Bashir (UN SDG youth leader and humanitarian)

We have had two meetings with the group, the latest of which was on 16th Dec 2022 in Karachi. In the meetings, it was decided that:

- SDG progress should be studied at federal as well as provincial levels.
- It is imperative that the impacts of climate change on health be looked at from multiple perspectives, including (but not limited to) food security and gender.
- Climate change modeling would be developed through a review of credible modeling groups and models for Pakistan and the region. The group will review and consult with experts in this area.
- Gender and climate change need to be looked at critically.
- Regarding policy analysis, it was decided that the group would explore studying budget allocations and expenditures on activities related to HSGDs.

Kenya

The project team has identified the in-country lead - Lukoye Atwoli, Dean of AKU, East Africa. We had an in-depth meeting in Nairobi on 27th January 2023 and are currently in negotiations on finalizing the think tank and contract modalities.

Tanzania

After approval from AKFC and IDRC, the CHOICE team replaced Madagascar with Tanzania as a project country (end of January 2023) as we were not able to find suitable academic partners in Madagascar after repeated attempts. We are currently in consultations through our connections in East Africa to find a suitable lead for this newly acquired country of interest.

Ghana

Preliminary meetings with the lead team in Ghana at the University of Cape Coast were held in fall 2022. A contract with the University of Cape Coast as the country research partner has now been signed. An initial kick-off meeting with the University of Cape Coast is being set for end of February or March 2023.

Kyrgyzstan

A contract with the University of Central Asia (UCA) as the country research partner has now been signed. An initial kick-off meeting with UCA is being set for end of February or March 2023.

1c. Global Systematic Review

We updated the search of the previous review. A total of 9,068 papers were found using selected search parameters. In particular:

- Of the 6,165 peer reviewed papers found, 38 papers were included, and extraction is complete.
- Of the 2,903 grey literature papers found, title and abstract screening has been completed and the team is currently undertaking full text screening.

All data from this review is estimated to be extracted by the end of March 2023. The resulting paper is estimated to be complete by May 2023.

Empirical Objective 2: Conduct in-depth five country case studies focusing on supporting local cross-cutting solutions for improved health, including mental health, climate change, nutrition, food systems, and gender equity.

2a. Analysis, Review and Research

Pakistan

The policy and program review has started in Pakistan. We have completed searching through peer-reviewed databases and are currently searching for grey literature. The project team is studying various policy review frameworks and deliberating on which framework will be used in the final analysis that will be performed.

The CHOICE team has identified the variables and databases for the climatic data for Pakistan and extracted data on temperature, precipitation, dew point temperature for 9*9 km: 8000 geospatial coordinates within Pakistan for the years 1981-2022. We have also organized health data from the Pakistan Demographic and Health Survey (PDHS) and Multiple Indicator Cluster Surveys (MICS) with climate data for each district. The team plans to perform an analysis of this data and are finalizing the analytical strategy with the help of experts in this domain.

Kenya, Tanzania, Ghana, and Kyrgyzstan

A search strategy has been set to guide the country-specific situational analyses, gap mapping, gender analyses and policy reviews. These analyses and reviews will be executed in partnership with the think tanks in each country, once established. The impacts of climate change and mental health are being considered as a key topic for the think tanks to explore, in addition to country-specific key implementation strategies linked to the HHSDGs. We shall embark on the country specific analyses and reviews for these countries in the next reporting period.

Empirical Objective 3: Advocate and create a framework to track the progress towards the HHSDGs with government and civil society stakeholders.

3a. Advocacy and Monitoring

CHOICE will advocate for activities and engagement with stakeholders to create partnerships and translate research into action after work under the first two empirical objectives is sufficiently advanced. We will also undertake continuous monitoring and accountability activities and identification of government stewards as project activities advance.

3b. Impact Analysis and Dissemination of Findings

The following final outputs will be produced at the end of the project:

- Final impact analysis
- Publications
- Global, regional, and in-country dissemination meetings to share findings and evidence-based practices

Challenges and Programmatic Adaptations

There was a delay in the initial contract finalization between the project implementing partners. The contracts with AKU and SickKids were signed at the beginning of July 2022. Hence, activity implementation was delayed by five months.

In Madagascar, the team has made considerable effort to connect with several researchers and groups as potential academic partners, and unfortunately concluded that a stable partner with sufficient standing or work in the area of the HHSDGs is not currently available. Accordingly, a request was made and

approved by IDRC to replace Madagascar with Tanzania based on consultation with colleagues on the ground indicating that opportunities to identify potential academic partners there are more promising.

Project Management of Day-to-Day Operations

The hirings of staff are complete at both SickKids and AKU and the teams will undertake regular meetings to facilitate smooth coordination and implementation.

The AKFC project lead has changed multiple times during the reporting period. However, for each new focal point a handover was facilitated to help ease the transition.

Future Planning (Year 2)

The CHOICE team will work to finalize the following activities in year 2:

- Completing the global systematic review
- Finalization of all country think tanks
- Formation of the 3G
- Convening a 3G meeting
- Completing the country specific situational analyses and reviews, including of relevant policies and programs
- Exploring and finalizing plans for quantitative analysis

Impact

Given that the project is still in early stages, project impact cannot yet be fully measured. The final impact analysis will be conducted by IGHD-AKU and CGCH in Year 3. The analysis will capture the impact of the project-driven program and policy changes on progress towards the HHSDGs and climate change targets. The findings from this analysis will be shared in global and regional dissemination meetings and published in key journals.

Recommendations

At this early stage in the project, AKFC, AKU and SickKids have no specific recommendations to make to IDRC with regards to project administration.