

Is COVID-19 Threatening the Success of the Sustainable Development Goals in Spain?

Series | COVID-19 & response strategy

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“This crisis is taking us further away from achieving the Sustainable Development Goals.”

Antonio Guterres, United Nations Secretary General

[This document is a part of a series of discussion notes addressing fundamental questions about the COVID-19 crisis and response strategies. These documents are based on the best scientific information available and may be updated as new information comes to light.]

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When the international community established the roadmap for progress and sustainability between 2015 and 2030 with the Sustainable Development Goals (SDG), the possibility of a pandemic was not part of the plan. The health, economic and social impacts of COVID-19 have been so devastating that any plan developed before the crisis will now have to be recalibrated. Paradoxically, the goals and targets of the **2030 Agenda** are closely linked to **the prevention and control of an event like the current coronavirus crisis**. This means that the logic of the Agenda has been reinforced for two reasons: first because of its capacity to reduce the risk of such a pandemic occurring; and second because of its value in terms of mounting an effective, equitable and sustainable response to the consequences of a pandemic.

Health is one of the essential components of a safe and dignified life and it is the sole focus of the third goal of the 2030 Agenda. The aim of SDG3 (health and well-being) is to ensure healthy lives and promote well-being for all. SDG3 has **13 targets**, which range from those inherited from the Millennium Development Goals—particularly related to child mortality, maternal health and the fight against the major infectious diseases associated with poverty—to ambitious new public health targets that include achieving universal health coverage, reducing the mortality and morbidity associated with road traffic accidents, smoking and alcohol abuse; and achieving universal access to sexual and reproductive health care services and programmes.

Buried at the end of the list of targets—almost like a last minute addition—we find

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target 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”. Viewed from the perspective of the more than 30 million cases, almost 1 million deaths, and the global economic and social collapse caused by the SARS-CoV-2 virus, the question must inevitably be posed as to whether sufficient attention was paid to the threats referred to in this target.

Five years after its creation, the 2030 Agenda has been derailed by a pandemic that will have major repercussions on all the SDG3 targets and will also affect the

economic, social, environmental and institutional factors that determine the health, well-being and development of the world’s people. To understand the scope of COVID-19 and the effect it will have on the health targets, it is essential to understand the **complex interactions between the SDGs**. In this brief, we offer some reflections on this subject based on the case of Spain, starting with a **description of SDG3** and its place in the Agenda ●

1. SDG3+: Spain and Health in All the Sustainable Development Goals

“Various targets in other goals also affect health, for example those dealing with gender equality, education, environmental pollution, income, and the quality of employment.”

Our health as human beings depends on our **living conditions**, on factors such as education, gender, personal relationships, working conditions, the natural environment that surrounds us, our income, and the material conditions of our lives. Each one of these variables affects the individual’s current and future health, and this **interdependency** reveals something essential about the SDGs: they should not be seen as watertight silos but rather as an interconnected, multisectoral and interdisciplinary whole. Many of the targets in other goals also affect health, for example those dealing with gender equality, education, environmental pollution, income, and the quality of employment.

At **ISGlobal**, in order to characterise this integrated approach encompassing the relationship between SDG3 and the other SDGs, **we have coined the concept of SDG3+** as a way of applying the logic of the Health in All Policies (HiAP) approach to the 2030 Agenda¹.

What does this mean in practice? In 2019, ISGlobal brought together a group of about **80 health experts** with a variety of profiles and from different settings (health care administration, research centres, non-government organisations, among others) and charged them with the task of identifying **all of the targets of the 17 SDGs that might have an impact on health in Spain**. The targets they selected were then grouped into **six priority dimensions** to highlight the areas in which the authorities should concentrate their efforts to improve the health and well-being of the country’s population. A summary of the conclusions of this working group is shown in *Table 1* ●

¹ Ramírez-Rubio et al. *ODS3+: Del concepto a la implementación de la “salud en todas las políticas” en España*. Revista 17 (2020; in press).

Table 1. Variables That Determine Which 2030 Agenda Targets Affect Health: The Case of Spain.

Justification	Situation in Spain	SDG targets
GENDER		
A person's daily habits, working conditions and social role are often determined by gender (the division of labour, care roles, etc.). Consequently, health risks and their determinants are not the same for men and women. Women tend to have poorer health.	Equality in the workplace is far from being achieved: women occupy a considerably smaller proportion of leadership positions and, on the whole, are paid about 12% less than men. Furthermore, about 167,000 reports of gender-based violence were recorded in Spain in 2018.	<u>5.2</u> <u>5.5</u>
SOCIAL DETERMINANTS		
Our health is shaped by our circumstances, by the places where we are born, grow up, live, work and grow old. These circumstances are, in turn, shaped by structural, political, social and economic factors.	The indicators identify populations in particularly vulnerable situations, such as the 10% of older people living in poverty and the 20% of young people who are unemployed or have no education or training. There is also evidence of significant inequality in the distribution of the country's wealth.	<u>1.2</u> <u>1.3</u> <u>8.5</u> <u>8.8</u> <u>10.2</u> <u>10.3</u> <u>16.2</u>
ENVIRONMENTAL DETERMINANTS AND CLIMATE CHANGE		
Environmental pollution and the effects of climate change generate disease and have a negative impact on the well-being of the population through their direct impact on key health factors, such as air quality, ambient temperatures, etc.	Approximately 38,000 premature deaths were attributed to exposure to air pollution in 2015.	<u>3.9</u> <u>6.3</u> <u>11.6</u> <u>11.b</u> <u>12.4</u> <u>13.2</u>
NONCOMMUNICABLE DISEASES AND MENTAL HEALTH		
As a result of demographic ageing, the concentration of populations in cities and improved control of infectious diseases, the great health challenges now facing our country are noncommunicable diseases (such as cancer and diabetes) and mental health, especially given the close relationship between these conditions and our lifestyle choices.	About 25% of the Spanish adult population is obese, and 25% of children between 2 and 4 years old are overweight. Almost 30% of the population report levels of alcohol consumption that constitute a health risk and the percentage of habitual smokers (people who smoke every day) is around 20%.	<u>3.4</u> <u>3.5</u> <u>3.a</u>
SOCIAL SUPPORT AND HEALTH SYSTEM		
The health of a given population is determined by the way health services and social support systems are organised and delivered.	Despite the fact that the coverage of essential health services is very high in Spain, certain groups, such as migrant populations for example, have no access to these services or can only access them with difficulty.	<u>3.8</u> <u>3.c</u>
INTERNATIONAL COOPERATION AND THE GLOBAL DIMENSION OF HEALTH		
In a highly interconnected world, health and well-being are negatively affected by international conflicts and global phenomena such as climate change and migration.	Spain is still a long way from achieving the target of 0.7% of Gross National Income (GNI) for official development assistance (ODA), with a current ODA of 0.2% of GNI.	<u>17.2</u> <u>17.14</u>

2. The Impact of COVID-19 on the Health Goals of the 2030 Agenda

“The health and economic crisis caused by SARS-CoV-2 is not a static picture with an inevitable outcome. States, organisations, the scientific community and civil society can all take steps to mitigate the effects of this pandemic and prevent, at least in part, the occurrence of similar events in the future.”

The COVID-19 pandemic may turn out to be a **turning point** for the 2030 Agenda. According to a recent article in *Nature*: “Two-thirds of the 169 targets are either under threat as a result of this pandemic, or not well-placed to mitigate its impacts”². In the case of health, the authors are very clear that **the coronavirus could be disastrous for five of the thirteen SDG3 targets**: reducing infant mortality (3.2), curbing communicable diseases (3.3), reducing premature mortality from non-communicable diseases (3.4), achieving universal health coverage (3.8), and supporting research for diseases that primarily affect developing countries (3.b). However, they also point out that **greater progress towards achieving certain SDG3 targets** would have helped to counteract the effects of the pandemic. These include targets 3.4, 3.8, and 3.b mentioned above, in addition to mortality associated with environmental factors (3.9), increased funding for health care systems and personnel (3.c), and, of course, strengthening national capacities related to the reduction and prevention of risks (3.d)³.

In fact, **it is possible to go one step further**. The health and economic crisis caused by SARS-CoV-2 is not an unchanging picture with an inevitable outcome. States, organisations, the scientific community and civil society can all take steps to mitigate the effects of this pandemic and prevent, at least in part, the occurrence of similar events in the future. Their actions could also increase the risk of such events.

Using the SDG3+ concept as a framework for analysis, the following were identified as the **possible areas in which the COVID-19 pandemic could negatively affect** Spain’s capacity to achieve the

health-related SDG (including our international responsibility):

a) The direct and indirect impact of COVID-19 on health targets:

- Increased mortality and morbidity associated with COVID-19 and its chronic health consequences.
- Maximum stress on health systems and infrastructures: physical and mental exhaustion of personnel; impairment of health care and prevention systems due to the concentration of resources on the pandemic response; and an increase in the financial needs of the system.
- Neglect of other health priorities, including diseases with a high burden of morbidity and mortality; worsening of mental health indicators such as anxiety and depression.
- Decline in public confidence in science and health institutions as a result of the infodemic⁴.
- Impact on the older adult population, including a rise in the prevalence of chronic diseases, a decrease in physical mobility due to restrictions, and an overall decline in mental health⁵.

b) Indirect impacts due to the socio-economic crisis and the response strategy:

- Historic decline in GDP; accelerated increase in unemployment and social vulnerability; fiscal tension arising from the need for extraordinary social protection measures.
- Risk of a return to traditional models of growth and mobility that represent a threat to the Global Climate Action Agenda; risk of the implementation of growth models that fail to address the need to reduce social inequalities.
- A mixed impact on development funding taking the form of a short-term in-

² Naidoo R, Fisher B. *Reset Sustainable Development Goals for a pandemic world*. *Nature*. 6 July 2020.

³ *Supplementary information to accompany a Comment published in Nature 583, 198–201 (2020)*.

⁴ Chaccour C, Vilasanjuan R. *Infodemic: How has the epidemic of misinformation affected the response to COVID-19?* ISGlobal. 22 September 2020.

⁵ Delgado-Ortiz L, Cárdenas-Fuentes G, Goldberg X, Garcia-Aymerich J. *What are the health priorities of older adults during a pandemic?* ISGlobal. 7 August 2020.

crease (especially in global health and the COVID-19 response) followed by a medium-to-long-term reduction in funding due to the subsequent recession.

- Food insecurity and associated vulnerabilities: increased food needs; reduced food quality during recession.
- Gender-specific impact: greater exposure of women to COVID-19 in their work as health professionals; increased role of women in care; rise in sexual, physical and psychological violence; gender imbalances in the leadership of the pandemic response⁶.
- Impact on vulnerable social groups: higher morbidity and mortality in older adults because of the demands of pandemic management (interruptions in screening programs and a lack of care for patients with non-urgent chronic diseases, for example); impact of lockdowns and school closures on the psychosocial development of children; decline in the quality of care for people in situations of social exclusion (homeless persons, undocumented migrants and the prison population, among others).

c) Opportunities arising from COVID-19:

- Health in All Policies. Revaluation of health as a global public good and a fundamental variable in all policies related to the pandemic: safety, protection and prevention.
- Strengthening of public health systems, including primary care services and epidemiological surveillance of morbidity, mortality and health determinants (biological, social and structural).
- Revaluation of the welfare state and public services as key components in the effective management of crises such as the current pandemic.
- Spain's contribution to the international effort to develop vaccines, treatments and diagnostic tools.
- Boosting research and reinforcing the importance of its role in decision making and public debate.

- Reform of the system for innovation and access to medicines: providing an opportunity to reconsider the status quo and to improve the system through the use of incentives, both negative (reassessing the inflexibility of the intellectual property system) and positive (a public procurement system, for example).

- Immigrant workers in the health and care sector: social recognition and a debate on the legalisation of these workers on the basis of the essential skills they contribute and the epidemiological risks associated with their undocumented status.

- Establishing the link between the health of humans and that of their planet⁷. Reinforcing research and policy development relating to the impact of environmental degradation on human health.

- Increase in health care in urban areas: the central role of cities in the spread of the pandemic and as key players in the strategy for dealing with the crisis.

- Private sector innovation in response to situations like that caused by the COVID-19 pandemic in terms of both prevention and management (for example, information systems, artificial intelligence and community interventions)⁸

- Opportunities for the EU to develop a green and socially responsible strategy for ending the crisis with its example of the European Green Deal and the reconstruction and recovery fund.


















- Implementation of social protection measures, such as the government funded furloughs (ERTEs in Spain), income support for the self-employed, or a moratorium on rental payments ●

⁶ Fernández-Luis S, Marbán E, Pajin L, Saavedra B, Soto SM. [What Do We Know About the Impact of Gender on the COVID-19 Pandemic?](#) ISGlobal. 1 July 2020.

⁷ [Facts showing why our health depends on the environment.](#) ISGlobal. 5 July 2020.

⁸ Global Compact: "Private sector innovation can contribute significantly to the immediate and short-term pandemic response and to long-term resilience. In particular, big data and artificial intelligence must be harnessed to create digital public goods in the form of actionable realtime and predictive insights." United Nations. March 2020.

Figure 1. Impacts of COVID-19 on the Sustainable Development Goals in the Short Term.

SDG 1	Sudden poverty, growing inequalities	
SDG 2	Reductions in food supply, less income, more food losses, no school meals	
SDG 3	Higher mortality because of COVID-19, lack of capacity to cover other needs due to the collapse of health systems, deterioration in mental health due to lockdown measures	
SDG 4	Partial or total school closures, less human capital	
SDG 5	Disproportionate impact on women's employment, increase in domestic abuse due to lockdown measures	
SDG 6	Limitations on access to clean water and consequent difficulty maintaining proper hygiene	
SDG 7	Potentially reduced incentive to promote renewable energy sources because of reductions in the cost of traditional energy sources	
SDG 8	Global economic crisis, disruption of imports, mass unemployment, bankruptcies, lack of tourism	
SDG 9	Decline in demand for industrial products, need to nationalise some industries, bankruptcy of other industries, focus of research capacities on the search for a vaccine, greater use of technology	
SDG 10	Health and economic capacity of vulnerable groups disproportionately affected, particularly in unsafe countries and among refugees and migrants; loss of low-paid and low-performance occupations	
SDG 11	Increase in urban poverty, disruption of public transportation, less access to green areas, less pollution in the short term	
SDG 12	Reduction in consumption and use of natural resources, less regulation by demand, increased use of plastic	
SDG 13	Short-term reductions in emissions, lower consumption of renewable energy due to declines in the price of fossil fuels	
SDG 14	Short-term reduction in threats to marine biodiversity due to the disruption of economic activities and lowered consumption	
SDG 15	Short-term reduction in threats to biodiversity, pressure to accelerate strategies designed to safeguard biodiversity	
SDG 16	Increased pressure on government in relation to healthcare issues, pressure to improve access to healthcare, greater public debt, disruption of parliamentary debate and legislative processes, suspension of freedom of information and transparency	
SDG 17	Reduced aid to poorer countries, less funding due to closed borders, no imports and exports or debt	

 High impact

 Moderate impact

 Impact Unknown

Source: Sustainable Development Solutions Network (SDSN), *SDG Index 2020*.

3. Conclusions and Recommendations

“The greater effort and investment we put into achieving the SDGs, the more resilient our societies will be and the more prepared we will be to respond to the challenges of our time.”

The 2030 **Agenda** is not a privilege that we allow ourselves when things are going well, but rather a **perfectible but realistic road map** to address the huge risks associated with an unsustainable, inequitable and unjust model of progress. The SDGs are both **the answer to many of our current challenges** and a useful tool **for preventing future problems**. Moreover, the greater effort and investment we put into achieving the SDGs, the more resilient our societies will be and the more prepared we will be to respond to the challenges of our time.

The COVID-19 crisis clearly illustrates the value of the 2030 Agenda. Although it would have been hard to prevent the virus

at its origin or to deal effectively with the initial waves of infection, the achievement of many of the SDG targets would have helped to prevent, mitigate and ultimately eliminate the risks of a pandemic like the one we are currently experiencing. In fact, the efforts of the international community to discover scientific solutions, protect the most vulnerable populations and countries, and build new models of governance is a de facto revindication of the logic that underpins the Agenda. In other words, the COVID-19 pandemic is a **powerful reason to push harder with the 2030 Agenda** rather than the converse. On the *day after* the pandemic, it will be crucial to reassess some of the basic principles of our model of development and social progress.

Box 1. When does the Covid-19 Crisis Provide an Opportunity for a Change of Direction.

Like a judo hold, where an **opponent’s strength is used against them**, the impact of the coronavirus on the SDG must stimulate a response based on the 2030 Agenda itself. This is the approach that has been adopted by international organisations like the United Nation’s Department of Economic and Social Affairs⁹. It is also the approach chosen by other initiatives, such as the Spanish *El Día Después* (EDD; *The Day After*), a platform focused on furthering structural transformations through improbable alliances between academia, the private sector, civil society and government bodies.

The following are just a few examples of projects that have emerged from this type of initiative:

- **Pact on Madrid’s public transport demand curve and EDD.** This is a pact on the use of public transport between local government (City Council and Autonomous Community) in Madrid on one hand and business associations, trade unions, universities and civil society on the other. The goal is to achieve a commitment by all the stakeholders that will foster sustainable mobility by coordinating teleworking and flexible working hours to prevent the saturation of public transport capacity.
- **Pact for the reconstruction of Barcelona.** This is a decalogue drawn up by Barcelona City Council with the support of civil society organisations and institutions. The primary aim is to strengthen the city’s productive and commercial sectors and activity, boost community action, reinforce the health system, promote sustainable mobility and guarantee access to sport.
- **Initiatives**, such as the United Nations’ COVID-19 response, that aim to show how the COVID-19 pandemic provides an opportunity for the human family to act in solidarity and turn the crisis into an impetus to achieve the SDGs.

⁹ Shared responsibility, global solidarity: Responding to the socio-economic impacts of COVID-19. United Nations. March 2020.

In the sphere of health, the strength of the SDG3+ concept resides in its capacity to promote a Health in All Policies approach in all sectors and across all the interventions of government bodies, corporations and civil society actors. Spain now has the opportunity to incorporate this approach into the SDG strategy that will be drawn up over the coming months (which will inevitably have to take into account the post-COVID-19 context). Specifically, ISGlobal proposes that **inclusion of the following components in that strategy be considered:**

- **Strengthening public health and primary care systems and structures**, with special attention to epidemiological surveillance systems, social determinants of health, and multisectoral strategies designed to address emerging and re-emerging infectious diseases.
- **Establishing the standards, resources, and transparency required by information** to facilitate efficient coordination between health districts and to ensure that these systems are monitored and assessed by experts and observers.
- **Taking the opportunity afforded by reconstruction and regeneration plans funded by public institutions** (European and national) to implement this transformation. European funds to combat the pandemic should not be viewed only as a means to repair the damage caused by the crisis—some of which is irreparable—but also as an opportunity to lay the groundwork for new models that would enable our society to emerge from the crisis with better social, environmental and economic conditions. All projects approved within the framework of the national recovery plan must include SDG impact reports.
- **Productive investment aimed at generating employment** and strengthening social protection networks, with special attention to especially vulnerable groups (older adults, children and undocumented migrants, among others).
- **Set of measures to prevent or mitigate the impact of gender bias.** These should include measures designed to achieve the following: promote research on the subject of gender bias; consolidate public policies with a gender perspective; ensure the adoption of measures to create jobs, improve the work-life balance and protect women's employment rights; campaigns

to educate people about gender violence, raise awareness and ultimately prevent such violence.


- **Making a substantial and effective contribution to the global response** in order to protect the world's poorest countries by developing and strengthening platforms for knowledge sharing and North-South and South-South cooperation.
- **Creation of a National Global Health Strategy** that includes the following:
 - A work agenda based on the SDG3+ concept, recognising the interconnectedness of the health targets with environmental, socioeconomic, and financial targets.
 - The inclusion of those targets in specific plans and budgets in the policies of different levels of government and also in our international cooperation.
 - Mechanisms for financial innovation—both national and in collaboration with other parties—to ensure the sustainability of these initiatives.
 - Incentives designed to make use of and include the resources and capacities of private, academic, and civil society actors.
 - Incorporation of health impact assessment in public programmes at all levels of government. Reinforcement of operational research as a key component of international cooperation and as a strategy for knowledge sharing and transfer.
 - Support for a model of innovation and access to medicines that will ensure the availability of and access to treatments and vaccines in the public interest and coverage for all affected populations.
 - Establishment of agile and transparent formal mechanisms for informing and supporting political decisions with scientific information.
- A proposal for **global health governance** incorporating a pandemic prevention and response plan that takes into account all of the above components. This model should include the consideration of how to reform the World Health Organisation to improve its efficiency, representativeness and transparency. It should also address the issue of the transparency and legitimacy of public-private health funds ●

FOR MORE INFORMATION:

- [United Nations' Sustainable Development Goals](#)
- [Principles of the World Health Organisation](#)
- [Agenda 2030 del Gobierno de España](#)
- Coronavirus and the SDG:
 - [UN working to fight COVID-19 and achieve Global Goals](#)
 - [Shared Responsibility, Global Solidarity: Responding to the socio-economic impacts of COVID-19](#). United Nations. March 2020.
- Sustainable Development Solutions Network (SDSN): [Sustainable Development Report 2020: The Sustainable Development Goals and Covid-19](#).

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