

# Promoting Cross Sector Linkages in Health and Education

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# Overview of Presentation

- Cross Sectoral
- MDGs and SDGs
- New Sources of Evidence
- DCP3 Vol 8
- New Modalities
- Massive scale
- Community level excitement



# A little background: cross-sector focus in health and education

- ▶ WHO - Ottawa Charter
- ▶ UN Convention on Rights of the Child
- ▶ WHO - Health Promoting Schools
- ▶ UNICEF - Child Friendly Schools
- ▶ UNESCO - FRESH - Focusing Resources for Effective School Health

# MDGs to SDGs - New Opportunities for Synergy Between Sectors

- ▶ MDGs focused on important outcomes, but stove piped approaches
- ▶ SDGs focused on many of same important development goals, but require synergy between sectors, new approaches
- ▶ Health and education cross-sector approaches support achievement of SDGs 2, 3, 4, 5, 6

# 17 Sustainable Development Goals to reach by 2030



# New realities

## New evidence

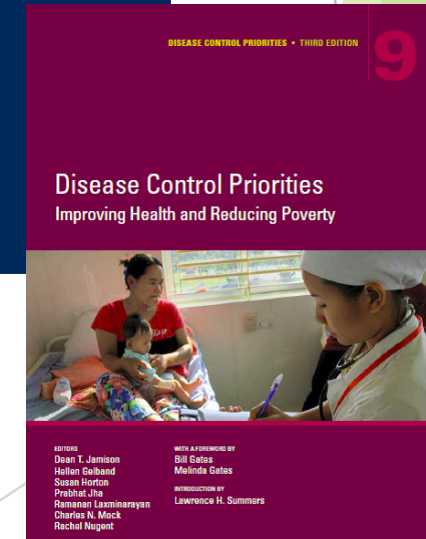
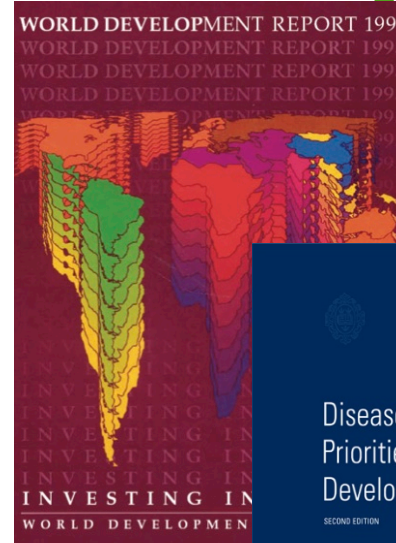
## New modalities

- ▶ Challenged by malnutrition/stunting; obesity - nutrition deficits and systemic impact of environment and behaviors
- ▶ Changing global health trends - non-communicable diseases, cardiovascular, hypertension, stroke, cancer, TB
- ▶ DCP3 2018 - new evidence, more evidence, irrefutable evidence gathered in influential volumes
- ▶ Costed essential packages
- ▶ MDG 8 - New global development partnerships



# New Evidence: Disease Control Priorities History

- 1993 World Development Report
- *Disease Control Priorities in Developing Countries, Second Edition 2006 (DCP2)*
- *Disease Control Priorities, 3rd Edition 2015-2018 (DCP3)*

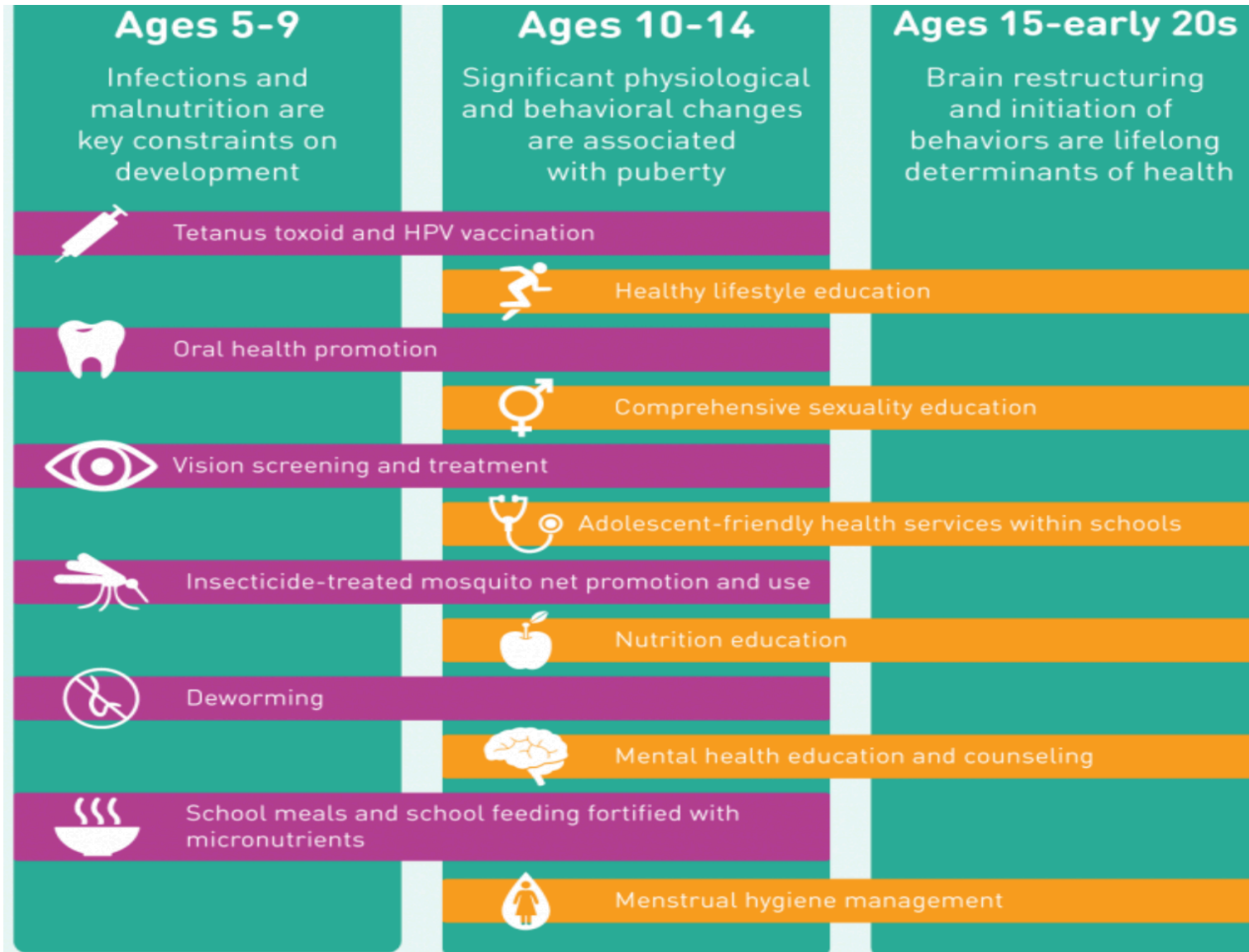


# Main Messages of DCP3 Volume 8

- ▶ It takes some 8000 days for a child to develop into an adult.
- ▶ Focus on the first 1000 days is an essential but insufficient investment
- ▶ Sensitive phases shape development throughout this period, and age-appropriate and condition-specific support is required throughout if a child is to achieve full potential as an adult.



# Health needs addressed through essential packages of services - school as platform



Source: GPE Website, News and Media, Infographic (2018)

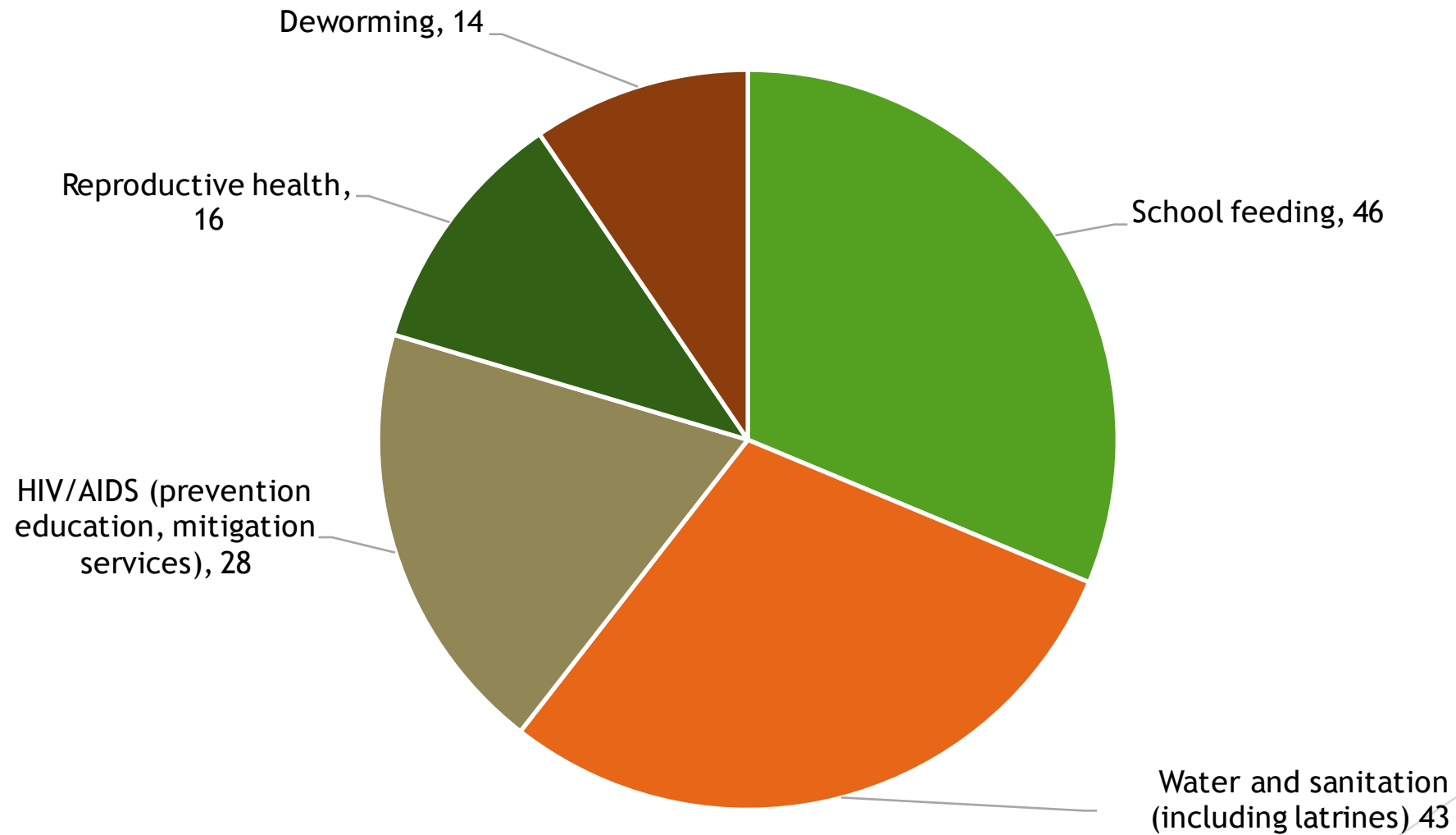
# New modalities: massive scale-up to reach fast growing world population

- ▶ How GPE works - important to innovate ways to take activities to massive scale -- acknowledge the need to reach such a scale
- ▶ New modalities (like GPE, GF, GFF) to deliver international development
- ▶ Need for government to innovate in cross sector activities; maximize efficiencies between sectors
- ▶ Health activities in the education sector plans - MOEs applying new funding modalities to promote cross sector programs - train teachers, open doors to MOH
- ▶ MOH can bring expertise to MOE for delivery of services

# Health Activities in Education Sector Plans

• School health policy development	• Inter-sectoral coordination
• School feeding activities	• Reproductive health education
• Nutrition education	• HIV and STI prevention
• Deworming and micronutrients	• Provision of water points
• Construction of sanitation facilities	• Preventing unwanted pregnancy
• Hygiene promotion	• Preventing early marriage
• Menstrual hygiene management	• Prevention gender based violence
• Hygiene kits	• Prevention of infectious disease
• Psycho-social counseling	• Prevention of non-infectious disease
• Health screening at school	• School safety, including walls
• Check-ups through local providers	• Preventing child abuse
• Malaria education	• Vaccinations
• Life skills education	• Vision screening

## Key health activities in ESPs



Source: GPE, *Stocktake in Health and Education*, forthcoming 2018

# Massive scale - Meeting the needs of particular households, communities, kids

- ▶ Massive scale for delivery, cost effectiveness and efficient interventions, still have to be delivered so communities accept
- ▶ Communities ultimately must drive prioritization and acceptance
- ▶ Parents want to have a say in what is happening in their schools, communities
- ▶ Kids are the ones who need to drive service prioritization
- ▶ Teachers must feel confident about what they are teaching, delivering
- ▶ Community-centered school health programs
- ▶ School Health Committees

# Steps for development agencies to help establish school health programs in MOEs

- ▶ Step 1 - Facilitate and support strong cross sector policies and relationships across the MOE and MOH
- ▶ Step 2 - Focus on education outcomes to justify MOEs including school health programming in their strategic plans
- ▶ Step 3 - Assist the MOE in exploration of global frameworks for school health policies and programs (such as FRESH or HPS) with all stakeholders in MOE, MOH, community development, communities, and schools
- ▶ Step 4 - Assist the MOE in selecting simple school level activities that are not complex for teachers to implement in order to gain support from MOE; promote national education goals in enrolment, attainment, attendance

Source: Strickland, Bradford, *First Principles: Designing Effective Education Programs for School Health* (2011)



# Steps for development agencies to help establish school health programs in MOEs (cont)

- ▶ Step 5 - Work with the MOE to understand costs and cost-effectiveness of school health programs
- ▶ Step 6 - Help the MOE establish indicators that will show the impact of health activities on education goals, including attendance and cognitive goals
- ▶ Step 7 - Strive to work with existing systems and infrastructure, such as teacher training systems and education management information systems (EMIS), to build capacity in the education sector for long-term management of school health programming
- ▶ Step 8 - Help the MOE consider the legal and ethical factors involved in health-related research, thus avoiding unrealistic goals that are undermined by local norms or local laws

# Thank you!

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