Health-related SDG indicators	2015 (or nearest)	2019 (or nearest)	Status of progress
ortality ()			
3.1.1 Maternal mortality ratio (per 100 000 live births) ^a	175	164	Progress made but to slow to meet target
3.1.2 Births attended by skilled health personnel (%)	98	99	Progress fast enough
3.2.1 Under-5 mortality rate (per 1000 live births) ^a	52	46	Progress made but to slow to meet target
3.2.2 Neonatal mortality rate (per 1000 live births) ^a	27	25	Progress made but to slow to meet target
3.4.1 Probability of dying from NCDs (between ages 30-69) (%) $^{\rm a}$	20.8	22.0	Progress stalled
3.4.2 Suicide mortality rate (per 100 000 population) ^a	3.9		Trend not reported
3.6.1 Mortality rate from road traffic injuries (per 100 000 population) ^a	23.5	21.8	Progress made but to slow to meet target
3.9.1 Mortality rate attributed to household and ambient air pollution (per 100 000 population)	31.6	41.5	Progress stalled
3.9.2 Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (per 100 000 population)	1.8	1.4	Progress
3.9.3 Mortality rate attributed to unintentional poisoning (per 100 000 population)	1.6	1.5	Progress
Iorbidity			
3.3.1 New HIV infections (per 1,000 uninfected people)	0.06	0.07	Progress stalled
3.3.2 TB incidence (per 100 000 population)	118	115	Progress
3.3.3 Malaria incidence (per 1000 population at risk)	9	10	Progress stalled
3.3.4 Hepatitis B prevalence among children under 5 years (per 100 000 population)	1.6		Trend not reported
3.3.5 Number of people requiring interventions for Leishmaniasis	10,616	15,367	Progress stalled
DG3 means of implementation of targets			
3.5.2 Harmful alcohol use (litres of pure alcohol per capita ≥15 years)	0.6	0.5	Progress
3.7.1 Women of reproductive age (15–49 years) who had their need for family planning satisfied with modern methods (%)	55	57	Progress
3.7.2: Adolescent birth rate (per 1000 women aged 15–19 years)	48	41	Progress
3.8.1 UHC service coverage index ^a	53	57	Progress made but to slow to meet target
3.8.2 Large household expenditure as a share of total health care expenditure (>10%)	15.2		Trend not reported
3.8.2 Large household expenditure as a share of total health care expenditure (>25%)	2.3		Trend not reported
3.a.1 Prevalence of tobacco use among persons 15 years and older (%)	18.5		Trend not reported
3.b.1 DPT3 Coverage (%)	80	82	Progress
3.b.1 MCV2 Coverage (%)	68	75	Progress
3.b.1 PCV3 Coverage (%)	50	52	Progress
3.b.2 Official development assistance for medical research per capita (US\$)	1.0	2.0	Progress
3.b.3 Availability of essential medicines in public health facilities (%)	83.4		Few data points to determine trend
3.c.1 Density of physicians (per 10 000 population)	14.2	18.2	Progress
3.c.1 Density of pharmacists (per 10 000 population)	4.5	5.7	Progress
3.c.1 Density of nurses (per 10 000 population)	20	33	Progress
3.c.1 Density of dentists (per 10 000 population)	3.6	3.9	Progress
3.d.1: International Health Regulations (IHR) capacity and health emergency preparedness	65.5		Trend not reported

Health-related SDG indicators	2015 (or nearest)	2019 (or nearest)	Status of progress
3.d.2.a: Percentage of bloodstream infections due to selected antimicrobial- resistant organisms (due to Escherichia coli resistant to third generation cephalosporin (ESBL-E. coli)	58.4	59.5	Progress stalled
3.d.2.b: Percentage of bloodstream infections due to selected antimicrobial-resistant organisms (Methicillin-resistant Staphylococcus aureus (MRSA) among blood isolates)	36.6	46.1	Progress stalled
Risk factors for health (direct effect on health)			
2.2.1 Stunting among children under 5 (%)	26.1	24.2	Progress
2.2.1 Wasting among children under 5 (%) ^a	7.5	3.8	Progress fast enough
2.2.2 Overweight among children under 5 (%)	8.1	8.0	Progress stalled
6.1.1 Access to improved drinking water (%) ^a	88	89	Progress made but too slow to meet target
6.2.1 Access to improved sanitation facilities (%) ^a	73	75	Progress made but too slow to meet target
11.6.2: Annual mean levels of fine particulate matter in cities (mg/m3)	54		Trend not reported
16.1.2 Conflict-related deaths (per 100 000 population)	4.9	3.3	Progress
16.2.1: Proportion of children aged 1–17 years who experienced any physical punishment and/or psychological aggression by caregivers (%)	85		Trend not reported due to too few data points
Determinants of health (indirect effect on health)			
1.1.1 Proportion of population living below the international poverty line 9%)	19.0		Trend not reported
4.1.1 Net primary school enrolment ratio (per 100 school-age children)	93	97	Progress but data available for selected countries
4.6.1 Literacy rate (15-24 years) (%)	95	97	Progress but data available for selected countries
5.2.1 Proportion of ever-partners women and girls aged 15 years and older subjected to violence (%)	37		Trend not reported
5.6.1 Proportion of women aged 15–49 years who make their own informed decisions (%)	50.5		Trend not reported
8.5.2 Unemployment rate, males (%)	9	8	Progress
8.5.2 Unemployment rate, females (%)	21	17	Progress
8.5.2 Unemployment rate, both sexes (%)	11	9	Progress

^aSDGs with explicit targets for 2030;

of coordinating or steering committees, with decision making power, that include key stakeholders are among effective ways that countries adopt for meeting SDGs. Successful examples of a whole-of society approach in controlling the COVID-19 pandemic are observed in a few countries of the Region (14) and maintaining and expanding such initiatives is the key in achieving WHO's vision for the Region (15).

It is for this reason that the WHO Regional Office for the Eastern Mediterranean embraced the Global Action Plan for Healthy Lives and Well-being (GAP), signed by 12 health and development partners (16). At least eight countries in the Region are using this approach to accelerate progress on the health-related SDGs. This plan also served as the background for the establishment of the Regional Health Alliance, launched in December

2020 (17). The outcomes of this collaboration as a strategy to accelerate progress towards health-related SDGs at country and regional levels are visible.

As seen in the response during the pandemic, placing health at the top of the agenda means putting essential health services and universal health coverage at the forefront (18–20). The COVID-19 pandemic has uncovered many inequities and gaps in our health systems. In addition, the pandemic has all the hallmarks that suggest the progress towards SDGs might be hampered still further. Ensuring functioning health systems and effective governance mechanisms are at the forefront of efforts towards SDGs.

The delivery of health services must be complemented by a commitment to health at the highest levels of

^{...} Limited data for most countries to assess regional progress or determine trend.