

THE NEED TO COMBAT POVERTY AND DECENT JOBS



RELEASE JUNE 2019

THE NEED TO COMBAT POVERTY AND DISEASE

May 2019

Telecommunications Regulatory Authority (TRA)

P.O.Box: 116688 Dubai, United Arab Emirates

Coordinates: 25°17'14.0"N 55°21'02.4"E

Telephone: +971 4 7774049

E-mail: info@tra.gov.ae

Web: www.tra.gov.ae

Table of Contents

CONTEXT AND BACKGROUND	4
NEED	5
IDEA	5
PROJECTS AND ACTIVITIES	5
IMPACT	22

CONTEXT AND BACKGROUND

Good health is essential to sustainable development and the 2030 Agenda reflects the complexity and interconnectedness of this. It highlights the widening economic and social inequalities, rapid urbanization, threats to the climate and the environment as well as the continuing risks of HIV, emerging challenges with various types of infectious and non-communicable diseases. Universal health coverage will be integral to achieving Sustainable Development Goal 3 (SDG), ending poverty and reducing inequalities. In addition, there are a number of emerging global health priorities that may not explicitly be part of the SDGs, such as antimicrobial resistance that demand action.

More than one billion people suffer from extreme poverty, living on less than one dollar a day, while more than 2.7 billion struggles to survive with an income less than two dollars a day. Poverty in the developing world goes far beyond a lack of income, it can also be a lack of access and for many having to walk for miles every day to access water; up to 750 million people worldwide do not have access to potable water and/or the fact that every minute a child dies from water-related diseases. Humanitarian aid is not sufficient; despite the increases, it can only meet two-thirds of the global demand.

One of the biggest initiatives in the world to combat poverty and disease is the Mohammed Bin Rashid Al Maktoum Global Initiatives. The initiative offers a helping hand to those in need wherever they may be and focuses beyond aid, addressing the root causes of poverty and disease. As of 2015, these programs have assisted 40 million people in 99 countries. Mohammed Bin Rashid Al Maktoum Global Initiatives will reach more than 130 million people in the coming 10 years and will focus on developmental and relief efforts across the Arab region and beyond, following a clear and comprehensive vision and a specific set of major, measurable goals and milestones.

NEED

To create an environment to reduce poverty and create decent employment for all.

IDEA

The UAE should create an environment where poverty is reduced, the people of the UAE have an opportunity for gainful employment and social safety nets are in place to ensure the health and well-being of the country.

PROJECTS AND ACTIVITIES

The UAE looks at all aspects of creating an environment where all the people in the country have the opportunity to be properly educated, have the skill sets to find decent employment and have the social health safety nets.

Education

The UAE provides high-quality education and plenty of job opportunities in a knowledge-driven based economy. It undertakes many efforts to maintain the standard of high-quality education and provide a fair job market. It ensures that citizens and residents are capable of earning a decent livelihood and enjoy quality life in the UAE.

The UAE sets a huge part of its budget to develop the education sector. In the year 2018, the education sector received AED 10.4 billion from the federal budget.

Ministry of Education (MoE) developed the Education 2020 strategy which is after a complete transformation of the current education system and teaching, to develop modern methods and a first-rate education system, spaced out over a five-year plan.

The Government laid down several laws that make education compulsory such as it is compulsory for Emirati children to start schooling at the age of 6 and remain in school until they have completed Grade 12 and/or reach the age of 18.

In addition, the Cabinet issued directives to prepare an integrated National Literacy Strategy and a framework to produce a reading generation and establish the UAE as the capital of cultural and knowledge content.

THE NEED TO COMBAT POVERTY AND DECENT JOBS

MoE launched initiatives aimed at upgrading the education standards in the UAE according to best international practices.

These initiatives include:

- School Leadership Development Project (SLP)
- School Olympic Games Project
- School Health Education Project
- School health screening.

Mohammed Bin Rashid Al Maktoum Global Initiatives seeks to support education, disseminate knowledge, encourage the research and spread of knowledge, and provide children with a healthy learning environment free of disease and its causes. The initiatives in this sector have been responsible for the construction 2,126 schools around the world, training 400,000 teachers, distributing and printing more than 3.2 million books, translating 1,000 knowledge-based books, encouraging millions of students in the Arab world to read 50 million books a year and sustaining Arabic language support initiatives.

The Education of People of Determination

The UAE Government passed Federal Law No. 29 of 2006 which protects the rights of people of determination to education. People of determination are entitled to enroll in any school, without exception. People of determination are catered for by the Department of Special Education, which was established in 2008 by the Ministry of Education. Ministry of Education provides expert teachers who specialise in dealing with people of determination. MoE offers several training programmes and facilities targeting people of determination, their parents and kindergarten teachers.

Jobs

As for the jobs sector, the Ministry of Human Resources and Emiratisation (MoHRE) ensures increased job opportunities and a fair job market for all.

Emiratisation is implemented in almost all sectors in the UAE. Every company with more than 100 employees is obliged to recruit (and retain on the payroll) the stipulated number of UAE nationals to ensure the minimum percentage of participation of Emiratis in the workforce.

THE NEED TO COMBAT POVERTY AND DECENT JOBS

Following a strategic plan to promote Emiratisation, MoHRE decided to localise more jobs in the private sector. Starting from 2017, companies that are registered with Tas'heel's online services and that employ over 1000 workers would be required to hire Emirati citizens for the data entry positions.

MoHRE decided that all construction facilities with a workforce of 500 or more employees must appoint at least one Emirati occupational health and safety officer from 2017.

Companies that employ over 1,000 workers and are registered with Tas'heel's online services will be required to hire Emiratis for data entry positions from 2017, or they will not be provided additional work permits.

In addition, the ministry provides Absher card which entitles Emiratis working in the private sector for privileges and discounts.

MoHRE provides training programmes for Emirati job seekers. Emirates National Development Programme provides tips for preparing for interviews.

Federal Law No. 8 of 1980, also known as the Labour Law as amended governs the labour rights of employees in the private sector. Here are some of the key provisions of the Labour Law:

- Working hours
- Official leaves and vacations
- Wages protection system (WPS)
- End of service benefits
- Safety at the workplace
- Accommodation
- Insurance

There are special provisions for working women. Articles 27 to 34 of the law provide that women:

- May not be employed between 10 pm and 7 am with exceptions in administrative, technical and health services
- May not be employed in hazardous or strenuous or physically challenging jobs
- Are entitled to the same wage that a man would earn for the same job

- Are entitled to maternity benefits.

In addition, the UAE has issued three ministerial decrees in an effort to enhance the UAE's labour market conditions and consolidate the contractual nature of labour relations. These decrees are:

- Ministerial Decree 764 of 2015 on Standard Employment Contracts
- Minister of Labour's decree 765 of 2015 on rules and conditions for the termination of employment relations
- Ministerial Decree 766 of 2015 on rules and conditions for granting a permit to a worker for employment by a new employer .

There are also special provisions for people of determination, minors and students.

To protect the rights of blue-collar workers, in January 2016, MoHRE approved a third language to be added on the job offer, labour contract and annexure. In addition to Arabic and English, employees can choose from the following 9 languages: Bengali, Chinese, Dari, Hindi, Malayalam, Nepalese, Sinhalese, Tamil and Urdu. This applies to workers coming from outside and those residing in the UAE that are seeking a new job or moving from one company to another.

Through its affiliates, Mohammed Bin Rashid Al Maktoum Global Initiatives trains and supports 23,000 young entrepreneurs, and provides support for 3000 companies that employ more than 160,000 employees. The Initiatives further train officials and leaders from 155 governmental organizations from various countries around the world.

Reforming the labour market

One important feature of the UAE is the diversity of its population. It hosts millions of workers of more than 200 nationalities from around the globe. The Government is committed to the implementation of comprehensive strategies to protect workers' rights, particular of those in lower-paid jobs according to the prevailing labour legislation.

THE NEED TO COMBAT POVERTY AND DECENT JOBS

Ministry of Human Resources and Emiratisation (MoHRE) developed a strategy to ensure the right of workers to receive their wages, as well as mechanisms to achieve more flexibility and freedom of movement between different jobs and to provide workers with suitable housing and a safe working environment.

It also made measures to protect workers from illegal recruiters, abuse and non-payment of wages. Many of these initiatives are implemented in association with the Governments of labour-supplying countries. The UAE recognised that many of the problems that affect the labour force could only be effectively tackled in their country of origin.

Besides working to enhance the protection of the rights of its immigrant labour force, the UAE also continues to participate actively in the international campaign to eradicate human trafficking. Much of the work in this field is done in collaboration with the United Nations and its specialised agencies.

Social protection systems for laborers

The UAE has established offices in courts to provide legal support to workers in labour disputes and labour care units across the UAE to provide protection for workers and raise awareness of their rights.

If an employee has a complaint or a query, he can call MoHRE's 24-hour toll-free number 80060. In addition, the UAE availed certain systems and services to ensure workers protection; these include:

Wages Protection System (WPS)

The UAE has put in place the Wages Protection System (WPS) to ensure and protect the rights of workers, and to establish trust between organisations and their employees. Under this system, salaries of employees will be transferred to their accounts in banks or financial institutions, which are authorised by the Central Bank of the UAE to provide the service.

As per Ministerial Decree No. 739 of 2016 Concerning the Protection of Wages, all establishments registered in the ministry shall pay the wages of their employees on the due date through the WPS.

- eComplaint request

MoHRE has launched the eComplaint request service which allows the employee to report online any grievances he has with the employer with complete confidentiality.

- The 'My Salary' service

The 'My Salary' service is one of the most important services launched by MoHRE for the social protection of the workers. It facilitates the workers to report a delay in salary payment. This process maintains strict confidentiality to preserve the workers from any adverse actions by their employers.

For any concerns or complaints regarding the salary, employees can contact MoHRE or lodge a complaint through eNetwasal.

- Reforming the domestic workers' sector

To ensure decent working and living conditions for domestic workers, the UAE Cabinet and the Federal National Council approved a new draft Domestic Labour Law that regulates four key areas in the protection of domestic workers:

- Contracts
- Rights and privileges
- Prohibitions
- Recruitment agencies.

The new law establishes the principle of informed consent, ensuring that workers are aware of the contract terms, nature of work, the workplace, the remuneration and the period of daily and weekly rest as set out by the executive regulations and before they cross their national borders.

- Social support

Ministry of Community Development, in particular, offers social assistance in many ways to Emiratis who are unable to provide sufficient income for a decent life for themselves and their family members.

Other entities offering support in various forms are:

- Zakat Fund by disbursing the zakat amongst the poor
- Marriage Fund by organising mass marriages and providing finances for marriages of deserving Emiratis;
- Sheikh Zayed Housing Program by providing housing or plot of land to deserving Emiratis;
- Ministry of Presidential Affairs by providing a range of benefits to deserving Emiratis; you can apply online for social assistance and land and housing

Financing businesses

H. H. Sheikh Khalifa bin Zayed Al Nahyan, President of the UAE and Ruler of Abu Dhabi, launched Khalifa Fund for Enterprise Development in 2007 to help develop local investors and entrepreneurs, as well as to support and develop small to medium-sized investments in the emirate.

The fund targets capable, young graduates as well as young businessmen and businesswomen with creative business ideas, coupled with strong administrative and managerial skills.

Khalifa Fund provides funding solutions for a variety of feasible projects that serve the interests of the national economy in different sectors and project categories such as farming, fishing, agriculture and even home-based businesses. These programmes include microfinance, Khutwa, Bedaya, Zeyada, Tasnea, Zaarie and Al Hasela.

In addition, the fund offers a number of outreach programmes which target certain categories in the UAE community. Some of these are:

- Al Radda program - this is implemented in collaboration with the Abu Dhabi police. The initiative aims to provide Emirati inmates the opportunity to enter the business sector and reintegrate into society after serving their sentences.
- Ishraq program - this is implemented in collaboration with the National Rehabilitation Centre. The programme offers the opportunity for recovered drug addicts (citizens) to enter the business sector and reintegrate into society.

- Sougha program - this aims to preserve the cultural heritage by encouraging entrepreneurship in handicrafts. It targets all artisans and women within the UAE.
- Amal program - this aims to familiarise Emiratis with special needs with specific business sectors, through identifying the appropriate course-of-action, taking into consideration their disabilities, providing counselling services, as well as financial and non-financial support.

The fund is restricted to Emiratis between 21 and 60 years old. The applicant may call any of the available branches to register or read online about the application process (PDF).

Similarly, Dubai SME, an agency of the Department of Economic Development in Dubai, offers financing options and many support services including advisory and incubator services to small and medium enterprises. Dubai SME offers services to startups and established businesses.

For startups, they have the Intelraq program, under which Emiratis residing in Dubai receive full support through all the phases of setting up a business. Support is in the form of licensing, training courses as well as financial, legal, marketing, technical support and consultancy.

Hamdan Innovator and Incubator (HI2) provides both hardware and software. The software comprises an intellectual infrastructure of 10 years' experience with 500 companies established by Dubai SME. The low-cost hardware is made of 20,000 sq. feet of space that can accommodate 60+ companies. HI2 provides business development advisory services, a special lab for creating products and inventions prototypes, a multimedia lab, 3D printers and more.

For existing businesses, they offer guidance on the type of business, mode and category of business licensing, reducing business start-up costs and accessing reduced rates for business spaces. Dubai SME runs a Government Procurement program under which All Dubai Government departments allocate at least 5 per cent of their annual purchasing budget to buying from UAE Nationals who own and operate small and medium-size businesses. This helps small and medium-size businesses to build their capacities to compete with larger companies and sell their products and services to government departments.

THE NEED TO COMBAT POVERTY AND DECENT JOBS

From the other hand, Mohammed Bin Rashid Al Maktoum Global Initiatives train and support 23,000 young entrepreneurs, and provides support for 3000 companies.

Noor Dubai

The latest worldwide estimates from the World Health Organization (WHO) state that over 285 million people are visually impaired. Of those, 39 million are blind and 246 million have low vision. Based on the latest estimates, a child goes blind every minute and an adult every 5 seconds. Visual impairment is unequally distributed across countries, age groups and genders. More than 90% of the world's visually impaired live in developing countries. Over 90% of blind individuals live in areas with no access to quality eye care at an affordable price.

The Noor Dubai Foundation initiative was launched in September 2008 and Noor Dubai was established by law in 2010, with a vision of a world free from avoidable causes of blindness. It provides therapeutic, preventative, and educational programs to treat and prevent blindness and visual impairment in developing countries on a regional and international scale. Noor Dubai Foundation is a non-governmental, non-profit organization that aims to eliminate all types of avoidable blindness and visual impairment worldwide. Its guiding principles stem from believing that "Every individual has the right to sight". The foundation also believes in a world where medical services are available to all without discrimination, especially those with low-income. Every human being has a right to access health care and to receive assistance to improve living standards.

Between 2008 and 2013, through its various educational programs, the Foundation has educated 1,058,522 individuals and treated about 1,126,977 people and prevented about 4 million cases of River blindness.

The programs have prevented and treated blindness for 23 million people and provided 81 million vaccines and medications in the past eight years.

These programs have protected 3.6 million children in vulnerable countries from intestinal worms, which threaten their future, hinder their access to education, and prevent them from

leading healthy lives.

The activities carried out by the Noor Dubai Foundation:

1- Education:

- A. Training ophthalmologists in targeted regions at highly-equipped centers.
- B. Training eye specialists in different countries on early detection of eye diseases. The training is directed to physicians, primary care providers, teachers, mothers and students.
- C. Educating women on the importance of eye care in children.
- D. Educating local communities through conferences and seminars as well as social media tools.

2- Prevention:

- A. Increasing public awareness about eye health.
- E. Investing in regional and global plans for disease eradication such as River Blindness, which is a major cause of blindness in many African countries where half a million people are blind or visually impaired due to this disease.

3- Treatment

- A. Providing eye care and disease management through offering consultations, medication, glasses and state of the art surgical setup to those in need.
- B. Partnering with well-established NGOs to identify areas of need and provide suitable management.
- C. Conducting mobile eye camps in remote areas that lack primary health care services.
- D. The diseases tackled by Noor Dubai Foundation include cataract, strabismus, retinal disorders and glaucoma.

Noor Dubai Foundation strives to treat the following diseases:

- Cataract, which is the leading cause of blindness in the world. As per the latest estimates; 18 million people suffer from this condition, this represents 48% of the total number of blind people.
- Strabismus affects over 5% of children worldwide and treatments include vision therapy, orthoptics, or surgery.
- Retinal Disorders.
- Glaucoma.

Education

It is very important to train local ophthalmologists who will ensure the cost-effectiveness and sustainability of the work in their areas because one ophthalmologist will be able to provide services to many individuals in the community. By educating primary healthcare workers, teachers and mothers, they will be able to identify early signs that could lead to blindness in children. Hence, educating the community as a whole is an important step in the prevention of global blindness.

I. Investing in health

Health is now higher on the international agenda than ever before, and concern for the health of poor people is becoming a central issue in development. Indeed, three of the Millennium Development Goals (MDGs) call for health improvements by 2015: reducing child deaths, maternal mortality, and the spread of HIV/AIDS, malaria and tuberculosis. The poor suffer worse health and die younger. They have higher than the average child and maternal mortality, higher levels of disease, and more limited access to health care and social protection. When poor people become ill or injured, the entire household can become trapped in a downward spiral of lost income and high healthcare costs. Investment in health is increasingly recognised as an important means of economic development and a prerequisite for developing countries – and particularly for poor people within them – to break out of the cycle of poverty. Good health contributes to development in a number of ways: it increases labour productivity, educational attainment and investment, and it facilitates the demographic transition.

- Scaling-up financial resources for health should be a priority. Without money to buy vaccines and drugs, to build and equip facilities, to ensure adequate staffing, to manage the health system, and to increase investments in other sectors important for health, low-income countries will be unable to meet the health-related MDGs. This requires more financing from the budgets of partner countries as well as substantial increases in external support for health. Development agencies are more likely to mobilise additional resources in support of pro-poor health objectives where: i) there is a clear political will on the part of the partner country to articulate and implement a poverty-reduction strategy and a comprehensive health-sector programme; ii) serious efforts are being made to mobilise domestic resources; iii) there is commitment to managing resources more effectively; and iv) major stakeholders have an opportunity to participate in the planning, management and delivery of interventions. In countries with weak mechanisms, which are essential to improve health and prevent the spiral from ill health to poverty.

II. Supporting pro-poor health systems

A pro-poor health approach gives priority to promoting, protecting and improving the health

of poor people. It includes the provision of quality services in public health and personal care, with equitable financing help partner countries, develops pro-poor health systems by strengthening local capacity in several areas.

- Strengthening the capacity of the public sector to carry out the core functions of policy maker, regulator, purchaser and provider of health services is central to the development and implementation of pro-poor health systems. Strong institutional and organisational capacity, moreover, is necessary to track the use of resources and improve human resource strategies. These key issues go beyond the health ministry alone and reflect the necessity of placing health-sector reforms within the context of broader governance reforms.
- Developing public and private-sector services that are of good quality and responsive to the health needs and demands of poor people is a priority, necessitating a focus on those diseases – such as malaria, TB, and HIV/AIDS – that affect the poor disproportionately, as well as on reproductive health and non-communicable diseases, such as those linked to tobacco, where the disease burden on the poor is significant. This approach should be complemented by targeting strategies that reach out to poor and vulnerable groups, and by measures that stimulate demand for health services and increase health service accountability to poor communities. To accomplish these objectives, the voices of the poor, as well as those of non-governmental organisations (NGOs) and civil society organisations, must be heard in the planning and implementation process.
- Better partnership with the private sector is critical. Poor people make heavy use of private, for-profit and not-for-profit services (NGO and faith-based). The public sector in many developing countries does not have either the capacity to deliver health services itself to the entire population or to ensure that health services delivered by the private sector promote pro-poor health objectives. The type of partnership that governments can develop with private providers will vary according to patterns of use and their relative strengths and qualities. Governments may choose to contract out particular services to NGOs or seek to improve the quality of services available in the private-for-profit sector. This policy option will require the strengthening of government

capacity for regulation, contracting and monitoring.

- Equitable health financing systems are an essential part of improving access to health care and protecting the poor from the catastrophic cost of ill health. This goal requires effective social protection strategies, moving towards risk-pooling and prepayment systems and away from out-of-pocket “fee for service” payment for primary health care, which discourages use by poor people.

III. Focusing on key policy areas for pro-poor health

Ensuring that the poor have access to affordable and quality health services is not sufficient in itself to improve the health of the poor. The major determinants of their health depend on actions that lie outside the health sector. To start with, implementing effective pro-poor growth policies as outlined in the DAC Guidelines on Poverty Reduction is crucial: without higher incomes, poor people will not be able to afford food or health services. And without growth in revenues, governments will not increase their financing of health services. Other sectoral policies, too, are critically important, especially those for education, food security, safe water, sanitation and energy. The health of the poor can also be improved by reducing their exposure to the risk of addiction to tobacco or alcohol, of road traffic or other injuries, and the devastating impacts of conflict and natural disasters. Partner governments and development agencies should assess the extent to which policies in key sectors undermine or promote health and broader poverty reduction objectives, prioritise them in terms of importance and the cost-effectiveness of action, and implement appropriate responses. This would include efforts to strengthen capacity related to health objectives within those sectors.

- Achievement of the three health-related MDGs, for instance, all hinge strongly on reaching the MDGs of gender equality and universal primary education. Female education, in particular, is strongly linked to improved health care for children, families and communities, and to lower fertility rates. Education is also one of the most effective tools against HIV/AIDS. Conversely, health is a major determinant of educational attainment since it has a direct impact on cognitive abilities and school attendance. There is, therefore, a mutual interest in identifying strategies for collaboration both within the formal school system and through non-formal education.

- Food security and nutrition are critical factors influencing the health of the poor. Nearly 800 million people in developing countries are chronically hungry. Undernutrition affects the immune system, increasing the incidence and severity of diseases and is an associated factor in over 50% of all child mortality. Development agencies should focus on improving food security in rural and urban areas through interventions that aim to increase income and access to social services, as well as through targeted maternal and child nutrition programmes.

IV. Focusing on key policy areas for pro-poor health

Ensuring that the poor have access to affordable and quality health services is not sufficient in itself to improve the health of the poor. The major determinants of their health depend on actions that lie outside the health sector. To start with, implementing effective pro-poor growth policies as outlined in the DAC Guidelines on Poverty Reduction is crucial: without higher incomes, poor people will not be able to afford food or health services. And without growth in revenues, governments will not increase their financing of health services. Other sectoral policies, too, are critically important, especially those for education, food security, safe water, sanitation and energy. The health of the poor can also be improved by reducing their exposure to the risk of addiction to tobacco or alcohol, of road traffic or other injuries, and the devastating impacts of conflict and natural disasters. Partner governments and development agencies should assess the extent to which policies in key sectors undermine or promote health and broader poverty reduction objectives, prioritise them in terms of importance and the cost-effectiveness of action, and implement appropriate responses. This would include efforts to strengthen capacity related to health objectives within those sectors.

- Achievement of the three health-related MDGs, for instance, all hinge strongly on reaching the MDGs of gender equality and universal primary education. Female education, in particular, is strongly linked to improved health care for children, families and communities, and to lower fertility rates. Education is also one of the most effective tools against HIV/AIDS. Conversely, health is a major determinant of educational attainment since it has a direct impact on cognitive abilities and school attendance. There is, therefore, a mutual interest in identifying strategies for collaboration both

within the formal school system and through non-formal education.

- Poor people's health and mortality are directly affected by exposure to environmental threats. Poor people often live in low-quality urban settlements or remote villages on marginal land. There they have limited access to safe water and sanitation and are exposed to indoor as well as outdoor air pollution. These environmental conditions are a major cause of ill health and death among poor people. The importance of these basic causes of poor health must be integrated into development policies. IV. Working through country-led strategic frameworks the commitment to support the health-related MDGs calls for a long-term relationship with partner countries to achieve sustainable health improvements that benefit the poor. Such co-operation should take place within commonly agreed overarching national frameworks that set priorities for policies and programmes.
- A Poverty Reduction Strategy (PRS), developed and owned by the partner country, should be the central framework to formulate the broad lines of a pro-poor health approach. It should demonstrate a clear understanding of the causal links between better health and poverty reduction and include explicit health objectives in the key sectors that influence the health outcomes of poor people. In this way, a PRS can evolve to encourage links between health and policies in other sectors that promote the health of the poor. Since PRSs have limited space for detailed sectoral analysis, they should be supplemented by a more detailed health-sector programme.
- A health-sector program is essential not only for determining and getting needed support within the health sector but also for engaging in a dialogue on the policies and interventions likely to improve the health of poor people. It also provides a national framework for channeling external support. This support may include technical cooperation for capacity building, large projects, sector-wide financing, overall budget support, debt relief and funds from global initiatives. Although having a large number of separate externally funded activities imposes high costs and can distort country priorities, each instrument has advantages and disadvantages. The issue is primarily one of balance, in the context of different country circumstances.

- Sector-wide approaches (SWAp) in health merit attention because they are relatively new and aim to strengthen co-ordination. In SWAp, external partners adhere to the government-led health programme and help support its development through common procedures for management, implementation and, to varying extents, funding. Where SWAp are appropriate, they can help to promote greater local involvement, accountability and capacity in partner countries. The decision to engage in a SWAp in a given country should result from a careful appraisal of policy and institutional conditions. The premise of this kind of partnership is an atmosphere of mutual trust, reduced attribution to any single development agency, and the acceptance of joint accountability and some increase in financial and institutional risk.
- Partner countries should measure health system performance and health outcomes and the extent to which they are pro-poor. As part of their efforts to support PRSs and health-sector programmes, development agencies should give priority to strengthening national systems for data collection, monitoring and evaluation and statistical analysis as these systems are often inadequate in measuring progress towards health and poverty reduction objectives.

V. Promoting policy coherence and global public goods

The health problems of the poor do not stop at national borders. A globalised world presents new risks to health, as is indicated by the rapid spread of HIV/AIDS or the threat of bioterrorism. At the same time, it provides opportunities to prevent, treat, or contain the disease. Development agencies and partner countries should strengthen ways of working together globally.

- One way is to promote the development of Global Public Goods for health (GPGs), which can provide enduring benefits for all countries and all people. This approach includes such actions as medical research and development focused on diseases that most affect the poor, as well as efforts to stem the cross-border spread of communicable disease. It is estimated that under 10% of global funding of health research is devoted to diseases or conditions that account for 90% of the global

disease burden, and much less than 10% for the problems of poor countries and people. Development agencies have a key role to play in promoting international initiatives to produce new drugs and vaccines, and knowledge focused on the health problems of the poor. They can provide critical financial resources and help catalyse support for policy coherence and other support within their own countries. Such initiatives include more emphasis on the diseases of low-income countries in the health-research budgets of OECD countries, partnerships with the private sector and civil society to generate funds and expertise for research on these diseases, and consideration of the extension of OECD countries' "orphan drug" incentives to the diseases involved.

- In addition, trade in goods and services and multilateral trade agreements have an increasing influence on the health of the poor. Of particular significance are those agreements dealing with trade-related aspects of intellectual property rights (TRIPS), the General Agreement on Trade in Services (GATS), and trade in hazardous substances. Member agencies should encourage their governments to monitor the implementation of the Doha Declaration on the TRIPS Agreement and Public Health from the perspective of the extent to which developing countries can use the TRIPS Agreement for improving their access to those pharmaceutical products important to the health of poor people that are under patent protection. One such issue, which the World Trade Organization Council is considering is that some countries, without their production capacity, are having problems in making effective use of compulsory licensing. The need for funding for GPGs is largely additional to the need for development agency support of country programmes. The overall increase in external support depends on opportunities for effective use of that support. It also depends on the extent to which public and political support can be mobilised in OECD countries for the propositions set out, in this document and other reports, on the importance and feasibility of helping to improve the health of the poor.

IMPACT

At the international level, the UAE is a key contributor to many international humanitarian initiatives, especially in providing relief to victims of natural disasters and socio-conflicts. Between 2011 and 2014, the UAE donated AED 8.9 billion to eradicate poverty worldwide. It

has also maintained its ranking as one of the 10 largest donor states as per the Official Development Aid (ODA) in 2015. In 2016, the UAE spent AED15.23 billion worth of development assistance.

Several government-financed organisations in the UAE provide humanitarian assistance across the world. These include:

- Emirates Red Crescent (ERC) - Since its establishment in 1983, ERC has been playing a leading role in promoting different aspects of humanitarian work on both domestic and international levels, regardless of ethnic, cultural, geographic or religious considerations. In 2001, ERC was selected as the second-best humanitarian authority in Asia.
- Abu Dhabi Fund for Development (ADFD) - It was established in 1971 to help developing countries achieve sustainable economic growth and reduce poverty.
- Sheikh Khalifa Foundation - Since its inception in 2007, its contribution to health, education and infrastructure has reached more than 87 countries worldwide.
- Mohammed Bin Rashid Al Maktoum Global Initiatives (MBRGI) - Inaugurated in October 2015, it supports more than 130 million people in 116 countries around the world.

MBRGI constructed the largest infrastructure and logistics system in the world on an area of 700,000 square feet to provide facilities and services for charitable and humanitarian institutions. It encompasses 28 institutions and initiatives that operate more than 1,400 development programmes, covering four main sectors:

- Combating poverty and disease
- spreading knowledge
- empowering communities
- entrepreneurship and innovation for the future.

The UAE has provided support to both its people and those of developing countries to ensure that the people of the world are able to take care of their respective families financially.

References

- <https://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-3-good-health-and-well-being.html>
- <https://www.mmcisolar.com/opportunity>
- <http://www.almaktouminitiatives.org/en/combating-poverty-disease/>
- <http://www.almaktouminitiatives.org/en/goals/>
- <https://government.ae/en/about-the-uae/leaving-no-one-behind/1nopoverity>
- <http://www.almaktouminitiatives.org/en/spreading-knowledge>
- <http://hmaward.org.ae/profile.php?id=1513>
- <https://www.coursehero.com/file/p2mr9rj/Health-is-now-higher-on-the-international-agenda-than-ever-before-and-concern/>
- <https://www.docme.ru/doc/1167477/28>
- <https://text.123doc.org/document/1255336-dac-guidelines-and-reference-series-poverty-and-health-pptx.htm>
- <https://www.coursehero.com/file/p18i34q/there-is-commitment-to-manage-resources-more-effectively-and-iv-major/>