



## Health Programs in Fragile Contexts

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Defining “fragility” is not straight forward: When is a state or an area considered as fragile? What is the difference between complex development settings and fragile contexts? With this briefing note we would like to provide you with a definition and some contextual information.

### Background

We are currently facing growing global instability and uncertainty; armed violence has increased and humanitarian and development work is highly challenged by these trends. International health organisations are more and more obliged to work in contexts where the environment is marked by instability and insecurity, the public structures are weak and quick to collapse and the rule of law is lacking.

In 2016, 1.6 Billion people live in fragile situations mainly in sub-Saharan Africa followed by East Asia, the Pacific and Latin America and the Caribbean. There are currently 56 states assessed as fragile according to the OECD 2016 report. That’s where global poverty is concentrated.

Fragility has become a key obstacle to development. Most fragile countries reached only partially or not at all the Millennium Development Goals compared to non-fragile states. Availability, accessibility and affordability of health care in fragile and conflict-affected states and areas remain a real challenge. Even if health services exist, people might be too afraid to risk the journey to a health facility or have lost trust in them. Health systems in fragile states are often ill-equipped to deal with such situations, which has devastating consequences for the affected population. This tells us that we need to rethink our approach to fragile contexts and to invest in building resilient health systems.

A resilient health system can be defined as “the capacity of health actors, institutions, and populations to prepare for and effectively respond to crises; maintain core functions when a crisis hits; and, informed by lessons learned during the crisis, reorganise if conditions require it. Health systems are resilient if they protect human life and produce good health outcomes for all during a crisis and in its aftermath”<sup>1</sup>.

Switzerland’s federal government made it clear in the strategy for its international cooperation (2017-2020) that the main support will go to countries on their path out of fragility and situations of violence and conflict. Currently over half of the partner countries of the Swiss Agency for Development and Cooperation fall under the criteria of fragility.

The New Deal for Engagement in Fragile States<sup>2</sup> is a key agreement between fragile and conflict affected states, international development partners and civil society to improve current development policy and practice in fragile states. Countries committed themselves to pursuing more political ways of working to address the root causes of conflict and fragility and to channelling investments in fragile

states in line with aid effectiveness principles. Switzerland supports the continuation of the New Deal for Engagement in Fragile States.

Understanding fragility is crucial if we want to achieve the Agenda 2030. Sustainable development can only thrive where there is security and peace. SDG 16 in particular, aims to promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels by leaving no one behind.

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Fragility is a dynamic process, with different factors that influence each other. In line with its new approach to monitoring fragility, the Organisation for Economic Cooperation and Development (OECD) is currently updating its definition of fragility. The updated definition is based on an understanding of fragility as a heightened exposure to risk combined with a low capacity to mitigate or absorb these risks.

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Fragility has become a key obstacle to development. Most fragile countries reached only partially or not at all the Millennium Development Goals compared to non-fragile states. Availability, accessibility and affordability of health care in fragile and conflict-affected states and areas remain a real challenge. Even if health services exist, people might be too afraid to risk the journey to a health facility or have lost trust in them. Health systems in fragile states are often ill-equipped to deal with such situations, which has devastating consequences for the affected population. This tells us that we need to rethink our approach to fragile contexts and to invest in building resilient health systems.

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