



## Global Strategy for Women's, Children's and Adolescents' Health

*UPDATED Draft for Discussion—including  
reflections from the EWEC Stakeholders'  
meeting November 6-7, 2014*

*14<sup>th</sup> November 2014 draft:*

- Introduction
- Rationale, political process and timeline
- Conceptual Framework & Content Areas
- Operating principles, overview and next steps



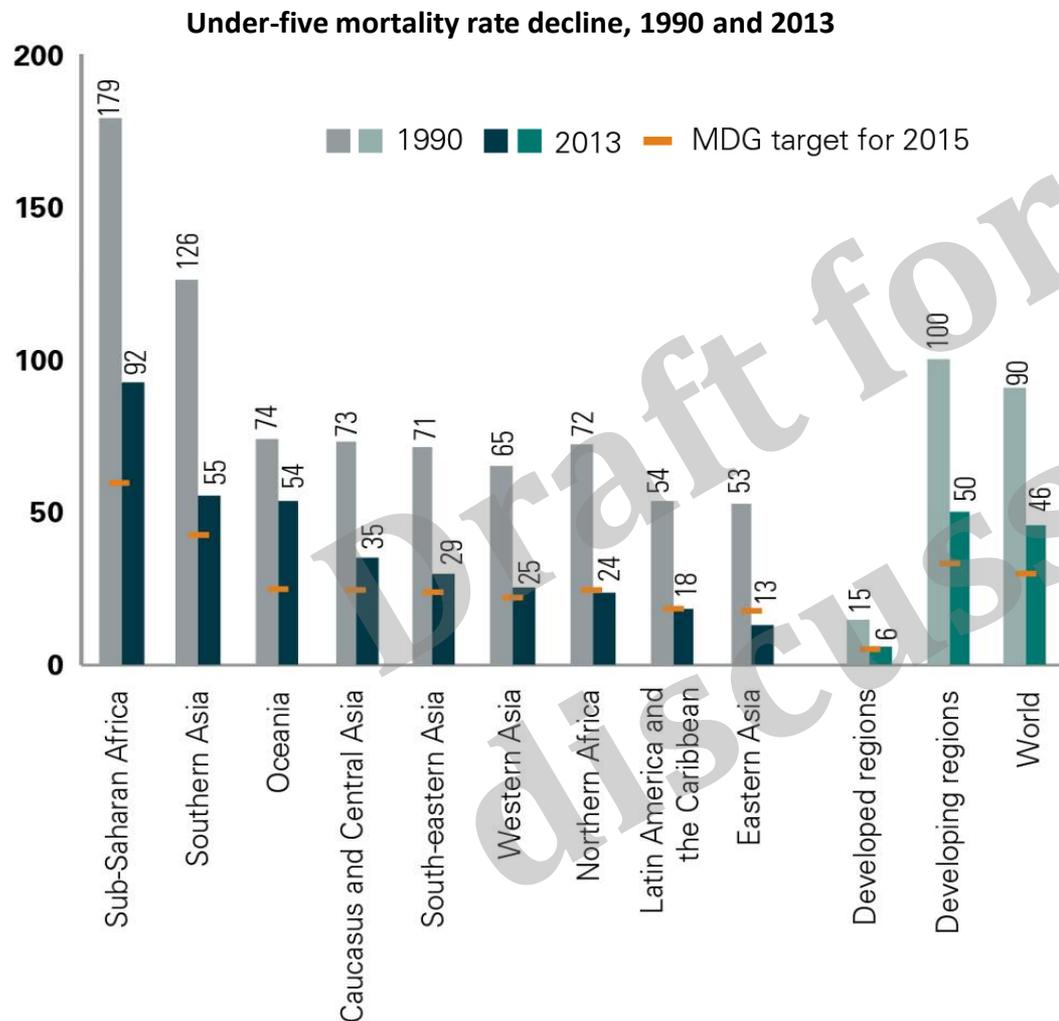
EVERY WOMAN  
EVERY CHILD



**Introduction**

# MDG 4 – Reduce child mortality

*Since 1990 the global under-five mortality rate has dropped 49 percent*

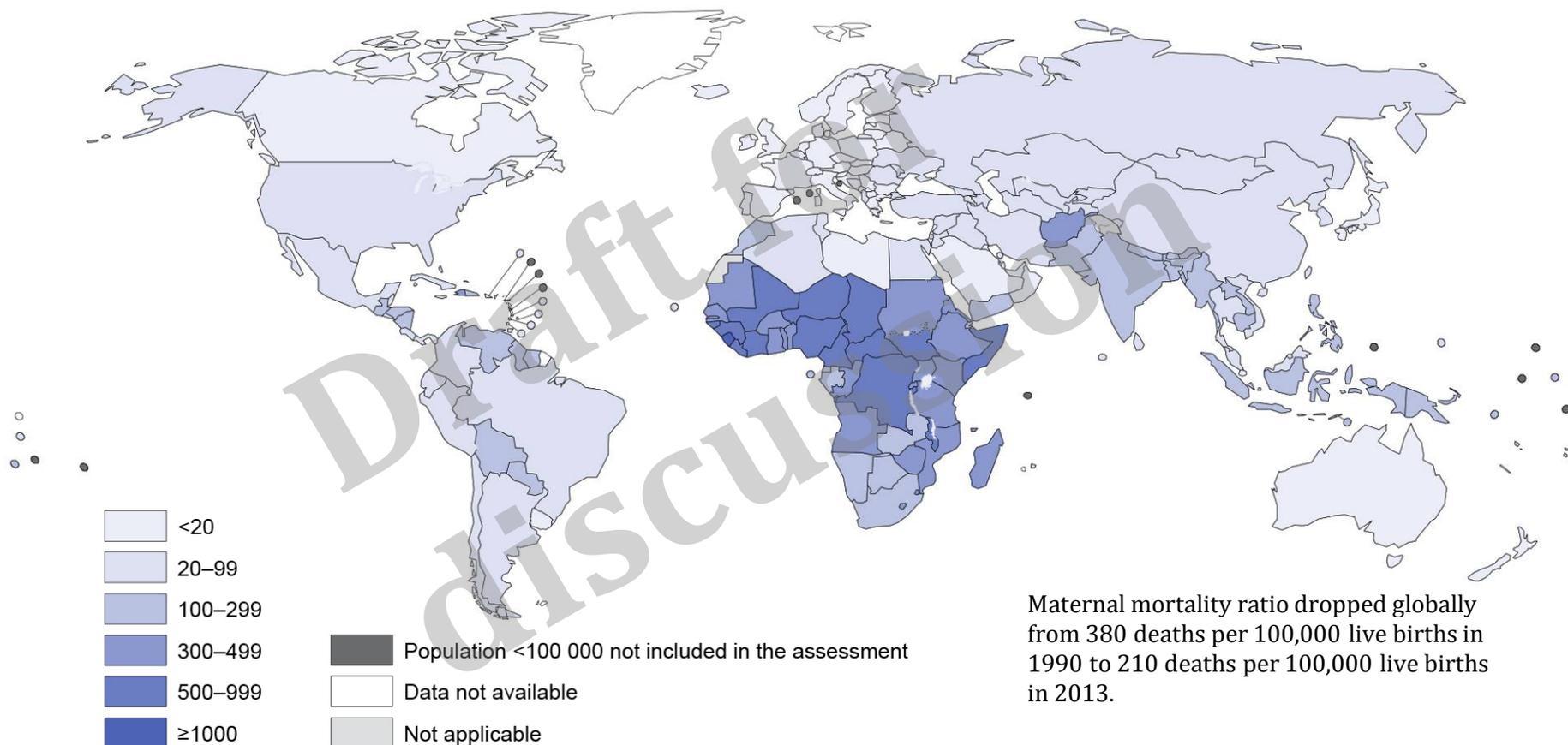


Overall reduction in U5MR from 90 deaths per 1,000 live births in 1990 to 46 per 1,000 live births in 2013

# MDG 5 – Improve Maternal Health

*Globally, the maternal mortality ratio dropped by 45 % between 1990 and 2013;  
Unmet need for family planning declined from 17 % to 12 %*

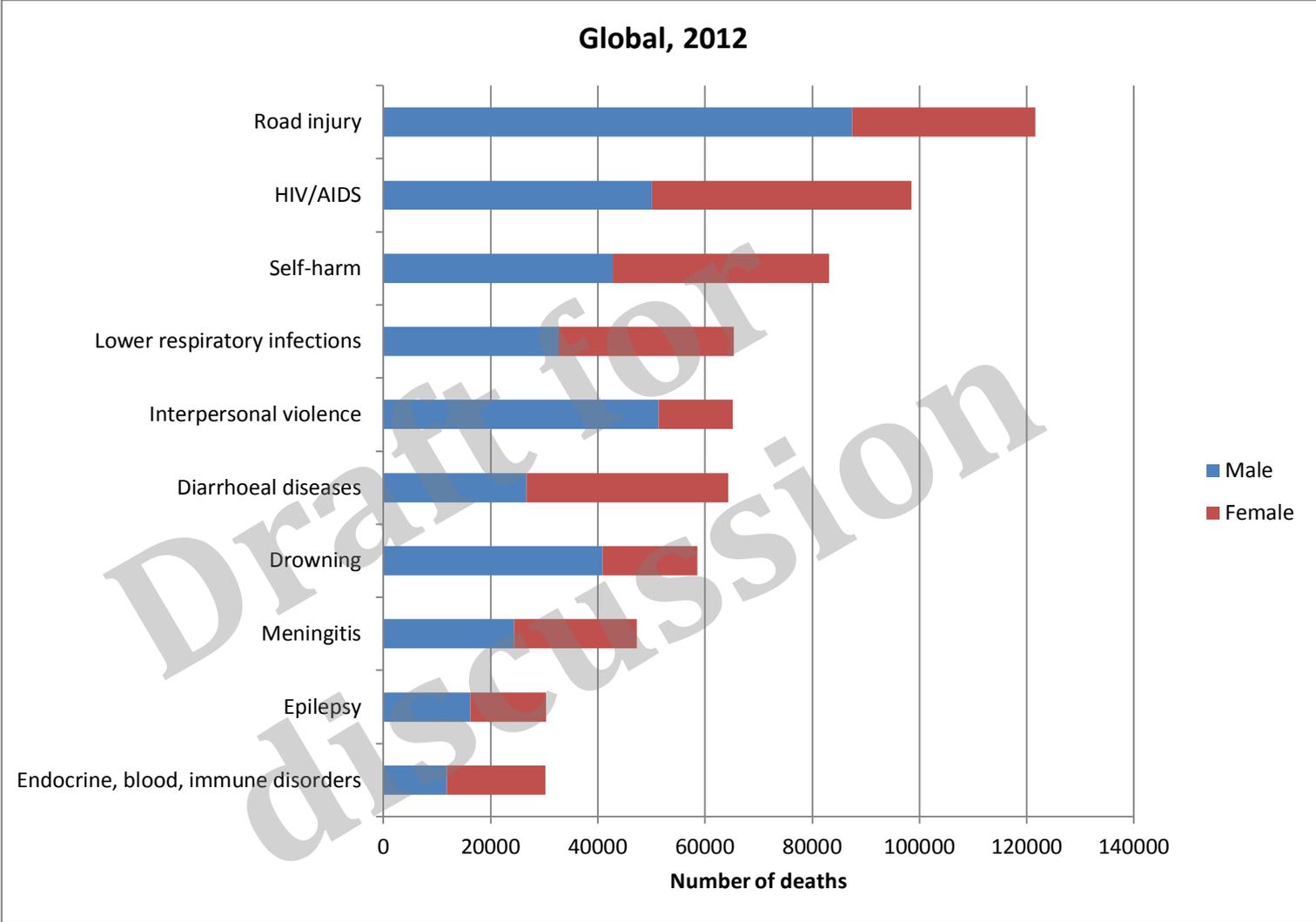
Countries in categories by their maternal mortality ratio, 2013



Sources: Estimates by WHO, UNICEF, UNFPA, The World Bank and United Nations Population Division. 2014.

UN MDG Report 2014.

# 10 Leading Causes of Deaths in Adolescents



## Some milestones on the Every Woman Every Child journey



# Women's, children's and adolescents' health within the Sustainable Development Goals (SDGs)

## *SDG Goal 3. Ensure healthy lives and promote well-being for all at all ages*

A subset of goal 3:

- Reduce the global maternal mortality ratio to less than 70 per 100,000 live births
- End preventable deaths of newborns and under-five children
- Ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all



## Other post-2015 goals and targets for women's, children's and adolescents' health

- Endorse global targets for 2030 **to reduce child mortality to 25** or fewer deaths per 1,000 live births, **newborn mortality to 12** of fewer deaths per 1,000 live births, and to reduce **maternal mortality in all countries to a global ratio of less than 70** per 100,000 live births and a minimum of **75 percent of demand for contraceptives** is met by modern methods
- Invest in **universal access to integrated sexual and reproductive health information, education, services and supplies**
- Recognize the right of marginalized and underserved groups, including **young people, to actively participate as partners in the design of policies and strategies that affect their lives** and health and note the recommendations in the PMNCH youth pre-forum outcome document
- Establish **shared goals with health-enhancing sectors**, such as education, nutrition, water and sanitation, rural electrification, roads, skills and employment
- Commit to **differentiated targets and indicators** to guarantee focus on key populations including adolescents, marginalized and underserved groups, and to take into account different levels of development in countries

*These and other goals are set out in the PMNCH post-2015 position statement (endorsed by 250 organizations) and the 2014 Partners' Forum Communiqué*



## **i. Rationale, political process and timeline**

## The unfinished MDG agenda

- Maintain and accelerate unprecedented progress – end all preventable maternal, newborn and child deaths within a generation
- Need to reach the poorest and most vulnerable - progress differs across and within countries (inequalities, low-income countries and fragile states)

*Develop, secure wide political support for, and begin to implement a global plan during 2014-15 to end all preventable reproductive, maternal, newborn, child, and adolescent mortality for the 2016-2030 period—a new, broader, and more inclusive Global Strategy for Women’s and Children’s Health.*

*iERG 2014, Recommendation 1*



# Supporting countries to realize the Sustainable Development Goals (SDGs)

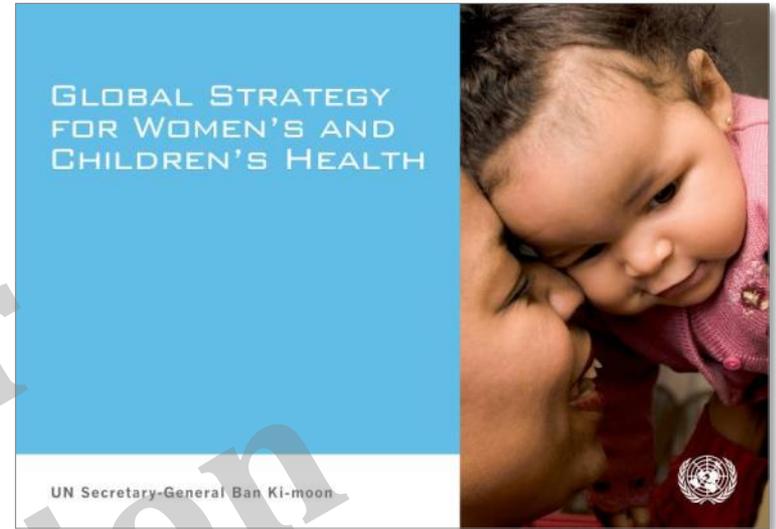


- Keep women's, children's and adolescents' health and rights politically visible within overall health goal and the SDGs
- People-centered goals
- Holistic and inclusive agenda
- Integrative approach recommended within and across sectors
- Evidence on cost-effective SDG investments e.g. Copenhagen Consensus process

# Lessons learned from the Global Strategy since 2010

- ***What worked well***

- Political leadership and commitment
- Multi-stakeholder partnerships
- Focus on accountability
- Every Woman Every Child global movement



- ***What could have worked better***

- Country plans and priorities to lead global collective action
- Coordination and reducing fragmentation with existing and new initiatives, including funding
- Coordinated efforts with other sectors
- Sufficient and effective financing for women's and children's health

# Key issues to consider for the Global Strategy 2016

## *Focus*

- One vision for women's, children's and adolescent's health and development to 2030. Convergence to ensure that women, children and adolescents in low-income countries are not at a higher risk of dying than those in high-income countries

## *Timeline*

- 2016-2030 timeline in-line with SDGs and investment frameworks
- 5-year operational plan, with 5 yearly updates

## *Updating the conceptual framework*

- Build upon strong political recognition, consensus statements, priorities and plans
- Existing content still relevant; integrate new evidence on what works

## *Political mandate*

- Member State endorsement – World Health Assembly, welcomed in SDG Summit outcome document - UN General Assembly (GA), or pursue a GA Resolution?
- Regional bodies, civil society, private sector and other multi-stakeholder partners endorsement through consultations

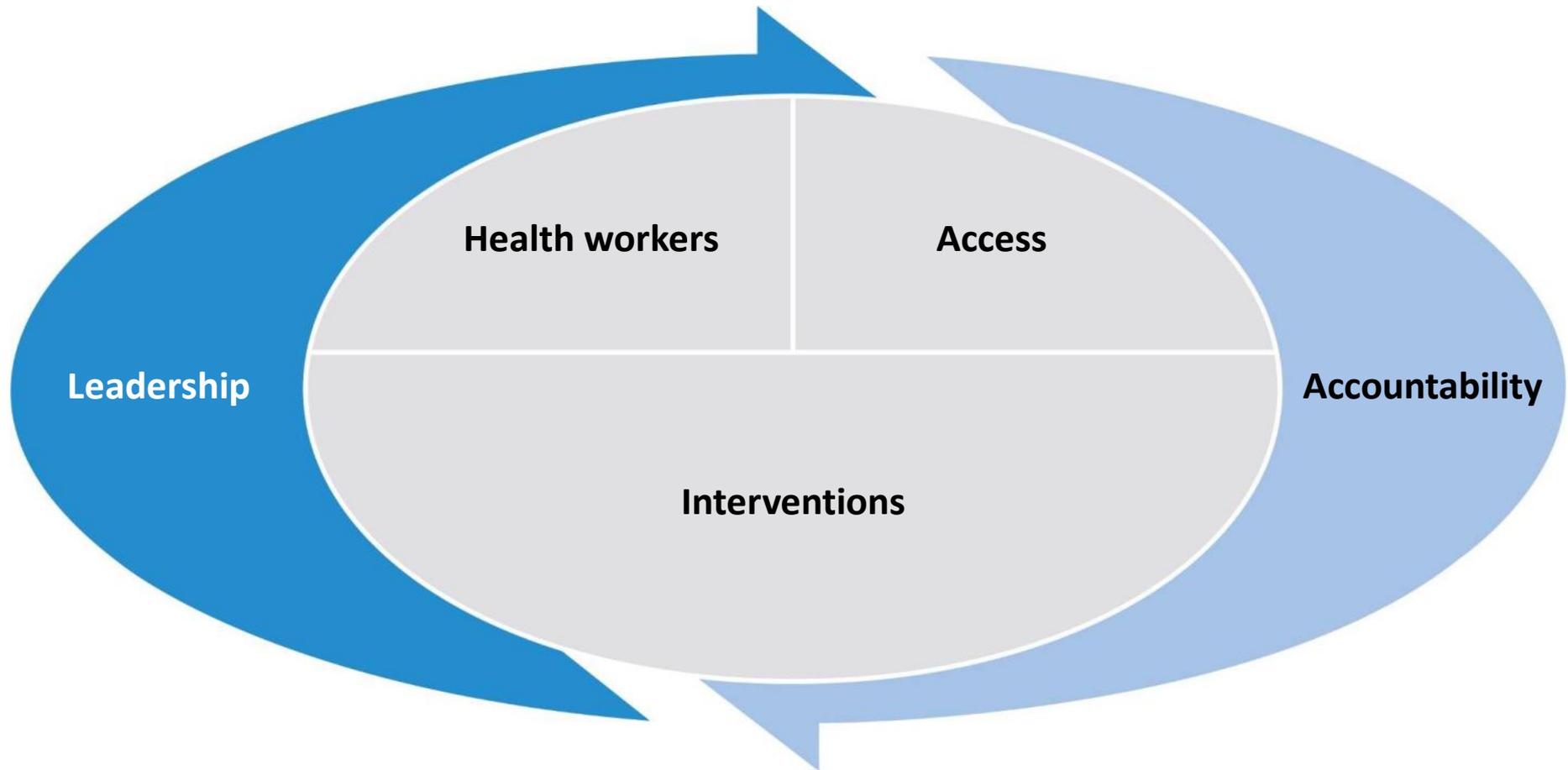
## *Operationalizing the Global Strategy*

- Need to consider from beginning: global architecture and governance, financing mechanisms, communications and advocacy, accountability



## ii. Conceptual Framework & Content Areas

# Global Strategy Framework, 2010 - 2015



# New evidence on 'what works': Rationale for updates

*Focus on women and children in the lowest-income, fragile, and underserved contexts:*

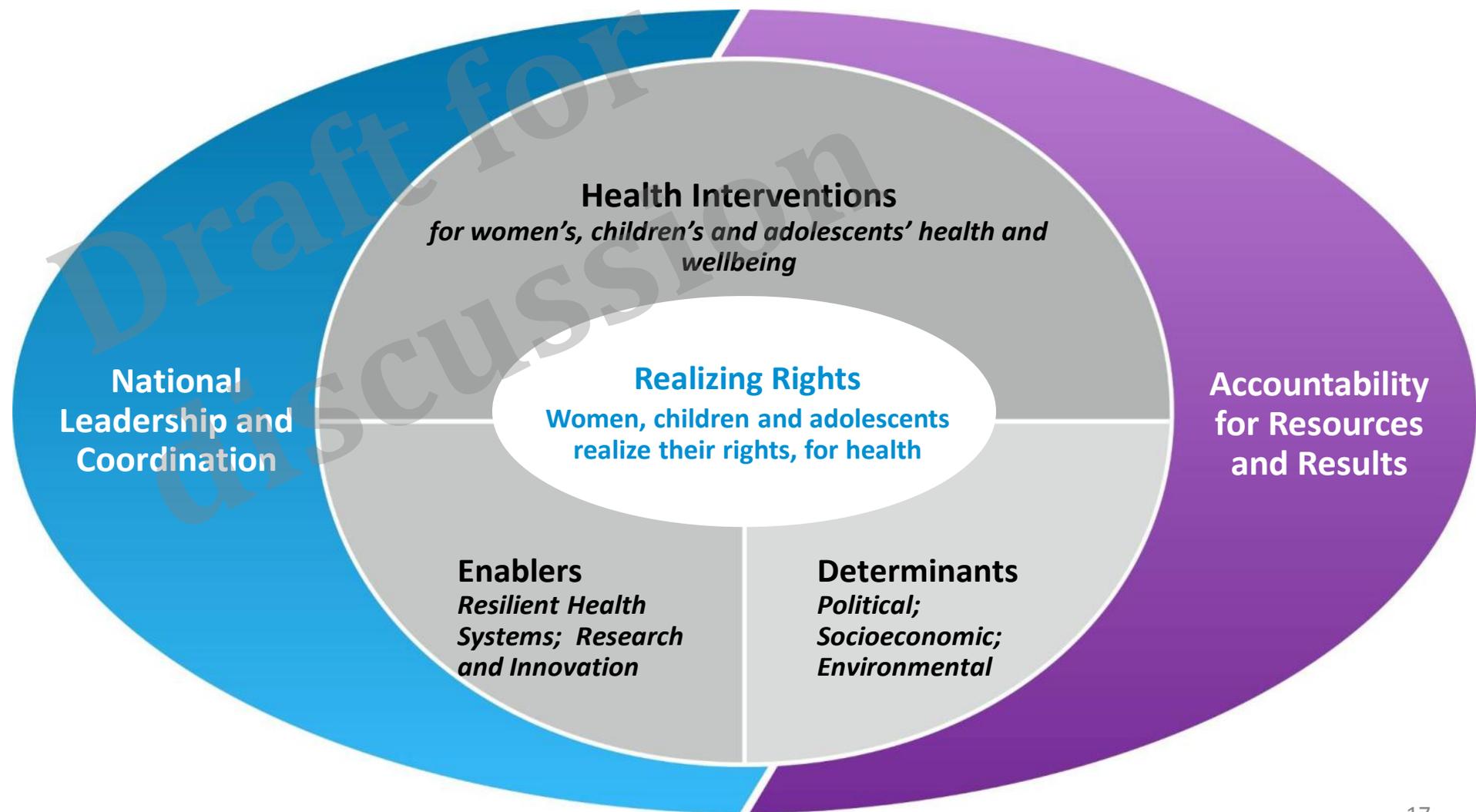
- 1. Investing in health saves lives and has socioeconomic benefits* (e.g. CIH, GIF)
- 2. Health-enhancing effects in other sectors* (e.g. WASH, education, infrastructure)
- 3. Making the right investments for each country's unique context*
- 4. Evidence for decision-making and accountability* (reliable, relevant, timely)
- 5. Innovations that accelerate progress* (interventions and implementation)
- 6. Political vision for health and development and effective management over time*
- 7. A 'triple planning approach' to: address immediate needs; work towards a long-term vision; and adapt to change*
- 8. People's power: women's political and economic participation; community ownership of efforts; rights and legal entitlements, leadership across society*

Note: See slide references for further details.



# Conceptual framework for the updated Global Strategy

Draft for discussion



# Considerations for the conceptual framework and content

- **National Leadership and Development Partnerships** – National plans; parliamentarians, public, private, civil society partnerships and alignment
- **Health Interventions** – end preventable mortality and promote women's, children's, adolescents' health, inc. sexual and reproductive health and rights, and well-being
- **Enablers** – build resilient health systems; promote and use research and innovation across all areas
- **Determinants** – political, socioeconomic, environmental; health and wellbeing effects across sectors
- **Accountability** – at all levels, and effective, efficient mechanisms
- **People's capacities and rights** – recognizing and supporting people's capacities and realization of rights, including in lowest income and underserved contexts

Note: See Working Group Reports slides for further details.



# Accessibility and relevance of the Global Strategy for women, children and adolescents

**Real people**, for example:

Children around the world who will be 10 years old in 2015, school class 5, will be the first generation of adults in 2030



**Real words**, for example:

- i. *Leadership* (Governance and Leadership)
- ii. *Health* (Health Interventions and Enablers)
- iii. *Education* (Social Determinants)
- iv. *Environment* (Environmental Determinants)
- v. *Justice* (Women's and Children's Rights and Accountability)

For Every Woman Every Child

**Leadership**



**Health**



**Education**



**Environment**



**Justice**





### **iii. Operating principles, Overview and Next steps**

# Operating principles for the Global Strategy, 2016

- ***National leadership:*** Strategy structured so that it is led by national plans and priorities, supported by multistakeholder partner alignment, including to reduce fragmentation of efforts and financing mechanisms
- ***Engagement of all stakeholders:*** governments and parliamentarians; multilateral agencies; donors and foundations; private sector; health care professionals – public and private; civil society, youth and media, and women, children and adolescents, especially in underserved contexts
- ***Constituencies beyond RMNCH:*** both within the health sector e.g. with communicable and non-communicable diseases; and with health-enhancing sectors e.g. nutrition, education, water, sanitation and hygiene, infrastructure
- ***Communication:*** effective communication with all stakeholders and constituencies, including the general public, to ensure the accessibility and relevance of the Global Strategy for women, children and adolescents
- ***Human rights-based approach:*** in the development, implementation and review of the Global Strategy, including participation and legal entitlements for women's, children's and adolescents' health
- ***Accountability at all levels:*** efficient and effective mechanisms with a foundation in existing national accountability processes, an independent review component, and harmonization of accountability initiatives

# Draft outline for a new Global Strategy document

- The current situation of women's and children's health
- Forecasts and scenarios on drivers, challenges and opportunities for women's and children's health
- Rationale for updating the Global Strategy for Women's and Children's Health
- Conceptual framework for an updated Global Strategy
- Investment case and projected impact
- Operationalizing an updated Global Strategy
  - National leadership and plans
  - Global architecture to support national leadership
  - Financing mechanisms
  - Innovation and research
  - Advocacy, resource mobilization and stakeholder commitments
  - Accountability for resources and results
- Renewed collective action for women's and children's health



# Proposed work streams for the Global Strategy update



- 1. STRATEGY AND COORDINATION**
  - 2. CONCEPTUAL FRAMEWORK AND OPERATIONALIZATION**
  - 3. FINANCING, INCLUDING THE GLOBAL FINANCING FACILITY**
  - 4. ADVOCACY AND COMMUNICATIONS**
  - 5. ACCOUNTABILITY**
- RESEARCH AND INNOVATION AS CROSS-CUTTING THEMES ACROSS WORK STREAMS**

## Initial thoughts on timeline and next steps

Activities	Timeline
Establish a small number of focused, time-bound and interlinked work streams; work streams start	End-Nov. 2014
Review UNSG report on the current Global Strategy – results and lessons	Feb. 2015
Reconvening EWEC stakeholders to review progress	End-Feb. 2015
Greentree retreat with senior world leaders to set the new Global Strategy direction—convened with UN Secretary-General	Mar. 2015
UN Secretary-General report back to Member States on progress and impact of the <i>Global Strategy</i> for 2010-2015	Apr 2015
World Health Assembly: Draft <i>Global Strategy</i> presented to Member States	May 2015
Consultation process, meetings, workstreams for the Global Strategy	Ongoing
Launch updated Global Strategy, with implementation plan, at the 70 <sup>th</sup> UN General Assembly – SDG Summit	Sept. 2015
Implementation roadmap reviewed with further discussions and recommendations at Women Deliver 2016	May 2016

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# Thank you

For further information:

•Every Woman Every Child website:  
[www.everywomaneverychild.org](http://www.everywomaneverychild.org)

Meeting documents available at:

[http://www.who.int/maternal\\_child\\_adolescent/news\\_events/news/2014/setting-foundation-post2015/en/](http://www.who.int/maternal_child_adolescent/news_events/news/2014/setting-foundation-post2015/en/)

Please also see the link to the online PMNCH Consultation Platform where you are invited to participate in the consultations and provide feedback.

<http://www.womenchildrenpost2015.org/>



EVERY WOMAN  
EVERY CHILD