

**Stakeholder Consultation Meeting on the updated Global Strategy for Women's,
Children's and Adolescents' Health: 26 February 2015
Taj Mahal Hotel, New Delhi, India
9:30 – 10:15 Plenary Session**

Ms Amina Mohammed, Special Advisor to UN Secretary General, Dr Flavia Bustreo, Assistant Director General, WHO, Dr Poonam Khetrapal Singh, Regional Director, WHO, my colleagues from the Ministry: Secretary Shri B P Sharma, Additional Secretary and Mission Director Shri C K Mishra, and Mr Yemurai Nyoni, youth Parliamentarian from Zimbabwe.

Distinguished delegates and friends:

It gives me much pleasure to welcome you here in New Delhi on this pleasant morning. It is indeed an honour for India to be hosting this event. Gathered here is an august house of policymakers, public health professionals, social scientists and activists from across the world.

It is indeed a privilege to address such an audience. I firmly believe that the health of women, children and adolescents is one of the most prominent and pressing agenda for the global community.

Our discussions over the next two days will be based on what we have achieved over the last two decades. I must applaud the quantum of work already done. Since 1990, the global under-five mortality rate has dropped 47 percent. Globally, the maternal mortality ratio dropped by 45 per cent between 1990 and 2013.

Unmet need for family planning has declined from 17 per cent to 12 per cent and global fertility has fallen by 22 per cent between 1990 and 2012. The contraceptive prevalence rate has increased by approximately 10 per cent, world-wide.

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However, much still needs to be done. The Global Strategy for Women's and Children's Health (2010–15) was the first step. We now have to transition to a new Global Strategy for Women's, Children's and Adolescents' Health for 2016–2030.

Ensuring improved health outcomes is an economic and social investment which is an integral part for a robust and thriving economy. Above all, no mother and no child deserves to suffer when the cause of that suffering can be easily prevented, managed and mitigated.

Health and public health concerns, especially those related to women and mothers, children and adolescents, are central to the governance agenda of Prime Minister Shri Narendra Modi's government and our country.

After all, the health of women, young adults and children is not just the concern of the global community, but it is our own national commitment and I take this opportunity to reaffirm it.

Distinguished delegates,

I note with satisfaction the progress India has made in the recent years: under-five mortality rate has come down by over 61 per cent between 1990 and 2013. The neonatal mortality rate has registered a 47 per cent decline between 1990 and 2013. While the maternal mortality indicators have come down substantially, making for a reduction of nearly 70 per cent between 1990 and 2013. **At this point in time I am very hopeful that India may achieve its targets for both MGD 4 and 5.**

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Drawing on the lessons learned we have strengthened the existing traditional areas of work and identified newer focus areas. India has moved from its earlier focus on Reproductive and Child Health (RCH) to a new strategic approach, the RMNCH+A, focusing attention on all the life stages including adolescents. This new approach emphasizes inter-linkages between each of the five pillars under RMNCH+A, and connects community and facility based services.

We are committed to the cause of new born health. The India New-born Action Plan (INAP) is a structured and evidence based attempt to eliminate all preventable new-born deaths and still births, and to scale up high-impact but cost-effective interventions.

I strongly believe that our adolescent health programme, the Rastriya Kishor Swasthya Karyakram (RKSK) which addresses the concerns and needs of 253 million strong population group, is the key that can help us break the cycle of ill-health, poor social indices and poverty.

Our maternal and child health programmes such as the Janani Suraksha Yojna (JSY) and the Janani Shishu Suraksha Karyakram (JSSK) provide active incentives for institutional deliveries. Every woman who delivers a baby in a public health facility is guaranteed free medical care, free drugs and medicines, free diagnostics, support for a nutritious diet and transport. These entitlements also cover sick infants, and antenatal and post natal complications. As a result institutional delivery has increased from a pre-programme average of 40.7% in 2005-06 to 74.4% in 2013.

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Building on India's successful battle against wild polio, India's universal immunisation programme has been expanded to introduce three new vaccines for children: those against rotavirus, rubella and polio – targeting rotavirus, the leading cause of diarrhoea and among the biggest killers of children in our country.

On December 25, 2014, India has launched an ambitious programme called 'Indradhanush' to ensure vaccination of each and every left out and missed out child in India against seven vaccine-preventable diseases by 2020. These diseases include diphtheria, whooping cough, tetanus, polio, tuberculosis, measles and hepatitis B by 2020.

However challenges remain - there are large inequalities across and within states in India. To address these, we have shifted our focus to geographical areas of greatest concern and populations that carry the highest burden of illness and mortality.

Global progress too has been uneven. Progress differs across and within countries. We need to reach the poorest and the most vulnerable. We need to pay special attention to low-income countries, and fragile states and vulnerable groups such as adolescents and youth, older persons, persons with disabilities and indigenous peoples.

Friends,

All of us have a stake in the success of RMNCH + A. Appropriately timed pregnancies; nurturing and nutrition of adolescent girls; caring for pregnant mothers; safe, institutional deliveries; giving new-borns the best

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possible welcome and start in life; seeing these new-borns through infancy and early childhood; and finally a safe, secure and risk-free adolescence: this is what we must strive for globally. Countries across the world owe it to their citizens, I feel.

Today, we have an important opportunity to shape the development priorities of the future. Let us not squander it. Let us lead from the front.

I conclude with a thought from the father of our nation, Mahatma Gandhi

“A small body of determined spirits fired by an unquenchable faith in their mission can alter the course of history.” And I believe that this is possible.

I wish you all a successful conference and fruitful discussions.

JAI HIND