

STAKEHOLDERS CONSULTATION MEETING

ON THE UPDATED GLOBAL STRATEGY

FOR WOMEN'S, CHILDREN'S AND ADOLESCENT'S HEALTH

26 - 27 FEBRUARY 2015, NEW DELHI, INDIA

Every Woman Every Child Stakeholder Consultation Meeting On the Updated Global Strategy for Women's, Children's and Adolescents' Health

26-27 February, New Delhi India

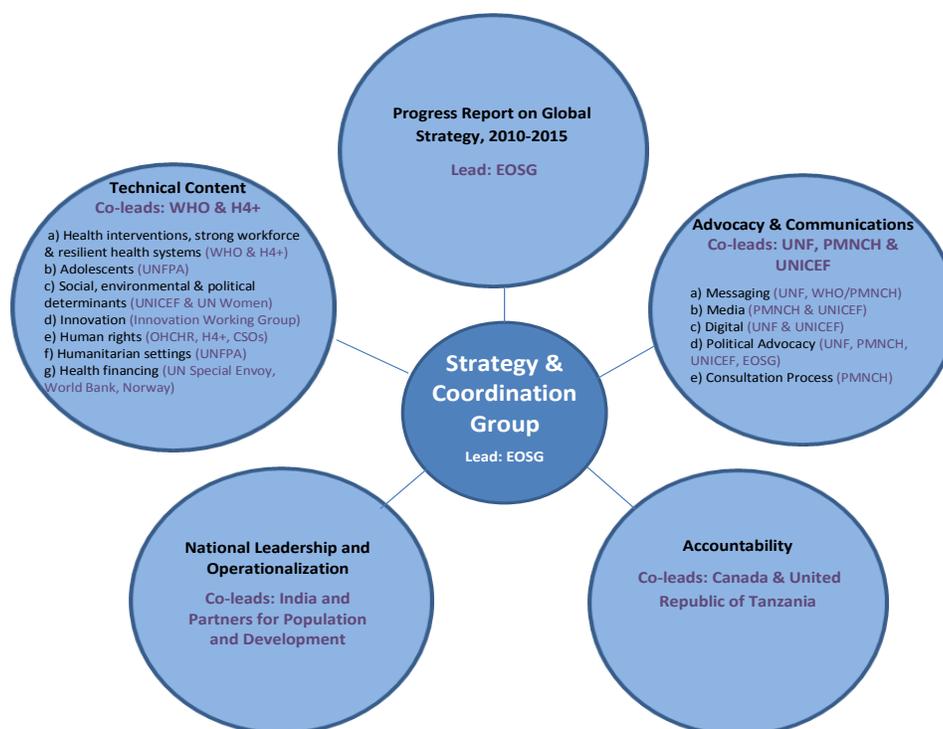
SUMMARY OF MAIN OUTCOMES

The *Every Woman Every Child Stakeholder Consultation on the Updated Global Strategy* was co-hosted by the Government of India in collaboration with the *Every Woman Every Child* movement and Partners for Population and Development with the World Health Organization and the Partnership for maternal, Newborn and Child Health providing organizational support. The meeting brought together over 200 senior representatives from governments, civil society, health care professional associations and academia, the private sector and international organizations to discuss and provide feedback on updating the *Global Strategy for Women's, Children's and Adolescents' Health*.

The iERG in its 2014 report highlighted the need for an updated Global Strategy for Women's, Children's and Adolescents' Health for the post-2015, which was endorsed by stakeholders in November 2014 for launch in September 2015 alongside the Sustainable Development Goals vision and targets.

The meeting in New Delhi was a key milestone on the road to updating the Global Strategy. Over 250 stakeholders have been engaged in 6 work streams and 12 sub work streams (see diagram on the following page).

The work streams developed papers that provided the technical basis for the Global Strategy update based on the gaps and lessons learned in the current Global Strategy and new evidence, including the need to focus on humanitarian settings, critical population groups including newborns and adolescents, neglected issues such as stillbirths and emerging areas such as reproductive health cancers and gender-based violence. Work streams also highlight the build the resilience of health systems, improve the quality of health services and equity in their coverage, promote innovation and research, and work with health-enhancing sectors on issues such as education, women's political and economic participation, and water, sanitation and hygiene. Gender, equity and human rights were discussed as foundational principles and practical approaches to improve women's, children's and adolescents' health.



In preparation for the meeting, there were important pre-consultation meetings convened to feed into the broader process, including consultations on adolescent health, humanitarian settings (which put forth the [Abu Dhabi Declaration](#)), and early child development; and consultations held in New Delhi the day before the main meeting on national leadership and operationalization, enhancing the role of the private sector, and a meeting of over 60 civil society organizations. The outcomes and conclusions from those meetings fed into the main Stakeholder consultation meeting on the 26 and 27 February.

The meeting had three main objectives and this report provides a brief summary of the main outcomes.

MEETING OBJECTIVES AND OUTPUTS

1. Leadership from countries to promote political and stakeholder engagement in updating and implementing the *Global Strategy for Women's, Children's and Adolescents' Health*.
2. Stakeholder recommendations on the content, process and next steps from different work streams to update the *Global Strategy*.
3. Roadmap and next steps, including specific stakeholder contributions to finalize and operationalize the *Global Strategy*.

1. LEADERSHIP FROM COUNTRIES

The Government of India is leading the work stream on national leadership of the Global Strategy along with Partners for Population and Development (PPD), which provides a policy platform for south-to-south collaboration on issues related to population, health and development. There are currently 22 governments that are part of this work stream, of which 18 were present at the meeting. A strong message coming from the Government of India and echoed by other country representatives was the appreciation for the fact that countries are taking a lead role in updating the Global Strategy.

Broader outreach is planned supported by H4+ organizations and other partners. This work stream will ensure that countries play a key role in leading and implementing the Global Strategy through their national strategies, policies and programmes and allocating sufficient financial resources for its implementation.

Both the governments of India and Nigeria, among the largest countries in their respective regions, presented their experiences and recommendations progress on implementing strategies for women and children. Their recommendations include the clear need for government leadership as important to wide-scale implementation with the inclusion of a broad range of stakeholders, including the private sector. Effective operationalization also requires capacity building and a strong work force.

Outcomes from this work stream include:

- Countries have committed to continuing and deepening their engagement in the update of the Global Strategy. For example, Partners for Population and Development is reaching out to countries for the drafting of the working paper on National Leadership, and has agreed to continue to engage their members through several mechanisms, including the integration of the work on the Global Strategy into PPD's next 5-year plan. See more [here](#).
- India committed to co-chairing the writing group for the Global Strategy, and several countries expressed high level political support and interest in continuing to engage in the process.
- Members of Parliament committed to reporting back to their respective Ministers of Health to seek political support. Members of Parliament also agreed to report to the Standing Committee on Human Rights and Democracy in the context of the upcoming Parliamentary Union General Assembly, and a side session is being organized at the Assembly in March 2015 on the updated Global Strategy.

2. STAKEHOLDER RECOMMENDATIONS TO WORK STREAMS

The meeting included thirteen work groups that convened to discuss inputs to the various work streams discussion papers, with the purpose of agreeing to content and identifying gaps, setting priorities, and making concrete actionable recommendations for the updated Global Strategy. The work groups included a mix of countries, civil society, youth representatives and private sector participants that provided cross cutting inputs into the various work streams and papers.

Emerging consensus and feedback from the work streams:

National Leadership and Partnerships – Principles to Practice: Country ownership, leadership and buy-in is critical to the success and implementation of the updated Global Strategy. Discussions touched on the need for greater domestic and devolved financing. Work stream members agreed on a draft national leadership framework, and recommend the integration of: a human rights approach, that goes beyond the right to health; decentralization and devolution of powers; and feedback from the community. There were also discussion on adapting learnings from other sectors and industries to improve mechanisms for quality of health service delivery.

Every Adolescent: Adolescents are the Sustainable Development Goals (SDG) generation. A ten year old in 2016 will be 25 in 2030, when the SDGs era ends. The focus on adolescents was not adequately addressed in the previous strategy so the addition of adolescents as a focus for the updated Global Strategy is welcome. It was agreed that there is a need for more focus and prioritization for this work stream.

Every Setting – Humanitarian to sustainable development contiguum. There is an overwhelming recognition of the need to focus on humanitarian settings. The updated Global Strategy will need to address needs of needs of women, children and adolescents living in humanitarian settings, as the

data shows that 51 fragile states account for 60% of maternal, 53% of under-five and 45% of newborn mortality.

Engage with health influencing sectors: Other sectors, including education, women's and political economic, water, sanitation and hygiene, ambient and household air pollution contribute to 50% of mortality reduction. There was consensus that health influencing sectors are required in the updated Global Strategy, however more clarity is required on which sectors are the most important to engage with and how best to engage. Discussions also focused on avoiding fragmentation and linking to other agendas including Universal Health Coverage.

Human-Rights based approaches: The centrality of human rights based approach for the updated Global Strategy was discussed with a particular focus on creating an enabling legal and policy environment for the promotion and protection of health and human rights of women, children and adolescents. Discussions focused on ways to ensure greater attention on these issues within existing UN human rights mechanisms and also explore the possibility of a global commission on health and human rights, as recommended by the iERG. Future discussions will need to determine the scope and viability for this commission and ensure that it builds on existing mechanisms rather than creating new ones.

Refreshed approach to accountability: There was overall consensus that the accountability framework had gained traction in countries and that the Commission on Information and Accountability recommendations remain valid and relevant. It was generally agreed that the updated accountability framework should build on the successes of the existing accountability framework and ensure accountability at national and global levels, including clear roles for Parliamentarians, private sector and civil society to strengthen accountability. Further discussions are required around the future governance structure for the accountability framework. In addition, future discussions are required on how commitments will be organized and managed, learning from the lessons of commitments to the current Global Strategy.

Build on success of current Global Strategy: The Progress Report on the first Global Strategy, to be launched on 10 March 2015, highlights the success of multi-stakeholder partnership and mobilizing high level political commitment, both of which should continue in the updated Global Strategy.

Private Sector as a key partner: The private sector pre-consultation identified four key areas where the private sector can contribute, namely innovation, technologies, strong management and human resources skills, and financial resources.

Innovation requires continuous improvement and investments and that although technology and commodities are important, innovation is required in all areas, including sexual and reproductive health, human resources accountability and health systems.

Civil society plays an important role in enhancing cross-ministerial and cross-sectorial collaboration given that they often work on a range of issues, including health, nutrition, water and sanitation, and the environment. Civil society emphasized the need to focus on equity and non-discrimination –as well as the importance of defining adolescent needs beyond only sexual and reproductive health to encompass health and well-being.

Ask the uncomfortable questions: Along with the successes, participants reflected on some of the weaknesses and gaps, such as stillbirths, inequity, nutrition, the need for one accountability mechanism. Participants urged the community to use the opportunity of updating the Global Strategy to address any gaps.

Keep the focus on real lives, and what makes change!

3. ROADMAP AND NEXT STEPS

To date, over 250 stakeholders have provided inputs into the work streams and discussion papers. There are additional opportunities to provide inputs, for example, working papers will be posted online on 20 March with the opportunity to provide comments through the online consultation process. All comments and feedback will need to be provided by 2 April. Comments can be provided through the following website: <http://www.womenchildrenpost2015.org/>. The first draft of the Global Strategy will be ready in mid-May around the time of the World Health Assembly. The diagram below provides more details on the timeline for the updating of the Global Strategy.

Other opportunities for consultation:

1. The **Government of South Africa** plans to host a consultation on the Global Strategy, tentatively set for 6-7 May 2015. This will be an opportunity for stakeholders, particularly from the African region to provide inputs into the Global Strategy and to begin the process of developing the implementation plans.
2. Several countries will organize [Citizen Hearings](#) which are country level gatherings of community and government leaders to listen to and act on the views of citizens on national priorities for women's, children's and adolescents' health. This is an opportunity for community level voices to be included in the updated Global Strategy. The culmination of the various country level hearings will be heard at a global level event around the time of the World Health Assembly.
3. Other global events such as the **Commission on the Status of Women** (March 2015 in New York) and the **Inter Parliamentary Union Assembly** in Hanoi (March 2015) also provide key opportunities to provide input to the updated Global Strategy.
4. At the World Health Assembly in May 2015 there will be an event discussing the draft of the Global Strategy.

TIMELINE in 2015 for developing the GS Working Papers and Main Document



MORE INFORMATION AND USEFUL LINKS

The meeting agenda and presentations are available on this link:

<http://www.who.int/pmnch/activities/advocacy/globalstrategy/delhi1/en/index5.html>

The meeting webcast archive is available until end March 2015 at the following link:

<http://globalstrategymeeting.vsworld.com/vod/>

There are opportunities to contribute to the discussions. Please visit the Every Woman Every Child website: www.everywomaneverychild.org .

Please also see the link to the online PMNCH Consultation Platform, where you are invited to participate in the ongoing consultations of the updated Global Strategy. <http://www.womenchildrenpost2015.org/>