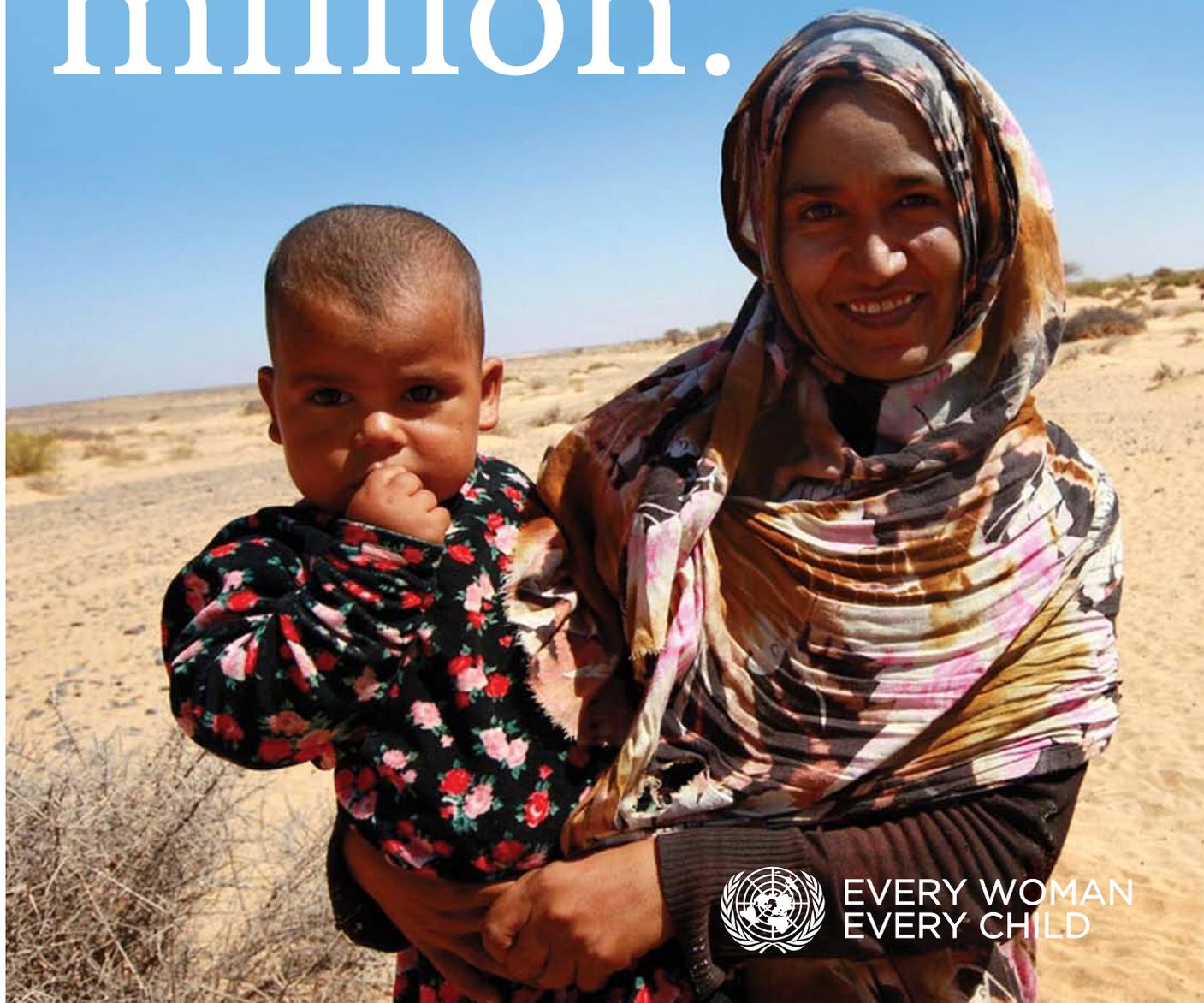


Saving the lives of 16 million.

SEPTEMBER 2011 UPDATE

Global Strategy for Women's
and Children's Health



EVERY WOMAN
EVERY CHILD

16 million lives... what does it mean to save even one?

“They told us [my son] is suffering from pneumonia... If I have another child I will definitely get the baby vaccinated.”

— Ali Abdulla
Father, Yemen

“I now feel more confident because [the community health worker] visits me and gives me advice about how to care for my child and myself.”

— Maria
Mother, Guatemala

“Three years ago, women did not want to deliver here. We had no labor table and no water supply. Today 100 percent of women come here for childbirth. Once, I conducted three deliveries in a single night.”

— Giatre Bhatachaza
Midwife, Bangladesh



Credit: UN Photo / Eskinder Debebe

ABOVE Secretary-General Ban Ki-moon visits Merawi Health Centre, located outside Bahir Dar in rural Ethiopia

The launch, one year ago, of Every Woman Every Child and its roadmap, the Global Strategy for Women’s and Children’s Health, was a hopeful moment for the international community. After years of working to lower the world’s alarming death rates among women and children, an inspiring multi-stakeholder partnership promised to accelerate action against this terrible injustice.

Every Woman Every Child was designed to yield measurable results. It combines the best thinking on how to proceed with concrete pledges for action. Moreover, the international community committed itself to a robust process of monitoring and accountability to ensure that promises would be kept and targets would be reached.

One year on, we are seeing the very real results that Every Woman Every Child was meant to generate. Nearly 200 partners, including more than 50 countries, have joined the effort. An accountability framework has been developed. Networks around the world are bringing together different players, generating new technologies and new business models.

These actions are combining to save lives. The number of mothers dying from pregnancy and childbirth-related causes is decreasing, and the number of children surviving beyond their fifth birthday has grown.

This is an important start – but we have a long way to go to reach our goal of saving 16 million lives by 2015 and securing the well-being of every woman and every child. That is why, while we pause to look back at what has been achieved in the past year, we must also pick up the pace in addressing the tasks that remain.

Every Woman Every Child is a global effort involving a wonderful array of partners, from governments to grassroots groups, from medical professionals to aid workers, from conscientious corporations to caring citizens. Now is the time for all to step up their involvement.

Together, we can protect the health of our world’s women and children, and enable them to help secure our common future.

BAN KI-MOON
Secretary-General, United Nations

Building momentum

Every Woman Every Child is a collective effort to save the lives of millions of women and children, and accelerate progress towards the Millennium Development Goals (MDGs).

This update on progress outlines what has already been achieved through this unprecedented leadership effort. It underlines the corresponding need for a continued, ambitious and united push to improve the health of women and children worldwide.



“All partners are accountable for the promises they make and the health policies and programs they design and implement. Tracking resources and results of public health spending are critical for transparency, credibility and ensuring that much-needed funds are used for their intended purposes and to reach those who need them most.”

– Jakaya Kikwete
President of the Republic of Tanzania
co-chair of the Commission on Information and Accountability

Credit: Tom Pietrasik / WHO

NATIONAL IMPACT

Over the last year, a wide range of new partners have joined together to advance the Every Woman Every Child effort. They include over 20 more countries – from Madagascar to Mongolia, Burundi to Vietnam – which have each pledged to reduce the preventable deaths of women and children through strengthened national efforts. Existing partners are already implementing past commitments and making new ones.

These commitments are ambitious but achievable. They include training more midwives, providing better family planning services, improving access to emergency obstetric care, extending access to life-saving vaccines and preventing mother-to-child transmission of HIV/AIDS.

Uganda, for example, has committed to ensuring at least 80% of children under five suffering from diarrhea, pneumonia or malaria have access to treatment.

More Funding for Health – Achieving and sustaining better health for women and children requires increased, long-term and scaled-up investment. Since the launch of this effort, the global community has made real progress in finding the extra resources needed.

As part of the new funding committed in 2010, many countries have pledged to allocate significant additional resources from their own budgets towards improving women's and children's health. Global partnerships have also galvanized increased funding to support these efforts.

In October 2010, the UN Secretary-General chaired the replenishment of the Global Fund to Fight AIDS, Tuberculosis and Malaria for 2011-2013. Public and private donors pledged \$11.7 billion, a large percentage of which will go towards improving women's and children's health. Through the GAVI Alliance, partners from all sectors came together in June 2011 to increase resources for life-saving vaccines. An additional \$4.3 billion was committed for 2011-2015 at the event, co-hosted by the governments of the United Kingdom and Liberia, and the Bill & Melinda Gates Foundation. These resources will make a huge difference to the health of women and children.



National Leadership – Governments are matching their investment with effective national policies and improved service delivery. In Burkina Faso, new commitments made to provide free family planning, improved emergency obstetric and neonatal care, and subsidized birth and child health care services have already been costed and included in the Health Ministry's plan of action. In Nepal, the commitments made to Every Woman Every Child are all included in the national health strategy of 2010-2015. In Bangladesh, the Government committed to train 3,000 new midwives by 2015. The first class of midwives graduated in May 2011.

Collective Support – The United Nations, its agencies and other international organizations are coming together in an unprecedented way to support the efforts of countries to improve women's and children's health.

WHO, UNFPA, UNICEF, UNAIDS and the World Bank are coordinating extra funding and providing expertise and practical assistance at a national and local level. Working and delivering under country leadership, agencies are focusing together on those communities with the highest mortality among women and children. One core area is determining human resource gaps and how to address them. In June 2011, 30 partners launched the "State of the World's Midwifery: Delivering Health, Saving Lives" report at the Triennial Congress of the International Confederation of Midwives hosted by South Africa.

With the launch of UN Women, the new UN organization dedicated to gender equality and the empowerment of women, the global community took a historic step in accelerating and focusing our goals to improve the lives of women and girls.

Securing results

Improving accountability, measuring results and encouraging innovation are key to achieving the goals of Every Woman Every Child. In all three areas, the last 12 months have seen the right foundations put in place to ensure resources are used effectively and collaboratively, and that best practices can be widely shared.

GLOBAL IMPACT

Keeping Promises – The increased focus provided by Every Woman Every Child has led to remarkable commitments for women’s and children’s health. Improving accountability and transparency helps ensure commitments are met in full and on time, and are critical to achieving the objectives of this effort.

Over the past year, the Commission on Information and Accountability for Women’s and Children’s Health, co-chaired by President Jakaya Kikwete of Tanzania and Prime Minister Stephen Harper of Canada, and vice-chaired by the Director-General of the World Health Organization and the Secretary-General of the International Telecommunication Union, was convened to develop a one-of-a-kind framework for global reporting, oversight and accountability. The Commission’s final report, released in May 2011, outlines 10 practical recommendations to improve the collection of evidence-based information and to enhance the ability of countries and international stakeholders to monitor resources and results. The report also outlines 11 indicators to be tracked in all of the 74 countries with the highest burden of maternal and child mortality.

The Commission recommended establishing an independent Expert Review Group to submit regular reports to the UN Secretary-General from 2012 to 2015. The group will review progress of the effort and implementation of the Commission’s recommendations, identify potential roadblocks, and recommend how the accountability process can be made more effective.

By encouraging all stakeholders to take ownership for monitoring resources and progress, Every Woman Every Child is building a strong foundation for accountability that will keep women’s and children’s health on national agendas beyond 2015.

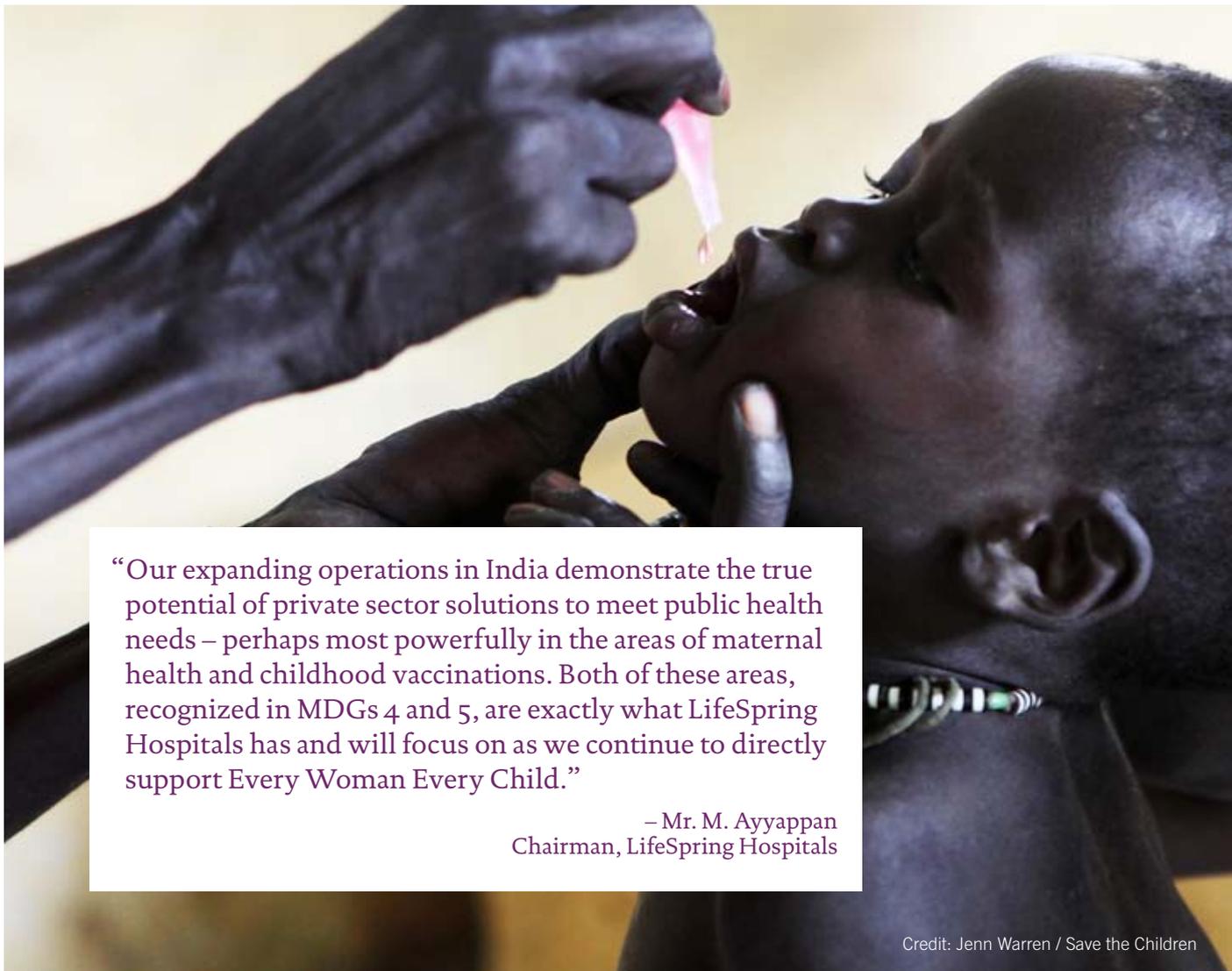
IRIGHTI Regina, three, receives a polio vaccine during the Paringa Child Health Day in Kapoeta North County, Southern Sudan

IBELOWI Midwifery training class in Faizabad Provincial Hospital, Afghanistan



Credit: UNFPA / Afghanistan / Bill Ryan





“Our expanding operations in India demonstrate the true potential of private sector solutions to meet public health needs – perhaps most powerfully in the areas of maternal health and childhood vaccinations. Both of these areas, recognized in MDGs 4 and 5, are exactly what LifeSpring Hospitals has and will focus on as we continue to directly support Every Woman Every Child.”

– Mr. M. Ayyappan
Chairman, LifeSpring Hospitals

Credit: Jenn Warren / Save the Children

Measuring Commitments – An analysis of the unprecedented effort underway through Every Woman Every Child has identified examples of progress, gaps and needs, as well as opportunities for improving women’s and children’s health. The Partnership for Maternal, Newborn and Child Health (PMNCH) has highlighted the sheer breadth, variety and ambition of commitments to the Global Strategy to date. The Partnership welcomed the recognition of the need to support couples when planning families and to train more skilled birth attendants, including midwives. But the report also identified areas yet to be addressed, particularly around care for newborn children and funding and other support for high-burden countries. Malaria and nutrition continue to receive limited attention despite the high impact of proven interventions.

Encouraging Innovation – Technological advances provide remarkable opportunities to improve high-quality, affordable and appropriate care for women and children across the world. Every Woman Every Child is encouraging exciting new developments not only in harnessing technology but

also in innovative business models and partnerships. These successes must be expanded and extended.

Among the promising initiatives highlighted in a report by the Every Woman Every Child Innovation Working Group are:

- ColaLife: Using retail distribution networks in Zambia to bring vital medicines to under-served communities.
- HERproject: Private sector training of factory workforces across the globe to provide health education for young women through their peers.
- Cell-Life: Providing mothers with health care tips and reminders using mobile phone text messaging.

New business models have been catalyzed by the Every Woman Every Child effort to deliver better health care to households, improve government health systems and serve companies’ needs. The challenge now is to expand and extend initiatives with life-saving potential.

New Partners, New Leadership

Governments hold the ultimate responsibility for the health of their citizens. Every Woman Every Child illustrates that all partners have an important role to play. By harnessing skills and expertise from all sectors and encouraging new partnerships, a broad coalition has been forged.

Civil Society – Members of civil society from across the globe – NGOs, health care professionals, researchers and academics – have championed the cause of women's and children's health nationally and internationally, ensured communities have a voice in shaping agendas and, by harnessing technology and innovation, improved the delivery of care on the ground.

NGOs are also key contributors in developing and promoting the accountability necessary to deliver the goals of Every Woman Every Child. Meanwhile, health care professional associations and the academic and research community are scaling up collaboration with essential stakeholders at many levels, especially in country.

Private sector – One year into the Every Woman Every Child effort, an evolution in business engagement on women's and children's health is underway. Along with traditional philanthropic giving through product or financial donations, we are seeing companies marry market-based strategies and resources to tackle specific health problems.

Striking examples of new private sector engagement:

- Merck has committed its expertise, human and financial resources to help reduce maternal mortality by 75%. It has started with a 10-year, company-wide initiative to accelerate access to proven solutions and to develop new innovative technologies.
- WaterHealth International has pledged to expand their safe and affordable clean water solutions into Bangladesh, Nigeria and Liberia in 2011-2012. This will result in three million people having improved access to clean water, lowering incidents of diarrhea in children and other waterborne diseases.

- In Nigeria, the local business and philanthropic communities are collaborating in support of Every Woman Every Child. The Wellbeing Foundation of Nigeria will focus on strategic grant-making and the Tony Elumelu Foundation will manage the first-ever impact investment fund for women's and children's health.

Global partnerships – Driving improvements in the health of women and children requires resources, knowledge and expertise from around the world. Every Woman Every Child is catalyzing new results focused partnerships.

Countdown to Zero is a new global plan to eliminate new HIV infections among children and reduce AIDS-related maternal deaths. It was launched by Nigerian President Goodluck Jonathan and former US President Bill Clinton in June 2011 during the UN High-level Meeting on AIDS.

In another example of world leaders making a decisive move to tackle global health challenges, the Scaling Up Nutrition Movement (SUN) has brought together over 20 countries and more than 100 local, national and international stakeholders to support households – and women in particular – to improve their own and their children's nutrition. By 2015, SUN aims to reduce the stunting of young children and nutrient deficiencies in women and children, improving or saving millions of lives and decreasing the risk of non-communicable diseases such as diabetes later in life.

NEARLY

250
MILLION
CHILDREN WILL BE
IMMUNIZED

“We must intensify our efforts and find innovative breakthroughs. The health-related MDGs, particularly MDGs 4 and 5, are cornerstones for achieving all others.”

– Susilo Bambang Yudhoyono
President of Indonesia

Taking action

Since its launch in September 2010, Every Woman Every Child can point to inspiring progress. The Global Strategy for Women's and Children's Health has come to life and is being implemented around the world. Resources have been allocated, policies and programs put in place, and new partnerships and commitments established.

Every Woman Every Child shows that all partners have an essential role to play in improving women's and children's health. But we urgently need to step up progress including through the involvement of new partners and increased delivery of new commitments, if we are to meet the ambitions of the Millennium Development Goals and our aim to save 16 million lives by 2015.

There is no single format for commitments. Examples include:

- **Policy commitments** that put women and children at the center, mobilize political support and improve accountability.
- **Service delivery commitments** that ensure women and children have access to life-saving prevention, quality treatment and care when and where they need it.
- **Financial commitments** that increase domestic resources or support governments and other key actors in a country.

To make a commitment, please visit

www.everywomaneverychild.org

“The most important part of making promises is keeping them. We have commissioned an independent auditor to assess what we are doing to fulfill our commitments to the Every Woman Every Child strategy, and we are encouraging all others to do the same.”

– Jasmine Whitbread
International CEO of Save the Children



Credit: UNFPA / South Africa / John Robinson

ABOVE! More than 1,000 midwives took to the streets of Durban to draw attention to the lack of midwives in the world

We all have a role to play

Stakeholders that have made commitments in support of Every Woman Every Child

GOVERNMENTS

- Afghanistan
- Australia
- Bangladesh
- Benin
- Burkina Faso
- Burundi
- Cambodia
- Canada
- Central African Republic
- Chad
- China
- Comoros
- Congo
- Democratic Republic of Congo
- Ethiopia
- France
- Germany
- Ghana
- Guinea
- Haiti
- India
- Indonesia
- Israel
- Japan
- Kenya
- Kyrgyzstan
- Lao PDR
- Liberia
- Madagascar
- Malawi
- Mali
- Mongolia
- Mozambique
- Myanmar
- Nepal
- Netherlands
- Niger
- Nigeria
- Norway
- Papua New Guinea
- Rwanda
- Sao Tome & Principe
- Senegal
- Sierra Leone
- Sweden
- Tajikistan
- Tanzania
- Togo
- Uganda
- UK
- USA
- Uzbekistan
- Vietnam
- Yemen
- Zambia
- Zimbabwe

PHILANTHROPY & FUNDERS

- The Bill & Melinda Gates Foundation
- The Centre for Infectious Disease Research in Zambia
- Children's Investment Fund Foundation
- The David and Lucille Packard Foundation

- The International Network of Women's Funds
- Empower
- Ford Foundation
- The John D. and Catherine T. MacArthur Foundation
- Geddes Group
- Global Fund for Women
- Grand Challenges Canada
- Medtronic Foundation
- Planet Wheeler Foundation
- United Nations Foundation
- The Women's Funding Network
- TY Danjuma Foundation

UN, MULTILATERALS & PARTNERSHIPS

- Countdown to Zero
- The Elders
- The GAVI Alliance
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- Inter-Parliamentary Union
- Organization of the Islamic Conference
- The Partnership for Maternal, Newborn & Child Health
- UNAIDS
- UNFPA
- UNICEF
- United Nations Global Compact
- The World Bank
- WHO

CSOS & NGOS

- 34 Million Friends of the United Nations Population Fund
- Action for Global Health
- Africa Medical & Research Foundation
- Akaa Project
- American Academy of Pediatrics
- Amnesty International
- The BBC World Service
- BRAC
- CARE
- Caring & Living as Neighbors
- DKT International
- D-Tree
- EngenderHealth
- Family Care International
- FHI 360
- Friends of the Global Fund Africa
- Global Alliance for Improved Nutrition (with DSM and Herbalife)
- Global Alliance to Prevent Prematurity and Stillbirth
- The Global Health Council
- Global Health Workforce Alliance
- Global Leaders Council for Reproductive Health
- Health Alliance International
- International Baby Food Action Network
- International Budget Partnership
- International Council for Control of Iodine Deficiency Disorders
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- International Baby Food Action Network
- International Budget Partnership
- International Council for Control of Iodine Deficiency Disorders
- International Diabetes Federation
- International Federation of Pharmaceutical Manufacturers & Associations

- International Planned Parenthood Federation
- IntraHealth International
- Junior Chamber International
- March of Dimes
- Marie Stopes International
- mothers2mothers
- MSH
- ONE
- PATH
- Planned Parenthood Federation of America
- Population Council
- Population Services International
- Reproductive Health Supplies Coalition (with Advance Family Planning, APROFAM, Bayer Pharma, CIES-UNAN, CLAE, Crown Agents, DFID, Ipas, Merck MSD, MSI, PAI, PATH, Pathfinder, Population Council, PRISMA, UN Foundation, UNFPA, USAID and WomanCare Global)
- Rotarian Action Group for Population & Sustainable Development
- Save the Children
- Sesame Workshop
- Susan G. Komen for the Cure Global Health Alliance
- Together for Girls
- The US Coalition for Child Survival
- WaterAid
- WaterHealth International
- Water.org
- White Ribbon Alliance for Safe Motherhood
- Women and Children First (UK)
- Women Deliver
- Women's Health and Education Center
- World Vision International
- Youth Coalition for Sexual and Reproductive Rights

BUSINESS COMMUNITY

- Becton Dickinson
- The Body Shop
- Bristol-Myers Squibb Foundation
- Dow Corning
- GE
- GE Healthcare
- GSK
- Hewlett Packard
- Intel
- John Snow, Inc.
- Johnson & Johnson
- LG Electronics
- LifeSpring Hospitals of India
- Merck
- Nestle
- Nigeria Private Sector (WellBeing Foundation and Tony Elumelu Foundation with Chellarams Group, Dangote Group and Dangote Foundation, Diamond Bank, Family Care Association, Guaranty Trust Bank, KPMG, MON Global Communication, MTN and MTN Foundation, OANDO, Ojora Group

- of Companies, Phillips Consulting, Stormberg Power Ltd, Stronghold Support Services, Think Africa Foundation, Zenith Bank)
- Novartis Foundation for Sustainable Development
- Novo Nordisk
- Pfizer
- Safaricom
- SingleHop
- TMA Development, Training & Consulting
- Vestergaard Frandsen
- Vodafone
- VIIV Healthcare

HEALTHCARE WORKERS & PROFESSIONALS

- Council of International Neonatal Nurses
- Edna Adan University Hospital
- International Confederation of Midwives
- International Council of Nurses
- International Federation of Gynecology and Obstetrics
- International Pediatric Association
- The Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- The Society of Obstetricians and Gynaecologists of Canada
- World Federation of Societies of Anaesthesiologists

ACADEMIC & RESEARCH INSTITUTIONS

- Aga Khan University
- All India Institute of Medical Sciences
- Consortium of Universities of Global Health
- Global Student Forum
- Institute for Global Health of Barcelona
- Institute for Tropical Medicine, Antwerp
- International Center for Diarrhoeal Disease Research in Bangladesh
- International Federation of Medical Students' Associations
- International Partnership for Microbicides
- John Hopkins Bloomberg School of Public Health
- London School of Hygiene and Tropical Medicine
- Medsin Aberdeen
- Osaka Medical Center and Research Institute for Maternal and Child Health
- Royal College of Obstetricians and Gynaecologists
- Royal Medical Society, University of Edinburgh
- RTI International
- University of Aberdeen
- University of Ghent
- University of Toronto



EVERY WOMAN
EVERY CHILD

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