



## SURVIVE, THRIVE, TRANSFORM

# Global Strategy for Women's, Children's and Adolescents' Health (2016–2030): 2018 monitoring report

## 10 key messages

This page summarizes 10 key messages from the Every Woman Every Child (EWEC) Global Strategy 2018 monitoring report. Regional dashboards signal where progress is lagging. The full report and data are available on the EWEC Global Strategy portal of the Global Health Observatory: <http://apps.who.int/gho/data/node.gswcah>

### CHALLENGES

#### Some things are not progressing or are getting worse

- 1. Neonatal mortality – limited progress.** Rates of neonatal mortality are not declining as quickly as mortality among children aged 1–59 months. This is a long-standing disparity. Multiple factors contribute to neonatal mortality.
- 2. Gender inequalities – progress is too slow and some gains are being lost.** Gender-based inequalities and violence persist worldwide. Progress is reversing in some areas, such as the number of women in leadership and the economic pay gap. Foster equitable gender norms and address violations of rights across society.
- 3. Humanitarian settings – many more people are now affected by crises.** The world is witnessing the highest levels of displacement on record. Strengthen capacity to reduce vulnerabilities, build resilience and anticipate and respond to health needs in humanitarian settings.

### KNOWLEDGE

#### New evidence and interventions can accelerate progress

- 4. Older children – new evidence about their health and causes of death.** The causes of death of children older than 5 years are mostly preventable. New global estimates of causes of death among older children indicate areas for action.
- 5. Early childhood development and nurturing care – a foundational role.** Investments from pregnancy through 3 years of age are the

foundation of health and well-being throughout life. The new Nurturing Care Framework will help countries to strengthen ECD programmes.

- 6. The life course approach to health – optimizing health throughout life.** The life course approach helps individuals to optimize their health, well-being and functional ability at and across every stage of life. It is a connecting theme throughout this report.
- 7. Continual learning and flexibility – innovation promotes change.** Take note of, and apply, new evidence of good practice in women's, children's and adolescents' health.

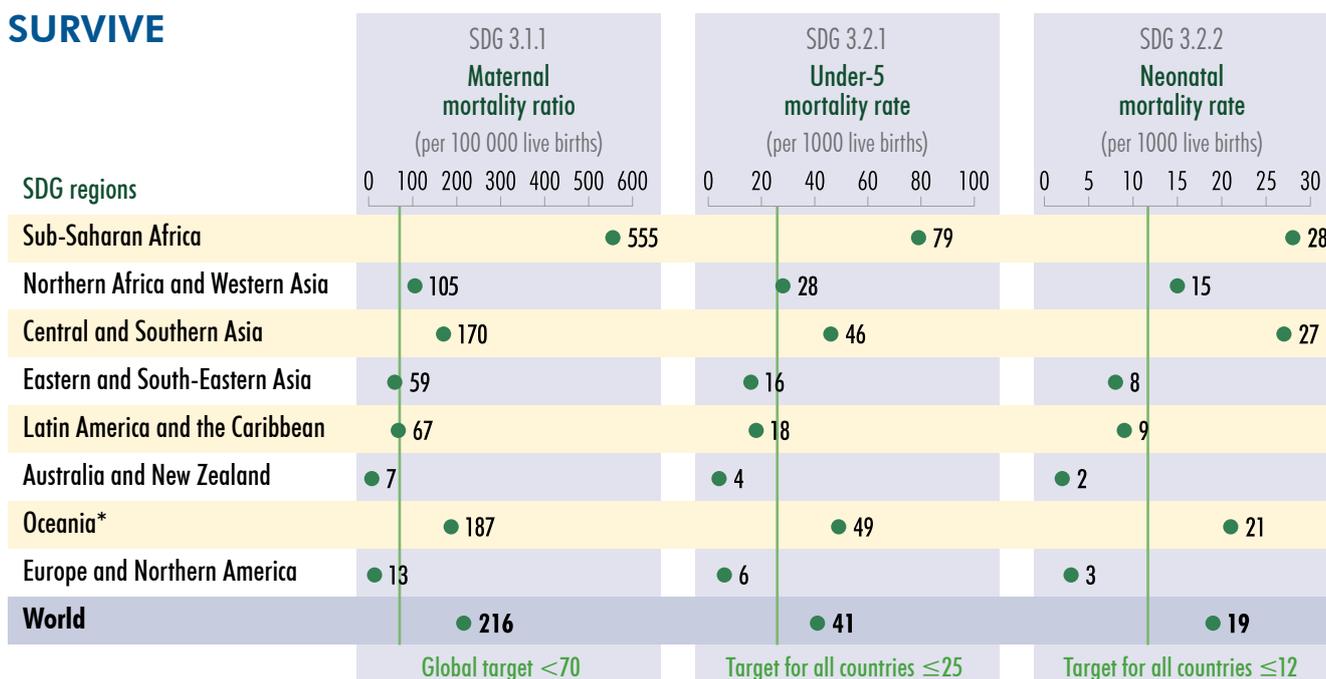
### ACTION

#### Build on what works and act in partnership

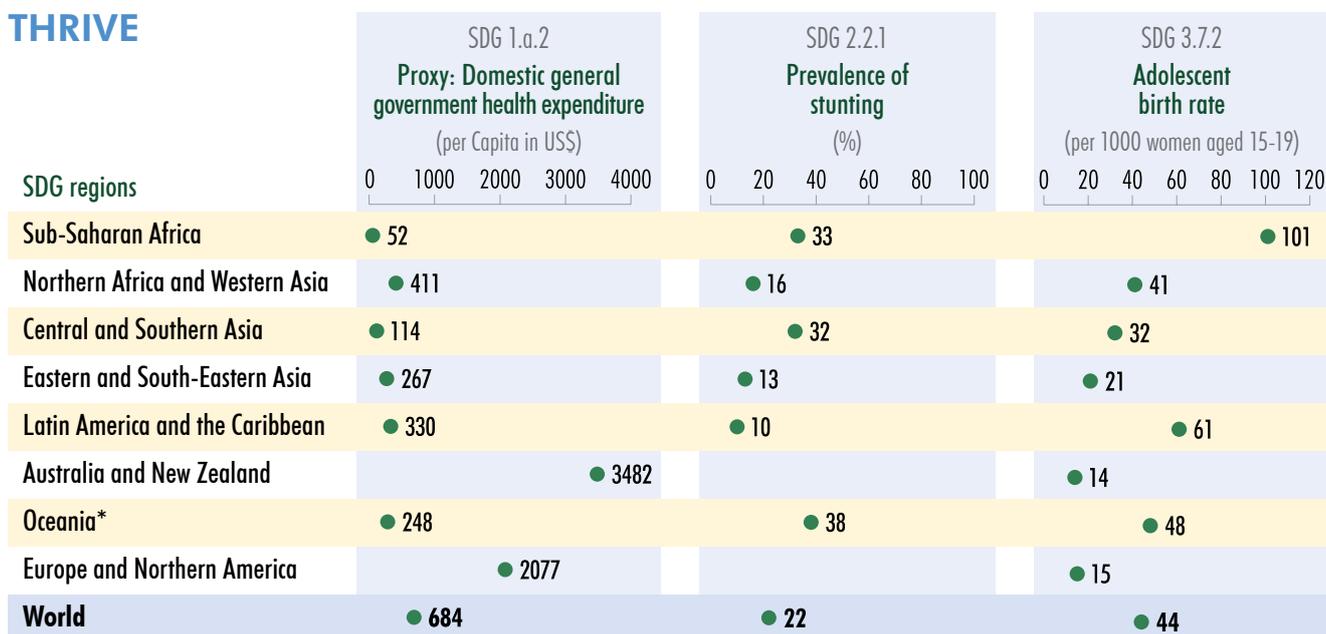
- 8. UHC and health systems strengthening – essential for progress.** At least half of the world's population lacks access to essential health services. According to 2017 estimates, investments in UHC and the other SDG targets could prevent 97 million premature deaths globally by 2030.
- 9. Multisectoral action – associated with greater impact.** Multisectoral action is evident throughout this report as an enabling factor for health. Investments are required to understand how to apply multisectoral approaches effectively in different settings.
- 10. Collaborative effort – everyone has a critical role to play.** The objectives of the EWEC Global Strategy can only be achieved through sustained collective action and mutual accountability at all levels.

# REGIONAL DASHBOARDS ON 16 KEY INDICATORS: STATUS IN 2018

## SURVIVE



## THRIVE



SDG 3.1.1 Maternal mortality ratio. Data from 2015. SDG region estimates recalculated from: Trends in maternal mortality: 1990 to 2015: Estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division. Geneva: World Health Organization; 2015.  
Available from: <http://www.who.int/reproductivehealth/publications/monitoring/maternalmortality-2015/en/>.

SDG 3.2.1 Under-5 mortality rate. Data from 2016. SDG region estimates from: United Nations Inter-Agency Group for Child Mortality Estimates (UN IGME). Levels and Trends in Child Mortality: Report 2017. New York: United Nations Children's Fund.  
Available from: <http://www.childmortality.org>.

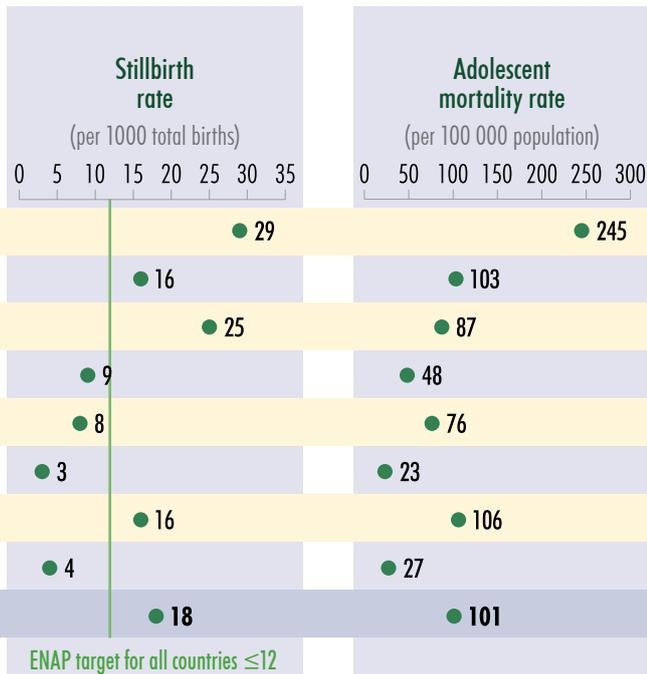
SDG 3.2.2 Neonatal mortality rate. Data from 2016. SDG region estimates from: United Nations Inter-Agency Group for Child Mortality Estimates (UN IGME). Levels and Trends in Child Mortality: Report 2017. New York: United Nations Children's Fund.  
Available from: <http://www.childmortality.org>.

SDG 1.a.2 Proportion of total government spending on essential services (education, health and social protection). Under development. Proxy indicator. SDG region estimates recalculated from: WHO Global Health Expenditure Database (2013-2015). Country estimates of Public domestic sources of spending on HIV/AIDS and Other Sexually Transmitted Diseases (STDs), on Reproductive health, and on Contraceptive management (family planning) are separately available from <http://apps.who.int/nha/database/Home/Index/en>.

SDG 2.2.1 Prevalence of stunting among children under 5. Data from 2017. SDG region estimates recalculated from: Levels and trends in child malnutrition: Key findings of the 2018 edition. UNICEF/WHO/World Bank Group Joint Child Malnutrition Estimates; May 2018.  
Available from: [www.who.int/nutgrowthdb/estimates](http://www.who.int/nutgrowthdb/estimates); <https://data.unicef.org/topic/nutrition/malnutrition/>.

SDG 3.7.2 Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group. Rates are given as the average over a five-year period from mid-year 2015 to mid-year 2020 with 1 January 2018 as the mid-point for 2015-2020. SDG region estimates for aged 15-19 are recalculated from: United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Prospects: The 2017 Revision, <https://esa.un.org/unpd/wpp/Download/Standard/Fertility/>.

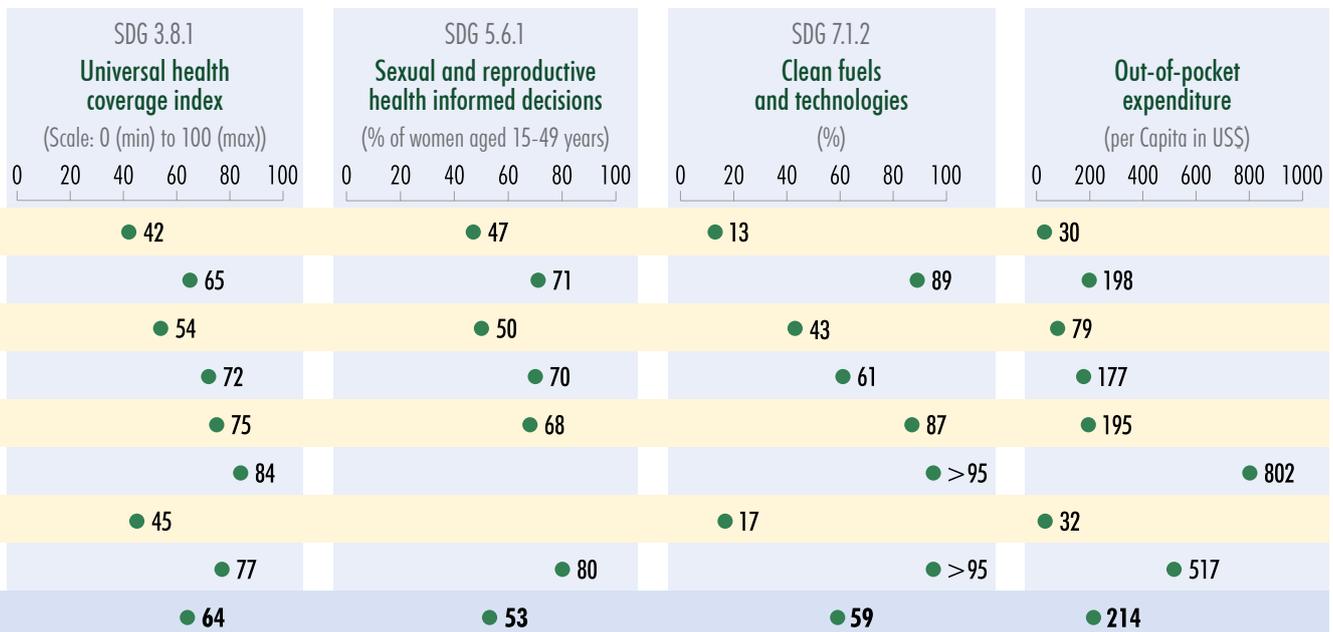
**EWEC Global Strategy portal of the  
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\* Oceania refers to Oceania excluding Australia and New Zealand.

Indicators in each section are first organized by SDG number, and then by additional indicators.

The SDG regions are based on the 2017 SDG regional groupings: <https://unstats.un.org/sdgs/indicators/regional-groups/>. The assignment of countries or areas to specific groupings is for statistical convenience and does not imply any assumption regarding political or other affiliation of countries or territories by the United Nations or Organizations publishing this report.



Stillbirth rate per 1000 total births. SDG region estimates recalculated from: Blencowe H, Cousens S, Jassir FB, Say L, Chou D, Mathers C, et al. National, regional, and worldwide estimates of stillbirth rates in 2015, with trends from 2000: a systematic analysis. *Lancet Glob Health*. 2016;4(2):e98-e108. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/26795602>.

Adolescent mortality rate per 100 000 population. SDG region estimates recalculated for aged 10-19 from: World Health Organization. *Global health estimates 2015: deaths by cause, age, sex, by country and by region, 2000-2015* Geneva; 2016. Available from: [http://www.who.int/healthinfo/global\\_burden\\_disease/estimates/en/index1.html](http://www.who.int/healthinfo/global_burden_disease/estimates/en/index1.html).

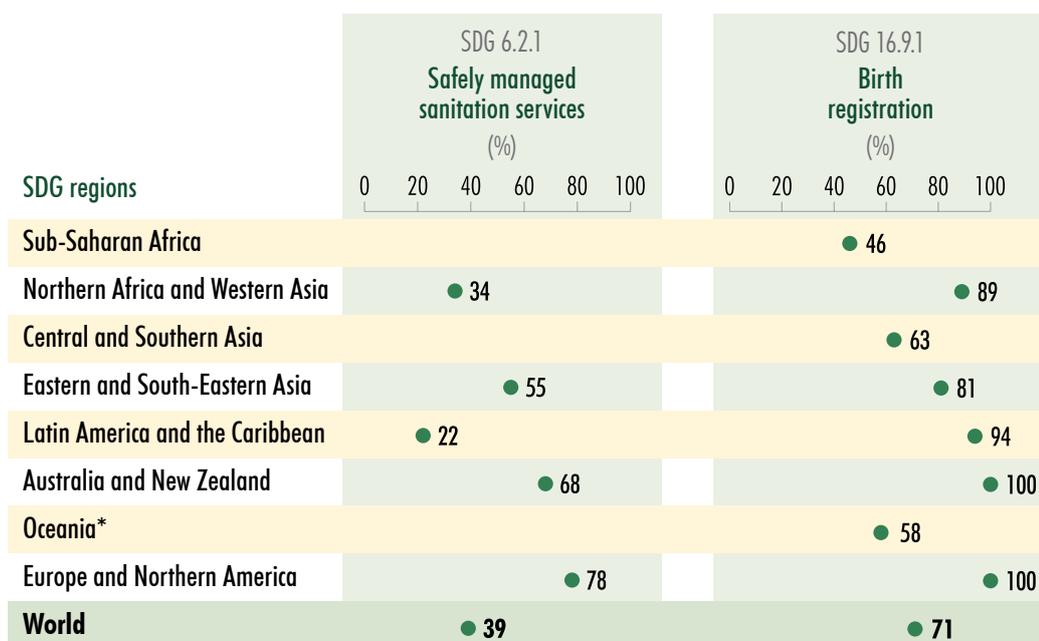
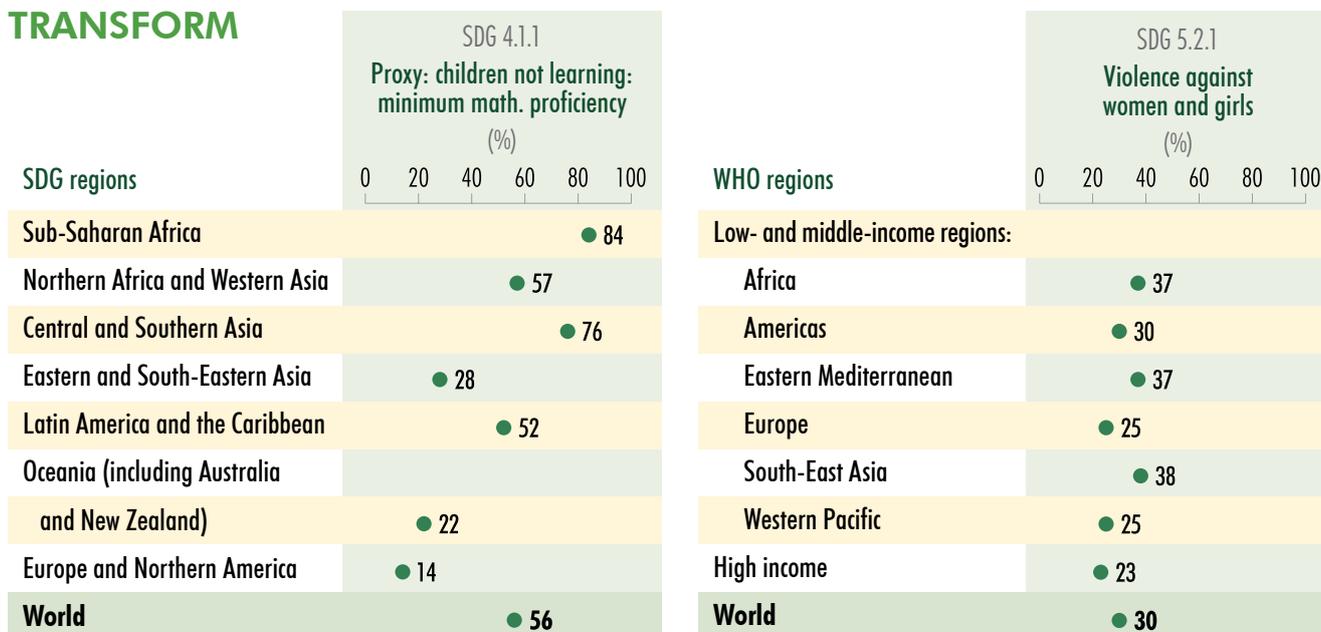
SDG 3.8.1 Coverage of essential health services. The UHC service coverage index is a measure of SDG indicator 3.8.1, which is coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, noncommunicable diseases and service capacity and access, among the general and the most disadvantaged population). Data from 2015. SDG region estimates recalculated from: *Tracking universal health coverage: 2017 global monitoring report*. World Health Organization and International Bank for Reconstruction and Development / The World Bank; 2017. Available from: [http://www.who.int/healthinfo/universal\\_health\\_coverage/report/2017/en/](http://www.who.int/healthinfo/universal_health_coverage/report/2017/en/).

SDG 5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care. Data from 2013. SDG region estimates from: UNFPA Global Database, 2018. Available from: <http://unfpaopendata.org>.

SDG 7.1.2 Proportion of population with primary reliance on clean fuels and technologies. Data from 2016. SDG region estimates recalculated from: *World Health Statistics 2018: Monitoring Health for the SDGs*. Geneva: World Health Organization; 2018.

Out-of-Pocket Expenditure per Capita in USD. SDG region estimates recalculated from: WHO Global Health Expenditure Database (2013-2015). Available from <http://apps.who.int/nha/database/Home/Index/en>.

## TRANSFORM



SDG 4.1.1 Proportion of children and young people (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex. Under development. Proxy indicator: Proportion of primary and secondary school-aged children and adolescents not achieving minimum proficiency levels (mathematics). Data from 2015. SDG region estimates from: UNESCO Institute of Statistics.

SDG 5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age. Under development. Subset indicator: lifetime prevalence of physical and/or sexual intimate partner violence among ever-partnered women. Source: Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and nonpartner sexual violence. Geneva: World Health Organization; 2013.

SDG 6.2.1 Proportion of population using safely managed sanitation services, including a hand-washing facility with soap and water. Data from 2015. SDG region estimates from: WHO/UNICEF Joint Monitoring Programme for Water Supply, sanitation and hygiene. 2017. Available from: [www.washdata.org](http://www.washdata.org).

SDG 16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority, by age. The World estimate is based on a population coverage of 80 per cent. The SDG region estimate for the Eastern and South-Eastern Asia region is based on a population coverage of 40 per cent. SDG region estimates recalculated from: UNICEF global databases, 2017, based on DHS, MICS, other national household surveys, censuses and vital registration systems. Available from: <https://data.unicef.org/topic/child-protection/birth-registration/child-protection/birth-registration>.

