



Canadian Network for / Réseau Canadien sur la
Maternal, Newborn and Child Health
Santé des Mères, des Nouveau-Nés et des Enfants



CAN-MNCH Comment on the Global Strategy for Women's, Children's and Adolescents' Health Zero Draft

Written submission

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Introduction:

Global leadership to highlight the importance of investing in the health of women, newborns, children and adolescents has never been more critical. Deliberate attention by governments, civil society organizations, international bodies, private sector and citizens are responsible for driving progress toward ensuring women and children are not only surviving, but thriving – empowered to reach their full potential and make their greatest contributions. The Global Strategy has succeeded in galvanizing and keeping global attention on this important issue. The renewal of the Global Strategy for Women’s, Children’s and Adolescents’ Health is an opportunity to ensure this attention is sustained.

Efforts to improve global health must be pursued with an explicit commitment to addressing poverty. More than any other factor, poverty is the number one social determinant of health outcomes. Further, we know that progress in achieving health outcomes has been slowest among those who are poorest. Taken together this means that progress on global health can only be achieved through progress in eliminating extreme poverty. The Global Strategy is a unique opportunity to reflect the intrinsic link between the two by measuring progress on both within one framework.

The Canadian Network for Maternal Newborn and Child Health (CAN-MNCH) offers feedback on Draft Zero of the Global Strategy on behalf of its 80 partners: Canadian NGOs, academic institutions and health professional associations working together in over 1000 regions globally to improve the lives of women and children in the world’s poorest countries.

Recommendations:

1. Prioritize the following SDG indicators within the Global Strategy:

Theme	Core Indicators
SURVIVE: End preventable deaths everywhere (Individual/ community)	SDG 3.1 Maternal Mortality Ratio of 70/100,000 live births by 2030 SDG 3.2 End preventable deaths of newborns and children under 5 years of age SDG 16.9 By 2030, provide legal identity for all, including birth registration
THRIVE: Realize the highest attainable standard of health and rights in all settings (Health Sector)	SDG 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons SDG 3.7 By 2030, 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 SDG 3.8 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 SDG 5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health (Multi-sector)	SDG 1.1 By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day SDG 1.2 By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions

	<p>SDG 3c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States</p> <p>SDG 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all</p> <p>SDG 6.2: Ensure access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations</p>
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2. Explicitly recognize the critical importance of addressing poverty and SDG indicators 1.1 and 1.2 in order to improve health outcomes for women, newborns, children and adolescents within the narrative and key indicators of the Global Strategy.
3. Strengthen the focus on inequity and fragility within the transformative actions. As the Strategy correctly points, inequity and fragility are key inhibitors to progress in improving the health of women, newborns, children and adolescents. The lack of sufficient attention to who is benefiting and who is not, risks undermining the state's human rights' obligations as primary duty bearers, de-stabilizing societies and undermining prosperity.

CAN-MNCH therefore recommends the *Transformative Actions to Tackle Inequities and Fragilities across Settings* include a commitment to:

- ✓ **adopt weighted indicators** to measure progress on reaching the hardest to reach. Targets should only be considered achieved if they are reached for all relevant income and social groups. Weighted indicators could be finalized during the development of the implementation plan for the strategy.
 - ✓ **support the adaptation Health System Strengthening** approaches to work in fragile states and target vulnerable populations.
 - ✓ **harness innovation approaches** to reach, measure progress in and improve health outcomes for vulnerable populations.
4. CAN-MNCH affirms the strategy's commitment to accountability and its recognition of the importance of data in addressing health and nutrition issues across the life-course, particularly in fragile contexts and for marginalized populations. The strategy could further solidify the accountability agenda by highlighting the importance of:
 - ✓ support to community-based accountability mechanisms as a critical approach to strengthening health service delivery and accountability to the poorest and most marginalized women and children.
 - ✓ prioritization of CRVS, including Universal Birth Registration (SDG 16.9), as an essential child health and protection intervention.
 - ✓ support to the scale-up of disaggregated vital statistics collection and enhanced local data-processing capacity.
 5. More explicitly connect the Global Strategy and other international health frameworks including the Every Newborn Action Plan, Scaling up-Nutrition, GAVI and the Global Fund for TB, HIV-AIDS and Malaria and financing mechanisms such as the Global Financing Facility.
 6. Strengthen the *Transformative Actions* relating to country leadership, innovation and research by including a recommendation that governments form national networks that bring together non-governmental organizations, researchers and professional associations to strengthen civil society input into national and local health strategies and promote synergies for health sector and multi-sectoral research and innovation.
 7. Strengthen the structure and coherence of the Global Strategy by:
 - ✓ harmonizing the definition of *Survive* to fit with the health sector and multi-sectoral lens adopted for *Thrive* and *Transform*, respectively. **Survive could be defined as health outcomes at the individual and community level.**
 - ✓ clarifying how the *Transformative Actions* are linked to the themes (*Survive, Thrive, Transform*) by specifying the desired outcomes for each theme within each transformative action (See Appendices A and B for suggested approaches).

Conclusions:

CAN-MNCH appreciates the global leadership given to addressing the key issues affecting women, newborn, children and adolescent health. Appendix A and Appendix B include proposed approaches to presenting the linkages between the themes, indicators and contexts and transformative actions. Appendix A presents 7 charts that could be inserted into the transformative action sections. Appendix B proposes a modified ecosystem approach. To align as closely as possible with the existing Draft Zero Global Strategy, this eco-system framework begins with the individual and community level, then moves through the health sector level to the multi-sectoral level. We believe that either of these insertions or modifications would allow stakeholders to identify how they can support achieving the goals by working across the contexts or by focussing in on specific elements of the ecosystem understanding the complementarity and interdependence of the different elements. We would be keen to share further insights on this approach and any of the other recommendations in our submission. We are thankful for the opportunity to contribute to creating a strategy that will inspire leadership and investment by governments, thought leaders, institutions, civil society organizations, researchers and the private sector to make meaningful and lasting change.

Appendix A: Strengthening the Framework of the Global Strategy

The Global Strategy for Women’s, Children’s and Adolescent’s Health has the opportunity to be a critical roadmap for progress which links together existing global initiatives such as the Every Newborn Action Plan, the Scaling Up Nutrition movement, and the Sustainable Development Goals to extract key goals that will provide a global portrait of progress in improving health without duplicating work done elsewhere. To do so however, requires a strategy that lays out the criteria for success and the investments needed by organizations like our partners who will be at the heart of delivering on the strategy.

The current strategy does a good job of highlighting the opportunities gained in investing in women’s, children’s and adolescent health as well as the current challenges. The strategy however loses clarity in outlining the seven *Transformative Actions* and their relationship to the *Themes* and *Indicators*. We recommend that each transformative action section include a chart that aligns key outcomes with the *Survive, Thrive* and *Transform* themes. Below are illustrative charts that draw on content of the existing *Transformative Action* narratives to suggest outcomes that could be linked to each theme. The parenthetical titles suggest simpler, clearer titles for some of the *Transformative Action* sections that would crystalize the content. **It is recommended that these charts would be added in to each transformative action section to complement the existing narrative.**

Transformative Action 1: Realize Potential and Expand Opportunities (*New title: Promoting Human Rights*)

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Awareness of and respect for health rights across all populations at the individual and community level recognizing the unique elements of children’s rights. ➤ Strengthened participation of women, adolescents and children to make their own health related decisions.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Strengthened local and national government awareness of and commitment to health related rights, and the fulfilment of their primary obligation as duty bearers to their populations.
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Strengthened recognition and integration health related rights across all sectors.

Transformative Action 2: Gain and Sustain progress through Country Leadership and Resources *(New title: Strengthening Governance)*

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Civil society participation, including participation of women, adolescents and girls in activities such as health care needs assessment and participatory budgeting.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Support given to national, local and district level collaboration in the development, financial planning, execution and monitoring of national health plans. ➤ Investments made in the capacity for civil society participation, particularly of women, adolescents and children, in health sector planning, budgeting, monitoring and evaluation.
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Multi-sectoral collaboration undertaken in budget planning to account for short term budget needs and plan for longer term budget transitions necessary to sustain investments in health to achieve health goals. ➤ Civil society participation, including strengthened participation of women, adolescents and children, in health strategy development and financing for all sectors related to the realization of their health related rights.

Given the complementarity of rights and governance and the centrality of participation to both, **it is recommended that transformative actions 1 and 2 are merged to create one section which focusses on governance and rights.**

Transformative Action 3: Strengthen the Resilience and Effectiveness of the Health System (New title: Health System Strengthening)

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Adequate availability of local health workforce practitioners including for hard to reach areas and populations. ➤ Local health workforce practitioners and individuals receive sufficient access the most effective health, nutrition, reproductive health, family planning and communicable diseases information and commodities for ALL populations to address needs of women, newborns, children, adolescents. ➤ Integrated service delivery is provided at the community level.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Local health workforce (CHW, midwives, other health practitioners) is trained to provide information and services for nutrition, reproductive health, family planning and health care. ➤ Development of educational material for families and communities to understand and adopt sound nutrition, health, family planning, and reproductive health practices, with particular attention to the unique needs of vulnerable populations
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Universal health care coverage particularly for the needs of women, adolescents and girls is pursued as policy priority. ➤ Country driven strategies are supported and promoted as the core driver of health and nutrition policy.

Transformative Action 4: Partner across Sectors for Health and Sustainable Development –

We recommend merging this action into other actions which highlight the importance of partnership such as health system strengthening, innovation and governance.

Transformative Action 5: Tackle Inequities and Fragilities across Settings

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Adequate local health workforce coverage for fragile contexts and vulnerable populations is achieved. ➤ Service delivery approaches and commodities supplies are adapted to meet the needs of vulnerable populations. ➤ Data collection tools are sensitive to capturing particularities of vulnerable populations.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Health system strengthening strategies are adapted to address the realities of fragile contexts. ➤ National and local governments and communities develop and implement data gathering strategies in fragile contexts and with vulnerable populations. ➤ Regular data analysis of impact is undertaken to ensure timely adaptations to changing fragile contexts. ➤ Investments are made into an integrated approach to health, reproductive health and nutrition interventions during all stages of the relief to development transition within fragile contexts.
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Health systems strengthening efforts in fragile states are integrated with system strengthening efforts in other sectors to ensure collaboration across sectors. ➤ Multi-sectoral analysis of the causes of vulnerability for specific populations and an integrated approach to addressing them are integrated into national health and health related strategies. ➤ Adoption of multi-sectoral approaches to addressing health throughout the relief to development transition.

Transformative Action 6: Accelerate Progress with Innovation, Research and Learning

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Innovative approaches and technologies to address child and maternal mortality and malnutrition, family planning and reproductive health and the prevention of communicable diseases are adopted. ➤ Women, adolescents, children and newborns are included in research and assessment and adaptation of innovative approaches to their particular context – including fragile state contexts and marginalized populations.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Investments are made in collaboration across partners (including the private sector, research entities, financial institutions and distinct levels of government and communities) to develop, test and refine innovative approaches to addressing health, reproductive health and nutrition challenges. ➤ All stakeholders are engaged in prioritizing the most important innovations and areas for research in health, family planning and reproductive health and nutrition. ➤ Capital investments in innovation and research in the health sector are made.
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Multi-sectoral collaboration on innovation and research initiatives is undertaken throughout the research, development and marketing cycle. ➤ International collaboration and knowledge sharing across borders and disciplines both through formal and informal channels. ➤ National level approaches to financing innovation and research include support for both health and the social determinants of health.

Transformative Action 7: Amplify Accountability with Country Led and Multi-Stakeholder Initiatives (New title: Invest in Accountability and Data Gathering)

Theme	SAMPLE KEY OUTCOMES
SURVIVE: End preventable deaths everywhere	<ul style="list-style-type: none"> ➤ Local health workforce has the tools for data gathering through CRVS. ➤ Deliberate efforts to gather data from underserved populations and regions are undertaken.
THRIVE: Realize the highest attainable standard of health and rights in all settings	<ul style="list-style-type: none"> ➤ Local, district and national government increase their capacity to gather, disaggregate, analyze and transform data into health policy and practise. ➤ Best practises and knowledge sharing for reaching disadvantaged, marginalized and remote populations are promoted.
TRANSFORM: Achieve transformative & sustainable change by addressing the social determinants of health	<ul style="list-style-type: none"> ➤ Investments are made in national level multi-sectoral data monitoring and analysis systems and reporting. ➤ Collaboration and cross-sectoral planning and partnerships are undertaken to address the social determinants of health based on data outcomes.

Appendix B: Modified Ecological Approach to the Global Strategy

Indicators	Context	Transformative actions
THEME: Survive: (End preventable deaths everywhere)		
<p>SDG 3.1 Maternal Mortality Ratio of 70/100,000 live births by 2030</p> <p>SDG 3.2 End preventable deaths of newborns and children under 5 years of age</p> <p>SDG 16.9 By 2030, provide legal identity for all, including birth registration</p>	Individual-Community health outcomes	
	✓ Innovation and Research	<ul style="list-style-type: none"> ➤ Innovative approaches and technologies to address child and maternal mortality and malnutrition, reproductive health, family planning and the prevention of communicable diseases are adopted. ➤ Women, adolescents, children and newborns are included in research and assessment and adaptation of innovative approaches to their particular context.
	✓ Health System Strengthening	<ul style="list-style-type: none"> ➤ Adequate availability of appropriate local health workforce practitioners. ➤ Local health workforce practitioners and individuals receive sufficient access to the most effective health, nutrition, reproductive, family planning and communicable diseases information and commodities for ALL populations to address needs of women, newborns, children, adolescents. ➤ Integrated service delivery is provided at the community level.
	✓ Governance & Rights	<ul style="list-style-type: none"> ➤ Civil society participation, including participation of women, adolescents and girls in health service delivery activities such as health care needs-assessment and participatory budgeting. ➤ Strengthened opportunities for women, adolescents and children (as appropriate) to make their own health related decisions. ➤ Awareness of and respect for health rights across all populations at the individual and community level recognizing the unique elements of children's rights.
	✓ Accountability	<ul style="list-style-type: none"> ➤ Local health workforce practitioners have the tools for data gathering through CRVS. ➤ Deliberate efforts to gather data from underserved populations and regions are undertaken.
	✓ Fragility and Inequity	<ul style="list-style-type: none"> ➤ Adequate local health workforce practitioner coverage for fragile contexts and vulnerable populations is achieved. ➤ Service delivery approaches and commodities supplies are adapted to meet the needs of vulnerable populations. ➤ Data collection tools are sensitive to capturing particularities of vulnerable populations.

Indicators	Context	Transformative actions
THEME: Thrive: (Realize the highest attainable standard of health and rights)		
<p>SDG 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons</p> <p>SDG 3.7 By 2030, 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</p> <p>SDG 3.8 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</p> <p>SDG 5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation</p>	Health Sector	
	✓ Innovation and Research	<ul style="list-style-type: none"> ➤ Investments are made in collaboration across partners (including the private sector, research entities, financial institutions and distinct levels of government and communities) to develop, test and refine innovative approaches to addressing health, reproduction, family planning and nutrition challenges. ➤ All stakeholders are engaged in prioritizing the most important innovations and areas for research in health, family planning, reproductive and nutrition interventions. ➤ Capital investments in innovation and research in the health sector are made.
	✓ Health System Strengthening	<ul style="list-style-type: none"> ➤ Local health workforce (CHW, midwives, other health practitioners) is trained to provide nutritional, reproductive health care, including family planning, and health care information and services. ➤ Educational material for families and communities to understand and implement healthy nutrition, health, family planning and reproduction practices with particular attention to the unique needs of vulnerable populations is developed and implemented.
	✓ Governance and Rights	<ul style="list-style-type: none"> ➤ Strengthened local and national government awareness of and commitment to health related rights, and the fulfilment of their primary obligation as duty bearers to their populations. ➤ National, local and district level collaborate in the development, financial planning, execution and monitoring of national health plans. ➤ Investments made in the capacity of civil society participation, particularly of women, children and adolescents, in health sector planning, budgeting, monitoring and evaluation.
	✓ Accountability	<ul style="list-style-type: none"> ➤ Local, district and national government increase their capacity to gather, disaggregate, analyze and transform data into health policy and practise. ➤ Best practises and knowledge sharing for reaching disadvantaged, marginalized and remote populations are promoted.
✓ Fragility and Inequity	<ul style="list-style-type: none"> ➤ Health system strengthening strategies are adapted to address the realities of fragile contexts. ➤ National and local governments and communities develop and implement data gathering strategies for health, family planning, reproductive health and nutrition in fragile contexts and with vulnerable populations. ➤ Regular data analysis of impact is undertaken to ensure timely adaptations to changing fragile contexts. ➤ Investments are made into an integrated approach to health, family planning, reproductive health and nutrition interventions during all stages of the relief to development transition within fragile contexts. 	

Indicators	Context	Transformative actions
THEME: Transform: (Achieving transformative change by addressing the social determinants of health)		
<p>SDG 1.1 By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day</p> <p>SDG 1.2 By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions</p> <p>SDG 3c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States</p> <p>SDG 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all</p> <p>SDG 6.2: Ensure access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations</p>	Multi-sectoral	
	<ul style="list-style-type: none"> ✓ Innovation and Research 	<ul style="list-style-type: none"> ➤ Multi-sectoral collaboration on innovation and research initiatives is undertaken throughout the research, development and marketing cycle. ➤ International collaboration and knowledge sharing across boarders and disciplines both through formal and informal channels. ➤ National level approaches to financing innovation and research include support for both health and the social determinants of health.
	<ul style="list-style-type: none"> ✓ Health System Strengthening 	<ul style="list-style-type: none"> ➤ Universal health care coverage particularly for the needs of women, adolescents and girls is pursued as policy priority. ➤ Country driven strategies are supported and promoted as the core driver of health and nutrition policy.
	<ul style="list-style-type: none"> ✓ Governance & Rights 	<ul style="list-style-type: none"> ➤ Country led multi-sectoral collaboration undertaken in budget planning to account for short term budget needs and plan for longer term budget transitions necessary to sustain investments in health to achieve health goals. ➤ Civil society participation, including strengthened participation of women, adolescents and children in health strategy development and financing for all sectors related to the realization of their health related rights. ➤ Strengthened recognition and integration health related rights across all sectors.
	<ul style="list-style-type: none"> ✓ Accountability 	<ul style="list-style-type: none"> ➤ Investments are made in national level multi-sectoral data monitoring and analysis systems and reporting. ➤ Collaboration and cross-sectoral planning and partnerships are undertaken to address the social determinants of health based on data outcomes.
<ul style="list-style-type: none"> ✓ Fragility and Inequity 	<ul style="list-style-type: none"> ➤ Health systems strengthening efforts in fragile states are integrated with system strengthening efforts in other sectors to ensure collaboration across sectors. ➤ Multi-sectoral analysis of the causes of vulnerability for specific populations and an integrated approach to addressing them are integrated into national health and health related strategies. ➤ Adoption of multi-sectoral approaches to addressing health throughout the relief to development transition. 	