Q. What is the Global Strategy for Women’s, Children’s and Adolescents’ Health?

The Global Strategy for Women’s, Children’s, and Adolescents’ Health, 2016-2030 is a roadmap for ending all preventable maternal, newborn and child deaths, including stillbirths, by 2030, and improving the overall health and well-being of women, children, and adolescents. It builds on the first Global Strategy for Women’s and Children’s Health launched by the United Nations Secretary-General Ban Ki-moon in 2010, which galvanized political leadership, attracted billions of dollars, and created Every Woman Every Child, a powerful multistakeholder movement for health. Since that time, millions of lives were saved and progress towards the health MDGs was accelerated.

The updated Global Strategy builds on the successes and lessons of the previous strategy, but is broader and more ambitious. It is fully aligned with the Sustainable Development Goals (SDGs), and is based on the evidence of what is needed and what works. The Global Strategy has several important new and enhanced areas of focus, including:

- Equity – a stronger focus on reaching the most vulnerable and leaving no one behind
- Universality – including an explicit focus on humanitarian and fragile settings
- Adolescents – the “SDG generation”
- Life-course approach – health and well-being interconnected at every age
- Multisector – enhancing collaboration with nutrition, education, water, sanitation, hygiene and infrastructure

Q. Why has the Global Strategy been developed?

The era of the MDGs witnessed dramatic and unprecedented progress in reducing child and maternal deaths. Deaths of children under the age of five decreased by 49% compared to 1990, and maternal deaths decreased by 47%. But despite progress, much remains to be done. Far too many women, children and adolescents worldwide still have little or no access to clean water, adequate sanitation, good nutrition, and essential, good-quality health services and are unable to participate fully in society. As a result, 6.3 million children under the age of five, 289,000 women, 2.8 million newborns, 2.6 million stillborns and 1.3 million adolescents die needlessly each year. Many more suffer illness and disability, fail to reach their full potential and face barriers to participating fully in society—resulting in enormous loss and costs for countries today and for future generations.

That is why this updated Global Strategy is so essential. It aims to urgently complete the unfinished work of the MDGs, address inequities within and between countries, strengthen fragile health systems, and help countries begin implementing the 2030 Agenda without delay. The Global Strategy aims to keep women’s, children’s and adolescents’ health at the top of the political agenda and at the heart of the SDGs.
Q. Who is the **Global Strategy** for?

The **Global Strategy** is intended to inspire and support country-led action, so politicians, policy-makers and leaders from all stakeholder groups are its primary audience. Key partners include health professional associations, civil society, academic institutions, multilateral and bilateral agencies, foundations, and the private sector. The updated **Global Strategy** provides a platform to guide greater integration among actors in the health sector and with other sectors such as nutrition, education, water, hygiene and sanitation, and infrastructure.

The **Global Strategy** is also a roadmap for all people—women, children and adolescents, their families and communities—to claim their rights by driving change and holding leaders to account.

Q. What are the main pillars of the **Global Strategy**?

The updated **Global Strategy** is aligned with development effectiveness and humanitarian norms, and is built on the guiding principles of country leadership, human rights, community ownership and accountability. The Strategy sets out three objectives to be achieved by 2030. These are in line with the SDGs, building on globally agreed goals and targets of specific strategies and action plans, many of which have been endorsed by Member States at the World Health Assembly in recent years.

<table>
<thead>
<tr>
<th>SURVIVE: End preventable deaths</th>
<th>THRIVE: Ensure health and well-being</th>
<th>TRANSFORM: Expand enabling environments</th>
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<tbody>
<tr>
<td>- Reduce global maternal mortality to less than 70 per 100,000 live births</td>
<td>- End all forms of malnutrition, and address the nutritional needs of adolescent girls, pregnant and lactating women and children</td>
<td>- Eradicate extreme poverty</td>
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<td>- Reduce newborn mortality to at least as low as 12 per 1000 live births in every country</td>
<td>- Ensure universal access to sexual and reproductive health-care services (including for family planning) and rights</td>
<td>- Ensure that all girls and boys complete free, equitable and good quality primary and secondary education</td>
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<td>- Reduce under-5 mortality to at least as low as 25 per 1000 live births in every country</td>
<td>- Ensure that all girls and boys have access to good quality early childhood development</td>
<td>- Eliminate all harmful practices and all discrimination and violence against women and girls</td>
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<td>- End epidemics of HIV, tuberculosis, malaria, neglected tropical diseases, and other communicable diseases</td>
<td>- Substantially reduce pollution-related illnesses and deaths</td>
<td>- Achieve universal and equitable access to safe and affordable drinking water and to adequate and equitable sanitation and hygiene</td>
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<td>- Reduce by one third premature mortality from noncommunicable diseases and promote mental health and well-being</td>
<td>- Achieve universal health coverage, including financial risk protection, and access to quality essential services, medicines and vaccines</td>
<td>- Enhance scientific research, upgrade technological capabilities and encourage innovation</td>
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<td>- Provide legal identity for all, including birth registration</td>
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<td>- Enhance the global partnership for Financing Global Health Security</td>
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Q. How was this Global Strategy created?

More than 7000 individuals and organizations informed the drafting process of the Global Strategy through a global consultation exercise supported by Every Woman Every Child. The World Health Assembly 2015 and regional meetings hosted by the Governments of India, Vietnam and South Africa were important occasions for consultation. Experts contributed to developing technical papers that will be published in the British Medical Journal providing an evidence base for the Global Strategy. Many stakeholders also participated in public consultations organized by the Partnership for Maternal, Newborn & Child Health. Details of the consultation process and technical inputs are available at: www.womenchildrenpost2015.org.

Q. What will happen after the launch of the Global Strategy?

The Global Strategy will be formally launched at the 70th session of the UN General Assembly in September 2015. An Operational Framework is currently being developed to accompany the Global Strategy for the first five years (2016-2020), to be continually updated through 2030. Building on ongoing efforts and existing structures, the Operational Framework will inform support to countries as they develop and refine their plans for women’s, children’s and adolescents’ health based on country-identified needs and priorities. Other stakeholders can also use it as a guide to align their actions in support of countries. The Operational Framework is being developed in consultation with governments, civil society, the private sector, international agencies, and other constituencies and partners.

Q. Who is responsible for implementing the Global Strategy?

The Global Strategy can only be implemented through collective action and collaborative effort: everyone has a critical role to play. Governments and national leaders will own and drive this process in countries, developing investment and implementation plans, and building the multistakeholder platforms needed to achieve national targets. Countries will be supported by many partners under the Every Woman Every Child umbrella in three main areas: technical support for planning and implementation, financing, and advocacy. Globally, the United Nations Secretary-General leads the Every Woman Every Child movement and will be supported by a High-Level Advisory Group.

Q. How can I make a commitment to the Global Strategy?

All partners and stakeholders are invited to make commitments in support of the Global Strategy. Commitments can be financial or non-financial and made by individual institutions or multi-partner coalitions. Commitments should aim to have clear measurable expected impacts, and each commitment maker will be required to report annually on progress. All commitments advancing the goals outlined in the Global Strategy are encouraged, in particular those which are sustainable, innovative and have a long term focus. The deadline for submission is midnight (EST) on Tuesday 8 September in order to be assessed and, if accepted, will be included in a compendium to be released alongside the Global Strategy. Commitments submitted after this time cannot be guaranteed for inclusion. No submissions will be accepted after 18 September for presentation at the launch. Guidance and an application form for making commitments is available on the Every Woman Every Child website: www.everywomaneverychild.org
Q. What resources are available?

The Every Woman Every Child website, www.everywomaneverychild.org, is a resource hub for knowledge and advocacy tools linked to the Global Strategy. Website content includes background information on the development of the Global Strategy, a compendium of worldwide commitments to the Global Strategy, news about national, regional and global events, a calendar of upcoming events, resources including recent publications and advocacy toolkits, and links to networks and initiatives that are aligned with the Global Strategy.