

Global Leaders Network for Women's, Children's and Adolescents' Health Status and Key Messages



Summary

The prosperity of humanity relies on the health and well-being of women, children, and adolescents. Despite progress in past decades, the world is not on track to reach the targets for women's, children's and adolescents' health and progress has stalled or slowed down in ending preventable maternal, newborn and child health since 2015. Africa accounts for the majority of these preventable deaths. Greater acceleration and increased prioritization is required urgently to ensure not only the preventable loss of life, but that every woman, child, and adolescent can thrive.

The Global Leaders Network for Women's, Children's, and Adolescents' Health (GLN) is the first and only Southern-led global health diplomacy initiative to support the attainment of the 2030 Sustainable Development Goals related to women, children, and adolescents.

Key Messages



Prioritize women, children, and adolescents in the rollout of Universal Health Coverage (UHC)



Promote progressive lawmaking to uphold sexual and reproductive health



Increase investments in women's, children's, and adolescents' health



Sustain political will and commitment

Status of Women's, Children's, and Adolescents' Health



Despite tremendous progress during the Millenium Development Goals (MDGs) era, women, children and adolescents continue to die across the world due to preventable causes and progress has stalled in recent years. The majority of these deaths occur in Africa.

- Every 7 seconds, a pregnant woman or newborn dies from preventable causes.
- Women and girls are 50 % more likely to suffer from malnutrition in nearly two-thirds of countries.
- Over 1 billion women and girls lack access to basic good health diets, with most of them living in the Global South.
- Preterm birth is now the leading cause of under-five deaths, with 57% occurring in sub-Saharan Africa—where children face a 14 times higher risk of dying than those in Europe or North America.
- Despite dire needs, global nutrition accounts for less than 1% of global foreign aid.

Progress on the Sustainable Development Goals

- Likely, **80% of countries** will not achieve their national maternal mortality target (SDG 3.1).
- **64 countries** are off track to meet the target on neonatal mortality (SDG 3.2.2) particularly in sub-Saharan Africa.
- **59 countries** are off-track to reach the under-five child mortality target (SDG 3.2.1).
- The proportion of the need for family planning satisfied by modern methods has stagnated globally at around **77% from 2015 to 2022** (SDG 3.7.1).
- To achieve these targets progress would need to accelerate **nine-fold** to reduce maternal mortality, **three-fold** for stillbirths, **four-fold** for newborn mortality and four-fold for children aged 1-59 months.

Emerging Threats in UHC

Rising conflicts, intensifying climate change, stagnating and decreasing domestic and donor financing, and workforce shortages further threaten the achievement of progress.

Rising conflicts

- In 2023, more than **170 armed conflicts** were recorded, and approximately 612 million women and girls lived within 50 km of these conflicts, 150% more than just a decade ago.
- UN-verified cases of conflict-related sexual violence also rose by **50%** in 2023 compared with 2022.
- Women accounted for **4/10 fatalities**, while children made up **3/10 fatalities** in 2023.

Intensifying climate change

- Women, newborns, children, and adolescents are **particularly affected** due to their unique stages and needs in the life course.
- 1 in 5 children live in areas that experience **at least double** the number of extremely hot days every year compared to just six decades ago.
- Climate change and air pollution **increase risks** of gestational complication, pregnancy loss, preterm birth, low birth weight, maternal death, and gender-based violence.

Stagnating/declining domestic and donor financing for women's, children's and adolescents' health, including sexual and reproductive health (SRH)

Domestic Financing

- Domestic public spending on health per capita **declined in all country income groups in 2022**.
- In Africa, only **2 out of 55 African** Union countries in 2021 met the Abuja Declaration target to allocate 15% of GDP towards the health sector.
- Out-of-pocket expenses continue to be the **primary source of funding** in 30 low- and lower-middle income settings, exacerbating financial hardship and deepening poverty.

Donor Financing

- Development assistance for reproductive and maternal health decreased from **\$6.2 billion in 2019 to \$5.3 billion in 2021** (a 14% reduction).
- In 2022, donor government funding for family planning (\$1.35 billion), a decline reduction of 9% from 2021 (\$1.48 billion), was the **lowest level** of funding for family planning since 2016 (\$1.31 billion).
- Cuts in official development assistance (ODA) across the world, such as from the United States, which accounts for **one third of global ODA** and the **highest percentage of ODA** for SRH disbursements, the United Kingdom and the Netherlands will severely affect progress in SRMNCAH in low- and middle-income countries.

Key Messages



Prioritize women, children, and adolescents in the rollout of Universal Health Coverage (UHC)



Promote progressive lawmaking to uphold sexual and reproductive health



Increase investments in women's, children's, and adolescents' health



Sustain political will and commitment

Prioritize Women, Children, and Adolescents in the rollout of UHC



Prioritizing women, children, and adolescents in the rollout of national UHC policies presents a critical opportunity to end preventable maternal, newborn and child mortality and adolescent pregnancy while strengthening overall health and well-being within societies. Ending preventable maternal mortality serves as the 'litmus test' for any health system. By investing in primary healthcare (PHC) and adopting an intersectional, life-course approach, grounded in UHC, every woman, child, and adolescent can access high-quality, equitable and affordable health services.

Opportunities for prioritizing women, children and adolescents in UHC

- Strengthen health systems to optimize PHC delivery platforms and ensure quality infrastructure, equipment, and a trained and staffed health workforce to end preventable maternal, newborn, and child mortality.
- Utilize dynamic modeling and innovative digital tools to monitor progress, accelerate, and adjust programming and planning to ensure health services effectively respond to the needs of women, children, and adolescents.
- Adopt multisectoral approaches to address inequalities in access to healthcare services for mothers, babies and children including through education, gender quality and economic empowerment.

Impact of prioritizing women, children and adolescents in UHC

- Between 2000 and 2019, an estimated **15.5 million infant deaths** were prevented in 60 low and middle income countries due to improvements in UHC.
- A well-staffed and trained health workforce saves lives. Universal access to midwifery care could **avert more than 60% of all maternal and newborn deaths and stillbirths** – amounting to 4.3 million lives saved annually by 2035.

- Deploying community health workers to deliver just 30 essential, life-saving health services in the countries with the highest disease burden could save up to 6.9 million lives each year and nearly halve child mortality.

Increase Investments into Women's, Children's and Adolescents' Health



Investing in women's, children's, and adolescents' health is an investment in humanity's future. Investment is a moral, economic, social imperative, essential to national development and integral to the prosperity of societies. Assuring investment requires innovation and bolder partnerships.

Opportunities for increased investment

- Increase investments in **high-impact, quality and equitable SRMNCAH interventions** and effective packages of care along the life course, including antenatal care, intrapartum care, emergency care, early postnatal and essential newborn care, prevention and treatment of illness and malnutrition.
- Utilize financial tracking mechanisms to identify financing gaps and facilitate the efficient deployment of resources to mobilize increased investments and improved use of funding availability. Mechanisms such as the Global Mpox Response Financing Tracker, developed by the G20 Joint Finance and Health Task Force (JFHTF), have proved valuable in the Mpox response and can be considered for broader application.
- Strengthen pooled procurement mechanisms to negotiate reduced prices and expand the supply of global health commodities, to assure access and availability for women, children, and adolescents.
- Facilitate improved regional production of reproductive, mental, newborn, and child health commodities to ensure equitable access to life-saving and promoting medical advancements.
- Leverage innovative financing models to support domestic health financing, such as tax health levies and public-private partnerships, to advance health outcomes for women, children and adolescents, and strengthen health systems.

Impact of increased investment

- Every US \$1 invested in women's health generates US **\$3 in economic growth**.
- An **investment of just US \$1.15** per person per year can reduce 71% of neonatal deaths, 33% of stillbirths, and 54% of maternal deaths.
- Every US \$1 invested in adolescent health services yields a **return of US \$9.6**. Conversely, over the period 2024–50, the **average cost of inaction** has been estimated at US\$110 trillion (USD 4.1 trillion per year).

Promote progressive lawmaking to uphold sexual and reproductive health



Women's and girls' health and rights are non-negotiable. Access to reproductive health services saves lives, reduces maternal mortality, gender-based violence and unintended pregnancy. By upholding reproductive health policies, we enhance health and well-being, promote gender equality, boost productivity, and create lasting benefits across generations.

Opportunities for promoting progressive lawmaking for SRH

- Sustain political commitment to advance gender equality by upholding and implementing progressive policies for reproductive health.
- Leverage existing legal and policy frameworks, such as the Maputo Protocol and the SADC Strategy for Sexual and Reproductive Health and Rights in the SADC Region (2019–2030) to uphold the right to health for women, including SRH.
- Meet the need for family planning, provide comprehensive sexual and reproductive health services and education, including safe termination of pregnancies, and end harmful practices on women and girls through progressive lawmaking and sufficient domestic financial allocations to prevent teenage pregnancies, maternal mortality, advancing gender equity and ensuring women and girls can survive and thrive.

Impact of implementing progressive lawmaking to uphold sexual and reproductive health

- The proportion of women aged 15–49 years who use a modern contraceptive method doubled from an estimated 467 million in 1990 to **874 million women in 2022**.
- Every US \$1 invested beyond the current level in contraceptive services **saves US \$3** in maternal, newborn, and abortion care by reducing unintended pregnancies.

Sustaining Political Will and Commitment



The world is far off-track to achieve the Sustainable Development Goals targets on maternal, newborn and child mortality. With five years left to the 2030 Agenda, it is time to act decisively, with sustained commitment to end preventable maternal, newborn, child and adolescent deaths.

Opportunities for sustaining political will and commitment

- Sustain political commitment to advance gender equality by upholding and implementing progressive policies for reproductive health.
- Champion the prioritization of women's, children's, and adolescent health and well-being in national, regional and global policymaking.
- Secure sustainable investments in healthcare systems to ensure no one is left behind.

Impact of sustained political will

- Political will and strong accountability is the key to move from rhetoric to real progress. The active participation of Heads of State and Government in platforms like the GLN underscores the urgency of strong political will to achieve SDGs related to women's, children's and adolescents' health.
- Sustaining political will and fostering long-term political commitment will be critical in mobilizing resources and ensuring the implementation of health initiatives with lasting impact in the achievement of national prosperity.
- By leveraging South-South cooperation, we can create sustainable, regionally driven solutions that improve health outcomes for women, children, and adolescents across Africa and beyond.

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We support the Sustainable Development Goals



Women's,
Children's and
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Health

Hosted by the World Health Organization