

Update on Sustainable Development Goal Targets and Indicators

13 April 2015

Summary

This paper

- Provides an update on the Sustainable Development Goal (SDG) process and timeline, focusing on the targets being refined and the indicator development most relevant to RMNCAH;
- Responds to a request from partners for PMNCH to convene the Post 2015 Working Group again in order to build consensus and shape advocacy around an agreed set of indicators related to women's, children's and adolescents' health, particularly as relates to the 2016-2030 Global Strategy for Women's, Children's and Adolescents' Health;
- Seeks guidance from the Board around next steps.

A background technical note to guide discussions will be provided to the EC and Board in advance of their meetings, providing:

- An overview mapping of the SDG targets open for technical review;
- An overview mapping of RMNCAH related SDG targets and proposed Global Strategy targets; and
- An overview mapping of SDG indicators alongside additional indicators proposed by stakeholders in the Every Woman Every Child (EWEC) movement.

Request for PMNCH Board guidance and decision

The following questions are posed to the PMNCH Board in this paper

Does the Board agree that PMNCH could and should play a role in building consensus across the RMNCAH community around the next stage of the Post 2015 process? Specifically:

- a) Does the Board wish to re-convene the Post 2015 Working Group to take forward this activity? If so, does the membership of this group need to be changed e.g. in light of the increased technical nature of the indicator process, and the broader scope of the 2016-2030 Global Strategy?
- b) Does the Board agree that the role of the Working Group would be to:
 - I. Build consensus around the critical targets and indicators to be included in the SDG Framework and, linked to this, the 2016-2030 Global Strategy;
 - II. Consider approaches currently being discussed towards measuring and monitoring indicators as a critical aspect of their validity.
- c) Based on the overview technical note (to be provided) could the Board:
 - I. Agree on the focus for advocacy on the SDG targets currently open for technical revision, i.e. target 3.2 on child and newborn mortality;
 - II. Agree on a process for prioritizing the Global Strategy Goals and Targets;
 - III. Agree on a way forward for developing a consensus on SDG and Global Strategy indicators.

Advancing the Post 2015 process and Sustainable Development Goals

Selecting SDG indicators

The UN Statistical Commission has been identified by Member States to advise the Member State Intergovernmental Negotiations process about an indicator framework. The Commission has been tasked by member states to propose a global indicator framework and associated indicators by March 2016. An Inter-agency and Expert Group on SDG Indicators has also been created and consists of Member States and, as observers, regional and international organizations and agencies to support the process of developing the global framework and indicators. National indicators are to be developed at national level. The UN Statistical Division in March 2015 issued a list of 300 SDG indicators (mostly two per target) to be used as a starting point for discussion in meetings of the Inter-agency and Expert Group on SDG Indicators, the first meeting of which is likely to take place in May. This list includes 22 indicators for Goal 3, as well as four placeholders for targets 3a-3d, however many more indicators in support of health enhancing targets are also relevant.

Finalizing the SDG target selection

The UN Technical Support Team (UNTT) undertook a review of the 169 targets. This review focused on target measurability and consistency with targets in existing internationally agreed treaties and positions. Based on recommendations of the UNTT, 19 less controversial targets have been selected for technical review and improvement by the UNTT. Revised targets will be submitted for member states for approval. No major changes to targets are anticipated. Health targets submitted for improvements include the targets related to preventable newborn and child deaths (3.2), road safety (3.6) and TRIPS flexibilities (3.b).

Advancing Women's, Children's and Adolescents' Health in the SDGs

There are three targets and seven indicators under the health goal directly related to women's, children's and adolescents' health and there are numerous health related targets and indicators under other goals (e.g., gender, education, nutrition, WASH).

Partners have raised a number of gaps and issues in the current indicator proposal. Although most of the critical RMNCAH indicators are included in the 300 long list mentioned above, there are a couple of important gaps including around stillbirth, the full range of SRHR indicators and adolescent health. The Q4 2014 - Q1 2015 Global Strategy consultation process clearly identifies these and other issues of concern across the RMNCAH community.

PMNCH members from different interest groups have expressed a desire to undertake advocacy on indicators in 2015. In particular, the Donors & Foundations constituency, a sub-group of CSOs and members of the Multilaterals constituency have expressed interest in indicator advocacy. To ensure that RMNCAH relevant indicator advocacy is aligned, a question has been posed as to whether PMNCH might, following on from the consensus statements issued in 2014 (on goals and targets) and 2013 (on framing), undertake a similar process around the indicators.

The 2014 PMNCH consensus Statement and potential 2015 consensus process

In 2014, PMNCH convened and supported a consensus-building process around an earlier stage of the Post 2015 process undertaken by a 40+ strong working group made up of a broad range of partners (Annex A: Working Group members). The Group developed a consensus statement setting out how and why women and children should remain an important focus of the Post 2015 framework. This statement facilitated wide and effective advocacy, strengthened dialogue and a clearer, more focused sense of purpose across the broader RMNCAH community (Annex B: PMNCH Position Statement).

As the final stages of the Post 2015 framework are negotiated in the coming months, PMNCH proposes to build on this successful approach, to re-convene the Working Group, and support the broad RMNCAH community to build consensus and advocate for the best set of indicators.

A starting point: The 2016-2030 Global Strategy Targets and Indicators

Alongside the SDG process, the Global Strategy for Women's Children's and Adolescents' Health is being developed. The SDGs will be the overarching framework for the Global Strategy. Many of the goals and targets will of course be relevant for both the SDG framework and the updated Global Strategy. The Global Strategy can go further to include all the indicators that are relevant to health outcomes for women's, children's and adolescents' health.

Further to this paper, in advance of the Board, a background note for the discussions will be provided with an overview mapping of the SDGs targets and indicators most relevant to the Global Strategy, alongside additional goals, targets and indicators proposed by stakeholders in the Every Woman Every Child (EWEC) movement for consideration by the Board.

ANNEX A – Members of the Post 2015 Working Group to advise on PMNCH Post 2015 related activities (Working Group established in 2014)

* Individuals have changed institutions or portfolios and might need to be revised

| Member Name | Organization | Observer |
|--------------------------------|---|--|
| 1. Agnes Soucat* | African Development Bank | |
| 2. Amy Boldosser | Family Care International | |
| 3. Anuradha Gupta* | Ministry of Health and Family , India | |
| 4. Carlos Dora | World Health Organization | Flavia Bustreo Marie Brune-Drisse Emiko Todaka |
| 5. Diah Saminasih* | Special Envoy of MDGS to President of Indonesia | |
| 6. Lara Brearley* | Save the Children | Francesco Aureli |
| 7. Geeta Rao Gupta | UNICEF | Kumanan Rasanahan |
| 8. Sigrid Mehring | GIZ | Gerd Eppel |
| 9. Gillian Mann | DFID | |
| 10. Guido Schmidt-Traub | Sustainable Development Solutions Network | Lauren Barredo |
| 11. Hareya Fassil | USAID | |
| 12. Heather Barclay | IPPF | |
| 13. Jill Sheffield | Women Deliver | Janna Oberdorf |
| 14. Joe Thomas | Partners in Population and Development | |
| 15. Joško Miše* | IFMSA | |
| 16. Julian Schweitzer | Results for Development | |
| 17. Kate Eardley | World Vision | |
| 18. Kate Gilmore | UNFPA | Laura Laski |
| 19. Robert Ndieka | African Union | Mabvuto Kango Kenneth Oliko |
| 20. | Permanent Mission of China to the UN, New York | Liang Heng |
| 21. Lola Dare | CHESTRAD | |
| 22. Magda Robert | Special Adviser to MDG Advocate, Ms Grace Machel | |
| 23. Miguel Pestana, | Unilever | |
| 24. Nyaradzayi Gumbonzvanda | YWCA | Liz Nash |
| 25. | Permanent Mission of Brazil to UN, New York | Claudia Assaf |
| 26. | Permanent Mission of India to UN, New York | Amit Kumar |
| 27. Sharon D'Agostino | Johnson & Johnson | |
| 28. Sinead Andersen | GAVI Alliance | |
| 29. Susan Myers | United Nations Foundation | Anita Sharma Caroline Barrett |

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|-----------------------------|--|--|
| 30. Tariq Cheema | World Congress of Muslim Philanthropists | |
| 31. Tinu Taylor | Ministry of Health, Nigeria | |
| 32. Jennifer Requejo | Countdown to 2015 | |
| 33. | Permanent Mission of Zimbabwe to the United Nations – Africa Group | Emmanuel Makasa - Permanent Mission of Zambia to the United Nations – Africa Group |
| 34. | Girls Not Brides | Lakshmi Sundaram |
| 35. Ariella Rojhani | NCD Alliance | |
| 36. | UN Women | Gustavo Gonzalez-Canali |
| 37. | Department of Bioenvironmental Medicine, Chiba University | Chisato Mori |
| 38. | NORAD | Austen Davies - TBC |
| 39. | The World Bank | Carolyn Reynolds |
| 40. Jonathan Jay | Management Sciences for Health | |
| 41. Liliana Hisas | Universal Ecological Fund | |

ANNEX B – PMNCH 2015 Position Statement –Placing Healthy Women and Children at the Heart of the Post 2015 Sustainable Development Framework



SUMMARY

Everyone has a fundamental right to the highest attainable standard of health, defined as physical, mental and social well-being. Investing in healthy populations is the foundation for sustainable social, economic and environmental development, and for peace and security.¹ For instance, the Global Investment Framework for Women's and Children's Health estimates that increasing health expenditure by just US\$ 5 per person per year, between 2013 and 2035 in 74 high-burden countries could yield up to nine times that value in economic and social benefits.^{1, a} The Commission on Investing in Health points to the possibility of achieving important gains in global health by 2035 through a grand convergence around infectious, child, and maternal mortality, reductions in the incidence of NCDs and injuries and the achievement of universal health coverage.²

Yet, thousands die every day from preventable causes and even more are left with injury, infection or disease. Building on the Millennium Development Goals, the Post 2015 framework should:

- Include a stand-alone health goal that maximises health and wellbeing, specifying an end to preventable mortality and morbidity
- Focus on the marginalized and most critical population groups for maximizing progress towards improving health and development outcomes: Newborns and Adolescents
- Integrate shared targets into all relevant sectors such as nutrition, education, gender, and infrastructure
- Consider the inclusion of differentiated targets for countries based on their levels of development

^a [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(2813\)2962231-X/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(2813)2962231-X/fulltext)



This paper has been developed by a working group comprising nearly 40 of PMNCH's partners



BACKGROUND

The past 15 years have seen great progress in health. Reproductive, maternal, newborn and child health (RMNCH) outcomes have improved, malaria mortality rates have fallen and TB and HIV infection rates have slowed down. While progress has been substantial overall, it has been inequitable across and within countries and has been hampered by limited access to quality services. New health concerns around NCDs, mental health and injuries have also arisen.

What needs to be done?

1 Include a stand-alone health goal that maximises health and wellbeing, in part by ending preventable mortality and morbidity; leaves no one behind, and achieves this through access to universal health coverage.

Building on countries' achievements towards the Millennium Development Goals, the Post 2015 framework should consolidate progress and raise ambition to end preventable mortality and morbidity of women, newborns, children and adolescents, who are often the most underserved and improve access to sexual and reproductive health services and rights. This framework should also focus on addressing emerging issues such as non-communicable diseases, mental health and injuries which are increasing rapidly across the globe. Ending preventable mortality and morbidity can be achieved through universal health coverage to ensure that all people can access the health services they need (including access to sexual and reproductive health information and services) without incurring financial hardship.

Illustrative women's and children's health related goals, targets and indicators^{b,c}

Ensure healthy lives and promote well-being for all at all ages

- End preventable deaths by reducing, in all countries, child mortality to 25 or fewer deaths per 1000 live births, newborn mortality to 12 or fewer deaths per 1000 live births and stillbirths to 12 or fewer stillbirths per 1000 births; by achieving a global maternal mortality ratio of 70 per 100,000 live births^d
- Achieve universal access to sexual and reproductive health and rights for all, including quality, comprehensive, integrated and affordable sexual and reproductive health information, education and services that include modern methods of contraception
- Reduce adolescent pregnancy

Indicators

- Neonatal, under-five mortality rates and stillbirth rate
- Maternal mortality ratio
- Adolescent births
- Percentage of births attended by a skilled health worker
- Proportion of family planning demand met with modern contraceptives
- Proportion of young people 10-24 who demonstrate desired levels of knowledge and reject major misconceptions about sexual and reproductive health
- Percent of children receiving full immunization as recommended by WHO
- Antenatal care coverage (at least four visits)
- Post natal care coverage for mother and baby either at home or in a facility and within 2 days of delivery (at least one visit)
- Proportion of abortions that are considered unsafe
- Percentage of complications of abortions that are treated in medical facilities
- Percentage of pregnant women screened for Syphilis
- Percentage of pregnant women with a positive Syphilis test that receive treatment
- Percentage of pregnant women living with HIV who are enrolled in ART lifelong
- Percentage of health facilities at the primary health care level that provide a minimum of MNH; modern contraceptives; and at least one of the following: STI and HIV prevention and treatment, safe abortion when not against the law, post abortion care



^b While not reflected here, other targets around HIV/AIDS, TB, Malaria, NDCs are also to be included under the health goal.

^c All targets are adapted from the Open Working Group final list of Sustainable Development Goals issued on July 19, by the PMNCH Post 2015 Working Group. The lists of indicators only reflect a subset of what could be included under each goal. These are not to be considered comprehensive. The targets are framed around a deadline of 2030.

^d The newborn mortality and stillbirth targets are from the Every Newborn Action Plan and reflect country targets. The Global targets for both newborn mortality and stillbirths are 9. The under-five mortality target use here is the A Promise Renewed country target. The Global targets are currently under development. The maternal mortality target is from Ending Preventable Maternal Mortality and reflects a global target.



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2 Integrate shared targets into all relevant sectors such as nutrition, education, gender, and infrastructure such as water, sanitation and energy to address the underlying determinants of health.

Emerging lessons from countries achieving high performance in their progress towards the MDGs, strongly suggest that **improving health outcomes also benefits from health enhancing investments outside the health sector**. Based on the preliminary findings of this study, tracking indicators such as access to clean energy and water among others, will be important for monitoring improvements in women's and children's health.

- a** Increasing the number of girls that complete quality primary education and secondary **education** improves health and development outcomes for women, their families, communities and nations. One recent study attributed over 50% of the 8.2 million lives saved of children under 5 between 1970 and 2009 to increased educational attainment in women of reproductive age.³

Illustrative goals, targets and indicators on education



Achieve universal access to comprehensive sexuality education for all young people, in and out of school

- Ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes
- Ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education
- Ensure equal access for all women and men to affordable quality technical, vocational and tertiary education, including university
- Increase by x% the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship

Indicators

- Proportion of children receiving at least one year of a quality pre-primary education program
- Early childhood development index
- Primary completion rates for boys and girls
- Secondary completion rates for boys and girls
- Percentage of young people not in education, training, or employment
- Tertiary enrolment rates for girls and boys

- b** Improved **nutrition** is essential. Undernutrition is an underlying cause of 45% of under-five mortality and creates a cycle of reduced learning capacity in children, chronic disease and low productivity in adulthood.⁴ Women who enter pregnancy malnourished or anaemic have much poorer chances of surviving an obstetric emergency. **The World Bank estimates that malnutrition is costing poor countries up to 3 percent of their annual GDP.**⁵

Illustrative goals, targets and indicators on nutrition



End hunger, achieve food security and improved nutrition, and promote sustainable agriculture

- End all forms of malnutrition, including achieving by 2025 the internationally agreed targets on stunting and wasting in children under five years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons

Indicator

- Prevalence of stunting and wasting in children under 5
- Exclusive breastfeeding for a child's first 6 months low birth weight
- Anemia for children under 5 and women of reproductive age
- Percent of children under 5 overweight and obese

- c** Improving access to **water and sanitation** can reduce the burden of disease that women and children face. Around 2 million people die every year due to diarrhoeal diseases, most of them children less than 5 years of age.⁶ Improving access to water can also improve school attendance of girls, reduce the physical stress, time cost and risk of violence that women and girls face in water collection.

Illustrative goals, targets and indicators on water, sanitation and hygiene



Ensure availability and sustainable management of water, sanitation and hygiene for all

- Achieve universal and equitable access to safe and affordable drinking water for all
- Achieve 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

Indicators

- Percentage of population using basic drinking water
- Proportion of population using basic sanitation services
- Percentage of population with basic handwashing facilities with soap and water at homes; primary and secondary schools; and in health centres



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- d Among infrastructure investments **electricity and clean household energy** can reduce exposure to indoor air pollution a leading cause of pneumonia in children under age five, and NCDs in adults, as well as eliminate the drudgery of fuel collection for women and girls, freeing time for income generation, schooling and reducing the risk of sexual violence.

Illustrative goals, targets and indicators on electricity and clean household energy



Ensure access to affordable, reliable, sustainable, and modern energy for all

- Ensure universal access to affordable, reliable, and modern energy services

Indicators

- Share of the population with access to modern cooking solutions (%)
- Share of the population with access to reliable electricity (%)

- e **Gender equality** - eliminating gender based violence and harmful practices including early marriage, and improving economic opportunities, access to resources and political and institutional representation for women, young women and girls are key strategies to improving gender equality.

Illustrative goals, targets and indicators on gender equality



Achieve gender equality and empower all women and girls

- End all forms of discrimination against all women and girls everywhere
- Eliminate all forms of violence against all women and girls in public and private spheres, including trafficking and sexual and other types of exploitation
- Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilations
- Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic, and public life
- Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the ICPD and the Beijing Platform for Action and the outcome documents of their review conferences

Indicators

- Percentage of children under age 5 whose birth is registered with a civil authority
- Proportion of seats held by women and minorities in national parliament and/or sub-national elected office according to their respective share of the population (revised MDG Indicator)
- Compliance with recommendations from the Universal Periodic Review and UN Treaties
- Ratification and implementation of key ILO labour standards and compliance in law and practice
- Rate of women subjected to violence in the last 12 months by an intimate partner
- Percentage of referred cases of sexual and gender-based violence against women and children that are investigated and sentenced
- Percentage of girls married under the age of 18

3 Focus on the marginalized and most critical population groups for maximizing progress towards improving health and development outcomes

Newborns, pre-term births and stillbirths. While the world has seen substantial progress in reducing child deaths, progress in reducing newborn (the first month of life) mortality has been slower. The Post 2015 framework should track newborn mortality rates and promote universal coverage of key newborn interventions including skilled birth attendance.

Adolescents and young people. In 2010 there were 1.2 billion young people (between 15 and 24 years of age) in the world, amounting to 18% of the world population.⁷ Young people are shaping social and economic development and represent an untapped potential. Investing in young populations in low and middle income countries can yield a demographic dividend and spur economic progress, provided they are healthy and trained appropriately to avail of employment opportunities. Young people should also be equipped to make informed decisions about their life choices, in particular those related to their sexual and reproductive health.⁸

4 Consider the inclusion of differentiated targets for countries based on different levels of development

While global goals can help motivate political and financial commitment at the global, regional and national levels and provide an accountability platform, these must be sufficiently targeted and flexible to take into account the diversity of country situations. The Post 2015 framework might consider the inclusion of differentiated targets for countries based on levels of development.

⁸⁸ References available at www.pmnch.org



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LIST OF SIGNATORIES

| Institution | Country |
|---|----------------|
| Afghan Midwives Association | Afghanistan |
| Association Shifa des Maladies NeuroMusculaires (ASMNM) | Algeria |
| The Institute for Clinical Effectiveness and Health Policy from Argentina | Argentina |
| Nossal Institute Limited | Australia |
| The Public Health Association of Australia (PHAA) | Australia |
| BRAC Institute of Global Health (BIGH) | Bangladesh |
| Prince Leopold Institute of Tropical Medicine Antwerp | Belgium |
| the International Federation for Spina Bifida and Hydrocephalus | Belgium |
| Botswana Family Welfare Association (BOFWA) | Botswana |
| The African Leaders Malaria Alliance | Botswana |
| Family Care International - Burkina Faso | Burkina Faso |
| Ministère de la santé publique et de la lutte contre le Sida | Burundi |
| Ministry of Health Cambodia | Cambodia |
| World Health Organization Cambodia | Cambodia |
| Action for Humane Hospitals(ACTHU) | Cameroon |
| Cameroon Christian Welfare Medical Foundation (CAMCWEMEF) | Cameroon |
| Health Vigilance Programme | Cameroon |
| Organisation de Développement et des Droits de l'Homme au Cameroun (GICAR-CAM) | Cameroon |
| Interagency Coalition on AIDS and Development (ICAD) | Canada |
| Plan International Canada | Canada |
| SickKids Centre for Global Child Health | Canada |
| The Coalition for Children Affected by AIDS | Canada |
| The Honourable Salma Ataullahjan's Office | Canada |
| The Queen's University | Canada |
| The Society of Obstetricians and Gynaecologists of Canada (SOGC) | Canada |
| Transition nutritionnelle (TRANSNUT) Université de Montréal | Canada |
| Prevention of mother-to-child transmission of HIV (PMTCT) program in Ndjamena | Chad |
| The Mother and Child Health and Education Trust | China |
| The Peking University Center of Medical Genetics | China |
| The Colombian Academy of Public Health and Social Security (ASPYDESS) | Colombia |
| The Colombian Federation of Obstetrics and Gynecology (FECOLSOG) | Colombia |
| the Czech Family Planning Association (IPPF EN member association) | Czech Republic |
| The Danish Association of Midwives | Denmark |
| The International Islamic center for Population Studies and research, Al Azhar University | Egypt |
| WHO, Egypt | Egypt |
| Ethiopian Midwives Association | Ethiopia |
| Media and Communications Center-The Reporter | Ethiopia |
| midwives@ethiopia | Ethiopia |
| International Union of Immunological Societies (IUIS) | Finland |
| The Finnish NGDO Platform to the EU, Kehys | Finland |
| The Finnish Society of Obstetrics and Gynaecology | Finland |
| Väestöliitto, the Family Federation of Finland | Finland |
| World Vision Finland | Finland |
| International Federation of Medical Students' Associations | France |
| Women and Health Alliance (WAHA) | France |
| WHO Inter-country Support Team, Central Africa | Gabon |
| EFCNI – European Foundation for the Care of Newborn Infants | Germany |
| German Federal Ministry for Economic Cooperation and Development (BMZ) | Germany |
| Rotarian Action Group for Population & Development (RFPD) | Germany |
| African Youth and Adolescents Network on Population & Development | Ghana |
| Alliance for Reproductive Health Rights | Ghana |
| Community and Family Aid Foundation | Ghana |
| Community and Family Foundation | Ghana |
| Curious Minds Ghana | Ghana |
| Ghana News Agency | Ghana |
| MOH Ghana | Ghana |
| Planned Parenthood Association of Ghana (PPAG) | Ghana |
| Rural-Urban Women And Children Development Agency (RUWACDA) | Ghana |
| The Alliance for Reproductive Health | Ghana |
| The Local Development Agency on Reproductive and Maternal Health (LODARMAH) | Ghana |
| The Vaah Junior Foundation for Better Maternal and Child Health | Ghana |
| UNFPA Youth Advisory Panel Ghana Chapter | Ghana |
| Youth Against Stigma | Ghana |
| The International Alliance of Women (IAW) | Greece |



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| Institution | Country |
|--|-------------|
| AVNI Health Foundation | India |
| Azad India Foundation | India |
| CEDPA India | India |
| DakshamA Health and Education | India |
| Gram Bharati Samiti (GBS) | India |
| Indian Education Foundation | India |
| Mahatma Gandhi Institute of Medical Sciences, Sewagram, India | India |
| Mahatma Gandhi Medical College & Research Institute | India |
| P.S.S. Educational Development Society | India |
| Solidarity and Action Against HIV Infection in India (SAATHII) | India |
| Swasti | India |
| The Children's Project International | India |
| Universal Versatile Society | India |
| Prof. Dr. Nila F. Moeloek, Indonesia President's Special Envoy on the MDGs | Indonesia |
| ASL di Milano | Italy |
| Doctors with Africa CUAMM | Italy |
| The Center for Child Health and Development | Italy |
| The European School for Maternal Newborn and Child Health | Italy |
| Japan Society of Obstetrics & Gynecology (JSOG) | Japan |
| Space Allies (Japan) | Japan |
| African Women's Development and Communications Network (FEMNET) | Kenya |
| One World Public Relations | Kenya |
| The African Women Leaders Network (AWLN) | Kenya |
| The Elizabeth Glaser Pediatric AIDS Foundation | Kenya |
| Semya Klinik Ltd. | Kyrgyzstan |
| The Ministry of Health of the Kyrgyz Republic | Kyrgyzstan |
| WHO CO in KGZ | Kyrgyzstan |
| Lebanese Society of Obstetrics & Gynecology (LSOG) | Lebanon |
| Center for Youth Development and Transformation | Malawi |
| Centre for Girls and Interaction (CEGI) | Malawi |
| Organization for Sustainable Socio-Economic Development Initiative (OSSEDI) | Malawi |
| Association pour le développement et de la promotion des droits humains (ADPDH) | Mauritania |
| Con Amor Venceras, Primero lo Primero | Mexico |
| Fundacion Mexicana para la Planeacion Familiar, AC (MEXFAM) | Mexico |
| N'weti Health Communication | Mozambique |
| Women Acting Together for Change (WATCH) | Nepal |
| The International Society for the Study of Hypertension in Pregnancy (ISSHP) | Netherlands |
| Africa Coalition on Maternal, Newborn & Child Health | Nigeria |
| Africa Health Budget Network | Nigeria |
| Afrihealth Optonet Association | Nigeria |
| Centre for Healthworks, Development and Research (CHEDRES) | Nigeria |
| Centre for Nonviolence and Gender Advocacy in Nigeria (CENGAIN) | Nigeria |
| Christian Fellowship and Care Foundation, Nigeria | Nigeria |
| Coalition on Vaccines, Vitamins and Immunizations for All Nigerians [COVIAN]/Afrihealth Optonet Association | Nigeria |
| Covenant University, Ota, Ogun State | Nigeria |
| Health and Research Initiative, Nigeria | Nigeria |
| Health Education and Empowerment Initiative | Nigeria |
| Hope-Aid Organisation | Nigeria |
| Premier Medical Systems (PMS) Nig. Ltd. | Nigeria |
| The Action Group on Adolescent Health (AGAH) | Nigeria |
| The Centre for Research in Reproductive Health, Sagamu Nigeria | Nigeria |
| The DFID and Government of Norway-funded Partnership for Reviving Routine Immunisation In Northern Nigeria - Maternal newborn and Child Health (PRRINN-MNCH) Programme | Nigeria |
| The Society of Gynaecology and Obstetrics of Nigeria (SOGON) | Nigeria |
| University College Hospital Ibadan | Nigeria |
| Wellbeing Foundation | Nigeria |
| Wellbeing Foundation Africa | Nigeria |
| Women United for Economic Empowerment | Nigeria |
| Women's Initiative for Self-Actualization (WISA) | Nigeria |
| Laerdal Global Health | Norway |
| The Norwegian Medical Student's Association (NMSA) | Norway |
| Centre for Health and Population Studies - CHPS | Pakistan |
| Peace Foundation Pakistan | Pakistan |
| Village Shadabad Organization | Pakistan |
| WHO Islamabad | Pakistan |
| El Centro Paraguayo de Estudios de Población CEPEP | Paraguay |
| Future Generations | Peru |
| WHO WPRO | Philippines |
| Associação Portuguesa de Apoio ao Bebê Prematuro | Portugal |



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| Institution | Country |
|--|-----------------|
| INSINQ research Focus area for quality Nursing and Midwifery | South Africa |
| Mashadane Research Centre | South Africa |
| Milk Matters | South Africa |
| Oxfam | South Africa |
| Perinatal Education Trust | South Africa |
| Soapbox Collaborative | South Africa |
| The Graça Machel Trust | South Africa |
| The South African Medical Research Council | South Africa |
| WHO, South Sudan | South Sudan |
| ICS Integreare | Spain |
| the Barcelona Institute for Global Health (ISGlobal) | Spain |
| Ahfad University for Women and its Gender and Reproductive Health and Rights Resource Center (GRACE) | Sudan |
| Swedish International Development Cooperation Agency (Sida) | Sweden |
| Enfants du Monde | Switzerland |
| International Council of Nurses | Switzerland |
| Medicus Mundi International (MMI) | Switzerland |
| Novartis Foundation for Sustainable Development | Switzerland |
| OXFAM | Switzerland |
| Sight and Life | Switzerland |
| TESS Development Advisors | Switzerland |
| The International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) | Switzerland |
| The International Federation of Red Cross and Red Crescent (IFRC) | Switzerland |
| The International Society for Telemedicine and eHealth (ISfTeH) | Switzerland |
| The Mintaka Foundation for Medical Research | Switzerland |
| The World YWCA | Switzerland |
| UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR) | Switzerland |
| Union for International Cancer Control (UICC) | Switzerland |
| Women's Hope International Switzerland | Switzerland |
| Evidence for Action (E4A) Tanzania | Tanzania |
| Hope foundation for Social entrepreneurship | Tanzania |
| Partnership for Nutrition in Tanzania (PANITA) | Tanzania |
| The Centre for Counselling, Nutrition and Health Care (COUNSENUTH) | Tanzania |
| CORDAID Foundation | The Netherlands |
| International Confederation of Midwives (ICM) | The Netherlands |
| MOH Netherlands | The Netherlands |
| ResultsinHealth | The Netherlands |
| Simavi | The Netherlands |
| Generosity international lifecare development coalition | Uganda |
| Joint Efforts for Youth Uganda (JOY Uganda) | Uganda |
| Makerere University college of Health Sciences | Uganda |
| Shanti Uganda Society | Uganda |
| Uganda Private Midwives Association | Uganda |
| White Ribbon Alliance for Safe Motherhood Uganda | Uganda |
| Ammalife | UK |
| Concern Worldwide | UK |
| Development Media International | UK |
| Evidence for Action MamaYe | UK |
| Global Alliance for Improved Nutrition (GAIN) | UK |
| Health Partners International | UK |
| Impact at the University of Aberdeen | UK |
| International Federation of Gynaecology and Obstetrics - FIGO | UK |
| International Planned Parenthood Federation (IPPF) | UK |
| LSHTM's MARCH Centre | UK |
| OMEGA DIAGNOSTICS LTD | UK |
| Population Matters | UK |
| Robert Taylor Communications Ltd | UK |
| Royal College of Obstetricians and Gynaecologists , Dept Global Health | UK |
| Save the Children International | UK |
| Soapbox Collaborative | UK |
| The Centre for Maternal and Newborn Health, Liverpool School of Tropical Medicine (LSTM) | UK |
| The Department for International Development (DFID) | UK |
| The International Society of Ultrasound in Obstetrics and Gynecology (ISUOG) | UK |
| the Journal of Health Research Policy and Systems (HARPS) | UK |
| The Liverpool Women's NHS Foundation Trust | UK |
| The Royal College of Obstetricians & Gynaecologists | UK |
| The Sanyu Research Unit for International Maternal and Child Health, University of Liverpool | UK |
| WaterAid | UK |
| Women and Children First - UK | UK |
| World Federation of Societies of Anaesthesiologists (WFSA) | UK |



Secretariat Hosted by the World Health Organization and Board Chaired by Mrs Graça Machel

| Institution | Country |
|--|---------|
| Iniciativas Sanitarias Uruguay | Uruguay |
| The Uruguayan Society of Obstetrics & Gynecology | Uruguay |
| 34 Million Friends of UNFPA | USA |
| A Promise Renewed for the Americas | USA |
| Bill & Melinda Gates Institute for Population and Reproductive Health | USA |
| BIOMETRAC | USA |
| Catholic Medical Mission Board (CMMB) | USA |
| Center for Health and Gender Equity (CHANGE) | USA |
| CORE Group | USA |
| Every Mother Counts | USA |
| Family Care International | USA |
| FHI 360 | USA |
| GBCHealth | USA |
| Global Alliance to Prevent Prematurity and Stillbirth (GAPPS) | USA |
| Global Health Action, Inc. | USA |
| Global Health Council | USA |
| Global Network for Perinatal & Reproductive Health (GNPRH), Oregon Health & Science University | USA |
| HDI-Norway and HDI-US (Health & Development International) | USA |
| Hoffman & Hoffman Worldwide | USA |
| Ibis Reproductive Health | USA |
| ICF International | USA |
| IntraHealth International, Inc. | USA |
| Ipas | USA |
| John Snow, Inc. (JSI) | USA |
| Johns Hopkins Bloomberg School of Public Health | USA |
| Johnson & Johnson | USA |
| Management Sciences for Health (MSH) | USA |
| March of Dimes | USA |
| Maternova | USA |
| PATH | USA |
| Pathfinder International | USA |
| Population Media Center | USA |
| Rabin Martin | USA |
| Safe Motherhood Program, Bixby Center, University of California, San Francisco | USA |
| Sage Innovation | USA |
| Society for Development & Community Empowerment (SDCE) | USA |
| The Averting Maternal Death & Disability Program (AMDD) at Columbia University Mailman School of Public Health | USA |
| The Center for Health Market Innovations | USA |
| The Fistula Care Plus Project at EngenderHealth | USA |
| The International Federation of Pharmaceutical Wholesalers (IFPW) and IFPW Foundation | USA |
| the International Lactation Consultant Association | USA |
| The International MotherBaby Childbirth Organization (IMBCO) | USA |
| The International Pediatric Association (IPA) | USA |
| The Liya Kebede Foundation | USA |
| The Maternal Health Task Force at Harvard School of Public Health | USA |
| The Pan American Organization (PAHO) | USA |
| The Unexpected Project | USA |
| The Washington Global Health Alliance | USA |
| The World Congress of Muslim Philanthropists and The Academy of Philanthropy | USA |
| UN Foundation (UNF) | USA |
| UNFPA | USA |
| Unilever | USA |
| WASH Advocates | USA |
| White Ribbon Alliance | USA |
| Women Deliver | USA |
| World Bank | USA |
| World Health Partners | USA |
| Plan - International | Vietnam |
| Mumena Royal Establishment | Zambia |
| UN MDGs Professional Support Group for Africa (UN MDGsPSGA) | |

