



Women's,
Children's and
Adolescents'
Health

Hosted by the World Health Organization

20 Avenue Appia
1211 Geneva 27, Switzerland
pmnch@who.int
www.pmnch.org

33rd PMNCH Board meeting

Executive Director Remarks

[Watch video: Here](#)

Rt Hon Helen Clark, Members of Board, Dear colleagues,

Thank you for this opportunity to share some thoughts with you as the new Executive Director, of the Partnership for Maternal, Newborn and Child Health.

It's an honor to be with you all today.

I started my role on May 15th, so am still very new.

At the outset I would like to express my warm thanks to the Board for the trust you have shown in appointing me to this role.

It's an honor to succeed [my dear friend,] the indomitable Helga Fogstad. Helga you taken this partnership to new heights and I know you will continue to lead efforts to advance the women, children and adolescent health agenda.

As I start my own journey as PMNCH Executive Director, I do so with an earnest desire to serve you all. PMNCH is each and every one of you: those in the room, those far beyond and the 1,490 organisations that you represent.

The Secretariat and I are here to serve you and to join you in advocating for every woman, every child and every adolescent, everywhere.

And you have my unwavering commitment that we shall do so, without fear or favour, not just at the global policy forums in Geneva or New York, but in the regional and national forums of the 127 countries where PMNCH partners are to be found.





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Over these first few weeks, several of you reached out to me and shared your reflections – thank you. I have also had the pleasure of attending the various constituency, work streams and working group discussions and I have benefited already from listening as you share your experiences and expectations.

Thank you for that welcome and inspiration, but thank you for those many ways in which you are standing up for women, children and adolescents.

You don't only represent constituencies. You don't only provide much needed political leadership. You don't only fund PMNCH. You don't just host us. No. You ARE the Partnership.

And it is your passion, drive and commitment – jointly and severally - that makes us who we are.

Thank you also for what you have accomplished.

The incredible gains this network has achieved cannot be listed in mere minutes, but where would our hopes and aspirations be without the work of this Partnership? This Partnership which led to the Global Strategy on Every Woman, Every Child? Which enabled the 1.8 Billion Campaign? That made the strides for newborn and child health through the Born to Soon Reports? That made the powerful case through its work on economics and finance, for investments in women, children and adolescent health.

That said, that appreciated and celebrated, nonetheless it is no time to rest on our laurels.

These are challenging times and tougher for women, children and adolescents.

Mothers, newborns and children ARE continuing to die of preventable causes AND they are dying on our watch. The very purpose for which this Partnership was formed almost 20 years ago is yet to be achieved.

The progress reached by the end of Millennium Development Goals is starting to reverse. We are witnessing stagnation, and in places, even worsening indicators of maternal, newborn and child health.



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Many blamed COVID19 for that stalled progress. But let's be clear, it began before COVID, as other agendas began to sideline global health, as other priorities left the most excluded, the most marginalized of women, children and adolescent even further behind.

War, climate crisis, rising costs of living and contagion threaten hard won gains for women, children and adolescents.

With more people than ever before living in fragile settings, and for protracted periods of time (up to 20 years as UNHCR estimates) as much as 60% of maternal mortality and 50% newborn and child mortality occurs in crisis contexts.

Particularly adverse outcomes are being reported for mothers and their newborns living in countries facing extreme heat conditions.

The challenges we must confront are escalating, thrusting our world into a state of polycrisis. Multiple economic, environmental, technological and social shocks are converging, driving and deepening inequalities within and between countries, as is particularly evident in health. Those already marginalized, those already excluded, those living in low-income countries bear the brunt disproportionately, unfairly.

All of that is taking place in a context of mounting distrust in public institutions. Democratic values are under attack, evidenced by increasing restrictions imposed on civil society organisations. Anti-rights, anti-gender and anti-SRHR rhetoric is flourishing at global, regional and national levels but in clinics too, with devastating consequences also for those advocating for sexual and reproductive health and rights and those providing for adolescent wellbeing for maternal and child health – who are to be found in hostile political contexts attacked, abused and even incarcerated for their work.

Advances in digital technology and artificial intelligence that hold much promise to revolutionize choice and access for those hardest to reach, are being used to spread mis and dis information, perpetuate hatred, stigmatize those in need of such as safe abortion services and threaten the well-being of our young people.



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Colleagues, dear friends, worsening maternal health for the most vulnerable, stigmatizing those seeking abortion care, preventing a young person from learning about their growing bodies? Those are not the practices or the policies that we should be facing in 2024 and yet we do!

Thirty years on, the agendas of ICPD and Beijing are still unfinished while novel challenges further demand that for best impact we must come together in solidarity, and in partnership. The same fire, determination and courage that sparked this partnership in 2005 is needed once more – to fuel our demand for change. The women, children and adolescents of the world are looking to us to do no less.

This Partnership again has such a significant role to play: in galvanizing political priority for women, children and adolescent health – in creating global consensus on how to address those issues effectively and in convincing governments, international organizations and other global actors to play their parts.

We **MUST** continue to do that and do it even greater rigor, greater boldness and greater courage.

At the heart of this is allyship – of different stakeholders brought together by a common cause -and we can find inspiration for our journey ahead.

We can congratulate, our host institution, the World Health Organisation for their rallying call to governments through its 14th Global Programme of Work to advance health equity and resilience in a turbulent world by promoting, providing and protecting health and well-being, situating women, children and adolescents at the heart of this agenda.

We can take hope from the leadership of Somalia, who along with over 50 other countries demanded acceleration of reduction in maternal, newborn and child mortality.

We take courage from the work of women's rights organisations who campaigned for the reversal of the legislation on FGM in Gambia.



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We can take inspiration from countless advocates who have championed abortion rights in the most adverse of settings.

And we can be so grateful too to the millions of young people marching on streets the world over, demanding a better future for us and our planet.

They remind us that exercise of courage in these challenging times is not only possible: it is essential.

The Partnership is grounded in the very ethos of courageous solidarity and it remains our most fundamental value. But we will not accomplish our goals if our agendas remain siloed; if we remain silent when women, children and adolescents are not guaranteed their human rights.

In that global struggle please be assured: PMNCH will continue to stand with each and every one of you.

Our solidarity is manifest in our 10 constituencies and 1490 partners which we will continue to channel to end preventable deaths of mothers, newborns and children, and promote, protect and fulfil people's human rights, to tackle injustice and to create a better and safer future for our children and our children's children.

We can do this, because we do it together. We can do it together because you all are here, which is itself a statement of your commitment.

Our collective voice must be heard: that the surest way to emerge from this polycrisis is by future proofing humanity and the most effective way to do just that is by investing in women, children and adolescents.

Let's once more come together to demand a world in which every woman, child and adolescent can realize their right to health and well-being with none of them left behind.

Over the course of next two days you will hear about the progress we all have made to implement our collective workplan; the priorities we have identified for the next 18 months to drive this agenda forward and how we will advance the process to develop your new strategy for the Partnership from 2026 to 2030.



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But as we enter this 20th year of PMNCH and the next chapter in our collective journey, we must redouble our efforts; sustain existing and build new alliances and methodologies to bring about inclusive change to scale.

We must be intentional about serving those hardest to reach, those living in resource poor settings, those most at risk and we must work to amplify their voices.

Arundhati Roy has told us, ***"Another world is not only possible, she is on her way. On a quiet day, I can hear her breathing."***

She is indeed on her way, but we need first to clear her path of obstacles and work together to speed her journey.

It is to that that I pledge myself. I call on your support to guide me and help me deliver that pledge. Thank you