

Key advocacy messages to improve the health of women, children and adolescents

The <u>Seventy-eighth World Health Assembly</u> (#WHA78) will take place in Geneva, Switzerland, on 19–27 May 2025. The theme of this year's Health Assembly is: One World for Health.

PMNCH – the world's largest alliance of more than 1,500 partners working on improving women's, children's and adolescents' health (WCAH) – is calling for political leaders and all stakeholders to urgently prioritize the health and rights of women, children and adolescents, and scale up policies, investments and services to address their needs. Below is a list of resources to support PMNCH partners with evidence-based messages and key resources to advocate for WCAH at WHA78.





Threats to multilateralism and global health

- · Recent geopolitical shifts and foreign aid decisions catastrophic have consequences for health development and financing, and pose serious challenges to our efforts collective advance the health and rights of women, children, and adolescents.
- Climate change, conflict, economic instability, and global health emergencies are disrupting services, overwhelming systems, and deepening existing inequalities, which women, children and adolescents disproportionately feel.



Addressing the financial crisis

- Compounding this issue are the shrinking Official Development Assistance (ODA) funding flows. The impact is felt most acutely in the most vulnerable communities, where ODA plays a crucial role in bridging gaps in health care, education, and social protection.
- A country-led shift toward increased domestic financing—especially for primary healthcare—is essential to reduce dependence on external aid. However, in humanitarian and fragile settings, continued donor support remains critical. While transitioning from ODA to domestic funding is important, the current pace of aid reduction risks undermining essential WCAH services before sustainable systems are in place.

Prioritizing WCAH and integration across the continuum

- In times of fiscal constraints, integrated services offer a cost-effective approach by streamlining resource use, avoiding duplication, and maximizing the impact of limited health budgets.
- Efforts must be taken to strengthen health systems by integrating essential WCAH services, building and retaining a skilled health workforce, leveraging digital innovations, and ensuring quality of care through patient-centered approaches.



WHA78 Agenda items relevant for WCAH

Preliminary Agenda: https://apps.who.int/gb/ebwha/pdf files/WHA78/A78 1-en.pdf

Item 13.1 Global strategy to accelerate the elimination of cervical cancer as a public health problem and its associated goals and targets for the period 2020–2030 (resolution WHA73.2 (2020))

https://apps.who.int/gb/ebwha/pdf_files/EB156/B156_(22)-en.pdf

13.3 Universal health coverage and Primary health care EB Doc:

https://apps.who.int/gb/ebwha/pdf_files/EB156/B156_6-en.pdf

Item 13.7 Global strategy on human resources for health: workforce 2030

https://apps.who.int/gb/ebwha/pdf_files/EB156/B156_(27)-en.pdf

Item 13.9 Global strategy for Women's, Children's and Adolescents' Health

- Report Global Strategy for Women's, Children's and Adolescents' Health
- Executive Board Decision on: <u>Incorporation of the World Prematurity Day into the WHO</u> <u>calendar, to strengthen approaches to prevent preterm births and treat and care for preterm infants</u>
- Executive Board Decision on: Regulating the digital marketing of breast-milk substitutes

Item 14. Health in the 2030 Agenda for Sustainable Development

https://apps.who.int/gb/ebwha/pdf_files/WHA78/A78_7-en.pdf_

Item 18.2 Updated Roadmap for an enhanced global response to the adverse health effects of air pollution

<u>Updated road map for an enhanced global response to the adverse health effects of air pollution</u>

Item 18.3 Climate change and health

<u>Climate change and health - Draft Global Action Plan on Climate Change and Health</u>

Item 28.1 (B) WHO global action plan on promoting the health of refugees and migrants, 2019–2030 (resolution WHA76.14 (2023))

Progress reports

Item 28.1(N) WHO global plan of action to strengthen the role of the health system within a national multisectoral response to address interpersonal violence, in particular against women and girls, and against children (resolution WHA69.5 (2016)) and Ending violence against children through health systems strengthening and multisectoral approaches (resolution WHA74.17 (2021))

Progress reports

Towards evidence-based solutions





Key data

- In 2023, every day, 712 women died from maternal causes. Almost twothirds (64%) of all maternal deaths occurred in conflict-affected or fragile countries (source).
- Each minute, death comes to more than 9 children under the age of five 4.8 million a year for reasons that could be largely avoided, with nearly half (48%) of these deaths occurring in newborns aged 0-1 month and 2.5 million (52%) among children aged 1-59 months. Preterm birth is the leading cause of death of children under-five, responsible for 1 in 5 deaths (source).

Asks

- Investing in essential maternal, newborn, and child health is one of the most cost-effective strategies to reduce preventable deaths and build equitable health systems. Securing and prioritizing MNCH investments will be crucial to accelerate progress towards 2030.
- Stakeholders should prioritize high-impact and quality MNCH services in UHC and emergency response plans, including PPPR and climate adaptation plans.



Key data

- Among the 1.9 billion women of reproductive age group (15–49 years) worldwide in 2021, 164 million had an unmet need for contraception (WHO)
- Among adolescent girls who have been in a relationship, nearly a quarter (24%) close to 19 million will have experienced physical and/or sexual intimate partner violence by the time they turn 20 years old (The Lancet)

Asks

- To advance comprehensive SRHR, policymakers must commit to a progressive, evidence-based agenda that actively counters mis- and disinformation. This includes investing in inclusive education, ensuring equitable access to services, and protecting the rights of all individuals, especially those most marginalized.
- Strengthening legal frameworks and social protections to prevent child marriage and sexual violence is crucial. These protections are vital to reduce the incidence of adolescent pregnancies, ensuring young people can pursue a healthy, safe developmental path.



Key data

- More than 12 million teenage girls give birth globally each year. Pregnancy and childbirth-related complications are the leading cause of death among 15-19 year old girls (WHO)
- Globally, one in every five girls is formally married or in an informal union before reaching age 18. An estimated 640 million girls and women alive today were married in childhood; each year 12 million adolescent girls are married before the age of 18; every three seconds, an adolescent girl gets married somewhere in the world (UNFPA).

Asks

- Leaders and donors must commit to invest more and integrate adolescent health and well-being into national health systems and policies, ensuring access to comprehensive, adolescent and youth-friendly information and services including mental health, sexual and reproductive health, and nutrition.
- Work with advocates and across stakeholders to establish formal youth advisory mechanisms at national and global levels to ensure meaningful adolescent and youth participation in the design, implementation, and evaluation of health and well-being programs.

Do you want agenda specific data points?



WHA78 at a Glance - How to engage

Hosted by the World Health Organization

One World for Health











Keep in mind:

Participation: Delegates, observers, and other participants can engage in discussions and decision-making processes.

- **Registration:** Ensure you are registered through the official channels.
- **Documentation:** Access and review relevant documents and reports available on the <u>WHO</u> website
- Networking: Utilize opportunities to connect with other delegates and stakeholders
 Delegates Guide: How to Prepare an Official Statement

Research: Gather all necessary information and data relevant to your topic.

Drafting: Write a clear and concise statement, focusing on key points and recommendations. **Review:** Have your statement reviewed by colleagues or experts to ensure accuracy and clarity.

Submission: Submit your statement through the official channels before the deadline.

Meeting documents

This is a paperless meeting unless documents are ordered in advance and there will be no provision for the dispatch or transport of any documentation made available during the Health Assembly.

Find all relevant documentation of the assembly here:



Interventions:

Prepare your intervention, ensuring it aligns with the agenda and objectives. **Deliver** your intervention clearly and confidently during the allocated time.

Follow-up: Engage in follow-up discussions and actions based on the outcomes of your intervention.

in Committee A and Committee B:

Delegates wishing to take the floor should raise their nameplates in the main committees. Delegates requiring assistance in the main committees should contact the Secretary of the Committee concerned (shown below). The list of non-State actors wishing to take the floor will be shared with the Chair of the committee.

Statements are made at the invitation of the Chair. The time limits for statements will be provided in due course.

Delegates wishing to have their statements posted on the Health Assembly webpage (https://apps.who.int/gb/e/e_wha78.html) or to share a longer statement containing additional information may send it to statements@who.int.





