Side event application / Formulaire de demande de réunion parallèle

Contact

<table>
<thead>
<tr>
<th>Name/Nom: name tbc, Mission of Fiji</th>
<th>Date of application/Date de la demande: 29th March 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delegation(s)/Délégation(s): Fiji, Malawi, Sweden, UK, Canada, Nepal with the International Confederation of Midwives (ICM), the International Federation of Obstetricians and Gynaecologists (FIGO), UNICEF, and UNFPA</td>
<td></td>
</tr>
</tbody>
</table>

Telephone, Email/Téléphone, courriel:

Concept

<table>
<thead>
<tr>
<th>Description of proposed side event, including objective, expected results, proposed programme and speakers* / Description de la réunion parallèle proposée, y compris les objectifs, les résultats attendus, l’ordre du jour et les orateurs* :</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objectives</strong></td>
</tr>
<tr>
<td>1. To build political momentum for the importance of Universal Health Coverage (UHC) to the implementation of the Global Strategy for Women’s, Children’s and Adolescents Health 2016-30 with a focus on actions to save lives and improving wellbeing for all women and newborns everywhere, including through strengthening and expanding access to midwifery care for sexual and reproductive health and rights (SRHR) and empowerment of women, girls, adolescents.</td>
</tr>
<tr>
<td>2. To call for effective partnerships at all levels – global, regional, national and local- to advocate for effective UHC policies and to monitor progress of implementing UHC commitments through action on and accountability for quality midwifery education, as identified through seven global multi-stakeholder consultations, including for humanitarian settings.</td>
</tr>
<tr>
<td>3. To provide support to Member States in how to take evidence-informed action through the release of the new WHO-ICM-UNFPA-UNICEF guidance and 7 Step Action Plan on « Strengthening quality midwifery education for UHC 2030 »</td>
</tr>
</tbody>
</table>

Background

UHC is critical to the achievement of the Global Strategy for Women’s, Children’s and Adolescent’s Health, the SDGs 1, 3, 5, 6, 8 and 10.

Over 80% of all maternal deaths, stillbirths and newborn deaths could be averted through quality midwifery care, where it includes family planning and access to safe abortion, or post abortion care where abortion is not legal. There is compelling evidence that outcomes for women and newborns are improved where safe midwifery care is provided by midwives educated, trained and regulated to the standards of the International Confederation of Midwives (ICM), and working effectively in teams with obstetricians, paediatricians and nurses. Midwife-led continuity of care, where midwives or teams of midwives in well-functioning midwife programmes provide continuity of care to a woman throughout her pregnancy, childbirth and the postnatal period, can prevent over 20% of preterm births, reduce stillbirths, prevent unnecessary intervention and improve the experience for women. In countries where international standards of education are yet to be reached, it is critical that inter-professional teams of nurses, nurse-midwives and doctors are educated and work together to provide the best safe care possible while quality, international standard education is being strengthened.

UHC relies on the geographic and social connection of health workers with people even in the most hard to reach areas and in humanitarian emergencies. Well educated midwives (in a mainly female profession) live within the communities of the women, newborns and the families they care for, ensuring local knowledge and maximising impact.

Those providing midwifery care, especially when they are women, experience multiple socio-cultural, economic, and professional barriers to their being able to ensure the care they provide is high quality, in facilities and in communities in low, middle, and high-income countries alike. At the root of all of these factors lies the low status of women, affecting women who are midwives as much as the women they care for. The discrimination and disempowerment described by midwives is complicated by the powerful intersection of gender inequality with professional hierarchies at local, national, and global levels. Midwifery education is empowering, giving a voice to those who care for others and strengthening the position of women in strategic leadership positions to influence and improve quality and safety of care.

In 2019, this event will focus on achieving UHC through delivering the Global Strategy for Women’s, Children’s and Adolescent’s Health, quality of care/patient safety and empowerment of women. It will enable key actors including women and midwives to have their voices heard. It will advocate for effective partnerships, bring together the findings of seven global
multi-stakeholder consultations, and present the strategic priorities and solutions identified. This includes a new 7 Step Action Plan for governments and partners to help them achieve UHC through strengthening quality midwifery education, and the collective action needed to ensure all women and their newborns everywhere can receive safe, quality care.

In 2020, we will celebrate 200 years since the birth of Florence Nightingale. It is envisaged that two workforce reports will be launched: the first State of the World’s Nursing report, and the third State of the World’s Midwifery report. This 2019 event will help raise global awareness for 2020, while focusing on quality care for all women and newborns everywhere.

Expected results
This event will inform the World Health Assembly discussions on UHC, PHC, SRHR, gender and equality with a focus on quality care for all women, newborns and their families. It will provide depth and support to the implementation of the SDG Action Plan through the seven evidence-informed action steps to improve quality midwifery education. These include: strengthening women’s leadership; gathering data and evidence and strengthening policies; building public awareness and advocacy; preparing educational institutions, building capacity of teachers and updating curricula; educating teachers and students, and a cycle of monitoring and evaluation throughout. This will help us all to Account for progress through Collective Action.

Proposed programme and Speakers
This interactive event will start with a short film: “Parallel Lives” (WaterAid) https://www.youtube.com/watch?v=pz84KiKAKPs highlighting the links between patient safety, WASH and UHC, and the role of NGO’s in partnerships.

Potential speakers
Moderator: Elizabeth Iro, WHO Chief Nurse/Lord Nigel Crisp
Opening remarks: WHO DG
Panelist 1. Minister of Health, Fiji (focus on education of midwives for cyclone preparedness, link to global warming)
Panelist 2. ICM Chief Executive, Sally Pairman (focus on why international standards matter for patient safety, and how midwives are critical to achieve UHC)
Panelist 3: Minister of Health, Sweden (focus on Sweden’s support to SRHR rights through midwifery to date)
Panelist 4: Minister of Health, Nepal (focus on investment on midwifery education to “leave no-one behind”)
Panelist 5: Minister of Health, Malawi (focus on women’s empowerment for midwifery leadership and quality care)
Comment from the floor: a midwife: the daily reality, the care she wants to give to women and newborns,
Panelist 6: Minister of Health, India: The launch of Guidelines on Midwifery Services in India, December 2018, PMNCH Partners Forum
Close panel with short film « What I want is simple » White Ribbon Alliance (WRA) https://www.youtube.com/watch?v=ZhE161OF_L

Brief comments from the floor:
i. UNFPA: Anneka Knutsson to inform us of appropriate senior UNFPA official
ii. UNICEF: Will Zeck to inform us of appropriate senior UNICEF official
iii. Carlos Fuchner, CE FIGO/OBGYN Professional Association,
iv. Zulfiquar Bhutta, CE International Paediatric Association (IPA)
v. ICN Howard Caton

Open for comments:
Closing: UK Chief Medical Officer, Sally Davies on patient safety and why England has its first Chief Midwife

Event details / détails de la réunion
Date Monday 20th May
Time/Heure lunchtime
Expected number of participants/Nombre de participants attendus : 150

Exact title of the event/Titre exact de la réunion:
Universal Health Coverage to deliver the Global Strategy on Women’s, Children’s and Adolescents Health: re-thinking quality midwifery education

Interpretation/Interprétation
Interpretation may be provided in the official languages and the estimated costs are as follows: 2 languages: 2568 CHF; 3 languages: 5136 CHF; 6 languages: 11985 CHF.

L’interprétation peut être assurée dans les langues officielles aux coûts estimés suivants: 2 langues-2568 CHF; 3 langues : 5136 CHF; 6 langues : 11985 CHF.

Are interpretation services requested ? / L’interprétation est-elle requise ? Yes/Oui x No/Non ☐

If yes, which languages)/(Si oui, en quelle langue)
English/Anglais x French/Français x Russian/Russe ☐ Spanish/Espagnol ☐ Chinese/Chinois ☐ Arabic/Arabe ☐

Other language/autre langue:

Invoice to be sent to/ Facture à envoyer à:
Name/Nom
Postal address/ Adresse postale
E-mail/Courriel

Room Layout/Aménagement des salles
Due to type of furniture and technical equipment in the room, the layout of the rooms cannot be changed. For information regarding the location and layout of rooms at the Palais des Nations, please see:
http://www.unog.ch/80256EE60057CB67/(httpPages)/BAE3AF717207A5AF80256EF80049C552?OpenDocument

Le type de mobilier et les installations techniques dans les salles ne permettent pas de modifier l’aménagement de celles-ci. Pour tout renseignement sur l’emplacement ou la disposition des salles au Palais des Nations voir le lien :
http://www.unog.ch/80256EE60057CB67/(httpPages)/BAE3AF717207A5AF80256EF80049C552?OpenDocument

*Badges/ Badges d’accès
WHAside events are for participants of the WHA and, as such, panelists and participants should be drawn from those participating in the Health Assembly.

Les réunions parallèles sont réservées aux participants de l’Assemblée; Les orateurs de ces réunions doivent donc être choisis parmi ceux-ci.

Please complete the form and send it to/ Merci de remplir le formulaire et de l’envoyer à
hqgoverningbodies@who.int
by 29 March 2019