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Newborn health: draft accountability framework

Report by the Secretariat

- 1. In resolution WHA67.10 the Health Assembly endorsed the newborn health action plan and requested the Director-General, inter alia, to prioritize the finalization of the more detailed monitoring plan with coverage and outcome metrics to track progress of the action plan. Many of the interventions needed to achieve the aims of the Every Newborn Action Plan are targeted at pregnant women during pregnancy and childbirth. Monitoring progress towards the Plan's objectives should therefore be included as part of a joint framework for ending maternal and newborn mortality and stillbirths. This report provides an update on monitoring plans to track progress towards ending preventable maternal and newborn mortality and stillbirths. It describes measures of impact, coverage and quality, milestones to be achieved at global and national levels, and work in progress to improve metrics.
- 2. The goals and strategic objectives of the Every Newborn Action Plan and the Ending Preventable Maternal Mortality initiative¹ were agreed through review and analyses of data and evidence, including peer-reviewed publications,² and extensive global consultations with Member States and other stakeholders through meetings and open web-based forums. The goals will also inform the development of a Global Strategy for Women's, Children's and Adolescents' Health (2016–2030), which will build on the existing Global Strategy for Women's and Children's Health for the period 2010–2015, and form a core part of its monitoring framework.³

ALIGNING THE EVERY NEWBORN ACTION PLAN AND THE ENDING PREVENTABLE MATERNAL MORTALITY INITIATIVE

3. To achieve the agreed goals of ending preventable mortality, the Every Newborn Action Plan has five strategic objectives and the Ending Preventable Maternal Mortality initiative six objectives (see Table 1). Both sets of objectives broadly target equitable coverage with quality care, involvement of health service users, and improved measurement of outcomes.

¹ Strategies for ending preventable maternal mortality (EPMM) http://apps.who.int/iris/bitstream/10665/153544/1/9789241508483_eng.pdf?ua=1 (accessed 8 April 2015).

² See links to The Lancet's Every Newborn Series 2014, available at http://www.thelancet.com/series/everynewborn (accessed 8 April 2015).

³ Every Woman Every Child http://www.everywomaneverychild.org/news-events/news/1014-shaping-the-future-for-healthy-women-children-adolescents-learn-more-about-the-process-to-update-the-global-strategy (accessed 8 April 2015).

Table 1. Strategic objectives for ending preventable maternal and newborn mortality

Every Newborn Action Plan	Ending Preventable Maternal Mortality
1. Strengthen and invest in care during labour, birth and the first day and week of life	1. Improve metrics, measurement systems and data quality, ensuring that all maternal and newborn deaths are counted
2. Improve the quality of maternal and newborn care	2. Address inequities in access to and quality of reproductive, maternal, and newborn health care services
3. Reach every woman and newborn to reduce inequities	3. Ensure universal health coverage for comprehensive reproductive, maternal and newborn health care
4. Harness the power of parents, families and communities	4. Address all causes of maternal mortality, reproductive and maternal morbidities and disabilities
5. Count every newborn – measurement, programme-tracking and accountability	5. Strengthen health systems to respond to the needs and priorities of women and girls
	6. Ensure accountability to improve quality of care and equity

- 4. Essential interventions are well known and span from the time before conception through adolescence. Key factors for the successful implementation of the Action Plan and the initiative include country leadership, integrated care for the mother-baby dyad, equity, accountability, a human rights-based approach, and, centrally, health system strengthening including the need for provision of essential commodities, the existence of basic infrastructure, adequacy of the health workforce, and sufficiency of resources for health care financing. Further, the plans emphasize the need both to improve measurement of health outcomes (mortality and morbidity), in order to facilitate planning and meeting programmatic needs, and for better coordination within and outside the health sector.
- 5. The mortality goals of the Every Newborn Action Plan will only be achieved through improvements in coverage and quality of care for women and babies at birth in facilities, care of the small and sick newborns, improved home care, and community participation. Similarly, most maternal deaths due to obstetric causes occur during and immediately after childbirth. Improving coverage and quality of care during this period will therefore contribute to ending preventable maternal deaths.
- 6. In addition to a focus on the time around childbirth as the period of greatest risk, both plans recognize the importance of the continuum of care, from preconception through antenatal and postnatal care, for improving maternal and newborn health outcomes and preventing stillbirths. Provision of the continuum of care will, for example, enable the delivery of interventions for identifying and managing co-morbid conditions to prevent (indirect) maternal deaths attributed to the consequences of HIV infection and noncommunicable diseases such as pre-existing diabetes, hypertension, and obesity in pregnancy. Access to contraception, family planning, and post-abortion care will also contribute to the reduction of maternal deaths. Special attention is needed to women,

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¹ The Partnership for Maternal, Newborn and Child Health. Essential interventions, commodities and guidelines for reproductive, maternal, newborn and child health. Geneva: World Health Organization; 2012, available at http://www.who.int/pmnch/topics/part_publications/essential_interventions_18_01_2012.pdf?ua=1 (accessed 8 April 2015).

children and adolescents living in settings of conflict, displacement and natural disasters as they account for more than half of global maternal and newborn deaths.¹

GLOBAL INDICATORS FOR ENDING PREVENTABLE MATERNAL, PERINATAL AND NEONATAL MORTALITY

- 7. Since May 2014, WHO and UNICEF have coordinated follow-up action on implementation of the Every Newborn Action Plan through three working groups: advocacy, country implementation and metrics.²
- 8. The metrics group, which is co-chaired by WHO and the London School of Hygiene and Tropical Medicine, comprises a range of technical experts and stakeholders. It works along three tracks: (1) technical mapping and development of indicators, tools and work in progress; (2) institutionalization of the core and additional indicators in national data collection platforms and in global metrics systems for accountability; and (3) leadership development to improve collection, quality, and use of the data for action.
- 9. At its first meeting (Ferney-Voltaire, France, 3 and 4 December 2014), the metrics group agreed on a measurement improvement plan, providing additional evaluation of core and additional indicators for monitoring the Every Newborn Action Plan. The measurement improvement plan also identified tools for data collection, gaps, and needs for improvement in metrics. Working with academic institutions (including three centres of excellence and two networks in Africa and Asia) and other partners, the group currently supports further refinement and testing of indicators, working towards their institutionalization into national data collection platforms (e.g., those for civil registration and vital statistics, facility-based health-management information systems, and household surveys). Reports of the meeting and ongoing work will be published soon.
- 10. Work is under way on harmonizing the framework for measurement of progress in the Ending Preventable Maternal Mortality initiative with the newborn monitoring framework. Concurrent work to define measurable standards of care during childbirth and in the first week after birth for the mother and baby will contribute to the tracking of indicators on quality of care and is expected to become ready for field testing in the second half of 2015.
- 11. The negotiations on the proposed post-2015 sustainable development goals and their monitoring framework should result in agreement on a list of indicators that includes indicators on reproductive, maternal, newborn and child health. These discussions feed into the development of the Global Strategy for Women's, Children's and Adolescents' Health. More detailed plans will be prepared after the indicators for the proposed post-2015 sustainable development goals and the new Global Strategy monitoring framework are finalized.

ACTION BY THE EXECUTIVE BOARD

12. The Board is invited to note this report.

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¹ For Every Woman Every Child Everywhere: The Abu Dhabi Declaration, 2015. http://www.who.int/pmnch/activities/advocacy/globalstrategy/delhi/en/.

² See http://www.everynewborn.org/contact/ for terms of reference of each working group.