



European Union

Statement

WHO

156th Executive Board

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**Agenda item 14- Global Strategy for Women's, Children's and Adolescents'
Health**

Geneva, 7 February 2025

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Chair,

Director-General,

Members of the Executive Board,

Colleagues,

I have the honor to deliver this statement on behalf of the EU and its 27 Member States.

The candidate countries North Macedonia, Montenegro, Serbia, Albania, Ukraine, Republic of Moldova, Bosnia and Herzegovina* and Georgia as well as Armenia align themselves with this statement.

We thank the Director-General for the Global Strategy for Women's, Children's and Adolescents' Health and acknowledge the critical importance of this agenda to advance global health equity.

Over the past 25 years, most of the Sustainable Development Goals (SDG) monitoring indicators related to women's, children's and teenagers' health have improved significantly. However, we are deeply concerned about stagnation in maternal mortality rates since 2015.

Therefore, we are far from reaching the 2030 Agenda targets: the mortality and morbidity rates among women, children, and adolescents are still unacceptably high at global levels and inequalities persist between and among countries. It is our collective responsibility to stay committed to the most effective way of reaching these targets, particularly through effective health promotion, disease prevention, health system strengthening, reinforced and targeted investments in sexual and reproductive health-care services, and achieving universal health

* North Macedonia, Montenegro, Serbia, Albania and Bosnia and Herzegovina continue to be part of the Stabilisation and Association Process.

coverage. This includes promoting healthy and active lifestyles, and addressing all forms of malnutrition through comprehensive appropriate nutrition policies. A special focus should be placed on reaching vulnerable women, children and adolescents in difficult situations.

The EU and its Member States welcome the guidance, the tools, and the country-level support provided by the Secretariat to optimize outcomes for maternal, newborn, child and adolescent health that enhance planning, implementation and monitoring of national programs and strategies. This contributes to strengthened, sustainable and more equitable health system that enable access to quality services, cost-effective interventions, trained and skilled healthcare workforce as well as available and adequate resources.

Health emergencies and crises, poverty, conflicts and climatic hazards led to an increasing number of persons at risk of disease, injury and death, with women, adolescent girls and children as the most impacted. Pregnant women and new born children are amongst the most at risk during crisis situations. Despite the progress made, we must do more. Urgent actions should be prioritized in key areas:

- 1. Expanding equitable access to healthcare products** particularly to combat pre-eclampsia, post-partum hemorrhage and anemia, or to provide access to oxygen. Combining general screening and vaccination against HPV is necessary to reduce mortality linked to several forms of cancer and thus inequalities. To this end, we commend the collaboration with and support to organizations such as Unitaaid and Gavi, to reduce health inequalities in maternal and child health.
- 2. Promoting access to education of women, children and adolescents and the adequate training and development of health and care workforce:** We welcome the important work done by the Human Reproduction Program at WHO. Data collection and guidelines produced on sexual and reproductive health guides us in all aspects of health and education policies, that are crucial in these times of misinformation. The EU and its Member States call for sustained investments in education, training, and retention. The EU remains committed to the promotion, protection and fulfilment of all human rights and to the full and effective implementation of the Beijing Platform for Action and the Programme of Action of the International Conference on Population and Development (ICPD) and the outcomes of their review conferences and remains committed to sexual and reproductive health and rights (SRHR), in this context. Having that in mind, the EU reaffirms its commitment to the promotion, protection and

fulfilment of the right of every individual to have full control over, and decide freely and responsibly on matters related to their sexuality and sexual and reproductive health, free from discrimination, coercion and violence. The EU further stresses the need for universal access to quality and affordable comprehensive sexual and reproductive health information, education, including comprehensive sexuality education, and health-care services.

3. **Advocating for behaviour change and the transformation of those social norms** that negatively impact women and girls and hinder their access to quality, safe and effective health services.

However, we are concerned about the recurring addition of new ‘health days’, as this places additional strain on an already heavy agenda, and raises questions about sustainability, in terms of associated costs and workload for WHO. [Placeholder depending on the outcomes of the discussion in the procedure regarding resolutions]

Effective collaboration between the Organization’s three levels and Member States is key to ensuring that interventions are well-coordinated, resources are used optimally, and support is distributed equally to those who need it most, all while staying aligned with national health plans.

Thank you.