

SEPTEMBER 2014

The H4+ partnership

Joint support to
improve women's
and children's health

H4+



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Acronyms and abbreviations

BEmONC	Basic Emergency Obstetric and Newborn Care
CBO	Community Based Organization
CHW	Community Health Workers
COIA	Commission of Information and Accountability
EmONC	Emergency Obstetric and Newborn Care
ENAP	Every Newborn Action Plan
EWEC	Every Woman, Every Child
HIMS	Health Information Management Systems
MDG	Millennium Developmental Goal
MDSR	Maternal Death Surveillance and Response
MNCH	Maternal, Neonatal and Child Health
MNH	Maternal and Newborn Health
MoH	Ministry of Health
NGO	Non-Governmental Organization
RH	Reproductive Health
RMNCH	Reproductive, Maternal, Newborn, and Child Health
Sida	Swedish International Development Cooperation Agency
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infection
TA	Technical Assistance
UN	United Nations
UNAIDS	United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN CoLSC	United Nations Commission of Life Saving Commodities
UN WOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
WHO	World Health Organization

1. Introduction

In the countdown to 2015, there is widespread concern that global achievement of MDGs 4 and 5 will not be fulfilled. The greatest challenges lie in 75 countries where more than 95% of all global maternal and child deaths occur. Most of these countries are in South Asia and sub-Saharan Africa, home in 2010 to 83% of all deaths to children younger than 5 years, and 85% of all maternal deaths. Nearly all of these 75 “high burden” countries lack the capacity to meet the health MDGs by 2015 on their own, but require the mobilization of global support, or the continued suffering of women and children in these countries will reflect our shared failure.

Recognizing such concerns, in 2010 the United Nations Secretary General launched *Every Woman, Every Child (EWEC) – a Global Strategy for Women's and Children's Health*, to accelerate progress to meet MDGs 4 and 5. Fifty-eight of the 75 high burden countries responded to the Secretary General's call, making concrete commitments and setting targets to advance progress in their countries. These commitments were matched by an outpouring of new and deepened initiatives by bilateral donors, multilateral agencies, NGOs, professional associations, and global networks to enhance advocacy, share knowledge, and deliver evidence based interventions at scale.

This document aims to provide an overview of H4+ mandate, added value and selected achievements at global and country levels since its initiation in 2008. Additional country achievements are available in the “H4+ Progress report – 2013”, which captures the support the H4+ partnership has provided to countries in 2013.

2. Accelerating Progress in Women's & Children's Health

In this constellation of responses, six agencies within the United Nations (UN) system, UNAIDS, UNFPA, UNICEF, UN Women, WHO, and the World Bank, are working together as “H4+”, to intensify their collective, coordinated and harmonized support to the countries with a high burden of maternal, newborn and child mortality and morbidity, especially those that responded to the UN Secretary-General's call by making concrete commitments to the Global Strategy and setting targets to advance progress in their countries.

H4+ is the technical arm of the UN *Global Strategy for Women's and Children's Health*. Initiated in 2008 to advance reproductive, maternal and newborn health, H4+ expanded its mandate in 2010 to include child health, and support those 58 countries committed to implementing *Every Woman, Every Child*. H4+ provides technical leadership for reproductive, maternal, newborn, and child health (RMNCH), embodying complementary mandates for women's and children's health, and building on long-term trusted relationships with one another, and with national governments.

3. H4+ Purpose & Objectives

The mandate of H4+ is to “leverage the collective strengths and distinct advantages and capacities of each of six agencies in the UN system to address poor reproductive, maternal, newborn and child health (RMNCH) in the countries with high burden of maternal and child mortality and morbidity”.

Countries require distinct types of support for RMNCH, therefore all approaches need to be locally defined, and implemented in a manner that advances the national health plan, and strengthens national structures. These principles have been endorsed in meetings in Paris, Accra and Busan, and are based on the recognized sovereignty of all nations to define their development priorities. The need for locally-driven responses is all the more necessary to address MDGs 4 and 5, because the obstacles to their achievement may include diverse problems that extend from health system failures, to underlying problems of gender inequality,

Box 1: Key Objectives of H4+

- (1) Mobilize political commitment and support, and maximize synergies between UN agencies, governments, and other global and national partners for women's and children's health;
- (2) Provide joint technical support for scale up of national integrated RMNCH policies and plans, with a focus on universal rights to access affordable, accessible, easily available, and quality RMNCH services;
- (3) Strengthen national health systems and further national health plans for RMNCH;
- (4) Promote evidence-based interventions to address the root causes of poor RMNCH, such as the social, economic and gender inequalities;
- (5) Strengthen mutual accountability and national capacity to monitor RMNCH interventions through sustainable improvements of country's Health Management Information Systems.

and economic and social exclusion, to varying degrees. A distinct advantage of the H4+ Partnership, in this context, is the ability of the six agencies to operate across parallel sectors, advancing progress in health, finance, legal, and social sectors simultaneously.

Much of the work by H4+ occurs at country level, where the H4+ agencies coordinate their support and jointly contribute to strengthening national health systems, including through the development, costing and financing of the components of national health plans that relate to RMNCH. Key H4+ achievements at the country level include work at both policy and programme levels.

At policy level, building on knowledge of national context, and experience with successful interventions in other countries, H4+ mobilizes political, technical and financial support for RMNCH; provides joint technical support to develop quality national RMNCH plans; promotes universal access to integrated essential health services and evidence-based, high impact and cost-effective interventions in RMNCH; and works closely with governments to align to national priorities the wide array of complementary national, bi-lateral and multi-lateral RMNCH initiatives underway within the country. H4+ also supports the development of strategic and policy documents, and efforts to remove financial barriers to accessing emergency obstetric and newborn care (EmONC) services.

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