

JUNE 2015

The H4+ partnership

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

Progress report-2014

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Acronyms and abbreviations

BEmONC	basic emergency obstetric and newborn care
COIA	Commission on Information and Accountability for Women's and Children's Health
DFATD	Department of Foreign Affairs, Trade and Development (Canada)
EENC	early essential newborn care
EmONC	emergency obstetric and newborn care
ENA	essential newborn actions
EVD	Ebola Virus Disease
FGM	female genital mutilation
FP2020	Family Planning 2020
GARPR	Global AIDS Response Progress Reporting
GBV	gender-based violence
GFF	Global Financing Facility
H4+	UNAIDS, UNFPA, UNICEF, UN Women, WHO and the World Bank
IMCI	integrated management of childhood illness
IMNCI	integrated management of newborn and child illness
M&E	monitoring and evaluation
MDG	Millennium Development Goal
MDSR	maternal death surveillance and response
MNH	maternal and newborn health
PMTCT	prevention of mother-to-child transmission
RMNCAH	reproductive, maternal, newborn, child and adolescent health
RMNCH	reproductive, maternal, newborn and child health
SDG	Sustainable Development Goal
Sida	Swedish International Development Cooperation Agency
STI	sexually transmitted infection
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
USAID	United States Agency for International Development
WHO	World Health Organization

1. Introduction

1.1 Background

In September 2008, UNICEF, UNFPA, WHO and the World Bank created the joint H4 initiative to provide harmonized support for maternal and newborn health in low-income, high-burden countries. Later joined by UN Women and UNAIDS, the retitled H4+ was tasked with supporting the advancement of the Millennium Development Goals (MDGs) of reducing child mortality (MDG 4) and improving maternal health (MDG 5). Efforts to combat HIV/AIDS, malaria and other diseases (MDG 6) and to promote gender equality and empower women (MDG 3) also fell within its purview. At the global and country levels, H4+ partners formed teams that leveraged the respective strengths of each agency to provide well coordinated technical assistance in the development and implementation of MDG action plans.

H4+ later aligned its efforts in 2010 to support the mobilization and implementation of commitments made by countries, nongovernmental organizations and the private sector to the United Nations (UN) Secretary-General Ban Ki-moon's Global Strategy for Women's and Children's Health (1). The Global Strategy and its accompanying Every Woman Every Child¹ movement aim to accelerate progress towards achieving MDGs 4 and 5 by supporting country-led efforts to improve reproductive, maternal, newborn and child health (RMNCH) and most recently by sustaining the focus and momentum on women's and children's health in the emerging Sustainable Development Goals (SDGs).

As the Global Strategy's lead technical partners, the H4+ partnership holds specific responsibility for supporting countries to achieve MDGs 4 and 5 (A&B)² and implement their Global Strategy commitments. H4+ agencies draw on their extensive geographic reach and varying but complementary technical capabilities to facilitate this work.

The capacity of the H4+ partnership to provide joint leadership at the global level and coordinated technical assistance at the national level allows it to serve as a strategic technical platform for countries striving to actualize their Global Strategy commitments. It prioritizes low-income countries with high maternal and child mortality burdens that have set specific targets for improving, integrating and expanding access to RMNCH services. Within these countries, H4+ builds on the long history of engagement between UN agencies and Member State governments in order to support the formulation and implementation of policy and legislation that codify lasting improvements in national health plans. Moreover, governments utilize H4+ partner agencies' various areas of expertise in RMNCH service provision as well as other matters of health and social equity. Finally, the networks formed by UN agency structures promote sharing of lessons learnt at the global, regional and country levels, and enable South–South cooperation.

Several key initiatives have been established in recent years to accelerate progress towards achieving the RMNCH-related MDGs, and to maintain momentum for further improvement post-2015. Given the H4+ partnership's commitment to support implementation of the Global Strategy, its partner agencies have been instrumental in supporting harmonization across these various efforts at global and country levels. These include the High Burden Country Initiative, Committing to Child Survival: A Promise Renewed (2), the United Nations Commission on Life-Saving Commodities for Women and Children, and the recommendations of the Commission on Information and Accountability for Women's and Children's Health (COIA). Additionally, in 2014, the Every Newborn Action Plan (3) was launched to end preventable newborn deaths, and post-2015 targets for Ending Preventable Maternal Mortality (4) were issued and are currently being proposed for inclusion within the Sustainable Development Goals (SDGs) for the period 2016–2030. Most recently, there has been extensive H4+ input in updating the Global Strategy for Women's, Children's, and Adolescents' Health (the successor to the existing Global Strategy) as well as its operational

¹ www.everywomaneverychild.org

² Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio; Target 5.B: Achieve, by 2015, universal access to reproductive health.

framework (5), and developing the Global Financing Facility (GFF) (6) to provide investment support for the health of women, children, and adolescents in the post-2015 agenda.

This progress report aims to document the 2014 calendar year activities of the H4+ partnership at the global level and implementation of H4+ scope of work by country teams around the world. It also provides an evidence-based assessment of both achievements and challenges encountered at global and country levels, and considerations for the future of H4+ in advancing post-2015 goals and targets related to RMNCH. Along the way, key trends and lessons learnt are highlighted through specific examples and short case studies.

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

1.2 Objectives and methods

Objectives and data sources

The objectives of this report are as follows:

- to provide an updated overview of H4+ coordination, functionality and activities in countries in support of progress towards achieving MDGs 4 and 5;
- to bring together information on H4+ efforts to accelerate implementation of the Global Strategy;
- to inform the post-2015 development agenda initiatives by documenting and sharing H4+ lessons learnt on interagency collaboration and joint implementation.

To meet its objectives, this progress report draws on data and information gathered from the following sources:

- records tracking the development and implementation of individual H4+ country team plans and global activities;
- monitoring reports describing implementation of specific H4+ grants for joint country support work (referred to as the H4+ Joint Programme); and
- two recent surveys of countries that have made specific commitments to the Global Strategy (2014 H4+ survey) and countries with the highest burden of maternal and child deaths (2015 H4+ survey).

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