Commitments to support

EVERY NEWBORN

June 2014
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Summary of Commitments to Advance the Every Newborn Action Plan

June 2014

Significant progress has been achieved to improve the lives of women and children around the world. Since the launch of the United Nations Secretary-General Ban Ki-moon’s *Global Strategy for Women’s and Children’s Health and Every Woman Every Child*, a movement and multistakeholder partnership that has generated new attention and investment in women’s and children’s health, the numbers of maternal and child deaths have decreased significantly. However, too many newborns continue to die each year of mainly preventable causes, prompting the advancement of the Every Newborn Action Plan (ENAP), a roadmap and joint action platform to reduce preventable newborn mortality and stillbirths.

Newborn deaths account for at least 44 percent of deaths among children under the age of five globally; resulting in 2.9 million lives lost each year. Another 2.6 million babies die in the last three months of pregnancy or during childbirth (stillbirths). Reductions in neonatal mortality have lagged behind those of maternal, infant, and child mortality due to less attention and investment. Yet, we have the knowledge and tools to prevent at least three-quarters of these deaths. As we make a final push to achieve the Millennium Development Goals and look ahead to the post-2015 development framework, reducing newborn mortality and preventable stillbirths are key to accelerating action for women’s and children’s health.

Endorsed by the 194 member-states of the World Health Assembly in May 2014, the Every Newborn Action Plan aims to enhance and support coordinated and comprehensive planning and implementation of newborn-specific actions within the context of national reproductive, maternal, newborn, child, and adolescent health (RMNCAH) strategies and action plans. It supports the recommendations of the UN Commission on Life-Saving Commodities for Women and Children, A Promise Renewed commitment to child survival, and the objectives of Family Planning 2020. It also outlines a common monitoring framework informed by the recommendations of the Commission on Information and Accountability for Women’s and Children’s Health.

This document launches 40 new commitments to *Every Woman Every Child* in support of the Every Newborn Action Plan. Diverse stakeholders, including governments, non-governmental organizations, businesses, research and academia, and professional organizations, are now committing to accelerate their efforts to decrease the number of newborn and stillbirth deaths. Taken together, these commitments represent one of the most significant contributions on newborns to the *Every Woman Every Child* movement since it was launched in 2010, with additional commitments expected at the UN General Assembly meeting in September of 2014.

Dedicating financial resources towards meeting the needs and saving the lives of newborns and preventing stillbirths is one important step that partners can take to improve the lives of children around the world. Other crucial contributions include training additional birth attendants,
strengthening the capacity of health systems to respond to emergencies, and ensuring that life-saving interventions are available even to the most remote populations. Continuing to build strategic and multi-stakeholder partnerships will help scale-up interventions and bring services to the most marginalized, while research and innovation are essential to constantly improve and find new, creative ways to save lives.

All of us can take responsibility today to use our collective resources to end preventable newborn deaths and stillbirths and transform the futures of communities and therefore nations. For more information, please visit: www.everywomaneverychild.org. To make a commitment to Every Woman Every Child, please email: everywoman.everychild@un.org.

Below is the full list of the commitments towards the Every Newborn Action Plan:
Governments (5)

Bolivia Ministry of Health

Bolivia commits to the comprehensive implementation of its health policy SAFCI: Salud Familiar Comunitaria e Intercultural or Family Health at the Community and Intercultural Levels. SAFCI will be used as a general framework for the implementation and application of specific strategies and policies aimed at different vulnerable populations and age groups. The goals of the policy include: strengthened primary health care; full participation and empowerment of the community in health-related issues; and reduced morbidity and mortality for women and children. Through implementation of the SAFCI policy, political mobilization activities, particularly among grassroots social organizations, including youth-led organizations, will take place. Political mobilization efforts will promote not only the health of mothers and newborns, but also the entire family and community, and therefore, society as a whole. Bolivia will also implement the program Mi Salud or My Health, which includes physicians trained in assistance and social medicine, to not only treat the sick and help with their rehabilitation, but also provide health-related education.

The policies, plans, and strategies will be progressively implemented throughout the national territory through technical assistance that allows health workers to put into effect all of the guidelines, standards, plans, and policies. Implementation will be completed within five years and is complemented by a monitoring and evaluation plan intended to test the functionality and proper implementation of the policies.

Cameroon Ministry of Public Health

Cameroon commits, over the next five years, to scale-up cost effective maternal and newborn health interventions. Health interventions will link the health system and communities through a system of mutual accountability and include: antenatal care; pre and post-partum care for the mother; and newborn care, including kangaroo mother care. Cameroon will use innovative approaches to reach the most vulnerable populations, with a focus on the four most affected regions of the country. This effort is expected to contribute toward a reduction of maternal and newborn mortality by at least 20 percent.

Cameroon also commits to improve coordination and implementation of maternal, newborn, and
child health (MNCH) initiatives through the newly created National Multisectoral Program for Combating Maternal, Newborn, and Child Mortality. This program involves various sectors, including government, NGOs, civil society, private sector, faith based, and opinion leaders. Each of these sectors’ contributions to women’s and children’s health will be measured through specifically defined indicators.

**Malawi**

The Malawi government commits to reducing neonatal mortality from 31 per 1000 live births to 25 per 1000 live births by 2020. To achieve this goal, the Government of Malawi will work in partnership with all relevant sectors and ministries utilizing a multisectoral approach to reach 85 percent of all newborns with essential care services. The government will increase financial allocations for the health budget to 15 percent with 30 percent allocated to women’s and children’s health; realign and sharpen guiding policy documents to improve the quality of maternal, newborn, and child health (MNCH) services; scale-up high impact MNCH interventions, targeting national level coverage, with a specific focus on underserved populations; strengthen the health system for MNCH; support innovation for reproductive, maternal, newborn, and child health, such as Kangaroo Mother Care and Continuous Pulmonary Airway Pressure (CPAP); and increase monitoring, evaluation, and accountability for MNCH.

**Oman Ministry of Health**

Oman commits to implementing the Every Newborn Action Plan (ENAP). The ENAP was adopted and translated into Oman’s 2050 health vision and strategic plan (2015- 2050) as part of its health system reform. Oman will strengthen the health system to improve the quality of health care; scale-up and strengthen preconception care and its maternal and newborn program; provide education and training to expand the number of trained health providers; enhance monitoring and fortification to improve the nutrition status of women and children; and support research on
maternal and newborn health. In the short-term, Oman’s anticipated outcomes are improved skills of providers, decreased complications with transportation, and increased information and evidence available for health system improvement. In the long-term, implementing the ENAP is expected to reduce neonatal and maternal morbidity and mortality and reduce neonatal deaths due to congenital anomalies.

U. S. Agency for International Development (USAID)

The U.S. Agency for International Development (USAID) commits to continuing its focus on increasing coverage and equity of quality care around the time of birth and for sick and small newborns in 24 priority countries. USAID will strengthen community-based approaches and increase coverage of skilled birth attendance, intensify efforts to improve quality of care, and support a comprehensive approach to prevention of mother-to-child transmission (PMTCT). USAID will promote zero tolerance for preventable maternal and newborn deaths by changing social norms and expectations; equipping families with the knowledge and capacity to practice optimal newborn practices; increasing demand for quality care; and strengthening the links between community and health facilities. Finally, USAID will continue to support Demographic Health Surveys to track the progress of coverage indicators articulated in the Every Newborn Action Plan.
Bill & Melinda Gates Foundation

The Bill & Melinda Gates Foundation reaffirms their Every Woman Every Child commitment and acknowledge their firm support and pledge to aiding in the implementation of the Every Newborn Action Plan (ENAP). At Women Deliver in 2010, the Gates Foundation committed USD $1.5 billion through 2015 to improve women’s and children’s health. This funding includes an annual investment of USD $130 million on behalf of maternal and newborn survival. The Foundation has made newborn health a top priority and will continue to do so, with particular support for programs, interventions, and activities that fully integrate newborn health within the reproductive, maternal, newborn, and child health (RMNCH) continuum of care. Future investments that will support the ENAP include the following priorities: ENAP implementation; advocacy and accountability efforts at the country level; scale-up of key interventions that work; quality improvement initiatives; and research on the prevalence and prevention of preterm birth.

Sanofi Espoir Foundation

The Sanofi Espoir Foundation renews its commitment to fighting against maternal and neonatal mortality. With its partners, the Foundation is supporting new programs based on an holistic approach to improve midwives’ training conditions; retain them in their jobs; reinforce networks between midwives and local authorities, non-governmental institutions, and key health players; and integrate ICT, such as e-learning, e-health, and mobile phones into programs. These holistic programs aim to train 4,200 midwives and healthcare providers in the next three years in seven developing countries.

Sanofi Espoir Foundation will also promote a worldwide sharing of experiences and ideas through its innovative platform Connecting Midwives. In addition to being a platform for sharing ideas and practices, the platform also highlights the commitment of midwives and the initiatives they carry out in their villages and communities through the Midwives for Life Awards. Each year, the Foundation will reward up to ten laureates with financial support and a documentary film on their project.
The Children’s Investment Fund Foundation (CIFF)

The Children’s Investment Fund Foundation (CIFF) strongly supports the goals of the Every Newborn Action Plan to end preventable newborn deaths and stillbirths. Accelerating newborn survival is a key priority for CIFF in delivering on its mission to achieve transformational impact for children. CIFF has committed over USD $45 million since 2012 to improve access to and quality of maternal and newborn care in high burden countries, particularly around childbirth. Building on this commitment, CIFF will support the development and implementation of the Every Newborn monitoring framework by 2015. This will define outcome metrics and measurable indicators of coverage and quality of high impact newborn interventions, which are fundamental for effective programmatic action and tracking progress towards country targets. Furthermore, CIFF will seek to maximize the impact of its investments to prevent unintended pregnancies and mother to child transmission of HIV, and improve the nutritional status of women before, during, and between pregnancies to help achieve the Every Newborn Action Plan targets.

The Wellbeing Foundation

The Wellbeing Foundation commits to offer at least 60 hours per year of staff time for review, analysis, development, and commentary on newborn health-related policy in Nigeria and across the world. They will utilize document reviews/edits as well as both physical presence and online meetings, including meetings related to the Every Newborn Action Plan, to help ensure that progress-measures and tracking of commitments are technically sound, locally relevant (especially for Nigeria), and bring about a positive response to the needs of the citizens and community-dwellers in support of improved newborn health. The Wellbeing Foundation also commits to a monthly social media engagement through the hash tag #EveryNewborn and other platforms such as Twitter and Facebook. The goal of this effort is to drive the participation of multi-sector players, in Nigeria and across the world, in support of an approach that delivers quality care around the time of birth. Specific outcomes from these commitments will include increased multi-sector participation, in both online and offline discussions on issues around newborn health; driving discussions toward action and intervention in communities; and improved delivery and access to quality care around the time of birth.
Islamic Development Bank (IDB)

Islamic Development Bank (IDB) commits to implementing its Save the Mothers Program to achieve maternal and child health through the Islamic Solidarity Fund for Development (ISFD). IDB estimates that USD $90 million will be provided to implement the Save the Mothers initiative in three IDB member-countries over the next three years, with the principal objective of improving the quality of maternal and child health services in disadvantaged and remote communities. Through Save the Mothers, IDB expects that by 2017: midwifery school(s) are built and functioning; midwives and mid-level health workers are trained in maternal and neonatal care, particularly in intrapartum care; primary healthcare units are upgraded to Basic Emergency Obstetric and Neonatal Care Centres; a Health Management Information System (HMIS) is established and functioning in communities in the three target countries; the Community Sensitization Campaign is launched; and the impact evaluation studies are completed. The Program also aims to establish systems for registration of births, immunization data, deaths and causes of maternal deaths, and have well-functioning health information systems. By 2020, IDB expects that maternal and child mortality is reduced in the target communities; maternal and child health is improved; human and institutional capacities to respond to the community needs for maternal and child health are strengthened; and a model that can be scaled-up and replicated within and outside of the target countries is developed.
Concern Worldwide

Concern Worldwide commits EUR €140 million over the next 5 years to health programs. Maternal, newborn, and child health (MNCH) activities will take place in 10 of the poorest countries in the world with high maternal and neonatal mortality. Concern commits to strengthening and investing in care during labour, birth, and the first day and week of life; improving the quality of maternal and newborn care; reaching every women and every newborn to reduce inequities; harnessing the power of parents, families, and communities; counting every newborn and stillbirth; and designing integrated programmes based on sound contextual analysis. Concern also commits to spending EUR €31 million on primary education programmes, as evidence has shown that child survival improves with educational attainment.

By 2019, Concern will have improved the lives of women and children through expanding access to quality MNCH services; designing, developing, and testing several innovations to overcome barriers to essential maternal and neonatal health services, of which at least three models will be scaled up; increasing the focus on neonatal health within the continuum of care by incorporating specific maternal and neonatal interventions into existing health and nutrition programs; and developing and rolling out community-based models for vital registration that will count every newborn and stillbirth in at least three countries.

e-KSS

e-KSS’ Amazon Indigenous Telehealth (e-AIT) Program is a pioneering telehealth project that commits, within a 5-year time frame (2013 – 2017), to conduct research, provide technical assistance, education, training, and direct services and/or products to empower the people, thereby ensuring sustainability in the health outcomes of indigenous women and children in the Amazon rainforest. The e-AIT program addresses: (1) high maternal and infant mortality rates in the region comparable to the highest global rates; (2) inefficient healthcare management; (3) lack of qualified personnel to reach geographically remote communities; (4) lack of culturally appropriate clinical services; (5) guidelines for health education and training at a distance, access
to healthcare services, and training on midwifery; (6) health surveys and data collection; (7) telehealth evaluation; and (8) administrative and operational models for birthing centers.

Anticipated outcomes include, for the first time ever, the creation of health profiles of mothers, newborns, and children; the heightened capability for tele-diagnostic and tele-triage procedures for improved skilled services at the point of care; creation of a profile of Midwives available to support MIC initiatives under culturally appropriate programs; and the development and implementation of culturally adapted health information management systems and network-based research procedures.

Family Planning Association of India (FPA India)

Family Planning Association of India (FPA India) commits to promote and advocate for universal access to sexual and reproductive health services by continuing to serve the poor, marginalized, socially excluded, and the underserved (PMSEU). FPA India will also advocate for sexual rights as human rights. In 2012 FPA India covered nearly 30 million populations through Reproductive Health and Family Planning Centers, Urban Family Welfare Centers, Outreach Services and other special projects. More than eighty percent of PMSEU access services. The Association commits to provide education, training, and technical support in health system strengthening through its branches and projects until 2015. It will help in building the capacity of health care providers on different topics including counseling, safe motherhood, contraception, quality of care, and adolescents and young people.

FHI 360

FHI 360, through their Alive & Thrive initiative, commits to improving infant and young child feeding and maternal nutrition through large-scale programs in Asia and Africa. In support of achieving the Every Newborn Action Plan and Every Woman Every Child’s aim to save the lives of 16 million women and children by 2015, FHI 360’s work will include strategic technical assistance to realize high coverage nutrition programs, the creation and adoption of tools to facilitate scale up, and strengthened capacity to deliver comprehensive programs of impact in Ethiopia and Burkina Faso. Additionally, this program will test the feasibility of multiple community-based
maternal nutrition interventions in Bangladesh. The program’s estimated value is USD $53 million and is supported by the Bill & Melinda Gates Foundation, with additional funding from the Department of Foreign Affairs, Trade and Development Canada (DFATD), and Irish Aid. Alive & Thrive estimates that the program reached 12 million children under two years of age in its first five years and plans to extend that coverage from now through 2017.

Global Alliance to Prevent Prematurity and Stillbirth (GAPPS)

GAPPS commits to continuing to lead a collaborative global effort to increase awareness and accelerate innovative research and interventions to improve maternal, newborn, and child health (MNCH) outcomes around the world. Three examples of their commitment are: 1) The Preventing Preterm Birth Initiative seeks to discover biological mechanisms underlying preterm birth and develop innovations for prevention, especially relevant to low- and middle-income countries (LMICs). In the next two years, at least one discovery will be moved forward to development of an intervention to reduce/prevent preterm birth; 2) The GAPPS Repository is the first standardized, widely-accessible collection of high-quality specimens linked to data from pregnant women. The model is expanding to study sites in LMICs for harmonized efforts to improve discovery and implementation research; and 3) The Global Coalition to Advance Preterm birth Research (G-CAPR) will be announced in July 2014 as a coalition of global funders of research on preterm birth, which includes GAPPS, the Eunice Kennedy Shriver National Institute of Child Health and Human Development, March of Dimes, and the Bill & Melinda Gates Foundation, among others. The mission of G-CAPR is to identify and advance priority research through expanded networks, communication, and collaboration among organizations to fund the research needed to reduce the global burden of preterm birth. Additionally, GAPPS will partner on global advocacy campaigns to encourage increased financial commitments of the US Government on MNCH, with a focus on funding research.

International Planned Parenthood Federation (IPPF)

IPPF commits, as a contribution along the continuum of care that will benefit newborns, to mobilise people in support of the I Decide campaign, which tackles a number of sexual and
reproductive health and rights (SRHR) issues, including child, early, and forced marriage, female genital mutilation (FGM), and lack of autonomy over birth control. Outcomes expected from this commitment include: at least half a million signatures and photos from members of the public, politicians, advocates and public figures collected; SRHR, including access to rights-based family planning is kept high on the international agenda as a critical development issue; and access to rights-based family planning, which leads to better child spacing, delayed first pregnancies, and optimal health for both mothers and newborns is increased.

As one of seven partners in the Access, Services and Knowledge (ASK) program: What young people want, what young people need, IPPF commits to improving access to sexual and reproductive health (SRH) information and services and creating an enabling environment for policy change in seven countries by December 2015. Key expected outcomes include improved provision of SRHR services at the community level across seven countries; increased number of clinics trained to provide youth-friendly services; and increased availability of contraceptives to young people.

March of Dimes

March of Dimes commits to provide at least USD $60 million to support five trans disciplinary premature birth research centers at leading institutions in the United States from 2014 - 2020. The centers will take a team approach to discovery research directed at identifying the unknown causes of preterm birth. March of Dimes expects this commitment will lead to improved identification and treatment of women at risk of preterm labor. From 2014 – 2020, March of Dimes also commits to continuing to lead World Prematurity Day as an open platform for organizations to focus attention on premature birth as the leading cause of newborn death and to advocate for further action on prevention. An expected outcome from this effort is increased public awareness of the problem of preterm birth and enhanced political support for public programs and research that can improve prevention of prematurity.

Save the Children

Save the Children will invest at least USD $100 million in maternal and newborn health from 2014-2015 as part of its ongoing commitment to women’s and children’s health in support of Every Woman Every Child. They will provide technical assistance and support, including to scale-up
effective interventions to improve the quality of care for mothers and newborns; address the neglected issue of newborn care in emergencies; and take steps to improve maternal and newborn nutrition, in particular the promotion of early and exclusive breastfeeding.

Save the Children will ensure the Every Newborn Action Plan has impact at the country level by helping governments sharpen their plans; advocating for political leadership; holding leaders to account for their commitments, including new donors and the private sector; campaigning for bold commitments and targets at the national level; and working with governments to address the gaps in the continuum of care. They will also support the movement towards universal health coverage, focusing on equitable progress and access to essential maternal and child health services, especially skilled birth attendance, which can reach the poorest, removing financial barriers, ensuring cross-subsidization by raising funds fairly from the whole population, and the integration of health and nutrition services using the integrated community case management approach in resource poor settings. Save the Children will campaign and advocate for specific targets to end all preventable maternal, newborn, and child deaths as part of the sustainable development goals development process and call for specific targets for reducing newborn mortality.

White Ribbon Alliance

White Ribbon Alliance (WRA) commits to conduct political advocacy and mobilization activities to accelerate action for the health of women, newborns, and children. Specifically, White Ribbon Alliance commits to call on all governments to deliver on their commitments to maternal and newborn health through 2015; advocate for the inclusion of reproductive, maternal, and newborn health in the post-2015 development framework, including explicit targets; implement and support national campaigns in at least eight countries to hold governments accountable for the delivery of specific commitments, including on human resources, equipment, supplies and commodities, comprehensive emergency obstetric and newborn care, respectful maternity care, and to address other barriers women face in accessing quality services; advocate for adequate budgetary allocation and expenditure in reproductive, maternal, newborn, and child health (RMNCH); and strengthen civil society engagement in national accountability mechanisms, including to call on governments to respond to citizen-collected evidence of progress and gaps.
Women Deliver

Women Deliver commits to advancing the goal of Every Woman Every Child (EWEC), including the Every Newborn Action Plan’s objective of reaching every woman and newborn to reduce inequities. Through effective messaging, engagement with the media, and strong communications strategies, Women Deliver will help to ensure that advocates and policymakers have evidence, compelling information, and stories to drive attention and investment. This particular effort will focus on maternal and newborn health as well as sexual and reproductive health and rights and related issues. Women Deliver also pledges to discuss and identify pathways for progress on issues of inequity within reproductive, maternal, newborn, and child health (RMNCH) when it convenes its Women Deliver conference in May 2016.

The outcomes of this commitment will include strong messaging around the importance of maternal and newborn health, reaching 12,000 people, 500 media contacts, and 3,300 young people through Women Deliver’s news blasts; increased media attention on maternal and newborn health; and a focus on the progress, lessons learned, and future pathways for EWEC and the world of RMNCH at the 2016 Women Deliver Conference.

World Vision International

World Vision International commits to improve maternal and newborn health through community and health systems strengthening approaches that particularly focus on quality, availability, and accessibility of essential services toward universal coverage at the sub-national and local levels. Specifically, World Vision will strengthen their focus on the care of mothers and newborns at the time of birth and during the first week of life by: 1) supporting 100,000 community-based health workers (CHW) in 40 countries to integrate newborn and postnatal interventions and care; 2) scaling up a home visiting approach called Timed and Targeted Counselling (ttC) in 16 countries with high maternal and newborn mortality; 3) integrating newborn care within the Integrated Community Case Management (iCCM) programs being implemented in 15 countries; 5) empowering families and communities to demand better health for mothers, newborns, and young children; 6) ensuring accountability for the commitments made to achieving the Every Newborn Action Plan; and 7) advocating for the survival and well-being of every woman, every newborn, and every child.
ayzh, Inc.

ayzh Inc. commits to developing a “newborn kit” to provide innovative, affordable, and accessible new technology for women giving birth and to strengthen workforce capacity through mobile phone-based educational messages targeting healthcare workers. Building on the commercial success of the USD $2 Clean Birth Kit, over the course of the next 36 months, ayzh and its partners will build on existing concepts to develop a prototype that meets user needs and real-world constraints while adhering to norms and standards for respectful and culturally appropriate maternal and newborn care. ayzh Inc.’s initiative focuses on impacting several objectives of the Every Newborn Action Plan, such as strengthening and investing in care around time of birth, improving quality of care, reaching every newborn, and harnessing parent and community care. They aim to pilot 1,000 kits in the market, which will be evaluated to develop a final prototype ready for commercial launch.

BD (Becton, Dickinson and Company)

BD (Becton, Dickinson and Company) commits to leading and engaging in an innovative business model utilizing extensive cross-sector collaboration to develop, clinically test, manufacture, and distribute – at favorable conditions in low resource settings – new innovations designed to address the leading causes of maternal and newborn mortality and morbidity. This proposed collaborative partnership approach involves a series of aligned responsibilities and accountabilities, including shared financing commitments oriented toward the common goal of reducing maternal and newborn mortality. BD will engage with multilateral partners, academic institutions, international agencies, professional societies, and non-governmental organizations. Funding organizations, including foundations and private investor groups, will support these developments with seed funding utilizing a reimbursable model. Governments and foundations will support access in high burden countries through grants and market guarantees.

The first innovation utilizing this model, presently in clinical studies, is the BD Odon Device™, a new low-cost device for operative vaginal delivery during circumstances of intrapartum complications, with potential for application by mid-level providers. These claims are subject to

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completion of clinical studies. BD is presently evaluating other maternal and newborn health innovations with the intent to pursue scale development, manufacturing, and distribution utilizing this collaborative business model.

International Pharmaceutical Federation (FIP)

The International Pharmaceutical Federation (FIP) commits to support the World Health Organization (WHO) and the United Nations (UN) in their efforts and initiatives to improve maternal, newborn, and child health (MNCH), with a particular focus on Millennium Development Goals (MDGs) 4 and 5. FIP’s main commitments are to: support countries in translating the Global Strategy for Women’s and Children’s Health and the Every Newborn Action Plan into policy and pharmacy practice; advocate for the ethical, societal and scientific imperatives that ensure good healthcare for women and children, including Good Pharmacy Practice and Pharmaceutical Care; support the reform of education to ensure there is a sufficient and competent pharmaceutical workforce, and provide training programs and other resources; encourage governments and healthcare organizations to work collaboratively in order to develop and support policies that allow pharmacists to work within their full scope of practice and utilize their unique competencies and skills to advance healthcare; collect and share best practices and evidence on effective pharmacists’ interventions to improve MNCH; encourage pharmacists to work in line with the WHO-identified interventions in MNCH within the boundaries of their nationally defined scopes of practice and through appropriate channels; and support WHO, including through the provision of technical and scientific expertise.

GlaxoSmithKline (GSK)

GlaxoSmithKline (GSK) commits to help save the lives of one million children through its ground-breaking partnership with Save the Children. GSK is investing at least GBP £15 million in grants and encouraging employees to raise GBP £1 million a year through volunteering and fundraising. GSK is establishing signature programs in the Democratic Republic of Congo (DRC) and Kenya to test the impact of a series of comprehensive interventions that could be replicated in other countries. One focus of the commitment is to deliver medicines and vaccines, especially to pregnant women and
newborns. To achieve this goal, GSK has established a unique, joint R&D board to explore development of new or repurposed medicines to tackle the causes of newborn and infant death. They will also award USD $1 million in 2014 for healthcare innovations aimed at improving survival of newborns and neonates in the developing world.

In addition, GSK is partnering with the Bill & Melinda Gates Foundation to accelerate advances in vaccine research, starting with a USD $1.8 million investment into vaccine thermostability, which offers the potential to make vaccines more convenient to store and transport. GSK is also training frontline community health workers with 20 percent of the profits generated in specific countries. To date, GBP £15 million has been reinvested and 25,000 health workers trained across 34 countries.

**GSMA Mobile For Development Foundation, Inc.**

The GSMA Mobile for Development mHealth program, through a new mobile ecosystem partnership, commits to the launch of mHealth services, which is focused on nutrition and maternal and child health. The partnership includes Gemalto, Hello Doctor, Lifesaver, Mobenzi, Mobilium, MTN, Omega Diagnostics and Samsung in phase one (Côte d’Ivoire, Ghana, Nigeria, Rwanda, South Africa, Uganda, and Zambia) and additional partners to be announced in phase two (Kenya, Malawi, Mozambique, and Tanzania). The total addressable market is 15.5 million pregnant women and mothers with children under five years of age, across the 11 countries.

This large-scale and non-exclusive partnership will create an enabling business, distribution, and technology environment for public health sector stakeholders to deliver sustainable and scaled patient and community health worker services. Services include health and nutrition content, leading to behaviour change; SIM-based identity health registration; and diagnostics, data collection and surveillance, and health financing for health workers. To address the current level of newborn deaths, the partners have made important commitments, including zero-rated access to health services for mothers and community health workers, regional discounting of handsets to the MNCH development sector, and regional discounting of an mHealth-specific SIM card.

**Johnson & Johnson**

Johnson & Johnson commits USD $30 million to improve newborn health and increase newborn
survival through 2020. This commitment will support programs in at least 20 countries with high newborn mortality, including an initial focus on India, Nigeria, China, and Ethiopia. It will build on the progress made since the 2010 Every Woman Every Child commitment to ensure newborn survival and health remain central to the post-2015 development agenda. Johnson & Johnson will work with partners and governments to implement evidence-based interventions and innovative technologies or training methodologies. In some settings, we will work with partners to develop pilot programs, and in others, we will work to scale up effective strategies, depending on a country’s specific needs and readiness.

The collaborations will increase the number and skills of birth attendants; reduce newborn mortality from birth asphyxia; increase the percentage of newborns at-risk for HIV who undergo early infant diagnosis; and expand the use of mobile phones to deliver health information for safe pregnancy and birth. Our partnerships will also implement programs designed to improve the health-knowledge of pregnant women and mothers to care of themselves and their newborns.

Laerdal Global Health

Laerdal is pleased to announce an additional funding commitment of USD $20 million by 2017, making its total commitment for the 2010-2017 period USD $55 million. Within this commitment, USD $30 million will be used to fund the not-for-profit company Laerdal Global Health to support the development, field-testing, and implementation of training modules for the Helping Mothers Survive and Helping Babies Survive training programs, and the development of 12-15 innovative training and therapeutic products. The remaining USD $25 million will be channeled through the Laerdal Foundation for awards to practically oriented research projects to reduce maternal and newborn mortality.

In support of the Every Newborn Action Plan, Laerdal is also pleased to announce support of $1 million to each of two new initiatives: 10,000 Happy Birthdays and 100,000 Babies Survive and Thrive. The International Confederation of Midwives (ICM) and Laerdal have joined hands to ensure that 10,000 midwives in Zambia and Malawi will be trained, equipped, and supported in the Helping Babies Breathe and Helping Mothers Survive programs through the 10,000 Happy Birthdays initiative. The Helping 100,000 Babies Survive and Thrive initiative, under the Survive & Thrive private-public partnership, will target newborn mortality in India, Nigeria, and Ethiopia.
Masimo & Newborn Foundation

Masimo and the Newborn Foundation commit to working with the National Health and Family Planning Commission of the People’s Republic of China (formerly Ministry of Health), the China Office for Maternal and Child Health Surveillance, and the Mianyang Bureau of Public Health in Sichuan Province to implement the BORN Project. The BORN Project seeks to reduce newborn deaths through newly developed mobile app-based pulse oximetry technology that will support early detection and treatment for the major causes of newborn mortality - pneumonia, sepsis, neonatal infection, and asymptomatic congenital heart defects. Masimo and the Masimo Foundation for Ethics, Innovation, and Competition have contributed approximately USD $100,000 to the Newborn Foundation and the BORN Project’s educational, training, policy, and programmatic efforts. Masimo’s engineering, technical, and design team have contributed thousands of hours in research, development, and product design to bring mobile pulse oximetry to the field.

The BORN Project will provide hospital-grade equipment appropriate for measuring blood-oxygen levels in neonates (Masimo signal extraction technology (SET) for mobile and non-mobile devices), health worker training, clinical protocols, digital and print educational resources, and field implementation for newborn screening for hypoxemia. The project includes electronic data collection to drive screening quality improvement, targeted regional infrastructure improvements for babies born in low resource settings, and supporting pulse oximetry screening as a national and global public health imperative to significantly reduce newborn mortality.

McCann Health

McCann Health is committed to working in partnership with the public and private sectors to design, develop, and implement large-scale demand creation and communications programs across Africa and Asia in support of the Every Newborn Action Plan. This commitment builds upon their 5 year, USD $5 million commitment in 2012 to the UN Secretary General’s Every Woman Every Child Initiative. McCann Health is working with its partners to build capacity within governments and NGOs; increase care-seeking behavior and uptake of medicines to treat pneumonia and diarrhea in infants and children and prevent HIV infection; improve birth outcomes through improved nutrition in adolescents and in pregnancy; and reduce birth complications and improve outcomes through better birth preparedness. Much of this work is directed toward improving the health and well-being of newborns.
Outcomes of these efforts will include, among others, a completed communications platform for all partners involved in fighting childhood diarrhea and pneumonia in the 10 highest burden countries; increased awareness and utilization of ZincORS in the 10 highest burden countries; development of a market shaping campaign for improved nutrition in woman of reproductive age in Ghana; creation and deployment of Being Prepared for Birth demonstration campaign in Nigeria (pending resource and implementation partners); and stronger capacity within government agencies and NGOs to plan, develop, manage, and measure impactful communications campaigns.

Medtronic Philanthropy

Medtronic Philanthropy commits resources at the global and country levels to reduce maternal and newborn mortality resulting from Rheumatic Heart Disease (RHD). Medtronic Philanthropy will fund efforts ranging from multi-year country programs to integrate RHD interventions into existing platforms, such as maternal and child health and primary care, to supporting efforts at the global level to ensure inclusion of RHD in the current UN-level non-communicable diseases agenda, the WHO Global Action Plan, and the post-2015 development agenda. RHD contributes to more than 350,000 deaths annually with an incidence of over 15 million, including 10 percent of all maternal deaths in Africa and nearly 50 percent of maternal complications and deaths in the South Pacific. This in turn has a direct effect on newborn births, with an increase in premature and low birth weight complications resulting from poor prenatal health conditions.

Given these facts, Medtronic Philanthropy’s commitment will ensure effective management of RHD in pregnant mothers to reduce deaths during delivery resulting from hemorrhage or stroke; increase awareness of RHD at the community level; and train community health workers, traditional birth attendants, and nurses on Rheumatic Fever/ Rheumatic Heart Disease and its implications on pregnancy and mortality.

Merck & Co.

Merck commits to implementing Merck for Mothers, a 10-year, USD $500 million initiative to reduce maternal mortality globally. Saving the life of a woman who experiences pregnancy and
childbirth complications has lifesaving benefits for her newborn as well. MDGs 4 and 5 are inextricably linked – when a mother dies, her surviving newborn’s risk of death increases by 70 percent. Bringing their scientific and business expertise to the challenge, Merck for Mothers is investing in bold initiatives that have a high potential for lasting impact, focusing on regions and communities where maternal and newborn mortality are particularly severe.

Merck for Mothers’ innovative programs will help improve women’s and newborn’s health by enhancing access to quality care and lifesaving supplies. Some examples include: scaling up new supply chain models to expand access to family planning; tapping the potential of the local private health sector to strengthen the provision of affordable, quality maternal and child care; developing new or improved products to treat postpartum hemorrhage and preeclampsia; supporting projects around the world that respond to local needs and seed innovation; and expanding the reach of Saving Mothers, Giving Life, a public-private partnership that has already shown dramatic results in saving women’s lives and will more than double its geographic presence in Uganda and Zambia with an increased focus on newborns.

Novartis

Novartis supports the Every Newborn Action Plan through its generics division Sandoz, which is committed to reducing the burden of and death due to pediatric pneumonia in developing countries. In response to the updated World Health Organization (WHO) Guidelines recommending Amoxicillin 250mg in dispersible tablet form as the preferred treatment for pediatric pneumonia, Sandoz is committed to making this product available to developing countries and in their first year of supply hopes to reach at least 500,000 paediatric patients. This commitment is in support of the UN Commission on Life-Saving Commodities for Women and Children, which has called for an increase in the production, distribution, and promotion of amoxicillin dispersible tablets.

Pfizer

Pfizer commits to advancing newborn and maternal health through research, development, and production of science- and biomedical-based innovations, and through partnerships aimed at
helping build the capacity needed to facilitate access to care for mothers and newborns. To support the Every Newborn Action Plan, Pfizer’s commitment is tailored around skilled birthing attendants, post-natal care, family planning, and access to vaccines and medicines aimed at reducing newborn and infant morbidity and mortality.

Pfizer is working independently and with partners to focus on several critical areas of newborn and maternal health, including: promoting higher utilization of skilled birth attendants and post-natal care services; scaling up interventions that save newborn lives and enhance newborn care; expanding access to family planning through new technology, training, and research; protecting infants and young children against pneumococcal disease with innovative vaccine technology and supply chain improvements; and donating antibiotics and placebos to allow independent researchers to study the effect on childhood morbidity and mortality in children under the age of five.

Premier Medical Systems Nig. Ltd.

Premier Medical Systems Nig. Ltd commits to deliver health education to 2,000 expectant mothers in Nigeria via SMS using their Omowunmi application and to carry out research on how the use of mobile phones can lead to better health for expectant and new mothers. The messages will be delivered based on women’s Last Menstrual Period (LMP) so that expectant mothers receive messages that are specific for their gestational age. The SMS messages will provide information on the benefits of attending antenatal care and the importance of having a Skilled Birth Attendant (SBA) for delivery. The messages will also educate women on physiological and psychological changes to expect in their body and important milestones in the development of the fetus. Reminders for clinic and immunization days will also be included. Delivery of health education and conducting research on mobile phone usage for better health is expected to lead to increased hospital delivery, increased antenatal clinic attendance, and improved birth practices.
American Academy of Pediatrics (AAP)

The American Academy of Pediatrics (AAP) commits, over the next three years, to reach more than 60 countries and more than 1.5 million children, their mothers, and families through the launch of the Helping Babies Survive suite of newborn survival related curricula. The Helping Babies Survive (HBS) curricula are designed to ensure child survival and address preventable child deaths by strengthening the skills of birth attendants and caregivers throughout the newborn period. Through the use of high quality evidence-based zero/low literacy practical educational programs, Helping Babies Breathe® (HBB) is joined by Essential Care for Every Baby (ECEB) and Essential Care for the Small Baby (ECSB), helping an additional 100,000 babies survive and thrive. The AAP developed and is implementing HBS in collaboration with Survive and Thrive Global Development Alliance partners: USAID, Save the Children, the National Institute for Child Health and Human Development, Laerdal Global Health, Johnson & Johnson, and numerous others, including the pediatric associations of India, Nigeria, and Ethiopia. The 2014 estimated contribution of this commitment is USD $35 million. The AAP has a long-standing commitment to child survival programs and to helping achieve the MDGs. In 2011, the AAP commitment to Every Woman Every Child was to deliver training and technical assistance and to scale-up of the Helping Babies Breathe® (HBB) program.

Council of International Neonatal Nurses, INC (COINN)

COINN is committed to education, training, research, and advocacy to improve health outcomes of neonates. As the only international voice for neonatal nursing care and neonatal nursing education, COINN makes the following short- and long-term commitments to realizing the Every Newborn Action Plan (ENAP): continuing to teach Helping Babies Breathe (HBB) in at least two countries in Africa, one country in Southeast Asia, and two countries in the Pacific by July 2015; continuing to teach the S.T.A.B.L.E. program through the leadership of Dr. Kris Karlsen in at least three countries in Southeast Asia and other parts of the world by July 2015; advocating for use of Kangaroo Mother Care (KMC) through the issuance of a position statement and presence on national and international committees dedicated to KMC beginning May 2014; beginning the development of a neonatal basic course for nurses and other health professionals by January 2016;
incorporating the ENAP and neonatal nursing leadership development into COINN’s Strategic Plan for the next five years (2014-2019); and launching a workforce database to describe where neonatal nurses work, what they do, and who they are by September 2014.

International Federation of Gynaecology and Obstetrics (FIGO)

The International Federation of Gynecology and Obstetrics (FIGO) commits global obstetric and gynecological expertise in support of integrated, evidence-based, maternal health practices and life-saving interventions. FIGO realizes this commitment through its 125 national member associations and its network of volunteers with expertise in a wide range of sexual and reproductive health issues. As a result of its strategic advocacy, capacity building, education, and training activities, FIGO seeks to reduce the disparities in health care available to women and newborns and to advance the science and practice of obstetrics and gynecology. A conservative estimate of time devoted by key persons in support of improved maternal health interventions from the 125 member associations is an annual total of USD $500 million.

Additionally, in line with its dedication to promoting comprehensive reproductive health services along the continuum of care, specific grants totaling approximately USD $12.6 million have been secured for a range of activities. These include managing postpartum hemorrhage in low resource settings, increasing access to fistula care, providing long acting postpartum contraceptive services, and preventing unsafe abortions.
Centre for Global Child Health, The Hospital for Sick Children (SickKids)

SickKids Centre for Global Child Health commits to improve the lives of newborns, children, and their families using focused research initiatives and the communication of research findings through creative knowledge translation strategies. The Centre will build capacity for human capital and health system improvements through education and knowledge exchange where there is a clear match between local needs and SickKids’ expertise, and through national scale-up. They will advocate for improved global child health through strategic partnerships, collaborative policy, and setting the research agenda at institutional, regional, national, and international levels. In addition, the Centre will ensure there is reciprocal learning that benefits newborns, children and their families, and other knowledge users in resource-poor environments.

WHO Collaborating Centre on Training and Research in Newborn Care, All India Institute of Medical Sciences (AIIMS)

The World Health Organization Collaborating Centre for Training and Research in Newborn Care (WHO-CC-TRNC) at the All India Institute of Medical Sciences (AIIMS), New Delhi, India, commits to advancing the Every Newborn Action Plan (ENAP) through advocacy, policy assistance, health workforce capacity development, and research. Specifically, the Collaborating Centre commits, by 2015, to work closely with the Government of India to: develop the India Neonatal Action Plan (INAP); launch the State of India’s Newborns report; and develop national guidelines on the scale up of Kangaroo Mother Care. The Centre will also work closely with the World Health Organization to: align maternal-newborn health policies with ENAP; extend technical assistance and help develop newborn care capacity in countries of the South East Asia Region; and catalyze improvements in quality of care of mothers and newborns in public facilities through mentoring, education, and research.