



UN Commission on Life Saving Commodities for Women & Children

unite for children

unicef 

Presentation outline

- UN Commission – purpose, partners and process
- The work of the UN Commission so far
- Draft recommendations and next steps

Why do we need a UN Commission?

- Around 1,000 women die **every day** from complications in pregnancy and childbirth and 19,000 children die **every day** mostly from preventable causes.
- Top two causes of death of children are **pneumonia** and **diarrhoea** cost two million lives every year. Both are preventable.
- Many deaths could be prevented or treated if all women and children had **access** to simple and affordable health supplies

Global progress in reducing maternal, child and neonatal deaths



	Average annual reduction 1990-2010
Maternal mortality ratio	4.2%
Mortality for children 1- 59 months	2.5%
Neonatal mortality (<1 month)	1.8%

30% slower

UN Commission on Life-Saving Commodities for **Women & Children**

- Part of UNSG's Global Strategy and the *Every Woman, Every Child* campaign, and advocates at the highest levels.
- **Build consensus** around priority actions to increase:
 - availability
 - affordability
 - accessibility
 - and rational use of quality essential commodities.
- Focus on **countries with highest preventable deaths** of women, newborns, and U5 children.

UN Commission **objectives**

- Identify **bottlenecks** and **opportunities** to **increase production, supply and use of commodities** that are:
 - affordable
 - quality
 - high-impact
- Propose innovative strategies to support high-burden countries to **rapidly increase access** to overlooked commodities (both private and public sector).
- Recommend strategies to **raise awareness** of and **raise demand**

UN Commission partners

AMFREF, Becton Dickenson, BMGF, CHAI, CIFF, EMA, GNHE, GSK, India, IKEA Foundation, IWG, Nigeria, Norway, MacArthur Foundation, Merck, MDG Health Alliance, Mylan, PATH, PMNCH, RHSC, Rockefeller, Safaricom, Shanghai Fosun Pharmaceutical Development Co., Save The Children Int., Sierra Leone, Tanzania, Uganda, World Bank, WHO, UN, UNFPA, UNICEF, United Kingdom, UPS International, USA.

Co-Chairs:

President Goodluck Jonathan of Nigeria

Prime Minister Jens Stoltenberg of Norway

Vice Chairs:

UNFPA Executive Director Dr. Babatunde Osotimehin

UNICEF Executive Director Anthony Lake

Process and **activities**

Work streams:

- Market shaping & financing
- Regulatory
- Best practices & innovation

Each work stream has **technical expertise** from Commission partners.

Barriers identified

User supply and demand challenges

- Low demand by end-users
- Local delivery and distribution breakdowns
- Incorrect prescription & use.





Ineffective regulation

- Insufficient resources leading to delays
- Poor quality oversight

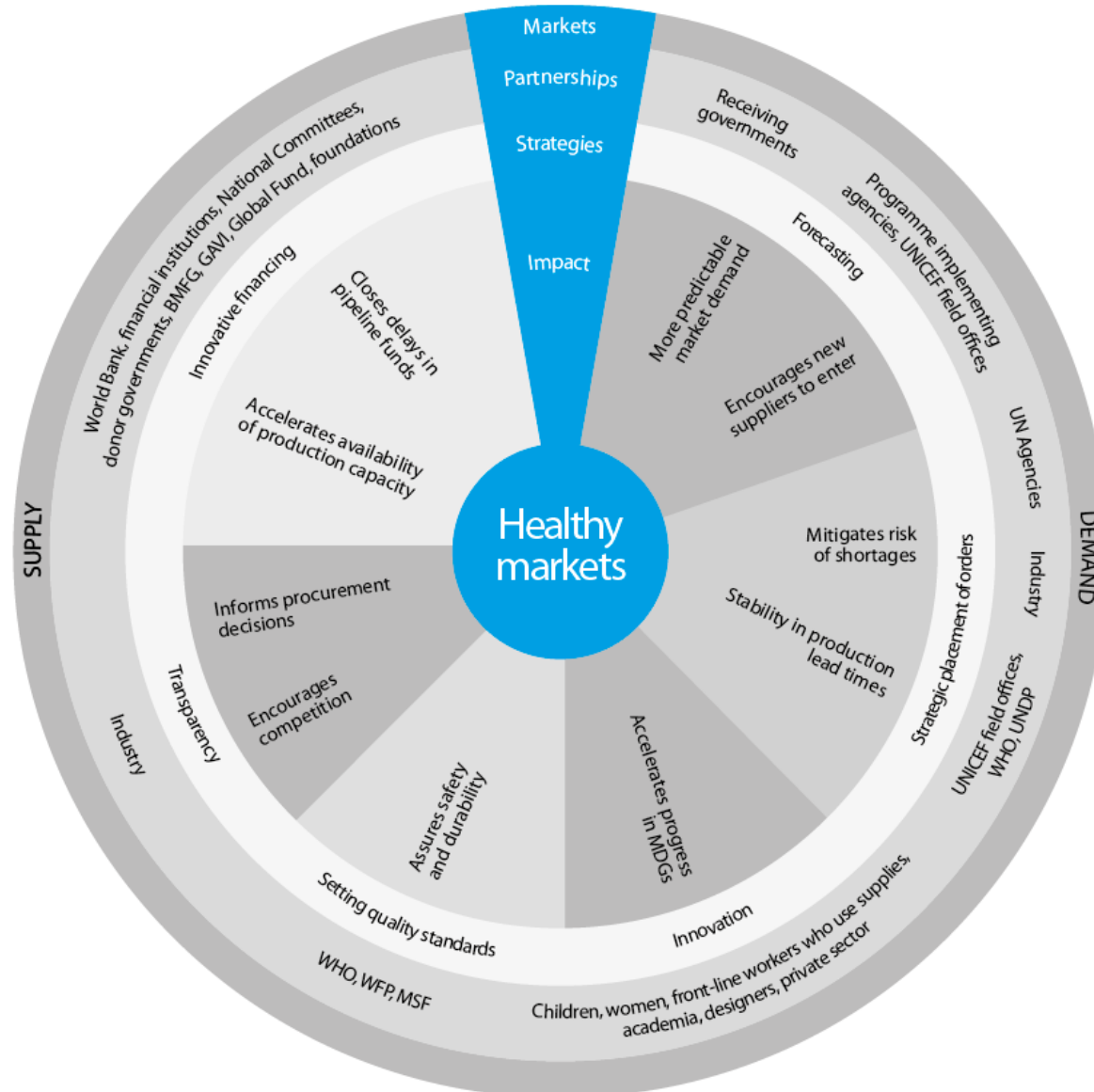
Limited supplies of quality products -

Manufacturers have no incentive to sell their products in particular countries, or fail to produce sufficient quantities

Products identified: Increasing access to reach MDGs

UNICEF			
UNFPA			
Maternal health	Newborn health	Child health	Reproductive health
<p>Oxytocin and Misoprostol to stop post-partum haemorrhage</p> <p>Magnesium sulphate to treat eclampsia, severe pre-eclampsia and toxemia of pregnancy.</p> 	<p>Injectable antibiotics to treat newborn sepsis</p> <p>Antenatal corticosteroids to treat pre-term respiratory distress syndrome</p> <p>Chlorhexidine for newborn cord care</p> <p>Newborn resuscitation devices for newborn asphyxia</p> 	<p>Amoxicillin dispersible tablets to treat pneumonia</p> <p>ORS and zinc to treat diarrhoea</p> 	<p>Female condoms, contraceptives implants, and emergency contraception for family planning and contraception</p> 

Influencing markets: Allowing rapid access to quality products



Recommendations

- **Shaping global markets:** By 2013, effective global mechanisms (e.g., pooled procurement and aggregated demand) are in place to increase the availability of quality, life-saving commodities at an optimal price and volume.
- **Shaping local delivery markets:** By 2014, local health providers and private sector actors in all EWEC countries are incentivised to increase production, distribution and appropriate promotion of the 13 commodities to increase access among those who need them most.

Recommendations

- **Innovative Financing:** By the end of 2012, innovative, results-based financing is in place to rapidly increase access by those most in need to the thirteen commodities and foster innovations

Recommendations

- **Quality strengthening:** By 2015, at least three manufacturers per commodity are manufacturing and marketing quality-certified and affordable products.
- **Regulation efficiency:** By 2015, all EWEC countries have standardised and streamlined their registration requirements and assessment processes for the 13 life-saving commodities with support from stringent Regulatory Authorities, the WHO and regional collaboration.

Recommendations

- **Reaching women and children:** By 2014, all EWEC countries are addressing financial barriers to ensure the poorest members of society have access to the life-saving commodities
- **Performance and accountability:** By end 2013, all EWEC countries have proven mechanisms in place, like checklists, to ensure that healthcare providers are knowledgeable of the latest national guidelines

Recommendations

- **Product innovation:** By 2014, research and development for improved life-saving commodities has been prioritized, funded and commenced

Next steps

- The report of the Commission will be released on September 26th 2012, see <http://www.everywomaneverychild.org/resources/un-commission-on-life-saving-commodities>
- Implementation Plan agreed to and October consultation in Nigeria committing countries to take action

Implementation

... will require engagement from all the partners involved and UNFPA AND UNICEF look forward to have in-depth discussion with Industry on product improvements needed, demand projections, innovative ideas on increasing production etc...

Thank you for your commitment!

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children

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