

Discussion Paper

Delivering Healthier Futures for Women, Children and Young People

What is the role of business?

By Annabel Beal

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The views expressed in this paper are those of the authors and do not imply endorsement of the content within by the organisations that have provided input or support for the research of this paper.



The health of women, children and young people depends on our collective ability to harness the momentum of existing innovation, collaboration and finance and convert it into tangible, sustainable progress.

Foreword

The health of women, children and young people is essential for sustainable and equitable development. Good health enables people to pursue education and fulfil their potential in employment, with important benefits for local communities and the wider economy.

Yet, as we pass the midpoint for delivering the Sustainable Development Goals, the global community is falling short of its ambitions. Already-fragile health systems are facing interconnected global crises, including conflict, climate change, food and fuel shortages and the legacy of COVID-19. Many in the world's poorest countries do not have access to primary health care, maternal and newborn services, family planning or adequate nutrition, leading to preventable death and unnecessary suffering.

The private sector is a critical partner to governments and civil society, and this discussion paper reflects on the considerable achievements of the business community who are leveraging core businesses, social investments and advocacy voice to improve the health of women, children and young people. It is also a call to action to the private sector to accelerate systemic transformation through innovation, partnership and finance.

Doing so will deliver a brighter future for us all.

Zahid Torres-Rahman, Co-Founder and CEO, Business Fights Poverty



GFF works with governments, civil society, communities, youth advocates and health workers to realise the right to health for women, children and young people in 36 lower-income partner countries. Continued investment in the GFF will enable 250 million women, children and adolescents to access lifesaving health services, helping build more resilient communities.

**Deliver
The Future**

Business Fights Poverty proudly supports the Global Financing Facility (GFF)'s Deliver the Future campaign as private sector advocacy partner.

Introduction

After nearly two decades of positive action, progress to improve the health of women, children and young people is stagnating.

Each year, 4.5 million mothers and babies die avoidable deaths during pregnancy, childbirth and the first few weeks of life. Low and lower-middle-income countries ("lower-income countries") are disproportionately impacted, accounting for almost 95% of maternal deaths¹ and 91% of stunting in children under five.² Weak health systems, inequitable access to health care, lack of sexual and reproductive rights and a yearly global funding gap of \$33bn (even before the COVID-19 pandemic)³ mean that more than 60 countries are off-track to achieve the 2030 targets for reducing neonatal mortality.⁴

Governments must always lead on efforts to improve the health of women, children and young people, but the scale of the problem means that public sector action alone will not turn the tide. Interconnecting crises increase the need for health care whilst destabilising the delivery of services. Social determinants such as inadequate housing, food insecurity and discriminatory cultural norms exacerbate ill-health and complicate the provision of effective health services.



4.5 Million

Each year, 4.5 million mothers and babies die avoidable deaths during pregnancy, childbirth and the first few weeks of life.

To tackle this health emergency, the GFF is seeking to raise \$800m of catalytic investment from governments, foundations and other donors through its Deliver the Future campaign.⁵ As its Private Sector Advocacy Partner, Business Fights Poverty convened a diverse range of companies, policymakers, academics and civil society actors to ask **"How can the private sector support governments to deliver healthier futures for women, children and adolescents?"** The collaboration gathered best practice examples and raised awareness of the issue and the GFF's catalytic financing model through a series of events, online content and a social media campaign between August and December 2023.

Purpose and Methodology

This discussion paper provides practical insights into how businesses are helping improve the health of women, children and young people in lower-income countries.

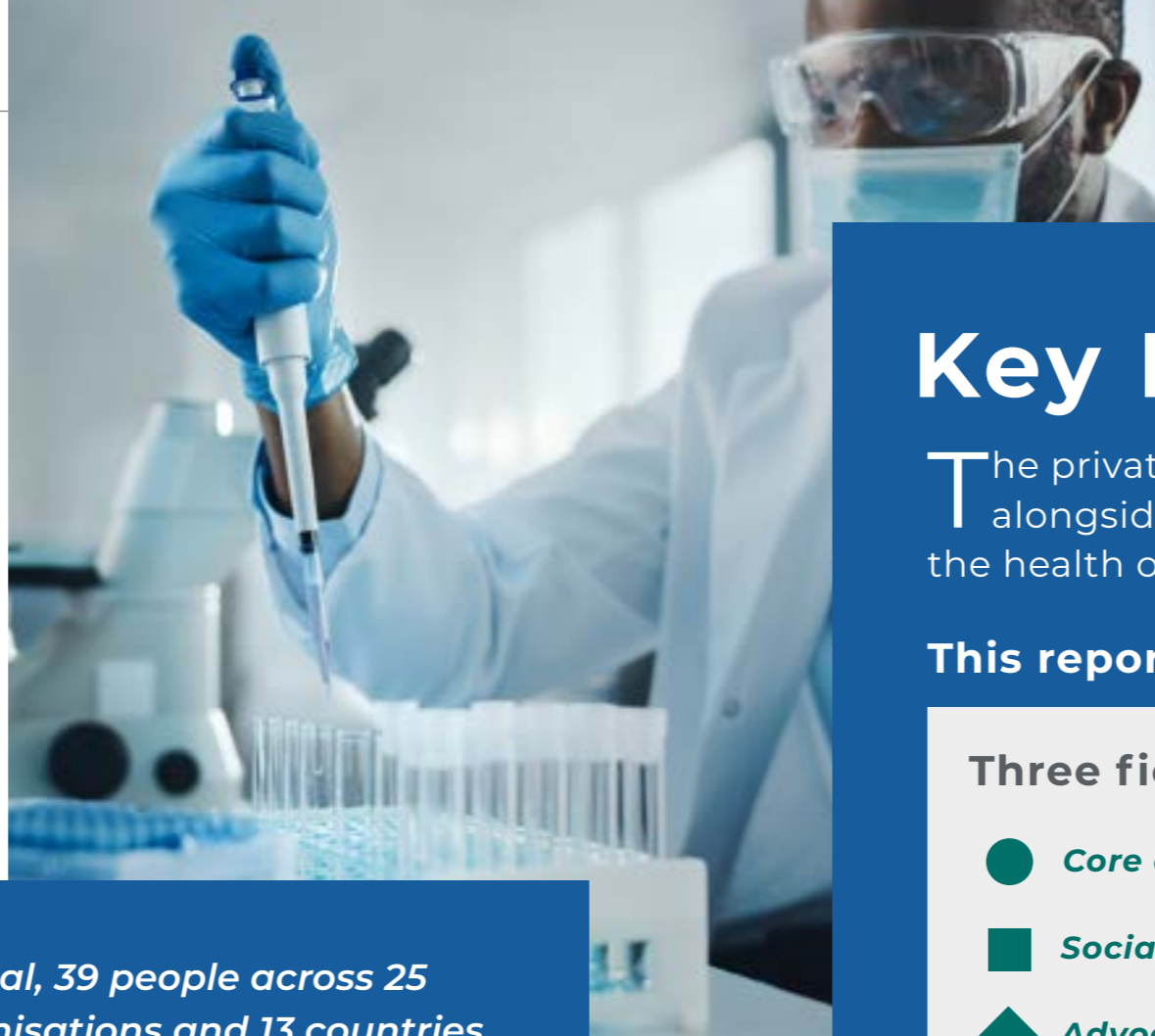
It is written primarily for employees of multinational enterprises (MNEs) and investors, and has a primary focus on Africa, where 26 of the 36 GFF partner countries are found.⁶

The following pages:

- ▶ overview current trends and challenges;
- ▶ explain why the health of women, children and young people is a business concern;
- ▶ demonstrate how business can take action through core operations and value chains, social philanthropy and advocacy;
- ▶ identify three levers to accelerate progress: innovation, public-private collaboration to strengthen primary care, and creative financing;
- ▶ suggest some key questions to prompt business, investor, governments and donor action; and
- ▶ provide examples of action.

This paper draws from desk research, an online written discussion, a private online roundtable and 15 semi-structured interviews with experts and practitioners working in multinational enterprises (MNEs), investors, civil society organisations (CSOs), and social enterprises, a donor government and a GFF partner country government. In total, 39 people across 25 organisations and 13 countries input into the research. Business Fights Poverty is grateful to everyone who shared insights and experience.

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Key Messages

The private sector is playing an important role, alongside government and civil society, to improve the health of women, children and young people.

This report highlights:

Three fields of influence

- *Core operations and value chains*
- *Social philanthropy and*
- ◆ *Advocacy voice⁷*

Three levers to accelerate progress

- 💡 *Harness Inclusive Innovation*
- 🤝 *Collaborate to Strengthen Primary Care*
- 📊 *Maximise Finance⁸*

Three principles to guide action

1. *Rights-focused*
2. *Government-led*
3. *Systems-based*

1. Understanding the barriers to health for women, children and young people

Until recently, the global community was making strides to improve the health of women, children and young people. Between 1990 and 2015, global maternal mortality rates fell by 44%⁹, and rates of mortality in children under five halved¹⁰ (see [Box 1](#)).

Access to family planning services increased, the percentage of births attended by a trained healthcare worker increased from 59% to 71%, coverage of child immunisation widened, and child malnutrition declined.¹¹

However, by 2015 most countries had not met the Millennium Development Goals' Targets to reduce maternal mortality and mortality in children under 5, and high rates of unintended adolescent pregnancy persisted.¹² A renewed focus was required, and the GFF was established to reinvigorate progress and drive action on the new Sustainable Development Goals (SDGs).¹³

Then, in 2020, the COVID-19 pandemic dealt a devastating blow, disrupting essential front-line health services such as routine vaccinations, sexual health and family planning services, particularly in low-income countries. This had real consequences for the health of millions of women, children and young people. At the same time, women and girls were disproportionately affected by job losses,¹⁴ an increase in unpaid care work, school closures, gender-based violence and child marriage.¹⁵

We are at a critical moment for the health of women, children and young people.



We are at a critical moment for the health of women, children and young people, and health systems are facing a number of serious challenges. Governments are contending with the impacts of a global polycrisis, including conflict, climate change

(see [Box 2](#)), food and fuel shortages, rising debt and inflation, and the legacy of COVID-19, which severely limits their ability to invest in health.¹⁶ In addition, cultural factors such as discriminatory gender norms and misinformation prevent women, children and young people from accessing health care. In recent years, the backlash against women's sexual and reproductive rights has intensified, with consequences for access to vital healthcare services in this area.¹⁷

The impact of COVID-19 on the health and wellbeing of women, children and young people



1.4 million

additional unintended pregnancies occurred in the first year of the pandemic in LMICs.¹⁸



4 million women

lost access to childbirth care in the 36 GFF partner countries.¹⁹



Over 25 million children

did not receive routine immunisations in 2021 – up 6 million from 2019.²⁰



10 million more girls

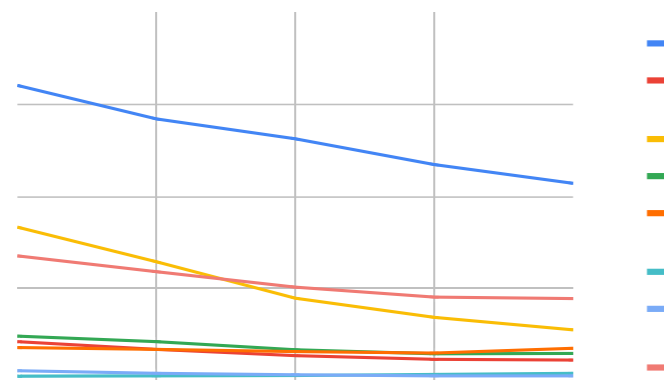
are at risk from child marriage by 2030, in addition to the 100 million at risk before the pandemic.²¹

Box 1: Maternal and Child Mortality: Key Indicators for the Health of Women, Children and Young People

Two key indicators of the health of women, children and young people are the maternal mortality ratio and the under-5 child mortality ratio. Progress on both of these indicators is stalling, and there are stark inequalities between different regions of the world.

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Maternal Mortality Rate by Region (per 100,000 live births)²²



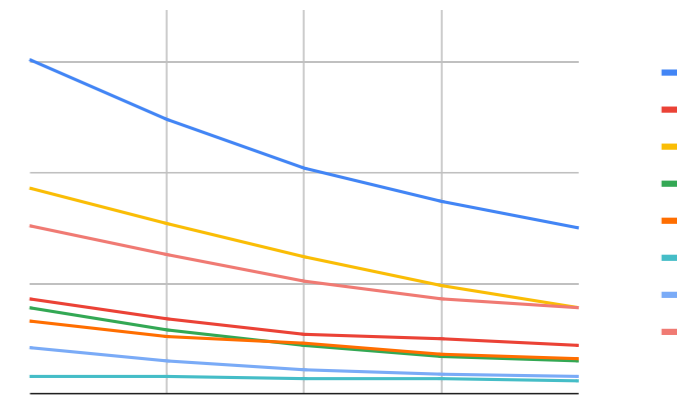
Maternal Deaths in Childbirth

On average globally, 223 mothers die for every 100,000 live births. This is three times higher than the Sustainable Development Goals (SDG) target of 70 per 100,000 live births.

This means 800 women die every day in childbirth, from causes such as severe bleeding, infections, high blood pressure (pre-eclampsia and eclampsia), delivery complications, as well as unsafe abortion.

The vast majority, 95% of these deaths take place in lower-income countries; more than 50% occur in Sub-Saharan Africa, and a further third in South Asia.²³

Under-5 Child Mortality Rate by Region (per 1,000 live births)²⁴



Deaths of children under five years of age

Globally, 38 in every 1000 children born will die before their fifth birthday, compared with the SDG target (25 in every 1000). This equated to five million children in 2021. Again, there are huge regional differences: 58% of these children live in Sub-Saharan Africa, and 26% in South Asia.²⁵

The main causes of death in the under-fives are preterm birth and birth-related complications, and infectious diseases such as pneumonia, diarrhoea and malaria.

Globally, 38 in every 1000 children born will die before their fifth birthday...

*... This equated to **5 million children** in 2021.*



Health systems under pressure

INVESTMENT



\$33.3 billion

...annual funding gap for women, children and adolescent's health globally.²⁶

Many lower-income countries have not returned to pre-COVID economic growth, and governments face rising debt and inflation.

INFRASTRUCTURE



1 billion people

...rely on healthcare facilities with no electricity or unreliable energy supplies.²⁷

Health facilities often lack basic sanitation and energy infrastructure, emergency transport, critical medicines, equipment and diagnostic testing.

UNIVERSAL HEALTH COVERAGE



81 vs 45

The average UHC score for Europe and North America (81/100) is almost double that of Sub-Saharan Africa (45/100).²⁸

Progress on universal health coverage (UHC) is slow and uneven, with large differences between countries. Ill-health can devastate the finances of poor households.²⁹

HEALTHCARE WORKERS



10 million more

...healthcare workers are needed to deliver UHC. The vast majority of these are needed in lower-income countries.³⁰

Healthcare workers, many of whom are women, are strained by increased demand for services, contributing to burnout and other mental health challenges.

POPULATION



9.7 billion by 2050

The global population is expected to rise from 8 billion today to 9.7 billion by 2050. Over half of this

growth will occur in Africa.³¹

Mainly lower-income countries with increasing populations must deliver health care to rising numbers of people, further straining healthcare systems.

CULTURAL NORMS



1 in 5

young women aged 20–24 were married in childhood.³²

Cultural norms and taboos impact health and access to health care – for example, child marriage or the backlash against women's sexual and reproductive rights.³³

PUBLIC INFORMATION



44%

...of women and girls aged 15–49 do **not** make informed decisions on sexual relations, contraception and reproductive healthcare.³⁴

Deep-seated beliefs and misinformation impede the uptake of essential services like vaccinations, family planning, and maternal health check-ups.³⁵

COMPOUNDING CRISES



2.5x

The number of forcibly displaced people has more than doubled in the last 10 years, to 108 million in 2022: 1 in every 74 people.³⁶

The legacy of COVID-19, climate change, numerous violent conflicts and a fuel crisis have fuelled forced migration and added to the disruption of essential care.

Box 2: The impact of climate change on health

Climate change disproportionately affects women and children, and it is already placing additional burdens on health systems whilst reducing their ability to deliver services.

In Africa, rates of communicable disease, including malaria, dengue fever, Lassa fever, Rift Valley fever, Lyme disease and Ebola are all on the rise due to changing weather patterns,³⁷ and pollution and increased

temperatures are contributing to increased respiratory and cardiovascular disease.

One study showed that over half of health professionals in six African countries now consider the impact of climate change on human health to be 'extensive', and 38% reported impacts to 'some extent'.³⁸

Increased temperatures have contributed to a reduction in agricultural productivity of 34% since the 1960s, increasing

the risks of widespread hunger and malnutrition.³⁹

As more people are displaced due to climate change, climate refugees – up to 80% of whom are women and children – will be particularly vulnerable to malnutrition, lack of access to health care and contagious disease.⁴⁰

Holistic approaches are needed

To face these complex challenges, a holistic approach to health care is needed. Action across different policy areas must be integrated, and health systems must transition from a reactive to a proactive stance. In addition to expanding access to medical care, governments must tackle the root causes of ill-health and build resilience of health systems to shock.



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A people-centred approach, with a strong focus on equity, is fundamental. This requires investing in community health services, and effective joined-up governance at the country, regional and global levels. National health development plans need to be integrated with social and economic development strategies, adopting a nexus approach that includes women's empowerment, access to resources, and considers the economic interplay of peace, security, humanitarian and development issues.

2. The Case for Action

The health of women, children and young people is a relatively overlooked area of social impact for many businesses. However, there are five good reasons to raise the issue up the sustainable business agenda.

1. An imperative for human rights and sustainable development

First and foremost, the health of women, children and young people is a matter of basic human rights to health⁴¹ and non-discrimination.⁴² It is essential for equity and social justice, and for the achievement of other SDGs.

“States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health.”

UN Convention on the Rights of the Child, Article 24

2. A material risk for business

Thriving business on healthy populations, and investors are beginning to recognise poor health as a systematic risk. ShareAction has proposed a framework for investors to assess health-related risk factors and companies' impacts on health on workers, customers and communities, and are calling for standardised disclosures on health and inclusion of health data in sustainability indices.⁴³

“States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care.”

Convention on the Elimination of All Forms of Discrimination Against Women, Article 12



3. Driving economic growth through improved well-being and productivity of workers

Many businesses already recognise the potential of women and young people, and their contribution to the economy. Without the fulfilment of their right to health, women and young people – and girls in particular – will be unable to thrive in the world of work.⁴⁴ Businesses also have a vested interest in ensuring that children are healthy and well-nourished, so they can take advantage of educational opportunities and become productive members of the future workforce.

Whilst more data is needed, studies suggest that improving women's health and control over their fertility contributes to better-educated, more productive societies and increases economic growth.⁴⁵ The contribution of health to economic growth can be considerable – around a quarter of growth in low- and middle-income countries (LMICs) between 2000–2011 is thought to be a result of health improvements, with a 9:1 return on investment.⁴⁶

4. Creating paid employment opportunities for women

Investment in health and social care also creates opportunities for employment in a sector in which women make up 67% of workers worldwide.⁴⁷ As previously discussed, there is an urgent need for more healthcare workers to achieve UHC, and expanding the healthcare workforce can create paid work for women, whilst reducing the unpaid care burden that women shoulder.

Women's contribution to the global economy

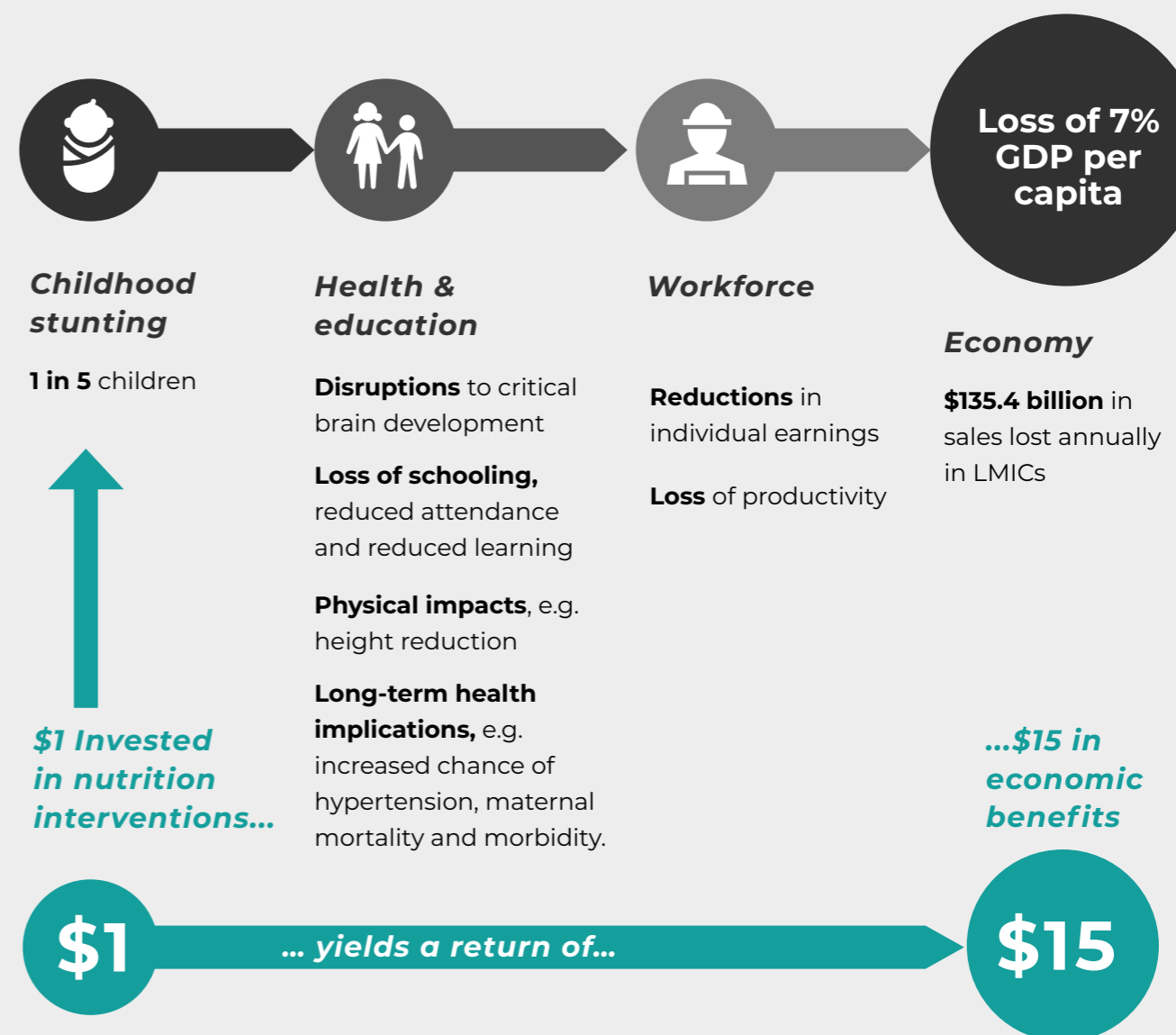


5. A growth market

Health is a growth sector, and this presents opportunities for businesses to grow and develop new markets. In 2021, global health expenditure reached \$9.8 trillion, over 10% of global GDP.⁵³ In recent years, partly driven

by the COVID-19 pandemic, there has been a surge in healthcare investment, with exciting developments in scientific knowledge, digital technology and AI, and alternative models of care.⁵⁴ In particular, there are opportunities to expand into previously underserved markets, including LMICs.

Economic impact of childhood malnutrition⁵⁵



3. A Role for Every Business

Key focus areas

To improve the health of women, children and young people:

- ▶ Sexual and reproductive health and rights
- ▶ Universal Health Coverage (UHC), particularly emergency, community and primary care
- ▶ Pregnancy, childbirth and newborn care
- ▶ Routine vaccination
- ▶ Nutrition
- ▶ WASH and tackling infectious diseases
- ▶ Preventing child marriage and tackling gender-based violence (GBV)

Indeed, many existing business initiatives have a bearing on the health of women, children and young people; in addition to standalone activities targeted at improving health, opportunities lie in more explicitly addressing health in existing programmes and activities.

To clarify where they can have the greatest impact, businesses can map their health-related activities and impacts to a wide range of environmental and social determinants of health, and focus their efforts in the areas that align best with their expertise and objectives:

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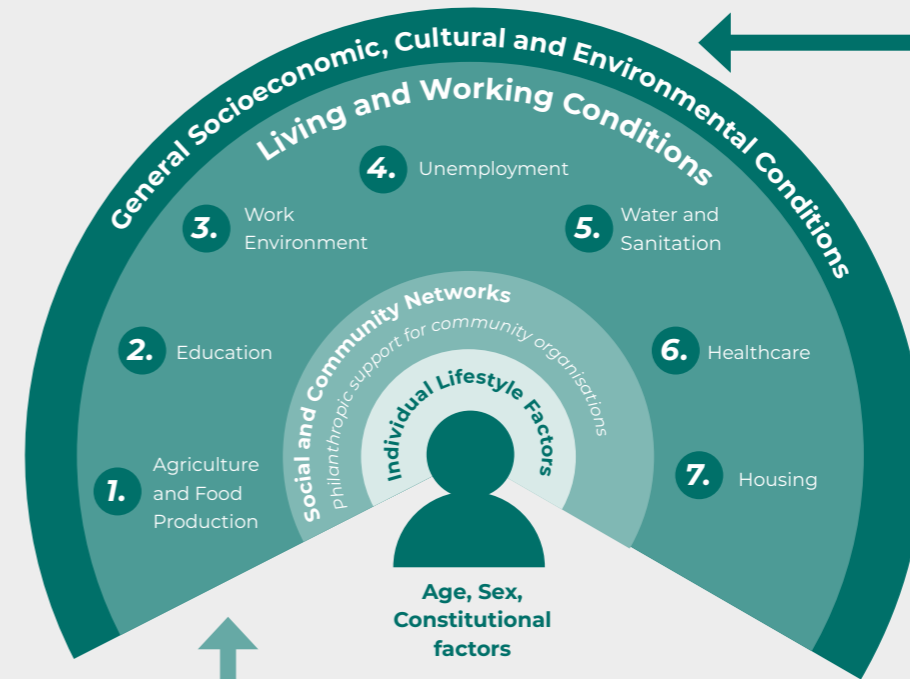
Businesses across a wide variety of sectors can play an important role in improving the health of the women, children and young people within their business ecosystems, including their employees, customers, suppliers and the communities in which they work.

This discussion paper provides examples of action in the medical and pharmaceutical sectors, but also from digital technology and communications, agriculture, cosmetics and other fast-moving consumer goods, garments, finance, transport and supply chain logistics.

Did you know?

? Non-health sectors contribute more to population health outcomes than the health sector.⁵⁷

Mapping business action to the determinants of health



GENERAL SOCIOECONOMIC, CULTURAL AND ENVIRONMENTAL CONDITIONS

- ▶ Early warning systems & crisis response
- ▶ Advocate for sexual health & reproductive rights
- ▶ Challenge harmful cultural norms, e.g. child marriage
- ▶ Counter misinformation
- ▶ Tackle GBV
- ▶ Promote women's economic empowerment
- ▶ Responsible water use
- ▶ Avoid, mitigate & remediate pollution
- ▶ Advocate for strong & inclusive social security systems
- ▶ Advocate for greater investment in health sector
- ▶ Support transition to clean, reliable energy networks
- ▶ Invest in climate-resilient buildings & infrastructure

LIVING AND WORKING CONDITIONS

1. AGRICULTURE AND FOOD PRODUCTION

- ▶ Increase access to affordable, nutritious food

2. EDUCATION

- ▶ Provide information on health, hygiene & nutrition

3. WORK ENVIRONMENT

- ▶ Pay living wages
- ▶ Flexible working
- ▶ Family/parental leave policies
- ▶ Health insurance & benefits

4. UNEMPLOYMENT

- ▶ Safe working environments
- ▶ Tackle excessive overtime
- ▶ Information on social security & other rights
- ▶ Workplace health clinics & menstrual hygiene
- ▶ Mentoring, training and skills development
- ▶ Entrepreneurial skills
- ▶ Business loans and grants

5. WATER AND SANITATION

- ▶ Improve access to water & sanitation

6. HEALTHCARE

- ▶ Contribute to strengthening health systems via innovation, collaboration & finance

7. HOUSING

- ▶ Affordable, quality housing
- ▶ Access to clean energy & clean cookstoves

? Social determinants of health

...are "non-medical factors that influence health outcomes." These include living and working conditions, as well as the wider social, cultural, economic and political context. They are important in influencing health inequalities, and account for between 30–55% of health outcomes (often more than individual lifestyle choices or healthcare).⁵⁶

Source: Based on the Dahlgren-Whitehead Rainbow model of health determinants.⁵⁸

Three Spheres of Business Influence

Core Operations and Value Chains

Put in place policies that support the physical and mental health of workers.

Companies can encourage preventative measures, access to health care and support the well-being of workers right across the value chain through partnerships with NGOs or governments. Examples include facilitating access to health care and support pathways; provision of private healthcare benefits; educational programmes for workers on nutrition and menstrual hygiene (see Boxes 3 and 4); meeting health and safety standards and providing occupational health schemes; on-site clinics, e.g. for vaccination or contraceptive advice; paid sickness leave; paid time off for medical appointments; maternity and parental leave and flexible working for carers; initiatives to tackle and respond to gender-based violence and child marriage. Not only do such measures help reduce demand for public health services, they can also improve worker retention, productivity and morale, whilst reducing absenteeism.⁵⁹

Pay living wages.

Lack of funds is a common reason that women and children do not access health care when it is needed. Living wages ensure that workers earn enough to provide the essentials – inter alia nutritious food and health care – for themselves and their families, including their children. They also help to counter excessive working hours and financial stress, which can compound ill-health.⁶⁰

Programmes that increase the economic empowerment of women boost a woman's ability to afford health care for herself and her family.

Support the economic empowerment of women, and integrate health into existing empowerment programmes.

Programmes that increase the economic empowerment of women boost a woman's ability to afford health care for herself and her family. What is more, women who are healthy (and whose families are healthy) will be in a better position to benefit from such programmes, increasing their impact and the contribution of women to economies. There is an opportunity for businesses to listen to the health concerns of women taking part in their existing programmes, and to work with civil society partners to integrate health support as needed.



Maintain high environmental standards.

Industrial activity – for example, from factories, mines or agricultural practices – can pollute air, water and soils, with detrimental impacts on the health of workers and local communities. Local health systems are put under strain by the consequent increases of disease and malnutrition. When companies ensure high standards of environmental performance, these risks to lives and health systems are reduced.

Strategically leverage core business capabilities and focus on discrete interventions that can be scaled for maximum impact.

For example, Bayer (see [Box 7](#)) leverage their existing contraceptive products as well as innovation and manufacturing capabilities to increase access to family planning services in lower-income countries.

Box 3: How Primark is providing access to health and wellbeing services for women in the garment sector

In India, Primark's local teams collaborate with factories and mills to improve workers' understanding of physical and mental health and to build support systems.

My Life

Launched in 2017 with [Women Win](#) and [Naz Foundation](#), My Life informs factory workers about menstrual health and hygiene alongside financial literacy, workplace rights, occupational safety and teamwork skills. In an impact assessment, 60% of participants reported significant improvements in their personal and menstrual health. Factory owners are also seeing benefits – for example, reducing absenteeism and health-related costs.

My Space

Primark partners with [St John's Medical College](#) to train workers as peer counsellors and tackle mental health stigma in 12 factories. Building on learning from My Space, a similar programme, Moner Kotha, has been introduced in Bangladesh, with the aim to reach 2,500 workers across 5 sites by the end of 2024.

Speak Up

The My Space programme and the partnership with St Johns helps factories identify and respond to issues which can affect workers' stress levels and mental health, many of whom are migrants. Speak Up builds on My Space to provide support for workers experiencing sexual harassment and gender-based violence.⁶¹

Box 4: Businesses taking action on nutrition

Investing in workforce nutrition, especially for women, contributes to public health and productivity. Initiatives like [Workforce Nutrition Alliance](#) and [Impact4Nutrition](#) ensure workers' access to nutrition. Companies like Olam and Unilever are committing to provide nutrition education; companies can also amplify their impact in communities by leveraging their supply chain expertise, as seen in [Assam's Healthy Line Shop](#) model, ensuring widespread distribution of essential health and nutritional products in worker communities.

Beyond their workforce, businesses, especially those in the food and agriculture sector, can make a broader societal impact. For instance, DSM partners with the World Food Programme to provide fortified foods. The [Access to Nutrition Index](#) monitors industry performance, and individual company performance is tracked by the [Global Nutrition Report](#). The [Zero Hunger Private Sector Pledge](#) calls on the business community to take actions to end hunger, and [Millers for Nutrition](#) aims to increase the availability of fortified staple foods.

Companies can encourage preventative measures, access to health care and support the well-being of workers right across the value chain through partnerships with NGOs or governments.

Box 5: SMEs strengthening health outcomes through the care economy

Supporting care economy SMEs helps to alleviate the disproportionate burden of unpaid care work on women, and helps influence social determinants of health, such as gender equality, economic stability and access to education.

This, in turn, can lead to improved health outcomes and reduced healthcare costs.

For example, Standard Chartered's [Futuremakers](#) programme supports social entrepreneurs including [Bena Care](#), which provides affordable at-home nursing and physiotherapy to patients with life-limiting illnesses in Kenya.

Other examples include ATEC's clean cooking solutions, which mitigate respiratory health risks by providing safer home environments; [Folia Water](#)'s filtration technology preventing waterborne diseases; and [AeioTu](#), which offers educational services that can lead to long-term health benefits for children.⁶²

Social Investment and Philanthropy

Leverage corporate social responsibility initiatives and philanthropy...

...to channel much-needed resources to the health of women, children and young people. In some cases, this can take the form of significant financial donations – for example, by Vodafone Foundation's [m-mama](#) programme or [MSD for Mothers](#) (see [Box 6](#)).

Provide in-kind donations.

For example, during the COVID-19 pandemic, the [Hygiene and Behaviour Change Coalition](#) between Unilever and the UK Government's Foreign, Commonwealth and Development Office reached over 1.2 billion people with information about WASH, via partnerships with NGOs and digital technology. Unilever brands such as Lifebuoy and Domestos donated hygiene products, including 69 million bars of soap.⁶³

Many companies already support entrepreneurs, and these programmes can be utilised to support startups with a mission to improve the health of women, children and young people.

Raise funds via brand campaigns.

Proctor and Gamble's Pampers brand of nappies has partnered with UNICEF since 2006 on a campaign to help eliminate Maternal and Newborn Tetanus (MNT). For each pack of diapers sold, the cost of one vaccine is donated. With \$70 million raised, Pampers is now the largest donor to combat MNT; 100 million mothers and babies have been immunised across 65 countries, saving one million newborn lives.⁶⁴

Support healthcare startups through entrepreneurship programmes.

Many companies already support entrepreneurs, and these programmes can be utilised to support startups with a mission to improve the health of women, children and young people. For example, UKaid, EY and Unilever's [TRANSFORM](#) programme have supported [Kasha](#), also in Kenya, which provides discreet access to personal hygiene products and essential healthcare items for women.



Box 6: Changing Lives through Philanthropic Initiatives

Vodafone Foundation m-Mama

Vodafone Foundation and USAID developed m-mama, an emergency referral system reducing maternal and newborn mortality by 38% and 40% respectively. m-mama, operational in Tanzania, Lesotho, and soon in Kenya and Malawi, connects mothers and newborns in rural areas to urgent health care through a free call centre and local 'taxi ambulances.' The system manages emergency transport efficiently, ensuring timely access to appropriate medical facilities. Since 2014, it has facilitated transport for nearly 42,000 women and newborns, saving almost 3,000 lives.

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MSD for Mothers

Launched in 2011, MSD for Mothers is a \$500 million initiative aiming to reduce maternal mortality, positively affecting over 20.8 million women and 160 million people in the U.S., Nigeria, India and Kenya. The programme uses technology and partnerships to improve health systems and care quality.

Key projects include enhancing ambulance services in Kenya, initiating a development impact bond in India for better maternity care, and using storytelling to encourage communities in Nigeria to report maternal deaths and access family planning. Additionally, MSD for Mothers collaborates with Ferring Pharmaceuticals on postpartum haemorrhage research and has invested \$50 million supporting entrepreneurs with maternal health businesses. It has also contributed \$10 million to the Global Financing Facility.



Advocacy Voice

Campaign for policies that protect the health of women, children and young people.

For example, in South Africa, different companies are advocating for an end to GBV, and for stronger laws and policies to protect victims. Mettlestate and Software company BBD are collaborating with TEARS Foundation to take a stand against GBV in gaming; Unilever's JOKO tea brand ran a campaign with People Opposing Women Abuse (POWA), encouraging customers to send voice notes to the President, asking him to fast-track GBV laws.⁶⁵ Meanwhile, cosmetics company Avon raises awareness of how to respond to GBV, and supports charities including Lawyers Against Abuse, who work with the police, judiciary and policymakers on systemic change.

Although many companies are hesitant to publicly advocate on politically contentious issues such as abortion access, some companies – including Google, Apple and Starbucks – announced supportive measures for employees to access abortion when the US Supreme Court overturned the Roe v Wade judgement. Patagonia even committed to bail employees taking part in pro-choice protests.⁶⁶

Provide reliable information to workers and consumers...

...on issues such as vaccine hesitancy. For example, [Business Partners to CONVINCe](#) was established during the COVID-19 pandemic to empower businesses to counter vaccine hesitancy and share evidence-based information on vaccination.

[CARD-MRI](#), the largest microfinance institute in the Philippines, uses its significant microfinance network to share reproductive health and family planning information and services with its women customers.

Support youth advocates.

Young people are the ones who will be most affected by policy decisions on health, and yet their voices are often not adequately represented in decision-making. Companies can leverage their own advocacy to bring young voices to the table in government and international policy fora. This is best done in the context of long-term relationships with youth advocates, through which companies can support young people's leadership through mentoring, funding and network-building. Youth organisations working in the field of health for young people include the [Network for Adolescent and Youth of Africa \(NAYA\)](#) and [All for Youth](#) in Malawi.

Call on national and donor governments to fund health.

Businesses can advocate for universal health coverage and increased government investment in the health of women, children and young people, including foreign aid and investment. For example, they can lend their voice to the GFF's [Deliver the Future](#) campaign, calling on donor governments to contribute to the GFF Trust Fund and catalyse investment in the health of women, children and young people.



4. Three Levers to Accelerate Action

Whilst all businesses can contribute to improving the health of women, children and young people within their own spheres of influence, some businesses are particularly well-placed to drive systemic change and accelerate access to health care.

In particular, businesses in industries such as medicine and pharmaceuticals, energy, infrastructure, digital technology, transport and logistics can lean into their core business capacities. Private sector investors also have a critical role, alongside governments and civil society partners.



In particular, businesses in industries such as medicine and pharmaceuticals, energy, infrastructure, digital technology, transport and logistics can lean into their core business capacities.

Action can be accelerated through three key levers of change:



Harness innovation for inclusive health care.

Inclusive design of products and services is essential to expand access to health care. MNEs and grassroots entrepreneurs are both important sources of inclusive innovation, but they need differentiated support to ensure that new products and business models are financially viable.



Collaborate to strengthen primary health care.

Innovations can be brought to scale through their integration into national health systems. Many focus areas for collaboration between the private and public sectors already exist, but more mechanisms for cross-sectoral dialogue and collaboration are needed.



Maximise finance for the health of women, children and young people.

Significant public and private investment is needed to bridge the funding gap for the health of women, children and young people.

Each of the following sections is expanded in an accompanying Annex, containing a more detailed discussion and further examples of action.



Harness Innovation for Inclusive Health Care

[Click here](#) to read this section in greater depth

A core strength of the private sector is its ability to innovate, demonstrate proof of concept, strengthen new products and services through rapid iteration, and bring successful models to scale.



A greater emphasis on inclusive design and inclusive finance can help ensure the benefits of private sector innovations reach women, children and young people in low-income and under-privileged communities.

Indeed, the solutions to many causes of early mortality and morbidity already exist, but are not affordable or accessible to vulnerable low-income populations in LMICs.

A greater emphasis on inclusive design and inclusive finance can help ensure the benefits of private sector innovations reach women, children and young people in low-income and under-privileged communities.

Box 7: How Bayer is harnessing innovation to increase access to health

Bayer is taking a strategic social business approach to expand access to contraceptives in LMICs. This model sustainably addresses supply and education gaps and fosters future health innovations.

To meet its ambition to reach 100 million women in LMICs by 2030, Bayer is investing €400 million in production facilities for long-active reversible contraceptives, including a new facility in Costa Rica specifically for LMIC markets. Additionally, Bayer has embarked on pioneering research to make non-hormonal contraception affordable for women in LMICs, supported by a co-funded grant from the Gates Foundation.

Bayer adopts an equitable pricing approach and reinvests any profits it makes from cost-plus sales to NGOs, UN agencies into philanthropic initiatives such as [The Challenge Initiative](#). This partnership with the John Hopkins University, the Bill & Melinda Gates Foundation and others has already reached more than 3.5 million women in East and West Africa, India, Pakistan and the Philippines with family planning information and contraceptive products.

Bayer also collaborates with UNFPA in India, using an AI chatbot to address teenage pregnancy and gender violence, with the intention to reach 6 million people by 2027.⁶⁷ The company is also developing a non-hormonal contraception, supported by a \$12 million grant from the Bill & Melinda Gates Foundation.⁶⁸

Bayer has embarked on pioneering research to make non-hormonal contraception affordable for women in LMICs, supported by a co-funded grant from the Gates Foundation.



Inclusive Design

Factors that impede access to health care include product cost, insufficient access to health facilities (particularly in rural areas), transport and supply logistics, and lack of facilities for storage of medicines at the right temperatures.

Companies can address these barriers in the following ways:

- ▶ **Design new products** that overcome cost and logistical barriers to care. For example, heat-stable oxytocin to prevent post-partum haemorrhage was developed by Ferring Pharmaceuticals, to avoid the need for refrigerated storage.⁶⁹
- ▶ **Harness digital innovation** to expand access to care – for example, via mobile phone technology or drone delivery. [MamaOpe](#) in Uganda is a woman-founded device and software company providing wider access to telemedicine and diagnostics in remote areas.
- ▶ **Co-design solutions with young people and support grassroots innovation.** This is particularly important for ensuring solutions fit local contexts, and for building trust in new solutions. [Y Labs](#) work with young entrepreneurs to develop solutions that meet the needs of young people.
- ▶ **Embrace knowledge-sharing on evidence-based practices** – for example, via the [Partnership for Maternal, Newborn, and Child Health \(PMNCH\)](#) and the [Coalition for Women's Health in Africa](#).



Social entrepreneurs and SMEs require funds and technical assistance to help them refine their products and business models.

Inclusive Finance

There is a need for additional funding for both multinational enterprises and SMEs to develop and scale inclusive innovations.

Support for SMEs

Social entrepreneurs and SMEs require funds and technical assistance to help them refine their products and business models, and bring solutions to market.

Impact investors and larger companies can help provide such support:

- ▶ **Create targeted funding opportunities**, e.g. targeted investments and grants, networking platforms, pitching contests, incubators and accelerator programmes. For example, [Arm's partnership with Unicef](#) has supported over 700 innovators and young entrepreneurs to scale digital health solutions.
- ▶ **Provide access to markets** through introductions to potential customers and integrating SMEs into value chains; [Investing in Innovation Africa](#) (i3) exemplifies this, providing grants of \$50,000 and access to customers and networks for 60 SMEs, increasing affordability and access to healthcare products.
- ▶ **Address additional barriers for women entrepreneurs**, who receive only a small fraction of investment compared with their male peers. Reckitt and Health Innovation Exchange established [WINFund](#) to provide targeted finance and support to women-led health innovation start-ups.

MNEs require strong business cases to invest in research and development of products designed primarily for use in low-income countries, where returns may be lower or more risky.

Reducing Commercial Risk for MNEs

MNEs require strong business cases to invest in research and development of products designed primarily for use in low-income countries, where returns may be lower or more risky. Collaboration can help reduce commercial risk, enabling research into innovations that would otherwise fail to meet commercial criteria for development.

- ▶ **Leverage the Advance Markets Commitment Approach**, in which donor governments commit to purchase products before they have been developed. This has been used for development of a pneumococcal vaccine for low-income countries,⁷⁰ as well as vaccinations against COVID-19.⁷¹
- ▶ **Partner with philanthropic donors**, utilising grant funding to reduce the up-front costs of development (see [Box 7](#)).

Mechanisms like these must be used judiciously, to avoid distorting markets and undermining long-term sustainability.



Collaborate to Strengthen Primary Health Care

[Click here](#) to read this section in greater depth

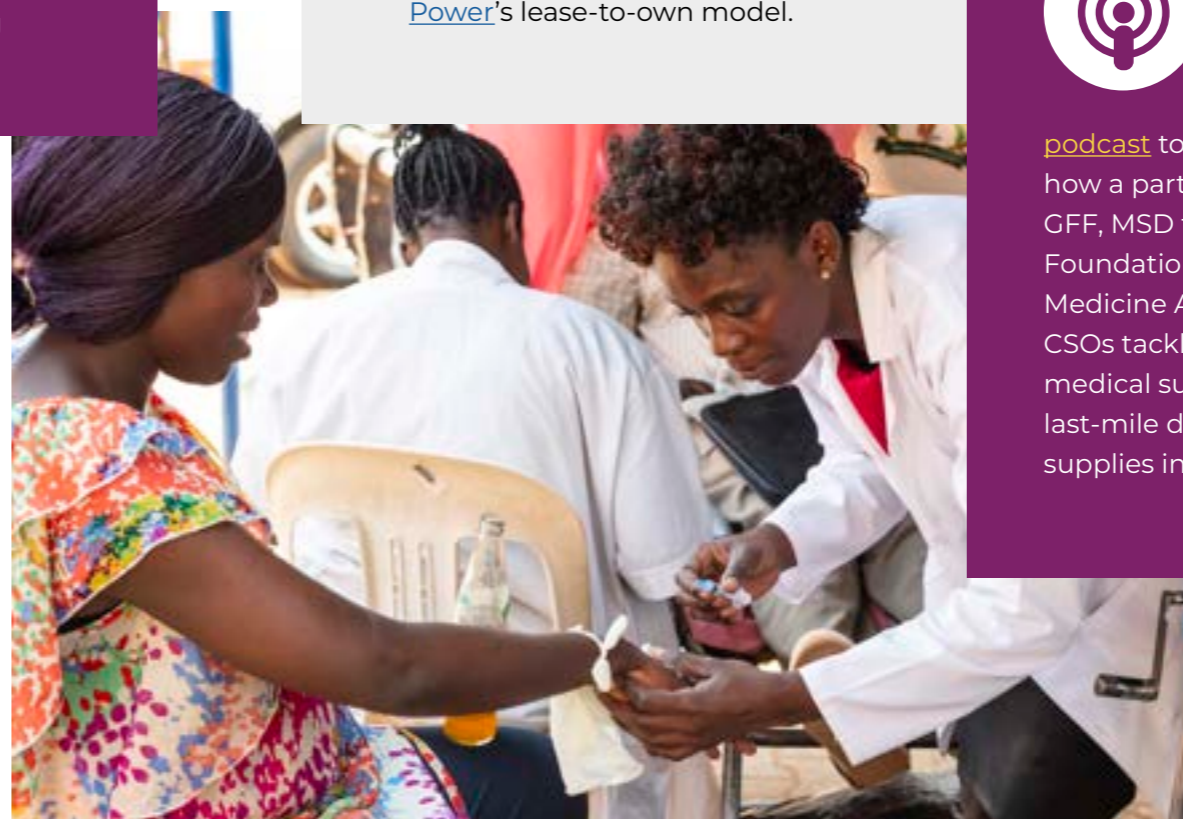
Integrating inclusive innovations into national health systems offers a route for the private sector to enter new markets and scale their impact.



? Primary health care...

...is the provision of integrated healthcare services close to communities, supporting people throughout their lives in a way that centres their needs, addresses the broad determinants of health, and empowers people to take care of themselves. Primary health care is central to resilient national health systems that promote good health for all by addressing a broad range of determinants of health.⁷²

The private sector already has a significant role in providing primary health care in LMICs. Whilst differences exist between countries, WHO estimates that almost 40% of healthcare services in Africa and 57% of services in Southeast Asia are provided by the private sector.⁷³ However, this sector is often fragmented, which poses challenges for effective government oversight and coordination.



Focus Areas for Private Sector Action to Strengthen Primary Health Care

- 1. Community Clinics**, such as the [Ubuntu-Afya Kiosks](#) in Kenya
- 2. Emergency Transport** in rural and poor areas, for example by [Ambulex Solutions](#) or [Vodafone Foundation's m-mama](#) initiative.
- 3. Diagnostics**, for example [Butterfly Network's](#) mobile ultrasound devices
- 4. Supply Chain Logistics**, ensuring medicine is available via collaborations such as GFF's Supply Chain Partnership in Mozambique.
- 5. Buildings & Infrastructure**, via public-private partnerships such as [Queen Mamohato Memorial Hospital](#) in Lesotho.
- 6. Renewable Energy**, ensuring health facilities have affordable, reliable and clean energy, e.g. through [Differ Community Power's](#) lease-to-own model.
- 7. Training Healthcare Workers**, for example via Johnson & Johnson's [Center for Health Worker Innovation](#).
- 8. Public Health Education**, providing life-saving advice via platforms such as Jacaranda Health's [PROMPTS initiative](#), which utilises SMS messaging.
- 9. Data for Planning and Monitoring**, for example via the [GAVI-Mastercard Wellness Pass](#) which enables patient records to be accessed across health facilities.
- 10. Improve Nutrition**, for example via industry-wide initiatives like [Millers for Nutrition](#).



PODCAST: Revolutionising Supply Chains in Mozambique

[Listen to this](#)

[podcast](#) to find out more about how a partnership between GFF, MSD for Mothers and UPS Foundation, Mozambique's Central Medicine Authority and local CSOs tackled stock shortages of medical supplies by transforming last-mile delivery of medical supplies in Mozambique.

Platforms for Dialogue and Collaboration

Governments are the primary duty-holder to deliver on the right to health of women, children and adolescents, and naturally take the lead on planning, delivering and financing public health systems.

Structured dialogue platforms between governments and the private sector enable the private sector to better support government action. These provide fora for two-way information sharing, enabling the public and private sectors to understand shared opportunities and challenges, align action, build relationships, shape supportive regulations, and integrate innovations into national health planning.

Government-led dialogue mechanisms have been developed at various levels in Africa:

- ▶ **Regional:** AUDA-NEPAD is developing a Private Sector Engagement Framework and Monitoring and Evaluation Plan for implementation across Africa, and a dialogue with the private sector was held in 2022, in conjunction with the African Union Commission and other partners.⁷⁴
- ▶ **National:** For example, Malawi introduced National Health Financing Dialogues to engage the private sector and other stakeholders on health priorities.⁷⁵
- ▶ **Local:** In Kenya, Makueni County's government has established a forum with local healthcare providers in both the private and non-profit sectors.

In addition to these government-led platforms, there are also opportunities for businesses to engage in **international multi-stakeholder platforms** such as WHO's [Country Connector on Private Sector in Health](#) and [PMNCH](#), and **business-led platforms** such as the Private Sector Health Alliance of Nigeria.

However, governments need sufficient resources to effectively engage with the private sector and finance the delivery of integrated health services. The next section looks at this critical piece of the puzzle.

Structured dialogue platforms between governments and the private sector enable the private sector to better support government action.



Maximise finance for the health of women, children and young people

[Click here](#) to read this section in greater depth

It is often said that universal health coverage requires not only “more money for health” but also ensuring “more health for the money.” The private sector plays a pivotal role in both aspects, as the magnitude of the challenge demands resources beyond public finances alone.

More Money for Health

Several strategies are being employed to increase the funds available for improving the health of women, children and young people, from both governments and private capital.

- ▶ **Catalytic Financing Mechanisms:** The Global Financing Facility (GFF) operates as catalytic finance mechanisms that provide technical assistance to strengthen partner governments' investment case for the health of women, children and adolescents, scaling successful evidence-based interventions, and unlocking further national and donor investments (See [Box 8](#)).
- ▶ **Debt Buy-Downs:** Many LMICs are grappling with a growing debt crisis. Grants for debt buy-downs free up government resources by reducing debt servicing costs. For example, GFF arranged a \$9 million debt buy-down with Guatemala, allowing them to invest in combating malnutrition instead.⁷⁶

Building strong investment cases for healthcare necessitates bridging the communication gap between investors and the health sector.

- ▶ **Blended Finance Mechanisms:** To mitigate the risk of private investments in health care, blended finance mechanisms like those employed by the [Health Finance Coalition](#) and the [Nutritious Foods Financing Facility \(N3F\)](#) combine public, private, and philanthropic funds. This strategy makes investments in health care more attractive to risk-averse private investors.
- ▶ **First-Loss Capital:** Socially-driven investors can provide first-loss capital; this absorbs the brunt of potential losses, encouraging private investment in health solutions with uncertain returns.⁷⁷

Building strong investment cases for health care necessitates bridging the communication gap between investors and the health sector. Private sector actors can connect with coalitions like the Financing Alliance for Health to facilitate collaboration.

Box 8: The Global Financing Facility for Women, Children and Adolescents

The GFF is a multi-stakeholder partnership housed in the World Bank. It was co-created in 2015 by the World Bank, health leaders, the United Nations and civil society organisations in response to slow progress towards global health commitments, and high rates of maternal and child mortality in many countries.

Its unique, country-led model of financing and delivery has been critical to accelerating health investments and spurring health progress and empowerment for women, children and adolescents. GFF works in 36 partner countries, which together account for two-thirds of global maternal deaths, stillbirths, and newborn and child deaths.

GFF works to strengthen national plans for women, children and adolescents' health, through a mixture of technical assistance, catalysing and aligning investments from other donors, and bringing effective local solutions to scale.

GFF's Deliver the Future campaign aims to raise \$800 million, to drive further investments of \$20.5 billion from IDA and IBRD, other donors, and domestic investments from partner governments. This money will help provide lifesaving care to 250 million women, children and young people by 2030.⁷⁸

Progress so far

2015

\$2bn

committed to the partnership since 2015



\$32bn

unlocked for women, children and adolescent health



96 million

women have received four or more antenatal care visits



103 million

women have delivered their babies safely



111 million

newborns have benefitted from early initiation of breastfeeding



500 million+

women have received access to modern family planning



187 million

unintended pregnancies have been prevented



155 million

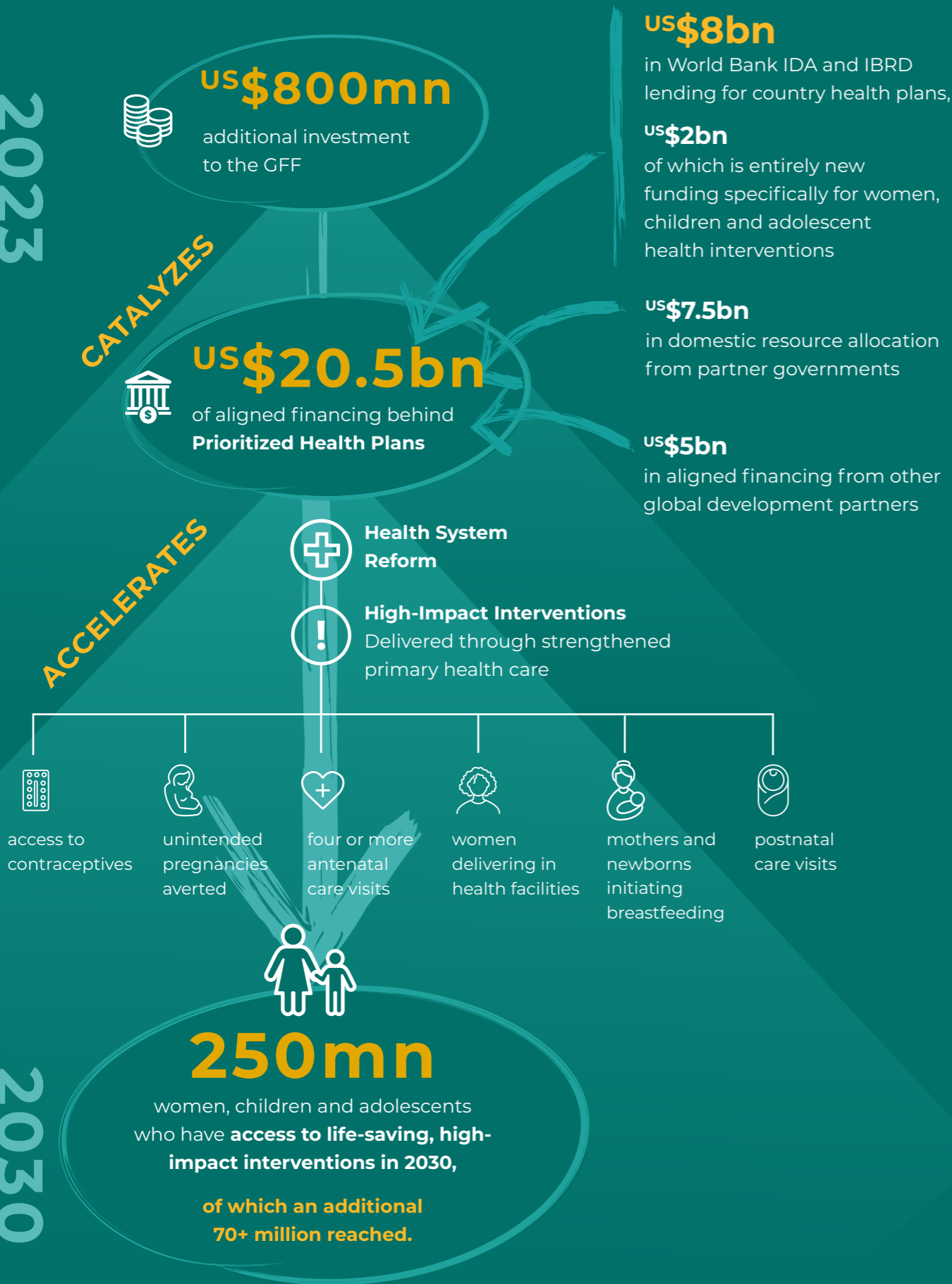
women and children were reached with life-saving services in GFF-supported countries in 2021 alone

2023

Building on progress

2023

2030



More Health for the Money

In a tight fiscal environment, it becomes even more important that the money that is invested has the largest possible impact. This is being done in a number of ways:

- ▶ **Volume Guarantee Agreements:** Companies can reduce product costs in exchange for commitments from donors or governments to purchase high volumes. The Implants Access Initiative exemplifies how these agreements can significantly enhance access to crucial healthcare products.⁷⁹
- ▶ **Public-Private Partnerships (PPPs):** PPPs, involving long-term contracts between private entities and governments for public services, leverage private expertise and capital. They benefit governments by sharing investment costs, boosting capacity and harnessing private sector efficiency. However, they require proactive monitoring to ensure quality, and come with a high engagement cost for business.⁸⁰

- ▶ **Innovation Ecosystems:** These are approaches that support the integration and scaling of effective health interventions into national systems. This approach is integral to the GFF's approach, as well as that of the [Health Innovation Exchange](#).
- ▶ **Social Impact Bonds and Development Impact Bonds:** These performance-based financing models, such as the [Ukrisht Impact Bond](#), promote effective, accountable programmes with verified results, making them suitable for projects with straightforward, measurable outcomes. However their high set-up costs mean they are not appropriate in all cases.
- ▶ **Leveraging Climate Finance:** Health care receives a meagre share of climate finance, despite the disproportionate impact of climate-related health issues on women, children and young people. Increasing the allocation from climate funds like the [Green Climate Fund](#) can unlock additional resources for this vital sector.

The health of women, children and young people is a vibrant area for investment. It offers innovation, actionable areas for collaboration between the public and private sectors, and numerous creative financing mechanisms.

What is now essential is the development of compelling investment cases that speak the language of both donors and private investors, ensuring resources are efficiently channelled into healthcare initiatives to drive sustainable development.



5. Key Principles to Guide Business Action

Across these action areas, **three central principles** emerge to guide business action:

1.

Rights-focused

Women, children and young people have a human right to the best attainable standard of health.

All companies can support this by advocating for universal access to health care and investing in the health of women, children and young people within their fields of influence. In the design of relevant programmes, products and services, companies should respect personal dignity and the broad spectrum of rights, and promote inclusion, participation, equality and non-discrimination. The voices of women and young people are essential to creating health systems that serve their needs.

2.

Government-led

Governments bear primary responsibility for realising the right to health for women, children and young people.

However, private sector support is essential given the scale of the challenge. There are growing opportunities for dialogue and collaboration between governments and the private sector. This will align actions, ensure that regulatory environments are conducive, help channel funds where they are most needed, and ensure that innovations meet governments' most pressing national health priorities.

3.

Systems-based

Achieving the right to health for women, children and young people requires systems-level change to strengthen health systems, rather than piecemeal solutions.

This will require cross-sectoral collaboration across communities; civil society; the private sector, including SMEs and MNCs; governments and regional and international bodies. It will require action across many industry sectors outside of health care to strengthen health systems and address social and environmental determinants of health.



6. Next Steps

The health of women, children and young people depends on our collective ability to harness the momentum of existing innovation, collaboration and finance, and convert it into tangible, sustainable progress.

Governments, businesses, investors and donors all have an important role to play alongside CSO partners. They can begin to build their strategies by considering the following key questions:

Governments, businesses, investors and donors all have an important role to play alongside CSO partners.



? Questions for Business

- ▶ What health challenges do women, children and young people in our ecosystem face, and how do they impact our business' core operations and value chains?
- ▶ How can we leverage our core expertise and networks, social philanthropy and advocacy voice to help strengthen health systems for women, children and young people?
- ▶ Which partnerships do I need to develop, and which coalitions can I join to maximise my impact?
- ▶ How can we better champion and support young leaders and women entrepreneurs?

? Questions for Investors

- ▶ How can we better demonstrate that the health of women, children and young people is material to business?
- ▶ How can we leverage active ownership to encourage MNEs to prioritise the health of women, children and young people in their business ecosystems, and develop metrics to assess performance?
- ▶ How can we provide joined-up, inclusive access to finance for social entrepreneurs, SMEs and MNEs and bridge funding gaps across the innovation lifecycle?
- ▶ How can we leverage creative mechanisms, such as blended finance and social impact bonds, to increase private sector investment?

? Questions for Governments

- ▶ How can we build the investment case for strengthening health systems for women, children and young people?
- ▶ How can we build internal capacity for engagement with the private sector and create structured opportunities for dialogue?
- ▶ How can we build supportive innovation ecosystems that enable innovation and identify and scale effective interventions that deliver on national health priorities?

? Questions for Donors

- ▶ How can we leverage grant finance to catalyse private sector innovation and investment?
- ▶ How can we help cultivate dialogue between the public and private sectors?
- ▶ How can we widen the investor pool by helping to bridge the language gap between the health and investment communities?



Call to Action

Improvements in the health of women, children and young people benefit us all: our communities, our economies and our long-term sustainable development.



Improvements in the health of women, children and young people benefit us all: our communities, our economies and our long-term sustainable development. What is more, the health of women, children and young people represents a vibrant ground for investment.

The private sector is uniquely positioned to help governments realise women, children and young people's rights to health, by working through their own fields of influence: core operations, philanthropy and advocacy. The key to success lies in adopting a rights-focused, government-led and systems-based approach that prioritises inclusivity, equity and broad access.

As this discussion paper shows, there is no shortage of innovation. Opportunities for public-private collaboration are increasing, and creative mechanisms for finance already exist. There is, sadly, no shortage of need: we are at a critical moment, as the global polycrisis threatens to reverse hard-won gains, and the health of women, children and young people is stagnating. What is needed now is better coordination of efforts, more finance, and for governments and businesses alike to prioritise the health of women, children and young people.



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Business Fights Poverty is a global business-led network that partners with companies to support the lives, livelihoods and access to learning of the most vulnerable people and communities. We have 17+ years' experience coordinating rapid collaborations that drive action, curating meaningful convenings to deepen relationships, and harnessing the collective learning of our 30,000+ community to unlock insights. At our centre is a group of leading global companies and a network of content partners from across the international development community.

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