



World Health  
Organization

---

European Region

# Meeting of WHO collaborating centres for child and adolescent health and sexual and reproductive health in the WHO European Region

Cologne, Germany, 16–17 May 2023

## ABSTRACT

A joint meeting of WHO collaborating centres (CCs) for child and adolescent health and sexual and reproductive health in the European Region was held in Cologne, Germany, on 16–17 May 2023, hosted by the Federal Centre for Health Education. This was the first opportunity for representatives of WHO CCs to meet across areas of work since February 2018. Recent developments in WHO were discussed, and the CCs presented updates on their areas of collaborative work with WHO. The main theme of the meeting was the priorities for each programme's strategies in the light of the most recent progress reports and the impact of the coronavirus disease (COVID-19) pandemic. This report presents a summary of the main points from the meeting.

**Keywords:** CHILD HEALTH; ADOLESCENT HEALTH; SEXUAL HEALTH; REPRODUCTIVE HEALTH; LIFE COURSE.

Document number: WHO/EURO:2023-7828-47596-70065

© World Health Organization 2023

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition: Meeting of WHO collaborating centres for child and adolescent health and sexual and reproductive health in the WHO European Region: Cologne, Germany, 16–17 May 2023. Copenhagen: WHO Regional Office for Europe; 2023". Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

**Suggested citation.** Meeting of WHO collaborating centres for child and adolescent health and sexual and reproductive health in the WHO European Region: Cologne, Germany, 16–17 May 2023. Copenhagen: WHO Regional Office for Europe; 2023. Licence: [CC BY-NC-SA 3.0 IGO](https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

**Cataloguing-in-Publication (CIP) data.** CIP data are available at <http://apps.who.int/iris>.

**Sales, rights and licensing.** To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <https://www.who.int/about/policies/publishing/copyright>

**Third-party materials.** If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

**General disclaimers.** The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters. All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

This publication contains the report of the meeting of WHO collaborating centres for child and adolescent health and sexual and reproductive health in the WHO European Region. Cologne, Germany, 16–17 May 2023, and does not necessarily represent the decisions or policies of WHO.



**World Health  
Organization**

---

European Region

**Meeting of WHO  
collaborating centres for  
child and adolescent health  
and sexual and  
reproductive health in the  
WHO European Region**

Cologne, Germany, 16-17 May 2023

## CONTENTS

*Page*

|                                                                               |    |
|-------------------------------------------------------------------------------|----|
| Acknowledgements.....                                                         | v  |
| Abbreviations.....                                                            | vi |
| 1. Background and rationale.....                                              | 1  |
| 1.1 Aims and objectives.....                                                  | 1  |
| 2. Day 1 – SRH and CAH programmes.....                                        | 2  |
| 2.1 Opening and welcome .....                                                 | 2  |
| 2.2 Updates from the WHO Regional Office for Europe and WHO headquarters..... | 2  |
| 2.3 Outcomes of the last WHO CC meeting .....                                 | 4  |
| 2.4 Poster session – overview of WHO CCs .....                                | 4  |
| 3. Group work – a review of strategies.....                                   | 5  |
| 3.1 CAH group feedback.....                                                   | 5  |
| 3.2 SRH group feedback.....                                                   | 6  |
| 4. Day 2 – Cross-cutting themes.....                                          | 8  |
| 4.1 Plenary session .....                                                     | 8  |
| 4.2 Group work (feedback).....                                                | 8  |
| 5. Conclusions, next steps and close .....                                    | 10 |
| 5.1 Actions on CAH .....                                                      | 10 |
| 5.2 Actions on SRH .....                                                      | 11 |
| References.....                                                               | 12 |
| Annex 1 Current and potential WHO CCs and current collaborating study.....    | 13 |
| Annex 2 Programme.....                                                        | 29 |
| Annex 3 Meeting participants .....                                            | 32 |

## **Acknowledgements**

The WHO Regional Office for Europe would like to thank the Federal Centre for Health Education in Cologne, Germany, for hosting the 2023 joint meeting of the WHO collaborating centres for child and adolescent health and sexual and reproductive health.

## Abbreviations

|        |                                                                  |
|--------|------------------------------------------------------------------|
| AA-HA! | Accelerated Action for the Health of Adolescents                 |
| ANC    | Antenatal care                                                   |
| CC     | Collaborating centre                                             |
| CAH    | Child and adolescent health                                      |
| CS     | Caesarean section                                                |
| HBSC   | Health Behaviour in School-aged Children                         |
| HRP    | Human Reproduction Programme                                     |
| MATE   | Midwifery Assessment Tool for Education                          |
| MCA    | Maternal, newborn, child and adolescent health and ageing        |
| SDG    | Sustainable Development Goal                                     |
| SRH    | Sexual and reproductive health                                   |
| ToRs   | Terms of reference                                               |
| UNESCO | United Nations Educational, Scientific and Cultural Organization |
| UNFPA  | United Nations Population Fund                                   |
| UNICEF | United Nations Children's Fund                                   |

## 1. Background and rationale

The WHO Regional Office for Europe has a history of organizing meetings for WHO collaborating centres (CCs) within the areas of child and adolescent health (CAH) and sexual and reproductive health (SRH) to provide a networking opportunity for staff, WHO CCs and other partners with a common focus to advance the work within the Region. A list of current and potential WHO CCs, with details of some of their work, is provided in Annex 1. Joint meetings between the two sister programmes commenced in 2016 in Copenhagen, Denmark. The plan was to continue these in alternate years, and the second was held in Edinburgh, United Kingdom, in 2018. A further meeting was planned for 2020, but it was cancelled because of the coronavirus disease (COVID-19) pandemic, and rearranged for May 2023 in Cologne, Germany.

Population health and well-being have been adversely affected during the COVID-19 pandemic. The disruption to social, educational, emotional, economic and individual freedoms has had a particularly negative impact on children and young people. In relation to SRH, access to health services and availability and uptake of antenatal care (ANC) – particularly for vulnerable groups – have been especially affected. Without action, social inequalities in CAH and SRH will continue to increase.

Previous plans needed review and updating in the light of the impact of the COVID-19 pandemic and findings from the most recent progress reports on CAH and SRH in the WHO European Region. A joint WHO CC meeting presented an opportunity to inform the key areas of focus in the draft European strategy for CAH and WHO's action plan for SRH (1).

### 1.1 Aims and objectives

The meeting provided an opportunity for current and potential WHO CCs to network, present their work and discuss the challenges ahead, with an emphasis on the impact of COVID-19 and current geopolitical events and humanitarian crises on children and young people, and on SRH. It was also a chance to identify and discuss cross-cutting themes for CAH and SRH. The meeting programme is available in Annex 2.

The main objectives of the meeting were:

- to provide an update for the WHO CCs on the activities of the WHO Regional Office for Europe and WHO headquarters in the areas of SRH and CAH;
- to provide an opportunity for WHO CCs to share information about their activities and participate in both formal and informal opportunities for networking;
- to discuss clinical aspects of SRH, including operational research for caesarean section (CS) reduction and operationalization of maternal and perinatal death surveillance and response (including near-miss case review, perinatal death audit and confidential enquiry into maternal death) (2);
- to review a draft European strategy for CAH, to cover the period to 2030 under the Sustainable Development Goals (SDGs), and discuss the need for updates in the light of COVID-19 and humanitarian crises; and
- to discuss and develop cross-cutting themes and monitoring mechanisms to aid implementation of SRH and CAH strategies in the WHO European Region.

The joint WHO CC meeting brought together 33 participants representing 16 current CCs (nine in the field of CAH and seven in the field of SRH) and a further six potential CCs (five in the field of

CAH and one in the field of SRH) from across the WHO European Region. It was also attended by staff from WHO headquarters (three attendees online) and the WHO Regional Office for Europe (five attendees). The list of participants is provided in Annex 3.

## **2. Day 1 – SRH and CAH programmes**

### **2.1 Opening and welcome**

The meeting was opened by Martin Dietrich, Acting Director of the Federal Centre for Health Education, Cologne, Germany, who welcomed the participants. Natasha Azzopardi-Muscat, Director of Country Health Programmes and Systems at the WHO Regional Office for Europe, welcomed participants on behalf of WHO, thanked them for their continued engagement and outlined how important the CCs are to WHO's work.

### **2.2 Updates from the WHO Regional Office for Europe and WHO headquarters**

The programme managers for CAH and SRH, Martin Weber and Oleg Kuzmenko, provided updates on CAH and SRH in the WHO European Region.

Martin Weber gave an overview of the CAH programme over the past three years. This included its current organization, recent progress reports and work on the draft European strategy for CAH. The presentation provided the following:

- an overview of the organization, reach and staffing of the programme;
- an update on the progress reports in 2018 and 2021 (3,4) on the situation of CAH in Europe (tracking progress against the European strategy 2015–2020 (5));
- an update on the technical briefing on CAH reported to the 70th session of the WHO Regional Committee for Europe in 2020;
- the history of how the WHO CCs worked on a new European strategy for CAH in 2019 and how problems in child and adolescent health were articulated as problem statements in a consistent way;
- the current draft European strategy for CAH and the plan for this to become a regional strategy or action plan to 2030 under the SDGs;
- an update on the pocket book of primary health care for children and adolescents launched in March 2022 (6);
- an update on the Schools for Health in Europe Network, which aims to make health-promoting schools an integral part of policy development in education and health sector; and
- an overview of the updated regional adaptation of the Accelerated Action for the Health of Adolescents (AA-HA!) framework (7) undertaken by Public Health Scotland, United Kingdom.

Oleg Kuzmenko gave a presentation on the SRH programme. Key points included:

- an update on WHO's action plan for SRH (1) which is the main guiding document for the Region (updated on progress measured in the 2018 and 2021 progress reports and country profiles);
- the need to extend the activities that support implementation of the action plan for SRH until 2030 and for a resolution to be proposed to the 74th session of the WHO Regional Committee for Europe in 2024;



- an update on production of the pocket book on maternal and newborn health at the primary care and hospital levels;
- an update on implementation research on CS reduction in selected countries and a regional meeting on reducing unnecessary CSs;
- an update on work to strengthen the role of midwives (including education, competencies and midwifery-led care);
- an overview of regional guidelines, including training and dissemination of materials (on topics such as regionalization of maternal and perinatal care, preconception care and shoulder dystocia);
- an update on work on kangaroo mother care, particularly in high-income settings; and
- an update on work on revision of comprehensive sexuality education standards and a bedside application for emergency obstetric care (a digital tool designed to support health-care providers operating within obstetrics care facilities).

An update from WHO headquarters was provided by Anshu Banerjee, Director of the Department of Maternal, Newborn, Child and Adolescent Health and Ageing (MCA). New strategic directions were outlined as follows:

- for maternal and newborn health – efforts to prevent stillbirths, low birth weight and prematurity, and address birth defects;
- for child health – risk-differentiated approaches to preventable child mortality; addressing priority health needs of children aged 5–9 years; and promoting well care services for childhood development;
- for adolescent health – the AA-HA! framework for adolescent well-being; school health and school health services; and digital solutions for adolescent-responsive primary care;
- for MCA and nutrition – integrating nutrition and mental health interventions into MCA services; and
- for the health workforce – enhancing capacity for midwifery and neonatal nursing to improve MCA outcomes.

An update from WHO headquarters on SRH and the Human Reproduction Programme (HRP) was provided by Özge Tuncalp, Medical Officer for the HRP, who highlighted that the primary areas of work for SRH and the HRP are:

- comprehensive abortion care
- contraception and fertility care
- SRH integration in health systems
- maternal and perinatal health
- rights and equality across the life-course
- sexual health and well-being across the life-course
- research leadership and knowledge management.

Strategic, emerging and responsive initiatives are under way, including on SRH in emergency response – such as outbreaks; the impact of climate change; and partnerships, communications, political analysis and engagement.

It was highlighted that many of these activities are in collaboration with partners, and that more engagement with the WHO CCs in the European Region on development, dissemination and uptake of these norms and standards will be important.

### **2.3 Outcomes of the last WHO CC meeting**

Eileen Scott, WHO CC for Health Promotion and Public Health Development, Public Health Scotland, United Kingdom, presented the outcomes of the last joint meeting of the WHO CAH and SRH CCs in 2018 in Edinburgh, United Kingdom. She gave a review of recommendations and progress.

- On the quality of sexuality education for children and adolescents (relevant to CAH and SRH), the meeting recommended developing a plan for evaluation and implementation of the draft European strategy for CAH and exploring the potential for supporting training tools. This action was complete.
- The meeting recommended supportive supervision for quality of care in maternal, child and neonatal health services. This action was complete.
- The meeting recommended future-proofing the draft European strategy for CAH and the need for another strategy to align with the SDGs. This action formed the main content of the 2019 CAH CCs meeting.
- The meeting recommended publication of the 2018 progress report and an accompanying peer-reviewed paper in the *Lancet*. This action was complete (8).
- The meeting recommended regional adaptation of the AA-HA! guidance (7). This was presented in the Republic of Moldova in October 2018, and learning taken from this event was the positive example of youth participation. This has led to the consideration of how to ensure youth participation during the development process of the new strategy.
- The meeting recommended connecting more with the Health Behaviour in School-aged Children (HBSC) study and feeding the findings back into schools. This action has been piloted in some areas. Collaborative working between WHO, the Schools for Health in Europe Network and the HBSC study team was undertaken with schools, teachers and students to see how the findings informed practice.

The meeting provided a useful forum for discussion about ongoing strategic development and updates on work activity of the WHO Regional Office for Europe, WHO headquarters and the WHO CCs. CAH CCs met again in February 2019 in Edinburgh, United Kingdom. This meeting further developed plans for strategic development, and the resulting actions led to a process of youth participation and for developing the draft European strategy for CAH.

### **2.4 Poster session – overview of WHO CCs**

The participants were asked to present briefly the work they are delivering as a designated or potential WHO CC. Of the 22 WHO CCs in attendance, 5 presented online and 17 presented posters. A list of the attending CCs and a summary of current work (or proposed work for potential CCs) is provided in Annex 1.

### 3. Group work – a review of strategies

#### 3.1 CAH group feedback

This session gathered feedback on the draft European strategy for CAH and development: delivering for children and adolescents – meeting the SDGs in the WHO European Region by 2030. (The strategy had been circulated to the participants prior to the meeting.) Participants made the following key points.

- The strategy is largely headed in the right general direction, but some specific areas need work, taking into consideration the pandemic and other changes that have occurred over past few years.
- Other areas are lacking: the strategy needs to be more explicit about its content to orient people, and about where details are missing “on purpose” (such as specific aspects of young people’s health and well-being that might fall under the remit of a different WHO regional strategy, such as SRH).
- The strategy may need to provide a better explanation of a “life-course approach”.
- The strategy needs to consider reframing health as “health and well-being” to shift focus away from the current medicalized framework. This is also consistent with the Ottawa Charter for Health Promotion (9) definition of health.
- It is important to change mindsets and move away from health silos – for example, climate change is a significant issue for CAH but needs multisectoral action.
- There is a need to consider how bold the strategy can be, given the trade-off between the number of countries that sign up versus bolder action that might be more effective.
- The strategy is an important advocacy tool and needs to be hard to ignore.

The following new key areas were identified:

- clinical capacity – the health system and workforce crisis;
- the role of education in health, which was highlighted by the pandemic, although it goes beyond this;
- the commercial determinants of health and well-being that affect a wide range of risk factors – such as tobacco, alcohol, gambling and digital media;
- the need to articulate the reasons for a life-course approach; and
- the impact on vulnerable populations (for example, shining a light on areas where there is currently very little focus).

Possible criteria for prioritizing the content of the strategy were discussed:

- evidence – in terms of efficacy, cost-effectiveness and economics of prevention;
- severity – using data on severity such as strength of association or burden of disease;
- uniqueness – what this approach offers to countries that does not add to their burden or duplicate effort; and
- reach – the proportion of the population affected by certain exposures and the proportion that can benefit from certain interventions.

Action for WHO CCs includes sharing any further feedback, thoughts and ideas on the strategy with the WHO Regional Office for Europe CAH team.

### **3.2 SRH group feedback**

The SRH group focused its discussions on two areas: reduction of unjustified CSs and operationalization of the ANC model. Opportunities for further joint work in these areas were also discussed.

CS rates vary considerably across countries and across regions/maternity units within countries, with no clear justification for indication (ranging from 16% to 50% and even higher in some institutions – particularly in private obstetrics/gynaecology care). Women’s choice is cited as the reason for increased CS numbers in some areas, but clear information and informed choice or shared decision-making do not appear to be available. “Safety” is often used as the reason to justify a CS (safety for baby and/or woman) but the clinical indications do not always fit with this reason. Safety involves not just physical safety; psychological, emotional, cultural and spiritual safety must be considered. CS is major surgery that has implications for the long-term health of both mother and baby, and specifically for future births.

The data are inconsistent, and no single report compares modes of birth and outcomes. It is apparent that no single mapping tool is used consistently across countries. Awareness-raising of the variation in CSs and intervention rates is important, with clear evidence for the reasons this needs to be tackled across countries. There appears to be a lack of focus on the physiology of birth and how this should be the basis for all clinical decisions, as opposed to financial and service-driven interventions that are evident in some regions. Induction of labour is becoming more widespread, with increasing rates, without clear clinical indication or robust informed choice and shared decision-making with women. This leads to further intervention during labour and birth.

Many countries are now using the Robson classification (the global standard for assessing, monitoring and comparing CS rates both within and between health-care facilities) as a quality indicator to report on the reasons for CSs, but this needs to be applied to every woman who enters the service at term. Comparison also needs to be made of the indicators for the type of birth and justification for interventions.

Excellent examples of multidisciplinary team working – where joint training and education of obstetricians and midwives, as well as anaesthetists and neonatologists, takes place so that respect is generated within and across the multidisciplinary team – are available in many regions.

Key points arising from discussion on reduction of CSs include the following.

- Given the “epidemic” of high levels of CS in countries across the WHO European Region, the work related to reduction of unjustified CS needs to be prioritized at the highest level for all WHO CCs. Azerbaijan, Cyprus, Greece and Poland have the highest CS levels in the Region.
- There is no one source of comprehensive information regarding CSs in the WHO European Region. The group proposed conducting a short survey/data collection exercise across the Region to gather the most recent information. Such data will show main gaps and areas for further focus for all WHO CCs.
- Wider use and strengthening of midwifery-led care, along with strengthening trust in normal delivery among both health-care providers and the overall population, are among the most promising interventions in reduction of unjustified CSs.

- Prior to implementing any clinical or non-clinical interventions aimed at reducing unnecessary CSs, each country would need to conduct a short implementation survey to identify the most promising interventions, and then develop detailed action plans based on their results.
- Representatives of the European Board and College of Obstetrics and Gynaecology and the WHO CC in Perinatal Health, Institute for the Care of Mother and Child, Prague, Czechia, expressed their readiness to support interested countries in introducing the Robson classification, analyse current Robson classification use and develop recommendations on further actions.

The group recommended a number of actions to reduce CS and intervention rates.

- The WHO Regional Office for Europe should undertake a mapping exercise across the Region to report on CS rates and other interventions, as well as birth outcomes. This needs to be completed urgently to form a baseline dataset.
- There is a clear need for a standardized data collection tool. A country-based tool/survey should be developed that is completed annually or every two years and the data submitted to the Regional Office for comparison across the Region.
- It is important to advise on, educate about and implement the Lancet quality maternal and neonatal care framework (10) in every country to facilitate midwifery care. This requires robust education, regulation, licensing of midwives as autonomous professionals, and clear insurance processes for midwives to work as part of multidisciplinary teams.
- Evidence on the effectiveness of midwife-led interventions (11) should be collected and the findings implemented.
- The Regional Office should advise and support the evidence on the implementation of midwifery-led models of care and continuity of midwifery care, and develop a regional implementation plan.
- Countries need to commit to further multidisciplinary team education on physiological labour and birth, as well as training on physiological breech birth.
- Multidisciplinary team teams need to undertake education and training together. They should review the Robson classification in their individual units, consider the standard deviation across regions, and learn lessons to reduce intervention rates and promote safety.
- WHO should develop evidence-based guidelines and/or a pocket book providing information and counselling on CS and induction of labour and interventions.
- Ideas for future research project questions include:
  - What are the differing cultural and social factors that affect CS rates?
  - Do women have truly informed choice in decisions about CSs, and what affects those choices?
  - What is the difference between the public and private sectors in terms of CS rates and what are the reasons for this?

The group also discussed operationalization of the ANC model. There is no comprehensive WHO guideline on ANC. The most recent guideline recommends the eight contacts model but does not describe the full content of each visit – for example, information on blood pressure and blood glucose measurements is missing – and has to found in other guidelines.

Group members highlighted the high importance of developing a pocket book on maternal and neonatal care for health-care providers working in primary care and hospital settings. It is crucial to collect all the information on effective evidence-based interventions during pregnancy (which is currently dispersed in different guidelines) and present it all in such a way that each health-care

professional can find all manipulations that should be undertaken during each antenatal visit for a normal pregnancy, as well as what to do or where to refer a woman if abnormalities are identified. This could facilitate unification of ANC provision across the WHO European Region and lead to better pregnancy experiences and outcomes.

## **4. Day 2 – Cross-cutting themes**

### **4.1 Plenary session**

The day's sessions began with a presentation on WHO CCs, including the process of designation and in-country implementation. Donna Zilstorff, Technical Officer for CCs at the WHO Regional Office for Europe, informed the meeting that there are 269 CCs in the WHO European Region across 34 Member States. The key questions she posed for participants to consider were:

- How could WHO CCs be more effective at the country level?
- How can the country impact of deliverables be boosted?
- What is needed to increase the technical capacity of WHO CCs to be more effective at country level?

Emilie Peeters from the WHO CC for Research on Sexual and Reproductive Health, International Centre for Reproductive Health, Ghent University, Belgium, gave a presentation on the work from the Academic Network on Sexual and Reproductive Health and Rights Policy on how the network derived evidence-based indicators to monitor the implementation of WHO's action plan for SRH (1). It was highlighted that this process may be helpful to other programmes as they devise indicators.

### **4.2 Group work (feedback)**

In this session participants could choose any of the following cross-cutting themes to explore using open space methodology – a technique with which participants create and manage the agenda themselves:

- building on youth participation experience in CAH
- funding opportunities
- supporting WHO work in countries (implementation of action plans)
- monitoring/indicators.

#### ***4.2.1 Building on youth participation experience in CAH***

The discussion was led by Saoirse Nic Gabhainn, WHO CC for Health Promotion Research, National University of Ireland Galway, Ireland. The group discussed the importance of terms such as “children”, “young people” and “adolescents”: although these are used interchangeably, this can be unhelpful. True youth participation and the methods required were discussed. It was agreed that the team would write an article on youth participation.

Next, the group discussed issues around the representativeness of young people who decide or are encouraged to give feedback in youth participation exercises. Concerns were raised that there is often bias in terms of age (with older young people tending to participate) and socioeconomic status (with higher status over-represented). Solutions in terms of having more of a democratic process to elect young people to a youth parliament – like the process in Ireland – and financial incentives were discussed.

#### **4.2.2 Funding opportunities**

No participant elected to join this group.

#### **4.2.3 Supporting WHO work in countries (implementation of action plans)**

The discussion was led by Adam Devall, WHO CC for Global Women's Health, Institute of Metabolism and Systems Research, University of Birmingham, United Kingdom. The group debated how the current processes for implementation have a limited approach in terms of prioritization. The current practice is reactive as opposed to proactive: some countries know how to access the WHO CC network, but most do not know that these resources are available. Therefore, the group considered creating a case study to discuss how an education programme could be implemented more rigorously. The case study would use the example of an education programme to implement the *Pocket book of primary health care for children and adolescents (6)*, targeting the region of central Asia, with the aim of capacity-building for implementation of recommended best practice through training.

The group discussed how virtual technical teaching hubs could be established, which would follow terms of reference (ToRs) established for each training stream. Various technical streams could be developed for countries to access, and capacity-building could be put in place for data collection at the local and national levels. The data collection would be very important for monitoring and evaluation of outcome improvements, and would facilitate a quality improvement cycle for the education programme. Local teams could be empowered to deliver training and take local responsibility, with a "train the trainers" programme to enable widespread dissemination of lessons learned. To implement this work, the group identified that external funding would be required to establish the training platform. The possibility of submitting applications to funders such as the EU or other foundations (such as the Bill and Melinda Gates Foundation), or of direct funding from countries via WHO was discussed.

#### **4.2.4 Monitoring/indicators**

The discussion was led by Alina Cosma, Consultant at the WHO Regional Office for Europe. The group work started with an exploration of the importance of having standardized measures and reporting across WHO CCs and Member States in the WHO European Region, for both CAH and SRH. This could be supported by standardized data collection protocols and validated survey measures for cross-national comparisons.

Another important point discussed was around conceptualizing "vulnerable groups" and how these could be better addressed and embedded in current surveillance instruments and mechanisms. The conceptualization should be kept generic so that each country can include specific indicators (especially around ethnicity, migration, gender and so on).

The group also discussed the importance of digitalization of health data. An important step forward would be to support countries in the process of digitalization of their national health data. Also, where available, use of data linkages between national survey and health records should be encouraged.

Awareness of WHO CCs and use of WHO data were discussed, especially in relation to mobilizing action within countries. Following the meeting the following WHO data sources were circulated to the WHO CCs:

- the WHO European Health Information Gateway (12)

- WHO COVID-19 Dashboard (13)
- WHO Global Health Observatory (14).

Finally, the group suggested that the WHO CC network could be used to promote existing data, processes, resources and experience. This would empower both WHO CCs and country offices in their mandates. Particular focus was placed on continuous sharing of information around existing data, and how this could be used.

## 5. Conclusions, next steps and close

The meeting was a useful forum for discussion around a draft updated European strategy for CAH to 2030 and on progression of the WHO action plan for SRH (1). It provided an opportunity to hear updates from the WHO Regional Office for Europe, WHO headquarters and the WHO CCs on recent work activity, and for informal networking.

### 5.1 Actions on CAH

The priority for CAH is to finalize the draft European strategy for CAH by winter 2023 for approval at the 74th session of the WHO Regional Committee for Europe in 2024.

Actions to be taken include:

- further development of the draft strategy (considering indicators, SDGs and data) by summer 2023, in consultation with the relevant programme managers at the WHO Regional Office for Europe;
- mapping the strategy to existing programmes and indicators;
- including priority areas for action highlighted by the 2021 progress report (4) on the situation of CAH in Europe (such as obesity, breastfeeding, adolescent mental health, child development data and availability of data on vulnerable populations);
- including the youth consultation process in the draft strategy in late 2023;
- undertaking Member State consultation by the end of 2023/early 2024;
- preparing a final draft in early 2024;
- checking and making final amendments at next year's WHO CAH CC meeting;
- developing a communications plan to encourage Member States to engage with the consultation on the draft European strategy for CAH;
- developing an implementation plan for the CAH programme team;
- finalizing the strategy by June 2024, following consultation and feedback; and
- ensuring that the strategy is on the agenda for the WHO Regional Committee for Europe in 2024.

The strategy should be:

- **actionable** – broad enough to be inclusive of all countries but not so broad that it is meaningless in terms of actions that can realistically be taken;
- **concise** – not too long;
- **peer-reviewed** by experts via email and online meetings;



- **in English** for early drafts but to be translated later into other United Nations languages (including Russian);
- clear in outlining the **key headline/priority areas** for CAH; and
- presented in the context of the **wider determinants of health and life-course**.

#### ***5.1.1 Actions for CAH CCs***

- WHO CCs are to provide feedback on iterations of the draft European strategy for CAH and, where applicable, to author and edit sections.
- The WHO CC for Health Promotion Research, National University of Ireland Galway, Ireland, is to write an article on youth participation.

### **5.2 Actions on SRH**

The priorities for SRH are reduction of unjustified CSs and operationalization of the ANC model. Actions to be taken include the following.

- A short survey (with very limited number of questions) should be conducted among all 53 countries in the WHO European Region to acquire the most recent information – by country – on CS rates, use of Robson classification (yes/no and at what level – national or subnational), use of analysed data for decision-making and dissemination of results. Such data will highlight the main gaps and areas for further focus for all WHO CCs.
- A regional conference should be organized on reduction of unjustified CSs in 2024 to present the survey results to a wider group of experts, assess progress since the first such conference (held in Tbilisi, Georgia, in 2018), identify further steps in this direction and formalize commitments to further action through a conference statement.
- During development of a pocket book on maternal and newborn care for health-care providers working in primary and hospital levels, the chapter on ANC should include a clear algorithm of health-care professional actions during each ANC contact (including what to do and how to react if something abnormal is identified).
- Once developed, the pocket book should be disseminated widely, including provision of training on its use and support to countries in its adoption (using the WHO CC network and the European Board and College of Obstetrics and Gynaecology as potential main partners in the pocket book development process).

## References<sup>1</sup>

1. Sixty-sixth Regional Committee for Europe: Copenhagen, 12–15 September 2016: action plan for sexual and reproductive health: towards achieving the 2030 Agenda for Sustainable Development in Europe – leaving no one behind. Copenhagen: WHO Regional Office for Europe; 2016 (<https://apps.who.int/iris/handle/10665/338130>).
2. Maternal and perinatal death surveillance and response: materials to support implementation. Geneva: World Health Organization; 2021 (<https://apps.who.int/iris/handle/10665/348487>).
3. Situation of child and adolescent health in Europe. Copenhagen: WHO Regional Office for Europe; 2018 (<https://apps.who.int/iris/handle/10665/342237>).
4. Situation of child and adolescent health in Europe. Copenhagen: WHO Regional Office for Europe; forthcoming.
5. Sixty-fourth Regional Committee for Europe: Copenhagen, 15–18 September 2014: investing in children: the European child and adolescent health strategy 2015–2020. Copenhagen: WHO Regional Office for Europe; 2014 (<https://apps.who.int/iris/handle/10665/337284>).
6. Pocket book of primary health care for children and adolescents: guidelines for health promotion, disease prevention and management from the newborn period to adolescence. Copenhagen: WHO Regional Office for Europe; 2022 (<https://apps.who.int/iris/handle/10665/352485>).
7. Global accelerated action for the health of adolescents (AA-HA!): guidance to support country implementation. Geneva: World Health Organization; 2017 (<https://iris.who.int/handle/10665/255415>).
8. Alemán-Díaz AY, Backhaus S, Siebers LL, Chukwujama O, Fenski F, Henking CN et al. Child and adolescent health in Europe: monitoring implementation of policies and provision of services. *Lancet Child Adolesc Health*. 2018;2(12):891–904. doi:10.1016/S2352-4642(18)30286-4.
9. Ottawa Charter for Health Promotion, 1986. Copenhagen: WHO Regional Office for Europe; 1986 (<https://apps.who.int/iris/handle/10665/349652>).
10. Renfrew MJ, McFadden A, Bastos MH, Campbell J, Channon AA, Cheung NF et al. Midwifery and quality care: findings from a new evidence-informed framework for maternal and newborn care. *Lancet*. 2014;384(9948):1129–45. doi:10.1016/S0140-6736(14)60789-3.
11. Nove A, Friberg IK, de Bernis L, McConville F, Moran AC, Najjemba M et al. Potential impact of midwives in preventing and reducing maternal and neonatal mortality and stillbirths: a Lives Saved Tool modelling study. *Lancet Glob Health*. 2021;9(1):e24–e32. doi:10.1016/S2214-109X(20)30397-1.
12. European Health Information Gateway [website]. Copenhagen: WHO Regional Office for Europe; 2023 (<https://gateway.euro.who.int/en/>).
13. WHO Coronavirus (COVID-19) Dashboard [website]. Geneva: World Health Organization; 2023 (<https://covid19.who.int/>).
14. Global Health Observatory [website]. Geneva: World Health Organization; 2023 (<https://www.who.int/data/gho>).

---

<sup>1</sup> All references accessed 19–21 September 2023.

## *Annex 1*

# **CURRENT AND POTENTIAL WHO CCs AND CURRENT COLLABORATING STUDY**

### **Current CAH CCs**

#### ***WHO CC for Research in Education and Health, Clermont Auvergne University, Clermont-Ferrand, France***

The WHO CC is coupled with the United Nations Educational, Scientific and Cultural Organization (UNESCO) Chair of Global Health and Education. Its vision is to create the conditions for children and young people to take charge of their lives as individuals, members of their community and global citizens for all matters related to health.

The WHO CC's aim is to support the WHO Regional Office for Europe in the promotion of research and training, to contribute to building, interpreting and disseminating research data in the fields of prevention, promotion and health education in schools, communities (cities, districts, villages) and regions. Its ToRs are to:

- support WHO in strengthening the knowledge base by enhancing research capacity within the Member States;
- assist WHO in the dissemination of information by making research syntheses and translating research findings into intersectoral policies and practices in different national and social contexts; and
- contribute to WHO's capacity-building efforts in the area of children and young people's health in school settings and the community.

Its focus is on reducing health inequalities through education; the main topics are noncommunicable disease prevention, sexuality education and promotion of mental health and well-being. The activities are structured around four core activities:

- mapping research groups
- strengthening the knowledge base
- building capacity
- communicating and sharing knowledge.

In the past four years, the WHO CC has started to build a global community of researchers, politicians and practitioners in the fields of health prevention, promotion and education. Over 3000 people from all regions of the world are currently members of its community. A mapping activity was undertaken, focusing on a bibliometric review of the latest research on school health promotion globally. The work was done in collaboration with Nazarbayev University in Kazakhstan and Maastricht University in the Kingdom of the Netherlands. An article will be published in a peer-reviewed scientific journal in 2023.

With the aim of strengthening knowledge in the field, volume 1 of the *Global handbook of health promotion research* was published in 2022.<sup>1</sup> This includes original contributions from 173 researchers from 72 countries, and aims to explore the key theoretical, methodological, empirical and policy challenges, and pressing social issues facing health promotion research. Volume 3 was published in 2023.<sup>2</sup>

In 2020 and 2021 two global surveys on schools and COVID-19 were carried out. A research consortium of over 20 research institutes and global networks is involved in the project. Several articles will be published in 2023. The head of the WHO CC was a member of the WHO Technical Advisory Group on Safe Schooling during the COVID-19 pandemic.

The Global health and education webinar series was launched in May 2020. Since then, regular webinars have been organized in French, English, Spanish and Persian, and recordings are available on the WHO CC's website. The CC also contributed to a French online course on human rights and sexual health, and developed the first three modules of an international online course on health promotion, which are being used in the degree in health promotion curriculum in Senegal. The WHO CC has organized an annual online global community health annual workshop since 2021. In 2022 over 300 participants registered. Recordings of the presentations are also available on the CC's website. The WHO CC also supports cities in the development of health learning pathways.

Priorities include building the global community further, the launch of the second mandate of the WHO CC and UNESCO Chair in October 2023, publishing volume 2 of the *Global handbook of health promotion research*, developing multilingual factsheets on schools and on resilience to crises, and developing the international online course on health promotion.

---

***WHO CC for Evidence-Based Public Health, Institute for Medical Information Processing, Biometry and Epidemiology, Ludwig-Maximilians University Munich, Germany***

The WHO CC's ToRs, as requested by WHO and under its leadership, are to:

- provide technical support for implementing a complexity perspective to WHO's development and implementation of guidelines addressing public health or health system questions; and
- provide support to WHO in the consideration of criteria, such as acceptability and feasibility, throughout the development process of guidelines addressing public health or health system questions.

The main areas of work of the WHO CC in 2020–2023 were:

- the COVID-19 pandemic – producing living rapid reviews
- the COVID-19 pandemic – supporting evidence-informed decision-making
- providing methodological guidance for evidence-based guidelines.

---

<sup>1</sup> Potvin L, Jourdan D, editors. *Global handbook of health promotion research, volume 1: mapping health promotion research*. Cham: Springer; 2022.

<sup>2</sup> Jourdan D, Potvin L, editors. *Global handbook of health promotion research, volume 3: doing health promotion research*. Cham: Springer; 2023.

***WHO CC for Health Promotion Research, National University of Ireland Galway, Ireland***

The institution has been a WHO CC since 2009 and was last redesignated in 2021. It is linked directly with both the WHO Regional Office for Europe and WHO headquarters. Its current ToRs are to:

- support implementation of WHO's Thirteenth General Programme of Work 2019–2023, with particular reference to the recommendations from the Tenth Global Conference on Health Promotion for Well-being, Equity and Sustainable Development; and
- support WHO in the development and implementation of the health across the life-course strategy.

Its commitments comprise five specific activities, each led by principal investigators within the WHO CC. They include activities that focus on mental health promotion, health literacy, healthy environments and CAH:

- production of a briefing paper on effective strategies for enhancing subjective well-being;
- production of a technical background paper on best practices for enhancing the health literacy and well-being of communities, with a particular focus on the most vulnerable communities;
- production of an evidence-based technical paper to promote healthy environments in partnership with the Healthy Cities and Communities Network;
- supporting youth participation in activities in the WHO European Region; and
- contributing to the international leadership of the HBSC study.

Members of the WHO CC also contribute to the work of WHO on an ad hoc basis, providing advice and support for emerging projects, attendance at WHO meetings and membership of technical advisory groups, and reviewing WHO documents during the drafting phase of development. They also contribute to WHO in CAH, with various research outputs relevant to this work, focused on mental health promotion, child and adolescent participation processes and the HBSC study.

Although the WHO CC does not focus on specific SRH activity in the current designation, members have considerable expertise in sexual health promotion and in collection, analysis and knowledge translation of population sexual health data.

---

***WHO CC for Maternal and Child Health, Unit for Health Services Research and International Health, Istituto per l'Infanzia IRCCS Burlo Garofolo, Trieste, Italy***

The WHO CC mostly works on quality of care, which has been its main topic for the last 20 years. Its ToRs are to:

- participate in research activities, under WHO leadership, for the development and assessment of appropriate technologies and interventions related to WHO programmes and initiatives on maternal, newborn, child and adolescent health, including child health and environment;
- develop and field test guidelines and training materials, at WHO's request, on the use of appropriate technologies and interventions related to WHO programmes and initiatives on maternal, newborn, child and adolescent health, including child health and environment; and

- support WHO with the introduction, implementation and evaluation at the country level of WHO programmes, plans and initiatives related to maternal, neonatal and child health.

Key activities include eight major ongoing projects related to the quality of maternal and newborn care, including:

- a project in 23 countries to document the quality of the maternal and newborn health care;
- a multicountry project in Brazil and Italy to improve adherence to WHO standards for quality of care for paediatric health;
- a multicountry project in Brazil, Italy, Sri Lanka and Tanzania, with the aim of empowering parents with children and newborns admitted to neonatal intensive care units;
- a quality improvement project ongoing in all maternity units of the Friuli-Venezia Giulia Region in Italy; and
- a project in four African countries to improve the quality and use of newborn data.

The WHO CC also conducts epidemiological research and systematic reviews, and has been involved in over 30 assessments of quality of care in many European countries, as well as in other regions.

The WHO CC has so far provided technical support for development of about 40 WHO products, including over 20 guidelines, quality assessment and improvement tools, indicators and manuals, and training packages – such as the essential newborn care course recently launched at the Align Maternal and Newborn Health Conference and the International Confederation of Midwives. Staff of the WHO CC also contribute to several official technical boards of WHO and the United Nations Children’s Fund (UNICEF) in relation to MCA indicators.

---

### ***WHO CC for Health Promotion and Education, University of Bergen, Norway***

The WHO CC’s ToRs are to:

- support WHO’s work and activities in the HBSC research network – particularly with data collection and documentation at that national and regional levels;
- support WHO’s work by managing and maintaining the international databank of the HBSC study; and
- provide technical input to inform WHO’s work on health promotion and health education research-related areas in the area of school health.

The WHO CC is the data management centre of the HBSC study. In this role it supports the WHO Regional Office for Europe as a key partner of the study by assisting HBSC countries in planning and performing data collection in accordance with the protocol of the study. For the 2021/22 survey the WHO CC asked countries to fill in sampling forms and progress reports to facilitate better understanding of the support needed. After receiving each national datafile, the WHO CC cleans the data in accordance with agreed principles of the network and in dialogue with each country. Finally, the international datafile is built. The datafile from 2017/18 was made open access in October 2022, and the WHO CC also facilitates external access to the survey data so that they can be used for research and in teaching in schools and higher education, as well as for policy development.

---

***WHO CC for Improving Services for Children, Federal State Budgetary Institution "Scientific Centre of Children's Health", Ministry of Health, Moscow, Russian Federation***

The WHO CC's ToRs are to provide assistance to WHO with:

- improving the quality of paediatric care for children in the European Region;
  - promotion of the child rights approach for improving the health and well-being of schoolchildren; and
  - improving best practice regarding early childhood development.
- 

***WHO CC in Adolescent and School Health, Centre Hospitalier Universitaire Vaudois, Lausanne, Switzerland***

The WHO CC's ToRs are to support WHO's work in the European Region with:

- building regional and national capacity of policy-makers and health-care providers in adolescent and school health-related issues, through development and implementation of training activities, advocacy tools and interventions; and
- documenting and disseminating best practices in the area of adolescent and school health, international analyses and syntheses of experiences.

Its domain of expertise focuses on European training in effective adolescent care and health. Its activities include providing teaching sessions, workshops and meetings; co-writing standards; and contributing to the AA-HA! guidance.<sup>3</sup> Future activities include teaching sessions; developing screening tools in adolescent care; and assessing adolescent competence.

---

***WHO CC for Health Promotion and Public Health Development, Public Health Scotland, Edinburgh, United Kingdom***

The WHO CC was founded in 1982 and focuses on health promotion and education, and on child, maternal and adolescent health. Its ToRs include supporting WHO with:

- development, implementation and monitoring of the draft European strategy for CAH
- development of actions to improve early childhood development across the Region
- helping Member States implementing WHO's CAH policy
- the HBSC study
- contributing to the work of the Schools for Health in Europe Network.

A focus of the WHO CC in the coming year will be development, implementation and monitoring of the draft European strategy for CAH.

---

<sup>3</sup> Global accelerated action for the health of adolescents (AA-HA!): guidance to support country implementation. Geneva: World Health Organization; 2017 (<https://iris.who.int/handle/10665/255415>, accessed 21 September 2023).

***WHO CC for Public Health Nursing and Midwifery, Office for Health Improvement and Disparities, Department of Health and Social Care, London, United Kingdom***

The WHO CC was successfully redesignated in October 2020 to include children and young people, adults and older people, and allied health professionals. Its ToRs are to:

- support WHO in strengthening disease prevention and health promotion, building resilience in health-care systems, and generating evidence and frameworks of practice;
- support WHO in collating and collecting evidence about nurses', midwives' and allied health professionals' roles and impact across the life-course; and
- provide technical assistance and support to WHO in informing the development of policy advice about public health nursing, midwifery and allied health professionals.

The WHO CC is also capturing lessons learned from COVID-19.

Highlights include developing an evidence-informed schedule of interventions for improving child health and standards for youth-friendly health and care services. The WHO CC has developed and published an online repository of over 50 case studies and 12 journal articles demonstrating nurse, midwife and allied health professional leadership – including innovation during the COVID-19 pandemic. It published several evidence reviews on topics encompassing the impact of COVID-19 on parent/infant bonding, digital service provision, health inequalities and public mental health interventions. The WHO CC has developed a range of bitesize online training resources for the All our health collection to support public health knowledge and practice, and an interactive resource on the relationship between the SDGs and the work of health-care professionals.

The WHO CC has delivered several initiatives to share best practices in public health. Its 2019 Global conference promoted implementation of evidence to underpin health promotion practice and improve outcomes. For the 2020 Commonwealth conference it contributed papers on enhancing nurse leadership. It has strengthened its ability to provide high-quality technical advice to Member States by developing and maintaining a network of technical advisers, and recently supported Ukraine on child and adolescent mental health and service restoration. The WHO CC's United Kingdom Overseas Territories Child Public Health Network continues to provide vital learning and sharing for practice development, and is supporting several "shadow" WHO CCs towards designation.

Current challenges involve continuing to learn and build back better from the pandemic, while operating in a shifting organizational landscape. The WHO CC's priorities involve fulfilling the ToRs and achieving successful redesignation in 2024. It will continue to develop international partnerships with WHO CCs and strengthen relationships with other United Kingdom WHO CCs. It aims to increase its technical adviser network – particularly among allied health professionals – to improve its expertise and response to technical requests. It is redeveloping its case study repository, and intends to increase publications. It will also develop an information bank of health and care job role profiles across England, United Kingdom, to support technical advice requests proactively.

---



## Potential CAH CCs

### ***"Arabkir" Medical Centre – Institute of Child and Adolescent Health, Yerevan, Armenia***

"Arabkir" Medical Centre – Institute of Child and Adolescent Health is the largest paediatric facility and university teaching hospital in Armenia, and provides a wide range of paediatric inpatient and outpatient services, including long-term care for children with chronic conditions. It also has a unit that specializes in care for children with developmental disorders. The Institute collaborates closely with medical centres in Belgium, Switzerland, the United States and other countries.

The Institute participates in developing policies, regulations and guidelines; conducts surveys and other studies; implements investment programmes, organizes staff training; supports advocacy activities; and introduces health promotion programmes.

During the last five years – in collaboration with WHO, UNICEF, UNESCO, the United Nations Population Fund (UNFPA), the joint United Nations Programme on HIV/AIDS, and other international and national organizations – the Institute has implemented activities in following fields:

- child development and rehabilitation, including assessing services and quality of care; developing concepts, guides and training curriculums; and training of development and rehabilitation specialists team and primary health-care staff;
- school health, including participation in developing a healthy lifestyle curriculum and modules for schoolteachers; training of teachers and school nurses; implementation of healthy lifestyle promotion; and noncommunicable disease prevention campaigns in schools, as well as supporting the launch of the WHO Child Obesity Surveillance Initiative Survey in 2019; and
- adolescent health, including developing a model of adolescent-friendly health care in primary health-care facilities; development of guides, training modules and staff training; and launching an information portal for adolescents.

In 2019 the Institute participated in organizing regional European training on effective adolescent care and health course in Armenia, and the Armenian HBSC team hosted the HBSC study's network meeting. The Institute was also involved in the HBSC study in 2021–2022.

Staff members have facilitated European training on effective adolescent care and health in Uzbekistan and Tajikistan; assisted with implementation of the HBSC study in Georgia; and participated in reviewing and editing WHO's *Pocket book of primary health care for children and adolescents*<sup>4</sup> and *Framework on early childhood development in the WHO European Region*,<sup>5</sup> as well as revisions of WHO recommendations on safe schooling during the COVID-19 pandemic.<sup>6</sup>

---

<sup>4</sup> Pocket book of primary health care for children and adolescents: guidelines for health promotion, disease prevention and management from the newborn period to adolescence. Copenhagen: WHO Regional Office for Europe; 2022 (<https://apps.who.int/iris/handle/10665/352485>, accessed 20 September 2023).

<sup>5</sup> Framework on early childhood development in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2020 (<https://apps.who.int/iris/handle/10665/332068>, accessed 20 September 2023).

<sup>6</sup> Schooling during COVID-19: recommendations from the European Technical Advisory Group for Schooling during COVID-19. Copenhagen: WHO Regional Office for Europe; 2021 (<https://apps.who.int/iris/handle/10665/340872>, accessed 20 September 2023).

The Institute's team participated in a WHO headquarters feasibility study on global action for measurement of adolescent health.

---

***Witten/Herdecke University, Faculty of Health/School of Medicine, Witten, Germany***

Witten/Herdecke University's Global Child Health Group was founded in 2017 to become a leading institution in child health research and education in Germany. Since 2018, the Group has actively participated in the Child Health Accountability Tracking Technical Advisory Group, collaborating closely with WHO and UNICEF. Its contributions were crucial in developing WHO's recently launched *Pocket book of primary health care for children and adolescents*,<sup>7</sup> and it aspires to be acknowledged as a WHO CC. The Group's research questions and training activities are based on the needs of its partners, encompassing different locations and universal concepts that have an impact on children's health, regardless of their geographical location. Its studies include analysing the social and environmental determinants of health, the quality of child health care, and the protection of children's rights. Its focus lies in adapting new or existing interventions to local settings, considering their feasibility and acceptability, and strengthening the child health workforce by applying implementation research models and combining qualitative and quantitative methods. The Global Child Health Group is funded by the Friede Springer Stiftung in Germany, enabling it to continue its work in advancing child health globally.

---

***Düsseldorf University Hospital, Division of Child Health Services Research, Heinrich Heine University Düsseldorf, Germany***

Planned collaboration with WHO includes building on four major funded research projects (with a total budget of more than €4.5 million until 2027) in the areas of chronic conditions and developmental problems in children; the related patient journeys, needs and experiences; potential innovative integrated preventive care concepts; and the promotion of participation and shared decision-making of children in health services and research. The Hospital would like to prepare to become a WHO CC within the next two years (autumn 2023 to autumn 2025).

The Hospital's field of work would belong to the area of CAH in the WHO European Region, with a concrete denomination to be discussed. Current ideas for denomination and terminology centre around child development, participation and preventive health services.

---

***Technical University of Munich, Department of Sport and Health Sciences, Munich, Germany***

The University will support the development of a global WHO agenda on health literacy, including development and implementation of a measurement tool to assess population health literacy in

---

<sup>7</sup> Pocket book of primary health care for children and adolescents: guidelines for health promotion, disease prevention and management from the newborn period to adolescence. Copenhagen: WHO Regional Office for Europe; 2022 (<https://iris.who.int/handle/10665/352485>, accessed 20 September 2023).

Member States. The Shanghai Declaration on health promotion<sup>8</sup> and the global framework on achieving well-being adopted at the Seventy-sixth World Health Assembly in May 2023<sup>9</sup> state that health literacy is a key determinant of health and well-being, but most countries have no data or clear agenda on assessing and promoting health literacy in a systematic manner. Countries that have assessed population-level health literacy have realized that it is often at a lower level than expected. This has led to development of national strategies and plans to enhance population-level health literacy. In this context, the University will undertake work to address these gaps.

---

### ***School of Health and Life Sciences, Glasgow Caledonian University, London, United Kingdom***

The WHO Regional Office for Europe proposed that Glasgow Caledonian University (London campus) be designated a WHO CC in a letter to the United Kingdom Government on 11 May 2023. The ToRs for the CC are that it will assist WHO in developing selected tools to support its work in the field of CAH and well-being, and that it will support WHO in implementation of actions derived from its strategic programmes of work for the improvement of adolescent health and well-being.

The WHO CC will become part of one of the University's six research centres – the Research Centre for Health. All activities carried out by the WHO CC will be guided by Bronfenbrenner's bioecological framework for child development, emphasizing Antonovsky's theory of salutogenesis as a means of creating the conditions for health rather than fixing ill health.<sup>10</sup> Some of the initial activities will include a proposal for a classification system using the bioecological framework for child and adolescent mental health and well-being and their determinants, with practical guides on how to use it; a set of indicators aligned to the classification system; and a series of reviews detailing how the bioecological framework has been used to improve outcomes in practice.

---

### **Current SRH CCs**

#### ***WHO CC for Research on Sexual and Reproductive Health, International Centre for Reproductive Health, Ghent University, Belgium***

The International Centre for Reproductive Health was designated a WHO CC in 2004. It is a multidisciplinary research institute within Ghent University, established in 1994 in response to the International Conference on Population and Development in Cairo, Egypt. Its ToRs are to:

---

<sup>8</sup> Shanghai Declaration on promoting health in the 2030 Agenda for Sustainable Development. Geneva: World Health Organization; 2017 (<https://iris.who.int/handle/10665/359526>, accessed 21 September 2023).

<sup>9</sup> Achieving well-being: a global framework for integrating well-being into public health utilizing a health promotion approach. Geneva: World Health Organization; 2023 (<https://www.who.int/publications/m/item/wha-76---achieving-well-being--a-global-framework-for-integrating-well-being-into-public-health-utilizing-a-health-promotion-approach>, accessed 21 September 2023).

<sup>10</sup> Pérez-Wilson P, Marcos-Marcos J, Morgan A, Eriksson M, Lindström B, Álvarez-Dardet C. "A synergy model of health": an integration of salutogenesis and the health assets model. *Health Promot Int.* 2021;36(3):884–94. doi:10.1093/heapro/daaa084.

- support WHO's coordination of epidemiological, operations and implementation research on SRH and rights, including family planning, gender-based violence, harmful practices, and maternal, adolescent and child health; and
- provide technical support for the implementation of the WHO action plan for SRH<sup>11</sup> as and when appropriate.

The WHO CC conducts fundamental, epidemiological, social, clinical, health system and policy research related to:

- HIV and sexually transmitted infections, with a particular focus on prevention;
- maternal health, including mother and child health, paying specific attention to safe motherhood and family planning;
- sexual and gender-based violence, harmful traditional practices such as female genital mutilation and forced/child marriage;
- integration of SRH and rights within health systems; and
- human papillomavirus.

Alongside research, the WHO CC conducts:

- training and capacity-building, including postgraduate academic programmes, courses and workshops but also onsite training, monitoring, evaluation and supervision to strengthen local capacity;
- reproductive health service work, including advice, consultancy, technical assistance, policy support, designing, planning, implementing, monitoring and evaluation; and
- advocacy and awareness-raising at all levels (including the scientific and the political), and keeping SRH and rights on the policy agenda.

The WHO CC hosts the secretariat of the Academic Network on Sexual and Reproductive Health and Rights Policy, which comprises 42 academic and non-academic members from 23 countries. The Network uses the combined knowledge and skills of researchers, policy-makers and practitioners within its affiliated member organizations to establish the SRH evidence bases for developing policy that can be translated into effective practice. It also plays an important role in implementation of the WHO CC network, as it has a pool of experts that the WHO CC can tap into to strengthen its work.

---

### ***WHO CC in Perinatal Health, Institute for the Care of Mother and Child, Prague, Czechia***

The WHO CC in was last redesignated in December 2019. Its ToRs are to:

- support WHO in building country capacity to implement the Robson classification system for reducing unnecessary CSs;

---

<sup>11</sup> Sixty-sixth Regional Committee for Europe: Copenhagen, 12–15 September 2016: action plan for sexual and reproductive health: towards achieving the 2030 Agenda for Sustainable Development in Europe – leaving no one behind. Copenhagen: WHO Regional Office for Europe; 2016 (<https://apps.who.int/iris/handle/10665/338130>, accessed 21 September 2023).

- support WHO in providing technical support to improve country quality of maternal and neonatal hospital care; and
- provide technical support and capacity-building to countries, at the request of WHO, in improving perinatal surveillance and its use for strategic decisions and improving maternal and neonatal health.

For implementation of the ToRs, the WHO CC has developed an Excel-based programme that is usable at any facility level for training purposes and practical use. It has concentrated on the important issue of diagnosis and treatment of transitory tachypnoea of newborns, which is very common in infants born by planned CS. Early diagnosis and treatment are crucial to avoid severe complications (such as pulmonary hypertension, atelectasis and barotrauma). The most important issues are the mode of non-invasive ventilation, feeding regime and support of other involved organ systems.

The WHO CC is ready to provide technical support to improve national capacity to assess and improve the quality of maternal and neonatal hospital care to contribute to WHO's action plan for SRH in the European Region<sup>12</sup> and SDG 2 to ensure that all people can enjoy the highest attainable standard of SRH and well-being.

The WHO CC can help to build national capacity in assessing barriers and challenges to provision of quality neonatal health services, to monitor progress and evidence-based policy elaboration. Capacity-building of national teams in specific areas of maternal and perinatal health such as fetal cardiotocography will improve newborn health outcomes and address stillbirth challenges. Practical guides for regionalization of health services will be of benefit for the entire WHO European Region and countries implementing a regionalized system approach. There is currently no practical guide or repository of lessons learned on regionalization of maternal and newborn health services. This has been proposed and approved as a regional public health good and of importance for the entire Region. The WHO CC has prepared materials for technical consultations with WHO on evaluation of cardiotocography and on regionalization of perinatal services. It is also prepared to provide technical support to build national capacity in improving perinatal surveillance and its use in strategic decision-making and improving neonatal health.

Planned activities include redesignation of the WHO CC when the current term comes to an end in December 2023. Considering the CC's long-term collaboration with WHO (begun with the first designation in 1988), it would like to continue to support WHO's goals and activities to improve the quality of perinatal care and capacity-building, using its experience and expertise.

---

***WHO CC for Sexual and Reproductive Health, Federal Centre for Health Education, Cologne, Germany***

The WHO CC will celebrate its 20th anniversary in 2023. Its ToRs are to:

---

<sup>12</sup> Sixty-sixth Regional Committee for Europe: Copenhagen, 12–15 September 2016: action plan for sexual and reproductive health: towards achieving the 2030 Agenda for Sustainable Development in Europe – leaving no one behind. Copenhagen: WHO Regional Office for Europe; 2016 (<https://apps.who.int/iris/handle/10665/338130>, accessed 20 September 2023).

- support WHO in health promotion/education and public health-related programmes, including research;
- assist WHO in improving the quality of sexuality education and monitoring the impact; and
- support WHO in improving the quality of HIV and sexually transmitted infection prevention.

In 2019–2023, in collaboration with UNFPA, the WHO CC produced a series of six factsheets that synthesize recent international evidence on the benefits of comprehensive sexuality education concerning various topics focusing on health, development and young people. Each factsheet presents the results of the most recent research on the benefits of comprehensive sexuality education about a specific topic, and provides good-practice and country examples.<sup>13</sup>

In 2021, the WHO CC published *Training matters – operational guidance for training sexuality educators*,<sup>14</sup> which is targeted at professionals in the WHO European Region involved in designing, developing and implementing training programmes for sexuality educators. It primarily focuses on sexuality educators in school settings.

In cooperation with the WHO Regional Office for Europe, UNFPA, UNESCO and the International Planned Parenthood Federation European Network, in 2021–2022 the WHO CC conducted a sexual education review assessment tool study in Georgia, Kyrgyzstan, the Republic of Moldova and Tajikistan to evaluate the implementation of sexuality education in these countries. In November 2022, a two-day workshop hosted by UNFPA, UNESCO and the WHO CC was held in Tbilisi, Georgia, with 40 participants from six countries in the WHO European Region. The country reports and a summary of the study will be available shortly on the WHO CC's website.

---

### ***WHO CC for Research in Human Reproduction, National Medical Research Centre for Obstetrics, Gynaecology and Perinatology, Moscow, Russian Federation***

The WHO CC was created in 1972 under the WHO Special Programme of Research, Development and Research Training in Human Reproduction. It is the only WHO CC in the Russian Federation in this field. Its ToRs are to:

- develop education and training materials and implement them in countries, as requested by WHO; and
- translate, disseminate and implement WHO guidelines on SRH, as requested by WHO.

Areas of collaboration include reproductive health, ANC, and maternal and newborn health.

Activities include:

- research on reproductive and maternal health, in collaboration with the WHO Regional Office for Europe;

---

<sup>13</sup> UNFPA Regional Office for Eastern Europe and Central Asia, WHO Regional Office for Europe, Federal Centre for Health Education. Comprehensive sexuality education – factsheet series. Cologne: Federal Centre for Health Education; 2020 (<https://eeca.unfpa.org/en/publications/comprehensive-sexuality-education-factsheet-series>, accessed 26 September 2023).

<sup>14</sup> Training matters – operational guidance for training sexuality educators. Cologne: Federal Centre for Health Education; 2021 (<https://www.bzga-whocc.de/en/publications/concepts/training-matters-operational-guidance/>, accessed 20 September 2023).

- development of training materials and programmes, and organization of educational activities for health-care workers in the WHO European Region;
- translation, dissemination and implementation of guidelines, recommendations and other WHO products; and
- organization of and participation in WHO events.

The WHO CC's main projects include:

- improving the quality of hospital care to reduce maternal, newborn and child deaths and accelerate the achievement of the SDG health targets in four countries (Kyrgyzstan, Mongolia, Tajikistan and Viet Nam), 2020–2023;
- implementation of the WHO baby-friendly hospital initiative in the Russian Federation and Russian-speaking countries;
- a workshop on the WHO Regional Office for Europe nutrient profile model and the nutrient and promotion profile model for infants and young children;<sup>15</sup>
- a survey of implementation of the WHO recommendations on ANC for a positive pregnancy experience; and
- editing/translation of WHO documents into Russian.

---

***WHO CC for Research and Research Training in Human Reproduction,  
Department of Women's and Children's Health, Karolinska University Hospital,  
Stockholm, Sweden***

The WHO CC's ToRs are to:

- provide assistance to WHO by expanding the evidence base on safe abortions;
- assist WHO with dissemination and facilitation of in-country adaptation of safe abortion and related guidelines,<sup>16</sup> at WHO's request;
- assist WHO with strengthening capacity and collaborative research training under WHO's leadership; and
- support activities of the WHO CC network, at WHO's request, as and when appropriate.

The research conducted at the WHO CC concerns fertility and fertility regulation, endometrial function, steroid hormones, contraception and induced abortion. It includes experimental laboratory research, animal studies, academic clinical studies and clinical trials, and involves extensive international collaboration. The WHO CC's research has led to clinical applications of prostaglandin analogues and progesterone receptor modulators in obstetrics and gynaecology. This combined

---

<sup>15</sup> WHO Regional Office for Europe nutrient profile model, second edition. Copenhagen: WHO Regional Office for Europe; 2023 (<https://iris.who.int/handle/10665/366328>, accessed 20 September 2023); Nutrient and promotion profile model: supporting appropriate promotion of food products for infants and young children 6–36 months in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2022 (<https://iris.who.int/handle/10665/364678>, accessed 20 September 2023).

<sup>16</sup> Clinical practice handbook for safe abortion. Geneva: World Health Organization; 2014 (<https://iris.who.int/handle/10665/97415>, accessed 26 September 2023).

regimen for medical abortion was developed at the WHO CC and has had a major impact on women's health worldwide. Development for other indications continues. The CC's research with WHO also led to development of the emergency contraceptive pill.

Several graduate students and postdoctoral students receive research training at the WHO CC. An important goal is to create an environment to promote and foster independent and excellent scientists and clinicians. Current research focuses on further development of medical abortion (from very early to much later), improved options for emergency contraception, treatment of ectopic pregnancy and endometrial regeneration research from bench to bed to the hands of women.

---

### ***WHO CC for Midwifery Development, Cardiff University, United Kingdom***

The WHO CC's ToRs are, at WHO's request and under its guidance, to:

- strengthen the evidence base and provide technical support on midwifery pre-service education and training; and
- assist WHO in capacity-building and strengthening midwifery pre-service education and training.

Activities include leading a series of three online workshops in Romania during 2021, at the request of the Ministry of Health and WHO Country Office, to support development of midwifery education using the Midwifery Assessment Tool for Education (MATE)<sup>17</sup> developed by the WHO CC. The CC was also invited to participate in a follow-up roundtable discussion in Romania 2022.

The WHO CC published an open-access paper in *Nurse Education in Practice* in June 2022 on the co-design methodology for MATE.<sup>18</sup> The collaborative process with colleagues from eastern European countries was excellent, and may be a helpful approach for other WHO projects across the globe.

The WHO CC contributed midwifery priorities and actions to WHO's regional roadmap for strengthening nursing and midwifery, *Building better together*.<sup>19</sup> Its midwifery experts also participated in a WHO visit to Tajikistan in January 2023 to support the review and development of midwifery and nursing education in the country. A further visit is planned for later in 2023.

The WHO CC presented at a European Forum of National Nursing and Midwifery Associations webinar in March 2023 on challenges and opportunities for midwifery education and implementation of the WHO Regional Roadmap.

---

<sup>17</sup> Midwifery Assessment Tool for Education (MATE). Copenhagen: WHO Regional Office for Europe; 2020 (<https://apps.who.int/iris/handle/10665/358932>, accessed 8 August 2023).

<sup>18</sup> Hunter B, Thomas G, Wilhelmová R, Trendafilova P, Blaževičienė A, Lynch L et al. Strengthening global midwifery education to improve quality maternity care: co-designing the World Health Organization Midwifery Assessment Tool for Education (MATE). *Nurse Educ Pract.* 2022;63:103376. doi:10.1016/j.nepr.2022.103376.

<sup>19</sup> Building better together: roadmap to guide implementation of the Global Strategic Directions for Nursing and Midwifery in the WHO European Region. WHO Regional Office for Europe; 2021 (<https://apps.who.int/iris/handle/10665/350207>, accessed 19 September 2023).



The WHO CC works in collaboration with the Wales Centre for Evidence Based Care, also based at Cardiff University, to produce a rapid review on “twinning”, which it hopes may support development of effective twinning projects across the WHO European Region.

Global activities include the following:

- attending and presenting at the Global Network of WHO CCs for Nursing and Midwifery conference, hosted by the University of Botswana;
- co-leading the Global Network of WHO CCs for Nursing and Midwifery webinar series 2020–21 on midwifery research, education, midwife-led care, quality improvement and leadership in midwifery;
- contributing to a WHO headquarters project on sustaining midwifery education during the COVID-19 pandemic and beyond; and
- working as a member of the WHO headquarters MCA Technical Advisory Group on the interprofessional midwifery education toolkit for maternal, newborn, sexual, reproductive and mental health.<sup>20</sup>

---

### ***WHO CC for Global Women’s Health, Institute of Metabolism and Systems Research, University of Birmingham, United Kingdom***

The WHO CC obtained its initial designation in 2019 for its research supporting WHO’s programmes on maternal and perinatal health. This status expired in October 2022; designation is in the process of renewal and new ToRs are being agreed to:

- contribute to WHO’s work for the development of management tools of post-partum haemorrhage; and
- support WHO by developing a comprehensive intervention package to optimize maternal and perinatal outcomes from CSs.

The WHO CC’s goal is to end mothers and babies dying from preventable causes globally, by undertaking research shaped by the views of women, communities and local stakeholders. Its research includes evidence syntheses; clinical trials; prognostic models; multicountry surveys; and qualitative and implementation studies, supported by capacity-building activities. Its ongoing work packages include a living systematic review on COVID-19 in pregnancy; a meta-analysis of calcium supplementation to prevent pre-eclampsia in low- and middle-income countries; a meta-analysis on lifestyle interventions to prevent adverse pregnancy outcomes; work with Tommy’s National Centre of Miscarriage, United Kingdom, on implementation of the graded model of care; and implementation of the early detection of postpartum haemorrhage through massage, oxytocic drugs, tranexamic acid, intravenous fluids and examination and escalation research findings for the treatment of postpartum haemorrhage.

---

<sup>20</sup> Essential childbirth care course: module 1: introduction – facilitator’s guide. Geneva: World Health Organization; 2023 (<https://iris.who.int/handle/10665/366500>, accessed 26 September 2023).

## **Potential SRH CC**

### ***Maternal and Infant Health, Centre for Health and Social Care Research, Sheffield Hallam University, United Kingdom***

In the light of growing diversity in Europe, the Centre has proposed creation of a knowledge exchange centre for mothers' and families' health equality. This will contribute to knowledge generation and education in an area of high priority – tackling health inequalities in early life; strengthening academic profiles in producing cutting-edge evidence; and offering relevant evidence-based training for staff and students to provide culturally competent, safe, trauma-aware and compassionate care. The aim is to ensure that maternal and reproductive health-care professionals provide care that is sensitive to the needs of diverse populations.

---

## **Collaborating study**

The collaborative cross-national HBSC study celebrates 40 years of data collection in 2023. Since the beginning of the study the WHO Regional Office for Europe has been a key partner, and has provided vital support for its expansion. Every four years, data collection takes place among 11-, 13- and 15-year-olds in participating countries. The most recent datafile from the 2021/22 data collection has just been finalized and made available to the HBSC network. It includes data from 44 countries and regions. COVID-19 was a specific focus for the most recent data collection, and these findings will be launched in October 2023 through five WHO reports. The rest of the key findings will be disseminated through four WHO reports to be launched during the last quarter of 2023.

## Annex 2

# PROGRAMME

WORLD HEALTH ORGANIZATION  
REGIONAL OFFICE FOR EUROPE

WELTGESUNDHEITSORGANIZATION  
REGIONALBÜRO FÜR EUROPA



ORGANIZATION MONDIALE DE LA SANTÉ  
BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ  
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

**Meeting of WHO collaborating centres for child and adolescent health and sexual and reproductive health in the WHO European Region**  
Cologne, Germany

**22 March 2023 (updated 15 May)**  
**Original: English**

**16–17 May 2023**

| <b>Day 1 – 16 May 2023</b>                                                                                                                                       |                                                    |                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Opening session</b>                                                                                                                                           |                                                    |                                                                                                                                                                                                   |
| 09:00–09:30                                                                                                                                                      | Opening and welcome                                | Martin Dietrich, Acting Director of Federal Centre for Health Education; Natasha Azzopardi-Muscat, Director of the Division of Country Health Polices and Systems, WHO Regional Office for Europe |
|                                                                                                                                                                  | Objectives, expected outcomes and review of agenda | Martin Weber, CAH Programme Manager; Oleg Kuzmenko, SRH Programme Manager                                                                                                                         |
| <b>Session 1 – Setting the scene</b>                                                                                                                             |                                                    |                                                                                                                                                                                                   |
| <b>Objective:</b> to provide an update on the activities of the WHO Regional Office for Europe and WHO headquarters in the areas of SRH and CAH with the WHO CCs |                                                    |                                                                                                                                                                                                   |
| 09:30–09:30                                                                                                                                                      | Updates on CAH in the WHO European Region          | Martin Weber, CAH Programme Manager                                                                                                                                                               |
|                                                                                                                                                                  | Updates on SRH in the WHO European Region          | Oleg Kuzmenko, SRH Programme Manager                                                                                                                                                              |
|                                                                                                                                                                  | Updates from the WHO headquarters MCA Department   | Anshu Banerjee, MCA Department Director                                                                                                                                                           |

|                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                    | Update from WHO headquarters on SRH and the HRP                                                                                                                                                                                                                                         | Özge Tuncalp, Medical Officer for the HRP                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                    | Outcome of the last WHO CC meeting, review of recommendations and progress                                                                                                                                                                                                              | Eileen Scott, WHO CC for Health Promotion and Public Health Development, Public Health Scotland, United Kingdom                                                                                                                                                                                           |
| 10:30–10:45                                                                                                                                                                                                                                                                                        | Question-and-answer session                                                                                                                                                                                                                                                             | Martin Weber, CAH Programme Manager;<br>Oleg Kuzmenko, SRH Programme Manager                                                                                                                                                                                                                              |
| <b>Session 2 – Poster session</b>                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| <b>Objective:</b> to provide an opportunity for WHO CCs to share their activities and provide both formal and informal opportunities for networking                                                                                                                                                |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| 11:15–11:45                                                                                                                                                                                                                                                                                        | Online presentations from WHO CCs unable to attend, with question-and-answer session                                                                                                                                                                                                    | Facilitator: Aigul Kuttumuratova, Technical Officer, Primary Health Care                                                                                                                                                                                                                                  |
| 11:45–12:30                                                                                                                                                                                                                                                                                        | Poster session with a short introduction giving a brief overview of the work of the past four years, including highlights and current challenges                                                                                                                                        | Facilitators: Aigul Kuttumuratova, Technical Officer, Primary Health Care;<br>Martin Weber, CAH Programme Manager                                                                                                                                                                                         |
| <b>Session 3 – Group work SRH and CAH: parallel sessions</b>                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| <b>Objective (CAH):</b> to review the draft European strategy for CAH and discuss the need for updates in view of COVID-19 and the humanitarian crises, to cover the period to 2030 under the SDGs                                                                                                 |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| <b>Objective (SRH):</b> to discuss clinical aspects of SRH, including operational research for CS reduction and operationalization of maternal and perinatal death surveillance and response (including near-miss case review, perinatal death audit and confidential enquiry into maternal death) |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| 13:30–16:00                                                                                                                                                                                                                                                                                        | <b>CAH</b> <ul style="list-style-type: none"> <li>• Impact of COVID-19</li> <li>• Resilience in crises</li> <li>• Priority areas of focus</li> <li>• Review and finalization of draft European strategy for CAH, including updates required and key areas for implementation</li> </ul> | <b>SRH</b> <ul style="list-style-type: none"> <li>• Impact of COVID-19</li> <li>• Resilience in crises</li> <li>• Priority areas of focus</li> <li>• Clinical aspects of SRH, including CS reduction research and operationalization of maternal and perinatal death surveillance and response</li> </ul> |
| 16:00–17:00                                                                                                                                                                                                                                                                                        | Feedback from group work                                                                                                                                                                                                                                                                | Plenary                                                                                                                                                                                                                                                                                                   |
| <b>Conclusions of the day</b>                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                           |
| 17:00–17:15                                                                                                                                                                                                                                                                                        | Taking stock                                                                                                                                                                                                                                                                            | Martin Weber, CAH Programme Manager                                                                                                                                                                                                                                                                       |

| <b>Day 2 – 17 May 2023</b>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| 09:00–09:15                                                                                                                                                                | Recap of day 1                                                                                                                                                                                                                                                                                                  | Martin Weber, CAH Programme Manager                                                             |
| <b>Session 4 – Cross-cutting themes</b>                                                                                                                                    |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| <b>Objective:</b> To discuss and develop cross-cutting themes and monitoring mechanisms to aid the implementation of the SRH and CAH strategies in the WHO European Region |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 09:15–09:30                                                                                                                                                                | WHO CCs in-country implementation                                                                                                                                                                                                                                                                               | Donna Zilstorff, Technical Officer for CCs                                                      |
| 09:30–10:00                                                                                                                                                                | Monitoring mechanisms<br>SDG monitoring and beyond<br>Question-and-answer and brainstorming session                                                                                                                                                                                                             | Martin Weber, CAH Programme Manager;<br>Oleg Kuzmenko, SRH Programme Manager                    |
| <b>Session 5 – Group work on cross-cutting themes</b>                                                                                                                      |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 10:30–12:30                                                                                                                                                                | Introduction to group work (using open space methodology): <ul style="list-style-type: none"> <li>• building on youth participation experience in CAH</li> <li>• funding opportunities</li> <li>• supporting WHO work in countries (implementation of action plans)</li> <li>• monitoring/indicators</li> </ul> | Eileen Scott, WHO CC for Health Promotion and Public Health Development, Public Health Scotland |
| 13:30–14:00                                                                                                                                                                | Feedback from group work<br>Discussion                                                                                                                                                                                                                                                                          | Facilitator: Martin Weber, CAH Programme Manager                                                |
| <b>Session 6 – Next steps</b>                                                                                                                                              |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| <b>Objective:</b> To agree on next steps and timelines                                                                                                                     |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 14:00–14:45                                                                                                                                                                | Next steps and timelines                                                                                                                                                                                                                                                                                        | Martin Weber, CAH Programme Manager;<br>Oleg Kuzmenko, SRH Programme Manager                    |
| <b>Closing session</b>                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 14:45–15:00                                                                                                                                                                | Closing remarks                                                                                                                                                                                                                                                                                                 | Martin Weber, CAH Programme Manager;<br>Oleg Kuzmenko, SRH Programme Manager                    |

### *Annex 3*

## **MEETING PARTICIPANTS**

### **CAH CCs**

Silvia de Ruiter

WHO CC for Research in Education and Health, Clermont Auvergne University, Clermont-Ferrand, France

Eva Rehfuss (online)

WHO CC for Evidence-Based Public Health, Institute for Medical Information Processing, Biometry and Epidemiology, Ludwig-Maximilians University Munich, Germany

Saoirse Nic Gabhainn, Colette Kelly

WHO CC for Health Promotion Research, National University of Ireland Galway, Ireland

Paolo Dalena (online), Marzia Lazerini (online), Ilaria Mariani (online), Monica Piccoli (online), Emanuelle Pessa Valente (online)

WHO CC for Maternal and Child Health, Unit for Health Services Research and International Health, Istituto per l'Infanzia IRCCS Burlo Garofolo, Trieste, Italy

Oddrun Samdal (online)

WHO CC for Health Promotion and Education, University of Bergen, Norway

Olga Komarova (online)

WHO CC for Improving Services for Children, Federal State Budgetary Institution "Scientific Centre of Children's Health", Ministry of Health, Moscow, Russian Federation

Pierre-Andre Michaud (online)

WHO CC in Adolescent and School Health, Centre Hospitalier Universitaire Vaudois, Lausanne, Switzerland

Eileen Scott, Ross Whitehead

WHO CC for Health Promotion and Public Health Development, Public Health Scotland, Edinburgh, United Kingdom

Gill Turner

WHO CC for Public Health Nursing and Midwifery, Office for Health Improvement and Disparities, Department of Health and Social Care, London, United Kingdom

### **Potential CAH CCs**

Sergey Sargsyan

"Arabkir" Medical Centre – Institute of Child and Adolescent Health, Yerevan, Armenia

Ralf Weigel

Witten/Herdecke University, Faculty of Health/School of Medicine, Witten, Germany

Freia DeBock  
Düsseldorf University Hospital, Division of Child Health Services Research, Heinrich Heine  
University Düsseldorf, Germany

Renate Oberhoffer-Fritz, Hande Hofmann, Orkan Okan  
Technical University of Munich, Department of Sport and Health Sciences, Munich, Germany.

Antony Morgan  
School of Health and Life Sciences, Glasgow Caledonian University, London, United Kingdom

### **SRH CCs**

Emilie Peeters  
WHO CC for Research on Sexual and Reproductive Health, International Centre for Reproductive  
Health, Ghent University, Belgium

Petr Velebil  
WHO CC in Perinatal Health, Institute for the Care of Mother and Child, Prague, Czechia

Sayneb Al-Baghdadi, Martin Dietrich, Johanna Marquardt, Sara Scharmanski, Volker Schmidt,  
Yvette Shajanian Zarneh  
WHO CC for Sexual and Reproductive Health, Federal Centre for Health Education, Cologne,  
Germany

Yekaterina Yarotskaya  
WHO CC for Research in Human Reproduction, National Medical Research Centre for Obstetrics,  
Gynaecology and Perinatology, Moscow, Russian Federation

Kristina Gemzell Danielsson (online)  
WHO CC for Research and Research Training in Human Reproduction, Department of Women's  
and Children's Health, Karolinska University Hospital, Stockholm, Sweden

Grace Thomas, Kerry Phillips  
WHO CC for Midwifery Development, Cardiff University, United Kingdom

Adam Devall  
WHO CC for Global Women's Health, Institute of Metabolism and Systems Research, University of  
Birmingham, United Kingdom

### **Potential SRH CC**

Hora Soltani  
Maternal and Infant Health, Centre for Health and Social Care Research, Sheffield Hallam  
University, United Kingdom

### **Other participants**

Frank Louwen, President Elect of the European Board and College of Obstetrics and Gynaecology  
University of Frankfurt/Main and University Hospital, Frankfurt/Main, Germany

Dorothy Currie  
International Coordinating Centre for HBSC, University of St Andrews, United Kingdom

## **WHO headquarters**

Anshu Banerjee, MCA Department Director

Özge Tuncalp, Medical Officer for the HRP

## **WHO Regional Office for Europe**

Natasha Azzopardi-Muscat, Director, Country Health Programmes and Systems

Michelle Black, Consultant

Alina Cosma, Consultant

Aigul Kuttumuratova, Technical Officer, Primary Health Care

Oleg Kuzmenko, SRH Programme Manager

Martin Weber, CAH Programme Manager

Donna Zilstorff, Technical Officer for CCs



## The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

### Member States

Albania  
Andorra  
Armenia  
Austria  
Azerbaijan  
Belarus  
Belgium  
Bosnia and Herzegovina  
Bulgaria  
Croatia  
Cyprus  
Czechia  
Denmark  
Estonia  
Finland  
France  
Georgia  
Germany  
Greece  
Hungary  
Iceland  
Ireland  
Israel  
Italy  
Kazakhstan  
Kyrgyzstan  
Latvia  
Lithuania  
Luxembourg  
Malta  
Monaco  
Montenegro  
Netherlands (Kingdom of the)  
North Macedonia  
Norway  
Poland  
Portugal  
Republic of Moldova  
Romania  
Russian Federation  
San Marino  
Serbia  
Slovakia  
Slovenia  
Spain  
Sweden  
Switzerland  
Tajikistan  
Türkiye  
Turkmenistan  
Ukraine  
United Kingdom  
Uzbekistan

WHO/EURO:2023-7828-47596-70065

### **World Health Organization Regional Office for Europe**

UN City, Marmorvej 51,  
DK-2100 Copenhagen Ø, Denmark  
Tel.: +45 45 33 70 00 Fax: +45 45 33 70 01 Email:  
eurocontact@who.int  
Website: [www.who.int/europe](http://www.who.int/europe)