Creating the Strategic and Technical Advisory Group of Experts (STAGE) to advance maternal, newborn, child, adolescent health and nutrition: a new approach

The Strategic and Technical Advisory Group of Experts

INTRODUCTION

The Strategic and Technical Advisory Group of Experts (STAGE) for Maternal, Newborn, Child, Adolescent Health and Nutrition (MNCAHN) which advises the Director-General of WHO, marked its first anniversary in April 2021 as it concluded its third virtual meeting. STAGE has 31 members from all WHO regions and includes the key discipline groups that focus on MNCAHN. STAGE is an independent advisory group that takes a critical look at initiatives and programmes at WHO related to MNCHAN. STAGE provides an opportunity to monitor progress, connect agendas and groups and is a space to facilitate synergies across WHO departments, as well as with other United Nations (UN) agencies.

STAGE was created in response to the global review to improve child survival and health that highlighted the need for a global expert group to appraise evidence, provide advice on interventions and implementation strategies and improve alignment between global and national stakeholders. This review, along with the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016–2030) articulated the need to address the broader determinants of health, and to move beyond a focus on survival to thrive and transform contributing to the Sustainable Development Goals (SDG). STAGE, while advising and helping WHO, brings together comprehensive and connected perspectives and is committed to making recommendations that support countries and regions. As a global advisory body, the observations and recommendations of STAGE will be relevant not only to WHO but to all partners, including other UN agencies and donors who can make guided investments.

STAGE was launched in the early months of the COVID-19 pandemic and this has shaped...
much of the discussions. Throughout our meetings, we have recognised the incredible sacrifices being made by health workers around the world, often at considerable personal risk where personal protective equipment, vaccines and care are inadequate. Health workers are striving to deliver critical MNCAHN services despite considerable disruptions which threaten to unravel progress made over the past decade. STAGE recognises that no mother, newborn, child or adolescent is safe until they and the health workers who look after them are safe, including access to vaccines and other tools for infection prevention, as well as safe from violence, burn-out and poor health.

As well as three formal meetings to articulate recommendations, STAGE also established working groups, that met frequently, to enable deeper engagement on specific areas of work. Meetings have actively engaged and co-opted people from WHO headquarters and regional offices and members of non-governmental organisations to explore diverse opinions, prior to finalising STAGE recommendations. In its first year, STAGE provided recommendations on some of the key strategic challenges WHO needs to tackle to improve MNCAHN outcomes including addressing COVID-19 disruptions. As it moves forward, STAGE will narrow its agenda to specific topics where WHO and the global MNCAHN community seek guidance. To support this transition, and ensure its future agenda is responsive to expressed needs, STAGE will seek global inputs and oversee a prioritisation process.

**MNCAHN NEEDS IN A PANDEMIC**

STAGE’s birth in the context of an unprecedented pandemic revealed the importance of sustaining essential services, including MNCAHN. STAGE recommended strengthening coordination in the measurement of disruption and mitigation efforts to reduce the impact of the pandemic on MNCAHN services. Facilitating a more effective response for mothers, newborns, children and adolescents at times of shock or crisis situations requires real-time quality data at the country level and this has largely been absent. WHO has provided recent guidance on using routine data to analyse disruption and mitigation efforts to reduce the impact of the pandemic on MNCAHN services. STAGE further emphasised the need for sustained investment and local ownership, for relevant, robust and reliable health information systems.

Having a critical review of solutions and learning from countries during the pandemic will support resilience against inevitable future disruptions, including the resurgence of COVID-19 infections. STAGE recommended that WHO, with other partners, manage the efforts to optimise research, minimise duplication and advised on the collation and synthesis of the many studies to enhance global knowledge of critical interventions that better anticipate needs and maintain essential MNCAHN services during shocks. STAGE also highlighted that, without healthcare workers, there will be no recovery, no ‘building back better’, and the pandemic will lead to a seismic gap in the health workforce.

**EVIDENCE TO IMPACT**

STAGE has made key recommendations to improve the translation of evidence-based guidelines into successful programmes at the country level, especially in difficult and resource-constrained environments. An example of this translation is to support the scale-up of Kangaroo Mother Care (KMC) especially with the release of the findings from the Immediate KMC trial. STAGE will oversee a working group with wide membership to develop a position paper and implementation strategy to guide the investment and scale-up of KMC within an integrated maternal and newborn care services approach. At a broader level, STAGE also recommended that WHO support the formation, or consolidation, of Regional and National Technical Advisory Groups to provide advice based on local epidemiological and equity concerns and monitor the progress of national MNCAHN goals.

**MATERNAL AND CHILD HEALTH REDESIGN: TAKING A LIFE-COURSE APPROACH**

The strategic shift from survive to thrive and transform in child and adolescent health, accompanied by a framework for interventions at different stages of life, was presented by WHO and approved by STAGE. WHO, in collaboration with UNICEF, will develop evidence-based packages of interventions for maternal and child health along the life course and through platforms which they can be delivered, accompanied by indicators, programme guidance and tools to support implementation. STAGE will regularly review and steer these outputs.

STAGE supported WHO’s visionary work with UNESCO to make every school a Health Promoting School. This recognises the untapped potential of schools to promote health and well-being of children and adolescents, as a core consideration within the education process and a measure of performance of national education systems.

**CONCLUSION**

In conclusion, STAGE is advising and supporting the Director-General of WHO on priority areas to improve MNCAHN outcomes to achieve the SDGs. STAGE’s work will continue to address universal health coverage, which has been interrupted by the pandemic, and we have a clear emphasis on cross-sectoral approaches. However, for STAGE recommendations to have broad and sustained impact requires the commitment of, not only WHO, but all stakeholders including other UN agencies, governments, non-governmental organisations and the private sector.

**Acknowledgements** Thank you to Dr Anshu Banerjee, Dr Beena Varghese and Dr Tehsiri Shah from the WHO for assistance in writing this Commentary.

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Contributors The authors of this Commentary are all current STAGE member.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; internally peer reviewed.


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