Report of a Meeting: WHO/FIGO Alliance for Women's Health

FIGO Headquarters, London, Monday, June 12, 2006 Attended by Jane Schaller on behalf of IPA

Background: FIGO is the International Organization of Obstetricians and Gynecologists. For some years there has been a structure called the WHO/FIGO Alliance; the name has now been changed to the WHO/FIGO Alliance for Women's Health. IPA has occasionally been invited as a visitor to the meetings of this Alliance, but in recent years IPA and FIGO have not had close relationships. In the past several years, IPA has tried to establish working relationships with FIGO, and this is now even more important since the advent of the Partnership on Maternal Newborn and Child Health where both FIGO and IPA have seats on the Steering Committee. As a result of IPA overtures, IPA has now been made an official member of the WHO/FIGO Alliance for Women's Health, which holds a meeting once a year attended by FIGO officials, representatives of UN agencies, and several NGOs.

This meeting on June 12, 2006, represented the annual meeting of the Alliance, and was attended by representatives of FIGO (president-elect, past president, secretariat), WHO Reproductive Health, UNFPA, International Planned Parenthood Federation, and IPA. Absent were representatives of the International College of Midwives, UNICEF, and the World Bank.

Prior to the meeting, Jane Schaller met with FIGO officials for a cordial discussion about forging closer working relationships between FIGO and IPA. Jane commented on the IPA interest and expertise in newborn survival and health, the need for adequate birth attendance with needs of both mother and baby in mind (noting that in most situations in the developing world many births are at home and attended if at all by a single attendant), healthy pregnancies which rest on the health of girls and adolescents, and specific issues such as HPV and HIV. IPA expressed desire to work as a partner with FIGO on common issues, and commented that we should do all we can to avoid competition between issues of mothers and issues of children. FIGO replied that these were good ideas, and that we should indeed facilitate good working relationships in the future. In this regard they have now made IPA an official member of the Alliance for Women's Health, will include IPA in their pre-congress workshop at the international FIGO meeting this fall, and will welcome consideration of other joint activities.

The agenda of the Alliance meeting included:

- Election of chair person and rapporteur (Paul Van Look of WHO and Marie Christine Szatybelko of FIGO serrespectively).
- Discussion of terms of reference for the Alliance: This Alliance is essentially a partnership between FIGO and WHO, with other participants. It was of interest that FIGO proposed that the title be changed to Alliance for Women's and Girl's Health; there was consensus, however, after discussion that this was too broad and it was appropriate to retain the current title, while being aware of the importance of girls' health to women's health. I concurred with this entirely. The mission of the Alliance is to promote increased awareness and commitment concerning women's health; the term "sexual and reproductive health" was added to this. The membership of the Alliance will be FIGO, WHO, ICM, International Planned Parenthood Federation, UN Population Fund (UNFPA), World Bank, UNICEF, and the IPA. Meetings of the Alliance will be held at least once a year; this group will probably become more active. Functions of the Alliance include educational workshops and activities, advocacy, providing public information, and sharing information between organizations and exploring joint activities or areas of work.

- Collaboration on current FIGO projects: Current FIGO projects or areas of interest were discussed including 3 recent FIGO statements: (carcinogenicity of estrogen-progestin combinations, postpartum hemorrhage, and registration of all maternal deaths) and one action area (postpartum fistula). FIGO resolutions or proposals can be made by various FIGO working groups and then presented to the FIGO general assembly for affirmation at the time of their triennial congresses. Concerning these topics, IPA commented on the need for reporting and registration of newborn deaths as well as maternal deaths, and on its possible roles in prevention of post-partum fistula. These fistulas are common in the developing world where many births are poorly attended. No one seemed to know of studies as to etiology but known factors include too early age at first child birth, female genital mutilation, and restrictive bone structure which may be related to poor nutrition (including rickets). The IPA could play a useful role in addressing these factors, and FIGO would welcome our participation.
- Fundraising for projects: FIGO would welcome joint proposals with IPA in the future in areas of mutual interest.
- The Pre-Congress Workshop on Access to Reproductive Health Care: Impact of Emerging Issues to be presented at the FIGO Congress at Malaysia November 2-3, 2006. This workshop is now being organized by Dorothy Shaw the incoming President of FIGO. IPA will be included in the workshop. Areas of mutual interest include reproductive health services for adolescents and young people, and HPV. The outcome of this workshop will result in some action items which will be presented to the General Assembly at the Congress for affirmation.
- Date and time of next meeting: the Alliance will have an official meeting again at the time of the FIGO Congress in November. It was noted that the Alliance should become more active, and that other options and face-to-face meetings exist for keeping activity going.
- Other business: Paul Van Look announced that Lancet was publishing a series on maternal health or maternal survival, and produced an outline which no one from FIGO had been consulted about or knew about. The authors have already been selected. FIGO noted that they would like to have been consulted in advance as they represent the international academic and professional communities of OB/GYN. This is the same issue that all of us have been facing: the lack of a seat at planning tables for professional societies.

Conclusions from this meeting: This Alliance provides a formal vehicle for IPA and FIGO and other organizations to work together around areas of mutual interest in maternal and child health. We should pursue and strengthen these relationships.

Specific recommendations for IPA include:

- Formal IPA acknowledgment of our participation in the WHO/FIGO Alliance for Women's Health
- Inclusion of FIGO when appropriate in IPA endeavors, including a plenary speaking spot for FIGO at the Athens Congress and consideration of a joint workshop on maternal and child health at the Athens Congress.
- Specific IPA input into the areas of postpartum fistula (early marriage and child bearing, female genital mutilation, poor nutrition), girls' and adolescent health and reproductive health, HPV and HIV, and newborn care and appropriate birth attendance with attention to both mother and baby.
- Collaboration with FIGO to emphasize the worth of professional societies to global maternal and child health initiatives and policies.

- Enhance country level relations between pediatricians, obstetricians, midwives and nurses around issues of maternal and child health.
- Develop regular channels for mutual sharing of information.
- Identify IPA links with FIGO: These include Patricia Hamilton, the new President of the RCP, a neonatologist and who works closely in practice with the executive director of FIGO; Zulfiqar Bhutta who has links to the FIGO Committee on Maternal and Newborn Health; and Jane Schaller who has established a good working relationship with Dorothy Shaw, the incoming President of FIGO.
- Continuing relationship through the PMNCH, which also includes a relationship with ICM and ICN.