

## Accelerating Action on Child Health

The year 2035 is just 20 Times Square Ball drops, 10 congressional sessions, and 5 presidential elections away. But, with the world working toward the clear goal of ending preventable child and maternal deaths by the year 2035, we can and should make an incredible difference in the health of women and children in the poorest places in just two decades.

This year, to build momentum for ending preventable child and maternal deaths, RESULTS is supporting new legislation that would require the United States government to increase the focus and effectiveness of programs that are saving the lives of moms and kids in developing countries.

This brief includes:

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## The Basics: What Saves Lives?

### Child Health

Globally, each year 6.3 million children still die of mainly preventable and treatable causes before they reach their fifth birthday.<sup>1</sup> Additionally, 289,000 women die from pregnancy-related causes each year.<sup>2</sup> The majority of these deaths occur in the poorest places in the world. **But the latest evidence now points to the opportunity to put an end to preventable deaths of mothers and children globally by 2035.**<sup>3</sup>

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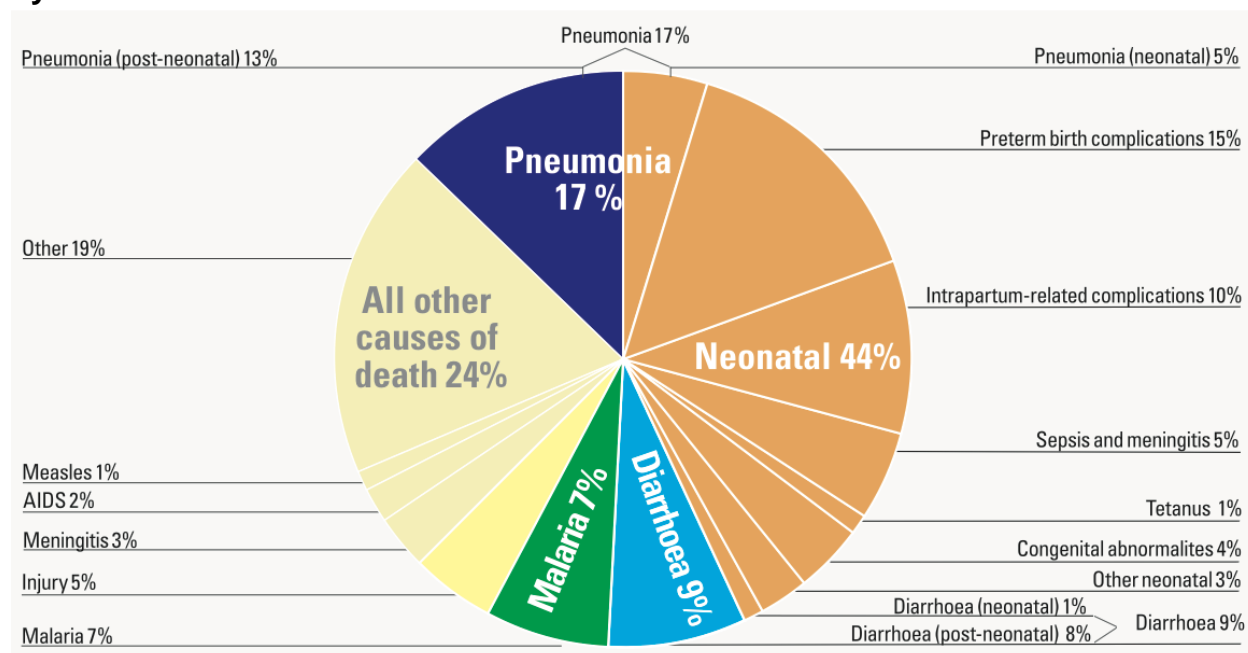
1 UNICEF, [Committing to Child Survival: A Promise Renewed, Progress Report 2014](#)

2 Ibid.

3 UNICEF and USAID, [Child Survival: Call to Action, Ending Preventable Child Deaths, Summary Roadmap, June 2012](#)

We know how to end preventable maternal, newborn, and child deaths. Most causes are treatable and preventable, and two of the leading causes of child death, pneumonia and diarrhea, together account for more than one-fourth of under-5 mortality.<sup>4</sup>

### 2013 UNICEF chart on global distribution of deaths among children under age 5, by cause:



As child deaths from diseases like malaria and measles have decreased globally because of better immunization programs and access to bed nets, neonatal deaths have grown to now account for 44 percent of the total under-five deaths. UNICEF reports that globally 1 million children die on the day they are born; 2 million die by the end of their first week of life.<sup>5</sup>

Another leading issue in child health is malnutrition. Undernutrition is attributed as an underlying cause of death in almost half of all child death; it also compromises maternal health during pregnancy and causes low birth weights.<sup>6</sup>

### Proven Interventions

Increasing access to basic health services in the hard to reach and poorest places – focusing on equity – has been found to vastly improve returns on investment by averting far more child and maternal deaths and by increasing the health of people. Across developing countries, some of the most life-saving, cost-effective, and evidence-based interventions<sup>7</sup> to save the lives of mothers and children are:

4 Ibid.

5 UNICEF, [Committing to Child Survival: A Promise Renewed, Progress Report 2014](#)

6 Black, R., Cesar, V., Walker, S., Bhutta, Z., et al, 2013 Maternal and Child undernutrition and overweight in low-income and middle income Countries [online]. *The Lancet*. Available at The Lancet <http://www.thelancet.com/series/maternal-and-child-nutrition> . Accessed June 2015

7 USAID, [Acting on the Call: Ending Preventable Child and Maternal Deaths Report, June 2014](#)

- Strengthening routine immunization systems to prevent basic diseases such as measles and whooping cough while also increasing access to new and underutilized vaccines, such as the pneumococcal and rotavirus vaccines to prevent leading causes of pneumonia and the severest forms of diarrhea;
- Distribution and use of insecticide-treated bed nets to stop malaria;
- Treatment of leading killers, including antibiotics to treat pneumonia and oral rehydration therapy and zinc supplementation to treat diarrhea;
- Prenatal care and management of delivery care for mothers;
- Community management of key nutrition interventions such as promotion of exclusive breast feeding and vitamin A supplementation for malnutrition;
- Access to safe water, sanitation, and hygiene; and
- Training more health workers to increase access to community health services for mothers and children, including skilled birth attendants.

## Gavi, the Vaccine Alliance

Two of the world’s leading causes of death for children are not complicated, incurable diseases: they are diarrhea and pneumonia. Many of those deaths can be prevented with a vaccine, if only a child has access to it.

In the world’s poorest countries, parents will sacrifice huge portions of their income, walk for miles, and wait in line for hours for these vaccines — or simply miss out. Built to tackle this challenge is Gavi, the Vaccine Alliance. Gavi helps empower low-income countries to ensure vaccines reach even the poorest, most vulnerable children.

Gavi is a public-private partnership dedicated to protecting children from vaccine-preventable diseases. Gavi support enables developing countries access to new and underutilized vaccines at reduced cost and supports the introduction and scale-up of these vaccines into routine immunization systems to ensure children in the most remote places have access.

### Vaccines: A “Best Buy”

Vaccines are widely regarded as one of the "best buys" in global health. While other critical health interventions may cure or treat illness, vaccines prevent children and adults from getting sick in the first place. By preventing deaths, promoting health, and reducing the burden on stretched health care systems, vaccines are extremely cost-effective.

**Since 2000, Gavi has supported the immunization of over half a billion children in poor countries, which will save over six million lives.<sup>8</sup>**

Recognizing the critical role of fully immunizing children in ending preventable child deaths, leaders from around the world gathered at the Gavi Pledging Conference in Berlin, Germany in

<sup>8</sup> Gavi, the Vaccine Alliance, [www.gavi.org](http://www.gavi.org)

early 2015 to commit resources to the Gavi's five-year strategy to immunize an additional 300 million children, which will save another five to six million lives. To support this strategy, the U.S. pledged \$1 billion dollars over fiscal years 2015-2018.

## Nutrition and the First Thousand Days

Nutrition sets the foundation for human health and economic development, yet malnutrition is one of the least addressed development challenges. Undernutrition – a form of malnutrition – contributes to almost half of under-five child deaths annually and contributes to the stunting of 165 million children every year.<sup>9</sup> This condition can cause serious, often irreversible, physical and cognitive damage. Without urgent and intensified action to improve nutrition, progress on hunger and poverty reduction will be harder and costlier to achieve.

The economic and societal implications of malnutrition are immense.

Undernutrition drains billions of dollars in lost productivity and health care costs from poor countries. Increased nutrition is proven to have enormous macro-economic impact, boosting a country's GDP through greater workforce productivity and health care cost savings.

A 2013 study in the British medical journal, *The Lancet*, showed that the quality of a person's nutrition early in life, particularly during the 1,000 days

between a woman's pregnancy and her child's second birthday, can determine the future course of the child's health, educational attainment, and lifetime earning potential.<sup>10</sup> The study also identified the need to scale up 10 nutrition-specific interventions including exclusive breast-feeding, micronutrients, iron treatments for pregnant women, and therapeutic treatment for

### ***The History: The Child Survival Revolution***

*Thirty-five years ago RESULTS began with a clear mission: end hunger and the worst aspects of poverty in the world. Around the same time, in the early 1980s, UNICEF reported that globally 14 million children under the age of five died every year from mainly preventable and treatable causes and the vast majority of these deaths were in poor countries. Our advocacy efforts converged when UNICEF launched the first "Child Survival Revolution" which focused on a series of life-saving interventions aimed at drastically reducing child mortality.*

*The then Executive Director of UNICEF, Jim Grant said, "To allow 40,000 children to die like this every day is unconscionable in a world which has mastered the means of preventing it."<sup>1</sup> Grant was nicknamed "The Mad American" because he believed we could and should prevent the deaths of millions of kids by scaling up cost-effective interventions. RESULTS and our global partners agreed.*

*Advocacy in the early years of RESULTS directly led to the first-ever funding allocated for Child Survival at \$25 million in fiscal year 1985. Annually, the U.S. programs that focus on global child and maternal health are now over 30 times that amount.*

9 Black, R., Cesar, V., Walker, S., Bhutta, Z., et al, 2013 Maternal and Child undernutrition and overweight in low-income and middle income Countries [online]. *The Lancet*. Available at The Lancet <http://www.thelancet.com/series/maternal-and-child-nutrition> . Accessed June 2015

10 Ibid.

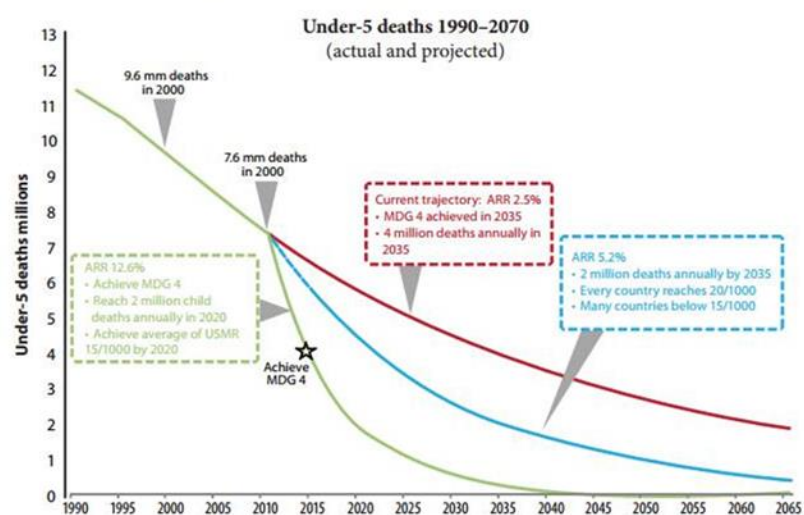
acute malnutrition to save more lives and reduce stunting. The U.S. must increase nutrition investments to support nutrition outcomes particularly for women and young children in the 1,000 day window.

## The Opportunity

### 2012: A Call to Action and 2014: Acting on the Call

Since the late 1980s, child mortality has steadily decreased, but with the rise of the AIDS epidemic, shifting areas of conflict, and other humanitarian crises, the momentum stagnated. In 2000, the world set bold targets around the Millennium Development Goal (MDG) of cutting child mortality by two-thirds by 2015, but by 2012 the annual rate of reduction in child mortality was still not on pace to meet the goal.

Figure 2. Accelerating the progress on child survival – what can the world achieve if countries increase their annual rate of reduction?



Source: UNICEF State of the World's Children 2012; The UN Inter-agency Group for Child Mortality Estimation, Levels and Trends in Child Mortality: Report 2011, 2011; Team analysis from 2035 onward based on straight-line ARR reduction from UNICEF numbers 1990-2035

To refocus global efforts on child and maternal health, in June 2012 world leaders convened in Washington, D.C. to create a roadmap toward ending preventable child and maternal deaths. A global meeting known as the *Child Survival: Call to Action* was co-hosted by the United States, Ethiopia, and India, in close partnership with UNICEF. There, global leaders forged a consensus that with renewed effort we could dramatically decrease child deaths to the child mortality rates to that of developed countries – **effectively ending preventable child deaths in a generation.**

Since then, over 170 governments have signed a pledge committing their support to a movement to end preventable childhood deaths by 2035. The world made clear that failure to meet the MDG on child mortality was not acceptable and more must be done. India went on to host a country-wide call for innovation on driving down child deaths while Ethiopia hosted ministers of health from across Africa to create a plan for regional actions on child mortality.

As a follow up on the 2012 Call to Action, in June 2014 the U.S. again convened an international meeting of government partners and experts on ending preventable child and maternal deaths – *Acting on the Call.*

At Acting on the Call, the U.S. Agency for International Development (USAID) unveiled their country-by-country roadmap across 24 priority countries to scale up key lifesaving interventions.

Each country plan was matched directly to the epidemiology of each country's leading killers for moms and kids. By partnering directly with these 24 countries to scale up effective, evidence-based interventions, **USAID announced they could save 15 million children's lives and 600,000 women's lives by the year 2020.**<sup>11</sup>

Also at this meeting the U.S. announced that a Child and Maternal Survival Coordinator would be named to better streamline the budgeting, planning, and staffing processes to ensure the effectiveness of the U.S. priority goal of ending preventable child and maternal deaths.

The United States has long been a global leader in saving the lives of mothers and children, working in partnership with developing countries to increase access to lifesaving, cost-effective, evidence-based interventions. However, a high-level review by a panel of business and development leaders concluded that we will not meet our goal of saving lives without addressing underlying bureaucratic challenges limiting the effectiveness of our foreign assistance. A 2014 report from the ACES Blue-Ribbon Panel,<sup>12</sup> an external expert advisory group, identified a series of specific budget and management weaknesses impeding faster progress, including a highly decentralized planning and decision-making process, an inability to flexibly match resources with opportunities, and fragmented data collection that makes it difficult to measure progress.

USAID is implementing a number of the panel's suggested reforms, including creating clear benchmarks for success, appointing a Child and Maternal Survival Coordinator, and realigning \$2.9 billion in existing grants to improve health outcomes.

**This alone will not be enough. USAID must be held accountable to ensure clear targets are set, measured, and achieved. Strong congressional oversight is necessary to ensure USAID stays on track and delivers a coherent strategy with bold targets to reach the end of preventable maternal and child deaths.**

## Legislating Reform: Accelerating Action for Child and Maternal Health

**New, bipartisan legislation being introduced in both the House and Senate proposes reforms that will hold USAID accountable for a smarter, more effective approach to ending preventable maternal and child deaths.**

The legislation holds USAID accountable for turning their ambitious goal of saving 15 million children's lives and 600,000 women's lives by the year 2020 into a viable plan. Requiring a centralized and coherent strategy, the bill will maximize our investments, with returns measured in lives saved and healthy, prosperous communities. The bill will enshrine into law the need for:

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<sup>11</sup> USAID, [Acting on the Call: Ending Preventable Child and Maternal Deaths Report, June 2014](#)

<sup>12</sup> Blue Ribbon Advisory Panel Report on USAID, June 2014 <http://www.usaid.gov/sites/default/files/documents/1868/blue-ribbon-advisory-panel.pdf>



- A **coordinated U.S. government strategy** for ending preventable maternal and child deaths and helping ensure healthy lives by 2035.
- An ambitious strategy, targets with **clear, measurable goals**, and increased **accountability** and transparency at all levels.
- Focusing on the **poorest and most vulnerable populations**, recognizing the unique needs within different countries and communities.
- Scaling up the most **effective, evidence-based interventions** with a focus on country ownership and aligning with existing maternal, newborn, and child survival plans.
- Establishing a Maternal and Child Survival Coordinator responsible for **oversight and coordination** of resources directly linked to reducing maternal and child mortality.
- Streamlining existing resources and scaling up targeted resources to meet country demands
- Creating **new, innovative funding sources** to complement U.S. investments.

With a strategy that puts kids and mothers first, we have the chance to make sure every child, regardless of where she's born, has a healthy start to life.

## Learning from Best Practices

Current U.S. investments in maternal and child health are saving lives, but structural changes to how we coordinate our work with countries must be improved to do more, faster. We've seen successes in other global health efforts through reforms and we can learn from those examples.

**President's Emergency Plan for AIDS Relief (PEPFAR):** Faced with what some experts called the impossible task of controlling the global AIDS epidemic, the emergency response to global HIV and AIDS was an all-in effort to streamline HIV prevention and treatment programs based on high-burden country needs. PEPFAR has proven to be one of the world's most successful global health initiatives in history.

**President's Malaria Initiative (PMI):** USAID's work on malaria underwent a similar assessment which indicated a need for more coordination. This led to the restructuring of USAID bureaucracy to empower the role of the PMI Coordinator along with other reforms. PMI is now heralded for its incredible contributions toward the 4.3 million fewer malarial deaths since 2001.<sup>13</sup>

## The Stories: Global Child and Maternal Health

Whether you are speaking with members of Congress, hosting an outreach event, or looking for some inspiration, use the stories the below to advocate for a healthier future for all mothers and children, regardless of where they are born.

### Inspiring Stories

- [The World's Mothers Don't Always Get The Care They Need](#)

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<sup>13</sup> World Health Organization's World Health Report 2014

Physician and mother Dr. Bina Valsangkar shares her pregnancy story, a tale of two cities.

- [Health care workers are making a difference for #EthiopiaNewborns](#)  
Dr. Abeba Bekele explains why she is committed to promoting maternal and newborn health in Ethiopia.
- [Meet Vusi -- A Lucky Little Boy](#)  
After four years advocating for rotavirus vaccine introduction in developing countries, Hope Randall meets Teresa and her son Vusi, a child who lived because of this lifesaving vaccine.

## Inspiring Videos

- [Ending Preventable Deaths of Moms and Babies](#)  
The world has made incredible progress to reduce child mortality. But there is still more work to do.
- [#MomAndBaby are Just Fine: India](#)  
Satyawati is a mother of three living in a village in Mewat District, India. With help from a local health worker, she gives her kids the care they need to thrive.
- [The difference a midwife makes](#)  
Shagufta Shahzadi, a community midwife in Pakistan explains the difference a midwife can make to stop preventable maternal and child deaths.
- [A Promise Renewed: Global progress towards ending preventable child deaths](#)  
A 2013 UNICEF report on child mortality trends shows that the world will not meet Millennium Development Goal 4, to cut preventable children's deaths by two thirds, by 2015.
- [Living Proof Project: Rotavirus Vaccine's Remarkable Impact](#)  
Meet a father and daughter who benefited from the rotavirus vaccine.
- [A Journey of Motherhood](#)  
UNICEF and the Global Fund to Fight AIDS, TB and Malaria followed six women living with HIV throughout their pregnancies.