## Improving Nutrition Services in the Care of the III and Vulnerable Newborn and Child

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## The world ...



and child health are changing

### Under-5 mortality in 2017: Success but significant unfinished agenda



Nutrition related factors contribute to 45% of deaths in children under 5 years. Malnourished children die at higher rates from diarrhoea, pneumonia and malaria

Source: United Nations Inter-agency Group for Child Mortality Estimation (UN IGME), Levels & Trends in Child Mortality: Report 2018



Neonatal deaths are a greater percentage of all deaths across 6 out of 7 modified regions For African LMICs, all three age categories have the same percent of total deaths

### The world is urban (urban and rural population 1950 – 2050)



- 54 per cent of the world's population residing in urban areas in 2014.
- In 1950, 30 per cent of the world's population was urban
- By 2050, 66 per cent of the world's population is projected to be urban.
- The rural population has grown since 1950 and will soon peak at 3.4 billion and then decrease to 3.2 billion World Urbanisation Prospects. UN. 2014

# Urban and rural population as proportion of total population, by area. 1950 - 2050

 Urbanisation has occurred in all areas yet Africa and Asia remain mostly rural .... for now



World Urbanisation Prospects. UN. 2014



# Percentage urban and location of urban agglomerations with at least 500,000 inhabitants. 2014



 Upper, middle income countries have experience the fastest pace of urbanisation

World Urbanisation Prospects. UN. 2014

### Private sector engagement

- Both the public and private sectors are important sources of sick child care.
- The private sector serves the poor as well as the wealthy. Two in five caregivers from the poorest households and three in five caregivers from the wealthiest households rely on the private sector for sick child care.
- 96% of public sector care seekers seek care from a clinical facility, not from a community healthworker.

On average across the 24 priority countries and among

all caregivers who seek sick child care outside the home,

50% seek treatment or advice from public sector sources and 43% from private sector sources.



### The breast milk substitute (BMS) industry is large and growing

- In 2014, global sales of all baby milk formula were about US\$ 44.8 billion
- By 2019, the market value is projected to reach US\$ 70.6 billion.



# Disasters, Emergencies and Fragile states (alphabetical order)

- Drought
- Earthquakes
- Ebola
- Famine
- Migrants
- Tsunamis
- War
- Zika

**The refugee crisis:** Through the eyes of one family

> Effects on this and future generations not quantified

### Looking forward ...



### Achieving the SDGs for child health

#### Communities and families Promote health, growth and development NEWBORNS Nurturing care at home AND · Infant and young child feeding, CHILDREN nutrition SURVIVE · Care-seeking for illness AND Stimulation and care for child development THRIVE Treat sick newborns and children IMCI and iCCM jointly implemented (Primary Health Care) Referral level care

#### Prevent illness

- Immunization
- Water and sanitation, reduced indoor air pollution, safe and clean environment
- HIV prevention
- Malaria control



#### Community engagement Leadership, decision-making, participation

#### Effective health systems Leadership and governance, financing, skilled health workers, information systems and essential commodities

### World Health Assembly Global Nutrition Targets

TARGET		BASELINE 2012	TARGET FOR 2025
072	40% REDUCTION IN THE NUMBER OF CHILDREN UNDER-5 WHO ARE STUNTED	162 million	≈100 million
04	SONG REDUCTION OF ANAEMIA IN WOMEN OF REPRODUCTIVE AGE	29%	15%
e ý	30% REDUCTION IN LOW BUITH WEIGHT	15%	10%
0 A	NO INCREASE IN CHILDHOOD OVERWEIGHT	7%	≤7%
C C C C C C C C C C C C C C C C C C C	INCREASE THE RATE OF EXCLUSIVE BREASTFEEDING IN THE FIRST 6 MONTHS UP TO AT LEAST 50%	38%	≥ 50%
<b>6</b>	REDUCE AND MAINTAIN CHILDHOOD WASTING TO LESS THAN 5%	8%	<5%





## THE GLOBAL STRATEGY FOR WOMEN'S, CHILDREN'S AND ADOLESCENTS' HEALTH (2016-2030)

SURVIVE THRIVE TRANSFORM



### **Objectives**

#### 1. SURVIVE

End preventable deaths





2. THRIVE Ensure health and well-being

#### **3. TRANSFORM**

Expand enabling environments



### Nurturing care for early childhood development:

A framework for linking survive and thrive to promote health and human potential

The early years, starting from conception, are a period of special sensitivity for child development

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- The most formative experience of young children come from NURTURING CARE
- Early investment has lifelong and intergenerational benefits
- Policies, information and services are important
- Multisectoral collaboration is essential and the health sector has a special role to play



### **The Nurturing Care framework**





### Primary health care revisited Astana. 25-26 October 2018

#### From Alma-Ata towards Universal Health Coverage and the Sustainable Development Goals

To address the health and development challenges of the modern era, we need PHC that:

- empowers people and communities as owners of their health, as advocates for the policies that promote and protect it, and as architects of the health and social services that contribute to it;
- addresses the social, economic, environmental and commercial determinants of health through evidencebased policies and actions across all sectors; and
- ensures strong public health and primary care throughout people's lives, as the core of integrated service delivery



### **Breastfeeding practices over time and economic development**



For each doubling in national GDP per capita, breastfeeding prevalence at 12 months decreases by 10 percentage points



Alive and Thrive 2015



Exclusive breastfeeding improved in all three countries. The rate **tripled in Viet Nam** and reached more than **80% in Bangladesh and Ethiopia**.



Exclusive breastfeeding means giving breastmilk only and no other foods or fluids for the first six months.





James A Berkley





**KEMRI** Wellcome Trust

An unprecedented study in Bangladesh could reveal how malnutrition, poor sanitation and other challenges make their mark on child development.

BY CARINA STORES

ers began doling out a nutritional gotten," says Reynaldo Mariorell, a specialist first few years of life would reduce think of early nutritional interventions as long-tious disease or other challenges? the incidence of stunted growth.

It did. Children who got supplements grew I to 2 centimetres tailer than those in a control as adolescents, and when researchers returned worse school achievement2. In the early 2000s, women who had received completed more years of schooling and men - such as poor diel and regular bouts of diar- do brain-imaging studies," says Kakon. had higher incomes<sup>1</sup>.

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term investments in human health.

n the late 1960s, a learn of research study probably would have been largely for growth, which affects an estimated 160 million at children worldwide, is connected with these supplement to families with young in maternal and child nutrition at Emory Unibad outcomes. Now, researchers are trying to g children in rural Guatemala. They versity in Atlanta, Georgia, who led the follow-untangle the links between growth and neurowere testing the assumption that up studies. Instead, he says, the findings made logical development. Is bad nutrition alone the 💈 providing enough protein in the financial institutions such as the World Bank culprit? What about enotional neglect, infec-

Shahria Hafiz Kakon is at the front line try-Since the Gualemalan research, studies Ing to answer these questions in the slams of around the world -- in Brazil, Peru, Jamaica, Ditaka, Bangladesh, where about 40% of chilgroup. But the benefits didn't stop there. The the Philippines, Kenya and Zimbabwe - have dren have stunied growth by the age of two. As children who received added nutrition went on all associated poor or stunied growth in young a medical officer at the international Centre to score higher on reading and knowledge tests children with lower cognitive test scores and for Diarrhoeal Disease Research, Bangladesh (lolidr,b) in Dhaka, she is leading the first-ever A picture slowly emerged that being too brain-imaging study of children with stunied the supplements in the first three years of life short early in life is a sign of adverse conditions growth. "It is a very new idea in Bangladesh to

thotal disease --- and a predictor for intellec- The research is innovative in other respects, "Had there not been these follow-ups, this tual deficits and mortality. But not all stunied too. Funded by the Bill & Melinda Gates

### Growth trajectories and coronary events in adulthood

- 8760 people born in Helsinki 1934-1944 in whom childhood growth had been recorded
- 357 men and 87 women admitted or died with coronary heart disease
- Risk factors measured in 2003 people



at birth. At two years of age the children were thin; subsequently, their body-mass index

(BMI) increased relative to that of other children and had reached average values by 11

- Children who later had coronary events:
  - Smaller at birth
  - At 2 years were thin
  - BMI increased relative to that of other children
  - Low BMI at 2 years and increased BMI between 2-11 years associated with raised fasting insulin as adults (p<0.001 for both)</li>

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- We want children to Survive and to achieve their full developmental potential – to Thrive and Transform
- Mortality in children happens mainly in the first two years and nutrition remains a major consideration
- Interventions and facility care is not enough ..... without coverage and the quality of care (no intervention without a system)

# Implementing comprehensive packages at community and PHC facilities averts preventable deaths



Black Lancet 2016

## Essential interventions for child health

Community or health post*	Primary health centre†	First-level and referral hospitals‡
1 Promote breastfeeding or complementary feeding§		
2 Provide vitamin A, zinc, and food supplementation§		
3 Immunisations§¶		
4 Co-trimoxazole for HIV-positive children§	1 ART for HIV-positive children§	
5 Education on safe disposal of children's stools and handwashing§		
6 Distribute and promote use of ITNs or IRS, or both§		
7 Detect and refer children with severe acute malnutrition§	2 Treat severe acute malnutrition§	1 Treat severe acute malnutrition associated with serious infection§
8 Detect and treat serious infections without danger signs (iCCM  ); refer if danger signs appear§	3 Detect and treat serious infections with danger signs (IMCI**)§	2 Detect and treat serious infections with danger signs with full supportive care§



### Community Systems for PHC



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What does it mean to integrate nutrition into health services?

### From disease-specific to systems focus

- **Patient:** receives comprehensive, child-centered care
- **Care provider**: routinely and systematically manages co-morbidities (data driven), collaboration with providers and services
- Health manager: commitment & coordination between programs, shared accountability
- Policy maker: Negotiation, prioritization to strengthen the overall system
- **Donor**: coordination of investments, flexibility, systems focus

### **Integration is a strategy**

to improve prevention, diagnosis and care
to strengthen health systems and improve efficiencies in service delivery



### Key messages

- Optimizing existing opportunities along the lifecycle will increase efficiencies
- As systems approach is essential to deliver a package of services with quality and at scale

# Thank you



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