

CHILD SURVIVAL ACTION

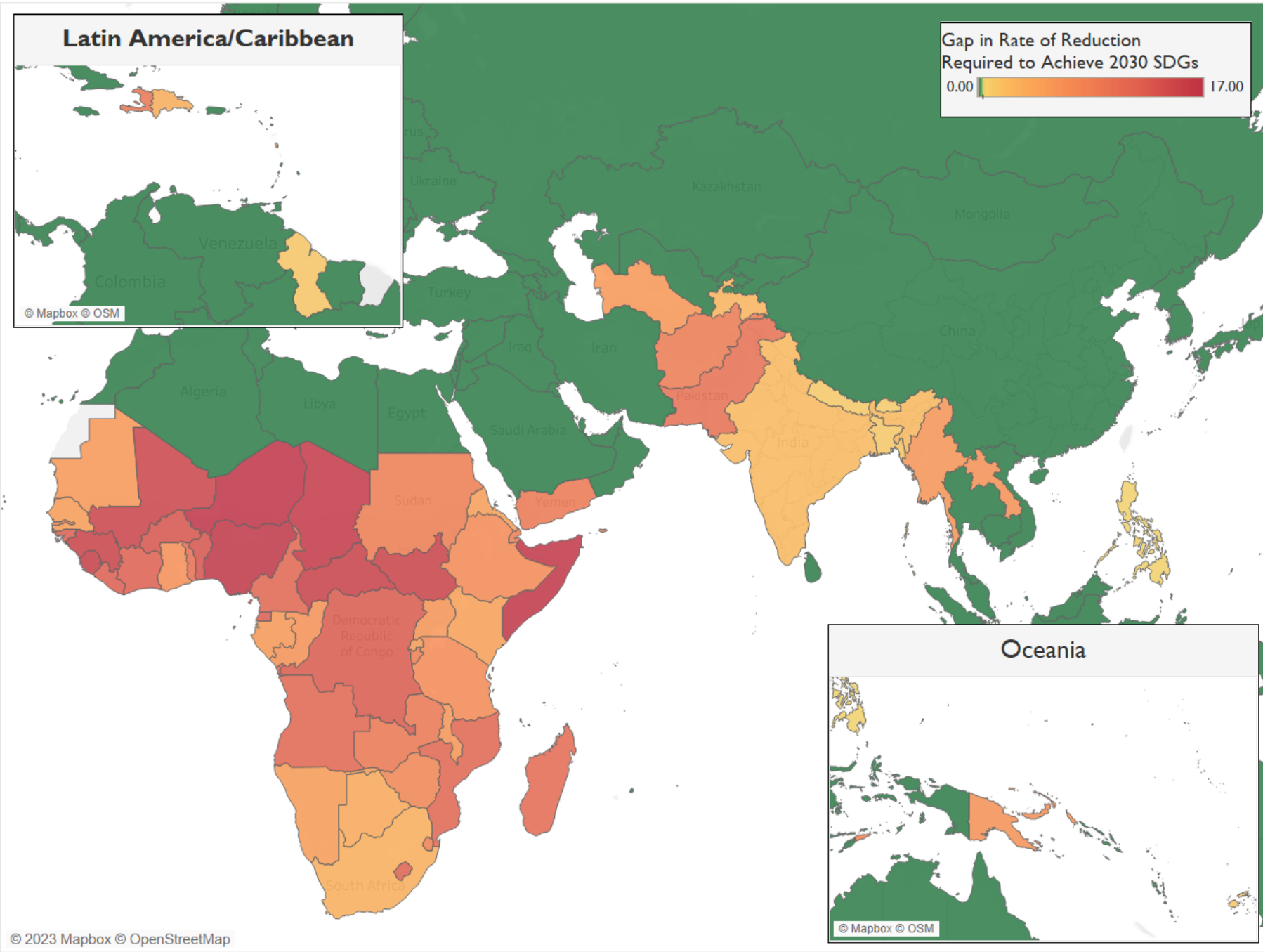
A renewed call to action to end preventable child deaths

February, 2023

Contributing Organizations: The Child Health Task Force, Global Financing Facility (GFF), Save the Children, United Nations Children's Fund (UNICEF), United States Agency for International Development (USAID), and World Health Organization (WHO).

What brings us together?

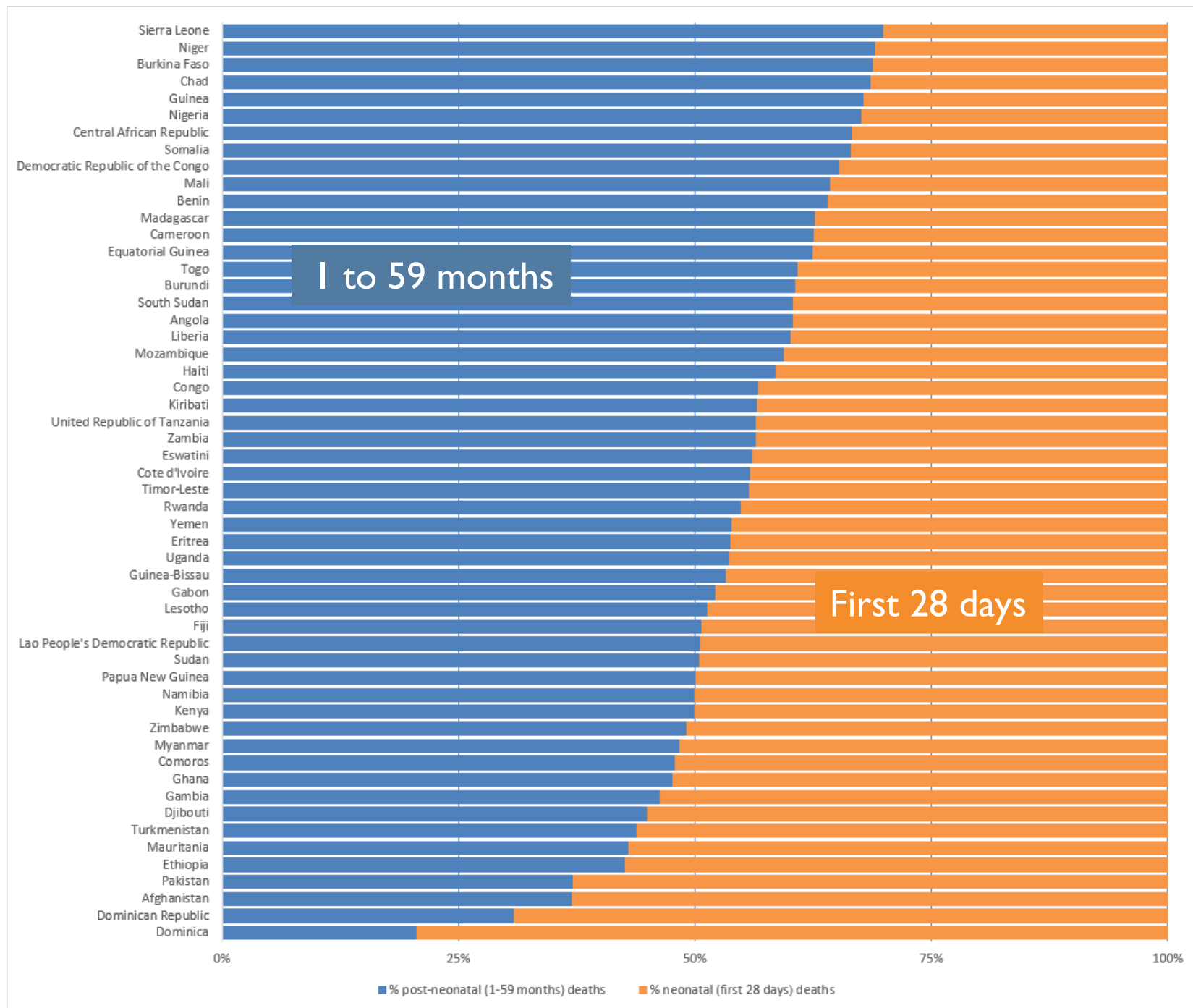
54 countries need accelerated action to meet the SDG target for under-five mortality.



Source: UN IGME Report 2022

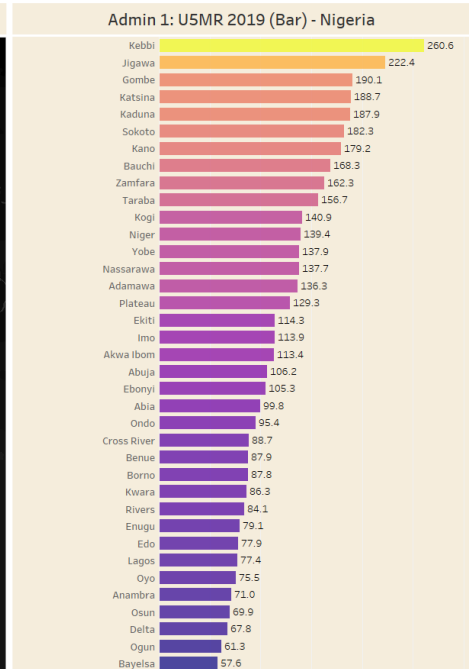
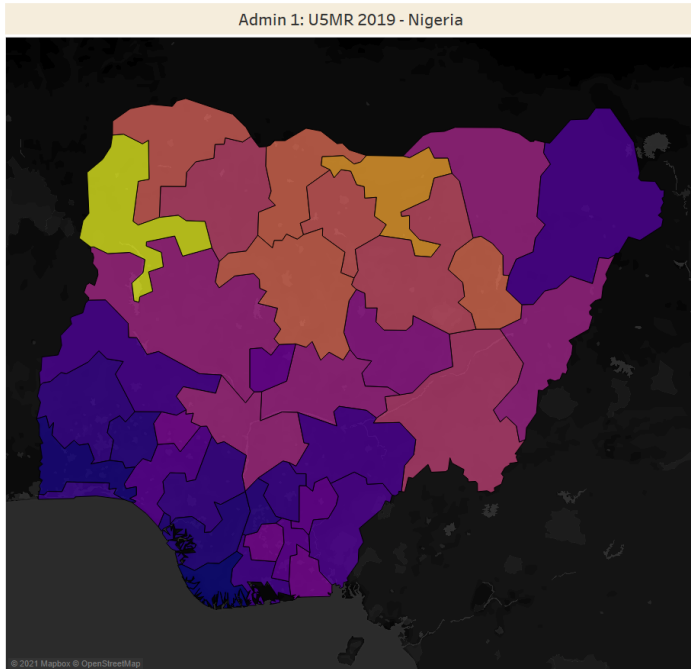
Percent of Under-Five Deaths by Age Group

A substantial proportion of under-five deaths are in the 1 to 59 month period.

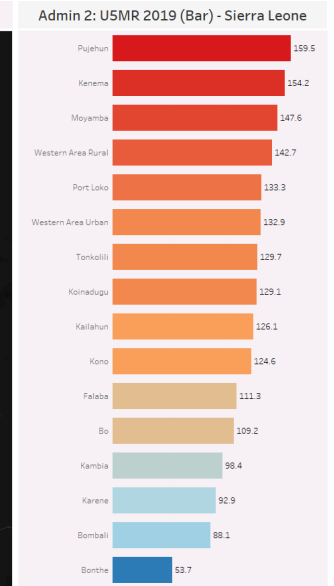
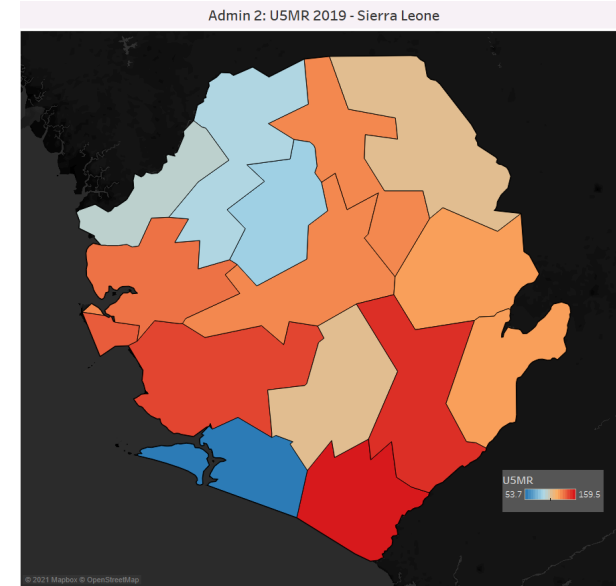


Subnational inequities: Under-five mortality rates in Nigeria, Sierra Leone and Mali

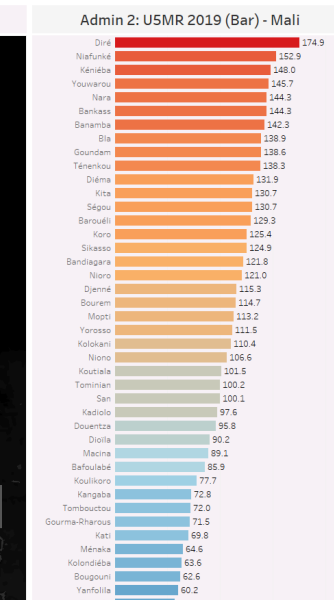
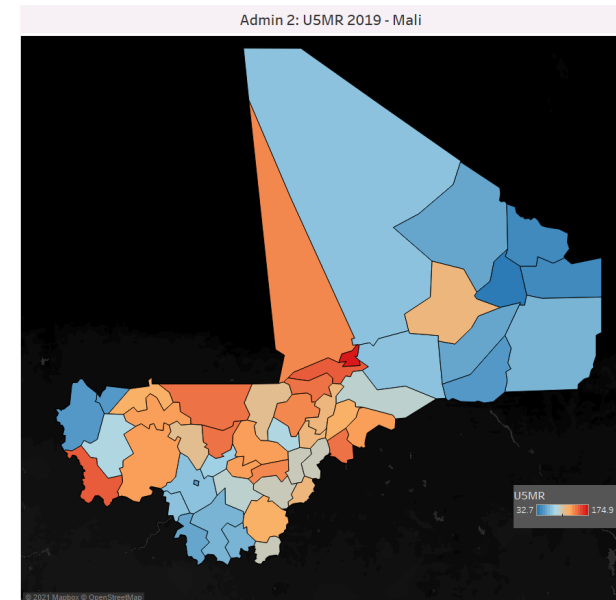
Nigeria



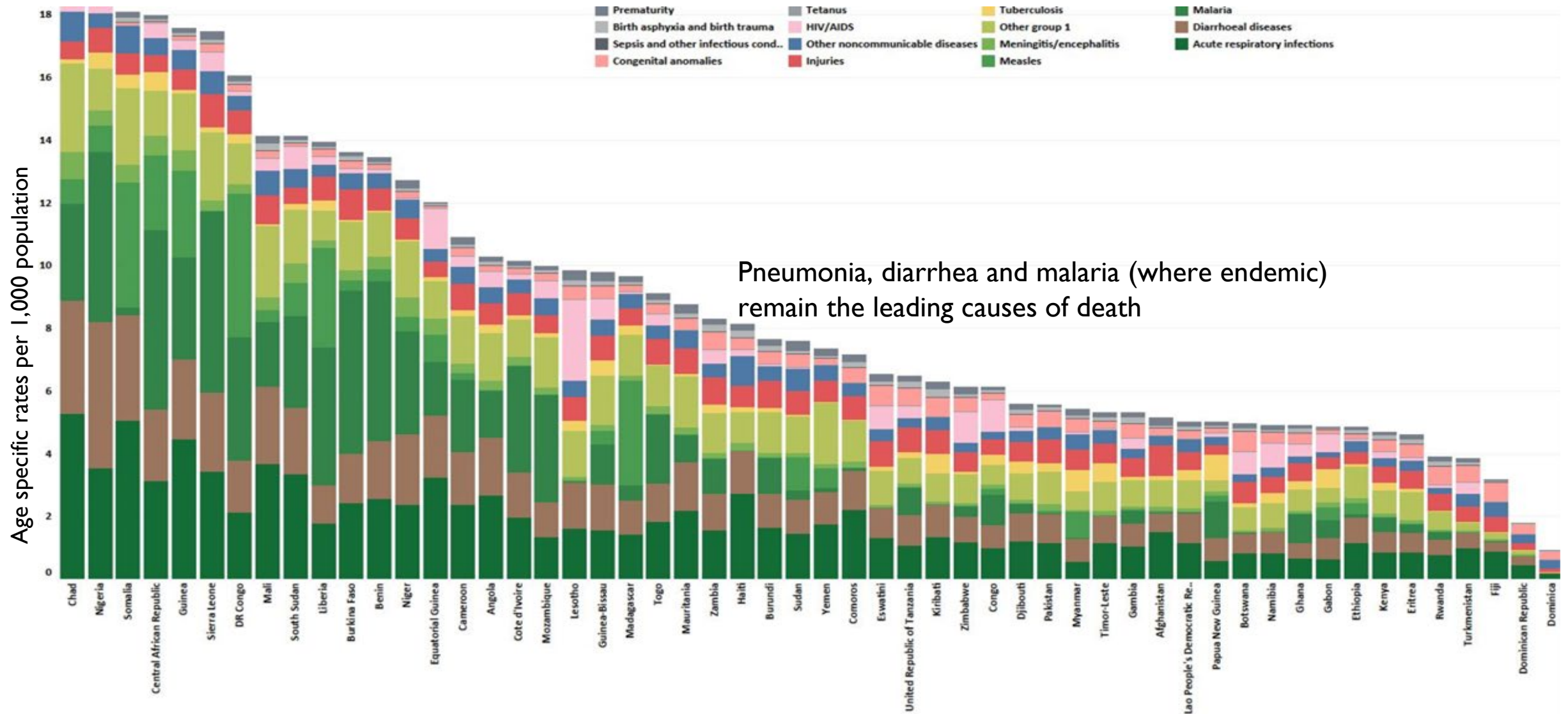
Sierra Leone



Mali



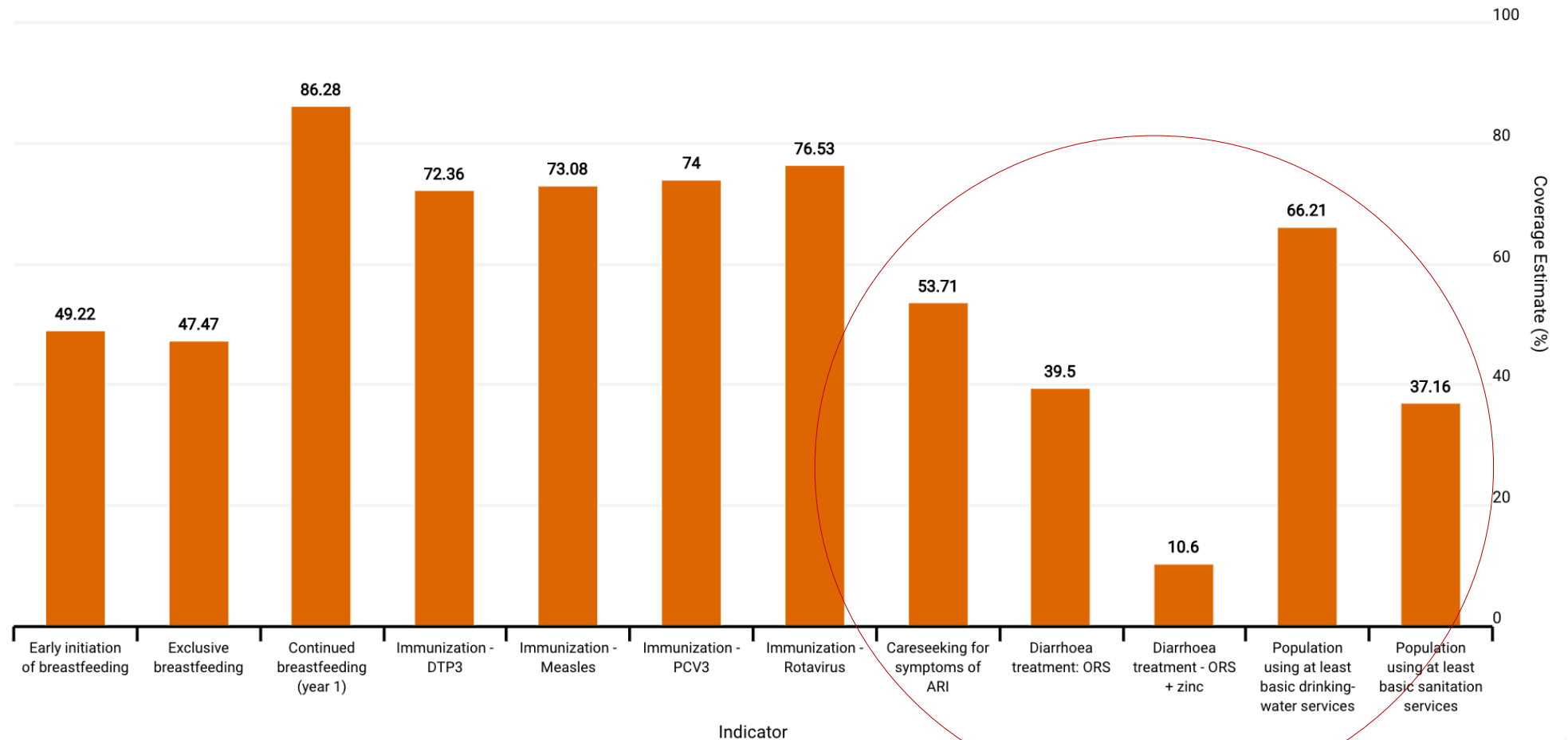
Leading causes of death in children 1-59 months old in 54 countries needing accelerated action



54 countries needing accelerated efforts to meet SDG survival targets by 2030

Coverage of Select Interventions on the Continuum of Care in the 54 Countries

- Insufficient coverage of life saving interventions
- Continued high risk factors



Source: Countdown to 2030, most recent survey (2016 or later)

What do these data show us?

The continued high post-neonatal mortality, with common infections remaining key causes of death, is an expression of increasing inequities and the multiple deprivations children in these countries face

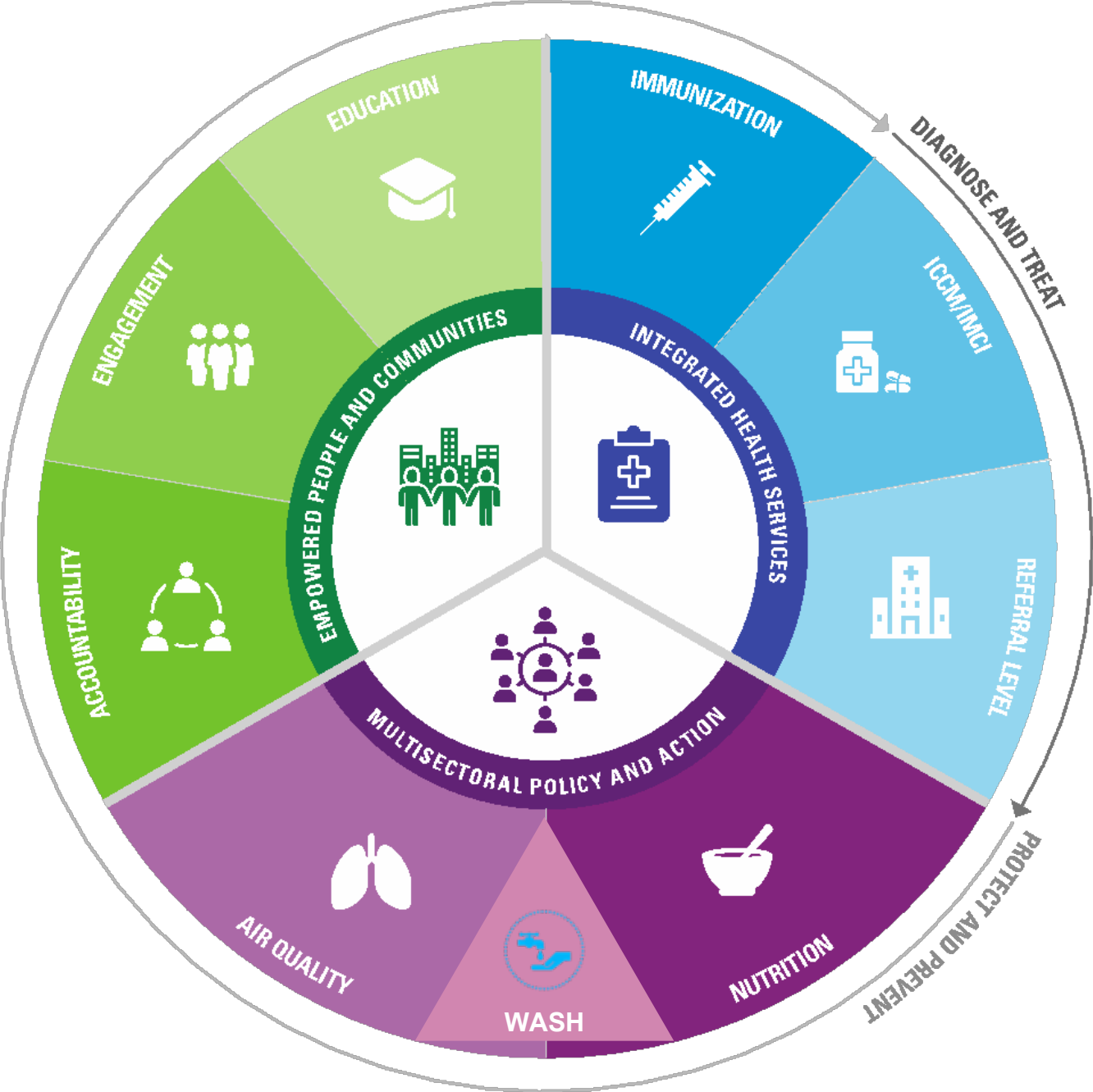
Underperforming health systems, especially primary health care and integrated service delivery

- **IMCI** has been introduced in 100+ countries, yet:
 - implementation incomplete (focus on HCW capacity & case management less so on prevention, systems strengthening & community engagement)
 - coverage is unequal, huge quality gaps
- **iCCM is key for equity agenda** – yet not institutionalized in many countries, not scaling
- **IMCI & iCCM missing focus on prevention and promotion** through meaningful community engagement
- **Referral systems & referral level care** suboptimal

An accumulation of risk factors including

- Poverty
- Food insecurity/malnutrition
- Lack of access to clean water and sanitation
- Air pollution
- fragile/humanitarian context

PHC at the core of a comprehensive response



Child Survival Action: A Roundtable Discussion for Accelerated Progress towards 2030

May 23, 2022 in Geneva, Switzerland

Panel of Ministers of Health and other global health leaders on how we can act together to achieve the 2030 target for child survival

Recording of the livestream and presentation can be accessed [here in English](#) and [ici en français](#)



Women's,
Children's and
Adolescents'
Health



Save the Children



USAID
FROM THE AMERICAN PEOPLE

Roundtable Participants

Ministers of Health

- Sierra Leone
- United Republic of Tanzania
- Chad

Ministry of Health Representatives

- Nigeria
- Somalia
- Mozambique
- Madagascar

Partners

- The African Medical and Research Foundation
- Bill and Melinda Gates Foundation
- Foreign, Commonwealth & Development Office, UK
- GAVI
- Global Fund
- Global Financing Facility
- Government of France
- Save the Children
- UNICEF
- USAID
- WHO

Take-away Messages

- Accelerated action for child survival towards 2030 is urgently needed.
 - **The data are clear** – too many children, past the newborn period, die because of common but preventable childhood illnesses.
 - **Urgent action is needed** to ensure that children survive early childhood, a critical first step in ensuring they can fully thrive.
- We know what to do!
 - More effective multi-sectoral responses that **align with national strategies and plans** and bring multi-stakeholders from WASH, nutrition, protection and health, etc. together;
 - **People-centered and quality primary health care** in facilities and communities, that is able to provide fair remuneration, training and skills building of the community health workforce;
 - **An equity-sensitive approach** that combines, not only domestic financing, external pooled investments and innovative approaches, but also a commitment to making better use of existing resources;
 - **Engaging communities** in the design and implementation of the multi-sectoral responses;
 - Utilizing **country system data** on a continuous basis to focus on vulnerable children is critical **to ensure accountability** at all levels for change.

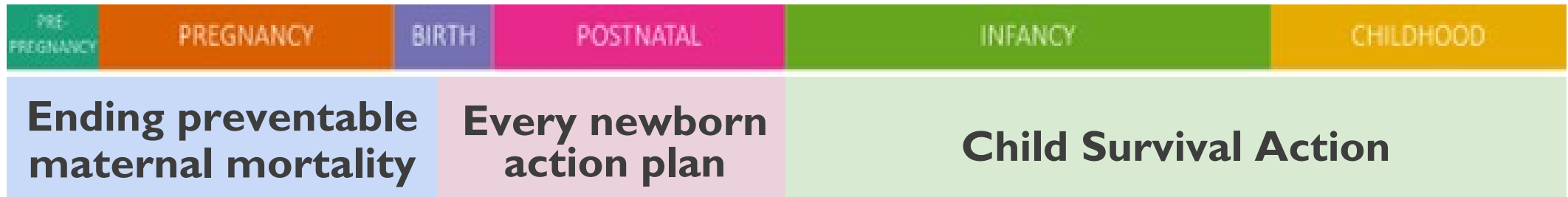
Our Goal: End preventable deaths among children 1–59 months of age

Given the need to accelerate under-five mortality reductions in 54 countries and the significant burden of mortality in the 1-59 month period...



We need to intensify commitment and expand strategic investments in child survival in infancy and early childhood (1-59 months), and address the programmatic and health system challenges that hamper progress especially in those countries that are not on track to meeting their 2030 targets.

Accelerate action throughout the lifecycle continuum



Align with efforts by other sectors and programmes

Global Action Plan
for Child Wasting

RBM Partnership
To End Malaria

Community Health Roadmap
Investment priorities to scale primary care at the community level

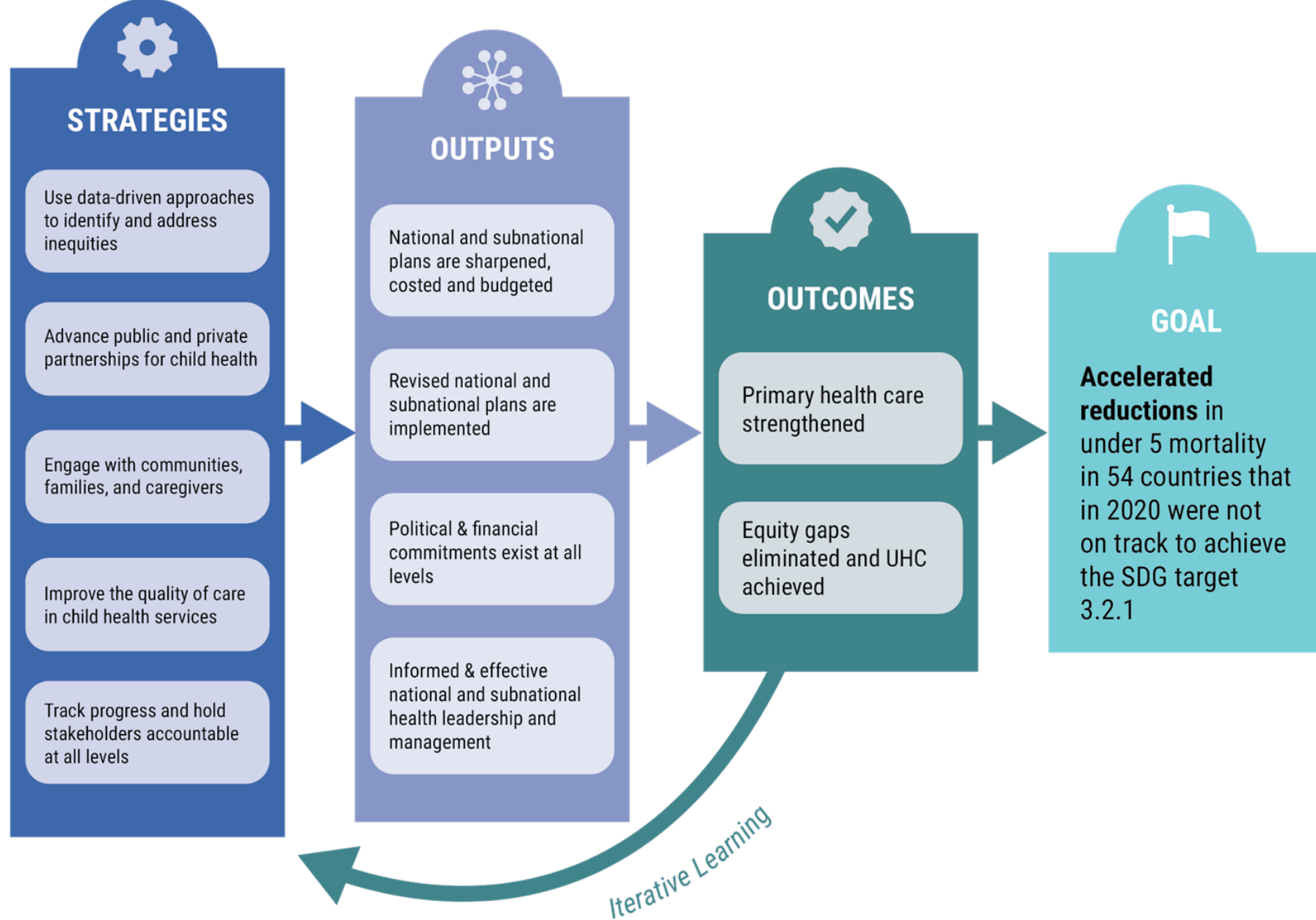


Air pollution

Child Survival Action – key messages

- 1. Focuses on the 54 countries**, 42 in Africa, that urgently need accelerated efforts to achieve the SDG3 2030 target on child mortality of 25 deaths or fewer per 1000 live births - reaching this target in all countries will avert at least 10 million under-five deaths by 2030.
- 2. Reaches the children being left behind** and at risk from leading killers - pneumonia, diarrhea, and malaria - due to malnutrition, lack of access to quality health services including immunization, unsafe water and sanitation, air pollution, conflict and humanitarian disasters, and other key risks to children's health and survival.
- 3. Strengthens primary health care** in facilities and communities to more effectively prevent, diagnose, and treat these causes of child death, and to promote good health and nutrition for all children.
- 4. Builds effective partnerships** between governments, local partners, civil society, private sector, regional and global organizations, as part of renewed commitment to child survival.
- 5. Mobilizes required resources** from domestic and international sources and sectors to deliver on this renewed vision for children's health, nutrition, and survival.

Theory of Change



GUIDING PRINCIPLES:

- Child rights to survive & thrive*
- Leave no child behind*
- Family- and child- centered care*
- Whole-of-government action*
- Accountability*

Progress to-date

February 2023

I. Country engagement

- Constituted action team
- Initial consultations with country and regional colleagues
- Co-developed with regional colleagues a country engagement approach
- Co-hosted WHA session with Sierra Leone and Tanzania MOHs
- Joint mission to Sierra Leone to support development of child survival plan

Overall

- Finalized TOC, vision document and slides
- Developed and agreed on governance structure and action team TORs

2. Results framework & accountability

- Constituted action team
- Conducted a **scoping of existing child survival indicators and frameworks** to inform the Results Framework under development

Key Event

- World Health Assembly roundtable May 23, 2022

3. Advocacy & resource mobilization

- CSA Advocacy Blueprint developed

Implementing child survival action: work streams

1. Country engagement

- Pathfinder countries: Sierra Leone and Tanzania
- Strengthen TWGs
- Forensic data analyses and costing
- Costed plans to inform advocacy
- Clearly defined priorities: roles and responsibilities

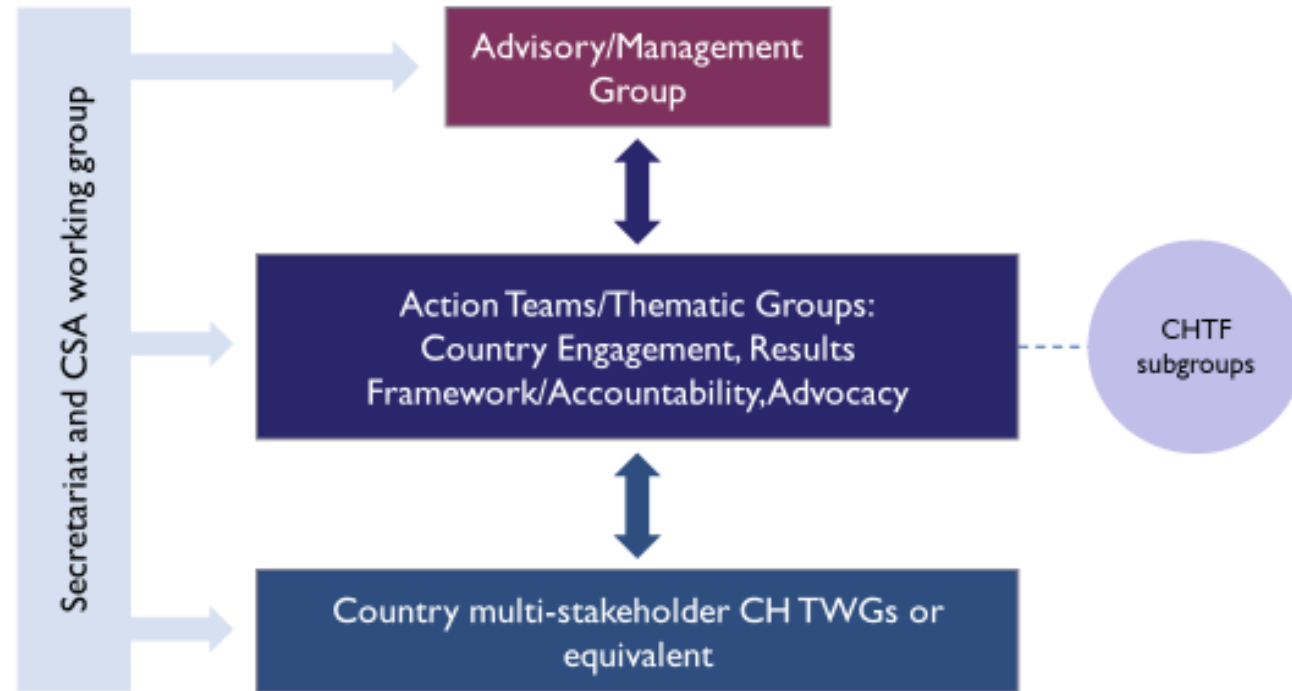
2. Results framework & accountability

- Monitoring framework
- Accountability at all levels
- Setting milestones and targets for child survival

3. Advocacy & resource mobilization

- Targeting different audiences – with one voice
- In-line with other complementary efforts – along the continuum (EPMM, ENAP) as well as disease specific (e.g. pneumonia)
- Galvanize leadership & buy-in of key partners at global, regional, and country levels
- Resource mobilization and stakeholder engagement

Governance structure



Partnering with Countries

The initiative focuses on countries in the African region that need accelerated actions to reach the SDG target for under-five mortality, particularly those with high mortality in the 1-59 month period. As of February 2023, the initiative is partnering with Nigeria, Sierra Leone, South Sudan, and Tanzania. Moving forward, the CSA initiative is prepared to partner with any country in which the government expresses interest and commitment to reducing under-five mortality. The CSA initiative seeks to leverage opportunities in countries such as the revision of child health or RMNCAH-N strategies, investment cases, budget renewals, and other government-led and partner-supported initiatives.



THANK YOU

