EVENT SUMMARY

Child Survival Action (CSA) Luncheon
on the occasion of the 77th World Health Assembly, Geneva, Switzerland
May 26, 2024, 12:30–14:15
Chair: Hon. Minister Dr Austin Demby, Sierra Leone

“We are fighting for people at the foundation of their life. If we get it right, we set them up to be the best people they can be in their life. If we get it wrong, they will pay the price for the rest of their lives.” - Minister Austin Demby

Key Takeaways
1. Leadership, commitment and accountability at the highest level are required to address the unacceptably high number of child deaths in Africa.
2. Common challenges call for increased collaboration and shared solutions across the continent.
3. There are opportunities and a need to use existing resources more efficiently.
4. Integrating the continuum of care of MNCH and integrating vertical programming (immunization, malaria, HIV, etc.), into PHC will be critical to success.

Introduction and Overview of CSA
- The event emphasized the importance of collective efforts to improve the well-being of the ‘most vulnerable among us.’
- There is a need for a refocused approach to child survival, and it is important to have a competent health workforce to support the continuum of care for women, newborns, and children.

Overview of MNCH Resolution for WHA
• An overview of the resolution was presented, addressing the challenges faced by African nations, including those facing fragile/humanitarian situations such as Somalia, in meeting the SDG targets, with a focus on maternal and child mortality rates.

• The need for **collaboration and shared solutions** across Africa was emphasized, with a call for increased attention and investment in countries with weak health systems.
  - “The challenges are in common, and the solutions and interventions are in common.”
  - The causes of weak health systems are not the same in each country, but actions like ensuring stock of essential medicines, training critical health cadres etc. to improving access and quality of services are shared solutions.

**Roundtable Discussion**

• The discussion stressed the **urgency** of the situation in Africa, calling for bold steps to change the status quo and meet SDG targets.

• Countries discussed their dedication to improving health outcomes through **commitment and prioritization** of health by the government, focusing on vaccination to reduce the number of **zero dose children**, and **community health**.

• Speaking to the importance of **political commitment**, countries highlighted their efforts in maternal and child health, **immunization**, and addressing issues of **poverty, family planning, HIV, and malnutrition**.

• Speakers highlighted the **shared challenges across Africa**, emphasizing the need for **access to quality health services** and effective vaccine rollouts.

• Addressing **equity and access** issues was a focus, as well as the need for collaboration with organizations like WHO and UNICEF. Partners also highlighted the need to strengthen human resources, sensitize citizens on key issues, and promote community health.
  - “It is essential that all our countries commit to using internal/domestic resources, as well as involve citizens in taking care of their health.”

• Speakers discussed their approach to healthcare, emphasizing the need for a **holistic, horizontally integrated system** rather than a vertical, disease-based approach. They also stressed the importance of **political will and community engagement** in supporting child health.

**Partner Remarks**

• Partners reaffirmed their commitment to child survival, emphasizing the need for a **holistic approach, data accountability, resource utilization, and urgency**. They also highlighted the need for **innovation, addressing the most vulnerable children, rapid data availability, and climate-resilient practices**. Partner remarks emphasized:
  - Holistic approaches like frontline healthcare workers and community approaches.
Primary Healthcare and Health System Strengthening.

- The need for dramatic acceleration of mortality reduction and taking a lifecourse approach.
- The need for more real-time data on progress (i.e., more than just household survey data every 5 years), acknowledging the large disparities across countries.
- Innovation — “We know what works in child survival, but we also have the unique opportunity to innovate.” — and resourcing — “We aren’t there in terms of global financial commitments relevant to how important it is.”
- The need to address fragile/humanitarian settings and climate change/resiliency.
- The need to use available resources more effectively, leverage political will, including civil society engagement, and harmonize approaches.

Closing Statement

- Minister Demby emphasized the need for alignment and collaboration, expressing confidence that all countries will meet the SDG challenge by 2030. The deficit is seen not as a discouragement but as a motivation to solve pressing issues.

Publications

- Every Newborn Action Plan (ENAP), Ending Preventable Maternal Mortality Brief (EPMM), Child Survival Action (CSA) and PMNCH 2-page document outlining six actions to reduce unacceptably high maternal, newborn and child deaths and stillbirths.
- Child Survival Action launched a technical brief assessing progress on child mortality, nutritional status, and the coverage of health interventions, focusing on countries that are off-track for achieving SDG targets.

Countries represented: Sierra Leone (Minister-led delegation), Guinea (Minister), Madagascar (Minister), Mali (Director General), Somalia (Director General). Nigeria (Permanent Representative from Geneva Mission). CSA partners represented: WHO, UNICEF, Save the Children, GFF, USAID.