

ACTING ON THE CALL 2016

ENDING PREVENTABLE CHILD AND MATERNAL DEATHS: A FOCUS ON EQUITY

RESOURCE GUIDE

Introduction

The U.S. Agency for International Development's (USAID's) 2016 Acting on the Call Report provides country-by-country updates on progress made over the past year in 24 priority countries for ending preventable child and maternal deaths, which together now account for more than two-thirds of child and maternal deaths worldwide.

Hashtags:

Primary: #MomAndBaby Secondary: #SaveMomsandKids

Handles:

@USAIDGH @USAID

For the first time, the 2016 report includes a new emphasis on the equitable access to health services. The report examines how, through an equity-based approach, USAID and partners can accelerate progress toward ending preventable child and maternal deaths, saving the lives of 8 million women and children from the bottom 2 wealth quintiles alone – the poorest 40 percent of the population – by 2020. The report looks at the underlying causes of inequity across maternal and health services, from immunization coverage to treatment of childhood illnesses to respectful maternity care, describing what can be achieved if the bottom two wealth quintiles have the same opportunities and access to health interventions as the rest of the population.

Background and Context

Since 2008, USAID's efforts in 24 priority countries have saved the lives of 4.6 million children and 200,000 women.

In 2012, global leaders came together for the Child Survival Call to Action Summit, settling on global targets for reductions in under-5 child mortality and mobilizing around a shared global goal.

USAID's 2014 Acting on the Call report expanded on the Call to Action and formulated country-specific plans for scaling up high-impact interventions to reduce child and maternal deaths in 24 priority countries. The follow-up 2015 Acting on the Call Report provided country-by-country



progress updates, with new recommendations for reaching 38 million women with increased access to high-quality health services around the time of delivery.

The 2016 Acting on the Call Report again provides country-specific updates on progress toward ending preventable child and maternal deaths and features a new emphasis on equity.

This resource guide provides messages and themes around the 2016 Acting on the Call report to help facilitate engagement and interaction in the digital space, both during and after the release of the report on June 21. The primary hashtag for the 2016 report is **#MomAndBaby**. Messages on findings from individual countries include additional recommended handles and hashtags with which to engage.

In addition to this resource guide, a set of pictograms highlighting main messages and findings from the 2016 Acting on the Call report is available for download via Dropbox: https://www.dropbox.com/sh/605rk3affxypfzb/AADn4wjHhyNK9LeKmVDHVhr9a?dl=0.

Specific findings and messages from the report are under embargo until the release of the full report on the morning of June 21. Please do not share the messages in this resource guide until 09:00 EDT Tuesday, June 21, 2016.

Additional resources

USAID Acting on the Call website: www.usaid.gov/actingonthecall (http://ow.ly/5N2j3010xBg)

Pictogram downloads:

https://www.dropbox.com/sh/6o5rk3affxypfzb/AADn4wjHhyNK9LeKmVDHVhr9a?dl=0

"Reaching the Unreached: How an Emphasis on Equity Can Help End Preventable Child and Maternal Deaths", blog from Dr. Ariel Pablos-Méndez: http://www.huffingtonpost.com/ariel-pablosmendez-md-mph/

"To Keep a Promise" video, highlighting the importance of the continued support for maternal and child survival from the U.S. Government and the global community: http://tokeepapromise.org/

Messages and Themes

For use from June 21 onward.



On June 21, USAID releases the 2016 Acting on the Call Report, with progress updates on priority countries for maternal health.

USAID works to end preventable child and maternal deaths in 25 priority countries¹, together accounting for more than two-thirds of the world's child and maternal deaths. The 2016 Acting on the Call report provides country-by-country updates on progress toward this goal.

The 2016 Acting on the Call report includes a new emphasis on equity.

The 2016 report discusses how an equity-based approach can help save the lives of 8 million women and children by 2020 from the bottom two wealth quintiles – the poorest 40 percent of the population – alone.

The 2016 report examines the underlying causes of equity across health intervention areas.

Through equity-based approaches that prioritize vulnerable, poor, and underserved populations, we can save the lives of 8 million women and children from the bottom 2 wealth quintiles alone by 2020.

Achieving equity helps break cycles of poverty, leading to stronger, healthier, and more prosperous societies. Working toward the equitable access to health services contributes to other global goals by empowering poor, vulnerable, and underserved populations.

Dr. Ariel Pablos-Méndez (Twitter: @AMPablos), USAID's Assistant Administrator for Global Health and Child and Maternal Survival Coordinator, writes on his Huffington Post blog about the importance of expanding the equitable access to health services in order to accelerate progress towards achieving global goals in maternal and child health.

The public and private sectors both play vital roles in ensuring access to health services for vulnerable populations, including mothers and children.

The 2016 Acting on the Call Report examines the underlying causes of and means of addressing inequities across multiple components of countries' health systems:

Health financing:

¹ Burma was recently added as a priority country and data is not yet available.



- Out-of-pocket expenditures can be prohibitive barriers for the poor in trying to access health services. USAID supports sustainable financing mechanisms to reduce out-of-pocket expenditures.
- In most of USAID's priority countries for maternal and child health, significant financial barriers exist to accessing care. Sustainable health financing expands access and equity.

Immunization:

- Reaching the unreached, reducing drop-outs, limiting missed opportunities: three keys to expanding immunization coverage.
- Lack of information, distances to health centers, time constraints, social/cultural/political barriers: all reasons why inequity persists in immunization coverage.

Childhood illness:

- Increasingly, marginalized and unreached children are in peri-urban and urban slums or among refugee populations, creating new challenges for reaching them with care.
- Case management is an adaptable and effective method of treating leading causes of childhood illness and mortality: diarrhea, pneumonia, and malaria.

Family planning and reproductive health:

- Family planning correlates strongly with equity: by empowering women to stay healthy and contribute to household incomes, family planning narrows societal economic and gender gaps.
- 2016 report examines four case studies Bangladesh, Nigeria, Rwanda, and Senegal in modern contraceptive use trends and results.

Maternal and newborn care:

- Mistreatment, disrespect, and abuse in health facilities can negatively impact health outcomes for mothers and their children and can discourage women from seeking facility services in the future
- Poverty, discrimination and stigma, and hard-to-reach health facilities all contribute to inequitable access to maternal and newborn health services.

Social and behavior change:

USAID's social and behavior change work takes into account the myriad dimensions of
inequality: place of residence, race or ethnicity, occupation, gender, religion, education,
socioeconomic status, and social capital or resources.



• A closer look at key health behaviors through the multidimensional lens of equity can accelerate progress toward ending preventable child and maternal deaths.

Nutrition:

- Nutritional inequities derive from diverse factors: gender, socioeconomic status, educational level, and many others all influence the ability of women and children to access nutritional foods and of mothers to ensure adequate nutrition for their children.
- USAID's Multi-Sectoral Nutrition Strategy promotes equity by integrating nutrition-specific and nutrition-sensitive activities with interventions in water, sanitation and hygiene (WASH), agriculture, gender equality, and more.

Water, sanitation and hygiene:

- Inequitable access to improved water and sanitation extends across economic and urban/rural dimensions. The poorest 20 percent of the population in sub-Saharan Africa is half as likely to use improved drinking water as the richest 20 percent.
- USAID's WASH programming explicitly targets vulnerable populations: inhabitants of dense urban environments; households affected by HIV and AIDS; and the poor, among others.

Not all children receive the vaccines they need. Not all women are treated with respect and dignity during childbirth. Not all households with access to water also have access to sanitation. Ensuring equitable access to health services is crucial for achieving global goals in health and other sectors. USAID's 2016 Acting on the Call Report takes an in-depth look at how an equity-based approach can contribute to the goal of saving 15 million children and 600,000 women by 2020.

Oftentimes, certain individuals within societies, communities, and households face nuanced barriers in trying to access health services, rendering them unable to receive the care they need. The 2016 Acting on the Call Report examines how an equity-based approach can accelerate progress toward ending preventable child and maternal deaths.

Last year, USAID helped targeted facilities in India reduce neonatal mortality by 13 percent. For the first time, all 516 districts of the Democratic Republic of the Congo received #malaria program coverage. And more than 14,000 #healthworkers in Ghana were trained in #nutrition for children and infants. These are just a few of the achievements of USAID and our partners from the past year of efforts to end preventable child and maternal deaths. With country-by-country progress updates, the 2016 Acting on the Call Report provides an in-depth look at how USAID's 25 priority countries for #MomAndBaby health can accelerate progress towards improved health outcomes.



Afghanistan: @USAIDAfghan, @FP2020Global; #RMC, #FamilyPlanning, #FP2020

- The first Respectful Maternity Care (RMC) National Planning Workshop was held in April to promote RMC approaches within existing respectful maternal, newborn child and adolescent health (RMNCAH) services.
- Last year, Afghanistan formally committed to Family Planning 2020.

Bangladesh: @USAID_BD; #CHWs

- Through community health worker (CHW) outreach, coverage of antenatal, delivery, and postnatal services have increased significantly, particularly among the poorest women: of 1.3 million antenatal care (ANC) visits last year, for example, 620,000 benefited poor women.
- More than 1.7 million children were treated for diarrhea last year, 775,000 of them from the lowest wealth quintiles.

Democratic Republic of the Congo (DRC): @USEmbKinshasa; #malaria, #contraceptives, #FamilyPlanning

- For the first time, all 516 health zones of the DRC received malaria program coverage through the expanded activities of USAID and partners.
- Through USAID advocacy efforts, the Government of the DRC increased the percentage of the national budget dedicated to health from 1 percent to 7.5 percent, and allocated \$3.5 million for contraceptives.

Ethiopia: @USAIDEthiopia; #CHWs, #vaccines, #VaccinesWork

- Community-based health insurance schemes provided coverage for 6.5 million this past year -- a 700 percent increase upon coverage rates during the previous year.
- In targeted regions, vaccine coverage rates rose by more than 25 percent.

Ghana: @USEmbassyGhana; #FamilyPlanning, #LARCs

- Last year USAID helped train 20,000 community health nurses and volunteers in community infant and young child feeding.
- More than 600 providers were trained in long-acting reversible contraceptive methods for community-level implementation.

Haiti: @USAID_Haiti; #contraceptives, #polio, #vaccines, #VaccinesWork

• Through partnership with the Government of Haiti, voluntary surgical contraceptives have been made available free of charge at USAID-supported facilities.



• With USAID support, Haiti introduced the inactivated polio vaccine (IPV) last year. Preparations are underway to introduce the pneumococcal vaccine by the end of 2016.

India: @usaid_india; #newborn, #contraceptives

- Quality improvement activities in 253 health facilities contributed to a 13 percent decline in neonatal mortality.
- Responding to USAID advocacy, national policy was changed to introduce injectable contraceptives, thereby expanding family planning options in India.

Indonesia: @usaidindonesia; #newborn, #UHC

- In partnership with the Government of Indonesia, USAID disseminated newborn health guidelines across all 34 provinces.
- USAID works to ensure that the poorest and most vulnerable women are aware of their insurance status under the Universal Health Coverage (UHC) Program and understand how to access services.

Kenya: @USAIDKenya

- At USAID-supported sites, 625,000 women received skilled care during labor and delivery.
- New activities from USAID focus on improving access to and quality of RMNCAH services for residents of Nairobi's informal settlements.

Liberia: @USAIDLiberia

- USAID upgraded 200 health facilities to provide 24-hour emergency obstetric care.
- As part of the post-Ebola strategy, USAID conducted periodic intensified routine immunization activities, aimed at improving vaccination coverage in all counties.

Madagascar: @USAIDMadagascar; #CHWs

- USAID's largest community health programs in Madagascar are implemented in rural and underserved areas, emphasizing CHW training and accessible and culturally-appropriate care.
- USAID is leading the scale-up of chlorhexidine and misoprostol in 15 of Madagascar's 22 regions.

Malawi: @USAIDMalawi

• USAID assisted in the roll-out of community-based maternal and newborn health guidelines in 16 districts this past year.



• Through community outreach and mobile clinics, USAID works to expand health services to hard-to-reach populations.

Mali: @USAIDMali; #FamilyPlanning, #CHWs

- In three target regions, has achieved 100 percent essential healthcare coverage of populations living more than 5 kilometers from a clinic through support for CHWs.
- Mobile outreach teams bring family planning services to rural and peri-urban populations, building the capacity of local clinic staff at the same time.

Mozambique: @USAIDMozambique; #FamilyPlanning, #nutrition, #malaria, #immunization

- USAID supports integrated mother and newborn health, family planning, nutrition, and malaria services for 27 percent of the population in Mozambique.
- Through mapping and microplanning activities, USAID targets districts and communities
 with the largest numbers of under- and unimmunized children to expand vaccine coverage
 rates.

Nepal: @USAIDNepal; #Family Planning

- USAID helped villages mobilize nearly \$1 million in government block grants for local health activities.
- USAID's family planning activities prioritize expanding access for disadvantaged, marginalized, and remote populations.

Nigeria: @USAIDNigeria

- USAID facilitates the establishment of birth centers and mothers' waiting homes for women with high-risk pregnancies, who live far from health facilities, and/or encounter other difficulties accessing a health center for delivery.
- Maternal and newborn mortality reviews were institutionalized to improve accountability and improve health outcomes in health facilities.

Pakistan: @USAID_Pakistan; #FamilyPlanning, #WASH

- Voucher programs increase access to family planning services for women living on less than \$2 per day, and mobile outreach units expand access for women far from facilities.
- More than 300,000 people have been reached through various communications channels around healthy WASH behaviors in Pakistan.

Rwanda: @USAIDRwanda; #CHWs, #fistula



- USAID builds the capacity of CHWs to bring quality health services into communities, fostering local engagement, community mobilization and empowerment, and local ownership.
- Fistula awareness programs reached 300,000 Rwandans with messages around fistula care.

Senegal: @USAIDSenegal; #newborn

- USAID increased the availability of equipment for newborn care in 80 percent of facilities across 10 regions.
- This past year, USAID scaled up the availability and use of misoprostol and chlorhexidine, lifesaving medicines for mothers and newborns, at more than 2,000 health huts combined.

South Sudan: @USAIDSouthSudan

- More than 500,000 women and children in South Sudan accessed health services through USAID last year.
- By training birth attendants in essential maternal and newborn care, USAID has helped reach women with emergency care services who might not otherwise receive them.

Tanzania: @USAIDTanzania; #vaccines, #FamilyPlanning

- Through targeted efforts in districts with high numbers of children unprotected by vaccines, USAID has reduced the number of under- and unvaccinated children in underserved districts from more than 100,000 in 2013 to less than 5,000 in 2015.
- USAID helped develop a national training package for family planning devices and services.

Uganda: @USAIDUganda; #FamilyPlanning

- Through outreach activities targeting poorest-performing districts, USAID has expanded access to services for hard-to-reach and underserved populations.
- By integrating maternal, child, and family planning health services, USAID has enhanced the quality of health services for Ugandans in the South West region.

Zambia: @USAIDZambia; #vaccines, #polio

- USAID assisted in the introduction of two new vaccines in Zambia this past year: the inactivated polio vaccine and the second dose of measles and rubella.
- Strengthening referral systems, building maternity homes, refurbishing facilities: three of
 many ways that USAID is working to scale up maternal health services for at-risk and
 vulnerable women.

