

NEW EVERY NEWBORN COVERAGE TARGETS AND MILESTONES





## **AGENDA OVERVIEW**

# **FEMI OKE** MODERATOR



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TALKS ON THE NEW COVERAGE TARGETS: WHY, WHAT AND HOW?



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## MOVING FASTER TO END PREVENTABLE NEWBORN DEATHS AND STILLBIRTHS BY 2030

2025 COVERAGE TARGETS AND MILESTONES



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## MOVING FASTER TO END PREVENTABLE NEWBORN DEATHS AND STILLBIRTHS BY 2030

2025 COVERAGE TARGETS AND MILESTONES



#### THE NEW COVERAGE TARGETS: WHY, WHAT AND HOW



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WHY: Survival status: 10 years to 2030



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WHAT: Coverage of care: 5 years + 4 targets



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**HOW: Measurement: now and what next** 



DR LUWEI PEARSON CHIEF OF HEALTH (ACTING), UNICEF

**HOW: Milestones: getting there together** 



#### **DR ANSHU BANERJEE**

DIRECTOR, MATERNAL, NEWBORN, CHILD AND ADOLESCENT HEALTH AND AGEING DEPARTMENT, WHO







#### Each year...

2.5 million newborns die in first 28 days, 47% of U5 child deaths More than 2 million are stillborn, half during labour

99% of these deaths happen in low & middle income countries, especially for the poorest families BUT most are preventable.

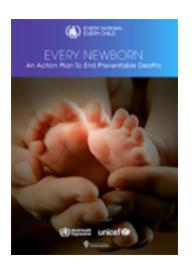
#### **Targets for 2030**

**Every Newborn Action Plan** aims to end preventable deaths, setting the first ever national mortality targets:

- ≤ 12 neonatal deaths per 1000 live births
- ≤ 12 stillbirths per 1000 total births

SDG3.2: Neonatal target was included.

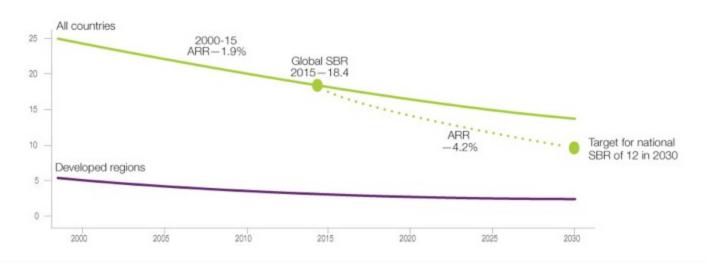
Stillbirths not in SDGs, but included in the Global Strategy for Women,
Children and Adolescent Health & deserve more attention.





#### **Ending preventable stillbirths**

Fig. 2. Global progress towards the Every Newborn Action Plan target to end preventable stillbirths by 2030



>90 countries report to be implementing action plan

29 countries have have set a Stillbirth Reduction Target

- New joint UN Stillbirth Estimates October 2020
- Services for affected families must be in place
- Majority are preventable through quality antenatal care and care at birth

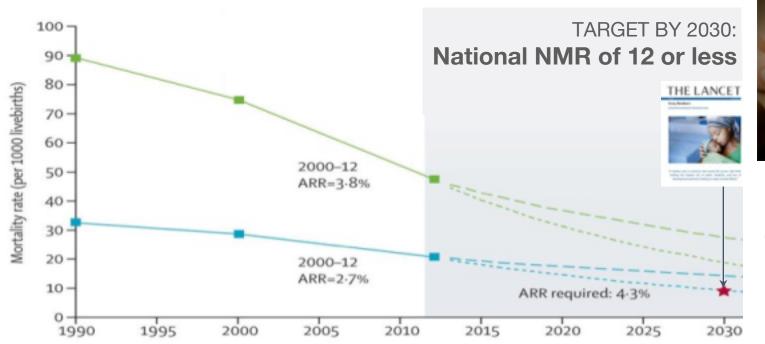




WHY: Survival Status: 10 years to 2030

#### 3.2 Ending preventable newborn & child deaths

First ever global target for newborn survival in SDGs



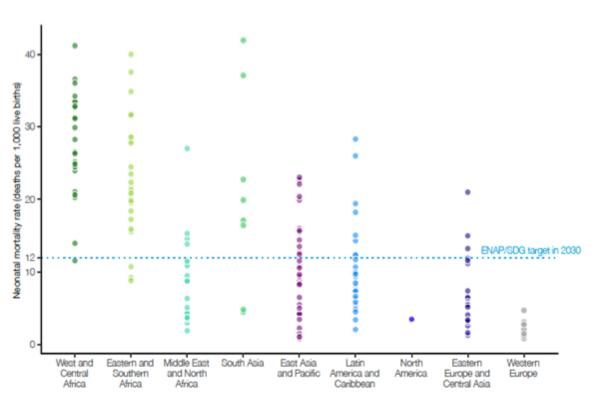
- **78** high burden countries have set newborn targets.
  - 90 countries report to be implementing action plan

- ~60 countries will not meet the SDG target
- ~40 countries need to double current progress





#### **WHERE? Equity gaps**



Source: United Nations Inter-agency Group got Child Mortality Estimation (UN IGME) 2019 (2) ENAP, Every Newborn Action Plan

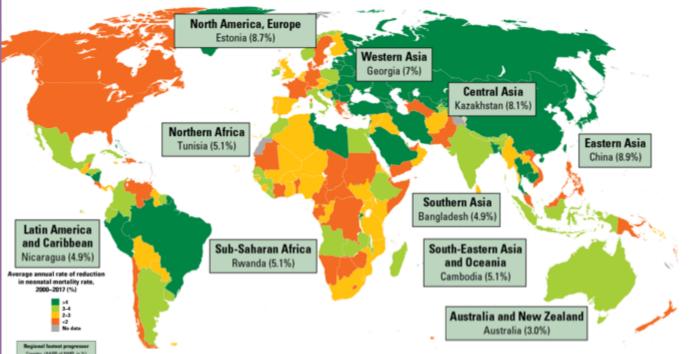
Great disparity in progress, both between and within regions

Plus based on current trends to progress, it will be **next century** before some African newborns have same chance of survival as a newborn in North America, Europe, or Australasia.





#### WHERE? National progress to reach newborn target by 2030



10 fastest progressors globally		
COUNTRY	AARR of NMR	
1 China	8.9%	
2 Estonia	8.7%	
3 Belarus	8.2%	
4 Kazakhstan	8.1%	
5 Georgia	7.0%	
6 Latvia	7.0%	
7 Turkey	6.9%	
8 Saudi Arabia	6.4%	
9 Azerbaijan	6.2%	
10 Russian Federatio	n 6.2%	

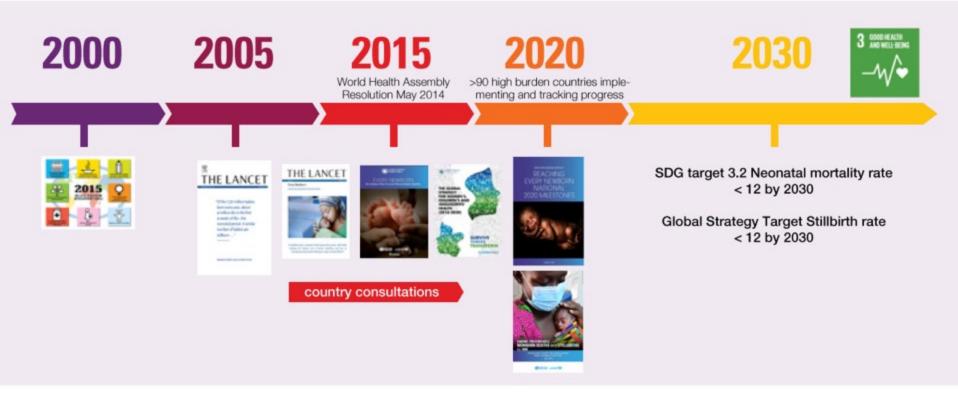
Every region has fast progressors for newborn survival – scale up of hospital newborn care

Humanitarian contexts: highest rates, slowest progress. Some countries will meet SDG 3.2 over 100 years too late.





## Newborns & stillbirths on global and national agendas



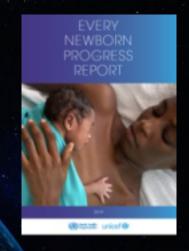
10 years to move faster to meet mortality targets • 5 years focus on coverage, equity, quality





# NATIONAL POLICY PROGRESS: CHANGE IS STARTING

Of the 90 countries reporting in 2019...



report to have an Neonatal mortality reduction Target

29

report a Stillbirth reduction target

**...38** 

report an Emergency preparedness plan includes newborns

report a Quality improvement process for care around the time of birth.

.43

report to have a perinatal death review system in place mended indicators for care of small and sick newborns in the national HMIS system

#### **Spotlight on 10 fast progressing, low-income countries**

#### All 10 report to have:

- National newborn focal point in Ministry
- Set target for neonatal mortality reduction
- Continual training for newborn care competencies

#### Twice as likely to report:

- Target set for stillbirth reduction
- Active parents & advocacy groups
- Research agenda for newborn health and stillbirth prevention



#### **8/10 report:**

- Standards and guidelines for quality improvement being implemented
- Specialised nurse training in small and sick newborn care







# Need to speed up action: even more important with COVID

**COVID19 impact**: Data published for one country showed increased facility NMR 3x and SBR 1.5x, urgency to protect maternal and newborn services

- See: Lancet Global Health August 2020: rb.gy/4ichyt
- Join survey to fill knowledge gap on newborn care during COVID: <a href="https://rb.gy/iknwyq">https://rb.gy/iknwyq</a>

**Keep focus on 2030 mortality reduction:** Ongoing policy progress, more implementation

More attention to coverage + quality + equity: Demand from countries for clear plan covering 2020 to 2025







#### **PROF. JOY LAWN**

DIRECTOR OF MARCH CENTER, LONDON SCHOOL OF HYGIENE AND TROPICAL MEDICINE







#### WHY now?

 Urgency: decade to SDGs, yet many countries are off track for every newborn to survive and thrive, especially at risk due to COVID-19. Some countries may meet SDG3.2 for newborns over 100 yrs too late

• GAP: Stillbirths are a major issue in almost every country

UHC: babies are our most vulnerable citizens, key to UHC.

GAP: Maternity care needs more investment

GAP: Care for small and sick newborns a major gap needing focus

 Opportunity: >90 countries committed + >100 organisations involved Every country can do more in the next 5 years Previous coverage targets were for 2015-2020, with demand now for clear targets 2020-2025





#### **HOW** where these targets developed?

#### Consultative, aligned with other plans

Aligned to other plans eg family planning, maternal, ECD, nutrition Multiple processes including online survey hosted by WHO, reponses from >42 countries, >80 organisations

#### Evidence-based and integrated

Focus on high impact care, aligned to maternal healthcare, joint process with maternal health communities

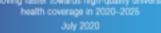
#### Data-driven but ambitious

Trend analyses by UNICEF for last 5-10 years, targets mostly based on contact point coverage but <u>quality of care is key</u>

#### Equity

Important shift with specifically adding sub-national level targets

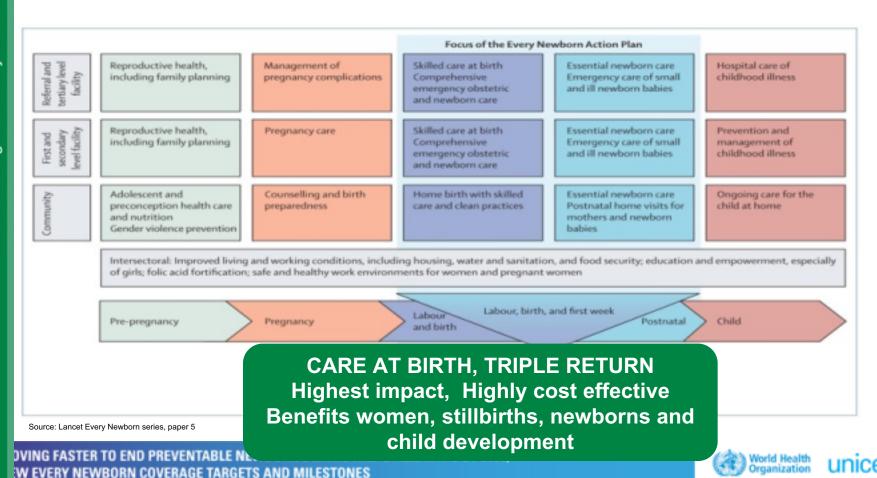






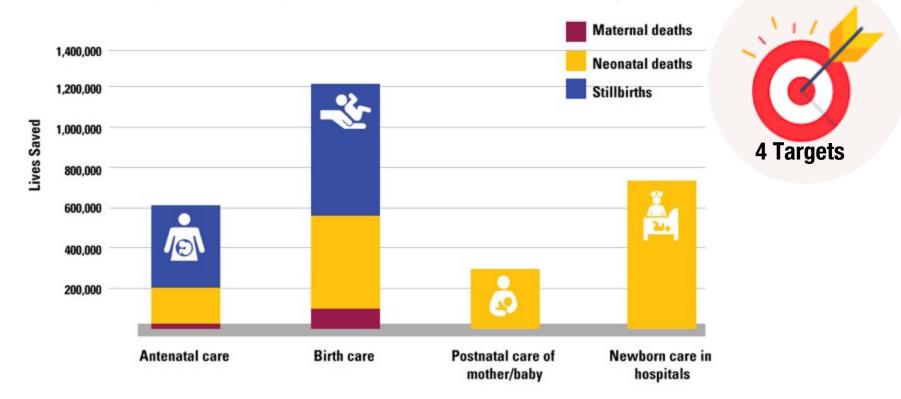


#### Continuum of integrated care for UHC for women & children



### WHAT packages are the "best buys" for lives saved?

Lives saved (LiST) analysis for 2030 compared to baseline 2016, if 90% universal coverage



Potential impact of around 3 million lives saved, around half in Africa

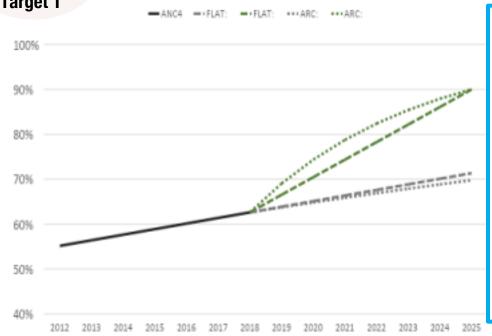


#### **Every pregnant woman**

#### **Antenatal care 4 visits**









#### **National**

90% of countries >70% coverage

#### **Sub-national**

80% of districts >70% coverage

Note: whilst supporting need to shift to ANC8, trend data are limited regarding ANC8

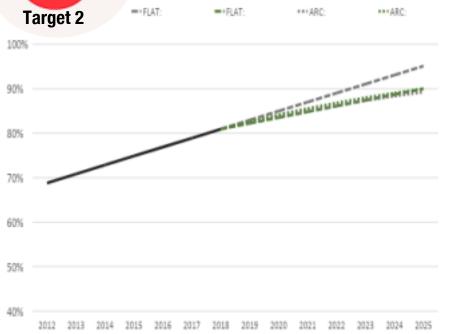






# **Skilled Birth Attendance**







#### **National**

90% of countries >80% coverage

#### **Sub-national**

80% of districts >80% coverage

Note: UHC target by 2030 for skilled birth attendance is 95%



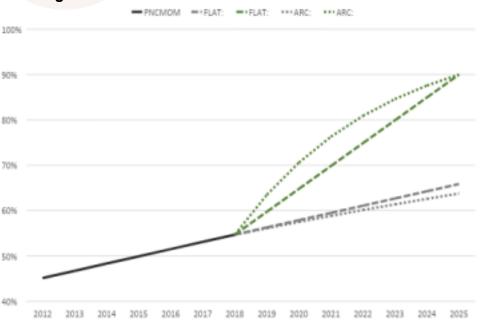




#### Every woman and every newborn

#### **Postnatal Care**







#### **National**

90% of countries >60% coverage

#### **Sub-national**

80% of districts >60% coverage

Note: whilst supporting combined PNC for mother and baby, trend data are limited regarding PNC newborn





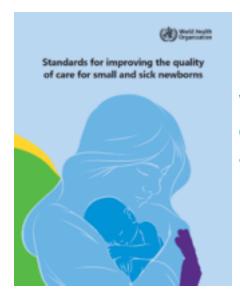
#### **NEWS! Small and sick newborns**

#### Why more focus?



Transforming care for small and sick newborns (2019)

#### What to do?



WHO Standards of care for Small and Sick newborns (2020)



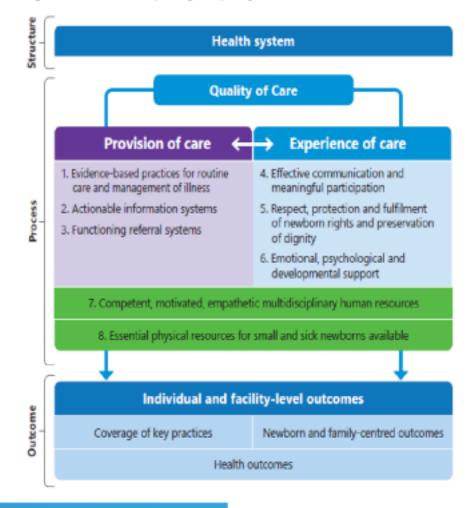






# Standards of care for small & sick newborns

- Guiding countries in caring for vulnerable newborns in context of Universal Health Coverage
- Defining and standardising inpatient care of small & sick newborns, building on essential newborn care
- Consistent with WHO quality of care framework, quality, equity & dignity initiative







#### WHO's Levels of newborn care with interventions

Level 1 Immediate and essential newborn care	Immediate newborn care (delayed cord clamping, drying, skin to skin etc) Neonatal resuscitation for those who need it Breastfeeding early initiation and support Essential newborn care Identification and referral of complications Targeted care as needed eg PMTCT of HIV	
Level 2 Special newborn care	Thermal care including KMC for all stable neonates <2000gms Assisted feeding and IV fluids Safe administration of oxygen Detection and management of neonatal sepsis with injection antibiotics Detection and management of neonatal jaundice with phototherapy Detection and management of neonatal encephalopathy Detection and referral/management of congenital abnormalities Management of preterm respiratory distress with CPAP	
Transition	Follow up of at risk newborns	
Level 3 Intensive newborn care	Mechanical/assisted ventilation Advanced feeding support (eg parenteral nutrition) Investigation and treatment for congenital conditions Screening and treatment for Retinopathy of Prematurity	







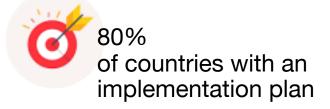




# Every small and sick newborn Service readiness (WHO standards)







#### **National and sub-national**

80% of "districts" in every country have at least 1 inpatient newborn care unit (level 2)

Important to improve <u>routine</u> measurement of coverage, quality & service readiness



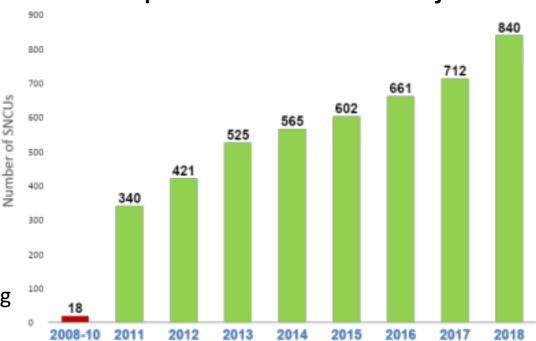


## India's ambitious scale up of newborn care



- 80%+ districts with a Special Newborn Care Unit (SNCU)
- 840 SNCUs in one decade, 1 million newborns treated annually
- Annual govt. investment of nearly USD 87 million
- Online data system >5 million newborns, used locally and nationally
- Follow up ~30%, with ROP screening

#### **Number of Special Newborn Care Units by Year**



Courtesy of Dr Gagan Gupta





#### **Coverage of care: 5 years + 4 targets**

5 years

2020 - 2025

4

coverage targets

90% Antenatal care

90% Skilled birth attendance

80% Postnatal care

80% of districts with small & sick newborn care unit

triple return = maternal + every baby + healthy start

together, many partners, led by country governments

imperative to measure and use data to drive change











#### **Every Newborn indicators set in 2014**

<b>Current Status</b>		Core Indicators	Additional indicators
Definitions clear but quantity & consistency of data lacking	IMPACT	1. Maternal mortality ratio	
		2. Stillbirth rate	Intrapartum stillbirth rate
		3. Neonatal mortality rate	Low birth weight rate
			Preterm birth rate Small for gestational age Neonatal morbidity rates Disability after neonatal conditions
Contact point definitions clear but data on content of care are lacking	COVERAGE Care for all mothers and newborns	<ul><li>4. Skilled attendant at birth</li><li>5. Early postnatal care for mothers &amp; babies</li><li>6. Essential newborn care (tracer, early breastfeeding)</li></ul>	Antenatal Care Exclusive breastfeeding to 6 months
Gaps in definitions, requiring validation and feasibility testing for HMIS use	COVERAGE Complications and extra care	7. Neonatal resuscitation 8. Kangaroo mother care	Caesarean section rate
		<ul><li>9. Treatment of serious neonatal infections</li><li>10. Antenatal corticosteroid use</li></ul>	Chlorhexidine cord cleansing
	INPUT	Emergency Obstetric Care	
	Service readiness for Quality of Care		
	COUNTING	Birth Registration	Death registration, cause of death

**Shaded**= Not currently routinely tracked at global level **Bold blue**= Indicator requiring additional testing to inform consistent measurement Adapted from Every Newborn Action Plan. WHO, 2014. <a href="https://www.everynewborn.org">www.everynewborn.org</a> and Mason et al Lancet 2014







# **Every Newborn measurement improvement roadmap**

5 year plan with >80 partners led by WHO with LSHTM

Use in countries
for programme improvement
and accountability

#### ENAP MILESTONES REGARDING MEASUREMENT

- Count births and deaths in CVRS and surveys (women, newborns and stillbirths)
- Every newborn core indicators to be defined, incorporated in national metrics platforms and used
- Perinatal mortality audit and minimum dataset being widely used

**INDEPTH STUDY** 

5 INDEPTH sites (65,000 births) with randomised comparison of survey modules to improve survey methods to capture SBR, NMR, birthweight, GA

**EN-BIRTH STUDY** 

Facility births (20,000) in **Bangladesh, Nepal, Tanzania** validating indicators for rhesus, KMC, neonatal infection treatment, ACS, uterotonic use

**EN-SMILING STUDY** 

Follow up EN-BIRTH newborns in **Bangladesh**, **Nepal**, **Tanzania** to test simpler child development metrics, assess ECD outcomes after basic neonatal care

SMALL & SICK NEWBORNS

Define content, competencies for care of small and sick newborns, compare data platforms, develop std HFA content, barriers/enablers to data collection

2030

End
Preventable
Maternal and
Newborn
Deaths
including
Stillbirths

2020

Effective use of data in national health information systems





# **Measurement progress since 2015 and gaps to close by 2025**



Outcome data on LBW and stillbirths have improved household survey approaches and new estimates (LBW - 2019, stillbirths - October 2020)

GAP: National and sub-national data to close equity gaps within countries GAP: Measuring "beyond survival" and child development

 Coverage data on contact points are available, progress on measurement of management of newborn complications (e.g. EN-BIRTH and other studies), ongoing work around developing and testing quality of care measures

GAP: limited routine data on quality of care and on service readiness

Top priority to strengthen routine health information systems & address data gaps in humanitarian and fragile settings





#### Routine Health facility data toolkits: A modular approach

Modules used individually or together

#### Each module contains:

- Facility analysis guide with a core set of indicators and dashboards
- Exercise book
- Machine-readable configuration packages



Facility analysis guides can be adapted for use with different software packages. DHIS2 configuration packages are included.





#### **RMNCAH Module: Indicator selection & overview**

#### **Jointly by WHO and UNICEF with consultation**

#### **Core indicators:**

- Sexual and reproductive health
- Maternal health (including newborn and stillbirths)
- Postnatal period
- Childhood and young adolescence
- Facility-based deaths and institutional stillbirths



Guidance will be updated based on new evidence and to inform tracking of targets





#### Integrated maternal and newborn health measurement

# **Ending Preventable Maternal Mortality (EPMM) coverage targets using ENAP** as a model

- ANC, SBA, and PNC coverage targets will be the same for ENAP and EPMM
- EPMM will develop separate targets for service readiness for obstetric care and for social, economic and political determinants
- EPMM coverage target online consultation in process

#### Resources available now

Joint process on data guidance and supporting countries, aligned to MoNITOR and STAGE

- MNCAH Data Portal
- MoNITOR Toolkit (under development)
- ENAP Progress tracking & report







# Using coverage targets and data to drive change - even more important with COVID

- Outcome data: Keep moving towards 2030 mortality reduction at national and subnational levels, timely and reliable data including stillbirths and morbidity and disability so every newborn can survive and thrive
- Coverage target data that is timely, reliable, at subnational levels, important focus on measuring quality, including standardised tools in registers and routine systems
- Improved data on service readiness from routine systems
- Update the Measurement Improvement Roadmap, make ambitious plans to work together to improve and use data as reflected in the Milestones to 2025







# MILESTONES: GETTING THERE TOGETHER #EveryNewborn #EndStillbirth





## To get to 2030, we need to move faster in 2020 to 2025

Ending preventable deaths for women, stillbirths, newborns and children. Improving child development and human capital





2030

**EVERY NEWBORN** 

**EVERY CHILD** 



PREGNANCY CARE CARE AROUND BIRTH CARE OF SMALL OR SICK NEWBORN

POSTNATAL CARE

ADOLESCENT HEALTH CARE

#### UNIVERSAL COVERAGE

#### QUALITY OF CARE WITH INNOVATION







#### Critical Milestones we must deliver by 2025 to go faster

Milestone 1: Policy and plans



Milestone 2: Response and resilience

Milestone 3: Investments



Milestone 4: Quality of care



Milestone 5: **Health Workforce** 



Milestone 6: Medical commodities and technologies

Milestone 7: Data for action



Milestone 8: Research and Innovation



Milestone 9: Accountability







#### We all have a role to play – Who?

#### **Country governments**

Targets and plans, with investments Routine data improved and used Resilience, including with COVID19 pandemic

#### **Professionals and academics**

Midwives, neonatal nurses, paediatricians, obstetricians, engineers and more - all needed!

#### **Parents**

Your voices and inputs are key at all levels!

#### **Partners**

All partners including private sector and funders, what can we do together?

# Media, religious leaders, celebrities Learning from other success stories





# MOVING FASTER TO END PREVENTABLE NEWBORN DEATHS AND STILLBIRTHS BY 2030

2025 COVERAGE TARGETS AND MILESTONES

#### AGEND/

Talks on the new Coverage Targets: why, what and how?

#### **NOW - Your questions!**

**Panel National leadership** 

**Partnership and commitments** 





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2025 COVERAGE TARGETS AND MILESTONES

#### NATIONAL LEADERSHIP PANEL DISCUSSION



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#### **Partnership and commitments**





#### **Every Newborn Management Team**



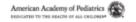




















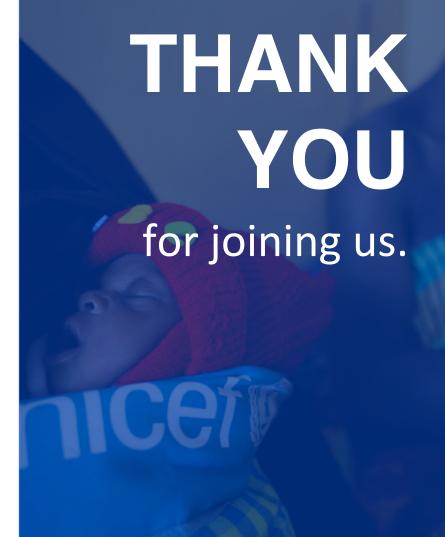








See more: www.healthynewbornnetwork.org



#### **MORE RESOURCES**

Join survey to fill knowledge gap on newborn care during COVID: <a href="https://rb.gy/iknwyq">https://rb.gy/iknwyq</a>

UNICEF data: <a href="https://data.unicef.org/">https://data.unicef.org/</a>

WHO: <a href="https://www.who.int/activities/identifying-common-areas-of-progress-with-the-every-newborn-action-plan">https://www.who.int/activities/identifying-common-areas-of-progress-with-the-every-newborn-action-plan</a>?

ENAP Progress Tracking Report 2019 (2020): https://www.who.int/publications/i/item/9789240005082

Healthy Newborn Network website: <a href="https://www.healthynewbornnetwork.org/issue/every-newborn/">www.healthynewbornnetwork.org/issue/every-newborn/</a>

EPMM coverage target online consultation in progress:

<a href="https://docs.google.com/forms/d/e/1FAIpQLSdOmq">https://docs.google.com/forms/d/e/1FAIpQLSdOmq</a> M0SMASIQSqw9DafiGUEfz21wM21A gzsaIJWqD C vQ/v iewform

MoNITOR Toolkit: https://www.who.int/data/maternal-newborn-child-adolescent/monitor

