



Reykjavíc, Sep 2006

Maternal and child mortality in low-income countries

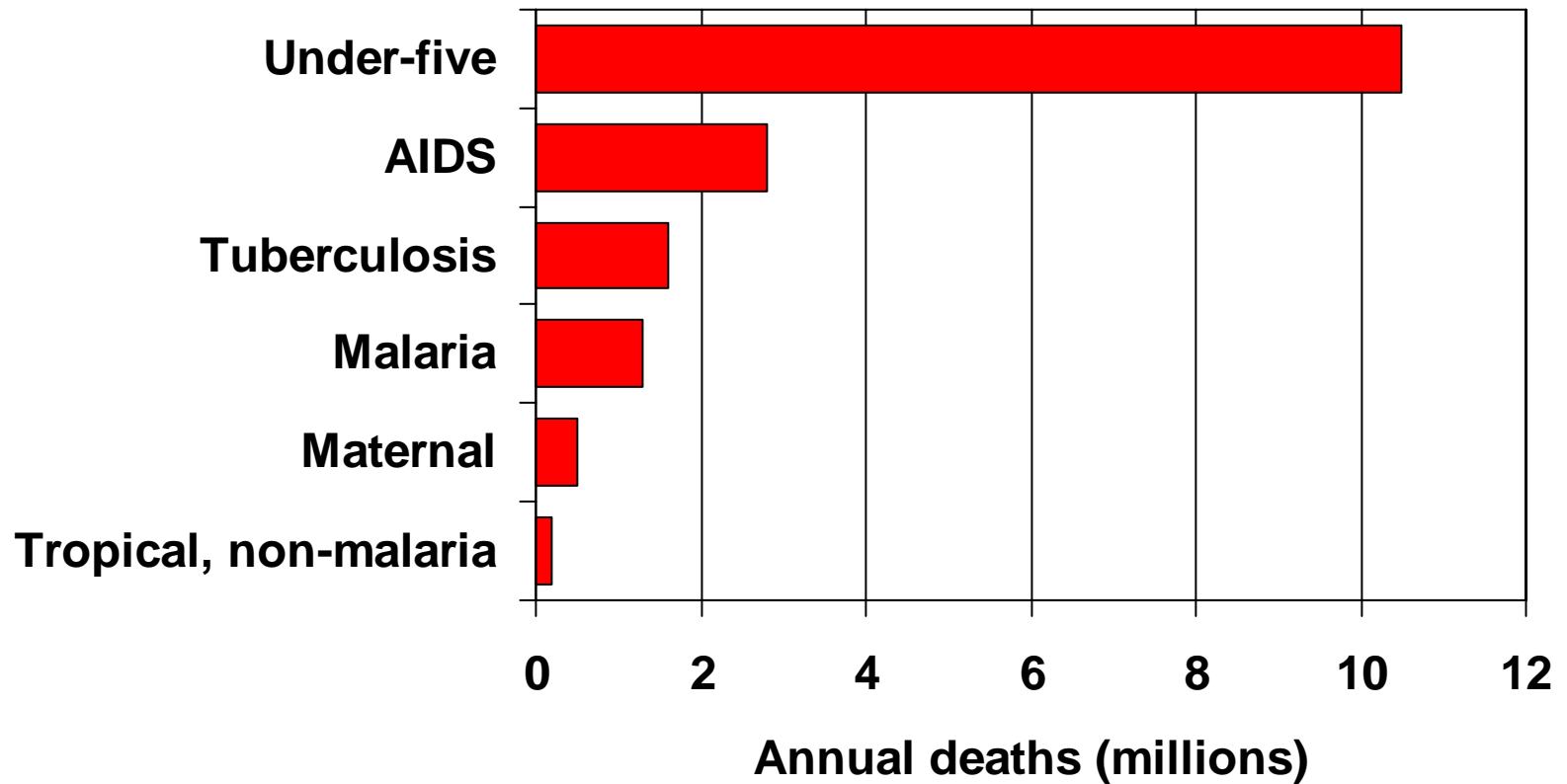
Cesar Victora

Federal University of Pelotas, Brazil

Bellagio Child Survival Study Group



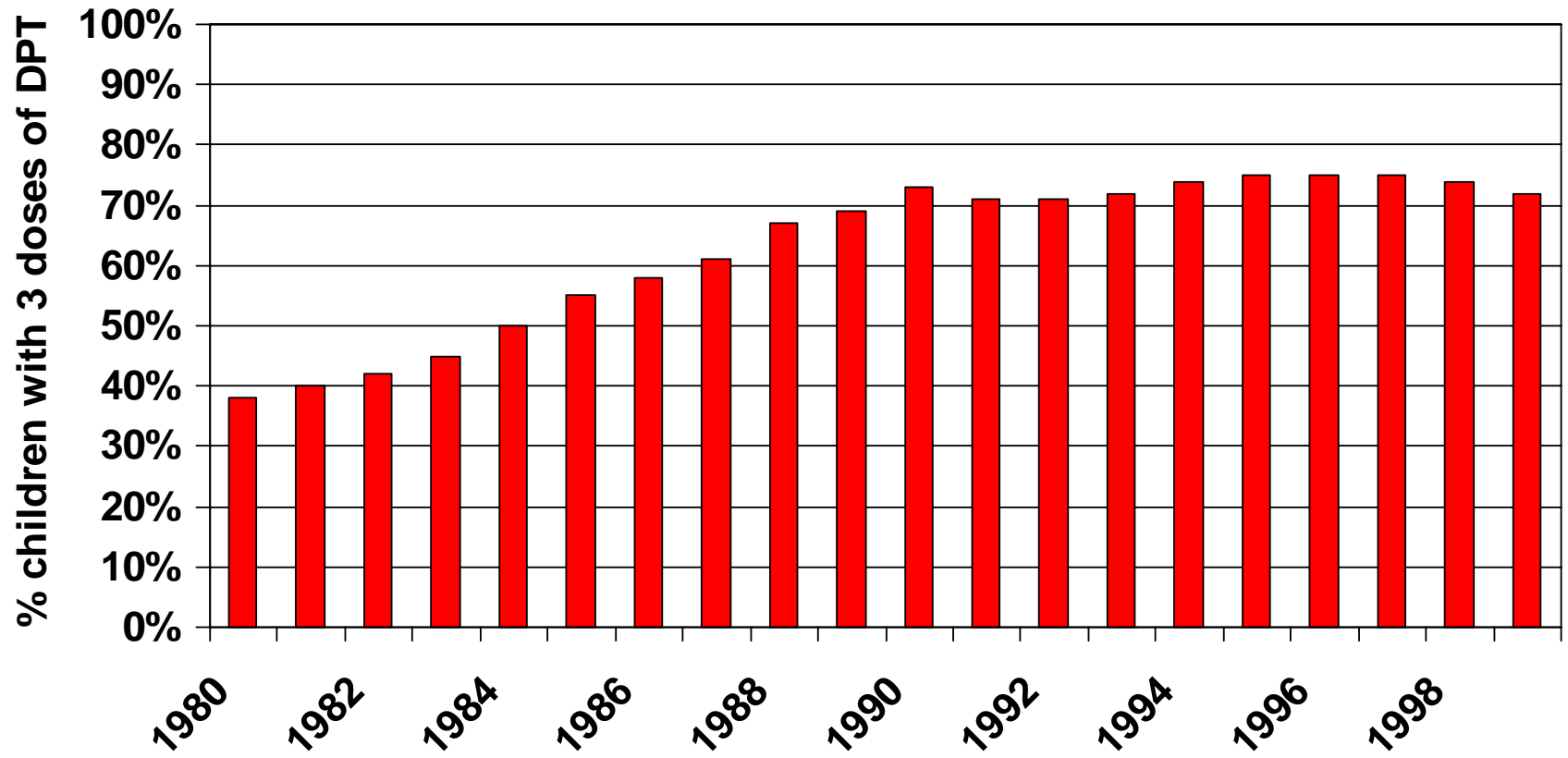
Deaths by selected causes, 2003



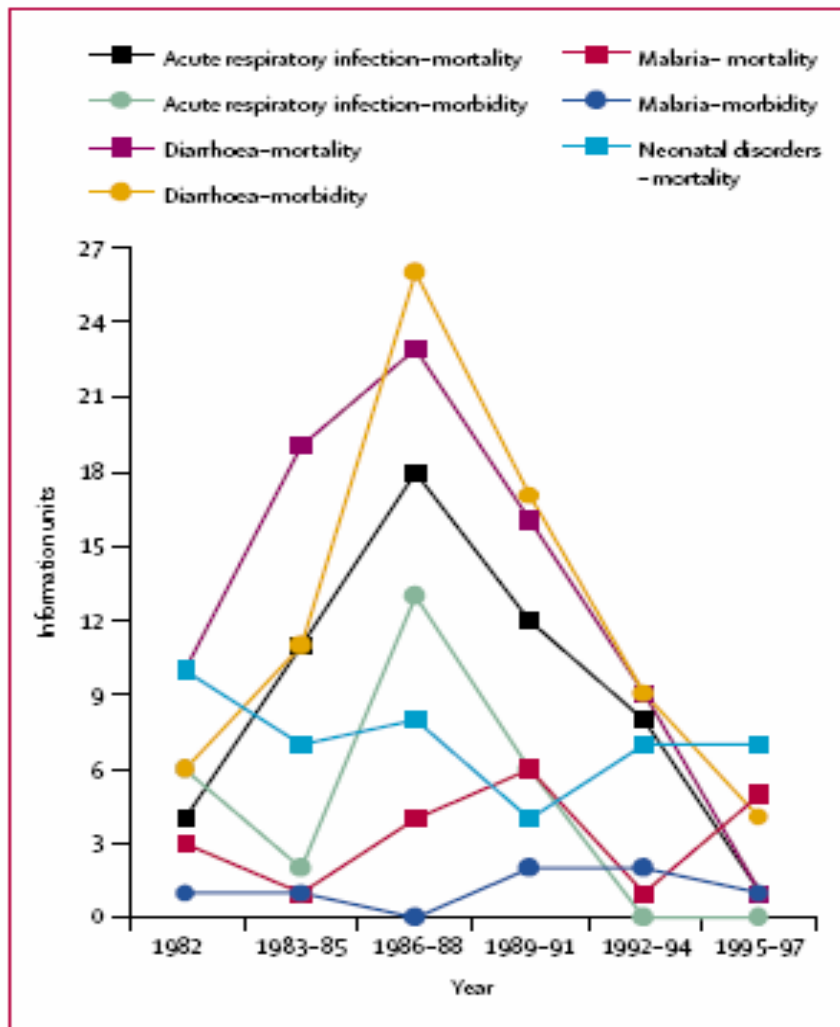


Global coverage of DPT3 vaccine

1980-99



Time trends in publications on child mortality causes



- The number of studies on causes of death of children in low and middle-income countries is falling



Global R&D investments per DALY

- Global average (all diseases): US\$73
- HIV/AIDS, malaria and TB: US\$8.4
- Acute respiratory infections: US\$0.51
- Diarrhea: US\$0.32



Bellagio Child Survival Study Group



The Lancet Child Survival Series

Child survival I

Where and why are 10 million children dying every year?

Child survival II

Robert E Black, Sr

How many child deaths can we prevent this year?

Child survival III

*Gareth Jones, R
Group**

Reducing child mortality: can public health deliver?

Child survival IV

*Jennifer Bryce, Sh
Multi-Country Eva*

Applying an equity lens to child health and mortality: more of the same is not enough

Child survival V

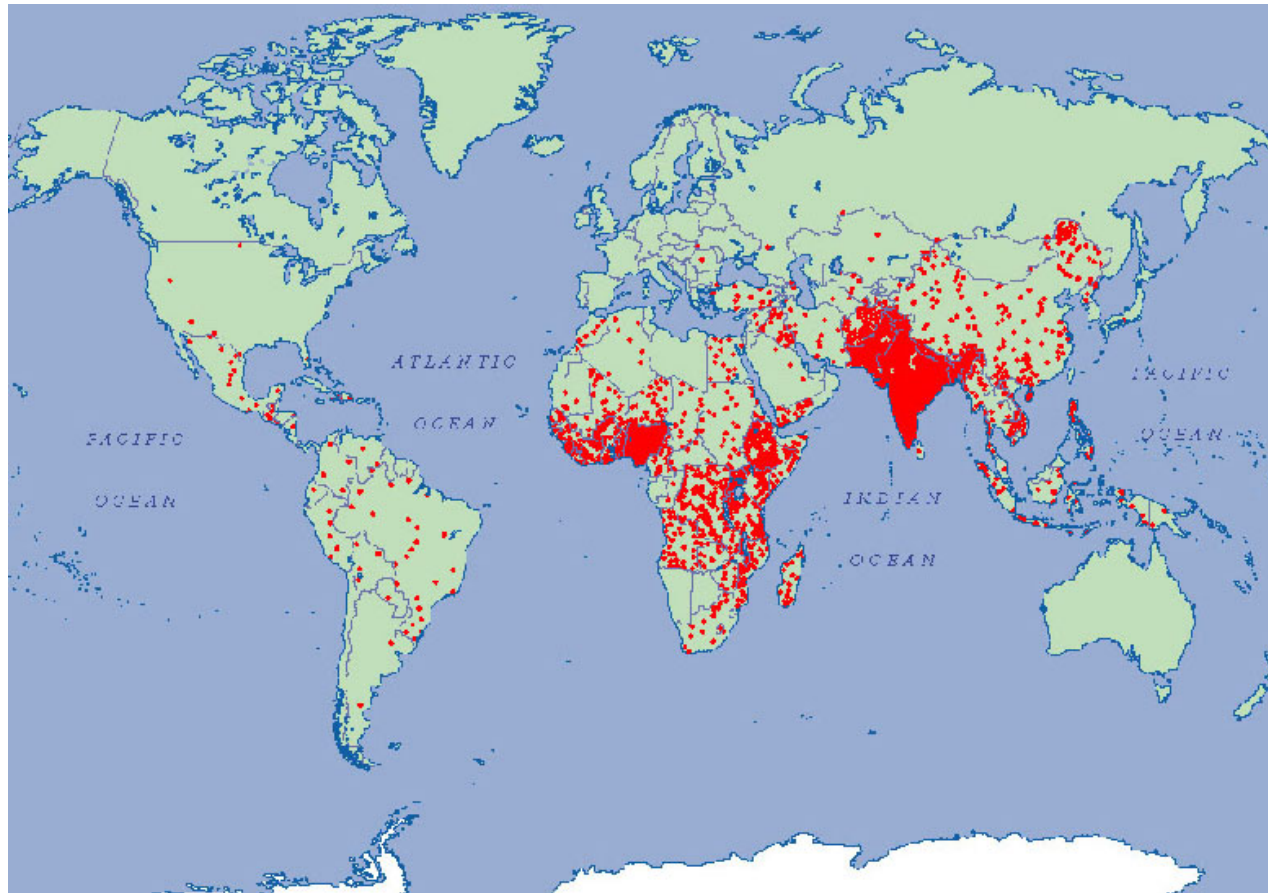
Cesar G Victora, Adam Wagstaff, Joanna Arms

Knowledge into action for child survival

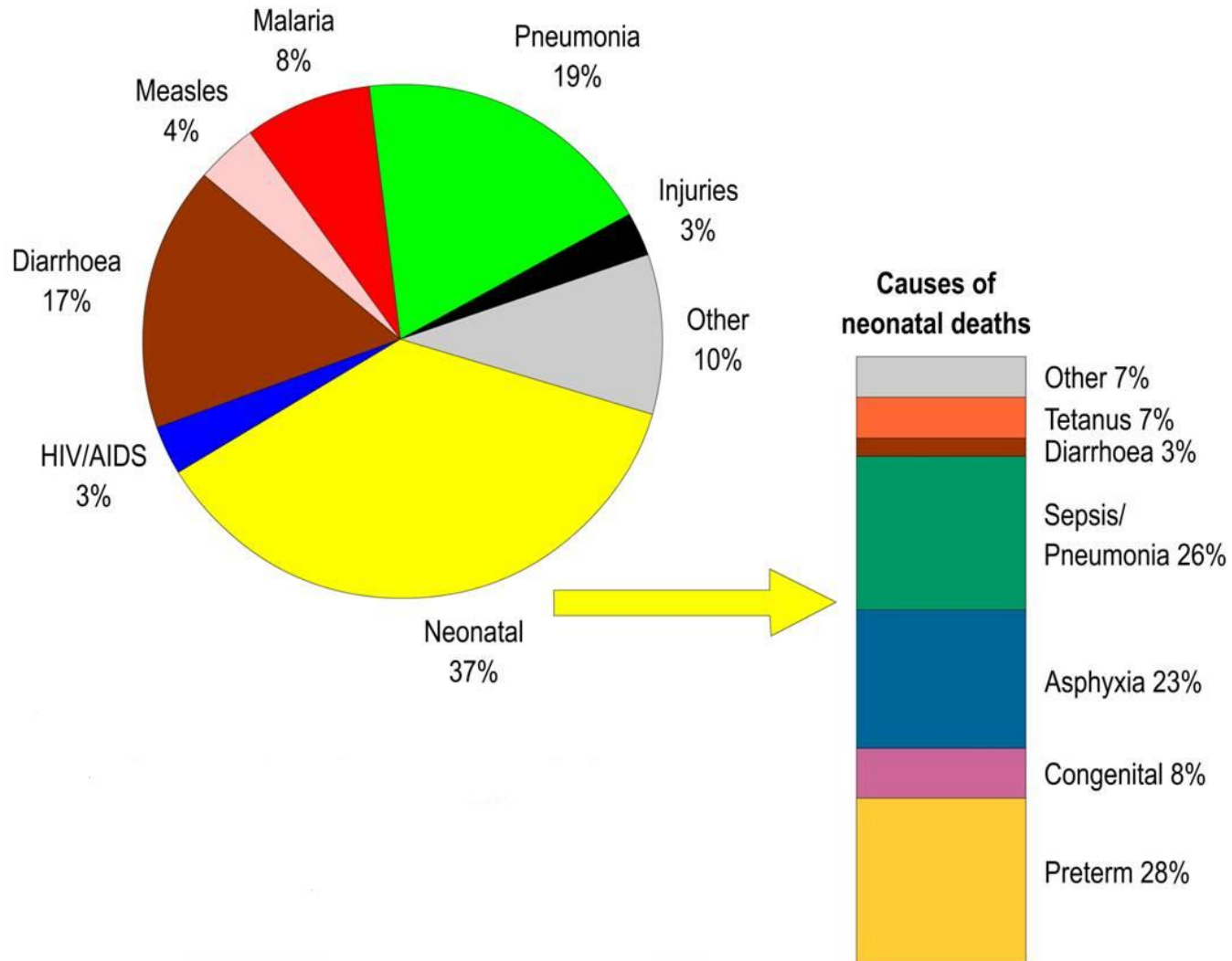
*The Beiglo Study Group on Child Survival**

Where do over 10 million children die every year?

copyright Oxford Cartographers 2003

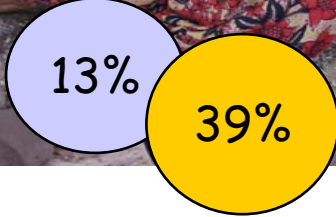


Causes of under-five mortality

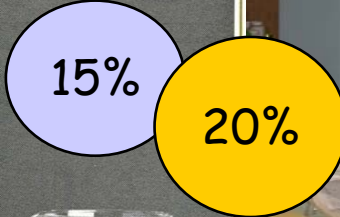
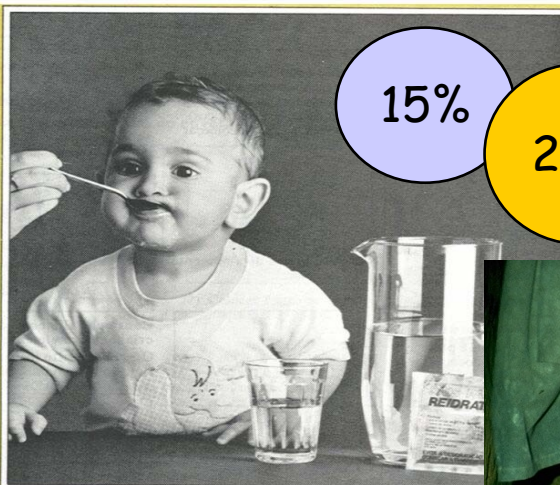


Low-cost interventions can save many lives

CURRENT COVERAGE

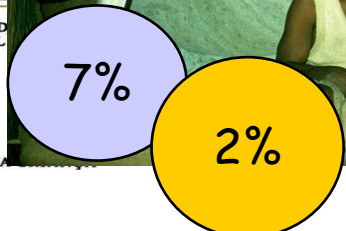
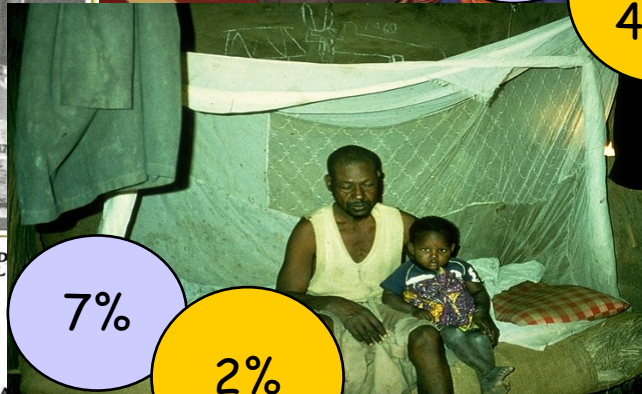


A diarreia é um desarranjo dos intestinos. Faz o corpo perder água e a criança fica com desidratação. E a desidratação, se não cuidada a tempo, pode matar a criança.



MINISTÉRIO DA SAÚDE
SNPES/DIVISÃO NACIONAL
DE SAÚDE MATERNO-INFANTIL

MINISTÉRIO DA PREVIDÊNCIA E ASSISTÊNCIA SOCIAL
OPS
UNICEF



AÇÕES BÁSICAS NA ASSISTÊNCIA INTEGRAL À SAÚDE DA



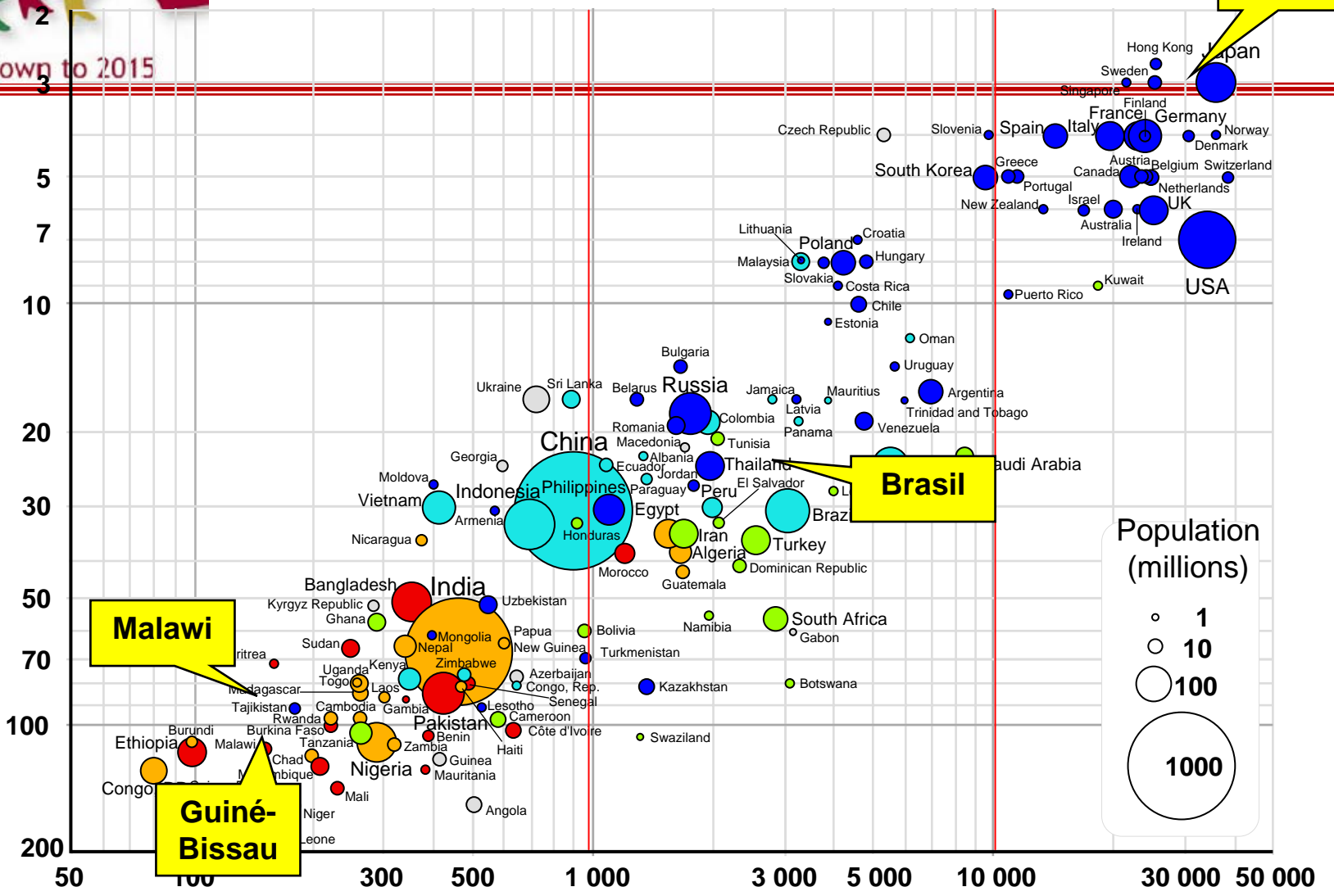
Can health systems deliver?

- 6 million lives could be saved every year by simple, cost-effective interventions
- But scaling up may be difficult
 - Weak health systems
 - Lack of trained human resources
 - Inadequate care seeking and low utilization
 - Hard to reach those who need most
- Inappropriate delivery channels



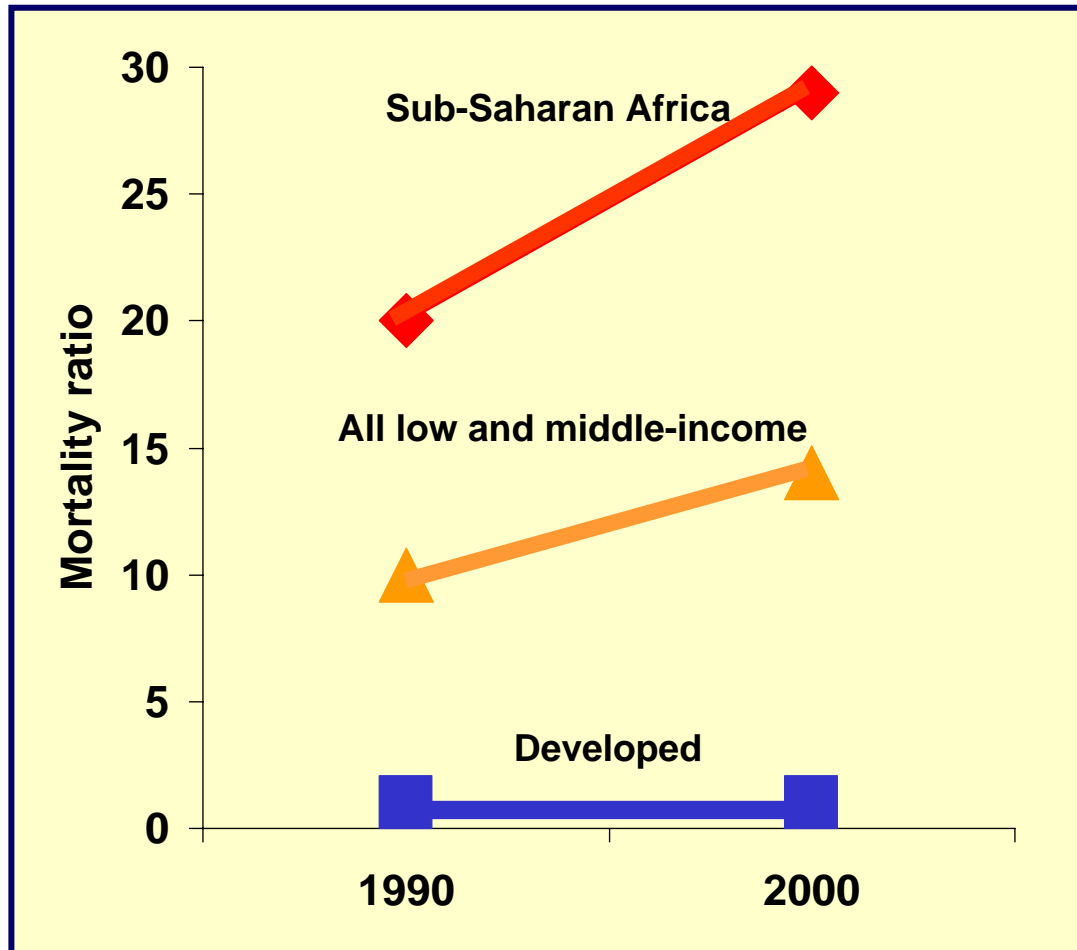
Countdown to 2015

Infant mortality per 1,000 (log)



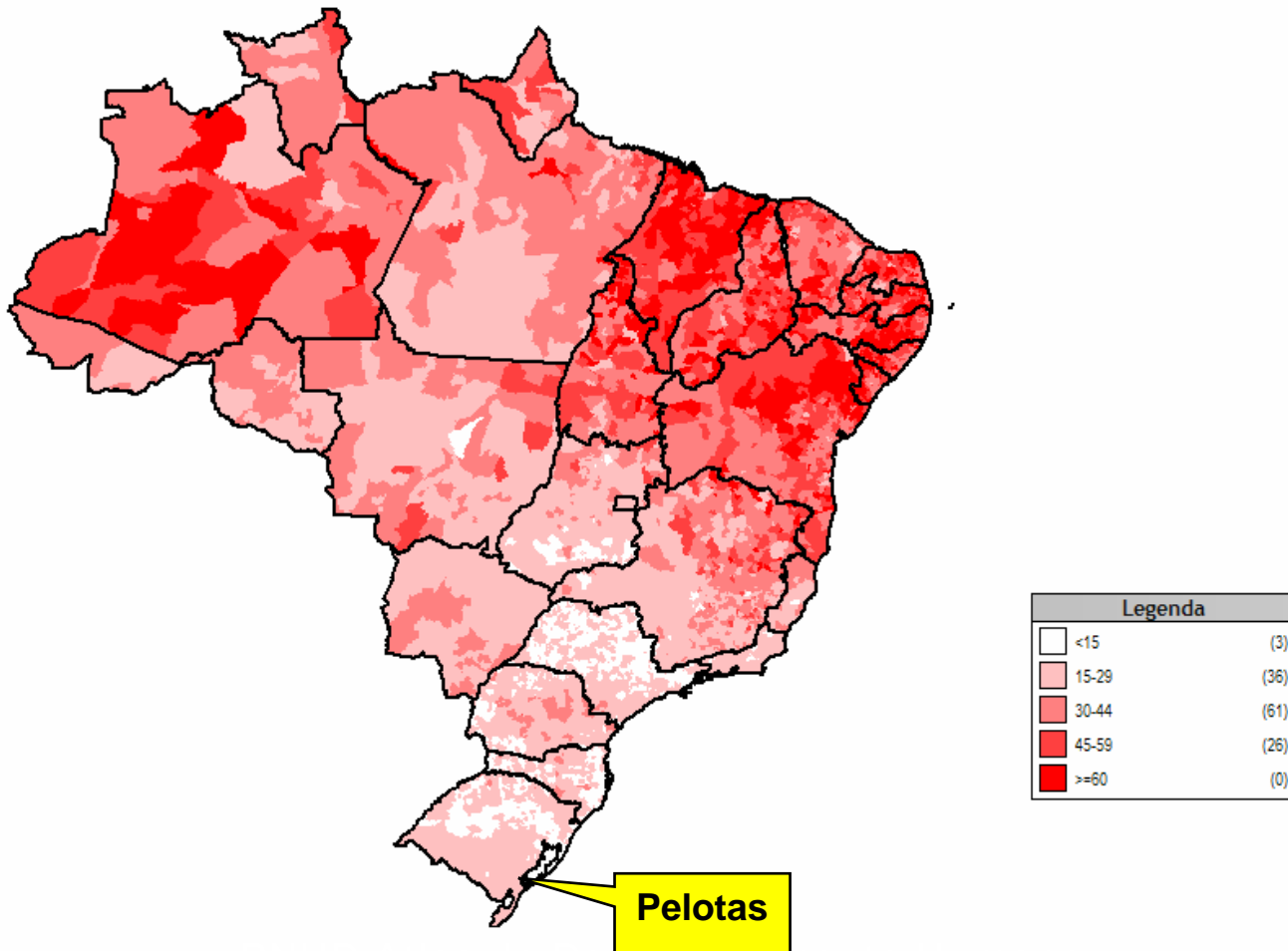
Per capita gross national product in US\$ (log)

The gap between rich and poor countries is widening



Infant mortality rate in Brazil, 2000

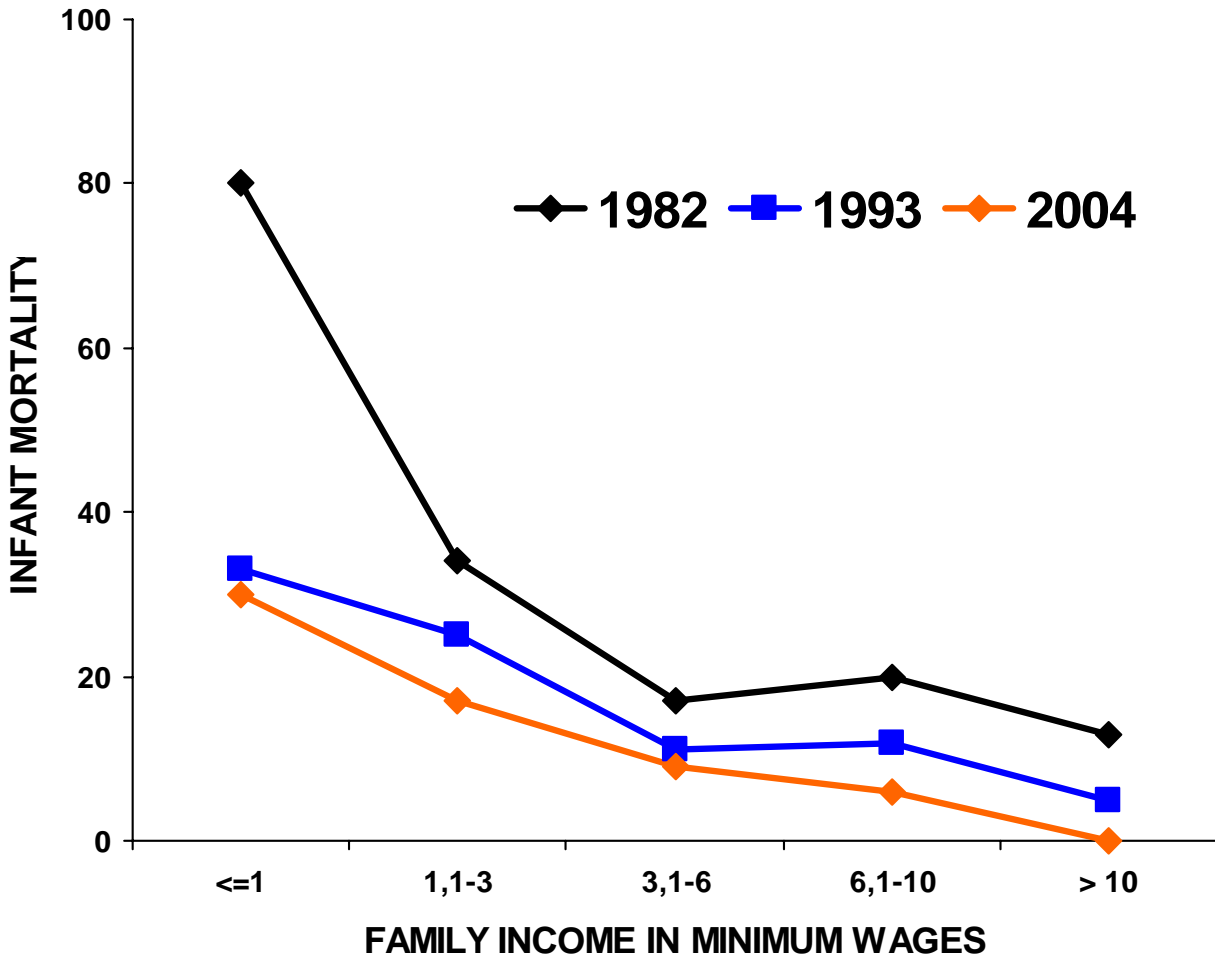
CMI, 2000



Pelotas, Brazil

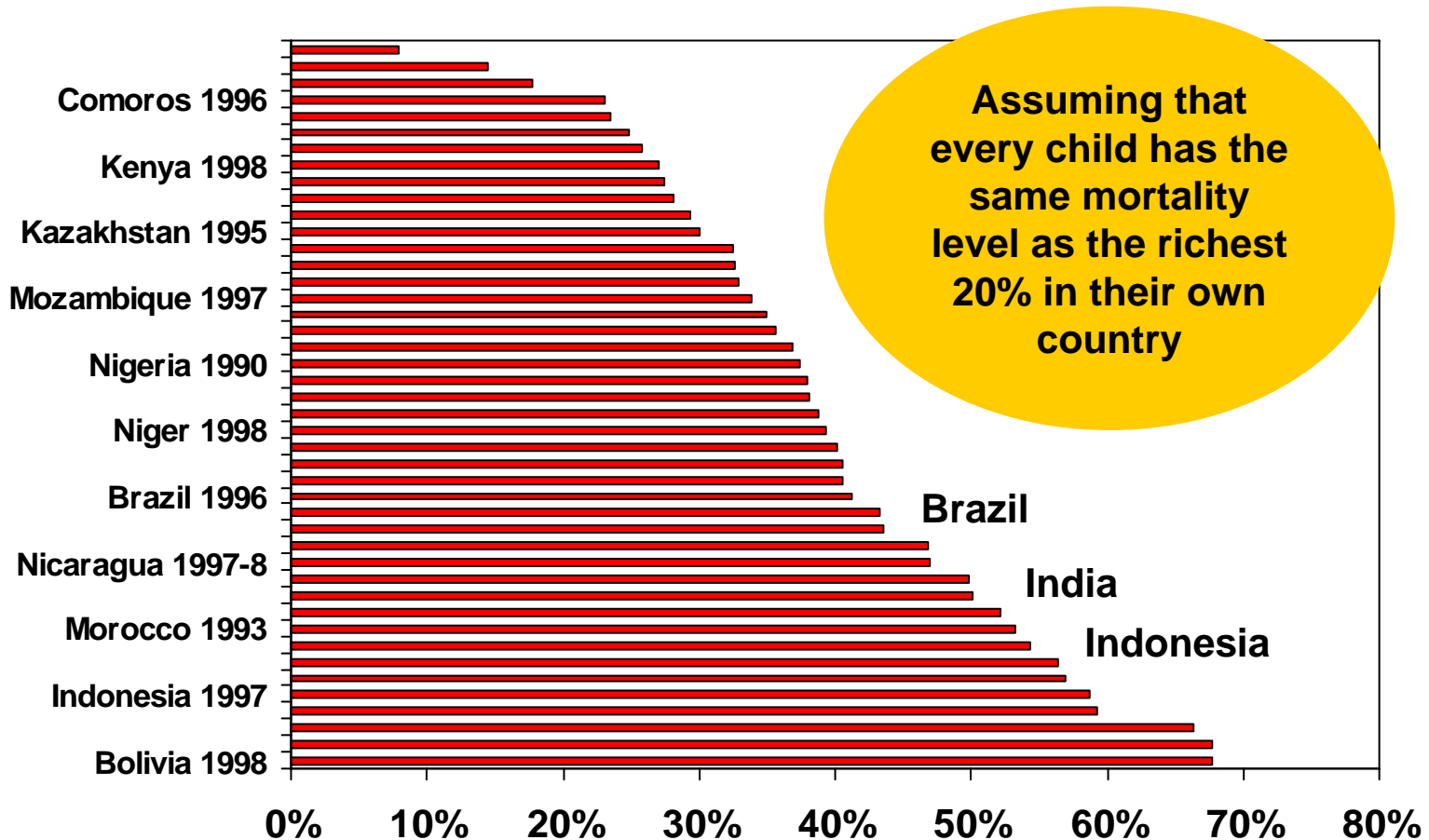


Infant mortality by income groups, Pelotas





Underfive deaths (%) that would be prevented by improving equity



Victora C: Analysis based on DHS data available at World Bank HNP website



Paper 5 – Call to action

- The Child Survival Revolution of the 1980's saved millions of child lives
- Child deaths outnumber HIV, malaria and tuberculosis deaths combined.
- Yet, child survival fell off the international agenda
- Funding for child survival is decreasing in relative, and for some donors in absolute terms
- Cost-effective interventions could prevent 6 million (63%) child deaths if they reached all mothers and children
- We now need a Second Child Survival revolution to complete this unfinished agenda
- Need for global leadership
- Rolling Conference every 2 years

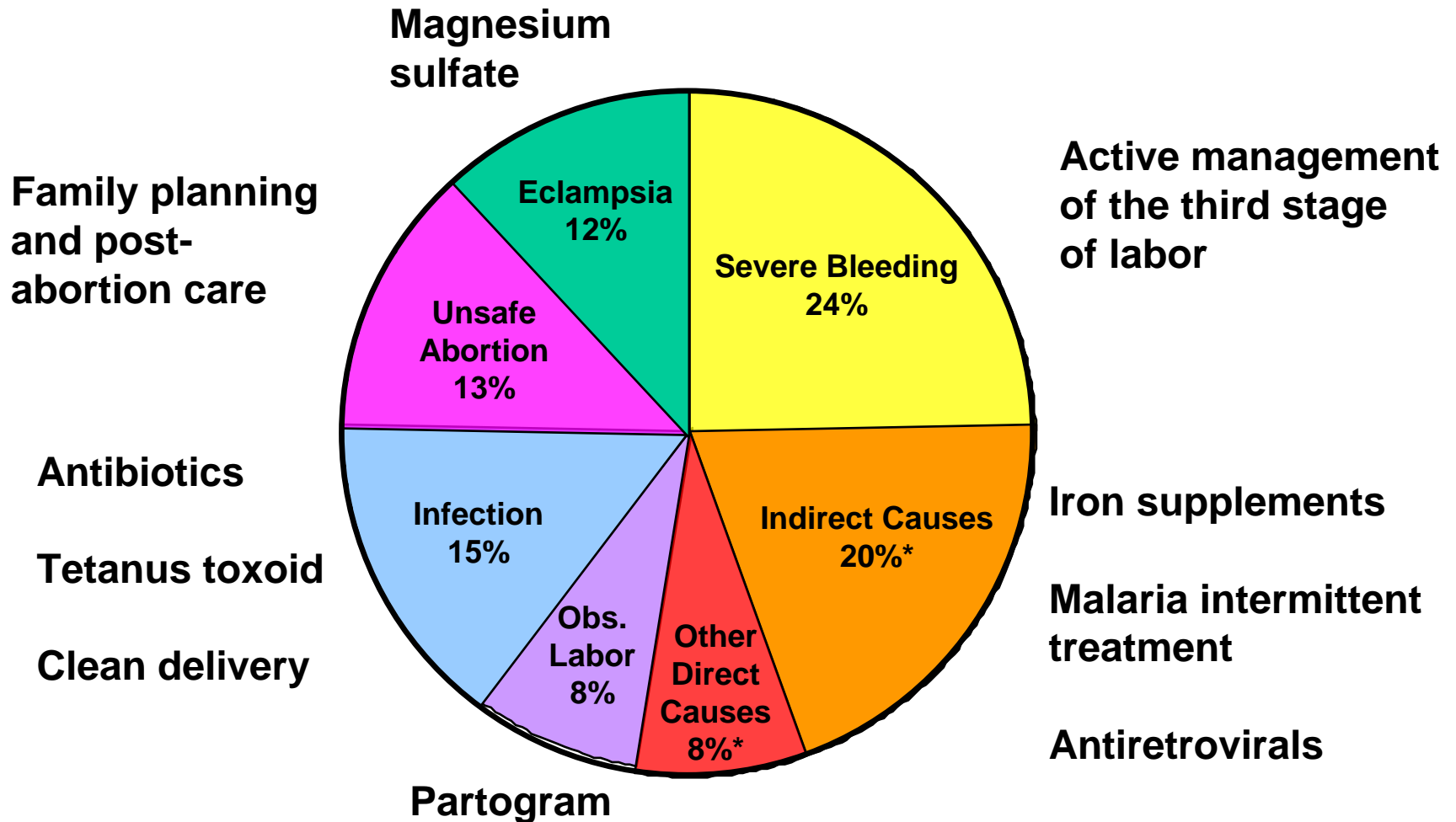


What happened since 2003?

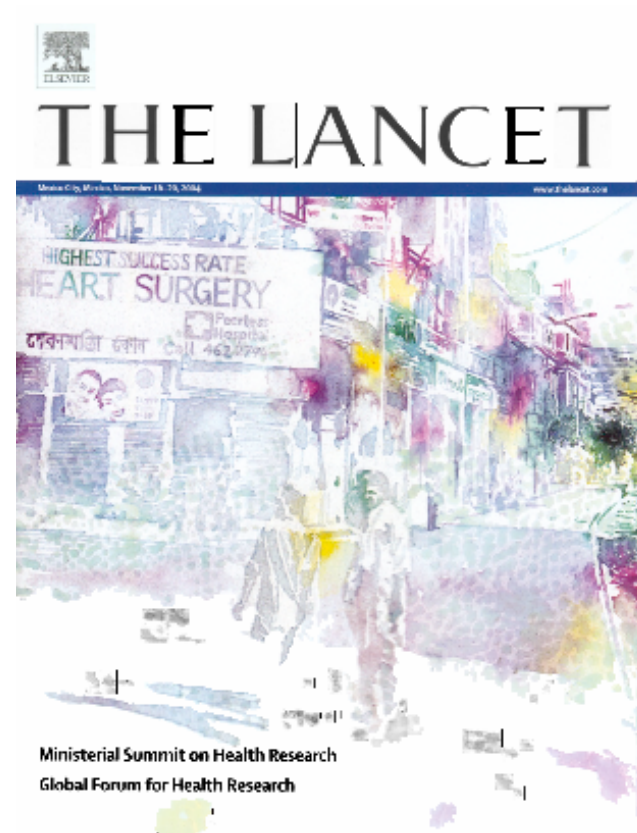
- Paper 1: 4 million deaths: When? Where? Why?
- Paper 2: What interventions work? How many babies can we save?
- Paper 3: How can we scale up newborn care in countries?
- Paper 4: The cost and proposed actions



Growing concern about maternal mortality



- Equity
- Financing
- Human Resources
- Scaling up
- Health systems research priorities





The Lancet series: three years later

- Renewed interest in child survival
 - UNICEF named Child Survival its #1 priority for 2004
 - World Health Report 2005 on Maternal and Child Health
- Partnership for Maternal, Newborn and Child Health
- But so far, little evidence of increased investments at country level

Tracking Progress in Child Survival Countdown to 2015

The first in a series of two-yearly rolling reviews of progress in child survival as called for in the Bellagio/Lancet Child Survival series 2003.



Millennium Development Goals

MDG 4:

To reduce by $2/3$,
between 1990 and 2015,
the underfive mortality rate.

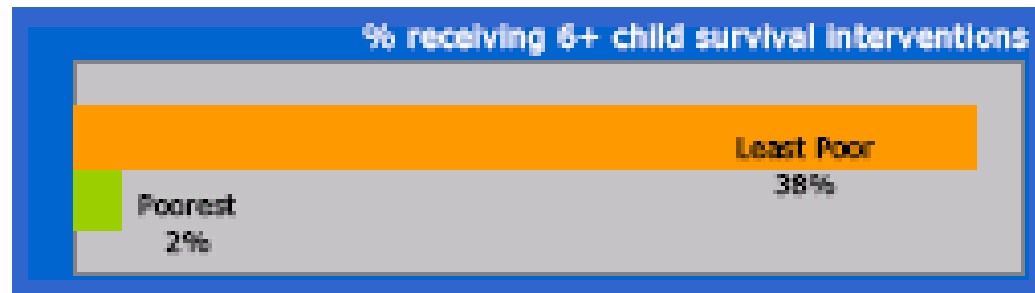
MDG 5:

To reduce by $3/4$,
between 1990 and 2015,
the maternal mortality ratio.

Countdown to 2015

- Child survival report cards
- 60 high-mortality countries (rate absolute number)
- Updated every

Equity

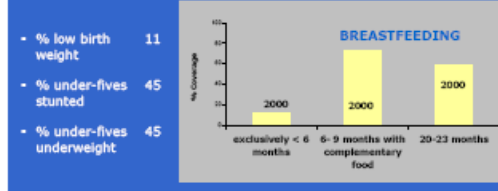


CAMBODIA

Demographics

Total under-five population	1,801,000
Under-five mortality rank	26
Under-five mortality rate	141
Under-one mortality rate	97
Neonatal mortality rate	37

Nutrition



Epidemiological Profile



*These estimates are not country specific. Based on epidemiological profile #1 as described in Black RE, Morris SS & Bryce J. Where and why are 10 million children dying every year. *Lancet* 2003; 361: 2226-34.

Child Survival Intervention Coverage

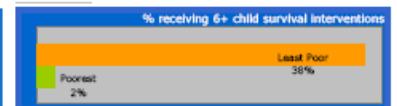


Int'l Code of Marketing Breastmilk Substitutes	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> Partial
New ORS formula	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Partial
Use of zinc for treatment of diarrhoea	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> Partial
Hib vaccine in schedule as of 31 December 2004	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> Partial
Community treatment of pneumonia with antibiotics	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> Partial

Determinants of Coverage

Policies and Political Commitment	[under development]
Human Resources	[under development]
Financial Flows	
Per capita total expenditure on health at average exchange rate (USD) 2002	32

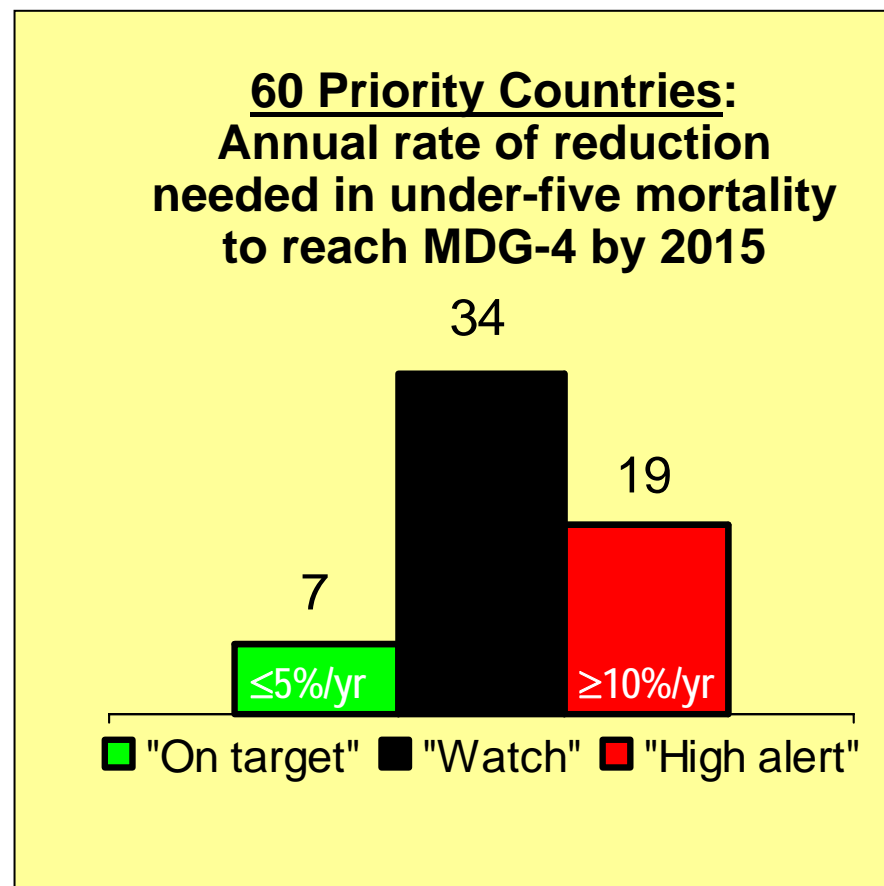
Equity





Only 7 out of 60 countries are on track

- Bangladesh, Brazil, Egypt, Indonesia, Mexico, Nepal, Philippines
- For the 60 countries as a whole, the annual reduction rate required is 8% between 2006 and 2015





Most of the world lives in a country where underfive mortality fell slower in the 1990s than it did in the 1980s



The challenge of delivery channels

How to deliver the effective,
low-cost interventions that we already have,
to those who need them most?