

Global Strategy for Women's, Children's and Adolescents' Health



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Structure of Report

- **GLOBAL TRENDS**

- Trends in mortality and morbidity among women, children and adolescents
- Trends in well-being of women, children and adolescents
- Trends in coverage of interventions and services

- **THREATS TO HEALTH AND WELL-BEING OF WOMEN, CHILDREN AND ADOLSECENTS**

- Action taken to counter threats to the health and well-being of women and children and adolescents

- **DATA GAPS AND ACCOUNTABILITY**

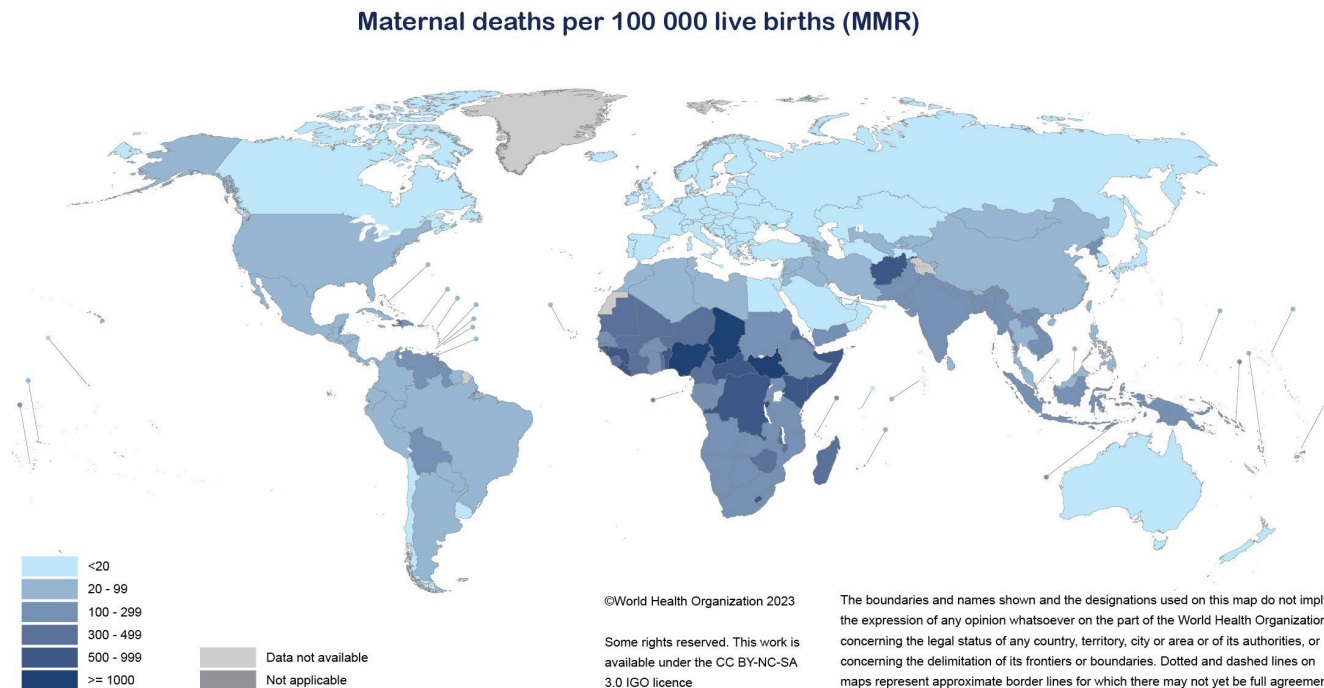
- **ACTION BY THE HEALTH ASSEMBLY**

In addition to the WHA progress report there will be a larger technical report released

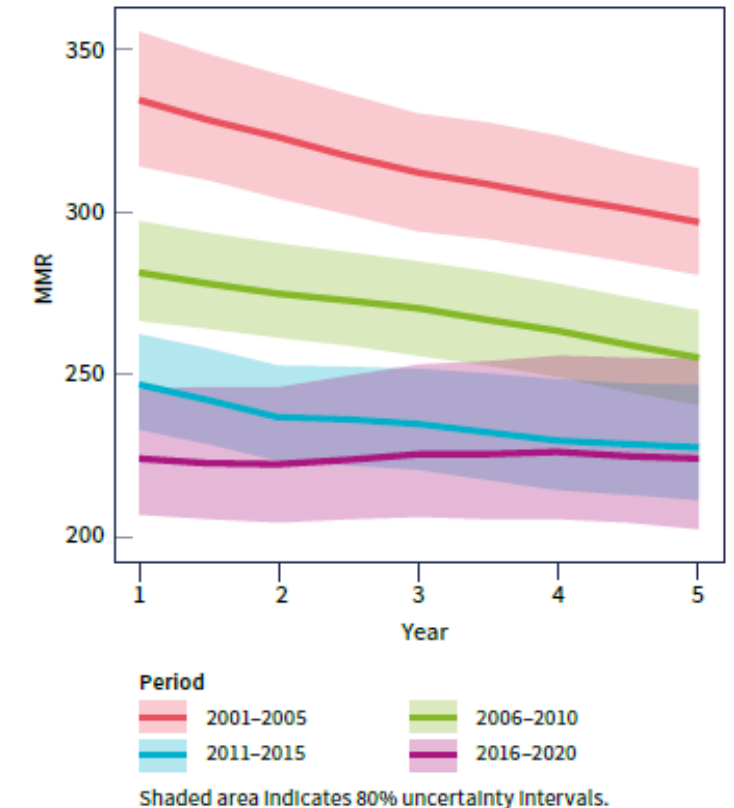
Global Trends

Maternal mortality ratio (MMR) estimates, by country, 2020

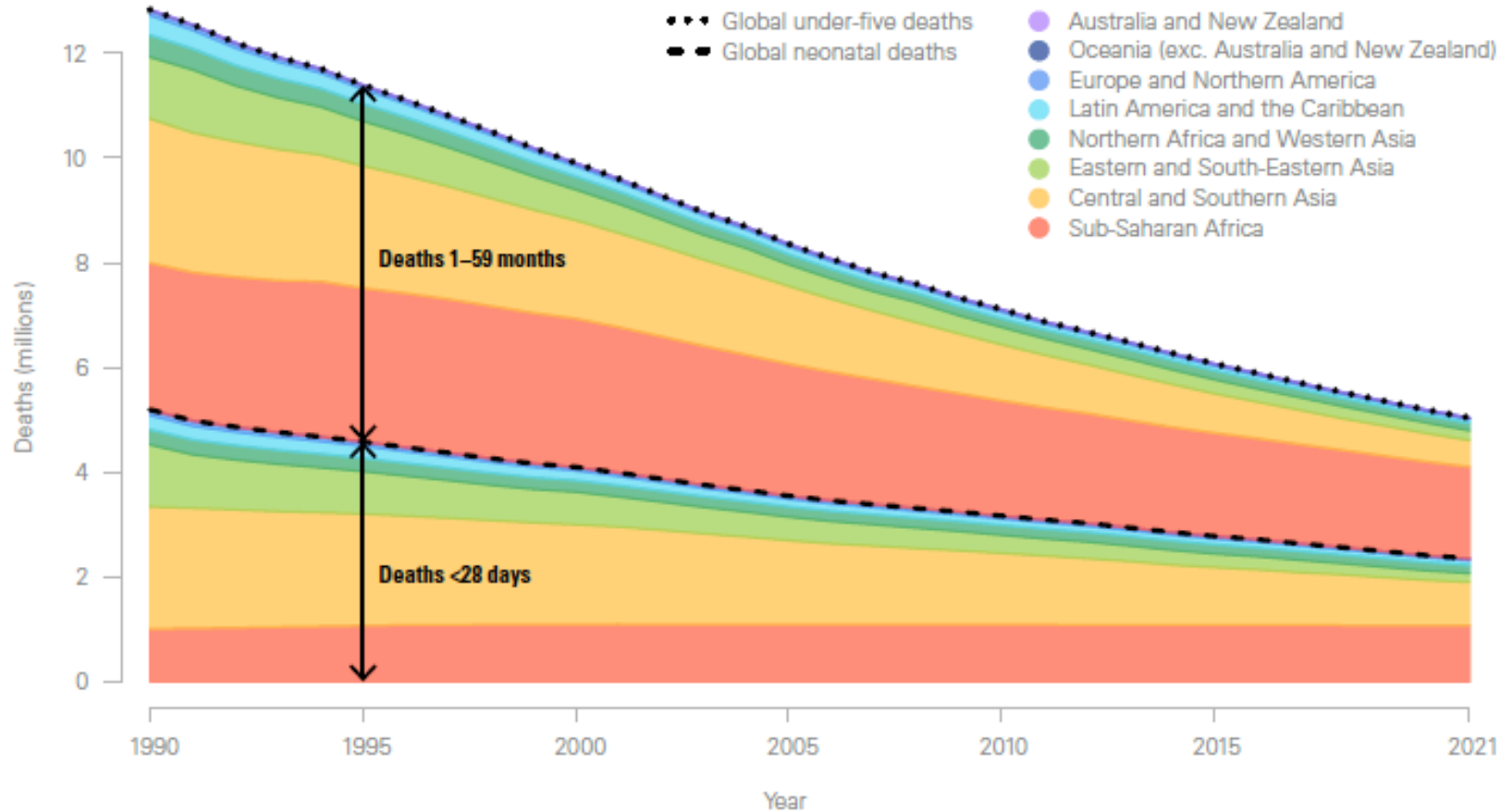
The global maternal mortality ratio has stagnated since 2016 at around 223 maternal deaths per 100 000 live births. Only one WHO region (the South-East Asia Region) has recorded a significant decline in maternal mortality, while all other regions have recorded either a stagnation or an increase.



MMR stratified by 5-year time period, 2000 -2010



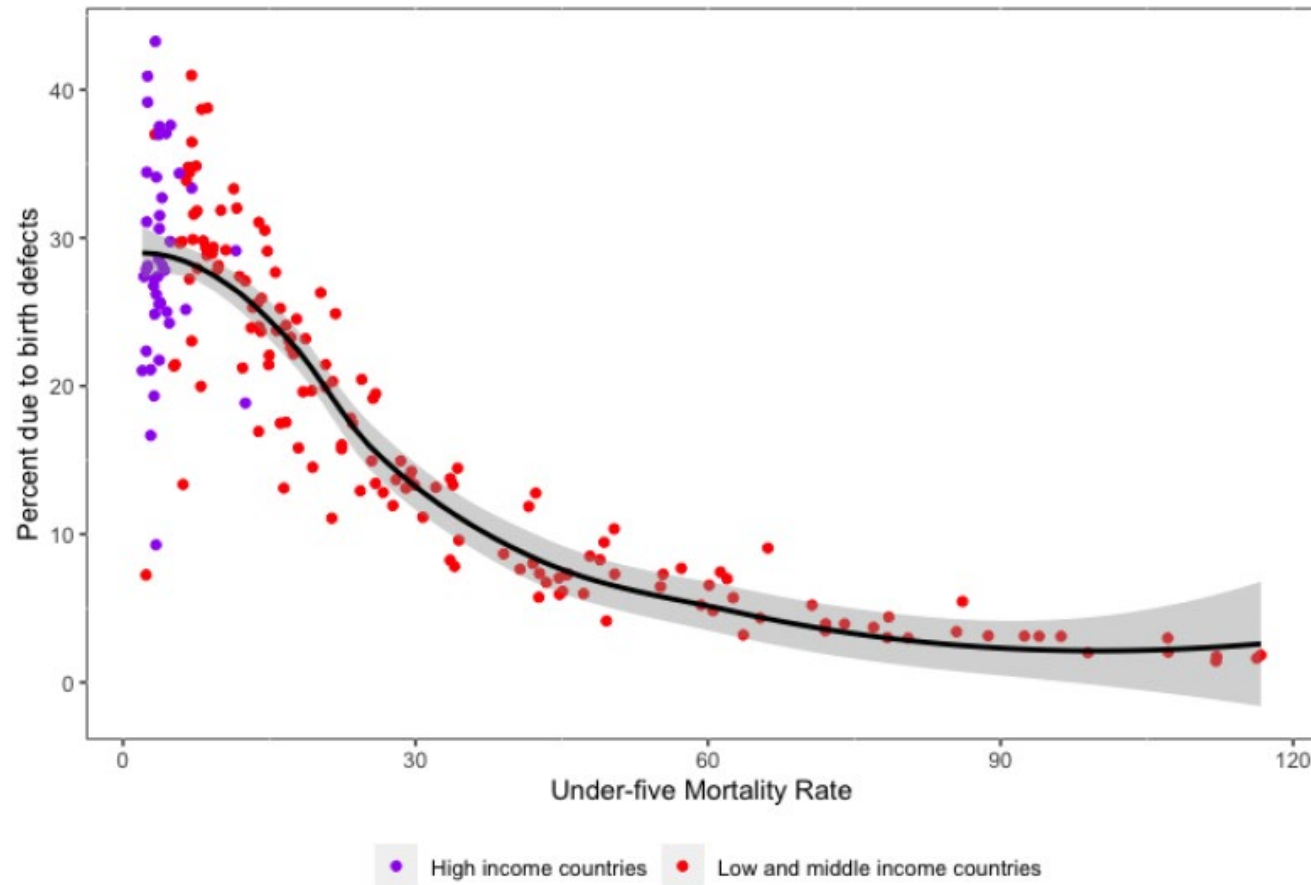
Distribution of under-5 deaths by region 1990-2021



Although progress has been made in under-5 mortality, too many young lives are still being lost each year. In the year 2021, the global mortality rate for children under 5 years of age was 38 deaths per 1000 live births. Almost half of those deaths were among newborns.

Note: While the Central and Southern Asia region is shown as a single regional category here, the under-five deaths burden is mostly borne by Southern Asia; in 2021, Southern Asia accounted for 98 per cent of the region's under-five deaths.

As the mortality rates among children decrease, the proportion of deaths due to congenital anomalies increases



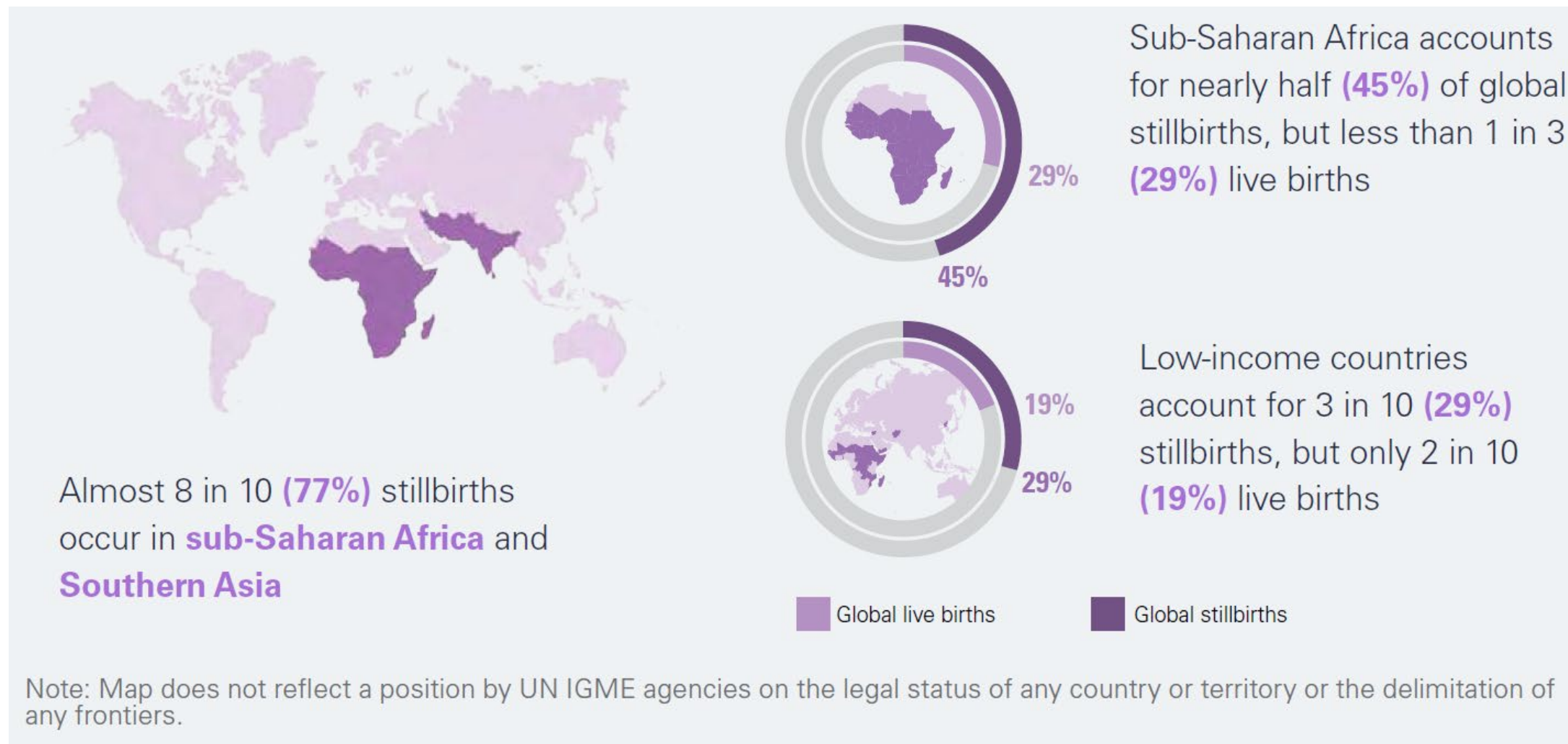
Leading specific congenital anomalies causing mortality in children under 5 years (2019)

Cause	Mortality rate per 100,000
Congenital heart anomalies	23.99
Neural tube defects	11.12
Down syndrome	1.88
Congenital anomalies (total all causes combined)	66.25

WHO Global Health Estimates 2019

Systematic estimates of the global, regional and national under-5 mortality burden attributable to birth defects in 2000–2019: a summary of findings from the 2020 WHO estimates BMJ Open 2023

1.9 million babies were stillborn at 28 weeks in 2021

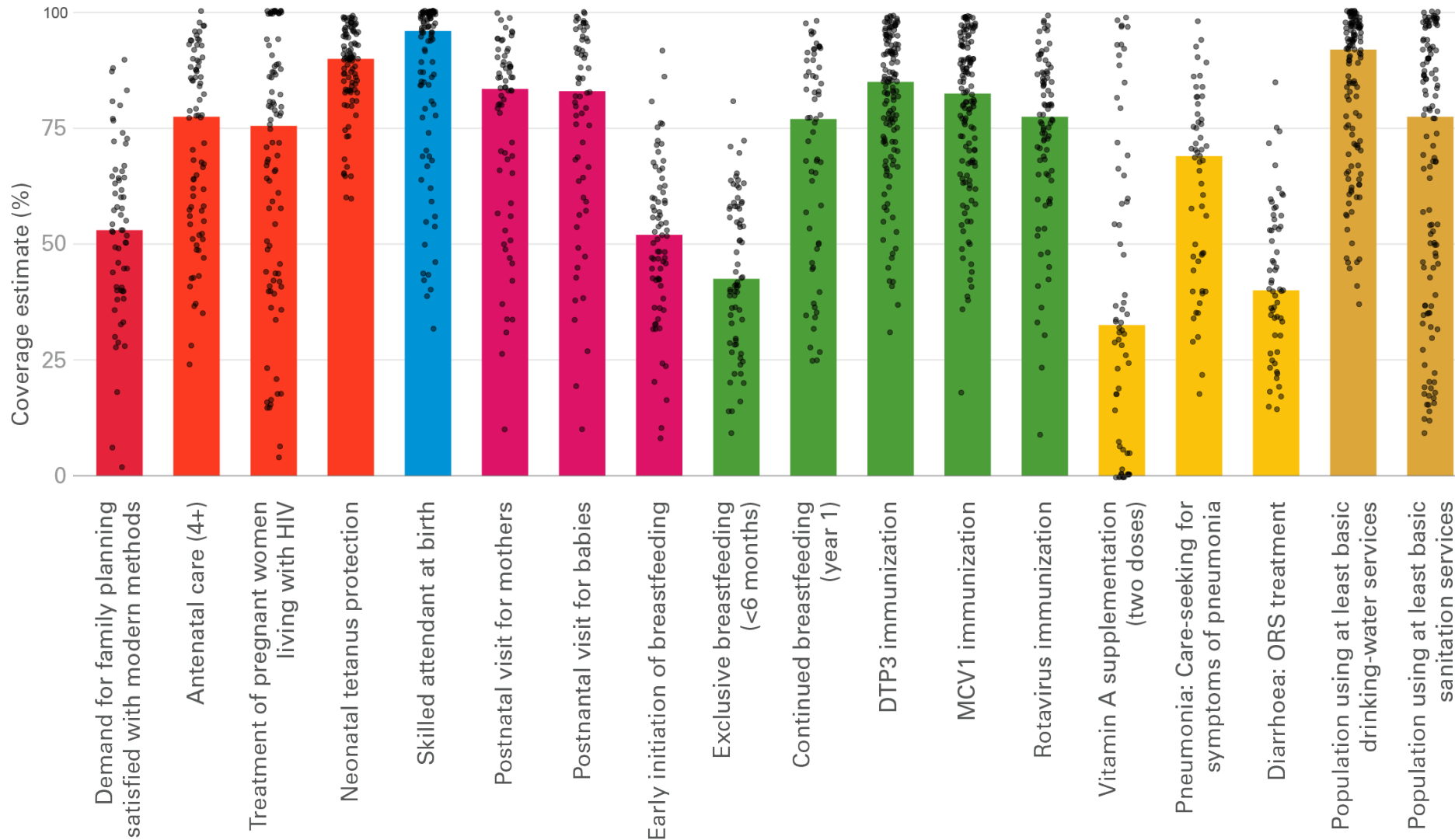


Trends in Well Being



- Inequities in Child Development: Data from 95 low- and middle-income countries showed that the percentage of children who are not on track developmentally is over 20 percentage points higher in low-income countries compared with upper-middle-income ones (38.7% compared with 18%).
- Declines in adolescent birth rates: Globally, birth rates among adolescents have declined from 52.0 births per 1000 adolescent girls in the year 2010 to 42.7 in the year 2020.
- Violence against women: On average, almost one in three women who were aged 15 years or older in the year 2018 have experienced physical and/or sexual violence by an intimate partner and/or sexual violence by a non-partner at least once in their lifetime.
- Mental Health Issues in adolescents: Some of the main causes of the global burden of mental health conditions in the year 2019 included childhood behavioural disorders and anxiety disorders among young adolescents (aged 10–14 years), as well as depressive disorders among older adolescents (aged 15–19 years) in both males and females.

Coverage of Key Interventions



At or below 50% for:

- early initiation of breastfeeding:
- exclusive breastfeeding
- vitamin A supplementation
- demand for family planning satisfied
- diarrhea treatment

Continued drop in immunization coverage during the second year of COVID-19

Poor and other disadvantaged groups are much less likely to receive these services than their wealthier counterparts.

THREATS TO HEALTH AND WELL- BEING

Some Key Threats

Covid-19 pandemic long term impact:

- Between 1 March 2020 and 1 May 2022, it was estimated globally that 10.5 million children (younger than 18 years of age) lost a parent or caregiver to COVID-19.
- Estimates for the year 2020 show a global increase in major depressive disorders among the general population of 27.6% and an increase in anxiety disorders of 25.6% since the onset of the COVID-19 pandemic compared with rates prior to its start.

Humanitarian crisis

- The number of humanitarian crises is increasing around the world.
- Evidence shows that gender-based violence against women and girls increases in a number of humanitarian settings, including conflict-related sexual violence.

Climate change

- A growing body of knowledge also links climate change with adverse maternal, newborn and child health outcomes, which threatens to worsen levels of mortality.

Key Actions taken to counter threats to the health and well-being of women and children



Promote a life course approach: Societies must invest in every stage of the life course. WHO is promoting actions early in life to maintain an optimal level health and well being for as long as possible. Some actions below:

- ***Facilitate Family planning:*** Developed guidelines and tools to address the safety, initiation, use and discontinuation of family planning methods and to provide information for policy formulation, programme design and implementation.
- ***Coordinate humanitarian health:*** In the year 2022, WHO coordinated humanitarian health actions in 29 crisis-affected countries, targeting 97.8 million people including 5.2 million maternal health consultations. The Sexual and Reproductive Health Task Team was established to systematically address conflict-related sexual violence and other systemic sexual and reproductive health issues.
- ***Increase access to postnatal care:*** Released a set of recommendations to improve the quality of essential, routine postnatal care for women and newborns
- ***Improve outcomes of Small and Sick newborns (SSNB):*** Developed 27 recommendations to substantially improve SSNB outcomes. Also developed guidelines that include medicines to assist with labour and delivery; kangaroo mother care; early initiation of breastfeeding; family support and parental leave entitlements

Key Actions taken to counter threats to the health and well-being of women and children continued



- ***Decrease barriers to breast feeding:*** Published reports highlighting the problem of the promotion of commercial breast-milk substitutes
- ***Improving quality of care:*** Network for Improving Quality of Care for Maternal, Newborn and Child Health is organized by the Secretariat and partners in 10 countries. Based on the implementation experience of the Network countries, WHO developed an implementation guide for establishing and implementing quality of care programmes for maternal, newborn and child health at the national, district and facility levels.
- ***Support Parents:*** The Global Initiative to Support Parents, borne out of the parenting crisis that marked the COVID-19 pandemic is spearheaded by UNICEF and WHO in collaboration with partners. The aim is to support countries in scaling up evidence-based parenting interventions that support optimal child development, prevent violence against children and reduce the inequities that the youngest generations face in realizing their human potential.
- ***Address climate change.*** Strategic planning to mitigate climate change-derived health impacts and to design options for adaptation is urgent. WHO, in collaboration with UNICEF and UNFPA, is committed to taking action to strengthen the integration of maternal, newborn, child and adolescent health needs into climate change responses.

DATA GAPS AND ACCOUNTABILITY

Data GAPS and Accountability



Key Data GAPS

- One in four children under 5 years of age do not officially exist, as their birth has never been officially registered.
- Lack of age-disaggregated data
- Delays in household surveys due to COVID-19 pandemic lockdowns
- Last estimate of burden of congenital anomalies was done in 2006

Some Accountability Measures

- A recommended standard for age disaggregation was published in the year 2021.
- A dashboard was created which compares country data on child health and well-being for a specified set of indicators and shows the current status of child and adolescent health across countries.
- A draft set of priority indicators for measurement of adolescent health was published. The indicators are currently being assessed for feasibility in 12 countries
- A birth defects technical working group has been created to revise estimates in the year 2023

Resources



- The larger full technical report will be available on the Maternal, Newborn, Child and Adolescent Health and Ageing website in May 2023

<https://www.who.int/teams/maternal-newborn-child-adolescent-health-and-ageing>



- The Maternal, newborn, child and adolescent health and ageing data portal

<https://platform.who.int/data/maternal-newborn-child-adolescent-ageing/global-strategy-data>

- The Global Health Observatory

<https://www.who.int/data/gho>

- The Child Health and Well Being Dashboard

<https://platform.who.int/data/maternal-newborn-child-adolescent-ageing/child-health-and-well-being-dashboard>



Thank you