CHILD SURVIVAL CALL to ACTION

FACT SHEET: Call to Action Sets Course to End Preventable Child Deaths

On June 14-15, 2012, over 80 countries represented by governments and a multitude of partners from the private sector, civil society, and faith-based organizations gathered at the Child Survival *Call to Action* – a high-level forum convened by the governments of Ethiopia, India and the United States, in collaboration with UNICEF. The *Call to Action* challenged the world to reduce child mortality to 20 or fewer child deaths per 1,000 live births in every country by 2035. Reaching this historic target will save an additional 45 million children's lives by 2035.

Over two days, through new pledges and expanded partnerships, leaders from across the spectrum set the course for a <u>sustained</u>, <u>global effort</u> to end preventable child deaths. As Secretary of State Hillary Clinton said, "We can only meet our ambitious goal if we keep up our efforts day after day and year after year, and if we are relentless about holding each other to the task."

The Sustained Effort: A Promise Renewed

56 governments and over 100 civil society partners signed the pledge

A Promised Renewed commits to sharpening national plans for child survival, monitoring results, and focusing greater attention on the most disadvantaged and vulnerable children. To support partners in fulfilling this sustained effort, UNICEF established a small secretariat to facilitate collective action on three fronts: evidence-based country plans; transparency and mutual accountability; and global communication and social mobilization. <u>http://www.apromiserenewed.org/</u>

A Global Roadmap: Setting the Course

The first iteration was unveiled at the Call to Action

The Global Roadmap pulls together the world's knowledge about how to accelerate child survival, drawing on the latest, peer-tested statistics and modeling of the global health community. The Roadmap outlines a new way of "doing business" through five strategic shifts that would accelerate progress globally and at country-level.

- 1. Geography: Increasing efforts in the 24 countries that account for 80 percent of under-five deaths
- 2. High Burden Populations: Scaling-up access for underserved populations
- 3. High Impact Solutions: Addressing the priority causes that account for nearly 60 percent of deaths
- 4. Education for Women and Girls: Investing beyond health programs to include empowering women
- 5. Mutual Accountability: Unifying around a shared goal and using common metrics to track progress

http://5thbday.usaid.gov/pages/ResponseSub/roadmap.pdf

Power of Partnerships: Leveraging Resources

Uniting the private sector, government, civil society and faith-based organizations

Several new partnerships were announced and expanded at the *Call to Action*. Announcements included: engaging religious leaders across diverse faiths to be effective drivers of behavior change; uniting with private sector to help mothers during labor, delivery, and the first 24 hours postpartum; providing small grant awards to developing country researchers; and aligning technical and financial resources to scale up use of oral rehydration salts (ORS) and zinc for diarrhea.

http://www.usaid.gov/news-information/press-releases/eight-new-partnerships-help-end-preventable-child-deaths

Country Ownership: Leading the Way

Strong commitments to sharpening national plans and engage stakeholders

DEMOCRATIC REPUBLIC OF CONGO (DRC) pledged to increase the health budget in the national budget. In addition, the DRC committed to monitor and evaluate all activities by strengthening the supervision at the base and run a better coordination process of all activities with stakeholders at any level. The Government of DRC and the Eastern Congo Initiative (ECI) announced its support of a new Advisory Council on Child Survival, which will convene multiple stakeholders who are committed to developing strategies for reducing child mortality in Congo.

ETHIOPIA declared child survival a powerful indicator of a country's overall development. Ethiopia expects to exceed MDG 4 targets by 201 and, with accelerated efforts and strategic shifts, believes it can reduce under-five mortality to 30 per 1,000 live births by the year 2025. Six months from now, Ethiopia proposed hosting a follow-up session with African Health Ministers around the upcoming AU Summit. And together with UNICEF, Ethiopia would also like to host the 2nd year follow-up from the Call to Action in Addis Ababa, in 2014.

INDIA is committed to preparing future iterations of a global roadmap to end preventable child deaths. The Government of India has committed to give an urgent priority to convergence of Health and Child Care Services under the universal health coverage. Minister Azad personally pledged to advocate for child survival at all fora, including the upcoming BRICS conference at New Delhi in Nov. 2012. In order to expand the scope and coverage of immunization, particularly in high focus areas, year 2012 has been declared as the "Year of Intensification of Routine Immunization" by Government of India.

NIGERIA made a commitment to its people—and a commitment to its children—to reduce substantially the under-five mortality rate. Through its Subsidy Reinvestment and Empowerment (SURE-P) Program, Nigeria expects to provide approximately \$500 million over four years in additional funding to support thousands of frontline health workers, improve primary healthcare services in more than 3000 rural health facilities – ultimately reaching up to 1.2 million mostly poor rural pregnant women and their children with essential health services.

PAKISTAN committed to a partnership with donors and the private sector to track progress toward reducing under- five child deaths, and to developing a Score Card that will be used to track progress at the federal and provincial level. The United Kingdom Department for International Development, the Australian Agency for International Development, and USAID are working together with the Government of Pakistan to prevent approximately 195,000 under five child deaths over three years through an investment of \$485 million.