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FROM THE AMERICAN PEOPLE

Launch of the Lancet Journal *Every Newborn* Series in Ethiopia

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I am pleased to represent USAID at this very timely launch of the Lancet Every Newborn series here in Ethiopia designed to focus our collective efforts on addressing one of the most pressing issues for our child survival agenda, preventable newborn deaths. Thanks to the leadership and determination of the Ministry of Health and health workers across the country coupled with the support from many partners here today, much progress has been made in reducing under-five child mortality with Ethiopia proudly achieving MDG goal of cutting under-five mortality by two-thirds.

Yet while the 2014 mini-DHS results tells us that more mothers are giving birth with the assistance of a health care professional, even more are seeking ante-natal care, and many more are using contraception to space births. Newborns constitute 43 percent of under five deaths in Ethiopia, close to the world average of 44 percent, and represent a larger proportion of under-five deaths now than they did in 1990. Thus, despite progress in child survival, the single most important remaining cause of death among children less than five years of age is newborn deaths—deaths within the first 28 days of life.

As we deliberate the post-2015 agenda and priorities, we must continue to re-evaluate our approach to reducing infant deaths. The Lancet series not only presents global progress and best practices for newborn survival, but also gives us a foundation on which to set national priorities for newborn health here.

Key findings of the Lancet newborn series bring our attention to the need to focus on the day of birth, which is when 40 percent of maternal and newborn deaths occur. The series further highlights the impact of scaling up interventions addressing the time of birth, care of small and sick newborns, community care and family planning. Lastly, the series directs our attention to targeting health system bottlenecks to newborn health including finance and workforce related impediments.

Through a number of USAID projects, including those supported by [PEPFAR](#), our strategy reflects this multi-pronged approach to tackle maternal and infant mortality by strengthening the health systems to support services, commodities, data systems, financing and personnel for the long term; by helping to develop the healthcare workforce, notably midwives; by improving the quality and availability of services for newborn care; by tackling malnutrition as a key aspect of food security for expecting and lactating mothers; and by helping to ensure that mothers affected by HIV or malaria are able to protect their babies.

Child survival and maternal and newborn health has long been a priority for USAID and continues to be a top priority for the agency worldwide as well as Ethiopia. As one of the largest bilateral donor in Ethiopia, USAID has

invested over 120 million dollars in maternal, newborn and child health (MNCH) over the past three years. USAID's **Integrated Family Health Program** has been instrumental in the initial training, scale up and ongoing supervision of Integrated Community Case Management of Childhood Illnesses in over 280 *woredas* (districts) in the four major regions. In addition, through the implementation of immunization, infant and young child nutrition, basic emergency obstetric and newborn care training and the establishment of newborn corners in labor and delivery we have helped the Ministry to address the high rates of maternal and neonatal mortality.

The **Last Ten Kilometers (L10K)** project, implemented by John Snow, Inc., supports Ethiopia's Health Extension Program which links over 13.8 million people to high impact MNCH interventions. In addition, L10K is supporting the implementation of community based newborn care through USAID in four zones and is working to increase the numbers of health care workers trained on basic emergency obstetric care at health center level to reduce preventable maternal and newborn deaths.

And in collaboration across health, education and agricultural sectors, USAID's Empowering **New Generations to Improve Nutrition and Economic Opportunities (ENGINE)** program works to prevent under-nutrition in the first 1,000 days of life, from the start of pregnancy until the age of two.

But much more needs to be done to prevent avoidable mother and newborn deaths.

USAID is stepping up assistance to increase access to essential newborn care and address one of the three big killers of newborns—preterm births, intrapartum-related disorders and infection. And I am pleased to say USAID is devoting additional resources and expertise to ending maternal and newborn deaths worldwide. The new **"5 Year Every Preemie"** project is designed to provide practical, catalytic and scalable approaches for expanding uptake of preterm birth and low birth weight interventions in 24 USAID priority countries, including here in Ethiopia. USAID's global **Maternal and Child Survival Program**, implemented by Jhpiego, along with a consortium of global organizations, will mobilize \$500 million to ensure that women, newborns, and children most in need have equitable access to quality health care services. We will draw on this expertise to supplement our efforts here in Ethiopia.

The **Survive and Thrive Global Development Alliance** is a new public-private partnership that engages U.S. pediatric, Ob/Gyn, and midwifery associations with the private sector and the U.S. Government to support the scale up of well-established, high-impact interventions such as *Helping Babies Breathe*, essential care for every baby and the prevention and management of preterm/low birth weight babies. Under this alliance, the **Helping 100,000 Babies Survive and Thrive** initiative brings together USAID, the American Academy of Pediatrics, and pediatric associations of Nigeria, India, and Ethiopia to help save at least 100,000 newborn lives each year in partnership with Laerdal Global Health, Johnson & Johnson, the Government of Norway, and the Bill & Melinda Gates Foundation.

And finally, USAID is supporting the **Maternal Child Survival consortium** of partners in Ethiopia, where Save the Children will help scale-up Community Based Newborn Care in 12 zones of the major agrarian regions and will address the continuum of care from the community to primary hospital level. Jhpiego will help the Government of Ethiopia to further expand basic emergency obstetric care through increasing skilled attendance at birth at the health center level.

As we enter 2015, the single unfinished priority for child survival is newborn and maternal survival. We are delighted that the Government of Ethiopia, led by the Ministry of Health and Dr. Kesete, has committed to increasing services to support mothers and newborns from community to tertiary level to significantly impact maternal and newborn survival. USAID is steadfast in helping the Ministry of Health act on that commitment and

continue as a leading example for other countries on child survival and we look forward to our ongoing partnership.

Thank you.