KEY PRINCIPLES TO ACCELERATE THE JOURNEY TO SELF-RELIANCE

DRIVE ACCOUNTABILITY
Create an environment where society works together to ensure health needs are met.
Communities lobby for transparency and accountability.

ENGAGE THE PRIVATE SECTOR
Bring private sector technologies and investment to country health systems and include the private sector in delivering health services to complement and expand the reach of the public sector.

MOBILIZE DOMESTIC RESOURCES
Expand available resources for health, improve how we spend existing health resources, and diversify sources of health resources.
Government officials request and spend health funding based on plans and achievement of specific results.

BUILD IN COUNTRY CAPACITY
Strengthen health systems to ensure that countries can manage their health workforce, fund their own health systems, ensure quality, and maintain the right equipment and commodities.
Well trained health workers are deployed to areas of the country most in need of their skills.

KEY PRINCIPLES TO ACCELERATE THE JOURNEY TO SELF-RELIANCE

ACTING ON THE CALL 2019
A FOCUS ON THE JOURNEY TO SELF-RELIANCE FOR PREVENTING CHILD AND MATERNAL DEATHS

Since 2012, the governments in more than half of USAID’s priority countries for maternal and child survival have increased their domestic budgets for health. For the past five years, the U.S. Agency for International Development (USAID) has identified and refined its strategy to prevent child and maternal deaths in annual Acting on the Call reports. This strategy outlines USAID’s approach to identifying and scaling up high-impact interventions to maximize our effectiveness in terms of saving the lives of women and children and increasing the capacity and commitment of partner countries.

The Acting on the Call report lays out, and provides updates on, USAID’s commitment to prevent child and maternal deaths. As a result of our efforts, governments are allocating more resources to health and taking ownership of their own programs.

In the 2019 Acting on the Call report, we highlight key principles USAID has identified as important to achieve self-reliance, as well as how we can incorporate them to sustain our current and future impact. In the 2018 Acting on the Call report, we examined where countries are on their respective journeys, and in this report we assess how they can best accelerate progress. Many countries are at the beginning of their journeys, and none is nearing the end, which presents USAID with the opportunity to reorient our funding to both maximize impact and help these countries transform into self-reliant nations for health.

USAID’s strategy to prevent child and maternal deaths is grounded in supporting governments to plan, manage, and fund their own health systems — now and in the future. Leveraging diverse ideas, resources, and partners will stretch, build upon, and increase the impact of USAID’s investments.

USAID’S IMPACT SINCE THE 2012 CALL TO ACTION

13.9M health workers trained in maternal and child health and nutrition
85.2M treatments provided to children for diarrhea and pneumonia
24M women reached with voluntary family planning services, annually
12M women gave birth in a health facility
41.1M children vaccinated against deadly preventable diseases
28M children reached with nutrition programs
9.3M newborns reached with care after delivery
14.9M people gaining access to basic drinking water services

In 2018, USAID helped 81 million women and children access essential — and often life-saving — health services.

A HISTORY OF ACTING ON THE CALL

2012: At the Child Survival Call to Action Summit, global leaders agree around the goal of ending preventable child and maternal deaths.
2014: USAID releases the first annual Acting on the Call report, which lays out a country-specific strategy to save 15 million children and 600,000 women between 2012 and 2020.
2015: The Government of India gathers global leaders at a Call to Action, and USAID releases the annual report, further refining our approach to improving quality care around labor and delivery.
2016: The annual report identifies equity as key to achieving our goals.
2017: The Government of Ethiopia hosts an Acting on the Call Summit, and USAID releases the annual report recognizing that addressing health systems challenges is critical to success.
2018: The 2018 Acting on the Call report examines where countries are on their journey to Self-Reliance for preventing child and maternal deaths.
2019: The 2019 Acting on the Call report highlights key principles to accelerate progress on the Journey to Self-Reliance.
USAID partners with countries on their journey to self-reliance

USAID partners with countries to increase their capacity and commitment for health, including by working to increase funds made available to health, improve efficiencies in spending them, and bring new resources to the table.

- **MALI:** Improved the coordination of supply-chain partners through regular meetings and an online data platform, which resulted in a 50% decrease in stock-outs of medicines for women and children’s health.

- **INDIA:** Demonstrated a model to improve the quality of care around birth, which was shown to reduce stillbirth and neonatal mortality by 20% and is now being scaled up nationwide by the Government.

- **ZAMBIA:** Trained 25 community and faith-based organizations to manage grants and strengthen community systems, which created 913 Neighborhood Health Committees to advocate for better health for communities.

- **MALAWI:** Going forward, evaluate a new screen-and-treat strategy for cervical cancer that uses molecular testing for the human papillomavirus, integrated with voluntary family planning efforts.

- **MOZAMBIQUE:** Improved referral systems between rural health facilities and communities, which resulted in an increase in recovery from acute malnutrition to 72% from 59% in one year in target provinces.

- **ETHIOPIA:** Going forward, encourage local industry to meet standards for fortifying oil with Vitamin A and fortifying wheat flour with iron to increase the density of nutrients in local foods.

- **BANGLADESH:** Developed a plan, including cost, to scale up 24-hour delivery services in public facilities nationwide, resulting in an allocated domestic budget for the activity.

- **RWANDA:** Implemented a new training model, which costs up to 80% less than traditional training and has resulted in providers qualified to manage childhood illness in 79% of supported facilities.

- **HAITI:** Strengthening child nutrition services in the health system

Malnutrition is an underlying cause of 45 percent of child deaths and 20 percent of maternal deaths. It inhibits the immune system and the body’s ability to fight illness, which substantially increases the risk of death for children who are suffering from illnesses and infections such as pneumonia, malaria, and diarrhea.

Improving the delivery of nutrition services at both the facility and community levels is vital to preventing child and maternal deaths, as well as to building a country’s capacity to address its own nutrition needs in the future. In this year’s Acting on the Call report, as we look at opportunities to strengthen national capacity, we’ve examined the estimated child deaths that can be averted through improved nutrition.

If all children in our priority countries were properly nourished, more than 9.6 million child deaths could be averted between 2012 and 2020.

**Countries are increasing their public investments in health**

- **RELATIVELY STABLE INVESTMENT IN HEALTH AS PART OF OVERALL BUDGET**
- **RELATIVE INCREASE IN HEALTH SPENDING AS PART OF OVERALL BUDGET**

* As indicated by a percentage point increase in share of government spending on health since 2012