USAID GLOBAL HEALTH PROGRAMS
FY 2016 PRESIDENT’S BUDGET REQUEST
ENDING PREVENTABLE CHILD AND MATERNAL DEATHS—$2.09 BILLION

Mission: to end preventable child and maternal deaths in a generation.

289,000 mothers continue to die during what should be a joyous moment in their lives, and 6.3 million children die from causes we know how to prevent.

Major Determinants for Ending Preventable Deaths

- Child Health
  - Newborn
  - Immunization
  - Polio
  - Childhood Illnesses
- Maternal Health
- Malaria
- Family Planning
- Nutrition
- Water, Sanitation, and Hygiene

USAID’S ROLE

USAID works in the toughest parts of the world to end extreme poverty, and to promote resilient, democratic societies while advancing our security and prosperity. Ensuring the survival of mothers, newborns, and children is vital to developing healthy, prosperous nations. USAID works with countries and partners to end preventable child and maternal deaths.

- At USAID we have aligned our resources toward life-saving interventions that have the greatest impact on mortality.
- New data, effective technologies, and country innovations enable strategic shifts towards ending preventable child deaths by focusing on the countries, diseases, and populations with the highest burden and the interventions that work.
- The budget allocates resources to countries with the highest need, demonstrable commitment, and the potential to leverage resources from the public and private sectors in order to accelerate progress to end preventable child deaths.

HAITI

UNDER-5 MORTALITY RATE:

- ≥100
- 75-100
- 50-74
- <50

These 24 countries represent over 70% of the global preventable child and maternal deaths.

WHY WE’RE NEEDED

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>NEED</th>
<th>GOAL</th>
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<tbody>
<tr>
<td>Maternal and Child Health</td>
<td>Every year 6.3 million children die before their 5th birthday. And 289,000 mothers die each year.</td>
<td>Save 15 million child lives and 600,000 women’s lives through 2020 in 24 focus countries.</td>
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<td>Family Planning</td>
<td>More than 225 million women in developing countries who don’t want to get pregnant lack access to contraceptives and voluntary family planning information and services.</td>
<td>Reach 120 million more women and girls in the world’s poorest countries with access to voluntary family planning information, contraceptives, and services by 2020.</td>
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<td>Malaria</td>
<td>In 2013, an estimated 437,000 deaths occurred in children under 5 years of age in Africa—83 percent of the total malaria deaths in the Africa Region, and 96 percent of all malaria deaths in children under five globally.</td>
<td>Further reduce malaria deaths and substantially decrease malaria morbidity towards the long-term goal of elimination.</td>
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<td>Nutrition</td>
<td>Globally, at least 162 million (25 percent) children under five were stunted in 2012. A stunted child is nearly five times more likely to die from infectious diseases compared to a non-stunted child.</td>
<td>Decrease chronic malnutrition, measured by stunting, by 20 percent over the next five years.</td>
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*Work is done in concert with host countries and partners
IMPACT HIGHLIGHTS

- Child deaths decreased by nearly half (49 percent) from 1990 to 2013, saving an estimated 100 million child lives, and maternal deaths decreased by 45 percent from 1990 to 2013. The 24 priority countries where USAID works have achieved an eight percent reduction in under-five mortality in the last two years alone, saving 500,000 lives.

- Between 2000 and 2013, malaria mortality rates decreased globally by 47 percent and by 54 percent in Africa alone. It is estimated that more than 4 million malaria-related deaths, primarily in African children under the age of five, were averted during this period.

- Rates of modern contraceptive use have increased from 12 percent in 1990 to 31 percent in 2013 in the countries with the largest USAID supported programs. Family planning enables women to practice healthy timing and spacing of pregnancies, which could lower child deaths by 25 percent and cut maternal deaths by one-third.

- Stunting, or short height for age, is caused by a lack of essential vitamins and nutrients during the early years and by frequent illness, which robs growing bodies of the capacity to utilize available nutrients. In USAID’s 19 nutrition focus countries, stunting has been reduced from 55.6 percent in 1990 to 37.7 percent in 2014.

State and USAID Global Health Programs Request FY 2016 ($ millions)

The priority Ending Preventable Child and Maternal Deaths (EPCMD) comprises 26% of the total Global Health Programs State-USAID.

- Ending Preventable Child and Maternal Deaths: $2,097.5
- Creating an AIDS-free Generation: $5,756.0
- Protecting Communities from Infectious Diseases: $327.5

Total: $8.18 billion

USAID Global Health Programs Request FY 2016 ($ millions)

Almost 75 percent of USAID’s global health funding is focused on EPCMD.

- Ending Preventable Child and Maternal Deaths: $2,097.5
- Creating an AIDS-free Generation: $330
- Protecting Communities from Infectious Diseases: $327.5

Total: $2.75 billion

USAID Global Health Programs, Funding History for Maternal and Child Health

Within Maternal and Child Health, most additional resources are devoted to Gavi.