



- Clear communication on interventions with the greatest effect (community & facility) and how to *overcome bottlenecks for scale-up*;
- *National leadership*, and technical capacity to integrate and implement interventions;
- *Global coordination of partners, especially within countries*, in provision of technical assistance and increased funding;
- Increased *domestic investment* in newborn health, and access to specific commodities and equipment where needed;
- Better data to monitor progress, with *local data used for programme improvement*;
- Accountability for results at all levels, including demand from communities and mortality targets in the post-2015 framework.

“The fate of newborn health in the next decade depends on the extent to which this unfinished agenda reaches beyond global health actors and is successfully pursued within countries”.

Jeremy Shiffman, Lancet 2010;375:2045–49.

Figure 1: Policy process heuristic used to frame assessment of changes and challenges for newborn survival