

KEY MESSAGES

I. WHAT ARE THE PROBLEMS?

1. **South Asia has the highest number of newborn deaths** (deaths within the first 28 days of life by UNICEF region) **in the world¹**.
 - In 2015, the global number of newborn deaths was 2.7 million.
 - South Asia, alone, had more than 1 million newborn deaths in the same year with India (696,000), Pakistan (245,000) and Bangladesh (74,000) as the highest burden countries.
2. **South Asia has a high proportion of under-immunized children.**
 - **About 5 million children in South Asia are under-immunized.** Most of these children live in Pakistan, India and Afghanistan.
3. **Newborn deaths tend to be among the poorest and most disadvantaged populations in the region.**
 - **Huge inequities in critical newborn health interventions exist across South Asia.**
 For example:
 - i. Almost all births in Sri Lanka (99%) are attended by a skilled attendant (a medically trained provider) compared to only 42 percent in Bangladesh.²
 - ii. In India, only 20% of women had a skilled attendant during their last stage of birth in Nagaland compared to almost all women in Kerala (99%), and Tamil Nadu (99%).³
 - iii. In Afghanistan, the wealthiest women are about five times as likely to have a skilled attendant at birth as the poorest women.⁴
 - iv. In Nepal, wealthiest women are twice as likely to receive antenatal care (ANC) than the poorest women.⁵
 - **Some countries in the region have made significant improvements in immunization since 1990 – particularly Bangladesh, Sri Lanka and Nepal. However, immunization coverage is still far too low in high-burden countries:** Afghanistan, India and Pakistan. There is also significant disparities in immunization coverage across the region within and between countries.⁶
 - i. For example, in Afghanistan's Farah Province, immunization coverage is less than 3 percent whereas in Rajshahi district in Bangladesh, it is 99 percent.⁷

¹ United National Inter-agency Group for Child Mortality Estimation (2016) Levels and Trends in Child Mortality. Report 2015: <http://bit.ly/1MawSQU>

² UNICEF. The State of World's Children 2016: <http://uni.cf/2fXHGFO>

³ UNICEF. Rapid Survey on Children(RSOC) 2013-14 National Report.; 2014

⁴ UNICEF. The State of World's Children 2016

⁵ UNICEF. Nepal Multiple Indicator Cluster Survey, 2014

⁶ UNICEF South Asia, Young child survival and development. Published 2016: <http://uni.cf/2fWeYHj>

⁷ Hasman A, J Noble D. Childhood immunisation in South Asia – overcoming the hurdles to progress. *Perspect Public Heal.* 2016;136(5):273-277. doi:10.1177/1757913916658633

II. WHY DO THESE PROBLEMS EXIST?

4. Not enough women and their newborns benefit from high quality care before and around the time of birth. This includes antenatal care, institutional delivery, a skilled attendant at birth, and postnatal care. Further, not enough newborns benefit from positive behaviours such as initiation of breastfeeding within one hour of delivery. If coverage of these critical interventions increase, many newborns in South Asia can be saved.
5. Lack of access to health services, a shortage of accurate information for families about immunization, and insufficient investment in health systems all play a part in low immunization coverage.

III. WHY DO THESE PROBLEMS MATTER?

6. **All children, no matter where they live or what their circumstances are, have the right to survive and thrive.**
7. **Ending preventable newborn and child deaths is achievable within a generation.**
 - More than two million newborn babies died in South Asia in 1990. By 2015, this number had decreased by half. This shows we can change outcomes for newborns.
 - Modelling work commissioned by UNICEF and partners, and corroborated by two other independent groups, confirms that reducing child mortality in every country to levels associated with high-income countries is feasible by 2030.⁸
 - **Child survival** and healthy development remain an urgent concern and we must reach #EVERYChild to accelerate the progress in ending preventable child deaths.
8. **Progress in efforts to end preventable newborn and child deaths not only means tremendous reductions in human suffering but also substantial economic gains.**
 - For every \$1 spent on reducing infectious diseases and maternal and child health, the investment would outweigh the costs by a factor of between 9 and 20 over 20 years from 2015 to 2035.⁹
9. **As long as they aren't reached with immunization, many children will suffer needlessly of preventable illnesses in South Asia.**
 - Vaccines are one of the most cost-effective health initiatives ever and all children should have access - no matter how hard to reach.
 - More than half of the under-five deaths worldwide (6.3 million) in 2013 were from infectious diseases, many that could be prevented through vaccination.¹⁰
10. **Countries in South Asia have made commitments to the Sustainable Development Goals (SDGs) for health. Targets include improving vaccination for all and reducing newborn deaths.**
 - Unless we accelerate progress on newborn deaths, South Asia will not achieve the 2030 SDG target of not more than 12 deaths per 1,000 live births.¹¹

⁸ UNICEF. A post-2015 world fit for children Issue Brief : Child Survival and Healthy Development. Published 2015: <http://uni.cf/2fEewut>

⁹ Beattie A, Yates R, Noble DJ. Accelerating progress towards universal health coverage in Asia and Pacific: improving the future for women and children. *BMJ Global Health*. 2016 Nov 1;(Suppl 2):i12-8

¹⁰ Hasman A, J Noble D. Childhood immunisation in South Asia – overcoming the hurdles to progress. *Perspect Public Heal*. 2016;136(5):273-277. doi:10.1177/1757913916658633.

¹¹ UNICEF analysis based on 2015 data from UN interagency group for mortality estimation

- i. In Pakistan, newborn deaths have been declining by 1.9 percent each year. This needs to increase to 8.9 percent each year to meet the SDG target.
- ii. Similarly, Afghanistan needs to increase its rate of reduction from 1.6 percent to 7.2 percent per year to align with global efforts.
- iii. India also has a steep challenge to reach the SDG target: moving from 3.2 percent to 5.6 percent reductions each year.¹²

IV. HOW CAN WE SOLVE THESE PROBLEMS?

11. We know how to save newborns from preventable causes. We have the knowledge and technology.

- It requires mothers and newborns to receive high quality care around the time of birth – with a particular focus on the most vulnerable and under-served.
- It requires a mix of evidence-based and relatively inexpensive but critical health interventions that need buy-in and action from families, communities, healthcare workers and governments.
- Some of these effective interventions in saving newborns include breastfeeding, newborn resuscitation, ‘kangaroo mother care’ for premature babies i.e. prolonged skin-to-skin contact with the mother, and preventing and treating infections.

12. Today, vaccines are protecting more children than ever before.

- Vaccines are one of the most successful & cost-effective investments we can make for future generations.
- Vaccines not only help protect vaccinated individuals, but also help protect entire communities.
- As long as they aren't reached with immunization, about 5 million children will be under-immunised in South Asia, when vaccination could offer an affordable and simple way to protect them.

13. We must ensure that countries in South Asia commit to saving children and newborns through:

- policies and fiscal plans that promote immunization and newborn health with a focus on the poorest,
- releasing the necessary resources, and
- measuring equity-focused programming to reach those most in need.

14. It's time to translate evidence and commitment into action – And, the time to act is now.

- UNICEF South Asia, in partnership with the Nepal Ministry of Health, is organizing a regional advocacy event to galvanize opinion and continue momentum in efforts to reach under-immunised children and to reduce newborn deaths – the two priority child health issues in South Asia. The event will also mark the launch of the new Nepal Newborn Action Plan in coordination with the Nepal Government.

¹² Guo S, Rafique N, You D, Noble DJ. Progress in south Asia after the launch of the Global Every Newborn Action Plan. The Lancet Global Health. 2016 Oct 31;4(10):e682-3.