

Aaternal and Child Survival Program

CHILD HEALTH

The world has made substantial progress in reducing child mortality in the past few decades. Globally, the under-five mortality rate dropped from 93 deaths per 1,000 live births in 1990 to 41 in 2016. This remarkable progress in improving child survival since 2000 has saved the lives of 50 million children under age five. While tremendous achievements have been made, the degree of these advances varies greatly from region to region. In sub-Saharan Africa, for example, 1 in 9 children dies before their fifth birthday — more than 15 times the average for developed regions. Common causes of death in children, such as pneumonia, diarrhea, malnutrition and malaria, are preventable and treatable with proven child health interventions.

USAID's flagship Maternal and Child Survival Program (MCSP) is a vital contributor to the global movement to prevent child deaths. We strive to protect children from diseases and to improve their access to lifesaving treatments globally and in select USAID priority countries. In those countries and regions with greatest need, we are building capacity to plan, leverage resources, and scale up high-impact, cost-effective child health interventions, and extending them to hard-to-reach populations and those with limited access to child health services.

We are assisting countries in setting achievable child survival targets, while establishing mechanisms for regular review and joint accountability for results. MCSP also encourages partner coordination and supports joint work planning led by host governments and inclusive of civil society organizations and private sector partners. The Program focuses on the continuum of care for children from household to hospital, building on the achievements of USAID's predecessor Maternal and Child Health Integrated Program (MCHIP). In strengthening families' access to child health services, MCSP focuses on the health system, developing strong links between facility- and community-based services.

KEY FACTS

- Between 4.5 and 7.2 million children under the age of five died in 2016. (WHO)
- Half of these deaths occurred during or within one month of birth. (WHO)
- More than half of child deaths could be prevented or treated with simple, affordable interventions. (WHO)
- About 45% of all child deaths are linked to malnutrition. (WHO)
- Children in sub-Saharan Africa are more than 15 times more likely to die before age five than children in developed regions. (WHO)

The Program works at the national and local levels to support countries with:

- Development and updating of or change in policies and guidance, strategic planning, and health systems strengthening (e.g., supply chain or human resources strategies)
- Introduction of Emergency Triage, Assessment and Treatment training, mentoring or supervision, and/or data collection and use at referral health facilities
- Integrated Management of Childhood Illness (or other basic sick child treatment services) pre- or in-service training, supervision and mentoring, and data collection and use at health facilities
- Integrated Community Case Management (iCCM) training, supervision, equipment, supplies, and/or data collection and use by community-based health workers outside of facilities
- Activities that create demand for child health services and activities or approaches that promote appropriate family practices
- Systematic efforts to improve the quality of child health services provided at the facility or community levels and data collection on quality improvement activities (including outcome measurements)
- Technical assistance and support to advocate for and mobilize resources available for child health services

Photo: A child in Nigeria whose mother is a member of the Mada Saving Club for women (Karen Kasmauski/MCSP)

MCSP also serves as the Secretariat of the Child Health Task Force (CHTF) (formerly the iCCM TF, 2009-2017). The mandate of the task force expanded from iCCM to child health after recognizing that increasing access to curative care through iCCM alone was not enough to achieve the health-related Sustainable Development Goals for children.

The Program leads the work of the CHTF, a global and country-level multi-stakeholder group led by a Steering Committee comprising UNICEF, the World Health Organization (WHO), USAID, Global Financing Facility (GFF), the UK Department for International Development (DFID), CORE Group, and ministries of health. The goal of the CHTF is to strengthen equitable and comprehensive child health programs focused on children aged 0 to 18 in line with Global Strategy for Women's, Children's and Adolescents' Health (2016-2030). As Secretariat, MCSP is the convener of the Steering Committee and the nine Subgroups of the Child Health Task Force. The Program also leads knowledge management of the Task Force.

ABOUT MCSP

The Maternal and Child Survival Program (MCSP) is a global, USAID Cooperative Agreement to introduce and support highimpact health interventions with a focus on 25 high-priority countries with the ultimate goal of ending preventable child and maternal deaths within a generation. The Program is focused on ensuring that all women, newborns and children most in need have equitable access to quality health care services to save lives.

MCSP supports programming in maternal, newborn and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, prevention of mother-to-child transmission of HIV, and pediatric HIV care and treatment.

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