

ACTING ON THE CALL

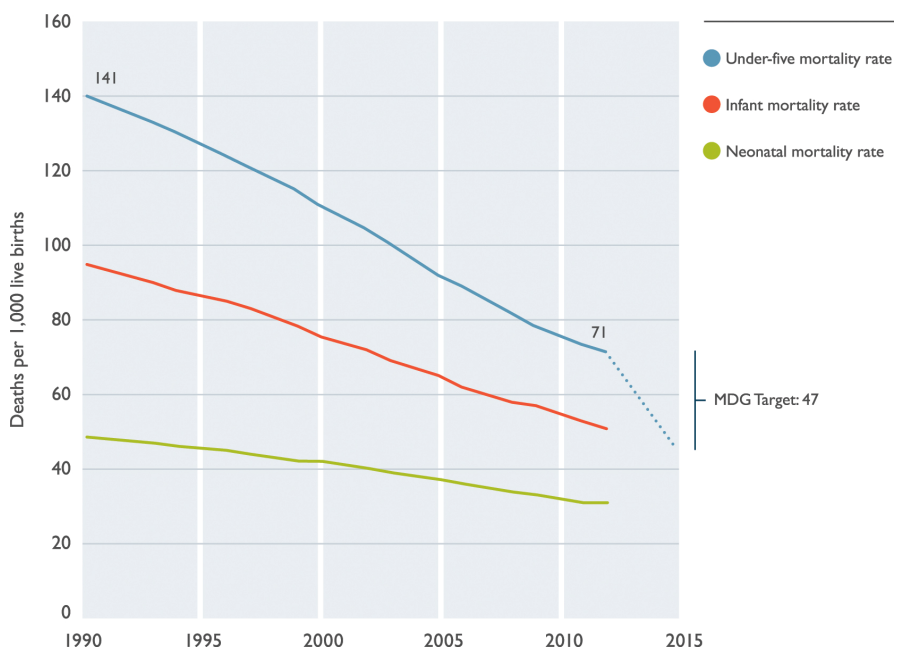
ending preventable child and maternal deaths

Key Facts

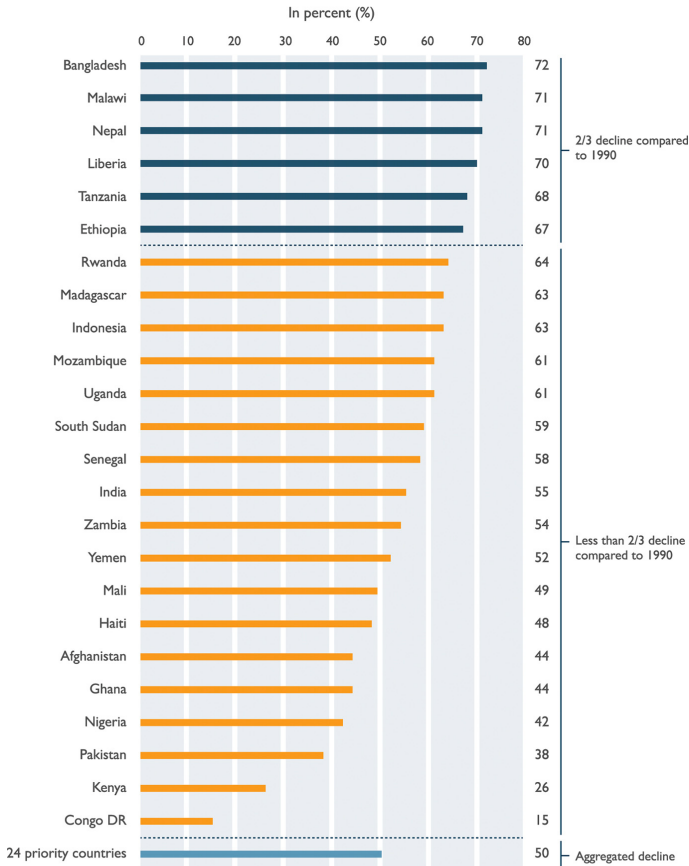
SUCCESSSES

- Working with partners and governments, the United States government has helped save nearly 100 million children's lives in the last 20 years, reducing the annual number of child deaths from 12.6 million in 1990 to 6.6 million in 2012.
- Together with many other partners, USAID has helped drive down newborn deaths in 24 priority countries by more than a third, from 49 per 1,000 in 1990 to 31 per 1,000 in 2012.
- In our 24 priority countries, under-5 mortality has been reduced by more than 50% from 1990-2012, resulting in 3.4 million fewer child deaths in 2012 than in 1990. Every day this year, 18,000 more children will live and 700 more mothers will survive childbirth than each day in 1990.
- In two years alone, USAID has helped achieve an eight percent reduction in under-five mortality in our 24 priority countries, saving 500,000 lives.
- Six of USAID's 24 priority countries have reached Millennium Development Goal (MDG) 4 (Reduce Child Mortality) ahead of schedule.
- In our 24 priority countries, maternal mortality ratio decreased by more than half, from 681 per 100,000 live births in 1990 to 308 per 100,000 live births in 2013.

TARGET: UNDER-FIVE MORTALITY RATE 24 Priority Countries

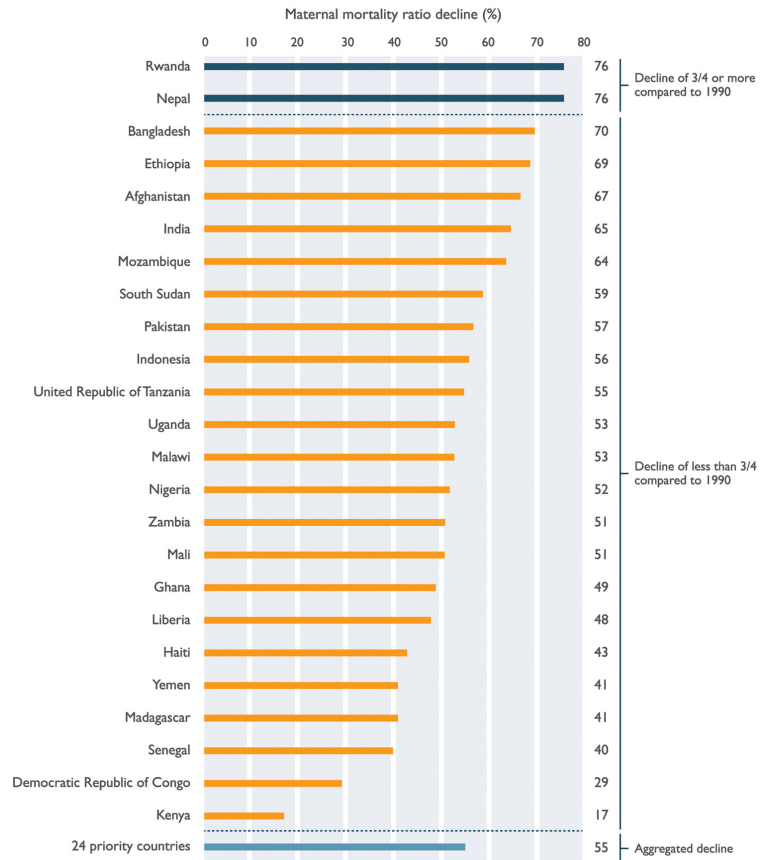


PERCENTAGE DECLINE IN UNDER-FIVE MORTALITY RATE (1990 TO 2012)



Source: UNICEF analysis based on UN IGME 2013

PERCENT DECLINE IN MATERNAL MORTALITY RATIO, 24 PRIORITY COUNTRIES (1990 TO 2013)



Source: UNICEF analysis based on MMEIG 2014

- Rates of modern contraceptive use have increased from approximately 15 percent in 1990 to more than 25 percent in 2013 in USAID's 24 priority countries.
- In FY13, USAID reached more than 84 million women with voluntary family planning information and services. This helped to prevent 15,000 maternal deaths and save the lives of more than 230,000 infants.
- Since 2010, USAID has reached more than 46 million children under-five including 12.5 million in FY 2013 through our nutrition programs, and an additional five million children through leveraging global health resources and partnerships with other donors.
- Global donor funding for child and maternal survival has increased at an annualized rate of 14% over the past decade, while more than two-thirds of the 24 priority countries spent a greater proportion of general government expenditure on health in 2012 than they did 10 years prior.

WHY ACTING ON THE CALL?

- June 2014 marks the second anniversary of the Child Survival Call to Action when the world came together to craft a global goal to end preventable child deaths by 2035. **In the last two years, we came together as a global community and pioneered a new approach** that has empowered partner countries to achieve this aspiration by leading with robust business plans and evidence-based report cards.

- Two years in a row, President Obama has called upon us in his State of the Union address to **join the world in ending extreme poverty** and its most devastating consequences—child hunger and child death—in the next two decades.
- Ending preventable child and maternal death is **an ambitious but achievable vision**. With a clear path for action, we can deliver on this fundamental human aspiration and usher in one of the greatest contributions to progress in history. With a strong foundation in place, now is the time for the global community to mobilize around results-oriented country action plans to realize a world where every child everywhere lives to celebrate his or her fifth birthday and no woman dies as a result of pregnancy or childbirth.

USAID REFORMS

- Since the beginning of the Obama Administration, USAID has refocused the majority of our maternal and child health funding to 24 countries that account for 70% of child and maternal deaths and half of the unmet need for family planning – phasing out funding in 26 countries.
- Over the past 18 months, USAID has undertaken a review of every dollar USAID spends in our 24 priority countries to accelerate reductions in maternal and child death. These reviews were undertaken to ensure that our country programs focus on those interventions that will have the greatest impact on maternal and child death reductions and are consistent with our partner countries own “Promise Renewed” country action plan.
- The review also ensured that our programs are consistent with USAID’s overall reform agenda that embraces a new model of development. Our reforms focus on delivering results on a meaningful scale through a strengthened USAID; promoting sustainable development through high-impact partnerships and local solutions; and identifying and scaling up innovative, breakthrough solutions to intractable development challenges.
- The review effort was led by a Blue Ribbon Panel led by Ray Chambers, the UN Special Envoy for Financing the Health MDGs and Malaria. The panel includes a distinguished group of health and development experts (Paul Farmer and Helene Gayle) as well as business leaders (John Megrue and Jeff Walker) as well as bipartisan former members of Congress (Sen. Bill Frist and Sen. Harris Woford).

MOVING FORWARD

- We are proud of the progress, but more must be done to ensure every child survives and thrives and no mother dies from preventable causes as a consequence of childbirth. At the Acting on the Call Forum, we will review progress over the past two years and will discuss the **steps that the global community must take to ensure that we make progress toward our goals**.
- USAID will release **country action plans for our 24 priority countries**, which delineate how we will be realigning our programs and call on other donors and actors to join us in aligning their investments with country-owned plans that focus on delivering results for the most vulnerable families in the most vulnerable communities.
- Within these countries, USAID has committed to increasing our efforts in newborn health, immunization, and prevention and treatment of childhood illness, as well as expanding access to life-saving commodities for family planning (e.g., long lasting contraceptives), maternal health (e.g., oxytocin, magnesium sulfate), newborn health (e.g. chlorhexidine, antenatal corticosteroid, injectable antibiotics, and resuscitation equipment), and child health (e.g., amoxicillin, ORS/zinc).

- USAID will also launch Ending Preventable Maternal Mortality: USAID’s Maternal Health Vision for Action, which depicts USAID’s goal to reduce the maternal mortality ratio to a global average of less than 70 per 100,000 live births by 2030, and to < 50 per 100,000 live births by 2035. This level is the equivalent of the high end of Organization for Economic Cooperation and Development countries in 2010.

