

Press Release

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Countdown to 2015: Tracking Progress in Child Survival (London, Dec 13-14)

Urgent call to save lives of 30 million under fives over next decade

Unprecedented opportunity to reduce child mortality in poorest countries must not be missed

Child survival experts have challenged the world to wake up to an unprecedented opportunity to save the lives of 30 million under fives over the next decade, at an international conference in London, **Tracking Progress in Child Survival: Countdown to 2015**, 13-14 December 2005. They are calling for donors and governments to equal the major commitments on prevention and simple treatments for children as have already been made to HIV/AIDS, malaria and immunization.

At the conference delegates will hear details of a landmark report - **Tracking Progress: Tracking Intervention Coverage** – which, for the first time, pulls together the latest data on the implementation of 20 simple interventions in 60 countries where 94% child deaths under five occur. The report is the first of a two yearly update on the progress made towards achieving the Millennium Development Goal for Child Survival (MDG4), which aims to reduce the mortality rate for children under five by two thirds between 1990 and 2015.

The key findings of the new report show that seven of these 60 priorities countries are on track to meet the millennium target, including Bangladesh, Brazil, Egypt, Indonesia, Mexico, Nepal and Philippines. However, 17 countries will only meet the millennium target if they attain a massive annual rate reduction of at least 10 per 1000 live births. The conference will hear that achieving this will take a yearly investment of US \$ 7 billion in the coming decade.

“Child mortality is one of the world’s most urgent crises – and one of the most preventable,” says Ann M. Veneman, Executive Director of UNICEF. “By seizing the opportunity to reach the Millennium Development Goal, we could save more than 30 million young lives in the decade ahead, ten million through immunization alone”. The report was produced by a group of Child Survival experts, including the Bellagio Study Group, UNICEF and the World Health Organization.

However, *Tracking Progress* shows progress is by no means universal: only seven of the 60 countries are on target to meet MDG4. Children living in nations where child deaths are highest are still getting less than half the minimum healthcare services they need to survive and thrive and, at current speed, the world will not reach MDG4 until 30 years after the deadline – and some parts of Africa will not get there until 2115, one hundred years off target.

“With 10.5 million children dying every year, most can and should be saved with simple, cheap and available interventions,” said Dr LEE Jong-wook, Director-General of the World Health Organization. “Most effective of all are where several interventions can be put together. These are the high-impact packages: where we can provide vaccines, bednets, vitamin A supplements, and increase breastfeeding. Together these save more lives for less money than one intervention at a time.”

“The bad news is that not one country is reaching children with all the affordable life-saving interventions that are available,” says Jennifer Bryce, a member of the Bellagio Group on Child Survival and one of the report’s authors. “The good news is that most of these 60 countries are reaching many of their children with at least some interventions – so we can see exactly what needs to be done, and where.”

What is vital now, says Bryce, is that these interventions are adopted universally, across other countries. These interventions include exclusive breastfeeding, vaccination, access to safe drinking water and sanitation services, the use of insecticide-treated nets for preventing malaria, delivery attendants when babies are born (to ensure newborn health), prevention of mother-to-child transmission of HIV, oral rehydration therapy (ORT), and treatments for malaria and pneumonia.

Some successes have been seen already: malaria currently causes almost one in five child deaths in Africa. But with a rising global supply of insecticide-treated bednets and improved distribution in a growing number of countries, illness rates look set to drop. Pneumonia is the world’s biggest killer of children. But countries such as Nepal, Senegal and Pakistan are showing great success in using well-trained community workers to identify and treat pneumonia.

Promising trends are also emerging where home-based healthcare is supported by local health systems and national policies. Exclusive breastfeeding, for example, can increase a child’s chance of survival six fold – and in Ghana, rates have increased by 77% since 1998 thanks to baby-friendly hospitals, community outreach and legislative backing for breastfeeding.

Maternal health is seen as key to saving children’s lives, in particular the four million newborns who die in the first month of life, and three million stillborn babies. As a result, the next *Tracking Progress* report will expand to include critical numbers on maternal mortality and health interventions. “The Countdown 2015 is not a one-off event--it will not go away,” says Dr. Francisco Songane, former Minister of Health in Mozambique and new director of new global Partnership for Maternal, Newborn & Child Health. “This tracking mechanism is important to monitor progress in improving maternal, newborn and child health and keeping us all accountable for our commitments and contributions.”

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For further information about the report or conference, or to arrange to interview any of the report’s authors, please contact Lindsay Wright at the London School of Hygiene & Tropical Medicine on 020 7927 2073 and lindsay.wright@lshtm.ac.uk, Jacqueline Toupin at the World Health Organisation on + 41 22 791 4738 toupinj@who.int or Udani Samarasekera at the Lancet on 0207 424 4949 and u.samarasekera@lancet.com

Notes to Editors:

Tracking Progress in Child Survival: Countdown to 2015 (London, December 13-14 2005) is being hosted at the London School of Hygiene & Tropical Medicine, and takes place at Senate House, Malet Street, London on 13 and 14 December. It has been organised by: The Partnership for Maternal, Newborn & Child Health; the Bellagio Child Survival Study Group; World Health Organization; UNICEF; The London School of Hygiene & Tropical Medicine; The Lancet; Save the Children (UK and US); US Agency for International Development (USAID); Basic Support for Institutionalizing Child Survival (BASICS); Department for International Development UK (DFID UK); The World Bank, and International Paediatric Association (IPA) and other organizations. For more information please visit:

www.childsurvivalcountdown.com

Statements from partners:**Dr Diana Silimperi, Technical Director, BASICS**

"An estimated six million children die each year from preventable causes. Scientific and medical advances already exist to improve their chances of survival from childhood diseases, but we still are not delivering effective services at the scale that is needed. To reach our target goals we must develop strong leadership and effective program management, which are critically important to expanding access to interventions that can save children's lives."

**Gareth Thomas, Parliamentary Under Secretary of State for the UK government
Department for International Development (DFID)**

"2005 has been an extraordinary year for development. The challenge now will be to turn G8 and other commitments into action that keep the health of women, mothers and their children at the centre. We must be more effective, ensure commitments are transparent, and that long term aid is predictable. We must all work in the spirit of global partnership, and this will be the surest way to improve child health."

Dr Richard Horton, Editor, The Lancet

"Countdown to 2015, will provide politicians, financiers, and health-care workers with clear opportunities to save one newborn life for every \$2100 invested. Perhaps the only thing more devastating than the loss of a newborn child is the fact that that two-thirds of such deaths could have been avoided in a world that had the resources, but lacked the will to use them."

Professor Sir Andy Haines, Director, London School of Hygiene & Tropical Medicine

"There is much that can be done to reduce the unacceptably high toll of child deaths. In many countries weak and fragmented health systems are a barrier to progress. This conference will demonstrate that rapid advances are possible when countries put in place effective policies to recruit and retain health personnel, promote the uptake of effective interventions and improve financial flows into child health. It is a clarion call for action on the part of policymakers, practitioners and researchers."

Fiona Weir, Save the Children Director of Policy and Communications, Save the Children

"Every day across the world millions of children who get ill cannot afford the most basic healthcare, and die unnecessarily of diseases that can easily be prevented or treated – like diarrhoea, measles or malaria. Poor people should not have to pay to visit a clinic or hospital. Millions of lives could be saved if governments in poor countries were supported to invest adequately in their health systems."

Flavia Bustreo, Senior Public Health Specialist, World Bank

"Investing in children's health is a sound economic decision for governments to take. Poor health early in life contributes to intergenerational transmission of poverty. Children born into poor families have poorer health, receive lower investments in human capital, and have poorer health as adults. As a result, they will earn lower wages as adults, affecting the next generation of children who will be born in poorer families."

Dr. Francisco Songane, New Director, Partnership for Newborn, Child, and Maternal Health

"Saving 11.0 million children and mothers yearly requires a quantum leap forward in global focus and commitment. Partnership is key to this effort--liberating funds and coordinating-- so that countries can get available interventions immediately to those who need them most."