SURVIVE and THRIVE

Transforming care for every small and sick newborn





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CONTENTS

FOREWORD	v
ACKNOWLEDGEMENTS	vii
KEY ABBREVIATIONS	x
KEY MESSAGES	1
EXECUTIVE SUMMARY	2
CHAPTER 1: NOW IS THE TIME TO TRANSFORM CARE FOR NEWBORNS	11
Who are the most vulnerable newborns?	
Visionary strategies and frameworks	14
Lessons from the past	23
CHAPTER 2. WHAT THE NUMBERS SAY	31
Survive: end preventable deaths	
Thrive: ensure their health and well-being	
Transform: human capital, societal response and health systems	
CHAPTER 3: DELIVER THE CARE THEY ARE ENTITLED TO	
Coverage with quality, dignified care	
Organizing services by level of care	
Who provides care?	
Ensuring access to quality care for all without discrimination Newborn health in humanitarian crises	
CHAPTER 4: ENSURE THEY THRIVE	81
What does it mean to thrive?	
Effective interventions to promote development	
Screening and monitoring	
CHAPTER 5. USE DATA FOR ACTION	
Which data are needed by health system level?	
Opportunities to improve and use data now	
Data for action: priorities	
CHAPTER 6. IMMEDIATE ACTION IS NEEDED	
Lives-saved analysis	
Reaching the SDG target Closing the "quality of care gap" with special	
and intensive newborn care	113
Impact on major causes of neonatal mortality	
Cost of inpatient care for small and sick newborns	116
The path to 2030	116
GLOSSARY	128
ANNEX 1: LIVES SAVEDTOOL (LIST) ANALYSIS METHODS AND RESULTS	131
ANNEX 2: SCREENING AND MONITORING	
ANNEX 3: LIST OF INTERVENTIONS	
ANNEX 4: LIST OF COUNTDOWN TO 2030 COUNTRIES	
INCLUDED IN THIS ANALYSIS	148



FOREWORD

Just about everyone has experienced the joy that a healthy newborn child brings to parents, families and communities. But the arrival of a newborn who is small or sick often results in immediate worry and sadness. When the infant is at high risk of death or disability, these concerns can be a tremendous additional burden.

We remain firm in our vision of a world freed of that burden, a world in which every mother and newborn will survive and thrive. However, we cannot meet the health-related Sustainable Development Goals – and we cannot achieve universal health coverage or people-centred primary health care – without a strong and growing investment in mothers and newborns. This report focuses on inpatient care for the most vulnerable newborns: the small and sick.

The launch of the Every Newborn Action Plan at the Sixty-seventh World Health Assembly in 2014 coincided with a period of great progress. The global neonatal mortality rate declined from 31 deaths per 1000 live births in 2000 to 18 deaths per 1000 live births in 2017. But three years into the era of the SDGs, we are still far from our goal of reducing newborn deaths to 12 per 1000, or less, by 2030. Bending the curve further will require a laser-sharp focus on reorganizing health systems to provide quality care, and continuity of care, for newborns – especially those who are critically ill.

To that end, every pregnant woman and every newborn, without exception, must have access to high-quality, affordable services before, during and after the time of birth. Accessible services are especially important for populations that are underserved and marginalized, including those living in humanitarian settings or in conflict. We also need more comprehensive "specialized and intensive" newborn care services – because services that are good enough for healthy newborns might not suffice for those who come into the world unwell.

While investments in all of these areas are critical, so is the level of investment. We can avert 747 400 neonatal deaths by 2030 in low- and middle-income countries by investing an additional US\$ 0.20 per capita in small and sick newborn care. By providing quality intrapartum care to

95% of all mothers delivering in health facilities, we would, in addition, save many mothers' lives and prevent stillbirths each year.

With such results in mind, *Survive and thrive: transforming care for every small and sick newborn* highlights the need for accurate and reliable data to facilitate planning, to help measure quality, outcomes and impact, and to promote accountability.

This report is a much-needed wake-up call for investing in quality inpatient neonatal care and designating facilities for specialized and intensive newborn care. Simultaneous investments are required to ensure adequate and appropriate human resources, supplies, laboratories and data systems for well-functioning, family-centred, inpatient neonatal care. The care provided during hospitalization and follow-up in the community also needs to be developmentally supportive and nurturing. Supporting healthy brain development during early childhood is the best investment a country and society can make in the future generation – and in continued economic growth.

We are proud that our respective organizations, along with numerous contributors and partners, are part of the joint effort that has reached these conclusions. Our collaboration has already yielded important results. With this report, we call upon governments, health professionals, parents and other partners to join us in supporting continued investment in health systems that respond to the needs of the most vulnerable. In this way, we can – and we will – achieve the vision of a better world for every mother and newborn.

After all, newborns are not just bundles of joy for their families. They are a promise to the future.

Cech fall

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