



EVERY WOMAN
EVERY CHILD

EVERY NEWBORN

An Action Plan To End Preventable Deaths



World Health
Organization

unicef



COMMITTING TO CHILD SURVIVAL
A PROMISE RENEWED

About *Every Newborn*

The *Every Newborn* action plan is based on the latest epidemiology, evidence and global and country learning, and supports the United Nations Secretary-General's *Every Woman Every Child* movement. The preparation was guided by the advice of experts and partners, led by WHO and UNICEF, and by the outcome of several multi-stakeholder consultations and a web-based consultation with more than 300 comments. Discussed at the 67th World Health Assembly, Member States endorsed the document and made firm commitments to put in practice recommended actions. The Director General has been requested to monitor progress towards the achievement of the global goal and targets and report periodically to the Health Assembly until 2030.

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Foreword

by the United Nations Secretary-General Ban Ki-moon

The world can be proud of progress achieved since the launch of the Global Strategy for Women's and Children's Health in 2010. The *Every Woman Every Child* initiative has generated new attention and investment to address some of the most neglected causes of women's and children's mortality.

At the same time, we must confront the tragic fact that each year, 289 000 women still die while giving life and an estimated 18 000 children die every day from preventable diseases and circumstances. This is an appalling tragedy that demands an accelerated response.

It is time to give newborns a more prominent place on the global health agenda. We must do much more to save the 2.9 million newborns dying during their first 28 days of life each year. The day of birth is the most dangerous day, when nearly half of maternal and newborn deaths and stillbirths occur. It is also the day babies face the greatest risk of disability.

Protecting newborns means ensuring proper care for their mothers before, during and after pregnancy. The majority of these deaths are preventable, caused by complications related to prematurity, birth and severe infections. Preterm and small babies are in much greater peril, including the long-term risk of stunting and developing non-communicable diseases like diabetes and hypertension as adults.

The *Every Newborn* action plan takes forward the Global Strategy for Women's and Children's Health. By focusing on the quality of care at birth, we can save millions of lives and accelerate progress towards the Millennium Development Goals.

I ask governments, civil society, donors, the private sector and other partners to take action to address preventable newborn deaths and ensure that the rights of women and children are fully recognized. The strong accountability mechanism under the *Every Woman Every Child* umbrella will ensure that resources and results are tracked when it comes to commitments to newborns.

Let us do all we can to ensure a healthy start for all mothers and newborns. This will open the way for progress across the development agenda and around the world.

Acronyms

MDG	Millennium Development Goal
NMR	Neonatal mortality rate
RMNCAH	Reproductive, maternal, newborn, child and adolescent health
SBR	Stillbirth rate
WHO	World Health Organization

Key definitions

Low birth weight	Weight of less than 2 500 g, irrespective of gestational age
Newborn death	The death within 28 days of birth of any live-born baby regardless of weight or gestational age
Preterm birth	A baby born < 37 completed weeks gestation
Small for gestational age	Infant below the 10th percentile of birth weight for gestational age. An SGA baby may be preterm or full-term.
Stillbirth	A baby born with no signs of life, weighing more than 1 000 g or with more than 28 completed weeks of gestation (for international comparison purposes)





Executive summary

The promise and potential of *Every Newborn: an action plan to end preventable deaths*

Although remarkable progress has been made in recent decades to reduce the number of child deaths worldwide, too many newborns continue to die each year despite the availability of feasible, evidence-based solutions.

Newborn survival and health and prevention of stillbirths were not specifically addressed in the Millennium Development Goal (MDG) framework and consequently received less attention and investment. Newborn deaths and stillbirths are reducing at a slower rate than under-5 deaths and maternal deaths (1). Now is the time for the global health community to prioritize this unfinished agenda.

Today, we have unprecedented opportunities to turn the tide and address newborn health, as far more is known about effective interventions, service delivery channels and approaches to accelerate coverage and quality of care. Recently, renewed commitments to saving newborn lives and preventing stillbirths have

been made by many governments and partners in response to the United Nations Secretary-General's *Global Strategy for Women's and Children's Health* (2) and its accompanying *Every Woman Every Child* initiative, *Committing to Child Survival: A Promise Renewed* (3), and to recommendations made by the Commission on Information and Accountability for Women's and Children's Health (4) and the United Nations Commission on Life-Saving Commodities for Women and Children (5). The much-needed attention specifically for newborn health has triggered multiple stakeholders to propose this *Every Newborn: an action plan to end preventable deaths*.

The *Every Newborn* action plan is based on epidemiology, evidence, and global and country learning, setting a framework to end preventable newborn deaths and stillbirths by 2035.

The final plan was endorsed at the 67th World Health Assembly in May 2014 (Annex 1).

The action plan sets out a vision of a world in which there are no preventable deaths of newborns or stillbirths, where every pregnancy is wanted, every birth celebrated and women, babies and children survive, thrive and reach their full potential. Nearly 3 million lives could be saved each year if the actions in the plan are implemented and its goals and targets achieved. Based on evidence of what works, and developed within the framework for *Every Woman Every Child*, the plan enhances and supports coordinated, comprehensive

planning and implementation of newborn-specific actions within the context of national reproductive, maternal, newborn, child and adolescent health (RMNCAH) strategies and action plans, and in collaboration with stakeholders from the private sector, civil society, professional associations and others. The goal is to achieve equitable and high-quality coverage of care for all women and newborns through links with other global and national plans, measurement and accountability.

Key messages

3 million babies and women could be saved each year through investing in quality care around the time of birth and special care for sick and small newborns. Cost-effective solutions are now available to protect women and children from the most dangerous day of their lives – the day of birth.

Unfinished agenda: Newborn health and stillbirths are part of the “unfinished agenda” of the Millennium Development Goals for women’s and children’s health. With newborn deaths still accounting for 44% of under-5 deaths globally, newborn mortality and stillbirths require greater visibility in the emerging post-2015 sustainable development agenda if the overall under-5 mortality is to be reduced.

We have solutions to address the main causes of newborn death: More than 80% of all newborn deaths result from three preventable and treatable conditions – complications due to prematurity, intrapartum-related deaths (including birth asphyxia) and neonatal infections. Cost-effective, proven interventions exist to prevent and treat each main cause. Improving quality of care around the time of birth will save the most lives, but this requires educated and equipped health workers, including those with midwifery skills, and availability of essential commodities.

Women’s and children’s health is a smart investment, particularly with specific attention

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