

HEALTH RESULTS 2020

CHILD HEALTH

unicef 
for every child



In Doem Chan village, Phnom Penh, Cambodia, a girl skips rope. In the future she wants to help sick people get better.

CONTEXT

As the ongoing COVID-19 pandemic continues to disrupt essential health services, years of progress in preventing child deaths is under threat. By the end of October 2020, UNICEF analysis from 141 countries reporting on the socioeconomic impact of the pandemic, showed that, in around one third of the countries, the coverage of health services had reduced by at least 10 per cent compared to 2019.

Pneumonia, diarrhoea and malaria remain the three major infectious causes of illness and death among children under-five years of age. If the ambitious Sustainable Development Goals (SDGs) for child survival are to be met, progress must be accelerated: Access to and utilization of high-impact, quality preventive and curative interventions to

reduce under-five deaths must be prioritized. At the same time, the early years of life are key to ensuring development, and for the early identification of children with delays, disabilities and chronic conditions, ensuring they have adequate access to the services that they need.

Every year, about 1.2 million children and adolescents under 20 years of age die from treatable non-communicable diseases (NCDs), such as chronic respiratory diseases and cancers, that predominantly impact poor countries, poor communities and the poorest individuals within all nations, perpetuating inequities within and across countries. Unintentional injury, including from road traffic accidents, drownings, burns,

poisonings and falls, is the third leading cause of death among children aged 1–4 years, and the number one cause for those aged 5–19 years. Investments in child survival are important as they contribute towards reductions in other health conditions later in life.

Climate change and environmental degradation undermine the rights of all children. Increasing evidence shows a direct correlation between environmental pollution and ill health as well as death among children. The Toxic Truth, a joint UNICEF and Pure Earth report released in 2020, notes that around one in three children – 800 million globally – has dangerously high blood lead levels that puts their health and development at-risk.

UNICEF WORK AND RESULTS IN 2020



Delivered 16,795 oxygen concentrators to 94 countries, as part of UNICEF's COVID-19 response.



8.6 million children with suspected pneumonia received appropriate antibiotics through UNICEF-supported programmes.



UNICEF supplied 404.1 million 250mg amoxicillin dispersible tablets, equivalent to 40.4 million pneumonia treatments for children under 1 year of age, reaching 47 countries.



UNICEF supplied 50.8 million oral rehydration sachets (ORS) sachets, of which 8.7 million were ORS and zinc co-packs; also 111.9 million zinc tablets, of which 40.9 million were ORS and zinc co-packs.



UNICEF distributed 17.8 million insecticide-treated nets in 28 countries, with almost 15 million of the nets distributed to Chad, Cote d'Ivoire and the Sudan. Some 2.5 million people in humanitarian situations received nets.



23.3 million artemisinin-based combination therapy malaria treatments and 11.5 million malaria rapid diagnostic tests for 20 countries.



36,816 community health workers (CHWs) gained skills in applying the integrated community case management system.



Invested US\$161.9 million in child-health-related expenses out of US\$1.4 billion health-related expenses.

PREVENTING AND TREATING PNEUMONIA, DIARRHOEA AND MALARIA



How beads and a timer are helping health workers in South Sudan detect serious respiratory issues in children.

In the 25 high-burden child mortality countries, the percentage of children with symptoms of pneumonia who were taken to an appropriate health-care provider during 2020 was 61 per cent. Access to antibiotics and oxygen is critical for treating pneumonia. In 2020, UNICEF-supported programmes ensured that 8.6 million children with suspected pneumonia received appropriate antibiotics across these 25 countries.

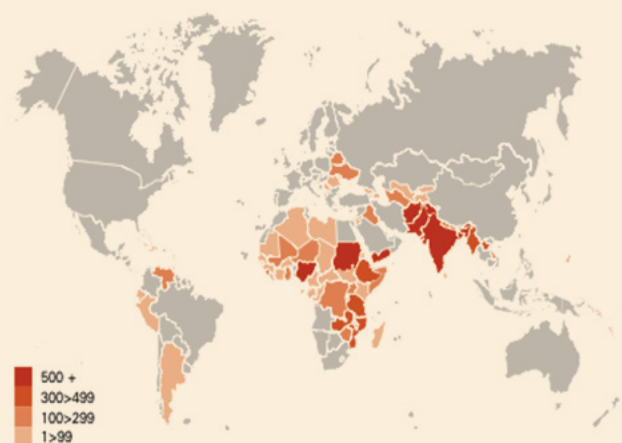
A key part of UNICEF's COVID-19 response was the delivery of 16,795 oxygen concentrators to 94 countries. This investment, together with on-the-ground support for oxygen systems by UNICEF country offices, contributes to health systems strengthening. This will have a long lasting impact as a life-saving essential medicine required every year by an estimated 4.2 million children with severe pneumonia in low-and middle-income countries, as well as for mothers and many of the 30 million small and sick newborns in need each year.



UNICEF scales up efforts to supply oxygen to remote areas during the COVID-19 pandemic.

UNICEF also secured approximately 3 million treatment courses of dexamethasone tablets and injections to treat patients with severe or critical symptoms of COVID-19.

UNICEF distribution of oxygen concentrators to 94 countries



Oral rehydration salts and zinc are simple and effective treatments for diarrhoea. In the 25 focus countries, the percentage of children with diarrhoea who benefited from ORS and zinc remained at 16 per cent with the scale up of zinc, specifically, lagging behind. Three focus countries reported national level stockouts of ORS for more than a month in 2020. This was due to a combination of factors including COVID-19 pandemic-related supply disruptions and insufficient close monitoring of stock at the national level.



Community health workers bring essential treatments to children with diarrhoea in remote rural Afghan villages.

UNICEF works closely with partners to attain the goal of a malaria-free world, as set out in the 'Global Technical Strategy for Malaria 2016–2030'. In 21 malaria-endemic countries supported by UNICEF and partners, 55 per cent of children slept under an insecticide-treated net in 2020. UNICEF procured and distributed 17.8 million insecticide-treated nets in 28 countries, with almost 15 million of the nets distributed to Chad, Côte d'Ivoire and the Sudan. During the pandemic, UNICEF increased messaging and support. This included empowering community health care workers with guidelines for the safe provision of care, while also increasing demand for care in febrile children in malaria-endemic areas.

REACHING CHILDREN IN HUMANITARIAN SETTINGS

Access to, and use of, long-lasting insecticidal nets (LLINs) remains among the first lines of defence against malaria. The distribution of LLINs is part of UNICEF's core commitments to children in humanitarian action: the core commitments to ensure that all children and adolescents can safely and equitably access quality life-saving and high-impact child health services.

During 2020, 2.5 million people in humanitarian situations received LLINs. In Sudan, in response to the unprecedented flooding throughout most of the country in September 2020, UNICEF delivered 439,910 insecticide-treated nets for malaria control as part of comprehensive packages of care for all the major infectious causes of disease in children under-five.



How outreach activities are reaching the most vulnerable children and mothers with essential medical assistance in rural areas of Yemen.

STRENGTHENING COMMUNITY-BASED PRIMARY HEALTH CARE

In communities with no essential health facilities, community health workers are critical providers of primary health care and services, including in emergency response situations. Integrating community health workers into the formal health system is a key component for bringing primary health care to all. By the end of 2020, all 25 focus countries had policies in place that met current criteria for the formal integration of community health workers.

In addition to the 25 priority countries for child health, a further 71 nations moved forward with integrating community health workers into the operation of their institutions. UNICEF continued to provide sustained advocacy, policy and technical

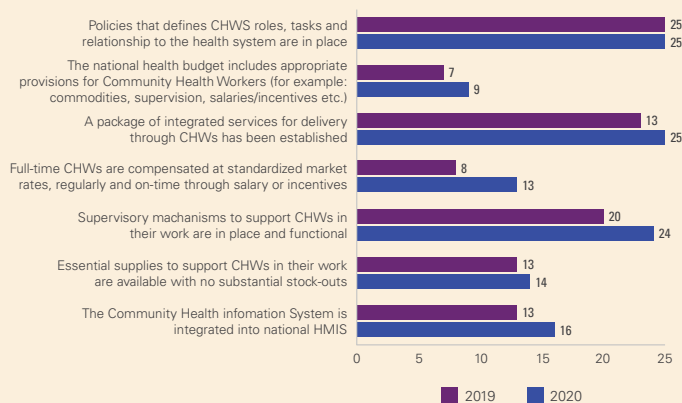
support to achieve the full integration of community health workforces, including within primary healthcare facilities for universal access.

To strengthen the quality of this process, UNICEF tracks seven components. By the end of 2020, 25 countries had established packages of integrated services that can be delivered through community health workers (an increase of two countries from 2019); and 24 countries have supervisory mechanisms in place (an increase of four nations from 2019). In collaboration with partners and stakeholders, UNICEF supported countries to identify community health priorities and cost these as part of national health budgets.



Marie, a two-year-old girl, is happy to receive a mosquito net, in Grand-Bassam, in the South of Côte d'Ivoire.

Strengthening community based primary health care



To ensure the continuity of essential services, as part of the COVID-19 response, UNICEF provided personal protective equipment to nearly 2.6 million health workers within healthcare facilities and communities in 103 countries. Around 4 million healthcare facility staff and community health workers in 75 countries were trained in infection prevention and control.

UNICEF, in collaboration with partners, developed guidance for decision-makers and managers at the country level. The guidance addresses the specific role of community-based health care in the pandemic context and how it needs to be adapted to keep people safe, maintain continuity of essential services and ensure an effective response to COVID-19.



How UNICEF helps to keep health workers safe in Uganda during the COVID-19 pandemic.

INSTITUTIONALIZATION OF COMMUNITY HEALTH WORKERS, 2020

UNICEF continues to upskill workers at the primary health care level, with the aim of improving the coverage and quality of care. This includes training, mentoring and supervision of community health workers. This also includes expanding their skills and capacities beyond 'survive', to also address the 'thrive' agenda.

Integrated community case management (iCCM) is a community-based approach to identify and treat leading causes of child deaths, especially pneumonia, diarrhoea and malaria. In 2020, 36,816 community health workers were trained in 18 countries: over 70 per cent of the workers trained were in Africa. UNICEF also continues to support governments in exploring alternative skills enhancement solutions.



Frontline village health workers in Chipinge, Zimbabwe provide the critical link to community health.

HELPING CHILDREN THRIVE

Every child has the right to the best start in life, which paves the way for healthy development and learning. Acknowledging the importance of the early years, UNICEF and partners support countries to apply the 'Nurturing Care Framework' (NCF). Using a multisectoral approach to health, well-being and development, UNICEF and NCF partners focus programming on integrating and strengthening key components of nurturing care in routine health interactions between families and caregivers.

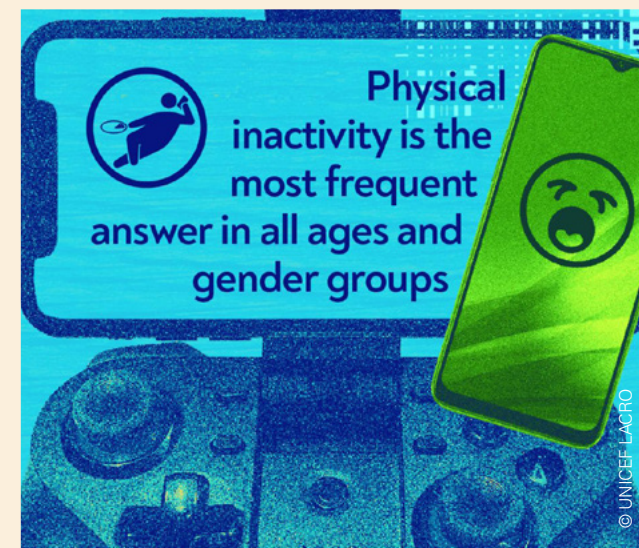
Children with disabilities are one of the most marginalized and excluded groups in society. Using a twin-track approach, UNICEF has provided support for children with disabilities by ensuring that they are included and covered within existing health and other early childhood development services. At the same time, UNICEF is developing a programme to address the disability-specific needs of children. UNICEF has developed a model on early identification and interventions for children with developmental delays and disabilities. The model includes tools and recommendations for early identification and interventions, and is currently being adapted and piloted in Bulgaria, Peru and Uganda.

To support the reopening of schools, in 2020 UNICEF developed and disseminated the technical [guidance](#) on Safe and Healthy Journeys to School during the COVID-19 Pandemic and Beyond. Additionally, 15 countries are addressing child and adolescent injuries by initiating and/or implementing prevention activities through UNICEF health programmes.



How do online early intervention services in North Macedonia help children with disabilities and developmental delays?

Non-communicable diseases (NCDs), such as chronic respiratory diseases, cancers and diabetes, are increasing among children. Preventive and promotive interventions remain the cornerstone of UNICEF's response to NCDs. UNICEF works across different sectors, especially through schools, to provide a unique platform to address the NCD risk factors. Integrative school programmes that address NCDs, injuries, mental health, life skills, prevention of HIV and other sexually transmitted infections, and



The effects of the COVID-19 pandemic on adolescent and youth nutrition as well as physical activity in Latin American and the Caribbean.

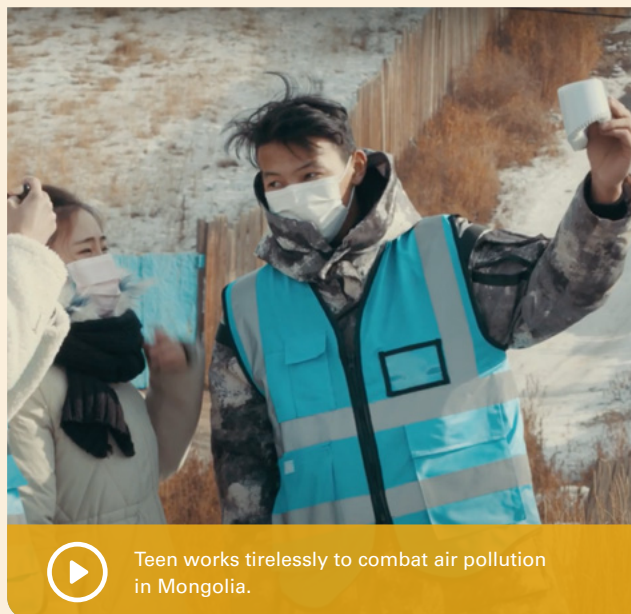
environmental health, can protect children's health and well-being. UNICEF also works across sectors to prevent and reduce road traffic fatalities and drownings.

UNICEF is working to reduce risk factors for NCDs in South Africa, where the Good Nutrition for Good Immunity Campaign promoted healthy eating and physical activity in 20,000 schools across nine provinces of South Africa, reaching 10 million students.

ADDRESSING ENVIRONMENTAL POLLUTION AND CLIMATE CHANGE

UNICEF is elevating action on environmental pollution and climate change for, and with, young people as an organizational priority. To support integration into the UNICEF health programme, a global programme framework was developed, 'Healthy Environments for Healthy Children'. UNICEF also co-founded a global partnership – [Protecting Every Child's Potential](#) – in support of a future free from childhood lead exposure.

The increased momentum on these issues has led to significant progress: 57 countries reported implementing at least one intervention to address environmental pollution and climate change through UNICEF health programmes in 2020. Interventions included policy-related work, renewable energy and waste management in healthcare facilities, promoting adolescent and youth engagement as well as interventions to address air pollution and childhood lead exposure.



Teen works tirelessly to combat air pollution in Mongolia.



In Ghana, UNICEF works with partners to protect children from lead exposure.

LOOKING AHEAD

The COVID-19 pandemic is threatening to erode years of progress in child health. During 2020, essential health services were adapted to address this challenging new context and significant achievements were made. However, if the ambitious SDGs for child health are to be met, progress must be accelerated: Access to, and utilization of, high-impact interventions to reduce under-five deaths must be prioritized – especially for pneumonia and diarrhoea, which comprise the largest proportion of child deaths globally. Health systems need to be strengthened to address the underlying constraints to further progress, especially in low- and middle-income countries and to ensure equitable access to quality primary health care for all children. This is especially important in humanitarian situations where children are more at-risk of death and poor health outcomes.

UNICEF is expanding support to countries for integrated child development and disability, and programmes to address NCDs, childhood injuries, mental health, environmental pollution and climate change. Strong and resilient primary healthcare centres provide the foundation to address these newer threats to child health and well-being.

Thematic funds enable UNICEF to integrate interventions, address critical gaps, leverage resources and strengthen primary healthcare centres, including at the community level. Children's rights are at stake as the disruptions stemming from the COVID-19 pandemic compound the obstacles to high-quality attainable and equitable health care for children around the world.



A group of children playing outside in Fada, in the east of Burkina Faso.

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[Link to the full report](#)