

### CONTEXT

In childhood, the risk of mortality is highest during the first 28 days of life. In 2019, around 6,700 babies under 1 month of age died every day. Every year, another 2 million babies are stillborn. Despite the decline of maternal mortality by 38 per cent between 2000 and 2017, every day around 800 women die from preventable causes related to pregnancy and childbirth.

During 2020, the COVID-19 pandemic disrupted the delivery and utilization of essential maternal and newborn health services, including antenatal care and skilled care at birth. In 48 countries where UNICEF conducted cross-regional analysis of the socioeconomic impacts of the pandemic, access to these services was found to have been impacted negatively.

Globally, the COVID-19 pandemic has also affected adolescents, profoundly impacting their health and well-being. Prolonged school closures and social distancing requirements affected the mental health of adolescents, and for many young people it has also meant poorer access to good nutrition, less opportunity for physical activity, and increased vulnerability to substance use, as well as other risky behaviours.

For adolescent girls, the onset of puberty brings additional threats. Poverty and discriminatory social and gender norms can restrict girls' life choices and exclude them from educational, social and economic opportunities. Globally, 15 per cent of adolescent girls give birth before the age of 18. Maternal conditions are the second leading cause of death for girls aged 15–19, after tuberculosis. Further, adolescent girls are at high risk of developing cervical cancer in adulthood caused by human papilloma virus (HPV).

To address these risks, UNICEF joins adolescents to improve the policies, programmes and services that affect their health and well-being.

### **UNICEF WORK AND RESULTS IN 2020**

Through its Strategic Plan 2018–2021, UNICEF is committed to helping countries:

- 1. Accelerate the scale up of essential packages of maternal and newborn care services, including antenatal, postnatal and home-visit support.
- 2. Eliminate maternal and neonatal tetanus, which strikes the underserved and most vulnerable women and newborns.
- 3. Promote and support adolescent health and well-being by developing and implementing country plans introducing HPV vaccine, and supporting school-based, integrated health programmes.



30.5 million live births were delivered in healthcare facilities through UNICEF-supported programmes.



More than
8 million
women of
reproductive
age received
tetanus toxoidcontaining
vaccine.



2.9 million girls in target countries received their final dose of HPV vaccine; an additional eight countries introduced the HPV vaccination to make a total of 16.



36 countries were supported to develop an inclusive, multisectoral, gender-responsive national plan for adolescent health and well-being. UNICEF actively supported school health programmes in 42 countries.



UNICEF spent US\$299 million related to maternal, newborn and adolescent health out of US\$1.4 billion health-related expenses.



#### MATERNAL AND NEWBORN HEALTH

# SCALING UP QUALITY MATERNAL AND NEWBORN HEALTH CARE

UNICEF continued to focus on high-impact survival programmes. This includes special emphasis on improving the quality of care at the time of birth; the acceleration of global efforts to transform care for small and sick newborns; and linking facility-based care with follow-up care in the community as the next step for newborn survival.



A new initiative in Pakistan is helping to save infants from possible serious bacterial infections.

The Every Newborn Action Plan (ENAP) focuses on high-impact interventions around the time of birth. Key global efforts during 2020 included the development and launch of the 2020–2025 coverage targets for ENAP to expedite progress towards ending preventable stillbirths and newborn deaths by 2030. By July 2020, 93 countries reported that ENAP had been implemented in national plans, an increase from 67 in 2019, using the Every Newborn tracking tool to



monitor progress. By the end of 2020, 45 countries had a national plan to implement the World Health Organization's (WHO) quality of care guidelines.

UNICEF continues to focus on reducing maternal and neonatal mortality in 52 high-burden ENAP countries. A special focus was placed on improving the quality of care at the time of birth; accelerating global efforts to transform care for small and sick newborns; moving from survival, growth and development; and linking facility-based care with follow-up community care.

The following results were achieved in 2020:

 78 per cent of live births were attended by skilled health personnel, and 60 per cent of pregnant women in 52 focus countries received at least four antennal visits. The proportion of mothers receiving postnatal care increased to 61 per cent.



- UNICEF supported an additional seven countries to reach 38 in total in implementing plans to strengthen the quality of maternal and newborn primary health care.
- The number of district hospitals with sick newborn care units increased to 5,639 from a baseline of 3,709 in 2019.
- UNICEF played an integral part in the release of the first-ever joint stillbirth estimates by the United Nations Inter-Agency Group for Child Mortality Estimation, 'A Neglected Tragedy: The global burden of stillbirths 2020'. Accurate, high-quality and complete data on stillbirths are needed to develop and evaluate targetted national strategies.

The development of subnational capacity is especially important to operationalize the 'leave no one behind' principle. During 2020, UNICEF supported infrastructure development and the establishment of kangaroo mother care (KMC) and special newborn care units. Kangaroo mother care is a proven, low-cost tool to ensure low-birthweight neonates survive by mothers practicing skin-to-skin contact with their newborns. Evidence shows that there is a 40 per cent reduction in mortality in low birthweight infants who receive KMC compared with conventional neonatal care.

Sick newborn care units are special facilities in large hospitals, generally at district level. These units aim to reduce the case fatality among sick newborns, either born within hospitals or outside including home delivery. They also act as teaching and training hubs for imparting the skills of newborn care.





How special newborn care units save lives and give hope to many in India.







# TOWARDS THE ELIMINATION OF MATERNAL AND NEONATAL TETANUS

Maternal and neonatal tetanus occurs in unsanitary conditions and where unhygienic umbilical cord practices occur. Maternal and neonatal tetanus elimination remains both an important marker of inequity for maternal and newborn health, and a major public health problem with an 80–100 per cent case-fatality rate among neonates, especially in areas with poor immunization coverage and limited access to clean deliveries and umbilical cord care. Neonatal tetanus contributes to 1.2 per cent of neonatal deaths.

UNICEF and partners remain committed to eliminating maternal and neonatal tetanus (MNT). By the end of 2020:

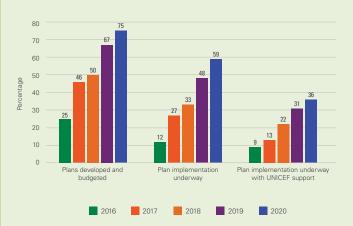
- More than 8 million women of reproductive age received tetanus toxoid-containing vaccines through UNICEF-supported supplementary immunization activities with over 80 per cent coverage in six countries.
- 47 of the 59 countries identified as high-risk in 1999 had eliminated MNT.
- Indonesia was re-validated for maternal and neonatal tetanus elimination and Mali, Nigeria and Pakistan were partially validated.

### ADOLESCENT HEALTH

# SUPPORTING GLOBAL ACCELERATED ACTION FOR THE HEALTH OF ADOLESCENTS

UNICEF and partners work to support the development and implementation of national plans for adolescent health, improving maternal and newborn care for adolescent mothers, supporting school health programmes, and scaling up access to HPV vaccine to eliminate cervical cancer.

Total number of countries with inclusive, multisectoral and gender-responsive national plans to achieve targets for adolescent health and well-being, 2016–2020



## PROMOTING ADOLESCENT HEALTH AND WELL-BEING

- By the end of 2020, 75 UNICEF programme counties had inclusive, multisectoral and genderresponsive national plans for adolescent health: UNICEF supported their implementation in 36 countries.
- In 42 countries, UNICEF actively supported school health programmes for adolescents in at least two intervention areas.
- 18 country offices supported sexual and reproductive rights through in-school programmes, reported as one or more of the following: Life skills, comprehensive sexuality education, sexually transmitted infections and HIV, as well as reproductive health.



### ADDRESSING ADOLESCENT MENTAL HEALTH ISSUES

Given the adolescent burden of disease and disability caused by poor mental health and its impact on the survival, growth and development of young people, this is a priority area for UNICEF.

Primary health care is the foundation for quality mental health care. When mental health is integrated into facility- and community-based primary health and nutrition services, access to care and treatment is improved and physical and mental health problems can be more effectively managed. This approach involves the strengthening of schoolbased mental health and psychosocial promotion

and services and awareness-raising through community-based engagement, mass media and social media.

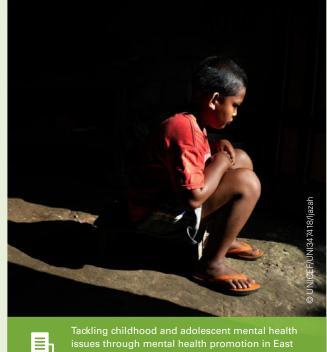
The profile of UNICEF in adolescent mental health and psychosocial support has also been significantly raised during 2020, through enhanced engagements at global, regional and country level. A landscape analysis of this adolescent mental health and psychosocial support work, 'Adolescent Mental Health Matters', was conducted. This led to the initiation and support of mental health programming in Belize, Brazil, Jamaica, Nepal and South Africa, as

well as financial and technical support across the East Asia and Pacific. Eastern and Southern Africa, Latin America and Caribbean and South Asia regions.

With support from AstraZeneca, a project was initiated in 2020 to increase the number of health systems that respond to adolescent needs in six pilot countries - Angola, Belize, Brazil, Indonesia, Jamaica and South Africa. The goal is to accelerate youth-led policy action on preventing non-communicable diseases (NCD) among adolescents.



UNICEF is supporting a programme called Life skills, targeting youth and adolescents with the aim of empowering them in critical thinking, negotiation and decision making to boost their self-esteem and increase their ability to take responsibility for making healthier choices and resisting negative pressures. They organize focus group discussion, sensitization sessions and a formal course on HIV, female genital mutilation, unwanted pregnancy, khat consumption and several themes related to youth and adolescents. Empowered by the training, these youths organize several awareness-raising sessions to spread the messages among their peers.



Asia and the Pacific.

## ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

- Among adolescent mothers aged 15–19 in highburden countries, only 52 per cent received at least four antenatal visits. The COVID-19 pandemic impacted access to and the provision of quality antenatal care.
- UNICEF supported 52 high-burden countries
  with the provision of quality maternal care
  for adolescent mothers. Working to ensure
  that adolescents receive friendly health
  services, UNICEF supports the development of
  interpersonal skills among health workers; the
  introduction of new tools; and the development
  of cross-sectoral linkages. UNICEF facilitates
  this expansion by supporting primary healthcare
  facilities and ensuring services are delivered
  according to quality-of-care standards.



How UNICEF in Ethiopia helps meet the unique health needs of adolescent mothers.

# SCALING UP ACCESS TO THE HPV VACCINE TO ELIMINATE CERVICAL CANCER

- Working towards the global goal of cervical cancer elimination, UNICEF supported HPV vaccine introduction in eight additional countries.
- The number of girls in target countries that received the full schedule of HPV vaccination increased to 2.9 million.
- UNICEF procured a total of 14.2 million doses of the HPV vaccine for 34 countries.
- UNICEF continued to provide technical assistance and build capacity among healthcare workers in numerous countries by improving awareness in communities and creating demand among adolescent girls and their caregivers.



Arramata Madou, a 19 year-old woman with her 2 month-old daughter, Hassatou, at the Adolescent and Youth School Health Service Centre in Odienné, in the Northwest of Côte d'Ivoire. Arramata noticed that her baby was in pain and took her to the Centre. The baby was diagnosed with a hernia and was referred to a paediatrician. The UNICEF-supported health centre meets the needs of students and young people.



### LOOKING AHEAD

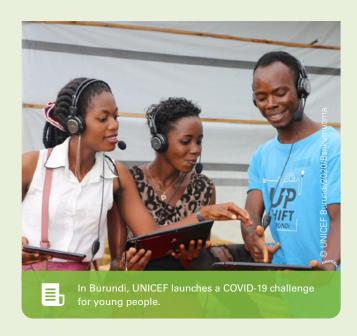
Significant progress has been achieved in maternal and newborn health over the last decade, but progress must be accelerated if the world is to have a chance of reaching the related Sustainable Development Goals targets. UNICEF's continued focus on high-impact survival programmes, with special emphasis on improving the quality of care at the time of birth, acceleration of global efforts to transform care for small and sick newborns. and linking facility-based care with follow-up care in the community as the next step for newborns, contributed to progress in 2020. However, the delivery and utilization of essential MNH services were severely disrupted by the socioeconomic impacts of COVID-19. Inequalities that existed before the pandemic have been exacerbated and the recovery for maternal and newborn health

services have been slower to recuperate than some other health services. Considerable work is still needed to prevent the erosion of progress.

The critical role of primary health care in achieving universal health coverage was highlighted during the COVID-19 pandemic. The scaling up of MNH must be prioritized within countries' plans for COVID-19 recovery to ensure that these services are 'built back better'. The strengthening of health systems remains the cornerstone to a reduction of maternal and neonatal mortality by the 2030 SDG deadline.

Despite the disruptions resulting from the pandemic, UNICEF saw significant achievements around adolescent health, including mental

health and adolescent sexual and reproductive health. UNICEF remains fully committed to working with partners to protect the rights of adolescents to health and well-being and working towards the SDGs. To accelerate progress to reach these goals, the needs of adolescents must be prioritized through primary health care. UNICEF will continue to work towards integrated health services through school programmes, social welfare and community engagement. The COVID-19 response must strengthen health systems and ensure universally accessible and quality care for adolescents now and in the future. Critical to the success of these approaches is the involvement of adolescents themselves in the programmes, high-quality health data and the availability of flexible funding.









Sharif Khan, 16, and Ruhul Amin Jibon, 15, two friends are talking to each other in a place near their home during the COVID-19 pandemic. 8 November 2020 at Korail Slum, Dhaka, Bangladesh.



Published by UNICEF 3 United Nations Plaza New York, NY 10017, USA www.unicef.org/health © 2021 UNICEF expresses its deep appreciation to its resource partners for their support to health results in 2020, particularly to those that were able to provide thematic funding. Thematic funds are critical to ensuring holistic health programmes that deliver sustainable results. UNICEF wishes to thank its many partners at global, regional and country levels – including national and local governments, Gavi, other United Nations agencies, the private sector, civil society organizations and academia – that have made these results possible.

Link to the full report