

CONTEXT

The first month of life is the riskiest time for a child. In 2020, a neonatal death occurred every 13 seconds, cumulating in 2.4 million deaths in that year alone. Stillbirths remain an urgent issue, with almost 2 million babies stillborn each year. Although maternal mortality declined significantly between 2000 and 2017, around 800 women die every day from preventable causes related to pregnancy and childbirth, according to the latest data.

As the COVID-19 pandemic continued to impact all areas of maternal, newborn, and adolescent health, UNICEF supported countries with their public health response, helping provide access to essential supplies and ensure the continuity of essential health services.

Around 1 million adolescents died in 2020. Many do not have access to the information, services and protective environments they need to stay healthy and develop healthy lifestyles into adulthood. Mental health conditions are a major burden for adolescents globally, a factor exacerbated by the COVID-19 pandemic.

Adolescent girls face increased risks with the onset of puberty: every year, an estimated 23 million girls become pregnant. Overall, compared to older women, fewer adolescent girls receive antenatal care, skilled delivery attendance or postnatal care for themselves or their newborns. Cervical cancer due to the Human Papilloma Virus (HPV) infection acquired in adolescence is the fourth most common cancer among women, with 90 per cent of new cases and deaths in 2020 occurring in low- and middle-income countries.

UNICEF works with adolescents to address these risks by improving the policies, programmes and services that affect their health and well-being.

UNICEF WORK AND RESULTS IN 2021

Through its Strategic Plan 2018–2021, UNICEF committed to working with countries to:

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



38.9 million live births

were delivered in healthcare facilities through UNICEFsupported programmes.



8 million women of

reproductive age in four countries

– Central African
Republic, Nigeria,
Pakistan, and
South Sudan –
received tetanus
toxoid-containing
vaccine.



6,263 sick newborn

care units
were made
available to
provide care
for small
and sick
newborns.



2.8 million girls in target countries received their final dose of HPV vaccine; an additional two countries introduced the

HPV vaccination.

taking the total

healthcare facilities in UNICEFsupported programmes were supported by WASH facilities.

3.618



39 countries were

supported in developing an inclusive, multisectoral, genderresponsive national plan for adolescent health and well-being. UNICEF actively supported school health programmes in 37 countries.



to 18.

Baby Elvis Mungotimu weighed in at 3kg at birth. Born to 18-year-old Kwiocwiny Sylvia on 31/10/2021, the mother describes him as a gift from God. UNICEF and partners are supporting newborn care initiatives including provision of equipment to keep small babies warm at the hospital where baby Elvis was born.

MATERNAL AND NEWBORN HEALTH

SCALING UP QUALITY MATERNAL AND NEWBORN HEALTH CARE

To end preventable maternal and newborn deaths, UNICEF continued to focus on high-impact survival programmes with a particular focus on improving the quality of care at birth. As part of its holistic approach to ensuring that children thrive through growth and development, links between facility-based care with follow-up care in the community were also prioritised.



The Every Newborn Action Plan (ENAP) remains the roadmap for ending preventable newborn deaths and stillbirths. UNICEF works with ENAP partners to reduce mortality and morbidity and to close the equity gaps across the 93 ENAP countries.

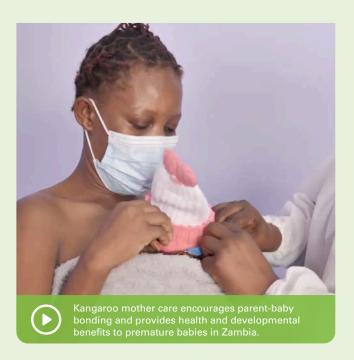
With UNICEF's support, of the 93 countries that reported on the ENAP Tracking Tool, the number of countries with national quality improvement guidelines for maternal and newborn health increased to 47 in 2021. The guidance documents support improvements in maternal, newborn and child care. In approximately 85 per cent of the 93 ENAP countries, maternal and perinatal death surveillance and review processes are ongoing. In a 2020 survey, 67 out of 93 ENAP countries confirmed they had a National Newborn Action Plan in place, and 50 countries had established budgets.

In 52 high-burden ENAP countries, UNICEF continued to focus on reducing maternal and neonatal mortality. Results for the final year of the 2018–2021 Strategic Plan are encouraging: overall, in the 52 countries, good progress was achieved as planned.

- 80 per cent of live births were attended by skilled health personnel in the 52 high-burden countries; the percentage of women receiving at least four antenatal visits increased to 64 per cent, and the percentage of mothers receiving postnatal care increased to 65 per cent.
- The number of countries implementing plans to strengthen the quality of newborn and maternal primary health care rose to 39.
- The WHO protocol on management of children with Possible Serious Bacterial Infection (PSBI) was introduced in four countries: Pakistan, Indonesia, Niger, and Tanzania. Over the last four years, 39,216 children with PSBI were managed from 1,213 health facilities.
- The number of district hospitals with care units critical to ensuring the survival, health, growth and development of sick newborns increased to 6,263.

 To improve health care quality, UNICEF supported water, sanitation, and hygiene interventions in 3,618 facilities.

The vision of leaving no child behind is integral to UNICEF's mandate, and the development of local capacity is central to operationalizing this principle. During 2021, UNICEF continued its work with WHO and ENAP partners to intensify efforts to improve care for the most vulnerable newborns. Babies that are born too early or become sick are at the greatest risk of death and disability. These babies need comprehensive special and intensive inpatient care and treatment for conditions such as infections and deformities at birth. Evidence shows that kangaroo mother care – which involves skin-to-skin contact and exclusive breastfeeding – can substantially increase a preterm or low-birthweight baby's chances of survival.



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As part of improving the quality of care at the time of birth, UNICEF supports the training of attendants and other health workers to provide emergency obstetric and newborn care.



The quality of lifesaving commodities and their accessibility are essential for newborn survival, especially during the pandemic.



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...With the first skin-to-skin contact - she was calmer. While she was on my chest, the frequency of her heartbeat reduced. And her progress in terms of weight is visible. After our first skin-to-skin contact, her weight increased rapidly.

Mirjana Stojic, Serbia, talking about the benefits of kangaroo mother care for her baby Elena, who was born two months early.



TOWARDS THE ELIMINATION OF MATERNAL AND NEONATAL TETANUS

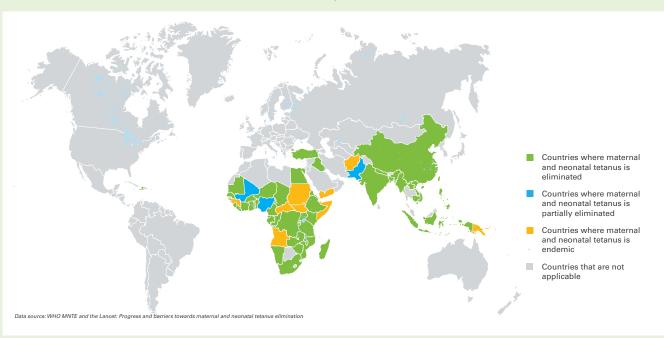
Maternal and neonatal tetanus affects underserved communities, including the most vulnerable women and newborns. It remains a major public health problem, with 80–100 per cent case fatality among newborns. UNICEF and partners remain committed to the elimination of the infection and are working to reduce the incidence of maternal and neonatal tetanus to 1 in every 1,000 births. UNICEF remains the flagbearer of the Maternal and Neonatal Tetanus Elimination (MNTE) Initiative and, together with WHO, augments technical assistance to countries for steering planning, implementation, and monitoring processes.

By the end of 2021:

- 8 million women of reproductive age in four countries – Central African Republic, Nigeria, Pakistan, and South Sudan – received tetanus-toxoid containing vaccines through UNICEF-supported supplementary immunization activities, with over 80 per cent coverage.
- 47 of the 59 countries identified as high risk in 1999 had eliminated MNT.
- Mali, Nigeria, and Pakistan were partially validated for maternal and neonatal tetanus elimination.

UNICEF and Pampers work towards maternal and neonatal tetanus elimination.

Status of maternal and neonatal tetanus elimination, 2021





ADOLESCENT HEALTH

SUPPORTING GLOBAL ACCELERATED ACTION FOR THE HEALTH OF ADOLESCENTS

While unintentional injuries, violence and suicide are among the leading causes of adolescent death, trends including increased alcohol and tobacco use, unhealthy eating, inactivity, and mental health issues also threaten their health and well-being. In response to the evolving burden of disease, UNICEF has elevated its health portfolio and increased country support to address the distinct needs of adolescents globally. 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 the HPV vaccine to eliminate cervical cancer.

PROMOTING ADOLESCENT HEALTH AND WELL-BEING

- By the end of 2021, 81 countries had inclusive, multisectoral and gender-responsive national plans in place for adolescent health. UNICEF supported their implementation in 39 countries.
- In 37 countries, UNICEF actively supported school health programmes for adolescents in at least two intervention areas.
- Through global UNICEF platforms, 11.7 million young people accessed learning modules promoting healthier lifestyles and addressing non-communicable disease (NCD) risk factors.



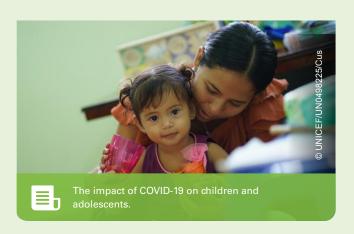


ADDRESSING ADOLESCENT MENTAL HEALTH ISSUES

UNICEF has elevated poor adolescent mental health to a priority because of its impact on young people's survival, growth, and development. COVID-19 has been a major factor, forcing school closures and isolation from peers and support networks and sparking anxiety around the virus.

UNICEF's approach involves strengthening school-based mental health and psychosocial services and raising awareness through community-based engagement, mass media and social media.

Former UNICEF Executive Director Henrietta Fore talks about the COVID-19 pandemic and mental health.



The answer to quality mental health care remains primary health care.

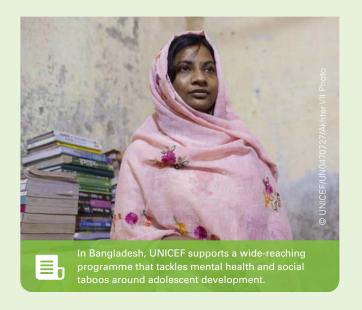
In 2021, UNICEF and WHO published the Helping Adolescents Thrive Toolkit to improve programming for adolescent mental health promotion and prevention. It provides evidence-informed approaches to promoting positive health, preventing mental health conditions, and reducing self-harm and other risk behaviours. The toolkit aims to ensure that programmes are delivered in a gender-responsive and gender-transformative way to promote and protect adolescent mental health.











The UNICEF AstraZeneca Young Health Programme promotes healthy lifestyles by supporting a global advocacy movement led by young people which aims to reduce the risk of NCDs and mental health conditions. The six pilot countries – Angola, Belize, Brazil, Indonesia, Jamaica, and South Africa – continue to work towards increasing the number of health systems that respond to the specific needs of adolescents.



ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

- 73 per cent of live births to adolescent mothers aged 15-19 had skilled birth attendance in the high-burden countries.
- UNICEF continued to support the 52 highburden countries by providing quality maternal care for adolescent mothers. 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 that services are delivered according to quality-of-care standards.

Sarah, a teenage mother carrying her baby at her aunty's home in the evening. Sarah is one among the many adolescent teens in Arua district who experienced early pregnancy. She has since remained resilient and focused on completing her studies. Alezuyo Anicy, who is a peer educator from the Straight Talk Foundation has greatly impacted Sarah's life with her baby through peer support and encouragement. The interventions are delivered with UNICEF support.

SCALING UP ACCESS TO THE HPV VACCINE TO ELIMINATE CERVICAL CANCER

- UNICEF supported the introduction of the HPV vaccine in Cameroon and the Lao People's Democratic Republic, taking the total to 18.
- 2.8 million girls in target countries received the full schedule of HPV vaccination.
- UNICEF procured a total of 17 million doses of HPV vaccine for 40 countries.
- UNICEF continued to provide technical assistance to build capacity among healthcare workers worldwide by improving awareness in communities and creating demand among adolescent girls and their caregivers.





LOOKING AHEAD

As the pandemic continues into the third year, the central role of primary healthcare to achieve universal health coverage is crucial. The strengthening and scaling up of maternal, newborn, and adolescent health programmes are essential to protect progress to date.

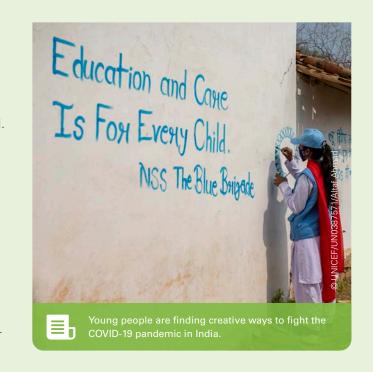
The equity gap between and within countries needs to be closed, and sub-Saharan Africa and southern Asia require support to double their rate of progress if they are to have a chance of achieving the 2030 Sustainable Development Goal targets. Countries affected by humanitarian crises, conflicts, and public health emergencies are least likely to meet their targets and urgently require investments to save maternal and newborn lives.

The care of small and sick babies requires a renewed focus to advance progress in maternal and newborn health, and gaps in the implementation of programmes and delivery services for adolescent maternal health must be reduced through increased investment.

The Every Newborn Action Plan and Ending Preventable Maternal Mortality strategies will be aligned to optimize synergies between maternal and newborn health communities and strengthen adolescent health services in primary health care. UNICEF will continue to advocate for increased resources to mitigate the impact of COVID-19 disruptions to services.

UNICEF will work to increase its reach to young people outside the healthcare system through school, community, and digital platforms. The capacity of the education system as a platform for health must be improved to achieve this, and programmes to engage young people through community and digital networks must be prioritized.

As UNICEF moves into the new Strategic Plan 2022–2025, a stronger emphasis will be placed on the centrality of primary health care to accelerate results by expanding the quality of maternal and newborn care. To ensure that no child is left behind, UNICEF prioritizes 'zero-dose children' living in the most vulnerable and disadvantaged communities who do not have access to quality health services, including maternal and newborn health. To respond to the evolving burden of disease, UNICEF will continue to expand programmes to ensure that primary health care also addresses key priorities for adolescents and children.





¹ United Nations Inter-Agency Group for Child Mortality Estimation, 'Levels and Trends in Child Mortality, United Nations Inter-Agency Group for Child Mortality Estimation (UN IGME), Report 2021', UNICEF, New York, 2021, https://data.unicef.org/resources/levels-and-trends-in-child-mortality/, accessed 16 May 2022.

ii United Nations Children's Fund, 'Adolescent Health and Wellbeing', UNICEF, <www.unicef.org/health/adolescent-health-and-well-being>, accessed 15 March 2022.

ⁱⁱⁱ United Nations Children's Fund and World Health Organization, 'Helping Adolescents Thrive Toolkit', WHO, Geneva, 2021, https://www.who.int/publications/i/item/9789240025554, accessed 29 April 2022.

iv United Nations Children's Fund and World Health Organization, Survive and thrive: Transforming care for every small and sick newborn, WHO, Geneva, 2019, https://www.who.int/publications/i/item/9789241515887, accessed 16 May 2022.



On 30 September 2021, five young girls, members of U-report Guatemala prepare an activation about social and environmental justice on the main square of Guatemala city: la plaza de la Constitución.



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Link to the full repor