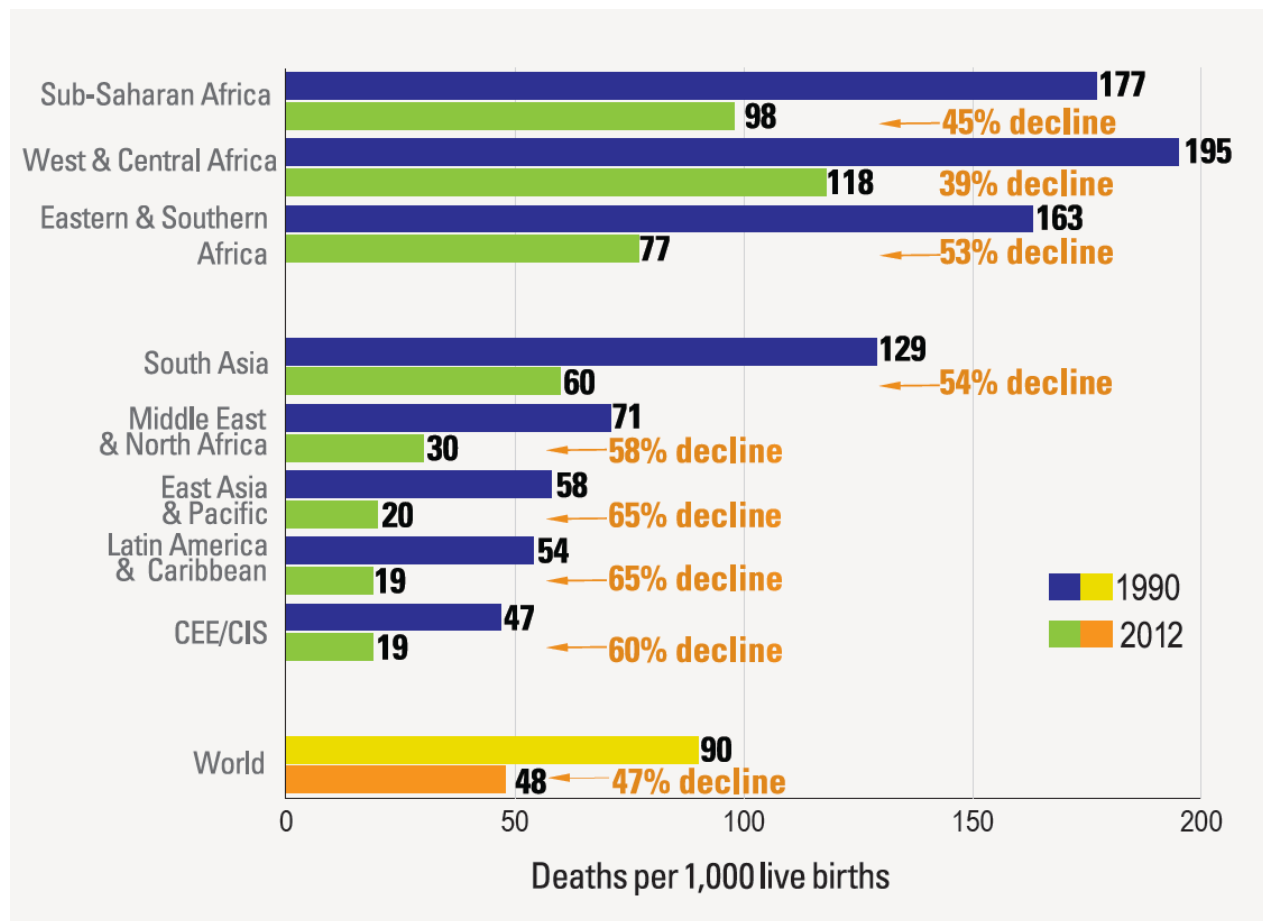# Child Health and the UNICEF Advocacy Experience

Dr. Mickey Chopra
Chief of Health, UNICEF

21 October 2013

Under-five mortality rate has declined in all regions since 1990
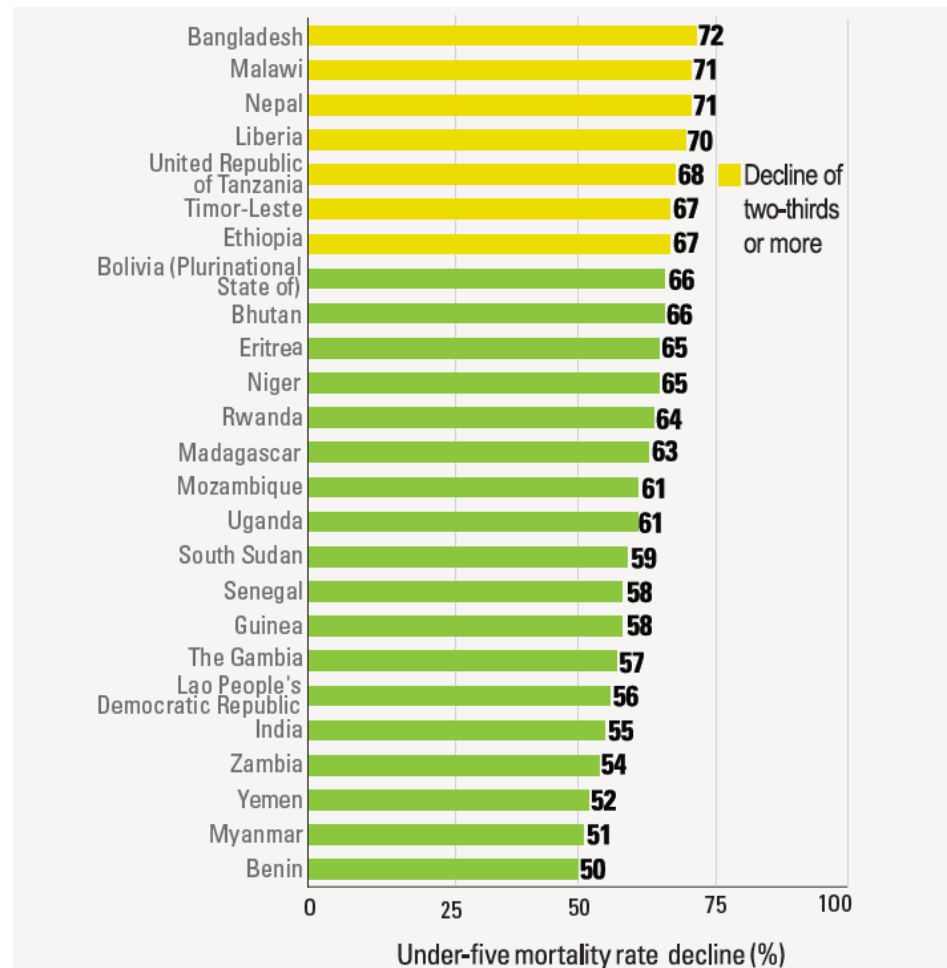
Under-five mortality rate by region, 1990 and 2012, and % declines

Source: UNICEF Data & Analytics Section, as presented in APR Progress Report 2013.

26 high mortality countries have reduced under-five mortality rate by at least 50%

High-mortality countries with greatest percentage declines in under-five mortality rate from 1990–2012

Country	Under-five mortality rate decline (%)
Bangladesh	72
Malawi	71
Nepal	71
Liberia	70
United Republic of Tanzania	68
Timor-Leste	67
Ethiopia	67
Bolivia (Plurinational State of)	66
Bhutan	66
Eritrea	65
Niger	65
Rwanda	64
Madagascar	63
Mozambique	61
Uganda	61
South Sudan	59
Senegal	58
Guinea	58
The Gambia	57
Lao People's Democratic Republic	56
India	55
Zambia	54
Yemen	52
Myanmar	51
Benin	50

Decline of two-thirds or more

*Countries with an under-five mortality rate of 40 or more deaths per 1,000 live births in 2012.

Source: UNICEF Data & Analytics Section, as presented in APR Progress Report 2013.

Fast progress in reducing the number of under-five deaths in sub-Saharan Africa is imperative as its child population soars
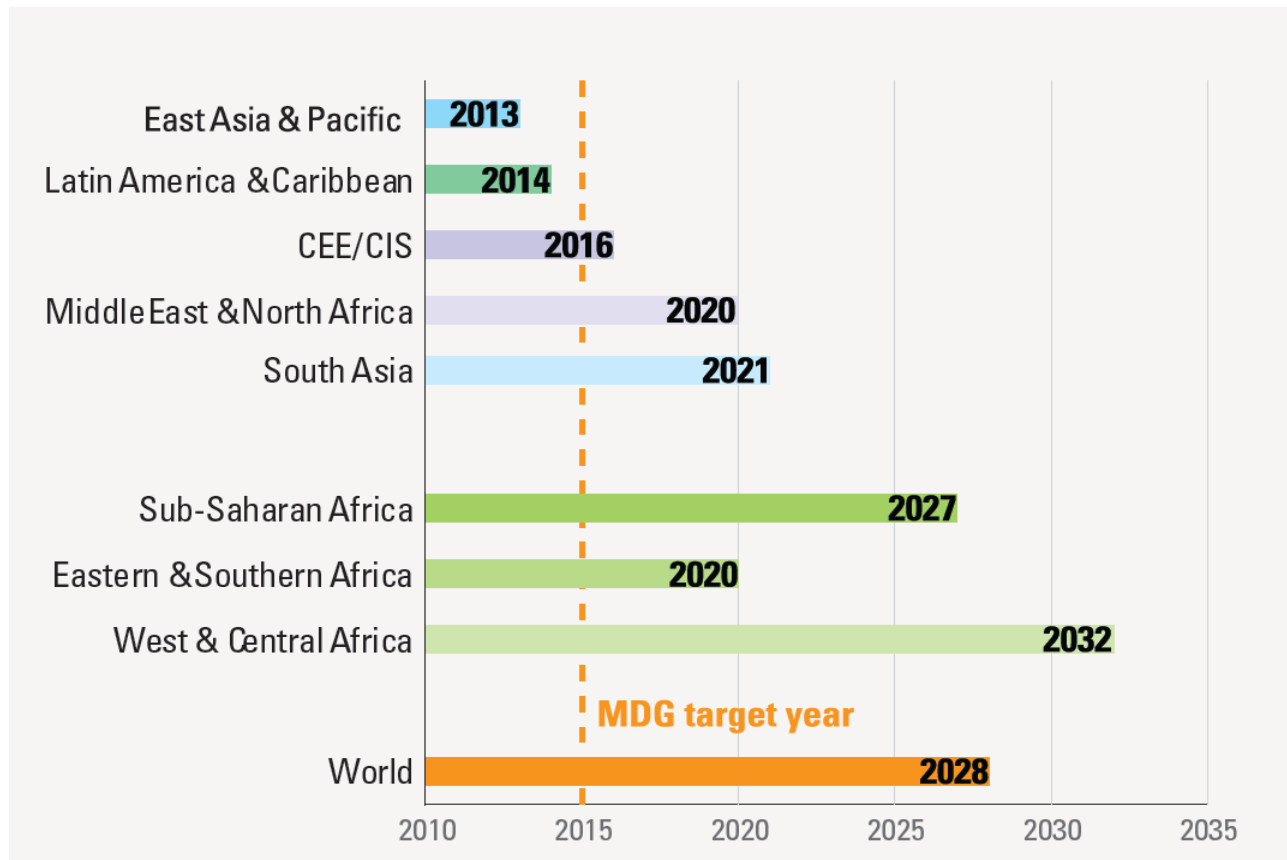
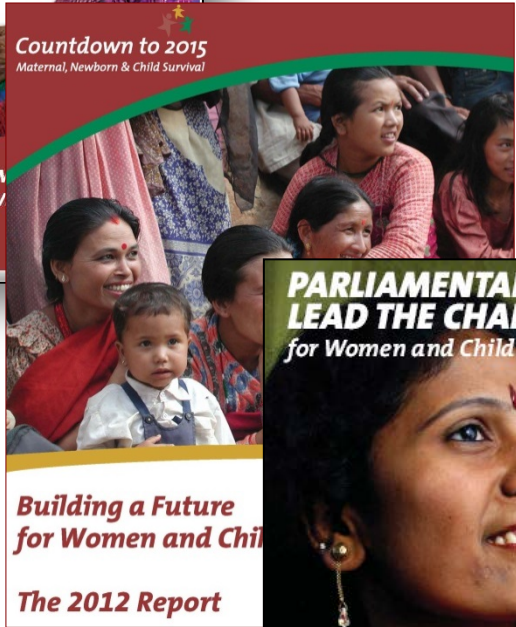Number of children under age 5, by region, 1950-2050
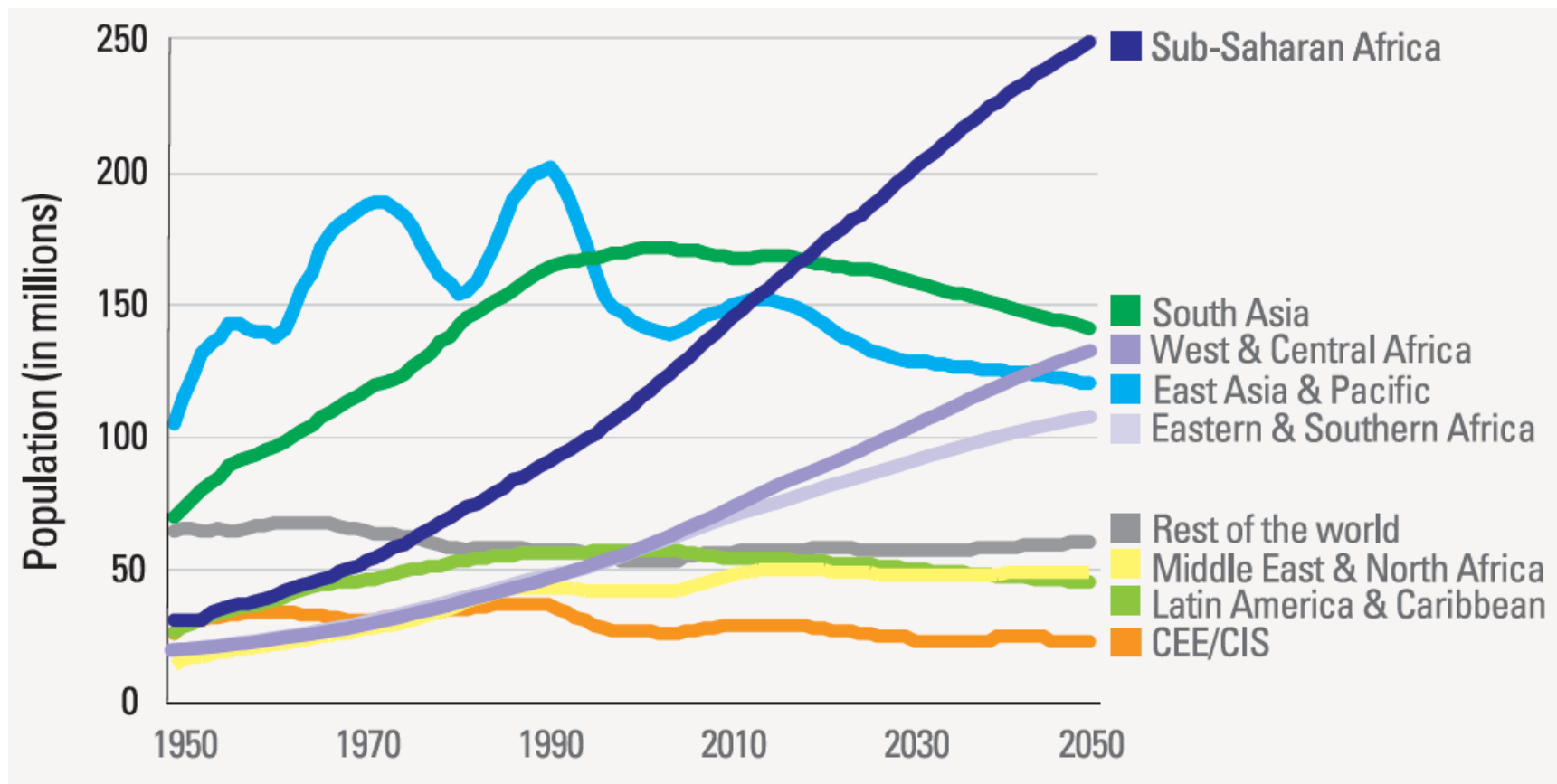
Still, progress is insufficient to achieve MDG4 target by 2015 and substantial acceleration is required

Achievement of MDG 4 by year, globally and by region, if current trends continue in all countries

Source: UNICEF Data & Analytics Section, as presented in APR Progress Report 2013.

Countdown to 2015

Countdown Aims

- To disseminate the best and most recent information on country-level progress

- To take stock of progress and propose new actions

- To hold governments, partners and donors **accountable** wherever progress is lacking

Countdown 75 Priority Countries

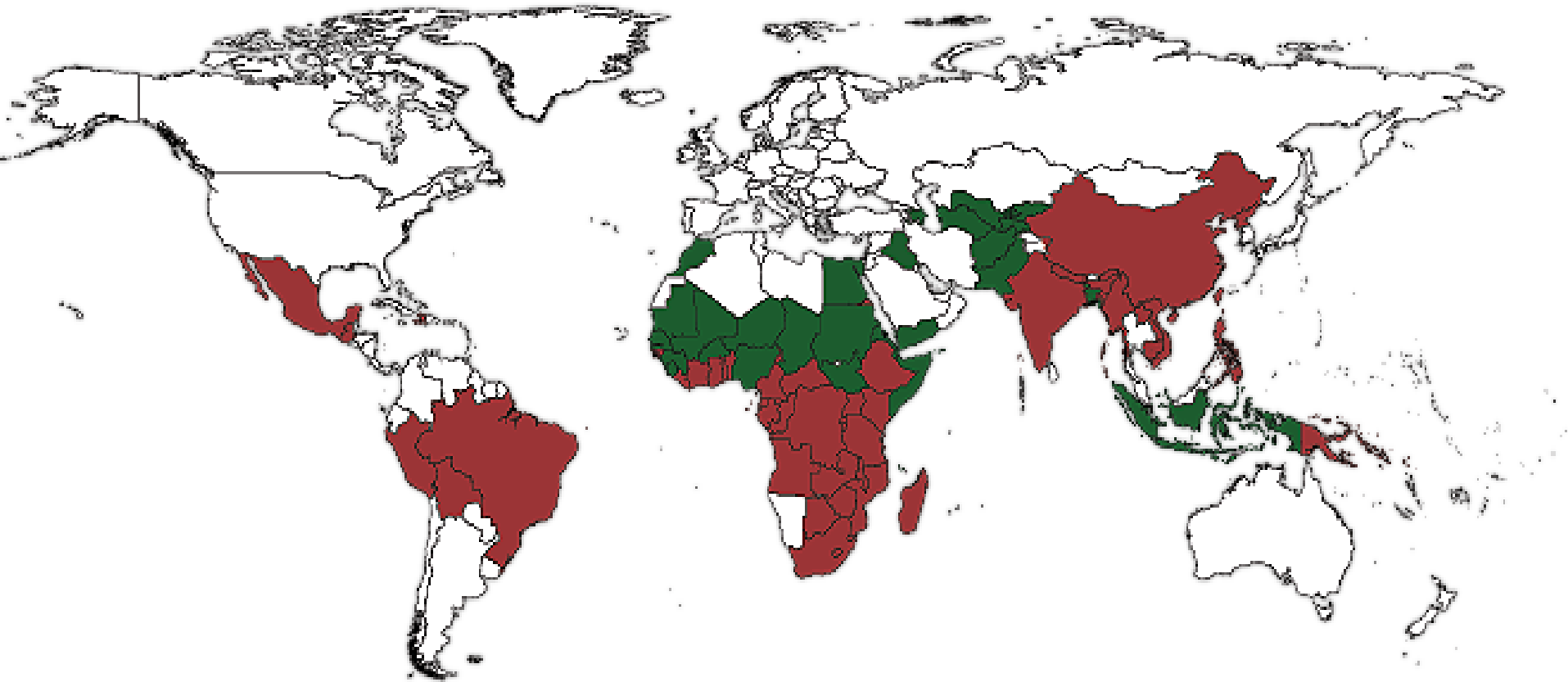*Countdown* tracks progress in the 75 countries where more than 95% of all maternal and child deaths occur

Countdown 75 Priority Countries

39 of the 75 countries are Muslim majority countries

Bangladesh

DEMOGRAPHICS

Total population (000)	148,692
Total under-five population (000)	14,707
Births (000)	3,018
Birth registration (%)	10
Total under-five deaths (000)	140
Neonatal deaths: % of all under-5 deaths	59
Neonatal mortality rate (per 1000 live births)	27
Infant mortality rate (per 1000 live births)	38
Stillbirth rate (per 1000 total births)	36
Total maternal deaths	7,200
Lifetime risk of maternal death (1 in N)	170
Total fertility rate (per woman)	2.2
Adolescent birth rate (per 1000 women)	133

Under-five mortality rate
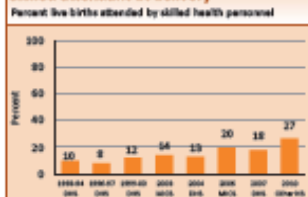Deaths per 1,000 live births
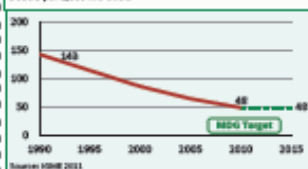
Maternal mortality ratio
Deaths per 100,000 live births
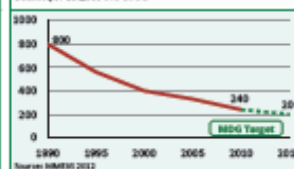
MATERNAL AND NEWBORN HEALTH

Coverage along the continuum of care

Skilled attendant at delivery
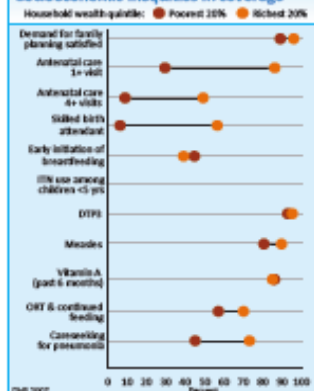Percent live births attended by skilled health personnel

Prevention of mother-to-child transmission of HIV
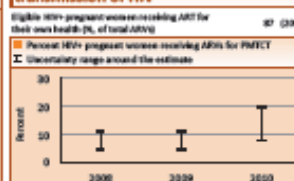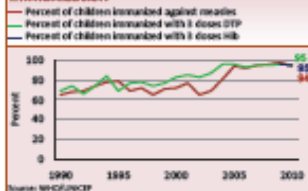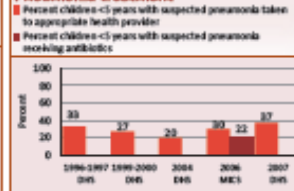
EQUITY

Socioeconomic inequities in coverage

CHILD HEALTH

Immunization

Pneumonia treatment

NUTRITION

Underweight and stunting prevalence

Exclusive breastfeeding
Percent infants <6 months exclusively breastfed
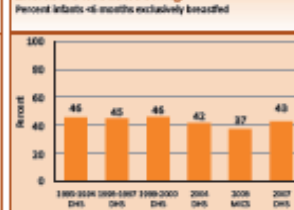
A Promise Renewed

- *A Promise Renewed* is a global effort to accelerate action on maternal, newborn and child survival

- In June 2012, the governments of Ethiopia, India and the United States — together with UNICEF — brought together more than 700 partners from the public, private and civil-society sectors for the Child Survival Forum Call to Action

- More than 176 governments, civil society and private sector organizations have signed a pledge to redouble their efforts to end all preventable child deaths

Bending the curve to achieve the MDGs": an evidence platform for advocacy

Number of lives saved since 1990 among children under age 5, and number of lives to be saved in order to achieve MDG4

The chart shows:
- Y-axis: Under-five deaths (in millions), from 0 to 14
- X-axis: 1990 to 2028

90 million lives saved since 1990

216 million children died before age 5 from 1990-2012

To achieve MDG 4, an additional 3.5 million children's lives need to be saved in 2013-2015.

If current trends continue in all countries, the world will not meet the MDG 4 target until 2028. By then, an additional 35 million children will die.

15 million children would still die before age 5 in 2013-2015 even if all countries achieve the MDG 4 target by 2015.

COMMITTING TO CHILD SURVIVAL
A PROMISE RENEWED

unicef

APR supports action on three fronts:
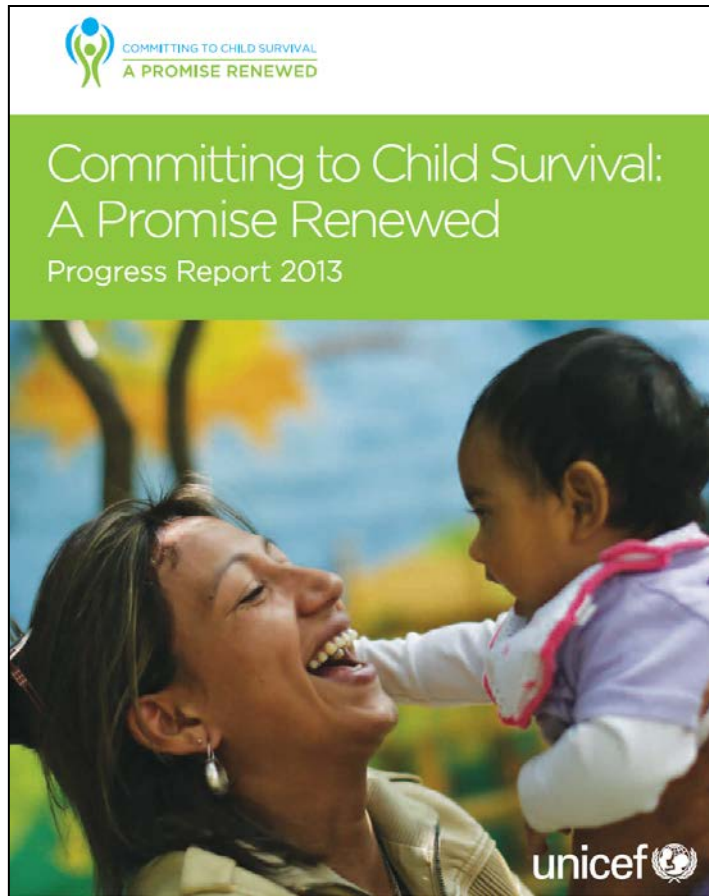
1. Sharpening and implementing high-impact plans, with measurable targets;

2. Mobilizing civil society to demand greater accountability for commitments made on behalf of women and children;

3. Monitoring and reporting progress, locally, nationally and globally, celebrating successes and reinforcing areas where progress lags.

Advocacy in UNICEF is:

- how we promote the system changes that are essential to advancing the rights of children.

- based on demonstrated evidence.

- aimed at directly and indirectly influencing decision makers, stakeholders and relevant audiences

- Educating the public and policy makers about an issue

- Influencing the debate in the media

- Analysis and research to develop an evidence base

- Building support through partnerships and coalitions

- Ensuring children have a voice in the policy process

- Mobilising the public

What makes advocacy effective?

Advocacy is usually more effective when it builds on strengths.

Some of UNICEF's strengths might be:

- Global brand and recognition

- Communication capability

- Access (with governments, UN, NGOs and civil society, other international organizations such as WB, IMF, etc)

- Partnerships (wide body of partnerships)

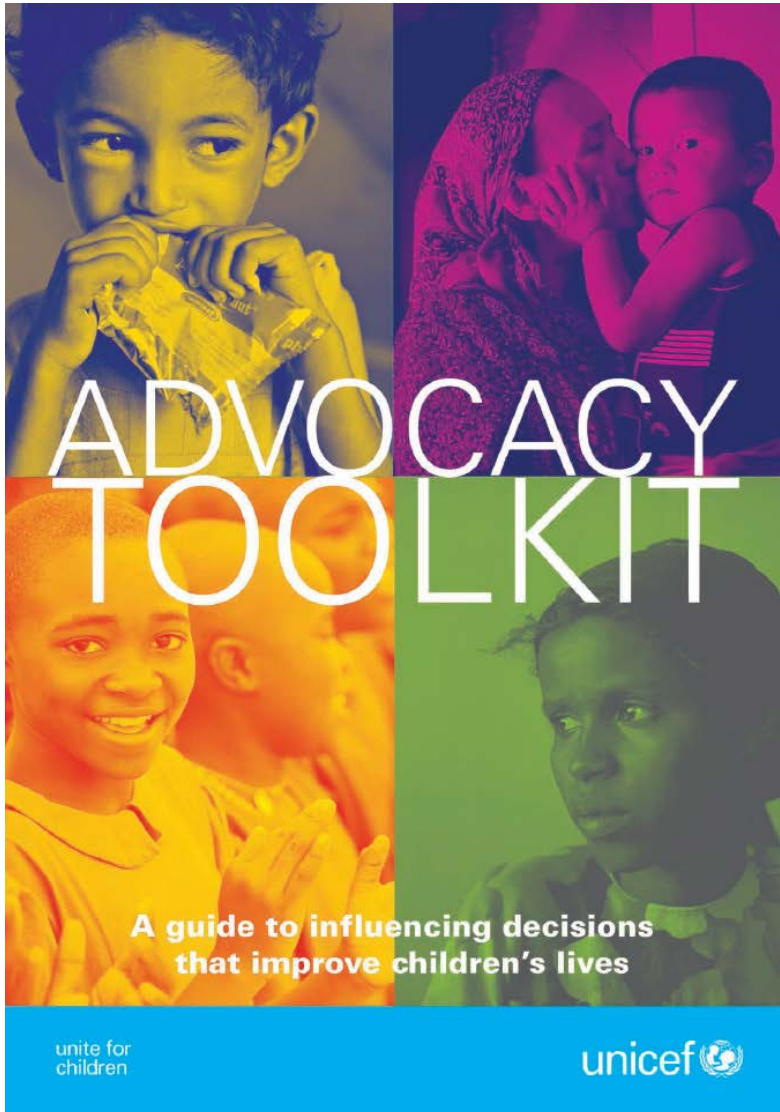- **Technical expertise matched with evidence**

Example: Technical expertise matched with evidence

Comparing mortality among poor and richer children in Nigeria
**(Rate per 1000 Live Births)**
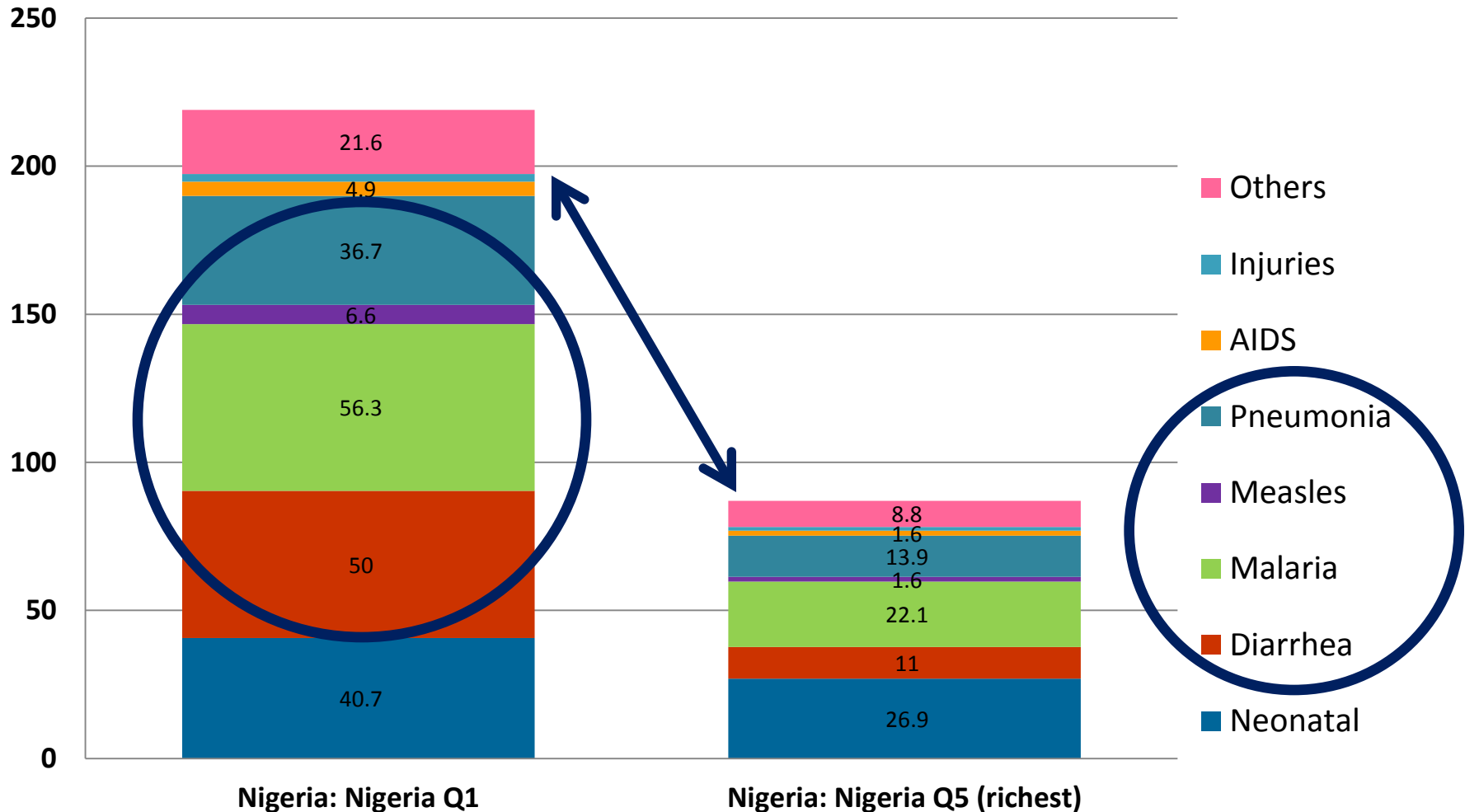
A structured, consistent internal approach supports effective advocacy

- Practical tools to help UNICEF staff and partners in the development and management of advocacy.

- For all levels of the organization (Country, Regional and HQ

- Provides detailed steps and guidance on developing and implementing an advocacy strategy

How do we measure effectiveness?

How far am I going to get in one year?
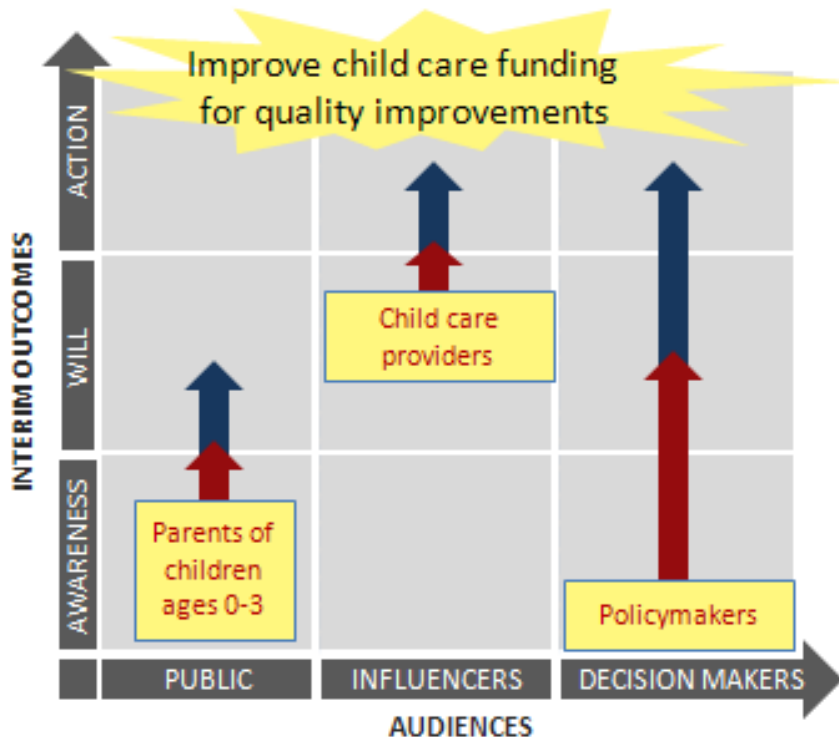
Achieving goals, particularly for policy advocacy, often takes many years.

➤ Assess progress, not just end result.

Advocacy is complex, with many actors.

➤ Demonstration of contribution is expected, not attribution.

Resources and time can be limited.

➤ Minimize evaluation burden.

Measuring isn't easy.

➤ Measure changes in audiences, not outputs.

How do we measure effectiveness?

Tools organized by when they are typically used

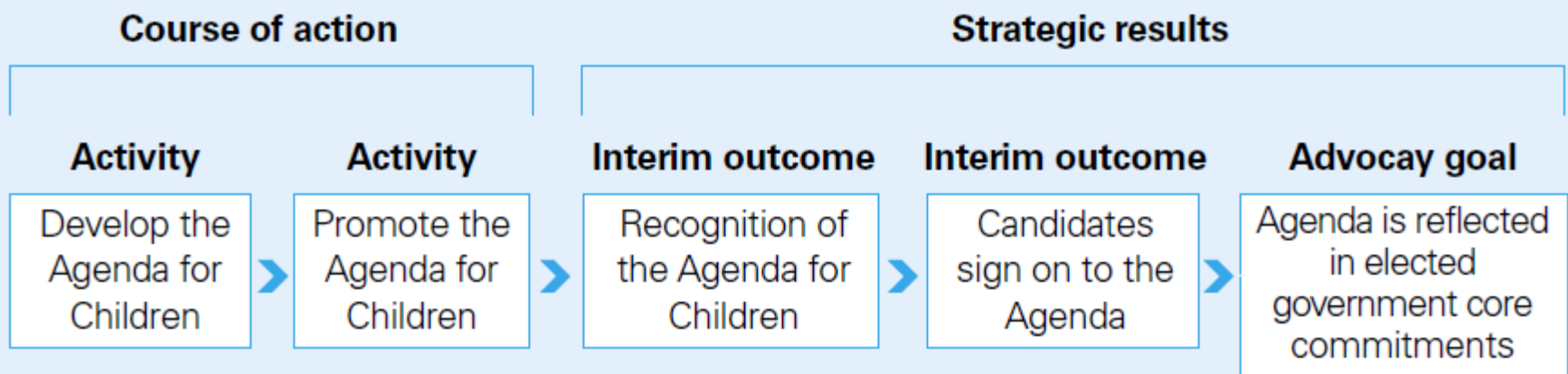| Pre-intervention assessments and mapping	Ongoing monitoring of advocacy activities	Interim effects for advocacy audiences	Policy or system change results
• Advocacy capacity assessment • Network mapping (before advocacy) • System mapping (before advocacy)	• Media tracking • Media scorecards • Critical incident timelines • Intense period debriefs • 360-degree critical incident debriefs	• Research panels • 'Crowdsourcing' • Snapshot surveys • Intercept Interviews • Bellwether methodology • Policymaker ratings • Champion tracking • ECCO analysis • Network mapping (during or after advocacy)	• Policy tracking • System mapping (after advocacy)

Case Study: Tanzania
Using elections as entry points

National Elections: a window of opportunity for defining and packaging a five year advocacy agenda for children. Advancing priority issues for children is nonpartisan; in effect, the issues are running for election.

UNICEF Tanzania developed the 'Agenda for Children 2010 '– 10 recommended investments that packaged all of UNICEF's key advocacy goals within one brand.

The goal was to have issues like child health reflected in political party manifestos, and later become part of the core commitments of the elected Government. Progress toward commitments will then be tracked in the future.

Course of action		Strategic results		
Activity	**Activity**	**Interim outcome**	**Interim outcome**	**Advocay goal**
Develop the Agenda for Children	Promote the Agenda for Children	Recognition of the Agenda for Children	Candidates sign on to the Agenda	Agenda is reflected in elected government core commitments

What next?

1) **More evidence for advocacy**: Build robust investment cases to demonstrate the long term benefits and viability of child survival and health

2) **Stronger capacity for advocacy**: sharing lessons learned, a comprehensive e-learning course as a global public good;

3) **Focus even more on context-specific strategies** by gathering evidence and experience of what works best:
   - in specific country settings (e.g. Fragile states, Resource Rich, UMICS)
   - for specific issues (e.g. Polio, Secondary Education, Gender-related child protection violations etc)