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A joint health and nutrition strategy to guide the work of UNICEF: oral report
Background note

Why a new strategy?

1. It has been some 10 and 13 years, respectively, since the Executive Board approved the current individual UNICEF strategies on health and nutrition. As nations prepare for the five-year review of the implementation of the Millennium Declaration and its goals, and as UNICEF is preparing its next medium-term strategic plan for 2006-2009, the time is ripe to renew these strategies.
2. The proposed joint health and nutrition strategy introduces a number of significant departures from past strategies in response to current status and trends in child and maternal health and nutrition; organizational lessons learned; important scientific findings; and changing political, socioeconomic and environmental conditions that relate to the opportunities and challenges for sustainable achievement of the Millennium Development Goals.
3. Of the eight Millennium Development Goals, four of them (Goals 1, 4, 5 and 6) are directly related to child and maternal health and nutrition, and another four (Goals 2, 3, 7 and 8) are strongly linked to them. Every week in the developing world, 200,000 children under five years of age die of disease, and many more are chronically undernourished. The vast majority of these children belong to poor communities with little access to quality, equitable and affordable health and nutrition services. Furthermore, the HIV/AIDS pandemic continues to threaten to reverse the child survival and development gains of past decades. The overall solution for countries entails an equitable and dramatic acceleration in the scaling-up of well-known, high-impact and system-based interventions and related goals, such as the one for basic education and gender equity and equality. Unless this acceleration happens, the health- and nutrition-related Millennium Development Goals will not be reached.
4. A more meaningful and effective contribution to global efforts by UNICEF will be possible through a joint health and nutrition strategy that will be results-oriented, predictable and have clear accountabilities. Drawing on the synergy between health and nutrition to guide its work, UNICEF, in collaboration with other international partners, will focus more sharply on providing strategic support to country-led and -owned efforts, in

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particular those which focus on building national capacities in the areas of maternal and child health and nutrition. Particular emphasis will be placed on serving children and families living in poverty.

Why a combined health and nutrition strategy?

5. Health and nutrition are interdependent, both programmatically and from a human-rights perspective. There is broad evidence that a joint strategy will have greater impact because both primary health and nutrition solutions play interactive, synergistic and direct roles in child survival, development and growth, and in maternal survival and well-being. The strategy is not meant to be a cumulative sum of all possible interventions that fall under the traditional roles and interventions of the health and nutrition sectors as they apply to children and women, but a strategic, synergistic mix.

What is the link between the strategy and the medium-term strategic plan?

6. The joint strategy is being designed so that it should be able to serve until the key target year of 2015 for achieving the Millennium Development Goals. This means it will be able to guide the formulation, and adjustment if required, of medium-term strategic plans over the next 10 years. In line with the focus of the Millennium Goals, the primary focus of the strategy will be on young child survival and development. However, the strategy will also specify the nature and magnitude of joint health and nutrition actions in support of other strategic priorities including maternal health and well-being.

How is the strategy being developed?

7. The strategy will draw on existing policy and strategy documents and on such major developments in the global environment as the new Global Immunization Strategy, and will be informed by a series of expert consultations. Following the Executive Board's feedback, the secretariat will undertake consultations with UNICEF country and regional offices and a wide variety of partners, including the World Health Organization, the World Food Programme, the World Bank, the United Nations Population Fund, bilateral development agencies, foundations, NGOs and independent experts, to achieve wide consensus and buy-in.

What are the guiding principles of the strategy?

8. **Result-oriented and accountability-based partnerships.** Key principles include a clear sense of joint and complementary purposes and mutually shared goals; commitment to the scaling-up of high-impact interventions using, as appropriate, joint programming and policies under national leadership; and a recognition of each partner's strategic contributions. The strategy draws on evidence and past experience for joint advocacy, and supports partnerships which address systematic monitoring and strategic evaluation for learning. Equally important are minimizing transaction costs for recipient Governments and helping to harmonize partners' activities at country level for greater aid effectiveness.

9. **Evidence-based selection will lead to a mix of interventions and operational strategies.** The joint strategy will be guided by new and important evidence, for example the recent *Lancet* series on child and newborn survival, the 2004 World Development Report, the 2005 World Health Report on maternal and child health and the report from the Millennium Project. The focus will be on evidence-based and high-impact health and nutrition interventions which can have dual and synergistic impacts on maternal, newborn and child survival, growth and development. The strategy will also emphasize the identification of domains where further research and analysis are required.

10. **Systematic scaling up of proven interventions and appropriate, situation-specific strategies that benefit children and women's health and nutrition.** Countries experiencing the greatest challenges in accelerating progress towards achievement of the health and nutrition Millennium Development Goals are often, not surprisingly, characterized by weak and inequitable health and nutrition systems and poor governance. Hence, reaching the health and nutrition Goals will require:

(a) More effective national capacity-building to address system-wide operational problems and social mobilization issues. Even in countries with weak systems, national health/nutrition days, periodic outreach services and improvement of family and community-level care practices can trigger rapid improvements in young child survival, growth and development;

(b) Strengthening facility-based health and nutrition systems is time-consuming but essential, so that gains in capacity are consolidated and sustained. For example, strengthening district health/nutrition systems is key to the sustainable scaling-up of services for the prevention of mother-to-child transmission of HIV, and to increasing the proportion of HIV-infected children receiving appropriate care and treatment.

11. **A rights-based approach to programming.** This approach will be aimed at: (a) reaching unreached, marginalized and excluded children and women; those who do not have access to quality, equitable and affordable health and nutrition services, especially the poor and those affected by conflict and HIV/AIDS; and (b) empowering poor families and communities to make optimal choices, participate in decision-making and engage in practices and adapt behaviours that have a direct impact on their health, nutrition and well-being.

12. **Working at micro, meso, macro and global levels.** In a globalized world, the strategy emphasizes the need to develop appropriate linkages between concerted international action and national policies and priorities. At country level, the strategy supports policies, processes and interventions aimed at achieving maximum results for children, across vertical and horizontal channels. Influencing the role of the private sector to support efforts towards optimal child health and nutrition will be a further part of the strategy.

13. **Life-cycle approach of interventions.** UNICEF recognizes that optimal child survival, growth and development are more likely to be achieved and sustained if

preventive measures are already available to future mothers (adolescent girls and women) before their children are born, as part of an integrated approach to reproductive, maternal, newborn and child health which emphasizes the need to ensure a continuum of care from pregnancy through childhood.

What are the expected key results?

14. **National policies, plans and budgets which include maternal and child health and nutrition outcomes that contribute directly to the Millennium Development Goals.** In collaboration with partners, UNICEF will assist country-led formulation, monitoring and evaluation of sectoral plans, poverty reduction strategies and medium-term expenditure frameworks that set targets for scaling up high-impact maternal and child health and nutrition interventions in support of the Goals.

15. **Reduction of newborn and under-five mortality in countries and regions with high child mortality rates, and in emergencies.** In these situations, the synergy resulting from combining health and nutrition interventions is usually at its highest. Most of the interventions that reduce mortality will at the same time contribute to promoting optimal growth and development.

16. **Improved strategic contributions from health and nutrition to other Millennium Development Goals.** The successful implementation of the strategy will contribute to overall efforts to eradicate extreme poverty and hunger, achieve universal primary education, promote gender equity and the empowerment of women, and promote sustainable environments. Partnering with other United Nations agencies on these issues, UNICEF will provide technical advice and guidance in support of the health- and nutrition-related components of these Goals and other child-related targets contained in the Millennium Declaration, as in the area of child protection.

Which issues require further work?

17. Several issues require further analysis, such as the combined role of health and nutrition in addressing the continuum of care between reducing child mortality (Goal 4) and improving maternal health (Goal 5). In addition to the recently held expert consultations on child survival and development, other expert consultations will be organized on maternal health and nutrition, health system financing and market-oriented food systems.

Next steps

18. The secretariat proposes that a comprehensive strategy document be presented for discussion and adoption by the Executive Board at the first regular session of 2006.
