

HEALTH RESULTS 2021

CHILD HEALTH

unicef 
for every child



Happy children play in the schoolyard in Man, western Côte d'Ivoire.

CONTEXT

While a child born today has a much better chance of surviving to their fifth birthday than just 30 years ago, more than 5 million children died before turning 5 in 2020 alone. Children in sub-Saharan Africa and Southern Asia continue to face the highest risk of death globally. Fifty-four countries will not reach the child mortality Sustainable Development Goal (SDG) targets by 2030, and in many cases, huge inequities also exist within and across countries having post-neonatal mortality as high as 75 per cent.

Pneumonia, diarrhoea, and malaria remain the three main killers of under-five children, accounting for 14 per cent, 9.1 per cent and 8 per cent of all under-five deaths, respectively. Even though there is a clear understanding of gaps and priorities and the need for

accelerated progress, efforts to address pneumonia and diarrhoea through effective prevention and care have struggled to receive adequate attention and investments. In addition, increased funding for pneumonia and diarrhoea is needed to further build on the investments in malaria control programmes that have reduced related child mortality.

For a second year, the COVID-19 pandemic continued to interrupt essential child health services across all levels of care, severely impacting their rights to survive and thrive. Nearly 1.2 billion children now live in countries with complex emergencies driven by conflict, insecurity, inequality, and fragility. Pneumonia and diarrhoeal diseases are more prevalent in humanitarian settings, where children

also face additional health risks, including paediatric trauma, gender-based violence and mental health issues. Gains to advance children's health are also threatened by antimicrobial resistance, predatory commercial practices, and reduced bilateral, multilateral, and private-sector investments.

Children's lives are increasingly impacted by climate change and environmental degradation, with approximately 1 billion children now living in 'extremely high-risk' countries, according to UNICEF's Children's Climate Risk Index. Along with the impact of pollution on children's health, more than one in four globally are exposed to vector-borne diseases, including malaria and dengue, a situation likely to worsen.

UNICEF WORK AND RESULTS IN 2021



32,059 community health workers

(of which 12,748 were female) enhanced their skills to improve equitable health care for children who needed it most.



UNICEF delivered 30 million oral rehydration sachets (ORS)

to 43 countries, of which 5.9 million were ORS and zinc co-packs. Additionally, 93 million zinc tablets were delivered, of which 26 million were ORS and zinc co-packs.



71 countries implemented interventions

to address environmental pollution and climate change through UNICEF health programmes.¹



9.5 million people received insecticide-treated nets in humanitarian settings.

UNICEF works to expand access to quality, essential child health interventions. Focusing on a comprehensive, multi-sectoral life course approach, UNICEF emphasizes the 'survive agenda' while expanding its portfolio to support the 'thrive agenda'. This includes nurturing care for early childhood development and disability interventions through health platforms, non-communicable disease (NCD) and chronic care, injury prevention, and interventions to address environmental pollution and climate change.

Many UNICEF strategic indicators for child health had stagnated before the pandemic upended progress even further. An increased focus and targeted investments are imperative to prevent and treat the common infectious diseases that continue to kill children under 5 in large numbers.

¹ This result is for the period, 2019–2021.

PREVENTING AND TREATING PNEUMONIA, DIARRHOEA, AND MALARIA



8.75 million children with suspected pneumonia

received appropriate antibiotics through UNICEF-supported programmes.



UNICEF delivered 315.7 million dispersible tablets of amoxicillin

to 54 countries, equivalent to 31.6 million pneumonia treatments for children under 1 year of age.



UNICEF procured 21,034 oxygen concentrators

for low- and middle-income countries.



56 per cent of children in the 16 malaria-endemic countries supported by UNICEF and partners slept under an insecticide-treated net.

The provision of oxygen therapy is critical for the survival of newborns and children with severe pneumonia and other life-threatening conditions. COVID-19 exposed large gaps in oxygen needs in many low- and middle-income countries.

UNICEF exponentially increased its support to governments to scale oxygen systems, leveraging its capabilities in procurement, supplies and programming. To mobilize resources and strengthen oxygen systems for the pandemic response while ensuring long-term impact, UNICEF provided end-to-end support to over 45 country offices and governments.



Nowhere is the technology gap more apparent than in the provision of oxygen...Oxygen is seldom available in the poorest countries beyond urban hospitals and private providers. Pulse oximeters, effective and inexpensive diagnostic devices for measuring blood oxygen levels, are similarly unavailable to those who need them most.



Henrietta H. Fore and Kevin Watkins



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Oxygen-in-a box is helping with the COVID-19 response in Uganda.



Healthcare workers involved in critical care in Nepal receive oxygen equipment training.



© UNICEF /2021/ Babajanyan



In Ghana, the innovative SPRINT approach is helping to save lives.



© UNICEF/JUNI/195717/Mawa



With COVID-19 oxygen investments, UNICEF improved access to oxygen for newborns and children in Bangladesh, Nepal, Liberia and Kenya.

When delivered together with zinc, the effectiveness of oral rehydration salts (ORS) in treating diarrhoea increases exponentially. Although notable progress has occurred in diarrhoea control since 2000, many more children could be saved through increasing access to simple interventions for treatment and prevention, including water, sanitation, and hygiene (WASH). Of the 22 countries reporting in 2021, only 16 per cent of children with diarrhoea received zinc and ORS. Increased focus is required to improve investments and the scale-up of improved treatment options, including co-packaged ORS and zinc.

To reach the last mile, UNICEF focuses on health system supply chain-strengthening and tracks the percentage of countries that maintain no stock-outs of ORS for more than one month at the national level. In 2021, the percentage of countries that maintained no ORS stock-outs for more than one month increased from 86 per cent (2020) to 92 per cent. Two focus countries reported national level ORS stock-outs for more than a month due to the pandemic's impact on global and country-level

supplies and insufficient ordering of stock. However, these data hide the fact that regular stock-outs at sub-national level continue to be a major concern.

To maximize progress towards the Global Technical Strategy for Malaria 2016–2030, which aims to provide a comprehensive Framework to guide countries in their efforts to accelerate progress towards malaria elimination, UNICEF continued to work closely with the World Health Organization (WHO), the Roll Back Malaria Partnership to End Malaria, the Medicines for Malaria Venture, the U.S. President's Malaria Initiative, the Global Fund, and other partners to reach a malaria-free world.

UNICEF has been a partner of the Malaria Vaccine Implementation Programme and strongly supported WHO's launch of the new malaria vaccine, RTS,S, in October 2021. UNICEF is providing technical and programmatic support for sub-Saharan African countries to prepare health systems for the widespread roll-out of the malaria vaccine in children under 5 in 2023.



UNICEF Former Executive Director Henrietta Fore talks about the need to scale-up implementation of intermittent-preventive treatment of malaria in pregnancy.



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A photo essay on UNICEF's insecticide-treated bed nets in South Sudan.



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Asha conducts a malaria test on 13-year-old Dipika during a home visit in Tirathgarh village, Bastar, Chattisgarh, India.

REACHING CHILDREN IN HUMANITARIAN SETTINGS



1.62 million people in humanitarian settings received long-lasting insecticidal nets.

As part of UNICEF's Core Commitments for Children in humanitarian action, long-lasting insecticidal nets (LLINs) were distributed in malaria-endemic countries and humanitarian settings. Preventing malaria is even more critical in humanitarian settings where children's vulnerability to disease is heightened.

As part of UNICEF's emergency response, 40 tonnes of life-saving medical supplies – including kits and medicines to treat acute watery diarrhoea – were delivered to Kabul, Afghanistan, to treat the increasing number of diarrhoeal disease cases in the city and surrounding districts. The medical supplies helped treat around 10,000 people suffering from dehydration caused by the disease.



UNICEF medical supplies help treat rising cases of acute watery diarrhoea in Kabul.

STRENGTHENING COMMUNITY-BASED PRIMARY HEALTH CARE

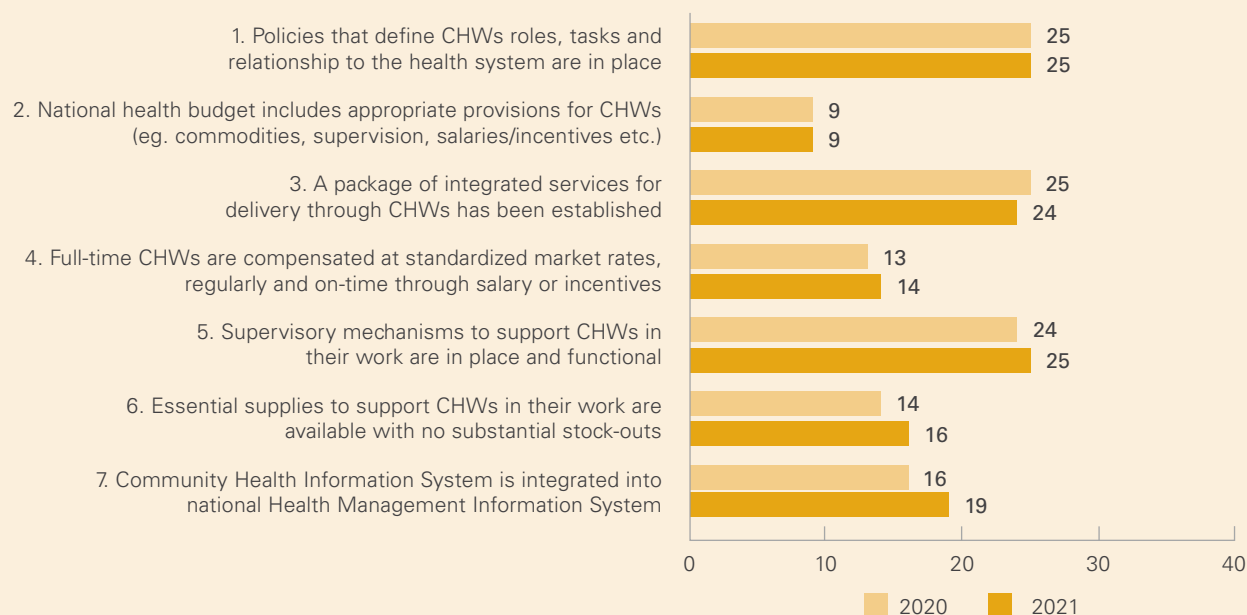


By the end of 2021, all 25 UNICEF focus countries had policies in place that met current criteria for institutionalization.²

Community health workers play a critical role in bringing primary health care to communities lacking essential services, including those in emergency response situations. Investing in and strengthening the capacity of community health workers (CHWs) remains a requisite for delivering essential, quality health services to the last mile and forms the cornerstone for reaching zero-dose children and communities.

UNICEF tracks seven components to strengthen the quality of this process. All 25 priority countries (an increase of one country from 2020) have policies that define CHW roles, tasks, and relationships to the health systems and have supervisory mechanisms to support CHWs in their work. Twenty-four countries have established packages of integrated services that can be delivered through CHWs (a decrease from 25 in 2020). Accelerated progress is needed in other areas to reach the full complement across the 25 priority countries.

Progress in the institutionalization of community health workers, by component, 2020 and 2021



² This result is for the period 2018-2021.

Data source: UNICEF New York, 2021

A further 28 countries moved forward with plans to institutionalize community health workers into the formal national health system.

Working in partnership with USAID, UNICEF assumed management responsibility for the Community Health Roadmap, a country-led partnership to double down on operationalizing community-based primary health care. UNICEF and partners work with governments to elevate community health on national agendas, strengthen and advocate for community health, coordinate national priorities, and mobilize resources and financing so quality health care is available and accessible for all.



In the wake of Cyclone Idai, community health workers bring essential health services to remote communities in Mozambique.



After Cyclone Idai, UNICEF and USAID rehabilitated a health centre and trained health workers in Ceramica, Mozambique.



ENHANCING CAPACITIES OF COMMUNITY HEALTH WORKERS

In 2021, some 32,059 CHWs – 12,748 of whom were female – underwent skill enhancement courses to operationalize integrated community case management through UNICEF-supported programmes.

Integrated community case management (iCCM) is a community-based approach to identify and treat leading causes of child death, especially pneumonia, diarrhoea, and malaria. To improve access to quality care, including community-based care, UNICEF focused on the key causes of under-five deaths and the scale-up of iCCM, alongside treatment of severe acute malnutrition.

UNICEF works to improve community health workers' skills and capabilities to improve the coverage and quality of care. In response to the COVID-19 pandemic, UNICEF worked with partners to maintain and increase essential healthcare services to the most remote and vulnerable populations, while supporting front-line health workers with the knowledge, skills, confidence, and guidance to manage COVID-19 infections.



Dr. Fatima Mohammed Aydarous, a family physician and the Director of Reproductive Health in Hadramout, trains community health workers during a session held by UNICEF in Al Mukalla, Hadramout, Yemen, in October 2021.



In Yemen, community health workers' training helps to ensure that healthcare services reach children in rural communities.



Strengthening integrated primary health care in Gombe State, Nigeria.

HELPING CHILDREN THRIVE

All children, including those with disabilities and developmental delays, have a right to the best start in life, setting them on the right path to healthy development and learning. The importance of the early years of life means that UNICEF and partners support countries in applying the Nurturing Care Framework for early childhood development, recognizing particularly the role of the health sector and primary health care in strengthening nurturing care and supporting caregivers. Using this multisectoral approach to health, well-being and development, UNICEF and partners focus on integrating and strengthening key components of nurturing care in routine health interactions between families and caregivers.

Children with disabilities, especially the most marginalized, are at increased risk of diarrhoea, fever, and symptoms of acute respiratory infection. UNICEF is using an equity-based approach to support children with disabilities by ensuring they are included and covered by existing health and other early childhood development services. A newly developed model for early identification and interventions for children with developmental delays and disabilities has been adapted and piloted in Bulgaria, Peru, and Uganda.

UNICEF uses a two-pronged approach to address non-communicable diseases (NCDs): prevention of NCD risk factors in the early years and promotion of healthy lifestyles; and management of severe chronic conditions in children and adolescents through strengthening primary health care and the referral system. UNICEF works multisectorally, especially through schools, to provide a unique platform to address NCD risk factors. Integrative school programmes that address NCDs, injuries,



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A baby during a routine check-up with the paediatrician in Belmopan, Belize in June 2021. Dr. Candy Azueta counsels the family on Care for Child Development, a programme implemented by UNICEF in Latin America and the Caribbean.

mental health, life skills, the prevention of HIV and other sexually transmitted infections, and environmental health help protect children's health and well-being.

Under the Global Framework of Action for Road Safety, the multi-country Child Road Traffic Injuries Prevention Programme has been distributed to support countries in collecting and analysing data, strengthening systems, advocacy, implementation, and the continuation of the injury prevention programme. UNICEF's *Guidance for Safe and Healthy Journeys to School: During the COVID-19 pandemic and beyond* was disseminated and implemented. Some 15 countries acted to initiate and/or implement injury prevention activities to address child and adolescent injuries through UNICEF health programmes.



AstraZeneca-UNICEF's Young Health Programme.



A youth panel in Indonesia discuss ways to prevent NCDs with the support of AstraZeneca-UNICEF's Youth Health Programme.

ADDRESSING ENVIRONMENTAL POLLUTION AND CLIMATE CHANGE

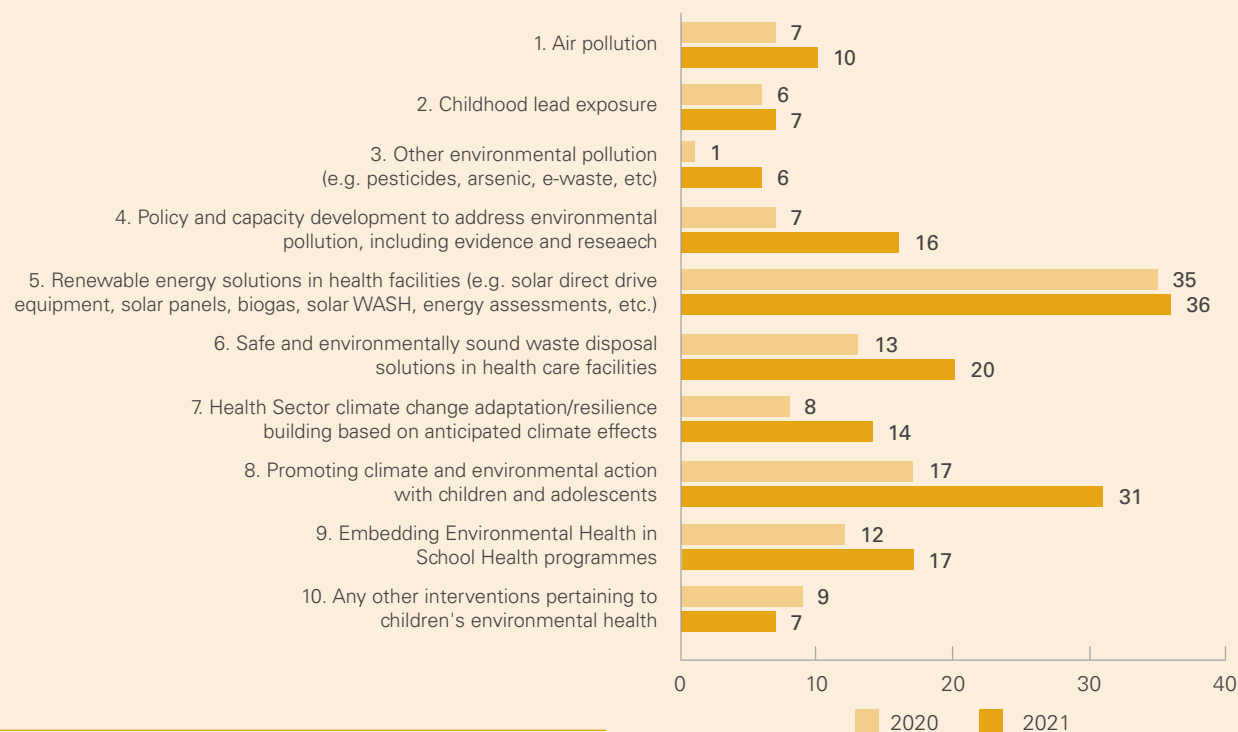


By the end of 2021, 71 countries reported the implementation of at least one intervention to address environmental pollution and climate change.³

UNICEF has elevated its action on climate change and environmental degradation for and with young people to respond to local disease and risk factors. With a focus on improving the responsiveness of

primary health care to the impact of pollution and climate change on children's health, UNICEF works multisectorally and in collaboration with the UN system. The Healthy Environments for Healthy Children Global Programme Framework is the guiding document for UNICEF country programmes on children's environmental health. In 2021, the Framework was distributed and garnered support from governments, partners, and academia. This emergent area continued to see exponential growth.

Environmental pollution and climate change: breakdown by intervention, 2020 and 2021



³ This result is for the period 2019-2021.

Data source: UNICEF New York, 2021



Vietnamese choreographer Quang Dang dances to a song by musical artist Quan AP to promote World Children's Day. The theme of this year's celebration in Vietnam is 'Reimagine a greener and cleaner Vietnam for every child'.



Georgia now has a fully equipped chemical risk-factor research laboratory to study exposure sources of toxic metals.



Renewable energy initiatives are set to transform health facilities and surrounding communities in rural Zimbabwe.

LOOKING AHEAD

The unprecedented COVID-19 pandemic has slowed progress toward UNICEF's strategic goals of ensuring that all children survive and thrive. Under the new Strategic Plan 2022–2025, UNICEF will continue to focus on improving access and quality of primary health care, centred on the key causes of under-five deaths while moving towards a life-course approach to improve child and adolescent wellbeing in the first two decades of life.

Through the emerging Child Survival Action effort, co-led by UNICEF and partners, global attention must be refocused on child survival. The effort aims to bring those countries struggling to meet SDG 3.2

back on track by addressing key causes of illness and death through increased investments in primary health care in alignment with the new strategic plan.

Simple, cost-effective and high-impact interventions within front-line primary health care services can make a substantial impact in addressing many diseases and conditions affecting children, saving many lives and preventing disabilities.

Global and country funding must be strengthened and donor commitments improved to advance progress in child survival and well-being. Progress

must be accelerated if there is to be any chance of attaining the SDGs for child health. This requires prioritizing the reduction of under-five deaths, preventing disabilities, supporting young people with disabilities, preventing injuries and NCDs and managing chronic conditions as part of a multi-sector primary healthcare approach, including at the community level.

Flexible thematic funding is critical to address unfinished agenda items and for comprehensive programming, allowing for integrated packages of care and multisectoral engagement, and for strengthened primary health care.



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Millions of children across Yemen face serious threats due to malnutrition, in particular, and the lack of basic health services, in general. All these threats are caused by the ongoing war and hostilities in the country, especially in Hudaydah governorate. UNICEF continues to reiterate the call by the United Nations for a ceasefire in Yemen to enable the delivery of urgently needed humanitarian assistance to children.



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Six-year-old Freshta smiles at the camera in Trinkot, Urozgan, a central province of Afghanistan.

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UNICEF expresses its deep appreciation to its resource partners for their support to health results in 2021, 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](#)