

PROGRESS REPORT 2013-2015

DECREASE CHILD DEATHS



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Results for children in Pakistan
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Printed in July 2015

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Results for children in Pakistan

BIRTH REGISTRATION
EDUCATE ALL CHILDREN
ERADICATE POLIO

STOP STUNTING
IMPROVE ACCESS TO SANITATION
DECREASE CHILD DEATHS

FOREWORD

In recent years, the Government of Pakistan has demonstrated increased commitment to social sector development, consequently leading to some notable successes. In particular, the country is celebrating the recent achievement of the Millennium Development Goal (MDG) for sanitation, halving the proportion of the population without sustainable access to basic sanitation. Over the past two decades, the government has also made notable strides in combatting polio, increasing routine immunization and decreasing the number of out-of-school children.

UNICEF, along with its partners, is supporting the Government of Pakistan to achieve the MDGs and will continue to do so in the post-2015 era. More specifically, UNICEF is providing support to achieve the following results in Pakistan:

- **BIRTH REGISTRATION:** Achieve universal birth registration by 2024
- **EDUCATE ALL CHILDREN:** Provide access to improved education to more than 1.2 million children in Pakistan by 2017
- **ERADICATE POLIO:** Eliminate the disease by May 2016
- **STOP STUNTING:** 1.9 million fewer children with stunted growth and development by 2017
- **IMPROVE ACCESS TO SANITATION:** 10 million fewer people practising open defecation by 2017
- **DECREASE CHILD DEATHS:** Reduce newborn mortality from 55 to 20 live births per 1,000 by 2017, and have 90 percent fully immunized children (aged 12-23 months) by 2017

These progress reports take a deeper look into these issues, including the latest data and how government interventions have positively impacted children and communities in Pakistan. These reports also present key challenges, recent research, knowledge and evaluations, and strategic direction for the future.

Through these reports, we seek to foster productive collaboration, demonstrate the collective contribution of UNICEF and its partners, and reassert our commitment to the Convention on the Rights of the Child.

Angela Kearney
UNICEF Representative in Pakistan



OVERVIEW

The key goal of UNICEF's health programme in Pakistan is to decrease preventable child deaths, supporting the country's national commitments under the global 'A Promise Renewed' initiative.

This progress report highlights two important ways for the achievement of this goal: saving newborns and improving routine immunization. It shows national targets for both areas, the latest data, key successes and how the concept of equity – reaching the hardest-to-reach children – underpins everything we do.

Save Newborns

Newborn death is a major contributor to child mortality in Pakistan, with more than half of under-5 deaths in the country occurring in the first month of a child's life. Essential interventions for safe delivery and quality care are being initiated, but have not reached enough people to achieve the intended impact. UNICEF's interventions and programmes are guided by the Global Newborn Action Plan endorsed by the World Health Assembly in 2014 and recognized as a public health priority by the Government of Pakistan.

Improve Routine Immunization

At only 54 percent, Pakistan has low rates of immunization coverage, characterized by geographical and wealth inequities, with persistently lower coverage rates amongst the poorest communities and children. Low routine immunization coverage leads to frequent disease outbreaks, in addition to the ongoing wild poliovirus transmission, which is an international health emergency.

To date, UNICEF has assisted the Government of Pakistan with vital support to implement the national Expanded Program on Immunization (EPI), including planning, monitoring and improving the governance, resourcing and supply chain of the immunization system. On the demand side, the work focuses on advocacy and social mobilization. It is also focused on introducing cutting edge innovations to achieve wide scale results.

DECREASE CHILD DEATHS



“Deaths of newborns from preventable causes is a matter of serious concern.

Pakistan is committed to ensure there are no more preventable deaths of newborns and under-5 children.”

Ms. Saira Afzal Tarar

Minister of State for Health MNHSRC

GLOBAL TARGET

Saving newborns

Reduction in newborn mortality from 55 to 10 per 1,000 live births by 2035

Strengthening Routine Immunization

90 percent fully immunized children 12-23 months by 2020

UNICEF PAKISTAN TARGET

Saving newborns

Reduction in newborn mortality from 55 to 20 per 1,000 live births by 2017

Strengthening Routine Immunization

90 percent fully immunized children 12-23 months by 2017

Pakistan currently ranks 23rd in the world for under-5 child death rates¹.

There are a variety of factors contributing to this, including high rates of newborn deaths, high rates of preventable diseases such as diarrhoea and pneumonia and increasing rates of malnutrition. The good news is, we know what works to reduce newborn mortality and 25 percent of under-5 deaths can also be prevented with vaccines².



HOW UNICEF WILL HELP ACHIEVE RESULTS

During 2015-2017, UNICEF will support government efforts to decrease under-5 death rates in Pakistan in all areas of public health, particularly, saving newborns and improving immunization:

DECREASE PREVENTABLE UNDER-5 DEATHS

SAVE NEWBORNS

- Guided by international Global Every Newborn Action Plan
- Evidence-based survival strategies and costed action plans
- Identified bottlenecks in nine essential interventions
- Key focus areas: Basic newborn care, neonatal resuscitation, helping babies breathe, Kangaroo mother care, treatment of severe infections, prevention of infections with CHX, inpatient care for sick and small low-birth weight babies
- Strategic HIV interventions for mothers to reduce newborn infections and early death

IMPROVE ROUTINE IMMUNIZATION

- Address inequities in immunization coverage through RED/REC strategic approach
- Focus on supply and demand:
 - Supply - reinforcing immunization supply chain logistics, improving effective vaccine management and capacity development for vaccine procurement
 - Demand - Behaviour change and communication to generate demand for immunization by parents, with a special focus on the marginalized
- Cross-sectoral linkages: UNICEF is well positioned to strengthen the national immunization system in synergy with the polio eradication program. Improved immunization outcomes will be achieved through close coordination with sanitation, hygiene and nutrition programmes

UNICEF'S SUPPORT TO GOVERNMENT UNDERPINNED BY

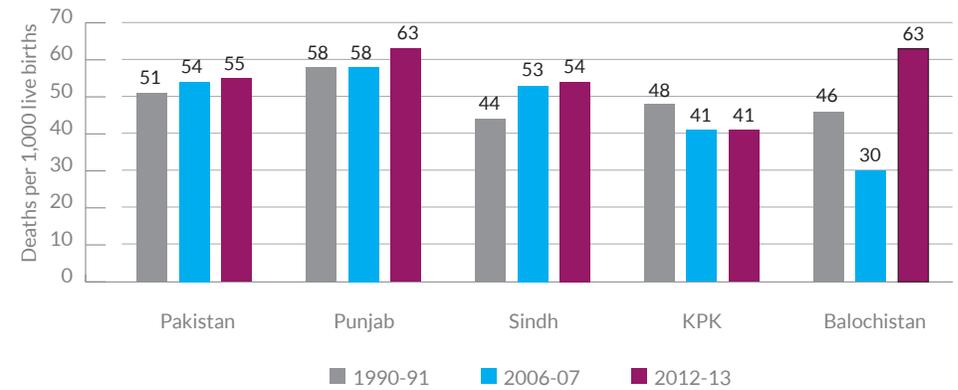
- A strong equity focus
- Targeted advocacy
- Planning, monitoring and technical support
- Tracking progress

DATA PROFILE

Newborn death rates are increasing

While under-5 mortality rates have slowly improved during the last few decades, newborn mortality rates have actually gotten worse. It now represents more than half of all under-5 child deaths in the country, and is characterized by wide socio-economic and geographic disparities. Major gaps have also been identified related to the implementation of essential interventions for improved care.

Trends in neonatal mortality by region



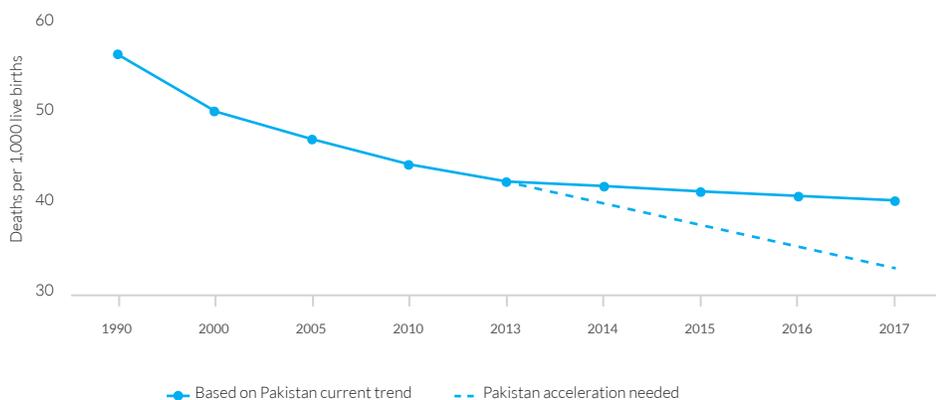
Data source: Pakistan Demographic and Health Survey 1990-91, 2006-07, 2012-13.





Faster progress is critical to reach the target for newborns

At the current rate, the country will not meet its national targets for 2017.

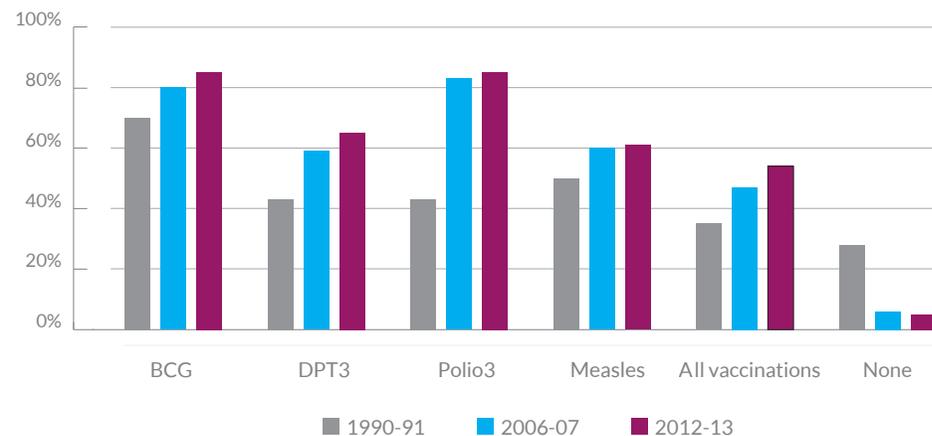


Data source: UNICEF analysis based on data from the United Nations Inter-agency Group for Child Mortality Estimation (UNIGME) 2014.

Routine immunization is improving but large disparities remain

Vaccination coverage has gradually increased from 35 percent in 1990 to 54 percent in 2012. It is encouraging that the percentage of children not receiving any of the six basic immunizations has decreased substantially since 1990, from 28 percent to 5 percent. Large disparities in vaccination coverage between and within provinces are noteworthy. For example, the coverage of fully immunized children in Punjab from 1990 to 2012 was 26 percent to 91 percent; Sindh was 5 percent to 75 percent; KPK was 0 percent to 77 percent and Balochistan was 0 percent to 60 percent.

National vaccination trends



Data source: Pakistan Demographic and Health Survey 1990-91, 2006-07, 2012-13.

ACCELERATING CHANGE IN PAKISTAN

IMPORTANT ACTIONS

A campaign to “Help Babies Breathe”

Recognizing the vital importance of the crucial one minute after birth, UNICEF supported the government to introduce and roll out the “Helping Babies Breathe” initiative across the country. More than 2,200 health care providers have been trained to provide life-saving skills such as breathing simulation, temperature support and assisted ventilation; to save mothers and newborns. It is expected that all skilled birth attendants will receive this training during the next two years.

Improved cord care saving thousands of lives

Umbilical cord infections can occur in all settings. However, they are more likely to occur in low-income countries and in settings where the majority of births are not attended by a skilled attendant³. This means that optimal cord care, using recommended amounts of chlorhexidine digluconate (CHX) at birth and in the first week of life can prevent life threatening infections.

In 2013, UNICEF initiated a national effort to introduce CHX for cord care in Pakistan. As a result of strong advocacy, a national strategy was developed to initiate local production, implementation and scale-up of CHX in Pakistan. To date, CHX is being used in three districts of Punjab, and three pharmaceutical manufacturers have applied for CHX registration.

A systematic approach to routine immunization

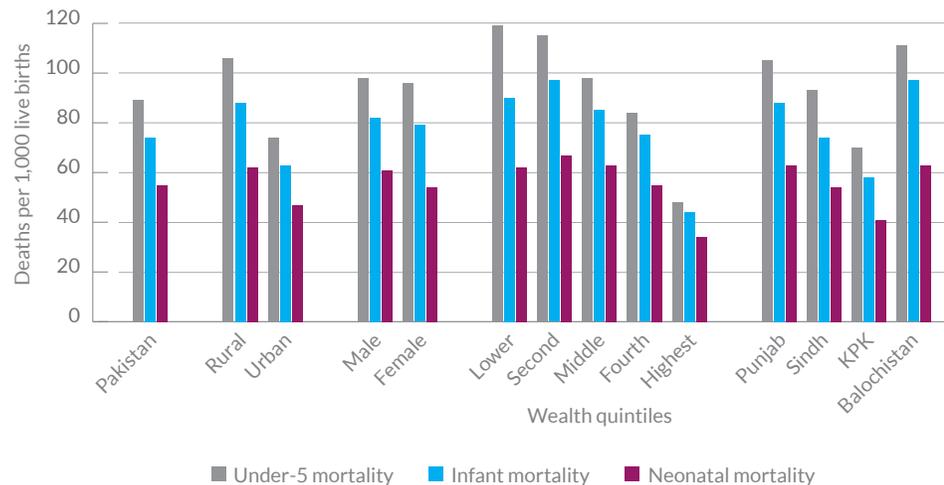
Following advocacy efforts by UNICEF, the Government of Pakistan is starting to implement the evidence-based “Reach Every District/ Reach Every Community” (RED/REC) approach to achieve the ambitious national immunization targets. The RED/REC approach, aggressively targeting hard-to-reach and neglected communities in 23 districts across four provinces, focuses on improved service delivery and reach, supportive supervision and strategic planning and monitoring. To date, approximately 7,015 health staff have been trained on the RED/REC approach.

EQUITY

Equity is central to UNICEF’s strategic support to the health sector in Pakistan, where socio-economic, gender, regional and urban/rural factors create wide disparities.

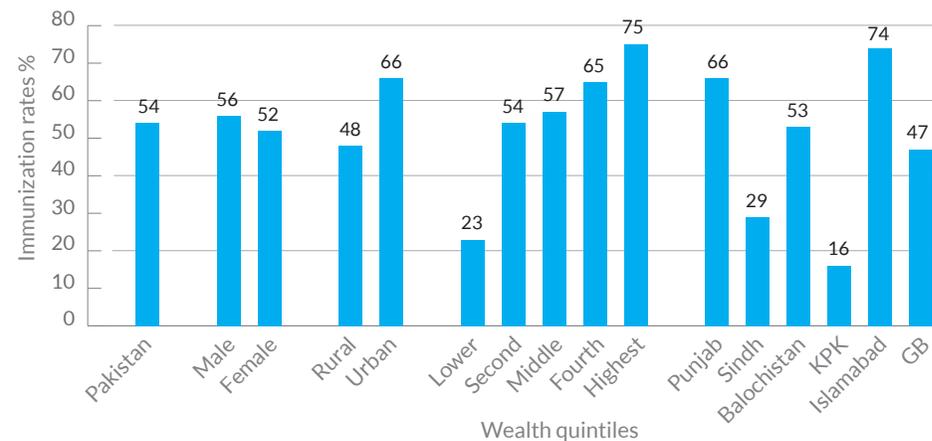
The role of social determinants in affecting maternal and child health in Pakistan cannot be underestimated. This is strongly influenced by socio-economic characteristics including place of residence, maternal education and household wealth index. In Pakistan, where an estimated 22.6 percent of the population still lives below the poverty line⁴, mortality rates in rural areas are still consistently higher than in urban areas.

Newborn, infant and under-5 child mortality rates



Data source: Pakistan Demographic and Health Survey 2012-13.

Poor, rural girls aged 12-23 months least likely to be fully immunized



Data source: Pakistan Demographic and Health Survey 2012-13.

LOOKING FORWARD

During 2015-2017, UNICEF’s focus will be to build on successes in both newborn care and routine immunization.

For newborns, UNICEF will align with international strategies and initiate and model the nine essential interventions for improved newborn care from the Global Every Newborn Action-Plan, working with the government to take these across the country.

To improve Pakistan’s weak immunization program, UNICEF will focus on the strategic objectives outlined in the national EPI Policy and the Comprehensive Multi-Year Plan for Routine Immunization.

CHALLENGES

Following national structural reforms in 2010, public health became a provincial responsibility. In these early stages, the system faces challenges such as security issues, impact of natural disasters, lack of strong policy direction, weak accountability structures, insufficient technical capacity, high turnover of staff at both federal and provincial levels, and inadequate financing (only 0.6 percent of GDP is currently dedicated to public health⁵). While the private health sector is growing more sophisticated, it is still unregulated.

The national immunization program also faces a multitude of systemic issues, ranging from

inconsistent levels of political commitment, limited communication channels for demand generation, and limited and poor utilization of finances, skilled staff and cold chain equipment. Identifying key bottlenecks for newborn care, especially amongst the most deprived, and recommending corrective strategies and developing a clear road-map for health programming is a difficult process, particularly for newborn health. These are currently being addressed with inclusive consultative meetings initiated by UNICEF and will be followed up with costed action plans and clear strategies to take successes to other areas in need.

RESEARCH, KNOWLEDGE, EVALUATION

Knowledge, Attitude, Practice and Behaviour Survey for Routine Immunization 2014 (National and Provincial) – a study to identify drivers of inequities and barriers to access and utilization of immunization services for improved immunization coverage and outcomes in Pakistan: In 2014, UNICEF supported the National Ministry of Health Services, Regulations and Coordination to implement this study. The key objectives of the study were to provide an evidence-base knowledge on the attitudes and practices of caregivers, community members, providers and program managers toward the provision of immunization services and the main barriers for service utilization. As it also sets the baseline for follow-up and tracking of progress, it is intended to become a reference document for policy makers in the planning of future interventions. The study identified seven barriers relating to both the supply and demand side of routine immunization in Pakistan. The study can be accessed at: www.unicef.org/pakistan/overview_9500.htm.

Community Empowerment through Community Action Process in Rajanpur District, Punjab – project assessment 2014: The Community Action Process (CAP) is a low-cost and sustainable means of supporting communities and empowering them to assess their needs and develop locally relevant solutions to issues, for example the health of mothers and children. In the Rajanpur District, an impoverished and remote district of Pakistan's Punjab Province, the CAP strategy was pioneered with UNICEF support between 2012 and 2014. The project assessment highlights changes in awareness and in health-seeking behaviour and practices. The assessment can be accessed at: www.unicef.org/pakistan/overview_9499.htm.

End of Project Evaluation of Norway-Pakistan Partnership Initiative (NPPI) 2014: The Norway-Pakistan Partnership Initiative (NPPI) was launched in 2009 to address urgent maternal and child health needs in the Sindh province of Pakistan. Undertaken jointly by the Government of Norway and UN agencies (UNICEF, WHO, UNFPA), the multi-pronged project was aimed at assisting Pakistan in meeting Millennium Development Goals 4 (Reduce child mortality) and 5 (Improve maternal health).

The NPPI was completed in mid-2014. This evaluation report evaluates the relevance, effectiveness, efficiency and sustainability of the project's key interventions. The evaluation can be accessed at: <https://icon.unicef.org/apps02/cop/edb/Lists/Evaluation%20Reports/Attachments/6124/NPPI%20end%20of%20project%20evaluation.pdf>.

REAL LIVES, REAL CHANGE

Bringing health care to communities



When 25-year-old Arbeli went into labour with her sixth child, she knew something was wrong.

"I have always preferred our community's *dai* – a traditional birth attendant – to help me deliver my children as it saved me the cost of travelling to the big hospital in Larkana. But this time she was unable to handle my case and sent me to Larkana District Hospital, as I was experiencing terrible pain," she said. "There, the doctors examined and informed me that I could go to Taluka Headquarter hospital in Dokri and save money too."

The Dokri hospital is one of 22 health care facilities in Larkana and Shaheed Benazirabad that have been upgraded to provide 24/7 basic and comprehensive emergency obstetric care. These upgrades, made possible under the Norway-Pakistan Partnership Initiative, were supported by UNICEF and utilized an innovative contracting model.

"In the past, there used to be only one doctor, who was usually unavailable. Now with additional staff and equipment, we have a huge number of patients coming in at all times," says Dr. Zahida, Medical Officer at Dokri Hospital. "We all work together here and all the doctors and health staff are only a call away."

For women like Arbeli and their children, these professional health services are potentially life-saving.

"I came here to Dokri hospital three days ago and delivered a healthy baby boy yesterday," said Arbeli with a content smile on her face and looking lovingly down at her son.

Endnotes

- ¹ United Nations Children's Fund 2015, "State of the World Children 2015: Reimagine the future Innovation for every child", <<http://sowc2015.unicef.org/>>, accessed July 2015.
- ² Islamic Republic of Pakistan, "Comprehensive Multi-year Plan 2014-2018", Immunization Programme of Pakistan, <<http://epi.gov.pk/wp-content/uploads/2014/09/National-cMYP.pdf>>, accessed July 2015.
- ³ Capurro, H. 2004, "Topical umbilical cord care at birth", World Health Organization, <http://apps.who.int/rhl/newborn/cd001057_capurroh_com/en/>, accessed July 2015.
- ⁴ United Nations Development Programme 2011, "Human Development Report 2011, Sustainability and Equity: A Better Future for All", <www.undp.org/content/dam/undp/library/corporate/HDR/2011%20Global%20HDR/English/HDR_2011_EN_Complete.pdf>, accessed July 2015.
- ⁵ World Bank, "World Development Indicators 2010", <<http://data.worldbank.org/sites/default/files/wdi-final.pdf>>, accessed July 2015.

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Islamic Republic of Pakistan, "Pakistan Social and Living Standards Measurement 2007-08", Pakistan Bureau of Statistics.

The maps in this publication are stylized and not to scale. They do not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The dotted line between Jammu and Kashmir represents approximately the Line of Control agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the Parties.

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