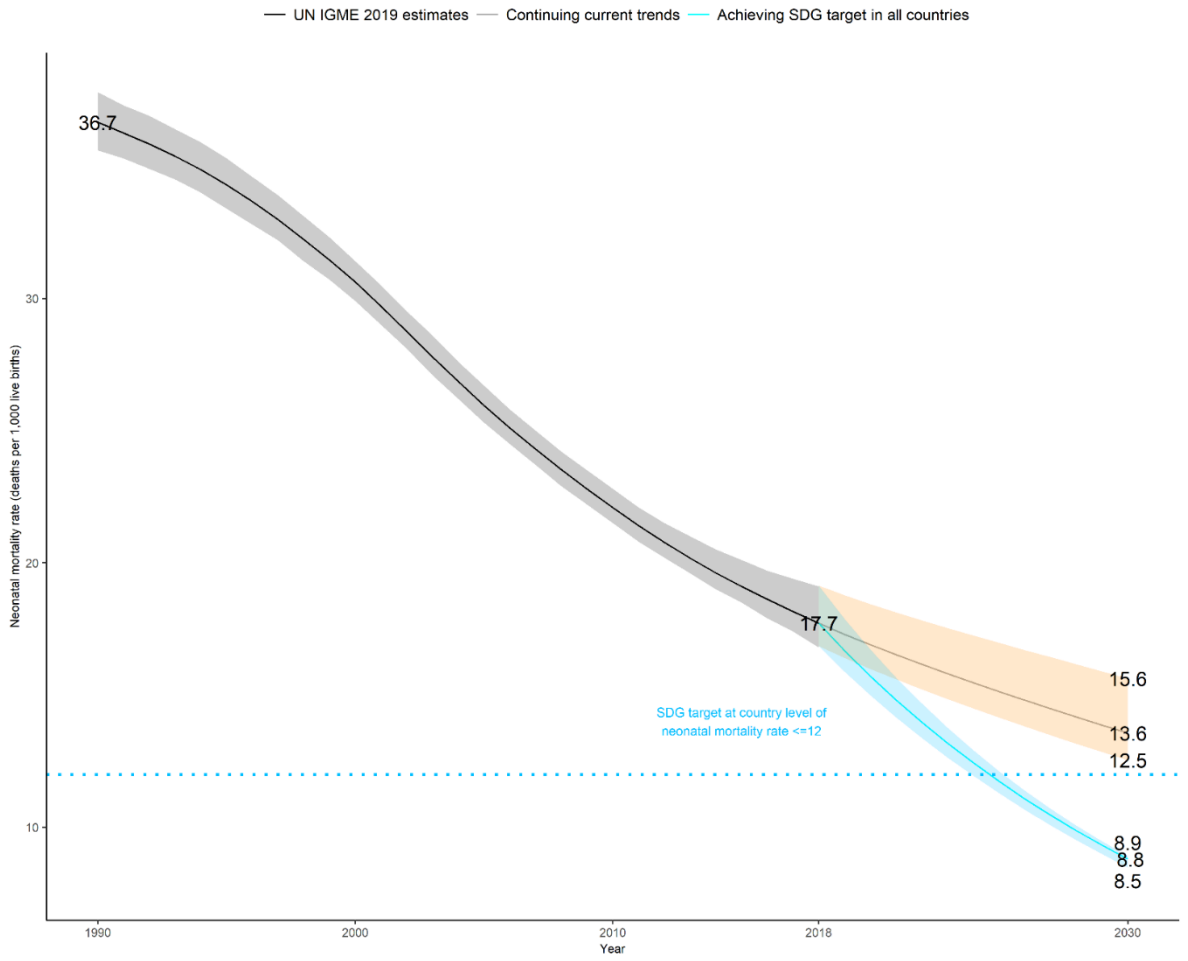
Progress in neonatal survival and need for acceleration to reach SDG



Source: UN- Interagency Group for Global Child Mortality Estimation (UN IGME), Levels & Trends in Child Mortality: Report 2019

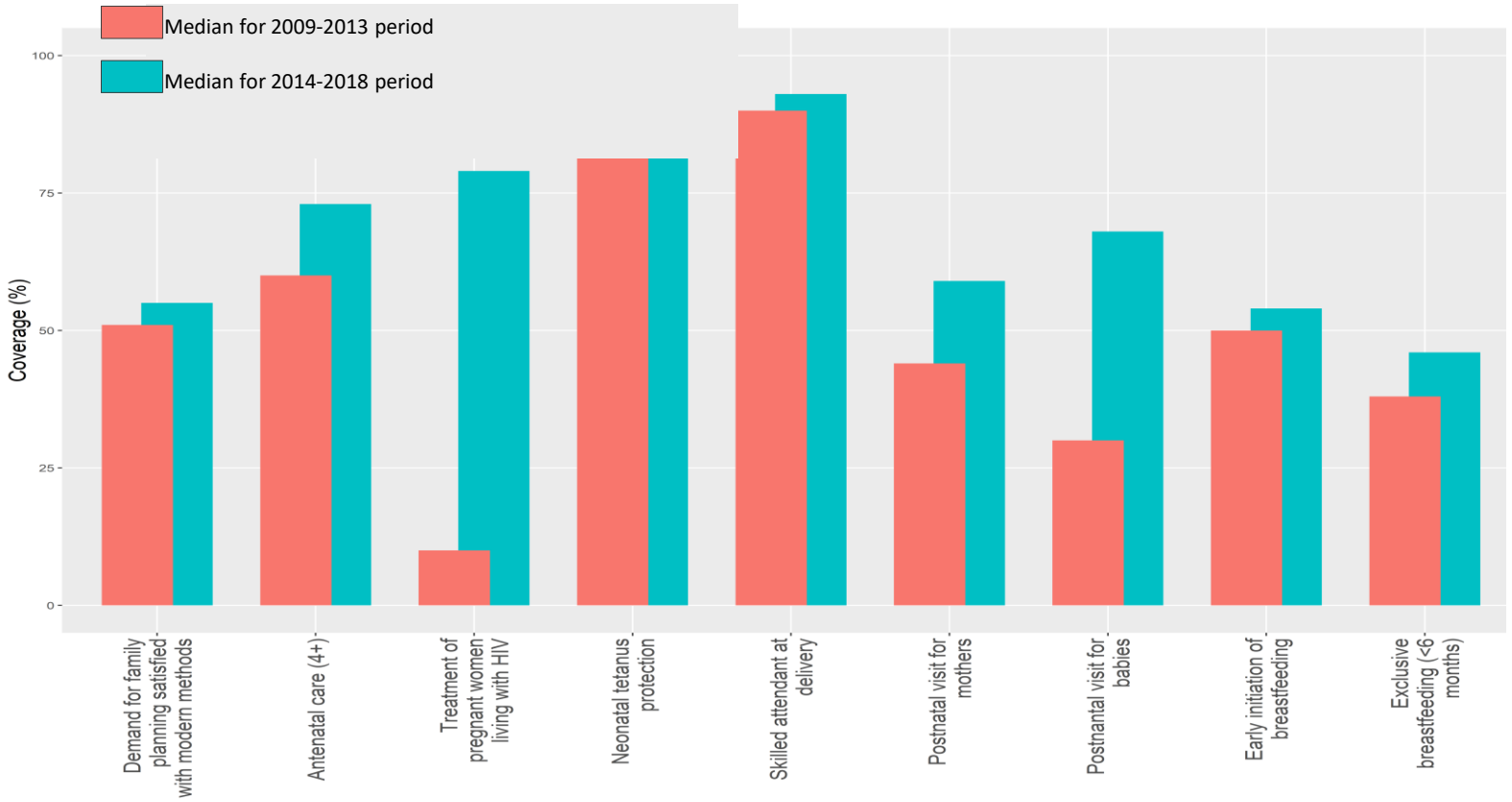
Newborn deaths accounted for nearly 50% of the 5.3 million under-5 deaths globally in 2018

2.5 million newborns died, around 7000 per day

One-third of these deaths occurred on the first day of life; three quarters in the first week

What will be the impact of COVID on this progress?

Improving coverage and quality of care is critical for neonatal survival and health



Median national coverage of select interventions, 2009-2013 and 2014-2018

What will the impact of COVID be on the already sub-optimal coverage and quality of health care?

Current efforts: measuring and modeling

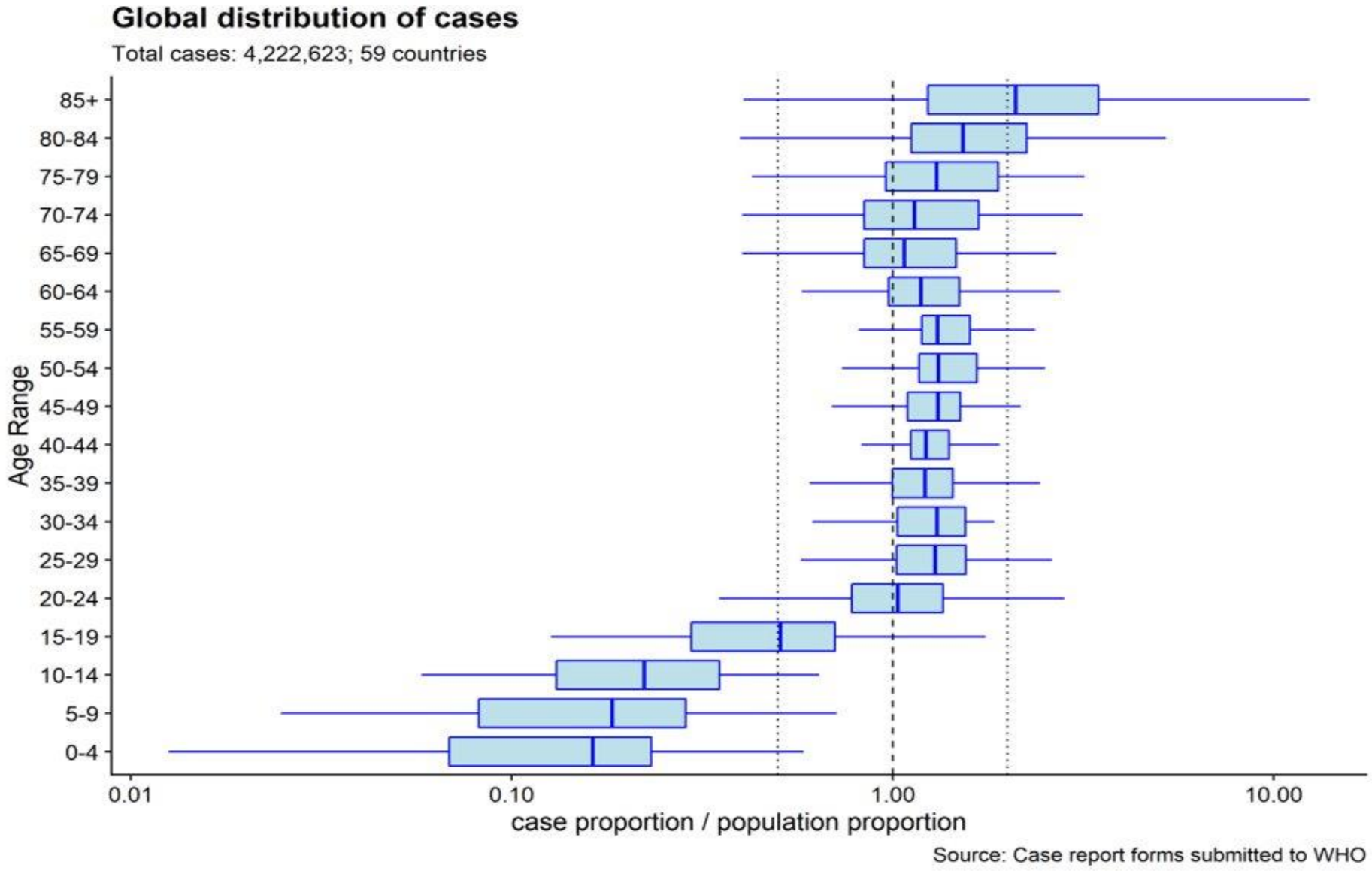
- Country reports received & analyzed by WHO: situation reports, dashboard
- Rapid surveys by WHO and UNICEF on disruption of services
- Modeling: indirect effect of COVID-19 on MNCH using the LiST by JHSPH; simulations of Covid-19 risk in different scenarios by IDM
- Developing risk/benefit models based on LiST (WHO, UNICEF, UNFPA) Research: cohort studies, clinical characterization studies
- Tracking public health & social measures

➢ At the same time we need to strengthen measurement of newborn indicators in line with ENAP milestones

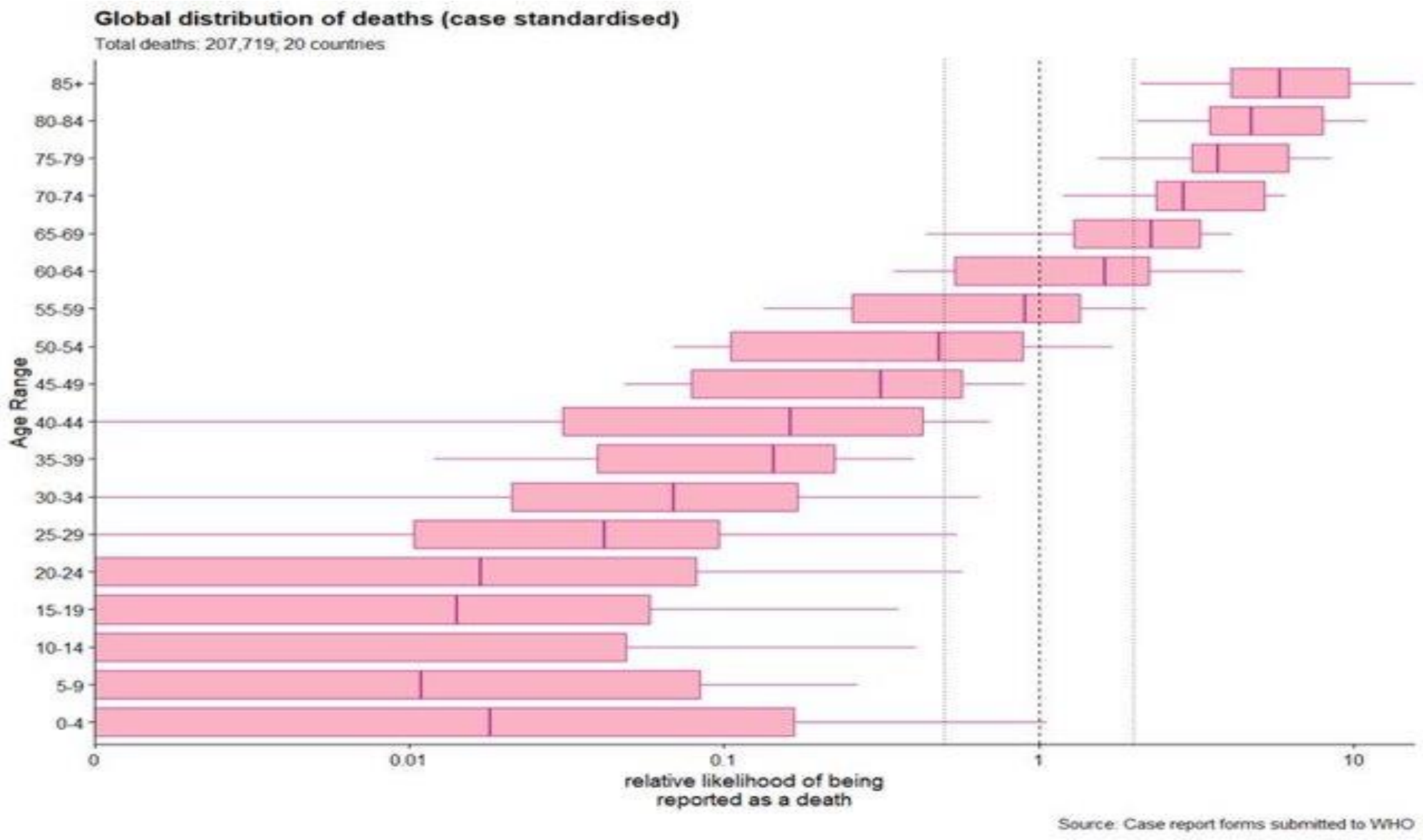
Global distribution of cases
Total cases: 4,222,623

Case report forms: Cases

Age group	Median case proportion
0-4	0.162
5-9	0.180
10-14	0.210
15-19	0.485
20-24	1.032
25-29	1.296
30-34	1.310
35-39	1.217
40-44	1.223
45-49	1.316
50-54	1.320
55-59	1.299
60-64	1.186
65-69	1.073
70-74	1.171
75-79	1.271
80-84	1.505
85+	2.035



Global distribution of deaths (case standardised)
Total deaths: 207 719; Total cases of countries with deaths 3 613 085



Model indirect impact of COVID-19 on maternal and newborn health

- The full impact of COVID-19 on maternal and newborn health is uncertain
- The COVID-19 response is already impacting availability, accessibility and quality of health services for pregnant women and newborns
  - For 132 countries 10% decline in service coverage of essential pregnancy and newborn care could cause related 28,000 additional maternal deaths and 168,000 additional newborn deaths*
  - For 118 LMICs in the least severe scenario (coverage reductions of 9·8–18·5% and wasting increase of 10%) over 6 months would result in 253 500 additional child deaths and 12 200 additional maternal deaths.**

**https://www.guttmacher.org/journals/ipsrh/2020/04/estimates-potential-impact-covid-19-pandemic-sexual-and-reproductive-health*
***https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(20)30229-1/fulltext Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study*

What do we know so far (based on key informant responses MOH)

Survey	*Number of countries*	*Time Period*	*Family Planning Services*	*Antenatal care*	*Health facility deliveries or obstetric care*	*Essential Newborn Care*	Post natal visit
*WHO Essential Services**	*99*	*May-June 2020*	*65% partial or full disruption*	*56% partial or full disruption*	*33% partial or full disruption facility deliveries*	*NA*	NA
*UNICEF Situation tracking***	*85*	*May to June 2020*	*47% any drop (19% >25% drop)*	*53% any drop (16% ≥25% drop)*	*39% any drop (16% >25% drop) obstetric care*	*38% any drop (19% >25% drop)*	52% any drop (19% >25% drop

**These are preliminary findings from WHO Covid19 Essential Health Services Survey that is still ongoing*

*** https://data.unicef.org/resources/rapid-situation-tracking-covid-19-socioeconomic-impacts-data-viz/*

Need of real time data to understand COVID-19 impact

- Indirect effects of Covid pandemic include health, wellbeing, mental health, neurodevelopment, nutrition, social, economic
- Currently major public health decisions about implementation of essential health services are based on rapid surveys, estimates and models
- Governments and partners are lacking real time data and have no high quality primary research data on the impact of the SARS-CoV-2 on basic essential MCH services
- LMICs don’t have strong monitoring systems for newborn care, adding measurement challenges

Pregnancy, newborn and child cohort studies

- What are the effect of the Covid-19 infection in pregnant women on maternal, fetal and neonatal outcomes
- What is the clinical characterization and management in different age groups
- What are the effects of the Covid-19 pandemic on coverage and quality of essential health services
  - Using data from population based research cohort studies

Benefits beyond health services

- Harmonized data from these cohort studies provide a unique opportunity
  - High quality information
  - Share immediately with national governments and care providers
  - Provide real time real data for planning and implementation of MCH services
- Use to monitor the impact of Covid-19 pandemic on services for mothers and children

"The impacts of COVID-19 are exacerbated for women"

"Children are not the face of this pandemic but they risk being among its biggest victims"

UN Secretary General's policy briefs Apr 2020