Can We Transform Maternal, Adolescent and Child Health within a Generation?

Closing Remarks
Duke MACH Symposium, Sept 28, 2015, 4-4.30pm

Gavin Yamey, MD MPH
Professor of the Practice of Global Health & Public Policy
“When women and children thrive, families and communities prosper”

Provost Sally Kornbluth
Recent progress

Opportunities for transformation by 2035

Threats
Advancing social and economic development by investing in women’s and children’s health: a new Global Investment Framework

Global health 2035: a world converging within a generation

Next generation maternal health: external shocks and health system innovations
Recent progress

Opportunities for transformation by 2035

Threats
Female life expectancy at birth for select countries compared to the frontier
The frontier line indicates female life expectancy in the best-performing country in that year, which has been Japan for the past 20 years.
Mortality Decline Was Faster in Women than Men in Most Countries

Annual rates of decrease in adult mortality by sex and income group, 1992-2012
2015-2035: Three Domains of Global Health Challenges

- High rates of avertable infectious, child, and maternal deaths: Unfinished agenda
- Demographic transition and shift in GBD towards NCDs and injuries: Emerging agenda
- Impoverishing medical expenses: Cost agenda
Recent progress

Opportunities for transformation by 2035

Threats
Recent progress

Opportunities for transformation by 2035

Threats
Opportunities for Transformation

- High rates of avertable infectious, child, and maternal deaths
- Demographic transition and shift in GBD towards NCDs and injuries
- Impoverishing medical expenses

Unfinished agenda
Emerging agenda
Cost agenda
“Bill and Melinda Gates’ big bets on women and children in the next 15 years: the number of child deaths will be cut in half again, the number of women dying in childbirth will be reduced by two thirds”
Two Centuries of Divergence, Then Some LICs Converged

Under-five mortality, China and Sweden, 1751-2008

Year
5q0 per 1,000 live births
Sweden
China
Gap between China and Sweden
Now on Cusp of a Historical Achievement: Nearly All Countries Could Converge by 2035
Strategy 1: Aggressive Scale-Up of Today’s Tools

- **MACH**, including family planning, pregnancy-related interventions, safe abortion and complications, and maternal nutrition
- HIV
- malaria
- tuberculosis
- neglected tropical diseases

Global Investment Framework for Women's & Children's Health
# Modeled Scale-Up of Maternal & Newborn Health Interventions Based on “Best Performer”

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Baseline</th>
<th>2035</th>
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<tbody>
<tr>
<td>Syphilis screening in pregnancy</td>
<td>62%</td>
<td>100%</td>
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<tr>
<td>Micronutrient supplementation</td>
<td>39%</td>
<td>95%</td>
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<tr>
<td>Skilled birth assistance</td>
<td>65%</td>
<td>99%</td>
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<tr>
<td>Kangaroo mother care</td>
<td>10%</td>
<td>95%</td>
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</table>
Family Planning Must Be an Early Priority

If all 225 million women with unmet need used modern methods, each year there would be:

- **52 million fewer unintended pregnancies**
- **24 million fewer abortions** (15 million of which would be unsafe)
- **600,000 fewer stillbirths**
- **6 million fewer miscarriages**
- **21 million fewer unplanned births**

#AddInItUp | Guttmacher.org
Let's Not Be Squeamish About Family Planning's Fiscal Benefits
Family Planning: Profound Economic Effects

“Women who are able to plan their births are better able to complete their education, participate more fully in the workforce, have increased productivity and earnings and enjoy higher household savings and assets”
Demographic Dividend: Delicate Balance

“I think more policy makers need to know this”

“sell the investments but be clear about the rights-based approach”

Tricia Petruney, FHI360

Ann Starrs, Guttmacher
Emerging Evidence to Support Scale-Up of Integrated Interventions

- Improving family processes (roles and dynamics) and strengthening family support can improve outcomes
- Family planning can feasibly be integrated into other health and non-health programs (e.g. food, microfinance)
- Integration of home based care and OVC services can work: needs leadership, organizational support
- Monitor and measure whether integration is working
Strategy 2: Strengthen Health Delivery Systems

Photo: GAVI, the Vaccine Alliance
ACHIEVING GRAND CONVERGENCE

- Leadership
  - Political will
- Use data and evidence
- Domestic investment
- Link community & facility care
- Hands-on skills, based training; problem-solving
- Bring life-saving technologies closer to community

Components:
- Governance
- Information
- Financing
- Service delivery
- Human resources
- Medicines and technologies

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ACHIEVING GRAND CONVERGENCE

Must Address Supply and Demand Side Systems Barriers

**Supply**
- cost, distance
- quality of care

**Demand**
- no female provider
- not the social norm
“We have to work on both supply and demand, at both community and facility and policy levels; we have to address underlying socio-behavioral determinants – it takes a “village” to drive increase in coverage of effective interventions and to measure progress at facility and community levels.”
Need a Systems Approach to Generate Impact

Enabling Environment  
Supply-side  
Demand-side

1. Efficacious and effective tools and practices designed for scale

2. Packages: Pre-conception Antenatal Intrapartum Post-natal

3. Data and evidence for decision-making and accountability

Evidence-based policies at the global, national and sub-national levels

Quality care provided to mothers and newborns

Healthy practices in the home and community

PHC system resourced and managed for performance (commodities, HR, etc.)
Strategy 3: Develop Tomorrow’s Tools

The IC2030 Report
Reimagining global health
30 high-impact innovations to save lives

Impact
Innovation Countdown 2030
Strategy 3: Develop Tomorrow’s Tools

**Devices**

Uterine balloon tamponade

Low-cost kit to manage postpartum hemorrhage

Postpartum hemorrhage is a leading cause of maternal death. When first-line treatments such as oxytocin don’t control bleeding, one option is to insert a balloon tamponade into the uterus. Health care professionals in wealthy countries have used uterine balloon tamponades for years, but cost and lack of access to...
Social Innovations and Technologies

- Innovations need to be driven and developed with the user in mind (human-centered design), otherwise they won’t be used
- Never innovative in a vacuum
- Think about how the innovation will fit into the broader, integrated delivery system
- Task shifting and “boring technology” (existing components) can strengthen processes to bring tools to scale
- CHWs and other cadres of workers could be the bridge between technology and communities
Opportunities for Transformation

- High rates of avertable infectious, child, and maternal deaths
  - Unfinished agenda

- Demographic transition and shift in GBD towards NCDs and injuries
  - Emerging agenda

- Impoverishing medical expenses
  - Cost agenda
IT'S NOT JUST A MAN'S DISEASE

NCDs Are Not Just Diseases of Men
Globalization and Feminization of Tobacco

“The prevalence of female smoking in developed and developing countries is likely to rise to 20% by 2025. This would mean that by 2025 there could be 532 million women smokers.”
Single Greatest Opportunity To Curb NCDs is Tobacco Taxation

50% rise in tobacco price from tax increases in China

- prevents 20 million deaths + generates extra $20 billion/y in next 50 y
- largest share of life-years gained is in bottom income quintile
All Countries Can Deliver “Best Buy” Clinical Packages

**Clinic platform**
- Basic cardiovascular package
- Basic pulmonary package
- Basic mental health and neurological package
- Basic cancer package

**Hospital platform**
- Basic injury and surgical package

**Early phase**
- Expanded cardiovascular package

**Later phases**
- Expanded cardiovascular package
- Expanded cancer package
All Countries Can Deliver “Best Buy” Clinical Packages

**Clinic platform**
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- Basic pulmonary package
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**Early phase**

**Later phases**

**Hospital platform**
- Basic injury and surgical package
- Expanded cardiovascular package
- Expanded cancer package
“Best Buy” Package for Mental Health

- epilepsy drugs; antidepressants & brief psychotherapy; antipsychotics, lithium, and psychosocial support
- Cost of $3-4 per head of population in SSA and SE Asia
- Feasible to deliver in primary care

Data from Dan Chisholm and Vikram Patel
Global Mental Health for MACH

Policy Forum

Achieving the Millennium Development Goals: Does Mental Health Play a Role?

J. Jaime Miranda, Vikram Patel*
Global Mental Health for MACH

- Mental health services can be integrated with MACH services (evidence is “promising”), but requires HSS
- Digital platforms and apps will be the key to scaling mental health interventions (iPads, GoPro)
- Early childhood development is key
- Community health workers can deliver culturally appropriate therapy based on CBT (challenges: effects fade, human resource and training challenges)
- Principles: Simplify interventions, emphasize social relationships/identity, address religious concepts, and tailor to clinical settings/opportunities
A Second Kind of Demographic Transition: Surge in Proportion of Adolescents

- Children in LMICs: increasingly surviving risks of childhood illness
- Vulnerable to range of infections, NCDs, mental health conditions, violence, injuries
- Adolescents may account for one third of population
- Can they be reached with HPV vaccination, SRH services, NCD risk intervention?
On Accountability, We Are Failing Adolescents

“The global community does not monitor adolescent health”
Adolescents: Peak of Vulnerability

- Delaying onset of marriage and keeping girls in school are protective: interventions are under evaluation
  - Individual behavior
  - PrEP
  - CCTs
  - Intervening with men
- Empowerment programs: mixed results
- Adolescents have rights to SRH services
- Entrenched policies may not be evidence-based (e.g. institutions for OVCs)
Opportunities for Transformation

High rates of avertable infectious, child, and maternal deaths

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“Pro-poor” Pathway to Universal Health Coverage (blue shading)
Recent progress

Opportunities for transformation by 2035

Threats
Recent progress

Opportunities for transformation by 2035

Threats
Financing
Focus
Fragmentation
The “Persisting Plateau” in Health Aid

Total DAH, 2000-2014, observed versus potential

Figure from Financing Global Health 2014, IHME
SMART, SCALED AND SUSTAINABLE FINANCING DESIGNED TO ACHIEVE AND MEASURE RESULTS

The GFF is a new era in development—a breakthrough financing model that unites resources from countries themselves, international donors and the private sector to accelerate advancements in the health of women and children.

SMART
Smart financing ensures that evidence-based interventions—whether clinical and preventive, health systems strengthening or multi-sectoral—are prioritized and delivered in an efficient, results-focused manner.

SCALED
Scaled financing entails mobilizing the additional resources necessary to finance fully the RMNCAH agenda from domestic, international, public and private sources.

SUSTAINABLE
Sustainable financing secures universal access to essential services for every mother and every child by capturing the benefits of economic growth and addressing the challenges of transitioning from low- to middle-income status.
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<th>1. Financing</th>
<th>2. Focus</th>
<th>3. Fragmentation</th>
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<td><strong>The MDGs: Simplicity &amp; Clarity</strong></td>
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The 8 Millennium Development Goals:

1. **Eradicate Extreme Poverty and Hunger**
2. **Achieve Universal Primary Education**
3. **Promote Gender Equality and Empower Women**
4. **Reduce Child Mortality**
5. **Improve Maternal Health**
6. **Combat HIV/AIDS, Malaria and Other Diseases**
7. **Ensure Environmental Sustainability**
8. **Global Partnership for Development**
The 17 SDGs: Complexity and a Lack of Focus

1. Financing
2. Focus
3. Fragmentation

Where’s Waldo Health?
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<tr>
<td>Fragmentation &amp; Duplication</td>
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- **FP 2020**: Family Planning 2020
- **The Partnership**: for Maternal, Newborn & Child Health
- **Global Strategy for Women’s and Children’s Health**: UN Secretary-General Ban Ki-moon
- **Every Woman Every Child**: The White Ribbon Alliance
- **WOMEN DELIVER**: Invest in Girls and Women - It Pays

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**Duke Global Health Institute**
“The Lancet Commission’s optimistic report on investing in health confirms my view that the best times for public health are ahead of us.”
Thank You

Sara Fewer, CIH Secretariat

Diana Harvey, DGHI
Melissa Lehman, DGHI
Thank You

Michael Merson, Sally Kornbluth

Ann Starrs, Mariam Claeson

Panelists

Sponsors
Extra Very Special Thanks

Kate Whetten, CHIPR

Alisa Barrett, CHIPR
Maternal, Adolescent and Child Health

Maternal, adolescent and child health is an emerging and critical field. Every day 800 women die from preventable causes related to pregnancy and childbirth, 2.9 million newborns die within their first month, and an additional 2.6 million are stillborn. (cit.)

Increasing numbers of adolescents around the globe are living on the street, are abused and neglected, are engaging in high risk behaviors, and suffer from physical and mental health needs. Many prematurely die due to accidents, suicide, violence, pregnancy related complications and other illnesses. (cit.)

DGHI seeks to improve mental and physical well-being of women, adolescents, and children through collaborative research across diverse disciplines, including engineering, economics, environmental sciences, biology, medicine, public health, psychology, law and public policy.

http://dghimach.com