

Survival...



Santé pour tous: Condition nécessaire à la sécurité humaine?

Journées annuelles de santé
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Plan

- La question
- Progrès récents et défis en santé mondiale
- Les objectifs de la Session spéciale des Nations Unies pour les enfants
- Comment atteindre ces objectifs?
- Que pouvons-nous faire?



La santé de base pour tous est-elle une condition nécessaire à la sécurité humaine?

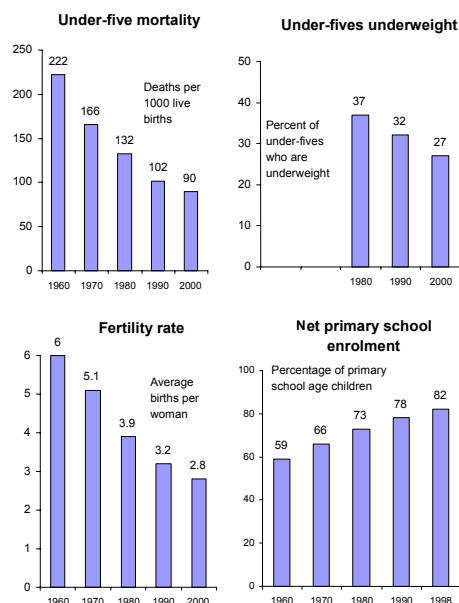
Différentes phases en santé mondiale:

- L'altruisme
- La solidarité humaine: les Nations Unies
- La mondialisation, les microbes n'ont pas de frontières: la notion de "health security"
- De "health security" à "human security"?



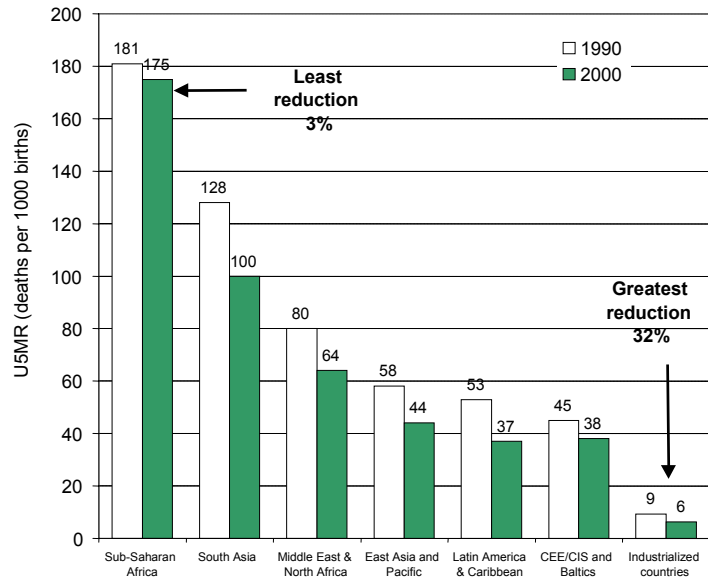
Progrès récents en santé mondiale

- Réduction de 14% du taux de mortalité en bas de l'âge de 5 ans (U5MR) de 1990 à 2000



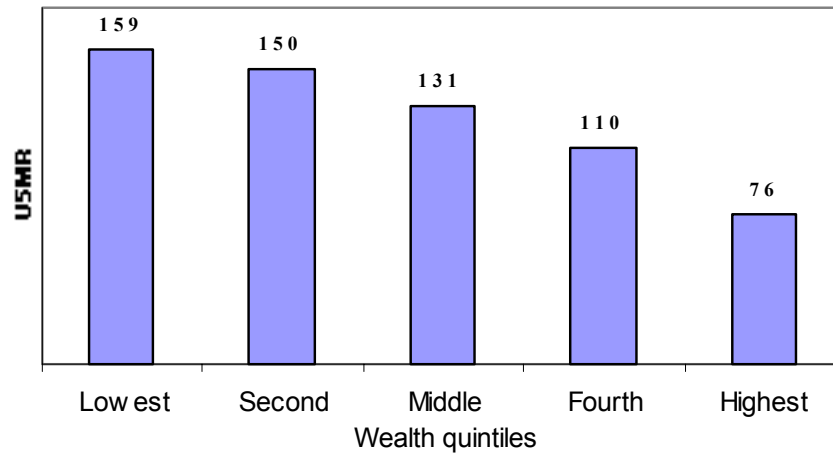
Source: UNICEF, ACC/SCN, UNDP and UNESCO. Refers to developing countries.

Under-five mortality rate, change over period 1990-2000



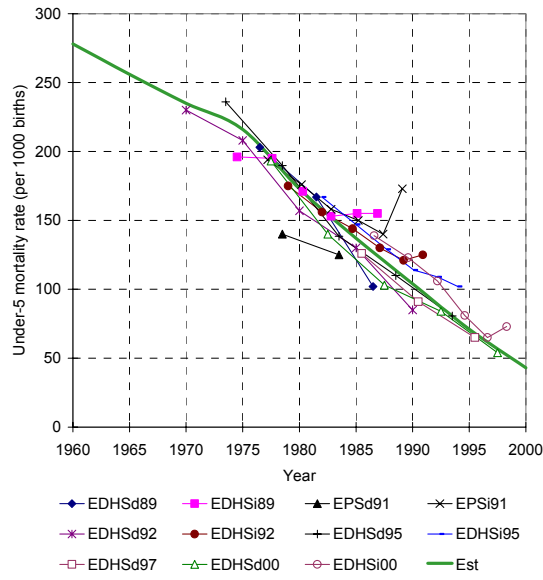
Source: UNICEF, 2001

U5MR disparity by asset quintile



Source: UNICEF, weighted average of 43 countries, based on DHS data, mid-1990s.

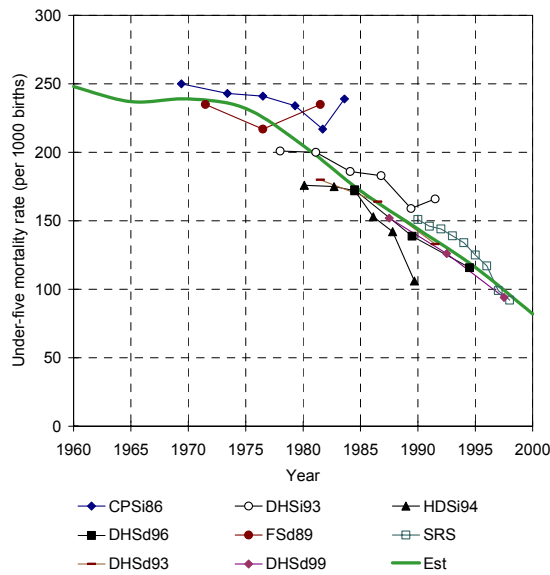
EGYPT - UNDER-FIVE MORTALITY



**Egypt
U5MR**

4

BANGLADESH - UNDER-FIVE MORTALITY



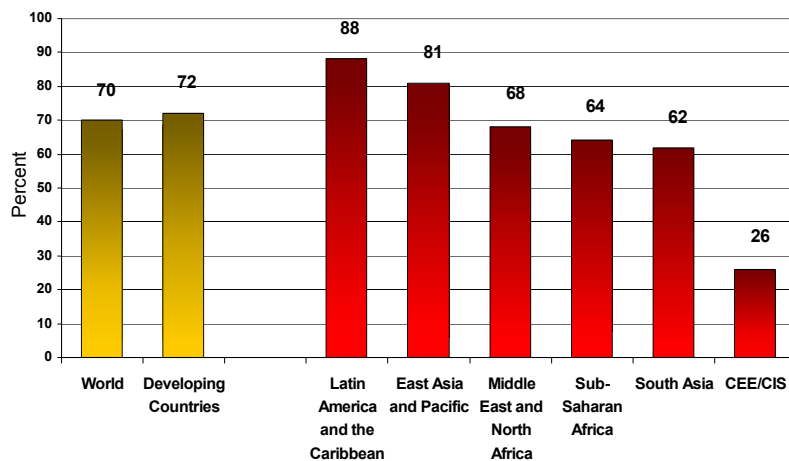
**Bangladesh
U5MR**

Progrès récents en santé mondiale

- Réduction de 14% du taux de mortalité en bas de l'âge de 5 ans (U5MR) de 1990 à 2000
- Réduction des 2/3 de la carence en iode grâce au sel iodé



Levels of iodized salt consumption, 1995-2000



Source: UNICEF

Progrès récents en santé mondiale ...

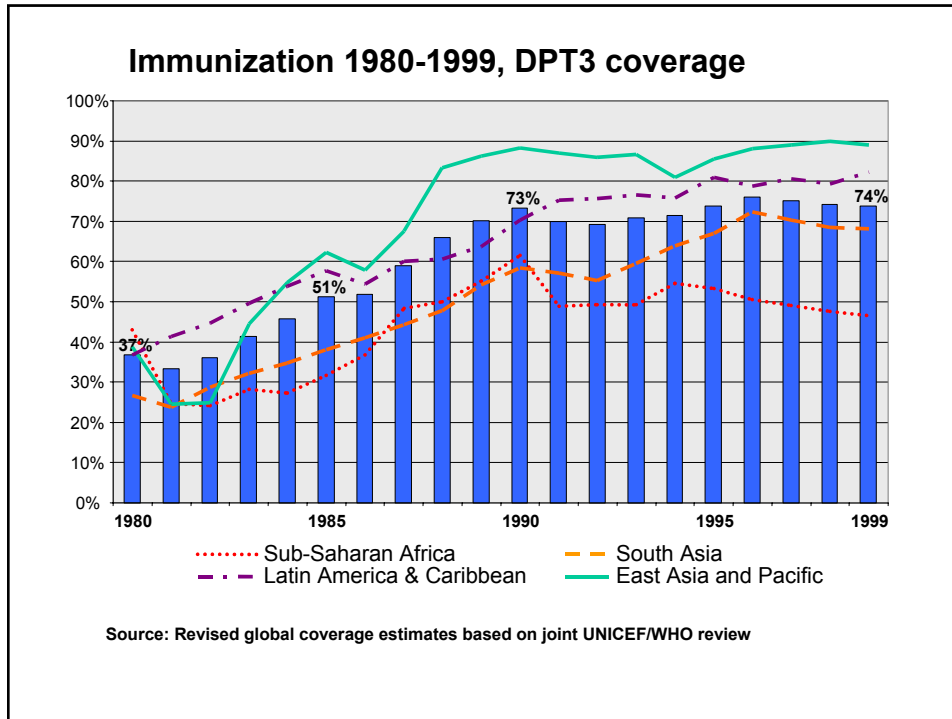
- Réduction de 14% du taux de mortalité en bas de l'âge de 5 ans (U5MR) de 1990 à 2000
- Réduction des 2/3 de la carence en iode grâce au sel iodé
- Éradication de la polio: réduction de 99% des cas de polio: de 350 000 en 1988 à 3500 en 2000, seulement 10 pays cet année; interruption probable de la transmission en 2003



Progrès récents en santé mondiale ...

- Taux d'immunisation stables à environ 70% durant les années 1990 mais taux inférieurs à 50% dans plusieurs pays d'Afrique, en particulier l'Afrique francophone

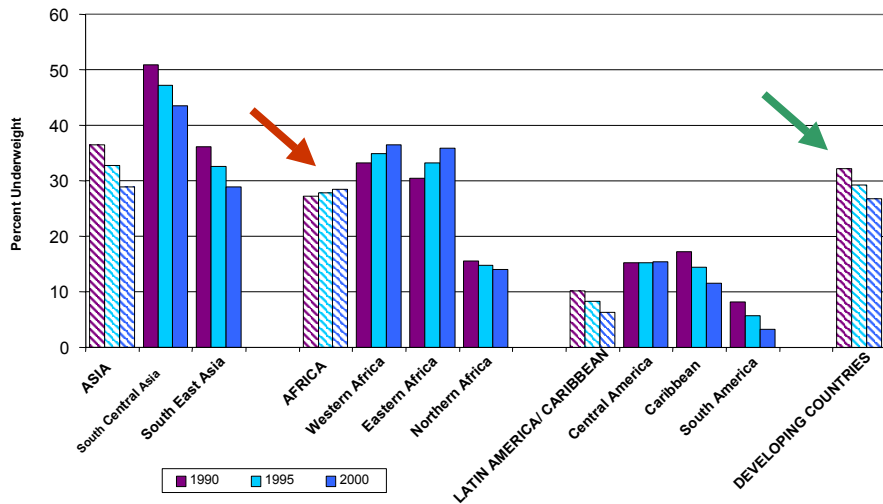




Progrès récents et défis en santé mondiale ...

- Taux d'immunisation stables à environ 70% durant les années 1990 mais taux inférieurs à 50% dans plusieurs pays d'Afrique, en particulier l'Afrique francophone
- Progrès majeur en planning familial: environ 2 couples sur trois pratiquent une forme moderne de contraception

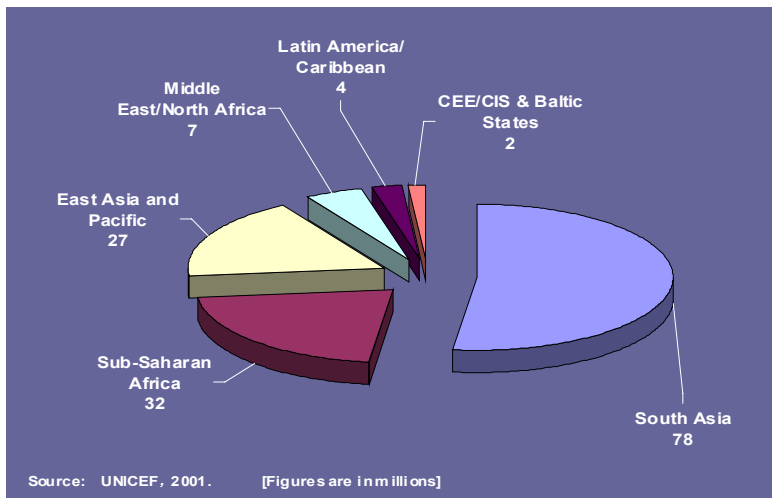
Trends in child malnutrition: developing countries, 1990-20



Source: ACC/SCN, 2000

150 MILLION CHILDREN IN DEVELOPING COUNTRIES ARE STILL MALNOURISHED*

More than half of underweight children live in South Asia

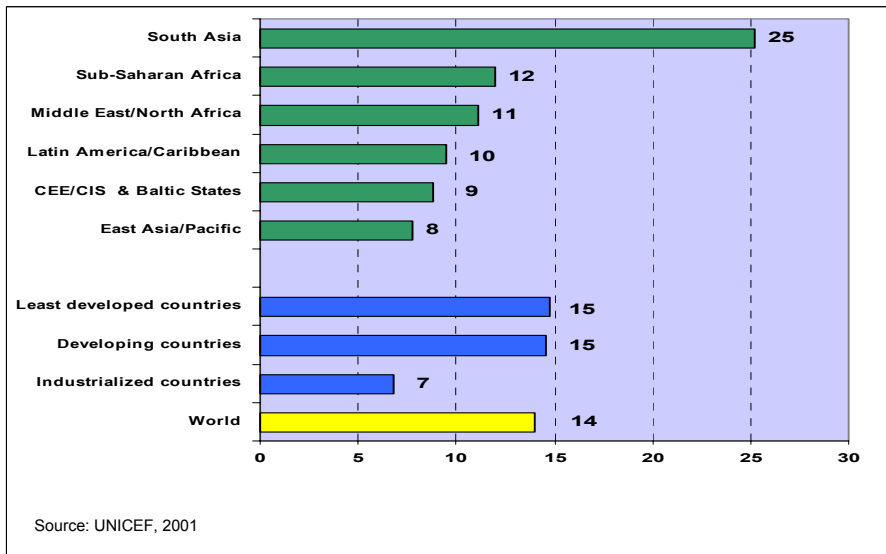


Source: UNICEF, 2001. [Figures are in millions]

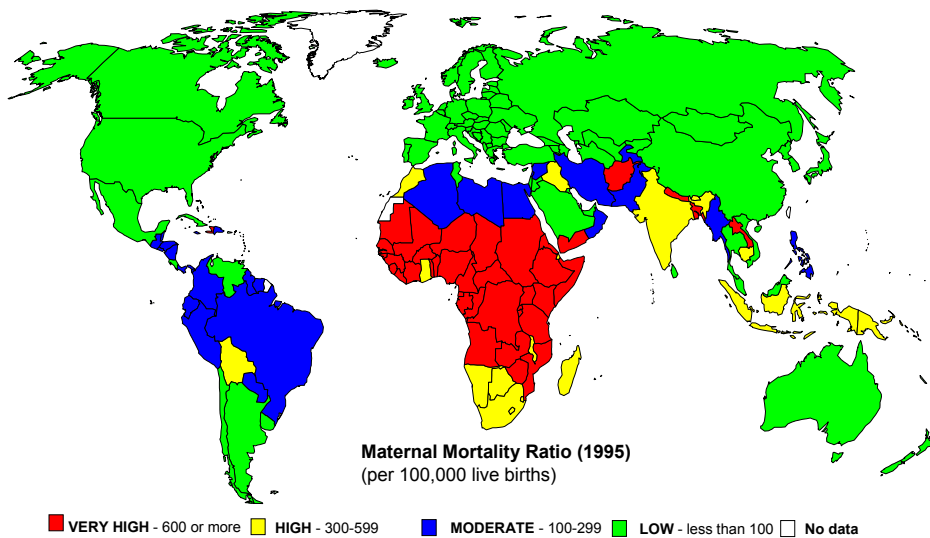
* Percent of children under five who are underweight.

LOW BIRTHWEIGHT RATE

One quarter of births in South Asia weigh less than 2500 grams



RISKING DEATH TO GIVE LIFE



Source: WHO, UNICEF, UNFPA, *Maternal Mortality in 1995: Estimates developed by WHO, UNICEF, UNFPA*. Geneva, 2001

1 in 13 RISK OF DEATH

A woman born in Sub-Saharan Africa faces a 1 in 13 chance of dying in childbirth. The risk for women born in industrialized countries is 1 in 4085.

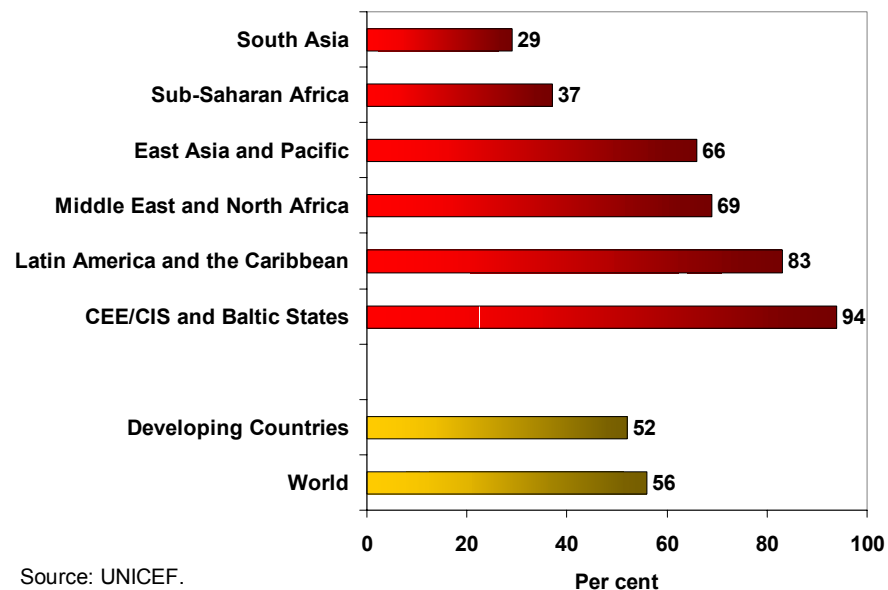
Region	Lifetime risk of dying in pregnancy or childbirth*
Sub-Saharan Africa	1 in 13
South Asia	1 in 55
Middle East/North Africa	1 in 55
Latin America/Caribbean	1 in 160
East Asia/Pacific	1 in 280
CEE/CIS and Baltic States	1 in 800
Least developed countries	1 in 16
Developing countries	1 in 60
Industrialized countries	1 in 4,100
World	1 in 75

* Affected not only by maternal mortality rates but also by the number of births per woman.

Source: *Maternal mortality in 1995: Estimates developed by WHO, UNICEF and UNFPA, Geneva, 2001.*



Skilled attendants at delivery, 1995-20

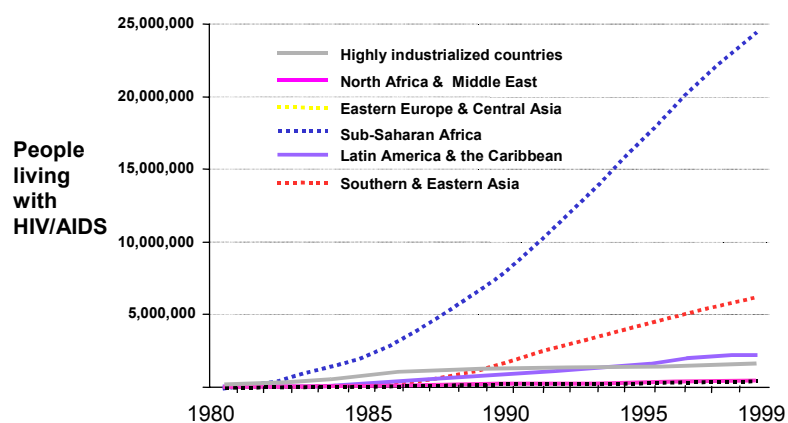


Le grand défi: le VIH

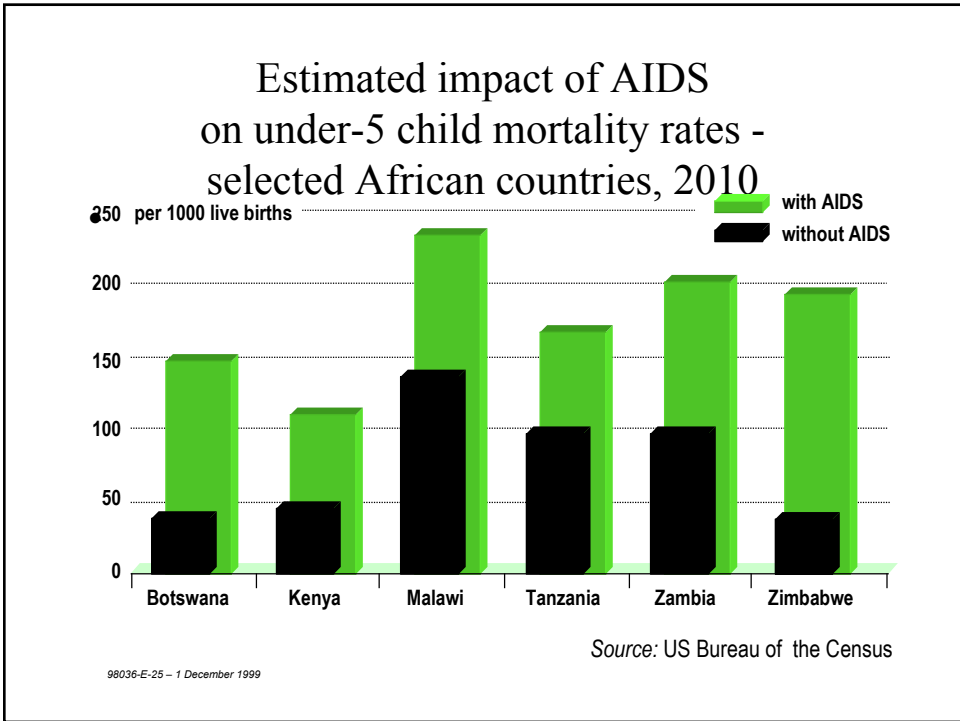
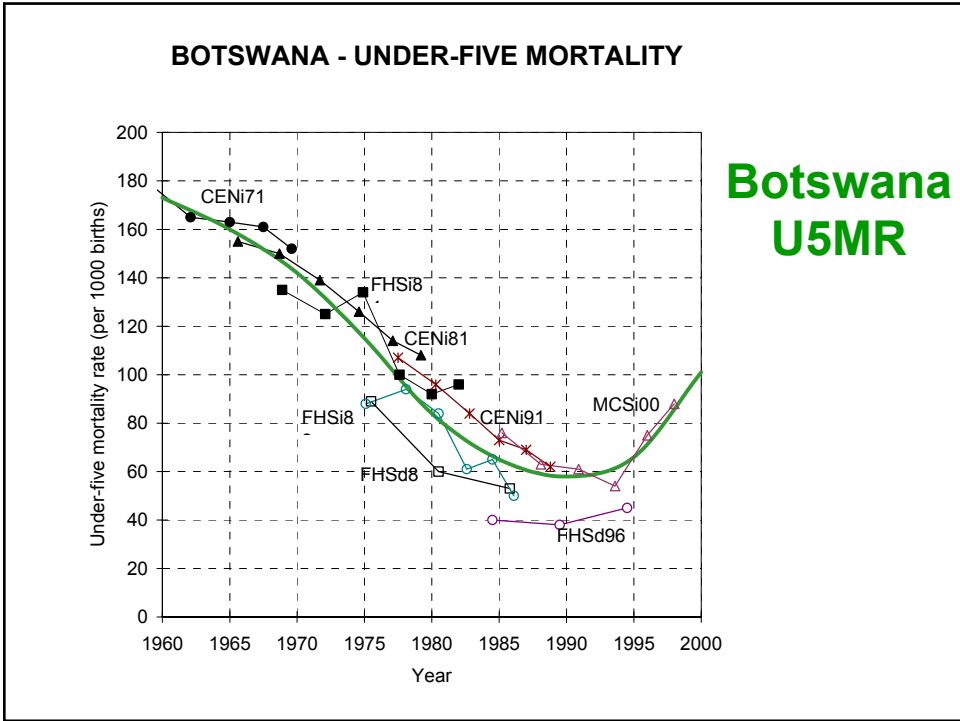
Le VIH, qui infecte plus de 30 millions de personnes, soit plus que la population du Canada, risque de renverser les progrès de trois décennies de développement international



Estimated number of people living with HIV/AIDS, by region, 1980-1999



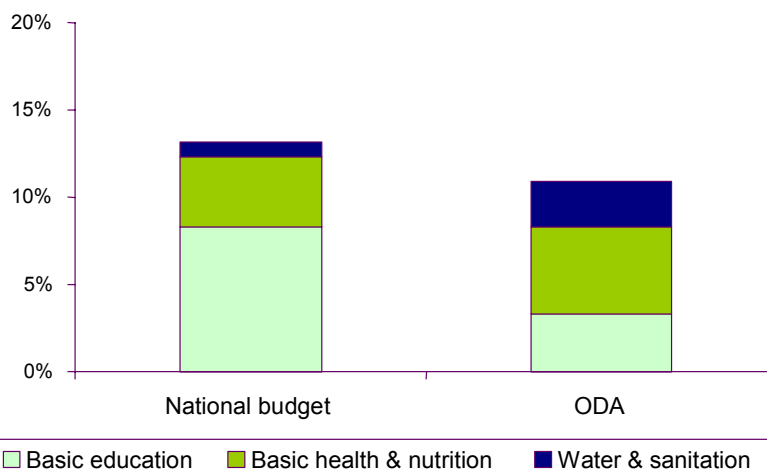
Source: UNAIDS.



Comment expliquer cet état
situation de la santé dans le
monde?

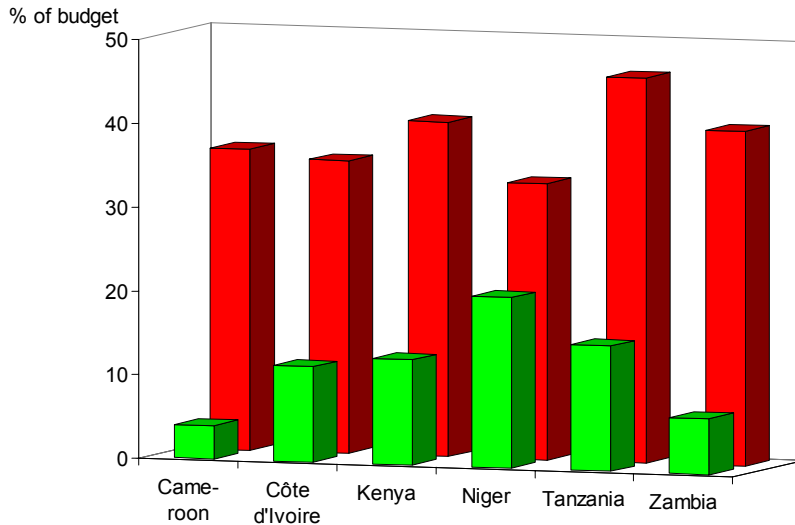


Under -investment in Basic Social Services



Source: OECD Development Cooperation 2000 Report and UNICEF/UNDP, 1998.

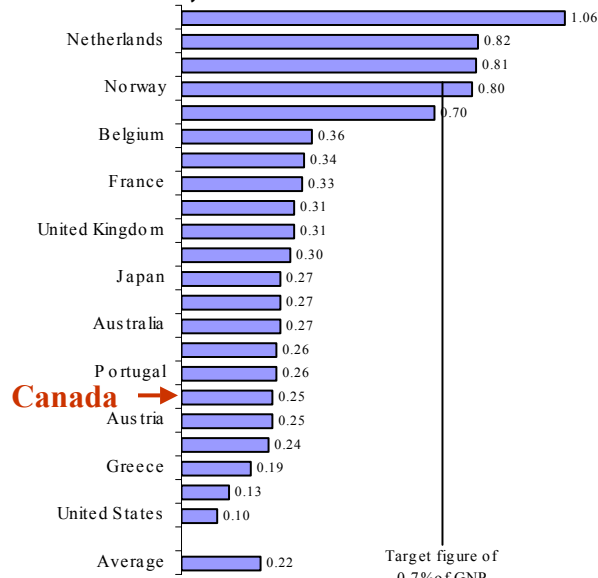
Debt and basic social services as percentage of budget



Source: UNICEF and UNDP (1998).

■ Basic social services
■ External debt payments

Official development assistance as a percentage of donor nation GNP, 2000



Source: OECD, Press release, 20 April 2001

Principes de développement

- “Ownership” national par le gouvernement et la société civile
- Cibler les objectifs sanitaires et non seulement le processus (ex: réduction de la mortalité versus la décentralisation)
- Des décisions basées sur la meilleure évidence
- Des interventions à haute coût-efficacité
- Des systèmes de gestion et d’information forts (ressources humaines, finance, logistique)



Principes de développement ...

- Des partenariats mondiaux basés sur des objectifs communs (éradication de la polio, GAVI, Roll-Back Malaria, Stop TB, Fond mondial pour combattre le SIDA, la tuberculose et le paludisme, GAIN)
- Des partenariats institutionnels à long terme
- Aller à l’échelle: approche populationnelle, couverture universelle



Main Goals of *A World Fit for Children* for 2010

- Reduce infant and under-five mortality by at least one third by 2010 (and 2/3 by 2015)
- Reduce maternal mortality ratio by at least one third by 2010 (and 3/4 by 2015)



Main Goals of *A World Fit for Children* for 2010 ...

- Reduce under-five child malnutrition by at least one third by 2010, with special attention to children under two
- Reduce proportion of households without access to hygienic sanitation facilities and affordable and safe water by at least one third by 2010



Main Goals of *A World Fit for Children* ...

- Reduce by 2005 HIV prevalence among young men and women age 15 to 24 in the most affected countries by 25 per cent and by 25 percent globally by 2010



Comment atteindre ces objectifs?

What can be learned from business?

- The eye on the bottom line: return on investment
- For us:
 - lives saved per \$ invested
 - sustainable programs: countries leading their own health development; first foster program and systems sustainability while fostering financial sustainability by using low cost, highly effective interventions



How will we reach these goals and in particular reducing under-five mortality by one-third by 2010?

1. Set priorities
2. Go to scale



Priority setting in health

- Burden of disease (*deaths and illness*)
- Cost-effectiveness (*life saved per \$ invested*)
- Feasibility (*in the most resource poor and the toughest places*)
- Sustainability (*programs & systems, financial*)
- Comparative advantage



Going to scale

- *Population-based interventions* (example: salt iodisation, food fortification)
- *Universal coverage* of known preventive interventions, reaching the unreached especially the poor (example: polio, bednets)
- *Timely use of effective curative interventions*, especially for diarrhea, pneumonia and malaria



Reproductive health

- Universal access by all women and adolescent girls to affordable, quality reproductive health services (ICPD and ICPD+5) including birth spacing, prenatal care, essential obstetric care and care for newborns



Breast-feeding

- Protect, promote and support exclusive breastfeeding for 6 months, and continued breastfeeding with adequate complementary foods well into the second year



Immunization +

- By 2010, ensure full immunization at least 90% of children nationally with at least 80% coverage in every district
- Certify by 2005 the global eradication of polio
- Reduce deaths due to measles by half by 2005
- Eliminate maternal and neonatal tetanus by 2005



Immunization + ...

- Extension of the benefits of new and improved vaccines and other preventive health interventions to children in all countries, especially vitamin A where appropriate



Addressing major causes of child mortality

- Intensify *proven cost-effective* actions against diseases and malnutrition that are the *major causes of child mortality and morbidity*, including:
 - Reduce by one third deaths due to ARI by 2010
 - Reduce by half deaths due to diarrhoea by 2010



Addressing major causes of child mortality...the Okinawa G8 Summit Goals

- Reduce by *half* the burden of disease associated with *malaria* by 2010
- Reduce by *half* *tuberculosis* deaths and prevalence by 2010
- Reduce the number of *HIV/AIDS-infected youth* by *25%* in the most affected countries by 2005, and globally by 2010



Nutrition goals: Micronutrients

- Sustainable elimination of:
 - *Iodine deficiency* disorders by 2005
 - *Vitamin A deficiency* by 2010
- Reduction by one third of *anemia*, including *iron deficiency*, by 2010
- Accelerated progress towards reduction of other micronutrient deficiencies, through *food fortification* and *supplementation*



Results: coverage of proven cost-effective interventions

<i>Intervention</i>	<i>%</i>	<i>Remark</i>
Breastfeeding	40	free
Immunization	70	< 30% some countries
Vitamin A	20	imagine fortification
Oral rehydration	60	> 2 M diarrhea deaths
Malaria bednets	<10	
Malaria/pneumo. drugs	<20	
DOTS for TB	20	
Condoms for HIV	10?	



Five new organisational priorities for UNICEF

- Immunisation+
- Early child development (health, nutrition, water sanitation and hygiene)
- HIV/AIDS
- Girl's education
- Child protection



UNICEF's comparative advantage

- Leadership, advocacy and mobilisation for children
- Global procurement
- Programme communication and social mobilisation
- UNICEF's field presence: in all countries, 6000 strong in developing countries
- Experience in complex emergencies and difficult countries



Towards a better world

- A passion for and a focus on survival with clear time-bound goals
- Absolute scientific rigor: evidence-based decision-making approach
- A clear focus on results: outcomes (universal coverage of proven cost-effective interventions)
- Going to scale: the lessons from polio eradication, reaching every child



Towards a better world

- Further strengthen the strategic partnership with development partners
- Create demand: marketing, social mobilisation
- Work on and begin implementing the best packages on large scale, while monitoring impact and program cost-effectiveness
- Secure massive funding
- Involve governments and civil society
- Speed ...



Mapping progress towards our goals...

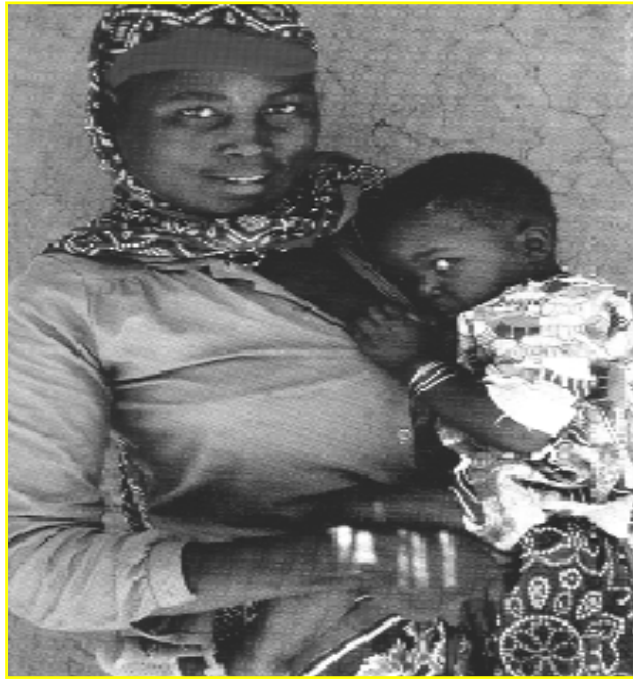
- Immunization coverage (Measles...)
- % of children & pregnant women sleeping under bednets ...
- ...
- ... *Measuring performance on the basis of results...*



Que pouvons-nous faire pour atteindre ces objectifs de développement sanitaire?

- En parler ensemble ...
- Exiger des résultats: rapports périodiques sur le progrès
- Exercer ses droits et responsabilités comme citoyen: est-ce dans le meilleur intérêt du Canada de ne pas faire plus en APD?
- Ressources privées: philanthropie, corporations, dons individuels ...





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La santé de base pour tous est-elle une condition nécessaire à la sécurité humaine?

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