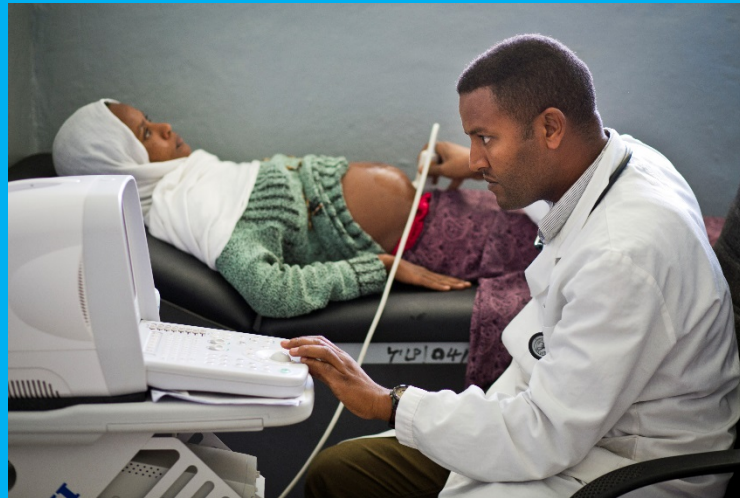


UNICEF's Priorities to combat Malaria in Pregnancy

Innovative Delivery to Maximize Impact



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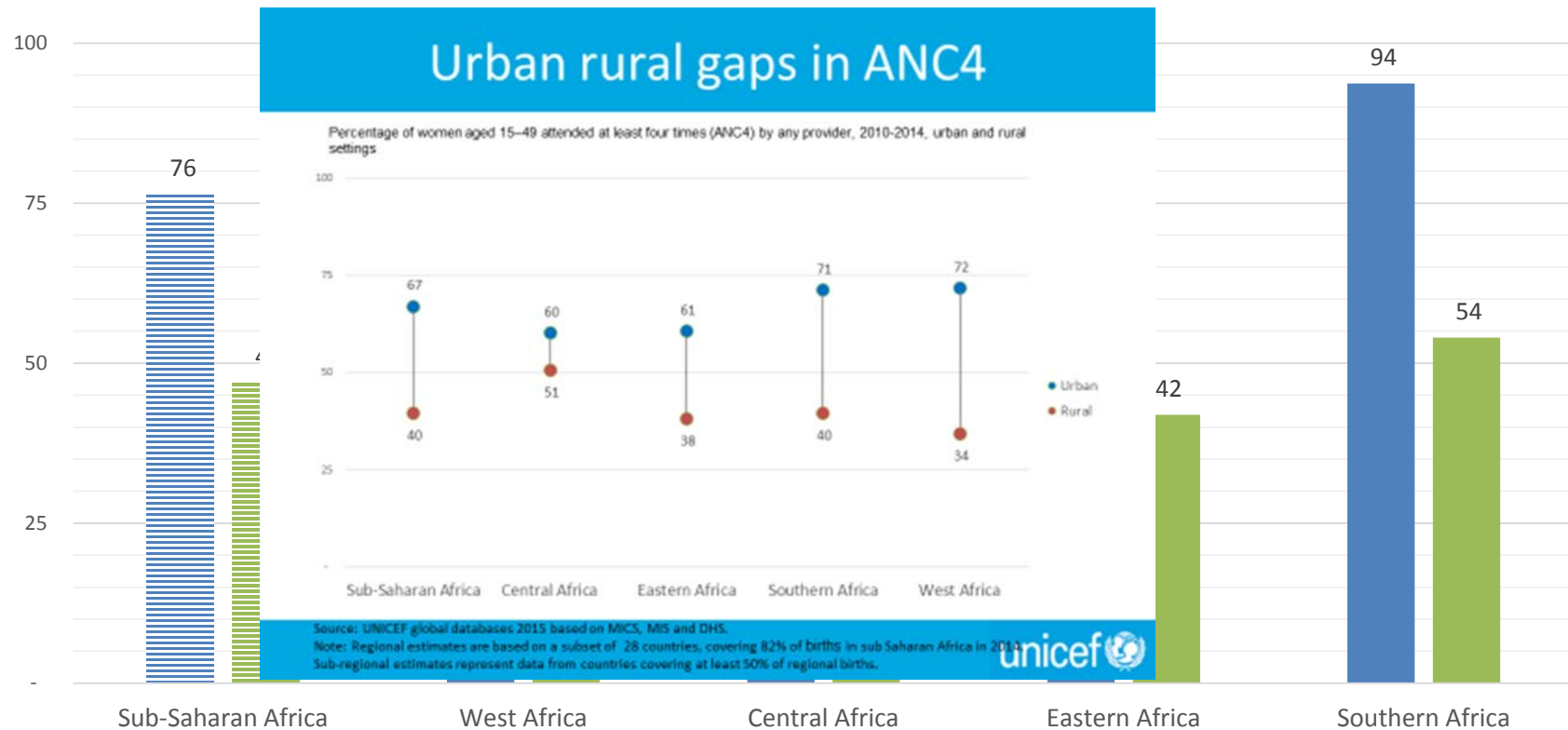
**Dr Marie Reine Fabry, Regional Malaria Advisor
Health Section, UNICEF WCARO
MiP meeting
Nairobi July 2016**



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In Sub-Saharan Africa, most women receive at least 1 ANC visit but **less than 50%** attend the recommended minimum of 4 visits - making ANC a missed opportunity to deliver anti-malarial care

Percentage of women aged 15–49 attended at least once during pregnancy by skilled health personnel (ANC1) and percentage attended by any provider at least four times (ANC4)



Source: UNICEF global databases 2015 based on MICS, MIS and DHS. ■ ANC1 ■ ANC4

Note: Regional estimates are based on a subset of 37 countries, covering 90% of births in sub-Saharan Africa in 2014. Sub-regional estimates represent data from countries covering at least 50% of regional births.

Over half of the women who become pregnant live in tropical areas of Africa with intense transmission of *Plasmodium falciparum*. **However it is the poorest pregnant women who are not receiving IPTp**

UNICEF supports the provision of SP and training of practitioners to administer IPTp at each scheduled ANC visit after quickening.

Percentage of women aged 15–49 who received intermittent preventive treatment for malaria during last pregnancy (at least two doses of SP, at least one during antenatal care visit), 2010-2014

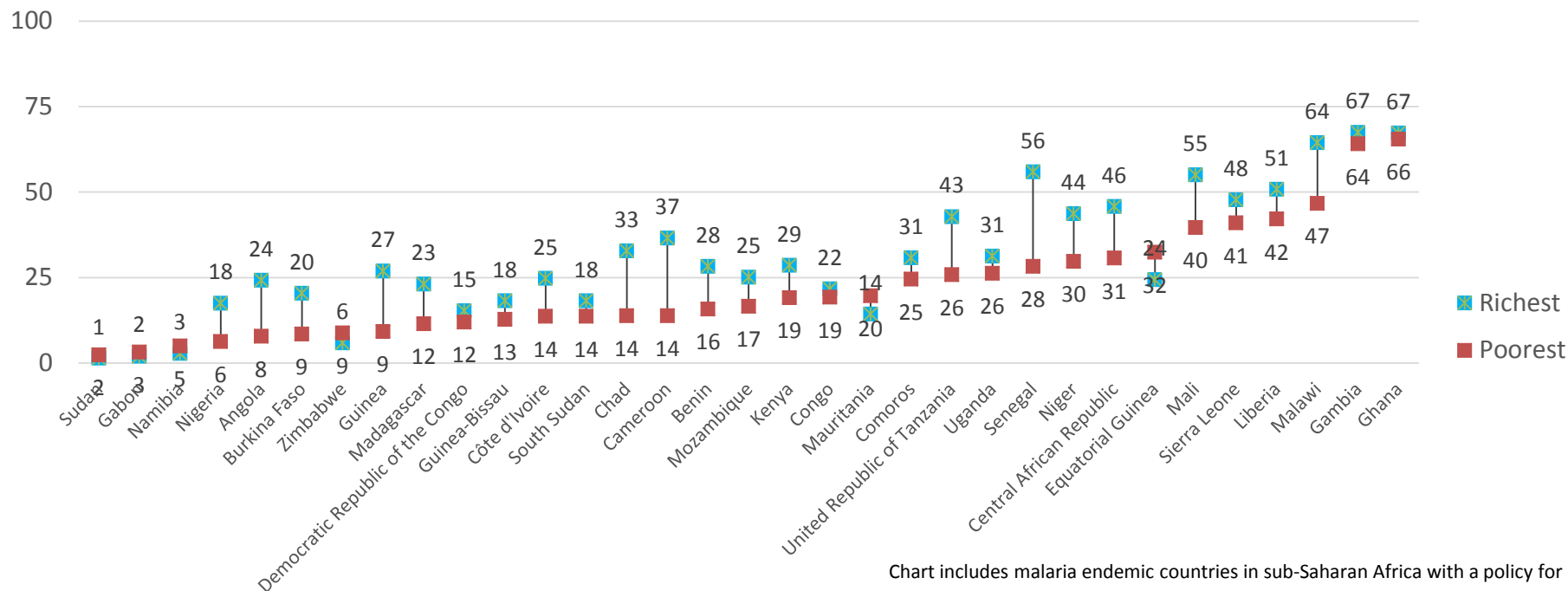


Chart includes malaria endemic countries in sub-Saharan Africa with a policy for IPTp

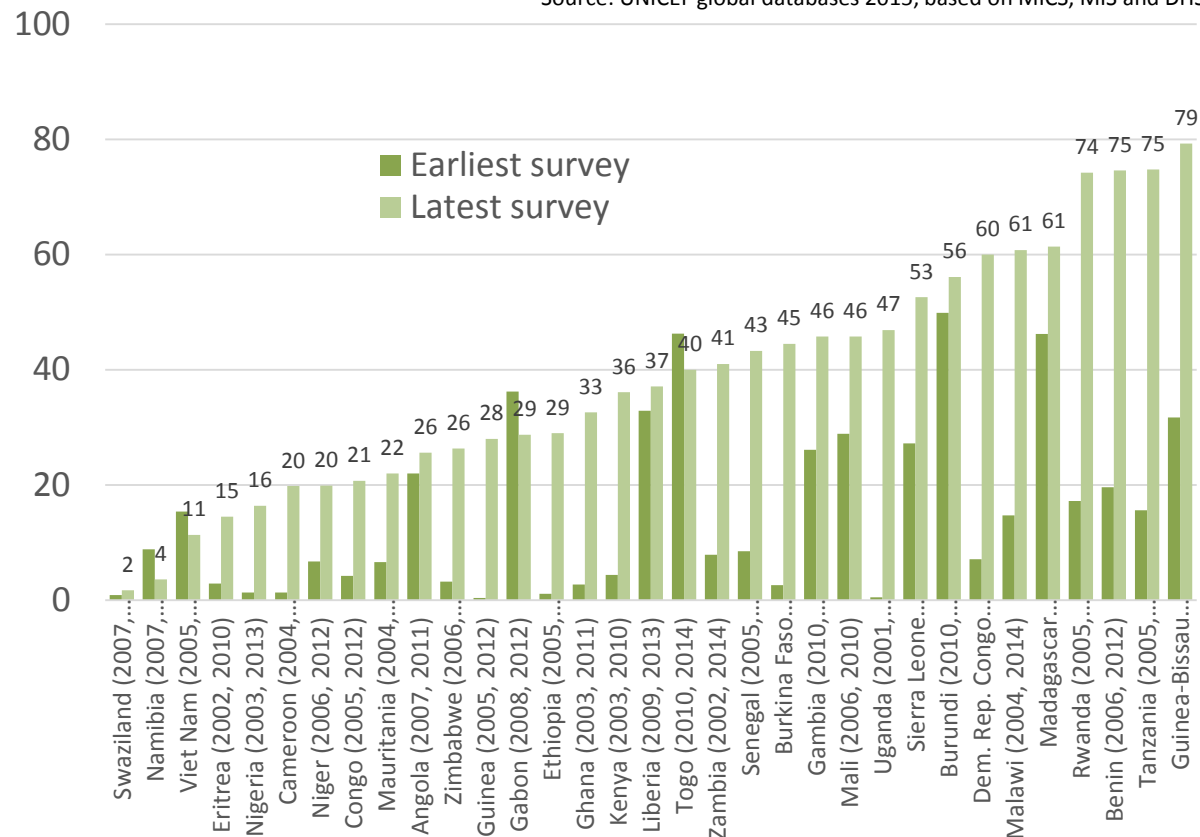
Source: UNICEF global databases 2015, based on MICS, MIS and DHS

Despite large increase in coverage, many pregnant women do not sleep under an ITN in sub-Saharan Africa, except in a few countries

- **Less than 40% of pregnant women are sleeping under ITNs.** Only a few countries have achieved coverage levels of over 70 percent.
- **Sustainability: Progress achieved during the last decade is very fragile.** International funding for malaria control has leveled off below annual requirements to achieve universal coverage of malaria interventions.

Percent of pregnant women sleeping under and ITN

Source: UNICEF global databases 2015, based on MICS, MIS and DHS




UNICEF also supports the delivery of ITNs at ANC visits.

A core underlying principle of UNICEF's support to maternal, newborn and child health programmes is the "continuum of care"

- UNICEF is supporting both a woman and child's lifecycle:



- throughout adolescence, pre-conception, during pregnancy, at birth and during the newborn period, and
 - from the home and community, to the health center and hospital and back again.
- **However, there are critical gaps in the continuum of care:**
 - **Only 53 % of PW** had the recommended minimum of four antenatal visits (ANC4).
 - **IPTp coverage is below 30%.**
 - **Less than 40% of pregnant women are sleeping under ITNs.**

A photograph showing a group of women and children in traditional clothing. In the foreground, a woman wearing a red headscarf and a blue patterned dress is smiling broadly. She is holding a young child in her arms. To her right, another woman in an orange headscarf and a grey patterned dress is looking towards the camera. In the background, other women and children are visible, some wearing orange headscarves. The scene appears to be outdoors in a community setting.

UNICEF's actions to address gaps in the “continuum of care” and improve service delivery for mother's and their children against malaria...

UNICEF's vision for Health Systems

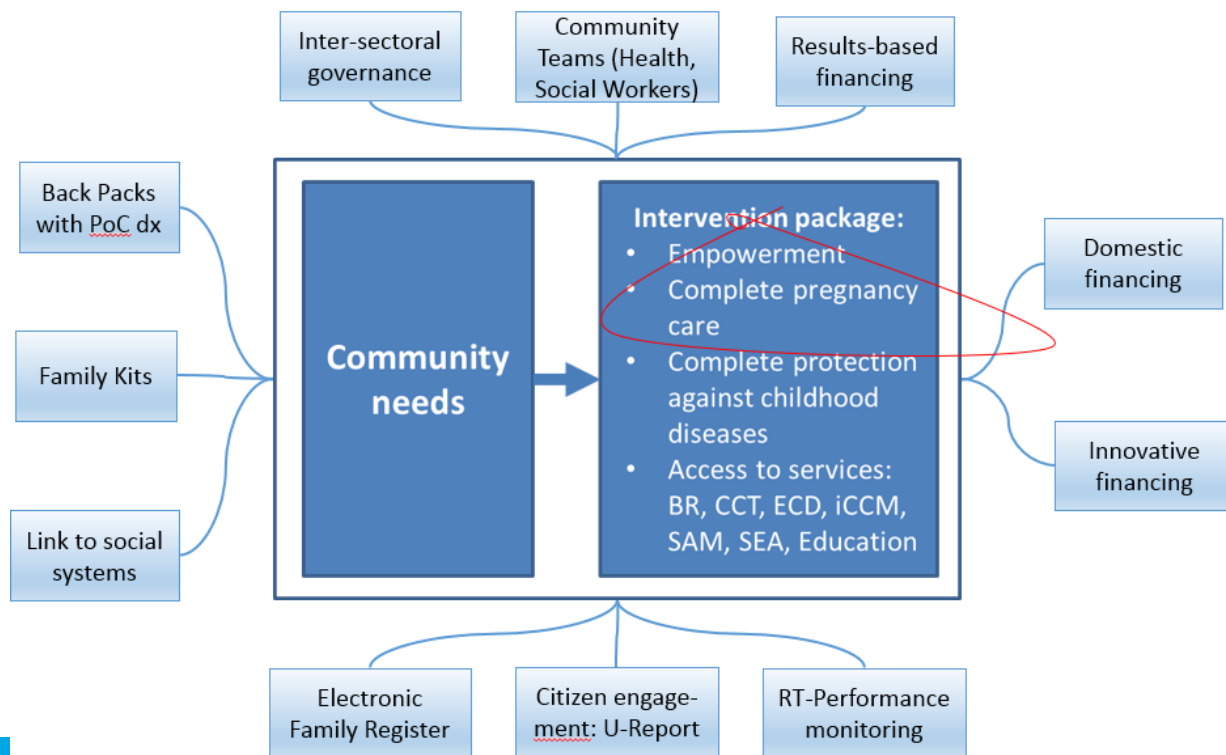
“A health system that closes the gap in access to services and health and nutrition outcomes, contributes to UHC and is resilient and adaptable.”

- Strong health systems that deliver integrated packages
- Interventions and strategies should cover all stages of the life cycle
- Eliminate the equity gap in RMNCAH outcomes
- Support the achievement of universal health care(UHC).
- Inbuilt resilience to shocks and emergencies
- Adaptable to new developments and challenges.

UNICEF Priority Areas: Community

Strengthening the community platform: (*Demand generation, social accountability, service delivery, social inclusion and reduction of financing barriers*)

⇒ **Adherence to Preventive interventions**



UNICEF Priority areas: Quality of Care

Quality of care: Scaling up an **appropriate & focused** antenatal care package

- UNICEF advocates for and supports the roll-out of the **full ANC package (at the 1st, referral and community levels** as appropriate) which includes:
 - Screening for maternal illness, hypertensive disorders, STIs and anemia (obstetric complications)
 - Provision of iron, folic acid, tetanus immunization, ARVs (where indicated), deworming, **LLINs and anti-malarials (IPTp & ACTs if infected)**
 - Counseling on family planning, birth, emergency preparedness and smoking cessation
- ANC is also an opportunity to promote the use of skilled attendance at birth and post-partum healthy behaviours

UNICEF Priority areas: Quality of Care

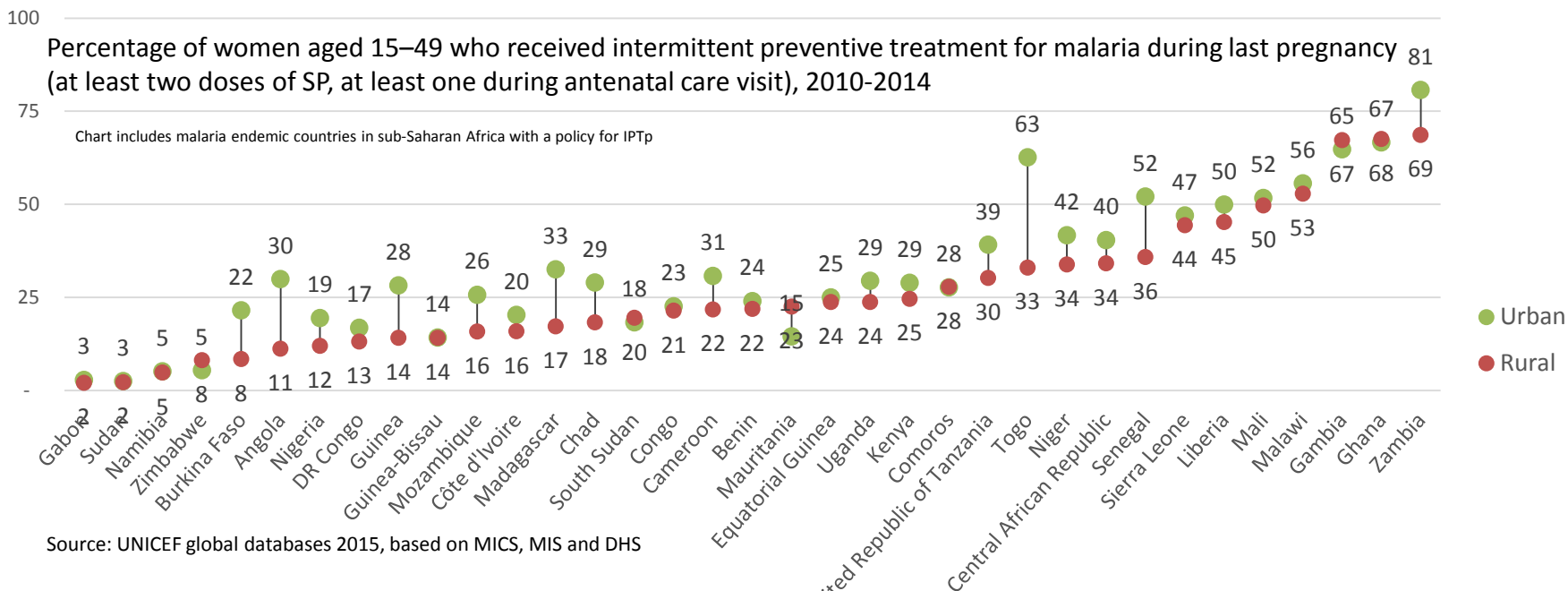
Quality of care:

- Beyond focusing mainly on coverage, it is important to also consider **quality as an essential component of improving health systems**,
- Poor quality at facilities, perceived or actual, is now recognized as an important deterrent to care seeking and use.

=> Efforts to improve ANC need to include more sensitive metrics for **monitoring progress** not only of population coverage, **but quality and patient satisfaction as well.**

UNICEF priority areas: Equity

- Improving the quality of service provision means paying close attention to equity and **advancing policies that help reduce disparities** between advantaged and more vulnerable people. **Poorer, less educated, and rural women have been shown to have lower coverage of antenatal care/ITPp** and experience more **discrimination and disrespect in facilities** as well.



- Reducing barriers to access, including distance and cost, are imperative.**

UNICEF priority areas: Increasing **access** to life-saving commodities

UNICEF works with industry and partners to achieve substantial savings, market expansion, and new products for children via:

Market influencing

Supply chain optimisation

Innovation

- **Reduced pricing**
- **Increased competitive supplier bases**
- **Sustained quality and availability**
- **Setting quality standards**

Via:

- **Partnerships with expertise (e.g. , **GFATM**, BMGF, GAVI, UNITAID, MSF, WHO, CHAI, WB)**
- **Market analyses**
- **Risk assessments**
- **Commercial expertise**
- **Negotiated terms with suppliers**
- **Financing mechanisms**

Priorities to address MIP challenges

- **Ensure vulnerable populations are the priority** even within the context of universal coverage
- Ensure a true **continuum of care** from health facilities to the periphery and community level
- **Improve governance** and decentralized management
 - E.g. Results based financing
- **Build capacity** among providers at both facility and community level (retraining,..)
- **Dedicated financing for MIP**, especially free ANC & SP



- Use **m-health opportunities**
 - ex. ANC SMS reminders
- Community level kits with subsidies &/or other **incentives** for women to attend ANC
- Community education and involvement to **reduce ignorance and stigma (C4D)**

UNICEF comparative advantage

- UNICEF has **strong policy influence** at all levels, particularly at country level
- UNICEF is also working on **Market influencing; Supply chain optimization; and Innovation**
- **Technical support**
 - UNICEF's ability to deliver malaria commodities, especially to the most vulnerable, is globally recognized
- **Coordination** among donors, especially the Global Fund, World Bank and US-PMI and implementers to accelerate scale-up



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- **Resource Mobilization**
 - Develop strategies for human resource training and retention
 - Effective mobilization for technical assistance to countries
- **Procurement and supply chain strengthening**
- **Improving data quality & gathering (M&E)**
- **Integration** of malaria control into health systems, particularly at district level
 - Focus on the integration of malaria with EPI for commodity distribution and malaria programme supervision
 - Child & Maternal Health Days/weeks
 - Harmonized funding (GF NFM, IHP+, GFF, RMNCH, etc)
 - UNICEF-GF MOU focused on child and maternal care

A close-up photograph of a woman from behind, carrying a sleeping baby on her back. The woman is wearing a green patterned wrap. The baby is wearing a light green shirt and is resting its head against the woman's shoulder. The background is a blurred outdoor setting with a thatched-roof building and trees.

**Thank You
Merci
Obrigado
Melesi
Asante Sana
Twasanta Mani
Matondo
Wasakidjila wa bunyi**