UNIT 4:

Lesson 1: Strategies for Uniting for Child Survival

Suggested Class Time: 45 minutes

Objectives:

- Become aware of the four key strategies and the goals they address;
- Report on one strategy in detail and consider how it contributes to an increase in child survival rates.

Session Plan:

Opening Activity: What is a Strategy? — 10 minutes Class Activity: The Four Key Strategies — 35 minutes

Vocabulary:

Continuum of care, packaged interventions, primary health care, moving to scale strategy

Materials Needed:

- · Copies of the Youth Report, Chapter 4 and Glossary
- Copies of Handout 10 (2 pages) for the whole class
- Internet Access

UNICEF, The State of the World's Children 2008

http://www.unicef.org/sowc08/profiles/profiles.php

Background for Teachers

The following information on four key strategies for child survival supplements the Youth Report, pages 30 and 31, and Handout 10, page 2.

Four Key Strategies

1. Promote Community Partnerships — Families, especially parents and other primary caregivers, form the first line of care when young children fall sick. They make the initial diagnosis of illness, assess its severity, select treatment and care options, procure and administer drugs and other remedies, and decide whether or not to seek formal health care. Moreover, many of the preventive measures that can preserve the health and save the lives of young children and pregnant women require behavior changes that begin in the household and are reinforced in the community.

A common set of features of the most successful community-based approaches to health include:

- Strong community organization and participation;
- Families involved at every step;
- Cooperation and coordination between local health care providers and the national health system;
- Support for community health workers;
- Effective ways to refer patients to hospitals and clinics;
- Clearly defined government policies with steady financial support;
- Careful monitoring, supervision, and evaluation.
- 2. Develop and Strengthen the Continuum of Care More than half of all maternal and newborn deaths occur during childbirth and the first few days of a baby's life; this is also the period when health care is lowest. An effective continuum of care connects essential maternal, newborn, and child health care packages through pregnancy, childbirth, and postnatal and newborn periods, and into childhood and adolescence. The advantage of a continuum is that each stage builds on the success of the previous stage. This strategy consists of two primary elements including:
 - Time, or recognizing the need to ensure essential services for mothers and children during pregnancy, childbirth, the after child birth time period, infancy, and early childhood;
 - Place, or linking the delivery of essential services in a primary health care system that integrates home, community, outreach, and facility-based care.
- Expand Services and Strategies It has been shown that when governments take the lead and are committed to expanding successful pilot and small-scale projects, nationwide coverage can be achieved. Country ownership and public sector leadership can increase the prospects for successful scaling up. There are several characteristics of projects that have moved from a small-scale program to one that has national coverage.

These include:

- Increasing the availability of professional health workers;
- Developing an accessible network of community-based, primary, and referral-level services;
- Improving the quality of care, as well as the living conditions and status of women;
- Ensuring equal access to health and nutrition services.

Packaging interventions helps strengthen the continuum of care and expand services. In the past, safe motherhood and child survival programs often operated separately, leaving disconnections in care that affected both mothers and newborns. Now it is being recognized that delivering specific interventions at critical points in the continuum of care has multiple benefits. If, for instance, insecticide-treated mosquito nets are distributed in a community on one day, nutrition supplementation for pregnant women is provided on another day, and immunizations take place on yet a different day, children and mothers are less likely to benefit from all three

interventions than they would if these were made available on a single day. The "packaged approach" — by combining low-cost interventions such as vaccines, antibiotics, insecticide-treated mosquito nets, and micronutrient supplementation for mothers and children, and adding the promotion of improved feeding and hygiene practices — can markedly increase their efficiency and cost-effectiveness.

4. Develop Unity in Global Health Partnerships — Since the early years of the Child Survival Revolution, global partnerships for health, often financed through private sources, have proliferated and reinvigorated the field. (See *Youth Report*, pages 18–19, for a summary of some of the most important.) It is estimated that there are over 100 global health partnerships.

A number of these partnerships have proved remarkably effective in offering communities free or reduced-cost medicines whose quality is assured, along with vaccines. Yet, in their single-mindedness to produce results, it has been argued that global partnerships are often donor- and product-driven rather than country- and people-centered.

There are many challenges facing developing countries as they seek to coordinate and manage these efforts. What is clear however is that developing countries must take the lead and "own" the solutions to their health problems. Global partnerships for child health and survival are beginning to move toward greater coordination and integration with the priorities, systems, and procedures of non-industrialized countries themselves.

To learn more about each of these strategies:

http://www.unicef.org/sowc08/profiles/profiles.phpwwwl

Opening Activity: What is a Strategy?

Directions

- 2. Have students offer other examples for simple strategies for solving common problems.
- **3.** Reveal the following; the word strategy comes from the Greek *strategia* meaning generalship. A useful definition is "the art of devising or employing plans to reach a goal."

Class Activity: The Four Key Strategies

Directions

1. Ask students to read the Four Key Strategies on pages 30–31 of the *Youth Report*. Define any unfamiliar terms in the Vocabulary list at the beginning of this lesson and refer to the Glossary on page 38 of the *Youth Report* for additional definitions.

- 2. Distribute Handout 10 (2 pages). Create four groups and assign one strategy for each group. Ask students to answer questions about the Strategy that corresponds to their number. (Note that there is some overlap among the four strategies.)
- 3. Provide time for students to research and discuss their topics and prepare their presentations.
- 4. As a follow-up, discuss how the four strategies interconnect and what the role of industrialized nations should be.
- Tip: Alternatively this activity can be structured as a class discussion without breaking into small groups.
- 5. Allow time for students to answer the questions, using information from the Youth Report, Handout 10, page 2, and UNICEF's The State of the World's Children 2008 website, http://www.unicef.org/sowc08/profiles/profiles.php.
- 6. Then discuss students' responses as a class.

Extension Activity

Directions

Invite students to reflect in writing on the following statement from page 31 of the Youth Report, "There is no enterprise more worthy, nor reward more precious, than saving the life of a child." The means are at hand. It is now a question of will and action."

The Four Key Strategies for Child Survival

Directions: Follow your teacher's directions and answer the questions related to your assigned strategy on a separate sheet of paper.

Strategy 1 — Promote Community Partnerships

- 1. What are the key goals of this strategy?
- 2. Why is it an important strategy for increasing child survival rates?
- 3. What are some of the obstacles to creating community partnerships in the 60 priority countries?

Strategy 2 — Develop and Strengthen the Continuum of Care

- 1. What are the key goals of this strategy?
- 2. Why is it an important strategy for increasing child survival rates?
- 3. What is the "continuum of care"?
- 4. Should the continuum of care end after age five?

Strategy 3 — Expand Services and Strategies

- 1. What are the key goals of this strategy?
- 2. Why is it an important strategy for increasing child survival rates?
- 3. What are "packaged interventions"?
- 4. How do they contribute to reaching more children?

Strategy 4 — Increase Unity in Global Health Partnerships

- 1. What are the key goals of this strategy?
- 2. Why is it an important strategy for increasing child survival rates?
- **3.** Provide some examples of global health partnerships and explain briefly what they have accomplished and hope to accomplish. (See bottom of page 32 of the *Youth Report*.)

Fast Facts about the Four Strategies

Strategy 1 — Promote Community Partnerships

How can a community partnership ensure child survival? Many countries of the world do not have strong health systems and face a shortage of doctors and nurses. In such countries, most child deaths occur at home before the child's family has been able to seek medical care, which is often far away. Thousands of children's lives can be saved if every community has access to a package of basic health care. This package would include a network of community health workers to provide families with simple treatments for childhood illnesses and also advise on how to recognize when a child should be taken to the health clinic or hospital for more urgent care.

Strategy 2 — Develop and Strengthen the Continuum of Care

What is a "continuum of care"? In a continuum of care, health care is provided to a mother before and during pregnancy, at the time of delivery, immediately after childbirth, and to her newborn child as she or he grows into infancy, childhood, and adolescence. In such a continuum, each stage builds on the success of the stage before. Skilled care before, during, and immediately after birth reduces the risk of complications or death for both the mother and the baby. Continued care for children supports their right to health.

Strategy 3 — Expand Services and Strategies

What does "scaling up" mean? Scaling up means taking low-cost and effective health services and strategies from the community level to district, state, and country levels. Scaling up community health initiatives is a challenge because it needs greater funding, good coordination between levels, and strong political leadership to strengthen a country's health system.

Source: The State of the World's Children 2008, http://www.unicef.org/sowc08/youth/informed.php

Strategy 4 — Develop Unity in Global Health Partnerships

What are the challenges to unity in global health partnerships? Depending on the definition used, it is estimated that there are over 100 global health partnerships. A number of these partnerships have proved remarkably effective in offering communities free or reduced-cost medicines whose quality is assured, along with vaccines. Yet, in their single-mindedness to produce results, it has been argued that global partnerships are often donor- and product-driven rather than country- and people-centered.

There are many challenges facing developing countries as they seek to coordinate and manage these efforts. What is clear however is that developing countries must take the lead and "own" the solutions to their health problems. Global partnerships for child health and survival are beginning to move toward greater coordination and integration with the priorities, systems, and procedures developing countries themselves.