

# SAVE THE CHILDREN COMMITMENT SELF-REPORTING QUESTIONNAIRE 2018



*EWEC Secretariat, PMNCH, FP2020 self-reporting questionnaire to assess progress on implementation of commitments to the Global Strategy on Women's, Children's and Adolescents' Health.*

## COMMITMENT SUMMARY

Save the Children commits to invest \$2 billion in our global health and nutrition work, in both development and humanitarian settings, for the period 2017-2021. We will work towards equitable outcomes in our health and nutrition programmes, measuring our success by the extent to which we improve health outcomes for the poorest and most marginalised mothers and children and their communities, including by:

- (1) promoting policy, budgetary, and normative changes in health and nutrition that accelerate progress on ending preventable maternal, newborn, child and adolescent deaths, including stillbirths;
- (2) strengthening health systems to enable free, high-quality, essential services, as part of the movement towards Universal Health Coverage, as well as to build their resilience to deal with and withstand humanitarian challenges;
- (3) building capacity of and mobilizing civil society to hold governments accountable for their SDG commitments, including through child and youth participation, citizen-led processes and the use of human rights mechanisms;
- (4) expanding and intensifying programmes on (i) proven interventions to protect mothers and newborns and prevent stillbirths in 12 priority countries; (ii) maternal, infant and young child nutrition; and (iii) Integrated Community Case Management of Childhood Illness;
- (5) training and advocating for sufficient and appropriate health workers to provide essential healthcare for all, along the continuum of care for women's, children's and adolescents' health, including family planning; and
- (6) engaging with multi-sector partners to deliver life-saving programming, in both development and humanitarian settings. Save the Children also commits to advocate for and support governments to develop and implement costed, funded, cross-sectoral policies, programmes and plans to end child marriage and early childbearing by engaging relevant ministries and stakeholders, including civil society, children and youth.

## COMMITMENT PROGRESS SUMMARY NARRATIVE

Save the Children is pleased to report that its health and nutrition expenditures in 2017 exceeded its Every Woman Every Child commitment. While Save the Children committed to investing \$325 million in its global health and nutrition portfolio in 2017, in fact the organization spent \$388 million, exceeding the 7% growth that was foreseen between 2016 and 2017. These investments allowed Save the Children to directly reach 33,314,759 children (0-18 years), including newborns, children under-5 and adolescents with health and nutrition services; 1,298,016 adolescents (10-18 years) with sexual and reproductive health services; and

18,185,869 women with maternal & reproductive health, HIV, Water, Sanitation and Hygiene (WASH) and nutrition services. Combining the expenditures from 2016 and 2017, Save the Children has already invested \$726,019,353 out of its 2 billion commitment for the 5-year period comprised between 2016 and 2020.

Targeting the poorest and most marginalised children and their communities, these interventions include a focus on community-based service provision and achieving universal coverage of skilled attendance at birth by ensuring midwives have the competencies and equipment required for saving both mother and newborn; empowering frontline health workers and others to deliver life-saving vaccines and to prevent, diagnose and treat major childhood killers. Save the Children supported Integrated community case management (iCCM) efforts in 19 countries. iCCM is a broadly endorsed global strategy to reduce child mortality, in which a health system trains, supplies and supervises community health workers (CHWs) to manage sick children who have limited access to facility-based health services. Through iCCM, CHWs can deliver appropriate, lifesaving treatments closer to where children live. By combining preventive and curative measures, each complementing the other, iCCM achieves better results for children. Our nutrition programmes focus on the delivery of evidence-based interventions in the first years by ensuring adequate food and nutrient intake in pregnant and lactating women and young children, as well as effective infant and child feeding and care practices, and protection against infectious diseases.

We continue to foster collaboration across sectors, such as through integrating early childhood development activities within our maternal, child and newborn health, nutrition and early learning interventions. We are also investing in growing our capability to deliver direct clinical services in large-scale crisis settings, focusing on the delivery of primary health care services, surgical services, mental health and psychosocial services, and the management of disease outbreaks.

Save the Children's programmes are supported by advocacy activities and campaigns towards strengthening health systems to enable universal coverage of free, high-quality, essential services. Our advocacy work focuses on promoting policy, budgetary, and normative changes in health and nutrition that accelerate progress on ending preventable, newborn, child and adolescent deaths, including stillbirths. In terms of Save the Children's overall work, health and nutrition continue to be the theme with highest numbers of children directly reached.

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## FINANCIAL COMMITMENT PROGRESS

Original Commitment Value: US \$2 billion for the period of five years

*Has the overall financial support for your commitment changed in value since you last reported or since you made your commitment if this is your first report?*

No

Start Date: 2017-01-01

End Date: 2017-12-31

Grant Awards: 356,813,166.53

Philanthropic Donations: 31,411,814.93

Commented [AM1]: Units needed

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## THEMATIC COMMITMENT PROGRESS

### *Reduce global maternal mortality to less than 70 deaths per 100,00 live births*

Maternal mortality ratio  
Proportion of births attended by skilled health personnel  
Proportion of women aged 15-49 who received 4 or more antenatal care visits  
Proportion of women who have postpartum contact with a health provider within 2 days of delivery

### *Reduce newborn mortality to less than or equal to 12 deaths per 1,000 deaths*

Neonatal mortality  
Stillbirth rate  
Proportion of infants who were breastfed within the first hour of birth  
Proportion of newborns who have postnatal contact with a health provider within 2 days of delivery  
Proportion of women in antenatal care (ANC) who were screened for syphilis during pregnancy

### *Reduce under five mortality to less or equal to 25 deaths per 1,000 live births*

Under-5 mortality  
Percentage of children with diarrhoea receiving oral rehydration salts (ORS)  
Proportion of children with suspected pneumonia taken to an appropriate health provider  
Percentage of infants <6 months who are fed exclusively with breast milk  
Percentage of children fully immunized  
Use of insecticide-treated nets (ITNs) in children under 5 (% of children)

### *End epidemics of HIV, TB, malaria, neglected tropical diseases and other communicable diseases*

Number of new HIV infections per 1000 uninfected population, by age and sex  
Malaria incident cases per 1000 persons per year  
Percentage of people living with HIV who are currently receiving antiretroviral therapy (ART)  
Proportion of households with at least 1 ITN for every 2 people and/or sprayed by indoor residual spray (IRS) within the last 12 months

### *End all forms of malnutrition*

Prevalence of stunting (height for age <-2 standard deviation from the median of the WHO Child Growth Standards) among children under 5 years of age  
Prevalence of malnutrition (weight for height >+2 or <-2 standard deviation from the median of the WHO Child Growth Standards) among children under 5 years of age  
Prevalence of anaemia in women aged 15-49  
Proportion of children aged 6-23 months who receive a minimum acceptable diet

### *Ensure universal access to Sexual and Reproductive Health and Rights (SRHR)*

Percentage of women of reproductive age (15-49) who have their need for family planning satisfied with modern methods  
Adolescent birth rate (10-14, 15-19) per 1000 women in that age group  
Proportion of women aged 15-49 who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care  
Number of countries with laws and regulations that guarantee women aged 15-49 access to sexual and reproductive health care, information and education

Proportion of men and women aged 15-24 with basic knowledge about sexual and reproductive health services and rights

***Ensure access to good quality Early Childhood Development***

Percentage of children under 5 years of age who are developmentally on track in health, learning and psychosocial wellbeing Participation rate in organized learning (one year before the official primary entry age)

***Achieve Universal Health Coverage incl. financial risk, protection and access to services, medicines, and vaccines***

Coverage of essential health services (index based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, noncommunicable diseases and service capacity and access)  
Current country health expenditure per capita (including specifically on RMNCAH) financed from domestic sources  
Out-of-pocket health expenses as percentage of total health expenditure

***Achieve universal and equitable access to water, sanitation and hygiene (WASH) services***

Percentage of population using safely managed drinking water services Percentage of population using safely managed sanitation services including a hand-washing facility with soap and water

***Provide legal identity for all***

Proportion of children under 5 years of age whose births have been registered with a civil authority  
Proportion of countries that (a) have conducted at least one population and housing census in the last 10 years; and (b) have achieved 100% birth registration and 80% death registration

***Geographic Coverage. Check all the geographical levels that you implement your commitment-related activities in?***

- Global
- Regional
- Country
- Sub-country

***Linkage to National Health Strategies. Are commitment-related objectives and/or targets aligned with the national health strategy of the country or countries in which activities take place in?***

Yes

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**EVERY WOMAN EVERY CHILD FOCUS AREAS**

***Early Childhood Development***

Applicable

***Early Childhood Development data***

Current status: ongoing  
Service Delivery: Yes

Geographical Coverage: Both urban and rural  
Newborns (Under 28 days of age): Yes

***Adolescent and Young Adult Health and Well-being***

Applicable

***Adolescent and Young Adult Health and Well-being data***

Current Status: Ongoing  
Service Delivery Included: Yes  
Geographical Coverage: Both Urban and Rural

***Sexual and Reproductive Health and Rights***

Applicable

***Sexual and Reproductive Health and Rights data***

Current status: Ongoing  
Service Delivery Included: Yes  
Geographic Coverage: Both Urban and Rural

***Quality, Equity and Dignity in Services of Women, Girls and Communities***

Applicable

***Quality, Equity and Dignity in Services of Women, Girls and Communities data***

Current status: Ongoing  
Service Delivery Included: Yes  
Geographic Coverage: Both Urban and Rural

***Empowerment of Women, Girls and Communities***

Applicable

***Empowerment of Women, Girls and Communities data***

Current status: Ongoing  
Service Delivery Included: Yes  
Geographical Coverage: Both Urban and Rural

***Humanitarian and Fragile Settings***

Applicable

***Humanitarian and Fragile Settings data***

Current Status: Ongoing  
Service Delivery Included: Yes  
Geographical Coverage: Both Urban and Rural

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## PROCESS RELATED COMMITMENT PROGRESS

*Have challenges faced during the implementation of commitment-related activities resulted in either delays or unsuccessful implementation? Note: If you experience any challenges in completing this questionnaire, please list them under this section*

No

*Have you made any changes to either the funding or implementation partners associated with your organization's commitment?*

No

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## PHOTOS AND VIDEO

*Photos and videos can be shared here:*

[https://www.youtube.com/watch?time\\_continue=23&v=MiuBzP3sfis](https://www.youtube.com/watch?time_continue=23&v=MiuBzP3sfis)

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