

Comment



Newborn survival: putting children at the centre

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This week we begin the second phase of *The Lancet's* campaign on child survival by launching a major new series of papers devoted to the health of newborns. For this initiative we owe much to the expertise of two individuals—Joy Lawn and Simon Cousens. Both developed the original idea, put together a Lancet Neonatal Survival Steering Team, and coordinated meetings to synthesise evidence, refine conclusions, and draft papers. At *The Lancet*, we view this partnership between scientists, health workers, and journal editors as the most important public health campaign we have taken part in for a generation.

There has been an unusual confluence of events during the past two years to make the issue of child survival a moral as well as a health barometer of our times. First, the arguments about child health have come to be underpinned by an unusually robust body of knowledge.¹ The science of child survival has reached a critical mass. Second, policy makers have recognised that their commitment to meet the Millennium Development Goals will come to nothing unless survival is made a reality for millions of children.² And third, there is a growing awareness that the goodwill of international agencies is simply not good enough. The embedded failure of institutions charged with defending the health of children has fostered unbridled anger among those striving to make a difference to the lives of those who have no voice.³

This environment has helped science to lead a demonstrable response at country level. At the 2004 Mexico Ministerial Summit on Health Research, Ministers of Health sat side-by-side public-health investigators to translate research findings into national policies. Rarely has that degree of collaboration been visible between groups who usually find it more frustrating than enlightening to work together. This spirit of cooperation is encouraging—and it is bringing remarkable results. The Child Survival Partnership, created after *The Lancet's* first series, is now working in countries such as India and Ethiopia to convert pledges into practicable programmes to protect the health of children. Yet there remain huge gaps in this effort.

One crucial omission has been the health of newborns. While the infant and the mother have been at the centre of efforts to protect early childhood, the newborn period has been relatively neglected. This marginalisation is difficult to square with the bare numbers. Eight million children are

either stillborn or die each year within the first month of life. This figure never makes news.

The reason is cruelly straightforward. Despite the rhetoric of poverty reduction and aid that marks much of today's foreign policy debate, the life of a child in a low-income country is worth less to those with political power than the life of a child in a high-income country. Those lives are worth less to those with political power because they are worth less to the people who elect politicians into power—either through ignorance or through a conscious decision to weigh life differently for different peoples. This lamentable vision was never more stark than in the way democratic nations sanctioned what came to be the reckless killing of children in Iraq.⁴

The aim of the present *Lancet* series is to erase the excuse of ignorance for public and political inaction once and for all. If we now continue to fail children under threat, we will be delivering a verdict of wanton inhumanity against ourselves. We will be a knowing party to an entirely preventable mass destruction of human life. The weapon that will be wielded in this crime will not be a bomb, a biological agent, or an aeroplane. It will be something far more sinister—withdrawal from the universe of human reason and compassion into a national solipsism that degrades the values that we claim to revere.

I am optimistic that the revivification of child survival as a global goal will succeed. The public's response to the South-Asian tsunami reflected a deep desire to contribute materially to acute human devastation. This innate longing within each of us to entwine our futures with those of others when faced with a common threat suggests a profound biological capacity—indeed, drive—for altruism. The way in which we respond to the critical situation facing children in the least-developed countries of the world will test the moral and physical limits of our species in new and extreme ways.

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- 2 Sachs JD, McArthur JW. The Millennium Project: a plan for reaching the Millennium Development Goals. *Lancet* 2005; **305**: 347–53.
- 3 Horton R. UNICEF Leadership 2005–2015: a call for strategic change. *Lancet* 2004; **364**: 2071–74.
- 4 Roberts L, Lafta R, Garfield R, Khudhairi J, Burnham G. Mortality before and after the 2003 invasion of Iraq: cluster sample survey. *Lancet* 2004; **364**: 1857–64.