A new Global Investment Framework for Women’s and Children’s Health

On behalf of the Study Group for the Global Investment Framework for Women’s and Children’s Health
Why an investment framework?

- Recommendation by independent Expert Review Group
- An opportunity to bring various RMNCH initiatives together

Family Planning 2020

Global action plan for prevention and control of pneumonia (GAPP)
What is new?

- Estimating the effects of investment on RMNCH across the continuum of care, including e.g., family planning, and stillbirths;

- Extending the time-frame to 2035;

- In addition to cost and impact, analyzing the economic and social returns on investment.
Conceptual framework

[Diagram showing strategic and equitable investments in key enablers and interventions, health & nutrition gains, and wider societal gains.]

Cross-cutting issues
Social determinants of health including education, living environment, roads, transport and gender, as well as equity and human rights

Context
Existing health systems and service delivery, current levels of health expenditure, epidemiological and demographic transitions, changes in the level and distribution of wealth, food security, climate change, migration and conflict.
75 Countdown to 2015 countries
Accounting for > 95% of maternal and child deaths worldwide

* South Sudan excluded due to data limitations
Six packages with 50 interventions for which health outcomes can be modeled

1. Modern family planning methods
2. Maternal and newborn Health
3. Malaria
4. HIV/AIDS
5. Immunization
6. Child health

The analysis does not include water supply, sanitation and hygiene, girls’ education, gender empowerment, and food fortification.
Shifting gear to accelerate progress...

Intervention Coverage (%), 74 Countdown countries, 3 scenarios

Some examples:

- Post-abortion case management
- Skilled care at birth
- Pneumococcal vaccine
- Pediatric ART
- Oral Rehydration Therapy - ORS

- **Current (2012) coverage maintained (LOW)**
- **Historic trends of coverage increases (since 1990) continue at current rates (MEDIUM)**
- **Accelerated scale-up (HIGH)**

Note: pneumococcal vaccine predictions for Medium and High are based on GAVI forecasts.
Shifting gear to accelerate progress...

Intervention Coverage (%), 74 Countdown countries, 3 scenarios

Some examples:

- Skilled Birth Assistance during labor
- Pneumonia treatment in children 0-4 years
- Oral Rehydration Therapy with ORS in children 0-4 years

Historic trends of coverage increases continue (MEDIUM)

Accelerated scale-up (HIGH)
...would bring significant reductions in child mortality

Average under-five mortality rate (74 countries)
Deaths in children under five years of age per 1,000 live births

The HIGH scenario would prevent (2013-2035):
• Close to 150 million child deaths, of which 60 million newborn deaths
• More than 32 million stillbirths
...and maternal mortality

Average maternal mortality ratio (74 countries)
Deaths per 100 000 live births

The HIGH scenario would prevent (2013-2035):
- More than 5.3 million maternal deaths
Investments in family planning contribute significantly to overall reduction in mortality

Reducing unintended pregnancies through increasing access to contraceptives* would avert 54% of total preventable** maternal deaths and 47% of preventable** child deaths

* Family planning through contraceptive use increases based on “best performer” trends, with the rate of growth restricted to a maximum of 3% per year. The scale-up stops when TFR reaches 2.1 or CPR reaches 85%. ** in our model, high compared to low scenario
Investment is substantial but affordable

An additional average US$ 30 billion /year, equivalent to US$ 5/ capita /year (average 74 countries)*

Per capita estimates in US$ (2011) in year 2035

- 12 Upper middle /high income
- 27 Lower middle income
- 35 Low income

15 bn in LMICs (47%)
6 bn in LICs (26%)
9 bn in HMICs (28%)

* All costs expressed in 2011 US$
Investment needs differ across countries

Costs of HIGH scenario relative to LOW, US$ (2011) billion

Est. additional cost in 2035, by region, 6 packages, US$ bn

- Maternal and Newborn
- Child Health
- Family Planning
- Immunization
- HIV
- Malaria

Interventions

RMNCH programme management costs including adolescents and cash transfers

Health systems
There are strong economic and social benefits

Benefits exceed costs by a factor approaching 9:1 by 2035: >30:1 by 2070

Benefits (by type) and cost of interventions, share of GDP (%), to 2035: high scenario relative to low scenario; 74 countries total.
These benefits derive from lives saved, morbidity averted and the demographic dividend from reducing unwanted pregnancies.

Benefits exceed costs by a factor approaching 9:1 by 2035; > 30:1 by 2070.

Benefits (by source) and cost of interventions, share of GDP (%), to 2035: high scenario relative to low scenario; 74 countries total.
Making a strong investment case at country level

The investment framework can serve as a guide to countries to optimize investments in women's and children's health over the next two decades. WHO and partners provide technical support to countries for the development of national strategies, policies and plans that identify high impact interventions to improve women’s and children’s health, as part of sector wide health plans. Countries are supported to use the OneHealth Tool for linking national health plans to impact estimates, a resource envelope and a budget.
The costs are affordable. The returns are high. The time is now.