

ENDING PREVENTABLE CHILD AND MATERNAL DEATHS



5.9 million
children under
the age of five
die each year

45%
die within the first
28 days of life

800+
women die every day
from pregnancy and
childbirth

>50%
drop in
child mortality
since 1990

19,000
fewer daily child
deaths than
25 years ago

The vast majority of child and maternal deaths occur in the developing world, where access to basic health care is often lacking. **Scaling up basic health services and proven methods for preventing and treating life-threatening diseases and conditions will ensure that children around the world survive and thrive and that women do not die while giving life.**

US INVESTMENT

In 2012, the United States reaffirmed its promise to work with global partners to end preventable child and maternal deaths within a generation by leading the Child Survival Call to Action. Subsequently endorsed by more than 175 partner governments around the world, this commitment underpins a global movement to prevent needless death. To honor this pledge, the United States must continue its leadership in child and maternal health by supporting cost-effective, high-impact programs and scaling up innovations that can change the course of disease.

PATH partners with the US government to identify global health needs and adapt, design, develop, and advance solutions targeted at saving the lives of women and children.

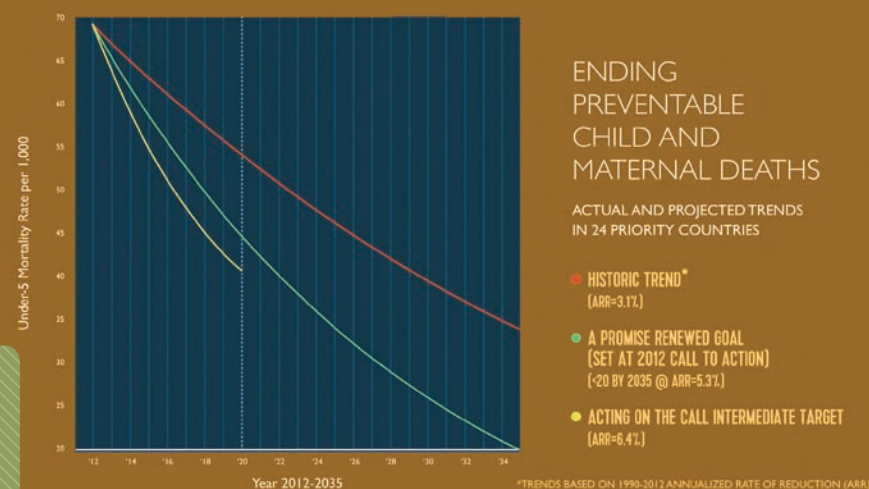
The US government plays a critical role in supporting successful programs to lower morbidity and mortality, coordinating and delivering high-impact interventions, and driving lifesaving innovation.



PATH/Evelyn Hockstein

ACTING ON THE CALL: An action plan for child and maternal survival

In June 2014, the US Agency for International Development (USAID) released *Acting on the Call*, outlining the vision for accelerating progress in child and maternal health. The report articulates the steps to bring every country to “best performer” status, which would save the lives of 15 million children and nearly 600,000 women by 2020. *Acting on the Call* provides a roadmap to change the course of health for women and children in priority countries—saving more lives, more rapidly.





Malaria vaccine development

PATH has worked with partners, including the Kenya Medical Research Institute/Walter Reed trial site, to bring a malaria vaccine candidate—RTS,S—through Phase 3 testing. RTS,S has now been recommended for pilot implementations in Africa.

Simple use of antiseptic
could save
1 million newborns
over the next 15 years at a
cost of less than
50 cents a dose

PATH has **more than 100** health technologies and **80** system and service innovation projects in our portfolio.

Reducing malaria infections in pregnant women and children

Despite significant declines in mortality, malaria still caused more than 430,000 deaths in 2015, including more than 300,000 among children under five, according to the World Health Organization's World Malaria Report. In addition to extensive malaria elimination and vaccine research efforts, PATH focuses on preventing malaria infection in pregnancy, which can result in significant risks to the health of mothers and children, including increased risk of miscarriage, stillbirth, and low birth weight. PATH works with the WHO, USAID, and other partners around the world to increase the use of insecticide-treated bednets and reduce the number of malaria infections in pregnancy.

Preventing malnutrition

More than 2 billion people around the world suffer from micronutrient malnutrition, which means they do not get the vitamins and minerals they need to thrive. Also known as “hidden hunger” because it often has no visible warning signs, micronutrient malnutrition is a major contributing factor to child deaths worldwide, and also negatively impacts productivity and mental development. PATH works on nutrition technologies such as rice fortification and partners with global health colleagues and communities around the world to promote cost-effective, integrated health interventions aimed at making sure mothers and children get the nutrients they need.

A powerful weapon against newborn infections

In developing countries, the simple act of cutting a newborn's umbilical cord can too often create an entry point for deadly infections. PATH leads an international effort that began in 2007 to adapt a proven antiseptic called chlorhexidine for use on the cord after it is cut. This innovative use of chlorhexidine can prevent deadly infections from entering a baby's body and could save an estimated 1 million newborns over the next 15 years at a cost of less than 50 cents per dose.

WHO has added the product to its Essential Medicines List and included it in recent guidelines on postnatal care. Currently, chlorhexidine is being scaled up in 10 countries, and policymakers in more than 15 other countries have expressed interest in introducing it. Importantly, local manufacturers are producing it in four countries: Nepal, Bangladesh, Nigeria, and Kenya.