

Child Survival

UNICEF Australia's Priority Programs Results
2017 – 2020



UNICEF Australia's Program Coordinator for Child Survival, Bethany Stirling, supported delivery of PPE to Timor-Leste in June 2020. The equipment, totalling more than 100,000 individual items, included surgical and N95 masks, face shields, safety goggles, surgical and examination gloves, protective coveralls and recyclable shoe covers. The PPE was delivered from Sydney to more than 70 health centres across Timor-Leste to ensure routine health services could continue safely in Timor amidst fears of the spread of COVID-19.



The first thing we would like to say is thank you.

Thank you for generously supporting UNICEF Australia's work to improve health and nutrition for children, families and their communities around the world. Your support is having a huge impact for children, making sure that we are able to reach the most vulnerable, and that no one is left behind.



1,539,242

people benefitted from improved quality of and access to maternal, newborn and child health services



261,709

children benefitted from interventions to reduce acute malnutrition and stunting



9,261

health workers received training in delivering health services



6,316

children immunised against preventable diseases



298,341

people received key messages on health and nutrition



52

health facilities with improved quality of maternal and child health services



Where we work

This map highlights the countries in the world where Priority Programs for children, families and communities were implemented.



Cambodia

Child Protection:

Protect children from violence, abuse, exploitation, and unnecessary family separation.

Early Childhood Development:

Prioritising inclusion to meet the holistic needs of children.



Pacific

Child Survival:

Saving lives by protecting children against rotavirus in Kiribati.

Drone delivery of vaccines and health supplies to remote, inaccessible communities in Vanuatu.

Sustainable introduction of rotavirus, pneumococcal and HPV vaccines in 9 Pacific Island Countries to improve child survival.

Early Childhood Development:

Investing in Guadalcanal's best human capital – children.

WASH:

Reach for the Stars: improving access to WASH in schools using the Three Star Approach in Fiji.

COVID-19 Response:

COVID-19 support to health, nutrition, WASH and communication.

COVID-19 response to education in the Solomon Islands.



Laos

Child Protection:

Strengthening community based child protection services for vulnerable children.

Child Survival:

Addressing chronic malnutrition in rural communities.

Early Childhood Development:

Improving access to early learning for remote communities from ethnic minorities.

WASH:

Improving access to WASH in rural Savannakhet and providing support to communities in the flood impacted region of Attapeu.

COVID-19 Response:

COVID-19 support to education, ECD and child protection.

Social Protection:

Leaving no one behind: establishing the basis for social protection floors.



Indonesia

Child Survival:

Scaling up the integrated management of acute malnutrition.



Myanmar

Child Protection:

An integrated child protection system for the prevention and response to violence against children.

WASH:

Thant Shin Star: Improving access to WASH in remote rural schools by piloting the Three Star Approach in Chin and Kachin states



Papua New Guinea

Child Protection:

Supporting accelerated implementation of Child Protection Act and National Child Protection Policy.

Child Survival:

Roll out of early essential newborn care (EENC) with a focus on prevention and management of neonatal hypothermia.

Early Childhood Development:

Ensuring equitable access to ECD for all children in Papua New Guinea.

COVID-19 Response:

Responding to child protection and nutrition needs in COVID-19 response.



Timor-Leste

Child Protection:

Momentum and Opportunity: Strengthening the Child and Family Welfare System.

Child Survival:

Improvement of healthcare quality for maternal and child survival.

Early Childhood Development:

Inspiring teachers and accelerating learning through play.

COVID-19 Response:

Addressing the secondary impacts of COVID-19.



Zimbabwe

Child Survival:

Improving child survival through quality maternal, newborn and child health services in rural health facilities and communities.

WASH:

Improving access to WASH in remote and isolated schools.



Bangladesh

Early Childhood Development:

Ensuring children in Rohingya refugee communities don't miss out on the best start in life.

Foreword

Health is intrinsically linked with all aspects of a child’s life, influencing their physical and mental growth and development, their access to education and academic attainment, and their ability to engage socially with their peers and community. Protecting and promoting the health of children is therefore essential to improving the lives of children, families and communities worldwide.

Child mortality

Since 1990 under-five mortality has dropped by almost 60%. However, in Kiribati, PNG, Laos, Zimbabwe and Timor-Leste the rates of under-five deaths remain above the global average, and far above the SDG target. In 2019, deaths of newborns during their first month of life accounted for 50% of under five deaths in the East Asia and Pacific region. The majority of these deaths were preventable, caused by birth complications, pneumonia, respiratory infections, diarrhoea, and neonatal sepsis.

Nutrition

A poor diet can stunt a child and hinder brain development, with lifelong impacts. Well-nourished children are better able to grow and

learn, to participate in and contribute to their communities, and to be resilient in the face of disease, disasters, and other crises. Yet rates of reduction in stunting (chronic malnutrition), wasting (acute malnutrition) and micronutrient deficiencies in our region are stagnating.

Immunisation

Nearly one in five infants in the world miss out on the basic vaccines they need to stay alive and healthy. As a result, over 1.5 million children die annually from diseases that can be prevented by vaccination.

COVID-19

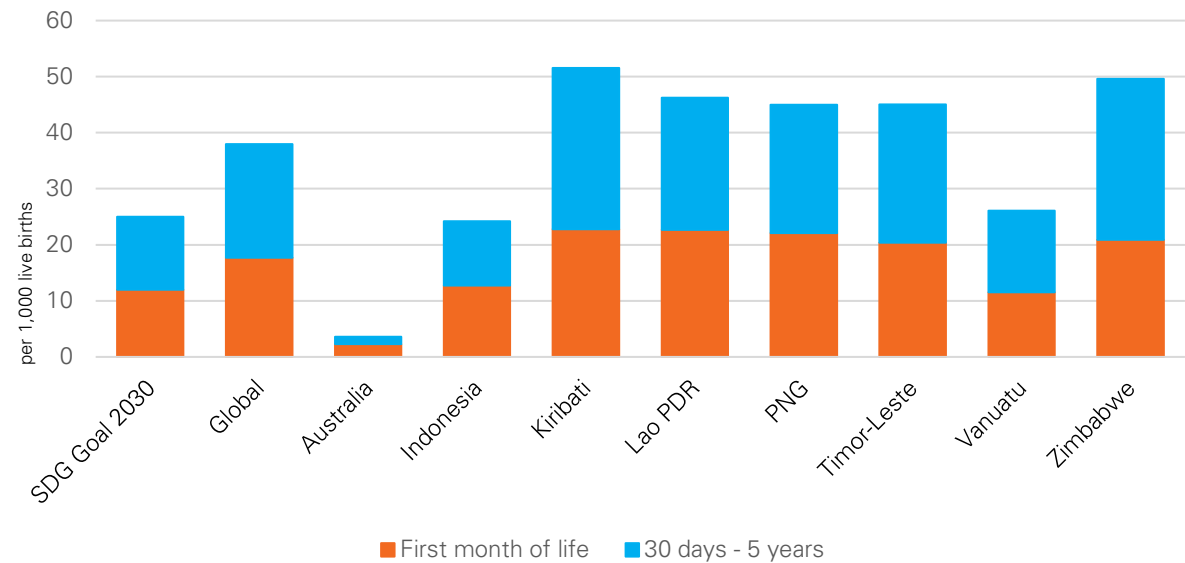
The COVID-19 pandemic has highlighted the critical need to strengthen fragile health systems to

prepare for and respond to the outbreak, as well as continue essential health services.

In 2020 throughout the world, immunisation campaigns were postponed, and supply chains of medical supplies were disrupted, meaning millions of children could miss out on lifesaving vaccines. Fewer women have attended health care facilities to deliver birth and receive health check-ups.

Reductions in routine health service coverage and an increase in acute malnutrition is leading to estimates of **additional** 1.2 million under-five deaths occurring due to the pandemic. These disruptions threaten to reverse hard-won progress on child health and survival indicators over the last few decades.

Neonatal and Under 5 Mortality



“Supporting all levels of the health system, from frontline health workers to caregivers, not only helps babies and their mothers survive, but thrive.”

- Bethany Stirling, International Programs Coordinator, Child Survival, UNICEF Australia

UNICEF Australia's Child Survival Program

UNICEF Australia's Child Survival program takes a [Health Systems Strengthening \(HSS\) approach](#), ensuring projects are contributing to sustainable improvements in access to and quality of health and nutrition services, and health information for children and families, for improved child survival outcomes.

Children need strong, resilient and inclusive health systems to survive and thrive.

UNICEF focuses on all areas of the health system, from community village health workers and outreach services to health centres and hospitals, as well as working with district governments. UNICEF works to strengthen health systems at all levels through improving procurement and supply chains, improving the quality and affordability of health care, training health workers, strengthening

health care management, improving health data, implementing research to improve health outcomes, and supporting governments on national management of health to reach the most vulnerable.

The World Health Organisation states that ending preventable child deaths can be achieved through ["providing immediate and exclusive breastfeeding; improving access to](#)

[skilled health professionals for antenatal, birth, and postnatal care; improving access to nutrition and micronutrients; promoting knowledge of danger signs among family members; improving access to water, sanitation, and hygiene and providing immunizations."](#) All these key interventions are the focus of the UNICEF Australia Child Survival program.



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Over the 2017-2020 report period, UNICEF Australia supported 10 child survival projects in Indonesia, Laos, the Pacific (Cook Islands, Kiribati, Nauru, Niue, Samoa, Tokelau, Tonga, Tuvalu, Vanuatu), Papua New Guinea (PNG), Timor-Leste and Zimbabwe. These projects were identified as facing specific challenges in addressing their maternal, neonatal and child health priorities. Projects were implemented with each country's Ministry of Health to ensure barriers for mothers and their children to access high quality health care were addressed through building strong, sustainable health systems.

These child survival projects focused on improving the quality of and access to health and nutrition services for children and their families, increasing the capacity and confidence of health workers to deliver high quality health interventions, and increasing community awareness about positive health and nutrition behaviours, with a focus on maternal and child health.

In [Papua New Guinea](#) and [Zimbabwe](#), 286 health professionals received training on essential maternal and newborn care to reduce mortality. Strong results were seen in both countries, with the fatality rate of low birthweight babies in PNG reducing from 37% to 4% in just two years.

In [Laos](#) and [Indonesia](#), UNICEF worked with provincial governments to model innovative approaches to preventing and treating malnutrition, with governments in both countries committing to sustain and scale up these successful new approaches.

In [Kiribati](#), the introduction of the rotavirus vaccine has informed the introduction of three new vaccines in [nine Pacific Island countries](#) and will also inform the introduction of a COVID vaccine, once developed.

The Child Survival program reached a total of 1,591,592 beneficiaries, including [1,057,536 children](#) under five.

The projects strengthened the capacity of governments and communities, allowing for projects to be scaled up, and lessons shared for future health development.

Achievements in the Child Survival program show value for money through building the capacity of health systems to have sustainable outcomes and significant reach across countries to the most vulnerable children and communities.



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Inspiring health workers to improve health quality in Timor Leste

1 in 51 newborns die before they reach four weeks old in Timor-Leste, which accounts for 44% of total under-five deaths. Many of these deaths are from preventable and treatable causes.

The overall goal of this project, introduced in 2018, is to strengthen the capacity of the health system to deliver quality health care before, during and after birth, as well as to understand, address the drivers of and reduce newborn deaths.

Introduction and rollout of National Healthcare Quality Improvement

Through UNICEF's support, a Strategic Plan for National Healthcare Quality Improvement was developed, approved and launched by the Ministry of Health. 12 national trainers and 16 municipal health representatives were trained in Viqueque municipality. As a result, two health facilities are now providing improved quality health services according to the Quality Improvement standard, reaching 2,506 mothers and 9,060 children under five.

This standard improves quality of care to ensure it is safe, effective, patient-centred, timely, efficient and equitable. Improvements include simple solutions, such as access to appropriate equipment and medical supplies, electricity, sanitation, respect and privacy during childbirth. The Ministry of Health successfully scaled up Quality Improvement teams in all 13 municipalities across the country, with the potential to improve standards of health services nationally.

Auditing Newborn Deaths

Newborn deaths are now being monitored in the health system for the first time, giving health workers the data and knowledge to enable them to address challenges and reduce newborn mortality. 45 national and 40 municipality health representatives have been trained in conducting newborn death audits and initial data has been analysed to inform improvements. Health facilities with high rates of mortality are being prioritised to understand the causes and reduce preventable newborn deaths.

Improving Water, Sanitation and Hygiene in Health Facilities

Access to clean water, sanitation and hygiene (WASH) in health facilities has been identified as a key barrier for improving the quality of health services. The project undertook a comprehensive mapping of WASH in health services, revealing that an estimated 70% of health posts had no access to water. This has huge implications for a mother who is giving birth and needs to bring her own clean water to the health facility. As part of this project, assessment of five target community health centres has been completed, with installation of infrastructure such as basins, toilets, water tanks and pumps to commence in the coming year.

Health Centre Accessibility

Five target community health centres and a referral hospital in Baucau were assessed to improve their disability accessibility. UNICEF is now working with the Ministry of Health to implement their improvement plan.

Nurse Martinho and midwife Leopoldina work at Ossu Community Health Centre (CHC) in Viqueque and were trained through the Quality Improvement program.



"It provides an opportunity for us to identify our own weaknesses and fix them in order to better serve our patients... it is a continuous wake-up call to keep improving our work."

- Leopoldina, midwife.

The health staff at Ossu CHC were supported by local businesspeople to build a patient waiting area, realising the benefits in providing separate spaces for family planning and counselling and the protection, safety and respect this provides their patients.

Innovative solutions to improve health outcomes for mothers and babies in PNG



Papua New Guinea has some of the worst maternal and child health indicators in the Pacific region, with around 5,000-6,000 newborns under four weeks dying each year, mainly from preventable causes, and limited access to quality maternity and reproductive health services. In 2018, UNICEF introduced an Early Essential Newborn Care (EENC) pilot project in Western Highlands Province to reduce maternal and neonatal mortality. In just two years, the EENC package has been rolled out to 30 of the 45 health facilities in Western Highlands Province, and village health volunteers (VHVs) have been integrated within the health system in Tambul Nebilyer District.

Early Essential Newborn Care in Health Facilities

- The fatality rate of low birthweight babies reduced from 37% in 2018 to just 4% in 2020 due to significant improvements in the quality of care and health outcomes for newborns in the provincial hospital.
- Over 6,200 births have now been supervised at a health facility, an increase of 34% since 2018
- Newborns reached with early essential newborn care and breastfeeding within an hour of delivery has increased from 0% to 98%, and low birthweight / premature newborns receiving skin-to-skin care and swaddling increased from 0% to 80%.
- Nearly 250 health workers were trained and 30 health facilities are now fully equipped with lifesaving equipment to deliver health services to mothers and babies. More than 2,298 sick women and children benefitted through use of the medical equipment supplied.
- Over 250 babies were resuscitated and saved. 14 mothers with severe bleeding and shock after delivery were revived successfully.

Community-based Maternal-Newborn Health

- Over 80 village health volunteers (VHVs) were trained and equipped on community-based maternal and child health care. As a result, supervised hospital deliveries increased from 32 to 88%, antenatal care increased from 28 to 73%, and postnatal care increased from 20 to 78%.
- VHVs conducted 415 community meetings, reaching 100% of the district (30,586 people) with messaging on awareness and positive attitudes towards key maternal and newborn health care practices.
- 40% of mothers noted fathers or other male members of the family were involved in skin-to-skin care and other aspects of childcare, previously unheard of in PNG.

The success of this pilot project has resulted in the PNG Government scaling up the EENC program nationwide to all health facilities and health worker training curriculums. This EENC program is also now being introduced in Vanuatu as a model approach.

"I have worked here for 25 years and before, if a baby weighed less than 1.5 kilograms, they would die. After implementing kangaroo mother care, babies as small as 1 kilogram are surviving. It is really working," - Carol, nurse.



Isiah was born weighing just 1.2 kilograms and had many medical problems - jaundice, sepsis, anaemia, pneumonia and constipation. Hospital staff taught his mother, Julie, how to wrap Isiah on her chest regularly to keep him warm, to encourage weight gain and to fight infection. Isiah wore a Bebi Kol Kilok (hypothermia bracelet) to alert Julie when his temperature dropped so that she could start skin-to-skin care to warm him up. After two months of regular skin-to-skin care and treatment, Isiah was discharged from the hospital weighing more than 2.5 kilograms. Now, Isiah is a happy and healthy 10 month old toddler.

Reaching remote communities for healthy childbirth in Zimbabwe



Timing and access to quality maternal and newborn services and healthcare, including the presence of a skilled birth attendant and access to emergency obstetric and newborn care, are significant factors to survival. In Zimbabwe this is a significant challenge given that 70% of the population live in rural areas with limited access to health facilities.

Clinical mentorship was successfully introduced to develop the capacity of emergency teams of junior health providers and improve emergency obstetric and newborn care (EmONC) in 20 districts. Some achievements include:

- 100 health workers received mentorship training and support.
- Shamva District Hospital surgical ward has been repaired, including renovation and installation of essential equipment to enable the health team to provide EmONC services.
- After two years of clinical mentorship the average rate of caesarean sections performed in

target district hospitals increased from 2% in 2016 to 5.5% in 2019, showing increased capacity of junior emergency health teams. Unfortunately, due to the COVID-19 pandemic lockdown, the average rate of caesarean sections has since declined. UNICEF is working with the Ministry of Health and Child Care to continue essential health services and to reverse this decline.

- Due to its success, clinical mentorship has now been adopted into the government health system who have full leadership and coordination.

Community health services in these 20 districts were also strengthened through training, supportive supervision, and provision of essential health equipment. Some achievements include:

- Over 6,000 village health workers (VHWs) in 20 supported districts received supportive supervision and over 5,800 VHWs were provided with utility kits containing items such as uniforms, bicycles, scales, thermometers, timers, scissors, torches, batteries and protective wear. Job aides were developed to assist VHWs in their role.
- Over 500 rural health professionals received training and provided supportive supervision to VHWs.
- Over 113,000 women were reached with messaging on positive health and nutrition.
- UNICEF supported the development of the new National Community Health Strategy 2020-2025 and advocacy resulted in increased training for VHWs and an increased stipend and incentive to be paid by the government.



District junior doctor, Dr. Goronga, had completed his theoretical training, but had limited experience dealing with birth complications. However when 34-year-old Rudo and her baby needed an emergency caesarean section, he approached the theatre with confidence because he had the assistance of his clinical mentor, skilled obstetrics and gynaecology specialist, Dr. Murove. **"The mentorship has been very beneficial ... we are realising a decrease in maternal mortality and improvement in managing the complications that we are having at a district level,"** he says. With enhanced skills, doctors at Binga district hospital are able to treat mothers and their babies in emergencies and no longer need to refer patients to the provincial hospital 420km away.

Protecting children against preventable diseases in the Pacific

In the Pacific, preventable diseases, like diarrhoea and pneumonia are amongst the top killers of children. However, vaccines exist which can protect against these diseases, keeping children healthy and saving lives. UNICEF Australia's Child Survival project is now supporting governments in nine Pacific Island Countries and Territories to introduce three lifesaving vaccines:

- **Pneumococcal conjugate vaccine (PCV)** which protects against diseases such as meningitis, and pneumonia;
- **Rotavirus vaccine** to prevent a severe form of diarrhoea; and
- **Human papilloma virus (HPV)** vaccine which protects against some forms of cervical cancer.

By introducing these vaccines into the routine immunisation program, Pacific countries will be able to protect current and future generations, allowing children to grow up healthy and well.

Bwebwenraoi sits in the 'waiting room', a wooden bench outside the simple brick clinic in a village Kiribati, cradling her newborn son, Tapiang. She waits patiently but has the quiet determination of a mother on a mission. "I came to get the rotavirus vaccination for Tapiang as he is six weeks old now," she says. This mother of three knows how important this vaccine is; her 1-year-old son Uriam is currently in hospital with diarrhoea, the same illness this vaccine will help to prevent. **Now that the rotavirus vaccine has been introduced into Kiribati, all newborn babies can be protected against this potentially deadly illness.**

complex process, requiring systematic work to ensure the health system can successfully roll it out and sustain its delivery to reach all targeted individuals. This includes activities such as: developing and delivering training for health workers to safely deliver the new vaccine, ensuring that all health centres have enough cold chain facilities to keep vaccines at a safe temperature, strengthening supply chain to ensure health facilities have stocks of what they need, and ensuring all families have access to immunisation services and information.

In Kiribati, UNICEF Australia supported a multi year project for the Government's introduction of the rotavirus vaccine in 2015 to implement the above activities, ensuring high coverage and ongoing delivery of a vaccine. During 2018-2019, over 5,000 babies were immunised against rotavirus, with over 85% national coverage just a couple of years after vaccine introduction.

The project's evaluation found the approach to be a success, with reductions of diarrhoea-related hospital admissions, and fewer overall cases of diarrhoea reported by health workers. This immediate impact is being sustained through ongoing support from UNICEF to ensure that all immunisation activities are fully embedded within the health system.

The successes and lessons learned from the experience in Kiribati have been used to inform the introduction of rotavirus, PCV and HPV vaccines in Cook Islands, Nauru, Niue, Samoa, Tokelau, Tonga, Tuvalu and Vanuatu. This has seen the successful updating of national immunisation policies to include these vaccines and commencement of vaccine procurement supplies such as syringes and cold chain equipment.

Supporting new vaccine introduction across the Pacific is also positioning countries to prepare for the eventual introduction of a vaccine against COVID-19 as quickly and effectively as possible to help bring a global end to the acute phase of the pandemic.



Drone delivery of lifesaving vaccines in Vanuatu

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With UNICEF's support, the Vanuatu Government contracted commercial drone companies to transport vaccines to remote areas in an innovative pilot designed to test feasibility and provide valuable information and recommendations for future use.

Vaccines are difficult to transport as they need to be carried at specific temperatures. Warm weather locations like Vanuatu, which is made up of more than 80 remote, mountainous islands stretching across 1,300 kilometres and with limited roads, is a particularly difficult location for vaccine delivery. As a result, almost 1 in 5 of the country's children miss out on their essential childhood vaccines.

The Child Survival project in Vanuatu successfully trialled using drones for vaccine delivery for the first time, with the Vanuatu Ministry of Health, thanks to funding from the Australian Government's innovationXchange grant.

Prior to the drone trial, nurses had to travel by boats, which were often cancelled due to weather conditions, or trek across mountainous terrain for several hours carrying cold chain equipment to keep the vaccines cool. The drone trial demonstrated the possibility of making this delivery in just 40 minutes, with safe arrival of the vaccine to remote health posts.

During the nine-week trial, 17 kilograms of vaccines and supplies were delivered to 33 locations in

Vanuatu. All vaccines remained within the acceptable range of temperature. As a result, 976 children and 90 pregnant women were vaccinated with drone-delivered vaccines.

Evidence from the trials will be used to show how drones can be used commercially in similar settings around the world. This project highlighted the role that innovation can play in addressing issues of geography and equity.

In the long term, the Government of Vanuatu is considering the possibility of integrating drone delivery of vaccines into their national immunisation program and using drones more widely to distribute health supplies.

Four-week-old Joy Nowai became the world's first child to be given a vaccine delivered by drone in a remote island in the South Pacific country of Vanuatu. Joy missed her first vaccines after birth because no nurses were available in her village that week and the nearest health centre was too far for her mother, Julie, to walk.

The vaccine delivery covered almost 40 kilometres of rugged mountainous terrain, where 13 children and five pregnant women were vaccinated by Miriam, a registered nurse. Cook's Bay, a small, scattered community that does not have a health centre or electricity, is only accessible by foot or small local boats.

"It's extremely hard to carry ice boxes to keep the vaccines cool while walking across rivers, mountains, through the rain, across rocky ledges. I've relied on boats, which often get cancelled due to bad weather," said Miriam.

During the drone flight, the vaccines were carried in cold boxes with icepacks and a temperature logger. An electronic indicator is triggered if the temperature of the vaccines swings out of acceptable range.

"As the journey is often long and difficult, I can only go there once a month to vaccinate children. But now, with these drones, we can hope to reach many more children in the remotest areas of the island."

- Miriam, 55, nurse.



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Addressing chronic malnutrition in rural communities of Laos

Chronic undernutrition in children remains a significant challenge in Laos. Globally, undernutrition results in enormous human and economic costs. For example, the GDP of Laos is reduced by nearly 2.4% per year due to malnutrition, and undernutrition contributes to as much as one-third of under-5 deaths.

To address this, UNICEF has been implementing this project, aimed at addressing malnutrition in children in the first 1,000 days of life, in four provinces of Laos by:

- Providing counselling and support to parents on infant and young child feeding practices to promote age-appropriate feeding
- Supplementing the diets of children age 6-23 months with Super Kid, a micronutrient powder especially designed by UNICEF Laos to improve the diet of young children and support their physical and cognitive development
- Supporting development of national policy and strategic nutrition plans for scale up of successful nutrition programs across the country

Through this project, health workers and Lao Women's Union volunteers were supported to conduct regular health outreach days to rural and remote communities to monitor children's growth and nutrition status. They distributed Super Kid to all children in the target age range, and provided caregivers with information about feeding practices, including through cooking demonstrations and group discussion.

The approach has seen strong success, with over 230,000 children and their caregivers directly reached with Super Kid and nutrition counselling between 2017-20, and over 6,700 health workers and Lao Women's Union volunteers receiving training and ongoing support to deliver high quality nutrition services to communities.

In the provinces where the project was implemented, strong improvements were seen in overall nutritional status of children under two years old. For example, in Savannakhet, the rate of stunting (chronic malnutrition) in children under five reduced from 41% to 28%. The national rate of stunting

reduced from 44% to 33% over the same period, and although these results are also thanks to a broader range of strategic nutrition interventions, it is clear that this project is making a significant contribution.

Recognising the successes of this approach, the Ministry of Health has committed to sustaining and looking to scale up the work, following the end of the project. UNICEF and the Ministry of Health have developed and implemented national guidelines on an integrated management approach to acute malnutrition. From 2021, Provincial Health Authorities in the four provinces where this project was implemented have allocated budget towards sustaining the activities established under this project, ensuring that they can continue to benefit all children within those provinces into the future.

"It is an honour for me to help others. I don't want to see children suffering from malnutrition and I believe I can make a difference."

- Dr Lamany Lorvanxay Head of Saleuy Health Center, Huaphanh Province

Lamovong comes to the health outreach clinic every three months to ensure her son Sambom accesses regular health services as he grows through the critical first 1,000 days of his life. Today Sambom is weighed and measured to monitor his growth, and Lamovong collects a supply of Super Kid, a micronutrient powder especially designed to supplement the diet of young children to support their physical and cognitive development. Members of Lao Women's Union also give a cooking demonstration, showing how Super Kid can be added to different types of local food for best effect.



Innovative nutrition services to radically reduce child malnutrition in Indonesia

In Indonesia, over 2 million children suffer from acute malnutrition. Children with severe acute malnutrition (SAM) have historically been treated through inpatient care in health facilities and hospitals. In practice this means a small proportion of children receive and complete the treatment they need, as many families are unable to stay with their child in distant hospitals for several weeks. In addition, many children with SAM receive no treatment because screening to identify SAM is not conducted routinely in the community or in health facilities.

In 2015, UNICEF Australia began supporting a pilot nutrition project in Kupang province to increase screening and provide treatment for children with SAM in their communities - without requiring travel and long stays at a health facility. This approach was designed to maximize the coverage and successful treatment of children with SAM by identifying cases at an early stage before medical complications developed and improving their access to high quality outpatient treatment.

Additionally, health workers and volunteers provided caregivers with information on healthy infant and young child feeding practices during community health outreach days, so they were better equipped to provide for the nutritional needs of their children.

The introduction of this community-based nutrition project has seen strong success, with nearly 700 children cured from severe acute malnutrition, 37,900 children and their caregivers directly reached with malnutrition screening and nutrition counselling, and 5,500 health workers receiving training and ongoing support to deliver high quality nutrition services to communities between 2017-2020.

Introducing community-based management of malnutrition has increased detecting instances of severe acute malnutrition in children, improved access to treatment and allowed children to remain at home with their families during treatment, and increased the proportion of children who complete the treatment and are cured.

This project has radically expanded from a pilot project in one province to a national scale priority adopted by the government.

The success of this project resulted in a commitment by the Ministry of Health to scale up the approach nationwide by 2022, using their own funding. The project has been integrated into the existing national health sector plans, budget, policies and programs. In 2020 community-based management of acute malnutrition has been scaled up across all 260 stunting priority districts, reaching half the country.

The treatment of severe acute malnutrition increased from around 20,000 children in 2018 to more than 129,000 children in 2020.

As part of the project UNICEF developed a national training curriculum for acute malnutrition management which was accredited by the government. This training has now been completed by health workers and managers across 23 out of the 34 provinces, ensuring greater capacity to manage cases of acute malnutrition and reach more children.

At 18-months-old, Karno weighed the healthy weight of a three-month-old baby. During a village health outreach in Indonesia, healthcare workers found Karno was severely underweight and suffering from severe acute malnutrition. Karno was given ready-to-use therapeutic food – a peanut butter-like paste rich in vitamins and energy – to take home. His mother, Esi, also attended cooking classes, held by the community nutritionist, where she was taught how to prepare nutritious and affordable food for her family. After six weeks, Karno had recovered, having gained 2.2 kilograms.

“I want all parents to know the importance of detecting and treating malnutrition to stop this happening to other children,” Esi says.





UNICEF Australia would like to thank its supporters for their generosity in making the above-mentioned Child Survival projects possible and reaching over 1 million children under five with health, immunisation and nutrition services. The results and impacts delivered by these projects would not be possible without your support.

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