

Child Survival

Health and Nutrition in

Disasters



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Content

- **Situational Analysis (SAARC Countries)**
- **Best Practices**
- **Learnings**
- **Challenges & Way forward**



3% Area

21% population

627 million Children (36%)

Most Disaster Prone Region



“Our Future depend on how we treat our children worldwide, how much we care about their health, education & nutrition. They don’t belong to any religion, caste or country. All are one...!”

Killers of Children during Emergencies

- **Diarrhoea**
- **Respiratory diseases**
- **Measles**
- **Malnutrition**
- **Maternity related**
- **Malaria & others**

**Children are voiceless
they can't even complain**

KEY POINTS to REMEMBER

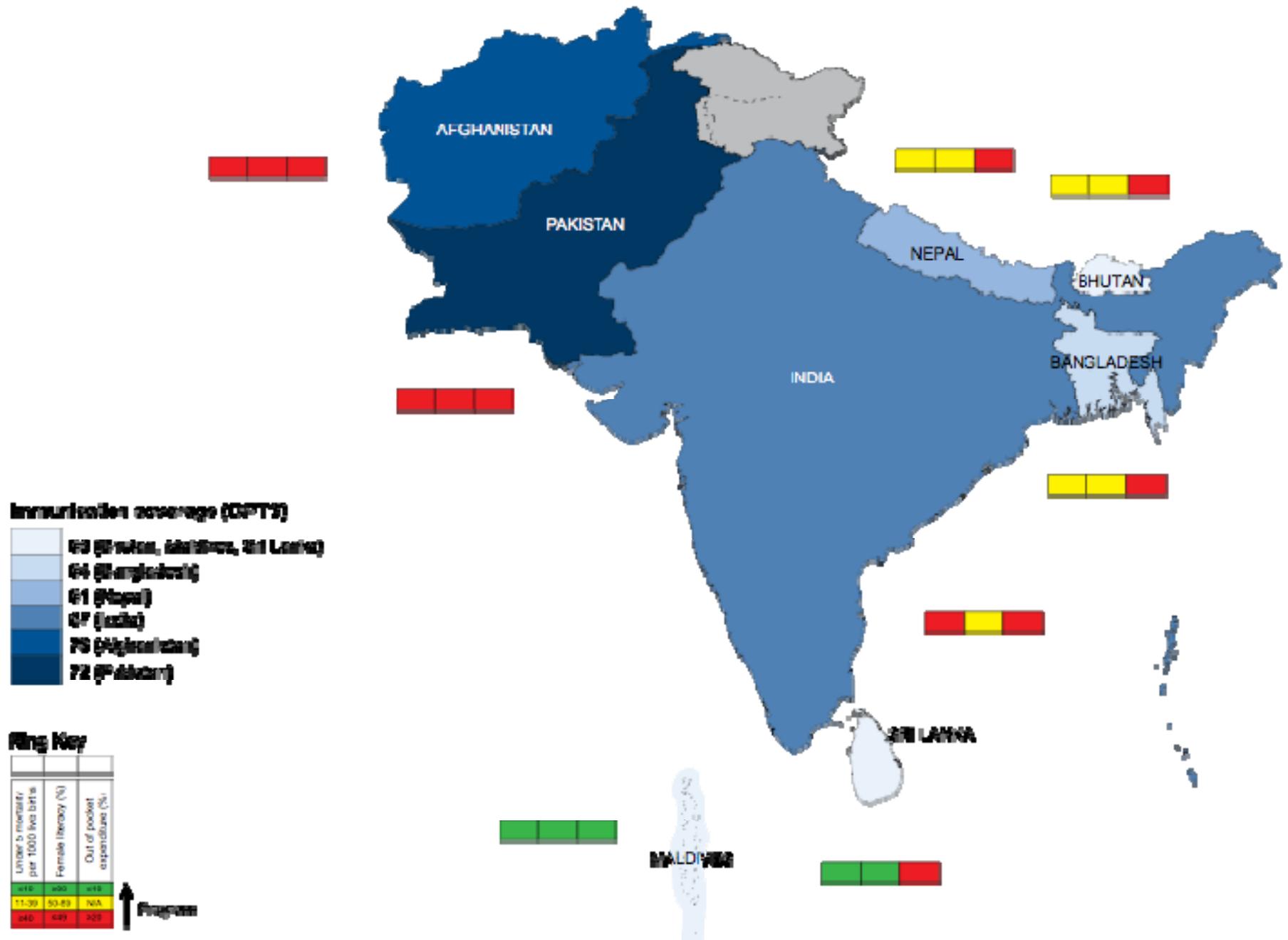
- **If you can't manage routine developmental work optimally, you can't manage disasters either**
- **Endemic disease / condition - Major concern (Rarely new diseases)**

Key determinants of Child Health during Emergencies

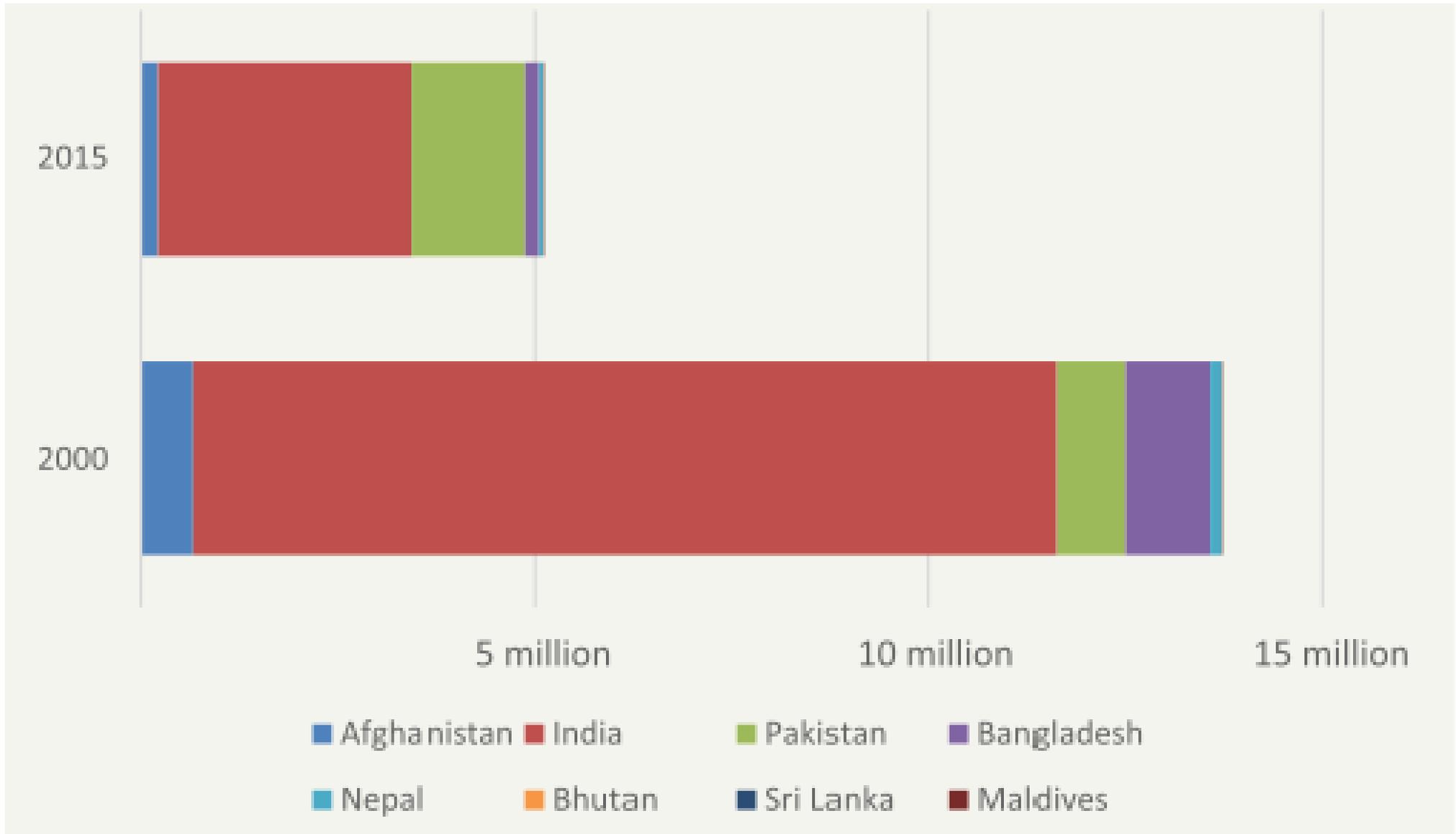
- Existing Health System of the state / country
- Immunisation rate
- Measles & Vitamin A coverage
- Malnutrition rate
- WASH condition
- Endemic Diseases
- Infants & Young Child Feeding (IYCF)

Country status

Immunisation Coverage 2015

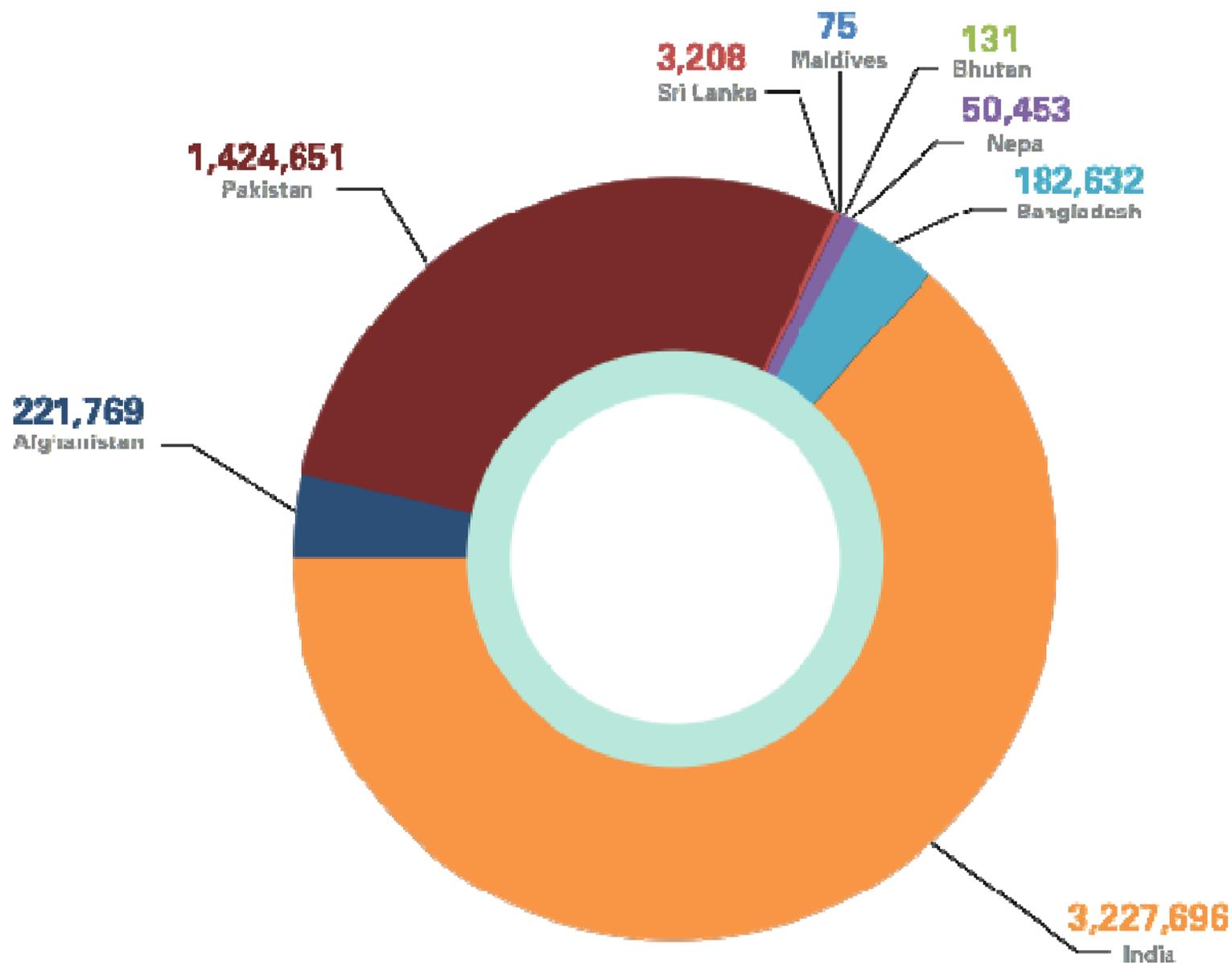


Un-Immunised Children

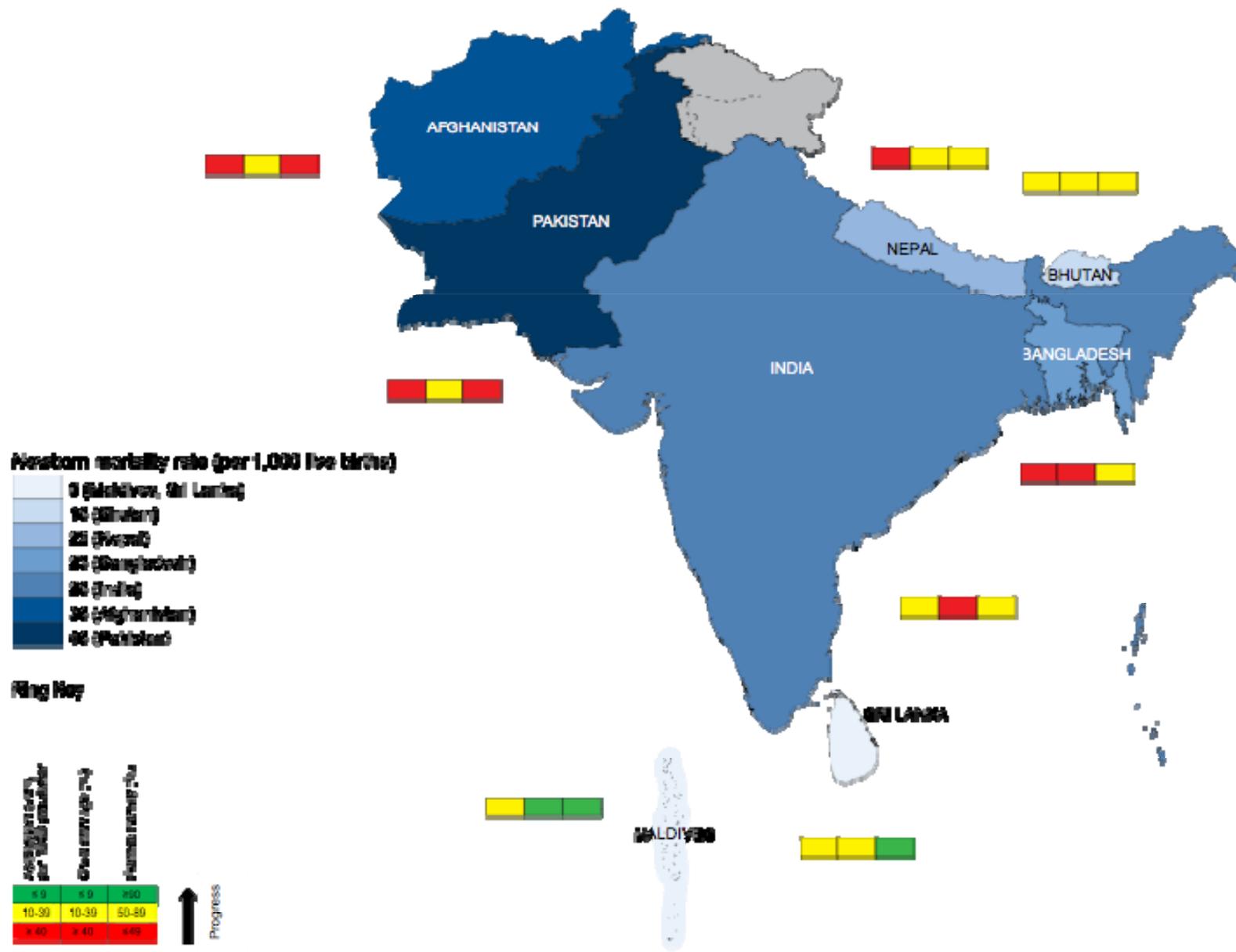


The number of under-immunised children in South Asia countries in 2015

In 2015, more than 5 million children in South Asia did not receive their third dose of DfT3.



Newborn Mortality 2015

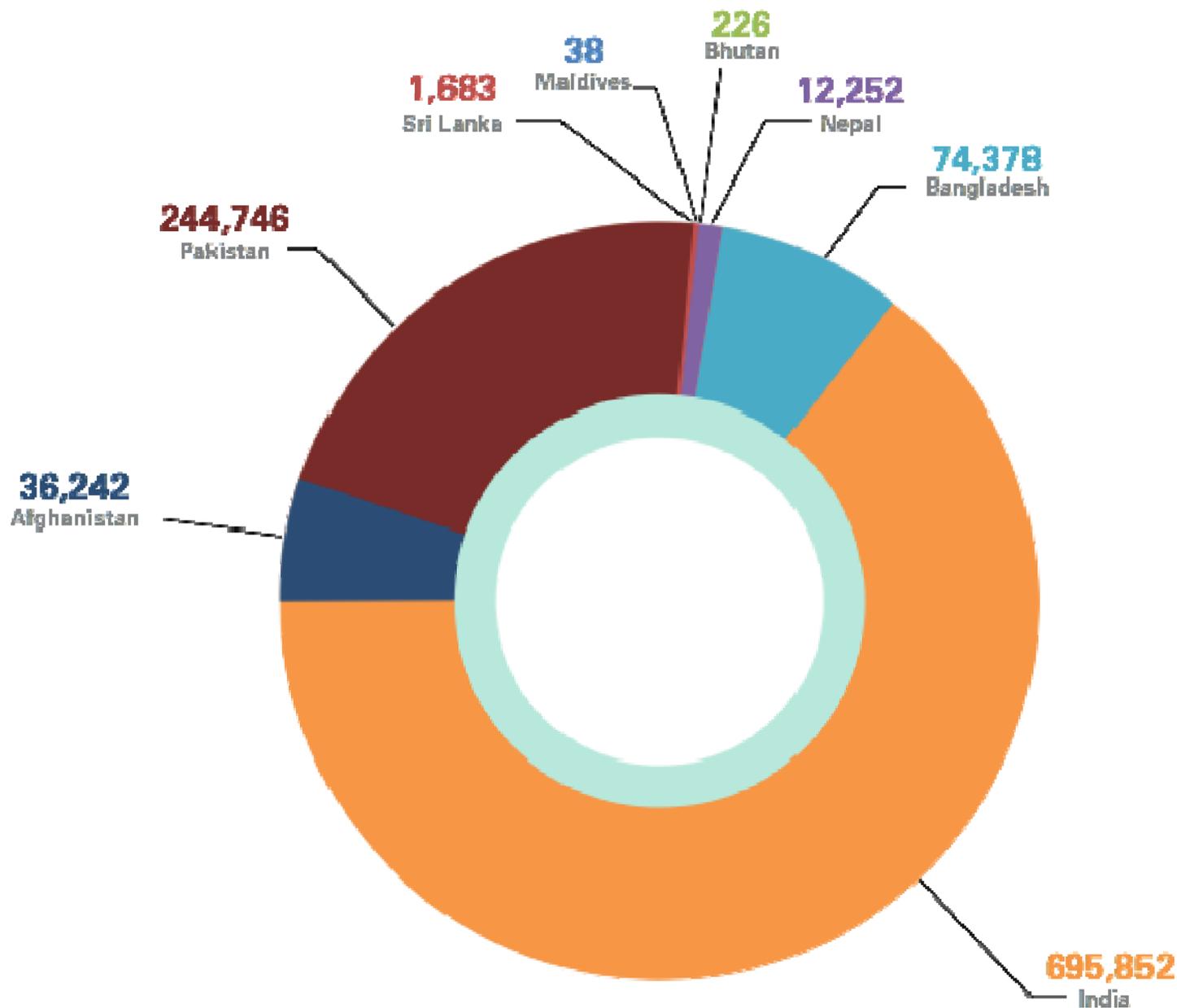


Data Sources:
 UNICEF/WHO/World Bank Group,
 UNICEF/WHO/World Bank Group and United Nations Population Fund World
 Population Database

Note: The countries and the names shown and the geographical codes or flags may
 do not necessarily correspond to the United Nations

The number of newborns who died in South Asia countries in 2015

More than one million newborns died in South Asia in 2015. Most of these deaths occurred in India, Pakistan and Bangladesh.

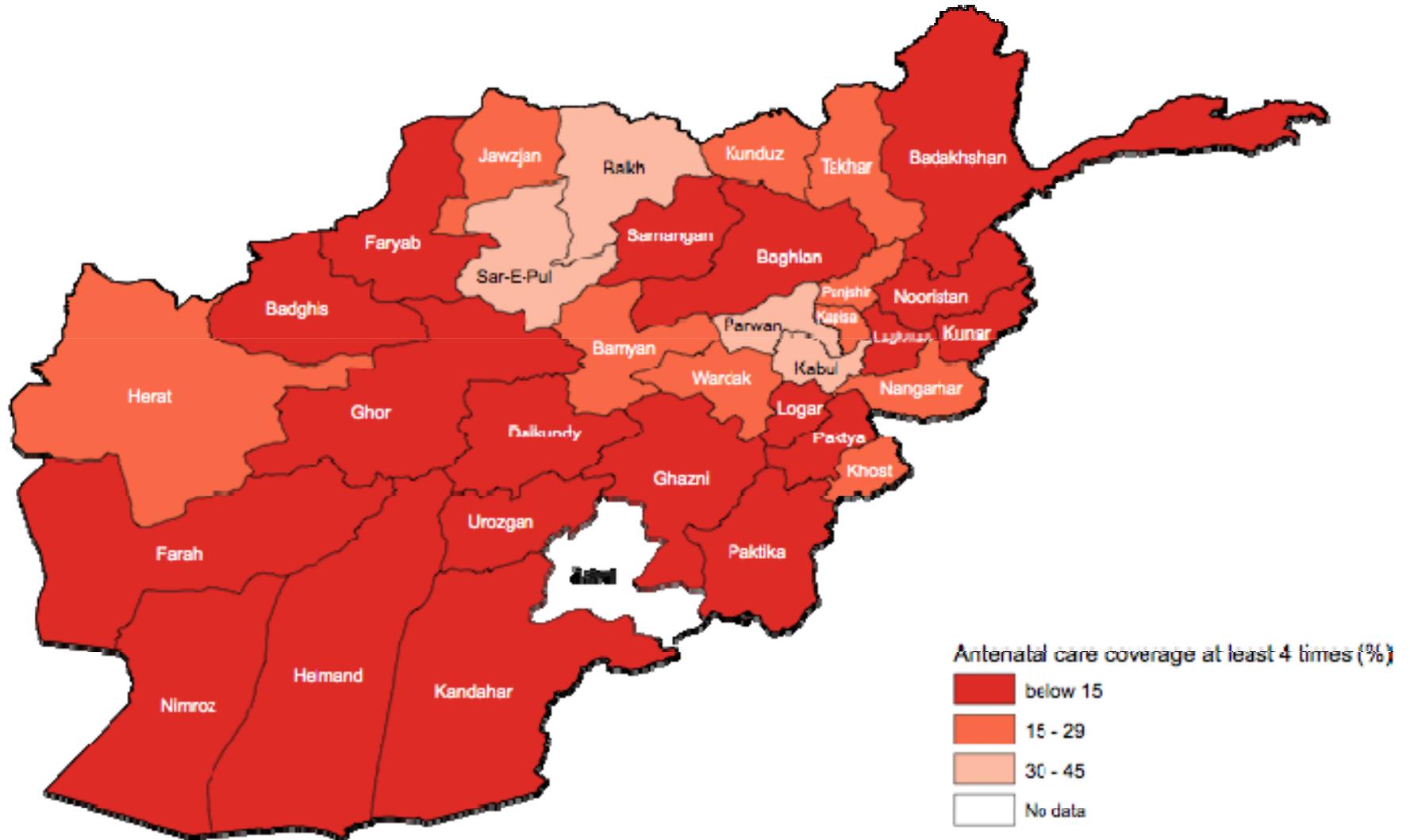




Maternity & New Born Care

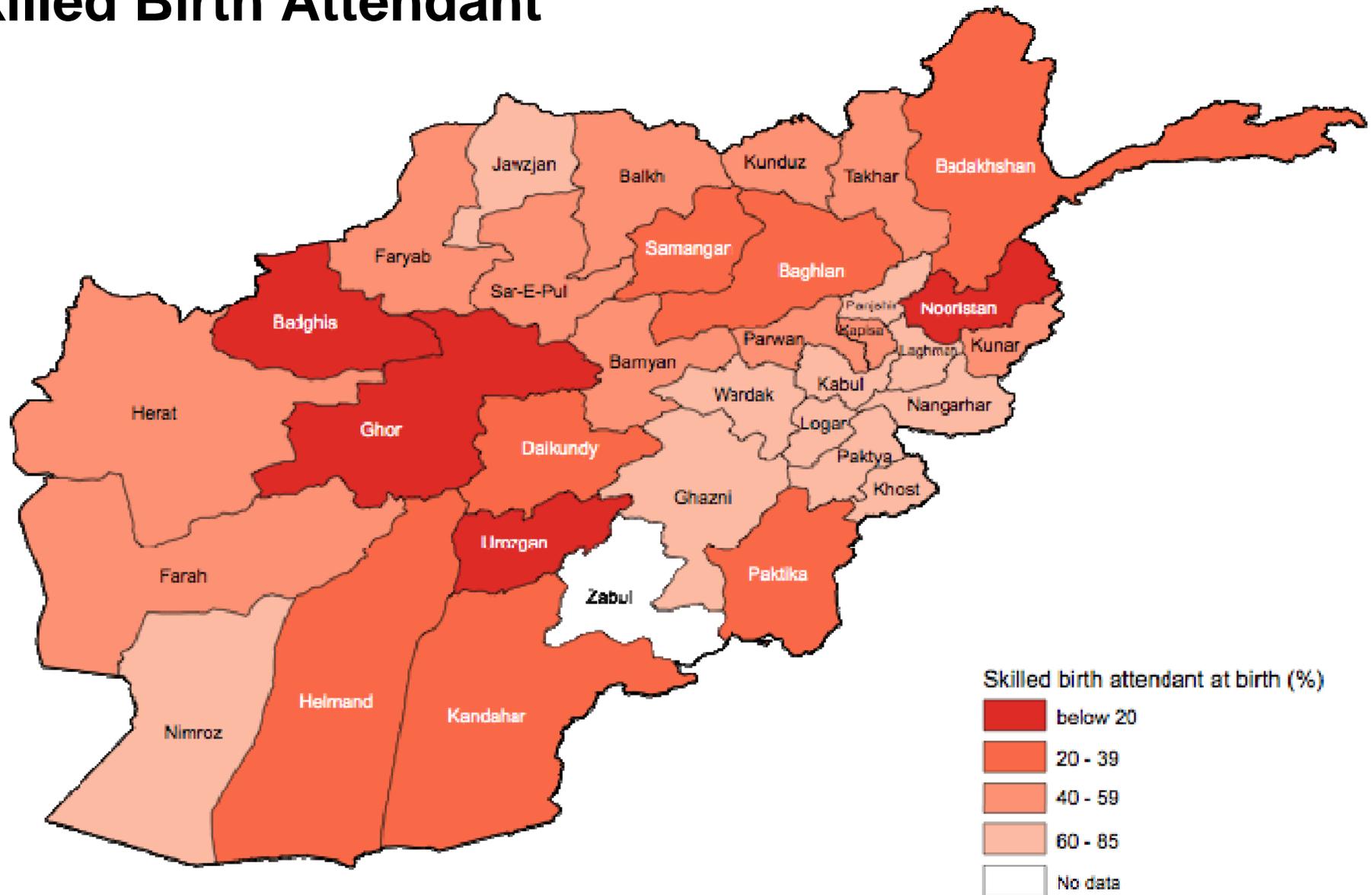
Afganistan

Antenatal Coverage



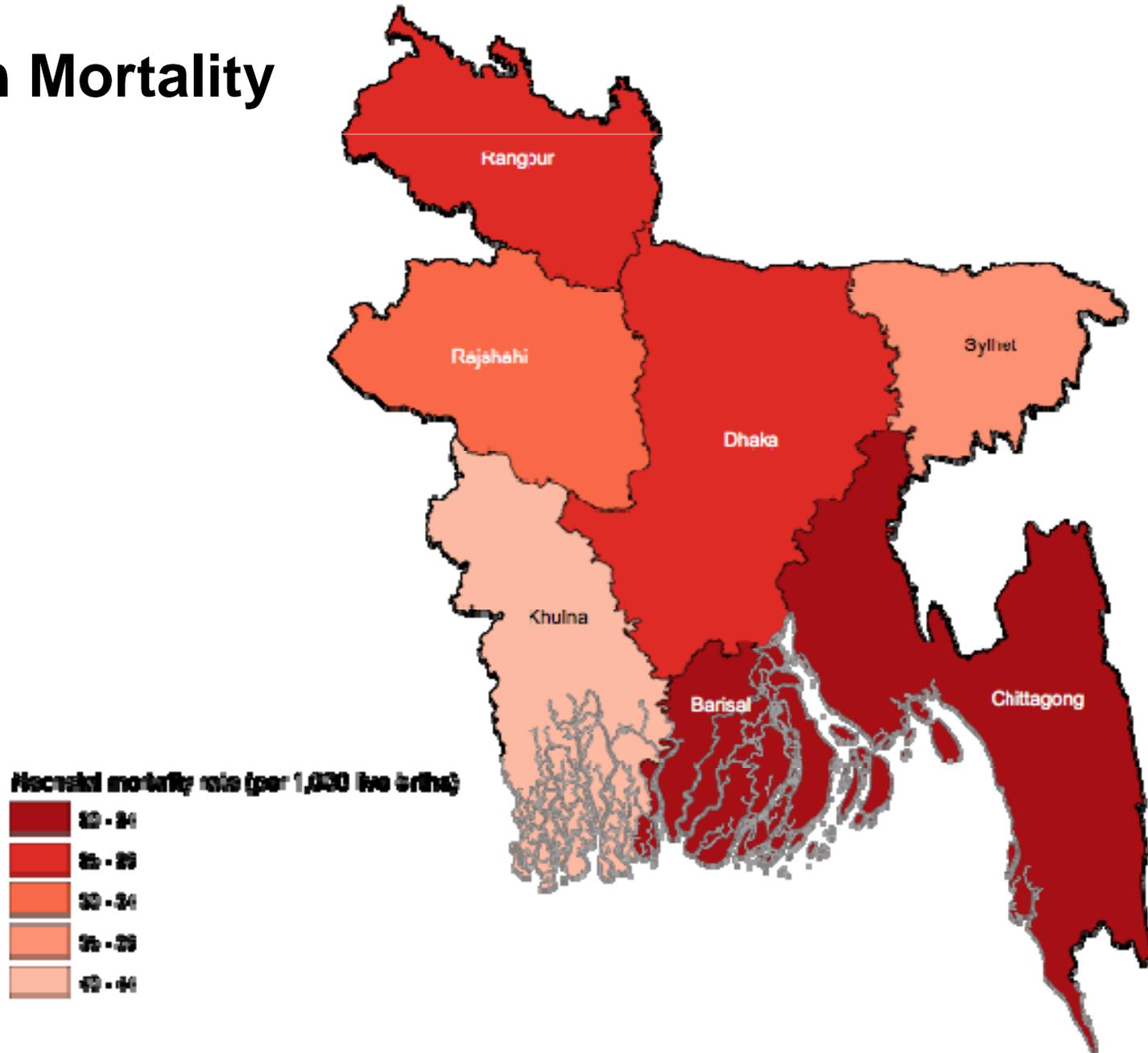
Afganistan

Skilled Birth Attendant



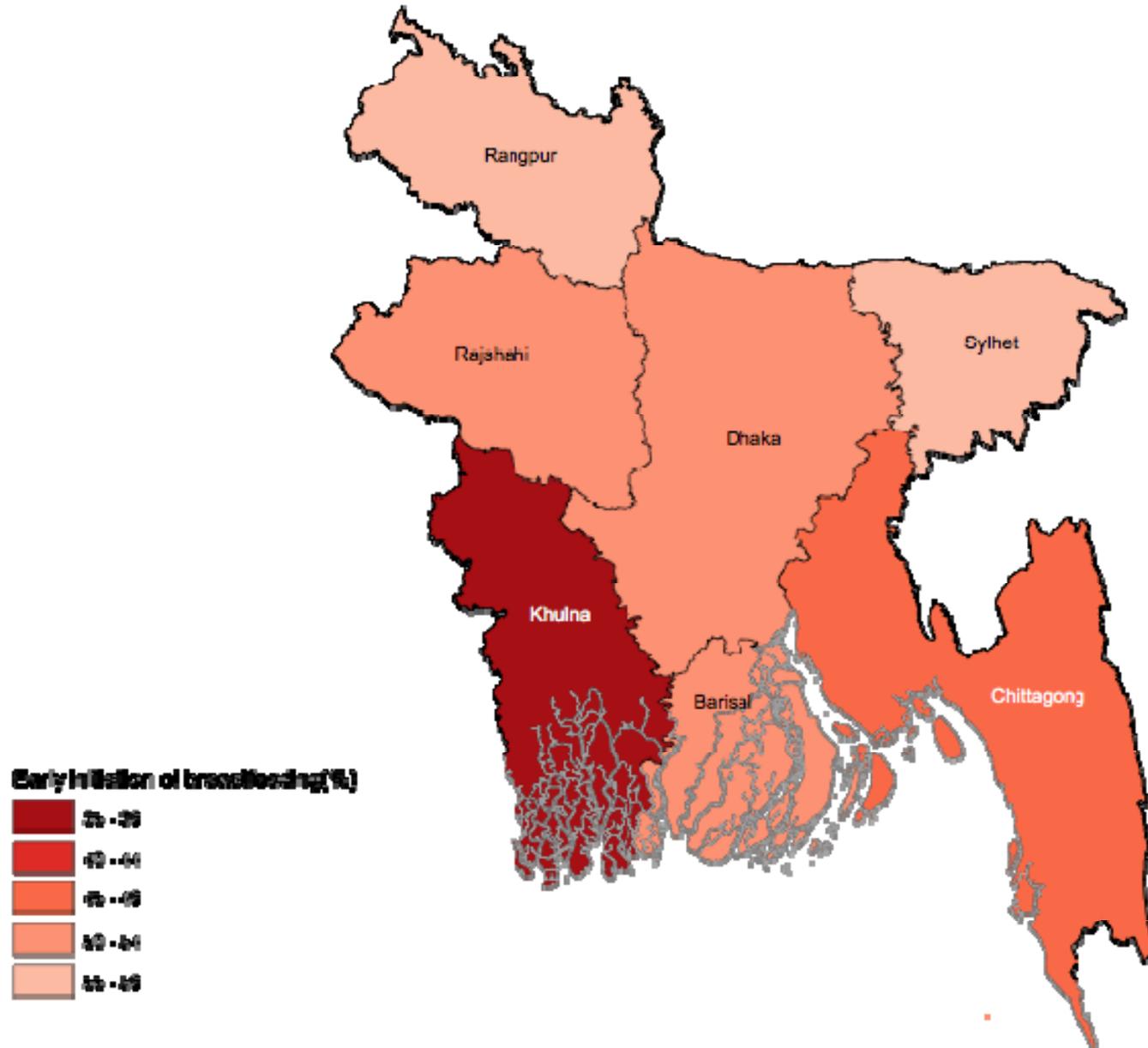
Bangladesh 2015

Newborn Mortality



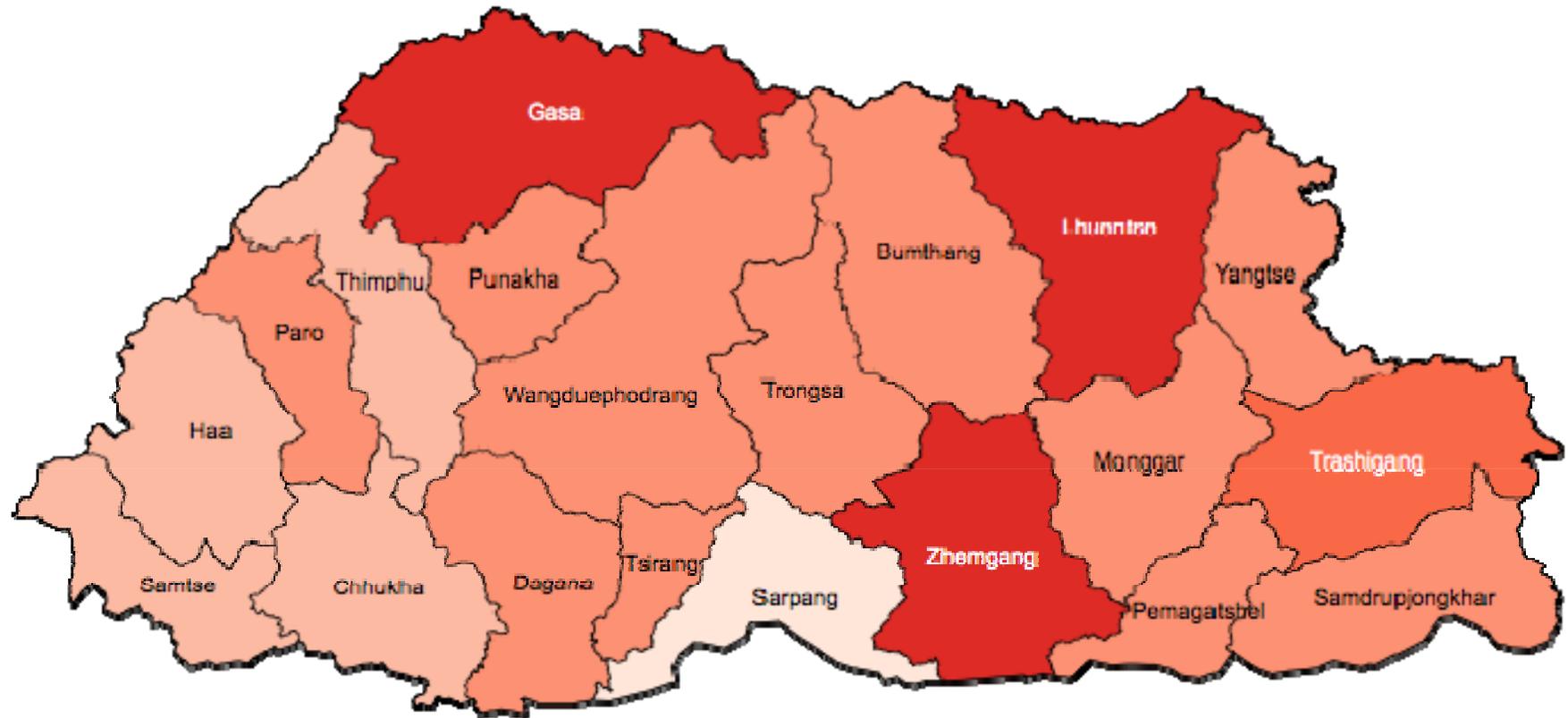
Bangladesh 2015

Early Initiation of Breast Feeding

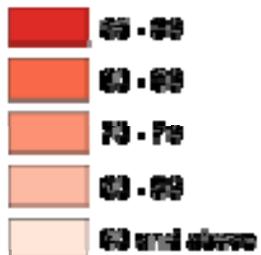


Bhutan 2015

Antenatal Coverage

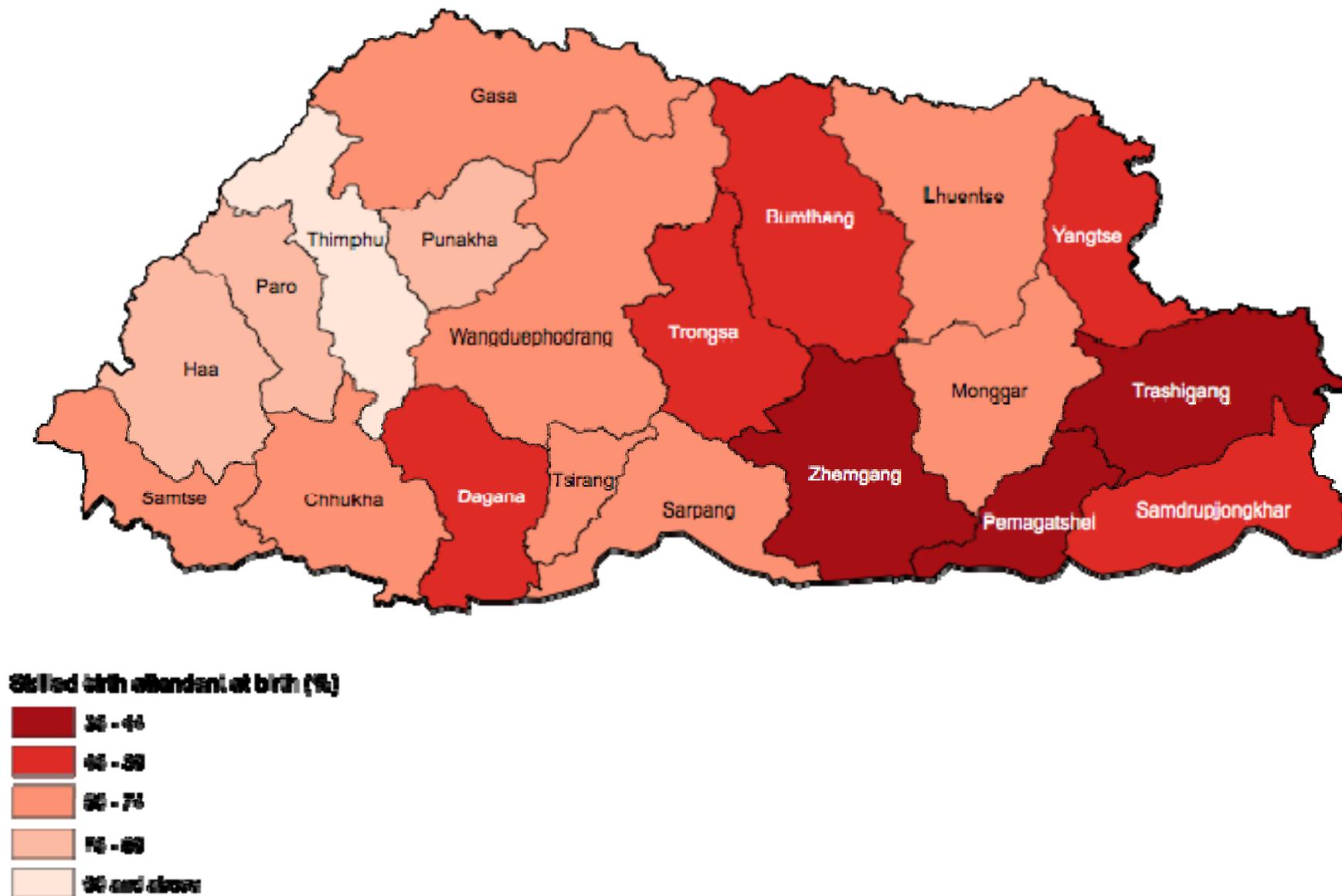


Antenatal coverage at least 4 times (%)



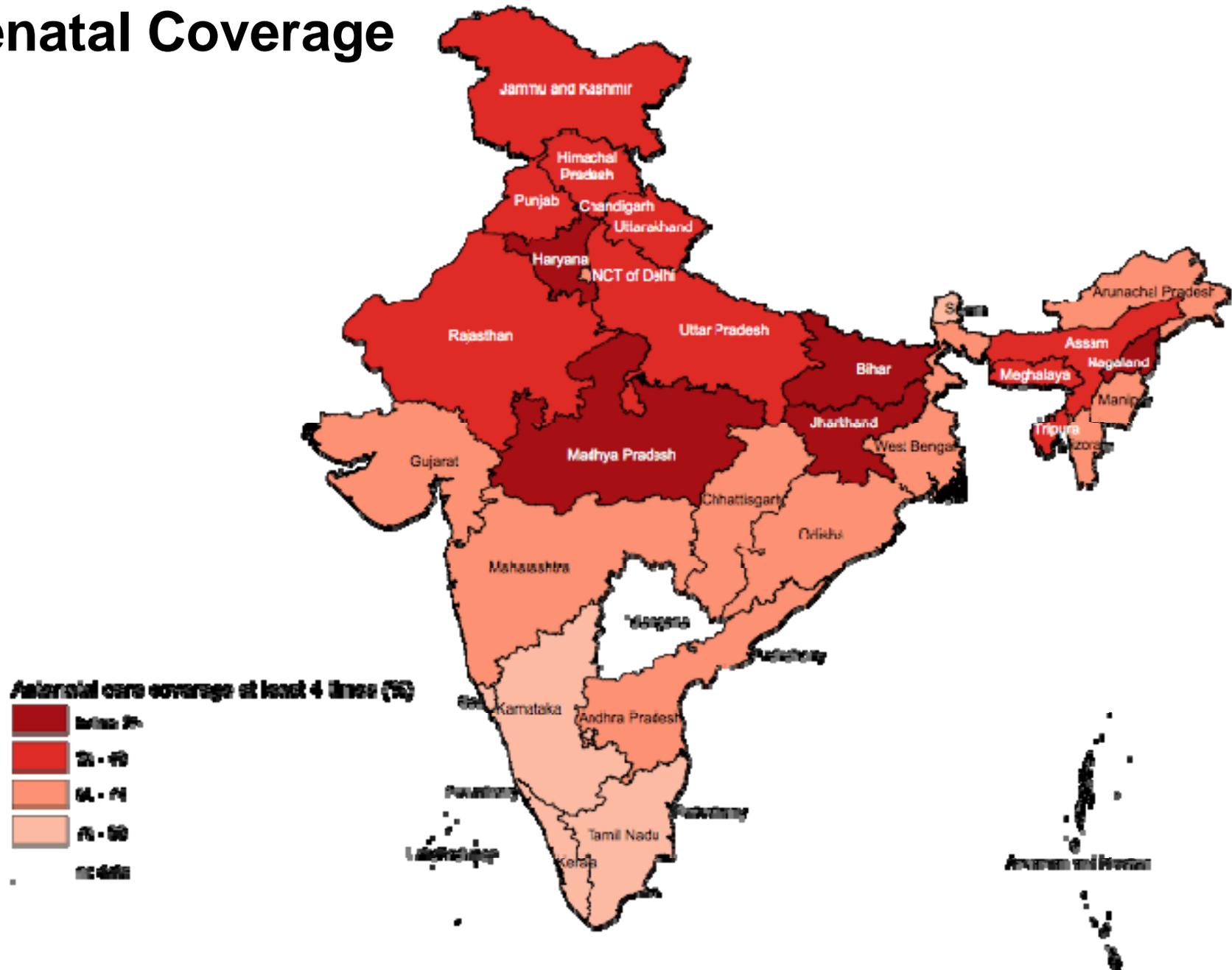
Bhutan 2015

Skilled Birth Attendant



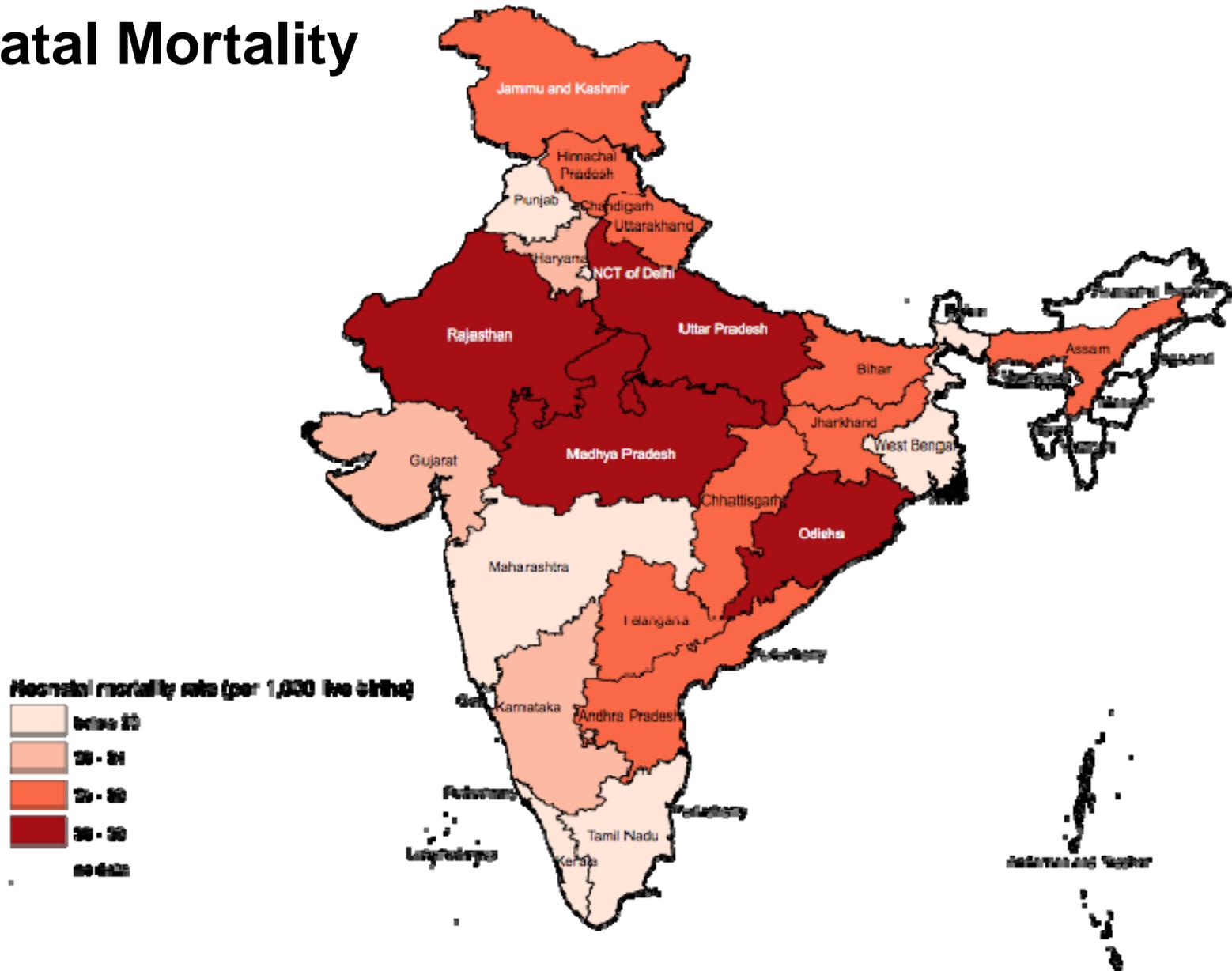
India 2015

Antenatal Coverage



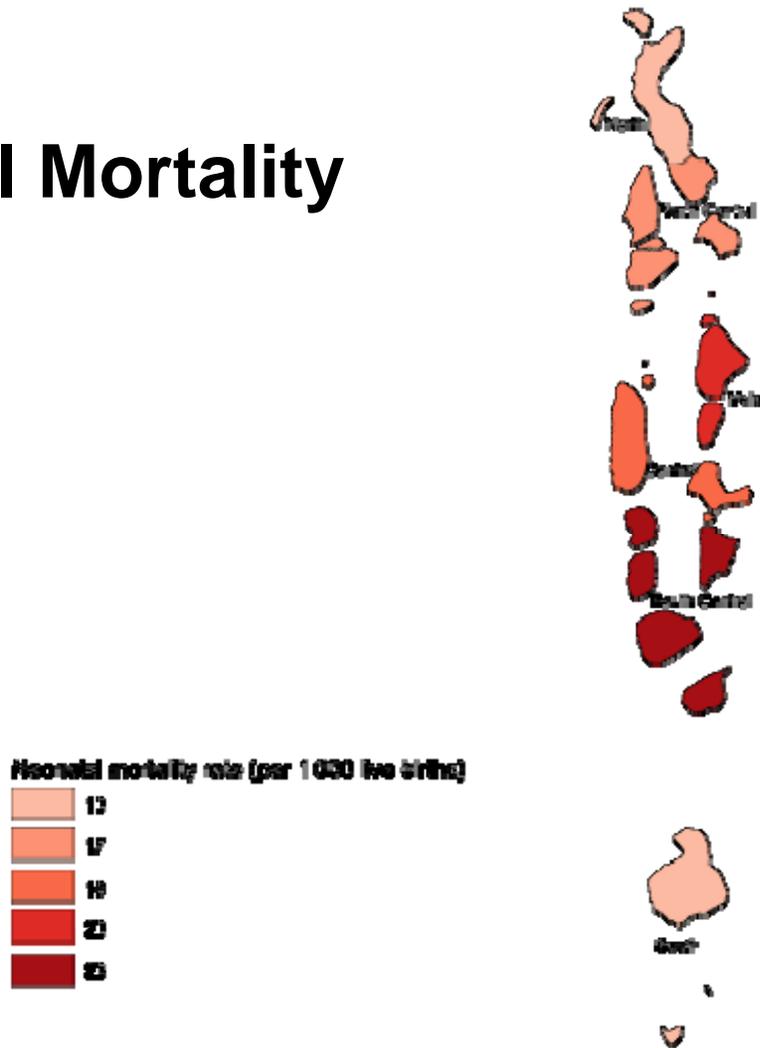
India 2015

Neonatal Mortality



Maldives 2015

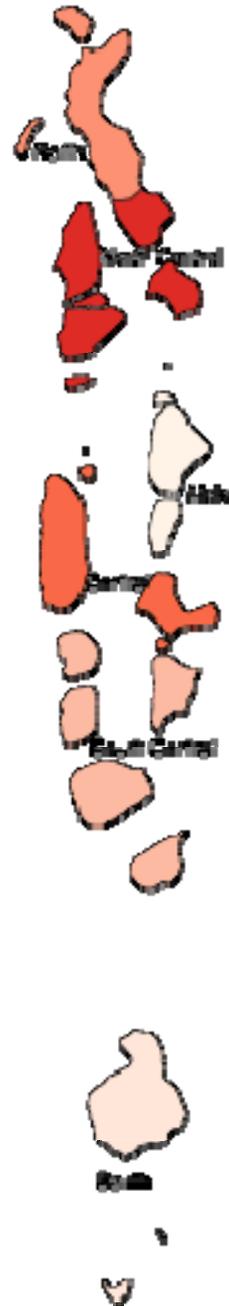
Neonatal Mortality



Maldives 2015

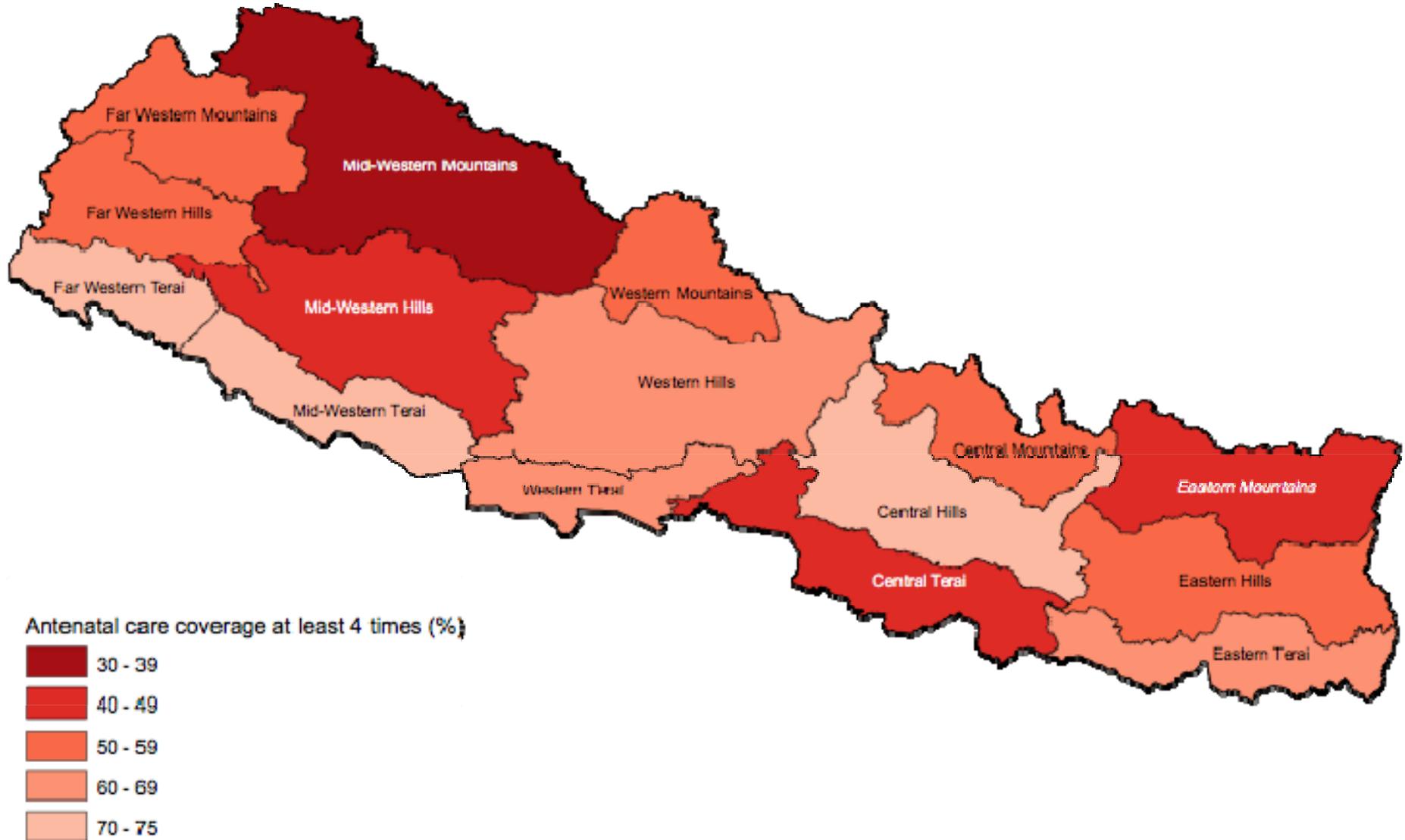
Skilled Birth Attendant

Skilled attendant at birth (%)



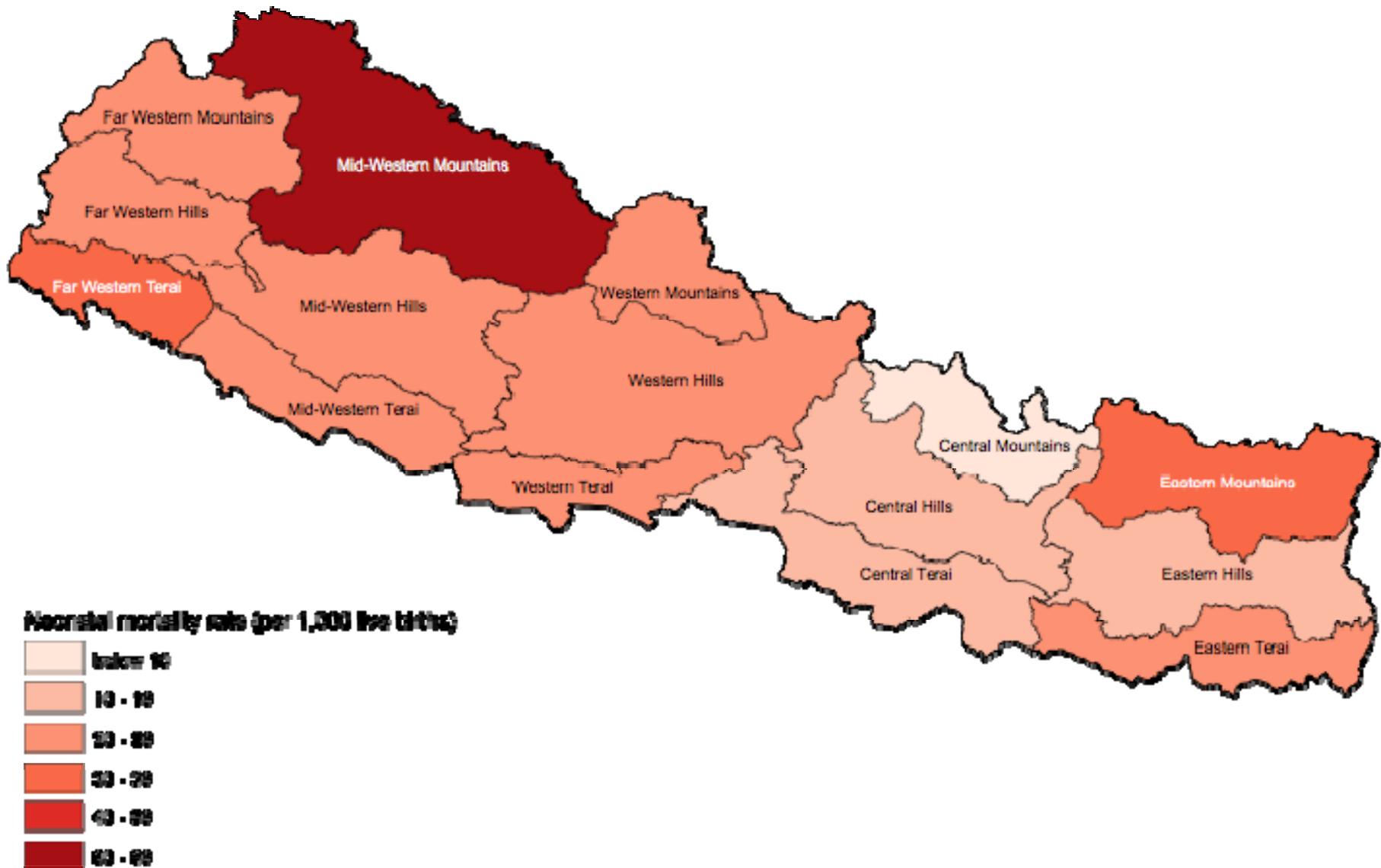
Nepal 2015

Antenatal Coverage



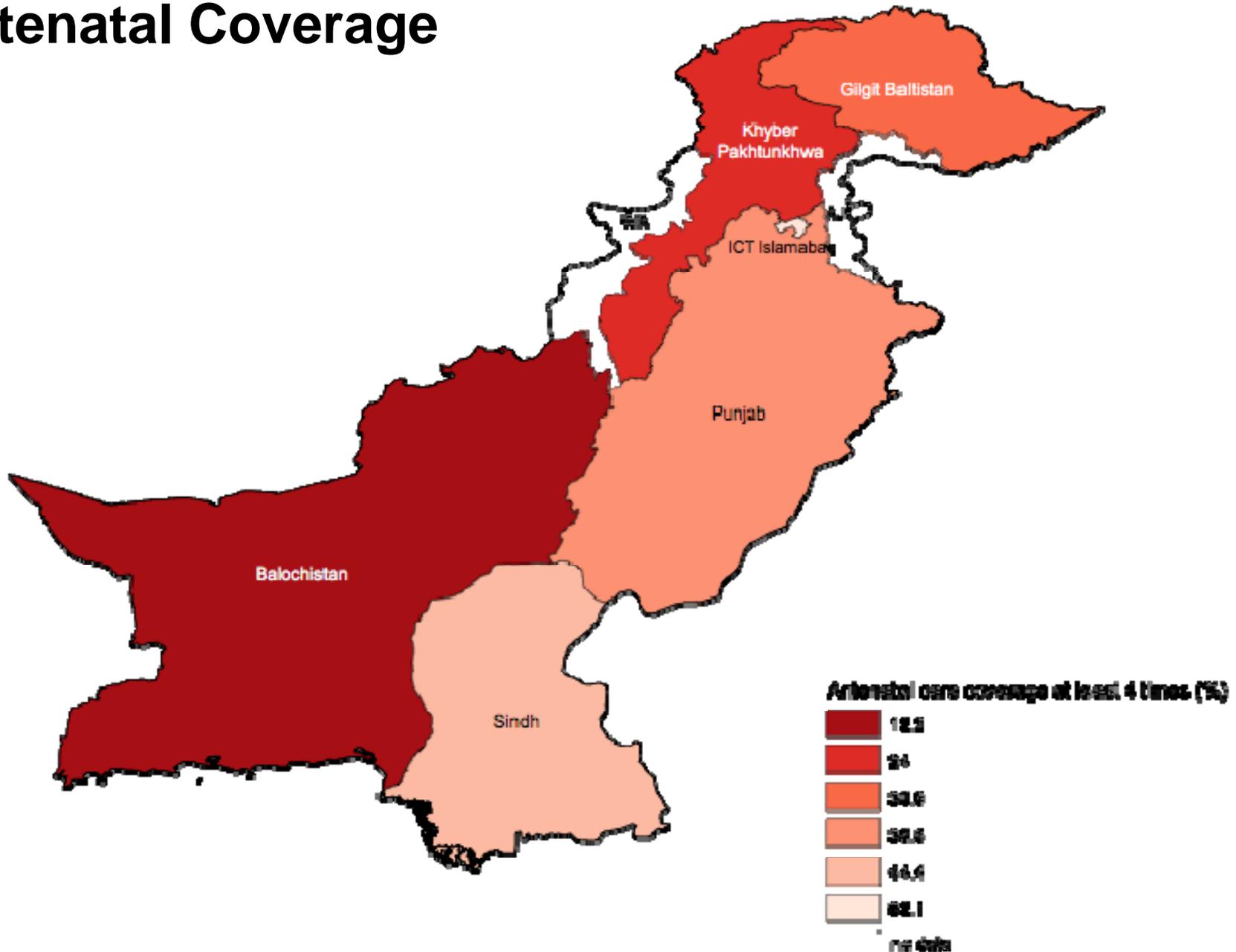
Nepal 2015

Neonatal Mortality



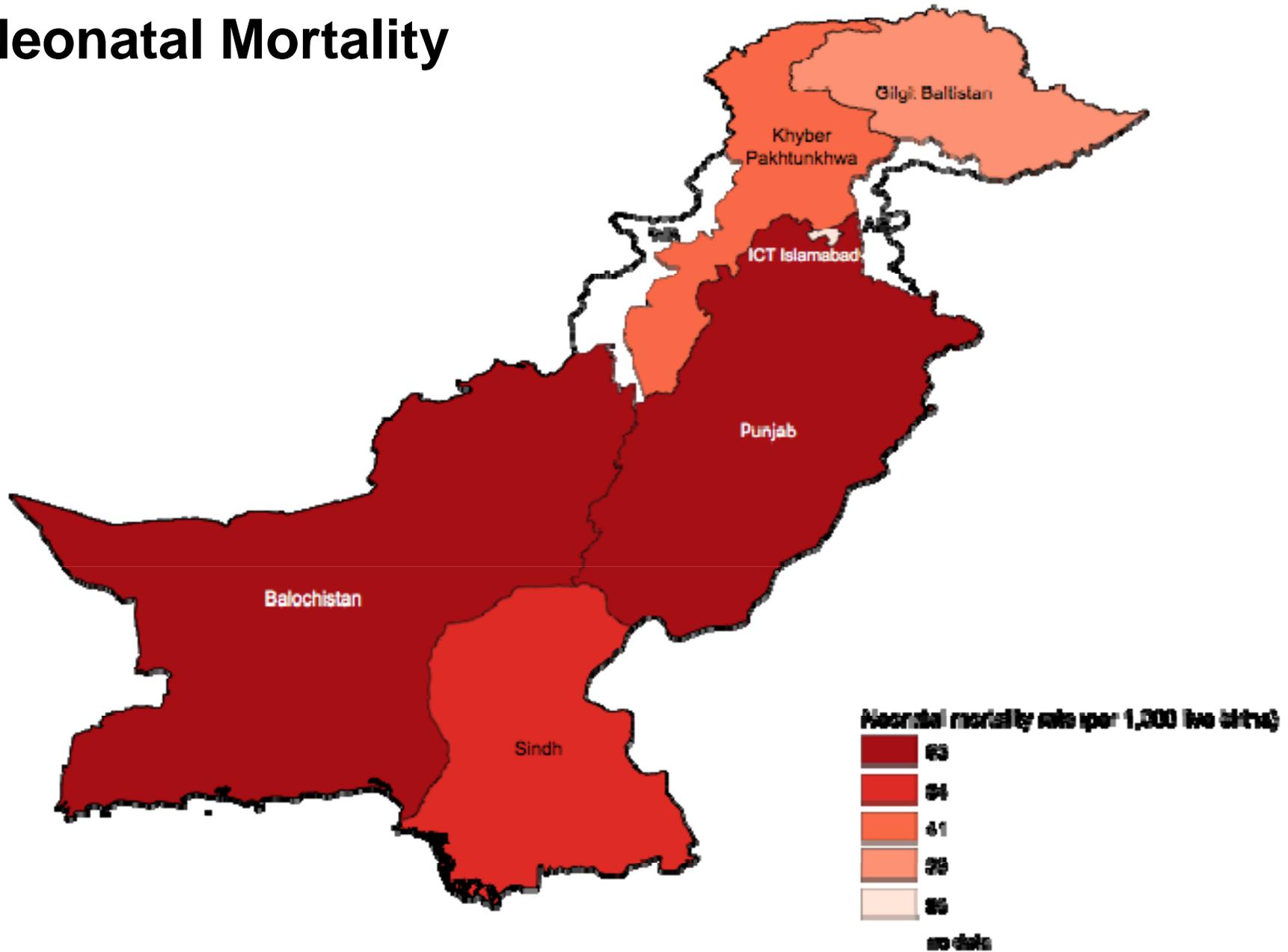
Pakistan 2015

Antenatal Coverage



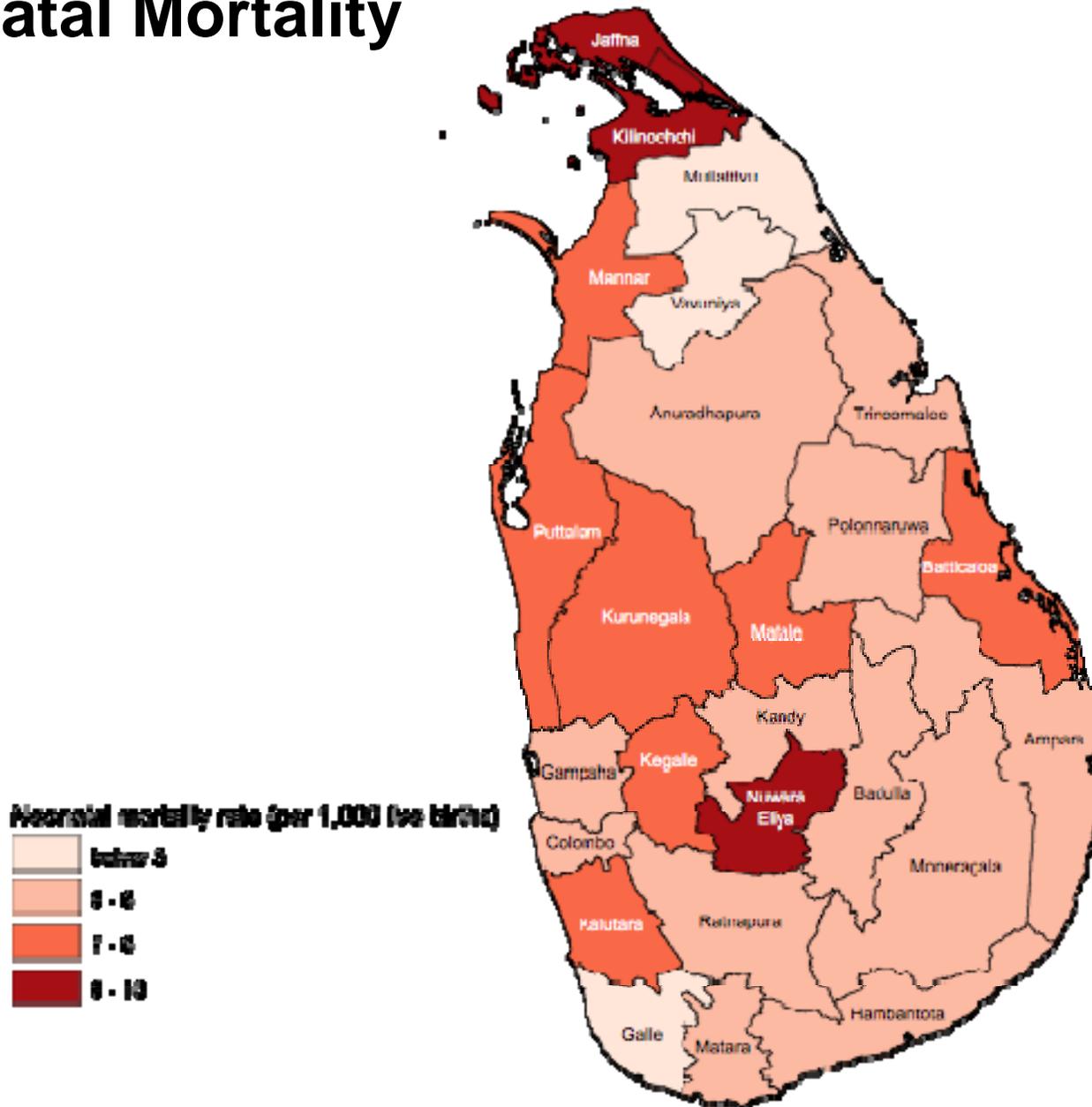
Pakistan 2015

Neonatal Mortality



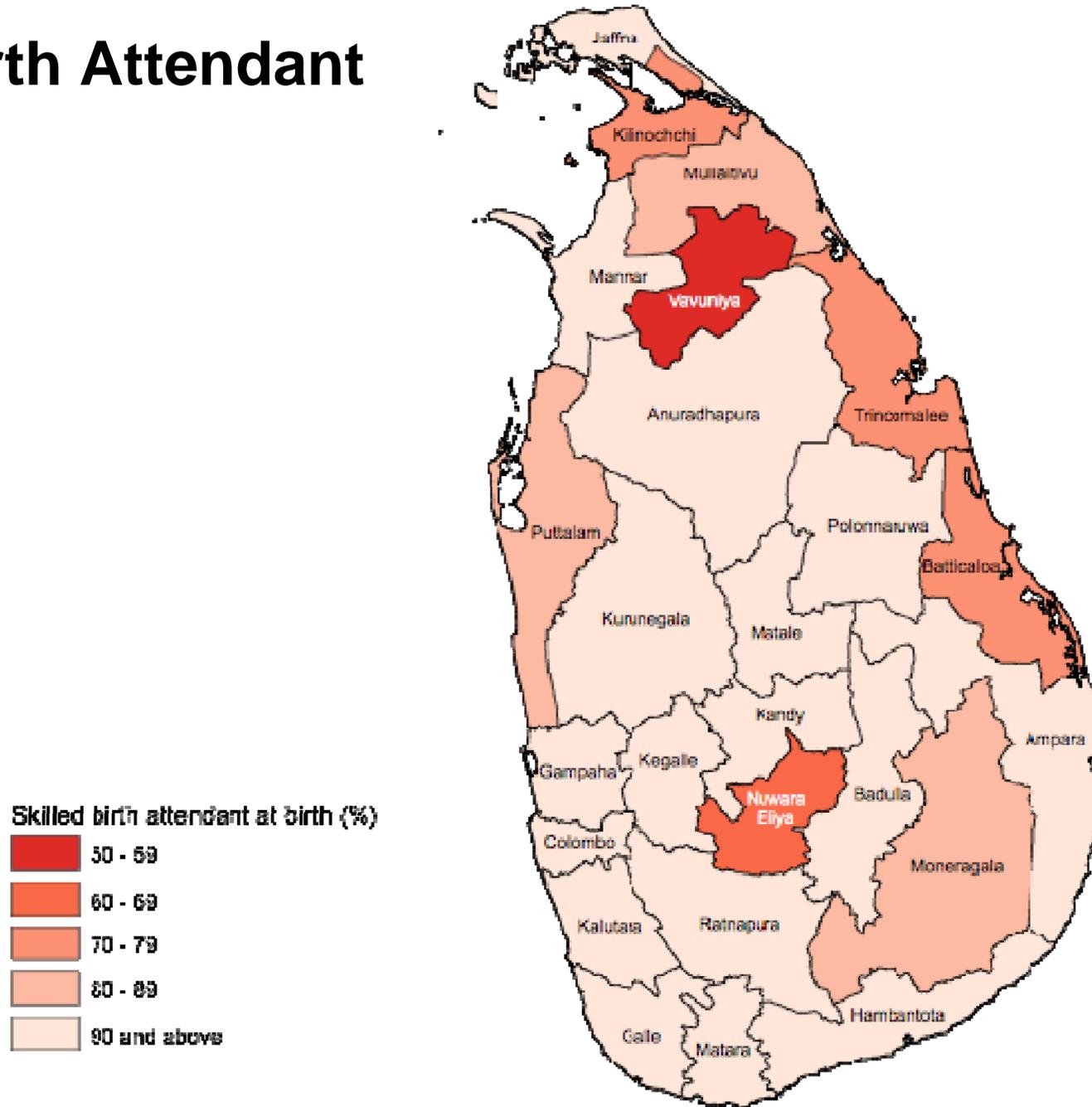
Sri Lanka 2015

Neonatal Mortality



Sri Lanka 2015

Skilled Birth Attendant

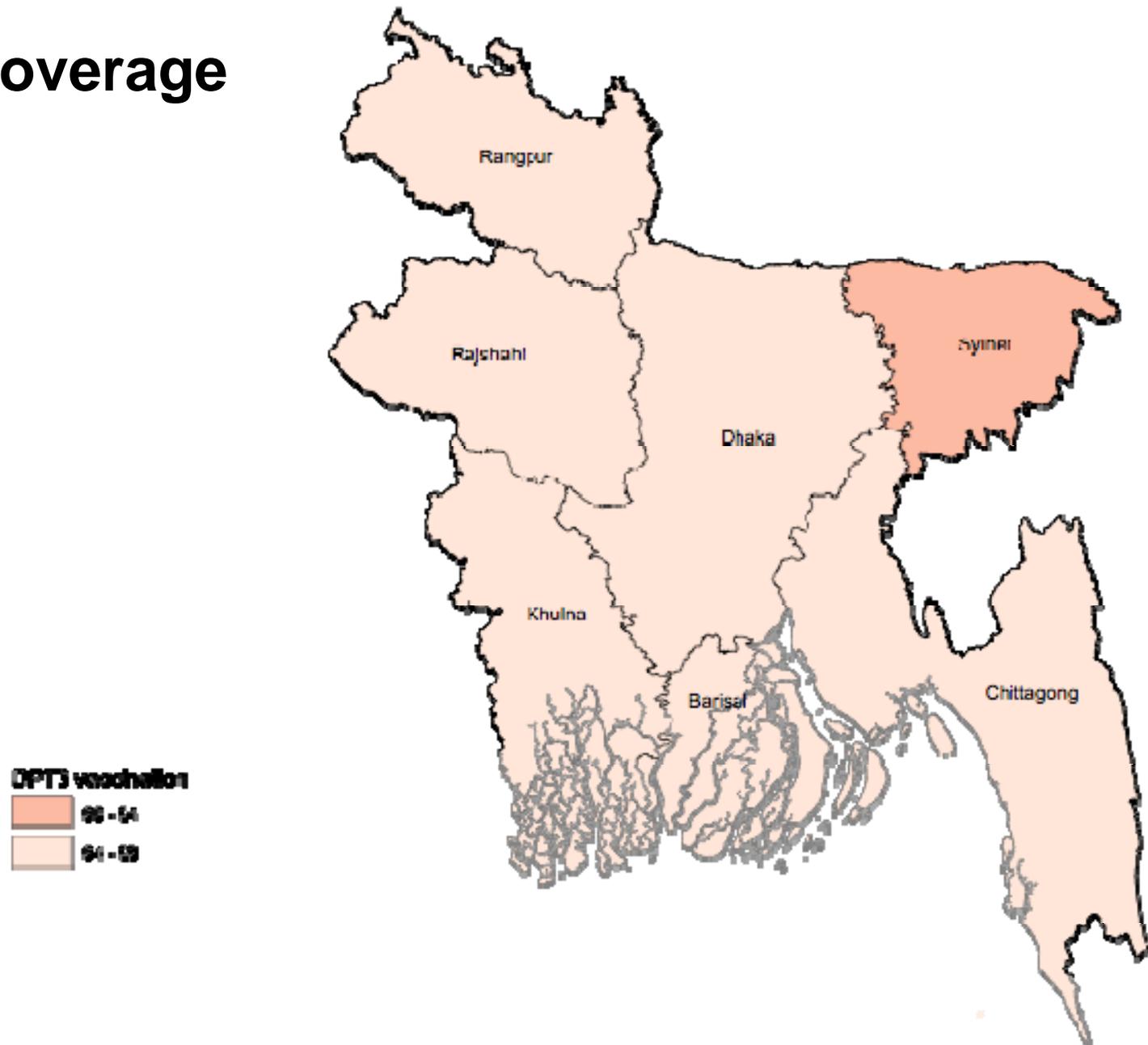




Immunisation & Breast Feeding

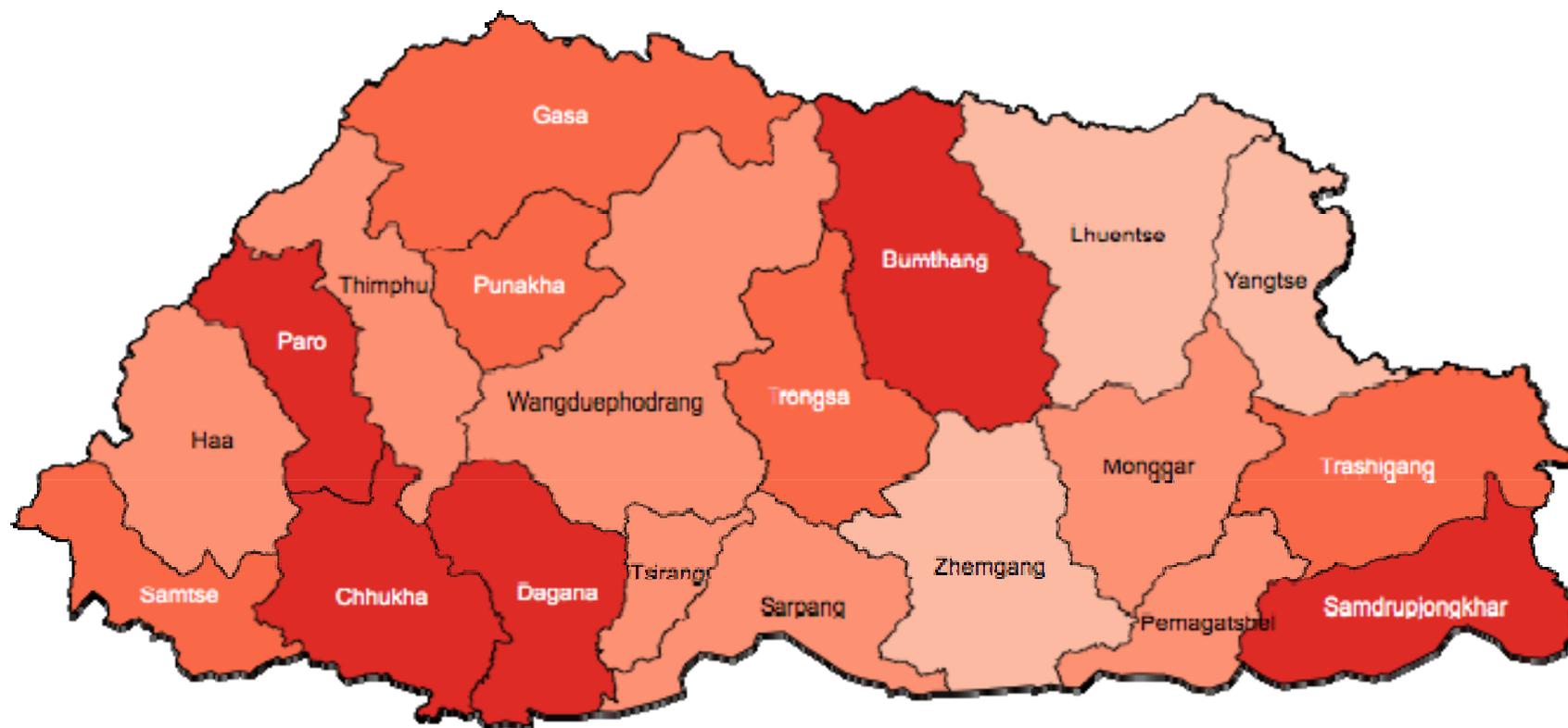
Bangladesh 2015

DPT3 Coverage

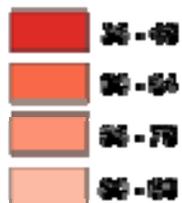


Bhutan 2015

Early Initiation of Breast Feeding

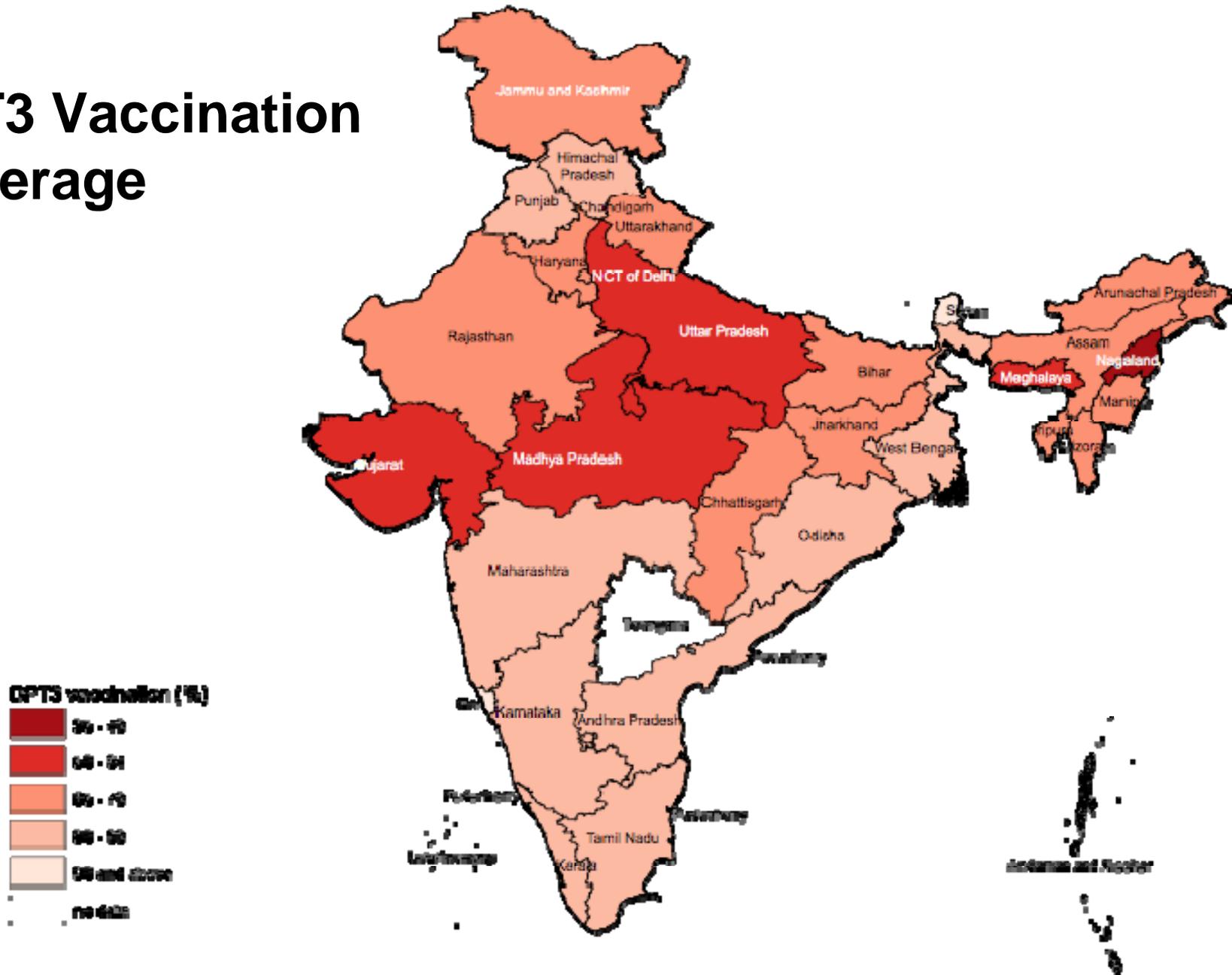


Early initiation of breastfeeding (%)



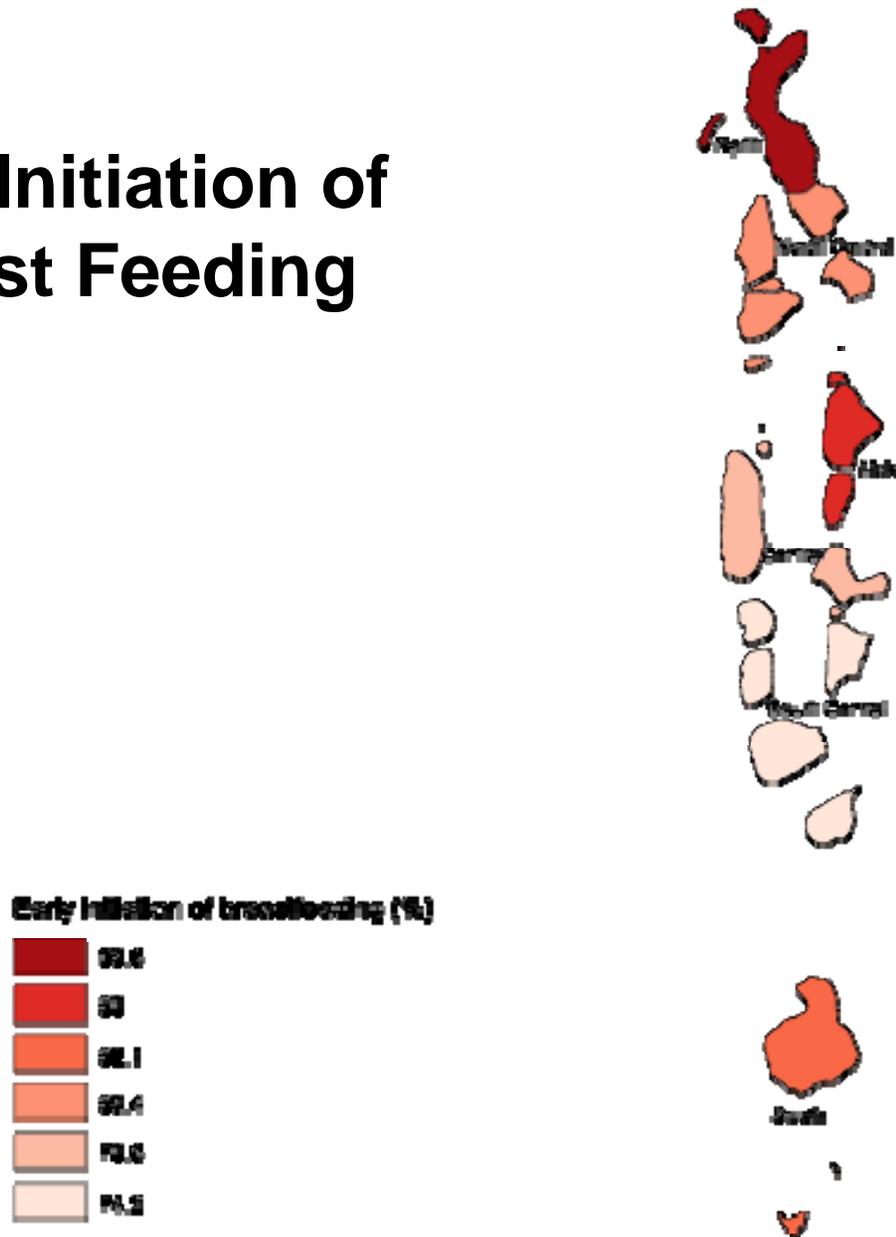
India 2015

DPT3 Vaccination Coverage



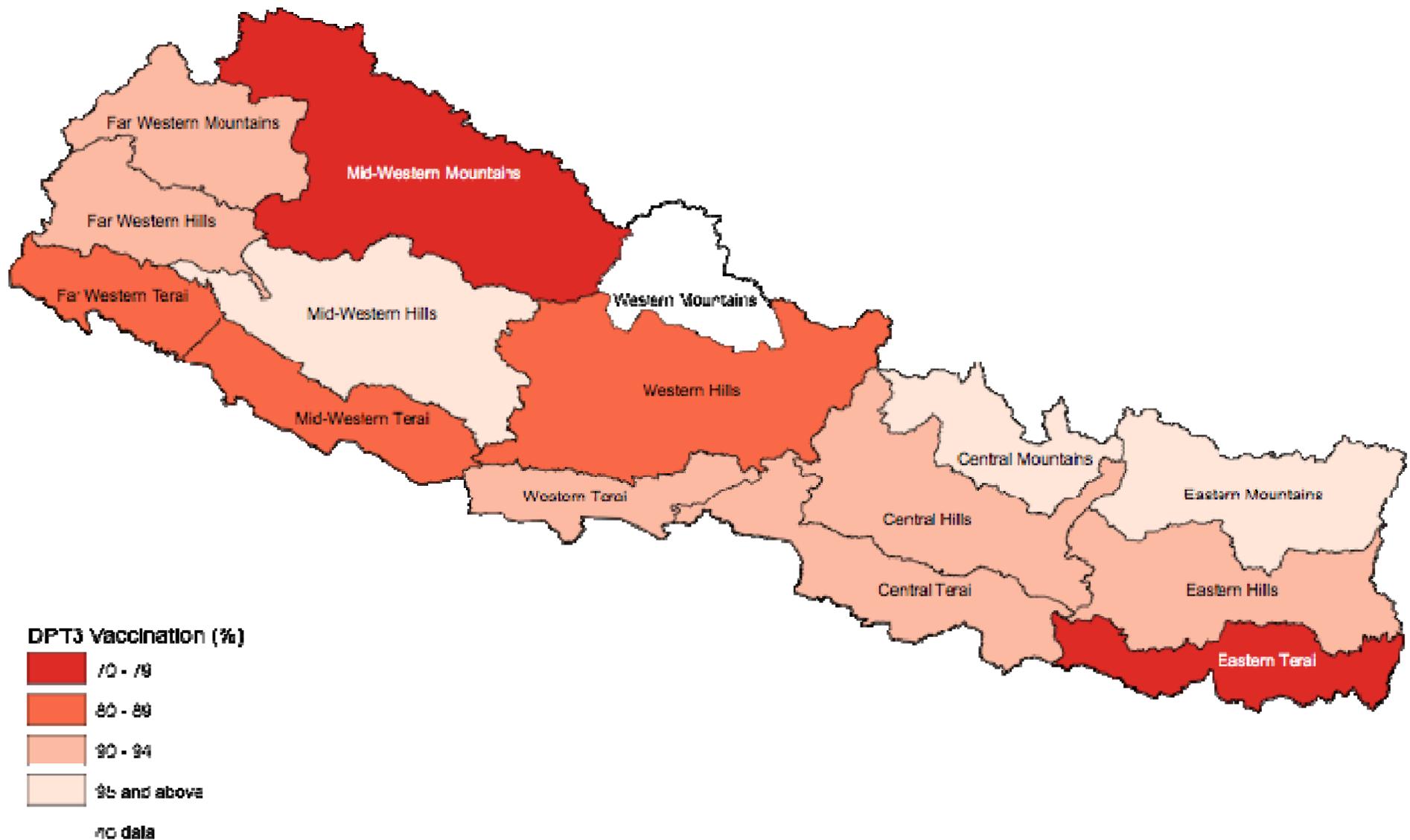
Maldives 2015

Early Initiation of Breast Feeding



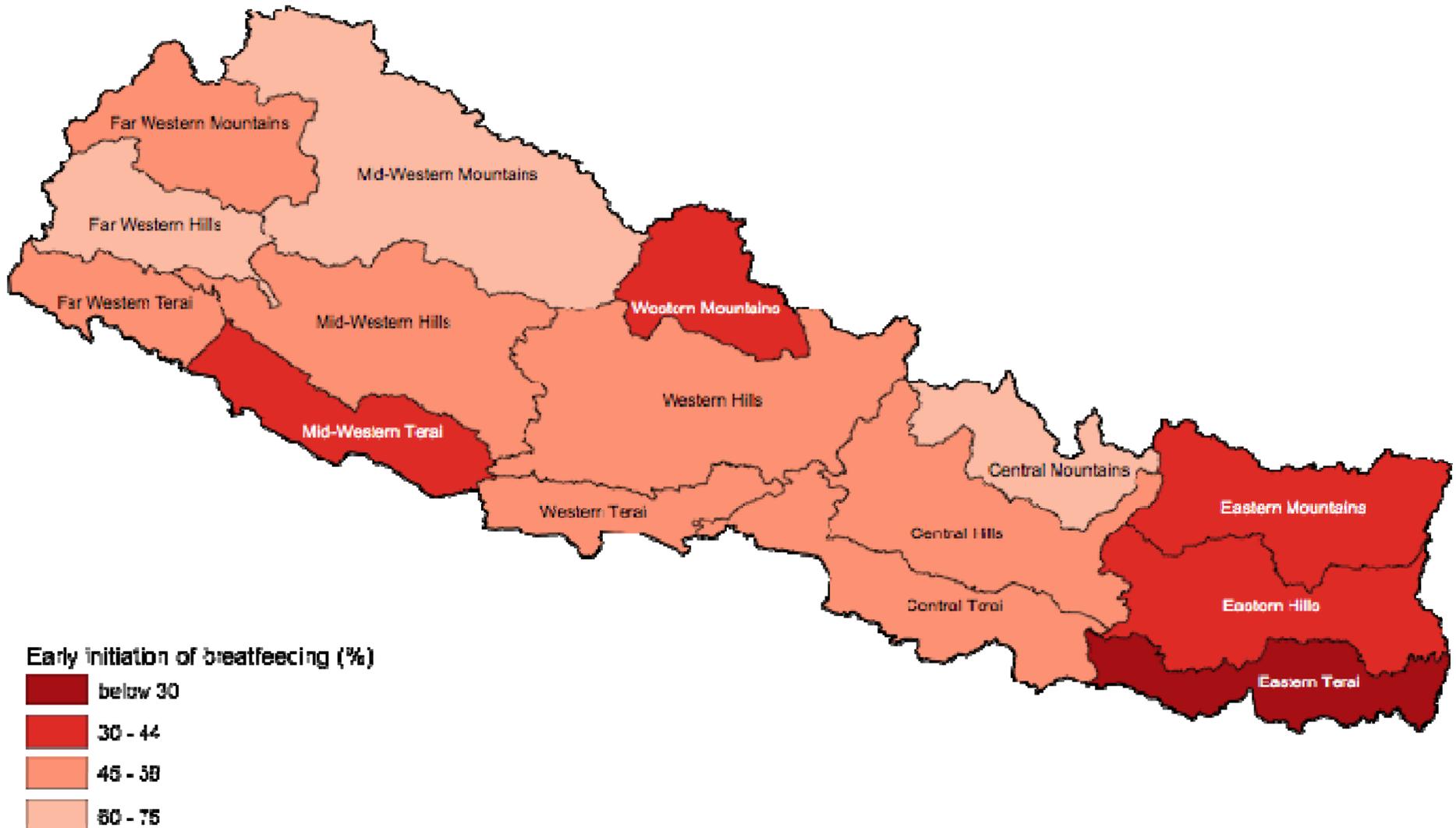
Nepal 2015

DPT3 Coverage



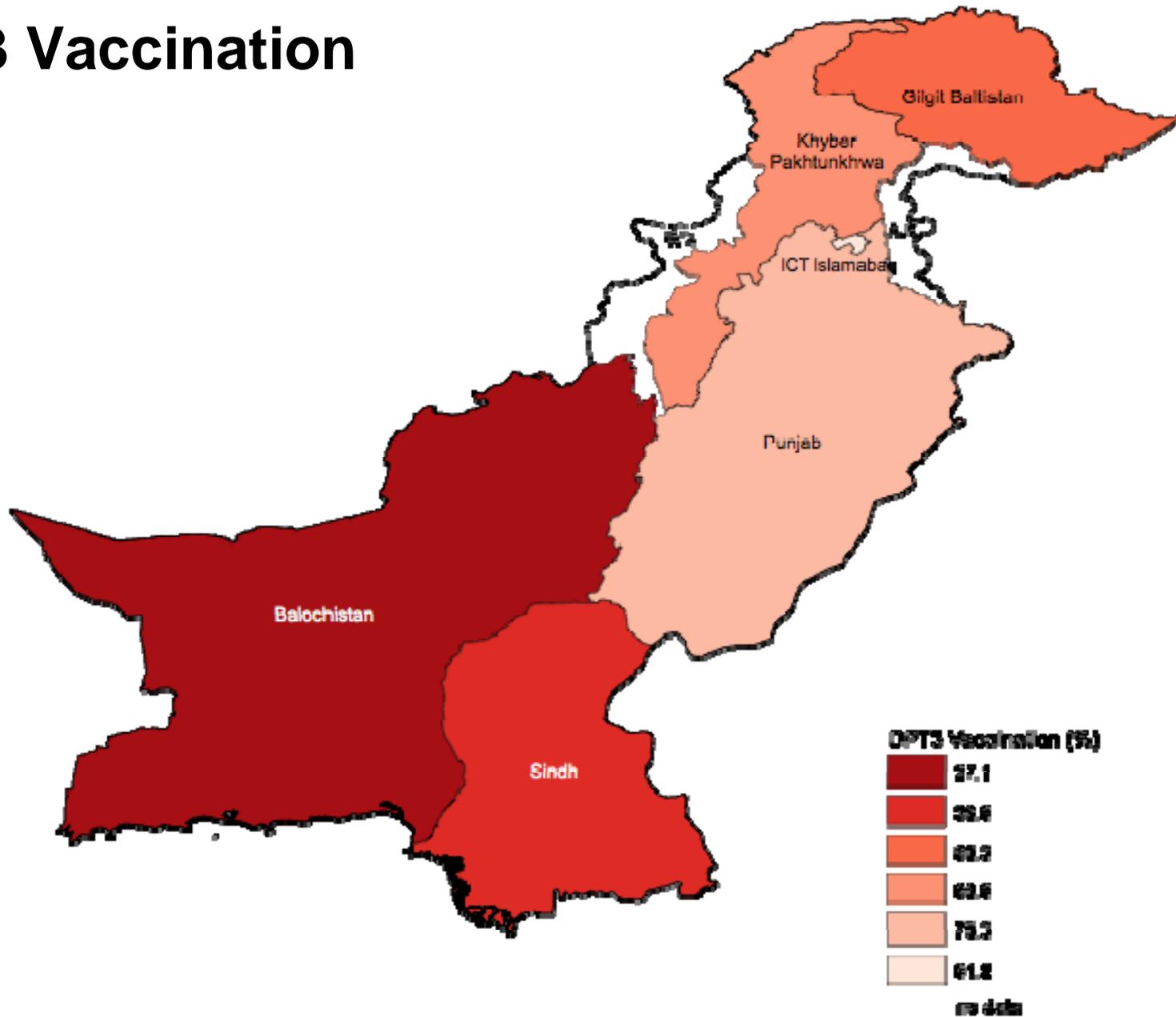
Nepal 2015

Early Initiation of Breast Feeding



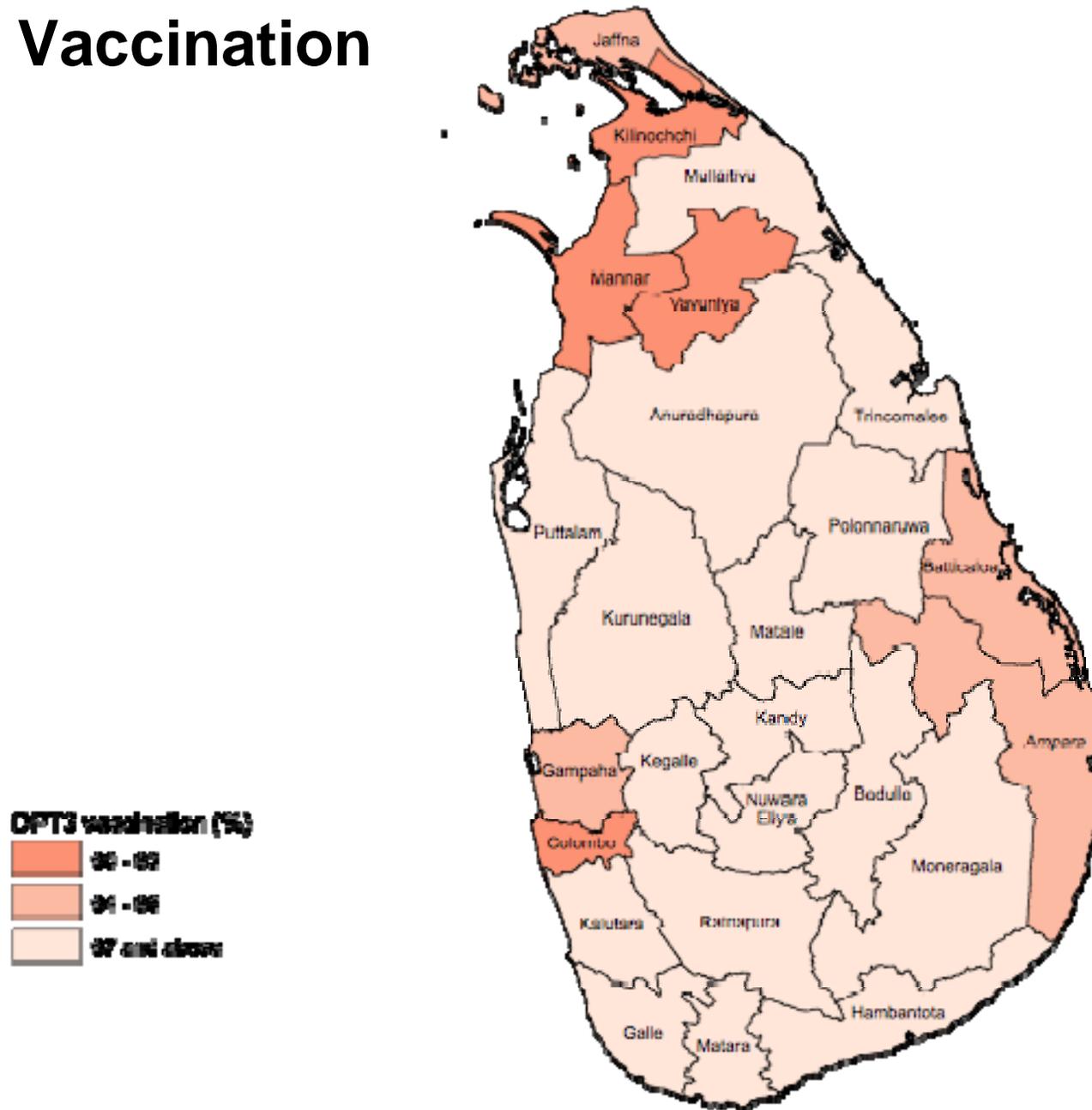
Pakistan 2015

DPT3 Vaccination

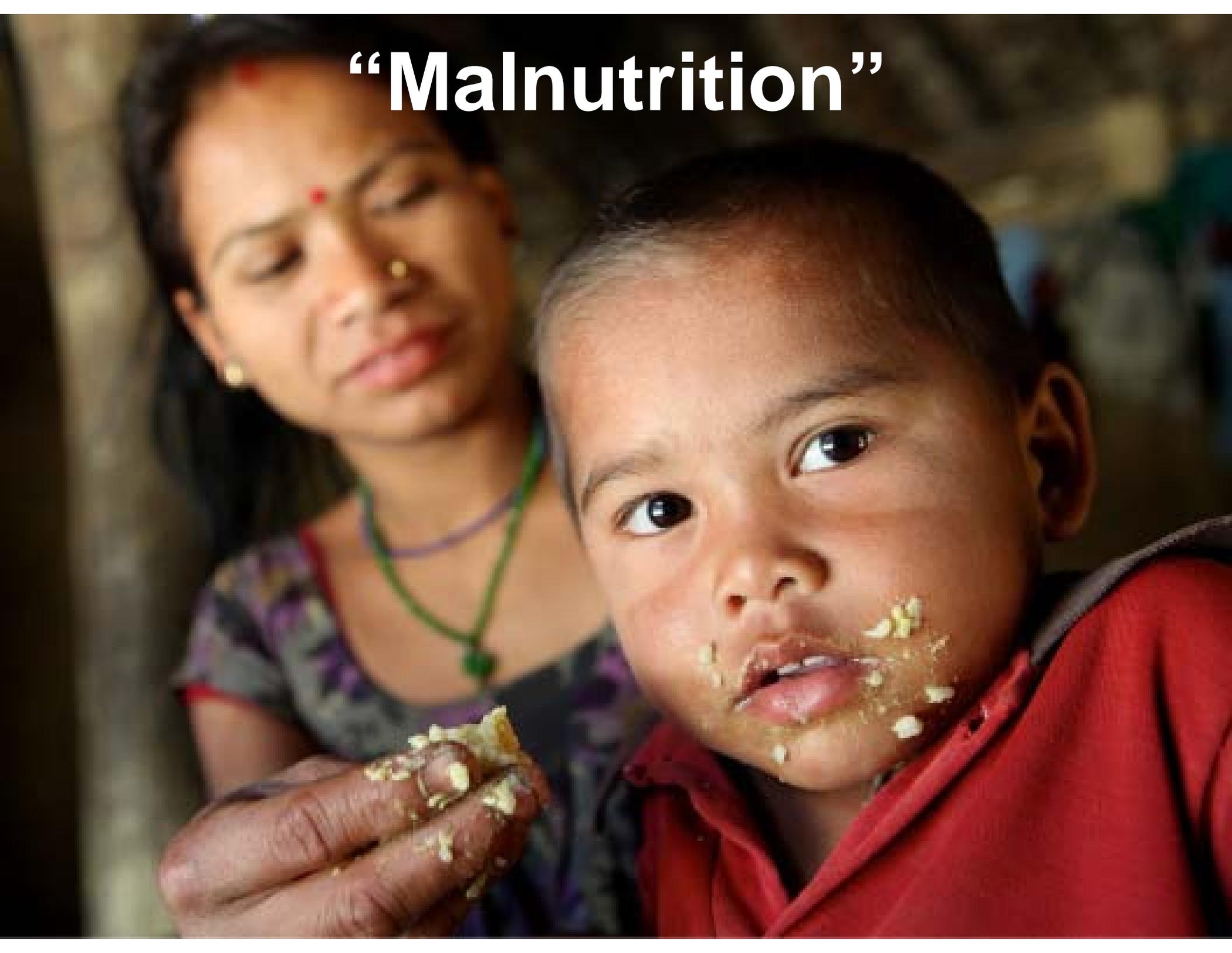


Sri Lanka 2015

DPT3 Vaccination



“Malnutrition”



1000 Days

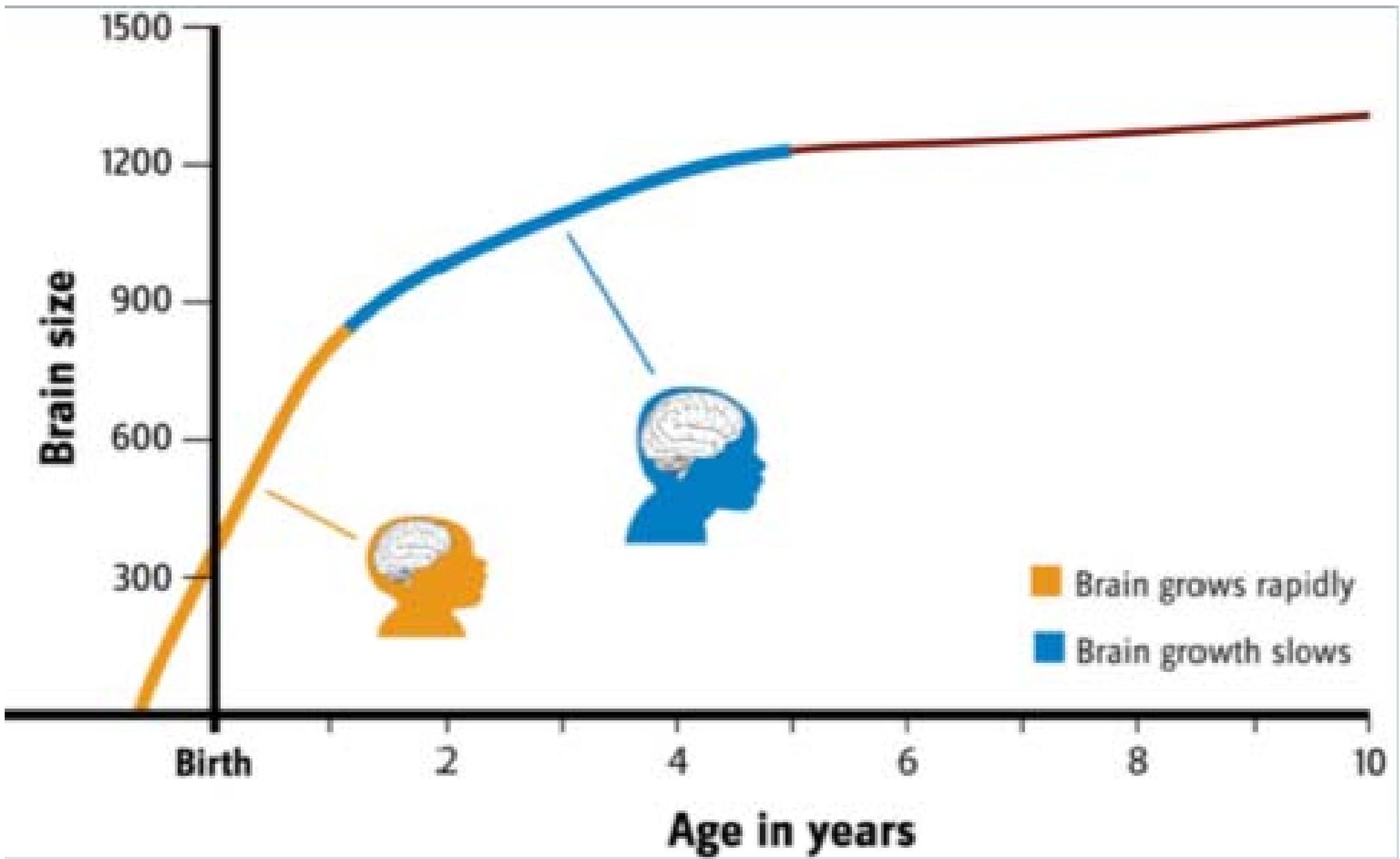
Brain scan – two 3-year old children



Normal

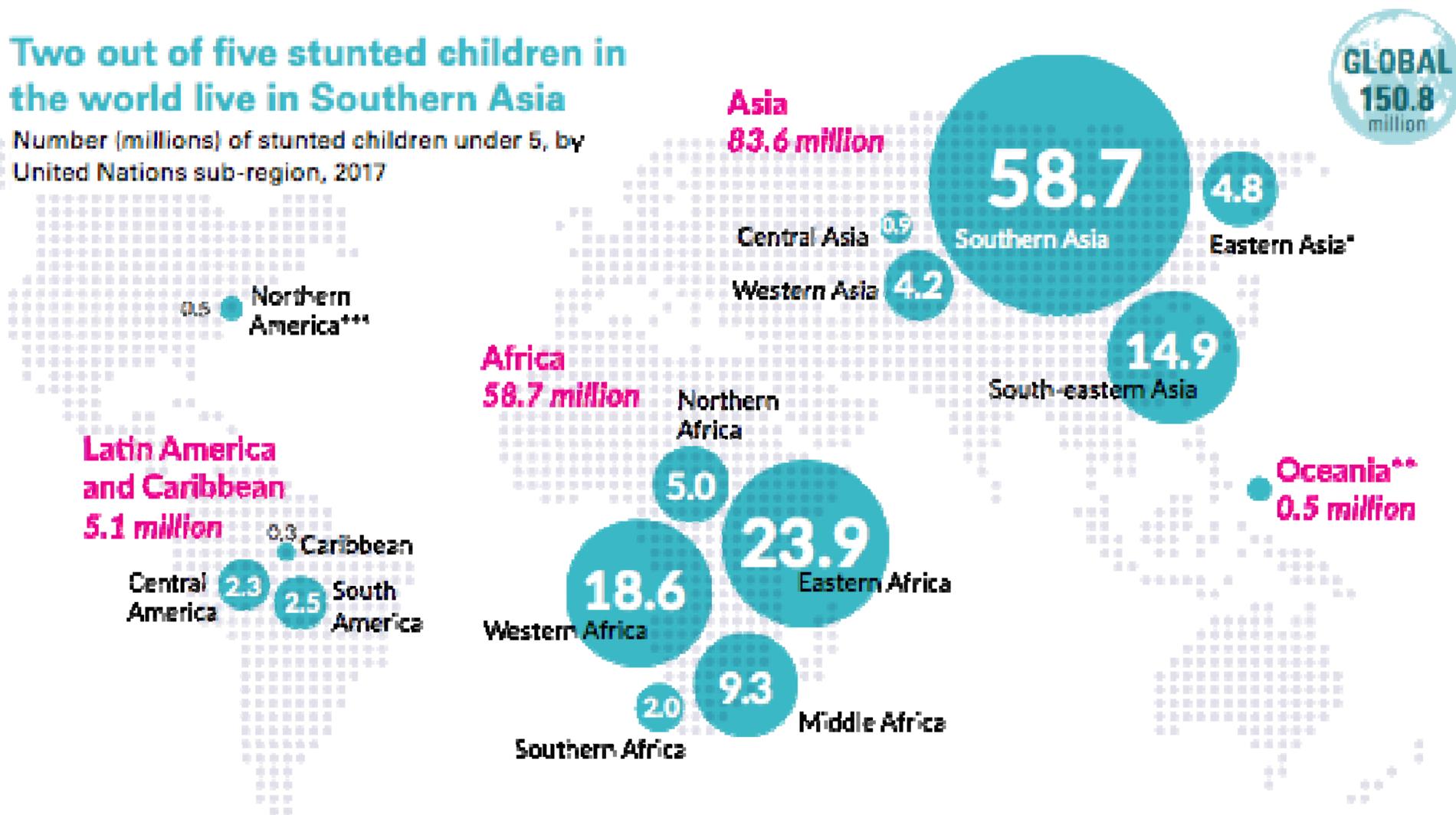


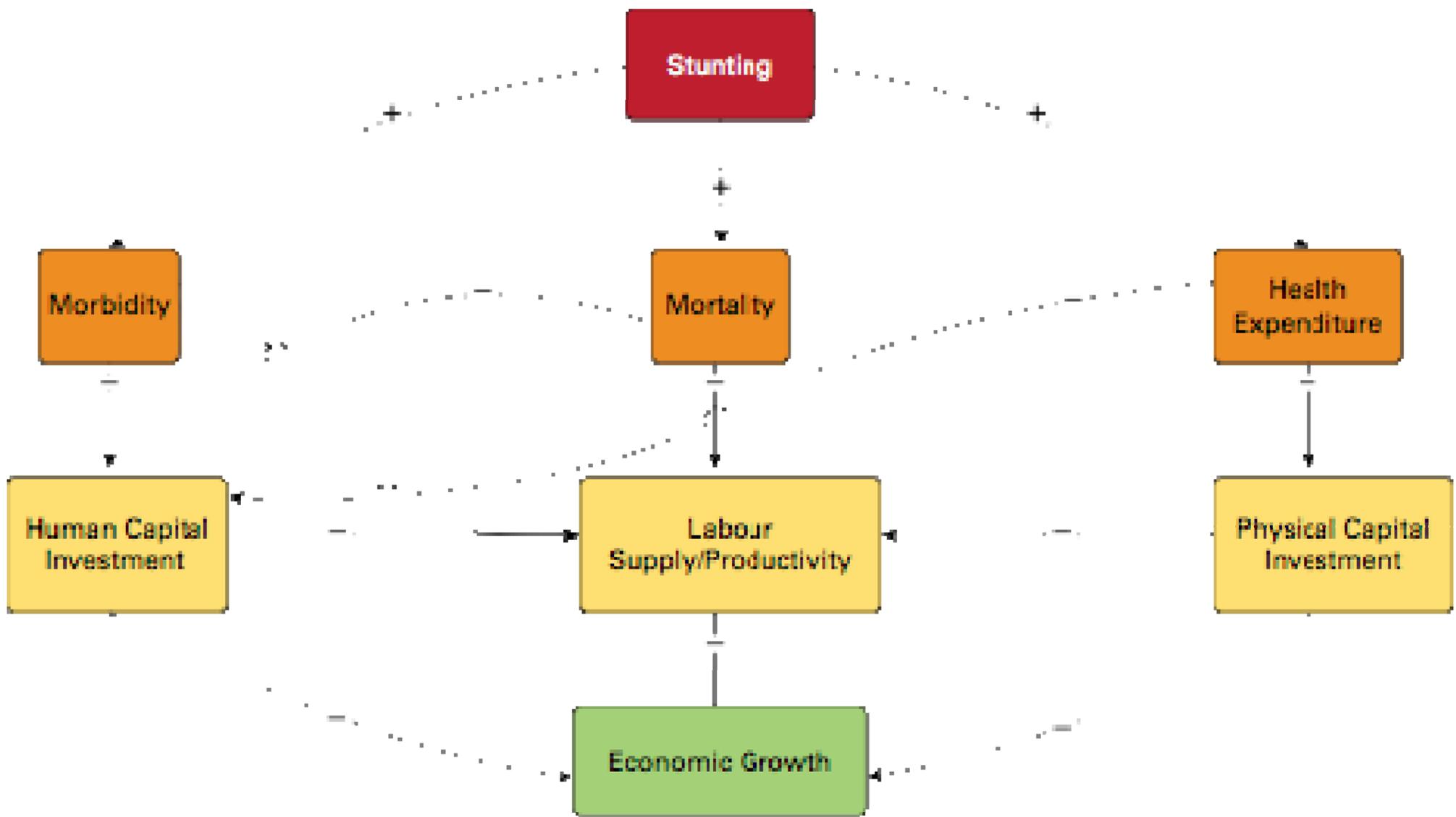
Malnourished



Two out of five stunted children in the world live in Southern Asia

Number (millions) of stunted children under 5, by United Nations sub-region, 2017





Stunting affected an estimated 22.2 per cent or 150.8 million children under 5 globally in 2017.



STUNTED
151 million

In 2017, wasting continued to threaten the lives of an estimated 7.5 per cent or 50.5 million children under 5 globally.



WASTED
51 million

An estimated 5.5 per cent or 38.3 million children under 5 around the world were overweight in 2017.



OVERWEIGHT
38 million

In Northern America..

0.5 million

0.1 million

1.7 million

In Asia..

83.6 million

35.0 million

17.5 million

In Oceania...

0.5 million

0.1 million

0.1 million

In Africa..

58.7 million

13.8 million

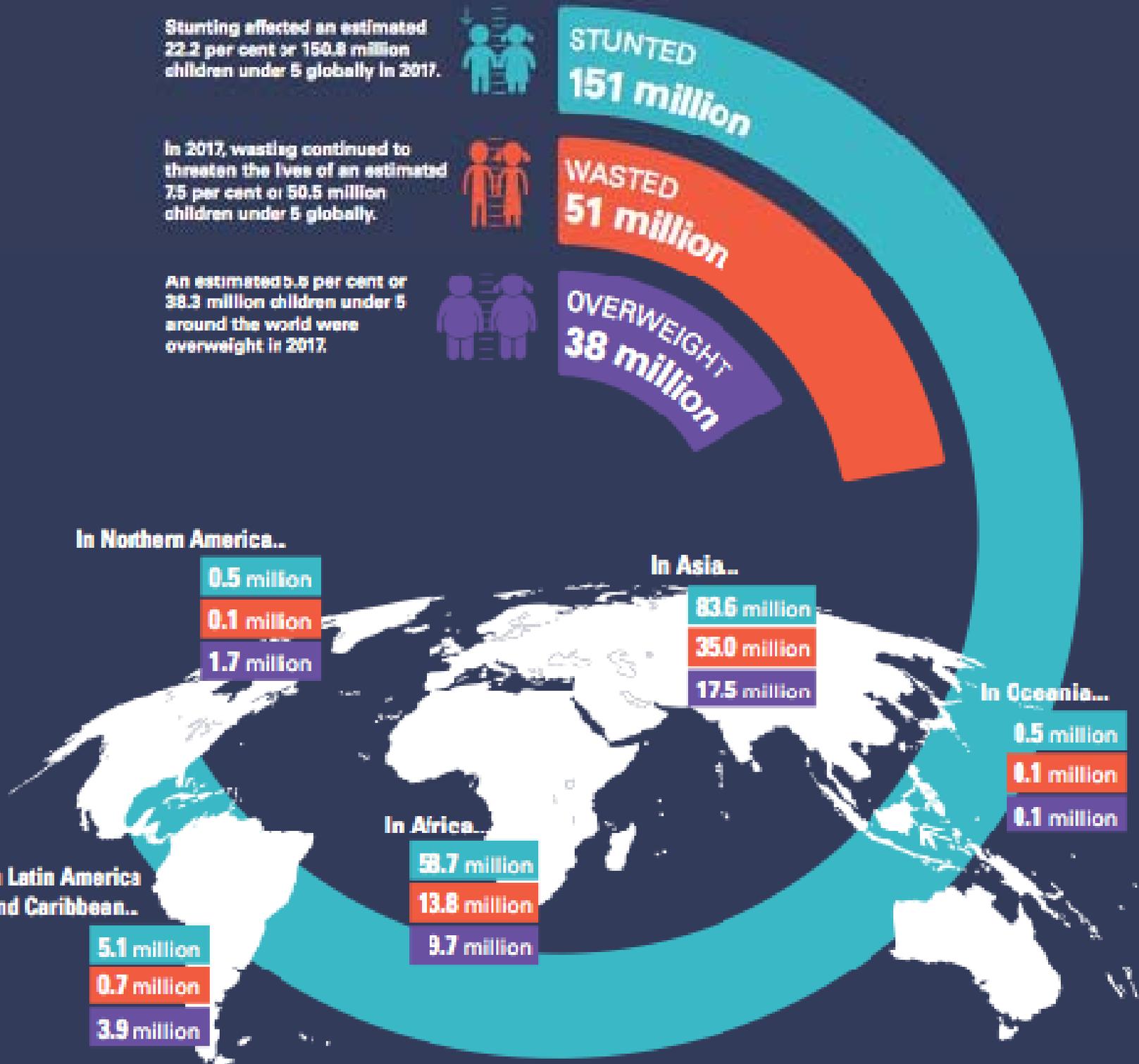
9.7 million

**In Latin America
and Caribbean..**

5.1 million

0.7 million

3.9 million



STRATEGIC OBJECTIVES FOR SAVING NEWBORNS IN SOUTH ASIA

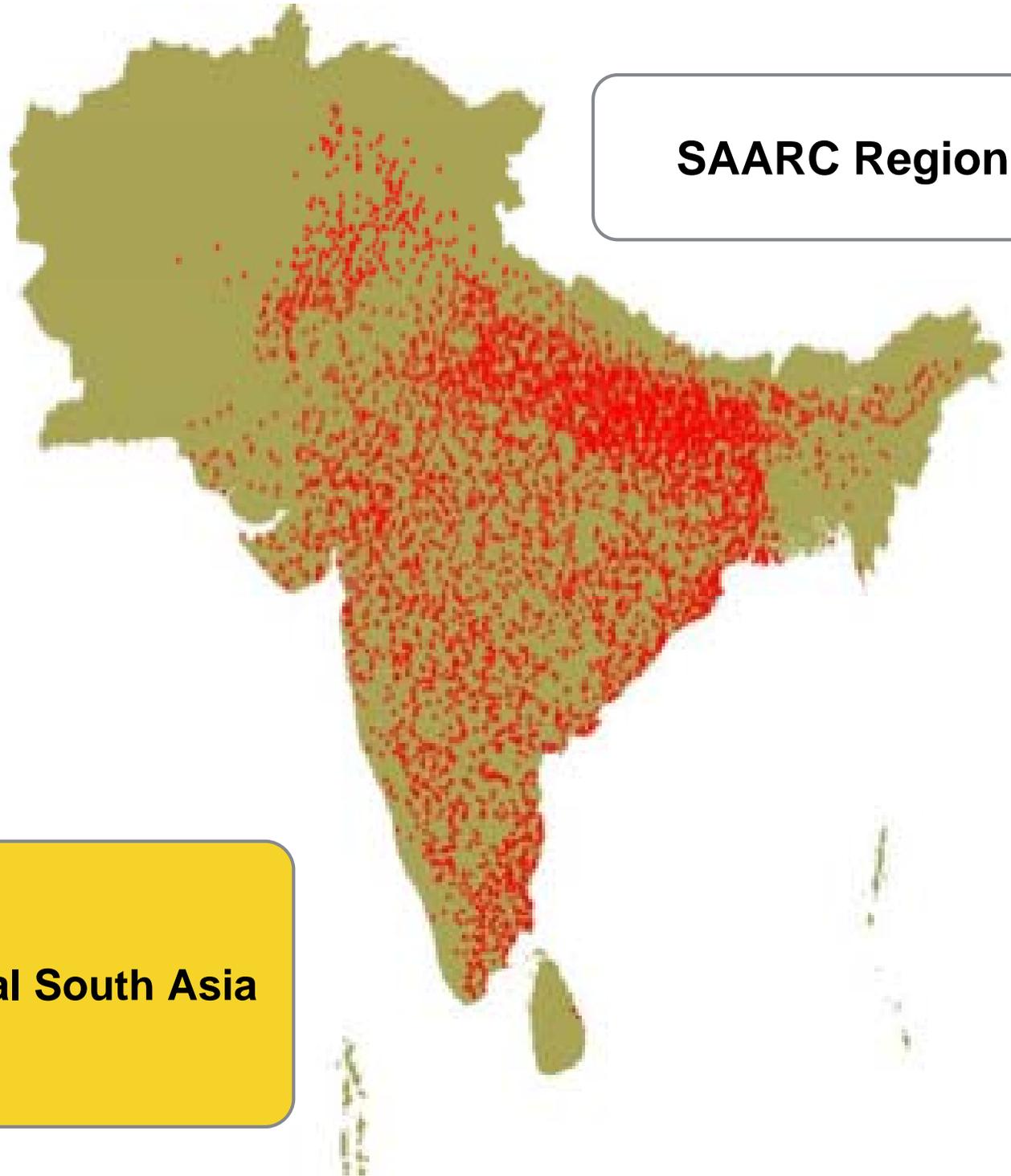
1. **Strengthen and invest in care around the time of birth**, with a focus on improving quality and experience of care, while ensuring full integration of services for mothers and newborns across the continuum of care
2. **Strengthen health systems** to optimise the organisation and delivery of care, the work force, commodities, and innovation
3. **Reach every woman and newborn** by minimising inequities in access to and coverage of care
4. **Harness the power of parents, families, and communities**, and engage with society
5. **Improve data for decision making** and accountability



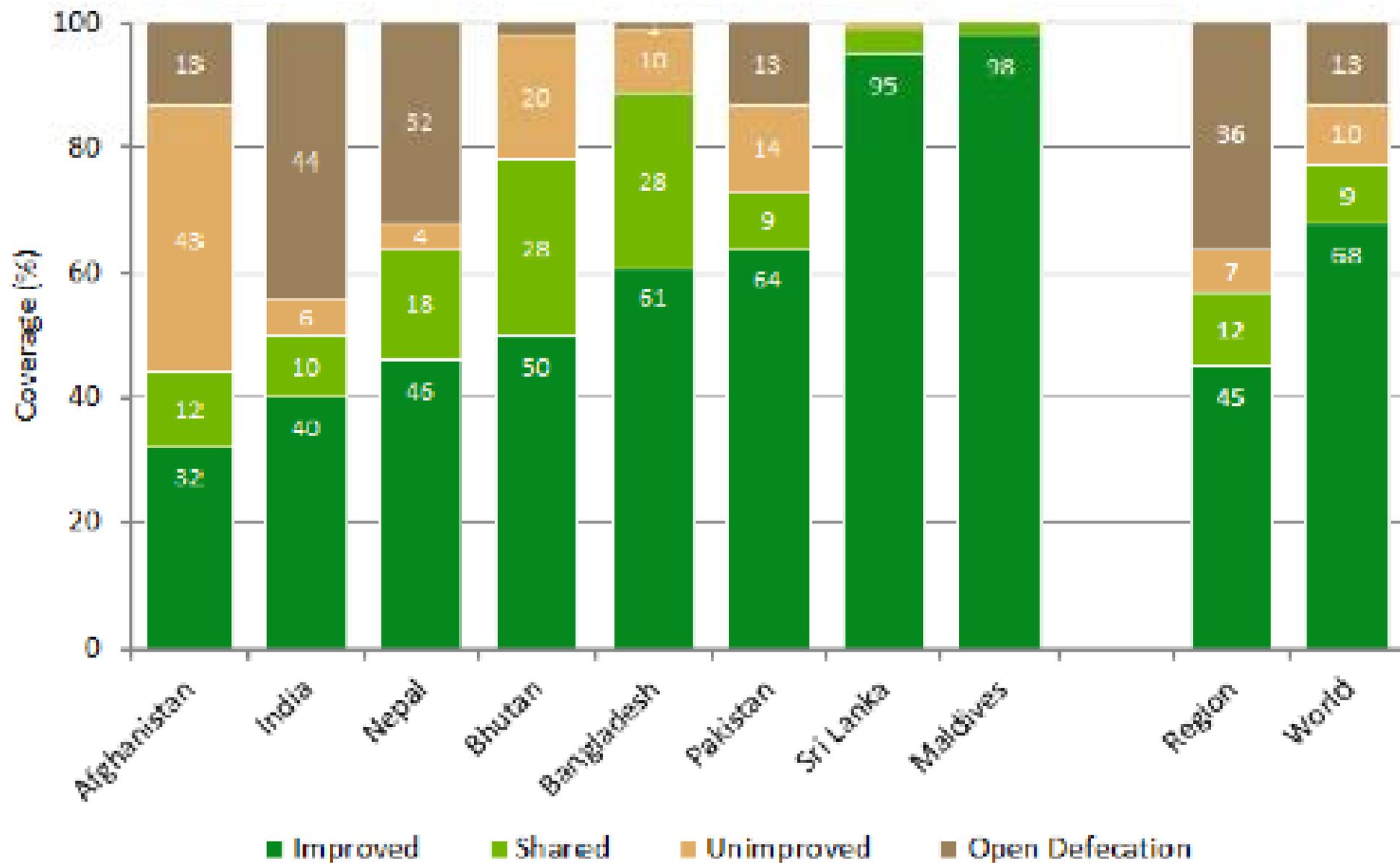
Toilets / WASH

SAARC Region

Open Defecation in Rural South Asia



Sanitation coverage varies significantly from country to country



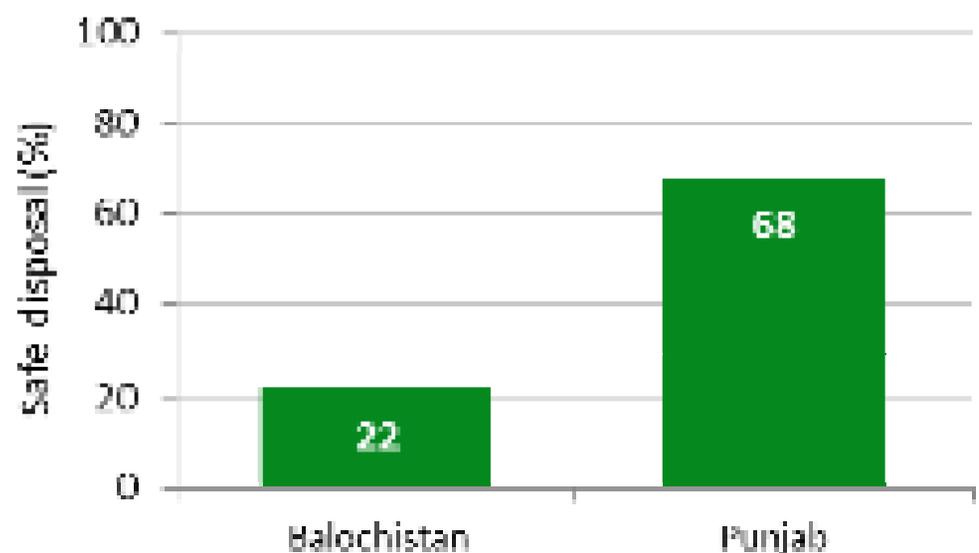
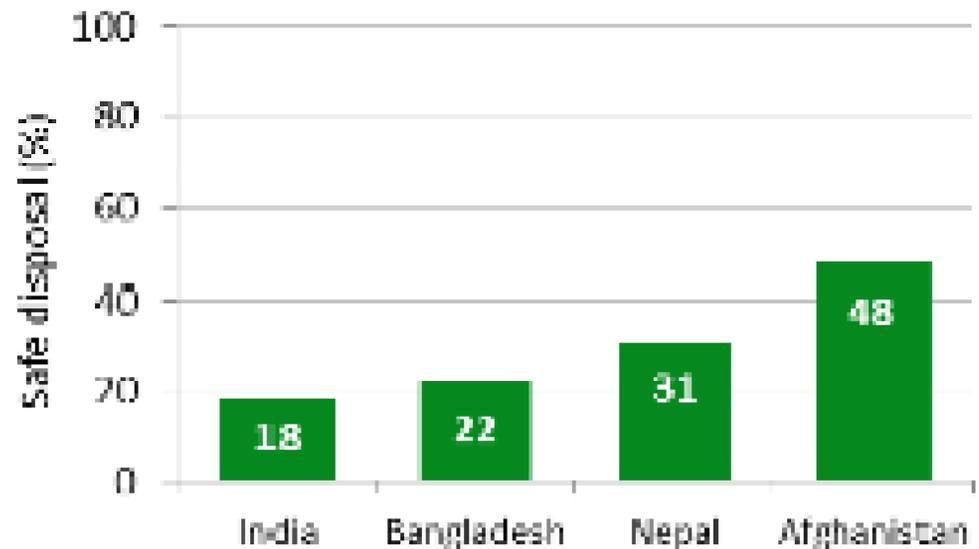
Sanitation coverage in South Asian countries, 2015, with South Asia and World comparators

Most households do not dispose child faeces safely

In all countries in South Asia with available data, child faeces are usually disposed of unsafely (left in the open, buried in the courtyard, or thrown in a ditch or drain) instead of safely (child uses toilet, faeces disposed of in toilet/latrine).

Regional variations: Pakistan Example

The proportion of households that practice safe child faeces disposal can vary widely within countries. Additionally, rural households have lower safe disposal rates than urban households (not shown).





The influx of Rohingya refugees has strained local health services like this neonatal unit in the town of Cox's Bazar where premature babies from both communities are treated.

“Infant & Young Child Feeding in emergencies”

WBTi- World Breast Feeding Trends initiative

The World Breastfeeding Trends Initiative (WBTi) is a unique tool, which tracks 10 indicators of policy and programmes that support women to be successful in breastfeeding.

Countries	Ranking	Score
Srilanka	1	88
Bangladesh	3	86
Afganistan	6	80
Maldives	19	69.5
Pakistan	33	64.5
Bhutan	57	55
Nepal	57	55
India	78	45

IYCF in emergency

- Only Sri Lanka & Bangladesh has guidelines on this

Countries	Score
Srilanka	10
Bangladesh	10
Afganistan	7
Maldives	0
Pakistan	4
Bhutan	3
Nepal	9
India	0

Best Practices to **Save the children**

- **IYCF in emergencies - No Baby Milk Powder Distribution during disasters**
- **4 times meals for Children and pregnant mothers or separate kitchen**
- **Malnutrition screening & treatment centre (Especially in regions with malnourished children)**
- **Camp Incharge & Age wise data**
- **MISP -First thing to do after any emergency , Nodal agency person**
- **Measles immunisation along with Vitamin A supplementation targeting **6m to 15yrs children** (especially for crowded camps which are going to stay >2 to 3 weeks)**

Best Practices to **Save the children**

- **Child Friendly spaces with informal education & play**
- **Breast Feeding corners - For lactating mothers upto 2yrs**
- **Daily data surveillance mechanism for detecting any outbreaks**
- **Water, Food & Shelter comes first** before Health needs in most of the disasters
- **Toilets, Clean drinking water & Waste disposal should be given Top priority before anything else**
- **Restoration & functionality of Aanganwadi's should be ensured as soon as possible**

Learnings

- **KERALA Floods**- Community led response, Youth Participation, Administrative commitments, Biofriendly Toilets, Sanitary Napkins disposal machines, cultural events in the camps, DM on community radio, Aaganwadi's restoration, Sludge digester etc.
- **Nepal Earthquake**- Hospital preparedness, Cluster coordination, EMT deployment, Medicine donation guidelines, Certificate of appreciation etc.
- **Rohingya's Crisis Bangladesh**- Malnutrition treatment centre, Cholera vaccination, Measles Immunisation drive, Burial space etc.

Learnings

- **Mumbai Train Blast** - Medicine shortage , Ambulance vs Vehicle
- **Kashmir floods**- Ban on sell of packaged food items contaminated with flood water

Challenges for SAARC Region

- **Climate change & Conflicts**
- **Region with High Malnutrition rates & weaker Health system**
- **Poor Earthquake preparedness**



Way Forward

Way Forward

- **Policies won't work**
- **Peace is first requirement for development**
- **Leadership development crucial for the SAARC region**
- **Closer cooperation & Partnership for emergencies**

Leadership



Mahbub ul Haq



Amartya Sen



Fazle Hasan

Human Development Index (HDI)

DIMENSIONS

INDICATORS

DIMENSION INDEX

Long and healthy life

Life expectancy at birth

Life expectancy index

Knowledge

Expected years of schooling
Mean years of schooling

Education index

A decent standard of living

GNI per capita (PPP \$)

GNI index

Human Development Index (HDI)





Thanks
for providing us a safer world

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