



FOR IMMEDIATE RELEASE

PRESS RELEASE: Where are the Children? Prioritising Child and Adolescent Health

RONDEBOSCH, CAPE TOWN, 10 December 2019—One in every 31 children in South Africa will die before their fifth birthday. This is a sobering reality as we mark International Human Rights Day today and the 30th anniversary of the United Nations Convention on the Rights of the Child which sets out the rights that must be realized for children to develop to their full potential. We need a greater investment in child and adolescent health to ensure that the other 30 children are able to thrive and reach their full potential. Over the past 10 years, South Africa has made huge strides in reducing under-5 mortality and deaths due to HIV from a high of 79 deaths per 1,000 live births in 2004 to 32 deaths per 1,000 in 2017. Yet most children are still dying from preventable causes such as neonatal conditions, HIV, diarrhoea, pneumonia and injuries. South Africa needs to pay greater attention to the health and development of those children who survive and address the burden of malnutrition, HIV, violence and mental health.

The *South African Child Gauge 2019*, which is released today, explores how early investment in child and adolescent health offers the greatest returns and has the potential to yield a triple dividend by improving the health of children today, the adults they will become tomorrow, and the health and development of the next generation of children.

This 14th annual review of the situation of the country's children is published by the Children's Institute (CI), University of Cape Town, in partnership with UNICEF South Africa; the DSI-NRF Centre for Excellence in Human Development, University of the Witwatersrand; The Standard Bank Tutuwa Community Foundation; and the Desmond and Leah Tutu Legacy Foundation. The theme of the 2019 issue – "*Child and Adolescent Health: Leave no one behind*" – is a call to prioritise child and adolescent health and put children at the heart of the health care system.

Intervening early

"The science is clear", explains Dr Tshepo Motsepe, First Lady of the Republic of South Africa, "if we want to promote cognitive development, break the intergenerational cycles of poverty and violence, and halt the growing epidemic of obesity and non-communicable diseases, we need to invest early – starting in the first 1,000 days of a child's life and continuing into adolescence. Investments during these two sensitive periods of development, yield the greatest returns." Adopting a life course

approach and intervening early to protect children from adversity interrupts the intergenerational cycles of poverty, violence and ill health.

Intervening outside the clinic

Lori Lake, Communications and Education Specialist at the Children's Institute and one of the lead editors of the *South African Child Gauge 2019*, explains: "Over the last decade, we have made gains in reducing child poverty and improving children's access to services, so there is a strong foundation on which to build. Yet nearly 60% of children still live below the poverty line, 30% do not have access to piped water on site, and 20% live in overcrowded household." These kinds of living conditions make it extremely difficult for families to meet children's basic needs and protect them from harm. It is therefore not surprising that 27% of young children are stunted; 42% have experienced some form of physical, sexual or emotional abuse; an estimated 10 - 20% of children have a diagnosable mental health condition such as depression, anxiety or a substance use disorder; and 37% of youth are not in employment, education and training. This is compounded by poor access to health care services with 20% of children travelling far to reach a health care facility.

"We have to recognise that health professionals have a responsibility for child health that extends beyond the walls of their clinic or hospital," said Dr Motsepe. "We need to get to know where children come from and who they live with. We should understand the challenges they face and put care plans in place that build on existing strengths in order to promote and safeguard children's health when they return to their homes, schools and communities," she added. There is therefore an urgent need to look beyond individual behaviour and to address some of the social and structural determinants of child health.

Intervening in policy

The Minister of Health, Dr Zweli Mkhize, has committed to prioritising three areas to improve child health: achieving universal health coverage by implementing National Health Insurance (NHI), better community engagement and mobilisation through community health workers, and identifying critical periods of intervention in the first 1,000 days of life and adolescence. "Having not met our Millennium Development Goal targets for reducing maternal and child mortality, it is particularly important that we carefully monitor progress with regards to meeting the Sustainable Development Goal targets - we dare not take our eyes off the ball. This edition of the *Child Gauge* can play an important role in monitoring progress, identifying gaps and suggesting remedial actions," he said.

The NHI initiative provides an opportunity to improve long-term care for children but only if the proposed 'basket of care' includes children with long term health conditions (LTHCs) and rehabilitation services are strengthened at the district level to support the large numbers of children with LTHCs and disabilities - especially those in rural areas where services are thinly stretched.

A new vision for child and adolescent health

A child-centred healthcare system requires a clear vision that extends beyond the treatment of illness and injury to one that promotes optimal health, nutrition and development; addresses the complex care needs of children with long-term health conditions; engages with children and families with the utmost care and respect and includes them as active partners in health care and decision-making. Such a vision should inform the development of an essential package of health care services, and norms and standards for medicines, equipment and infrastructure, in order to ensure children and

adolescent health receives a fair share of resources. It also requires the reorientation and training of health and allied professionals in order to build a workforce for child and adolescent health.

Over the past 10 years South Africa has indeed made good progress, yet much work remains to be done. Strong leadership and champions of children will be needed at all levels of the health care system in order to close the gap and ensure that all South Africa's children are able to thrive. Child health is everyone's business.

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Note to editors, sub-editors and journalists: The South African Child Gauge, published by UCT's Children's Institute, is an annual review that includes the latest research on a theme. Therefore, evidence and data cited in the publication and this press release are not necessarily from Children's Institute studies but are from academic partners and other experts. Please consult the publication for references to the primary sources of specific data that you might want to cite. Download the book and an accompanying policy brief, poster and child-friendly summary from www.ci.uct.ac.za.

#childgauge2019
#wherearethekids
#leavenoonebehind
#childhealthmatters
#standup4humanrights

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