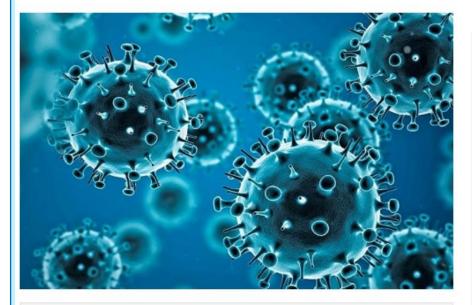
### **Recommendations from WHO**



#### Maternal, newborn, child and adolescent health

**COVID-19: Resources and support** 



Below are links to our universal resources.

Links to resources specific to MNCAH and ageing can be found on the panel to the right of this page.

## COVID19 Resources MNCAH and Ageing

Pregnancy, Childbirth, Postnatal Care

Breastfeeding

Care for young children

Adolescents and Youth

Care for older persons

#### **WHO Emergencies**

Coronavirus disease (COVID-19)

WHO Home page

#### Bernadette Daelmans

Child Health and Development Unit Department of Maternal, Newborn, Child and Adolescent Health and Ageing

World Health Organization Geneva, Switzerland

## **Outline**



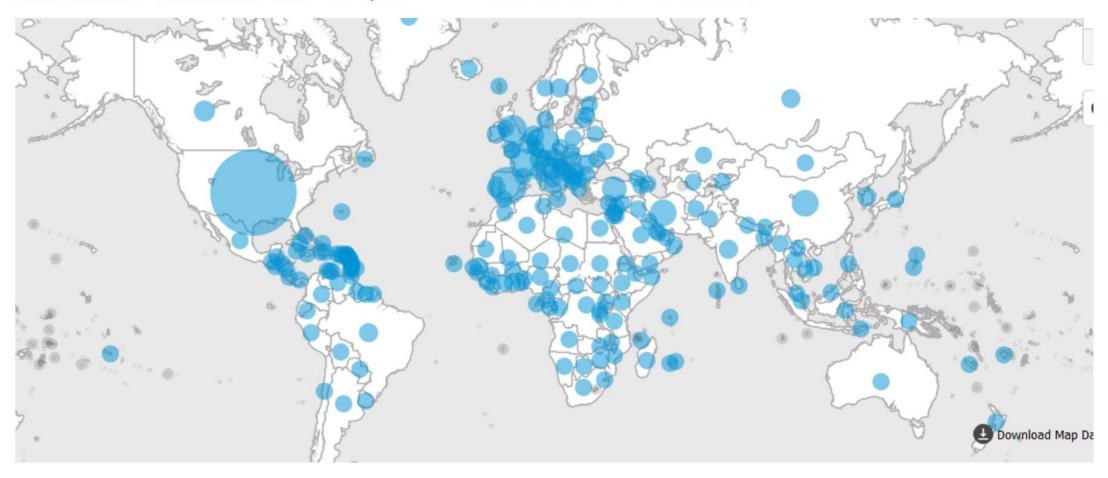
- The latest data on COVID-19 cases and deaths.
- Evidence related to COVID-19 and pregnant women, newborns and children
- Sustaining essential services and potential impact of coverage declines
- Recommendations for continuity of services
- The hidden face of COVID -19 for children
- Mental health and social support services
- Parenting tips
- Research priorities

https://www.who.int/emergencies/diseases/novel-coronavirus-2019 https://www.who.int/maternal\_child\_adolescent/links/covid19-resources-and-support-for-mncah-and-ageing/en/

## The latest data



Home / Newsroom / Feature stories / Detail / WHO updates COVID-19 dashboard with better data visualization





## Evidence related to maternal and newborn health

- Currently, there is no evidence that pregnant women present with different signs and/or symptoms or are at higher risk of severe illness.
- To date, the virus has not been found in samples of amniotic fluid, cord blood, vaginal discharge, neonatal throat swabs or breastmilk.
- Evidence of increased severe maternal or neonatal outcomes is uncertain, and limited to infection in the third trimester with consequences including preterm birth.
- WHO recommends that pregnant women with symptoms of COVID-19 should be prioritized for testing.



### Evidence related to child and adolescent health

- Children of all ages can become infected. Symptoms mostly result in mild to moderate disease.
- There is overlap of symptoms of common childhood conditions with those of COVID-19, such as acute febrile and/or respiratory illnesses. In areas with COVID-19 transmission, assessment and treatment must consider both.
- Children are at risk of receiving sub-optimal home care including care-seeking for illness.
- Delivery of non Covid-19 essential services for RMNCAH is being affected in many settings.

#### Before, during and after childbirth, all women have the right to high quality care. This includes:



#COVID19 #CORONAVIRUS

World Health Organization









Close contact and early, exclusive breastfeeding helps a baby to thrive.

A woman with COVID-19 should be supported to breastfeed safely, hold her newborn skin-to-skin, and share a room with her baby.



#COVID19 #CORONAVIRUS

# **Continuity in respectful maternal and newborn care**



#### For women with suspected, probable, or confirmed COVID-19 infection:

- WHO advice is that caesarean sections should only be performed when medically justified.
- Mothers and infants should be enabled to remain together and practice skinto-skin contact, kangaroo mother care and rooming-in throughout the day and night.
- If the newborn is admitted in the neonatal unit, mothers should be supported to express milk, have access to the unit and participate in the care of the baby.

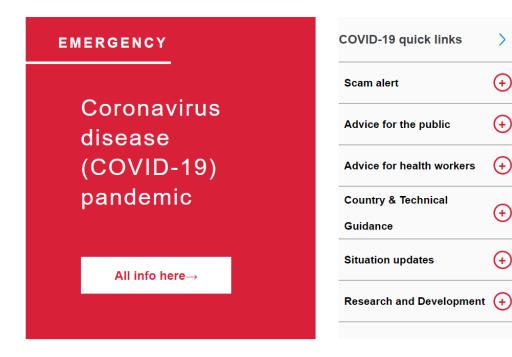
Appropriate IPC measures should be applied.

# WHO clinical guidelines on management of COVID - 19



#### **Guidelines development process**

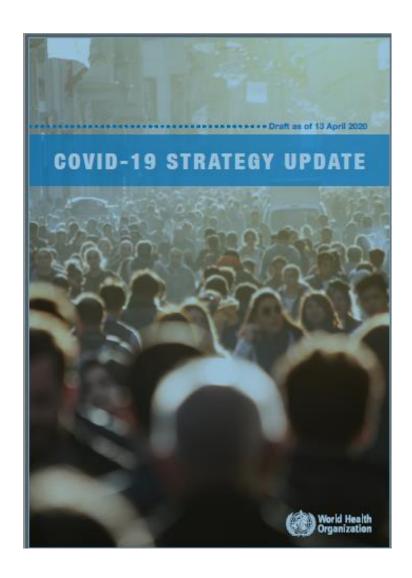
- Internal standing steering group and an external expert group
- Areas of guidance identified based on the field questions and PICO questions developed
- Guideline group reviews the evidence and makes recommendations
- Interim guidance is issued to respond to the emergency
- A clinical network continuously shares data and field experiences based on which new topics for guidance are identified or current guidance is updated



https://www.who.int/emergencies/diseases/novel-coronavirus-2019

# **Overall strategic directions**





- Current situation and key insights
- Direct and indirect effects, including on human lives, livelihoods, way of life for individuals and societies
- National strategies and international cooperation
- Transitioning to and maintaining a steady state of lowlevel or no transmission
- Accelerating research, innovation, and knowledge sharing

SPEED, SCALE AND EQUITY

# Director General's calls attention to essential health services





https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---30-march-2020

- The rapidly increasing demand on health facilities and health workers threatens to leave some health systems overstretched and unable to operate effectively.
- Previous outbreaks have demonstrated that when health systems are overwhelmed, deaths due to vaccinepreventable and treatable conditions increase dramatically.
- Even though we're in the midst of a crisis, essential health services must continue. Babies are still being born, vaccines must still be delivered, and people still need life-saving treatment for a range of other diseases.

Quote: Dr Tedros Adhanom Ghebreyesus

# Potential impact of reduced coverage of MNCAH services - preliminary models



**LiST modelling tool in 118 low and middle income countries** (an initial analysis conducted by Johns Hopkins Bloomberg School of Public Health, in press)

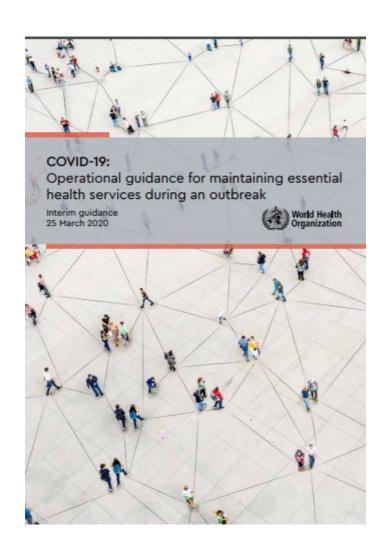
- Reductions in coverage of around 15% for 6 months would result in 253,500 additional child deaths and 12,190 additional maternal deaths.
- Reductions in coverage of around 45% for 6 months would result in 1,157,000 additional child deaths and 56,700 additional maternal deaths.

Modelling for 24 countries facing humanitarian crisis based on Ebola outbreak data (an analysis conducted by World Vision )

- 30 million children lives at stake.
- 26 million at greater risk for infection if 30% reduction in DPT3.
- 5 million additional children suffering from malnutrition based on increase of 40% from current numbers.
- Additional 100,00 children will die of malaria, an increase of 50% from current.

# Maintaining essential health care services





- **Prioritize essential services**, including vaccination, care during pregnancy, childbirth and in the postnatal period, care for young infants and older adults, mental health and psychosocial care.
- Optimize service delivery settings and platforms, including in alternative locations, community services, targeted outreach, and teleconsultation.
- Establish effective patient flow at all levels, including screening, triage, isolation of suspected and confirmed patients, targeted referral.
- Rapidly re-distribute health workforce capacity, including by reassignment and task sharing.
- Maintain population trust to safely meet population needs and control infection risk.





- Strengthen infection prevention and control strategies to prevent or limit transmission in health facilities, outreach and community services.
- Establish triage, early recognition, and source control at entry in to the hospital/ward and adjust personal protective equipment and infection prevention and control strategies accordingly.
- Avoid moving and transporting patients out of their room or area unless medically necessary. If transport is required, use predetermined transport routes and have the patient wear a medical mask.
- Limit the number of HCWs, family members, and visitors who are in contact with suspected or confirmed COVID-19 patient and maintain a record.



H6 partners South East Asia Region

# **Guiding principles for immunization**



- Where health system capacity is intact and essential health services are operational (e.g.,
  adequate human resources, adequate vaccine supply), fixed site immunization services and
  VPD surveillance should be executed while maintaining physical distancing measures and
  appropriate infection control precautions
- The appropriateness of implementing alternative strategies (e.g. outreach or mobile services), as well as activities requiring community interaction for VPD surveillance, must be assessed in the local context and should be adapted to ensure the safety of the health workers and community.
- Based on the current understanding of the transmission modes of the COVID-19 virus and the recommended prevention measures of physical distancing, it is advised to temporarily suspend the conduct of mass vaccination campaigns

Guiding principles for immunization activities during the COVID-19 pandemic

Interim guidance 26 March 2020



# **Concerns beyond health services**



Children are not the face of this pandemic.

But they risk being among its biggest victims.

UN Secretary General's report

Policy Brief: The Impact of COVID-19 on children

15 APRIL 2020

- Falling into poverty
- Exacerbating the leaning crisis
- Threats to child survival and health
- Risks to child safety

- Prioritize the continuity of childcentered services, with a particular focus on equity of access.
- Put in place specific protections for vulnerable children
- Provide practical support to parents and caregivers
- Prioritize the restoration of child services as lockdown measures wind down



## The importance of mental health and psychosocial care



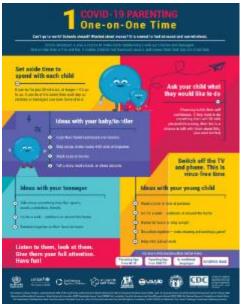




The severe acute respiratory syndrome epidemic in 2003 was associated with a 30% increase in suicide in those aged 65 years and older; around 50% of recovered patients remained anxious; and 29% of health-care workers experienced probable emotional distress

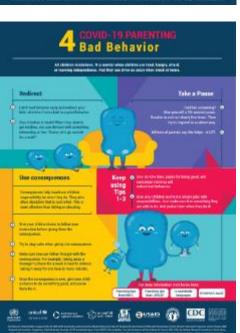
Many of the anticipated consequences of quarantine<sup>14</sup> and associated social and physical distancing measures are themselves key risk factors for mental health issues. These include suicide and self-harm, alcohol and substance misuse, gambling, domestic and child abuse, and psychosocial risks (such as social disconnection, lack of meaning or anomie, entrapment, cyberbullying, feeling a burden, financial stress, bereavement, loss, unemployment, homelessness, and relationship breakdown)

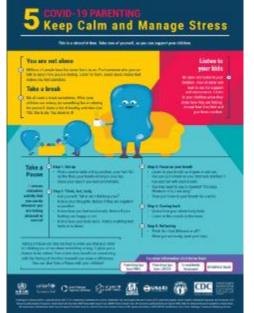
Source: Holmes EA et all, Multidisciplinary research priorities for the COVID-19 pandemic: a call for action for mental health science, *Lancet Psychiatry 2020*, https://doi.org/10.1016/ S2215-0366(20)30168-1

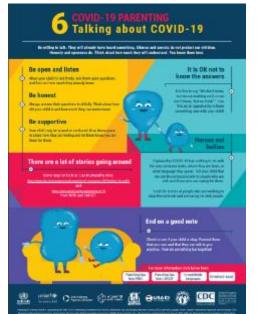




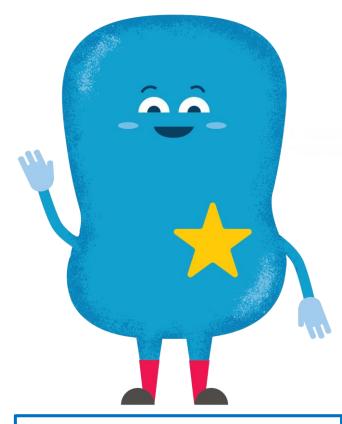












**COVID-19 Parenting Tips** 

https://www.who.int/emergencies/diseases/novelcoronavirus-2019/advice-for-public/healthy-parenting

https://www.ecdan.org/

## **Research priorities**



- The natural history of the virus, its transmission and diagnosis;
- Animal and environmental research on the origin of the virus, including management measures at the human-animal interface;
- Epidemiological studies;
- Clinical characterization and management of disease caused by the virus;
- Infection prevention and control, including best ways to protect health care workers;
- Research and development for candidate therapeutics;
- Research and development for candidate vaccines.





## In pipeline (exemplar)

- Updated clinical guidelines for all age groups release before the end of April. (WHO)
- Guidance: Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic release anticipated shortly. (UNICEF, WHO)
- Guidance to ensure the continuity of non-Covid-19 essential RMNCAH services during COVID-19 outbreak – work in progress. (WHO, UNICEF)
- Country-based approaches for monitoring the impact of the COVID-19 pandemic on delivery
  of essential RMNCAH services and of mitigation strategies work in progress. (UNICEF, WHO)





# Thank you

and all health workers
caring for people at
the frontline
and
those that are in the
background to
support.