

Child health and wellbeing dashboards: accountability for children's rights



In February, 2020 the WHO–UNICEF–*Lancet* Commission on child health and wellbeing launched its report¹ and called for renewed commitment to children's fundamental rights as enshrined in the UN Convention on the Rights of the Child (CRC),² an international legal framework adopted in 1989. The Commission's report, and the Commissioners' July, 2020 Comment on the potential for the COVID-19 pandemic to reverse gains made in children's health,³ underlined the uncertainties children face, including climate change, political instability, inequities perpetuating intergenerational cycles of poverty, and predatory commercial practices. The WHO–UNICEF–*Lancet* Commission's report also makes recommendations for building a better future for children by placing them at the centre of global, regional, and national development agendas and by holding governments to account for fulfilling children's rights through a robust monitor, review, and act cycle.¹ This cycle depends on the availability of an accountability mechanism that showcases country performance across the four dimensions of the CRC: children's right to be healthy, protected, educated, and fairly treated and heard.²

To assess country progress on the CRC, the Commissioners developed a child flourishing and futures composite index, which showed that wealthier countries perform better than their poorer counterparts on child health and development outcomes but are imperilling children's futures through excessive greenhouse gas emissions and industry practices that are contributing to environmental degradation.¹ These results compelled the Commissioners to propose the development of an additional accountability mechanism, a user-friendly dashboard that helps countries to regularly monitor their progress on child health and wellbeing and make evidence-based decisions about priority areas for action and resource allocation.

In response, WHO and UNICEF led a consultative process to create a simple, innovative dashboard that built on existing frameworks from related initiatives, such as the scorecards of the African Leaders Malaria Alliance (ALMA), the Countdown to 2030 for Women's, Children's, and Adolescents' Health, the Global Strategy for Women's, Children's, and Adolescents' Health, the Integrated Global Action Plan for Prevention and Control of Pneumonia and Diarrhoea,⁴ the WHO–UNICEF



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For the African Leaders Malaria Alliance scorecards see <https://scorecardhub.org/>

For Countdown to 2030 for Women's, Children's, and Adolescents' Health see <https://www.countdown2030.org/>

For the Global Strategy for Women's, Children's, and Adolescents' Health see <https://www.who.int/data/maternal-newborn-child-adolescent-ageing/global-strategy-data>

For the **Nurturing Care Framework** see <https://nurturing-care.org>

For **Children in All Policies 2030** see <https://cap-2030.org/>

See **Online** for appendix

For the **Child Health and Wellbeing Dashboards** see <https://platform.who.int/data/maternal-newborn-child-adolescent-ageing/child-health-and-well-being-dashboard>

For the **UN Sustainable Development Goal Framework** see <https://www.un.org/sustainabledevelopment/>

For the **Every Newborn Action Plan** see <https://www.who.int/initiatives/every-newborn-action-plan>

Child Health Redesign,⁵ and the Nurturing Care Framework.

The first step of the consultative process was to reach consensus on basic parameters of the dashboard including format, domain areas, and age categories. Discussions were held with the Children in All Policies 2030 (CAP2030) Data and Learning Working Group and consensus was reached on three steps. First, to use a scorecard template similar to the ALMA scorecard with a traffic light style classification system for the indicator data. Second, to use the four domain areas in the CRC and label them as survive, protection, development, and participation plus the cross-cutting domain of contextual and policy factors. Third, to use the standard age categories recommended by WHO for children and adolescents.⁶ The second step involved selecting indicators to populate the dashboard, which required selecting one indicator for each of the four domains for each age grouping and agreeing on a core set of contextual and policy indicators most relevant for influencing children's life chances. Working closely with the CAP2030 Working Group and with experts at WHO, UNICEF, and the UN Educational, Scientific and Cultural Organization, indicators were chosen through a combination of prioritising indicators included in the UN Sustainable Development Goal (SDG) Framework plus the frameworks listed above, and for which data are regularly collected (appendix). The third step entailed setting thresholds to be used for assessing progress on each of the indicators and colour coding the indicator values accordingly to indicate country performance against the threshold. Agreement was reached to ensure the thresholds take into consideration the distribution of the indicator data values and are consistent with existing global or regional targets, such as SDG targets, targets set by global initiatives, such as the Every Newborn Action Plan, and existing benchmarking processes, such as those undertaken by the nutrition and education communities.

In parallel with the consultation process, WHO and UNICEF worked with a design team to develop dashboard prototypes that were refined through a series of iterations informed by feedback from the CAP2030 Working Group and WHO and UNICEF regional colleagues. The online dashboards are interactive and include a pop-up function that shows the meta-data (eg, definition, data source and year, and information on

threshold categories and targets) when users hover over any indicator (appendix).

The Child Health and Wellbeing Dashboards were launched on May 4, 2022 and will undergo user testing with key audiences to ensure they fit the purpose of equipping country decision makers, donors, and civil society members with the evidence needed to better target resources for realising children's fundamental rights. Although there has been progress in improving child survival in the past few decades,⁷ the threats of climate change, conflict and other humanitarian disasters, disease outbreaks, and inequities in access to social, education, and health services can rapidly undo these gains. These dashboards are a tool to keep all stakeholders vigilant, keep children in the spotlight, and to guide the allocation of resources to where they are most needed.

All authors were involved in the development of the child health and wellbeing dashboards described in this Comment. The authors alone are responsible for the views expressed in this Comment and they do not necessarily represent the views, decisions, or policies of the institutions with which they are affiliated. TDi, SR, SD, and AC received support from the Children's Investment Fund Foundation to develop the child health and wellbeing dashboards. LG and AC received funding support and consultancy fees from the Children in All Policies 2030 initiative. The other authors declare no other competing interests. We thank the following colleagues for their inputs to the indicator selection process and feedback on the design elements of the dashboard: Claudia García Moreno Esteva and Lynn Marie Sardinha from the WHO Department of Sexual and Reproductive Health and Research for their help with the intimate partner violence data; Elizabeth Katwan from the WHO Department of Maternal, Newborn, Child, Adolescent Health and Ageing for the WHO policy survey data on reproductive, maternal, newborn, child, and adolescent health; Enrique Delamonica, Suguru Mizunoya, Claudia Cappa, Nicole Petrowski, Lucia Hug, Danzhen You, Dave Sharrow, Liliana Carvajal, Samuel Chakwera, and Lauren Francis from the UNICEF Division of Data, Analytics, Planning and Monitoring for their inputs on the child mortality, child poverty, education, and child protection indicators. We thank the team from Lushomo, Capetown, South Africa for their help with the dashboard design. We also thank the Children's Investment Fund Foundation for their support.

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