



Building a Future for Women and Children: The 2012 Countdown Report

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International Epidemiological Association



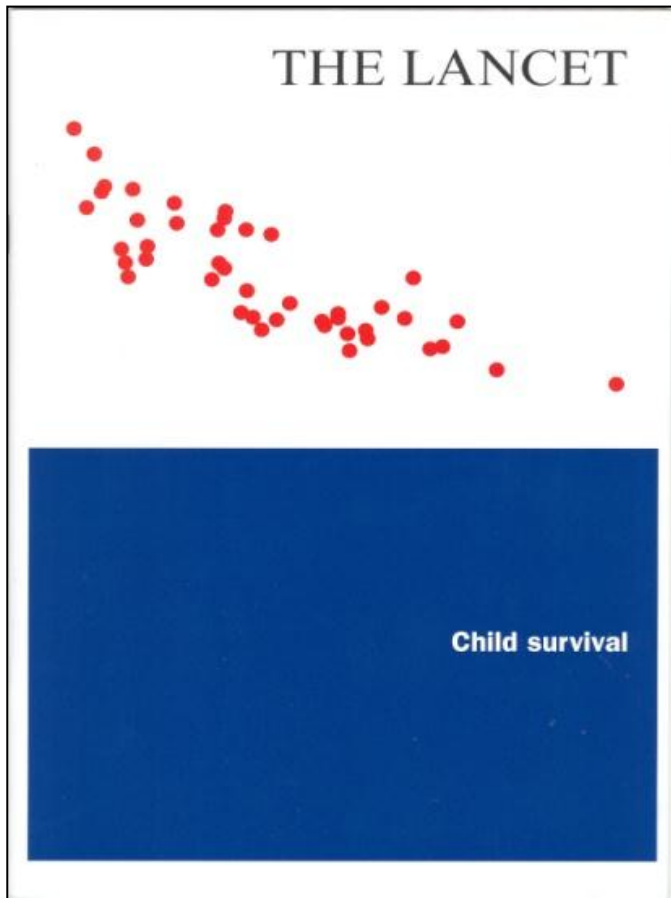
#CD2015

Purpose of Session

- I. Background to Countdown Monitoring**
- II. 2012 Countdown Report Findings**
- III. A Focus on Equity**

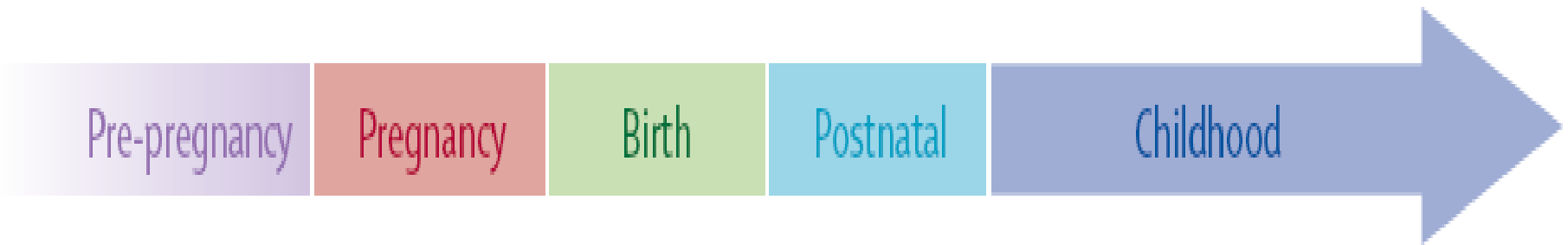


Origins - 2003



“We commit ourselves to convening a series of meetings, every 2 years, ... to **take stock of progress** in preventing child deaths, and to hold countries and their partners **accountable.**”

An evolution from child survival to the continuum of care

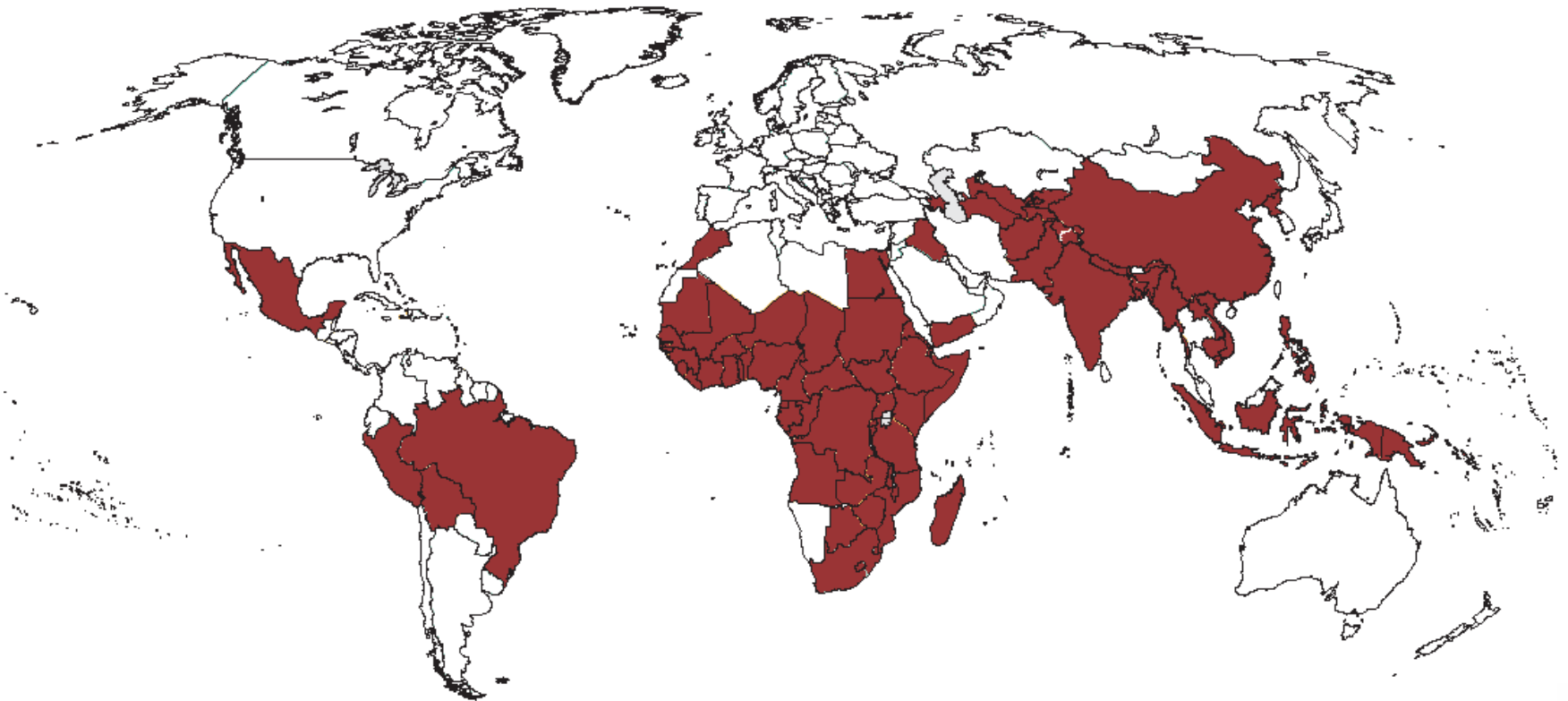


What do we monitor?

- Intervention **coverage**
- Health **systems and policies**
- **Financial flows** to reproductive, maternal, newborn and child health
- **Equity** in intervention coverage

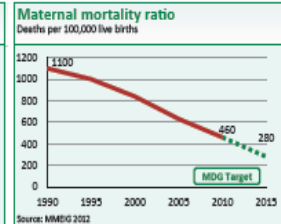
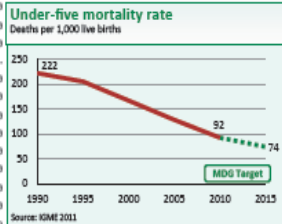
Where is Countdown?

75 countries that together account for > 95% of maternal and child deaths worldwide.

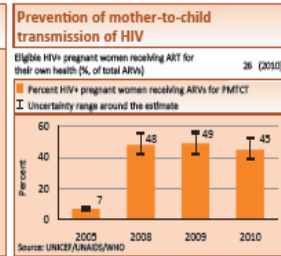
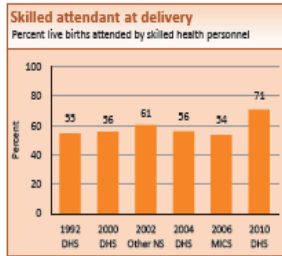
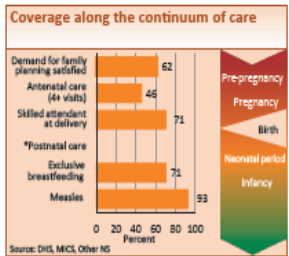


DEMOGRAPHICS

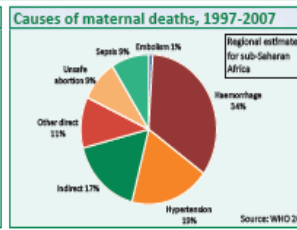
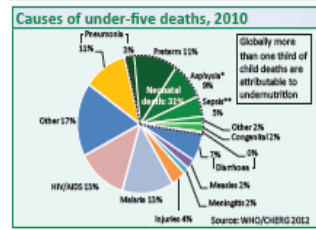
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Total under-five population (000)	2,715	(2010)
Births (000)	663	(2010)
Birth registration (%)	-	(2010)
Total under-five deaths (000)	56	(2010)
Neonatal deaths: % of all under-5 deaths	32	(2010)
Neonatal mortality rate (per 1000 live births)	27	(2010)
Infant mortality rate (per 1000 live births)	58	(2010)
Stillbirth rate (per 1000 total births)	24	(2010)
Total maternal deaths	3,000	(2010)
Lifetime risk of maternal death (1 in N)	36	(2010)
Total fertility rate (per woman)	6.0	(2010)
Adolescent birth rate (per 1000 women)	177	(2010)



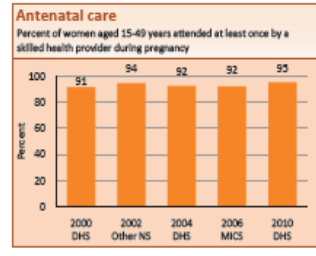
MATERNAL AND NEWBORN HEALTH



DEMOGRAPHICS

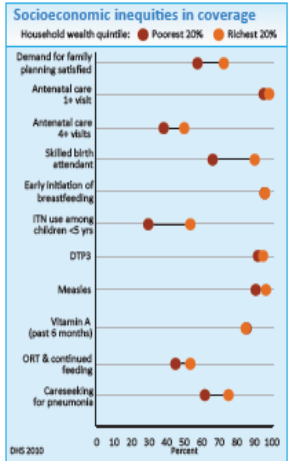


MATERNAL AND NEWBORN HEALTH

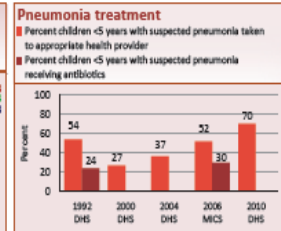
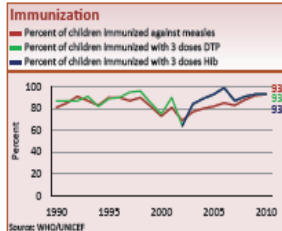


Demand for family planning satisfied (%)	62	(2008)
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Women with low body mass index (<18.5 kg/m², %)	7	(2008)

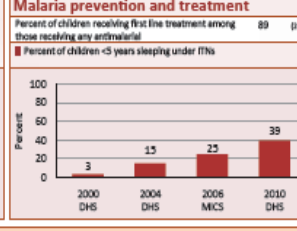
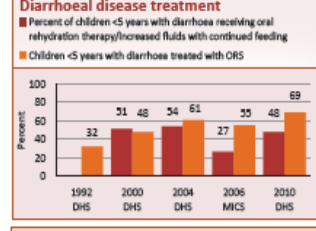
EQUITY



CHILD HEALTH



CHILD HEALTH



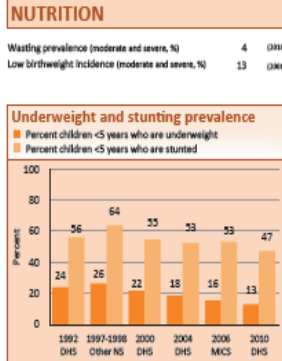
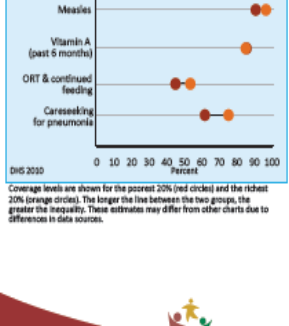
POLICIES

Maternity protection in accordance with Convention 183	No
Specific notification of maternal deaths	Yes
Midwifery personnel authorized to administer core set of life saving interventions	Yes
International Code of Marketing of Breastmilk Substitutes	Yes
Postnatal home visits in first week of life	Yes
Community treatment of pneumonia with antibiotics	Yes
Low osmolality ORS and zinc for management of diarrhoea	Yes
Rotavirus vaccine	Partial
Pneumococcal vaccine	Yes

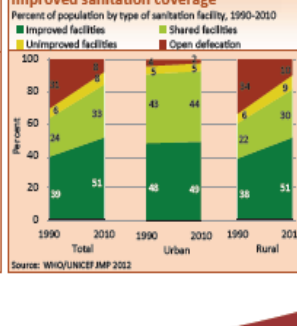
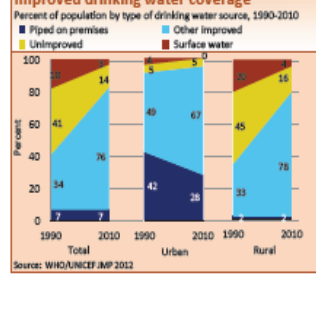
SYSTEMS AND FINANCING

Costed national implementation plan(s) for maternal, newborn and child health available	Partial
Density of doctors, nurses and midwives (per 10,000 population)	3.0 (2008)
National availability of emergency obstetric care services (% of recommended minimum)	32 (2008)
Per capita total expenditure on health (USD)	56 (2008)
General government expenditure on health as % of total government expenditure (%)	14 (2008)
Out-of-pocket expenditure as % of total expenditure on health (%)	11 (2008)
Official development assistance to child health per child (USD)	24 (2008)
Official development assistance to maternal and neonatal health per live birth (USD)	78 (2008)

NUTRITION



WATER AND SANITATION



Malawi

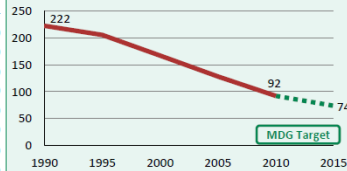
First Page

DEMOGRAPHICS

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Under-five mortality rate

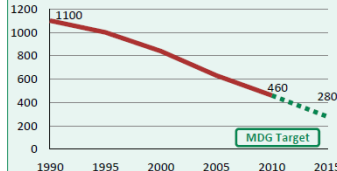
Deaths per 1,000 live births



Source: IGME 2011

Maternal mortality ratio

Deaths per 100,000 live births

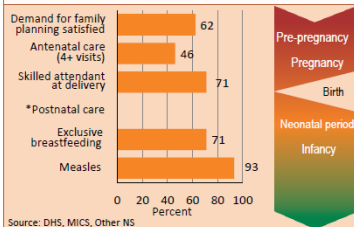


Source: MMEIG 2012

Note: MDG target calculated by Countdown to 2015

MATERNAL AND NEWBORN HEALTH

Coverage along the continuum of care

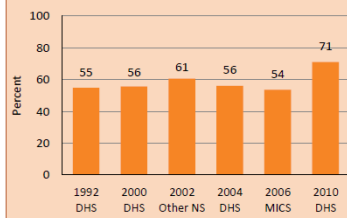


Source: DHS, MICS, Other NS

* See Annex/website for indicator definition

Skilled attendant at delivery

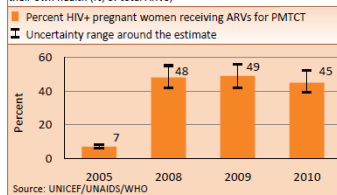
Percent live births attended by skilled health personnel



Source: DHS, MICS, Other NS

Prevention of mother-to-child transmission of HIV

Eligible HIV+ pregnant women receiving ART for their own health (% of total ARVs) 26 (2010)

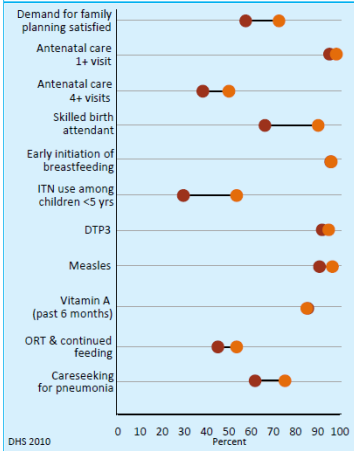


Source: UNICEF/UNAIDS/WHO

EQUITY

Socioeconomic inequities in coverage

Household wealth quintile: ● Poorest 20% ● Richest 20%

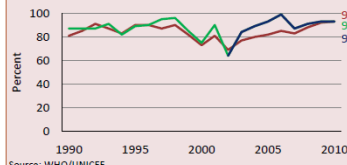


Coverage levels are shown for the poorest 20% (red circles) and the richest 20% (orange circles). The longer the line between the two groups, the greater the inequality. These estimates may differ from other charts due to differences in data sources.

CHILD HEALTH

Immunization

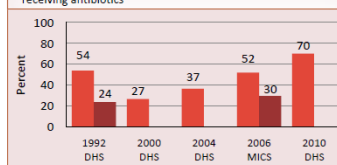
■ Percent of children immunized against measles
■ Percent of children immunized with 3 doses DTP
■ Percent of children immunized with 3 doses Hib



Source: WHO/UNICEF

Pneumonia treatment

■ Percent children <5 years with suspected pneumonia taken to appropriate health provider
■ Percent children <5 years with suspected pneumonia receiving antibiotics

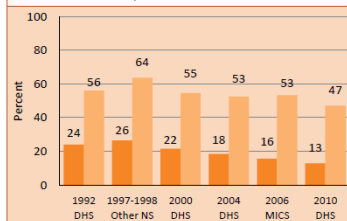


NUTRITION

Wasting prevalence (moderate and severe, %)	4	(2010)	Early initiation of breastfeeding (within 1 hr of birth, %)	58	(2006)
Low birthweight incidence (moderate and severe, %)	13	(2006)	Introduction of solid, semi-solid/soft foods (%)	86	(2010)
			Vitamin A supplementation (two dose coverage, %)	96	(2010)

Underweight and stunting prevalence

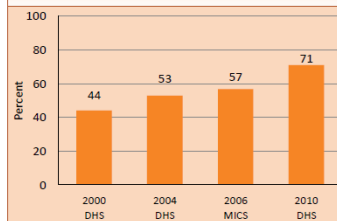
■ Percent children <5 years who are underweight
■ Percent children <5 years who are stunted



Note: Based on 2006 WHO reference population

Exclusive breastfeeding

Percent infants <6 months exclusively breastfed



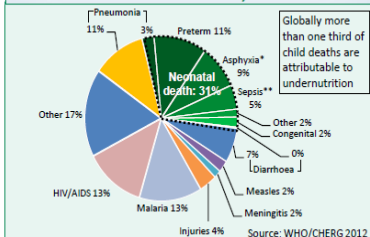
- Demographics, including mortality
- Maternal & Newborn Health, including Continuum of Care
- Equity
- Child Health
- Nutrition

Second Page

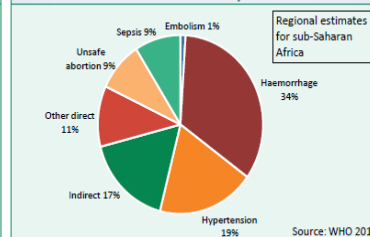
- Demographics with causes of child and maternal deaths
- Maternal and Newborn Health
- Child Health
- Water and Sanitation
- Policies
- Systems & Financing

DEMOGRAPHICS

Causes of under-five deaths, 2010



Causes of maternal deaths, 1997-2007



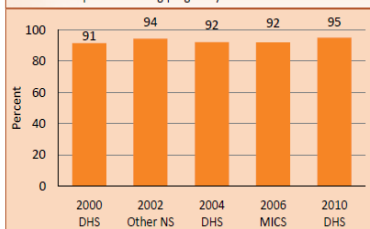
POLICIES

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Postnatal home visits in first week of life	Yes
Community treatment of pneumonia with antibiotics	Yes
Low osmolarity ORS and zinc for management of diarrhoea	Yes
Rotavirus vaccine	Partial
Pneumococcal vaccine	Yes

MATERNAL AND NEWBORN HEALTH

Antenatal care

Percent of women aged 15-49 years attended at least once by a skilled health provider during pregnancy

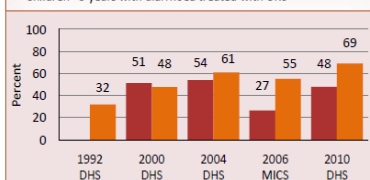


Demand for family planning satisfied (%)	62	(2010)
Antenatal care (4 or more visits, %)	46	(2010)
Malaria during pregnancy - intermittent preventive treatment (%)	60	(2010)
C-section rate (total, urban, rural, %) (Minimum target is 5% and maximum target is 15%)	5, 8, 4	(2010)
Neonatal tetanus vaccine (%)	87	(2010)
Postnatal visit for baby (within 2 days for all births, %)	-	-
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CHILD HEALTH

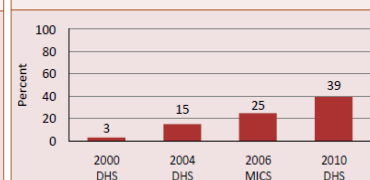
Diarrhoeal disease treatment

■ Percent of children <5 years with diarrhoea receiving oral rehydration therapy/increased fluids with continued feeding
■ Children <5 years with diarrhoea treated with ORS



Malaria prevention and treatment

■ Percent of children receiving first line treatment among those receiving any antimalarial
■ Percent of children <5 years sleeping under ITNs

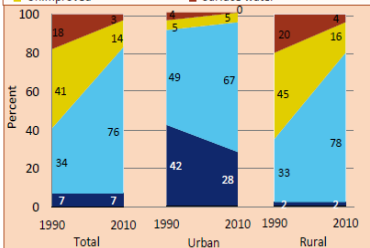


WATER AND SANITATION

Improved drinking water coverage

Percent of population by type of drinking water source, 1990-2010

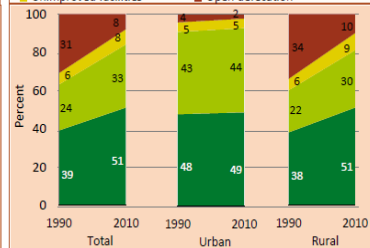
■ Piped on premises ■ Other improved
■ Unimproved ■ Surface water



Improved sanitation coverage

Percent of population by type of sanitation facility, 1990-2010

■ Improved facilities ■ Shared facilities
■ Unimproved facilities ■ Open defecation



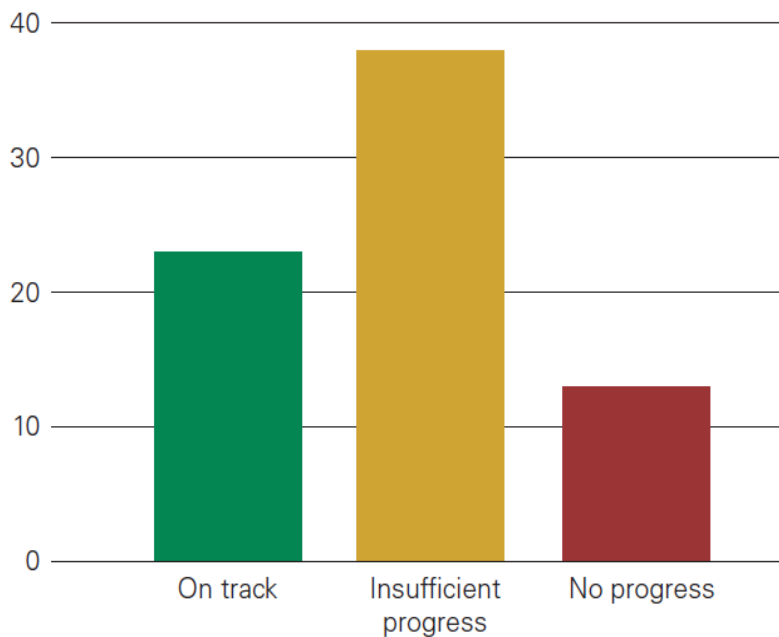
SYSTEMS AND FINANCING

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Progress towards MDGs 4 & 5, but many countries are lagging

MDG4 for child survival

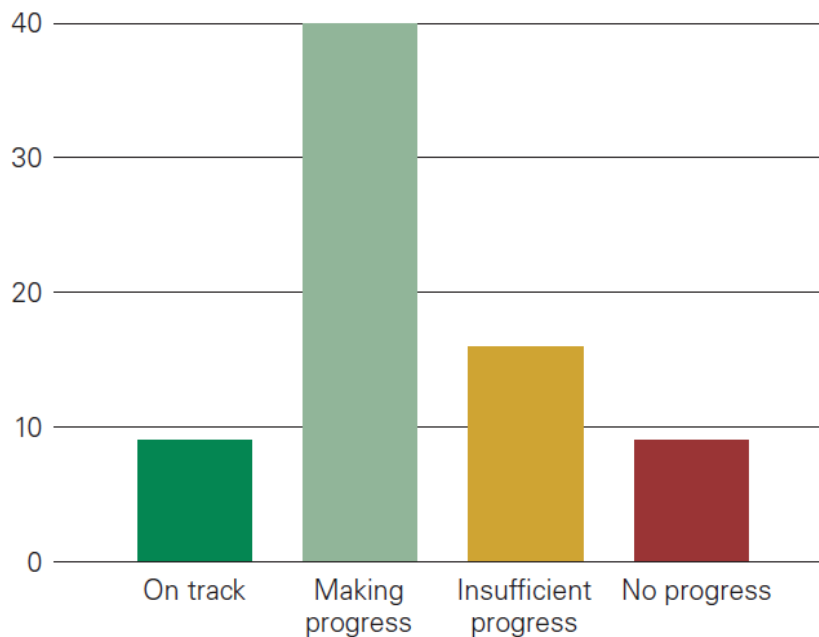
Number of *Countdown* countries



Overall progress as of 2010

MDG5 for maternal health

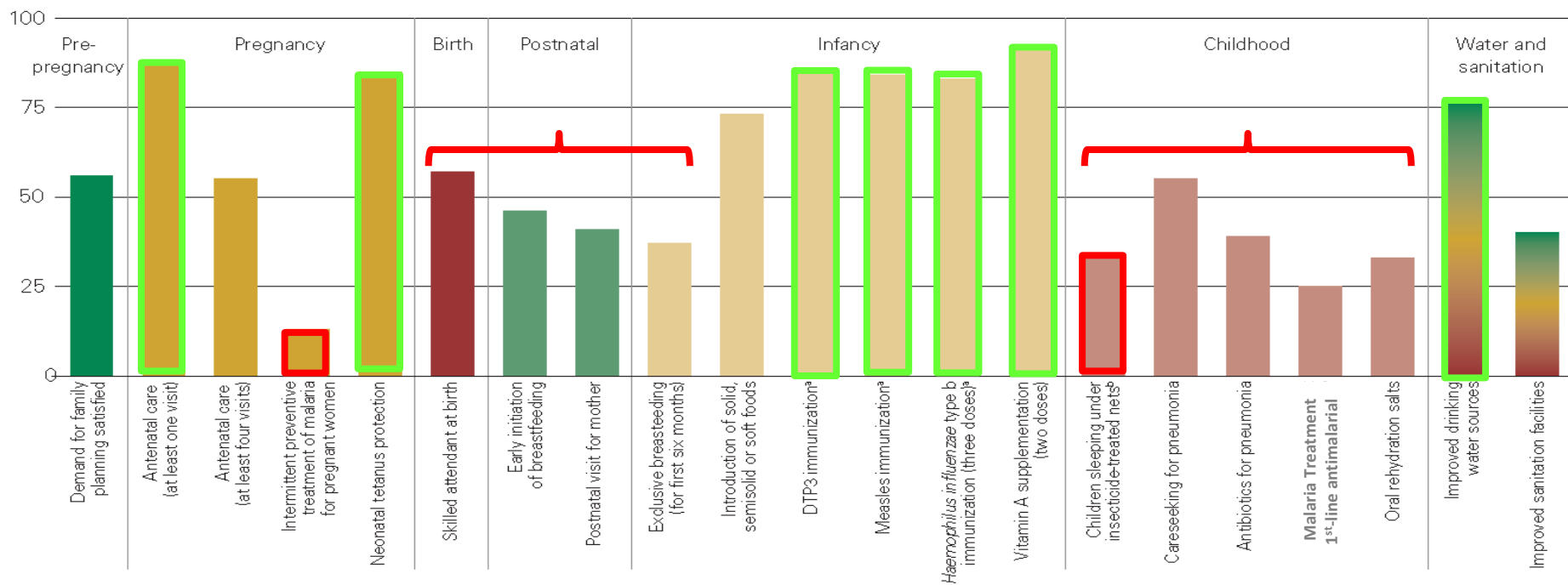
Number of *Countdown* countries



Overall progress as of 2010

Variable coverage across the continuum of care

Median national coverage of selected *Countdown* interventions, most recent year since 2006 (%)



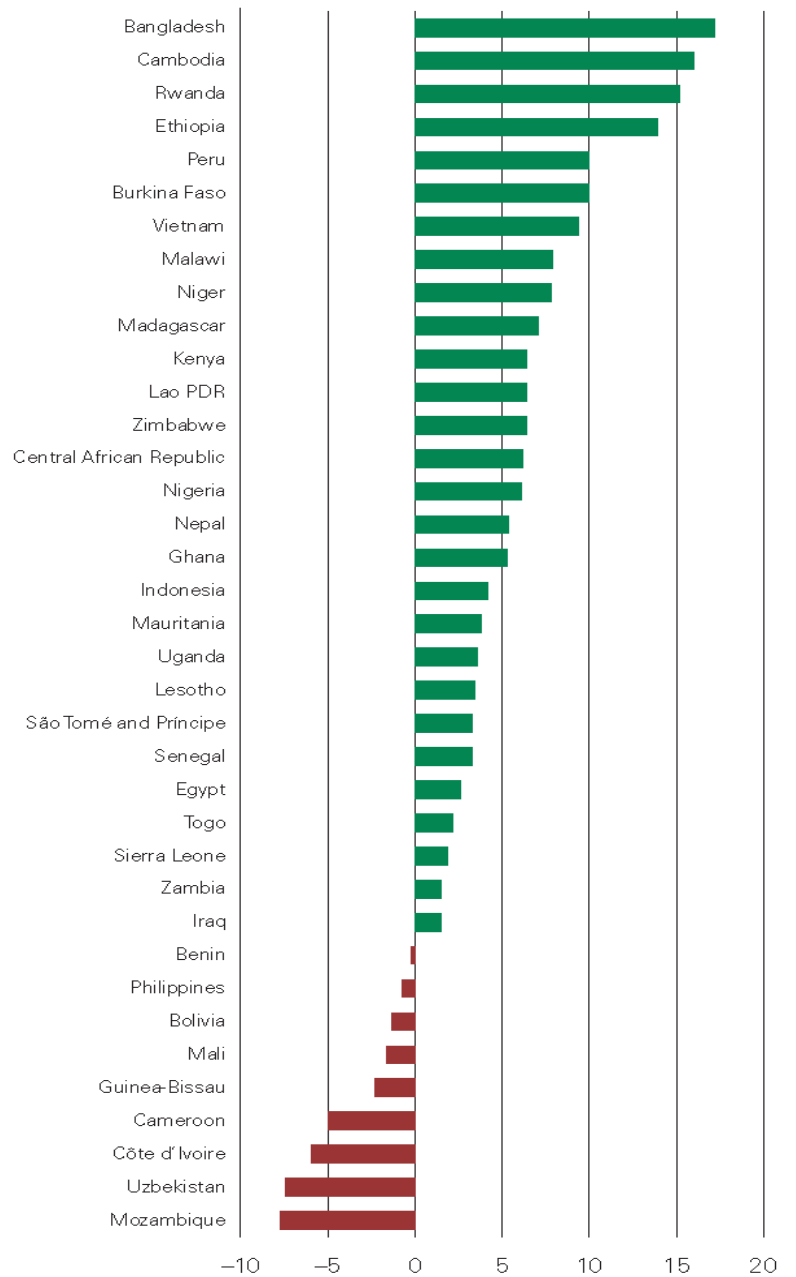
a. Data are for 2010.

b. Analysis is based on countries with 75% or more of the population at risk of *p. falciparum* transmission.

Source: Immunization rates, WHO and UNICEF; postnatal visit for mother, Saving Newborn Lives analysis of Demographic and Health Surveys; improved water and sanitation, WHO and UNICEF Joint Monitoring Programme 2012; all other indicators, UNICEF global databases, April 2012, based on Demographic and Health Surveys, Multiple Indicator Cluster Surveys and other national surveys.

Some countries are making gains across multiple interventions, but coverage has declined in other countries

Change in composite coverage indicator over about five years



Critical determinants of coverage: national policies, health systems, and external resource flows

POLICIES

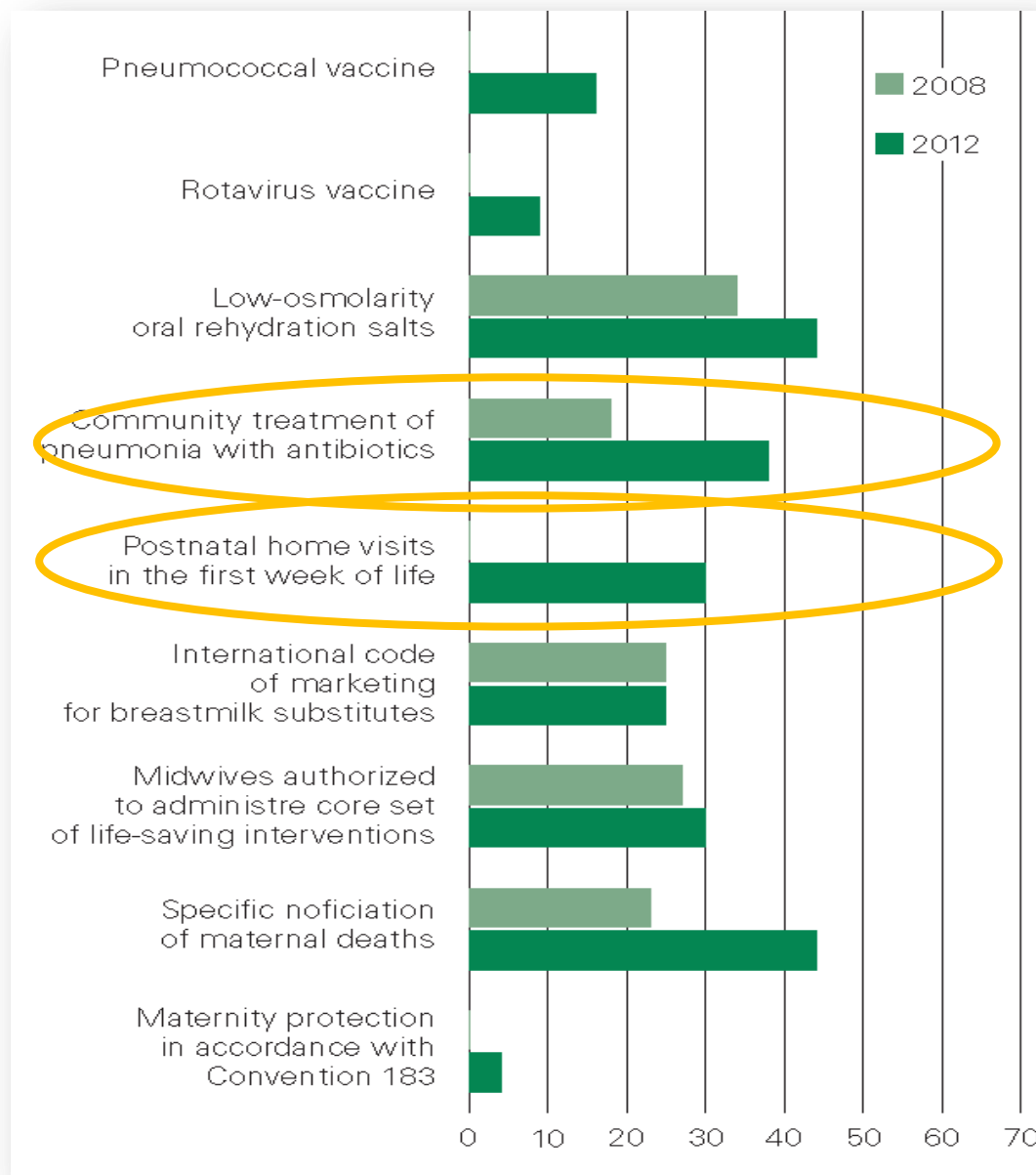
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Number of Countdown countries with policy, 2008 & 2012

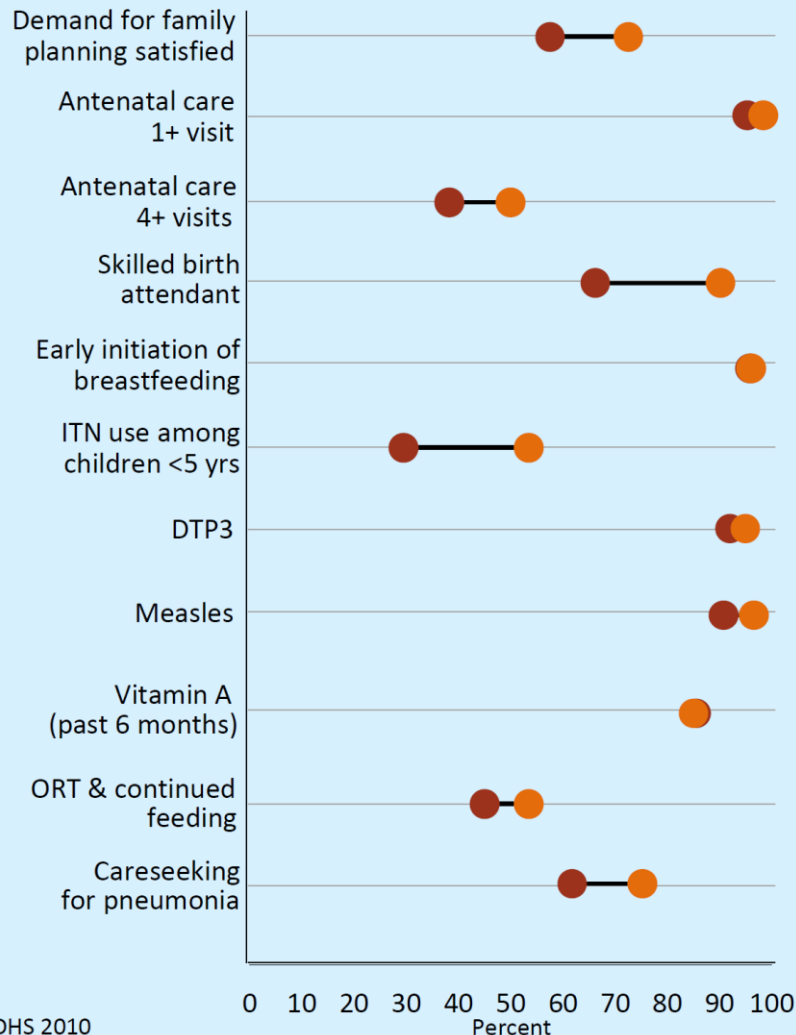
Variable progress
in adopting
supportive policies



EQUITY

Socioeconomic inequities in coverage

Household wealth quintile: ● Poorest 20% ● Richest 20%



DHS 2010

Coverage levels are shown for the poorest 20% (red circles) and the richest 20% (orange circles). The longer the line between the two groups, the greater the inequality. These estimates may differ from other charts due to differences in data sources.

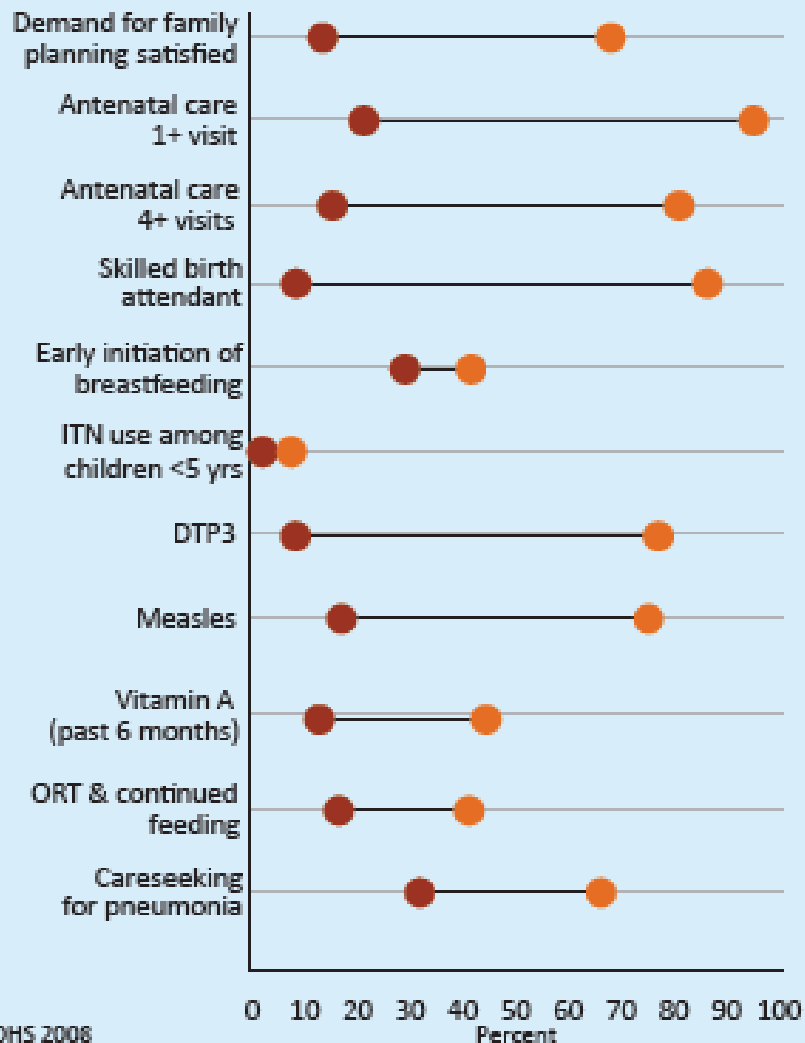
Equity

The narrow bars show Malawi's relatively **equitable coverage** found for many coverage indicators

EQUITY

Socioeconomic inequities in coverage

Household wealth quintile: ● Poorest 20% ● Richest 20%

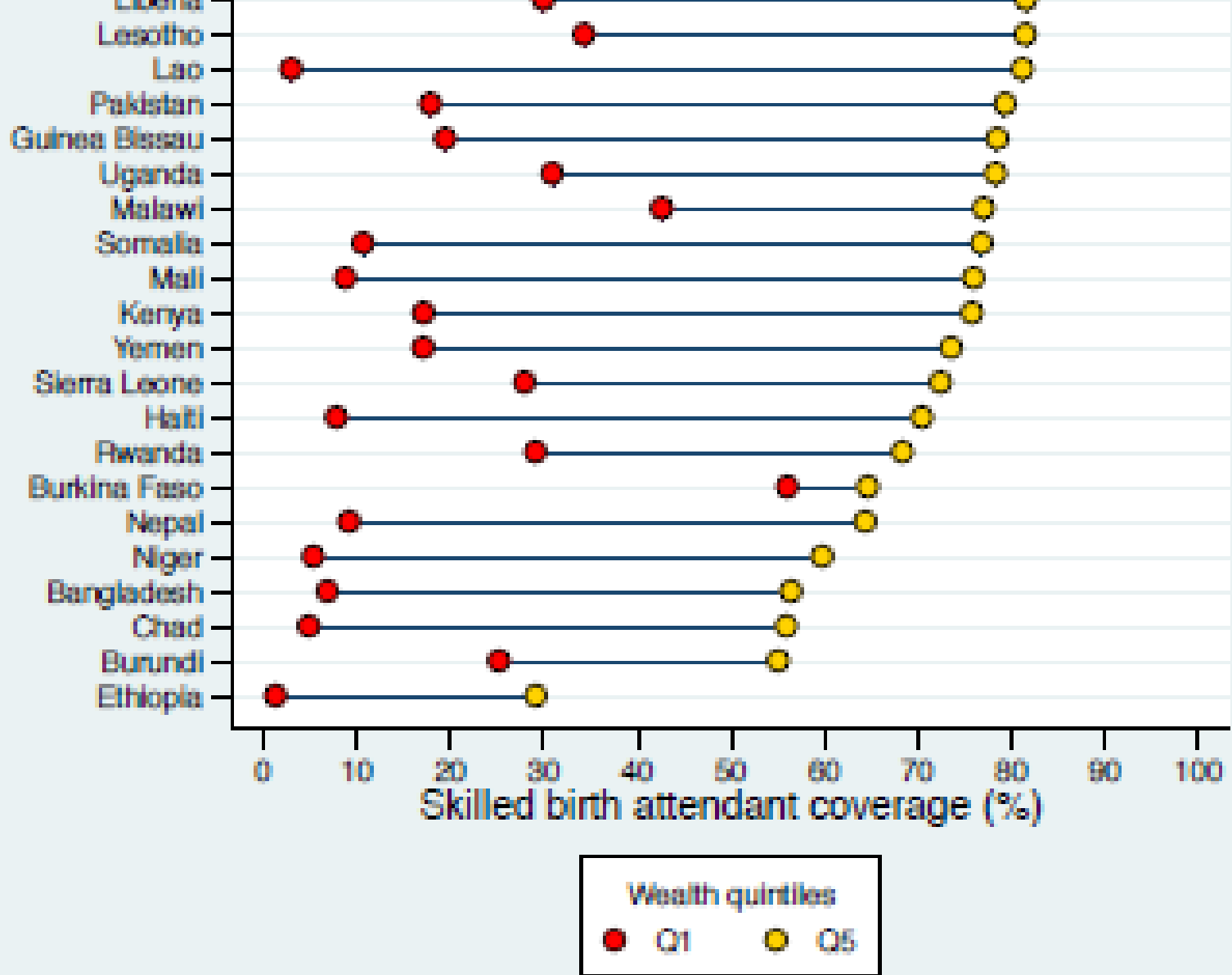


DHS 2008

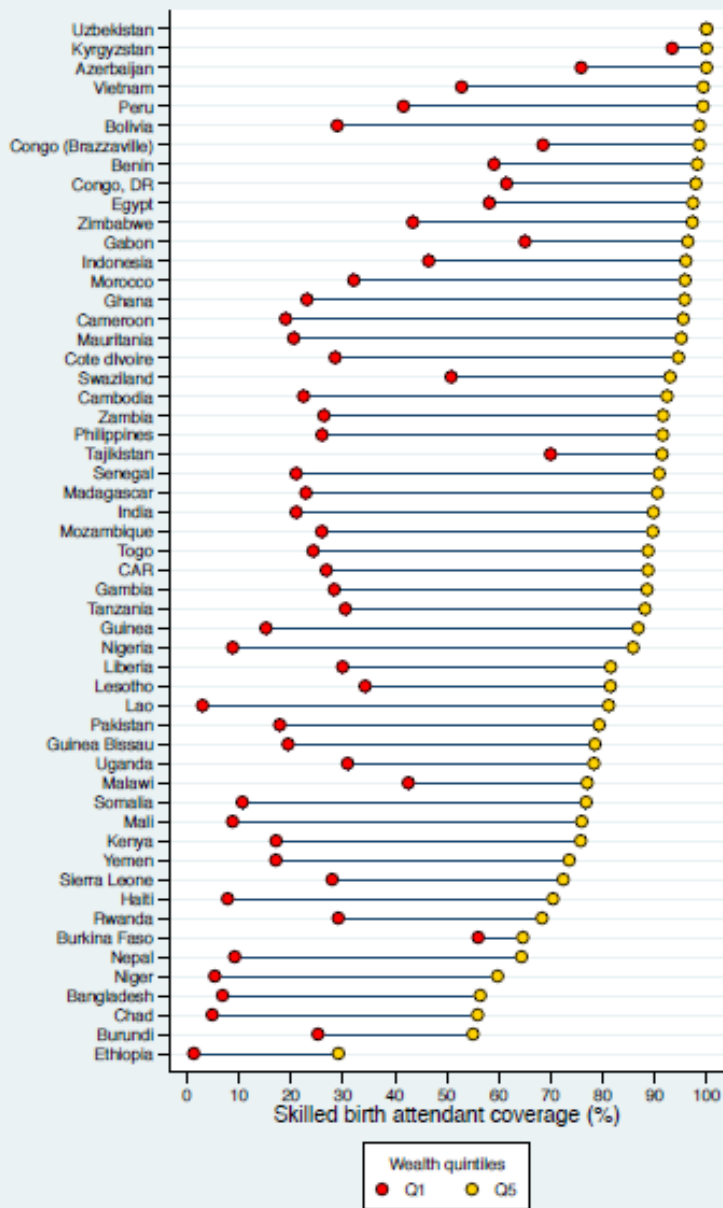
Equity

The narrow bars show Nigeria's highly **inequitable coverage** found for many coverage indicators

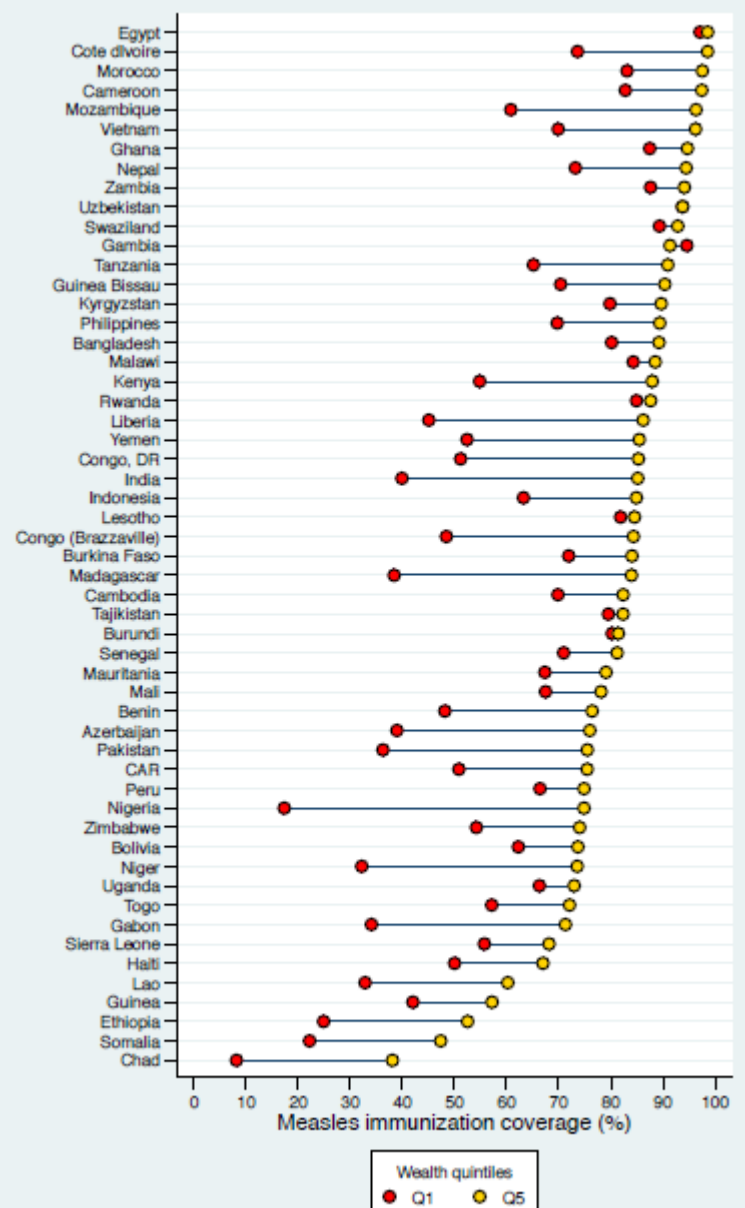
Coverage levels are shown for the poorest 20% (red circles) and the richest 20% (orange circles). The longer the line between the two groups, the greater the inequity. These estimates may differ from other charts due to differences in data sources.



SBA



SBA



Measles vaccine

Equity in coverage

- Coverage (almost) always higher for richer households
- But inequities are greatest for interventions that require a strong health system (e.g., skilled attendant at birth)

Which countries are making greater progress?

How changes in coverage affect equity in maternal and child health interventions in 35 Countdown to 2015 countries: an analysis of national surveys



Cesar G Victora, Aluisio J D Barros, Henrik Axelson, Zulfiqar A Bhutta, Mickey Chopra, Giovanni V A França, Kate Kerber, Betty Kirkwood, Holly Newby, Carine Ronsmans, J Ties Boerma

Summary

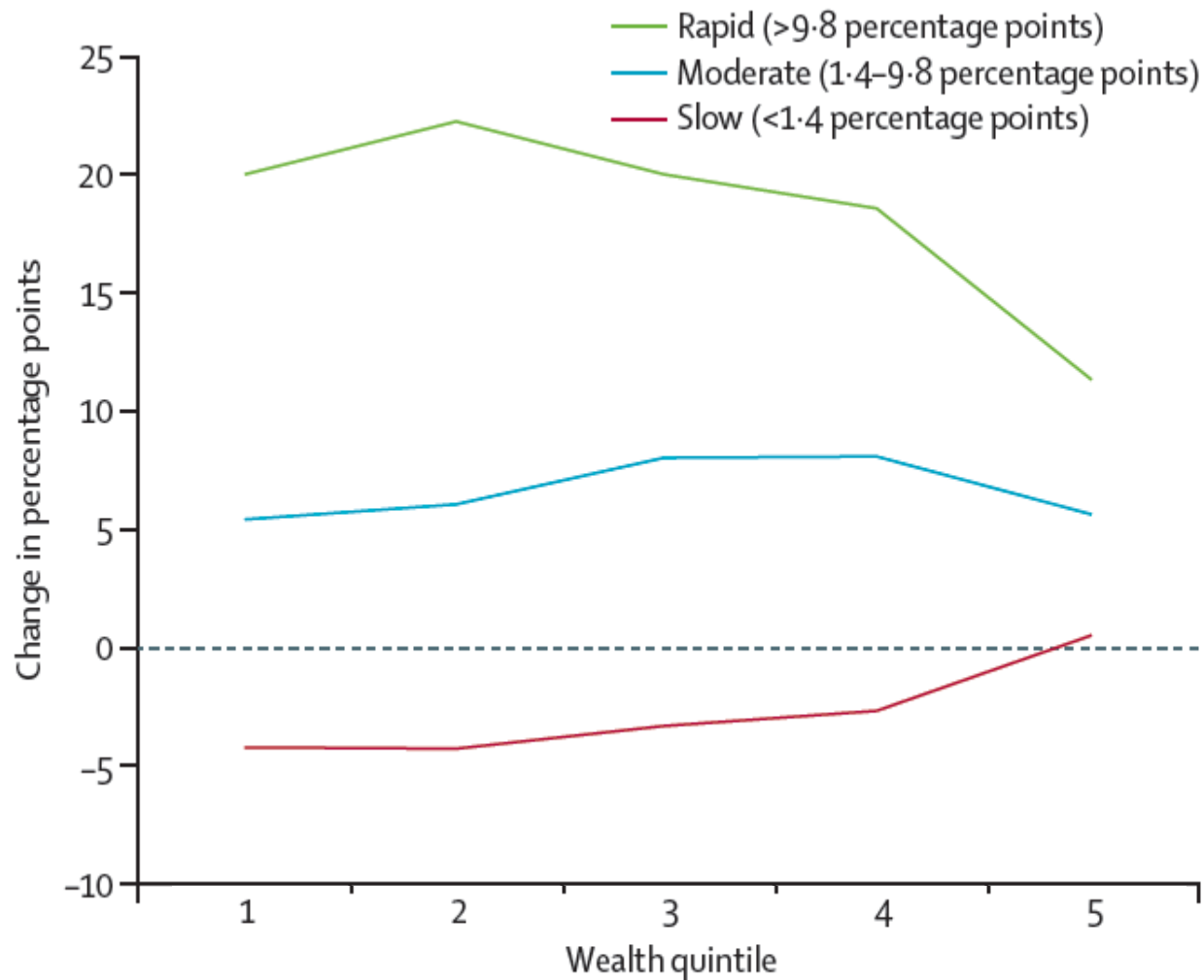
Background Achievement of global health goals will require assessment of progress not only nationally but also for population subgroups. We aimed to assess how the magnitude of socioeconomic inequalities in health changes in relation to different rates of national progress in coverage of interventions for the health of mothers and children.


Countdown to 2015
Maternal, Newborn & Child Survival

Lancet 2012; 380: 1149–56

SBA

Faster overall progress in countries where the poor made greater gains than the rich



Country profiles: web materials

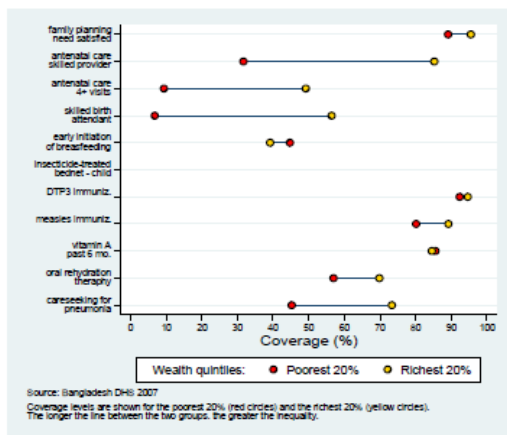


Figure 1 - Coverage levels in the poorest and richest quintiles for selected interventions along the continuum of care.

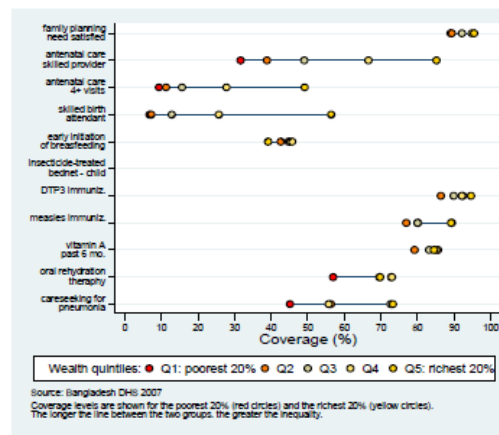


Figure 2 - Coverage levels in the five wealth quintiles for selected interventions along the continuum of care.

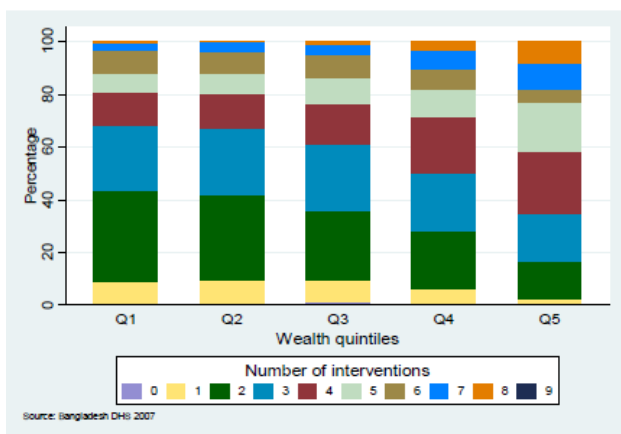


Figure 3 - Co-coverage of health interventions: percentage of children aged 1-4 years according to the number of key child-survival interventions received, by wealth quintile.

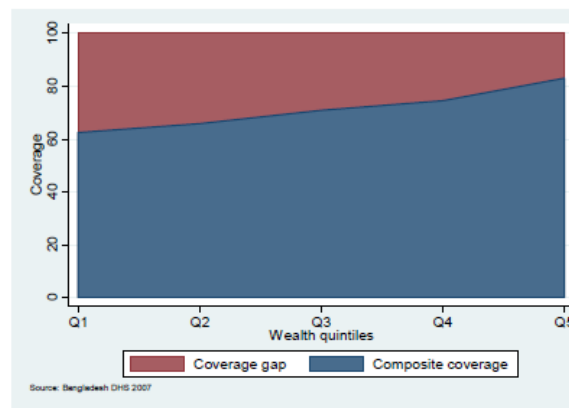


Figure 4 - Composite coverage of selected interventions and corresponding coverage gap (how much is needed to reach universal coverage), by wealth quintile.

Countdown is a powerful instrument for:

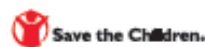
- highlighting successes
- identifying areas and population groups needing more attention
- translating data into action




Countdown to 2015
Maternal, Newborn & Child Survival



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Thank you



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