



Countdown to 2015  
Child Survival



# TRACKING PROGRESS IN CHILD SURVIVAL THE 2005 REPORT



THE LANCET



THE PARTNERSHIP  
For Maternal, Newborn & Child Health



BASICS



USAID  
FROM THE AMERICAN PEOPLE

DFID  
Department for  
International  
Development

**Tracking Progress in Child Survival: The 2005 Report**

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# TABLE OF CONTENTS

<b>Chapter 1:</b>	
<b>Tracking intervention coverage for child survival</b>	<b>9</b>
A brief history of the <i>Countdown</i> effort	9
A commitment to building on existing goals and monitoring efforts	12
<i>A World Fit for Children</i> goals	12
<i>The Millennium Development Goals</i>	12
A focus on effective interventions	14
Why focus on intervention coverage?	14
<i>What is coverage?</i>	14
<i>Why track coverage at global level in preference to other possible indicators?</i>	14
<i>How is coverage currently measured, and how often?</i>	15
<i>What are the limitations of focusing on coverage?</i>	15
Links to other monitoring efforts	16
Constraints	18
Overview of the report	18
Chapter 1 References	20

<b>Chapter 2:</b>	
<b>Tracking Indicators and Methods</b>	<b>21</b>
Selecting the 60 priority countries	21
Programmatic aims and associated coverage indicators	22
<i>Nutrition, including breastfeeding</i>	22
<i>Vaccination</i>	23
<i>Other prevention interventions</i>	24
<i>Newborn health</i>	25
<i>Case management of childhood illness</i>	27
Tracking key coverage determinants: Work in progress	28
<i>Policies and political commitment</i>	28
<i>Human resources</i>	29
<i>Financial flows</i>	29
Tracking improvements in equity	29
Data sources	30
<i>Sources of data for demographic and nutrition indicators</i>	30
<i>Epidemiological profiles</i>	30
<i>Sources of data for coverage indicators</i>	31
<i>Estimating uncertainty for the Countdown coverage indicators</i>	33
<i>Sources of information about policies</i>	33
<i>Sources of data for the assessment of equity</i>	33
Chapter 2 References	33

### **Chapter 3:**

#### **Preliminary Findings**

Nutrition, including breastfeeding	38
Vaccination	39
Other prevention interventions	40
Newborn health	41
Case management of childhood illness	42
Coverage equity	43
Some preliminary findings	44
Chapter 3 References	49

### **Chapter 4:**

#### **The 2005 Country Reports** 51

#### **Annexes** 113

Annex 1. List of indicators developed at the UNICEF/WHO Meeting on Child Survival Survey-based Indicators, New York, June 17-18, 2004	114
Annex 2. Global Monitoring of the major determinants of coverage for child survival interventions: Work in progress	115
Annex 3. Indicator List for Countdown 2005	120
Annex 4. Category Definitions	123

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# LIST OF ABBREVIATIONS

AARR	Average annual rate of reduction
ARV	Anti-retroviral treatment
CHERG	Child Health Epidemiology Reference Group
DHS	Demographic and Health Surveys
GAVI	Global Alliance for Vaccines Initiative
GFATM	Global Fund for AIDS, TB and Malaria
Hib	<i>Haemophilus influenzae</i> type B
ILO	International Labour Organization
IMCI	Integrated management of childhood illness
ISCO	International Standard Classification of Occupations
ITNs	Insecticide-treated nets
LSHTM	London School of Hygiene and Tropical Medicine
JMP WHO/ UNICEF	Joint Monitoring Programme on Water Supply and Sanitation
MDGs	Millennium Development Goals
MERG	Roll Back Malaria Monitoring and Evaluation Reference Group
MICS	Multiple Indicator Cluster Surveys
NMR	Neonatal Mortality Rate
OECD	Organisation for Economic Co-operation and Development
PMNCH	Partnership for Maternal, Newborn and Child Health.
SWAps	Sector-Wide Approaches
U5MR	Under-five mortality rate
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
WFFC	World Fit for Children
WHO	World Health Organization



# TRACKING INTERVENTION COVERAGE FOR CHILD SURVIVAL



## A brief history of the *Countdown effort*<sup>1</sup>

Ten years from now, in 2015, the governments of the world will meet to assess if we have achieved the Millennium Development Goals (MDGs), the most widely ratified set of development goals ever, signed onto by every country in the world (<http://www.un.org/millenniumgoals/>). MDG-4 commits the global community to reducing under-five child deaths by two-thirds from a baseline in 1990. MDG-5 has as its target reducing maternal mortality by three-quarters in the same time period.

Almost three years ago, in 2003, the Bellagio *Lancet* Child Survival Series helped to raise global awareness that each year over 10 million children under five die in the world, mainly from preventable conditions that rarely kill children in rich countries.<sup>2-6</sup> This year, a second *Lancet* series focused on a previously neglected subset of child deaths – the almost 40% of all under-five deaths which occur among newborn babies.<sup>7-10</sup> Together, these two series provided the necessary evidence to revitalise efforts to reduce child and newborn deaths and to achieve MDG-4. Both series demonstrated that the majority of child deaths could be prevented with simple, low-cost interventions feasible now, yet not reaching poor children. Massive increases are required in coverage of essential interventions to reach MDG-4.

What has happened in the intervening years since the Bellagio series was published in 2003? Has there been a renewed interest in child and newborn survival? Has this interest led to meaningful change in efforts to improve coverage? Have there been increases in the financial commitments to child and newborn survival?

These three years have seen real progress in advocacy for child and newborn survival. The leaders of both WHO and UNICEF have made public commitments to reducing child mortality.<sup>11</sup> A global child survival partnership was formed, and in 2005 joined forces with related efforts in maternal and newborn health to form an expanded group called the Partnership for Maternal, Newborn and Child Health (PMNCH). PMNCH will focus on high-level