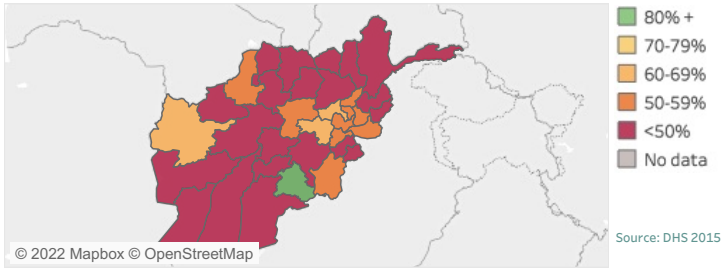


Composite Coverage Index CCI 48%



CONTINUUM OF CARE COVERAGE & EQUITY

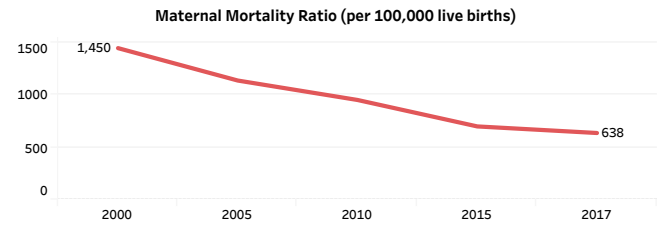
Those in need receiving key interventions, %		20% poorest	20% richest
Pre-pregnancy	Demand for family planning satisfied (DHS 2016)	42%	17%
	Antenatal care (4+ visits) (AHS 2018)	21%	25%
Pregnancy	Neonatal tetanus protection (WHO GHO)	68%	1%
	Treatment of pregnant women living with HIV with ART (Global AIDS Monitoring 2021)	10%	-
	Skilled birth attendant (AHS 2018)	59%	61%
Postnatal	Early initiation of breastfeeding (AHS 2018)	63%	10%
	Postnatal care for mothers (AHS 2018)	37%	26%
	Postnatal care for newborns (AHS 2018)	19%	7%
Infancy	Continued breastfeeding (year 1) (DHS 2015)	78%	12%
	Exclusive breastfeeding (AHS 2018)	58%	1%
	Immunization - DTP3 (WUENIC 2021)	70%	21%
	Immunization - Measles (WUENIC 2021)	66%	13%
	Immunization - PCV3 (WUENIC 2021)	68%	-
	Immunization - Rotavirus (WUENIC 2021)	62%	-
Childhood	Careseeking for symptoms of ARI (AHS 2018)	68%	17%
	Diarrhoea treatment: ORS (AHS 2018)	40%	3%
	Vitamin A supplementation, full coverage (UNICEF Global Database 2021)	0%	-
Environment	Population using at least basic drinking water services (WHO/UNICEF JMP 2020)	75%	-
	Population using at least basic sanitation services (WHO/UNICEF JMP 2020)	50%	-

Equity Source: DHS 2015

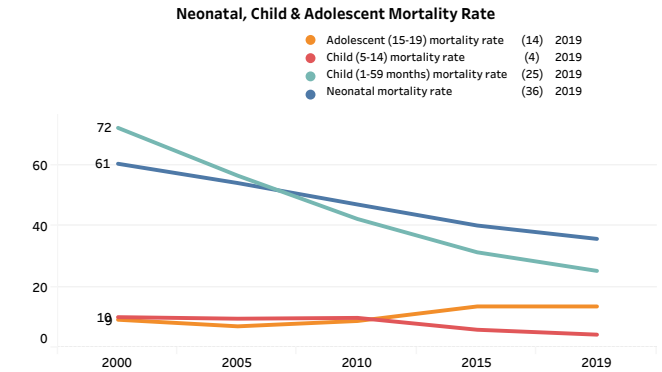
DEMOGRAPHICS

Category	Indicator	Value	Year
POPULATION	Total population (000)	38,928	2020
	Total under 5 population (000)	5,673	2020
	Total adolescent population (10-19) (000)	9,822	2020
BIRTH	Urban population (%)	26	2020
	Total fertility rate (births per woman)	4.2	2020
	Adolescent (15-19 years) birth rate (births per 1000 girls)	62	2017
DEATH	Total Births (000)	1,216	2020
	Birth registration (%)	42	2015
	Stillbirth rate (per 1000 total births)	28	2019
	Neonatal deaths, as % of all <5	60	2019
	Adolescent (10-19) mortality rate (per 1000 children age 10)	15	2019
CONTEXT	Lifetime risk of maternal deaths (1 in N)	33	2017
	Total maternal deaths	7,700	2017
	Total under 5 deaths	72,186	2019
	Under 5 mortality rate (per 1000 live births)	60	2019
	Early childhood development index (%)	-	-
Heidelberg Conflict Barometer (intensity 1-5)	5	2020	
Secondary completion rate, education (upper, female) (%)	14	2019	

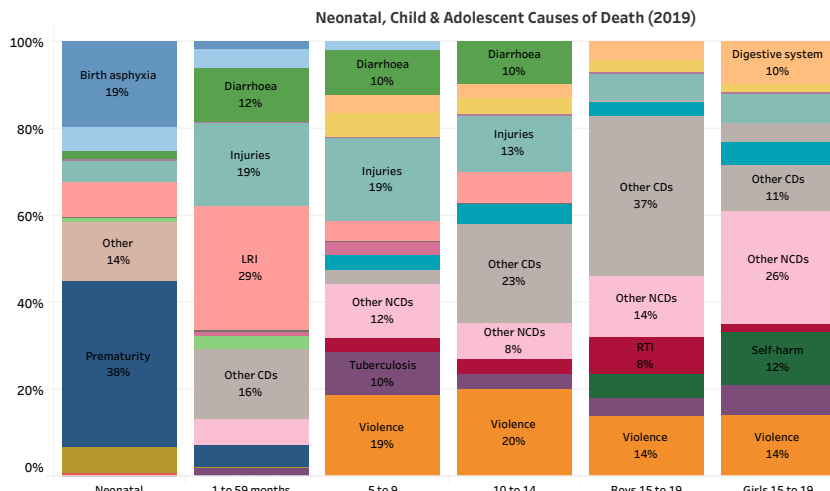
MORTALITY & CAUSES OF DEATH



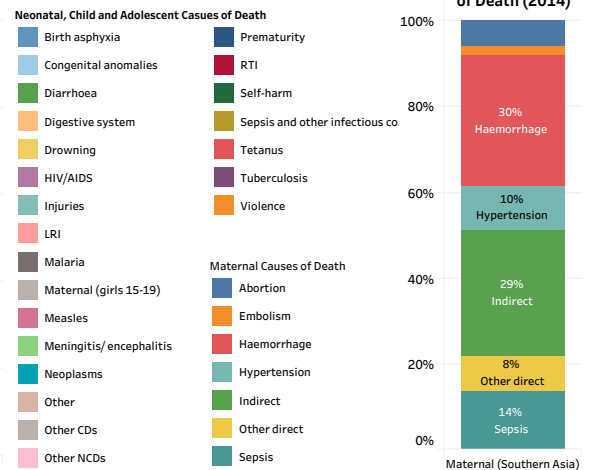
Source: UN MMEIG 2019



Source: UN IGME 2020



Note: Labels not shown where percentage of deaths is < 8% or when the name is long. Hovering over bars shows the name and % value. Enlarged charts can be found on page 4.  
Source for neonatal and children 1 to 59 months: Perin et al., 2021. Lancet Child and Adolescent Health  
Source for ages 5-19: Liu, Li et al., 2021. Lancet Global Health (in press)



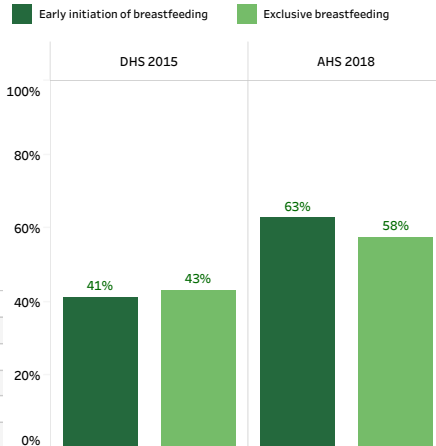
Source: Say, L et al. Global causes of maternal death: a WHO systematic analysis. Lancet Global Health. 2014

**NUTRITION**

**Essential Nutrition Indicators**

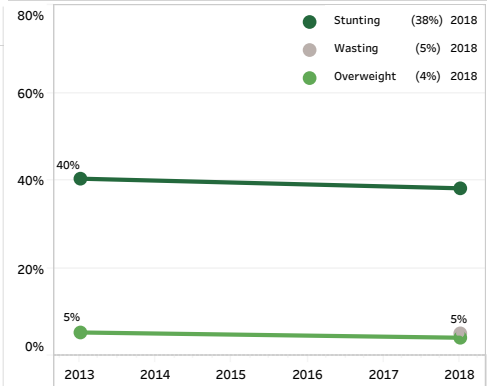
Prevalence of anemia in women aged 15-49	43%	2019
Women of reproductive age, short stature	-	
Iron and folic acid supplements for pregnant women	7%	2015
Baby weighed at birth	14%	2015
Low birth weight prevalence	-	
Minimum dietary diversity (age 6-23 months)	22%	2015
Women (20+) with: BMI > 30 (obese)	8%	2016
Women (20+) with: BMI 25-30 (overweight)	19%	2016
Women (20+) with: BMI < 18.5 (underweight)	16%	2016
Child BMI (age 5-9) Total	11%	2016
Overweight and obese	44%	2016
Underweight	44%	2016
Adolescent BMI (age 10-19) Boys	8%	2016
Overweight and obese	8%	2016
Underweight	53%	2016
Girls	9%	2016
Overweight and obese	9%	2016
Underweight	36%	2016

**BREASTFEEDING PRACTICES**



**CHILD NUTRITIONAL STATUS**

**Percentage children under 5 with moderate:**

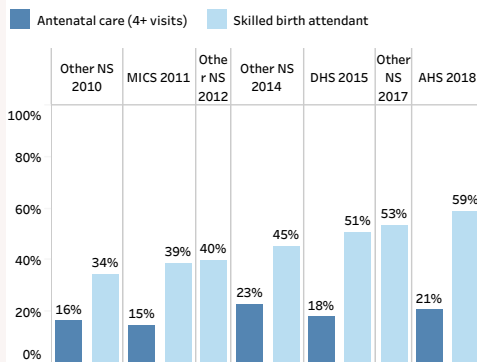


Source: UNICEF/WHO/WB Joint Child Malnutrition Estimates 2021

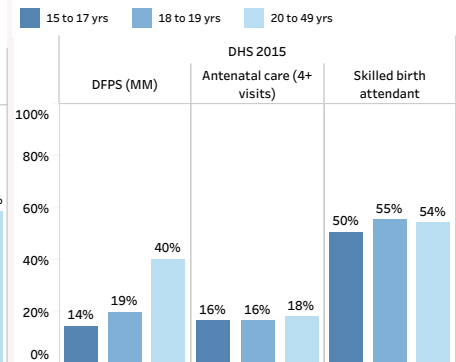
**MATERNAL & NEWBORN HEALTH**

**PREGNANCY & DELIVERY**

**Percentage women aged 15-49 years with:**



**ADOLESCENT REPRODUCTIVE & MATERNAL HEALTH**



**ADDITIONAL MATERNAL & NEWBORN HEALTH INDICATORS**

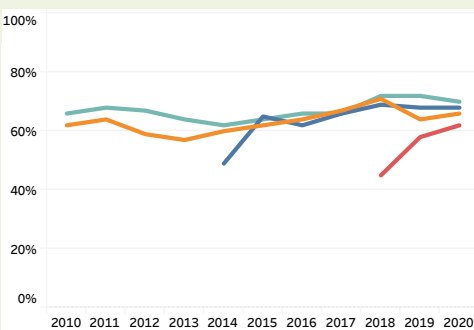
First antenatal care visit within the first trimester	30%	2015		
Treatment of pregnant women living with HIV with ART*	10%	2020		
Intermittent preventive treatment for malaria during pregnancy 3+	-			
Institutional deliveries	Total: 48%	Public: 43%	Private: 5%	2015
Caesarean section rate	Total: 7%	Urban: 15%	Rural: 4%	2018

\*Source: Global AIDS Monitoring and UNAIDS 2021 estimates

**CHILD & ADOLESCENT HEALTH**

**IMMUNIZATION**

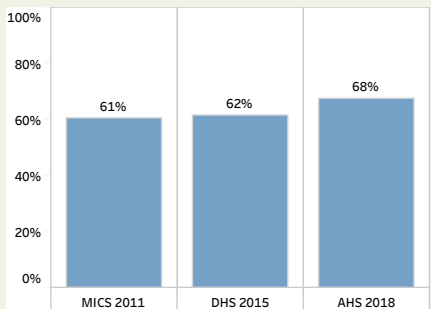
**Percentage of children immunized:**



Source: WHO/UNICEF Estimates of National Immunization Coverage, July 2021

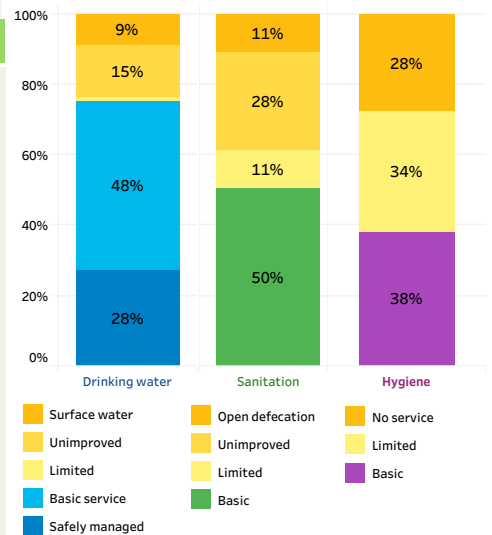
**CARESEEKING FOR ARI SYMPTOMS**

**Percentage of children under 5 years with symptoms of acute respiratory infection taken to appropriate health provider:**



**ENVIRONMENT**

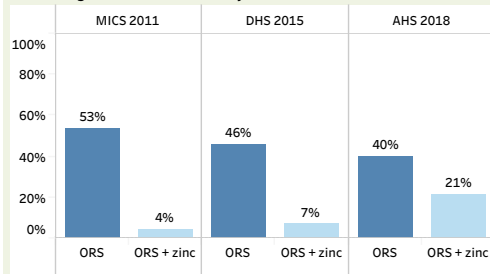
**Drinking water, sanitation and hygiene coverage (%), 2020**



Note: Numbers may not add to 100% due to rounding  
Source: WHO/UNICEF Joint Monitoring Programme 2021

**DIARRHOEA TREATMENT**

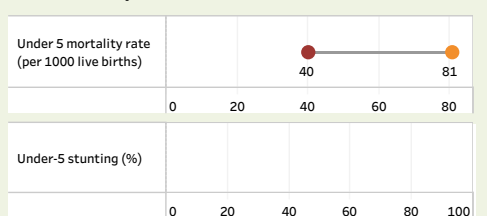
**Percentage of children under 5 years with diarrhoea treated with:**



**ADDITIONAL CHILD HEALTH INDICATORS**

Population sleeping under ITN or sleeping in a house sprayed by IRS	3%	2015
Children under-5 sleeping under ITNs	5%	2015
Careseeking for fever	62%	2018
Malaria diagnostics in children under-five with fever	8%	2015
Number of children not vaccinated with DTP1	255000	2020

**ADDITIONAL EQUITY INDICATORS**



## POLICIES, SYSTEMS & FINANCING

### LEGISLATIVE POLICIES

Legal age limit exists for adolescents to access family planning without spousal or parental consent		
Emergency Contraception	Married Adolescents	No
	Unmarried Adolescents	No
Contraceptive Services	Married Adolescents	No
	Unmarried Adolescents	No

Source: WHO Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health Policy Survey 2018-2019

Maternity protection (Convention 183)	No
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Source: International Labour Organization, NORMLEX information system on International Labour Standards 2021

### GOVERNANCE

#### Costed national implementation plan(s) for reproductive, maternal, newborn, and child health available

Combined plan	Yes
Plan with at least one component	Yes

#### Maternal Death Review

A national policy to notify all maternal deaths	Yes
A national maternal death review committee	No
A subnational maternal death review committee	Yes
Both national and subnational maternal death review committees	Yes
Frequency of the national maternal death review committee meetings	Not applicable

Civil society involvement in national maternal, newborn and child health programs	Yes
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National coordinating body that looks at RMNCAH or its components	Yes
---	-----

National human rights institution mandated/authorized to consider matters related to RMNCAH	Yes
---	-----

Source: WHO Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health Policy Survey 2018-2019

### SERVICE DELIVERY

#### Midwives authorized for specific tasks

Manual removal of placenta	Yes
Administration of anticonvulsants	Yes
Administration of oxytocics	Yes
Assisted instrumental delivery by vacuum extractor	Yes
Manual vacuum aspiration for retained products	Yes
Newborn resuscitation with mask	Yes
Parenteral administration of antibiotics	Yes

Source: The State of the World's Midwifery (SoWMy) 2021

Density of doctors (per 10,000 population)	2.78	2016
--	------	------

Density of nurses and midwives (per 10,000 population)	4.46	2018
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Proportion of health facilities with a core set of relevant essential medicines available and affordable on a sustainable basis	-
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Source: The 2021 update, Global Health Workforce Statistics, WHO

#### Legal status of abortion

To save a woman's life	Yes
To preserve a woman's physical health	No
To preserve a woman's mental health	No
To preserve a woman's health	No
For economic or social reasons	No
On request	No
In cases of rape	No
In cases of incest	No
In cases of foetal impairment	No
In cases of intellectual or cognitive disability of the woman	No

Source: WHO Global Abortion Policies Database, as of July 2021

International code of marketing of breastmilk substitutes	Alignment with Code			Substantially aligned with the Code
	No legal measures	Some provisions of the Code included	Moderately aligned with the Code	

Source: World Health Organization, UNICEF, IBFAN. Marketing of breast-milk substitutes: National Implementation of the international code. Status Report 2020. Geneva: World Health Organization; 2020

	Maize flour	Rice	Wheat flour
Legislation on food fortification (wheat, rice, maize)	No or unknown	No or unknown	Mandatory

Source: Food Fortification Initiative. Global Progress. Accessed July 2021

### FINANCING

Per Capita Total Expenditure on Health (US \$)	-
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Government Expenditure on Health per capita (US \$)	-
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Out of pocket expenditure as % of total expenditure on health	-
---	---

General government expenditure on health as % of total government expenditure	-
---	---

Source: WHO Global Health Expenditure Database

ODA+ (US \$)		ODA+ (US \$ millions)	
ODA+ flows to RMNCH per capita	\$9 2019	Total ODA+ flows to RMNCH	348.230
ODA+ to CH per child US	\$11 2019	ODA+ to CH	159.941
ODA+ to MNH per birth	\$4 2019	ODA+ to RMNCH other	82.162
ODA+ to RH per woman of reproductive age	\$28 2019	ODA+ to MNH	67.478
		ODA+ to RH	38.649

Source: Organisation for Economic Co-operation and Development's Development Assistance Committee, London School of Health and Tropical Medicine, July 2021

### ACRONYMS

#### MATERNAL, NEWBORN, CHILD & ADOLESCENT HEALTH INDICATORS

ART = Antiretroviral therapy  
 BMI = Body mass index  
 CCI = Composite coverage index  
 CH = Child health  
 DFPS(MM) = Demand for family planning satisfied with modern methods  
 DTP1 = 1st dose of diphtheria, tetanus toxoid, and pertussis vaccine  
 DTP3 = 3rd dose of diphtheria, tetanus toxoid, and pertussis vaccine  
 HPV = Human papillomavirus  
 ITNs = Insecticide-treated nets  
 MNH = Maternal and newborn health  
 ODA+ = Official development assistance and development finance  
 ORS = Oral rehydration solution  
 PCV3 = 3rd dose of pneumococcal conjugate vaccine  
 RH = Reproductive health  
 RMNCH = Reproductive, maternal, newborn and child health

#### CAUSES OF DEATH

LRI = Lower respiratory infection  
 RTI = Road traffic injuries

#### ORGANIZATIONS, WORKING GROUPS & DATA SOURCES

DHS = Demographic and Health Survey  
 IGME = United Nations Inter-Agency Group for Child Mortality Estimation  
 MICS = Multiple Indicator Cluster Survey  
 MMEIG = UN Maternal Mortality Estimation Interagency Group  
 NS = National Survey  
 UNICEF = United Nations International Children's Fund  
 WB = World Bank  
 WHO = World Health Organization

### ADDITIONAL INFORMATION AND SDG TARGETS ON MATERN..

The map includes the CCI by region. The CCI summarizes coverage for MNCH using a single number. It is calculated as the weighted mean of 8 interventions: demand for family planning satisfied with modern methods, antenatal care (4+ visits), skilled birth attendant, careseeking for acute respiratory infections, ORS, BCG, DTP3 and measles.

- ODA+ refers to the official development assistance estimates generated by LSHTM using the Muskoka 2 method. The methodological approach is explained in detail in the annexes.
- SDG 3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births
- SDG 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live birth and under-5 mortality to at least as low as 25 per 1,000 live births.

### ACKNOWLEDGEMENTS

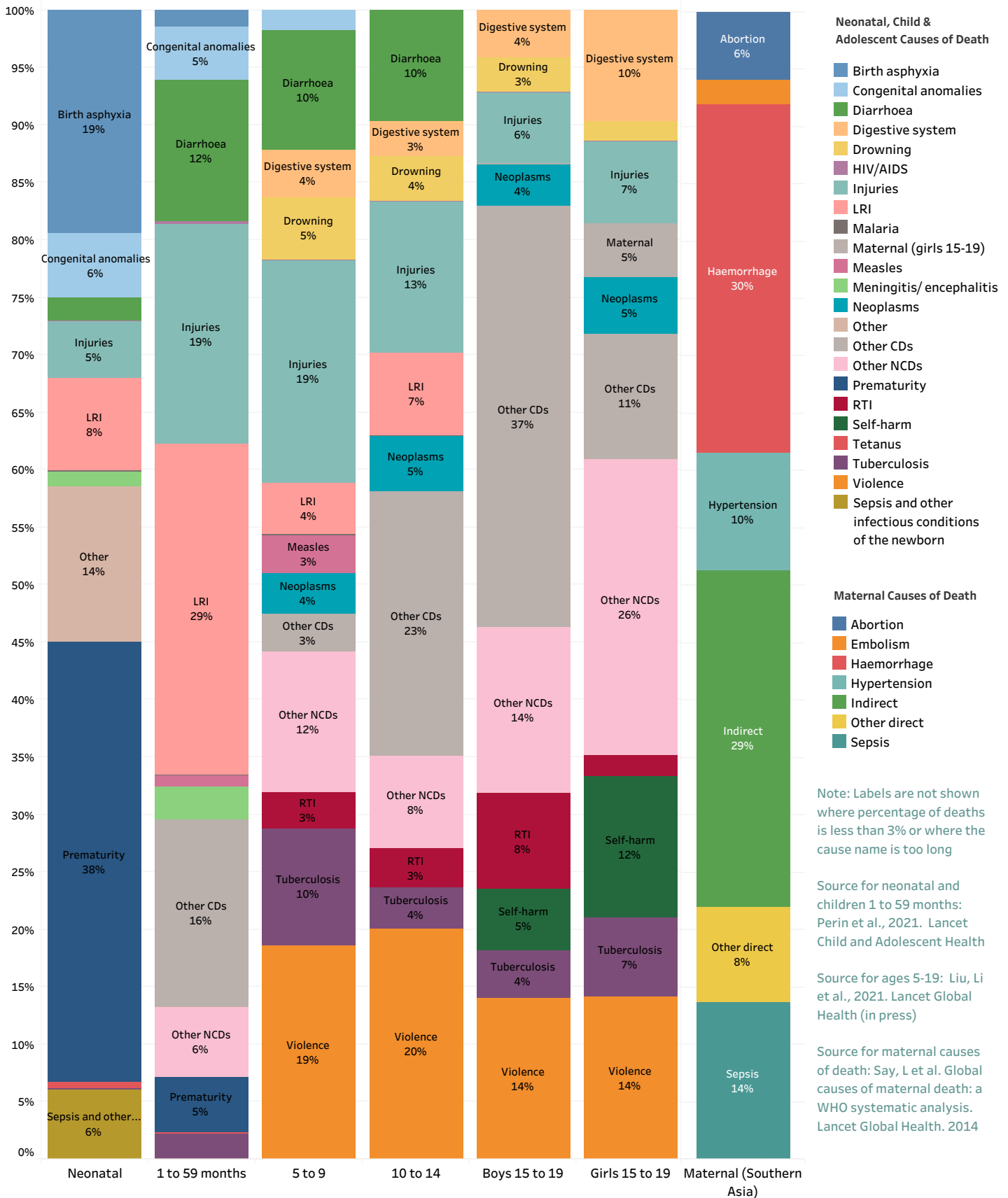
The country profile was prepared by the Countdown profile team in consultation with the Technical Working Group of Countdown to 2030. The Countdown profile team includes UNICEF, University of North Carolina-Chapel Hill, and North Carolina State University.

More information about indicator sources, definitions and other details can be found at: <https://www.countdown2030.org/2021-annexes>



Neonatal, Child & Adolescent Causes of Death (2019)

Maternal Causes of Death (2014)



Note: Labels are not shown where percentage of deaths is less than 3% or where the cause name is too long

Source for neonatal and children 1 to 59 months: Perin et al., 2021. Lancet Child and Adolescent Health

Source for ages 5-19: Liu, Li et al., 2021. Lancet Global Health (in press)

Source for maternal causes of death: Say, L et al. Global causes of maternal death: a WHO systematic analysis. Lancet Global Health. 2014