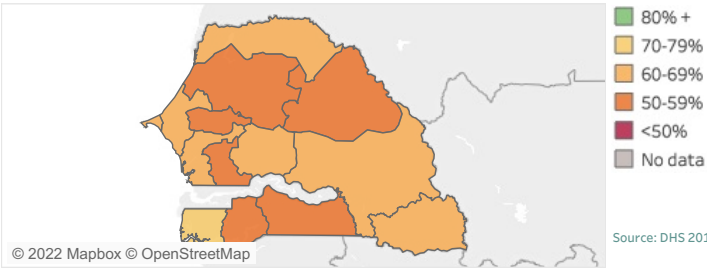


Composite Coverage Index CCI 61%



CONTINUUM OF CARE COVERAGE & EQUITY

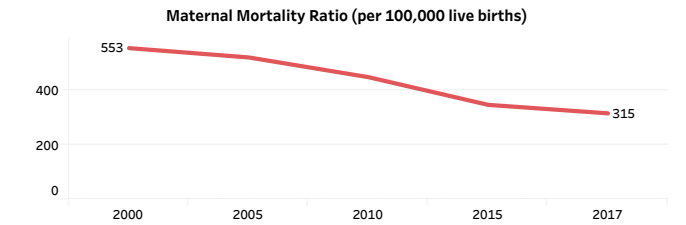
Those in need receiving key interventions, %		20% poorest	20% richest
Pre-pregnancy	Demand for family planning satisfied	DHS 2019	53%
	Antenatal care (4+ visits)	DHS 2019	56%
Pregnancy	Neonatal tetanus protection	WHO GHO	95%
	Treatment of pregnant women living with HIV with ART	Global AIDS Monitoring 2021	74%
	Skilled birth attendant	DHS 2019	75%
Postnatal	Early initiation of breastfeeding	DHS 2019	32%
	Postnatal care for mothers	DHS 2019	80%
	Postnatal care for newborns	DHS 2018	84%
Infancy	Continued breastfeeding (year 1)	DHS 2019	98%
	Exclusive breastfeeding	DHS 2019	41%
	Immunization - DTP3	WUENIC 2021	91%
	Immunization - Measles	WUENIC 2021	88%
	Immunization - PCV3	WUENIC 2021	92%
	Immunization - Rotavirus	WUENIC 2021	92%
Childhood	Careseeking for symptoms of ARI	DHS 2019	48%
	Diarrhoea treatment: ORS	DHS 2019	26%
	Vitamin A supplementation, full coverage	UNICEF Global Database 2021	37%
Environment	Population using at least basic drinking water services	WHO/UNICEF JMP 2020	85%
	Population using at least basic sanitation services	WHO/UNICEF JMP 2020	57%

Equity Source: DHS 2019

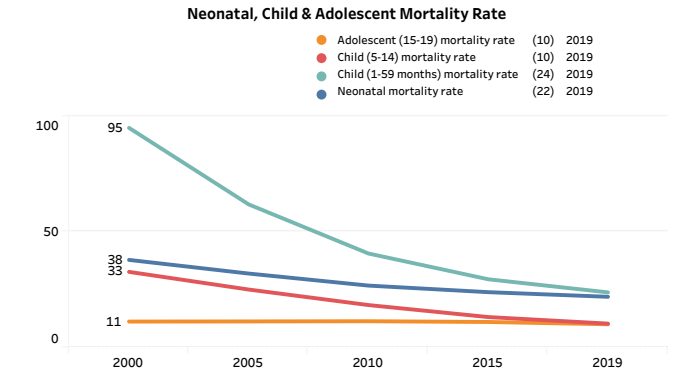
DEMOGRAPHICS

Category	Indicator	Value	Year
POPULATION	Total population (000)	16,744	2020
	Total under 5 population (000)	2,615	2020
	Total adolescent population (10-19) (000)	3,864	2020
BIRTH	Urban population (%)	48	2020
	Total fertility rate (births per woman)	4.5	2020
	Adolescent (15-19 years) birth rate (births per 1000 girls)	68	2017
DEATH	Total Births (000)	560	2020
	Birth registration (%)	78	2019
	Stillbirth rate (per 1000 total births)	20	2019
	Neonatal deaths, as % of all <5	49	2019
	Adolescent (10-19) mortality rate (per 1000 children age 10)	15	2019
CONTEXT	Lifetime risk of maternal deaths (1 in N)	65	2017
	Total maternal deaths	1,700	2017
	Total under 5 deaths	24,651	2019
	Under 5 mortality rate (per 1000 live births)	45	2019
	Early childhood development index (%)	67	2019
Heidelberg Conflict Barometer (intensity 1-5)	2	2020	
Secondary completion rate, education (upper, female) (%)	10	2019	

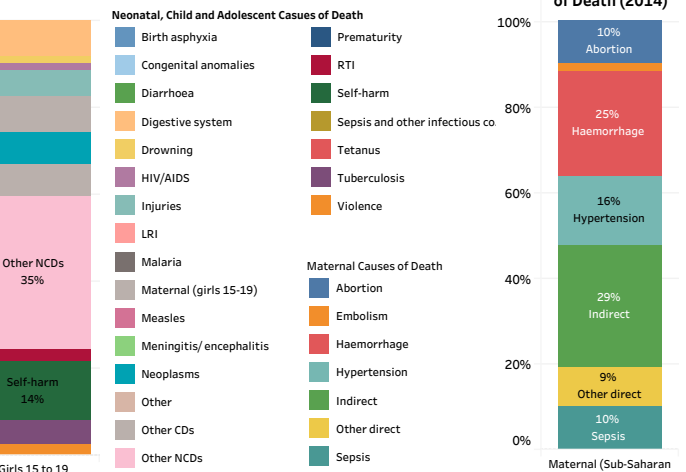
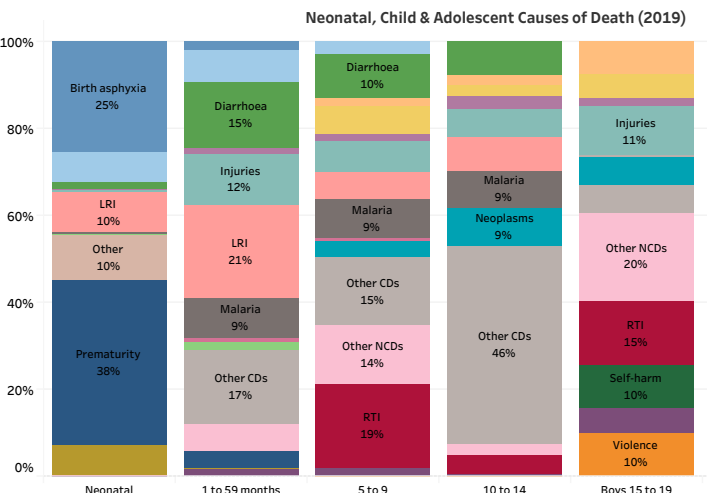
MORTALITY & CAUSES OF DEATH



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

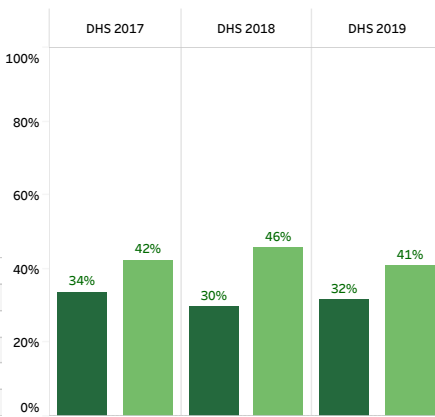
NUTRITION

Essential Nutrition Indicators

Prevalence of anemia in women aged 15-49	53%	2019
Women of reproductive age, short stature	0%	2010
Iron and folic acid supplements for pregnant women	65%	2019
Baby weighed at birth	53%	2016
Low birth weight prevalence	18%	2015
Minimum dietary diversity (age 6-23 months)	19%	2019
Women (20+) with: BMI > 30 (obese)	13%	2016
Women (20+) with: BMI 25-30 (overweight)	24%	2016
Women (20+) with: BMI < 18.5 (underweight)	10%	2016
Child BMI (age 5-9) Total	10%	2016
Overweight and obese	29%	2016
Underweight	29%	2016
Adolescent BMI (age 10-19) Boys	5%	2016
Overweight and obese	5%	2016
Underweight	37%	2016
Girls	13%	2016
Overweight and obese	13%	2016
Underweight	22%	2016

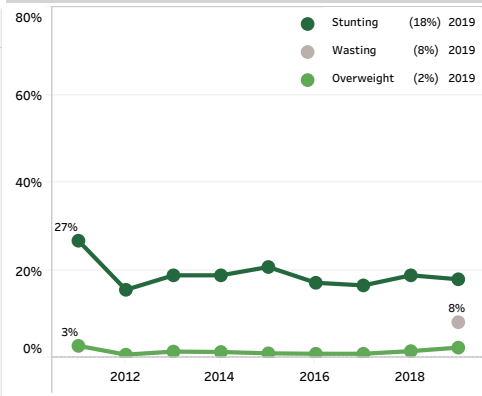
BREASTFEEDING PRACTICES

■ Early initiation of breastfeeding ■ Exclusive breastfeeding



CHILD NUTRITIONAL STATUS

Percentage children under 5 with moderate:

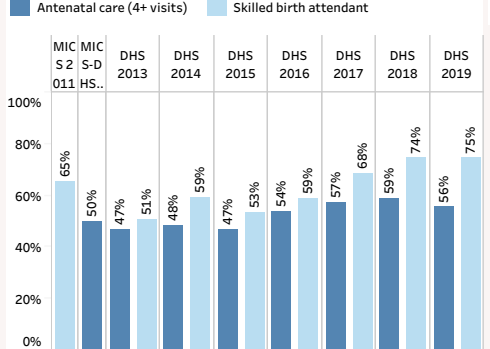


Source: UNICEF/WHO/WB Joint Child Malnutrition Estimates 2021

MATERNAL & NEWBORN HEALTH

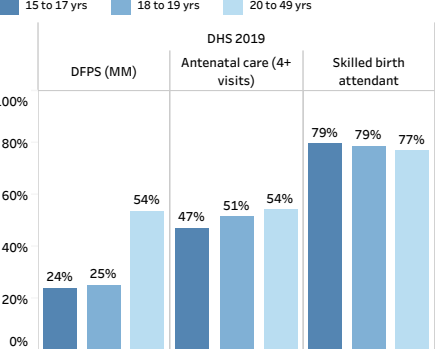
PREGNANCY & DELIVERY

Percentage women aged 15-49 years with:



ADOLESCENT REPRODUCTIVE & MATERNAL HEALTH

■ 15 to 17 yrs ■ 18 to 19 yrs ■ 20 to 49 yrs



ADDITIONAL MATERNAL & NEWBORN HEALTH INDICATORS

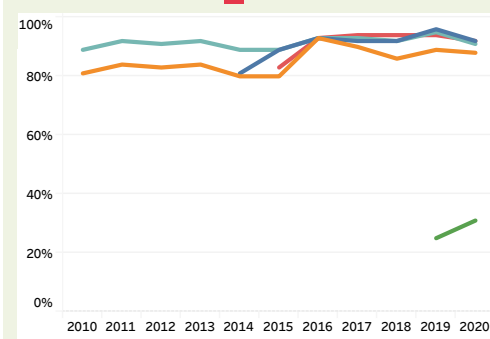
First antenatal care visit within the first trimester	60%	2019		
Treatment of pregnant women living with HIV with ART*	74%	2020		
Intermittent preventive treatment for malaria during pregnancy 3+	20%	2019		
Institutional deliveries	Total: 80%	Public: 77%	Private: 4%	2019
Caesarean section rate	Total: 5%	Urban: 8%	Rural: 3%	2018

*Source: Global AIDS Monitoring and UNAIDS 2021 estimates

CHILD & ADOLESCENT HEALTH

IMMUNIZATION

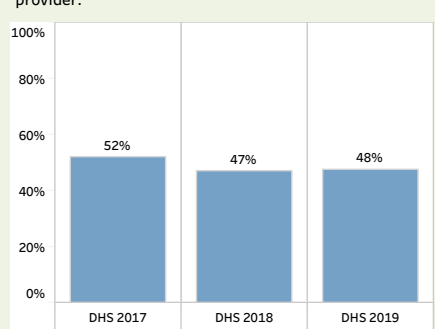
Percentage of children immunized:



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

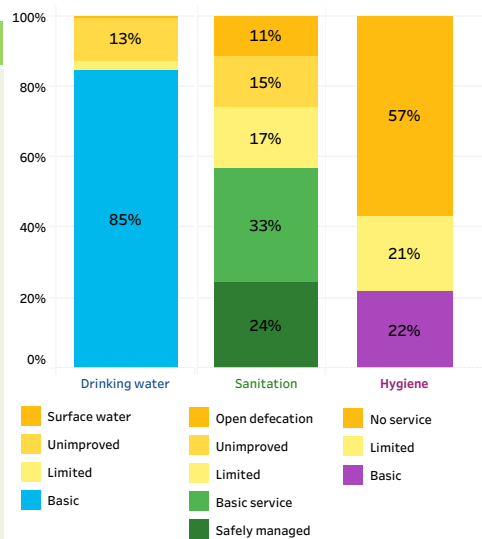
CARESEEKING FOR ARI SYMPTOMS

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



ENVIRONMENT

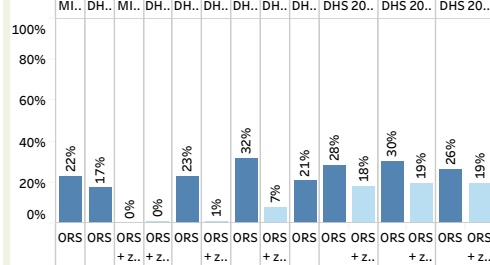
Drinking water, sanitation and hygiene coverage (%), 2020



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

DIARRHOEA TREATMENT

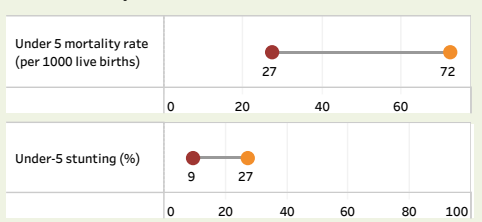
Percentage of children under 5 years with diarrhoea treated with:



ADDITIONAL CHILD HEALTH INDICATORS

Population sleeping under ITN or sleeping in a house sprayed by IRS	57%	2019
Children under-5 sleeping under ITNs	65%	2019
Careseeking for fever	50%	2019
Malaria diagnostics in children under-five with fever	14%	2018
Number of children not vaccinated with DTP1	38000	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)	Yes
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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	Yes
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	Semi-annually

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
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National human rights institution mandated/authorized to consider matters related to RMNCAH	Yes
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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)	0.88	2019
--	------	------

Density of nurses and midwives (per 10,000 population)	5.4	2019
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Proportion of health facilities with a core set of relevant essential medicines available and affordable on a sustainable basis	8%	2016
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Source: The 2021 update, Global Health Workforce Statistics, WHO

Legal status of abortion

To save a woman's life	No
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	No legal measures	Some provisions of the Code included	Moderately aligned with the Code	Substantially aligned with the Code
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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 \$)	\$59	2018
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Government Expenditure on Health per capita (US \$)	\$14	2018
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Out of pocket expenditure as % of total expenditure on health	56%	2018
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General government expenditure on health as % of total government expenditure	4%	2018
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Source: WHO Global Health Expenditure Database

ODA+ (US \$)		ODA+ (US \$ millions)	
ODA+ flows to RMNCH per capita	\$10 2019	Total ODA+ flows to RMNCH	163.615
ODA+ to CH per child US	\$10 2019	ODA+ to CH	55.281
ODA+ to MNH per birth	\$9 2019	ODA+ to RMNCH other	45.062
ODA+ to RH per woman of reproductive age	\$21 2019	ODA+ to MNH	28.243
		ODA+ to RH	35.030

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)

