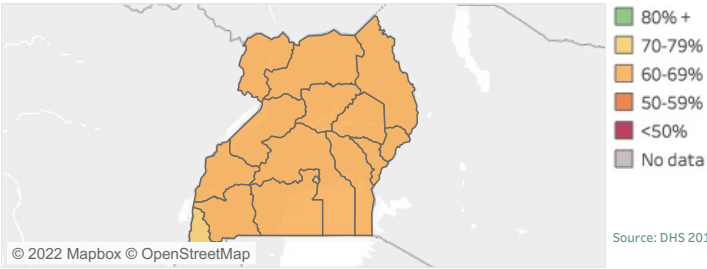


**Composite Coverage Index CCI 65%**



**CONTINUUM OF CARE COVERAGE & EQUITY**

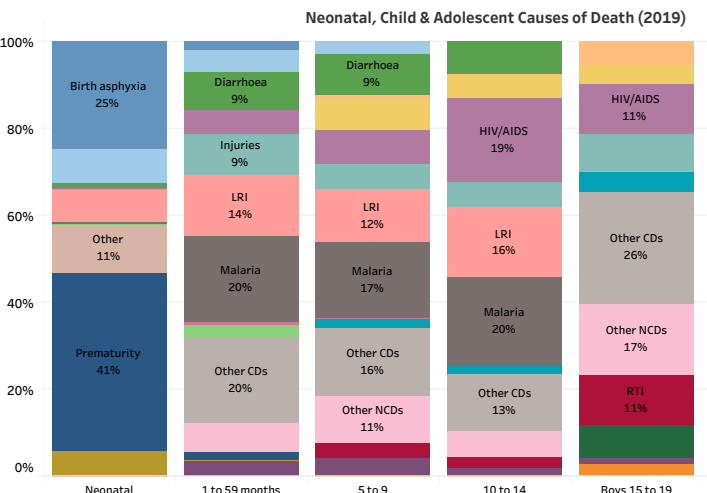
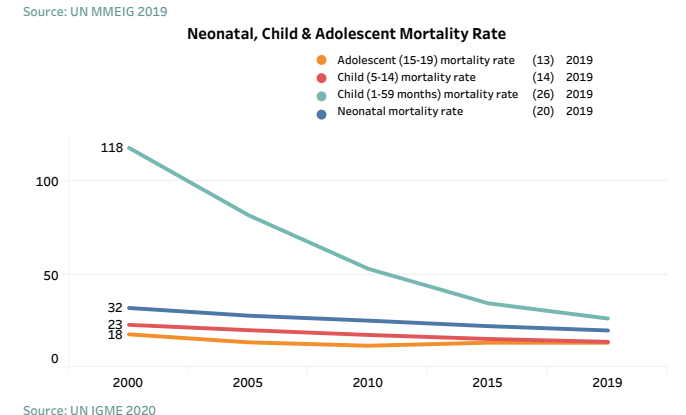
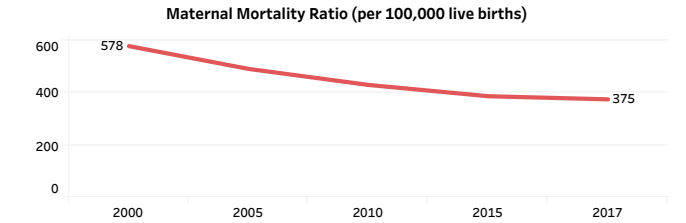
| Those in need receiving key interventions, % |   | 20% poorest                 | 20% richest |
|--|---|-----------------------------|-------------|
| Pre-pregnancy                                | Demand for family planning satisfied                    | Uganda 2018 PMA2020 Round 6 | 55%         |
|  | Antenatal care (4+ visits)                              | MIS 2018                    | 57%         |
| Pregnancy                                    | Neonatal tetanus protection                             | WHO GHO                     | 85%         |
|  | Treatment of pregnant women living with HIV with ART    | Global AIDS Monitoring 2021 | 95%         |
|  | Skilled birth attendant                                 | DHS 2016                    | 74%         |
| Postnatal                                    | Early initiation of breastfeeding                       | DHS 2016                    | 66%         |
|  | Postnatal care for mothers                              | DHS 2016                    | 54%         |
|  | Postnatal care for newborns                             | DHS 2011                    | 11%         |
| Infancy                                      | Continued breastfeeding (year 1)                        | DHS 2016                    | 87%         |
|  | Exclusive breastfeeding                                 | DHS 2016                    | 66%         |
|  | Immunization - DTP3                                     | WUENIC 2021                 | 89%         |
|  | Immunization - Measles                                  | WUENIC 2021                 | 87%         |
|  | Immunization - PCV3                                     | WUENIC 2021                 | 89%         |
|  | Immunization - Rotavirus                                | WUENIC 2021                 | 88%         |
| Childhood                                    | Careseeking for symptoms of ARI                         | DHS 2016                    | 71%         |
|  | Diarrhoea treatment: ORS                                | DHS 2016                    | 47%         |
|  | Vitamin A supplementation, full coverage                | UNICEF Global Database 2021 | 24%         |
| Environment                                  | Population using at least basic drinking water services | WHO/UNICEF JMP 2020         | 56%         |
|  | Population using at least basic sanitation services     | WHO/UNICEF JMP 2020         | 20%         |

Equity Source: DHS 2016

**DEMOGRAPHICS**

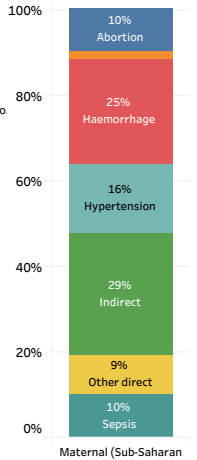
| Category   | Indicator  | Value  | Year |
|--|--|--------|------|
| POPULATION   | Total population (000)                                       | 45,741 | 2020 |
|  | Total under 5 population (000)                               | 7,796  | 2020 |
|  | Total adolescent population (10-19) (000)                    | 11,449 | 2020 |
| BIRTH  | Urban population (%)   | 25     | 2020 |
|  | Total fertility rate (births per woman)                      | 4.7    | 2020 |
|  | Adolescent (15-19 years) birth rate (births per 1000 girls)  | 111    | 2017 |
|  | Total Births (000)   | 1,670  | 2020 |
| DEATH  | Birth registration (%)                                       | 32     | 2016 |
|  | Stillbirth rate (per 1000 total births)                      | 18     | 2019 |
|  | Neonatal deaths, as % of all <5                              | 44     | 2019 |
|  | Adolescent (10-19) mortality rate (per 1000 children age 10) | 19     | 2019 |
|  | Lifetime risk of maternal deaths (1 in N)                    | 49     | 2017 |
| CONTEXT  | Total maternal deaths  | 6,000  | 2017 |
|  | Total under 5 deaths   | 74,053 | 2019 |
|  | Under 5 mortality rate (per 1000 live births)                | 46     | 2019 |
|  | Early childhood development index (%)                        | 65     | 2016 |
|  | Heidelberg Conflict Barometer (intensity 1-5)                | 3      | 2020 |
| Secondary completion rate, education (upper, female) (%) | 15   | 2019   |      |

**MORTALITY & CAUSES OF DEATH**



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)

**Maternal Causes of Death (2014)**



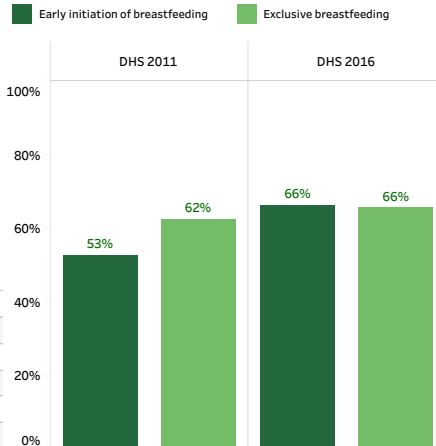
Source: Say, L et al. Global causes of maternal death: a WHO systematic analysis. Lancet Global Health. 2014

**NUTRITION**

**Essential Nutrition Indicators**

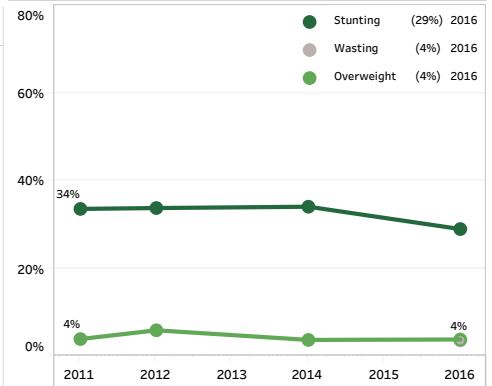
|  |     |      |
|--|-----|------|
| Prevalence of anemia in women aged 15-49           | 33% | 2019 |
| Women of reproductive age, short stature           | 1%  | 2016 |
| Iron and folic acid supplements for pregnant women | 23% | 2016 |
| Baby weighed at birth                              | 50% | 2011 |
| Low birth weight prevalence                        | -   |      |
| Minimum dietary diversity (age 6-23 months)        | 26% | 2016 |
| Women (20+) with: BMI > 30 (obese)                 | 9%  | 2016 |
| Women (20+) with: BMI 25-30 (overweight)           | 23% | 2016 |
| Women (20+) with: BMI < 18.5 (underweight)         | 10% | 2016 |
| Child BMI (age 5-9) Total                          | 11% | 2016 |
| Overweight and obese                               | 23% | 2016 |
| Underweight  | 23% | 2016 |
| Adolescent BMI (age 10-19) Boys                    | 4%  | 2016 |
| Overweight and obese                               | 4%  | 2016 |
| Underweight  | 32% | 2016 |
| Girls  | 16% | 2016 |
| Overweight and obese                               | 16% | 2016 |
| Underweight  | 16% | 2016 |

**BREASTFEEDING PRACTICES**



**CHILD NUTRITIONAL STATUS**

Percentage children under 5 with moderate:

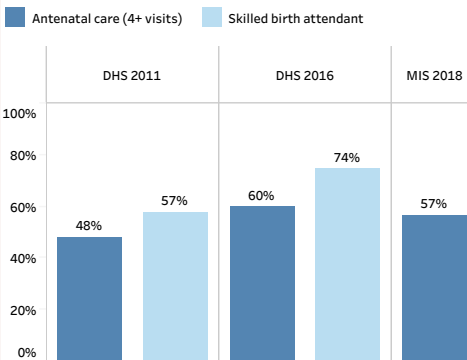


Source: UNICEF/WHO/WB Joint Child Malnutrition Estimates 2021

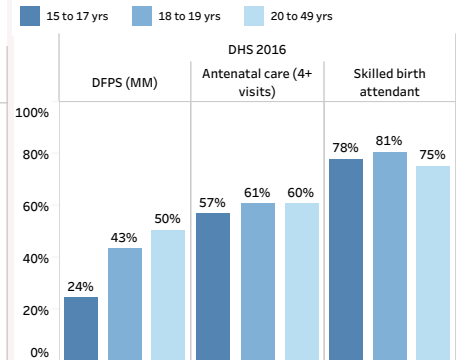
**MATERNAL & NEWBORN HEALTH**

**PREGNANCY & DELIVERY**

Percentage women aged 15-49 years with:



**ADOLESCENT REPRODUCTIVE & MATERNAL HEALTH**



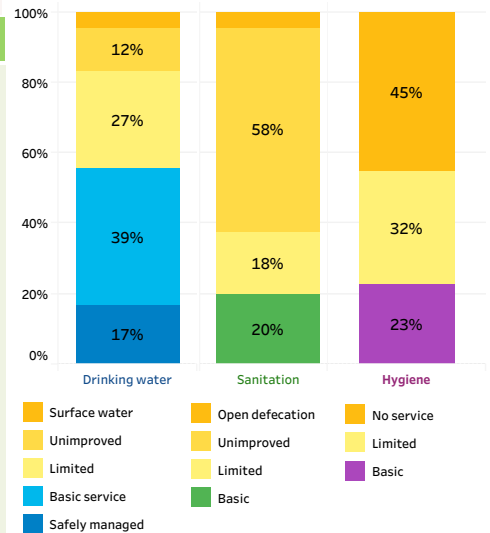
**ADDITIONAL MATERNAL & NEWBORN HEALTH INDICATORS**

|   |            |             |              |      |
|---|------------|-------------|--------------|------|
| First antenatal care visit within the first trimester             | 29%        | 2016        |              |      |
| Treatment of pregnant women living with HIV with ART*             | >95%       | 2020        |              |      |
| Intermittent preventive treatment for malaria during pregnancy 3+ | 41%        | 2018        |              |      |
| Institutional deliveries  | Total: 73% | Public: 57% | Private: 16% | 2016 |
| Caesarean section rate  | Total: 6%  | Urban: 11%  | Rural: 5%    | 2016 |

\*Source: Global AIDS Monitoring and UNAIDS 2021 estimates

**ENVIRONMENT**

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

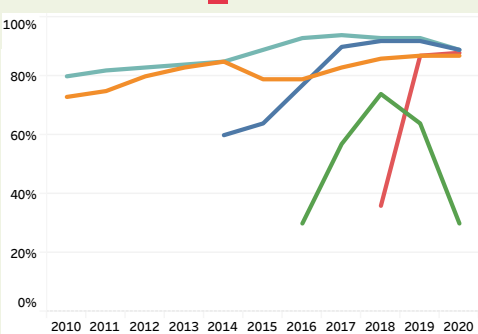


Note: Numbers may not add to 100% due to rounding  
Source: WHO/UNICEF Joint Monitoring Programme 2021

**CHILD & ADOLESCENT HEALTH**

**IMMUNIZATION**

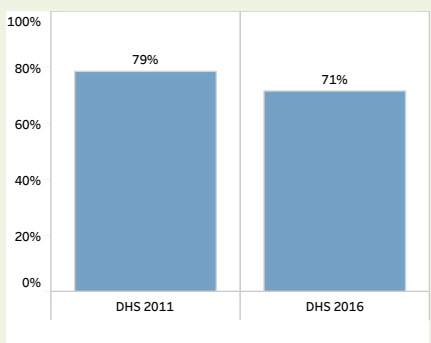
Percentage of children immunized:



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

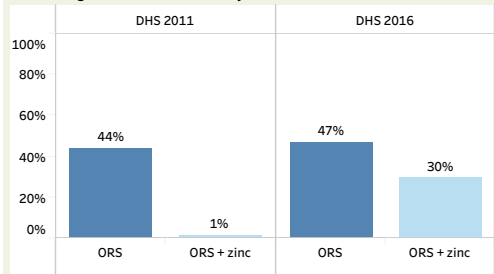
**CARESEEKING FOR ARI SYMPTOMS**

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



**DIARRHOEA TREATMENT**

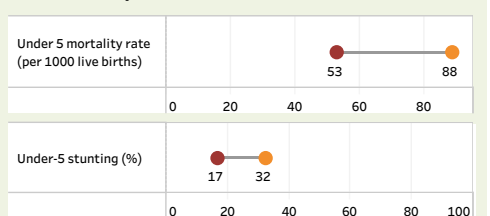
Percentage of children under 5 years with diarrhoea treated with:



**ADDITIONAL CHILD HEALTH INDICATORS**

|   |       |      |
|---|-------|------|
| Population sleeping under ITN or sleeping in a house sprayed by IRS | 59%   | 2018 |
| Children under-5 sleeping under ITNs                                | 60%   | 2018 |
| Careseeking for fever   | 87%   | 2018 |
| Malaria diagnostics in children under-five with fever               | 51%   | 2018 |
| Number of children not vaccinated with DTP1                         | 96000 | 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 |

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 | Quarterly |

|   |     |
|---|-----|
| Civil society involvement in national maternal, newborn and child health programs | Yes |
|---|-----|

|   |     |
|---|-----|
| 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 | No  |
| 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) | 1.68 | 2017 |
|--|------|------|

|  |       |      |
|--|-------|------|
| Density of nurses and midwives (per 10,000 population) | 12.38 | 2018 |
|--|-------|------|

|   |   |
|---|---|
| Proportion of health facilities with a core set of relevant essential medicines available and affordable on a sustainable basis | - |
|---|---|

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 interpretation was made |
| To preserve a woman's mental health                           | No interpretation was made |
| To preserve a woman's health                                  | No interpretation was made |
| For economic or social reasons                                | No interpretation was made |
| On request  | No interpretation was made |
| In cases of rape  | No interpretation was made |
| In cases of incest  | No interpretation was made |
| In cases of foetal impairment                                 | No interpretation was made |
| In cases of intellectual or cognitive disability of the woman | No interpretation was made |

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

| International code of marketing of breastmilk substitutes | Marketing of breastmilk substitutes |                                      |                                  | 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

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

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

### FINANCING

|  |      |      |
|--|------|------|
| Per Capita Total Expenditure on Health (US \$) | \$43 | 2018 |
|--|------|------|

|   |     |      |
|---|-----|------|
| Government Expenditure on Health per capita (US \$) | \$7 | 2018 |
|---|-----|------|

|   |     |      |
|---|-----|------|
| Out of pocket expenditure as % of total expenditure on health | 38% | 2018 |
|---|-----|------|

|   |    |      |
|---|----|------|
| General government expenditure on health as % of total government expenditure | 5% | 2018 |
|---|----|------|

Source: WHO Global Health Expenditure Database

| ODA+ (US \$)                             |      |      | ODA+ (US \$ millions)     |         |         |
|--|------|------|---------------------------|---------|---------|
| ODA+ flows to RMNCH per capita           | \$13 | 2019 | Total ODA+ flows to RMNCH |         | 593.491 |
| ODA+ to CH per child US                  | \$8  | 2019 | ODA+ to CH                | 181.191 |         |
| ODA+ to MNH per birth                    | \$18 | 2019 | ODA+ to RMNCH other       | 161.107 |         |
| ODA+ to RH per woman of reproductive age | \$24 | 2019 | ODA+ to MNH               | 64.657  |         |
|  |      |      | ODA+ to RH                | 186.536 |         |

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)

