

Maternal, Neonatal, and Child Health Profile

## **Country Context**



29 (2020)

Lifetime risk of maternal deaths (1 in N)

19,276 (2023)
Total under-five population

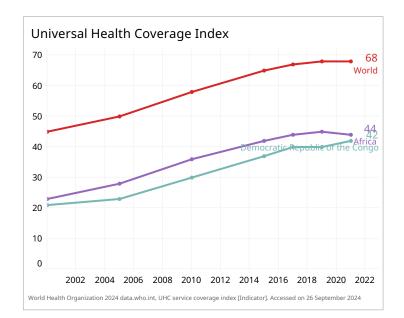
28 (2021) Stillbirth rate

4,370 (2023) Total Births (000) 302,078 (2022) All under-five deaths

6 (2023)
Total fertility rate (births per woman)

195,760 (2022) All 1-59 months deaths

21,511 (2020) Total maternal deaths 76 (2022) Under-five mortality rate



# **Mortality Targets**





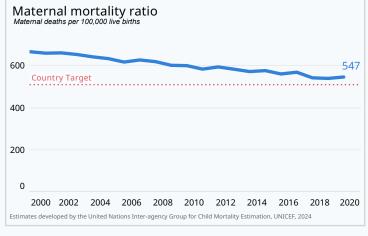
\$ 18 per 1,000 live births by 2022

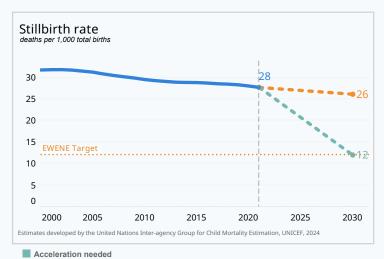
Country-Reported Neonatal Mortality Rate Target

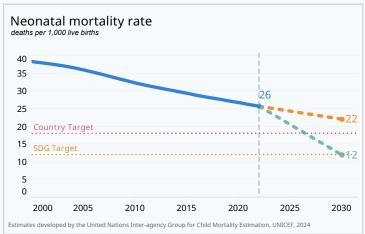
25 per 1,000 live births by 2030 Under-5 Mortality Rate Target

Current trend

13 per 1,000 live births by 2030 1-59 months Mortality Rate Target















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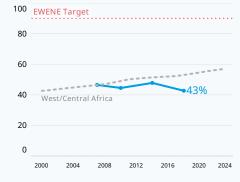
		Year	Country	Region
ty	Total maternal deaths	2020	21,511	147,000
Maternal Mortality	Lifetime risk of maternal deaths (1 in N)	2020	29	27
aternal	Stillbirth rate	2021	28	23
2	Maternal mortality ratio	2020	547	724
	Anemia in women aged 15-49 (%)	2019	42	49
П	Women of reproductive age, short stature (%)	2013	5	
Vutritio	Women (age 20+) underweight (BMI <18.5) (%):	2016		10
_	Iron and folic acid for pregnant women (%)	2013	5	
	Low birth weight prevalence (%)	2020	10	
Pre-pr	Demand for family planning satisfied with modern methods (maried/in union) (%)	2018	33	41
	Skilled birth attendant (%)	2018	85	62
Birth	Caesarean section rate (%)	2018	5	5
	Institutional deliveries (total) (%)	2018	82	64
	Antenatal care (four or more visits) (%)	2018	43	53
5	First antenatal care visit within the first trimester (%)			
Pregnancy	Treatment of pregnant women living with HIV with ART (%)	2023	40	54
Ы	Intermittent preventive treatment for malaria during pregnancy 3+ (%)	2018	13	23
	Neonatal tetanus protection	2023	78	77
	Postnatal care for mothers (%)	2018	50	54
	Postnatal care for newborns (%)	2018	57	61
natal	Minimum dietary diversity (6-23 months) (%)	2017	15	25
Postnata	Baby weighed at birth (%)	2014	76	
	Early initiation of breastfeeding	2017	47	41
	Exclusive breastfeeding (0-5 months)	2017	54	64

#### **Progress to meet EWENE Coverage Targets**

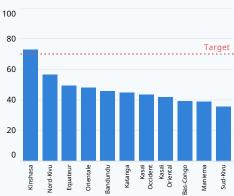


#### Four or more Antenatal Care Contact

Percentage of pregnant women with at least four antenatal care contacts



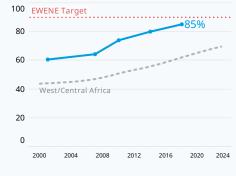
Percentage of pregnant women with at least four antenatal care contacts by division

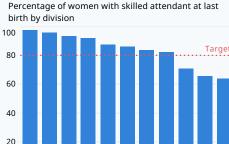




#### Skilled Attendant at Birth

Percentage of women with skilled attendant at last birth

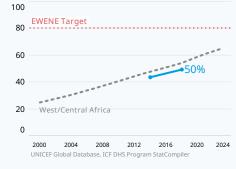




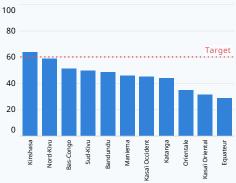


#### Postnatal Care for Women

Percentage of women with postnatal care within two days for birth



Percentage of women with postnatal care within two days for birth by division











### Maternal, Neonatal, and Child Health Profile

## **National Policy**

Defined list of essential equipment needed for and comprehensive EmOC	Yes	
National strategy/implementation plan for scale up	Yes	
EmOC facility mapping showing the 2021 geographical distribution with MoH	Yes	•
Specific budget line in the national plans (and where relevant sub national plans)	Yes	•
Defined minimum number of midwives to be staffed in an EmOC health facility for providing 24h/7d care	Yes	
Standardized designs and floor plans for the basic EmOC health facilities	Yes	
Country capacity to provide yearly data on the performance of EmOC signal functions for measuring the availability of EmOC	Yes	
Defined list of essential equipment needed for level 2 small and sick newborn care	Yes	
National strategy/implementation plan for scale-up	Yes	
Specific budget line in the national plans (and where relevant subnational plans)	Yes	
Defined Human Resources staffing norms for level 2 newborn care	Yes	
Standardized designs and floor plans to deliver level 2 package of services	No	
Does the country have a data system to record admissions, outcomes, and quality of care for level 2 newborn care?	Yes	0
Policy provision of free transport of small and sick newborn (either government-provided or voucher for transport)	No	
Coordination mechanism linking improvement of level 2 newborn care with improving maternity services to prevent major conditions causing newborn deaths	Yes	
Provision in policy/guidelines for engagement of families in the care of babies	Yes	
System for post discharge follow-up of babies to improve survival, growth and development	Yes	

Women who make their own informed decisions (%)

#### **NO DATA**

Women who make their own informed decisions (%)	31 2014
Contraceptive use	85 2014
Reproductive health care	47 2014
Sexual relations	74 2014
Access to women and men aged 15 years and older to sexual and reproductive health care, information and education (%)	2019
Maternity Care	2019
Contraceptive and Family Planning	85 2019
Sexuality Education	2019
HIV and HPV	<b>75</b> 2019
United Nations Statistics Division (UNSD). Sustainable Development Goals (SDG) Indicators Database	e.

## Quality of Care, Health Workforce, and Data for Action

National strategy for accrediting and contracting private sector for MNH	No	National strategy/plan for human resources for MNH	Yes	
National quality of care standards for MNH	Yes	Defined core competencies for midwifery practice (essential competencies as per ICM)	Yes	
National quality of care standards for small and sick newborn care	Yes	Defined core competencies for newborn care, including small and sick newborn care	Yes	
Agreed set of quality of care indicators	Yes	Defined core competencies for community health or extension workers	Yes	
Maternal and perinatal death surveillance system in place for maternal deaths	Yes	Electronic individual patient-based data system for maternity care to include uterotonic use, labour monitor, breastfeeding, and neonatal resuscitation if need	No	
Maternal and perinatal death surveillance system in place for neonatal deaths	Yes	Electronic individual patient-based data system for small and sick newborn care to include details on Kangaroo Mother Care, oxygen/CPAP use, antibiotics, etc.	No	
Maternal and perinatal death surveillance system in place for stillbirths	Yes	Integration of maternal and perinatal death surveillance system data and routine health information system	Yes	
National quality of care plan included community participation in MNH for priority setting and planning	Yes	Mechanism for data sharing from the private/NGO sector	Yes	
National quality of care plan included community participation in MNH for	Yes			

Every Newborn Action Plan (ENAP) and Ending Preventable Maternal Mortality (EPMM), Joint Country Implementation Tracking Tool. 2022. Based on country self-report.

monitoring and evaluation



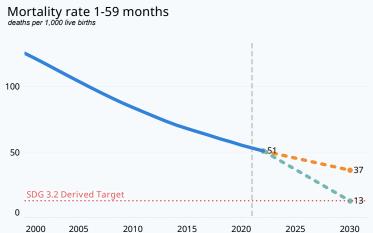




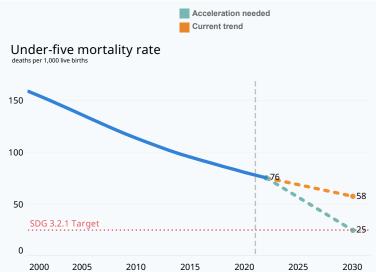


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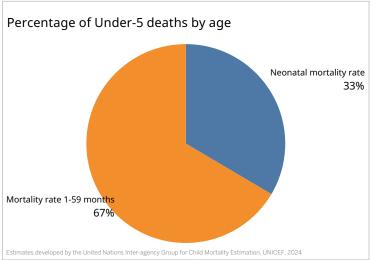
### **Child Mortality and Nutrition Outcomes**

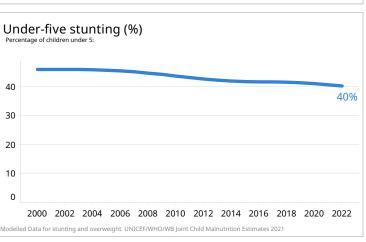


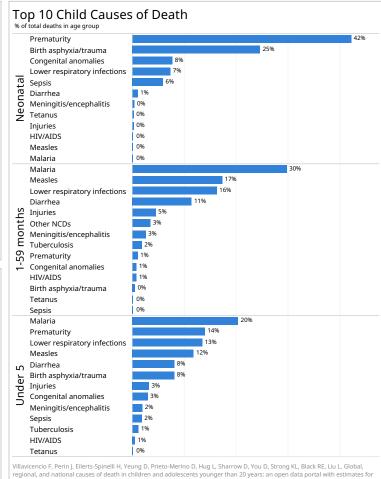
Estimates developed by the United Nations Inter-agency Group for Child Mortality Estimation, UNICEF, 2024



Estimates developed by the United Nations Inter-agency Group for Child Mortality Estimation, UNICEF, 2024







2000–21. Lancet Glob. Health 2023. https://doi.org/10.1016/ S2214-109X(23)00496-5





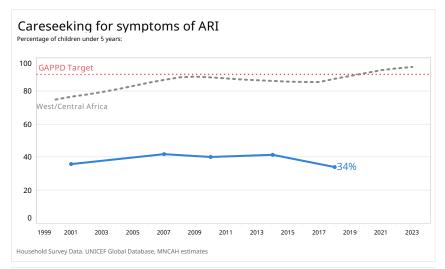


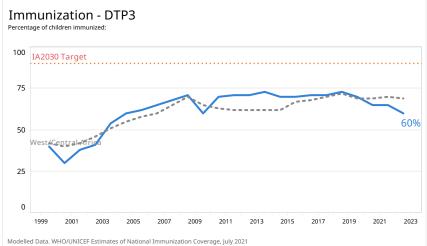


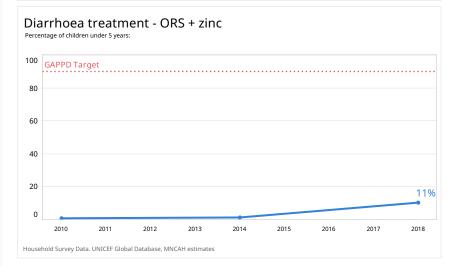
### Maternal, Neonatal, and Child Health Profile

		Year	Country	Dogion
	Neonatal deaths, as % of all <5	2022	Country 35	Region 35
>	All under-five deaths	2022	302,078	1,863,489
Mortality	Under-five mortality rate	2022	76	89
Σ.	Neonatal mortality rate	2022	26	30
	Mortality rate 1-59 months	2022	51	61
Ē	Under-five stunting (%)	2022	40	32
Nutrition	Under-five wasting (%)	2017	6	7
ž	Under-five overweight (%)	2022	4	3
	Immunization - DTP3	2023	60	69
	Immunization - Measles	2023	52	40
	Immunization - PCV3	2023	59	64
Prevent	Malaria prevention in children under-five - sleeping under ITNs (%)	2023		52
Pre	Immunization - Rotavirus	2023	52	56
	DTP1-DTP3 dropout (%)	2023	25	
	DTP1-MCV1 dropout (%)	2023	35	
	Zero-dose children	2023	839,000	
	Vitamin A supplementation, full coverage	2022	91	71
te.	Minimum dietary diversity (6-23 months) (%)	2017	15	25
Promote	Early initiation of breastfeeding	2017	47	41
Δ.	Exclusive breastfeeding (0-5 months)	2017	54	64
	Continued breastfeeding (12-23 months)	2017	70	64
	Careseeking for symptoms of ARI	2018	34	40
	Careseeking for fever (%)	2018	46	57
reat	Diarrhoea treatment: ORS	2018	24	33
Ė.	Diarrhoea treatment - ORS + zinc	2018	11	18
	Malaria diagnostics in children under-five with fever (%)	2018	22	24
	Treatment with ACT amongst children receiving any antimalarials (%)	2018	42	
	Population using at least basic drinking-water services	2022	35	
	Population using at least basic sanitation services	2022	16	
	Population with hand washing facilities with soap and water at home	2022	19	
Context	Total under-five population (000)	2023	19,276	95,801
Col	Total Births (000)	2023	4,370	21,418
	Birth registration (%)	2018	40	59
	Reliance on clean fuels and technologies (%)	2022	4	
	UHC Service Coverage Index (SDG 3.8.1)	2021	42	

### **Child Health Interventions**









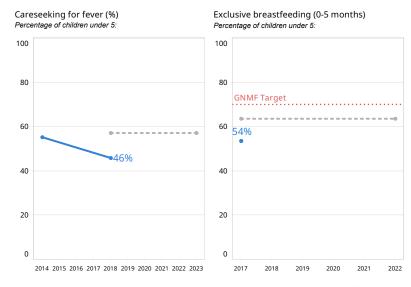






## Maternal, Neonatal, and Child Health Profile

	tional Policy  Birth registration	Yes	
	Birth/Labour companion	Yes	
	Costed RMNCH strategy/plan including MNH	Yes	
ţ	Eight ANC contacts	No	
Maternal Health	Labour Care Guide/Revised partograph	Yes	
nal	Maternal death registration with civil registrar	Yes	
latei	Neonatal death registration with civil registrar	Yes	
2	PNC updated with WHO recommendations	Yes	
	RMNCH/MNH plan updated to include quality of care standards	Yes	
	Stillbirth registration	No	
	rborn Action Plan (ENAP) and Ending Preventable Maternal Mortality (EPMM), Joint Country ool. 2022. Based on country self-report.		tation
Ti ed	Maize	No	
Folate Fortified Foods	Rice	No	
late Fo			
ᅙ	Wheat	No	
	fication Initiative. 2023 Annual Report. FFI: Atlanta, USA 2024. Accessed at: <a href="https://www.ffi.al-reports">https://www.ffi.al-reports</a>	network.	
	Civil society involvement in national maternal, newborn and child health programs	Yes	
	Dedicated adolescent health/well-being strategic plan	Yes	
Governance	International code of marketing of breastmilk substitutes	Partial	
Gover	Maternity protection (Convention 183)	No	
	National coordinating body that looks at RMNCAH or its components	Yes	
	National policy or guideline to improve quality of care of SRMNCAH services	Yes	
eath v	A national maternal death review committee	Yes	
Maternal Death Review	A national policy to notify all maternal deaths	Yes	
Mat	A national policy to review all maternal deaths	Yes	
	Costed national implementation plan(s) for maternal, newborn and child health available	Yes	
	Integrated plan of SRMNCAH	Yes	
	Birth registration requirement	Yes	
olicies	Dedicated child health strategic plan	Yes	
Child Health Policies	Policy on the managemenet of pneumonia in children 2 - 59 months	Yes	
Child F	Policy on the managemenet of diarrhoea in children 0 - 9 years	Yes	
	Policy on the managemenet of hospitalised children 1 month - 9 years	Yes	
	Policy on early childhood development	Yes	



Comparison to Regional Estimate in gray. Household Survey Data. UNICEF Global Database, MNCAH estimates

Comparison to Regional Estimate in gray. Household Survey Data. UNICEF Global Database, MNCAH estimates

## Investment, Response, Resiliency, Equity

Budgeted RMNCAH strategy (including MNH)	Partial	
Subnational implementation plans at the State/Regional/Provincial levels	No	
Subnational implementation plans at the district or an equivalent subnational unit le	No	
Budgeted/financed subnational plans	No	
Tracking for domestic research allocations for MNH	Yes	•
Additional resources allocated for vulnerable population groups	Yes	
User-fee exemptions for MNH	No	
Insurance or financial protection scheme for MNH	No	
Emergency transport system for MNH	No	•
National emergency response plan	No	
National quality of care plan included community participation in MNH for priority se	Yes	•

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## **Commodities**

Tracking availability/stock outs of caffeine citrate	Yes	
Tracking availability/stock outs of dexamethasone	Yes	•
Tracking availability/stock outs of heat stable carbetocin	Yes	•
Tracking availability/stock outs of magnesium sulfate	Yes	•
Tracking availability/stock outs of oxytocin	Yes	•

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### **Research and Innovation**

D	oes the country have a national prioritised research agenda for maternal and ne	No	
Ic	dentified innovation needs for MNH	Yes	•
N	lational mechanism for sharing learning	Yes	

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Based on country self-report.

## Accountability

Representation from civil society, women's groups, and parent advocacy groups	Yes	•
Representation from parent advocacy groups for MNH and prevention of stillbir	Yes	•

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