Maternal, Neonatal, and Child Health Profile

Country Context

23,769 (2023) Total population (000) 37 (2020)

Lifetime risk of maternal deaths (1 in N)

4,158 (2023)
Total under-five population (000)

3 (2021) Stillbirth rate

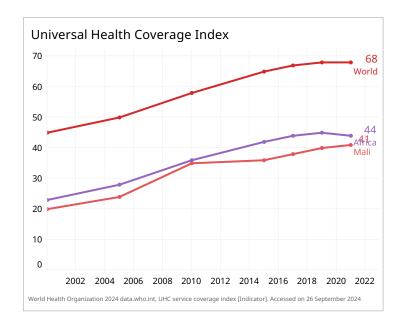
951 (2023) Total Births (000)

84,162 (2022) All under-five deaths

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

53,695 (2022) All 1-59 months deaths

3,927 (2020) Total maternal deaths 94 (2022) Under-five mortality rate



Mortality Targets

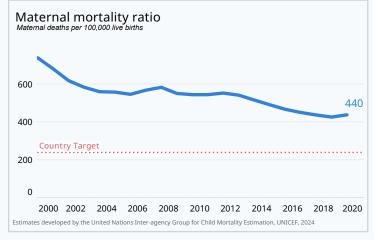
240 per 100,000 live births by 2024
Country-Reported Maternal Mortality Rate Target

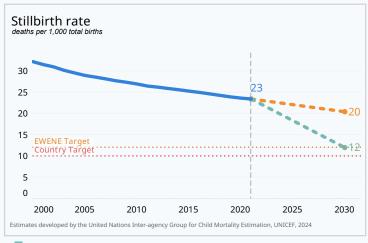
10 per 1,000 total births by 2022 Country-Reported Stillbirth Rate Target

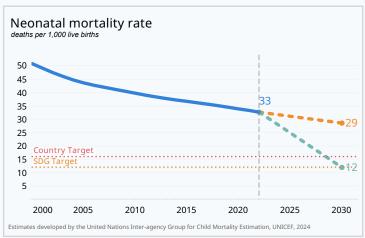
6 16 per 1,000 live births by 2024
Country-Reported Neonatal Mortality Rate Target

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

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













Maternal, Neonatal, and Child Health Profile

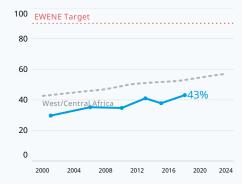
		Year	Country	Region
5	Total maternal deaths	2020	3,927	147,000
Maternal Mortality	Lifetime risk of maternal deaths (1 in N)	2020	37	27
aternal	Stillbirth rate	2021	23	23
Σ	Maternal mortality ratio	2020	440	724
	Anemia in women aged 15-49 (%)	2019	59	49
_	Women of reproductive age, short stature (%)	2018	0	
Jutritio	Women (age 20+) underweight (BMI <18.5) (%):	2016		10
_	Iron and folic acid for pregnant women (%)	2018	28	
	Low birth weight prevalence (%)			
gnancy	Demand for family planning satisfied with modern methods (maried/in union) (%)	2018	41	41
Pre-pregnancy	Informed decisions (15-19) for sexual reproductive health (%)	2018	3	12
	Skilled birth attendant (%)	2018	67	62
Birth	Caesarean section rate (%)	2018	3	5
	Institutional deliveries (total) (%)	2018	67	64
	Antenatal care (four or more visits) (%)	2018	43	53
ıancy	Treatment of pregnant women living with HIV with ART (%)	2023	33	54
Pregnancy	Intermittent preventive treatment for malaria during pregnancy 3+ (%)	2018	26	23
	Neonatal tetanus protection	2023	83	77
	Postnatal care for mothers (%)	2018	56	54
	Postnatal care for newborns (%)	2018	54	61
natal	Minimum dietary diversity (6-23 months) (%)	2022	21	25
Postnatal	Baby weighed at birth (%)	2015	37	
	Early initiation of breastfeeding	2020	60	41
	Exclusive breastfeeding (0-5 months)	2022	50	64

Progress to meet EWENE Coverage Targets

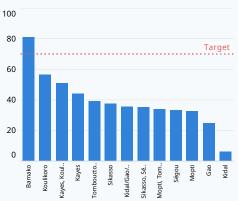


Four or more Antenatal Care Contact

Percentage of pregnant women with at least four antenatal care contacts



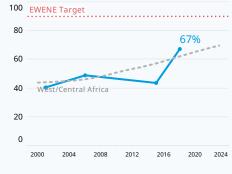
Percentage of pregnant women with at least four antenatal care contacts by division



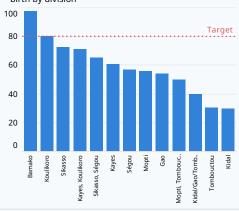


Skilled Attendant at Birth

Percentage of women with skilled attendant at last birth



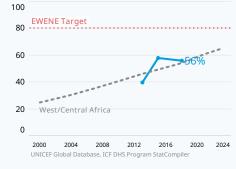




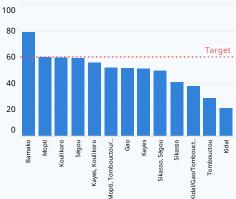


Postnatal Care for Women

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

Access to emergency obstetric care	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	
Scaling up small and sick newborn care	Defined list of essential equipment needed for level 2 small and sick newborn care	Yes	
	National strategy/implementation plan for scale-up	No	
	Specific budget line in the national plans (and where relevant subnational plans)	No	
	Defined Human Resources staffing norms for level 2 newborn care	Yes	
	Standardized designs and floor plans to deliver level 2 package of services	Yes	
	Does the country have a data system to record admissions, outcomes, and quality of care for level 2 newborn care?	Yes	
	Policy provision of free transport of small and sick newborn (either government-provided or voucher for transport)	Yes	
	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	

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

Women who make their own informed decisions (%) 100 75 50 25 Women who make their own informed decisions (%) 5 2018 66 2018 Contraceptive use 20 2018 Reproductive health care 26 2018 Sexual relations Access to women and men aged 15 years and older to sexual and 2022 reproductive health care, information and education (%) Maternity Care 2022 Contraceptive and Family Planning 0 2022 Sexuality Education 0 2022 HIV and HPV 75 2022 United Nations Statistics Division (UNSD). Sustainable Development Goals (SDG) Indicators Database.

Quality of Care, Health Workforce, and Data for Action

National strategy for accrediting and contracting private sector for MNH	Yes	National strategy/plan for human resources for MNH	No	
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.	Yes	
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	No	
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			

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monitoring and evaluation

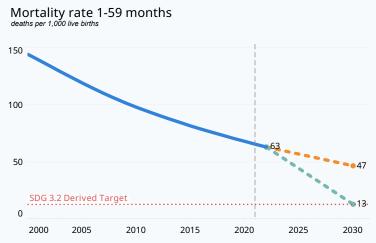




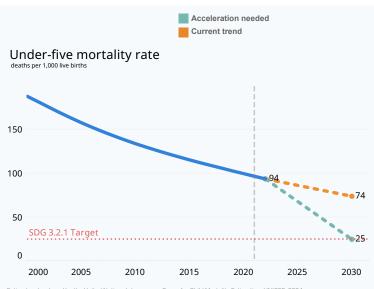


Maternal, Neonatal, and Child Health Profile

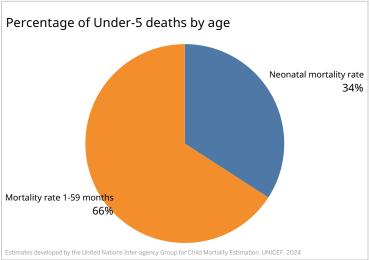
Child Mortality and Nutrition Outcomes

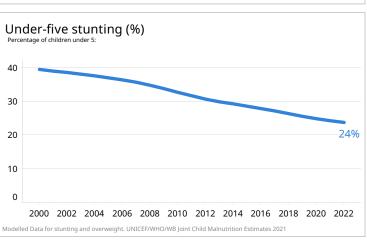


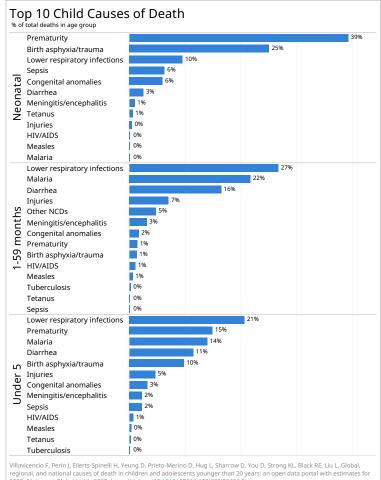
Estimates developed by the United Nations Inter-agency Group for Child Mortality Estimation, UNICEF, 2024



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



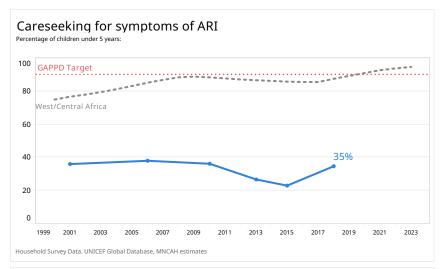


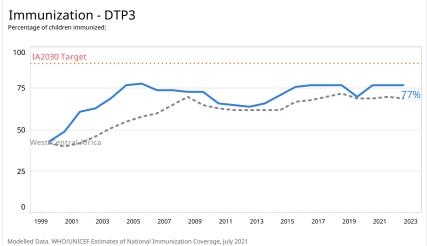


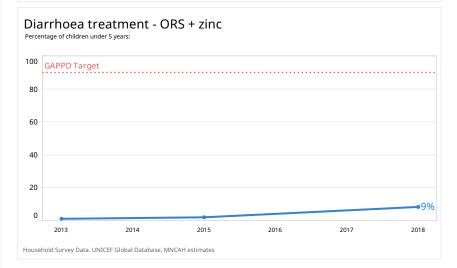
Maternal, Neonatal, and Child Health Profile

		Year	Country	Region
	Neonatal deaths, as % of all <5	2022	36	35
ty	All under-five deaths	2022	84,162	1,863,489
Mortality	Under-five mortality rate	2022	94	89
Σ	Neonatal mortality rate	2022	33	30
	Mortality rate 1-59 months	2022	63	61
n	Under-five stunting (%)	2022	24	32
Nutrition	Under-five wasting (%)	2022	11	7
Ž	Under-five overweight (%)	2022	2	3
	Immunization - DTP3	2023	77	69
	Immunization - Measles	2023	73	40
	Immunization - PCV3	2023	77	64
ent	Malaria prevention in children under-five - sleeping under ITNs (%)	2023		52
Prevent	Immunization - Rotavirus	2023	63	56
	DTP1-DTP3 dropout (%)	2023	1	
	DTP1-MCV1 dropout (%)	2023	6	
	Zero-dose children	2023	199,000	
	Vitamin A supplementation, full coverage	2022	76	71
e.	Minimum dietary diversity (6-23 months) (%)	2022	21	25
Promote	Early initiation of breastfeeding	2020	60	41
P	Exclusive breastfeeding (0-5 months)	2022	50	64
	Continued breastfeeding (12-23 months)	2021	73	64
	Careseeking for symptoms of ARI	2018	35	40
	Careseeking for fever (%)	2021	60	57
reat	Diarrhoea treatment: ORS	2018	21	33
Tre	Diarrhoea treatment - ORS + zinc	2018	9	18
	Malaria diagnostics in children under-five with fever (%)	2021	23	24
	Treatment with ACT amongst children receiving any antimalarials (%)	2021	15	
	Population using at least basic drinking-water services	2022	84	
	Population using at least basic sanitation services	2022	50	
	Population with hand washing facilities with soap and water at home	2022	17	
text	Total under-five population (000)	2023	4,158	95,801
Context	Total Births (000)	2023	951	21,418
	Birth registration (%)	2018	87	59
	Reliance on clean fuels and technologies (%)	2022	1	
	UHC Service Coverage Index (SDG 3.8.1)	2021	41	

Child Health Interventions







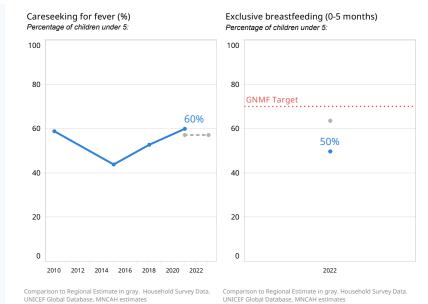






Maternal, Neonatal, and Child Health Profile

Nat	tional Policy		
	Birth registration	Yes	
	Birth/Labour companion	Yes	
	Costed RMNCH strategy/plan including MNH	Yes	•
alth	Eight ANC contacts	No	•
Maternal Health	Labour Care Guide/Revised partograph	Yes	•
erna	Maternal death registration with civil registrar	Yes	•
Mate	Neonatal death registration with civil registrar	Yes	•
	PNC updated with WHO recommendations	No	•
	RMNCH/MNH plan updated to include quality of care standards	Yes	
	Stillbirth registration	Yes	•
	oorn Action Plan (ENAP) and Ending Preventable Maternal Mortality (EPMM), Joint Countr ool. 2022. Based on country self-report.	y Implemen	tation
_	Maize	No	
Folate Fortifiec Foods	Rice	No	
Folati	Wheat	Yes	
ood Fortifi rg/annual	ication Initiative. 2023 Annual Report. FFI: Atlanta, USA 2024. Accessed at: https://www.ff-reports	inetwork.	
	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	
Gove	Maternity protection (Convention 183)	Yes	
	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 '	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	No	
		Yes	
	Integrated plan of SRMNCAH	Yes	
icies	Birth registration requirement	Yes	
th Poli	Dedicated child health strategic plan	Yes	
Child Health Policies	Policy on the managemenet of pneumonia in children 2 - 59 months	Yes	
G	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	



Investment, Response, Resiliency, Equity

Budgeted RMNCAH strategy (including MNH)	Partial	
Subnational implementation plans at the State/Regional/Provincial levels	Yes	•
Subnational implementation plans at the district or an equivalent subnational unit le	Yes	•
Budgeted/financed subnational plans	Partial	•
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	Yes	•
Emergency transport system for MNH	Partial	•
National emergency response plan	Yes	
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	No	
Tracking availability/stock outs of dexamethasone	Yes	•
Tracking availability/stock outs of heat stable carbetocin	No	•
Tracking availability/stock outs of magnesium sulfate	Yes	•
Tracking availability/stock outs of oxytocin	Yes	•

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Research and Innovation

Does the country have a national prioritised research agenda for maternal and ne	No data	
Identified innovation needs for MNH	Yes	•
National 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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