

A Decade of Tracking Progress for Maternal, Newborn and Child Survival

The 2015 Report



Countdown to 2015

Maternal, Newborn & Child Survival

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Foreword



Every day—in fact, hundreds of thousands of times a day—in dozens of countries around the world, events occur that on their own would seem entirely unremarkable. A pregnant woman arrives at a health centre for

an antenatal care appointment. A newborn baby nurses from her mother's breast. A child cries after a vaccination injection; another coughs as he is examined for symptoms of pneumonia. A teenage girl learns about contraception; another waits at a community well to fill jugs with clean drinking water for her family. Ordinary moments in ordinary lives.

And yet, taken together, these moments are anything but ordinary. They are transformative, products of a global movement that we have seen—and that so many of us have worked to bring about—especially during the past decade. Women and children are increasingly receiving health services that they need—and to which they have a fundamental human right—in numbers unimaginable a generation ago. Fewer are dying from preventable causes. More survive. More are better fed. And more are educated. The world has become a healthier place for women and children, as this final *Countdown to 2015* report shows. That is a momentous achievement.

However, alongside these successes lies a large portfolio of unfinished business—of unintended pregnancies, babies born too soon, children unvaccinated and chronically malnourished and illnesses untreated; of vast inequities that deprive people of basic health services; of millions upon millions of preventable deaths.

Countdown to 2015 offers an accounting of those transformative moments when lives were saved or improved by delivery of essential health services and of the many moments of disappointment and injustice when services failed to reach those who needed them. The governments of the world have made many commitments to women, newborns, children and adolescents. This accounting helps show whether and to what extent those promises have been kept. The data in this report provide a critical tool for accountability at the national, regional and global levels.

For a decade, *Countdown to 2015* has been counting down the days and years to the present moment, the moment of truth for the Millennium Development Goals and the transition to the Sustainable Development Goals. But all along it has also been counting up those who receive health care and those left behind, the funds invested in women's and children's health and those who have been helped to survive and those who have needlessly died. We count them because doing so helps us understand why preventable deaths occur, and how we can most effectively prevent many more women and children from dying. We count them because every life counts and no one should be left behind.

We stand at a moment of transition, as the world's gaze shifts from 2015 to 2030. A new countdown begins today, and this immensely important accounting work will continue until the last preventable death has been counted.

Graça Machel

Chair of the Board of the Partnership for Maternal, Newborn & Child Health, former Education Minister of Mozambique, past Chair of the GAVI Alliance Board and renowned international advocate for women's and children's health and rights





Countdown headlines for 2015



Countdown headlines for 2015

This is the last *Countdown to 2015* report: a final accounting of progress and remaining gaps in the 75 countries that account for more than 95% of maternal, newborn and child deaths.

There is good news on maternal and child survival, but Millennium Development Goals 4 and 5 have mostly not been achieved.

- Maternal and child survival have improved markedly during the Millennium Development Goals era. Both under-five mortality and maternal mortality have been reduced by about half since 1990, and the rate of improvement has accelerated since 2000.
- Many countries have “graduated” from *Countdown*. About half of the 68 countries that were included in *Countdown* because they exceeded specified thresholds of child or maternal mortality have reduced mortality below the thresholds.
- However, Millennium Development Goals 4 and 5 remain mostly unfulfilled. Some 50 *Countdown* countries will fail to achieve the child mortality reductions required by Millennium Development Goal 4, and 69 will not achieve the maternal mortality reductions required by Millennium Development Goal 5. Only 4 of the 75 *Countdown* countries—Cambodia, Eritrea, Nepal and Rwanda—will achieve both Millennium Development Goals 4 and 5.

Newborn survival and child nutrition are two key continuing challenges that must be addressed.

- Newborns account for 45% of deaths among children under age 5. Neonatal conditions cause an increasing share of child deaths as interventions have reduced deaths of older children.

- Nutrition is crucial—and far too many children are still hungry. In more than half of *Countdown* countries, stunting (a sign of inadequate diet and repeated illness) affects at least 30% of children under age 5, and wasting (a marker of acute malnutrition) affects at least 5%. Almost half of all child deaths are attributable to undernutrition.

Coverage of key interventions remains unacceptably low and varies greatly across countries.

- Universal coverage remains a distant target for most interventions in most countries. Vaccines and many malaria and HIV interventions have been prioritized and have achieved substantial improvements, but most other interventions still fail to reach a third or more of the women and children who need them.
- Services requiring contact with a working health system have lagged the most. Family planning, pregnancy and childbirth services and childhood disease management still have large coverage gaps.

Equity has improved, but not nearly enough.

- Across the *Countdown* countries, systematic pro-rich inequalities exist for virtually all coverage indicators. These equity gaps are widest for interventions requiring access to health facilities 24/7.
- Globally, coverage has increased more for the poor than for the rich, so the equity gap is shrinking. Coverage equity is improving in both absolute and relative terms but remains a pressing challenge in virtually every *Countdown* country.
- Countries improve overall coverage when they focus on reducing inequity. Rapid progress in coverage came when countries effectively reached the poorest families.

Achieving high, equitable coverage requires financial investment, supportive policies and stronger health systems.

- Donor funding has increased, but countries' reliance on out-of-pocket spending is a concern. Aid for maternal, newborn and child health tripled from 2003 to 2012, and recent attention to neonatal survival has led to increased newborn health commitments.
- Many countries have adopted supportive policies. More research is needed to better understand the strength of countries' implementation after policies are adopted.
- Most *Countdown* countries have a severe shortage of skilled health workers. *Countdown* countries have a median of 10.2 physicians, nurses and midwives per 10,000 people, and

three-quarters are below the World Health Organization benchmark of 22.8 per 10,000.

More data are now available; more and better data are still needed.

- More countries are conducting more frequent household surveys. Countries can use these data to support evidence-based decisionmaking about policies and programmes.
- Better data are needed for assessing quality of care. Coverage data on service contacts such as antenatal and postnatal care visits need to be complemented with information on interventions provided during those contacts.

The *Countdown to 2015* experience offers important lessons that are relevant to the Sustainable Development Goals era.



Introduction



“Ten years from now, in 2015,” said the opening line of *Countdown*’s first report, “the governments of the world will meet to assess if we have achieved the Millennium Development Goals, the most widely ratified set of development goals ever, signed onto by every country in the world.”¹ In that inaugural report the *Countdown to 2015* partnership committed “to share new evidence and experience, to take stock of progress in preventing child deaths, to hold international and national level institutions accountable if the rate of progress is not satisfactory, to identify any major gaps in knowledge or existing processes that are hindering progress, to propose new actions as appropriate and to advocate for greater investment in child survival.” *Countdown* later expanded its mandate to include maternal survival and the continuum of care. This commitment aimed to ensure that the world’s assessment of its efforts to achieve Millennium Development Goals 4 and 5—to reduce child mortality and improve maternal health—would be accurate, meaningful and robust.

That day of reckoning has come.

It is human nature to look forward, and that inclination has played itself out in this pivotal year of 2015. Speculation, advocacy, planning and negotiation surrounding the world’s next set of goals—the Sustainable Development Goals—have claimed most of the attention in global health and development.² This is by no means a bad thing: The Millennium Development Goals experience has shown that realistic, measureable goalsetting is a critically important step towards concerted action and lifesaving impact.

But goals become truly meaningful only when performance is measured against them—that is, when those who wrote and signed on to those goals are held to account for their efforts to fulfil them and for the results of those efforts. Looking backward—identifying successes and failures and understanding how and why they occurred—is crucial. The Sustainable Development Goals that

pertain to reproductive, maternal, newborn, child and adolescent health as well as to other fields of health and development, are being built atop the foundation of the Millennium Development Goals. The promises made before 2015 to women and children do not just disappear, and they must not be allowed to.

For Millennium Development Goals 4 and 5, the verdict is mixed. Since 2005, *Countdown*’s findings have always highlighted progress with unfinished business, lives saved with many lives still needlessly being lost. This mixed picture is the challenge ahead: how to convey powerful achievements that encourage other countries to do the same and to avoid the lure of complacency—that is, how to describe tragic failures in a way that stimulates a coordinated response rather than a crippling paralysis of “there’s nothing to be done.”

As in past *Countdown* reports, the data tell the story. This is firstly a story of momentous achievement. The world has become a healthier place for women and children during the Millennium Development Goals era. Maternal and child mortality have both been nearly halved or halved, respectively, since 1990, and millions fewer mothers and children die each year. About half the 75 *Countdown* countries have “graduated” by moving below the mortality thresholds originally set for inclusion as a *Countdown* country. These advances reflect, in part, notable improvements in coverage for several key health interventions, particularly in areas that have received high and consistent attention and funding at the national and international levels, including malaria, HIV and immunization. Evidence-based policies and programmes are being adopted, and more countries are conducting population-based surveys—which are essential for tracking progress and provide much of the data for *Countdown*’s analyses—more often.

However, the data also reveal a second, competing narrative, one in which a large majority of *Countdown* countries have not reached their

Millennium Development Goal 4 and 5 targets. In many countries coverage of critical family planning, pregnancy, childbirth and treatment interventions for childhood diseases remains low. And even in countries that have made spectacular overall progress the poor and disadvantaged are being left behind to suffer and die from preventable and treatable illnesses.

Both stories are true, and both are presented in this report. Together, they form the foreword to the story of the next 15 years under the Sustainable Development Goals, one hopefully full of small failures and great successes, of more women and children saved and fewer lives lost. These data-driven narratives are told by the figures and tables in the pages that follow and in the 75 country profiles that offer final report cards on the progress countries have made in improving equitable coverage and its policy, financial and health system determinants.

Beneath these data and the stories they tell about country progress lies a deeper truth. Each percentage point of coverage represents hundreds or thousands of women, newborns or children who received the essential care they needed, as their human right to the best available standard of health care demands. Each percentage point short of universal coverage contains the stories

of hundreds or thousands forced to go without that lifesaving care: a woman who gave birth on a dirt floor and bled to death when there was no one around with the skills and tools to treat her, a newborn baby born too soon and too small whose mother received insufficient nutrition and inadequate antenatal care and who succumbed after only a few short hours or days of life, a toddler with diarrhoeal disease who died of dehydration because his family had neither safe drinking water nor access to the simple treatments that would have saved him, a teenager never taught how to prevent an unintended pregnancy who died from obstructed labour when the stillborn baby proved too big for her still-growing body.

Fifteen years from now, the governments of the world will meet to assess whether the Sustainable Development Goals have been achieved. The global community must work together between now and then to hear and understand every story, happy and sad, and to remember that the numbers reported represent human lives. It must commit to counting every success, to understanding every failure, to valuing every life and to holding everyone fully accountable for keeping the promises.

With this report, *Countdown's* old work ends, and that new work begins.







THE LANCET

