



Countdown to 2015

Maternal, Newborn & Child Survival

Briefing Note:

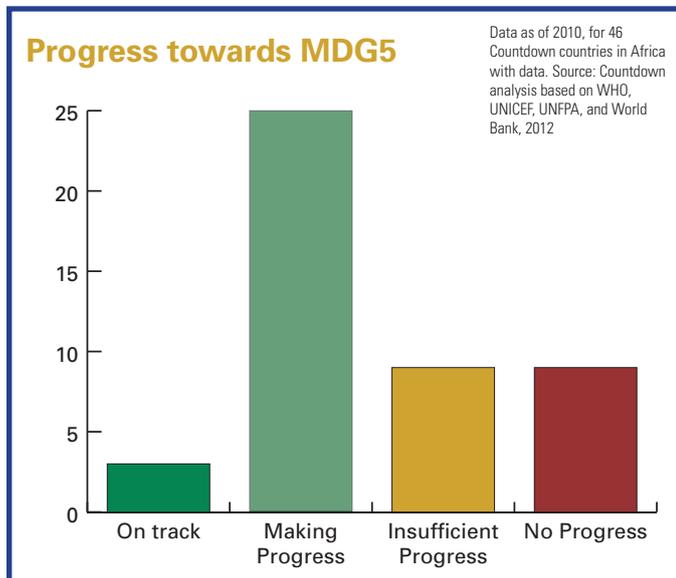
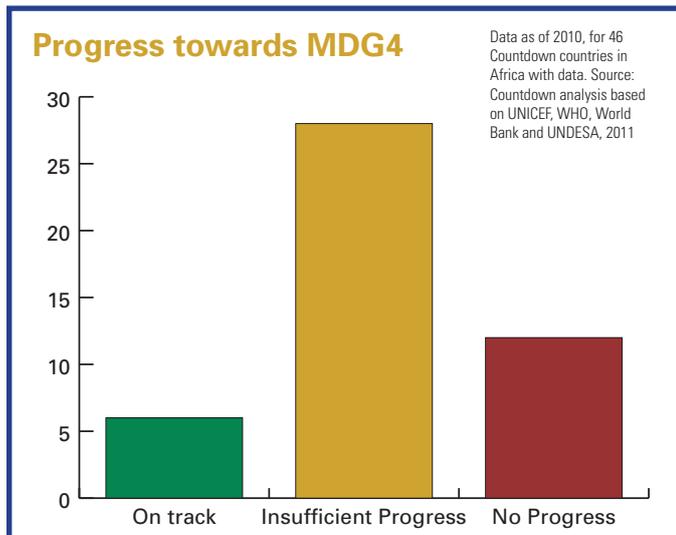
Maternal and Child Survival in Africa

Child and maternal mortality are increasingly concentrated in sub-Saharan Africa.

- Nearly half of all global child deaths, and 57% of all maternal deaths, occur in Africa.
- In 2010, 3.8 million African children under 5 years of age died, and almost 165,000 African women died of pregnancy-related causes.
- Child and maternal mortality are both declining in Africa, but not fast enough.
- Eritrea, Madagascar, Malawi, Niger, and Tanzania reduced child deaths by >50% between 1990 and 2010.

African efforts on MDGs 4 & 5 are lagging.

- Most African countries included in Countdown are not on track to achieve MDGs 4 and 5.

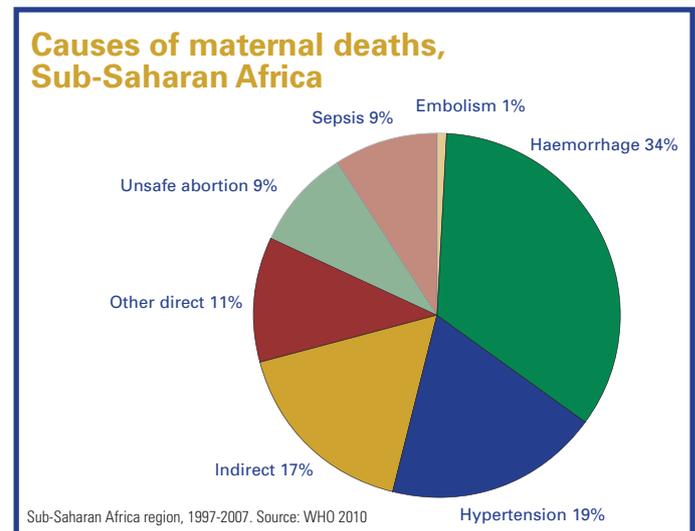
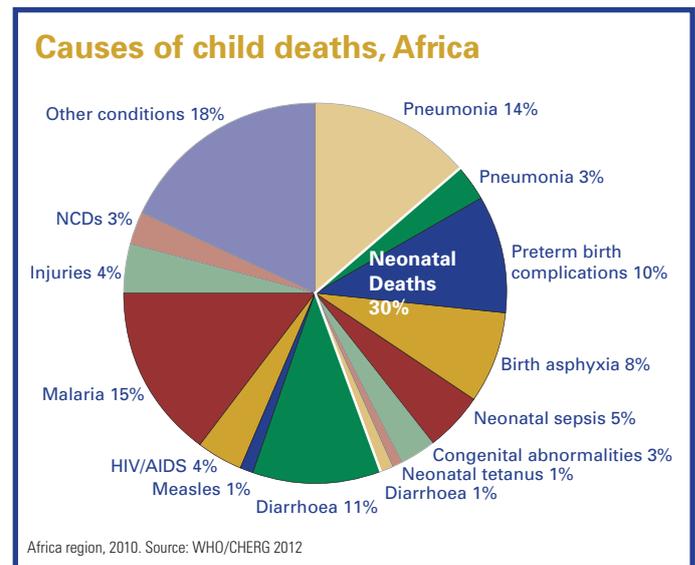


Countdown to 2015 tracks coverage levels for health interventions proven to reduce maternal, newborn and child mortality, together with data on maternal and child survival, equity of coverage, health financing, policy and health system factors, and other determinants of coverage. It calls on governments and development partners to be accountable, identifies knowledge gaps, and proposes new actions to reach Millennium Development Goals 4 and 5, to reduce child mortality and improve maternal health. Countdown's data and analysis cover the 75 countries — 47 of them in Africa — that account for over 95% of global maternal and child deaths.

Countdown to 2015 country profiles enable countries to track progress, identify key areas where more progress is needed, and compare data between countries and over time. They are an essential accountability tool for countries' efforts to achieve Millennium Development Goals 4 and 5 by the 2015 deadline.

Many deaths of women and children in Africa can be prevented.

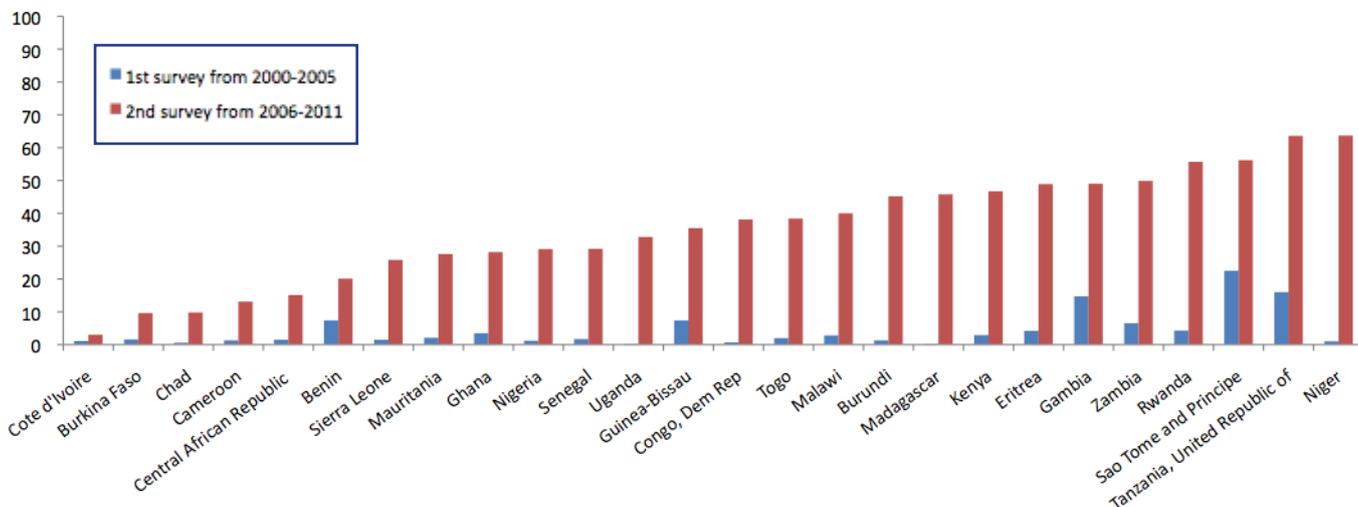
- 44% of child deaths in Africa are caused by pneumonia, diarrhea, or malaria
- >50% of maternal deaths are caused by hemorrhage or hypertension



FOCUS ON MALARIA: Malaria remains a danger for children and pregnant women in many African countries.

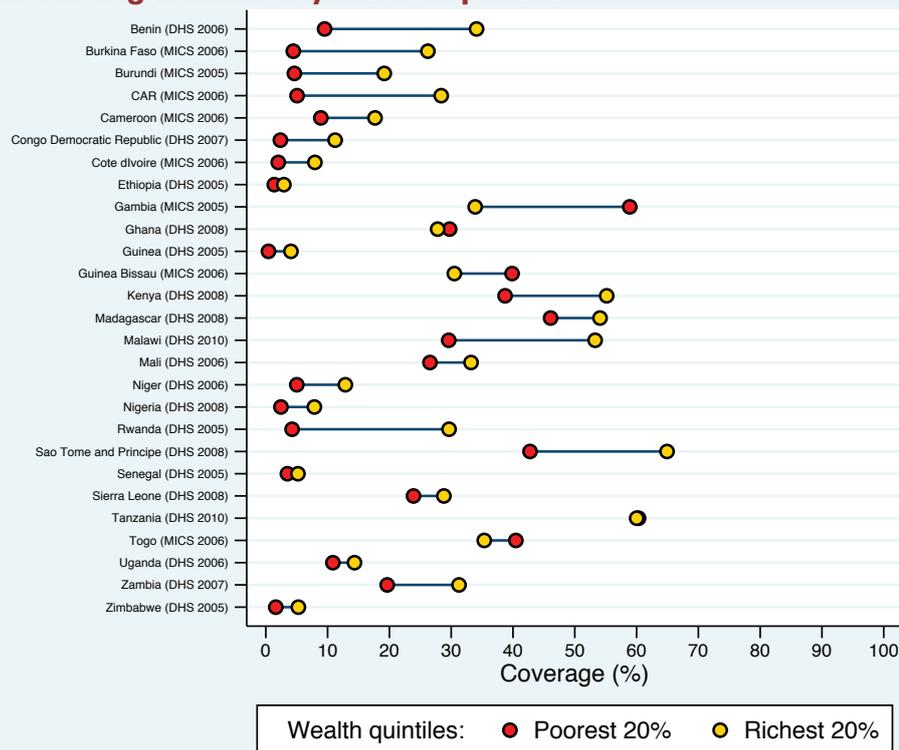
- Malaria accounts for 15% of child deaths in Africa.
- Use of insecticide-treated bednets (ITNs) has increased rapidly due to commitment and financial investment.

Trends in ITN use, children under 5 years, Countdown countries with available data (%)



- But children from wealthy families often have much better access to bednets than poor children.

Coverage of ITNs by wealth quintile



- Coverage levels for other key malaria interventions remain very low in the African Countdown countries: median 14% for Intermittent Preventive Treatment in pregnancy (IPTp) and 25% for first-line antimalarial treatment for children.
- Countries need to continue prioritizing intervention coverage for the prevention and treatment of malaria, including better integration of services into antenatal care and reaching the poorest women and children.

Country successes offer models for progress.

- Some countries in Africa, including Rwanda and Ethiopia, have increased overall coverage for 8 key interventions across the continuum of care by as much as 15% over past 5 years.* Burkina Faso, Malawi, and Niger have also made notable progress across multiple interventions.
- Countries with slower or no progress can learn lessons from these country success stories, and accelerate their efforts to save women's and children's lives.

* Based on Countdown composite coverage index measuring weighted mean of 8 key interventions: demand for family planning, satisfied, skilled attendance at birth, antenatal care (at least 1 visit), DTP3, measles, immunization, BCG tuberculosis vaccine, oral dehydration therapy for diarrhea, and care-seeking for pneumonia.



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