

Inequalities in RMNCH: Countdown Findings 2012-2013

Cesar Victora
Federal University of Pelotas, Brazil
**International Epidemiological
Association**



#CD2015

Why is equity important?

- National statistics often hide important inequalities
- Measuring inequities is important due to moral as well as practical reasons
- Equity is central to the Countdown and to accountability in general



Equity analyses help build better programs

Inequities have many dimensions

- Gender
- Wealth
- Education
- Geography (provinces, districts, etc.)
- Urban/rural residence
- Ethnic group
- Maternal age
- Etc.

Comparing rich and poor

China



Nicaragua



Gaps vary by intervention

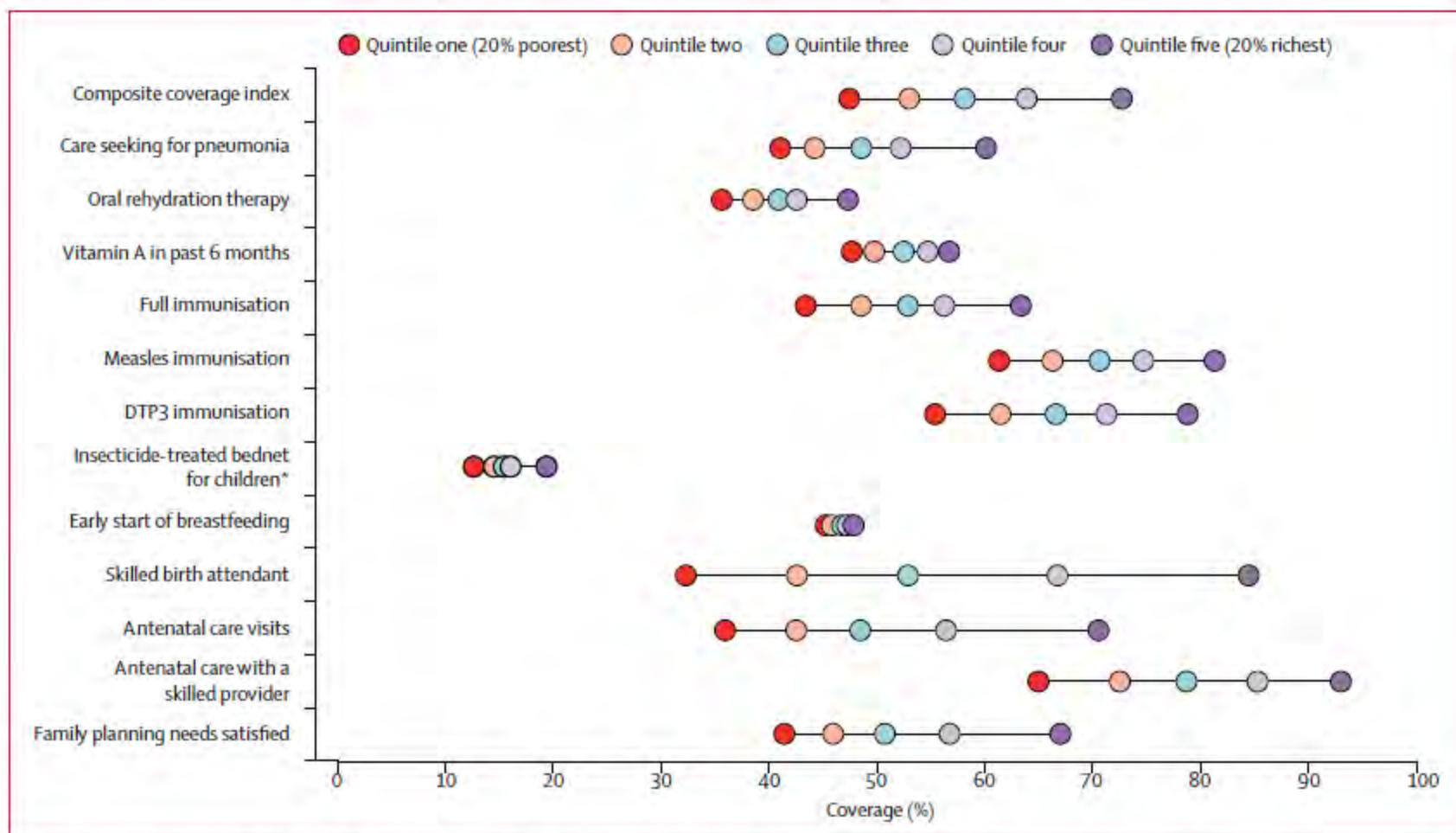
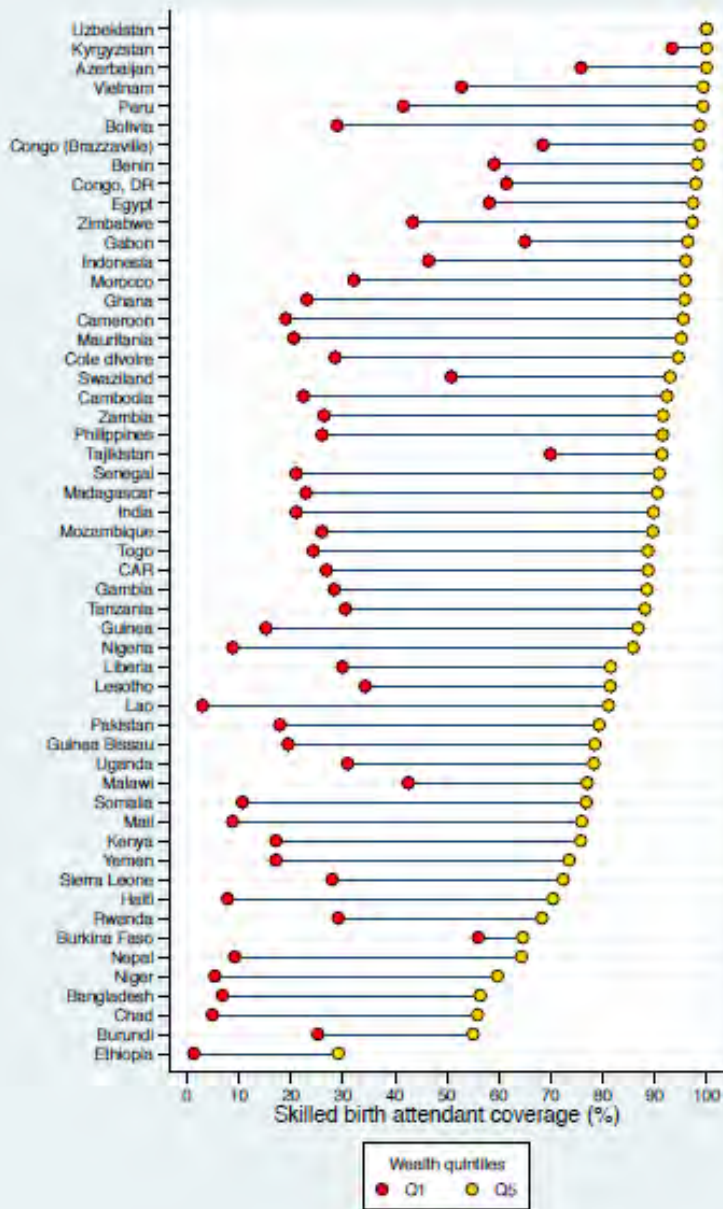
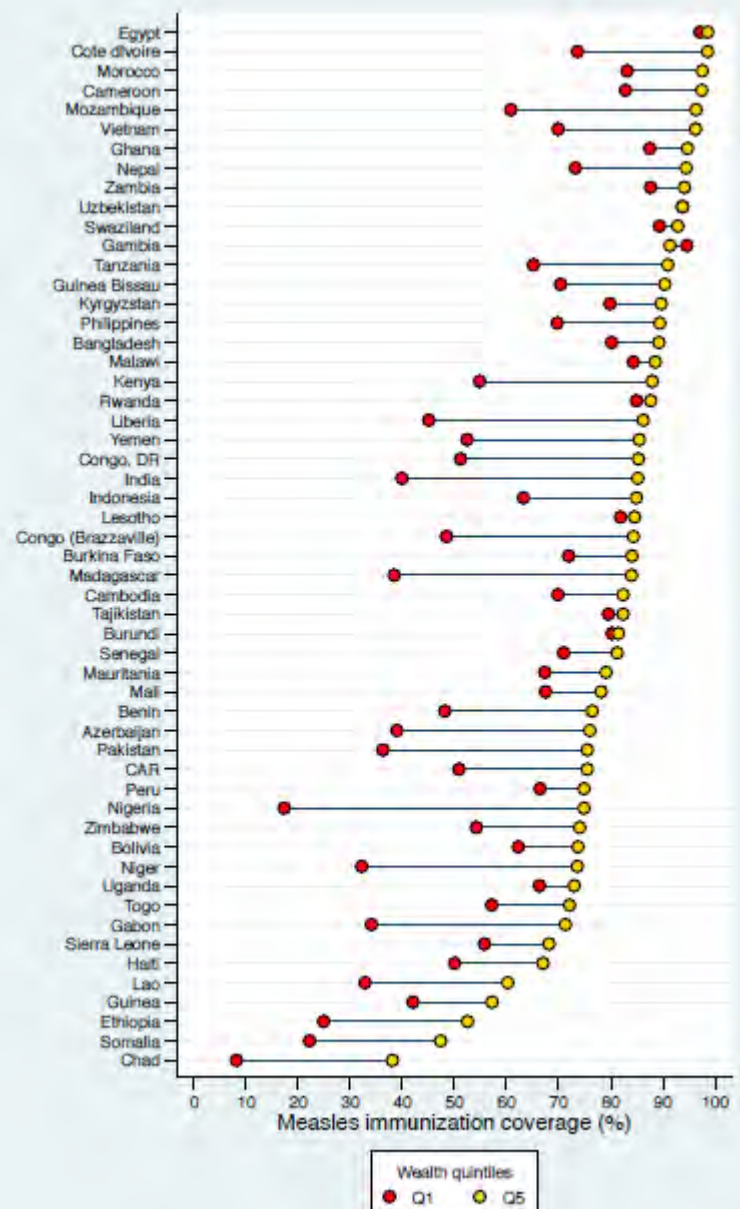


Figure 1: Mean coverage in each wealth quintile for the studied interventions in 54 Countdown countries

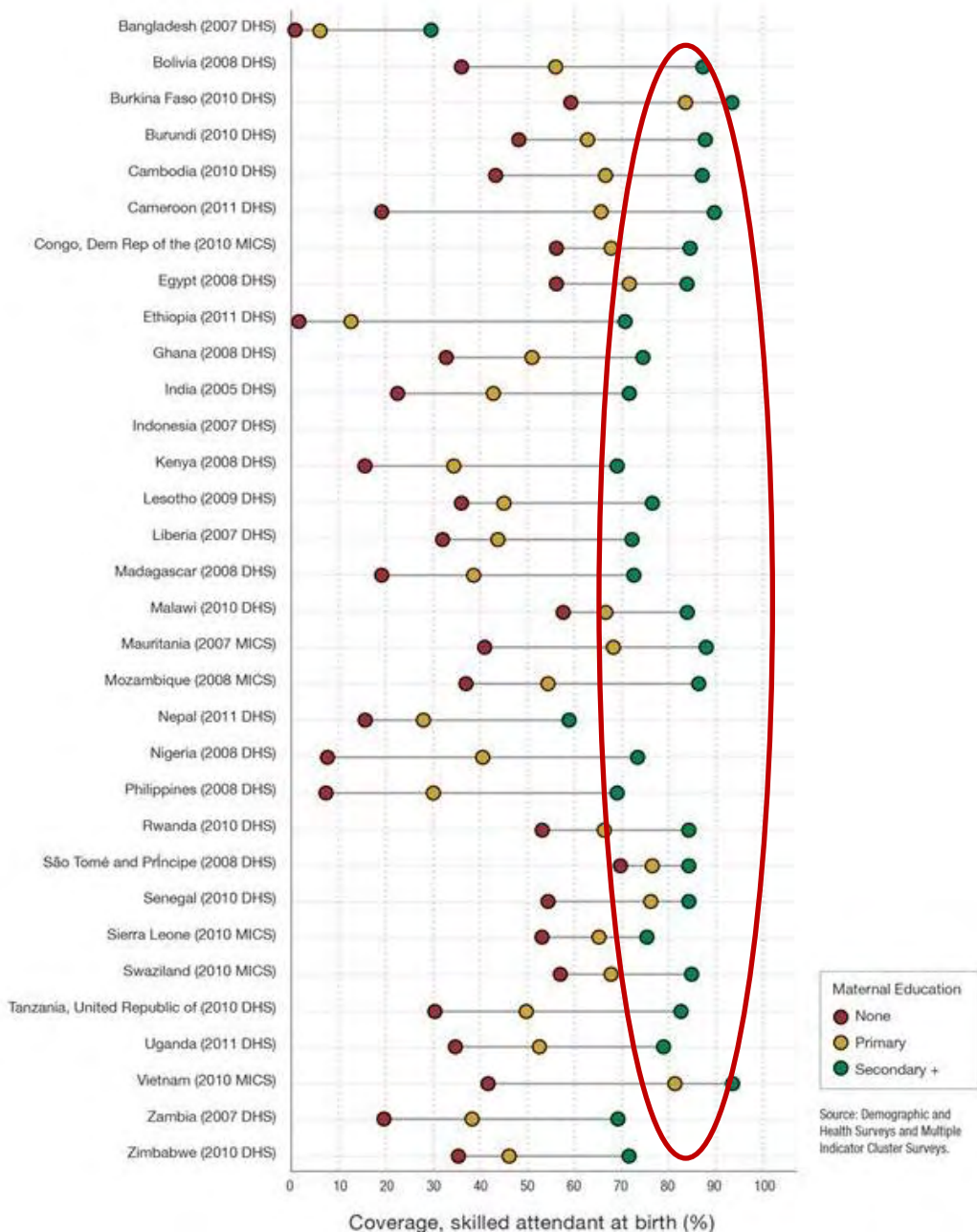


SBA



Measles vaccine

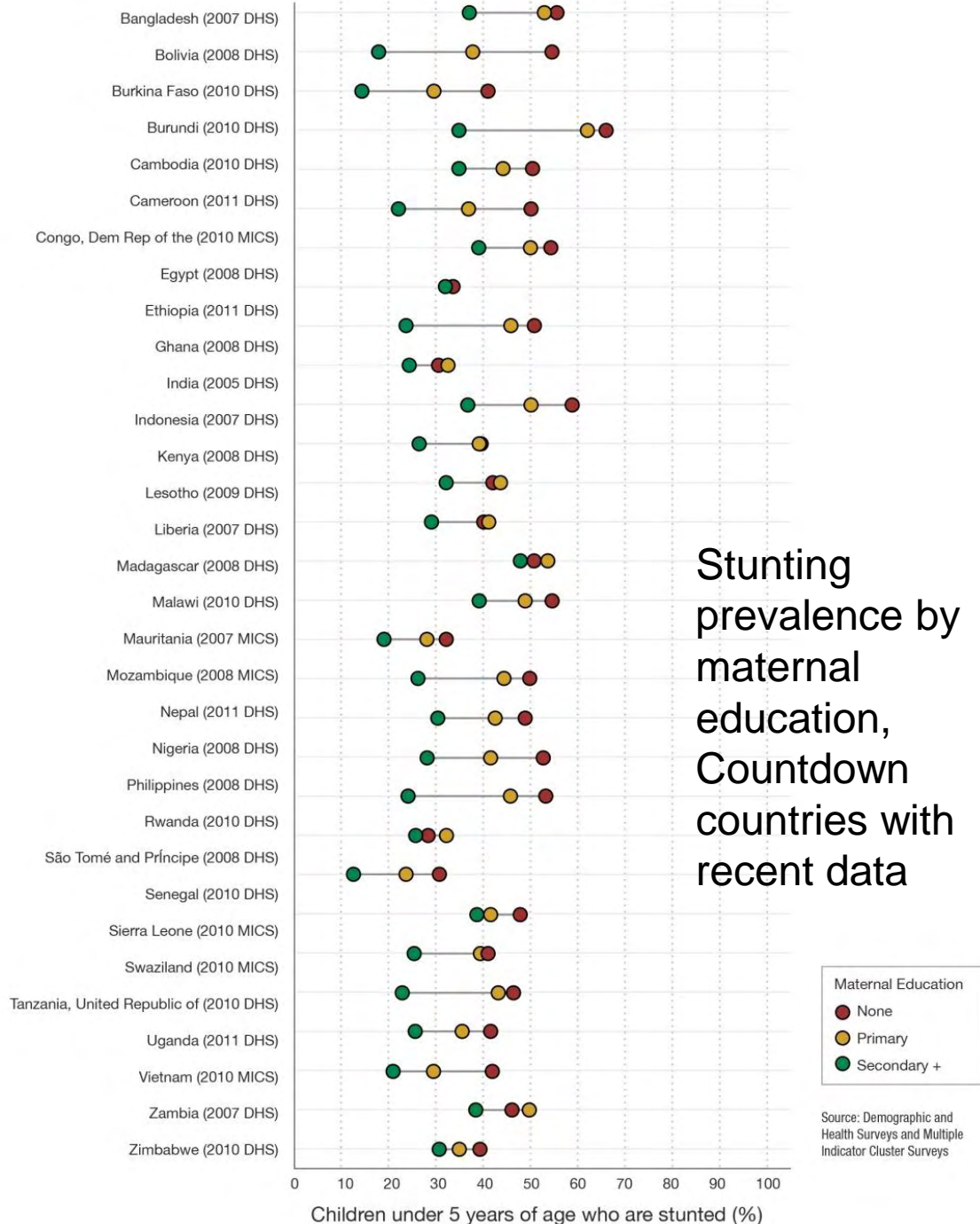
Women who are educated are much more likely to use a skilled birth attendant



What can we learn from equity analyses of intervention coverage?

- Coverage (almost) always higher for richer households
- Inequities are greatest for interventions that require a strong health system (e.g., skilled attendant at birth)
- Inequities tend to be smaller for interventions delivered at community level (e.g. vitamin A or vaccines)

Stunting is lower when mothers are educated



Which countries are making rapid progress?

How changes in coverage affect equity in maternal and child health interventions in 35 Countdown to 2015 countries: an analysis of national surveys



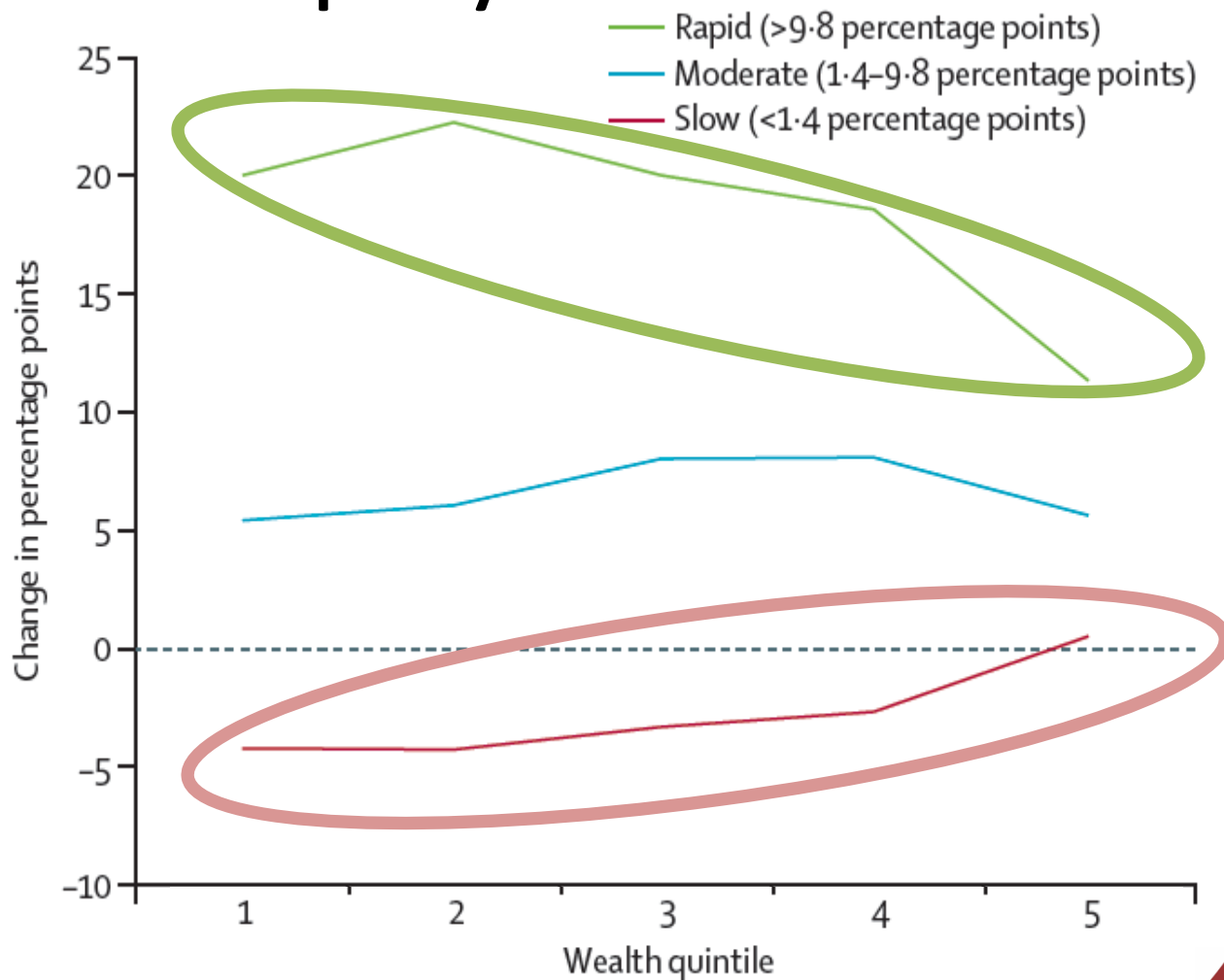
Cesar G Victora, Aluisio J D Barros, Henrik Axelson, Zulfiqar A Bhutta, Mickey Chopra, Giovanny V A França, Kate Kerber, Betty Kirkwood, Holly Newby, Carine Ronsmans, J Ties Boerma

Summary

Background Achievement of global health goals will require assessment of progress not only nationally but also for population subgroups. We aimed to assess how the magnitude of socioeconomic inequalities in health changes in relation to different rates of national progress in coverage of interventions for the health of mothers and children.

Rapid progress requires improving equity

Faster overall progress in countries where the poor made greater gains than the rich in terms of SBA coverage



Country equity profiles

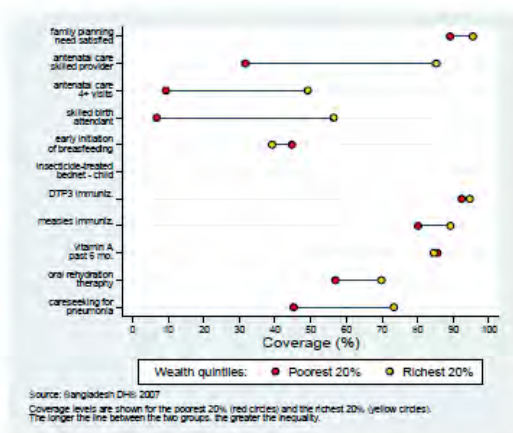


Figure 1 - Coverage levels in the poorest and richest quintiles for selected interventions along the continuum of care.

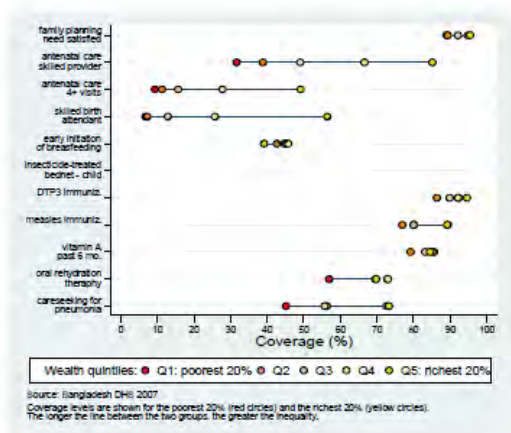


Figure 2 - Coverage levels in the five wealth quintiles for selected interventions along the continuum of care.

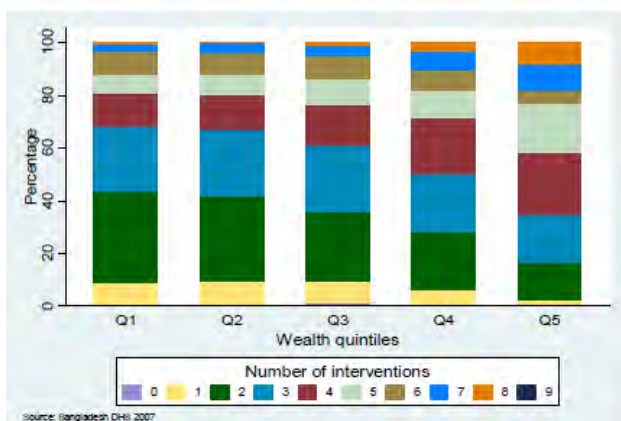


Figure 3 - Co-coverage of health interventions: percentage of children aged 1-4 years according to the number of key child-survival interventions received, by wealth quintile.

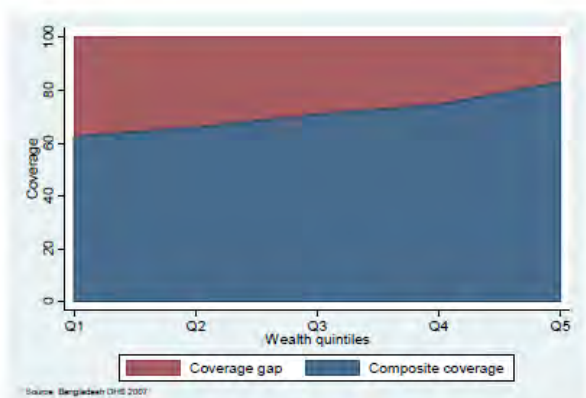
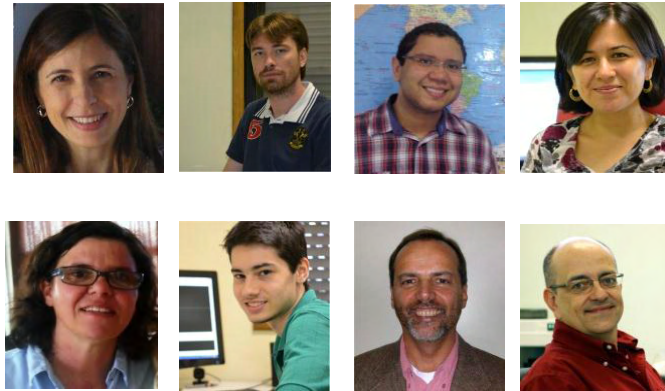


Figure 4 - Composite coverage of selected interventions and corresponding coverage gap (how much is needed to reach universal coverage), by wealth quintile.



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EQUITY
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Countdown equity analyses are powerful instruments

- Monitoring inequalities
- Identifying groups of mothers and children who need special attention
- Improving programming and targeting
- Highlighting successes
- Evaluating existing efforts



Teenage mothers in our clinic in Pelotas

Countdown to 2015

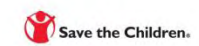
Maternal, Newborn & Child Survival



THE LANCET



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