



## Annex A

### Country profile indicators and data sources

Indicator	Data source	Global database	
<b>Demographics</b>			
Demographics	Total population	United Nations Population Division	United Nations Population Division
	Total under-five population	United Nations Population Division	United Nations Population Division
	Total births	United Nations Population Division	United Nations Population Division
	Birth registration	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
	Total fertility rate	United Nations Population Division	United Nations Population Division
	Adolescent birth rate	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Reproductive Health Surveys, other national surveys, civil registration systems and censuses	United Nations Population Division and United Nations Population Fund
Child mortality	Total deaths among children under age 5	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)
	Neonatal deaths	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)
	Neonatal mortality rate	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)
	Infant mortality rate	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)
	<b>Under-five mortality rate*</b>	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)	Inter-agency Group for Child Mortality Estimation (United Nations Children's Fund, World Health Organization, United Nations Population Division and World Bank)
	Cause of death of children under age 5	World Health Organization, Child Health Epidemiology Reference Group and United Nations Children's Fund	World Health Organization, Child Health Epidemiology Reference Group and United Nations Children's Fund
	Stillbirth rate	Cousens and others 2011	Cousens and others 2011
Maternal mortality	Total maternal deaths	United Nations Children's Fund, World Health Organization, United Nations Population Fund and World Bank	United Nations Children's Fund, World Health Organization, United Nations Population Fund and World Bank
	Lifetime risk of maternal death	United Nations Children's Fund, World Health Organization, United Nations Population Fund and World Bank	United Nations Children's Fund, World Health Organization, United Nations Population Fund and World Bank
	<b>Maternal mortality ratio (adjusted)*</b>	United Nations Children's Fund, World Health Organization, United Nations Population Fund and World Bank	World Health Organization, United Nations Children's Fund, United Nations Population Fund and World Bank
	Maternal deaths by cause (regional)	World Health Organization	World Health Organization
<b>Maternal and newborn health</b>			
Delivery care	<b>Skilled attendant at birth*</b>	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Reproductive Health Surveys and other national surveys	United Nations Children's Fund
AIDS	<b>HIV-positive pregnant women receiving antiretrovirals treatment for their own health*</b>	Country reporting through the Joint reporting process by World Health Organization, United Nations Children's Fund and Joint United Nations Programme on HIV/AIDS	Joint United Nations Programme on HIV/AIDS, United Nations Children's Fund and World Health Organization
	<b>HIV-positive pregnant women receiving antiretrovirals for prevention of mother-to-child transmission of HIV*</b>	Ministries of Health and Joint United Nations Programme on HIV/AIDS	United Nations Children's Fund
Antenatal care	Antenatal care (at least one visit)	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Reproductive Health Surveys and other national surveys	United Nations Children's Fund
	<b>Antenatal care (four or more visits)*</b>	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Reproductive Health Surveys, other national surveys Demographic and Health Surveys, Reproductive Health Survey, other national surveys	United Nations Children's Fund
Demand for family planning satisfied	<b>Demand for family planning satisfied*</b>	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Reproductive Health Surveys and other national surveys	United Nations Population Fund

Indicator		Data source	Global database
Intermittent preventive treatment of malaria during pregnancy	Intermittent preventive treatment for pregnant women	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
Caesarean section	Caesarean section rate	Demographic and Health Surveys, Reproductive Health Survey and other national surveys	United Nations Children's Fund
Neonatal tetanus protection	Neonatal tetanus protection	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund and World Health Organization
Postnatal care	<b>Postnatal visit for mother*</b>	Demographic and Health Surveys	Special data analysis by Saving Newborn Lives
Postnatal care	<b>Postnatal visit for newborn*</b>	Demographic and Health Surveys	Special data analysis by Saving Newborn Lives
Body mass index	Women with low body mass index	Demographic and Health Surveys	Demographic and Health Surveys, STATcompiler (accessed March 2012)
<b>Equity</b>			
	<b>Demand for family planning satisfied*</b>	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Antenatal care (at least one visit)	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	<b>Antenatal care (four or more visits)*</b>	Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	<b>Skilled attendant at birth</b>	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Early initiation of breastfeeding	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Children under age 5 sleeping under insecticide-treated nets	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	<b>Three doses of combined diphtheria/tetanus/pertussis vaccine immunization coverage (DTP3)*</b>	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Measles immunization coverage	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Vitamin A supplementation (two doses)	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Oral rehydration therapy and continued feeding	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
	Careseeking for pneumonia	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	Special data analysis by Federal University of Pelotas, Brazil
<b>Child health</b>			
Immunization	Measles immunization coverage	Routine reporting, Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund and World Health Organization
	<b>Three doses of combined diphtheria/tetanus/pertussis vaccine immunization coverage (DTP3)*</b>	Routine reporting, Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund and World Health Organization
	Three doses of <i>Haemophilus influenzae</i> type B (Hib3) immunization coverage	Routine reporting, Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund and World Health Organization
Pneumonia	Careseeking for pneumonia	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
	<b>Antibiotic treatment for pneumonia*</b>	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
Diarrhoeal diseases	Oral rehydration therapy and continued feeding	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
	Oral rehydration salts	Multiple Indicator Cluster Surveys and Demographic and Health Surveys	United Nations Children's Fund
Malaria	Antimalarial treatment, first line	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and Malaria Indicator Surveys	United Nations Children's Fund
	Children under age 5 sleeping under insecticide-treated nets	Multiple Indicator Cluster Surveys, Demographic and Health Surveys, Malaria Indicator Surveys	United Nations Children's Fund
<b>Nutrition</b>			
Anthropometry	Underweight prevalence	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund and World Health Organization
	<b>Stunting prevalence*</b>	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund and World Health Organization
	Wasting prevalence	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund and World Health Organization
Infant feeding	Early initiation of breastfeeding	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund

Indicator		Data source	Global database
	<b>Exclusive breastfeeding rate (for first six months of life)*</b>	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund
	Introduction of solid, semisolid and soft foods	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund
Low birthweight	Low birthweight incidence	Multiple Indicator Cluster Surveys, Demographic and Health Surveys and other national surveys	United Nations Children's Fund
Micronutrient supplementation	Vitamin A supplementation (two doses)	National Immunization Days Reporting, Demographic and Health Surveys, Multiple Indicator Cluster Survey and routine reporting	United Nations Children's Fund
<b>Water and sanitation</b>			
Water	Use of improved drinking water sources	United Nations Children's Fund and World Health Organization	United Nations Children's Fund and World Health Organization
Sanitation	Use of improved sanitation facilities	United Nations Children's Fund and World Health Organization	United Nations Children's Fund and World Health Organization
<b>Policies, systems and financing</b>			
Policies	Maternity protection in accordance with Convention 183	International Labour Organization	Database of Conditions of Work and Employment Laws
	Specific notification of maternal deaths	World Health Organization	World Health Organization Department of Maternal, Newborn, Child and Adolescent Health special data compilation
	Midwifery personnel authorized to administer core set of life-saving interventions	World Health Organization	World Health Organization Department of Maternal, Newborn, Child and Adolescent Health special data compilation
	International Code of Marketing of Breastmilk Substitutes	World Health Organization	World Health Organization and United Nations Children's Fund special data compilation
	Postnatal home visits in first week of life	World Health Organization	World Health Organization Department of Maternal, Newborn, Child and Adolescent Health special data compilation
	Community treatment of pneumonia with antibiotics	World Health Organization and United Nations Children's Fund	World Health Organization and United Nations Children's Fund special data compilation
	Low osmolarity oral rehydration salts and zinc for management of diarrhoea	World Health Organization and United Nations Children's Fund	World Health Organization and United Nations Children's Fund special data compilation
	Rotavirus vaccine	World Health Organization	World Health Organization Department of Immunization, Vaccines and Biologicals database on new vaccines introductions as of February 2012
	Pneumococcal vaccine	World Health Organization	World Health Organization Department of Immunization, Vaccines and Biologicals database on new vaccines introductions as of February 2012
Systems and financing	Costed national implementation plan for maternal, newborn and child health available	World Health Organization	World Health Organization Department of Maternal, Newborn, Child and Adolescent Health special data compilation
	Density of doctors, nurses and midwives	World Health Organization	Global Health Atlas ( <a href="http://apps.who.int/globalatlas/">http://apps.who.int/globalatlas/</a> , accessed 2 March 2012)
	National availability of emergency obstetric care services	Averting Maternal Death and Disability, United Nations Children's Fund and United Nations Population Fund	Averting Maternal Death and Disability, United Nations Children's Fund and United Nations Population Fund special data compilation
	Per capita total expenditure on health	World Health Organization	Global Health Expenditure Database ( <a href="http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1">http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1</a> , accessed 2 March 2012)
	General government expenditure on health as percentage of total government expenditure	World Health Organization	Global Health Expenditure Database ( <a href="http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1">http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1</a> , accessed 2 March 2012)
	Out-of-pocket expenditure as a share of total expenditure on health	World Health Organization	Global Health Expenditure Database ( <a href="http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1">http://apps.who.int/nha/database/PreDataExplorer.aspx?d=1</a> , accessed 2 March 2012)
	Official development assistance to child health per child	Organisation for Economic Co-operation and Development Development Assistance Committee	London School of Health and Tropical Medicine
	Official development assistance to maternal and neonatal health per live birth	Organisation for Economic Co-operation and Development Development Assistance Committee	London School of Health and Tropical Medicine

\* Indicators in bold are those recommended by the Commission on Information and Accountability for Women's and Children's Health. The Commission indicator for under-five mortality includes the proportion of neonatal deaths, also tracked by *Countdown*.

## Annex B

### Definitions of *Countdown* indicators

Intervention	Indicator definition	Numerator	Denominator
<b>Maternal and newborn health</b>			
<b>Skilled attendant at birth*</b>	Percentage of live births attended by skilled health personnel	Number of live births to women ages 15–49 years in the X years prior to the survey attended during delivery by skilled health personnel (doctor, nurse, midwife or auxiliary midwife)	Total number of live births to women ages 15–49 in the X years prior to the survey
<b>Treatment of HIV*</b>	Percentage of HIV-positive pregnant women who received antiretroviral therapy for their own health	Number of HIV-positive pregnant women attending services for prevention of mother-to-child transmission in the past 12 months who are on lifelong antiretroviral therapy	Estimated number of HIV-positive pregnant women in the past 12 months who were eligible for antiretroviral therapy <sup>a</sup>
<b>Prevention of mother-to-child transmission of HIV*</b>	Percentage of HIV-positive pregnant women who received antiretrovirals to reduce the risk of mother-to-child transmission	Number of HIV-infected pregnant women who received antiretrovirals in the last 12 months to reduce mother-to-child transmission	Estimated unrounded number of HIV-positive pregnant women <sup>a</sup>
Antenatal care (at least one visit)	Percentage of women attended at least once during pregnancy by skilled health personnel for reasons related to the pregnancy	Number of women attended at least once during pregnancy by skilled health personnel (doctor, nurse, midwife or auxiliary midwife) for reasons related to the pregnancy in the X years prior to the survey	Total number of women who had a live birth occurring in the same period
<b>Antenatal care (four or more visits)*</b>	Percentage of women attended at least four times during pregnancy by any provider (skilled or unskilled) for reasons related to the pregnancy	Number of women attended at least four times during pregnancy by any provider (skilled or unskilled) for reasons related to the pregnancy in the X years prior to the survey	Total number of women who had a live birth occurring in the same period
<b>Demand for family planning satisfied*</b>	Percentage of women ages 15–49, either married or in union, who have their need for family planning satisfied	Women who are married or in union and currently using any method of contraception	Women who are married and in union and who are currently using any method of contraception or who are fecund, not using any method of contraception but report wanting to space their next birth or stop childbearing altogether
Intermittent preventive treatment for malaria during pregnancy	Percentage of women who received intermittent preventive treatment for malaria during their last pregnancy	Number of women at risk for malaria who received two or more doses of a sulfadoxine-pyrimethamine (Fansidar <sup>TM</sup> ) to prevent malaria during their last pregnancy that led to a live birth	Total number of women surveyed who delivered a live newborn within the last two years
Caesarean section rate	Percentage of live births delivered by caesarean section	Number of live births to women ages 15–49 in the X years prior to the survey delivered by caesarean section	Total number of live births to women ages 15–49 in the X years prior to the survey
Neonatal tetanus protection	Percentage of newborns protected against tetanus	Number of mothers with a live birth in the year prior to the survey who received two doses of tetanus toxoid vaccine within the appropriate interval prior to the infant's birth	Total number of women ages 15–49 with a live birth in the year prior to the survey
<b>Postnatal care for mothers*<sup>b</sup></b>	Percentage of mothers who received postnatal care within two days of childbirth	Number of women who received postnatal care within two days of childbirth (regardless of place of delivery)	Total number of women ages 15–49 with a last live birth in the X years prior to the survey (regardless of place of delivery)
<b>Postnatal care for babies*</b>	Percentage of babies who received postnatal care within two days of childbirth	Number of babies who received postnatal care within two days of birth (regardless of place of delivery)	Total number of last-born babies in the X years prior to the survey (regardless of place of delivery)
Low body mass index	Percentage of women ages 15–49 with a body mass index of less than 18.5 kg/m <sup>2</sup>	Number of women ages 15–49 with a body mass index of less than 18.5 kg/m <sup>2</sup>	Total number of women ages 15–49
<b>Child health</b>			
Measles immunization coverage	Percentage of infants immunized with measles containing vaccine	Number of children ages 12–23 months who are immunized against measles	Total number of children ages 12–23 months surveyed
<b>Three doses of combined diphtheria/tetanus/pertussis vaccine (DTP3)*</b>	Percentage of infants who received three doses of diphtheria/tetanus/pertussis vaccine (DTP3)	Number of children ages 12–23 months receiving three doses of diphtheria/tetanus/pertussis vaccine (DTP3)	Total number of children ages 12–23 months surveyed
Three doses of <i>Haemophilus influenzae</i> type B (Hib3) immunization coverage	Percentage of infants who received three doses of <i>Haemophilus influenzae</i> type B (Hib3) vaccine	Number of children ages 12–23 months receiving three doses of <i>Haemophilus influenzae</i> type B (Hib3) vaccine	Total number of children ages 12–23 months surveyed
Careseeking for pneumonia	Percentage of children ages 0–59 months with suspected pneumonia taken to an appropriate health provider	Number of children ages 0–59 months with suspected pneumonia in the two weeks prior to the survey who were taken to an appropriate health provider	Total number of children ages 0–59 months with suspected pneumonia in the two weeks prior to the survey
<b>Antibiotic treatment for pneumonia*</b>	Percentage of children ages 0–59 months with suspected pneumonia receiving antibiotics	Number of children ages 0–59 months with suspected pneumonia in the two weeks prior to the survey receiving antibiotics	Total number of children ages 0–59 months with suspected pneumonia in the two weeks prior to the survey

Intervention	Indicator definition	Numerator	Denominator
Oral rehydration therapy and continued feeding	Percentage of children ages 0–59 months with diarrhoea receiving oral rehydration therapy and continued feeding	Number of children ages 0–59 months with diarrhoea in the two weeks prior to the survey receiving oral rehydration therapy (oral rehydration solution or recommended homemade fluids or increased fluids) and continued feeding	Total number of children ages 0–59 months with diarrhoea in the two weeks prior to the survey
Oral rehydration salts	Percentage of children ages 0–59 months with diarrhoea receiving oral rehydration salts	Number of children ages 0–59 months with diarrhoea in the two weeks prior to the survey receiving oral rehydration salts	Total number of children ages 0–59 months with diarrhoea in the two weeks prior to the survey
Antimalarial treatment	Percentage of children ages 0–59 months receiving first line antimalarial treatment	Number of children ages 0–59 months who had a fever in the previous two weeks who received first-line treatment according to national policy	Total number of children ages 0–59 months who had a fever in the previous two weeks who received any antimalarial drugs
Insecticide-treated net use	Percentage of children ages 0–59 months sleeping under an insecticide-treated mosquito net	Number of children ages 0–59 months sleeping under an insecticide-treated net the night before the survey	Total number of children ages 0–59 months surveyed
<b>Nutrition</b>			
Early initiation of breastfeeding	Percentage of newborns put to the breast within one hour of birth	Number of women with a live birth in the X years prior to the survey who put the newborn infant to the breast within one hour of birth	Total number of women with a live birth in the X years prior to the surveyed
<b>Exclusive breastfeeding (for first six months of life)*</b>	Percentage of infants ages 0–5 months who are exclusively breastfed	Number of infants ages 0–5 months who are exclusively breastfed	Total number of infants ages 0–5 months surveyed
Introduction of solid, semisolid or soft foods	Percentage of infants ages 6–8 months who receive solid, semisolid or soft foods	Number of infants ages 6–8 months who received solid, semisolid or soft foods during the previous day	Total number of infants ages 6–8 months surveyed
Vitamin A supplementation (two doses)	Percentage of children ages 6–59 months who received two doses of vitamin A during the calendar year	Number of children ages 6–59 months who received two doses of vitamin A during the calendar year	Total number of children ages 6–59 months
<b>Water and sanitation</b>			
Use of an improved drinking water source	Percentage of the population using an improved drinking water source (piped on premises or other improved drinking water source)	Number of household members using improved and drinking water source (including piped on premises, public standpipe, borehole, protected dug well, protected spring and rainwater collection)	Total number of household members
Use of improved sanitation facilities	Percentage of the population using improved sanitation facilities	Number of household members using improved sanitation facilities (including connection to a public sewer, connection to a septic system, pour-flush latrine, simple pit latrine or a ventilated improved pit latrine)	Total number of household members

\* Indicators in bold are those recommended by the Commission on Information and Accountability for Women's and Children's Health.

a. More details on the HIV estimates methodology can be found at [www.unaids.org](http://www.unaids.org).

b. As used for postnatal care in the graph on coverage along the continuum of care on page 1 of each country profile.

## Annex C

### Definitions of policy and health systems indicators

Indicator	Definition	Criteria for ranking
Maternity protection in accordance with ILO Convention 183	International Labour Organization Convention 183 ratified by the country or national legislation in compliance with three key provisions of International Labour Organization Convention 183 (length of maternity leave and level and source of funding of maternity benefits, namely 14 weeks paid at 66% of previous earnings by social security or general revenue).	<p>Yes: International Labour Organization Convention 183 ratified (maternity leave of at least 14 weeks with cash benefits of previous earnings paid by social security or public funds).</p> <p>Partial: International Labour Organization Convention 183 not ratified but previous maternity convention ratified (maternity leave of at least 12 weeks with cash benefits of previous earnings paid by social security or public funds).</p> <p>No: no ratification of any maternal protection convention.</p>
Notification of maternal deaths	National policy adopted requiring health professionals to notify any maternal death to a responsible national body.	<p>Yes: national policy adopted and implemented.</p> <p>Partial: national policy adopted but no systematic implementation.</p> <p>No: no national policy adopted.</p>
Midwifery personnel authorized to deliver basic emergency obstetric and newborn care	<p>National policy adopted authorizing midwives to deliver:</p> <ul style="list-style-type: none"> <li>• parental antibiotics</li> <li>• parenteral oxytocics</li> <li>• parental anticonvulsants</li> <li>• manual removal of placenta</li> <li>• removal of retained products of conception,</li> <li>• assisted vaginal delivery and newborn resuscitation.</li> </ul>	<p>Criteria for ranking (2010):</p> <p>Yes: midwives authorized for all tasks.</p> <p>Partial: midwives authorized for some tasks.</p> <p>No: midwives not authorized for any of these tasks.</p>
International Code of Marketing of Breastmilk Substitutes	National policy adopted on all provisions stipulated in International Code of Marketing of Breastmilk Substitutes.	<p>Yes: all provisions stipulated in International Code of Marketing of Breastmilk Substitutes adopted in legislation.</p> <p>Partial: voluntary agreements or some provisions stipulated in International Code of Marketing of Breastmilk Substitutes adopted in legislation.</p> <p>No: no legislation and no voluntary agreements adopted in relation to the International Code of Marketing of Breastmilk Substitutes.</p>
Postnatal home visits in the first week of life	National policy recommending home visits to mother and newborn in the first week after childbirth by a trained provider adopted and implemented.	<p>Yes: national policy or guidelines recommending postnatal home visits adopted and implemented.</p> <p>Partial: national policy or guidelines recommending postnatal home visits adopted but no implementation.</p> <p>No: no national policy or guidelines on postnatal home visits adopted.</p>
Community-based management of pneumonia	National policy or guidelines authorizing case management of pneumonia in the community by a trained provider adopted and implemented.	<p>Yes: national policy or guidelines adopted on the identification and treatment of pneumonia by trained providers in the community and implementation commenced.</p> <p>Partial: national policy or guidelines adopted on the identification and treatment of pneumonia by trained providers in the community but no implementation or no national policy or guidelines adopted but implementation in selected areas.</p> <p>No: no national policy or guidelines on the identification and treatment of pneumonia by trained providers and no implementation.</p>
Low-osmolarity oral rehydration salts and zinc for diarrhoea	National policy on management of diarrhoea with low-osmolarity oral rehydration salts and zinc adopted and implemented.	<p>Yes: national policy or guidelines adopted on use of low-osmolarity oral rehydration salts and zinc for management of diarrhoea and implementation commenced.</p> <p>Partial: national policy or guidelines adopted on use of low-osmolarity oral rehydration salts and zinc for management of diarrhoea but no implementation; or no national policy or guidelines adopted but implementation in selected areas; or national policy or guidelines adopted or implementation commenced for either low-osmolarity oral rehydration salts or zinc use, but not for both.</p> <p>No: no national policy or guidelines adopted on use of low-osmolarity oral rehydration salts and zinc for management of diarrhoea and no implementation</p>

Indicator	Definition	Criteria for ranking
Rotavirus vaccine policy	National policy or guidelines on rotavirus vaccine adopted and implemented.	Yes: the rotavirus vaccine has been introduced in the national immunization programme. Partial: the policy to introduce the vaccine in the national immunization programme is agreed upon. No: the rotavirus vaccine has not been introduced in the national immunization programme.
Pneumococcal vaccine	National policy or guidelines on pneumococcal vaccine adopted and implemented.	Yes: the pneumococcal vaccine has been introduced in the national immunization programme. Partial: the policy to introduce the vaccine in the national immunization programme is agreed upon. No: the pneumococcal vaccine has not been introduced in the national immunization programme.
Costed implementation plan for maternal, newborn and child health	National plan for scaling-up maternal, newborn and child health interventions available and costed.	Yes: costed plan or plans to scale up maternal, newborn and child health interventions available at the national level. Partial: costed plan available for either maternal and newborn health or child health. No: no costed implementation plan for maternal, newborn and child health available.
Density of health workers	Proportion of physicians, nurses and midwives who are available per 10,000 population.	Percentage
National availability of emergency obstetric services	Number of emergency obstetric care facilities per 20,000 births: total number of basic and comprehensive emergency obstetric care facilities relative to the annual number of births in a country	Percentage Discuss Benchmark interpretation: 1 emergency obstetric care facilities per 500,000 population Emergency obstetric care facilities per equivalent of 5 basic and 1 comprehensive facilities
Per capita total expenditure on health		Numerical
General government expenditure on health as a share of total government expenditure on health		Numerical
Out-of-pocket expenditure as a share of total expenditure on health		Numerical

The policy indicators compiled by the *Countdown* health systems and policies technical working group are the result of a biannual survey implemented by the World Health Organization's Department of Maternal, Newborn, Child and Adolescent Health. Indicators are developed as a composite measure summarizing the presence and implementation of a given policy. If a policy is endorsed and implemented, the value of the indicator is marked as "Yes". If the policy is not endorsed, the value of the indicator is marked as "No". For policies that are endorsed but are lacking implementation the indicator is marked as "Partial". Respondents to the survey are Ministry of Health officials responsible for maternal, newborn, child and adolescent health in their country. The information reported is independently validated by World Health Organization country office and at least one other UN organization that operates in the country. Data analysis and compilation are done by the World Health Organization. Other special surveys using similar methodologies and questions, such as United Nations Children's Fund surveys on the case management of child diseases at the community level, are used to update policy indicators that may change faster during the two years survey gap. Data reported are collected by the 2011 World Health Organization policy survey.

The *Countdown* Financing Working Group analysed 2009 official development assistance disbursements in the Organisation for Economic Co-operation and Development Development Assistance Committee Creditor Reporting System Aid Activities database using previously implemented methods (Powell-Jackson and others 2006). Data were downloaded on 25 November 2011 and included 222,661 records of aid disbursement. All records were reviewed to correct errors in the classification of health expenditures within the database. Records were manually coded against a framework defining maternal, newborn and child health activities such that, broadly, maternal and newborn health activities were defined as those that aim to restore, improve or maintain the health of women and their newborn during pregnancy, childbirth and the postnatal period, and child health activities were defined as those that aim to restore, improve or maintain the health of children between ages 1 month and 5 years. Based on these codes, each record was subsequently given an allocation factor between 0% to 100% representing the proportion of expenditures spent on maternal, newborn and child health. Allocation factors were established following a literature review as well as current financial (for example, general government expenditure on health as a percentage of total government expenditure), epidemiological (for example, percentage of a population group with HIV) and population estimates (for example, percentage of population under age 5). Official development assistance from all 22 bilaterals, six multilaterals and two global health initiatives to the *Countdown* priority countries were analysed and reported in two indicators: official development assistance to child health per child and official development assistance to maternal and neonatal health per live birth.

## Annex D

### Essential interventions for reproductive, maternal, newborn and child health

Adolescence and pre-pregnancy	Pregnancy (antenatal)	Childbirth
<ul style="list-style-type: none"> <li>Family planning (advice, hormonal and barrier methods, and surgical methods)</li> <li>Prevention and management of sexually transmitted infections and HIV</li> <li>Folic acid fortification and supplementation to prevent neural tube defects</li> </ul>	<ul style="list-style-type: none"> <li>Iron and folic acid supplementation</li> <li>Tetanus vaccination</li> <li>Prevention and management of malaria with insecticide-treated nets and antimalarial medicines</li> <li>Prevention and management of sexually transmitted infections and HIV, including with antiretroviral medicines</li> <li>Calcium supplementation to prevent hypertension (high blood pressure)</li> <li>Interventions for cessation of smoking</li> <li>Screening for and treatment of syphilis</li> <li>Low-dose aspirin to prevent pre-eclampsia</li> <li>Antihypertensive drugs (to treat high blood pressure)</li> <li>Magnesium sulphate for eclampsia</li> <li>Antibiotics for preterm prelabour rupture of membranes</li> <li>Corticosteroids to prevent respiratory distress syndrome in preterm babies</li> <li>Safe abortion</li> <li>Postabortion care</li> <li>Reduction of malpresentation at term with External Cephalic Version</li> <li>Induction of labour to manage prelabour rupture of membranes at term (initiate labour)</li> </ul>	<ul style="list-style-type: none"> <li>Prophylactic uterotonics to prevent postpartum haemorrhage (excessive bleeding after birth)</li> <li>Manage postpartum haemorrhage using uterine massage and uterotonics</li> <li>Social support during childbirth</li> <li>Active management of third stage of labour (to deliver the placenta) to prevent postpartum haemorrhage (as above plus controlled cord traction)</li> <li>Management of postpartum haemorrhage (as above plus manual removal of placenta)</li> <li>Screen and manage HIV (if not already tested)</li> <li>Caesarean section for maternal or foetal indication (to save the life of the mother or baby)</li> <li>Prophylactic antibiotic for caesarean section</li> <li>Induction of labour for prolonged pregnancy (initiate labour)</li> <li>Management of postpartum haemorrhage (as above plus surgical procedures)</li> </ul>
Postnatal (mother)	Postnatal (newborn)	Infancy and childhood
<ul style="list-style-type: none"> <li>Family planning advice and contraceptives</li> <li>Nutrition counselling</li> <li>Screening for and initiation or continuation of antiretroviral therapy for HIV</li> <li>Treatment of maternal anaemia</li> <li>Detection and management of postpartum sepsis (serious infections after birth)</li> </ul>	<ul style="list-style-type: none"> <li>Immediate thermal care (to keep the baby warm)</li> <li>Initiation of early breastfeeding (within the first hour)</li> <li>Hygienic cord and skin care</li> <li>Neonatal resuscitation with bag and mask (by professional health workers for babies who do not breathe at birth)</li> <li>Kangaroo mother care for preterm (premature) and babies weighing less than 2,000 grams</li> <li>Extra support for feeding small and preterm babies</li> <li>Management of newborns with jaundice ("yellow" newborns)</li> <li>Prophylactic antiretroviral therapy for babies exposed to HIV</li> <li>Presumptive antibiotic therapy for newborns at risk of bacterial infection</li> <li>Surfactant (respiratory medication) to prevent respiratory distress syndrome in preterm babies</li> <li>Continuous positive airway pressure to manage babies with respiratory distress syndrome</li> <li>Case management of neonatal sepsis, meningitis and pneumonia</li> </ul>	<ul style="list-style-type: none"> <li>Exclusive breastfeeding for six months</li> <li>Continued breastfeeding and complementary feeding from six months</li> <li>Prevention and case management of childhood malaria</li> <li>Vitamin A supplementation from six months of age</li> <li>Routine immunization plus H. influenzae, meningococcal, pneumococcal and rotavirus vaccines</li> <li>Management of severe acute malnutrition</li> <li>Case management of childhood pneumonia</li> <li>Case management of diarrhoea</li> <li>Comprehensive care of children infected with or exposed to HIV</li> <li>Case management of meningitis</li> </ul>

*Note:* Policy and regulations are crucial to the implementation of any interventions. The recommended list of interventions should be reviewed in light of the existing national policy and regulatory environment. All interventions should comply with the laws and policies of the country. When required, these laws and policies may be reviewed and updated to ensure that priority life-saving interventions are delivered.

*Source:* PMNCH, WHO and Aga Khan University 2011.

## Annex E

### Countdown priority countries considered to be malaria endemic

Table E1 organizes the *Countdown* countries according to the percentage of the population at risk of *Plasmodium falciparum* transmission. Only countries with at least 75% of the population at risk of *Plasmodium falciparum* transmission were included in the analyses for the malaria indicators in this report.

TABLE E1

#### *Plasmodium falciparum* transmission risk in *Countdown* countries

Countries with at least 75% of the population at risk (N=50)	Countries with less than 75% of the population at risk (N=25)	
Afghanistan	Malawi	Azerbaijan
Angola	Mali	Bangladesh
Benin	Mauritania	Botswana
Bolivia	Mozambique	Brazil
Burkina Faso	Nepal	Burundi
Cameroon	Niger	Cambodia
Central African Republic	Nigeria	China
Chad	Pakistan	Djibouti
Comoros	Papua New Guinea	Egypt
Congo	Philippines	Ethiopia
Congo, Dem. Rep. of the	Rwanda	Indonesia
Cote d'Ivoire	Sao Tome and Principe	Iraq
Equatorial Guinea	Senegal	Korea, Dem Peoples Republic of
Eritrea	Sierra Leone	Kyrgyzstan
Gabon	Solomon Islands	Lao, People's Democratic Republic
Gambia	Somalia	Lesotho
Ghana	Sudan	Mexico
Guatemala	South Sudan	Morocco
Guinea	Tanzania, United Republic	Myanmar
Guinea-Bissau	Togo	Peru
Haiti	Uganda	South Africa
India	Viet Nam	Swaziland
Kenya	Yemen	Tajikistan
Liberia	Zambia	Turkmenistan
Madagascar		Uzbekistan
		Zimbabwe

Source: World Health Organization Global Malaria Programme ([www.who.int/malaria/about\\_us/](http://www.who.int/malaria/about_us/)).

## **Annex F**

### **Details on estimates from the Inter-agency Group for Child Mortality Estimation used in the Countdown report**

#### **Child mortality estimates**

The child mortality estimates in this report (infant mortality rate, under-five mortality rate and under-five deaths) are based on the work of the Inter-agency Group for Child Mortality Estimation, which includes the United Nations Children's Fund (UNICEF), the World Health Organization (WHO), the United Nations Population Division and the World Bank. The estimates are the official UN estimates for measuring progress towards Millennium Development Goal 4—reducing child mortality. The Inter-agency Group for Child Mortality Estimation compiles data available from all possible nationally representative sources for a country, including household surveys, censuses, vital registration and then like, and uses a model to fit a regression line to the data to produce the mortality estimates. Estimates are updated every year after a detailed review of all newly available data points. The review occasionally results in adjustments to previously reported estimates. The full time series for all countries is published at [www.childinfo.org](http://www.childinfo.org) and [www.childmortality.org](http://www.childmortality.org).

#### **Maternal mortality estimates**

Maternal mortality estimates for 2010 are based on the work of an interagency group comprising the WHO, UNICEF, the United Nations Population Fund and the World Bank. The model-based estimates use a dual approach to take into account the frequent underreporting and misclassification of maternal deaths. For more information, see WHO, UNICEF, UNFPA and World Bank (2012).

#### **Immunization**

The immunization data published in this report are based on the work of the WHO and UNICEF. The estimates should not be confused with other sources of information, such as Demographic and Health Surveys, Multiple Indicator Cluster Surveys, or Ministries of Health. The WHO and UNICEF derive national estimates of immunization coverage each year and send each country a draft report for review. Based on comments and new evidence from the country reviews, final reports are published in August with data for the preceding year. All new evidence, such as final survey reports received after publication, are taken into consideration for the following year's estimates. For each country's final report for 2010 as well as data sources and a description of trends, see [www.childinfo.org](http://www.childinfo.org).

#### **Water and sanitation**

The drinking water and sanitation coverage estimates are produced by the WHO–UNICEF Joint Monitoring Programme for Water Supply and Sanitation. The estimates are the official UN estimates for measuring progress towards the Millennium Development Goal targets for drinking water and sanitation. They use a standard classification of what constitutes coverage. The Joint Monitoring Programme does not report the findings of the latest nationally representative household survey or census. Instead, it estimates coverage using a linear regression line that is based on coverage data from all available household sample surveys and census. For specific country data, see [www.childinfo.org](http://www.childinfo.org) and [www.wssinfo.org](http://www.wssinfo.org).

# Notes



1. Commission on Accountability for Women's and Children's Health 2011.
2. Barros and others 2012.
3. UNICEF 2012.
4. Lawn and others forthcoming.
5. UNICEF, WHO, World Bank and UNDESA 2012.
6. UNICEF, WHO, World Bank and UNDESA 2012.
7. Black and others 2008.
8. UNICEF, WHO, World Bank and UNDESA 2012.
9. Black and others 2008.
10. Victora and others 2010.
11. [www.scalingupnutrition.org](http://www.scalingupnutrition.org); [www.gainhealth.org](http://www.gainhealth.org); [www.thousanddays.org](http://www.thousanddays.org).
12. Bryce and others 2008.
13. WHO 1985; Villar and others 2006.
14. WHO, UNAIDS and UNICEF 2011.
15. Boerma and others 2008.
16. Barros and others 2012.
17. WHO 2007.
18. Informal Meeting on Provision of Home-Based Care to Mother and Child in the First Week after Birth: Follow-up to the Joint WHO/UNICEF Statement on home visits for the newborn child, March 2012.
19. WHO and UNICEF 2004.
20. WHO 2012.
21. ILO 2001.
22. WHO 1981.
23. WHO 2006.
24. WHO 2006.
25. Rowe and others 2005.
26. WHO 2010a.
27. UN 2010.
28. Global Health Workforce Alliance 2011.
29. Nyamtema and others 2011.
30. Taylor and others 2011.
31. Kruk and others 2010.
32. Dwyer 2011.
33. Management Sciences for Health 2010.
34. Vujicic and others 2012.
35. Global Health Expenditure Database (<http://apps.who.int/nha/database/PreDataExplorer.aspx?d=a>, accessed 2 March 2012)
36. Global Health Expenditure Database (<http://apps.who.int/nha/database/PreDataExplorer.aspx?d=a>, accessed 2 March 2012)
37. WHO National Health Accounts database.
38. WHO 2010b.
39. Borghi and others 2006.
40. Ekman and others 2008.
41. Powell-Jackson and others 2006.
42. Costello and others 2009; WHO National Health Accounts database; WHO 2010b.; Borghi and others 2006; Ekman and others 2008.
43. PMNCH 2011.

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