Welcome!
The meeting will begin soon.

Bienvenue!
La réunion commencera bientôt.

Countdown to 2030
Women’s, Children’s & Adolescents’ Health
First, some information about zoom ...

Tout d'abord, quelques informations sur le zoom ...
Language Interpretation

To change language:

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• Click the language that you would like to hear (we will offer English & French)

• (Optional) To hear the interpreted language only, click Mute Original Audio
Webinar Controls

Settings

**Unmute/mute:** If the host gives you permission, you can unmute and talk during the webinar. If the host allows you to talk, you will receive the notification below.

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**Raise Hand:** Raise your hand in the webinar to indicate you would like to speak to ask a question.

**Question & Answer:** Click the Q&A window to ask questions to the host and panelists. They can either reply to you via text in the Q&A window or answer your questions live.
Webinar Controls

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• Type your question into the Q&A box and click send
• If the host replies via the Q&A, you will see a reply in the Q&A window
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Please introduce yourself in the chat:
Name, Organization, Location
Overview
Countdown’s Mission, Partners and Main Outputs

**MISSION**
Provide evidence for advocacy, planning and accountability to enhance reproductive, maternal, newborn, child, adolescent health & nutrition

Focus on coverage, equity and drivers; low- and middle-income countries

**PARTNERSHIP**

• Academic /research institutions

• Global and regional partners
  • UNICEF, WHO, WAHO
  • World Bank / GFF

• Civil society and other partners
  • PMNCH partnership
  • IPU, IAP, EWEC

• Bill & Melinda Gates Foundation

**OUTPUTS**

• Scientific products
  • academic publications

• global / regional reports & country profiles

• advances in measurement and analytical tools

• Country evidence and strengthened analytical capacity
Countdown to 2030: Transition from Global to Local

Tracking for MDGs: maternal, newborn and child survival
7 global reports
Country profiles
10 country case studies: understanding why progress or the lack of progress
> 100 scientific publications

Regional analysis & capacity (2016-19)
Maintaining global monitoring role for UN Every Woman Every Child, with WHO & UNICEF (joint reports, country profiles, technical advances)
15 regional analysis workshops in Latin America, led by Pelotas and in sub-Saharan Africa, led by APHRC; reached country teams from 50 countries
> 100 scientific publications

Country analysis (2020- )
Maintaining global and regional role in monitoring and measurement, further integration with partners
Country collaborations in GFF supported countries
• Generating evidence for reviews of plans and programs
• Strengthening analytical capacity
Country focus: enhance country-led results monitoring in GFF-supported countries

• **Countdown Country Collaborations**
  • Led by country public health institution
  • With Countdown global/regional partner and Ministry of Health
  • Working with GFF/WB and other partners (WHO, UNICEF)

• **Main products**
  • Analytical reports and in-depth studies of progress and performance to inform annual/midterm reviews of country 5-year plans and investment cases
  • Technical workshops and tools to strengthen country analytical capacity
  • Scientific articles with country teams, resulting from the analytical work
  • M&E frameworks and plans; target setting

• **Focus**
  • Analysis of local progress and performance (province/region, districts), equity
  • Progress against country targets for key RMNCAH and nutrition indicators
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<td>University of Ghana &amp; Ghana Health Services</td>
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<td>AKU &amp; Toronto</td>
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**Ministry of Health**
- National Statistical Office
- GFF / World Bank
- WHO, UNICEF
- Other development partners
Countdown to 2030 Country Collaborations

**Countries**
- Morocco
- Senegal
- Mali
- Niger
- Liberia
- Côte d’Ivoire
- Burkina Faso
- Ghana
- Nigeria
- Ethiopia
- Kenya
- Uganda
- Tanzania
- Zambia
- Tajikistan
- Pakistan
- India
- Nepal
- Bangladesh

**Main Partners**
- Centre de Santé Reproductrice
- Medical Research Center, Institute for Health and Development, Department of Planning, Research and Statistics, Direktion de la Santé et de la Mer et de l’Enfant, APHRC, London School HTM (LSHTM)
- Institut National de Santé Publique, Johns Hopkins U. (JHU)
- Ministry of Health, National Public Health Institute, U. of Liberia, GFF, LSHTM
- Institut National de Santé Publique, APHRC
- Institut Supérieur des Sciences de la Population, Africonsanté, LSHTM, JHU
- U. of Ghana, Ghana Health Service, WorldPop/ U.of Southampton
- U. of Ibadan, Hospital for Sick Children
- Ethiopian Institute of Public Health, U. of Manitoba, LSHTM
- APHRC, Kemri Wellcome Trust, Ministry of Health, WorldPop/ U.of Southampton
- Makerere U., Ministry of Health, Hospital for Sick Children, U. of Manitoba, LSHTM
- Ifakara Health Institute, GFF, LSHTM, U. of Manitoba
- U. Of Zambia, Ministry of Health, U. of Manitoba
- U. Central Asia, Aga Khan Foundation, Aga Khan U., Hospital for Sick Children
- Health Sciences Academy, U. of Manitoba, Hospital for Sick Children
- International Institute for Population Sciences, National Health Systems Resource Centre, India Health Action Trust, U. of Manitoba
- South Asian Institute for Policy Analysis and Leadership
- icddr,b; JHU
Some challenges in countries

• **Suboptimal quality of analytical work to inform reviews**
  • Country analytical work done in a rush, reports not published, results not trusted by users
  • Consultancies to fill gaps or ensure independence: variable quality, external
  • Surveys not frequent enough for annual reviews; need to use health facility data

• **Analytical capacity gaps**
  • MOH often limited capacity in terms of epidemiologists, demographers, statisticians
  • Country public health institutions involvement lacking
  • Experience of working with multiple data sources and equity limited
  • Target setting and associated monitoring inadequate

• **Limited use of academic outputs**
  • Academic analytical and research work weakly connected with country decision-making processes as part of reviews or related processes; too slow for decision-making
Addressing the challenges: Countdown country collaborations

• **Technical: quality analyses of progress and performance**
  - connect global/regional technical expertise in RMNCAH and nutrition monitoring with country efforts
  - focus on recent data (routine data, health system data)

• **Analytical capacity: public health institution and MOH**
  - focus on public health institutions and their role in country monitoring (in collaboration with MoH)
  - builds upon Countdown / APHRC efforts to strengthen analytical capacity (regional analysis workshops)
  - galvanize inter-country learning through annual conferences

• **Greater data use in countries**
  - Monitoring and research connected with country decision-making processes as part of reviews of national plans / investment cases
  - Communication effort related to analytical outputs
Initial observations from country engagements

Country collaborations
- 15 established with scope of work for (initial) 2-3 year collaboration; active involvement MoH
- Good discussions on the scope of work; new ideas emerged

Variation in country GFF investment cases (IC)
- Integration: IC fully integrated with national RMNCAH+N plan; focus on prioritization (of districts, of interventions)
- Timing: some countries still developing 1st IC, some already moving to a 2nd RMNCAH+N plan
- Scope: some ICs focus on RMNCAH+N, some on UHC with special focus on RMNCAH+N

Variation in existing country monitoring practices for reviews of national plans
- Few countries: conduct endline reviews of 5-year plans
- Some countries: strong culture of analytical reports for annual reviews, including subnational performance
- Several countries: conduct extensive mid-term reviews with quantitative analysis, qualitative analysis of health system and context (model for future analytical work including health system and policy analyses)
Thank you
Monitoring results, the GFF and Countdown to 2030 partnership
How the GFF drives results

1. Prioritizing
   - Identifying priority investments to achieve RMNCAH outcomes
   - Identifying priority health financing reforms

2. Coordinated
   - Getting more results from existing resources and increasing financing from:
     - Domestic government resources
     - IDA/IBRD financing
     - Aligned external financing
     - Private sector resources

3. Learning
   - Strengthening systems to track progress, learn, and course-correct

Accelerate progress now on the health and wellbeing of women, children, and adolescents

Drive longer-term, transformational changes to health systems, particularly on financing
The RMNCAH Investment Case and Health Financing Reforms

From the national health strategy – a prioritized investments for RMNCAH Health & Nutrition and health financing reforms

Development, financing and implementation of the Investment Case

Role of the Country platform

Every country develops their own Investment case, based on the countries own National Health Strategies, priorities and available financing and long term health financing goals
Development and implementation of the Investment Case & HF reforms

**Policies and Data**

- **Theory of change defined**
  - Measurable outcomes defined along the causal pathway
  - Resource mapping for financial allocation

- **Results framework (fit for purpose)**
  - Rationalized & relevant Indicators
  - Data sources & frequency
  - Baseline and targets
  - Data sources assessment

- **Data sources (feasible)**
  - Assessment of whether the systems (and surveys) are in place to monitor the IC and HF reforms
  - Is the data of quality?
  - Is the data accessible?

- **Data use and data quality strategy**
  - Ensuring data can be used on a frequent basis
  - Ensuring data visuals and analytics tools are available for financial and results data at the subnational level
  - Developing subnational data analyses to update policy and program developers and guide decision making

Optional:
- Invest in additional HMIS, data systems, surveys
- Invest in HMIS assessment

Routine, annual and mid-term reviews
Countdown Network and GFF partnership working together with Ministries of Health

Bringing Analytic expertise together:
- Ability to bring financial data and programmatic data together
- Subnational data analysis
- Applying survey, routine data together
- Translating data into decision making

Deliverables:
- Regional meetings, Annual reports, Midterm (in-depth) report and subnational reports
- Communication to investment case country platform
- Ensuring data are used for developing policy, allocating financing and improving programs
Country Collaborations
Institut Supérieur des Sciences de la Population (ISSP), Burkina Faso

Dr. Bruno Y. Lankoandé

Dr. Roch M. Millogo

AFRICSanté, Burkina Faso

Dr. Rasmané Ganaba

London School of Hygiene and Tropical Medicine, UK

Dr. Veronique Fillipi

Johns Hopkins University, Bloomberg School of Public Health, USA

Dr. Abdoulaye Maiga

Dr. Melinda Munos

Dr. Elizabeth Hazel

National Program of Health Development (PNDS) 2011-2020: derived from the National Health Policy document adopted since 2011, aims to help accelerate progress to achieve the Millennium Development Goals.

GFF Investment Case: aims to improve population health and address health challenges and gaps in reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH&N) along with improving the civil registration and vital statistics in Burkina Faso.
Burkina Faso: Focus on the collaboration

Annual reports to inform reviews of RMNCAH+N progress and performance

Analytical capacity building

Country data and analysis materials repository

- Policy briefs and communication materials
- Peer-reviewed publications
Mali: Organizations, Team Members & Investment Case

Institut National de Santé Publique, Mali

Akory Ag Iknane
Fatou Diawara
Mamadou Berthe
Ibrahim Terera

Johns Hopkins University, Bloomberg School of Public Health, USA

Melinda Munos
Abdoulaye Maiga
Emily Wilson


GFF Investment Case: (under development) aims to improve reproductive, maternal, newborn, child and adolescent health and nutrition, with a particular focus on reproductive health and nutrition.
Mali: Focus of the collaboration

- Annual reports on progress against GFF indicators and targets, using available survey and routine data
- Capacity building
- Peer-reviewed analytical manuscripts on topics to be identified
- Policy briefs and communications materials
Plan de Développement Sanitaire (PDS): 2017-2021: aims to promote the social well-being of the population to reach the Sustainable Development Goals targeting specifically the six WHO health system building blocks.

GFF Investment Case: under development
At least 1 annual, mid-term or final review report to inform progress & performance of the country RMNCAH+N plan and investment case during the 2 years, in close collaboration with the Ministry of Health.

- Basic report w/ regional progress analyses
- Comprehensive, in-depth analyses of progress & performance at national and subnational levels

Special analytical studies as requested in the context of the investment case and national plans, special target populations, or special subject areas.

- At least 1 peer-reviewed publication on the country work
- Systematic archiving of data and methods linked to country repositories
Countdown to 2030 Collaboration: aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of Côte d’Ivoire’s national health plans and GFF investment case for RMNCAH+N.

GFF Investment Case: aims to increase the health budget by 15 percent a year and guide resource allocation to priority investments in primary health care, benefiting populations with the most pressing needs.

DI-CIV: concerns the most advantageous interventions and covers the period 2020-2023.

Côte d’Ivoire: Organizations, Team Members & Investment Case

Institut National de Santé Publique (INSP), Côte d’Ivoire

- Prof. YAVO Williams
- Prof. AKE-TANO Odile
- Dr. AGBRE-YACE Marie Laurette
- Dr. KOUMI-MELEDJE Marie Dorothée
- Dr. KPEBO Denise

APHRC, Senegal and Kenya

- Dr. Moussa BAGAYOKO
- Diarra Bousso SENGHOR

Institut National de Santé Publique (INSP), Côte d’Ivoire

- Dr. AGBRE-YACE Marie Laurette
- Prof. AKE-TANO Odile
- Prof. YAVO Williams
- Dr. KOUMI-MELEDJE Marie Dorothée
- Dr. KPEBO Denise

GFF Investment Case:

- Aims to increase the health budget by 15 percent a year and guide resource allocation to priority investments in primary health care, benefiting populations with the most pressing needs.
- Concerns the most advantageous interventions and covers the period 2020-2023.
Côte d'Ivoire: Focus of the collaboration

Côte d’Ivoire team:
- INSP (lead)
- Ministry of Health and Public Hygiene: PNSME, PNN, PNSSU-SAJ, DIIS
- National Institute of Statistics (INS)

- Scoping review of key RMNCH indicators in the IC to identify key thematic issues
- Analysis report and in-depth data analyses including geospatial, equity and coverage

- Two analytical workshops to strengthen country analytical capacities
- Mid-term review report of the RMNCH plan highlighting progress and performance towards national and subnational targets

- Policy brief, statistical profiles, web portals, fact sheet
- Two journal articles, 1 country poster
- Recommendations to improve the monitoring of the RMNCAH+N program
Senegal: Organizations, Team Members & Investment Case

Countdown to 2030
Collaboration: aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of Senegal’s Integrating Reproductive, Maternal, Neonatal, Infant and Adolescent Health and Global Financing Facility (GFF) investment case for reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH+N).

GFF Investment Case: aims to contribute to the reduction of maternal, neonatal, infant and child morbidity and mortality in Senegal. This is aligned with the vision of the RMNCAH 2016-2020 plan inspired by the SDGs, the Plan Senegal Emergent (PSE) and the Global Strategy 2.0.
Scoping review of key indicators on existing data in the field of RMNCAH+N in Senegal

- Two country-led journal articles
- Two policy briefs
- One country factsheet
- One endline national dissemination event

- One in-depth data analysis workshop of key indicators including coverage, equity, geospatial, qualitative, and possibly to include RMNCH financing indicators
- One research capacity strengthening workshop

Mid-term report and endline report, including recommendations to improve monitoring and reporting of RMNCAH indicators
(Pause for those that need to switch interpretation mode)

(Pause pour ceux qui doivent changer de mode d'interprétation)
Countdown to 2030

**Collaboration:** aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of Liberia’s national health plans and the Investment Case for Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH).

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**Liberia: Organizations, Team Members & Investment Case**

**Ministry of Health, Liberia**
- Bentoe Tehoungue

**National Public Health Institute, Liberia**
- Elsie Karmbor-Ballah

**University of Liberia, Institute for Population Health, Liberia**
- Geetor Saydee

**London School of Hygiene and Tropical Medicine, UK**
- Carine Ronsmans
- Oona Campbell
- Kerry Wong

**Global Financing Facility, Liberia**
- Mardieh Dennis

**RMNCAH Investment Case:** aims to create a sustainable health financing system to guarantee equal access to quality healthcare and ensure financial protection for all
In-depth analysis of three decades of Demographic and Health Survey (DHS) data from 1986 to 2020, to be written up as a peer-reviewed publication.

Further analysis of routine DHIS2 data and triangulation with other data sources, focused on county-level progress and challenges.

In-depth analysis of Service Availability and Readiness Assessment (SARA) and any other available health facility assessment data.

Analytical report summarizing all findings to inform the prioritization and results framework for the 2nd RMNCAH Investment Case.
Tanzania: Organizations, Team Members & Investment Case

Ifakara Health Institute, Tanzania

Dr. Honorati Masanja
Josephine Shabani
Dr. Georgina Msemo
Dr. Esther Elisara

London School of Hygiene and Tropical Medicine, UK

Dr. Claudia Hanson

University of Manitoba, Institute for Global Public Health, Canada

Prof. Ties Boerma

Health Sector Strategic Plan 2015-2020 (HSSP IV): aims to reach all households with essential health and social welfare services, meeting, as much as possible, the expectations of the population, adhering to objective quality standards, and applying evidence-informed interventions through efficient channels of service delivery.

GFF Investment Case: aims to provide guidance on the implementation of reproductive, maternal, newborn, child and adolescent health programs across different levels of service delivery and ensure coordination of interventions and quality services across the continuum of care.
Tanzania: Focus of the collaboration

M&E plan for HSSP V and One Plan III: the new five-year plans, linked to GFF investment case for RMNCAH+N, will have monitoring and evaluation plan that includes a results framework, indicators and targets, data source specifics, and roles and responsibilities.

- Further analysis of DHIS2 data focusing on council level statistics and progress.
- Analyses will feed into annual reviews at local and national levels and also help with assessment of impact of council & regional prioritization.

In-depth analyses on specific RMNCAH+N topics.
Countdown to 2030 Collaboration: aims to enhance the availability of quality evidence through targeted analysis during national and subnational reviews of overall sector progress, as well as performance review of the country RMNCAH+N plan.

GFF Investment Case: aims to continue to support and strengthen reforms in planning, budgeting, and data use to achieve health objectives, while focusing on tailored plans that respond to the needs of each county. Both the investment case and the Kenya health sector strategic plan (KHSSP) have a strong focus on universal health coverage.

Kenya: Organizations, Team Members & Investment Case

Kemri Wellcome Trust, Kenya
Dr. Victor Alegana

Monitoring & Evaluation Dept, Ministry of Health, Kenya
Dr. Helen Kiarie

WorldPop, University of Southampton, UK
Dr. Kristine Nilsen
Dr. Natalia Tejedor Garavito

APHRC, Kenya
Dr. Martin Kavao Mutua
Dr. Estelle Sidze
Lynette Kamau

GFF Investment Case: aims to continue to support and strengthen reforms in planning, budgeting, and data use to achieve health objectives, while focusing on tailored plans that respond to the needs of each county. Both the investment case and the Kenya health sector strategic plan (KHSSP) have a strong focus on universal health coverage.
Kenya: Focus of the collaboration

Midterm Review (MTR) of the overall health sector strategic plan

Annual reviews report to feed to the end line review report for RMNCAH+N

County-level PHC Performance Initiative (PHC-PI) scorecards

- Analytical workshops
- Policy briefs
- Journal articles on critical topics from the workshop
- Updated national and country VSPs
- PHC analytical workshop report
GFF Investment Case:
with GFF support, Uganda revised its Sharpened Plan to serve as its Investment Case focusing on delivery strategies to improve outcomes and prioritize the scale up of key interventions. The Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Sharpened Plan for Uganda (2016/17-2019/20) encapsulates the GFF case for Uganda. It focuses on addressing major health system bottlenecks to scale up high impact interventions at all levels of the health system. The Plan focuses on five strategic shifts and emphasizes evidence-based high impact solutions, increasing access for high burden populations and geographical focusing/sequencing.
Prepare an endline review report of the GFF investment case for the Ministry of Health and development partners by December 2020, including assessment of progress in the indicators.

Conduct at least 3 analytical papers and reports on critical topics, of which two can be submitted to peer-reviewed journals.

Support the annual health performance reviews in 2020, 2021 and 2022 with in-depth analyses of priority topics.

- Organize at least one analysis workshop for academics, gov’t officials, civil society to share & discuss methods & findings
- Prepare communication materials in relation to the analysis results
National Health Strategic Plan (NHSP) 2017-2021: aims to significantly reduce the disease burden and accelerate the attainment of the Sustainable Development Goals.

GFF Investment Case: under development

Countdown to 2030 Collaboration: aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of the national health plans and Global Financing Facility (GFF) investment case for reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH+N)

Zambia: Organizations, Team Members & Investment Case

University of Zambia, School of Public Health, Zambia

Dr. Choolwe Jacobs
Prof. Charles Michelo
Ms. Mwiche Musukuma
Mr. Maio Bulawayo

Ministry of Health, Zambia

Ms. Brivine Sikapande
Mr. Ovost Chooye

University of Manitoba, Institute for Global Public Health, Canada

Dr. Andrea Blanchard
Prof. Ties Boerma
Zambia: Focus of the collaboration

- Analysis of health facility data (DHIS2) to obtain district indicators for performance assessment and local monitoring, informing the 2021 endline review of NHSP and 1st annual review of the GFF investment case.

- Technical inputs into the development of a M&E plan (indicators, targets, measurement) of the new national plan and GFF investment case (2021).

- In-depth assessment of levels and trends in RMNCAH+N indicators with a focus on equity using household demographic & health surveys to understand what has worked, for whom & why.

- National and subnational statistical profiles
- Factsheets
- Policy briefs
- Scientific publication(s) from in-depth thematic studies
Countdown to 2030

Collaboration: aims to enhance the capacity of the GHS to provide quality evidence through targeted analysis during national and subnational reviews of overall sector progress, as well as performance review of the country’s RMNCAH+N plan.

GFF Investment Case:
Ghana is in the process of developing the investment case and the results framework is still to be developed. The investment case will be adopted to national priorities, most notably a new roadmap to Universal Health Coverage (UHC) with an associated national monitoring, learning, and evaluation (MLE) framework where RMNCAH+N is prominent.
Analytical report which will detail progress and performance made towards national and international targets for key indicators at national and district levels. Analysis will focus on recent coverage, trends, inequalities and geospatial analysis on selected indicators.

Ghana: Focus of the collaboration

- Two technical workshops
- One policy brief
- Journal article on critical topics from the workshop for submission to peer-reviewed journal

Analytical report detailing what has been achieved from the investment via the country and international targets for key indicators based on surveys, health facility data, and admin data, focusing on recent trends and inequalities at national and subnational levels, including long term projections.

- Routine annual progress reports incorporating new methodologies and corresponding estimates
- Inputs provided to performance-based management in the contact of the UHC roadmap MLE framework
GFF Investment Case: fully integrated into the Health Sector Transformation Plan – HSTP I (2015/16-2019/20) which aims to improve equity, coverage and utilization of essential health services, improve quality of health care, and enhance the implementation capacity of the health sector at all levels of the system.
Ethiopia: Focus of the collaboration

Analytical end-line review of the HSTP I with preliminary results to be presented at the Annual Review 2020, including a concise report on the progress and performance of the health plan in RMNCAH+N-specific topics

Thematic in-depth assessment of levels and trends in RMNCAH+N indicators with a focus on equity in Ethiopia based on the household surveys

- Technical inputs to develop an analytical report for annual review of HSTP-II in 2021/22
- Suite of analytical methods and tools for the EPHI and MoH analytical team for future analysis and reporting

- National and subnational statistical profiles; fact sheets; policy briefs
- Scientific publications from in-depth thematic studies, including from the MNH exemplar study
National Health Strategic Plan II (NSHDP II) 2017-2025: aims to reduce maternal, neonatal, child and adolescent morbidity and mortality, and to promote universal access to comprehensive maternal and child health services and sexual and reproductive health services for adolescents and adults throughout their life cycle.

GFF Investment Case: aims to improve access to care for the most vulnerable through deployment of services in rural and hard-to-reach areas; ensuring that maternity services are free at the point of care; and utilizing a results-focused framework and fee-for-services to improve efficiency in service delivery.

University of Ibadan, Nigeria
- Prof. Adebola Orimadegun
- Prof. Ayodele Jegede
- Prof. Kayode Osungbade
- Dr. Akanni Lawanson
- Dr. Oladejo Adepoju
- Dr. Joshua Akinyemi

Centre for Global Child Health, Hospital for Sick Children, Canada
- Dr. Emily Keats
- Dan Fridman
- Christina Oh
- Dr. Zulfiqar Bhutta
An analysis of administrative health data (DHIS2) to inform The 2021 annual review report of the GFF investment case for the Ministry of Health and development partners.

Additional topics to be determined. Such as district-level analysis of facility and other data, assessment of the performance of specific initiatives, quality of care, adolescent health, maternal and perinatal mortality in hospitals, etc.

Countdown to 2030 Collaboration: aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of the national health plans and Global Financing Facility (GFF) investment case for reproductive, maternal, newborn, child and adolescent health and nutrition.

National Health Action Plan (NAP) 2019-2023: developed in line with strategic priorities which are advancing universal health coverage, protecting people and addressing health emergencies and disease outbreaks, promoting healthier population and more effective and efficient organization for better supporting the health system.

GFF Investment Case: Coming soon

Pakistan: Organizations, Team Members & Investment Case

Health Sciences Academy, Pakistan
- Dr. Assad Hafeez
- Dr. Nabila Zaka
- Mr. Ikhlaiq Ahmad

Centre for Global Child Health, Hospital for Sick Children, Canada
- Dr. Zulfiqar Bhutta

University of Manitoba, Canada
- Tahira Ezra Reza
- Faheem Baig
- Dr. Ahsan Ahmad
- Dr. Faran Emanuel
- Prof. James Blanchard
- Prof. Ties Boerma
Annual analytical report using all available data and focusing on core indicators of progress and performance to present at the annual public health conference 2020 and beyond/cabinet’s health committee.

Pakistan: Focus of the collaboration

In-depth analyses on specific RMNCAH+N topics: building upon existing work

M&E plan and framework for the new health plans, linked to the GFF investment case for RMNCAH+N
**Tajikistan: Organizations, Team Members & Investment Case**

**University of Central Asia, Tajikistan**
- Roman Mogilevskii

**Aga Khan Foundation, Tajikistan**
- Lailo Kurbonmamadova

**Consultant, Tajikistan**
- Maisara Otambekova

**Aga Khan University, Pakistan**
- Jai Das
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- Hammad Durrani

**The Hospital for Sick Children, Centre for Global Health, Canada**

**Countdown to 2030 Collaboration:** aims to support Tajikistan’s annual national plan review process through collaboration with the MOH and other relevant partners and will highlight opportunities to accelerate progress in order to achieve Sustainable Development Goals (SDGs) 2 and 3. The Ministry of Health Tajikistan is currently developing its 2021-2030 National Health Strategy.

**GFF Investment Case:** under development
Tajikistan: Focus of the collaboration

- Prepare an annual report (year 1) of the investment case for the MoH and development partners

- Conduct at least 2 analytical papers (or reports) on critical topics of which at least one should be submitted to a peer-reviewed journal

- Organize at least 1 analysis workshop for academics, gov’t officials, civil society to share and discuss methods and findings

- Support the annual health and nutrition performance reviews with in-depth analyses of priority topics and opportunities for Tajikistan to reach its SDG 2 and 3 targets

- Prepare communication materials i.e. statistical profiles, policy briefs, presentations, media briefs, etc. in relation to the analysis as relevant

- Participate in and present a poster of country progress and findings at each Countdown Countries Annual Meeting
DATA AND ANALYSIS CENTERS
The Equity Data and Analysis Center’s goal is to use data to achieve progress on health equity. Its outputs provide evidence on who is being left behind, in order to inform health policies, programmes and practices that aim at closing existing gaps.

**Activities include:**

- Maintaining and updating a large database with indicators for the sustainable development goals related to reproductive, maternal, newborn and child health which can be stratified by various equity dimensions, such as wealth quintiles and maternal education.

- Providing guidance and building capacity on analytical methods, tools for equity analysis and visualization, and database management.
International Center for Equity in Health

2020 | Team - dynamic, young, diverse backgrounds, countries, colors

**Academic training**
- Master students
- PhD students
- Postdocs
- Temporary visitors

**Technical staff**
- Statistician
- Computer scientist
- Librarian
- Designer
The equity dashboard is an Excel spreadsheet which visualizes data on reproductive, maternal, newborn and child health indicators according to wealth, place of residence, and women’s education by country or region. The data sources are DHS, MICS or other relevant nationally representative surveys with focus on the health of women, children and adolescents.

The equity profiles aim to highlight the magnitude and time trends in within-country inequalities for reproductive, maternal, newborn and child health interventions and outcomes. The profiles cover over 110 low- and middle-income countries with available DHS or MICS surveys.
Survey Indicators and Stratifiers

The list of indicator definitions is available here. More details on the stratifiers is available here.

Equiplot Creator

Support for generating equiplots is available through downloadable Stata code and an online tool.

Slope Index of Inequality

You can download the SII Stata ado-file for using the following command:
net install siilogit,
from("http://www.equidade.org/files")

Concentration Index

You can download the CIX Stata ado-file using the following command:
net install cixr,
from("http://www.equidade.org/files")
The Health Financing Data and Analysis Center (DAC) monitors global aid flows for RMNCH to support tracking of financing for health and RMNCH within countries to ensure efficient and equitable allocation of funds subnationally.

**Activities include:**
- Monitor global aid flows for RMNCH using the Muskoka2 algorithm
- Undertake country-level tracking and analysis of financing for health and RMNCH
- Consider new methods for more efficient and timely tracking of domestic funds at country level
- Undertake capacity development to support analysis at country level
- Create a depository of financing data for use by countries and funding agencies
Aid for reproductive, maternal, newborn and child health: data and analysis from application of the Muskoka2 method, 2002-2017 is available here.

Creditor Reporting System (CRS) of the OECD is available here.

A briefing note developed for funding agencies to introduce the Muskoka 2 method and the dataset.

Uganda Financing Report: a chapter prepared for the GFF annual report for Uganda, draft is available here.

Countdown Country Profiles: Two-page country profiles featuring a range of coverage, equity, policy, health systems, and financing indicators. Available here.
WHO Global Health Expenditures Database

The Global Health Expenditure Database (GHED) provides internationally comparable data on health spending for close to 190 countries from 2000 to 2017.

Aid Data

Geocoded aid data for specific countries
The Geospatial Analysis DAC focuses on geospatial data integration to improve the spatial demographic and health evidence base in low- and middle-income countries. In the Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) field, WorldPop (www.worldpop.org) has developed approaches to estimate and map births, pregnancies and women of childbearing age, access to care and the coverage of interventions and services.

Activities include:
- Increasing awareness of geospatial methods and datasets among countries and partners
- Supporting Countdown country partnerships with geospatial analyses
- Research and development on new geospatial methods, insights and datasets
**Gridded Demographic Data**
Estimated distribution of births, pregnancies, women of childbearing age (WOCBA), and population broken down by age and sex groups at 1x1km

Births data available [here](#)
Pregnancies data available [here](#)
WOCBA data available [here](#)
Age and sex groupings data available [here](#)

**WOCBA and access to health services**
Percentage of women of childbearing age living within two hours of a hospital is available [here](#).

**Summarised data by administrative units**
National/Subnational data for births, pregnancies and WOCBA by country

Births data available [here](#)
Pregnancies data available [here](#)
WOCBA subnational data available [here](#)
WOCBA national data available [here](#)

**Access to Health Services**
Information on access to Health Services and their role in SDG Goal 3 is available [here](#).
Gridded mapping of population is available here. The peanutButter web application allows you to produce gridded population estimates using your own data on urban/rural characteristics.

Population demographic structure tool is available here. This tool allows the visualization of population age/sex structures globally for 2000-2020.

Gridded estimates of population for selected countries is available here. WoprVision is an interactive web map that allows you to query population estimates for specific locations and demographic groups.

Global gridded population data are available here. The tool allows the delineation of areas to query, returning zonal statistics.
The Data and Analysis Center (DAC) for Effective Coverage develops analytical tools to permit the estimation and analysis of quality-adjusted coverage of reproductive, maternal, newborn and child health and nutrition (RMNCH-N) interventions in low and middle-income countries.

Effective coverage measurement captures whether women and children in need of services experience optimal health gains when accessing. Countdown to 2030 developed a cascade of coverage that shows the loss of coverage due to lack of quality of care and defined measures of quality-adjusted coverage.

**Activities include:**
- Collaborate with other Countdown centers and countries to access and harmonize household and health facility surveys, and routine health information system datasets for the analysis.
- Develop analytical tools and documentation for effective coverage analysis
- Support capacity strengthening at country level for the analysis.
Cascade for effective coverage measurement

The cascade has been developed by Countdown to organize measures of quality-adjusted coverage, showing the loss of health benefit at each stage. It is available [here](#). This cascade has been adapted by the WHO and is available [here](#).

Health facility surveys tools for assessing service readiness and quality of care.

Protocols and code for calculating effective coverage using health facility surveys (such as SPA and SARA) and households surveys (DHS/MICS), forthcoming

- Service Availability and Readiness Assessment (SARA) Tool
- Service Provision Assessments (SPA)
- DHS Questionnaire
- MICS
Effective Coverage DAC: Available Resources

Improving Coverage Measurement Publication
The collection of publications on improving coverage measurement includes several papers showing analysis linking household surveys and health facility survey data to estimate quality adjusted coverage. It can be accessed [here](#).

Collection on Measuring and Monitoring Coverage of High Impact Health Interventions in Women, Children and Adolescents
A series of publications analyzing coverage and quality-adjusted coverage measures. It can be accessed [here](#).
Monitoring the progress and performance of health services is a critical part of annual reviews of national plans and investment cases.

**Activities include:**
- Analysis of health facility data, including service provision and readiness of terms in terms of health infrastructure, workforce and supplies. This involves the development and promotion of analytical methods and tools, technical advances and archiving of routine health facility data.
Focus on subnational statistics

Ways to estimate coverage and other indicators for RMCNAH+N at the district level from health facility data

Use of DHIS2 data and other health system information systems such as HRHIS

Analysis of subnational performance

Development and testing of subnational summary measures (indexes)

Assessment of performance comparing health system inputs and results at subnational levels

Advancing methods for facility data analysis

Adjustment for data quality issues such as incomplete reporting, extreme outliers, inconsistent reports

Assessment and estimation of denominators / target populations for key indicators
Cross-country studies
Platform for sharing experiences with health facility data analyses for district monitoring

Collaboration across countries to study priority subjects from a comparative perspective

Collaborations
Working with other DACs to improve analyses (e.g. DAC geospatial analysis and DAC health financing)

Link with Health & Demographic Surveillance Studies and other collaborations for in-depth analyses including validation studies

Enhancing communication of results
Development and testing of ways to present district performance: rankings, stratified rankings, scorecards

Developing effective ways to communicate annual results based on facility data through policy briefs, social media, etc.
Monitoring Health Services DAC: Available Tools & Publications

• Tool in MS Excel created by Countdown to 2030 for quality checks and analysis of health facility data

• Basic Stata Code: available upon request for the analysis of health facility data: for district, regional or provincial estimates of coverage of key indicators of reproductive, maternal, newborn and child health

Data Quality Review (DQR): WHO has developed guidance to support routine, annual and periodic independent assessments of facility-reported data with guidelines and tools. Available here.

Published:


Forthcoming (part of BMC Health Services Research Supplement on health facility data analysis):
• Mwalembaka et al: The use of health facility data to generate maternal and child health statistics in conflict-affected settings: experience from the Kivu, DR Congo
• Agiraembazi et al: Using health-facility data to assess regional and district performance: an assessment of the quality of the current district league tables in Uganda
• Prakash: Establishing evidence-based decision-making mechanisms in health eco-system and its linkages with health service coverage in 25 high-priority districts of Uttar Pradesh, India
• Day et al: Is South Africa closing the health gaps between districts: monitoring progress towards universal health coverage with routine facility data
• Maiga et al: Generating coverage estimates from health facility data in Sierra Leone
• Mwinnya et al: Review of coverage of RMNCH indicators using data from routine health information systems in low- and middle-income countries
Health systems drivers are key to understanding the enabling factors, social dynamics and rights that underpin coverage and equity of women’s, children’s, and adolescents’ health.

WHO: A health system consists of all organizations, people and actions whose primary intent is to promote, restore or maintain health. This includes efforts to influence determinants of health as well as more direct health-improving activities.

Health policy and systems research (HPSR) is an emerging field requiring different epistemologies, research methodologies and methods.

**Purpose of DAC**
The Health Policy and Systems Drivers Data and Analysis Center provides guidance on analysis methods and tools available for understanding and measuring health policy and systems for women’s, children’s, and adolescent’s health.
Health Policy and Systems DAC: Key activities

**HPSR briefs** on HPSR topics to support country teams identify key research questions and approaches:

1. How to understand context
2. Moving beyond health systems blocks
3. Understanding policy and how to track
4. Understanding implementation

**Policies**

Working with country partners to draw from the WHO RMNCAH policy database

The database can be accessed [here](#).

**Tools**

Revisit existing Countdown to 2030 health systems tools and other available HPSR related tools and then adapt them to country team efforts to document the drivers of change in their contexts.
Health Policy and Systems DAC: Available Tools

**Policy**
Policy and Programme Timeline Tool available [here](#).

Health Policy Tracer Indicators Dashboard available [here](#).

**Health Systems**
Health Systems Tracer Indicators Dashboard available [here](#).

**Implementation**
Programme implementation assessment (barometer) available [here](#).
Accountability measurement tool (Hilber 2020) available [here](#).
Most Significant Change (MSC) approach available [here](#).
Health Policy and Systems Research (HPSR) - A Methodology Reader

This document provides guidance on the defining features of HPSR and the critical steps in conducting research in this field.

A health policy analysis reader: The politics of policy change in low- and middle-income countries

The primary objective of this reader is to encourage and deepen health policy analysis work in low- and middle-income countries (LMICs).

Key literature


Future plans for the Countdown Data & Analysis Centers

- Will produce video tutorials (“how to…”)
- Maintain Countdown web pages with tools, methods, publications
- Conduct basic and advanced technical sessions: digital
- Provide individual country technical guidance upon request
- Facilitate clinics at the Annual Meeting of Countdown Country Collaborations

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<thead>
<tr>
<th>Date</th>
<th>Title</th>
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<tbody>
<tr>
<td>January 12</td>
<td>Equity analysis for annual reviews: methods and tools</td>
<td>Cesar Victora and Aluisio Barros, Federal University of Pelotas</td>
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<td>9-10a EST</td>
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<td>January 26</td>
<td>Health facility data analysis: adjustment and denominators</td>
<td>Cheikh Faye, APHRC and Ties Boerma, Univ Manitoba</td>
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<td>February 9</td>
<td>Geospatial methods and tools for annual reviews</td>
<td>Kristine Nilsen and Andy Tatem, University of Southampton</td>
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<td>February 23</td>
<td>Health financing analysis for annual reviews</td>
<td>Josephine Borghi and Catherine Pitt, LSHTM</td>
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<td>9-10a EST</td>
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<td>March 9,</td>
<td>Health policy analyses for annual reviews</td>
<td>Asha George and Mary Kinney, University of Western Cape</td>
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<td>March 23,</td>
<td>Measurement of effective coverage for annual reviews</td>
<td>Agbessi Amouzou and Melinda Munos, Johns Hopkins University</td>
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Question and Answer Session: Please type in the Q&A box

We also request your feedback on any topics you would like the Data and Analysis Centers to focus on in future virtual sessions.

Countdown to 2030
Women’s, Children’s & Adolescents’ Health
Countdown’s Communication and Policy Engagement Team: How we can Support

Country Activities

- Advocacy materials: training workshop, policy briefs, report summaries
- Communication materials: presentations, graphic designs
- Dissemination of country level findings

Global Activities

- Countdown website
- Video tutorials/trainings
- Social media
New Countdown Website: Coming soon

Countdown to 2030
Women's, Children's & Adolescents' Health

ABOUT COUNTDOWN  COUNTRY COLLABORATIONS  RESOURCES FOR ANALYSIS  PUBLICATIONS  COUNTRY PROFILES  TEMP

NIGERIA

The Nigeria Countdown to 2030 country collaboration aims to strengthen the analysis and synthesis of health data to inform national and local reviews of progress and performance in the context of Nigeria’s national health plans and Global Financing Facility (GFF) investment case for reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH+N).

The Nigeria Countdown country collaboration focuses on data analysis to inform:

- The 2021 annual review report of the GFF investment case for the Ministry of Health and development partners. Using administrative health data (DHIS2), this report will assess if the 2021 health targets and indicators of the investment case were met, identify progress in RMNCAH+N indicators and highlight the gaps in implementation.
- The Ministry of Health’s annual health and nutrition performance reviews. Using a variety of data sources - such as national and subnational surveys, household surveys, DHIS2, service availability surveys, and health management information systems - assessments will provide inputs to the state-level primary health care scorecards. These
We are grateful to the Bill & Melinda Gates Foundation for funding Countdown to 2030 for Women’s Children’s and Adolescents’ Health.