



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 ...



Countdown to 2030

Women's, Children's & Adolescents' Health

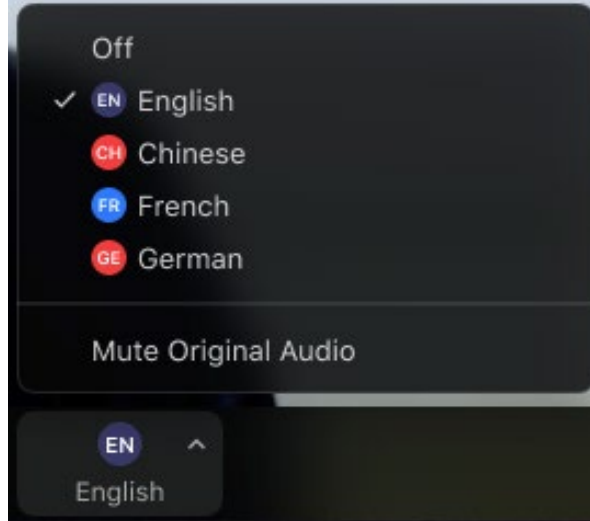
Language Interpretation

To change language:

- In your webinar control bar, click **Interpretation**



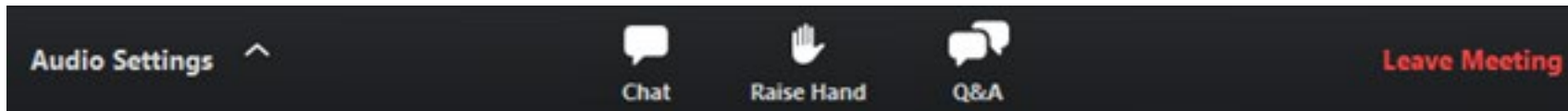
- Click the language that you would like to hear (we will offer English & French)



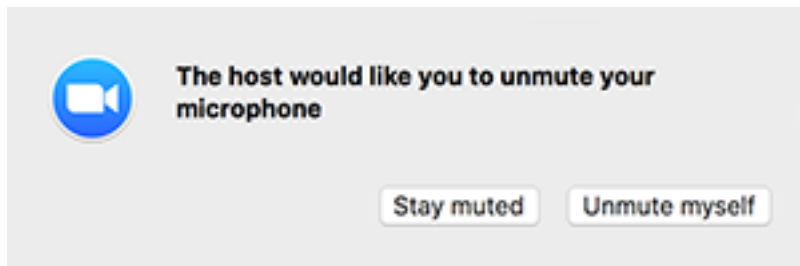
- (Optional) To hear the interpreted language only, click *Mute Original Audio*

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



Chat: Click chat icon to send chat messages to host, panelists, and attendees

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

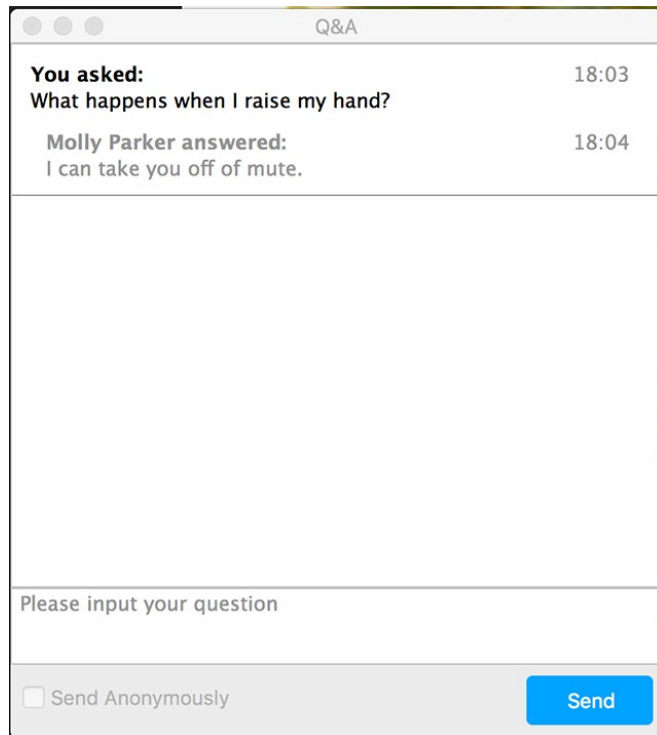
Question & Answer: Click the Q&A window to ask questions to the host and panelists. They can either reply to you via text in the Q&A window or answer your questions live

Webinar Controls

Q&A Continued:

To ask a question:

- 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
- The host can also answer your question live (out loud). You will receive a notification in the Q&A window if the host plans to do this.



A screenshot of a web browser window titled "Q&A". The window displays a question and an answer. The question is "What happens when I raise my hand?" asked at 18:03. The answer is "I can take you off of mute." provided by Molly Parker at 18:04. Below the answer is a large empty text area for input. At the bottom, there is a "Send Anonymously" checkbox and a "Send" button.

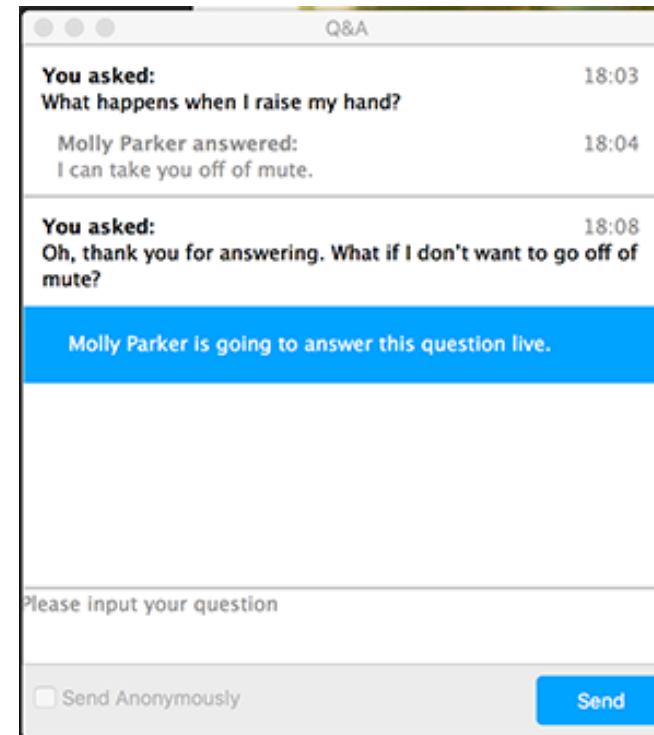
Q&A

You asked: 18:03
What happens when I raise my hand?

Molly Parker answered: 18:04
I can take you off of mute.

Please input your question

☐ Send Anonymously Send



A screenshot of a web browser window titled "Q&A". The window displays a question and an answer. The question is "What happens when I raise my hand?" asked at 18:03. The answer is "I can take you off of mute." provided by Molly Parker at 18:04. Below the answer is a large empty text area for input. At the bottom, there is a "Send Anonymously" checkbox and a "Send" button. A blue banner notification is displayed above the input area, stating "Molly Parker is going to answer this question live."

Q&A

You asked: 18:03
What happens when I raise my hand?

Molly Parker answered: 18:04
I can take you off of mute.

You asked: 18:08
Oh, thank you for answering. What if I don't want to go off of mute?

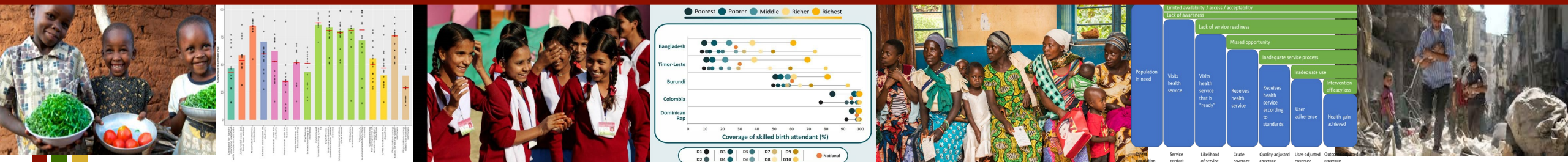
Molly Parker is going to answer this question live.

Please input your question

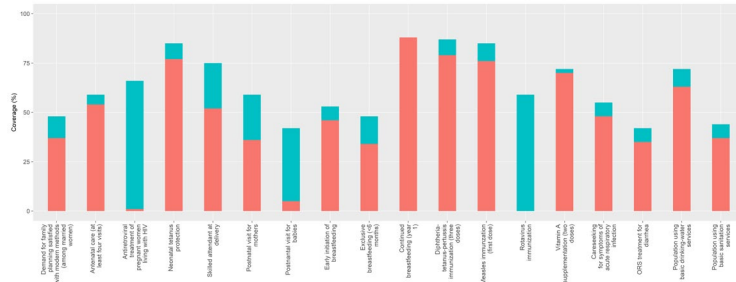
☐ Send Anonymously Send

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

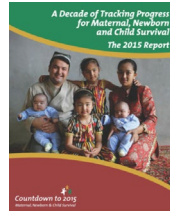
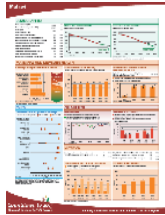
- Academic /research institutions
- Global and regional partners
 - UNICEF, WHO, WAHO
 - World Bank / GFF
- Civil society and other partners
 - PMNCH partnership
 - IPU, IAP, EWEC
- Bill & Melinda Gates Foundation



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



Global analysis (2005-2015)

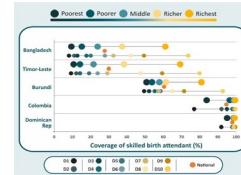
Tracking for MDGs: maternal, newborn and child survival

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



MNH Exemplars	COUNTRY	LEAD COUNTRY INSTITUTIONS	COUNTDOWN INSTITUTIONS	
	Burkina Faso	ISSP & Inst. National. de Recherche et Stat.	IIP/JHU & LSHTM	Ministry of Health
	Cote d'Ivoire	Institute National de Sante Publique	APHRC	
	Ghana	University of Ghana & Ghana Health Services	Southampton	
	Liberia	National Public Health Institute	LSHTM	
	Mali	Institut National de Santé Publique	IIP/JHU	
Exemplar	Niger	National Institute for Statistics	IIP/JHU	
	Nigeria	University of Ibadan and Kano	Toronto	
Exemplar	Senegal	ISED & Univ de Cheikh Anta Diop	APHRC & LSHTM	
Exemplar	Ethiopia	Ethiopia Public Health Institute	LSHTM & UM	
	Kenya	KEMRI	APHRC & Southampton	
	Tanzania	Ifakara Health Institute	UM & LSHTM	GFF / World Bank
	Uganda	Makerere University	UM & UToronto & LSHTM	
India Nepal Pakistan Morocco	Zambia	University of Zambia	UM	
	Pakistan	Academy for Health Services	UM & U Toronto	
	Tajikistan	University of Central Asia	AKU & Toronto	
				WHO, UNICEF
				Other development partners

Countdown to 2030 Country Collaborations

- GFF Countries
- Exemplar Countries
- GFF & Exemplar Countries



Countries	Main Partners
Morocco	Centre de Santé Reproductrice
Senegal	Medical Research Center, Institute for Health and Development, Department of Planning, Research and Statistics, Direction de la Santé et de la Mere et de l'Infant, APHRC, London School HTM (LSHTM)
Mali	Institut National de Santé Publique, Johns Hopkins U. (JHU)
Niger	National Institute of Statistics, Ministry of Health, GFF, UNFPA, WHO, UNICEF, JHU
Liberia	Ministry of Health, National Public Health Institute, U. of Liberia, GFF, LSHTM
Côte d'Ivoire	Institut National de Santé Publique, APHRC
Burkina Faso	Institut Supérieur des Sciences de la Population, AFRICSanté, LSHTM, JHU
Ghana	U. of Ghana, Ghana Health Service, WorldPop/ U.of Southampton
Nigeria	U. of Ibadan, Hospital for Sick Children
Ethiopia	Ethiopian Institute of Public Health , U. of Manitoba, LSHTM
Kenya	APHRC, Kemri Wellcome Trust, Ministry of Health, WorldPop/ U.of Southampton
Uganda	Makerere U., Ministry of Health, Hospital for Sick Children, U. of Manitoba, LSHTM
Tanzania	Ifakara Health Institute, GFF, LSHTM, U. of Manitoba
Zambia	U. Of Zambia, Ministry of Health, U. of Manitoba



Countries	Main Partners
Tajikistan	U. Central Asia, Aga Khan Foundation, Aga Khan U., Hospital for Sick Children
Pakistan	Health Sciences Academy, U. of Manitoba, Hospital for Sick Children
India	International Institute for Population Sciences, National Health Systems Resource Centre , India Health Action Trust, U. of Manitoba
Nepal	South Asian Institute for Policy Analysis and Leadership
Bangladesh	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)

Countdown Data and Analysis Centers (DACs)

Equity & coverage	Effective coverage	Systems Facility data	Geospatial analysis	Financial analysis	Drivers of change
Federal University of Pelotas, Brazil	Johns Hopkins University, USA	African Population & Health Research Centre, Kenya	World Pop / Univ of Southampton UK	London School of Hygiene and Tropical Medicine, UK	University of Western Cape, South Africa
					

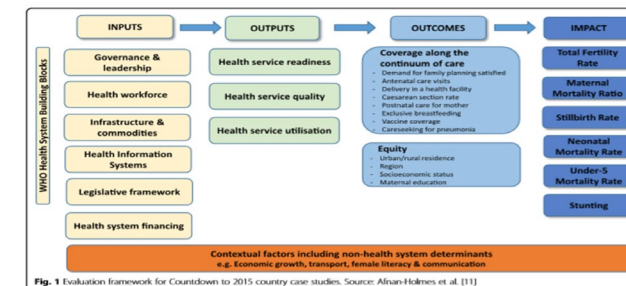
• Analytical capacity: public health institution and MOH

- 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

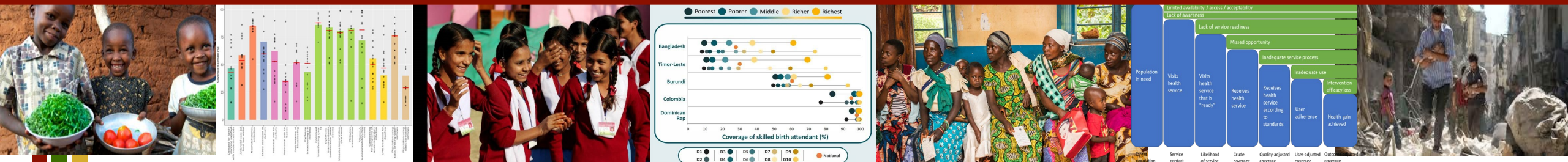
Variation in country GFF investment cases (IC)

- *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)

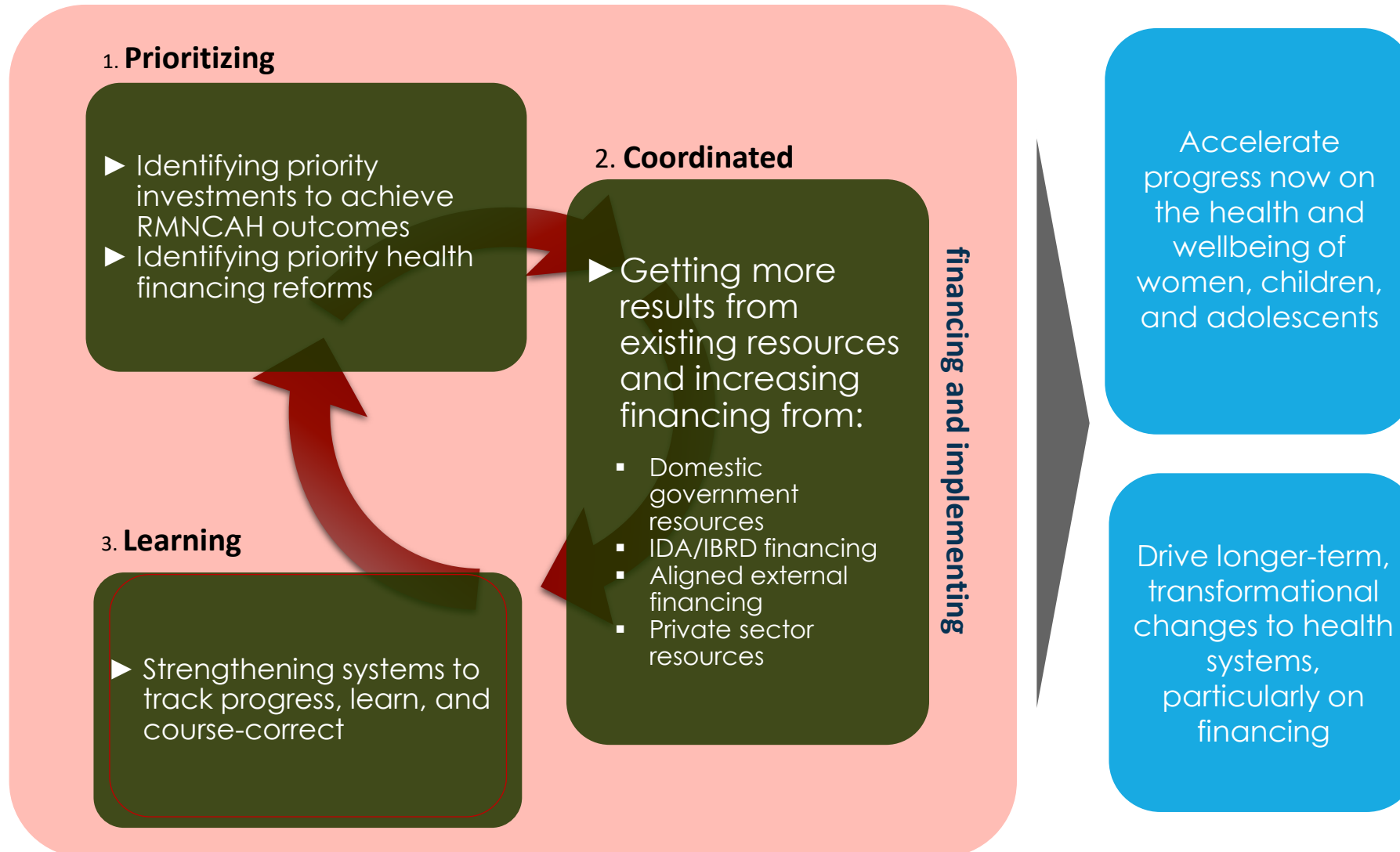
Thank you



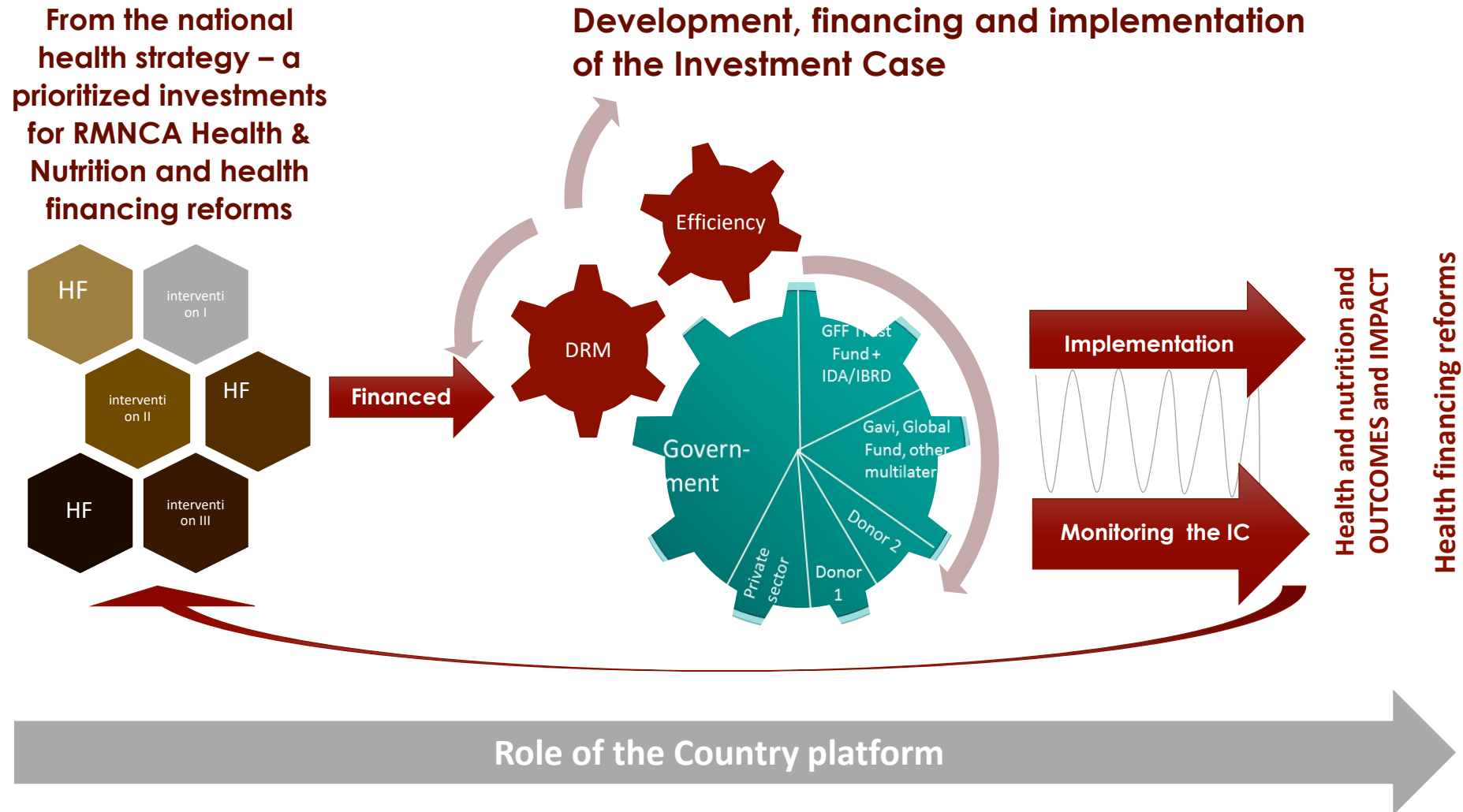


Monitoring results, the GFF and Countdown to 2030 partnership

How the GFF drives results



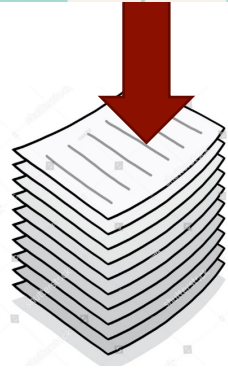
The RMNCAH Investment Case and Health Financing Reforms



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

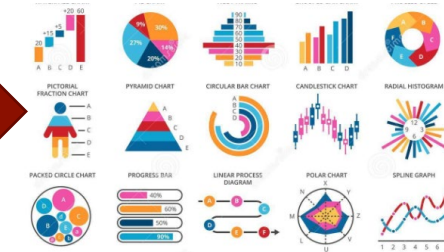
Policies and Data



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Line	Column
Category A	20	12	56	98	14	95	90		
	90	56	54	11	23	77	80		
	65	82	39	22	37	13	70		
	12	64	-76	14	28	13	60		
Category B	48%	12%	98%	90%	44%	12%	12%		
B1	63%	25%	15%	17%	21%	20%	20%		
B2	21%	75%	71%	85%	79%	90%	90%		
B3	76%	67%	44%	20%	64%	33%	33%		
Category C	0.36	0.57	0.44	0.75	0.56	0.73	0.73		
C1	0.28	0.38	0.73	0.69	0.53	0.36	0.36		
C2	0.49	0.73	0.69	0.92	0.25	0.14	0.14		
C3	0.68	1.00	0.76	0.78	0.66	0.96	0.96		



Routine, annual and mid-term reviews



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?



optional



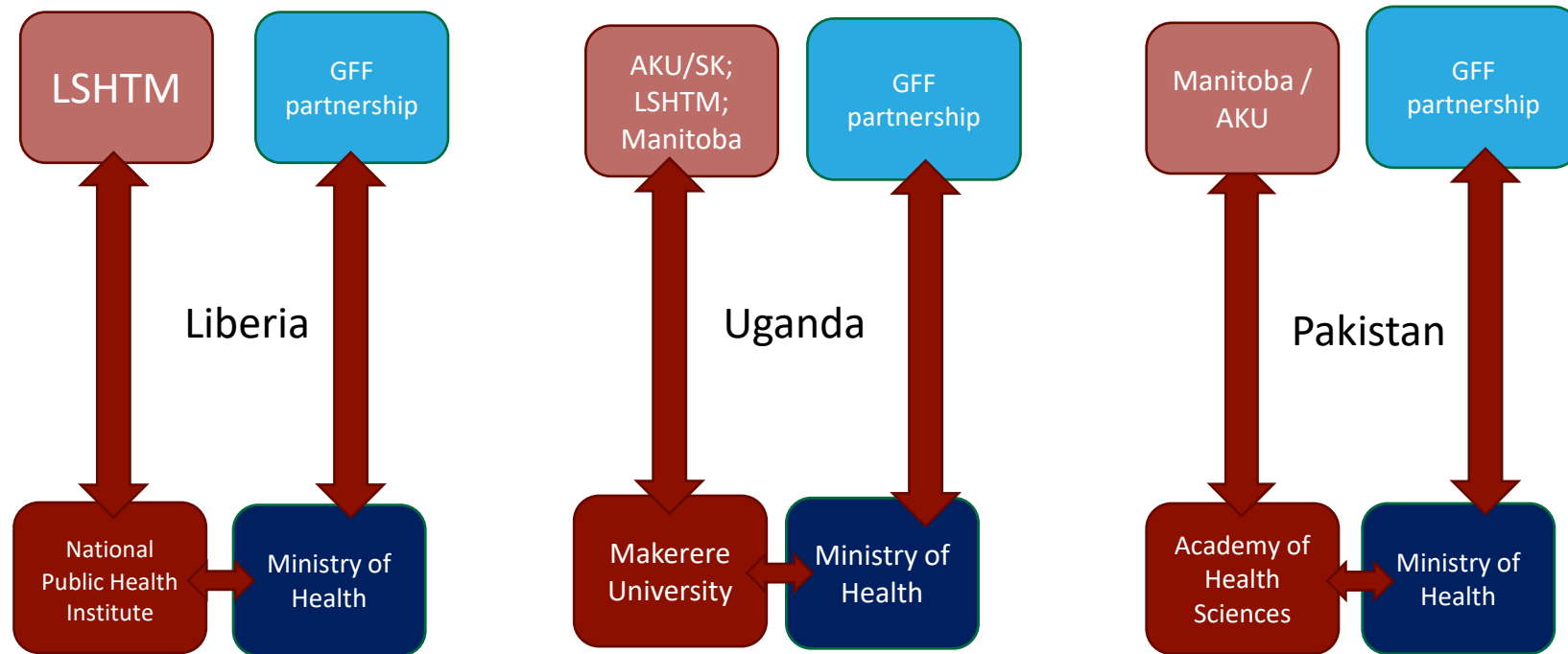
Invest in additional HMIS, data systems, surveys

Invest in HMIS assessment

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

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



Burkina Faso: Organizations, Research team & Investment Case

Institut Supérieur des Sciences de la Population (ISSP), Burkina Faso



Dr. Bruno Y.
Lankoandé



Dr. Roch M.
Millogo

AFRICSanité, 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

National Plan for Health and Social Development (2014-2023):

Mali is implementing a second five-year tranche (2019-23) of its ten-year socio-health development plan, taking a comprehensive approach to health and social development.

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

Niger: Organizations, Team Members & Investment Case

National Institute of Statistics, Niger

ALICHINA KOURGUENI Idrissa

KAMIL Halimatou Amadou Garba

MAAZOU Ibrahim

IDRISSA BOUKARY Abdoulaye

OUSSEINI LAMOU YOUSOUFA

OUSMANE Maimouna

Minister of Public Health, Niger

Mounkaila Aida

YAHABA Mahamadou

UNFPA, Niger

ALZOUMA
Mahamadou

WHO, Niger

TOMBOKOYE
Harouna

UNICEF, Niger

HAROUNA
MOUSSA
Ibrahim

GFF/Ministry of Health, Niger

CHAIBOU BEGOU
Aboubacar

Johns Hopkins University, Bloomberg School of Public Health, USA



Agbessi Amouzou



Almamy Malick Kante



Safia Jiwani

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

Niger: Focus of the collaboration



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



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



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



- At least 1 peer-reviewed publication on the country work
- Systematic archiving of data and methods linked to country repositories

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

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: 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

ISED, Senegal



Prof. Adama
Faye

DPRS, Senegal



Dr. Youssoupha
Ndiaye

DSME, Senegal



Dr. Maty Diagne
Camara

APHRC, Senegal



Dr. Sokhna
Thiam



Ndèye Awa
Fall



Dr. Cheikh
Mbacké Faye

LSHTM, UK



Dr. Melisa Martinez-
Alvarez

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.

Senegal: Focus of the collaboration



Scoping review of key indicators on existing data in the field of RMNCAH+N in Senegal



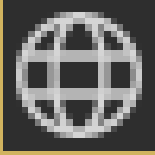
- Two country-led journal articles
- Two policy briefs
- One country factsheet
- One endline national dissemination event



- 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

Women's, Children's & Adolescents' Health

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

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).

RMNCAH Investment Case:

aims to create a sustainable health financing system to guarantee equal access to quality healthcare and ensure financial protection for all

Liberia: Focus of the collaboration



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 Msemu



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



In-depth analyses on specific RMNCAH+N topics



- 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

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

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: 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

Uganda: Organizations, Team Members & Investment Case

Makerere University, School of Public Health, Uganda



Prof Peter Waiswa



Rornald Kananura Muhuzuma

Ministry of Health, Uganda

Jimmy Ogwal

London School of Hygiene & Tropical Medicine, UK

Federica Margini

Hospital for Sick Children, Centre for Global Health, Canada



Dr. Emily Keats



Dr. Zulfiqar Bhutta

University of Manitoba, Institute for Global Public Health, Canada



Prof. Ties Boerma

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

Uganda: Focus of the collaboration



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

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

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)

[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

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



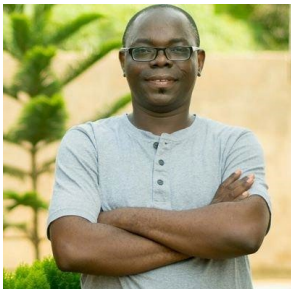
- National and subnational statistical profiles
- Factsheets
- Policy briefs
- Scientific publication(s) from in-depth thematic studies

Ghana: Organizations, Team Members & Investment Case

University of Ghana



Dr. Seth Kwaku
Afagbedzi



Prof. Justice
Nonvignon



Dr. Genevieve
Cecilia Aryeetey

Ghana Health Service



Dominic
Atweam

WorldPop, University of Southampton, UK



Dr. Kristine
Nilsen



Dr. Natalia
Tejedor
Garavito



Prof.
Andrew
Tatum



Winifred W.
Dotse-
Gborgbortsi



Prof. Jim
Wright

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.

Ghana: Focus of the collaboration



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



- 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 context of the UHC roadmap MLE framework

Ethiopia: Organizations, Team Members & Investment Case

Ethiopian Institute of Public Health



Dr. Ashenif Tadele

University of Manitoba, Canada



Dr. Dessalegn Melesse



Professor Ties Boerma

London School of Hygiene and Tropical Medicine, UK



Dr. Neil Spicer



Professor Lars Åke
Persson



Dr. Tanya Marchant

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



- 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



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



- National and subnational statistical profiles; fact sheets; policy briefs
- Scientific publications from in-depth thematic studies, including from the MNH exemplar study

Nigeria: Organizations, Team Members & Investment Case

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

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.

Nigeria: Focus of the collaboration



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.



The Ministry of Health's annual health and nutrition performance reviews (2020, 2021, 2022).

Pakistan: Organizations, Team Members & Investment Case

Health Sciences Academy, Pakistan



Dr. Assad Hafeez

Dr. Nabila Zaka

Mr. Ikhlaz Ahmad

Centre for Global Child Health, Hospital for Sick Children, Canada



Dr. Zulfiqar Bhutta

University of Manitoba, Canada



Prof. Ties Boerma

Tahira Ezra Reza

Faheem Baig

Dr. Ahsan Ahmad

Dr. Faran Emanuel

Prof. James Blanchard

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: Focus of the collaboration



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.

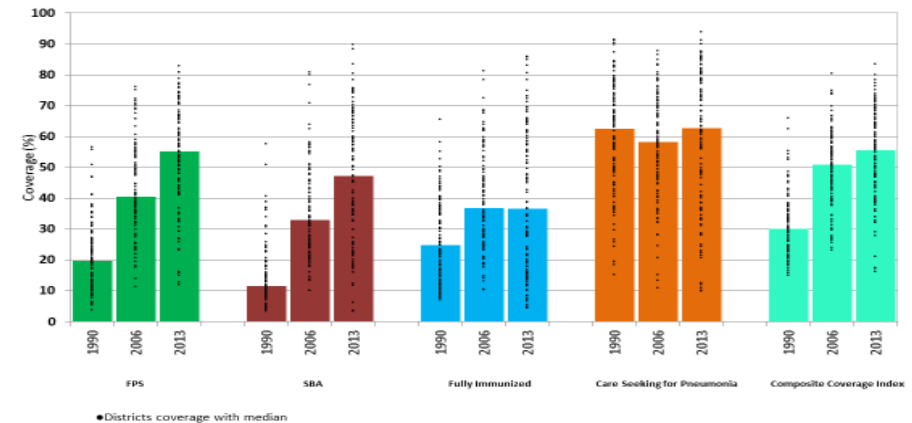


In-depth analyses on specific RMNCAH+N topics: building upon existing work



M&E plan and framework for the new health plans, linked to the GFF investment case for RMNCAH+N

Comparison of key indicators-PDHS 1990-2013



Tajikistan: Organizations, Team Members & Investment Case

**University of Central
Asia, Tajikistan**



Roman
Mogilevskii

**Aga Khan University,
Pakistan**



Jai Das

**Aga Khan Foundation,
Tajikistan**

Lailo
Kurbanmammadova

Consultant, Tajikistan

Maisara Otambekova

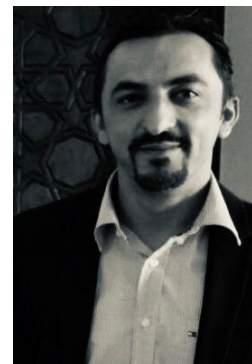
**The Hospital for Sick Children,
Centre for Global Health, Canada**



Zulfiqar Bhutta



Emily C. Keats



Hammad
Durrani

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



Countdown to 2030

Women's, Children's & Adolescents' Health

Data and Analysis Center: Equity

International Center for Equity in Health, Federal University of Pelotas, Brazil



Prof. Aluisio
J D Barros



Prof. Cesar G.
Victora

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

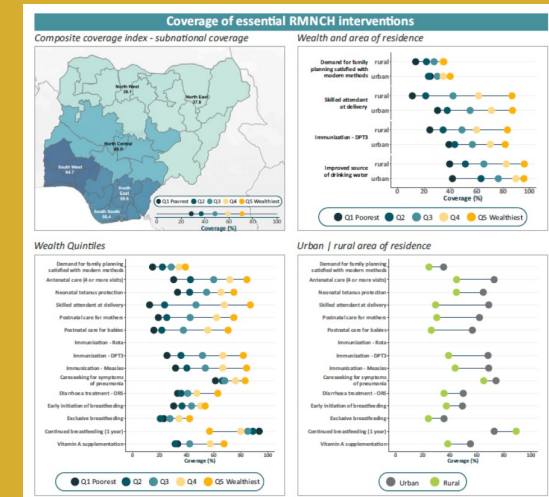
- Statistician
- Computer scientist
- Librarian
- Designer



Equity DAC: Available Resources

Equity Country Profiles

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.



Equity dashboard

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.



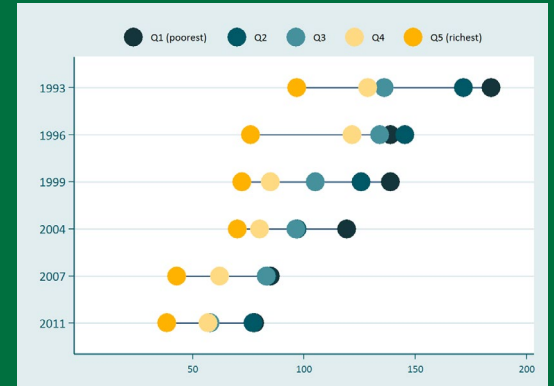
Equity DAC: Available Tools

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")`

Health Financing Data and Analysis Center

London School of Hygiene & Tropical Medicine, UK



Dr Josephine
Borghi



Dr Catherine
Pitt

London School of Hygiene & Tropical Medicine, UK/Medical Research Council Unit, Senegal



Dr Melisa
Martinez-Alvarez

Ifakara Health Institute, Tanzania



Dr Peter Binyaruka

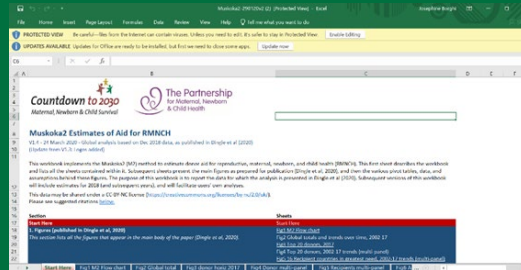
The Health Financing Data and Analysis Center (DAC) monitors global aid flows for RMNCH to support tracking of financing for health and RMNCH within countries to ensure efficient and equitable allocation of funds subnationally.

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

Health Financing DAC: Datasets and Resources

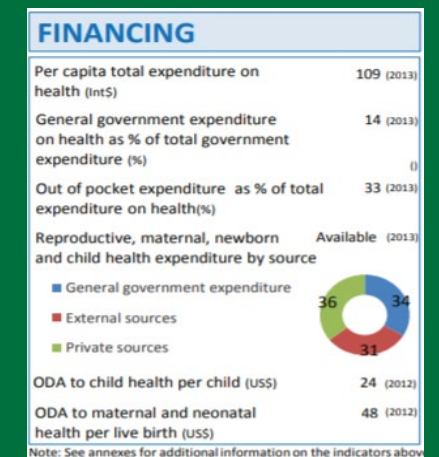
Aid for reproductive, maternal, newborn and child health: data and analysis from application of the Muskoka2 method, 2002-2017 is [available here](#).
Creditor Reporting System (CRS) of the OECD is [available here](#)



Muskoka2 Excel tool: Briefing note 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](#).

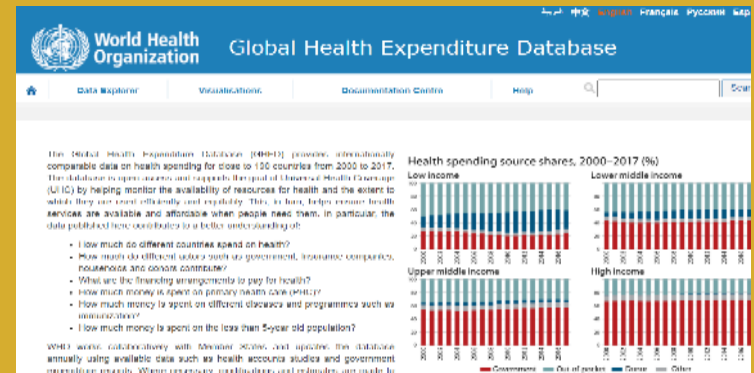


Health Financing DAC: Other Health Financing Resources

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.

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



Aid Data

Geocoded aid data for specific countries

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



Data and Analysis Center: Geospatial Analysis



WorldPop, University of Southampton, UK



Prof. Andrew
Tatem



Dr. Kristine
Nilsen



Dr. Natalia
Tejedor Garavito

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

Geospatial Analysis DAC: Available Resources



Gridded Demographic Data

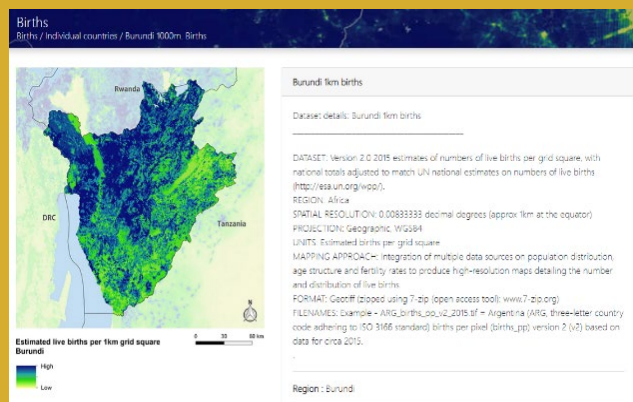
Estimated distribution of births, pregnancies, women of childbearing age (WOCBA), and population broken down by age and sex groups at 1x1km

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

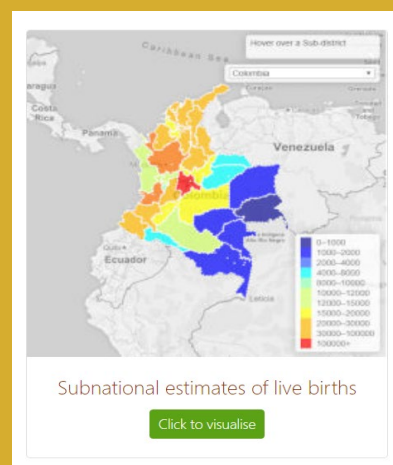
National/Subnational data for births, pregnancies and WOCBA by country

Births data available [here](#)

Pregnancies data available [here](#)

WOCBA subnational data available [here](#)

WOCBA national data available [here](#)



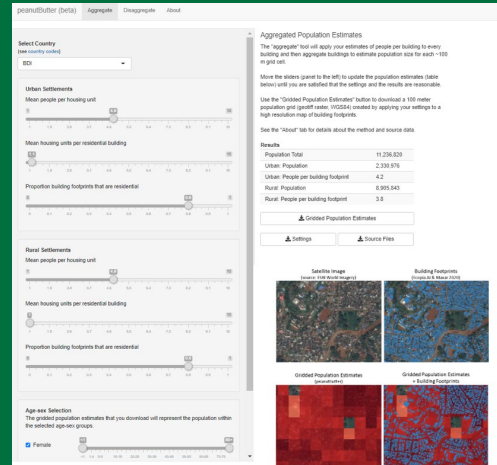
Access to Health Services

Information on access to Health Services and their role in SDG Goal 3 is available [here](#).

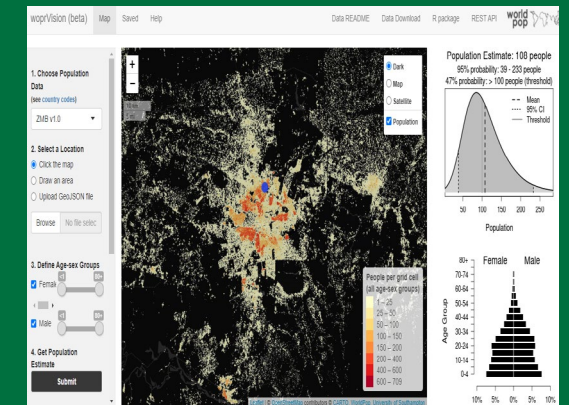
Geospatial DAC: Available Tools



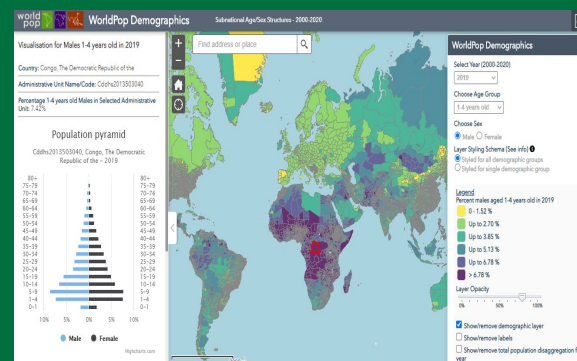
Gridded mapping of population is [available here](#). The *peanutButter* web application allows you to produce gridded population estimates using your own data on urban/rural characteristics.



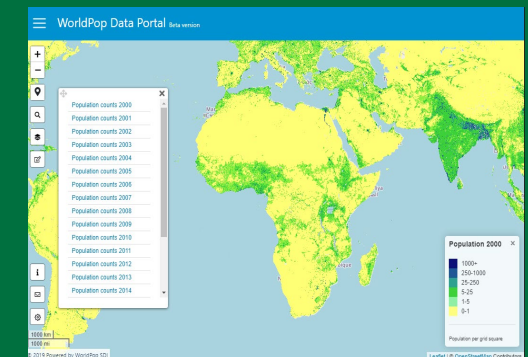
Gridded estimates of population for selected countries is [available here](#). WoprVision is an interactive web map that allows you to query population estimates for specific locations and demographic groups



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



Global gridded population data are [available here](#). The tool allows the delineation of areas to query, returning zonal statistics.



Data and Analysis Center: Effective Coverage

Johns Hopkins University, USA



Agbessi Amouzou



Abdoulaye Maiga



Elizabeth Hazel



Safia Jiwani



George Mwinnyaa

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.

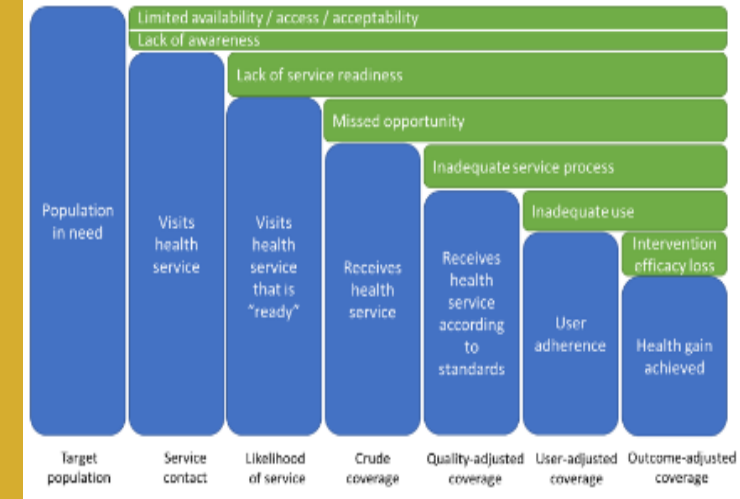
Activities include:

- 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.

Effective Coverage DAC: Available Resources

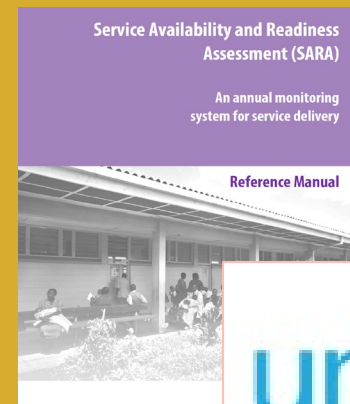
Cascade for effective coverage measurement

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.

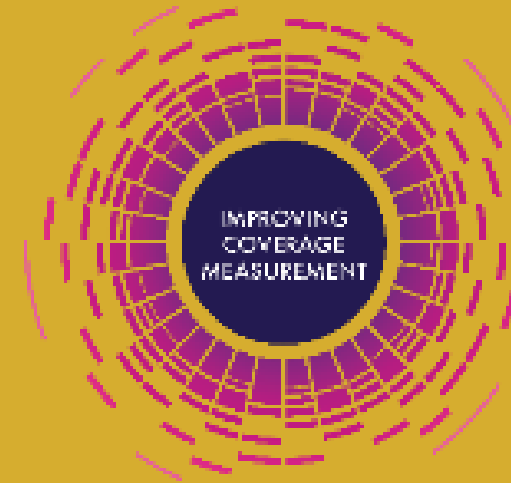
Protocols and code for calculating effective coverage using health facility surveys (such as SPA and SARA) and households surveys (DHS/MICS), forthcoming [Service Availability and Readiness Assessment \(SARA\) Tool](#) [Service Provision Assessments \(SPA\)](#) [DHS Questionnaire](#) [MICS](#)



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](#).



Data and Analysis Center: Monitoring Health Services

APHRC, Senegal & Kenya



Cheikh
Faye



Martin
Kavao
Mutua



Moussa
Bagayoko



Sokhna
Thiam

University of Manitoba, Canada



Ties
Boerma



Dessalegn
Melesse

Johns Hopkins Bloomberg School of Public Health, USA



Abdoulaye
Maiga



Agbessi
Amouzou

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.

Monitoring Health Services DAC: Key activities (1)

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



Monitoring Health Services DAC: Key activities (2)

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:

Maïga A, Jiwani SS, Mutua MK, et al. Generating statistics from health facility data: the state of routine health information systems in Eastern and Southern Africa. *BMJ Global Health* 2019; 4:e001849. (based on regional workshops)

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

Data and Analysis Center: Health Policy and Systems Drivers

University of the Western Cape, South Africa



Asha George



Mary Kinney

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 DAC: Available Resources and Key Reading

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).

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



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

Key literature

- George A, et al. **Lenses and levels: the why, what and how of measuring health system drivers of women's, children's and adolescents' health with a governance focus**. BMJ Glob Health 2019;4:i143-i153. doi:10.1136/bmjgh-2018-001316
- Singh NS, et al. **Countdown to 2015 country case studies: systematic tools to address the "black box" of health systems and policy assessment**. BMC Public Health. 2016 Sep 12;16 Suppl 2(Suppl 2):790. doi: 10.1186/s12889-016-3402-5.



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

Countdown DAC sessions on the web – Basic Series Quart 1 2021

Date	Title	Facilitators
January 12 9-10a EST	Equity analysis for annual reviews: methods and tools	Cesar Victora and Aluisio Barros, Federal University of Pelotas
January 26 9-10a EST	Health facility data analysis: adjustment and denominators	Cheikh Faye, APHRC and Ties Boerma, Univ Manitoba
February 9 9-10a EST	Geospatial methods and tools for annual reviews	Kristine Nilsen and Andy Tatem, University of Southampton
February 23 9-10a EST	Health financing analysis for annual reviews	Josephine Borghi and Catherine Pitt, LSHTM
March 9, 9-10a EST	Health policy analyses for annual reviews	Asha George and Mary Kinney, University of Western Cape
March 23, 9-10a EST	Measurement of effective coverage for annual reviews	Agbessi Amouzou and Melinda Munos, Johns Hopkins University

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

Q&A

You asked:

What happens when I raise my hand?

18:03

Molly Parker answered:

I can take you off of mute.

18:04

Please input your question

☐ Send Anonymously

Send

Countdown's Communication and Policy Engagement Team: How we can Support



BENIN

DOCUMENT D'ORIENTATION
STRATÉGIQUE
Août 2020

Agir pour l'éradication du retard de croissance chez les enfants moins de 5 ans au Bénin



de nutrition de qualité pour atteindre l'objectif de Développement Durable (ODD) 2 qui prône l'élimination de la faim. Des interventions basées sur une approche multisectorielle sont menées dans les structures de santé et dans la communauté pour améliorer la pratique alimentaire et nutritionnelle de la population en général et des cibles vulnérables en particulier. Malgré ces actions, l'évolution des indicateurs reste lente notamment la prévalence du retard de croissance. Des investissements et des mesures supplémentaires sont donc nécessaires pour atteindre la cible fixée par l'Assemblée mondiale de la Santé pour 2025.

Dans le cadre de l'Initiative Countdown 2030 pour la

Countdown to 2030 West African Initiative on Nutrition

Leaving No Woman and Child Behind:
Inequalities in Nutrition Coverage and Status Among
Women, Children and Adolescents in West Africa

1. Le contexte et le problème

Le retard de croissance est l'un des principaux obstacles au développement humain, touchant près de 162 millions d'enfants de moins de 5 ans dans le monde. Cause de séquelles neurologiques irréversibles dans l'enfance, le retard de croissance réduit la capacité physique et intellectuelle de l'homme pour sa contribution à la création de la richesse.

En 2012, l'Assemblée Mondiale de la Santé a redéfini ses priorités dans le plan d'application exhaustif concernant la nutrition chez la mère, le nourrisson et le jeune enfant (WHA65.6, 2012). Une série de mesures avaient été retenues pour améliorer l'état nutritionnel des cibles vulnérables à l'horizon 2025. L'une de ces mesures est de "réduire de 40% le nombre d'enfants de moins de 5 ans présentant un retard de croissance". Pour ce faire, les États et leurs partenaires devaient mettre en œuvre des stratégies et interventions basées sur les évidences et susceptibles d'accélérer les progrès actuels en vue d'une réduction significative du retard de croissance chez les enfants de moins de 5 ans.

Au Bénin, le Plan National de Développement Sanitaire 2018-2022 préconise le renforcement de l'offre de service



NIGER

DOCUMENT D'ORIENTATION
STRATÉGIQUE
Août 2020

S'attaquer au retard de croissance, c'est sauver la vie et l'avenir



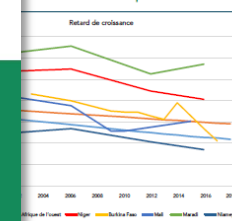
Dans le cadre de l'Initiative Countdown 2030 pour la santé des femmes, des enfants et des adolescents (<http://countdown2030.org/>), une équipe du Niger a travaillé aux côtés d'autres pays d'Afrique de l'Ouest pour conduire des analyses approfondies sur les progrès et les inégalités par rapport au retard de croissance au Niger.

Ces analyses ont porté sur les données des Enquêtes Démographiques et de Santé du Niger (EDSN) de 1998, 2006 et 2012 ainsi que des données récentes recueillies lors des enquêtes nutritionnelles SMART de 2012 à 2016. Elles se sont concentrées principalement sur le retard de croissance parmi les enfants de moins de cinq ans.

Le présent document est un résumé des résultats de ces analyses, destinés aux pouvoirs publics, partenaires au développement et acteurs communautaires, dans le but d'informer des stratégies et d'actions qui s'avèrent nécessaires pour accompagner le pays vers l'atteinte des ODD, particulièrement ODD 2, et 10 relatif à la fin de la faim dans le monde et la réduction des

Principaux résultats

Retard de croissance: Ampleur et défis



Niveau de retard de croissance dans la sous-région

Niger - Document d'orientation stratégique

1

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

The screenshot shows a web browser window with the URL <https://www.staging1.countdown2030.org/country-collaborations/nigeria>. The page features the 'Countdown to 2030' logo with the subtitle 'Women's, Children's & Adolescents' Health'. A navigation bar includes links for 'ABOUT COUNTDOWN', 'COUNTRY COLLABORATIONS', 'RESOURCES FOR ANALYSIS', 'PUBLICATIONS', 'COUNTRY PROFILES', and 'TEMP'. The main heading is 'NIGERIA'. A descriptive paragraph states: '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)'. Below this, a section titled 'The Nigeria Countdown country collaboration focuses on data analysis to inform:' is followed by a bulleted list of activities. On the right, three buttons are visible: 'Nigeria Country Profile', 'Nigeria Dashboard', and 'Nigeria Equity Profile'. At the bottom right, there are links for 'Country and Regional work' and 'Country Profiles'.

Height and body-mass index tr X Nigeria – Countdown 2030 X +

← → ↻ 🏠 <https://www.staging1.countdown2030.org/country-collaborations/nigeria> 📄 ⋮ 🔒 ⭐ 🏠 📖 👤 🌐 📄 SC ☰

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

 Nigeria Country Profile

 Nigeria Dashboard

 Nigeria Equity Profile

Country and Regional work

Country Profiles

Acknowledgements



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