

Indicators of Maternal, Newborn & Child Health in Sierra Leone



These key indicators represent the continuum of care for maternal and newborn health.

These indicators have been disaggregated to determine inequalities in access to services or health outcomes.



1360

**MATERNAL
DEATHS PER
100,000
LIVE BIRTHS
IN SIERRA LEONE**



290

**MATERNAL
DEATHS PER
100,000
LIVE BIRTHS
IN RWANDA**



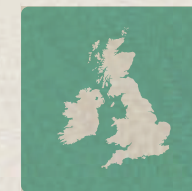
129

**MATERNAL
DEATHS PER
100,000
LIVE BIRTHS
IN BOTSWANA**



9

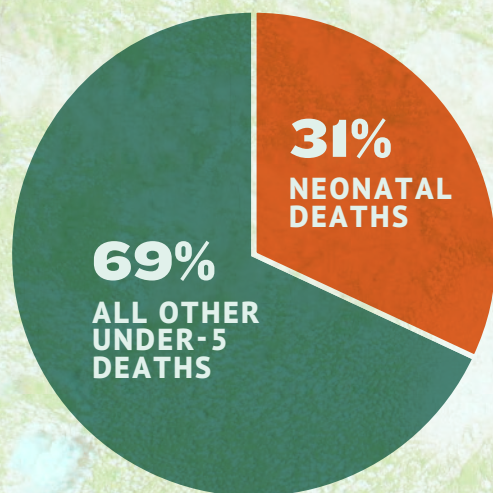
**MATERNAL
DEATHS PER
100,000
LIVE BIRTHS
IN THE UK**



Data source: WHO, UNICEF, UNFPA, World Bank Group, & the United Nations Population Division. (2015). Trends in Maternal Mortality: 1990 – 2015. Estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division. Geneva: WHO.



Neonatal Mortality rate per 1000 live births by Region



Neonatal mortality is the death of a child who is born alive but dies within the first 28 days of life and is measured as the number of deaths for each 1000 live births. In Sierra Leone, neonatal deaths account for 31% of all deaths of children under-five years.

REGION	DEATHS PER 1000 LIVE BIRTHS
NORTHERN	36
EASTERN	44
SOUTHERN	45
WESTERN	56
TOTAL	39

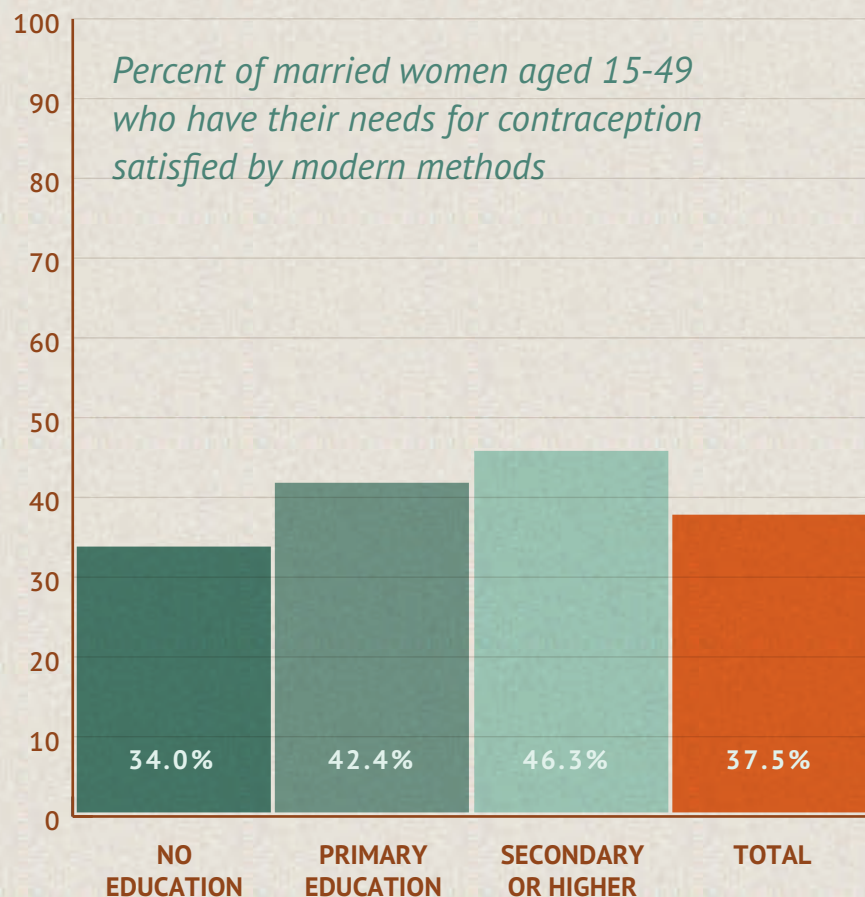


Data source: Statistics Sierra Leone & ICF International. (2014). *Sierra Leone Demographic and Health Survey 2013*. Freetown & Rockville: SSL & ICF International; UNICEF, World Health Organization, The World Bank, & United Nations Population Division. (2015). *Levels and Trends in Child Mortality Report 2015: Estimates Developed by the UN Inter-agency Group for Child Mortality Estimation*. New York: UNICEF.

Demand for Family Planning Satisfied by Modern Methods

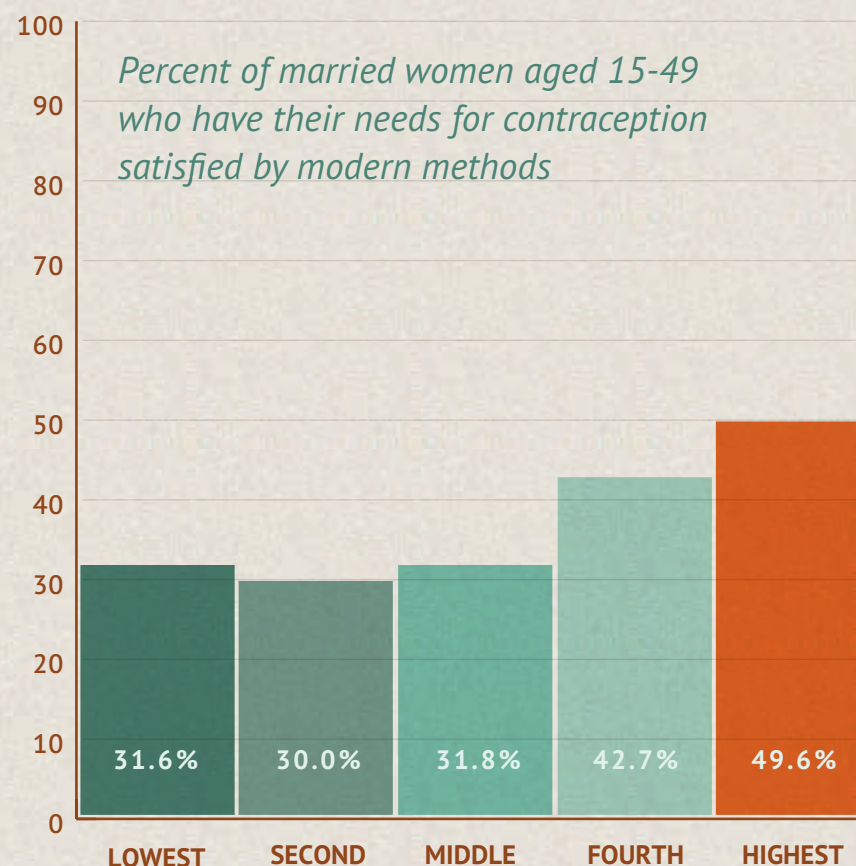


Education



EDUCATION LEVEL

Household Wealth



HOUSEHOLD INCOME LEVEL

Using a method of contraception can help reduce the number of maternal deaths by reducing unwanted pregnancies and thereby reducing the

overall number of births. Women who say they do not want more children, or not for at least the next two years, are considered to have a demand for family

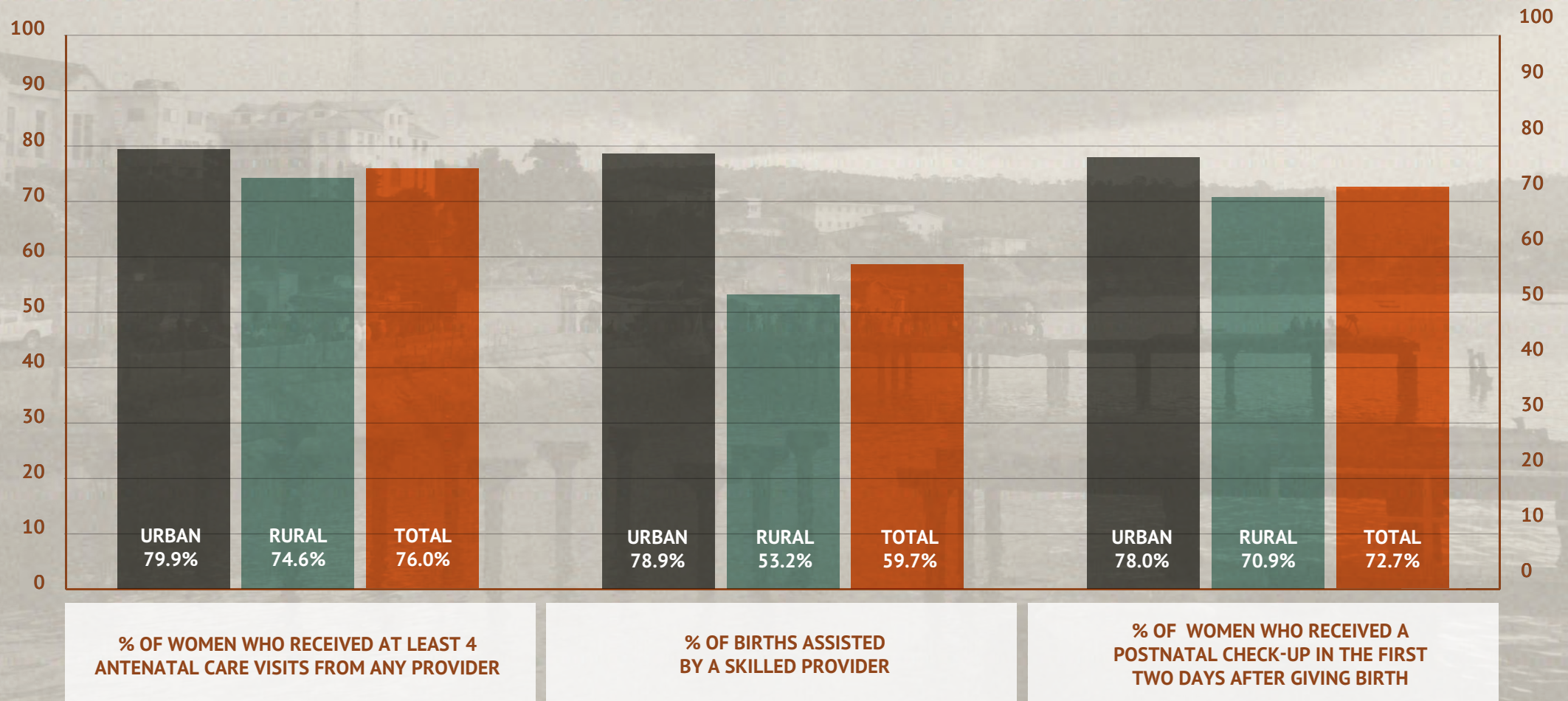
planning. Demand for family planning satisfied by modern methods is the percentage of these women who are using a modern contraceptive method.



Care provided by Skilled Attendant by Urban and Rural Residence

Maternal and neonatal deaths can be prevented by women getting proper health care from a skilled provider during pregnancy, at the time of delivery and shortly after the baby is born. This is known as the continuum of care. A skilled provider includes: doctor, nurse, midwife and MCH aide.

Women who are living in rural areas in Sierra Leone are less likely to access skilled care at every point on the continuum.

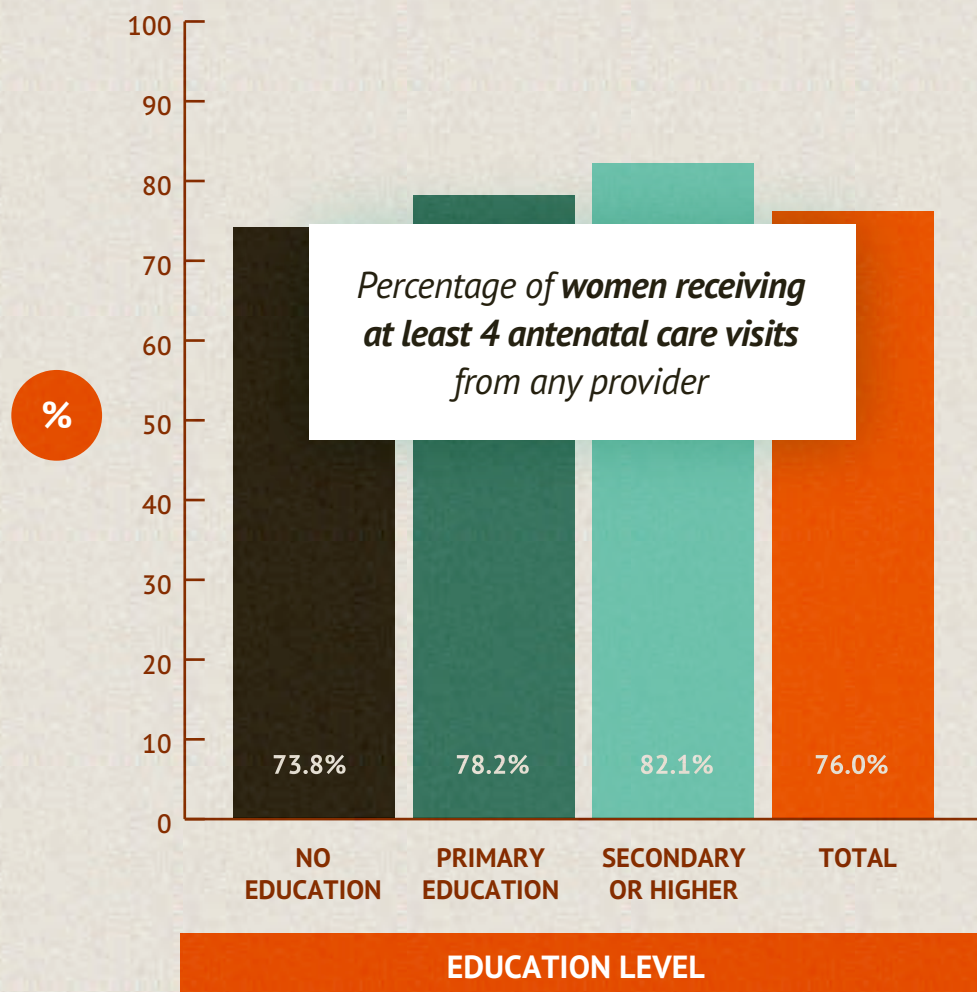


Antenatal Care and Skilled Attendant at Delivery by Mothers Education Level

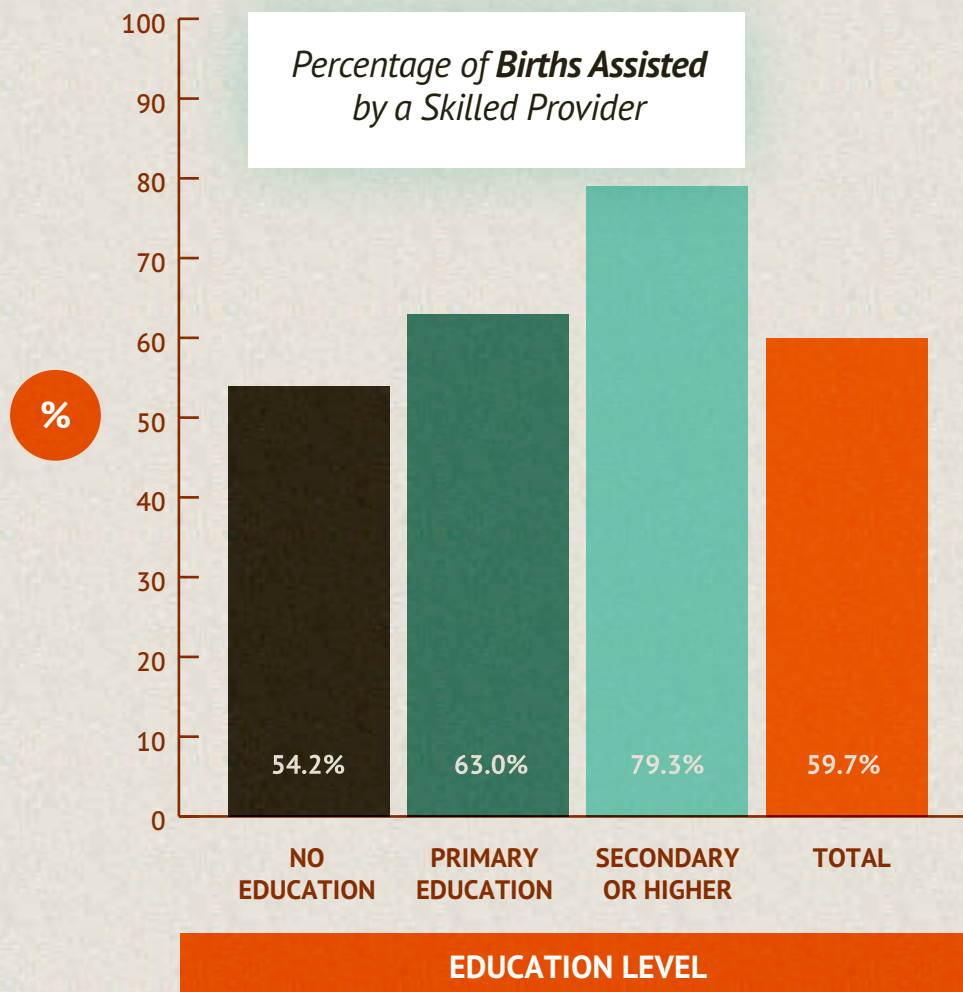


The higher a woman's level of education the more likely she is to be able to access care from a skilled provider for

antenatal and delivery care. A skilled provider includes: doctor, nurse, midwife and MCH aide.



Data Source: DHS 2013 cited in Countdown to 2015 & International Centre for Equity in Health. (2015). Countdown Equity Analyses by Country 2015. Geneva: WHO & UNICEF.



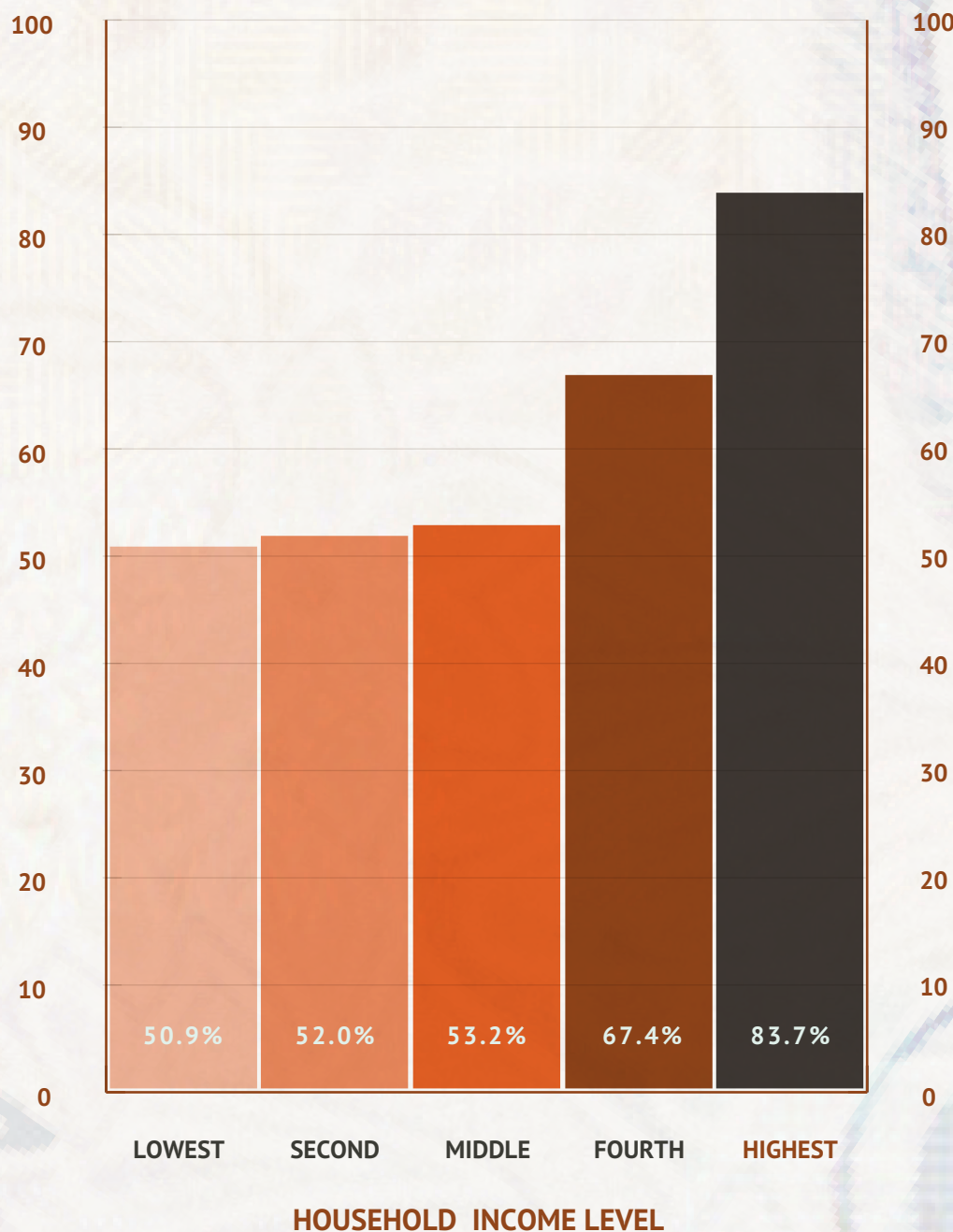
Data source: Statistics Sierra Leone & ICF International. (2014). Sierra Leone Demographic and Health Survey 2013. Freetown & Rockville: SSL & ICF International.

Skilled Attendant at Delivery by Household Wealth

Having a skilled attendant at delivery is vitally important because most maternal deaths arise from complications during or shortly after delivery. Even if antenatal care is received any delivery can become a complicated one and it is not always possible to predict complications.

Data source: Statistics Sierra Leone & ICF International. (2014). Sierra Leone Demographic and Health Survey 2013. Freetown & Rockville: SSL & ICF International.

Percentage of births assisted by a skilled provider by household wealth quintile

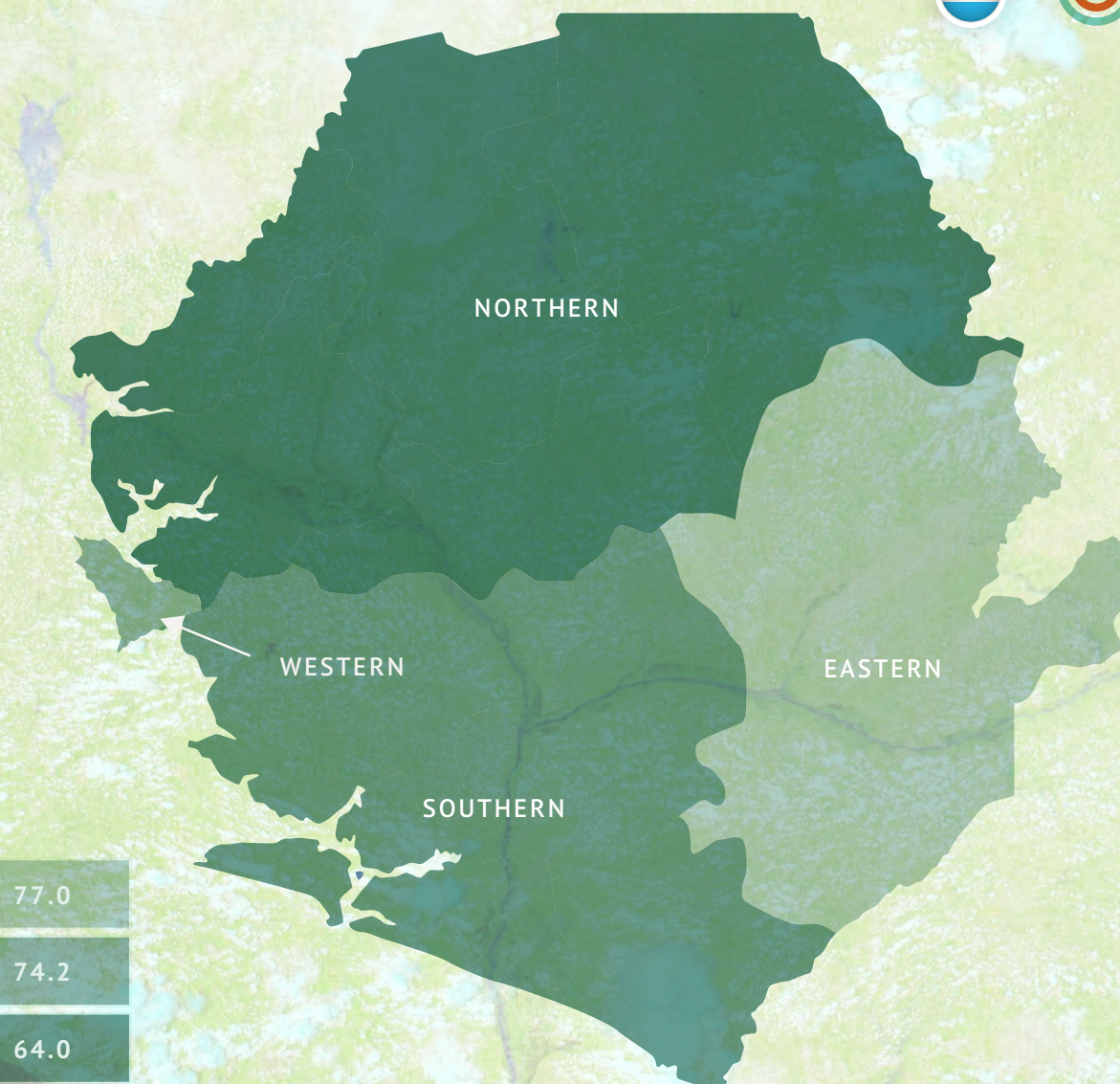




Skilled attendant at delivery by Region

There are regional differences in the percentage of women who have a skilled attendant at delivery in Sierra Leone. The percentage of women who have a skilled attendant at delivery is highest in the Western region and lowest in the Northern region. A skilled provider includes: doctor, nurse, midwife and MCH aide.

REGION	% OF BIRTHS ASSISTED BY A SKILLED PROVIDER
EASTERN	77.0
WESTERN	74.2
SOUTHERN	64.0
NORTHERN	41.5
TOTAL	59.7





E4A-MamaYe is about ensuring Africa's mothers and babies survive pregnancy and childbirth.

The programme focuses on using strong evidence to hold key decision makers to account in order to advocate and catalyse change for the health of women and babies at regional, national and sub-national levels in Ghana, Malawi, Nigeria, Sierra Leone, Tanzania, Kenya and Ethiopia.

It is a campaign to change fatalism to hope; apathy to action; maternal survival from side-issues to political priority; and best guesses into hard facts.

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