

# Indicators of Maternal, Newborn & Child Health in Nigeria



*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.*





# 814

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



# 290

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



# 129

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



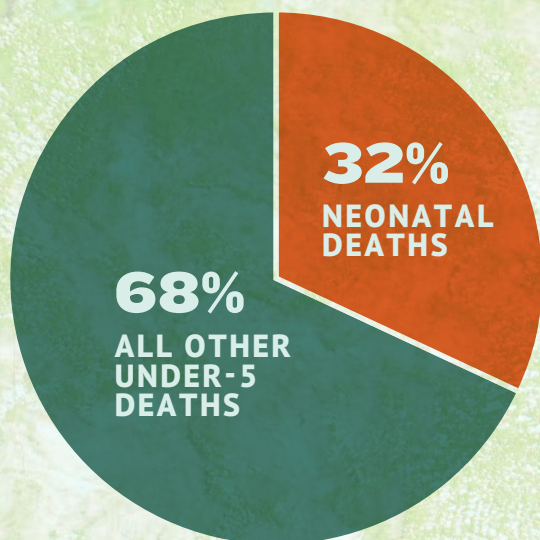
# 9

**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.*

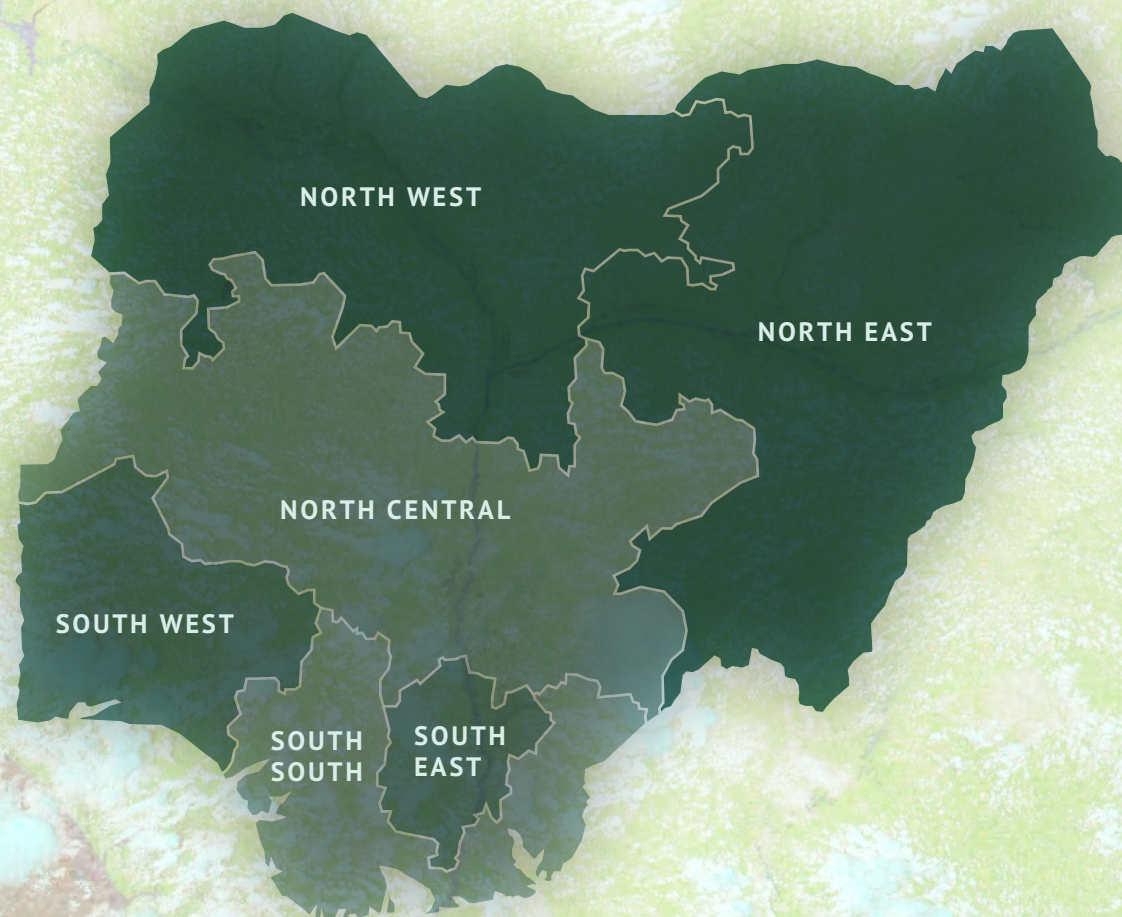




## Neonatal Mortality rate per 1000 live births by Region

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 Nigeria, neonatal deaths account for 32% of all under-five deaths.

REGION	DEATHS PER 1000 LIVE BIRTHS
SOUTH SOUTH	32
NORTH CENTRAL	35
SOUTH EAST	37
SOUTH WEST	39
NORTH EAST	43
NORTH WEST	44
TOTAL	37

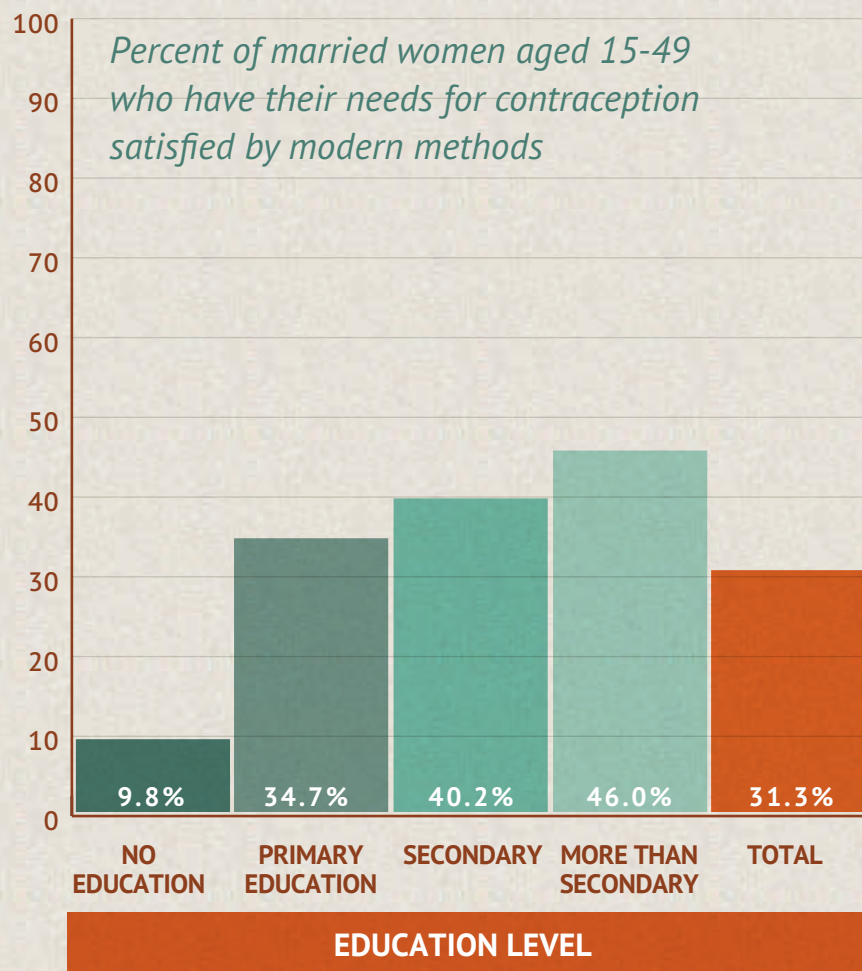




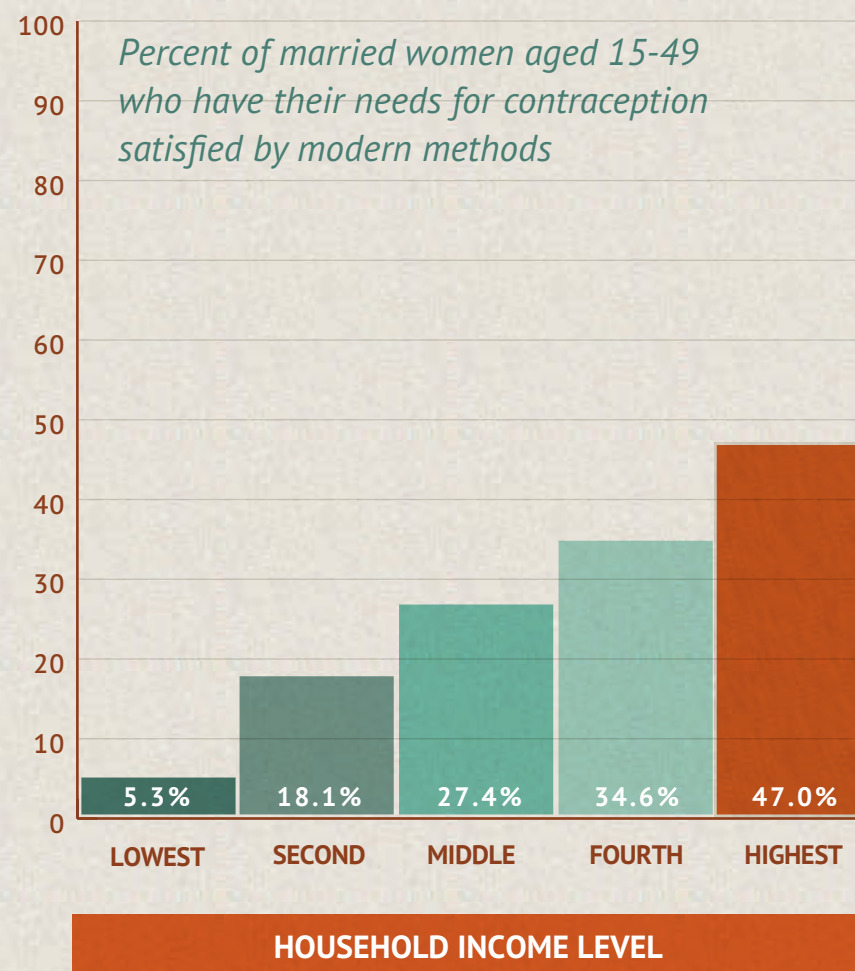
# Demand for Family Planning Satisfied by Modern Methods



## Education



## Household Wealth



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.

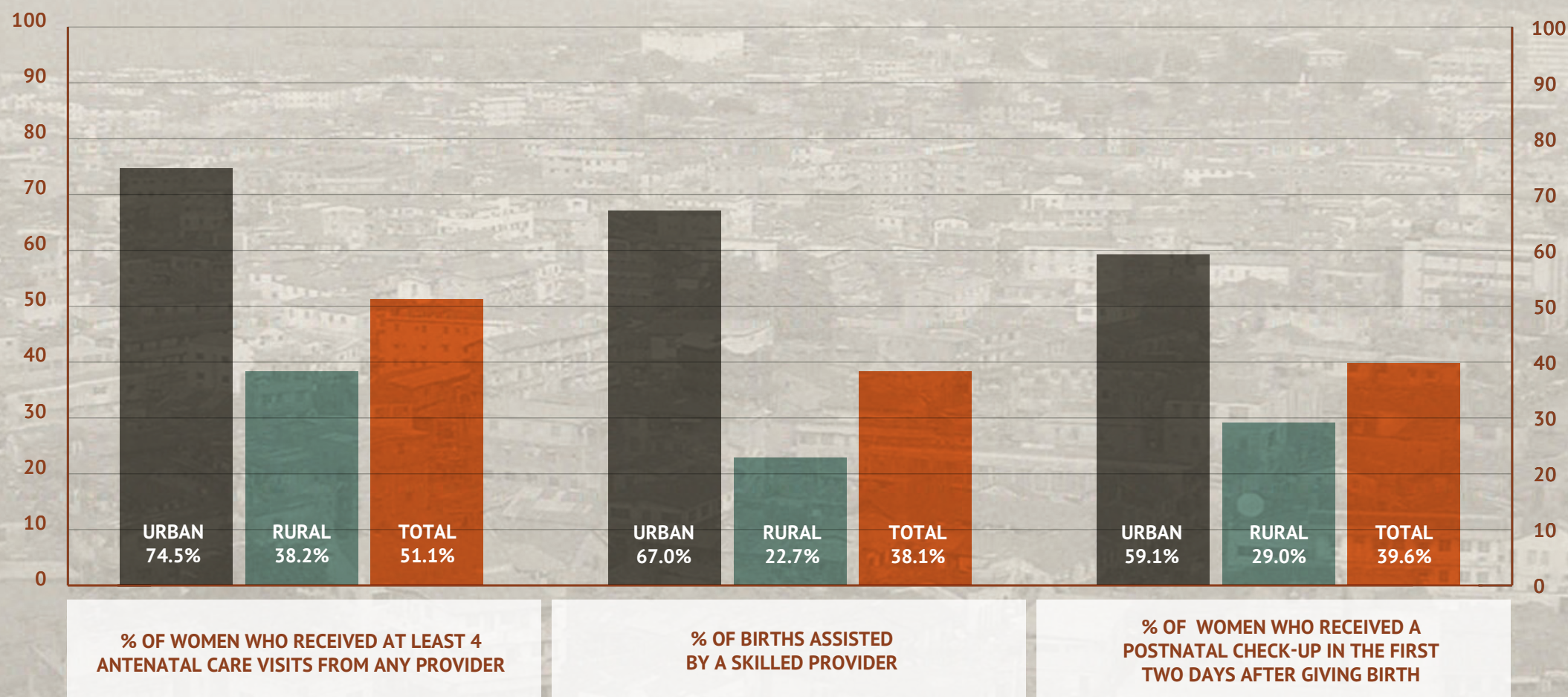
Data Source: National Population Commission [Nigeria], & ICF International. (2013).  
Nigeria Demographic and Health Survey 2013. Abuja & Rockville: NPC & ICF.



## 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 or auxiliary nurse / midwife. Women who are living in rural areas in Nigeria are around half as likely to be able to access care as those living in urban areas at every point on the continuum.



Data Source: National Population Commission [Nigeria], & ICF International. (2013).  
Nigeria Demographic and Health Survey 2013. Abuja & Rockville: NPC & ICF.

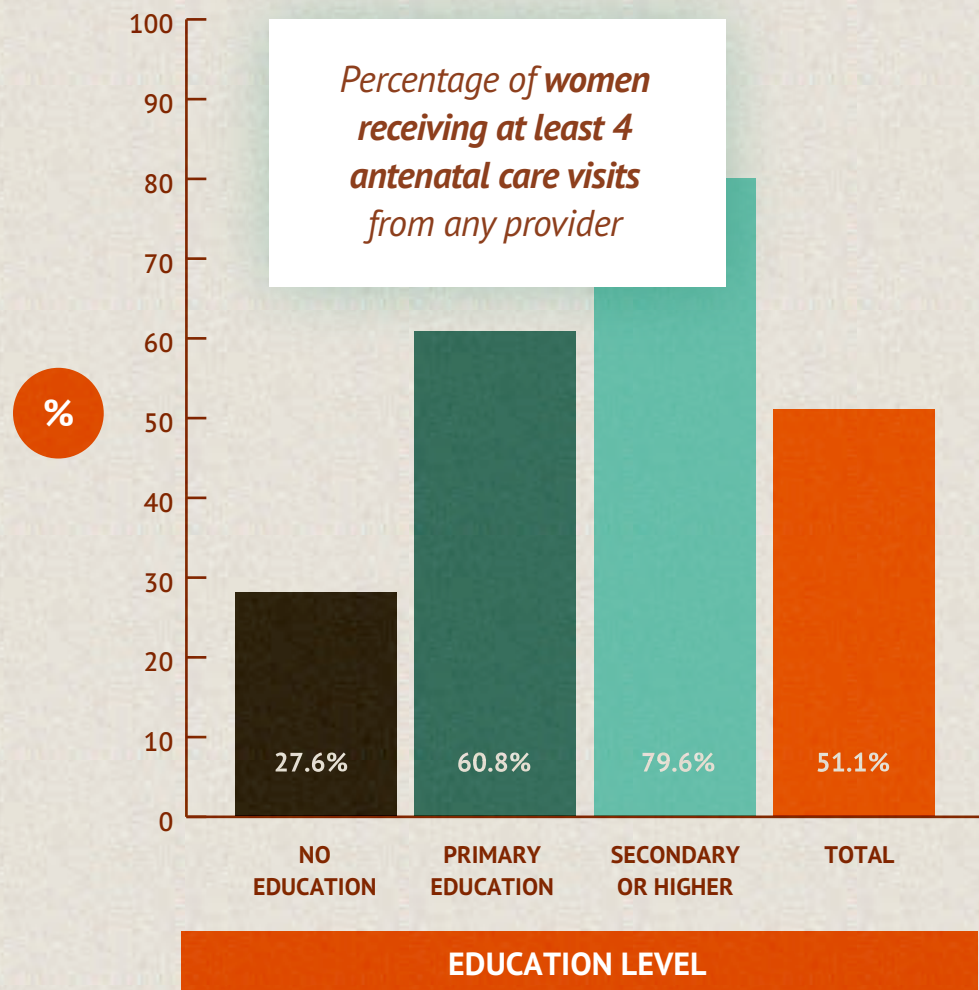


# Antenatal Care and Skilled Attendant at Delivery by Mothers Education Level

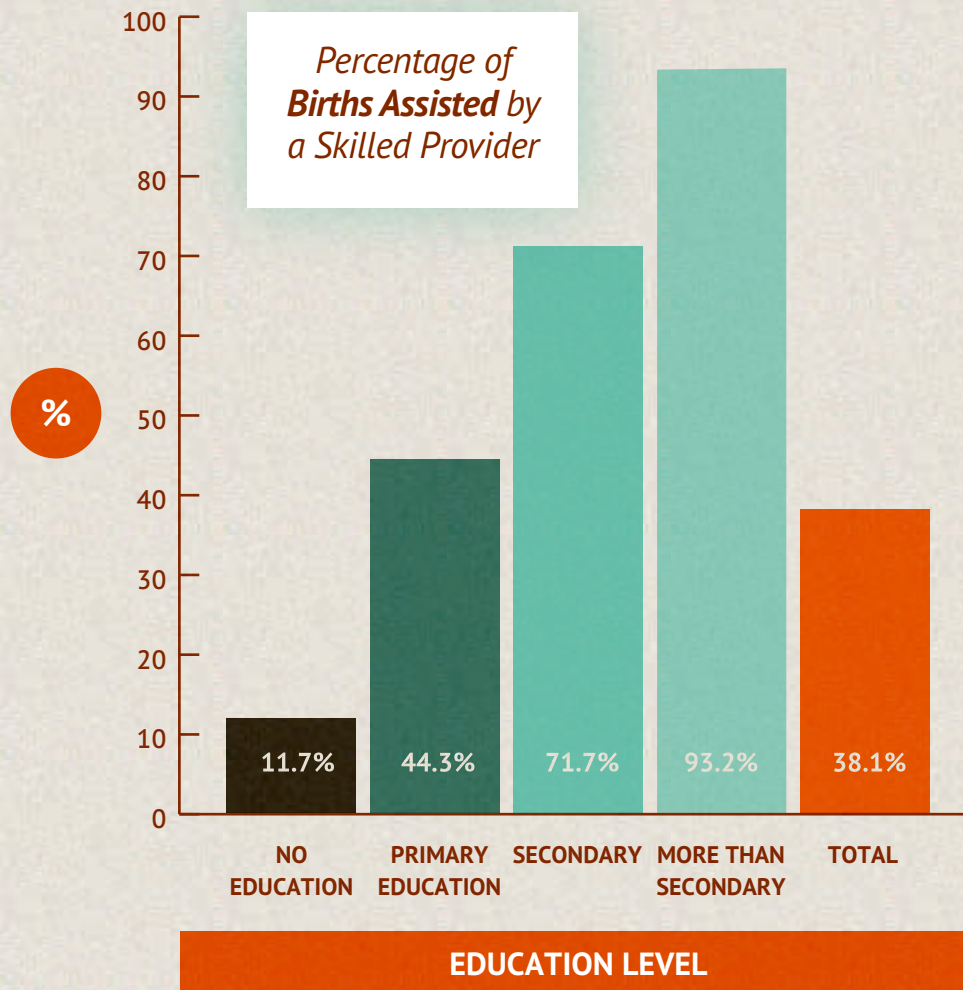


The higher a woman's education the more likely she is to receive at least 4 antenatal visits and delivery care from a skilled provider. In Nigeria a woman with secondary education

is almost 6 times more likely to have a skilled attendant at delivery than a woman with no education. A skilled provider includes: doctor, nurse, midwife or auxiliary nurse / midwife.



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



Data Source: National Population Commission [Nigeria], & ICF International. (2013). Nigeria Demographic and Health Survey 2013. Abuja & Rockville: NPC & ICF.



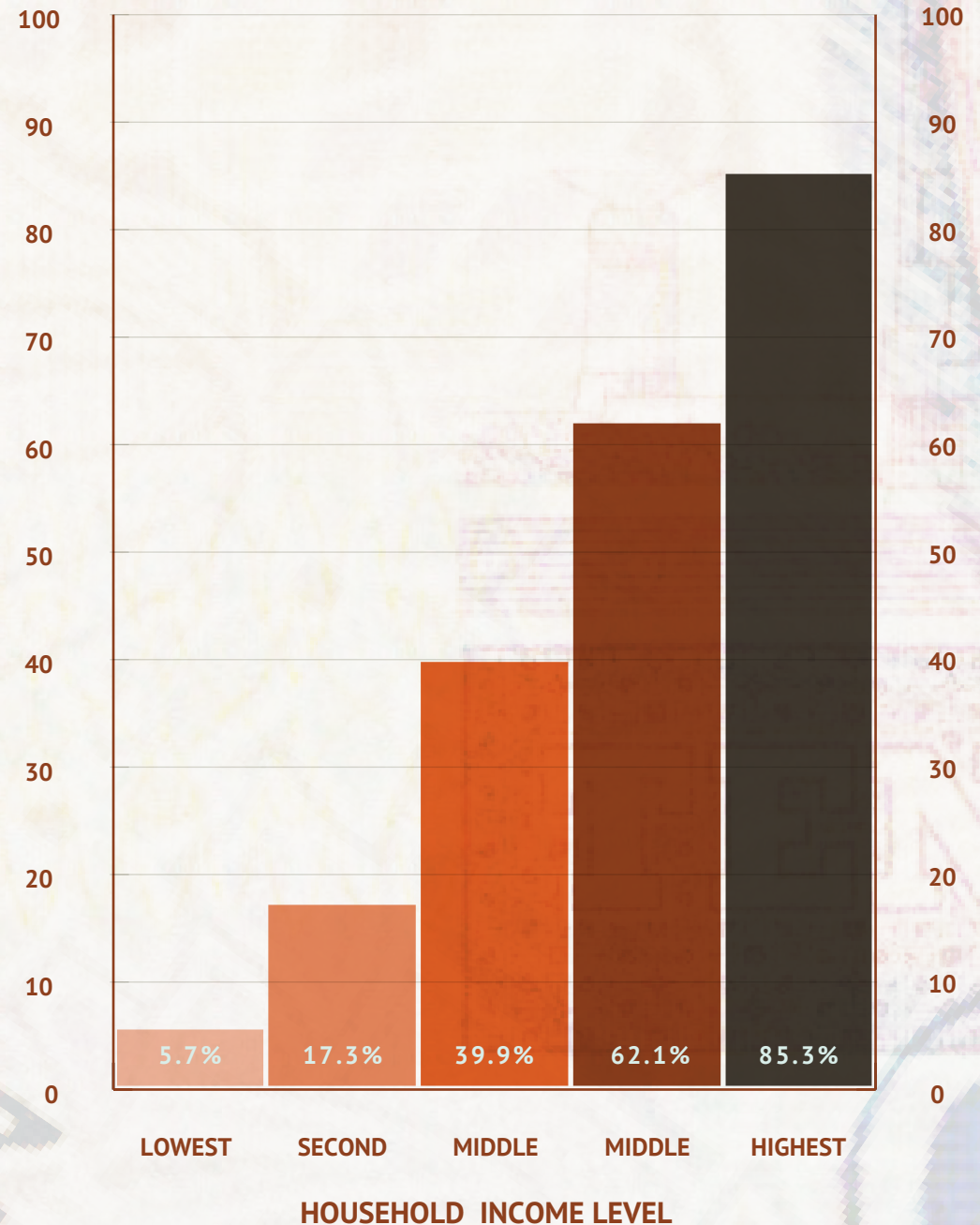
## Skilled Attendant at Delivery by Household Wealth

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.

In Nigeria women in the top 20% of the population according to household wealth are about 15 times more likely to have a skilled attendant at delivery than those women in the bottom 20% of the population. A skilled provider includes: doctor, nurse, midwife or auxiliary nurse / midwife.

*Data Source: National Population Commission [Nigeria], & ICF International. (2013). Nigeria Demographic and Health Survey 2013. Abuja & Rockville: NPC & ICF. International.*

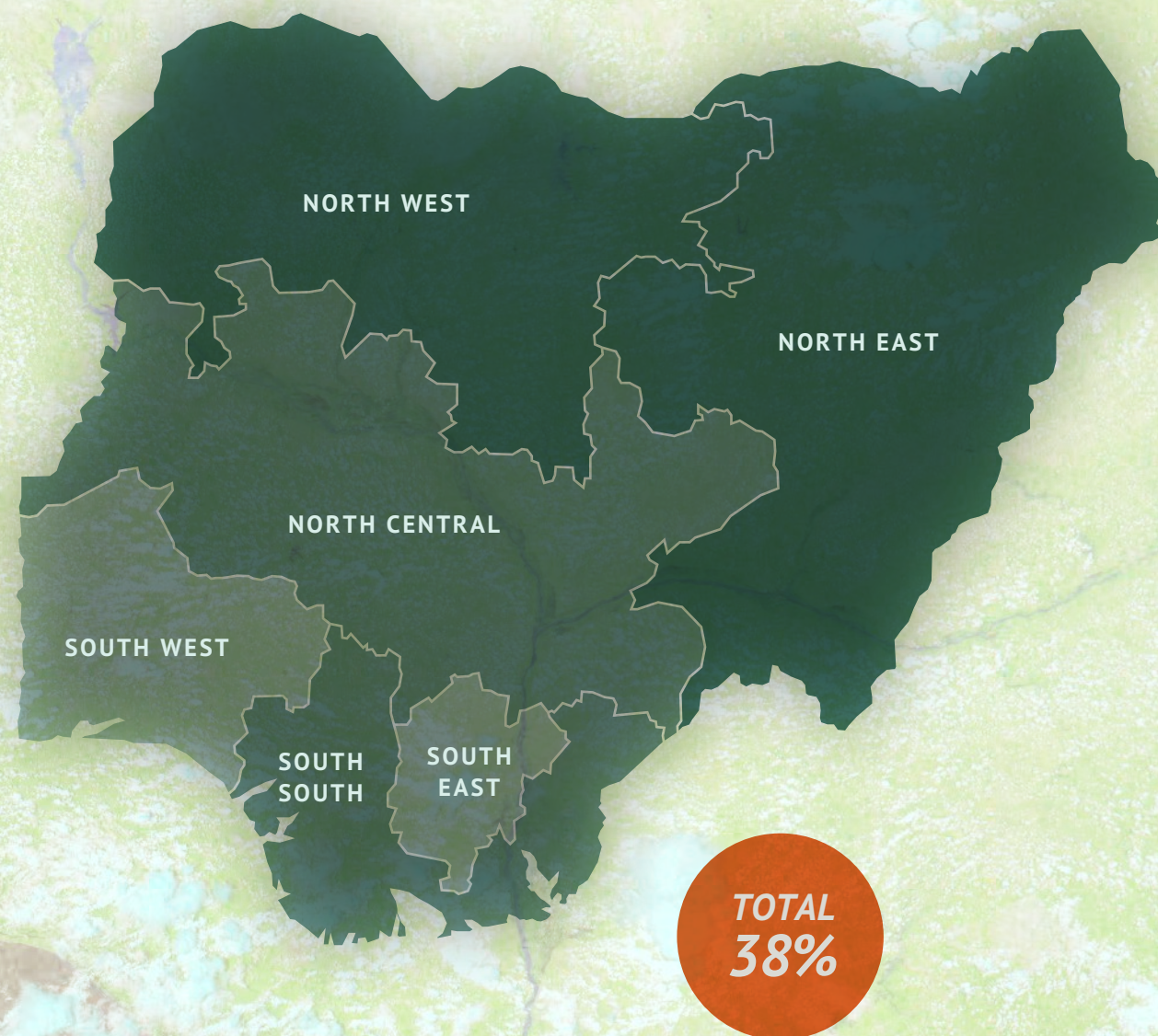
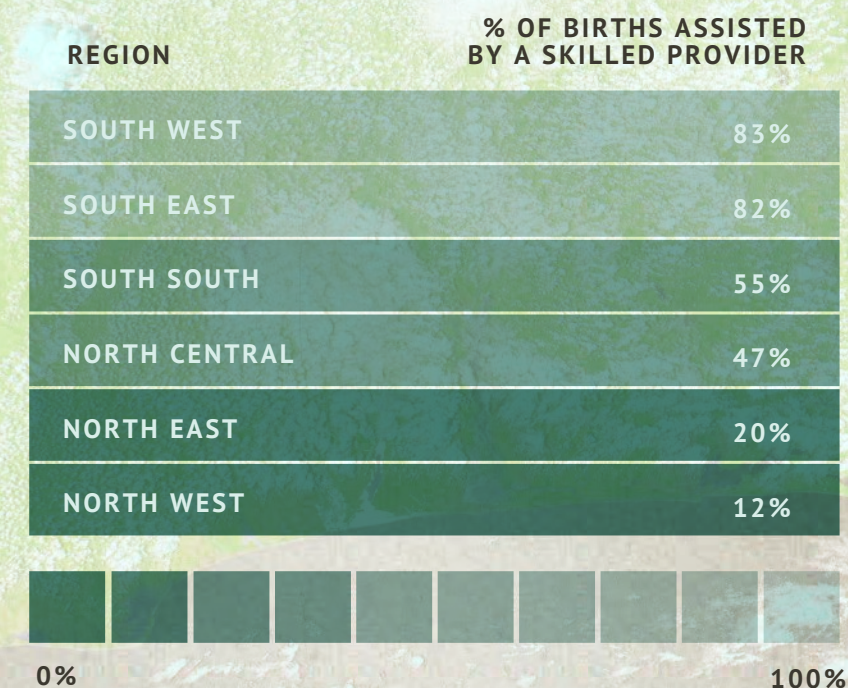
Percentage of births assisted by a skilled provider by household wealth quintile





## Skilled attendant at delivery by Region

There are regional differences in the percentage of women who have a skilled attendant at delivery in Nigeria. The percentage of women who have a skilled attendant at delivery is highest in the South West and lowest in the North West. There is a 71% difference in the percentage receiving skilled care at delivery between the two regions. A skilled provider includes: doctor, nurse, midwife or auxiliary nurse / midwife.







*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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