

BURKINA FASO

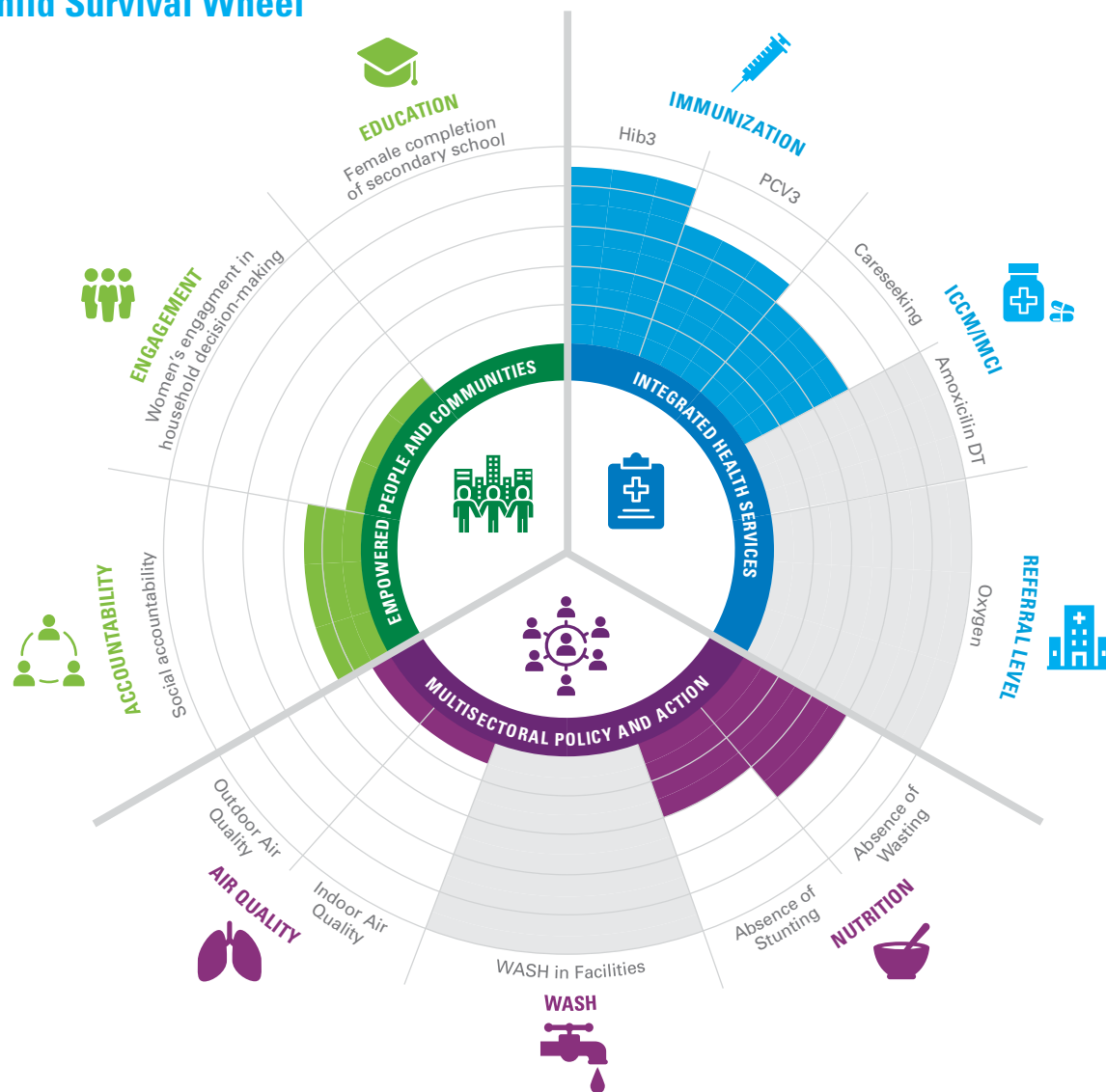
Child Survival Action

In 2021, 63,000 children under the age of five died in Burkina Faso. With an under-five mortality rate of 83 per 1000 live births, Burkina Faso needs rapid acceleration (4x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

Primary health care (PHC) is the most efficient and effective way to reduce preventable child deaths. Resting on three pillars – (1) integrated health services, (2) multisectoral policy and action, and (3) empowered people and communities – PHC provides a comprehensive approach to deliver preventive, protective and curative care for key causes of under-five mortality, such as pneumonia, diarrhoea and malaria.

The Child Survival Wheel illustrates progress for selected tracer indicators across all three pillars and shows where urgent action is needed to protect, prevent, diagnose, and treat the leading causes of child death.

Child Survival Wheel



1: United Nations Inter-agency Group for Child Mortality Estimation (UN IGME), 2023.

Notes: Data have been adjusted to reflect a harmonized scale and directionality to enable comparisons across the three pillars and for consistency. Data reflect the most current country values available in global monitoring databases and have been rounded to the nearest 10 for the purposes of visualization. Grey fill indicates that no data are available for this country and indicator, white fill reflects values at or near zero. The following indicators (with sources) are health intervention coverage indicators and have not been modified: Hib3 (WHO/UNICEF), PCV3 (WHO/UNICEF), Careseeking for symptoms of ARI (UNICEF). WASH in facilities (UNICEF/WHO) and female completion of secondary school (UIS) have also not been modified because data are reported as a percentage with the aim of achieving 100 per cent. For indoor air quality (DHS), the value correlates to the per cent of households not cooking indoors with solid fuels. For outdoor air quality (IHME), the value correlates to the average annual concentration of fine particulate matter (PM2.5) where scores were applied based on the PM2.5 concentration relative to WHO µg/m3 thresholds and scaled to 100 per cent. For stunting (UNICEF) and wasting (UNICEF), scores were applied based on the WHO threshold ranges for "very high", "high", "medium", "low" and "very low". The values attributed to these thresholds were 90, 70, 50, 30 and 10, respectively. For Social Accountability, Social Institutions and Gender Index (SIGI) values (OECD) were compiled and scores were applied based on the thresholds defined by OECD. The values attributed to the thresholds for "very high", "high", "medium", "low" and "very low" were 10, 30, 50, 70 and 90, respectively. Though we are aware of efforts to measure coverage of amoxicillin DT provision, and oxygen treatment, there are currently no internationally standardized global monitoring efforts available for these two health sector interventions.

CHAD

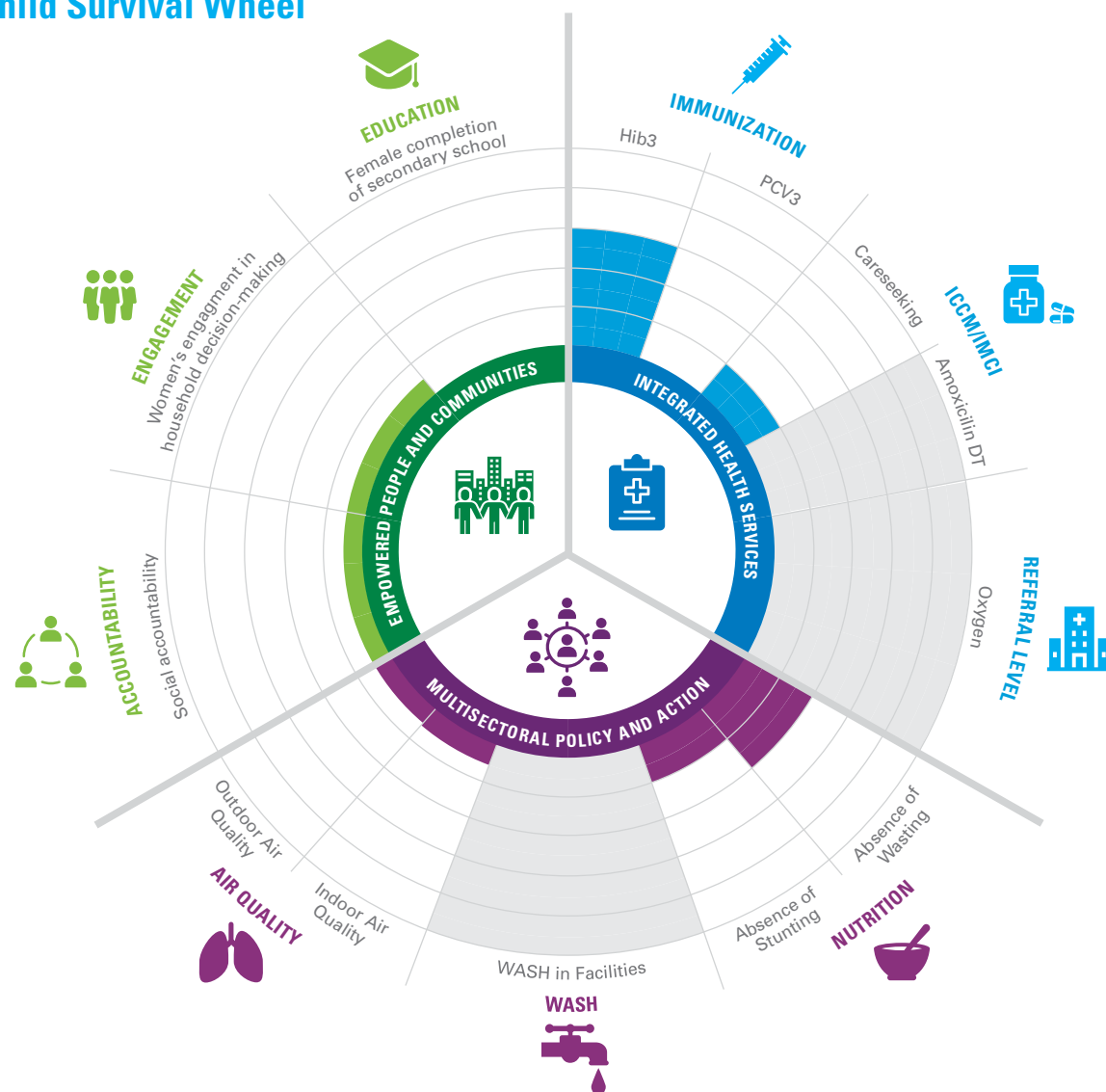
Child Survival Action

In 2021, 76,000 children under the age of five died in Chad. With an under-five mortality rate of 107 per 1000 live births, Chad needs rapid acceleration (5x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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DEMOCRATIC REPUBLIC OF THE CONGO

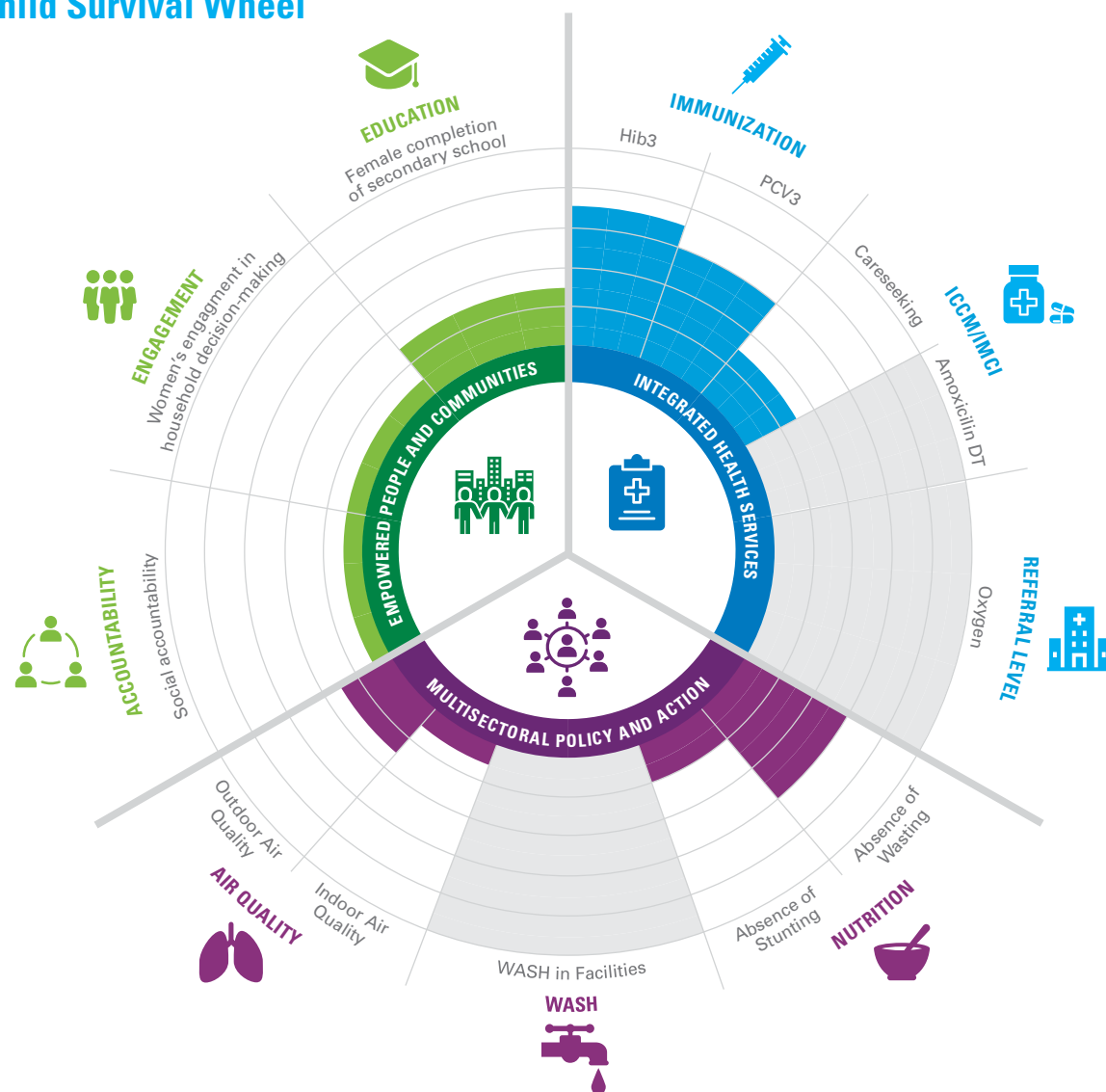
Child Survival Action

In 2021, 308,000 children under the age of five died in DR Congo. With an under-five mortality rate of 79 per 1000 live births, DR Congo needs rapid acceleration (4x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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ETHIOPIA

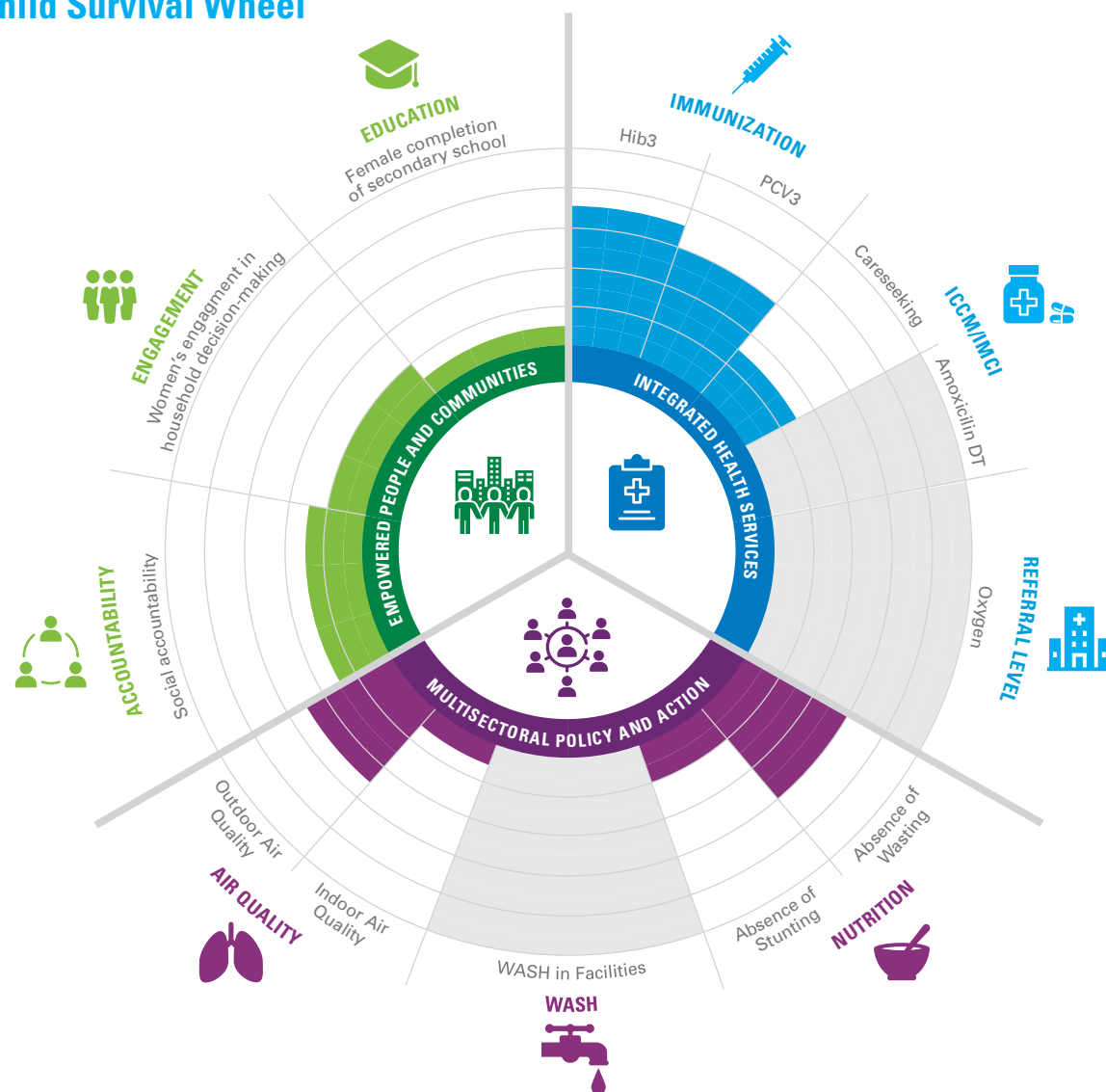
Child Survival Action

In 2021, 178,000 children under the age of five died in Ethiopia. With an under-five mortality rate of 47 per 1000 live births, Ethiopia needs slight acceleration (1.5x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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GUINEA

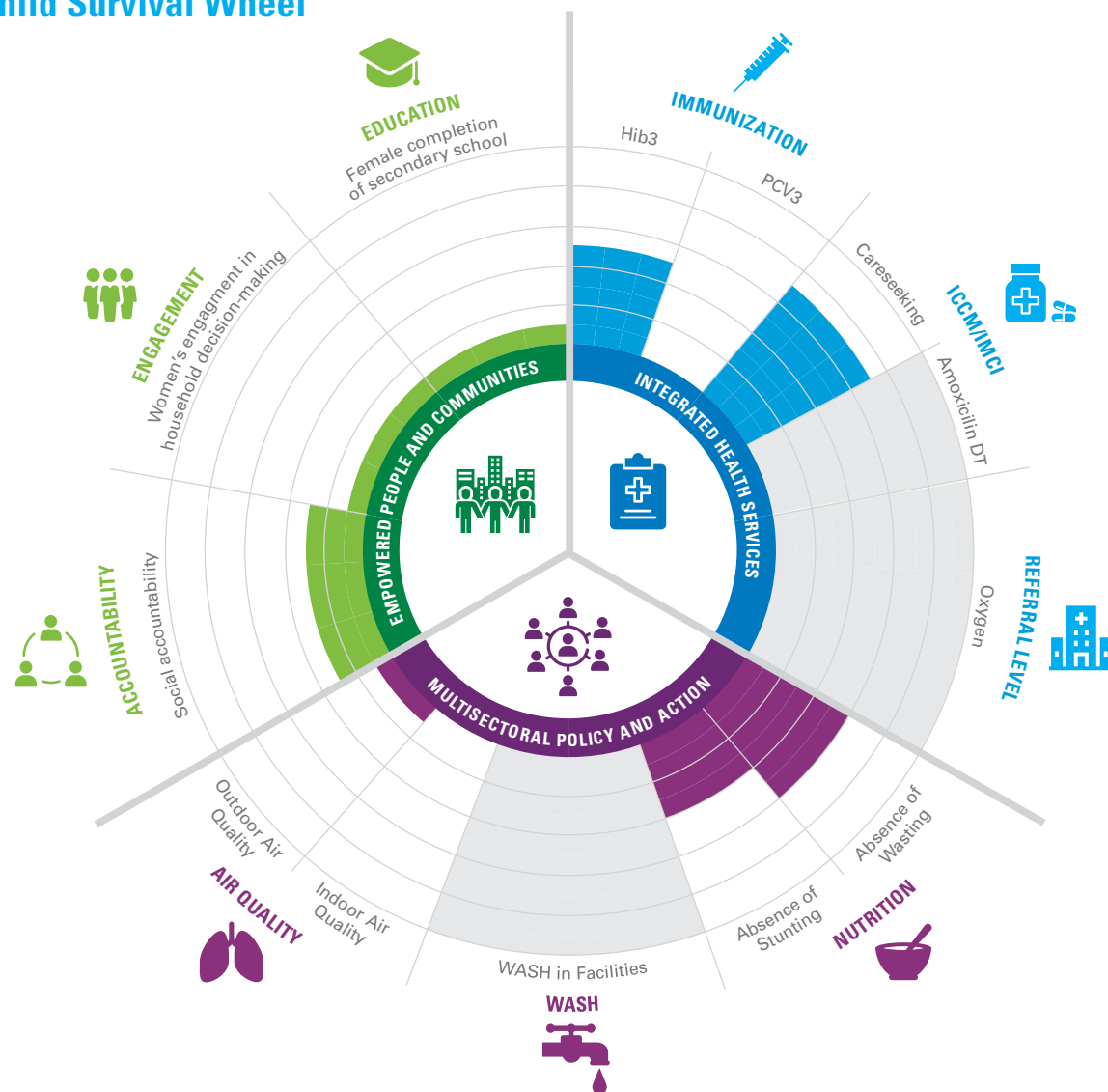
Child Survival Action

In 2021, 45,000 children under the age of five died in Guinea. With an under-five mortality rate of 99 per 1000 live births, Guinea needs rapid acceleration (8x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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INDIA

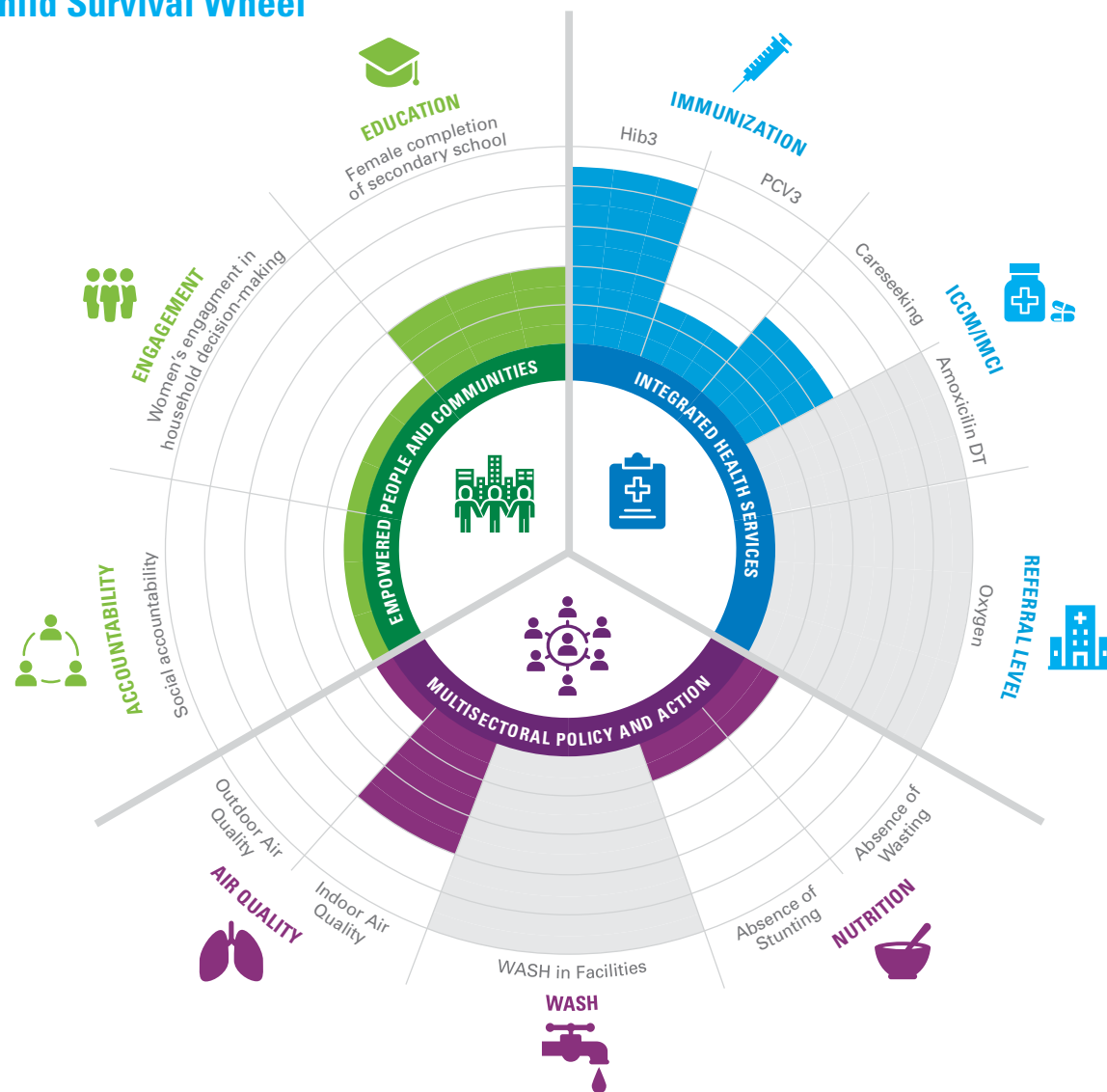
Child Survival Action

In 2021, 709,000 children under the age of five died in India. With an under-five mortality rate of 31 per 1000 live births, India on track to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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INDONESIA

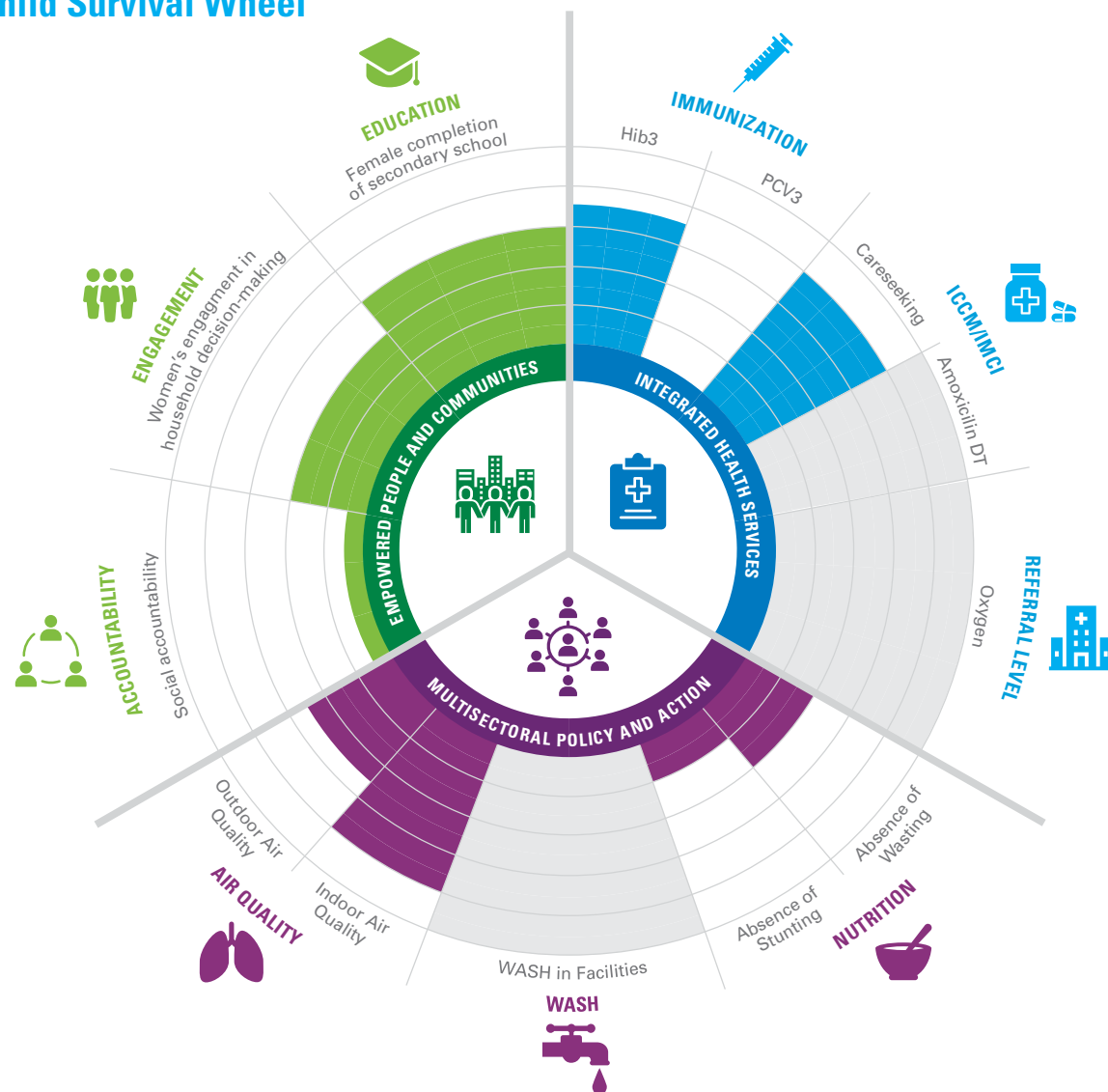
Child Survival Action

In 2021, 100,000 children under the age of five died in Indonesia. With an under-five mortality rate of 22 per 1000 live births, Indonesia has surpassed the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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MALI

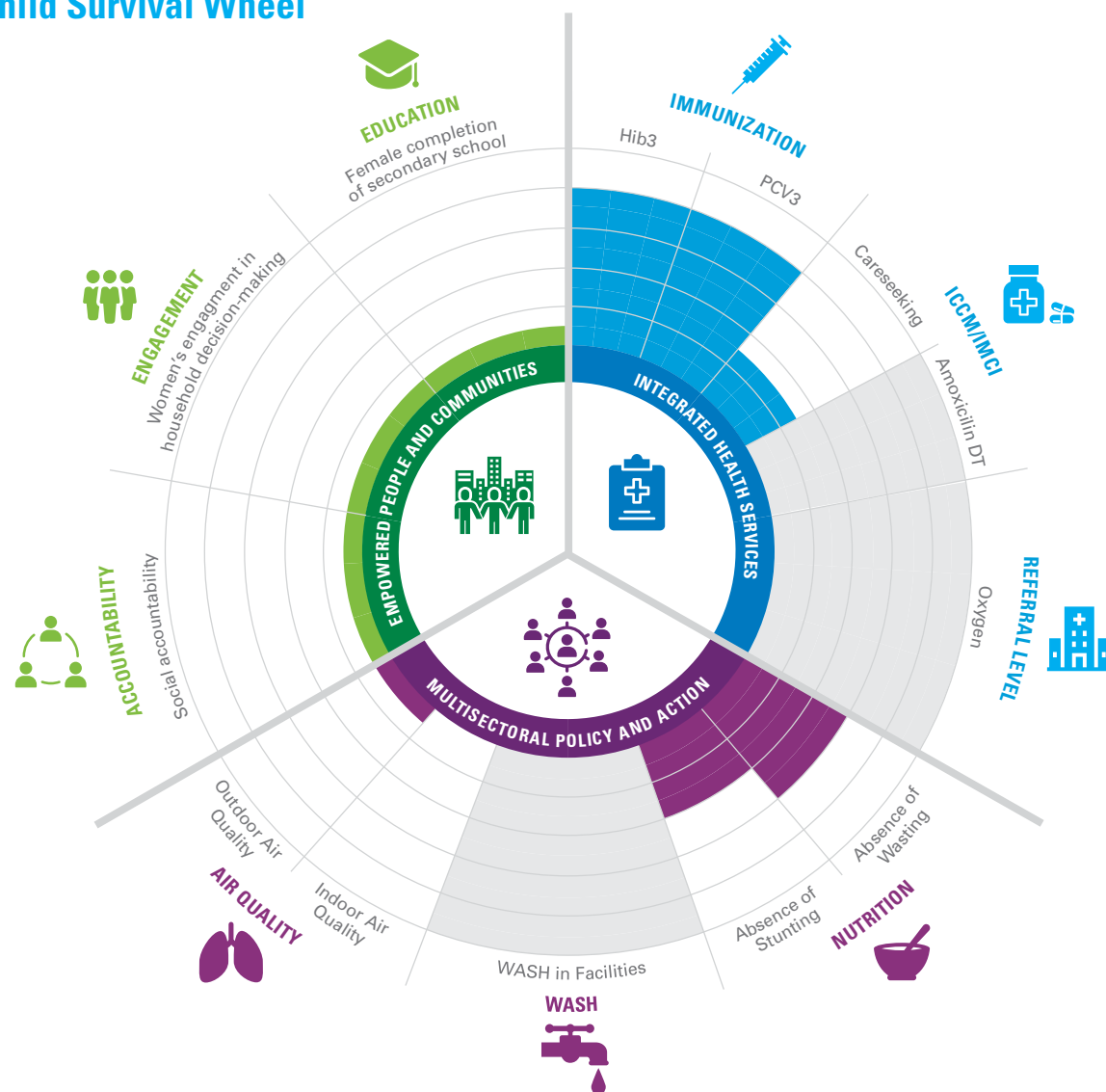
Child Survival Action

In 2021, 85,000 children under the age of five died in Mali. With an under-five mortality rate of 97 per 1000 live births, Mali needs rapid acceleration (5x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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MOZAMBIQUE

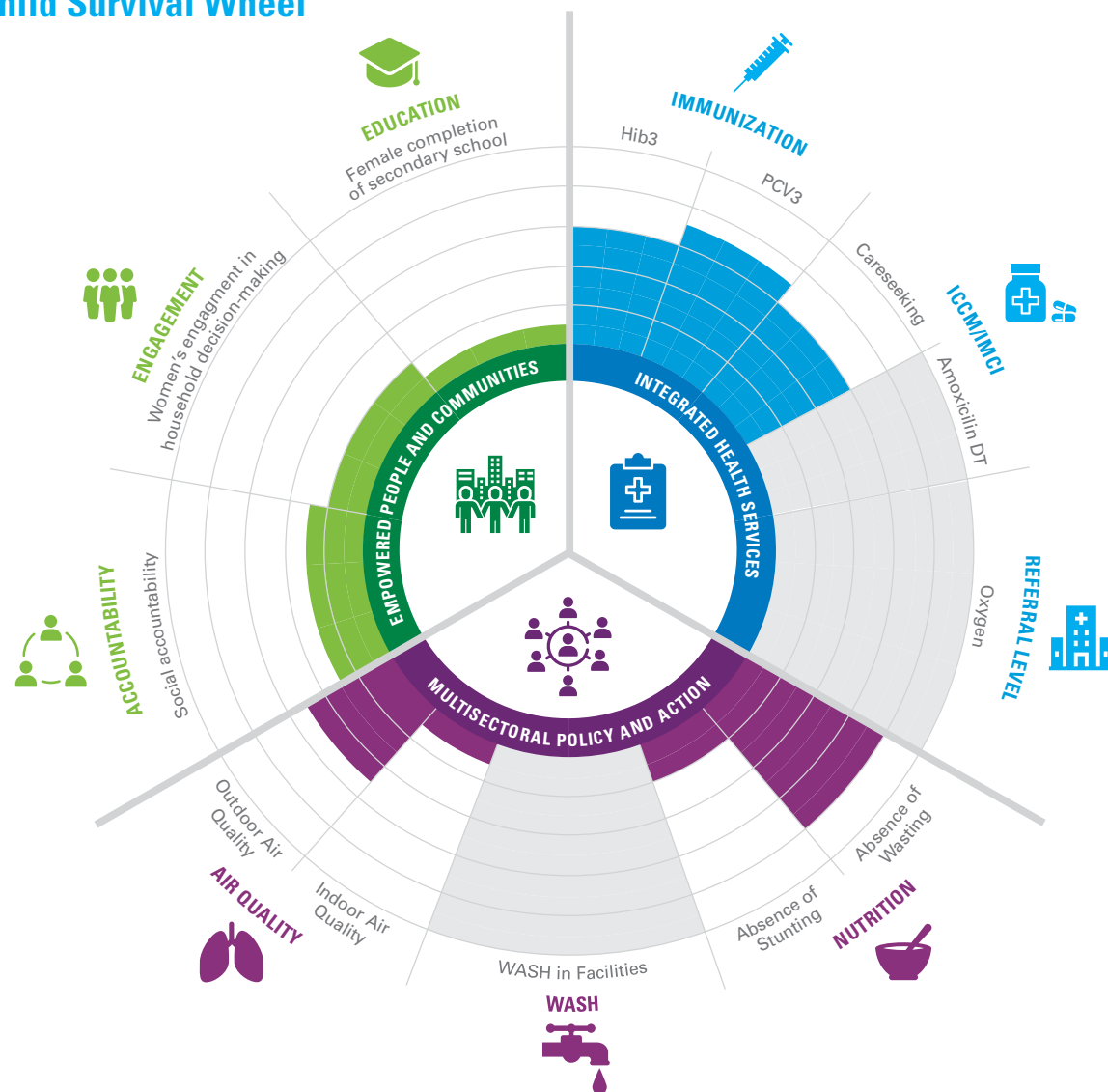
Child Survival Action

In 2021, 79,000 children under the age of five died in Mozambique. With an under-five mortality rate of 70 per 1000 live births, Mozambique needs rapid acceleration (3x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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NIGERIA

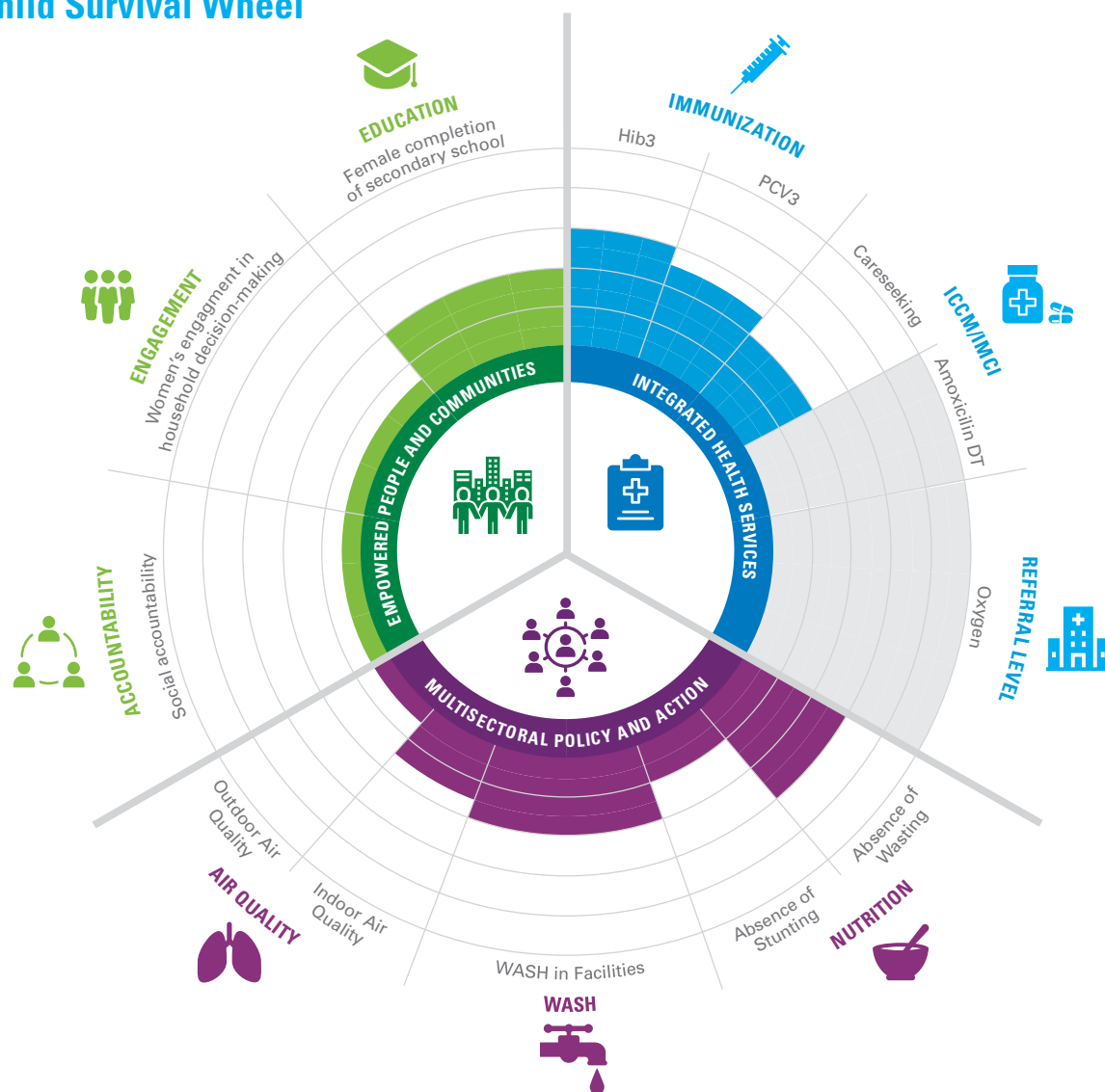
Child Survival Action

In 2021, 852,000 children under the age of five died in Nigeria. With an under-five mortality rate of 111 per 1000 live births, Nigeria needs rapid acceleration (9x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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PERU

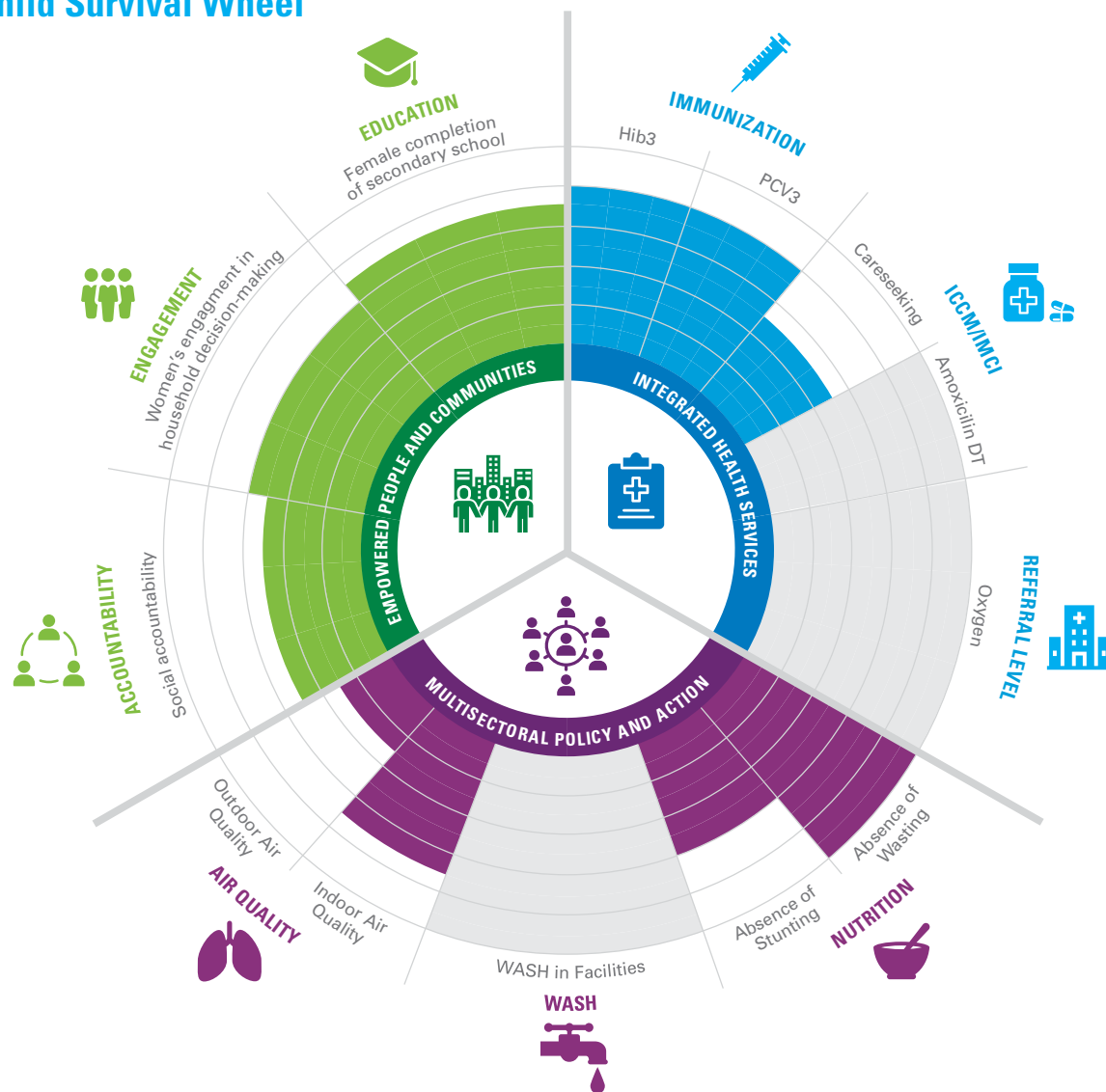
Child Survival Action

In 2021, 8,300 children under the age of five died in Peru. With an under-five mortality rate of 14 per 1000 live births, Peru has well surpassed the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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SIERRA LEONE

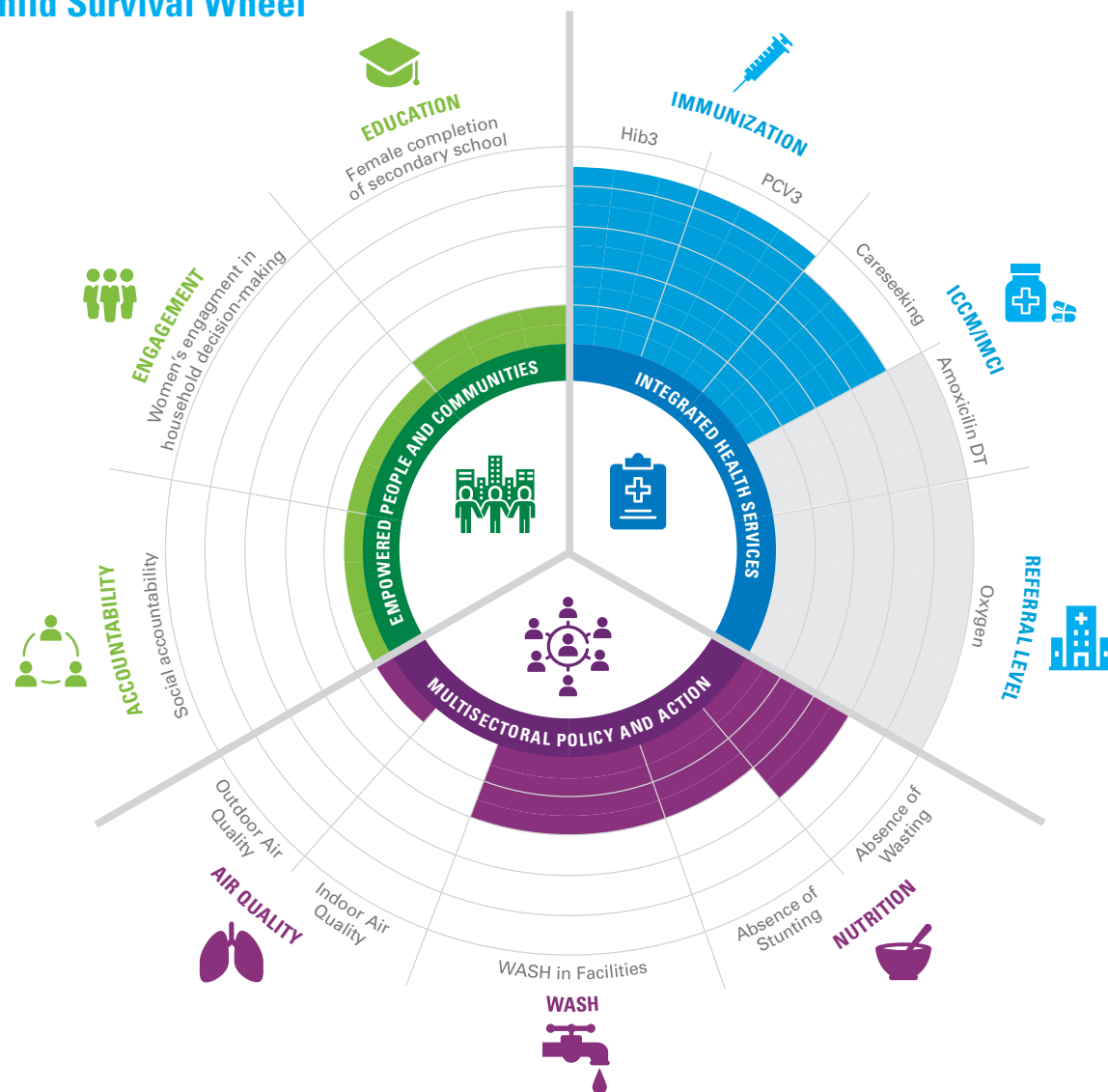
Child Survival Action

In 2021, 27,000 children under the age of five died in Sierra Leone. With an under-five mortality rate of 105 per 1000 live births, Sierra Leone needs rapid acceleration (4x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

Primary health care (PHC) is the most efficient and effective way to reduce preventable child deaths. Resting on three pillars – (1) integrated health services, (2) multisectoral policy and action, and (3) empowered people and communities – PHC provides a comprehensive approach to deliver preventive, protective and curative care for key causes of under-five mortality, such as pneumonia, diarrhoea and malaria.

The Child Survival Wheel illustrates progress for selected tracer indicators across all three pillars and shows where urgent action is needed to protect, prevent, diagnose, and treat the leading causes of child death.

Child Survival Wheel



1: United Nations Inter-agency Group for Child Mortality Estimation (UN IGME), 2023.

Notes: Data have been adjusted to reflect a harmonized scale and directionality to enable comparisons across the three pillars and for consistency. Data reflect the most current country values available in global monitoring databases and have been rounded to the nearest 10 for the purposes of visualization. Grey fill indicates that no data are available for this country and indicator, white fill reflects values at or near zero. The following indicators (with sources) are health intervention coverage indicators and have not been modified: Hib3 (WHO/UNICEF), PCV3 (WHO/UNICEF), Careseeking for symptoms of ARI (UNICEF). WASH in facilities (UNICEF/WHO) and female completion of secondary school (UIS) have also not been modified because data are reported as a percentage with the aim of achieving 100 per cent. For indoor air quality (DHS), the value correlates to the per cent of households not cooking indoors with solid fuels. For outdoor air quality (IHME), the value correlates to the average annual concentration of fine particulate matter (PM2.5) where scores were applied based on the PM2.5 concentration relative to WHO µg/m3 thresholds and scaled to 100 per cent. For stunting (UNICEF) and wasting (UNICEF), scores were applied based on the WHO threshold ranges for "very high", "high", "medium", "low" and "very low". The values attributed to these thresholds were 90, 70, 50, 30 and 10, respectively. For Social Accountability, Social Institutions and Gender Index (SIGI) values (OECD) were compiled and scores were applied based on the thresholds defined by OECD. The values attributed to the thresholds for "very high", "high", "medium", "low" and "very low" were 10, 30, 50, 70 and 90, respectively. Though we are aware of efforts to measure coverage of amoxicillin DT provision, and oxygen treatment, there are currently no internationally standardized global monitoring efforts available for these two health sector interventions.

SOMALIA

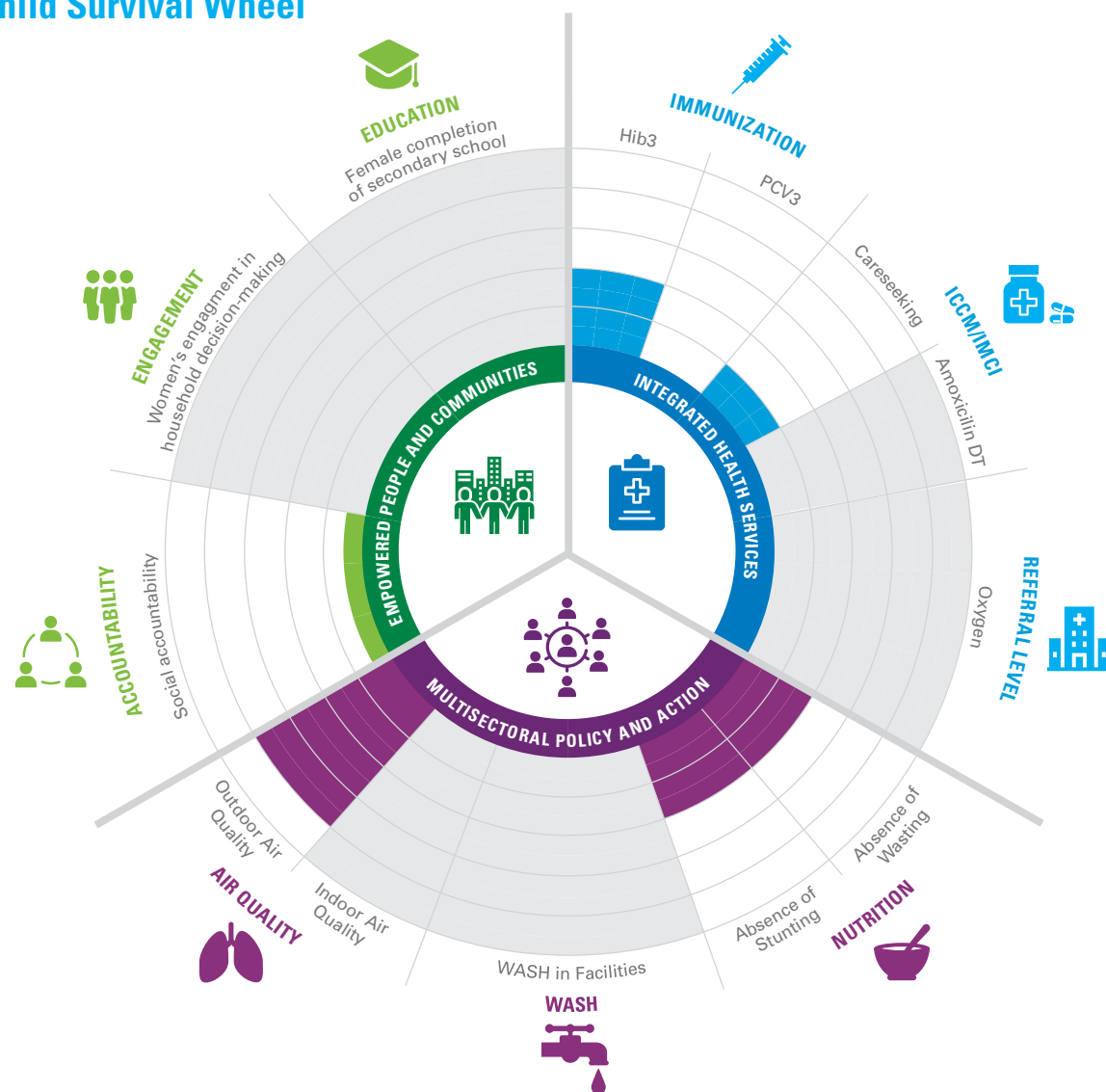
Child Survival Action

In 2021, 80,000 children under the age of five died in Somalia. With an under-five mortality rate of 112 per 1000 live births, Somalia needs rapid acceleration (5x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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SOUTH SUDAN

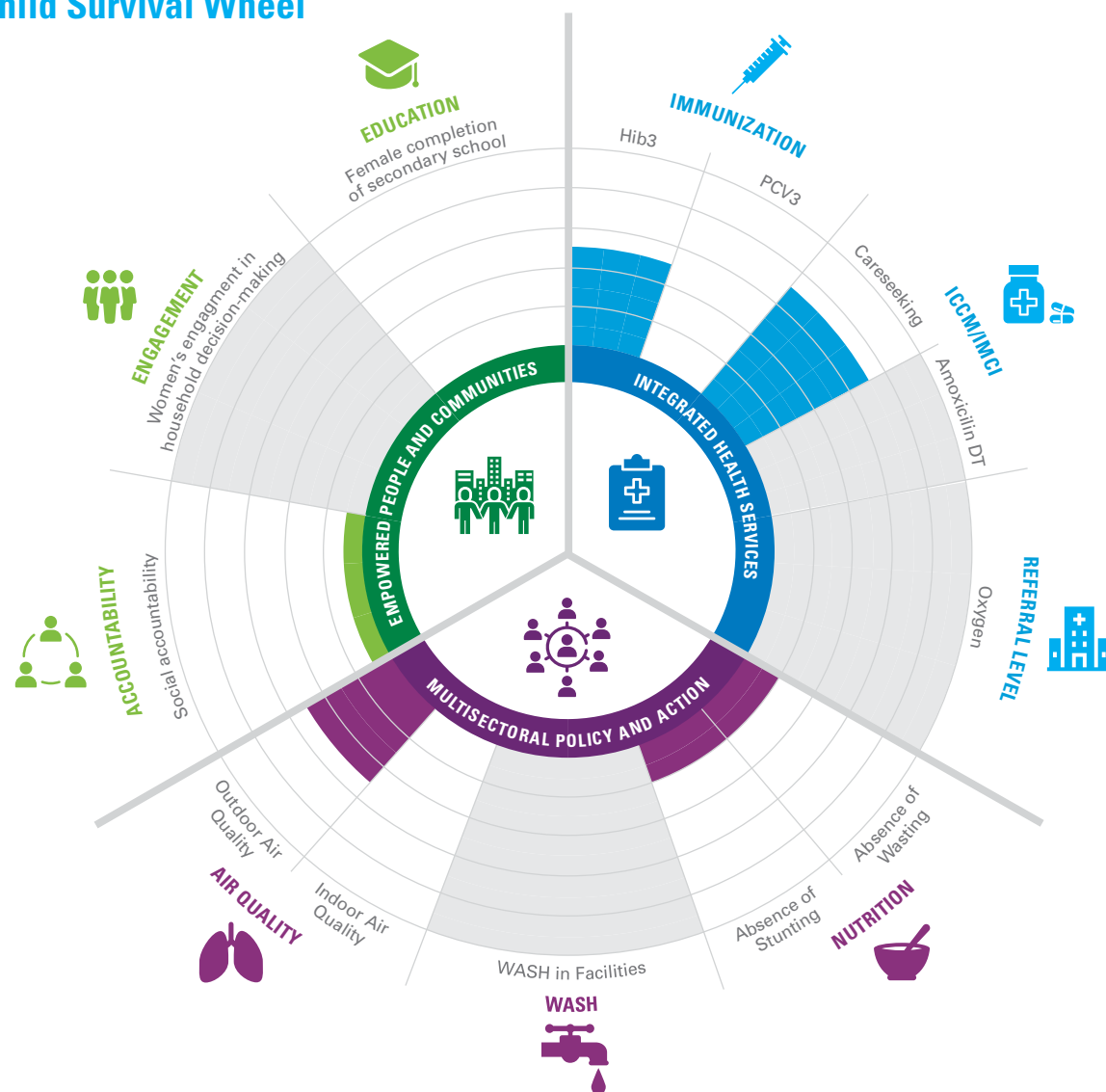
Child Survival Action

In 2021, 31,000 children under the age of five died in South Sudan. With an under-five mortality rate of 99 per 1000 live births, South Sudan needs rapid acceleration (17x) to reach the 2030 SDG target of less than 25 deaths per 1000 live births.¹

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Child Survival Wheel



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