Progressing towards SDG Targets

Sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH) SEAR 2020
PROGRESSING TOWARDS SDG TARGETS

SEAR 2020
FOREWORD

Progressing towards SDG Targets: Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health Services-2021

The WHO South-East Asia Region continues to make world-beating progress on sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH). Between 1990 and 2019 the Region reduced under-five and neonatal mortality rates by 73% and 62%, respectively. Between 2000 and 2017 the Region reduced the maternal mortality ratio by 57% compared with 38% globally. By 2019 all countries in the Region had met or were on track to achieve Sustainable Development Goal (SDG) targets on child mortality. The Region has already met and surpassed WHO’s 2023 global target on the proportion of women of reproductive age whose family planning needs are satisfied. Member State achievements are the result of sustained increases in the coverage of evidence-based and life-saving SRMNCAH interventions, alongside steady overall improvements in the quality of care provided to mothers, newborns and children.

The collection and analyses of high-quality data on SRMNCAH and related indicators is essential to identify and overcome barriers in service provision and use. All countries in the Region periodically conduct national Demographic and Health Surveys (DHS) and Multiple Indicator Cluster Surveys (MICS), the data from which is comparable across countries, providing a reliable snapshot of country and regional trends. Utilizing data from these and other sources, including UN estimates, this document presents 11 country-focused fact sheets, as well as a regional compilation on selected SRMNCAH indicators. Together, they provide an up-to-date account of the status of SRMNCAH mortality, coverage and trends of progress, while also documenting key disparities observed on account of socio-economic parameters.

I urge all SRMNCAH stakeholders, in all countries of the Region, to leverage the intelligence contained herein to sustain and accelerate progress on SRMNCAH indicators, with a focus on advancing health equity, achieving universal health coverage and leaving no one behind. Though the information presented is from the pre-pandemic period, it may nevertheless help guide policy makers and programme managers in their efforts to maintain access for all to essential health services throughout the COVID-19 response, and to accelerate progress thereafter. In this Decade of Action to deliver on the SDGs, WHO will continue to support all countries in the Region to increase the coverage and quality of evidence-based and life-saving interventions across the SRMNCAH life-course, and to drive further reductions in maternal, neonatal and under-five mortality. For a fairer and healthier Region for all, together we must act.

Dr Poonam Khetrapal Singh
Regional Director,
South-East Asia Regional Office of WHO
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<table>
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<tr>
<th>Abbreviation</th>
<th>Description</th>
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<td>AIDS</td>
<td>Acquired immune deficiency syndrome</td>
</tr>
<tr>
<td>ANC</td>
<td>Antenatal care</td>
</tr>
<tr>
<td>ARI</td>
<td>Acute respiratory infection</td>
</tr>
<tr>
<td>ARR</td>
<td>Annual rate of reduction</td>
</tr>
<tr>
<td>BAN</td>
<td>Bangladesh</td>
</tr>
<tr>
<td>BHU</td>
<td>Bhutan</td>
</tr>
<tr>
<td>CAC</td>
<td>Comprehensive abortion care</td>
</tr>
<tr>
<td>DHS</td>
<td>Demographic and Health Survey(s)</td>
</tr>
<tr>
<td>DPR KOREA</td>
<td>Democratic People’s Republic of Korea</td>
</tr>
<tr>
<td>ENAP</td>
<td>Every Newborn Action Plan</td>
</tr>
<tr>
<td>EPMM</td>
<td>Ending Preventable Maternal Mortality</td>
</tr>
<tr>
<td>FP</td>
<td>Family planning</td>
</tr>
<tr>
<td>GNI</td>
<td>Gross national income</td>
</tr>
<tr>
<td>HIV</td>
<td>Human immunodeficiency virus</td>
</tr>
<tr>
<td>IDN</td>
<td>Indonesia</td>
</tr>
<tr>
<td>IHR</td>
<td>International health regulations</td>
</tr>
<tr>
<td>IND</td>
<td>India</td>
</tr>
<tr>
<td>LB</td>
<td>Live births</td>
</tr>
<tr>
<td>LBW</td>
<td>Low birth weight</td>
</tr>
<tr>
<td>MAV</td>
<td>Maldives</td>
</tr>
<tr>
<td>MICS</td>
<td>Multiple Indicator Cluster Survey</td>
</tr>
<tr>
<td>MMEIG</td>
<td>Maternal Mortality Estimation Inter-Agency Group</td>
</tr>
<tr>
<td>MMR</td>
<td>Myanmar</td>
</tr>
<tr>
<td>MR</td>
<td>Measles-rubella</td>
</tr>
<tr>
<td>NEP</td>
<td>Nepal</td>
</tr>
<tr>
<td>NMR</td>
<td>Neonatal mortality rate</td>
</tr>
<tr>
<td>ORS</td>
<td>Oral rehydration salts/solution</td>
</tr>
<tr>
<td>PPP</td>
<td>Purchasing power parity</td>
</tr>
<tr>
<td>RMNCAH</td>
<td>Reproductive, maternal, newborn, child and adolescent health</td>
</tr>
<tr>
<td>RMNCH</td>
<td>Reproductive, maternal, newborn and child health</td>
</tr>
<tr>
<td>SBA</td>
<td>Skilled birth attendant</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
<td>-------------</td>
</tr>
<tr>
<td>SEAR</td>
<td>South East Asia Region</td>
</tr>
<tr>
<td>SRL</td>
<td>Sri Lanka</td>
</tr>
<tr>
<td>SRMNCAH</td>
<td>Sexual, reproductive, maternal, newborn, child and adolescent health</td>
</tr>
<tr>
<td>THA</td>
<td>Thailand</td>
</tr>
<tr>
<td>TLS</td>
<td>Timor-Leste</td>
</tr>
<tr>
<td>U5MR</td>
<td>Under-5 mortality rate</td>
</tr>
<tr>
<td>UHC</td>
<td>Universal health coverage</td>
</tr>
<tr>
<td>UN IGME</td>
<td>United Nations Inter-Agency Group for Child Mortality Estimation</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>USD</td>
<td>United States dollar</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
INTRODUCTION

Reducing maternal, newborn and child mortality is the key to achieving the targets of the Sustainable Development Goals (SDGs). Ending preventable maternal, newborn and child mortality is a Flagship Priority Programme of the WHO South-East Asia (SEA) Region.

The SEA Region made significant progress in reducing maternal, newborn and child mortality before the COVID-19 pandemic struck. According to the 2020 Child Mortality Report of the UN Interagency Group for Mortality Estimation,\(^1\) the under-five mortality rate in the Region declined by 73% between 1990 and 2019, and newborn mortality by 62% over the same period.

The Democratic People’s Republic of Korea, Maldives, Indonesia, Sri Lanka and Thailand have reached an under-five mortality rate below the 2030 SDG target of 25 per 1000. The neonatal mortality rate (NMR) in these countries has also fallen below the 2030 SDG target of 12 per 1000 live births, except in Indonesia, which misses it by a fraction (NMR 12.4/1000 live births). Between 2000 and 2017, the SEA Region recorded the largest decline in maternal deaths, witnessing a 57.3% reduction in mortality compared with the global level of 38%.\(^2\) Such progress indicates that Nepal and Timor-Leste are on track to achieve the SDG country target of a two thirds reduction in the maternal mortality ratio (MMR) since 2010.

However, in the SEA Region, a large number of maternal and child deaths remain preventable but account for a large fraction of the global burden. Worldwide, one fifth of all maternal deaths (18%; 53 000 maternal deaths, as of 2017), one fourth (25%; 492 000) of all cases of stillbirth, one third of all neonatal deaths (28%; 679 000 newborn deaths) and nearly one fifth (21%, 1.1 million, as of 2019) of under-five deaths occur in the WHO SEA Region.

The progress in reducing mortality in these population groups has been possible because of commitment and investments by national governments. These have led to progressively increasing coverage of life-saving, evidence-based interventions for women, children and adolescents. These factsheets have been compiled for each Member State in the Region, along with a regional summary, to provide a snapshot of the key indicators of sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH). The list is provided at the beginning of the document and includes indicators for which data have been presented in these factsheets.

Standard and comparable sources of data have been used in these factsheets; mainly the UN sources for mortality data, and the latest and earlier rounds of household surveys such as the Demographic Health Surveys (DHS) and Multiple Indicator Cluster Surveys (MICS) for coverage data. Some data are sourced from “Countdown” reports, as indicated in the document. Data and information that may be available from surveys that are specific to the countries have not been included, as these may not be comparable across countries.

The presentation of the data and information in the form of tables and graphics provides a bird’s-eye view of the current situation and the progress over time for some of the indicators. The areas where progress has not been adequate are also visualized, indicating the need for appropriate actions to improve both coverage and equity.


# LIST OF INDICATORS

## Basic profile

### Selected demographic indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>Annual number of births</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>Total fertility rate (births per woman)</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)</td>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)</td>
<td>Percentage of births registered</td>
</tr>
</tbody>
</table>

### Selected country profile indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita (Gross National Income (GNI) converted by purchasing power parity (PPP) conversion factor)</td>
<td>Percentage of population below international poverty line</td>
</tr>
</tbody>
</table>

### Water and sanitation

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>Handwashing facility with soap and water</td>
</tr>
<tr>
<td>Percentage of population using improved sanitation facilities</td>
<td>Percentage of population using safely managed drinking water services</td>
</tr>
</tbody>
</table>

## Impact indicators

### Child mortality and nutritional status

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn and under-five mortality rates: trends</td>
<td>Prevalence of LBW: trends</td>
</tr>
<tr>
<td>Stillbirth rate</td>
<td>Wasting in under-5 children: trends</td>
</tr>
<tr>
<td>Causes of newborn deaths</td>
<td>Stunting in under-5 children: trends</td>
</tr>
<tr>
<td>Causes of under-five deaths</td>
<td></td>
</tr>
</tbody>
</table>

### Maternal health

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal mortality ratios: trends</td>
<td>Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status</td>
</tr>
<tr>
<td>Causes of maternal deaths</td>
<td></td>
</tr>
</tbody>
</table>

### Adolescent health

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent mortality rate</td>
<td>Underweight in adolescents</td>
</tr>
<tr>
<td>Top five causes of adolescent deaths</td>
<td>Overweight in adolescents</td>
</tr>
</tbody>
</table>

## Presence of key national policy/guidelines on SRMNCAH at the national level

### Coverage indicators

### Sexual, reproductive and maternal health

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of women of reproductive age (15–49) who have their need for family planning satisfied with modern methods: trends and by maternal education, wealth quintile and geography</td>
<td>Proportion of births attended by skilled health personnel: trends and by maternal education, wealth quintile and geography</td>
</tr>
<tr>
<td>Unmet need for family planning (total): trends and by maternal education, wealth quintile and geography</td>
<td>Percentage of institutional delivery: trends and by maternal education, wealth quintile and geography</td>
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<tr>
<td>Proportion of women aged 15–49 who received four or more antenatal care visits: trends and by maternal education, wealth quintile and geography</td>
<td>Percentage delivered by C-section: trends and by maternal education, wealth quintile and geography</td>
</tr>
<tr>
<td>Newborn health</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Proportion of infants who were breastfed within the first hour of birth: trends</td>
<td>Proportion of newborns who have postnatal contact with a health provider within two days of delivery: trends</td>
</tr>
<tr>
<td>Skin-to-skin contact in the first hour of life: trends</td>
<td>Proportion of newborns who have home visits in the first week of life: trends</td>
</tr>
<tr>
<td>Hospital discharge at least after 24 hours after birth: trends</td>
<td></td>
</tr>
</tbody>
</table>

| Child health and development                      |  |
|---------------------------------------------------|  |
| Percentage of children aged 12–23 months fully immunized: trends | Percentage of children with diarrhoea who received ORS and zinc: trends |
| Measles/MR vaccination at 9 months: trends         | Proportion of children with suspected pneumonia taken to an appropriate health provider: trends |
| Percentage of infants <6 months who are fed exclusively with breast milk: trends | Antibiotic treatment for children with Acute Respiratory Infection (ARI) symptoms: trends |
| Percentage of children aged 6–59 months given Vitamin A supplementation: trends | Children have play things at home: trends |
| Introduction to semisolid or soft foods 6–8 months: trends | Percentage of children with diarrhoea receiving oral rehydration salts/solution (ORS): trends |

| Adolescent health and development                 |  |
|---------------------------------------------------|  |
| Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents | Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey |
| Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey) | Percentage of women aged 20–24 who were married or in a union before age 18 |
| Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey |  |

| Health system indicators                           |  |
|---------------------------------------------------|  |
| Health financing                                   |  |
| Total expenditure on health, per capita (in USD)   | Out-of-pocket health expenditure as % of total expenditure on health |
| General government expenditure on health as % of total government expenditure |  |
| Health workforce                                   |  |
| Skilled health worker density (doctors, nurses, midwives) per 10 000 population | Midwives and nurses per 10 000 population (Density of nursing and midwifery personnel (per 10 000 population)) |
| Service delivery                                   |  |
| UHC service coverage Index                         | RMNCH service coverage index |
| Break-up of UHC coverage index of essential health services with RMNCH sub-index |  |
REGIONAL
SRMNCAH Factsheet
December 2020
### Basic profile

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Bangladesh</th>
<th>Bhutan</th>
<th>DPR Korea</th>
<th>India</th>
<th>Indonesia</th>
<th>Maldives</th>
<th>Myanmar</th>
<th>Nepal</th>
<th>Sri Lanka</th>
<th>Thailand</th>
<th>Timor-Leste</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population(^5)</td>
<td>164,689,000</td>
<td>772,000</td>
<td>25,779,000</td>
<td>1,380,004,000</td>
<td>273,524,000</td>
<td>541,000</td>
<td>54,410,000</td>
<td>29,137,000</td>
<td>21,413,000</td>
<td>69,800,000</td>
<td>1,318,000</td>
<td>2,021,387,000^*</td>
</tr>
<tr>
<td>Total under-5 population(^5)</td>
<td>14,328,000</td>
<td>64,000</td>
<td>1,746,000</td>
<td>116,880,000</td>
<td>23,658,000</td>
<td>36,000</td>
<td>4,509,000</td>
<td>2,707,000</td>
<td>1,660,000</td>
<td>3,596,000</td>
<td>178,000</td>
<td>169,362,000^*</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)(^5)</td>
<td>30,674,000</td>
<td>136,000</td>
<td>3,561,000</td>
<td>252,202,000</td>
<td>46,303,000</td>
<td>59,000</td>
<td>9,917,000</td>
<td>6,120,000</td>
<td>3,386,000</td>
<td>8,492,000</td>
<td>307,000</td>
<td>361,157,000^*</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)(^5)</td>
<td>46,216,000</td>
<td>208,000</td>
<td>6,485,000</td>
<td>357,411,000</td>
<td>72,021,000</td>
<td>114,000</td>
<td>15,082,000</td>
<td>9,029,000</td>
<td>5,324,000</td>
<td>17,177,000</td>
<td>325,000</td>
<td>529,392,000^*</td>
</tr>
<tr>
<td>Annual number of births(^)</td>
<td>2,913,000</td>
<td>13,000</td>
<td>355,000</td>
<td>24,116,000</td>
<td>4,801,000</td>
<td>7000</td>
<td>942,000</td>
<td>563,000</td>
<td>331,000</td>
<td>707,000</td>
<td>38,000</td>
<td>34,786,000^*</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)(^4,41,43,61)</td>
<td>2.3</td>
<td>2.0</td>
<td>1.9</td>
<td>2.2</td>
<td>2.4</td>
<td>2.1</td>
<td>2.1</td>
<td>2.0</td>
<td>2.2</td>
<td>1.4</td>
<td>3.9</td>
<td>2.3**</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)(^4,41,43,61)</td>
<td>83</td>
<td>28</td>
<td>1</td>
<td>51</td>
<td>36</td>
<td>10</td>
<td>36</td>
<td>63</td>
<td>21</td>
<td>23</td>
<td>42</td>
<td>50**</td>
</tr>
<tr>
<td>Births registered (%)(^4,33,41,61)</td>
<td>56</td>
<td>100</td>
<td>100</td>
<td>86</td>
<td>78</td>
<td>99</td>
<td>81</td>
<td>77</td>
<td>97</td>
<td>100</td>
<td>60</td>
<td>83**</td>
</tr>
</tbody>
</table>

Source: \(^5\)World Population Prospects 2020 | \(^4\)United Nations Population Division 2019 | \(^1\)Demographic and Health Survey | \(^41\)Multiple Indicator Cluster Survey | \(^43\)National Family Health Survey \(^6\)United Nations Population Division 2019 | \(^33\)Monitoring progress on universal health coverage and the health-related Sustainable Development Goals in the South-East Asia Region 2019

* Summation of all 11 countries | ** Target population weighted average

Method used for calculating the population weighted regional average of these indicators and the coverage indicators included in this publication:

**Step 1:** Calculate the absolute country value: Country value for the indicator is multiplied by the target population of that country, and divided by 100

**Step 2:** Calculate regional population weighted average: Numerator = Sum of absolute values for all SEAR countries (for which the data is available); Denominator = Total target population of all SEAR countries (for which the data is available); Multiplied by 100 to get the proportion.
<table>
<thead>
<tr>
<th>Country profile</th>
<th>Bangladesh</th>
<th>Bhutan</th>
<th>DPR Korea</th>
<th>India</th>
<th>Indonesia</th>
<th>Maldives</th>
<th>Myanmar</th>
<th>Nepal</th>
<th>Sri Lanka</th>
<th>Thailand</th>
<th>Timor-Leste</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>5190</td>
<td>10 570</td>
<td>NA</td>
<td>6960</td>
<td>11 930</td>
<td>17 880</td>
<td>5160</td>
<td>3600</td>
<td>13 230</td>
<td>18 520</td>
<td>4730</td>
<td>7871**</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>15</td>
<td>1.5</td>
<td>NA</td>
<td>21</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>15</td>
<td>0.8</td>
<td>0</td>
<td>31</td>
<td>17**</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>98</td>
<td>NA</td>
<td>65</td>
<td>NA</td>
<td>NA</td>
<td>54</td>
<td>65**</td>
<td></td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>85</td>
<td>99</td>
<td>84</td>
<td>55</td>
<td>87</td>
<td>98</td>
<td>49</td>
<td>95</td>
<td>93</td>
<td>100</td>
<td>54</td>
<td>64**</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>75</td>
<td>73</td>
<td>100</td>
<td>60</td>
<td>93</td>
<td>98</td>
<td>84</td>
<td>81</td>
<td>NA</td>
<td>89</td>
<td>28</td>
<td>68**</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>99</td>
<td>100</td>
<td>61</td>
<td>91</td>
<td>87</td>
<td>99</td>
<td>80</td>
<td>97</td>
<td>99</td>
<td>100</td>
<td>80</td>
<td>91**</td>
</tr>
</tbody>
</table>


** Target population weighted average
Impact indicators

Maternal mortality ratio (per 100,000 live births)

Global SDG target MMR: 70


For calculating the 2030 projection for maternal mortality ratio we have used the annual rate of reduction between 2010 and 2017, and the assumption that all things will remain as in 2017.
Under-5 mortality rate (per 1000 live births)

Source: UN Inter-Agency estimates: Levels and Trends in Child Mortality Reports

For calculating the 2030 projection for under-5 mortality rate we have used the annual rate of reduction between 1990 and 2019, and the assumption that all things will remain same as in 2019.
Neonatal mortality rate (per 1000 live births)

Source: UN Inter-Agency estimates: Levels and Trends in Child Mortality Reports

For calculating the 2030 projection for neonatal mortality rate we have used the annual rate of reduction between 1990 and 2019, and the assumption that all things will remain same as in 2019.
### Mortality status with projections to 2030

<table>
<thead>
<tr>
<th>Country</th>
<th>Maternal mortality ratio in 2017 (deaths per 100,000 LB)</th>
<th>MMR 2030 projection(a)</th>
<th>Neonatal mortality rate in 2019 (deaths per 1000 LB)</th>
<th>NMR 2030 projection(a)</th>
<th>Under-five mortality rate in 2019 (deaths per 1000 LB)</th>
<th>U5MR 2030 projection(a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>173</td>
<td>80</td>
<td>19</td>
<td>10</td>
<td>31</td>
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<tr>
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<td>81</td>
<td>17</td>
<td>13</td>
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</tr>
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<td>10</td>
<td>7</td>
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<td>12</td>
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<tr>
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<td>63</td>
<td>22</td>
<td>17</td>
<td>34</td>
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<td>77</td>
<td>12(###)</td>
<td>9</td>
<td>24</td>
<td>15</td>
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<td>Maldives</td>
<td>53</td>
<td>22</td>
<td>5</td>
<td>2</td>
<td>8</td>
<td>3</td>
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<td>Myanmar</td>
<td>250</td>
<td>99</td>
<td>22</td>
<td>17</td>
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<td>Nepal</td>
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<td>95</td>
<td>20</td>
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<td>4</td>
<td>3</td>
<td>7</td>
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<td>Thailand</td>
<td>37</td>
<td>15</td>
<td>5</td>
<td>3</td>
<td>9</td>
<td>5</td>
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<tr>
<td>Timor-Leste</td>
<td>142</td>
<td>64</td>
<td>20</td>
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<td>44</td>
<td>26</td>
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<td>SEA Region</td>
<td>152</td>
<td>66</td>
<td>20</td>
<td>14</td>
<td>32</td>
<td>19</td>
</tr>
</tbody>
</table>

\(a\) Projections for the year 2030 calculated by applying ARR for 1990–2019 to the period 2019–2030 for NMR and USMR (UNIGME); and applying ARR for 2010–2017 to the period 2017–2030 for MMR (MMEIG)

\(###\) NMR for Indonesia in 2019 is 12.4, so considered not to have achieved the SDG target

- **Achieved SDG target for NMR, USMR or EPMM target for MMR in the reported year**
- **Expected to achieve the SDG target for NMR, USMR or EPMM target for MMR by 2030**
- **Need to increase current efforts to achieve SDG target for NMR, USMR or EPMM target for MMR by 2030**

**MMR 2030 projection:** For calculating the 2030 projection for maternal mortality ratio we have used the annual rate of reduction between 2010 and 2017, and the assumption that all things will remain as in 2017.

**NMR 2030 projection:** For calculating the 2030 projection for neonatal mortality rate we have used the annual rate of reduction between 1990 and 2019, and the assumption that all things will remain same as in 2019.

**USMR 2030 projection:** For calculating the 2030 projection for under-5 mortality rate we have used the annual rate of reduction between 1990 and 2019, and the assumption that all things will remain same as in 2019.

**EPMM 2030 target:** 2/3 reduction from baseline MMR of 2010 in each country and no country should have MMR >140.
Regional stillbirth rate (per 1000 births)

Source: UN IGME database 2019

Regional adolescent (10-19 years) mortality rate (deaths per 100 000 adolescents)

Source: UN IGME database 2019
Nutrition indicators

**Prevalence of LBW**

*a*Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

*b*Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**Source:** 14*Demographic and Health Survey | 41*Multiple Indicator Cluster Survey | 43*National Family Health Survey | 47*The State of the World’s Children Reports 2019

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### Nutrition indicators

#### Prevalence of LBW

![Graph showing the prevalence of LBW in various countries](image)

#### Wasting in under-5 children

![Graph showing the wasting rate in under-5 children in various countries](image)

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*a*Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

*b*Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished
**Stunting in under-5 children***

Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished.

**Underweight in adolescents**

Percentage of adolescents aged 10–19 years with BMI < -2 SD of the median according to the WHO growth reference for school-age children and adolescents.

Source: 2Comprehensive National Nutrition Survey | 14Demographic and Health Survey | 30Global School based Student Health Survey | 41Multiple Indicator Cluster Survey | 43National Family Health Survey | 47The State of the World’s Children Reports 2019

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**Stunting in under-5 children**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>42%</td>
<td>43%</td>
<td>46%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>28%</td>
<td>33%</td>
<td>38%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>26%</td>
<td>34%</td>
<td>36%</td>
</tr>
<tr>
<td>India</td>
<td>NA</td>
<td>36%</td>
<td>36%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>38%</td>
<td>36%</td>
<td>35%</td>
</tr>
<tr>
<td>Maldives</td>
<td>19%</td>
<td>15%</td>
<td>29%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>29%</td>
<td>32%</td>
<td>32%</td>
</tr>
<tr>
<td>Nepal</td>
<td>32%</td>
<td>37%</td>
<td>32%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>17%</td>
<td>17%</td>
<td>17%</td>
</tr>
<tr>
<td>Thailand</td>
<td>11%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>28%</td>
<td>34%</td>
<td>36%</td>
</tr>
</tbody>
</table>

**Underweight in adolescents**

<table>
<thead>
<tr>
<th>Country</th>
<th>2014–2016</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
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<td>14%</td>
<td>14%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>15%</td>
<td>15%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>India</td>
<td>2.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>1.0%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Maldives</td>
<td>1.4%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>1.4%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Nepal</td>
<td>2.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>1.6%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Thailand</td>
<td>1.6%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>11%</td>
<td>11%</td>
</tr>
</tbody>
</table>
Prevalence of anaemia in women aged 15-49

Source: Comprehensive National Nutrition Survey | Demographic and Health Survey | Global School-based Student Health Survey | National Family Health Survey | The State of the World’s Children Reports 2019

Overweight in adolescents

Overweight in adolescents: Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)
Causes of under-5 deaths

- Prematurity: 26.3%
- Acute lower respiratory infections: 7.6%
- Birth asphyxia and birth trauma: 7.9%
- Congenital anomalies: 8.7%
- Diarrhoeal diseases: 9.5%
- Other communicable, perinatal and nutritional conditions: 12.3%
- Sepsis and other infectious conditions of the newborn: 14.4%
- Injuries: 12%
- Other noncommunicable diseases: 5.3%
- Meningitis/encephalitis: 5.3%
- Measles: 4.6%
- Tetanus: 4.6%
- HIV/AIDS: 2.2%
- Malaria: 2.1%

Source: 25Global Health Observatory - World Health Organization 2017
Causes of adolescent deaths

Top 5 causes of adolescent deaths (Male)

1. Road injury
2. Drowning
3. Self-harm
4. Interpersonal violence
5. Tuberculosis

Top 5 causes of adolescent deaths (Female)

1. Road injury
2. Self-harm
3. Drowning
4. Maternal conditions
5. Tuberculosis

Source: Global Health Observatory - World Health Organization 2016
### Presence of Key National Policy/Guidelines on SRMNCAH at the National Level

<table>
<thead>
<tr>
<th>Policy Area</th>
<th>Regional Presence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Factsheet</td>
<td></td>
</tr>
<tr>
<td>On Family Planning/Contraception</td>
<td>Yes</td>
</tr>
<tr>
<td>On Sexually Transmitted Infections Diagnosis, Treatment and Counseling</td>
<td>Yes</td>
</tr>
<tr>
<td>On Comprehensive National Cervical Cancer Prevention and Control</td>
<td>Yes</td>
</tr>
<tr>
<td>On Antenatal Care</td>
<td>Yes</td>
</tr>
<tr>
<td>On Childbirth</td>
<td>Yes</td>
</tr>
<tr>
<td>On Postnatal Care for Mothers and Newborns</td>
<td>Yes</td>
</tr>
<tr>
<td>On Management of Low Birth Weight and Preterm Newborns</td>
<td>Yes</td>
</tr>
<tr>
<td>On Management of Childhood Pneumonia</td>
<td>Yes</td>
</tr>
<tr>
<td>On Management of Childhood Diarrhoea</td>
<td>Yes</td>
</tr>
<tr>
<td>On Management of Childhood Illness</td>
<td>Yes</td>
</tr>
<tr>
<td>On Multisectoral Plan of Action for Violence against Women</td>
<td>No</td>
</tr>
<tr>
<td>On CAC/Post-Abortion Care</td>
<td>No</td>
</tr>
</tbody>
</table>
Sexual, reproductive and maternal health

Percentage of women of reproductive age (15–49) who have their need for family planning satisfied with modern methods

<table>
<thead>
<tr>
<th>Country</th>
<th>Unmet need for family planning (total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>78%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>77%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>75%</td>
</tr>
<tr>
<td>India</td>
<td>74%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>73%</td>
</tr>
<tr>
<td>Maldives</td>
<td>73%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>72%</td>
</tr>
<tr>
<td>Nepal</td>
<td>72%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>71%</td>
</tr>
<tr>
<td>Thailand</td>
<td>70%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>70%</td>
</tr>
</tbody>
</table>

Proportion of women aged 15–49 who received four or more antenatal care visits

Proportion of women aged 15–49 who received two doses of tetanus

Proportion of women aged 30–49 who report they were screened for cervical cancer (2019)

- **Bangladesh**: Less than 10
- **Bhutan**: More than 50 but less than 70
- **DPR Korea**: 70 or more
- **India**: 70 or more
- **Indonesia**: Less than 10
- **Maldives**: 10 to 50
- **Myanmar**: Less than 10
- **Nepal**: 10 to 50
- **Sri Lanka**: More than 50 but less than 70
- **Thailand**: More than 50 but less than 70
- **Timor-Leste**: Less than 10
- **Regional**: 39

Source: ¹Demographic and Health Survey | ²Ministry of Health, National Health Survey | ³Multiple Indicator Cluster Survey | ⁴National Family Health Survey | ⁵The State of the World’s Children Reports 2019 | ⁶Global Health Observatory – World Health Organization 2019
Proportion of births attended by skilled health personnel

Source: Demographic and Health Survey | Ministry of Health, National Health Survey | Multiple Indicator Cluster Survey | National Family Health Survey | The State of the World’s Children Reports 2019

Institutional delivery

Proportion of women who have postpartum contact with a health provider within two days of delivery

Source: Demographic and Health Survey | Ministry of Health, National Health Survey | Multiple Indicator Cluster Survey | National Family Health Survey | The State of the World’s Children Reports 2019
Equity in coverage

By wealth

Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)

By geography

Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)

By maternal education

Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
ANC 4+ visits (%)
FP satisfied with modern methods (%)
FP unmet need (%)

Source: Demographic and Health Survey | Multiple Indicator Cluster Survey | National Family Health Survey
Newborn health

Proportion of infants who were breastfed within the first hour of birth

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
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<td>57%</td>
<td>63%</td>
<td>55%</td>
<td>56%</td>
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<tr>
<td>Bhutan</td>
<td>47%</td>
<td>49%</td>
<td>60%</td>
<td>58%</td>
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<tr>
<td>DPR Korea</td>
<td>64%</td>
<td>68%</td>
<td>62%</td>
<td>63%</td>
</tr>
<tr>
<td>India</td>
<td>76%</td>
<td>76%</td>
<td>64%</td>
<td>71%</td>
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<tr>
<td>Indonesia</td>
<td>45%</td>
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<td>67%</td>
<td>66%</td>
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<tr>
<td>Myanmar</td>
<td>66%</td>
<td>69%</td>
<td>100%</td>
<td>84%</td>
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<td>Nepal</td>
<td>68%</td>
<td>69%</td>
<td>90%</td>
<td>77%</td>
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<tr>
<td>Sri Lanka</td>
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<td>76%</td>
<td>65%</td>
<td>75%</td>
</tr>
<tr>
<td>Thailand</td>
<td>78%</td>
<td>62%</td>
<td>65%</td>
<td>68%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>82%</td>
<td>82%</td>
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<td>80%</td>
</tr>
</tbody>
</table>

Source: 14Demographic and Health Survey | 41Multiple Indicator Cluster Survey | 43National Family Health Survey | 46Socio-Economic, Demographic and Health Survey | 47The State of the World’s Children Reports 2019

Skin-to-skin contact in the first hour of life

Proportion of newborns who have postnatal contact with a health provider within two days of delivery

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>NA</td>
<td>40%</td>
<td>40%</td>
<td>40%</td>
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<tr>
<td>Bhutan</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>India</td>
<td>30%</td>
<td>37%</td>
<td>40%</td>
<td>37%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>37%</td>
<td>37%</td>
<td>37%</td>
<td>37%</td>
</tr>
<tr>
<td>Maldives</td>
<td>26%</td>
<td>26%</td>
<td>26%</td>
<td>26%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>35%</td>
<td>35%</td>
<td>35%</td>
<td>35%</td>
</tr>
<tr>
<td>Nepal</td>
<td>27%</td>
<td>27%</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>25%</td>
<td>25%</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Thailand</td>
<td>27%</td>
<td>27%</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>28%</td>
<td>28%</td>
<td>28%</td>
<td>28%</td>
</tr>
</tbody>
</table>

Proportion of newborns who have home visits in the first week of life

<table>
<thead>
<tr>
<th>Country</th>
<th>2012–2014</th>
<th>2019</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Bhutan</td>
<td>11%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>India</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Indonesia</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Maldives</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Myanmar</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Nepal</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Thailand</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

Source: 16Demographic and Health Survey | 41Multiple Indicator Cluster Survey | 43National Family Health Survey | 46Socio-Economic, Demographic and Health Survey | 47The State of the World’s Children Reports 2019
Child health and development

Percentage of children fully immunized

- Measles/MR vaccination at 9 months

Source: Demographic and Health Survey | Ministry of Health, National Health Survey | Multiple Indicator Cluster Survey | National Family Health Survey | The State of the World’s Children Reports 2019 | WHO vaccine-preventable diseases: monitoring system. 2020 global summary

Percentage of infants <6 months who are fed exclusively with breast milk

- Vitamin A supplementation 6-59 months

Source: Demographic and Health Survey | Ministry of Health, National Health Survey | Multiple Indicator Cluster Survey | National Family Health Survey | The State of the World’s Children Reports 2019 | WHO vaccine-preventable diseases: monitoring system. 2020 global summary
**Introduction to semisolid or soft foods 6–8 months**

<table>
<thead>
<tr>
<th>Country</th>
<th>2005–2016 (%)</th>
<th>2013–2019 (%)</th>
<th>Regional (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>70%</td>
<td>72%</td>
<td>74%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>76%</td>
<td>72%</td>
<td>77%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>4%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>India</td>
<td>76%</td>
<td>72%</td>
<td>74%</td>
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<tr>
<td>Indonesia</td>
<td>69%</td>
<td>75%</td>
<td>74%</td>
</tr>
<tr>
<td>Maldives</td>
<td>9%</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>9%</td>
<td>8%</td>
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<tr>
<td>Nepal</td>
<td>86%</td>
<td>85%</td>
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<td>62%</td>
<td>61%</td>
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<tr>
<td>Thailand</td>
<td>82%</td>
<td>65%</td>
<td>79%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>6%</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Percentage of children with diarrhoea receiving oral rehydration salts (ORS)**

<table>
<thead>
<tr>
<th>Country</th>
<th>2005–2016 (%)</th>
<th>2013–2019 (%)</th>
<th>Regional (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>7%</td>
<td>72%</td>
<td>74%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>7%</td>
<td>72%</td>
<td>74%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>4%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>India</td>
<td>76%</td>
<td>72%</td>
<td>77%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>69%</td>
<td>75%</td>
<td>74%</td>
</tr>
<tr>
<td>Maldives</td>
<td>9%</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>9%</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td>Nepal</td>
<td>86%</td>
<td>85%</td>
<td>86%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>62%</td>
<td>61%</td>
<td>61%</td>
</tr>
<tr>
<td>Thailand</td>
<td>82%</td>
<td>65%</td>
<td>79%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>6%</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Percentage of children with diarrhoea who received ORS and zinc**

<table>
<thead>
<tr>
<th>Country</th>
<th>2014 (%)</th>
<th>2015–2019 (%)</th>
<th>Regional (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>35%</td>
<td>45%</td>
<td>45%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>35%</td>
<td>45%</td>
<td>45%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>NA</td>
<td>18%</td>
<td>NA</td>
</tr>
<tr>
<td>India</td>
<td>53%</td>
<td>45%</td>
<td>45%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>18%</td>
<td>45%</td>
<td>45%</td>
</tr>
<tr>
<td>Maldives</td>
<td>45%</td>
<td>45%</td>
<td>45%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>9%</td>
<td>20%</td>
<td>NA</td>
</tr>
<tr>
<td>Nepal</td>
<td>18%</td>
<td>70%</td>
<td>70%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Thailand</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Proportion of children with suspected pneumonia taken to an appropriate health provider**

<table>
<thead>
<tr>
<th>Country</th>
<th>2005–2016 (%)</th>
<th>2013–2019 (%)</th>
<th>Regional (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>36%</td>
<td>46%</td>
<td>46%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>74%</td>
<td>72%</td>
<td>72%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>4%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>India</td>
<td>76%</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>17%</td>
<td>70%</td>
<td>70%</td>
</tr>
<tr>
<td>Maldives</td>
<td>29%</td>
<td>70%</td>
<td>70%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>58%</td>
<td>56%</td>
<td>56%</td>
</tr>
<tr>
<td>Nepal</td>
<td>88%</td>
<td>78%</td>
<td>78%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>58%</td>
<td>56%</td>
<td>56%</td>
</tr>
<tr>
<td>Thailand</td>
<td>92%</td>
<td>92%</td>
<td>92%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>71%</td>
<td>71%</td>
<td>71%</td>
</tr>
</tbody>
</table>

Source: 1Demographic and Health Survey | 4Multiple Indicator Cluster Survey | 4National Family Health Survey | 4The State of the World's Children Reports 2019

(*) means figures that are based on fewer than 25 unweighted cases.
Children have play things at home\(^9\):
Percentage of children under age 5 who play with two or more types of playthings.

Children with inadequate supervision\(^b\):
Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week.

Source: \(^1\)Demographic and Health Survey | \(^4\)Multiple Indicator Cluster Survey | \(^3\)National Family Health Survey | \(^7\)The State of the World’s Children Reports 2019

\(^9\)Children have play things at home: Percentage of children under age 5 who play with two or more types of playthings.

\(^b\)Children with inadequate supervision: Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week.
Adolescent health and development

Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

Current tobacco use (any form)

attempted suicide

Percentage of students who were in a physical fight one or more times during the 12 months before the survey

Source: Global School based Student Health Survey

1Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

2Current tobacco use (any form): Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

3Attempted suicide: Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

4Percentage of students who were in a physical fight one or more times during the 12 months before the survey: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Percentage of women aged 20-24 who were married or in a union before age 18

Source: 14Demographic and Health Survey | 41Multiple Indicator Cluster Survey | 43National Family Health Survey | 47The State of the World’s Children Reports 2019

Health system indicators

Health financing

Total expenditure on health, per capita (USD)

General government expenditure on health as % of total government expenditure

Source: 17Global Health Expenditure database 2015 | 68Global Health Expenditure database 2018
**Health workforce**

- **26 per 10,000** population availability of doctors, nurses, midwives versus **44.5 per 10,000** recommended in Global Strategy\(^{20-26}\)

- **18 per 10,000** population availability of midwives and nurses versus **18 per 10,000** population in the South-East Asia Region\(^6\)

**Service delivery**

**UHC service coverage index**

<table>
<thead>
<tr>
<th>Country</th>
<th>2021</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>41%</td>
<td>64%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>61%</td>
<td>72%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>62%</td>
<td>NA</td>
</tr>
<tr>
<td>India</td>
<td>65%</td>
<td>63%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>NA</td>
<td>41%</td>
</tr>
<tr>
<td>Maldives</td>
<td>20%</td>
<td>21%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>20%</td>
<td>7%</td>
</tr>
<tr>
<td>Nepal</td>
<td>41%</td>
<td>7%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>49%</td>
<td>66%</td>
</tr>
<tr>
<td>Thailand</td>
<td>56%</td>
<td>82%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>55%</td>
<td>82%</td>
</tr>
</tbody>
</table>

**RMNCH service coverage index**

<table>
<thead>
<tr>
<th>Country</th>
<th>2021</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>64%</td>
<td>61%</td>
</tr>
<tr>
<td>Bhutan</td>
<td>86%</td>
<td>91%</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>91%</td>
<td>76%</td>
</tr>
<tr>
<td>India</td>
<td>86%</td>
<td>85%</td>
</tr>
<tr>
<td>Indonesia</td>
<td>67%</td>
<td>66%</td>
</tr>
<tr>
<td>Maldives</td>
<td>69%</td>
<td>78%</td>
</tr>
<tr>
<td>Myanmar</td>
<td>76%</td>
<td>77%</td>
</tr>
<tr>
<td>Nepal</td>
<td>79%</td>
<td>89%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>75%</td>
<td>88%</td>
</tr>
<tr>
<td>Thailand</td>
<td>54%</td>
<td>78%</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>56%</td>
<td>78%</td>
</tr>
</tbody>
</table>

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 78%
- Family planning coverage – satisfied needs
- 75%
- Pregnancy care
- 89%
- Child immunization coverage (DPT3)
- 97%
- Care-seeking behaviour of suspected pneumonia
- 75%

**Infectious disease control**
- 58%
- Tuberculosis (effective) treatment coverage
- 61%
- HIV antiretroviral therapy coverage
- 45%
- Access to basic sanitation
- 73%

**Noncommunicable diseases**
- 64%
- Prevalence of normal blood pressure level in population age standardized
- 100%
- Prevalence of normal fasting blood sugar level in population
- 81%
- Tobacco non-use
- 58%

**Service capacity and access**
- 53%
- Density of hospital beds, expressed as % of global threshold, 18/10,000 (proxy for basic hospital access)
- 97%
- Health worker density (Physician, pyc., surg.)
- 26%
- Health security IHR compliance
- 73%

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Basic profile

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>164,689,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>14,328,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)</td>
<td>30,674,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)</td>
<td>46,216,000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>2,913,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
<td>2.3</td>
<td>2019</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)</td>
<td>83</td>
<td>2019</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>56</td>
<td>2019</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Country profile</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>5190</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>15</td>
<td>2016</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>85</td>
<td>2019</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>75</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>99</td>
<td>2019</td>
</tr>
</tbody>
</table>


Impact indicators

Maternal mortality ratio (per 100,000 live births)

• 60% reduction in MMR between 2000 and 2017

• 70% reduction in neonatal mortality rate between 1990 and 2019

4.4% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

• Stillbirth rate (per 1000 births) is 24

• Adolescent mortality rate (deaths per 100 000 adolescents) is 10

Source: UN IGME database 2019

• 78% reduction in under-5 mortality rate between 1990 and 2019

5.3% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

1Bangladesh Global School-based Student Health Survey 2014

For definition of the superscript please refer to page number 35 of the country fact sheet
• Proportion of direct maternal deaths decreased from 63% to 56% between 2015 and 2019

More than 101,000 under-5 children died, mainly due to:
• newborn causes
• pneumonia and diarrhoea
• injuries

Causes of maternal deaths
- Maternal haemorrhage
- Indirect maternal deaths
- Late maternal deaths
- Other direct maternal disorders
- Maternal hypertensive disorders
- Maternal abortion and miscarriage
- Ectopic pregnancy
- Maternal obstructed labour and uterine rupture
- Maternal sepsis and other maternal infections
- Maternal deaths aggravated by HIV/AIDS

Source: 16Global Burden of Disease study 2019

Causes of newborn deaths
- Prematurity
- Birth asphyxia and birth trauma
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Other communicable, perinatal and nutritional conditions
- Acute lower respiratory infections
- Injuries
- Diarrhoeal diseases
- Tetanus
- Meningitis/encephalitis
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

Source: 25Global Health Observatory - World Health Organization 2017

Causes of under-5 deaths
- Prematurity
- Birth asphyxia and birth trauma
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Injuries
- Diarrhoeal diseases
- Other noncommunicable diseases
- Measles
- Meningitis/encephalitis
- Tetanus
- HIV/AIDS
- Malaria

Source: 25Global Health Observatory - World Health Organization 2017

More than 56,000 newborns died in the first month of life mainly due to:
• prematurity
• birth asphyxia
• infections

Source: 25Global Health Observatory - World Health Organization 2017
Causes of adolescent deaths

Top 5 causes of adolescent deaths

1. Road injury
2. Self-harm
3. Drowning
4. Epilepsy
5. Interpersonal violence

Source: 25Global Health Observatory - World Health Organization 2017

SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception</td>
<td>●</td>
</tr>
<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
<td>●</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
<td>●</td>
</tr>
<tr>
<td>On antenatal care</td>
<td>●</td>
</tr>
<tr>
<td>On childbirth</td>
<td>●</td>
</tr>
<tr>
<td>On postnatal care for mothers and newborns</td>
<td>●</td>
</tr>
<tr>
<td>On management of low birth weight and preterm newborns</td>
<td>●</td>
</tr>
<tr>
<td>On child health and development of children</td>
<td>●</td>
</tr>
<tr>
<td>On early childhood development</td>
<td>●</td>
</tr>
<tr>
<td>On integrated management of childhood illness</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood pneumonia</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood diarrhoea</td>
<td>●</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children</td>
<td>●</td>
</tr>
<tr>
<td>On management of acute malnutrition in children</td>
<td>●</td>
</tr>
<tr>
<td>On adolescent [10–19 years] health issues</td>
<td>●</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>●</td>
</tr>
</tbody>
</table>

Coverage indicators

Sexual, reproductive and maternal health

• 37% got 4+ ANC visits during last pregnancy
• Institutional deliveries have increased from 31% to 53% between 2012–2013 and 2019
• 35% increase in deliveries attended by skilled health personnel from 2012–2013 to 2019
• Postpartum contact with a health provider within two days of delivery has increased from 40% to 65% between 2012–2013 and 2019
• Less than 10% women aged 30–49 were screened for cervical cancer

Equity in coverage

By wealth

![Graph showing equity in coverage by wealth]

By geography

![Graph showing equity in coverage by geography]

By maternal education

![Graph showing equity in coverage by maternal education]

**Newborn health**

- *5%* got skin-to-skin contact in the first hour of birth
- *67%* got postnatal contact with a health provider within two days of delivery
- *10%* got home visits in the first week of life

**Child health and development**

- *6%* increase in children getting full immunization between 2014 and 2017–2018
- *11%* increase in exclusive breastfeeding between 2012–2013 and 2019
- *20%* increase in use of vitamin A supplements between 2014 and 2017–2018

**Adolescent health and development**

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: *41%
- Current tobacco use (any form): *10%
- Attempted suicide: *7%
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey: *22%
- Percentage of women aged 20–24 who were married or in a union before age 18: *51%

Source: *37Multiple Indicator Cluster Survey 2012–2013 | 41Multiple Indicator Cluster Survey 2019*
Health system indicators

Health financing

- Out-of-pocket health expenditure is increasing

<table>
<thead>
<tr>
<th>Total expenditure on health, per capita (USD)</th>
<th>General government expenditure on health as % of total government expenditure</th>
<th>Out-of-pocket health expenditure as % of total expenditure on health</th>
</tr>
</thead>
<tbody>
<tr>
<td>91 110</td>
<td>3% 3%</td>
<td>72% 74%</td>
</tr>
</tbody>
</table>

Source: \(^{17}\)Global Health Expenditure database 2015 | \(^{18}\)Global Health Expenditure database 2018

Health workforce

- 7 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy\(^{23}\)
- 4 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region\(^{64}\)

Source: \(^{23}\)Global Health Observatory - World Health Organization 2015 | \(^{64}\)World Health Statistics 2020

Service delivery

- UHC service coverage index: 49%
- RMNCH service coverage index: 64%

Source: \(^{44}\)Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 64% Family planning coverage – satisfied needs
- 47% Pregnancy care
- 98% Child immunization coverage (DPT3)
- 46% Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- 43% Tuberculosis (effective) treatment coverage
- 22% HIV antiretroviral therapy coverage
- 48% Access to basic sanitation

**Noncommunicable diseases**
- 54% Prevalence of normal blood pressure level in population age standardized
- 48% Prevalence of normal fasting blood sugar level in population
- 48% Tobacco non-use

**Service capacity and access**
- 42% Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- 21% Health worker density (Physician, pyc., surg.) (%)
- 78% Health security IHR compliance (%)

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

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**Notes:**

a) *Low birth weight (LBW):* Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

b) *Wasting in under-5 children:* Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

c) *Stunting in under-5 children:* Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

d) *Underweight in adolescents:* Percentage of adolescents aged 10–19 years with BMI <−2 SD of the median according to the WHO growth reference for school-age children and adolescents

e) *Overweight in adolescents:* Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

f) *Haemoglobin levels are shown in grams per decilitre (g/dl)* (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

g) *Children have play things at home:* Percentage of children under age 5 who play with two or more types of playthings

h) *Children with inadequate supervision:* Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

i) *Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents:* Percentage of students aged 13–17 years who had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

j) *Current tobacco use (any form):* Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

k) *Attempted suicide:* Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

l) *Percentage of students who were in a physical fight one or more times during the 12 months before the survey:* Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

### Demographic

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>772,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>64,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10-19 years)</td>
<td>136,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15-49 years)</td>
<td>208,000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>13,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
<td>2.0</td>
<td>2019</td>
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<tr>
<td>Adolescent birth rate per 1000 women aged 15-19 years</td>
<td>28</td>
<td>2012</td>
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<tr>
<td>Births registered (%)</td>
<td>100</td>
<td>2010</td>
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</table>


### Country profile

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
<th>Year of data</th>
</tr>
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<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>10,570</td>
<td>2018</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>1.5</td>
<td>2017</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
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<td>Improved sanitation</td>
<td>99</td>
<td>2019</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>73</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>100</td>
<td>2019</td>
</tr>
</tbody>
</table>


### Impact indicators

**Maternal mortality ratio (per 100,000 live births)**

- **57% reduction in MMR between 2000 and 2017**

Stillbirth rate (per 1000 births) is 10 per 1000 births.

Adolescent mortality rate (deaths per 100,000 adolescents) is 10 per 100,000 adolescents.

Source: UN IGME database 2019

- 60% reduction in neonatal mortality rate between 1990 and 2019


- 78% reduction in under-5 mortality rate between 1990 and 2019


- Stillbirth rate (per 1000 births) is 10.
- Adolescent mortality rate (deaths per 100,000 adolescents) is 10.

Source: UN IGME database 2019

- Prevalence of LBW increased from 10% to 12% between 2010 and 2015
- 76% reduction in stunting among under-5 children between 2010 and 2015

Source: Multiple Indicator Cluster Survey 2010 | The State of the World’s Children Reports 2019

For definition of the superscript please refer to page number 45 of the country fact sheet.
### Causes of maternal deaths

- Maternal haemorrhage
- Indirect maternal deaths
- Late maternal deaths
- Other direct maternal disorders
- Maternal hypertensive disorders
- Maternal abortion and miscarriage
- Ectopic pregnancy
- Maternal obstructed labour and uterine rupture
- Maternal sepsis and other maternal infections
- Maternal deaths aggravated by HIV/AIDS

Proportion of direct maternal deaths decreased from 60% to 59% between 2015 and 2019.

Source: 14Global Burden of Disease study 2019

### Causes of newborn deaths

- Prematurity
- Birth asphyxia and birth trauma
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Other communicable, perinatal and nutritional conditions
- Acute lower respiratory infections
- Injuries
- Diarrhoeal diseases
- Tetanus
- Meningitis/encephalitis
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

244 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Source: 25Global Health Observatory - World Health Organization 2017

### Causes of under-5 deaths

- Prematurity
- Birth asphyxia and birth trauma
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Injuries
- Diarrhoeal diseases
- Other noncommunicable diseases
- Measles
- Meningitis/encephalitis
- Tetanus
- HIV/AIDS
- Malaria

444 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries

Source: 25Global Health Observatory - World Health Organization 2017
## Causes of adolescent deaths

**Top 5 causes of adolescent deaths**

1. **Road injury**
2. **Lower respiratory infections**
3. **Self-harm**
4. **Drowning**
5. **Congenital anomalies**

Source: [Global Health Observatory - World Health Organization](https://www.who.int/gho/adolescent_health годы) 2016

### SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception</td>
<td>●</td>
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<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
<td>●</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
<td>●</td>
</tr>
<tr>
<td>On antenatal care</td>
<td>●</td>
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<tr>
<td>On childbirth</td>
<td>●</td>
</tr>
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<td>On postnatal care for mothers and newborns</td>
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</tr>
<tr>
<td>On management of low birth weight and preterm newborns</td>
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</tr>
<tr>
<td>On child health and development of children</td>
<td>●</td>
</tr>
<tr>
<td>On early childhood development</td>
<td>●</td>
</tr>
<tr>
<td>On integrated management of childhood illness</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood pneumonia</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood diarrhoea</td>
<td>●</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children</td>
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<tr>
<td>On management of acute malnutrition in children</td>
<td>●</td>
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<td>Multisectoral plan of action for violence against women</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>●</td>
</tr>
</tbody>
</table>

Coverage indicators

**Sexual, reproductive and maternal health**

- **82%** got 4+ ANC visits during last pregnancy
- **90%** received two doses of tetanus
- **15%** increase in deliveries attended by skilled health personnel from 2010 to 2012
- Institutional deliveries have increased from **63%** to **74%** between 2010 and 2012
- More than **50%** but less than **70%** women aged 30–49 were screened for cervical cancer

**Equity in coverage**

**By wealth**

- Contact with a health provider within two days of delivery (%)
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Institutional delivery (%)
- Two doses of tetanus (%)

**By geography**

- Contact with a health provider within two days of delivery (%)
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Institutional delivery (%)
- Two doses of tetanus (%)

**By maternal education**

- Contact with a health provider within two days of delivery (%)
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Institutional delivery (%)
- Two doses of tetanus (%)

Newborn health

- 32% increase in breastfeeding within the first hour of birth between 2010 and 2013–2018
- 30% got postnatal contact with a health provider within two days of delivery

Child health and development

- 95% children fully immunized
- 30% increase in taking semisolid or soft foods between 2010 and 2013–2018
- 74% pneumonia suspected children taken to appropriate health provider

Adolescent health and development

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- Current tobacco use (any form)
- Attempted suicide
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey
- Percentage of women aged 20–24 who were married or in a union before age 18
Health system indicators

**Health financing**

- Out-of-pocket health expenditure is decreasing.

**Source:** Global Health Expenditure database 2015 | Global Health Expenditure database 2018

**Health workforce**

- **19 per 10 000 population availability of doctors, nurses, midwives versus 44.5 per 10 000 recommended in Global Strategy**
- **19 per 10 000 population availability of midwives and nurses versus 18 per 10 000 population in the South-East Asia Region**

**Source:** Global Health Observatory - World Health Organization 2016 | World Health Statistics 2020

**Service delivery**

**Source:** Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 86%
  - Family planning coverage – satisfied needs
  - Pregnancy care
  - Child immunization coverage (DPT3)
  - Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- 58%
  - 76%
  - Tuberculosis (effective) treatment coverage
  - 37%
  - HIV antiretroviral therapy coverage
  - 69%
  - Access to basic sanitation

**Noncommunicable diseases**
- 64%
  - 93%
  - Prevalence of normal blood pressure level in population age standardized
  - 44%
  - Prevalence of normal fasting blood sugar level in population
  - 64%
  - Tobacco non-use

**Service capacity and access**
- 53%
  - 97%
  - Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
  - 21%
  - Health worker density (Physician, pyc., surg.) (%)
  - 73%
  - Health security IHR compliance (%)

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

---

*Low birth weight (LBW):* Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

*Wasting in under-5 children:* Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

*Stunting in under-5 children:* Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

*Underweight in adolescents:* Percentage of adolescents aged 10–19 years with BMI <−2 SD of the median according to the WHO growth reference for school-age children and adolescents

*Overweight in adolescents:* Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

*Haemoglobin levels are shown in grams per decilitre (g/dl):* (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

*Children have play things at home:* Percentage of children under age 5 who play with two or more types of playthings

*Children with inadequate supervision:* Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

*Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents:* Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

*Current tobacco use (any form):* Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

*Attempted suicide:* Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

*Percentage of students who were in a physical fight one or more times during the 12 months before the survey:* Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
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<td>Total population</td>
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<td>2020</td>
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<tr>
<td>Total under-5 population</td>
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<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)</td>
<td>3,561,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)</td>
<td>6,485,000</td>
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<tr>
<td>Annual number of births</td>
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<td>Total fertility rate (births per woman)</td>
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<td>Adolescent birth rate (per 1000 women aged 15–19 years)</td>
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<td>Births registered (%)</td>
<td>100</td>
<td>2009</td>
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<table>
<thead>
<tr>
<th>Country profile</th>
<th>Value</th>
<th>Year of data</th>
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</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
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</tr>
<tr>
<td>Percentage of population below international poverty line</td>
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</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
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<tr>
<td>Improved sanitation</td>
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<td>Handwashing facility with soap and water</td>
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<td>2009</td>
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<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>61</td>
<td>2017</td>
</tr>
</tbody>
</table>

Source: 34Multiple Indicator Cluster Survey 2009 | 40Multiple Indicator Cluster Survey 2017

Impact indicators

Maternal mortality ratio (per 100,000 live births)

- Under-5 population 7%
- Total adolescent population 14%
- Women in reproductive age group 25%
- Total fertility rate 1.9
- Adolescent birth rate 1 per 1000 population
- Births registered 100%


Stillbirth rate (per 1000 births) is 8.60

Adolescent mortality rate (deaths per 100,000 adolescents) is 6.60

Source: UN IGME database 2019

62% reduction in neonatal mortality rate between 1990 and 2019

60% reduction in under-5 mortality rate between 1990 and 2019

Stillbirth rate (per 1000 births) is 8.60

Adolescent mortality rate (deaths per 100,000 adolescents) is 6.60

Source: UN IGME database 2019

• 62% reduction in neonatal mortality rate between 1990 and 2019

• 60% reduction in under-5 mortality rate between 1990 and 2019

• Stillbirth rate (per 1000 births) is 8.60

• Adolescent mortality rate (deaths per 100,000 adolescents) is 6.60

Source: UN IGME database 2019

Nutrition indicators

• 48% reduction in prevalence of LBW between 2009 and 2017

• 41% reduction in stunting among under-5 children between 2009 and 2017

5% e Wasting in under-5 children

3% e Stunting in under-5 children

32% e Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status

19% e Overweight in adolescents

14% e Underweight in adolescents

Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status

5% e Wasting in under-5 children

3% e Stunting in under-5 children

32% e Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status

19% e Overweight in adolescents

14% e Underweight in adolescents


For definition of the superscript please refer to page number 55 of the country fact sheet
Causes of maternal deaths

- 179 maternal deaths and mainly due to direct maternal disorders and infections

Causes of newborn deaths

- Prematurity
- Birth asphyxia and birth trauma
- Congenital anomalies
- Septis and other infectious conditions of the newborn
- Other communicable, perinatal and nutritional conditions
- Acute lower respiratory infections
- Injuries
- Meningitis/encephalitis
- Tetanus
- Diarrhoeal diseases
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

Causes of under-5 deaths

- Prematurity
- Acute lower respiratory infections
- Congenital anomalies
- Birth asphyxia and birth trauma
- Other noncommunicable diseases
- Other communicable, perinatal and nutritional conditions
- Injuries
- Septis and other infectious conditions of the newborn
- Diarrhoeal diseases
- Meningitis/encephalitis
- Tetanus
- HIV/AIDS
- Malaria
- Measles

More than 3500 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

More than 6500 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries

Source: 16 Global Burden of Disease study 2019

Source: 25 Global Health Observatory - World Health Organization 2017

Source: 25 Global Health Observatory - World Health Organization 2017
SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/N)</th>
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<tbody>
<tr>
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<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
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<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
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<td>On antenatal care</td>
<td>●</td>
</tr>
<tr>
<td>On childbirth</td>
<td>●</td>
</tr>
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<td>On postnatal care for mothers and newborns</td>
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<td>●</td>
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<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>●</td>
</tr>
</tbody>
</table>


Causes of adolescent deaths

Top 5 causes of adolescent deaths

1. Road injury
2. Drowning
3. Tuberculosis
4. Self-harm
5. Interpersonal violence

Source: 24Global Health Observatory - World Health Organization 2016
Coverage indicators

Sexual, reproductive and maternal health

- 94% got 4+ ANC visits during last pregnancy
- 84% received two doses of tetanus
- 92% institutional deliveries
- 100% deliveries attended by skilled health personnel
- 98% had a postpartum contact with a health provider within two days of delivery
- More than 70% women aged 30-49 were screened for cervical cancer

Equity in coverage

By wealth

0 20 40 60 80 100

FP satisfied with modern methods (%) 99 99 98 98
FP unmet need (%) 7 7 6 6
ANC 4+ visits (%) 93 93 84 84
Two doses of tetanus (%) 99 99 99 99
Institutional delivery (%) 98 98 95 95
SBA (%) 100 100 83 83
Contact with a health provider within two days of delivery (%) 90 90 90 90

By geography

0 20 40 60 80 100

FP satisfied with modern methods (%) 99 99 98 98
FP unmet need (%) 7 7 6 6
ANC 4+ visits (%) 93 93 84 84
Two doses of tetanus (%) 99 99 99 99
Institutional delivery (%) 95 95 87 87
SBA (%) 100 100 83 83
Contact with a health provider within two days of delivery (%) 90 90 90 90

By maternal education

0 20 40 60 80 100

FP satisfied with modern methods (%) 98 98 98 98
FP unmet need (%) 6 6 6 6
ANC 4+ visits (%) 93 93 84 84
Two doses of tetanus (%) 99 99 99 99
Institutional delivery (%) 92 92 92 92
SBA (%) 99 99 99 99
Contact with a health provider within two days of delivery (%) 90 90 90 90

Source: *Figures that are based on fewer than 25 unweighted cases

52 | DPR KOREA
**Newborn health**

- **136% increase in breastfeeding within the first hour birth between 2009 and 2017**
- **27% got skin-to-skin contact in the first hour of birth**
- **99% got postnatal contact with a health provider within two days of delivery**

Source: 34Multiple Indicator Cluster Survey 2009 | 40Multiple Indicator Cluster Survey 2017 | 46Socio-Economic, Demographic and Health Survey 2014

**Child health and development**

- **97% children fully immunized**
- **90% received vitamin A supplements**
- **168% increase in taking semisolid or soft foods between 2009 and 2017**
- **45% received ORS and zinc**


**Adolescent health and development**

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- Current tobacco use (any form)
- Attempted suicide
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey
- Percentage of women aged 20–24 who were married or in a union before age 18

Source: 40Multiple Indicator Cluster Survey 2017

For definition of the superscript please refer to page number 55 of the country fact sheet
Health system indicators

**Health financing**

<table>
<thead>
<tr>
<th>Total expenditure on health, per capita (USD)</th>
<th>General government expenditure on health as % of total government expenditure</th>
<th>Out-of-pocket health expenditure as % of total expenditure on health</th>
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<tbody>
<tr>
<td>100</td>
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<tr>
<td>80</td>
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<td>40</td>
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<td>20</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Source:** 22Global Health Observatory - World Health Organization 2014 | 64World Health Statistics 2020

**Health workforce**

- 75 per 10 000 population availability of doctors, nurses, midwives versus 44.5 per 10 000 recommended in Global Strategy22
- 45 per 10 000 population availability of midwives and nurses versus 18 per 10 000 population in the South-East Asia Region64

**Service delivery**

<table>
<thead>
<tr>
<th>UMC service coverage index</th>
<th>RMNCH service coverage index</th>
</tr>
</thead>
<tbody>
<tr>
<td>72%</td>
<td>91%</td>
</tr>
</tbody>
</table>

**Source:** 44Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 91%
  - Family planning coverage – satisfied needs
  - Pregnancy care
  - Child immunization coverage (DPT3)
  - Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- 71%
  - 61%
  - Tuberculosis (effective) treatment coverage
  - HIV antiretroviral therapy coverage
  - Access to basic sanitation

**Noncommunicable diseases**
- 76%
  - 100%
  - Prevalence of normal blood pressure level in population age standardized
  - Prevalence of normal fasting blood sugar level in population
  - Tobacco non-use

**Service capacity and access**
- 57%
  - 100%
  - Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
  - Health worker density (Physician, pyc., surg.) (%)
  - Health security IHR compliance (%)

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

---

**a** Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

**b** Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**c** Stunting in under-5 children: Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

**d** Underweight in adolescents: Percentage of adolescents aged 10–19 years with BMI <−2 SD of the median according to the WHO growth reference for school-age children and adolescents

**e** Overweight in adolescents: Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

**f** Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

**g** Children have play things at home: Percentage of children under age 5 who play with two or more types of playthings

**h** Children with inadequate supervision: Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

**i** Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

**j** Current tobacco use (any form): Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

**k** Attempted suicide: Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

**l** Percentage of students who were in a physical fight one or more times during the 12 months before the survey: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>1 380 004 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>116 880 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10-19 years)</td>
<td>252 202 000</td>
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</tr>
<tr>
<td>Women in reproductive age group (15-49 years)</td>
<td>357 411 000</td>
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<td>Annual number of births</td>
<td>24 116 000</td>
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<tr>
<td>Adolescent birth rate (per 1000 women aged 15-19 years)</td>
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<td>2015-2016</td>
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<tr>
<td>Births registered (%)</td>
<td>86</td>
<td>2019</td>
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</tbody>
</table>


Country profile

<table>
<thead>
<tr>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>6960</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>21</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>55</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>60</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>91</td>
</tr>
</tbody>
</table>


Impact indicators

Maternal mortality ratio (per 100 000 live births)

- 64% reduction in MMR between 2000 and 2017


64% reduction in MMR between 2000 and 2017
Stillbirth rate (per 1000 births) is 1460.
Adolescent mortality rate (deaths per 100,000 adolescents) is 760.

Source: 60 UN IGME database 2019

Under-5 mortality rate (per 1000 live births)

- 73% reduction in under-5 mortality rate between 1990 and 2019

4.5% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

Neonatal mortality rate (per 1000 live births)

- 62% reduction in neonatal mortality rate between 1990 and 2019

2.2% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

Nutrition indicators


For definition of the superscript please refer to page number 65 of the country fact sheet.
Causes of maternal deaths

- Maternal haemorrhage
- Indirect maternal deaths
- Other direct maternal disorders
- Maternal hypertensive disorders
- Maternal obstructed labour and uterine rupture
- Late maternal deaths
- Maternal sepsis and other maternal infections
- Maternal abortion and miscarriage
- Ectopic pregnancy
- Maternal deaths aggravated by HIV/AIDS

Proportion of direct maternal deaths decreased from 81% to 78% between 2015 and 2019

Causes of newborn deaths

- Prematurity
- Birth asphyxia and birth trauma
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Meningitis/encephalitis
- Tetanus
- Injuries
- Diarrhoeal diseases
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

More than 600 000 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Causes of under-5 deaths

- Prematurity
- Acute lower respiratory infections
- Birth asphyxia and birth trauma
- Diarrhoeal diseases
- Congenital anomalies
- Sepsis and other infectious conditions of the newborn
- Other communicable, perinatal and nutritional conditions
- Injuries
- Other noncommunicable diseases
- Meningitis/encephalitis
- Measles
- Tetanus
- HIV/AIDS
- Malaria

More than 980 000 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- infections

Source: 14 Global Burden of Disease study 2019

Source: 25 Global Health Observatory - World Health Organization 2017
SRMNCAH policy survey

### Presence of key national policy/guidelines on SRMNCAH at the national level

<table>
<thead>
<tr>
<th>Topic</th>
<th>(Y/ N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception</td>
<td>☐</td>
</tr>
<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
<td>☐</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
<td>☐</td>
</tr>
<tr>
<td>On antenatal care</td>
<td>☐</td>
</tr>
<tr>
<td>On childbirth</td>
<td>☐</td>
</tr>
<tr>
<td>On postnatal care for mothers and newborns</td>
<td>☐</td>
</tr>
<tr>
<td>On management of low birth weight and preterm newborns</td>
<td>☐</td>
</tr>
<tr>
<td>On child health and development of children</td>
<td>☐</td>
</tr>
<tr>
<td>On early childhood development</td>
<td>☐</td>
</tr>
<tr>
<td>On integrated management of childhood illness</td>
<td>☐</td>
</tr>
<tr>
<td>On management of childhood pneumonia</td>
<td>☐</td>
</tr>
<tr>
<td>On management of childhood diarrhoea</td>
<td>☐</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children</td>
<td>☐</td>
</tr>
<tr>
<td>On management of acute malnutrition in children</td>
<td>☐</td>
</tr>
<tr>
<td>On adolescent (10–19 years) health issues</td>
<td>☐</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women</td>
<td>☐</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>☐</td>
</tr>
</tbody>
</table>

Coverage indicators
Sexual, reproductive and matenal health

- **38% increase in 4+ ANC visits during last pregnancy between 2005–2006 and 2015–2016**
- **89% women received two doses of tetanus**
- **Institutional deliveries have increased from 39% to 79% between 2005–2006 and 2015–2016**
- **75% increase in deliveries attended by skilled health personnel from 2005–2006 to 2015–2016**
- **Postpartum contact with a health provider within two days of delivery has increased from 37% to 65% between 2005–2006 and 2015–2016**
- **102% increase in C-section between 2005–2006 and 2015–2016**
- **More than 70% women aged 30–49 were screened for cervical cancer**

Equity in coverage

**By wealth**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FP satisfied with modern methods</td>
<td>75%</td>
<td>92%</td>
</tr>
<tr>
<td>FP unmet need (%)</td>
<td>80%</td>
<td>96%</td>
</tr>
<tr>
<td>ANC 4+ visits (%)</td>
<td>77%</td>
<td>95%</td>
</tr>
<tr>
<td>Institutional delivery (%)</td>
<td>54%</td>
<td>88%</td>
</tr>
<tr>
<td>SBA (%)</td>
<td>94%</td>
<td>93%</td>
</tr>
<tr>
<td>Two doses of tetanus (%)</td>
<td>79%</td>
<td>90%</td>
</tr>
</tbody>
</table>

**By geography**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FP satisfied with modern methods</td>
<td>73%</td>
<td>74%</td>
</tr>
<tr>
<td>FP unmet need (%)</td>
<td>75%</td>
<td>71%</td>
</tr>
<tr>
<td>ANC 4+ visits (%)</td>
<td>72%</td>
<td>62%</td>
</tr>
<tr>
<td>Institutional delivery (%)</td>
<td>71%</td>
<td>75%</td>
</tr>
<tr>
<td>SBA (%)</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>Two doses of tetanus (%)</td>
<td>90%</td>
<td>89%</td>
</tr>
</tbody>
</table>

**By maternal education**

<table>
<thead>
<tr>
<th>Category</th>
<th>No education (Pre-primary or none) 2005–2006</th>
<th>Secondary education 2015–2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>FP satisfied with modern methods</td>
<td>74%</td>
<td>75%</td>
</tr>
<tr>
<td>FP unmet need (%)</td>
<td>75%</td>
<td>71%</td>
</tr>
<tr>
<td>ANC 4+ visits (%)</td>
<td>73%</td>
<td>71%</td>
</tr>
<tr>
<td>Institutional delivery (%)</td>
<td>78%</td>
<td>66%</td>
</tr>
<tr>
<td>SBA (%)</td>
<td>89%</td>
<td>92%</td>
</tr>
<tr>
<td>Two doses of tetanus (%)</td>
<td>90%</td>
<td>84%</td>
</tr>
</tbody>
</table>

Adolescent health and development

- **69% increase in breastfeeding within the first hour of birth between 2005–2006 and 2015–2016**
- **27% got postnatal contact with a health provider within two days of delivery**

### Adolescent Health and Development

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical activity (&gt;1 hour/day) or prevalence of insufficient physical activity among adolescents</td>
<td>30%</td>
<td>NA</td>
</tr>
<tr>
<td>Current tobacco use (any form)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Percentage of students who smoked cigarettes on one or more days during the past 30 days</td>
<td>1%</td>
<td>NA</td>
</tr>
<tr>
<td>Percentage of students who used any tobacco products other than cigarettes on one or more days during the past 30 days</td>
<td>4%</td>
<td>NA</td>
</tr>
<tr>
<td>Attempted suicide</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Percentage of students who were in a physical fight one or more times during the 12 months before the survey</td>
<td>NA</td>
<td>21%</td>
</tr>
<tr>
<td>Percentage of women aged 20–24 who were married or in a union before age 18</td>
<td>27%</td>
<td>13%</td>
</tr>
</tbody>
</table>

Source: 27Global School-based Student Health Survey 2007 | 43National Family Health Survey 2015–2016

For definition of the superscript please refer to page number 65 of the country fact sheet
Health system indicators

Health financing

- Out-of-pocket health expenditure is decreasing

Source: 17Global Health Expenditure database 2015 | 18Global Health Expenditure database 2018

Health workforce

- 29 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy
- 17 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region

Source: 23Global Health Observatory - World Health Organization 2015 | 64World Health Statistics 2020

Service delivery

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 72% Family planning coverage – satisfied needs
- 65% Pregnancy care
- 91% Child immunization coverage (DPT3)
- 78% Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- 71% Tuberculosis (effective) treatment coverage
- 67% HIV antiretroviral therapy coverage
- 66% Access to basic sanitation

**Noncommunicable diseases**
- 72% Prevalence of normal blood pressure level in population age standardized
- 49% Prevalence of normal fasting blood sugar level in population
- 58% Tobacco non-use

**Service capacity and access**
- 29% Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- 36% Health worker density (Physician, pyc., surg.) (%)
- 95% Health security IHR compliance (%)

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Basic profile

### Demographic

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>273,524,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>23,658,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10-19 years)</td>
<td>46,303,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15-49 years)</td>
<td>72,021,000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>4,801,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
<td>2.4</td>
<td>2017</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15-19 years)</td>
<td>36</td>
<td>2017</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>78</td>
<td>2017</td>
</tr>
</tbody>
</table>


### Country profile

<table>
<thead>
<tr>
<th>Country profile</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>11,930</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>5</td>
<td>2018</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>87</td>
<td>2019</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>93</td>
<td>2017</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>87</td>
<td>2017</td>
</tr>
</tbody>
</table>


Impact indicators

Maternal mortality ratio (per 100,000 live births)

- **35% reduction in MMR between 2000 and 2017**

Stillbirth rate (per 1000 births) is 9.60.

Adolescent mortality rate (deaths per 100,000 adolescents) is 7.60.

Source: UN IGME database 2019

Neonatal mortality rate (per 1000 live births)

- **61%** reduction in neonatal mortality rate between 1990 and 2019

Under-5 mortality rate (per 1000 live births)

- **71%** reduction in under-5 mortality rate between 1990 and 2019

- **Stillbirth rate (per 1000 births) is 9.60.**
- **Adolescent mortality rate (deaths per 100,000 adolescents) is 7.60.**

Source: UN IGME database 2019

Nutrition indicators

- **No reduction in prevalence of LBW between 2012 and 2017**

Source: The State of the World’s Children Reports 2019

For definition of the superscript please refer to page number 75 of the country fact sheet.
**Causes of maternal deaths**

More than 5000 women died majorly due to maternal haemorrhage and maternal hypertensive disorders.

Source: 16 Global Burden of Disease study 2019

**Causes of newborn deaths**

More than 60 000 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Source: 25 Global Health Observatory - World Health Organization 2017

**Causes of under-5 deaths**

More than 120 000 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries

Source: 25 Global Health Observatory - World Health Organization 2017
SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/ N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception</td>
<td>●</td>
</tr>
<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
<td>●</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
<td>●</td>
</tr>
<tr>
<td>On antenatal care</td>
<td>●</td>
</tr>
<tr>
<td>On childbirth</td>
<td>●</td>
</tr>
<tr>
<td>On postnatal care for mothers and newborns</td>
<td>●</td>
</tr>
<tr>
<td>On management of low birth weight and preterm newborns</td>
<td>●</td>
</tr>
<tr>
<td>On child health and development of children</td>
<td>●</td>
</tr>
<tr>
<td>On early childhood development</td>
<td>●</td>
</tr>
<tr>
<td>On integrated management of childhood illness</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood pneumonia</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood diarrhoea</td>
<td>●</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children</td>
<td>●</td>
</tr>
<tr>
<td>On management of acute malnutrition in children</td>
<td>●</td>
</tr>
<tr>
<td>On adolescent (10–19 years) health issues</td>
<td>●</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>●</td>
</tr>
</tbody>
</table>


Causes of adolescent deaths

Top 5 causes of adolescent deaths

1. Road injury
2. Tuberculosis
4. Interpersonal violence
2. Drowning
5. Diarrhoeal diseases

Source: Global Health Observatory - World Health Organization 2016

1. Road injury
2. Tuberculosis
4. Interpersonal violence
2. Drowning
5. Diarrhoeal diseases

Coverage indicators

**Sexual, reproductive and maternal health**

- **3% increase in 4+ ANC visits** during last pregnancy between 2012 and 2017
- **Institutional deliveries increased from 63% to 74%** between 2012 and 2017
- **Deliveries attended by skilled health personnel increased from 83% to 91%** between 2012 and 2017
- **Postpartum contact with a health provider within two days of delivery increased from 80% to 87%** between 2012 and 2017
- **38% increase in C-section** between 2012 and 2017

Source: 8Demographic and Health Survey 2012 | 13Demographic and Health Survey 2017 | 66Global Health Observatory - World Health Organization 2019

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**Equity in coverage**

### By wealth

- **FP satisfied with modern methods (%):**
  - Poorest: 94%
  - Richest: 78%
- **FP unmet need (%):**
  - Poorest: 16%
  - Richest: 22%
- **ANC 4+ visits (%):**
  - Poorest: 78%
  - Richest: 81%
- **Institutional delivery (%):**
  - Poorest: 60%
  - Richest: 95%
- **Contact with a health provider within two days of delivery (%):**
  - Poorest: 74%
  - Richest: 83%
- **Two doses of tetanus (%):**
  - Poorest: 75%
  - Richest: 97%
- **SBA (%):**
  - Poorest: 56%
  - Richest: 97%

### By geography

- **FP satisfied with modern methods (%):**
  - Rural: 80%
  - Urban: 83%
- **FP unmet need (%):**
  - Rural: 10%
  - Urban: 8%
- **ANC 4+ visits (%):**
  - Rural: 74%
  - Urban: 88%
- **Institutional delivery (%):**
  - Rural: 60%
  - Urban: 86%
- **Contact with a health provider within two days of delivery (%):**
  - Rural: 80%
  - Urban: 83%
- **Two doses of tetanus (%):**
  - Rural: 59%
  - Urban: 66%
- **SBA (%):**
  - Rural: 96%
  - Urban: 88%

### By maternal education

- **FP satisfied with modern methods (%):**
  - No education (Pre-primary or none): 83%
  - Secondary education: 92%
- **FP unmet need (%):**
  - No education (Pre-primary or none): 10%
  - Secondary education: 38%
- **ANC 4+ visits (%):**
  - No education (Pre-primary or none): 93%
  - Secondary education: 89%
- **Institutional delivery (%):**
  - No education (Pre-primary or none): 59%
  - Secondary education: 96%
- **Contact with a health provider within two days of delivery (%):**
  - No education (Pre-primary or none): 74%
  - Secondary education: 97%
- **Two doses of tetanus (%):**
  - No education (Pre-primary or none): 58%
  - Secondary education: 58%
- **SBA (%):**
  - No education (Pre-primary or none): 97%
  - Secondary education: 92%

Source: 13Demographic and Health Survey 2017
Child health and development

- **14% increase in breastfeeding within the first hour of birth between 2012 and 2017**
- **60% got skin-to-skin contact in the first hour of life**
- **79% got postnatal contact with a health provider within two days of delivery**

Adolescent health and development

- **61% increase in children getting full immunization between 2012 and 2017**
- **24% increase in exclusive breastfeeding between 2012 and 2017**
- **32% increase in use of vitamin A supplements between 2012 and 2017**
- **92% pneumonia suspected children taken to appropriate health provider for treatment**
Health system indicators

**Health financing**

- Out-of-pocket health expenditure is decreasing

![Graph showing total expenditure on health, per capita (USD), general government expenditure on health as % of total government expenditure, and out-of-pocket health expenditure as % of total expenditure on health.]

Source: 17Global Health Expenditure database 2015 | 18Global Health Expenditure database 2018

**Health workforce**

- 16 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy
- 24 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region

Source: 21Global Health Observatory - World Health Organization 2012 | 64World Health Statistics 2020

**Service delivery**

- UHC service coverage index: 61%
- RMNCH service coverage index: 86%

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- Family planning coverage – satisfied needs
- Pregnancy care
- Child immunization coverage (DPT3)
- Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- Tuberculosis (effective) treatment coverage
- HIV antiretroviral therapy coverage
- Access to basic sanitation

**Noncommunicable diseases**
- Prevalence of normal blood pressure level in population age standardized
- Prevalence of normal fasting blood sugar level in population
- Tobacco non-use

**Service capacity and access**
- Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- Health worker density (Physician, pyc., surg.) (%)
- Health security IHR compliance (%)

Source: **Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data**

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**Notes**

- **Low birth weight (LBW):** Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age
- **Wasting in under-5 children:** Children whose Z-score is below minus two standard deviations (−2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished
- **Stunting in under-5 children:** Children whose height-for-age Z-score is below minus two standard deviations (−2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished
- **Underweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI ≤−2 SD of the median according to the WHO growth reference for school-age children and adolescents
- **Overweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI ≥1 SD of the median according to the WHO growth reference for school-age children and adolescents
- **Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)**
- **Children have play things at home:** Percentage of children aged under age 5 who play with two or more types of playthings
- **Children with inadequate supervision:** Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week
- **Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents:** Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- **Current tobacco use (any form):** Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)
- **Attempted suicide:** Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey
- **Percentage of students who were in a physical fight one or more times during the 12 months before the survey:** Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

Demographic

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>541 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>36 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10-19 years)</td>
<td>59 000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15-49 years)</td>
<td>114 000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>7000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
<td>2.1</td>
<td>2016–2017</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)</td>
<td>10</td>
<td>2016–2017</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>99</td>
<td>2016–2017</td>
</tr>
</tbody>
</table>


Country profile

<table>
<thead>
<tr>
<th>Country profile</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>17 880</td>
<td>2019</td>
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<tr>
<td>Percentage of population below international poverty line</td>
<td>0</td>
<td>2016</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>98</td>
<td>2016–2017</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>98</td>
<td>2016–2017</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>98</td>
<td>2016–2017</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>99</td>
<td>2016–2017</td>
</tr>
</tbody>
</table>


Impact indicators

Maternal mortality ratio (per 100 000 live births)

- **58% reduction in MMR between 2000 and 2017**

Stillbirth rate (per 1000 births) is 6\(^{60}\)

Adolescent mortality rate (deaths per 100 000 adolescents) is 3\(^{60}\)

- **87% reduction in neonatal mortality rate between 1990 and 2019**

- **91% reduction in under-5 mortality rate between 1990 and 2019**

- **Prevalence of LBW increased from 11% to 13% between 2009 and 2016-2017**

- **19% reduction in stunting among under-5 children between 2009 and 2016-2017**

Nutrition indicators

- Prevalence of anaemia in women aged 15–49: 63%
- Prevalence of anaemia among pregnant women: 62%
- Overweight in adolescents: 16%
- Underweight in adolescents: 14%

Source: 60UN IGME database 2019

For definition of the superscript please refer to page number 85 of the country fact sheet
### Causes of maternal deaths

- Other direct maternal disorders
- Maternal haemorrhage
- Indirect maternal deaths
- Maternal hypertensive disorders
- Late maternal deaths
- Maternal obstructed labour and uterine rupture
- Maternal abortion and miscarriage
- Maternal sepsis and other maternal infections
- Ectopic pregnancy
- Maternal deaths aggravated by HIV/AIDS

Proportion of direct maternal deaths decreased from 74% to 73% between 2015 and 2019.

Source: 16Global Burden of Disease study 2019

### Causes of newborn deaths

- Prematurity
- Congenital anomalies
- Birth asphyxia and birth trauma
- Other communicable, perinatal and nutritional conditions
- Sepsis and other infectious conditions of the newborn
- Acute lower respiratory infections
- Injuries
- Tetanus
- Other noncommunicable diseases
- Meningitis/encephalitis
- Diarrhoeal diseases
- HIV/AIDS
- Malaria
- Measles

Nearly 34 newborns died in the first month of life mainly due to:
- prematurity
- infections
- birth asphyxia

Source: 25Global Health Observatory - World Health Organization 2017

### Causes of under-5 deaths

- Congenital anomalies
- Prematurity
- Other noncommunicable diseases
- Birth asphyxia and birth trauma
- Other communicable, perinatal and nutritional conditions
- Acute lower respiratory infections
- Injuries
- Sepsis and other infectious conditions of the newborn
- Diarrhoeal diseases
- Meningitis/encephalitis
- Tetanus
- HIV/AIDS
- Malaria
- Measles

Nearly 60 under-5 children died, mainly due to:
- infections
- newborn causes
- pneumonia and diarrhoea

Source: 25Global Health Observatory - World Health Organization 2017
SRMNCAH policy survey

### Presence of key national policy/guidelines on SRMNCAH at the national level

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/ N)</th>
</tr>
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<tbody>
<tr>
<td>On family planning/contraception*</td>
<td>Yes</td>
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<td>On antenatal care*</td>
<td>Yes</td>
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<tr>
<td>On childbirth*</td>
<td>Yes</td>
</tr>
<tr>
<td>On postnatal care for mothers and newborns*</td>
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</tr>
<tr>
<td>On management of low birth weight and preterm newborns*</td>
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</tr>
<tr>
<td>On child health and development of children*</td>
<td>Yes</td>
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<td>On early childhood development*</td>
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<td>On management of malaria with appropriate recommendations for children*</td>
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<tr>
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<td>Yes</td>
</tr>
<tr>
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<td>Yes</td>
</tr>
<tr>
<td>On CAC/post-abortion care*</td>
<td>Yes</td>
</tr>
</tbody>
</table>


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**Causes of adolescent deaths**

**Top 5 causes of adolescent deaths**

1. Collective violence and legal intervention
2. Drowning
3. Dengue
4. Interpersonal violence
5. Congenital anomalies

Source: Global Health Observatory - World Health Organization 2016

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**Source:**
- Reproductive, Maternal, Newborn, Child and Adolescent Health Policy Survey, 2019
- Global Abortion Policies Database, 2017
**Coverage indicators**

**Sexual, reproductive and maternal health**

- **82%** received 4+ ANC visits during last pregnancy
- **94%** institutional deliveries
- **100%** deliveries attended by skilled health personnel
- Postpartum contact with a health provider within two days of delivery has increased from **67% to 80%** between 2009 and 2016-2017
- **23%** increase in C-section between 2009 and 2016-2017
- **10%-50%** women aged 30-49 were screened for cervical cancer

**Equity in coverage**

**By wealth**

**By geography**

**By maternal education**

Source: 12Demographic and Health Survey 2016–2017

**A figure based on fewer than 25 unweighted cases that has been suppressed**
Child health and development

- 33% increase in exclusive breastfeeding between 2009 and 2016–2017
- 22% increase in postnatal contact with a health provider within two days of delivery between 2009 and 2016–2017

Adolescent health and development

- 3% increase in breastfeeding within the first hour of birth between 2009 and 2016–2017
- 55% increase in use of vitamin A supplements between 2009 and 2016–2017
- 75% children with diarrhoea received ORS and 42% received both ORS and zinc
- Less than 1% of children under age 5 were reported to have had symptoms of ARI, in the two weeks preceding the survey

For definition of the superscript please refer to page number 85 of the country fact sheet
Health system indicators

Health financing

- Out-of-pocket health expenditure is increasing

- General government expenditure on health as % of total government expenditure
  - 2015: 19% 2018: 21%

- Out-of-pocket health expenditure as % of total expenditure on health
  - 2015: 20% 2018: 21%

Total expenditure on health, per capita (USD)

2015: 1177 2018: 1443

Out-of-pocket health expenditure as % of total expenditure on health

2015: 100 2018: 100

General government expenditure on health as % of total government expenditure

2015: 100 2018: 100

Source: 17Global Health Expenditure database 2015 | 18Global Health Expenditure database 2018

Health workforce

- 118 per 10 000 population availability of doctors, nurses, midwives versus 44.5 per 10 000 recommended in Global Strategy

- 64 per 10 000 population availability of midwives & nurses versus 18 per 10 000 population in the South-East Asia Region

Source: 23Global Health Observatory - World Health Organization 2015 | 64World Health Statistics 2020

Service delivery

- UHC service coverage index
  - 2021: 62%

- RMNCH service coverage index
  - 2021: 67%

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- Family planning coverage – satisfied needs
- Pregnancy care
- Child immunization coverage (DPT3)
- Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- Tuberculosis (effective) treatment coverage
- HIV antiretroviral therapy coverage
- Access to basic sanitation

**Noncommunicable diseases**
- Prevalence of normal blood pressure level in population age standardized
- Prevalence of normal fasting blood sugar level in population
- Tobacco non-use

**Service capacity and access**
- Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- Health worker density (Physician, pyc., surg.) (%)
- Health security IHR compliance (%)

Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

---

**a** Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

**b** Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**c** Stunting in under-5 children: Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

**d** Underweight in adolescents: Percentage of adolescents aged 10–19 years with BMI <−2 SD of the median according to the WHO growth reference for school-age children and adolescents

**e** Overweight in adolescents: Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

**f** Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

**g** Children have play things at home: Percentage of children under age 5 who play with two or more types of playthings

**h** Children have inadequate supervision: Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

**i** Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

**j** Current tobacco use (any form): Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

**k** Attempted suicide: Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

**l** Percentage of students who were in a physical fight one or more times during the 12 months before the survey: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
MYANMAR
SRMNCAH Factsheet December 2020

Basic profile

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<td>GNI (PPP) per capita45</td>
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<td>Percentage of population below international poverty line25</td>
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<td>2017</td>
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<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
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<td>NA</td>
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<tr>
<td>Improved sanitation10</td>
<td>49</td>
<td>2015–2016</td>
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<tr>
<td>Handwashing facility with soap and water10</td>
<td>84</td>
<td>2015–2016</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services10</td>
<td>80</td>
<td>2015–2016</td>
</tr>
</tbody>
</table>


Impact indicators

Maternal mortality ratio (per 100 000 live births)

• 26% reduction in MMR between 2000 and 2017

• Stillbirth rate (per 1000 births) is 14.60

• Adolescent mortality rate (deaths per 100,000 adolescents) is 6.60

Source: UN IGME database 2019

Nutrition indicators


For definition of the superscript please refer to page number 95 of the country fact sheet
Causes of maternal deaths

- Proportion of direct maternal deaths decreased from 95% to 94% between 2015 and 2019

Causes of newborn deaths

More than 22,000 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Causes of under-5 deaths

More than 45,000 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries

Sources:
- 19Global Burden of Disease study 2019
- 25Global Health Observatory - World Health Organization 2017
### SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
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</tr>
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<tbody>
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<td>On family planning/contraception</td>
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<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
<td>●</td>
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<td>On antenatal care</td>
<td>●</td>
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<tr>
<td>On childbirth</td>
<td>●</td>
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<tr>
<td>On postnatal care for mothers and newborns</td>
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<td>On management of low birth weight and preterm newborns</td>
<td>●</td>
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<td>●</td>
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<td>On early childhood development</td>
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<tr>
<td>Multisectoral plan of action for violence against women</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>●</td>
</tr>
</tbody>
</table>


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### Causes of adolescent deaths

**Top 5 causes of adolescent deaths**

1. **Road injury**
2. **Self-harm**
3. **Drowning**
4. **Lower respiratory infections**
5. **Tuberculosis**

Source: 24Global Health Observatory - World Health Organization 2016
Coverage indicators

Sexual, reproductive and maternal health

By wealth

- **FP satisfied with modern methods (%)**
  - Poorest: 77%
  - Richest: 84%
- **FP unmet need (%)**
  - Poorest: 17%
  - Richest: 29%
- **ANC 4+ visits (%)**
  - Poorest: 53%
  - Richest: 74%
- **Institutional delivery (%)**
  - Poorest: 67%
  - Richest: 81%
- **Contact with a health provider within two days of delivery (%)**
  - Poorest: 79%
  - Richest: 89%
- **Two doses of tetanus (%)**
  - Poorest: 60%
  - Richest: 83%

By geography

- **FP satisfied with modern methods (%)**
  - Rural: 79%
  - Urban: 88%
- **FP unmet need (%)**
  - Rural: 17%
  - Urban: 28%
- **ANC 4+ visits (%)**
  - Rural: 52%
  - Urban: 67%
- **Institutional delivery (%)**
  - Rural: 70%
  - Urban: 80%
- **Contact with a health provider within two days of delivery (%)**
  - Rural: 79%
  - Urban: 84%
- **Two doses of tetanus (%)**
  - Rural: 60%
  - Urban: 80%

By maternal education

- **FP satisfied with modern methods (%)**
  - No education (Pre-primary or none): 77%
  - Secondary education: 80%
- **FP unmet need (%)**
  - No education (Pre-primary or none): 13%
  - Secondary education: 28%
- **ANC 4+ visits (%)**
  - No education (Pre-primary or none): 53%
  - Secondary education: 79%
- **Institutional delivery (%)**
  - No education (Pre-primary or none): 55%
  - Secondary education: 79%
- **Contact with a health provider within two days of delivery (%)**
  - No education (Pre-primary or none): 79%
  - Secondary education: 80%
- **Two doses of tetanus (%)**
  - No education (Pre-primary or none): 79%
  - Secondary education: 80%


- **59%** received **4+ ANC visits during last pregnancy**
- **Institutional deliveries have increased from 36% to 37% between 2009–2010 and 2015–2016**
- **17% delivered by caesarean section**
- **71% had a postpartum contact with a health provider within two days of delivery**
- **Less than 10% women aged 30–49 were screened for cervical cancer**

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**Newborn health**

- Proportion of infants who were breastfed within the first hour of birth: 76% in 2009–2010, 67% in 2015–2016.
- Skin-to-skin contact in the first hour of life: NA, NA.
- Hospital discharge at least after 24 hours after birth: NA, NA.
- Proportion of newborns who have postnatal contact with a health provider within two days of delivery: 36%.
- Proportion of newborns who have home visits in the first week of life: NA, NA.


**Child health and development**


**Adolescent health and development**

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: 32%.
- Current tobacco use (any form): 10%.
- Attempted suicide: 9%.
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey: 24%.
- Percentage of women aged 20–24 who were married or in a union before age 18: 16%.

Source: 29Global School-based Student Health Survey 2016 | 10Demographic and Health Survey 2015–2016

For definition of the superscript please refer to page number 95 of the country fact sheet.
Health system indicators

Health financing

- Out-of-pocket health expenditure is increasing

Source: 17Global Health Expenditure database 2015 | 18Global Health Expenditure database 2018

Health workforce

- 17 per 10 000 population availability of doctors, nurses, midwives versus 44.5 per 10 000 recommended in Global Strategy

- 10 per 10 000 population availability of midwives and nurses versus 18 per 10 000 population in the South-East Asia Region

Source: 21Global Health Observatory - World Health Organization 2018 | 64World Health Statistics 2020

Service delivery

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

- **Family planning coverage – satisfied needs**
- **Pregnancy care**
- **Child immunization coverage (DPT3)**
- **Care-seeking behaviour of suspected pneumonia**

- **Tuberculosis (effective) treatment coverage**
- **HIV antiretroviral therapy coverage**
- **Access to basic sanitation**

- **Prevalence of normal blood pressure level in population age standardized**
- **Prevalence of normal fasting blood sugar level in population**
- **Tobacco non-use**

- **Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)**
- **Health worker density (Physician, pyc., surg.) (%)**
- **Health security IHR compliance (%)**

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

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**a** Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

**b** Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**c** Stunting in under-5 children: Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

**d** Underweight in adolescents: Percentage of adolescents aged 10–19 years with BMI <−2.5 SD of the median according to the WHO growth reference for school-age children and adolescents

**e** Overweight in adolescents: Percentage of adolescents aged 10–19 years with BMI >1 SD of the median according to the WHO growth reference for school-age children and adolescents

**(f)** Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

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**l** Percentage of students who were in a physical fight one or more times during the 12 months before the survey: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
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<th>Value</th>
<th>Year of data</th>
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<tbody>
<tr>
<td>Total population</td>
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<tr>
<td>Total under-5 population</td>
<td>2,707,000</td>
<td>2020</td>
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<tr>
<td>Total adolescent population (10–19 years)</td>
<td>6,120,000</td>
<td>2020</td>
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<tr>
<td>Women in reproductive age group (15–49 years)</td>
<td>9,029,000</td>
<td>2020</td>
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<td>Annual number of births</td>
<td>563,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
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<td>2019</td>
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<tr>
<td>Adolescent birth rate (per 1,000 women aged 15–19 years)</td>
<td>63</td>
<td>2019</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>77</td>
<td>2019</td>
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<tbody>
<tr>
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<td>Percentage of population below international poverty line</td>
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<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
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<td>Improved sanitation</td>
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<td>Handwashing facility with soap and water</td>
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<td>2019</td>
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<td>97</td>
<td>2019</td>
</tr>
</tbody>
</table>


**Impact indicators**

Maternal mortality ratio (per 100,000 live births)

- 66% reduction in MMR between 2000 and 2017

• Stillbirth rate (per 1000 births) is 17\textsuperscript{60}
• Adolescent mortality rate (deaths per 100,000 adolescents) is 7\textsuperscript{60}

Source: \textsuperscript{60}UN IGME database 2019

• 66\% reduction in neonatal mortality rate between 1990 and 2019

3.8\% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

• 78\% reduction in under-5 mortality rate between 1990 and 2019

5.2\% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

• Prevalence of LBW unchanged from 12\% to 12\% between 2011 and 2016
• 16\% reduction in stunting among under-5 children between 2014 and 2019

Source: \textsuperscript{45}Multiple Indicator Cluster Survey 2014 | \textsuperscript{7}Demographic and Health Survey 2011 | \textsuperscript{41}Multiple Indicator Cluster Survey 2019 | \textsuperscript{11}Demographic and Health Survey 2016 | \textsuperscript{47}The State of the World’s Children Reports 2019

For definition of the superscript please refer to page number 105 of the country fact sheet
### Causes of maternal deaths

- **Indirect maternal deaths**
- Maternal haemorrhage
- Maternal hypertensive disorders
- Late maternal deaths
- Maternal obstructed labour and uterine rupture
- Other direct maternal disorders
- Maternal abortion and miscarriage
- Maternal sepsis and other maternal infections
- Ectopic pregnancy
- Maternal deaths aggravated by HIV/AIDS


- Proportion of direct maternal deaths decreased from 54% to 50% between 2015 and 2019

### Causes of newborn deaths

- Prematurity
- Birth asphyxia and birth trauma
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Meningitis/encephalitis
- Injuries
- Diarrhoeal diseases
- Tetanus
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

Source: [26]Global Health Observatory - World Health Organization 2017

### Causes of under-5 deaths

- Prematurity
- Birth asphyxia and birth trauma
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Injuries
- Diarrhoeal diseases
- Other noncommunicable diseases
- Meningitis/encephalitis
- Tetanus
- Measles
- HIV/AIDS
- Malaria

More than 19,000 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries

More than 11,500 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Source: [26]Global Health Observatory - World Health Organization 2017
### SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/ N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On antenatal care&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On childbirth&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
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<tr>
<td>On postnatal care for mothers and newborns&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On management of low birth weight and preterm newborns&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On child health and development of children&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On early childhood development&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On integrated management of childhood illness&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood pneumonia&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On management of childhood diarrhoea&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On management of acute malnutrition in children&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On adolescent (10–19 years) health issues&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women&lt;sup&gt;45&lt;/sup&gt;</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care&lt;sup&gt;15&lt;/sup&gt;</td>
<td>●</td>
</tr>
</tbody>
</table>

Source: <sup>45</sup>Reproductive, Maternal, Newborn, Child and Adolescent Health Policy Survey, 2019 | <sup>15</sup>Global Abortion Policies Database, 2017

### Causes of adolescent deaths

**Top 5 causes of adolescent deaths**

1. **Road injury**
2. **Self-harm**
3. **Drowning**
4. **Leukaemia**
5. **Interpersonal violence**

Source: <sup>24</sup>Global Health Observatory - World Health Organization 2016
### Coverage indicators
#### Sexual, reproductive and maternal health

- **30% increase in 4+ ANC visits during last pregnancy between 2014 and 2019**
- **12% increase in receiving two doses of tetanus between 2014 and 2019**
- **Institutional deliveries have increased from 55% to 78% between 2014 and 2019**
- **41% increase in deliveries attended by skilled health personnel from 2014 to 2019**
- **Postpartum contact with a health provider within two days of delivery has increased from 58% to 69% between 2014 and 2019**
- **78% increase in C-section between 2014 and 2019**
- **10 to 50% women aged 30–49 were screened for cervical cancer**

#### Equity in coverage

**By wealth**
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Two doses of tetanus (%)
- Institutional delivery (%)

<table>
<thead>
<tr>
<th>Wealth</th>
<th>ANC 4+ visits</th>
<th>Two doses of tetanus</th>
<th>Institutional delivery</th>
<th>FP satisfied with modern methods</th>
<th>FP unmet need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richest</td>
<td>81</td>
<td>72</td>
<td>90</td>
<td>34</td>
<td>15</td>
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<tr>
<td>Poorest</td>
<td>34</td>
<td>89</td>
<td>59</td>
<td>34</td>
<td>55</td>
</tr>
</tbody>
</table>

**By geography**
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Two doses of tetanus (%)
- Institutional delivery (%)

<table>
<thead>
<tr>
<th>Geography</th>
<th>ANC 4+ visits</th>
<th>Two doses of tetanus</th>
<th>Institutional delivery</th>
<th>FP satisfied with modern methods</th>
<th>FP unmet need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>69</td>
<td>68</td>
<td>69</td>
<td>64</td>
<td>48</td>
</tr>
<tr>
<td>Rural</td>
<td>48</td>
<td>47</td>
<td>47</td>
<td>44</td>
<td>17</td>
</tr>
</tbody>
</table>

**By maternal education**
- FP satisfied with modern methods (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- Two doses of tetanus (%)
- Institutional delivery (%)

<table>
<thead>
<tr>
<th>Education</th>
<th>ANC 4+ visits</th>
<th>Two doses of tetanus</th>
<th>Institutional delivery</th>
<th>FP satisfied with modern methods</th>
<th>FP unmet need</th>
</tr>
</thead>
<tbody>
<tr>
<td>No education</td>
<td>69</td>
<td>69</td>
<td>69</td>
<td>69</td>
<td>69</td>
</tr>
<tr>
<td>Secondary education</td>
<td>56</td>
<td>59</td>
<td>56</td>
<td>56</td>
<td>56</td>
</tr>
</tbody>
</table>

**Newborn health**

- **16%** increase in skin-to-skin contact in the first hour of life between 2014 and 2019.
- **20%** increase in postnatal contact with a health provider within two days of delivery between 2014 and 2019.

**Proportion of infants who were breastfed within the first hour of birth**

- 2014: 49%
- 2019: 42%

**Skin-to-skin contact in the first hour of life**

- 2014: NA
- 2019: 16%

**Hospital discharge at least after 24 hours after birth**

- 2014: NA
- 2019: NA

**Proportion of newborns who have postnatal contact with a health provider within two days of delivery**

- 2014: 58%
- 2019: 69%

**Proportion of newborns who have home visits in the first week of life**

- 2014: 28%
- 2019: NA

**Source:** 38Multiple Indicator Cluster Survey 2014 | 41Multiple Indicator Cluster Survey 2019

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**Child health and development**

- **5%** increase in children getting full immunization between 2014 and 2019.
- **9%** increase in exclusive breastfeeding between 2014 and 2019.
- **17%** increase in introducing semisolid or soft foods between 2014 and 2019.
- **35%** increase in receiving ORS between 2014 and 2019.
- **59%** increase in receiving both ORS and zinc between 2014 and 2019.
- **82%** pneumonia suspected children taken to appropriate health provider for treatment.

**Percentage of infants <6 months who are fed exclusively with breast milk**

1. 2011: 66%
2. 2014: 70%
3. 2016: 59%
4. 2019: 59%

**Introduction to semisolid or soft foods 6–8 months**

1. 2011: 82%
2. 2014: 75%
3. 2016: 74%
4. 2019: 74%

**Percentage of children fully immunized**

1. 2011: 90%
2. 2014: 86%
3. 2016: 86%
4. 2019: 86%

**Measles/MR vaccination at 9 months**

1. 2011: 60%
2. 2014: 60%
3. 2016: 60%
4. 2019: 60%

**Vitamin A supplementation 6–59 months**

1. 2011: 29%
2. 2014: 29%
3. 2016: 29%
4. 2019: 29%

**Percentage of children with diarrhoea receiving oral rehydration salts (ORS)**

1. 2011: 86%
2. 2014: 78%
3. 2016: 78%
4. 2019: 78%

**Percentage of children with diarrhoea who received ORS and zinc**

1. 2011: 41%
2. 2014: 41%
3. 2016: 41%
4. 2019: 41%

**Proportion of children with suspected pneumonia taken to an appropriate health provider**

1. 2011: 59%
2. 2014: 59%
3. 2016: 59%
4. 2019: 59%

**Antibiotic treatment for children with acute respiratory infection (ARI) symptoms**

1. 2011: 87%
2. 2014: 87%
3. 2016: 87%
4. 2019: 87%

**Children have play things at home**

1. 2011: 21%
2. 2014: 21%
3. 2016: 21%
4. 2019: 21%

**Children with inadequate supervision**

1. 2011: 25%
2. 2014: 25%
3. 2016: 25%
4. 2019: 25%

**Source:** 7Demographic and Health Survey 2011 | 38Multiple Indicator Cluster Survey 2014 | 11Demographic and Health Survey 2016 | 41Multiple Indicator Cluster Survey 2019

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**Adolescent health and development**

- **15%** current tobacco use (any form).
- **8%** attempted suicide.
- **10%** percentage of students who were in a physical fight one or more times during the 12 months before the survey.
- **33%** percentage of women aged 20–24 who were married or in a union before age 18.

**Source:** 29Global School-based Student Health Survey 2015 | 41Multiple Indicator Cluster Survey 2019

For definition of the superscript please refer to page number 105 of the country fact sheet.
Health system indicators

Health financing

- **Out-of-pocket health expenditure is decreasing**

Source: ††Global Health Expenditure database 2015 | ††Global Health Expenditure database 2018

Health workforce

- **26 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy**
- **31 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region**


Service delivery

Source: ††Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 78%
- Family planning coverage – satisfied needs
- 62%
- Pregnancy care
- 77%
- Child immunization coverage (DPT3)
- 93%
- Care-seeking behaviour of suspected pneumonia
- 82%

**Infectious disease control**
- 53%
- Tuberculosis (effective) treatment coverage
- 42%
- HIV antiretroviral therapy coverage
- 56%
- Access to basic sanitation
- 62%

**Noncommunicable diseases**
- 61%
- Prevalence of normal blood pressure level in population age standardized
- 100%
- Prevalence of normal fasting blood sugar level in population
- 41%
- Tobacco non-use
- 55%

**Service capacity and access**
- 20%
- Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- 17%
- Health worker density (Physician, pyc., surg.) (%)
- 22%
- Health security IHR compliance (%)
- 22%

Source: **Provisional calculation (2021)** based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

---

**aLow birth weight (LBW)**: Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

**bWasting in under-5 children**: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**cStunting in under-5 children**: Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

**dUnderweight in adolescents**: Percentage of adolescents aged 10–19 years with BMI <-2 SD of the median according to the WHO growth reference for school-age children and adolescents

**eOverweight in adolescents**: Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

**fHaemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)**

**gChildren have play things at home**: Percentage of children under age 5 who play with two or more types of playthings

**hChildren with inadequate supervision**: Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

**iPhysical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents**: Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

**jCurrent tobacco use (any form)**: Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

**kAttempted suicide**: Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

**lPercentage of students who were in a physical fight one or more times during the 12 months before the survey**: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
### Basic profile

**Demographic**

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>21,413,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5</td>
<td>1,660,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent</td>
<td>3,386,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group</td>
<td>5,324,000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>331,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate</td>
<td>2.2</td>
<td>2016</td>
</tr>
<tr>
<td>Adolescent birth rate</td>
<td>21</td>
<td>2016</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>97</td>
<td>2006–2007</td>
</tr>
</tbody>
</table>


**Country profile**

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>13,230</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>0.8</td>
<td>2016</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>93</td>
<td>2019</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>99</td>
<td>2019</td>
</tr>
</tbody>
</table>


### Impact indicators

**Maternal mortality ratio (per 100,000 live births)**

- **36% reduction in MMR between 2000 and 2017**

Stillbirth rate (per 1000 births) is 60.
Adolescent mortality rate (deaths per 100,000 adolescents) is 260.

- 69% reduction in neonatal mortality rate between 1990 and 2019
- 68% reduction in under-5 mortality rate between 1990 and 2019

Nutrition indicators:
- Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status.
  - Overweight in adolescents: 12%
  - Underweight in adolescents: 15%

3.3% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

3.9% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

Stillbirth rate (per 1000 births) is 60.
Adolescent mortality rate (deaths per 100,000 adolescents) is 260.

3.3% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

3.9% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

3.3% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

3.9% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

Nutrition indicators:
- Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status.
  - Overweight in adolescents: 12%
  - Underweight in adolescents: 15%

Source: "Nutrition indicators"
Causes of maternal deaths

- Maternal hypertensive disorders
- Ectopic pregnancy
- Other direct maternal disorders
- Maternal haemorrhage
- Indirect maternal deaths
- Late maternal deaths
- Maternal abortion and miscarriage
- Maternal sepsis and other maternal infections
- Maternal obstructed labour and uterine rupture
- Maternal deaths aggravated by HIV/AIDS

Proportion of indirect maternal deaths increased from 17% to 18% between 2015 and 2019

More than 2700 under-5 children died, mainly due to:
- newborn causes
- infections
- injuries

More than 1800 newborns died in the first month of life mainly due to:
- prematurity
- birth asphyxia
- infections

Causes of newborn deaths

Causes of under-5 deaths

Source: 14Global Burden of Disease study 2019

Source: 25Global Health Observatory - World Health Organization 2017
Causes of adolescent deaths

Top 5 causes of adolescent deaths

1. Self-harm
2. Drowning
3. Road injury
4. Congenital anomalies
5. Lower respiratory infections

Source: Global Health Observatory - World Health Organization 2016

SRMNCAH policy survey

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<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
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<td>✔</td>
</tr>
<tr>
<td>On CAC/post-abortion care</td>
<td>✔</td>
</tr>
</tbody>
</table>

Coverage indicators

Sexual, reproductive and maternal health

- 93% received 4+ ANC visits during last pregnancy
- 102% increase in receiving two doses of tetanus between 2006–2007 and 2016
- Institutional deliveries have increased from 96% to 100% between 2006–2007 and 2016
- 100% deliveries attended by skilled health personnel
- Postpartum contact with a health provider within two days of delivery has increased from 91% to 99% between 2006–2007 and 2016
- More than 50% and less than 70% women aged 30–49 were screened for cervical cancer.

Source: 4Demographic and Health Survey 2006–2007 | 11Demographic and Health Survey 2016 | Global Health Observatory - World Health Organization 2019

Equity in coverage

By wealth

<table>
<thead>
<tr>
<th></th>
<th>Poorest</th>
<th>Richest</th>
</tr>
</thead>
<tbody>
<tr>
<td>FP satisfied with modern methods (%)</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>Contact with a health provider within two days of delivery (%)</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>ANC 4+ visits (%)</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>Two doses of tetanus (%)</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>Institutional delivery (%)</td>
<td>100</td>
<td>NA</td>
</tr>
<tr>
<td>FP unmet need (%)</td>
<td>65</td>
<td>65</td>
</tr>
<tr>
<td>SBA (%)</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

Source: 11Demographic and Health Survey 2016 | 4Demographic and Health Survey 2006–2007

* Indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed
Newborn health

- 13% increase in breastfeeding within the first hour of birth between 2006–2007 and 2016
- 99% got postnatal contact with a health provider within two days of delivery

Child health and development

- 99% children got full immunization
- 8% increase in exclusive breastfeeding between 2006–2007 and 2016
- 36% increase in receiving ORS between 2006–2007 and 2016
- 52% pneumonia suspected children taken to appropriate health provider for treatment

Adolescent health and development

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- Current tobacco use (any form)
- Attempted suicide
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey
- Percentage of women aged 20–24 who were married or in a union before age 18

Source: 4Demographic and Health Survey 2006–2007 | 11Demographic and Health Survey 2016

Source: 29Global School-based Student Health Survey 2015 | 11Demographic and Health Survey 2016

For definition of the superscript please refer to page number 115 of the country fact sheet
Health system indicators

Health financing

- Out-of-pocket health expenditure is increasing

Source: 17Global Health Expenditure database 2015 | 18Global Health Expenditure database 2018

Health workforce

- 37 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy
- 22 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region

Source: 23Global Health Observatory - World Health Organization 2015 | 64World Health Statistics 2020

Service delivery

Source: 44Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
Break-up of UHC coverage index of essential health services with RMNCH sub-index

**RMNCH**
- 79% Family planning coverage – satisfied needs
- 74% Pregnancy care
- 99% Child immunization coverage (DPT3)
- 99% Care-seeking behaviour of suspected pneumonia

**Infectious disease control**
- 61% Tuberculosis (effective) treatment coverage
- 52% HIV antiretroviral therapy coverage
- 45% Access to basic sanitation

**Noncommunicable diseases**
- 70% Prevalence of normal blood pressure level in population age standardized
- 55% Prevalence of normal fasting blood sugar level in population
- 62% Tobacco non-use

**Service capacity and access**
- 58% Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access)
- 100% Health worker density (Physician, pyc., surg.) (%)
- 76% Health security IHR compliance (%)

Source: **Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data**

---

*a Low birth weight (LBW): Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

*b Wasting in under-5 children: Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

*c Stunting in under-5 children: Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

*d Underweight in adolescents: Percentage of adolescents aged 10–19 years with BMI <–2 SD of the median according to the WHO growth reference for school-age children and adolescents

*e Overweight in adolescents: Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents

*f Haemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)

*g Children have play things at home: Percentage of children under age 5 who play with two or more types of playthings

*h Children with inadequate supervision: Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

*i Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents: Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

+j Current tobacco use (any form): Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

+k Attempted suicide: Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

+l Percentage of students who were in a physical fight one or more times during the 12 months before the survey: Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

**Demographic**

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>69,800,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population</td>
<td>3,596,000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)</td>
<td>8,492,000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)</td>
<td>17,177,000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births</td>
<td>707,000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)</td>
<td>1.4</td>
<td>2019</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)</td>
<td>23</td>
<td>2019</td>
</tr>
<tr>
<td>Births registered (%)</td>
<td>100</td>
<td>2019</td>
</tr>
</tbody>
</table>


**Country profile**

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita</td>
<td>18,520</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population below international poverty line</td>
<td>0</td>
<td>2018</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Improved sanitation</td>
<td>100</td>
<td>2019</td>
</tr>
<tr>
<td>Handwashing facility with soap and water</td>
<td>89</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services</td>
<td>100</td>
<td>2019</td>
</tr>
</tbody>
</table>


**Impact indicators**

**Maternal mortality ratio (per 100,000 live births)**

- **14% reduction in MMR between 2000 and 2017**

• Stillbirth rate (per 1000 births) is 6
• Adolescent mortality rate (deaths per 100 000 adolescents) is 9

Source: 60 UN IGME database 2019

• 75% reduction in neonatal mortality rate between 1990 and 2019

4.0% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate

• 76% reduction in under-5 mortality rate between 1990 and 2019

4.9% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate

Nutrition indicators

For definition of the superscript please refer to page number 125 of the country fact sheet

Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status

Overweight in adolescents 20%
Underweight in adolescents 8%

76% reduction in under-5 mortality rate between 1990 and 2019
Causes of maternal deaths

- Proportion of direct maternal deaths decreased from 86% to 84% between 2015 and 2019

Causes of newborn deaths

More than 3600 newborns died in the first month of life mainly due to:
- prematurity
- congenital anomalies
- birth asphyxia

Causes of under-5 deaths

More than 6700 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- infections
SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception</td>
<td>☑</td>
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<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling</td>
<td>☑</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control</td>
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<tr>
<td>On antenatal care</td>
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<td>On management of low birth weight and preterm newborns</td>
<td>☑</td>
</tr>
<tr>
<td>On child health and development of children</td>
<td>☑</td>
</tr>
<tr>
<td>On early childhood development</td>
<td>☑</td>
</tr>
<tr>
<td>On integrated management of childhood illness</td>
<td>☑</td>
</tr>
<tr>
<td>On management of childhood pneumonia</td>
<td>☑</td>
</tr>
<tr>
<td>On management of childhood diarrhoea</td>
<td>☑</td>
</tr>
<tr>
<td>On management of malaria with appropriate recommendations for children</td>
<td>☑</td>
</tr>
<tr>
<td>On management of acute malnutrition in children</td>
<td>☑</td>
</tr>
<tr>
<td>On adolescent (10–19 years) health issues</td>
<td>☑</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women</td>
<td>☑</td>
</tr>
</tbody>
</table>

Coverage indicators

**Sexual, reproductive and maternal health**

- 90% received 4+ ANC visits during last pregnancy
- 99% institutional deliveries
- 99% deliveries attended by skilled health personnel
- 5% increase in C-section between 2015–2016 and 2019
- More than 50% but less than 70% women aged 30–49 were screened for cervical cancer


**Equity in coverage**

**By wealth**

FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
SBA (%)
Two doses of tetanus (%)
ANC 4+ visits (%)

- Poorest
- Richest

**By geography**

FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
SBA (%)
Two doses of tetanus (%)
ANC 4+ visits (%)

- Rural
- Urban

**By maternal education**

FP satisfied with modern methods (%)
FP unmet need (%)
Contact with a health provider within two days of delivery (%)
Institutional delivery (%)
SBA (%)
Two doses of tetanus (%)
ANC 4+ visits (%)

- No education (Pre-primary or none)
- Secondary education

Source: 41 Multiple Indicator Cluster Survey 2019

122 | THAILAND
Newborn health

- 8% newborns got skin-to-skin contact in the first hour of life

<table>
<thead>
<tr>
<th>Proportion of infants who were breastfed within the first hour of birth</th>
<th>Skin-to-skin contact in the first hour of life</th>
<th>Hospital discharge at least after 24 hours after birth</th>
<th>Proportion of newborns who have postnatal contact with a health provider within two days of delivery</th>
<th>Proportion of newborns who have home visits in the first week of life</th>
</tr>
</thead>
<tbody>
<tr>
<td>40%</td>
<td>34%</td>
<td>NA</td>
<td>8%</td>
<td>NA</td>
</tr>
</tbody>
</table>

Source: 39Multiple Indicator Cluster Survey 2015–2016 | 41Multiple Indicator Cluster Survey 2019

Child health and development

- 15% increase in children getting full immunization between 2015–2016 and 2019
- 94% got measles vaccination
- 92% introduced semisolid or soft foods at 6–8 months

Adolescent health and development

- Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- Current tobacco use (any form)
- Attempted suicide
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey
- Percentage of women aged 20–24 who were married or in a union before age 18

Source: 29Global School-based Student Health Survey 2015 | 41Multiple Indicator Cluster Survey 2019

For definition of the superscript please refer to page number 125 of the country fact sheet
Health system indicators

**Health financing**

- **Out-of-pocket health expenditure is decreasing**

Source: 17 Global Health Expenditure database 2015 | 18 Global Health Expenditure database 2018

**Health workforce**

- 28 per 10 000 population availability of doctors, nurses, midwives versus 44.5 per 10 000 recommended in Global Strategy
- 28 per 10 000 population availability of midwives and nurses versus 18 per 10 000 population in the South-East Asia Region

Source: 23 Global Health Observatory - World Health Organization 2015 | 64 World Health Statistics 2020

**Service delivery**

Source: 44 Provisional calculation (2021) based on available data in DHS/MICS 2012-2019; Step surveys & Nationally reported data
| Break-up of UHC coverage index of essential health services with RMNCH sub-index |
|---|---|
| **RMNCH** | 89% |
| Family planning coverage – satisfied needs | 88% |
| Pregnancy care | 94% |
| Child immunization coverage (DPT3) | 97% |
| Care-seeking behaviour of suspected pneumonia | 80% |
| **Infectious disease control** | 81% |
| Tuberculosis (effective) treatment coverage | 71% |
| HIV antiretroviral therapy coverage | 75% |
| Access to basic sanitation | 99% |
| **Noncommunicable diseases** | 73% |
| Prevalence of normal blood pressure level in population age standardized | 100% |
| Prevalence of normal fasting blood sugar level in population | 55% |
| Tobacco non-use | 70% |
| **Service capacity and access** | 88% |
| Density of hospital beds, expressed as % of global threshold, 18/10 000 (proxy for basic hospital access) | 100% |
| Health worker density (Physician, pyc., surg.) (%) | 70% |
| Health security IHR compliance (%) | 55% |

Source: **Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data**

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**aLow birth weight (LBW):** Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age

**bWasting in under-5 children:** Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished

**cStunting in under-5 children:** Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished

**dUnderweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI <-2 SD of the median according to the WHO growth reference for school-age children and adolescents

**eOverweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI >1 SD of the median according to the WHO growth reference for school-age children and adolescents

**fHaemoglobin levels are shown in grams per decilitre (g/dl) (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)**

**gChildren have play things at home:** Percentage of children under age 5 who play with two or more types of playthings

**hChildren with inadequate supervision:** Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week

**iPhysical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents:** Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

**jCurrent tobacco use (any form):** Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)

**kAttempted suicide:** Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey

**lPercentage of students who were in a physical fight one or more times during the 12 months before the survey:** Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey
Basic profile

Demographic

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population⁵⁵</td>
<td>1 318 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total under-5 population⁵⁵</td>
<td>178 000</td>
<td>2020</td>
</tr>
<tr>
<td>Total adolescent population (10–19 years)⁵⁵</td>
<td>307 000</td>
<td>2020</td>
</tr>
<tr>
<td>Women in reproductive age group (15–49 years)⁵⁵</td>
<td>325 000</td>
<td>2020</td>
</tr>
<tr>
<td>Annual number of births⁶¹</td>
<td>38 000</td>
<td>2019</td>
</tr>
<tr>
<td>Total fertility rate (births per woman)⁶¹</td>
<td>3.9</td>
<td>2019</td>
</tr>
<tr>
<td>Adolescent birth rate (per 1000 women aged 15–19 years)¹¹</td>
<td>42</td>
<td>2016</td>
</tr>
<tr>
<td>Births registered (%)¹¹</td>
<td>60</td>
<td>2016</td>
</tr>
</tbody>
</table>


Country profile

<table>
<thead>
<tr>
<th>Country profile</th>
<th>Value</th>
<th>Year of data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GNI (PPP) per capita⁶³</td>
<td>4730</td>
<td>2019</td>
</tr>
<tr>
<td>Percentage of population below international poverty line²²</td>
<td>31</td>
<td>2014</td>
</tr>
<tr>
<td>Percentage of population using safely managed sanitation services including a handwashing facility with soap and water¹¹</td>
<td>54</td>
<td>2016</td>
</tr>
<tr>
<td>Improved sanitation¹¹</td>
<td>54</td>
<td>2016</td>
</tr>
<tr>
<td>Handwashing facility with soap and water¹¹</td>
<td>28</td>
<td>2016</td>
</tr>
<tr>
<td>Percentage of population using safely managed drinking water services¹¹</td>
<td>80</td>
<td>2016</td>
</tr>
</tbody>
</table>

Source: ⁶³World Bank, World Development Indicators 2019 | ²²Global Health Observatory - World Health Organization 2014 | ¹¹Demographic and Health Survey 2016

Impact indicators

Maternal mortality ratio (per 100 000 live births)

- 81% reduction in MMR between 2000 and 2017

  6.2% annual rate of reduction between 2010 and 2017, and the assumption that all things will remain as in 2017 considered for calculating the 2030 projection for maternal mortality ratio
Stillbirth rate (per 1000 births) is 13.60.

Adolescent mortality rate (deaths per 100,000 adolescents) is 18.60.

Source: UN IGME database 2019

75% reduction in under-5 mortality rate between 1990 and 2019.

Under-5 mortality rate (per 1000 live births)

SDG target U5MR: 25


3.7% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for under-5 mortality rate.

64% reduction in neonatal mortality rate between 1990 and 2019.

Neonatal mortality rate (per 1000 live births)

SDG target NMR: 12


4.7% annual rate of reduction between 1990 and 2019, considered for calculating the 2030 projection for neonatal mortality rate.

Stillbirth rate (per 1000 births) is 13.60.

Adolescent mortality rate (deaths per 100,000 adolescents) is 18.60.

Source: UN IGME database 2019

Nutrition indicators

Prevalence of anaemia in women aged 15–49, disaggregated by age and pregnancy status:

- Overweight in adolescents: 11%
- Underweight in adolescents: 11%


For definition of the superscript please refer to page number 135 of the country fact sheet.
Causes of maternal deaths

- No change recorded in direct maternal deaths between 2015 and 2019

Causes of newborn deaths

- Birth asphyxia and birth trauma
- Prematurity
- Sepsis and other infectious conditions of the newborn
- Congenital anomalies
- Acute lower respiratory infections
- Other communicable, perinatal and nutritional conditions
- Injuries
- Meningitis/encephalitis
- Tetanus
- Diarrhoeal diseases
- Other noncommunicable diseases
- HIV/AIDS
- Malaria
- Measles

Causes of under-5 deaths

- Acute lower respiratory infections
- Birth asphyxia and birth trauma
- Prematurity
- Other communicable, perinatal and nutritional conditions
- Diarrhoeal diseases
- Injuries
- Sepsis and other infectious conditions of the newborn
- Other noncommunicable diseases
- Congenital anomalies
- Meningitis/encephalitis
- Tetanus
- HIV/AIDS
- Malaria
- Measles

More than 900 newborns died in the first month of life mainly due to:
- birth asphyxia
- prematurity
- infections

More than 2100 under-5 children died, mainly due to:
- newborn causes
- pneumonia and diarrhoea
- injuries
SRMNCAH policy survey

<table>
<thead>
<tr>
<th>Presence of key national policy/guidelines on SRMNCAH at the national level</th>
<th>(Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>On family planning/contraception 45</td>
<td>●</td>
</tr>
<tr>
<td>On sexually transmitted infections diagnosis, treatment and counselling 45</td>
<td>●</td>
</tr>
<tr>
<td>On comprehensive national cervical cancer prevention and control 45</td>
<td>●</td>
</tr>
<tr>
<td>On antenatal care 45</td>
<td>●</td>
</tr>
<tr>
<td>On childbirth 45</td>
<td>●</td>
</tr>
<tr>
<td>On postnatal care for mothers and newborns 45</td>
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</tr>
<tr>
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</tr>
<tr>
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<td>●</td>
</tr>
<tr>
<td>On early childhood development 45</td>
<td>●</td>
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<td>On adolescent (10–19 years) health issues 45</td>
<td>●</td>
</tr>
<tr>
<td>Multisectoral plan of action for violence against women 45</td>
<td>●</td>
</tr>
<tr>
<td>On CAC/post-abortion care 15</td>
<td>●</td>
</tr>
</tbody>
</table>


Causes of adolescent deaths

Top 5 causes of adolescent deaths

1. Road injury
2. Tuberculosis
3. Interpersonal violence
4. Drowning
5. Self-harm

Source: 24Global Health Observatory - World Health Organization 2016
Coverage indicators

Sexual, reproductive and maternal health

- 40% increase in 4+ ANC visits during last pregnancy between 2009–2010 and 2016
- Institutional deliveries have increased from 22% to 49% between 2009–2010 and 2016
- 90% increase in deliveries attended by skilled health personnel from 2009–2010 and 2016
- Postpartum contact with a health provider within two days of delivery has increased from 25% to 35% between 2009–2010 and 2016
- 100% increase in C-section between 2009–2010 and 2016
- Less than 10% women aged 30–49 were screened for cervical cancer

Equity in coverage

By wealth

- FP satisfied with modern methods (%)
- Contact with a health provider within two days of delivery (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- SBA (%)
- Two doses of tetanus (%)

By geography

- FP satisfied with modern methods (%)
- Contact with a health provider within two days of delivery (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- SBA (%)
- Two doses of tetanus (%)

By maternal education

- FP satisfied with modern methods (%)
- Contact with a health provider within two days of delivery (%)
- FP unmet need (%)
- ANC 4+ visits (%)
- SBA (%)
- Two doses of tetanus (%)
Newborn health

- 62% got skin-to-skin contact in the first hour of life
- 31% got postnatal contact with a health provider within two days of delivery

Child health and development

- 7% increase in children getting full immunization between 2009–2010 and 2016
- 27% increase in use of vitamin A supplements between 2009–2010 and 2016
- 40% children with diarrhoea received both ORS and zinc
- 71% pneumonia suspected children taken to appropriate health provider for treatment

Adolescent health and development

Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents

- Current tobacco use (any form) 28%
- Attempted suicide 9%
- Percentage of students who were in a physical fight one or more times during the 12 months before the survey 29%
- Percentage of women aged 20–24 who were married or in a union before age 18 15%

For definition of the superscript please refer to page number 135 of the country fact sheet
**Health system indicators**

### Health financing

- **Out-of-pocket health expenditure is constant**

![Chart showing health financing](chart)


### Health workforce

- **15 per 10,000 population availability of doctors, nurses, midwives versus 44.5 per 10,000 recommended in Global Strategy**
- **17 per 10,000 population availability of midwives and nurses versus 18 per 10,000 population in the South-East Asia Region**


### Service delivery

- **UHC service coverage index**
- **RMNCH service coverage index**

![Chart showing service delivery](chart)

Source: [44] Primary health care on the road to universal health coverage, 2019
Source: Provisional calculation (2021) based on available data in DHS/MICS 2012–2019; Step surveys & Nationally reported data

- **Low birth weight (LBW):** Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age
- **Wasting in under-5 children:** Children whose Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished
- **Stunting in under-5 children:** Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished
- **Underweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI <−2 SD of the median according to the WHO growth reference for school-age children and adolescents
- **Overweight in adolescents:** Percentage of adolescents aged 10–19 years with BMI > 1 SD of the median according to the WHO growth reference for school-age children and adolescents
- **Haemoglobin levels are shown in grams per decilitre (g/dl)** (For non-pregnant women <12.0 g/dl and for pregnant women <11.0 g/dl)
- **Children have play things at home:** Percentage of children under age 5 who play with two or more types of playthings
- **Children with inadequate supervision:** Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week
- **Physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents:** Percentage of students aged 13–17 years had physical activity (>1 hour/day) or prevalence of insufficient physical activity among adolescents
- **Current tobacco use (any form):** Percentage of students aged 13–17 years who currently used any tobacco products (used any tobacco products on at least 1 day during the last 30 days before the survey)
- **Attempted suicide:** Percentage of students aged 13–17 years who seriously considered attempting suicide during the 12 months before the survey
- **Percentage of students who were in a physical fight one or more times during the 12 months before the survey:** Percentage of students aged 13–17 years who were in a physical fight one or more times during the 12 months before the survey