

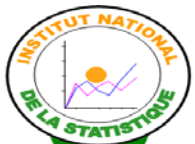


How has Niger reduced deaths among children by 40% in a decade?

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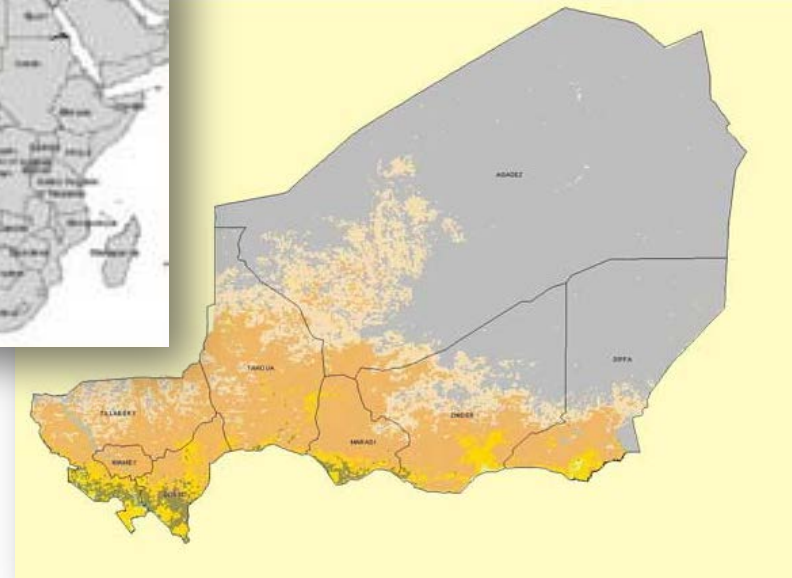
INS - NIGER



**BACKGROUND:
CONDITIONS, POLICIES AND PROGRAMS**



Niger: A land of challenges



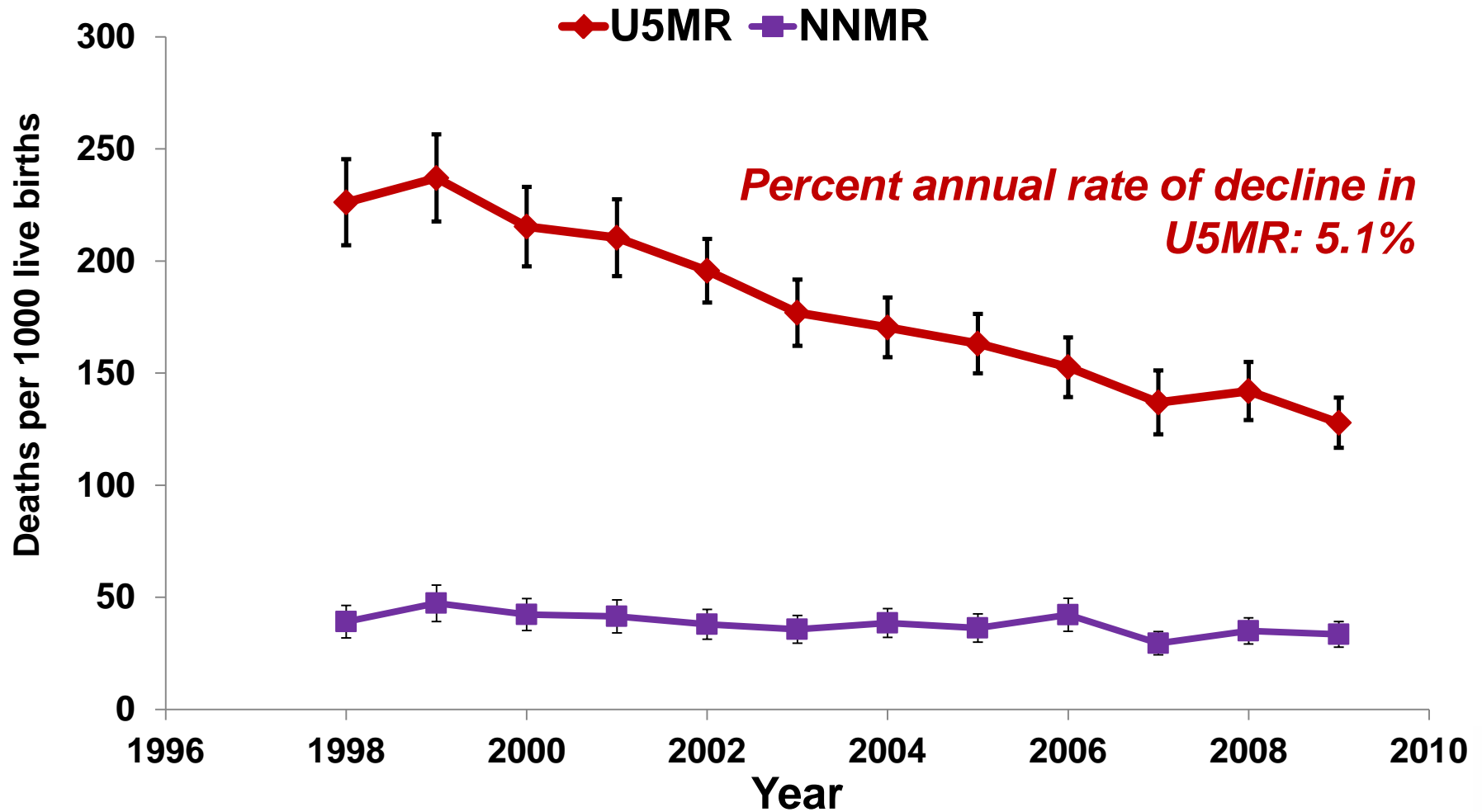
- Landlocked; 80% Sahara desert
- Population 15.7 million
- World's highest fertility rate (7.1 per woman)
- Poor:
 - GDP per capita: US\$278
 - 59.5% of population below poverty line
 - In 2011, ranked 186 of 187 countries on the Human Development Index

Three major child survival strategies since 2000

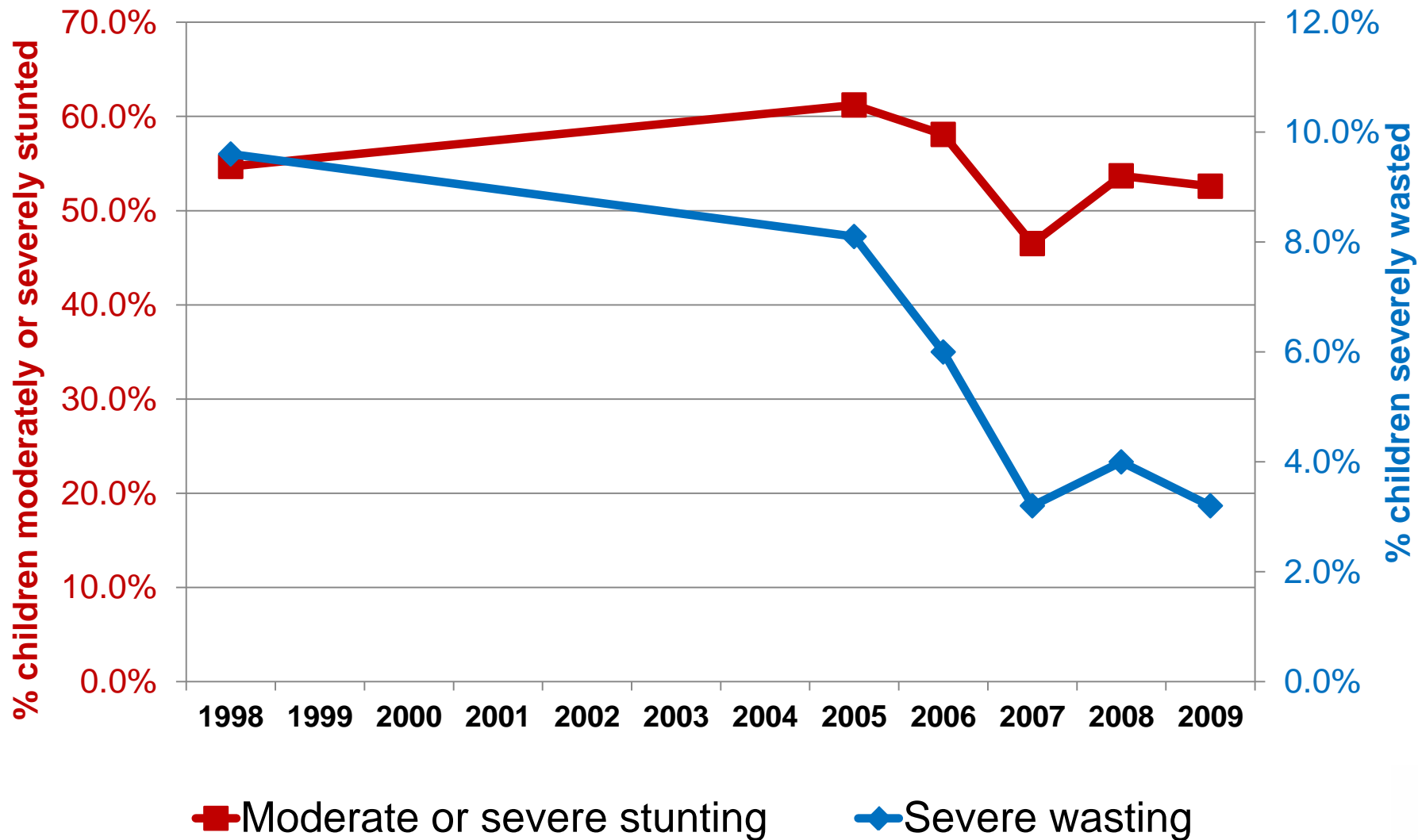
- 1. *Increased access to primary health care***
for major child killers (malaria, pneumonia, diarrhea, measles)
- 2. *Mass campaigns for rapid scale-up***
of insecticide-treated nets (ITNs), measles vaccination, and vitamin A supplementation
- 3. *Intensified efforts to address child undernutrition***

NIGER CASE STUDY: METHOD AND RESULTS

Under-five mortality declined; no significant change in neonatal mortality



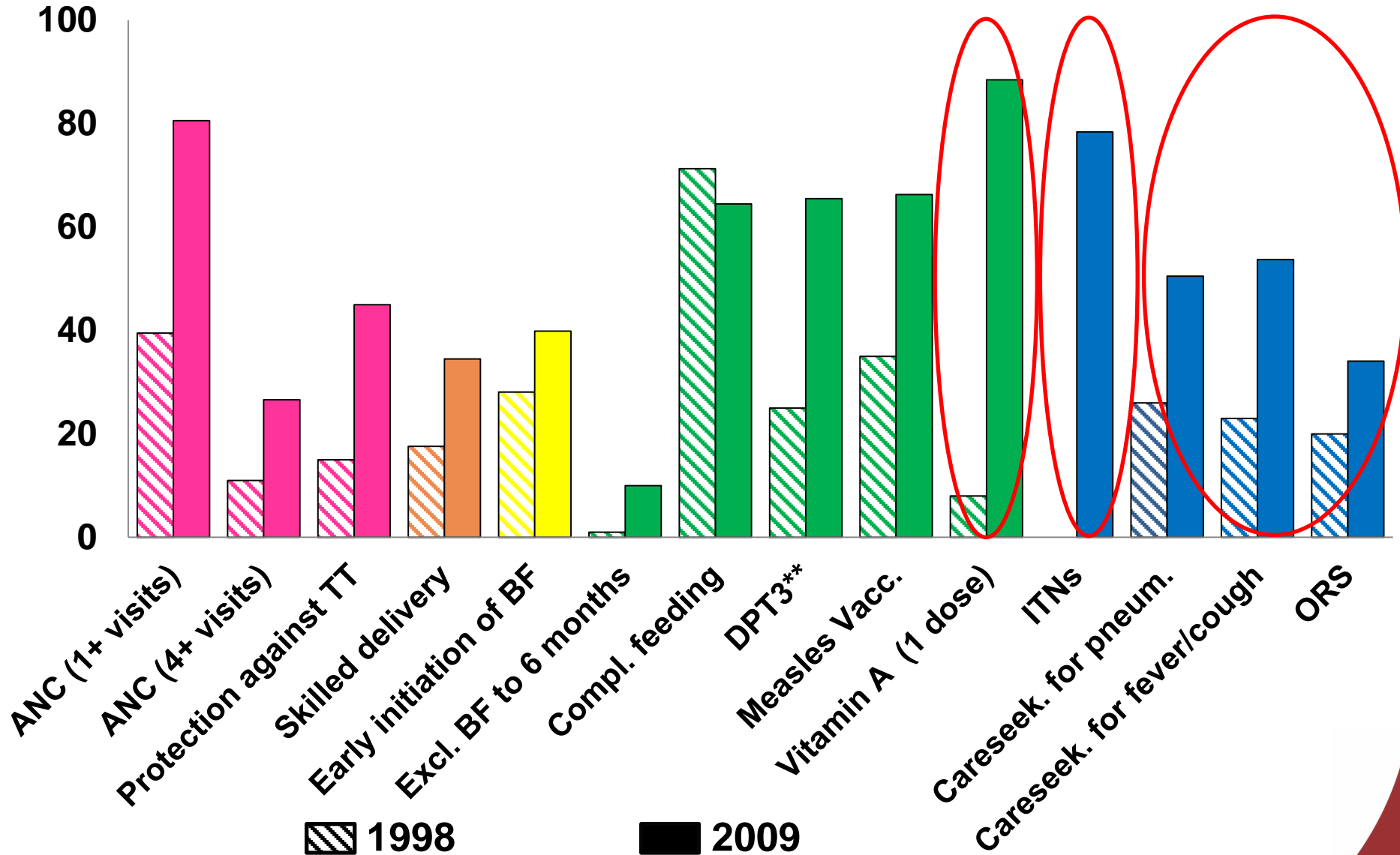
Wasting is down sharply; only small decline in stunting



New policies were effectively implemented

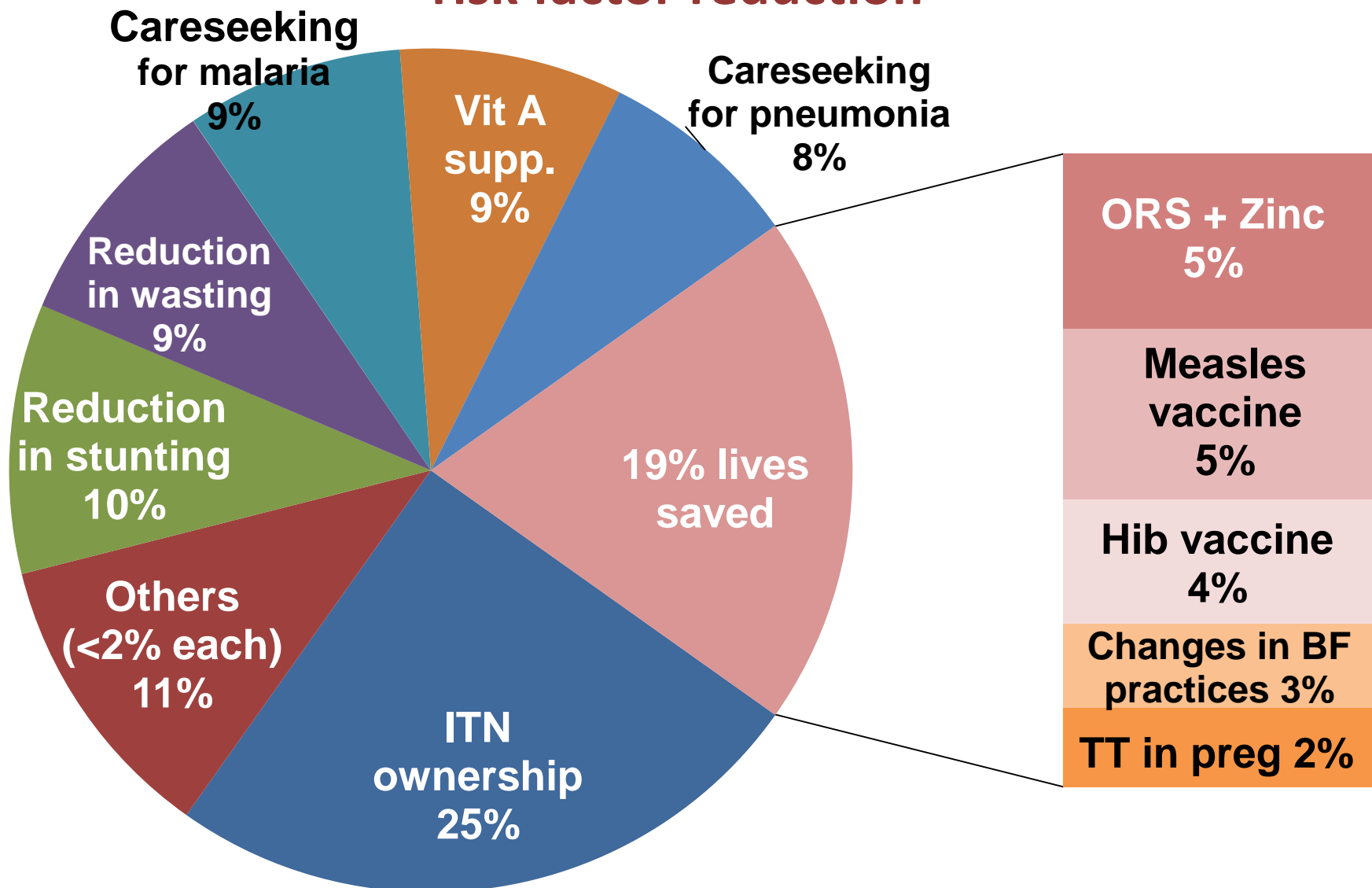
Health service indicator	1998	2009
Number of functioning health posts	0	1938
% population living within 5km of health post or health center	48%	80%
CHWs trained in management of childhood illness	0	2308
% of children with fever/cough for whom care was sought outside the home	23%	54%

Dramatic increases in coverage across the continuum of care, 1998 to 2009



Almost 60,000 children's lives saved in 2009!

Proportion of child lives saved in 2009, by intervention or risk factor reduction



IMPLICATIONS FOR NIGER AND THE REGION

Lesson 1: **Access to quality services matters!**

Key factors for success included:

- Abolishing user fees for women and children and moving services closer to the communities where children live
- Mass campaigns to reach many children quickly with priority interventions
- Recognition of nutrition's key role in survival, and full integration into programming

Lesson 2: **Stay the course!**

- Translating supportive policies into effective programs that reduce mortality takes time
- Programs must evolve to incorporate new delivery strategies and interventions
- These efforts must continue and intensify – to save more newborns, to further increase coverage, and to reduce child mortality still further!

Lesson 3: **Good data**

**+ in-country analysis
= effective programs**

- Regular, high-quality survey data on intervention coverage is essential
- Building local capacity to analyze and use data enables evidence-based actions
- Program monitoring is time- and resource-intensive, but is a key part of program management

Thank you from the Niger Countdown Case Study Team

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