

Countdown to 2030 for reproductive, maternal, newborn, child, and adolescent health and nutrition



Countdown to 2015 for Maternal, Newborn and Child Survival began monitoring and analysing country progress towards achieving Millennium Development Goals (MDGs) 4 (reduce child mortality) and 5 (improve maternal health) to support a call to action stemming from *The Lancet's* Child Survival Series published in 2003.¹ Over the course of 12 years, Countdown gathered and synthesised data on intervention coverage and its key determinants, and regularly disseminated country profiles, synthesis reports, scientific articles, and in-depth country analyses (Afghanistan, Bangladesh, China, Ethiopia, Kenya, Malawi, Niger, Pakistan, Peru, and Tanzania). Countdown occupied a specific niche during the MDG era—it provided rigorous, independent analyses and monitored coverage of key cost-effective interventions for preventing maternal and child deaths, with a focus on equity and health system factors. Through its global and country-level tracking efforts and its policy-oriented communications, Countdown provided a broad-based and objective assessment of progress towards MDGs 4 and 5, and pioneered accountability for women's and children's health.

Countdown to 2015 concluded its tasks after the launch of its seventh global report at the Maternal Newborn Health conference in Mexico City, October, 2015.² It is now relaunched as Countdown to 2030 (CD2030), retaining and enhancing the successful multi-institutional network with over a decade of health programme monitoring experience. CD2030 aims to: (1) accelerate the momentum to achieve the targets of the Sustainable Development Goals (SDGs) for ending preventable maternal, newborn, and child deaths; and (2) catalyse efforts to achieve the vision of the Global Strategy for Women's, Children's and Adolescents' Health.³

The successful elements of Countdown to 2015 will be retained moving forward, including the inclusive and participatory model of governance and technical work. It will promote accountability and action through better monitoring and measurement of coverage and its key determinants, by strengthening regional and country capacity for evidence generation and use, and by developing communication strategies to increase the uptake of Countdown findings (panel). CD2030

will address today's broader agenda by expanding its indicators and analyses on the reproductive health, adolescent health, and nutrition dimensions of the continuum of care, including preconception care, and will pay more attention to subnational analyses, use of health facility data, and quality of care. Learning from its portfolio of 10 indepth case studies and from preparing annual country profiles for high-burden countries, CD2030 is introducing a regional hub-and-spoke model to devolve the effort to country level where action is most critical. The first regional hub will be based at the Federal University of Pelotas, Brazil, and will work with Latin American and Caribbean and Lusophone African countries on developing their capacity to undertake multicountry and indepth case study research, and to use the findings of that research to shape national plans and policies. A second hub is planned for south central Asia, based at Aga Khan University, Karachi, Pakistan, and other hubs will be rolled out over time with a focus on Africa.

The global landscape and associated priorities in monitoring, measurement, research, and learning have vastly changed over the past decade as mortality levels have sharply declined and become more concentrated in certain geographies.^{4,5} The SDGs include a greater emphasis on universal health coverage, social and environmental determinants, and in-country

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For all seven Countdown global reports and scientific publications see <http://www.countdown2015mnch.org>

Panel: Countdown to 2030: a multi-stakeholder initiative

Countdown to 2030 will focus on:

- Coverage and equity of cost-effective interventions against the main causes of maternal and child deaths
- The RMNCAH continuum of care, including a focus on nutrition
- Monitoring and accountability at country and global levels
- Cutting-edge research on measurement of coverage, equity, and key determinants
- Capacity strengthening at regional and country level
- High-burden countries with special attention to Sub-Saharan Africa and South Asia
- Providing UN agencies, the Independent Accountability Panel, and other accountability efforts with specific analyses and technical inputs

RMNCAH=reproductive, maternal, newborn, child, and adolescent health.

inequalities to ensure no one gets left behind.⁶ The accountability architecture for women's, children's, and adolescents' health is still evolving to incorporate these more complex and expansive priorities while not forgetting the unfinished agenda of maternal, newborn, and child survival.⁷ CD2030, with its flexible structure, is positioned to be a strong contributor to this architecture by providing technical inputs on coverage, equity, and determinants of health to the annual reports for the Global Strategy³ and the Independent Accountability Panel, the successor to the independent Expert Review Group on Information and Accountability for Women's and Children's Health.

CD2030 will continue to prepare its own synthesis reports and country profiles. It will also aim to support regional initiatives such as the scorecards developed by the African Leaders Malaria Alliance, and to support the development of country health information systems through its participation in selected working groups of the Health Data Collaborative (analytical capacity and use, and quality of care measurement). Most importantly, through its global network and establishment of regional hubs, and in alignment with the aims of the Global Financing Facility for Reproductive, Maternal, Newborn, Child and Adolescent Health, CD2030 will help ensure regular reporting on progress and performance at the country level and help foster the ability and appetite of country-based teams to conduct robust assessments of progress and investments. An important aim by the end of the SDGs would be to devolve monitoring, evaluation, and accountability maximally to countries and regional stakeholders.

The need for a Countdown-like mechanism that provides independent analyses grounded in a collaborative partnership among academic institutions, UN agencies, governments, and other civil society members has never been greater. We stand ready for the work ahead.

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We declare no competing interests.

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For the African Leaders
Malaria Alliance see
<http://www.alma2030.org>