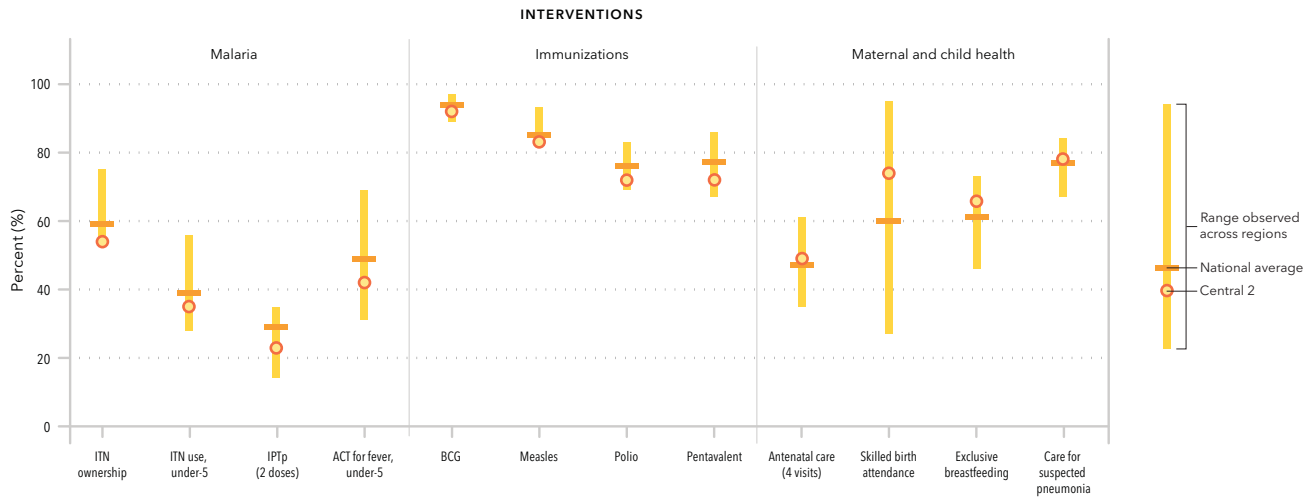




Central 2



Note: Estimates of intervention coverage are for 2011, with better performance reflected by higher levels of coverage.

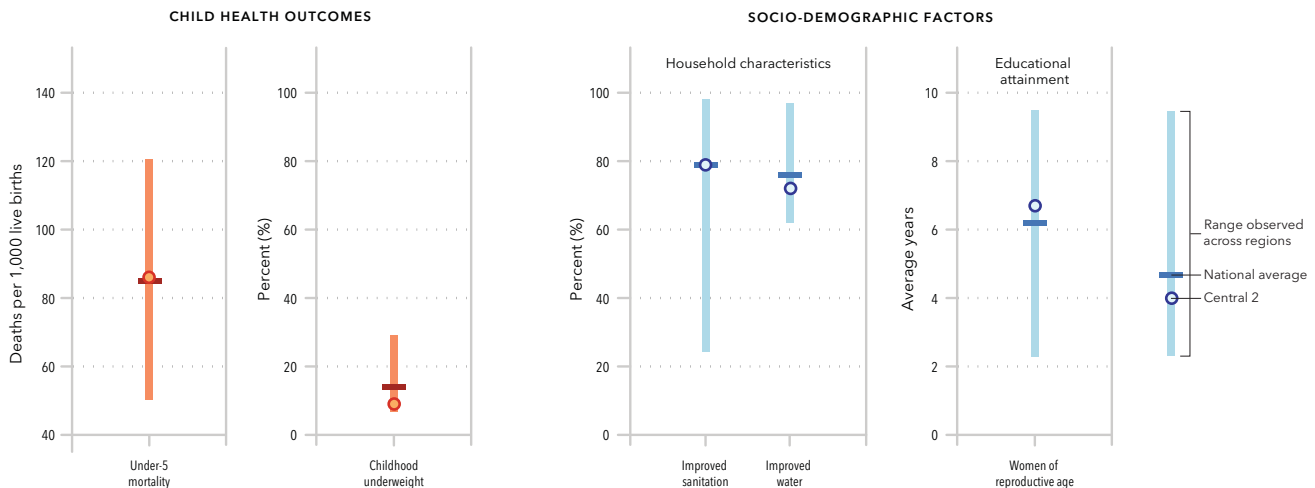
SUMMARY

Between 1990 and 2011, all-cause under-5 mortality and the prevalence of childhood underweight substantially decreased in Central 2. Further, the region consistently recorded much lower levels of underweight than the national trend. Prioritizing efforts to maintain these gains and further accelerate progress in child health outcomes should be considered.

ITNs and the receipt of ACTs were quickly scaled up in Central 2 but trailed slightly behind the national trend. While the region recorded gradual improvement in immunization coverage, Central 2 still had polio and pentavalent immunization rates slightly below the national average. Skilled birth attendance continuously increased over time, whereas the proportion of women who received at least four antenatal care visits (ANC4) declined.

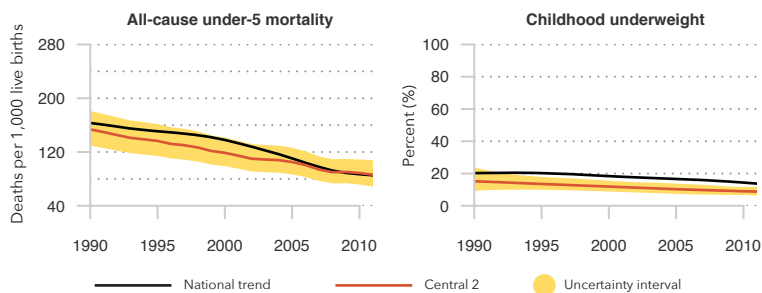
The region documented gradual gains in improving household access to improved sanitation and water sources. In comparison to the national trend, Central 2 consistently averaged slightly higher levels of educational attainment among women of reproductive age.

In 2011, Central 2 generally met or exceeded the national average for maternal and child health interventions, but fell below for malaria interventions and immunization coverage. For socio-demographic factors, the region largely equaled or surpassed the national average in 2011, but had a slightly lower proportion of households with improved water. In comparison with the national average, Central 2 showed similar levels of under-5 mortality and lower levels of childhood underweight.



Note: Estimates of child health outcomes and socio-demographic factors are for 2011. Better performance is shown by lower levels of child health outcomes and higher levels for socio-demographic factors.

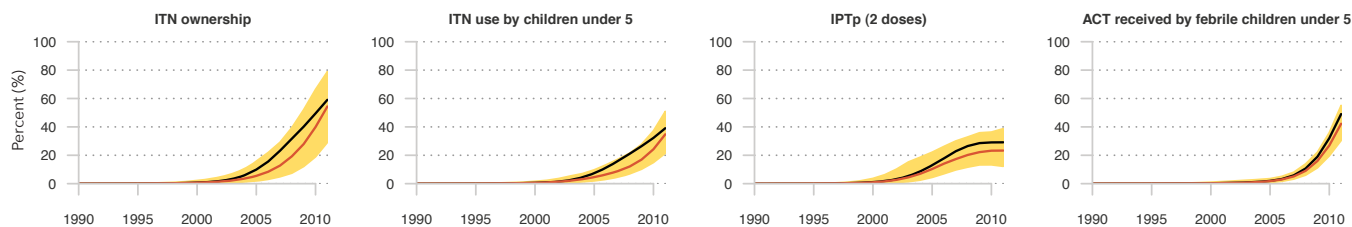
CHILD HEALTH OUTCOMES



From 1990 to 2011, the region of Central 2 recorded a significant reduction in all-cause under-5 mortality, dropping 44% from 154 deaths per 1,000 live births in 1990 (95% CI: 131, 179) to 86 in 2011 (95% CI: 70, 106). In 2011, the region's under-5 mortality was similar to the national average of 85 deaths per 1,000 live births (95% CI: 79, 93).

The proportion of children who were underweight in Central 2 decreased from 15% in 1990 (95% CI: 10%, 23%) to 9% in 2008 (95% CI: 7%, 12%). Prevalence of childhood underweight remained at 9% through 2011, which was well below the national average of 14% (95% CI: 12%, 15%) and among the lowest in Uganda.

MALARIA INTERVENTIONS



ITN ownership remained below 10% until 2007, after which coverage rose to 54% in 2011 (95% CI: 29%, 79%). This level of ITN ownership was lower than the national average of 59% in 2011 (95% CI: 36%, 79%).

The use of ITNs by children under 5 years old increased from 9% in 2007 (95% CI: 5%, 17%) to 35% in 2011 (95% CI: 21%, 51%). This level of ITN use was lower than the national average of 39% (95% CI: 27%, 53%). In this region, the difference between ITN ownership and ITN use by children under 5 (19 percentage points) was comparable to what was observed at the national level (20 percentage points).

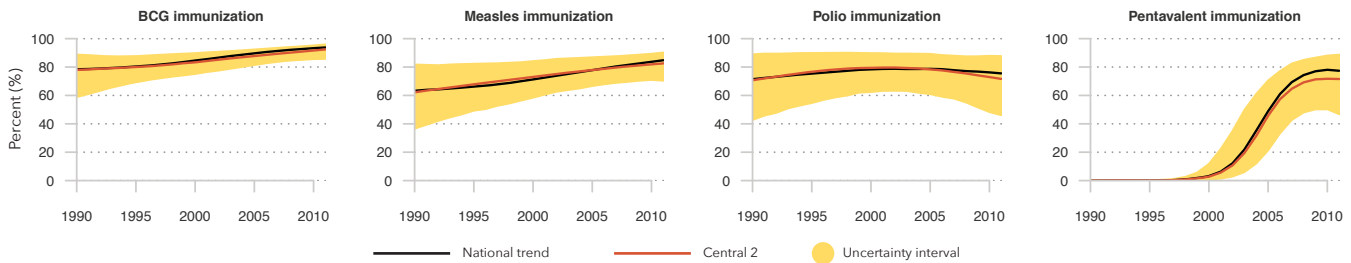
No districts in the region of Central 2 had formally implemented IRS as of 2011.

ACTs formally became Uganda's first-line treatment for uncomplicated malaria in 2006, and the proportion of children in Central 2 who received ACTs in response to experiencing a fever rose thereafter. Receipt of ACTs among febrile children under 5 increased from 9% in 2008 (95% CI: 6%, 14%) to 42% in 2011 (95% CI: 30, 55%), which was lower than the national average of 49% (95% CI: 34%, 65%).

The proportion of pregnant women who received IPTp2 remained below 10% until 2005, after which coverage slightly increased to 23% in 2010 (95% CI: 13%, 36%). IPTp2 coverage stayed at 23% through 2011, which was lower than the national average of 29% (95% CI: 15%, 50%).

CENTRAL 2, continued

IMMUNIZATIONS



The proportion of children who received the BCG vaccine steadily increased from 78% in the early 1990s to 92% in 2010 (95% CI: 86%, 95%). This level of BCG immunization was sustained through 2011, which was comparable to the national average of 94% (95% CI: 89%, 97%).

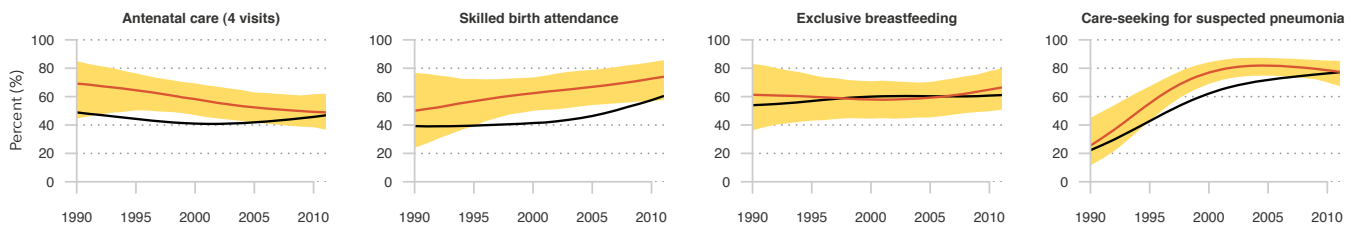
Measles immunization rose from 62% in 1990 (95% CI: 37%, 82%) to 83% in 2011 (95% CI: 70%, 90%), which was similar to the national average of 85% (95% CI: 75%, 91%).

Coverage of polio immunization remained relatively consistent from 1990 to 2011, generally hovering between 70% and

80% during this time. In 2011, polio immunization coverage was 72% in Central 2 (95% CI: 46%, 88%), which was slightly lower than the national average of 76% (95% CI: 52%, 90%).

The pentavalent vaccine was formally introduced in Uganda in 2002, after which coverage in Central 2 increased from 32% in 2004 (95% CI: 12%, 61%) to 72% in 2010 (95% CI: 50%, 88%). This level of pentavalent coverage was sustained through 2011, and was slightly lower than the national average of 77% (95% CI: 51%, 92%).

MATERNAL AND CHILD HEALTH INTERVENTIONS



ANC4 coverage gradually declined from 69% in 1990 (95% CI: 45%, 84%) to 49% in 2010 (95% CI: 39%, 61%), and remained at 49% through 2011. This level of ANC4 was comparable to the national average of 47% (95% CI: 41%, 54%), but the region's downward trend in coverage is cause for concern.

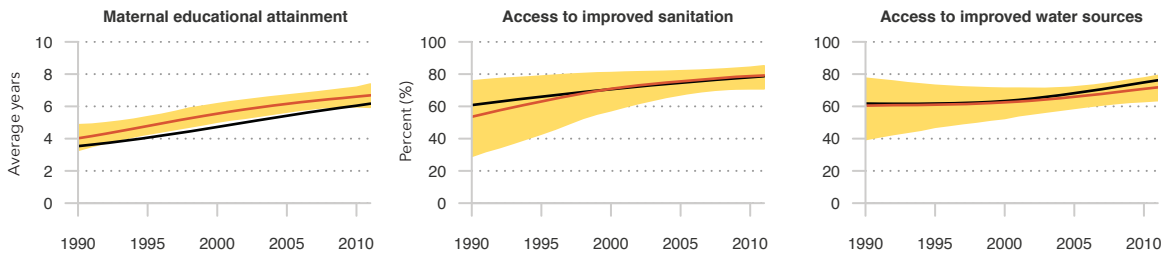
Skilled birth attendance steadily rose from 50% in 1990 (95% CI: 25%, 76%) to 74% in 2011 (95% CI: 58%, 85%), far exceeding the national average of 60% (95% CI: 47%, 73%).

The proportion of children who were exclusively breastfed hovered around 60% until 2006, after which coverage gradu-

ally increased to 66% in 2011 (95% CI: 51%, 79%). This level of exclusive breastfeeding was slightly higher than the national average of 61% (95% CI: 54%, 67%).

Serving as proxy for health system access, the proportion of children under 5 who sought care for suspected pneumonia rapidly increased from 25% in 1990 (95% CI: 12%, 44%) to 82% in 2004 (95% CI: 75%, 87%). Coverage of this health-care-seeking behavior was sustained through 2006 before dipping to 78% in 2011 (95% CI: 68%, 85%), a level similar to the national average of 77% (95% CI: 76%, 78%).

SOCIO-DEMOGRAPHIC FACTORS



Among women of reproductive age (15 to 44 years old) in Central 2, the average years of education attained increased 67% between 1990 and 2011, rising from four years in 1990 (95% CI: 3.3, 4.8) to 6.7 years in 2011 (95% CI: 6, 7.4). This level of educational attainment was slightly higher than the national average in 2011, which was 6.2 years (95% CI: 5.9, 6.4).

Household access to improved sanitation (a flush toilet or covered pit latrine) increased from 54% of households with improved sanitation in 1990 (95% CI: 29%, 76%) to 79% in

2010 (95% CI: 71%, 84%). This level of improved sanitation was sustained through 2011, equaling the national average for that year.

Central 2 recorded gradual progress in household access to improved water sources (e.g., piped water, protected wells, protected spring), rising from 60% in 1990 (95% CI: 40%, 77%) to 72% in 2011 (95% CI: 64%, 79%). This level of access to improved water was slightly lower than the national average of 76% in 2011 (95% CI: 73%, 79%).