Considerations when applying LIST
(Adapted from Every Newborn Action Plan Country Planning and Costing Toolkit and User Guide)

The Lives Saved Tool (LiST) is widely accepted by the global health community as an excellent tool for estimating the potential health impacts associated with scaling up health interventions on maternal, newborn and child health, and stillbirths. It can therefore support countries to set appropriate targets in child survival action plans. The tool works as a model to identify high-impact interventions by estimating the mortality reductions and nutritional status improvement that can be achieved based on different coverage targets. It estimates the number of maternal, newborn and child deaths averted under various scenarios, offering planners and decision-makers an evidence-based approach to set targets.

LiST is based on:
- Demographic data: from demographic projections and estimates (World Population Prospects)
- Causes of death: from WHO or IGME estimates
- Coverage levels for key health interventions across the continuum of care
- Health status indicators for national or subnational settings
- Effectiveness estimates for interventions from the latest scientific reviews and literature

Based on this information, the model estimates the impact of increased coverage of interventions on neonatal, child and maternal mortality. Mortality reductions or "lives saved" are attributed proportionally to specific interventions as they are scaled up, depending on baseline coverage, endline coverage, and intervention effectiveness, including interaction of all potentially included interventions.

LiST can be a useful tool for strategic planning and prioritization of activities, allowing users to identify where best to invest resources by seeing which interventions have the greatest impact on a specific type of mortality. LiST can similarly be used as an advocacy tool, allowing users to have valid and evidence-based sources of information for focusing on a specific area or intervention package. Feasibility and cost-effectiveness of specific interventions can also be assessed using LiST.

Key links:

- The Lives Saved Tool (LiST) is available at: https://www.avenirhealth.org/software-spectrum.php (downloadable version) or https://list.spectrumweb.org/ (online version)
- Training resources and other relevant downloads are available at: https://www.livessavedtool.org/resources
- Technical notes: https://www.livessavedtool.org/technical-notes

Country Examples:

- Ghana: [Contribution of child health interventions to under-five mortality decline in Ghana: A modelling study using lives saved and missed opportunity tools](#)

Recommendations for applying the LiST tool:

- LiST can be applied in conjunction with complementary tools such as OneHealth and EQUIST, to which it is linked. This allows countries to gain a broad vision for proposed targets and intervention scenarios, with associated breakdown of costs. However, sometimes LiST is best used on its own as OneHealth and EQUIST require significantly more effort to implement.
- The tool also includes interventions not typically implemented by child health programs, for example related to water, sanitation and hygiene (WASH) or to the different health systems building blocks. LiST can recommend prioritizing broader health systems interventions, which may be indispensable for actions on child health improvement to succeed.
- Increments in lives saved shown by the tool will depend on factors such as which interventions are selected, and targeted locations. For effective use of the tool, teams should consider the interventions and areas where the most impact can be achieved.
- LiST also has a "Subnational Wizard" that allows quick creation of projections for subnational areas.
- To support teams in applying LiST, LiST has an online help desk. Questions sent to the help desk are typically turned around in 1-2 business days.
- Some countries have sought external support to apply LiST, for example from international consultants or agencies. This support is typically offered via a workshop where training and implementation are completed concurrently. This might be helpful, however it is recommended in parallel to also strengthen skills in countries, for example by pairing an international expert with a country representative. This approach has multiple benefits. First, it can ensure that outcomes of LiST are better understood, given that the process of arriving at results has been followed from the start. This background knowledge may be essential when proposed options are presented to decision-makers. Second, it can help to build internal country capacity for future applications of the tool.

It varies depending on the approach taken, but in terms of timelines for applying LiST, countries can expect to invest **1-6 weeks.**

- 1 week to conduct LiST analysis
- 1 week (approximately) for policy discussions. This includes a stakeholder meeting dedicated to prioritizing bottlenecks and strategies to address them. This should be an iterative process with several rounds of consultations, given that perspectives may change based on available evidence
- 2-3 weeks to refine the intervention strategies, again based on further policy discussions; it may involve a wider stakeholder base and can lead to the initial drafting of an action plan. This will be followed by a longer process to gain further support for the plan, and to put into place the organizational requirements and political support for its endorsement and implementation.