



# Maternal and newborn mortality and morbidities

## The silent Tsunamis

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# Our Goals for Safe Motherhood



Reduction of maternal and newborn mortality and morbidity - the silent tragedies



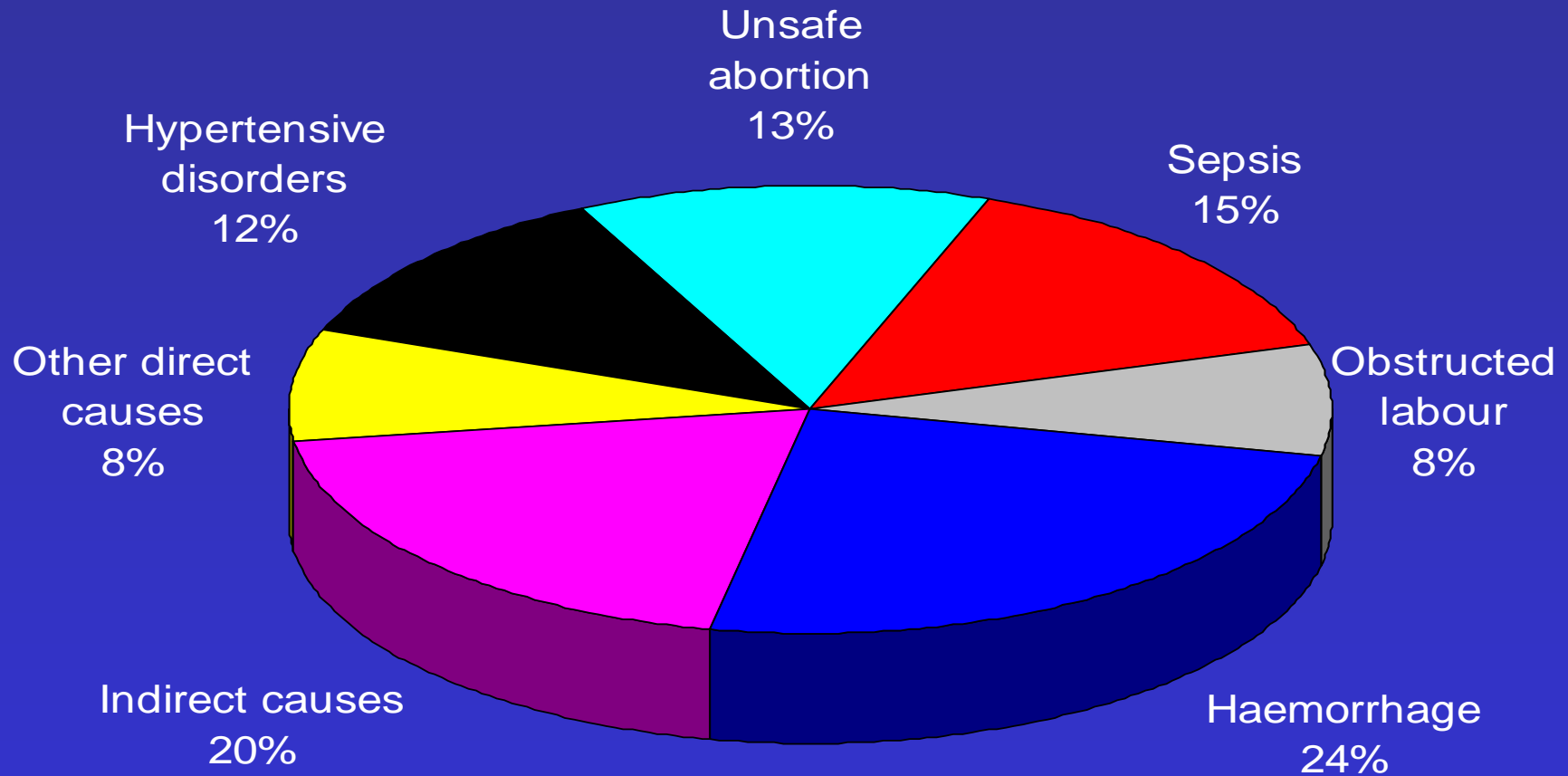
# Pregnancy and Childbirth Global Situation

- 180-200 million pregnancies every year
- 75 million unwanted pregnancies
- 50 million induced abortions
- 20 million unsafe abortions
- 20 million women suffer from maternal morbidity
- 600,000 die from complications
- 3 million newborns die within the first week of life
- 3 million babies are born dead



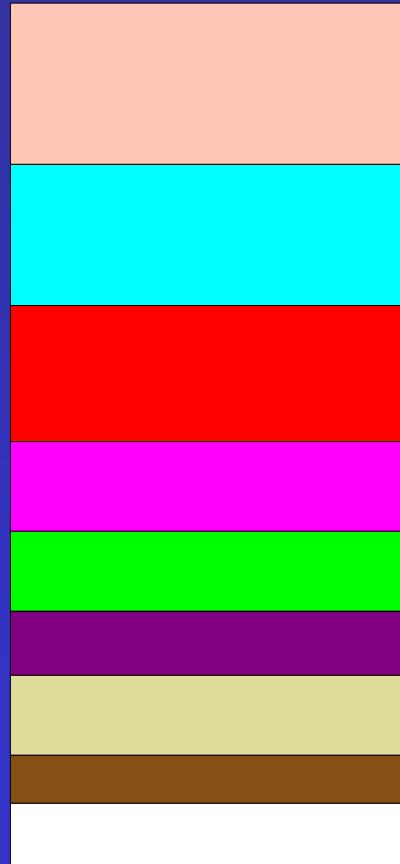


# Causes of maternal mortality





# Causes of neonatal deaths



- Birth asphyxia (21.1%)
- Pneumonia (19%)
- Neonatal Tetanus (14.1%)
- Birth Injuries (10.6%)
- Prematurity (10.3%)
- Sepsis, meningitis (7.2%)
- Congenital anomalies (11.1%)
- Diarrhoea (1.5%)
- All other (5.1%)

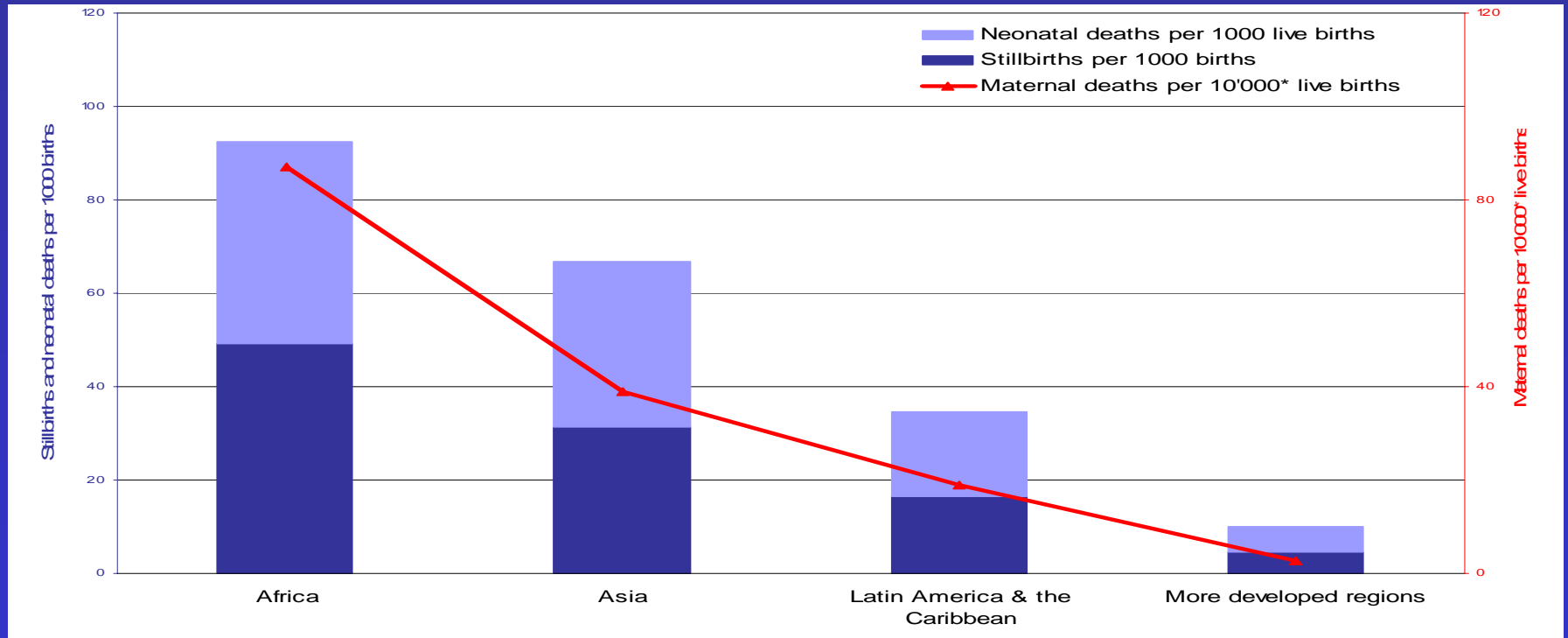
**Most of these deaths are preventable or treatable**



**Let us look at  
evidence**



# The health of the mother and newborn are inseparable

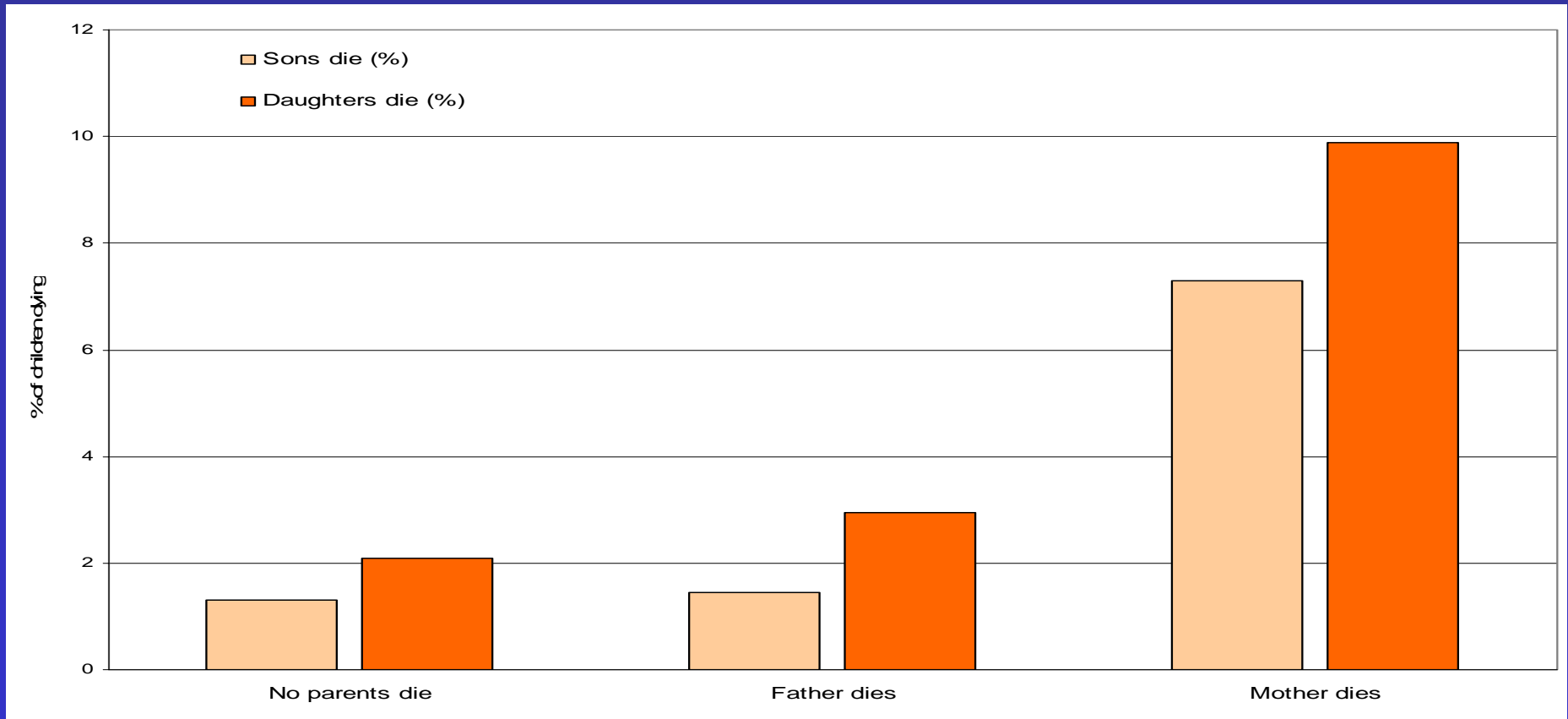


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Source: WHO estimates 2000



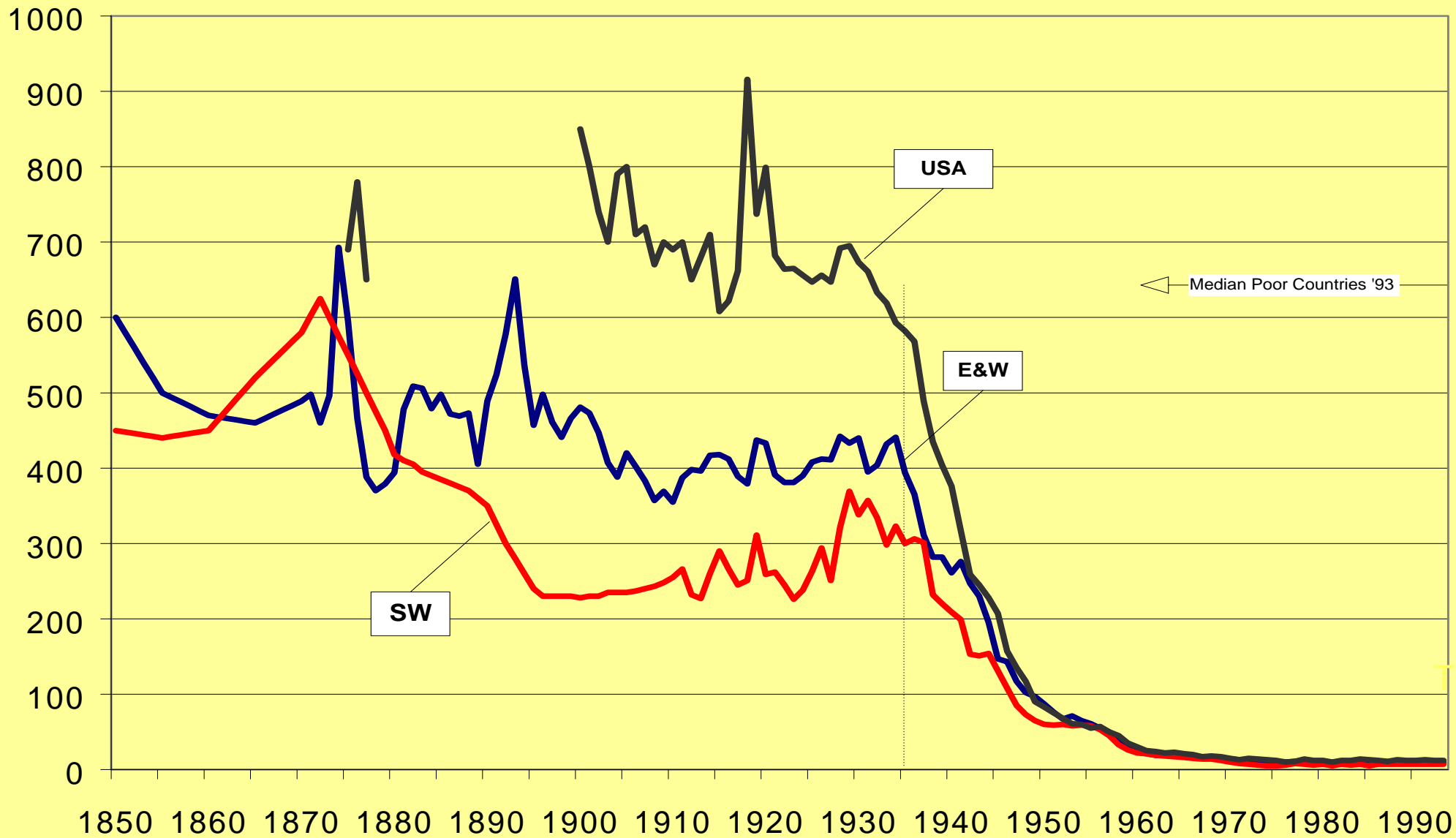
# When a parent dies



Data from Matlab 1983-89

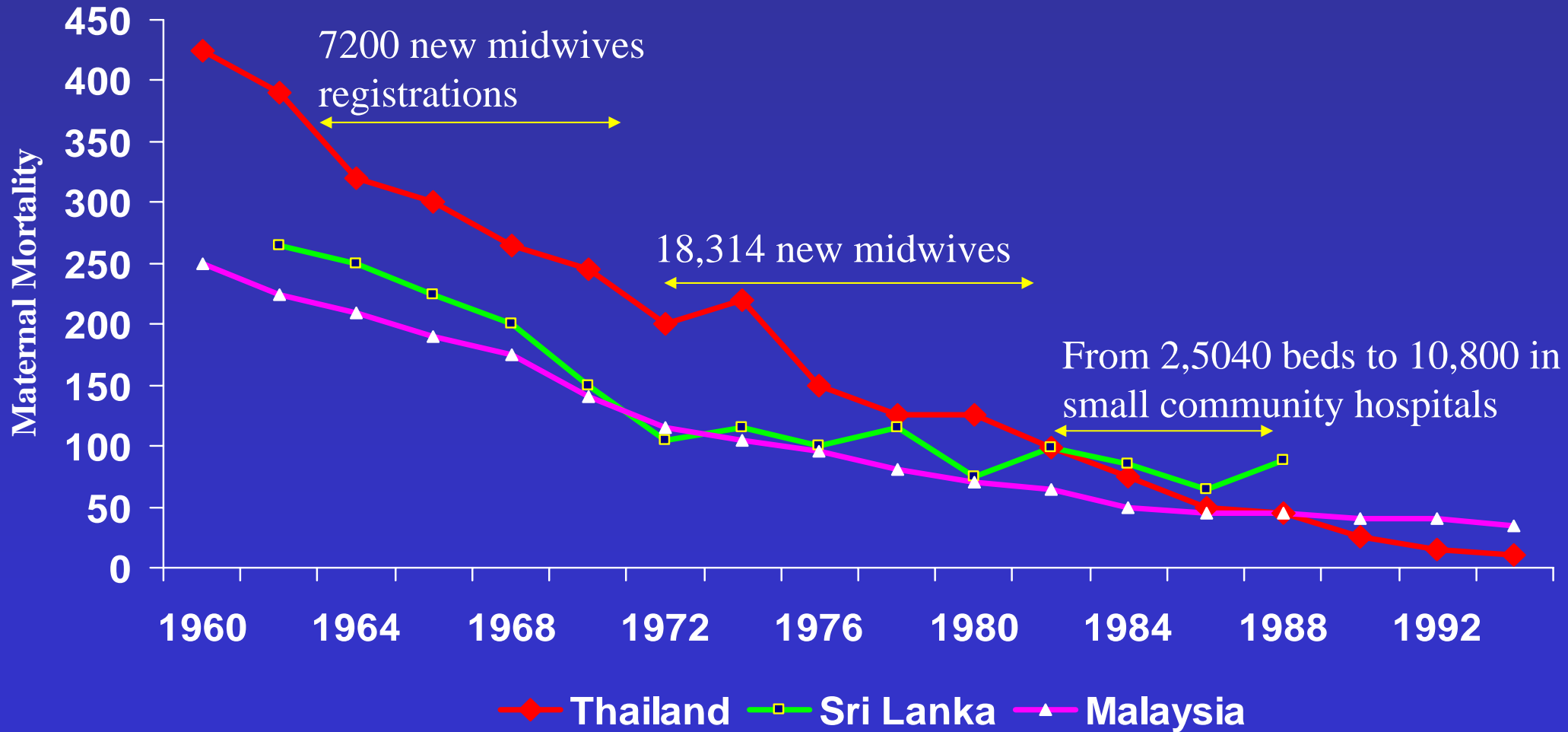
Source: Strong, M. *Health Transition Review* 2(2), 1992







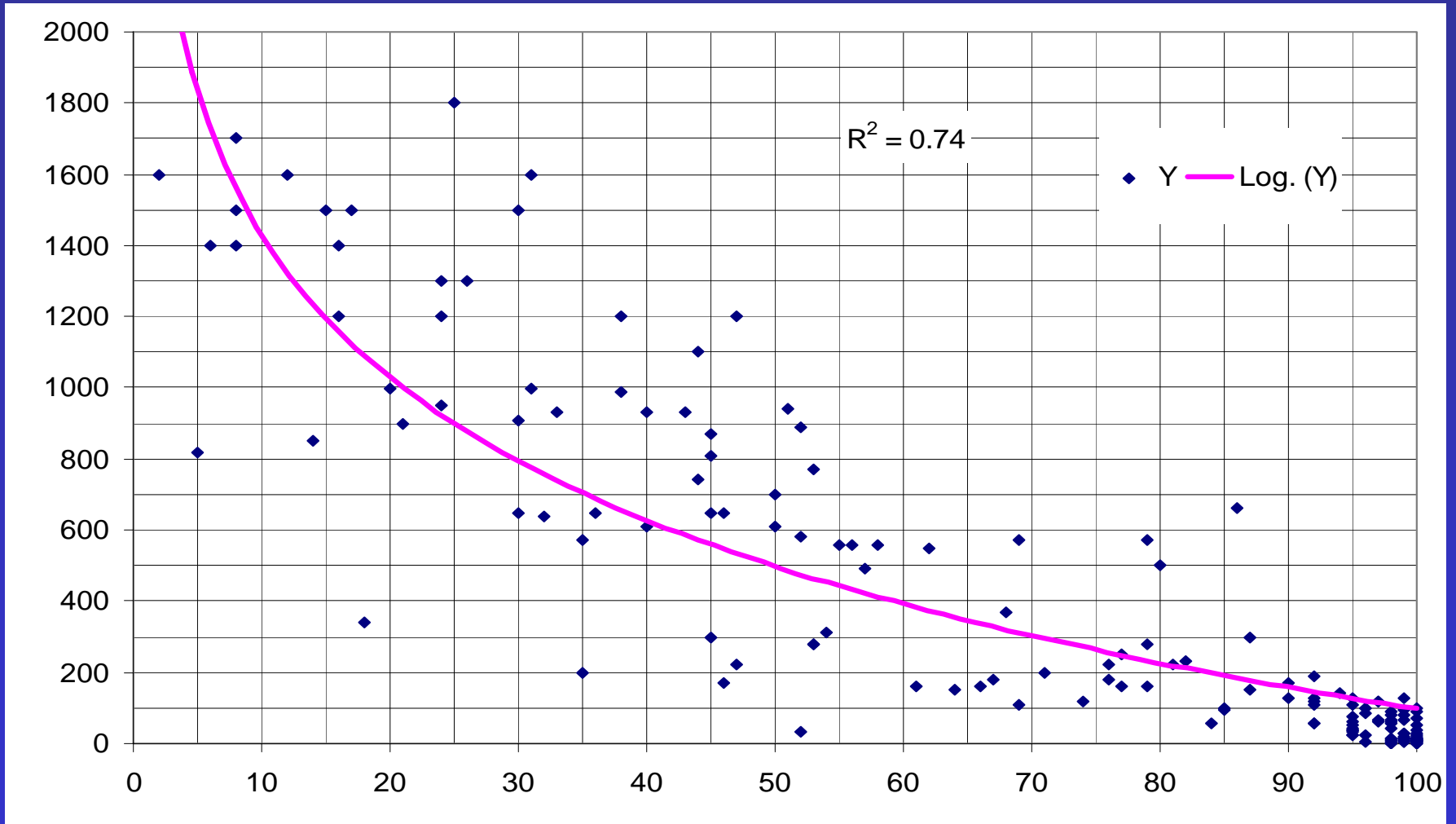
# Maternal Mortality since the 1960s in Malaysia, Sri Lanka and Thailand





# The higher the proportion of deliveries attended by skilled attendant in a country, the lower the country's maternal mortality ratio

Maternal deaths per 1000000 live births

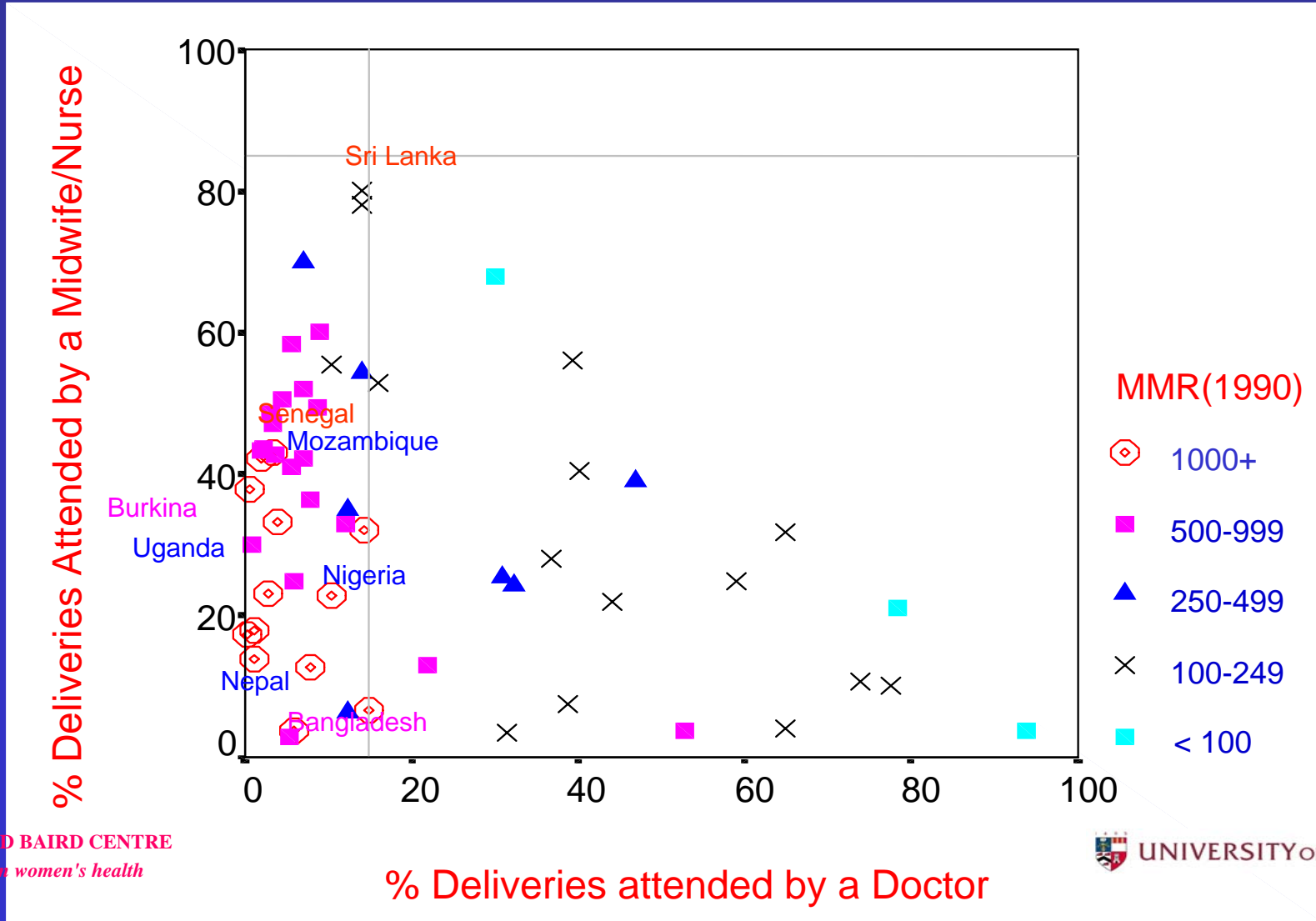


% skilled attendant at delivery

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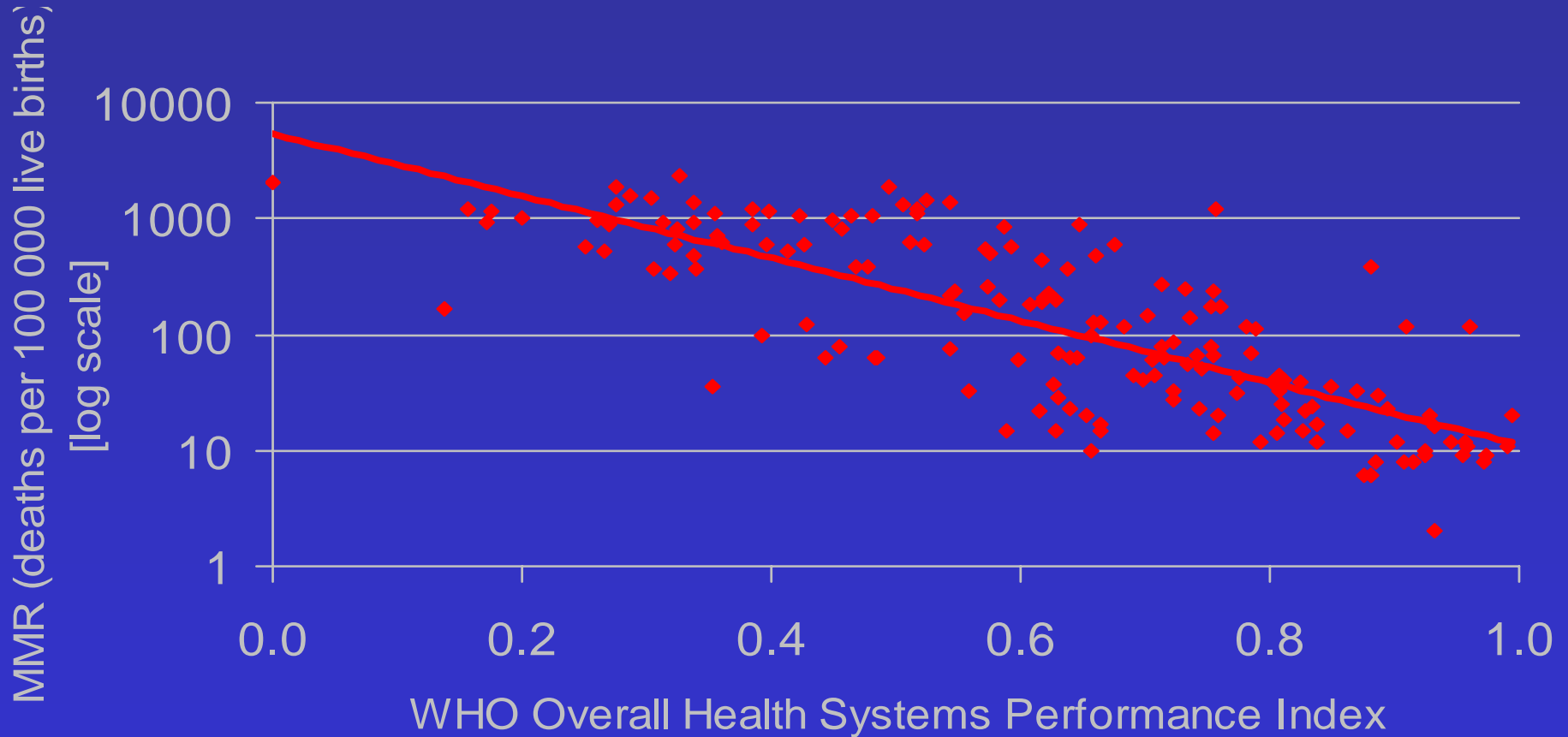


# Partnership Ratio: % Deliveries with Doctor by % Deliveries with Midwife/Nurse



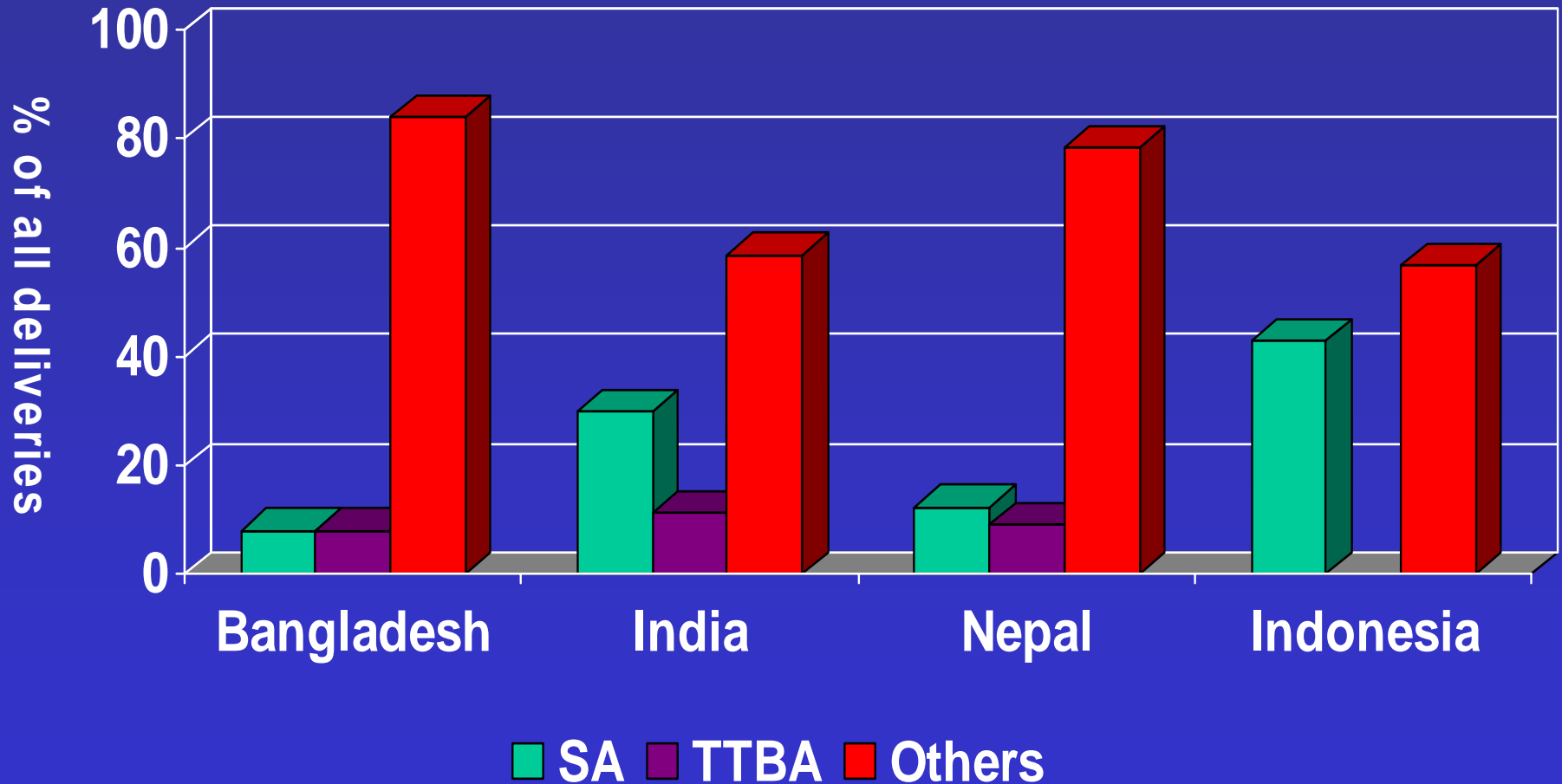


# Maternal Mortality Ratio and Health System Performance



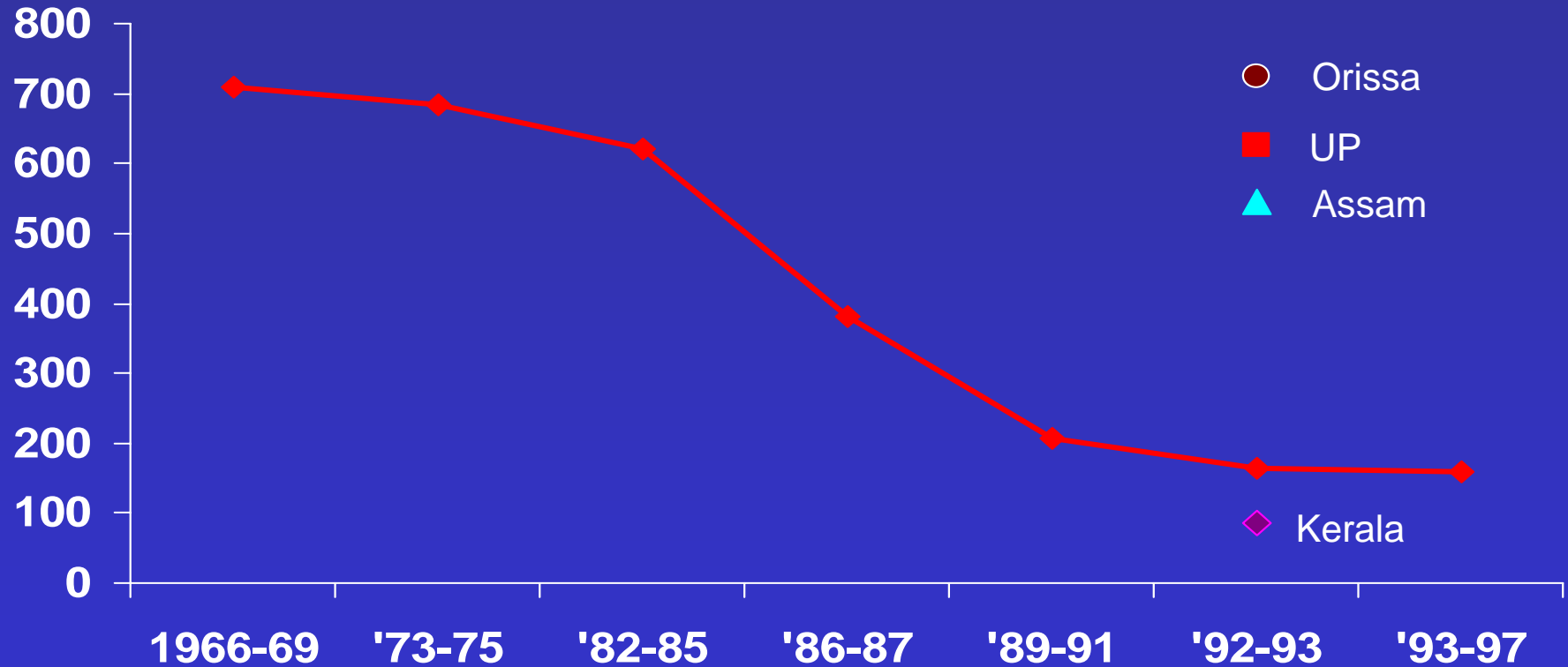


# Deliveries conducted by different providers





# Maternal Mortality Ratio in SAT Hospital, Kerala, 1966-1997

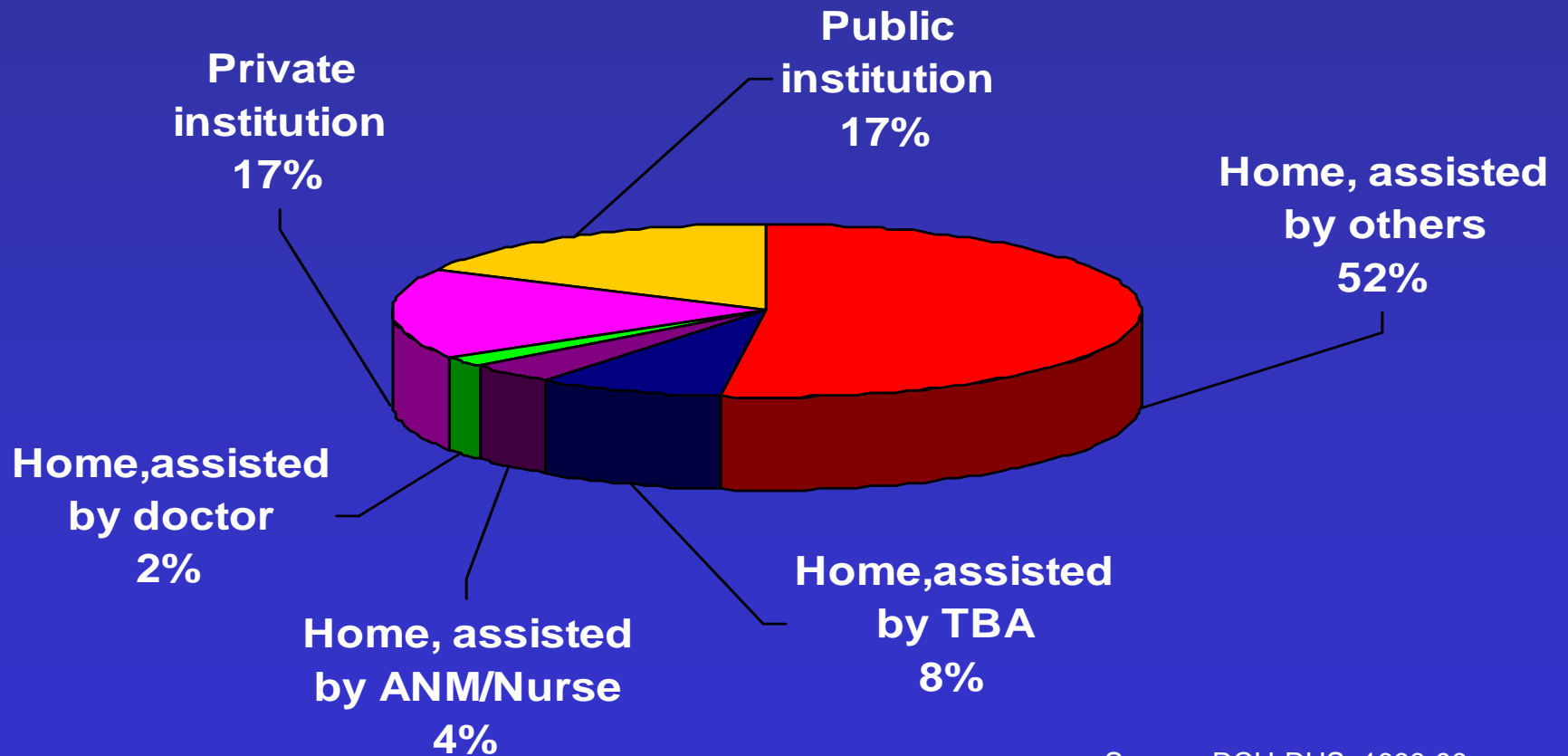


Source: Challenges in Safe Motherhood Initiative in Kerala  
UNFPA

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# Distribution of deliveries by place of delivery and assistance in case of home delivery India, 1998-99

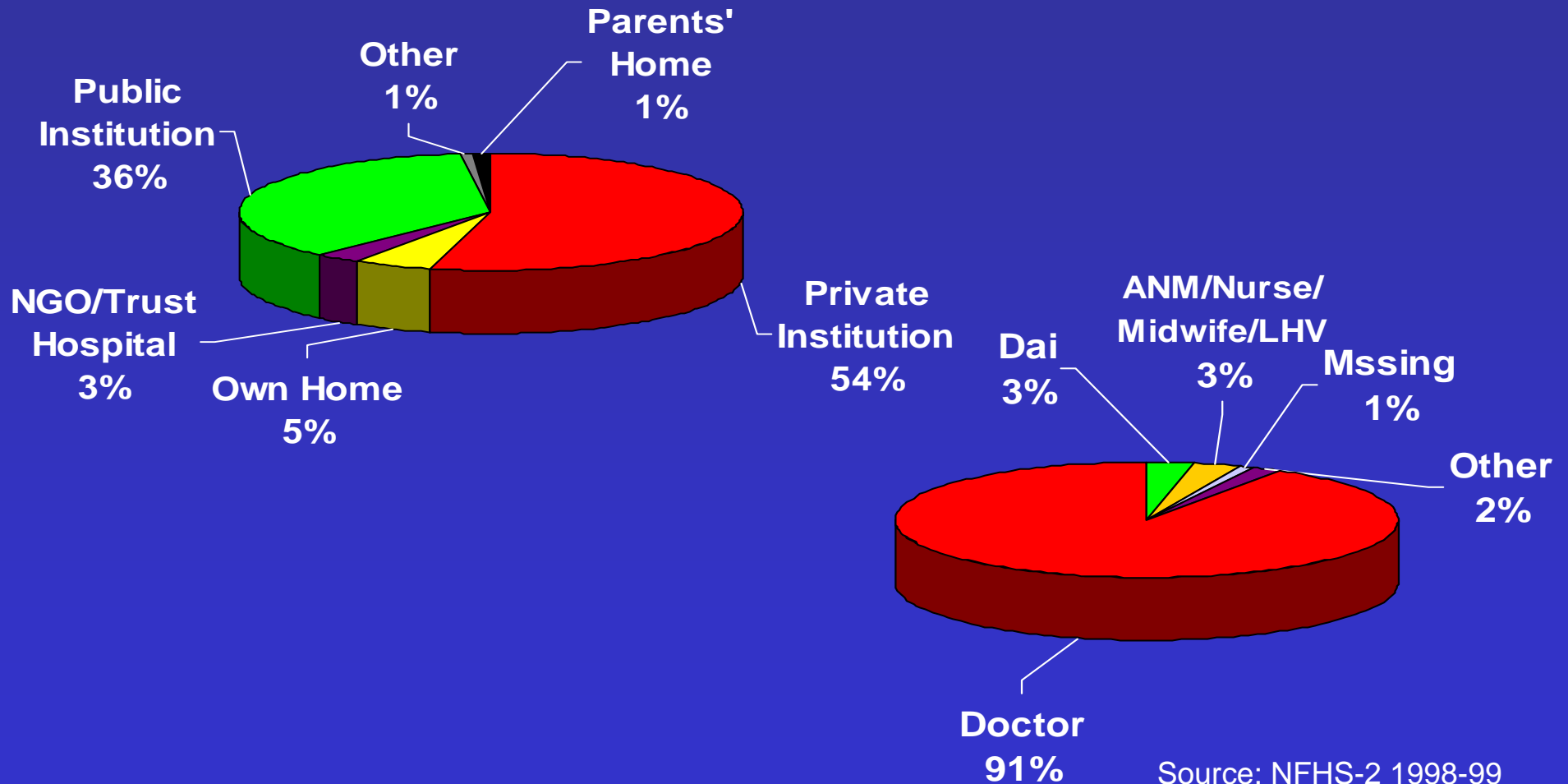


Source: RCH-RHS, 1998-99





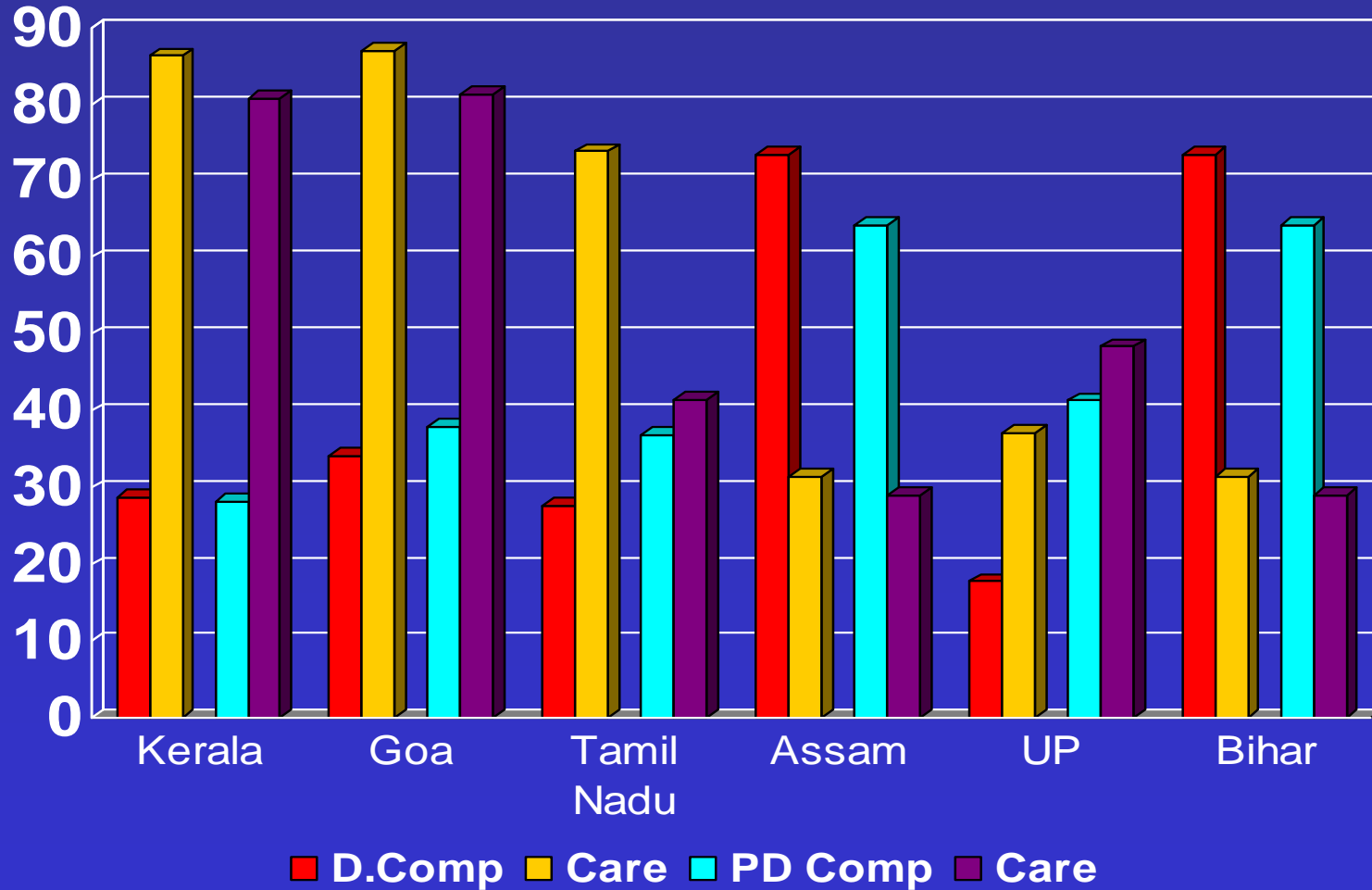
# Place of Delivery and Assistance During Delivery Kerala, 1998-99



Source: NFHS-2 1998-99

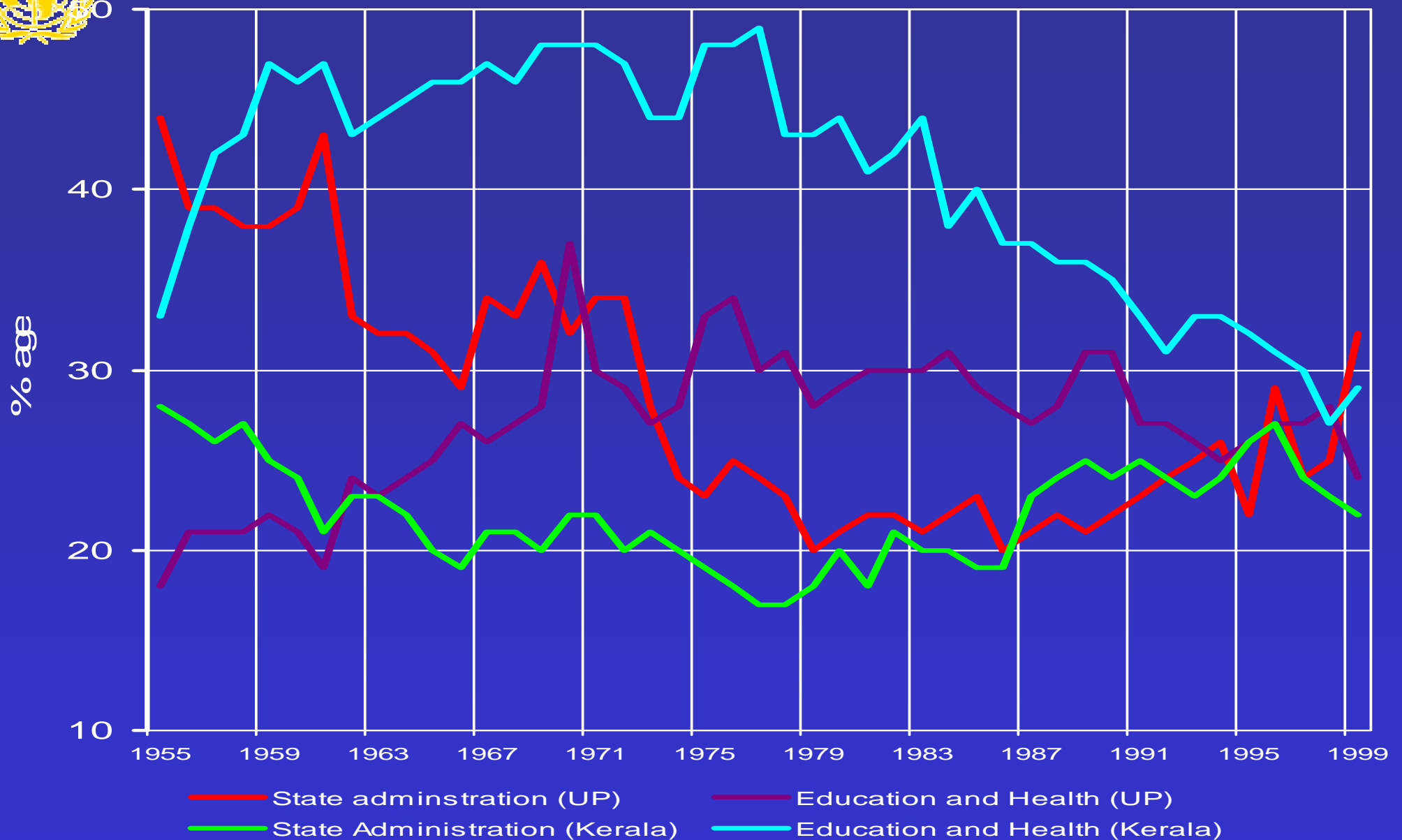


# Delivery and Post Delivery Complications and Health Care Seeking Behaviour India, 19988-99





# % of Total Public Expenditure

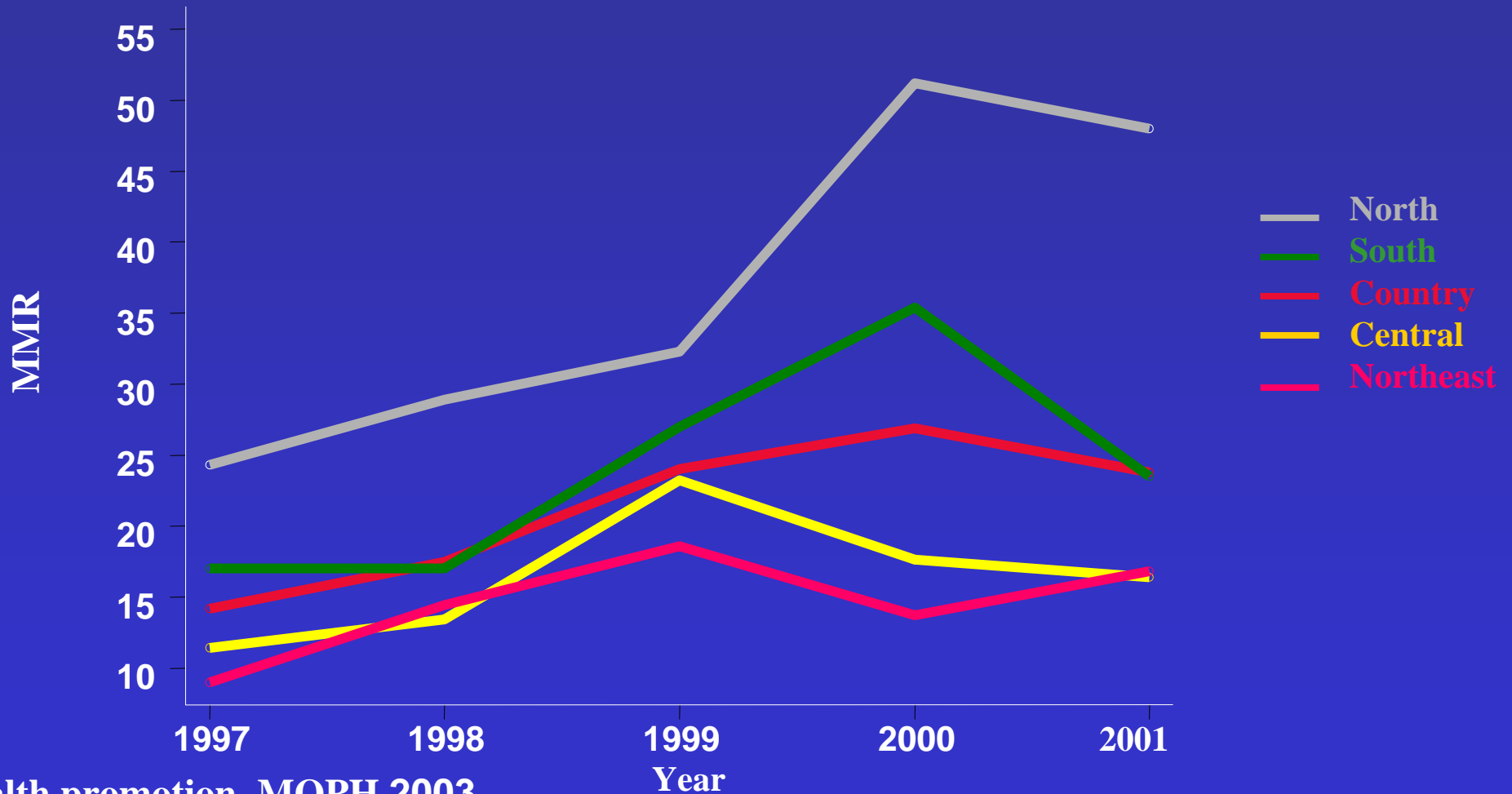


Source: Reserve Bank of India Bulletins, 1955-1998

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# MMR in Thailand by regions in 1997-2001



Health promotion, MOPH 2003

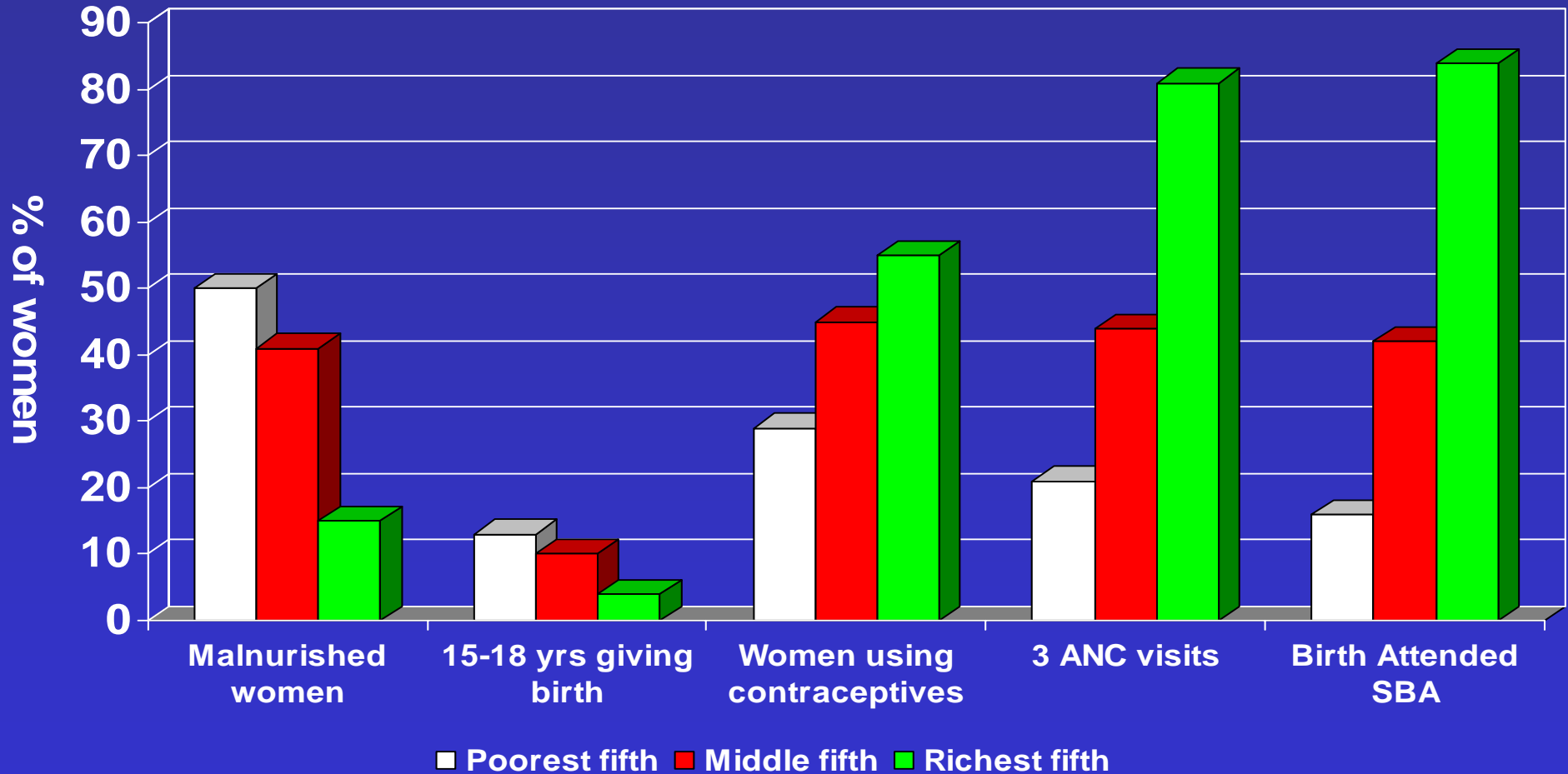
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# Rich Poor Divide And Investment



# Rich Poor Divide: Who should programme target

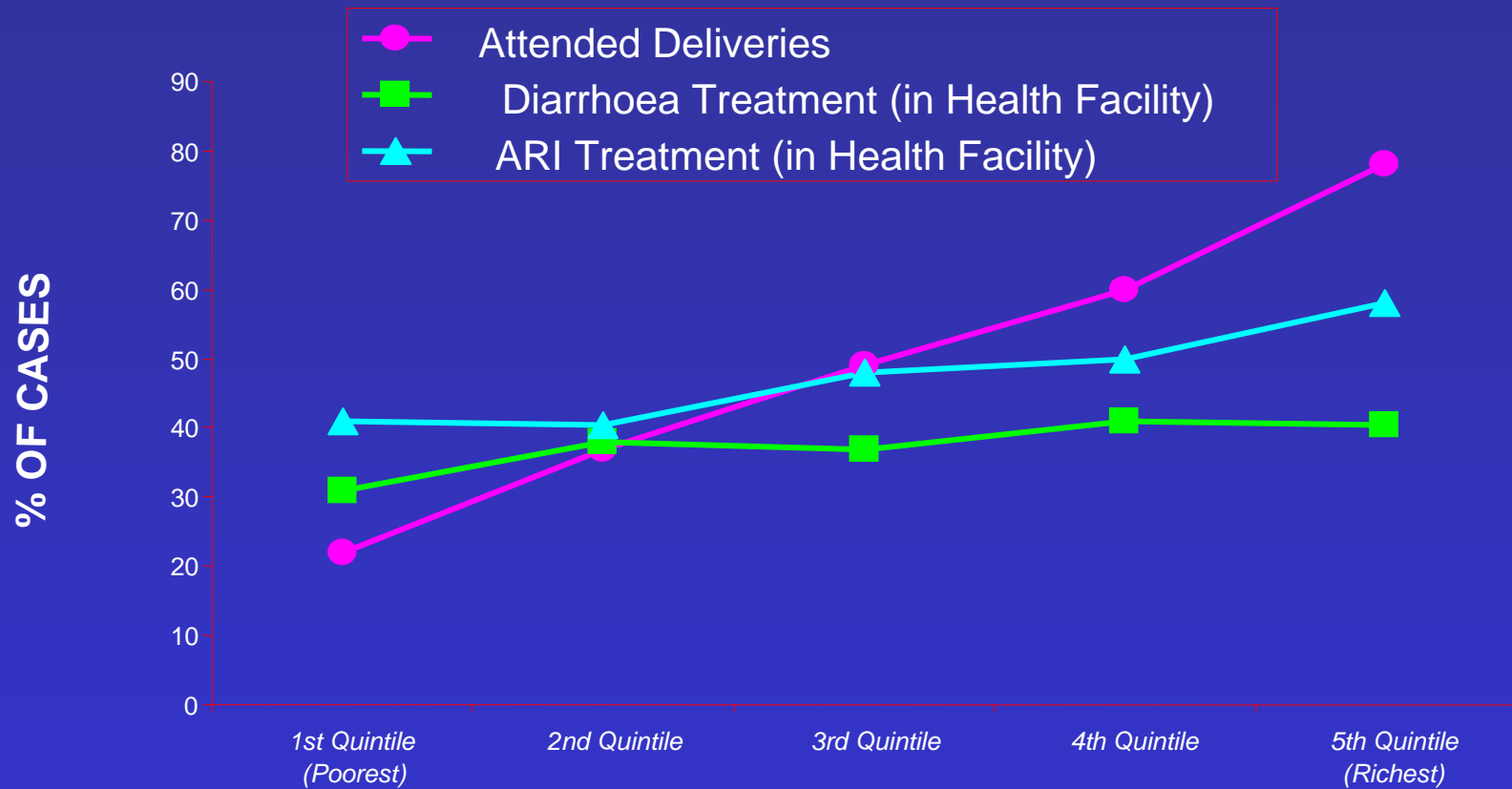


Source: Population Reference Bureau 2004

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# POOR-RICH INEQUALITIES IN ACCESS TO DIFFERENT TYPES OF HEALTH CARE



(unweighted average of 10 developing countries)

Source: World Bank (1999) *Safe Motherhood and The World Bank*.



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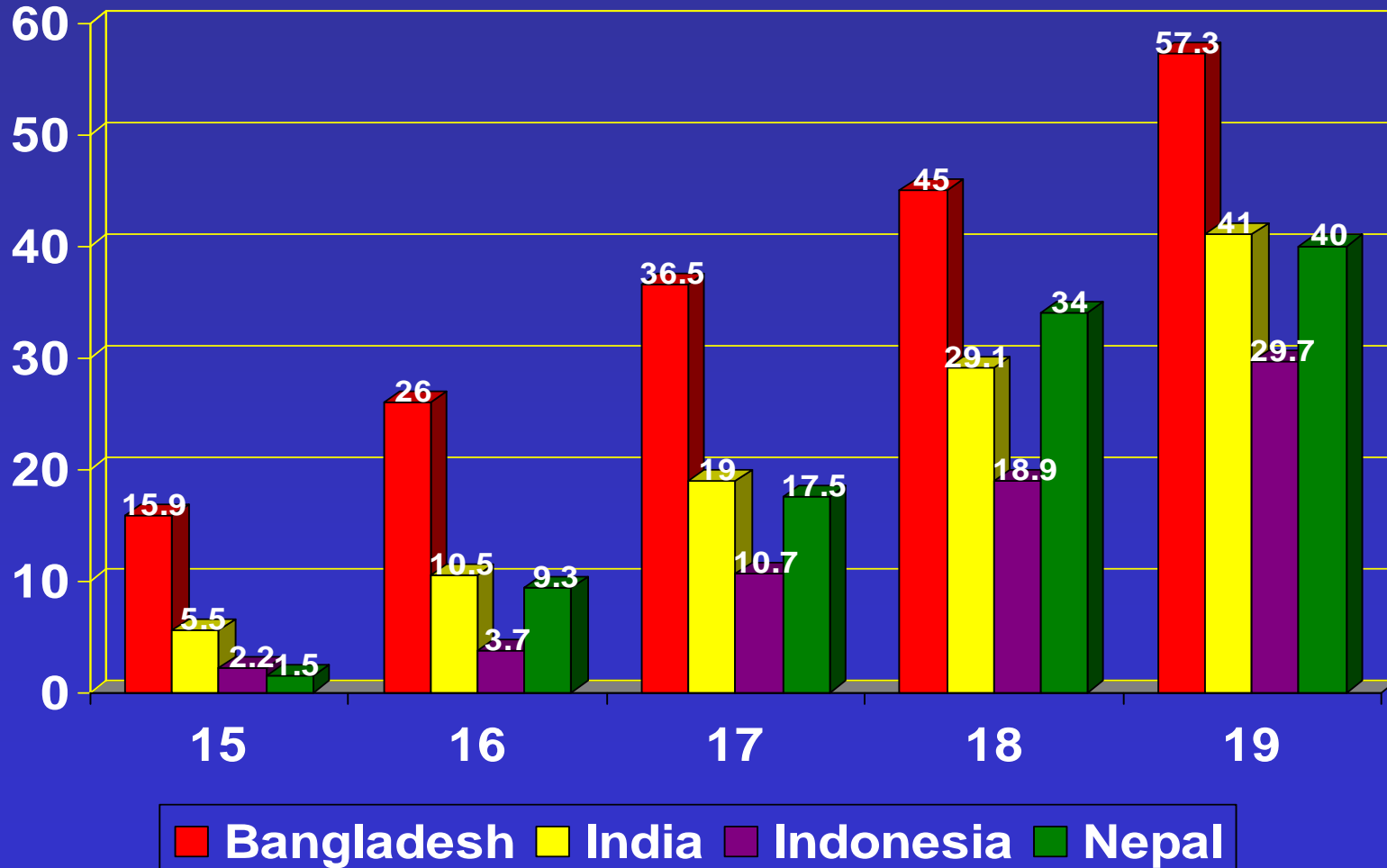
# Ground Reality

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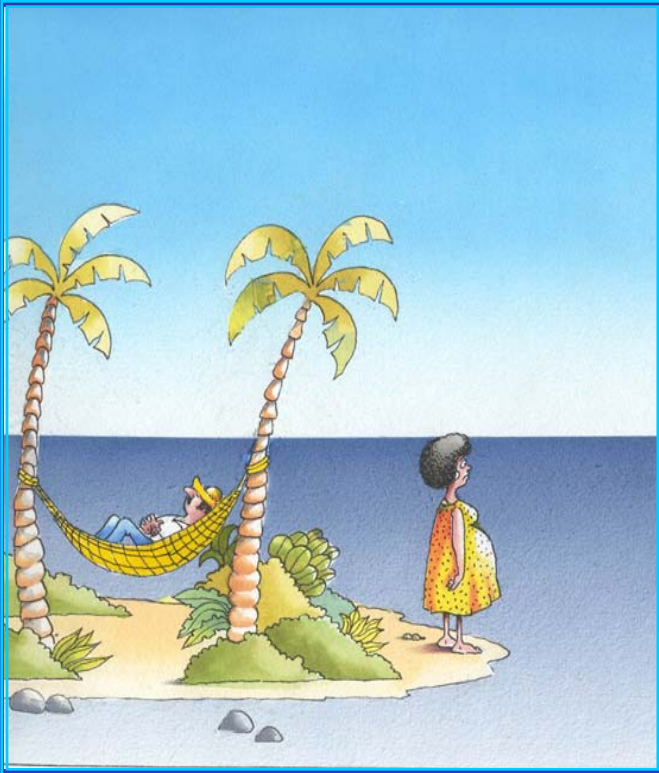
# Percentage of women age 15-19 who are mother or currently pregnant, by single years of age



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# Recognition

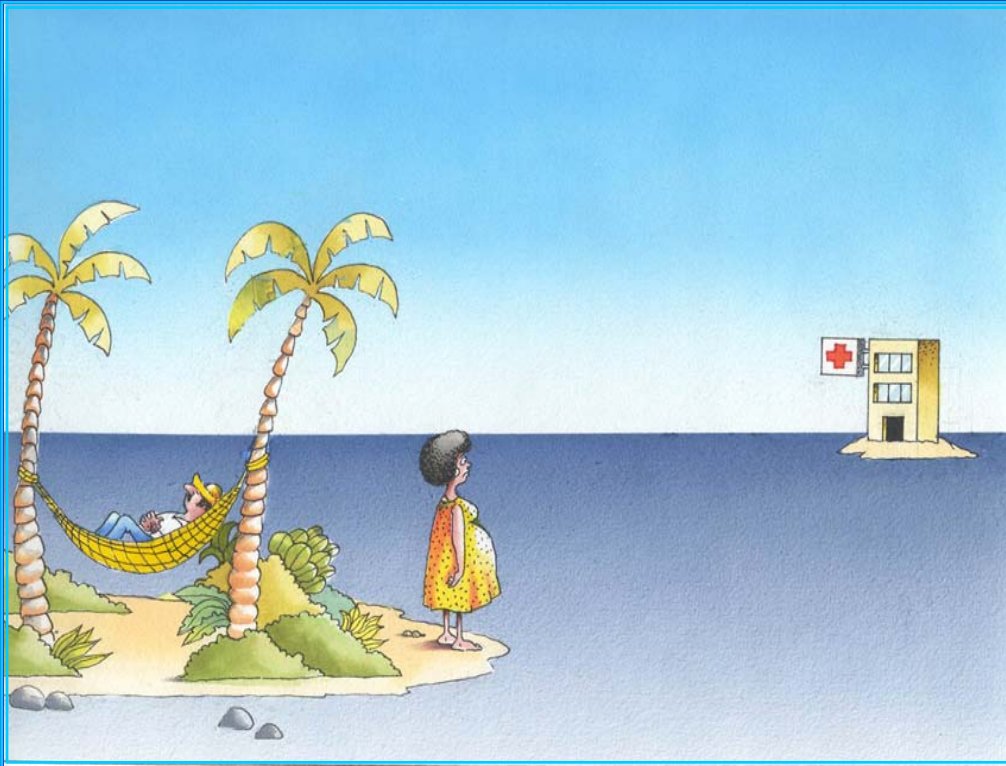




Recognition



Referral





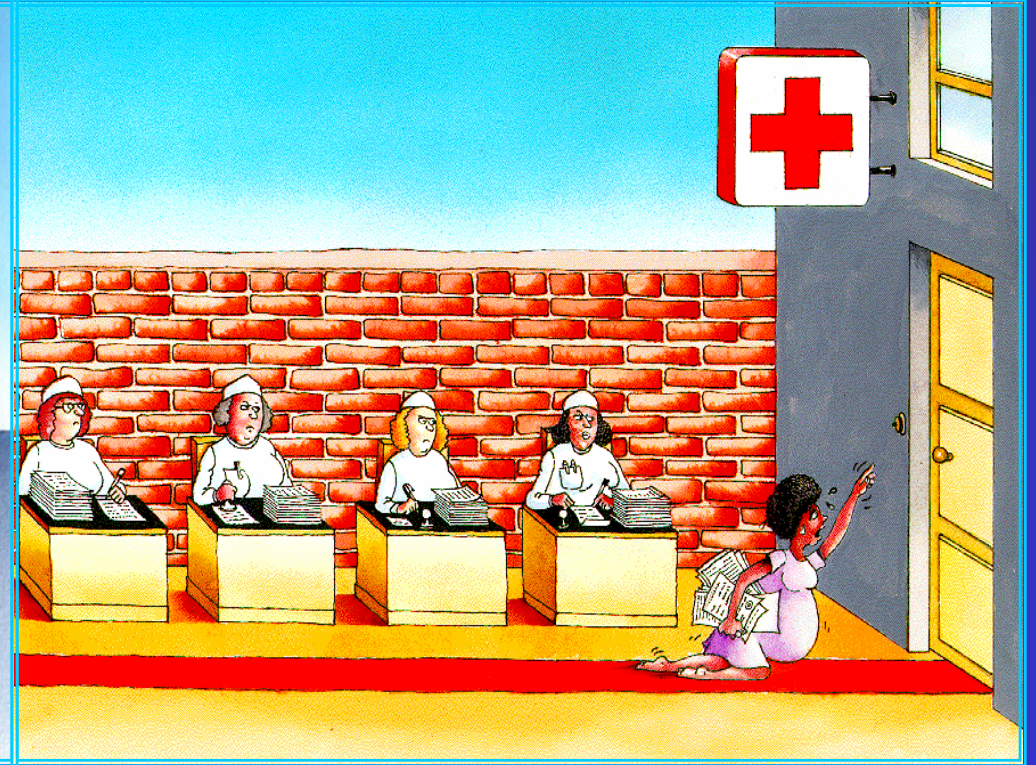
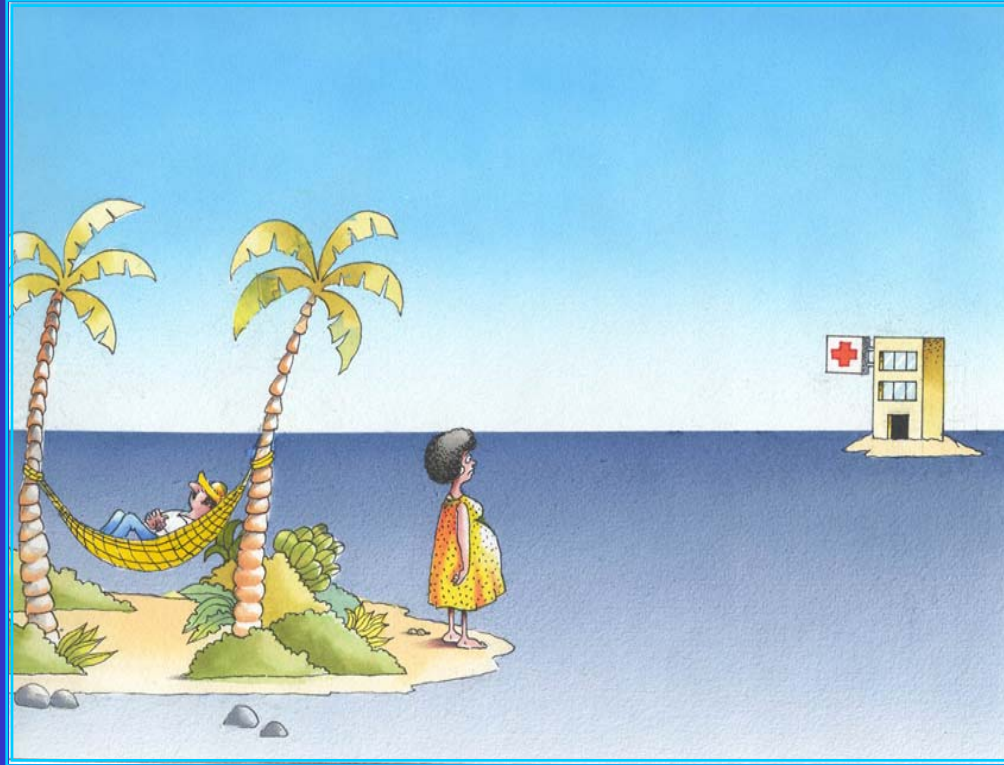
Recognition



Referral



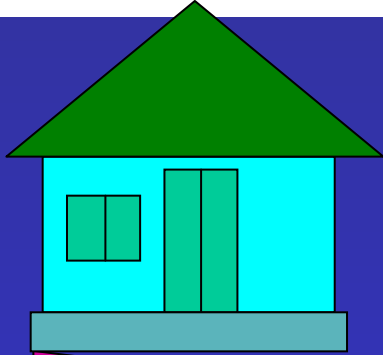
Responsiveness





# Where Care for Pregnancy and Childbirth Is Provided?

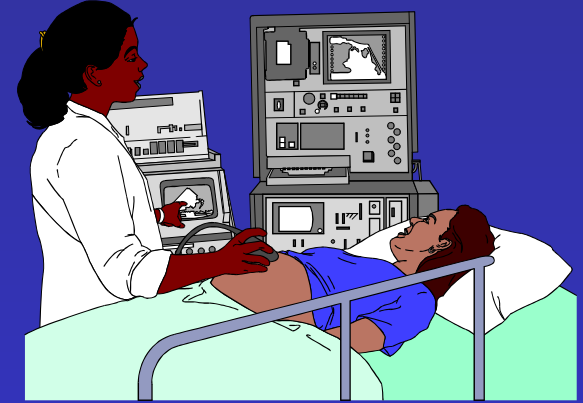
**Home/Community**



**1st level facility**



**Hospital**



**No of pregnant women seen**

**Specialised care**

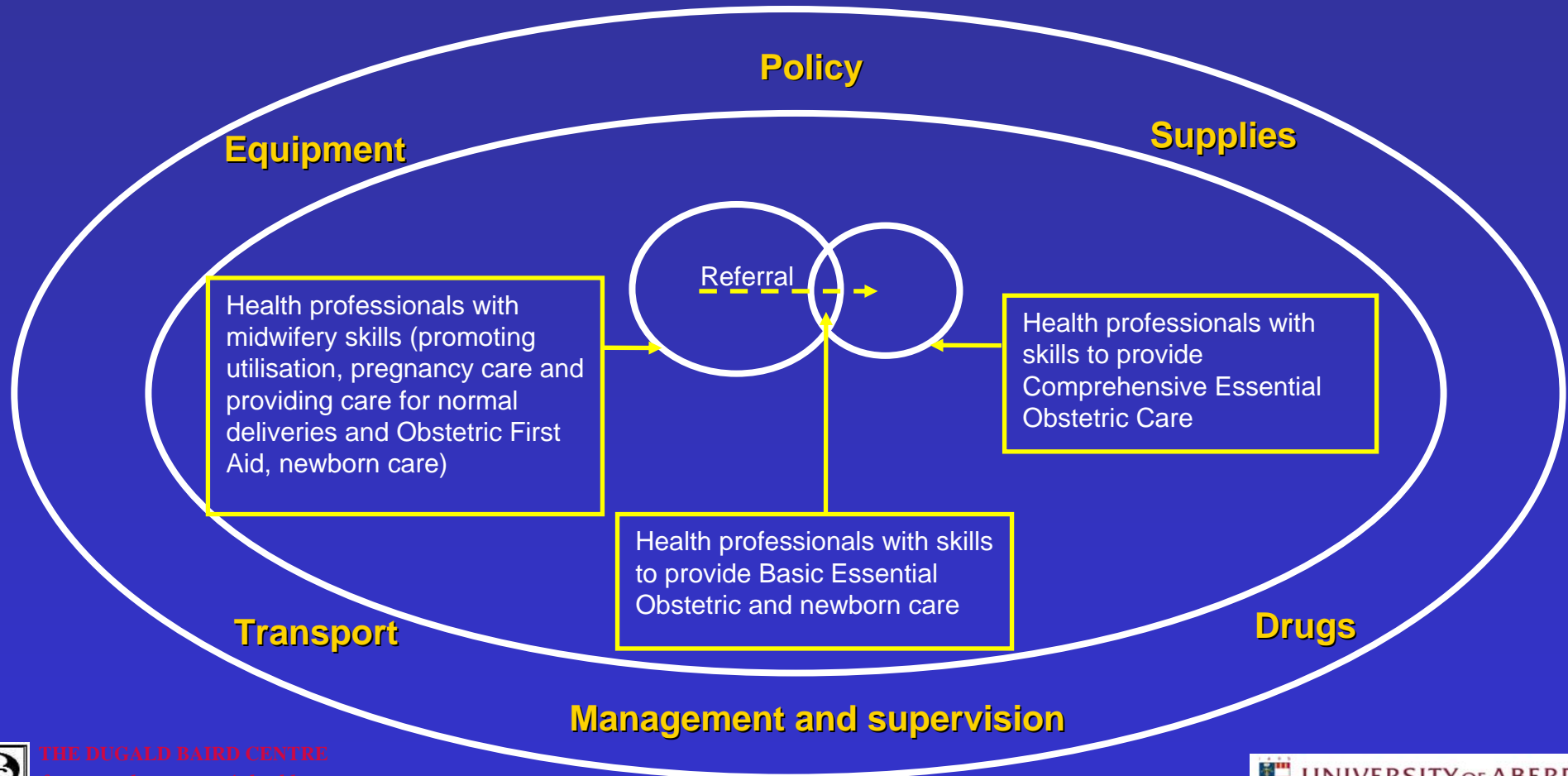
**Equipment, supplies, case management skills**



## *Interventions for safe motherhood*



# Skilled Care at Every Birth



THE DUGALD BAIRD CENTRE  
for research on women's health



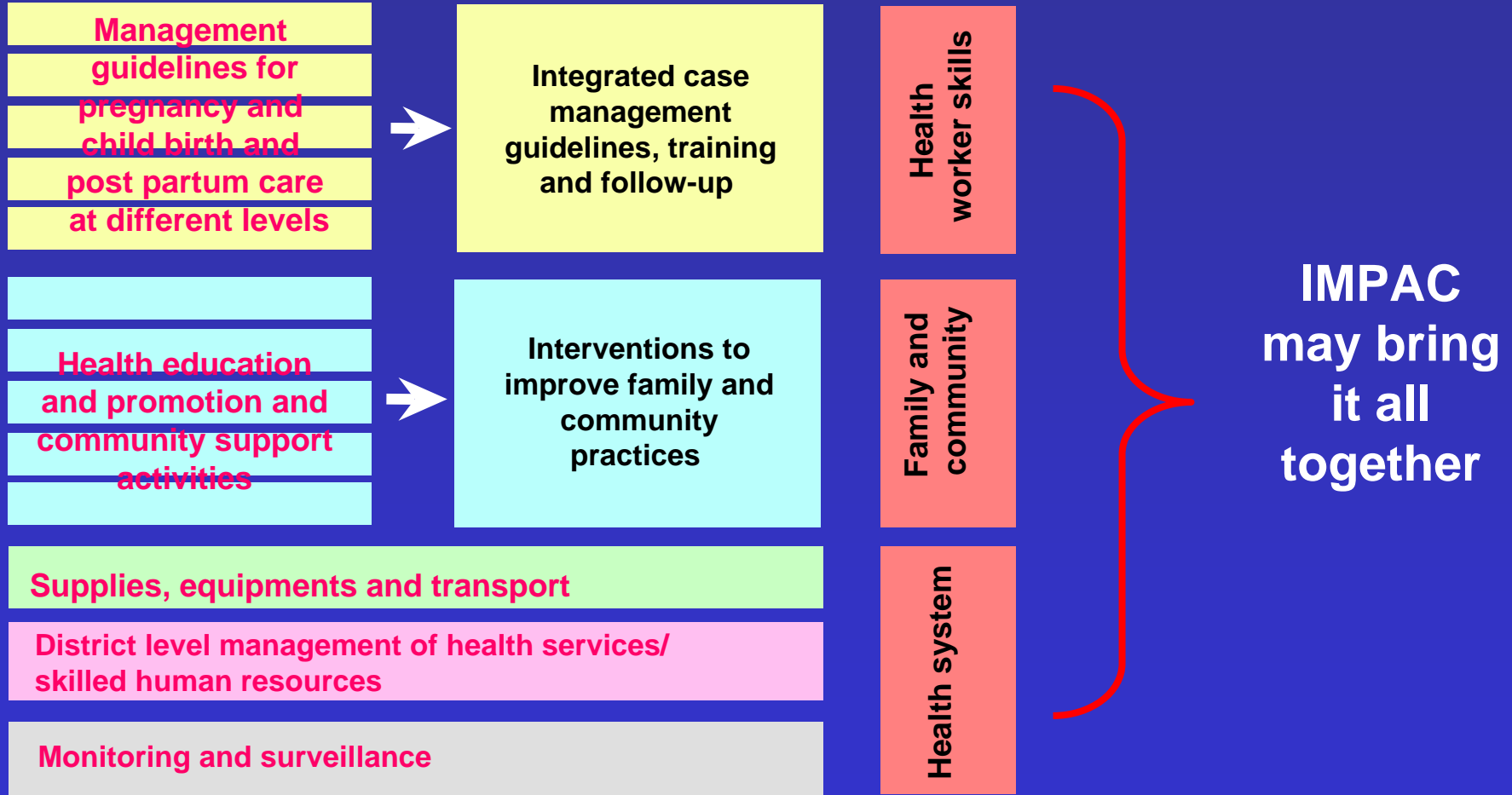
UNIVERSITY OF ABERDEEN

**We need a functioning system**

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# Integrated Management of Pregnancy and Childbirth







# Investment/implementation decisions

- Where to invest
  - Poorly performing state/province/district with high mortality
  - Middle performing with moderate/low mortality
  - Well performing with lowest mortality
- Which group
  - Poorest
  - Middle income
  - Richest
- Step wise (districts/states) or country wide



# To achieve our goals we need

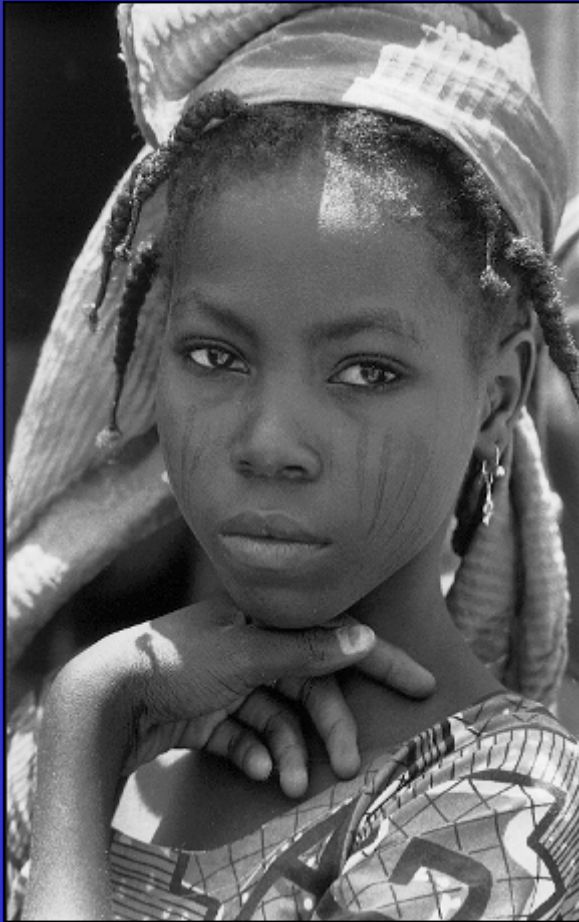


- Political Commitment
- Appropriate investment
- Right strategy
- Policy and legislations
- Public/Private/NGO mix
- Time



*No more poor options for poor people*

*Developing countries are not rich enough to invest on cheap ideas and strategies*



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