



Bangladesh Experience on Home Based Newborn Care

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iCCM 2014

**Integrated Community Case Management (iCCM):
Evidence Review Symposium**
3-5 March 2014, Accra, Ghana

Outline



- Background
- National Strategy and Program directives on Home Based Newborn Care
- Evidences on PNC home visit
- Newborn care status in home
- Recent Initiatives on Newborn Health in Bangladesh

WHERE? Neonatal deaths

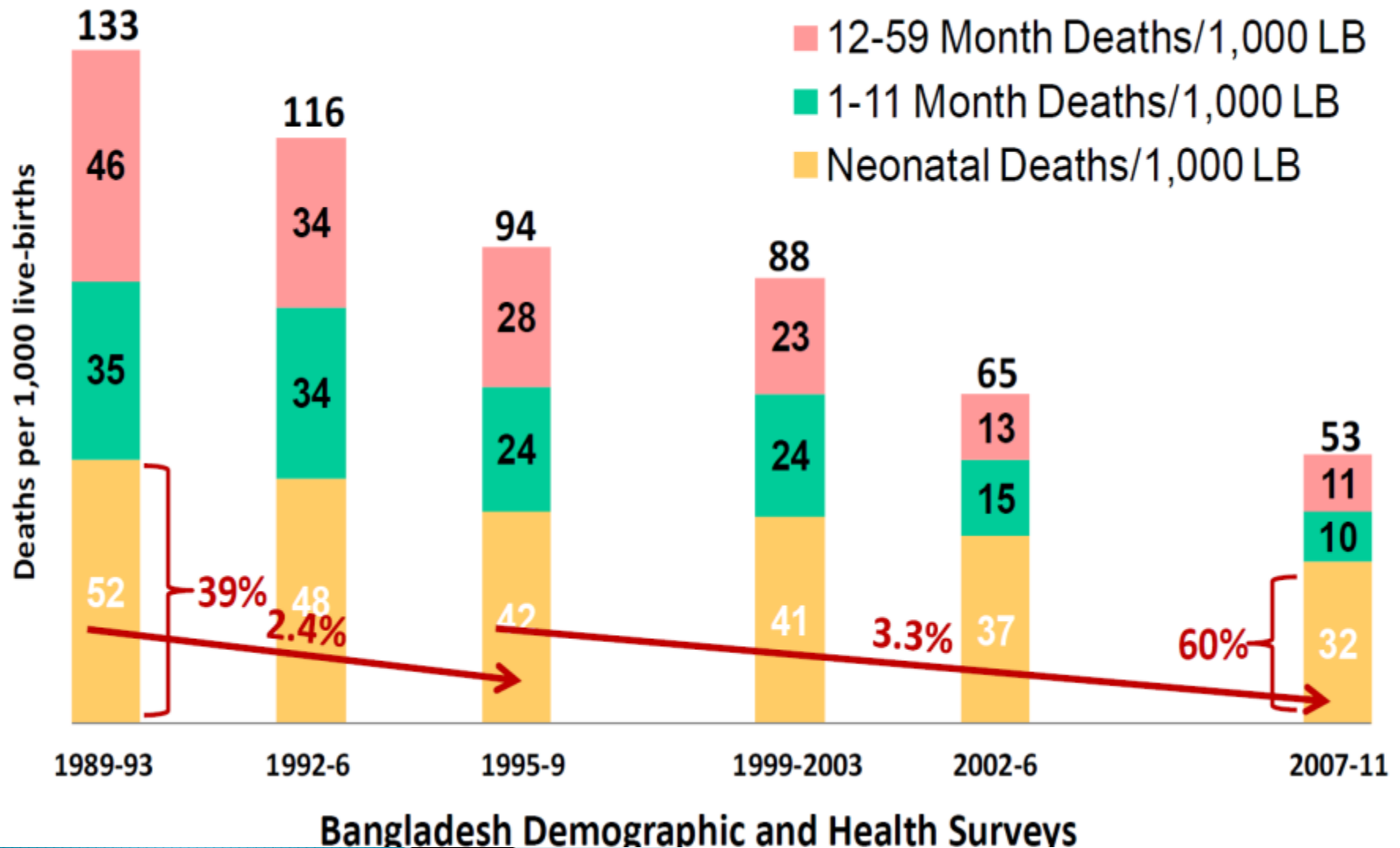
Bangladesh

- ❑ 3.3 million birth per year
- ❑ 80000 newborn deaths in 2011 (CHERG)
- ❑ 49% decline in 2 decades

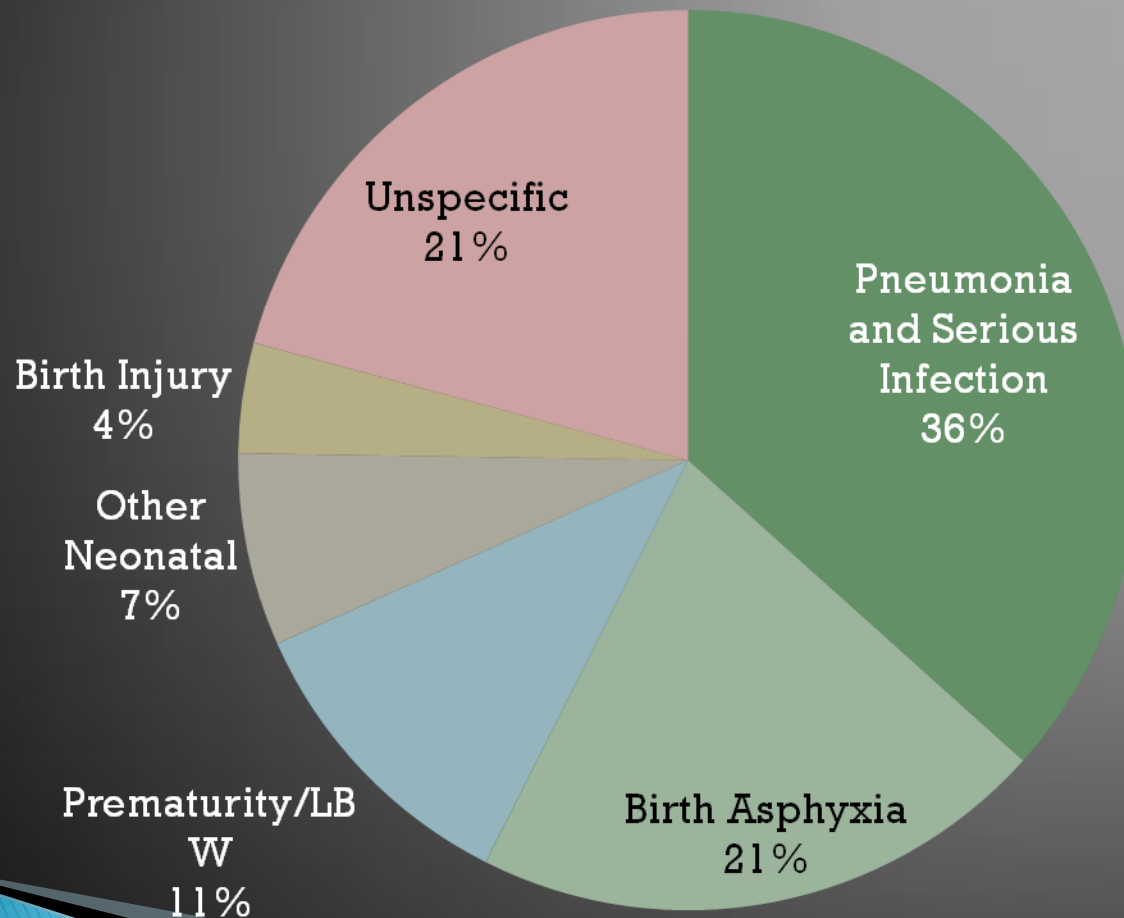
Sources: State of the World's Mother
2013/SC

Countries	Ranking for Numbers of Neonatal Deaths
India	1
Nigeria	2
Pakistan	3
China	4
DR Congo	5
Ethiopia	6
Bangladesh	7
Indonesia	8
Afghanistan	9
Tanzania	10

Declining Child Mortality in Bangladesh

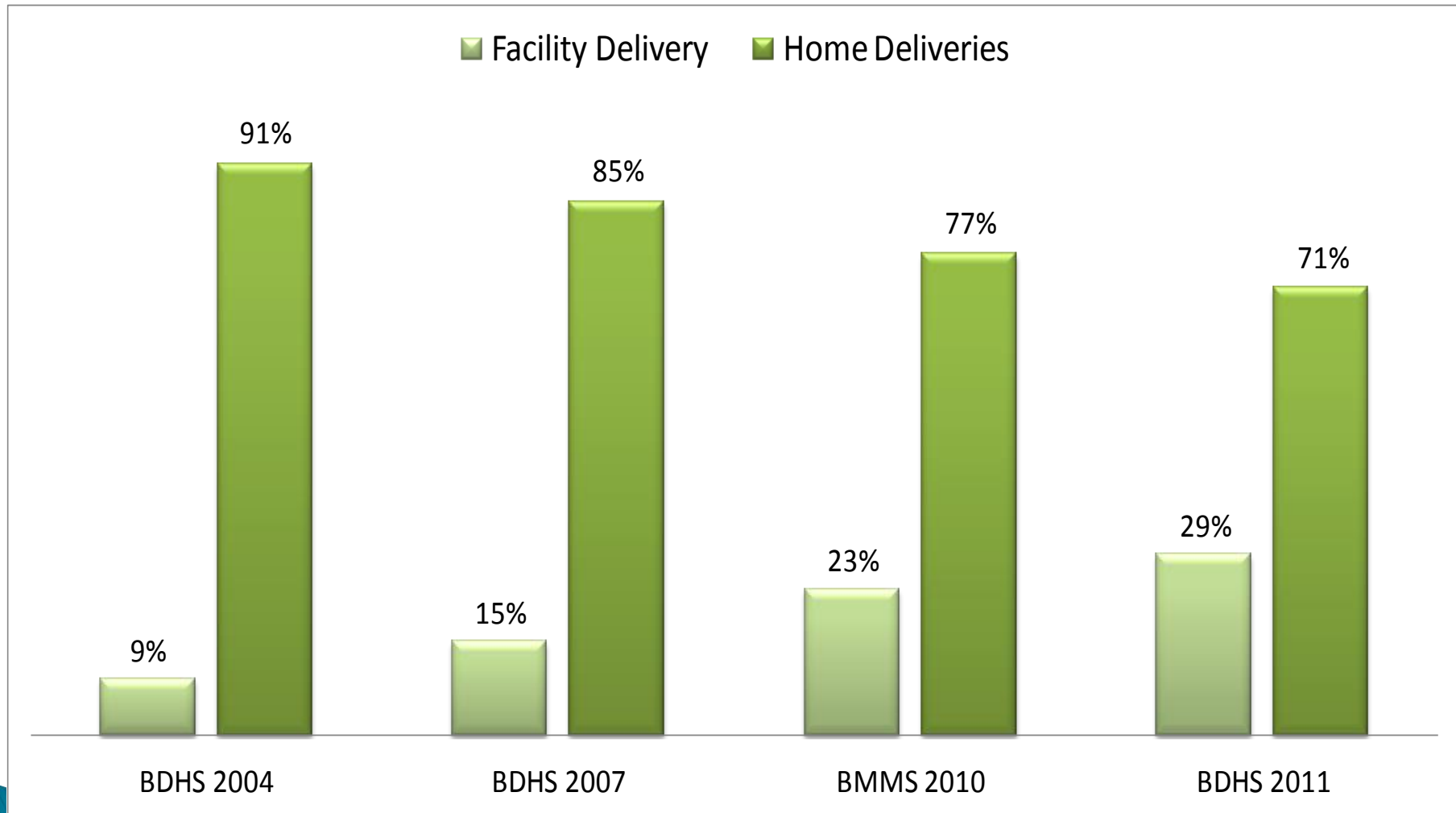


Estimated causes of neonatal mortality around the year 2010

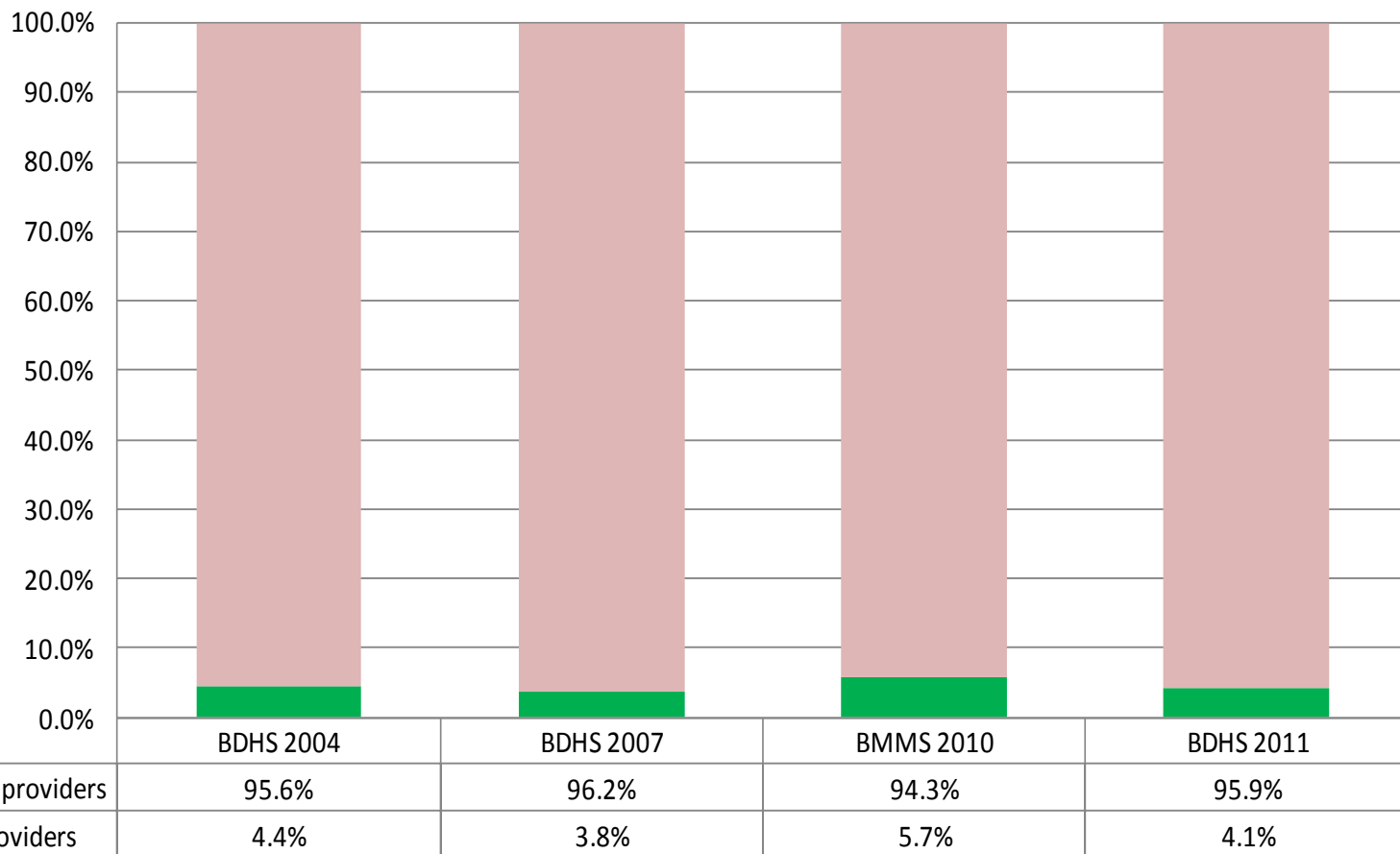


Source: BDHS 2011

Still home is the commonest place of deliveries in Bangladesh



Home delivery by skilled attendants – persistently poor



Increases in skilled attendance at deliveries has been entirely due to increases in facility deliveries, particularly in private facilities

Home Based Newborn Care

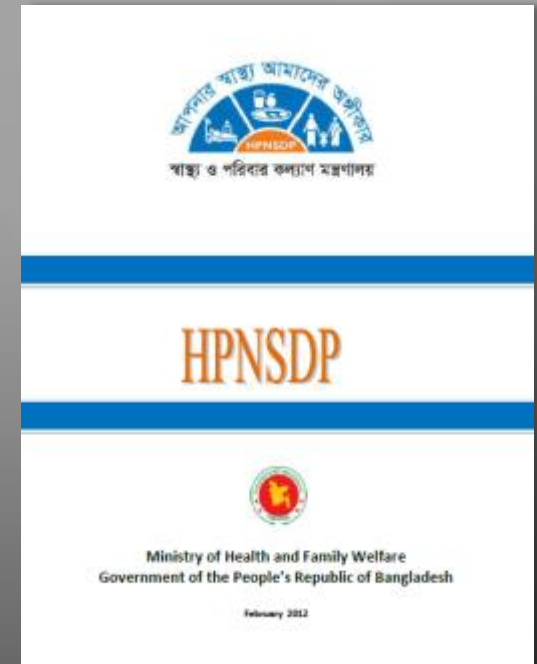
**NATIONAL NEONATAL
HEALTH STRATEGY AND
GUIDELINES FOR BANGLADESH**
Approved in March 2009



**STANDARD OPERATION
PROCEDURE (SOP) FOR
NEWBORN CARE SERVICES**
Approved in 2011



**HEALTH POPULATION
NUTRITION SECTOR
DEVELOPMENT PROGRAM**
2011 -2016



Prioritized Postnatal Home Visit by Trained Community Health Workers

National Neonatal Health Strategy



5.4 After Delivery

The immediate postnatal period is particularly important for both family and providers as majority of the neonatal deaths occur during the early neonatal period. Early identification of neonatal danger signs by family members helps timely referral to trained providers or appropriate facilities to reduce neonatal morbidity and mortality.

5.4.1 Postnatal Visit

There is now greater consensus on PNC interventions,^{10,11} but questions remain about the best timing and place for postnatal visits, and who can deliver this package. Majority of the components of postnatal care can be carried out at the community level by a trained health worker while some skilled services need facility arrangements or a skilled health provider (*see page 57*).

The strategy recommends four post natal visits: within 24 hrs, on 3rd day, 7-14 days and within 42 days. The first three visits are particularly important for neonatal survival and health.

Health, Population, and Nutrition Sector Development Program 2011-2016



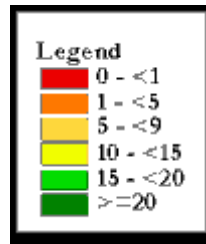
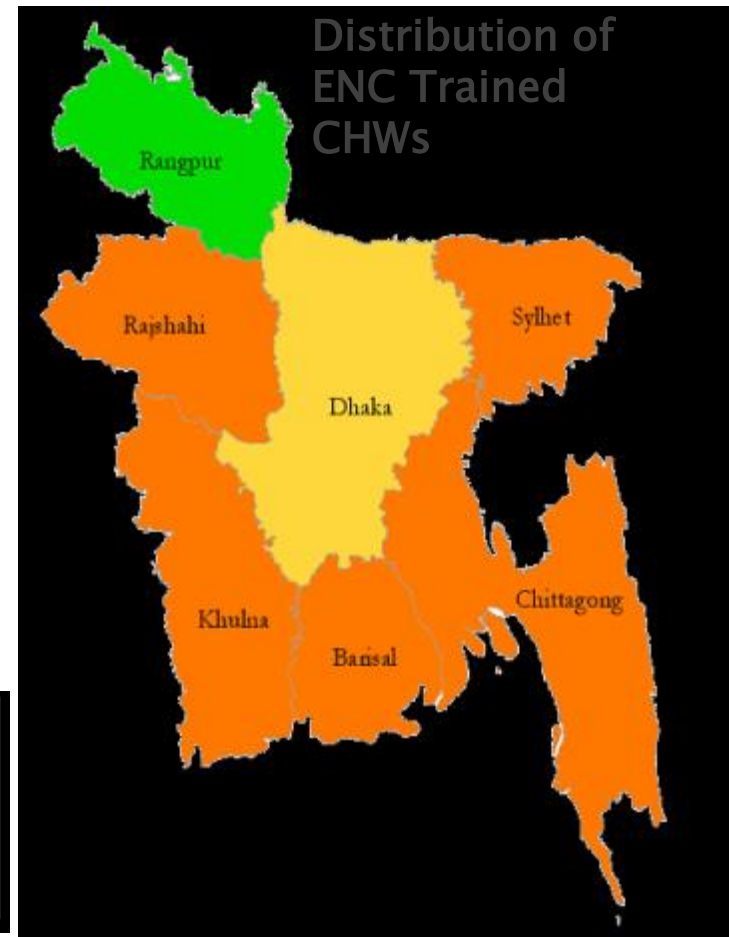
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Home-visit by a trained worker within two days of child birth will be ensured. Sick newborn services will be strengthened at the UHCs and district hospitals with rapid referral systems.

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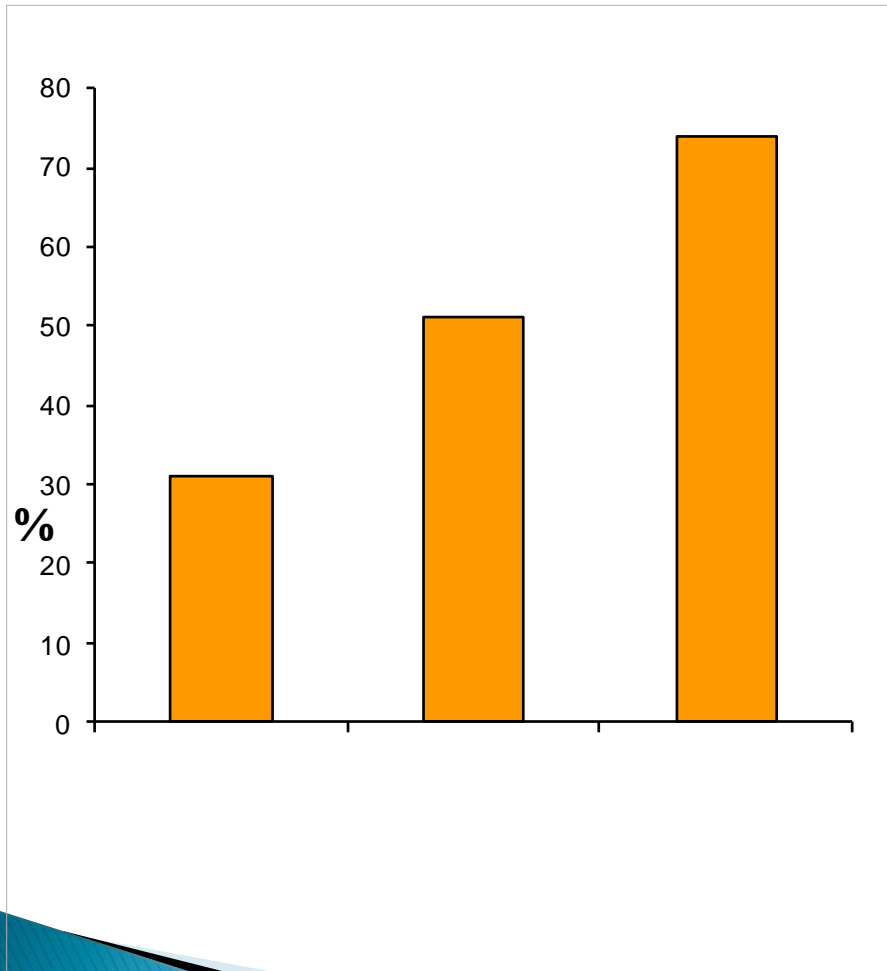
Specific attention will be given to promote essential newborn care services with emphasis on prevention and management of asphyxia and neonatal infections, and care for the Low Birth Weight and pre-term babies. This will require extensive training of the existing community based workers (FWA, HA, NGO workers) and the new community health care providers (CHCP) and supporting them through operational guidelines, monitoring and supervision and where appropriate with incentives. A specific task to be ensured is a home-visit by a trained worker within two days of child birth. Sick newborn services will be strengthened at the UHCs and district hospitals with rapid referral systems of sick newborns to these facilities.

Distribution of Community Health Worker and ENC trained Community Health Workers



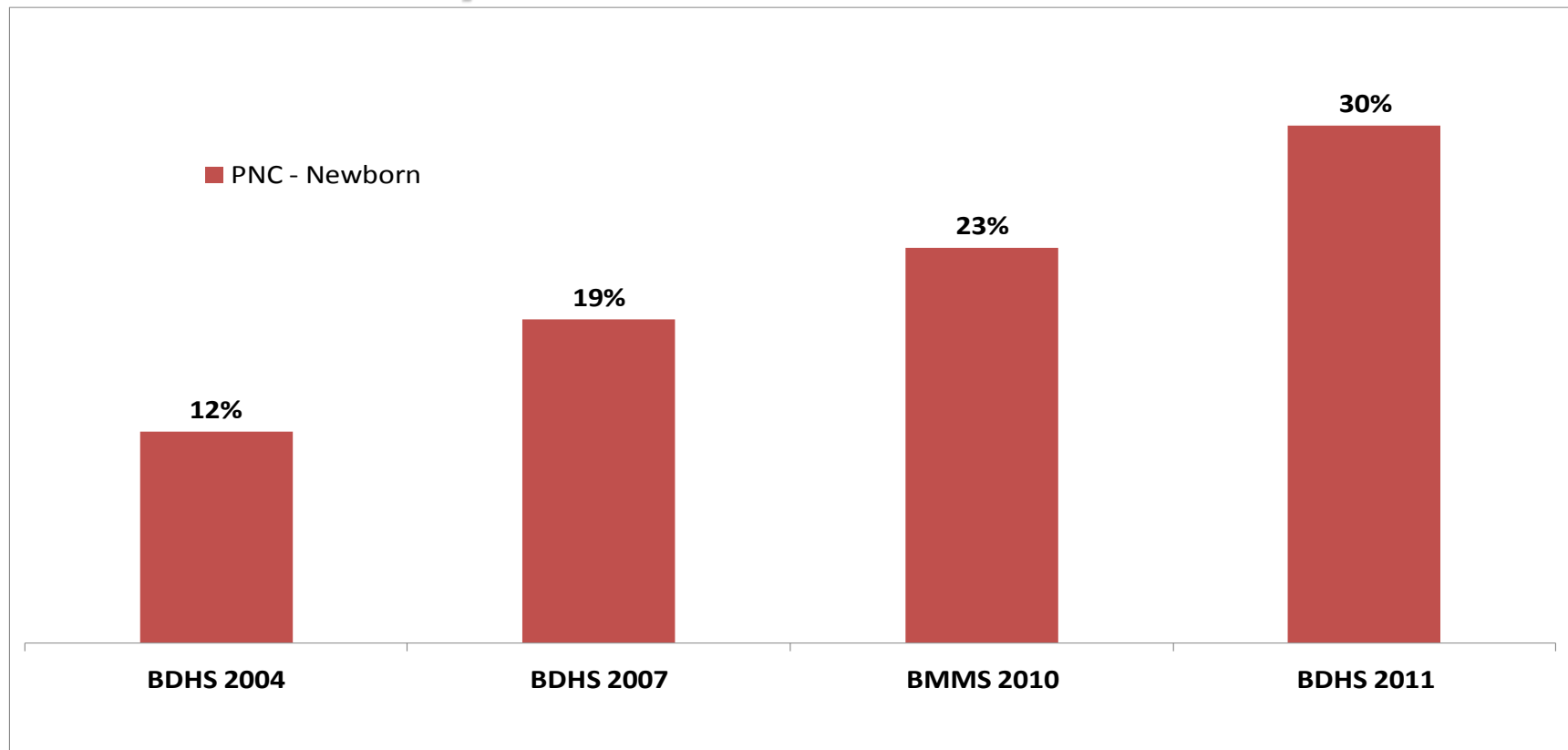
The national average of CHWs - 13.5 per 10000, 34% of them are trained in ENC (5 per 10000) . There is geographical inequity among the distribution of CHWs

Community based PNC OR in Bangladesh (April 2009 to March 2010)



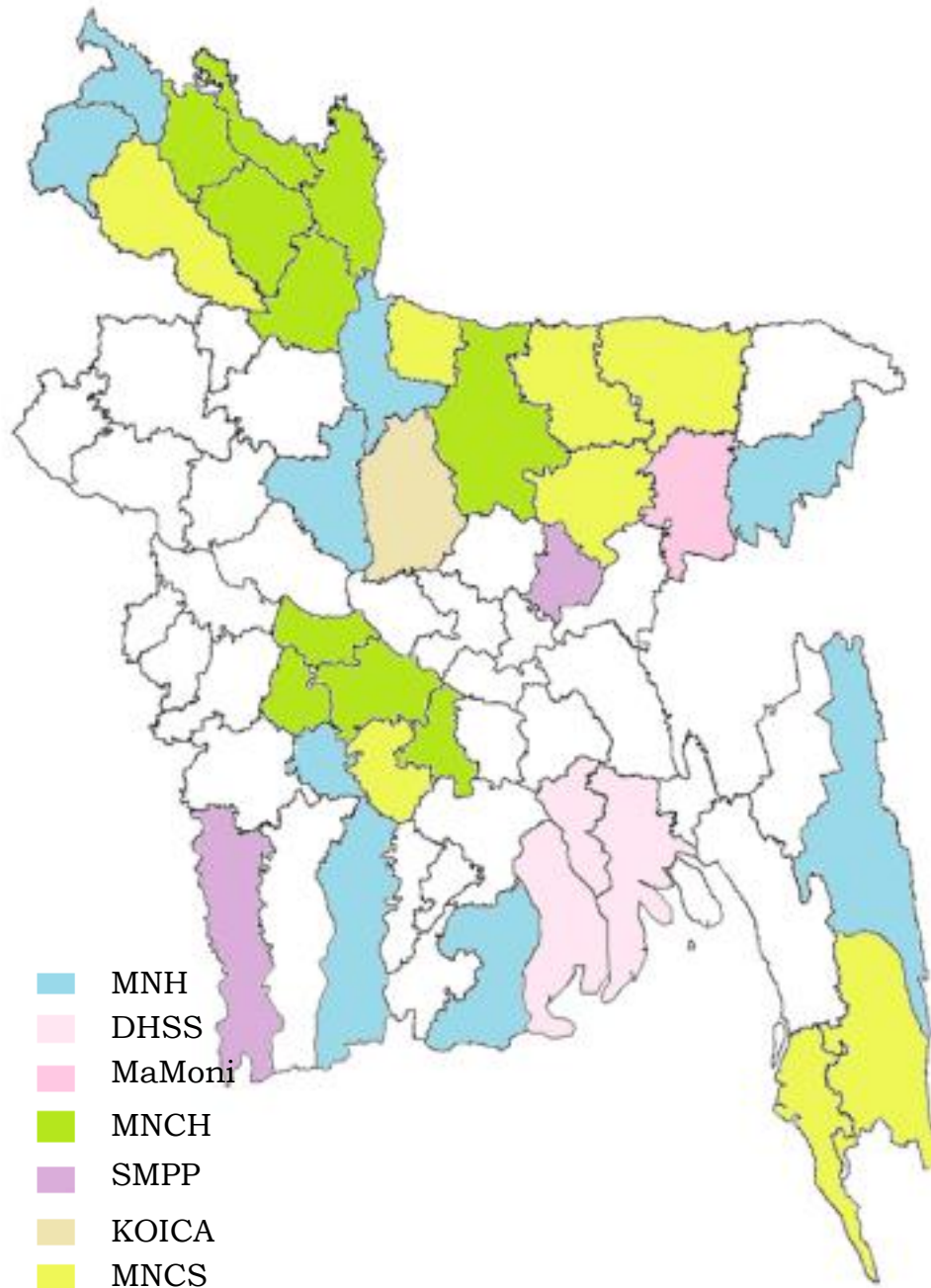
- Early PNC home visit by existing government field workers is feasible.
- Birth notification within 24 hours of birth is closely associated with early PNC visit at home and it should be a program priority to ensure early PNC.
- Use of multiple field workers is challenging.
- Timing of 1st postnatal home visit may be extended up to 2 days instead of 24 hours.

PNC of Newborn by Medically Trained Provider by 48 hours of birth



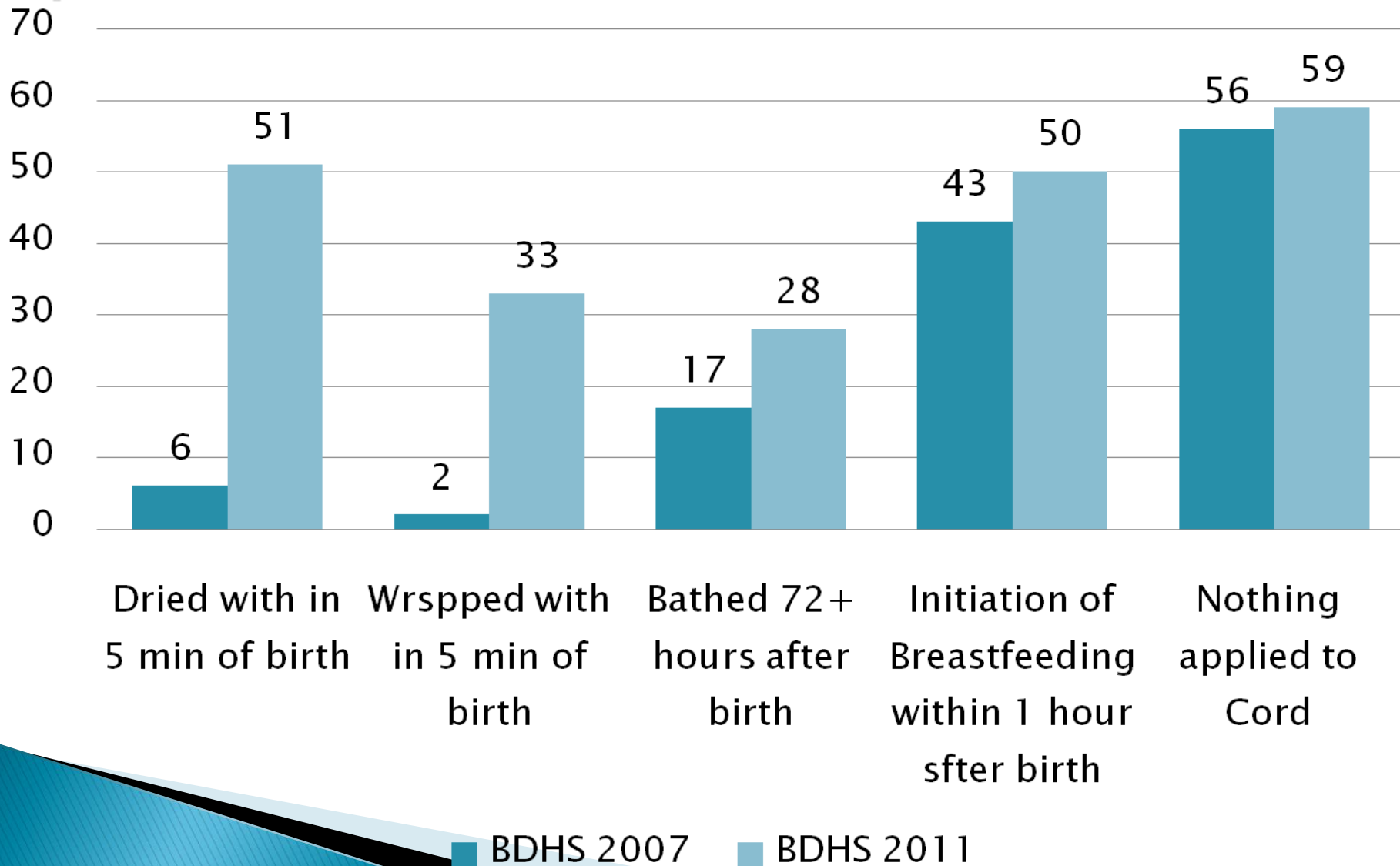
Almost all of the increase in postnatal care can be explained by increases in facility deliveries

Community Based MNCH programs with partners support

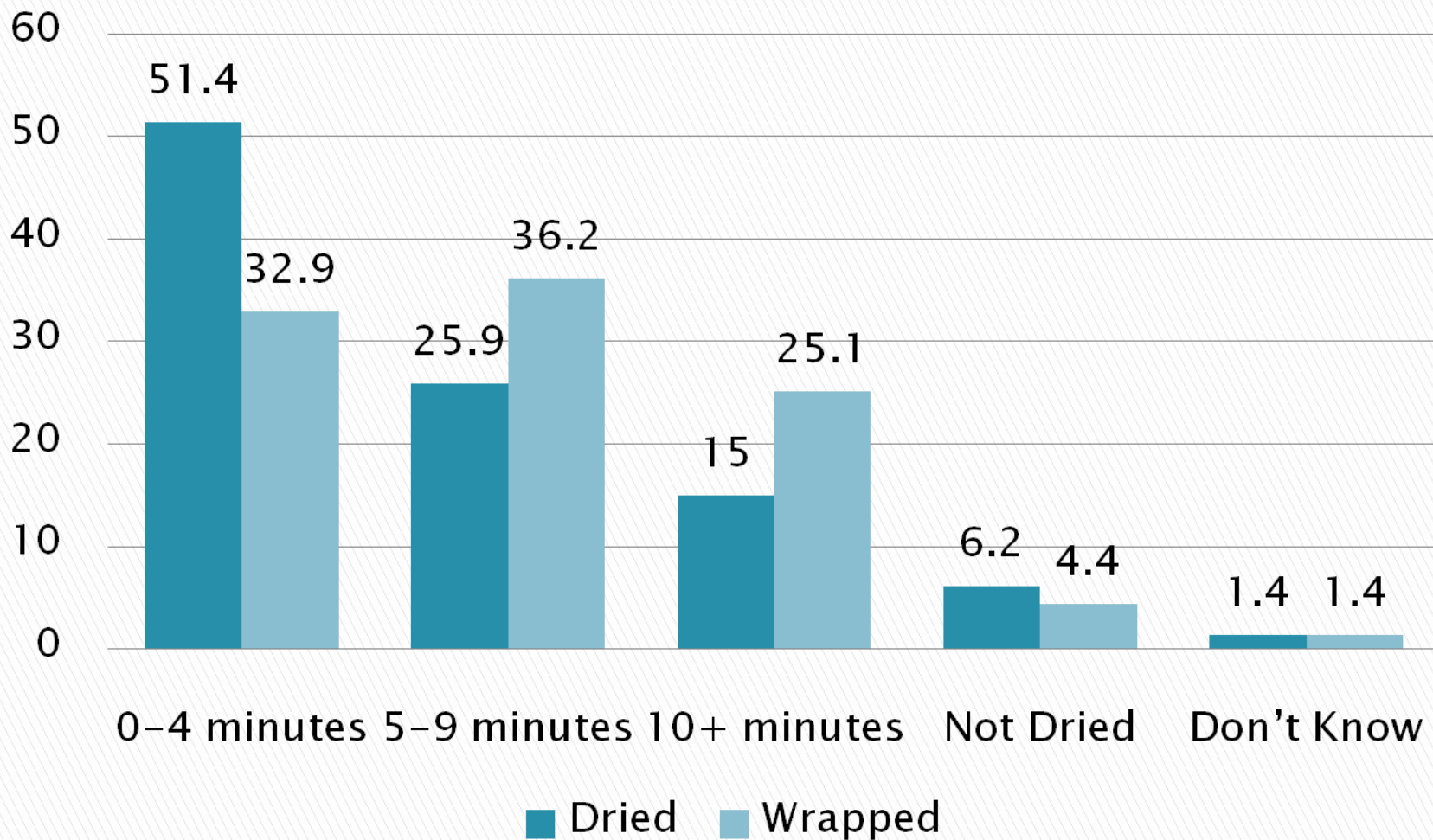


- In large scale community based MNCH projects trained community volunteers were able to make a home visit to **45% to 85%** of home births within 2 days of delivery
- These programs covered half of the country

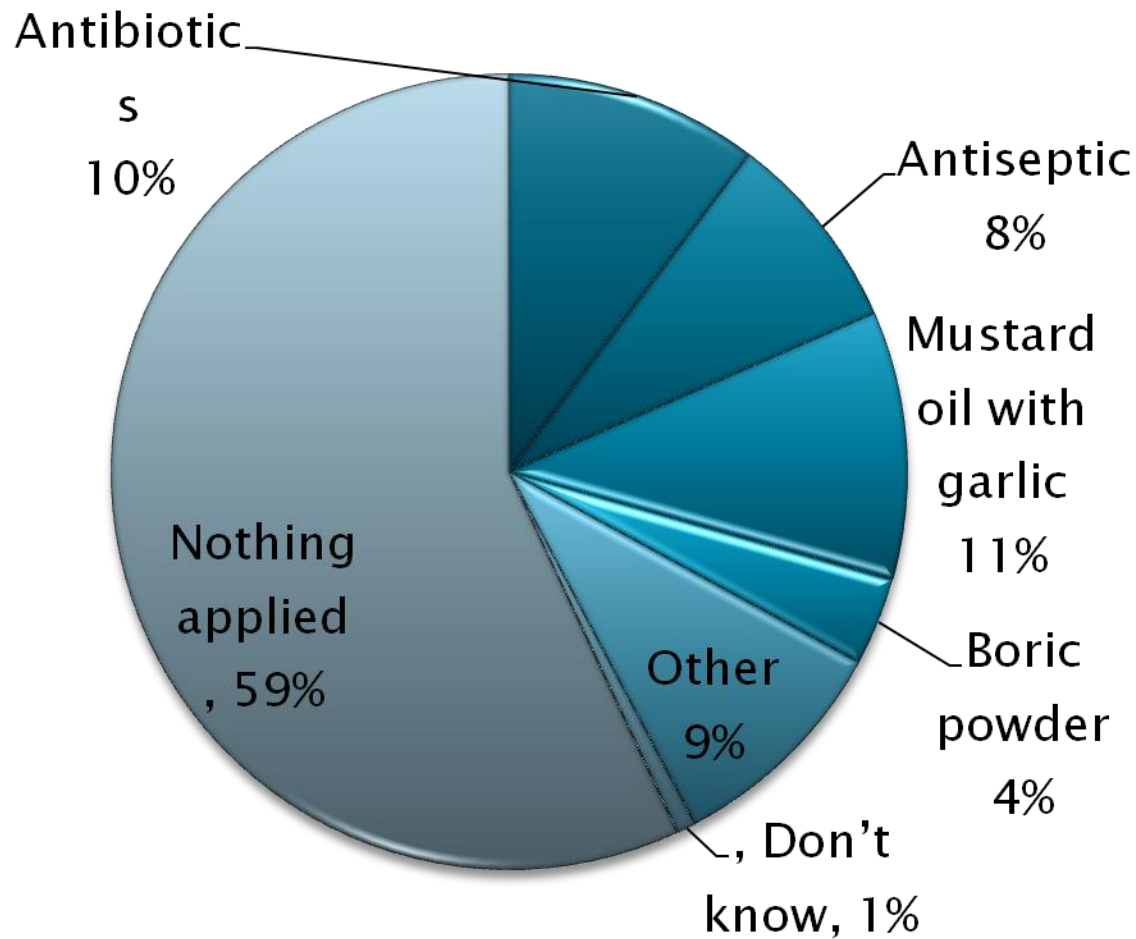
Trends in essential newborn care practice in home deliveries



Newborn care practices in home deliveries – Timing of drying and wrapping



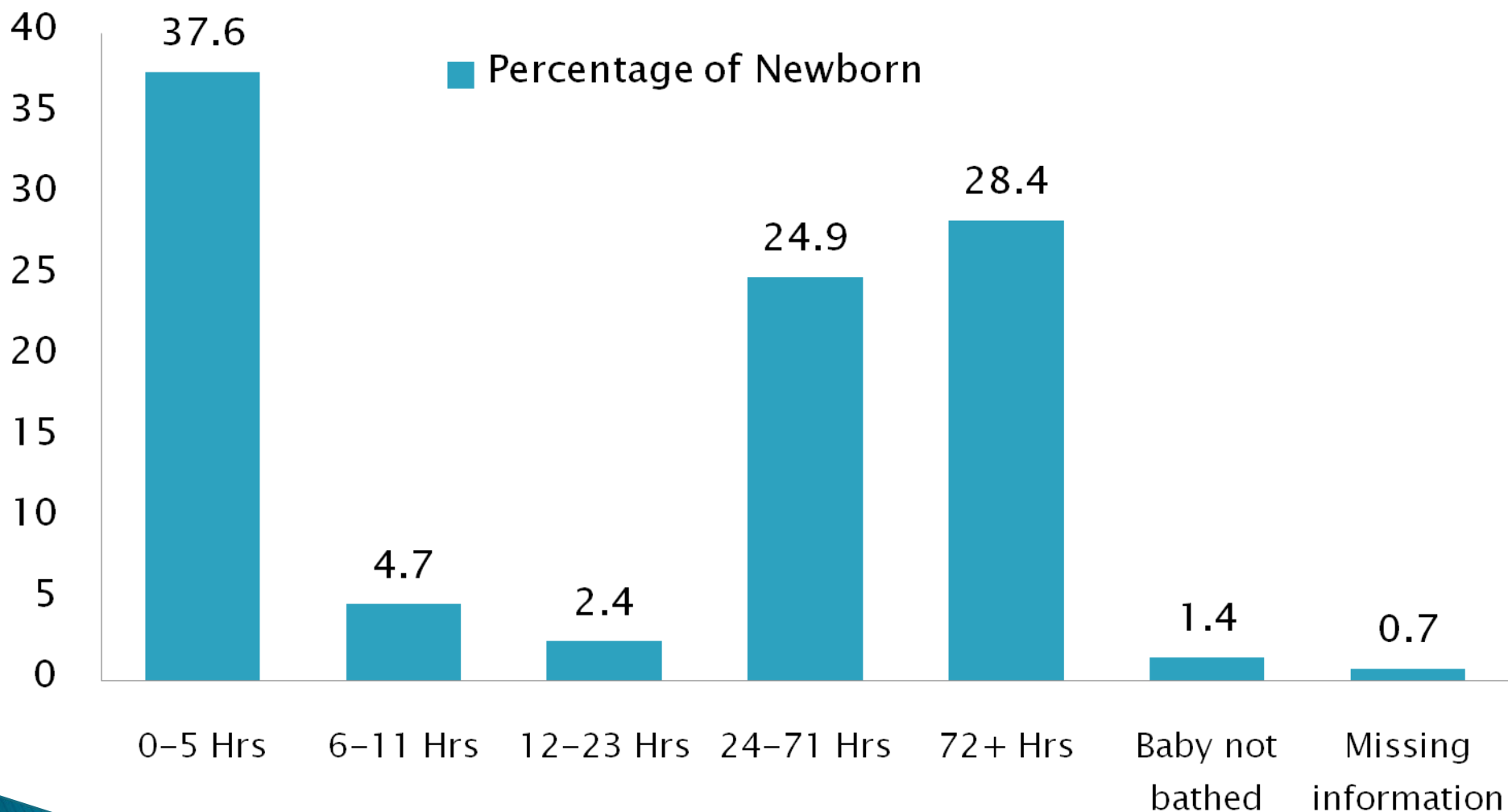
Application of material after the umbilical cord was cut during home deliveries



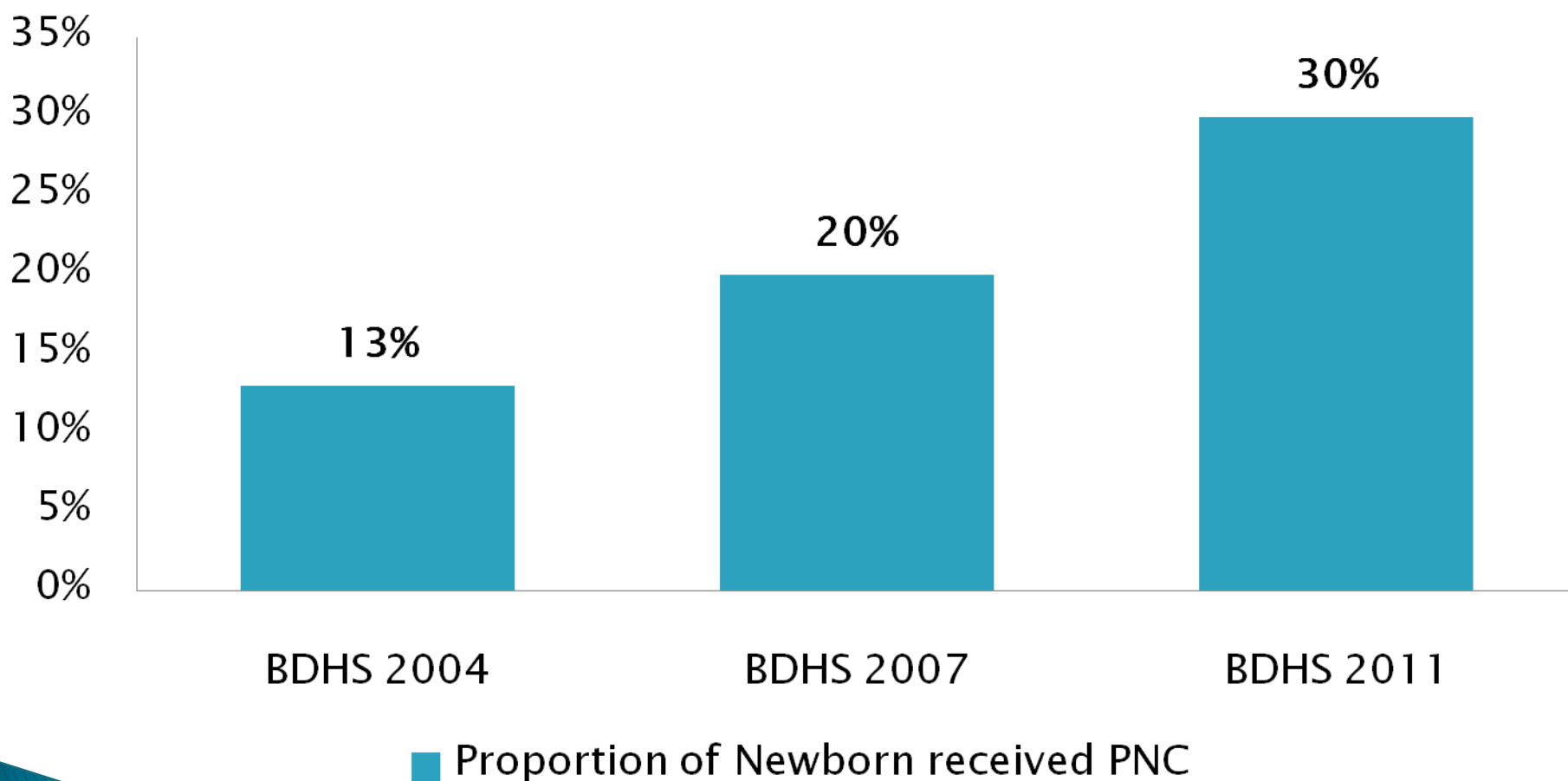
Applying nothing to the umbilical cord increased slightly, from 56 % in 2007 to 59% in 2011

Other includes spirits/alcohol, chewed rice, turmeric juice/powder, ginger juice, shidur, gentian violet and talcum powder

Newborn care practices in home deliveries – Timing of first bath



Trend of PNC for newborn from a medically trained provider within two days of delivery



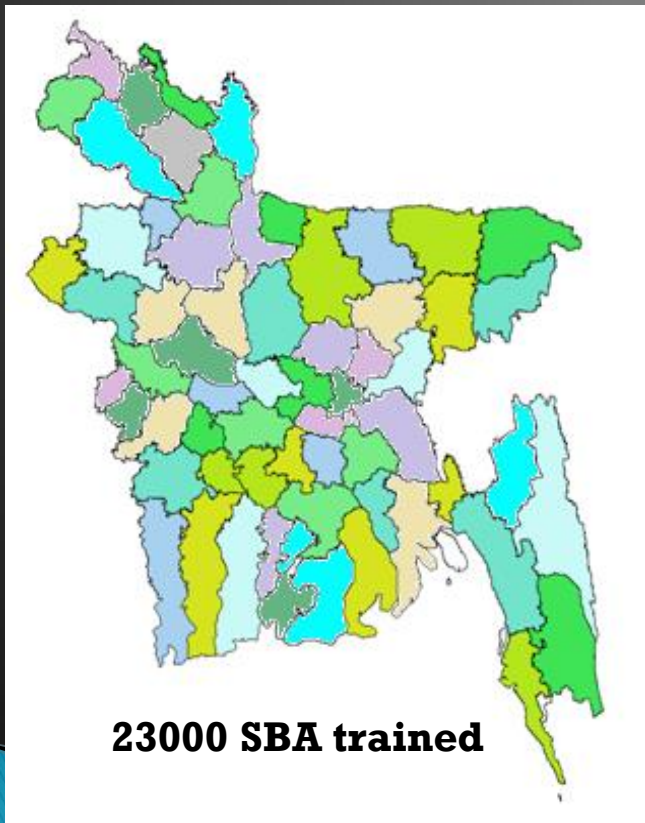
Postnatal Care Practices of Newborn

Postnatal care for children

Timing	Any provider	Medically trained provider ¹
Within 2 days of delivery	40.5	29.6
3-6 days after delivery	2.4	1.0
7-41 days after delivery	7.0	3.5
Did not receive postnatal check up	49.9	65.8
Don't know/missing	0.2	0.2
Total	100.0	100.0
Number	4,652	4,652

Recent Initiatives on Newborn Health in Bangladesh

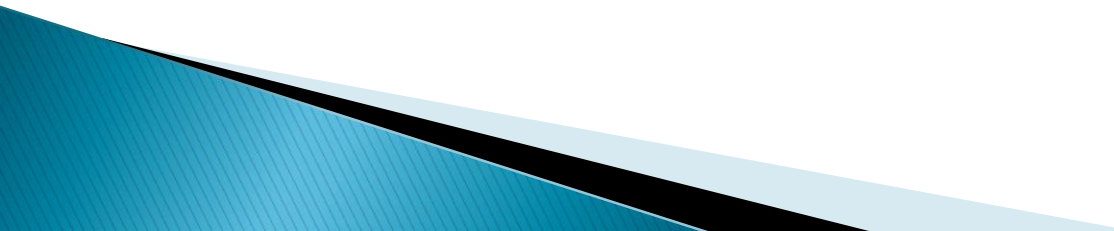
National Scaling-up of HBB initiatives



Plan for national scale-up of

- ▶ Use of 7.1% CHX in newborn umbilicus
- ▶ Sepsis management in lower level facilities
- ▶ KMC for preterm babies
- ▶ Antenatal corticosteroid for threatened preterm labor

Challenge

- ▶ Health workforce shortage
 - ▶ PNC 3 visit by existing CHW
 - ▶ Supervision in the community
 - ▶ Monitoring PNC activities specially through MIS
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Thank You



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