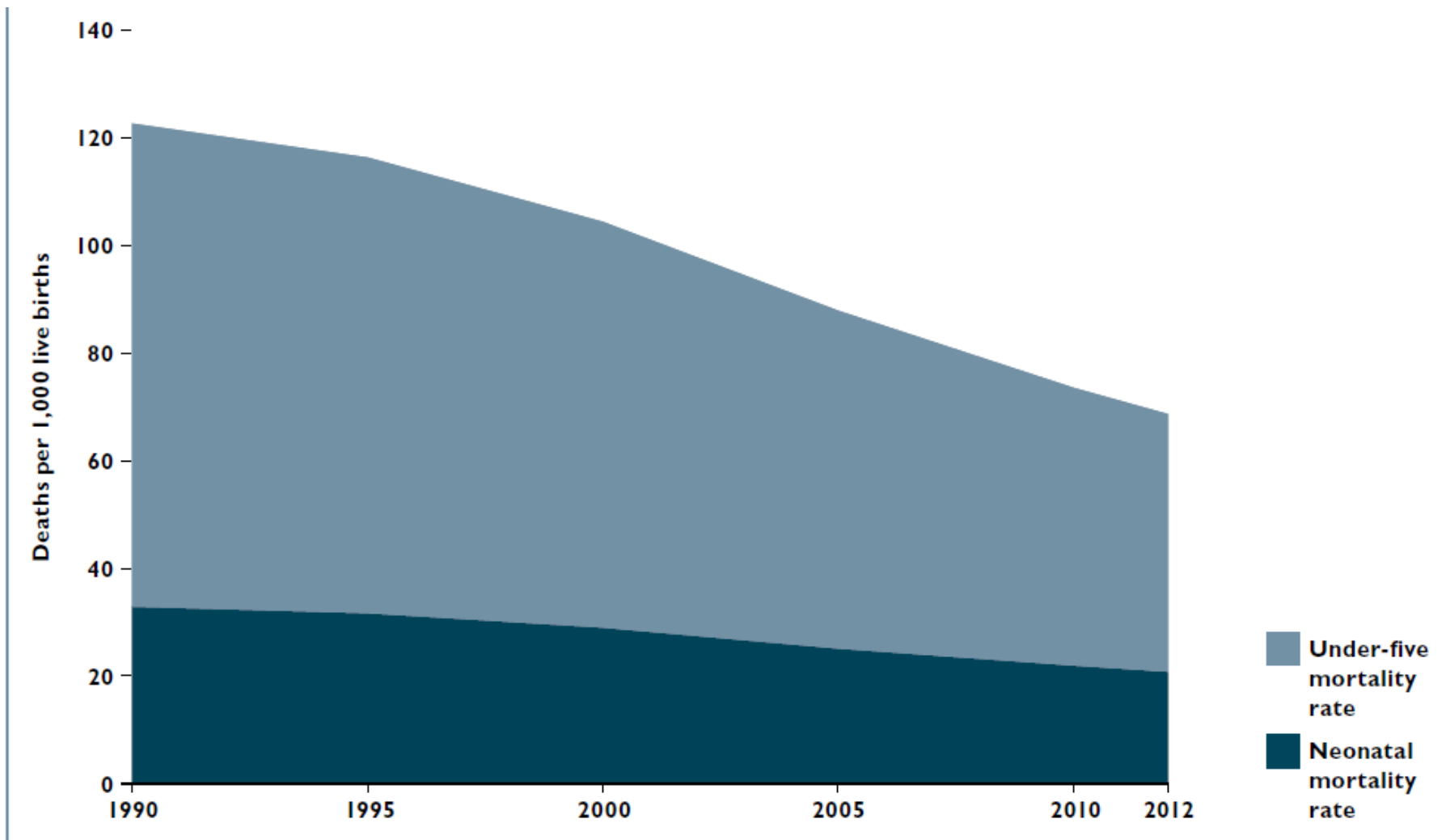




# Ending Newborn Deaths

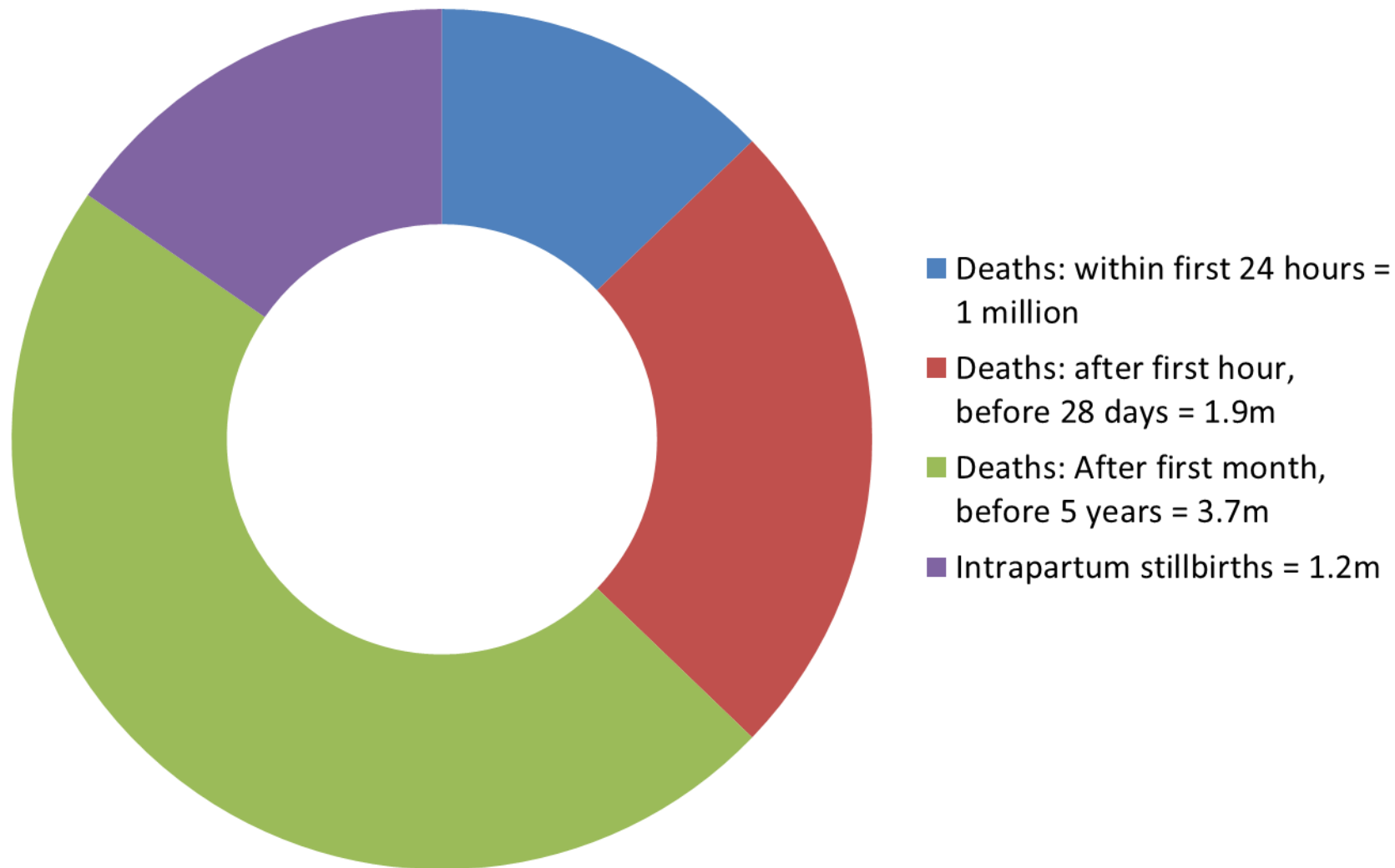
Ensuring every baby is born with quality healthcare

# Trends in under-5 and newborn mortality

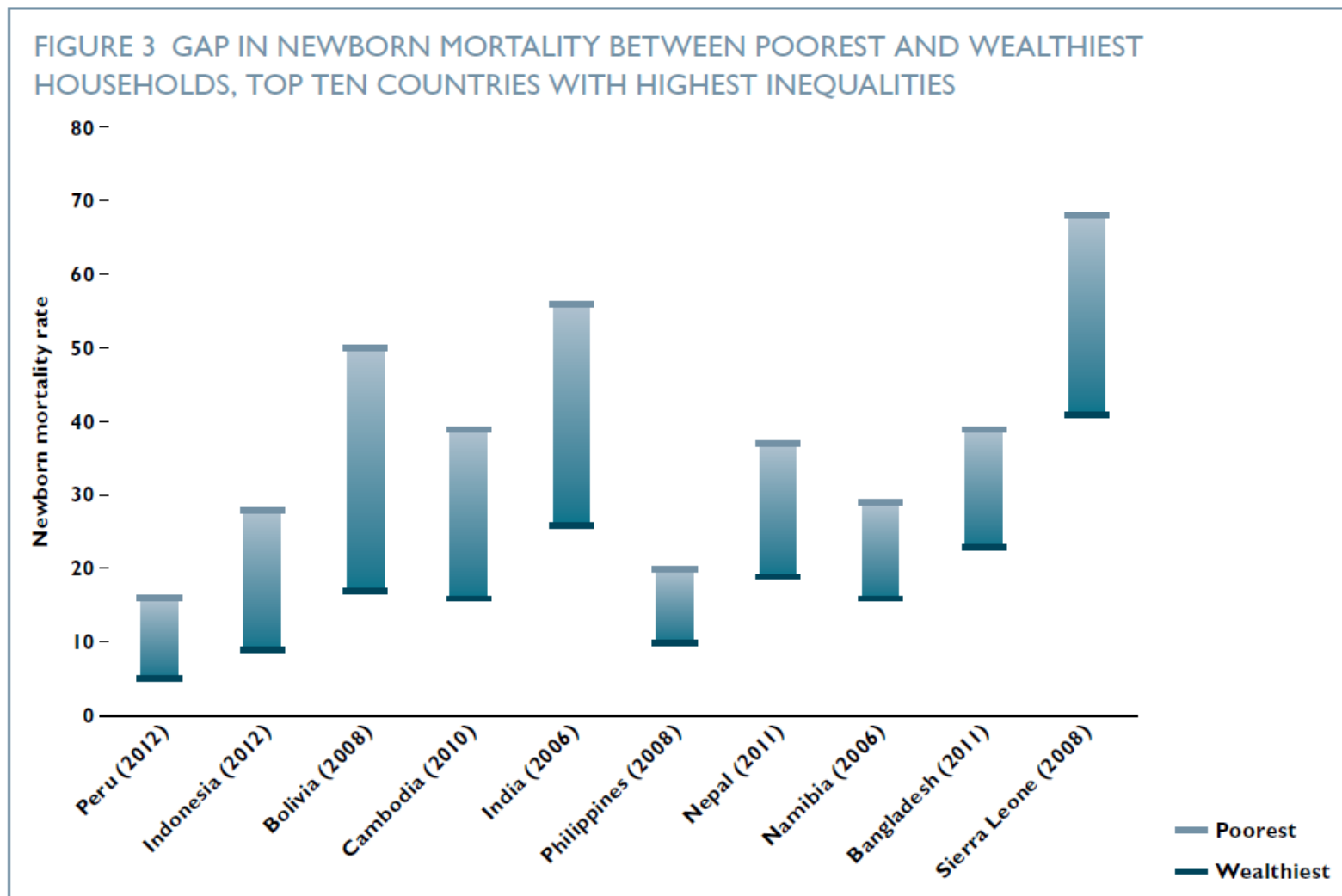


Source: WHO, Global Health Observatory

# Mortality and stillbirths during labour (2012)



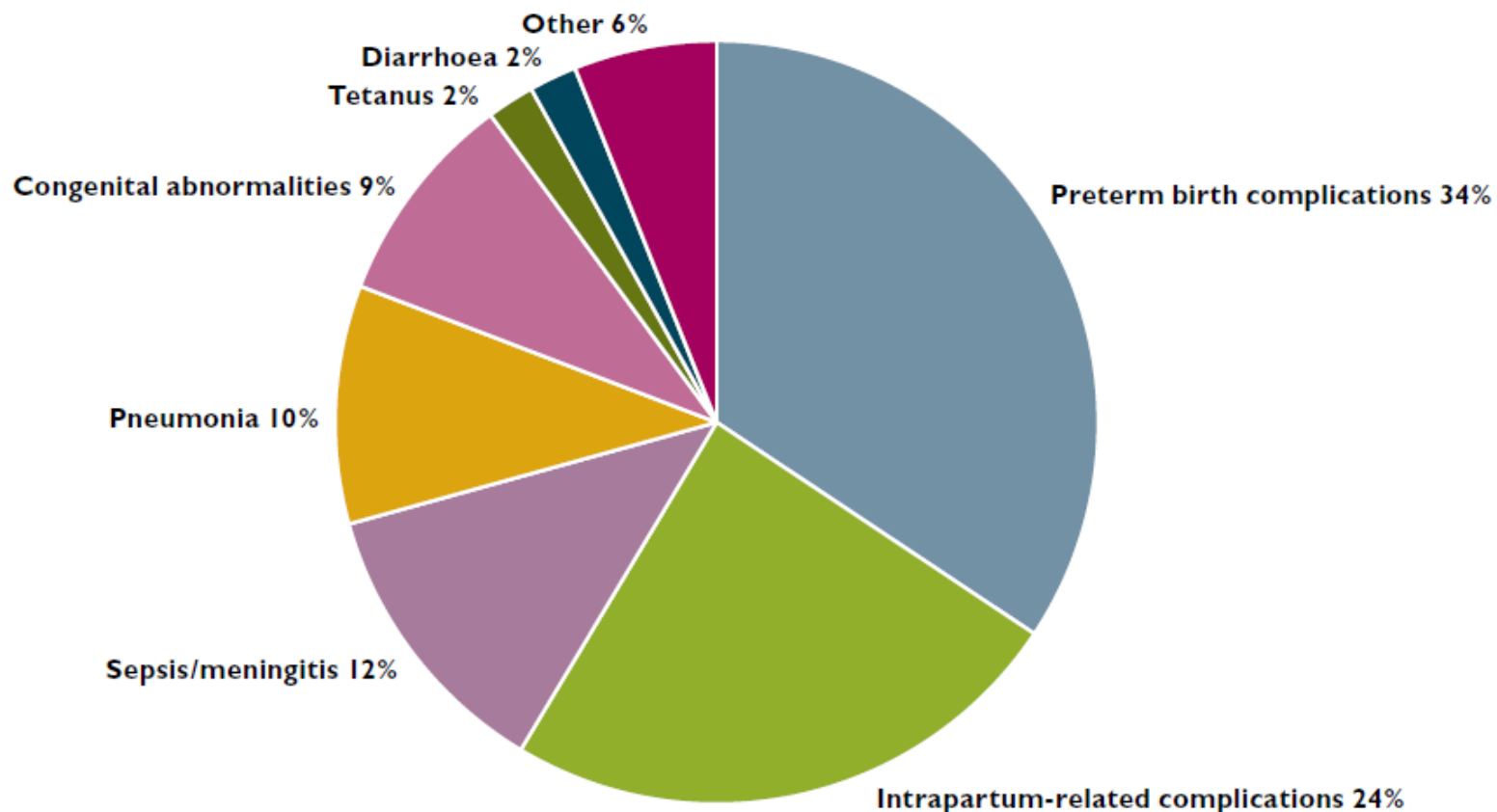
# Inequity of newborn mortality



Source: Save the Children analysis of most recent Demographic and Household Survey data (since 2005), for the ten countries with the highest ratios for newborn mortality between wealthiest and poorest households, by wealth quintile.

# Direct causes of newborn mortality

FIGURE 5 GLOBAL DISTRIBUTION OF NEONATAL DEATHS, BY CAUSE (2012)



Source: UNICEF, Committing to Child Survival: A promise renewed – progress report 2013

Note: Due to rounding percentages do not add up to 100.

# Other factors for newborn survival

- **Social determinants of health**
- **Economic status, employment, housing, water and sanitation**
- ***“This unequal distribution of health-damaging experiences is not in any sense a ‘natural’ phenomenon but is the result of a toxic combination of poor social policies and programmes, unfair economic arrangements, and bad politics.” Sir Michael Marmot, WHO Commission on the Social Determinants of Health, 2008***
- **Nutrition, age of mother, birth spacing**
- **Community action for newborn health**
- **Health services before and after birth.**



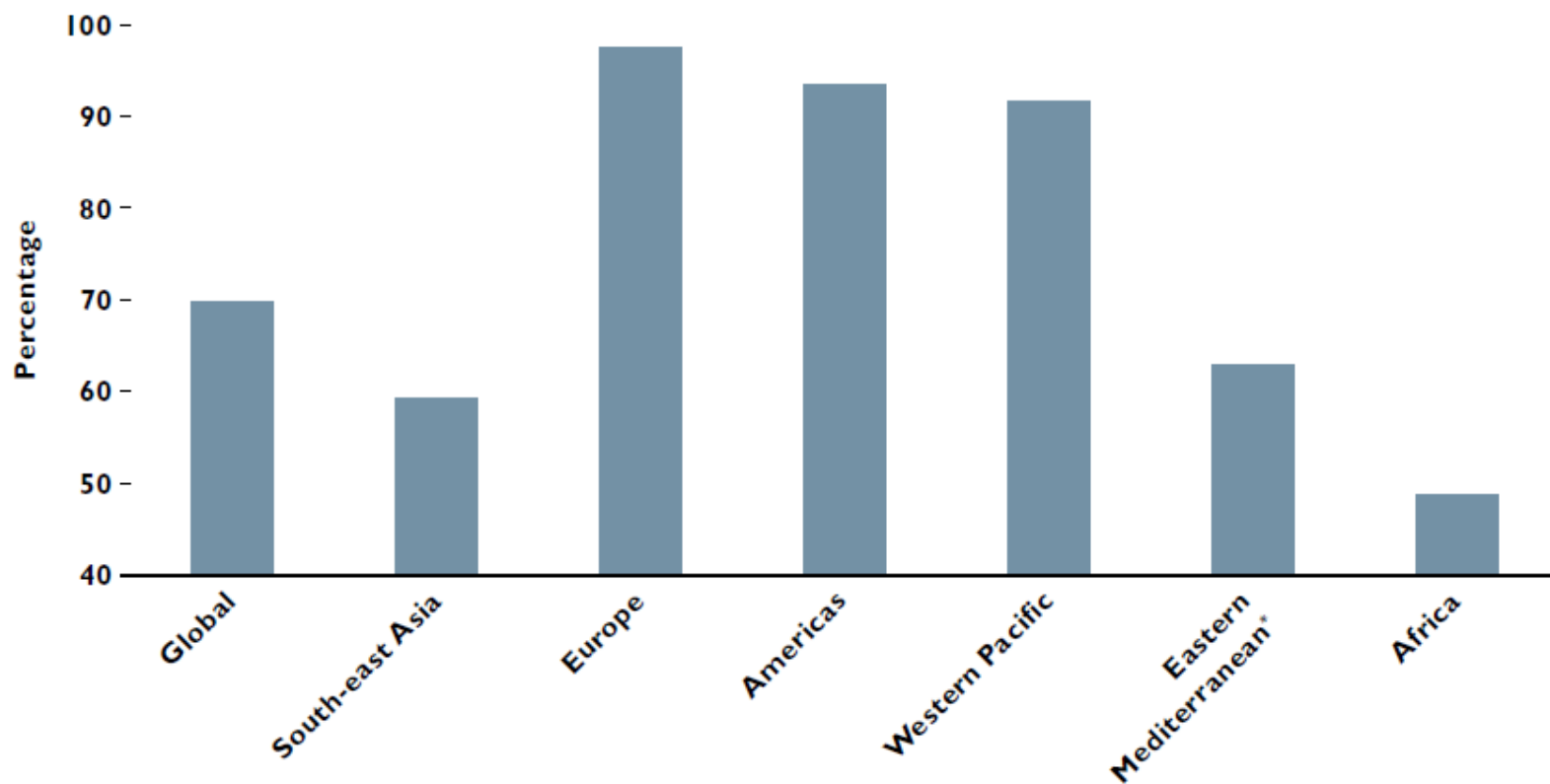


# Essential, health-worker interventions around birth

- 1 Skilled care at birth and emergency obstetric care (including assisted vaginal delivery and caesarean section if needed) ensuring timely care for women and babies with complications**
- 2 Management of preterm birth (including antenatal corticosteroids for mothers with threatened preterm labour to reduce breathing and other problems in preterm babies)**
- 3 Basic newborn care (focus on cleanliness including cord care, warmth, and support for immediate breastfeeding, recognition of danger signs and care seeking)**
- 4 Neonatal resuscitation for babies who do not breathe spontaneously at birth**
- 5 Kangaroo mother care (skin-to-skin, breastfeeding support especially for premature and small babies)**
- 6 Treatment of severe newborn infections (focus on early identification and use of antibiotics)**
- 7 Inpatient supportive care for sick and small newborns (focus on IV fluids/feeding support and safe oxygen use)**
- 8 Prevention of mother-to-child transmission of HIV (during pregnancy, labour and the immediate newborn period).**

# Regional inequities of skilled birth attendance

FIGURE 6 BIRTHS ATTENDED BY SKILLED HEALTH PERSONNEL (%), BY WHO REGION (2005–2012)



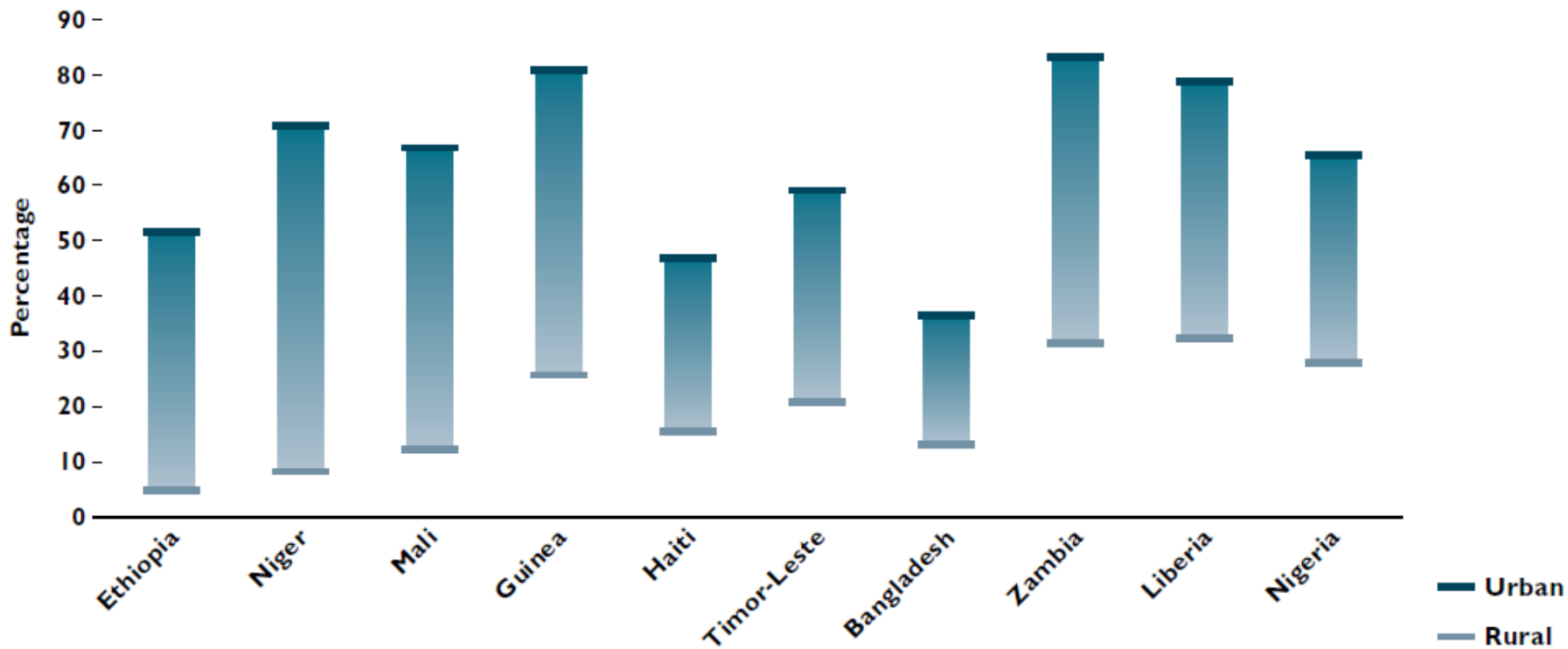
Source: WHO, Global Health Observatory

\* The 'eastern Mediterranean' region includes Somalia, Yemen, Afghanistan and Pakistan.



# Rural urban inequity in skilled birth attendance

FIGURE 9 GAP IN BIRTHS ATTENDED BY SKILLED HEALTH PERSONNEL (%) BETWEEN RURAL AND URBAN HOUSEHOLDS, TOP TEN COUNTRIES WITH HIGHEST INEQUALITIES



Source: Save the Children analysis of most recent DHS data (since 2005), for the ten countries with the highest ratios for SBA coverage between urban and rural households.

# Barriers to access

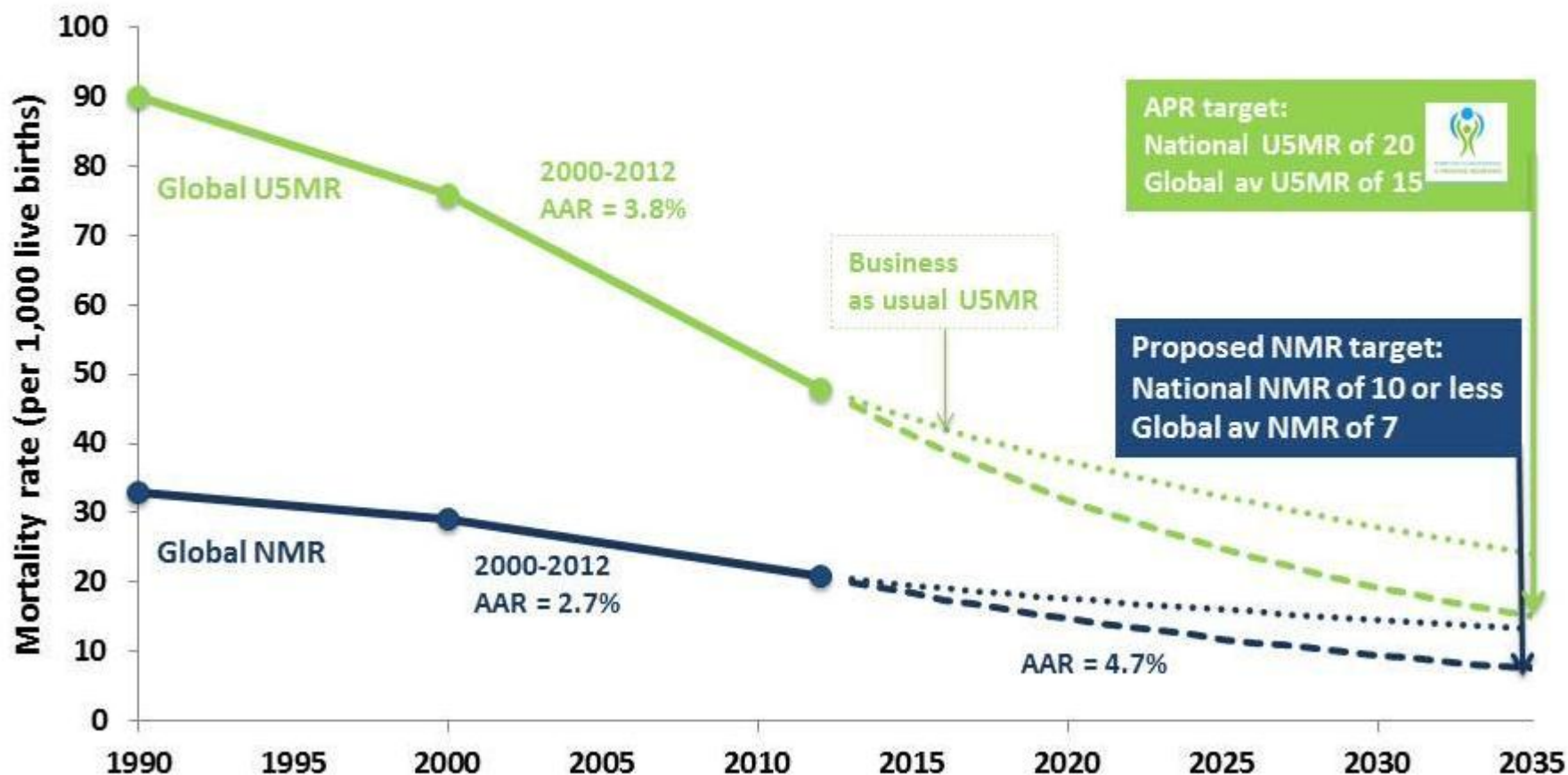
- **Private quality healthcare for those with money**
- **Underfunded public provision, poor quality private care – or nothing – for those without**
- **Users fees in public health service remain a barrier**
- **Lack of funding for public health services**



# Ending all preventable newborn deaths and intrapartum stillbirths

## Proposed neonatal mortality rate target for 2035

Linked to A Promise Renewed target for preventable child deaths



# Universal Health Coverage

- **UHC is top priority for the World Bank and World Health Organization**
- **Healthcare as a right, not a privilege**
- **Removal of users fees and reduction of out-of-pocket payments**
- **Raising and spending sufficient funds**
- **Large scale cross-subsidisation through tax or mandatory insurance.**



# The Newborn Promise

**Save the Children is calling on world leaders, philanthropists and the private sector – this year – to commit to a Newborn Promise to end all preventable newborn deaths:**

- 1. Governments and partners issue a defining and accountable declaration to end all preventable newborn mortality, saving 2 million newborn lives a year and stopping the 1.2 million stillbirths during labour**
- 2. Governments, with partners, must ensure that by 2025 every birth is attended by trained and equipped health workers who can deliver essential newborn health interventions**
- 3. Governments increase expenditure on health to at least the WHO minimum of US\$60 per capita to pay for the training, equipping and support of health workers**
- 4. Governments remove user fees for all maternal, newborn and child health services, including emergency obstetric care**
- 5. The private sector, including pharmaceutical companies, should help address unmet needs by developing innovative solutions and increasing availability for the poorest to new and existing products for maternal, newborn and child health.**



Please add your voice

