





Press Release

Preventing premature deaths requires promoting effective intervention to increase care seeking behaviour

Dhaka, 3 February 2021:

Over the past few decades, Bangladesh has made significant strides in reducing newborn death. The Bangladesh Demographic and Health Survey (BDHS) data showed a declining trend in newborn death until 2014. However, the last BDHS 2017-18 report alarmingly shows that the rate has bounced back. Per 1,000 live births, 30 newborn children die in Bangladesh. Of this number, a staggering 19% is accounted for by premature birth and low birth weight (LBW) combined.

Speakers discussed about the prematurity and LBW burden in Bangladesh, innovations and interventions to reduce the burden and importance of bringing positive changes in the mindset of the care seekers in an evidence sharing session with health bit reporters on February 3, 2021 at icddr,b in Mohakhali, Dhaka. The session was organised by USAID supported Research for Decision Makers (RDM) activity of icddr,b and Data for Impact (D4I) as part of an advocacy effort to sensitise and encourage journalists to report on ways to reduce preventable deaths among children.

Professor Mohammad Shahidullah, Chairman, National Technical Working Committee Neonatal Health; and Dr Sayed Rubayet, Country Director, Ipas Bangladesh attended the session as technical experts. Dr Ahmed Ehsanur Rahman, Associate Scientist of icddr,b made the keynote presentation. The session was chaired by Dr Shams El Arifeen, Senior Director, Maternal & Child Health Division (MCHD) of icddr,b. Fourteen health reporters from eminent media houses attended the session. Dr. Kanta Jamil, Senior Monitoring, Evaluation & Research, USAID/Bangladesh also attended the event.

Speakers informed that the premature birth entails both pre-term (children born before completing 37 weeks in mother's womb). Children born with below 2,500 gm weight are considered LBW. In Bangladesh, 573,000 babies are born premature and 834,000 babies are born with birth weight less than 2500 gm among which 192,000 babies are born with birth weight less than 2,000 gm. It is very unfortunate that about 17,100 newborn die every year from these two reasons combined in Bangladesh, of which 72% die even before completing the first day of their lives.

Of these 17,100 cases, 40% of their families do not seek health care in health facilities while43% of the deaths occur in health facilities. Lifesaving interventions such as Antenatal Corticosteroid (ACS), Kangaroo Mother Care (KMC) and the special care newborn unit (SCANU)are already proved to be very effective in preventing these untimely deaths. However, there are issues with readiness of health facilities regarding birth weighting practice which is mandatory for determining the LBW babies. As per BHFS 2017, only 69% DH and 65% UHC had availability of infant weighting scale. Only around 200 health facilities are providing KMC services throughout the country where a very few LBW babies receiving KMC services. In addition, the quality of KMC care has found sub optimum with a low







coverage of KMC follow up and a short average duration of stay. In 2020, only 5,731 babies received KMC service that is about 1% of the babies requiring the service.

Dr. Ehsan remarked that KMC, effective in preventing premature death, is considered an easy and low cost intervention. But it involves times and efforts from the families and health system to provide KMC to a child as it requires mother and baby's skin-to-skin contact for extensive hours and follow ups. Dr. Rubayet highlighted that life saving interventions can often be high cost but effective and KMC is one such example.

Speakers also stressed that in an ongoing pandemic like COVID-19, World Health Organization (WHO) stated that with specific precautions, KMC do not put babies into additional risk of getting infections. Hence, it is very important to give proper attention to make KMCs and other interventions available and to ensure their use by promoting their benefits to families to increase their care seeking behaviour.

It is imperative that Bangladesh strengthens its efforts in reducing newborn deaths to be on track to achieve Sustainable Development Goal (SDG) 3.2, which is ending all preventable under-five deaths by 2030.

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NOTES TO EDITORS

About RDM:

USAID's RDM Activity is a five year implementation research project, implemented by icddr,b, to increase the use of evidence-based research and policy analysis for health planning and decision making to support the effective implementation of the 4th Health, Population and Nutrition Sector Program (HPNSP) 2017-22 with an ultimate goal to improve the health status of Bangladeshi population.

About icddr,b:

icddr,b is an international public health research institution based in Bangladesh. Established in 1960, icddr,b has been at the forefront of discovering low cost solutions to key health challenges facing people living in poverty and provides robust evidence of their effectiveness at a large scale. Dedicated to saving lives through research and treatment, icddr,b addresses some of the most critical health concerns facing the world today.

About D4I:

Data for Impact (D4I), funded by the United States Agency for International Development (USAID) is an associate award of MEASURE Evaluation and continues its long legacy of building evidence to improve health systems and programs. D4I supports countries to generate and use high-quality data to improve their programs, policies and-ultimately-health outcomes. We also strengthen the technical and organizational capacity of local partners to collect, analyse, and use data to support their move to self reliance.