ENDING NEWBORN DEATHS

Ensuring every baby survives

EXECUTIVE SUMMARY

The world has made remarkable progress in the fight to end child mortality in recent years. Since 1990, we have almost halved the number of children who die every year before the age of five – from 12.6 million to 6.6 million.[1]

This amazing achievement – even more impressive given that the populations in the poorest countries have grown by 70% during this period[2] – allows us to start to imagine a world where no child is born to die from easily preventable causes.

And yet, in spite of this progress, child mortality remains one of the great shames of our modern world. Every day, 18,000 children under five die, and most from preventable causes.

NEWBORN CRISIS THREATENS PROGRESS

This reduction in child mortality has been achieved through action on immunisation, family planning, nutrition and treatment of childhood illnesses, as well as improving economies. However, far less attention has been paid to tackling the life-threatening dangers children face when they are newborn and most vulnerable – at birth and in their first month of life.

This report shows that, in 2012, 2.9 million babies died within 28 days of being born: two out of every five child deaths. Of these, 1 million babies died within 24 hours, their first – *and only* – day of life.[3] Causes of these deaths include premature birth, complications during birth and infections. This is heart-breaking and unacceptable.

Unless we urgently start to tackle deaths among newborn babies, there is a real danger that progress in reducing child deaths could stall and we will fail in our ambition to be the generation that can end all preventable child deaths.

This report also reveals that the crisis is much bigger than we might think. In 2012 there were another 1.2 million tragic losses: stillbirths where the heart stopped beating *during* labour. These are not part of the fourth UN Millennium Development goal, which aims to reduce child mortality by two-thirds. However, they deserve to be counted in future maternal, newborn and child health frameworks, especially to understand the specific risks around labour and delivery. This report therefore focuses on the 2.2 million combined newborn deaths on the first day and stillbirths during labour.

There's a huge amount at stake. As the 2015 deadline for the Millennium Development Goals approaches, it is vital that the world acts to make sure more countries can get on-track to achieve MDG4. It has now become clearer we won't be able to do this unless we urgently tackle the crisis of newborn deaths. We won't be able to go further and to talk about ending all preventable child deaths unless essential healthcare is the reality for every woman and baby.

Save the Children

THE CAUSE AND THE CURE

The causes of stillbirths, newborn and maternal deaths are closely related, and we know what needs to happen. The solution needs specific and urgent attention. The key way to stop newborn deaths is to ensure that essential care is provided around labour, delivery and immediately afterwards when the risks are greatest. That means having a skilled, well-equipped birth attendant available to assist women and newborns during delivery. While we focus on this, there are also tremendous opportunities to reduce maternal and newborn mortality and stillbirths through key interventions during pregnancy and in the later postnatal period.

In many cases, small but crucial interventions can save lives in danger. Skilled care during labour could reduce the number of stillbirths during labour by 45% and prevent 43% of newborn deaths.[4] This report identifies the essential interventions around birth – including treatment of severe infections and special support for premature babies – which must be made universally available to reduce mortality. Around 10% of all newborns in every country need assistance to begin breathing.

PHOTO: SUZANNE LEE/SAVE THE CHILDREN

Newborn baby Pushpa, Nepal.

40 million mothers still give birth each year without any help from a midwife or another health worker trained and equipped to save the life of the baby or the mother.[5] Many babies die each year because mothers do not get the good-quality care they need during labour and birth. Many of the women least likely to be able to get life-saving help when they give birth are those who are most at risk of losing their babies – women from the poorest communities, from rural areas, from a minority ethnic group or with little education. Despite global commitments to the universal right to survival and healthcare, in many countries the poorest families are twice as likely to lose a baby as the richest families.

Substantial reforms are needed to ensure the poorest and hardest-to-reach communities are able to access proper care at birth. This not only includes the removal of user fees – direct cash payments for maternal, newborn and child health services – which deny mothers and babies the healthcare they need because the family cannot afford them. It also means ensuring public health services are not starved of funding and that there are enough skilled healthworkers in places they are needed.

Research commissioned for this report estimates that fairer distribution of essential health services in 47 key countries could prevent the deaths of 950,000 newborns – reducing newborn mortality in these countries by 38%.

2014: THE OPPORTUNITY FOR LIFE-SAVING CHANGE

2014 will be a crucial year. Political support for universal health coverage – the availability of a basic package of healthcare for everyone, a package which countries can increase as resources increase – is growing around the world. The best place to start is by ensuring that no family, however poor, is denied life-saving care at birth.

And for the first time ever, countries and institutions around the world will sit down to agree an 'Every Newborn Action Plan', an agreement to tackle this deplorable problem of lack of attention to babies in their first days of life. Save the Children is working to ensure that this plan is ambitious and robust enough to end all preventable newborn deaths as well as tackle stillbirths during labour.

However, a plan on paper is not enough. It must be followed by concerted political action at the highest levels to achieve its implementation. Stopping newborns dying unnecessarily and preventing stillbirths, and hugely accelerating progress towards ending child and maternal mortality, will require a substantial change in our approach to health services.

This change must happen in the countries where child mortality rates are high, in partnership with donors and other stakeholders. We need a new sense of purpose from the global community. The world must not squander the opportunity that 2014 offers.

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:

- 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[6]
- 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
- 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
- Governments remove user fees for all maternal, newborn and child health services, including emergency obstetric care
- 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.

END ALL PREVENTABLE DEATHS

We must be clear: newborn deaths are not inevitable. Most are easily avoided if the simplest of interventions are made available to all. Systemic change is needed from governments, donors and health professionals. This year, 2014, offers an unprecedented opportunity to focus on this topic and set in motion the revolutions needed.

Together, we can ensure that no baby is born to die.

ENDNOTES

[1] United Nations Inter-agency Group for Child Mortality Estimation. *Levels and trends in child mortality: Report 2013*. New York, USA: UNICEF, 2013. http://www.childinfo.org/files/Child_Mortality_Report_2013.pdf

[2] This is based on population growth in the least developed countries, which increased from 509,354,000 in 1990 to 878,097,000 in 2012. Reference: United Nations, Department of Economic and Social Affairs, Population Division. *World Population Prospects: The 2012 Revision*. New York: United Nations, 2013. http://esa.un.org/wpp/Documentation/publications.htm

[3] Intrapartum stillbirth rate is based on: Lawn JE et al, Stillbirths: Where? When? Why? How to make the data count? *Lancet*, Volume 377, Issue 9775, Pages 1448–63, 23 April 2011. Total number of intrapartum stillbirths is updated to 2012 using live births and total births from UN Pop Div latest estimates.

[4] Pattinson R, Kerber K, Buchmann E, et al. Stillbirths: how can health systems deliver for mothers and babies? *Lancet* 2011; 377: 1610–23.

[5] Calculated as the number of live births not attended by skilled health personnel. Skilled birth attendant coverage based on data from the WHO Global Health Observatory Data Repository: http://apps.who.int/gho/data/node.main (accessed 20 December 2013). Number of live births based on data from State of the World's Children statistics: http://www.unicef.org/sowc2013/statistics.html (accessed 20 December 2013).

[6] The Every Newborn Action Plan target is for a two-thirds reduction in the newborn mortality rate, which would result in a 2035 global NMR of 7 per 1,000 live births. This rate is similar to the highest NMR within the OECD countries and may be taken as a proxy for ending all preventable newborn deaths. If the target of 7/1000 had applied to the 2012 NMR (20.8/1000 which resulted in 2.9 million newborn deaths), approximately 2 million lives would have been saved.

Save the Children works in more than 120 countries. We save children's lives. We fight for their rights. We help them achieve their potential.

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