

Situation of new born Health in Uganda

Dr G. K. Mukasa

Chairman, National Newborn Steering Committee

Executive Director, IBFAN Uganda

Global Progress to MDG 4

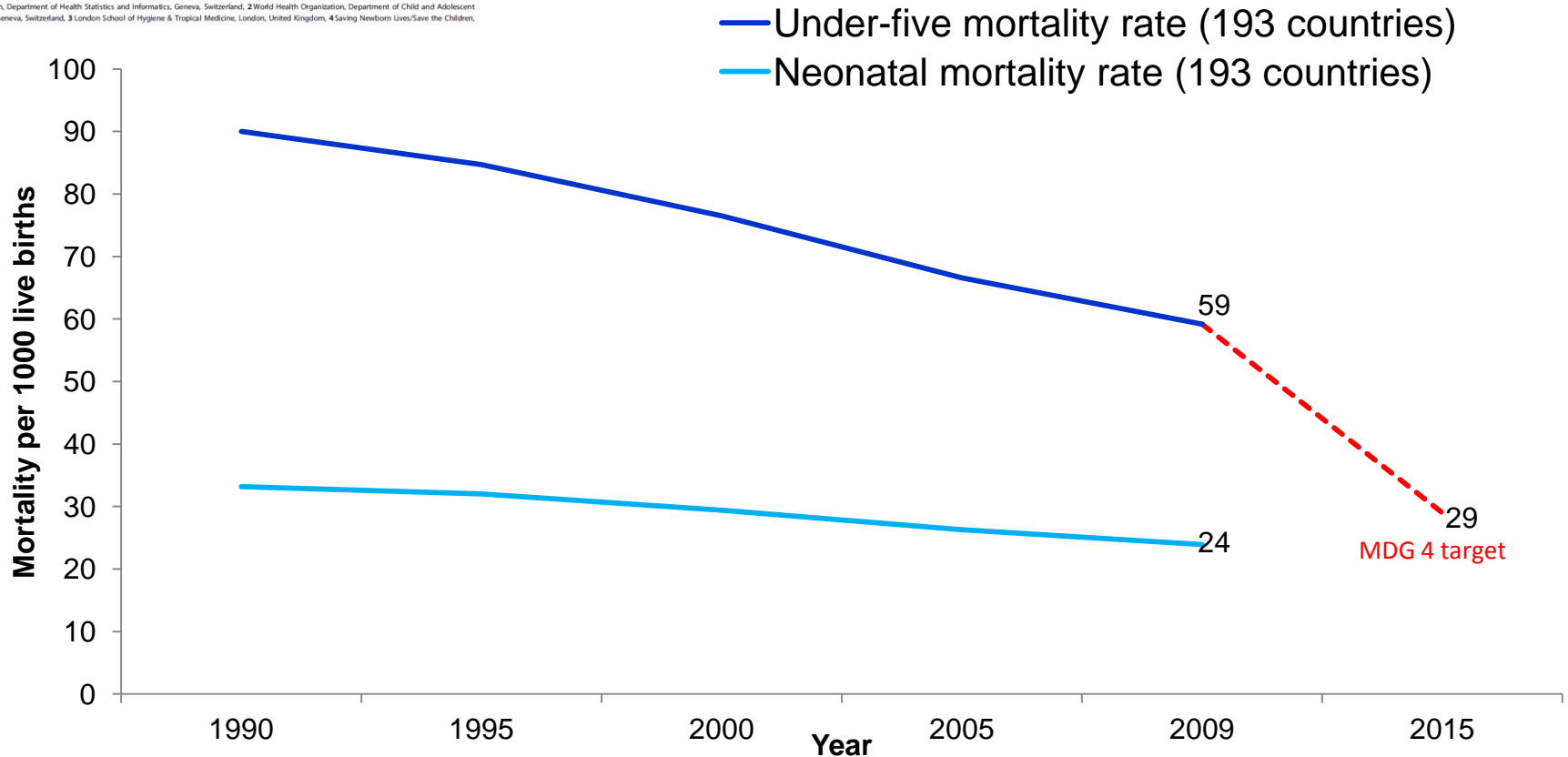
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PLOS MEDICINE

Neonatal Mortality Levels for 193 Countries in 2009 with Trends since 1990: A Systematic Analysis of Progress, Projections, and Priorities

Mikkel Zahle Oestergaard^{1*}, Mie Inoue¹, Sachiyo Yoshida², Wahyu Retno Mahanani¹, Fiona M. Gore¹, Simon Cousens³, Joy E. Lawn⁴, Colin Douglas Mathers¹, on behalf of the United Nations Inter-agency Group for Child Mortality Estimation and the Child Health Epidemiology Reference Group

¹World Health Organization, Department of Health Statistics and Informatics, Geneva, Switzerland, ²World Health Organization, Department of Child and Adolescent Health and Development, Geneva, Switzerland, ³London School of Hygiene & Tropical Medicine, London, United Kingdom, ⁴Saving Newborn Lives/Save the Children, Cape Town, South Africa



3.3 million neonatal deaths, 41% under-five deaths
Closely linked to maternal health and MDG 5

DRAFT IN PROGRESS – preliminary work for HPP neonatal supplement

Data sources: U5MR (UN): www.childinfo.org/ / www.childmortality.org and NMR (UN): Oestergaard et al 2011 PLoS

Regional NMR average annual rate change

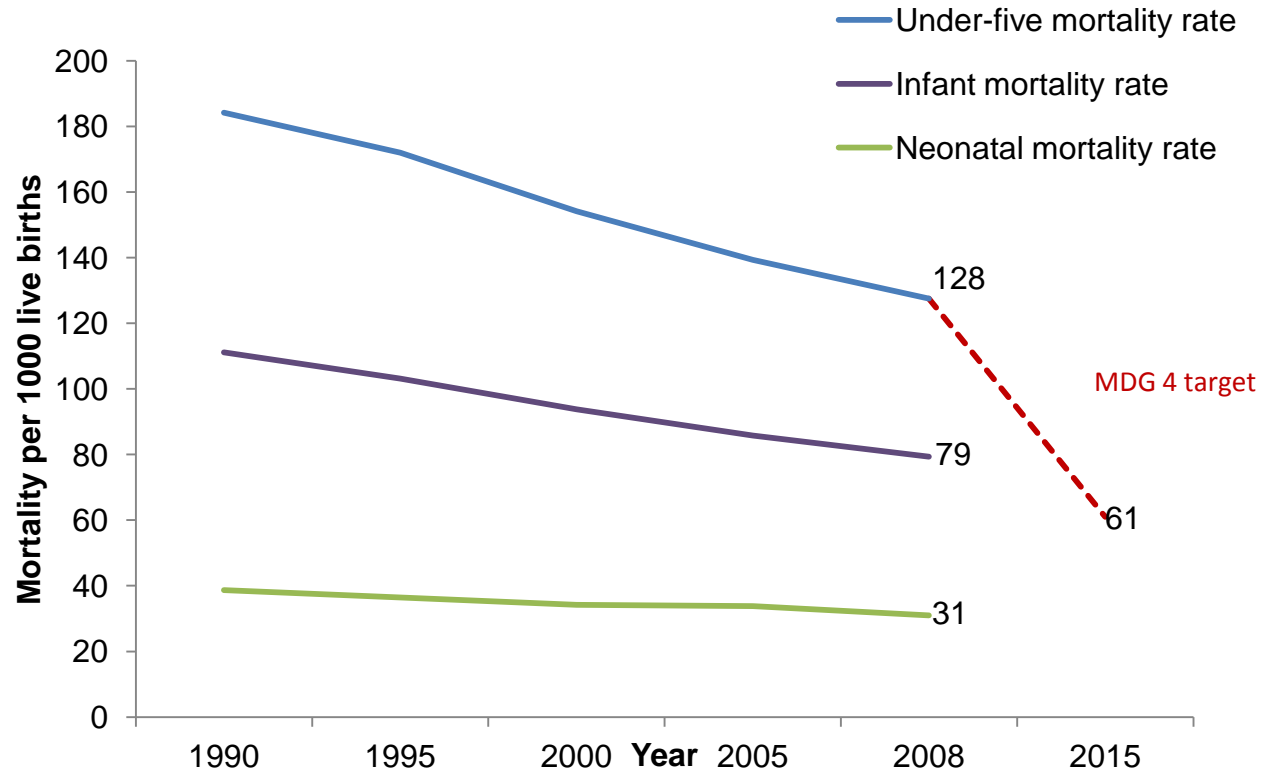
REGION	Percent annual change 1990-2009
Global	1.7%
Africa	1%
Americas	3.4%
Eastern Mediterranean	1.5%
Europe	3.5%
Southeast Asia	2.2%
Western Pacific	3.3%

Global average annual rate reduction

NMR 1.7

MMR = 2.3%

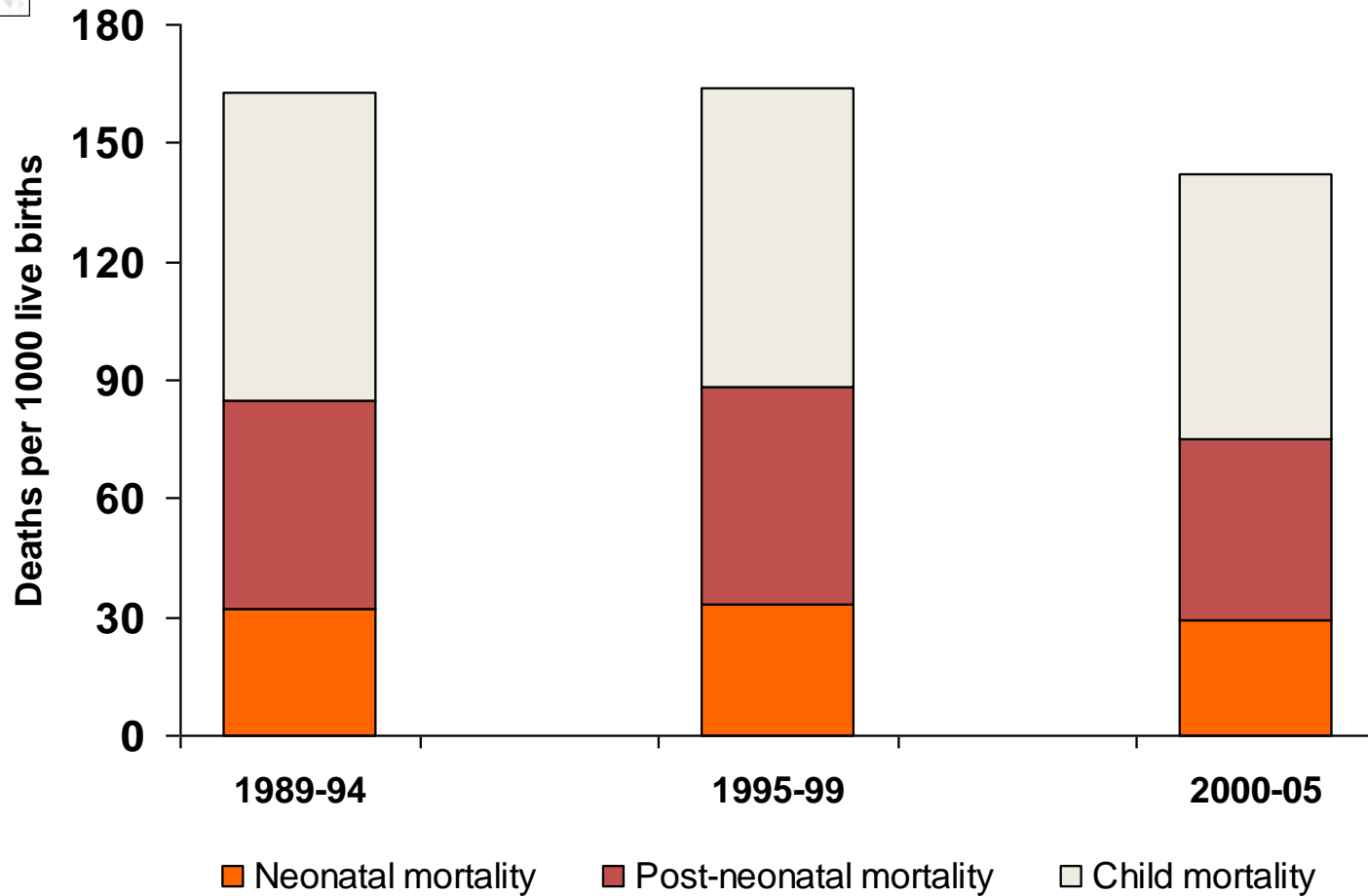
MDG 4 progress for newborn and child survival in Uganda



- There is slow/insufficient progress. 2011 UDHS: NMR=27
- NMR has not followed the same pattern as U5MR. NMR is stagnant while U5 is slowly declining.



Trends in neonatal, child and infant mortality have not changed much!



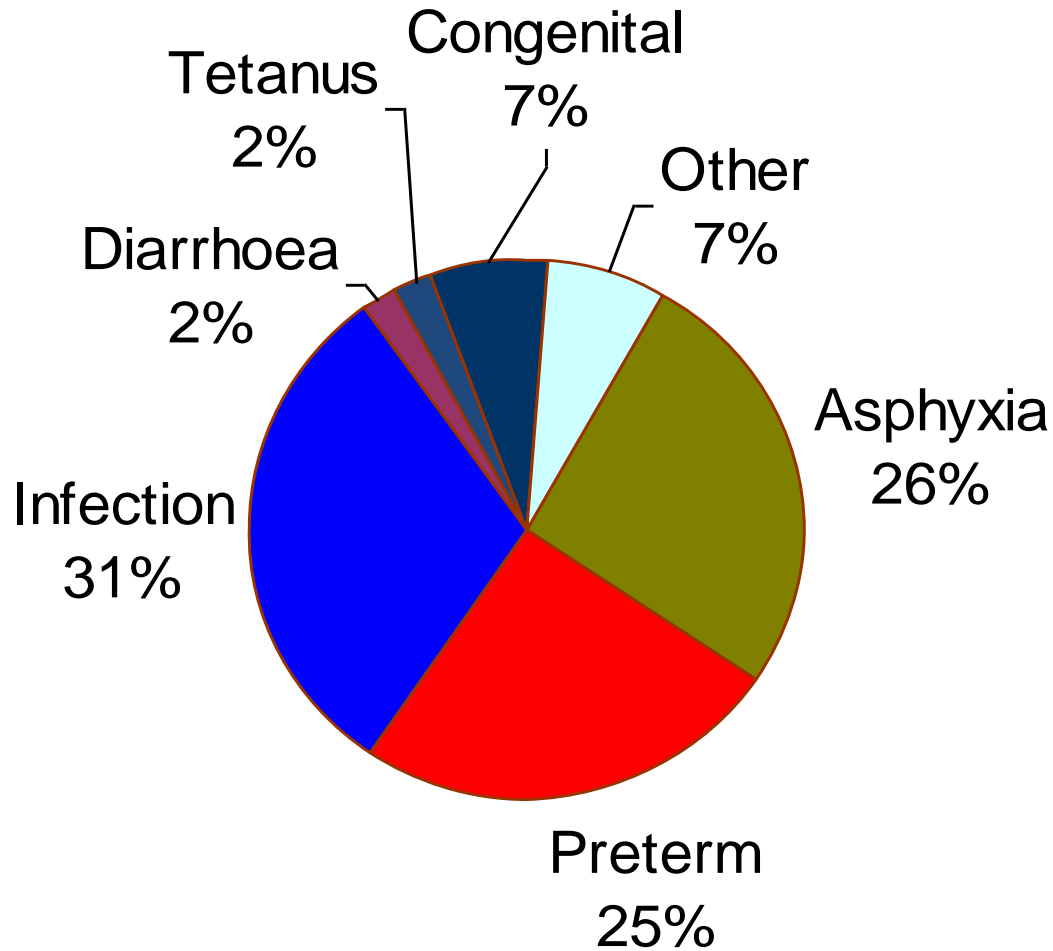


Newborn deaths: How many?

- Neonatal Mortality Rate of 27/1000 live births
 - 39,000 deaths every year
 - 108 deaths every day
- Stillbirths account for similar numbers
- This NMR accounts for a third of all infant deaths and 22% of deaths of children aged below five years



Newborn deaths: why?



Uganda neonatal cause of death changes

	2000	2005	2008
Infection	26%	31%	27%
Preterm	25%	25%	30%
Asphyxia (intrapartum-related)	27%	26%	28%

Source:

2000: Lawn JE et al. Int J Epidemiol. 2006.

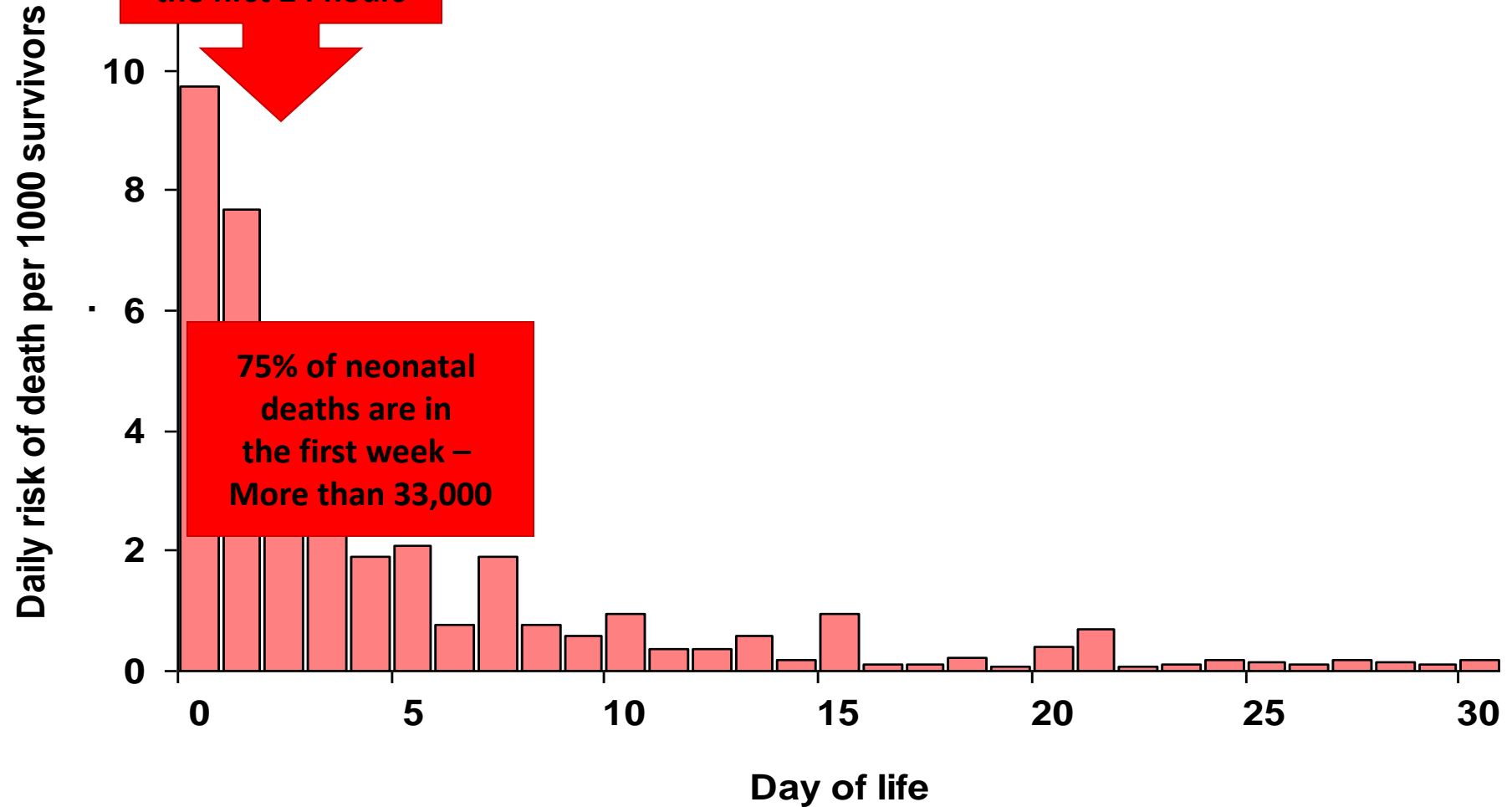
2005: Lawn JE, Cousens SN, for the CHERG Neonatal Group. Updated for 2005 with latest covariate data (Nov 2006).

2008: CHERG/WHO from Black et al. Lancet 2010.

Newborn deaths: when?



Up to 50%
of neonatal
deaths are in
the first 24 hours



75% of neonatal
deaths are in
the first week –
More than 33,000



Proven interventions to reduce newborn deaths

Preconception	Folic acid, birth spacing
Pregnancy	TT2+; syphilis screening and mx; PMTCT; calcium supplementation; IPTp; bacteriuria mx
Intrapartum	Antibiotics for preterm premature rupture of membranes; corticosteroids for preterm labour; caesarian section; use of partograph; clean delivery practices; PMTCT
Postnatal	Newborn resuscitation; immediate and exclusive breastfeeding; thermal care; KMC; community-based pneumonia case management

WHY NO CHANGE

- *Until recently, there was no evidence on the status of newborn health in Uganda: not until the first SITAN at the end of 2008*
- *There were no clear strategies for addressing newborn health issues in Uganda*
- *Where interventions had been introduced, the coverage remained very low*
- *Absence of champions to advocate for NBH*

BUT CHANGE IS COMING

- Formation of National Newborn Steering Committee in 2006 to help drive the newborn agenda
- Because the NNSC has drawn everyone's attention to newborn survival, this has led to rapid change in policies and programmes addressing the plight of the newborn
- But intervention coverage increases arising from these changes have yet to be seen

National Newborn Care Service Delivery Standards



Ministry of Health - Uganda



Newborn Implementation Framework

STANDARDS FOR NEWBORN HEALTH CARE SERVICES

April 2010

FUTURE for newborn survival in Uganda

- Sustained advocacy for use of globally available evidence-based high impact newborn interventions
- Extra efforts need to be invested in the promotion of use and implementation of the proposed interventions.
- All the set strategies, policies and standards should be translated into action by all implementing agencies and the government at all levels.
- Research to determine impact of the current strategies and service packages should be conducted in a bid to have the best outcomes of our packages and set priorities.

END