

Restoring the joys of motherhood and childhood Ending preventable child and maternal deaths

Overview

Maternal mortality continues to be unacceptably high with approximately 287,000 women dying during and following pregnancy and childbirth in 2020. Almost 95% of all maternal deaths occurred in low and lower middle-income countries in 2020, and most could have been prevented. Women die because of complications during and following pregnancy and childbirth. Most of these complications develop during pregnancy and most are preventable or treatable. Other complications may exist before pregnancy but are worsened during pregnancy, especially if not managed as part of the woman's care.



75% of all maternal deaths are caused by:

World Vision is determined to end these needless tragedies. We seek God's vision of fullness of life for every child and believe all mothers and their babies deserve to have the basic information, medical support, and care needed to ensure safe deliveries and protection from preventable diseases. By working hand-in-hand with communities, we are advancing healthcare for families in the world's most remote areas.

Several high-impact interventions have been identified in the field of Maternal, Newborn, and Child Health (MNCH) that significantly improve health outcomes for mothers, newborns, and children. The selection of interventions may vary depending on the context and specific health challenges of a given population.

Key high-impact interventions:

1. Antenatal Care (ANC): Antenatal care (ANC) is the care of the woman during pregnancy. Early and regular antenatal care visits enable healthcare providers to monitor the health of pregnant women, detect and manage complications, and provide essential information on nutrition, safe delivery, and postpartum care. The primary aim of ANC is to protect the health of women and their unborn babies during pregnancy to achieve a healthy birth for mother and child.

2. Skilled Attendance at Birth: Ensuring that skilled healthcare professionals attend deliveries is crucial for preventing and managing complications during childbirth, reducing maternal and newborn mortality. All women should have access to skilled care during pregnancy and at delivery, to ensure the detection and management of complications. One woman dies needlessly of pregnancy-related causes every two minutes, representing over half a million mothers lost each year, a figure that has improved little over recent decades. Another 8 million or more women experience lifelong health consequences from the complications of pregnancy.¹

3. Postnatal Care (PNC): The days and weeks following childbirth—the postnatal period—are a critical phase in the lives of mothers and newborn babies. Most maternal and infant deaths occur in the first month after birth: almost half of postnatal maternal deaths occur within the first 24 hours, and 66% occur during the first week. Globally, 2.4 million newborns died in their first month of life in 2020—1 million of these newborns died on the first day. Postnatal care for mothers and newborns helps detect and address potential health issues after childbirth, promotes breastfeeding, and provides guidance on newborn care.²

4. Immunization: Immunity is the body's way of preventing disease. Because a baby's immune system is not fully developed at birth, babies face a greater risk of becoming infected with diseases and getting seriously ill. Vaccination against preventable diseases significantly reduces childhood morbidity and mortality. Immunization campaigns target diseases such as measles, polio, whooping cough, and tetanus.³



USAID impact

In their efforts to prevent maternal and child deaths, USAID created the prevention of maternal and child death framework which focuses on key high impact interventions. Every year, USAID delivers essential, lifesaving care for children and women. In 2022, USAID:

- Supported 11 million newborns with postnatal care within two days of birth.
- Enabled 9 million infants to receive their first dose of the measles vaccine.
- Resuscitated 247,000 newborns who were not breathing at birth.
- Counseled 4.6 million women on maternal and child nutrition.
- Reached 31.6 million children under age five with nutrition programs.
- Helped 11.6 million women to give birth in facilities receiving U.S. government support.⁴

5. *Family Planning Services:* Unfortunately, lack of knowledge about the benefits of timing and spacing pregnancies and lack of family planning services can lead to poor health and even death for moms and babies. Investments in family planning support outcomes such as improving nutrition for moms and children, preventing child marriage, combating gender-based violence, improving girls' education, and strengthening household incomes. Access to family planning services empowers couples to make informed decisions about the timing and spacing of pregnancies, contributing to improvements in maternal and child health.

Key interventions continued:

6. Nutrition Interventions: Adequate nutrition during pregnancy and the early years of life is critical. When a mother is undernourished in the first 1,000 days, from the start of her pregnancy until her child's second birthday, her own nutritional health is not the only health at stake. Any complications brought on by low nutrition during pregnancy, such as anemia, hypertension, miscarriages, premature delivery, or maternal death, will affect her child as well. Many children born to mothers who are undernourished will likely grow up stunted or with malnutrition themselves.

Malnutrition is linked to multiple underlying vulnerabilities such as widespread household food insecurity, inadequate dietary and care practices for infants and young children, high incidence of childhood illnesses, widespread poverty, inadequate access to water and sanitation and health services, as well as gender and other social norms. Nutrition interventions include promoting breastfeeding, providing nutritional supplements, and addressing malnutrition through therapeutic feeding.⁵

7. *Skilled Care for Sick Children:* Ensuring access to skilled healthcare providers for sick children helps in the early diagnosis and management of illnesses, reducing child mortality. Preterm birth, intrapartum-related complications (birth asphyxia or lack of breathing at birth), infections and birth defects caused most neonatal deaths in 2019. From the end of the neonatal period and through the first 5 years of life, the main causes of death are pneumonia, diarrhea, birth defects and malaria. Malnutrition is a significant contributing factor, making children more vulnerable to severe diseases.

Key facts

- Although the global number of newborns deaths declined from 5 million in 1990 to 2.4 million in 2019, children face the greatest risk of death in their first 28 days.
- In 2019, 47% of all under-5 deaths occurred in the newborn period with about one third dying on the day of birth and close to three quarters dying within the first week of life.
- Women who receive midwife-led continuity of care (MLCC) provided by professional midwives, educated and regulated to international standards, are 16% less likely to lose their baby and 24% less likely to experience pre-term birth.⁶

Lifesaving Work in Sudan



Due to lack of medical facilities, it was not uncommon for women to give birth at home in the Al-Munjar village, of East Darfur in Sudan. Residents had to travel 13 kilometers to health facilities in another location to access medical care.

With support from USAID's Bureau for Humanitarian Assistance (BHA), in August 2022 World Vision Sudan started implementing a health and nutrition project in six localities in East Darfur to improve access to quality health and nutrition services. A health facility was reopened and improved, with updated medical equipment and medical staff. Community midwives also work with new mothers after they have given birth to ensure mother and baby are healthy and thriving.

WORLD VISION FOCUSES ON THREE ESSENTIAL OUTCOMES FOR CHILD WELL-BEING.

- 1 Mothers and children **are well-nourished**.
 - 2 Mothers and children are protected from infection and disease.

3

Mothers and children have access to essential health services.



Community Health Workers (CHWs)

Community health workers (CHWs) are health care providers who live in the community they serve and receive lower levels of formal education and training than professional health care workers such as nurses and doctors. Training and deploying community health workers can improve access to healthcare services in remote or underserved areas, particularly for maternal and child health. They are vital in extending the reach of formal health systems and often work as volunteers, without any formal compensation. They are neighbors, trusted care providers, and community members themselves. The data and contextual insights that community health workers collect and use are the key to designing resilient health systems.

Key interventions continued:

8. Water, Sanitation, and Hygiene (WASH) Initiatives:

Improving access to clean water, sanitation facilities, and promoting good hygiene practices contributes to reducing the burden of waterborne diseases and improving overall health. WASH in healthcare facilities (including simple things like handwashing with soap) is necessary to ensure good health outcomes, including reducing preventable maternal, newborn and child deaths and reducing the spread of infectious diseases such as cholera, diarrhea, and sepsis.

Key Facts

- Infections associated with unclean births account for 26% of neonatal deaths and 11% of maternal deaths; together they account for more than 1 million deaths each year.
- An estimated 857 million people use healthcare facilities with no water service, and 780 million use facilities with no sanitation service.^{$\frac{1}{2}$}

World Vision is the world's largest non-governmental provider of clean water.

> 3 million new people reached with clean water last year.

9. Malaria Prevention and Treatment: Malaria is a lifethreatening disease spread to humans by mosquitoes. It is mostly found in tropical countries and is preventable and curable. Malaria during pregnancy is a major cause of maternal morbidity and leads to poor birth outcomes. Pregnant women are more prone to complications of malaria infection than nonpregnant women. Prevention involves simple interventions such as sleeping under a treated bed net or ensuring a home is free of standing water where mosquitos can gather. Progress has also been made in the development of a malaria vaccine.

References

1. Maternal and Child Health and Nutrition Program Progress and Results (usaid.gov)

- 2. A woman dies every two minutes due to pregnancy or childbirth: UN agencies (who.int)
- 3. Newborn Mortality (who.int)

4. Deciding to Vaccinate Your Child: Common Concerns (CDC.gov)

5. What is stunting? (concernusa.org)

- 6. Newborns: improving survival and well-being (who.int)
- 7. Healthcare facilities without water (who.int)

World Vision worldvisionadvocacy.org



World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. We serve all people, regardless of religion, race, ethnicity, or gender. © 2024 World Vision, Inc.

Kasapo Chibwe Policy Advisor | Global Health World Vision U.S. kchibwe@worldvision.org

World Vision 300 I Street NE Washington, DC 20002