



24/7 Normal Delivery Care for All Mothers



Directorate General of Family Planning



Context and problem statement



We have made commitments

By 2030

SBA delivery increased:
to 98% (current 43%)

4 ANC by MTP increased:
to 98% (current 31%)

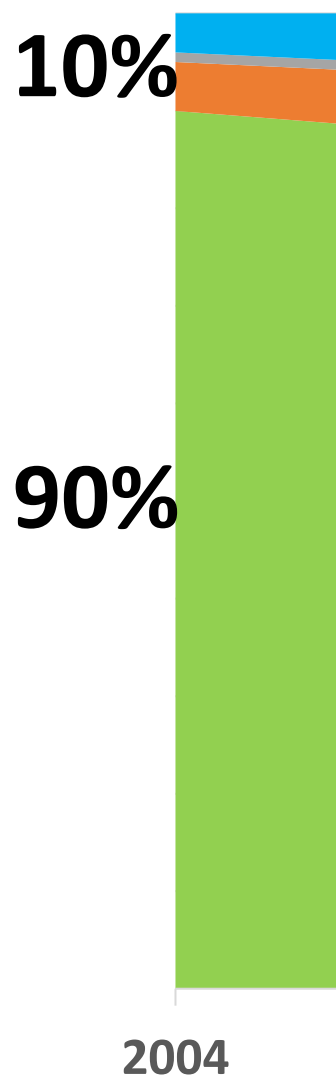
MMR reduced:
to 59/100000 LB (current
176)



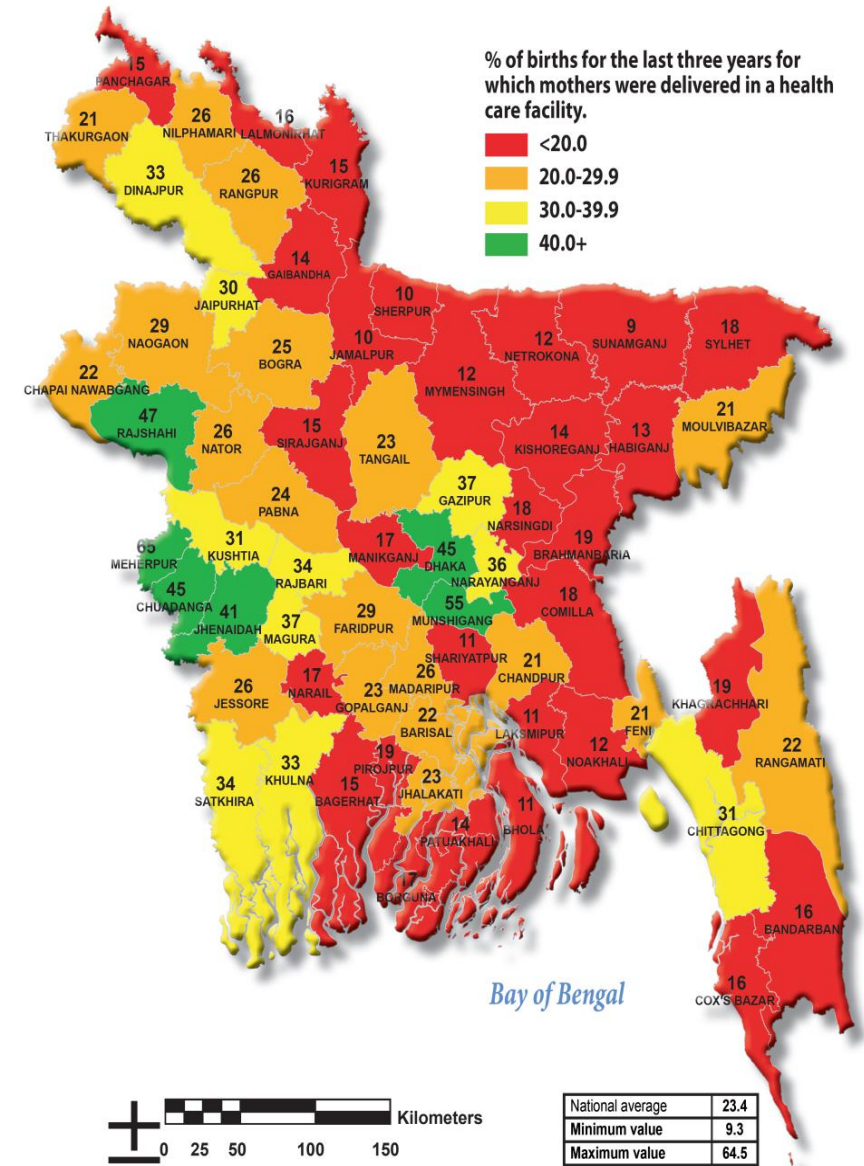
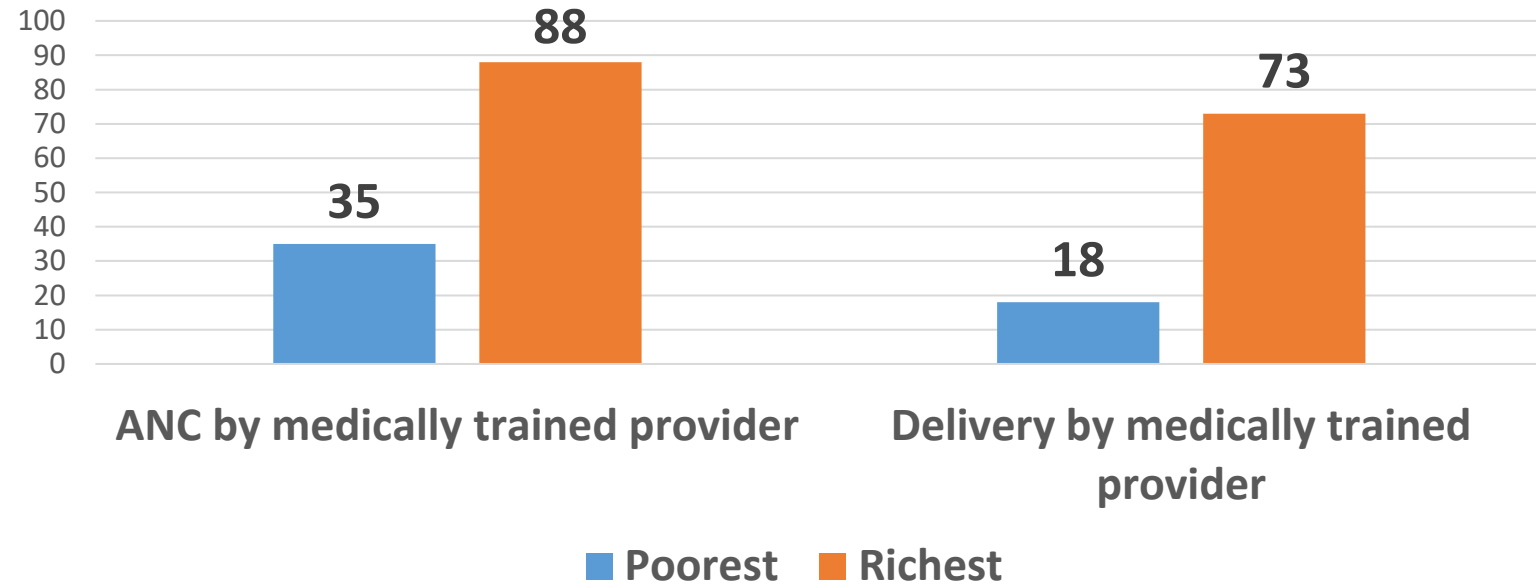
Attempts to reach home deliveries with skilled care have failed

- 1979-94: TBA Training - ~60,000 trained
 - **Coverage: 16.7%**
- 2003-on-going: CSBA Training – ~10,000 trained
 - **Coverage: <1%**

Shift to facility has begun



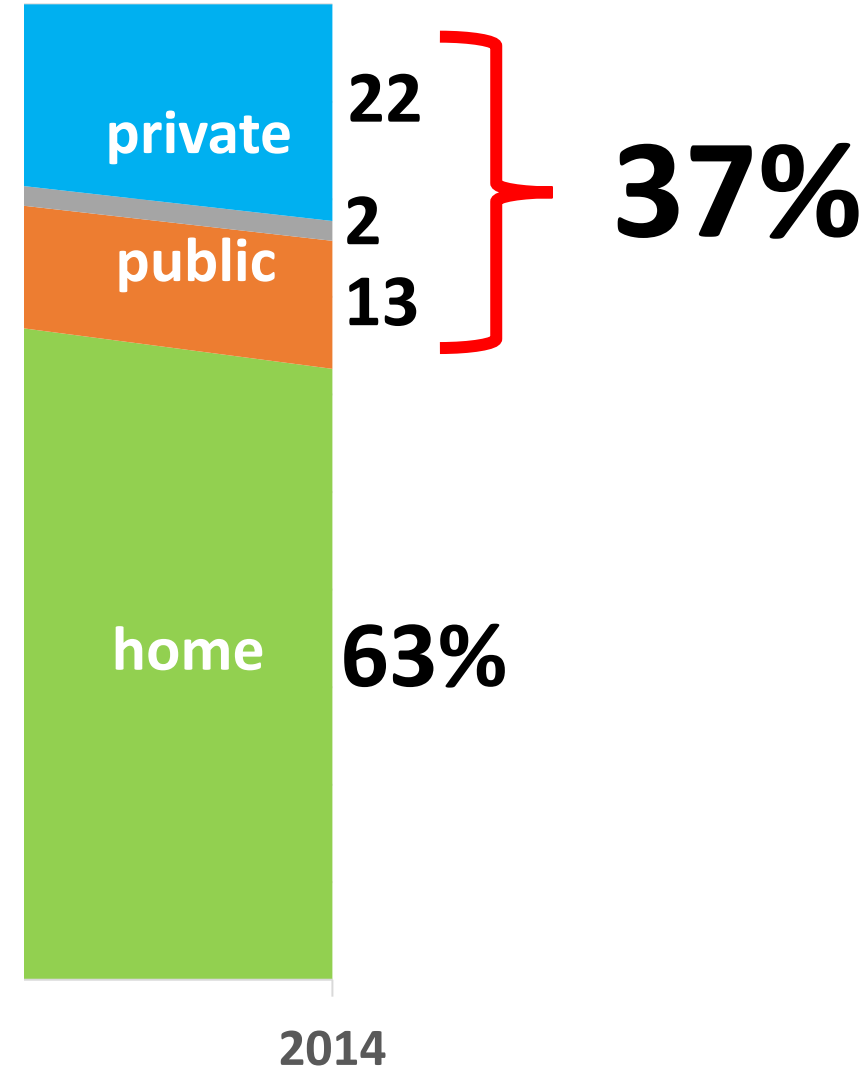
Inequitable growth



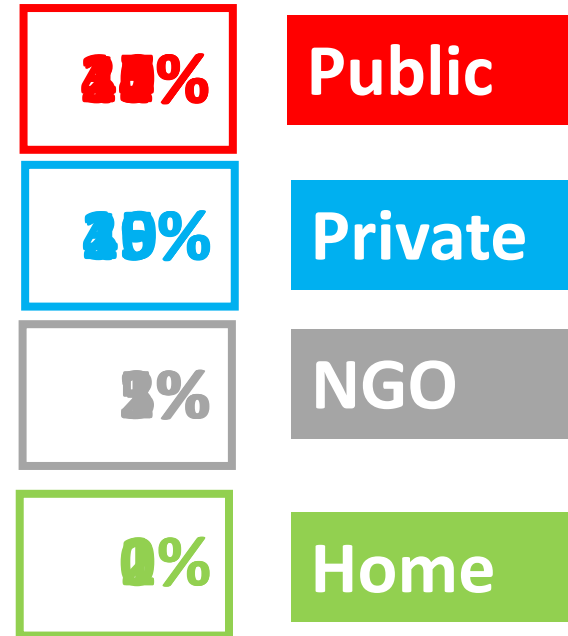
The shift needs to be steered

Poor cannot afford to go to private sector

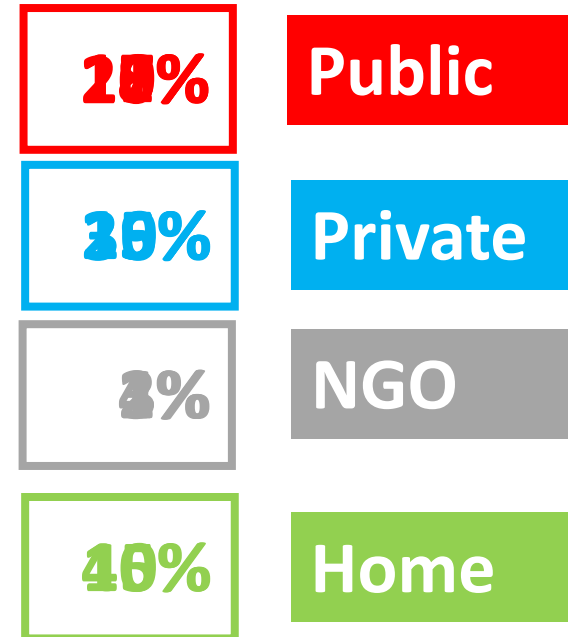
Public sector needs to step up: *pragmatic strategies and high quality*



Place of delivery in 2030



Place of delivery in 2021





The solution



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Where these deliveries will take place in public sector?

- Strengthen UH&FWCs to provide 24/7 normal delivery care services.
- Complicated cases will be referred to UHC, MCWC and DHs.

Minimal package

- Renovation,
- Equipment and supplies,
- Outreach based ANC and pregnancy tracking,
- Support towards skill development
- Residential FWV,
- Additional manpower in case of higher case load,
- Local government and community engagement
- Referral network

Performance of the 24/7 UH&FWCs - SBA (October 2014 – September 2015)

Includes mothers from outside the Union delivered at UH&FWC

138

(62-224)

Average number of deliveries at UH&FWC

384 (254-551)

Average # of births from the union at UH&FWC

246 (139-327)

(37%)

At other facilities (GOB, private, NGO)

72 (52-106)

(11%)

Home deliveries

347 (206-453)

(52%)

By CSBAs

78 (7-119)

(12%)

By private CSBAs

22 (0-62)

(3%)

Non-SBA

248 (167-340)

(37%)

Total SBA delivery

418 (327-538)

63% (54%-76%)

SBA Coverage

National: 42%

Sylhet div.: 27%

Habiganj dist.: 30%

(MaMoni survey)

Sources: FWV/ MNH register
DGFP: MIS 3, MIS-4, CSBA report
DGHS/MIS: EOC report

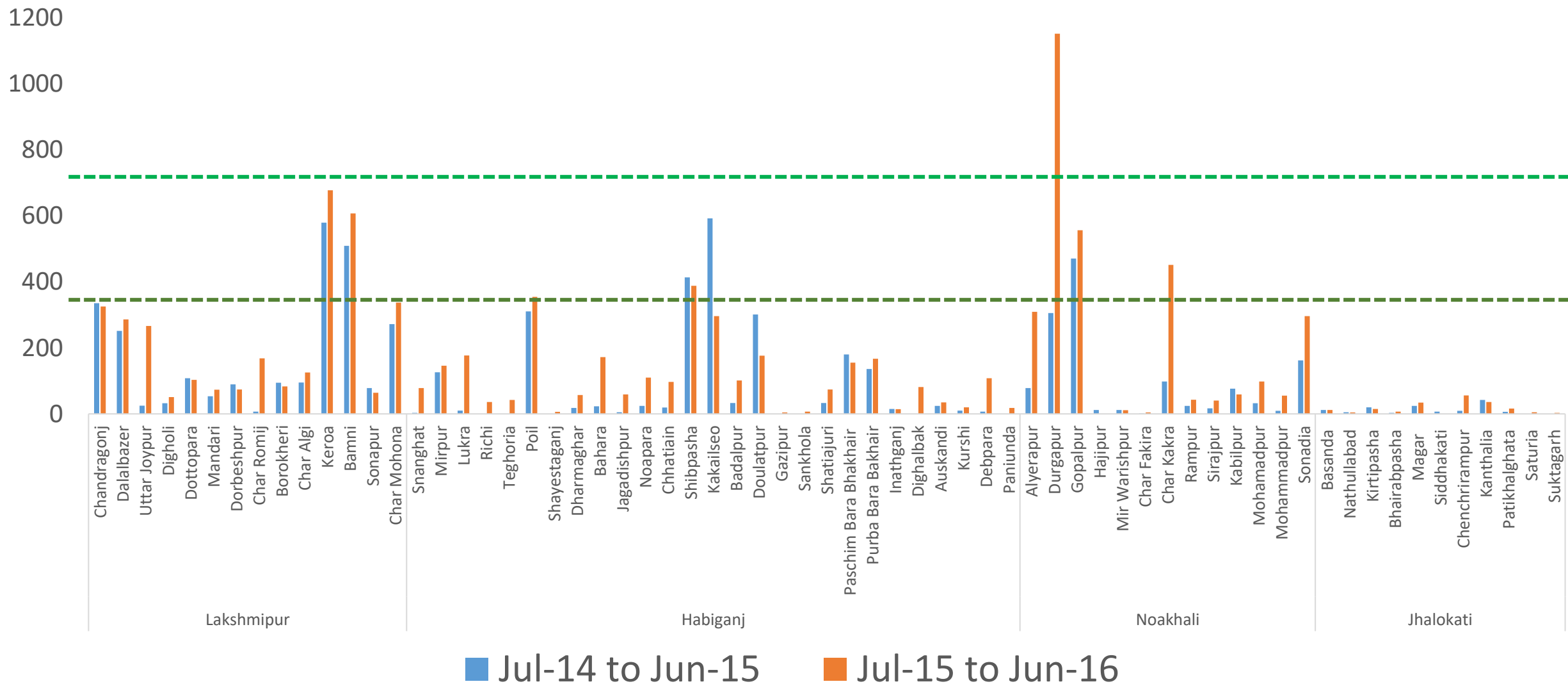
Average estimated # of deliveries in

2014

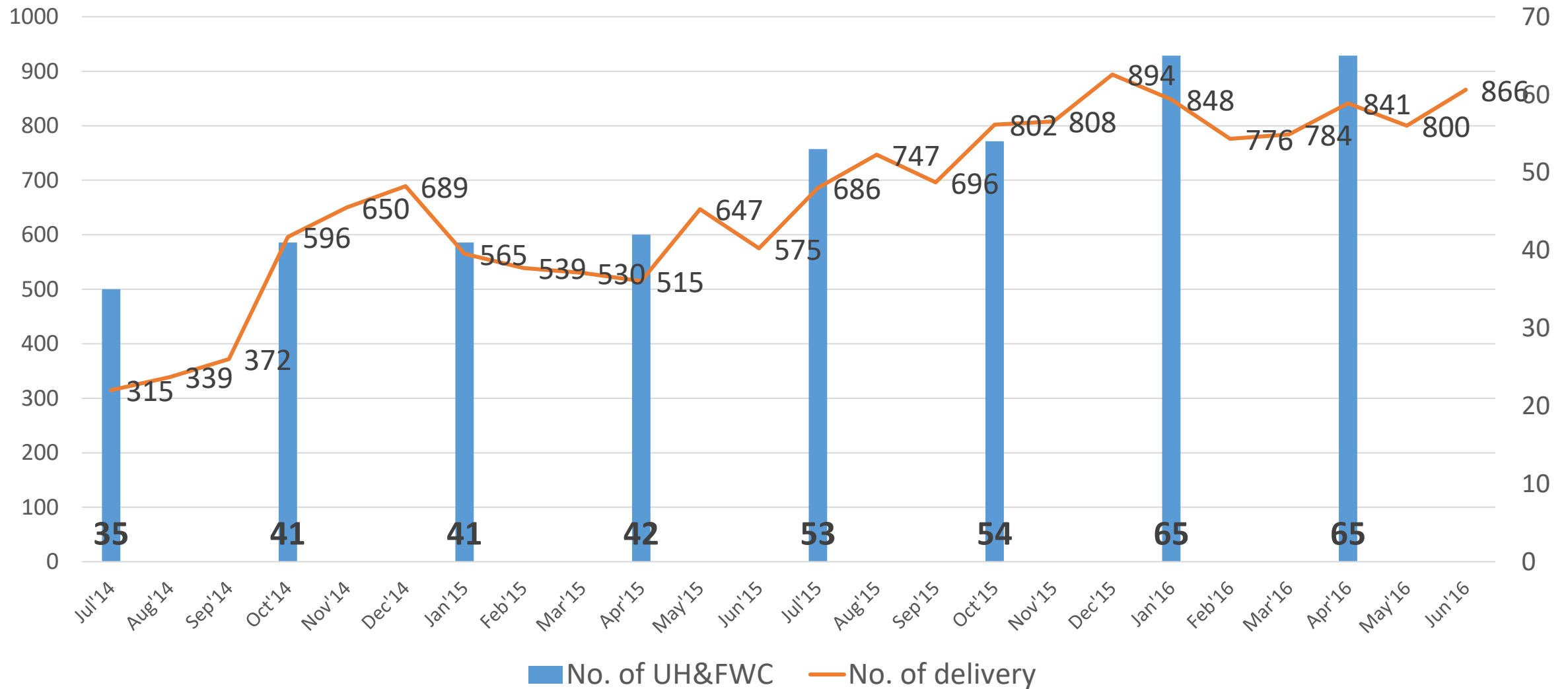
666

(594-751)

Many more UH&FWCs are now providing NVD services and the utilization is increasing steadily



Number of monthly deliveries at 24/7 union health and family welfare centers in MaMoni supported districts





What we have on the ground: findings from the nationwide assessment



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Methods

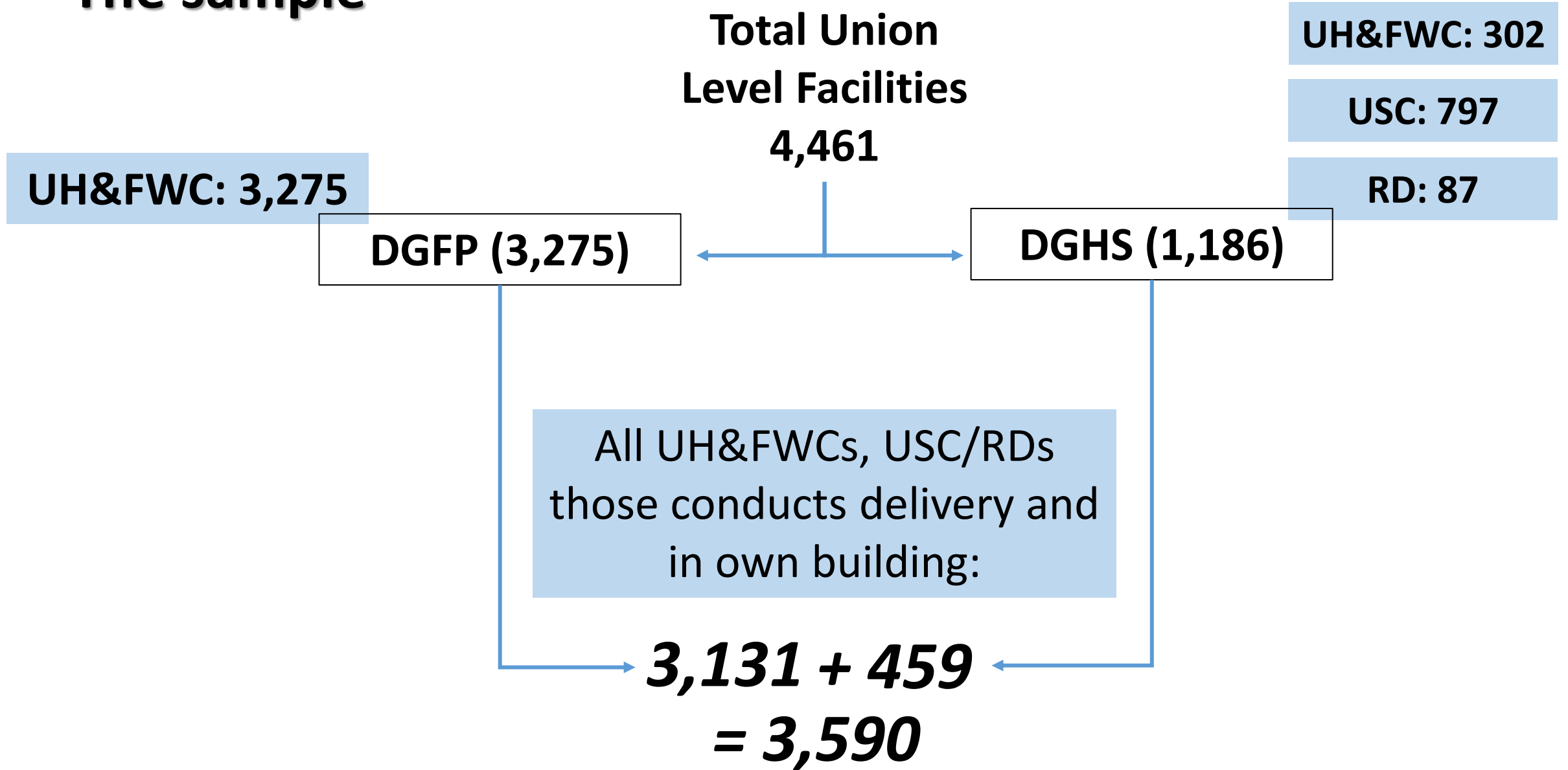
- Union list collected from Bureau of Statistics
- List of union facilities collected from DGHS and DGFP
- List of union level facilities collected from DDFP and CS
- List verified with upazila level managers
- Data collectors visited every union, data collected using Tablets
- Interviews with service providers at the facility
- Data quality through 10% re-assessment by supervisors
- Additional validation visits done by supervisors in a sample



Distribution

| Division | Total Unions | No Facility |
|-----------------|---------------------|--------------------|
| Barisal | 352 | 35 (9.9) |
| Chittagong | 947 | 115 (12.1) |
| Dhaka | 1,245 | 81 (6.5) |
| Khulna | 574 | 30 (5.2) |
| Rajshahi | 563 | 32 (5.7) |
| Rangpur | 533 | 24 (4.5) |
| Sylhet | 336 | 41 (12.2) |
| Total | 4,550 | 358 (7.9) |

The sample



Categorization

Criteria

- Human resource availability
- Midwifery training of staff
- FWVs residence
- Condition of Infrastructure
- Availability of equipment
- Availability of delivery room
- Approach road



A

No significant inputs or resources required



B

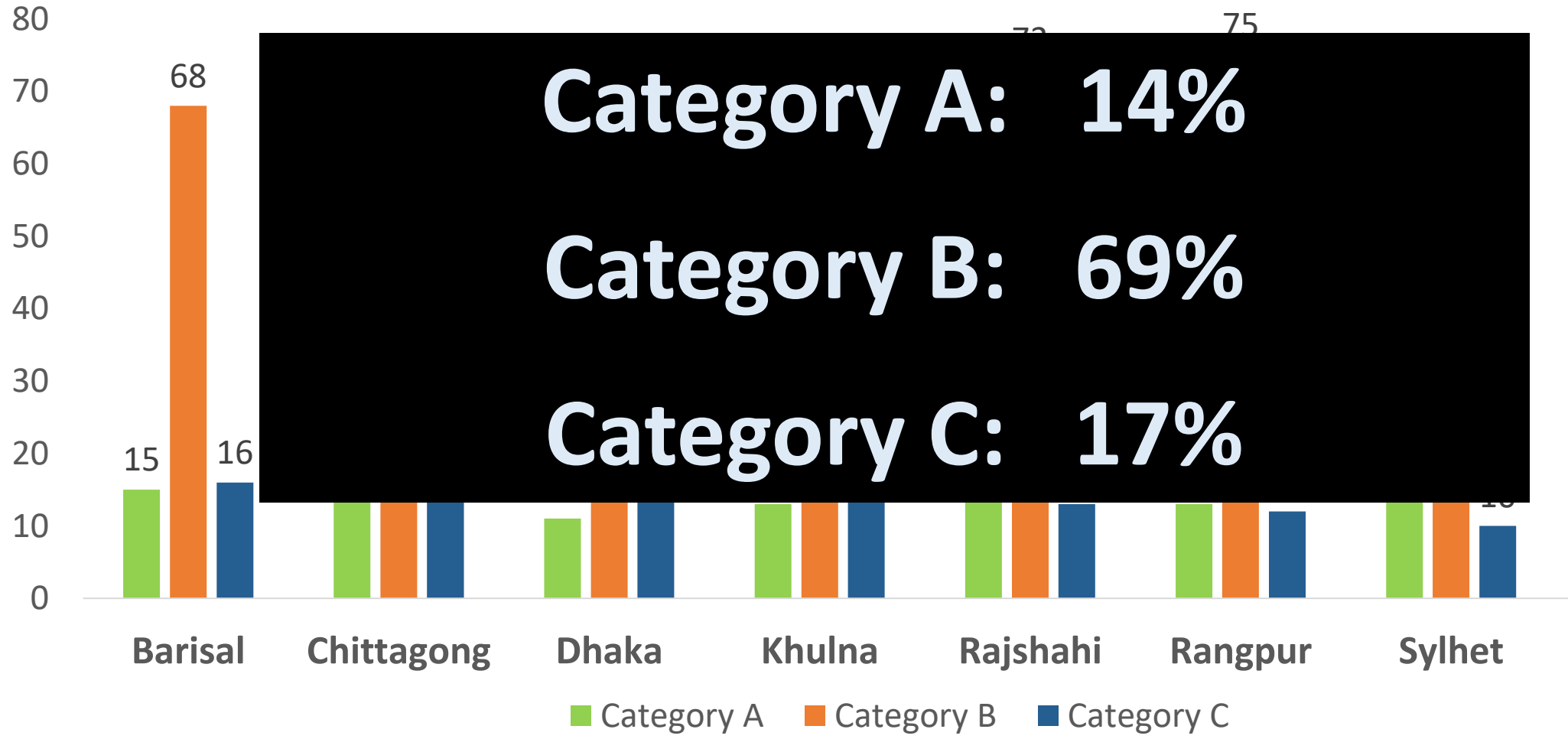
Minor to moderate level of inputs required



C

Major inputs and resources required

Distribution of UH&FWCs by categories



No. of facilities = 3,590

Basic amenities

29% FWV Room in good condition

Handwashing facility in good condition **36%**

37% Toilet in good condition

Electricity available **70%**

3,590

37% Delivery table in good condition

Delivery Room in good condition **30%**

Water supply available **49%**

Equipment & supply (Percentage)

| Name of Divisions | Total number of union level facilities | Adult stethoscope available in good/ useable condition | BP Machine available in good/ useable condition | Baby weighing scale available in good/ useable condition | Kidney tray available in good/ useable condition | Scissors available in good /useable condition | Umbilical cord clamp or tie available in good/ useable condition | HBB logistics available in good/ useable condition | Artery Forceps available in good/ useable condition |
|-------------------|--|--|---|--|--|---|--|--|---|
| Barisal | 273 | 71 | 54 | 51 | 96 | 89 | 23 | 58 | 38 |
| Chittagong | 724 | 68 | 56 | 43 | 90 | 87 | 22 | 64 | 47 |
| Dhaka | 957 | 78 | 68 | 50 | 96 | 90 | 22 | 80 | 92 |
| Khulna | 487 | 90 | 80 | 67 | 97 | 95 | 28 | 84 | 92 |
| Rajshahi | 446 | 92 | 78 | 71 | 96 | 94 | 36 | 86 | 94 |
| Rangpur | 467 | 88 | 81 | 69 | 96 | 92 | 31 | 78 | 93 |
| Sylhet | 236 | 61 | 56 | 46 | 86 | 80 | 23 | 47 | 35 |
| Total | 3,590 | 79 | 68 | 56 | 94 | 90 | 26 | 74 | 76 |

Staffing

3,590

FWV Posted

81%

SACMO Posted

71%

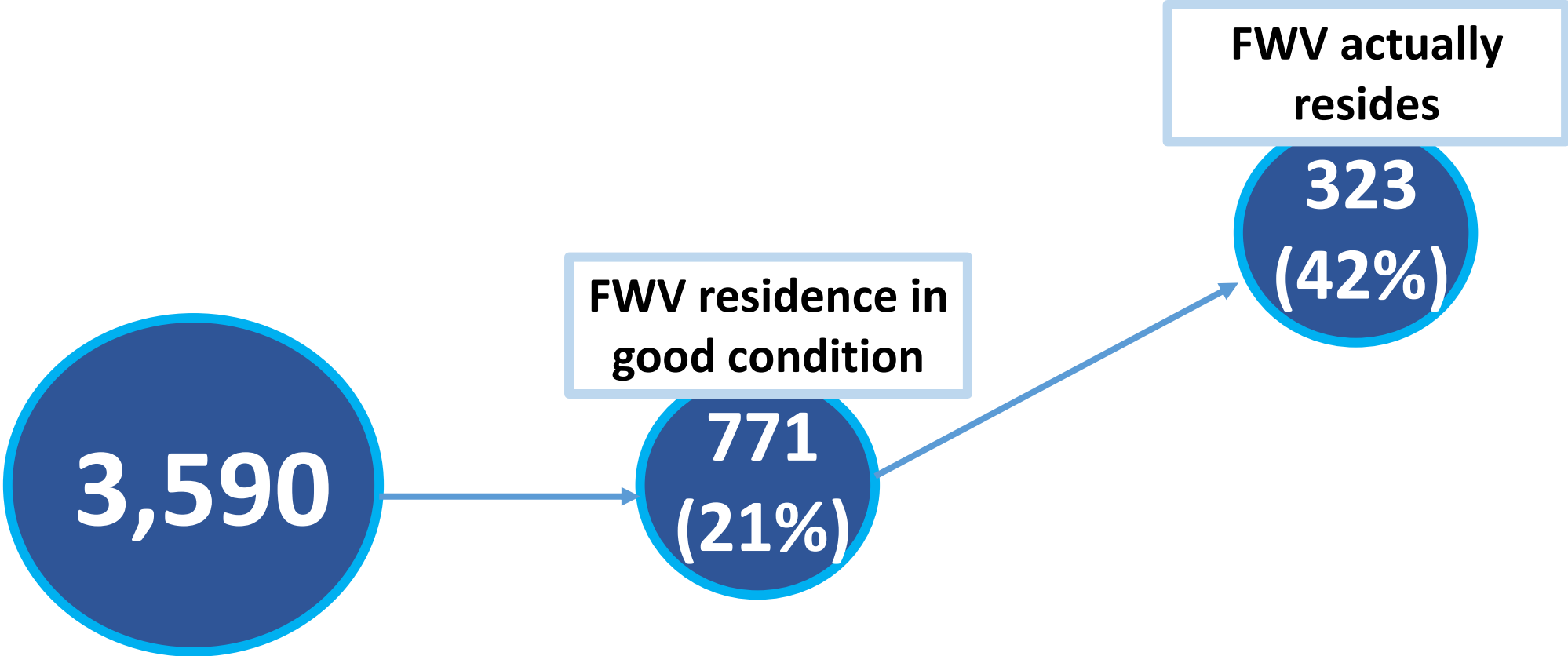
Aya available

73%

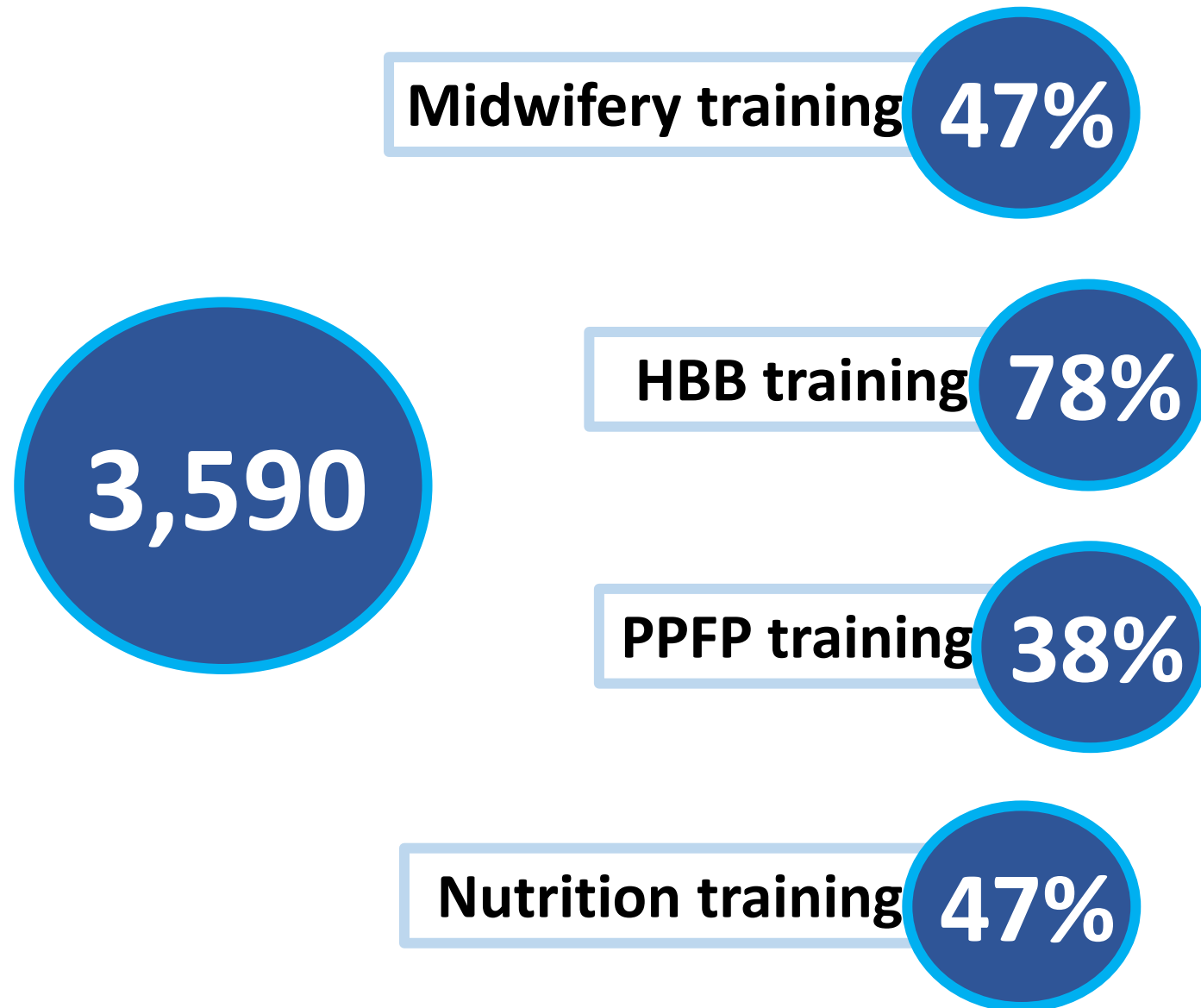
MLSS available

70%

FWVs: residential status

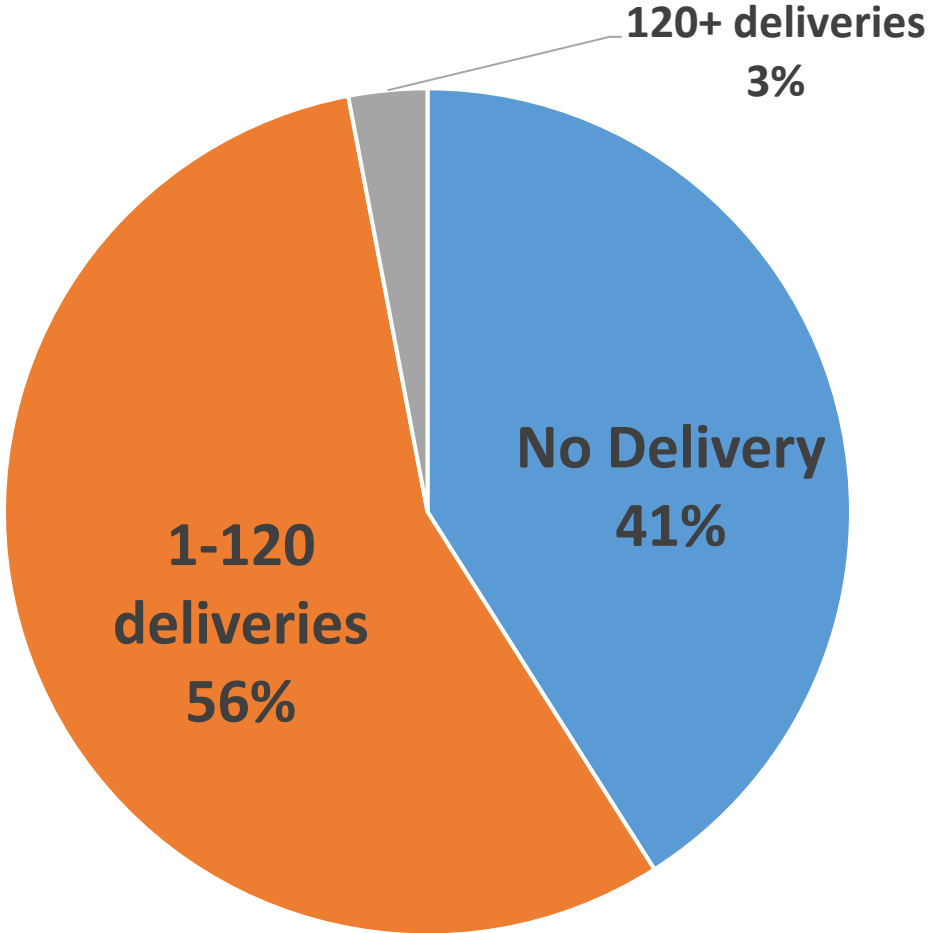


FWVs: training status



Utilization for delivery care: all facilities

3,590



59%
conducting
deliveries

Utilization for delivery care:

3,590

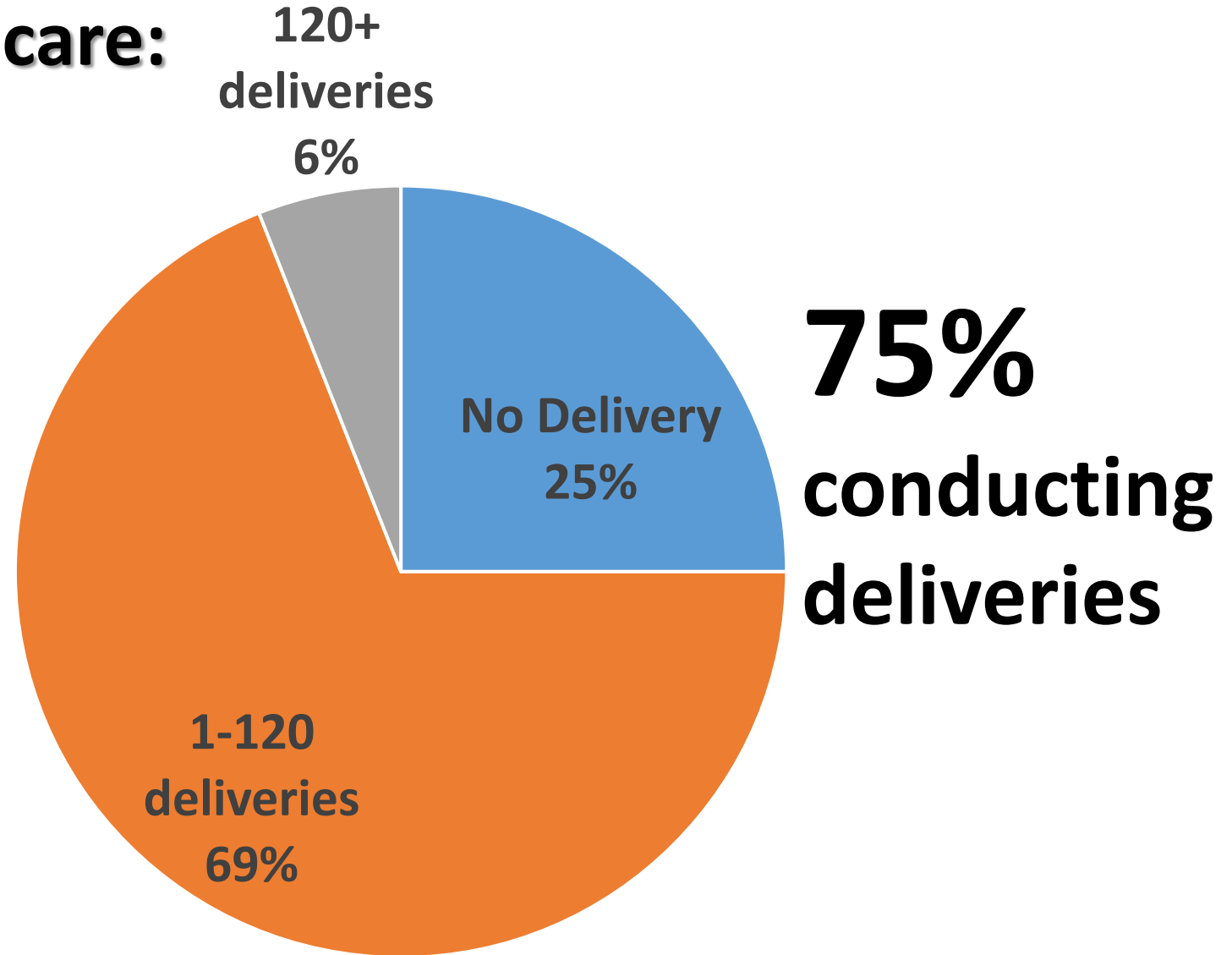
**Delivery Room in
good condition**

1,080 [30%]



**FWV trained in
midwifery**

523 [15%]

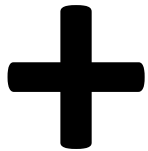


Utilization for delivery care:

3,590

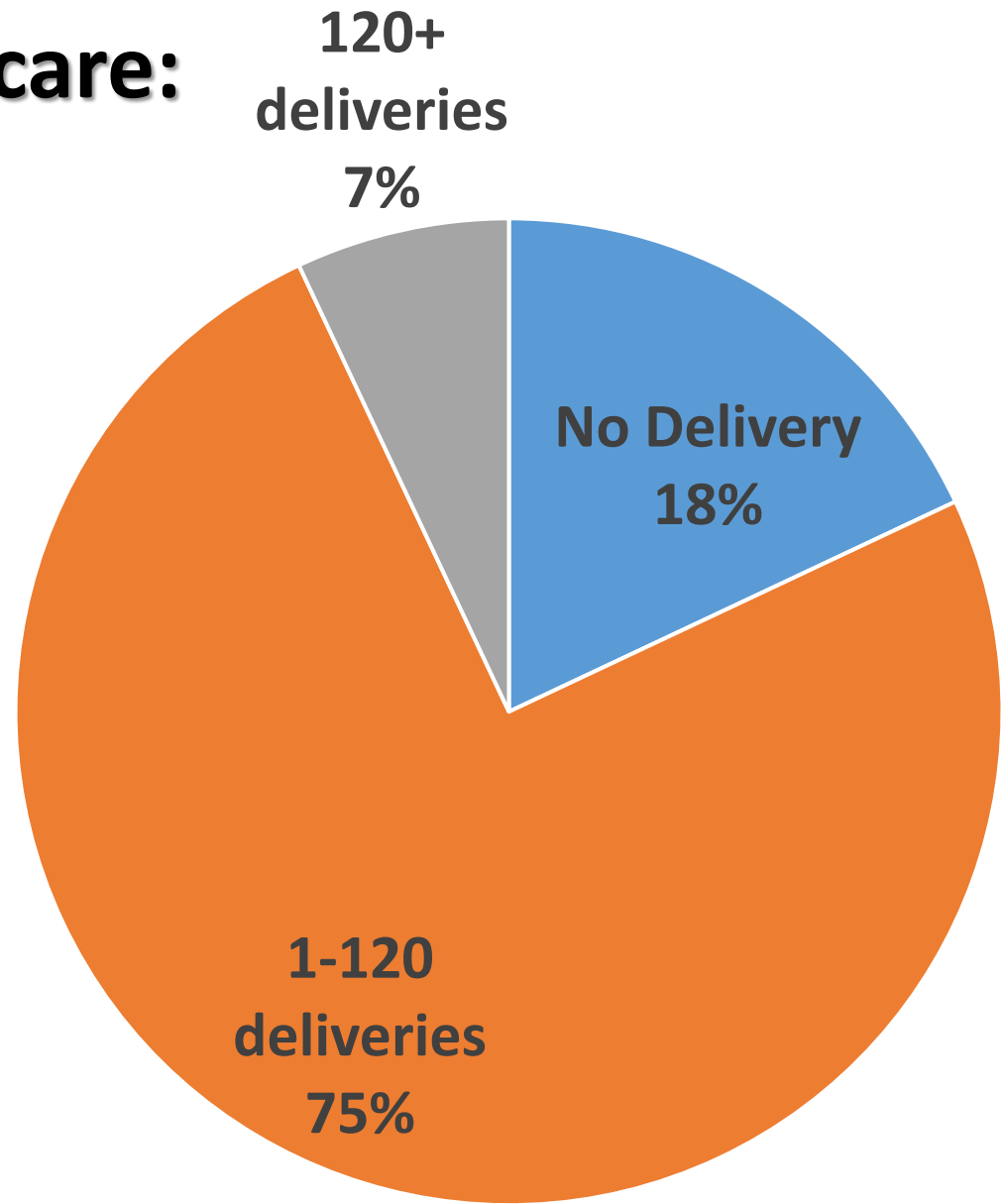
Delivery Room in good condition

1,080 [30%]



FWV is residential

372 [10%]



82%
conducting deliveries

Utilization for delivery care:

3,590

Delivery Room in good condition

1,080 [30%]

+

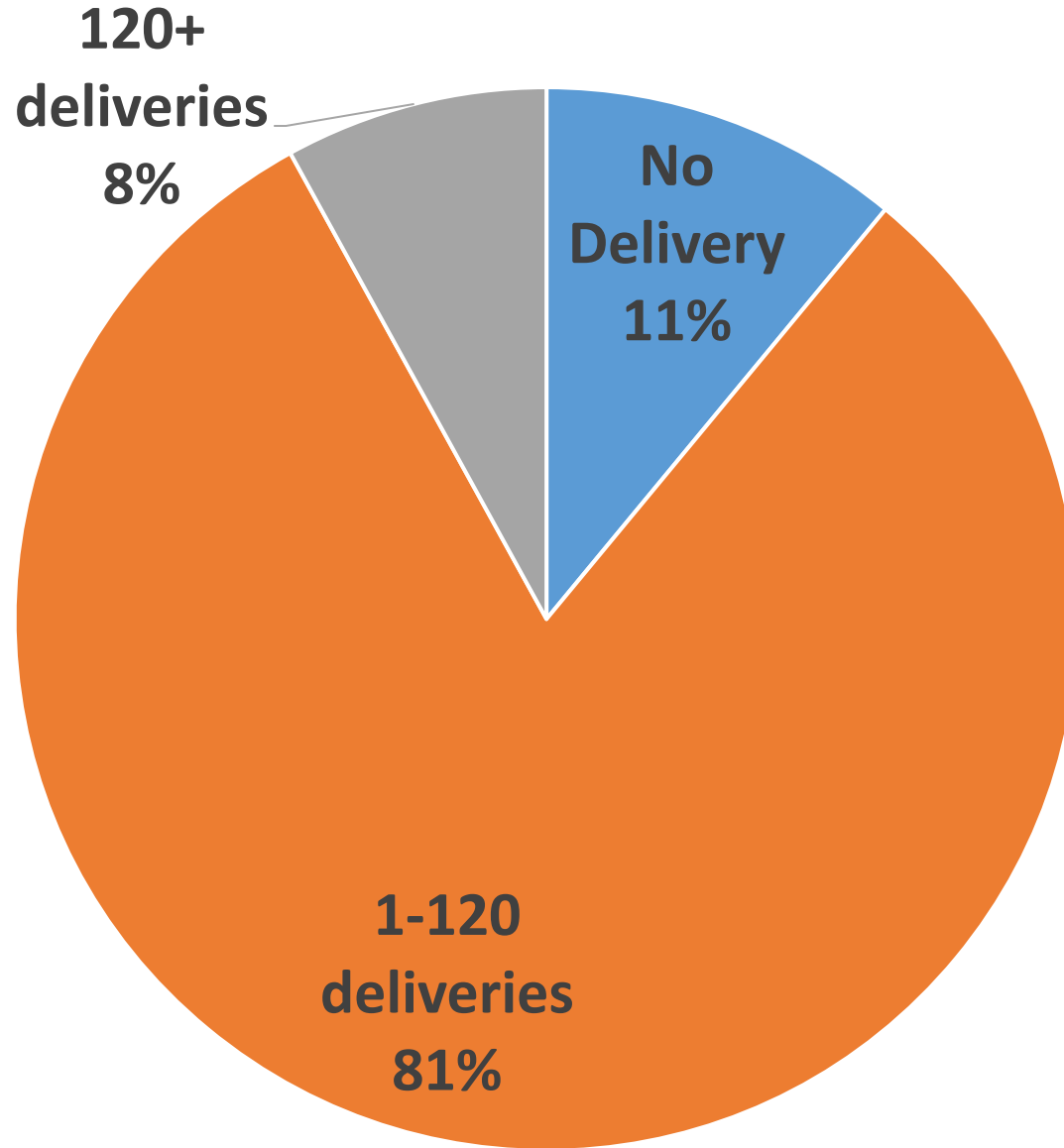
FWV is residential

372 [10%]

+

FWV is midwifery trained

211 [6%]



89%
conducting deliveries



Workload feasibility



Can UH&FWCs handle the case load: a simple math

2021

Public facility delivery =
600,000

Complicated cases need EmOC at UHC or DH/MCWC
= $600,000 * .15 = 90,000$

Remaining normal cases to be delivered at UH&FWC
= $600,000 - 90,000 = 510,000$ per year

Average normal cases per UH&FWC per month
= $510,000 / 2,500 / 12 = \underline{17}$

Can UH&FWCs handle the case load: a simple math

2030

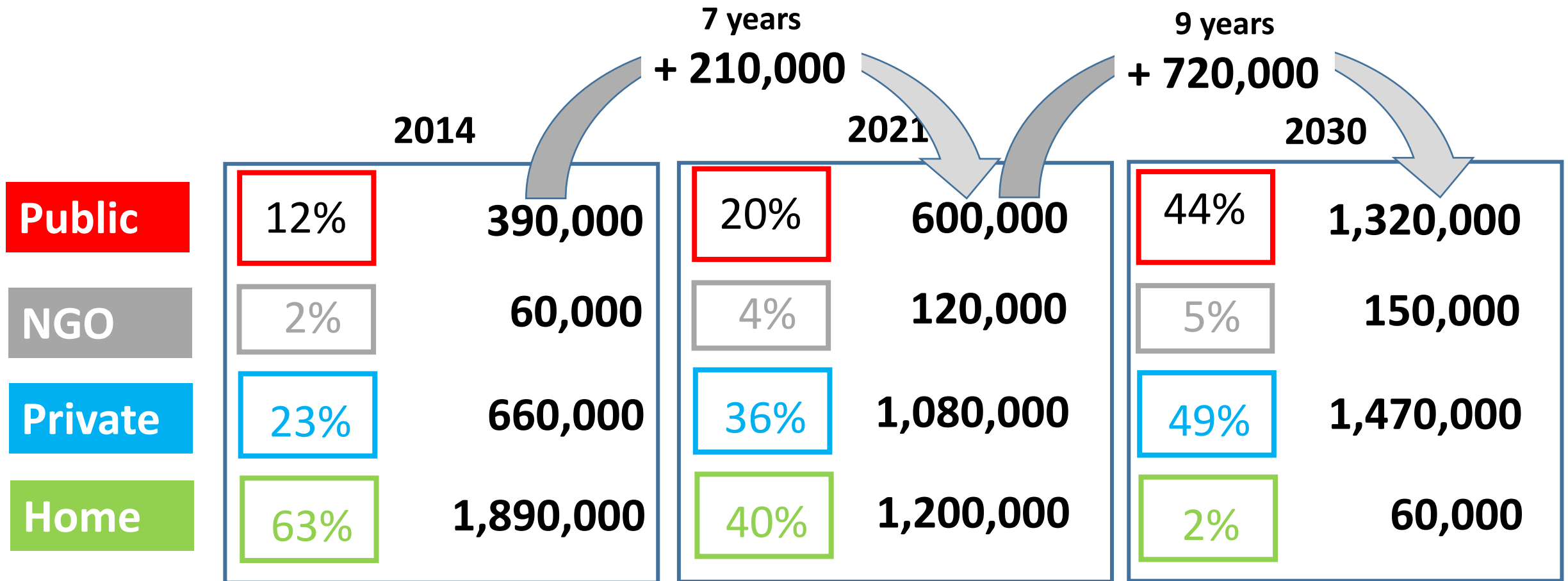
Public facility delivery =
1,320,000

Complicated cases need EmOC at UHC or DH/MCWC
= $1,320,000 * .15 = 198,000$

Remaining normal cases to be delivered at UH&FWC =
 $1,320,000 - 198,000 = 1,122,000$ per year

Average normal cases per UH&FWC per month
= $1,122,000 / 4,000 / 12 = \underline{24}$

Case load: need to get prepared for



Assuming a static 3 million birth cohort



Summary and way forward



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Summary

- Majority of the union facilities can provide delivery care services with minor to moderate inputs– local level actions are required to address the gaps
- Staff availability is not a major constraint – their deployment, training, residency and performance need to be strengthened
- UH&FWC management committees need to be strengthened for local ownership and oversight
- Management and supervision need to be strengthened to improve the performance of facilities that are “ready”

Summary

- There are several facilities that have all the basic elements for conducting normal vaginal delivery services, yet they are not currently providing such services.

Priority actions

To accelerate the strengthening of UH&FWCs, the MOHFW needs to prioritize the following activities to implement across the health system of Bangladesh. These activities need to be implemented in a synchronized way to maximize the use of constrained resources.

- Use of the Categorization of UH&FWCs prioritization infrastructure development
- Additional Human resources
- Training, supportive supervision and quality assurance
- Accountability
- Equipment and supplies
- Referral
- Engagement of local government and community



Thank you

