Person centered neonatal health care

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Under-5 mortality: Success but significant unfinished agenda

52 countries (mostly in SSA) need to accelerate progress to meet SDG targets by 2030. 13 countries in AFR will not reach targets until after 2050.

Packages of care

Clinical

Reproductive Care

And

Pre-pregnancy Care

Outpatient

Antenatal Care

Postnatal Care

Family/community

Home Visits during Pregnancy

Safer Home Birth

Early Postnatal Home Visit

Intersectoral: improved housing, water and sanitation, and nutrition; education and empowerment

Pre-pregnancy

Pregnancy

Childbirth

Newborn/postnatal
Care around the time of birth: a triple return on investment

Source: Special analysis detailed in The Lancet Every Newborn Series, launched 19 May 2014
Can available interventions end preventable deaths in mothers, newborn babies, and stillbirths, and at what cost?

Zulfiqar A Bhutta, Jai K Das, Rajiv Bahl, Joy E Lawn, Rehana A Salam, Vinod K Paul, Jeeva M Sankar, Hannah Blencowe, Arjumand Rizvi, Victoria B Chou, Neff Walker, for The Lancet Newborn Interventions Review Group and The Lancet Every Newborn Study Group
Need to shift paradigm in service provision

- Care based on newborn’s needs and rights, quality of care and positive experience
  - Person centered (baby & mother)
  - Family centered
  - People centered
- Reorganization of health services
- Benefits for newborns, families and health system
Newborn/family centered care in LMICs

- Why?
- When?
- Possible?
- How?
- Safe for baby?
Conclusions and way forward

- To accelerate progress in newborn survival and health a paradigm shift in care provision is required with newborn and family at the centre of care.

- Models of care that value mother and family participation can benefit babies, families, communities and health systems.

- Service delivery reforms should reorganise health services around people’s needs and expectations so as to make them more responsive while producing better outcomes.
Thank you

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