An effective intervention for planning, monitoring and health system strengthening of maternal and neonatal health in Bangladesh

Maternal and Perinatal Death Review (MPDR) is an evidence based approach that cross examines both health system and social factors through a systematic process. The intervention initially piloted for the first time in Bangladesh by the Line Director, MNCAH of DGHS in collaboration with the Line Director, MCRAH of DGFP within scope of Joint GoB-UN Maternal and Newborn Health (MNH) Initiatives in Thakurgaon district. UNICEF and Centre for Injury Prevention & Research, Bangladesh (CIPRB) provided technical support in implementation.

Health staffs by level have been trained to collect information on maternal and neonatal deaths and still births at community and facility levels and to perform verbal autopsy or death review to identify the causal factors for the deaths. Periodic review meetings at upazila and district level are held to analyse and plan for remedial actions both at facility and community.

The development of guidelines, tools and checklists endorsed by the government. Structured training has resulted in an increased capacity within health system to identify causes of maternal and/or perinatal death. The managers, stakeholders and policy makers appreciated the collaborative efforts by GoB and partners to successfully implement MPDR with visibility and outcomes.

MPDR has gradually scaled up to 10 districts of Bangladesh by 2013 covering approximately 20 million population.

Between 2011 and till date, 952 maternal deaths, 10399 newborn deaths were reported and reviewed in four districts. However, in the last ten 10 months (October 2013 to July 2014), 362 maternal deaths, 3096 newborn deaths have been reported and reviewed in new seven districts.
Innovation in MPDR: Death Mapping—Number translate into Action

Death notification has proven as a simple, low cost and feasible work by frontline health workers within existing health system. The district & upazila map plotted with multicolour dots showing the residences of the deceased mothers (red), neonates (yellow) and still births (blue). It indicates the incidence & distribution by geographic and administrative location within the district & upazila providing the managers with an understanding on maternal and neonatal health situation in the area.

Identification of areas with high incidence of deaths formed a basis in review meetings for in depth analysis and planning remedial actions including awareness program, deploying service providers, ANC campaign; improve health services & referral. These were presented in district and upazila MPDR meetings. Some of the health manager initially hesitated to present the numbers of deaths in own area as if this reflect his/her discredit, but later on they became encouraged when they found this figures helped them in understanding, planning to implement specific remedial actions.

Key facts of MPDR

- MPDR implemented through existing health system with an excellent collaboration between DGHS and DGFP.
- Verbal Autopsy and Social Autopsy are performed to find the social and medical causes including factors related to deaths.
- Facility death review help to identify gaps (HR/Logistics/3rd delays) and means to overcome.
- Identify and implement corrective actions at local and national to strengthen health system to prevent similar deaths in future.
- MPDR data used by Health Managers for monitoring MDG 4 & 5.

MPDR: In health system strengthening

MPDR intervention effectively contributes to health system strengthening and community response to reduce maternal and newborn deaths and enables managers in tracking district specific mortality trends. Political commitment resulted in a national MPDR guideline, incorporation of MPDR training in the national health sector plan, establishment of knowledge hubs at sub-national teaching hospitals serving as centre of excellence and MPDR data being incorporated in web based Health Management Information System (HMIS) of Directorate General of Health Services.

Mobilizing additional resources to scale up MPDR throughout the whole country would further strengthen the health system to deliver quality MNH services and thereby reducing preventable maternal and neonatal death and achieve MDG and post MDG targets of Bangladesh.