MPDR NEWSLETTER

Maternal & Perinatal Death Review (MPDR) is being implemented in 10 Districts of Bangladesh by Director-PHC and Line Director; MNC&AH, DGHS in collaboration with the Line Director, HMIS & e-Health, DGHS along with line Director MCR&AH, DGFP with technical assistance from UNICEF and CIPRB.

MPDR is useful to reduce maternal and child deaths: Health Minister in Sirajganj

Sirajganj, 30 December, 2014: Minister for Health and Family Welfare Mohammed Nasim MP has expressed his satisfaction over the recent progress in reducing maternal and newborn deaths due to a joint initiative of the Government of Bangladesh (GoB) and the United Nations (UN).

Minister was visiting a stall of a Health Fair at Sirajganj district hospital premises where he was briefed on Maternal and Perinatal Death Review (MPDR) activities under the joint GoB-UN Maternal and Neonatal Health Initiative (MNHI) and status of maternal and newborn health.

The stall was decorated with Social Autopsy Behavioral Change Communications (BCC) festoons, Facility Death Review festoons, death notification Spot Map of the district and a display on implementation of the local action plan utilizing MPDR findings.

Minister says, “The Government has been working relentlessly on reducing maternal deaths and death notification as per MPDR, which is interesting and useful in this regard.”

He also expressed his satisfaction as maternal death has declined in Sirajganj in comparison with the national level maternal deaths.

MPDR, which has been implemented in selected districts in Bangladesh since 2010, allows the government to improve the quality of services and make necessary plans to reduce maternal and neonatal mortality and morbidity. This is an evidence-based approach that has been institutionalized and operates within the health system, capturing data on maternal death, stillbirth and neonatal deaths.

Animesh Biswas, Senior Scientist of CIPRB briefed the Health Minister on MPDR activities of the district.

MPDR strengthens DHIS-2 software of HMIS, DGHS

Netrokona: As part of ensuring sustainability of the MPDR system, initiatives have been taken to incorporate maternal and neonatal deaths notification data into the DHIS-2 database software of Management Information System (MIS) of the Directorate General of Health Services (DGHS).
Verbal autopsy suggests quality ANC, PNC a must: Divisional Director, DGHS

Moulvibazar, 13 December, 2014: Divisional Director of the Directorate General of Health Services (DGHS), Sylhet Division Dr. Mamun Parvez says verbal autopsy for maternal deaths suggests the urgent need for quality Ante Natal Care (ANC) as well as safe delivery procedure and Post Natal Care (PNC).

“Bangladesh is now on the way to achieve the MDGs by 2015. Through mobilization of the society, we can prevent a number of maternal and neonatal deaths in the rural community and achieve the target in time,” he says while observing a Verbal Autopsy of a neonatal death in Talibip Village, Sharifpur Union of Kulaura Upazila.

Dr. Hemanta Kumar Das, Acting Civil Surgeon of Moulvibazar district and other health and family planning officials of Moulvibazar and Kulaura accompanied him.

From experiences and lessons learnt from this area, maternal death data have been uploaded on DHIS-2 in three hard-to-reach districts of Bangladesh (Bandarban, Cox’s Bazar and Netrokona). Upazila statistician was engaged in this initiative at Upazila Health Complex while Community Health Care Provider (CHCP) at Community Clinics.

Dr. Md. Rezaul Ahsan Muslimi, UH&FPO, Purbadhala mentioned, “MPDR maternal and newborn death data can easily be incorporated in MIS. Deaths information are jointly collected by the HA and FWA at the field, there is no overlapped information. So, it’s the representative data of the upazila”.

DFATD team observes verbal autopsy in Thakurgaon

Thakurgaon, 2 December, 2014: A team from the Department of Foreign Affairs, Trade and Development (DFATD) of the Canadian Government has visited Jhargaon Village of Akhanagar Union under Thakurgaon Sadar Upazila to observe a verbal autopsy of a neonatal death.

The team members include Ms. Meaghan Byers and Mr. Joseph Sebhatu from the High Commission of Canada in Bangladesh.

During the visit, they observed a verbal autopsy at the community level conducted by the field level health staff of the Government of Bangladesh. Different issues of social stigma behind the deaths in rural Bangladesh were also captured during the review.

Members of the DFATD team were briefed about the whole process of death review, which blames none but try to find out the underlying reasons for the deaths.

This blame no one approach has been used for the first time in Bangladesh, which is a very useful tool to identify causes of death and take the next course of intervention based on the findings.

After the death review, the team also spoke to the parents of the deceased newborn.

"The most important lesson learnt from this tragic death is that this has sent out an important message to the community. Every mother should go to the skilled birth attendant at the facility for delivery,” says Mr. Joseph Sebhatu.
Director General of Family Planning vows to take pregnant mothers to facility for delivery

Thakurgaon: Director General of Directorate General of Family Planning (DGFP) Md. Nur Hossain Talukder has vowed to take pregnant mothers to facility for delivery services. “We should commit for preventing home delivery. From now on, every delivery should take place at the facility,” he says. Mr. Talukder was observing a social autopsy of a neonatal death at Borobari Village of Jaborhat Union under Pirganj Upazila. The Director General said, every pregnant mother must take at least four antenatal cares and any high-risk mother and risky neonates should be referred to a facility. Divisional Director, Family Planning, Rangpur Division, upazila government officials including UNO, UH&FPO, UFPO, local government, UN and NGO Officials were presented in the Social Autopsy.

Photo: Directorate General, DGFP, participating Social Autopsy meeting

Tea garden areas need special initiative, says UNICEF Bangladesh Health Chief

Moulvibazar: Chief of Health Section of UNICEF Bangladesh, Dr Lianne Kuppens has underscored the need for special initiatives for tea garden catchment areas. “Tea garden catchment area is one of the most vulnerable areas in Moulvibazar where special initiatives need to be taken,” she says while observing a Verbal Autopsy of a maternal death at a tea garden of Ashidron Union, Sreemangal Upazila. She says the maternal death was an eye opener to know and identify the areas to work further from MPDR findings. The verbal autopsy identified that the mother had decided for delivery at home. She developed retained placenta that caused severe per vaginal bleeding. On the way to a facility, the mother unfortunately died on the road. Dr. Kuppens expressed her deepest condolences to the family members of the deceased. Dr Riad Mahmud, Health Specialist of UNICEF and other delegates and officials from UNICEF, Government and CIPRB were present during the death review session.

Photo: Chief Health Section is observing a Verbal Autopsy of a maternal death

Upazila Health and Family Planning Managers jointly monitored a social autopsy in hard to reach area of Chawhali upazila, Sirajganj

Chawhali, Sirajgonj, 28 October, 2014: A joint visit was organized from the health and family planning department of Chawhali upazila. The team lead by UHFPO and UPFO and the field level health staff in one of the remotest area named Saudiachandpur union. The findings of MPDR death review showed that in Saudiachandpur union with a high neonatal deaths found, that was discussed in the review meetings. The managers were immediately respond on the death findings and planned for an immediate observation in the field to know and identify the real scenario of death. The social autopsy was held at around 11 am morning, the health inspector conducted the autopsy and it was explore that the newborn was died due to birth asphyxia, the mother didn’t seek proper antenatal care & she delivered at home. During illness, the neonate was planned to take at facility, but decision made was delayed, unfortunately, the union is far away from the facility care and it was really tough for the family to bring the child in time due to lack of transport at mid night in the river.

Photo: Honorable UH&FPO of Chawhali describing the neonatal and maternal complication among participants of Social Autopsy

Finally, the UHFPO mentioned that health and family planning workers at field need to work jointly with effort to ensure ANC and complicated case should refer earlier to prevent such fatal condition".
**List every pregnant mother: Deputy Director of Family Planning**

**Kutubdia, Cox’s Bazar:** Dr. Dipak Talukder, Deputy Director of Family Planning, Cox’s Bazar and AKM Nazmul Hasan, Field District Officer, UNFPA, Cox’s Bazar participated in a workshop on Reproductive Health at Uttar Dhurung Union Parishad. Upazila Family Planning Department of Kutubdia organized the workshop from 23 to 25 November, 2014.

The Upazila Family Planning Officer (UFPO) of Kutubdia presented different findings of MPDR in the workshop outlining areas that require urgent attention for reducing maternal deaths. The DDFP ordered all the FWVs to provide quality ANC and to have the list of every pregnant mother, which will be helpful to identify the high-risk mothers. He emphasized on proper monitoring from the UFPOs for overseeing the activities of FWAs & FWVs.

"As number of maternal death is high at Uttar Dhurung Union especially Akbarboli Para, Johijjar Para & Foyjani Para, we need to have special initiatives and involve partner NGOs. Social Autopsy programme of MPDR may play a vital role in the prevention of maternal deaths and raise awareness in the community about the availability of services at FWC in Uttar Dhurung." – DDFP of Cox’s Bazar mentioned.

**Advocacy meeting for the pregnant mothers in Jamalpur**

Advocacy meetings with free blood grouping for the pregnant mothers were held at the unions of every upazila of Jamalpur District having high maternal deaths as a part of implementation of local level action plan under MNH Initiatives. These Meetings were held at Koritura Union of Madarganj Upazila, Chikajani Union of Dewanganj Upazila and Nurundi Union of Jamalpur Sadar Upazila on 19, 25 & 30 November, 2014 consecutively.

Civil Surgeon & Deputy Director of Family Planning, Jamalpur participated in the Sadar Upazila Meeting whereas UH&FPOs & UFPOs of these upazilas and Chairman & Members of the respective Union Parishad and Community Group members of the Community Clinics participated in these meetings. More than 200 pregnant mothers’ blood grouping was done; high-risk mothers were identified and were referred to higher centers.

**CHVs of ComSS Programme to contribute in death notification**

**Thakurgaon, 8 October, 2014:** A Coordination Meeting was held at ESDO Office with the participation of both Community Support System (ComSS) and MPDR Intervention staffs of Thakurgaon. UH&FPO and UFPO of Sadar Upazila, Upazila Coordinators of MPDR Intervention of CIPRB, Project Coordinators and Community Health Volunteers (CHVs) of ComSS programme of ESDO participated in the meeting.

Both the Upazila Managers emphasized on coordination between two programs for effective implementation in the community and discussed ways to strengthen the death notification system of MPDR. Definitions of maternal and neonatal death and still birth was explained while the role of CHVs in strengthening the death notification system was also discussed in the meeting. All the CHVs agreed to support the Health Assistant and Family Welfare Assistant for the reporting of deaths in time.
No more unwanted maternal deaths: Social Welfare Minister

Moulvibazar, 10 December, 2014: Minister for Social Welfare, Md. Mohsin Ali, MP has urged for all-out efforts to save the lives of mothers from unwanted deaths.

The Minister was visiting a stall at a Health Fair in Moulvibazar District Hospital premises where he was briefed on Maternal and Perinatal Death Review (MPDR) activities under the joint GoB-UN Maternal and Neonatal Health Initiative (MNHI) and status of maternal and newborn health.

The stall was decorated with Social Autopsy Behavioral Change Communication (BCC) festoons, Facility Death Review festoons, death notification Spot Map of the district and a display on implementation of the local action plan utilizing MPDR findings.

After a briefing on the death notification spot map by the Civil Surgeon, the Minister said, “The map indicates a large number of maternal deaths and calls for further efforts to save the vulnerable mothers from unwanted deaths.”

Dr. Mridul Kanti Ghosh, Deputy Team Leader of MPDR briefed the Minister on MPDR activities in the district. Dr. Riad Mahmud and Dr. Salequzzan from UNICEF also present.

UN Day Celebration showcases MPDR findings in Thakurgaon

Thakurgaon, 24 October, 2014: Ramesh Chandra Sen, Member of Parliament (MP) and Chair of District MNH Committee has observed MPDR progress including death status of 2014 during the UN Day Celebration.

A stall was decorated with Social Autopsy Behavioral Change Communication (BCC) festoons, Facility Death Review festoons, death notification Spot Map of the district and a display on implementation of the local action plan utilizing MPDR findings in 2014.

He expressed satisfaction over the progress of initiatives and reduction in maternal deaths in the district. He also mentioned that the district had four years data of activities under MNH Initiatives and improvement of MNHI could easily be identified. Iori Katu, Deputy Country Chief, UNFPA Chaired the UN Day celebration programme.

Lawmaker observes progress of MPDR in Baralekha

Moulvibazar, 2 December, 2014: CIPRB with MPDR findings participated in a health fair at Baralekha in Moulvibazar. A stall was decorated with banners, festoons, poster, leaflets, Agreed Standard Procedure (ASP) materials, activity photographs, death notification spot map of Baralekha.

Alhaz Mohammad Sahabuddin, Member of Parliament and Whip of the National Parliament, Upazila Chairman and the UH&FPO of Baralekha visited the MPDR stall. The UH&FPO, Baralekha responded to the queries relating to MPDR initiatives and also shared the process of identifying areas with high maternal and newborn deaths through death notification spot map of MPDR and the use of this findings at the local level to take remedial actions.
Advocacy meetings for selected unions with high maternal deaths:
Dr. Md. Ahad Ali, Civil Surgeon of Panchagarh

Panchagarh: Dr. Ahad Ali, Civil Surgeon of Panchagarh, emphasized the need for effective coordination among partner NGOs and arrangement of advocacy meetings in selected unions having high maternal deaths.

The decision came from a meeting on December 1, 2014 organized by MPDR Intervention at civil surgeon’s Conference Room.

Dr. Md. Miazur Rahman, Deputy Director of Family Planning, Panchagarh was present as co-chair of the meeting. The managers and field level staffs of partner NGOs working under MNHI also attended.

The objective of the meeting was to create demand for utilization of MPDR data among the NGOs working under MNHI in Panchagarh.

Dr. Md. Mizanur Rahman, Deputy Director of Family Planning, Panchagarh described the process of strengthening the death notification system through active participation of partner NGOs and utilization of MPDR data for successful implementation of programme at local level MNH planning.

The DDFP distributed responsibilities for areas that need special interventions among the partner NGOs. The NGO partners vowed to initiate intervention in respective areas having high maternal deaths.

The Civil Surgeon said, “A link should be developed between community and facility through effective coordination of partner NGOs for reducing maternal and neonatal deaths.

Dr. Mridul Kanti Ghosh, Deputy Team Leader of MPDR described the process of strengthening the death notification system through active participation of partner NGOs and utilization of MPDR data for successful implementation of programme at local level MNH planning.

The DDFP distributed responsibilities for areas that need special interventions among the partner NGOs. The NGO partners vowed to initiate intervention in respective areas having high maternal deaths.

Advocacy meetings should be organized in selected unions with high maternal deaths.”

Meanwhile in Thakurgaon, another meeting with the same objectives was held on December 2, 2014 at the Civil Surgeon’s Conference Room with Civil Surgeon, Dr. Md. Nazrul Islam, in the chair. Mr. Md. Tariqul Islam, Deputy Director of Family Planning of Thakurgaon was present as the Co-chair with participation from all partner NGOs working under MNHI in Thakurgaon.

The DDFP distributed the areas requiring special interventions among partner NGOs and urged them for taking immediate actions.

“Partner NGOs of MNHI should share their findings with each other so that an effective coordination can be established to improve the maternal and neonatal health in Thakurgaon,” DDFP, Thakurgaon mentioned.

Involvement of the community group members in MPDR intervention

Pirganj, Thakurgaon, 30 November, 2014: A Meeting on capacity development of the community group members of Community Clinic on the new approaches was held at Dastompur High School of Sengaon Union of Pirganj Upazila.

The meeting was chaired by UH&FPO and Co-Chaired by UFPO.

All community members including CHV, HA, FWA, CHCP, CSBA, Imam of mosques, member of Union Parishad participated in the meeting.

Process of engagement of CG members in the MPDR intervention was discussed in the meeting. The Community Group members expressed their commitment to participate and get involved in the initiative.

“It is essential to involve the Community Group members to strengthen the death notification process. Their keen participation in the social autopsy within the Community Clinic catchment areas is important,” Dr. Md. Abdul Majid, UH&FPO of Pirganj said.
**MPDR generated data needs to be in MIS of DGHS: MNH Programme Manager**

Dhaka, 13 November, 2014: A technical meeting on capacity development of health professionals of Medical College Hospital was organized at CIPRB Conference Room.

Professor Dr. Ferdoushi Begum, Vice-President, OGSB chaired the meeting while Prof. Dr. Abdul Mannan, Professor of Neonatology, BSMMU was present as the Co-Chairperson.

Dr. Md. Azizul Alim, Deputy Programme Manager, MNH of DGHS, Dhaka, Dr. Ishita Hossain Chowdhury and Dr. Nasima Khatun from DGHS and Professor MA Halim, Director, RCH Unit, CIPRB were present in the meeting.

Dr. Animesh Biswas, Senior Scientist, CIPRB presented the goal and objectives of the meeting with idea generation for new approaches in medical college hospitals.

Prof. MA Halim, Director, RCH Unit, CIPRB conducted the discussion session on presentation and clarified all queries.

The major focusing issues of the meeting was to explore the ways to develop capacity among the health professionals at medical college hospitals so that the team can support to strengthen facility based MPDR at the district level where MPDR is performing.

**Capacity development on MPDR at the medical college hospital on track**

Dhaka, 1 December, 2014: Dr. Md. Alamgir Ahmed, Programme Manager, MNH, DGHS underscored the need for incorporation of MPDR data in DHIS-2 of MIS, DGHS through the CHCP for the sustainability of MPDR.

His comment came from a National Level Monitoring Meeting held at CIPRB Conference Room in Dhaka.

The meeting was chaired by Dr Md. Alamgir Ahmed, Deputy Director, PHC and Programme Manager, MNH of DGHS, Dhaka. Dr. Ishita Hossain Chowdhury and Dr. Nasima Khatun from DGHS and Professor MA Halim, Director, RCH Unit, CIPRB were present in the meeting.

Professor MA Halim presented annual updates and described details on MPDR findings of 10 districts, utilization of findings, innovative works done in different districts, continuous monitoring & supervision of MPDR by District and Upazila managers, sustainability activities of MPDR.

Integration of MPDR data in DHIS-2 of MIS, DGHS was also mentioned during the presentation. Professor Halim mentioned that evidence-based data have been generating from MPDR intervention, which has identified a number of areas with high maternal and newborn deaths. Those data has been used at the local level to take remedial actions and implementation.

The meeting decided that a one-day workshop at selected medical college hospital can help to see how best possible ways a district can get support to ensure quality maternal and newborn health services at the facility level from the team formed at medical college hospital.

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"It is necessary to involve Community Clinic for MPDR data entry through CHCP and CSBA for death notification which will strengthen the reporting of MPDR. Data generated in MPDR needs to be incorporated in the District MIS (DHIS-2) of DGHS,"

Dr Md. Alamgir Ahmed, Programme Manager, MNH of DGHS.
MPDR updates shared with the DFATD Team at Thakurgaon

Thakurgaon, 30 November, 2014: A team includes Ms. Meaghan Byers and Mr. Joseph Sebhatu from the Department of Foreign Affairs, Trade and Development (DFATD) of the Canadian Government has visited Thakurgaon to observe the improvement of the programs under a joint initiative of the Government of Bangladesh (GoB) and the United Nations (UN) funded by DFATD.

A Meeting was held at Thakurgaon in presence of DFATD team including the GoB & UN officials and representatives from the partner NGOs. CIPRB presented the updates of MPDR Intervention in Thakurgaon along with findings. The DFATD team members expressed their satisfaction with the MPDR as an evidence-based intervention and delivered special thanks for MPDR Presentation in detail. They discussed on the social barrier responsible for these maternal and neonatal deaths in context of Bangladesh & also the progress of findings according to years from the beginning at Thakurgaon.

Save the Children Team observed MPDR activity in Moulvibazar

Moulvibazar, 19 October, 2014: The Mamoni, HSS Team of Save the Children has been briefed on MPDR intervention in Moulvibazar district. A joint team from UNICEF, Save the Children and CIPRB participated in a discussion meeting with the Civil Surgeon of Moulvibazar where CS described how DGHS and DGFP are jointly implementing MPDR in Bangladesh. Prof. MA Halim, Director, RCH Unit, CIPRB discussed the technical issues related to the utilization of findings of MPDR. Then the team visited Moulvibazar District Hospital and Upazila Health Complex of Sreemangal to observe facility death review process. The visit was organized as Ma-Moni wanted to expand MPDR in their project-districts.

On the following day, the team observed a verbal autopsy of a maternal death in Chawtoli Tea Garden of Kalapur Union and a social autopsy of another maternal death at Boruna Village in Kalapur Union of Sreemongal upazila. Along with the team Dr. Nasima Khatun, Deputy Program Manager, MNH, DGHS also present during both verbal autopsy and social autopsy conduction. On behalf of CIPRB Dr. Animesh Biswas and Dr Riad Mahmud from UNICEF lead the team. During the social autopsy, Dr Riad Mahmud explains the process of doing social autopsy to the Save the Children team. During verbal autopsy conduction Assistant Health Inspector of the Union interviewed the deceased family, whereas from family planning department Family Planning Inspector of the Union conducted the social autopsy session.

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