

Addressing Challenges of Maternal and Neonatal Health Care in Urban Slums of Bangladesh

Kaosar Afsana
Director Health Nutrition & Population

October 20 | 2015

Global Maternal Newborn Health Conference
Mexico City



Presentation Outline

- **Context and Challenges**
- **Design and Strategies**
- **Lessons learnt**
- **What next?**

Setting the Context

Slums of Bangladesh

- Temporary settlement
- Continuous evictions
- Lack of basic amenities
- Unhygienic sanitary environment
- Scenario is worse



Challenges of MNH in Urban Slums

Rapid Urbanization

- Increased urban population growth
- Migratory, unsettled population

Epidemiological and demographic situation

- Despite declines, maternal, neonatal and child mortality and morbidity are still high
- Fertility decline with rising, unstable young population

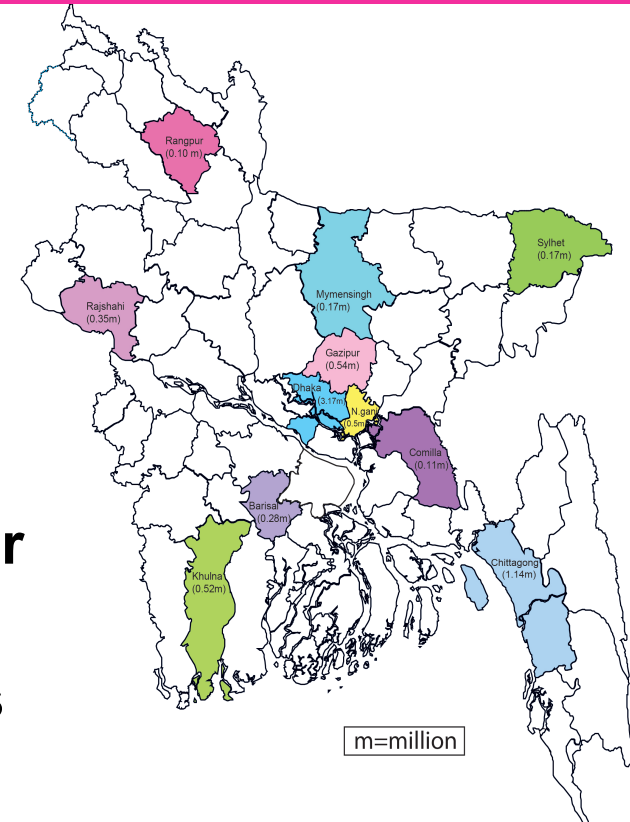
Health system issues

- No structured public health services for slum people
- Inadequate access of the poor to quality, affordable health care
- Crisis of skilled health workforce

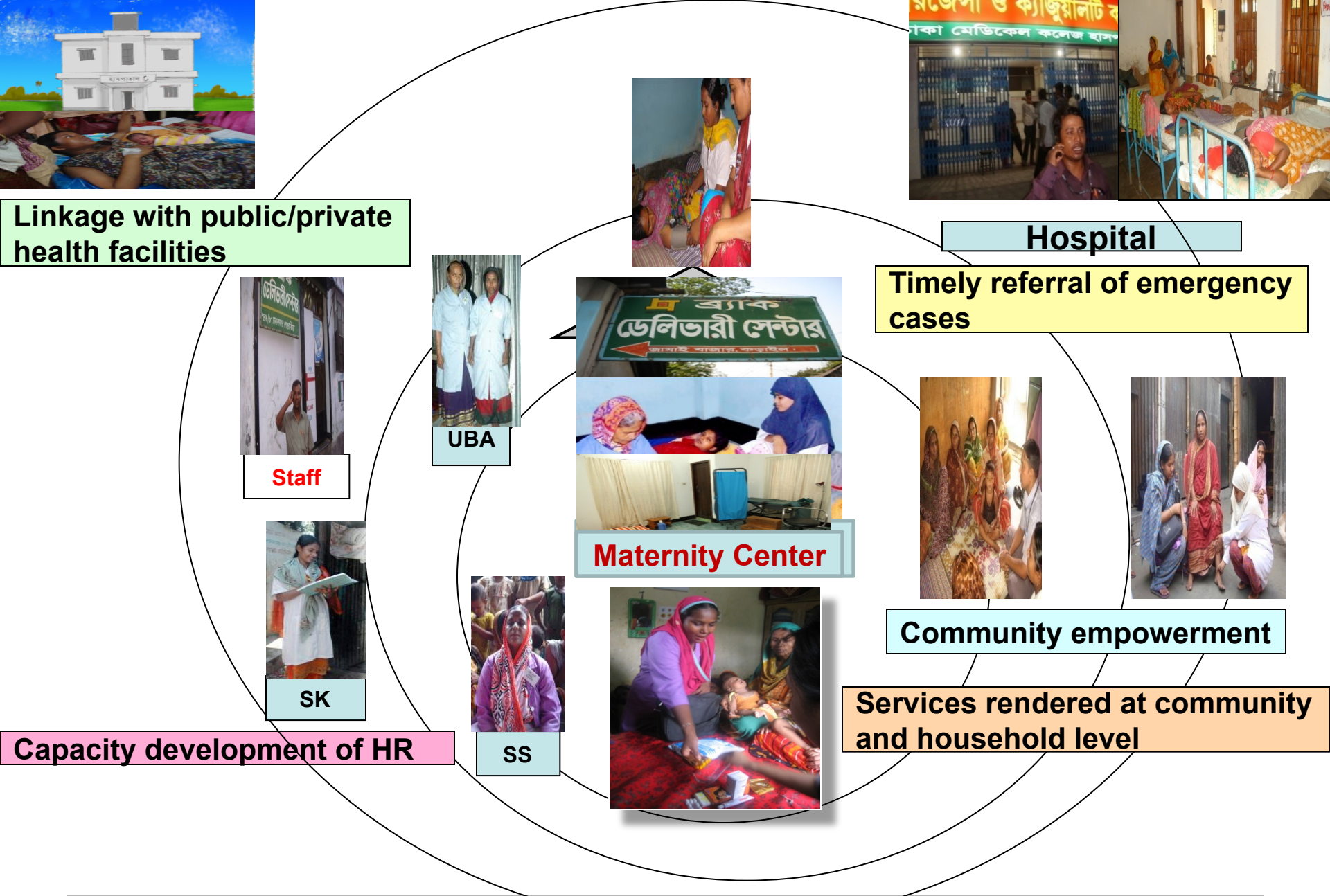


Manoshi :Getting into Slums

- **Understanding the slum dynamics**
 - Facing the gate-keepers of slums
 - Seeking support from community support group
- **Realizing context of childbirth practices**
 - One size does not fit all
- **Adapting BRAC's community health worker model**
- **Focusing on behavior change and practices by connecting community to resources**



- **BRAC initiated Manoshi in 2007**
- **Scaled up to now slums of 11 city corporations and one municipality reaching 7 m slum populations**

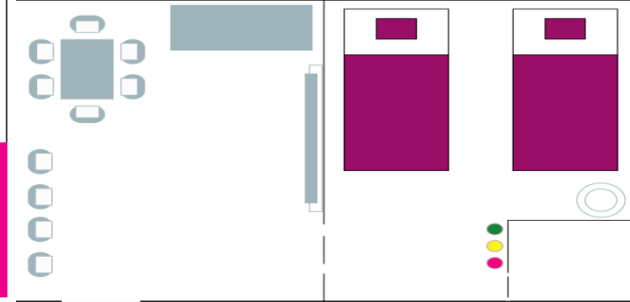


Manoshi Design and Operational Strategies

BRAC Delivery Center



ব্র্যাক ডেলিভারী সেন্টার
কুনিপাড়া, মগবাজার, ঢাকা



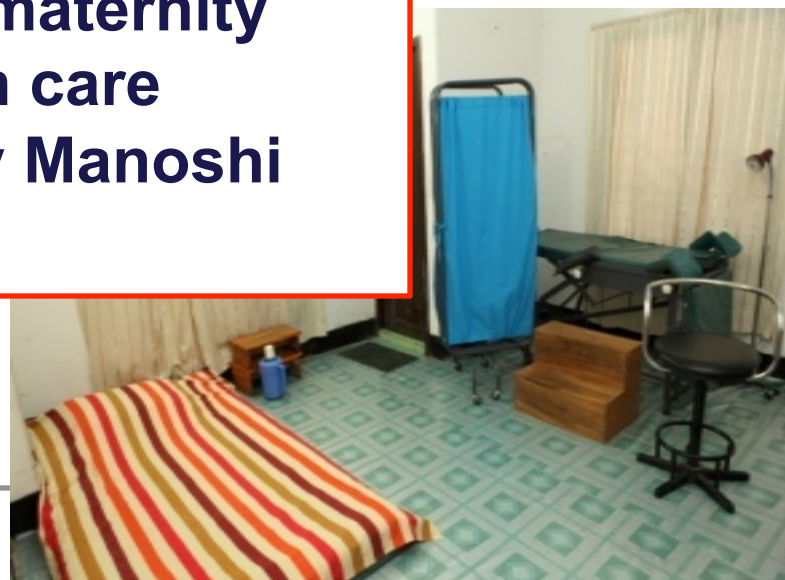
- Privacy and dignity
- Cleanliness
- Women-friendly, culturally appropriate
- Immediate diagnosis and referral of maternal and newborn complications to hospitals
- UBA supported and supervised by Manoshi midwives and trained medical professionals

Transition - BRAC Maternity Centre

- Understanding need of women
- Addressing unnecessary referrals and c-section
- Providing better quality services

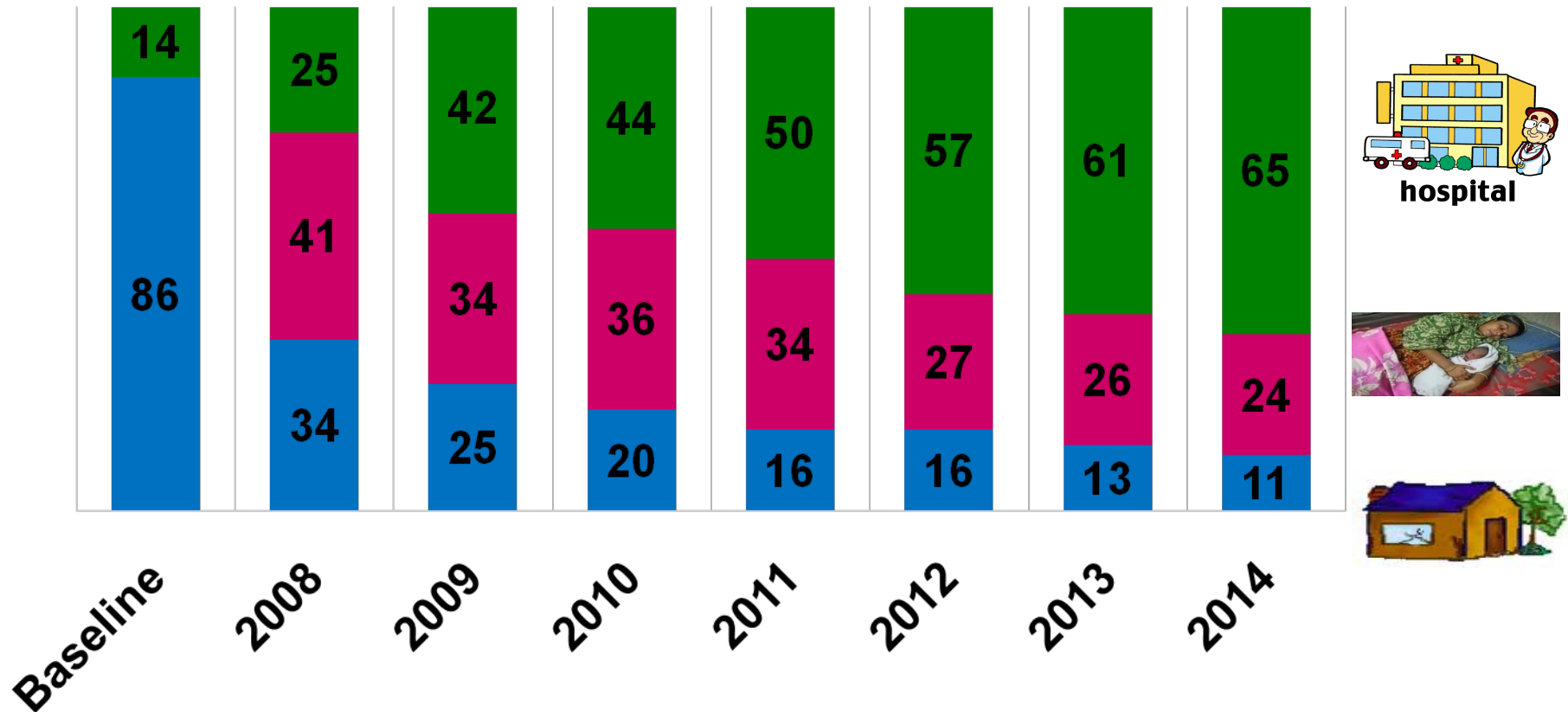


- Respectful maternity and newborn care
- Managed by Manoshi Midwives



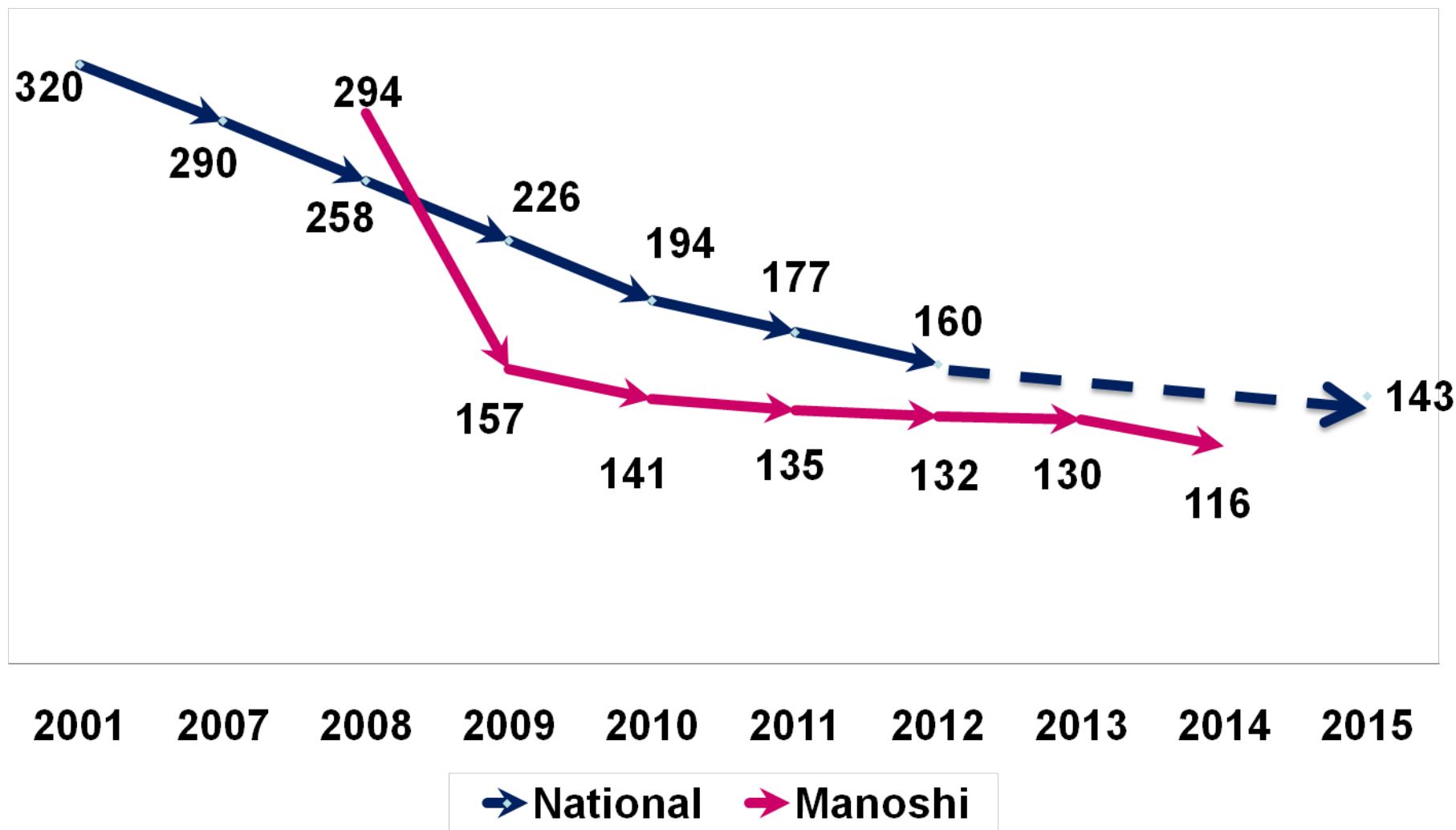
MANOSHI I Place of Delivery

■ Home ■ Delivery Centre ■ Facility

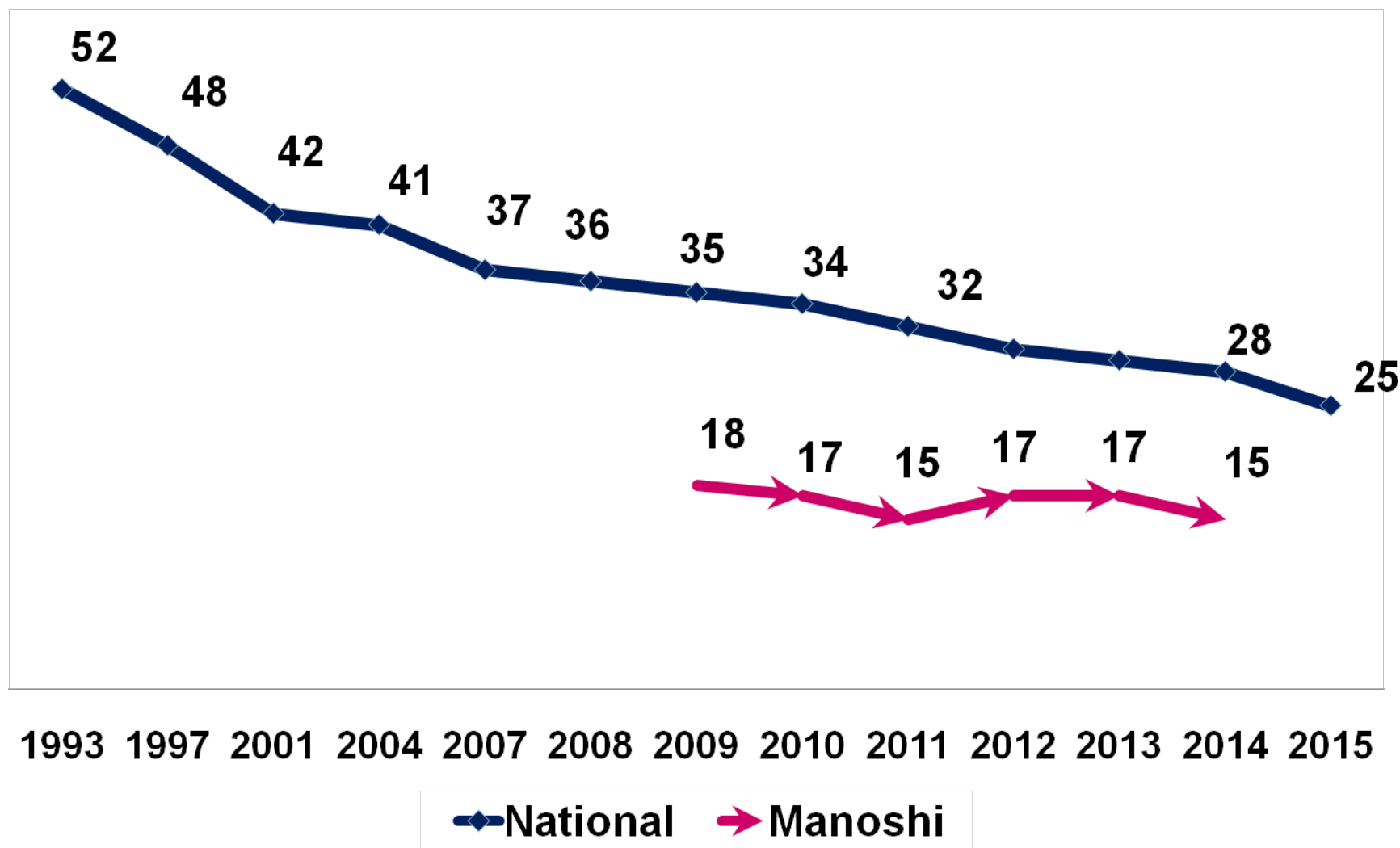


A major shift is observed in place of birth from home to hospitals due to supportive, timely referral system

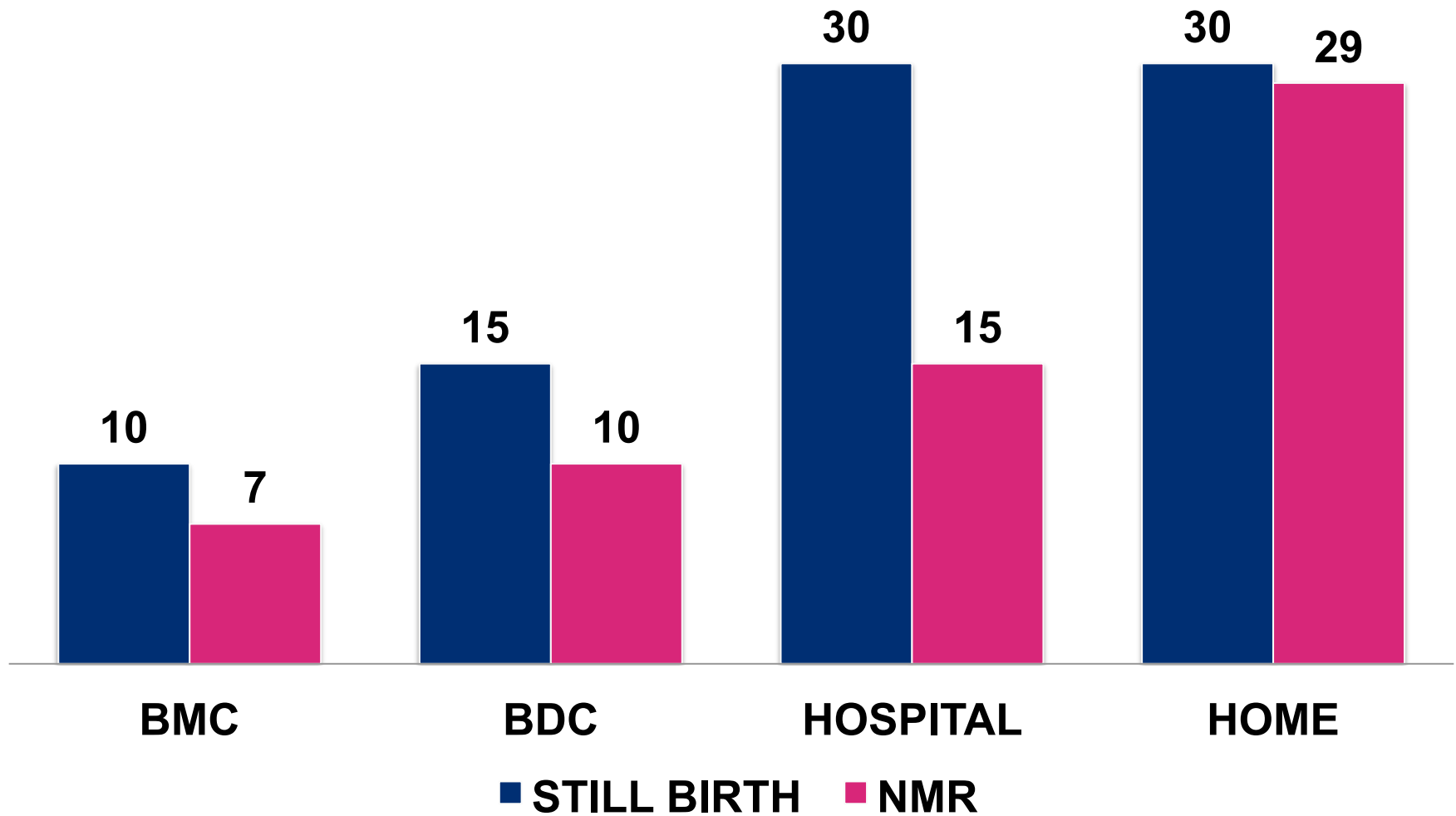
MANOSHI | Trend in Maternal Mortality Ratio



MANOSHI | Trend in Neonatal Mortality Rate



MANOSHI I BMC Achievement

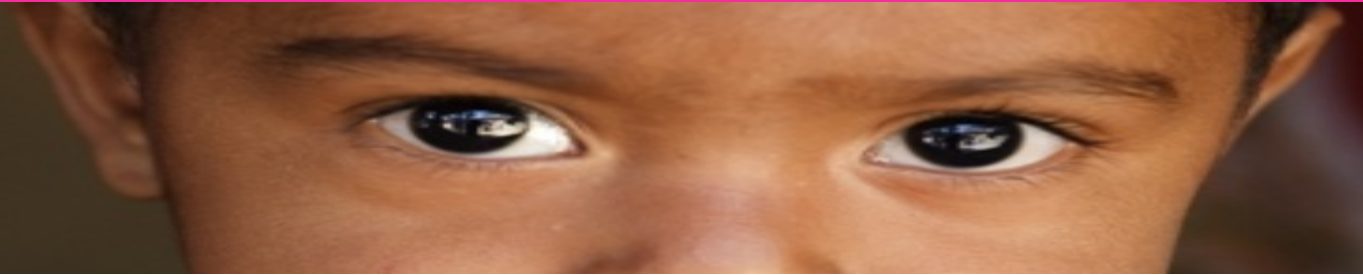


MANOSHI I Best Practices

- **Transitioning BRAC Delivery Centers to BRAC Maternity Centers maintaining respectful maternity and newborn care**
- **Integrating community health workers into social network**
- **Community mobilizations allowing women to access resources knowledge and services**
- **Strong referral system supporting women/newborn babies to seek health care from facilities**
- **Partnership with multiple stakeholders ensuring quality services and bridging the gaps**



Lessons from Manoshi to SDGs



- **Manoshi is an example of simple innovative solutions to maternal and newborn health care in urban slums**
- **Recognition of slums and permanence of 'citizenship' within the 'arrival city'**
- **Leadership and political commitment**
- **Participation and commitment of all stakeholders in Investing, planning and implementing integrated health interventions to provide quality of care to mothers and newborns**
- **Investment in continuous innovations for improved, sustainable health care of the urban poor, with certainty and dignity in their life**

- **Bill & Melinda Gates Foundations, DfID and DFAT**
- **UPHCSDP and their NGO clinics**
- **Government medical college hospitals and private hospitals/clinics**
- **Community**



Thank you