Effectiveness of Community Based Skilled Birth Attendant Program
To
Improve Maternal Health Care Service in Bangladesh

Dr Fariza Rahman

Advisor: Dr Rita Kabra

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Country Profile: Bangladesh

- Developing country situated in South Asia
- Population: 155 million
- Per capita income: USD 482
- Literacy rate: 50%
- 77% of the population living in rural areas

Maternal Health Care Situation

- High maternal mortality rate (MMR): 3.2 per 1000 live births

- 80% of the maternal deaths occur at home during delivery

- 80% deliveries attended by traditional birth attendants and relatives

- Deliveries by a medical trained person: 20.1%.

Statement of problem

- Lack of adequate Trained skilled birth attendants
- Mainly concentrated in secondary and tertiary level
- 2003:
  - training program for community-based skilled birth attendants
  - piloting in six districts (48 sub district)
  - through six-month competency based training on basic midwifery in order to
    - improve access to skilled care at community level
    - and strengthen referral to EOC for women with complications.

Rationale

- The Millennium Development Goal (MDG) 5, target 5a is reduction of maternal mortality by 75% by 2015
- The global indicators to track progress;
    - 5.1 MMR
    - 5.2 proportion of birth attended by skilled birth attendant that include doctors, nurses, midwife and the other health professionals trained to proficiency in normal pregnancy, labor and post partum period and the management of complication in mother and newborn.
-   This study is aimed to find out the impact of "community based SBA" on indicator no 5.2 "proportion of birth attended by skilled birth attendant" to evaluate and expand the ongoing program.

Objectives

- *General objective*

  To assess the effectiveness of using "community based skilled birth attendants" for improving maternal health care in Bangladesh.

- *Specific objectives*
  - Does community based SBA program increase use of antenatal care?
  - Does community based SBA program increase skilled birth attended delivery?
  - Does community based SBA program improve management of complications?
  - Does community based SBA program decrease maternal and perinatal death?

Methods

- **Study design : E**cological study (group not the individual is the unit of observation).
- **Selection of study area**:
  - Randomly selected one district from the intervention area.
  - Randomly selected one district from non intervention area as control after matching demography, literacy level, fertility rate and health care facility.
- **Study population:** Women of 15-49 years of age who was pregnant and gave birth of child in 2007-2008.
- **Data source:**
  - health center record
  - program record and statistical record of 2008 and 2007
  - community survey in defined area

Method (cont)

- **Outcome data:**
    - no. of pregnancies
    - no. of antenatal check-ups
    - no. of deliveries attended by Skilled birth attendants
    - no. of pregnancy complications
    - no. of maternal & perinatal deaths
    - no. of referrals

- Data collected from hospital registry and community survey on outcome events will be analyzed for both case and control district.
- Standard tests will be used to calculate odds ratio (OR) and their 95% confidence interval between the areas.

Conclusion

- More than 70% people are living in rural areas in Bangladesh.
- Community health workers are mainly derived from them and play an important role to improve health care services.
- Training on comprehensive EOC care can enable them identifying the complications and to perform rapid intervention at the early stage.
- Their performance must be evaluated to expand the program.
- This study may indicate justification to expand the community based skilled birth attendants program to improve the maternal health care service in Bangladesh.

THANK YOU
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