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To request further information including a copy of the report or schedule interviews, please contact:

Nthabiseng Moseki
tel 0117721000 / 0727975160
email nthabisengm@meropa.co.za

Maria Djordjevic
tel 011 7721000 / 0823346192
email mariad@meropa.co.za

Every Death Counts: Saving the lives of South Africa's mothers, babies and children

95 000 South African mothers, babies and children die each year in South Africa; Many of these lives can be saved. Policy makers, managers, healthcare providers and communities must work together to make it happen.

Three South African health reports – *Saving Mothers*, *Saving Babies* and *Saving Children* – provide valuable data on thousands of deaths that occur each year and make recommendations to strengthen quality of care provided to mothers, babies and children at the time when they need it most. The Honourable Minister of Health Manto Tshabala-Msimang highlighted these mortality audit reports last month when she launched three committees to oversee the audit process.

“We chose to focus on this group because maternal and child health are the best indicators of the performance of the health system.”

- Honourable Minister of Health Manto Tshabala-Msimang, 25 February 2008, Boksburg

In *Every Death Counts*, the authors of these three audit reports have come together to present a set of unified recommendations with specific actions for government officials, policy makers, health managers and healthcare providers to save lives.

Situation

Each year in South Africa:

- At least 1 600 mothers die due to complications of pregnancy and childbirth.
- 20 000 babies are stillborn and another 22,000 die before they reach one month of age.
- In total, at least 75 000 children die before their fifth birthday.

This toll of over **260 deaths every day** is due to five major health challenges:

- Pregnancy and childbirth complications
- Newborn illness
- Childhood illness
- HIV & AIDS
- Malnutrition.

South Africa needs to address these “Big Five” in order to meet the Millennium Development Goals (MDGs) for maternal and child survival and for combating HIV & AIDS by 2015. South Africa is one of only a dozen countries not making progress towards the child survival MDGs.

Some countries that had similar mortality rates and similar gross national incomes to South Africa, such as Brazil, Mexico, and Egypt, are on track to meet MDG 4 for child survival and have halved their under-five mortality rate since 1990.

There are a number of factors contributing to the lack of progress in reducing deaths. HIV & AIDS is a major contributing factor. HIV prevalence among pregnant women remains extremely high though progress has been made to improve testing, prevention of mother-to-child transmission (PMTCT), and provision of antiretroviral treatment. Still, each year 300 000 pregnant women with HIV need PMTCT services for themselves and their babies. Poverty and extreme inequity are barriers to accessing high quality essential services and limit the ability of families to make healthy choices.

These deaths are more than just statistics. Andiswa Mateza returned to the Eastern Cape to be closer to her family when she found she was pregnant with twins. Andiswa started experiencing very high blood pressure when she was 22 weeks pregnant and had an emergency cesarean section to deliver the twins. The babies were both very small; the boy died just two days after birth, and the girl died at 8 weeks. Edward Mateza, Andiswa's husband, "On the night of 18 January the baby stopped breathing, but there was no transport and the clinic was too far. On 19 January my wife took her to the hospital, but it was too late. On 25 January I was taking leave from work in Cape Town to visit my wife and parents so the baby could be named, but she died too soon. My baby girl was never named."*

Solutions

Solutions exist to address the Big Five health challenges and prevent these deaths. In South Africa a high percentage of births take place in healthcare facilities, and we have high coverage for many primary healthcare interventions, such as contraception, antenatal visits, and immunization of children. Effective life-saving interventions are in place, but what is required is high quality implementation, especially for the poorest citizens.

"Providing quality care means doing the right thing right, right away"

- Dr Robert Pattinson, report author and Director of Maternal and Infant Health Care Strategies Unit, Medical Research Council

Saving Lives

Many of these lives could be saved – over 40 000 lives each year – if well-known solutions are implemented.

"A new analysis for this report revealed that at least 40 200 babies and children could be saved every year if high-impact interventions reached all families in South Africa. A high proportion of women's lives would also be saved with more investment in the same solutions that save the lives of babies and children."

- Dr Joy Lawn, report author and Senior Policy and Research Advisor for Save the Children US

The recent investigations into mortality at Frere Hospital and the lack of essential equipment at Chris Hani-Baragwanath Hospital reveal that there is still more that can be done and that everyone has a role to play in ensuring the best care for South Africa's future.

Not all of the solutions can be found in the health system. Poverty is an important underlying cause of death that is related to each of the Big Five health challenges. Consistent leadership and accountability to address crosscutting health system and equity issues is required.

Steps to Action

There are a number of success stories involving South Africans using audit data to make a difference in healthcare provision.

For example in Witbank Hospital, Mpumalanga, when *Saving Children* audit data indicated that only 15% of mothers agreed to be tested for HIV, counselling practices were investigated. The low testing rate was thought to be due to poor understanding of HIV on the part of both counsellors and mothers, and because only group counselling was offered with no opportunity for confidentiality. With a change in the local protocol for HIV testing and improved counselling skills, healthcare providers were able to see an increase in HIV testing for mothers and reduced child deaths.*

This is just one example demonstrating that everyone has a role to play – government officials and policy makers, health managers, healthcare providers, and communities must all take steps to provide every woman, newborn and child with essential care.

“We all need to use our talent to improve the quality of care that mothers, babies and children receive in South Africa. By doing this, at the very least, we can honour those of our country’s people who died earlier than they should have.”

- Dr Mark Patrick, report author and paediatrician at Grey’s Hospital, Pietermaritzburg

Every Death Counts presents recommendations and strategies to address the most pressing problems, but these words must be fully implemented if South Africa is to see a reduction in maternal, neonatal and child mortality, for every death to truly count and be counted.

* See options for additional stories

Experts available for interviews

Prof Mickey Chopra, Director of Health Systems Research Unit, Medical Research Council
mickey.chopra@mrc.ac.za

Dr Robert Pattinson, Director of Maternal and Infant Health Care Strategies Unit, Medical Research Council
Robert.Pattinson@up.ac.za

Dr Sithembiso Velaphi, Neonatologist, University of the Witwatersrand
velaphisc@medicine.wits.ac.za

Dr Mark Patrick, *Saving Children* editor and paediatrician at Grey’s Hospital, Pietermaritzburg
mark.patrick@kznhealth.gov.za

Dr Joy Lawn, Senior Policy and Research Advisor for Saving Newborn Lives/Save the Children US
joylawn@yahoo.co.uk

Dr Ngashi Ngongo Chief, Health and Nutrition Section, UNICEF South Africa
nngongo@unicef.org