

MDG 4 and 5 achievable, say professionals

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The health related Millennium Development Goals 4 and 5 on child and mother survival are achievable, health professionals across South Asia have said suggesting for reaching communities and strengthening public health systems to meet the target by 2015.

They also pleaded for a greater partnership among all health professional societies and associations as well as journalists in the region, hub of the highest number of child and maternal mortality after Africa, to cut child deaths by 50 per cent and mother by three-quarters within next seven years.

'We need greater partnership among paediatricians, midwives, gynaecologists, pharmacists, nurses, media and others to reduce child and maternal deaths drastically,' Zulfikar Ali Bhutta of Aga Khan University, Pakistan said at a regional workshop in Dhaka Saturday night.

The Partnership for Maternal, Newborn and Child Health, a new coalition of 250 partners since 2005, organised the three-day workshop at Sheraton Hotel, where delegates from South Asian countries and beyond are taking part.

Deputy executive director of BRAC and dean of James P Grant School of Public Health Dr Mustaque R Chowdhury, coordinator of Ganoswashthya Kendra Dr Zafrullah Chowdhury, director general of the Directorate General of Health Services Professor Abdul Faiz and special adviser to the Director of PMNCH Andres de Fransisco spoke on the occasion.

According to statistics, South Asia, which accounts for the biggest number child and mother deaths from 11 million annually, has reduced 20 of such deaths between 1990 and 2007. The achievement is not enough as more than 60 per cent deliveries in South Asia, nearly 80 per cent in Bangladesh, still occur without trained birth attendants and causing many deaths.

Unsafe abortion and malnutrition are the two other major causes for highest number of maternal deaths, while infection claims majority of child lives in the region, the workshop was told on Sunday. The World Health organisation finds a strong correlation between inadequate health workers at local levels and child-mother mortalities.

Professor Abul Faiz, who opened the workshop originally scheduled in Karachi, Pakistan, but later shifted to Dhaka for security reasons, said the health related MDGs were possible to attain within the stipulated time provided local solutions were given more importance than foreign prescriptions.

He said the donors' priority on high-tech solutions at secondary and tertiary levels had caused damage to the ongoing programmes. He, however, appreciated the change of the mindsets of lending communities, now focusing on communities for the quick attainment of development goals set by the United Nations for 2015.

'Bangladesh is very much on track for achieving MDG four on child survival,' he said adding that MDG five on mothers lives needed further steps to be materialised. The child mortality has come down to 65 per 1,000 live births in 2007 from 116 in 1997, but it has to be brought down further to 50 by next seven years in Bangladesh, he said.

The government and lenders have been focusing on increasing child delivery at health facilities including clinics and hospitals, a programme Dr Zafrullah appreciated but cautioned that this

might lead to privatisation, commoditisation and commercialisation of primary healthcare for the poor.

Instead, he said, the traditional birth attendants, nurses and other health professionals should be trained up, so that the people at local levels can have easy access to safe delivery at low costs. People of a country, where nearly 50 per cent, still live below poverty level, could not afford delivery at public or private hospitals for high costs.

More than three million children born each in Bangladesh, a country where many of the mothers die during delivery at homes at the hands of unskilled or semi-skilled birth attendants. Nearly 60 per cent of children suffer from malnutrition due to poor intake of nutritious food by their mothers during pregnancy.

The government has, however, taken an initiative to check maternal and child deaths from unsafe delivery through developing adequate trained birth attendants at local levels, the workshop was told.

The country suffers from acute shortage of community-based skilled birth attendants, said a senior official of Bangladesh Nursing Council, adding training was being provided at 30 centres across the country to develop necessary health professionals, especially midwives