

Tapping into the Resources of Skilled Birth Attendants in Reducing the Maternal Mortality Rates in Developing Nations

Dear Editor,

Ensuring optimal maternal health has been identified as one of the most important global public health priorities for many decades.^[1] Nevertheless, even today, in excess of 800 women lose their lives each day across the globe from avoidable factors related to pregnancy and childbirth, of which 99% are reported in developing nations.^[1] This is an alarming concern, and remains a major challenge which the program managers need to respond to despite the estimated 44% reduction achieved under the Millennium Development Goals.^[1,2]

In addition, because maternal and newborn health is closely linked, with almost 2.7 million newborn deaths being reported annually, presence of skilled care before, during, and after childbirth is one of the most cost-effective interventions to save lives of millions of women and newborns.^[1] Ensuring the presence of skilled personnel (doctor or nurse or midwives or trained birth attendants) during childbirth is the need of the hour because even now almost 49% of the women remain unattended during childbirth.^[1,2] Further, it has been observed that only 4 out of 10 pregnant women from low-income nations receive the recommended four antenatal visits (absence of skilled workers), in contrast to the women from high-income nations, where it is the general norm (constant presence of skilled workers).^[1,2]

Most of the developing nations which are facing an immense shortage of doctors or primary care physicians, midwives or trained birth attendants can play an indispensable role in improving the maternal health indicators by assisting them in different dimensions.^[2] In comparison to the health staff, being from the same communities, these midwives are in a much better state to respond to the various barriers, which prevent women from availing health care services, be it poverty, inaccessibility, poor awareness, concerns with health care delivery, or even sociocultural practices.^[2,3]

According to the recent estimates, it has been predicted that well-trained and well-supported midwives can prevent almost 67% of maternal and newborn deaths occurring in low-resource settings.^[2] In-fact, by provision of training to the midwives, in Guatemala, the maternal mortality has declined by 27% in less than 10 years.^[2] In addition, these skilled birth attendants play a defining role in deciding the place of birth, convincing women for availing antenatal care, and in reducing the prevalence of

mental illnesses.^[3,4] Further, amidst the rising incidence of cesarean section, which is often not medically indicated, these midwives play a crucial role in explaining to the pregnant women the advantages associated with natural births, and not undergo cesarean sections, unless indicated.^[3] Acknowledging their importance, a special training program has been developed in Pakistan and South Asia to improve their level of competence.^[5] A similar sort of training has even been conducted in Guatemala, where in response to the constant efforts of the international welfare agencies, close to 90% of the births in rural settings are now attended by the trained birth attendants.^[2]

To conclude, the trained birth attendant remains a key person of the health team to bridge the gap pertaining to poor utilization of maternity services, and thus reduce maternal mortality. There is a considerable need to train them adequately and support them to exercise their responsibilities, especially in low-resource settings.

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Conflicts of interest

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