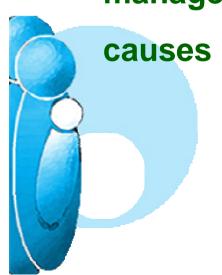


What is maternal death?

 Death of a woman while pregnant or within 42 days of termination of pregnancy irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental



Implication of the definition

- Direct obstetric deaths are those resulting from obstetric complications of the pregnant state
 - Pregnancy
 - Labor
 - Puerperium
- Interventions
 - Omissions
 - Incorrect treatment

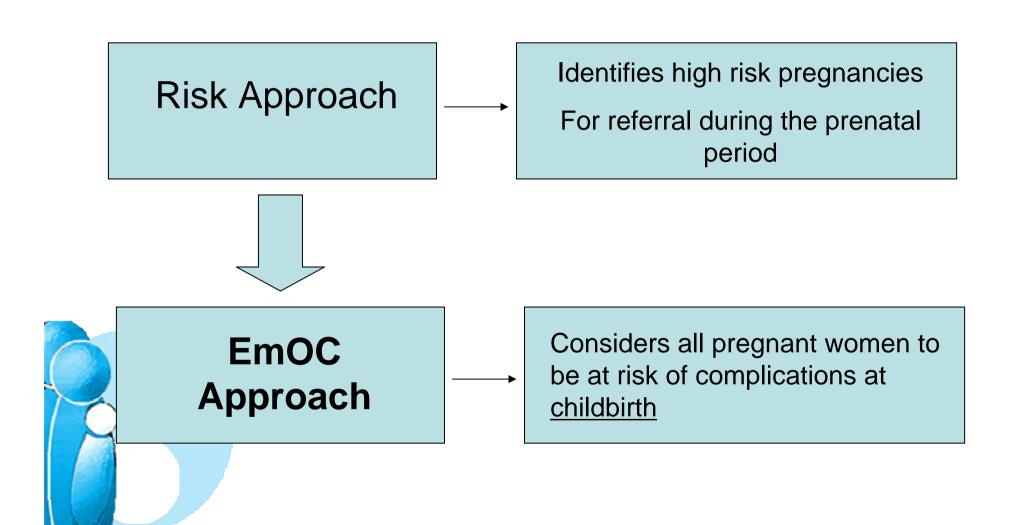
Chain of events resulting from any of the above

Implication of the definition

- Indirect obstetric deaths are those resulting from:
 - Previous existing disease
 - Disease that developed during pregnancy
- Both are not due to direct obstetric causes but aggravated by the physiologic effects of pregnancy



Paradigm shift



Implication of the "Shift"

At the individual level

- Every mother will have access to skilled care during pregnancy
 - Skilled attendants: midwife, nurse, doctor
 - Emergency treatment for all complications during pregnancy, childbirth and after birth
 - Post-partum family planning
 - Basic neonatal care

Implication of the "Shift"

At the service level

- A transition to a more appropriate distribution of childbirths along the continuum of care
 - More "normal childbirths" in basic facilities
 - More emergency referrals to intermediate level facilities
 - Fewer childbirths at home and at a higher level

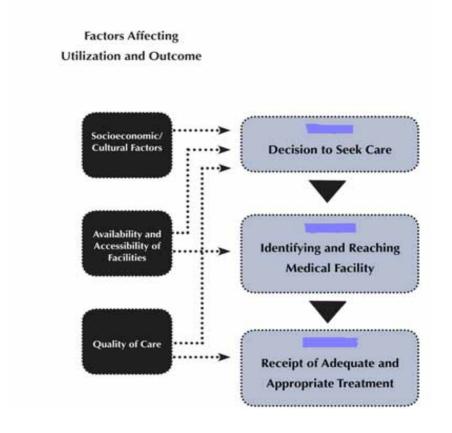
Ensure Success of the "Shift"

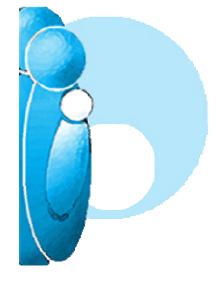
24-hour EmOC facility + skilled attendants and transportation

Improve accessibility, utilization and quality of services for the treatment of complications

Address the "Three Delays" of deciding to seek care, reaching appropriate care, and receiving care

The Three Delays





Source: http://www.unfpa.org/mothers/obstetric.htm

1) Delay in deciding to seek medical care

- Failure to recognize danger signs
- Lack of money to pay for medical expenses and cost of transportation
- Fear of being ill-treated in the health facility
- Reluctance from the mother or the family due to cultural constraints
- The woman or family member present at childbirth lack power to make a decision
- Lack of encouragement from relatives and community members to seek care

 No available person to take care of the children, the home and livestock
 - Lack of companion in going to the health facility



2) Delay in identifying and reaching the appropriate facility



- Distance from a woman's home to a facility or provider
- Lack of roads or poor condition of roads
- Lack of emergency transportation whether by land or water
- Lack of awareness of existing services
- Lack of community support

3) Delay in receiving appropriate and adequate care at the health facility

- Lack of healthcare personnel
- Gender insensitivity of healthcare providers
- Shortages of supplies, i.e. emergency medicines or blood
- Lack of equipment for EmOC
 - Lack of competence of health care providers to deliver EmOC
 - Weak referral system includes transportation and communication

