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Spending less than \$5 per person could save millions of maternal, child lives every year

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By spending less than \$5 per person on essential health care services such as contraception, medication for serious illnesses and nutritional supplements, millions of maternal and child lives could be saved every year, according to a new analysis led by the Johns Hopkins Bloomberg School of Public Health.

The findings, published April 9 in *The Lancet*, suggest it is possible to save many lives by broadly expanding basic services in the 74 low- and middle-income countries where more than 95 percent of the world's maternal and child deaths occur annually.

In 2015, nearly six million children under the age of five died as did more than 300,000 women from pregnancy-related causes across the globe. These numbers fall short of the Millennium Development Goals for reducing maternal and child mortality by 2015 that world leaders committed to back in September of 2000. The goals called for a two-thirds reduction in child mortality from 1990 levels and a three-quarters reduction in maternal mortality from 1990 levels.

"Many of these deaths could be prevented if high-impact and affordable solutions reached the populations that needed them most," says study leader Robert Black, PhD, a professor in the Department of International Health at the Bloomberg School. "Our analysis shows that expanding access to care to keep more mothers and children alive and healthy is feasible and a highly cost-effective investment."

Black will present the research April 9 at the Consortium of Universities for Global Health conference in San Francisco.

For the study, the researchers analyzed three essential packages of care presented in the Reproductive, Maternal, Newborn, Child Health volume of *Disease Control Priorities*, 3rd edition, published by the World Bank Group. The three packages (maternal and newborn health, child health and reproductive health) together comprise 66 proven health interventions that focus on a range of health problems.

The researchers found that four million lives could be saved every year by reaching 90 percent of the target populations with services included in the maternal and newborn health and child health packages. Interventions ranged from improving pregnancy and delivery care, to treating life-threatening infectious diseases like pneumonia, diarrhea, and malaria, and better childhood nutrition. These services, they found, could prevent 1.5 million newborn deaths, 1.5 million child deaths, and 149,000 maternal deaths — equivalent to half of all maternal, newborn and child deaths annually. They could also prevent 849,000 stillbirths, or more than a third of all annual stillbirths.

The authors looked separately at the reproductive health package. By meeting unmet demand for family planning, more than 1.5 million lives could be saved every year by preventing just under 28 million pregnancies. Increased access to contraception would reduce maternal deaths by 67,000, newborn deaths by 440,000, child deaths by 473,000 and stillbirths by 564,000, they found.

Health services from all three packages with the largest impact included management of acute malnutrition; pre-term birth care; provision of contraception; management of labor and delivery; and treatment of serious infections including pneumonia, diarrhea, malaria and neonatal sepsis.

Researchers also estimated the cost of expanding coverage for all three packages to reach 90 percent of the target populations. Estimates produced for this analysis show that all three packages could be immediately scaled up to nearly all people in need with an investment of \$6.2 billion in low-income countries, \$12.4 billion in lower middle-income countries, and \$8 billion in upper middle-income countries. This is equivalent to an average investment per person in 2015 of just \$6.70, \$4.70, and \$3.90, respectively -- or \$4.70 overall.

"For less than \$5 per person, essential health services could reach the people who are most in need of them," Black says. "Community health workers or primary health centers can deliver the majority of these services, which reduces the cost of expanding coverage.

"The benefits of scaling up these interventions extend well beyond health. For example, improving care at the time

of birth gives a quadruple return on investment by saving mothers' and children's lives and preventing stillbirths and disability, while investing in nutrition can help children reach their potential in cognitive development."

"Reproductive, maternal, newborn, and child health: key messages from Disease Control Priorities, 3rd Edition" was written by Robert E Black, Carol Levin, Neff Walker, Doris Chou, Li Liu, Marleen Temmerman, for the DCP3 RMNCH Authors Group.

Source:

Johns Hopkins Bloomberg School of Public Health
