

Birth Preparedness and Complication Readiness



Photograph by Rick Maiman, Courtesy of the David and Lucile Packard Foundation

A Matrix of Shared Responsibility

Maternal
& Neonatal
Health

Delays can kill mothers and newborns

Many more women and newborns would survive childbirth if they received the care they need when they need it. The Three Delays, an explanatory model, identifies three phases during which delays can contribute to the death of pregnant and postpartum women and their newborns. These phases are

- deciding to seek care
- reaching care and
- receiving care

There are several reasons for these delays. The model groups the reasons into factors that underlie each delay¹. For example, failure to recognize signs of complications, failure to perceive severity of illness, cost considerations, previous negative experiences with the healthcare system, and transportation difficulties are factors that result in delayed decisions to seek care. The lengthy distance to a facility or provider, the condition of roads, and the lack of available transportation are factors that commonly create a delay in reaching care. The uncaring attitudes of providers, the shortages of supplies and basic equipment, the non-availability of healthcare personnel and the poor skills of healthcare providers are factors contributing to a delay in receiving care.

Many of the reasons contributing to these delays are neither unpredictable nor unique. This means that it is possible to anticipate and plan for them in many settings.

Preparing for birth and complications reduces delays

The Maternal and Neonatal Health Program believes that these commonly cited factors can be averted with advance preparation and rapid action, thus reducing the delays in seeking, reaching or receiving care. This is the essence of Birth Preparedness and Complication Readiness (BP/CR).

Life-threatening delays can happen at home, on the way to care, or at the place of care. BP/CR must therefore, include plans and actions that can be implemented at each of these points. BP/CR is a comprehensive matrix that includes the woman and her family, as well as the community, healthcare providers, facilities that serve them, and the policies that affect care for the woman and the newborn.

The BP/CR matrix encompasses the responsibilities, actions, practices and skills needed to help ensure the safety and well being of the woman and her newborn throughout pregnancy, labor, childbirth, and the postpartum period. It outlines plans and actions that can be implemented wherever life-threatening delays may occur – at home, on the way to care or at the place of care.

A key element of birth preparedness is identifying a skilled provider, who can support a woman during labor and childbirth and manage complications that may arise or refer for higher level care.

Birth preparedness and complication readiness is a shared responsibility

The BP/CR matrix is a programming tool. It is a list of behaviors and skills that address delay-causing factors at various levels. Program planners can use the matrix to select desirable and feasible activities and adapt them to local realities.

The BP/CR matrix is also an advocacy tool. It enumerates the roles of facilities and communities and the responsibilities of policymakers, healthcare providers, families, and women. In this role, it helps support provider and community demands for improvements.

Identifying and knowing how to reach a skilled provider as well as having adequate personal funds to pay for expenses incurred, are examples of how individuals and families can be prepared for childbirth. Establishing communal transportation schemes and accessible emergency funds are examples of how communities can be ready, should life threatening complications occur. Advocating for skilled providers, 24-hour services, improved roads and communications systems are examples of what communities and families can do together for readiness. Collaboration among the community, the health center, and the district hospital for efficient referral is an example of a joint partnership that helps ensure that women will have skilled care when they need it. Finally, policies that allow performance of life-saving procedures by a range of providers build an enabling environment focused on maternal and newborn survival.

The BP/CR matrix promotes a comprehensive, empowering approach to maternal and newborn well being. The hallmark of the BP/CR matrix is that all of its parts are complementary. It shows that individually as well as together, policymakers, facility managers, providers, communities, families and women affect birth preparedness and influence complication readiness. It demonstrates that all of these stakeholders share responsibility for saving the lives of women and newborns.

¹ Thaddeus S and D Maine Too far to walk: maternal mortality in context. Soc Sci Med 38, 1091, 1994.

Birth Preparedness and Complication Readiness





A Matrix of Shared Responsibility

BIRTH PREPAREDNESS AND COM

PREGNANCY

POLICYMAKER

Creates an environment that supports the survival of pregnant women and newborns.

Promotes health and survival for pregnant women and newborns

Ensures that skilled antenatal care policies are evidence based, in place and politically endorsed

Uses evidence based information to support systems that routinely update service delivery and cadre-specific guidelines

Promotes and facilitates the adoption of evidence based antenatal care

Ensures that adequate levels of resources (financial, material, human) are dedicated to supporting antenatal care and an emergency referral system

Encourages and facilitates participation in policy-making and resource allocation for safe childbirth and emergency referral services by communities, families, individuals, and advocacy groups

Coordinates donor support to integrate birth preparedness and complication readiness into antenatal services

Has a national policy document that includes specific objectives for reducing maternal and newborn deaths

Ensures that protocols are in place for clinical management, blood donation, anesthesia, surgical interventions, infection prevention and physical infrastructure

Advocates birth preparedness and complication readiness through all possible venues (e.g. national campaigns, press conferences, community talks, local coalitions, supportive facilities)

FACILITY

Is equipped, staffed, and managed to provide skilled care for the pregnant woman and newborn.

Has essential drugs and equipment

Follows infection prevention principles and practices

Has a functional emergency system, including:

- communication
- transportation
- safe blood supply
- emergency funds

Has service delivery guidelines on appropriate management during the antenatal period

Has job aids to assist providers in performing appropriate antenatal care

Ensures availability of a skilled provider 24 hours a day, 7 days a week

Is gender and culturally sensitive, client-centered and friendly

Involves community in quality of care

Reviews case management of maternal and neonatal morbidity and mortality

PROVIDER

Provides skilled care for normal and complicated pregnancies, births, and the postpartum period.

Provides skilled antenatal care, including:

- detecting and managing complications
- promoting health and preventing disease, including:
 - provision of iron/folate and tetanus toxoid
 - vitamin A and iodine in areas with deficiencies
 - presumptive treatment of malaria and worms in areas of prevalence
 - encourages use of bed nets
- screening for and managing HIV/AIDS, tuberculosis, STDs
- assisting the woman to prepare for birth including:
 - items needed for clean birth
 - identification of skilled provider for the birth
 - plan for reaching provider at time of delivery
 - identification of support people to help with transportation, care of children/ household, and accompaniment to health facility
 - Complication Readiness Plan in case of emergency: emergency funds, transportation, blood donors and decision-making
- counseling/educating the woman and family on danger signs, nutrition, family planning, breastfeeding, HIV/AIDS
- informing woman and family of existence of emergency funds
- referring to higher levels of care when appropriate
- honoring the pregnant woman's choices

Supports the community s/he serves

Respects community's expectations and works within that setting

Educates community members about birth preparedness and complication readiness

Promotes concept of birth preparedness and dispels misconceptions and harmful practices that could prevent birth preparedness and complication readiness

PLICATION READINESS MATRIX

COMMUNITY

Advocates and facilitates preparedness and readiness actions.

Supports and values the use of antenatal care

Supports special treatment for women during pregnancy

Recognizes danger signs and supports implementing the Complication Readiness Plan

Supports mother- and baby-friendly decision-making for normal births and obstetric emergencies

Has a functional transportation infrastructure for woman to reach care when needed

Has a functional blood donor system

Has community financing plan for obstetric emergencies

Can access facility and community emergency funds

Conducts dialogue with providers to ensure quality of care

Dialogues and works together with provider on expectations

Supports the facility that serves the community

Educates members of the community about birth preparedness and complication readiness

Advocates for policies that support skilled healthcare

Promotes concept of birth preparedness and dispels misconceptions and harmful practices that could prevent birth preparedness and complication readiness

FAMILY

Supports pregnant woman's plans during pregnancy, childbirth and the postpartum period.

Advocates for skilled healthcare for woman

Supports and values the woman's use of antenatal care, adjusts responsibilities to allow attendance

Makes plan with woman for normal birth and complications

Identifies a skilled provider for childbirth and the means to contact or reach the provider

Recognizes danger signs and facilitates implementing the Complication Readiness Plan

Identifies decision-making process in case of obstetric emergency

Knows transportation systems, where to go in case of emergency, and support persons to accompany and stay with family

Supports provider and woman in reaching referral site, if needed

Knows supplies to bring to facility or have in the home

Knows how to access community and facility emergency funds

Has personal savings for costs associated with emergency care or normal delivery

Knows how and when to access community blood donor system

Identifies blood donor

WOMAN

Prepares for birth, values and seeks skilled care during pregnancy, childbirth and the postpartum period.

Attends at least four antenatal visits (obtains money, transport)

Makes a birth plan with provider, husband, family

Decides and acts on where she wants to give birth with a skilled provider

Identifies a skilled provider for birth and knows how to contact or reach the provider

Recognizes danger signs and implements the Complication Readiness Plan

Knows transportation systems, where to go in case of emergency, and support persons to accompany and stay with family

Speaks out and acts on behalf of her and her child's health, safety and survival

Knows that community and facility emergency funds available

Has personal savings and can access in case of need

Knows who the blood donor is

LABOR AND CHILDBIRTH

POLICYMAKER

Creates an environment that supports the survival of pregnant women and newborns.

Promotes improved care during labor and childbirth

Ensures that skilled care policies for labor and childbirth are evidence based, in place and politically endorsed

Uses evidence based information to support systems that routinely update service delivery and cadre-specific guidelines

Promotes and facilitates the adoption of evidence based practices

Supports policies for management of complications based on appropriate epidemiological, financial, and sociocultural data

Ensures that adequate levels of resources (financial, material, human) are dedicated to skilled care at birth and an effective emergency referral system

Encourages and facilitates participation in policy-making and resource allocation for safe childbirth and emergency referral services by communities, families, individuals, and advocacy groups

Coordinates donor support for improved management of labor and childbirth

Ensures that protocols are in place for clinical management, blood donation, anesthesia, surgical interventions, infection prevention and physical infrastructure

Advocates birth preparedness and complication readiness through all possible venues (e.g. national campaigns, press conferences, community talks, local coalitions, supportive facilities)

FACILITY

Is equipped, staffed, and managed to provide skilled care for the pregnant woman and newborn.

Has essential drugs and equipment

Follows infection prevention principles and practices

Has appropriate space for birthing

Has a functional emergency system, including:

- communication
- transportation
- safe blood supply
- emergency funds

Has service delivery guidelines on appropriate management of labor and childbirth

Has job aids to assist providers in performing labor and childbirth procedures

Ensures availability of a skilled provider 24 hours a day, 7 days a week

Is gender and culturally sensitive, client-centered and friendly

Involves community in quality of care

Reviews case management of maternal and neonatal morbidity and mortality

PROVIDER

Provides skilled care for normal and complicated pregnancies, births, and the postpartum period.

Provides skilled care during labor and childbirth, including:

- assessing and monitoring women during labor using the partograph
- providing emotional and physical support through labor and childbirth
- conducting a clean and safe delivery including active management of 3rd stage of labor
- recognizing complications and providing appropriate management
- informing woman and family of existence of emergency funds (if available)
- referring to higher levels of care when appropriate

Supports the community s/he serves

Respects community's expectations and works within that setting

Educates community about birth preparedness and complication readiness

Promotes concept of birth preparedness and dispels misconceptions and harmful practices that could prevent birth preparedness and complication readiness



COMMUNITY

Advocates and facilitates preparedness and readiness actions.

Supports and values use of skilled provider at childbirth

Supports implementing the woman's Birth Preparedness Plan

Makes sure that the woman is not alone during labor, childbirth and immediate postpartum period

Supports the woman in reaching place and provider of her choice

Has a functional blood donor system

Recognizes danger signs and supports implementing the Complication Readiness Plan

Supports mother- and baby-friendly decision-making in case of obstetric emergencies

Can access facility and community emergency funds

Supports timely transportation of woman

Promotes community norms that emphasize priority of transportation for pregnant women and obstetric emergencies

Dialogues and works together with provider on expectations

Supports the facility that serves the community

Advocates for policies that support skilled healthcare

Promotes concept of birth preparedness and dispels misconceptions and harmful practices that could prevent birth preparedness and complication readiness

FAMILY

Supports pregnant woman's plans during pregnancy, childbirth and the postpartum period.

Advocates for skilled healthcare for woman

Recognizes normal labor and facilitates implementing Birth Preparedness Plan

Supports woman in reaching place and provider of choice

Supports provider and woman in reaching referral site, if needed

Agrees with woman on decision-making process in case of obstetric emergency

Recognizes danger signs and facilitates implementing the Complication Readiness Plan

Discusses with and supports woman's labor and birthing decisions

Knows transportation systems, where to go in case of emergency, and support persons to stay with family

Knows how to access community and facility emergency funds

Has personal savings for costs associated with emergency care or normal birth

Purchases necessary drugs or supplies

Knows how and when to access community blood donor system

Identifies blood donor

WOMAN

Prepares for birth, values and seeks skilled care during pregnancy, childbirth and the postpartum period.

Chooses provider and place of birth in antenatal period

Recognizes normal labor and understands Birth Preparedness Plan

Recognizes danger signs and understands Complication Readiness Plan

Knows transportation systems, where to go in case of emergency, and support persons to stay with family

Can access community and facility emergency funds

Has personal savings and can access in case of need

POSTPARTUM AND NEWBORN

POLICYMAKER

Creates an environment that supports the survival of pregnant women and newborns.

Promotes improved postpartum and newborn care

Ensures that skilled postpartum and newborn care policies are evidence based, in place and politically endorsed

Uses evidence based information to support systems that routinely update service delivery and cadre-specific guidelines

Promotes and facilitates the adoption of evidence based practices

Supports policies for management of postpartum and newborn complications using appropriate epidemiological, financial, and sociocultural data

Ensures adequate levels of resources (financial, material, human) are dedicated to supporting the skilled management of postpartum and newborn care and the effectiveness of an emergency referral system

Encourages and facilitates participation in policy-making and resource allocation for safe childbirth and emergency referral services by communities, families, individuals, and advocacy groups

Coordinates donor support for improved postpartum and newborn care

Ensures that protocols are in place for clinical management, blood donation, anesthesia, surgical interventions, infection prevention and physical infrastructure

Advocates birth preparedness and complication readiness through all possible venues (e.g. national campaigns, press conferences, community talks, local coalitions, supportive facilities)

FACILITY

Is equipped, staffed, and managed to provide skilled care for the pregnant woman and newborn.

Has essential drugs and equipment

Follows infection prevention principles and practices

Has a functional emergency system, including:

- communication
- transportation
- safe blood supply
- emergency funds

Has service delivery guidelines on care of newborn and mother postpartum

Has job aids to assist providers in performing appropriate postpartum and newborn care

Ensures availability of a skilled provider 24 hours a day, 7 days a week

Is gender and culturally sensitive, client-centered and friendly

Involves community in quality of care

Reviews case management of maternal and neonatal morbidity and mortality

PROVIDER

Provides skilled care for normal and complicated pregnancies, births, and the postpartum period.

Provides skilled newborn and postpartum care, including:

- recognizing complications in the newborn and postpartum woman and providing appropriate management
- promoting health and preventing disease in the woman, including:
 - provision of iron/folate and tetanus toxoid
 - vitamin A and iodine in areas of deficiencies
 - encouraging use of impregnated bednets for the woman and newborn in areas of malaria prevalence
 - provision of contraceptive counseling and services
- promoting health and preventing disease in the newborn, including:
 - thermal protection
 - promotion of breastfeeding
 - eye care
 - cord care
 - vaccinations
- providing appropriate counseling and education for the woman and family about danger signs and self-care for the postpartum woman and newborn
- informing woman and family of existence of emergency funds
- referring to higher levels of care when appropriate

Supports the community s/he serves

Respects community's expectations and works within that setting

Educates community about complication readiness

Promotes concept of and dispels misconceptions and harmful practices that could prevent complication readiness

COMMUNITY

Advocates and facilitates preparedness and readiness actions.

Supports and values women's use of postpartum and newborn care

Supports and values use of skilled provider during postpartum period

Supports appropriate and healthy norms for women and newborns during the postpartum period

Makes sure that the woman is not alone during the postpartum period

Recognizes danger signs and supports implementing the Complication Readiness Plan

Supports mother- and baby-friendly decision-making in case of newborn emergencies

Supports timely transportation of woman and newborn to referral site, if needed

Has a functional blood donor system

Can access facility and community emergency funds

Dialogues and works together with provider on expectations

Supports the facility that serves the community

Educates community members about complication readiness

Advocates for policies that support skilled healthcare

Promotes concept of and dispels misconceptions and harmful practices that could prevent complication readiness

FAMILY

Supports pregnant woman's plans during pregnancy, childbirth and the postpartum period.

Advocates for skilled healthcare for woman

Supports the woman's use of postpartum and newborn care, adjusts responsibilities to allow her attendance

Recognizes complication signs and facilitates implementing the Complication Readiness Plan

Agrees with woman on decision-making process in case of postpartum or newborn emergency

Knows transportation systems, where to go in case of emergency, and support persons to stay with family

Supports provider, woman and newborn in reaching referral site, if needed

Knows how to access community and facility emergency funds

Has personal savings for costs associated with postpartum and newborn care

Purchases drugs or supplies needed for normal or emergency postpartum and newborn care

Knows how and when to access community blood donor system

Identifies blood donor

WOMAN

Prepares for birth, values and seeks skilled care during pregnancy, childbirth and the postpartum period.

Seeks postpartum and newborn care at least twice - at 6 days and at 6 weeks postpartum (obtains money, transport)

Recognizes danger signs and implements the Complication Readiness Plan

Speaks out and acts on behalf of her and her child's health, safety and survival

Knows transportation systems, where to go in case of emergency, and support persons to stay with family

Can access community and facility emergency funds

Has personal savings and can access in case of need



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