



Maternal and Newborn Health Care Policy Brief

INTRODUCTION

Institutional births have increased dramatically across the globe, including in sub-saharan Africa, but the places where births occur vary enormously and are poorly understood.

Countdown to 2030 analyzed maternal and newborn health data from Rwanda in the last two decades. The study aims to inform the best balance of childbirth care services across facilities to adequately provide life-saving and respectful childbirth care. Data sources included DHS, HMIS, and others.

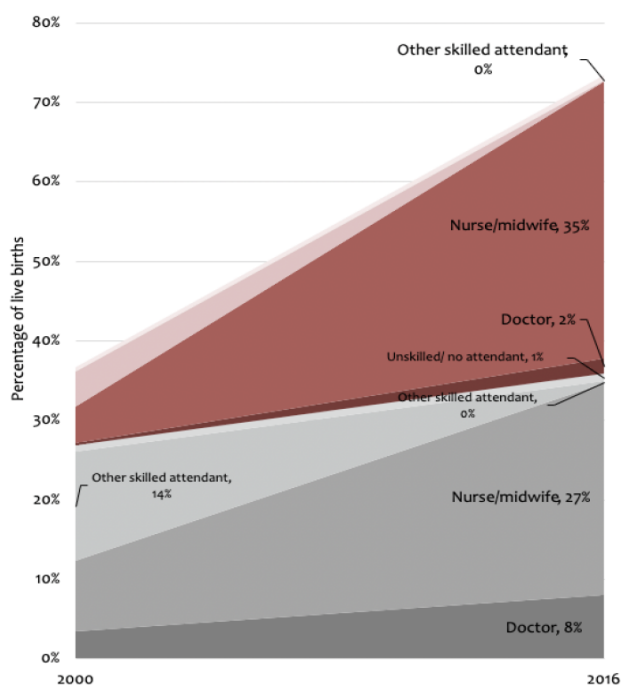
FINDINGS

Birth Attendance & Place of Delivery

From 2000 to 2016, there was a significant increase in deliveries attended by nurse/midwives, rising from 14% to 65%. Deliveries attended by doctors witness a slight increase from 4% to 10%. The proportion of deliveries attended by non-skilled personnel or without any assistance declines steadily.

Over the years, there's an increase in institutional deliveries, with hospital deliveries rising from 27% to 36%, and deliveries at lower-level facilities increasing from 10% to 38%. Deliveries at home declined from 63% to 27% during the same period.

Birth Attendant and Place of Birth , 2000 - 2016



Volume and Concentration of Care

60% of public health facilities offered delivery services in 2022.

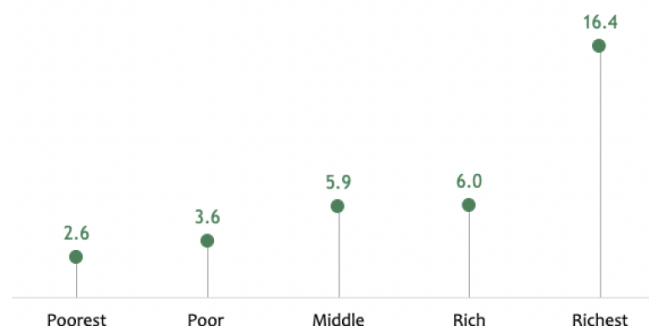
27% of all facilities operated with a relatively low CS volume capacity, handling fewer than 5 procedures in the year.

Cesarean Section

From 2000 to 2016, there was substantial increase in the proportion of C-sections performed in hospitals, rising from 9% to 16%.

C-section rates were higher among the richest at 16.4% compared to the poor at 2.6%.

Cesarean section rate (per 100 births) by wealth quintile in 2016



RECOMMENDATIONS & NEXT STEPS

- ✓ Enhancing access to safe childbirth care could be pursued by strengthening efforts to increase institutional delivery coverage.
- ✓ Investing in ongoing training and capacity building for healthcare providers, especially in lower-level facilities, is crucial to ensure the provision of high-quality care.
- ✓ Addressing urban-rural disparities is essential to enhance institutional delivery care coverage and reduce neonatal mortality rates. Targeted interventions aimed at enhancing healthcare infrastructure and services in rural areas, including the deployment of skilled birth attendants.

Learn More:

www.countdown.org/maternal-newborn-health