Maintaining safe functioning of maternal and newborn services during the COVID-19 pandemic

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Disruption of essential health services worldwide across major health areas due to COVID-19

Disruption of maternal and child health services reduced access and utilization complications and death

Decline of 10% in service coverage during pregnancy and for newborns could result in additional 28 000 maternal and 168 000 newborn deaths

Demands of responding to the COVID-19 pandemic vs the need to maintain the delivery of essential health

Disruption of essential services across the globe

Pulse survey on continuity of essential health services during the COVID-19 pandemic

94% of responding countries (N=135) experienced a disruption to some extent

9% of countries reported disruptions in 75-100% of services

25% of countries reported disruptions in 50-74% of services

29% of countries reported disruptions in 25-49% of services

32% of countries reported disruptions in less than 25% of services

Only 6% of countries reported no disruptions

Disruption of essential services across major health areas

Substantial disruptions span across all major health areas

Percentage of countries reporting disruptions across tracer service areas

Disruptions in services for reproductive, maternal, newborn, child and adolescent health and nutrition

Positive trend: decrease in reported disruptions compared to 2020

- 95% of countries reported some level of disruption to services
  - 24% of countries reported disruptions in 75–100% of services
  - 27% of countries reported disruptions in 50–74% of services
  - 28% of countries reported disruptions in 25–49% of services
  - 16% of countries reported disruptions in less than 25% of services
  - 5% of countries reported no service disruptions

- 89% of countries reported some level of disruption to services
  - 8% of countries reported disruptions in 75–100% of services
  - 21% of countries reported disruptions in 50–74% of services
  - 32% of countries reported disruptions in 25–49% of services
  - 27% of countries reported disruptions in less than 25% of services
  - 11% of countries reported no service disruptions

Note: represents global findings from all countries that responded to either round 1 or 2 of survey. Round 1 data sourced from 2020 WHO surveys on disruptions in essential health services, noncommunicable diseases, and mental, neurological and substance use disorders during the COVID-19 pandemic. Denominator excludes 'Not applicable' or 'Do not know' responses. 35 tracer services included in both survey rounds include services for: emergency and critical care, rehabilitative and palliative care, reproductive, maternal, newborn, child and adolescent health and nutrition, immunization, communicable diseases, noncommunicable diseases, neglected tropical diseases, and mental, neurological and substance use disorders.

Main causes of disruption

Service disruptions are perceived to be caused by a mix of supply and demand side factors

Reasons for service disruptions (n=112)

- Insufficient staff availability (due to deployment to provide COVID-19 relief or other) (n=112) 66%
- Community fear/mistrust in seeking health care (n=112) 65%
- Decrease in outpatient volume due to patients not presenting (n=111) 57%
- Decrease in inpatient volume due to cancellation of elective care (n=112) 57%
- Financial difficulties during outbreak/lock down (n=112) 43%
- Travel restrictions hindering access to the health facilities (n=112) 38%
- Changes in treatment policies for care seeking behaviour (n=111) 36%
- Insufficient Personal Protective Equipment (PPE) available (n=111) 36%
- Unavailability/Stock out of essential medicines (n=111) 22%
- Inpatient services/hospital beds not available (n=111) 19%
- Closure of outpatient clinics (n=112) 16%
- Closure of population level screening programmes (n=111) 14%
- Closure of outpatient services as per government directive (n=112) 12%

[Graphic showing the distribution of reasons for service disruptions]

[Diagram: supply-side factors: demand-side factors]

Denominator: excludes "not applicable" or "do not know" responses.

### WHO recommendations

<table>
<thead>
<tr>
<th>System-wide</th>
<th>Maternal and newborn health</th>
<th>Health worker safety and patient safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Context considerations and adaptation to changing contexts and needs</td>
<td>➢ All essential elements of antenatal care (ANC) and postnatal care (PNC)</td>
<td>➢ Synergies between health worker safety and patient safety policies and strategies</td>
</tr>
<tr>
<td>➢ Adjustment of governance and coordination mechanisms and addressing financial barriers to access</td>
<td>➢ Access to skilled care at all times</td>
<td>➢ High-reliability systems and organizations (safety culture)</td>
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<tr>
<td>➢ Reconsideration of health workforce capacity</td>
<td>➢ Essential commodities and supplies for ANC, childbirth and PNC services</td>
<td>➢ Safe clinical processes (checklists, tools, guidelines)</td>
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<tr>
<td>➢ Optimization of service delivery settings and platforms</td>
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<td>➢ Women’s engagement and empowerment</td>
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<td>➢ Maintaining the availability of essential medications, equipment and supplies</td>
<td></td>
<td>➢ Health worker protection (physical and biological hazards, mental health)</td>
</tr>
</tbody>
</table>

WHO resources

- Pulse survey on continuity of essential health services during the COVID-19 pandemic. Global results – as of 16 April 2021
- Maintaining essential health services: operational guidance for the COVID-19 context. Interim guidance. 1 June 2020
- Global Patient Safety Action Plan 2021-2030
- Strengthening infection prevention and control in primary care: a collection of existing standards, measurement and implementation resources
- 1st module of a new training package on IPC in maternal and neonatal care
Launching **new technical resources today!**

**World Patient Safety Day**

**Goals 2021–2022**

Safe maternal and newborn care

https://www.who.int/teams/integrated-health-services/infection-prevention-control

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**Module 1**

INFECTION PREVENTION AND CONTROL IN MATERNAL AND NEONATAL CARE

Strengthening infection prevention and control in primary care

A collection of existing standards, measurement and implementation resources

A 6-module training package for a safe care pathway for women and newborns
Disruption of essential health services within the COVID-19 context is evident

Disruptions span across all major health areas, including in maternal and newborn services

Improvement trend: better results now than in 2020

Causes of disruption are diverse: both on demand and supply side

System’s approach needed to address the issue of disruption:

- *Broader system interventions, across all functions*
- *Specific interventions around maternal and newborn health and safety*
- *Specific interventions around health worker safety and patient safety*

Context considerations and adaptation to changing contexts and needs is extremely important

Risks for mothers and newborns of adverse outcomes associated with unattended childbirth outweigh the potential risks of COVID-19 transmission at health facilities!
Act now for safe and respectful childbirth!

https://www.who.int/campaigns/world-patient-safety-day/2021