Despite the extraordinary improvements in child survival over the past 25 years, there is still virtually no effective health care for newborns in many developing countries. The size of the problem is sobering: A child’s risk of death is nearly 15 times greater in the first month of life than at any other time during the first year of life. Almost 12,000 of the 350,000 babies born each day die within their first month, and 98 percent of those deaths occur in developing countries. More than 4 million newborns die each year, and an equal number of babies are stillborn.

The Saving Newborn Lives (SNL) initiative developed a newborn health strategy that draws on recent data, research on effective interventions, and broad local participation. The process by which SNL and its partners put this strategy into action might provide guidance to policymakers who wish to improve newborn health and survival in their own countries. The initiative’s staff developed a set of objectives that take into account the fact that newborn care can be both a traditional practice and a health issue. Staff then identified six countries on which to focus and worked out a process to design specific activities in each country.

SNL’s work is based on three premises:

■ Newborn mortality can be significantly reduced through improved household practices and use of community-based health services. Integrating newborn health interventions into existing programs—chiefly safe motherhood and child survival programs—can bring about many of the desired changes.

■ Partnerships at the global, national, and local levels are key to reducing newborn mortality.

■ Targeted research can lead to improved technologies and delivery strategies to prevent and manage complications in newborns.

SNL focuses on results and integrates field programs, research, and advocacy to show policymakers why it is critical to improve newborn health and how essential newborn care (ENC) can be integrated into existing health programs. The initiative emphasizes cost-effective and sustainable interventions, the most important of which are prenatal and birth preparedness interventions; ensuring clean and safe delivery, with special emphasis on skilled care at delivery; and providing postnatal care, including ensuring immediate and exclusive breastfeeding, drying and warming, and early postnatal health visits for both mothers and newborns.

Choosing Focus Countries
The need for improved neonatal care is apparent throughout the developing world, but SNL recognized that starting in a smaller set of countries would help the initiative identify approaches that would make a significant impact. The staff selected focus countries on the basis of countries’ magnitude and severity of need, the potential for achieving impact at the national level, the presence of a strong Save the Children country office, and the presence of local organizations that might serve as partners. Staff used these criteria to select six focus countries: Bangladesh, Bolivia, Malawi, Mali, Nepal, and Pakistan.

SNL staff also selected two other sets of countries in which they conducted more limited activities:

■ In five countries—Ethiopia, Guatemala, Indonesia, Myanmar, and Vietnam—the initiative is helping identify and test small-scale initiatives to improve newborn health.

■ In India and South Africa, where Save the Children does not have field offices, the magni-
tude and severity of need are so great that SNL is working with governments and nongovernmental organizations (NGOs) to support changes in policies and programs.

Establishing a Framework for Improving Newborn Health

Drawing on the expertise of a team of newborn health specialists, partner organizations, donors, and Save the Children technical staff, the initiative developed a strategic framework to map out SNL’s goals through 2015. The initiative’s activities are designed to help improve neonatal health and survival by increasing the sustained use of healthful practices and key services and by improving and expanding newborn health policies and programs. SNL staff also established a set of key project aims that form the groundwork for saving newborns (see Figure 1). These goals serve as a roadmap for global and in-country activities.

1: Strengthen and Expand Proven, Cost-Effective Interventions

In many countries, newborn health interventions are not implemented on a wide scale, are implemented poorly, or fail to reach populations with the greatest need. SNL’s approach is designed to address these weaknesses (for more information, see the third brief in this series, “Using Evidence to Save Newborn Lives”). Activities are put into place in accordance with local needs and capacities. Sample SNL interventions have included expanding access to, and demand for, tetanus toxoid immunization (tested in Mali, Pakistan, and Ethiopia); making newborn care part of programs that provide delivery and postpartum care (Malawi and Nepal); adding material on newborn health to national training systems for nurses, midwives, and community-based health providers (all six focus countries); integrating newborn care into the World Health Organization’s Integrated Management of Childhood Illness systems (Bolivia); and expanding the use of kangaroo mother care (a skin-to-skin warming technique) in facilities caring for low birth-weight infants (India and Malawi).

2 and 3: Adapt and Refine Promising Models and Advance the State of the Art

The World Health Organization and SNL supported a comprehensive review of the evidence on the impact of newborn health interventions in developing countries and identified research gaps. Identifying cost-effective interventions to address problems, such as managing newborn asphyxia and infections at the community level, for which few solutions are currently available, poses a challenge. Improving how newborn care services are delivered poses another. SNL is testing various models for delivering newborn care in its six focus countries. The initiative relies mainly on community-based research that has immediate implications for programs, is affordable and can be conducted within a reasonable amount of time, and promotes local partners’ involvement. For example, India’s Society for Education, Action, and Research in Community Health (SEARCH) is testing the adaptation of a home-based model for newborn care in seven new settings and is establishing a “living university” for training and research.
4: Mobilize Commitment and Resources
SNL is working to make newborn health and survival a priority for global and national policymakers. The initiative is sponsoring mass media outreach, assessments of newborn health, global networks, and professional conferences:
- In 2001, SNL released *State of the World’s Newborns*, the first-ever global report on newborn health, and participated in the UN General Assembly’s Special Session on Children to highlight newborn health issues.
- In Bangladesh, Ethiopia, Mali, and Pakistan, the initiative has supported regional meetings of health professionals and networks of NGOs and other institutions working on newborn health. SNL also supported the West African Conference on Maternal and Neonatal Mortality—Vision 2001 Forum, where the first ladies of several West African countries made a commitment to reduce maternal and newborn mortality in their countries.
- SNL is collaborating with the government of India, the World Bank, and other partners to add newborn health to the Reproductive and Child Health II program.

5: Develop Strategic Partnerships
SNL works directly with a range of global, national, and local partners to further its goals.

**Global Partnerships**
In 2002, SNL launched the Healthy Newborn Partnership (HNP), a global interagency group whose member organizations focus on improving newborn health and survival. At the February 2003 HNP meeting in Bangladesh, more than 30 representatives of multilateral, bilateral, and nonprofit organizations reaffirmed their commitment to reducing newborn mortality worldwide. A working group led by the United Kingdom’s Department for International Development, the World Health Organization, and SNL developed a framework to help countries plan, conduct, and monitor neonatal health programs. The forthcoming framework outlines the key steps involved in improving neonatal health and lists tools and materials that can support advocacy and program planning, implementation, and evaluation. HNP also issued a statement that calls for making newborn health care part of safe motherhood and child health programs (see Box 1).

**National Newborn Health Groups**
Several of the initiative’s country offices have established working groups. For example, members of Bangladesh’s Newborn Working Group, which includes representatives of the government, professional associations, international agencies, and NGOs, share technical expertise, exchange information, and provide national leadership for advocacy on newborn health care.

**Local Partnerships**
Local partnerships are designed to improve the implementation of newborn health activities at the community level by engaging local leaders and special interest groups. Such partnerships were of particular importance in SNL Pakistan’s social mobilization program, which was part of the nationwide maternal and neonatal tetanus (MNT) campaign. The network of local partners for the MNT campaign, including village leaders, schoolteachers, religious leaders, and others, now supports other newborn health activities.

**Planning at the Country Level**
Addressing the widespread problem of newborn mortality requires broad participation. SNL's country-level planning process is designed to bring together local and outside expertise in structured, interactive exercises to define current programs’ attributes, strengths, and opportunities. The initiative focuses on three core areas: program planning and implementation; partnerships and building consensus on technical issues; and policy-level advocacy. The following steps describe the approach.

**Step 1: Conduct an Exploratory Visit**
During exploratory visits, the SNL team and local Save the Children staff meet with government officials, representatives of assistance agencies, and public- and private-sector leaders in newborn health. The purpose of the visits is to introduce the initiative and come to an agreement to move forward, beginning with a preliminary assessment of newborns’ needs and program opportunities.

**Step 2: Analyze the State of Newborn Health**
SNL carries out a detailed situation analysis in each country to provide the foundation for planning. The analysis involves collecting information on the status of newborn health, public- and private-sector services for mothers and
newborns, current newborn care practices, local health care providers’ skills and capacities, and existing and planned research relevant to newborns. The information collected provides a clear description of gaps and assistance opportunities.

Each report is prepared by a team of local consultants who collaborate with ministry of health (MOH) officials and other stakeholders. These country-specific studies help initiate ongoing dialogues with key leaders to ensure that SNL’s newborn health program is fully integrated into current health strategies. In Bangladesh, for example, government leaders participated actively in the situation analysis and then used it to develop a similar document on maternal health. In Nepal, policymakers who reviewed the situation analysis decided to develop a formal national neonatal health strategy to supplement the existing safe motherhood strategy.

**Step 3: Disseminate Recommendations**

Each situation analysis is presented at a seminar for government officials, representatives of NGOs, and donor agencies working in safe motherhood, child health, and reproductive health; health care providers; researchers; and policy advocates. The reports are launched with support from senior policymakers to ensure wide media coverage. In Nepal, for example, the prime minister officiated at the launch, while the first ladies of Bolivia and Mali launched reports on the state of newborn health in their respective countries. National launches in Bangladesh and Pakistan were followed by press events and workshops at the regional or provincial levels. The media attention generated by these activities expands awareness of newborn health issues and helps to legitimize the working groups involved. The situation analyses are translated into national languages and widely distributed.

**Step 4: Develop a Strategic Plan**

Immediately after the situation analysis is disseminated, SNL teams begin to meet with key stakeholders to transform the analysis into a strategic plan. Given the scope of each country’s needs, the strategic planning process is intended to condense the large set of options into a workable program that SNL can support. Planning generally focuses on incorporating ENC into existing maternal and child health programs, rather than on creating distinct new programs.

The planning process systematically considers needs and opportunities at the community, district, and national levels and determines expected program results. In some countries, district-level programs have been strengthened and rigorous monitoring and evaluation systems have been added to identify results. In other cases, partners have proposed changes to national programs, such as creating social mobilization efforts for tetanus immunization campaigns and adding specific skills to in-service training of core staff such as nurse-midwives. The plans are developed to allow policy and programs to evolve

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**Box 1**

**Extract From the Dhaka Resolution for Global Newborn Health**

In order to reduce neonatal mortality worldwide, the Partnership calls for actions to:

- Strengthen newborn health care in safe motherhood and child health programs in order to maximize the benefits of maternal and newborn health at all levels.
- Build up national capacity to ensure access to skilled birth care for delivery of all pregnant women, as well as appropriate provision of newborn care at home.
- Urge the international community to commit and mobilize substantial global resources to support effective newborn care interventions in order to reduce neonatal deaths, which is critical to achieving the Millennium Development Goal for child survival by the year 2015.
- Strengthen efforts to eliminate neonatal tetanus by the year 2005 through provision of tetanus toxoid immunization and clean delivery practices.
- Pursue comprehensive efforts to address inequities in newborn health based on gender, geography, or economic status.
- Build up more strategic alliances and sustained partnerships between governments, civil society, political and community leaders, UN and international agencies, bilateral agencies, NGOs, and professional bodies for mainstream newborn health and survival as a global initiative.
- Augment national efforts to improve female education and employment opportunities, delay the age at marriage, and provide contraceptive services.

**Source:** Healthy Newborn Partnership, “Dhaka Resolution for Global Newborn Health” (2003).
together. But because the needs and opportunities of each country differ, each country’s program has a distinct character.

The draft of each country’s strategic plan is then introduced in a workshop at which all key stakeholders participate in identifying a set of initial priorities. During the workshop, participants specify activities to be undertaken and produce budgets that are then reviewed by SNL staff, who provide technical input and financial guidelines. Finally, SNL field staff meet with the MOH, partners, and local government officials to discuss what should be done next.

The strategic planning process takes between six months and a year. The investment of time and effort is crucial to developing a strong technical program with active support across various sectors in each country. The strategic planning process establishes newborn health as an integral component of maternal and child health.

**Step 5: Establish Country Leadership and Technical Support Groups**

In each of the six focus countries, the initiative supports a program manager, based in the Save the Children field office, who provides technical guidance and support for neonatal health activities in that country. Technical staff, including physicians and specialists in behavior change, communications, monitoring and evaluation, and training, are also chosen in each country.

Most SNL country programs have established advisory groups of experts in newborn health. These groups provide strategic direction and practical advice on national programs. Members usually include individuals from the MOH and various academic and professional groups. These groups also provide leadership on newborn health issues. In Bangladesh, for example, the Newborn Working Group’s technical leadership has encouraged the government to officially accept the ENC approach.

**Step 6: Establish Partnerships**

From the outset, SNL has worked to identify local partners who understand that improved newborn health care is essential to their country’s long-term development and who are eager to work together. There are three objectives for engaging a wide range of partners: building on existing capacities and experience; extending the activities beyond the reach of what any single organization can do; and establishing a network whose members continue to learn from and communicate with one another and to work together for better newborn health care.

SNL’s local partnerships involve a number of nonprofit and advocacy groups. In Bolivia, one of SNL’s principal partners is the Collaborative Program for Integrated Health (PROCOSI), a network of 24 local and international NGOs, each of which can extend and strengthen essential newborn care. In Bangladesh and Malawi, SNL has given grants to local and international NGOs with successful safe motherhood programs to add services for newborns. In Mali, Helen Keller International is using an SNL grant to examine household decisionmaking on newborn health. SNL is also working on engaging the private sector in improving newborn health. In Pakistan, for example, SNL mobilized the Lever Brothers company to donate 3.6 million bars of soap to include in clean delivery kits.

**Step 7: Initiate Program Action and Early Program Review**

One of the first steps in implementing a neonatal health program is developing a strategy for monitoring and evaluation, as well as collecting baseline data so that progress can be measured over time. Research conducted in each focus country provides the information used to develop behavior change strategies. Baseline data on a set of core indicators related to newborn health status and practices have also been collected.

The planning process is followed by a program review designed to assess progress during the startup period; ensure that the strategic plan continues to reflect the country’s highest-priority needs; determine what, if any, changes are needed; more clearly define expected results and outcomes; and help prepare detailed annual plans and budgets. In keeping with a locally
based and participatory approach, the annual review involves key headquarters staff, the field office, and partners.

**Conclusion**

The experience of SNL and its partners has implications for any country or organization attempting to improve newborn health. While the initiative found the situation analyses and strategic plans described above both informative and useful, involving governments, NGOs, and local groups was equally important. Having the support of local governments in developing neonatal strategies was essential. Forming advisory groups on neonatal health helped create a group of committed individuals who became champions for the cause of newborn health. In many countries, these advisory groups helped put newborn health on the policy agenda and sparked much-needed public interest and debate.

A number of challenges remain. The initiative found that many proposals for newborn health programs may have been too ambitious for this early stage. Reaching newborns at home, where many are born and die, is not easy. It is sometimes difficult to determine the best delivery mechanism for newborn care interventions and to modify those traditional practices in newborn feeding and care that threaten newborns’ health. In many countries, improving women’s social status and raising the value placed on newborns are important steps toward improving neonatal care and well-being. In some cases, research results have yet to be translated into action. Finally, advocates for newborn health continue to face the challenge of raising resources in the face of competing development priorities.

SNL works with partners to achieve the initiative’s goals. Rather than developing independent programs, the initiative bridges gaps between safe motherhood and child survival programs and between home- and facility-based care.

The initiative’s approach to newborn health also focuses on adapting program activities, research, and advocacy to local needs and opportunities. SNL is using long-term planning, monitoring, and evaluation to identify ways to further strengthen essential newborn care services, link research results with programs, and strengthen policy related to newborn health care.

Developing strategies and programs is only the first step down the road to improved newborn health and survival, and taking local needs, capacities, and opportunities into account is critical. The SNL initiative will continue working on developing programs and policies that provide much-needed support for newborn health.

**Acknowledgments**

This brief is the fourth in the “Policy Perspectives on Newborn Health” series, produced through collaboration between the Population Reference Bureau and Save the Children’s Saving Newborn Lives initiative. Aimed at government decisionmakers and health care professionals, “Policy Perspectives on Newborn Health” shows how incorporating newborn care into existing safe motherhood and child survival programs can ensure newborn survival, as well as contribute to improving women’s health and the well-being of future generations. Saving Newborn Lives, launched with a generous contribution from the Bill & Melinda Gates Foundation, is a 15-year initiative to improve the health and survival of newborns in the developing world.

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**Other Policy Perspectives on Newborn Health publications:**

- “Healthy Mothers and Healthy Newborns: The Vital Link,” April 2002 (English, French, Spanish)
- “Why Invest in Newborn Health?” April 2003 (English, French, Spanish)
- “Using Evidence to Save Newborn Lives,” May 2003 (English, French, Spanish)