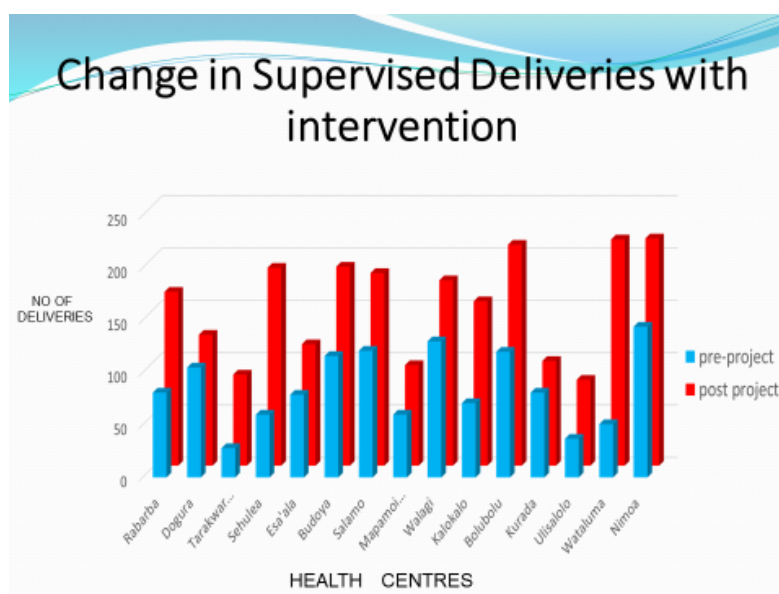


Simple Australian idea saving women in childbirth

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A simple and cost-effective health initiative thought up by an Australian doctor and funded by an Australian charity is having a massive impact on saving the lives of birthing mothers in Papua New Guinea.

In a peer-reviewed article just published in the June edition of the Australian and New Zealand Journal of Obstetrics and Gynaecology*, the use of “*mother and baby gifts*” to encourage village women to access a supervised birth at health centres throughout Milne Bay Province has resulted in an 80 per cent increase in the number of expectant mothers receiving medical assistance during labour.



*Dr Kirby has subsequently assessed another five health centres to confirm his results. This additional information is captured in the supplied tables and was presented at the Royal College of Obstetricians and Gynaecologists World Congress April 2015.

The paper details how the 2011 maternal mortality rate in Milne Bay was 25-30 women per year. Those deaths have subsequently dropped to just 5 deaths in 12 months. Of these deaths, only two occurred in a health centre – one the result of extreme weather that prevented the mother being medivaced by sea or air.

Australian doctor Barry Kirby has spent a decade devoting himself to assisting the women of PNG – in particular, pregnant women in and around the 160 scattered islands that make up



remote areas of Milne Bay Province.

In 2010 he undertook a ground-breaking in-depth study into the reasons why so many women were dying during childbirth. Dr Kirby meticulously retraced the last hours of 31 women who died during or shortly after labour. Most died of blood loss at their villages without access to the most basic of health care.

He found that the women were reluctant to leave their village for a supervised birth at a health centre for a variety of reasons. They included feeling “shy at preventing in an impoverished state and not having baby’s clothes” according to Dr Kirby’s original study published in 2011. Women also lacked the \$5 equivalent cost for a health centre birth or money to buy food while they were away from their village.

With the assistance of Australian charity Send Hope Not Flowers, Dr Kirby has distributed around 3000 *mother and baby gifts* which include funds to cover food and health centre costs as well as a collection of basic supplies for mothers and their newborns. These include underwear and a cotton sarong for mothers, towel, soap, six washable sanitary pads, six cotton nappies and a singlet for babies, baby soap, powder, oil, toilet paper, a baby bath, bed sheet, and female and male condoms. All supplies are packaged in a small plastic baby bath.

Dr. Kirby’s initiative also addressed additional strain health centers would face and he instituted increased training for health centre staff, additional emergency obstetric kits and incentive payments for staff to acknowledge their increased workload.

The program has been shown to have had a profound effect.

At the ten health centres servicing Milne Bay Province, supervised deliveries have increased from 845 a year in 2012 to 1449 in 2014.

The Sehulea health centre has seen a 158 increase in supervised deliveries (to 155 deliveries) while the Wataluma health centre has seen a 188 per cent increase (to 98 deliveries) over that period.

The women of PNG commonly die of treatable complications of childbirth – with the number one killer being haemorrhage. The vast majority of these life-threatening birth complications can be successfully treated at a health centre.





In a country that faces the second highest maternal mortality rate in the Asia Pacific region after Afghanistan, the findings bring hope to global efforts to address the Millennium Development Goal of reducing maternal deaths around the world.

Dr. Kirby said

"We are so happy this is working. We listened to what mothers were saying to us and we responded, although at times it seemed like a crazy idea."

"Mothers are happy to have a supervised delivery now and the rural health centre staff are more confident and skilled to make it safe for them."

"It is a team effort right from the pockets of generous people in Australia through Send Hope Not Flowers into the hands of these PNG woman and they have said 'Yes! Thank you!'."

"Finally, finally our maternal death rate is coming down, at least in our backyard, and we should all feel happy about that."

The report was co-authored by four doctors, including Dr. Kirby and Canberra Obstetrician Professor Steve Robson.

Professor Robson, who is also Vice President of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists said *"This study shows how a relatively cheap and simple idea can translate to outstanding survival rates for pregnant women in a country where most families can, at some point, expect to lose a mother, sister, aunt or daughter to childbirth."*

Professor Robson sits on the board of Send Hope Not Flowers, which has raised more than \$120,000 to support Dr. Kirby's work and to fund the trial of the mother and baby gift intervention.

"I think most Australian donors would be heartened to learn that their donations have translated to such an outstanding and verifiable result," Professor Robson said.

According to the paper, "This study demonstrates that personal commitment from maternity carers can identify local problems and then develop and implement tailored regional solutions to address the main remediable issues and that appropriately designed incentives can be effective in getting women to come to local health facilities for supervised birth.



"This should provide inspiration to others concerned with the provision of maternity care in local regions of developing countries."

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Dr. Barry Kirby delivering his life-saving *mother and baby gifts*.



A new mother receiving her *mother and baby gift* after a successful health centre delivery.



Dr. Kirby has provided more than 3000 *mother and baby gifts* to the women of PNG.

The information in the following tables was presented at the *Royal College of Obstetricians and Gynaecologists World Congress* April 2015.

