CHAPTER: 03

ASSESSMENT OF NEWBORN CARE FACILITIES IN DISTRICT LAKHISARAI, BIHAR

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INTRODUCTION

Approximately 130 million infants are born globally each year, and during the neonatal period, about 4 million of them face mortality. Neonatal deaths are on the rise in relation to overall child mortality, with nearly 99% occurring in low- and middle-income countries [1]. The collaborative outreach and community care initiative have successfully covered 90% of the population, averting 18 to 37% neonatal fatalities. These efforts encompass home-based infant care, fundamental newborn care, resuscitation, assistance for low-birth-weight infants, and emergency infant care. However, it is crucial to expand and scale up facility-based care for sick infants to achieve a reduction in neonatal mortality [2].

The Neonatal Mortality Rate (NMR) for newborns admitted to the hospital decreased by 14% in the first year, and the introduction of Special Newborn Care Units (SNCUs) led to a 21% reduction in NMR in the second year. This was estimated to result in a district-wide reduction of approximately 10% in NMR over two years [3]. Globally, Preterm birth (40.8%), intrapartum problems (27%), congenital abnormalities (10.6%), sepsis (8%), other causes (7.3%), pneumonia (4.8%), tetanus (1%), and diarrhoea (0.3%) are the main causes of neonatal mortality that have been documented [4].

RESEARCH QUESTIONS

What areas need improvement to enhance the existing Newborn Care Facility in Lakhisarai district of Bihar?

RESEARCH OBJECTIVES

1. To assess the status of human resources in newborn care facilities.
2. To examine the record registers of newborn care facilities.
3. To assess the availability of essential equipment in newborn care facilities.
4. To evaluate the availability of drugs in newborn care facilities.

RESEARCH METHODOLOGY

The research was carried out in public health institutions, including Primary Health Centers, Referral Hospitals, and District Hospitals in the Lakhisarai district of Bihar. The study evaluated various factors such as infrastructure, the presence and quality of drugs and consumables, the availability and functionality of equipment, scrutiny of records, human resources, and practices related to infection control. Data collection utilized a structured observation tool.

RESULTS & DISCUSSION

As per the data, the survey was conducted in the Lakhisarai district of Bihar. The study focused on six facilities, revealing a shortage of pediatricians in four of them. This is a notable concern since pediatricians play a vital role in supporting Newborn Care Corners (NBCC), Newborn Stabilization Units (NBSU), and Special Newborn Care Units (SNCU). In terms of infection control, the functionality of autoclave practices is suboptimal in all facilities except one. While all the required equipment is present, its functionality is low. The availability of most drugs is inadequate, but emergency drugs are well-stocked. The documentation of records and registers is appropriately maintained.

CONCLUSION

Investing in newborn care facilities is essential for lowering the neonatal mortality rate in India. This entails not only establishing NBCC, NBSU, and SNCU but also ensuring their sustained effectiveness. While the initial outcomes in terms of reducing the Infant Mortality Rate (IMR) are encouraging, there are challenges that must be addressed before expanding newborn care facilities. The assessment of NBCC, NBSU, and SNCU underscores the importance of reinforcing SNCUs under the National Health Mission (NHM) to provide quality care to the community, especially by ensuring a sufficient number of trained human resources.

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