ANALYSIS OF CHILD DEATH IN NARMADA, DISTRICT OF GUJARAT

Under the Guidance of :
Dr. D K Mangal

Submitted By :
Dr. Vijendra Banshiwal
Roll No. - 0238
MBAHM 19th Batch

Introduction

- Child Death Review (CDR) is a strategy to understand the geographical variation in causes of child deaths and thereby initiating specific child health interventions. This information can be used to adopt corrective measures and fill the gaps in community and facility level service delivery, information can be compared over a period of time and common factors identified and addressed through the national programme.

Review Of Literature

- Reducing infant mortality is one of the key goals under NHM. Multi-pronged, evidence based strategies have been adopted in the national programme to prevent neonatal, infant and child deaths. The infant and under five child mortality has shown a steady decline over the last three years. However the progress is not uniform across the states and even intrastate (inter-district) variations are quite evident from the recent surveys like the Annual Health Survey 2011.

- Data on causes of neonatal and child deaths are also useful for health planners, administrators, and medical professionals to evaluate trends in causes of mortality over time and thus assess the impact of the on-going health programme and to make a decision on allocation of resources for different strategies to prevent and manage neonatal and childhood illnesses.

Rationale

- Child mortality is a very important indicator which represents the health care status of any district, state and ultimately the whole country. Child mortality has always been a matter of prime concern for NHM. In order to control and reduce child mortality it is important to calculate the death of children under the age of five years and also to know the major reasons behind all such cases. Only then the preventive majors can be thought of and applied successfully.

Research Question

- What are the major causes of Child Mortality in Narmada District Gujarat?

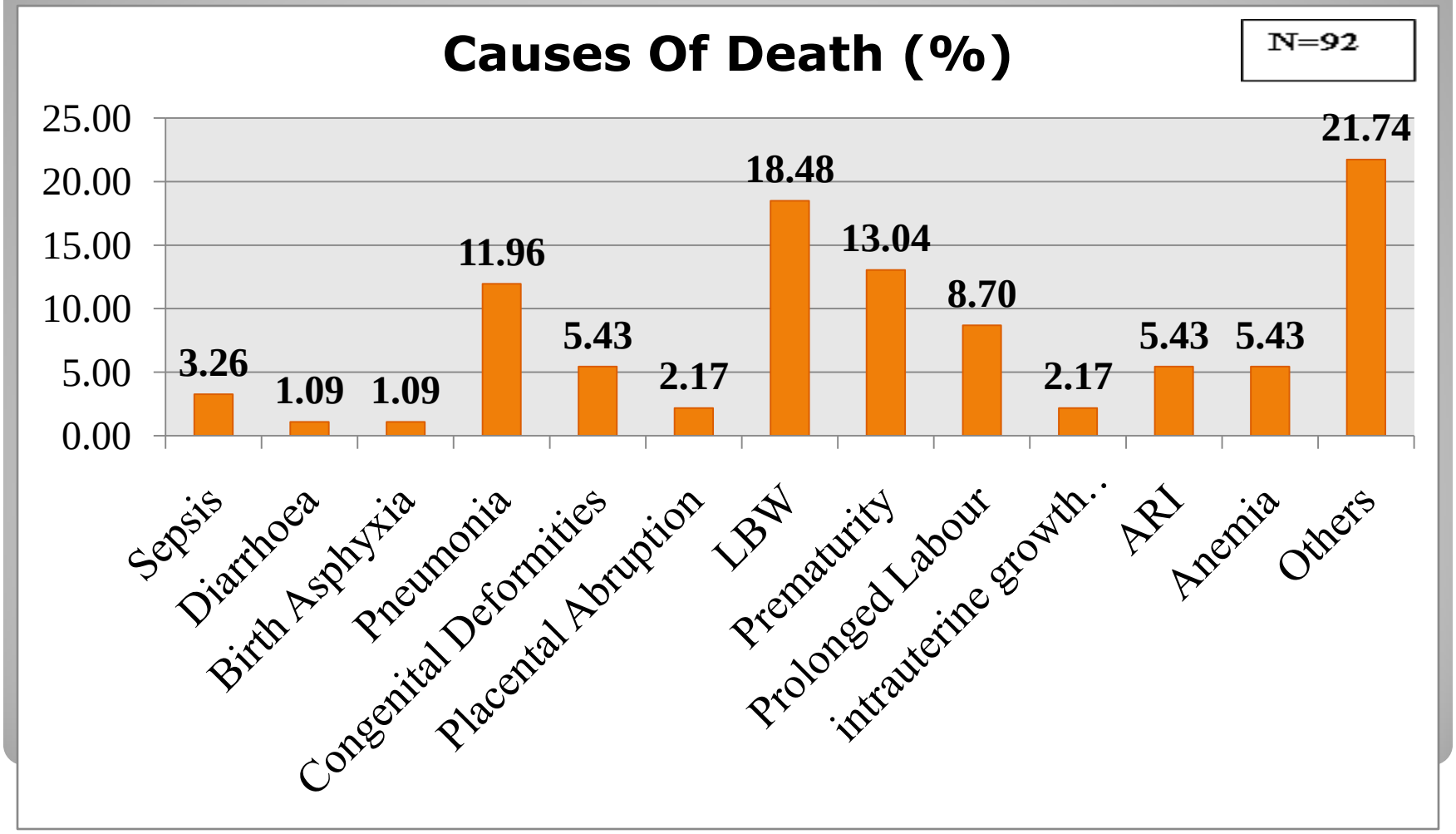
Objective

- To find causes of Child Mortality in Narmada District of Gujarat from January to March 2016

Methodology

- **Study type**: Cross sectional descriptive study
- **Study duration**: February to April, 2016
- **Study location**: Narmada District of Gujarat
- **Study population**: Number of child deaths in Narmada
- **Sampling process**: Non randomised sampling process (Purposive sampling)
- **Data collection tool**: Form 5 (a): Child Death and Still Birth Monthly Line List
- Collected at district of child death
- **Data analysis**: MS Excel and SPSS.

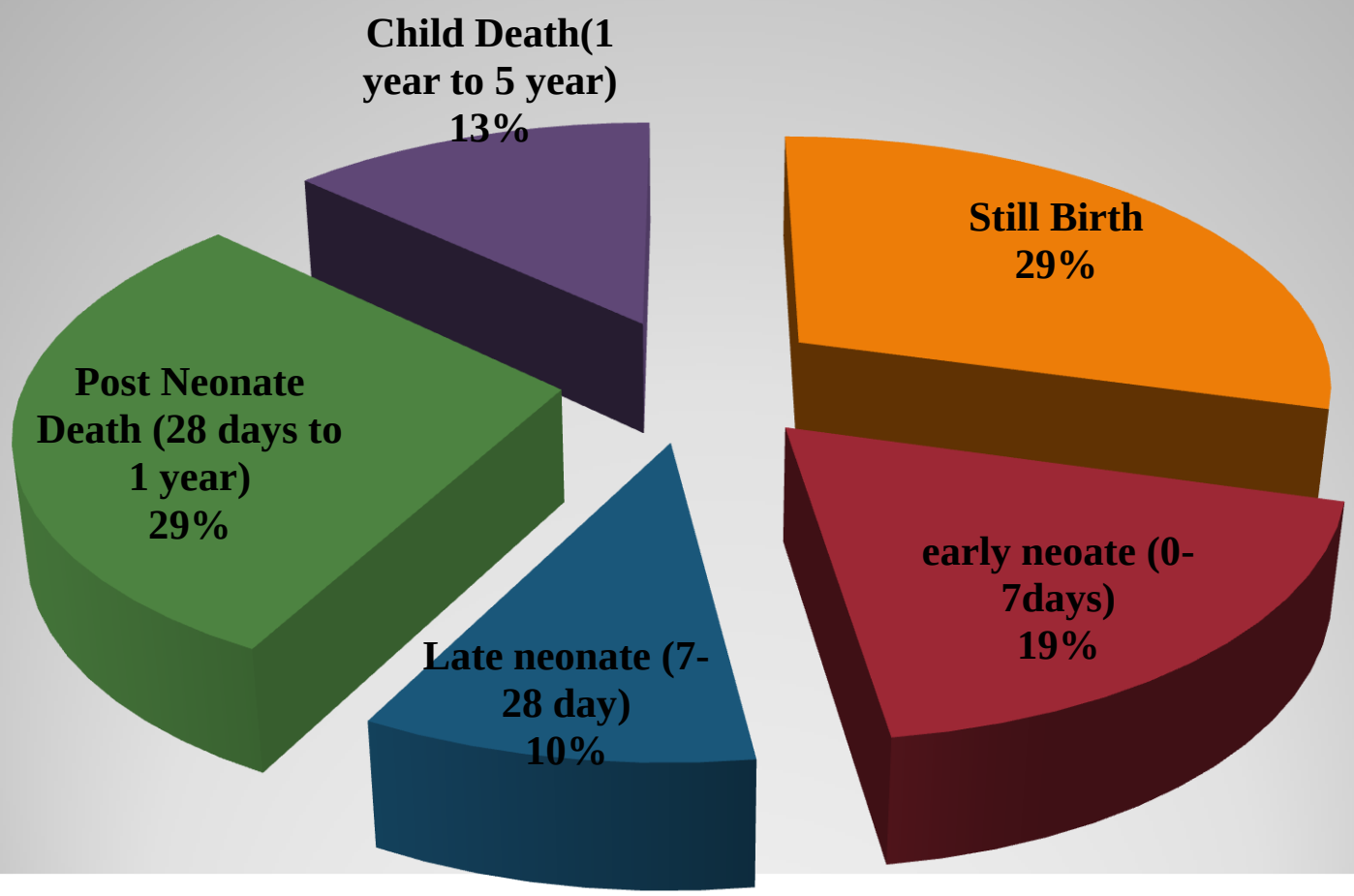
Results


Causes Of Death (%)
N=92
25.00
20.00
15.00
10.00
5.00
0.00
3.26
1.09
1.09
11.96
5.43
2.17
18.48
13.04
8.70
2.17
5.43
5.43
21.74
Sepsis
Diarrhoea
Birth Asphyxia
Pneumonia
Congenital Deformities
Placental Abruption
LBW
Prematurity
Prolonged Labour
intrauterine growth..
ARI
Anemia
Others

- Major causes of mortality are Low Birth Weight 17(18.48%)
- Prematurity 12(13.04%),and Pneumonia 11(11.96%).
- There are various other reasons 20 (21.74%) which are not specified and thus are not clearly identified from the data.

Age of child at the time of Death

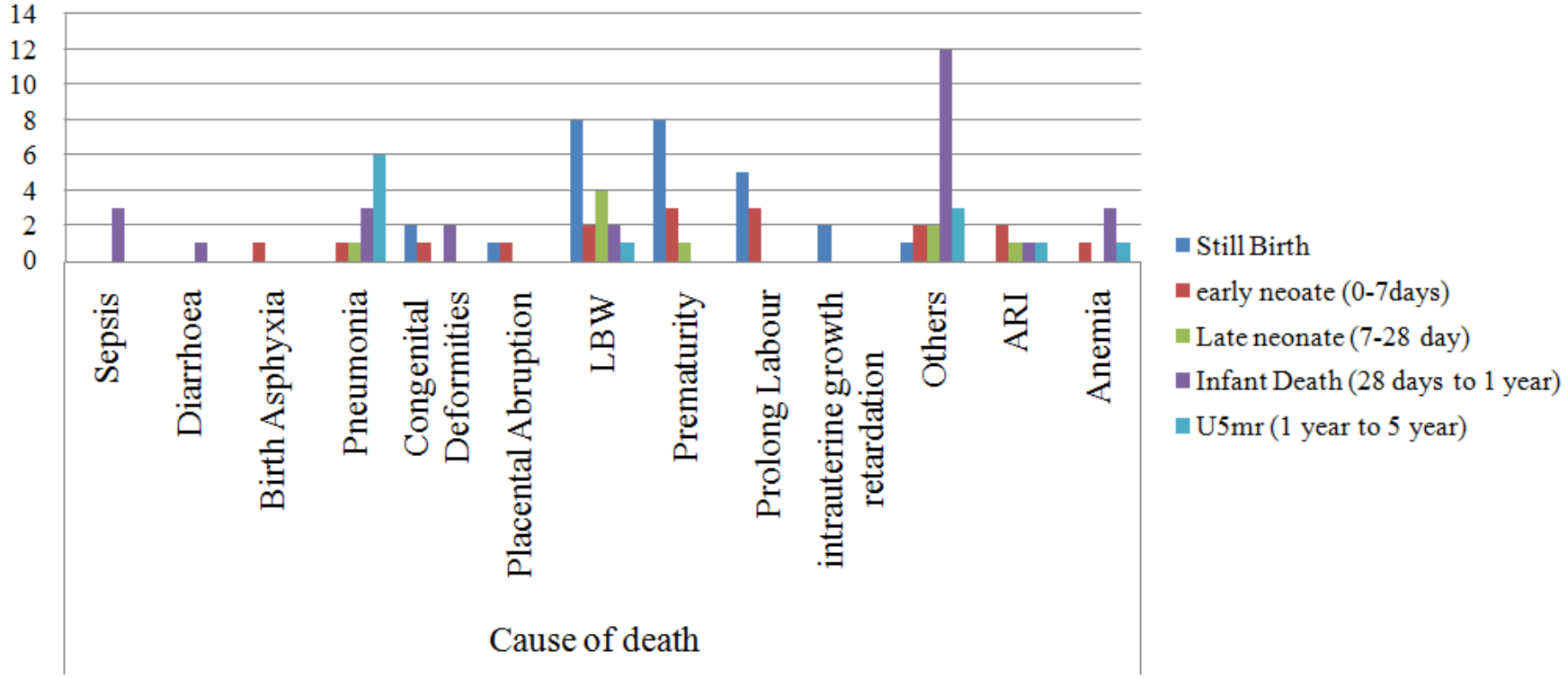
N=92



- Maximum (29%) deaths occurred in still birth and Post Neonate each.
- 19% were early neonates followed by 13% under 5 years whereas 10% were late neonates.
- Hence, two crucial periods came out to be very early days or even before a child is even born.

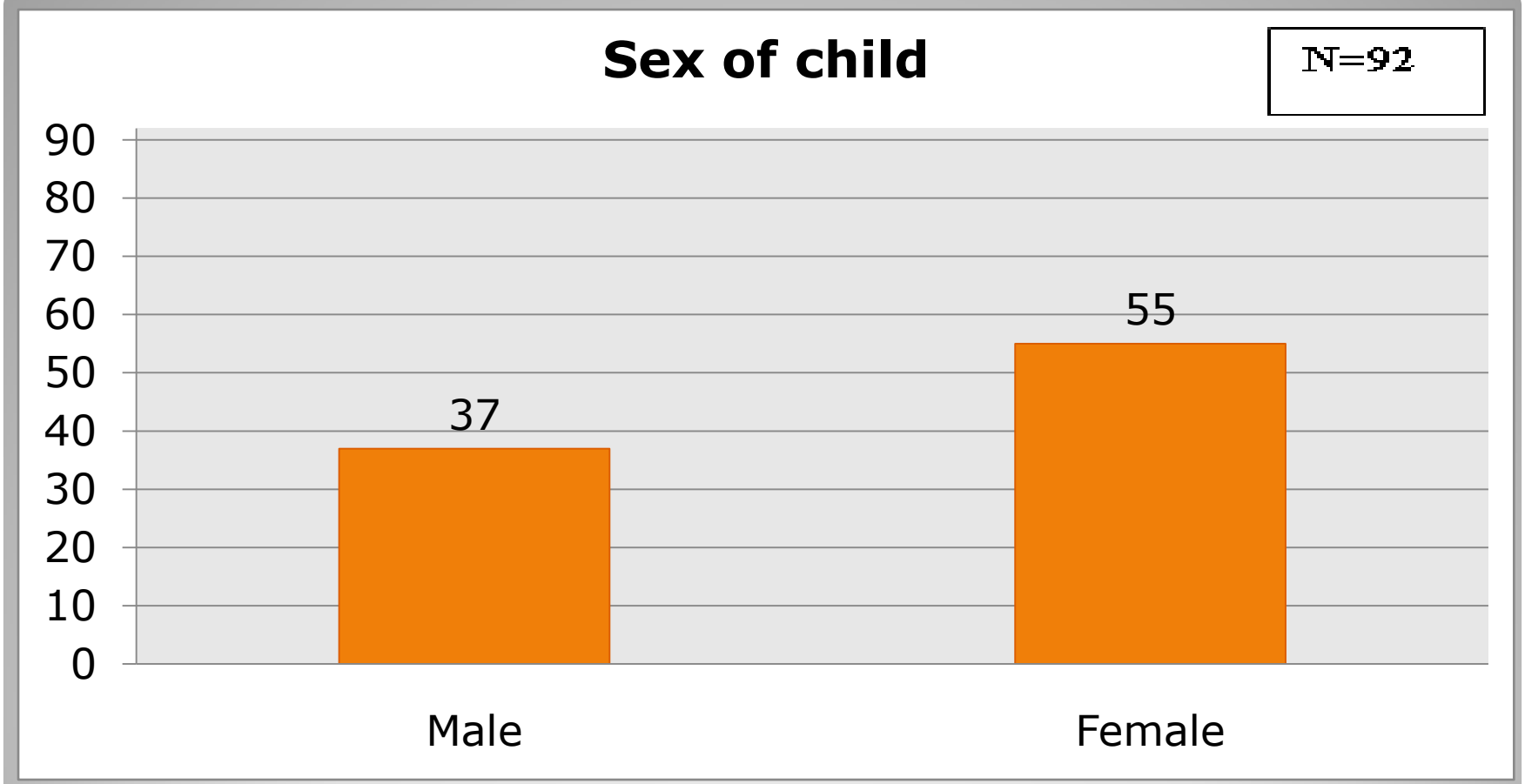
Causes of child death as per age

N=92



	Cause of death												
Still Birth	0	0	0	0	2	1	8	8	5	2	1	0	0
early neoate (0-7days)	0	0	1	1	1	1	2	3	3	0	2	2	1
Late neonate (7-28 day)	0	0	0	1	0	0	4	1	0	0	2	1	0
Infant Death (28 days to 1 year)	3	1	0	3	2	0	2	0	0	0	12	1	3
U5mr (1 year to 5 year)	0	0	0	6	0	0	1	0	0	0	3	1	1

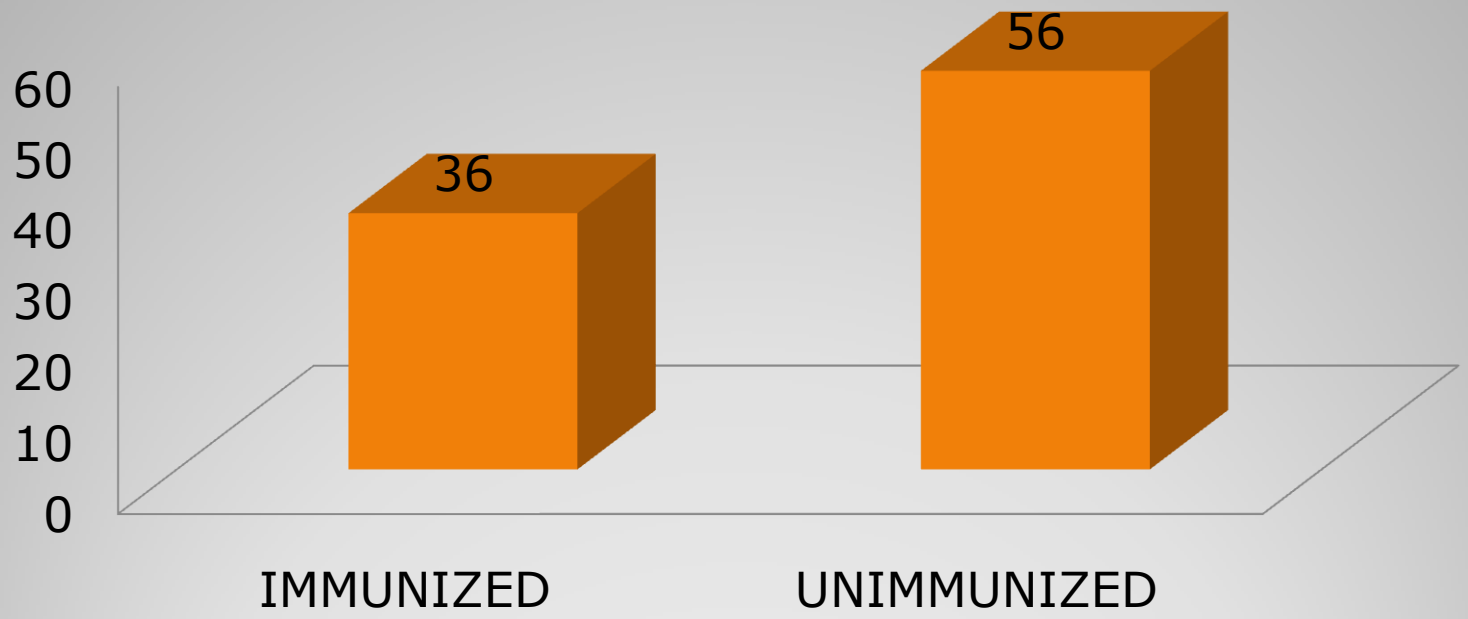
- In still birth the major cause for death were prematurity(8) and Low birth weight(8).
- In early neonate the same reason Prematurity (3) come the major reason.
- In Late Neonate period (4) Low birth weight was found to be major cause.
- Sepsis and Pneumonia (3) are the major reason found in case of Infant deaths.
- In case of Under 5 deaths (6) Pneumonia is the major cause.



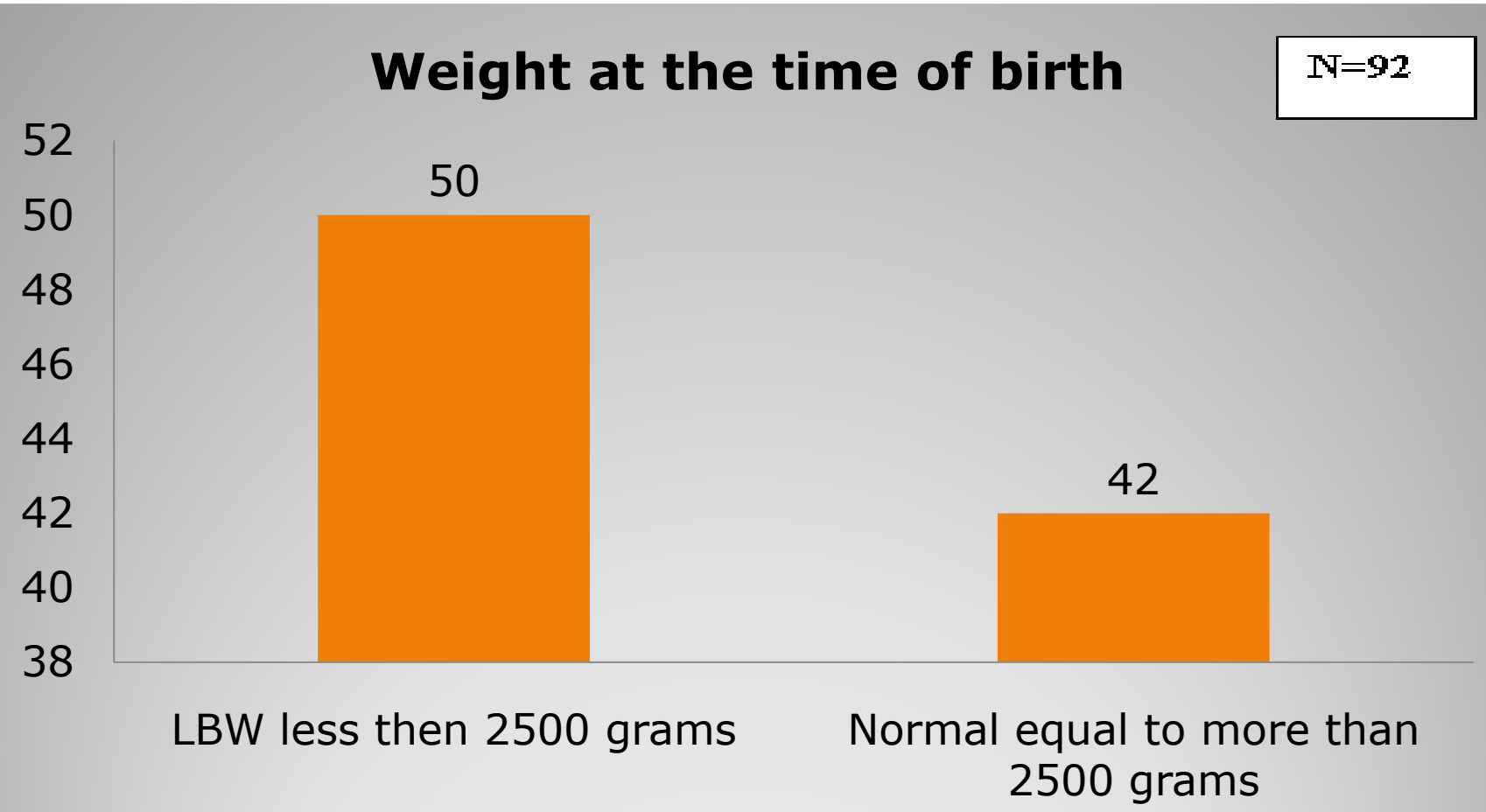
•55 deaths occurred in female child while 37 were male child, which suggests that there is still a need to show a bit more concern towards female child.

Immunization Status as per age at the time of death

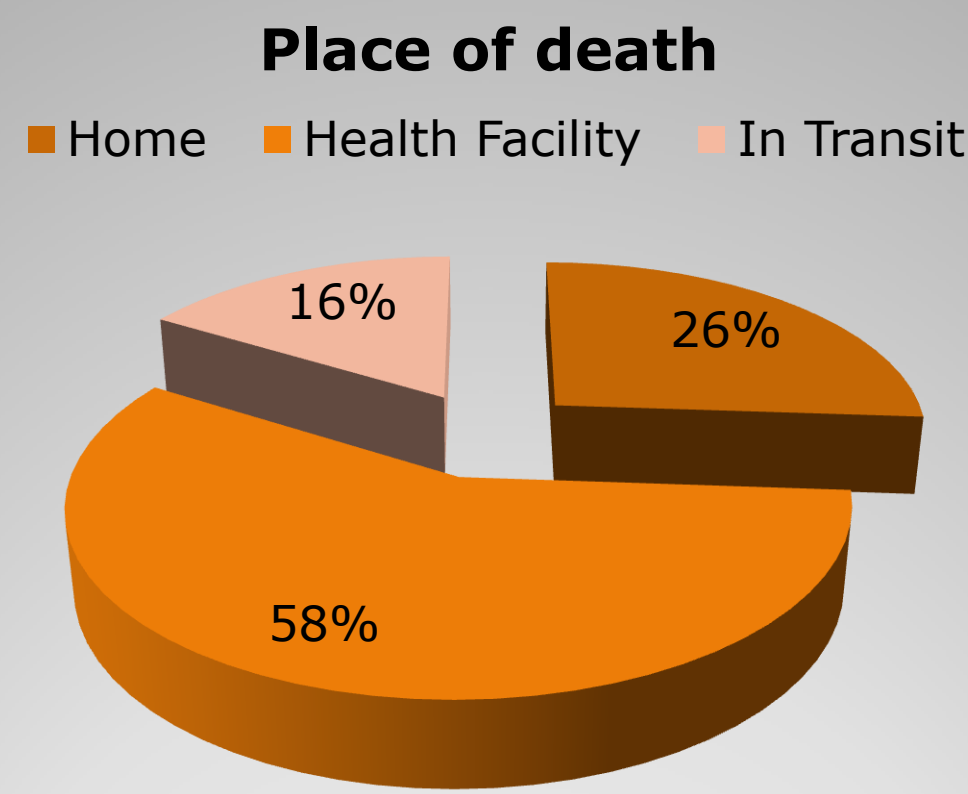
N=92



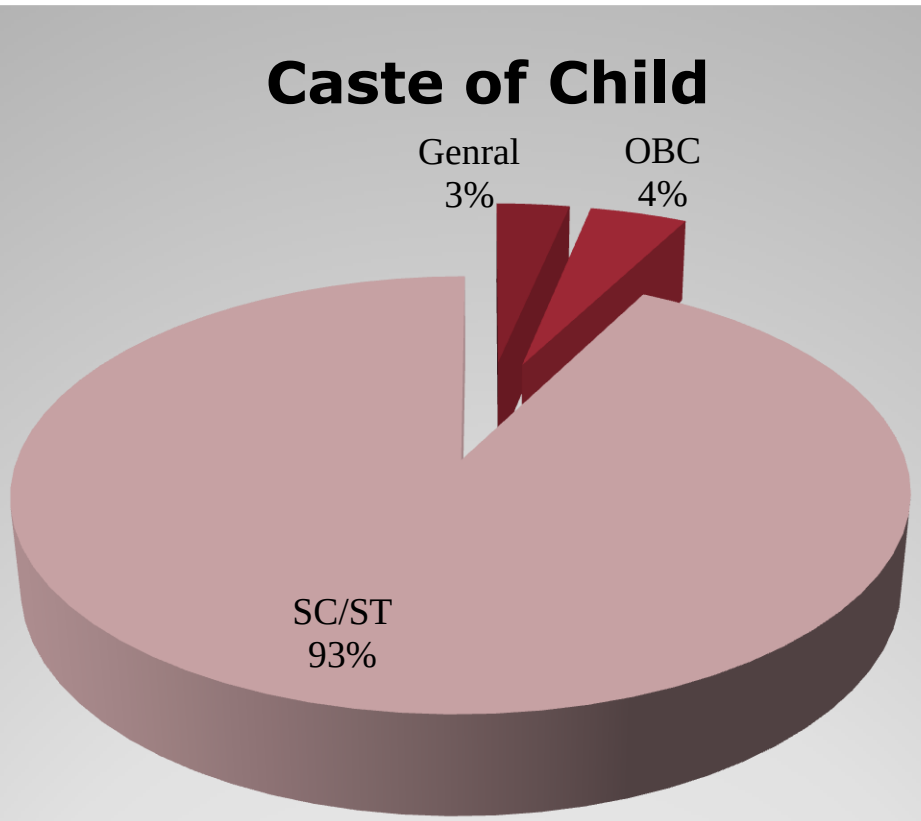
•56 (61%) of children were unimmunized at the time of death so there is need to follow the vaccination schedule strictly.



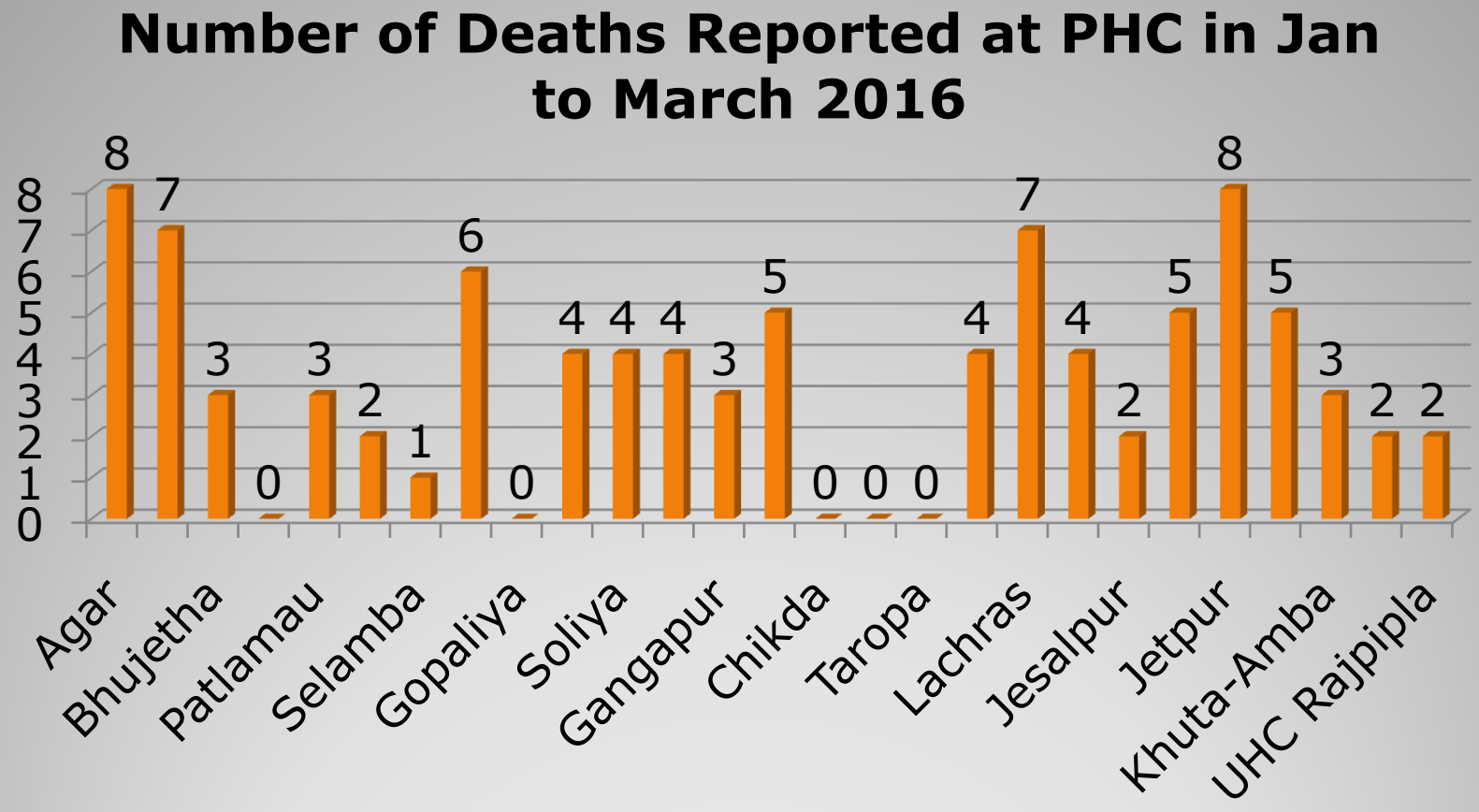
• Out of 92 child deaths 50 were reported underweight at the time of birth. Low birth weight can be cured by sending them in CMTC and NRCs.



A major concern is that 58% death occurred at health facilities; they must be strengthened and provided with more advance facilities.



•93% of child deaths occurred in the vulnerable groups of society that is in schedule cast and schedule tribe.



•PHC Agar and Jetpur were recorded highest number of child deaths (8) at the time of study period.

Conclusions

- There were 92 child deaths recorded in the month of January to March and major reasons were low birth weight, prematurity and pneumonia .
- One thing to notice here is that a big section is in other category which needs be known.
- Maximum number of deaths occurred in still birth and infants.
- Female child are still the one to be given more attention. Number of female child deaths are 55 in comparison to 37 males.

Conclusions

- The vaccination schedule needs to follow strictly as 61% children were unimmunized at the time of death.
- A few of the deaths could have been avoided if the children were sent to CMTC and NRCs because they reported underweight at the time of birth.
- A major concern is that 58% death occurred at health facilities; they must be strengthened and provided with more advance facilities.

Suggestions

- Specific answers should be provided in the other category.
- There should be no discrepancy in the data.
- Health facilities should be strengthened.
- Vaccines should be provided as per the vaccination schedule.
- Need of proper management of Low Birth weight cases as the number of deaths by this cause is high.


thank you