

# Evaluating Stillbirths

Improving stillbirth data could help make stillbirths a visible public health priority.

## Background

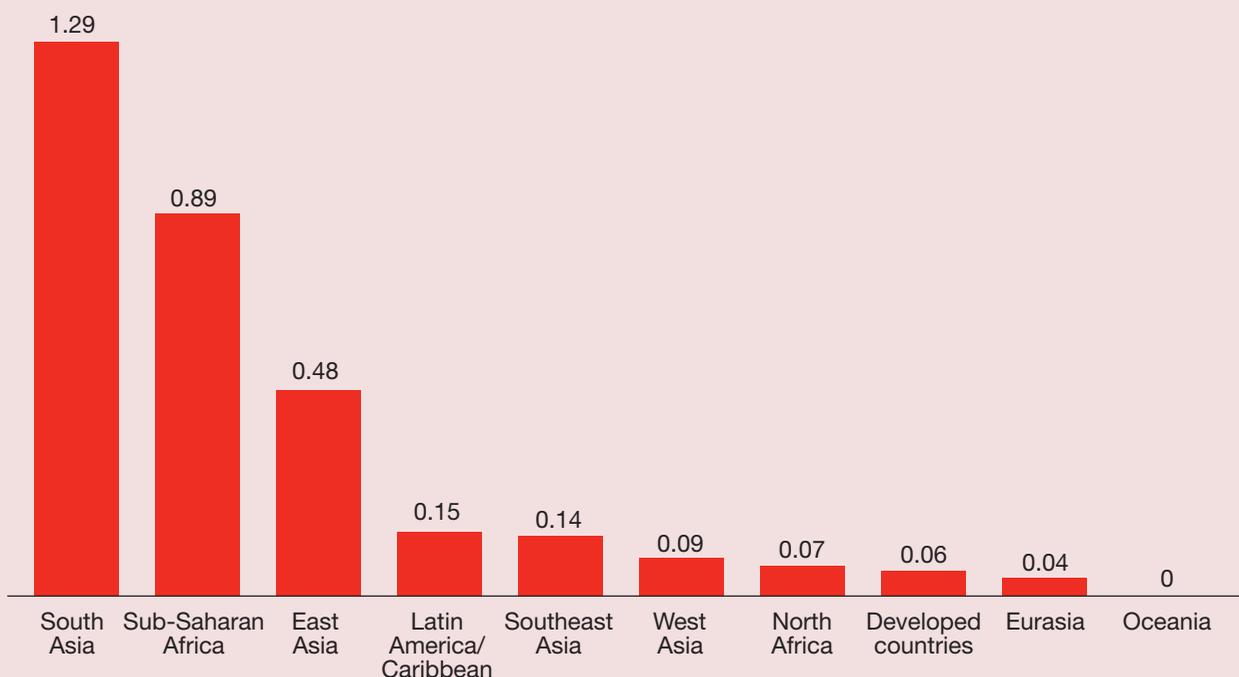
Although an estimated 10.6 million children ages 0 to 5 die each year, national health information systems fail to count most child deaths.<sup>1</sup> While researchers are trying to collect better child death data, they have focused largely on some age groups to the exclusion of others. Efforts have focused largely on children in the post-neonatal period, or 1-month-olds to 5-year-olds, although attention has recently been turning to the newborn. But stillbirths—babies born dead in the last 12 weeks of pregnancy—go uncounted in most national or global statistics. Evidence suggests that stillbirths constitute a large and invisible loss of life and a significant public health issue that must be addressed.

Health policies that promote child survival need better data on stillbirths. It is important to collect stillbirth data to determine if improved delivery care practices or more attention to problems that crop up during pregnancy could increase a baby's chance of survival. This information can be used to more effectively design medical and midwifery curricula, develop community and facility-based health programmes, and monitor their progress.

While Impact, a global research initiative, focusses mainly on measuring maternal health and survival, it acknowledges the importance of the maternal, newborn, and child health continuum and has been working to measure perinatal deaths, or those which occur in the last 12 weeks of pregnancy through the first week of life.

## Estimated Number of Stillbirths by World Region, 2000

Stillbirths (millions)



Source: C. Stanton et al., (May 6, 2006): figure 4.

Recent efforts by Immpact and the Saving Newborn Lives (SNL) initiative are improving the measurement of stillbirths and development of estimates. Working together, Immpact and SNL also estimated global stillbirth rates, which were recently published in *The Lancet*.<sup>2</sup>

## Findings

Using vital registration data, Demographic and Health Surveys (DHS), and data from a variety of subnational studies, Immpact and SNL calculated stillbirth rates for 190 countries and 10 regions for the year 2000.

An estimated 3.2 million annual stillbirths occurred worldwide, of which 99 percent occurred in developing regions (see figure). This global estimate of 3.2 million stillbirths is close to a recent WHO estimate of 3.3 million, though there are substantial differences at the country level.<sup>3</sup>

In Immpact and SNL estimates, stillbirth rates ranged from about 5 per 1,000 in the developed countries to 32 per 1,000 in south Asia and sub-Saharan Africa (see table). On average, the overall rate in developing countries (26 per 1,000) was about five times higher than in developed countries (5 per 1,000). The lowest stillbirth rates outside of the developed world were in Eurasia, Southeast Asia, and Latin America and the Caribbean (12, 13, and 13 per 1,000).

Immpact's analysis of DHS data showed serious under-reporting of stillbirths in most countries. In Indonesia and Burkina Faso, Immpact collected facility-based data on perinatal deaths so that researchers could analyse the relationship between perinatal health and survival and the mother's health status. Data from Indonesia show that the stillbirth rates are 56 percent for perinates whose mothers die in childbirth, 32 percent for perinates whose mothers suffer from a life-threatening complication during pregnancy, delivery, or in the postpartum period (a near miss), and 6 percent even among normal deliveries in facilities.

## Estimated Stillbirths Per 1,000 Deliveries, by Region, 2000

World	23.9
Developed countries	5.3
Developing countries	25.5
North Africa	18.6
Sub-Saharan Africa	32.2
Latin America/Caribbean	13.2
East Asia	23.2
South Asia	31.9
Southeast Asia	12.7
West Asia	18.9
Eurasia	12.2
Oceania	15.8

Source: C. Stanton et al., *The Lancet* (May 6, 2006): table 2.

## Recommendation

More and better stillbirth data are needed. Better counting of stillbirths and improved cause-of-death data are one way to advocate for and prioritise action to improve child health and survival. Most of the world's child death rates are based on surveys, which do not routinely measure stillbirths. Global statistics groups and the World Health Organization are actively promoting a systematic and open approach to global estimates of stillbirths that is well-documented and peer-reviewed. Improved stillbirth data will help decision-makers chart an effective course to improve child health and survival.

## References

<sup>1</sup> Cynthia Stanton et al., "Stillbirth Rates: Delivering Estimates in 190 Countries," *The Lancet* 367, no. 9521 (2006): 1487-94.

<sup>2</sup> Stanton et al., "Stillbirth Rates"

<sup>3</sup> World Health Organization (WHO), *Neonatal and Perinatal Mortality: Country, Regional and Global Estimates*. (Geneva: WHO, 2006).