Maternal and Newborn Health Disparities
Pakistan

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Maternal and Newborn Health Disparities in Pakistan
Key Facts

Pakistan reference table

Demographic indicators		
Total population (thousands)[1]	2015	188,925
Total live births (thousands)[1]	2015	5,451
Total Fertility Rate (number of children per woman)[1]	2015	4
Adolescent birth rate (per 1,000 women 15-19)[10]	2010	48
Impact indicators		
Maternal mortality ratio (per 100,000 live births)[4]	2015	178
Average annual rate of MMR reduction between 1990 and 2015 (%)[5]	2015	4
Lifetime risk of maternal death: 1 in x[4]	2015	140
Stillbirth rate (per 1,000 total births)[6]	2015	43
Preterm birth rate (per 100 live births)[7]	2010	16
Under-five mortality rate (per 1,000 live births)[3]	2015	81
Under-five deaths that are newborn (%)[3]	2015	57
Neonatal mortality rate (per 1,000 live births)[3]	2015	46
Neonatal deaths (thousands)[3]	2015	245
Service Delivery		
Availability of EmONC Services (% of minimum acceptable level)[8]	–	–
Physician density (per 1,000 population)[9]	2010	0.8
Nurse and midwife density (per 1,000 population)[9]	2010	0.6

Maternal and Newborn Health Disparities
Pakistan

In 2015, approximately 5,500,000 babies were born in Pakistan, or around 14,900 every day.[1]

Among young women (aged 20-24), 8 percent gave birth by age 18.[2]

Approximately 671 babies will die each day before reaching their first month[3]; 665 stillbirths occur every day.[6]

Neonatal mortality rate:

Pakistan's neonatal mortality rate (NMR)^ is 46 deaths per 1,000 live births.[3]

NMR≠ in rural areas is 62 deaths per 1,000 live births and 47 deaths per 1,000 live births in urban areas for an urban-to-rural ratio of 0.8.[2]
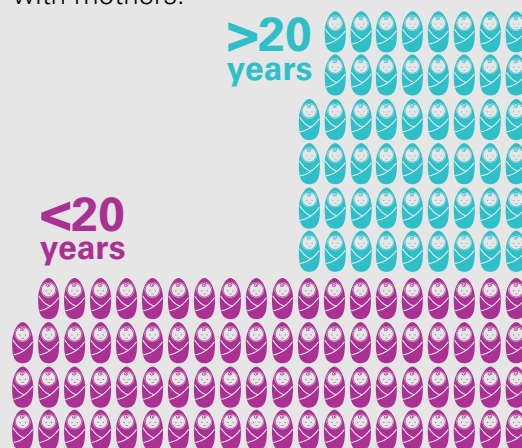
NMR≠ among the poorest households is 62 neonatal deaths per 1,000 live births, compared to 34 deaths per 1,000 live births among the richest households.[2]

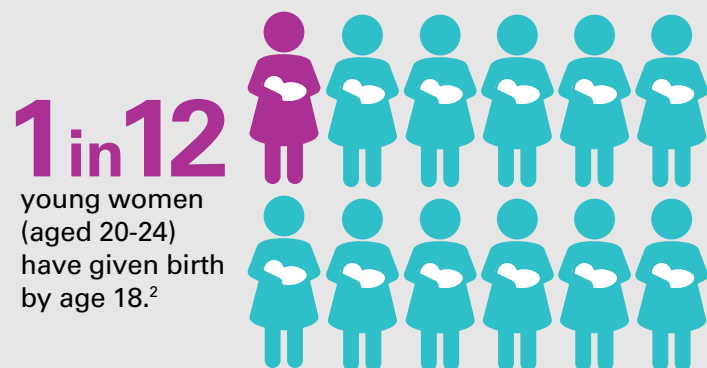### Neonatal mortality rates, by background characteristics, 2012-2013

Number of neonatal deaths (per 1,000 live births)≠,[2]

Residence — Rural 62, Urban 47
Household Wealth — Poorest 62, Richest 34
Mother's Age — Aged <20 79, Aged 20–29 52
Mother's Education — No education 65, Higher education 27

Neonatal mortality rate
for newborns
with mothers:

>20 years

<20 years

The NMR for younger mothers (79 per 1,000 live births) is 1.5 times higher than for mothers aged 20-29 (52 per 1,000 live births).[2]

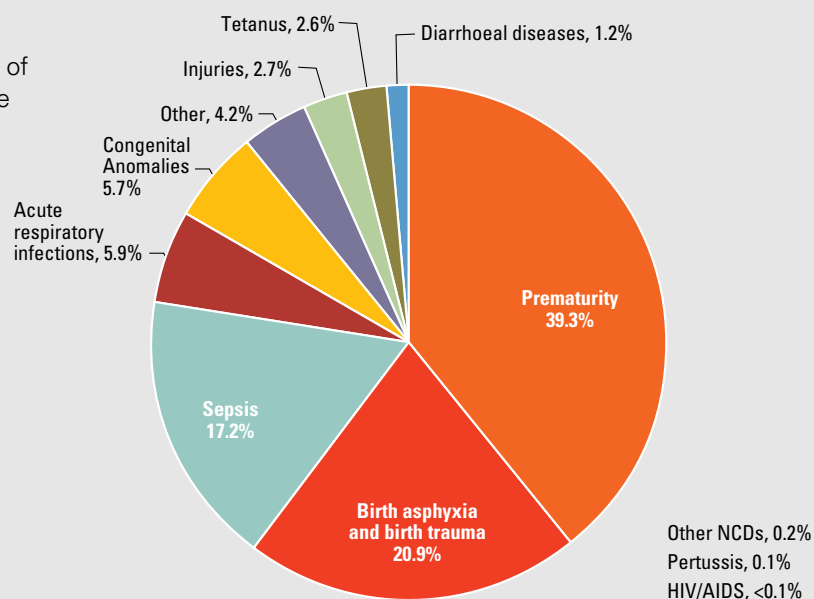
1 in 12 young women (aged 20-24) have given birth by age 18.[2]

Newborns with less educated mothers are

2.4x more likely to die during the first month compared to those born to mothers with higher education.[2]

Pakistan — Causes of Neonatal Mortality, 2015

In Pakistan, the main causes of neonatal deaths in 2015 were prematurity (39.3 percent), birth asphyxia and trauma (20.9 percent) and sepsis (17.2 percent).[11]

Tetanus, 2.6%
Diarrhoeal diseases, 1.2%
Injuries, 2.7%
Other, 4.2%
Congenital Anomalies 5.7%
Acute respiratory infections, 5.9%
Prematurity 39.3%
Sepsis 17.2%
Birth asphyxia and birth trauma 20.9%
Other NCDs, 0.2%
Pertussis, 0.1%
HIV/AIDS, <0.1%

Disparities in key maternal and newborn health interventions, Pakistan, 2012-2013[2]

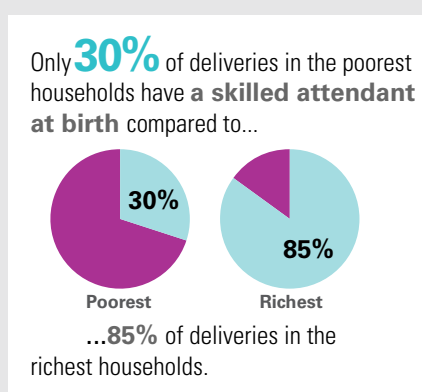|		Coverage – care for mothers					
		Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%)[a]	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
Residence	Urban	51.7	61.6	71.0	67.9	23.6	73.9
	Rural	44.3	25.8	44.4	40.1	10.2	54.6
Residence ratio (urban to rural)		1.2	2.4	1.6	1.7	2.3	1.4
Household Wealth	Richest	51.8	77.4	85.2	84.0	33.9	81.7
	Poorest	40.0	12.9	29.8	27.1	4.3	42.0
Household wealth ratio (richest to poorest)		1.3	6.0	2.9	3.1	7.9	1.9
Mother's age	Less than 20		31.5	55.0	48.7	13.5	58.6
	20-34		38.8	52.9	49.2	14.8	61.2
	35-49		26.4	43.8	40.4	8.9	55.0
Mother's education	No education	44.9	20.1	37.7	34.0	6.5	51.6
	Primary	48.0	39	57.0	52.0	16.0	59.1
	Secondary	50.0		76.0	71.7	25.4	73.0
	Higher	50.8		91.7	89.7	38.7	88.3
Mother's education ratio (highest to lowest)		1.1		2.4	2.6	6.0	1.7

Maternal and newborn health coverage indicators

By residence:[2]

- In rural areas, 26 percent of women made at least 4 antenatal care (ANC) visits compared to 62 percent in urban areas.

- Coverage of skilled attendance at birth is 44 percent in rural areas, compared to 71 percent in urban areas.

- 39 percent of newborns in rural areas receive postnatal care (PNC) within 2 days after birth, compared to 52 percent in urban areas.

By household wealth:[2]

- Only 30 percent of deliveries in the poorest households had a skilled attendant at birth, compared to 85 percent of deliveries among the richest households.

- 59 percent of newborns in the richest households receive PNC within 2 days after birth, compared to 27 percent among the poorest households.

Only **30%** of deliveries in the poorest households have **a skilled attendant at birth** compared to...

30% Poorest
85% Richest

...85% of deliveries in the richest households.

Coverage – care for newborns									Other		
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine for newborn (%)	DPT1 vaccination received (%)**	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%)#			
52.4	27.8	17.9		93.0	87.9	75.3	59.3		Urban		Residence
38.8	5.8	18.1		81.7	74.7	59.0	22.8		Rural		
1.4	4.8	1.0		1.1	1.2	1.3	2.6		Residence ratio (urban to rural)		
59.2	44.5	21.9		97.3	95.9	86.5	71.4		Richest		Household Wealth
26.7	1.9	21.7		70.6	52.0	40.8	5.0		Poorest		
2.2	23.4	1.0		1.4	1.8	2.1	14.3		Household wealth ratio (richest to poorest)		
35.6	8.4					55.5			Less than 20		Mother's age
43.7	12.9					67.1			20-34		
42.1	10.3					50.2			35-49		
34.5	3.4	18.8		78.4	68.3	50.3			No education		Mother's education
47.2	7.9	12.3		89.2	86.0	73.2			Primary		
51.4	26.4	18.3		94.6	92.1	83.4			Secondary		
66.7	51.7	23.8		97.2	98.1	90.9			Higher		
1.9	15.2	1.3		1.2	1.4	1.8	1.6		Mother's education ratio (highest to lowest)		

Key for tables: 0-24 % 25-49 % 50-74 % 75-100% Data not available

Selected maternal and newborn health indicators, by region, 2012-2013

Skilled attendant at birth

Postnatal care of newborns within 2 days

Early initiation of breastfeeding

By mother's age:[2]

- Deliveries among mothers aged 20-34 and younger mothers (aged less than 20) have similar levels of skilled attendance at birth (53 percent and 55 percent, respectively).

- 44 percent of newborns born to mothers aged 20-34 received postnatal care (within 2 days), compared to 36 percent among mothers aged less than 20 years.
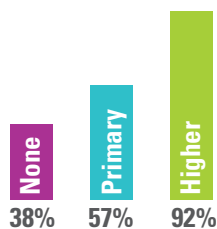
Disparities in key maternal and newborn health interventions, Pakistan, 2012-2013[2]

	Coverage – care for mothers					
	Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%)[a]	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
National estimate	**47.0**	**36.6**	52.1	48.2	**14.1**	60.3
Punjab excluding Islamabad (ICT)	49.7	38.5	52.5	48.5	16.9	66.0
Sindh	48.6	44.4	60.5	58.6	15.4	66.3
Khyber Pakhtunkhwa	36.4	24.0	48.3	40.5	4.6	37.7
Balochistan	32.3	12.2	17.8	15.8	1.5	37.2
Islamabad (ICT)	61.3	82.1	88.1	86.4	26.6	77.9
Gilgit Baltistan	51.9	30.9	43.7	42.6	3.3	19.9
Sylhet	62.4	15.7	27.1	22.6	10.9	44.6
Highest value	Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)
	61.3	82.1	88.1	86.4	26.6	77.9
Lowest value	Balochistan	Balochistan	Balochistan	Balochistan	Balochistan	Gilgit Baltistan
	32.3	12.2	17.8	15.8	1.5	19.9
Ratio (highest to lowest)	1.9	6.7	4.9	5.5	17.7	3.9

(Region) (Regional performance)

By mother's education:[2]

- Only 38 percent of deliveries among mothers with no education had a skilled attendant at birth, compared to 57 percent of deliveries among mothers with primary education and 92 percent of deliveries among mothers with a higher education.

- 35 percent of newborns are checked within two days after birth if their mothers have no education, compared to 47 percent of mothers with a primary education and 67 percent of mothers who received higher education.

The better educated the mother is, the more likely she will receive critical **maternal health services**

None	Primary	Higher
38%	57%	92%

Percentage of deliveries having a skilled birth attendant relative to the mother's level of education

By geographic regions:[2]

- The region with the highest coverage of skilled birth attendance is Islamabad (ICT) with 88 percent; the lowest coverage is Balochistan with 18 percent – a difference of 5 times.

- Islamabad (ICT) has the highest coverage of PNC for newborns (within 2 days after birth) with 55 percent while Gilgit Baltistan has the lowest coverage at 4 percent – a difference of nearly 16 times.

Coverage – care for newborns								Other		
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine for newborn (%)	DPT1 vaccination received (%)**	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%)#		
42.8	12.2	18.0	37.7	85.2	78.8	63.9	33.6	8.2	National estimate	
51.3	11.6	12.7		91.6	87.2	73.8	46.1		Punjab excluding Islamabad (ICT)	Region
41.1	19.1	19.7		78.5	65.1	53.5	25.1		Sindh	
22.4	5.0	26.4		79.7	77.1	55.6	9.6		Khyber Pakhtunkhwa	
14.8	1.2	42.1		48.9	37.7	23.2	7.7		Balochistan	
55.1	60.5	19.9		96.5	95.1	85.8	74.2		Islamabad (ICT)	
3.5	22.9	60.4		78.6	62.4	51.8	23.3		Gilgit Baltistan	
41.7		56.5		91.3	87.5		26.3		Sylhet	
Islamabad (ICT)	Islamabad (ICT)	Gilgit Baltistan		Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)	Islamabad (ICT)		Highest value	Regional performance
55.1	60.5	60.4		96.5	95.1	85.8	74.2			
Gilgit Baltistan	Balochistan	Punjab excluding Islamabad (ICT)		Balochistan	Balochistan	Balochistan	Balochistan		Lowest value	
3.5	1.2	12.7		48.9	37.7	23.2	7.7			
15.7	50.4	4.8		2.0	3	3.7	9.6		Ratio (highest to lowest)	

Key for tables: ■ 0-24 % ■ 25-49 % ■ 50-74 % ■ 75-100% ■ Data not available

Sources:

1   United Nations, Department of Economic and Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision.

2   Pakistan Demographic and Health Survey 2012-2013 via the DHS Program STATcompiler. (http://www.statcompiler.com).*

3   United Nations Inter-agency Group for Child Mortality Estimation (UNICEF, WHO, United Nations Population Division and the World Bank).

4   United Nations Maternal Mortality Estimation Inter-agency Group (WHO, UNICEF, UNFPA, United Nations Population Division and the World Bank).

5   Trends in maternal mortality: 1990 to 2015: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division.

6   Lawn JE, Blencowe H, Waiswa P, et al, for The Lancet Ending Preventable Stillbirths Series study group with The Lancet Stillbirth Epidemiology investigator group. Stillbirths: rates, risk factors, and acceleration towards 2030. Lancet 2016; published online Jan 18. http://dx.doi.org/10.1016/S0140- 6736(15)00837-5.

7   Blencowe H, Cousens S, Oestergaard M, Chou D, Moller AB, Narwal R, Adler A, Garcia CV, Rohde S, Say L, Lawn JE. National, regional and worldwide estimates of preterm birth rates in the year 2010 with time trends since 1990 for selected countries: a systematic analysis and implications. The Lancet, June 9 2012, 379(9832): 2162-72.

8   Averting Maternal Death and Disability, United Nations Children's Fund, and United Nations Population Fund special data compilation, 2015.

9   Global Health Workforce Statistics database, World Health Organization, Geneva. (http://www.who.int/hrh/statistics/hwfstats/).

10 United Nations, Department of Economic and Social Affairs, Population Division (2015). 2015 Update for the MDG Database.

11. WHO-MCEE estimates for child causes of death, 2000-2015. (http://www.who.int/healthinfo/global_burden_disease/estimates_child_cod_2015/)

Notes:

*   DHS data drawn from STATcompiler which employs standard indicator definitions to allow for comparability between countries and year. As such, data herein may not reflect data included in the final report. For further information please visit http://goo.gl/jXJ5SW. MICS data reflect final report figures where available.

** DPT vaccinations include Hepatits B.

a   Data from UNICEF reanalysis of Pakistan Demographic and Health Survey 2012-2013.

^   Reference period: five years preceding the survey.

≠   Reference period: ten years preceding the survey.

Births by age 18 among 20-24 year olds.

( ) Based on small denominators (typically 25-49 unweighted cases). No data based on fewer than 25 unweighted cases are displayed.

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