Private Community Skilled Birth Attendants
serving the health needs of mothers and children in northern Bangladesh
In Bangladesh, the maternal mortality rate is 173 per every 100,000 live births (WHO, 2017). Over 5,000 women die every year due to complications during pregnancy, delivery, and the period following birth (UNICEF, 2018). Traditional Birth Attendants (TBA) still remain the primary preference for pregnant women due to the lack of access and unavailability of quality healthcare facilities and the cost associated with seeking healthcare services. Out of the 62.2% of total births that takes place at home, only 14% are conducted by Skilled Birth Attendants (SBA) (Saha & Odjidja, 2017).

With an aim to support pregnant women in the remote char and haor areas in northern Bangladesh, SHOUHARDO III introduced Private Community Skilled Birth Attendants (PCSBA) in early 2021 as Local Service Providers (LSP). The program trained PCSBAs to provide Growth Monitoring and Promotion (GMP) services, counsel mothers before and after pregnancy, and safe child delivery services.

With technical assistance from the Ministry of Health and Family Welfare (WoHFW), the program provided a six-month-long residential training to seventy-five PCSBAs. As a result of institutional collaboration with the health infrastructure of the government by the program, Civil Surgeon (CS) and Deputy Director of Family Planning (DDFP) of the respective districts facilitated the overall arrangement of the training and also helped PCSBAs establish linkage with Health and Family Planning staff.

PCSBAs are now providing their services in remote communities where access to formal healthcare facilities is limited. Pregnant and lactating mothers are able to receive health services at a low cost at their own doorstep. PCSBAs are maintaining close contact with government health officials who are helping them establish a strong network with healthcare facilities to promote safe and institutional deliveries. Let’s take a glimpse of the impacts that PCSBAs continue to create.
Shabana (35) is one of SHOUHARDO III’s PCSBA from Char Rajibpur of Kurigram district. Since September 2021, she has conducted 50 safe birth deliveries. She also provides need-based services to pregnant and lactating women (PLW), conducts general health check-ups, tests for blood pressure and diabetes, and accompanies pregnant women to government and private hospitals.

"Attending the PCSBA training was a great opportunity for me. I was very determined about becoming a skilled birth attendant from my youth as I saw many pregnant women suffer. A lot of women did not have the required nutritious food because they believed that it would increase the child’s weight in the womb resulting in a difficult birth. I also saw many deaths during birth. I wanted to do something about this but it seemed impossible to become a skilled birth attendant. I was married at the age of 14 years and was busy taking care of the family. I could not financially afford the necessary training required without the support of SHOUHARDO III.

After completing her training, she began working in her locality. Her continuous effort has made her very well-known amongst gynecologists, Community Health Care Providers (CHCPs), elected members and officials of Union Parishads, and the residents of her working unions. It has become very common for CHCPs to call Shabana for delivery-related support. Currently, Shabana earns about BDT 20,000 (USD 210.53) every month for her services. She contributes to her family’s livelihood by helping manage the educational expenses of her children along with other needs. She wishes to expand her services to reach more people by increasing the geographic areas she works in."
Runu (23) became a PCSBA so that she could help pregnant and lactating women, specifically adolescent girls (13-14 years of age). She lives in Shippasha of Ajmiriganj upazila a sub-district of Habiganj district. Runu previously accompanied local Family Welfare Volunteers (FWV) to assist pregnant women to go to the Upazila Health Complex to obtain delivery services. This experience revealed to Runu that there is a scarcity and lack of timely and efficient services in remote areas; she particularly saw the need for delivery services by skilled birth attendants. In 2021, she participated in SHOUHARDO III’s PCSBA training and started to provide need-based services to PLW.

After completing her training, Runu returned to her locality, where she concentrated on providing services and expanding her network. She started to visit the Union Health Complex two or three days a week, which made people believe that she is a government-registered birth attendant and earned her more respect.
Jhunu Akter (22), who received services from Runu shared,

“About two or three months ago, Runu delivered my child. Though she had monitored me for several months, at the time of delivery, she arrived to my house just a few minutes after I contacted her! Pregnant mothers like me, feel very safe, especially in having a safe delivery as Runu apa is always available.”

With the income that she earned in the first few months of work, she spent BDT 15,000 (USD 158.39) to open up a pharmacy at her house. Nowadays, she earns around BDT 10,000 (USD 105.59) every month as a PCSBA. In the near future, she plans to open a big pharmacy adjacent to the Union Health Complex.
Shirina (26) from Uttar Khatiamari village of Gaibandha district is a PCSBA who tirelessly provides services to PLW in her village and surrounding areas. Shirina has witnessed the loss of many infants and mothers as non-skilled birth attendants did not know how to handle critical situations. In most cases, elderly women were contacted to conduct the deliveries who did not have the required skills which led to maternal and infant mortality. This motivated Shirina to receive training in conducting safe deliveries and necessary health check-ups for pregnant women.

In 2021, she completed the SHOUHARDO III PCSBA training. During her one-month field practice, Shirina informed women about her training and involvement as a PCSBA. She also informed Union Parishad officials and other local stakeholders about the training and skills she was acquiring so that she can get their support when needed.
Since beginning her work as a PCSBA, she conducted more than 40 safe deliveries and conducts check-ups as and when required. On average, she earns BDT 8,000 (USD 84.47) each month through the services she is providing in her village. She receives an additional profit of about 3,000 (USD $31.68) every month from selling medical drugs.
SHOUHARDO III developed PCSBAs to strengthen the local health service provision. PCSBAs are successfully meeting the healthcare needs of pregnant and lactating women and reaching hard-to-reach areas where formal healthcare facilities are limited. With constant guidance from MoHFW, PCSBAs are improving their quality of service and getting the required linkage support from local healthcare facilities. Not only are they serving the community but they are also earning an income which is helping improve their own livelihoods and social recognition. Since October 2021, PCSBAs have successfully conducted 1904 safe deliveries and earned a total of BDT 1,723,939 (USD 18,005) from all associated services.

Endnote

1. Traditional Birth Attendant, is a pregnancy and childbirth care provider. They usually don’t have formal education and training and also don’t have specific certificate. They work based on their experience and knowledge acquired informally through the traditions and practices of the communities. They usually work in rural, remote, and underserved areas where health services are unavailable or inadequate by trained health personnel.

2. Skilled Birth Attendant is defined as an accredited health professional such as a midwife or nurse who has been educated and trained to proficiency in the skills required to manage normal pregnancy, childbirth and immediate postnatal period.

3. GMP is the regular measurement, recording and interpretation of a child’s growth change in order to counsel act and follow-up on results. It is being implemented to detect growth faltering of infants and young children early and enhance the transfer of nutrition information in order to take the preventive and curative actions needed. National Nutrition Services (NNS), Bangladesh

4. Civil Surgeon acts as a role of district health administrator or manager responsible for all type of development and administrative health services in the district. Sometimes, Civil Surgeon plays the role of superintendent of district hospital.

5. Deputy Director-Family Planning acts as a role of district manager of all district level family planning activities.

6. Safe Birth Deliveries are conducted either in a health institution or a home assisted by a trained health professional.

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