Helping Babies Breathe

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Helping Babies Breathe

With the launch of Helping Babies Breathe (HBB) in 2010, the HBB Global Development Alliance (GDA) was formed to support an effective and widespread implementation of HBB and reduce global newborn mortality. Through the strong and vibrant HBB GDA, the following achievements were possible:

- Increased global demand on newborn resuscitation with HBB now introduced in 73 countries, of which 17 have national plans coordinated by governments. HBB has been translated into more than 25 languages.
- Over 220,000 health workers have been trained, equipped and supported, ready to save lives at birth.
- 140,000 bag-mask resuscitators, 200,000 penguin suction devices, and 54,000 NeoNatalie simulators have been supplied on a not-for-profit basis.
- HBB has been listed in the WHO document “Essential Interventions, Commodities, and Guidelines”, in the UN Commission on Life-Saving Commodities reports, and also presented as 1 of 10 breakthrough innovations to help save mothers and babies at the UN General Assembly in September 2013.

HBB significantly reduces newborn deaths

A study in Tanzania with over 88,000 observed births showed a 47% reduction in first-day neonatal mortality and a 24% reduction in rates of fresh stillbirth after the HBB program was implemented.
Helping Babies Survive
A suite of training programs to reduce newborn mortality

Train to Save Newborn Lives

Worldwide, over 2.2 million newborns die annually in the first 7 days of their life. A comprehensive package that includes neonatal resuscitation and essential newborn care, prevention and management of small and preterm babies and preterm births can make a difference. It is estimated that such a package can decrease neonatal deaths by 50% or more.

In 2012, the HBB GDA partners joined with the American College of Obstetricians and Gynecologists (ACOG) and the American College of Nurse Midwives (ACNM) to form the Survive and Thrive (S&T) GDA to address maternal, newborn, and child health challenges. Under the S&T umbrella, and built on the successful creation and roll-out of HBB, the group is developing additional training modules: Essential Care for Every Baby (ECEB), Essential Care for Small Babies (ECSB) and ACS before Every Preterm Birth in an effort to combat newborn morbidity and mortality. This ground-breaking modular training initiative is referred to as Helping Babies Survive (HBS).

The four HBS modules follow the HBB educational principles. The program is simple, yet based on the latest WHO guidelines, with an Action Poster and graphical educational materials. It is using innovative affordable equipment and simulation models “PreemieNatalie Preterm Simulator” and “MamaBreast” to help health workers learn and maintain their skills. It is designed to ensure that every birth attendant has the knowledge, skills and tools available to provide, effective interventions to manage babies before, during and after birth.

Helping Babies Breathe
Ensures care for healthy babies, and assisting babies that do not breathe on their own immediately after birth. Developed by the American Academy of Pediatrics (AAP) and introduced in 2010 as the first program in the Helping Babies Survive series.

Essential Care for Every Baby
Developed by AAP in partnership with S&T partners and covers the period after the birth throughout the first day of the newborn’s life, until the time of discharge. Launched in Ethiopia May 2014.

Essential Care for Small Babies
Focuses on the extended care that small and preterm babies need at birth and beyond. Developed by AAP together with S&T partners. It is designed to be taught in conjunction with ECEB. Launch planned near World Prematurity Day 17 Nov.

ACS before Every Preterm Birth
Antenatal Corticosteroids, (ACS ) is the single most beneficial intervention for babies born between 24-34 weeks. It gives providers the knowledge and skill to reduce missed opportunities and provide ACS to all mothers at high risk of delivering prematurely. developed by Jhpiego, ACNM and ACOG in partnership with S&T partners Launch planned during the Global ACS meeting in Washington Aug 2014.
The HBB programs in Bangladesh and Malawi have made impressive progress after only two years of a massive national scale-up effort. Interventions such as HBB must be implemented at scale in order to achieve impact at the population level, but this introduces a set of system-related challenges that are not faced during small-scale trials. Therefore, lessons learned of the early stages of national scale-up of HBB during 2012 and 2013 were collected in Malawi and Bangladesh.

The review process from these two countries showed that there is need to strengthen the health systems within which this program is being delivered. It is critical to pay attention to processes that will improve quality, provider motivation, retention of skills, and the provision of equipment. All of this must be supported by the government management system and included in the national plan and budget. This would depend on timely availability and utilization of appropriate and quality data including training, provider performance and outcomes. Both countries are working to strengthen systems based on improved availability and timely use of data. It is therefore clear that HBB is an intervention that will require continued nurturing well past the initial scale-up if it is to achieve substantial impact on newborn mortality.

Helping 100,000 Babies Survive and Thrive

The S&T partners have initiated a focused effort to save at least 100,000 newborn lives every year across three countries - Ethiopia, India and Nigeria - in support of the Every Newborn Action Plan. With an initial commitment of US $5 million, the initiative will train, equip and support birth attendants to roll out the Helping Babies Survive program in the three countries. The health professional associations of the US will partner with their counterparts in India, Nigeria, and Ethiopia to implement the program. Professional associations play a key role in empowering and equipping health providers to be champions, leaders, and change agents in newborn and child health. With effective tools and materials, and systematic focus on quality improvement, they can support their countries’ plans to end preventable deaths. And help 100,000 babies survive and thrive!