# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 980**

**DATE OF PUBLICATION IN INTERNAL QUESTION PAPER: 20 SEPTEMBER 2019**

**(INTERNAL QUESTION PAPER NO. 17)**

**Mr P A van Staden (FF Plus) to ask the Minister of Health:**

(1) With reference to the report of his Director-General on 28 August 2019 to the Portfolio Committee on Health, with regard to the infant mortality rate and the neonatal mortality rate (details furnished), (a) what are the reasons for the high mortality rate, (b) what preventative measures has his department put in place to combat the high mortality rate and (c) on what date were the preventative measures put in place;

(2) whether he will make a statement on the matter?

**NW2132E**

###### REPLY:

1. (a) The reasons for the high infant mortality rate and the neonatal mortality rates are:

 Severe prematurity;

Birth asphyxia;

Infections;

Severe congenital disorders;

Diarrhoeal disease;

Pneumonia;

HIV/AIDS; and

Injuries.

(b)-(c) Health sector preventive measure to address the causes of neonatal and infant mortality rates and date put in place are summarized in the table below.

|  |  |
| --- | --- |
| **Preventive measures** | **Date put in place** |
| **(1)(b)** | **(1)(c)** |
| Integrated Management of Childhood Illnesses | 1996 |
| Prevention of vertical (mother-to-child) transmission of HIV infection. | The PMTCT guidelines began in 2002, and it is revised periodically to include new evidence and the latest revision is the 2019 version  |
| Comprehensive care, management and treatment of HIV infected children. | 2004 |
| Immunization against pneumococcal and rotavirus infection to protect children against the commonest forms of diarrhoea and pneumonia. | 2009 |
| Promotion of breastfeeding especially exclusive breastfeeding for 6 months. | The Tshwane Declaration in 2011. |
| The improvement of staff skills through the Essential Steps for Management of Obstetric Emergencies (ESMOE)- so that they are able to manage high risk pregnancies which may result in neonatal deaths. | 2010 |
| Introduction of District Clinical Specialist Teams and Ward-based Outreach teams. | 2012 |
| Helping Babies Breathe (HBB) and Management of Small and Sick Neonates (MSSN). | 2013 |
| Continuous Positive Airway Pressure (CPAP) to manage very small babies. | 2015 |
| Basic Antenatal Care Plus (BANC Plus) which is the increase of antenatal visits to 8 visits during the pregnancy period so that abnormalities such as hypertension can be detected early and managed to prevent stillbirths. | 2017 |
| Safe Ceasarean Section Standards for accre-ditation of hospitals to be able to conduct high risk pregnancies safely. | 2017 |
| Side by side under-five campaign. | April 2018 |

(2) Yes.

END.