

Global Stillbirth and the Social Determinants of Health

Striving to reduce stillbirth

The *Global Every Newborn Action Plan* sets a global target of 9 stillbirths per 1000 total births by 2030. Currently stillbirth rates average 12.8 per 1000 births, equating to 2.6 million deaths annually.

Stillbirth rates are generally much lower in high- compared to middle- and low-income countries.

ICELAND has the lowest stillbirth rate globally

1.3 PER 1,000 TOTAL BIRTHS

PAKISTAN has the highest stillbirth rate

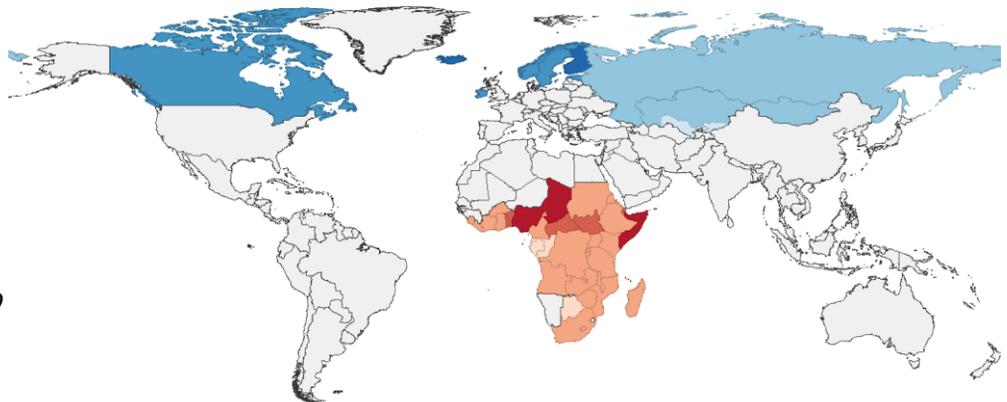
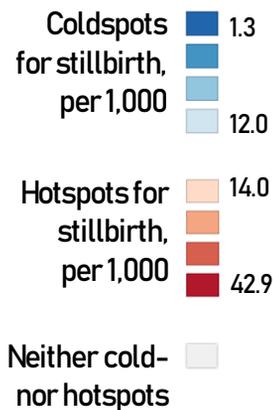
43.1 PER 1,000 TOTAL BIRTHS



Stillbirth hotspots and coldspots

Worldwide, **high rates** of stillbirth are most prevalent in a cluster of 37 countries. Rates range from **14.0** to **42.9** deaths per 1,000 total births.

13 countries with **low rates** of stillbirth are clustered in Europe, Northern Asia and Canada. Stillbirth rates range from **1.3** to **12.0** per 1,000 total births.



Finding solutions

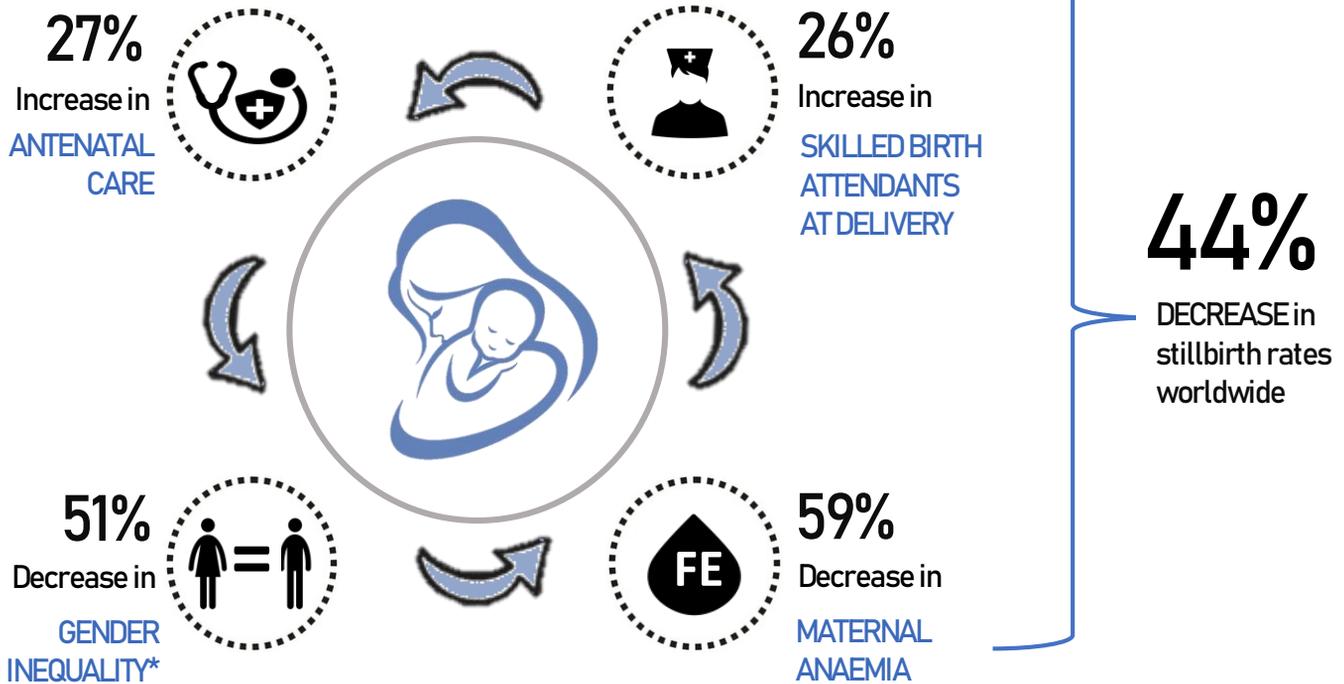
Studying differences in socioeconomic, cultural, and lifestyle factors, and maternal health service coverage between global hotspots and coldspots reveals links between rates of stillbirth and:

- Gender inequality
- Antenatal care coverage
- Maternal anaemia
- Skilled birth attendants at delivery



What is needed?

Theoretically, **ALL COUNTRIES** could have low stillbirth rates if there were the following **GLOBAL IMPROVEMENTS**:



*Using an index that measures disparity between men and women in reproductive health, empowerment and the labour market

Gender inequality linked to other determinants

Data from the United Nations for 156 countries shows that gender inequality is highly correlated with:

- ✓ lower gross national income per capita
- ✓ lower female education
- ✓ higher poverty rates
- ✓ higher crude birth rates

Efforts to reduce stillbirth by addressing gender inequality could have positive, lasting effects on a variety of socioeconomic factors.

Call to action

- There is an urgent need to reduce stillbirths globally
- Multi-pronged strategies are needed to promote **GENDER EQUALITY** and strengthen **MATERNAL HEALTH SERVICES**
- Efforts should be targeted to areas of greatest need in **AFRICA**, the **EASTERN MEDITERRANEAN**, and **SOUTH EASTERN ASIA**

SOURCE:

Adeyinka, D.A., Olakunde, B.O. & Muhajarine, N. Evidence of health inequity in child survival: spatial and Bayesian network analyses of stillbirth rates in 194 countries. *Sci Rep* 9, 19755 (2019)

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