

PRIVATE SECTOR PEER LEARNING: PARTNERSHIP PROFILES

Helping Babies Breathe (HBB)

Description: [Helping Babies Breathe](#) (HBB) is a public-private partnership, which operates at both the global and country levels, that develops and implements evidence-based health-care practices to decrease neonatal mortality due to birth asphyxia in low-resourced countries. It responds to the evidence that 30% of 1 million neonatal deaths from birth asphyxia can be averted with basic health-care practices.

Objectives: HBB increases neonatal survival by: 1) increasing the global commitment to neonatal resuscitation; 2) improving the availability of high-quality, affordable resuscitation devices and training materials; 3) improving the resuscitation capabilities of birth attendants; 4) strengthening the supply chain logistics system for resuscitation devices; and 5) evaluating the impact of resuscitation programmes at scale.

Partners: Helping Babies Breathe is an initiative of the American Academy of Pediatrics and many partners, including the US Agency for International Development (USAID), The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), and Saving Newborn Lives/Save the Children. The curriculum was developed with input from the World Health Organization (WHO). All this is made possible by an unrestricted educational grant from the Laerdal Foundation for Acute Medicine, and support from Latter-day Saint Charities. HBB is part of USAID's Global Development Alliances. In the HBB alliance, private sector partners agree to abide by the principles of country leadership, inclusiveness, collaboration and brand non-exclusivity. Each partner's contribution varies, but their combined cash and in-kind contributions surpass the funds provided by USAID at a rate of three to one. Notably, HBB's training curriculum was developed by the American Academy of Pediatrics and early evidence was generated by the Eunice Kennedy Shriver National Institute of Child Health and Human Development and other health research institutions and associations. Moreover, USAID and corporate partners have provided funds to scale up the programme. Specifically, Johnson & Johnson trains birth attendants and Laerdal Global Health develops resuscitation devices, provides them at cost and improves supply chain logistics. Non-governmental organisations contribute as well. For instance, Save the Children implements the programme and Latter-day Saint Charities purchases training materials and equipment.

Key activities: HBB is a country-owned and country-led public-private partnership that is co-ordinated through ministries of health. It is integrated into a broader package of essential newborn care interventions. HBB trains birth attendants on simple, evidence-based life-saving techniques such as tactile stimulation and nasal aspiration. Training is adapted to be culturally relevant and includes pictorial-based learning materials and realistic newborn mannequin simulators. HBB also develops high-quality, low-cost resuscitation equipment such as bag-mask ventilators.

Results: HBB has been introduced in over 77 countries and more than 300 000 birth attendants have been trained and equipped. Over a two-year period in Tanzania, HBB reported reductions in early newborn mortality (within the first 24 hours of life) by 47% and stillbirth by 24%. At the global level, HBB has influenced the updating of global policy recommendations, created awareness about the lack of appropriate indicators for tracking progress on and outcomes of resuscitation interventions at both the global and country levels, and improved global supply chains for resuscitation equipment.

Monitoring and evaluation: HBB has thus far conducted reviews in seven countries, where over 40% of health-care facilities benefited, 44-75% of staff were trained and 53-88% of facilities received equipment. HBB had a 79-89% rate of successful neonatal resuscitation. However, access to resuscitation remained relatively low at 8-50% since it depends on the coverage of skilled birth attendants. HBB has led to changes in national health-care plans and policies as well as the incorporation of neonatal asphyxia and resuscitation data into national registries.

Development Assistance Committee member: United States

Budget: USD 58 million

Duration: Ongoing since 2010

Location: Low-resourced countries

Sector: Health

Activities: Training and equipment for neonatal resuscitation

Beneficiaries: Health-care facilities, birth attendants, mothers and newborns

Insights: HBB is an example of an effective country-owned public-private partnership. It is situated within the context of strengthening overall health systems in partner countries.

SOURCES:

HBB (n.d.), Helping Babies Breathe website, www.helpingbabiesbreathe.org (accessed 1 July 2016).

Kak, L.P. et al. (eds.) (2015), “Helping Babies Breathe: Lessons learned guiding the way forward”, Helping Babies Breathe Global Development Alliance, www.helpingbabiesbreathe.org/docs/HBB-Report-2010-2015.pdf.