

# Striving for an Equal Chance of Survival

Sara K. Berkelhamer, MD,<sup>a</sup> Danielle E.Y. Ehret, MD, MPH<sup>b,c</sup>

A global health colleague once explained that Helping Babies Breathe (HBB) was a gift to the newborn health community, a heartfelt comment that gave the room pause as we all processed her graceful words.

HBB, an evidence-based simplified newborn resuscitation program, had recently been introduced, and the statement brought to mind the tremendous efforts that had been made to develop a portable educational tool and simplified, pictorial resuscitation algorithm for use in low-resource settings, specifically, as well as low-cost, purpose-designed simulation models and resuscitation equipment to disseminate both training and provision of care. These attributes were well recognized and fueled great enthusiasm for the program.

However, HBB's contributions over the past decade have reached beyond expanding resuscitation training. Dissemination of the program paralleled growing attention to the global burden of neonatal mortality and disparity of resources available at birth.

Creation of the HBB Global Developmental Alliance promoted public-private partnerships and strengthened efforts to advocate for quality newborn care. Collaboration with in-country ministries of health and local professional associations through HBB implementation helped define a shared agenda and established relationships to support local ownership and sustainability of newborn health initiatives.

HBB's contributions to expanding capacities of health systems also deserve note. Training of >850 000 multidisciplinary providers with a unified educational program and shared language has encouraged cross-disciplinary dialogue and fostered greater respect. Experience from the field suggests that training has empowered midwives and frontline birth attendants, providing them with critical training and a greater voice. Evidence of a direct link between HBB training and improved newborn outcomes with birth asphyxia

rationalizes building resuscitation capacities among existing and new cadres of providers.

Improved access to low-cost resuscitation equipment has similarly paralleled expansion of HBB. In response to growing demand, essential commodity lists in many countries now include bag-mask ventilators and suctioning devices. Increased demand for these products has further spurred marketing of alternative and complementary products, creating a competitive industry for this equipment and ongoing technical advances.

As a decade of experience with HBB comes to completion, the observation that global neonatal mortality has failed to decline rapidly enough to meet goals established in the Every Newborn Action Plan highlights the need for an expanded focus. Implementation at scale of programming to address the additional leading causes of neonatal mortality (prematurity and infection) as well as maternal health needs to be

<sup>a</sup>Department of Pediatrics, University of Washington, Seattle, Washington <sup>b</sup>Department of Pediatrics, Robert Larner, MD College of Medicine, University of Vermont, Burlington, Vermont; and <sup>c</sup>Vermont Oxford Network, Burlington, Vermont

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Address correspondence to Sara K. Berkelhamer, Division of Neonatology, University of Washington, 4800 Sandpoint Way, Seattle, WA 98105. E-mail: [sara.berkelhamer@seattlechildrens.org](mailto:sara.berkelhamer@seattlechildrens.org)

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prioritized. Rapid expansion of technology and global access necessitates thoughtful integration of implementation strategies as novel approaches to monitoring, evaluation, training, simulation, and quality improvement are all being considered.

The collective experience represented in this series and the insights provided help frame efforts for the decade to come. As we address new challenges, we are humbled by our continued goal: that every infant, no matter where he or she is born, would have the same chance of survival.

Perhaps it is time to take pause again and process what we have learned.

**ABBREVIATION**

HBB: Helping Babies Breathe

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