

The monograph

“Newborn survival: progress and priorities for action”

Print by Bons Offices, Chisinau, 2023, 214 pages

The author: **Ala Curteanu**, MD, PhD, Associate Professor
Department of Research, Technology Transfer and Innovations, Laboratory of Perinatology
Institute of Mother and Child, Chisinau, the Republic of Moldova

The monograph “Newborn survival: progress and priorities for actions” is an up-to-date paper, focusing on the health and well-being of newborn children, anchored since 2015 in the Sustainable Development Goals (SDG Target 3.2.2), a fact whereby this category of children is given increased attention on the global agenda. The paper is based on the global research dedicated to the newborn in *The Lancet* journal included in two series: “Newborn survival” in 2005 and “Every Newborn” in 2014, which provided evidence to set the direction for this research.

Although newborns were invisible in the Millennium Development Goals, sustained efforts were made in the Republic of Moldova to increase survival, especially of premature newborns, with the transition to the WHO viability criteria (2008), as well as the reduction of impairment among premature babies and sick term newborns.

At the global level, the SDG 3.2.2 target for neonatal mortality is 12 or fewer deaths per 1000 live births, while in Moldova the indicator is 6.4 deaths per 1000 live births (2015), remaining at the same level in 2020, which imposes the need for in-depth study of the factors that contributed to success.

The monograph includes four chapters. In Chapter 1 – “Progress at the global, regional level and in the Republic of Moldova regarding the newborn survival increase” – the author carries out a deep analysis of the evolution of neonatal survival in the world and in the Republic of Moldova. Progress in improving child survival was accelerated between 2000 and 2015 compared to the 1990s. Globally, the annual reduction in under-five mortality rate (U5MR) increased from 1.8% in 1990-2000 to 3.9% in 2000-2015. Neonatal mortality is studied as a distinct age segment in the U5MR. It is found that in the period of 1990-2020 there was a decline in the U5MR by 58.33%, which occurred mainly due to the age category of 1-12 months (75%), being followed by the age period of 1-5 years (72.58%) and in the first month of life (31.9%). The 31.9% progress in reducing neonatal mortality must be properly appreciated, because reducing mortality in the first month of life is not easy to achieve.

Chapter 2 describes global and national initiatives on maternal, newborn and child health (MNCH). Among them, it is necessary to mention the *Global Strategy for Women’s and Children’s Health* on MDG 4 and 5 and the *Action Plan for Every Newborn* (2014) launched by WHO. The programs and strategies for improving the health of the mother, newborn and child in the Republic of Moldova were described by the authors to present the progress achieved.

The chapter “Continuity of health care for mothers and children” reflects the continuum of health care and care throughout the life cycle to improve the MNCH and survival. Continuity is approached through two key dimensions: time and place. The time dimension highlights the continuity of care over time, according to the life cycle, including: preconception, pregnancy, birth, postnatal, infant and up to 5 years. The place dimension depends on the level of service provision (family/community, outpatient, and home visits and in hospitals). 7 integrated packages for maternal, newborn and child health with evidence-based interventions across the continuum of care are presented.

Chapter “Survival of the newborn, infant and child aged 1-5 years. The action of biomedical interventions and other determinants of health” addresses the action of MNCH determinants on survival: *proximate* – biomedical, *intermediate* – such as effective coverage with interventions across the continuum of medical services, and *distal* – socioeconomic context, policy implementation of health and the direct or indirect contributions of the health system. For this purpose, the author applied a conceptual framework of results to examine the survival of newborns and children under the age of 5 between 1997 and 2015, in terms of coverage with preventive and curative biomedical interventions (total 47 interventions contained in 6 intervention packages – preconception, antenatal, labor, birth and postpartum, neonatal, infancy and the age of 5) and health system indicators, as well as macroeconomic factors, the national policy framework relevant to the field, financial flows, governance. Through modeling, the factors that influenced the reduction of the mortality of newborns and children 0-5 years were determined.

I consider the monograph “Newborn survival: progress and priorities for actions”, authored by Curteanu Ala, represents a coherent work, it addresses an important topic from the point of view of medical research and practice. The content of the monograph is based on a wide current bibliographic material, presented concisely and logically. The work has scientific value and is of interest both to scientific researchers in the field and medical practitioners. Representing a scientific work, the monograph is recommended for studying, being an objective requirement for increasing the qualitative level of evaluation of scientific activity in the country.

Ina Paliu, MD, PhD, Professor
Director of Pediatric Clinic, Head of Cardiology Clinic
Nicolae Testemitanu State University of Medicine and Pharmacy
Chisinau, the Republic of Moldova