



Title: Perinatal Commission/Belo Horizonte- Management of quality and

comprehensiveness of health care for women and children in the

Unified Health System of Belo Horizonte

Institution: Belo Horizonte Health Department

Country: Brazil

Category: National-Departmental-State

Duration: 17 years

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Reducing maternal and child mortality is part of the government's commitments at all levels in Brazil. These premature deaths are concentrated among the poor and to a large extent can be prevented by the action of health services. In the Brazilian context, economic and social inequality is reflected in differential access to quality prenatal, delivery, and newborn care.

As a response to this situation, this experience is an innovative initiative of the Belo Horizonte Perinatal Commission, which also involves the participation of social movements. It conducts systematic evaluation of hospitals, closing low-quality hospitals, and investigating maternal, fetal, and infant deaths. The experience serves as a role model for the entire country. It provides management for comprehensive care by skilled health workers, facilitates the development of an ethical agreement with the city administrator, and accountability by service directors.

The improvement of health care began with the reorganization of primary care and the roll-out of family planning in 1994, with the provision of education and contraceptive methods. It emphasizes investment in the quality of prenatal care, immediate care for pregnant women, and the inclusion of nurses in care. In 1999, it initiated the systematic evaluation of the 16 maternity hospitals and set up referral and counter-referral systems with adequate transportation. All of these actions serve to guarantee the rights of the mother and the newborn.

As a whole, this process has resulted in a reduction in maternal mortality from 66/100,000 live births in 1996 to 50/100,000 in 2009, a significant reduction of 38.1% in the neonatal component of infant mortality from 1999 to 2002, and a 68% reduction in the infant mortality rate, reaching the Millennium Development Goals. The proportion of women with more than seven prenatal visits increased from 50% in 1999 to 73% in 2009 and exclusive breastfeeding increased from 23% in 1999 to 50% in 2008.

What is most significant from the standpoint of management and organization is the change regarding the services to which the mother and newborn are entitled. There were significant advances in the humanization of care, such as the introduction of the woman's partner and doulas into maternity care and social monitoring. The establishment of a permanent forum in 1999, with monthly meetings, has been fundamental to the establishment of a comprehensive health services network.