Lesson learned from the experience of mobilizing community volunteers for real-time identifications of stillbirths and < 5 child deaths in a child health program in rural Bangladesh.

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Background:
- The Child Health and Mortality Prevention Surveillance (CHAMPS) has been implementing minimally invasive tissue sampling (MITS), a post-mortem procedure, at 3 sentinel facilities and in the community in a rural sub-district Baliakandi, Bangladesh to identify the causes of stillbirths and < 5 child deaths.
- Although, the MITS procedure must be conducted within 24 hours of death, previous studies found that in the local cultural and religious context, the average time to complete the burial is between 3 to 5 hours.
- The major challenge of conducting MITS among children who die in the community is receiving notification within a short time of death that enables the team to visit a household and approach the guardians to participate in the MITS procedure.
- To receive rapid notifications, we recruited 1,158 community volunteers from 261 villages across Baliakandi in 2018 and requested them to notify stillbirths and <5 deaths through a CHAMPS hotline number.

Objectives:
- To review the process for mobilizing community volunteers for real-time identifications of stillbirths and < 5 child deaths under CHAMPS program to identify and explain the challenges and lesson learned.

Implementation process:
Selection of the volunteers:
- To identify the community volunteers, we went to the center of each village, find a tea-stall or mosque where there were at least 10 people gathered and requested to-
  - Divide their village into several parts based on the size of the village.
  - Identify at least 1 person from each part of the village who aged between 18 to 60 years, resides in the community, have good relations and communication with the community people, and owned a mobile phone.
  - It took around 10 months to select community volunteers from 261 villages across Baliakandi.

Orientation training to the community volunteers and involves them with the notification system:
- Orientation training among 1,158 community volunteers was provided in 2018 to introduce them with the CHAMPS activities including information about the MITS procedure and how the notification system runs.

Findings:
- In 2019, the number of total stillbirths and < 5 deaths in Baliakandi were 263. Community volunteers notified a total of 204 deaths and stillbirths. After excluding the duplicate notifications for a single death, we found 78 (27%) unique notifications. Among those, we received 87 (86%) death notifications within 24 hours and 47 (60%) were received within 5 hours of the death.
- In 2020, the number of total stillbirths and <5 deaths in Baliakandi were 314. Community volunteers notified a total of 203 stillbirths and <5 deaths. After excluding the duplicate notifications for a single death, we found 103 (33%) unique notifications. Among those, we received 88 (85%) death notifications within 24 hours and 54 (52%) of these were received within 5 hours of the death.
- Many of the stillbirths and <5 deaths that occurred in the villages but were not notified by community volunteers and later notified by the DDS team of the CHAMPS.

Conclusions:
- Community volunteer driven real-time notification system identified 27% of stillbirths and <5 deaths in 2019 and 33% in 2020.
- Periodical performance monitoring is an integral part to sustain such a notification system and implementing need-based actions increased the number of notifications.
- The use of community volunteers to notify deaths in real-time was shown to be a valuable approach that could be used in other public health programs.

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