Foreword

The reduction in neonatal mortality achieved in Rwanda has been hugely impressive, from 40 per 1000 live births in 2000 to 15.9 per 1000 live births in 2018. Substantial changes have been achieved by implementing major health system changes, such as the change in location of the majority of births from home to health centres and hospitals and the creation of Universal Health Coverage (Mutuelle de Sante). These changes have been accompanied by major initiatives to improve the knowledge and skills of staff. Making further reductions becomes increasingly difficult, but research in the local environment enables further improvements to be made and will be crucial to achieving the Sustainable Development Goal (SDG3) neonatal mortality target of 12 per 1000 live births by 2030.

This situation makes research projects such as the series published in this edition so important. The series allows publication of the research conducted by Masters’ students of the School of Nursing and Midwifery at the University of Rwanda and covers a wide range of topics on newborn infants and newborn care. Issues presented in the studies raise the need to implement change and further research to identify outcomes:

- The noise levels of four neonatal units during ward rounds were excessively high – can they be reduced?
- Parents’ knowledge of neonatal danger signs was low – can they be improved?
- Can mothers’ knowledge and practice of Essential Newborn Care be improved?
- Can maternal knowledge and practice of neonatal hypothermia and umbilical cord care be improved?
- The proportion of mothers initiating breastfeeding within an hour of birth was only 20% in the two hospitals studied. Can this and other immediate newborn care practices be improved?
- Maternal hypertension was associated with neonatal morbidity and mortality – can identification and treatment be improved and are outcomes improved?
- Nearly half on newborn babies developed jaundice. Can their management be improved?
- Will increased antenatal contacts improve neonatal outcomes?
- Refresher training of neonatal resuscitation with Helping Babies Breathe is required. How can this best be achieved?
- Knowledge about climate change was poor among nurses and midwives. Can this be improved?

These studies contain a wealth of information and ideas. The challenge is to convert the research findings into better care and conduct further research to establish if they have improved neonatal outcomes.

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