A Neglected Tragedy
The global burden of stillbirths

Report of the UN Inter-agency Group for
Child Mortality Estimation, 2020

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A woman experiencing labour pain from West Bengal, India, waits for the doctor.

A GLOBAL HEALTH PROBLEM

One stillbirth occurs every 16 seconds. This means that every year, about 2 million babies are stillborn. This loss reaches far beyond the loss of life. The psychological costs, such as maternal depression, are profound, not to mention the financial consequences for parents and long-term economic repercussions for society.[1] Though the difficult impacts on families – and most especially on women – are severe and long lasting, stigma and taboo hide the hardship of stillbirths, even in high-income countries.[2]

But this traumatic loss of life remains a neglected issue. Stillbirths are largely absent in worldwide data tracking, rendering the true extent of the problem hidden. They are invisible in policies and programmes and underfinanced as an area requiring intervention. Targets specific to stillbirths were absent from the Millennium Development Goals (MDGs)[3] and are still missing in the 2030 Agenda for Sustainable Development.[4]

A growing public health issue

Over the past two decades, progress in lowering the stillbirth rate has not kept pace with achievements in saving mothers' lives or those of newborns in the first 28 days of life. In the first two decades of this century, the annual rate of reduction in the stillbirth rate was just 2.3 per cent, compared to a 2.9 per cent reduction in neonatal mortality and 4.3 per cent among children aged 1–59 months.[5] Meanwhile, between 2000 and 2017, maternal mortality decreased by 2.9 per cent.[6]

Available data demonstrate that stillbirths are an increasingly critical global health problem. In 2000, the ratio of the number of stillbirths to the number of under-five deaths was 0.30; by 2019, it had increased

to 0.38. In sub-Saharan Africa, the number of stillbirths is rising: They increased from 0.77 million in 2000 to 0.82 million in 2019, as the growth in total births outpaced the decline in the region's stillbirth rate. And in some high-income countries – despite very low levels of neonatal mortality – more stillbirths than neonatal deaths occur, and in some cases, even surpass the number of infant deaths.

Slow progress in preventing stillbirths means the losses have been enormous. In the past two decades, the world suffered a total of 48 million stillbirths. If current trends continue, an additional 20 million stillbirths will take place before 2030, placing immense and unjust strain on women, families and society.

Preventable losses

Why are we losing so many babies before they take their first breath? Why is progress in reducing the stillbirth rate so slow? There are a variety of reasons: absence of or poor quality of care during pregnancy and birth; lack of investment in preventative interventions and the health workforce; inadequate social recognition of stillbirths as a burden on families; measurement challenges and major data gaps; absence of global and national leadership; and no established global targets, such as the Sustainable Development Goals (SDGs).

What makes these deaths even more tragic is that the majority could have been prevented with high-quality monitoring and care antenatally[7] and at birth.[8, 9, 10] Over 40 per cent of all stillbirths occur during labour – a loss that could be avoided with improved monitoring and timely access to emergency obstetric care when required.

A call to action

The health community recognizes the urgent need to prevent stillbirths; the issue has become an essential part of global child survival initiatives and goals. The United Nations' Global Strategy for Women's, Children's and Adolescents' Health (2016–2030) includes stillbirths in its vision, "An end to preventable maternal, newborn, child and adolescent deaths and stillbirths", and urges for stillbirths to be prioritized.[11] The Every Newborn Action Plan (ENAP), which was endorsed by 194 WHO Member States, calls for each country to achieve a rate of 12 stillbirths or fewer per 1,000 total births by 2030 and to reduce equity gaps, particularly in countries that have already met the stillbirth target.[12]

The stillbirth rate is a sensitive indicator of quality of care in pregnancy and childbirth and a marker of a health system's strength.[2] International organizations, governments and other partners must act urgently to avert stillborn deaths and ensure that every woman is being supported through pregnancy and childbirth by trained health care providers. Stakeholders can demand health care for all to fulfil the promise of universal health coverage and help keep every child alive.

The need for high-quality data

Timely, accurate recording and counting of stillbirths is essential to understanding the scale and geographic distribution of the problem and working to solve it. However, many countries do not have a functioning health management information system (HMIS) or civil registration vital statistics system to collect these data; in other settings, stillbirths are excluded

from routine registration despite functioning systems. While household surveys provide important information on child mortality, most suffer from substantial data quality issues when it comes to stillbirth.[13] Omission of events and misclassification between stillbirths and early neonatal deaths are common, posing challenges to accurate measurement. In addition, the definition of stillbirth varies across settings and over time, limiting data comparability. Measures to improve the accuracy of stillbirth data are needed in all settings.

Poor data availability and quality require innovative methodological work to understand the global picture of stillbirths. The UN Inter-agency Group for Child Mortality Estimation (UN IGME), together with its Technical Advisory Group and Core Stillbirth Estimation Group, has developed robust methods to estimate stillbirths. Though these estimates are vital to addressing the neglected burden of stillbirths, in many countries, they remain highly uncertain. Precise, high-quality and complete data on stillbirths are needed to develop and evaluate targeted national strategies. Without these data, the efficacy of policy initiatives cannot be shown, depriving citizens of the information they need to advocate for better health and social policies and protect their families.

The overlooked tragedy of stillbirths demands urgent attention. To prevent stillbirths, we need to provide data and evidence to answer various questions. Where are stillbirths occurring? Where has progress been made? Which countries must accelerate progress? What must be done to stop this unnecessary loss of life? By outlining the picture of the global burden of stillbirths, this UN IGME report sets out to answer these questions and inform the way forward.
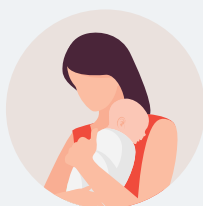
STILLBIRTH: Key facts and figures

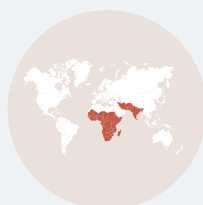## The burden of stillbirths is enormous, but overlooked.

Globally, **1** baby is stillborn every **16** seconds
nearly **4** every minute
over **200** every hour
nearly **5,400** every day
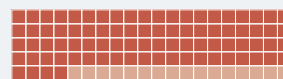nearly **164,000** every month
nearly **2 million** a year

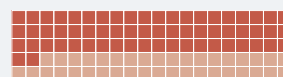In the past two decades, **48 million babies** were stillborn

Three in four stillbirths **occur in sub-Saharan Africa or Southern Asia**

Low and lower-middle income countries account for **84% of all stillbirths**

but **only 62% of all live births**

Over 40% of stillbirths

Most stillbirths are preventable with life-saving