

Guyana

Guyana has a small and culturally diverse population, with 70 percent living in rural areas. The negative rate of population growth is mainly due to migration. With very high rates of communicable diseases, HIV is one of the leading causes of mortality. Maternal mortality declined in the 1990s, but it increased again in the 2000-2008 period. High priority is given to addressing maternal health gaps and services are now free in public health facilities. The maternal and newborn health policy aims at strengthening the midwifery workforce, and has contributed to a better deployment of midwives in remote areas and to the integration of traditional birth attendants in community care. A two-year direct-entry programme focused on graduating midwives for rural areas is implemented in three public schools in Guyana. The vacancy rate for midwifery faculty is high. Improving the learning environment is key to strengthening the coverage and quality of midwifery services.

▶ COUNTRY INDICATORS*

Total population (000); % urban	761; 29
Adolescent population (15-19 yrs) (000); % of total	72; 9
Number of women of reproductive age (age 15-49) (000); % of total	190; 25
Total fertility rate (children per woman)	2.3
Crude birth rate (per 1,000 population)	18
Births per year (000)	14
% of all births registered	93
Number of maternal deaths	37
Neonatal mortality rate (per 1,000 live births)	21
Stillbirth rate (per 1,000 births)	17
Number of pregnant women tested for HIV	14,283
Midwives are authorized to administer a core set of life-saving interventions	–
Density of midwives, nurses and doctors per 1,000 population	2.8
Estimated workforce shortage to attain 95% skilled birth attendance by 2015	–
Gross secondary school enrolment (male; female) %	102; 102
Literacy rate (age 15 and over) (male; female) %	–; –

▶ MDG INDICATORS

Maternal mortality ratio (per 100,000 live births)	270
Proportion of births attended by skilled health personnel (%)	83
Contraceptive prevalence rate (modern methods) (%)	34
Adolescent birth rate (births per 1,000 women age 15-19)	90
Antenatal care coverage (at least one visit; at least four visits) (%)	81; –
Unmet need for family planning (%)	–
Under-5 mortality rate (per 1,000 live births)	36

▶ MIDWIFERY WORKFORCE¹

Midwives (including nurse-midwives) ²	400
Other health professionals with some midwifery competencies ³	–
General practitioners with some midwifery competencies	452
Obstetricians	2
Community health workers with some midwifery training	60
A live registry of licensed midwives exists	No

▶ MIDWIFERY EDUCATION

Midwifery education programmes (direct entry; combined; sequential)	Yes; No; Yes
Number of midwifery education institutions (total); number of private	6; 0
Duration of midwifery education programmes (in months)	12 to 24
Number of student admissions (first year)	120
Student admissions per total available student places (%)	78
Number of students enrolled in all years (2009)	175
Number of graduates (2009)	120
Midwifery education programmes are accredited	Yes

▶ REGULATION

Legislation exists recognizing midwifery as an autonomous profession	No
Midwives hold a protected title	No
A recognized definition of a professional midwife exists	Yes
A government body regulates midwifery practice	Yes
A licence is required to practise midwifery	Yes
Midwives are authorized to prescribe life-saving medications	Yes



MIDWIFERY BAROMETER

Midwives per 1,000 live births	-	○
Birth complications per day; rural	8; 5	●
Lifetime risk of maternal death	1 in 150	●
Intrapartum stillbirth rate (per 1,000 births)	4	●
Neonatal mortality as % of under-5 mortality	60	●

► PROFESSIONAL ASSOCIATIONS

A midwives association exists	Yes
Number of midwifery professionals represented by an association	75
Association(s) affiliated with ICM; ICN	No; Yes

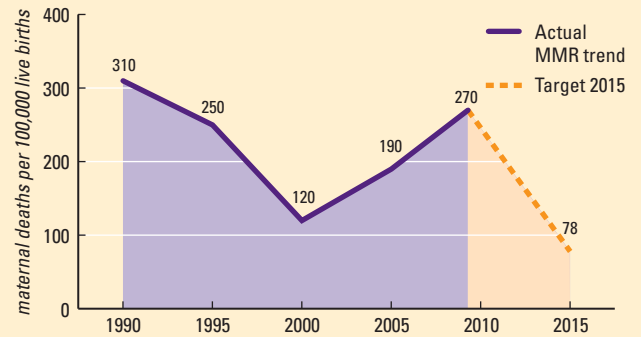
► POLICIES

A national maternal and newborn health plan exists that includes the midwifery workforce	Yes
The plan is costed	Yes
The national health workforce plan specifically addresses midwifery	Yes
Compulsory notification of maternal deaths	Yes
Systematic maternal death audits and reviews	Yes
Confidential enquiry for maternal deaths	Yes
Compulsory registration of all births	Yes
All maternal and newborn health services are free (public sector)	Yes

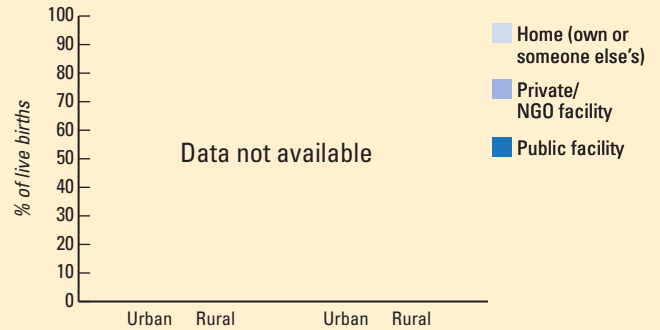
► SERVICES

Number of facilities providing essential childbirth care	Unavailable
Number of Basic Emergency Obstetric and Newborn Care (EmONC) facilities	6
Number of Comprehensive EmONC facilities	-
Facilities per 1,000 births	-

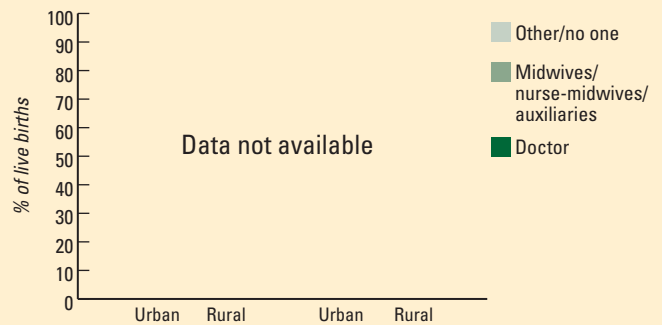
Trends in maternal mortality: 1990–2015



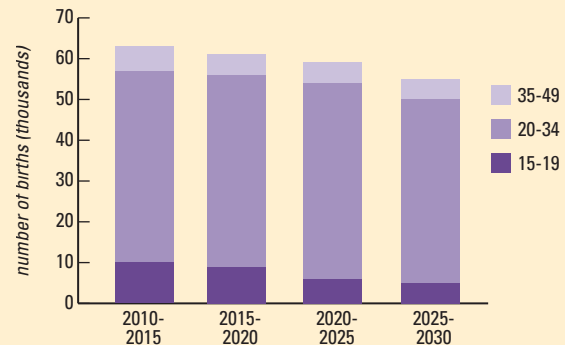
Where women give birth: urban vs. rural



Who attends births: urban vs. rural



Projected number of births, by age of mother



Explanatory notes: *Annex 2 provides a complete list of source data. All data sources are from 2008 unless otherwise stated. Where country respondents stated that data were not available, the term 'Unavailable' is used. In all other instances, '-' is used to denote a nil response or data that requires further verification. 1. 2008 estimates based on country data returns and the WHO Global Atlas of the Health Workforce. 2. Includes midwives, nurse-midwives and nurses with midwifery competencies. These figures do not necessarily reflect the number of practising midwives or the ICM definition of a midwife. 3. Auxiliary midwives and auxiliary nurse-midwives.