

EDITORIAL**Why is the Neonatal Mortality Remains Stagnant in Ethiopia?****Abraham Haileamlak, MD, Professor of Pediatrics and Child Health**

The neonatal period is the most vulnerable time for a child's survival. Children face the highest risk of dying in their first month of life at an average global rate of 18 deaths per 1,000 live births in 2018 (1). Though remarkable progress was made in reducing under-five children mortality, still approximately 5.4 million under-five children die globally each year. Of these, close to half (2.5 million) deaths occur on neonates (1). The other inequality is that majority of these deaths occur in low-and middle-income countries (2).

Similarly, Ethiopia has made remarkable progress in reducing under-five child mortality; however, the current under-five mortality (3). However, the mortality reduction was not uniform across the different childhood age groups, geographic and socio-demographic population groups where neonatal mortality is decreasing at a slower rate accounting for 41% of under-five deaths (4,5) in contrary to the fact that neonatal mortality rate to be a standard indicator for evaluation of health status of a country. Identifying the major factors that contribute to neonatal deaths and designing and implementing intervention strategy is imperative. Accordingly, of the identified and prioritized 34 high cost-effective interventions in the Ethiopian Child Survival Strategy, seventeen are to improve neonatal survival (3). By following a continuum of care approach to rollout the delivery of the selected newborn interventions to address particular needs of mother and newborn, it aims to reduce neonatal mortality ratio from 28 to 11 per 1,000 live births by 2020. Nevertheless, while only a year is remaining to achieve this target, the neonatal mortality ratio rather increased to 30 per 1000 live births leave alone showing reduction (6). Though guiding principles to implement the strategy was set, the achievement so far indicates that adequate preparation is not made to properly implement the interventions. As a result, the achievement so far went from bad to worse.

The current issue of the journal, the sixth regular issue for the year 2019, contains an editorial, thirteen original articles, a review and two case reports focusing on various topics. Two of the original articles in this issue deals with neonatal health.

I invite readers to read through these articles and appreciate or utilize the contents. I also urge readers to forward comments and suggestions to the editor or the corresponding authors.

REFERENCES

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