

## Maternal and Child Health

### PROVIDING EFFECTIVE FACILITY- AND COMMUNITY-BASED MCH PACKAGES

#### BACKGROUND

Pregnancy and childbirth are the most dangerous times in a woman's life in Sub-Saharan Africa. Nearly 300 million women die during childbirth each year, primarily from postpartum hemorrhage, pre-eclampsia/eclampsia, and obstructed labor. Their newborn and young children are vulnerable as well, at risk of dying from infections during or after birth and in early childhood. More than 1.5 million children die each year from vaccine-preventable diseases.

Despite these challenges, much progress has been made in recent years in improving Maternal and Child Health, thanks in part to advocacy and funding around the Millennium Development Goals and greater country ownership. The new Sustainable Development Goals (2016-2030) continue this strong commitment to MCH.

IMA contributes to these efforts by helping health systems provide effective facility and community-based MCH packages. In South Sudan and DRC, IMA works with communities to encourage antenatal care and deliveries at health facilities, where IMA-trained health care workers provide skilled attendance at birth. Health care workers provide basic Emergency Neonatal and Obstetric Care, including active management of third stage labor, pre-eclampsia/eclampsia treatment, and management of postpartum hemorrhage.

For infants and children, IMA assists facilities in providing screening and treatment of newborn and childhood infections. IMA also helps Ministries of Health forecast, administer, and manage essential vaccines for childhood illness in DRC and South Sudan. At the community level, IMA encourages countries to roll out Integrated Management of Childhood Illness at both the facility and community levels, where appropriate.

IMA is achieving transformative results in many of its MCH programs, which operate in some of the toughest environments in Africa. In its South Sudan program, IMA helped increase uptake of life-saving measles vaccinations from 20 percent to more than 72 percent in Jonglei in 2013, for example. In Upper Nile State, the number of pregnant women accessing critical antenatal care more than doubled as a result of IMA's work.



*IMA helped reduce malaria case incidence in heavily-affected Jonglei and Upper Nile states through the provision of LLINs to pregnant women and households with children.*

#### OUR PROJECTS

##### DEMOCRATIC REPUBLIC OF CONGO

##### Access to Primary Health Care Project (ASSP) (2012-Present)

IMA prioritizes delivering essential health packages that improve maternal, newborn, and child health through ASSP. Using a comprehensive approach, the project helps train healthcare workers in safe delivery, including delivery of emergency obstetric and neonatal care services. More than 779,022 births were attended by skilled a health care worker as part of the project by the end of 2015. And 834,782 children under the age of one year were reached with vaccinations against measles. LLINs for anti-malarial prevention are routinely provided to pregnant women and children under 5 as well during mass distribution campaigns.

##### Global Fund Malaria Project (2012-2014)

Working as a sub-recipient to long-time partner SANRU, IMA delivered essential malaria prevention, diagnostic and treatment commodities in 38 health zones in eastern

DRC. By the end of 2014, the project helped treat more than 1.4 million malaria cases and ensured nearly 270,000 pregnant women accessed at least two doses of IPTp. In addition, IMA implemented community-based malaria care at 58 sites, helping community health volunteers diagnose and treat basic malaria, diarrheal, and acute respiratory infections among children under 5.

## **SOUTH SUDAN**

### **Global Fund Malaria Project (2011-Present)**

IMA helped reduce malaria case incidence in heavily-affected Jonglei and Upper Nile states through the provision of LLINs to pregnant women and households with children. With Global Fund support, IMA distributed more than 1.3 million LLINs in 2013-2015 through mass distributions in communities and IDP camps and via antenatal care services at both regular and emergency health facilities. A new campaign is underway in 2016.

### **Emergency Health Services Jonglei and Upper Nile States Project (2014-Present)**

With USAID OFDA support, IMA is working with partners to provide vital MCH and emergency health services through mobile clinics and outreach sites in Upper Nile and Jonglei. The project's MCH services include increasing access to quality antenatal care, assisted labor and delivery, and provision of immunizations and other child health interventions. IMA has also expanded its support to include mobile nutrition outreach to identify children suffering from acute under-nutrition and provide them with restorative care. Key MCH achievements to date include training 276 health care workers in reproductive health services and ensuring that 2,914 women deliver assisted by a skilled provider.

### **Provision of Reproductive Health Services Project (2014-Present)**

IMA helps vulnerable populations and internally-displaced persons of Jonglei state access timely, effective and quality reproductive health services. The UNFPA-supported project provides newly established services through mobile clinics and outreach and through strengthening local capacity to implement the Minimum Initial Service Package for RH, including GBV and STI/HIV services. IMA also supports SRH outreach activities in partnership with community-based organizations or support groups. IDPs along the Nile River near Bor

(Jonglei), who would have otherwise had no access to reproductive health services, are seeking services at an average of 200 patients per month at the temporary clinic in Mingkaman.

### **Rapid Results for Health Project (RRHP) (2013-Present)**

With support from the Ministry of Health and the World Bank, IMA is helping to strengthen the health system at every level to achieve results. The Rapid Results Health Project is an innovative, performance-based contracting approach designed to help all 3.3 million people living in all 25 counties of Jonglei and Upper Nile states and the newly formed Greater Pibor Administrative Area. Comprising about 25 percent of South Sudan's population, IMA's service area is the most geographically challenging in the country due to rainy season flooding and few passable roads as well as the ongoing internal conflict. Through RRHP efforts, 121,158 women have sought antenatal care and 27,009 delivered in a health facility from January 2013 through September 2015.

### **Integrated Vaccination Project (2014-Present)**

IMA has collaborated on focused, short-term vaccination campaigns to reach children in areas affected by conflict in South Sudan. In September 2014, IMA partnered with UNICEF and international NGOs GOAL and Cordaid to carry out weeklong integrated immunization campaigns; these reach children under 15 years of age in six counties of Upper Nile State: Baliet, Fashoda, Manyo, Renk, Panyikang. In the selected six counties, 62,838 children ages 6 months to 15 years were vaccinated against measles, 67,695 children ages 0 to 15 years were vaccinated against polio, and 22,281 children ages 6 to 59 months received Vitamin A supplementation. Children also received deworming treatment and screening for malnutrition. This campaign was repeated in April 2016 (2016 results pending).

