



Innovating for Maternal and Child Health in Africa: Greater Access, Better Data and Improved Quality of Care

Key Facts

- Two of every three maternal deaths in 2015 occurred in sub-Saharan Africa: that's more than 201,000 women who died in one year while giving life.
- More than 5.9 million children died in 2015 before reaching their fifth birthdays.
- Children in sub-Saharan Africa are 14 times more at risk of dying before reaching age 5 than their age-mates in other regions.
- Access to services, quality data and quality care are three areas that require investment, improvement and innovation to reduce maternal and child mortality rates.

About Maternal Newborn and Child Health

- Project Goal:** To improve the translation of research evidence and learning into practice for effective policy and programmatic MNCH interventions
- Who:** Collaborative research teams bringing African and Canadian research scientists together in 11 African countries: Burkina Faso, Ethiopia, Malawi, Mali, Mozambique, Nigeria, Senegal, Sierra Leone, South Sudan, Tanzania and Uganda
- What:** Prioritizing high impact, community-based interventions; quality facility-based interventions; increased uptake into policy discussions improve healthcare services and outcomes; and human resources for health
- Policy prospects:** Two consortia of African-led, Africa-based policy and advocacy innovators embedding strategic communications, advocacy and policy skills into research teams to encourage evidence uptake into policy at sub-national, national and regional levels

Overview

Two in every three deaths of women during childbirth occur in sub-Saharan Africa: that is more than one death in every minute, of every day, of every year.

Women are dying while giving life because of barriers to access: quality care, trained professionals and the right kind

of information. Pronounced geographic and socio-economic inequities mean that children in sub-Saharan Africa are 14 times more likely to die before reaching their fifth birthday than anywhere else in the world.

The Innovating for Maternal and Child Health in Africa (IMCHA) program is a five-year partnership in 11 countries aiming to reshape thinking and action on how to improve mortality outcomes. It is funded by Foreign Affairs, Trade and Development Canada (DFATD), the Canadian Institutes of Health Research (CIHR) and Canada's International Development Research Centre (IDRC), with an investment of Can\$36 million.

By addressing the latent gaps in research knowledge and generating new evidence to guide policy- and decision-making, the program is seeking a new approach to the age-old problem of unacceptably high rates of maternal and child mortality.

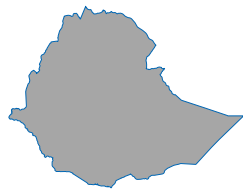
A total of 20 implementation research teams working in East and West Africa have developed research projects in three thematic areas:

- Strengthening health systems by replicating what works at the community level
- Using technology to support improved performance and access to information on health
- Understanding sustainable methods of delivering community-based primary healthcare services.

In parallel, two policy hubs will embed best practice in translating knowledge into policy into the research teams.

The Eastern Africa Health Policy Research Organization (EA-HPRO) is a consortium of three institutions working with 13 research teams in six countries, providing capacity support for strategic communications planning; facilitating linkages with national MNCH stakeholder networks; synthesizing evidence on MNCH issues; and catalyzing sustained engagement among the research teams and their national decision-making bodies.

Ethiopia



Jimma University and the Jimma Zone Health Department: what works at community level Testing interventions to strengthen community-based health systems; improve training for community health workers and health facility staff; and provide health information awareness among men and religious leaders.

Project Leader: Lakew Abebe Gebretsadik
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Addis Ababa University and Ethiopian Central Statistical Agency: the pilot of a low-cost, high-quality national cause-of-death (COD) data collection and monitoring system to inform scalable solutions to address critical gaps in maternal and child mortality.

Project Leader: Dr. Wubegzier Mekonnen Ayele
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South Sudan | Uganda



BRAC and the Ministry of Health: cost-effective performance incentives for South Sudanese community health workers to reduce child mortality.

Project Leader : Dr. Jenipher Twebaze
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St. Mary's Hospital Lacor, Uganda; South Sudan's Torit State Hospital; South Sudan Ministry of Health: testing strategies to implement a community-focused approach to health that includes improved maternal care and child nutrition services, cervical cancer screening and support for women's empowerment.

Project Leader: Dr. Elijo Omoro
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Malawi



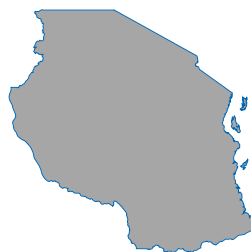
The University of Malawi, and the Ministry of Health: how life-saving interventions like use low-cost continuous airway support for breathing, breastfeeding support, Kangaroo Mother Care (skin-to-skin, mother-to-baby contact), hot cots to prevent hypothermia, management of hypoglycaemia (low blood sugar), and phototherapy lights to treat jaundice can be introduced as a routine part of hospital-based care for pre-term infants.

Project Leader: Dr. Kondwani Kawaza
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University of Malawi; AMREF (Malawi); and the Ministry of Health: improving uptake of national Standards-Based Management and Recognition for Reproductive Health initiative to improve the quality of health services.

Project Leader: Dr. Ellen Chirwa
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Tanzania



Ifakara Health Institute and Ministry of Health: testing capacity of m-health platform to provide education and practical skills to health workers for improved detection and management of eclampsia, and associated challenges that arise during pregnancy.

Project Leader: Dr. Godfrey Michael Mbaruku
Contact: gmbaruku@ihi.or.tz

Ifakara Health Institute and Ministry of Health: applying quality improvement strategies across six districts in southern Tanzania.

Project Leader: Dr. Fatuma Manzi
Contact: fmanzi@ihi.or.tz

Catholic University of Health; Allied Sciences and Mwanza Regional Secretariat: adapt, implement and evaluate the MamaToto package of maternal and child health activities.

Project Leader: Dr. Dismas Matovelo
Contact: magonza77@yahoo.co.uk

Shirati District Hospital and Mara Region Health Department: training community healthcare workers on culturally appropriate ways to assess and treat women and infants, and extend health care to rural areas.

Project Leader: Dr. Bwire M. Chirangi
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Tanzanian Training Centre for International Health and Morogoro Regional Hospital: training health workers on emergency obstetrical care and post-training mentorship and support to increase community access to comprehensive care.

Project Leader: Dr. Angelo Nyamtema
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Institute of Development Studies and Iringa Region Health Department: how poverty, gender and rural living contribute to delays in access and quality of maternal and child healthcare.

Project Leader: Dr. Stephen Maluka
Contact: Stephenmaluka@yahoo.co.uk

Mozambique



The Universidade Lurio and Ministry of Health: testing an integrated home-to-hospital care system for pregnant women and newborns.

Project Leader: Dr. Celso Belo
Contact: belo.celso@gmail.com

EA-HPRO

The three organizations that comprise EA-HPRO are leaders in using evidence to champion policy change.

African Population and Health Research Center (APHRC) is based in Nairobi, Kenya. APHRC has worked closely with government, academic and non-government institutions for 15 years to generate and disseminate evidence for meaningful action to improve the lives of all Africans.

The East, Central and Southern Africa Health Community (ECSA-HC), based in Arusha, Tanzania, is an inter-governmental organization that provides a regional platform for consensus building on health priorities, to foster and promote regional cooperation in health.

Partners in Population and Development Africa Regional Office (PPD-ARO), based in Kampala, Uganda, supports the promotion and mobilization of resources for sexual and reproductive health, population and development in Africa through policy and funding advocacy; accountability for sexual reproductive health and rights commitments; networking and strategic southern partnerships; and South-South best practice transfer.

Policymakers are critical to any effort to lift the barriers to access to quality maternal and child healthcare. By aligning strategic priorities with budgetary allocations, based on evidence translated from rigorous and validatable research, policymakers will be armed with the right tools to prioritize maternal and child health and adopt clear strategies to improve quality and access to health services for women and children.

Key Activities led by the EA-HPRO consortium

- MNCH context mapping and capacity assessments
- Evidence synthesis
- Networking and alliance building
- Support for national research uptake
- Research support
- Capacity strengthening in strategic communications and policy engagement
- Creating linkages with existing knowledge sharing networks
- Participation in regional evidence uptake and agenda-setting forums



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