

Maternal, Newborn, and Child Health

Fact Sheet



How do we deliver quality life-saving interventions to mothers and children where and when they need care, especially to those most in need, in remote areas, or in post-conflict countries? MSH works in over 20 different countries to meet this challenge.

Strengthening the Continuum of Care and Integrating Maternal, Newborn, and Child Health: A Health Systems Approach

To reach the most vulnerable women and children, MSH works closely with ministries of health, nongovernmental organizations (NGOs), and other stakeholders in over 20 countries to support evidence-based interventions to save lives and improve maternal, newborn, and child health at all levels of the health system. Here's how:

We Build Leadership and Governance

At MSH, we reshape priorities and policies and allocate resources to support maternal, newborn, and child health programs. We work in partnership with other organizations, such as the Partnership for Child Health Care, the Partnership for Maternal, Newborn, and Child Health, and the US Coalition for Child Survival, to further support maternal, child, and newborn care as a global health priority. We develop curriculum and conduct training and supervision to increase the numbers and build the capacity of skilled birth attendants to manage obstetric emergencies and newborn problems (including resuscitation at birth), of community health workers to address child illness and malnutrition at the household level, and of facility providers.

We Integrate Maternal, Child, and Newborn Care into Other Health Services

MSH is committed to strengthening the continuum of care from the community level, where many first fall sick, to the highest facility level. We achieve results by focusing on quality of care and promoting integrated, holistic approaches to treat mothers, newborns, and children such as:

- Preventing post-partum hemorrhage (through the active management of the third stage of labor), pre-eclampsia, and maternal anemia (through intermittent preventive treatment of malaria), and promoting the use of iron/folate supplementation, deworming, and routine use of insecticide-treated bednets.
- Promoting basic essential newborn care by training health workers in birth preparedness, management of infection, care of low birth weight infants, treatment of asphyxia, early introduction of breastfeeding, cord care, temperature maintenance, and recognition of danger signs.
- Improving community case management of malaria, diarrhea, and pneumonia, routine immunization, preventing and treating child malnutrition through counseling, growth monitoring, and the promotion of breastfeeding, micronutrient supplementation (vitamin A, zinc), and appropriate complementary feeding.

Reducing Maternal-Child Mortality in Malawi

Since 2003, MSH has played a key role in USAID-funded programs in Malawi that have reduced maternal and childhood mortality and illness, primarily by strengthening health systems and community-based care. The Pediatric Hospital Initiative, a national collaboration to improve the quality of care provided in hospital pediatric wards to children with common infectious diseases, has improved emergency care and timely treatment of children admitted to hospitals, thereby lowering the number of child deaths. The prevention of mother-to-child transmission of HIV has been integrated into antenatal care to capture yet more pregnant women and offer testing, counseling, and treatment. Child mortality has been improved through promotion of community case management of diarrhea, malaria, and pneumonia, community-based growth monitoring, and through the reduction of malnutrition.

Reaching Out to Mothers and Children in Afghanistan

In 13 provinces, MSH and its partners in the USAID-funded REACH Program helped to dramatically expand access to primary health care in Afghanistan. In just two years, the number of births attended by a skilled provider doubled from 12 to 23 percent, and the number of children who received a full schedule of immunizations grew from 15 to 37 percent. Today MSH continues to improve child mortality through the USAID-funded Basic Support for Institutionalizing Child Survival (BASICS) project, which promotes community-based treatment of child illnesses, as well as improving management of sick children through the Pediatric Hospital Initiative. The project developed and scaled up an integrated child survival package (which includes essential newborn care, growth monitoring and promotion, immunization, and treatment of pneumonia and diarrhea) to 28 districts in three years.

Increasing Use of Maternal Health and Child Survival Services in Uganda

Through the USAID-funded STRIDES for Family Health project, MSH and partners are working to lower maternal and child morbidity and mortality in Uganda. In the past year, the project contributed to a 15 percent increase in live births delivered at a health facility, 30 percent of pregnant women receiving four antenatal care visits, and 204,740 children under 12 months of age receiving a needed second dose of vitamin A, up 4 percent from the previous year. More people are accessing these services due in part to a vigorous communication strategy that includes the broadcast of 124 interactive radio programs. Listeners are able to call in and talk to guest speakers about basic family planning issues, as well as the importance of antenatal care and delivery by skilled birth attendants.



MSH's Approach to Maternal, Newborn, and Child Health:

- Provide innovative solutions to health care financing, such as performance-based financing;
- Improve service delivery and quality of care, scale up, and results;
- Develop better trained cadre of community-based health workers;
- Build capacity in leadership and governance to sustain health advances;
- Support the distribution and use of medicines, vaccines, and technologies (such as contraceptives, vaccines, and micronutrients) and appropriate availability;
- Strengthen the use of health information.

*For additional information, go to www.msh.org, or contact **Ciro Franco**, Global Technical Lead, MNCH, at +1.703.524.6574 or cfranco@msh.org.*