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*M*aternal and Child
Survival Program

Addressing Critical Health System Barriers to Improve RMNCAH Services

February 27, 2018

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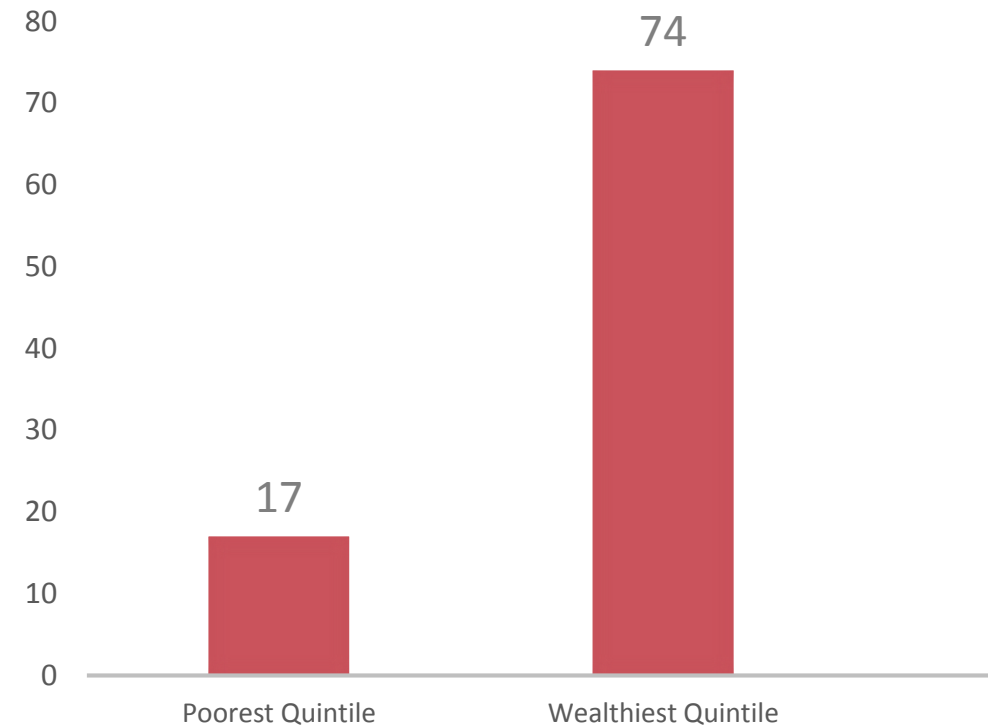
What Do Health Systems Look Like?

83
countries
don't meet the basic
threshold of
23 skilled health
professionals
per 10,000 people

3.5 billion

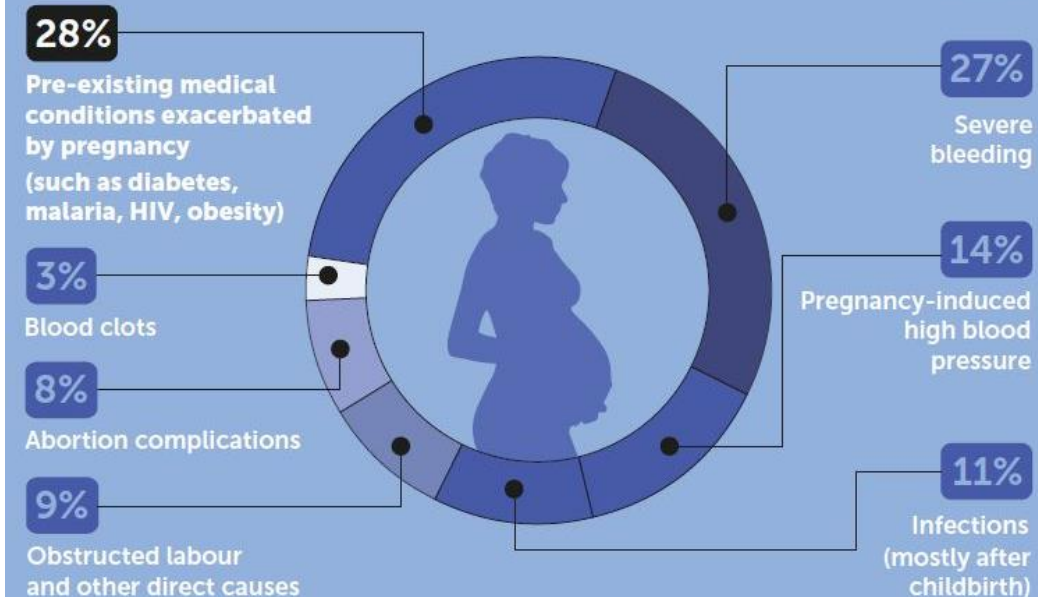
don't have full coverage
with essential health services

DISPARITIES IN COVERAGE

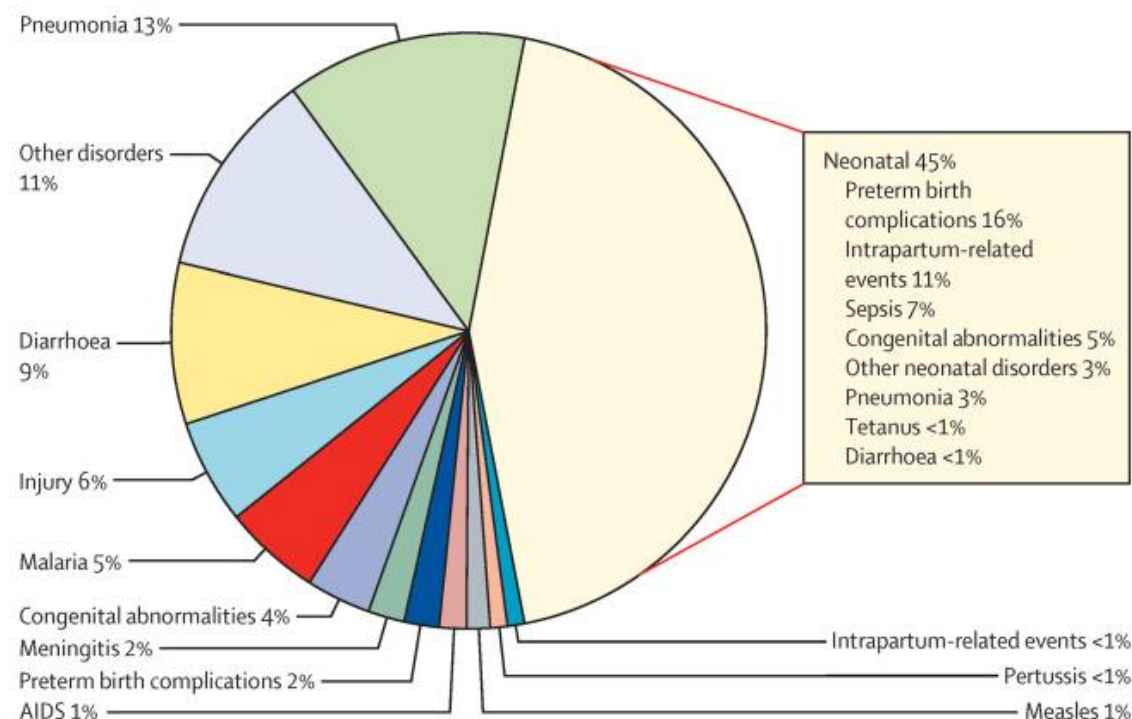


We Know the Most Prevalent Causes of Death

WHAT ARE PREGNANT WOMEN DYING FROM?



Causes of childhood (<5 years) deaths in 2015



Essential Services for Child Health

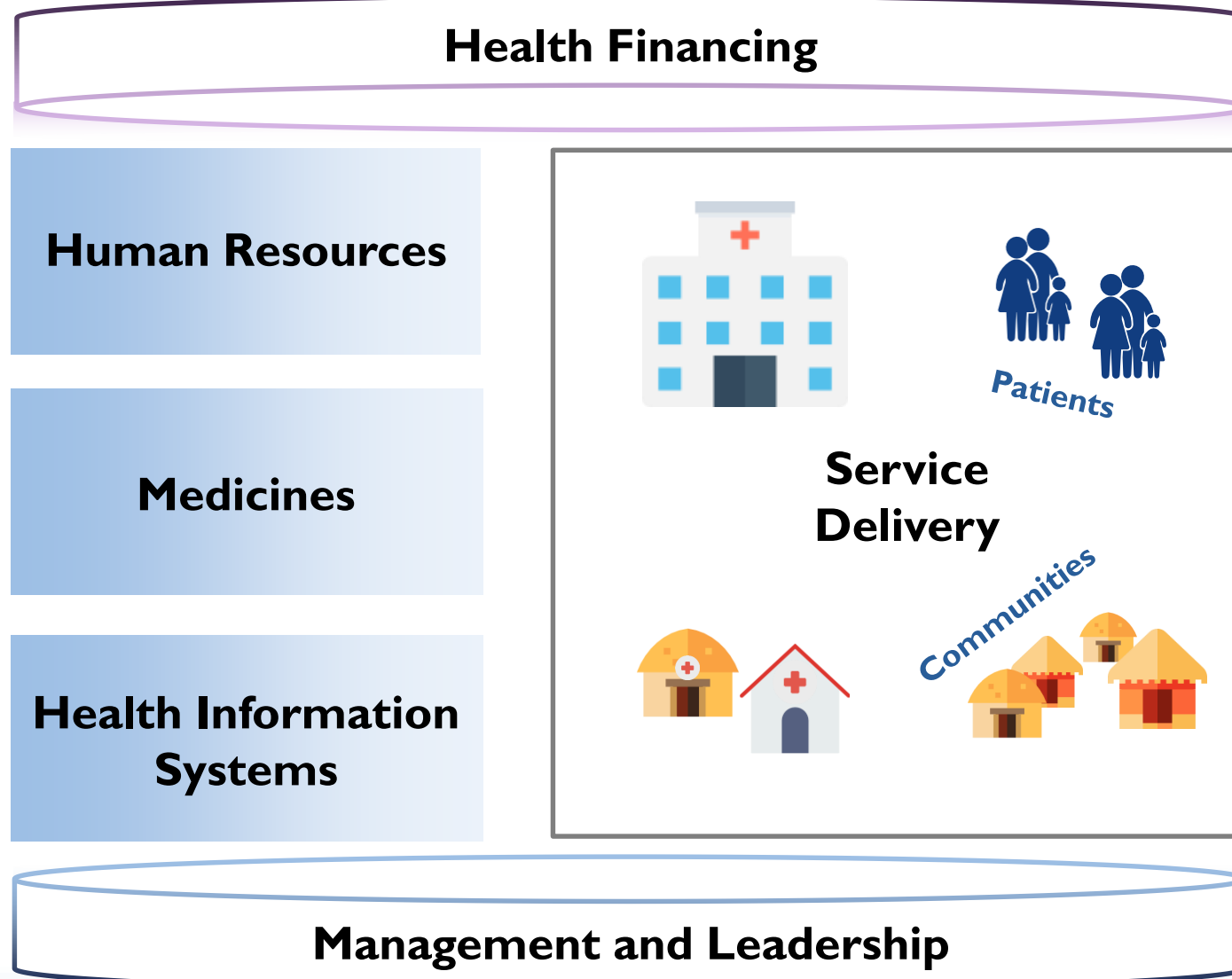
| Community or health post | Primary health centre | First-level and referral hospitals |
|---|--|---|
| 1 Promote breastfeeding or complementary feeding | | |
| 2 Provide vitamin A, zinc and food supplementation | | |
| 3 Immunisations | | |
| 4 Co-trimoxazole for HIV-positive children | 1 ART for HIV-positive children | |
| 5 Education on safe disposal of children's stools and handwashing | | |
| 6 Distribute and promote use of ITNs or IRS, or both | | |
| 7 Detect and refer children with severe acute malnutrition | 2 Treat severe acute malnutrition | 1 Treat severe acute malnutrition associated with serious infection |
| 8 Detect and treat serious infections without danger signs (iCCM); refer if danger signs appear | 3 Detect and treat serious infections with danger signs (IMCI) | 2 Detect and treat serious infections with danger signs with full supportive care |

Essential Services for Maternal and Newborn Health

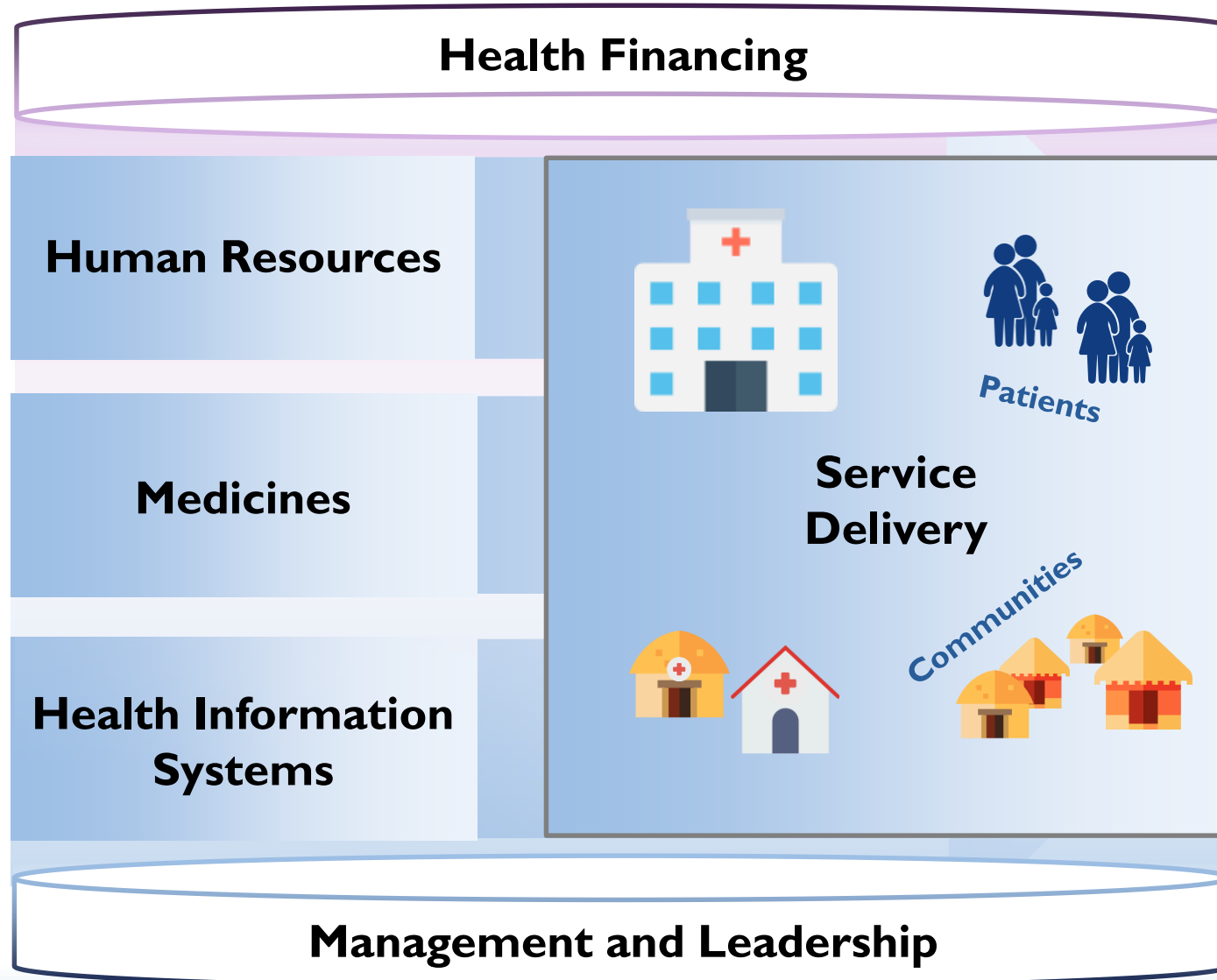
- 35 interventions
- Spans community, primary and secondary care levels
- Most interventions are urgent and requires transfer to higher levels of care

| Community or health post | Primary health centre | First-level and referral hospitals |
|--|--|---|
| Pregnancy | | |
| 1 Preparation for safe birth and newborn care; emergency planning | | |
| 2 Micronutrient supplementation | | |
| 3 Nutrition education | | |
| 4 Intermittent preventive treatment in pregnancy | | |
| 5 Food supplementation | | |
| 6 Education about family planning | 1 Management of unintended pregnancy | |
| 7 Promotion of HIV testing | 2 Screening and treatment for HIV and syphilis | |
| | 3 Management of miscarriage or incomplete abortion and care after abortion | |
| | 4 Antibiotics for preterm premature rupture of membranes | |
| | 5 Management of chronic medical disorders (eg. Hypertension, diabetes, mellitus) | |
| | 6 Tetanus toxoid | |
| | 7 Screening for complications of pregnancy | |
| | 8 Start antenatal steroids (as long as clinical criteria and standards are met) | 1 Antenatal steroids |
| | 9 Start magnesium sulphate (loading dose) | 2 Magnesium sulphate |
| | 10 Detection of sepsis | 3 Treatment of sepsis |
| | | 4 Induction of labour beyond term |
| | | 5 Management of ectopic pregnancy |
| | | 6 Detection and management of fetal growth restriction |
| Delivery in woman | | |
| 8 Management of labour and delivery in low-risk women by skilled attendant | 11 Management of labour and delivery in low-risk women (basic emergency obstetric care), including initial treatment of obstetric and delivery complications before transfer | 7 Management of labour and delivery in high-risk women, including operative delivery (comprehensive emergency obstetric care) |
| Postpartum in woman | | |
| 9 Promotion of breastfeeding | | |
| Postnatal in neonate | | |
| 10 Thermal care for preterm newborn babies | 12 Kangaroo mother care for preterm newborn babies (ie. newborn baby is held with skin-to-skin contact with an adult) | 8 Full supportive care for preterm newborn babies |
| 11 Neonatal resuscitation | | |
| 12 Oral antibiotics for pneumonia | 13 Injectable and oral antibiotics for sepsis, pneumonia, and meningitis | 9 Treatment of complications, meningitis, and other very serious infections |
| | 14 Management of jaundice | |

Engaging All Parts of the Health System

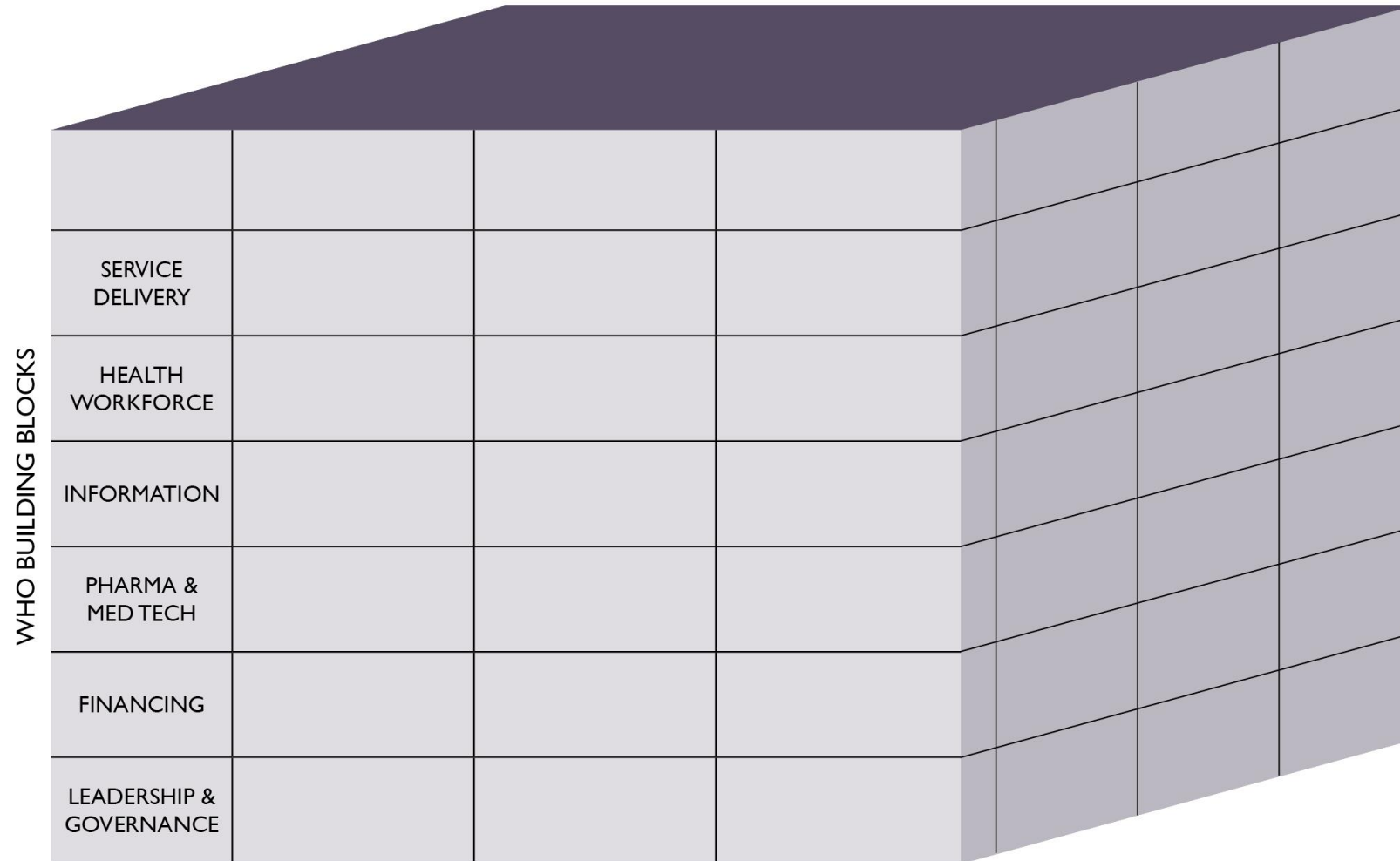


Engaging All Parts of the Health System



RMNCAH and Health Systems

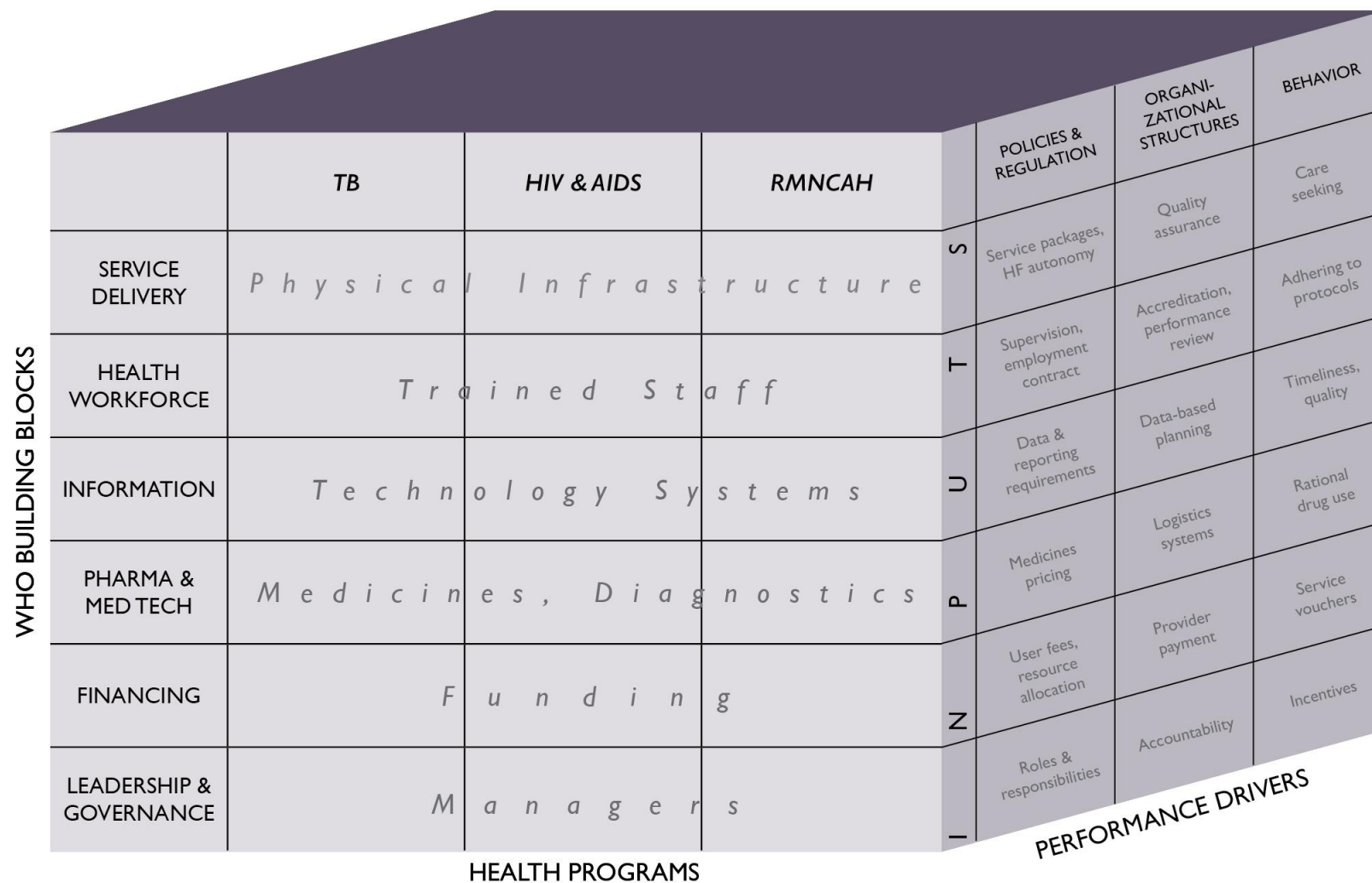
RMNCAH and Health Systems



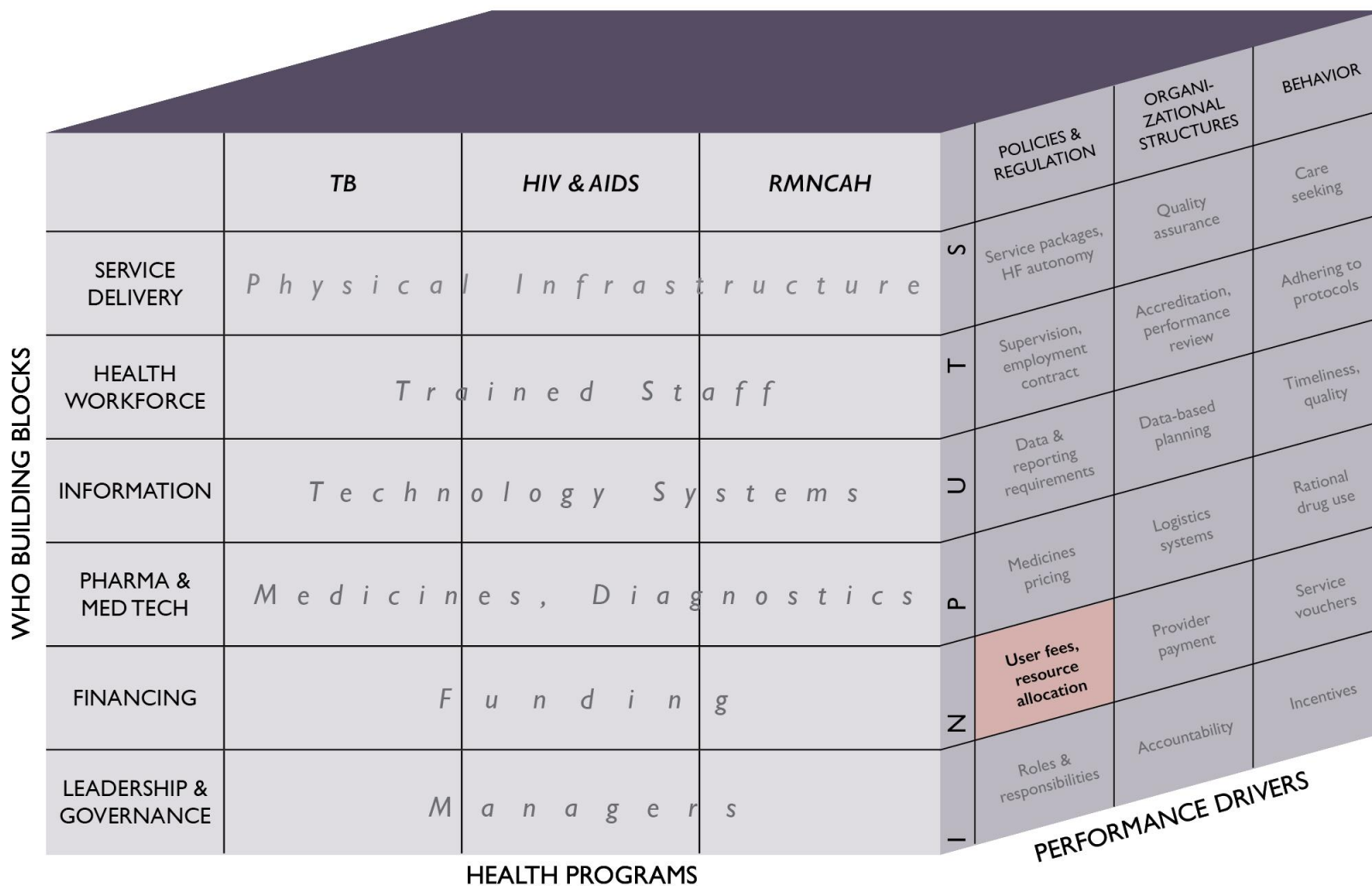
RMNCAH and Health Systems

| | TB | HIV & AIDS | RMNCAH | |
|---------------------|-------------------------|--|--------|---|
| WHO BUILDING BLOCKS | SERVICE DELIVERY | <i>P h y s i c a l I n f r a s t r u c t u r e</i> | | S |
| | HEALTH WORKFORCE | <i>T r a i n e d S t a f f</i> | | T |
| | INFORMATION | <i>T e c h n o l o g y S y s t e m s</i> | | U |
| | PHARMA & MED TECH | <i>M e d i c i n e s , D i a g n o s t i c s</i> | | P |
| | FINANCING | <i>F u n d i n g</i> | | N |
| | LEADERSHIP & GOVERNANCE | <i>M a n a g e r s</i> | | I |
| | HEALTH PROGRAMS | | | |

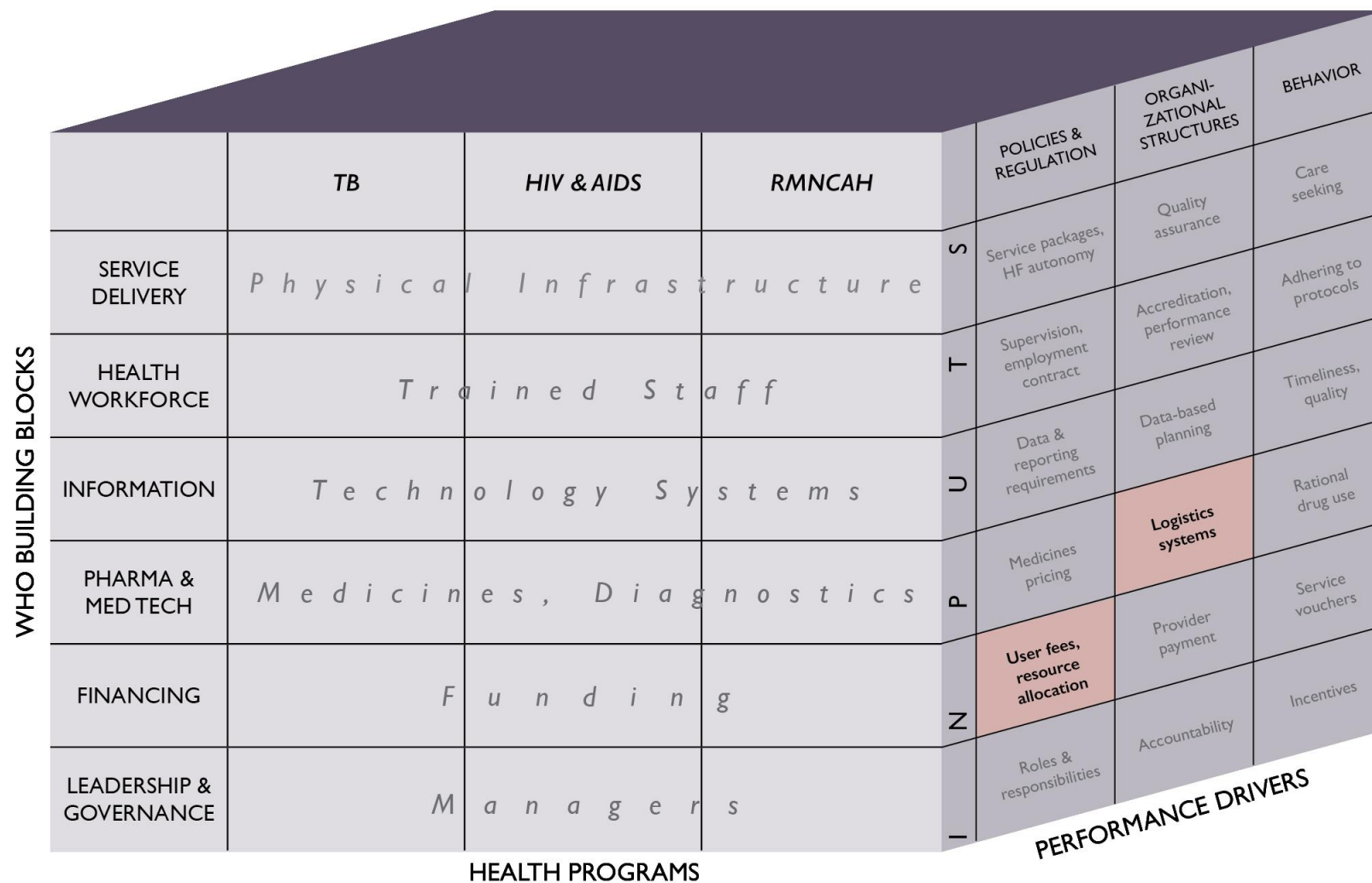
RMNCAH and Health Systems



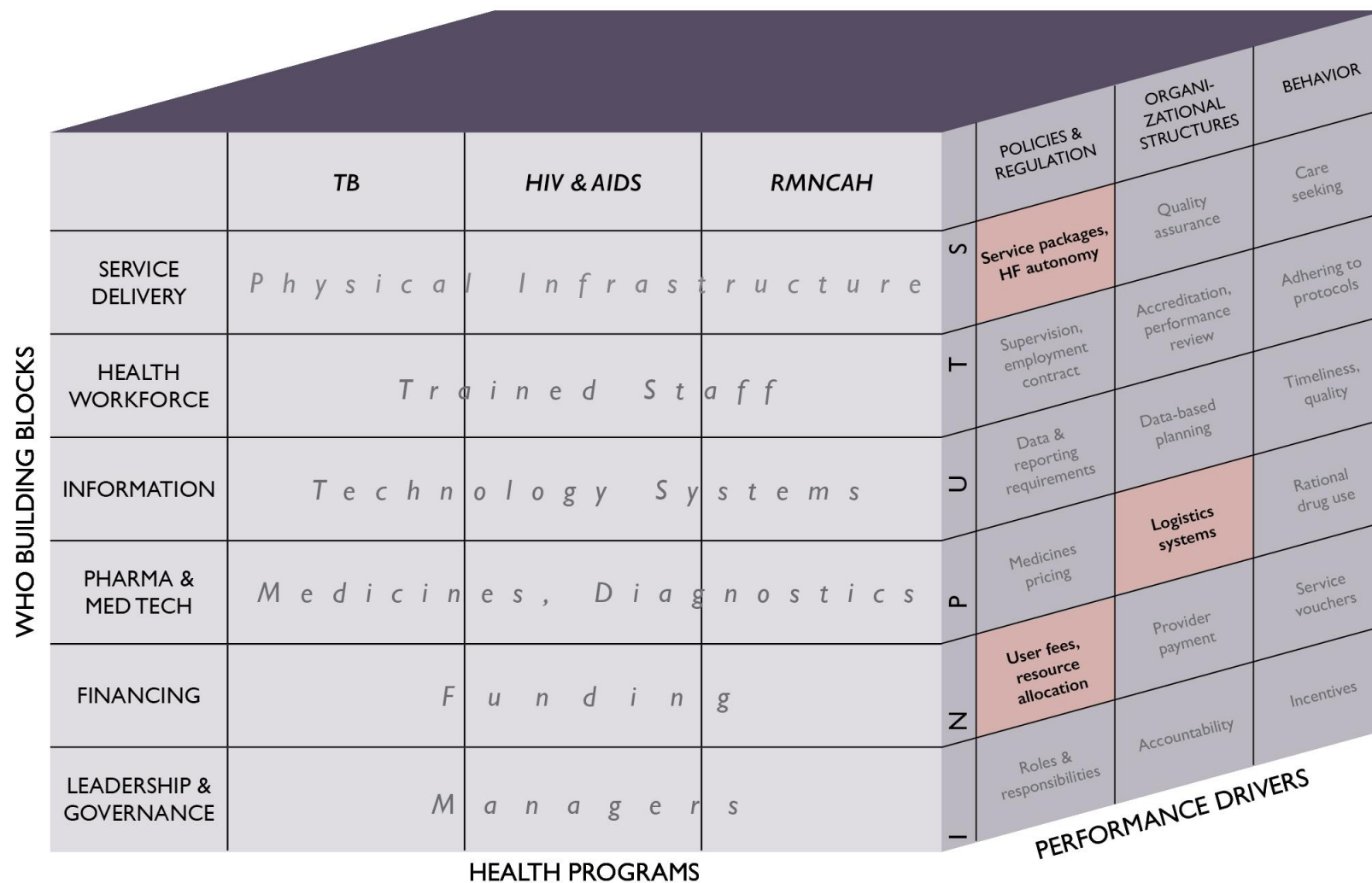
RMNCAH and Health Systems



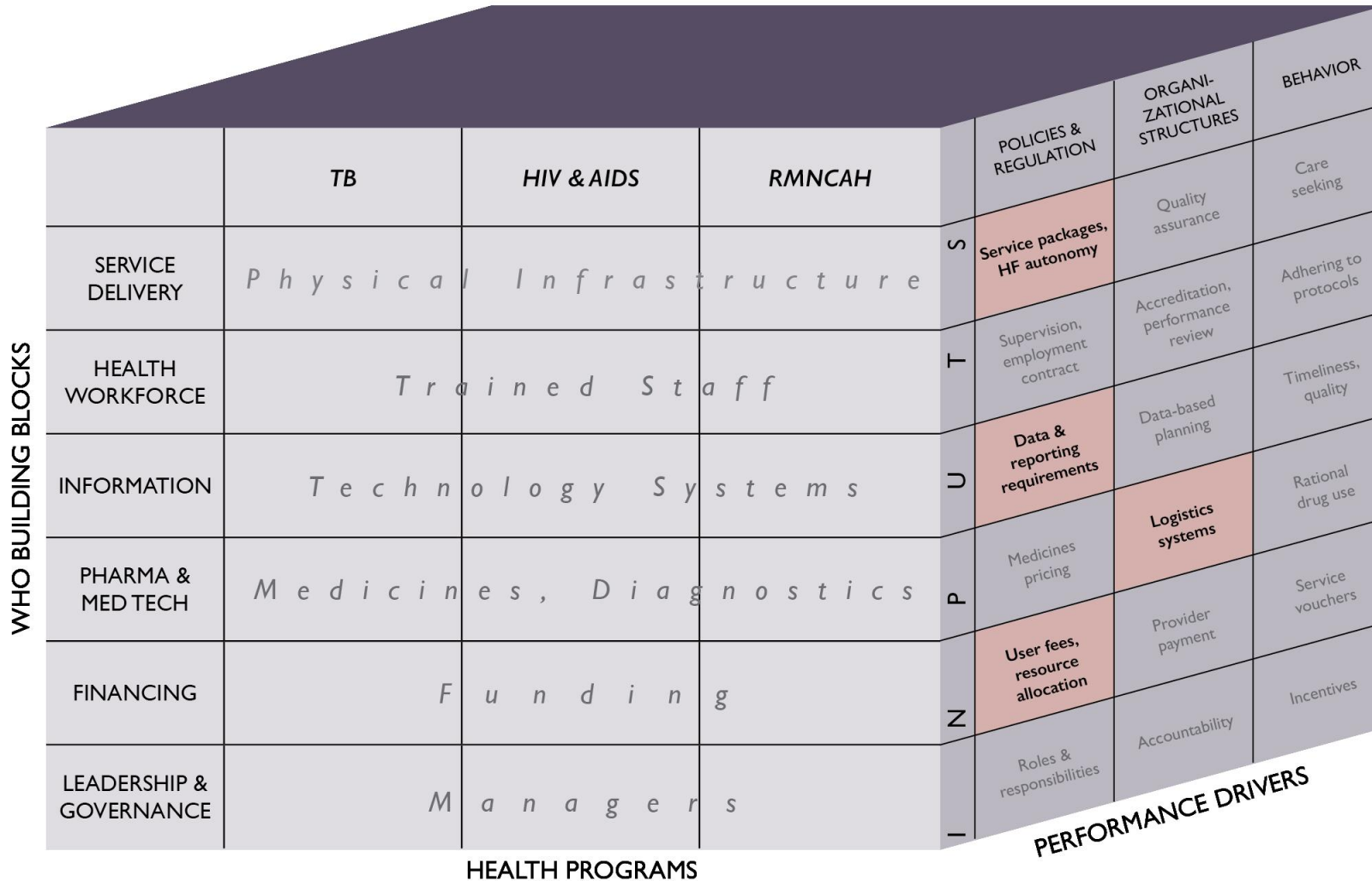
RMNCAH and Health Systems



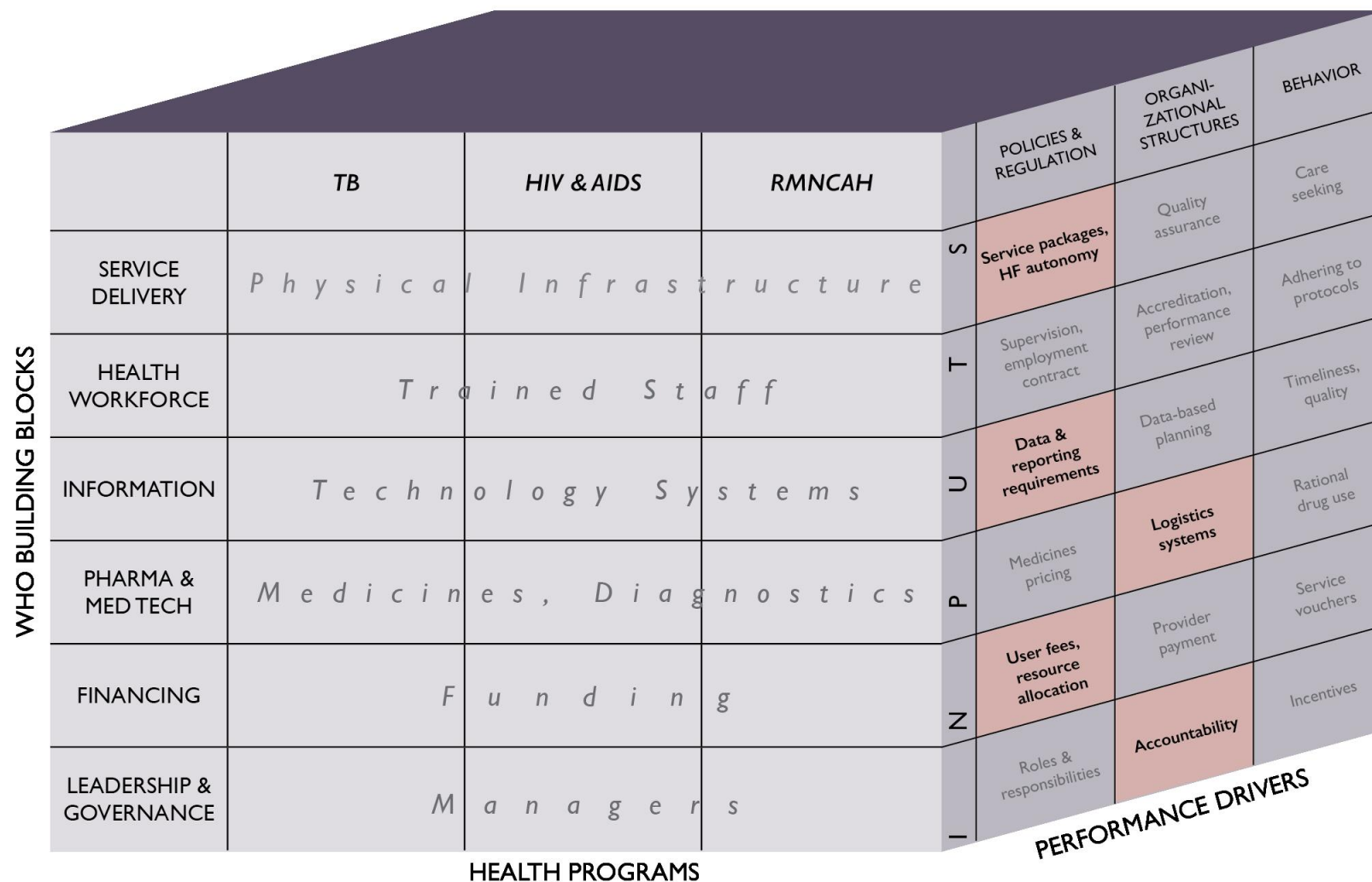
RMNCAH and Health Systems



RMNCAH and Health Systems



RMNCAH and Health Systems



Why Focus on Health Systems?

- 1) Scope of the issues
- 2) Fragmentation
- 3) Efficiency
- 4) Sustainability



USAID *Acting on the Call* report for 2017 estimates we can save the lives of 5.6 million children and 200,000 women (2016-2020) by building strong and resilient health systems

Recognition of Health Systems for RMNCAH

Building Resilient and Sustainable Systems for Health through Global Fund Investments Information Note

30 May 2017
Geneva, Switzerland

 The Global Fund

THE LANCET

September, 2016 www.thelancet.com

Maternal Health

An Executive Summary for The Lancet's Series



"Every woman, every newborn, everywhere has the right to good quality care."

Reproductive, maternal, newborn, and child health: key messages from *Disease Control Priorities 3rd Edition*

Robert E Black, Carol Levin, Neff Walker, Doris Chou, Li Liu, Marleen Temmerman, for the DCP3 RMNCH Authors Group*

As part of *Disease Control Priorities 3rd Edition*, the World Bank will publish a volume on *Reproductive, Maternal, Newborn, and Child Health* that identifies essential cost-effective health interventions that can be scaled up to reduce maternal, newborn, and child deaths, and stillbirths. This Review summarises the volume's key findings and estimates the effect and cost of expanded implementation of these interventions. Recognising that a continuum of care from the adolescent girl, woman, or mother to child is needed, the volume includes details of preventive and therapeutic health interventions in integrated packages: Maternal and Newborn Health and Child Health (along with folic acid supplementation, a key reproductive health intervention). Scaling up all interventions in these packages from coverage in 2015 to hypothetically immediately achieve 90% coverage would avert 149 000 maternal deaths, 849 000 stillbirths, 1 498 000 neonatal deaths, and 1 515 000 additional child deaths. In alternative calculations that consider only the effects of reducing the number of pregnancies by provision of contraceptive services as part of a Reproductive Health package, meeting 90% of the unmet need for contraception would reduce global births by almost 28 million and consequently avert deaths that could have occurred at 2015 rates of fertility and mortality. Thus, 67 000 maternal deaths, 440 000 neonatal deaths, 473 000 child deaths, and 564 000 stillbirths could be averted from avoided pregnancies. Particularly effective interventions in the Maternal and Newborn Health and Child Health packages would be management of labour and delivery, care of preterm births, and treatment of serious infectious diseases and acute malnutrition. Nearly all of these essential interventions can be delivered by health workers in the community or in primary health centres, which can increase population access to needed services. The annual incremental cost of immediately scaling up these essential interventions would be US\$6.2 billion in low-income countries, \$12.4 billion in lower-middle-income countries, and \$8.0 billion in upper-middle-income countries. With the additional funding, greater focus on high-effect integrated interventions and innovations in service delivery, such as task shifting to other groups of health workers and supply and demand incentives, can help rectify major gaps in accessibility and quality of care. In recent



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Thank you!

For more information, please visit
www.mcspprogram.org

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