

OVERVIEW OF MATERNAL AND NEWBORN SERVICES 'Along the Continuum of Care'

**FINIDINGS FROM THE JFV CONDUCTED IN RUKWA, SINGIDA
AND TANGA REGIONS**

Presented During the JAHSR Meeting Dec. 2017

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OUTLINES

- Introduction
- Achievements (RHMT CHMT, Facility & Community)
- Challenges
- Recommendations

INTRODUCTION

- Since 2007 before the JAHSR meeting, JFV were being conducted with a specific theme.
- The 2017 JVF aimed at creating a broader understanding of the problem, ensure common targets and coordination and to input into strategies that can change the current situation and reduce MN Mortality.
- The 2017 theme: ***Continuum of care for Reproductive and Maternal Health***

INTRODUCTION ...

- The TDHS/MIS 2015/16 data showed MMR: 556 /100,000, NMR: 25/1,000. Situation necessitated the need for action. Hence, through TC SWAp Meeting of August, 2017 the decision was reached to undertake JFV.
- The visits were conducted in Rukwa, Singida and Tanga from 08th to 13th October 2017.
- A total of 6 councils, 4 Hospitals, 7 HCs, 12 Dispensaries and 20 communities reached and discussions were held.

ACHIEVEMENTS

RHMT ACHIEVEMENTS

- Functional MPDSR committees
- Prioritized RMNCH Services

CHMT ACHIEVEMENTS

- CHMTs are available and functional
- Inclusion of RMNCAH services into CCHP
- Availability of budget line for Referral services

ACHIEVEMENTS...

FACILITY ACHIEVEMENTS

- Private and faith based facilities complement on public facilities gap
- Availability of tracer medicine
- Committed and Motivated HRH

ACHIEVEMENTS....

COMMUNITY

- Community is aware of health services challenges and have shown their readiness to participate in service improvement
- HFGC are in place to oversee health services

CHALLENGES

RHMT

- Investment done to RMNCAH interventions do not reflect expected results
- Inadequate resources to implement response part of identified maternal health challenges (Financial, Human, Material)

CHALLENGES..

CHMT

- Shortage of HRH (by quality and quantity)
- Poor partners mapping and low involvement in priority setting
- Inadequate working tools (Vehicles, Computers)
- Inadequate Managerial and Leadership Capacities
- Poor data management

CHALLENGES...

CHMT

- Shortage of HRH (by quality and quantity)
- Poor partners mapping and low involvement in priority setting
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CHALLENGES..

FACILITY

- Low incentive to available staff (No staff houses, statutory allowances not paid, no career development plans)
- Weak referral systems (No ambulances , feedback not provided to lower level)
- Insufficient maternal and perinatal death audits
- Unfriendly and unsafe delivery infrastructure (No running water, limited space, inadequate delivery kits)
- Inadequate Supportive Supervision by RRH
- Low CHF enrollment

CHALLENGES...

COMMUNITY

- Tradition and customs still have negative effect in accessing the services
- Inadequate number CHW and unclear deployment procedures
- Community has limited access to maternal health information
- Low involvement of male partners in RCH services

RECOMMENDATIONS

ISSUES TO BRING TO TECHNICAL REVIEW MEETING

- Pre Services training curriculum should Reviewed
- RMNCAH health should carefully look at both demand and supply side of intervention

RECOMMENDATIONS

MINISTRIES, REGIONS AND COUNCILS

- Ensure training and deployment of Community Health Workers countrywide
- Emphasize on integrating of RMNCAH issues in every health intervention
- Effective utilization of available non public facilities