



World Vision®



MOTHER
and
CHILD
HEALTH

SOMALIA, UGANDA and ZAMBIA

» PROGRESS REPORT: October 2017 through September 2018

Prepared January 2019

MOTHER AND CHILD HEALTH

GLOBAL SUMMARY

Thanks to your faithful support of mother and child health projects in Somalia, Uganda, and Zambia, the promise of Isaiah 65:20 is being borne out with encouraging frequency: Never again will there be ... an infant who lives but a few days.

You are helping to provide families and health workers with knowledge and tools needed to protect the lives of pregnant women, deliver babies safely, and give infants and young children a strong start in life.

In areas of Somalia that are affected by severe food shortages and hunger, we successfully treated more than 14,000 children with acute malnutrition. The project expanded to 10 new villages to spread this life-saving work.

In Uganda, a midterm evaluation showed exceptional results in reducing

the dangerous effects of malnutrition and improving infant and newborn care. One highlight was a significant decline in the prevalence of wasting (low weight for height) in children younger than 5.

In Zambia, a midterm evaluation showed more children are thriving. The prevalence of children who are underweight dropped from nearly 27 percent to 5.3 percent. Also, the number of mothers who are giving their babies only breast milk in the first six months was 90 percent in the evaluation, compared with the national average of 73 percent.



Community health workers are trained volunteers who provide their neighbors with vital health information and basic care. Here, a group of Zambian volunteers receives backpacks from the project, to carry the tools of their trade.

This report presents just a few of the exciting highlights you helped make possible in fiscal year 2018.

GLOBAL UPDATE

450,400 WOMEN AND YOUNG CHILDREN* were provided with access to maternal and child health and nutrition services, which included 259,981 children younger than 5 during FY18. Since these projects began in FY16, 749,018 women and young children have benefited from your support.

*These beneficiary numbers include people who might have received more than one service. For example, women who delivered their babies in a health facility often also received prenatal care services. These numbers also include beneficiaries from two projects not covered here that are solely supported by a corporate partner.

130,309 children under 5 were screened for malnutrition and received appropriate treatment and care as needed.



29,085 pregnant women attended prenatal care clinics, most for the prescribed four times.



30,744 women delivered babies in a health facility with trained medical staff.



PROJECT SPENDING IN SOMALIA, UGANDA, ZAMBIA

\$11,604,957

Project-to-Date Funding



SOMALIA

Hunger in Puntland and Somaliland has been exacerbated in recent years by poor growing conditions and an influx in transient populations that have no means to grow or obtain enough food. This creates a soaring malnutrition rate, which has necessitated a stronger focus on malnutrition in young children.

The number of children being reached with nutrition screening, monitoring, and treatment has far exceeded project targets. In addition to this concentration on malnutrition, we continue to support maternal health education and care for pregnant and nursing women.

In FY18, this project reached 56,173 children younger than 5, and 23,146

women of child-bearing age, 13,207 of whom were pregnant or nursing. Since the project began, we've reached 97,009 women and children under 5.

To care for these families, the project's centerpiece is training and education—for the community health volunteers who carry vital messages and frontline care to underserved areas, and staff in project-area health facilities.

Establishing and training Village Health Committees to support delivery of this life-saving knowledge and care is making our work something communities can sustain long after this project ends.

In FY18, 6,980 children received diagnosis and treatment in their village



Your support is ensuring children are screened and treated for malnutrition.

from volunteer health workers, with only about 5 percent requiring referral to a health facility for more skilled care.

14,315 children with acute malnutrition were successfully treated.



3,576 children younger than 5 received all recommended vaccinations.



3,628 women gave birth in a health facility with trained staff attending.



Other achievements and activities from FY18 included:

- Community health volunteers registered 4,257 new pregnant and nursing women, well above the annual target of 3,000 women. Of those women, 4,008 received their first home counseling visit within the first 16 weeks of pregnancy.
- Fathers in 50 percent of registered households took part in these counseling sessions. This is important, because men typically make all decisions regarding healthcare and distribution of family resources. When they understand the importance of mother and child healthcare, they are more likely to set aside income needed for transportation to a health facility for delivery, and provide better food for pregnant and nursing women and young children.
- 8,797 pregnant women attended at least four prenatal care clinics, which was 17 percent above target for the year.
- 375 health education sessions were conducted, reaching 12,574 people with messages on infant and young child feeding and hygiene practices. Families were referred to World Vision food and livelihood projects to help them improve their food supplies and access to nutritious foods.
- Success rates for children with severe-acute malnutrition were 90 percent in Puntland and 96 percent in Somaliland. Cure rates for children with moderate-acute malnutrition

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were 97 percent in Puntland and 96 percent in Somaliland. Pregnant and nursing women who were treated for malnutrition had cure rates of 97 percent in Puntland and 98 percent in Somaliland. These stellar results (international success standards are 75 percent or higher) were achieved by ensuring outpatient therapeutic feeding and supplemental feeding sites and services were available in each village, maintaining good supplies of therapeutic foods and supplements, and effective education for mothers and caregivers.

- The project expanded to meet the needs in 10 new villages, which required selection and training of Village Health Committees and 20 community health workers.
- Workshops with government staff and other organizations were

convened in Somaliland to review community health worker curricula being used by different agencies. It was learned that 24 different names for community health workers are being used, with varying incentives. Participants agreed to move forward using the term “family health workers,” offering the same stipend rates (\$80 to \$100 a month), and using the same training curriculum.

- 15 World Vision staff members were trained on the Channels of Hope curriculum, which engages faith communities in promoting maternal and child healthcare. A three-day workshop for 40 sheiks in Garowe took place in addition to a nine-day training for Channels of Hope facilitators for 30 sheiks in Nugal. Experience has shown that religious leaders are effective promoters of improved care for women and young children, as they are known

and trusted in communities.

- 26 staff members were trained to train others about gender-based violence issues. They then trained 233 members of gender-based violence committees and health volunteers on issues such as child marriage, violence, and female genital mutilation, which has a 98 percent prevalence rate in Somalia. A five-day training for 20 midwives and nurses from eight health facilities focused on rape management.
- Results of a trial to see if families will adopt improved sanitation and hygiene practices showed that when parents understood practices, they were more likely to adopt them. However, barriers such as income for soap and hand-washing stations remained a challenge. Trial findings suggest testing solutions to save soap and water to increase handwashing.



Community health volunteers provide health and nutrition education, as well as basic care for common illnesses they are trained to recognize. At left, they are teaching women about the best way to feed infants and young children. During FY18, 51 of these volunteers received refresher training on integrated community case management, which arms them with the skills they need to do this work, and 20 new volunteers were trained. At right, volunteers take part in a training on how to use a mobile phone application to collect and store health data.



Hawa (center in photo at left) is raising a daughter and a niece and has a third child on the way. Prior to this pregnancy, a previous one ended in miscarriage, most likely because she had no prenatal care and didn't take care of herself. She had no idea what is needed for a healthy pregnancy. She thought going to the health center would waste her time and “make me become lazy,” she said. But after visits from community health workers, she learned about nutrition, needed rest, sleeping under a mosquito net (malaria is especially dangerous to pregnant women), and the importance of delivering her baby at a health facility.

“I hardly knew anything about these lessons,” she said, adding, “But today I'm thankful that I'm aware of all these things . . . I'm aware of the danger signs.” She also vows to make plans to get to the clinic when it's time to deliver.

“This would not have happened without the support and daily visits by the [community health workers]. I'm grateful for them . . . Their work has impacted me positively and enhanced my health and well-being,” Hawa said.

PROJECT SPENDING

\$3,714,739

Project-to-Date Funding

\$3,606,561 Spent

97%

UGANDA



Children draw water at a new well that provides safe water for a clinic and community in Uganda. This particular well came about through community advocacy training that taught residents how to demand services promised by the government.

Your support of our work in Hoima during FY18 is paying exciting dividends, with several important targets exceeded. This means pregnant women are healthier, more babies are being delivered safely, and children are better nourished and thriving.

A midterm evaluation showed some especially exciting results, such as the prevalence of wasting (low weight for height) in children younger than 5 dropping to 1.9 percent from the baseline data showing 3.6 percent prevalence. This surpassed the target for this point in the project of reducing wasting to 3.2 percent.

This achievement can be partly

attributed to a marked increase in mothers who exclusively breast-fed their babies for the first six months of life. This is the safest, most nutritious way to feed an infant. At midterm, 85 percent of mothers exclusively breast-fed, compared to 67 percent at the beginning of the project.

Premature babies are getting a stronger start in life thanks to the growing practice of using Kangaroo Care, a method of holding preemies skin-to-skin with a parent, to keep them warm in the absence of incubators. At baseline, only 5.5 percent of premature babies received Kangaroo Care, but at midterm, that number jumped to 71.4 percent, soaring past the target of 10 percent.

19,918 women delivered their babies at a health facility with skilled nurses and midwives.



22,535 children under 5 attended growth monitoring and health promotion sessions.



16,956 targeted children under 5 received all their essential childhood vaccinations.



Other achievements in FY18 included:

- 220,184 women and children under 5 received health and nutrition services during FY18, and 364,562 received services since the project began in October 2015.
- 1,404 children younger than 5 were successfully treated for malnutrition through community nutrition sessions that teach parents and caregivers to cook nutritious meals using affordable and locally available foods.

- 10,534 pregnant women reported making at least four visits to prenatal care clinics before delivery.
- 1,080 pregnant women received vouchers to provide transportation to health facilities when it was time to deliver their babies. Vouchers are given at the fourth prenatal care visit.
- 28 trained faith leaders (26 Christian and two Muslim) shared what they learned with 160 congregations, 141 of which were engaged in Channels

of Hope activities. These included things such as health education through the church, providing health and spiritual counseling to pregnant women, referring children to immunization services, and encouraging breast-feeding for infants.

- 31,076 pregnant women were tested for HIV, and 338 mothers/babies received HIV care following delivery.

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- 30,208 women reported using modern family practice methods.
- 19,997 households reported adopting safe, optimal feeding practices for infants and young children.
- The project supported national Child Health Days in April, which resulted in 16,956 children younger than 5 getting fully immunized.
- 115,986 children received deworming medicine, and 33,254 children received vitamin A supplements. Also, 8,605 girls received human papillomavirus vaccinations.
- 24,543 households were visited by trained community health workers who are part of Village Health Teams. Results were slightly lower than expected (83 percent of target) because retention issues for volunteers reduced the corps. New volunteers have been recruited.
- Community health workers discovered potential pregnancy complications such as bleeding (32), high temperature (52), swollen feet (35), abdominal pain (101), and fainting (52), and provided care or referrals when necessary.
- Four active Citizen Voice and Action groups successfully advocated for improvements in healthcare and services that included posting a new midwife each at Buraru and Mparagasi health facilities, wells were drilled at Mparagasi and Kapaapi, a vaccine refrigerator was repaired at the Buraru facility and a

commitment received to replace it, uniforms were provided for workers at Buhimba, security personnel were recruited for Bujala, and a health assistant was posted to Kapaapi.

- Project staff worked with a consultant to coordinate training via radio for community health volunteers who deliver targeted health messages and basic care to their neighbors. The radio episodes and workbooks were developed and translated into local languages. Health workers took a pretest to determine their level of knowledge prior to the broadcasts and will take a test after listening to the training sessions to show what they learned. Contracting with radio stations was taking place so the training could move forward.

Improved nutrition

Cooking demonstration sessions are called *Positive Deviance/Hearth*. The positive deviance refers to families in struggling communities that manage to keep their children healthy and well-nourished, despite poverty. They work with project staff to share how they do this with their neighbors. Cooking demonstrations help families understand how they can make best use of affordable, locally available foods to keep children healthy. Attendees bring ingredients, which are cooked during the sessions, then children eat what has been prepared. Sessions like these attributed to a high rate of malnutrition recovery in the project areas. Of 1,473 children identified as malnourished, 1,404 were enrolled in these sessions (comprising several trainings), and 1,154 graduated after one session. Children who did not gain the required weight will be monitored for continued treatment.



Improved healthcare facilities

Improvements to health facilities included additions to Kapaapi Health Center that included a new maternity wing, repair of a well to supply safe water, connection to the power grid, and recruiting needed staff. Some of these improvements came through community advocacy efforts made possible by Citizen Voice and Action training. These improvements gave local mothers-to-be the confidence to have their babies here, and data showed 91 more babies were born here than in FY17, despite ongoing construction.

PROJECT SPENDING

\$3,492,829

Project-to-Date Funding

Project Spending \$3,465,613

99.2%

ZAMBIA

This project's design—training several corps of community volunteers and health facility staff—is showing life-changing results.

By encouraging families to better care for pregnant and nursing women, babies are being born more safely and healthier. By promoting immunizations and improved feeding practices for infants and young children, we are meeting and surpassing some important targets set for this project.

A recent midterm evaluation showed that more mothers in the project areas were feeding their babies younger than 6 months exclusively breast milk—the most beneficial and safest practice. Findings show that figure is at 90 percent, which far surpasses the

national average of 73 percent. Results also show mothers who initiated breast-feeding early following birth rose from 71 percent to 84 percent. These results are related to another exciting change: the percentage of underweight children younger than 5 shrank from 26.6 percent to just 5.3 percent.

Families also are getting better at preventing illness, as the prevalence of fever in young children dropped from 30 percent to 13 percent.

More women are having their first prenatal care visit within the recommended first 16 weeks of pregnancy (from 42 percent to 75 percent), and attending prenatal care clinics at least four times before giving birth (from 49.8 percent to 76 percent).

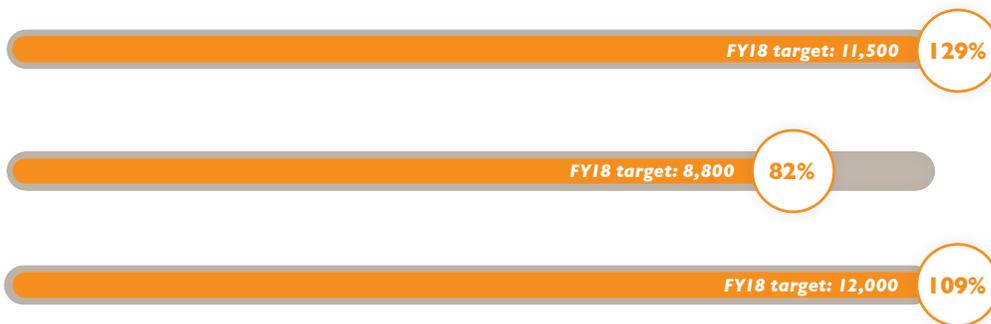


A community health worker uses a special measuring tape designed to help determine if a child's middle upper arm circumference is appropriate. This little girl falls safely in the green zone. If she was in yellow or red zones, the health worker would have directed her mother to appropriate care options.

14,789 mothers report they are exclusively breast-feeding their babies from birth to 6 months.

7,198 women delivered their babies with skilled medical personnel in a health facility.

13,034 children under 5 received a full regimen of vaccinations.



Other achievements and activities from FY18 included:

- 97,993 women of child-bearing age and children under 5 benefited from project activities in FY18; this included 51,601 children under 5 who attended growth monitoring sessions.
- Improvements to health facilities included a new maternity wing at Siatwiinda, a safe water system at Kabeleka, and a rehabilitated maternity wing at Chikomeni.
- 746 children were found to be underweight at growth monitoring sessions and enrolled in therapeutic programs. Of those, 459 were rehabilitated, and 287 are still in rehab programs.
- 29,467 households heard messages on sanitation and hygiene from community health volunteers from Safe Motherhood Ambassador Groups (SMAGs), hygiene promoters, community health workers (CHWs), and others.
- The project counts 5,804 community-based volunteers among its corps of workers who are spreading health, sanitation, and hygiene messages, and providing the first line of basic care (diagnosis and treatment of common ailments). These include SMAGs, CHWs, hygiene promoters, growth monitoring promoters, infant and young child feeding promoters, neighborhood health councils, and the elimination of mother-to-child transmission of HIV counselors. These volunteers who

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At left, women in Oliver work together to preserve locally grown vegetables to increase availability of nutritious food year-round. At right, volunteers lead a session in Ndailwala, showcasing nutritious foods and how to best prepare them.

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give back to their communities are the most important tool in our toolbox.

- 322 churches and Congregational Hope and Action Teams are actively promoting maternal and child healthcare.
- 397 community leaders and others were active in the advocacy model called Citizen Voice and Action, which trains communities to successfully advocate for the healthcare and other services

guaranteed by the government. Their work paid dividends, bringing four new staff members to the Vulamukoko rural health center, and two new staff houses, which are being built. Advocacy efforts also led to a new maternity wing at the Kwenje clinic, which is under construction.

- Youth in Chongwe East and Chongwe South led presentations to community leaders on the effects of harmful practices such as child marriage. These and other efforts led

to four girls in the project areas being removed from forced marriages and returned to school.

- Community health workers reported diagnosing and treating 3,449 cases of diarrhea, 3,655 cases of fever, and 4,939 cases of respiratory illness.
- 79,277 households reported owning at least one insecticide-treated mosquito net or had their house sprayed with insecticide to protect it from mosquitoes, thanks to overlapping project interventions.



“I am happy that World Vision, through the health project, trained me in child growth monitoring and promotion. I know how to weigh children, identify danger signs in children, make referrals and record in the (growth monitoring) card. My community is already benefiting from the services closer to their home,” said Grace Siamulambe, a growth monitoring and promotion volunteer in Sinazongwe.

Donated supplies improve healthcare quality

In FY18, our corporate donors provided donated goods ranging from pharmaceuticals (vitamin A, mebendazole, cotrimoxazole, aspirin, depo provera) to surgical equipment, scales, umbilical cord clamps, catheters, and a cast cutter. Donations also included an exam table, hospital bed, resuscitators, sutures, office equipment, and more. Some communities received bikes for health volunteers, while others received T-shirts, baseball caps, and backpacks to provide health volunteers with the tools of their trade and to make their jobs easier.



Volunteers celebrate receiving new backpacks to carry their supplies.

PROJECT SPENDING

\$4,397,389

Project-to-Date Funding

\$4,384,796 Spent

99.7%

LENNY SHOWS CLILIANCE HOW PREGNANCY SHOULD BE

Inviting a community health worker into her home during her seventh pregnancy might have saved Cliliance's life.

Cliliance is amazed at the difference prenatal care and better nutrition made for her last-born child when compared to his slightly older brother.

Cliliance and her husband, Morrison, live in World Vision's Chongwe East Area Program in Zambia. They already had five children when Cliliance became pregnant with Chileleko. She had never gone to a health facility for prenatal care or changed the way she ate when pregnant. She continued to labor alongside her husband in the fields. While pregnant with Chileleko, she got ill, and decided to go—alone—to the nearest clinic, about six miles away. Her complications resulted in a referral to a hospital, where she delivered the baby by C-section. He wasn't breathing, but a well-trained nurse resuscitated the baby, and he survived.

Hospital staff advised Cliliance not to get pregnant again, because of the risk to her health. Community health workers and faith leaders also promote the safe timing and spacing of pregnancies among families, to protect the health and lives of mothers and babies.

But just a few months later, Cliliance was pregnant again, and as in the past, her husband discouraged her from going to the clinic for prenatal care. Heavy bleeding turned out to be a miscarriage. It was just two months after that, she recalled, that she was pregnant once more, and her health and the health of Chileleko began to deteriorate.

"I felt hopeless, as my life was in danger and my baby's health was not good," she said. Headaches, backaches, dizziness, and bleeding lasted for a month. Her concern led Cliliance to report to her local volunteer health worker that she was pregnant. That's when Lenny started visiting the home regularly, sharing information about safe pregnancy and nutrition not just with Cliliance, but with Morrison as well.

"As a family we learned a lot of things, such as eating a variety of food, danger signs, taking enough rest when pregnant, going to



Cliliance holds a healthy, happy Emmanuel, who was born after his family learned how to care for her during pregnancy.

the clinic at least four times during pregnancy, sleeping under a mosquito net ..." she reeled off.

Lenny visited the family until it was time for its seventh child to be born. Because of Cliliance's history, she was referred again to the hospital for this delivery. Following a C-section, baby Emmanuel was born healthy.

Cliliance said her prenatal care, and the knowledge she's gained about nutrition, made a world of difference for Emmanuel. She said he is more alert and active than Chileleko, who had none of the benefits gained from Lenny's visits.

Another positive outcome: Morrison agreed that Emmanuel should be their last baby. "I was amazed by the decision made by my husband," she said, speculating that it might have saved her life. "I will continue breast-feeding Emmanuel exclusively for six months, as I learned from Lenny, and I will also continue feeding Chileleko accordingly," she added.

“I am so glad for the works the [health volunteer] is doing in this community. She has transformed my husband such that he has even started helping me to prepare meals. I am very happy, and may the good Lord continue blessing you.”

—Cliliance, mother of seven



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