

Sub-Saharan Africa's progress towards MDGs 4 & 5:

Do changes in coverage of maternal and child health interventions enlarge or lessen the equity gap?

Innovations for maternal, newborn
& child health

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Innovations for Maternal,
Newborn & Child Health pilots
creative solutions for improving
the survival and health of
women, babies and children.

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Outline

- Background – Equity matters
- Objectives
- Data & Methods
- Results
 - Modern contraceptive use – Currently married women
 - Skilled birth attendance
 - Full vaccination – Children 12-23 months
- Two examples of pro-poor interventions

Equity Matters

- Inequity in health – major barrier to development
- Health systems: highest coverage of interventions not enough; also, reduced inequities
- Equity focus

Missed in the health MDGs

Central & deliberately included in the SDGs



Objectives

- ◀ Examine trends in coverage of MNCH interventions
- ◀ Compare trends in coverage of these interventions with trends in equity (poor-rich) gaps
- ◀ Illustrate three interventions aimed at reaching the poor and contributing to reduced inequities in access to MNCH services

Data

- ◀ Demographic and Health Survey (DHS) data from countries with 4+ surveys “well spread” in the period 1990+
 - ▶ Total sub-Saharan Africa (SSA): 19 countries
 - ▶ Eastern & Southern Africa (ESA): 9 countries
 - ▶ West & Central Africa (WCA): 10 countries
- ◀ MNCH interventions of interest
 - ▶ Use of modern methods of FP – currently married
 - ▶ Skilled birth attendance
 - ▶ Full vaccination – children 12-23 months

Countries and Survey Years

	1990-1995	1995-2000	2000-2005	2005-2010	2010+
1. Benin		1996	2001	2006	2011/12
2. Burkina Faso	1992/93	1998/99	2003	2010	
3. Cameroon	1991	1998	2004	2011	
4. Cote d'Ivoire	1994	1998/99	2006		2011/12
5. Ghana	1993/94	1998/99	2003	2008	
6. Guinea	1992	1999	2005		2012
7. Kenya	1993	1998	2003	2008/09	
8. Madagascar	1992	1997	2003/04	2008/09	
9. Malawi	1992	2000	2004/05	2010	
10. Mali		1995/96	2001	2006	2012/13

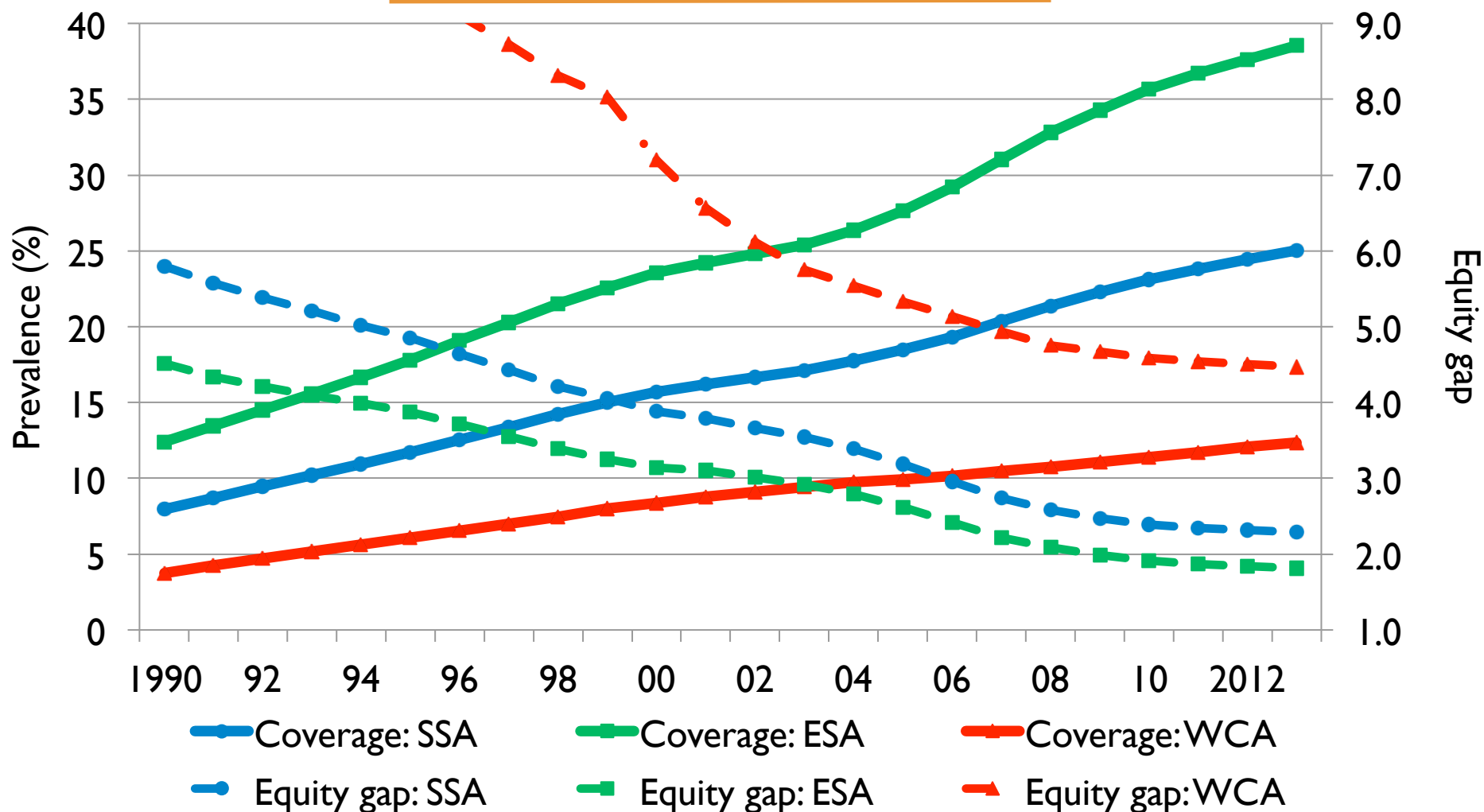
Countries and Survey Years (Ct'd)

	1990-1995	1995-2000	2000-2005	2005-2010	2010+
11. Namibia	1992	2000	2006/07		2013
12. Niger	1992	1998	2006		2012
13. Nigeria	1990	1999	2003	2008	2013
14. Rwanda	1992	2000	2005	2007/08	2010/11
15. Senegal	1992/93	1997	2005		2010/11
16. Tanzania	1991/92	1996	2004/05	2009/10	
17. Uganda	1995	2000/01	2006		2011
18. Zambia	1992	1996/97	2001/02	2007	2013/14
19. Zimbabwe	1994	1999		2005/06	2010/11

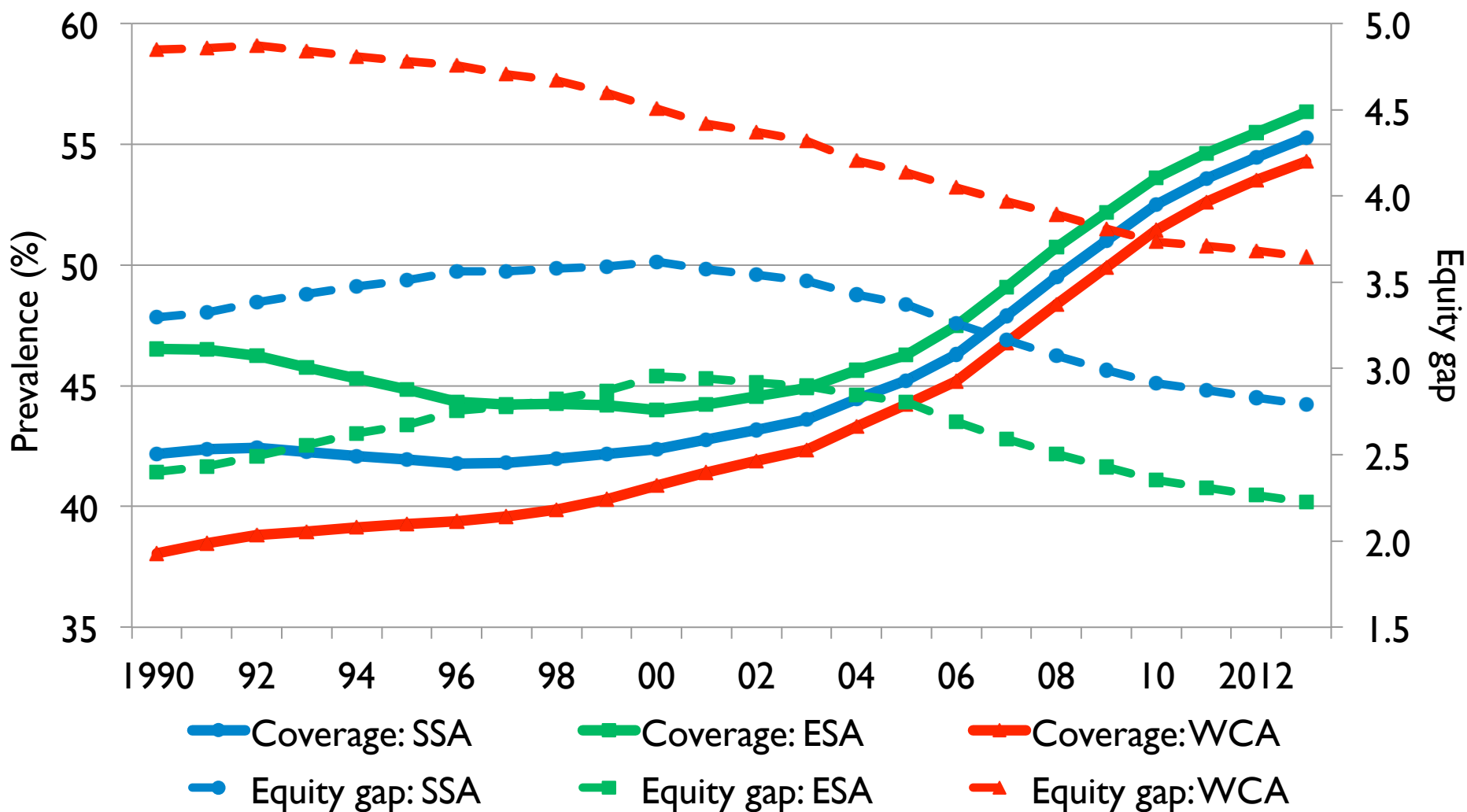
Methods

- ◀ Prevalence data for each year (1990-2013) through linear inter/extrapolation
 - ▶ National levels
 - ▶ Lowest 20% and Highest 20% quintiles
- ◀ Regional aggregates (SSA, ESA, WCA) using UN Pop estimates – for each year
 - ▶ Overall levels
 - ▶ Lowest 20% and Highest 20% quintiles
- ◀ Equity gaps: Rich to poor ratios

Results: Modern Family Planning Methods



Results: Skilled Birth Attendance



Results: Full Vaccination

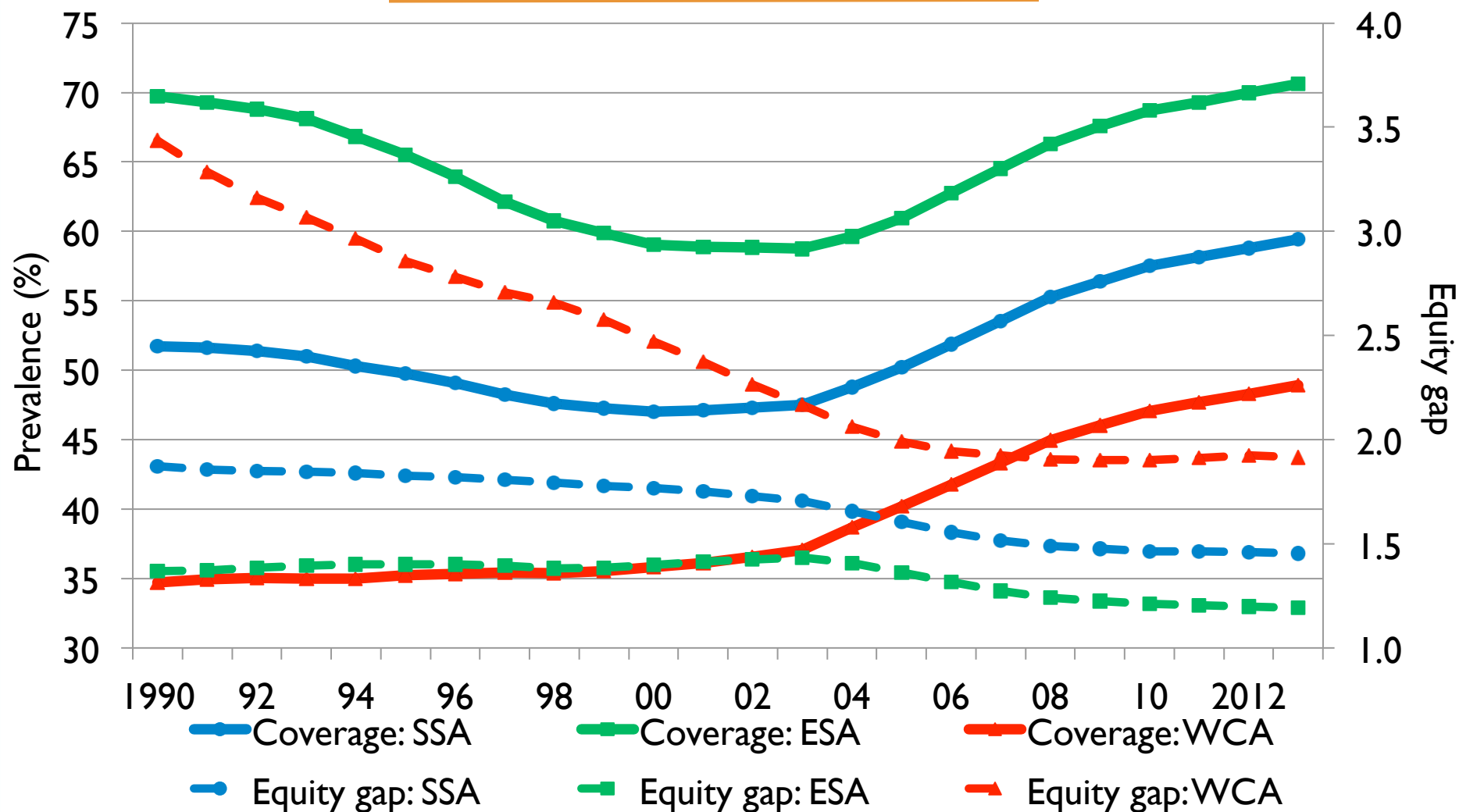


Illustration: Pro-Poor Interventions

- Trends in both coverage and equity gaps in the right direction
 - Unfinished agenda – coverage & equity
 - Other equity dimensions – e.g. geography
 - Hope momentum not lost in the SDGs
- Equity must be intentionally pursued
- Examples of strategies directed to the poor
 - Contribution to national averages
 - Importantly: Reduced inequities

Toll-free hotline to connect women with health facilities in rural Malawi

- ◀ **Context:** Long distances to and long waiting times at health facilities; lack of timely, reliable health information
- ◀ **The intervention**
 - ▶ Health center by phone (CCPF)
 - ▶ Balaka district, 2011+
 - ▶ Toll-free hotline
 - ▶ Personalized text/voice messaging
 - ▶ Community volunteers with phones



Rebranding Traditional Birth Attendants as MNH Promoters in rural Sierra Leone

- ◀ **Context:** TBAs as crucial yet overlooked resource for community-based MNCH care
- ◀ The intervention
 - ▶ Essential Newborn Care Corps (ENCC)
 - ▶ Bo district, since 03/2014
 - ▶ 200 TBAs
 - ◀ Home visits, health education
 - ◀ Referrals to health facilities
 - ◀ Sale of health-related goods as a source of income



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Thank you!

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