Local champions boost efforts to ensure health of mothers, children

Partnership with counties to sustain gains made in improving access to health care at the grassroots

Chiefs, community-based organizations and local champions are at the centre of an approach that USAID's Afya Uzazi Program is implementing jointly with Baringo and Nakuru counties to ensure women, children and adolescents receive affordable, quality health services.

Usually, chiefs are seen as keepers of law and order. But now chiefs and their assistants in the two counties are wearing another hat. They have been trained as health champions and lead campaigns to promote the health of mothers, children and adolescents.

Over 50 chiefs from six sub-counties have been given knowledge and skills to spread health messages and actively encourage women to attend antenatal clinics, deliver in hospital and seek postnatal care.

To further promote local action and ownership of health interventions, Afya Uzazi is working with community-based organizations (CBOS). Members of these CBOS are also trained and given small grants for community mobilization to encourage individuals, especially women, to take charge of their own health.

“We have embarked on a truly revolutionary approach to community mobilization for health care services uptake,” says Afya Uzazi Chief of Party Dr. Boniface Maket.

In September alone, chiefs and assistant chiefs conducted 72 barazas dedicated to health promotion, reaching over 6,000 people with key messages. In the same period, two CBOS identified 2,361 pregnant women and linked them to local health facilities, where they were enrolled and received free services under the National Hospital Insurance Fund’s (NHIF) Linda Mama scheme.

Working with CBOS and chiefs is part of a broader strategy designed to accelerate and sustain access to quality health care and build local capacities to sustain them.

In this strategy, Afya Uzazi collaborates with county health management teams in planning and budgeting to ensure joint activities address local priorities.

At all stages, teams use data to guide decisions on how to invest resources for best results while promoting equity.

Joint county work plans include activities to strengthen systems, ensure quality and build the county’s capacity to progressively take over and continue interventions when the project ends.

“Our maternity is now well equipped and more mothers are seeking services’’

“’Our maternity is now well equipped and the number of mothers seeking services has increased and so have the births,” says Mary, the nurse in-charge at Marigat Catholic Mission Health Centre in Baringo County.

Nurse Mary was speaking when she received Afya Uzazi Nakuru-Baringo Program Chief of Party Dr. Boniface Maket who visited the facility (See left). Nurse Mary said that the quality of care had improved, especially in the newborn unit, after the health centre received equipment procured with USAID support.

The equipment includes an incubator, warmer, ultrasound machine and a resuscitator, which helps babies to breathe.

The mission hospital is one of dozens of facilities in the county that got essential equipment for maternal and child health through the Kenya Medical Supplies Agency (KEMSA) and Afya Uzazi Program. Afya Uzazi works with the Baringo and Nakuru county governments to empower health care workers to improve the quality of services they provide.

‘‘Our maternity is well equipped and more mothers are seeking services’’

Dr Boniface Maket and Nurse Mary Monari at Marigat Mission Health Centre.

Afya Uzazi’s Peter Kamau explains how a portable scanner works during an open day held at Ikumbi Health Centre to create awareness about maternity services. Local leaders are in creating demand for maternal and child health services.
Twins can survive on breast milk

Breastfeeding gives babies a good start to life. Combined with the right complementary foods given at the right time, it helps to prevent malnutrition. But many children miss out on the benefits of breastfeeding due to lack of awareness among parents and other barriers such as strong cultural beliefs. Such babies do not start on breastfeeding immediately after birth and are given food before six months or stop breastfeeding too early. While 95% of children in Kenya are breastfed, only three in five start breastfeeding in the first hour after birth as recommended and only two in five are exclusively breastfed for four to five months. Nutrition for between 6 and 23 months is also sub-optimal, with only half of children getting the minimum number of meals per day and only 41% receiving four or more food groups per day.

Valentine Chebii, a 21-year-old mother of four in Baringo County did not exclusively breastfeed the first two of her four children. “I gave my children porridge and other foods when they were only three or four months old,” says Valentine, who lives in Kimpf Turkana, a low-income settlement near Marigat town. The elder children often fell ill, mostly with diarrhea. The young mother spent a lot of time and money taking them to hospital and caring for them at home. But the case is different with her youngest children, twin brothers, who are almost six months old. She has given them only breast milk, which is enough to meet their current nutritional needs. The boys are healthy and very active. She recalls her pregnancy: “I suspected that I could be carrying twins because my pregnancy was bigger compared to the others,” Valentine says.

Twins can survive on breast milk

Valentine and her twins: She delivered the twins at the Marigat Mission Hospital. At the time, Valentine did not know about the benefits of exclusive breastfeeding. After Valentine had delivered, a healthcare worker told her about the benefits of exclusive breastfeeding for six months. At first, Valentine was skeptical. She found it hard to believe that breast milk alone could satisfy both babies, but the nurse convinced her that with a proper diet, she could produce enough milk for the twins. The nurse enrolled Valentine in a mother-to-mother support group so that she could learn from other mothers and share her own experience.

In the group, Valentine learned the importance of exclusive breastfeeding, how to position the baby during breastfeeding, the importance of good nutrition and family planning. “Compared to my first two children, my twins have never been ill,” says Chebii.

Many women miss out on health tips that could help them during pregnancy and in child care because they do not attend antenatal clinics or take one visit instead of the recommended four. Due to lack of knowledge, harmful traditional practices persist. These practices include giving newborns herbs or foods before breast milk (prelacteal feeding), which deprives babies of nutrients and exposes them to the risk of infection. Nelly Nabori, a nutritionist at Marigat, knows Valentine well. She regularly joins the mothers’ support group to provide health education. “I teach the mothers about good nutrition for themselves and their children,” says Nelly. She screens and refers mothers or children who require various services to the local health facility. Once in a while she joins community volunteers in home visits to follow-up on some of the new mothers and encourage them to continue breastfeeding.

Family planning champions share their stories to inspire others

For Valentine and her twins, exclusive breastfeeding makes a big difference

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About Afya Uzazi:

Afya Uzazi, meaning healthy parenthood in Kiswahili, is a five-year project funded by the United States Agency for International Development (USAID) under award No. AID-615-A-16-0011. Afya Uzazi aims to increase access to quality family planning/reproductive health, maternal, neonatal, child, and adolescent health (FP/RMNCAH) in focus sub-counties of Baringo North, East Pokot, Marigat, and Mogotio in Baringo County and Kuresoi North and Kuresoi South in Nakuru County. Afya Uzazi is implemented by FHI 360 in collaboration with the national Government of Kenya and County Governments. This publication does not necessarily reflect the views of USAID or the US Government.

Baringo First Lady joins celebrations as county makes progress towards ending open defecation

Towards the end of 2018, Baringo celebrated the first village to be declared an open-defecation free zone in the county. The celebration of the new status of Kabarasel marked the beginning of an accelerated campaign to end open defecation in over 2,500 villages.

In September 2018, the county recorded another victory in the journey as 11 of 67 villages certified to be free of open defecation held a joint celebration at Kasisit in Baringo North, with over 300 others as well, are on their way to being declared ODF zones.

The progress towards ODF status has been achieved through Community-Led Total Sanitation (CLTS). Afya Uzazi has partnered with the county government to implement this proven approach that brings together communities to improve sanitation and hygiene.

The 11 villages are Lebesian, Kibiros, Sogom, Mogoi, Kabiyewo, Suswechun, Biriekwonin, Kapraste, Bartakok, Endip and Kasesya.

On September 24, county health officials and local leaders joined community members from the 11 villages in an event to celebrate the villages.

A week later, it was the turn of Ndambul B village in Marigat Sub-County to celebrate.

Baringo County First Lady Ivy Kiptis, who is championing efforts to achieve total sanitation, attended both events.

Awarded certificate

She urged communities to embrace practices that help to prevent diseases such as typhoid and diarrhea. “When we practice proper sanitation and hygiene in our homes, we will be able to prevent the transmission of infection caused through hands water and food,” she said.

First Lady Ivy was awarded a certificate of appreciation.

Dr. Winnie Bore, the Baringo County Chief Officer for Public Health, commended the 11 villages and the partnership with Afya Uzazi to achieve universal latrine coverage.

SMS reminders to increase knowledge and clinic visits

Afya Uzazi Program is working with Baringo and Nakuru counties to encourage pregnant women to seek antenatal care (ANC) and deliver in hospital. Although significant progress has made in increasing access to healthcare for pregnant women, many still do not attend ANC clinic four times as recommended.

To increase ANC attendance, Afya Uzazi has come up with a mobile phone solution that sends out SMS reminders to women who miss clinic dates. The system also sends out health tips on care during pregnancy and parenting.

Health workers are provided with an appointment diary and a smart phone special application via which they register women for SMS alerts. After each clinic session, a health care worker enters details of missed appointments in the application. The system then sends of SMS prompts to the women who failed to show up.

“This system is very good,” Rachael Mokaya (right), the nurse in charge of Seguton Dispensary. “Recently, a woman came to the clinic and after she got a SMS and she was very excite about it.”

The women old nurse Rachael that she was busy on the farm and and forgot about the clinic appointment. She has since delivered a healthy baby girl at a nearby health centre.

DATA FILE:

Despite progress made over the past two years to increase the proportion of women attending the 4th ANC visit, the rate is low, at 22% in Kuresoi North, up from 14%, against a county average of 49% for Nakuru. The average for Baringo is 49%.

Contact: Eric Odipo, EOdipo@afyauzazi.org

Contact: Alfayo Wamburu, awamburi@afyauzazi.org