Selected Findings from Facility Assessment in Kayes Region

MCHIP/Mali team
Kita and Diéma Districts
HMIS managers

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Outline of Presentation

- Background
- Assessment methodology
- Results:
  - Mothers of children ≤ 24 months perceptions
  - Health worker’s knowledge
- Opportunities for PPFP
Demographics

- TFR 6.2*
- CPR (modern methods) 6.2*
- MMR 464/100,000*
- Neonatal mortality 46/1000*
- <5yrs child mortality 191/1000*

*Mali DHS 2006
Integrated package of care at CS-Com
- AMTSL + ENC + PPFP
- CS-Ref oriented & updated
- New cadre “Agent Santé Communautaire”
  - Community-based care: management of malaria, diarrhea, ARI and PPFP
  - Referral to facility for birth and sick newborn
  - WASH and malnutrition management
Assessment Objectives

- Low-cost programmatic assessment
- Evaluate the knowledge of health workers in FP/PPFP, AMTSL and ENC
- Understand mother’s with children ≤ 24 months perception of MNH/FP services
Assessment Methodology in 2 Districts Kita & Diéma

- 67 health workers
  - 2 CS-Ref
  - 20 CS-Com
- 140 Mothers of children ≤ 24 months
  - 10 from each CS-Ref
  - 6 from each CS-Coms
Methodology (continuation)

- Questionnaires developed by MCHIP/Mali with input from HQ on AMTSL, ENC and PPFP and pre-tested in local language:
  - 1 for health workers
  - 1 for mothers
- Interviewers were MCHIP staff & trained by the M&E
- Final interviews conducted in local language
Results: What Mothers Reported

Demographics (n=140)
- Median age: 26 years
  - 22%: adolescents (age 15-19)
  - 23% (age 20-24)
  - 23% (age 25-29)
  - 19% (age 30-34)
  - 13%: > 34 years
- 96% married
- 37% had some schooling

ANC & L&D (n=138)
- 90% 1 ANC/65% 4+ ANC
  - 58% counseled on birth spacing
  - 79% counseled on danger signs
  - 84% counseled on EBF
- 80% facility birth
  - 65% said they had an injection just after delivery of the baby (AMTSL)
- 64% immediate BF
PPFP Results: What Mothers Reported (n=138)

- 62% no PPFP services in immediate PP
- 60% no PPFP during infant care visits
- 83% not using FP since birth
- 17% used PPFP (during first year PP)
  - At time of interview 14% currently using FP
PPFP Method Mix (n=23)

FP methods used during first year postpartum

- LAM: 1
- Oral contraception: 11
- Injectables: 8
- IUDs: 1
- Sterilization: 2
Results: What Health Workers Reported (n=67)

### Knowledge of Health Practices
- 37% AMTSL’s 3 steps
- 91% dry and wrap newborn
- 10% PPFP during multiple services contacts
- 33% LAM criteria

### Knowledge of HTSP
- 9% HTSP
- 72% BTP 2 years interval
- 33% 6 months after PAC
  - 12% diminishes risk of preterm birth
  - 61% reduced risk for malnutrition among children and mothers
## Methods Health Workers Said They Would Offer PP Women (n=67)

<table>
<thead>
<tr>
<th>BF women with infant &lt; 6 weeks</th>
<th>BF women with infant &lt; 6 months</th>
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<tbody>
<tr>
<td>18% LAM</td>
<td>10% LAM</td>
</tr>
<tr>
<td>15% IUDs</td>
<td>21% IUDs</td>
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<tr>
<td>19% sterilization</td>
<td>22% Sterilization</td>
</tr>
<tr>
<td>7% spermacides</td>
<td>24% injectables</td>
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<tr>
<td>16% OCs</td>
<td>4% implants</td>
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<tr>
<td>15% injectables</td>
<td>3% condoms</td>
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<tr>
<td>7% implants</td>
<td>1% SDM</td>
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</tbody>
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Summary

- 60%+ Mothers no PPFP @ discharge, @ infant care visits and 42% none @ ANC
  - MISSED OPPORTUNITIES
- 9% LAM users yet 84% advised EBF
- Providers PPFP practices need strengthening
  - 1/3 knew LAM criteria, many said they would offer hormonal FP <6wks PP
- HTSP benefits
  - 12% providers knew spacing ↓ preterm,
- Integrated package offers opportunities for providers to offer PPFP throughout