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Improving maternal and newborn care through strengthening village health team capacities in Butaleja district, Eastern Uganda**Pascal Byarugaba, Richard Muhumuza, Chang sub Lee, Eun Seok Kim, Mark Lule, Christine Oseku, Irene Auma and Ingrid Natukunda**
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Statement of the Problem: Village health teams (VHTs) are community health workers trained to strengthen primary health care in the community. They are an essential component of the health system through providing the critical link between the health facilities and their communities. A large proportion of maternal deaths occur in settings in which vital registration is deficient and many sick women do not access services. As a result most of these deaths occur around the time of labor, delivery and immediate postpartum. However, the risk of pregnancy-related complications, maternal and infant disability and death can be reduced by improving access to quality care before, during and after pregnancy. This paper presents how VHTs have improved maternal and newborn health care in Butaleja district.

Methodology: Through the KOICA funded Butaleja Maternal, Neonatal and Child health (BMNCH) project, World Vision focused on the community based approaches to address the delays in seeking appropriate care and inability to access care in a timely manner. This involved training and tooling of VHTs to map, follow up and refer pregnant women and newborns for antenatal care, delivery and postnatal care. This is continued until the child is two years of age. From January, 2015, a total number of 1208 VHTs have taken on the initiative in all 245 villages of Butaleja district.

Findings: A pre and post intervention analysis of health management information system (HMIS) dataset before and after the intervention was conducted. Three parameters of pregnant women attending first ANC in first trimester, 4th ANC and health facility deliveries were considered. For both parameters, there is an observed improvement.

Conclusion: Village health team members have created awareness and demand and hence increased uptake of MNCH services.

Biography

Pascal Byarugaba is a Professional Health and Project Management Specialist with over six years of practical experience in program management, monitoring and evaluation for child survival, maternal and adolescent health, malaria and community health financing. Currently supporting the Butaleja MNCH project as an M&E Officer, his research interest is in the development of strategies aimed at translating research works into meaningful and relevant policies to improve health outcomes in the global south. He has worked with international organizations including HealthPartners and Amref Health Africa on a number of community health systems strengthening programs in the local settings.

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