

Quarterly Report for MCHIP Nepal Programs (2011)

I. INTRODUCTION

The goal of USAID's Maternal and Child Health Integrated Program (MCHIP) is to scale up evidence-based, high impact maternal, newborn and child health (MNCH) including family planning (FP) interventions toward reductions in maternal and child mortality. The MCHIP program started in Nepal in 2010 with the aim to continue to improve the health of mothers and newborns of Nepal in support of Government of Nepal (GoN) policies and priorities. MCHIP/Nepal continues some of the work initiated during the ACCESS Program and adds some new initiatives. The MCHIP/Nepal activities contribute to the global MCHIP results framework—innovative, effective and scalable community-oriented strategies that deliver integrated high impact interventions to vulnerable populations designed, implemented and evaluated by Private and Voluntary Organizations (PVOs)/Non-governmental organizations (NGOs) (sub-objective 3 of MCHIP result framework). Key partners include the Ministry of Health and Population (MoHP), Family Health Division (FHD), and the current USAID bilateral Nepal Family Health Program II (NFHP II).

II. MCHIP PROGRAM OBJECTIVES AND KEY ACTIVITIES

The original program description from USAID/Nepal supported three main objectives over 21 months (January 2010–September 2011). After nine months of implementation in 2010, these three activities continue into this PY3 workplan. The program objectives are listed below:

1. **Provide technical and financial assistance for the ongoing calcium supplementation pilot.** For Pre eclampsia/eclampsia (PE/E) prevention particularly at the community level, MCHIP/Nepal with FHD is introducing calcium supplementation for pregnant women.
2. **Provide technical and financial assistance for proteinuria test pilots.** For PE/E screening and diagnosis that is not routine during ANC in Nepal and many other developing countries, MCHIP will test the proteinuria kit through a series of laboratory, clinical and community studies.
3. **Document necessary policies and programs based on the evidence of current and upcoming initiatives by NFHP II, including calcium, proteinuria and safe motherhood services in remote areas.** MCHIP will work with NFHP and other implementing agencies to identify key opportunities for integration as well as documentation of community based maternal and newborn health initiatives.

In PY3 newly-added family planning funds will be programmed based on discussions with USAID/Nepal, NFHP II and FHD on priorities. The proposed activity to address the unmet need for family planning among postpartum women by strengthening and integrating PFP and PPIUCD services in routine MNCH care is part of these discussions.

III. RESULTS FOR THE QUARTER

Based on discussion with the mission at the end of Q1, MCHIP revised and resubmitted the PY3 workplan in Q2. The workplan has not been approved and is under revision based on feedback from the mission in March 2011.

1. **Provide technical and financial assistance for the ongoing calcium supplementation pilot.**

- The MoHP has approved the formation of a technical advisory group on PE/E to advise and guide the calcium supplementation pilot in Q1. In Q2, MCHIP and NFHP II continued to look for sources and funding for calcium. Securing enough calcium for the pilot and ensuring calcium can be affordable to MoHP to be scaled up if the pilot is successful are two ongoing challenges.
- During this quarter, MCHIP and NFHP II jointly developed a calcium procurement estimate and pursued following options for calcium procurement sources:
 - UNICEF Nepal has indicated interest and availability of funds for calcium procurement but ultimately was unable to procure calcium.
 - NFHP/MCHIP has also approached Plan Nepal for calcium tablets as a part of a larger strategy that Plan Canada is supporting to source commodities including chlorhexidine and misoprostol.
 - PSI has also expressed an interest in procuring calcium if social marketing of calcium is a feasible strategy or it can contribute to positioning calcium to be more acceptable.
 - NFHP submitted concept paper to Marie Stopes International (MSI) and explore their interest in funding the calcium for the pilot.
- The mission has requested the source of calcium be identified by 30 April 2011.

2. Provide technical and financial assistance for proteinuria test pilots.

- MCHIP identified Koshi Zonal Hospital for the Step 3 for proteinuria and initiated site preparation.
- The mission has requested clarification in March of the MCHIP/Nepal funding for this activity as other USAID funding for innovations is also programmed,

3. Documentation of policies and programs on integration of community-based maternal and newborn health

- Under the leadership of the Director General (DG) of the Department of Health Services (DoHS), a MNCH Technical Advisory Group (TAG) was formed in 2010 to look into issues of integration (including CB-NCP into the existing safe-motherhood program, CB-IMCI and other relevant programs). MCHIP has participated in TAG meetings. MCHIP and NFHP II met with the DG along with NFHP II to explore possibility to work with this MNCH TAG in issue of MNCH integration.
- The development of an integration framework continued with input from various technical advisors and USAID/Nepal.
- The government has now announced its intention that prevention of PPH at homebirth using misoprostol becomes a national program.

MCHIP and NFHP II worked in Q2 to continue to build consensus with FHD and NHTC that addressing unmet need among postpartum women was an effective strategy to increase FP use. MCHIP together with NFHP II conceptualized approach for introducing PPIUCD in existing platform of PFP, participated in the consultative meeting for PPIUCD training plan and provided the Jhpiego PPIUCD Learning Resource Package to NHTC for adaptation.

IV. THE WAY FORWARD

In the coming quarter, MCHIP/Nepal will continue discussions with NFHP II, USAID/Nepal and FHD to finalize the workplan activities and re-submit the workplan. Based on PY3 workplan approval, activities will be planned for Q3.