PRIME Post | Field notes

West and Central Africa

PRIME II

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National Initiatives to Prevent Postpartum Hemorrhage Underway

Postpartum hemorrhage (PPH) is the single most common cause of maternal mortality worldwide, accounting for at least one quarter of all maternal deaths.[1] With support from USAID, PRIME II has launched a new initiative to prevent PPH. In West Africa, regional activities are underway in Benin and Mali, focusing on pilot sites at the referral hospital level. The initiative, which includes introducing or improving active management of the third stage of labor (AMTSL) and revising national guidelines related to AMTSL, necessitates a review and revision of existing practices. The challenge lies in convincing providers and stakeholders to accept AMTSL protocols, since they are not practiced in many areas, including Benin and Mali. Active management of the third stage of labor consists of interventions designed to speed the delivery of the placenta by increasing uterine contractions and to prevent PPH by averting uterine atony.[2]

Benin

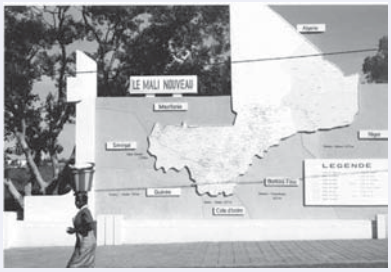
The Prevention of PPH initiative in Benin began in September 2002 with the decision to start pilot activities in three referral hospitals (*Maternité Lagune* and *Centre National Hospitalier Universitaire-Centre Universitaire de Gynécologie/Obstétrique* in Cotonou and *Centre Hospitalier Départmental* in Abomey). At *Centre Universitaire de Gynécologie/Obstétrique*, preliminary baseline data suggest that PPH accounts for 40% of all maternal deaths. With this statistic in mind, PRIME II staff conducted a one-day meeting with Ministry of Health (MOH) representatives, public- and private-sector providers, and pre- and in-service trainers. Meeting participants developed action plans for the pilot sites and developed goals for additional baseline data collection, the adaptation of relevant sections of the national reproductive health protocols, training of providers in AMTSL, and monitoring and evaluating progress.

A skills test in Benin.

Comprehensive baseline data from the pilot sites is being collected in February and March 2003, to be followed by training of providers. PRIME and the Benin MOH will work together to prepare clear guidelines for the use of uterotonics in PPH prevention.

Mali

In November 2002, PRIME II conducted work sessions with the PPH technical group in Mali. The group reached consensus on how the initiative



PRIME II's ongoing work in Mali includes collaborating with primary care providers to eliminate female genital cutting in their communities.

would contribute to the MOH's effort to reduce maternal mortality and planned implementation at service delivery sites in Bamako.

The initiative has been well-received by the MOH and Malian OB/GYNs and midwives. The technical group's continued involvement will facilitate the MOH's commitment to and ownership of the activity. USAID/Mali has also endorsed the PPH initiative and included language to that effect in its new health strategy. In addition, WHO, UNICEF, UNFPA and Save the Children are all involved in maternal and neonatal care activities in Mali; the PRIME II PPH project offers an opportunity to further collaboration with other organizations working in maternal health activities with the MOH. The PPH initiative in Mali also focuses on increasing the number of skilled attendants at births through working with pregnant women, their families and communities on birth preparedness and complication readiness plans.

Sushie Engelbrecht, Midwifery Advisor, PRIME II/ACNM, meets with Dr. Sylvia Deganus, Chief OB/GYN at Tema General Hospital in Tema, Ghana.

Ghana: Training Community Health Officers

Community Health Officers (CHOs) are the service delivery component of the Community-Based Health Planning and Services initiative, a national primary health care strategy initiated in 2000 with the purpose of providing local access to modern health services. Currently, an estimated 2,500 CHOs are in place throughout 28 districts. In recent months, PRIME has focused extensively on training CHOs in the Northern and Ashanti regions of Ghana. Members of the Materials Training Working Group facilitated the training of eight CHO supervisors and sixteen CHOs during training sessions that took place October 14-25 and October 20-November 1. As a result, CHO facilitators gained proficiency in the use of CHO training modules to orient CHOs, whose skills were refined and improved upon.

Rwanda: Third PMTCT Site Launched

A ceremony on December 17, 2002, dedicated Kigoma Health Center in the Kabgayi Health District as the third PRIME II-supported site in the national prevention of mother-to-child transmission (PMTCT) of HIV/AIDS program. The launch was the culmination of months of work, including a training session at the center in November, PRIME II's donation of necessary equipment, and a PMTCT assistant's visit to the site for five days during December.

Attendees at the ceremony included Solange Shengero, Coordinator of the National PMTCT Program at the Treatment and Research AIDS Center; Kent Brokenshire, Deputy Chief of Mission at the U.S. Embassy to Rwanda; Dr. Barbara Sow, Acting Chief of Health and Population at the USAID Mission to Rwanda; Dr. Pierre Mwiseneza, Medical Chief of Kabgayi Health District; Dr. Marcel Vekemans, Medical Advisor for Intrah/PRIME II; and Dr. Sosthène Bucyana, Senior Reproductive Health Advisor at PRIME II/Kigali.

[1] AboZahr, C. Antepartum and Postpartum Hemorrhage. In: Murray CJL, Lopez AD, editors. *Health Dimensions of Sex and Reproduction.* Boston: Harvard University Press, 1998.

[2] PATH. Preventing Postpartum Hemorrhage: Managing the Third Stage of Labor. *Outlook* 2001. Vol. 19, No. 3.

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