

MotherCare/JSI Annual Report 1998-1999

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I. Overview

The MotherCare III project is a two-year, performance-based contract, allowing time for evaluation of the field demonstration projects and synthesis and dissemination of the experience. Because the contract maximizes our ability to document the MotherCare experience, the deliverables are primarily papers (published and technical working papers, manuals, and reports) and seminars/conferences for reporting out. The deliverables are listed in **Annex I-a**, with the names of responsible staff and the expected completion date for each. MotherCare staff is involved in assisting the continued country activities—implementing evaluations, analysis of results as they become available, and synthesizing and writing reports of lessons learned. They also continue to write and speak as called upon in Washington or as MotherCare schedules workshops and seminars.

II. Country Projects

MotherCare's long-term country programs in Guatemala, Bolivia and Indonesia conducted numerous activities during this period, of which, only a few are highlighted here. A full description of the activities can be found in the MotherCare Quarterly Reports.

A. Guatemala

During the past year the MotherCare/Guatemala office continued **its monitoring and data analysis of maternal health information** in its area hospitals. Monitoring also continued for iron supplement availability and distribution in health centers and posts. Additionally, some follow-up training continued with the doctors and nurses in the area hospitals to provide reinforcement in obstetric and perinatal complication procedures. And, as an activity of the community mobilization component, MotherCare helped impart new skills in participative methodologies and prenatal counseling to facilitators of women's groups. Continuing unabated throughout the year was the progress of **community maternity establishment**, as well as the **maintenance of hospital registers**, and **distribution of IEC materials** and other reports.

The MotherCare/Guatemala office **completed its evaluation of the main project** components including IEC, anemia and training. A successful two-stage closing conference was held in August 1999. The first stage was a two-day report out and discussion of results, and the second provided a one-day open forum with many representatives from the intervention districts, including hospital administrators, a mayor, TBAs (dais), and many others. A press release chronicling the project's success is provided in **Annex I-b**. The MotherCare/Guatemala staff have now transitioned to the follow-on MNH Project where they will continue and sustain the MotherCare efforts in the six health areas where they have been working and expand their efforts into several more areas of the country.

MotherCare/Guatemala completed the following deliverables by the end of September 1999. (Numbers refer list in Annex Ia of to MotherCare III deliverables as per the contract.)

Contract Deliverable Number	Title
2	Completion Reports of Long-Term Intensive Country Programs
5	Country Workplan
15	Prototype registers/client records for maternal/newborn care at district-level

The following additional publications were completed by MotherCare/Guatemala or MotherCare/Guatemala in collaboration with another organization and disseminated during the past year:

- ▶ *Mortalidad Perinatal en Guatemala: Estudio Comunitario/Perinatal Mortality in Guatemala: Community Study*
- ▶ *Accessibility, Compliance with, and Commercial Viability of a Fortified and Enriched Cookie For Women to Prevent Anemia During Pregnancy*

B. Bolivia

The Bolivia office continued its wide **distribution of IEC materials and reports** and rebroadcast its popular radio soap opera to ensure that the people in its target area received the key maternal health messages. Also during this period, the project **produced or drafted several key manuals** including the Curriculum for Management of Obstetric and Perinatal Complications, which was adopted at two national universities. Additionally, **data collection** was conducted in the important health facilities on key maternal indicators and **training supervision** continued in order to enhance providers understanding of anemia and the use of related counseling materials.

The Bolivia office will **implement its final evaluation activities** in October/November 1999. Given the closeness to the Christmas holidays and the need to analyze, synthesize, and write-up results, the project's final conference will be held February 22-24, 2000, in La Paz. The office is scheduled to close in March 2000. Present plans for sustainability of project activities in Bolivia have met with success not only with the USAID Mission, but also with the MOH and other donors. Protocols developed within the project have already been disseminated nationally, and there are plans and funds committed to reprinting and disseminating all training, communication, and monitoring materials throughout the country.

MotherCare/Bolivia completed the following deliverables by the end of September 1999.

Contract Deliverable Number	Title
4	Country Workplan
8	Final Community Diagnosis Report
14	Prototype registers/client records for maternal/newborn care at district-level

The additional publications listed below were completed by MotherCare/Bolivia or MotherCare/Bolivia in collaboration with another organization and disseminated during the past year.

- ▶ *Manejo de Complicaciones Obstétricas y Perinatales: Currículo de Capacitación (Management of Obstetric and Perinatal Complications: Training Curriculum)*
- ▶ *Sub-Programa Nacional de eliminación de la Sifilis Materna y Congénita (National Sub-Program for the Elimination of Maternal and Congenital Syphilis)*
- ▶ *Prevención y Control de la Sifilis Materna y Congénita: Manual de Capacitación para Proveedores de Servicios de Salud en Programas de Atención a la Mujer y el Niño (Prevention and Control of Maternal and Congenital Syphilis: Training Manual for Health Care Service Providers in Maternal and Child Health Programs)*

C. Indonesia

During the past year the MotherCare/Indonesia office continued maternal **health data collection** at hospitals, health centers and from bidan di desa (village-based midwives). In addition, **monitoring of the anemia IEC material's use and acceptability** continued. The project implemented, evaluated and reported on the **marriage registration project** to counsel soon-to-be married couples on iron supplementation. In the 1998-1999 year, the **maternal and perinatal death audit guidelines were published** for dissemination to and use by the South Kalimantan MOH.

The project **conducted evaluations** on village midwives' interpersonal counseling and communication skills, obstetric and Life Saving Skills, and the peer review, continuing education and fundraising programs. Training cost-effectiveness, bidan di desa data, and overall-program effectiveness data were also collected. Analysis, synthesis and write-up of these evaluation activities are scheduled for early in the 1999-2000 fiscal year.

Of important note, a workshop with the Ministry of Health in Jakarta took place in June 1999, to bring their representatives, as well as representatives of other interested organizations, up-to-date on MotherCare's activities. The Kanwil and the staff of the provincial MOH office expressed not only their satisfaction with the project, but also have committed funds to continue the Life-Saving Skills training, the Maternal-Perinatal Audit, and the anemia program for pregnant and postpartum women and for those couples registering for marriage. The Midwifery Association also plans to continue the Peer Review/Continuing Education and fund raising programs in the three districts of the project in South Kalimantan; they have received funds for the districts for these efforts from the local government. The MotherCare/Indonesia office will hold its final meeting March 7-9, 2000, in West Java, Indonesia (see **Annex I-c** for e-mail announcement).

MotherCare/Indonesia completed the following deliverables by the end of September 1999.

Contract Deliverable Number	Title
6	Country Workplan
9	Final Community Diagnosis Report
11	Final baseline survey
16	Prototype registers/client records for maternal/newborn care at district-level
41	Effect of TBA distribution of iron tablets on tablet consumption and hemoglobin levels

The following additional publication was completed and disseminated by MotherCare/Indonesia during the past year:

- ▶ *Promoting Behavior Change Among Providers and Communities to Support Safe Motherhood: An Integrated Approach to IEC*

III. Central Projects

A. General Publications/Deliverables

In addition to the long-term country activities, MotherCare produced the following deliverables by the end of September 1999.

Deliverable Number	Title of Publication	Country
7	Community diagnosis model tool and guide for analysis (<i>Assessing Safe Motherhood in the Community: A Guide to Formative Research</i>)	US
12	Prototype curriculum for postpartum and newborn care (<i>Healthy Mother and Healthy Newborn Care</i>) for trainers	US
13	Final manual for policy-makers and trainers (<i>Life Saving Skills Manual for Policy Makers and Trainers</i>)	US
24	Long-term, less-intensive country programs Completion Report (<i>The MotherCare Egypt Project: Final Report</i>)	Egypt
25	Long-term, less-intensive country programs Completion Report	Pakistan
26	Long-term, less-intensive country programs Completion Report	Honduras
28	Long-term, less-intensive country programs Completion Report	Benin
29	Long-term, less-intensive country programs Completion Report	Guinea
30	Long-term, less-intensive country programs Completion Report	Malawi
32	Long-term, less-intensive country programs Completion Report	LAC Initiative
43	Description of training and outreach to pregnant women in an urban Muslim setting	Pakistan
44	Training, behavior change/communications intervention, and linkages with the formal health system in a community setting	Pakistan
49	Selected research studies on maternal, perinatal and neonatal health in Egypt	Egypt
51	Final report of perinatal quantitative and qualitative research	Honduras
52	<i>Perinatal Mortality In Developing Countries: A Review Of The Current Literature And Methodological Issues In Community-Based Assessment</i>	US
53	Summaries of interviews and focus groups about content and format of final MotherCare products	US
60	<i>Safe Motherhood Indicators—Lessons Learned in Measuring Progress</i>	US

Additional publications completed by MotherCare or by MotherCare in collaboration with another organization during the past year are noted below.

- ▶ *Scaling-Up MotherCare. MotherCare Matters. Vol. 8, No. 2*
- ▶ *Essential Obstetric Care and Subsets—Basic and Emergency Obstetric Care: What’s the Difference. MotherCare Policy Brief #1*
- ▶ *Safe Motherhood Indicators--Measuring Progress. MotherCare Policy Brief #2*

B. Journal Articles

Several reports on MotherCare activities have been submitted and accepted by notable public health journals.

Deliverable Number	Title	Journal
35	▶ <i>Working to Reduce Maternal Mortality (Ghana)</i>	▶ Midwifery Today
35	▶ <i>Community Education efforts Enhance Postabortion Care Program in Ghana</i>	▶ American Journal of Public Health
40	▶ <i>Efficacy and Acceptability of Two Iron Supplementation Schedules in Adolescent School girls in Lima, Peru</i>	▶ Submitted/accepted by the Journal of Nutrition
39	▶ <i>Improving Dietary Intake to Prevent Anemia in Adolescent Girls through Community Kitchens in a Peri-urban Population of Lima, Peru</i>	▶ Submitted/accepted by the Journal of Nutrition
Other	▶ <i>Clinical screening may be a cost-effective way to screen for severe anaemia</i>	▶ Food and Nutrition Bulletin
	▶ <i>Reaching Young Indonesia Women through Marriage Registries: An Innovative Approach for Anemia control</i>	▶ Submitted/accepted by the Journal of Nutrition
	▶ <i>The Potential Impact of Iron Supplementation during Adolescence on Iron Status in Pregnancy</i>	▶ Submitted/accepted by the Journal of Nutrition
	▶ <i>Supplementation with Iron and Folic Acid Enhances Growth in Adolescent Indian Girls</i>	▶ Submitted/accepted by the Journal of Nutrition
	▶ <i>Organizing Delivery Care for Safe Motherhood</i>	▶ Bulletin of the World Health Org.

C. Dissemination

The MotherCare publications are on the MotherCare Publication List, which is available on the web at www.mothercare.jsi.com. This list is distributed at major conferences and by request. From these lists, MotherCare received and **responded to over 400 requests, and sent out over 5000 documents during the past year.** The majority of these requests were from developing countries.

In addition, each issue of *MotherCare Matters* was sent to **MotherCare’s mailing list of over 3500 individuals or organizations.** This list includes members of non-governmental organizations, international donors, health care providers, and students.

D. Reproductive Health Focus—an Email Series

The Audience Survey on maternal health interventions undertaken by Measure III underscored the need for short, concise emails for USAID staff, both in Washington and in mission offices. Given these results, MotherCare will **launch a new email series, *Reproductive Health Focus***, intended for biweekly to monthly dissemination, including MotherCare's Policy Briefs, press releases, final country and project report abstracts, and project news and activities.

See **Annex I-d** for a list of proposed issues of *Reproductive Health Focus*.

E. Web Information

The MotherCare web site has been revised for the MotherCare III contract. MotherCare made changes for a number of reasons:

- ✓ Updating information
- ✓ Improved surfing capability for users
- ✓ A cleaner and more modern look
- ✓ Ability to add more information, including publications
- ✓ Improved performance for users in developing countries

The site is now in its final stages with minor updates and upcoming publications to add. There are also some minor cosmetic changes that are needed, and these should be updated shortly.

A *Web Trends* report of the of the MotherCare web site (www.mothercare.jsi.com) shows that in 1999 alone over 90,000 people visited the site with an average of 263 visits per day. Approximately half of these visits were from the U.S., 23% are international and the origin of the remaining hits is unidentifiable.

F. Presentations

MotherCare completed the majority of the presentations required of MotherCare III during this period; nevertheless MotherCare staff continue to disseminate the project's important findings at major workshops and conferences.

Deliverable Number	Presentations from 1998-1999	Total Complete
65	Six seminars for USAID Washington and cooperating staff ✓ Making motherhood safe: An integrated approach to improving maternal health care in South Kalimantan, Indonesia, 3/18/99 ✓ Health system research for anemia control in pregnancy in India, 4/22/99	2 of 6 required
66	Eight seminars for USAID mission staff, MotherCare country personnel, other donors and interested parties in MotherCare long-term countries ✓ Three held in Bolivia ✓ Three held in Guatemala Three held in Indonesia	9 of 8 required

Deliverable Number	Presentations from 1998-1999	Total Complete
67	Six presentations at major national/international meetings ✓ One in Mexico (Unicef) (1/99) ✓ One in Kenya (1/99) ✓ Four at FASEB (4/99) ✓ Two at CORE in DC (5/99) ✓ Two at JHU Perinatal meeting (5/99) ✓ Two at NCIH (6/99)	12 of 6 required
68	Three presentations or seminars for donors ✓ Two in New York (Unicef) (10/98) ✓ One in Mexico (Unicef) (1/99)	3 of 3 required

G. Technical Assistance

In addition to the rigorous project work performed by MotherCare staff, several members **conducted technical assistance to local governments, universities and other organizations** during this period.

1. Guatemala

MotherCare/Guatemala staff provided technical assistance and training to various NGOs that work with TBAs in participative methodologies and education of adults. This was financed by SHARE and UNFPA. MotherCare also collaborated with UNFPA on a tutorial training methodology for nurses, which as used in their maternal mortality training in the hospital in Quiché. Staff also aided in the elaboration of area hospitals' Annual Operating Plans to ensure the continuation of MotherCare's activities after the project's end.

2. Bolivia

MotherCare/Bolivia was an active member of the IEC/C Sub-Commission for Reproductive Health, the Sub-Program for the Elimination of Maternal and Congenital Syphilis, and the National Committee for Sexual and Reproductive Health Programs. During this period the project also provided technical assistance to the MOH's National Program for the Control of Malnutrition from Micronutrient Deficiency and the MOH's Health Reform Unit on the National Basic Health Insurance Plan. The Uruguayan government invited a member of staff to their Conference on the Development of an Activities Plan to present the Bolivian program on syphilis.

3. Indonesia

MotherCare Indonesia staff conducted technical assistance with BKKBN (Indonesian Midwives Association) for the development of the Postpartum Family Planning IEC Program for the Field Worker. A staff member presented the marriage registration activity at the Asian Conference on Early and Childhood Nutrition in Kuala Lumpur. Also, the project director, as a special committee member, helped the USAID mission develop crisis response strategies.

4. Central

MotherCare staff attended and participated in several conferences including those by the National Academy of Sciences, American Public Health Association, UNICEF in Mexico City, CORE, Federation of American Societies for Experimental Biology (FASEB) and various other technical meetings held by other Cooperating Agencies.

In June 1999, the Deputy Director, Colleen Conroy, was seconded as Technical Advisor to the Russia TASC project, WIN (Women and Infant Initiative). She coordinates all of the activities of the subcontractors (JHUCCP, URC-QAP, AVSC) and JSI consultants. During the reporting period, the project developed the three-year workplan and budget, hired Moscow staff, worked to establish JSI as a certified company in Russia, and established technical working groups in all three target areas.

Ms. Conroy also continued work under the LAC Initiative, of which MotherCare is a subcontractor of URC-QAP. She is responsible for annual and quarterly reporting, supports to the EOC component with materials and consultants, attends regular meetings with QAP and the steering committee with QAP, LAC bureau and PAHO. During the past year she provided technical assistance for the baseline and monitoring system.

IV. Results

A. Guatemala

MotherCare/Guatemala concluded its activities after 10 years of maternal and neonatal health program. Key results from the past five years are summarized below.

Coverage of Essential Obstetric Care (EOC)

- ▶ In rural departments where use of EOC facilities for delivery is reported as low as five percent, **Hospitals in project areas have witnessed increases in use rates of 50 to 77 percent.**
- ▶ **Met Need has doubled in project area hospitals** (meaning a greater proportion of women having complications seek care).
- ▶ **Equity has improved through increased use of EOC services by women with little or no education and those who are indigenous.**

Quality of Essential Obstetric Care

- ▶ **The confidence and skills of providers to perform high quality maternal and newborn care have significantly improved.** This effect of training continues more than two years after completion of the training course.
- ▶ Providers who have received training and the facility directors (both medical and nursing) report **an improved attitude toward providing care and working in a team, as well as providers' enhanced ability to recognize problems early and to intervene skillfully.**

B. Bolivia and Indonesia

While the evaluations for Bolivia and Indonesia are currently in progress, available results from these countries and other MotherCare projects are detailed below:

Information, Education and Communication

- ▶ IEC impact studies of the MotherCare/Bolivia radio soap opera measured 81 variables. Of these, 61 showed a positive association for those who listened to the soap opera and utilized health services. Ten of the 61 variables showed a **statistically significant increase in recognition of complications, intention to use services, planning for emergency, satisfaction of users with health services, and being given iron folic acid** with explanations of benefits and use.
- ▶ In Indonesia, village midwives who had interpersonal communication and counseling training demonstrated improvement in these skills and **an increased frequency of and completeness of anemia counseling**. Client exit interviews also revealed **improved/enhanced provider-client interactions and satisfaction with services**.

Quality of Care

- ▶ **Physicians, nurses and nurse auxiliaries trained by MotherCare/Bolivia demonstrated superior mean scores** for six content areas compared to untrained providers. These included skills in prenatal care, care in labor and delivery, immediate newborn care, management of postpartum hemorrhage, interpersonal communication and counseling and in anemia treatment.
- ▶ **Bidan (midwives) and Bidan di Desa trained in Life Saving Skills showed statistically significant differences in the five skills trained**, infection prevention, bimanual compression, manual removal of placenta, neonatal resuscitation and use of partograph compared to untrained Bidan and Bidan di Desa. There were also clear differences in management of complicated cases between these two groups.

Optimism in Possible Future Methods

- ▶ During this period, the results were received from the Zibuvita trial in Indonesia. This randomized, placebo-controlled study demonstrated a significant reduction of maternal puerperal sepsis (as measured by a confirmed body temperature of $>38^{\circ}\text{C}$ at least one day in the postpartum period) among pregnant women who were treated with low daily doses of vitamin A given at the beginning of the second trimester.

Annex

I-a List of MotherCare III Deliverables

I-b Guatemala Press Release

I-c MotherCare Meetings

I-d List of Upcoming *Reproductive Health Focus*

I-a List of MotherCare III Deliverables

Because the need to articulate the maternal/newborn field in a succinct fashion is paramount, especially for policy and program officials, Deliverables 17, 54, 56, 58, 59, 61, 62, 63, and 64, will be condensed into a monograph and power point presentation of *Guidelines for Programming in Safe Motherhood*. This monograph will contain not only an outline of the problems, but also evidence of the known costs and effectiveness of specific interventions, the conceptual screens used to determine which to implement, possible phasing in strategies, and the principles of successful programming.

**Table-1
Long-Term Country Programs**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
1.	Bolivia	Completion reports of long term intensive country programs	Guillermo Seoane Colleen Conroy Leslie Elder Carla Chladek	9/01/00	Not started
2.	Guatemala	Completion reports of long term intensive country programs	Elizabeth Bocaletti Colleen Conroy Leslie Elder Carla Chladek	9/01/99	Done
3.	Indonesia	Completion reports of long term intensive country programs	Endang Achadi Jeanne McDermott Leslie Elder Carla Chladek	9/01/00	Not started
4.	Bolivia	Country Workplan (annually)	Guillermo Seoane Colleen Conroy	4/01/99	Done
5.	Guatemala	Country Workplan (annually)	Elizabeth Bocaletti Colleen Conroy	4/01/99	Done
6.	Indonesia	Country Workplan (annually)	Endang Achadi Jeanne McDermott	4/01/99	Done
7.	US	Community Diagnosis Model Tool and Guide for Analysis—for programmers	Anjou Parekh	4/01/99	Done
8.	Bolivia	Final Community Diagnosis Report -- for general audience (Spanish)	Veronica Kaune Colleen Conroy	4/01/99	Done
9.	Indonesia	Final Community Diagnosis Report -- for general audience (English)	Lara Zizic Jeanne McDermott	4/01/99	Done
10.	Bolivia	Final baseline and maternal and post maternal and neonatal health survey report	Guillermo Seoane Colleen Conroy Leslie Elder	12/01/99	Deleted *
11.	Indonesia	Final baseline survey and maternal and neonatal health report—technical papers*	Jeanne McDermott Tom Marshall	3/31/00	Baseline survey-Done Post survey- In progress
12.	US	Prototype curriculum for postpartum and new born care (Healthy Mother/Healthy Newborn) for trainers	ACNM Jeanne McDermott	4/01/99	Done
13.	US	Final manual for policy-makers and trainers (Life Saving Skills Training Program Process)	Jeanne McDermott	4/01/99	Done
14.	Bolivia	Prototype registers/client records for maternal/newborn care at district level-	Guillermo Seoane Jeanne McDermott	4/01/99	Done

**Table-1
Long-Term Country Programs**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
		-for programmers	Patsy Bailey		
15.	Guatemala	Prototype registers/client records for maternal/newborn care at district level-for programmers	Elizabeth Bocaletti Patsy Bailey Jeanne McDermott	4/01/99	Done
16.	Indonesia	Prototype registers/client records for maternal/newborn care at district level-for programmers	Endang Achadi Carine Ronsmans Jeanne McDermott	4/01/99	Done
17.	US	Anemia Prevention and control package—for programmers	Leslie Elder	9/1/00	In progress
18.	Bolivia	Report of cost to municipalities of Safe Motherhood interventions-general audience	Guillermo Seoane Colleen Conroy Eva Weissman	2/01/00	In progress
19.	Bolivia	Cost effectiveness analysis of anemia interventions – technical paper ***	Eva Weissman Juan Carlos Leslie Elder	2/01/00	In progress
20.	Indonesia	Cost effectiveness studies of MotherCare interventions – technical paper ***	Endang Achadi Jeanne McDermott Julia Fox-Rushby	3/01/00	In progress
21.	Bolivia	Report on progress of safe motherhood program for publication *	Guillermo Seoane Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	3/01/00	Not started
22.	Guatemala	Report on progress of safe motherhood program for publication *	Elizabeth Bocaletti Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	3/01/00	In progress
23.	Indonesia	Report on progress of safe motherhood program for publication *	Endang Achadi Carine Ronsmans Marge Koblinsky Leslie Elder Jeanne McDermott	3/30/00	Not started
24.	Egypt	Long-term, less-intensive country programs Completion Report	Ali Mageid Colleen Conroy	4/01/99	Done
25.	Pakistan	Long-term, less-intensive country programs Completion Report	Nazo Kureshy Carla Chladek	4/01/99	Done
26.	Honduras	Long-term, less-intensive country programs Completion Report	Leslie Elder Colleen Conroy	4/01/99	Done
27.	Benin	Long-term, less-intensive country programs Completion Report	Sourou Gbangbade Colleen Conroy Jeanne McDermott	6/01/00	In progress
28.	Eritrea	Long-term, less-intensive country programs Completion Report	Nueys Kidane Colleen Conroy	4/01/99	Done
29.	Guinea	Long-term, less-intensive country programs Completion Report	CPTFAFE – Kouyate Colleen Conroy	4/01/99	Done
30.	Malawi	Long-term, less-intensive country programs Completion Report	Dorothy Namate Leslie Elder	4/01/99	Done
31.	LAC	Long-term, less-intensive country	Gonzalo Fernandez	6/01/00	In progress

Product No.	Country	Title	Responsible Staff	Date Expected	Status
	Initiative	programs Completion Report	Marco Casto Colleen Conroy		
32.	Africa Initiative	Long-term, less-intensive country programs Completion Report	Joe Taylor, Pius Okong, Ann Phoya Jeanne McDermott Colleen Conroy	4/01/99	Done
33.	US	Final Reports of results from each targeted country program -- for general audience	Marge Koblinsky Claudia Morrissey Suzanne Jessop	9/28/00	In progress

Product No.	Country	Title	Responsible Staff	Date Expected	Status
34.	Thailand	Effect of a streamlined vs. traditional approach to antenatal care (technical paper)	Khon Kaen Univ., Thailand and WHO; Piskake Lumbiganon, Jeanne McDermott	9/01/00	In progress
35.	Ghana	Feasibility of provision of postabortion care by non-physician providers – to be prepared and submitted for scientific publication	IPAS Jeanne McDermott	10/1/99	Done
36.	Uganda	Effect of mass, population-based STD treatment of pregnant women on pregnancy outcomes	Ron Grey, JHU Marge Koblinsky	6/01/00	In progress
37.	Uganda	Adolescents' perceptions and practices concerning sexuality and health seeking behavior— to be prepared and submitted for scientific publication	Pacific Institute for Women's Health Marge Koblinsky	6/01/00	In progress
38.	Indonesia	Effect of low-dose Vitamin A supplementation for pregnant women on pregnancy outcome—to be prepared and submitted for scientific publication	Gadjah Mada Univ., Indonesia; PI: Michael Dibley Leslie Elder	2/01/00	In progress
39.	Peru	Effect of educational intervention to improve dietary intake in adolescents and women with community kitchens in Lima, Peru—to be prepared and submitted for scientific publication *	Instituto de Investigacion Nutricional (IIN) Peru, Leslie Elder	10/1/99	Done
40.	Peru	Efficacy and acceptability of two iron supplementation schedules in school adolescent girls in Lima, Peru — Submitted for scientific publication ***	Instituto de Investigacion Nutricional (IIN) and JHU; PI: Leslie Elder	10/1/99	Done
41.	Indonesia	Effect of TBA distribution of iron tablets on tablet consumption and hemoglobin levels –technical paper	Project Concern Intl, MC/Washington, Leslie Elder	10/1/99	Done
42.	Pakistan	Unsafe abortion practices – to be prepared and submitted for scientific	Aga Khan Univ. (Fariyal Fikree &	6/01/00	In progress

**Table -2
Applied and Operations Research**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
		publication	Sara Jamil) Nazo Kureshy		
43.	Pakistan	Description of training and outreach to pregnant women in an urban Muslim setting on pregnancy outcome – Technical report ***	Aga Khan Univ. (Fariyal Fikree) Nazo Kureshy	10/1/99	Done
44.	Pakistan	Training, behavior change/communications intervention, and linkages with the formal health system in a community setting – Technical paper	Farid Midhet Nazo Kureshy	10/1/99	Done
45.	US	Attitudes and behaviors of women about anemia and taking iron supplements (Malawi, India, Indonesia, Bolivia, Guatemala, Honduras)—for scientific publication	Leslie Elder Rae Galloway Erin Dusch	9/01/00	In progress
46.	Bolivia	Final anemia qualitative and quantitative research study reports– for general audience	Juan Carlos Leslie Elder	3/01/00	Not started
47.	Guatemala	Final anemia qualitative and quantitative research study reports– for general audience	Elena Hurtado Leslie Elder	3/01/00	In progress
48.	Indonesia	Final anemia qualitative and quantitative research study reports– for general audience	Endang Achadi Leslie Elder	3/01/00	Not started
49.	Egypt	Selected research studies on maternal, perinatal and neonatal health in Egypt, 1995-1998 ***	Ray Langsten Colleen Conroy	9/01/00	Done
50.	Guatemala	Final report of perinatal quantitative and qualitative research-- to be prepared and submitted for scientific publication	Elizabeth Bocaletti Jeanne McDermott Patsy Bailey	4/30/00	In progress
51.	Honduras	Final report of perinatal quantitative and qualitative research-- to be prepared and submitted for scientific publication	Ada Rivera Colleen Conroy	9/30/00	Done
52.	US	Perinatal Mortality in Developing Countries: A review of the current literature and methodological issues in community-based assessment— Technical paper ***	Donna Espuet Jeanne McDermott	9/1/99	Done

**Table- 3
World-Wide Policy**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
53.	US	Summaries of interviews and focus groups about content and format of final MotherCare products for programmers and general audience	Measure III Marge Koblinsky	4/1/99	Done
54.	US	Framework for improvement of quality	Jeanne McDermott	9/28/00	In progress

**Table- 3
World-Wide Policy**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
		of care (antenatal, safe delivery, essential obstetric, postpartum, newborn care)**	Colleen Conroy		
55.	US	Lessons learned from the evaluation of in-service training. Technical paper and policy brief.	Jeanne McDermott Colleen Conroy	9/28/00	In progress
56.	US	Framework for increasing demand for services for antenatal care, safe delivery, postpartum/newborn care and treatment of complications**	Veronica Kaune Colleen Conroy	9/28/00	In progress
57.	US	Common communication messages for safe birth and the healthy women and newborn	Nazo Kureshy	2/01/00	In progress
58.	US	Framework for improving the policy environment for Safe Motherhood and reproductive health **	Colleen Conroy Marge Koblinsky	9/28/00	In progress
59.	US	Recommendations for national anemia reduction programs, with emphasis on distribution and compliance**	Leslie Elder	9/28/00	In progress
60.	US	Safe Motherhood Indicators – Lessons from the Field, <i>MotherCare Matters</i> 8.1 ***	Marge Koblinsky Jeanne McDermott Leslie Elder	9/28/00	Done
61.	US	Lessons learned document for donors, programmers **	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/28/00	In progress
62.	US	Lessons learned document for researchers **	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/28/00	In progress
63.	US	Slide/Powerpoint presentation describing the problems of maternal and neonatal mortality and morbidity and lessons learned, "best practices", and programming priorities **	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott Measure III	9/28/00	In progress
64.	US	Setting priorities for programming and identifying appropriate packages of services in Safe Motherhood and reproductive health—guidance document for programmers **	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/28/00	In progress

Table 4 Information Dissemination					
Product No.	Country	Title	Responsible Staff	Date Expected	Status
65.	US	Six seminars for USAID Washington and cooperating agency staff ¹	Suzanne Jessop Marge Koblinsky	9/28/00	In progress
66.	US	Eight seminars for USAID mission staff, MotherCare country personnel, other donors and interested parties in MotherCare long-term countries ²	Guillermo Seoane Endang Achadi Elizabeth Bocaletti Marge Koblinsky	9/28/00	Done
67.	US	Six presentation at major national/international meetings ³	Marge Koblinsky	9/28/00	Done
68.	US	Three presentations or seminars for donors ⁴	Marge Koblinsky	9/28/00	In progress
69.	US	Closing international seminar/workshop in a developing country to present USAID/MotherCare contributions to the field of maternal and neonatal health	Marge Koblinsky	9/28/00	Not started
70.	US	Regional meeting to report on MotherCare program experience	Marge Koblinsky	9/28/00	In progress
71.	US	Summary meeting in Washington DC, for USAID and partners to present research outcomes and summarize lessons learned in MotherCare programs and the state-of-the-art in Safe Motherhood	Marge Koblinsky	9/28/00	Not started
72.	US	Frameworks, communication messages, lessons learned, programming priorities document, and research findings summary sent to all USAID missions, UN multilateral agencies, major bilateral donors, major international NGO/PVO umbrellas,(cont'd in description)	Marge Koblinsky	9/28/00	In progress
73.	US	Provision of all requested materials, site visit preparation, and availability for interview for external final evaluation of MotherCare, as requested	Carla Chladek	9/28/00	In progress

**Table 5
Overall Project Deliverables**

¹ "Making motherhood safe: An integrated approach to improving maternal health care in South Kalimantan, Indonesia," 3/18/99 and "Health system research for anemia control in pregnancy in India," 4/22/99 held thus far.

² Three held in Bolivia, three held in Guatemala, and three held in Indonesia

³ One in Mexico (Unicef) (1/99), Three at APHA (11/99), Two at NCIH (6/99), and One in Kenya (1/99), Two at CORE in DC (5/99), Two at JHU Perinatal meeting, Four at FASEB (4/99)

⁴ One in Mexico (Unicef) (1/99)

Product No.	Country	Title	Responsible Staff	Date Due	Status
74.	US	Monthly Financial Reports	Margaret McGunnigle	Monthly	In progress
75.	US	Quarterly report of progress on contract tasks and performance requirements *	Marge Koblinsky	<i>Quarterly</i>	In progress
76.	US	Annual Work-plan	Marge Koblinsky	Annually	First workplan completed
77.	US	Annual report of PHN indicators and narrative results (for inclusion in G/PHN Results Reporting and Resource Request Report--R4)	Marge Koblinsky	Annually	In progress

I-b Guatemala Press Release

A Step Forward on the Pathway to Maternal and Perinatal Survival: Guatemala's MotherCare Project

Guatemala has a Maternal Mortality Ratio of 248 per 100,000 live births, the third highest in the Western Hemisphere. Yet over the past four years, Guatemala has made a major step forward on the pathway to survival for women and newborns in both its coverage and quality of Essential Obstetric Care (EOC):

Coverage of EOC

- In rural departments where use of EOC facilities for delivery is reported as low as five percent, Hospitals in project areas have witnessed increases in use rates of 50 to 77 percent.
- **Met Need has doubled in project area hospitals** (meaning a greater proportion of women having complications seek care).
- **Equity has improved through increased use of EOC services by women with little or no education and those who are indigenous.**

Quality of Essential Obstetric Care

- **The confidence and skills of providers to perform high quality maternal and newborn care have significantly improved.** This effect of training continues more than two years after completion of the training course.
- **Providers who have received training and the facility directors (both medical and nursing) report an improved attitude toward providing care and working in a team, as well as providers' enhanced ability to recognize problems early and to intervene skillfully.**

The barriers to care in Guatemala are formidable. Cultural and language differences among the Ladinos and the indigenous peoples, who make up approximately half the population, and a civil war of 36 years that ended only in 1996, have accentuated the standard obstacles to accessing formal care (e.g., costs, distance, gender preferences, and concerns for privacy). Both traditional birth attendants, who provide most of the birthing care, and rural women, primarily indigenous women, express a fear of the hospitals and speak of the shame they feel in going there. Skilled staff is not always available to respond, even when their services are sought. The lack of professional nurses, doctors and specialists in the country has meant that all staff rotate within a hospital, and only one doctor (a general surgeon) may be attending in the hospital at night. Health centers and posts, located closer to women, are not always open and not usually equipped to manage births.

First Lady Hillary Rodham Clinton put her finger on many of these issues in her November 1998 visit to the MotherCare/Guatemala project: "The fact that the Guatemala peace accords set a goal to reduce maternal and infant mortality rates by 50 percent over the next five years is a real testament to the understanding of the leaders who devised the peace accords. ... it is one thing to end armed combat and persuade combatants to put down their weapons, but it is an entirely different thing to make peace meaningful in the lives of people. And to a family, the loss of a member through combat or the loss of a mother to unsafe delivery is the same kind of loss."

"You are not only improving the health of women and children, but you are showing a sensitivity to your patients, ensuring that the doctors, nurses and midwives (TBAs) who care for them can speak to them in their own language. By showing sensitivity to their customs and understandings, you are also building trust between different communities. And the most important element of the success of the peace accords, I believe, is the development of trust."

In this climate of fear and suspicion, the MotherCare Project, directed by Dr. Elizabeth Bocaletti, aimed to bring the communities and health facilities together to save the lives of women and newborns. Recognition of life-threatening complications and their danger signs and where to go for help were emphasized during TBA training, as well as broadcast by radio to the communities. They also formed the basis for counseling during prenatal care, and were a major focus in the discussions with women's groups. Tutorial training for doctors, nurses and nurse auxiliaries strengthened their counseling and clinical skills. Monthly visits by a specialist provided the trainees with continued opportunity to sustain these skills. And sensitizing clinical and non-clinical hospital staff to the local birthing

traditions began to shift the facility balance toward a more “woman-friendly” hospital approach. Community maternities, set up by the community and staffed by rotating physicians or auxiliary nurses, began the process of demystifying traditional birthing practices for the medical staff and acquainting families with formal health services.

This \$1.3 million MotherCare/USAID effort, in support of the Guatemala Ministry of Health, was augmented with funding from the European Union. Together nearly a third of the country has been reached by this community-based approach to reach women and newborns with essential obstetric services. The next steps are to sustain current activities and expand them across of the country—efforts that rank high on the agenda of the Ministry of Health in Guatemala.

More information is available from Mary Ellen Stanton, USAID, or from MotherCare, via the website: www.jsi.com/intl/mothercare, via email to Marge Koblinsky (mothercare_project@jsi.com).

I-cMotherCare Meetings Announcement

 **MotherCare™**
GRAND FINALE EVENTS 2000

**End of Project Conference
MotherCare/Bolivia
Radisson Hotel, La Paz, Bolivia
February 22-24, 2000**

The Technical Session, February 22nd-23rd, will cover: quality of maternal and neonatal health services

- behavior change—families and providers
- iron supplementation through social marketing
- elimination of maternal and congenital syphilis
- data for decision-making
- Information, education, communication, and counseling (IEC/C)
- costing of the mother and baby package
- Safe Motherhood policy promotion

The Summary Session, February 24th, will summarize lessons learned, celebrate the many who have contributed to the Safe Motherhood effort and look toward the future with those working on a Safer Motherhood. The First Lady of Bolivia will open this session.

***End of Project Conference
MotherCare/Indonesia
Nuvus Hotel, Cipanas, West Java, Indonesia
March 7-9, 2000***

The Technical Session, March 7-8, will focus on the major interventions, results, and follow up of the MotherCare activities (by MOH/South Kalimantan). There will be a discussion of lessons learned from the MotherCare activities, then possible modification, improvement, adoption, or expansion of the activities that will be useful to MOH/Donors.

The Summary Session, March 9, will summarize lessons learned through a discussion with the MOH, donors, and interested parties.

***MotherCare Workshop I
Improving Provider Performance: The Skilled Birth Attendant
May 2-4, 2000
George Washington University, Hillel Center
2300 H Street, NW
Washington, DC 20037
202-994-5090***

The goal of the meeting is to share data and lessons learned from the evaluations of the in-service training implemented in Guatemala, Bolivia, and Indonesia by MotherCare, plus results from evaluations of the work of others working with midwives, obstetricians, nurses, doctors, and other cadre in developing countries.

MotherCare Workshop II
Changing Behaviors: What Have We Learned?
June 5-7, 2000
Hilton Washington Embassy Row
2015 Massachusetts Avenue, NW
Washington, DC 20036
202-265-1600

The goal of the meeting is to bridge the gaps encountered in the area of behavior change and communications during MotherCare's ten years of work by sharing lessons learned from several areas of the health field, including Safe Motherhood, ARI, HIV/AIDS, and Family Planning.

MotherCare Finale
September 11-12, 2000
Hilton Washington Embassy Row
2015 Massachusetts Avenue, NW
Washington, DC 20036
202-265-1600

Watch for more details

For more information on the MotherCare meetings or workshops, please visit our website at www.mothercare.jsi.com, or email us at mothercare_meetings@jsi.com.

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I-d List of Upcoming Issues of Reproductive Health Focus

Reproductive Health Focus	Description/Title
Issue 1:	Guatemala Press Release and <i>MotherCare Policy Brief 1</i>
Issue 2:	<i>Training Non-Physician Provider to Improve Post-Abortion Care</i>
Issue 3:	<i>Access to Reproductive Health Services—Participatory Research with Ugandan Adolescents</i>
Issue 4	Meetings Invitation
Issue 5	<i>PCI Final Report</i>
Issue 6	<i>Zambia Final Report</i>
Issue 7	Press Release from Bolivia Meeting
Issue 8	<i>Policy Brief #2 and Meeting Update (Provider Performance)</i>