# BASICS Afghanistan Quarterly Report
# FY09 Quarter 2: January 1, 2009 – March 31, 2009

Basic Support for Institutionalizing Child Survival Afghanistan (BASICS)

April 2009

Keywords: Child survival, Fragile states, Afghanistan

This report was made possible through support provided by the US Agency for International Development, under the terms of Contract Number GHA-I-00-04-00002-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the US Agency for International Development.

Basic Support for Institutionalizing Child Survival Afghanistan (BASICS)
Management Sciences for Health
784 Memorial Drive
Cambridge, MA 02139
Telephone: (617) 250-9500
www.msh.org

# USAID/BASICS QUARTERLY REPORT AFGHANISTAN

(FY09 Quarter 2: January 1, 2009 – March 31, 2009)

**BASICS PRIMARY STRATEGIES OF WORK PLAN**

- Revise and develop child survival and health-focused policies and strategies
- Improve child health care at the community level
- Improve child health care at the BPHS facility level
- Improve child health care at the EPHS hospital level
- Strengthen cross-cutting health system components to improve child health care

**BASICS TECHNICAL AREAS OF WORK**

- Newborn health
- IMCI
- Community case management (C-IMCI)
- Nutrition: Growth Monitoring and Infant and Young Child Feeding
- Pediatric hospital care improvement
- Behavior change communication
- Systems strengthening

## January to March 2009

**KEY ACHIEVEMENTS AND ACCOMPLISHMENTS (January – March 2008)**

**I. Policy and Guidelines**

- National Child and Adolescent Health Policy finalized
- CGHN Presentation of CAH Policy
- National Child and Adolescent Health Strategy written
- National Child Survival Committee Terms of Reference developed
- National Infant and Young Child Feeding (IYCF) strategic plan developed and adopted
- Consensus Workshop on Improved Diarrheal Case Management: Reviewed zinc supplementation and low-osmalarity ORS and the zinc introduction plan presented at workshop.

**II. Improve Child Health at the Community Level**

- Two batches of C-IMCI TOT technically supported and job aids provided
- C-IMCI Trainers Manual completed and printed
- C-IMCI Job Aids for CHWs field tested, completed and being printed. BASICS providing first 8,000 copies for MOPH HSS (GAVI) Program
- Growth Monitoring Promotion (GMP) counseling cards and weighing charts field tested twice
- Prepared TOT for NGOs in GMP
- NGOs at five demonstration sites initiate work
  - Bamyan, Shafolady District AADA
  - Takhar, Farkhar District CAF
  - Herat, Ghorian District CHA
  - Jawzjan, Qarqin District MOVE
  - Kabul, Farza District STEP

- NGOs conducted base-line survey for five demonstration sites—5% re-survey to check accuracy of data

**III. Improve child health at BPHS facility level**

- Facility-based IMCI refinement and updating being done
- Reviewing appropriate elements of basics essential newborn care to be included in BHCs and CHCs

**IV. Improve Child Health at EPHS facility level**

- Pediatric Hospital Improvement Initiative continuing at 6 provincial hospitals:
  - Bamyan
  - Takhar
  - Balkh
  - Herat
  - Paktia
  - Nangahar
- Monthly reports received
- Visits to 3 of the hospitals by BASICS

**V. Strengthen cross-cutting health system components to improve child health care**

- Assessment of Referral of Very Ill Children survey questions refined and finalized
- Assessment data coming from household survey of NGOs in 5 districts
- Child survival indicators being discussed with M&E unit of MOPH
- Provincial Child Survival Committees establishment included in National Child Survival Committee TOR