BASICS Afghanistan Quarterly and Annual Report
FY10 Quarter 4: July 1, 2010 – September 30, 2010

Basic Support for Institutionalizing Child Survival Afghanistan (BASICS)

October 2010

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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

(FY10 Quarter 4: July – September 2010)

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

- Essential Maternal and Newborn health
- Community case management (C-IMCI)
- Nutrition: Growth Monitoring and Promotion and Infant and Young Child Feeding
- Pediatric hospital care improvement
- Behavior change communication
- Policy foundations for sound child survival promotion
- National Maternal and Child Survival Committee

KEY ACHIEVEMENTS AND ACCOMPLISHMENTS (July – September 2010)

I. Policy and Guidelines

- Costing of financing gaps for child survival implementation plan for 2010-2013 completed
- Agenda established for 2nd National Maternal and Child Survival
  - Implementation Plan, Costing and Financing Gaps
  - Child Survival Scorecard proposed
  - TOR for Provincial Maternal and Child Survival Committees Reviewed
- Preparations made for meeting—organized, presentations developed, speech written

II. Improve Child Health at the Community Level

<u>Integrated child survival package</u>

- ToTs completed for first module of Community-based IMCI (diarrhea) and Community-Growth Monitoring and Promotion (C-GMP)
  - C-GMP : 100 and C-IMCI 100 (100% of planned amount)
- Training of CHWs and CHW Supervisors (CHS) in expansion sites
  - C-GMP : Plan 879, Actual: 692 (79%)
  - C-IMCI: Plan 616, Actual: 414 (67%)
- Conducted supervisory visits to district-level training sessions
- Distribution of training materials, counseling tools and Salter scales
- Quarterly review conducted with NGOs to improve the ICSP delivery (field-level mini-workshops in 5 demonstration districts & national review workshop)
- Worked to include child survival indicators in routine HMIS reporting
- Initiated design of impact study to evaluate ICSP

EPI Micro-planning

- Initiated development of (1) EPI Micro-planning field guide and (2) EPI Micro-planning training package—drafts initiated and under review
- EPI Task Force formed working group develop materials , follow implementation and evaluate micro-planning impact

III. Improve Child Health at BPHS facility level

Community-based—IMCI

- Developing alternative training approaches for facility-based IMCI training based on documented results of IMCI short-course (7 days) compared to standard IMCI course (11 days) assessment
    - Observations points: Data collection completed for 6 weeks and 3 months observations—data collection of final observation at 6 months underway
    - Preliminary results indicate short-course IMCI is at least as effective as standard IMCI training program

IV. Improve Child Health at EPHS facility level

Pediatric Hospital Improvement Initiative

- Field visit to Takhar Provincial Hospital:
    - PHI Team formed at hospital
    - Self assessment conducted and action plan revised
    - Initiated collecting of main PHI/ETAT indicators:
        - deaths within 24 of admission
        - neo-natal deaths (0-28 days)

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

Behavior Change Communication

- Field research completed
- Drafting of report started

VI. Major Achievements July to September 2010

- Successful scale-up of Integrated Child Survival Package by BASICS to 23 additional districts (416% increase in children covered)
- Three BASICS Success Stories developed for USAID—GMP, C-IMCI (diarrhea), and newborn care (warmth)
- BASICS Success Story posted on USAID web-site
- Costing of National Child & Adolescent Health Plan implementation plan and identifying financial gaps
- EPI micro-planning initiated early
- Revised CD with all child health policies, strategies and BASICS learning packages
- One year extension of BASICS/Afghanistan to Sept 2011

VII. Challenges Going Forward (October –December 2010)

- Establishing Provincial Maternal and Child Survival Committees
- Accelerating EPI micro-planning introduction

VIII. Key Project Activities Planned for the Next Quarter (October—December 2010)

Strategy 1 (National and Provincial Committees):

- ✓ Conducting second meeting of National Maternal and Child Survival Committee
- ✓ Support MOPH in establishment of first Provincial Maternal and Child Survival Committee

Strategy 2 (Expansion of Integrated Child Survival Package)

- ✓ Increased field visits by BASISC staff in support of scale-up of ICSP to 28 districts
- ✓ Conduct TOT second module on pneumonia and BCC for C-GMP

Strategy 3 (C-IMCI short course alternative)

- ✓ Complete data collection and start evaluation of the IMCI short-course compared to standard IMCI training course

Strategy 4 (EPI micro-planning)

- ✓ Finalize EPI micro-planning guidelines and traingi package and translate to Dari and Pushtun
- ✓ Initiate development of 5 BCC messages for newborn care and child health based on BASICS formative research

Strategy 5 (PHI)

- ✓ Field visits to Bamyan and Takhar Provincial Hospitals in support of re-starting PHI
- ✓ Malawi PHI Study Tour

Strategy 6 (BCC messages)

- ✓ Complete BASICS BCC formative research report
- ✓ Initiate development of 5 BCC messages for newborn care and child health based on BASICS formative research