

Haiti Improving maternal health through primary health care

In Haiti, efforts to strengthen the health system has seen communities, local health authorities and the national government work hand-in-hand to improve care for pregnant women and babies. As a result, more pregnant women deliver safely at the hospital, saving the lives of mothers and babies. It is part of a national community health strategy, which strengthens access to universal health and universal health coverage.

Haiti is prone to natural disasters, such as earthquakes and hurricanes and has become one of the poorest countries in the world with 72% of the population living below the poverty line. The country is still not fully recovered from a catastrophic earthquake, which occurred near the capital, Port-au-Prince, in 2010. The health system is not strong enough to meet the health needs of Haiti's population. The country has only 25 physicians and 11 nurses per 100,000 population and only 39% of births occur at health facilities. Few people living in rural areas have access to primary health care services.

To address the challenges of meeting people's health needs in these circumstances, Haiti is implementing a community health model that emphasizes maternal, neonatal and child health. This model, currently being implemented in several communities, consists of three elements.

- An integrated network of health services with coordination and referrals
- A community health committee for intersectoral collaboration and social participation
- A Family Health Team of one doctor, two nurses, four nursing assistants and 60 community health workers, to ensure coverage of services for 1000 people.

This model was applied initially in the community of Carrefour, located near the capital Port au Prince, during 2011-2015 just after the earthquake had occurred. The results of the model were very promising with an increase of vaccination coverage among children under one year, an increase in use of modern family planning methods and growing numbers of institutionalized deliveries. The Ministry of Ministry of Public Health and Population (MSPP) decided to expand the model to other communities.





Nurse performing physical examination on pregnant woman at Asile Hospital. Photo: PAHO/WHO Haiti.

Saving mothers and babies in Nippes

Nippes is one of ten geographical departments in Haiti. It has three district health systems with a rural population of nearly 400 000 people in ten communities. Maternal mortality is very high in Nippes and the MSPP has focused its efforts on improving maternal health services by collaborating with PAHO/WHO and the Government of Canada's Department of Global Affairs Canada (GAC). This is part of a project called Integrated Health Systems for Latin America and the Caribbean (IHSLAC) implemented in 11 countries.

To support maternal health services at community level, a range of activities took place at different levels of the health system. At the national level the MSPP developed new guidelines and protocols for managing obstetric complications and guidelines for perinatal care. At the subnational level, the Nippes Health Department strengthened its governance, including surveillance and information management and supervision. The Department took dedicated ownership over the interventions, ultimately providing the enabling environment needed to make critical changes in health institutions.

“ We had many interventions, training of health workers, institutional strengthening and collaboration with the communities.” said Marie-Karline Lamour, coordinator Reproductive and Family Health programme at the Health department of the Nippes.

In Nippes itself, the Department implemented the national training tool for Emergency Obstetric and Neo-natal Care services, which integrated respectful care from the perspective of women's needs and rights. All members of the family health team, including nearly 200 community health workers, received training in the general principles of primary health care approaches, specifically around maternal health care. Community health committees were engaged in the transformation



This project was something we were waiting for, not only is the office of the deputy majors happy, but the entire community. People come not only from our community to seek care, but also from different municipalities. I hope it becomes a legacy.

Gerardin Martinor, Deputy mayor of Asile

towards a primary health care approach, and the collaboration between traditional birth attendants, Voodoo priests, community members and formal health staff has improved as a result.

“ On Saturdays they [the health staff] held meetings with us in the hospital. We talked about pregnancies and deliveries. If now a woman has a problem, I go with her to the hospital.” Female TBA

“ I go to all meetings. The only way for me to miss a meeting is to be not invited. On the meetings we discuss the way a delivery takes place, how to care for the woman and the baby if it happens on the way to the hospital.” Male TBA

Training in mother and child comprehensive health care was delivered to 185 community health workers and 12 supervisor nurses. The community health workers also received appropriate materials in the local language, Kreol, which provide practical guidelines and strengthen their competencies in maternal and child health.

Following the development of the national guideline for breastfeeding, 37 health workers from government and civil society received breastfeeding training.

Over 100 leaders and representatives from different sectors - education, water and sanitation, environment, housing, agriculture, labor, religious organizations, traditional birth practitioners, voodoo priests and civil society representatives - were trained in mother and child health, health institutions networking and other health priorities. This also strengthened collaboration between local government, communities and civil society organizations. All this contributed to strengthening the Haiti Community Health Care Model that is part of the PAHO/WHO primary health care approach for universal health.

Data from 2018 to 2019 shows that in one year, the number of pregnant women with at least four prenatal visits to Asile Community Referral Hospital increased by nearly 32%. In addition, institutionalized deliveries have increased from 355 childbirths in the whole of 2018 to 463 deliveries in seven months of 2019 (January to July). No maternal deaths were registered.

Mother and child at Asile Hospital. Photo: PAHO/WHO Haiti.



Improving Asile hospital

As part of the project, Asile Community Referral Community Hospital was rehabilitated to adequately care for the increasing numbers of mothers and newborns who use its services and to provide better care with respect to women's dignity.

Unfortunately, despite its importance for the community, the maternity ward used to be a small space that contained both labour and post-partum patients' beds next to the delivery room without any separating wall. WHO recommends that all women and newborns have privacy around the time of labour and childbirth, and that their confidentiality and dignity is respected.

However, at Asile Hospital, the delivery room had space for only two beds and some women were forced to deliver in the labour room. Therefore, women in labour could not benefit from full privacy and dignified care, and post-partum and post-operative patients could not get proper rest before returning home.

The hospital's infrastructure also posed a challenge, as the power generator did not work 24 hours a day, and at night the electricity was cut off throughout the hospital. One midwife said that they often have to deliver in the dark with a cellphone light because there was no power.

The department health director and Asile's providers decided to move the maternity ward to another location in the hospital where deliveries could be conducted in privacy, dignity and safety. The ward was improved with construction work to the floor, walls, doors and windows with delivery beds and storage for patients. Importantly, the maternity ward now has a solar panel system that provides electricity at all times when the generator is turned off.

“I am so happy with the changes. We now have better equipment to work with and electricity in the night through the solar panels. In the past we used our cellphone light for deliveries in the dark,” said Assistant director Asile Community Hospital.

The training of the family health teams was a key factor, especially that of the CHWs. Through home visits and maintaining the linkages with TBAs and other traditional healers the CHWs contribute to tracking of women from the time of pregnancy, contribute to education and motivation, and to referral to the health facilities,

PAHO/WHO community health trainer

Progress for primary health care

For Haiti, as a fragile state, these steps to strengthen the health system based on PHC approaches are very valuable. This initiative has shown that comprehensive approaches including strengthening district health governance, providing training to health teams, improving infrastructure and building partnerships with key people in the communities creates strong community health networks. This increases the acceptance and utilization of services and can improve maternal-perinatal outcomes. With this level of success in hand, Haiti continues to implement the same strategies in other departments and communities with support of PAHO/WHO.



HAITI

FACT

Haiti is implementing a community health model that emphasizes maternal, neonatal and child health. The approach strengthens district health governance, trains local health teams, improves infrastructure and builds key partnerships in the community.

WHY IT MATTERS

Haiti has only 25 physicians and 11 nurses per 100,000 population and only 39% of births occur at health facilities. Creating strong community health networks increases the acceptance and use of services and can save the lives of mothers and babies.

EXPECTED IMPACT

Initial results are very promising with an increase of vaccination coverage among children under one year, an increase in the use of modern family planning methods and growing numbers of institutionalized deliveries.

IN PRACTICE

The Haiti Ministry of Public Health and Population is expanding this approach to in other departments and communities with support from PAHO/WHO.