



SENEGAL

INTEGRATED COMMUNITY HEALTH PACKAGE FOR MATERNAL AND NEWBORN CARE IN REMOTE AREAS

CHALLENGE
Pregnancy and childbirth can be a difficult time for many women and newborns in Kolda, Senegal, which has high maternal and newborn mortality and low access to essential healthcare services, such as delivery with a skilled birth attendant. The region's remote location adds to the challenge of pregnant women accessing quality health care.

APPROACH

A PACKAGE OF CARE FOR PREGNANT WOMEN & THEIR NEWBORNS WAS DEVELOPED THROUGH A PILOT PROJECT & IMPLEMENTATION RESEARCH

STRENGTHEN CARE DELIVERY

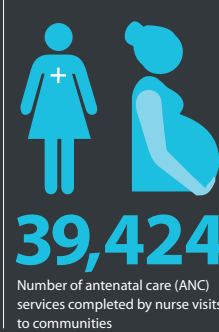
TRAINING



HOME VISITS



NURSES OUTREACH INTO COMMUNITIES



IMPROVING COMMUNITY FACILITIES



INCREASE ACCESS TO CARE

COMMUNITY MOBILIZATION



COMMUNITY WATCH GROUPS



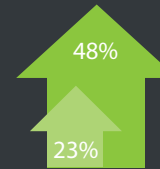
BEHAVIOUR CHANGE ACTIONS



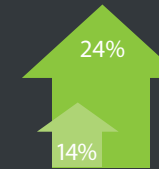
FINDINGS

WITH BETTER HEALTH SERVICES, MORE PREGNANT WOMEN SOUGHT HEALTH AND NUTRITION CARE

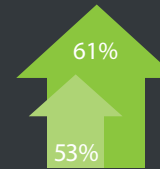
INCREASE IN ANTENATAL CARE (BASELINE TO ENDLINE)



Pregnant women attending antenatal care (ANC) in first trimester: increase from 23% up to 48%

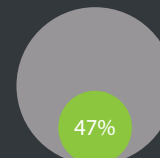


Pregnant women attending four ANC visits: increase from 14% to 24%

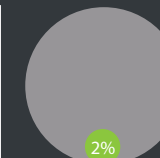


Pregnant women taking iron-folic acid supplements for ≥ 90 days: increase from 53% to 61%

INCREASE IN BIRTH CARE (BASELINE TO ENDLINE)

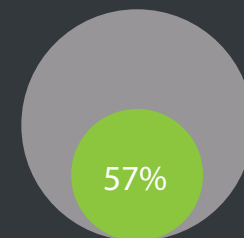


Delivery at a health facility: increase from 47% to 59%



Women receiving misoprostol at the health hut: increase from 2% to 44%

INCREASE IN POSTNATAL CARE (BASELINE TO ENDLINE)



Women receiving postnatal care with a skilled attendant: increase from 57% to 78%

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