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Postpartum Hemorrhage Prevention Through Community Health Workers to Reduce Maternal Mortality in Rural Area of Afghanistan

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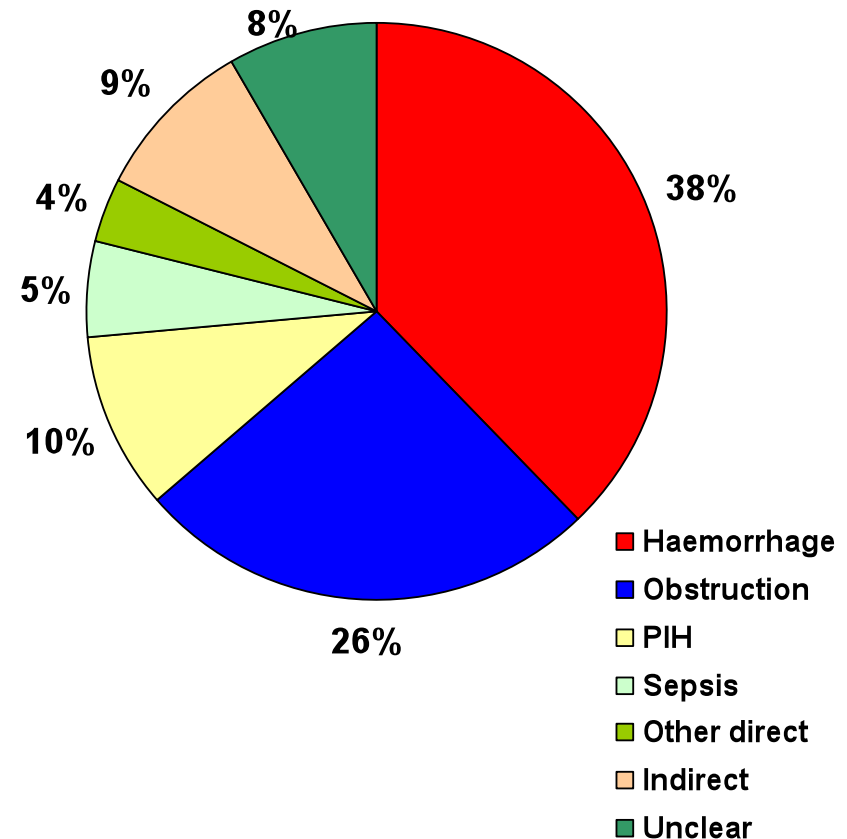
Presentation Outline

- Background
- Project Goal
- Methodology
- Achievements
- Conclusion



Background

- Afghanistan has one of the highest maternal mortality ratios in the world estimated to be about 1600 per 100,000 live births.
- Estimated 26,000 women dying from pregnancy related causes per year (1 woman dying every 27 minutes)
- Postpartum hemorrhage is responsible for about 30% of the maternal deaths or approximately 7600 women per year





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Project Goal

The overall goal of the Expansion of the Prevention of PPH Project is to reduce the incidence of PPH and reduce the contribution of PPH to maternal mortality in the target areas of Afghanistan.



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Methodology

The intervention is focused at the community level; however, complimentary activities at facility and national levels are also conducted as part of a holistic approach to PPH prevention.

Community Level:

- A trained network of community health workers (CHWs) used a community mapping to identify pregnant women in selected areas.
- Women who agreed to participate were interviewed.
- The CHW then provided one-on-one counseling to pregnant women and any available household members as her support persons.
- The counseling was taking place during home visits by CHWs.
- At conclusion of the third trimester counseling visit, women who agreed to accept the medication were given three tablets of 200mcg Misoprostol.



Achievements

- The project is implemented in 20 districts in five provinces
- 6408 pregnant women have been registered.
- 6406 women received education on birth preparedness, complication readiness and correct use of misoprostol.
- Misoprostol packages were distributed to 4190 of the registered women at eight month of the pregnancy.
- 3068 of registered women delivered at home or health facility.
- 1997 of women who delivered at home (with or without SBA's assistance) correctly used misoprostol.
- No pregnant women took misoprostol at the wrong time (before delivery of baby).
- No major drug related adverse



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Conclusion

Community level distribution of Misoprostol is the only strategy for prevention of postpartum haemorrhage in rural and remote areas where the accessibility to facility based delivery services by skilled birth attendants is limited.





