



A family looks at their newborn after support through a healthy pregnancy journey. Kuboresha Afya Mitaani is focused on the health of women and children under one. Photo: Jacaranda Health

KENYA

KUBORESHA AFYA MITAANI

The Kuboresha Afya Mitaani: Urban Maternal, Newborn and Child Health (MNCH) program integrates typically siloed actors in the quality-of-care space to create a 'quality ecosystem' in the informal settlements of Mathare and Kawangware. This includes women, families, communities, facilities and their providers, health regulators, and actors in sanitation and air pollution. This project is being implemented over three years with funding from USAID's Health Research Program. The target populations are pregnant women, postpartum women, children up to the age of one, and associated households and communities living in informal settlements.

The program is expected to affect the lives of 60,000 mothers and children. It will work with both public and private facilities that provide MNCH services in the target areas, collaborating with the Nairobi Metropolitan Services and focusing on the care-seeking period that extends from pregnancy until the baby's first birthday. This period features the highest risk of sickness and death for mothers and infants. Global data shows that 88 percent of maternal deaths occur in the period between pregnancy and 42 days after delivery. Additionally, most under-5 deaths in Kenya occur in the first year of life, making it a critical period for health implementation strategies and promotion of vaccine coverage.

OUR WORK

The 'quality ecosystem' created by the program will include an iterative learning agenda along with activities such as community engagement; empowerment of individuals through SMS messages; improved quality of care in facilities through health provider mentorship and quality improvement; and a local policy environment that incentivizes and regulates quality of care in the health system (through cooperation with the Nairobi Metropolitan Services and joint health inspection teams). This

will culminate in multi-stakeholder forums to address challenges and increase demand for better quality care. The program will also look at some specific environmental challenges (including access to sanitation and exposure to air pollution) and create avenues for solutions and advocacy of those solutions.

As part of efforts to strengthen self-reliance, the program has partnered with the Nairobi Metropolitan Services and is implementing low-cost tools that can be absorbed in county health budgets. For example, the emergency obstetric and newborn care mentor training model designed by Jacaranda Health is a lower-cost model than competitors and has fed into the Ministry of Health guidelines on mentorship. Nairobi Metropolitan Services members are part of the project steering committee and have been involved in the co-creation and review of Kuboresha Afya Mitaani's activities.

Despite the COVID-19 prevention measures that interrupted certain research and field-based activities, as well as in-person forums and in-facility services, KAM effectively implemented mitigation strategies and innovations to ensure continued progress on the project result areas. This involved exploring virtual variations on some activities, including phone interviews with clients and key stakeholders.

BUDGET: US \$1,076,664

DURATION: 2019-2022

ACTIVITY LOCATIONS

Kawangware and Mathare in Nairobi County

IMPLEMENTING PARTNER

Jacaranda Health

KEY PARTNERS

The Population Council, Nairobi Metropolitan Services, Sanergy, Berkeley Air Monitoring Group

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ACHIEVEMENTS

In 2021, Kuboresha Afya Mitaani has achieved the following results:

- Conducted phone interviews with pregnant women and mothers in the two informal settlements, virtual MSF's at both the County and Sub County level.
- Introduced a new virtual learning assistant for health providers to refresh their skills remotely during lockdowns.
- Focused on a robust evidence base by drawing on qualitative data from other sources where in-person research was limited, including small-scale community consultations within facilities while observing all COVID-19 protocols.
- Facilities reported significant benefits from monthly Quality of Care Scorecards, which through PROMPTS - collect direct feedback from mothers on the quality of care they receive in facilities.
- Concluded the formative baseline research, providing a more understanding of the contextual factors.
- Conducted the first cycle of data collection within an updated Monitoring and Evaluation framework, yielding new insights to feed into Year 3 activities.