HAITI

PAHO/WHO Technical Cooperation in the aftermath of the earthquake 2010-2011





Free Obstetric Care Project (SOG)[1]

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Thanks to the support of CIDA/CAN and the Ministry of Health and Population of Haiti (MSPP) implementation of this project started at the beginning of 2008. The main purpose is to offer low-income pregnant women free access to health services. SOG results will be used to generate evidence that will ultimately influence the policy decision to move toward a social protection in health that will first cover pregnant women and neonates and, as resources permit, gradually add successive interventions of proven effectiveness to improve Haiti's health system; an example of such interventions is the elimination of neonatal tetanus and congenital syphilis.

The project involves 45 health institutions nation wide and preliminary results show that there has been:

- a rise in institutional deliveries (+59%) -taking into account the baseline for 69% of the institutions participating in the project-.
- a better response to obstetric emergencies -C-sections average rate 10% within SOG institutions, compared to 3 % national average rate mentioned in the EMMUS IV)
- a reduction of maternal deaths -51 cases over 35 847 deliveries-, maternal mortality rate 150/100000 live births, almost 4 times lower than the national rate.

Activities carried out:

PAHO/WHO participated in the Reproductive Health Sub Cluster and in the preparation of the Reactivation of Basic Health Care Services chapter for the UN Flash Appeal (launched in January 2010).

PROMESS planned and distributed 14 obstetrical kits for Basic Obstetric and Neonatal Emergency Care (SONUB - Soins Obstetricaux et Neonatals d'Urgence de Base) and 27 obstetrical kits for Complete Obstetric and Neonatal Emergency Care (SONUC -Soins Obstetricaux et Neonatals d' Urgence Complets) (medicines and laboratory supplies). Humanitarian Diesel was distributed to institutions for electricity.

Evaluation visits to main maternities in the Port au Prince Metropolitan area were carried out (University Hospital -HUEH-, Isaei Jeanty Maternity, Hopital Universitaire La Paix (HULP), Carrefour and Choscal). Medicines and supplies, diesel and equipment were provided so that these institutions can function.

There were also evaluation visits to main maternities at the departmental hospital near the Metropolitan area which were receiving more and more patients (Nippes, Miragoane, Artibonite).

PAHO/WHO, UNFPA, JHPIEGO (an international non-profit health organization affiliated with Johns Hopkins University) and Gynecologie sans Frontieres (GSF) provided technical cooperation to the Maternity at the HUEH so that it can restart operations.

A revision of the SOG project and implementation of its activities were carried out, in order to strengthen activities to better face new demands and needs. Elaboration of a new Annual Work Plan for 2010 was carried out especially for the component on Free Obstetric Care within Reproductive Health. This was done in coordination with UNFPA and UNICEF. In agreement with the MSPP Direction of Family Health (DSF), a simplified transitional mechanism was established to allow the continuation of the project with the institutions affected by the earthquake.

PAHO/WHO with partners involved mobilized resources (Emergency Response Relief Fund/OCHA) so that the maternities involved in the project which were affected by the earthquake could restart their activities and improve of access to medicines for the obstetric emergencies care.

New institutions are being selected for the SOG and new areas of interventions are being integrated to SOG such as neonatal health (a report on neonatal health was carried out and a work plan established with the support of the World Bank (WB) for capacity building in this domain); malnutrition, anemia and provision of micronutrients (iron and folic acid), HIV and syphilis for pregnant women an prevention of HIV and syphilis vertical transmission.

Vaccination anti tetanus for pregnant women and BCG for new born babies are being provided, to achieve a 100% goal, as well as essential medicines.

Family planning and sensitization on reproductive rights is being carried out.

[1] Soins Obstétricaux Gratuits (french abbreviation)

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Next steps:

Gather and compile all the information related to the number of institutions involved in SOG, delivery rooms in hospital and health centers, equipment and existing beds.

New real cost study of prenatal care and childbearing to adapt the provision of services in the institutions participating in the project.

Continue negotiations so that SOG turns into a national program under the Direction of Family Health at the MSPP (known as SOG+).

Get consensus for the establishment of a social protection scheme for maternal and infant health.