

Maternal and Child Health (MCH)

For any child to achieve his or her full potential, the foundational building blocks of good health and nutrition must be established even prior to birth. Approximately 8.8 million children under age 5 and 500,000 women die each year from preventable diseases and childbirth-related causes. Millions more suffer marginalized health conditions that leave them vulnerable to recurring diseases and lock them into a poverty cycle.

According to the World Health Organisation (WHO) and UNICEF, the main causes of death for children from one month to five years old are pneumonia (19 per cent), diarrhoea (17 per cent), malaria (8 per cent), injuries (3 per cent), measles (4 per cent), and HIV (3 per cent). Undernutrition is a significant underlying factor in 35 per cent of child deaths and AIDS is having a significant impact on maternal mortality as well as making large numbers of children increasingly vulnerable to hunger, disease, abuse and neglect.

World Vision (WV) works predominantly in the communities hardest hit by poverty and injustice, recognizing that the health of the mother and the young child cannot be separated, and providing newborns with optimal nutrition and access to essential care ensures a healthy start in life. Maternal health is the most critical determinant of neonatal outcome, and a healthy newborn is the best promise for the future.



The Facts

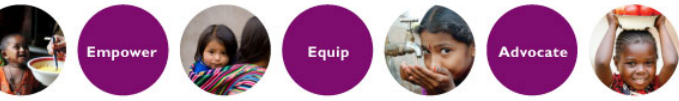
- Approximately 24,000 children under age five die every day (8.8 million/year) due to unmet basic survival needs (UNICEF).
- 37 per cent of all under age five deaths (3.7 million) take place during the first 28 days. The risk is greatest during the first day after birth when 25 to 40 per cent of these deaths occur (UNICEF).
- Half of the world's under 5 deaths occur in Sub-Saharan Africa, which remains the most difficult place in the world for a child to survive until age 5 (UNICEF).
- Infant and child mortality rates can be lowered by more than half if children are born three to five years apart (Macro International).
- An estimated 90 per cent of infants whose mothers die will themselves die before age one (Macro International).
- Children of educated mothers are 50 per cent more likely to survive until age five and beyond than those whose mothers did not receive complete schooling (UNICEF).

World Vision's response

Good health is a strategic investment in breaking generational cycles of poverty and risk—and a fundamental contributor to children's well-being. Because, in developing countries, more than 50 per cent of health care takes place at home and young children often die unattended by a health worker, WV's Maternal and Child Health (MCH) is addressed primarily at the home/community level through a **continuum of care and life cycle approach** to promote health and nutrition practices and prevent major causes of disease. The life cycle approach promotes care for mothers and children from pregnancy to delivery, the immediate postnatal period, and childhood.

World Vision uses the "7-11" strategy to prevent disease and promote good health. The strategy includes seven key interventions for pregnant women and 11 for children under two years, utilising a timed and targeted Counselling (ttC) approach directed at caretakers and decision makers at the family and household level.

The health and nutrition of children under age two require critical attention because the damage to physical growth and development is largely irreversible after this age. WV builds on the WHO and UNICEF **integrated approach** in its MCH programming. These include preventive interventions for essential newborn care, vaccinations, community case



management of diarrhoea and acute respiratory diseases, and promotion of long-lasting insecticide-treated bed nets to protect from malaria.

Community-Based Approaches

WV strengthens community approaches to supporting the mother and child by establishing community health committees, mother support groups, “peer mothers” and other volunteer self-help groups who promote breastfeeding, early infant nutrition, healthy timing and spacing of pregnancy, micronutrient supplementation, and better use of essential maternal and child health services. Community health volunteers are equipped to focus on prevention, provide key messages at the household level, and link households and communities to health facilities. WV also facilitates the development of community preparedness and readiness plans, including a referral system, the creation of community funds and transport for health emergencies.



Key projects

In **Afghanistan**, WV works in rural areas to improve access to health care by training midwives and facilitating the creation of a neonatal unit at Herat Regional Hospital where up to 3,600 infants are saved annually, and expanding mother-baby friendly care activities. In just two years, the percent of births attended by a skilled midwife increased from 12.2 to 23.2 per cent. Community health workers are being trained to use mobile phones to track every pregnant woman and newborn, directly communicate with a 24-hour on-call senior midwife and or obstetrician at the maternity unit of Herat Regional Hospital, initiate referrals and follow-up. Observations, pictures and data can be transmitted through the mobile unit to allow for informed technical advice.

In **Haiti, Senegal and India**, WV integrates a two-year USAID-funded birth spacing project with existing health programmes. It focuses on helping women and couples plan, space, and limit pregnancies through counselling, family planning education and distribution of tools such as cycle beads. In Haiti, the number of women who adhere to birth spacing principles doubled from late 2008 to mid-2009. In India that number increased five-fold from early 2008 to mid-2009, and in Senegal it doubled from late 2008 to mid-2009.

In **Cambodia**, the Integrated Community-based Maternal and Newborn Health Project sought to improve the quality and coverage of care among pregnant women and their newborns. Strong partnerships with the Provincial Health Department and the World Food Programme, capacity building of midwives and village health support groups, and improved household practices and training resulted in substantial increases, including: at least three antenatal care check-ups—from 37 to 88 per cent; delivery at health facility—from 54 to 74 per cent; and immediate breastfeeding—from 28 to 86 per cent.

In **Peru**, WV conducted a seven-year integrated health, education and nutrition MCH project with UNICEF, local government partners, and a community-based organisation supported by strong community involvement and substantial male participation in MCH activities, including establishment of Early Child Care Centres. This resulted in a 50 per cent reduction in stunting among children under three, an increase in average newborn birth weights from 2.7 kg to 3.3 kg, and an increase in facility-based delivery from 30 per cent to 90 per cent.

For general information about World Vision’s health, nutrition, and HIV and AIDS work, please contact:

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World Vision is a Christian relief, development and advocacy organisation dedicated to working with children, families and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.