

# World Vision Ireland's AIM Health Programme



**Results of an Independent End-line Evaluation  
2011 – 2015**



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# THE PROBLEM

# THE SOLUTIONS

## WHO IS DYING?

**9 MILLION**  
CHILDREN UNDER FIVE  
YEARS OF AGE DIE  
EVERY YEAR



**3.8**  
million



**6.3**  
million



**9**  
million

## WHERE ARE THEY DYING?

**1%**  
DEVELOPED COUNTRIES  
**99%**  
DEVELOPING COUNTRIES



**INDIA**  
2 million  
deaths



**NIGERIA**  
1.3 million  
deaths



**DRC**  
500,000  
deaths



**PAKISTAN**  
400,000  
deaths



**CHINA**  
382,000  
deaths



**ETHIOPIA**  
381,000  
deaths



**5 million deaths**  
60% of all child deaths in just 6 countries

## INEQUITY



For every 10 women giving birth with the help of a skilled attendant in urban areas, only 5 women have the same access in rural areas

## WHAT ARE THEY DYING OF?



**INDIRECT CAUSES OF DEATH:**  
malnutrition  
water, sanitation & hygiene  
access to healthcare  
health education  
prevention



but 2/3 of all child deaths are preventable

## WHY ARE THEY DYING?

1. LACK OF POLITICAL WILL TO PRIORITISE CHILD HEALTH
2. FINANCIAL GAP BETWEEN FUNDING NEEDED AND AID RECEIVED
3. NO FORMAL POLITICAL VOICE FOR CHILDREN AND WOMEN
4. FAILURE TO ADDRESS OTHER SOCIAL DETERMINANTS OF HEALTH
5. DECISIONS ABOUT HEALTH EXCLUDE FAMILIES IN REAL NEED

BY PROVIDING FAMILIES AND COMMUNITIES WITH SIMPLE SOLUTIONS, **6 MILLION** CHILDREN COULD BE SAVED EACH YEAR



BED NETS



ORAL REHYDRATION



EXCLUSIVE BREAST-FEEDING



SKILLED ATTENDANTS



IMMUNISATION

THESE ARE SOME OF THE PROVEN, COST-EFFECTIVE INTERVENTIONS THAT COULD SAVE CHILDREN'S LIVES

## The Access - Infant and Maternal Health (AIM Health) Programme

is a five-year initiative of WV Ireland with funding support from Irish Aid, implemented between January 2011 and December 2015 in ten programme locations (ADPs) across five countries in East and West Africa.

Kenya, Uganda, Tanzania, Mauritania and Sierra Leone

The **overall goal** of AIM Health is to improve maternal, newborn and child health (MNCH) outcomes and reduce maternal and infant mortality by 20%

## **AIM HEALTH PROGRAMME**

### **PROGRAMME GOAL**

Improved child and maternal survival

### **TARGET BY 2015**

20% reduction in infant mortality rate

20% reduction in maternal mortality rate

### **PROGRAMME OUTCOMES**

Children and their mothers are well nourished

Children and their mothers are protected from infection and disease

Children and their caregivers access essential health services

### **DIRECT BENEFICIARIES**

75, 250 Pregnant Women

75,250 Children (aged 0 -24 months)

2000 (+) Community Health Workers

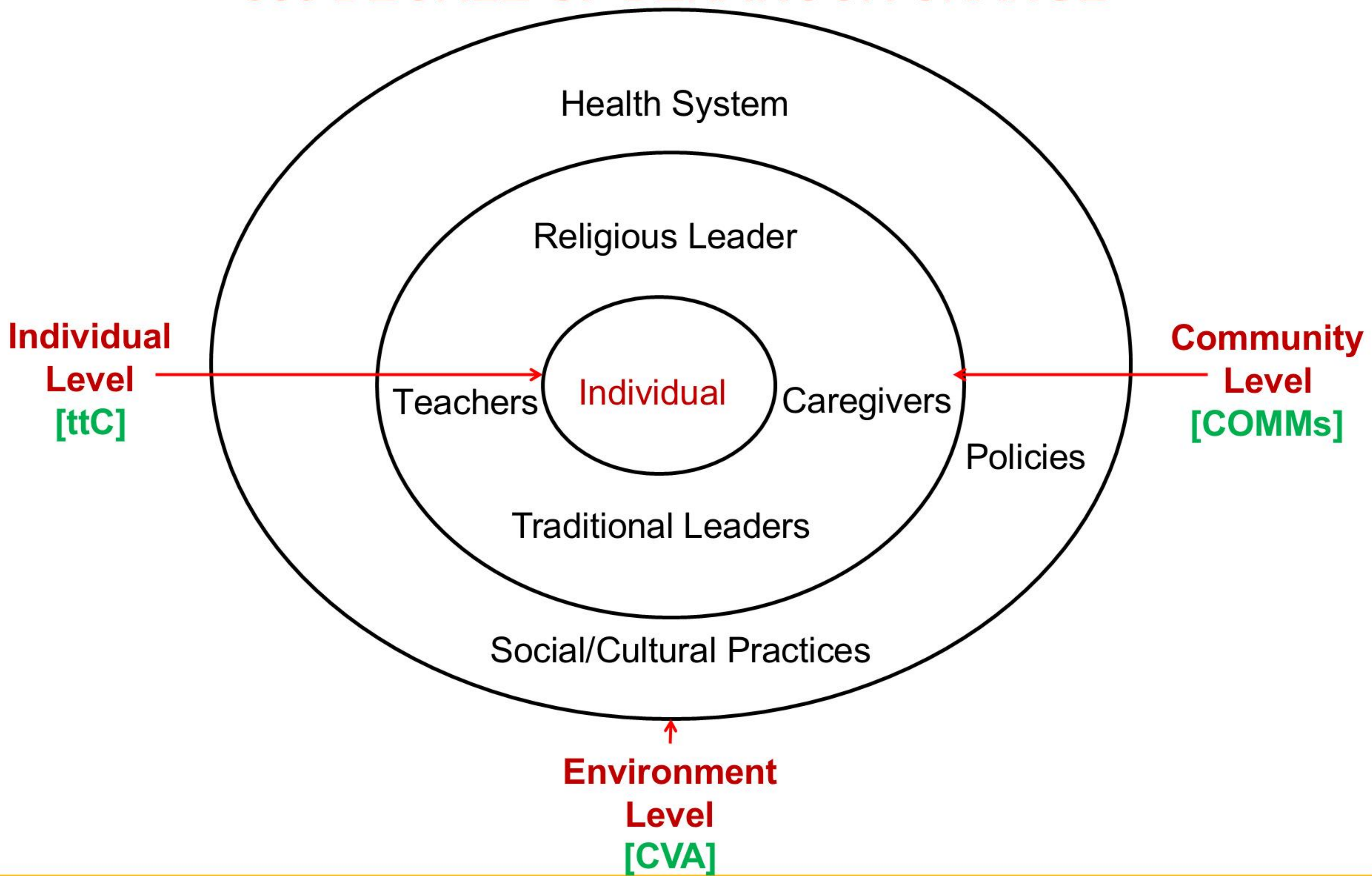
### **CORE MODELS OF INTERVENTION**

Time & Targetted Counselling (ttC), Community Health Committees (COMMs), Citizen Voice & Action

## 7-11 CORE INTERVENTIONS

TARGETS	PREGNANT WOMEN: 9 MONTHS	CHILDREN: 0-24 MONTHS
<b>CORE INTERVENTIONS</b>	<ol style="list-style-type: none"> <li>1. Adequate Diet</li> <li>2. Iron/Folate Supplements</li> <li>3. Tetanus Toxoid Immunization</li> <li>4. Malaria Prevention and Intermittent Preventive Treatment</li> <li>5. Healthy Timing and Spacing of Delivery and Birth Preparedness</li> <li>6. De-worming</li> <li>7. Facilitate access to Maternal Health Service: ANC PNC, Skilled Birth Attendance, PMTCT, HIV/TB/STI Screening</li> </ol>	<ol style="list-style-type: none"> <li>1. Appropriate Breastfeeding</li> <li>2. Essential Newborn Care</li> <li>3. Hand Washing with soap</li> <li>4. Appropriate Complementary Feeding (6- 24 months)</li> <li>5. Adequate Iron</li> <li>6. Vitamin A Supplementation</li> <li>7. Oral Re-Hydration Therapy/Zinc</li> <li>8. Prevention/Care Seeking: Malaria</li> <li>9. Full Immunization for Age</li> <li>10. Prevention/Care Seeking: ARI</li> <li>11. De-worming (+12 months)</li> </ol>

# 360 DEGREE OF BEHAVIOUR CHANGE

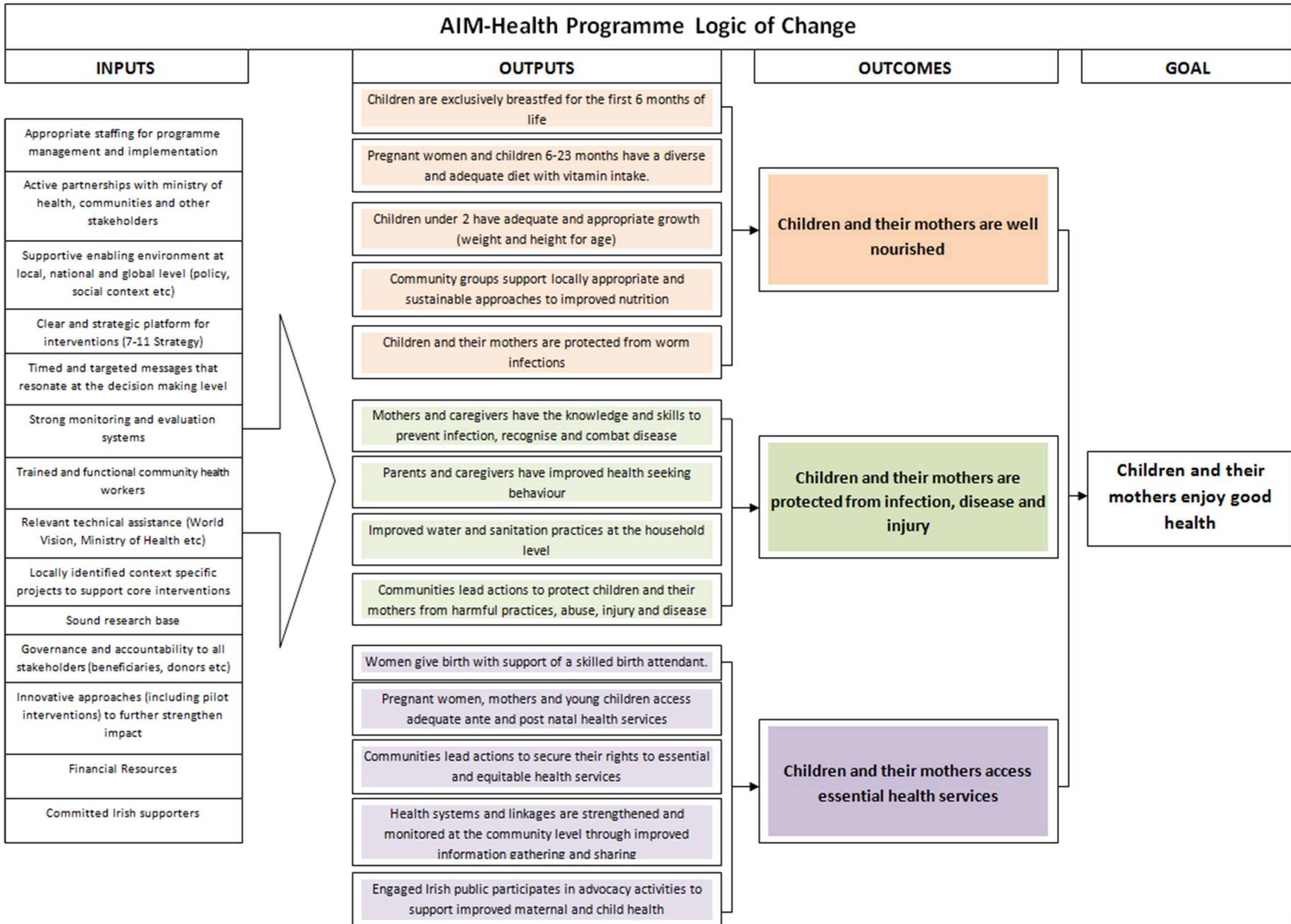


## AIM HEALTH PROGRAMME

### ADDITIONAL APPROACHES

- PD Hearth
- mHealth Technology
- Academic Partnerships for Implementation Research

# AIM-Health Programme Logic of Change







COMMUNITY HEALTH WORKER TRAINING & PRACTICUM

World Vision





COMMUNITY HEALTH WORKER DEBRIEFING MEETINGS





VISITING GROUPS OF BENEFICIARIES



# Mothers and Newborns Saved



1. Baseline Assessment 2011/2012 [AIM Prep Phase]
2. Monitoring Visits – EARO, WARO, SO Ireland & Irish Aid
3. Mid-Term Review
4. Independent End-line Evaluation

# WV Collaborations/Partnerships



## Implementers

## Ministries of Health & Regulators

## Technology Providers

Community Health Workers

International NGOs

UN Agencies

Community-Based Organizations

Local NGOs



Donors

MNOs

children for a healthy world