

**Save the Children Federation
Palestinian Ministry of Health**

**Using PRA and HSA data for
reproductive health programming**

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Impact of political unrest on health

- Increase in high risk pregnancies: 29%
- Increase in abortion: 23%
- Increase in infant mortality: 13%
- 102 mother and/or infant deaths for access problems
- Increase home deliveries from 7%- 29%
- Rural areas hardest hit

SCF Response

- Support the capacity of peripheral healthcare facilities to provide adequate, high quality mother and newborn health services in selected hard hit communities.
- Enable safe pregnancies, childbirth and survival of newborns in communities under closure.

Participatory Rapid Appraisal

- Provide information on societal context for obtaining health care
- Explore community resources and alternatives for service provision
- Elaborate on access and quality of care
- Examine decision-making and barriers to access

Participatory Rapid Appraisal Methods

- Focus group discussions: 38
- Individual interviews: 14
- Key informant interviews: 16
- Mapping: 4
- General group discussions: 43

Children's Drawings



PRA Findings: Access

- Lack of transportation
- Long distances
- Roadblocks limit access
- Local clinics not prepared for delivery
- Local clinics only operate until 2pm
- Some clinics have rotating doctor
- TBAs not available in all areas
- Families are cash poor

PRA Findings: Quality

- No services for sick newborns
- TBAs do not resuscitate newborns
- Antenatal care incomplete; doctor overburdened
- Local clinic is “unsuitable” for normal or complicated deliveries
- No privacy in clinics
- Doctors’ examinations too quick

PRA Findings: Knowledge and Practices

- Mothers-in-law and husbands may delay transfer to facility
- Woman may be delivered by mother in law, husband, other
- Most women could identify danger signs
- Women take traditional medicines or recipes for dizziness, anemia, fatigue
- Many women stay near hospital before due date
- Early marriage and early first pregnancy are common
- Women don't space to keep husbands at home
- Communities want ultrasound to know baby's sex
- Limited knowledge about FP methods

Health Services Assessment

- Explore services available within communities
- Learn readiness and availability of safe motherhood personnel
- Explore needs for upgrading and equipment

HSA Findings I

Availability of services

- PHC clinics are open short hours (8-2), and often doctors arrive late due to travel restrictions.
- In most clinics only basic health care is available with sporadic ante-natal care .
- Only some clinics have laboratories and technicians.

Training of Staff

- Qualified doctors or midwives available in each community.
- Some trainings were offered in the last year but not completed due to access difficulties.

HSA Findings II

Accessibility of services

- Affordability of services remains a real challenge in all areas, especially if people have to travel outside the area for seeking care.

Suitable Infrastructure

- Most clinics do have antenatal screening rooms.
- Most do not have ambulances, none have telephones or radios.
- Water supply is sporadic.

Equipment

- Half of the target clinics have antenatal equipment available.
- None have the equipment necessary for basic EMOC services.

PHC Clinic



HSA Findings III

Protocols

- MOH protocols available
- But not disseminated or used
 - due to staff shortages and incomplete records.

Drugs and supplies

- No obstetric emergency drugs available.
- All “essential drugs” in stock, stockouts rare.

Coverage

- Obstetric service coverage in catchment areas: 0%
- Antenatal care coverage ranged from 0 – 85%.

Our Program

Nov. 2002-Dec. 2004

Goal

Improved Maternal and Newborn Survival

Strategic Objective

Improved use of antenatal, delivery, newborn, and postpartum services and improved essential care in the home

Program Objectives

- Increased access to antenatal care, basic EMOC and essential newborn care at the community level
- Improved quality of antenatal, delivery, postnatal, and newborn care and management of complications
- Increased knowledge of danger signs during pregnancy, delivery, postpartum and in the neonatal period and healthful practices related to maternal and newborn care
- National policy established that supports integration of EMOC/ENC into Level 2 Health Facilities

Further Information

Save the Children

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