

Increasing access to emergency obstetric care in Sub-Saharan Africa: Successes & Challenges

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SGGG Congress 2024, Interlaken

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work?

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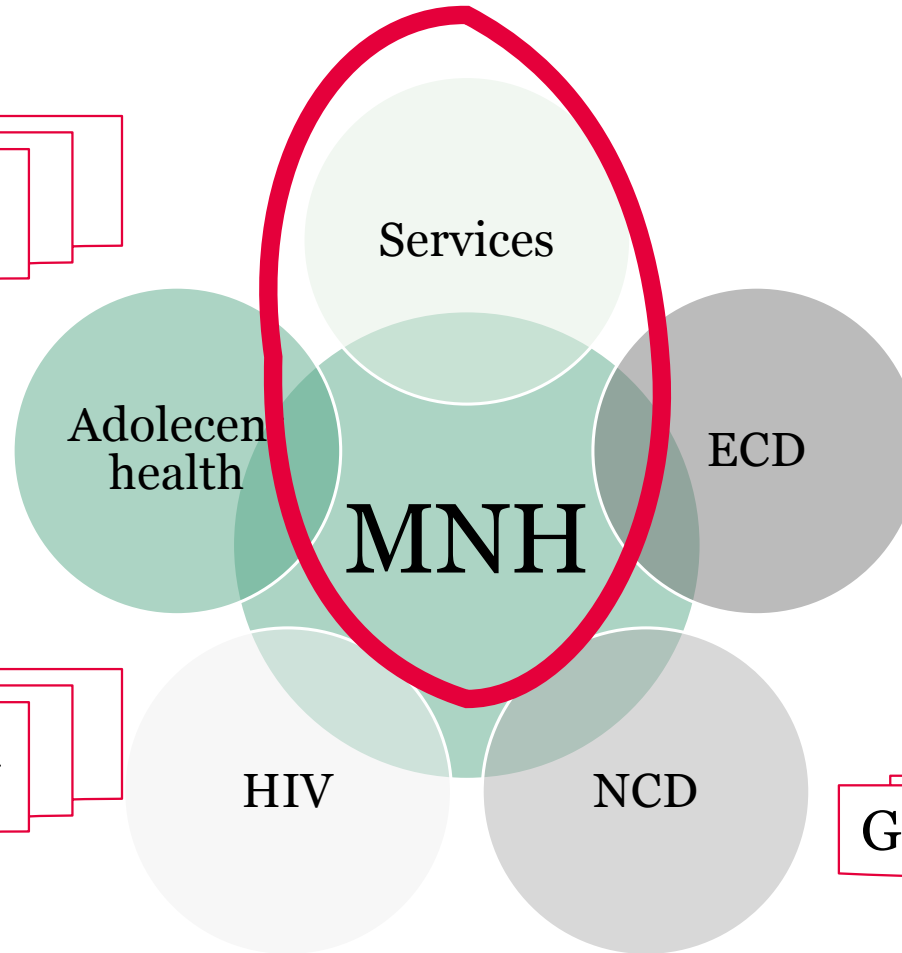
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Maternal and Neonatal Health

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Prevention of teenage pregnancies



Education on healthy pregnancy

Prevention of vertical transmission

Gestational diabetes...

- Human Development Index: Ranking: 185/191
- 1 doctor / 100'000 inhabitants
- Avg 120 births/month and health center (for 1 nurse)



A photograph of a rural health facility room. In the center is a metal delivery table. To the left is a white weighing scale on a wooden stand. To the right is a red table with various medical supplies, including metal containers and a box of gloves. The walls are blue and white, and there is a window with a plaid curtain.

KAP in 730 rural inhabitants (50% f) in Cabo Delgado in 2014

- 49.3% gave birth at home, without professional supervision
- 37% experienced stillbirth
- 45% lost at least 1 child (<1 month old)
- >80% knew of a woman in their village dying during labour

Makins et al. GLOW conference London, 2015

http://www.glowconference.org/uploads/3/1/8/5/31851337/2015_abstract_booklet.pdf

3 delay model

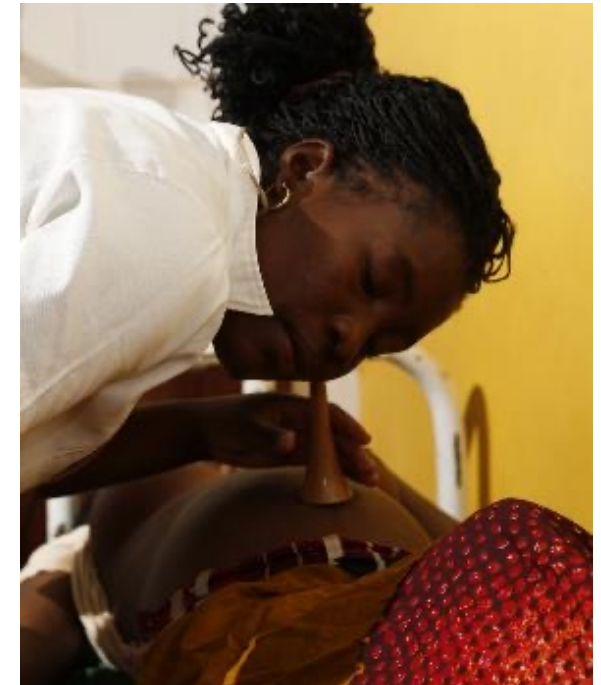
Seek Medical Care



Access Medical Care

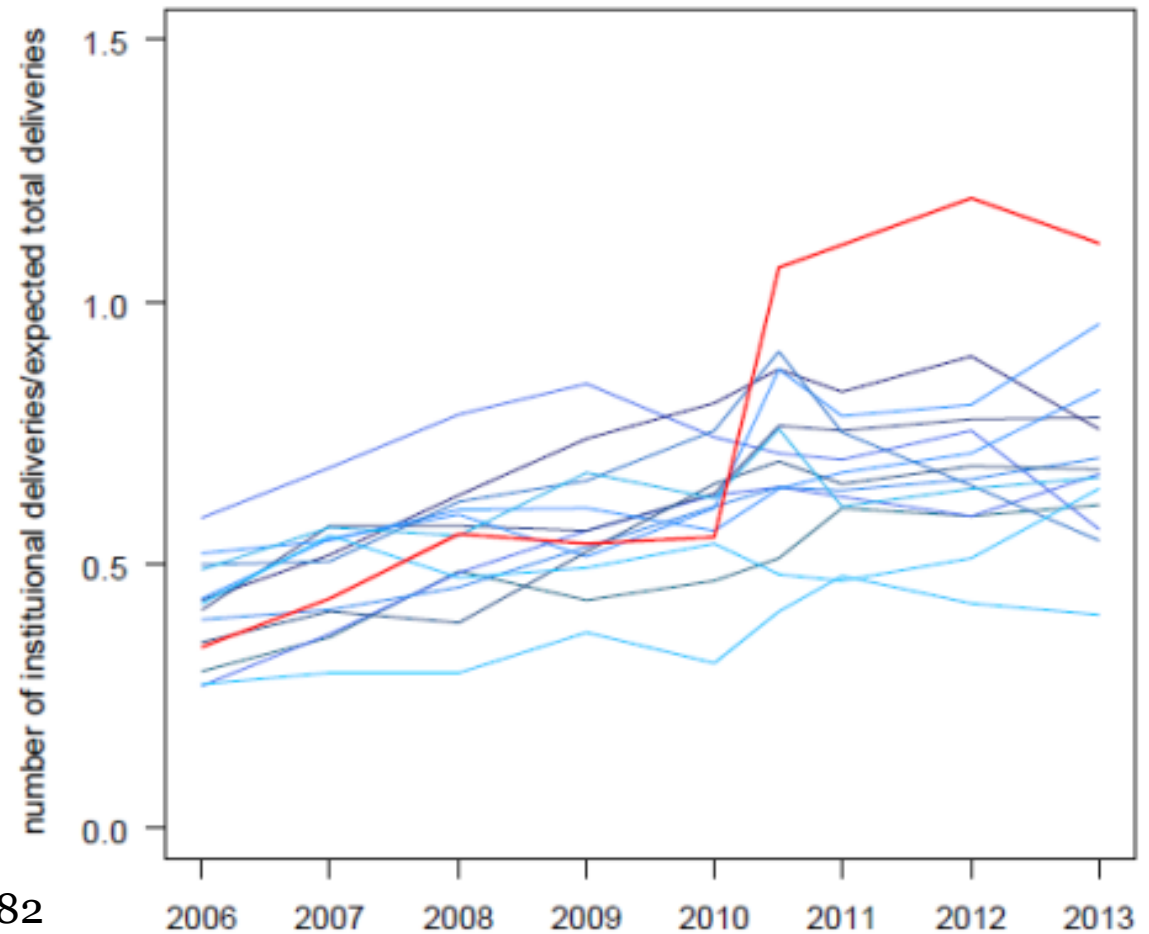


Get Medical Care



Delay 1: A babypackage incentive increases institutional birth rates

- Doubled institutional birth rates within 6 months.



Delay 2: Social enterprise transports obstetric emergencies to health facility

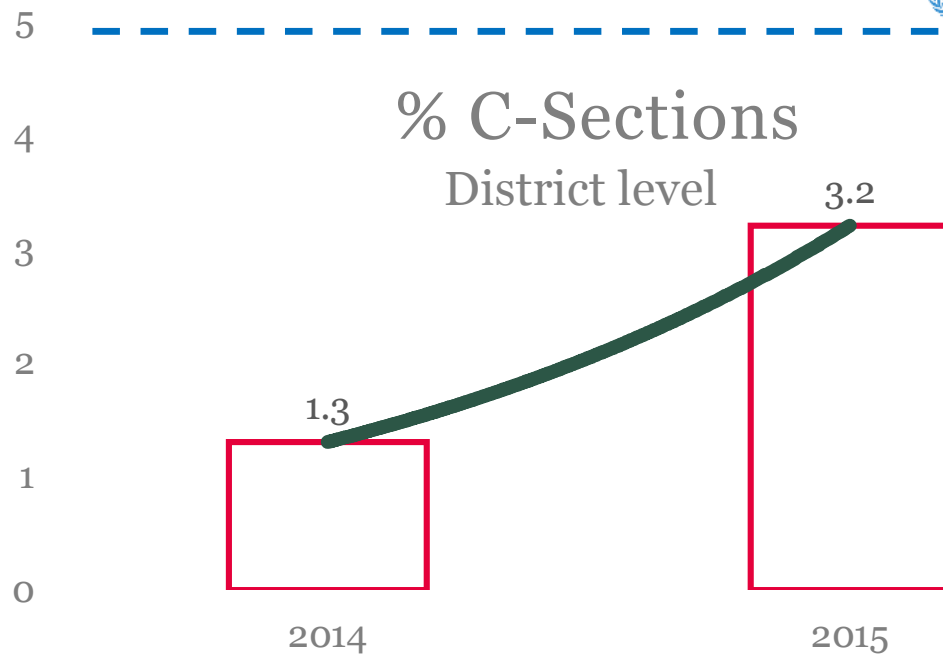
On time, and for free.

- Approach solves most common challenges in the transport field
- 1409 emergencies by end 2023



Hobbins et al, 6th Global Symposium on Health Systems Research, Nov 2020
Hobbins et al, Intl Health Economics Association (IHEA) Congress Basel, 2019

Delay 3: Building Operating Theaters directly impacts outcomes.



Delay 3: An Operating Theater...

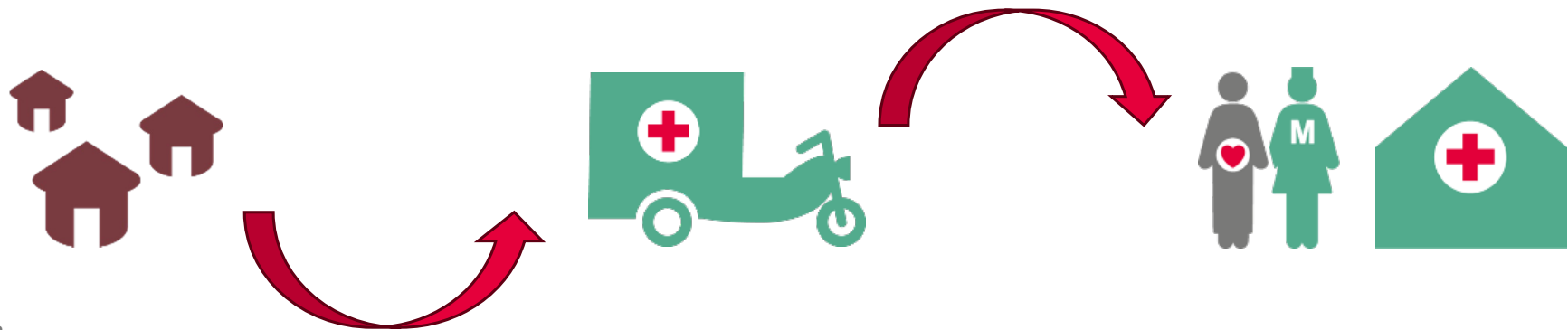
- ... brings more and better services (C/BEmONC Trainings)
- ... attracts professionals & clients and improves outcomes
- ... is cost-effective, especially when combined with other interventions (synergistic)*



*Jousse et al, Intl Health Economics Association Congress Boston, 2017

No more delays for people in vulnerable situations

- Delay 1: hurdles can be overcome (sustainably?)
- Delay 2: local solutions can reduce access barriers (scale?)
- Delay 3: better access to clinical quality care in combination with above appears cost-effective (political will?)



Still dying?

We have solutions.
We know *how*.
Do we have sufficient endurance to make it
work *long term*?

Ressources

Health Services

transport

Pre-natal



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