

Reducing Maternal Mortality, Child Mortality and Teenage Pregnancy in KZN

KZN Provincial Council on AIDS

13 June 2012

Royal Show Grounds, PMBG



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Background

Maternal deaths: Saving mothers report 2008-2010

KZN has the highest number of maternal deaths:

- 2008-2010: KZN 1129 deaths
- 2005-2007: KZN 1018 deaths
- Institutional Maternal Mortality Ratio (MMR) for KZN is 192 per 100,000 live births
- For South Africa MMR is 176 per 100,000
- These are mainly deaths in health institutions
- Deaths in the community may be missed by the report (especially post-partum deaths)



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Background

- *Maternal deaths: Saving mothers report 2008-2010*

Contributing Factors include:

- Large population
- Highest HIV prevalence rates in pregnant women at 39% (ANC Sentinel Survey, 2010)

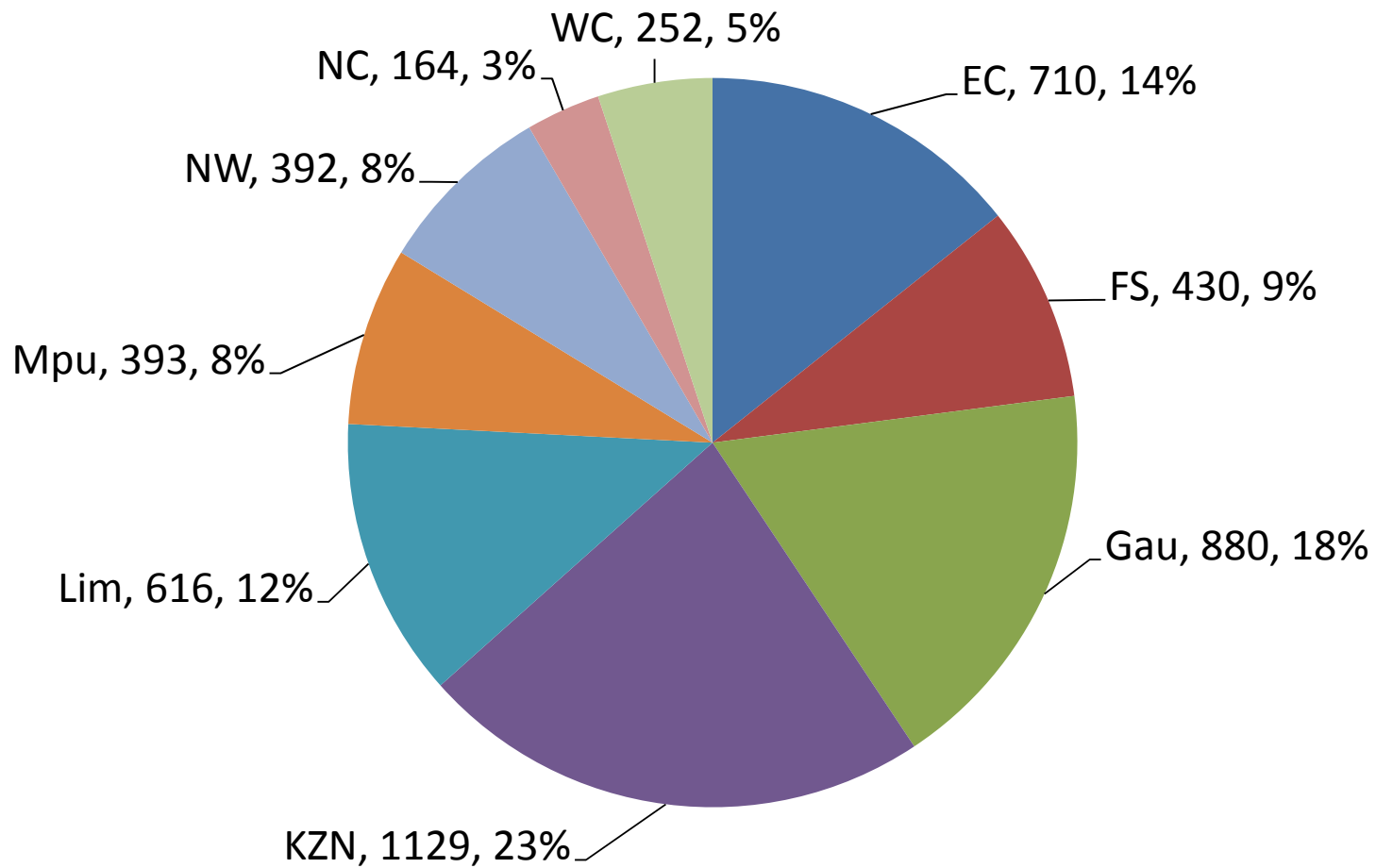


health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Maternal Deaths per Province 2008-2010



Top 3 Causes of Maternal Death in KZN

1. Non-pregnancy-related infections (NPRI) (mostly HIV-related) 48%
2. Hypertensive disorders 10%
3. Obstetric haemorrhage 9%

These are also the top 3 causes of avoidable maternal deaths

4. Health worker training
5. Health systems improvement



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

HIV and AIDS as an underlying factor for maternal deaths

- **HIV & AIDS**

- 85% maternal deaths tested HIV positive (69% in 2005-2007)
- Some were unbooked and had not tested for HIV when they died
- 79% of those tested were HIV positive



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

What are the Avoidable factors and missed opportunities ?

- **Patient related:**
 - Accessing health care services
 - Unsafe miscarriages (35% of miscarriage deaths)
- **Administrative:**
 - Access to Intensive Care Unit
 - Management of blood and blood products
- **Health care providers:**
 - Non-compliance with standard protocols
 - Do not recognise the problem early or make diagnosis
 - Delays and obstacles to referrals



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing HIV-related maternal deaths in KZN

1. Primary prevention of HIV infection in KZN communities:

EVERYBODY'S RESPONSIBILITY

- “Know your status”: Behaviour Change Communication: Safe sex practices
- Sex education: in schools, homes, workplaces, media, and the involvement Community Care Givers and youth ambassadors
- Strengthen Anti-Sugar Daddy Campaign
- Medical Male Circumcision in all sectors of KZN society



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN – Contraceptive Strategy

2. Contraception / Family planning for HIV positive women:

- Increase community awareness of Family Planning methods in all Community and Municipality gatherings, Community Care Givers, Youth ambassadors, media, school health teams
- Improve access to Family Planning Services (incl. emergency contraception)- e.g. in the workplace, educational establishments, 7 days a week at clinics

Strengthen the 5 Point Contraceptive Strategy



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Family Planning is applicable to all causes of maternal deaths

1. Promote family planning in the community and improve access
2. Improve method mix (e.g. Ensure Tubal Ligation are accessible post-delivery at all hospitals; Increase use of Intra-uterine contraceptive devices (IUCDs)
3. Integrate FP services into other points of care
4. Training of health care workers (including training CCGs and youth ambassadors about FP)
5. Monitoring and Evaluation



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN

Early Booking, Early HIV Diagnosis

3. Early antenatal booking, to allow HIV testing and early diagnosis and treatment of HIV and related conditions

- Community education to encourage early attendance for Antenatal Clinic (ANC) through Community Care Givers, Churches, Media, etc
- All ANC sites must start antenatal care at the time of diagnosis of pregnancy- clients must not be told to come back at a later date for booking



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing HIV-related maternal deaths in KZN

Note: Few clients (1% of KZN Maternal deaths 2008-2010) are refusing HIV testing in pregnancy now – stigma is gradually decreasing



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing HIV-related maternal deaths in KZN

4. Efficient management of HIV and associated conditions during pregnancy, including prompt initiation of ARV therapy according to guidelines and TB screening and treatment

- Community Care Givers (CCGs) to facilitate treatment adherence with ARVs and TB regimens
- Community leaders to assist to facilitate compliance with ARV and TB regimens
- ARV services to be integrated into ANC at all ANC sites



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN Early HAART Initiation

- HAART during pregnancy
- 2011: ANC eligible for HAART:24 711
- 2011: ANC started HAART:19 229 (78%)

We must bring 78% closer to 100%



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN

Post delivery Care

5. Continue care of mother and baby post-delivery through scheduled visits at health institutions and home visits by CCGs.

Focal areas include:

- Family planning
- HIV care for mother and baby
- Breastfeeding support



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN: Health Systems: Improving access

- Establish waiting mothers areas at delivery facilities for stable women at term who have no transport plan
- Establish / support Midwife obstetric units (MOU) at strategic sites in the community
- Criteria for safe MOU have been established and suggested sites are being evaluated



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing maternal deaths in KZN (2)

Health systems: Improving access

- Transport plan to be made during antenatal period; community to support
- Dedicated maternity ambulances to reduce transport delays in cases of emergency (home to facility and between facilities)
- 40 ambulances to be deployed at strategic points around KZN



health

Department:
Health

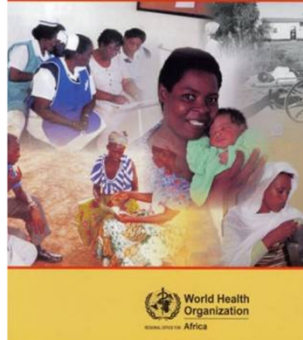
PROVINCE OF KWAZULU-NATAL

We know...

...who
is at
risk...



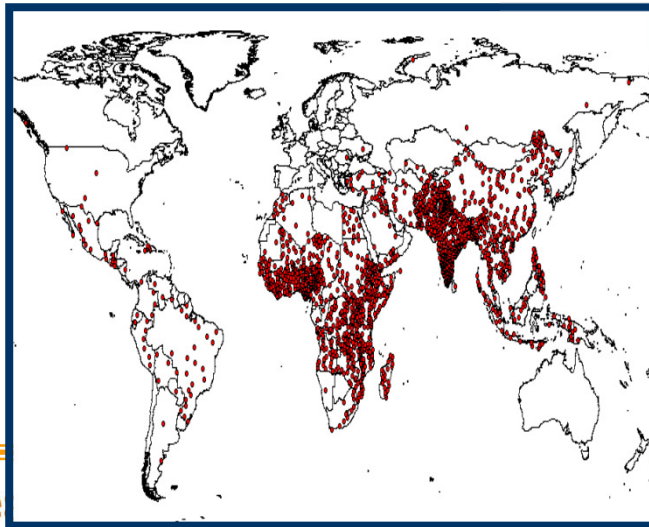
Road Map for Accelerating the
Attainment of the Millennium Development
Goals related to Maternal and
Newborn Health in Africa



...what we
must do...



...where
they
live...



...and
how to
do it.



he

Department:
Health
PROVINCE OF KWAZULU-NATAL

Courtesy: Dr Olive Sentumbwe-Mugisa

Child Deaths in KZN (2008-2010)

- For every 1000 live births, 60 die by the age of 5
- Of the under 5 deaths 75% die in the first year (infant death)
- Of the under 5 deaths 25% die in the first month (neonatal death)
- 50% of children die at home



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Main Causes of Under- 5 Child deaths

- Perinatal-related: neonatal deaths
(25% die in first month of life)
- Pneumonia
- Septicaemia
- Acute Diarrhoea
- Tuberculosis (TB)



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Underlying factors for child deaths: KZN

- Poor access to safe water and sanitation overcrowding and unemployment
- 66% malnourished, 35% severe malnutrition
- 55% of deaths: child HIV infected or exposed
- Low breastfeeding rates



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Priority Areas for reducing child mortality in KZN

- Prevention of Mother To Child Transmission (PMTCT) towards elimination of HIV in children
- Early identification and appropriate treatment of HIV positive infants –

ALL infants below 1 year are eligible for treatment



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Priority Areas for reducing child mortality in KZN

- Nutrition: Breastfeeding
- Negative attitudes towards breastfeeding throughout the community (from low to high socio-economic groups) must be reversed
- CCGs, youth ambassadors, schools, churches and media must promote breastfeeding
- Workplaces must support breastfeeding mothers
- Health institutions must be mother and baby-friendly



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Priority Areas for reducing child mortality in KZN

- Effective recognition of sick / malnourished children in the community (CCGs)
- Effective management on presentation to health service (health worker training)



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Reducing teenage pregnancy

Background

- 2011 KZN: 9.5% of deliveries were to girls aged 17 or younger
- Teenagers are at higher risk of dying from hypertensive complications when pregnant
- Perinatal deaths are more common in teenage pregnancies
- Long-term adverse socio-economic and emotional consequences



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

How to Reduce Teenage Pregnancy (1)

- The same community interventions as for primary prevention of HIV infection will also address teenage pregnancy
- Communities must be educated and mobilized to address safe sex and Family Planning issues in the home, including contraception for teenagers
- Youth must be engaged at all times – sports and recreation
- Empowerment of women and young girls
- Employment and education
- This must be supported with consistent messages from CCGs, youth ambassadors, schools, churches, media



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

How to Reduce Teenage Pregnancy (2)

- Condoms and emergency contraception should be readily accessible
- ◀ ▶
- Options for access include CCGs, school health teams, shops



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Summary

- A combination of community focused and facility based interventions are required to reduce maternal mortality, child mortality and teenage pregnancy
- The interventions presented for the different problems have many areas of overlap
- These interventions are all in line with the priority areas for the implementation of Campaign On Accelerated on Reduction of Maternal and Child Mortality (CARMMA)



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

Acknowledgements

- Strategic Health Programmes TEAM
- ALL DISTRICTS
- Developmental Partners
- All Stakeholders
- Health Portfolio Committee Members

Thank You to ALL our Principals for their support and guidance

- HOD, Dr Zungu
- Hon MEC, Dr Dhlomo
- Hon Premier, Dr Mkhize



health

Department:
Health

PROVINCE OF KWAZULU-NATAL

*SIYABONGA
THANK YOU*



health

Department:
Health

PROVINCE OF KWAZULU-NATAL