

REDUCING MATERNAL AND INFANT MORTALITY CASES OF HOME DELIVERY AND BEYOND USING GLOBAL HEALTH TOOLS IN GLIDZI

Background

Maternal and infant mortality during home deliveries remains a critical global health issue, particularly in Glidzi and its surrounding areas. This rural community faces significant challenges due to limited healthcare infrastructure. Despite an increase in antenatal care (ANC) visits and skilled deliveries, the region struggles with misinformation, logistical issues, and socio-economic factors that contribute to health disparities. Collaborating with neighbouring communities such as Agbozume, Tengekorpé, Avlorto, Agortorme, and Srohume, which have successfully achieved zero maternal and infant deaths, we aim to replicate their success in Glidzi.

Objectives

The primary objectives of the maternal and infant mortality cases in Glidzi is to reduce by 100% within three years. Secondly the other objective is to improve ANC coverage, increase awareness and benefits of importance of hospital delivery, local health care system to support and embarrased this effort to be maintained.

1. Reduce Maternal and Infant Mortality: Achieve a 100% reduction in maternal and infant mortality cases within three years.
2. Enhance ANC Coverage: Improve awareness of the importance of hospital deliveries and increase ANC coverage.
3. Strengthen Local Healthcare Systems: Foster community support for sustained healthcare efforts.

Interventions

1. Baseline survey and data collections. Initial surveys were conducted to assist ANC maternal and child health coverage, identify defaulters to rule out misconceptions and understand the community as a whole.
2. Community mobilization and education: Health care workers, Community Health Management Committee and Volunteers organized community meetings quarterly, home visit to educate families about the benefit of Arec and hospital delivery.
3. Outreach and durbars: To spread the information across, community durbars were organized through the **laise** of district team health workers

of Ketu – South health directorate and sub district leader in the catchment area to give them health educational talks.

Durbar Pictures



4. Strengthening Infrastructure:

- Local government support has led to the manufacturing of wooden beds for ANC and resuscitation purposes.
- Regular provision of essential drugs and monitoring to enhance service delivery.

5. Domiciliary Midwifery:

- Engage in community midwifery practices, including assisting women in labor in non-facility settings as a demonstration of commitment to maternal health.

6. Partnerships for Support:

– Successfully advocated for assistance from GUBA Foundation Ghana, resulting in the donation of delivery beds and hospital beds after showcasing domiciliary midwifery efforts through impactful visuals.

Pictures of bed



Management were not left out, provide drugs frequent monitory to improve our services. I also assist a woman to deliver on my way home on a bear ground as part of my domiciliary midwifery.

Pictures



Through all that I strongly advocated for a support from a GUBA Foundation Ghana for a support and they gave as delivery bed and two hospital beds to use when they saw the domiciliary midwifery pictures that moved them.

4. Monitory and Evaluation: Quarterly, half year and annual evaluation of our work is been measured through the progress and down falls.

Monthly validation





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Impact

1. Reduction of home Delivery in 2023

- Increased ANC coverage: ANC registrant was increased from 7 registrant in 2022 to 118 in 2023 and 121 in 2024.
- Increased in skilled delivery coverage: People were not delivered as at past years 2022 compared to 71 people that delivered in 2023, and 108 in 2024.
- Enhanced Community Awareness: There was increased in community knowledge and importance of ANC registration, skilled delivery at the hospital that mark a higher level of trust with the health care system report.





- Sustained Practices: The successful strategies have laid a strong bonds between the expectant mothers and the health care system to sustain the efforts with community engagement and support.

0/0 Coverage over the years at Glidzi (AP)

300
250
200
150
100
50
0

2022 2023 2024

Delivery

300
250
200
150
100
50
0

Conclusion

REDUCING ABNORMAL CASES LIKE CLEFT PALATE, CANCERS, MALNUTRITION BY THE ADVOCACY OF HEALTH EDUCATOR.

The Innovation of a midwife

Background

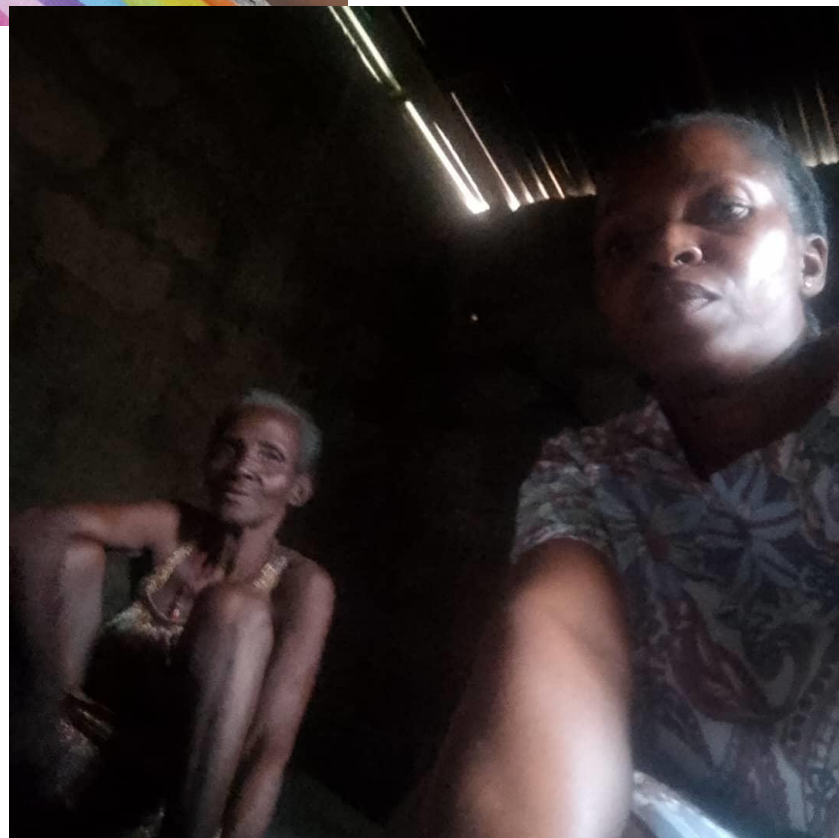
Glidzi is a rural community in a developing country that has a long struggled with high rates of abnormal cases like cleft palate, breast cancer, malnutrition, elephantiasis and malformations of babies in the community and many more. The majority of the people are traditionalist that have about 31 small shrines that they believe in them when worship happened. There is inadequate knowledge about health, that contribute to limited health care services, poverty among the entire population in responds to crisis, the local midwife, Enyonam Katapu implemented a series of innovative aimed at reducing such cases to improve over all best but come of health in the community.

Objections

The primary objection of this project is to decrease the incidence of abnormal cases among the people in Glidzi at court 50% over the period of two years. Secondly health care staffs are the major advocate to intensity community awareness about this illnesses, good nutrition intake and behavioural change to address these conditions.

Interventions

1. Community Engagement and Educate: Midwife Enyonam organized weekly home visits and monthly pregnancy schools to educate families about the importance of balance diet, nutrition, importance of ANC, how to use the maternal booklet birth prepare down plans.



2. Food Demonstration

Midwife Enyonam leaise with the health care team to assist mothers to use local available foods, how to blend it to prepared nutritious diet at home and many more at the facility.











Impact

- Reduction in abnormal cases were corrected. Incidence of abnormal cases like left plate were corrected at Korlebu.
- Women that are pregnant at early stage (trimesters) are also educated came report early at ANC for any abnormally detection.
- Improve Health and Growth: Frequent visit of the various homes makes our coverage increased in number.

- Increase Food Security
Food demonstration in mothers at anc aid ANC makes a whole impact in various families to reduce malnutrition cases.
- Sustainability Practices
Most community members are used to midwife Enyonam due to the visit to their homes and early referrals been done.

Pictures



Conclusion

The innovation strategies by midwife Enyonam Katapu successfully reduced some of the abnormal cases, malnutrition in Glidzi.

Focus education, food demonstration not to address immediate nutritional needs but to inculcate a good practice of balanced meal for the whole family. These intervention helps in many ways to replicated in other nearby rural communities facing this challenges.

TEENAGE PREGNANCY IN GLIDZI

Glidzi is a rural community grappling with limited access to health care, sexual education, lack of amenities that has experience high rate of teenage

pregnancy contributing factor include poverty, cultural norms, low access to contraceptives, sexual education and peer influenced. Midwife Enyonam Katapu, seen this agent needs for intervention latched serves of innovations of reducing teenage pregnancy increase rates and empowering the young women in the community as well.

Objectives

The primary objective was to reduce the teenage pregnancy in Glidzi by 35% within 3yrs. Secondary objectives include increase awareness about sexual and reproduction health, improve access to contraception and empower the young teenagers to make an informed choice about their future

Interventions

1. Comprehension sexual education program: Midwife Enyonam introduce comprehension sexual education through community centres, pregnancy schools and local schools. Health educational topics include contraception, reproductions health, young women pregnancies and abortions. These curriculum was tailored to be culturally sensitive to their age appropriately.





2. Access to contraceptives. Collaboration with local health clinics ensure that contraceptives were readily available and accessible to teenagers. Confidentiality and poorly were prioritized to encourage usage.



3. Commonly Engagement and Parental Involvement. Facilitated communities through meetings, pregnancy schools and parental workshops through parent teachers association to foster a supportive

environment. These aims is to breakdown taboos and norms, encourage open communication about sexual health and encourage parents to be supportive to their children.

4. Peer education and mentorship. A peer education was done in the local schools every six month where old school youth mentors provided guidance and share experiences to strengthen their peers tin making informed choices about sexual health.
5. Youth Empowerment workshops. Regular workshops also include life skills training and self-esteem building goals.
6. In 2022 reintroduction of safety net project.

I served as an advocate for both young teenagers boys and girls by sensitizing families in communities of these girls as well as linking them to support units as well as guiding them in making informed decisions concerning their future with assessing maternal health care.

In 2023, out of 108 pregnant women registered, 34 were adolescent form the catchment area.