



Cameroon Baptist Convention Health Board

HIV Free NW/SW Project

LCI: Strengthening communities to save mothers and babies

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Introduction

The increase rate in maternal and child mortality below the age of 5 in Cameroon prompted the CBCHB to take actions to reverse the tides. According to different national demographics, maternal mortality increased over the years with 430 per 100,000 live births in 1991 to 669 in 2004 and 782 in 2011 (WHO 2011). Also, Cameroon is ranked 18th amongst the 20 countries in the world with the highest mortality for children under the age of 5.

This reality is very typical of the 10 Health Districts of LCI implementing in the NW and SW Regions of Cameroon for several reasons;

- ❖ Though the government policy stipulates that a health facility be created in every 5 kilo meters, the reality is not through. Some of these communities have to trek for over 30 kilo meters to access health care services.
- ❖ The NW and SW Regions are enclaved areas with poor communication network. This makes movement and accessibility to health care difficult especially for pregnant women.
- ❖ High rate of ignorance amongst most community members on the usage of health facilities helped to discourage more community members from making use of health facilities even when they are available.

These challenges forced most pregnant women not to attend ANC and opted for home delivery. Hence lack of proper care increased the risk of infant/maternal mortality, high exposure of HIV transmission from a positive mother to child and other infectious diseases. This in most cases culminated to increase the death toll amidst these women and their babies.

Implementation Strategies

Cognizant of the challenges faced by the inhabitants in such communities; the Local Capacity Initiative (LCI) concerted efforts to save the lives of more women and children in its 10 implementing districts of the NW and SW Regions of Cameroon. These strategies included the following;



Pregnant woman in labour transported on a stretcher to the nearest health facility

- ❖ The introduction of the Outreach Strategy; this is a concept that consists of integrating



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ANC and other basic health care services to the already existing monthly mobile caravan routines. In the past the exercise offered a limited package which consisted of vaccinations and IWCs services. The LCI, added other services to the package offered; General education, ANC, VCT and ART adherence. This has provided access and increased the number of clients receiving basic health care.

- ❖ To ensure that pregnant women who attended ANC in the community deliver in recognized health facilities, the LCI project created Maternity Waiting Homes (MWH). These are facilities within health units where Pregnant Women living in distant and hard to reach areas can visit some few days prior to the anticipated date of delivery.

The approach of taking health care to the door step of the community members has increased the number of women attending ANC and receive timely treatment in case of any complication related to the pregnancy.

The creation of MWHs has drastically reduced the number of home deliveries in various communities as over 250 pregnant women who could deliver in the health facility made use of this facility in 12 months.

Conclusion

These innovative strategies add more value to LCI activities as it promotes behavior change in communities. Hence enhance safe the lives of pregnant women and their childre



Akwaja Integrated Health Center MWH in use by a Pregnant Woman awaiting delivery

Impact of the Outreach and Maternity Waiting Home (MWH) Strategies

These strategies have greatly impacted the lives of clients in hard to reach areas to receive medical attention at a highly subsidized cost.

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