

Program/Project Purpose

Kenya has made small gains on morbidity and mortality for Maternal, Newborn, and child health (MNCH) over the last 25 years. Mortality rates remain high at 400 maternal deaths per 100,000 live births and 73 deaths per 1000 live births for under-five mortality. Medical Education Partnership Initiative (MEPI) Linked award at the University of Nairobi (UON) has worked to improve MNCH through providing opportunities and support for graduate level research and training for healthcare professionals at eight decentralized Kenyan health centers. Trainings consist of short courses and emergency obstetrics and newborn resuscitation simulation (PRONTO).

Structure/Method/Design

A rapid assessment of 28 key informant interviews with administrators and clinical staff, as well as six focus group discussions from six of the sites, was conducted and gross data was disseminated to MNCH award leadership to evaluate the program and develop a final impact evaluation plan. A deeper analysis to develop a more nuanced understanding of how MNCH activities are influencing the work environment at the facilities is going to be conducted through thematic coding and analysis.

Outcomes & Evaluation

Healthcare providers reported that the presence of graduate students conducting research temporarily improved quality of care and catalyzed change in clinical practices and policy. Having the students present provided extra hands for the overworked staff and brought current knowledge of best practices in clinical care to their teams. Several interviewees at one center reported a drop in pediatric mortality rates from 11% to 6-7% due directly to UON student and adjunct faculty presence. The nursing staff reported improved confidence and increased quality of care as a result of PRONTO simulation drills and constructive feedback of performance. Short course trainings led to development of new management systems.

Going Forward

Some institutional policies, such as internal and external rotation of staff, have reduced the potential effectiveness of the trainings. These frequent rotations need to be addressed at the policy level or trainings need to include healthcare workers who will be rotating through those areas in the future. Overall the impact of these interventions has been perceived as positive and effective by the centers and if they were expanded could have a much larger impact on MNCH in Kenya.

Funding

This program was supported by NIH Grant 5R24 TW008907-03

