



LE FONDS FRANÇAIS
MUSKOKA



Partnership
To End Malaria

Malaria in Pregnancy
Working Group



RBM Partnership - Malaria in Pregnancy Working Group Annual Meeting

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Malaria in Pregnancy in the 9 Muskoka countries

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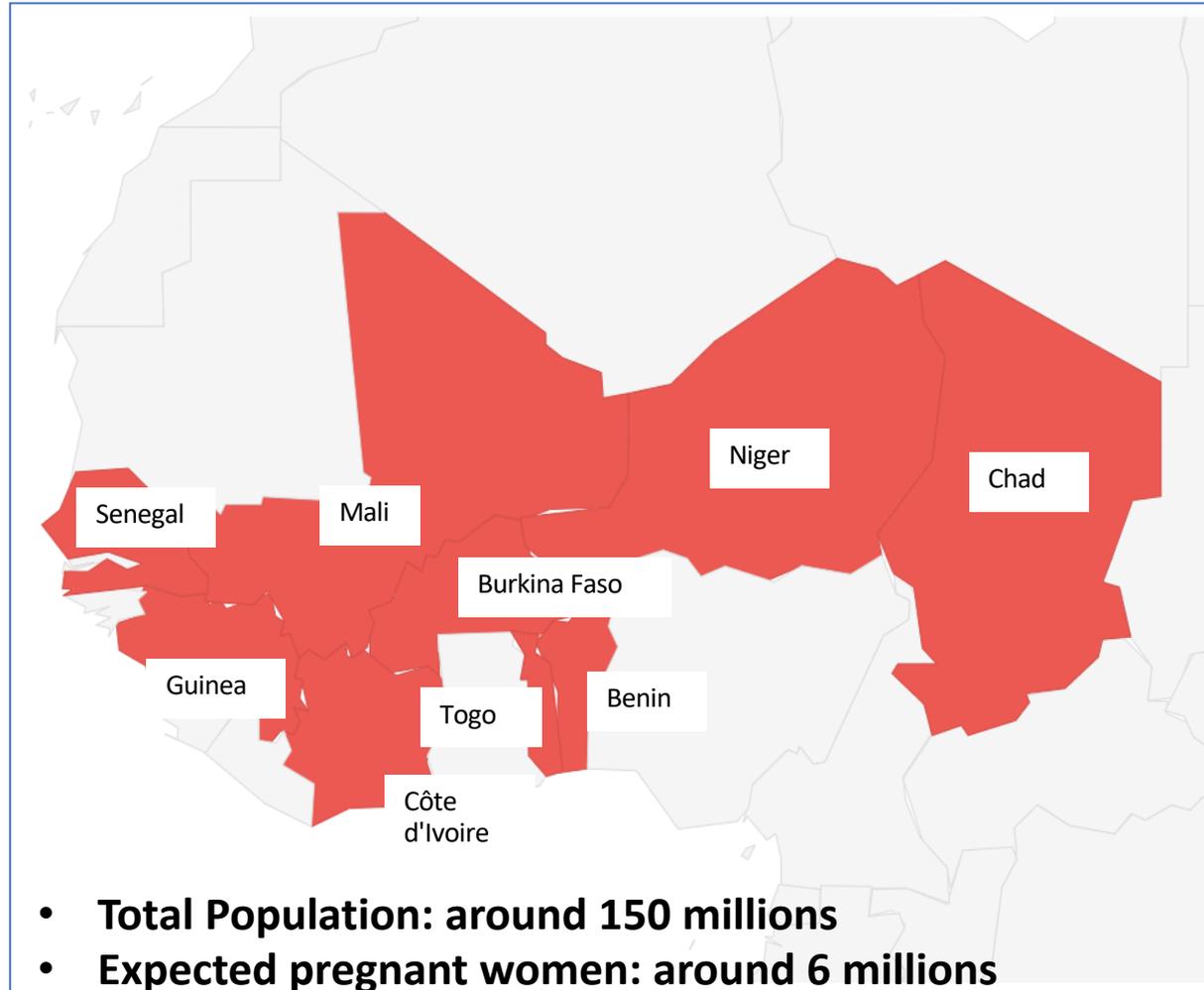
Outline

1. Introduction on “Le Fonds Français Muskoka”
2. Malaria in Pregnancy in the 9 Muskoka countries
3. Common key challenges for of ANC and IPTp
4. Key strategies to increase the coverage of ANC and IPTp
5. Key messages

LE FONDS FRANÇAIS MUSKOKA : Introduction (1/3)

Created in June 2010, in response to an urgent call to action at the G8 Summit in Canada to accelerate the achievement of MDGs 4 and 5 (maternal and child health) then, since 2015, SDG 3 (health and well-being), SDG 2 (food and nutrition) and SDG 5 (gender equality).

Implemented by 4 UN Agencies at national and regional levels.



LE FONDS FRANÇAIS MUSKOKA : Introduction (2/3)

From 2011 to 2021 around 150 millions euros provided by France for:

- Assessment and improvement of the quality of care
- Establishment of a Maternal Death Surveillance and Response
- Improving equitable access to competent health workers (capacities reinforced for more than 70,000 doctors, nurses, midwives, CHWs)
- Establishment of community-based family planning services
- Improving the sexual and reproductive health
- Conducting advocacy for an enabling environment
- Improving nutrition
- Improving access to essential medical products and medicines
- Increasing demand (international series “c’est la vie”)
- Ensuring continuity of health services during COVID-19

RMNCAH has been improved. For example: All Muskoka countries have experienced a reduction in their maternal mortality rate with an average of 16% compared to 10% in West Africa.

LE FONDS FRANÇAIS MUSKOKA : Introduction (3/3)

From 2022 to 2026 France is providing 50 millions euros for Muskoka 3.0

Goal

- Contribute to ending the preventable deaths of mothers, newborns, children, adolescents and young people
- Contribute to improving rights, sexual and reproductive health and nutrition

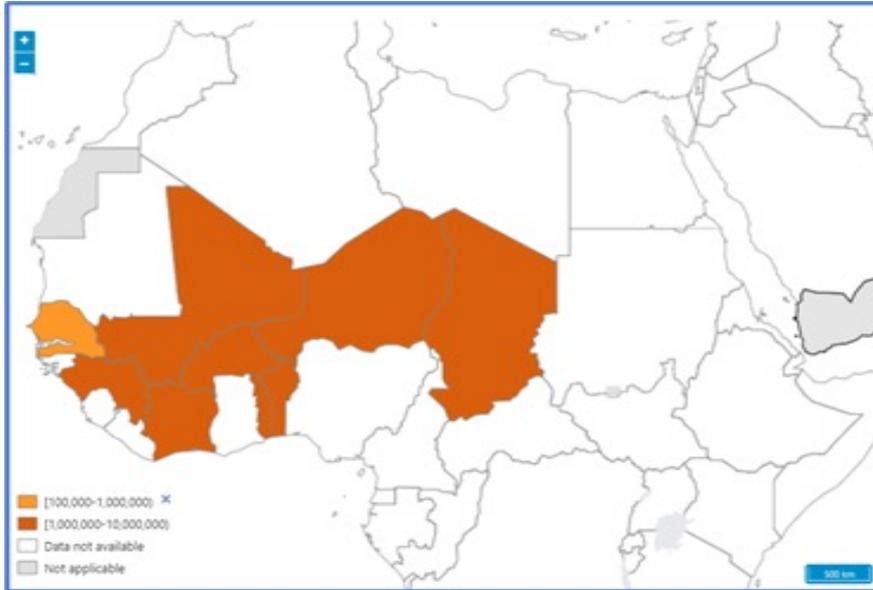
Strategic objectives

- Strengthen the performance and resilience of health systems focused on health and well-being of women, newborns, children, adolescents, and young people
- Strengthen the establishment of an enabling environment
- Strengthen the demand for services and the socio-economic and legal empowerment of women and adolescent girls to reduce violence and discrimination

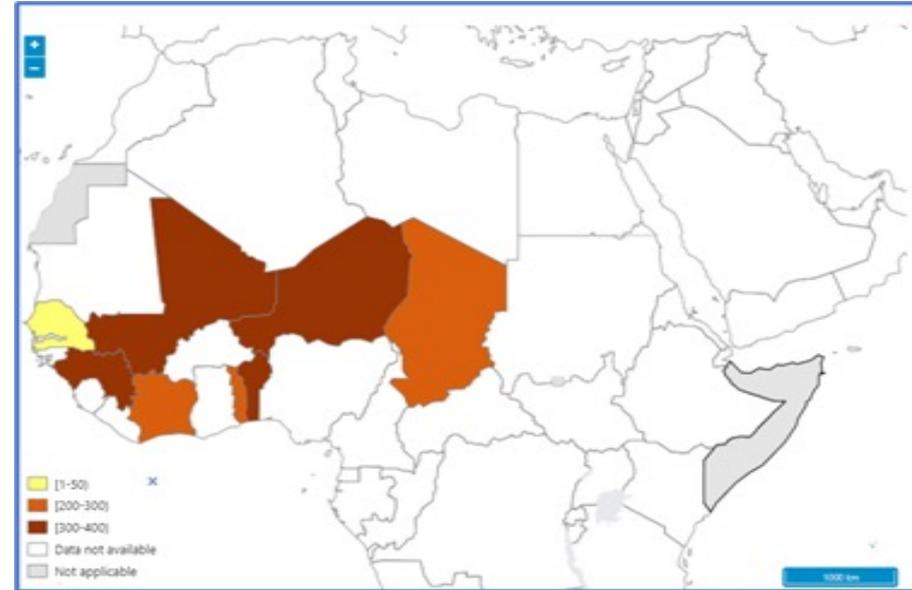
Operationalization strategies and mechanisms

- Integrated and multi-sectoral approach
- Harmonization and convergence of priority interventions
- Communication and Visibility
- Planning, Monitoring-Evaluation, Research and generation of evidence
- Development of strategic partnerships

Malaria in Pregnancy in the 9 Muskoka countries: Context



Estimated number of malaria cases in 2020 – WHO/GHO



Estimated malaria incidence (per 1000 population at risk) – WHO/GHO

In 2020, all of the 9 Muskoka countries were among the 33 moderate and high transmission countries (*World malaria report 2021*)

In 2020, the estimated annual number of malaria cases among Pregnant Women: around 2 millions (*Calculated based on malaria incidence in the Muskoka countries*)

Annually, more than 500 000 children with low birthweight with high contribution of Malaria (*WHO/GHO*)

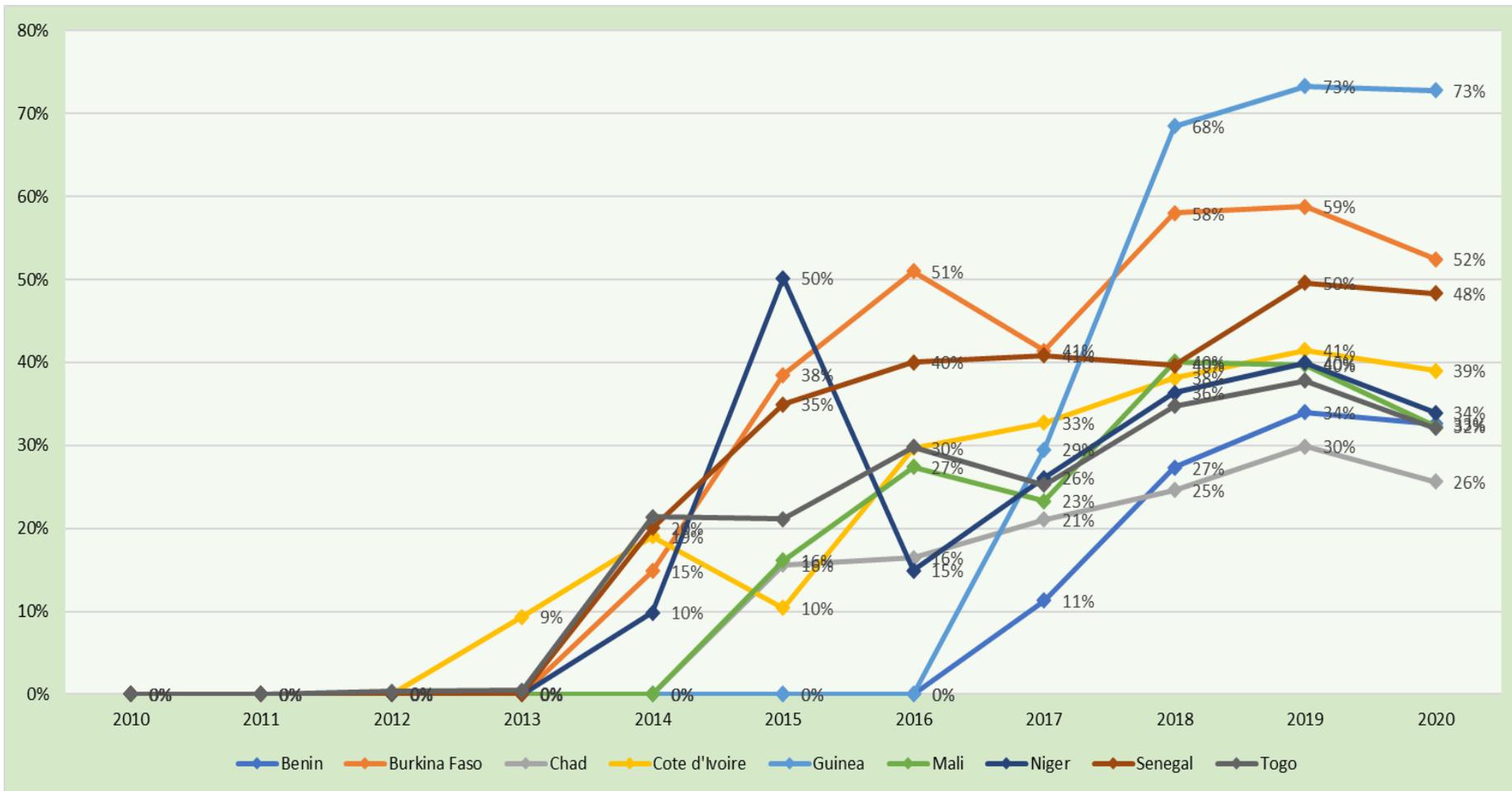
Malaria in Pregnancy in the 9 Muskoka countries: Interventions for pregnant women

Malaria infection during pregnancy can have adverse effects on both mother and fetus, including maternal anemia, fetal loss, premature delivery, intrauterine growth retardation, and **delivery of low birth-weight infants (<2500 g)**.

The recommended interventions for pregnant women are:

- Use of insecticide-treated bed nets
- **Intermittent preventive treatment (IPTp)** (for HIV negative women in high transmission areas)
- Effective case management (diagnosis and treatment of illness)

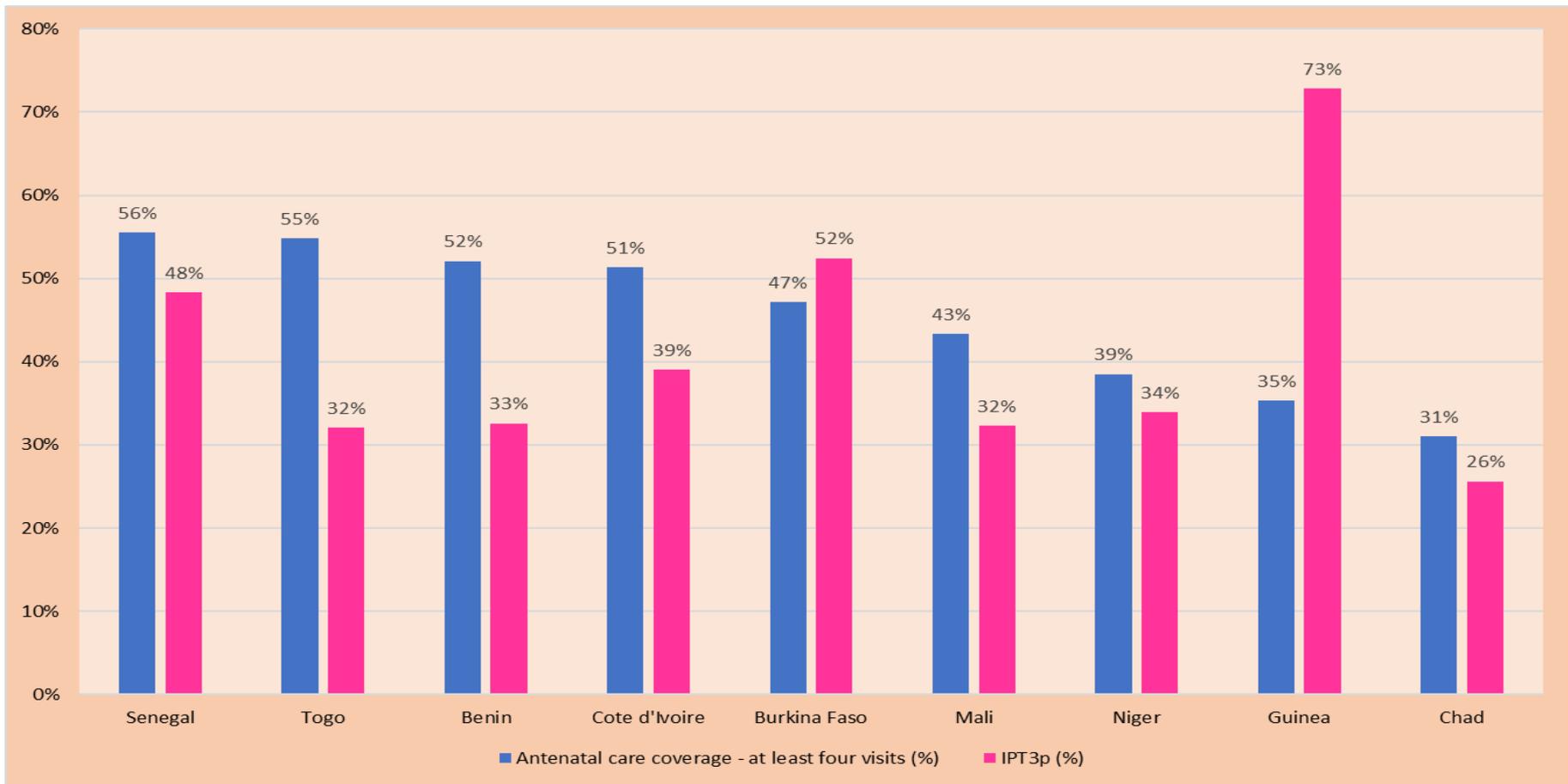
Malaria in Pregnancy in the 9 Muskoka countries: Coverage of IPTp3



<https://www.who.int/data/gho/data/indicators/indicator-details/GHO/pregnant-women-attending-antenatal-care-at-least-once-and-receiving-at-least-3-doses-of-intermittent-preventive-treatment-of-malaria-for-pregnant-women-ipt3>

- In 2020, only 2 out of 9 countries have IPTp3 coverage above 50%
- The general trend shows an increase: +71% on average

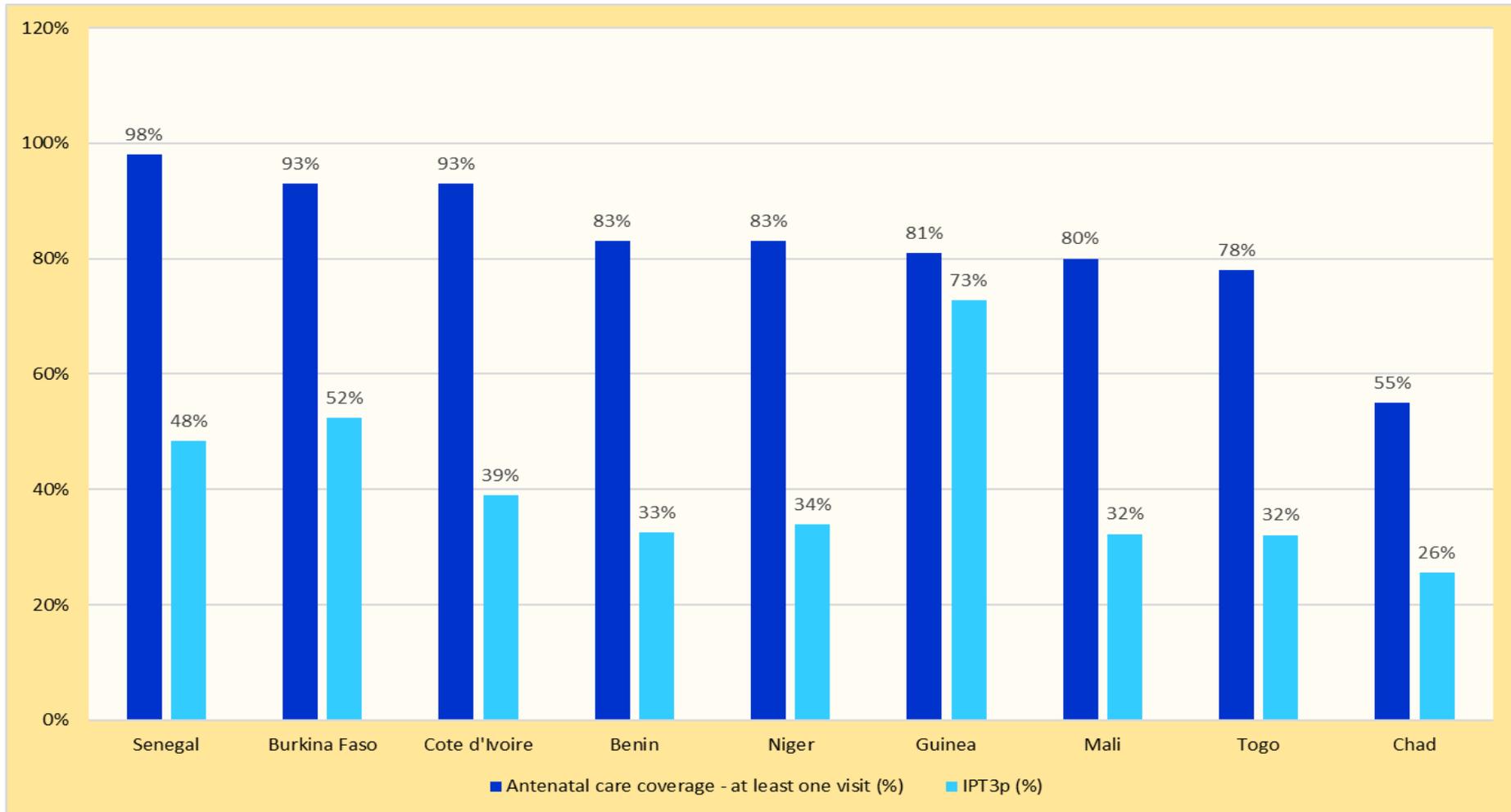
Malaria in Pregnancy in the 9 Muskoka countries: Coverage of IPTp3 vs ANC4



<https://www.who.int/data/gho/data/themes/topics/topic-details/GHO/maternal-and-reproductive-health>

- Several missed opportunity during the 4 ANC contacts
- Issue in service delivery

Malaria in Pregnancy in the 9 Muskoka countries: Coverage of IPTp3 vs ANC1



<https://www.who.int/data/gho/data/themes/topics/topic-details/GHO/maternal-and-reproductive-health>

- Several missed opportunity
- Issue in health system (accessibility, service delivery and demand)

Common key challenges for ANC and IPTp in the Muskoka countries

❖ Human resources

- Inadequate capacity among health workers particularly new staff
- Heavy workload among health workers particularly in rural areas

❖ Service delivery

- Low quality of antenatal care (guideline not respected)
- Insufficient timely and effective supervision due to limited resources (fuel, per diem and vehicles)

❖ Demand

- Mothers not aware of the benefits of IPTp
- Mothers not motivated to complete 4 ANC visits

❖ Accessibility

- Insufficient timely and effective outreach sessions particularly for remote areas due to limited human and financial resources (fuel, per diem and vehicles)
- Financial barriers

Key strategies to increase the coverage of ANC and IPTp in the 9 Muskoka countries (Muskoka 3.0 2022-26)

❖ Human resources

- Regular in-service training for health workers particularly new staff
- Ensure sufficient number of health workers particularly in rural areas

❖ Service delivery

- Provide updated guidelines and tools relevant to IPTp in all health facilities
- Provide sufficient resources for regular supervision

❖ Demand

- Increase sensitization of mothers and communities on regular attendance of ANC
- Promote the benefits of IPTp in the communities and social media

❖ Accessibility

- Provide sufficient resources for outreach sessions particularly for remote areas
- Strengthen financial accessibility with social protection mechanisms

Key Messages

1. Malaria remains a serious threat during pregnancy
2. IPTp3 coverage is increasing but still low
3. There are opportunities to increase IPTp3 coverage (ANC, partners)
4. Strong coordination, monitoring and evaluation are important to joint efforts and check the progress
5. “Le Fonds Français Muskoka” is highly contributing to increase ANC and IPTp3 coverage



LE FONDS FRANÇAIS MUSKOKA

Pour la santé et le bien être des femmes,
des nouveau-nés et des adolescent.e.s



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