



ANNUAL | 2018 REPORT | ∞



MAKERERE UNIVERSITY CENTRE OF EXCELLENCE
FOR MATERNAL NEWBORN AND CHILD HEALTH





Contact us:-

Dr Peter Waiswa -

Associate Professor
and Centre Team Leader

Email: pwaiswa@musph.ac.ug

Tel: +256 772405357/0414530291

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Abbreviations

EQUIST	Equitable Impact Sensitive Tool
MaKSPH	Makerere University School of Public Health
MDGs	Millennium Development Goals
MNCH	Maternal, Newborn and Child Health
NGO	Non-Governmental Organisation
SDGs	Sustainable Development Goals

From our leaders

The Department Head speaks



At the Department of Health Policy Planning and Management we believe in harnessing science to improve service delivery and influence policy and practice.

We are doing this through our core mandate of teaching, conducting research, and engaging in

community service through partnerships with several stakeholders.

We not only teach in class but also influence in-service health workers, districts and communities as demonstrated in our research work through which we have built synergies with critical entities ranging from communities to the Ministry of Health and other strategic stakeholders.

Yet again, our MNCH Centre annual report demonstrates our aspirations through the work that has been done in the course of the year. As management we pledge to continue supporting this work and we thank you for your continued support. We look forward to another fruitful year.

Dr Elizabeth Ekirapa-Kiracho,
Head, Department of Health Policy Planning and Management
Makerere University School of Public Health

Remarks from the School DEAN



Teaching & learning, research and service delivery are at the very core of Makerere University, and we are inspired by these core responsibilities in our quest to become the leading centre of excellence in providing Public Health leadership.

At Makerere University School of Public Health (MakSPH), we aim to create a vibrant innovation environment and developing solutions to benefit our communities. Over the years, MakSPH has made a tremendous contribution to public health training, research, and to the development of public health policies in Uganda and beyond.

The Maternal Newborn and Child Health Centre of Excellence is one of the avenues through which we execute our responsibilities. This has been done through several implementation science research studies that have contributed to improving health services and subsequently to the development of the country.

This annual report showcases the activities of the centre and partnerships that have resulted into success during the year 2018. These developments have been reached with your support and we hope to continue working together. Thank you!

Dr Rhoda Wanyenze
Professor and Dean, Makerere University School of Public Health

Message from the Centre Lead



Greetings! We have come to an end of, yet another year and our star still shines brightest! We have grown our grant portfolio and have brought new partners on board. We have

built capacity for MNCH not only to deliver healthcare but also for evidence-based decision making. We have taken accelerated bold steps in building a regional model for MNCH care, published, disseminated and engaged in knowledge translation, to mention but a few.

But even as we end 2018 on a high note, we cannot underestimate the task ahead of us. Very many mothers, newborns, children and adolescents are still dying in our communities largely because of preventable causes. The knowledge to

save mothers, newborns, children and adolescents exists but challenges in operationalizing the evidence still exist. It is not a one size fit all. We are thus compelled to soldier on motivated by our need to reduce the preventable deaths, motivated by the need to see children not only survive but also thrive.

But we are not without hope, the vibrant team at the Centre will continue working tirelessly to deliver the evidence and innovations and are not about to slow down now! I am confident that you too are actively engaging in this struggle in one way or another. I also take this opportunity to appreciate our partners and collaborators for your contribution to this success and the continued support, confidence and positive criticism you give. Together, we make a formidable team!

May you have a prosperous 2019.

Dr Peter Waiswa
Associate Professor and Centre Team Leader
Makerere University Centre of Excellence for Maternal Newborn and Child Health

About Us

Who we are

The Makerere University Centre of Excellence for Maternal Newborn and Child Health (MNCH) is a one stop centre for MNCH focused research, innovation and capacity building in Uganda and the region. Established in 2013 at the Makerere School of Public Health, we strive to meet the ever-growing demand of increasing access and availability of reliable knowledge and information to stimulate action and service delivery through a collaborative and multidisciplinary approach. We are a multidisciplinary team and work in partnership with a multitude of stakeholders at both community and health facility to implement lifesaving interventions for mothers, newborns and children.

What we do?

We are engaged in MNCH research and innovation, capacity building for MNCH, as well as knowledge management and translation in order to impact daily practice and policy.

Our goal

To build champions for MNCH through health innovation, capacity building, evidence generation and influencing policy.

Vision

A Uganda and region where high quality evidence drives policy and practice for MNCH

Achievements for 2018

2018 marks our sixth anniversary and we are proud that our star continued to shine. The Centre continued its upward trajectory with growth in finances, human resources, partnerships and collaborations, capacity development and more projects.

- The centre has mobilised a multidisciplinary team of thirty highly trained and self-motivated researchers who form its core team and are engaged in its day to day activities around research, capacity building and knowledge management.
- Our researchers produced over 20 publications in 2018 and currently run projects spanning all areas of research from discovery, delivery to policy at a local and a global level.
- Outside Makerere University, we are currently working with partners in Uganda like Ministry of Health, KCCA, UNICEF, WHO, Living Goods to mention but a few. Our other work partners include African Population Health Research Center, and globally including 5 Health Demographic Surveillance sites (Matlab in India, Dabat in Ethiopia, Kintapo in Ghana, Bandim, and Iganga Mayuge, Kyamulibwa HDSS in Uganda) and over 7 Universities around the globe such as University College London, London School of Tropical medicine, John Hopkins University, Harvard T. H Chan school of Public Health, Mbarara University, Karolinska Institutet, among others.

Details of these achievements and many more are expounded in detail under three core themes of research, capacity building, as well as knowledge management and dissemination.

Building Capacity for MNCH in Uganda and beyond

In line with our strategic objective of building internal and external capacity for MNCH, the Centre conducted several capacity building activities including trainings for health workers, capacity building through placements and career development among its staff.

Among the trainings conducted in 2018 were: The Ultrasound Scan training for midwives, PRONTO simulation training for obstetric emergencies, Advanced newborn skills training among others. We also conducted mentorships and support supervision for our trainees to ensure that the knowledge they acquired during the trainings was retained and being applied. The details of the trainings are highlighted below:

Ultrasound scan training for midwives

Eleven health workers including nurses, midwives and two medical officers were trained in ultrasound imaging at Iganga Hospital. The training conducted in October was delivered through lectures and practicum sessions based on the Objective Structured Clinical Exam (OSCE) and Ultrasound Simulation Training curriculum. It was facilitated by trainers from the University of California San Francisco and a Ugandan based ultrasound advisor. This training was to equip health workers with basic skills to conduct an ultrasound scan during triage of pregnant women in labour with the aim of improving outcomes and quality of care for mothers and newborns through identification of potentially complicated cases during triage. The same training was also due to be extended to three high volume Health Centre IVs that regularly refer to Iganga Hospital.



A midwife at Iganga Hospital undergoes training on the use of an ultrasound

Pronto Training

PRONTO is an innovative low-tech simulation-based team training programme that aims to optimize care provided during obstetric and neonatal emergencies in low-resource settings. As part of its sustainability plan, this year saw the Preterm Birth Initiative (PTBi) project train 2-3 facility-based trainers at each the four intervention sites to support the ongoing on-job mentorship and facilitate simulations as part of maternity and antenatal ward CMEs. Similarly, each facility got a simulation kit. The same is planned in 2019 for the two previous control sites now also implementing the full PTBi intervention package.

Also, with support from the PTBi team, the COMONETH project conducted a PRONTO training with 56 health providers in Luuka District. The training which included midwives, nursing officers, clinical and medical officers was conducted in two rounds in October and November to give opportunity to every frontline provider working in maternity/postnatal ward to participate in the practicum. This brings the total health workers trained in PRONTO to approximately 300 in the Busoga region since PTBi started.



A trainer in a practical session demonstrating how to take care of a preterm baby immediately after delivery during PRONTO training

Advanced newborns skills training

We built skills of health workers in managing newborns through an advanced newborn training course where a total of 136 health workers of all cadre categories in the Busoga sub region were trained. Of these 22 were from hospitals while 114 were from lower level facilities across the region. This will aid in reducing the high perinatal mortality within the region.



VHT training and supervision

We trained and reoriented 258 Village Health Team (VHT) members and continue to support them through support supervision in Luuka District. The VHTs conduct home visits to the pregnant women and newly delivered mothers from within their respective areas of operation to remind mothers on the benefits of ANC, health facility deliveries and Post-natal care.

Mentorship and support supervision

Beyond the trainings, we conducted mentorship and support supervision visits to support skill retention among the health workers we trained in different skills. The mentorship and support supervision were conducted at six hospitals (Jinja, Iganga, Kamuli General, Bugiri, Buluba and Kamuli Mission) and seven high volume lower level facilities (Health Centre IVs) including Busesa, Namwendwa, Kigandalo, Buyinja, Bumanya and Budondo in Busoga region by mentors from both regional and national level including but not limited to members from professional bodies like the Association of Obstetricians and Gynecologists of Uganda and Uganda Paediatric Association.



Consultant Obstetrician/ Gynaecologist Dr Kazibwe Lawrence in clinical mentorship session at Jinja Hospital

Learning visit

In a bid to draw lessons from others, in May 2018 the Preterm Birth Initiative Uganda organised a study tour to Kiwoko Hospital in Nakaseke District in Central Uganda. On the trip were six midwives drawn from the PTBi affiliated six hospitals in the Busoga Sub region. The Objectives of the visit included:

1. Learning from Kiwoko's experiences on what works in terms of set up of their neonatal care unit, how it is managed,
2. Learning from Kiwoko's experiences in monitoring of preterm and sick newborn babies particularly in vital signs observation and feeding and,
3. Learning from how Kiwoko Hospital runs their newborn follow up clinic.



A senior neonatal nurse at Kiwoko explains the operations at the facility to visiting midwives

Student placements

We hosted Ms Susie Gurzenda from The Harvard T.H. Chan School of Public Health for placement in our community-based field sites in Eastern Uganda. During her placement, she was attached to the Maternal Newborn Scale Up (MANeSCALE) project and was engaged in both the facility and community-based activities. Details about her placement, the lessons learnt are shared in a blog she authored and was uploaded onto our website.



Advancing research and innovation in key priority MNCH areas

Our research grant portfolio grew with four additional grants received in 2018. Our new projects focus on implementation science and discovery. With this growth, our area of operation has expanded from rural to urban settings, especially Kampala and so have our collaborations. The new projects are highlighted below:

The Kampala Slum Maternal Newborn (MaNe) Project

The project will be implemented in the slum communities and informal settlements in the divisions of Rubaga and Makindye in Kampala City. The aim is to initiate and test innovative interventions/approaches that address the demand and supply side barriers affecting illness recognition, care seeking, effective referral and provision of quality care equitably for better MNH outcomes in urban slum settings in Kampala city. The project will be implemented in collaboration with Kampala City Council Authority and Population Services International (PSI) under three core project functions namely: i) Implementation function-to be jointly led by PSI and KCCA. ii) Evaluation & Learning function-to be led by MakSPH. iii) Policy function-to be led by KCCA. KCCA will work closely with PSI to continually disseminate learnings and effective approaches to improving MNH for the urban poor. Consequently, effective approaches will be adopted and scaled-up to address urban MNH needs in collaboration with Ministry of Health and other stakeholders. Funding is by USAID.

N-COP Study

An algorithm to predict newborn complications in the First 28 days of life at Iganga General and Jinja Regional Referral hospitals. The study's main aim is to develop risk algorithm for prediction of newborn complications among preterm and term newborns and will be implemented in two

hospitals in Eastern Uganda (The Jinja Regional Referral Hospital and the Iganga General hospital). It is a prospective cohort study that will follow-up newborns until 28 days after delivery. Funding is from the East Africa Preterm Birth Initiative (PTBi-EA).

Health outcomes of newborns following preterm birth in the first year of life

Using a prospective cohort design, this study seeks to assess the health outcomes of babies born preterm after 28 days in the first year of life. Study participants will be recruited from Jinja regional referral hospital, Iganga, Bugiri, Kamuli, St. Francis Buluba district hospitals and Kamuli Mission hospital. This study is funded by the Bill and Melinda Gates Foundation (BMGF) through UCSF Preterm Birth Initiative- East Africa (PTBi-EA).

Preterm birth phenotyping study in Iganga Hospital

With funding from the East Africa Preterm Birth Initiative (PTBi-EA), this study seeks to determine the prevalence of preterm birth phenotypes at Iganga Hospital in Eastern Uganda. We anticipate that the study findings will contribute to the first step in operationalizing a comprehensive classification system, which will be useful in identifying potential mechanisms for preterm births, aiding in clinical management, and identification of areas of interest for intervention and study.

Communications

We have throughout the year used various platforms to disseminate MNCAH knowledge. Our platforms included the website (www.mnh.musph.ac.ug), newsletter (MNCH e-Post), conferences, presentation at different fora and publications to share critical MNCH knowledge.

TV appearance



(UBC) to discuss World Prematurity Day and the preterm births in Uganda, what can be done to prevent them or help the babies born preterm to survive. This video and many others including the dissemination of findings from the Community Scorecard study can be found on our You Tube channel Maternal Newborn Child Health Media which is searchable via the social media platform's search engine.

Newsletter: In 2018, we sent out 14 issues of our MNCH e-Post to 21,727 readers cumulatively with an average of 1524 readers each month. 8977 readers out of the 21727 readers read at least one article. Majority of the readers 35.2% were from the USA, followed by Ugandans at 22.6%. Subscription to the newsletter is free. Archives of it can be found on our website (www.mnh.musph.ac.ug).

Centre in the media

In this article, the spotlight is on how our work in Eastern Uganda has contributed to saving preterm babies https://www.newvision.co.ug/new_vision/news/1482889/health-workers-saving-preterms-simple-interventions

This year we got a nod from the Swedish Ambassador, HE, Per Lindgärde as one of the budding Centre's of Excellence that have engaged in critical research that has impacted policy and practice. The article published in the daily monitor can be accessed at: <https://www.monitor.co.ug/OpEd/Commentary/Sweden-remains-the-largest-donor-to-research-capacity-in-Uganda/689364-4832608-jr7ru/index.html>.

Social media engagement



Facebook (@MakMNCH Centre)

- Likes: 868
- Followers: 878
- Fanbase gender: 61% male, 38% female
- Reached: 60% male, 40% female
- Engaged: 62% male, 36% female

Twitter (@MNCH_Centre)

- Followers: 652
- Following: 752
- Tweets: 604
- Impressions: 48700
- Engagements: 965

Conferences, Seminars and Presentations

Joint Annual Scientific Conference

Makerere University College of Health Sciences in collaboration with Uganda National Association of Community and Occupational Health held the 14th Joint Annual Scientific Conference from 26th to 28th September 2018 at the Kampala Golf Hotel. The conference held under the theme “Research, Innovation and Resources for meeting the health-related Sustainable Development Goals (SDGs)” was attended by over 300 delegates including academia, students, implementers, policy makers to mention but a few. Apart from co

funding the conference the Centre also hosted an organized session under the theme: “Preterm Care in Uganda: Current challenges and potential health system solutions.” Key issues regarding MNCH were: i) inequality in access and choice of family planning commodities is apparent, ii) both maternal and neonatal mortality are still unacceptably high with a call to focus on urban areas that have longtime been neglected and lastly, there is need to move from the slogan “integrated services for mothers and children” to action.



Preterm Birth Initiative Annual Symposium:

The 2018 Preterm Birth Initiative Symposium held in Kigali Rwanda in October explored what quality, equity and dignity mean in the context of preterm birth. The symposium facilitated cross-collaboration between the East African and California arms of the PTBi and convened East African partners and stakeholders to explore topics such as respectful maternity care, interventions for improving quality of care, collaboration to leverage knowledge into power and quality improvements through translational research.



Rwandan Health Minister opens the symposium

Seminar

Improving hospital care for children and newborns – a learning health systems approach in Kenya:

This seminar by Prof Mike English from KEMRI- Wellcome Trust highlighted the importance of how having a data network can improve the quality of neonatal and child care in Hospital setting by not only improving the quality and timeliness of data collected but also using that data to form the basis of evidence based decision making.

Policy engagement

Regional dissemination in Jinja: We conducted the first ever regional dissemination meeting (below) on March 28, 2018 at the Civil Service College, Jinja. The aim of the event was to engage and share experiences, lessons learnt from a decade of implementing MNCH interventions with policy makers at Subnational level from Eastern Uganda. Over 200 delegates attended including the area politicians such as Members of Parliament, district technical heads, representatives of other implementing organizations, Ministry of Health Representative, researchers and the health workers in the region. From the meeting, the politicians pledged to work together with the district technical heads and health workers to purposively work towards improving MNCH. This meeting also set pace for the formation of an MNCH social media platform.



Maternal Health Academic Consortium Meeting

As researchers, we often generate data but often this potentially impactful evidence is never critically used. To address this challenge, the first Maternal Health Academic Consortium Meeting was conducted from 20th to 22nd February 2018 in Entebbe, Uganda. Specifically, the meeting aimed to: i) Foster collaboration between junior, mid-career and senior maternal health researchers in the Global South and Global North, ii) Identify research gaps and priorities for conducting impactful, multi-disciplinary, rigorous and collaborative research and building of strategic partnerships and iii) Promote the growth of a new generation of maternal health researchers through the identification of training opportunities and mentorship mechanisms. 49 participants including junior, mid-career and senior level maternal health researchers from Africa, Asia, Europe, North America and Latin America with varied experiences and vast expertise in several disciplines within the maternal health field attended. This meeting was co-hosted by the Maternal Health Task Force/Women and Health Initiative at the Harvard T.H. Chan School of Public Health and Makerere University Centre of Excellence for Maternal Newborn and Child Health was

Countdown 2030

Following the global call evidence-based planning, the need for targeted action to strengthen the capacity for analysis, synthesis, validation and use of health data in countries to inform policy, accountability equity, the use of national data has become paramount. Working with the African Population Health Research Center, we engaged in the Eastern and Southern Africa (ESA) regional initiative of Countdown 2030. The overall goals of the ESA initiative are to: 1) strengthen the evidence in support of reproductive, maternal, newborn, child, and adolescent health and nutrition (RMNCAH&N) programs through multi-country studies; 2) enhance the capacity of country and regional institutions to conduct RMNCAH&N-related analyses and research and effectively communicate the findings to policy makers.

In 2018, we delivered two products; An equity analysis of RMNCAH under the theme “Leaving no woman and child behind: Levels, trends and inequalities in indicators for reproductive, maternal, newborn, child and adolescent health in Uganda” and a midterm review of the Health Sector Strategic and Investment Plan Uganda 2015/16-2019/2020.

A regional approach to improving MNCH quality

Operationalisation of neonatal care units in Health Centre IVs in Busoga region

Delivery of quality health care in facilities is limited by lack of adequate space, skill sets and shortages of critical drugs and supply. Through the MANeSCALE (Maternal and Newborn Scale-Up) and COMONETH (Community in which mothers and newborns thrive) projects, we have renovated and, in some instances, constructed newborn care units in six lower level facilities namely Busesa, Kigandalo, Budondo, Namwendwa, Buyinja and Bumanya. This was done to bring the units to a standard at which adequate newborn care is provided



Renovation and construction newborn care units at Health Centre IVs

Functionalization of Kiyunga HC IV theatre

For a long time, Kiyunga HCIV had a nonfunctional theatre due to lack of critical human resources. This in turn affected the maternal and neonatal outcomes in the district. In this financial year, the COMONETH project supported the recruitment of a medical doctor and an anesthetic officer and deployed them to Kiyunga HC IV to functionalize and operationalize the theatre. Their services have improved the quality of care and made the much-needed theater services available and accessible to those in need. As at the end of December 2018, twenty-two C-sections had been conducted since mid-September when the two were recruited.





Provision of catalytic drugs, equipment and supplies to facilities for maternal and newborn care

These included antibiotics, anticonvulsants, equipment such as monitors, incubators, phototherapy machines etc. Other supplies distributed included: HCG testing kits and Urine sample collection containers. We also provided gowns and sandals for use by mothers/caretakers in the newborn care units.

“Left: The COMONETH study coordinator handing over HCG testing kits and Urine containers to Luuka district the district. R: A mother in the special care unit of JRRH donning a gown donated by the MANeSCALE Project”



World Prematurity Day commemoration in Uganda



Through our PTBi Project we supported the World Prematurity day commemoration in Arua District. At this event, we also donated tiny caps to be given to preterm babies at the newly opened KMC ward at Arua Regional Referral Hospital.

Corporate social responsibility

Tiny hats for tiny babies campaign



PTBi Uganda Programme Manager hands over the hats to Jinja Hospital administrators

Prematurity is a leading contributor of newborn death in Uganda. Unable to regulate their temperatures, they are vulnerable to hypothermia and even death. Fortunately, tiny hats can give tiny babies a fighting chance! Through the PTBi project, we continuously gave out baby hats secured through the Tiny Hats for Tiny Babies global campaign which aims at raising awareness about neonatal mortality.





Human breast milk bank campaign

St. Francis Hospital Nsambya is fundraising to open the first human breast milk bank in Uganda. The Breast Milk Bank project aims to provide breast milk to newborns and preemies whose mothers are not in position to immediately breastfeed. At this year's fundraising event, the centre bought the auction item at UGX 900,000 while members made individual donations and pledges totaling USD 1050 and UGX 1.5 million.

“
We bought this
auction item
as part of our
contribution
”



Plans for 2019

- Conduct more policy engagement activities through disseminations and presentation at technical committees
- Actively seek to grow our collaborations and partnerships
- Convene the annual Maternal, Newborn and Child health conference
- Countdown to 2030 Analysis
- Engage in resource mobilisation activities like Grant writing, offering consultancy services
- Break into new research area; urban MNCH
- Engage in corporate social responsibility services

Connect with us:

Dr Peter Waiswa -

Associate Professor and Centre Team Leader

Email: pwaiswa@musph.ac.ug,

Tel: +256 772405357/0414530291

Dr Monica Okuga -

Centre Coordinator

Email: mokuga@musph.ac.ug

Website: mnh.musph.ac.ug

Email: mnh@musph.ac.ug



@MakMNCHCentre



@MNHR_Centre



Maternal Newborn
Child Health Media

Publications

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Partners





MAKERERE UNIVERSITY CENTRE OF EXCELLENCE FOR
MATERNAL NEWBORN AND CHILD HEALTH

Website: mnh.musph.ac.ug

Email: mnh@musph.ac.ug



@MakMNCHCentre



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