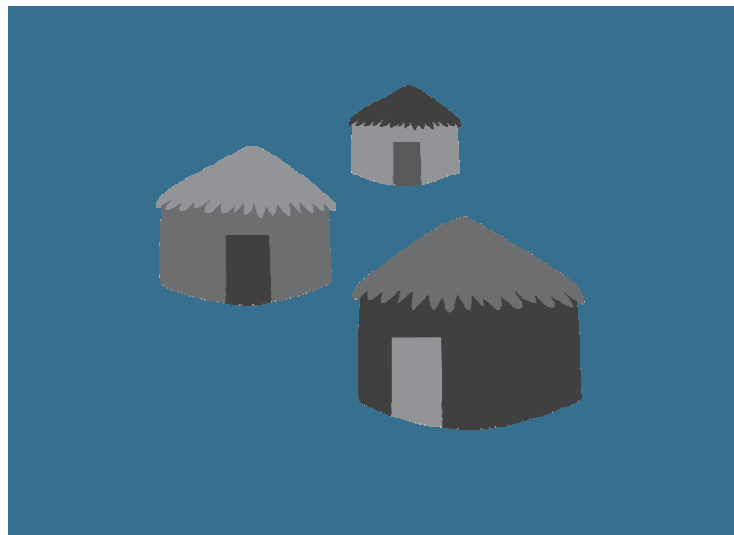


Institutionalizing Community Health Conference



27-30 March 2017 | Johannesburg, South Africa



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Experiences in strengthening transport and referral systems to support referral of newborns –two pilot studies *in eastern Uganda*

Dr. Peter Waiswa, Assoc. Professor
Makerere University School of Public
Health, Uganda & Visiting Researcher
Karolinska institutet, Sweden
Dr Elizabeth Ekirapa, Senior Lecturer



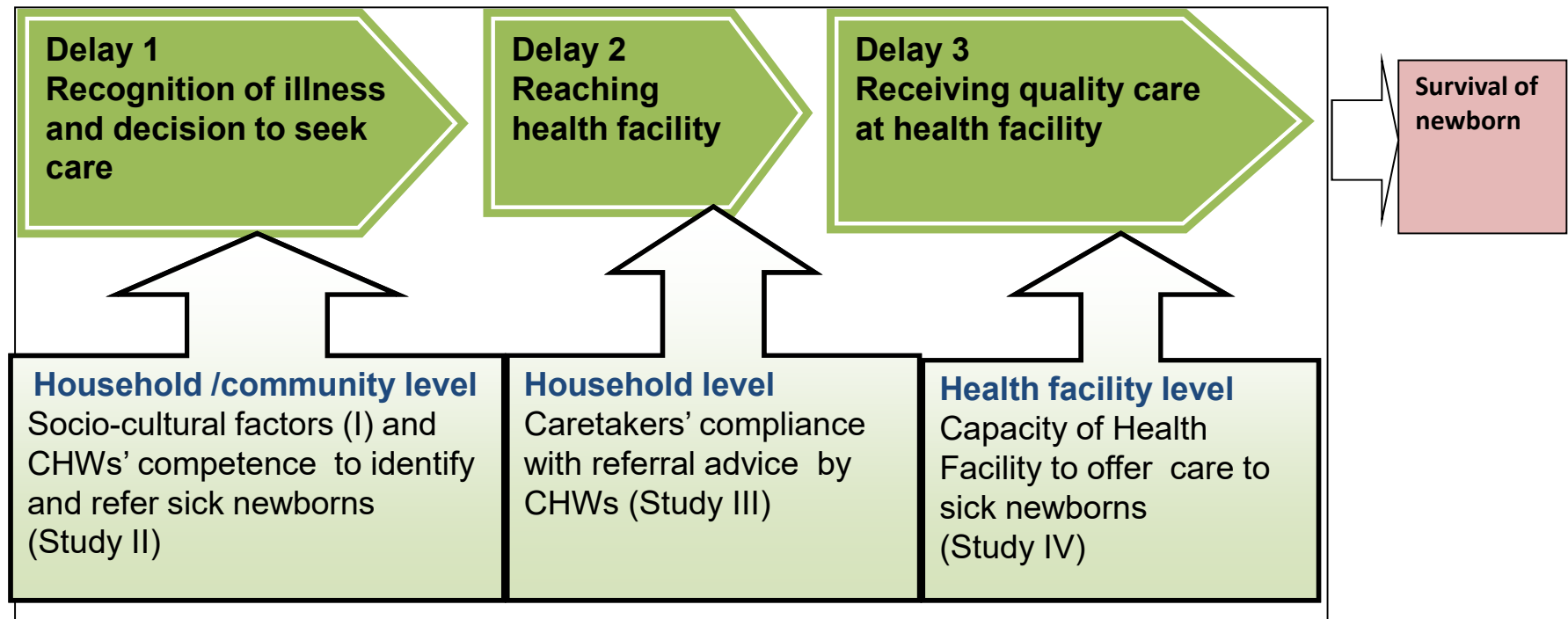
Outline of the presentation



- To conceptualise newborn referral
- To show experiences of community newborn referral through home visits
- To show experiences of a community newborn transport system
- Lessons learned, conclusions and recommendations



CONCEPTUAL FRAMEWORK



Thaddeus and Maine's Three Delays model 1994



UGANDA NEWBORN STUDY (UNEST)

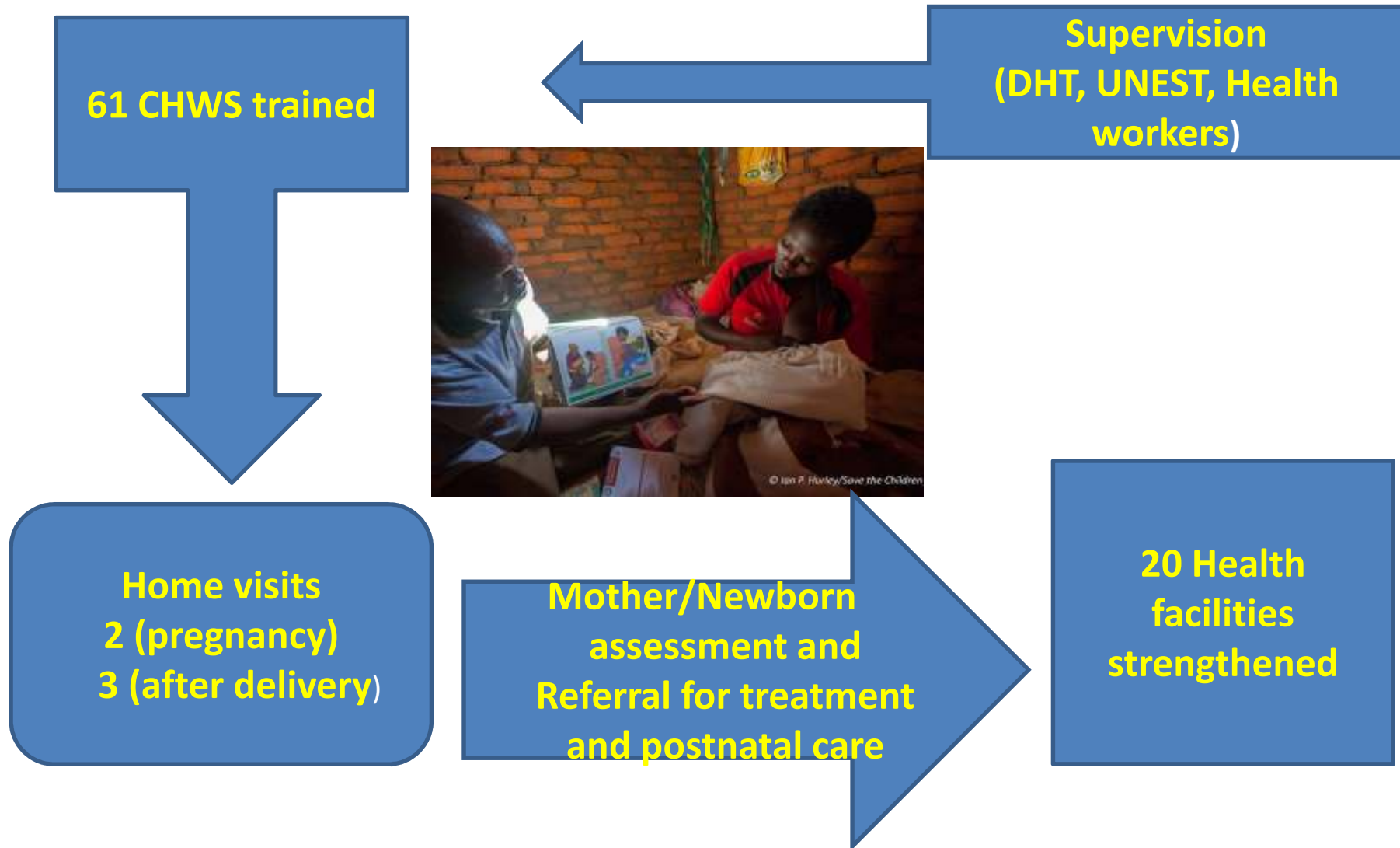


- Iganga-Mayuge HDSS
- 2007-2010
- WHO and UNICEF home visits package





UNEST (2)





Transportation- Safe deliveries study

Variety of transport types

- Motorised transport – personal, taxis (hired), ambulances – broken down, require fuel, few functional
- Motorcycles – common in most rural areas at negotiated prices
- Motorcycle ambulances – in a few scattered places
- Bicycles rather uncomfortable





Safe Deliveries Study



Organization of the transport component

- Transport vouchers to transport women for ANC, delivery, PNC, referral
- Arrangements were negotiated with transporters with involvement of local leaders
- Payment rates negotiated and contracts signed
- Payment by cash, often delayed but contact maintained



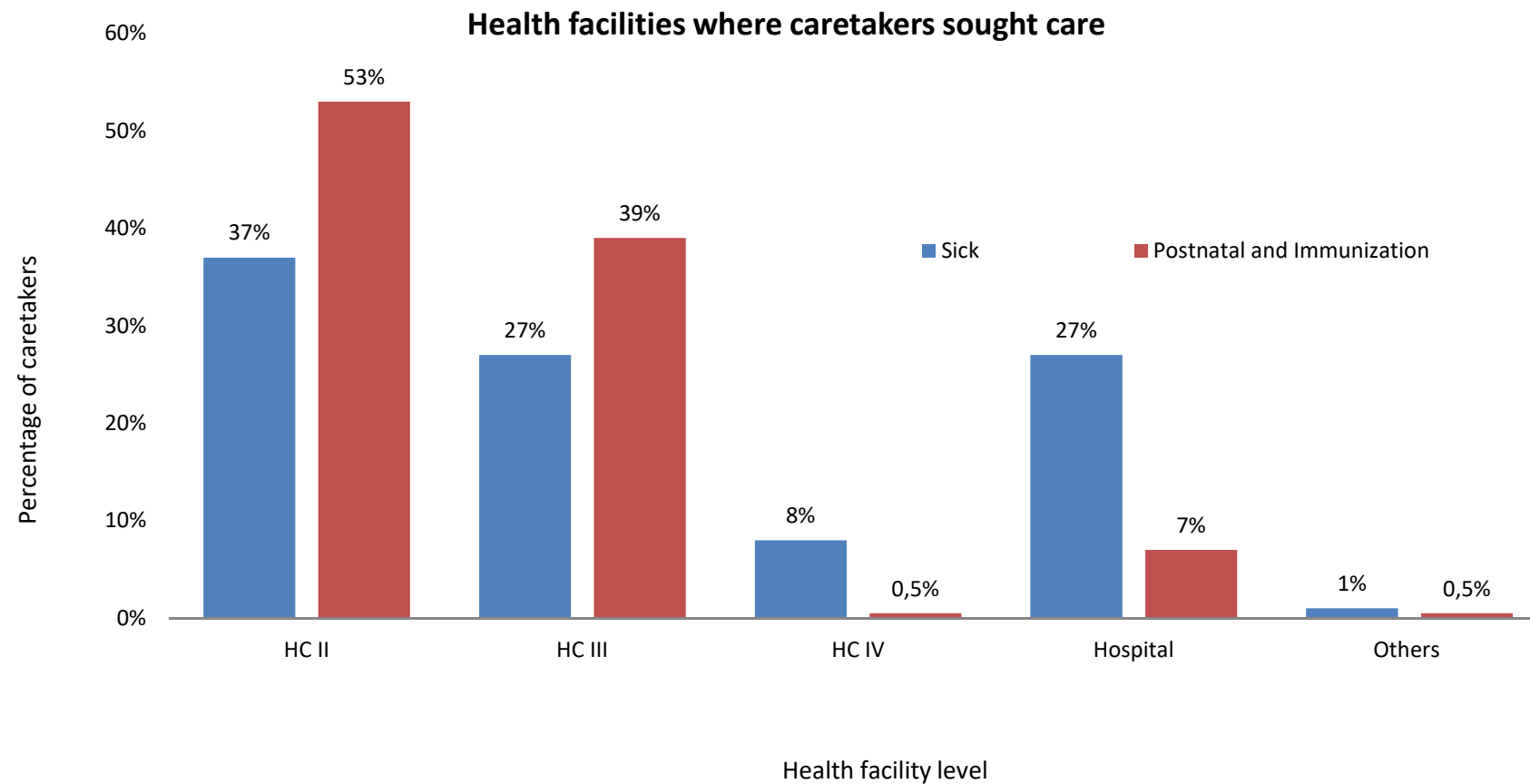
UNEST: KEY FINDINGS



- **Reason for referral**
 - 53% immunization / postnatal care
 - 47% because of a danger sign
- **Caretaker compliance**
 - Overall 63% complied
 - Caretakers of sick newborns (74%) vs (53%) referred for postnatal (p-0.001)
- **Determinants of compliance**
 - Age of mother (25-34 years), AOR 0.4 [0.2 - 0.8] compared to mothers <20 years
 - CHW reminder visit, AOR 1.8 [1.2 –2.7]
 - Sick newborns, AOR 2.3 [1.6– 3.5]

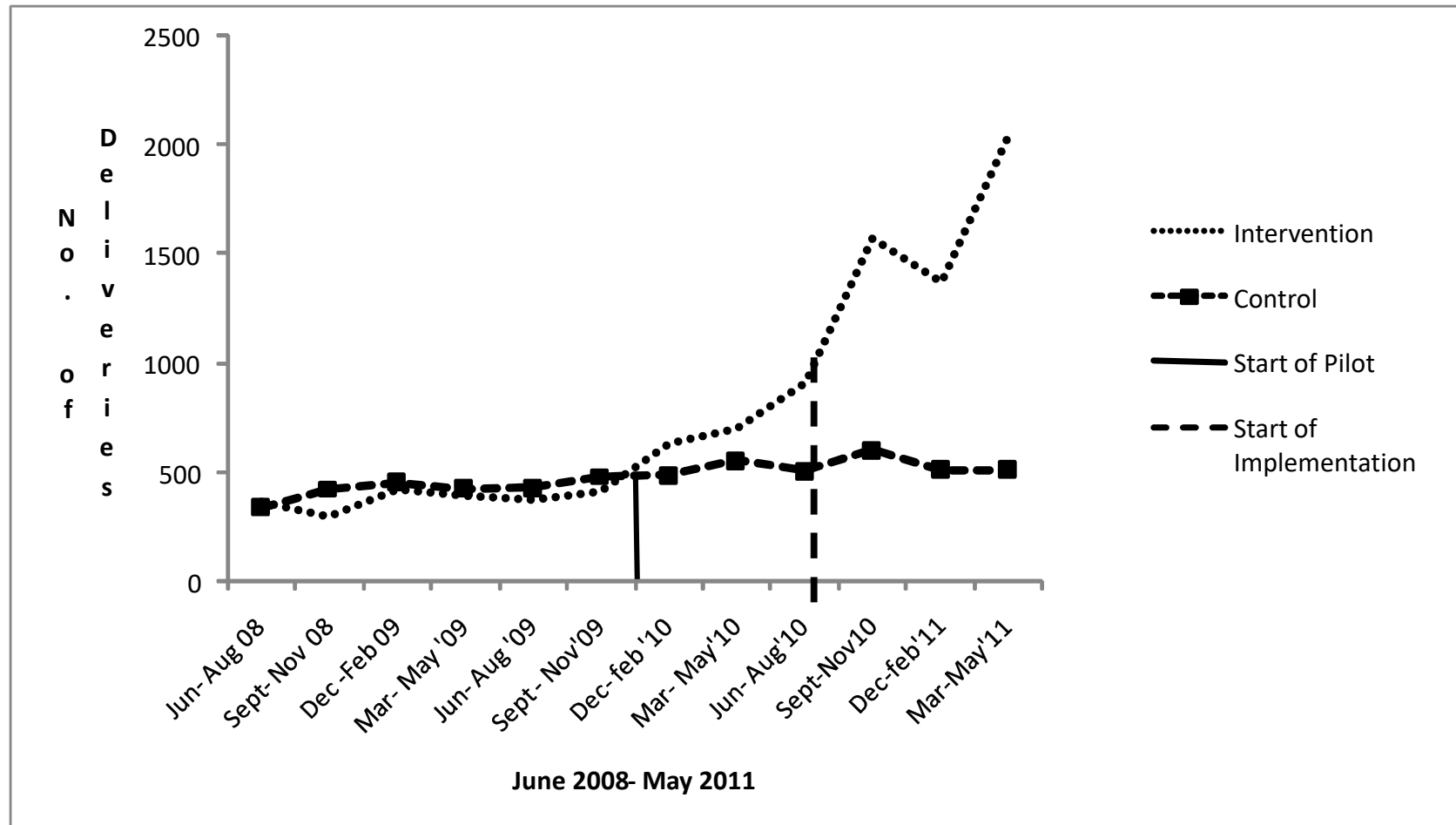


UNEST: KEY FINDINGS



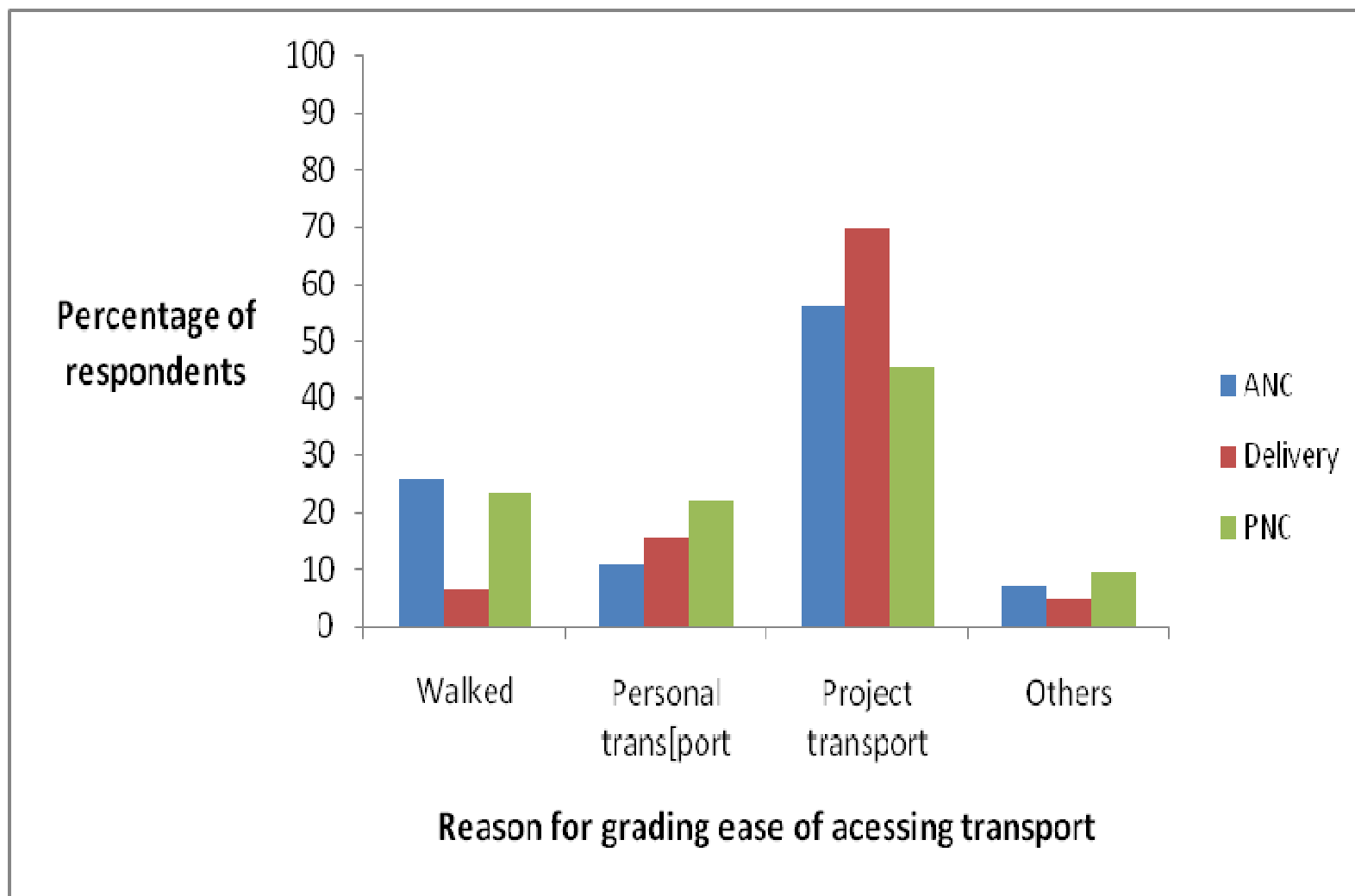


Key findings- Safe Deliveries





Reasons for grading the change in availability of transport services





Take home

- CHWs could enhance caretaker compliance to referrals – but only useful if to appropriate health facility with quality
- Transport systems improve access to care for sick kids and women in labour
- Issues of quality of referral and care at referral health facility, and sustainability remain important



Areas that need improvement – Quality of transportation





Research agenda



- Role for CHWs in referral
- Improving illness recognition and decision to seek care
- Standards and quality of care in referral in different contexts (Community, PHC, etc)
- Quality of care in referral
- Safety of referral systems
- Evaluating referral: effectiveness, efficacy, cost, impact



ACKNOWLEDGEMENTS

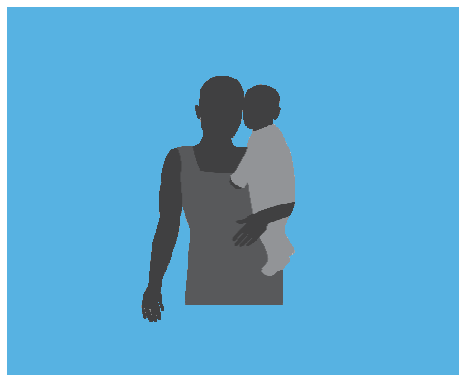
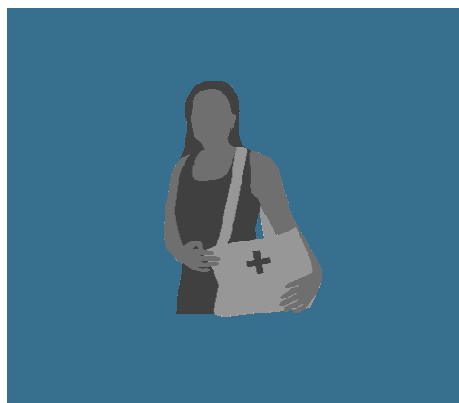


- Ministry of Health
- Iganga and Mayuge District authorities
- Iganga-Mayuge HDSS
- Co-authors and investigators: Christine Nalwadda, Stefan Peterson



THANK YOU FOR LISTENING

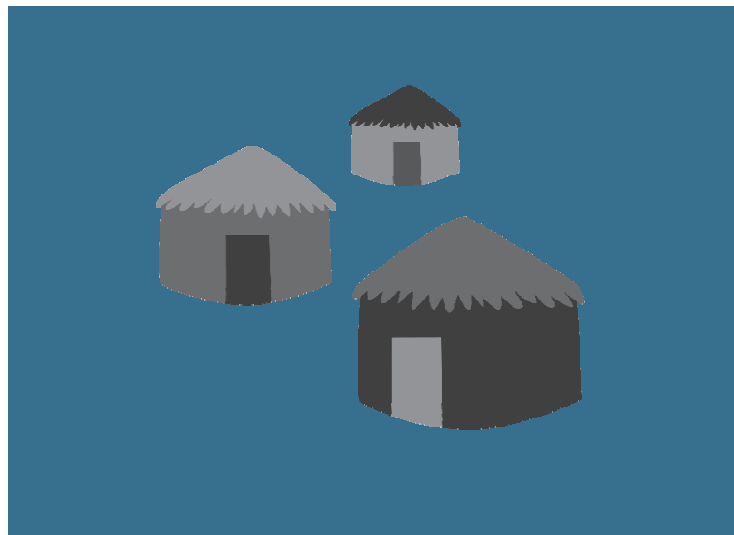




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