

PAKISTAN

An Emergency Maternal Neonatal and Child Healthcare Programme: ESS-EMNCH

What is it?

A programme to help reduce mortality and severe, potentially permanent, ill-health in pregnant mothers, babies and children. It will improve the outcome in life-threatening emergencies by providing the skills and ensuring the availability of drugs, medical supplies and equipment which are essential for effective management in the first few critical hours.



Why is it necessary?

High maternal and child mortality in poorly resourced countries mainly from treatable causes in particular:

- Haemorrhage, fits and sepsis in mothers
- Failure to breathe at birth
- pneumonia and gastroenteritis in children
- major trauma

FIGURES FROM UNICEF AND WHO (STATE OF THE WORLD'S CHILDREN 2005)

Country	No: < 5yr deaths per day scaled to a population size of 50 million	No: maternal deaths per year scaled to a population size of 50 million
Pakistan	506	8963
United States of America	16	123
United Kingdom	9	71

Extremely high levels of severe learning difficulties and cerebral palsy in children from poorly resourced countries mainly from treatable causes in particular:

- absence of adequate management of the mother and baby during labour
- absence of effective resuscitation of the newly born infant
- damage to the brain from lack of oxygen or severe infection in infants and young children
- trauma

In many poorly resourced countries, essential drugs, intra-venous infusions and medical supplies urgently required to treat emergencies are not available until relatives have bought them from local pharmacies.

Inadequate training of staff at all levels (home and hospital based and during transfer).

Lack of basic, inexpensive equipment for treating emergencies (for example self inflating bag and mask systems, suction and oxygen)



Money spent inappropriately on buildings, but too little attention to vital issues such as infection control. Wards and emergency areas are often dirty with insufficient hand washing and sanitation, and no clean water supplies. Inexpensive decoration of patient areas can improve hygiene and morale.

Poor wages and living accommodation for essential staff such as nurses, doctors, ward cleaners and porters leading to demoralisation.

Lack of systems to allow transfer of critically ill patients to facilities in which emergency surgical or medical services are available.

Who is responsible for developing and implementing ESS-EMCH?

This is a collaboration between two medical charities; The Advanced Life Support Group-ALSG (an organisation responsible for developing sustainable and high quality education) and Maternal and Childhealth Advocacy International-MCAI (an international humanitarian aid agency caring for mothers and children in low-income countries)

Components of ESS-EMCH

A sustainable, internationally recognised and quality controlled, resource-appropriate training programme designed for all levels of health workers

Advocacy to ensure essential drugs, medical supplies and equipment are immediately available in the first referral health facility and provided by the local Ministries of Health. This means that National Government must first be engaged.

Advocacy to ensure low cost and appropriate renovation resulting in a hospital that is clean and effective. Local government to undertake basic renovations such as decorating, plumbing, safe water supplies and safe electrical systems.

Advocacy to ensure emergency care is available 24 hours a day.

Advocacy to persuade health professionals and their supporting bodies that training in ESS-EMCH is needed.

Support for and **motivation** of health workers at all levels.

Strengthening of the referral system, integrating home with hospital based care.

How is the quality of the ESS-EMCH programme assured?

ALSG has a powerful system of evaluation and ongoing assessment, utilising international educators to ensure that the courses continue at a high standard appropriate for international accreditation.

How will ESS-EMCH be sustained?

The local National and district faculties will continue to undertake the training with the assistance and support of national, local and district health departments under the supervision of WHO Pakistan and The Gambia.

Scenes from the training

