

IMPACT BRIEF: Improving women's reproductive health in sub-Saharan Africa

Introduction

Despite significant progress in maternal health, nearly 300,000 women died from complications relating to pregnancy and childbirth in 2017, of which 200,000 deaths were in sub-Saharan Africa. Since 2014, the Innovating for Maternal and Child Health in Africa (IMCHA) initiative has made important strides towards improving the lives of women and children in 11 countries in sub-Saharan Africa. Co-funded by Global Affairs Canada, the Canadian Institutes of Health Research, and Canada's International Development Research Centre, IMCHA is an eight-year, \$36 million initiative. IMCHA has supported 28 projects through 19 research teams, as well as two Health Policy and Research Organizations (HPROs).

Research teams worked to educate women, their partners, and key family decision-makers in each household about safe motherhood, the availability and benefits of contraceptive methods, and ways to improve their health. These efforts improved dialogue between women and their partners about women's reproductive health matters and the importance of planning their families. They also empowered women to play an active, informed role in their own reproductive health.

Overview of the challenges

Women from less advantaged communities are more likely to have

- less access to information on sexual and reproductive health and rights;
- unplanned and unwanted pregnancies;
- undiagnosed perinatal depression; and
- higher maternal morbidity and mortality.



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The benefits of improving women's reproductive health

Improving education around and access to family planning can help reduce unwanted pregnancies and prevent unsafe or illegal abortions. With a better understanding of the negative consequences of multiple and closely spaced pregnancies on women's health, couples can make informed decisions about the number and spacing of their children. This leads to lower maternal and child mortality. Additionally, proper prenatal care is critical for better pregnancy outcomes and for detecting and managing perinatal depression.

"Women are now aware of their own rights. They are mobilizing resources that solve their problems. We have [fewer] women dying now than five or six years ago."

Elijo Omoro, Principal Investigator, South Sudan

SUCCESS STORIES

Expanding birth spacing in Nigeria

A research team in Bauchi State, Nigeria, worked to develop a locally appropriate module on *kunika*, or short birth spacing, to discuss spacing between births. The module was incorporated into their universal home visits educational program on maternal and child health. Community health workers received training on the module and conducted home visits to discuss spacing between births.

IMPACT

New **home visits unit** established to sustain the home visits educational programs, including the *kunika* module

About **4,000 women** and their spouses reached through health promotion and education activities during the project's home visits, and specifically the *kunika* module

The **module is now supported** by two colleges for health professionals, and the training program will be scaled up to state level

Improving family planning coverage in Tanzania

In Tanzania's Mara Region, a research team trained community health workers to use mobile phones and conduct home visits to reach women and adolescent girls in vulnerable and difficult-to-reach communities. Home visits included reproductive health education, supply of short-term contraceptive methods, or referrals to health facilities for longer-term family planning. The research team also worked with the district hospital director to create family planning days to increase and promote family planning services and the use of permanent methods. Further, district and regional medical officers committed funding to help community health workers continue promoting family planning in the region.

IMPACT

12 percentage point increase in the number of people who chose long-term family planning methods, rising from 40% in 2017 to 52% in 2020 in the intervention area

More than **8,000 people in 89 villages** received educational messages and have access to family planning methods as a result of these efforts

Reducing maternal mortality in conflict affected areas

A research team in South Sudan's Torit County and Northern Uganda trained facilitators to work with women's groups to identify their priorities and develop appropriate strategies to address them, with the support of community members. Some groups chose to fight malnutrition by growing nutritious foods, while others tackled teen pregnancy by engaging boys and girls, or repaired roads to improve access to healthcare services and schools. As a result, women developed confidence and leadership abilities, and they are practicing healthier behaviours. Women were also empowered to contribute to their family's finances, speak publicly, and approach doctors.

IMPACT

For both settings, between 2016 and 2021, the project noted:

More than **30 percentage point** improvement in facility delivery

Increase from **66%** in 2016 to **80.9%** in 2021 in the number of babies getting their checkup in a health centre after delivery

98% of women reporting significant positive changes attributable to one year after the end of activities

LESSONS LEARNED

Strong local engagement and facilitators contribute to successful interventions

In particular, empowered women can take leadership and provide guidance to other women. They can also encourage women to make informed decisions about their health.

Participatory research can empower women to tackle their health challenges, even in difficult settings

Empowering women to identify challenges and develop their own solutions can improve health, including in conflict and post-conflict settings.

Information, education, and communication on women's health issues can help reduce maternal and child mortality

Increased awareness and open communication between women and men can contribute to increased birth spacing and safe motherhood.

[Learn more in our videos](#)