

# IN-COUNTRY KITS

**REPORT FOR 2021** 



#### DELIVERY SETS FOR SAFER CHILDBIRTH IN ETHIOPIA

Afar Pastoralist Development Association (APDA) has worked in Afar Ethiopia, for over 30 years. It has modelled the means of delivering primary health care and education to Afar's most neglected districts where female genital mutilation (FGM), early marriage and dangerous birth practices are still prevalent.

The key objectives are to:

- Reduce the risk of acquiring infection during childbirth for all mothers and newborns attended to by trained traditional birth attendants (TBAs), by providing 7,000 birthing kits to project sites
- Increase mother—TBA—WEW (women extension worker) linkages and reporting channels
- Increase gender equity in health care provision in rural areas, through the employment of 6 women to assemble clean birth kits

The need for ongoing support in this region is necessary, especially with the fighting along the affected regions of Sifra, 'Adda'ar, Uwwa and Awra. It is in these communities where people have lost houses, had animals slaughtered, live in fear of land-mines, suffer food insecurity, whilst having to experience the unburied bodies of dead Tigray People's Liberation Front (TPLF) soldiers, a war which displaced 200,000 people.



# FIELD UPDATE

"I want to say to supporters, this is utterly the life saving work that mothers need. APDA cannot take it away from them. There are many stories of mothers who have lost their lives over the past couple of months. There was a mother who had laboured for almost 5 days, she was brought from Amhara Region where the TPLF have destroyed medical facilities, her uterus was splitting as Dr Omar operated and a heavy infection had gone through her blood – she survived the operation, they're working on the infection, however the baby did not make it. Dullassa has no opportunity aside from this project, and currently nothing in the government health system is functional. APDA is grateful to BKFA and the supporters, for not forgetting these isolated mothers and communities – we all hope to move forward in peace and strong development in community hands." – Valerie Browning.



# DRC

Mission Health Care and Development (MHCD) . The organisation faced challenges and difficulty sourcing material from DRC, so staff travelled to Nairobi – Kenya and Bakavu – DRC, to purchase materials. The project staff then engaged Traditional Midwives and Community Health Workers in the assembly of kits.

During a one-day training, the women were educated on the importance, the components and the impact of the kits. The assembly took place at the Pamela Community Centre Hall in Luvungi Village, with the following as the main objectives of the project:

- Reduce infant mortality and mobility by providing 10,000 clean birthing kits to health care centres and traditional midwives
- Improving the social and economic lives of the community, through the financing of micro-projects and employment of 50 women and 2 administrators for 3 days to assemble the delivery sets
- Increase awareness of health messages, best practices during childbirth, and the wellbeing of women and babies

The project had a significant impact on the 50 women who assembled the kits; they were able to discuss some of the challenges they were currently experiencing, as well as their successes. This project allowed them to encourage and support one another.



# FIELD UPDATE

"We are grateful to Birthing Kit Foundation Australia for funding the locally made Clean Birth Kit program in the Democratic Republic of Congo, and for sending kits. The production of kits locally has changed the lives of 50 women and more than 300 children. The women who helped us to make and pack the kits have received money that helped them to do small business, agriculture, and other community development projects. They now have the money to pay school fees for their children, food for fighting malnutrition, money for medical care and to fight against poverty, for which we continue to thank Birthing Kit Foundation Australia for supporting this project in DRC." – Dr Luc Mulimbalimba

