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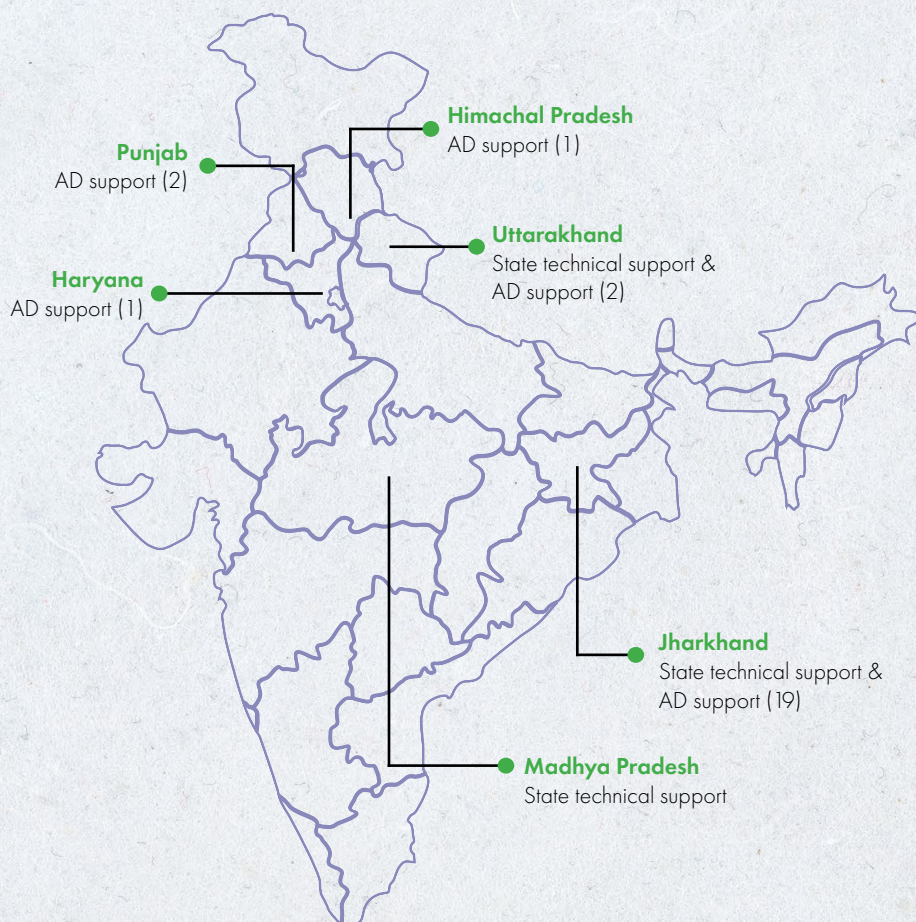
Systems Approach for MNCH focusing on Vulnerable Geographies

July 2021 - June 2025

Aims to fill critical gaps in health systems, encourage innovations, scale-up and sustain interventions and help India progress towards 'self-reliance' in Maternal, Newborn & Child Health (MNCH). Demonstrate innovative models across the continuum of care for pregnant, postpartum and young children <5 years to decrease maternal, newborn, child mortality and morbidity in supported districts and states.

The project will work closely with state governments in Jharkhand, Madhya Pradesh, and Uttarakhand and 25 Aspirational Districts (ADs), designated to USAID by Government of India.

Project Geography



Project Impact*



3.5 Million Pregnant Mothers



3.1 Million Infants



13 Million Under-5 Children

* Expected impact

IN ASSOCIATION WITH



PROJECT OBJECTIVES

- ▶ Increase utilization of MNCH services
- ▶ Involve multiple stakeholders (including private sector) in expanding access to equitable MNCH services, products, and information.
- ▶ Support monitoring and address bottlenecks for MNCH service delivery.
- ▶ Enhance capacity of state and districts, public and private sector stakeholders to provide quality MNCH services.
- ▶ Promote, pilot, learn from and support scaling up of the MNCH good practices



GUIDING PRINCIPLES



CATALYZE based on real problems for improvement



DEMONSTRATE jointly with system for action



MIRROR intelligently for results



INNOVATE responsively for effectiveness



LEVERAGE for sustained impact



DESIGN with intended users to ensure sustainability for sustained impact

STRATEGIC OUTCOMES



STRATEGIC OUTCOME 1

Enhanced institutional capacity of Public and private sector networks in vulnerable geographies (AD)



STRATEGIC OUTCOME 2

Responsive innovation implementation Models established in AD's



STRATEGIC OUTCOME 3

Health system capacity strengthened to improve access and quality of MNCH services

STRATEGIC OUTCOME 1: Enhanced institutional capacity of Public and private sector networks in vulnerable geographies (AD)

1.1. ASPIRATIONAL DISTRICT SUPPORT

- » Build capacity of state & district officials through DAKSH program support model.
- » Supportive Supervision Visits (SSVs) at facility and community to derive gaps and key actionable for quality improvement.
- » Develop evidence-based District Health Action Plans (DHAPs) to achieve MNCH goals.
- » Track performance on Niti Aayog Indicators to monitor ADs performance on health action plan.



Data for Action support to improve MNCH health outcomes: Design and develop data driven action-oriented monitoring mechanism for improving MNCH outcomes.

RMNCH+A Action Agenda Using Strategic Approach (RAASTA) Tool

FRU Quality Care Index (FQCI)

1.2. PRIVATE SECTOR AND NETWORKS LEVERAGING THROUGH PARTNERSHIPS AND FORMATION OF CONSORTIUMS



Leverage Private Partnerships

Partnerships with manufacturer of tech innovations & capacity building using professional bodies to explore possibilities of trying out innovations.



Pneumonia Consortium

Establish a public-private consortium to address pneumonia on WHO's guiding principles of prevent, protect, and treat.



NovaThon- MNCH Innovation

Innovation advocacy event to showcase evidence based proven innovative solutions ready for adaptation and scale up in MNCH.



STRATEGIC OUTCOME 2: Responsive innovation implementation Models established in AD's

- » Counselling for ANC, Readiness for birth and strengthening Essential newborn & child health care practices (CARE) Model
- » Strengthening VHSND through Integrated ANC & Early Childhood Development (ACE) Model
- » Quality Upgrade for Improving Accountability & Community Knowledge (QUICK) Model
- » Implementation model for appropriate use of Carbetocin Room Temperature Stable (RTS) in various levels of public health settings
- » Implementation model for use of Continuous Positive Airway Pressure (CPAP) device for management of Respiratory Distress in neonates
- » Implementation model to strengthen management of Postpartum Hemorrhage (PPH) with focus on Uterine Balloon Tamponade (UBT)



STRATEGIC OUTCOME 3: Health system capacity strengthened to improve access and quality of MNCH services

- » Provide technical assistance for strengthening implementation of large umbrella programme SUMAN for assured maternal and newborn care including LaQshya & MusQan initiative.
- » Support in implementations of learnings gathered from earlier USAID supported innovations and proven best practices in MNCH space like FPC, NBSU etc.





SAMVEG – SYSTEMS APPROACH FOR MNCH FOCUSING ON VULNERABLE GEOGRAPHIES

A follow on to the USAID's flagship project *Vridhhi*, SAMVEG project is a consortium of partners mandated to accelerate efforts to reduce maternal, neonatal, and infant mortality in identified vulnerable geographies of India for USAID India's goal of Ending Preventable Maternal and Child Death (EPCMD).

Disclaimer: This document is made possible by the generous support of the American People through the United States Agency for International Development (USAID). The contents are the sole responsibility of IPE Global Limited and do not necessarily reflect the views of USAID or the United States Government.