Introduction
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 (GAC), the Canadian Institutes of Health Research (CIHR), and Canada’s International Development Research Centre (IDRC), IMCHA is an eight-year, $36 million initiative.

This impact brief outlines the initiative’s approach, highlights achievements, and shares success stories. The results can be scaled to continue to move towards more inclusive and evidence-informed decision-making, and healthier communities.

The challenge
68% of pregnancy- and childbirth-related deaths in the world and 55% of all deaths of children under the age of 5 occur in sub-Saharan Africa.

Objectives of the initiative
- Address gaps in research, policy, and practice to strengthen health systems with primary health care as the entry point
- Explore practical and affordable solutions to critical maternal, newborn, and child health challenges
- Strengthen collaborations between Canadian and African researchers and decision-makers
- Support the uptake of research findings into policy and practice

THE IMCHA MODEL

| 19 research teams |
| 28 research projects |
| 2 Health Policy and Research Organizations |

1 IMCHA management team

to improve the health of women, newborns, children, and adolescents
The success of the IMCHA initiative is rooted in a model that encouraged collaboration between stakeholders from African countries and Canada with diverse areas of expertise. This included:

**IMCHA model**

The research teams worked on 28 research projects and generated evidence and promoted its use in policy and practice. Each team was led by an African Principal Investigator, responsible for the overall implementation of the project. They worked closely with a co-Principal Investigator from Canada and an African decision-maker co-Principal Investigator.

**Examples of achievements**

**Community engagement**

By raising awareness and involving the community in problem-solving, more women are using health services for prenatal care, delivery, and post-natal care.

*In Edo State, Nigeria, a research project contributed to a 300 percent increase in the number of women receiving prenatal care.*

**Quality services in facilities**

Women now have access to better quality services in health facilities, such as comprehensive emergency obstetric and newborn care, and more welcoming and competent service providers.

*In intervention areas in Mwanza region, Tanzania, a research project led to a 25 percent increase in births assisted by a skilled birth attendant.*

**Policy improvement**

Countries demonstrated more reliance on evidence to develop or revise their healthcare policies, plans, standards, and protocols at local and national levels.

*15 Ministers of Health in West Africa adopted a resolution in 2017 to use evidence in developing healthcare policies, plans, standards, and protocols.*

**Human resources for health**

The health workforce is using the new skills acquired through training and mentorship to offer better services.

*The Tanzania Ministry of Health is rolling out a new training curriculum to bring comprehensive emergency obstetric care to 320 health facilities in the country.*

**Reach**

Researchers and decision-makers in Burkina Faso, Ethiopia, Kenya, Malawi, Mali, Mozambique, Nigeria, Senegal, South Sudan, Tanzania, and Uganda worked closely with Canadian researchers in British Columbia, Alberta, Saskatchewan, Ontario, Quebec, and Nova Scotia. IMCHA also provided international networking, mutual capacity strengthening, and knowledge sharing opportunities.
Success stories

Neonatal health
Malawi has one of the highest premature birth rates in the world, which is often linked to respiratory distress syndrome. A research team introduced a neonatal care package that supported exclusive breastfeeding and kangaroo-mother care, or skin-to-skin contact between mothers and babies. Healthcare workers are also trained and equipped with the proper processes, supplies, and decision-making authority to use special continuous positive airway pressure (CPAP) machines. As a result, the chances of survival of newborns with respiratory distress has improved by 41 percent.

Adolescent health
A research team used community engagement as one of their interventions for addressing barriers for adolescents and women to access services in the Natikiri district of Nampula province, Mozambique. Through community drama groups, radio broadcasts, local champions, and more, they delivered key messages on maternal and child health to more that 350,000 adolescents and adults, women, and men. The research team also trained 38 teachers on sexual and reproductive health and rights (SRHR) and worked with traditional leaders to include SRHR messages in initiation rites for adolescents. These activities contributed to more women attending prenatal and postnatal visits and institutional deliveries. Adolescent and youth health visits at the project intervention site hospital more than doubled between 2016 and 2019.

Maternal health
In the Mara region of Tanzania, community health workers supported women to seek prenatal care, and used mobile phones to register them. A total of 10,000 women were provided with birth kits. They also received a subsidy if they lived far from a health facility to ensure the cost of transportation was not a barrier to accessing services. Early research suggests prenatal visits increased by up to five times in the project intervention area. Based on this success, local health authorities have committed to continue providing birth kits.

Policy and practice
Using evidence from its study on health financing, a research team worked with the Government of Mali to define objectives and systematic criteria for enrolling eligible women and children for free health services. This contributes to removing barriers to an underserved segment of the population with lower-than-average access to health services.

Gender equality
In the Iringa region of Tanzania, a research team worked with 400 women and 200 men champions in 20 villages. They educated the community about the importance of pregnancy monitoring and skilled delivery. The women have been empowered to make decisions about health-related matters and become advocates for change, and men encouraged to get involved in women and children’s health. As a result, in the Mufindi district, the number of women attending early prenatal care has doubled and the use of modern contraception has increased by approximately 50 percent.

“The most immediate impact is that since the implementation of this project, we have registered zero maternal deaths. It is an incredible success.”

Sanni Yaya, Canadian co-Principal investigator in Nigeria
CONTRIBUTING TO THE GLOBAL HEALTH COMMUNITY

79
new collaborations formed for evidence-informed decision-making

21
synergetic research opportunities established

260
emerging researchers supported

“Women have now been empowered. I am surprised to see many women now speaking in the meetings. We thank IMCHA [research] team for building confidence to these women.”

Ward Executive Officer, Kilolo District, Iringa Region, Tanzania

LESSONS LEARNED

- Engagement of decision-makers early on and at the right level can fast-track uptake of research evidence into policy and practice;
- Collaboration of research teams and regional policy organizations can open the door to reaching high-level decision-makers for incorporating research evidence into policy and practice; and
- Engagement of adolescents, women, men, and community leaders in defining relevant solutions is key to changing harmful social norms and to reaching successful outcomes.

Learn more in our videos
Overview of the Innovating for Maternal and Child Health in Africa initiative
Making a difference in maternal and child health
Community engagement to improve maternal and child health
Providing high quality health care for women and children
Supporting emerging researchers in global health