



# QUARTERLY IMPACT REPORT

Q2 2022





## A Snapshot Our Quarterly Impact

The scale and impact of our core solutions continues to grow, here in Kenya and beyond.

Over 1.5 million mothers now rely on the information they receive through our digital health tool PROMPTS to guide their pregnancies, and our nurse training program, MENTORS, remains a powerful peer-to-peer approach to sharpening the skills of frontline providers across 1,250 facilities across Kenya (p2).

The story of Kilifi-based nurse-midwife John (p3) exemplifies how routine, onsite training is helping translate learnings from real-life emergency scenarios like birth asphyxia into facility-wide best practices.

The continued impact and future scale of these programs is dependent on our government partnerships. Last month saw the launch of Kenya's EmONC Mentorship package, a national set of guidelines for maternal service provision based on MENTORS content (p5). We are now routinely identifying context-specific MNH issues via Technical Working Groups with county officials, and jointly visiting poor-performing facilities - identified through mothers' feedback on PROMPTS -

to address specific quality gaps impacting mothers and babies.

We have recently made our first foray into new territory, deploying PROMPTS to support immunization tracking in Eswatini (p4) and laying strong foundations to start work in Ghana towards the year's end.

Our research capacity is also growing. Real-time data from our programs married with project-based work like that in Nairobi and Kakamega County is helping build an evidence-base to plug specific quality gaps impacting MNH outcomes, like maternal mental health, adolescent motherhood, and postpartum family planning (p5).

These insights are already starting to influence global practice across the MNH community, with Jacaranda staff sharing learnings and best practices from our work across several major local and international meetings over the last quarter, from Kenya to Thailand (p5).

We hope you enjoy reading.

# QUARTERLY IMPACT



Empowering mums with the right information to seek timely care

**1.5 million +**

mums enrolled to PROMPTS (representing 44% of expecting and new mothers across Kenya)

**20%**

increase uptake of ANC

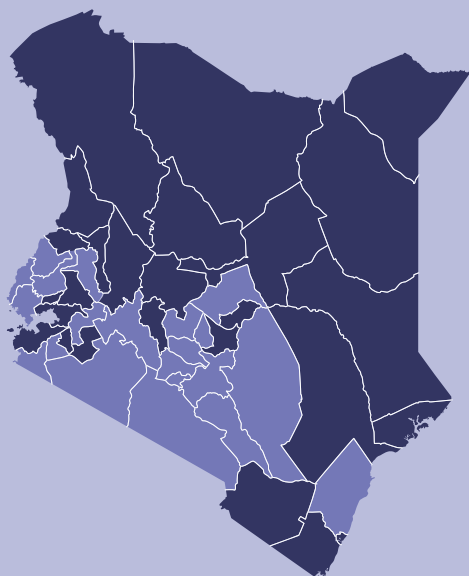
Ensuring nurses are equipped to support them when they get there

**270**

government nurse champions trained through MENTORS

**3,000 +**

providers trained using DELTA (Jacaranda's mHealth learning tool)



**1,250**

Partnerships with facilities across the country

**20**

Partnerships with county governments across Kenya

## COMPLETING THE CYCLE: WHY THE RESPONSE TO BIRTH ASPHYXIA SHOULDN'T STOP AT A HEALTHY, BREATHING BABY.



John Kasira, midwife at Baolala Health Center in Kilifi, was in the process of administering a vaccine to a baby in his charge when he was called to attend to an emergency case. A newborn, seconds old, was gasping for air. He quickly determined it as birth asphyxia, a leading cause of neonatal mortality contributing to 29% of Kenya's newborn deaths.

High volume maternity wards like Baolala witness multiple cases of birth asphyxia weekly, yet the quality of response is often inconsistent. Fortunately, it was a scenario that John and other government nurse

'champions' in our MENTORS program had rehearsed many times.

Providers routinely undergo classroom-based training including drills, where they collaboratively act out emergency scenarios like birth asphyxia, before translating this learning back to their respective maternity wards via short-form, onsite training (CMEs).

John rapidly applied what he'd learnt, starting with an airway assessment before beginning ventilations and chest compressions. In minutes, he was relieved to report a normalized heart and breathing rate and administered oxygen, silently counting through the steps for response. Within an hour, the mother met her healthy baby boy for the first time.

Critically, this pattern of practical learning didn't stop at John. Later that afternoon, John gathered a small group of staff on the ward for a CME on 'Helping Babies Breathe', a MENTORS module instructing on the preparation, delivery, and follow-up for effective resuscitation, leveraging his own practical experience as a case study.



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**At the day's end, John removed his scrubs and headed home. 'I slept a motivated man.' he explains with a smile. 'I had not only saved a life, but also passed on what I'd learnt to the others in my team.'**

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# PROMPTS IN ESWATINI: A DATA-DRIVEN APPROACH TO CLOSING THE COUNTRY'S INFANT IMMUNIZATION GAP.



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Our mission has always been to transform maternal and newborn health outcomes for all mothers and babies. In Kenya, we've proven successful in disrupting and innovating traditional approaches to achieve impact, but our question now is, how can we replicate these efforts to serve mothers in new geographies?

In April this year, we got boots on the ground in Eswatini. Our presence in the country responded to a direct call from Eswatini's Ministry of Health (MoH) who, against the backdrop of high country-wide immunization coverage (~90%), was looking for a low-cost means of identifying and reaching the 'last mile' of underimmunized infants.



Our digital health platform PROMPTS offered a solution, combining a two-way channel to meaningfully engage mothers with a sophisticated data infrastructure to analyze information from mothers against national health priorities. In Kenya, 23,000 mothers have reported on their baby's immunization status to PROMPTS, helping track low immunization 'hotspots'.

Replicating these efforts in new geographies means understanding the contextual needs of mothers and providers and partnering with on-the-ground implementers to adapt the platform to meet them. In early 2022, we announced a partnership with Clinton Health Access Initiative (CHAI) and the Expanded Programme on Immunization (EPI) in Eswatini to deploy PROMPTS for immunization tracking.

The ambition is to not only identify immunization 'weak spots', but also to understand why these occur; from demand-side gaps like vaccine hesitancy or information gaps, to supply-side bottlenecks like facility 'stock-outs'.

Our partnered work in Eswatini begins with a six month pilot, with the aim of scaling nationally and exploring how PROMPTS could support other priority MoH-identified maternal and newborn health priorities across the country.

Learn more about our work in Eswatini 

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# WHERE WE'VE BEEN SEEN

## PROMPTS recognized at the Quality of Health Care Kenya Awards



On World Health Day this April, representatives from Jacaranda collected the Award for Excellence in Maternal and Child Health at the Quality of Health Care Kenya Awards in recognition of the impact and scale achieved through our digital health platform PROMPTS. The platform now supports over 1.5 million mothers across Kenya achieve a safer path through pregnancy and greater agency over their own health outcomes.

## Tutunze Kakamega insights shared at Thailand meeting on Service Delivery Redesign



In June this year, representatives from Jacaranda accompanied Kakamega County officials and members of the County of Governors to Thailand to lead global discussions around Service Delivery Redesign. The team shared insights and learnings from Tutunze Kakamega, a cross-sectoral strategy exploring whether re-organizing health services with the aim of ensuring all women deliver in advanced facilities offering definitive care for complications.

## Jacaranda attends the launch of the co-developed National EmONC Mentorship package



Leveraging a deep understanding of quality gaps in public facilities and experience in innovative provider training approaches, Jacaranda has been working with Kenya's Ministry of Health to co-develop a set of national guidelines around maternal and

neonatal care - with the central ambition of setting a new standard of maternal care across the country.

In June, Jacaranda's Head of Programs Javan Waita attended the launch of Kenya's National EmONC Mentorship package alongside Dr Andrew Mulwa, Director of Medical Services, Preventive and Promotive Health, and stakeholders from the UNFP, WHO, and county. The guidelines include evidence-based content from MENTORS, and are expected to direct a country-wide transformation in the quality of service provision for mothers and their babies.



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