



PATHFINDER INTERNATIONAL LEARNING BRIEF | APRIL 2021

# Sustained Access of Emergency Maternity Services during the COVID-19 Pandemic through Strengthened Community -Facility Referrals System in Kilifi County: **Lessons Learned**

PATHFINDER.ORG



# COVID-19 has brought widespread disruption to essential health care throughout the world—including sexual and reproductive health (SRH) services

## Background and Framing

The Novel Coronavirus disease 2019 (COVID-19) caused by Severe Acute Respiratory Syndrome Corona Virus 2 (SARS – COV 2) was first reported in Wuhan, China, in 2019 and declared a public health emergency of international concern on January 30 2020, and declared a global pandemic on March 11 2020<sup>1</sup>). The COVID-19 pandemic reached Kenya on March 15, 2020.

In the wake of the pandemic, the Kenyan government instituted restrictions to curb the spread of the virus. The government imposed a 30-day lockdown to mitigate transmission of the virus as well as a 7.00 p.m. and 4.00 a.m. curfew to restrict movement. This was later

extended to 9.00 p.m. to 5.00 a.m.<sup>2</sup>. The enforcement of the dawn to dusk curfew limited access to essential health services. According to Robert et al. projections, maternal deaths are estimated to increase by between 8.3-38.6% per month across 118 low- and middle-income countries (LMICs) during the COVID-19 pandemic<sup>3</sup>.

These government directives disrupted access to health services by mothers due to a lack of transport during the curfew and lack of adequate ambulances to attend to all emergencies in the county.

---

## Protecting life in the era of COVID 19

Kache, a resident of Kilifi County, painfully narrates her unfortunate experience of delivering her baby unassisted during this pandemic "I was barely one month to my expected date of delivery when the government implemented the dusk to dawn curfew. I prayed that my labor would start during the day. Against my hope, on the night of April 27, 2020, I got into labor. I called for an ambulance, but there was none on site. I reached out to a few boda-boda operators, but they declined, fearing being clobbered for flaunting the curfew rule. My baby came before the morning break. I had to deliver by myself and only managed to reach the hospital the following day for post-natal care."

---

Kache's ordeal is not an isolated case. By the end of April 2020, barely one month after the COVID-19 prevention measures were put in place, at least 9 women died, in the county, owing to delays in accessing timely care during labor (DHIS 2).

---

<sup>1</sup> World Health Organization. *WHO Director-General's Statement on IHR Emergency Committee on Novel Coronavirus (2019-nCoV)*. Geneva: WHO (2020).

<sup>2</sup> REPUBLIC OF KENYA ;press releases <https://www.health.go.ke/press-releases/> ( accessed on March 29,2021

<sup>3</sup> Robertson T, Carter ED, Chou VB, Stegmuller AR, Jackson BD, Tam Y, et al. Articles early estimates of the indirect effects of the COVID-19 pandemic



on maternal and child mortality in low-income and middle-income countries: a modelling study. *Lancet Glob Health*. (2020) 8:e901–8. doi: 10.1016/S2214-109X (20)30229-1

## Project approach

The USAID *Afya Pwani* project worked with diverse community structures to ensure uninterrupted utilization and access to essential services.

The program deployed the following strategies

1. Undertake a **situational analysis** to understand new barriers to access delivery services
2. **Leveraging state and non-state actors' partnerships** with the National Government Administration Office (NGAO), the project successfully mobilized the county leadership (county commissioner, police department, and the health department) to develop and roll out a community emergency referral system.
3. The project initiated the "**Adopt a Boda Boda**" (adopt a motor rider) Strategy. The County Department of Health, the National government Administrative Office and the Police Department worked with communities to identify feasible modes of transport during such emergencies. The modes of transport identified included personal vehicles where the owners were willing to assist the community to transport clients to the facilities during the curfew and motorbikes for hire that the community trusts its riders.
4. The department of health also disseminated its emergency contacts to enable **emergency evacuation from the community** when feasible including the use of local and national media by the duty bearers (CEC office).
5. The health department also **developed special permits to allow motorbike riders** (Boda-Bodas) and private vehicles to transport clients in need of emergency services during curfew hours. The law enforcement agencies endorsed these permits.
6. Moreover, the project supported the **county to conduct county-wide sensitization meetings** reaching 791 village elders on the community emergency strategy and equipped them with health workers' contacts in their link facilities to facilitate rapid referrals.
7. The sensitized community leaders led the community to identify available local transport resources (motor vehicles/ Motorbikes) for use during emergencies and disseminate its referral strategy.
8. CHVs in targeted villages were engaged to map and equip pregnant women with the area chief's, boda-boda riders', and village elders' identified community emergency contacts. All of them would work together to see the clients' successful referral.
9. At the facility level, health care providers disseminated the community and facility emergency contacts during client reviews and recording them in the mother-baby booklets.
10. Additionally, the project supported the county in disseminating an updated Facility emergency directory to facilitate interfacility referrals.

	COUNTY GOVERNMENT OF KILIFI MINISTRY OF HEALTH BAMBA SUB-COUNTY HOSPITAL	
TO WHOM IT MAY CONCERN		Date _____
Name _____	Vehicle/Motorbike Reg. Number: _____	
This is to confirm that the bearer of this note has dropped off a patient at Bamba Sub-County Hospital from _____ village, at _____: _____ pm/am & leaving the facility at _____: _____ pm/am		
Kindly allow him/her to proceed.		
Confirmed by the Nurse Covering – Name _____ Signature _____		

Example of transport curfew pass issued by facilities to facilitate emergency transport

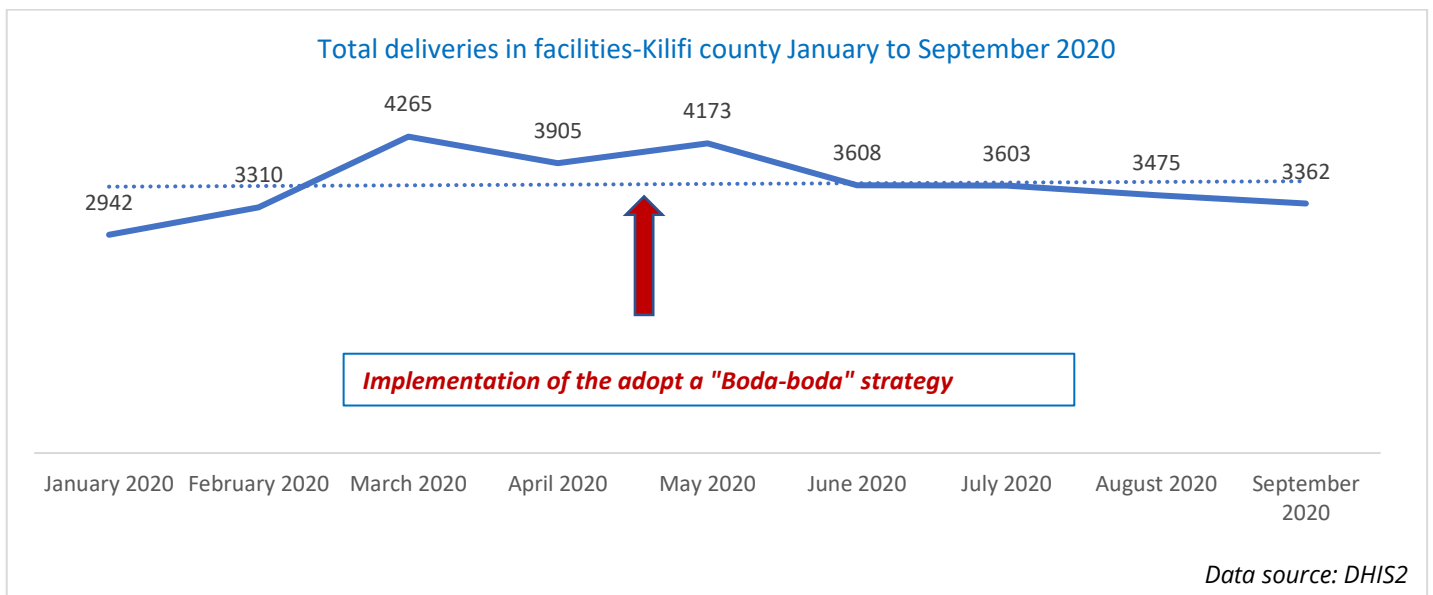
These multifaceted interventions significantly improved access to the health facilities during the curfew.

## Results

A study in 118 LMICs suggested a decline in the trend on utilization of maternal health services such as delivery, antenatal care (ANC) attendance, subsequently resulting in an estimated increase by 8.3–38.6% in maternal mortality during the COVID-19 pandemic<sup>4</sup>. However, as a result of the interventions implemented, Kilifi did not have a massive

reduction in the number of women who accessed delivery services, as shown below and projected in the press release information communicated above. The county recorded a sustained provision of skilled delivery services and continuity of maternal care despite the pandemic.

**Graph 1: showing uptake of skilled delivery services in Kilifi County**



## Impact

The qualitative testimonies demonstrated how the beneficiary clients expressed satisfaction with the response services as expressed in the impact areas below. These measures ensured mothers reached facilities for emergency services.

<sup>4</sup> Robertson T, Carter ED, Chou VB, Stegmuller AR, Jackson BD, Tam Y, et al. Articles early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries:

a modelling study. *Lancet Glob Health*. (2020) 8:e901–8. doi: 10.1016/S2214-109X(20)30229-1



**My greatest joy  
is leaving a  
health center  
with healthy  
mothers and**

**babies**, *Kazungu Charo, a boda boda rider tasked with the responsibility of linking his community with essential health services during the curfew hours.*

## Lessons Learned

- There is a need to deploy a multisectoral approach to address community challenges
- The community, if well mobilized, can come up with low-cost, practical solutions
- The intersectoral collaboration between state and non-state actors is very feasible in times of crisis and can lead to tremendous results if well-coordinated

Pathfinder International-Kenya  
Lavington, James Gichuru Road, Hse # 158  
P. O. Box 1996 – 00502 Karen  
NAIROBI, KENYA  
Office: +254-20-3883142/3/4  
Mobile : +254-733-618359/+254-722-516275  
Fax : [+254 20] 2214890



*The contents of this publication are solely the responsibility of Pathfinder International*

**PATHFINDER.ORG**