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FROM THE AMERICAN PEOPLE

ONSE HEALTH ACTIVITY

INTEGRATED FAMILY HEALTH OUTREACH CLINICS

MALAWI, 2016-2022



The **United States Agency for International Development's (USAID)**

Organized Network of Services for Everyone's (ONSE) Health Activity supported Malawi and its Ministry of Health (MoH) in reducing maternal, newborn, and child morbidity and mortality. Partnering with the MoH and national- and district-level stakeholders, ONSE worked to improve access to and quality of priority health services, strengthen performance of health systems, and increase demand for priority health services. ONSE's activities were based on three core principles that promote self-reliance: data-driven, district-specific targeting to jointly identify needs for high-impact interventions; systemic capacity building coupled with smart capacity building approaches; and mutual accountability. ONSE's Health Activity was a five-year program led by Management Sciences for Health (MSH), running from 2016 to 2021 (with an extension to June 2022).



CLOSING THE GAP IN DELIVERING ESSENTIAL HEALTH SERVICES

In Malawi, 83% of the population live in rural or hard-to-reach areas (HtRAs) and on average live 20 kilometers from a health care facility. One solution, and an important strategy supported by the Malawi Ministry of Health (MoH) and ONSE, is integrated family health outreach clinics (IFHOCs) that provide critical health care services in HtRAs and improve coverage and effectiveness of health services. IFHOCs are an essential part of Malawi's health system, providing preventive and curative services at the community level.

Since the start of ONSE in 2016, IFHOCs have addressed barriers and expanded community-based services by providing a full range of health care and family planning (FP) services. IFHOC services included FP, antenatal and postnatal care, immunization, consultations for children under five, growth monitoring and nutrition services for mothers and babies, diarrhea treatment in young children, HIV counseling and testing services, and diagnosis and treatment of malaria. ONSE supported the integration of cervical cancer screenings and the infrastructure to support those screenings within IFHOCs. IFHOCs also present a unique opportunity to leverage clients for demand generation, health talks, and other counseling and community mobilization services.

Over five years, ONSE supported

IFHOCs

10,057



Men, Women,
Children in
HtRAs Reached

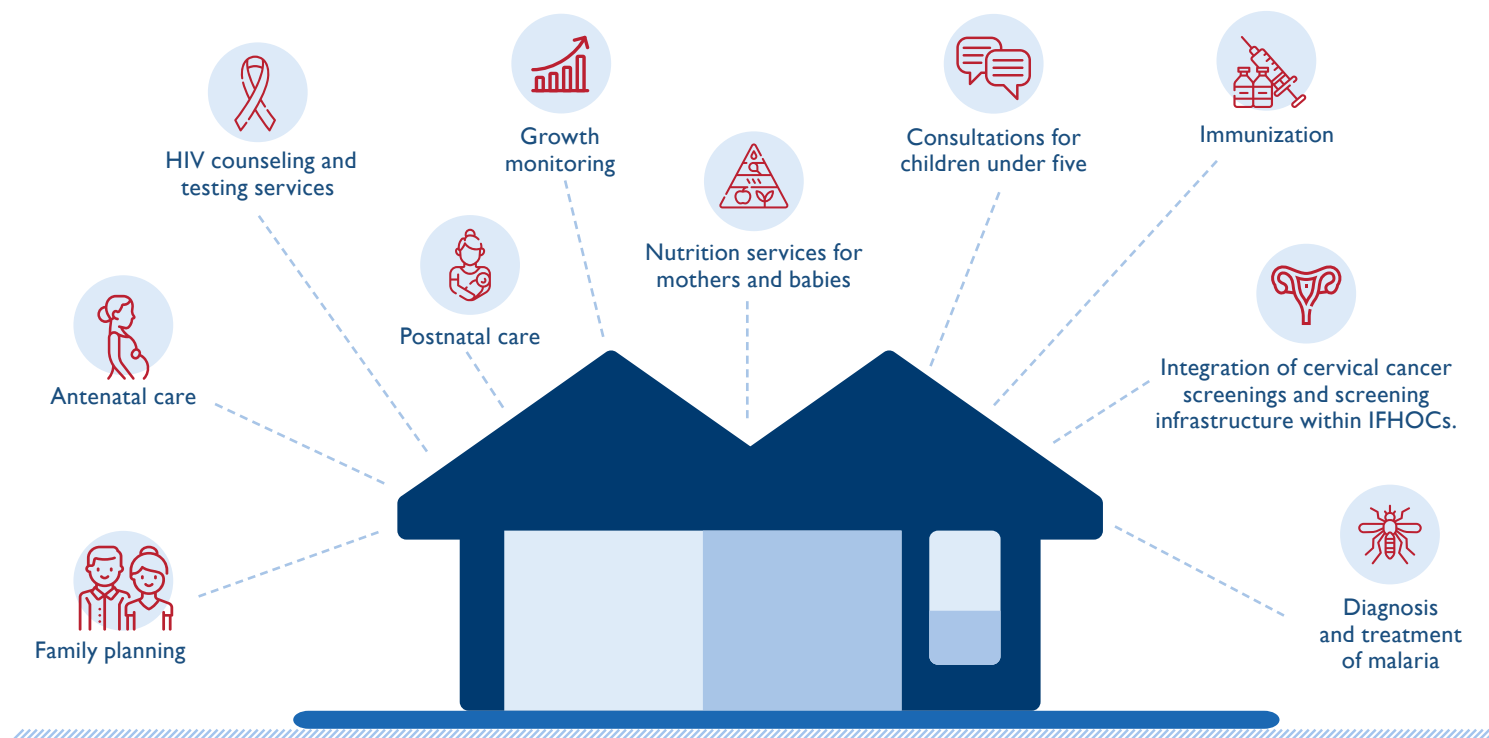


2,175,738

¹ USAID Malawi D&H Survey, <https://dhsprogram.com/pubs/pdf/FR49/I2Chapter12.pdf>

ONSE collaborated with the MoH and District Health Officers on operational and technical guidance and support for IFHOCs. Operational support included district-level planning and budgeting, smart capacity building, and support of health care provider training in all FP methods. ONSE provided technical support for the health care provider teams to deliver comprehensive services and ensure proper data collection and management. ONSE also offered fuel, vehicles, and lunch allowances to ensure continuity of IFHOCs. In 2022, ONSE worked with the Reproductive Health Directorate of the MoH to develop integrated outreach clinic guidelines that included the management of IFHOCs.

IFHOC services included



MATERNAL HEALTH, REPRODUCTIVE HEALTH, AND FAMILY PLANNING



ONSE provided direct support for IFHOCs' reproductive health services in underserved communities and provided access to resources and information for healthy pregnancies and safer births, FP methods, and other essential health services.

IFHOCs contributed to increased numbers for antenatal care and nutrition counseling and reached new mothers and caregivers during postnatal visits that allowed for child growth monitoring and provision of immunizations.

IFHOCs provided expanded access to long-acting and reversible contraception and permanent FP methods, including contraceptive pills, injectables, implants, intrauterine devices, and bilateral tubal ligations. After receiving group education and individual counseling, individuals choose the FP method that best fits their needs and receive it at the outreach clinic. In 2020, ONSE integrated cervical cancer screenings into the IFHOCs.



Between 2017 and 2021, IFHOC clinics provided antenatal care to **126,962 women**. Of these, **47,109 (37%) women** received HIV counseling.



ONSE supported **8,375 IFHOCs** that reached **1,867,576 clients** with a full FP method mix and contributed to **267,880 couple years protection**.

CHILD HEALTH AND NUTRITION

IFHOCs addressed gaps in vaccine access and provided essential childhood immunizations for children aged 12–23 months. ONSE supported the delivery and distribution of vaccines from MoH storage facilities to outreach clinics, thereby increasing the number of children vaccinated in the country.

IFHOCs reached children under five with community nutrition services that supported growth monitoring, nutrition screenings, referrals to Community-Based Management of Acute Malnutrition facilities, vitamin A and deworming supplementation, and nutrition counseling for mothers and caregivers.

IFHOCs often diagnose and treat malaria, especially in children under five presenting with or having a history of fever. ONSE counseled and supervised providers to use rapid diagnostic tests to diagnose malaria, initiate the first-line treatment for uncomplicated malaria, and refer severe cases for further treatment.



IFHOC immunizations contributed to nearly 10% of DPT3 and MR2 vaccines in ONSE districts.



IFHOCs immunized between 15 and 20% of all children fully immunized in ONSE districts.



Between 2017 and 2021, ONSE tested 109,378 children under five for malaria and confirmed 54,649 cases of malaria.



Between 2017 and 2021, ONSE reached 1,202,919 children under five with nutrition services through IFHOCs (PY2: 39,895; PY3: 398,139; PY4: 391,223; PY5: 373,662).

EQUIPMENT, SUPPLIES, AND DATA MANAGEMENT

ONSE worked with the MoH to strengthen IFHOCs through procurement of mobile tents, foldable beds, and chairs to ensure that dignified services are provided during outreach services in HtRAs. ONSE also worked with community health workers in IFHOCs to address the issue of poor documentation and inconsistent quality in counseling. ONSE provided technical support for the IFHOC health care teams to ensure proper data capture and use of data collection tools. All IFHOC clients and activities are documented, and ONSE helped ensure that patient health data are incorporated confidentially into facility data systems to support better continuity of care.



COVID-19



The COVID-19 pandemic created challenges for the delivery of essential services in HtRAs. The demands of the COVID-19 response effort, such as changes to health care staff priorities, clients canceling visits for fear of infection, lack of guidance for provision of services, supply chain interruptions, and competing priorities for vehicles, imposed challenges on IFHOCs at the beginning of the pandemic. Despite these disruptions, IFHOCs provided important services after instituting safety provisions such as handwashing stations, availability of personal protective equipment, and social distancing policies. The number of IFHOCs increased in late 2020 to meet demand in rural areas as well as for clients who did not want to visit facilities.

ONSE activities at IFHOCs during the pandemic included information dissemination, infection prevention and control, and vaccine distribution. Unlike other partners, ONSE's partner Banja la Mtsogolo continued outreach clinics and oriented its providers to maintain COVID-19 preventive measures during service provision. ONSE supported public health protocols, donated masks and infection prevention materials to the facilities



COVID-19 informational messages that focused on preventing the spread of the virus were shared at IFHOCs and reached **281,796 clients** in 2020 and **1,687,253** in 2021.

Learn more at msh.org/projects/onse/

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