

Mobile obstetrics project improves health of mothers in Eastern Burma

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A community-based maternal health delivery strategy known as the MOM Project (mobile obstetric medics) dramatically increased access to maternal health care services for internally displaced woman in eastern Burma, according to a study led by researchers at the Johns Hopkins Bloomberg School of Public Health.

Among the findings, the study showed a ten-fold increase in the proportion of women assisted at delivery by workers skilled in providing emergency obstetric care, including preventing and treating hemorrhage, injectable antibiotics and anticonvulsants, and community-based [blood transfusion](#). Access to maternal and reproductive health is poor throughout Burma (also known as Myanmar) particularly among internally displaced ethnic communities. The researchers believe the MOM Project could be a model for maternal [health care delivery](#) in settings where resources are extremely limited. The study appears in the August 3 edition of the journal [PLoS Medicine](#).

"The MOM Project's focus on task-shifting, capacity building and empowerment at the community level might serve as a model approach for delivering needed maternal health care in severely constrained areas," said Luke Mullany, PhD, MHS, lead author of the study and an associate professor with the Bloomberg School's Center for Public Health and Human Rights.

The study was conducted in collaboration with four ethnic health organizations working along the Burma-Thailand border. The MOM

Project provided a three-tiered network of community-based providers, which included traditional birth attendants to improve antenatal care services, [health workers](#) to provide supplies and prevent post-birth complications, and [maternal health](#) workers that were responsible for oversight and training; as well as providing emergency care.

Between October 2006 and January 2009, the researchers conducted two cluster surveys of ever-married women of reproductive age. Mullany and colleagues from the Global Health Access Program, local ethnic health departments and the Burma Medical Association compared the findings of a survey of 2,800 women conducted before implementation of the MOM Project to those of a second survey of 2,400 women conducted after implementation. In both surveys, women were asked about their access to antenatal and postnatal care, skilled attendance at delivery, and family planning needs and practices.

According to the analysis, 72 percent of women received antenatal care after implementation of the MOM Project, up from 40 percent prior to the start of the Project. Postnatal visits within 7 days following delivery doubled, while contraception use increased from 24 percent to 45 percent, reducing unmet need for contraception by 35 percent.

"Innovative alternatives like the MOM Project are urgently needed in a wide range of settings," said Chris Beyrer, MD, MPH, senior author of the study and director of the Center for Public Health and Human Rights. "Such approaches may maximize coverage by focusing on bringing services directly to a population in need and through expansion of the set of interventions that can be delivered outside facility settings, including components of emergency obstetric care.

More information: Impact of Community-Based Maternal Health Workers on Coverage of Essential Maternal Health Interventions among Internally Displaced Communities in Eastern Burma: The MOM

Project", *PLoS Medicine*.

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