Jhpiego in Myanmar

Quick Facts

Estimated total population: 1
52.1 million

Maternal mortality ratio: 2
200 per 100,000 live births

Infant mortality rate: 2
41 per 1,000 live births

Under-five mortality rate: 2
52 per 1,000 live births

Total fertility rate: 1
2.3

Contraceptive prevalence: 1
46% (modern methods)
46% (all methods)

HIV prevalence: 3
0.6%

Births with skilled provider: 2
70.6%

Sources:
1 Population Reference Bureau 2015 Population Data Sheet;
2 UNICEF country statistics for Myanmar;

Background

Myanmar, also referred to as Burma, is a union of seven states and seven regions. While Myanmar’s rates of maternal and newborn mortality have declined over the last 20 years, they remain higher than those of other countries in the region, and nearly 30% of live births in Myanmar are not attended by a skilled birth attendant. To meet these and other health challenges, the Government of Myanmar is making great efforts to address its health care needs. The 2011–2016 National Health Plan gives priority to maternal and newborn health (MNH), child health, communicable diseases and health systems strengthening. Other emerging policy priorities include rural health and improved access to high-quality family planning services. To assist the Government of Myanmar in addressing these priorities, Jhpiego has been working there since 2013 and is currently implementing the five initiatives described below.

Current Program Highlights

Improving Midwifery for Maternal and Newborn Health Services

The Three Millennium Development Goal (3MDG) Fund supports Jhpiego and partners to reduce maternal and newborn mortality and morbidity in Myanmar by strengthening the midwifery profession. This is being accomplished by measurably advancing the capacity of Myanmar’s midwifery cadre to improve the overall quality of services for those in need. By strengthening scalable midwifery education and training systems, Myanmar’s midwives will ensure consistent, competent and safe clinical care for future mothers and newborns. To accomplish this goal, Jhpiego is collaborating with the Ministry of Health and Sports (MOHS) to develop a policy and regulatory framework guiding high-quality pre-service education. Jhpiego is supporting improvements in both midwifery education and the midwifery education system by helping schools to update midwifery curricula, perform a task analysis and build the capacity of faculty to deliver skills-based training.

Improving Maternal Health in Myanmar: A Scalable Model

Under a four-year project funded by the GE Foundation, Jhpiego is collaborating with the MOHS to improve the quality of MNH services at three health facilities in and around Yangon that represent three different levels of the health system: Yangon Central Women’s Hospital (a tertiary care teaching hospital), Thanlyin District Hospital and North Dagon Township Hospital. Specifically, the project’s objectives are to: 1) improve the quality of MNH services, with a focus on the most common causes of maternal and newborn morbidity and mortality, at the three hospitals; and 2) lay the foundation for the Government of Myanmar to scale up its efforts to improve the quality of MNH...
services nationwide. For the first objective, Jhpiego is collaborating with the MOH to develop a scalable quality of care system using Jhpiego’s Standards-Based Management and Recognition (SBM-R®) approach. This approach, which is being implemented at the three hospitals to improve the quality of MNH services and strengthen the hospitals as clinical training sites, can also be further scaled up to other hospitals in Myanmar. Under the second objective, Jhpiego is working to improve the capacity of health care workers in the three hospitals to provide labor, birth and immediate postpartum care that addresses the key causes of hospital-based maternal and newborn morbidity and mortality. This capacity building will be achieved through the development of an in-service training system that emphasizes competency-based training and skills building of health care workers to provide high-quality MNH services.

Maternal and Child Survival Program (MCSP)

The overall goal of MCSP’s work in Myanmar, funded by the U.S. Agency for International Development (USAID), is to reduce maternal and newborn mortality and morbidity in the country by strengthening the midwifery profession. MCSP works with the MOHS and other development partners to provide technical assistance on current selected best practices for MNH services that are agreed upon, owned and endorsed by the national level to ensure their adoption at lower levels of the health system. MCSP follows the perinatal approach, from pregnancy through the postpartum period and newborn care. The technical focus includes evidence-based, high-quality maternal interventions (i.e., uterotonics for postpartum hemorrhage [PPH], anticonvulsants for pre-eclampsia/eclampsia and antibiotics for sepsis) to reduce the leading drivers of maternal mortality in Myanmar. It also encompasses high-impact newborn interventions (i.e., neonatal resuscitation, prevention and management of pre-term birth and improved care for preterm/low-birthweight newborns through kangaroo mother care and the identification and management of newborn infections) that directly address the three major causes of newborn death.

The program focuses on the national, sub-national and facility levels in a multi-pronged approach. At the national level, MCSP provides technical leadership to the MOHS and the Reproductive Health, Maternal, Neonatal and Child Health Technical Strategic Group and other MOHS-convened working groups and technical forums for the inclusion and dissemination of maternal and newborn care best practices as part of the National Strategic Plans and guidelines. The goal of the national-level work is to facilitate upgrades to midwifery regulatory processes and drive achievement and maintenance of quality standards for MNH care. MCSP is coordinating with the MOHS to improve midwifery capacity through in-service capacity building and continuing professional education using five learning and performance improvement centers. The centers are being established and managed by state and regional public health departments in Ayeyarwady Region, Magway Region, Rakhine State, Shan State (northern) and Shan State (southern). MCSP also provides capacity-building support to the Myanmar Nurse and Midwife Association and its membership to foster leadership and develop a more dynamic and collaborative association that can be the strong voice of, and provide support to, the midwifery profession in Myanmar. In addition, MCSP collaborates with the MOHS to provide technical assistance for malaria in pregnancy and integrated community case management.
Strengthening Effective Education for Health Workers

With funding from the Global Giving Program of MSD for Mothers (also known as Merck for Mothers), Jhpiego is working on a two-year project to strengthen education for health workers, with the ultimate goal of improving health outcomes for women and newborns in Myanmar. To realize this goal, Jhpiego is collaborating with the MOHS to demonstrate a strengthened midwifery education and training model in Kayin State; the model can subsequently be replicated in other states. Under this project, Jhpiego is working to: 1) strengthen midwifery education in Kayin State by refreshing and updating the clinical and teaching skills of all midwifery tutors in the state; and 2) develop the capacity of Kayin State’s master trainers to train all of the state’s midwives and auxiliary midwives in lifesaving MNH skills. This project has been introducing into the country’s pre-service education system the low-cost, innovative birthing simulators and training materials that have been proven to reduce maternal and newborn deaths in other countries.

Responding to the Myanmar Government’s Urgent Need for Family Planning Services

With funding from the United Nations Foundation through their Family Planning 2020 Rapid Response Mechanism, Jhpiego is working with the MOHS to implement a project to improve provider competencies in contraceptive implant removal and family planning counseling. The goal is to improve the method mix and increase the contraceptive prevalence rate.

Key Accomplishments

Under the 3MDG work:

- Jhpiego and the MOHS developed a strategy for the first-ever nationwide training of providers in basic emergency obstetric and newborn care (BEmONC), including a standardized learning resource package that has already been used to train 257 master mentors.
- Skills labs have been successfully established in 10 of the 24 midwifery schools.

Under the GE Foundation work:

- Jhpiego and the MOHS developed a BEmONC training program; based on its success at Yangon Central Women’s Hospital, the MOHS asked Jhpiego to collaborate in designing a plan to roll out BEmONC training nationwide for more than 10,000 midwives with other donor support. The Jhpiego-supported national BEmONC training plan is now being implemented and will be a significant area of focus for the MOHS in 2016.
- Jhpiego and the MOHS designed a quality improvement model for Myanmar, which includes the implementation of structured learning and quality improvement cycles that target specific MNH service delivery challenges, including infection prevention and control. Application of this model has led to all of the health facilities demonstrating improvements in their infection prevention and control practices between baseline and follow-up.
Under MCSP:

- MCSP built the skills of 150 district-level providers in the Helping Babies Breathe approach. These providers developed cascade training plans to be implemented in their districts.
- MCSP established a clinical skills standardization and assessment center in Yangon at the Myanmar Nurse and Midwife Council. This center is used for competency-based assessment of midwives for the registration and licensure process, and for in-service training, pre-deployment refresher training and continuing professional education. The modules used at the skills and innovation lab cover pre-eclampsia/eclampsia, PPH and normal labor and birth, essential newborn care, neonatal asphyxia and care for small babies.
- MCSP successfully conducted an observational study of antenatal care/malaria in pregnancy services at 18 facilities with 49 health care providers in the Yangon Region, Mon State and Kayin State. The study data showed that a systematic approach to obtaining histories, performing physical exams and counseling clients about pregnancy in general and malaria specifically is lacking. Based on study findings, MCSP is advocating for national adoption of guidelines on malaria in pregnancy.

Under MSD:

- Jhpiego successfully advocated for the Helping Mother Survive training package on management of PPH to be adopted by the MOHS as the PPH management guidelines for all basic health staff in Myanmar.
- To offer a more comprehensive midwifery training package beyond management of PPH, Jhpiego developed a learning resource package tailored for management of the leading killers of mothers and newborns. Existing learning resource packages, technical guidelines and World Health Organization guidelines were used in creating this new package to ensure that the content is up to date and in line with the country’s current policy and guidelines.

Partners and Donors

Jhpiego’s donors in Myanmar are 3MDG, GE Foundation, USAID, MSD for Mothers and the United Nations Foundation.

Partners include: the MOHS, including state, regional and township health departments; Yangon Central Women’s Hospital and Thanlyin and North Dagon Hospitals; Hpa An Midwifery School; Myanmar Nurse and Midwife Association; Myanmar Nurse and Midwife Council; and Survive & Thrive Global Development Alliance Partners (American Academy of Pediatrics, American College of Nurse-Midwives, American College of Obstetricians and Gynecologists, Save the Children, Johnson & Johnson and Laerdal Global Health).

References

