

A small team from Yemen worked with the staff of the Child and Adolescent Health (CAH) programme of the WHO Regional Office in Cairo to prepare a document to serve as a background to a programme review of the Integrated Management of Childhood Illness strategy (IMCI) in the country. The team was composed of the national IMCI programme director, the WHO country office focal point for child health and the UNICEF country office child health medical officer.

The draft document includes three main sections: 1) an introductory section with country demographic, socio-economic and health system information; 2) a section on child health, describing policies, indicators and progress towards the millennium development goal 4 on under-five mortality reduction and child health-related programmes; and 3) a detailed section on IMCI and its three components, including implementation at the health system (e.g., planning, management, organization of work at health facilities, drug supply, referral, monitoring and supervision) and community level (e.g. community child care by community health workers), financial support, pre-service education, challenges and recommendations.

Every country implementing the IMCI strategy reviews implementation after the early implementation phase, when the adapted guidelines are tested in a limited number of districts in order to finalize the approach. The Regional Office has recommended that countries periodically review programme implementation also during the expansion phase, especially when a substantial proportion of health facilities has been covered. It has proposed for this purpose an approach which includes the preparation of a background document followed by the conduct of a workshop.

The document is a key document which is reviewed in detail and discussed throughout the workshop by the participants divided into groups by document section. The workshop convenes representatives of various programmes of the ministry of health, public health officials from governorates, teaching institutions, professional associations, other national and international partners and interested parties. The main objective of the review is to recommend actions to address issues identified in the review which hamper expansion and provision of quality child care.

Yemen started IMCI expansion in January 2003 and has since trained staff from 61% of its primary health care facilities. It has also adopted initiatives to increase access to quality child health care services such as integrated primary health care mobile teams and, more recently, community health workers. It has also started introducing IMCI into teaching programmes of a few teaching institutions. According to the UN interagency child mortality estimation group, under-five mortality has declined in Yemen by 47% between 1990 and 2009.

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