



USAID
FROM THE AMERICAN PEOPLE

Maternal and Child
Survival Program

www.mcsprogram.org
facebook.com/MCSPglobal
twitter.com/MCSPglobal

CATALYZING CHANGE

A look at USAID's Maternal and Child Survival Program
OCTOBER 1, 2014 - DECEMBER 31, 2019



Photos by: Karen Kasmauski/MCSP; Kate Holt/MCSP; Mubeen Siddiqui/MCSP

PREVENTING CHILD AND MATERNAL DEATHS

USAID's flagship Maternal and Child Survival Program (MCSP) partnered with 32 countries to increase maternal and child survival and build resilient, accountable, and responsive health systems. From 2014 to 2019, MCSP supported countries on their path to self-reliance. Through the generous support of the American people, USAID invested in key components of health systems strengthening and capacity building of country-led institutions to address health challenges. As a result, government partners committed their own domestic resources in cost-effective solutions that yield immediate and long-lasting results. MCSP's work has better equipped countries to face current and emerging health threats such as Ebola, plague, and Zika, and has helped advance U.S. national security and economic prosperity. Over the course of five years, MCSP has:

Strengthened resilience of households, communities, and health systems by:

- Assisting 11 countries to introduce new, lifesaving vaccines including inactivated polio vaccine, pneumococcal conjugate vaccine, combination measles and rubella vaccines, and measles second dose vaccine during the second year of life.
- Equipping national health systems and frontline healthcare workers to rebuild health infrastructure and effectively respond to emerging global health threats. In Ebola-affected countries such as Guinea, Liberia, and Ghana, MCSP restored confidence in the health system. As a result of MCSP's work on infection prevention and control and quality of healthcare in Liberia, health facility deliveries doubled and immunization coverage for children under one year of age nearly tripled.
- Helping countries fill gaps in coverage of vital reproductive, maternal, newborn, and child health (RMNCH) services through the introduction and scale-up of high-impact interventions, including: use of chlorhexidine gel for umbilical cord care during childbirth in Liberia and Nigeria; improved labor management, newborn care, and immediate postpartum family planning in Rwanda; and Integrated Community Case Management for Childhood Illness in the Democratic Republic of Congo.

Supported countries on their journey to self-reliance by:

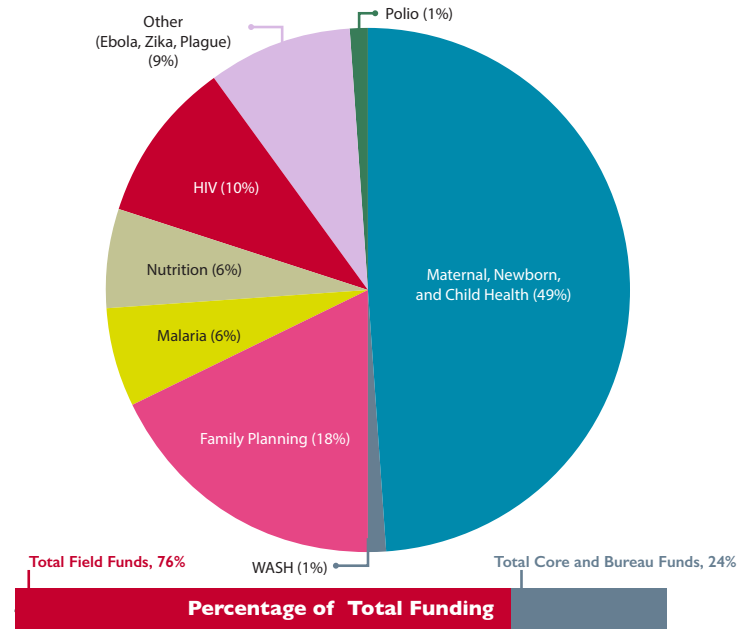
- Applying innovative and cost-effective approaches to strengthen the health workforce to deliver and sustain quality RMNCH services through pre-service training in 15 countries and in-service training and mentorship support in 24 countries.
- Fostering public-private partnerships to leverage domestic resources for proven health programs. For example, through a public-private partnership approach, two state governments in Nigeria have invested approximately \$1.1 million and \$4.3 million respectively towards improving routine immunization coverage and quality of services in their states from 2014-2018.
- Assisting the global Survive & Thrive Global Development Alliance to integrate Helping Babies Survive and Helping Mothers Survive – which include training curriculum and training materials to build workforce capacity – into 30 national programs, and mobilize \$120 million in partner contributions.

Fostered policy shifts to prioritize proven, cost-effective, high-quality health programming, including:

- Supporting the development or revision and implementation of over 120 national policies, guidelines, or strategies in 17 countries. Such policies ensure the inclusion of key high impact RMNCH interventions that range from developing the first ever antenatal care (ANC) policy guidance in Burma to revitalizing and scaling up high impact child health interventions in Democratic Republic of Congo.
- Collaborating closely with the World Health Organization to develop the global WHO maternal, newborn and child health quality of care standards, and helped introduce them to technical stakeholders and Ministries of Health in Ethiopia, Guatemala, Haiti, Liberia, India, Nigeria, Madagascar, Mozambique, Rwanda and Uganda.

TOTAL FUNDING

MCSP was a five-year program with a \$560M ceiling.



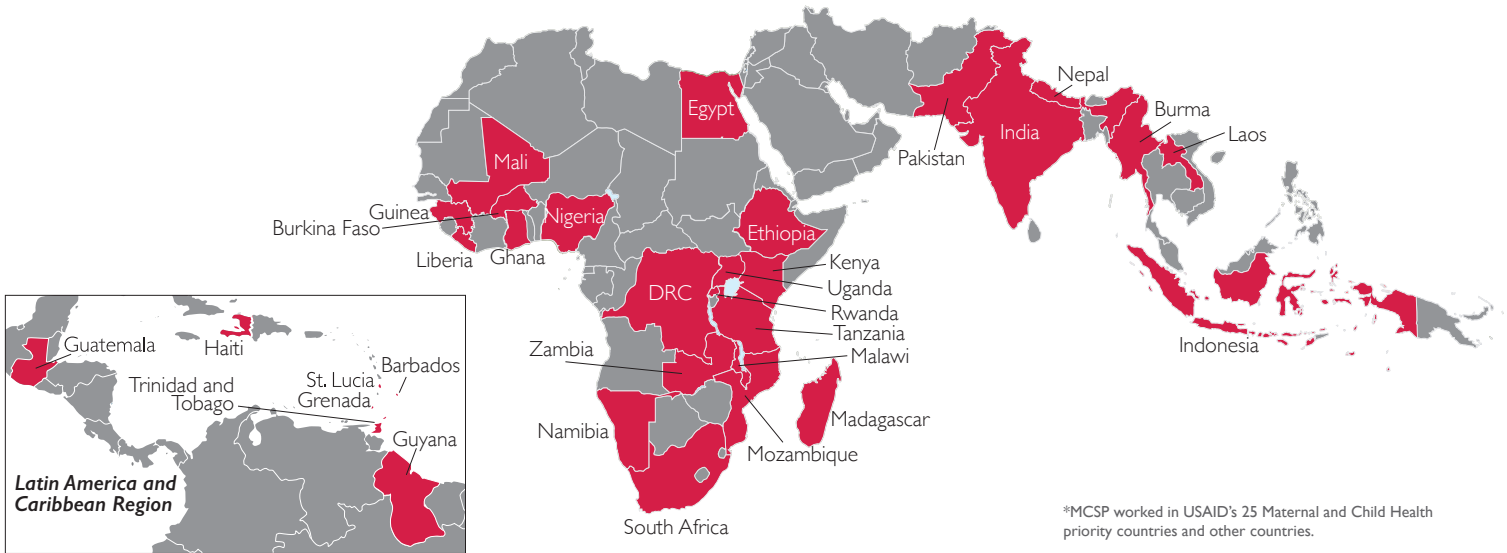
SELECTED CUMULATIVE RESULTS

- Over **37,000** babies who weren't breathing or crying at birth were resuscitated
- Over **1,838,000** women received a uterotonic immediately after birth to prevent postpartum hemorrhage
- Over **546,000** women voluntarily chose a family planning method during a MNCH service visit
- Over **3,918,000** children received the third and final dose of the diphtheria, pertussis, and tetanus (DPT) vaccine
- Over **5,191,000** children under five reached by nutrition programs
- Over **495,000** health workers were trained with skills and knowledge to improve quality of RMNCH services
- Over **10,000** health facilities actively implemented a quality improvement approach
- Over **681,000** children under five with diarrhea were treated
- Over **120** policies developed or updated in 17 countries
- Over **617,000** children under five with pneumonia were treated

WHERE WE WORK

As a global project, MCSP was designed to introduce and support high-impact health interventions with the ultimate goal of preventing child and maternal deaths.

Through its programming in 32 countries,* MCSP worked to improve health services in communities with a population totaling over **200 million people**.



*MCSP worked in USAID's 25 Maternal and Child Health priority countries and other countries.

	Barbados	Burkina Faso	Burma	DRC	Egypt	Ethiopia	Ghana	Grenada	Guatemala	Guinea	Guyana	Haiti	India	Indonesia	Kenya	Laos	Liberia	Madagascar	Malawi	Mali	Mozambique	Namibia	Nepal	Nigeria	Pakistan	Rwanda	South Africa	St. Lucia	Tanzania	Trinidad and Tobago	Uganda	Zambia
Maternal Health (24)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Newborn Health (26)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Child Health (22)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Family Planning (25)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Immunization (12)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Community Health (18)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Gender (13)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Health Systems Strengthening (26)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Malaria (10)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Nutrition (14)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
WASH (12)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
HIV (8)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Other (10)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●