MOMENTUM works alongside governments, local and international private and civil society organizations, and other stakeholders to accelerate improvements in maternal, newborn, and child health. Building on existing evidence and experience implementing global health projects and interventions, we help foster new ideas, partnerships, and approaches and strengthen the resiliency of health systems.

MOMENTUM Knowledge Accelerator is funded by the U.S. Agency for International Development (USAID) as part of the MOMENTUM suite of awards and implemented by Population Reference Bureau (PRB) with partners JSI Research and Training Institute, Inc. and Ariadne Labs under USAID cooperative agreement #7200AA20CA00003. For more about MOMENTUM, visit www.usaidmomentum.org. The contents of this report are the sole responsibility of PRB and do not necessarily reflect the views of USAID or the United States Government.

Photo Credits

Suggested Citation
# TABLE OF CONTENTS

Acronyms List ............................................................................................................................................................... 1

Introduction ........................................................................................................................................................................... 3

MOMENTUM Topics, Areas, and Themes, by Country .................................................................................................. 4

Africa Bureau Regional Activities ................................................................................................................................. 6

  MOMENTUM Country and Global Leadership .............................................................................................................. 6

Country Projects ................................................................................................................................................................. 8

  Benin ................................................................................................................................................................................. 8

    MOMENTUM Private Healthcare Delivery ................................................................................................................ 8

Burkina Faso .................................................................................................................................................................... 10

  MOMENTUM Integrated Health Resilience .................................................................................................................. 10

Côte d’Ivoire ...................................................................................................................................................................... 13

  MOMENTUM Country and Global Leadership .............................................................................................................. 13

Ghana ................................................................................................................................................................................ 16

  MOMENTUM Country and Global Leadership .............................................................................................................. 16

  MOMENTUM Private Healthcare Delivery ................................................................................................................ 20

  MOMENTUM Routine Immunization Transformation and Equity ........................................................................ 22

Guinea ............................................................................................................................................................................... 23

  MOMENTUM Safe Surgery in Family Planning and Obstetrics ................................................................................ 23

Mali .................................................................................................................................................................................. 26

  MOMENTUM Integrated Health Resilience .................................................................................................................. 26

  MOMENTUM Private Healthcare Delivery ................................................................................................................ 28

  MOMENTUM Routine Immunization Transformation and Equity ........................................................................ 30

  MOMENTUM Safe Surgery in Family Planning and Obstetrics ................................................................................ 32

Niger .................................................................................................................................................................................. 34

  MOMENTUM Integrated Health Resilience .................................................................................................................. 34

  MOMENTUM Private Healthcare Delivery ................................................................................................................ 36

  MOMENTUM Routine Immunization Transformation and Equity ........................................................................ 37

Nigeria ............................................................................................................................................................................... 39

  MOMENTUM Country and Global Leadership .............................................................................................................. 39

  MOMENTUM Private Healthcare Delivery ................................................................................................................ 43

  MOMENTUM Routine Immunization Transformation and Equity ........................................................................ 45

  MOMENTUM Safe Surgery in Family Planning and Obstetrics ................................................................................ 46

  continued
Senegal ................................................................................................................................. 48
  MOMENTUM Safe Surgery in Family Planning and Obstetrics ........................................ 48
Sierra Leone.......................................................................................................................... 50
  MOMENTUM Country and Global Leadership ................................................................. 50
Togo ................................................................................................................................. 52
  MOMENTUM Country and Global Leadership ................................................................. 52
## ACRONYMS LIST

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BF-APEA</td>
<td>Behaviorally focused applied political economy analysis</td>
</tr>
<tr>
<td>CEFM</td>
<td>Child, early, and forced marriage</td>
</tr>
<tr>
<td>CHWs</td>
<td>Community health workers</td>
</tr>
<tr>
<td>CSOs</td>
<td>Civil society organizations</td>
</tr>
<tr>
<td>DHMTs</td>
<td>District health management teams</td>
</tr>
<tr>
<td>EPMM</td>
<td>Ending preventable maternal mortality</td>
</tr>
<tr>
<td>FBOs</td>
<td>Faith-based organizations</td>
</tr>
<tr>
<td>FLHWs</td>
<td>Frontline health workers</td>
</tr>
<tr>
<td>FP</td>
<td>Voluntary family planning</td>
</tr>
<tr>
<td>FP/RH</td>
<td>Voluntary family planning/reproductive health</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender-based violence</td>
</tr>
<tr>
<td>HMIS</td>
<td>Health management information system</td>
</tr>
<tr>
<td>IPC</td>
<td>Infection prevention and control</td>
</tr>
<tr>
<td>IPV</td>
<td>Intimate partner violence</td>
</tr>
<tr>
<td>ITOCA</td>
<td>Integrated technical organizational capacity assessment</td>
</tr>
<tr>
<td>IUD</td>
<td>Intrauterine device</td>
</tr>
<tr>
<td>LARC</td>
<td>Long-acting reversible contraceptives</td>
</tr>
<tr>
<td>MNCHN</td>
<td>Maternal, newborn, and child health and nutrition</td>
</tr>
<tr>
<td>MNCH/FP/RH</td>
<td>Maternal, newborn, and child health/voluntary family planning/reproductive health</td>
</tr>
<tr>
<td>MNCHN/FP/RH</td>
<td>Maternal, newborn, and child health and nutrition/voluntary family planning/reproductive health</td>
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<tr>
<td>MIP</td>
<td>Malaria in pregnancy</td>
</tr>
<tr>
<td>MOH</td>
<td>Ministry of health</td>
</tr>
<tr>
<td>MPDSR</td>
<td>Maternal and perinatal death surveillance and response</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non-governmental organizations</td>
</tr>
<tr>
<td>PHE</td>
<td>Population, health, and environment</td>
</tr>
<tr>
<td>PNC</td>
<td>Postnatal care</td>
</tr>
<tr>
<td>PPFP</td>
<td>Postpartum family planning</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
<td>---------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>QI</td>
<td>Quality improvement</td>
</tr>
<tr>
<td>RED/REC</td>
<td>Reaching every district/reaching every child</td>
</tr>
<tr>
<td>RH</td>
<td>Reproductive health</td>
</tr>
<tr>
<td>RMC</td>
<td>Respectful maternity care</td>
</tr>
<tr>
<td>SBCC</td>
<td>Social and behavior change communication</td>
</tr>
<tr>
<td>SNET</td>
<td>Social norms exploration tool</td>
</tr>
<tr>
<td>SSNB</td>
<td>Small and sick newborn</td>
</tr>
<tr>
<td>SV</td>
<td>Sexual violence</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, sanitation, and hygiene</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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</table>
**INTRODUCTION**

**MOMENTUM** is a dynamic suite of six distinct yet related awards working with institutions in USAID partner countries to accelerate reductions in maternal, newborn, and child death and disability. The suite supports countries in their efforts to strengthen the capacity and resilience of community and health systems to introduce, deliver, scale up, and sustain the use of evidence-based, high-quality maternal, newborn, and child health, nutrition, voluntary family planning, and reproductive health (MNCHN/FP/RH) services and care.

This reference brief provides an overview of MOMENTUM projects and their completed or ongoing activities in the West Africa region. As of June 2023, MOMENTUM partner countries in this region include Benin, Burkina Faso, Côte d’Ivoire, Ghana, Guinea, Mali, Niger, Nigeria, Senegal, Sierra Leone, and Togo.

The six global awards working collectively to support partner country goals to improve MNCHN/FP/RH service delivery, access, and quality across diverse focus areas and settings are described below:

**FIGURE 1. THE MOMENTUM SUITE OF AWARDS**

- **Integrated Health Resilience**
  Improving MNCHN/FP/RH in fragile and conflict-affected settings.

- **Country and Global Leadership**
  Strengthening country capacity and contributing to global technical leadership and policy dialogue in MNCHN/FP/RH.

- **Private Healthcare Delivery**
  Strengthening private provider contributions to MNCHN/FP/RH.

- **Safe Surgery in Family Planning and Obstetrics**
  Improving access to and use of safe surgery for maternal health and voluntary family planning.

- **Routine Immunization Transformation and Equity**
  Strengthening immunization programs to reach all who are eligible with high-quality vaccination services.

- **Knowledge Accelerator**
  Facilitating learning, adaptation, innovation, knowledge sharing, and strategic communication for MOMENTUM.
MOMENTUM TOPICS, AREAS, AND THEMES, BY COUNTRY

The MOMENTUM suite supports partner countries to address a wide range of issues, tailoring project activities to each of their unique contexts and needs. The table below lists where each topic, focus area, or theme is being addressed in the West Africa Region.

<table>
<thead>
<tr>
<th>TOPIC / FOCUS AREA / THEME</th>
<th>COUNTRIES</th>
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<tbody>
<tr>
<td><strong>HEALTH TOPICS</strong></td>
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<tr>
<td>CHILD HEALTH</td>
<td>Burkina Faso, Ghana, Mali, Niger, Sierra Leone</td>
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<td>COVID-19</td>
<td>Burkina Faso, Ghana, Mali, Niger, Nigeria, Sierra Leone</td>
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<td>IMMUNIZATION</td>
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<td>MATERNAL HEALTH</td>
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<td>NEWBORN HEALTH</td>
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<td>NUTRITION</td>
<td>Burkina Faso, Ghana, Mali, Niger, Sierra Leone</td>
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<td>VOLUNTARY FAMILY PLANNING / REPRODUCTIVE HEALTH</td>
<td>Benin, Burkina Faso, Côte d’Ivoire, Ghana, Mali, Niger, Nigeria, Senegal, Sierra Leone, Togo</td>
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<tr>
<td>WATER, SANITATION, AND HYGIENE/ INFECTION PREVENTION AND CONTROL</td>
<td>Ghana, Mali, Niger, Sierra Leone</td>
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<td><strong>FOCUS AREAS</strong></td>
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<tr>
<td>CAPACITY STRENGTHENING</td>
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<tr>
<td>COLLABORATING, LEARNING, AND ADAPTING</td>
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<td>GLOBAL LEADERSHIP</td>
<td>Burkina Faso, Mali, Niger, Nigeria</td>
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<td>HEALTH RESILIENCE</td>
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<td>HEALTH SERVICES</td>
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<td>LOCAL ENGAGEMENT</td>
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<td>MEASUREMENT</td>
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<td>PARTNERSHIPS</td>
<td>Benin, Burkina Faso, Côte d’Ivoire, Ghana, Guinea, Mali, Niger, Nigeria, Senegal, Sierra Leone, Togo</td>
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<td>QUALITY OF CARE</td>
<td>Benin, Burkina Faso, Côte d’Ivoire, Ghana, Guinea, Mali, Niger, Nigeria, Senegal, Sierra Leone</td>
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<td>SOCIAL AND BEHAVIOR CHANGE</td>
<td>Burkina Faso, Côte d’Ivoire, Ghana, Guinea, Mali, Niger, Nigeria, Senegal, Togo</td>
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<tr>
<td>CROSS-CUTTING THEMES</td>
<td>FOCUS AREA / THEME</td>
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<tr>
<td></td>
<td>DIGITAL HEALTH</td>
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<td>FRAGILE SETTINGS</td>
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<td>GENDER</td>
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<td>POPULATION, ENVIRONMENT, AND DEVELOPMENT</td>
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<td>URBAN HEALTH</td>
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<td></td>
<td>MARGINALIZED POPULATIONS</td>
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<td></td>
<td>YOUTH</td>
</tr>
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AFRICA BUREAU REGIONAL ACTIVITIES

MOMENTUM Country and Global Leadership

MOMENTUM provides technical assistance to strengthen the capacity of government and non-governmental partners to accelerate reductions in maternal, newborn, and child mortality and morbidity. In sub-Saharan Africa, MOMENTUM Country and Global Leadership is collaborating with partners across the region to support two different objectives and scopes of work at the regional level:

1. Strengthening midwifery pre-service education (PSE) to expand the availability of skilled midwives and improve access to quality maternal and newborn care.
2. Supporting strategic planning to improve access to quality health education in schools.

Strengthening Midwifery Pre-Service Education in Africa

FEATURED ACTIVITIES

- Collaborating with regional partners including the East Central and Southern Africa College of Nursing and Midwifery (ECSACONM), Federation of Associations of Francophone African Midwives (FASFAF), West Africa Postgraduate College of Nursing and Midwifery (WAPCNM), AFREhealth, Pact, and Johns Hopkins School of Nursing to co-develop, test, and apply Educational Capacity Frameworks (ECFs).
  - The ECF is a self-assessment tool that institutional stakeholders can use to describe current capacity in five key education domains. The tool was piloted with midwifery schools in Ghana, Togo, and Botswana. The ECFs aid the midwifery schools in prioritizing where investment is needed and facilitates the development of educational improvement plans or “investment cases.” They can then use these plans with country stakeholders to identify how to address the need for additional resources to improve gaps in midwifery PSE.

- Providing technical guidance to support regional midwifery organizations to work with select schools (future Midwifery PSE Centers of Excellence [COEs]) using ECFs to implement improvement plans that prioritize and address identified gaps. For example, ECSACONM helped the Institute of Health Sciences in Gaborone, Botswana to identify the need to improve the infrastructure management function of the ECF Infrastructure and Management domain, specifically strengthening the ability of faculty to teach skills and addressing the lack of appropriate equipment for student midwives to practice skills. The school developed a budget and plan with ECSACON to procure the necessary equipment for their midwifery students and partnered with Laerdal Global Health to facilitate a training for faculty in skills teaching and simulation.
• Strengthening capacity of regional midwifery partner organizations to improve collaboration and provide technical support to midwifery schools, as they ultimately grow into COEs and support additional schools in their respective sub-regions in the future. Under Pact’s guidance, regional partners and COEs first assessed their capacity using Integrated Technical and Organizational Capacity Assessment tool (ITOCA) and are using Capacity Action Plan (CAP) tools to align their improvement activities with ECF goals and improve educational outcomes.

TESTING A NEW TOOL FOR MIDWIFERY EDUCATION
After testing the ECFs, the project validated the measures in the ECFs by evaluating the acceptability, appropriateness, and feasibility of the ECF as an effective assessment tool among midwifery schools. Survey results showed that users agreed the tool was acceptable (92% of users), appropriate (93%), and feasible (93%), and could be used with more midwifery schools to assess their programs.

Supporting the Strategic Planning Advisors for Education and School Health in Africa (SPAESHA)
FEATURED ACTIVITIES

• Strengthening the implementation of school health policy by identifying opportunities and barriers, and working together with country-level stakeholders, including Ministries of Education and Health in Kenya, Malawi, Senegal, and Uganda, to develop realistic and context-specific policy strengthening plans.

• Conducting a desk review and policy audit in each country, with an aim to use findings to inform qualitative field assessments where key local stakeholder—including teachers, learners, and community members—participate in interviews and focus group discussions to share their experiences and perceptions of school health policy implementation and coordination.

• Facilitating collaboration and knowledge-sharing across the global education, health, and school health communities through dissemination of assessment results to the project’s SPAESHA Global Advisory Committee. MOMENTUM Country and Global Leadership convenes meetings with the SPAESHA Global Advisory Committee, comprised of 18 global health and school health experts, as well as local and regional experts, to gather inputs and guidance on SPAESHA activities, and to share findings and recommendations from the SPAESHA-supported assessments at the country, regional, and global levels.
MOMENTUM Private Healthcare Delivery

MOMENTUM Private Healthcare Delivery supports the Government of Benin’s goal to reduce preventable maternal and child deaths by ensuring that women have access to high-quality voluntary family planning/reproductive health (FP/RH) information, counseling, products, and care through the private sector. To contribute to this goal, the project collaborates with private service providers to improve access to and delivery of quality, client-centered care; reach and engage youth; and strengthen the capacity of private-sector actors and local associations to deliver quality FP/RH services in 10 health zones.

FEATURED ACTIVITIES

• Working with the private sector stakeholders and facility-based providers to expand reach and improve quality of care at service points through mobile outreach, training, and coaching support.

• Promoting the use of digital tools, such as Facebook pages and a chatbot, to expand outreach to youth, equip young people with accurate, quality FP/RH information, and link them to care and services as needed.

• Collaborating with local youth associations to support demand-generation activities and supporting these associations to build their organizational and technical capacity.

PROJECT CONTACTS

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Marius Gnintoungbe, Reproductive, Maternal, Newborn, and Child Specialist (mgnintoungbe@usaid.gov)

PERIOD OF PERFORMANCE

April 2021 – March 2024

GEOGRAPHIC COVERAGE

10 health zones across 7 departments—Department of Alibori (Kandi-Gogounou-Ségbana health zone); Atlantique (Abomey-Calavi/So-Ava); Atakora (Natitingou-Boucom-bé-Toucountouna); Littoral (Cotonou 1–4, Cotonou 2–3, Cotonou 5, and Cotonou 6 zones); Plateau (Sakété-Ifangni); Ouémé (Porto, Aguégués-Sèmè Kpodji), and Zou (Zogbodomey-Bohicon-Zakpota)
MOMENTUM Private Healthcare Delivery works with private health providers to improve their voluntary family planning/reproductive health (FP/RH) technical skills and competencies, particularly their ability to deliver person-centered care to clients. In Benin, the project has trained 34 private health providers on the counseling for choice (C4C) approach to FP and supports high-quality clinical provision of modern contraceptive services.

To meet the unique needs of youth FP clients in Benin, the project has also designed an innovative virtual chatbot called “Tata Annie,” which provides tailored, on-demand information about contraception and reproductive health to clients 24 hours a day, seven days a week. Tata Annie presents as a virtual health provider who answers users’ FP/RH questions through Facebook Messenger. MOMENTUM has conducted promotional meetings to introduce the chatbot to Amour et Vie Youth Ambassadors and members of youth and women’s groups across Benin. Responding to initial user feedback, the project has added a hotline managed by Association Beninoise pour le Marketing Social (a PSI network member) and a midwife who provides quality control reviews and support to the chatbot’s automated responses.

Tata Annie has been accessed by more than 17,000 unique users between 20 and 24 years of age since its launch on the Amour et Vie Facebook page in October 2021. The project is working in close collaboration with the Ministry of Health to transition the ownership of the chatbot to it as part of its wider vision and planning for digital health.
MOMENTUM Integrated Health Resilience

MOMENTUM Integrated Health Resilience provides support to the Ministry of Health to sustainably plan and manage quality MNCHN/FP/RH services and to build resilience to the shocks and stresses faced by the health system in Burkina Faso. The project works with partners and key stakeholders to scale up and sustain access to and use of evidence-based, quality MNCHN/FP/RH information, services, and interventions; improve, institutionalize, measure, and document the capacity of partner organizations and providers to deliver evidence-based, quality MNCHN/FP/RH services responsive to population needs; and strengthen adaptive learning and use of evidence in MNCHN/FP/RH programming through sustained technical leadership.

FEATURED ACTIVITIES

- Conducting fragility analyses using MOMENTUM Integrated Health Resilience’s Fragility, Crisis Sensitivity, and Complexity [F2C] Assessment tool in communities to identify ongoing and potential major shocks and stresses that are likely to impact health care.

PROJECT CONTACTS

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USAID MISSION CONTACT

Abdoul Karim Guiro, Project Management Specialist (akguiro@usaid.gov)

IN-COUNTRY PARTNERS

Ministry of Health directorates (including Department of Family Health [DSF], Department of Nutrition, Directorate of Health Care [DGOS], Directorate of Information Systems [DSIS], General Directorate of Public Health [DGSP], and General Directorate of Studies and Statistics [DGESS])

PERIOD OF PERFORMANCE

December 2020 – December 2024

GEOGRAPHIC COVERAGE

Center East, Center West, and South West regions
• Supporting on-site mentorship and supervision efforts for providers and establishing a social accountability approach, in collaboration with government and community stakeholders, to respond to client and community preferences and needs to improve the quality of MNCHN/FP/RH services.

• Supporting community health workers, through capacity strengthening, mentorship, and supervision, to provide a wide range of MNCHN/FP/RH and immunization services.

• Supporting the implementation of the National Community Health Strategy, including technical assistance for using the Community Health Planning and Costing tool.

• Adapting and applying the Reaching Every District/Reaching Every Community (RED/REC) approach to support efforts to improve district-level planning to enhance equitable and sustainable access to a broad range of integrated health services.

• Testing and adopting innovative practices to support efforts to improve MNCHN/FP/RH outcomes, including scaling up the use of injectable contraception (DMPA-SC) for self-care and the implementation of peer group interventions for first-time parents.

• Supporting the use of innovative digital health tools, such as the Integrated e-Diagnostic Approach, to support data-driven improvements and providers’ clinical decisions.
PROJECT SUCCESS SPOTLIGHT

Increasing Access to Quality Maternal & Newborn Health Care in Burkina Faso

In Burkina Faso, MOMENTUM Integrated Health Resilience works closely with country partners to provide capacity building and mentorship to health workers to improve the quality of maternal, newborn, and child health (MNCH) services across the country. To ensure sustained improvements in service delivery, the project has trained nearly 50 health providers to serve as clinical mentors to other health providers to ensure skilled delivery care and best practices in MNCH, nutrition, and immunization. To date, the trained mentors have mentored nearly 100 health providers in different clinical skills, including active management of labor, screening and management of moderate and severe malnutrition, prenatal care, and newborn resuscitation.

After three rounds of mentorship, all mentees showed significant improvements across all key clinical skills, including newborn resuscitation and postpartum hemorrhage management. These improvements in providers’ skills have translated to improved health practices among women and mothers as well. To date, the project has successfully contributed to doubling the proportion of pregnant women who receive at least four antenatal care (ANC) visits before giving birth compared to baseline, meaning more women are accessing the recommended care during pregnancy to learn about newborn care and to identify any pregnancy danger signs.
MOMENTUM Country and Global Leadership supports the government of Côte d’Ivoire to improve access to and quality of an integrated package of voluntary family planning (FP), maternal and newborn health (MNH), and malaria in pregnancy (MIP) services at the clinic and community levels. Clinic-based interventions will focus on a continuous, participatory quality improvement (QI) process to promote lasting improvements in strengthening the health system and the capacity of health providers. Local activities are led by community partners who receive technical and organizational capacity strengthening to design, implement, and monitor strategies tailored to where they live. A key focus of the project is to support providers, health sites, health managers, and communities in strengthening integrated service delivery approaches for FP, MNH, and MIP at all levels of care, with an emphasis on caring for the mother-baby dyad along the various continuums of care.

FEATURED ACTIVITIES

• Coordinating with USAID and other U.S. Government-funded MNH partners to align existing QI tools and resources to improve care in public facilities. This includes reviewing and strengthening QI approaches developed by MSHP-CMU for MIP, essential newborn care, newborn resuscitation, postnatal care, care and management of small and sick newborns, chlorhexidine cord care, and treatment of possible severe bacterial infection.

• Supporting select district facilities to conduct self-evaluations of their quality of care. Facilities will use a standardized QI tool, developed in coordination with the MSHP-CMU and other partners, to assess the quality of their MNH services and care, including essential newborn care, pre-discharge postnatal care for mothers and newborns, and use of best practices for MNH and FP. The self-evaluation will include an assessment of providers’ communication, counseling, and family engagement skills.

• Strengthening timely referral systems, improving integrated care at the facility level, and empowering clients through better counseling, education, and client feedback systems.

PROJECT CONTACT
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USAID MISSION CONTACT
Willibrord Shasha, Senior Community Health Team Lead (wshasha@usaid.gov)

IN-COUNTRY PARTNERS
Ministry of Health, Public Hygiene, and Universal Health Coverage (MSHP-CMU), including various departments (Community Health Directorate, Health Information and Informatics Directorate, Hospital Medicine Directorate, the National HIV/AIDS Program, National Malaria Control Program, National Maternal and Child Health Program, Nursing and Maternal Care Directorate, and National Program of School and University Health)

PERIOD OF PERFORMANCE
January 2022 – September 2024

GEOGRAPHIC COVERAGE
Forty-eight districts across the Abidjan 1 and 2, Agnéby-Tiassa, Gbéké, Gontougo, Grands-Ponts, Haut-Sassandra, Iffou, Indénié-Djuablin, Mé, Moronou, N’Zi, and Sud-Comoé regions
• Partnering with community-based organizations to design quality approaches to promote respectful, person-centered education, counseling, and care for women, men, adolescents, youth, and communities. The project will use the integrated technical organizational capacity assessment (ITOCA) tool to strengthen these partners’ organizational capacity to manage finances and increase their organizational effectiveness to implement activities.

• Providing orientation and coaching to health providers to promote effective family planning counseling to clients based on the principles of person-centered care. Providers will be coached to provide counseling on the full contraceptive method mix and ensure they discuss clients’ personal needs and preferences. They will also receive coaching to support them in examining their own biases and attitudes regarding provision of FP to youth to address provider bias and improve client satisfaction.

• Supporting The Advocacy and Accountability Collaborative (TAAC) Hub, a coalition of civil society organizations in FP/RH, to strengthen their organizational and technical capacity to effectively conduct advocacy for improved access to and accountability to beneficiaries in FP services. The project will work to position the TAAC Hub to fundraise and receive direct funding from donors in the future.
Building Healthier Communities: Enhancing MNCH/FP Health Outcomes in Côte d’Ivoire

In Côte d’Ivoire, MOMENTUM Country and Global Leadership provides support to NGOs to bolster their community engagement activities related to improving maternal, newborn, and child health and voluntary family planning outcomes. The project led multiple co-creation workshops to support 13 partner NGOs to develop action plans to meet their organizational goals, and to contribute to revisions to the national community health workers’ (CHW) technical manual, which included integration of key gender and social and behavior change topics.

To date, the partners have trained more than 80 NGO community focal points and nearly 500 community actors, including CHWs and community counselors, with the revised CHW technical manual. In collaboration with the partners and trained community actors, the project has established various platforms across intervention areas to share integrated health information and engage key community groups in discussions about MNCH/FP/RH and gender. In total, the NGOs and community actors have established and supported:

- Nearly 700 mothers’ classes (including more than 200 adolescent mother groups and 300 adult groups) to discuss prenatal, pregnancy, and postnatal care
- Roughly 553 husband and future husband schools and 557 couples communication sessions to engage men in MNCH/FP topics
- More than 4,500 home visits to engage the community in MNCH/FP topics
- More than 400 safe spaces for adolescents and youth to discuss sexual and RH topics with trained CHWs
MOMENTUM Country and Global Leadership

Supporting the integration and quality of maternal, newborn, and child health and nutrition/voluntary family planning/reproductive health (MNCHN/FP/RH) services

In Ghana, coverage of MNCH services delivered by skilled health workers is high, with 98 percent of pregnant women receiving at least one antenatal care visit and 74 percent of births attended by a skilled health worker. Despite these high levels of service coverage, significant reductions in mortality for newborns, children under age 5, and new mothers have not been reported. Through technical assistance and support to partners, MOMENTUM Country and Global Leadership is supporting all levels of the Ghanaian health system to address persistent lags in MNCHN/FP/RH outcomes, including preventable deaths, and improve integrated, quality, client-centered MNCHN/FP/RH care and services.

FEATURED ONGOING ACTIVITIES

• Strengthening the clinical and quality improvement capacity of targeted facilities through activities such as:
  
  o Providing on the job capacity strengthening in key technical areas including integrated management of childhood illness (IMNCI), IPC, helping babies breathe, basic emergency obstetric and newborn care (BEmONC), nutrition and family planning (FP) through integrated supportive supervision, coaching and peer mentorship visits across all sites using a hub and spoke model through networks of practice (NoPs).

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IN-COUNTRY PARTNERS

Essential Health Services activities: Ghana Health Service (GHS) (completed)

MNCHN/FP/RH Integration activities: GHS, Ghana Nursing and Midwifery Council, Ghana Registered Nurses and Midwives Association, Ghana Registered Midwives Association, Youth Advocacy on Rights and Opportunities (YARO), and Young Leaders for Change Foundation

PERIOD OF PERFORMANCE

Essential Health Services activities: May 2020 – February 2021 (completed)

MNCHN/FP/RH Integration activities: April 2021 – December 2023

GEOGRAPHIC COVERAGE

Essential Health Services activities: Western region (completed)

MNCHN/FP/RH Integration activities: Bawku West, East Mamprusi, Mamprugu-Moagduri, Nadowli-Kaleo, Sagnarigu, Sissala East, and Yendi districts
- Supporting establishment of kangaroo mother care (KMC) services in three district hospitals and incorporation of KMC into routine neonatal intensive care unit (NICU) services for an estimated population of 16,111 infants. Clients are now receiving health care services from trained providers, contributing to reducing the number of babies dying from intra-partum complications and prematurity.

- In partnership with GHS, supporting the roll-out of obstetric triaging implementation package (OTIP) and modified early warning signs (MEOWS) charts in five of the nine district hospitals in the zone of influence to promptly provide maternity services to at-risk, expectant mothers who visit high volume facilities to deliver. Nineteen midwives and doctors were trained as champions and are leading cascading training of over 250 midwives at labor wards. These five districts’ hospitals are the first and only district hospitals in the northern part of Ghana to institute triaging at the facility level aimed at correctly identifying and prioritizing sick clients, decreasing waiting time, and streamlining admission processes to improve care planning and documentation. The model is being adopted for national roll-out.

- Supporting the improvement of data quality and use in planning and decision-making at facility level.

- Providing coaching to address gaps identified in performance review meetings and action plans, including data inconsistencies across the registers, reporting forms, and data entry into the district health information management system following a baseline assessment of facility performance.

- Partnering with Youth Advocacy on Rights and Opportunities (YARO) and 28 health facilities to increase youth access to FP services in communities. Activities include:

  - Providing technical and capacity development assistance to help YARO implement and scale interventions designed to increase youth social accountability to improve FP/RH outcomes and document processes and learnings.

  - Responding to needs identified through an organizational assessment by supporting YARO to bolster the quality and responsiveness of FP/RH services, plans, and budgets to better address young people’s unique health needs.
• Producing a summative report of consolidated learnings on youth social accountability from this work in Ghana in addition to learnings from similar activities in Kenya. This report will contribute to growing the evidence base around youth social accountability.

• Supporting the GHS to strengthen policy and promote an enabling environment around quality MNCHN/FP/RH services at the national level by:
  o Ensuring nurturing care is integrated into the postnatal care checklist and guidance.
  o Collaborating with the GHS to conduct formative assessments on intrapartum nutrition and small sick newborn (SSNB) feeding to improve the quality of counseling and strategies available for mothers in labor and SSNBs.
  o Supporting country-level policy dialogue processes for nursing and midwifery, including planning for key stakeholder meetings, mapping out next steps for the Behaviorally Focused Applied Political Economy Analysis process, and ensuring stakeholder engagement for continued professional development.
  o Advising the national water, sanitation, and hygiene and infection prevention and control (WASH/IPC) technical working group (TWG) as it revises the national WASH/IPC guidelines. MOMENTUM Country and Global Leadership shared the global Essential Supply List for Infection Prevention and Control in Health Care Facilities with the TWG as part of the guideline and list revision process.
Maintaining essential health services during COVID-19

MOMENTUM Country and Global Leadership supported the Government of Ghana’s efforts to respond to COVID-19 in 10 districts in the country’s Western region. The project’s activities, which were completed in 2021, focused on three key areas: (1) reviewing and updating national guidelines and materials to provide training to frontline health workers (FLHWs) and connect health workers with international experts and resources to respond to the pandemic; (2) strengthening IPC approaches for 47 selected health care facilities to mitigate the spread of COVID-19 while continuing to deliver essential services; and (3) supporting 16 COVID-19 treatment centers in the collection, review, sharing, and use of COVID-19 data across facilities and with the national case management to improve management of COVID-19 cases.

COMPLETED FEATURED ACTIVITIES

- Scaled up regional communities of practice across the country to foster enabling environments for FLHWs at COVID-19 treatment centers to exchange data and knowledge with each other. The project supported 80 virtual meetings where physicians reviewed clinical cases and addressed issues, including hypoxia (insufficient oxygen levels in tissues) management, use of antibiotics in patients with fevers, psychosocial support for FLHWs, and debunking myths and misconceptions about COVID-19 and vaccines. The virtual grand rounds and case-based discussions were a key part of the communities of practice as they focused on critical care of COVID-19 patients and encouraged coordination and communication among FLHWs.

- Improved communication between treatment centers by establishing data accessibility and sharing strategies that facilitate high-quality treatment of COVID-19 patients. The project equipped 16 treatment centers with limited modems, tablets and computers, and a data system to enable communication between facility staff at different centers. This technology also supported the centers to conduct teleconsultations and share images and laboratory results with members of the national case management team in real time to improve case management.

- Supported health facilities and district health management teams (DHMTs) to provide high-quality, coordinated care for COVID-19-specific services and topics. The project conducted 47 trainings, facilitated peer learning sessions, and provided onsite supervisory visits to strengthen the capacity of DHMTs and 240 primary health care workers in six regions. The capacity-strengthening focus included IPC, self-care for providers, risk communication, and implementation of best practices to maintain essential services for MNCH/FP/RH, tuberculosis, HIV, and noncommunicable diseases.
MOMENTUM Private Healthcare Delivery

MOMENTUM Private Healthcare Delivery is partnering with local organizations to expand access to voluntary family planning (FP) services, including long-acting reversible contraception (LARC) across select regions of Ghana. The project supports the Total Family Health Organization in Ghana to expand access to voluntary LARC methods in 125 private sector health clinics across 10 regions. This effort helps to build surge capacity for voluntary LARC services in the private sector by supporting implementing partners to train health providers and ensure consistent supply of LARC commodities to health clinics. The project also works in partnership with community groups to improve demand for FP/reproductive health (RH) services at the community-level by increasing awareness of the LARC and FP/RH services available in private facilities. In partnership with the Methodist Health System Ghana (MHSG), MOMENTUM Private Healthcare Delivery is helping to ensure that health providers in the MHSG have the skills they need to deliver modern FP methods to clients. The project is supporting the development and implementation of a new model for mobile outreach services using different service delivery models that meet the needs of the communities being served.

**PROJECT CONTACTS**

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**IN-COUNTRY PARTNERS**

Ghana Health Service Family Health Division, Methodist Health System Ghana, and Total Family Health Organization

**PERIOD OF PERFORMANCE**

October 2021 – September 2023

**GEOGRAPHIC COVERAGE**

Ahafo, Ashanti, Bono, Bono East, Central, Greater Accra, Upper East, Upper West, Volta, and Western regions
FEATURED ACTIVITIES

**Improving Access to Quality LARC Services**

- Using a blended training approach (digital and onsite learning) to provide clinical training, coaching, and mentorship for staff in private-sector facilities. The selected facilities are ones that are seeking to expand FP services to include provision of LARC methods.

- Supporting branding efforts through the development of printed materials (such as banners and flyers) to increase client awareness of LARC services in private health facilities where they are available.

- Engaging with local communities through community groups, such as women’s groups, religious groups, and local associations, to promote the availability of FP/RH services, including LARCs, in nearby private facilities.

**Expanding the Reach of FP Services through a New Model for Mobile FP Service Delivery**

- Strengthening the capacity of health providers to provide an expanded range of FP services and methods.

- Conducting supportive supervision, coaching, and mentoring to 75 health providers across 25 MHSG facilities, in collaboration with the MHSG and Ghana Health Services.

- Partnering with MHSG to develop and implement a new model for mobile outreach services managed by MHSG.
MOMENTUM Routine Immunization Transformation and Equity

MOMENTUM Routine Immunization Transformation and Equity provided technical support to the Government of Ghana through the Ministry of Health and the Ghana Health Service to improve COVID-19 vaccination uptake and service delivery in selected districts in the prioritized regions. Through the Ghana NGO Coalition on Health, the project provided civil society organizations and local NGOs with training on community engagement, COVID-19 vaccination monitoring, and human centered design to strengthen their community immunization work and complement the efforts of the Ghana Health Service.

COMPLETED FEATURED ACTIVITIES

- Addressed data entry backlogs at select health facilities in 29 districts by providing staff with resources and training on data management, monitoring, and quality.
- Supported 29 districts to update existing microplans, including the development of digital microplans in three selected districts. Districts that piloted digital microplans were able to graduate their digital maps to accurately define their catchment areas and assign health data to their sub-districts to ease planning and decision making, saving time and cost.
- Supported identification and documentation of gaps in cold chain management for COVID-19 vaccines in Ahafo, Western, and Western North regions. The project then worked with Ghana Health Service and partners, including UNICEF, to develop solutions to address those gaps.

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IN-COUNTRY PARTNERS
Ghana Health Service, Ghana NGO Coalition in Health, and PATH

PERIOD OF PERFORMANCE
July 2022 – June 2023 (completed)

GEOGRAPHIC COVERAGE
Ahafo, Western, and Western North regions
MOMENTUM Safe Surgery in Family Planning and Obstetrics

In Guinea, MOMENTUM Safe Surgery in Family Planning and Obstetrics partners with the Government of Guinea to accelerate progress towards strengthening surgical safety in maternal health care and preventing obstetric fistula. The project works with governmental partners and professional associations to identify and strengthen gaps in surgical team capacity to provide safe surgical obstetric care and prevent and treat fistula. The project is also providing technical support to the government to update, develop, test, validate, and implement quality improvement and social and behavioral change strategies with providers to optimize appropriate and high-quality cesarean delivery care.

FEATURED ACTIVITIES

- Identifying and addressing key equipment and supply needs through auditing operating theater equipment, procuring supplies, and building the capacity of health facility staff to maintain surgical equipment and materials.

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PERIOD OF PERFORMANCE

April 2022 – September 2024

GEOGRAPHIC COVERAGE

Boké, Conakry, Kindia, and Labé regions and Kissidougou prefecture
• Strengthening the skills of cesarean delivery providers and health providers through training and mentorship, aligned with World Health Organization Guidelines and the safe surgery checklist.
  
  o Partnering with the Order of Anesthetists in Guinea to identify and train regional clinical mentors and trainers who will then cascade training to hospital-based anesthesiology and resuscitation providers.
  
  o Working with the National Blood Transfusion Centre to strengthen blood transfusion skills of health providers at blood transfusion project sites through training.
  
  o Organizing simulation exercises for staff to respond to obstetric emergencies at the regional hospitals of Kindia, Boké, and Labé so they are oriented on coordinated actions to respond quickly and effectively to obstetric emergencies.

• Supporting holistic fistula care, which includes:
  
  o Working with *relais communautaires* (community mobilizers) to establish village committees that promote birth preparation practices, provide referrals for obstetric emergencies, and identify women suffering from fistula and connect them with available care.
  
  o Training surgeons and surgical teams in the management of fistula repair.
  
  o Providing economic support to women with fistula through implementing a Social Immersion and Economic Reintegration program that includes entrepreneurship training and support activities.

• Partnering with the Ministry of Public Health and Hygiene to support the institutionalization of systematic quarterly audits of maternal and neonatal mortality, including cesarean delivery audits for severe maternal morbidity at supported national and regional hospitals.
Leveraging Expertise and Strengths Across MOMENTUM for Greater Impact in Mali

In Mali, MOMENTUM is providing support to local partners to address health priorities across the country through four MOMENTUM projects—Integrated Health Resilience, Private Healthcare Delivery, Safe Surgeries in Family Planning and Obstetrics, and the newest project in-country, Routine Immunization Transformation and Equity. Though each project implements activities in different districts and contexts to address different health needs, the projects have been collaborating closely at the national level to ensure synergies across MOMENTUM to deliver a greater impact in the country.

All four MOMENTUM projects aim to strengthen equitable access to and use of evidence-based, high quality maternal, newborn, and child health, voluntary family planning, and reproductive health information and services through the public and private sectors. To achieve this shared goal, the projects share resources and tools, such as health facility assessment and data collection tools, as well as findings from any completed assessments to reduce duplication of efforts. The projects also conduct periodic joint meetings to help navigate the complex political environment in Mali and coordinate around technical and operational aspects of project management and implementation, sharing best practices, and coordinating any engagements with Malian government and non-government partners. The MOMENTUM projects have found that their coordination with private sector, civil society organizations, and professional associations has also helped to present a unified MOMENTUM voice with stakeholders, and helped each individual project advance their own objectives to meet the needs of their target communities.
MOMENTUM Integrated Health Resilience

MOMENTUM Integrated Health Resilience works with government and civil society partners to improve the availability, quality, and use of an integrated package of essential health services in Mali. The work is centered in Northern Mali, a vast, arid area that in recent years has seen a slower pace of development than other parts of the country. Continued insecurity in the region has made it challenging to provide critical social services such as health care and education. The project supports district governments and other subnational governance structures to absorb, adapt to, and recover from health system shocks and stresses. The project is also working to strengthen coordination between the Government of Mali, humanitarian and development partners, and other stakeholders to address or prevent the backsliding of health outcomes.

FEATURED ACTIVITIES

- Employing social accountability approaches, such as CARE’s Community Score Card and other feedback mechanisms, to support efforts to promote community engagement and inclusion.

- Supporting capacity strengthening of district Ministry of Health and Social Affairs staff and health care workers to deliver high-quality maternal, newborn, and child health, voluntary family planning, and reproductive health (MNCHN/FP/RH) services using a low-dose, high-frequency approach to training.

- Supporting efforts to re-establish and/or bolster community health worker (CHW) sites to strengthen the capacity of CHWs and relais communautaires (community volunteers) to offer the minimum essential community care package.

- Strengthening the collection, analysis, and use of routine public health information across the continuum from the community to the centre de santé communautaire (community health center) and district levels to enable adaptive management in a complex, dynamic context.

- Piloting a model family cluster program to strengthen community engagement in health and to better deliver education and social and behavior change messages that enable communities to advocate for quality health services.

- Partnering with and strengthening the capacity of local non-governmental organizations to support the continuity of essential health services at the community level during COVID-19.

PROJECT CONTACTS

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IN-COUNTRY PARTNERS

Mali Ministry of Health and Social Affairs (MOHSA) and national NGOs (specific organizations to be determined)

PERIOD OF PERFORMANCE

November 2020 – February 2025

GEOGRAPHIC COVERAGE

Gao and Timbuktu health districts
• Developing and testing the Fragility, Crisis Sensitivity, and Complexity Assessment tool to identify ongoing and potential shocks, stresses, and crises impacting the health system; provide context and data on broad risk scenarios for health resilience work; and provide a baseline and monitoring system to track the project context as resilience activities begin.

• Exploring the use of transition planning tools, such as the Service Delivery Exit Matrix, to determine which health and nutrition services and interventions are ready to transition from humanitarian actors to development actors and guide a feasible, context-aware transition plan.

• Implementing adaptive learning and management through reviews of project activities with USAID, the Ministry of Health and Social Affairs, local implementing partners, and civil society to review implementation and make recommendations for strengthening project approaches.
MOMENTUM Private Healthcare Delivery

MOMENTUM Private Healthcare Delivery seeks to improve the availability of high-quality health products and supplies, such as family planning commodities and oral rehydration salts and tablets, and services for maternal, newborn, and child health and nutrition, voluntary family planning and reproductive health (MNCHN/FP/RH) and water, sanitation, and hygiene (WASH) in the private sector; support demand for those products and services; and develop a favorable environment for private-sector engagement within the wider health system. In Mali, the project employs a total market approach in six regions to engage at the health care point-of-service, at the community level, and at nodes of private-sector coordination and collaboration, including with existing private-sector platforms and commercial actors.

FEATURED ACTIVITIES

- Conducting an analysis of private health care points-of-service, with a focus on clinical quality of care, coverage of services, client-centered approaches, and private provider needs and motivations, to inform engagement with networked and non-networked sites.

- Supporting quality of clinical care and client-centered approaches through training and support for private providers, specifically in the areas of FP (including post-abortion and postpartum family planning), adolescent-responsive contraceptive services, MNCHN, infection prevention and control in health facilities, and service integration.

- Strengthening referral networks among health facilities, including between the private sector and primary-level, community-led health centers.

PROJECT CONTACTS

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IN-COUNTRY PARTNERS

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PERIOD OF PERFORMANCE

February 2021 – September 2023

GEOGRAPHIC COVERAGE

Bamako, Kayes, Koulikoro, Mopti, Segou, and Sikasso regions
• Exploring and facilitating commercial sector engagement, including supporting activities that employ a market vision to identify and operationalize plans for procurement and distribution of priority FP and health products.

• Improving use of FP/RH; maternal, newborn, and child health; WASH; and nutrition products and services by supporting local actors to conduct demand-creation activities.

• Engaging local actors, including the *Réseau des Jeunes Ambassadeurs du Mali*, local organizations and private-sector platforms, to spotlight challenges and opportunities for private-sector engagement at the national and subnational levels.
In Mali, MOMENTUM Routine Immunization Transformation and Equity provides management support and technical oversight to the Expanded Programme on Immunization (EPI), as well as national-level immunization and supply chain expertise through technical experts, working in coordination with other technical partners such as the World Health Organization and UNICEF. The project also builds upon the COVID-19 work that MOMENTUM Integrated Health Resilience achieved in Mali. In coordination with the Ministry of Health (MOH), the project aims to increase uptake of COVID-19 vaccines among target audiences in four health districts in the Gao and Timbuktu regions, strengthen vaccine supply chain logistics and equipment, provide training to improve data availability and quality, and strengthen health facilities’ capacity for data use for decision-making.

FEATURED ACTIVITIES

- Providing technical assistance to the National Center of Immunization by adapting innovative service delivery platforms and revamping existing planning processes to help vaccinate priority groups.

- Providing strategic support to the national logistics working group by assisting in the development of appropriate terms of reference and standard operating procedures for COVID-19 vaccine coordination and ancillary product deployment.
• Assisting the MOH to revise policies and strategies related to COVID-19 vaccination supply chain management.

• Improving COVID-19 vaccination data availability, analysis, and use for decision-making in health facilities in Ansongo, Gao, Niafunké, and Timbuktu districts by holding data analysis and review meetings and supplying critical equipment and supplies to facilities. At the national level, MOMENTUM Routine Immunization Transformation and Equity is also filling human resource gaps at the MOH by seconding a local technical advisor and international immunization expert to the ministry to support ongoing efforts to strengthen COVID-19 vaccination policies, plans, and coordination efforts.

• Training technical directors on the DHIS2 COVID-19 module for new health facilities and data managers in 60 health facilities in Ansongo and Niafunké districts on the use of the COVID-19 vaccination module in DHIS2 platforms.
MOMENTUM Safe Surgery in Family Planning and Obstetrics

MOMENTUM Safe Surgery in Family Planning and Obstetrics seeks to build awareness of, equitable access to, and provision of high-quality, voluntary, indicated, and consented safe surgery at the national level and in Mali’s Koulikoro and Sikasso regions. The project provides technical support to Malian institutions and organizations to increase their capacity to introduce, deliver, scale up, and sustain evidence-based interventions to provide high quality health services, such as emergency surgical obstetric services; FP services including counseling, PPFP, and removal of LARCs; prevention of female genital fistula; and prevention, screening, and care and treatment of gender-based violence (GBV).

FEATURED ACTIVITIES

• Expanding surgical teams’ readiness and ability to safely provide care in the context of COVID-19 through procurement, training, and support for essential equipment and supplies and capacity improvements supporting the National Strategic Plan for MNCHN.

• Working with communities and local organizations to support women with fistula and refer them to high-quality treatment services.

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IN-COUNTRY PARTNERS
Directorate General of Health and Public Hygiene; Association of Midwives of Mali; faith-based and community-based organizations (select civil society organizations and community health centers); Malian Society of Gynecology and Obstetrics; National Council of the Order of Physicians of Mali (CNOM); National Office of Reproductive Health, Anesthesia, Resuscitation, and Emergency Medicine Society of Mali; USAID bilateral projects (Keneya Nièta and Keneya Sinsi Walé); and Viamo

PERIOD OF PERFORMANCE
May 2021 – September 2025

GEOGRAPHIC COVERAGE
Koulikoro and Sikasso regions and national level
• Reviewing and recommending revisions to existing national guidelines and policies to improve alignment with WHO recommendations that support task shifting of select FP/RH services to improve access to voluntary LARCs and permanent methods (PM). The recommendations will focus on updating and implementing policies that shift the provision of voluntary LARCs and PM services from physicians to nurses and midwives.

• Assisting the Ministry of Health (MOH) with the review and revision of curricula and clinical tools for provision of safe surgery and LARCs, with a focus on gender, youth, and social inclusion, in partnership with professional associations, such as Société Malienne de Gynécologie Obstétrique (SOMAGO) and Société d’anesthésie, de réanimation et de médecine d’urgence du Mali (SARMU Mali).
MOMENTUM Integrated Health Resilience

MOMENTUM Integrated Health Resilience works with partners in Niger to strengthen quality MNCHN/FP/RH services and support improved health resilience among communities in the Dosso and Tahoua regions. The project provides technical assistance to national and regional partners to increase equitable access to and use of essential facility- and community-based health services. This is done by supporting the development and implementation of adaptive, locally-owned approaches that reflect the realities of targeted districts and communities.

FEATURED ACTIVITIES

- Supporting districts to strengthen routine health management information system (HMIS) data collection, analysis, and use by helping to develop and implement data quality improvement plans that also address information and communication technology needs.

- Promoting adolescent-responsive FP/RH programming in partnership with the Ministry of Public Health, Population, and Social Affairs and its Adolescents and Youth Health Directorate, health providers, community health workers, community influencers and youth themselves by:
  
  o Improving youth engagement and leadership and the adoption of healthy MNCHN/FP/RH behaviors by identifying, training, and mobilizing district-based groups of 15-20 young people. Each group will design their own annual program of action to promote relevant health decision-making by youth and demand creation among them.

  o Supporting youth community action teams to carry out participatory research activities to analyze health-seeking behaviors in fragile settings and implement youth-sensitive interventions.

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IN-COUNTRY PARTNERS

Niger Ministry of Public Health, Population, and Social Affairs (MSP/P/AS); Country Health Information Systems and Data Use (CHISU); Niger Expanded Program on Immunization; President’s Malaria Initiative/Impact Malaria; United Nations Children’s Fund (UNICEF); United Nations Population Fund (UNFPA); and USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM)

PERIOD OF PERFORMANCE

October 2021 – September 2023

GEOGRAPHIC COVERAGE

Dosso and Tahoua regions
• Preparing and introducing a package for first-time parents comprised of small-group, curriculum-based education; monthly home visits; small-group education with key influencers; and facility-based training and support. While parental education has typically been segmented by gender, the project plans to use a blended approach (the CoupleConnect curriculum) to encourage mixed-gender education.

• Improving MNCHN/FP/RH quality of care by providing mentorship and supportive supervision, in partnership with MSP/P/AS, to strengthen facility- and community-based health workers’ skills and service delivery, particularly in integrated community case management (iCCM). These activities entail:
  - Conducting an assessment of the coverage and strength of iCCM efforts, specifically for malaria, pneumonia, diarrhea, and malnutrition, and the degree to which iCCM is institutionalized in district primary health care delivery to address implementation gaps.
  - Strengthening and institutionalizing iCCM by training CHWs, improving their supervision system, and engaging community stakeholders, such as mayors, community leaders, and local civil society organizations, in support of their work.
  - Adapting and implementing the RED/REC approach to strengthening routine immunization programming to support the MOH in data-driven microplanning techniques to ensure scarce health-sector resources are optimized to deliver vaccines to unreached populations. Strengthening partnerships with Nigerien non-governmental organizations (NGOs) to expand access to and improve the quality of FP services by providing them with training and mentorship to implement social and behavior change (SBC) strategies with local groups. The project will develop a competitive process to select and engage local NGOs as subgrantees to implement SBC activities in collaboration with DHMTs.
MOMENTUM Private Healthcare Delivery

MOMENTUM Private Healthcare Delivery supports the Government of Niger’s goals to improve access to and use of quality maternal, newborn, and child health and nutrition, voluntary family planning, and reproductive health (MNCHN/FP/RH) services through the public and private sectors, focusing on service delivery channels that meet the needs of underserved and remote populations. The project collaborates with primary-level health facilities and uses a mobile outreach approach to bring services to communities facing challenges in accessing care. Through engagement with select private health facilities, the project supports efforts to strengthen the emerging collaboration between the private and public sectors at the subnational level, elevating lessons learned to national-level stakeholders.

FEATURED ACTIVITIES

- Conducting facility assessments of public and private health facilities, with a focus on quality of care, coverage, and the distinct challenges faced by private and public providers to inform plans for engagement with various health facilities.

- Analyzing the current operational and regulatory frameworks impacting private health care providers in Niger to inform and strengthen collaboration between the private sector and the Ministry of Public Health.

- Training selected health care providers across the public and private sectors, at primary facility and community levels, to improve the quality of care in priority health areas, namely MNCH (with a focus on basic emergency obstetric and newborn care), FP, nutrition, and water, sanitation and hygiene.

- Supporting efforts to implement a high volume of mobile outreach events to meet the needs of remote and underserved communities, creating linkages with static health facilities for continuity of care.

- Assisting with timely and relevant use of service delivery data by public and private health care providers, including collaboration with health authorities at the district and regional levels.

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PERIOD OF PERFORMANCE
June 2021 – September 2023

GEOGRAPHIC COVERAGE
Maradi and Zinder regions
MOMENTUM Routine Immunization Transformation and Equity

MOMENTUM Routine Immunization Transformation and Equity supported the Government of Niger’s goal to ensure its population is immunized against COVID-19 through strengthening supply chain management for the COVID-19 vaccine program. The main challenges addressed by the program included decision-making on vaccine types, allocation strategies to manage potential delays in shipments, vaccine temperature monitoring, and ensuring the security of the vaccines. MOMENTUM supported the application of supply chain best practices including improving vaccine warehousing, security measures, and robust tracking of the vaccines. The project also supported the alignment of strategies with tailored supply chain approaches and comprehensive capacity strengthening strategies for health workers throughout the phases of vaccine introduction.

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Ministry of Public Health/Expanded Programme on Immunization, Bill and Melinda Gates Foundation, GAVI, International Federation of Red Cross and Red Crescent Societies, UNICEF, WHO, and World Bank

PERIOD OF PERFORMANCE
May 2021 – April 2023 (completed)

GEOGRAPHIC COVERAGE
Maradi, Tahoua, and Zinder regions
COMPLETED FEATURED ACTIVITIES

- Provided guidance to the National Technical Working Group on system-wide supply chain strategies for managing multiple vaccines for COVID-19, including developing distribution, tracking, and monitoring plans (to track vaccines by manufacturer, batch, expiration date, and wastage) to align with service delivery strategies for priority populations.

- Contributed to the supply chain elements of microplanning at subnational levels, ensuring that national policy and guidance are reflected in the strategies at subnational level, and that realities at subnational levels influence national planning.

- Collaborated with partners on adapting waste management best practices, including providing technical guidance on the design and implementation of national and subnational waste management plans and systems that incorporate COVID-19 vaccination.

- Supported cold chain storage enhancements, especially at the last mile, as they related to the COVID-19 vaccine.

- Assisted national and subnational efforts to strengthen use of real-time data to ensure the security of COVID-19 vaccines, including warehouse and transport security and temperature monitoring.

- Identified solutions to improve the vaccine cold chain maintenance system by applying a human-centered design approach.
**MOMENTUM Country and Global Leadership**

**Mitigating Violence Against Women and Girls and Child Early Forced Marriage**

MOMENTUM Country and Global Leadership supports the Government of Nigeria’s goals to prevent and mitigate the consequences of violence against women and girls and works with the government to address drivers of child, early, and forced marriage (CEFM) in the country. The project supports efforts to address intimate partner violence (IPV), sexual violence (SV), and early adoption of family planning. It works with local stakeholders and partners to design and adapt GBV, CEFM, and early adolescent pregnancy interventions through participatory action planning and co-creation processes addressing the social norms that affect early adolescent pregnancy.

**FEATURED ACTIVITIES**

- Working with partners to implement the Social Norms Exploration Tool (SNET) to unpack the social norms that drive GBV, CEFM, and early adolescent pregnancy and to encourage critical reflection on social norms and promote norms-shifting interventions among community members.

- Conducting a BF-APEA to understand the underlying incentives, interests, and systemic behaviors that explain the persistence of stubborn, sticky problems within governance systems. MOMENTUM Country and Global Leadership uses BF-APEA to understand the potential role of local leadership across relevant sectors in promoting positive social norms and implementing IPV, SV, and CEFM-related laws and policies to increase accountability on these issues.

- Supporting the efforts of country partners to apply the ITOCA tool to identify gaps and capacity development needs, plan support activities, and monitor changes in organizational capacity through the implementation of a capacity action plan and reassessment. The ITOCA tool will measure local partner organizational capacity in multiple areas, including project management, resource mobilization, financial and grants management, human resource management, gender integration, GBV first-line response, gender transformative programming, monitoring and evaluation, and compliance.

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**IN-COUNTRY PARTNERS**

Daughters of Virtue and Empowerment Initiative, Essential Health Network for Rural Dwellers, Excellence Community Education Welfare Scheme, Helping Hands and Grassroots Foundation, NANA Girls and Women Empowerment Initiative, and Rural Women and Youth Development

**PERIOD OF PERFORMANCE**

October 2020 – September 2024

**GEOGRAPHIC COVERAGE**

22 Local Government Areas in Ebonyi and Sokoto states
Strengthening the Quality of Care for the National Reproductive, Maternal, Newborn, Child, Adolescent, and Elderly Health and Nutrition Program

The MOMENTUM Country and Global Leadership Quality of Care (QoC) Project in Nigeria recognizes the many gaps in effective implementation of the Reproductive, Maternal, Newborn, Child, Adolescent, and Elderly Health and Nutrition (RMNCAEH+N) QoC policy and interventions at the national and sub-national levels, as highlighted by high rates of institutional maternal and neonatal mortality in the 23 focus states. The project is supporting and partnering with the government of Nigeria and National Primary Health Care Development Agency (NPHCDA) at national and state levels to support national and state RMNCAEH+N QoC policies and governance in line with the government’s commitment to improving the quality of these services and to advance the project’s four overarching objectives, which include:

- Strengthened national and state-level RMNCAH QoC policy, governance, and monitoring
- Improved government and partner capacity to monitor, report, and use QI/QoC data and maternal and perinatal death surveillance and response (MPDSR) results to strengthen MNCH QoC programs and QoC
- Strengthened platforms and communities of practice (CoP) for regular learning exchange and research on priority MNCH QoC topics
- Improved implementation of neonatal and small and sick newborn (SSNB)/pediatric policies, strategies, and structures

FEATURED ACTIVITIES

- Working closely with the national RMNCAEH+N QoC Technical Working Group (TWG) members, partners, and stakeholders to build consensus on key program approaches and align program approaches with the national RMNCAEH QoC annual operations plan (AOP) 2021/2022.

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Government of Nigeria, National Primary Health Care Development Agency (NPHCDA), NEST 360, University of Ilorin, Bayero University, University of Calabar, Ondo State University and Alex Ekwueme University

PERIOD OF PERFORMANCE
August 2021 – September 2024

GEOGRAPHIC COVERAGE
Federal Capital Territory (FCT) and Adamawa, Bauchi, Borno, Cross River, Ebonyi, Edo, Enugu, Gombe, Imo, Jigawa, Kaduna, Kano, Katsina, Kebbi, Kwara, Nasarawa, Niger, Ondo, Osun, Rivers, Sokoto, Taraba, and Yobe states

The project is providing leadership and supporting the roll-out of national RMNCAEH+N QoC strategies and processes by relevant government institutions to ensure sustainability and optimization of positive RMNCAEH+N outcomes among women, newborns, and children.

- Co-designing, developing and building a QoC learning platform and community of practice with the Federal Ministry of Health (FMoH). The learning platform is expected to provide resources to facilitate user learning and research, as well as peer-to-peer knowledge exchange among health care providers and health actors across the country.
• Supporting the national TWG to introduce RMNCAEH+N QoC and the MOMENTUM project in six scale-up states (Borno, Cross River, Imo, Kwara, Nasarawa, and Osun) to ascertain the current QoC interventions (if any) and the gaps in QoC services in the state, to tailor the project’s technical support moving forward.

• Initiating the national RMNCAEH+N QoC research study efforts in partnership with four academic institutions from four geographical areas (North West, South East, South West, and South South) for sub-awards to lead QoC-focused research studies in areas prioritized with FMOH and partners. The project convened technical meetings to co-develop research protocols within the prioritized areas of research.

• Strengthening the capacity of State-level monitoring and evaluation officers and RH/QoC focal persons on documentation and reporting of prioritized RMNCAEH+N QoC indicator results and state-specific action plans for improving the quality of data for measuring QoC indicators not included in DHIS2 (especially the experience of care).

• Supporting national adaptation of the World Health Organization’s standard of care of QoC for newborn health (including SSNB) and pediatric health to the Nigeria context and developing the strategy for its implementation.
Mobilizing Change: Addressing and Improving GBV and FP/RH Health Care in Nigeria

In Nigeria, MOMENTUM Country and Global Leadership is collaborating with national and state-level partners to strengthen the capacity of country institutions to deliver quality services to address gender-based violence (GBV) and to improve voluntary family planning/reproductive health (FP/RH) care. To date, the project has partnered with the Ministry of Health to strengthen the capacity of more than 500 health care providers to provide quality, survivor-centered care, case management, and support to survivors of GBV. Recently, MOMENTUM Country and Global Leadership trained an additional 19 health care workers, including doctors, on GBV first-line clinical response, and an additional 60 health care workers on how to provide adolescent-responsive services and promote early adoption of FP by older adolescents. The project is also working to improve postpartum family planning (PPFP) counseling and services and trained 57 health care workers, working across 51 health facilities, specifically in PPFP service provision. Since these trainings, the rate of women screened in facilities for experiencing GBV or needing GBV survivor support has increased significantly. At antenatal care visits, the rate of women screened increased from 23% in October 2021 to 86% in April 2023. And among FP clients, the rate of screenings has increased from 27 percent to 71 percent in the same time period.

To address the drivers of GBV, the project has partnered with community leaders and an organization called Raising Voices to adapt and introduce community interventions to transform gender norms linked to GBV. MOMENTUM is supporting local partners to use the Choices, Voices, Promises adolescent sexual and reproductive health (ASRH) sessions and the “SASA! Together” (SASA! Together [S-Start, A-Awareness, S-Support, A-Action] is a community mobilization approach for preventing violence against women) programs in communities in Sokoto and Ebonyi states to engage community groups in important dialogues about sexual and reproductive health and GBV. Through the Choices program, MOMENTUM has reached 480 very young adolescents (ages 10-14 years old), along with almost 1,000 parents (mothers and fathers) through the Voices sessions, and over 800 community members through the Promises sessions facilitated by trained community leaders to date. With ASRH sessions, the project has reached 480 older adolescents (ages 15-19) with knowledge on life skills, transformative gender norms, and SRH.
MOMENTUM Private Healthcare Delivery

Assessing Cost Drivers of Family Planning and Maternal Health Services

MOMENTUM Private Healthcare Delivery is conducting a study in Nigeria (and at additional sites in the Democratic Republic of the Congo and Tanzania) titled “Exploring Variations in Cost Drivers of Publicly Provided and Privately Provided Family Planning (FP) and Maternal Health (MH) Services in Three Countries.” The research assesses the costs of key FP and MH services in three public, three private for-profit, and three private non-profit facilities in each country. Results will provide insights into cost structures and cost drivers in the public and private sectors for FP and MH services, which will help inform resource allocation policymaking for these services in Nigeria.

FEATURED ACTIVITIES

- Adapting Avenir Health’s OneHealth costing modeling tool to include a private provider perspective and using the tool to collect information on and evaluate the unit costs and cost drivers of FP and MH services in Nigeria.
- Interviewing stakeholders in the public, private for-profit, and private non-profit sectors to assess potential opportunities for and barriers to increased involvement of private providers in the delivery of FP and MH services.
- Organizing dissemination to country stakeholders so policymakers have clear costing data to inform decisions about resource allocation for FP and MH services in public and private sectors.

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PERIOD OF PERFORMANCE

September 2021 – September 2023

GEOGRAPHIC COVERAGE

Ebonyi state
Expanding Sustainable Access to Hormonal IUD in Nigeria

The hormonal Intrauterine Device (IUD) is a highly effective family planning (FP) method with increasing interest and availability in many countries, including Nigeria. In January 2017, through the USAID-funded Support for International Family Planning Organizations 2 (SIFPO2) project, the hormonal IUD was introduced in the private sector in Nigeria with broad acceptability and high rates of satisfaction and continuation (see pilot study results here). MOMENTUM is building on this previous USAID investment and the ongoing work of partners in Nigeria working with private providers to expand sustainable access to hormonal IUD provision through the private sector.

FEATURED ACTIVITIES

• Supporting local partner, SFH Nigeria, to implement a sustainable hormonal IUD product strategy for the private sector.

• Training 50 new private health providers on the hormonal IUD in an additional 2 states in Nigeria, using a hybrid approach that incorporates digital and in-person learning.

• Supporting information, education, and communication activities (such as development of flyers and posters) for community mobilization around family planning.

• Strengthening provider-initiated FP demand-generation activities, including group counseling at antenatal and postnatal clinics.

• Conducting social media and mass media campaigns to build demand for FP, including the hormonal IUD as a method choice, and promoting informed choice.
In Nigeria, MOMENTUM Routine Immunization Transformation and Equity works with the National Primary Health Care Development Agency (NPHCDA) to support activities at the national and sub-national levels to strengthen overall governance, leadership, and quality of routine immunization services. The project is working with partners to ensure smooth integration of the COVID-19 vaccination into routine primary health care and provide technical assistance to strengthen the capacity of health care providers to deliver equitable, high quality immunization. In its first year, the project supported the NPHCDA to review and adapt the World Health Organization’s COVID-19 vaccination micro-planning guidelines to the Nigerian context and helped deliver COVID-19 vaccinations to over 2 million eligible people in Bayelsa, Edo, Imo, Jigawa, and Lagos states. The project is also supporting the NPHCDA and these states to implement the government’s Zero Dose Reduction Operational Plan to reach unimmunized children.

FEATURED ACTIVITIES

• Providing technical assistance to the NPHCDA to develop transition plans for integrating COVID-19 vaccinations into routine immunization (RI) and primary health care (PHC) systems.

• Working with the NPHCDA to provide technical and logistics support to review their Expanded Programme on Immunization with state governments and develop state-level RI priorities and work plans for 2023 to identify and reach zero-dose and underimmunized populations.

• Providing technical and logistics support to the NPHCDA to operationalize the National Data Management Standard Operation Procedure and Tools to strengthen the quality, management, and use of RI/PHC data across project-supported states to improve RI and PHC services.

• Supporting the NPHCDA to review and update their national Community Engagement Strategy (CES) for strengthening routine immunization in Nigeria. The CES is aimed at engaging and sustaining community participation and responsiveness to drive demand for immunization and other PHC services through existing traditional structures in Nigeria.

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IN-COUNTRY PARTNERS

Results for Development and Core Group Polio Partners

PERIOD OF PERFORMANCE

June 2022 – September 2023

GEOGRAPHIC COVERAGE

Bayelsa, Edo, Imo, Jigawa, Lagos states
MOMENTUM Safe Surgery in Family Planning and Obstetrics

MOMENTUM Safe Surgery in Family Planning and Obstetrics supports partners in Nigeria to improve safe and appropriate surgical obstetric care, prevention and management of obstetric and iatrogenic fistula, and prevention and mitigation of female genital mutilation/cutting (FGM/C). Collaborating with federal and state Ministries of Health, as well as partners within communities, the project expands access to and use of safe and indicated cesarean delivery and strengthens health system capacity for essential obstetric surgery through training, supportive supervision, and social and behavior change efforts. In addition, the project partners with the federal government and local organizations to strengthen the health sector’s response to FGM/C so that providers can deliver medical care and counseling to girls and women living with FGM/C.

FEATURED ACTIVITIES

- Collaborating with the Federal MOH, the private sector, and community and medical organizations to support interventions that strengthen referrals for comprehensive emergency obstetric and newborn care, reduce delays in receipt of this care, improve information-sharing with referring facilities, and improve follow-up with women after discharge from facilities.

- Supporting the expansion of quality fistula care by addressing access barriers, increasing case-finding in communities, and promoting best practices for care among public and private sector health providers and community health workers.

- Working with the Federal MOH and the Federal Ministry of Women Affairs and Social Development to support the development, adaptation, and implementation of national policies, guidelines, plans, and budgets for safe surgery, fistula and FGM/C prevention and services, and emergency obstetrics and newborn care.

- Supporting efforts to train health workers at secondary and tertiary institutions (public and private) to provide and monitor safe, quality surgical obstetric care, including cesarean sections, when indicated. Training supports holistic fistula care, including provision of or referral for FP/RH care, screening and care referral for gender-based violence, and support for community and familial reintegration following fistula repair.

IN-COUNTRY PARTNERS

Federal Ministry of Health; Federal Ministry of Women Affairs and Social Development; State Ministries of Health; State Ministries for Women and Children Affairs; Centre for Population and Reproductive Health; Daughters of Virtue and Empowerment Initiative (DOVENET); Institute of Social Work of Nigeria (ISWON); and various civil society organizations, faith-based organizations, community-based organizations, and professional associations.

PERIOD OF PERFORMANCE

March 2021 – September 2025

GEOGRAPHIC COVERAGE

Bauchi, Ebonyi, Kebbi, and Sokoto states and the Federal Capital Territory

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• Partnering with the federal and state government, the health sector, and community stakeholders to develop and implement guidelines, tools, training, and policies to ensure that providers can deliver appropriate medical care and counseling to girls and women living with FGM/C.

• Building consensus with civil society organizations, community-based organizations, faith-based organizations, and traditional and religious leaders to identify and develop social and behavior change strategies and other interventions to eliminate FGM/C.

HIGHLIGHTS

In 2022, MOMENTUM supported 13 trainings on fistula and FGM/C for health workers to provide responsive and appropriate care. This contributed to:

• 17 surgeons and doctors with improved capacity to perform surgical fistula repair

• 363 health workers receiving capacity building, elevating readiness of 35 health facilities to provide fistula identification and referral services and prevention and management of complications from FGM/C

• 641 surgical fistula repairs completed across MOMENTUM-supported facilities
MOMENTUM Safe Surgery in Family Planning and Obstetrics

MOMENTUM Safe Surgery in Family Planning and Obstetrics supports the Government of Senegal (GoS) in its efforts to sustainably promote awareness of, equitable access to, and provision of high-quality safe surgical care for reproductive health. Safe surgical care is considered high-quality when it is voluntary, indicated, and consented. The project also collaborates with national-level actors to build an enabling environment for the scale-up of effective interventions, testing of promising practices, and monitoring and review of essential indicators. Specifically, it aims to accelerate reductions in maternal and newborn mortality and morbidity. To achieve these reductions, the project supports strengthening the capacity of the Senegalese health system to introduce, deliver, scale up, and sustain the use of evidence-based, high-quality interventions to provide safe emergency surgical services, including cesarean sections, hysterectomies, fistula prevention and care, and removal of long-acting reversible contraceptives.

FEATURED ACTIVITIES

• Working with the MOH, professional associations, and medical training institutions to provide in-service and pre-service capacity strengthening and e-learning training on safe obstetric procedures for health providers.

• Addressing critical supply gaps by assessing the availability and functionality of surgical instruments, IPC equipment, and anesthesia machines, and reviewing management tools and communication materials in select medical training institutes and health facilities.

• Working with facilities to prioritize the availability of anesthetists in operating rooms, and supporting equipment and infrastructure improvements based on findings from facility rapid assessments.

• Promoting the dissemination of knowledge and adoption of promising, high-impact practices in obstetric surgical care with the National Reproductive, Maternal, Neonatal, Infant, and Adolescent Health Technical Working Group (TWG).

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IN-COUNTRY PARTNERS

Senegal Ministry of Health and Social Action,  
Association Nationale des Sages-Femmes d’Etat du Sénégal (ANSFES), Association Sénégalaise de Gynécologues-Obstétriciens (ASGO), Association Sénégalaise d’Urologie,  
Ecole Nationale de Développement Sanitaire et Social (ENDSS), Société Sénégalaise d’Anesthésie Réanimation de Médecine d’Urgence (SOSEAR), and  
Université Cheikh Anta Diop de Dakar (UCAD)

PERIOD OF PERFORMANCE

October 2021 – September 2025

GEOGRAPHIC COVERAGE

Dakar, Diourbel, and Thiès regions and national level
Partnering with the TWG to advance reproductive, maternal, neonatal, infant, and adolescent health through activities that include:

- Designing and testing the feasibility of task-shifting approaches on obstetric surgical care practices from anesthesiologists, gynecologists, or surgeons to nurses and midwives.
- Advocating for policy changes at the national level concerning the delegation of tasks and use of harmonized models of tools, such as checklists, registers, and protocol books in operating rooms.
- Promoting the institutionalization of new, more effective approaches to maternal, neonatal, and infant health, such as coaching, PPFP, and Tutorat learning.

Partnering with the MOH and facilities at the regional and national levels to improve the use of data and evidence in decision-making. The project is supporting the standardized use of the WHO Surgical Safety Checklist through the design of an operational procedures manual that includes tools for operating rooms.

Supporting the MOH in updating the national surgical, obstetric, and anesthesia plan, and promoting and facilitating public facilities’ use of evidence-based technical guidelines for obstetric surgeries, including safe and indicated cesarean delivery, through the development of care protocols, technical data sheets, training, and supervision in the field.

Coordinating with the MOH, professional associations, and other implementing partners to use human-centered design approaches in the development of social and behavior change (SBC) strategies and advocacy messages. Through these collaborations, the project aims to improve obstetric outcomes and help regional-level providers and community members understand the risks, behaviors, and contextual factors that affect safe and indicated cesarean delivery and other obstetric surgeries. The SBC interventions will integrate gender, provider, and community norms that affect knowledge of, access to, and uptake of safe surgical services, including provider bias and its effect on the provision of services for youth.
MOMENTUM Projects in West Africa: Regional Reference Brief

SIERRA LEONE

MOMENTUM Country and Global Leadership

MOMENTUM Country and Global Leadership, in alignment with the Government of Sierra Leone’s (GOSL) COVID-19 response plan, uses a whole market approach to support public, non-profit, faith-based, and for-profit service providers across 53 facilities in the delivery of high-quality essential maternal, newborn, and child health and nutrition, voluntary family planning and reproductive health (MNCHN/FP/RH) services. Key principles of the approach include: (1) fostering close collaboration with the Ministry of Health and Sanitation and implementing partners to avoid duplication of effort and maximize efficient use of resources; (2) ensuring high-quality health care services for women and families; (3) adhering to the consortium commitment to the development of local organizational and technical capacity; and (4) leveraging digital technologies where possible for adaptive management and proactively developing alternative approaches to accommodate variations in connectivity.

FEATURED ACTIVITIES

At the national and subnational level:

- Supporting efforts to keep the national strategy, guidelines, and protocols for MNCH/FP/RH services updated with appropriate adaptations for COVID-19 and other pandemic scenarios. These efforts include developing comprehensive implementation plans for districts and regular updates to supply chain management systems to reflect reorganization of service provision.

- Enhancing national and district systems to monitor the incidence rate of COVID-19 infections, availability and use of MNCH/FP/RH services, disruptions in services, and disparities in access to services through virtual and in-person WASH & IPC and quality improvement focused training, coaching, and mentorship with health providers at facility level. These efforts encourage continued use and uptake of essential services by communities, especially children, adolescents and women, during the COVID-19 pandemic, address rumors, and identify community solutions (e.g., physical distancing or isolation requirements), which build confidence in essential services. The project also adapted new Excel tools to monitor impacts of COVID-19 on FP care using the DHIS2 platform.

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Government of Sierra Leone, Christian Health Association of Sierra Leone (CHASL), FOCUS 1000, Health Alert Sierra Leone (HASIL), and Sierra Leone Midwives Association (SLMA)

PERIOD OF PERFORMANCE

November 2020 – December 2023

GEOGRAPHIC COVERAGE

Kailahun, Pujehun, Western Area Rural, and Western Area Urban districts
• Supporting CHWs to deliver services safely in the context of COVID-19 through training and fostering two-way community engagement and support to prioritize critical self care behaviors of individuals, households, and communities to ensure sustainable health facility and community service delivery.

• Supporting the roll out of the national Quality of Care Roadmap for MNCH across 4 operational districts, using a hub and spoke model, to support the development of facility level quality improvement aims to ensure the implementation of quality improvement (QI) approaches by district health management teams.

At the facility and community levels:

• Coordinating with the GOSL on the reorganization of MNCH/FP/RH services for the COVID-19 context and ensuring referral pathways reflect this reorganization.

• Assessing facility readiness and working with facilities to ensure essential MNCH/FP/RH commodities and medications are available and to improve access to and use of basic water, sanitation, and hygiene services and infection prevention and control practices in all areas of health service delivery.

• Supporting partners to employ QI approaches, including virtual methods, designed to improve access to and quality of MNCH/FP/RH services.

• Collaborating with district health management teams to identify facility staffing shortages and implement sustainable solutions to maintain adequate staffing levels to meet safety requirements and provide adequate services.

MOMENTUM Country and Global Leadership has also made significant, centrally-managed investments in Sierra Leone to generate evidence and contribute to global learning priorities. The activities include:

• Supporting assessments at the policy, program, and service delivery levels to understand the root causes of gaps in implementation of the integrated management of childhood illnesses (IMCI) strategy. Assessment findings will inform recommendations at the national and global levels for operationalizing IMCI and improving quality of care at the facility level.

• Collaborating with the Ministry of Health and Sanitation to use the Community Health Planning and Costing Tool (CHPCT), the Community Health Worker Coverage and Capacity (C3) Tool, and the Lives Saved Tool (LiST) to develop an investment case for the Community Health Worker Program in Sierra Leone. The investment case will support community health workers advocate for adequate attention and prioritization in health financing, especially on government budgetary processes.

• Supporting Pujehun, Kailahun, Western Area Urban, and Western Area Rural districts to use findings from an assessment on adolescent-responsive health system gaps to develop action plans to address critical barriers to adolescents’ access to and quality of health services. MOMENTUM Country and Global Leadership is supporting the adaptive management and learning efforts to document best practices for strengthening the responsiveness of the health system to adolescents.
TOGO

MOMENTUM Country and Global Leadership

**COMPLETED**

In Togo, MOMENTUM Country and Global Leadership supported the Ministry of Health (MOH) in using innovative approaches to increase access to and voluntary use of contraception. The project supported the government’s National Health Policy by helping to implement a package of high-impact, community-based voluntary family planning and reproductive health (FP/RH) interventions in urban and suburban areas of the Golfe and Ogou districts. Efforts included building the capacity of civil society organizations (CSOs) to support and sustain community-based FP/RH services, especially those for youth. These activities were completed by community-level activities to address demand-side barriers to service uptake, such as inequitable gender power dynamics and household decision-making.

**COMPLETED FEATURED ACTIVITIES**

- Worked with selected partner organizations in FP/RH to apply the Integrated Technical and Organizational Capacity Assessment (ITOCA) tool to jointly prioritize capacity strengthening activities and set milestones, commitments, and measures of success. The project supported its partners to co-create change action plans to foster engagement, dedication, and accountability from local partners to the community and project to sustain FP/RH interventions.

- Collaborated with community stakeholders, such as CSOs, and Mother and Child Health Department, Division of Community Health, Adolescents and

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Government of Togo Ministry of Health and National Maternal and Child Health Program (Direction de la Santé de la Mère et de l’Enfant)

**PERIOD OF PERFORMANCE**
August 2021 – March 2023 (completed)

**GEOGRAPHIC COVERAGE**
Golfe (Grand-Lome region) and Ogou (Plateaux region) districts
Youth and Health Promotion and district health management teams (DHMTs), to co-create, finalize, and validate couples communication behavior profiles that identify characteristics for designing targeted approaches to reach couples. With partner CSOs, the project helped to implement priority components of the behavior profiles through activities focused on couples’ communication and male engagement and documented learning from these activities.

- Supported regular coordination between CSOs and DHMTs to ensure community partners could manage their activities and routinely review data.

- The project also worked with other USAID-funded partners to strengthen district-level coordination to ensure partners could effectively work with district health authorities to sustain community-level services.

- Collaborated with private health facilities in target districts to map the facilities and conducted regular meetings with local partner CSOs to encourage information sharing on service utilization and strengthen service delivery.

- Established 35 “My Health” clubs to sensitize adolescents and young people on FP/RH.
Engaging Men and Young People in Community Dialogue to Improve Access to Health Services

Throughout implementation, MOMENTUM Country and Global Leadership worked with four partner organizations in Togo to implement workplans to improve access to FP information and deliver FP services in communities in the Ogou and Golfe districts, particularly to reach youth and adolescents. With support from MOMENTUM, these organizations conducted community engagement activities to reinforce healthy behavior changes and couple’s communication to reduce barriers to accessing FP services. From June 2022 to February 2023, local partners trained 90 community actors, composed of CHWs, peer educators and “Papa Champions”, in constructive techniques to promote male engagement in FP and couple’s communication. The community actors conducted educational talks, home visits with couples’ counseling and couples’ discussions in communities in both districts, enrolling 678 couples who regularly took part in the couples’ discussion sessions. As a result of these community activities, more than 1,100 couples were referred to a health facility and more than 1,000 of them adopted a contractive method.

In addition, partners trained 92 community educators and nearly 90 apprentices and bosses at hair salons, tailor shops, and carpentry workshops to establish and serve as leadership and establish 35 “My Health” clubs. The trained club leadership convened “My Health” club sessions with youth to enable group discussions and provide education on FP and reproductive health (RH) topics under the supervision of a local community health worker.