

# Strengthening Health Systems in the DRC

APPUI AU SYSTÈME DE SANTÉ EN RDC | ASSR

## CLINICAL MENTORING IMPROVES EMERGENCY OBSTETRIC AND NEONATAL CARE

*“The delivery went well but the baby didn’t breathe. I did the resuscitation of the newborn that I learned from my mentor and then the little girl was okay.”*

Nurse Jacquie Kimwanga, a 20-year veteran of front-line primary care in the DRC, admitted to shortcomings in the management of obstetric and neonatal complications prior to the clinical mentoring program funded by FCDO through the ASSR project.

“In 2007, I trained in antenatal care. In 2010, I trained in low-risk maternity. In 2013, in reproductive health ... but only when I trained with my mentor in emergency obstetric and neonatal care did I feel that I could manage complicated cases during delivery,” remarks Jacquie.

Since the training last year, Jacquie documented three cases of post-partum hemorrhage and three cases of neonatal resuscitation in her mentoring log. “In the past, when a woman was losing blood after delivery, I was not systematic in identifying the cause of the hemorrhage and so was unable to do an appropriate intervention.” With training and the help of her clinical mentor from the province, Jacquie learned the steps to carefully examine the woman, determine the cause of bleeding and intervene. “I feel confident, and I have taught my team the same techniques so that they can manage complicated pregnancy if I am not around,” she says with a smile.

Lucie Lumbu sat nursing her baby in the maternity ward of the Kabuma Health Centre. Two days prior she had benefitted from the systematic approach learned by Nurse Jacquie.

“The delivery went well, I think, but something remained in my belly and I wouldn’t stop bleeding,” Lucie discussed. The team called in the head nurse to support Lucie’s delivery complications. “When she [the head nurse] arrived, they wore gloves and spoke to me and asked me to relax, to be calm, because they were going to help me.” Following the procedure, the nurse walked her back to her bed for the night. “Thanks to them I am alive,” Lucie smiles with her little girl.

In-service training through FCDO-funded clinical mentoring approaches has contributed significantly to improving the provision of emergency obstetric and neonatal care in the DRC. Providers’ skills in evidence-based management of complicated deliveries have improved. As a result, these front-line health workers are more confident and have strengthened capacity to perform interventions that save the lives of women and newborns.



Nurse Jacquie Kimwanga



Lucie Lumbu and her baby

## ABOUT THE ASSR PROJECT

Funded by the UK Government’s Foreign, Commonwealth & Development Office (FCDO) through UK Aid, IMA World Health is part of a consortium that includes SANRU, Pathfinder International and BAO Systems that is improving access to critical, quality health services in 50 health zones in the DRC. In partnership with the Ministry of Health, the project reduces mortality and morbidity of women, adolescents, children and newborns and improves community resilience by strengthening health systems. In French, ASSR stands for Appui au Système de Santé en RDC, which translates to Health Systems Support in the DRC.



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