



CUADERNO 2

La Agenda Mesoamericana de Cooperación para un Desarrollo Social Incluyente: Alcances e Impactos en Salud, Vivienda, Seguridad Alimentaria y Nutricional



Salud Mesoamerica Initiative in Belize

Dr Armelle Gillette Project Manager for the Salud Mesoamerica Initiative he Salud Mesoamerica Initiative in Belize was developed based on the country's needs in sexual and reproductive health with focus on maternal and child health services. In February 2018 the Inter-American Development Bank informed the Ministry of Health that Belize has passed all 10 health indicators assigned for the second operation. These 10 health indicators included timely antenatal care, timely postnatal care, timely newborn enrollment, growth and development checkups in children 0-23 months which were all measured at the ambulatory level and the indicators which were measured at the hospital level were oxytocin administration, immediate newborn care, postpartum contraceptive, obstetric complications and neonatal complications.

After careful review of the first operation, the Ministry of Health opted to make several changes to improve the performance in the second operation and make it a success. Some of these improvements were:

- The institutional targets, were usually much higher than the project target, up to 2 or 3 times higher: Obstetrics & Neonatal complications had 50 percentage points above the project target of 37 percent.
- The data review and analysis session were scale up to include both primary and secondary care level to take a more integrated approach to resolve challenges and strengthen areas of weakness.
- Collaborative sessions to share best practices between facilities.
- Each operation prepares the country for the subsequent operations by putting in place the necessary requirements; for example, the first operation was based on inputs to ensure that during the second operation which was based on the processes of care the necessary inputs were always available at the facility level.

These changes reveal improvements in the care of women and child, with early postpartum care increased by 81%, the management of obstetric complications according to protocols increased significantly and 95% of children with a diarrhea episode that seek care were treated with oral rehydration salts and zinc which resulted in better patient outcomes.

The great success of the SMI in the second operation is much attributed to the GOB and MOH commitment to provide the necessary funding and personnel time that was required for its implementation. Having a common goal and having the staff's

involvement from beginning to end made the implementation more effective. Other contributing factors were the selection of measurable targets, reorganization of services, increase outreach sessions, active involvement of community leaders, the strengthening of participation at community level. It was amazing to see how the staff would go the extra mile in meeting and maintaining their targets and utilizing the pay for performance incentives to selflessly recommend the procurement of items to either improve their working environment or that of the community health workers. This reflects the level of commitment of the staff to improve the process of care in the health services.

