

FALL 2016: MHCH 722: Global Maternal and Child Health

Instructor:

Kavita Singh PhD, MPH

Office-Department of Maternal and Child Health- Room 429 Rosenau Hall

Tel: 919-843-5920

Email: kavita_singh@unc.edu

Office Hours: contact instructor to select a meeting time

Credit: 3 semester hours

Prerequisites: Enrollment in graduate study in MCH or permission of instructor

Time and Location: Wednesday: 10:10am to 1:10pm in McG 1305

Course Objectives:

- To gain substantive knowledge of the key issues in global maternal and child health.
- To understand the demography of MCH in developing countries
- To learn to think critically about programs, research and policy involving maternal and child health.

Competencies Addressed:

1. **Community and Informatics**
2. **Diversity and Cultural Competency**
3. **Leadership**
4. **Professionalism and Ethics**
5. **Program Planning**
6. **Systems Thinking**

Readings: should be done before the class session

Assignments:

- 1) Research Paper – 30%
- 2) Group Presentation – 30%
- 3) Participation/Attendance – 10%
- 4) Final Exam – 30%

Grading: In keeping with the School of Public Health policy the following grades will be used:

H (clear excellence), P+ (superior), P (good), L (low passing), F (failed)

Class Schedule

Date	Topic	Lecturer
8/24	Introduction to Global Maternal and Child Health	Kavita Singh
8/31	<u>Maternal Health</u> 1) Main Causes of Maternal Mortality 2) Antenatal Care, Skilled Delivery and Postpartum Care	Kavita Singh
9/7	1) Conceptual Frameworks in Maternal and Child Health 2) Key Measures in Maternal and Child Health	Kavita Singh
9/14	Under-nutrition During Pregnancy and in Children Under Five	Kavita Singh
9/21	Social Factors and Maternal and Child Health Group Presentation: TBAs and Maternal Health	Kavita Singh
9/28	Group Presentation: Obstetric Fistula Group Presentation: Gender Differentials and Under-five Mortality	Kavita Singh
10/5	Neonatal Health PAPER DUE AT THE BEGINNING OF CLASS	Lara Vaz /Kavita Singh Saving Newborn Live//MCH Dept
10/12	Fall Break-No Class	
10/19	1) Infant and Young Child Feeding 2) Group Presentation: Cash Transfers and Under-five Health	1)Catherine Sullivan MCH Dept 2)Kavita Singh
10/26	Leading Causes of Under-five Mortality: Pneumonia, Diarrhea and Malaria	Kavita Singh
11/2	1) Vaccine Preventable Diseases/Program Approaches 2) Group Presentation: Zika Virus and Maternal and Child Health	Kavita Singh
11/9	Preventing Mother to Child Transmission of HIV	Kavita Singh
11/16	Quality Improvement and MCH	Pierre Barker and Kavita Singh IHI/MCH Dept
11/23	No class-Thanksgiving Break	
11/30	MCH and Complex Emergencies/Conflicts	Dilshad Jaff
12/7	FINAL EXAM	Kavita Singh

Honor Code

There is an expectation that students will follow the University's Honor Code. Academic honesty and integrity are principles that are followed at UNC and in this class. It is essential that assignments represent each student's own work. When unsure of whether or not to reference a paper, err on the side of citing the source. Please see UNC's statement on the honor code for more information.

Valuing, Recognizing, and Encouraging Diversity

Promoting and valuing diversity in the classroom enriches learning and broadens everyone's perspectives. Inclusion and tolerance can lead to respect for others and their opinions and is critical to maximizing the learning that we expect in this program. This may challenge our own closely held ideas and personal comfort zones. The results, however, create a sense of community and promote excellence in the learning environment. This class will follow principles of inclusion, respect, tolerance, and acceptance that support the values of diversity.

Diversity includes consideration of (1) the variety of life experiences others have had, and (2) factors related to "diversity of presence," including, among others, age, economic circumstances, ethnic identification, disability, gender, geographic origin, race, religion, sexual orientation, social position. Please see the SPH's website for more information on diversity and inclusion.

Course Evaluation

At the end of the fall semester you will be asked to fill out a course evaluation form. Your feedback and suggestions are valued and needed to make improvements in this course as well as other courses.

READING LIST: MHCH 722

<http://sakai.unc.edu/>

August 24^h: Introduction to Global Maternal and Child Health

Campbell, O. et al. (2006) “Strategies for reducing maternal mortality: getting on with what works” The Lancet 368: 1284-1299

Kerber, K et al. (2007). Continuum of care for maternal, newborn, And child health: from slogan to service delivery. The Lancet,2007; 370:1358-1369

UNICEF (2014) Committing to Child Survival: A Promised Renewed. Progress Report 2012. UNICEF. New York.

August 31st: Maternal Health

Guliani, H. et al (2012). What impact does contact with the prenatal care system have on women’s use of facility delivery? Evidence from low-income countries. Social Science & Medicine, 74(12),1882-1890.

Harvey S et al. (2007). Are skilled birth attendants really skilled? A measurement method, some disturbing results and a potential way forward. Bulletin of the World Health Organization. 85: 783-790.

Hussein J et al. 2012) The Effectiveness of Emergency Obstetric Referral Interventions in Developing Country Settings: A Systematic Review. PLoS Med 9(7): e1001264. doi:10.1371/journal.pmed.1001264

Maine, D and Rosenfield, A. (1999). The Safe Motherhood Initiative: Why has it Stalled? American Journal of Public Health. 89(4): 480-482.

September 7th: Conceptual Frameworks in Maternal and Child Health

Mosley, W.H., Chen, L. (1984) “An Analytical Framework for the Study of Child Survival in Developing Countries” Population Development and Review 10 (suppl): 25-48.

Thaddeus, S., Maine D. (1994) “Too far to walk: Maternal mortality in context” Social Science and Medicine 38(8): 1091-1110.

UNICEF's Conceptual Model on Maternal and Child Under-nutrition
<http://www.unicef.org/nutrition/training/2.5/4.html> - UNICEF model

Bring computer to class or a hardcopy of a Demographic and Health Survey Report

September 14th: Nutrition During Pregnancy/Children and Nutrition

Black et al. (2013). Maternal and child undernutrition and overweight in low-income and middle income countries. The Lancet. (382): 9890: 427 – 451.

Scrimshaw NS. (2003) Historical concepts of interactions, synergism and antagonism between nutrition and infection. Journal of Nutrition. 2003, 133(1):316S-321S.

UNICEF (2013) Improving Childhood Nutrition: The Achievable Imperative for Global Progress. UNICEF. Geneva

September 21st: Social Factors and MCH

Adato, M., Basset, L. (2009) Social protection to support vulnerable children and families: the potential of cash transfers to protect education, health and nutrition. AIDS Care, 21(SI):60-75.

Allendorf, K (2010). The Quality of Family Relationships and Use of Maternal Health-care Services in India. Studies in Family Planning 41(4): 263-276

Gordon et al. (2003). Child Poverty in the Developing World. The Policy Press

Pande, R. (2003) Selective gender differences in childhood nutrition and immunization in rural India: The role of siblings. Demography. 40: 95. doi:10.1353/dem.2003.0029

September 28rd: Group Presentations

October 5th: Neonatal Health

Darmstadt GL et al. (2005). Evidence-based, cost-effective interventions: How many newborn babies can we save? The Lancet. 2005;365(9463):977-988.

WHO (2014) Every Newborn Action Plan. Geneva.

October 19th: Infant and Young Child Feeding/Group Presentation

UNICEF (2006) Celebrating the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding. UNICEF.

October 26th: Main Causes of Under-five Mortality: Diarrhea, Pneumonia and Malaria

WHO (2014) Roll back Malaria: The Contribution of Malaria Control to Maternal and Child Health. Geneva. WHO.

UNICEF (2012). Pneumonia and Diarrhea. Tackling the Deadliest Diseases for the World's Poorest Children. New York.

November 2nd Vaccine Preventable Diseases/Program Approaches/Zika Virus Group Presentation

Costello, A et al. (2016). Defining the syndrome associated with congenital Zika virus infection. Bulletin of the World Health Organization, 94(6), 406–406A.
<http://doi.org/10.2471/BLT.16.176990>

Mohammadi, D. (2012) The Final Push for Polio Eradication. The Lancet. 380: 460-462.

Rohde, J et al. (2008) 30 years after Alma-Ata: has primary health care worked in countries? Lancet, 372(9642):950-961.

Storeng, K.T. (2014). The GAVI Alliance and the 'Gates approach' to health system strengthening. Global Public Health, 9(8), 865-879

November 9th: HIV During Pregnancy/PMTCT

Barker, P et al.(2011) Antiretroviral drugs in the cupboard are not enough: the impact of health systems' performance on mother-to-child transmission of HIV. Journal of Acquired

Immunodeficiency Syndrome.56(2): e45-48.

Decock, K. et al. (2002) “Shadow on the continent: public health and HIV/AIDS in Africa in the 21st century”. The Lancet (360): 67-72.

Turan J & Nyblade L. (2013) HIV-related Stigma as a Barrier to Achievement of Global PMTCT and Maternal Health Goals: A Review of the Evidence. AIDS and Behavior. 17(7):2528-39.

Chi BH et al. (2013). Antiretroviral Drug Regimens to Prevent Mother-To-Child Transmission of HIV: A Review of Scientific, Program, and Policy Advances for Sub-Saharan Africa. Curr HIV/AIDS Rep 10(2):124-33.

November 16th: Quality Improvement and MCH

Cofie L et al. (2014). Community Engagement as a Key Strategy in a Quality Improvement Project to Promote Maternal and Child Health in Ghana. Global Public Health. 9(10):1184-1197.

Mate KS et al (2013) A quality improvement model for the rapid scale-up of a program to prevent mother-to-child HIV transmission in South Africa. Int J Qual Health Care; 25:373–80.

Singh K. et al. (2016) Can a Quality Improvement Project Impact Maternal and Child Health Outcomes at Scale in Ghana? Health Policy Research and Systems. 14:45

November 30th: Complex Emergencies and MCH

Chi, P.C. et al. (2015) Perceptions of the effects of armed conflict on maternal and reproductive health services and outcomes in Burundi and Northern Uganda: a qualitative study. BMC International Health and Human Rights 15:7.

Hershey C. L. et al. (2011) Incidence and risk factors for malaria, pneumonia and diarrhea in children under 5 in UNHCR refugee camps: A retrospective study. Conflict and Health 5:24.

Othman D. et al. (2016) Targeting Health Care in Armed Conflict and Emergencies: Is it Underestimated? Medicine, Conflict and Survival 32(1):21-29

Moss W.L. et al. (2006). Child Health in Complex Emergencies. Bulletin of the World Health Organization. 84:58-64.

