

**HEALTH NAVIGATION PROGRAM: A COMMUNITY HEALTH INTERVENTION TO EXPAND ACCESS TO EMERGENCY CARE AND PROMOTE SAFE DELIVERIES IN RURAL KENYA**

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**INTRODUCTION**

Mfangano Island in Kenya is primarily comprised of remote fishing and subsistence farming communities with limited access to healthcare facilities and resources. Consequently, the maternal mortality rate for these communities is one of the highest in the world, estimated to be 583 deaths per 100,000 lives. As a result, the Health Navigation Program (HNP) was established to help communities' access timely emergency maternal and neonatal care.

**METHODS/DESCRIPTION**

The (HNP) was started in 2014 and is coordinated by Ekialo Kiona CBO. The

program first trained a network of Community Health Volunteers who are first responders to emergencies in their villages. CHVs facilitate timely referral of patients to health facilities, identify newly pregnant women in their communities to develop a "safe birth plan" to prevent emergencies, and follow up with communities periodically. The program also established an emergency boat available 24 hours to transfer patients to the mainland for higher level of care.

**RESULTS**

Since 2014, the program has successfully recruited and trained a cadre of 30 CHVs, coordinated over 500 emergency transfers for patients with an average CHV response time

of 14.44 minutes, and established preventative 'Safe Birth plans' for over 250 mothers. The program has successfully followed up with over 150 mothers who have delivered safely. Challenges include limited funds to expand the program and resources to all of the island communities. Lessons learned include maintaining the sustainability of the program during health crises such as the COVID-19 pandemic.

### CONCLUSIONS

Overall, the data suggest that the HNP is a successful community intervention that has

made impact in increasing access to care and reducing maternal and neonatal deaths by: building on existing community networks and MoH infrastructure. It has effectively and efficiently enhanced emergency care coordination, improving obstetrical care uptake and health education. In addition, the success in targeting low-income isolated island communities, enhancing their connectivity to formal care facilities on the island and mainland and achievement of moving entry point of emergency response from facility to community level, by promoting earlier and more widespread, grassroots access.