

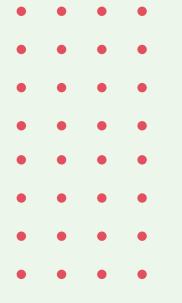


## Indus Hospital & Health Network (IHHN) ENABLING MIRACLES

## MATERNAL, NEONATAL & CHILD HEALTH SERVICES

Impact Report 2022









Indus Hospital & Health Network's (IHHN) Impact

**Scope of Services** 





### Maternal, Neonatal & Child Health (MNCH) Programme

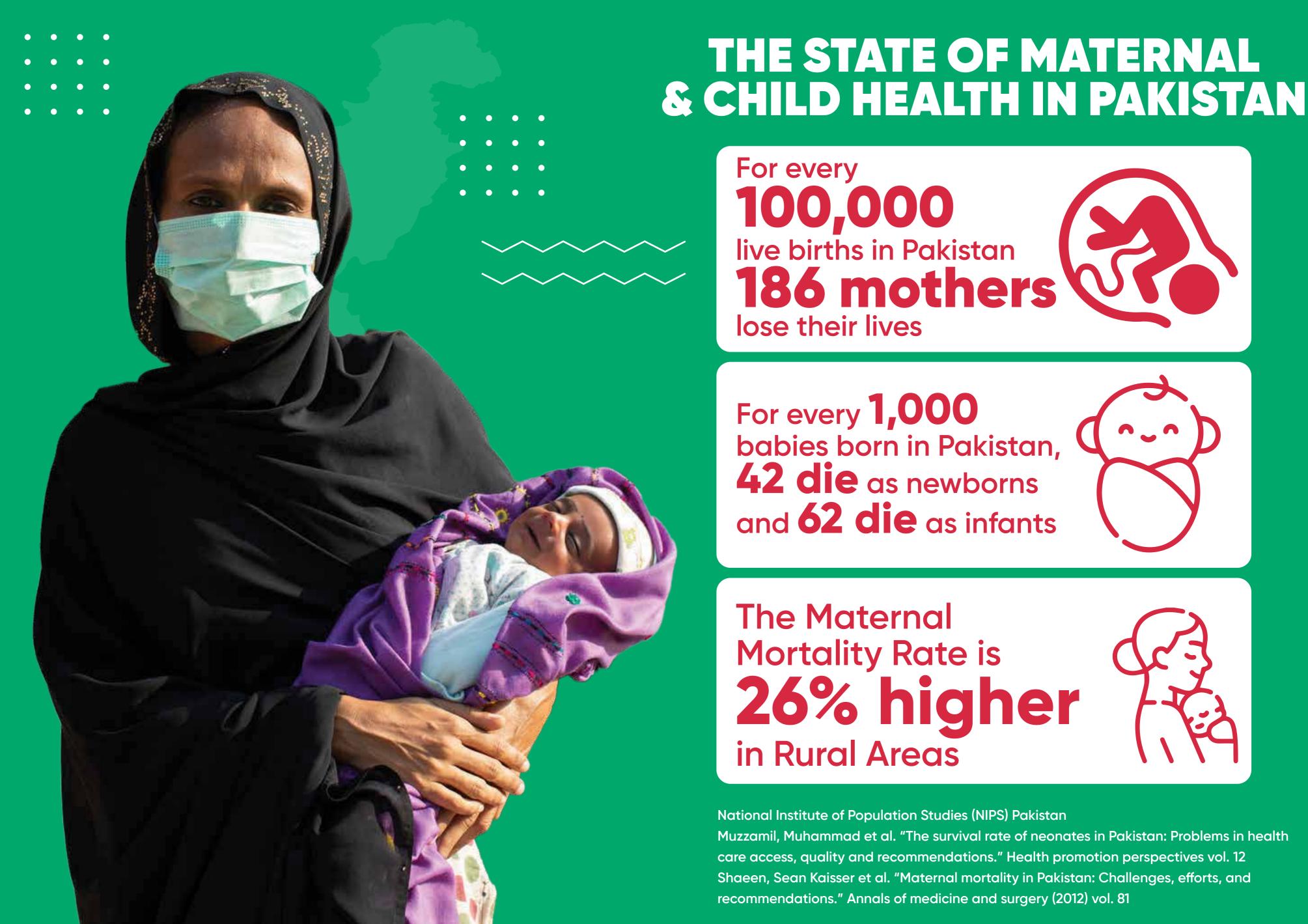




#### **Midwife-led Models of Care**



**Patient Story** 



## MATERNAL, NEONATAL & CHILD HEALTH (MNCH) PROGRAMME

Maternal, Neonatal & Child Health (MNCH) Programme was launched across Pakistan by IHHN with the goal to improve maternal, newborn, and child health of the population, particularly among its poor, marginalized, and disadvantaged segments. The MNCH programme is contributing to strengthening Family Medicine care services. Further, this programme has introduced a cadre of Community–Midwives (CMWs) for skilled deliveries to ensure these communities achieve self–sufficiency in managing maternal and newborn health.

## MNCH'S VISION

To improve the health outcomes among women, children, and newborns by enhancing coverage and providing access of health and nutrition services to the poor and vulnerable in rural and less developed urban areas, absolutely free of cost to ensure complete accessibility.



## **IHHN'S IMPACT**

## 

1,493 Obgyn Beds Across Network

\*till Dec 2022

894,823

**Patients Treated** \*till Dec 2022

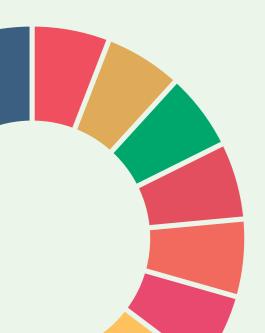
## **146,831** Safe Births

## ADD NICU Beds \*till Dec 2022

## **MNCH SERVICES COUNTRYWIDE** FOOTPRINT

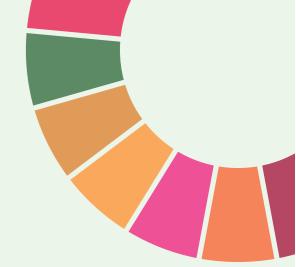
The Indus Hospital, QF & NST Campus, Lahore Tehsil Headquarter Hospital, Kahana Nau, Lahore Raiwind Hospital, Lahore Manawan General Hospital, Lahore THQ Sabzazar Hospital, Lahore Bedian Campus, Lahore

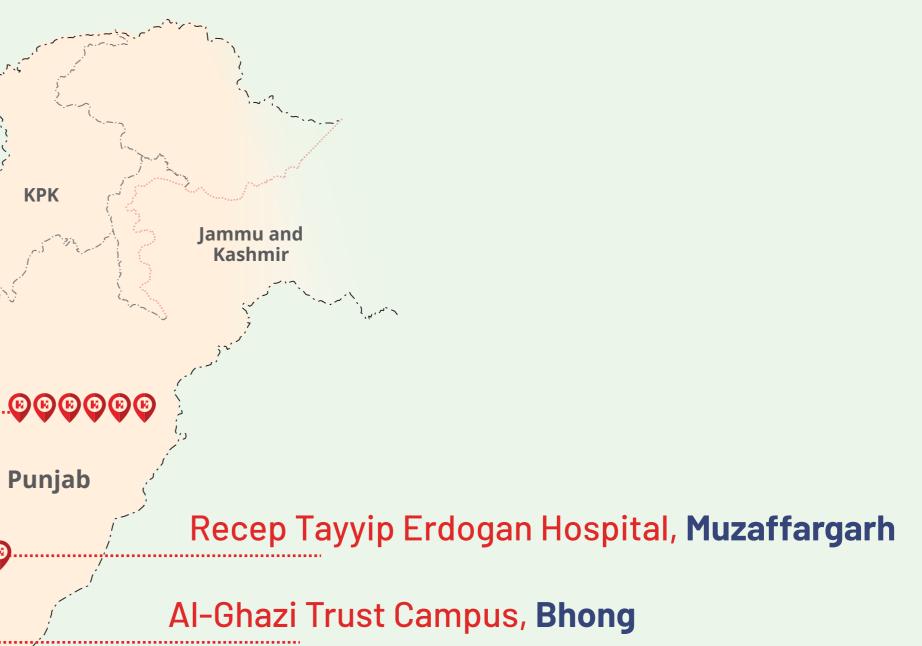






KPK





District Headquarter Hospital, **Badin** 

Sheikh Saeed Memorial Campus, Karachi

## MATERNAL, NEONATAL & CHILD HEALTH SERVICES AT IHHN



# MNCHSCOALS

The MNCH Programme aims to integrate maternal, neonatal & child health services at tertiary care hospitals with primary health clinics, as well as increase involvement of local communities through community midwives.

#### **Improve Maternal Health Through**

- Introducing skilled birth attendants
- Teaching people about healthy timings and spacing of pregnancies
- Educating people on nutritional deficiencies.

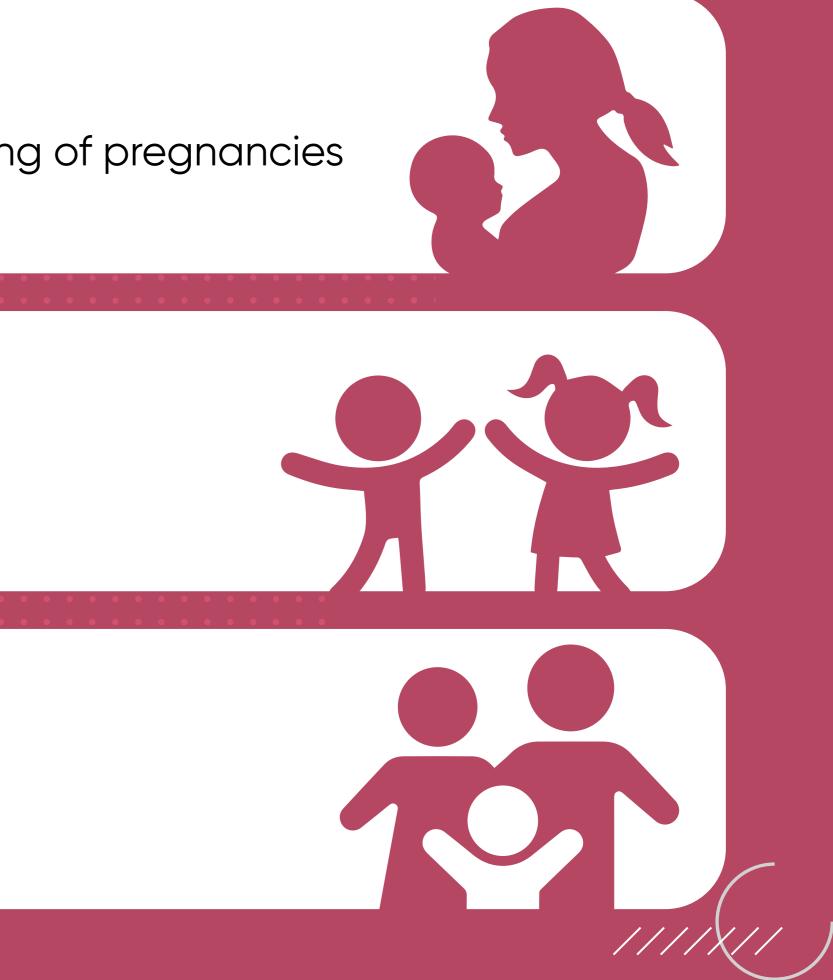
#### Improve Child Health Through

- Essential Newborn Care Services
- Nutritional Services (Preventive & Curative)

#### **Improve Family Planning Services By**

- Increasing Contraceptive Prevalence Rate (CPR)
- Postpartum Family Planning Services
- Capacity Building of Healthcare Providers







## THE IMPACT OF YOUR GENEROSITY HELPS IHHN ACHIEVE ITS SDGS

## **01 | NO POVERTY (#1)**

Providing free-of-cost quality healthcare removes the obstacle of financial restraints that prevent women and children from accessing medical care.

### **03 GENDER** EQUALITY (#5)

Access to healthcare allows women to be be on equal footing to men, so they can fully exercise their rights potential to be healthy, contribute to health development, and benefit from outcomes.

### 02 | GOOD HEALTH & WELL-BEING (#3)

Providing free-of-cost quality treatment to women and children enables achievement of health-related targets

### 04 | REDUCED INEQUALITY (#10)

IHHN treats patients with equality regardless of age, gender, race, financial status, and ethnicity.

## A HEARTFELT MIRACLE ERUM'S TUMULTUOUS JOURNEY TO MOTHERHOOD

Erum was navigating the road to motherhood with all the joy and excitement of a woman expecting her first child. Despite being alone, as her husband was abroad, Erum felt safe and prepared to deliver her daughter under the care of the medical staff at IHHN's Sheikh Saeed Memorial Hospital who had held her hand and attended to her every little query and concern in the past nine months.

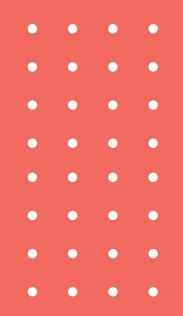
A week overdue, Erum was being wheeled to the operating theatre for a planned C-section when tragedy struck. She suffered from a congenital complete heart block. Unable to beat in rhythm, Erum's heart was not delivering enough blood to her and her unborn child, putting both at risk.

"I don't remember much from that time, only of how scared I was. It felt as if someone had taken hold of my heart and was squeezing it in their fist. All I could think of was my baby."

Later she recalled how her nurse stayed with her all the way to the operating theatre, her soothing voice constantly reminding her that everything would be okay; they were right there with her.

Heavily pregnant and overdue, Erum's condition was critical as the team at IHHN had only 10 minutes to regulate her heart before the baby would be lost forever. In a miraculous race against time, the doctors and nurses successfully fitted a temporary pacemaker in her chest. Having accomplished this, they went on to deliver her baby via C-section. Sapped of strength by the lengthy surgery, Erum spent the next couple of days in intensive care, unable to hold her daughter whom she had not seen since her delivery. As a tide of loneliness and anxiety threatened to drown her, Erum was again kept afloat by the medical staff who fed, comforted and cared for her like family.

"After my surgery, I wasn't able to get up and go to my baby so the nurses took pictures of her and would come show me how well she was doing. They looked after her as if she was their own child, I don't have the words to explain how grateful I am to have them. Without them, neither I nor my daughter would be alive today.







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