

SINCE APARTHEID ENDED IN 1994, South Africa has made equity the central tenet of its commitment to social change and reconciliation. This focus on equity has meant striving to ensure that every South African has access to high-quality health services.

PATH's work to improve health in South Africa brings effective interventions to the people who need them most. We collaborate with international, local, and national organizations, including government partners, to improve services across the health care continuum. Our interventions make birth safer, enhance infant and young child health, combat HIV/AIDS, strengthen health systems, and support improved sanitation, especially for the urban poor.



### MATERNAL AND NEWBORN HEALTH

To reduce South Africa's high maternal and newborn mortality rates, PATH advances the use of innovative, lifesaving technologies and techniques. We also teach health workers, including midwives and physicians, how to improve essential services for women and newborns.

Because breathing problems cause a third of newborn deaths in South Africa, PATH has worked to expand the use of effective newborn resuscitation devices. We have engaged health care providers to evaluate device effectiveness in various settings. By developing a field guide that lists and describes each device, we have facilitated the procurement of simple, cost-effective equipment appropriate for use in South Africa.

When training health workers, PATH applies an integrated approach focusing on adoption of evidence-based practices. These include use of a partogram to monitor the progress of labor, as well as active management of the third stage of labor to prevent postpartum hemorrhage. PATH trains health care providers to offer the full spectrum of essential newborn care, from infection prevention to keeping the baby warm with skin-to-skin contact to counseling on immediate breastfeeding.

To ensure high-quality care, we develop tools for monitoring and evaluating services. This work includes assessing how health workers administer oxytocin, a drug proven to prevent excessive blood loss after childbirth.

### INFANT AND YOUNG CHILD HEALTH

Although the number of South African children who die before the age of five has declined because of better immunization coverage, improved nutrition, and other factors, many continue to die from readily preventable causes. Most child deaths are attributable to malnutrition, diarrhea, pneumonia, malaria, HIV, and tuberculosis.

Early childhood, especially from birth to two years, represents a critical window of opportunity to enhance the health and development of young children and to prevent the onset of chronic diseases later in life. To promote the well-being of young children, PATH improves critical services for vulnerable populations. We build community capacity and tailor activities to local needs through partnerships with local health and social services providers, as well as nongovernmental and community-based organizations.

An estimated 25 percent of South African children experience stunting from inadequate nutrition, and many mothers do not know the best ways to feed their infants and young children. PATH informs South Africa's national guidelines on feeding infants and young children, helping to align them with international standards. We also contribute to national efforts to curb malnutrition through radio spots about vitamin A supplementation, growth monitoring, de-worming, and catch-up immunizations. At the local level, we mobilize communities and municipal governments to integrate nutrition activities into community development plans.

# HIV/AIDS PREVENTION, CARE, AND TREATMENT

With an estimated 5.6 million HIV-positive individuals, South Africa has the world's The allishinghest rates of HIV infection.

PATH's HIV programs encourage safer sexual behavior, more equitable gender relations, and better health practices. They support South African groups working to increase access to effective, comprehensive services.

The risk of HIV transmission
from mothers to babies is a major
concern in South Africa, where
28 percent of pregnant women have
HIV. PATH equips antenatal, maternal, and
pediatric care programs with the knowledge
and skills to prevent transmission. We build
the capacity of health workers to teach HIVpositive mothers how to safely breastfeed, and
we help human milk banks develop a supply
of safe breast milk for mothers who cannot

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breastfeed their children. We work to ensure that health workers offer HIV-positive mothers counseling and testing services, antiretroviral prophylaxis to protect their infants from HIV, and information about family planning after childbirth.

Many of our efforts focus on midwives. Through the Midwives AIDS Alliance, a group organized by PATH and our partners, midwives become experts in supporting HIV-positive mothers from conception until after childbirth. Expert midwives reach out to other midwives to strengthen skills and knowledge. The alliance transforms midwives into leaders

and advocates, enabling them to empower South African women and address gender-based violence.

Because nearly 14 percent of South African women are HIV-positive roughly double the HIV rate among men—PATH works to improve access to HIV-prevention options for women. For example, we advance research on vaginal microbicides and pre-exposure prophylaxis

to prevent infection. We also build demand and government support for these protection options in collaboration with industry, policymakers, civil society, and researchers.

Our innovative behavior-change techniques enable us to access isolated, at-risk populations with information about HIV and safer sexual

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behavior. For example, we engage health-savvy actors from rural communities to act out stories based on common dilemmas related to HIV, and we form facilitated community groups to discuss HIV-related issues.

## HEALTH SYSTEMS STRENGTHENING

The success of specific health programs depends on having a strong health system that strategically captures and analyzes data and builds a skilled workforce. PATH works with health officials to capture data from labor wards on causes of maternal and newborn deaths. The data help decision-makers determine which interventions are working and how they can improve the quality of care.

PATH also facilitates an accreditation system for training sites and a certification system for health care providers. We strengthen provincial training systems and referral mechanisms. Because of new provincial health information registries introduced by PATH, officials implementing programs to prevent mother-to-child transmission of HIV can better see where their efforts are making a difference and where improvements are needed.

### WATER AND SANITATION SYSTEMS

Unsafe drinking water, inadequate sanitation, and poor hygiene contribute to high levels of preventable illness and death in South Africa. Because rapid urbanization and increased use of disposable, nonbiodegradable products, such as sanitary pads, exacerbate this problem, South Africa and other countries are exploring how to better serve the urban poor through centrally managed sanitation systems that safely dispose of these products.

PATH contributes to this effort in South Africa by researching how menstrual waste is handled in urban and peri-urban settings. We conduct case studies in low-income areas, focusing on how menstrual products and management practices interact with urban sanitation systems. Our goal



is to successfully integrate modern menstrual management products with improved sanitation systems that support clean water and good health.

#### **FUNDERS**

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PATH is an international nonprofit organization that transforms global health through innovation. PATH takes an entrepreneurial approach to developing and delivering high-impact, low-cost solutions, from lifesaving vaccines and devices to collaborative programs with communities. Through our work in more than 70 countries, PATH and our partners empower people to achieve their full potential.

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