



# IMPACT UPDATES



## "RESCUE US"

THANK YOU FOR RESPONDING!

“ In 2010, two of NEA’s staff members, Osman and Fatawu and their wives, lost newborns on the first day of life. We celebrated the arrival of Osman’s first child in the morning and the next day we wept with him as he told us that although the nurse had done all she could, they could not save his little boy. Tears streamed down his face as he kept saying, “He was so beautiful.” Over the next months we kept hearing of the deaths of more newborns, and the pain of these losses left us with the burning question of “What can we do to change this?” - Brenda Mensah ”

**Leyaata** means **Rescue Us**. This seemed an apt name for our project to reduce newborn death rates in 80 communities through simple community-based

activities; supporting health workers, enabling women to choose safe childbirth, caring for newborns and preventing malaria among mothers and children.

The program, which ran from 2011-2014, was an overwhelming success, so we expanded those same core activities to include a total of 162 communities through the Leyaata Ane Project. This meant that twice as many mothers and babies would be helped.

The scope of the project was expanded to include: providing savings education to families expecting babies, and developing and delivering reproductive health awareness to adolescents and other vulnerable groups. From 2016 – 2021, The Leyaata Ane Project saw two primary intermediate outcomes in four districts:



Improved Delivery



Improved Utilization

of gender-responsive essential health services for mothers, pregnant women, newborns and adolescents

### IMPACT @ A GLANCE



0 maternal deaths



4.4/1000 neonatal mortality rate  
\*from 40-45/1000 in 2011



87% of mothers delivered at a health facility



9,371 adolescents received reproductive health education

Over the past five years, Leyaata Ane successfully empowered over 18,000 women to take charge of their own decision-making regarding their labour and delivery of their newborns.

One of the strategies implemented in the Leyaata Ane Project, was the implementation and distribution of nearly 14,000 'susu' (savings) boxes.

These 'susu' boxes provided a financial cushion to vulnerable pregnant women without dependence on immediate families.



*The 'susu' box provided the finances I needed when I gave birth to buy the things that I needed for my child and me.*

*-Beneficiary Mother  
(Focus Group Discussion)*



## RELEVANCE

The Leyaata Ane Project was designed to be receptive, flexible and adaptive to emerging health care interventions, seeking to build on health activities that addressed community and health workers' needs.

Major stakeholders such as local level governing officials, health workers, chiefs, beneficiary mothers, school headmasters and students were included in the program design, ensuring the project was relevant, sustainable and effective.

The logistical support and equipment boosted logistics availability for beneficiary health facilities to ensure continuous delivery of quality health care services, especially to the deprived rural communities.

Supported the government of Ghana in the provision of infrastructure (i.e. potable water supply and sanitation supplies), ensuring quality health service is delivered in a clean environment.



# leyaata

**5 YEARS.**

**162 COMMUNITIES.**

**2,868 BABIES.**

**18K+ MOTHERS.**

**RESCUED!**

*We gratefully acknowledge the Government of Canada's great contribution in helping us save more babies and mothers!*

## EFFECTIVENESS

Pursued aggressive and sustained monitoring and supervision of antenatal care and delivery service points.

Extensive training was conducted for health workers, Trained Birth Assistants (TBAs) and Community-Based Surveillance Volunteers (CBSVs) to ensure enhanced quality of health care service in remote areas.

Both the project and the stakeholders through their symbiotic relationship have ensured the successful delivery of the plans and objectives of the project to the benefits of not only the target population but also the stakeholders.

Well-planned reproductive health education and school club activities resulted in reduced teenage pregnancies and increased girls' enrollment and retention in the schools.

## Meet the Leyaata Project Management Team

Jonathan

Rachel

Prosper

Mary

Mumuni



The Leyaata Ane Project included training for health professionals in 50 health facilities and allowed for a robust partnership with Ghana Health Service to produce an incredible impact on the lives of the beneficiary women and babies, and their extended families.

Due to the positive outcomes and the enormous benefits of the Leyaata Ane project, we are confident in the continued execution of the project activities.

Leyaata means "Rescue Us" and we thank God for opening our eyes to see the need, for helping us to find ways to address it, and blessing it far beyond what we ever could have dreamed. And of course, we thank Him for the thousands of babies who have been rescued.

*I think that you have done your part. Now, it's my part. I will call for a PTA meeting and advise parents to take up the adolescent project to eliminate teen pregnancies in our community.*

*-Traditional Ruler of  
One of the Communities  
(In-Depth Interview Session)*

*Through the training provided, we are able to save asphyxiated babies.*

*-Staff Midwife  
(In-Depth Interview Session)*

## EFFICIENCY

Activities were monitored, amended and updated, ensuring the project achieved its vision of providing quality health care in a continuum.

Project staff were involved in ongoing modification by identifying key gaps in the provision of adolescent reproductive health education and service delivery.

Coaching, mentoring, and facilitative supervision was adequately established, making it easier to follow up and ensured CBSVs and TBAs were up to the task with their responsibilities.

A robust partnership with Ghana Health Service produced an incredible impact on the lives of the beneficiary population.

***"Even one single life saved is worth the money invested in the project."*** (In-Depth Interview Participant)

## SUSTAINABILITY

Despite COVID-related restriction of activities, the reduction of maternal and child mortality in the project area was successfully achieved.

Strong relationships with stakeholders such as local authorities, institutions, beneficiary communities and target groups ensured mutual respect and understanding.

The pledge of support in various ways from all stakeholders to sustain the program and to support its expansion to cover other communities ensures the ongoing success of the program.

It is expected that the Leyaata Hospital will continue to support Leyaata Ane interventions through its public health arm and will be a site for ongoing referrals of neonates by CBSVs working within the Leyaata Ane communities and beyond.

# LEYAATA HOSPITAL UPDATE

by Jacques Lapointe

The Leyaata Hospital construction site and temporary planning offices are a hub of intense activity. **“Logistics”** is the key to everything that needs to come together as we close in on an opening date.

Like any large, complex project like the Leyaata Hospital, the initial stage involves getting material and labour coordinated for each phase of construction. Contractors must excel at this to complete a project on time and on budget. We have an excellent contractor who has expertly handled the unanticipated mandatory closures and materials availability issues that have come with COVID. Yet despite this, the end of construction is only a few months delayed and very close to budget.

Presently, our logistics bandwidth has greatly increased.

➤ Hospital equipment selection is essentially completed, with initial containers making their way from the UK warehouse where these are gathered from suppliers around the world, to Ghana to arrive in time for customs clearing, transport to the hospital site where they will be staged for installation, testing and training of hospital staff and technicians.

➤ Essential pharmaceuticals and other supplies have been identified and plans for ordering just in time for opening are in the works.

➤ IT systems have been purchased, with hardware and software ready for installation, testing and staff training once construction is completed.

➤ Staffing needs for each stage of opening have been identified and interviews are planned, ensuring their arrival is coordinated with end of construction and other logistics. From experience, we know it can take three or more months for all of these things to come together.

➤ Certification of the hospital, in various stages, is another essential process before opening and this is also integrated into the planning.

➤ The Grand Opening Ceremonies will of course involve the coordination of hundreds of guests and officials from both Ghana and abroad.

Setting a realistic final opening date with all of these interconnected moving parts still in motion is difficult but essential to seeing it all come together for completion. The opening date has not yet been declared but early 2022 is the target. Stay tuned!

The Leyaata Hospital is, of necessity, getting a lot of attention but please remember that the vast majority of our NEA staff **continue the work of helping people out of poverty through ongoing projects and programs. We are determined** not to be distracted from this basic mission, and our ability to advance in this regard is **completely dependent on your ongoing support. Thank you so much for continuing to make a real difference!**

**GRID** (Ghana Rural Integrated Development) and **NEA** (Northern Empowerment Association) are partner organizations working to alleviate poverty in Northern Ghana. Motivated by Christ's love, our mission is to assist poor communities to meet their basic needs in a sustainable manner.

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