



A Mother's Triumph: How Bungoma County's MPDSR System Saved Monica and Her Baby

For years, Ms. Monica Naliaka from Bungoma County endured heartbreak few mothers can imagine. After suffering nine miscarriages, she finally gave birth to her first healthy



Figure 1 Ms. Monica Naliaka holds her long-awaited baby in the Kangaroo Mother Care (KMC) position, her second successful pregnancy, after nine previous losses.

baby, a breakthrough filled with immense joy and hope. Now, as she embarked on her 11th pregnancy, Monica prepared for her second successful child, aware that this pregnancy was classified as high-risk and would require careful monitoring, quick referrals, and continuous follow-up.

This time, however, Monica was supported by a stronger and more responsive maternal health system, one shaped by

Bungoma County's dedicated investment in Maternal and Perinatal Death Surveillance and Response (MPDSR). The County's MPDSR committee, which meets monthly and includes representatives from public and private facilities, ensures continuous review of maternal cases including near misses. These reviews have led to tangible improvements such as establishing a dedicated maternity theatre, creating staff lodging for night-shift workers, and enhancing early referral systems. Digital platforms like PROMPTS support close follow-up of antenatal and postnatal clients, particularly those at high risk like Monica.

A New Challenge: Malaria in Pregnancy

During this pregnancy, Monica was diagnosed with malaria, a dangerous condition that put her unborn baby at significant risk. This diagnosis triggered intensified monitoring by healthcare workers trained and mentored through MPDSR-informed programs.

Following the medical team's guidance, Monica adhered strictly to treatment and follow-up instructions. However, due to the potential complications posed by malaria in pregnancy, the healthcare professionals determined that early delivery was necessary to protect both mother and baby.

At 33 weeks, Monica went into preterm labour. She was urgently rushed to Bungoma County Referral Hospital where the maternity and neonatal teams responded swiftly and effectively. Her baby, born weighing only 900 grams, was extremely fragile and required immediate specialized care.



Thanks to the strengthened neonatal services and the improved mother-and-child wing established to reduce delays and overcrowding, Monica's newborn was stabilized. The fragile infant received warmth, oxygen support, assisted feeding, and continuous monitoring. Over seven weeks, the baby steadily gained strength, eventually reaching 1930 grams.

Reflecting on her journey, Monica said, "After losing nine pregnancies, I had almost given up. When this baby arrived so tiny, I feared the worst, but the doctors and nurses never gave up on us. They cared for my child like their own, and today I finally have hope."

Monica's story is a powerful testament not only to her resilience but also to a health system that has learned, adapted, and strengthened itself through MPDSR.

What initiatives has your County taken to improve Maternal and Perinatal Death Surveillance and Response?

Visit <https://maarifa.cog.go.ke/> to learn more about the successful initiatives on service delivery our Counties are undertaking.



Figure 2 The newly established mother and baby hospital in Bungoma County Referral Hospital

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