

# UNIVERSITY COLLEGE LONDON

*University of London*

## EXAMINATION FOR INTERNAL STUDENTS

*For the following qualifications:-*

*B.Sc.(Intercal)*

### **IHME3005: Maternal and Child Health in Developing Countries**

COURSE CODE : **IHME3005**

DATE : **27-May-05**

TIME : **10:00**

TIME ALLOWED : **3 hours 0 minutes**

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**TURN OVER**

Students should answer questions in BOTH section A and section B. Section A is worth 70% of the overall marks. Section B is worth 30%. It is recommended that you spend approximately two hours on Section A and one hour on Section B.

### **Section A**

Answer TWO questions in this section. Each question is worth 35% of the total mark.

1. Why does the neonatal mortality rate in the developing world remain so high? Which measures have been proven to reduce neonatal mortality and what are the barriers to implementing these measures more widely?
2. Which indicators are used in the Millennium Development Goals to measure maternal health? State the current strategies to meet the maternal health MDG and give your reasons for suggesting whether or not they will work.
3. Much of the US budget for HIV/AIDS in Africa is reserved for promotion of sexual abstinence before marriage. Discuss the likelihood that this will be successful in comparison with other strategies for the control of HIV/AIDS?
4. With reference to two named programmes, discuss the advantages and disadvantages of a vertical, single disease approach (for example Roll Back Malaria or EPI) as compared to a horizontal integrated approach to healthcare (for example IMCI). You may wish to use different examples in your answer.
5. What are the health risks to mothers and children living in a crowded refugee camp in Asia, one week after the tsunami? If you were the leader of an aid organisation providing health care in the camp, how would you manage these risks?

### **Section B**

Answer ALL questions in this section. This section is worth 30% of the total mark.

You are the district medical officer responsible for a small primary health care facility in a small country in West Africa. The available data are imperfect and probably underestimates, but suggest that in the area served by your facility there were 2936 births in total last year, of which 121 were stillbirths. 124 babies died in the first month of life, of which 88 died in the first week after birth. 20% of the babies were estimated to be low birth weight. 10% of the children are wasted.

Define and calculate the following:

1. Neonatal mortality rate (2 marks)
2. Perinatal mortality rate (2 marks)
3. What is meant by low birth weight? (1 mark)

**CONTINUE**

4. List and briefly explain the likely main causes of children being wasted in this setting. (5 marks)

5. List and briefly explain the likely main causes of the high prevalence of low birth-weight babies in this setting. (5 marks)

During your time at this health centre, a civil war erupts in the neighbouring country. Many of the men are killed and it is mostly women and children who flee across the border into the area served by your health centre. You hear that many of the children are becoming involved in domestic service with host country families. Some of the refugee women attend the health centre for antenatal care. As district medical officer, you are called upon to advise the government on the health needs of these refugee women and children in difficult circumstances.

6. What diseases may the pregnant refugee women be vulnerable to? (5 marks)

7. How can the risk of these diseases be minimised? (5 marks)

8. Is it possible to predict how domestic service will affect the health of the children involved? (5 marks)

**END OF PAPER**

IHME3005