

Supplementary Material Table 2 Maternal and new-born care services

Antenatal Care

Diagnostic weekly/monthly (risk/normal pregnancies): malaria, haemoglobin, urine stick, syphilis test, nutrition status (MUAC in cm & weight gain in kg) vital signs
Training of midwives by the RH coordinator (nurse/midwife) about complications during pregnancy and at delivery monthly.

Close monitoring of risk pregnant women in ANC.

Clean delivery kits for skilled birth attendants and traditional birth attendants

Anaemia: screening at first ANC visit; if no signs of anaemia a follow up check at GA 28 weeks. Pregnant women with anaemia will be rechecked after one-month treatment. Pregnant woman with Anaemia will received Ferrous Sulphate (200 mg) 1 tab oral TID and Folic acid 1 tab oral OD until her HCT reached to 30% or HB to 10g/%.

Supplementary food rations for pregnant women:

Healthy pregnant woman receive blanket supplementary feeding provides over 300 kcal/day and includes

- 1.5 kg Asia remix
- 0.5 kg pulses
- 0.5 L vegetable oil.

Micronutrient supplements included:

- Vitamin B1 (100 mg) 1 tab per week.

- Ferrous Sulphate (200 mg) 1 tab per day (Now MI changing to Ferrous Fumarate)

- Folic Acid (5 mg) 1 tab per week

Malnourished pregnant woman receive blanket supplementary feeding provides over 600 kcal/day and includes

- 2 kg Asia remix
- 0.5 kg pulses
- 0.5 L vegetable oil.

Vaccination: Diphtheria and Tetanus prophylaxis (dT)

Postnatal Care

Postpartum care services: daily screening of mother and baby

Vitamin A for mothers and babies.

Expanded Program for Immunization (Thai National protocol) including hepatitis b birth dose in 24 hours

Supplemental food rations for lactating mothers

Vitamin B1 (thiamine hydrochloride)

Basic and comprehensive emergency obstetric and new-born care (incl. safe blood transfusion)

Basic emergency obstetric and new born care partially available (parenteral antibiotics, uterotonic drugs, parenteral MgSo₄ anticonvulsant, uncomplicated deliveries, manual removal of placenta, and maternal and new born resuscitation).

NB: uncomplicated vaginal delivery with vacuum extraction cannot be performed due to lack of vacuum equipment.

	<p><u>Comprehensive emergency obstetric and new born care</u> partly available, including post-abortion care, tetanus prophylaxis</p> <p>Implementation and monitor therapeutic standards and documentation for delivery and labour</p> <p>Phototherapy to treat treatment jaundice introduced in 2014</p> <p>Mobile ultrasound introduced 2016</p>
Referral services (24h/7) for caesarean section	<p>Emergency car on stand-by during day time; no travel allowed at night due to security concerns; but rented car from Thai village was possible during the night time</p>
Health education /Behaviour Change Communication	<p>Promotion of exclusive breastfeeding and hygiene measures</p> <p>Health Education through Mother Support Groups and MCH workers;</p> <p>Promotion of deliveries with skilled birth attendants in birth facility;</p> <p>Health Promotional Campaigns for safe motherhood, immunization, diseases prevention, nutrition</p>
Medical and clinical treatment of all relevant reproductive health issues and communicable and non-communicable diseases	<p>Diagnostic and treatment of all relevant health issues</p> <p>Presumptive treatment of sexual transmitted infections</p>
HIV and AIDS /STI	<p>Voluntary and confidential counselling and testing (VCCT)</p> <p>Syphilis screening</p> <p>Provision of ARV for HIV positive pregnant women using ARV eligibility criteria</p> <p>Safe blood transfusion</p> <p>Precautions for health workers</p> <p>Health prevention campaigns</p>
Sexual Gender Based Violence (SGBV)	<p>Clinical care; Post-Exposure-Prophylaxis (PEP) kit;</p> <p>Emergency contraception; medical and referral services for SGBV survivors; psycho-social support</p> <p>Hepatitis B vaccination</p> <p>Community awareness (by UNHCR & MI)</p>
Capacity Development (regular); Empowering refugee communities	<p>Training in utilization of WHO partograph</p> <p>Training in labour management</p> <p>Training in management of eclampsia and pre-eclampsia</p> <p>Management of postpartum haemorrhage</p> <p>Engagement of TBA's in ANC and during deliveries</p> <p>Engagement of mother support groups</p> <p>Engagement MCH workers</p> <p>Training to ensure birth registration and certification for the Thai authorities</p>
Child health services	

Medical / Clinical Care / protection aspects	Medical/clinical primary care services of all relevant diseases/micronutrient deficiencies for all children under 5 years; phenylketonuria medication and hypothyroidism medication Prevention of Mother-to-Child transmission HIV Diagnosis of major diseases Referral service 12h/7 Birth certificate
Post-Natal care	Well baby clinic for all children < 1 year / monthly
School Health	6 monthly screening in all nurseries, primary and secondary schools Hygiene education 6-monthly Treatment of vitamin deficiencies Deworming: Albendazole 400 mg oral stat every 6 months for children aged 2-12 years
Growth Monitoring	Guidance to support exclusive breastfeeding
Infant and young child feeding	Support for complementary feeding practices Height/Age (Stunting): < 3 years of age bi-monthly; 3-5 years 6-monthly Weight/Height (Wasting): 6-monthly growth monitoring of children between 36-59 months of age Therapeutic feeding Supplementary feeding Vitamin A supplementation in children < 5 years of age (6-monthly)
Dental Hygiene	Daily tooth brush activities in grade 3-5
Expanded Program for Immunization (EPI)	Dental screening unit available (5/7 days) New-borns: Hepatitis B birth dose; BCG 2 months: DTP-HB 1; OPV 1 4 months: DTP-HB 2; OPV 2; IPV 6 months: DTP-HB 3; OPV 3 9 months: MMR 1 12 months: JE 1 18 months: DTP 4; OPV 4 2.6 years: JE 2; MMR 2 4 years: DTP 5; OPV 5 6 years: MR (if not received MMR at 2.6 years); dT, OPV (if not received DTP and OPV completed 5 doses) 12 years: dT <i>Remark:</i> Introduction of JE, MMR vaccine in July 2013; introduction of IPV in September 2016