



Bridging families and communities to Primary Health Care (PHC) through designing and implementing innovative community solutions for improved RMNCH outcomes

Discussion Outline

- Background
- Design and implementation approaches
- Innovative community solutions
- Effects on health outcomes
- Scale up and institutionalization
- Lessons learned and policy implications

Background: The HEP Opportunity



Challenges

- Low demand for and utilization RMNCH services in
- Weak link between families and communities with the newly launched HEP

Opportunities

- Strong political will at all levels of the government system to address the gaps
- Government and donors interest to test innovations and inform program implementation in the community health system
- Global consensus on Community Empowerment as one pillar of PHC to realize UHC

A Health Extension Worker maps the households in her kebele



L10K's community solutions: Design and implementation approaches



- Building on existing community health systems and mechanisms
- Partnership with local CSOs
- Designing and testing innovative community-based strategies in selected woredas and kebeles
- Robust monitoring, evaluation, learning, and documentation
- Evidence-based scale up

L10K's community solutions: Strategies and timeline



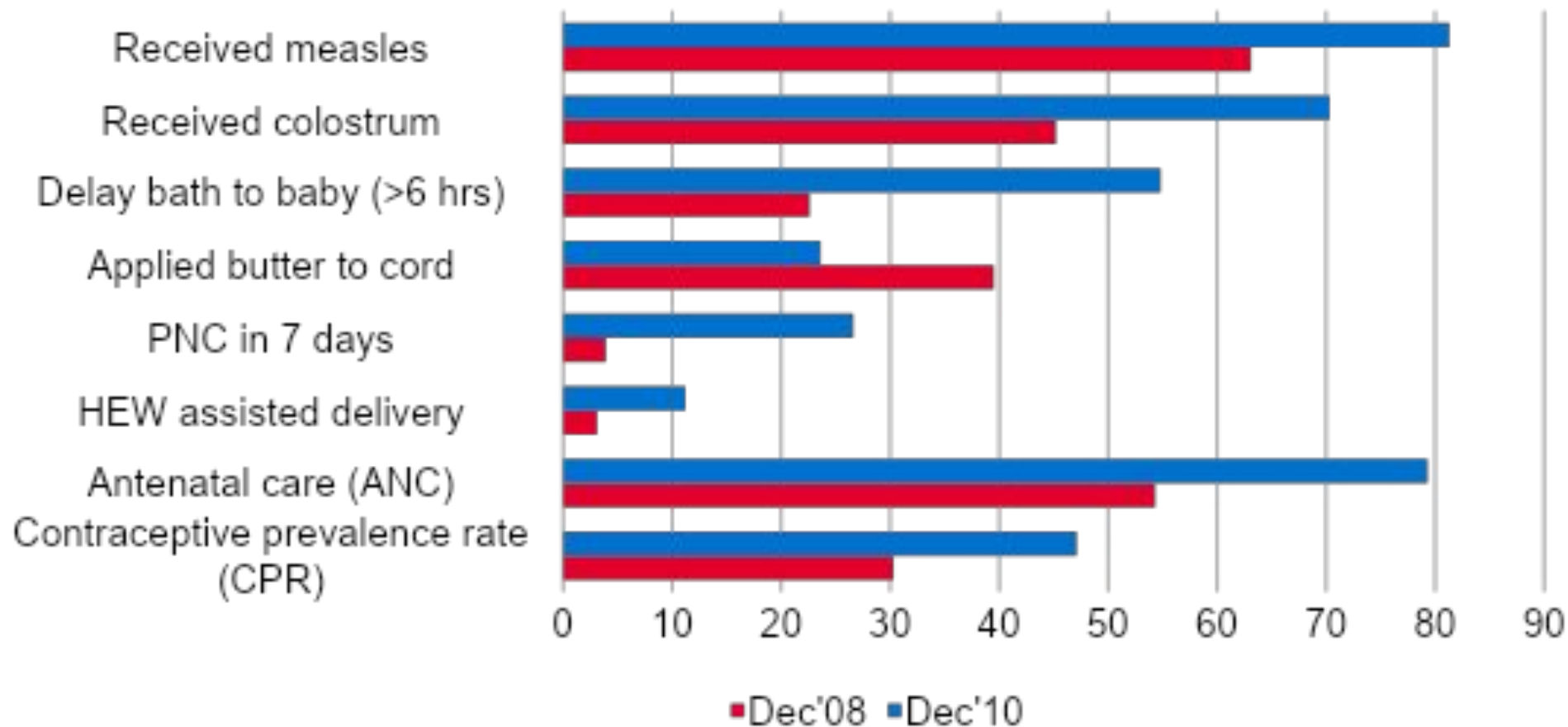
Period	Strategy	Action
2008-2011	L10K platform in all 115 woredas	<ul style="list-style-type: none">• Trainings of HEWs and their supervisors on HEP implementation• Building skills of HEWs and Volunteers• Working with local administrations• Regular performance reviews and refresher trainings
	Design and testing of innovative solutions in selected kebeles (CBDDM, non-financial incentive (NFI), community solution fund (CSF))	<ul style="list-style-type: none">• Community-based data for decision-making (CBDDM): mapping and surveillance of HH health needs for targeted services and follow up• NFI: designing and implementing different non-financial schemes for CHPs/WDAs to keep them motivated and engaged• Bundling and repackaging of scalable strategies for scale (CBDDM and NFI)

L10K's community solutions: Strategies and timeline

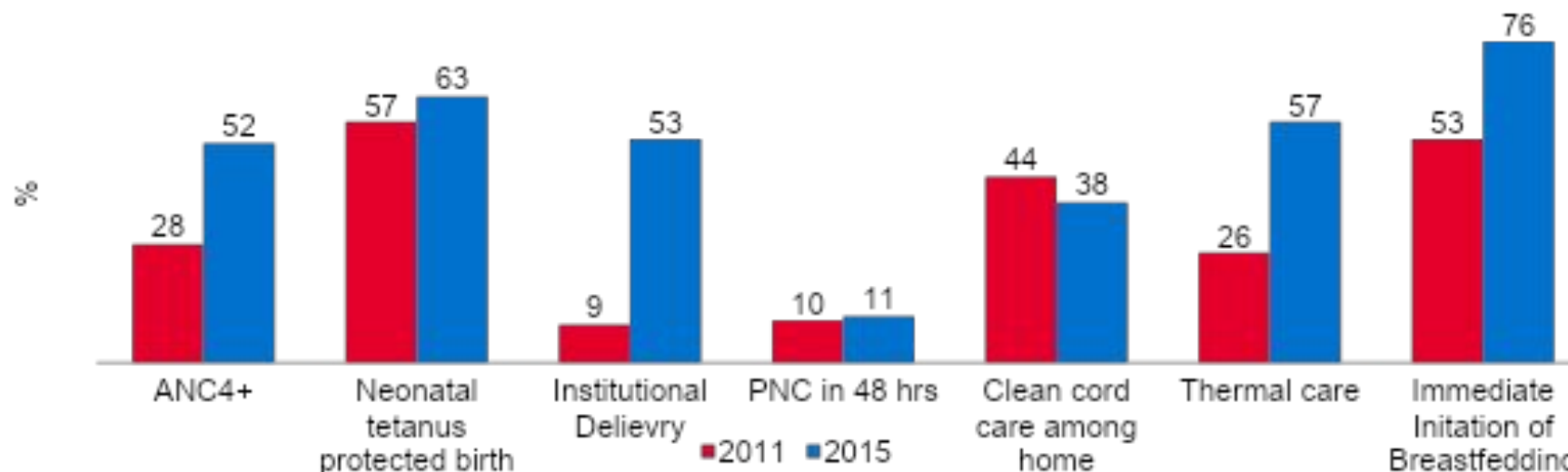


Period	Strategy	What we did
2011-2017	Innovative interventions layered on the existing 115 platform woredas	<ul style="list-style-type: none">• CBDDM and NFI strategies overlayed on the L10K supported 115 platform woredas• Family conversations- engaging HH decision-makers to create a supportive environment for a pregnant women and children• Birth notification system- an information exchange to access and use care to facilitate communications between families, volunteers, and PHC to facilitate MNH care• Realigned the package of community engagement interventions on the new WDA strategy• Institutionalization of the interventions
2017-2022	Reconfiguration and optimization of the National community element strategy	<ul style="list-style-type: none">• National rollout of the WDAs CBT• multi pronged approaches to reconfigure the existing WDA strategy with alternative CE options• Testing the VHL intervention in selected woredas

L10K's community solutions: CBDDM improves care seeking and reduces harmful practices during pilot phase

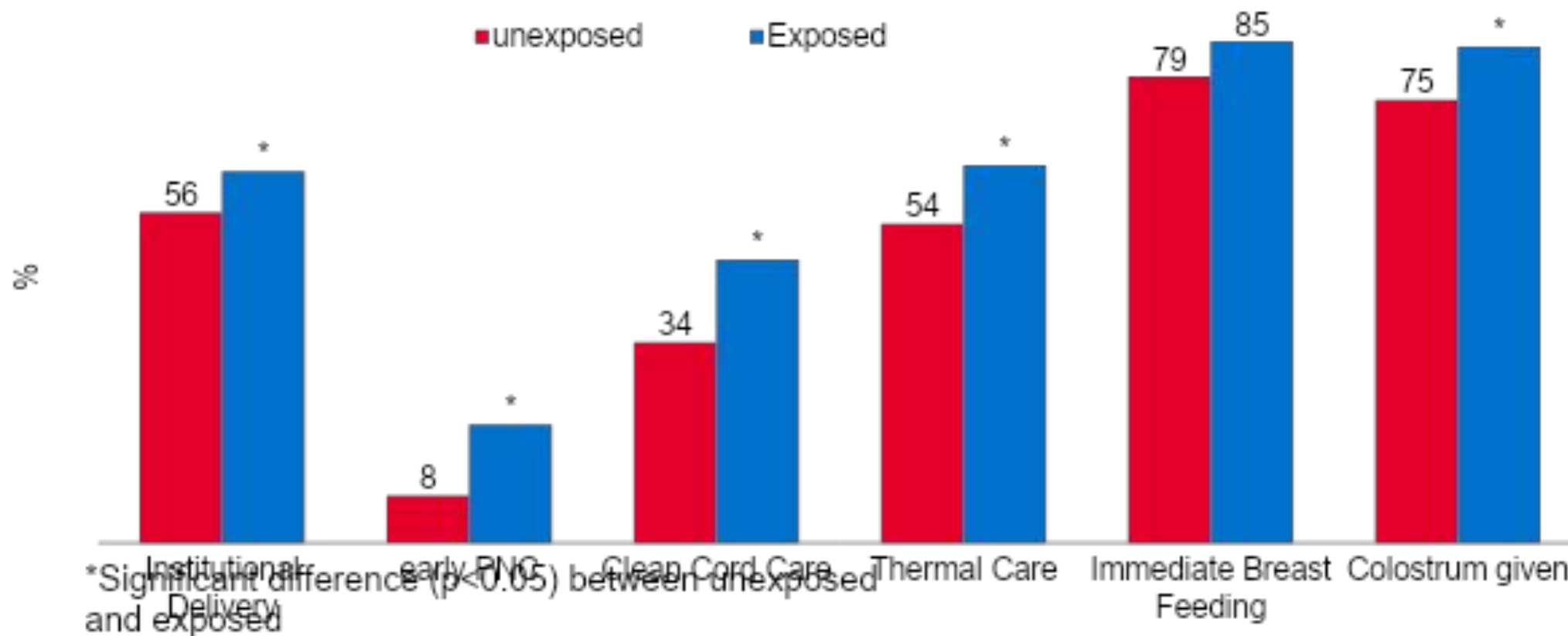


Changes in MNH outcomes between 2011 and 2015-CBDDM augmented national efforts



Added value of CBDDM on MNH outcomes on existing HEP platforms			
MNH indicators	ATE of CBDDM	(95 %CI)	P-value
Neonatal tetanus protected birth	9	(4,14)	0.001
Institutional delivery	15	(9,20)	<0.001
Clean cord care among home deliveries	7	(1,14)	0.030
Thermal care	10	(3,17)	0.003
Immediate initiation of breastfeeding	10	(3,13)	0.002

Effect of exposure to family conversations on MNH outcomes






Facilitation of family-level interactions

Family Conversation Guide



First Session during the first 6 months of Pregnancy

1. Exploring Practices : Use the following questions to explore the practice of the family

1. Did the woman started ANC? If no, Why? If yes, what services she received during her visits?







2. What the family is doing to have a healthy pregnancy?





• Started saving Money?

• Support the mother from workload?








• Support for better nutrition/extra meal for pregnant?

• Support to sleep under the Bed net?





3. How much the family is aware of about the Pregnancy danger signs?

Family Conversation Guide



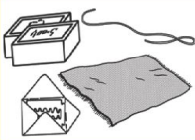
Second family conversation Session with Family members of pregnant woman

1. Exploring Practices : Use the following questions to explore the practice of the family



• Where does the delivery will happen? if home, why? If at facility, when do you go there?

• Whom do you tell first during labor?

How do you transport the laboring mother to the health facility?
(Ambulance, public transport, stretcher)

• What did you prepared for Birth? (blade, clothes for the newborn)

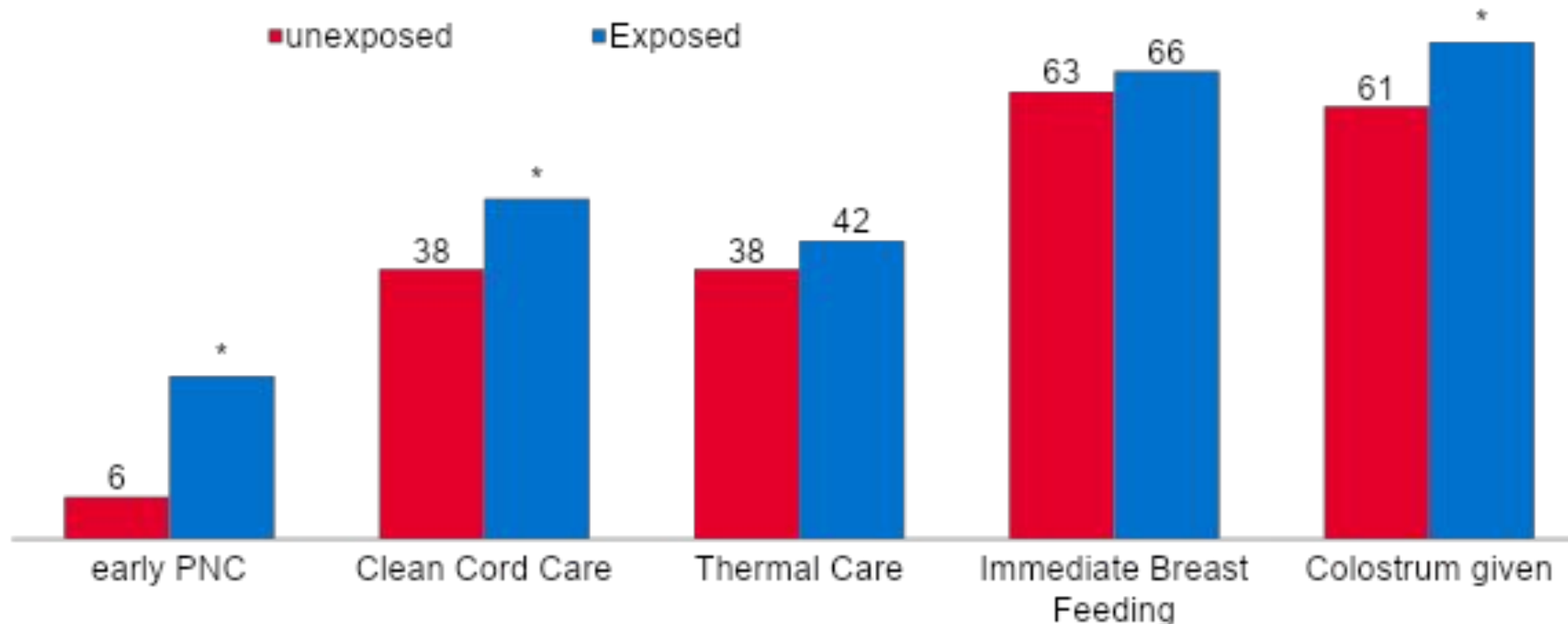



• Who will look after the children at home when the family takes the laboring mother to the facility?

• What kind of care are you planning to give newborn immediately after birth?

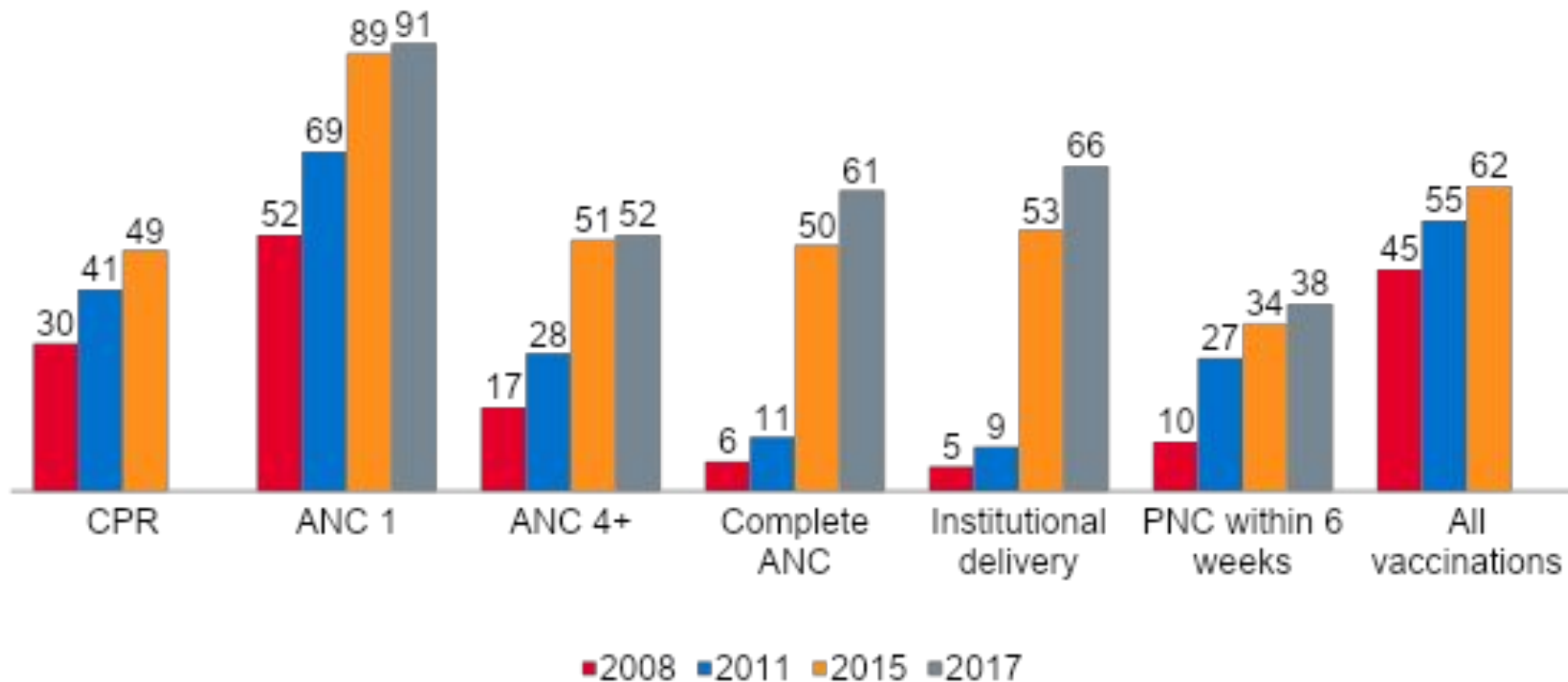


Effects of exposure to birth notification systems on MNH outcomes



*Significant difference ($p < 0.05$) between unexposed and exposed

Trends in RMNCH coverage in 115 L10K supported woredas (2008-2017)



Institutionalization of innovative community-based strategies into the health system



L10K's proven community tools and approaches are institutionalized in national program strategies and guidelines

- HEP implementation manuals: working with community volunteers and local administration
- HEW integrated refresher trainings: CBDDM, family conversation, birth notification
- WDAs competency training curricula: mapping, CBDDM, family conversation, birth notification
- Electronic Community Health Information System (eCHIS): integrated notifications system

Lessons learned



- The design, implementation, and evidenced-based scale-up of innovative community-based interventions augmented the national effort of improving key RMNCH outcomes.
- Continuous engagement at all levels of the health system, alignment with government priorities, and simplification of tools facilitates institutionalizing innovative community-based solutions into the existing health system



Next steps in programming

- The project will continue to develop digital and paper-based solutions for WDAs and VHLs to use for informed community decision making and better linkages to the PHC system.
- The project will continue to develop and test methodologies and tools to integrate family and village-level conversations into the community health program / HEP.



Thank you!



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