Improving maternal and newborn outcomes through integrating GESI in QI approach

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Context

The goal of the Quality Improvement Collaborative (QIC) supported by Alcançar is to accelerate progress on MNCH outcomes by improving methods and facilitating a learning network in the district health system. The QIC Improvement teams from 312 health centers and 8 hospitals along with community representatives from Nampula convened in a series of "learning sessions" to share their progress, challenges, lessons, and success targeted coaching. Families, communities, and social institutions are the key actors to support individuals to adopt positive attitudes and behaviors. Through the Alcançar project, community members are encouraged to spread awareness to wider networks, while institutions are encouraged to create an environment conducive to gender equality and respectful care.

Activity Description

At the individual and family level:
- Building awareness and engaging women to address harmful social norms around masculinity and support women’s access to education.
- Promoting gender equality, MCH, prevent gender-based violence, and encourage male involvement in domestic chores.
- Conduct dialogues with couples to improve their MCH self-management skills.
- Promote healthy lifestyles for men, women, and children.

At the community level:
- Train community health committees, care groups, traditional birth attendants, community health workers, and community and religious leaders in gender-transformation approach.

At the institutional and system levels:
- Advise with local, provincial, and national authorities to integrate a gender-transformation approach in health and community systems.
- Birth simulation training for health providers that combine clinical and GESI interventions.
- Quality Improvement change package developed for the specific context of each district including a combination of social and health communication strategies to address barriers to high-quality service delivery, such as gender inequality.

Activity Impact

Through a combination of GESI, birth simulation capacity building activities and 2 Joint supervision of health providers at national, provincial, district, and community levels, the GESI Change Package (home visits, community dialogues, integrated youth in community health committees, coaching and sharing key messages), we observed the following results:

- Women: Increased utilization of MCH services because of increased access to health information and services.
- Men: Participated more in family health and household chores.

Community Members:
- Increased awareness on the importance of facility-based delivery, standards of respectful care and use of complaint mechanisms in case of disrespectful care.
- Youth participated in health committees to advocate for their needs and share information among their peers.
- Community Champions also advocating timely access to services for obstetric emergencies.

Health-providers:
- Started offering ANC services to unaccompanied pregnant women, and not only women with a male partner.
- Started including men in ANC visits, not just the first appointment.
- Developed the use of complaint mechanisms in case of disrespectful care.
- Procedures to improve their knowledge and improve their technical and communication skills through birth simulation education.

Facilitators

Targeting health system and community stakeholders and youth with GESI, MNCH and QI collaboration, the joint implementation of the GESI approach and the QI Collaboration, alongside local innovations, contributed to increased access, utilization, and quality of MNCH services and reduced mortality.

Challenges

At Health system level:
- Challenges faced by health providers in including MNCH and beneficial social norms.
- Women access to resources and dissemination of information.
- MNCH is a priority area, the project focuses on health sector, other areas of health service are not covered.

At Community level:
- Women's participation in health committees is still low, the project focuses on training community leaders to advocate for more inclusive infrastructures.
- Male leadership in MNCH needs to be strengthened.

Lessons Learned

- Integrating GESI into quality improvement approaches for MNCH enables equitable engagement of all stakeholders for health system delivery.
- Women's participation in health committees is still low, the project focuses on training community leaders to advocate for more inclusive infrastructures.
- Male leadership in MNCH needs to be strengthened.

Evidence

Joint implementation of the GESI approach and the QI Collaboration, alongside local innovations, contributed to increased access, utilization, and quality of MNCH services and reduced mortality.

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