



Evaluation Summary

Transforming maternal health in the DRC

Transforming maternal health in the DRC using Medical Aid Films

In 2013, the State of the World's Mothers report declared the Democratic Republic of Congo (DRC) to be 'the world's worst place to be a mother' where 1 in 30 women were estimated to die of a maternal cause¹. In February 2014, the international NGO Food for the Hungry initiated a pilot intervention in Walungu territory in south Kivu, DRC, seeking to reduce such high maternal mortality and morbidity rates by increasing the skills, capacity and knowledge of both health workers and mothers.

Food for the Hungry works in more than 20 countries, focusing on agriculture, health, child development and community transformation. This report summarises findings from a feasibility study of their Nyangezi Maternal Health pilot intervention, where Medical Aid Films content was integrated into their health education and promotional work.

The objectives of the pilot intervention were to:

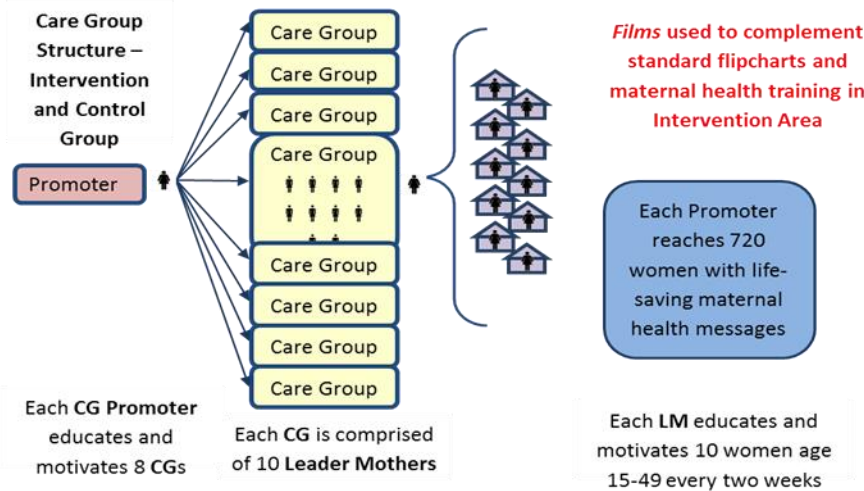
1. Build the capacity of Ministry of Health workers by equipping them with the knowledge and skills needed in providing prenatal, postnatal and emergency obstetric care;
2. Help mothers develop increased understanding of life-saving messages related to maternal and child health and address barriers to adopting healthy pre and post-natal practices;
3. Trial the use of health worker training and community education films to determine if using the emotive and creative power of communication by film complemented current training and health education methodologies by increasing the retention and understanding of key messages related to maternal and reproductive health;



Over the 15 month period, 2,165 mothers/care givers with children under-two years or pregnant women were placed into groups of ten. Each group elected a volunteer Leader Mother (218 in total) who attended bi-weekly sessions (in groups of ten called care groups) with an FH health promotion specialist to be trained how to use participative adult education training methods, such as visual flipcharts, songs and drama, to share key

¹ The DRC is currently ranked second lowest in the Complete Mothers' Index, behind Somalia; *State of the World's Mothers Report 2015*

health messages with their care group members. In addition, 1,700 mothers/ care-givers and 170 Leader Mothers gathered in community spaces to watch film content provided by Medical Aid Films that aligned with topics/ key health messages in the training programme. The films were divided into 5 minute sections with question and answer sessions to reinforce messaging. Pre-elaborated guides helped facilitators to direct discussions and ensure that mothers felt comfortable sharing challenges or barriers to adopting healthy practices. During this period, there were a total of 13,629 care group meetings and trainings.



Proof of concept study

One of the main goals of the study was to understand if using the combined approach of cascade training and film screenings can lead to increased and improved maternal health literacy and adoption of healthy practices. It would also inform future interventions for possible scale up in various projects by gathering the views of project staff and community and health workers re their acceptable of the model.

The evaluation collected quantitative and qualitative data, using

- Baseline and end-line studies around maternal health knowledge and practices, conducted
- Interviews/FGDs at health facility level with health service providers/ community leaders
- Facilitator observations at screenings
- Focus-group discussions with WRA to determine attitudes around IEC materials

The survey also collected data from a smaller group of mothers and Leader Mothers in an area where there were no film screenings and who had only been exposed to adult participative training methods. (This comparison does not purport to constitute a rigorous control trial; nevertheless, results can give helpful indications of potential change in beneficiary knowledge and practice, attributed to viewing Medical Aid Films content and exposure to participative training methods and those attributed to participative adult training methods alone). A representative sample out of the 2,383 direct beneficiaries was identified through a Lot Quality Assurance Sampling (LQAS) methodology for questionnaire administration. The target area was divided into 6 clusters and using a total of 19 beneficiaries per cluster was selected for the questionnaire administration. Therefore, a total of 114 randomly selected respondents were interviewed.

Findings

Data gathered from the surveys showed significant increases in knowledge around ante and post-natal care. The % of mothers who knew at least three dangers of closely spaced pregnancies increased from 0.9% to 47%. There were similar increases in women recognising 4 danger signs to the mother just after birth (6.1% - 57.9%) and 5 dangers signs of illness in the newborn (4.4% - 49.1%).

The evaluation also found that the pilot intervention contributed to increases in adoption of healthy practices around maternal and child health. The % of mothers currently using a modern contraceptive method increased from 2.6% to 21.9% and the % of mothers who had a medical check recommended eight weeks after childbirth increased from 0.1% to 17.9%.

The study also drew the following findings using qualitative methods:

- CHW training using MAF content lead to significant improvement amongst health workers in understanding proper delivery management.
- Staff confirmed their view that the use of film increased men's participation in the health intervention and helped women's decision-making; this is significant in a context where typically maternal health is perceived as a female domain.
- The number of mothers seeking antenatal care has increased significantly due to increased knowledge of danger signs at pregnancy, pre and postnatal care, prevention of malaria and worm infections, sanitation and personal hygiene.
- The zonal health management team recognises that using film has improved and simplified the training of additional health workers in the health zone and will adopt this approach in future trainings.



Study recommendations include further research and extending the pilot project for more evidence of the impact of the approach and dubbing the films in DRC Kiswahili – different to Kiswahili spoken in East Africa.