

Strengthening Demand for Maternal and Newborn Health Services Using the Care Group Model in Burundi and Niger

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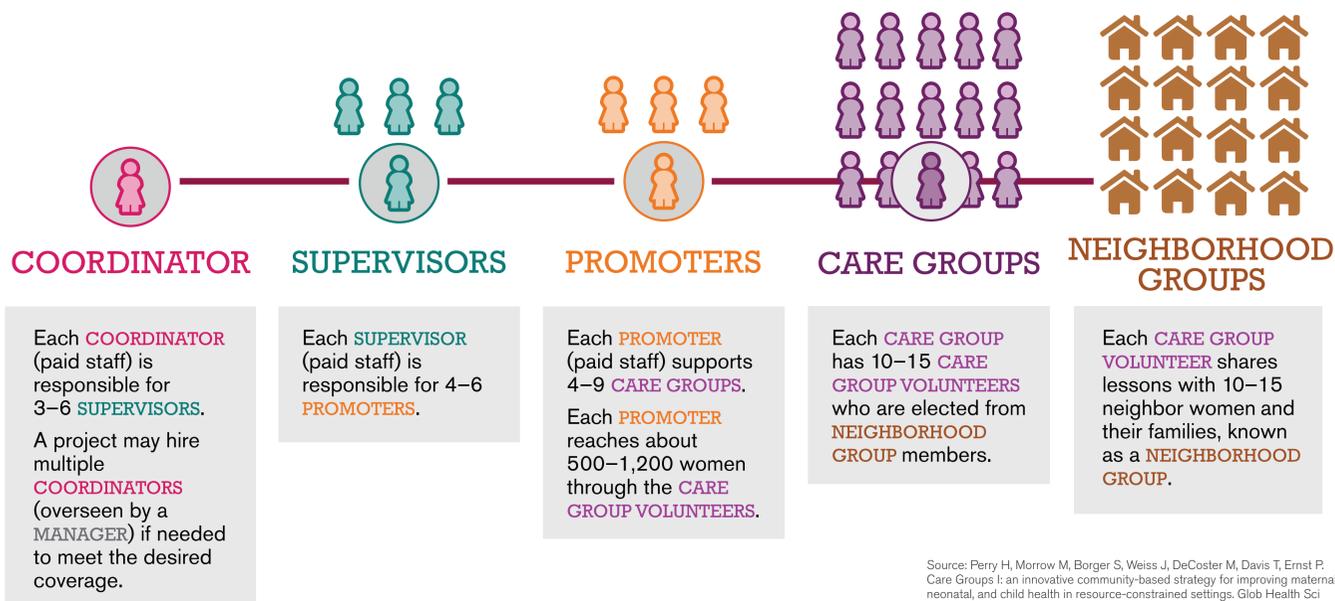
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BACKGROUND

- Paid NGO and government staff alone are not adequate to provide the intensive and consistent support necessary for behavior change messages to take root truly in communities. Creating a network of volunteers to reach many beneficiary households is an ideal solution from a financial and logistical point of view but high attrition and burnout is seen in many volunteer-based programs.
- The Care Group model is an evidence-based strategy for social and behavior change interventions that provides a cost-effective way to organize, train, support, and motivate volunteers.
- The model consists of groups of 10 to 15 volunteer mothers, elected by their community, who conduct monthly home visits with 10 to 15 nearby households and hold peer education sessions to deliver behavior change communication messages and promote the adoption of healthy behaviors.

THE CARE GROUP MODEL



Source: Perry H, Morrow M, Borger S, Weiss J, DeCoster M, Davis T, Ernst P. Care Groups I: an innovative community-based strategy for improving maternal, neonatal, and child health in resource-constrained settings. *Glob Health Sci Pract.* 2015;3(3):358-369. <http://dx.doi.org/10.9745/GHSP-D-15-00051>.

METHODOLOGY

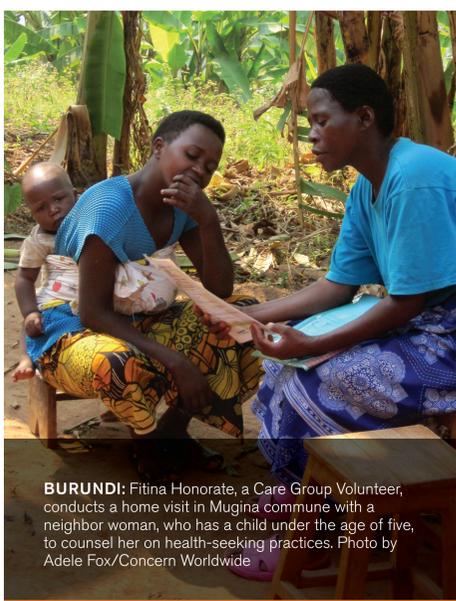
- Between 2008 and 2014, Concern Worldwide established 302 Care Groups with 3,021 volunteer mothers in Burundi and 48 Care Groups with 507 volunteer mothers in Niger.
- The projects invested heavily at the community level to respond to barriers that prevent pregnant women and mothers from adopting healthy practices and from seeking and accessing health care.
- Care Group volunteers (CGV) in both countries conducted home visits on a bimonthly basis to all households with a pregnant woman and/or caregiver to a child under five years of age. Messages shared during household visits varied slightly but both projects used behavior change communication materials to counsel women on improving care-seeking practices and increasing the adoption of key health behaviors.
- Each CGV is supported by networks of relationships that teach, support, encourage, and motivate her. Her primary source of support and encouragement is her fellow women volunteers in the Care Group rather than project staff or material incentives.

RESULTS

- On average, mothers in Niger received 1.32 visits per month from a CGV and 40% also participated in at least one small group education session per month. Over 92% of targeted households in Burundi received at least one household visit by a CGV per month.
- Attrition rates for GCV were very low and qualitative findings showed increased pride by CGV and their husbands and improved status for CGV and mothers in their communities in both contexts.
- Significant improvements in maternal and neonatal health practices were observed:
 - Women using modern contraceptives increased by more than 15% in Burundi.
- Increases in ANC visits were reported in both countries. In Niger, in addition to an increased percentage of mothers attending four ANC visits, more women in general received ANC: 87% at endline versus 65% of women at baseline reported receiving at least one antenatal care visit.
- In both countries, women who delivered with a skilled attendant and those whose child received a post-natal visit within two days of birth significantly increased.
- Both countries were highly successful in improving the practice of exclusive breastfeeding. CGV also successfully improved the practice of immediate breastfeeding (within the first hour and no prelacteal feeds) in Niger.

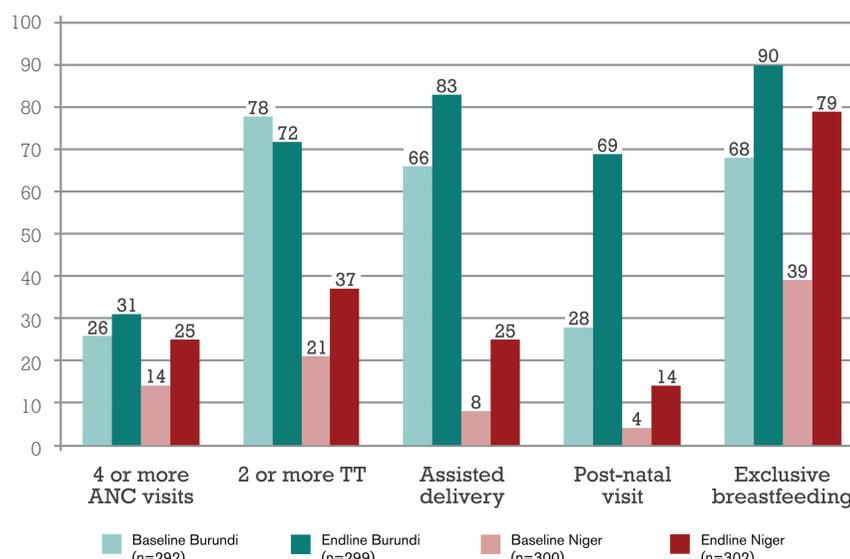
CONCLUSION

Achievements in maternal and neonatal care-seeking practices indicate that Care Groups are a highly effective platform, in diverse contexts, to deliver behavior change interventions and to mobilize women to adopt healthy practices that make meaningful contributions to maternal and neonatal survival.



BURUNDI: Fitina Honorate, a Care Group Volunteer, conducts a home visit in Mugina commune with a neighbor woman, who has a child under the age of five, to counsel her on health-seeking practices. Photo by Adele Fox/Concern Worldwide

Baseline and Final Values for Maternal and Newborn Care Indicators



NIGER: Volunteer Care Group Mother Leaders in Guezza village, Bambeye Commune, Tahoua District. Photo by Jennifer Weiss/Concern Worldwide



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