## LEA MIMBA: "TAKE CARE OF YOUR PREGNANCY"

## A County Innovation Challenge Fund Project implemented by Management Sciences for Health

In 2017, with funding by UK aid from the British people, Management Sciences for Health (MSH) launched the Lea Mimba project to address gaps in the quality of antenatal care (ANC) and to support women's and adolescents' use of maternal and newborn health services in Kakamega County, Kenya. In partnership with the Kenya Progressive Nurses Association (KPNA), and in close collaboration with the County Health Management Team (CHMT), MSH is testing and evaluating a group ANC model—a pregnancy club—that provides a forum where pregnant women can share experiences, receive essential information from a midwife or other skilled provider, and track and better understand the progress of their pregnancies.

In Kenya, less than half of pregnant women complete the four or more ANC visits long recommended by the World Health Organization, and less than half deliver with a skilled birth attendant (Kenya DHS, 2014). Although the health care infrastructure has improved over the past decade, women and adolescents face a range of barriers when accessing care during pregnancy and childbirth, including lack of high-quality care, limited individual and community awareness and support, and low male engagement, among others. In particular, the traditional one-on-one ANC model that is the standard of care in Kenya often does not meet women's and adolescents' needs for information, support, and high-quality clinical care.

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oto by Priyam Sharda/M

Lea Mimba is developing a group ANC model that provides an alternative to traditional ANC. Lea Mimba aims to improve maternal and newborn health in Kakamega County by:

- Increasing women's and adolescents' use of ANC services
- Improving the quality of care and ensuring respectful care
- Supporting healthy behaviors during pregnancy

Incorporating elements of multi-stakeholder dialogue and self-determination, Lea Mimba directly engages women and healthcare providers in co-designing a model that responds to their needs and preferences. In this proposed model, pregnant women and healthcare providers create a ritual to open and close the meeting, engage in facilitated discussions on health topics, and address challenges collaboratively.

Working within the context of existing health policies and the county's vision for improving maternal and newborn health, Lea Mimba creates cohorts of eight to ten women during their first ANC visits based on their gestational age. During group sessions, a nurse facilitates discussion on the importance of self-care, birth preparedness, and delivery with a skilled birth attendant; the group sessions are then followed by routine, one-on-one clinical assessments with the health provider. Community health volunteers encourage women to visit the health facility for their ANC visits and pregnancy club meetings; these volunteers also provide referrals for available income-generation activities and social services.

Lea Mimba pregnancy clubs create safe spaces for women and adolescents to share their experiences, normalize their pregnancies, and encourage their peers to practice self-care and plan for childbirth. These cohorts can provide emotional support, especially to adolescents and young women, during a very stressful and often isolating time; increase women's confidence in the health system; and empower them to demand high-quality healthcare.



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Kakamega County Government