



HEALTHY WOMEN, HEALTHY FAMILIES

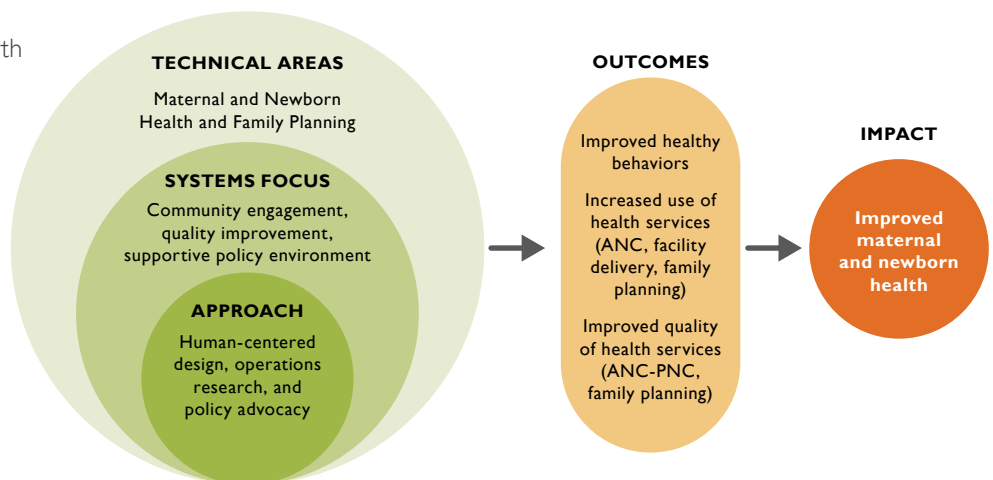
সুস্থ মা, সুস্থ পরিবার

With a dynamic group of partners, Management Sciences for Health (MSH) leads the four-year project Healthy Women, Healthy Families (HWHF) (*Shustha Ma, Shustha Poribar* in Bangla) to increase utilization and improve the quality of maternal and newborn health (MNH) and family planning (FP) services for young Bangladeshi women and their partners in the underserved urban slums of Tongi, Gazipur City Corporation near Dhaka.

Partnering with BRAC, Scope, and the Population Council, MSH is co-designing, implementing, and evaluating group antenatal and postnatal care (GANC-GPNC)—a program for young women and their partners experiencing their first pregnancy. BRAC, a nongovernmental organization (NGO) founded and headquartered in Bangladesh, implements the program and community engagement activities. Scope, a social impact company, is leading the design process to ensure that activities are human centered. The Population Council leads the research and evaluation component of the project. The project is implemented in close collaboration with the Ministry of Health and Family Welfare and the Ministry of Local Government, Rural Development and Cooperatives, which share responsibility for urban health in Bangladesh.

The complexity of delivering MNH and FP services in the densely populated urban slums of Tongi is exacerbated by Bangladesh's deep gender inequities; high rates of adolescent fertility; low levels of reproductive health knowledge; and poor quality and uptake of health services, especially among young people. HWHF aims to provide person-centered, responsive, and culturally appropriate services that will improve the quality, acceptability, and accessibility of care for young women and their children in Tongi; improve birth spacing; and provide evidence to inform future models of care for young women and couples in Bangladesh.

This adaptive approach, co-designed with young women and health workers, complements existing facility-based care with a community platform and social support services to provide married girls and young women with access to critical health information and peer support while helping them develop life skills. HWHF seeks to improve both the clinical quality and the experience of ANC-PNC, newborn health, and planning for healthy birth spacing.



Healthy Women, Healthy Families Conceptual Framework



Photo Credits: MSH and BRAC

FINDINGS FROM BASELINE SURVEY

Among all first-time mothers (FTMs) in the intervention site (n=1,100)

81% received at least 1 ANC checkup from medically trained providers

59% received 4+ ANC checkups from any service provider

64% received at least 1 PNC checkup within 2 days of delivery from a medically trained provider

4% identified at least 3 danger signs of pregnancy

28% received at least 3 PNC checkups within 42 days of delivery from any facility

70% reported delivering at a facility

68% used any modern FP method (6 months postpartum)

16% identified at least 2 danger signs in newborns

UNIQUE FEATURES

- Co-designed through human-centered design
- Focusing on urban health system
- Implemented through NGO partner
- Targeting young first-time parents
- Addressing facility service, community engagement, and quality of care

Key Achievements after 20 Months of Implementation

1,067 FTMs received 4+ ANC checkups from medically trained providers

1,702 FTMs received at least 1 PNC checkup within 2 days of delivery from medically trained providers, and **1,684** newborns received at least 1 PNC checkup within 2 days of delivery

Nearly **4,000** FTMs enrolled in GANC sessions and **600** ANC groups were formed

2,379 first-time fathers participated in GANC sessions

Approximately **200** PNC groups were formed and **1,213** FTMs participated in GPNC sessions

KEY INTERVENTIONS AND APPROACHES

Through a robust and replicable process, HWHF is working with partners, local stakeholders, and district health officials to test a user-centric service delivery model inclusive of ANC-PNC for married (15–24 years) first-time parents.

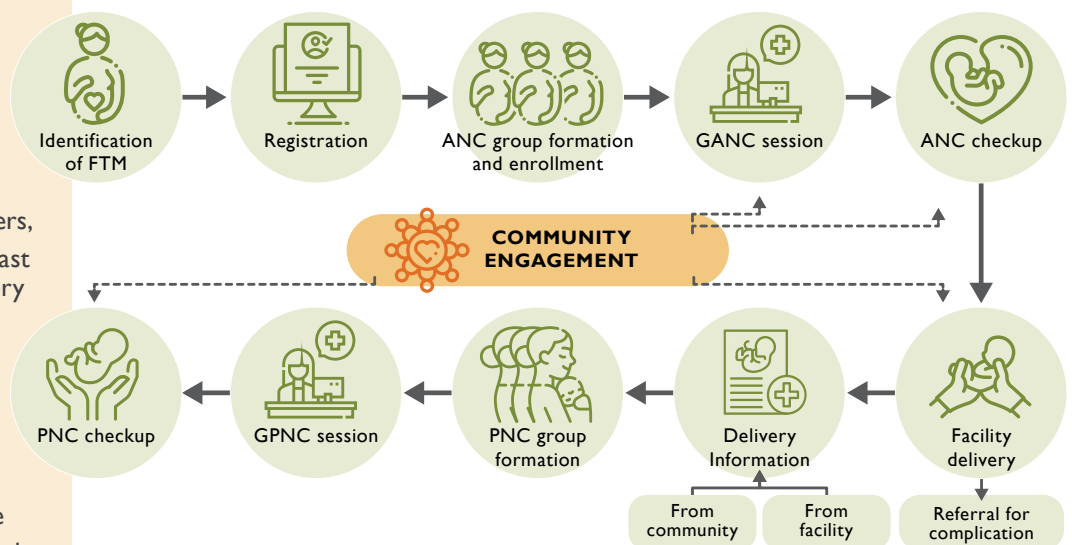
Young first-time pregnant women are identified early at the community level. Following identification, pregnant women are registered and enrolled in groups. Each group consists of six to eight first-time mothers of the same gestational age. Community health workers communicate the key benefits of group sessions during routine household visits and encourage the first-time mothers and their husbands to join the group sessions. Each first-time mother is expected to attend five Group ANC and two Group PNC sessions, while their husbands are expected to attend three sessions (two during the antenatal and one during the postnatal period).

After each group session, first-time mothers are given an individual ANC or PNC checkup. HWHF aims to improve the quality of services. To monitor the quality improvement activities, HWHF collects data on tracer elements of ANC services such as blood tests for hemoglobin and syphilis testing and urine tests for albumin. BRAC Maternity Centers (BMCs) are showing sustainable improvement, and the results are above the median.

To facilitate future scale-up of Group ANC-Group PNC, HWHF is monitoring the implementation of group sessions and quality improvement processes. HWHF continues to share lessons learned and progress and solicits feedback for improvement through local-level advocacy meetings with city corporation representatives, NGO representatives within the BMC's catchment area, health officials working in MNH, and hospitals where BMCs refer cases. To ensure sustainability, the project will continue engaging local leaders and caregivers through several community-based initiatives, including forums and committees. Involvement of local elected officials, representatives from the community, opinion leaders, health care providers, representatives from NGOs, and city authorities in these initiatives will support future implementation and scale-up of the Group ANC-Group PNC approach.



Photo Credits: MSH and BRAC



For more information, contact:

Farzana Islam, Project Director Healthy Women, Healthy Families/Shustha Ma, Shustha Poribar
Email: fislam@msh.org

www.msh.org

@MSH

Management Sciences for Health

/MSHHealthImpact