

The Maternal Health Alliance Project (MHAP): Improving Health through Participatory Governance

About the Maternal Health Alliance Project

Keywords: maternal health, participatory governance, community score card

OBJECTIVE

The Maternal Health Alliance Project (MHAP) aims to identify broadly applicable strategies, approaches and methodologies for systematically improving implementation of evidence-based reproductive, maternal and newborn health (RMNH) interventions.

BACKGROUND

While cost of services and distance to health facilities are often cited as key barriers to women's access to maternal health services, in fact, research shows us that perceived quality, poor relationships with health workers and lack of male involvement are often more critical barriers to service use (Mullany et al, 2007; Kruk et al, 2009). The Community Score Card provides a simple but powerful means of resolving many of these persistent issues by improving communication and enabling partnership among women, healthcare providers and male partners.

STRATEGY

CARE's approach to participatory governance brings together the community and the health care providers, as well as key stakeholders from the local and district authorities, in a mutual process of identifying needs, concerns, and barriers. To facilitate this process we use a tool called the Community Score Card (CSC), an internationally recognized participatory governance tool developed by CARE Malawi. The CSC approach brings together these groups to identify service utilization and provision challenges, and to mutually generate solutions, and work in partnership to implement and track the effectiveness of those solutions in an ongoing process of quality improvement. The CSC consists of 5 phases: I- Planning and preparation, II- Conducting the Score Card with the community, III- Conducting the Score Card with service providers, IV- Interface meeting and action planning, and V- Action plan implementation and monitoring and evaluation. The CSC is an ongoing approach and is repeated every 6 months.

Progress at a Glance





Barriers to women's and newborns' health identified and tackled by



3+ Rounds of the Score Card process implemented



64

Community Action Groups formed to carry out locally developed solutions to address barriers identified through the Score Card process



Program Name: The Maternal Health Alliance Project

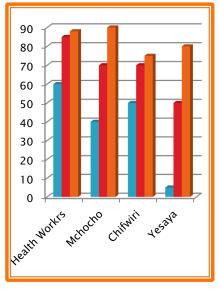
Program Country:

Malawi (Ntcheu province)

Timeframe:	2012-2015
Donors:	Sall Family Foundation

Quantifiable results from MHAP:

How users scored their relationship with providers



(Left: baseline, Middle: 6 months, Right: 1 year)

So many more women began visiting the health center in Yesaya that the **number of health** workers had to be increased to meet the demand.

CARE'S EVALUATION PLAN

CARE is using a cluster-randomized control design to evaluate the effectiveness of the CSC in Malawi. Health centers (and their surrounding catchment areas) are randomly assigned to treatment or comparison conditions. The evaluation includes 10 intervention and 10 comparison clusters. The evaluation consists of a women's survey, a health worker survey and a medical chart review at baseline (2012) and endline (2015). Outcomes of interest include: Women's and communities' empowerment to participate in quality improvement efforts, as well as access and utilization of RMNH services; Health workers' empowerment and their responsiveness, effectiveness, and accountability to communities' needs; and RMNH coverage, quality and equity.

STORIES OF SUCCESS

Community Action Groups have formed throughout the district to take matters into their own hands and improve maternal health services. In one group in the Nsipe area, a group of women got together to form a **Village Savings and Loans Association**, economically empowering women and giving them the financial freedom to access health services. These women have also developed a **'Social Fund'** to other community members, enabling them to access health services when needed. In Kasinje area a Community Action Groups **constructed a home** for their Community Health Worker so the health workers could better serve the community.

EXPANDING IMPACT

- CARE has formed a solid partnership with the **Ministry of Health** with the aim of convincing the Ministry to support the Score Card's scale up in Malawi.
- CARE is partnering with **media allies**, such as the national newspaper, to spread the Score Card story.
- Staff from **USAID** received training from CARE to roll out the Score Card in Dowa, Malawi where identification and removal of a community sanitation barrier garnered attention for the Score Card.
- Prominent forums, including **Family Planning 2020** and the **Woodrow Wilson Center**, have asked CARE to share the successes of the Community Score Card with aims to expand.

CONCLUSION

As a result of the successes in the Ntcheu region, CARE has aimed to mainstream the Community Score Card approach across all 17 projects in Malawi. Additionally, the Malawi Maternal Health Alliance team, CARE USA & CARE International UK have served as 'Community Score Card expert consultants' both within CARE & beyond, providing technical support to a broad range of internal and external partners to accelerate maternal and newborn health progress in their context. For example, we worked with CARE India to develop a new approach to tackle health barriers using learning from the Maternal Health Alliance Project. Under this collaboration in India alone, we have the potential to amplify MHAP's impact to another 104 million people.

RESOURCES

Maternal Health Alliance Project on the SRMH Wiki page: <u>http://familyplanning.care2share.wikispaces.net/Maternal+Health+Project</u>

"With the coming of the Community Score Card the health workers are responsive, they are caring, they are taking care of the patients. That is what we have been wanting for a long time."

--Reproductive Health Director, Malawi, MOH

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