



Promising Results: Care Groups, Respect for Women, and Gender Based Violence

FH/Mozambique Care Group Project

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Mozambique Child Survival Care Group Project Background

- October 2005 – December 2010.
- \$3.0 million funding (USAID CSHGP + match)
- 1.1 million people served in 7 districts of Sofala Province (~220K beneficiaries)
- Main Staff: 5 Supervisors, 65 paid Promoters (CHWs) and 4,095 Care Group Volunteers (VCHWs)
- 325 Care Groups established during the project



What are Care Groups?

A community-based strategy for improving coverage and behavior change



- ❑ Different from typical mothers groups: Each volunteer is chosen by her peers, and is responsible for regularly visiting 10-15 of her neighbors.

- ❑ Developed by Dr. Pieter Ernst with World Relief/ Mozambique, and pioneered by FH and WR for the past decade. Now used by at least 22 organization in 20 countries.
- ❑ Focuses on building teams of volunteer women who represent, serve, and do health promotion with blocks of <15 households each

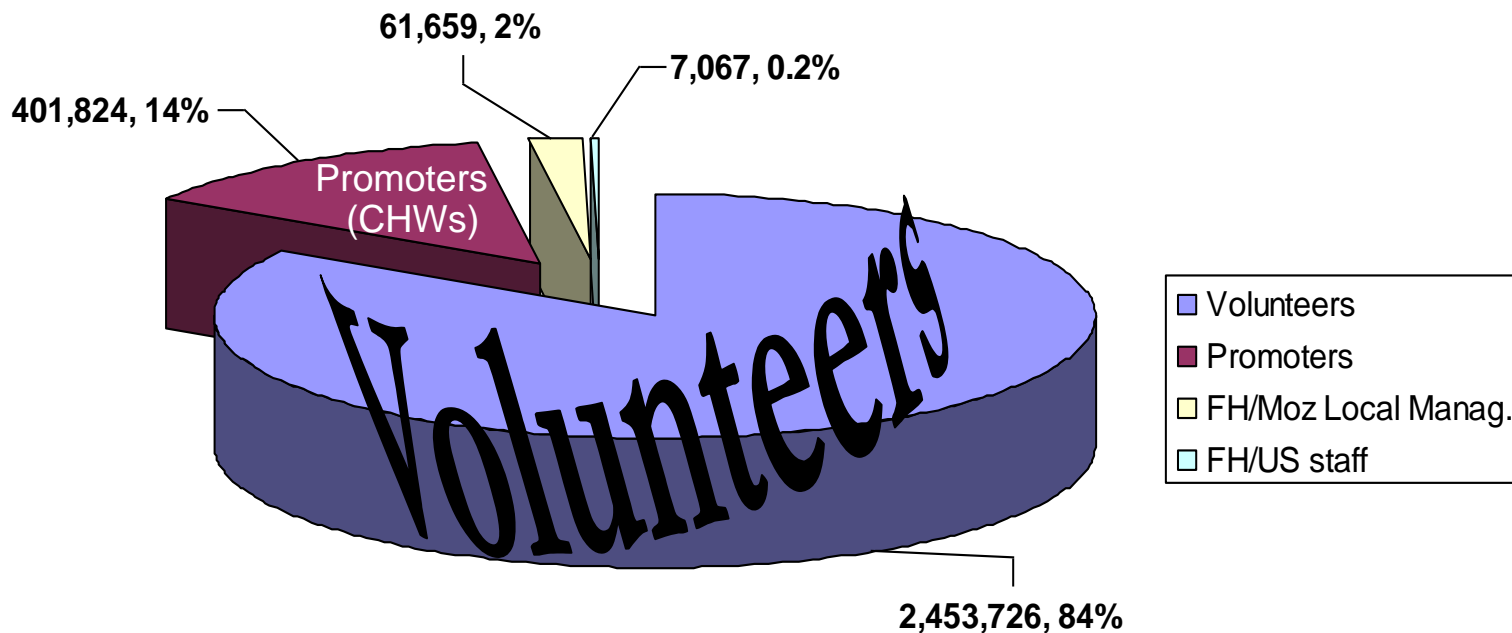


Time Contribution (in hours) of Volunteers and Other Project Staff

October 2005 – September 2010

Community driven ...

Hours Dedicated to FH/Mozambique Care Group Project
Sofala Province, Mozambique (Oct '05 - Sept '10)



84% of the work was done by Care Group Volunteers, and 98% by community members (CGVs + paid local CHWs).

Total value of volunteer time (@\$2.98/8hrs) = \$904,811



Question

Does participation as a Care Group Volunteer require too much of women?

Examined:

- **Drop-out rate of volunteers**
- **Attendance at meeting with Promoter**
- **Contact with beneficiary mothers and health facility staff**
- **Qualitative and quantitative inquiry into participation by volunteers (e.g., benefits)**
- **Accepting attitudes regarding GBV**



Evidence of Motivation of CG Volunteers

- **CG meetings are regular & high attendance of CG Volunteer participation in CG Meetings:** 98% of CGVs attended a CG meeting in last two weeks. 84% of CGVs state they attended most or all CG meetings.
- **High levels of beneficiary mother contact by CGVs despite 100% volunteer status:** Proportion of mothers who reported having contact with a CGV in past two weeks was consistently higher than 90% (in five separate measurements).
- **CGVs meet with Health Fac. Staff:** 65% of CGVs met at least semiannually with health facility staff.



Evidence of Motivation of CG Volunteers

- **High retention of 4,336 CG Volunteers:** ~5% turnover of Care Group Volunteers each year (and ~4% turnover of Promoters). Top two reasons for CG Volunteers turnover: Moved to a new area (30%) and busy working on farm (16%).
- **Only 0.04% of CG Volunteers quit due to lack of incentives.**
- **Retention related to how CG Volunteers chosen:** 44% elected/selected by beneficiary mothers. These peer-elected Volunteers were 2.7 times more likely to serve for full LOP (*OR = 2.7, CI: 1.19-5.99, p = 0.009*)



Several Sources of Motivation mentioned by Care Group Volunteers

(Mentioned during O.R. and final evaluation)

- CGVs want to help others and be useful in their communities. (*Purpose*)
- CGVs learn new things. (*Mastery*)
- Community Leaders' public **recognition** and praise of the CGVs during community meetings.
- Feelings of **pride** in the fact that the community recognizes their work, trust them and seeks advice from them.
- CGVs say their **husbands are happier** that they are learning new and helpful things, that their houses are cleaner, and that their children are healthier.



Motivation via Changed Relationships: RESPECT

% of CGVs who say they have gained more respect from [each group] since they began participating in the project (n=200)	% of CGVs
... from health facility personnel	25%
... from their extended family	41%
... from their parents or husbands' parents	48%
... from their husbands	61%
... from their community leaders	64%
... from their mothers / other women / mother beneficiaries	100%
% of mothers who say that it is okay for a husband to hit his wife if he is not satisfied with her: Baseline, All mothers of children 12-59m	64%
% of mothers who say that it is okay for a husband to hit his wife if he is not satisfied with her: Final, mothers of children 0-23m	34% (CI:27-41%)
% of CGVs who say that it is okay for a husband to hit his wife if he is not satisfied with her: Final, Care Group Volunteers (all women)	3%
% of mothers who said daughters usually attended educational session	49%



What about sustainability??

- The plan: Interventions phased in then responsibilities slowly shifted from project-paid Promoters to Care Group leaders.
- WR Data: 93% of the 1,457 volunteers active at the end of WR's Care Group project (in Gaza Province) were active 20 months after end of project.
- 92 LMs left their post or moved out; 44 died.
- Out of these 132 vacant roles, communities selected 40 replacements and trained them on their own.
- Changes brought about in the original program were maintained: A full 30 months after the end of the project (all interventions and funding ceased), final program goals on eight key indicators continued to be exceeded.

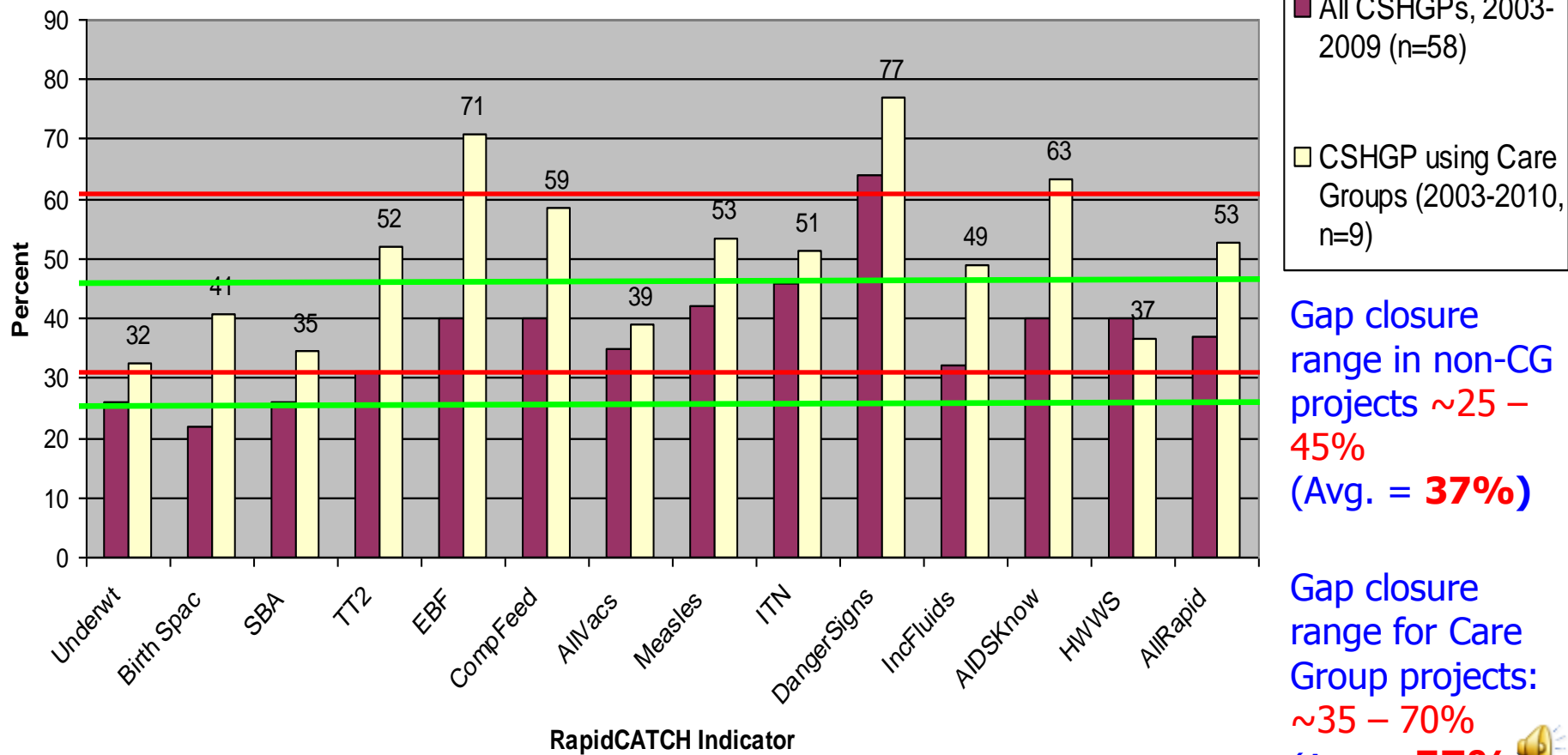


Cost-Effectiveness

- Total estimated lives saved (LIST) during LOP: **6,522**
- Cost per life saved: **\$464**
- Cost per beneficiary per year: **\$2.75**
- Care Group Volunteers enthusiastically said they planned to **continue** their life saving work after FH pulled out (in Dec 2010).

Care Groups Outperform in Behavior Change: Indicator Gap Closure: CSHGP Care Group Projects vs. Non-CG Project Averages

Indicator Gap Closure on Rapid Catch Indicators:
Care Groups CSHGP Projects vs. Non-CG CSHGP Projects



For more information, manuals, etc:

■ www.CareGroupInfo.org





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