Assessing the effectiveness of community-based continuous quality improvement for maternal and neonatal health in Ethiopia

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Project Partners

This research project was coordinated in conjunction with the Maternal and Newborn Health in Ethiopia Partnership (MaNHEP). Under the leadership of the Ethiopian Federal Ministry of Health, MaNHEP is working to strengthen implementation of Ethiopia’s Health Extension Program by building skills of frontline health workers and developing the systems needed to deliver quality maternal and newborn health care.

A full list of partners includes:
- Maternal and Newborn Health in Ethiopia Partnership (MaNHEP)
- Ethiopian Federal Ministry of Health (MoH)
- Emory University
- Bill & Melinda Gates Foundation
- University Research Co., LLC
- John Snow Research and Training Inc.
- Addis Ababa University

Outcomes to Date

Summary of baseline characteristics of women who had a pregnancy in the year prior to the survey and of frontline health workers is shown in Table 1 and Table 2.

Additional analyses will be performed to create indices of baseline knowledge of misoprostol use and postnatal care visits, including trust in various frontline health workers for providing this care.

Other expected outcomes include a model which will identify key factors associated with increased use of misoprostol immediately after the delivery of the placenta and a postnatal care visit by a Health Extension worker within 2 days after delivery.

Furthermore, qualitative data analysis will elucidate QI Team’s self-identified factors for success, as well as Woreda Health Office and MaNHEP staff members’ perspectives on increasing access to quality care.

Progress to Date

- Ongoing literature review of community-based MNH interventions and collaborative quality improvement
- Conducted, translated and transcribed:
  A. 6 Quality Improvement Team focus group discussions
  B. 2 MNH Specialist focus group discussions
  C. 6 key informant interviews with Woreda Health Office and Health Unit QI Coaches
  D. 6 key informant interviews with MaNHEP staff
- Created three project databases and conducted field training in staff use:
  A. Community MNH Checklist Data
  B. QI Team Change Ideas
  C. Project Indicator Database

Populations Served

MaNHEP works in 51 kebeles (total population ~255,000) in 6 woredas (districts) in Amhara and Oromiya regions of Ethiopia.

MaNHEP targets pregnant women and newborns, as well as community members, frontline health workers (FLWs) and various newborns, as well as community members, frontline health workers (FLWs) and various mother-in-laws, husbands, pregnant women.

Project Goals

The specific aims of this research project are:

A. To elucidate the key factors for success of MaNHEP community Quality Improvement (QI) Teams, as well as the key factors inhibiting success.

B. To assess if QI teams’ activities are correlated with documented improvements in maternal and newborn health indicators.

Project Timeline

- October 2010: Began employment and project planning with MaNHEP.
- March 2011: Finalized proposal project
- May 2011: Conducted database trainings in Bahar Dar and Addis Ababa, Ethiopia
- June 2011: Trained research assistants and conducted qualitative field research in Oromiya region; attended Oromiya Mini Learning Sessions and MaNHEP Planning for Spread Workshops.
- July 2011: Trained research assistants and conducted qualitative field research in Amhara region; aided in Database Entry Clerk hiring and training, database management system implementation
- August 2011: Attended Learning Session 1, finalized translations and transcriptions
- September-October 2011: Ongoing technical support, data collection and analysis

Table 1: Characteristics of women who gave birth in the year prior to the survey by region

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<thead>
<tr>
<th>Characteristic</th>
<th>Amhara</th>
<th>Oromiya</th>
<th>Total</th>
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<tbody>
<tr>
<td>Age (years)</td>
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<tr>
<td>Marital status</td>
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<td>Education level</td>
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<td>Occupation</td>
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Table 2: Characteristics of frontline health workers, by type and by region

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<thead>
<tr>
<th>Characteristic</th>
<th>Amhara</th>
<th>Oromiya</th>
<th>Total</th>
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<td>Age (years)</td>
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<td>Education</td>
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<td>Experience length</td>
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<td>Qualification</td>
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Next Steps

- Ongoing data management, cleaning and reporting of monthly indicators
- Qualitative data coding and analysis
- Creating kebele-level indices of knowledge and FLW trust based on baseline questionnaires

Acknowledgements

Many thanks to all my family, friends and professors who have supported me.

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- School of Public Health