



IMPACT STORIES

The Integrated Family Health Initiative (IFHI): Improving Maternal, Child and Newborn Health in Bihar, India

OVERVIEW Bihar, India's third most populous state, has seen significant improvements in the health and well-being of its population in recent years. Yet despite the advances made, Bihar remains one of India's poorest states, and has some of the country's highest rates of maternal, neonatal and infant mortality, as well as high prevalence of malnutrition and stunted growth and high fertility rates. Extreme poverty, gender and social inequality, low literacy rates and early marriage further compound Bihar's reproductive health crisis. With funding from the Bill and Melinda Gates Foundation, CARE is supporting the Government of Bihar to increase the universal coverage and quality of life-saving interventions in order to improve the health and survival of women, newborns and children during the first 1,000 days - from conception to the child's second birthday.



Mobile Technology

Bringing Information to the finger-tips of Frontline Health Workers

In places like Bihar, where nearly one-third of rural households do not have access to any government health care services, innovative solutions for bringing quality health care services to the doorsteps of families are needed. To tackle this gap in services, CARE India introduced mobile technology to aid frontline health workers (FLWs) in registering and tracking patients, managing care, and counseling pregnant women and mothers with newborns. With the aid of this technology, the health workers completed over 275,000 home visits in two years! Home visits by the FLWs during critical times of care also improved—at least two visits during the antenatal period increased by 10% and visits within a week of delivery by 13%. Just as importantly, the mobile phones were quite motivating for the frontline workers – they reported that the phones heightened their value and credibility in the community and that mothers were more likely to listen to their counsel. Further, the tool helped them do their jobs better as having the information at their 'finger-tips' dramatically improved their confidence and decision-making abilities.

"I feel proud using this with women in my village. It increases my value in their eyes."

-ASHA, Nado

"My ability to convince mothers has improved greatly with the mobile phone."

-AWW, Barasher

"We are able to complete substantial work in a short time."

-FLW, Nariyar

Labor Room in Aliganj: Before and After



Quality Improvement

Empowering facility staff for creative solutions

Bihar's public health system faces serious deficits in the delivery of primary and emergency maternal health care services through its facilities due to poor infrastructure, an absence of essential supplies and equipment, and an acute shortage of trained providers. Yet, approximately 60-70% of all mothers in Bihar now deliver in public facilities. To improve the situation, CARE established quality improvement teams to develop fully functional facilities. The quality improvement teams consisted of everyone from the doctor to the sweeper -- empowering all facility staff to be a part of the process for identifying issues and solutions.

These teams conducted self-assessments to identify gaps in human resources, supplies, infrastructure and staff capacity, as well as assessed the facility's "readiness" to provide basic and emergency maternal and newborn care. The teams then developed improvement plans which they reviewed regularly. Many of the initial actions the teams took were cosmetic improvements – painting walls and organizing the facility layout – above you can see some of the dramatic changes in one labor room. But these simple actions had significant impact. Facility staff reported the improvements enhanced their pride in their place of work and increased their motivation. Clients also reported feeling more welcomed and respected – which we know is a driver of service utilization among women.

Evidence from observations before and after the intervention have shown improved quality of services (clinical and counseling), increased availability and reliability of supplies and equipment and improved infrastructure. For example, correct administration of oxytocin for AMSTL increased by 50%; skin-to-skin care initiated in labor room by 23%; availability of fresh hypochlorite solution by 30%; and functioning elbow taps by 42%.

Team-Based Goals and Incentives

Utilizing lessons from business for better health

In Bihar there are two cadres of community health workers that are supposed to be serving the same clients, yet these two groups often do not coordinate or collaborate with each other. So, we did something that honestly no one thought was possible... we drew from the business world and developed an innovation that aimed to strengthen the teamwork and motivation of the front line health workers, called Team-Based Goals and Incentives. The intervention had the two cadres work together to set and achieve monthly service delivery targets, such as newborn care home visits, and then jointly track and monitor their progress. Those teams that achieved their collective targets received a small non-financial reward, usually a household item that they chose, *and* they were recognized publically with a certificate.

The photo of the woman here was taken after one of



the public recognition ceremonies. This frontline health worker was on the verge of retirement and she told us that throughout her entire career she had never received any kind of recognition for her work. Rather, her superiors criticized her, the clients ignored her counsel,

and her family questioned why she continued for such little pay. But as a result of this intervention her esteem amongst her clients, colleagues and family rose. She said, that the award and certificate she received validated her entire life's work.

This story highlights what we found through our research as well, that the intervention successfully addressed several key elements of the working environment and improved teamwork and job satisfaction among front line health workers. We also found changes in performance - intervention frontline health workers, conducted more and higher quality joint home visits – and importantly, clients demonstrated improvements in health-related behaviors, such as age-appropriate feeding.