



Integrated Family Health Initiative *Team Based Goals and Incentives*

PROJECT: *Integrated Family Health Initiative*

Bihar is one of India's largest and poorest states with over 100 million people. It is home to some of India's highest rates of maternal, neonatal, and infant mortality, which are caused and exacerbated by extreme poverty and social inequality. Recognizing these persistent gaps, the Integrated Family Health Initiative (IFHI) was launched in 2011 to address these disparities with support from the Bill and Melinda Gates Foundation. The objective of IFHI is to support the government of Bihar to increase the universal coverage and quality of life-saving interventions 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.

INNOVATION: *Team Based Goals and Incentives*

Health worker effectiveness depends not only on skills and capacities, but also on motivation and commitment to provide quality services. In Bihar, frontline health workers provide essential, first-line health services for many of the state's poorest citizens. Yet, there is a shortfall of motivated and skill providers. To solve this challenge, CARE designed an innovation, Team Based Goals and Incentives (TBGI), aimed at strengthening the teamwork and motivation of frontline health workers through the setting of collective targets and recognition of successful teams on a quarterly basis with a small, non-financial reward.

STRATEGY

There are two cadres of community health workers in Bihar that often serve the same members of a community but do not coordinate or collaborate with one another. TBGI facilitates the forming of a 'team' comprised of workers from different cadres: Accredited Social Health Activists (ASHAs) and Anganwadi workers. These workers come together under the leadership of an Auxiliary Nurse Midwife of a particular health sub-center to improve outreach services in the areas of maternal and neonatal health. Teams then set and achieve monthly service delivery targets, such as newborn care home visits, and then jointly track and monitor their progress. Teams that achieve their collective targets receive a small, non-financial reward, usually a household item they choose, and are publicly recognized with a certificate.

This teamwork approach not only ensures better coverage and higher quality services for clients, but the increased cooperation and shared responsibility between the cadres contributes toward leadership development, opportunities for peer learning, experience sharing, and confidence building. Incentivizing frontline health workers as a team has never been tested before in the Indian context.

Program Name:

Integrated Family Health Initiative (IFHI)

Program Country: India

Timeframe: 2011-2018

Donor:

Bill & Melinda Gates Foundation



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TBGI has also contributed to women’s empowerment. As a team, the frontline health workers have equal access to participation, decision making, and skill development for self-sufficiency. Eventually, the community also starts recognizing and appreciating the frontline health workers, who were once marginalized in their own community. The frontline health workers soon acquire a sense of pride in their profession, reinforcing the very reason for becoming health workers.



RESULTS

TBGI was piloted in 76 health sub-centers in the district of Begusarai, Bihar. After two years of implementation, the TBGI intervention improved the quantity and nature of frontline health worker- household interactions relative to the standard package of interventions. Women who had recently given birth in the TBGI intervention areas were more likely than those in nonintervention areas to receive home visits from frontline health workers during their pregnancy and immediately after delivery, as well as visits specifically related to child feeding and reproductive health. The results from surveys conducted with frontline health workers suggest that these changes were facilitated by a substantial change in coordination and collaboration among the frontline health workers in keeping with the team-based focus on the intervention.

Indicators	Treatment Area	Control Area
Exclusive breastfeeding	71%	61%
Initiation of complementary feedings (cereal-based semi solid food)	55%	46%
Use of modern contraceptives	26%	15%
Received DPT3	73%	67%

Table shows results of randomized control trial after 1 year of implementation. [Evaluation](#) conducted by Mathematica Policy Research.

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For more information on this project, visit:

<http://familyplanning.care2share.wikispaces.net/Integrated+Family+Health+Initiative>

