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What is MCSP?

The Maternal and Child Survival Program (MCSP) is a global, USAID Cooperative Agreement to introduce and support high-impact interventions, with the ultimate goal of ending preventable child and maternal deaths. In Laos, MCSP is integrated within the Save the Children Primary Health Care (PHC) program, working in partnership with the Ministry of Health (MoH) in Luang Prabang provincial hospitals, five district hospitals in each province and five health centers in each district. In this issue, we highlight the first step in the process of developing a community mentoring approach. The aim is for health center midwives to build skills and provide supportive supervision to community selected volunteers. The volunteers will be mobilized to do home visits to 1,000 day families and facilitate peer group discussion as part of a broader health and nutrition program



Community mentoring for maternal newborn health

COMMUNITY MENTORSHIP

WHAT? Mentorship is learning by doing together in practice
WHO? Community mentors are health center midwives who will train and support community selected volunteers.
WHEN? Quarterly HC and community meetings and other identified opportunities
WHERE? In selected HC in 5 districts, rolled out in phases
HOW? HC midwives provide initial skills building to volunteers followed by quarterly skills practice
WHY? Mentoring provides a model of supportive supervision and continuous skills building



Training of Trainers

Seven district trainer mentors were selected as trainers for the HC midwife workshop. Together with three PHO facilitators participated in a TOT which included developing their skills for SBCC and counselling for teaching health center midwives. The concepts of behavior change were new for them and as health professionals they are more familiar with health education so making transitions to participatory counselling was a challenge. In addition, the trainers mentioned they would have liked more time to develop their own teaching and training skills, for example planning lessons and role-plays as they have less experience of this.

Health center midwife training

Five HC midwives from each district joined the 5-day workshop with a total of 25 HC midwives. They considered current good practices in the community and those that need improving and then considered their own behavior they would like to change and motivators and barriers to this. The two main skills that were practiced were home visit and facilitating peer groups and these skills were practiced in small groups of five as role-plays. In addition, use of job aids and the breastfeeding demonstration doll were included as were knowledge on danger signs for mother and newborn. At the end of the five days the HC midwives began to understand differences between health education and behavior change techniques but will need further support and development of skills to train volunteers.

Next steps

HC midwives will begin to use their new skills in the quarterly HC and Volunteer meetings at the HC. Later next month when the community has selected the volunteers, workshops will be arranged in the districts and HC midwives will take the lead to train the new cadre of volunteers. Prior to this the MCSP team together with the district trainer mentors will spend two days with the health center midwives for preparation. This is a new role for HC midwives but by adopting a mentoring approach we are confident they will be successful in coaching and supporting volunteers in the community.

Photo Captions: (consent was given for photographs)

Photo 1 Top: Group photo

Photo 2: Training of trainers- practicing peer group facilitation

Photo 3: Health center midwife training – role play demonstration

Photo 4: Health center midwives with breastfeeding demonstration doll

Photos by SCl team