Engaging policy makers in research on inequalities in maternal and newborn health

EquiNaM

building evidence to support equitable improvement in newborn and maternal health

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Background: evidence gap

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Unfortunately, **little** is known about:

- **how to** effectively **reach** poor and otherwise disadvantaged groups
- **how to address** socio-economic inequalities in mortality
- Where **effective interventions** are known, they **rarely reach** those who who need them **most**

Our approach

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To support equitable improvements in newborn and maternal health we integrate:

Research

generate evidence using high-quality data collected in cluster randomised controlled trials

and

Stakeholder engagement

learn from & engage with stakeholders to support uptake of our newly generated evidence base

Our research

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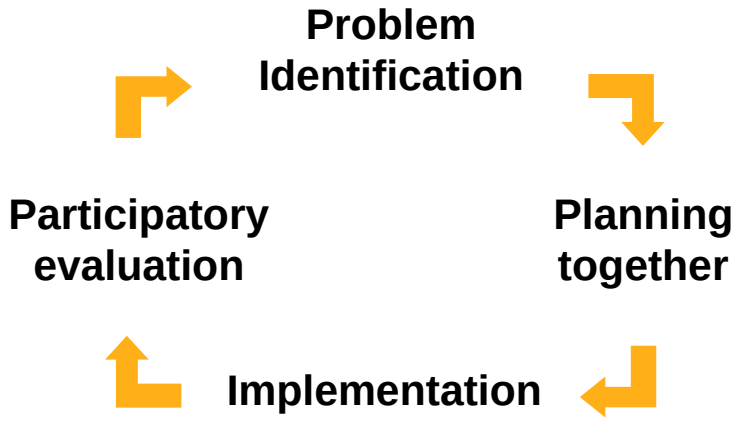
Cluster RCTs of women's group interventions working through participatory learning and action cycles in **India (2), Nepal (2), Bangladesh (1), Malawi (1)**

37% reduction in maternal mortality and **23%** reduction in neonatal mortality (*Prost et al. Lancet 2013*)



Research questions

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Quantitative and qualitative research to understand:

1. What were the socio-demographic and socio-economic differences in attendance in women's groups?

- Secondary analysis of trial data
- Combined population > 2 million
- Prospective surveillance of birth outcomes through post-partum interview

2. Where there were differences, why was this the case, and how can these be changed?

- Purposive sampling of women attending/not attending groups, focus group discussion & interview

Research questions:

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3. What are the differential effects of the women's group intervention on Neonatal Mortality Rates among lower and higher socio-economic groups?

- Secondary analysis of trial data from 4 cRCTs having impact on neonatal mortality

4. Where there were differences or similarities, why was this the case, and how can this be changed/maintained?

- Purposive sampling of those affected, interviews FGDs

Stakeholder engagement Methods

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Engaging with and learning from stakeholders to:

- draw on **experiential learning** regarding:
  - what works to reach lower socio-economic groups
  - how to reduce inequalities in newborn and maternal health.

- **increase awareness** about the large inequalities in maternal and newborn mortality
- **increase uptake** of evidence

Stakeholder engagement

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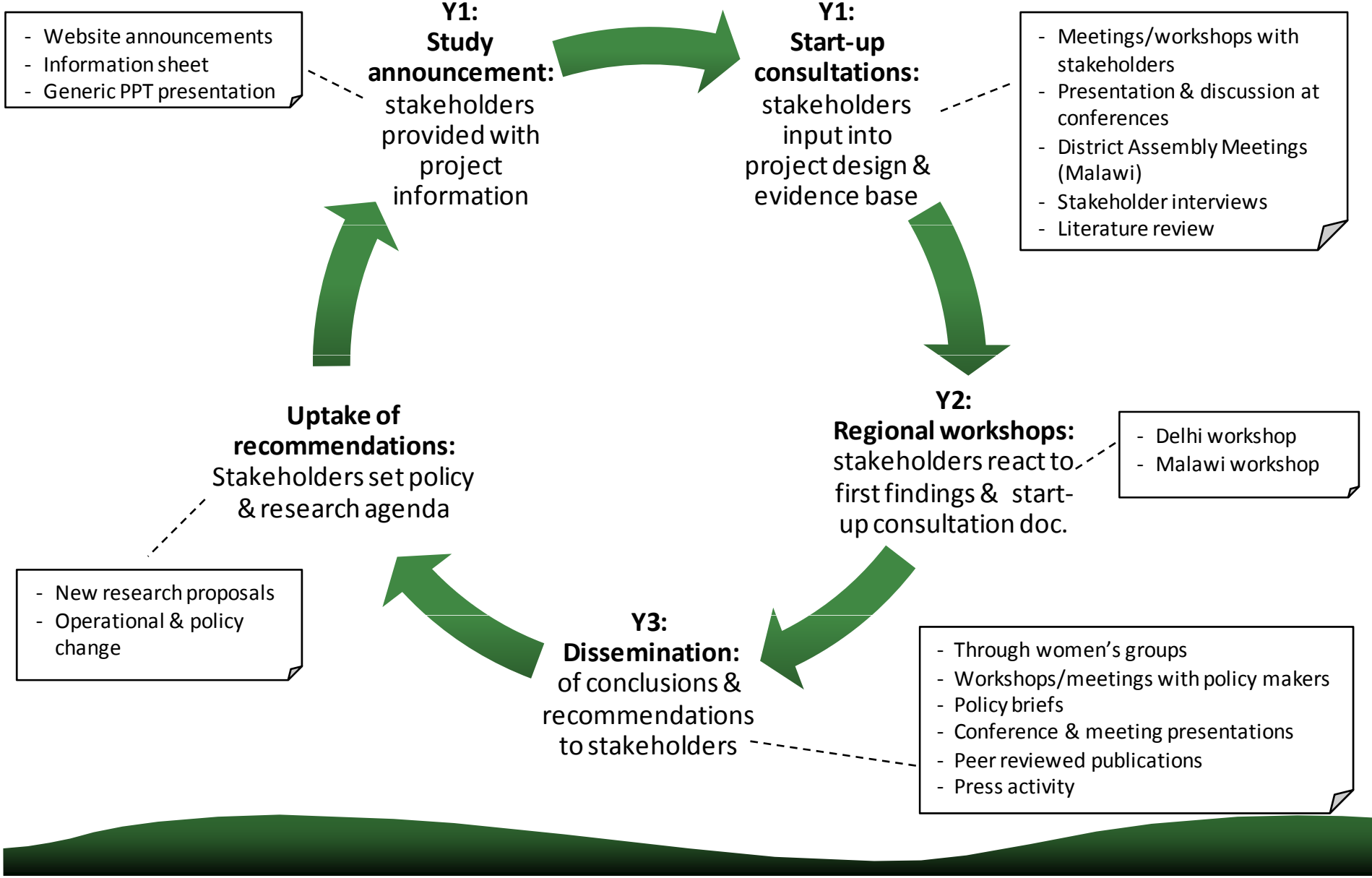

Stakeholder engagement

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Year 1: Start-up consultations (March-May 2012)

Main objectives:

- to **incorporate learning** from stakeholders regarding what works to ensure an equitable achievement of MDG4 and 5;
- to **build a platform** for ongoing engagement.

Methods:

Purposive sampling at each site of stakeholders for roundtable discussions (n = 7 round tables)

Purposive sampling at each site for semi structured telephone interviews (n = 11)

We asked:

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In your experience…

- What works to address inequalities?
- What are the barriers to reducing inequalities in maternal and newborn health?
- Where are the evidence gaps?

Data management and analysis

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- Written consent to participate, some gave consent to be identified
- Data from interviews were transcribed verbatim
- Roundtable discussions were minuted, and reports made of the minutes, some recorded
- Reports were circulated to participants who found no discrepancies

Participants

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- Round table discussion participants from:

NGO/INGO (60); Bilateral donors (2); Academic (5); Local and national government (13); Other (10)

- Interviews

Government (1); INGO/NGO (5), Bilateral donor (2); Academic (3)

Results

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- Results were more similar for rural sites of Nepal (Dhanusha and Makwanpur), Bangladesh, India(Jarkhand and Orissa), and Malawi.
- There were some different results from the urban Indian site (Mumbai)
- There was triangulation between the data coming from interviews and focus group discussions

What works to reduce inequalities?

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- Taking services and activities to the community, working directly with the marginalised
- Engage the community in planning and implementing programmes

- Free/subsidised programmes
- Many examples shared, which we documented and shared with participants

What are the barriers to reducing inequalities?

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- Who are the marginalised?
- Universal vs Targeted
- Lack of decentralisation
- Geography, scattered populations
- Low quality of care
- Lack of awareness of entitlements, and lack of awareness about what is good for health

What are the barriers to reducing inequalities?

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- Discrimination and social hierarchy (particularly in Asian sites)
- Lack of co-ordination among NGO and government, lack of disaggregated data, difficulties in identifying the marginalised

Where are the evidence gaps?

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- Routine monitoring and sharing of data - barriers to writing down what works and how
- Disaggregated data to monitor the impact of programmes on the marginalised
- Effect of interventions at scale
- What works to motivate health workers?
- Few sites: what is the impact of involving men in maternal and newborn health discussions?

Limitations

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- Barriers to addressing inequalities are not necessarily addressed by research – structural constraints
- Engage those already interested in the issues

 - strengths and weaknesses

- Limited involvement of government officials and public health practitioners, health workers
- Women and families were not integrated – separate data collection with them to explore secondary trial analysis
- Didn’t take things forward immediately – who will continue past the end of the grant?

How does our research fit with tacit knowledge?

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Some similarities:

Community based

Low cost/no cost

Local employees

Supporting CB HW

Addressing awareness

Some sites target marginalised, larger reductions in Neonatal Mortality Rate *(Tripathy et al. 2012)*

Disaggregated data analysis

Dissemination

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Year 3: Regional workshops with research teams and stakeholders

- Asia: India (Delhi)
- Africa: Malawi

Disseminate findings from secondary analysis of trial data and qualitative data

Disseminate findings from stakeholder engagement process – sharing of what works

Discuss how to utilise findings

More information:

http://equinam.global-health-inequalities.info

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