Communities supported 295
Lives saved 176
Women, children and adolescents benefiting 83,297

Problem
At the time of the project Malawi had a newborn mortality rate of 22 / 1000 live births and a maternal mortality rate of 510 / 100,000 live births.

Approach
WCF MNH tool
• 295 groups established 32,856 members
• Developed local answers including: bicycle ambulances; lobbying for establishment of outreach clinics; lobbying for institution of local by-laws on TBA delivery; vegetable gardening and distribution; fishing to generate and share income; volunteering to clean local health facilities.

Advocacy
• Groups and project staff routinely shared evidence from the project and lobbied with key decision-makers

Results
• High level of attendance at group meetings: 29,279 women of reproductive age (28% of all) of which 18,769 were pregnant (57%) and 3,577 men (3%)
• Improvements in care-seeking: early antenatal care (11%), attending 4+ antenatal care appointments (9%), delivery with a skilled attendant (13%) and postnatal care within 7 days (15%).
• Large improvements in perceptions of services : 66% of women perceiving quality to be excellent (48% at baseline) and 68% of women perceiving services to be very accessible (59%)

Lessons learned
• MNH groups can successfully mobilise large numbers of women, particularly pregnant women. Men can also be mobilised
• MNH groups can be effectively facilitated by volunteers
• Health surveillance assistants (a cadre of community health worker) are too busy to effectively facilitate groups, but can successfully supervise facilitators, which is a lower intensity role

www.womenandchildrenfirst.org.uk

Partner
Maikhanda Trust

Funder
UK Aid (£250,000)

Dates
2014 – 2016

Project population
321,851

Nkhotakota District, Malawi

Figure 1: MNH group membership

Figure 2: Care-seeking practices

Figure 3: Service quality / accessibility

Male MNH group member

“Men within the project area were heavily involved right from inception, such that there was easy to get their buy-in on solutions developed to improve maternal and newborn health. These solutions included orienting men to accompany their spouses for antenatal care and taking responsibility for supporting birth preparedness”.

Nkhotakota District, Malawi

Lilongwe