

# Collective action for Nurturing Care in Mozambique: evaluation results

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# The Monapo Nurturing Care Collective Action Model (1/2)

PATH's approach to supporting parenting interventions within health and other allied sectors relies on a systems-based approach that emphasizes government ownership and long-term sustainability.

However, health systems in LMICs need support from civil society to increase reach and impact of its interventions.

Northern Nampula Province is the most populous province in Mozambique and the province with the highest burden of stunting.

The district of Monapo, in Nampula Province, converges several multilateral and civil society partners supporting children under five and their caregivers.



# The Monapo Nurturing Care Collective Action Model (2/2)

A signed agreement between



To support the MOH to achieve the following objectives over a period of 2 years (2019-2021):

1. Increase detection of developmental delays and improve follow up of children with delays and disabilities
2. Offer counselling to caregivers to improve their knowledge and practices in child development and nutrition
3. Improve technical competencies and quality of care in child development and nutrition offered by HF and community actors

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## The Monapo nurturing care intervention package to improve caregiver knowledge and practices

AT HEALTH FACILITES	NUMBER	PARTNERS
Counselling during maternal and child health consultations	All 16 HF in the district	MOH, PATH, HILTON, UNICEF
Waiting room activities: playbox, vídeos, radios	16 HF (radios); 3 HF (videos) 7 HF (playbox) – until COVID-19	MOH, PATH, COVIDA/AMASI, ICAP, h2n, HILTON, UNICEF
IN THE COMMUNITY	NUMBER	PARTNERS
Counselling during home visits	All 122 CHVs and 15 supervisors in the district	MOH, PATH, UNICEF, COVIDA/AMASI
Community radio sessions	40 actors in 20 communities (CHVs, ADEMO, health committees)	MOH, PATH, UNICEF, ADEMO, h2n

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# Monapo Nurturing Care Pilot Qualitative Evaluation

Jeong et al. A pilot to promote early child development within health systems in Mozambique: a qualitative evaluation. 2021

**Study design:** qualitative implementation evaluation

**Overall goal:** to evaluate the implementation of this multi-component, multi-level pilot, and specifically to assess the delivery, acceptability, implementation barriers and facilitators, and **changes** resulting from the pilot

**Setting:** 3 health facilities in Monapo District, Nampula Province, Mozambique

**Data collection period:** October – November 2020

**Approach:** in-depth interviews; health facility exit interviews; and direct observations

**Sampling:** 73 respondents including caregivers randomly selected from lists, and providers and district stakeholders purposefully selected

**Data analysis:** 3 independent coders; thematic content analysis

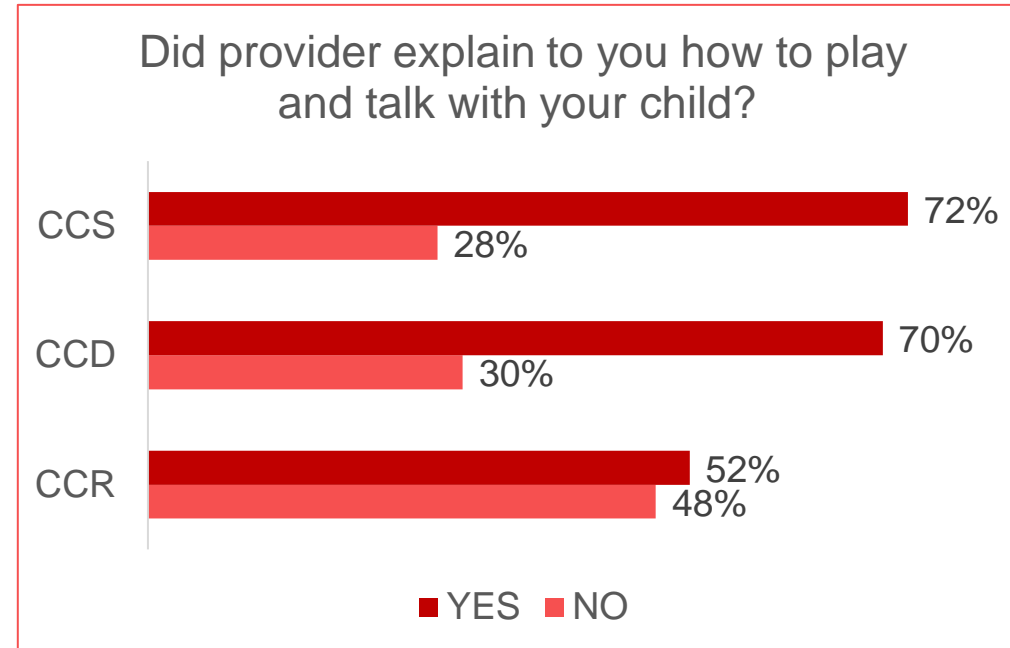
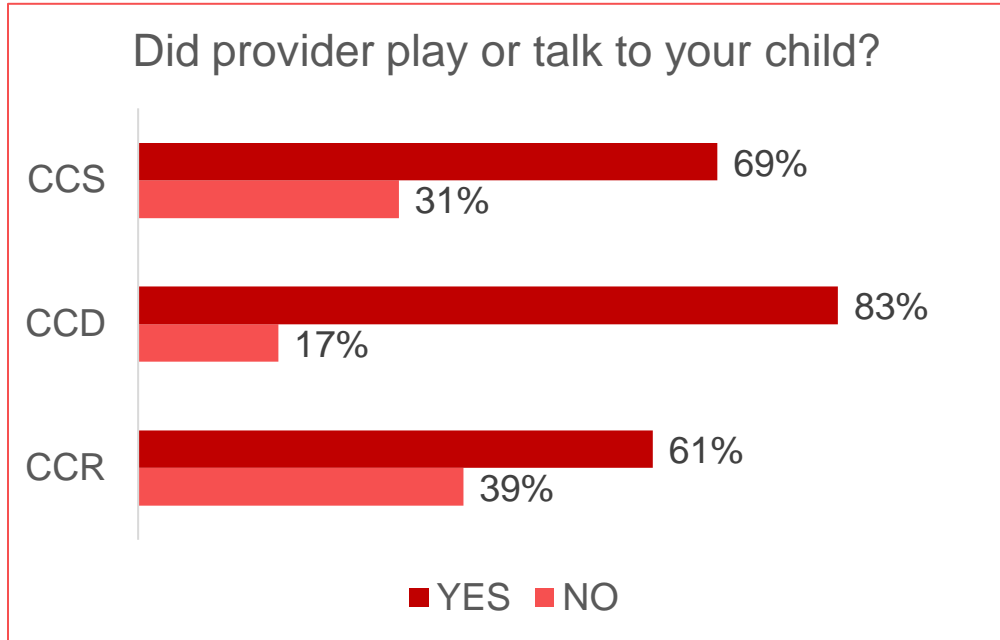
**Results:** changes in caregiver and provider behavior

- **HF providers** are a **primary source of information** on ECD for the caregivers.
- Caregivers positively evaluate provider counselling skills.
- Most caregivers mentioned breastfeeding and child feeding messages, child health messages, and COVID-19 prevention. **Only half (50%) of caregivers mentioned having learned about ECD** from the provider.
- Most caregivers reported improvements in knowledge and practices about exclusive breastfeeding, complementary feeding and general child care. Only **some caregivers gave examples of frequent stimulation activities** with children, such as toy making or playing with children.
- **HF providers reported focusing more on monitoring child development** and less on counselling.



# Endline Evaluation – counseling in health facilities

Project endline interviews with 90 caregivers at 6 HFs, 2021

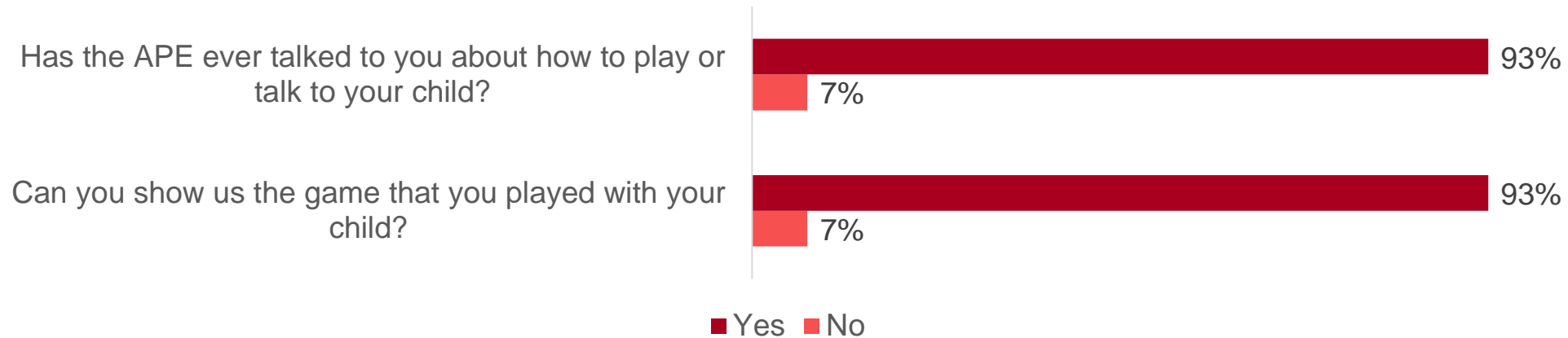


Exit interviews conducted at endline suggest that over 70% of caregivers are counselled on early learning at healthy child (CCS) and sick child (CCD) consultation; however, only half are counselled at at-risk consultation (CCR), where such counselling is needed the most.

# Endline Evaluation – counselling in communities

Project endline interviews with 30 caregivers that received CHW visits, 2021

## CHW COUNSELLING ON ECD DURING HOME VISITS (N= 30)



Additionally, 80% of caregivers visited by CHW were able to explain why play was important:

46% said that play helps children get to know and create bonds with their parents (!)

33% said that play helps children learn and become intelligent

29% said that play helps parents discover if the child is sick or not

25% said that play help children learn how to talk.

# Endline Evaluation: radio sessions in communities

Community radio session assessment, 2021; Endline data, 2021

- 40 community actors (CHWs, ADEMO activists, community health committees) received radios and pre-recorded content on 6 different topics covering ECD, nutrition and ANC/PNC use. No stipends were provided.
- Project data showed that 93% of community actors carried out monthly sessions; 70% carried out sessions every 1-2 weeks.
- Sessions were short (10-20 minutes), and leveraged existing gatherings (church meetings, community GMP etc.)
- An average of 15 participants per session, with 75% women & 25% men; 70% were caregivers of children aged 0 to 5.
- 20 caregivers interviewed:
  - Reported having listened to at least 4 different topics, suggesting regular participation.
  - 90% (18 of 20) caregivers reported that they tried certain practices at home, after hearing about them on the radio:
  - 45% reported giving eggs, fish or liver to their children for the first time
  - 40% reported making toys or using pictures available at home to stimulate the child
  - 40% started talking or playing with the baby (including some who started this in pregnancy)

# Conclusions and next steps

- Health facility providers are highly valued sources of information
- However, counselling on nurturing care is only provided in about half of consultations (in some consultation more than others), in health facilities where PATH provided technical assistance to health facility providers
- Counselling appears to be more frequently provided by community health workers, suggesting their importance as a communication channel for ECD
- Counselling provided by community health workers can improve caregiver nurturing care knowledge and practices
- Radio sessions can be an important complementary intervention to counselling provided by community health workers and appears to have a high impact on caregiver behavior change
- Next steps:
  - PATH is conducting a human-centered design study to improve counselling on nurturing care in health facility settings
  - PATH is working with the Mozambique MOH to integrate nurturing care interventions in community health worker training packages

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