



Mobilizing for Maternal & Neonatal Health through Birth Spacing and Advocacy (MOMENT)

Overview of Project

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Project Design

US and Canada

Kenya and India

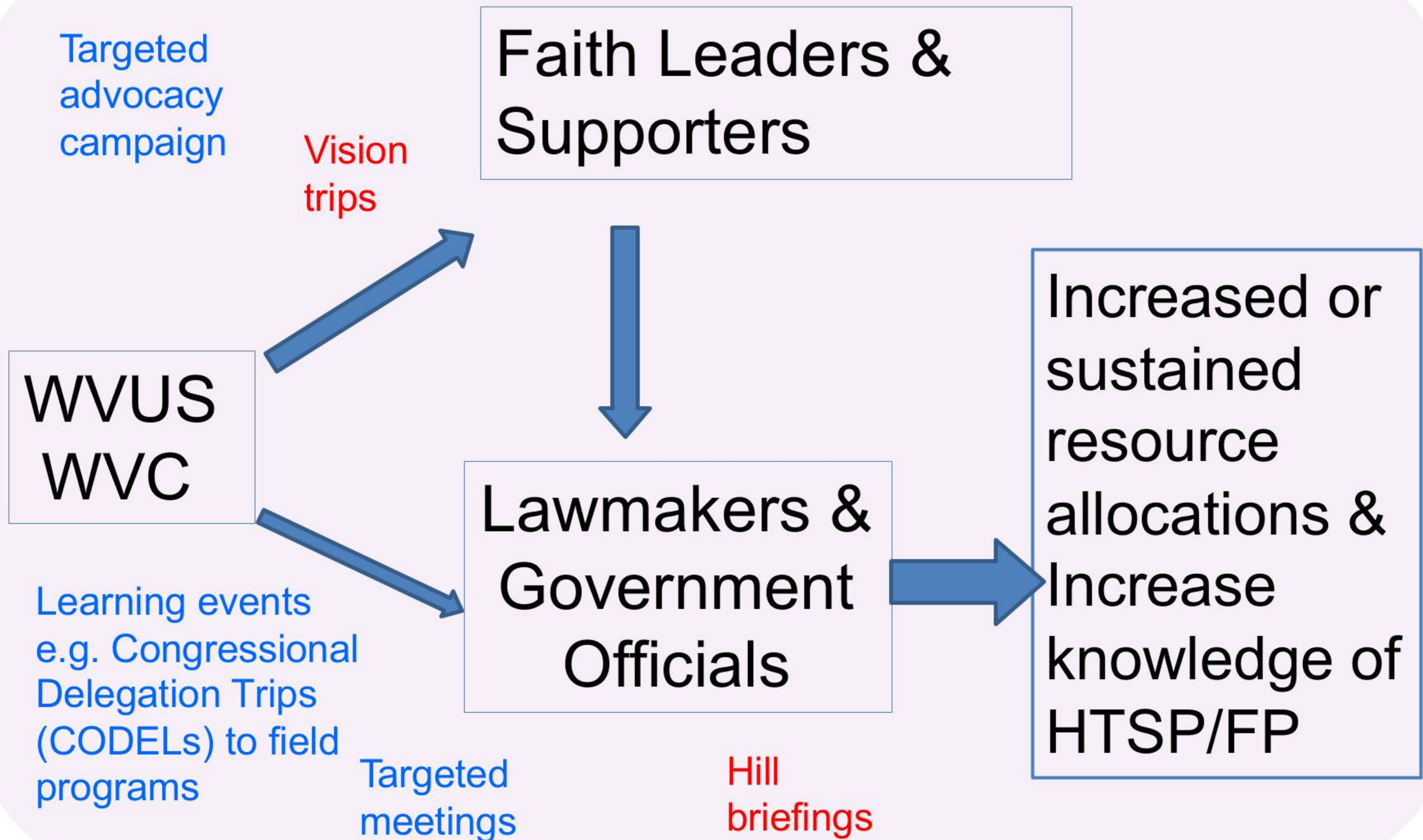
Build greater US Congressional and Govt. of Canada support for MNCH, with a focus on MDG 4 & 5

Build greater local and national support for improved service delivery of HTSP/FP services

Goal: Improve MNCH by creating global and local enabling environments for MNCH/HTSP knowledge and service provision and use



Project Framework : US and Canada



Objective 1: Build greater U.S. Congressional support to commit and protect resources for global MNCH, with particular focus on MDGs 4 and 5

Key Critical Milestones:

1. At least 10 U.S. Congress Members & Senior Political Staff become active supporters of GH
2. At least three delegations of key Congressional Members/staff field visits to observe achievements/approaches of U.S.-funded MNCH and HTSP/FP projects



World Vision Canada

Objective 2: Build greater Government of Canada support for sustained resources for MNCH, with particular focus on MDGs 4 and 5

Key Critical Milestones:

1. 14 key Government of Canada officials become global health “champions,”
2. Budget allocation for MNCH through the Muskoka Initiative sustained; and new GoC MNCH commitments made for post-2015



Field: World Vision Kenya and India

Objective 3: Strengthen community awareness and civic action for improved service delivery and use of HTSP/FP services in India and Kenya

India: Hardoi (Rural) and Lucknow (Urban) districts in Uttar Pradesh State

Kenya: Alego-Usonga sub-county, Siaya County

- *In Siaya County WV is the only organization focused on increasing awareness around HTSP*



Critical Milestones - WV Kenya & India

CM 1: % increase in community knowledge/awareness of accurate HTSP/FP messages (target determined after project baseline)

CM 2: % increase of service provider knowledge/awareness of accurate HTSP/FP messages and appropriate counseling for modern FP methods

CM 3: % increase in new FP acceptors, continuing FP users, and FP users per contraceptive method at project public and private HTSP/FP service provision sites (targets determined after project baseline)

CM 4: % increase in number of public and private HTSP/FP service provision sites that provide modern contraceptive methods

CM 5: Two local level champions (faith leaders, opinion leaders, civic leaders, influencers) publicly advocating for HTSP/FP per target project area per year

CM 6: One local-level program finding included in national media and/or advocacy bulletin per year per country

CM 7: Four documented community and service provider discussions per year



Healthy Timing and Spacing of Pregnancies

4 KEY MESSAGES

1 Too young

Delay your first pregnancy until you are at least 18 years old

2 Too old

Limit pregnancies to a mother's healthiest years, ages 18-34



3 Too close

Wait at least 2 years after one pregnancy before trying for another

4 Too soon

Wait 6 months after a miscarriage or abortion before trying for another pregnancy

#LetsTalkHTSP

World Vision®

MOMENT Key Message - Pillars



Empower



Equip



Advocate



WVUS & Canada:

1. Meetings, Events, Advocacy Training, Trips to the field

India & Kenya:

1. Social, behavior change and communication
2. Faith leaders and their congregations
3. Champions - Men, Husbands, Community influentials
4. Government systems
5. Leveraging WV's Child Health Now Campaign



Key Achievements – US

- Four (4) Representatives moved from “Unaware” to “Aware” *(April 2016)*
- One (1) Representative moved from “Aware” to “Friend” *(April 2016)*
- Five (5) CODELs
- Three (3) US Faith Leader Trips



Key Achievements – Canada

- Sixteen (16) champions created (8 MPs, 3 senior political staff and 5 senior civil servants)
(April 2016)
- In 2014, the Government made a new commitment of \$3.5 billion USD to improve the health of mothers and children from 2015-2020 - Muskoka funding



Key Achievements – India

		Hardoi		Lucknow	
		BL	EL	BL	EL
CM1: Community Knowledge – Key HTSP Message	Three year gap between two children	69.0	94.4	63.6	98.1
CM2: ASHA Knowledge	Key Questions Birth Prep HTSP, FP	60.3	69.9	N/A	N/A
CM3: Use of Modern FP Methods	Contraceptive Prevalence Rate	39.5	47.3	58.7	60.2
CM4: Increase FP methods mix availability/access	Health service points / facilities	21 Govt	35 Govt	25` Pvt	25 Pvt



Key Achievements – Kenya

		Alego-Usonga	
		BL	EL
CM1: Community Knowledge – Key HTSP Message	Three year gap between two children	46%	89.6
CM2: Nurses Knowledge	Key Questions HTSP, FP	Preliminary Results show spacing pregnancies by 2 or more years – highest knowledge	
CM3: Use of Modern FP Methods	Contraceptive Prevalence Rate	49.3%	69.3%
CM4: Increase FP methods mix availability/access	Health service points / facilities	Added Implants and IUCDs in 11/20 facilities	



Materials & Videos Links

- **WVUS Advocacy:**
<http://www.worldvisionmagazine.org/healthymomsandbabies/?campaign=127606159>
- **Trip Video – Sierra Leone:** <https://youtu.be/BT7IVKyFYU4>
- **WV Canada Advocacy:** <http://promise.worldvision.ca/>
- **India:**
<https://www.dropbox.com/sh/11c2ktwgr7w9m8f/AABeqljNxpOT4FWHzHls9Jzna?dl=0>
- **Kenya:**
<https://www.youtube.com/watch?v=BMGIM35NeEs&feature=youtu.be>
- <https://youtu.be/BMGIM35NeEs>
- **MOMENT – Folder of all Strategies – Being Developed**



What Next?

- WVUS and WV Canada
 - The Gates Foundation has reinvested in the Advocacy initiatives for another 3 years.
- WV Kenya
 - In proposal stage to scale up best practices and what worked in Kenya
- WV India
 - In process of submitting concepts





Thank you!

