Empowering Palestinian Mothers to Protect the Bodies and Brains of their Newborns and Infants
Since 2011, World Vision has worked with the Palestinian Authority Ministry of Health in the West Bank, Occupied Palestinian Territories, to train female volunteer Community Health Workers (CHWs) to deliver Timed and Targeted Counselling (ttC). ttC is a home visitor model to promote adoption of recommended health and nutrition behaviours during the first 1,000 days. The ttC model builds the capacity of families, creates an enabling environment to support mothers, and has been proven to be a highly effective approach to improve maternal, newborn, child health and nutrition outcomes.

The Proof-of-Concept seed grant awarded in 2017 from the Saving Brains program of Grand Challenges Canada (GCC) provided the opportunity to assess the effectiveness of Enhanced Timed and Targeted Counselling (EttC), an innovative package of services that integrates ttC with coaching caregivers to provide early childhood stimulation to their infants, and psychosocial support for pregnant women and mothers. EttC was developed in an evidence-informed manner in response to expressed needs from communities in the West Bank.


Multiple assessments were conducted through the 18-month period and CHWs collected most of the study data at various timepoints, using smartphones.

Quick Facts

- **Design:** Cluster randomized study
- **Hypothesis:** EttC will improve the development of infants during their first 12 months of life, and reduce postnatal depression among mothers
- **26 communities across Nablus, Ramallah and Salfeet governorates in West Bank randomized to receive innovative EttC package (Intervention Group) or basic ttC (Control Group)**
- **Target Groups:** Pregnant women in their third trimester and their infants
  - Intervention Group: 238 mothers and their infants
  - Control Group: 231 mothers and their infants
- **38 female CHWs trained**
  - 20 delivered the EttC package to Intervention Group
  - 18 delivered ttC to Control Group
- **20 female staff from 9 primary health clinics oriented to the study and the EttC package**
- **Project duration:** 2 years

18-month Project Timeline

**Baseline Assessment**
- MNCH KAP Questionnaire
- ECD KAP
- Maternal Antenatal Attachment Scale (MAAS)
- Health service questionnaire

**Midterm Evaluation**
- Edinburgh postnatal depression scale (EPDS) between 4 to 6 weeks post-delivery
- Maternal Postnatal Attachment Scale (MPAS), Ages and Stages (ASQ) at 2, 4, 6 months
- NDDS (1, 2, 4, 6 months)
- Health service questionnaire
- Growth monitoring

**Endline Evaluation**
- MNCH KAP questionnaire
- ECD KAP
- EPDS
- NDDS (9, 12 months)
- ASQ (8, 10, 12 months)
- Health service questionnaire
- Growth monitoring

This program was undertaken with financial support from Government of Canada and Global Affairs Canada through Grand Challenges Canada.
(1) **ttC for first 1000 days (recommended MNCH practices):** CHWs make at least two home visits a month to pregnant women and mothers of children under one year to provide counselling and timely, targeted key messages covering topics like care and nutrition for pregnant women, danger signs, birth preparedness, appropriate newborn/child care, optimal infant and young child feeding, and timely care seeking.

(2) **Maternal mental health and psycho-social support:** CHWs are equipped to identify symptoms, answer questions, listen to problems, and provide referrals to health facilities. CHWs use psychological first aid for supportive counselling of women experiencing perinatal depression or psychosocial difficulties. Mothers and families learn positive coping strategies and are supported to practice them.

(3) **Early childhood stimulation/development (ECD):** World Vision’s Go Baby Go (GBG) approach empowers caregivers by enhancing their caregiving knowledge and practices. GBG facilitates parents’ and caregivers’ holistic understanding of the interrelation between health, nutrition, protection, and development. It engages them in discussions on how negligence, abuse and violence in the home affect the growing child. This approach also seeks to engage fathers and promote their participation in mother-child care at home. The Nipissing District Developmental Screen (NDDS)’s LookSee checklists are used to give parents and CHWs specific age-appropriate activities to practice with their children to prepare them for the next developmental stage.

The various measurement tools generated considerable amounts of data over the 18 months of implementation. Further analyses are underway and three manuscripts are planned for submission to peer-reviewed journals in 2019/2020.

"I had five children in a short period of time. With the first four, I was angry all the time. With this child I am more calm and relaxed and I interact more with this child. I care for this child differently than my older children."

"We learned about child development, and to use what we have and play with our children; we don’t need to buy expensive toys."

Participant mothers in Yatma village
Although the project did not include an explicit gender equality strategy from the outset, recurrent anecdotal feedback from the female CHWs, participant mothers, and community members pointed to a shift in perceived gender roles and dynamics in the project areas. World Vision’s Project Lead was invited to present these observations to other grantees at a Gender-themed GCC Saving Brains Learning Platform webinar in September 2018.

“I joined World Vision’s work to improve my skills. World Vision helped me to discover and develop my gifts. Working as a community health worker improved my self-confidence.”

Ghadeer (CHW), shown on front cover