

Empowering Community Health Workers with Timed and Targeted Counselling to Improve Maternal and Child Health in Rural Lao PDR: Experiences from World Vision International Laos



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Abstract

In rural Laos, limited health infrastructure and geographic isolation create significant barriers to healthcare access. To address this, World Vision Laos initiated a **Timed and Targeted Counselling (TTC)** model in 2022 aimed at empowering community health workers (CHWs) to improve maternal, newborn, and child health (MNCH) outcomes by increasing health knowledge and the use of essential health services.





Photo: CHW-conducted home visit using TTC approach in Laos

Methodology

Intervention Design

- Training and coverage: Trained 226 CHWs across 80 villages in 6 districts of 3 provinces.
- CHW activities: Monthly home visits: using TTC flipbooks, dialogue-based counselling, and positive/negative storytelling.
- Counselling focused on: infant and young child feeding, antenatal/postnatal care, and hygiene and sanitation practices.

Data Collection and Monitoring

- Conducted baseline and midline/endline surveys using validated tools to assess MNCH indicators.
- CHWs maintained monthly registers, verified by district health staff.
- Anthropometric measurements collected following WHO protocols.
- Included qualitative interviews and field observations for deeper insights.

Project Reach 2,364 Children (0-23m) Women Reached (15-49Y)

Skilled Birth Attendand	ce +189
64% Baseline	→ 82%
Stunting Reduction	-12%
44% Current 5	6%
Wasting Rate	Excellen
3% Baseline 1%	

Antenatal Care Attendance
All pregnant women attended ANC

Behavioural Changes

Enhanced breastfeeding

Significant increase in exclusive breastfeeding practices among mothers.

Improved hygiene

Community-wide adoption of better hygiene and sanitation practices. In Luang Prabang province:

- Improved latrine use rose: **₹**71% to 89%
- Diarrhoea incidence dropped: 31% to 14%

Health awareness

Increased knowledge of maternal mental health and psychosocial support

Challenges

- Cultural feeding practices required tailored and sensitive counselling approaches to ensure acceptance of recommended behaviours.
- Low male engagement in maternal and newborn health activities limited shared decision-making and support for women.
- Geographical barriers disrupted regular home visit schedules, affecting continuity of care.

Conclusion

- Timed and Targeted Counselling led by CHWs is an effective strategy for strengthening primary healthcare in resource limited settings
- The project achieved measurable improvements in maternal and child health outcomes across all intervention areas.
- Well-trained and supported CHWs are pivotal in closing service delivery gaps and fostering resilient communities.
- This model shows strong scalability potential for similar contexts across Southeast Asia.

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