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ADOLESCENT
HEALTH CONFERENCE

UNLEASHING
THE POWER
OF A GENERATION

Strengthening role of Grandmothers

Bridget Aidam, PhD

World Vision International

Why involve grandmothers?

Grandmothers: An abundant yet under-utilized resource for promoting good nutrition, health and well-being, especially for girls in collectivist societies



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Steps and project phases

Formative Research

Step 1:

Assess Roles, Relationships and Knowledge



Step 2:

Affirm Grandmother's role as Cultural Resource



Step 3:

Build Consensus for change through dialogue within and between groups



Step 4:

Build Capacity of Grandmother Leaders



Step 5:

Evaluate Results and document for ongoing learning

Implementation Activities

Endline Survey

Visit: <http://wvi.org/nutrition/grandmother-approach>

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CanWaCH

Canadian Partnership for Women and Children's Health



**EVERY WOMAN
EVERY CHILD**
FOR HEALTHY, EMPOWERED WOMEN,
CHILDREN AND ADOLESCENTS



The Partnership
for Maternal, Newborn
& Child Health



Global Affairs
Canada

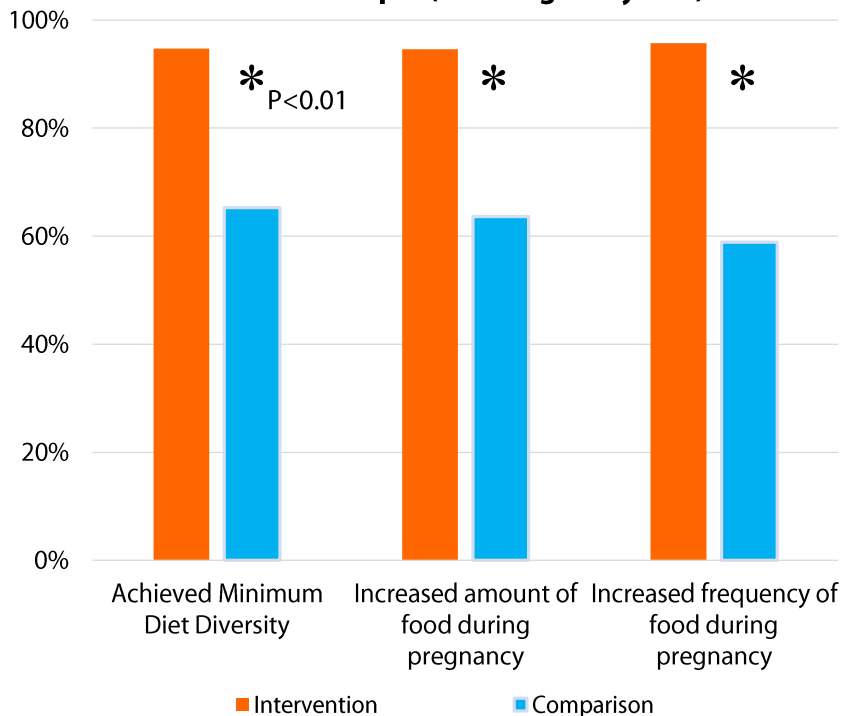
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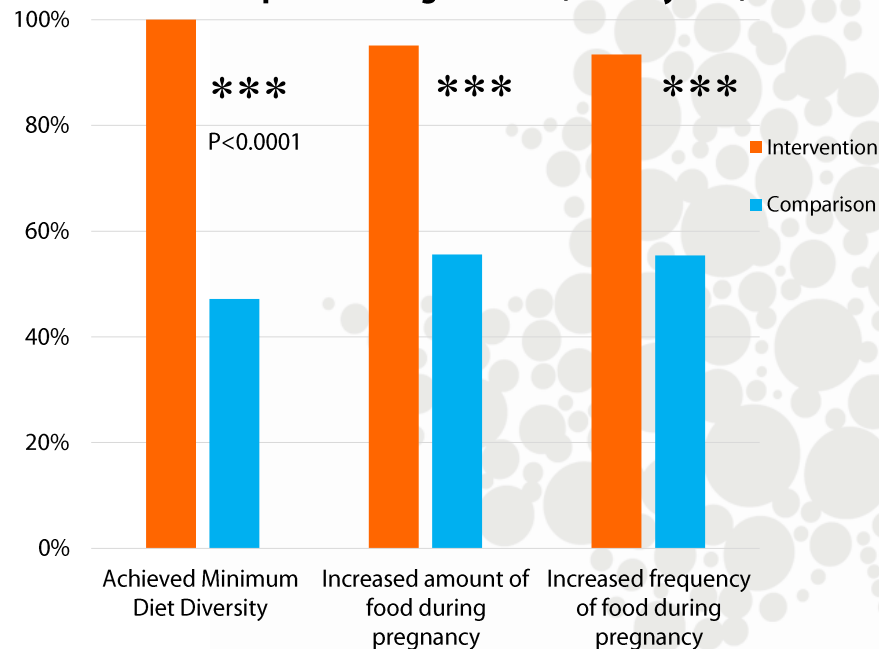
**World Health
Organization**

Mamanieva findings

All Women in Sample (Mean age 26 years)



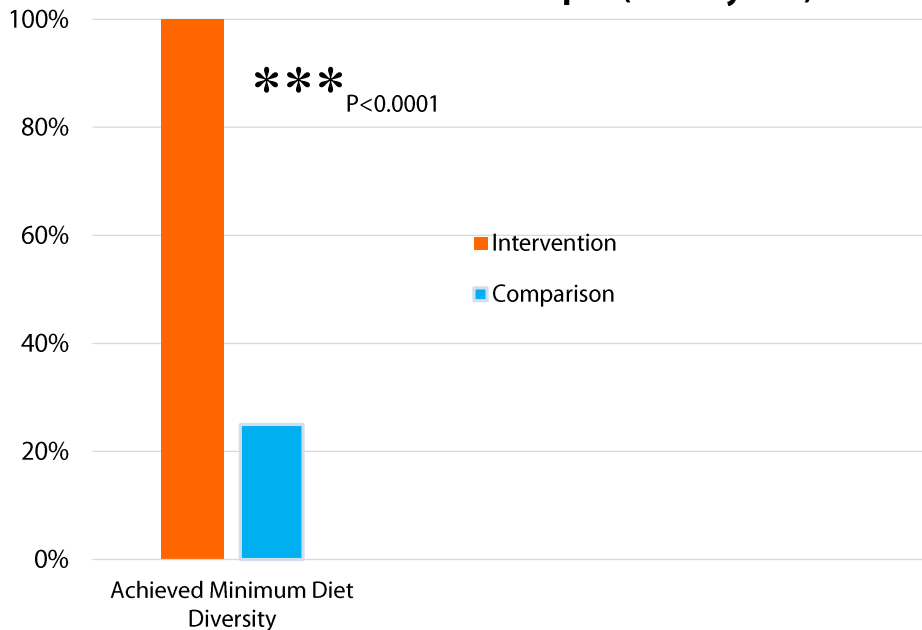
Subsample of Young Women (18–24 years)



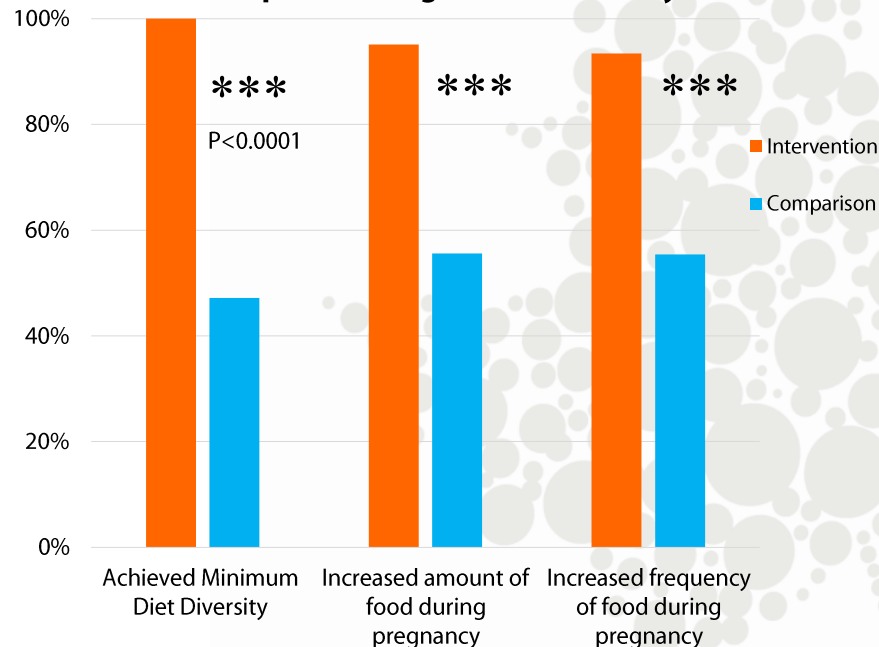
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Mamanieva findings

Adolescent Girls Subsample (18–19 years)



Subsample of Young Women (18–24 years)



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All Women in Sample

* P<0.01

Intervention

Comparison

Mean birth weight *(kg) (n=244)

3.34 ± .47

3.08 ± .43

Nutrition knowledge & self-efficacy scores

Nutrition knowledge and self-efficacy scores of GMs in endline survey. Data presented as mean \pm SD.

Grandmothers	Intervention (n = 157)	Comparison (n = 62)	P-value
Nutrition knowledge score, max = 16 pts	12.0 \pm 1.7	9.8 \pm 3.1	p<0.001
Self-efficacy score, max = 20 pts	19.6 \pm 1.9	14.8 \pm 6.4	p<0.001
Mothers with CU2	(n=225)	(n=150)	
Nutrition knowledge score, max = 16 pts	11.6 \pm 1.9	10.2 \pm 2.8	p<0.001

Mothers' health seeking & nutrition practices

Health seeking, diet and nutrition practices of 291 mothers with children < 2 years during most recent pregnancy

	Intervention (n = 184)	Comparison (n = 107)
% Attended ANC at least once	97%	99%
% Attended ANC at least 4 times*	97	80
Pregnancy length (weeks) at first ANC visit*	9.1 ± 5.7	12.2 ± 7.4
% Delivered at health facility*	97	91
% Received/purchased iron tablets*	100	95
% of those who received tablets, took tablets daily*	92	74

Conclusions

Grandmother-inclusive approach was **feasible to implement** in WV context **during Ebola epidemic**

Effective in:

- **Empowering grandmothers and improving their self-efficacy**
- **Changing beliefs and knowledge** of grandmothers to:
 - Support **improved nutrition** for pregnant women, infants and children
- **Changing beliefs and practices** of mothers:
 - Increased frequency of meals during pregnancy
 - Increased amount of foods consumed during pregnancy
 - Decreased workload during pregnancy
 - Increased early initiation of breastfeeding
 - Increased diet diversity and micronutrient (IFA) consumption
- **Improving birth outcomes:**
 - Increased mean birthweights

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