

Care Groups, Variations and Innovations

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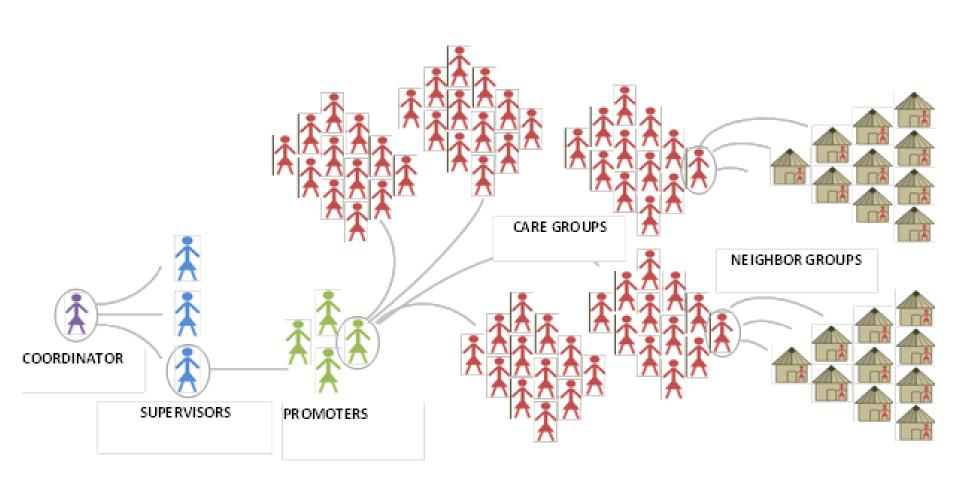




What are Care Groups?

A community based strategy for improving coverage and behavior change, focus is primarily maternal and child health and reducing malnutrition

Care Group Structure



Who is Using Care Groups?

- ACDI/VOCA
- ADRA
- Africare
- American Red Cross
- CARE
- Concern Worldwide
- Catholic Relief Services
- Curamericas
- Emmanuel International
- Feed The Children
- Food for the Hungry
- Future Generations
- GOAL

- International Aid
- International Medical Corps
- International Rescue Committee
- Living Water International
- Medair
- Medical Teams International
- Pathfinder
- PLAN
- Project Concern International
- Salvation Army World Service
- Save the Children
- World Renew
- World Relief
- World Vision

Where are Care Groups being Used?

- Bangladesh
- Bolivia
- Burkina Faso
- Burundi
- Cambodia
- DRC
- Ethiopia
- Guatemala
- Haiti
- Indonesia
- Kenya
- Liberia
- Malawi
- Mexico
- Mozambique

- Nicaragua
- Niger
- Peru
- Philippines
- Senegal
- Rwanda
- Sierra Leone
- Somalia
- South Sudan
- Sudan
- Uganda
- Zambia
- Zimbabwe

Adaptations and Innovations

PCI/Bangladesh Care Group "Trios" that involve fathers and mother-in-laws

Concern Worldwide/Burundi integrating Care Groups into MOH systems

Concern Worldwide/Niger delivery of integrated community case management;

PCI/Liberia and World Relief/Rwanda integration of Care Groups and savings groups;

World Relief/Mozambique TB programming in Care Groups

IMC/Sierra Leone, FH/Guatemala looking at adding an ECD module into Care Groups

FH using Care Groups in postemergency settings – Haiti, Phillipines

Facilitation Cues

What are they?

Why use them?









GAME



ATTENDANCE & TROUBLESHOOTING



ASK ABOUT CURRENT PRACTICES



FACILITATION: behavior change promotion through story and pictures



ACTIVITY



DISCUSSING BARRIERS



PRACTICE AND COACHING



MAKING A COMMITMENT

Care Group Trios: Incorporation of Influencers



<u>Program for Strengthening Household Access to</u> <u>Resources(PROSHAR)</u>

PROSHAR: Integrated Food Security Program

Income and access to food for poor and ultra poor households increased

Goal:
Reduced Food
Insecurity Among
Vulnerable Rural
Populations in
Selected Upazilas in
Khulna Division

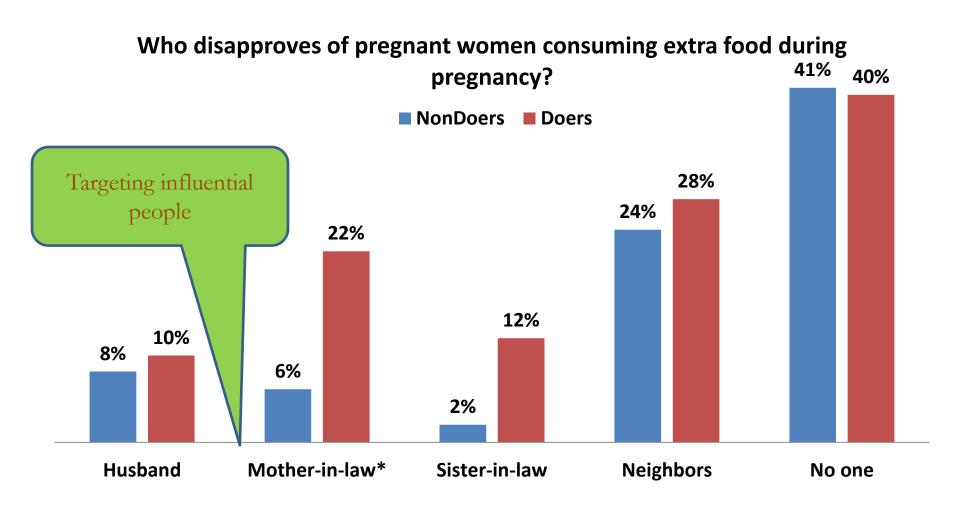
Institutions and households prepared to respond effectively to shocks

Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved

DEVELOPMENT OF CARE GROUP TRIOS

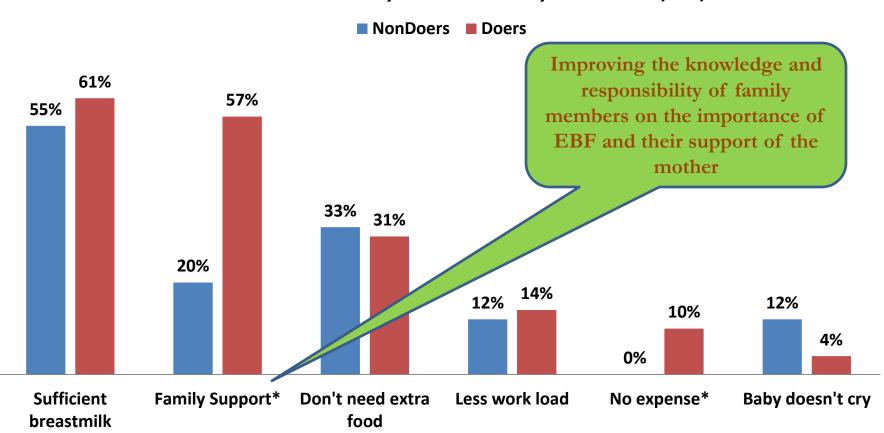
- During the design of PROSHAR, research demonstrated that:
 - Mothers have little influence in household decisions concerning nutrition & health care
 - Fathers & mothers-in-law were found to have the strongest influence on behaviors related to maternal and child care
- Thus, an innovative Care Group Trios approach was developed to involve <u>fathers & mothers-in-law</u> in order to sustainably change behaviors

WHAT INFLUENCES NUTRITION PRACTICES?

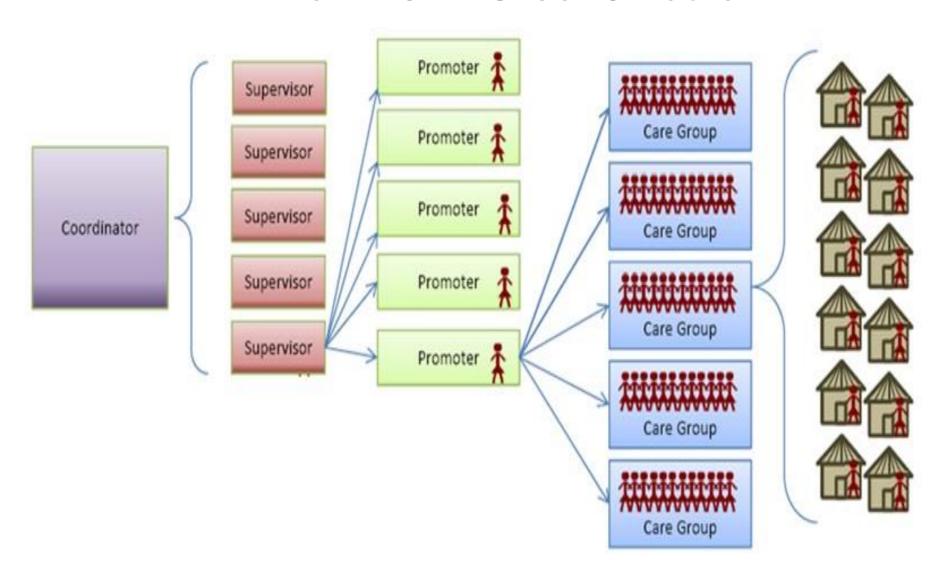


WHAT INFLUENCES NUTRITION PRACTICES?

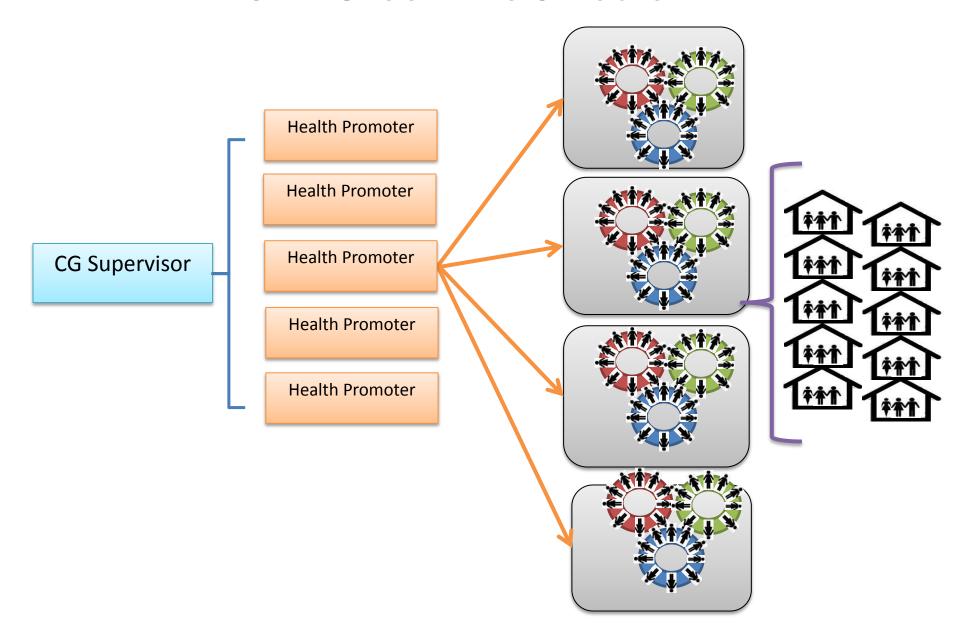
What made it easier for you to exclusively breastfeed (EBF)?



TRADITIONAL CARE GROUP STRUCTURE



CARE GROUP TRIO STRUCTURE



IMPLEMENTATION OF CARE GROUP TRIOS

MOTHER CG

- Health Promoter meets with Mother Leaders 2x/month in CG meeting
- MLs organize meeting with their neighbor groups the following week
- Flipchart with specific health & nutrition messages used
- MLs plan HH visit

GRAND MOTHER CG

- Health Promoter meets with Grandmother Leaders (GmL)s monthly;
- GmLs also meet with their groups every month
- Flash card set is used with specific health & nutrition
- GmL do HH visits as needed

FATHER CG

- HP meets with the Father Leaders (FL)s 1x in every two month;
- FLs meets with their groups in the following two months
- Flash card set is used with specific messages
- FL do HH visit as needed

Care Group

(Trio Leaders)

- HP meets three leader groups together 1x/quarter
- Trio leaders interact in clusters with similar leaders
- CGTs share challenges; success stories; and plans for addressing challenges

















শুভেচ্ছা জানান



নিবন্ধন করুন



ছবি দেখান



হাতেকলমে কাজ



তথ্য অনুসন্ধান



তথ্য প্রদান



প্রতিশ্রুতি



তৎক্ষণাৎ যাচাই



ধন্যবাদ

নিৰ্দেশনা ছবি



১ গুভেচ্ছা জানান



৪ তথ্য প্রদান



২ তথ্য অনুসন্ধান



৫ প্রতিশ্রুতি



৩ ছবি দেখান



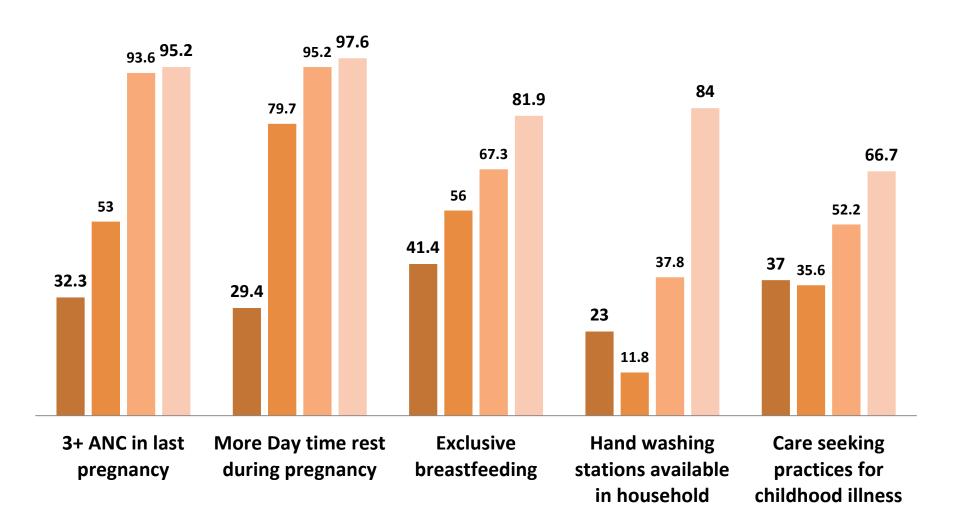
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EVOLVING PATHWAY

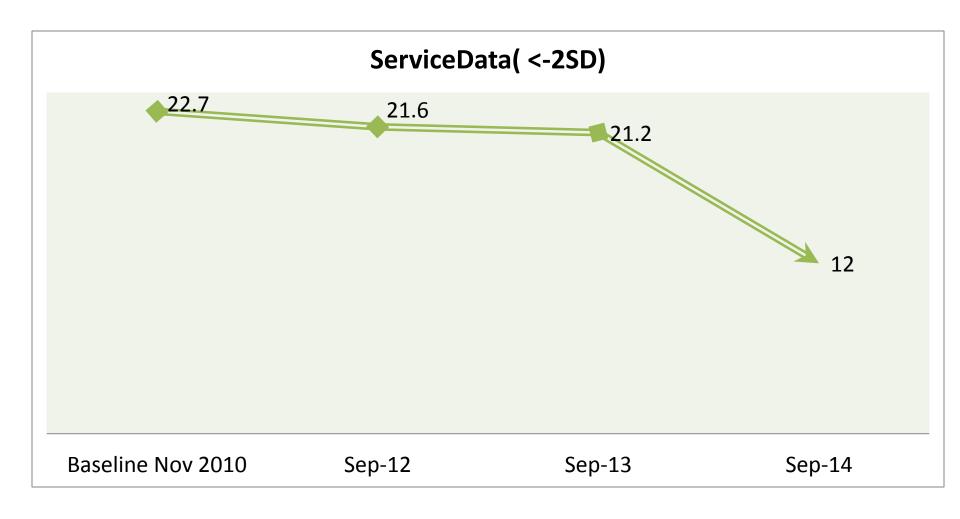
- Beneficiary selection, Group formation,
- Train the leaders, establishing the meetings
- Monitoring the performance, Assessing Knowledge transfer, Appraisal the groups, Recognizing the model leaders
- Material modification, meeting frequency readjusted, revising staffs poisoning, focusing group specific interventions
- Group dynamic review, peer support system enhanced

BEHAVIOR CHANGE TRENDS

■ Baseline 2010* ■ Annual Survey 2012 ■ Annual Survey 2013 ■ Annual Survey 2014



PERCENTAGE OF UNDERWEIGHT AMONG UNDER 2



LESSONS LEARNED

- Formative research are essential to determine whether to engage various influencers.
- Cultural context need to be consider- home visitation by father, male program staffs to work with male, meeting time and frequency
- Different influencers groups may not need to receive the same level of information as the mothers on various health topics
- Cost implications needs to be balanced with the expected behavior change

Group Discussion Topics

- What stands out? What seems especially good, useful, or interesting?
- What recommendations do you have for further study or testing of the Trios Approach?

Resources

- Care Groups: A Training Manual for Program Design and Implementation http://www.fsnnetwork.org/care-groups-training-manual-program-design-and-implementation
- Caregroupinfo.org for many resources on Care Groups
- Care Group Forward Discussion and Interest group <u>www.fsnnetwork.org</u>

Thank You!

