

TESTED SOLUTIONS FOR

Supporting Facility-Based Delivery



Improving Rates of Facility-Based Delivery

Delivery in a health facility is an important strategy for reducing maternal and neonatal mortality, yet **many women still face numerous obstacles to reaching the facility** and instead give birth at home or in the community. Innovative solutions that are responsive to the challenges pregnant women face are needed.

In close collaboration with women, facility and community health workers, programmers, and policymakers in Liberia we used *behavioral design* to develop a package of **evidence-based solutions to support women and their families** to follow through on their intentions to deliver in a health facility. We recommend considering these solutions in concert with others to promote respectful maternity care in facilities.





How to Use This Guide

This tool guides you through the how-to of the solutions so you can see if you may want to adapt and implement these solutions in your own setting.

- 1 Learn more about the 5 different solutions that were tested
- 2 Consider how these could be useful for your programming
- 3 Download the actual files of the solutions for implementation
- 4 Read more about the formative research

Tested Solutions



Mobilizing Community Transportation

Facilitated community meetings to problem solve transportation logistics for facility delivery.

[EXPLORE](#)



“Mothers First” Facility Commitment

Workshop activities to build provider empathy and brainstorm ways to help women in their communities.

[EXPLORE](#)



Daughter’s Future Fund

Storytelling to encourage early savings and support for young women.

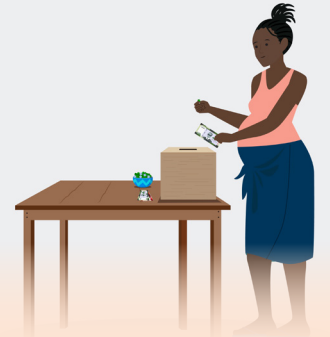
[EXPLORE](#)



Delivery Logistics Planner

A planning card and job aids to help women plan for the more complex and expensive elements of facility delivery.

[EXPLORE](#)



Big Belly Savings Tracker

A system for women to visibly track savings progress during pregnancy.

[EXPLORE](#)



Mobilizing Community Transportation

Prompt and facilitate local problem solving

Transportation options in many communities are limited, difficult to find in a moment of need, and not always appropriate for a woman in labor. It takes a long time to get to the facility and transportation is not always available in the community where women live.

This community meeting, with community leaders and other stakeholders, prompts and facilitates problem solving around transportation logistics to support women to overcome local transportation challenges in order to deliver at the facility.

“From this meeting people will gain more knowledge of the importance of planning for transportation for pregnant women in the community... Through the different ideas, community members will decide which need of transport they can plan on for their women. Once nothing is imposed, but their own choice, community will take action.”

– COUNTY REPRODUCTIVE HEALTH OFFICER

“The meeting will end good. We will be able to find solutions to address most of the problems if we don’t find solutions the same day, we will take a break to go home, think and come back again another time. Once we all have a meeting and agree, everybody will have to do it.”

– COMMUNITY HEALTH SERVICES SUPERVISOR



How Mobilizing Community Transportation Works

1

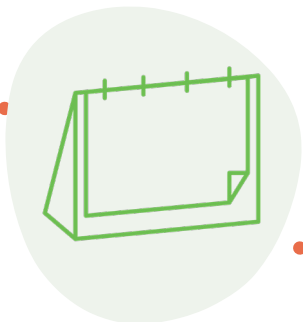
Community health groups organize a meeting with community leaders and members.



Creates a moment for the community to reflect on shared transportation challenges.

2

Trained facilitator refers to the flipchart's discussion prompts and images.



Serves as a simple reminder to help guide the conversation.

3

Community members discuss challenges for women traveling to the facility.



Allows communities to focus on the most relevant problems.

4

Community members brainstorm solutions to address local challenges.



Empowers communities to propose solutions that suit their own needs.

5

Community members agree on next steps to move forward with top ideas.



Reenforces community ownership of and accountability for planning solutions.



Mobilizing Community Transportation

Considerations for Adaptation and Implementation

- Specific discussion prompts and images should be adapted to each setting in consultation with communities and in language that is appropriate for the setting.
- Efforts should be made to include any other relevant stakeholders that can help to identify challenges and develop solutions, including local health workers and transportation vendors or networks.
- It is expected that community meetings conclude having identified specific local challenges, specific ideas of interest to address them, and next steps in terms of responsibility, goals, and subsequent meetings.
- The facilitator's tool helps guide initial meetings, but the community should take ownership of moving their respective plans forward in the way they choose.
- Leverage cross-community structures within a facility's catchment area to support coordination and shared learning and problem solving.

Materials

**DOWNLOAD FACILITATOR
FLIPCHART**

EXPLORE MORE TESTED SOLUTIONS



“Mothers First” Facility Commitment

Building empathy and motivating change

Providers are not always aware or empathetic towards the challenges which women face to deliver in their facility, which inhibits the supportive role they can play during ANC. At times, this orientation can serve as a direct barrier to facility delivery – providers may send women away that they consider arriving too early in labor, not realizing the challenges they faced to get there, leaving them to deliver at home or on the road.

The “Mothers First” Facility Commitment activities help to build empathy for the challenges women face in following through on their intentions for facility delivery, including those specific to young and first-time mothers. Opportunities for joint brainstorming as to what different facilities could do to improve the situation in their catchment communities, leaves providers with actionable next steps.

*“These are real life challenges and stories we deal with most times for the girls that are not married or having support during their pregnancy. This is what happen that can delay them from getting to the facility on time... [The commitments] help us remember that we should be providing quality care to our pregnant women.” – **FACILITY OFFICER IN CHARGE***

*“It will help me bring the young girls closer. Listen to them, help alleviate fear and create openness to help them see the provider and the clinic as the best place to have their babies.” – **PROVIDER***



How the “Mothers First” Facility Commitment Works

1

Providers from a facility participate in a reflection workshop.



Provides a safe space to discuss challenges among peers.

2

Providers follow a young pregnant woman’s story, reflecting on events from her perspective.



Builds empathy with the challenges clients face in getting to the facility to deliver.

3

Providers discuss what could have helped the woman have a better outcome.



Reframes familiar sad stories as opportunities for provider support.

4

Providers consider what “Mothers First Care” is and what challenges they face in their practice.



Creates a moment for reflection on the facility’s current state of care.

5

Providers identify concrete actions they can take to improve care and sign a commitment pledge.



Instills an intention to change and commitment to follow through.



“Mothers First” Facility Commitment

Considerations for Adaptation and Implementation

- These activities can be incorporated into the reflection workshop component of the [respectful maternity care solutions](#) or any other facilitated group session involving providers that conduct ANC and perform deliveries.
- The workshop facilitator should be someone who can create a safe environment for providers to discuss difficult topics.
- Specific story elements and images on the cards should be adapted to each setting in consultation with communities and providers.
- If implemented in a larger group setting, providers from each facility should work together in small groups to complete the commitment worksheet.
- If providers struggle to identify facility-level improvements within their power, help them to identify where needed support could come from and next steps in seeking that support.

Materials

[DOWNLOAD STORY
CARDS](#)

[DOWNLOAD COMMITMENT
WORKSHEET](#)

[DOWNLOAD FACILITATION
GUIDANCE](#)

[EXPLORE MORE TESTED SOLUTIONS](#)



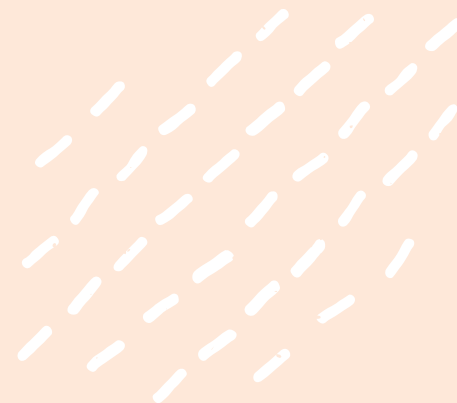
Daughter's Future Fund

Investing in young girls' futures

Young women and girls face many challenges during the course of their pregnancy. They may delay care seeking because they do not want the pregnancy, shortening the amount of time they have to prepare and save, and they usually do not have the income to prepare on their own. Families of young girls must be prepared to support the expenses that arise during her adolescence, including but not limited to an unexpected pregnancy.

The story, "Growing Our Daughter's Future," and visual job aid helps community health assistants to emphasize the importance of saving for a daughter's future and includes prompts to support mothers in developing a savings plan.

"Story is teaching about how to save and get prepared for an emergency. We should be able to support our children for good things but we should not abandon them when they get pregnant or have problems. Helping to support your child will help the child take care of you also in the future." – **Mother**





How the Daughter's Future Fund Works

1

Community health worker (CHW) visits the households of mothers of young daughters.



Prompts families to begin investing in their daughter's future and potential expenses (pregnancy or otherwise).

2

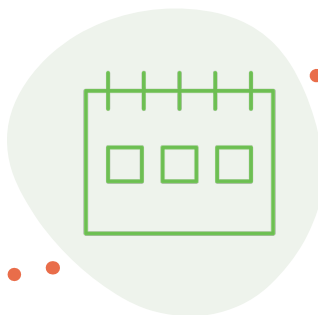
CHW shares story to show the importance of saving for her daughter's future.



Leverages storytelling tradition to highlight the importance of saving for a daughter's future.

3

CHW and mother create a savings plan using the savings prompt card.



Creates a concrete savings plan to facilitate follow through.

4

CHW gives the mother a seed at the end of the discussion.



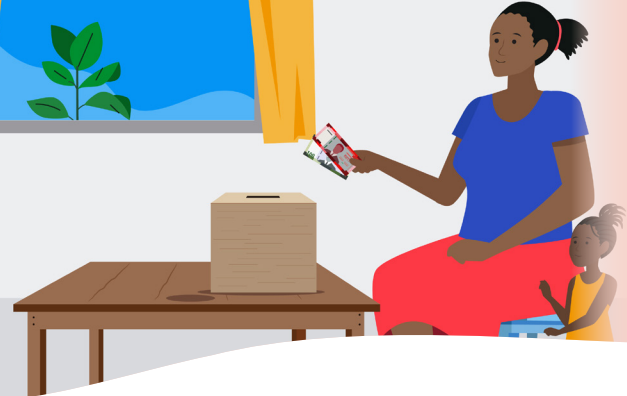
Commemorates the special moment and signals the start of saving for her daughter.

5

CHW reminds mother of her saving plan during follow-up household visits.



Encourages saving through ongoing supportive prompts.



Daughter's Future Fund

Considerations for Adaptation and Implementation

- Specific story elements and images on the cards should be adapted to each setting in consultation with communities.
- Community health workers should target households that have young girls (ages 8-10 years old) and visit with the mother and/or father.
- These conversations can also be timed around other culturally-relevant milestones for young girls or can leverage school-related channels to reinforce that family savings can be used in other ways to support a girl's future.

Materials

**DOWNLOAD GROWING
OUR DAUGHTER'S FUTURE
STORY SCRIPT**

**DOWNLOAD GROWING
OUR DAUGHTER'S FUTURE
STORY AID**

EXPLORE MORE TESTED SOLUTIONS



Delivery Logistics Planner

Drawing attention to overlooked elements

Birth planning often focuses on where a woman will deliver and gathering of materials rather than the logistics for arriving to the facility in labor. Families may fail to adequately prepare for how the woman will arrive to the facility to deliver because resources are limited and other details – such as the items stressed by providers during ANC – are more salient. Furthermore, discussion about the importance of planning for FBD often does not occur until a woman's first ANC visit at the facility, which for some women, can occur several months into a pregnancy.

The Delivery Logistics Planner prepares a woman for facility-based delivery by considering the more complex and expensive elements to plan for early in a woman's pregnancy and supporting her to save for the associated expenses.

*“The story is about taking action and making every move and plan most important to delivery and other things. A lesson story. Earlier preparation is important. The story is full of wisdom. The card made every explanation simple and beautiful... Good to make transportation arrangements because pain can start at any time and you have to be prepared.” – **TRAINED TRADITIONAL MIDWIFE***

*“It was clear from planning activity that she [previously] did not plan properly for FBD, it was her first time. She was afraid and did not tell anyone she was in labor until very late in the night. The community is far without daily bike or vehicle access. At that time of the night there was nothing she could do except deliver in the community, could not even walk to facility at that time of night. She wishes she had knew about this earlier to plan to go to the facility.” – **FIELD TEAM***



How the Delivery Logistics Planner Works

1

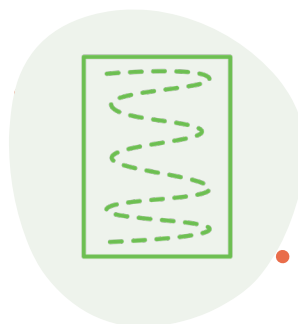
Trained birth attendant (TBA) shares a story on the importance of planning with a pregnant woman and her family.



Prompts planning for facility delivery earlier in pregnancy and includes family in the conversation.

2

TBA and family develop a plan for day of delivery logistics, using the planner.



Emphasizes planning for complex and often overlooked transportation and logistics concerns.

3

Pregnant women and family identify savings goal and plan.



Eliminates ambiguity around costs and sets a clear target early on.

4

TBA shares second story to families of adolescent women about challenges they face.



Builds empathy among family to create a supportive environment for young pregnant women.

5

TBA reviews the planner with the pregnant woman during follow-up visits in the community.



Reminds of planning objectives and supports progress.

6

ANC providers follow-up on planning progress using the job aid during every facility visit.



Reinforces the importance of planning and saving for delivery day logistics.



Delivery Logistics Planner

Considerations for Adaptation and Implementation

- Story imagery and illustrations on the planner should be simple and recognizable, adapted to the local context and languages.
- Each pregnant woman should receive her own copy of the planner during her first visit with a TBA. If not feasible, the planner could be kept and reused by the TBA.
- Each step of the planner should be reviewed during every visit with the pregnant woman in order to emphasize the importance of arranging transportation and to support women to overcome challenges they may identify over the course of the pregnancy.
- Job aids should be adapted with planning prompts relevant to the local logistics challenges/ options that pregnant women may face, in consultation with health workers and the community.

[EXPLORE MORE TESTED SOLUTIONS](#)

Materials

[DOWNLOAD DELIVERY LOGISTICS PLANNER](#)

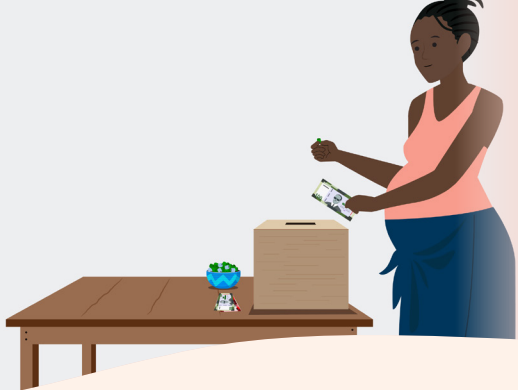
[DOWNLOAD PROVIDER JOB AID](#)

[DOWNLOAD RED DEER, BLACK DEER STORY SCRIPT](#)

[DOWNLOAD TBA PLANNER AND STORY JOB AID](#)

[DOWNLOAD ELEPHANT STORY SCRIPT](#)

[DOWNLOAD ELEPHANT STORY AID](#)



Big Belly Savings Tracker

Visualizing savings progress

Women consistently save for delivery, but these funds are often used to purchase the items frequently mentioned by facility-based health providers (often those the facility lacks) rather than transportation expenses which may ultimately be more critical to delivering in a facility. Given resource constraints, particularly for lower-income, rural women, it isn't possible to have cash on hand for unexpected expenses without extensive planning from early pregnancy. As a result, women may not be able to cover the expenses necessary for timely arrival to the facility.

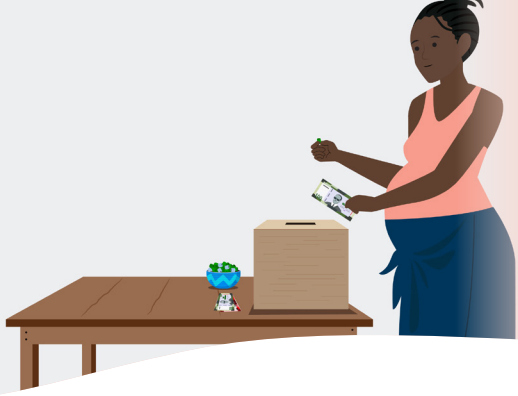
The Big Belly Savings Tracker highlights the importance of saving early, gives women a simple visual way to track their savings progress and when used in conjunction with the Delivery Logistics Planner, ensures savings goals are inclusive of the costliest aspects of facility delivery, giving women more confidence in their ability to cover related expenses.

“[I am] very happy to be saving money for my baby. I would feel so happy to see the beads in the bowl. When the bowl is full I would get another one to continue saving.”

– PREGNANT WOMAN

“She is early in her pregnancy, she was really happy and laughed out loud, enjoyed using the beads. She understood that if beads are adding up you know the money is adding up in the box.”

– FIELD TEAM



How the Big Belly Savings Tracker Works

1

TBA helps family develop a savings plan following an initial planning discussion.



Identifies costs earlier in pregnancy, giving women and their families more time to save.

2

TBA uses prompt cards to help family determine how much they need to save.



Engages family and creates a savings goal for day of delivery logistics costs.

3

TBA gives pregnant women a bowl and pouch of beads to track savings.



Provides women a simple and safe way to see savings progress.

4

Pregnant woman adds a bead to the bowl every time she sets aside money for delivery.



Fosters a sense of self-efficacy and accomplishment to see growth.

5

TBA asks the woman about her progress during follow-up visits.



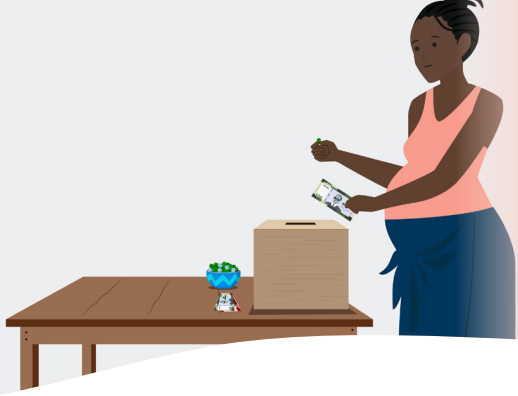
Serves as an accountability mechanism to ensure that saving stays top-of-mind.

6

Bowl fills as woman saves for expected costs, until bottom pattern is no longer visible.



Provides a visual cue/milestone for effective savings and progress.



Big Belly Savings Tracker

Considerations for Adaptation and Implementation

- Job aids should be adapted with savings prompts relevant to the local logistics challenges/options that pregnant women may face, in consultation with health workers and the community.
- While the midwife should provide suggestions as illustrated in the job aid, ultimately the woman will decide where to store her money. The beads allow for a discrete and visible way to track savings progress while keeping money secure.
- The size of bowl and denomination of currency represented by each bead should take into consideration amounts typically put aside by women to save for delivery expenses.
- Other easily available materials like seeds, stones, or other types of hair beads can be used as the tracking item. Materials can be recovered after delivery for sustainable re-use, while encouraging women to continue this saving method with other items they may have on hand.

Materials

**DOWNLOAD TBA PLANNER
AND STORY JOB AID**

EXPLORE MORE TESTED SOLUTIONS

Additional Resources

LEARN MORE:

- **Tested Solutions for Respectful Maternity Care**
A complementary package of behavioral solutions

Images courtesy of John Healey Photography



All women deserve to give birth in a safe space. Take action now.

For more information about our tested solutions for supporting facility-based delivery,
contact the

ideas42 Global Health Team at gh@ideas42.org

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