Community Education

Community Education and Mobilization

idwife means "with woman", wherever she may be. In many parts of the world, most women lack access to a skilled provider who can respond to health emergencies; women are often unable to leave their communities for any number of socio-cultural, economic and gender equity reasons. Although women are frequently, if not always, responsible for the well-being of the family, they often lack the means to acquire information and education and access to basic health care. Their decisions are guided by age-old traditions that have deep cultural significance and may or may not contribute to the health of their family members.

ACNM's guiding principle in community based work is to stand with communities in their quest for improved well-being, and to facilitate that path. ACNM uses the guided sharing of peer-to-peer experiences to help communities "connect the dots" between

cause and effect and to come to agree on both individual and collective actions which will be taken in response to health needs. This approach allows for successful negotiation between individual and cultural beliefs and the introduction of new concepts. Purposefully educating communities, rather than individuals within communities, results in a more resilient platform for lasting change. When the community is the

targeted participant, there is increased reinforcement of key concepts between members and a higher likelihood of social support for desired behaviors and actions. Knowing both what to do, and that it will be supported by your community, empowers individuals to make healthy changes and to respond to emergency situations.

ACNM utilizes a cascade training approach and has extensive experience and expertise

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in designing and implementing group based learning models, training in facilitation skills, the use of community-based facilitators, and negotiating cultural beliefs with with health-seeking behavior. ACNM has been helping educate and mobilize communities for two decades regarding prenatal care, family planning, sexually transmitted diseases, birth preparedness, and maternal and neonatal danger recognition and action.

Home Based Life Saving Skills (HBLSS)

Working in health facilities led to the recognized need for earlier intervention at the community level to ensure timely referral. Now in its second edition, ACNM developed Home Based Life Saving Skills, a community centered competency-based behavior change program in response to that need. It has a flexible, modular design comprised of 12 preventive and life saving skills topics appropriate for low to no literacy populations. The overall goal of HBLSS is to work with pregnant women and their families to develop consensus on life-saving actions that are not only safe, but also feasible and acceptable to women and their families in a home setting until they reach a referral facility. HBLSS is unique in that it works to enhance, rather than replace, existing care practices. Whereas individuals and Continued...



"In the past we sat and watched with an emergency, now we can seek help."

—Hatian participant

communities may have felt powerless in the past as they faced complications, HBLSS prepares them to take specific, acceptable actions.

To date HBLSS has been implemented in more than 20 countries across large, primarily rural regions where unattended home birth is the overwhelming norm. It is currently part of the National Institutes of Health (NIH)/National Institutes of Child

Health and Human Development (NICHD)-funded Emergency Obstetric Care (EmOC) Team Trial; was included as a Promising Approach in the World Bank's "Accelerating Progress towards Achieving the MDG to Improve Maternal Health" and was recognized in the International Conference of Midwives (ICM)-International Federation of **Gynecology and Obstetrics** (FIGO) 2006 Joint Statement on Community-Based Strategies for Postpartum Hemmorhage (PPH) prevention. HBLSS is often referred to as "transformative" and "empowering" and has been shown to dramatically increase referral rates and utilization of health care facilities. In an effort to expand access to this powerful

tool, ACNM and CORE group have formed a joint initiative to develop tools to assist in implementing HBLSS within existing community mobilization platforms and alongside complimentary programs. The eloquent methodology developed for HBLSS can be adapted to nearly any topic in nearly any context. As an example, it has been used as part of a land restoration project in Zimbabwe.

HBLSS METHODOLOGY

STEP 1: Review the previous meeting/ problem

STEP 2: Ask what the participant knows

- What did you see/hear? (signs)
- What did you/they do? (action)
- What happened? (outcome)
- What can cause the problem? (cause)

STEP 3: Share what the trained health worker knows

STEP 4: Come to agree on what to do

STEP 5: Practice the Actions

STEP 6: How will you know the actions are helpful?

STEP 7: What can we do to prevent the problem?

Overview of **ACNM's Global Expertise**

As the professional organization of certified nurse-midwives and certified midwives in the U.S., ACNM and its Department of Global Outreach are uniquely positioned to lead efforts in strengthening the profession of midwives and other health care workers around the world. Over the past three decades through working in more than 30 countries, DGO has developed invaluable institutional knowledge of the components required to build a profession that creates competent and qualified providers. By calling on the programmatic and technical expertise of its staff and membership, ACNM can provide support for the full range of clinical maternal and newborn health topics.

The following are areas of expertise:

- Development and implementation of in-service training systems
- Integrated pre-service strengthening
- Strengthening of midwifery and other health professions
- Community education and mobilization

ACNM emphasizes partnership and capacity building with both individuals and organizations and incorporates flexibility and creativity with evidencebased best practices. A systems approach which improves accountability is employed to support quality of care. Leadership from ACNM staff is initially provided while simultaneously strengthening the locus of control and ownership of projects within countries.

For more information, contact:

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