Using community health workers to increase birth in health facilities
Problem

• Low rate of women delivering at health facilities in rural areas Tanzania

• Poor birth preparedness such as low savings for maternal related complications, low take up of antenatal care
Intervention

• Provide information on birth preparedness plan to the community through trained Community Health Workers to increase the rate of health facility delivery
Research question

1. Can information on birth preparedness plan delivered by trained health workers increase the rate of health facility delivery?

2. Can trained CHWs be more effective when provided with incentives?
Theory of change

**INPUT**
- CHWs
- FUNDS
- TRAINING

**OUTPUT**
- TRAINED CHWs WITH ADEQUATE MATERIALS
- INCREASED BIRTH PREPAREDNESS
- INCREASED BIRTH AT HEALTH FACILITIES

**OUTCOME(S)**
- REDUCED MATERNAL DEATHS

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**GOAL**
Evaluation design

Randomized Control Trial
Unit of Randomization: Community
• Group 1: CHWs Trained on BP without incentives
• Group 2: CHWs trained on BP with incentives
• Group 3: Comparison
Evaluation design:

- Group 1: CWHs Trained on BP without incentives
- Group 2: CWHs trained on BP with incentives
- Group 3: Comparison

1. Can information on birth preparedness plan delivered by health workers increase the rate of health facility delivery?
   - **Compare group 1 with Group 3 or Compare group 1 & 2 with Group 3**

2. Can CHWs be more effective when provided with incentives?
   - **Compare group 1 with Group 2**
Data collection

• Collect delivery data from health facilities (DHIS)
• Collect antenatal care data from health facilities
• Birth preparedness data through survey
  • Savings, antenatal take up, location of delivery, male involvement
• Collect information on pregnancy and birth and death registry from the community

Sample size

➢ 50 villages per group, will use power calc to determine final number of the group
How can results be used

• Provide information to improve program
• To inform policy makers for evidenced decision making
• Best practice to other programs (to adapt & adopt)
Thank you