



Working Group Issue Paper: Health of Women and Children

Rev. November 20, 2018

Preamble

Each of CCIH's four thematic working groups (integration of faith and health, health system strengthening, community-based primary care and health of women and children) was invited to develop an 'issues paper' to serve as an agenda for CCIH action. This is one of the four resulting papers. Working groups are developing action plans based on these at the CCIH Annual Conference in June 2019. Suggestions and contributions are always welcome.

Introduction

The Health of Women and Children is a focus area in the Christian Connections for International Health 2016-21 Strategic Plan, which states: "Vulnerable women and children are a priority for God. Just as CCIH is a leading Christian voice on healthy timing and spacing of pregnancies, we seek improved health and wholeness for women and children." The Health of Women and Children Working Group (HWC-WG) works from that mandate with two key guiding principles:

- Collaboration. The HWC-WG aims to avoid duplication by sharing information about what participating FBOs and practitioners are doing.
- Partnership. The HWC-WG recognizes that shared faith makes CCIH different from other similar networking consortia in the global health sector. CCIH (and in turn, the HWC WG) provides a forum for connecting participating members and organizations around faith-inspired interventions.

The Working Group meets at least twice each year (once in person and at least one other webinar or conference call). The 2018 in-person meeting was held with current chairs Allison Flynn and Paul Mosley on July 14, 2018 during CCIH's Annual Conference, to identify topics and issues relevant to participants in maternal and child health and suggest actions for the HWC-WG to pursue.

Framing the Question

Prior to the meeting, guidelines for framing the discussion were set in conversation with Mona Bornet, CCIH Program Director. A few key questions emerged:

- What do members think is missing from the Christian space in the realm of MCH? What opportunities and/or limitations do we see around MCH issues for Christian FBOs and Practitioners?
- What is the value added by FBOs or Christian health professionals working in the field of maternal and child health? This goes past general topics of interest to the group, and seeks areas where a “Christian” perspective adds depth or may be needed.

Discussion from the July 14 Meeting

INTRODUCTION

The co-chairs shared a brief introduction to the HWC-WG for participants, with the purpose of the meeting (see ‘framing the question’). Participants were invited to introduce themselves and share areas of interest for the HWC-WG [list of meeting participants can be found on page 3].

Members noted a key role of CCIH, in helping to bring the “Paul and Barnabas” of community and facility-based approaches together. This is an opportunity: as the HWC-WG, we need not manage the tension between these health approaches, but consider the entire continuum of care. It is not an ‘either/or,’ but a ‘both/and’. The message we pursue is holistic, comprehensive health for women and children with the opportunities we have to engage as Christians.

ACTIONS TO PURSUE

Participants were asked to suggest possible actions coming out of the Healthy Women and Children strategic priority from CCIH. There was consensus around the following ideas:

- See CCIH increase its visibility in the global health community. This could include exposure through an article on Devex promoting work with FBOs and their involvement—highlighting and giving visibility to the strong work being done.
- Webinars and learning opportunities, with outreach to other listservs (in public health and other faith-based networks) to increase participation, networking, and reach
- Developing a concept paper to share with USAID which identifies gaps in MCH and USAID funding and shapes a vision for how USAID can fund FBOs to fill these gaps. This could come under the general authorship of CCIH (as opposed to from leaders of a particular organization), perhaps from CCIH board members.
- Matching grants (one such gap): perhaps CCIH could be the secretariat.
 - What if CCIH had focus countries? Where the network of FBOs were more connected and CCIH provided communication backbone (modelled after CORE

alliance in Haiti, or ACCORD). Part of the challenge with MCH in some places is that there is so much going on that it might be better to connect organizations working already, rather than do something new.

- This could also include a matching grant mechanism for smaller scale FBOs to provide opportunities for small grants to scale up or test something new.
- CCIH could look into help ministry, working more closely with ministries in churches.

SPECIFIC TOPICS

Several potential focus areas were mentioned, keeping in mind the previous year's key focus area of breastfeeding. With consideration of framing the topic in terms of the "Christian bridge" (how do Christians address these topics?), the following areas were discussed as potential key areas of involvement for the HWC-WG moving forward.

- Malnutrition—using faith leaders to address this through a theological lens.
 - Stunting: Could a focus on parenting, for example, be a potential entry point at the household level for faith-based behavior change?
- Maternal Mortality (for example, Liberia has rate of 1072)
 - Quality facility-based care: working with service providers to improve and implement quality care standards, leading to better care and increased demand for services
 - Addressing the continuum of care for mothers at both community and household levels
 - Christian Space Responses and cross-cutting themes to consider include:
 - Promoting adherence to Baby Friendly Hospital Initiative (BFHI) guidelines.
 - Respectful maternity care. Good stewardship—Christians should be leading the world in promoting dignity and compassionate care.
 - Engaging men in these issues!
 - Strengthening couples and families/child care and parenting practices
 - Respecting wives' decisions about maternal health
 - Addressing Domestic and Gender based violence
 - Family planning sensitization of husbands and couples together.
- Documenting best practices and knowledge management
 - How do we share our learnings with others and facilitate learning between countries?
 - Is this information not flowing to those who need it? Can CCIH be a content manager and facilitate knowledge exchange between members? It is not clear if this is the gap, but a barrier analysis could help us to understand what is keeping members of CCIH who need information from accessing it, and what next steps could be to alleviating this issue if it is in the purview of CCIH.

MOVING FORWARD

This document will be shared with all participants and its findings used to identify the topic(s) for a conference call in the spring of 2019. The co-chairs will coordinate and discuss logistics with CCIH Program Director (Mona Bormet), CCIH Liaison to the HWC-Working Group.

Contributors and Attendance at July 14, 2018 HWC-WG meeting:

- Paul Mosley, MCC Tanzania, Co-Chair
- Allison Flynn, World Relief, Co-Chair
- Kaitlyn Hauter, CCIH Member Relations
- Jean Sack, Jhpiego Public Health Information
- Marion Subah, COP, Jhpiego Maternal Health Project, Liberia
- Kris Panico, URC Senior Business Development Associate
- Pastor Patricia Abraham, Heavenly Forum Ministries (Nigeria)
- Kosi AHAMA, President, Akasha Freedom Rays
- Cesar Ahouantchede, Executive Director, Espoir de la Famille
- Adrienne Allison, Consultant, FP/RH Advisor
- Priscilla Benner MD, MAMA Project Director
- Mona Bormet, CCIH Programs Director, CCIH WG Liaison