

# EquiNAM

building evidence to support equitable improvement  
in newborn and maternal health



# Summary

**Funder:** ESRC & DFID

**Period:** 1 July 2011 – 30 June 2014

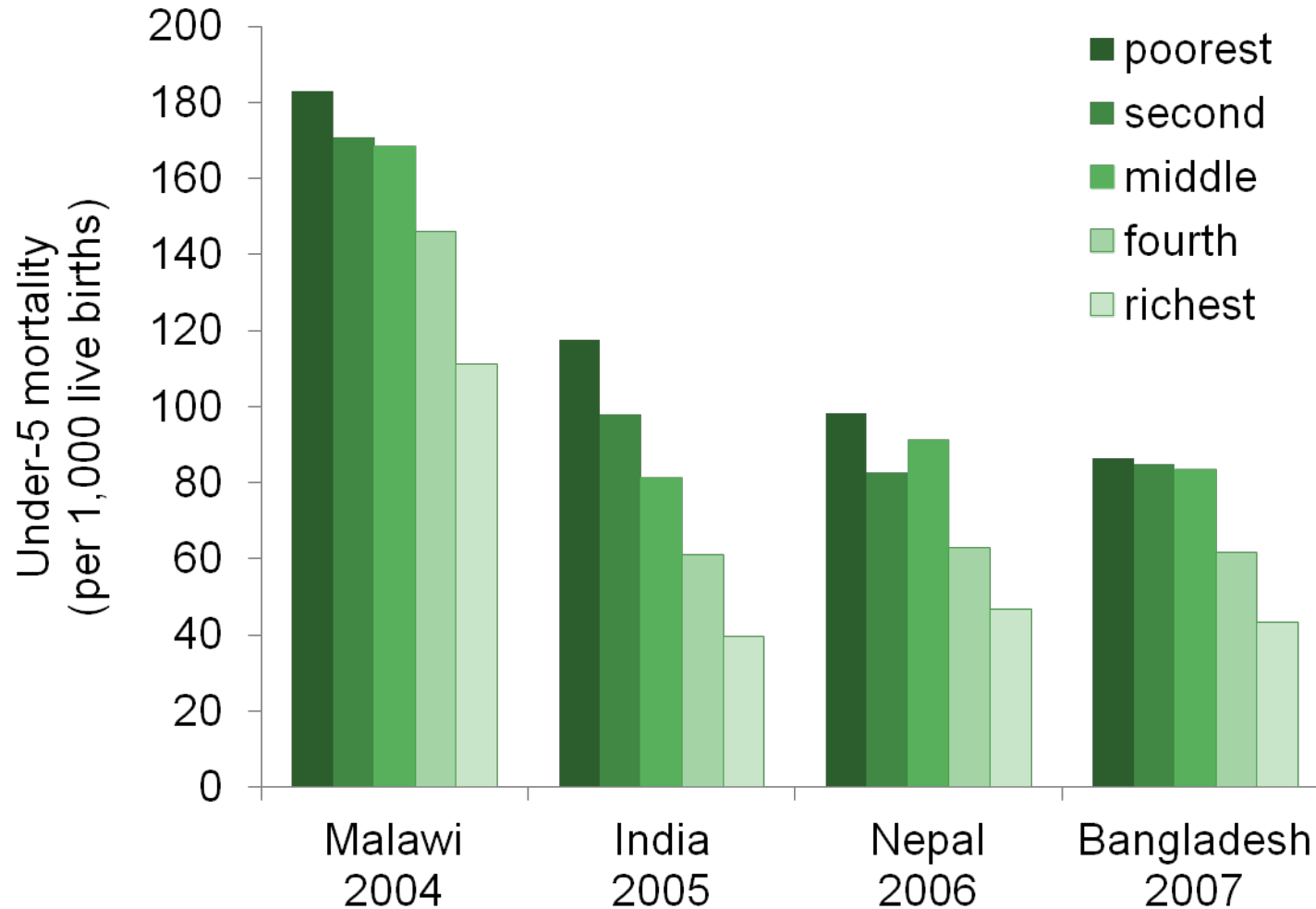
**Aims:**

- (i) **Research:** Build evidence to support equitable improvement in newborn & maternal health.
- (ii) Learn from & **engage with stakeholders** to support uptake of newly generated evidence base.

# Background: large inequalities

- Progress towards **Millennium Development Goals** has been highly uneven.
- **Lower socio-economic groups** lag behind their more fortunate compatriots for most MDGs.
- In particular, **inequalities in maternal and child health** are huge.

# Large poor-rich inequalities in mortality within countries



# Background: pro-rich interventions

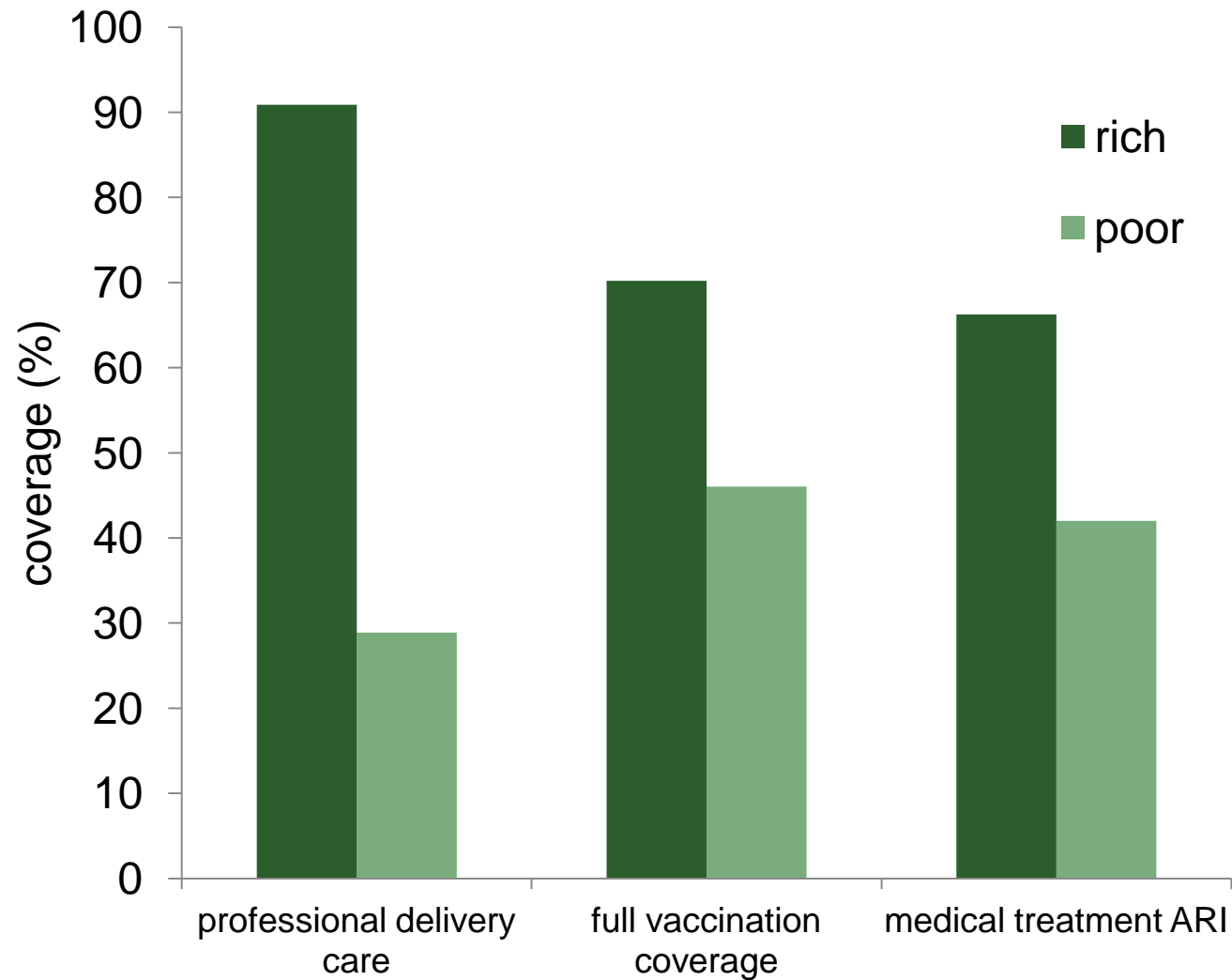
- To make things worse, **effective interventions** are known, but **rarely reach those who need them most.**
- **Even ‘basic’ interventions** that are thought to be pro-poor, such as immunisation, tend to reach the better-off to a greater extent.



# Inequalities in health care use

EquiNaM

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# Background: evidence gap

Unfortunately, little is known about:

- **how to effectively reach** poor and otherwise disadvantaged groups
- **how to address** socio-economic inequalities in mortality





# What we do

**EquiNaM**

building evidence to support equitable improvement  
in newborn and maternal health

An integrated approach to support an equitable improvement in newborn and maternal health:

## **Research**

generate evidence using high-quality data & randomised controlled trials

## **Stakeholder engagement**

learn from & engage with stakeholders to support uptake of our newly generated evidence base



# Pillars of our work

**EquiNaM**

building evidence to support equitable improvement  
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Our research and stakeholder engagement are built on 3 pillars:

**Surveillance**



**Randomised trials**



**Expert network**



# Pillar 1: surveillance

## Global network of surveillance sites:

- sites:
  - India: urban (Mumbai )
  - India: rural (Orissa, Jharkhand)
  - Nepal: Dhanusha district
  - Nepal: Makwanpur district
  - Bangladesh
  - Malawi
- prospective surveillance of birth outcomes
- post-partum interview
- combined population > 2 million





## Pillar 2: trials

### Cluster randomised trials

- Community mobilisation with women's groups
- Aim: reduce newborn and maternal mortality
- Meetings:
  - monthly
  - local facilitator
  - participatory learning & action cycle
  - picture cards, games, story telling



# Pillar 1 and 2 for research

## **Surveillance data to examine:**

- how socio-economic inequalities translate into inequalities in newborn & maternal mortality;

## **Secondary analysis of trial data to examine:**

- how to address the exclusion of lower socio-economic groups from interventions;
- how to reduce socio-economic inequalities in newborn & maternal mortality.



# Pillar 3: International expert network

Cutting-edge research, in-depth field experience,  
high profile in policy making



UK

Malawi

India

Nepal

Bangladesh

Netherlands

UCL CIHD

MaiMwana

Ekjut & SNEHA

MIRA

PCP-BADAS

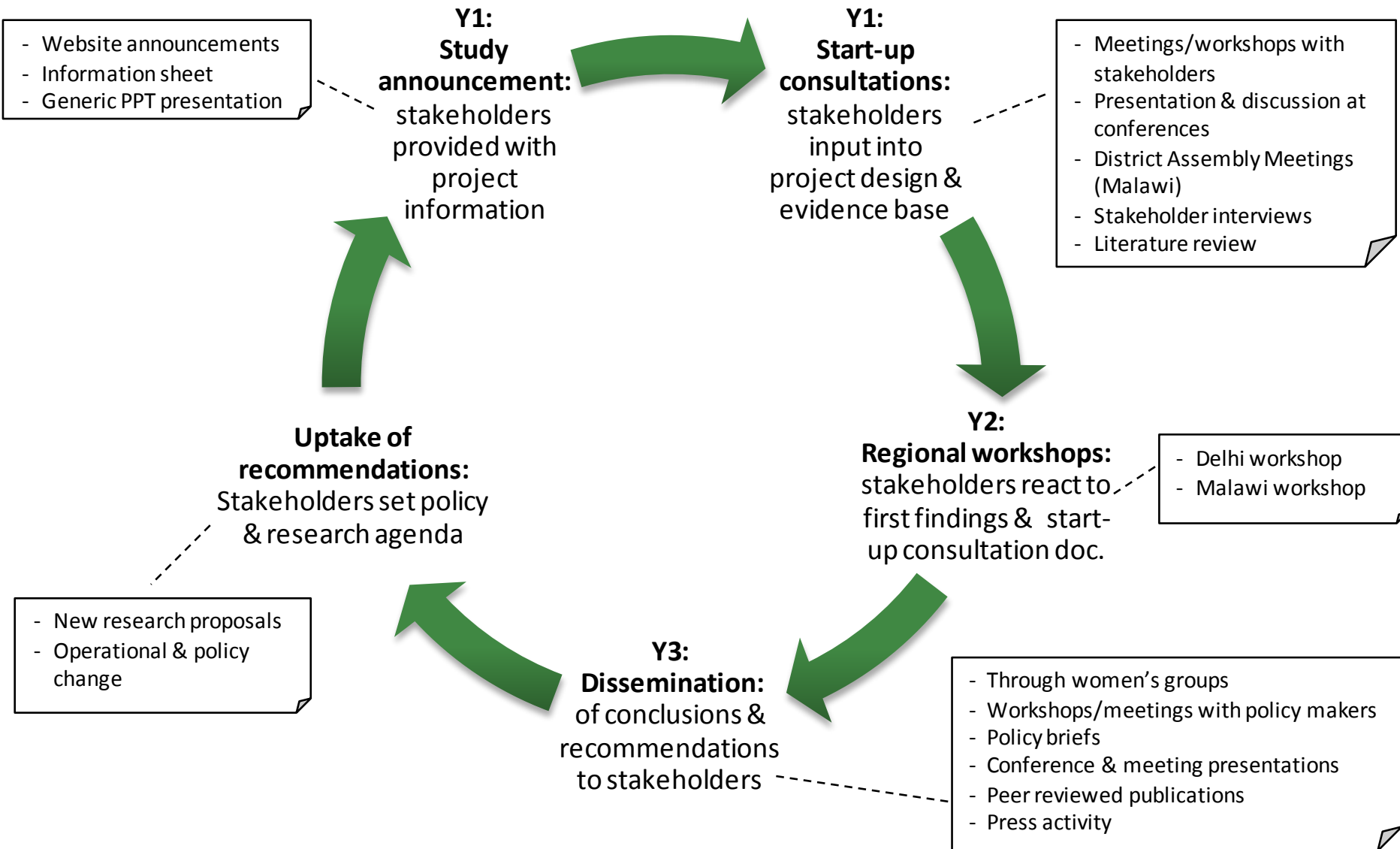
Erasmus University

# Pillar 3 for stakeholder engagement

## Engaging with and learning from stakeholders:

- drawing on **experiential evidence** regarding:
  - what works to reach lower socio-economic groups
  - how to reduce inequalities in newborn and maternal health.
- to **increase awareness** among those in power of the problem of large inequalities in maternal and newborn mortality
- to **ensure uptake** of evidence base

# Stakeholder engagement



# Stakeholder engagement

## Year 1: Study announcements

- Project website:

<http://equinam.global-health-inequalities.info>

Downloadable from website:

- Project Information Sheet
- EquiNaM PPT



# Stakeholder engagement

## Year 1: Start-up consultations

Main objectives:

- to **incorporate learning** from stakeholders regarding what works to ensure an equitable achievement of MDG4 and 5;
- to **build a platform** for ongoing engagement.

# Stakeholder engagement: start-up consultations

## Learning from stakeholders:

What is your (organisation's) experience regarding what works to reach lower socio-economic groups?

- Can you provide examples of interventions that worked really well in terms of reaching lower socio-economic groups?
- Which factors contributed to the success?
- Will these factors be different in other settings than your own?

# Stakeholder engagement: start-up consultations

## Learning from stakeholders:

- What does not work to reach lower socio-economic groups?
- Example of interventions that contribute to increasing inequalities between socio-economic groups?
- What are the main barriers to reduce inequalities in newborn and maternal health? How to overcome?
- What evidence do you miss to ensure that your organisation/project can reach lower-socio-economic groups & contribute to reducing inequalities in maternal and newborn health?

# Start-up consultation

## Year 2: Regional workshops

- Asia: India (Delhi)
- Africa: Malawi
  
- Present & discuss initial findings from:
  - surveillance and trial data analyses
  - stakeholder consultation

# How to get involved

Interested to get involved in our stakeholder engagement process or receive further info?

Please contact the Principal Investigator

Dr. Tanja AJ Houweling:

[info@equinam.global-health-inequalities.info](mailto:info@equinam.global-health-inequalities.info)

Or directly contact one of the project coordinators in one of the field sites. For details: visit the EquiNaM website.

# More information:

<http://equinam.global-health-inequalities.info>

