Our First Baby

A Gender-Transformative Approach to Increase Use of Maternal, Reproductive Health, and Family Planning among First-Time/Young Parents in Mozambique

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13 million adolescents (ages 15–19) worldwide will give birth this year. They will have:

- Education needs
- Health needs
- Economic needs
- A window of opportunity for social norms transformation
Methods: Reaching Young Mothers in Mozambique

• Formed discussion groups of young mothers.
  • Provide accurate information about health.
  • Encourage health service use.
  • Build social support.
• Invited male partners.
• Engaged parents of young parents.
Methods: Our First Baby

• Community consultations
• Pre-testing
• Pilot
• Expanded implementation
Pre-Test Feedback

• New and important information
• High interest in family planning (FP) information
• Active role of men/fathers
• Preference for interactive sessions
Pre-Test Feedback

• Challenging social norms and cultural beliefs
  • Nutrition
  • Pregnancy status
  • Condom use

Photo by Kate Holt, Jhpiego.
Our First Baby: Approach

• Held interactive, small-group discussions.
• Used flip book and facilitator guide.
• Sessions led by trained facilitator.
• Young fathers were invited to certain sessions.
Our First Baby: Sessions

- Fertility and pregnancy
- Trimesters of pregnancy and the prenatal consultation
- Caring for yourself during pregnancy
- Birth planning and delivery
- Father for the first time!*
- Newborn care, exclusive breastfeeding and postpartum consultation*
- Healthy timing and spacing of pregnancy*
- FP*
- Sexually transmitted infections, HIV, gender-based violence, rights*

Initially, male partners were invited to join these five sessions, but the team felt that men should be invited to attend all.
Pilot Test Feedback: Facilitators and Supervisors

• Some material was too technical, particularly HIV.
• Flip book was too small.
• Had trouble mobilizing men and maintaining their participation.
Pilot Test Feedback: Participants

- Preferred personal manuals or information, education, and communication materials.
- Wanted samples of FP methods for demonstration.
Pilot Test Feedback: Participants

- Wanted sessions to be scheduled more frequently or have two sessions held on the same day.
- Appreciated the importance of the information.
- Appreciated partner learning how to help out.
## Results

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<th>Policy</th>
<th>Supply</th>
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<td>• Engage stakeholders early.</td>
<td>• Who we train is important.</td>
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<td>• Address holistic needs.</td>
<td>• Ensure facility linkages for continuum of care.</td>
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<td>• Ensure youth-responsive health care.</td>
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<td>• Include an aspect of social support.</td>
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<td>• Challenge gender and social norms.</td>
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<td>• Emphasize the benefits of health service use.</td>
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Planned Program Documentation

• Results of service use from monitoring data
• Interviews with:
  • *Our First Baby* facilitators and supervisors (maternal and child health nurses)
  • District and provincial health officials
  • MCSP implementing staff
• Successes, challenges, and recommendations for improvement and scale-up