

# Channels of Hope for Maternal Newborn Child Health

## OVERVIEW

Channels of Hope is an interactive process to create a safe space for faith leaders, their spouses and faith communities to become active participants in the well-being of children through science-based information and insight from religious texts. It reaches to the root causes and deepest convictions that impact attitudes, norms, values and practices toward the most vulnerable. The process is grounded in guiding principles from participants' religious texts and is designed to move the heart, inform the mind and motivate a sustained and effective response to significant issues. Channels of Hope equips faith leaders to apply their religious texts to key social issues and encourage other faith leaders and faith communities to do the same.



## The Channels of Hope process

Channels of Hope is both a methodology and a process focused on partnering with local faith leaders, their congregations and communities for sustainable solutions to community needs. The process is structured into four phases of activity: prepare, catalyse, strategise, and empower.



## The Channels of Hope for Maternal Newborn Child Health

Faith leaders and communities often lack necessary mindsets, skills and information to engage in a helpful way on health issues. Rather, they often can be the drivers of wrong information, creating barriers that prohibit people from visiting clinics, receiving vaccinations, or using birth spacing methods. Their influence is essential to address early marriage, harmful traditional practices, treating women and girls equitably, encouraging the involvement of men in maternal newborn child health (MNCH) or addressing stigma.

Channels of Hope for MNCH is designed to help actively deconstruct these religious and social barriers to health and equitable gender relations, as well as equip faith communities to respond compassionately and practically to the serious MNCH issues in their faith communities and the

broader community. Through this process, participants contribute to positive changes that lead to healthier mothers, pregnancies and young children.

### Key outcomes

- Faith communities are engaged in actions that contribute to healthier mothers, pregnancies and children
- Participants and community members practice birth spacing
- Community members access improved prenatal care, antenatal care and care for children under 5

## Templeton research in Ghana and Kenya

In Africa, more than four in every 10 women of reproductive age want to avoid pregnancy, a total of 125 million women. However, 47 per cent of African women who do not want to become pregnant—58 million in 2017—either use no contraceptive method or use traditional methods, which typically have low levels of effectiveness. If all unmet need were satisfied, there would be a decline of about 80 per cent in the annual number of unintended pregnancies (from 23 million to five million per year), unplanned births (from 12 million to two million) and abortions (from nine million to two million). A recent study leveraged Channels of Hope to promote the use of family planning through messages on healthy timing and spacing of pregnancy.

In Kenya, 18 per cent of married women had an unmet need for family planning services with 10 per cent in having an unmet need for spacing and 8 per cent having an unmet need for limiting. In Ghana, 30 per cent of married women had an unmet need for family planning services with 17 per cent having an unmet need for spacing and 13 per cent having an unmet need for limiting.

The project results saw an increase in contraceptive prevalence rate from 5 per cent to 12 per cent in the intervention site among mothers with a child under 2; knowledge of adequate birth spacing increased among mothers with children; significant increases in knowledge of three or more modern methods of family planning was observed in the intervention site—increasing from 41 per cent to 76 per cent, compared with an increase from 73 per cent to 83 per cent in the control area; unmet need for

spacing, increased significantly (<0.001) by 23 per cent points in the intervention site, with no significant change (=0.05) in the control site. This is another indication that Channels of Hope might positively influence faith leaders to speak about family planning programmes and help increase knowledge and understanding thus increase demand that surpass existing supply.

### Story of transformation in Kenya

Siaya county, where Olivia and George live, reports one of Kenya’s highest maternal mortality ratios—a reported 448 mothers die for every 100,000 live births versus 14 per 100,000 in the United States. The infant mortality rate (111/100,000) is more than 18 times higher than that of the U.S. (6/100,000).

Early pregnancy is also a problem in Siaya county. The average age for a girl’s first delivery here is about 16. Expectant girls aged 15 to 19 years are twice as likely to die from pregnancy-related causes as women aged 20 to 24. Their infants face a higher risk of dying before their first birth. And when a child is born less than two years after the previous birth that child is 60 per cent more likely to die as an infant than a child who is born three to five years later.

When World Vision offered the first Channels of Hope course on healthy timing and spacing of children/family planning in partnership with the Ministry of Health, Olivia registered immediately. She was one of 200 faith leaders from a wide cross-section of denominations who signed up. Spouses were invited to attend the training also.

‘I suffered because of my ignorance [about family planning] and I didn’t want that to happen to other women,’ she says. ‘I thought the training would be a good way to learn to help young married women in my community and my church.’

The course was an eye-opener for Olivia, then 35 years old. She learned about the importance of waiting at least six

months after a miscarriage before trying to become pregnant again, as well as the risks that women face in giving birth after age 35. The curriculum also covers family planning contraception options and trains pastors how to refer couples to health clinics where trained professionals can advise on the methods right for them. Importantly, Olivia also gained a fresh perspective on biblical passages related to family planning—insights and information she eagerly shared with George, who was unable to participate in the training because of demands on the farm.



‘After the course, Olivia helped me understand that we are not called to fill the earth with children by ourselves,’ reflects George. ‘We are called to be fruitful and care for the ones we have. It was not easy for me to accept that we would not have more children, but...I realise now that we are blessed to have three.’

Olivia, 37, says the training changed her ministry and her marriage.

For more information on World Vision’s Channels of Hope work please visit [www.wvi.org/faith-and-development/channels-hope](http://www.wvi.org/faith-and-development/channels-hope)