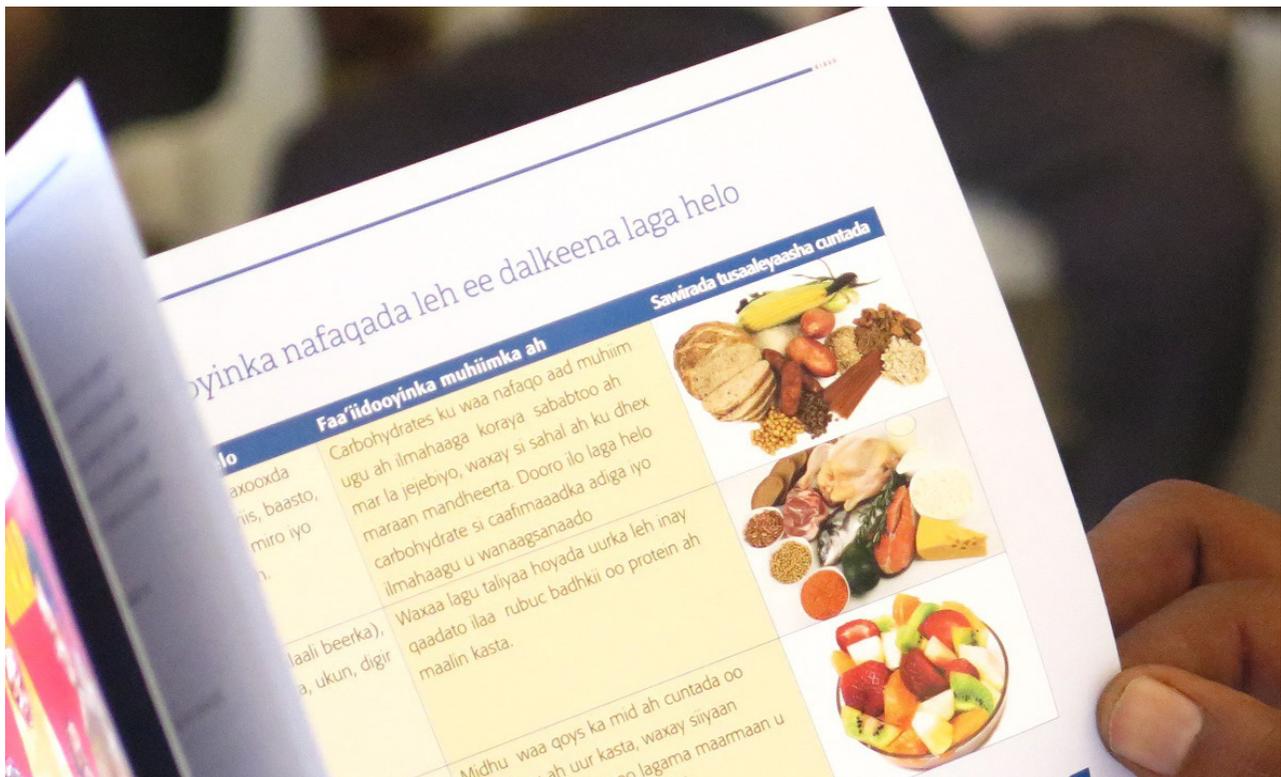


MEN'S CLUB

EVALUATION SUMMARY

December, 2020





1.0 BACKGROUND

Women in Somalia and Somaliland have a one in 20 lifetime risk of maternal death making the maternal mortality rates in Somalia and Somaliland amongst the highest in the world. It is estimated that the maternal mortality ratio is 699 deaths per 100,000 live births (SHDS 2020)1 in 12 (UNICEF, 2019).

Over 70 percent of Somali women give birth at home under the care of an unskilled attendants. Little less than one-third of births are attended by skilled personnel. Childhood immunization coverage (child-

ren who received all basic vaccinations) was only 10.7 percent in 2020 SHDS, only 17 percent of women received two or more modes doses of tetanus toxoid during their last pregnancy.

Somalia and Somaliland ministries of health (MoHs) and Population Services International (PSI) are implementing the demand creation for health services component of FCDO's (formerly DFID) Somali Health and Nutrition Programme (SHINE) programme dubbed SAHAN (Somali Advocates for Health and Nutrition).

2.0 PROGRAM DESCRIPTION



SAHAN research findings show that a Somali woman trusts her husband's wisdom and leadership; she also expects that her husband is well informed and acts for the good of the family.



Even though husbands have low knowledge about health matters and harbour myths about modern birth spacing methods, the husband remains the key determinant for family health outcomes, because he is the decision maker.



The WHO recommends that involvement of men during pregnancy, childbirth and after birth is imperative in supporting improved self-care for women, improving home care practices for women and new-born, and improving use of skilled care during pregnancy, childbirth and postnatal period for women and new-born.



The Men's Club, one of SAHAN's piloted interventions, sought to increase Men's knowledge on maternal and child health matters and shift men's attitudes, beliefs, and perceptions on their role in maternal child health decision and practices. The objective of the intervention pilot project was to increase levels of health awareness and knowledge among men by providing awareness sessions in their natural settings.



It was designed around places where men regularly congregate for social activities. Somali men spend time together almost every day from 3pm to 8pm at Khat chewing places and tea shops. In these social settings, men tend to discuss current economic and political affairs but not much is discussed regarding maternal and child health issues.



3.0 EVALUATION STUDY METHODOLOGY



At the end of the pilot period PSI with MoHs conducted evaluation study to determine the effects of the Men's Club intervention on Men's awareness of maternal health and to document success and failure of the men's club intervention.



The study employed a mixed-methods approach. A quantitative survey was conducted in Awdal, Karkaar and Gedo regions, where the Men's Club was implemented using crosssectional study design. A sample of beneficiaries of men's club was randomly drawn from the beneficiaries.



Structured questionnaire uploaded on survey application was used to collect quantitative data. A qualitative survey was also conducted in the same regions, where beneficiaries, male champions (MCs), program teams, and MoH representatives were interviewed. Routine program data (MIS) was also analysed.

4.0 KEY FINDINGS

Description	
Number of sessions conducted	2,117
Proportion of target sessions conducted	94%
Total number of participants reached	5,852
Proportion of target participants reached	98%
Total number of participants who attended all the three sessions	4,313
Proportion of participants who completed all sessions	74%
Total number of referral cards issued	1,406
Total number of effective referral referrals	821
Proportion of effective referral referrals	58%
Number of men who reported that they had started saving for expected new-born	984
Number of men who reported to have started discussions with their wives after the sessions	1,823
Proportion of men who reported to have started discussions with their wives after the sessions	84%

TOPICS of MC

- Antenatal Care (ANC)
- Preparing for New Baby
- Nutrition
- Birth Spacing
- Facility Delivery

STUDY PARTICIPANTS

78%

AWDAL

62%

GEDO

74%

KARKAR

initiated these discussions with their families



Majority of the study participants in Awdal **(78%)**, Gedo **(62%)** and Karkaar **(74%)** regions initiated these discussions with their families. The main topics discussed included antenatal care (ANC), preparing for new baby, nutrition, birth spacing and facility delivery. **96%** of the study participants reported that they were willing to continue such kind of conversations.

Most of the study participants in Awdal **(89%)**, Gedo **(91%)** and Karkaar **(97%)** regions reported that the sessions were very useful. **94%** of the participants enjoyed the financial preparations for pregnancy, childbirth, and the emergency situations topics presented during the sessions. **89%** among them reported that they were currently preparing financially for current pregnancy.

83% also reported that they had discussed with their friends what they had learnt in the sessions.

89%

AWDAL

91%

GEDO

97%

KARKAR

Reported that the sessions were very useful

89%

Reported that they were currently preparing financially for current pregnancy

Reported that they had discussed with their friends

83%

96%

Reported that they were willing to continue such kind of conversations

Following the intervention, the study revealed that participating men were now more aware of the services been provided at health facilities and the importance of following up their wives' and children health and nutrition. Men also acknowledged the importance of financial preparation of new baby after they got knowledge from men's club sessions. However, it was noted that myths and misconceptions of birth spacing/family planning (FP) are higher in men than women.

It was noted that the facilitator's skills are directly proportional to the effectiveness of the session. The better the facilitation skills, the better the participation and therefore output of the sessions. So, it is advised that male champions be carefully selected in terms of communications skills, problem-solving and questioning skills as well as having them appropriately trained.

55% of the respondents said that it is important to space two consecutive childbirths by more than a year. Less than half (**43%**) had knowledge on

modern birth spacing. Short-term acting contraceptive methods were most common methods cited by respondents (**51%** for pills and **40%** for injectable), while **21%** and **7%** of them also had knowledge of Implant and IUD respectively, as long-term acting methods. Among those respondents who had knowledge of modern birth spacing, approximately **10%** reported that they have used it, with pills being the most common used (**17%**).

5.0 PROGRAM CHALLENGES



Some of the participants expected to be given money or allowance for attending the session as experienced in past interventions by other agencies.



Widespread misconception of birth spacing/family planning led to refusal by some men to participate in the sessions.



Sometimes it was difficult to track participants for them to complete all the three men's club sessions which were held in consecutive days.



Sometimes it was difficult to get the required minimum number of men for the sessions.

6.0 LESSONS LEARNT

Men who attended the sessions are now more aware of the services been provided at the health facilities and the importance of follow up their wife's health and nutrition during this time.

Men have started to show more appreciation of the journey of pregnancy and the preparation needed for their wives during this period.

Men started accompanying their wives after understanding importance of health facility visits and importance of their roles.

Men acknowledged importance and started of the financial preparation for expected new-born after gaining knowledge from the men's club sessions.

Men have higher myths and misconceptions on birth spacing/family planning.



7.0 RECOMMENDATIONS

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Future scale up of the intervention was recommended as all involved felt that it had been effective and appreciated.

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It was noted that the facilitator (male champion) skills were directly proportional to the effectiveness of the session. Emphasis is therefore recommended in the selection of male champions looking at communications skills, problem solving skills and acceptance within the community. This should be coupled with comprehensive training as designed in the intervention.

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There is need to strengthen the follow-up and referral systems of the intervention to increase the effective number of referrals.

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Almost all the key informants of the male champions recommended the program should provide and cover the refreshments/drinks like the tea during the sessions.

Reviews incentives for the male champions as they complained that the current amount of \$100 per month

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