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## Conference Abstract

## Moldovan-Swiss Perinatology Project: Community mobilisation for healthy pregnancies

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## Abstract

**Introduction:** The Moldovan-Swiss Perinatology Project started in 2006 with support from the Swiss Development and Cooperation Agency (SDC). Major reforms and investments were made in the perinatal system, but some assessments revealed that vulnerable women from remote rural communities still faced access barriers to mother and child health services. There was a need to strengthen the referral system to direct the most-at-risk pregnant women in the community to the first level of care.

**Aims:** A community mobilisation project was designed and piloted in selected rural localities to better identify barriers to care for vulnerable people and to test mechanisms for mobilising community actors for better access to and use of perinatal health services.

Results: The community mobilisation project followed the principles of the World Health Organisation's approach to working with individuals, families and communities (the IFC model). Informal groups of voluntary motivated individuals ("Family Clubs") were created to champion the cause of healthy families and to organise numerous public events to raise community awareness of health issues. The communication and counselling skills of community health specialists were strengthened to improve the provider-patient relationship, particularly in the area of antenatal education. Multidisciplinary teams of community specialists and local public authorities were supported to better coordinate the case management of vulnerable pregnant women. Teams of Youth-Peer volunteers were created and supported to promote reproductive health among young people.

**Conclusions:** Family Clubs and Youth-Peer teams were successful in reaching out to community members and largely contributed to health promotion efforts at the local level. The sustainability of Family Clubs was encouraged by strengthening their links to the local public authorities. Working within multidisciplinary teams reinforced linkages between community workers and the first level of care for better identification and referral of pregnant women. Stigmatisation of vulnerable

populations is high among community specialists: further capacity building and incentives are needed to improve providers' attitudes.

## Keywords

community mobilisation, moldova, perinatology, vulnerable population

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