

SUMMARY

Gender Integration Impact in Family Planning: The MOMENTUM Project

Project Background and Approach to Gender Integration

MOMENTUM is an integrated family planning, maternal and child health and nutrition intervention aimed at first-time mothers aged 15-24 and their male partners in Kinshasa, Democratic Republic of the Congo. The program trained men and women nursing students to attend prenatal and postnatal home visits and conduct group education sessions with first-time mothers and their male partners. **MOMENTUM is a gender transformative investment that explicitly aims to strengthen agency of first-time mothers to make decisions about the use of contraception.** Additionally:

- **MOMENTUM was designed with sustainability and institutionalization in mind**, and the program team worked closely with the Ministry of Gender, Family and Children and the Ministry of Health throughout the life of the project.
- The program designed a **gender transformative training for nursing students** to deliver family planning services in the community. The training included modules to encourage students to grapple with gender norms and attitudes around family planning and decision-making.

Gender Integration Insights from Implementation and Evaluation

- **The investment owner at the foundation played a key role in ensuring the program was designed as gender transformative.**
- Through a process of gendered problem exploration, the team recognized that **engaging the male partners of first-time mothers could contribute to the success of the program** and built several activities to engage these men.
- **MOMENTUM opened a new channel of community-based postpartum family planning service delivery**, increasing young women's access to these services and improving linkages to the wider health system.

Highlights of Impact Achieved

- **MOMENTUM was successful in increasing first-time mothers' use of modern family planning methods** in the postpartum period, with the intervention group 13.3 percentage points more likely to use modern methods than the comparison group.¹
- **First-time mothers were 9.8 percentage points more likely to report their male partner approving of the use of family planning** within six weeks after giving birth than women in the comparison group, and this impact was as high as 15.2 percentage points among those who were never married.²
- As a result of MOMENTUM, **partner communication related to family planning use improved** both immediately after delivery and further on in the postpartum period, and **first-time mothers reported a small improvement in their overall self-efficacy.**
- **Male partners** were more likely to be involved in maternal and newborn healthcare than those in the comparison group.

MOMENTUM is now being institutionalized by the Ministry of Health and Ministry of Gender, Family and Children. The updated curriculum is being rolled out in selected nursing schools in Kinshasa and is being integrated into the larger health system. The adapted iteration of the program includes first-time mothers of all ages.

Gender Integration Impact in Family Planning: The MOMENTUM Project

This brief was prepared for the Gender Integration Team with the purpose of: (1) Reporting on performance and impact of gender integration in PST investments for GE leadership and (2) Ongoing learning for the GI Team and GenderTech on effective GI approaches across PST sectors. The brief summarizes findings from MOMENTUM evaluation reports and an interview with the technical director of the MOMENTUM evaluation team.

Project Background and Approach to Gender Integration

MOMENTUM is an integrated family planning, maternal and child health and nutrition intervention aimed at first-time mothers aged 15-24 and their male partners in Kinshasa, Democratic Republic of the Congo. Implemented by Action Santé et Développement (ASD), Tulane University, Tulane International LLC, and Johns Hopkins University from 2018 to 2020, **MOMENTUM is a gender transformative investment that explicitly aims to strengthen agency of first-time mothers to make decisions about the use of contraception.**² The program worked with approximately 1,200 first-time mothers, their male partners, and other key household influencers and community members.

- **MOMENTUM developed a gender transformative training package in partnership with the Ministry of Gender, Family and Children and the Ministry of Health for nursing students to provide family planning and maternal, newborn, and child health (MNCH) services in the community.** The training was delivered to 150 students and included modules on gender norms and attitudes related to family planning and decision-making. The decision to work with nursing students was driven by the desire to engage more highly educated and scientifically trained service providers in community service provision, and to offer the students an opportunity to complete their internship in the community rather than at a clinic.
- **First-time mothers and their male partners received monthly home visits from trained nursing students before and after giving birth, which included counseling and simple healthcare delivery.** The counseling centered on family planning options, birth spacing, maternal and newborn health and nutrition, and gender equality. These sessions also included simple health screenings for both the mother and child and treatment of common childhood illnesses, as well as providing several short- and long-term contraceptive methods, and referrals when needed.

- **Monthly group education sessions were conducted for first-time mothers and fathers separately and focused on equitable gender roles, empowerment in interpersonal relationships, and sexual and reproductive health and rights.** The curriculums were adapted from Program M and Program P for mothers and fathers, respectively, and were originally developed by Equimundo (formerly Promundo). Program M includes educational workshops for young women to encourage critical reflection on gender norms, promote awareness about gender inequalities and rights, and develop skills for self-efficacy in relationships.³ Program P is meant to encourage men to be engaged as caring and equitable parents and provides concrete strategies and activities to encourage their active involvement as fathers.⁴ About half of first-time mothers in the program and 35 percent of fathers attended these sessions.
- **MOMENTUM included activities for other key household influencers and the community more broadly meant to create an enabling environment and shift norms around the use of contraception.** Key household influencers were identified through a human-centered design process and were engaged through street theater, positive deviant examples in community discussions, and video production and dissemination in the community. Through these activities, the program was able to reach the parents of both the first-time mothers and their male partners, as well as other important community members, and engage fathers more deeply.

From the outset, MOMENTUM was designed with sustainability and institutionalization in mind and was shaped in close partnership with the Ministry of Gender, Family and Children, as well as the Ministry of Health. The program team used the WHO publication, "Beginning with the end in mind" to plan for the longevity of the project, developing key relationships with stakeholders and planning for the systemization of project components early on.⁵ This meaningful buy-in and involvement of the Ministries came in part because the program intended to respond to some stated goals of the Ministries. The Ministry of Health was already planning to update the nursing school curriculum, but timely partnership with MOMENTUM meant that much of that work could be shared. Additionally, the government was very supportive of the project because it integrated family planning and MNCH where many family planning projects do not engage with pregnant people or new mothers.

One of the greatest successes of the program was to train nursing students to deliver the intervention components. This contributed to systems change in the area, whereby these students become better equipped to deliver family planning and MNCH services to first-time mothers and families. Importantly, the program took deliberate measures to include men nursing students. When nursing schools in the intervention health zones did not have enough men, they extended the search to schools farther away. The students underwent rigorous training, including on attitudes and bias related to gender, which they needed to repeat if they scored below a certain threshold. **The government is now incorporating this training into nursing school curriculums.**¹

Gender Integration Insights from Implementation and Evaluation

The investment owner at the foundation played a critical role in steering this project to be gender transformative from the start, and this was integrated into every stage of design, implementation, and evaluation. Beginning with an analysis of existing gender norms and problem exploration, the team went through several iterations of a theory of change to identify the key gender issues that were inhibiting the uptake of contraception in the postpartum period, including gender norms, lack of empowerment, and attitudes and behaviors among male partners. From there, the team selected interventions to improve those specific areas. Having strong support from foundation staff to be thoughtful about these issues was a clear driver of this gender transformative design.

From the beginning, the program was conscientious about including fathers in the program, reinforcing the role that fathers can play in shifting harmful gender norms related to care responsibilities and encouraging them to support their partner in making family planning and healthcare decisions. MOMENTUM purposely paired one man and one woman nursing student together to attend each home visit in order to better engage fathers. This pairing remained consistent for the life of the intervention over 16 months. Rather than develop interventions for fathers from scratch, the program used materials developed by Equipundo, an organization that has deep expertise in men's engagement.⁶ Fathers attended their own group meetings to support dialogue about the challenges of fatherhood, paternal engagement in MNH care, and postpartum family planning. The technical director for the program also noted that there were some instances of non-participant men being curious about and trying to attend the fathers' groups, demonstrating that there is a clear need and interest in such activities aimed at men.

The program appears to have been successful in opening up a new channel of delivery for postpartum contraceptive methods and community-based provision. In comparison groups, pharmacies and private hospitals and clinics were the most common source of contraceptives, accounting for 45 percent and 15 percent of current users, respectively. In intervention groups, the MOMENTUM nursing students became the most common source, with 30 percent of current users procuring contraceptives from the program, followed by 22 percent from private pharmacies and 15 percent from private hospitals and clinics.²

The program also encountered challenges through this round of implementation:

- **Participants valued the convenience of having a health service worker come to their home, with 79 percent participation in home visits compared to 54 percent participation in group education sessions for first-time mothers.**⁷ For male partners, the rate of participation was 56 percent and 35 percent for home visits and group sessions, respectively. The technical director for the program noted that transportation costs were the main cause of higher non-participation in the group sessions, which were held within the community, and that about half of the women in the program had moved during implementation. The program partnered with a local NGO to help track the mothers, and this increased the cost of the program.

Highlights of Impact Achieved

- **MOMENTUM was successful in encouraging more first-time mothers to use modern family planning methods in the postpartum period, with the intervention group 13.3 percentage points more likely to use modern methods than the comparison group.**⁸ The program had particularly strong impacts for the older group of women, aged 20-24. These women had significant improvements in family planning use at 2 months, 5 months, and 11 months postpartum. The intervention was also successful in shifting norms around the use of contraception, with significant improvements in first-time mothers reporting that they believe most new mothers in the community use family planning in the postpartum period, and that people important to them support first-time mothers' use of family planning methods. There was also a significant decrease in perceived negative community sanctions for family planning use.
- **Women participants were 9.8 percentage points more likely to report their male partners approving of the use of family planning within six weeks after giving birth than women in the comparison group.**² The results were even more pronounced among never-married women, who were 15.2 percentage points more likely to report their male partner's support at endline than at baseline. Men in intervention households also reported a significant improvement in injunctive norms and were more likely to believe key people in their family and community approved of the use of family planning methods in the postpartum period.⁹
- **As a result of MOMENTUM, partner communication related to family planning use improved both immediately after delivery and further on in the postpartum period.**¹ First-time mothers were 7.1 percentage points more likely to have discussed family planning with their partner after delivery than those in the control group.
- **Male partners saw an increase in gender-equitable attitudes from baseline to endline and were more likely to be involved in maternal healthcare than those in the comparison group.**⁸ About half the male partners had high support for gender equity at endline. Male partners who had participated in the program were more likely to attend an antenatal care check, to participate in birth planning, and to be present at childbirth.¹⁰

- **Self-efficacy of first-time mothers improved more for participants of MOMENTUM than for non-participants.**⁸ Measured through a generalized self-efficacy scale using 10 statements related to confidence, problem-solving ability, and resourcefulness, women in the intervention group saw a 2 percentage point increase in the mean self-efficacy score, with women aged 15-19 experiencing the greatest change.

MOMENTUM is now being institutionalized by the Ministry of Health and Ministry of Gender, Family and Children. The updated curriculum is being rolled out in selected nursing schools and is being scaled up and integrated into the larger health system. The next iteration of the program will include first-time mothers of all ages.

References and notes

- 1 Gage, A. J., Akilimali, P. Z., Wood, F. E., Gay, R., Olivia Padis, C., & Bertrand, J. T. (2023). *Evaluation of the effect of the Momentum project on family planning outcomes among first-time mothers aged 15-24 years in Kinshasa, DRC*. *Contraception*, 125, 110088. <https://doi.org/10.1016/j.contraception.2023.110088>
- 2 Wood, F. E., Woo, M., Gage, A. J. and Akilimali, P. Z. (2021). *MOMENTUM Endline Survey Report: First-time Mothers*. New Orleans, LA: Tulane University School of Public Health and Tropical Medicine.
- 3 See [Equimundo Program M](#).
- 4 See [Equimundo Program P](#).
- 5 World Health Organization & ExpandNet. (2011) . *Beginning with the end in mind: planning pilot projects and other programmatic research for successful scaling up*. World Health Organization. <https://iris.who.int/handle/10665/44708>
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- 8 MOMENTUM Impact Evaluation Results. Presented to Bill & Melinda Gates Foundation Staff. October 26, 2020.
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- 10 Gage, A. J., Wood, F. E., Woo, M., & Gay, R. (2022). *Impact of the Momentum pilot project on male involvement in maternal health and newborn care in Kinshasa, Democratic Republic of the Congo: a quasi-experimental study*. *BMC women's health*, 22(1), 460. <https://doi.org/10.1186/s12905-022-02032-1>

Acknowledgements

This brief was commissioned by the Bill & Melinda Gates Foundation's Gender Integration Team and researched and written by a team from the Global Center for Gender Equality (GCFGE), with valuable inputs and review from foundation staff and partner staff. The GCFGE Team included Amy Belle Pennington and Shelby Bourgault, technical review by Angela Hartley, Abigail Donner and Lucero Quiroga, and project management support by Whitney Walton. The brief benefited from interviews and review by members of the project team at Tulane University Anastasia Gage, Rianne Gay, and Jane Bertrand and review from foundation staff Gwyn Hainsworth, Graham Snead and Keiko Valente. The brief was copyedited by Kathy Schienle and designed by RRD Design.