

# AMDD experience with implementation research: Partners in the Staha Project

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# The Staha Project

1. Determine the nature, types, and prevalence of D&A in childbirth
2. Develop and validate tools for assessing D&A
3. Identify and explore the potential drivers of D&A
4. Design, implement, monitor and evaluate the impact of interventions to reduce D&A
5. Document & assess the dynamics of implementing interventions to reduce D&A and generate lessons



**Increase facility-based delivery**

**Reduce the % of women reporting any form of D&A**

**Consensus building on norms and standards**

District-level adaptation of charter

Facility-level adaptation of charter

Norms and standards of mutual respect

**Multi-level activation of mutual respect norms**

District and facility management policy and practice changes

Facility-based QI process to change environment/practice

Community-driven actions to support and monitor system

**Improved outcomes**

**Increased mutual respect**

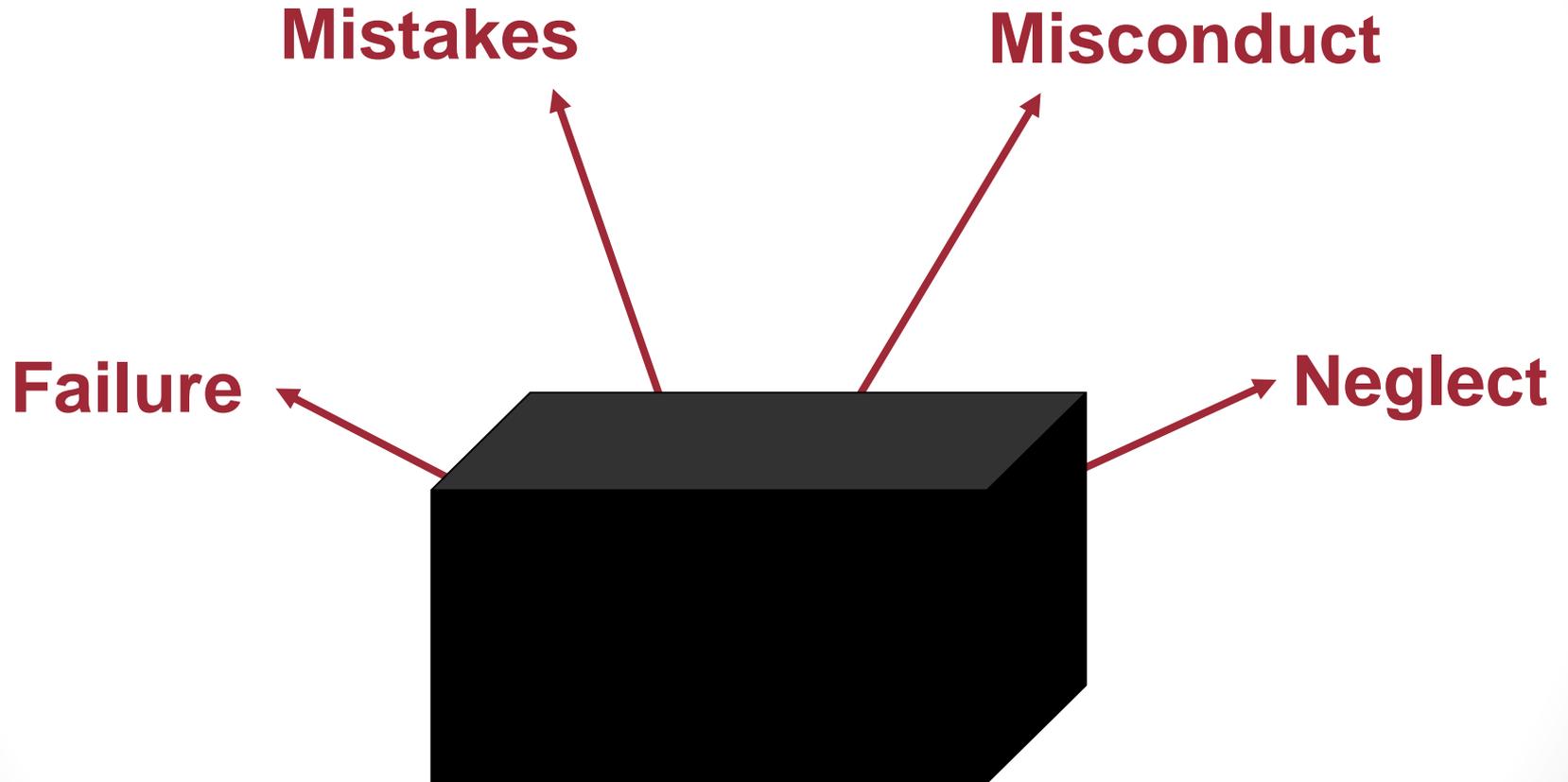
**Increased facility-based delivery  
Reduced D&A during childbirth**

**STAHA CHANGE PROCESS**

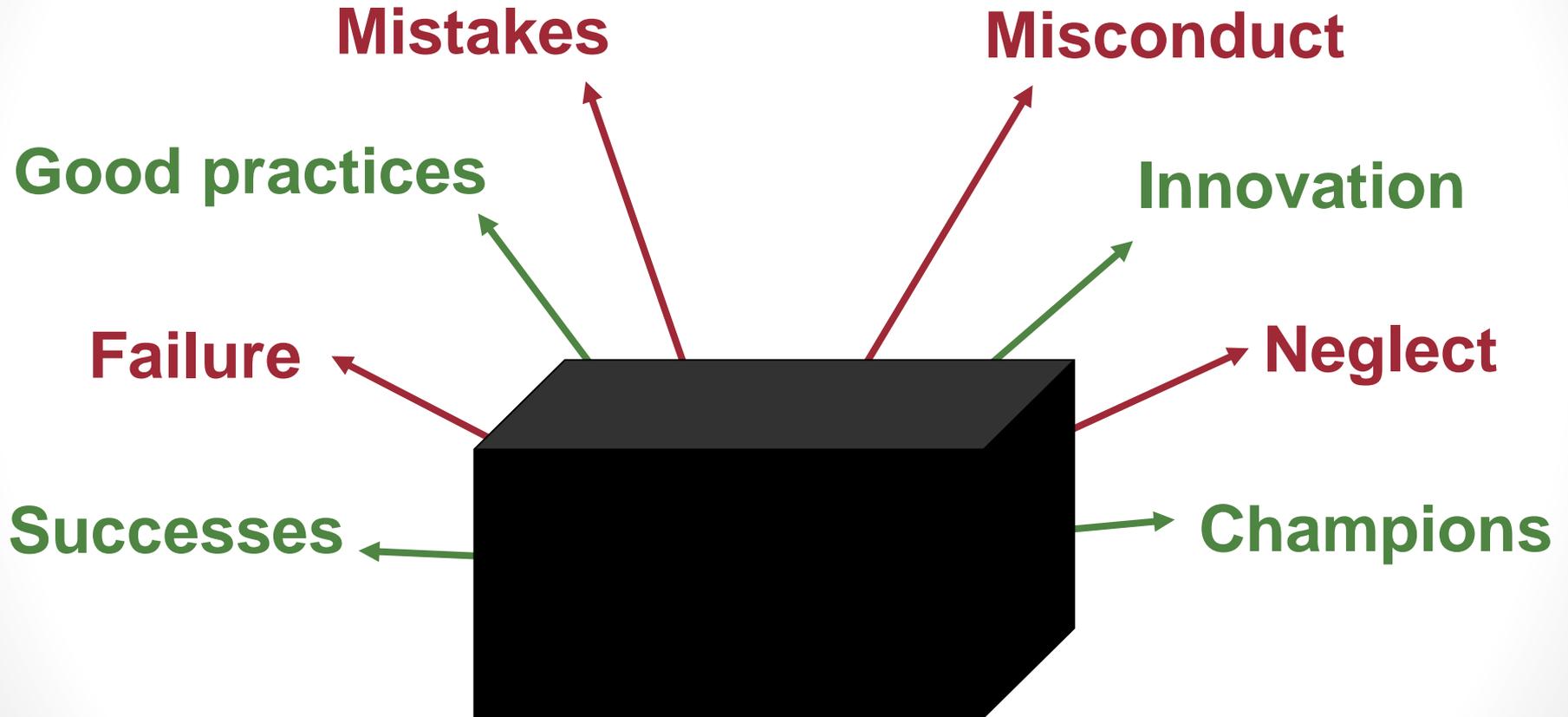
# The Partners

- Ifakara Health Institute (IHI)
- Averting Maternal Death & Disability Program (AMDD), Columbia University Mailman School of Public Health
- Tanzanian health system

# Opening the Black Box



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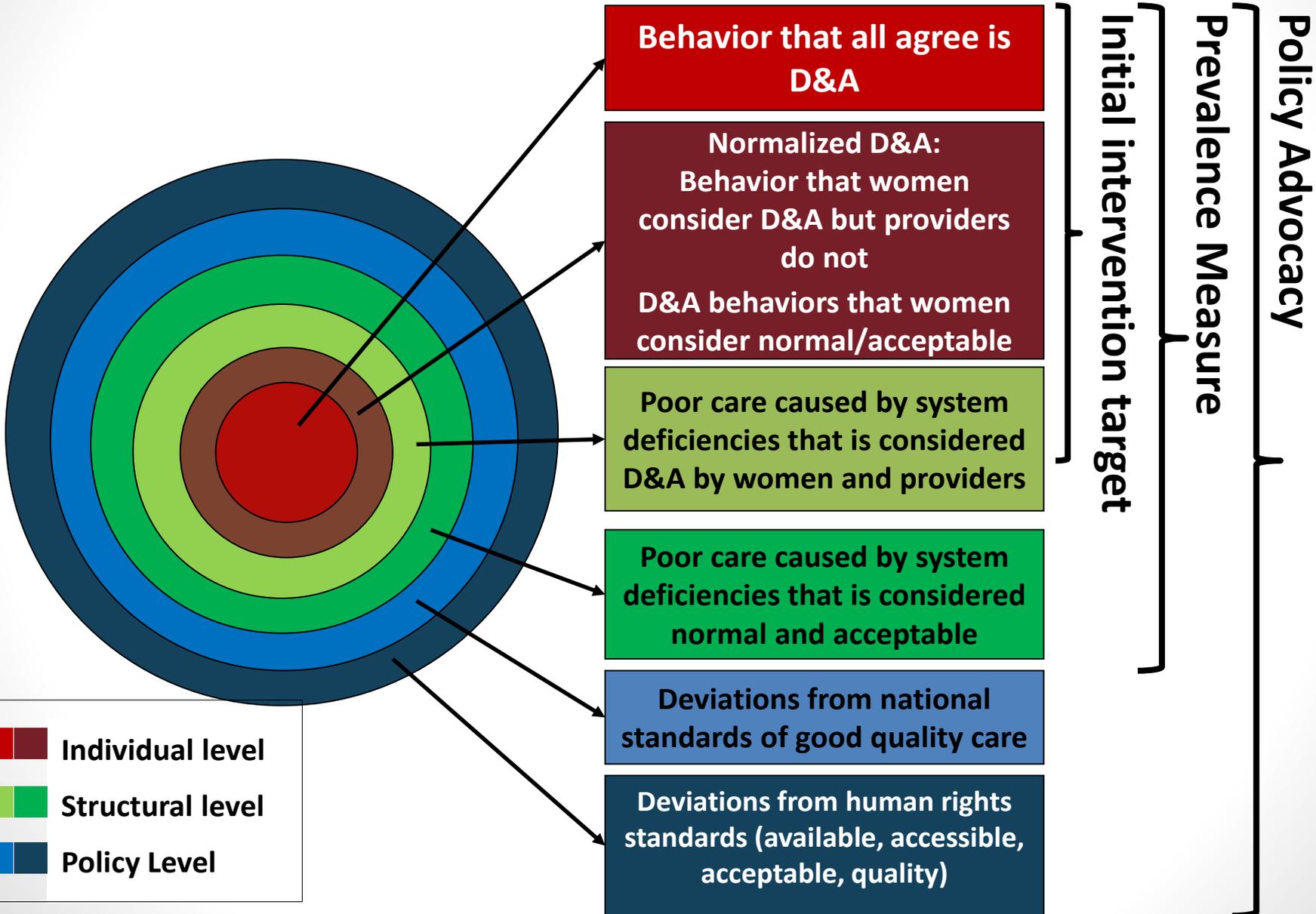


# Norms

**Evidence**

**Values/beliefs around the problem**

# Defining disrespect and abuse in facility-based childbirth



# Structures

**Hierarchy**

**Silos**

# Resources

**Financial**

**Human**

*I know I am talking to you here as researchers but I believe that this message may go further. I would like to request the government to make sure that it implements its policies because ensuring the implementation of its policies is how it gains the trust of the community. But if the government does not fulfill its promises to the community it's obvious that the community will no longer have trust in it.*

Charter Drafting Committee Member, Korogwe

**THANK YOU!**