

Supplementary file 4. Community engagement

Chipatala Cha Pa Foni started as a community program, developed by Malawians for Malawians. The initial concept for CCPF came from Soyapi Mumba, a software developer, and Clement Mwazambumba, who at the time, was a district AIDS coordinator. Their idea won a national campaign run by the Ministry of Health and Concern Worldwide to identify innovations for improving maternal and child health. NGO VillageReach partnered with Soyapi and local Malawi technology firm Baobab Health Trust to develop the technology platform and implement CCPF, which launched in Balaka district in 2011.

Since then, the community has been engaged in a number of ways to both strengthen the service and increase its use among target users. Needs assessments were undertaken and the program model developed through interviews with community health workers, traditional leaders and district health staff. A close relationship with the Balaka District Health Management Team provided linkages for CCPF program staff to engage with chiefs, communities and civil society, paving the way for the service to be made appropriate and acceptable for the users. The same collaborative approach with the District Health Management Team has been replicated across additional districts. Annual satisfaction surveys ascertain community feedback and satisfaction in the service.

Community engagement differs by district and supporting partners and their focus. Partners have used different approaches for community engagement in their focal districts, including the identification of, and engagement with community champions to address the unique needs of the community. For example, in the Kwitanda community in Balaka district, promotion activities are conducted by 18 health surveillance assistants (HSA), 12 of which are government employees and 6 are from VillageReach. The supervision of HSAs is performed by government following the necessary MoH protocols and guidelines. In 2013, three community health facilitators were engaged in Kwitanda to promote to promote CCPF and support other community-level health interventions. Other partners used different forms of community mobilization, including care groups, open-day events, and other promotional activities.

Since early 2017, ONSE has customized community engagement in each of the 8 original CCPF districts that ONSE supports. ONSE community mobilizers are present in each focal district to work with various community structures (i.e. champion communities, community health action groups, and area development committees), including on promotion of CCPF in the community. Some of the ONSE sub-grantee partners also promote CCPF in the districts. The activities to promote CCPF in the remaining 8 ONSE districts since early 2018 have led to similar approaches on community engagement, and are currently focused on briefing key district and community leaders on CCPF before moving on to wider sensitization campaigns.

In the DREAMS districts (Zomba and Machinga), VillageReach and other DREAMS implementing partners have organized open days, community sensitizations and radio campaigns since August 2017. The approach for community engagement has also included school events for adolescents and youth, youth clubs and community visitation activities by four Adolescent Advisors, who are managed by VillageReach staff.

The expansion of CCPF into the GIZ focal districts of Salima and Dedza took a different approach to community mobilization. VillageReach has aired radio jingles promoting CCPF, adverts and also organized phone-in programs (where the hotline workers answer questions from the population) in 2017 and again in 2018. The radio campaigns are complementary to the participation by VillageReach staff at meetings for District Implementation Plan and District Nutrition Coordinating Committee since 2016. In addition, GIZ's other two nutrition partners on the ground – Care in Salima and United Purpose in Dedza, also directly promote CCPF as part of their community-level activities.