Report On

Evaluation of Maternal Health Knowledge Levels Among Young Parents

BY Name: Tama Roy ID: 21264007

An internship report submitted to the BRAC Business School (BBS) in partial fulfillment of the requirements for the degree of Master of Business Administration (MBA)

BRAC Business School Brac University June 2024

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Declaration

It is hereby declared that

1. The internship report submitted is my/our own original work while completing degree at

BRAC University.

2. The report does not contain material previously published or written by a third party, except

where this is appropriately cited through full and accurate referencing.

3. The report does not contain material which has been accepted, or submitted, for any other

degree or diploma at a university or other institution.

4. I/We have acknowledged all main sources of help.

Student's Full Name & Signature:

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Tama Roy

ID: 21264007

Supervisor's Full Name & Signature:

Mr. Saif Hossain

Mr. Saif Hossain

Assistant Professor, BRAC Business School

BRAC University

Letter of Transmittal

Mr. Saif Hossain

Assistant Professor,

BRAC Business School

BRAC University

Kha-224 Merul Badda

Dhaka 1212, Bangladesh

Subject: Internship Report on "Evaluation of Maternal Health Knowledge Levels Among Young Parents"

Respected Sir,

With due respect, I would like to unveil my report of internship period on "Evaluation of Maternal Health Knowledge Levels Among Young Parents" based on BRAC's project named "Healthy Women, Healthy Families Project (HWHF)" along your direction.

I have given my best effort to complete the report with all necessary data and commended proposal in concise and comprehensive manner.

My belief my work will fulfill the desire.

Sincerely yours,



Student Name: Tama Roy

ID: 21264007

Date: May 25, 2024

Non-Disclosure Agreement

Date: June 12, 2024

The internship report on "Evaluation of Maternal Health Knowledge Levels Among Young Parents" is done by Tama Roy, ID: 21264007 under the supervisor, Mr. Saif Hossain, Assistant Professor, BRAC Business School, BRAC University to fulfill the requirement for the MBA program of BRAC University.

BRAC and the signatory student at BRAC University Tama Roy, ID: 21264007 have made this agreement that the report or any information will not be shared with any third party for any purpose.

This Non-Disclosure Agreement has made between

Full Name & Signature:



Tama Roy ID: 21264007

Full Name & Signature:



Hasmat Ali Area Manager, BHP-Urban BRAC HNPP, Tongi

Acknowledgement

My profound gratitude to my Almighty to provide me the robustness and enthusiasm to fulfill the report on time with proper data.

I like to convey my sincerest appreciation to my respected faculty, Mr. Saif Hossain, Assistant Professor, BRAC University. Your kindness and counselling help me to assemble this report in a right way.

I like to appreciate Mr. Hasmat Ali, Area Manager, BRAC to give me the chance to explore and experience the new things. His support and cooperation significant to finish the report satisfactorily.

Also thanked to others honorable employee to assist me by providing ample support and information to fulfill my internship requirement. They also help me collecting the necessary data. Without their support I may not bel able to collect so much data within this time.

Executive Summary

This internship report on "Evaluation of Maternal Health Knowledge Levels Among Young

Parents" is based on my 12 weeks' internship program in BRAC, Tongi Branch for HWHF

Project. I have collected data and analyze these data that is related to this project outcome.

BRAC is working for the people who living with the poverty and inequality to perceive their

potential and make opportunities to modernize themselves.

This report will identify the factor that influencing the maternal health knowledge through this

project. It also helps to understand the educational intervention in the improvement of the

maternal health knowledge. I have identified the factor that influencing the maternal health

knowledge by semi-structure interview that provides significant presence of in-depth exploration

of participants' experiences and beliefs. I have understood the educational intervention in the

improvement of the maternal health knowledge. By implementing pre and post intervention

survey among the participants that helps to measure the knowledge that they gain over the

period. For survey, I have used Likert Scale to understand the perspective and outlook about

BRAC.

After analyzing those data, I have ended with some findings and recommendation for this project

that may help them to overcome their issues.

Key Words: Antenatal Care; Postnatal Care; First-time Mother; First-time Father.

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List of Acronyms

HWHF	Healthy Women, Healthy Families
FTM	First Time Mother
NGO	Non-governmental Organization
	Knight Commander or Dame Commander of the Most Distinguished Order of St
KCMG	Michael and St George
MSH	Management Science for Health
PO	Program Organizer
SS	Sastha Sebika
SK	Sastha Karmi

Introduction

1.1 Background of the Study

In this society, practical knowledge is more important than bookish knowledge for every single person. It encourages self-learning, increases our understanding and also includes practices. As a result, it leads to perfection by eliminating the process of mugging. It helps to deal with real life situation and brings an experience that is helpful for our career. Master of Business Administration of BRAC University has designed with the combination of theoretical aspects and practical aspects. For this practical aspect, MBA program has an internship program as an academic requirement. To fulfill this requirement, I was assigning at BRAC, Tongi Branch as an intern for three months. Here I have prepared an internship report- "Evaluation of Maternal Health Knowledge Levels Among Young Parents" based on Healthy Women, Healthy Families Project. My academic and organizational supervisors have guided me a lot to fulfill this report.

1.2 Objective of the Report

Attaining and fulfill the required skill development task for the completion of Master of Business Administration (MBA) Program by completing this internship report, is the primary goal of MBA. Furthermore, there are also two main objectives behind this report. These are:

- 1. Identify the factor that influencing the maternal health knowledge,
- 2. Understand the educational intervention in the improvement of the maternal health knowledge.

1.3 Methodology of the Report

HWHF project mainly deals with the field base work. They provide their service directly to them and they have already reached to 2500 new parents. Many of them has leave this place also. So, it is really tough to cover all of them. To collect the information, I have randomly selected 100 mothers for survey and two mother and two father for semi structure interview.

For Survey, to understand the effectiveness of educational interventions in improving maternal health knowledge, I have included 5-point Likert Scale that assess the level of participant's knowledge before and after intervention.

And for semi structure interview I have asked some open-ended question that helps them to share their perspective and experience.

1.4 Limitation of the Report

HWHF Project has started their journey from 2021. It is tough to collect data from 2021. Although I try my best to make the report most trustful, I have faced some limitation. These are:

- 1. First, most of the parents in this Tongi come from outside of Tongi for their livelihood. As a result, they are very busy with their work and maximum time I cannot find them in their home.
- 2. Many of them was not attended all sessions. So, they cannot answer many questions.
- 3. Most of them have leave this place after having a baby. They back to their own home.
- 4. It was tough for this organization personnel to pay enough attention for this report.

To avoid the limitation, I have targeted those parents who has completed almost all the session.

Overview of the BRAC

2.1 Historical Background

BRAC has renowned as an international development establishment in Bangladesh. It is founded in 1972 after the Liberation war when the people of Bangladesh were devastated. BRAC was formally known as Bangladesh Rehabilitation Assistance Committee and now known as Bangladesh Rural Advancement Committee.

Sir Fazle Hasan Abed KCMG (27 April 1936 – 20 December 2019) is the founder of BRAC. After the devastating cyclone of 1970, where three quarter people had died, he left his Shell Oil Company's job to help the vast population in the disaster. BRAC's first work was stated from a remote region name "Sulla" (BRAC (organization), n.d.).

2.2 Overview

BRAC was subsequently registered under NGO Affairs Bureau of the Government of Bangladesh because of receiving foreign donations. It is a non-profit organization. The headquarter of BRAC is BRAC Centre, 75 Mohakhali, Dhaka, Bangladesh. BRAC has employed over 90,000 people and almost 70% people are women. It also self-founded social enterprises (Aarong & Argo), Investment(bKash) and also BRAC University. Now, BRAC has enlarged their operation in 12 countries of the world. (BRAC (organization), n.d.).

According to BRAC, 2 in 5 people in Bangladesh receive support from BRAC and half of the people are women and 5.1% people are with disabilities. 2.1 million people tested for TB, 1.1 million people tested for malaria, 65.6 million people accessed health and nutrition service, 340000 children get educational service, 200000 children graduated from BRAC-operated schools and so on. BRAC also provide service during COVID'19 by vaccinated many people on behalf of Bangladesh Government. In collaboration with our Government, BRAC has a tremendous history to achieve many Millennium Development Goals (BRAC, 2022).

2.3 Mission, Vision & Values

According to BRAC, their mission is to eliminate poverty, illiteracy, diseases and social injustice from our community. To bring out the large potential of men and women they are taking necessary steps of intervention in a positive way.

Their mission is to eliminate all types of discrimination and exploitation from society by giving

opportunities to every potential person.

Their core values are integrity, innovation, inclusiveness and effectiveness (BRAC, 2022).

2.4 Award & Recognition

BRAC has got the number one ranked non-governmental organization (NGO) by an independent Geneva-based media organization. Some of the awards are listed here:

Year	Award
2019	Yidan Prize
	Dutch Royal Knighthood
2018	AGA Khan Diamond Jubilee
	AGFUND International Prize for Pioneering Human Development Projects (First Category)
	OFID Annual Award for Development
	LEGO Prize
	Laudato Si' Award (Institution Category)
2017	Knight Commander of the Liberian Humane Order of African Redemption
	Jose Edgardo Campos Collaborative Leadership Award 2016 (South Asian Region)
2016	Honorary Degree of Doctor of Education, University of Bradford
	Thomas Francis, Jr. Medal in Global Public Health
2015	The World Food Prize
	World Toilet Organization Hall of Fame Award
2014	Global Justice Innovation Award
	Trust Women Hero Award
	Spanish Order of Civil Merit
	Honorary Degree of Doctor of Civil Law, The University of The South
	Honorary Degree of Doctor of Laws, Princeton University
	Leo Tolstoy International Gold Medal
2012	GlaxoSmithKline and Save the Children Healthcare Innovation Award
2013	World Justice Project Rule of Law Award

	Central European University Open Society Prize
2012	Honorary Degree of Doctor of Laws, The University of Manchester
2011	Inaugural WISE Prize for Education
2010	Honorary Degree of Doctor of Laws, University of Bath

2.5 Board of Director

BRAC has a governing body who exercise governance in this organization. This governing body is responsible for every aspect of the organization. The Governing Body of BRAC-

Chairperson:

Dr Hossain Zillur Rahman

Members:

Adv. Syeda Rizwana Hasan

Adeeb H. Khan

Shafiqul Hassan

Melissa Parke

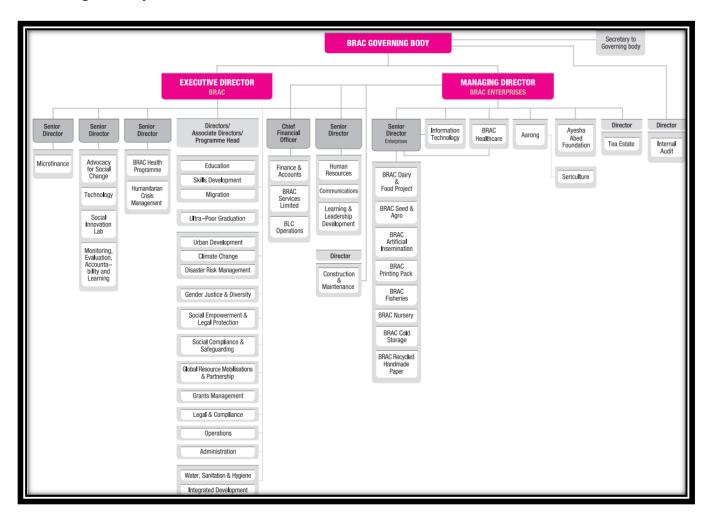
Fathima Dada

Tapan Chowdhury

Dr Fahmida Khatun

Dr M A Sattar Mandal

The Management Pyramid of BRAC:



2.6 SWOT Analysis

SWOT analysis is a strategic evaluation for every organization to understand the Strengths, Weakness, Opportunities and Threats about the business and helps in decision making.

The SWOT analysis of BRAC is given here,

Strengths

- 1. BRAC has a strong reputation and experience in the world.
- 2. Community centered approach ensure culturally appropriate and effective intervention.
- 3. Extensive and wide networks helps to make quick mobilization and effective distribution.
- 4. Partnership with national and international enhance resource effectiveness.

Weakness

- 1. Dependency foe resource on donor fund may lead uncertainties in continuing the projects.
- 2. Large scale operation in remote area is tough to manage.
- 3. Immediate and extensive response capacity may be stretched thin.
- 4. Bureaucratic delays may come between government agencies.

Opportunities

- 1. International collaboration is the great opportunities to get more resources, knowledge and global practices.
- 2. Technological Integration for better data collection and analyzation.
- 3. Expanding their services into health support, climate change, sustainable development process and son on.
- 4. Training to local people are increasing the capacity building.

Threats

- 1. Funding volatility due to global economic condition.
- 2. Climate change may overwhelm the present resources.
- 3. Safety and security of the resources and staff in the operating area.
- 4. Political issues may interrupt in delivering humanitarian aid.

This analysis has created a clear view of BRAC's current situation. They can make a proper use of their strengths and opportunities to be benefited and make strategies to overcome the weakness and threats to build a potential organization in the worldwide.

Evaluation of Maternal Health Knowledge Levels Among Young Parents

3.1 Introduction

Partnering with MSH, Population Council and Scope, BRAC has redesign a perinatal care service to the first-time parents (Age: Below24) in Tongi slum area. Mainly BRAC are providing the service with their manpower. This project has started in two regional offices in Tongi, in Hossain Market and Morkun area.

Shasthya Shebika (SS) and Shasthya Kormi (SK) are root level employee who identify the first-time parents in these area and report to their immediate supervisor, Program Organizer (PO). After getting the identification list PO will make a monthly plan of session for those identified parents though their pregnancy journey.

3.1 Objectives

Most of families in this area working people and they do not give much attention during antenatal and postnatal period. So, BRAC is trying to provide service during the pregnancy and after the pregnancy. Their service mainly person centered.



BRAC are working to give a clear knowledge about antenatal care and postnatal care to the new mother in a group with 4-10 members and also same for father. As a result, they also share their situation in a group and others will relate themselves with this same situation. There is total 7(ANC-5, PNC-2) sessions for mother and 3 (ANC-2, PNC-1) sessions for father.





Through this project fathers also can gather knowledge about pregnancy.



Those mother and father complete all the session during their pregnancy they get one ultrasonography test free and also for attending every session they get transportation cost and tiffin.

BRAC also makes monthly at least one session with community level people like, Commissioner, Teacher, Religious Leader, Doctor to spread the knowledge through them (MSH, n.d.).

3.3 Significance

To complete this research, I have two objectives. Here, I have researched based on both primary data and secondary data. These two objectives are:

1. Identify the factor that influencing the maternal health knowledge by semi-structure interview that provides significant presence of in-depth exploration of participants' experiences and beliefs.

Participants: 4 Person Participants: 100 Person

2. Understand the educational intervention in the improvement of the maternal health knowledge. By implementing pre and post intervention survey among the participants that helps to measure the knowledge that they gain over the period.

3.4 Findings & Analysis

Semi Structured Interview:

Every person in this semi structured interview are first time parents. They are experiencing this first time in their life. With the aim of identifying factors that influence maternal health knowledge we go through a semi-structure interview.

Analysis and Findings from semi-structured interview:

Findings from semi-structured interview:

- 1. Before receiving this session, they do not know the importance of regular check-up. They acknowledge that at least 3 check-up is necessary.
- 2. Diet chart that provided in this session is helpful. Before that there was so many superstitions for pregnant women.

- 3. They have learnt that how to identify unwanted complication during and after pregnancy and they have learned 10 danger signs. They also have known how to face those situations.
- 4. They also have learned that a good relationship between husband and wife is needed during this time.
- 5. To avoid early pregnancy risk, they have consumed folic acid and B vitamin also. They have learned the importance of these medicine in those sessions. Before, their parents and grandparents taught them, this medicine is not good for their baby. They think this medicine will increase baby's weight excessively, so that normal delivery cannot be done.
- 6. Before participating in these sessions, they belief so many superstitions that may cause danger for both mother and baby. Though these session new parents understand they are fully under the ignorance.

Analysis from semi-structured interview:

According to the participants, I have identified so many factors that influence maternal health knowledge.

These are:

- 1. Adequate awareness about the importance of regular check-ups which was not valuable before attending sessions.
- 2. Improve importance of proper dietary practices for pregnant women after receiving a helpful diet chart.
- 3. This educational session reduce the superstition surrounding pregnancy.
- 4. Emphasizing on the identification and addressing potential complication during and after pregnancy.
- 5. Healthy relationship for healthy future.
- 6. Importance of consuming medicines to avoid early pregnancy and dispel the misconception about this medicine. .
- 7. Awareness regarding superstitions increase and acknowledge by these sessions.

Surveys:

For survey I have targeted 100 participants those who have completed almost all the session. Here is the visualization of survey result and findings:

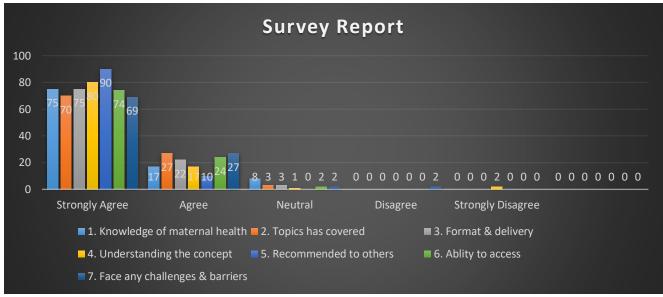


Figure 1: Survey Report

Findings and analysis from semi-structured interview:

- 1. Here, majority are strongly agree indicating a significant improvement in maternal knowledge and very few are agreed with these changes.
- 2. Majority are satisfying with the topic that has covered by these sessions.
- 3. The format and delivery are highly appreciated by the participants and mostly are strongly agree and agree with this.
- 4. The results indicate a high level of perceived helpfulness in understanding maternal health knowledge. Most of the participants strongly agree and agree with this concept.
- 5. All the participants strongly agree and agree with a strong likelihood to recommend this initiative to others.
- 6. The results say that this project is fully accomplished to access reliable maternal health information after participating in the intervention is increased.
- 7. The way to deliver the information is appreciable by the participants. Participants are mostly agreeing with accessing accurate maternal health information. That's means it was really barriers and challenges free for them.

Recommendation

- 1. Maintaining time for each session is very important. Sometimes, participants of any group cannot present the session at a time, and it takes so long time to start some sessions that may feel boring to some participants. So, more importance is needed to start the session on time.
- 2. Tongi area is densely populated area, so it is not easy to identify FTM at the beginning their pregnancy. So, it will be better that ss and sk become more active to identify FTM.
- 3. Maintaining the existing group and forming new group is tough. Because already participants have exceeded 2600+. Employee can be more concern about this part to make the session according to mother's trimester.
- 4. Most importantly, it will be the best for BRAC to go for regular feedback and assessment of the usefulness of the session.

Conclusion

HWHF project is a social development programs to help the first-time parents in the Tongi area by providing maternal information and services in a very cheap cost. Their target is to improve the quality of maternal and newborn health.

BRAC is creating so many new windows for social welfare, human rights, well education system and well environment. More project like HWHF may help the low-income people by providing the necessary health related benefits and knowledge.

BRAC has worked for the people who are in the poverty and inequality level. It has created opportunities for them. Not only in Bangladesh, but also in 13 different countries it has stated its operation.

- 1. Asia: Bangladesh, Afghanistan, Sri Lanka, Pakistan, Philippines, Nepal, Myanmar.
- 2. Africa: Uganda, Rwanda, Tanzania, South Sudan, Liberia, Sierra Leone and
- 3. Caribbean: Haiti (BRAC, (n.d)).

BRAC also work in the hard-to- reach area, disaster area, pandemic situation and for rohingya in cox's bazar.

Experience Regarding Internship Period

The journey to work with BRAC is really a great experience in my life. I have learned seen so many new things by this journey with Healthy Women, Healthy Families Project. My role was to help and work with program organizers to convenience new mother and father to attend the sessions by telling how they will be benefited through this meeting and also the importance. I have responsible to make the session smooth and interesting by providing necessary information. I have also supported program organizer in making monthly report. It was very new learnings to visit in the slum area and see how harshly the live their livelihood, how they live in a very filthy place. Most of them has no members to take care of them in their crucial situation.

Through this internship journey, I have learned how interact with people, how to manage them, how to describe the importance of this type of sessions, how manage a group and so on.

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Appendix A.

For semi-structured interview:

- 1. Do you understand the importance of maternal health?
- 2. What is the sources of your maternal health-related knowledge?
- 3. Do you understand how they provide information regarding maternal health?
- 4. Do your cultural and societal norms influence maternal health practices and knowledge?
- 5. Can you please share your any personal experiences during your pregnancy period?
- 6. Do the information provided by the healthcare providers is helpful in educating maternal health?
- 7. Do you think this process make any changes in your maternal health knowledge over time?
- 8. Do you have any suggestion for improving the process of delivering maternal health information to young parents in Tongi?

For survey:

- 1. After participating in the educational intervention, your knowledge of maternal health has increased.
 - a) Strongly agree
 - b) Agree
 - c) Neutral
 - d) Disagree
 - e) Strongly disagree
- 2. How much satisfy/dissatisfy with the topics related to maternal health were covered in the session
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
- 3. Format and delivery of the educational sessions is effective
 - a. Strongly agree
 - b. Agree
 - c. Neutral

- d. Disagree
- e. Strongly disagree
- 4. This session is helpful in understanding maternal health concepts
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
- 5. Would you recommend similar educational intervention to other young parents would be recommended for better knowledge for pregnancy?
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
- 6. The ability to access reliable maternal health information after participating in the intervention is increased.
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
- 7. It was challenge free or barrier free to accessing accurate maternal health information?
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree