Section C

The Care Group Difference in Cambodia
Location of Project Site in Cambodia
185,000 People in One Health District

Photos: Henry Perry
Children Who Received all Immunizations

Children 12-23 months of age completely vaccinated on day of survey

Source: Henry Perry
Use of Iodized Salt in the Household

Source: Henry Perry
Initiation of Breastfeeding after Delivery

Percentage of mothers who initiated breastfeeding within one hour of delivery

Source: Henry Perry
Similar Results Achieved for Other Key Interventions

- Maternal tetanus toxoid immunization
- Hand-washing
- Umbilical cord care
- Iron supplementation during pregnancy
- Health care seeking behavior for symptoms of childhood pneumonia
- Use of oral rehydration therapy for diarrhea

Source: Henry Perry
Indirect Estimates of Reduction in U5MR in Thirteen Care Group Projects in Eight Countries

Care Group projects generally outperform the average child survival project in terms of U5M reduction by about 30%, or 16 percentage points. These data are from eight countries.

Source: Tom Davis, Food for the Hungry.
# Diffusion of Care Group Model

- To other organizations and countries

<table>
<thead>
<tr>
<th>Organizations that Have Implemented the Care Group Model</th>
<th>Countries Where the Care Group Approach Has Been Implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>Africare</td>
<td>Bolivia, Haiti, Rwanda</td>
</tr>
<tr>
<td>American Red Cross</td>
<td>Burundi, Indonesia, Uganda</td>
</tr>
<tr>
<td>Catholic Relief Services</td>
<td>Cambodia, Kenya, Zambia</td>
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<tr>
<td>Concern Worldwide</td>
<td>Democratic Republic of Congo, Liberia</td>
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<tr>
<td>Curamericas Global</td>
<td>Ethiopia, Malawi</td>
</tr>
<tr>
<td>Food for the Hungry</td>
<td>Guatemala, Mozambique</td>
</tr>
</tbody>
</table>

- Medical Teams International
- Salvation Army World Service Organization
- Samaritan’s Purse
- Save the Children
- SurfAid
57% of under-five deaths could be averted through behavior change of the mother (Jones et al., 2003, Lancet)

Source: Tom Davis, Food for the Hungry.
Conclusion: the Care Group Difference

- Embodies CBIO principles
- Is empowering and inexpensive
- Includes peer-to-peer, mother-to-mother education
- Focuses on improving the household production of health
- Focuses on the appropriate utilization of existing health services
- Does not depend on working through the Ministry of Health structure
Costs

- Food for the Hungry Project in Mozambique
  - $3 million for a population of one million people over five years
  - $.60 per capita per year

- World Relief Project in Mozambique
  - $3.3 million for a population of 250,000 people over five years
  - 2,303 lives saved
  - $1,447 per life saved and $48 per DALY averted