EPISODE 4: MOTHERS OF THE AMAZON RIVER: A SOCIAL INNOVATION FOR HEALTH

Garry Aslanyan  [00:00:09] Hello and welcome to the Global Health Matters podcast. I'm your host, Garry Aslanyan. For a long time in science, attention has been paid to technical innovation, but quietly, social innovation has been blooming across Latin America. Communities, citizen-led organizations and researchers have been collaborating to create new solutions to improve service delivery and strengthen health systems. There's an abundance of opportunities for research in social innovation that will help us to know what works and what doesn't, how communities can be more engaged in healthcare and how these solutions can be scaled. Since 2015, the Social Innovation in Health Initiative has been identifying, researching and supporting social innovations in the regions. Today, I'm joined by two guests from this initiative, Dr Magaly Blas, who is an Associate Professor at the Universidad Peruana Cayetano Heredia in Peru. She's also the Director of the Mamás del Río programme, which is focused on improving maternal and newborn health in rural areas in the Peruvian Amazon. In 2019, she was recognized by the Pan American Health Organization for her work in social innovation. I'm also joined by Dr. Luis Gabriel Cuervo. He's the senior advisor in research for health at the Pan American Health Organization. He advises the Secretariat of the Social Innovation in Health Initiative in the Americas. Magaly and Luis Gabriel, welcome to the show.

Magaly Blas  [00:01:57] Thank you, Garry.

Luis Gabriel Cuervo  [00:01:58] Delighted to be here at the Global Health Matters podcast.

Garry Aslanyan  [00:02:01] Magaly, I'm going to start with you. You've gone from primarily being a researcher and you developed very successful social innovation called Mamas de Rio. Where did you get inspiration from and how did you change into this role?

Magaly Blas  [00:02:18] Well, I used to be a traditional researcher for a long time. I studied the risk factors for diseases, measured the effect of interventions. But I was particularly interested in the association between two viruses: the human papillomavirus that produces cervical cancer and the human T-lymphotropic virus that produces leukemia, lymphoma, and it was prevalent in an indigenous group in the Amazon in Ucayali. So I had to travel there and live in the communities and I experienced what it is to not have access to water, electricity, sanitation or medical care. So I led the implementation of the study. Actually, we finished the study, analyzed the project and produced two papers and I was able to travel to a conference to show the results. But when I returned to the communities, I found women who participated in my research living under the same conditions without access to any basic care. So I felt, to tell you the truth, a little bit disappointed because although I was able to produce new knowledge, which is what they teach in the university, my research didn't impact directly the health of the people with whom I worked. So after that I became pregnant with my two daughters and I traveled back and forth to the Amazon, and again, I experienced to know what it's like to not have access to care. And I thought if I feel vulnerable in these moments when I am pregnant, how women feel in these communities. So I think that was a point where I decided to switch my career to now improve the health of women and newborns in the Amazon region, especially areas that are rural and are remote and neglected. So with this in mind, I remember I received an email and it was from Grand Challenges Canada and the National Council of Science and Technology, and they were requesting for bold ideas. At this time these two organizations got together to do a release for applications, so I decided to apply. But this time with a project to improve the health of women and children through the work of community health workers. So when they asked me, please type the name of the project, for me it was clear. I will call it Mamás del Río, which means Mothers of the River. Because I remember when I traveled through the river reaching the communities and women standing alone in the communities. So that is how we started, and we got the funding for the pilot from Grand Challenges Canada, from the Government of Canada and ConsiTech. And then we go and transition to scale funding and then other partners became interested, like the Ministry of External Affairs of Peru and Colombia, as well as the Inter-American Development Bank. So I think that before Mamás del Río, my approach was to get the research done. With Mamás del Río I learned that the focus should be the people and that I can use the research to make a difference.
Garry Aslanyan [00:05:34] Thank you Magaly for sharing your journey. As researchers we are very privileged to have so many experiences that shape us and give us insight into the lives of communities. You use both your personal and professional insights to develop an innovative new solution to address a real need in your country. Luis Gabriel, many of our listeners may not know exactly what we mean by the term "social innovation". Could you explain that for us in more detail please?

Luis Gabriel Cuervo [00:06:02] Yes Garry. Thank you. Well, you are saying in the introduction to this podcast, you basically described social innovation. But let me hone in some specific aspects of it, because it's when communities and partners join to find new ways of addressing pervasive problems and strengthening the health systems to get closer to the health systems. So a characteristic of it is that it solves or works around complex health systems issues. So it starts with a problem and looking at all the ways in which these problems could be addressed, using quite frequently unconventional approaches and focusing very much on improving people's quality of life, health equity and social justice. The approach in social innovation is holistic. It doesn't start from the perspective just of one system necessarily or one discipline, but it's actually looking at the problem with a broad lens of what are all the elements around it? What are the environmental or social determinants around it? How can these communities better work to sort it out? And one of the key tools that is embedded in social innovation is research, because it uses research to identify what might work, but also to test it. Whether in that context things work and how to do the implementation and the scaling up and to understand why it is that it works in that context and whether it might work in a different context if it's replicated, adapted or scaled up.

Garry Aslanyan [00:07:49] As Luis Gabriel said, social innovation is an unconventional solution to unmet complex systematic challenges implemented in partnership with the community. Magaly, through this lens, could you tell our listeners more about what the Mamás del Río project entails?

Magaly Blas [00:08:07] Sure, Garry. So in Mamás del Río we believe in equity and social justice. That is why we are going where no one goes, not even the government. We're working in more than one hundred communities along four rivers in a 700 kilometers extension, and we're working in communities that do not have access to water, electricity or sanitation. And they don't have access to medical care. That is why we believe in building capacity within the community by training community health workers. And we train these community health workers who are persons from the community so that they can detect early a pregnancy in their community and refer this woman to prenatal care and can also conduct home visits to pregnant women and newborns. And an innovative aspect of our programme is that we give these community health workers a tablet that has an application that helps them to gather health data that we send to public health officials so that they can act on it. And they can also use the application to show content in the form of pictures and videos. And these videos have been co-created with the community. In fact, when we have done an analysis of the educational tools that we have in Mothers of the River programme, one of the things that women remember are the videos. They say that it's like their mother or their sisters are telling them stories of how to improve their health. And what we also do to support the work of community health workers is to train traditional birth attendants, health care personnel in how to perform essential newborn care, and also we do periodic community sensitization to all the more than 100 communities where we work in the Peruvian and the Colombian Amazon.

Luis Gabriel Cuervo [00:10:00] By the way, I was quite struck when I learned about Mamás del Río because these communities in a long span of the rivers, they might not have electricity or they might not have running water, but they had the telephone signal. And it was brilliant how they brought the technology as well to support and bring the health systems closer to the people and that collaboration that they established.

Magaly Blas [00:10:31] That story's real. Many people believe, oh, in rural and remote areas there is no Internet. But actually I can be in the middle of the Marañon River and have a Skype with my daughters. But I won't have access to water or electricity which is something very ironic. But yes, what we are doing with Mamás del Río is actually taking advantage of the presence of technology to improve the life of the people.
Garry Aslanyan [00:10:54] You are a researcher by profession. How have you used your research skills to know what works, what doesn’t work, in terms of the Mamás del Río project? Has this research knowledge strengthened the programme delivery?

Magaly Blas [00:11:09] Oh, yes. We are using a lot of research. Actually research is important in social innovations because it will help you to measure what is the effect of your intervention, why it works and why it doesn’t work. So Mamás del Río is an evidence-based intervention that is being measured rigorously thanks to the support of two organizations, Cayetano Heredia University in Peru and also the London School of Hygiene and Tropical Medicine. So from the start, we are working with community health workers, which is an intervention and basically the conduction of home visits by these community health workers have proven to be beneficial in several randomized control trials in Africa and Asia. They have been shown to reduce the neonatal mortality in 25%. However, in Mothers of the River programme we want to know how it works in the Latin American context and what is the added value of technology. So that is what also we are assessing. Now before implementing Mamás del Río, we have done formative research, we have lived in the communities, interviewed pregnant women, traditional birth attendants, community health workers, and leaders of the community, to see what is the process when you are pregnant and when you deliver a baby. And then we did several iterations to the design of the study and we pilot tested the intervention. And for the evaluation we are doing every year a census and also we are doing a mixed-methods evaluation to see if an intervention component worked, why it worked and if something didn’t work, why it didn’t work. It was because of cultural issues in the community? And what I can tell you so far, we have done to census until now, is that we have shown an improvement in essential newborn care practices in the communities.

Garry Aslanyan [00:13:05] Luis Gabriel, PAHO has been a partner in the Social Innovation in Health Initiative from the very start. Why and how has PAHO been supporting social innovation and research in the region?

Luis Gabriel Cuervo [00:13:22] Social innovation matches very well the policy framework that the Organization has, that the Member States have asked it to do. The Organization is committed to health equity and to social justice, and it has a mandate to advance primary health care and universal health and social innovation brings the communities and their partners to work towards this end and to advance towards the Sustainable Development Goals of the United Nations Agenda 2030. So this is a way of building capacities with the communities and finding solutions that are suitable to them to be closer to the health system, to work closely with the health system and that’s something that the Organization fully supports. Another aspect of this is that in the process there is an empowering of the communities because they’re finding their own solutions, solutions that they find sound. And this requires the understanding of the conflicts in the communities and that is very helpful for us to learn and to also support similar work in other places. So that is bringing closer the health system and the people to address complex issues is very much in the interests of the Organization.

Garry Aslanyan [00:14:43] It’s great that PAHO sees how social innovation can contribute to global health in a similar way that many global health organizations have recognized that. It is then not surprising that country governments, too, are recognizing the potential of social innovation. Magaly, can you tell us more about how both governments of Peru and Colombia are supporting the initiative?

Magaly Blas [00:15:07] First, imagine that Peru and Colombia share the Amazon. Basically, the border is a river, which is the Putumayo River. So women live under difficult conditions and challenging conditions similar to the areas where we operate in Mothers of the River. I think that is why the Ministry of External Affairs in Peru invited us to present the project to an international initiative with Colombia. And we presented the project to the Ministry of External Affairs of Colombia and the Ministry of Health, and they were interested in implementing the project in the border between the two countries, to now use Mothers of the River, which is called Mothers of the Border, to improve health and uniting two countries through this initiative. Actually, I was so proud as a researcher to be in the meeting with the two presidents of Peru and Colombia. They meet every year to sign several agreements and one of those agreements was to implement
Mothers of the Border. And we are very proud that the Ministry of Health of Colombia has taken the project, adapted to their health care system, and now Mothers of the Border is being implemented in 30 communities along the river in the two countries. So with Mothers of the Border we have grown from a national initiative to an international initiative with the support now of several organizations, including the Ministry of Health Peru and Colombia, the Ministry of External Affairs and also the Inter-American Development Bank.

Luis Gabriel Cuervo [00:16:47] May I interject because I want to build on what Magaly has said to highlight one aspect that is of special importance to PAHO here. During the years the Social Innovation in Health Initiative has been running, over 40 innovations have been identified, including 8 in the Americas. And I think Mamás del Río is a beautiful example of how the recognition itself has been a platform that has helped by giving exposure about what’s going on by in a way validating the work, because I think that’s one important part of it, and also aligning the work that’s been done with the policy frameworks and the research standards that are being implemented internationally and generate exchange of that procreation of knowledge because the initiative brings the innovators together and brings other partners, including entrepreneurs and including the philanthropists, to support the work that's going on. So there's a continuous flow of knowledge and exchange and evolving ideas, so that helps the people working in the innovations and on the field to address the complex problems because they’re learning about how other innovative people came about them. So it brings some efficiencies in sharing those resources and that knowledge and creating that network of peers, which is part of what PAHO has with the secretariat facilitated so that they have their partners and they have other people they can resort to if they need knowledge. Does this reflect well the situation for you, Magaly, in Mamás del Río?

Magaly Blas [00:18:39] I think the visibility that we gained with the award and with the video was key to talk to other stakeholders and it also helped in the negotiations we were doing with Mothers of the Border in very difficult times because the COVID epidemic happened when we were about to start the project.

Garry Aslanyan [00:18:59] You both referred to the Social Innovation in Health Initiative. For our guests who are not aware of this, it is a global network of universities, international agencies, funders and social innovators collaborating to advance social innovation and health in low- and middle-income countries. Through it, social innovations are identified, studied and recognized as a way to build support for these efforts. Magaly, I have to ask, your programme reaches the most unreached populations within the Amazon. How did your social innovation support the COVID-19 response in these areas?

Magaly Blas [00:19:37] Well the advantage of social innovations is that they are flexible. So we are glad that with Mamás del Río we were able to respond to the epidemic. So imagine that when COVID started, our President decided to put the whole country in quarantine. So in Mamás del Río, or the Mothers of the River programme, we used to visit the communities every month with a supervisor to assess the work of the community health workers. So we were not able to do these visits. However, we believe that through the years we were able to build a bridge directly to the heart of these remote and rural communities and this bridge were the community health workers. So through them we were able to, for example, do remote training, so very fast we started to make the phone calls to train them on what was this new virus and how they can prevent coronavirus. We were able to deploy prevention materials to all the community health workers in more than 100 communities. So we deployed face mask instructions of how to make these facemasks, soaps, fliers that were important for the communities. Also, we told them how they continue to do their visits using protection and although you cannot believe more than 85% of health centers closed, the community health workers continued to do their work. And I think the care that women received of those communities and by the community health workers were the only health care that they received during the pandemic. So thanks to the community health workers, they were able to have, for example, safe delivery kits, they were able to have their newborn weighed, and referred to those who need care. So I think Mamás del Río helped us a lot in the response to the pandemic. We believe that the community health workers should be part of the health system and one of the fights that we have is to achieve that. And we hope that the next government, because we are going to have a new President soon, can make that a reality.
Luis Gabriel Cuervo [00:21:49] I think that there’s a very important point that you’re bringing up, and that’s the flexibility and the adaptability that we’ve noticed throughout the social innovations. Because like Mamás del Río or others, like the one in Honduras that was working the mosquito region, brought telemedicine to help with the response to COVID-19. Similarly, the ones in Guatemala and in Colombia with the sero-prevalence studies so that they have this ability to follow the course of the situation and keep working to strengthen people’s possibility of moving towards universal health coverage.

Garry Aslanyan [00:22:31] As you both mentioned, social innovations in various countries in Latin America have supported the COVID-19 response. Luis Gabriel, how is PAHO contributing regionally? Is it seeing how social innovation initiatives can support public health and service delivery during the pandemic?

Luis Gabriel Cuervo [00:22:50] Yes, and specifically about social innovation in health and the response to COVID, there is a lot of interest in learning how this work can be done with the communities. So for this year, we do plan to have a global regional call to identify innovations that have helped with the response to COVID-19, especially to keep the health system running, with that focus on how are communities able to keep having prenatal care and maternal care, as in the example that Magaly was saying, or access to other specialized services for people that were using regularly the health system could be the example of what’s happening in Honduras with the mosquito nets. So there is interest in looking across the region for more innovations that are contributing in very many different ways to respond in creative ways to COVID that continues the work of the health systems.

Magaly Blas [00:23:54] And if I may interrupt, Garry, I think the key thing is not only to find an innovation that has shown to be effective, but how you can turn it in on a public policy that will really stay in the country, which is something that we are dealing with and is, I think, a challenge for any social innovation. How you can make it sustainable through the government or any other organization.

Garry Aslanyan [00:24:19] Many of our listeners are in different parts of the globe, but yet could be experiencing similar challenges in their countries which social innovation can be a support to address. Luis Gabriel, how can the scaling up of social innovation be supported? And as Magaly referred, how can research have influence on policy?

Luis Gabriel Cuervo [00:24:41] Well, to scale this, there’s different things that can be done and that are being done. First of all, the collaboration with academia, with WHO (World Health Organization) offices and so on, might be helpful because of the presence that they have in most countries in the Americas. PAHO has a presence in every country, and that helps to bridge the work of the social innovations with official policy in a way or with the government. But going specifically to what you were asking, I would say having standards for how research is conducted, developing standards for the conduct of research in social innovation, because it’s a developing field, having standards of how research is reported and linking what is being done with the policy frameworks so that we have a closer bridge, so that things can be scaled up and we can look into the sustainability in the way that Magaly was exemplifying just a few minutes ago. The promotion of the exchange of the knowledge, that’s I think a key element and also the support through the projects to adjust as they evolve, because this is a very interesting aspect of this work. When you see the example of Mamás del Río, and I think Magaly mentioned it already, she began working there as a doctor and as a researcher. But now, she’s the manager of a huge programme and she has to liaise with people in different sectors. So that transition is part of what we are looking at, how to make sustainable the initiatives we are supporting that. So the Social Innovation Health Initiative is looking into that kind of support, how to bring that transition through and support the people throughout the process so that they can develop the new skills they need as the problems become more complex. As the initiatives grow, they become far more complex. This is like a moving goalpost and you need to be developing skills throughout the process, and those include communication, management, all sorts of things. And I think that’s the role that we have in supporting that sustainability.
Garry Aslanyan [00:26:57] Magaly, what would be your final words of encouragement for those who are potentially working in social innovation in health, researchers who want to work in this area? What would you tell them? How would you encourage them to get involved?

Magaly Blas [00:27:17] Well, I think that my main message will be to be persistent and resilient. As social innovators, especially in these COVID times, we face several challenges, for getting funding for your first pilot, to scale it up, to make it sustainable. But I think innovators, we believe in equity and social justice and we have designed our interventions not only with the mind but also with the heart. So my message will be to use that as a driver and keep trying.

Luis Gabriel Cuervo [00:27:52] I would like to point out that this is a fascinating field that is evolving. And there is so much that we have to learn to understand about the drivers of what drives social innovation to get traction, the characteristics of the leaders and so on, the enabling factors, the barriers that we have for things to develop. And there's so much to learn and so much that's happening that it's just wonderful to be part of it and I want to encourage people to think about it, because this is really rewarding in the professional side, and it’s really inspirational to see people like Magaly. I mean, just think about her that one week she's in the middle of the jungle in a place where she has such few resources that they're making such a huge difference. And the next week they're talking to the Ministry of Foreign Relations or the Ministry of Health and getting people to join that bridge between their community and the work that needs to be done for them to be closer to universal health care, to be closer to having proper primary health care, and that’s just fascinating.

Garry Aslanyan [00:29:09] Thank you so much for joining us today and for sharing your experiences.

Magaly Blas [00:29:14] Well, thank you very much, Garry. And thanks to Global Health Matters for being interested in learning about social innovation.

Luis Gabriel Cuervo [00:29:21] It's been a fantastic opportunity to share with you all and we are delighted to be here. Thanks.

Garry Aslanyan [00:29:27] I want to thank our audience for joining us on the show today. On our website you will be able to find today's show notes, but also see videos about Mamás del Río, social innovation and other projects that were mentioned today. If you would like to learn more about social innovation, you can visit Social Innovation in Health Initiatives website socialinnovationinhealth.org. As always, we would love to hear from our audience on social media. Share your feedback and comments. Feel free to send questions to our guests. Join us for our next episode where we will take you to the Masaai steppe of Tanzania to explore how climate change affects health.

Elisabetta Dessi [00:30:16] Global Health Matters is produced by TDR, the Special Program for Research and Training in Tropical Diseases. Gary Aslanyan, Lindi van Niekerk and Maki Kitamura are the content producers, and Obadiah George is the technical producer. This podcast was also made possible with the support of Chris Coze, Elizabeth Dessi and Izabela Suder-Dayao. The goal of Global Health Matters is to provide a forum for sharing perspectives on key issues affecting global health research. Send us your comments and suggestions to tdrpod@who.int and be sure to download and subscribe wherever you get your podcasts. Thank you for listening.