



# ***Imagining Life: Using film to improve maternal and newborn care in Timor-Leste***

Health Alliance International  
APHA Annual Meeting  
November 6, 2007



# Timor-Leste (formerly East Timor)













# A brief history of East Timor

- Colonized by the Portuguese 1515-1974
- Illegally invaded and brutally occupied by Indonesia for 24 years --1975-1999
- 78% vote for independence from Indonesia -- 1999
- In May 2002 East Timor became the world's newest nation, Timor-Leste

Indonesian military left with a campaign of well-orchestrated violence, destroying 75-80% of the country's infrastructure.



After 3 weeks, the violence was ended by an international peace-keeping force led by the UN





# Basic Health Statistics - 2003

- Maternal Mortality Rate = 600-800/100,000<sup>†</sup>
- Infant Mortality Rate = 84/1,000<sup>††</sup>
- Neonatal Mortality Rate = 43/1,000<sup>††</sup>
- Under 5 Mortality Rate = 109/1,000<sup>††</sup>
- Life Expectancy at birth = 62<sup>†††</sup>
- Total Fertility rate = 7.8<sup>††</sup>

† Data Source: Health Profile: Democratic Republic of Timor-Leste

†† Data Source: TL DHS 2003

††† Data Source: The World Bank Group, Timor-Leste Data Profile

Poverty:

Timor-Leste is the poorest country in Asia; 40% of the population lives on less than \$0.55/day



## **Challenge: very low health care utilization: strong traditional beliefs, distrust of the health system**

- Traditional beliefs/practices about health and birth very strong
- 17% of deliveries with a TBA (central region)
- 11% of deliveries with a skilled birth attendant
- Antenatal care was 54%, postpartum and newborn care virtually nil
- Contraceptive prevalence was 7.5%



# Challenge: maternal/newborn care practices

- Little understanding of value of a skilled birth attendant at delivery – concept of ‘risk’ not prevalent
- Strong preference for a home delivery
- Traditional home birth practices:
  - Avoid feeding colostrum
  - Give baby a bath immediately
  - Traditional means to cut/seal the cord
  - “Sitting fire” postpartum for ~40 days

# The Women's War--why the film?

- Low use of skilled birth attendants in part due to “failure of the imagination?”
- Small country – open to experimentation
- “Media-naïve” communities, so film an appealing medium
- Well-known local filmmaker available, with film students who could stay in rural areas
- Technologies readily available to show the film at community level (laptop computer and either LCD projector or television monitor)



A 90-minute documentary/teaching film  
to acknowledge traditional practices,  
promote safer childbearing  
and essential newborn care



# Film highlights

- Traditional birthing and postpartum practices
- Best practices – maternal nutrition
- Best practices – birth, newborn care, breastfeeding
- Newborn complications and death
- Caesarian section for maternal complications
- Newborn resuscitation

# Results

- Involved a well-trained health promotion team to show film, lead discussions in rural areas
- Health center staff participate, trained to lead discussions
- > 14,000 people have seen the film so far – many participating in a discussion afterwards
- Strong interest in the film at all levels, including from new Minister of Health

# Impact?

- “New information” cited in discussions: benefits of colostrum, immediate newborn care, possibility of newborn resuscitation, value of facility delivery, dangers of “sitting fire,” maternal nutrition practices
- Impact on behavior: to be assessed in 2008 with end of program survey





**Thank you!**

