From local evaluation to national policy:
Small, slow and stable changes in a small, slow and stable country

COST-Action «BIRTH» Training School

INNOVATION IMPLEMENTATION IN PRACTICE THROUGH INTERDISCIPLINARY RESEARCH

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Maternity care in Switzerland

Medical system vs. early childhood care and education

<table>
<thead>
<tr>
<th>HEALTH</th>
<th>EDUCATION</th>
<th>SOCIAL PARTICIPATION</th>
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<td>Living environment of families and children</td>
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<td>supportive systems for families and children</td>
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Swiss health politics: small and fragmented

- **1 nation** (health insurance, specific health related laws, policies and programs)
Health policies: small and diverse

1 nation
4 languages (3 cultures of maternity care systems)
Health politics: small and complicated

- **1 nation** (health insurance, specific policies)
- **3 cultures** (4 languages)
- **26 regions** (hospitals, birth houses)
Health politics: diverse, fragmented, complicated

1 nation
4 languages
26 regions
2222 communities (Early Childhood Care and Education)
How to change practice?
How we started:
Evaluation of the pilot program for early childhood care and education in the city of Lucerne
Evaluation of a pilot program for early childhood care and education in the city of Lucerne

- Participatory evaluation
- Quantitative and qualitative evaluation methods
- Storytelling

**RESULT**

• The program is part of the regular care system.
How we continued:
Guidelines for good practice in early childhood care and education

• Systematic international literature review
• Participatory workshops in three languages

Results:
«Our» guidelines
Communities getting active
Where we are now:
Policy development in early childhood care and education for communities

- Research project with 800 communities
- Workshops «communities teach communities» start at the end of February

Results:
Early childhood care will be part of the National Strategy “Prevention of Noncommunicable diseases” (start on basic paper Dec. 17)
The journey behind us
Lessons learnt

Success factors

• Actively involve actors as research partners
• People are the most important resource and the way you relate to them is crucial
• The common process of learning, creating an change is a motor itself

Issues to concern

• Participatory research is costly (time and money)
• Set boundaries (timely), avoid being exploited or instrumentalised.
• Research is a contribute. Researchers get respect, but no impact factors
At the end it is as simple as a spaghetti sauce

The 5 P of success

• Participatory research
• People
• Persistance
• Patience
• Perhaps good luck
What happens on the ground

• Midwives involved in early childhood care and education
• Postpartual care as part of National Policy
• Professional Networks evolve
• Evidence based quality improvement and policy making in most of the cantons and in many communities and organisations
• ...and (too) many new research projects for us....