

6. Looking back...

Gained knowledge of the effectiveness of **community-based interventions** in three countries at different stages of development for pre-eclampsia care

5. What we learned

Identified population-level rates of pregnancy hypertension (9%-11%)

Created learning health systems where outcomes were reduced over time in both intervention and control arms across trials

more rapidly in intervention clusters

23,250+ community engagement sessions

1. What were they?

Multi-country, multi-year trials designed to **improve community-level care** for pregnant women

2. Objectives

To reduce by

20%

a composite of maternal, fetal, and newborn mortality and major morbidity

3. Interventions

Community engagement and education

Pregnancy hypertension

Antenatal and Postnatal care

Pregnancy monitoring

Blood pressure measurements, urine testing and symptom assessment by community health care workers

Community-level treatment as recommended by a mobile health tool

Magnesium sulphate

Methyldopa

Case identification

Referrals for women identified as high risk

THE CLIP TRIALS AT-A-GLANCE

4. Field work by the numbers

589 community health workers in 27 areas

178,148 home-based visits

30,348 pregnancies

India
1379 sessions
39,619 participants

Pakistan
17,484 sessions
54,398 participants

Mozambique
4239 sessions
19,169 participants

Nigeria
297 sessions
4662 participants