

Panel discussion: Lessons Learned in Evaluation of iCCM

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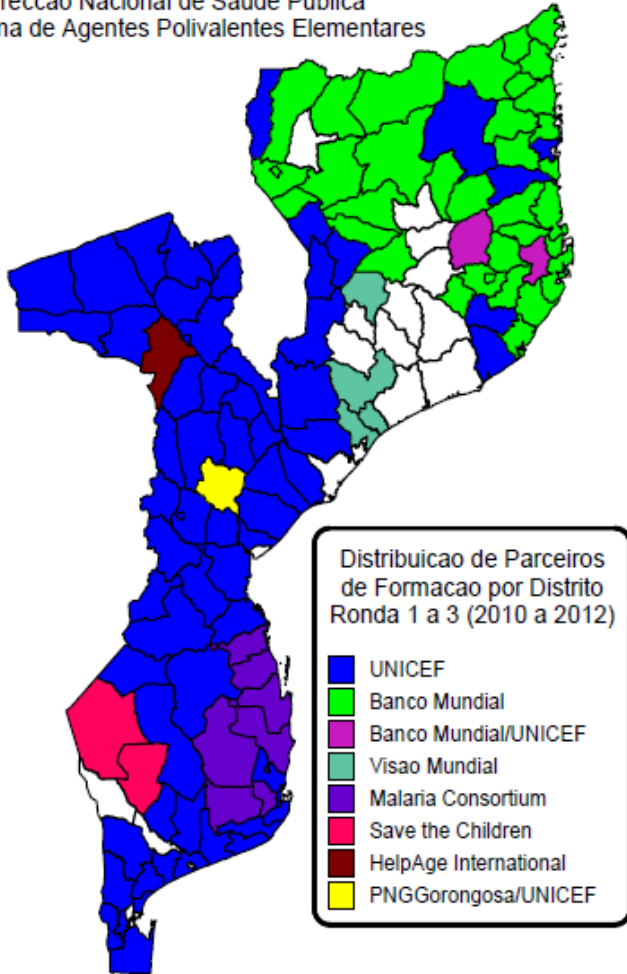


iCCM 2014

**Integrated Community Case Management (iCCM):
Evidence Review Symposium**
3–5 March 2014, Accra, Ghana

Evaluation design

Ministerio da Saude
Direccao Nacional de Saude Publica
Programa de Agentes Polivalentes Elementares



- Lack of ‘control’/ comparison areas limit ability to **attribute** changes to iCCM
- Collect data at the level at which you expect to see **the outcomes!**
- Capturing contextual factors is essential in determining plausibility

Challenges with attribution

- Where programme is implemented at a national level, there is no reliable non-intervention population for comparison.
- Programmes integrated into national systems and not run vertically
- Multitude of actors operating in country

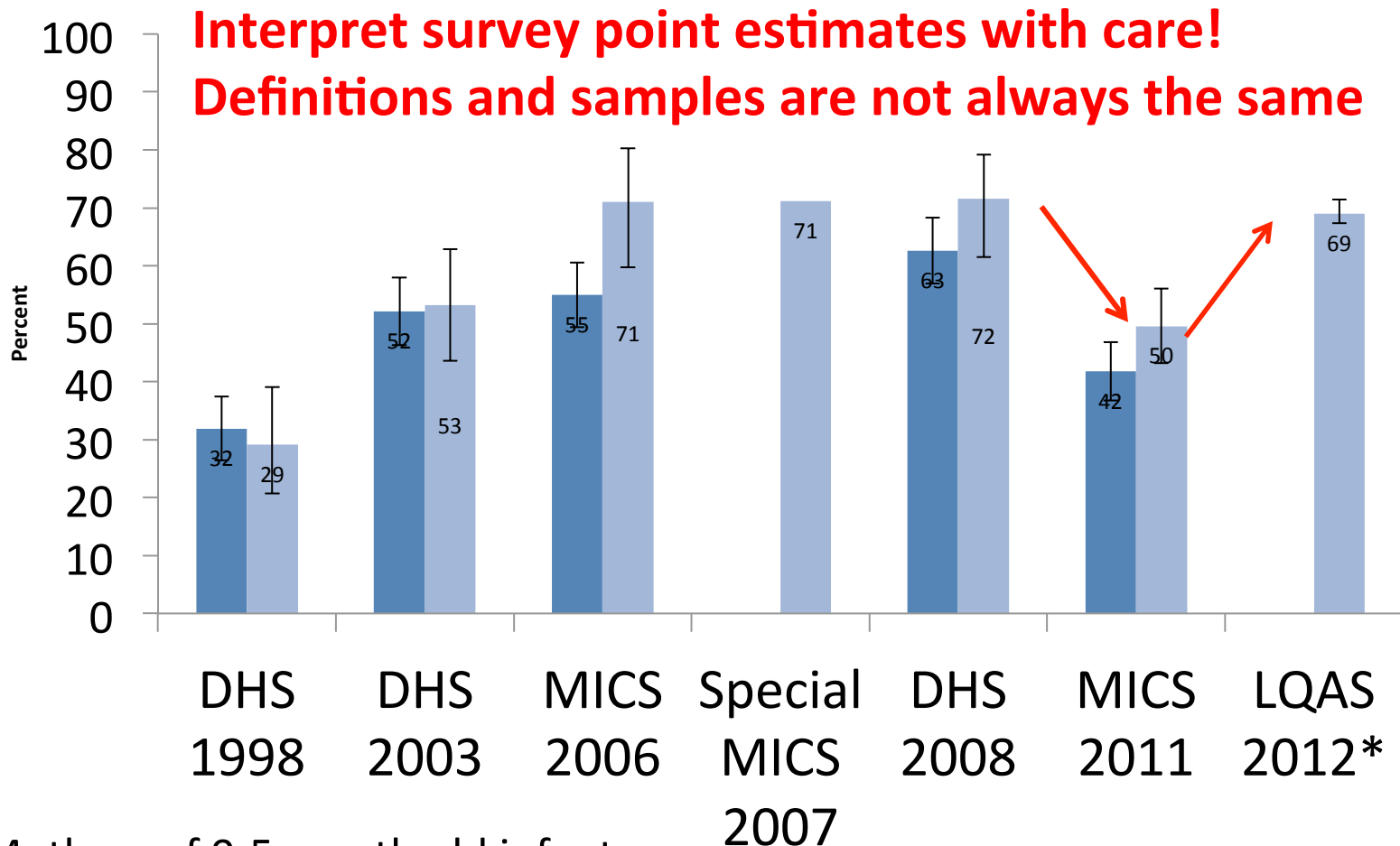


Figure 2: Focus districts for selected development partners in maternal and child health, Mozambique, 2008

Evaluation methods and analysis

Percent of children 0-6 months exclusively breastfed

■ National ** ■ 3 Northern Regions **



* Mothers of 0-5 month old infants

Definition variation across surveys

Indicator	MICS Definition	DHS Definition	LQAS Definition
Tetanus 2 doses	Number of women age 15-49 years with a live birth in the 2 years preceding the survey who were given at least two doses of tetanus toxoid vaccine within the appropriate interval prior to the most recent birth	Among mothers age 15-49 with a live birth in the five years preceding the survey , the percentage receiving two or more tetanus toxoid injections (TTI) during the pregnancy for the last live birth	Among mothers age 15-49 with a child between 0-6 months of age , the percentage receiving two or more tetanus toxoid injections (TTI) during the pregnancy.

Focusing on evaluating the population targeted by the programme can be tricky

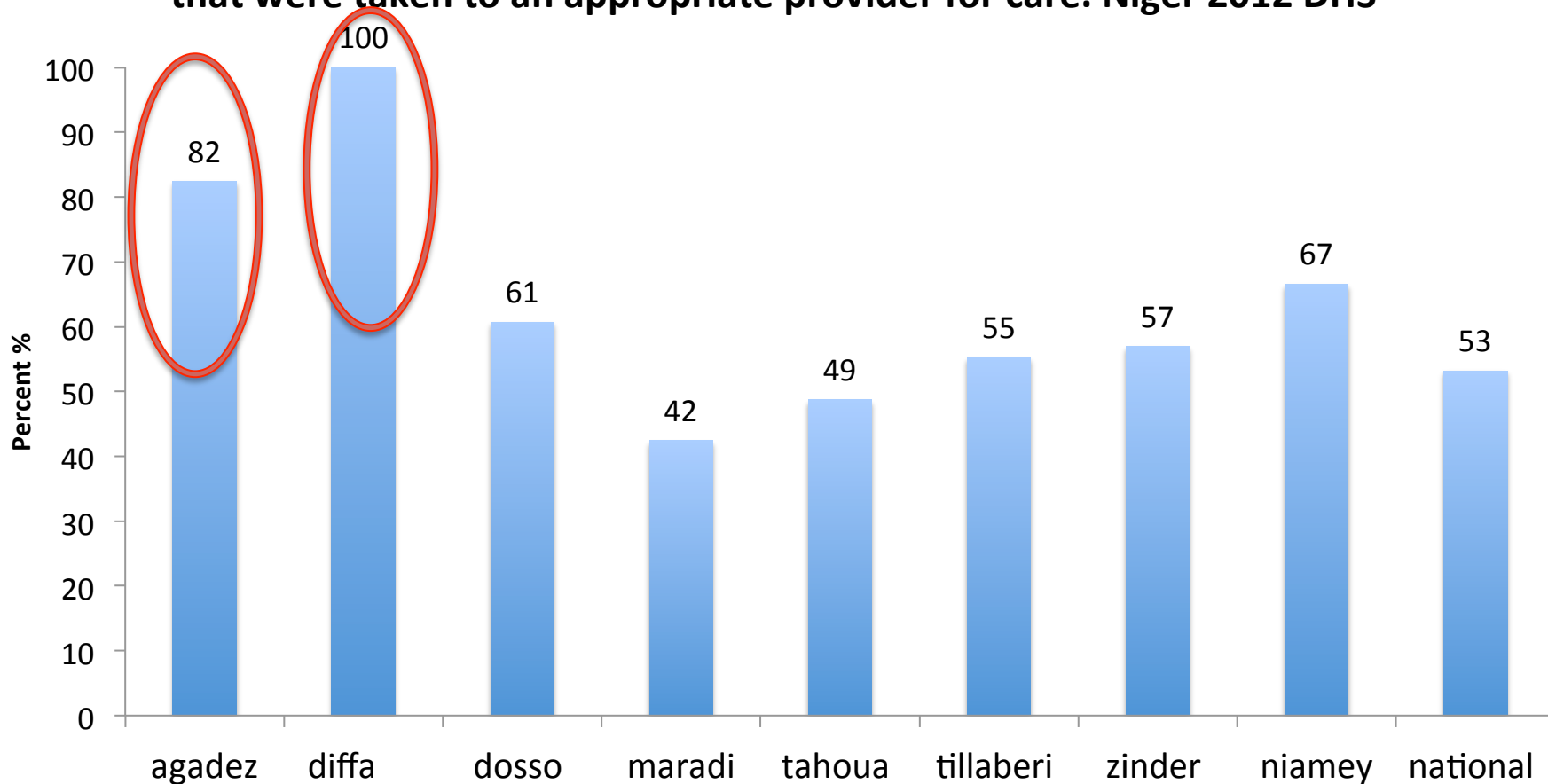
- Reliance on survey data that measures coverage at provincial/ regional levels will dilute impact of intervention in countries where the programme has not been taken to scale.
- iCCM targets the hard to reach in remote areas, the data will not adequately reflect this unless it is restricted to rural populations only.

Sample size matters...

- Breaking the unit of analysis down to the regional, provincial, and district level results in small sample sizes which impacts confidence intervals
- This can be especially problematic for some indicators: i.e.
 - Exclusive breastfeeding rates
 - Care seeking for suspected ARI
- Interpreting data with out confidence intervals can be deceiving, especially with small sample sizes...

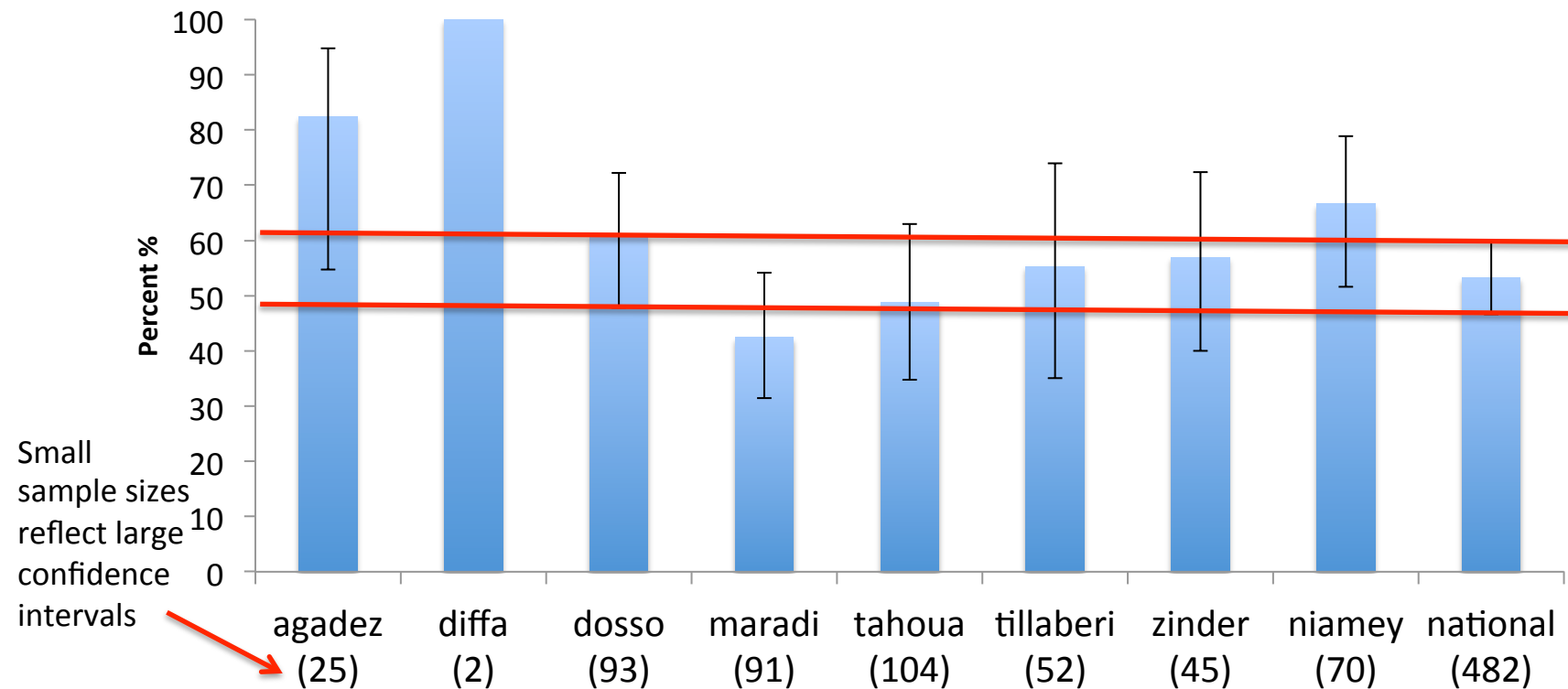
It appears that Agadez and Diffa have the highest care seeking rates for suspected ARI in Niger 2012 DHS...

Percent of children 0-59 months with suspected ARI in the last 2 weeks that were taken to an appropriate provider for care. Niger 2012 DHS



But when you take the confidence intervals into account, there is no significant variation across regions

Percent of children 0-59 months with suspected ARI in the last 2 weeks that were taken to an appropriate provider for care. Niger 2012 DHS

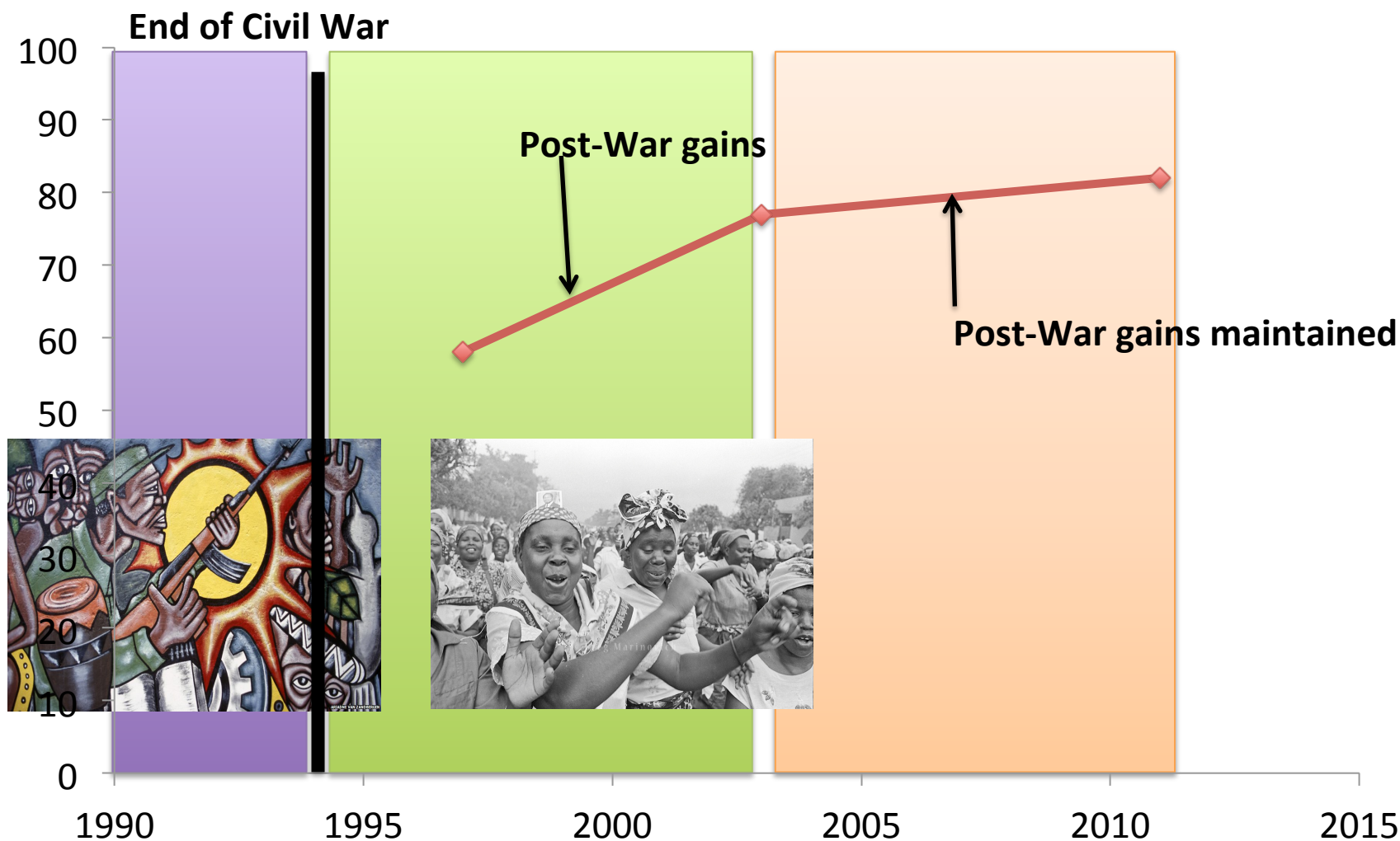


Surveys don't always match implementation period of a programme

Country/ Period	November 2007- May 2008			June 2008-May 2009		June 2009-May 2010		June 2010-May 2011		June 2011-May 2012		June 2012-May 2013	
	2005	2006	2007	2008	2009	2010	2011	2012	2013				
Ethiopia							Full iCCM						
	DHS						DHS						
Ghana				Partial iCCM			Full iCCM						
			MICS						LQAS				
Malawi					Full iCCM								
		MICS							LQAS				
Mali								Full iCCM					
		DHS							DHS				
Mozambique						Full iCCM							
				MICS				DHS					
Niger				Full iCCM									
		DHS								DHS			

Contextual factors impact coverage gains

Percent of children aged 12-23 months who received measles vaccine in Mozambique



Way forward for evaluations

- Invest in strengthening routine M&E systems in countries rather than expensive ‘snap-shot’ surveys.
- Try to align questions and definitions across surveys
- Be clear on targets for countries – what should we be aiming to achieve **with regards to coverage targets for iCCM?**

