

Executive Summary: 2022 Nigeria HPN Multi-Activity Sustainability Assessment Results

January 2023

Introduction

- Data for Impact (D4I) is conducting a prospective mixedmethods portfolio evaluation of four USAID/Nigeria Health, Population, and Nutrition (HPN) Activities comparing an integrated health programming approach with a disease-focused approach (Figure 1).
- The sustainability assessment explores how the Activities are contributing to the sustainability of health systems and health outcomes in Ebonyi, Kebbi, and Zamfara states by seeking to answer the question:

Figure 1. Intervention components by state



Did relevant commitment/engagement and capacity outcomes improve more from baseline to end line in LGAs/states where an integrated (IHP) approach was implemented, a diseasefocused (PMI-S) approach was implemented, or a combination of the two?

Methods

- Based on USAID's definition of sustainability of public health programs, we developed a conceptual framework to guide the assessment.1 Figure 2 describes 16 domains under four functional areas that potentially influence the sustainability of HPN programming interventions. Gender was integrated across components of the assessment conceptual framework.
- The assessment used a mixed-methods approach that featured a quantitative survey and qualitative key informant interviews (KIIs) (Table 1).

Figure 2. Elements influencing sustainability

System/organizational capacity Program implementation

- Strategic program planning Program adaptability & alignment Effective engagement &
- · Demonstrating program results

Resource & funding stability

- Leadership competence
- State govt. staff involvement
- System flexibility to adapt to change
- Effective coordination & collaboration

Enabling environment

- · Advocacy/communication
- Political support & acceptance
- · Government & local policy alignment

Community embeddedness

- · Program-community partnership
- Community leadership involvement · Community participation &
- accountability Public health impact

Table 1. Summary of instruments, participants, sampling, and analyses

	Quantitative	Qualitative
Instruments	Survey tool (including 57 multiple choice items across 12 domains, and 7-point Likert scale responses)	Semi-structured KII guides
Participants	HPN ActivitiesGovernment agencies	HPN ActivitiesGovernment agenciesUSAID/Nigeria mission
Sampling	161 respondents	24 respondents
Analyses	Calculated item scores & domain averages for each respondent and aggregated by state	Conducted thematic content analysis using a matrix for each interview topic

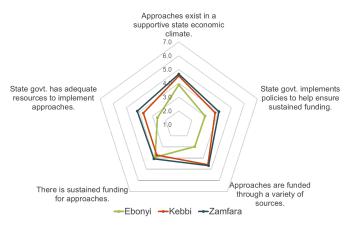
¹ Sustainability of Development Programs: A Compendium of Donor Experience. Washington, DC: U.S. Agency of International Development; 1998.



- Both quantitative and qualitative findings find evidence that USAID/Nigeria HPN Activities are contributing to sustainable state health systems and outcomes.
- All three states scored consistently high in 'program implementation' and 'enabling environment' functional areas.
- Ebonyi scored highest across all domains of 'program implementation' while a different state scored highest overall in each of the three domains included in the 'enabling environment' area (e.g., Ebonyi scored highest on advocacy and communications, Zamfara on political support and acceptance, and Kebbi on government and local policy alignment).
- Coordination and advocacy with government stakeholders is generally working well although "busy schedule," "limited competency among stakeholders" on health issues, and "competing priorities" were cited as challenges to these efforts.

We did data validation, case management training, clinical meetings... All of these are routine. [The Activities] are part of our workplan that aligns with theirs. So, everything we do, they are the ones supporting us almost 100%. — Zamfara SMOH staff

Figure 3. Survey results on 'resource and funding stability'



- Assessment survey scores were lowest for system and organizational capacity with many item averages in the 'small' to 'average' range.
- Limited funding and human resources continue to constrain state governments' capability to fully own and independently implement HPN approaches. Scores for measures in state government's resource and funding stability domain were lowest, with Ebonyi reporting lower than Kebbi and Zamfara (Figure 3).
- Respondents highlighted the shortage of funds and resources stemming from the states' "competing needs" and how government perceives, prioritizes, and commits to health.

Conclusion

- The results of this assessment presented are baseline findings. Therefore, evidence on effectiveness of HPN Activities' health programming approaches in increasing commitment/engagement and capacity is still limited.
- Differences between states are small, and both integrated and malaria-focused approaches incorporate multiple elements expected to contribute to sustainability.
- The larger context at state level—such as political economy, interpersonal dynamics, expectations—seems to have a larger influence on progress toward sustainability than the integrated vs. disease-focused approach.
- Structural constraints (e.g., funding, human resources, timeline) limit progress toward sustainability in both program models and are largely outside the control of the implementing partners.



