

Nigeria HPN Multi-Activity Evaluation

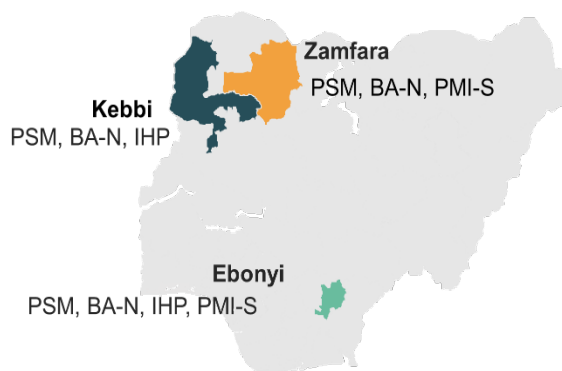
Findings from a Most Significant Change (MSC) Workshop in Ebonyi

Data for Impact (D4I) is conducting a mixed-methods, portfolio-level evaluation of four USAID/Nigeria HPN activities with a focus on comparing the strengths and challenges of an integrated health programming approach with a disease-focused approach (e.g., malaria). D4I, in collaboration with local research partner Data Research and Mapping Consult Ltd. (DRMC), conducted two-day MSC workshops in Ebonyi, Kebbi, and Zamfara in July and August 2022.

MSC¹ is an approach to monitoring and evaluation that involves assessing changes and impacts in response to a program from the perspective of (in this case) HPN activity staff, State Ministry of Health staff, and World Health Organization – Ebonyi Office staff.

Workshop Participants

Breakthrough Action – Nigeria (BA-N)	2
Global Health Supply Chain – Procurement and Supply Management (PSM)	2
Integrated Health Program (IHP)	2
President’s Malaria Initiative for States (PMI-S)	2
State Ministry of Health (SMOH)	6
World Health Organization (WHO)	2
Total	16
Female (%)	56.3%



Methods

Participants shared stories of change related to three domains: (1) advocacy and accountability for health, (2) capacity for leadership and governance in healthcare, and (3) sustainability of health systems and health outcomes. Participants narrowed down the stories they considered significant and ultimately identified one story per domain per state as “most significant.”² Participants chose those stories that they found to be impactful, detailed/comprehensive, verifiable, and sustainable.

Who benefitted from the interventions described in the MSC stories?



The people who benefitted were ultimately community members, with a focus on women of reproductive age, pregnant woman, mothers, children, and people with malaria.




Also, health care providers gained clinical skills and/or skills in data management. State and local health officials gained skills in planning, management, data use, and/or coordination, and community leaders gained skills in awareness raising related to priority health behaviors.

¹ Davies R and Dart J. The ‘Most Significant Change’ (MSC) Technique. Available at: <https://www.mande.co.uk/wp-content/uploads/2005/MSCGuide.pdf>.

² For more detail on methods, see the [MSC methods brief](#). For more detail on the workshop findings, see the [Ebonyi MSC short report](#).


The MSC Stories by Domain

Domain 1: 
Advocacy and Accountability

Community Ownership of Health

- BA-N reactivated Ward Development Committees (WDCs)
- WDCs mobilized resources, promoted priority health behaviors (e.g., ANC, IPTp, delivery at a health facility) and provided emergency transportation


Significance: Community members were empowered to take ownership of their own health

Domain 2: 
Capacity for Leadership and Governance

Reduction in Malaria Test Positivity Rate (TPR)

- HPN activities strengthened health worker capacity for management of malaria
- TPR reduced to 54.7% in PMI-S supported facilities compared to 60% in unsupported facilities

Significance: Reduction in TPR shows that malaria RDTs are being accepted by health workers as accurate and sufficient

Domain 3: 
Sustainability of Systems/Outcomes

Sustaining the Malaria Annual Operational Plan (AOP)

- Through review meetings, activity planning, and training on resource mapping and memo writing, the HPN activities strengthened the capacity of the State Malaria Elimination Program (SMEP) to develop a functional AOP

Significance: SMEP can now manage priority setting, document activity details for verification, and write fund requests

What key themes emerged from the MSC stories?



Working through local structures for advocacy and sustainability

- Reactivation of WDCs and capacity strengthening to address priority health issues and promote community ownership of health



Using data for decision-making

- Use of the malaria TPR to inform an intervention aimed at improving malaria case management



Collaboration among HPN partners

- Collaboration among partners and with the state to develop a functional malaria AOP



Building capacity of government officials for planning, management, and coordination

- Strengthened capacity of SMEP to develop a functional malaria AOP

How did the MSC stories align with HPN desired high-level outcomes and impacts?

- Each story was associated with more than one desired outcome or impact.
- All 3 stories were aligned with improved planning, management, and coordination.

Health System Outcomes	Facility-Level Outcomes	Impacts
<ul style="list-style-type: none"> • Strengthened health financing • Strengthened financing for EDDS • Increased use of data for decision making • Improved planning, management, and coordination • Increased advocacy and accountability 	<ul style="list-style-type: none"> • Improved provider knowledge, skills, and practices • Improved client-provider interaction • Increased availability of EDDS • Increased facility readiness to provide services 	<ul style="list-style-type: none"> • Increased demand for high quality services • Increased use of RMNCH+NM services • Increased sustainability of health outcomes/systems <p> 0 stories 2 stories 1 story 3 stories </p>

For more information

D4I supports countries to realize the power of data as actionable evidence that can improve programs, policies, and—ultimately—health outcomes. We strengthen the technical and organizational capacity of local partners to collect, analyze, and use data to support sustainable development. For more information, visit <https://www.data4impactproject.org/>