RESEARCH BRIEF

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The IDEAS project aims to improve the health and survival of mothers and babies through generating evidence to inform policy and practice.

IDEAS uses measurement and evaluation to understand which health innovations and programmes deliver the greatest impact on maternal and newborn survival at scale, as well as why and how they work. The project is funded by a grant from the Bill & Melinda Gates Foundation to the London School of Hygiene & Tropical Medicine. IDEAS works with project partners in Ethiopia, northeast Nigeria and Uttar Pradesh in India who are working to enhance the existing health system by implementing innovative health programmes.

This investigation of scaleup is one component of IDEAS. A follow up investigation is planned for 2014 during which we will study additional themes, such as potential roles for the private sector and community demand in catalysing scale-up of maternal and newborn innovations.

Find out more

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How to catalyse scale-up of maternal and newborn innovations in Ethiopia

Study aim: To understand what enables or inhibits scale-up of maternal and newborn health innovations.

Methods: Fifty in-depth, key-informant interviews conducted in 2012/13 with federal and state government staff, development agencies, programme implementers and other civil society organisations, academics, researchers, experts and professional medical associations.

Scope: This summary presents evidence from the study. We focus on what interviewees report as the most important ways externally funded* maternal and newborn health programmes can catalyse scale-up* of their innovations*, and the major challenges to achieving this. We include illustrative quotations from interviewees in *italics*.

Target audience: Government, development agencies and implementers in the field of maternal and newborn health.

Key messages

How to catalyse scale-up

- Embed scale-up within programme design
- Design innovations that are scalable for the Ethiopian context
- Work closely with government at all stages and align innovations with government policies and programmes
- Harmonise activities with other externally funded programmes
- Advocate for policy decisions by using evidence effectively and seeking support from policy networks and champions

Enablers to scale-up

- Politically enabling environment for rapid innovation scale-up
- Maternal and newborn health a policy priority
- Strong government efforts to coordinate external partners

Barriers to scale-up

- Limited information sharing among externally funded health programmes
- Weak health systems including problems of infrastructure, human resources, commodity supply, governance and financing
- Multiple sociocultural, geographical and economic barriers to innovation uptake in communities

*Definitions

Externally funded programmes: health programmes funded by donors outside of the federal or state government of Ethiopia, including the Bill & Melinda Gates Foundation and governments of high income countries.

Innovations: community-based approaches to enhancing health which is new to the context.

Scale up: increasing the reach of a maternal and newborn health innovation to benefit a greater number of people over a wider geographical area.

Plan for scale-up

Embedding scale-up within externally funded programme design is an important prerequisite of scale-up including developing a scale-up plan and activities from the onset and dedicating staff, resources and time to carry out scale-up work.

It is also valuable to assess policy priorities and potential barriers in government systems, identify potential supporters within government, development partners and civil society and understand community needs and norms to inform innovation design.

It is important for donors to finance, incentivise and strengthen grantee capacity to catalyse scale-up.

Designing scalable innovations

Innovations must be designed to be scalable. In the Ethiopian context, the following attributes make an innovation amenable to scale-up:

- Effective with a comparative advantage over alternatives
- Effectiveness observable to government, implementers and communities
- Meet community needs and priorities and culturally acceptable
- Adaptable to diverse geographical contexts
- Simple to implement and use
- Low cost or require limited financial and human resource inputs
- Aligned with government policies/targets and build on existing structures and services

Alignment with government policy

Aligning innovations with government priorities, targets and policy frameworks especially the Health Extension Programme and Health Sector Development Programme IV is critical to fostering government buy-in: '...if it's in line with their vision and structure and helping to achieve what they want to achieve, it will be most likely accepted...'.

Working closely with government including involving government in programme design and monitoring and evaluation plans engenders policy alignment, shared ownership of and government support for an innovation: '...involving decision makers in every step... dialogue with them so that they believe in it thereby creating ownership... creating trust by filling gaps, producing results and supporting their initiatives...'.

Contributing technical inputs, policy guidelines, tools, manuals and training curricula is an important way of enabling government decision makers and implementers to scale innovations.

Harmonisation of externally funded programmes

Engaging in partner coordination mechanisms can foster government oversight and ownership of external programmes and help government to strategically deploy externally funded innovations at scale. Such mechanisms can promote lesson sharing and provide effective advocacy platforms: 'The most important enabling factor is the forum that the government has created for us to come together and share our learnings'

Donor mapping, pooling financial resources and embracing joint working can improve coverage of externally funded innovations at scale.

Generating and communicating evidence

The Ethiopian Government responds very positively to evidence, although limited coordination among external partners means government sometimes struggles to use evidence: '...everyone says mine is the best!... some organisations boldly try to make their innovations accepted...'

Presenting multiple types of evidence is valuable to government decision makers:

- Quantitative data demonstrating innovation outcomes and impacts
- Cost data, estimated costs of scaling innovations
- Process data and implementation lessons
- International evidence benchmarking from programmes outside Ethiopia
- Demonstration of projects, hearing community voices, documentary films: '...take decision makers to the field and show them what's really happening...'.

Effective communication of evidence is critical: presenting clear, powerful messages; targeting the right audience; regular/ongoing communication; timing communication to align with government decision making; communicating evidence through government-led fora.

Is Ethiopia an enabling environment for scaling innovations?

- Government is open to innovations, partnerships and evidence
- Millennium Development Goals make maternal and newborn health a high policy priority
- There are strong government efforts to coordinate development partners
- Limited evidence sharing among development partners/implementers is a problem
- Scaling innovations through weak health systems is challenging
- There are multiple geographical, economic and sociocultural barriers to community uptake of innovations