



# “PRIORITIES OF HEALTH ECONOMICS IN AFRICA”

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## **Parallel session 3: Maternal health and quality of care**

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### **PS 03/4**

#### **Evaluation of a quality process at the community level: USAID Keneya Ciwara 2003 – 2008 Health Programme**

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#### **Abstract**

As part of its support to Mali, USAID financed the Keneya Ciwara health programme. This programme was managed by a consortium of NGOs together with Care International as the leader. Keneya Ciwara (PKC) provided technical, material and financial assistance to 15 health districts in Mali. The programme was implemented from October 2003 to September 2008. An independent evaluation was conducted of the programme in March –April 2008. The purpose of this presentation is to share the conclusions of this evaluation.

#### **Objectives**

The objective of Keneya Ciwara is to increase the use high-impact services and the improvement of health behaviours /practices. These services relate to child survival, (vaccination, malaria, diarrhoea diseases, acute respiratory infections, nutrition and vitamin A).

The final evaluation survey, which took place in April-May 2008 sought to assess the extent to which the indicators retained by the PKC had been attained.

#### **Methodology**

2029 households were interviewed on the basis of a random sampling in clusters over the entire 15 health districts. The same method was followed for the initial evaluation, the mid-term evaluation and this evaluation. The 2029 households made it possible to interview 2750 women of child-bearing age and 2787 children aged under five.

## Results

Among the major results recorded were:

- The major topics treated by the community relays are vaccination of children (54%), pre-natal consultation (40%), vaccination of pregnant women (32%) and family planning (24%).
- Of the encouraging results recorded, two examples can be mentioned:
  - o The promotion of family planning services by community women's associations;
  - o The « CSCOM Ciwara d'or » initiative.

### **a. The promotion of family planning services by community associations (community relays, women's associations)**

Building the capacities of community relays and women's associations is an effective factor for the support and promotion of family planning services. As a matter of fact, as part of the promotion and offer of high-impact services including family planning, the role of community relays and women's associations proves to be decisive and has tremendously improved the use of these services. As an example, within an interval of one month, the leaders of the Bandiagara circle women's association, after a three-days training and equipped with educational aids and information sheet, were able to refer 177 clients towards the health structures mainly for family planning services and other maternal health services.

In the areas of intervention of the USAID / Keneya Ciwara Health Programme, there was a marked increase in the number of new users (NU) of the FP services during the second half of the fiscal year (AF05): 16.574 new users as against 12.141 of the previous semester.

The annual target of 25.000 was largely exceeded because a total of 28.715 NU was recorded during the two semesters, or 15%. This increase was possible thanks to three factors:

- (i) the availability of contraceptive products at the services provisions centres, ,
- (ii) the aggressive communication activities during the FP campaign at the community and household levels,
- (iii) the references made by the community relays and women's associations.

The role of the community networks was very visible during the FP campaign in the circles. This visibility is demonstrated by the number of mobilisation sessions both at the community and household levels, the number of contraceptive products sold by the relays, and the number of requests for services made through the information sheets distributed to the clients. It becomes evident that after a long period of dormancy in FP interventions, the shortage of contraceptive products, inactivity of community-based distribution agents, this campaign which has repositioned FP, has opened a new era for Mali. The number of new users of modern contraceptive methods and the number of pregnant women receiving pre-natal consultation have increased markedly.

Also, building the capacities of the service providers, and their regular supervision are vital not only for their commitment, but also to improve the promotion and use of the FP services by a great number of beneficiaries.

**b. The « CSCOM Ciwara d'or », an initiative for improving the quality of health services in Mali**

The « Ciwara d'or » approach is a quality service initiative aimed at improving supply and demand of quality health services at the Community Health Centres (CSCOM). This approach is implemented in 236 « CSComs » in the USAID / Keneya Ciwara Health programme area of intervention (11 Circles and 2 Communes of the Bamako district). It is an initiative that establishes a permanent dialogue between the communities and the service providers, enables the community to define its standards in terms of quality and agree with the service providers on the type of quality to be offered to them. Consequently, the service providers offer efficient services and avoid shortage of drugs such as iron and folic acid used to fight anaemia, sulfadoxine pyrimethamine (SP), and insecticide treated mosquito nets to control malaria, and contraceptive products for birth spacing and controlling unwanted pregnancies.

The community representatives and service providers have drafted a manual of criteria for the selection and accreditation of the « CSCOM Ciwara d'or » in Mali. A team of quality supervisors constituted at the health district and comprising representatives of community and service providers has classified the CSComs on the basis of pre established criteria. In each health district, the CSComs occupying the first 5 positions compete by improving the quality of their health services. The CSCOM that meets the pre-established conditions of excellence, would be accredited by the « CSCOM Ciwara d'or » Ministry of Health. To be able to arrive at this ultimate stage, each CSCOM would have put in place a quality local team from among the member community and service providers dialogue groups. The CSCOM quality group: (i) analysed the situation in order to identify, analyse and prioritise the health problems of the health area; (ii) draft and validate an action plan to solve the priority problems relating to quality; and (iii) implement the plan of action. The evaluation of the level of implementation of the plan is done together with the quality supervision team of the health district. The CSCOM that will have the « Ciwara d'or » label is a collective decision from the quality supervision team of the health district and the administrative and political authorities of the District / Circle, the Region and the national Health Directorate.

During the programme 12 CSComs were given « Ciwara d'Or » accreditation

**Conclusion**

The community mobilisation and participation through the relays and women's associations, and the institution of a fruitful community dialogue in terms of quality of health services has greatly contributed to increasing demand and the use of quality health services in communities and households.

The community relays and women's associations play a decisive role in the promotion and use of family planning services in the communities and households.

The « Ciwara d'or » approach, by instituting a permanent dialogue between the communities and service providers, contributes to improving the supply and demand for quality health services at the Community Health Centres (CSCOM).