Health System Strengthening Programme Evaluation

Somalia

Gavi provided funding for Somalia’s health system strengthening (HSS) programme from 2011-2015 but the grant was extended and reprogramming of the HSS grant was done but no formal evaluation had been conducted. The 2015 HSS support evaluation was commissioned by Gavi and conducted by the University of Zambia.

BACKGROUND

Recognising that achieving immunisation coverage is dependent upon strong service systems the Gavi Board took the first steps to widen Gavi support to HSS in 2005.

Countries are encouraged to use Gavi HSS funding to target the "bottlenecks" or barriers in the health system that impede progress in improving the provision of and demand for immunisation and other maternal and child health (MCH) services.

Somalia’s HSS programme focused on four key areas:

I. To improve availability and utilization of immunisation and other essential maternal and child health services within 40 MCH facilities and 80 Health posts.

II. Introduce, on pilot basis, a new cadre of 200 Female Community-based Health Workers (FCHWs) providing mainly preventive services to a defined catchment population to help improve immunization coverage.

III. Implementation of a comprehensive and sustained behavioral change communication strategy.

iv. Undertake operational research of the Gavi HSS components

OBJECTIVES

The evaluation was conducted with the objective

- to assess programme performance in various aspects including design, relevance, implementation, efficiency, sustainability, and results.

- to inform proposal development for the next Gavi HSS grant to Somalia.

METHODS

Retrospective study and findings are based on both qualitative and quantitative data collected through document reviews, key informant interviews (KIIs), focus group discussions (FGDs) and field visits.
KEY FINDINGS

- **Planning**: Poor proposal planning and outcomes not feasible given the available resources and geographic coverage planned and poor linkages between Gavi HSS grant and the immunisation outcomes.
- **Implementation**: Differential rates of implementation over ridden by security challenges; achievement of some Gavi HSS activity milestones but implementation delays in others like outreach, fragmented implementation of Gavi HSS M&E function combined with weak health systems management capacity.
- **Efficiency**: Overall efficiency of expenditure has been good and planned activities have been conducted despite delays in Gavi disbursements.
- **Sustainability**: This is undermined by several internal and external factors; more synergy would be required between Gavi HSS grants and other HSS efforts within the country for long term sustainability.
- **Results**: Due to paucity of data, comprehensive assessment of Gavi HSS results not possible for outcome indicators and available HMIS data shows low coverage of DPT3, measles and vitamin A.

RECOMMENDATIONS

**Recommendations for the country**

- Proposal should be developed based on realistic assumptions and feasible outcomes based on the country political situation and context and establish clear linkages between the HSS activities and the intended outcomes for the EPI objectives.
- Larger investments recommended to strengthen M&E systems and HMIS.
- Country should be able to harness the catalytic nature of Gavi HSS grants, improve coordination and develop synergy with other HSS support and invest more in human resource deployment for EPI implementation.

**Recommendations for Gavi**

- Gavi Secretariat should allow countries to apply Gavi HSS resources more flexibly to catalyse system development in partnership with other donors to have more targeted interventions and thrust more responsibility on the government for better accountability.
- Conduct household surveys as baseline and end of implementation to understand the coverage and equity of EPI and MCH services.
- Gavi to provide TA to accelerate human resource engagement for EPI implementation.
- Partners to work closely and define mechanisms to reduce bureaucracy and also find cost-effective ways to implement Gavi HSS.
- Gavi Secretariat could consider key areas in logistics and supply chain systems, planning and information systems for support in future HSS programs at district level.

The report's final recommendations help inform the country and Gavi Board regarding future HSS proposals from the country.