

DOCUMENTING CONTEXTUAL FACTORS

The CI program is adapted to each country's health system; and documentation efforts must therefore also be adapted to collect information on contextual factors affecting maternal and child health in the areas included in the evaluation design. There are two main objectives for documenting contextual factors within the scope of the evaluation:

- As a basis for selecting comparison areas and/or conducting dose-response analysis; and
- To identify possible confounding factors and effect modifiers.

In order to capture the most detailed, accurate information, it is useful to collect contextual factors at the district or sub-district level and continuously monitor changes as they occur in real time.

Selection of comparison areas and/or dose-response designs

To estimate the differential impact of the CI program over routine services, one evaluation design option is to assess coverage and impact in a CI area compared to a non-CI area. To maximize internal and external validity of the evaluation, non-CI comparison areas should have similar baseline characteristics to the CI implementation areas, especially baseline mortality, poverty and access to health care. Additionally, the comparison area should have similar demographic patterns and cause-of-death profiles since these factors may affect the impact of CI interventions.

Governments and partners are committed to reducing child mortality, creating a dynamic environment where various development organizations are implementing similar strategies within one country. In some situations, an ecological design will be required if an adequate "untouched" comparison area is not available. A newly proposed paradigm for large-scale effectiveness evaluations does not rely on the assumption of "untouched" comparison areas, and instead is based on an "evaluation platform" that can support ecological designs across an entire country.¹⁴ As more large-scale evaluations move towards ecological designs, tracking contextual factors across all evaluated areas is vital.

Identify possible confounding factors and effect modifiers

Confounding factors are associated with both the program and the outcome without being an intermediate factor. For instance, the presence of other, external child health programs in the intervention or comparison area is a possible confounding contextual factor. As part of the CI evaluation, we can ask for each country:

1. *What factors would independently affect child health and mortality outside of the CI program?*
2. *Are these factors different in the CI districts versus the non-CI districts?*

In addition to confounding, we would also need to document factors that could modify the effect of the CI program on child health and survival such as access to health care, drug availability and governmental health policies.

¹⁴ Victora CG, Black RE, Bryce J. Large-scale programmes in child survival: Why we need evaluation platforms. *Bulletin of the World Health Organization* 2009; 87(2):83.

Contextual Factors	Indicators	Timing	Source
Health worker/population ratio	Doctor/pop ratio Nurse/pop ratio Trained midwife/pop ratio	Baseline; Endline	Health facility assessment tool
Drug availability	ACT stocks Cotrimoxazole stocks Other drugs	Baseline; Every xx months	Health facility assessment & key informant interviews
User fees	What services require a fee? How much is the fee?	Baseline; Every xx month	Health facility assessment & key informant interviews
Health Policies	Health insurance scheme Change in national drug policy	Baseline; Every xx months	Key informant interviews