

Gambia, The - Health Results-Based Financing Impact Evaluation 2014, Baseline Survey

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Sampling

Sampling Procedure

A household survey targeted a random sample of women 15 and older in communities in 2259 households, and a facility survey directly targeted all 24 health facilities in the area.

For the household survey, two-stage cluster sampling was used to identify a random sample of approximately 100 households with at least one woman of age 15 or older and at least one child under the age of five from the catchment areas of each facility. To identify these women, researchers first randomly selected five enumeration areas from the catchment areas of each of the 24 facilities using probability proportional to population size (based on the latest census estimates); in all selected enumeration areas, a household listing was conducted. From all eligible households listed, 20 households were selected for the survey.

The resulting sample is not representative at the national or regional level for three main reasons: first, geographically, the project covered only 3 regions in the country, which are on average less developed than the regions not included. Second, within regions, surveys were only conducted in communities with existing health platforms. These communities are on average slightly larger and likely also more developed than communities without such platforms. Last, within communities, the survey targeted only women with recent births, which are not representative of the larger adult female population.

Overall, surveys were administered to the officer in charge of each of the 24 health facilities and a total of 94 health workers working in maternal and child health services. Exit interviews were administered to 150 women attending ANC services and 160 caregivers of children aged under 5 attending out-patient services.

The community-based survey was administered to 109 VDC (Village Development Committee) members and 108 VSG (Village Support Group) members.

Questionnaires

Overview

A mix of quantitative and qualitative methods were employed for the baseline survey. The quantitative part of the evaluation relied on three main sources of data, while the qualitative part of the study used both focus group discussions and key informant interviews with a wide range of stakeholders to elicit their perspectives on different issues relevant to maternal and child nutrition and health.

Quantitative assessment

- 1) Household surveys: 2,257 households, within which questionnaires were administered to two people
- 2) Facility-based surveys: 24 health facilities in the study area, within which questionnaires were administered to the head of the health facility, health workers and women attending Maternal and Child Health (MCH) services.
- 3) Community-based surveys (Village Development Committees and Village Support Groups): 109 communities (approximately five for each facility), within which questionnaires were administered to members of the committees.

Qualitative assessment

- 1) Focus group discussions: 27 focus group discussions of approximately 5-8 participants each.
- 2) Key informant interviews: 20 interviews.

Data Collection

Data Collection Dates

Start	End	Cycle
2014-10	2015-02	N/A

Data Collection Mode

Face-to-face [f2f]

DATA COLLECTION NOTES

All quantitative data collection was carried out using tablet computers, with data uploaded to a cloud system for verification as soon as network allowed.

The qualitative assessments were conducted to help provide an explanation of the quantitative results, and to allow for more in-depth exploration of topics of particular interest. A combination of focus group discussions and in-depth interviews was used.

During the interviews and focus group discussions, the following themes were explored, varying slightly by target group:

- Uptake of MNCH services
- MNCH-related knowledge and beliefs
- Family planning knowledge, attitudes and practices
- Availability, accessibility, acceptability and quality of health services
- Barriers to accessing services
- Work-related behaviors (Motivation & Morale, Teamwork & Collaboration, Communication, Awareness, Perceived Control, Demand for Knowledge)
- Awareness and understanding of the The Maternal and Child Nutrition and Health Results Project (MCNHRP)
- Key behavioral attributes (understanding, expectancy, valence, buy-in, perceived fairness)

A sample interview guide and focus group discussions are available in Related Materials, Questionnaires.

Data Processing

No content available

Data Appraisal

No content available

Related Materials

Questionnaires

Household Questionnaire

Title Household Questionnaire
 Language English
 Filename FH_Household Questionnaire_Final .xlsx

Health Facility Questionnaire

Title Health Facility Questionnaire
 Language English
 Filename HEALTH_FACILITY QUESTIONNAIRE FINAL.xlsx

Health Facility Questionnaire: Exit Interview, Child under 5 Years Old

Title Health Facility Questionnaire: Exit Interview, Child under 5 Years Old
 Language English
 Filename EXIT INTERVIEW UNDER 5_FINAL.xlsx

Health Facility Questionnaire: Exit Interview for Antenatal Care Visit

Title Health Facility Questionnaire: Exit Interview for Antenatal Care Visit
 Language English
 Filename EXIT INTERVIEW ANC VISIT FINAL.xlsx

Health Worker Individual Questionnaire

Title Health Worker Individual Questionnaire
 Language English
 Filename HEALTH WORKER Questionnaire FINAL.xlsx

Community Questionnaire: Village Development Committee (VDC)

Title Community Questionnaire: Village Development Committee (VDC)
 Language English
 Filename VDC Community Questionnaire FINAL.xlsx

Community Questionnaire: Village Support Group (VSG)

Title Community Questionnaire: Village Support Group (VSG)
 Language English
 Filename VSG Questionnaire FINAL.xlsx

Reports

The Gambia Maternal and Child Nutrition and Health Results Project, Baseline Report

Title The Gambia Maternal and Child Nutrition and Health Results Project, Baseline Report
 Date 2015-12-01
 Language English
 Filename Gambia IE baseline report_FINAL_3Dec2015.zip

Impact Evaluation Baseline Report, Power Point Presentation

Title Impact Evaluation Baseline Report, Power Point Presentation
 Language English
 Filename IE baseline dissemination_final.pdf

Impact Evaluation Baseline Report Technical Briefs

Title Impact Evaluation Baseline Report Technical Briefs
 Author(s) Health, Nutrition, and Population Global Practice, World Bank Group
 Date 2015-12-01
 Language English
 Description The following briefs are included in the zipped file:
 1) Impact Evaluation Baseline Report: Maternal Health and Nutrition
 2) Impact Evaluation Baseline Report: Fertility and Family Planning
 3) Impact Evaluation Baseline Report: Child Health and Nutrition
 4) Impact Evaluation Baseline Report: Health System
 Filename IE Baseline Report Technical briefs.zip

Technical documents

Impact Evaluation Concept Note

Title Impact Evaluation Concept Note
 Date 2014-05-20
 Language English
 Filename Gambia RBF IE CN_May 2014 [v9].pdf

Datasets Description and Datasets Merging Information

Title Datasets Description and Datasets Merging Information
 Language English
 Filename ReadMe.pdf

Informed Consent Forms

Title Informed Consent Forms
 Language English

Description	The zipped file contains the following forms:
	1) Informed Consent Form Adult Household Questionnaire
	2) Informed Consent Form Adult Community Questionnaire
	3) Informed Consent Form Adult Health Facility Questionnaire
	4) Informed Consent Form Adult Health Facility Worker Questionnaire
	5) Informed Consent Form Adult Patient Exit Questionnaire
Filename	Consent Forms.zip

Qualitative Codebook

Title	Qualitative Codebook
Language	English
Filename	Qualitative code book.pdf

Other materials

Focus Group Discussions Guides

Title	Focus Group Discussions Guides
Language	English
Filename	Qualitative Interview and FGD guides.zip

Qualitative Interviews Transcripts (Anonymous)

Title	Qualitative Interviews Transcripts (Anonymous)
Language	English
Filename	Anonymized qualitative data.zip
