Qualitative study of scale-up in Uttar Pradesh – opening script

What is IDEAS?
- IDEAS is a grant from the Gates Foundation to the London School of Hygiene & Tropical Medicine to evaluate the foundation’s maternal and newborn health strategy in North-East Nigeria, Ethiopia and Uttar Pradesh in India.
- LSHTM and Sambodhi are working together here in India/UP – introduce others in interview.

What is the qualitative study of scale-up?
- This interview in a part of the IDEAS project. We are studying what enables scale-up of MNH innovations to happen and what are the barriers.
- We interpret scale-up as where innovations get scaled-up beyond an original project district to a wider geographical area. In UP this means the scale-up of Manthan’s mSakhi mobile phone app as part of the wider mSehat programme funded with UP state finances.
- Our main question is: what steps are being taken to catalyse scale-up of mSakhi/mSehat?
  - What approaches are working and why?
  - And aspects of UP’s context (political, economic, social) - What are the barriers and enabling factors and how have these been overcome?

Methods
- We are doing in-depth qualitative interviews with stakeholders closely linked to mSakhi/mSehat.
- We have ethical approval in UP and through LSHTM. This means you’re free to choose to participate in this interview or withdraw at any time. And we’ll maintain confidentiality at all times.

Are you happy to be interviewed?
- Do you have any questions at this stage?
- The interview will take up to an hour if you are happy with that?
- Can we ask you to complete this consent form before we start?
IDEAS overview

- IDEAS – *Informed Decision for Actions in Maternal and Newborn Health*

- A grant from the Bill & Melinda Gates Foundation to the London School of Hygiene & Tropical Medicine between 2010 and 2015

- Evaluating the foundation’s maternal and newborn health (MNH) strategy in Ethiopia, Uttar Pradesh in India and northeast Nigeria.

- The foundation’s strategy funds projects which test innovations to enhance interactions between frontline workers and service users – for example:
  - Incentivising strengthening capacity/roles of community health workers;
  - Developing tools to enhance community health worker performance e.g. mobile phone technologies;
  - Strengthening referral systems e.g. emergency transport scheme and call centre.

Working with research partners in each geography – Sambodhi in India.

IDEAS components

1. Developing a **common descriptive framework** to characterise and compare foundation innovations across settings.

2. Assessing whether innovations enhance interactions and increase life-saving intervention coverage by undertaking **large-scale family and frontline health worker surveys** in 2012 and 2014 and a **qualitative investigation** to understand changing behaviours of families and frontline workers.

3. **Economic study** comprising: a systematic literature review to synthesise evidence on the cost-effectiveness of MNH innovations in low/lower-middle-income countries; developing an economic model to examine the cost effectiveness of foundation innovations.

4. **Qualitative study** to identify factors enabling innovation scale-up and barriers that need to be overcome using a health policy analysis approach based on semi-structured stakeholders interviews in 2012 and 2014.

5. Systematic review of **social network analyses** in health, focussing on diffusion of innovations among health care providers.

6. **Measuring scale-up of MNH innovations** by: developing an index of ‘implementation strength’ to show programmatic intensities measured through regular monitoring data; conducting household surveys to estimate changes in intervention coverage and assess relationships between implementation strength and coverage focussing on an Ethiopian programme known as Community-Based Newborn Care that includes sepsis management.

7. Grantee interviews to understand their **dissemination activities**, their target audiences and how they aim to influence them.

8. A qualitative study in Uttar Pradesh to explore **incentives for private health providers to share information** with the public sector including testing the effectiveness of local level public-private decision making fora.