



ICRH

INTERNATIONAL CENTRE FOR REPRODUCTIVE HEALTH

*Improving sexual and reproductive health
through research, training and adapted interventions*



Enhancing motivation of family planning service providers as a lever to avoid stock-outs and increase quality of service

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Problem Statement

- Modern contraceptive coverage Mozambique 11.3%
- Poor supply management (PSM) in HC services
- Medical supplies: 15.4 % stock out rate
- Condoms & Depo: 20.5% stock out rate

Reasons stock outs

- Distance to district warehouse
- Human Resources: Limited staff
- Lack of training, accountability, motivation
- ...

(Wagenaar, 2014)



Problem Statement

- Focus human resources
- Performance strategies = Motivation ↑ = Quality of Care ↑
(Dieleman, 2006)



**Need for innovative interventions to improve motivation
in stock management**



Project development & implementation





Objectives

- 1) Examine link motivation/quality of care/ stock outs
- 2) Test interventions to increase motivation

Interventions

- Rewards (non-financial ~ long term)
- Performance Report (self-assessment ~ comparison)
- Motivational training

Outcomes

- Motivation provider
- Satisfaction women
- Stock outs of FP methods in health centers





Project: Design & Methodology

15 health centers: 5 in each group



Group 1

**Non-financial rewards
Motivational training**

Group 2

**Performance Reports
Motivational training**

Control Group





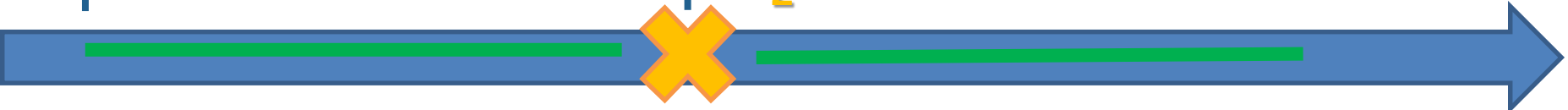
Exit interviews with women
&
Motivational surveys with health
care providers

baseline
T0: 5/'15

1st follow -up
T5: 10/'15

2nd follow-up
T10: 02/'16

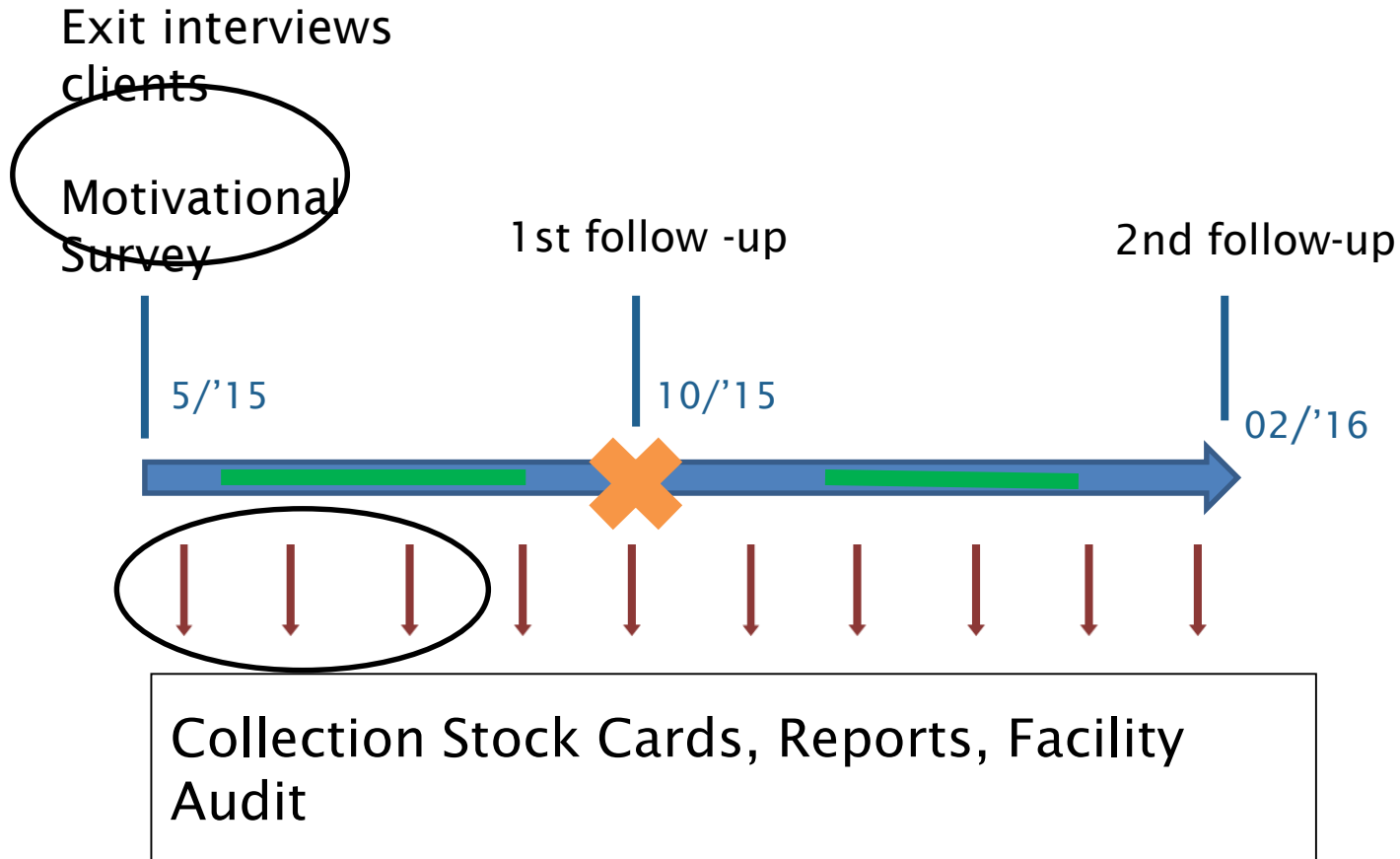
MOTIVATIONAL
TRAINING group 1 &
2



- Monthly:
- Unexpected visits to collect stock data
 - Distribution Reports/Incentives in IV groups



Preliminary Results



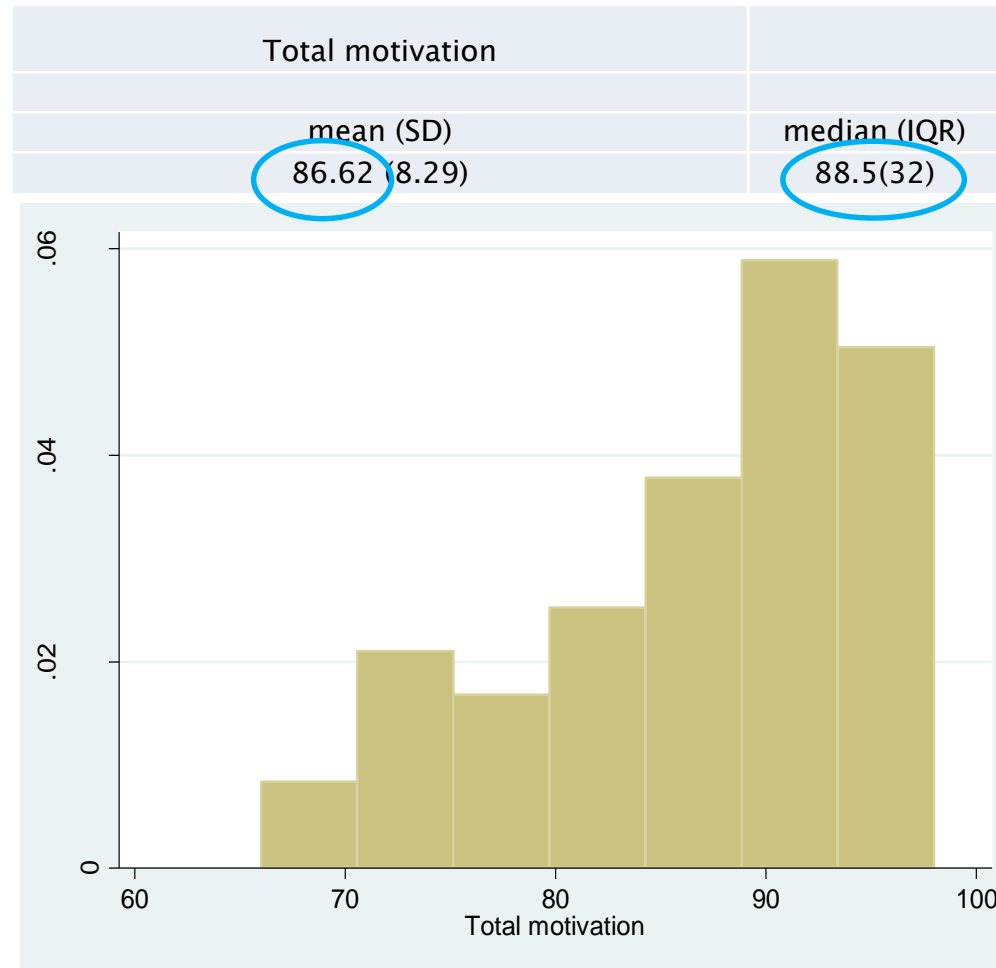


Baseline motivational outcomes

MOTIVATION ALREADY HIGH
Not always experienced in the field!

Social Desirability?
Measurement Motivation?

=>Add qualitative data next round





RESULTS

Performance scores (t0, t1, t2)

	control group					IV group reports					IV group incentives				
	HC1	HC2	HC3	HC4	HC5	HC6	HC7	HC8	HC9	HC10	HC11	HC12	HC13	HC14	HC15
t0	0	0	0	1	0	0	1	0	1	1	0	0	0	1	1
t1	0	0	0	2	0	0	2	0	2	3	0	3	0	2	0
t2	0	0	0	3	0	0	3	3	3	3	0	3	3	3	3



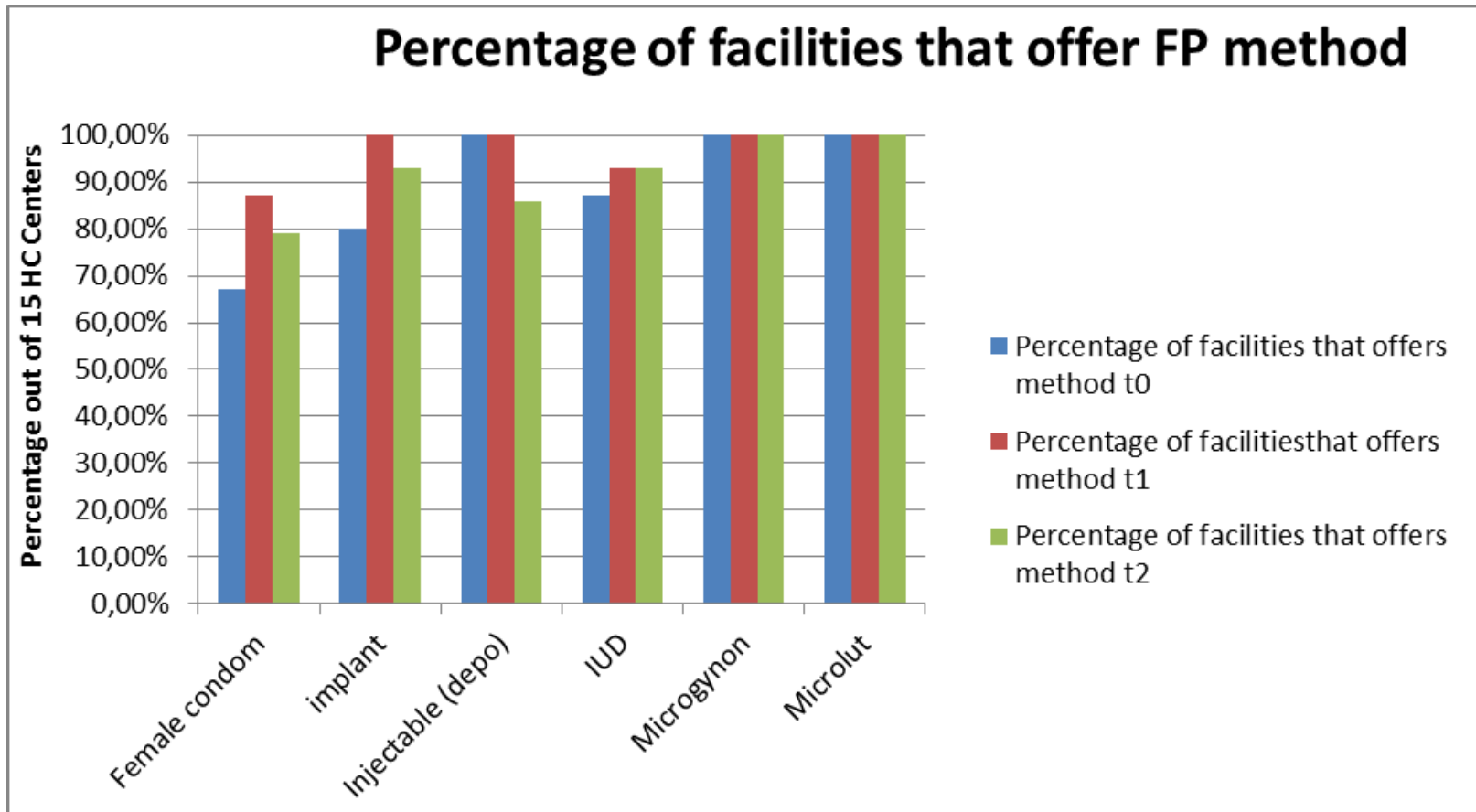
Monthly performance scores per HC based on 3 indicators (0–3)

Scores are improving, especially in both intervention groups



RESULTS

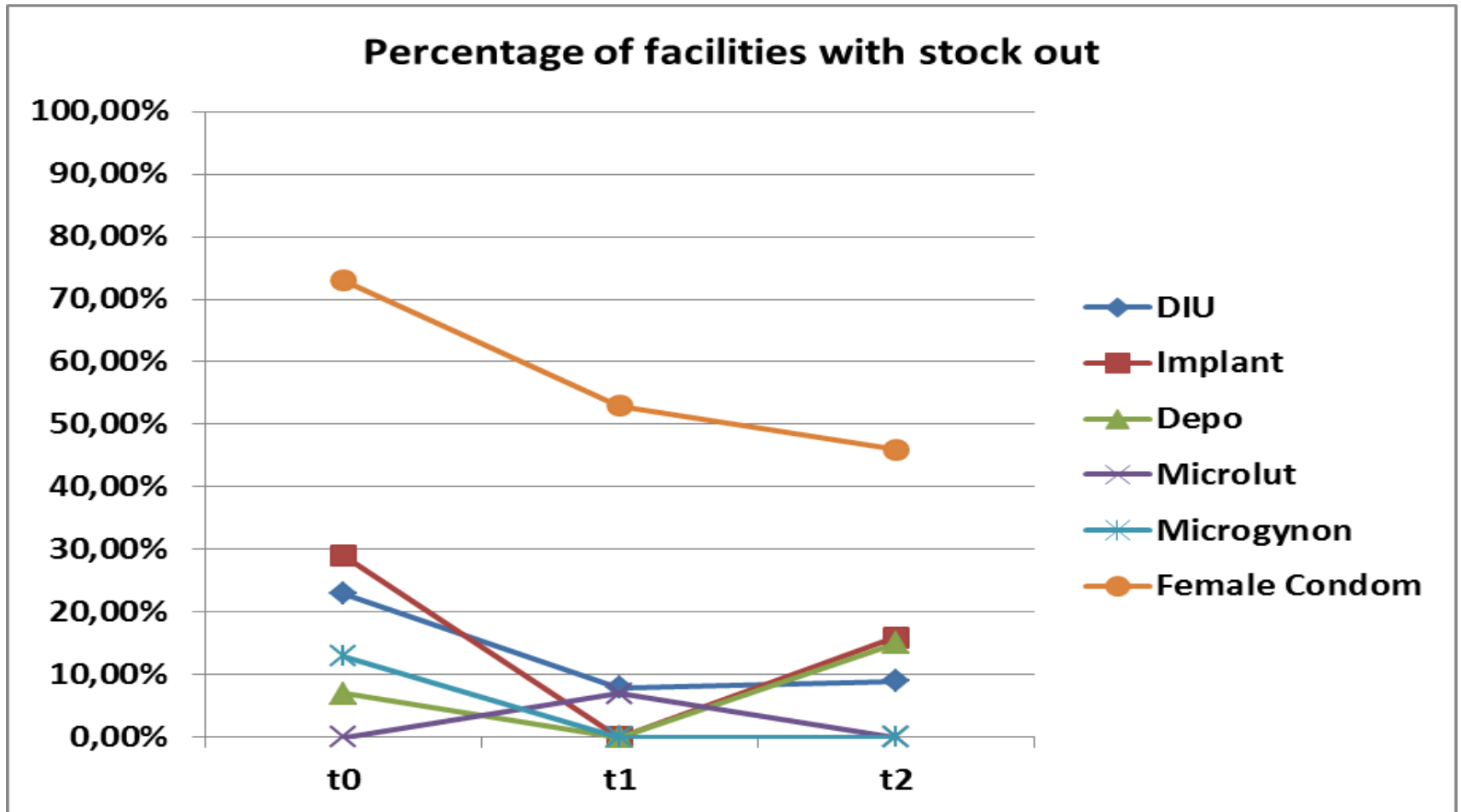
Indicator A1: Percentage of facilities that offer each family planning product or method, reported by product or method on day of assessment





RESULTS

Indicator B: Percentage of facilities stocked out, by family planning product or method offered, on the day of the assessment (reporting day or day of visit)





Observations in the field

- Differences between each center in motivation
- High workload providers
- No continuity (closed/absence providers)
- High staff turnover





Conclusion

- Tested interventions have an impact (preliminary results)
- Motivation hard to measure
=> Additional assessment through FGD and qualitative data
- Stock indicators are feasible & reliable to track stock outs
- **Further research needed**

Follow up indicators

Long term effects in motivation & QoC

Cost effectiveness?

Other supplies?

...



Next Steps

- Evaluation of project through FGD
- Qualitative part motivational survey
- Monitor changes in indicators

Dissemination results

- Inform Stakeholders
- Policy Briefs & scientific article
- International webinar
- Discuss rolling out to other districts (MoH)

THANK YOU

