

Community and Provider driven Social Accountability Intervention (CaPSAI) Project

Current Project Brief

Objectives and background

The continuing burden of unmet need for family planning and contraceptives (FP/C) services and information remains a challenge. Often, contraceptive services and supplies remain inaccessible for many women and girls, and men and boys because they are simply not available and they are not affordable. For women and girls who do have access to FP/C services, they can face informal fees, disrespectful staff, few methods offered, and may lack knowledge and information about contraception. The proposed research project builds on and contributes to a growing, but limited work that aims to better understand how social accountability and participatory processes in the context of FP/C programmes contributes to the greater achievement of sexual and reproductive health and improves quality of care and contraceptive uptake in FP/C services.

The research project will show how a social accountability process in the context of FP programs/services influences contraceptive uptake and use. Two objectives have been identified:

- Describe and examine how social accountability processes are implemented and operationalized with a focus on understanding behaviours, decision-making processes, and the barriers and facilitators of change, with a view to generalizability;
- Develop more responsive quantitative measures for social accountability and show the relationship between social accountability and uptake of contraceptives and use and other family planning behaviours.

The proposed study scales up a Community and Provider driven Social Accountability Intervention (CaPSAI) where services users and providers assess the quality of local FP/C services and jointly identify ways to improve the delivery and quality of such services. The eight standard steps informing the CaPSAI builds on a community scorecards (CSC), citizen voice and accountability projects and citizen hearings which have been implemented and evaluated by other organisations as well as the formative phase of the UPTAKE and Evidence Projects. We anticipate that this standardized approach implemented across facilities will result in generalizable findings related to social accountability intervention as a part of FP programmes.

The proposed research study contains two parts:

1. CAPTURING CHANGES IN CONTRACEPTIVE UPTAKE AND USE

- Contraceptive uptake. Interrupted time series design with a parallel control group (ITS-CG) to evaluate the effectiveness of a social accountability intervention (CaPSAI) on the uptake of modern contraception.
- Contraceptive use. A cohort of women who are new users of contraception is tracked using standardized interview questions across both intervention and control facilities to measure changes in behaviours around contraceptive use.

2. MEASURING EFFECTS OF THE SOCIAL ACCOUNTABILITY PROCESS

- Social accountability outcomes. An evaluation of the intermediary outcomes related to the social accountability intervention using a questionnaire of psychometric scales among health care providers and service users.
- Process evaluation. An evaluation of the implementation of the CaPSAI in intervention facilities using a range of methods and data sources.

Geographic location Ghana and Tanzania

Main Deliverables The project is expected to develop more responsive quantitative measures for social accountability and generate evidence showing the relationship between social accountability and uptake of contraceptives and use and other family planning behaviours. A main output of the study will be the development of an implementation manual to inform the effective implementation of social accountability interventions aiming to improve FP/C services by programmers and policy makers.

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