

Countdown Country Case Studies:

What might the final paper look like?

**Capacity Building Workshop
Pelotas, 17-21 June 2013**

Traditional Research Paper Outline

1. Introduction
2. Methods
3. Results
4. Discussion
5. Conclusions

What is different about a paper reporting on a Countdown country case study?

- Not traditional research; methods more ecological and descriptive
- Needs to include a careful discussion of program implementation and contextual factors
- Many components, therefore difficult to keep within the length limits of most journals (plan on using webannexes!)

Introduction

- Why is this study important?
- Why does your country have a special story to tell?
- What does this case study do? (i.e., what are the specific research questions addressed?)

Objectives (Niger study)

- Investigate factors of the rapid improvement in child survival in such challenging conditions focusing on:
 - Policies and programs actually implemented and contextual factors
 - Reanalysis of trends in coverage of child survival indicators
 - Reanalysis of mortality trends

Objectives (Peru study)

1. To describe time trends in broad contextual factors (socioeconomic, environmental, etc.) at national and district level, since 1990
2. To describe time trends in programs outside the health sector (same period)
3. To describe time trends in coverage and quality of RMNCH interventions (same period)
4. To describe time trends in RMNCH impact indicators (same period) with a particular focus on NMR
5. To seek associations between 1, 2 and 3 above, in this order, with 4

Methods

- Data sources

- explain where all the data reported in the case study came from, including any special data collection efforts done specifically for the case study (e.g., program documentation)

- Statistical analysis

- how did you analyze each type of data? Give references for any statistical packages used.

- Role of the funding source

- did the funder (Countdown) have any influence on the analysis or the conclusions?

Results

- Just the facts!
- Organize the results in a reasonable way – using an impact or logic model
- In Niger, we started with impact (mortality & nutrition) and worked backwards through coverage and program implementation; you may decide to do it in a different way.
- Use webannexes to provide additional data. A reader should be able to recreate your results using the data you provide.

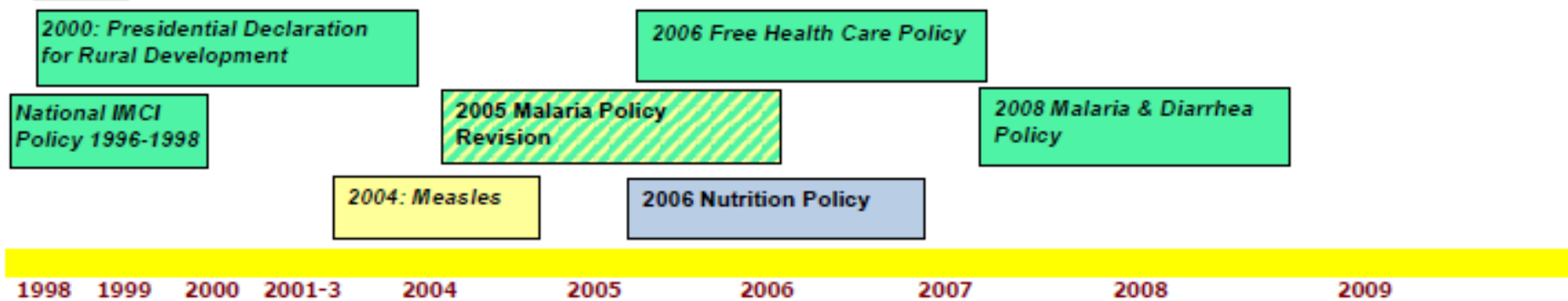
A note on program documentation results

- In the methods, as “setting”, or in the results, because documenting the program was part of the methods?
- A timeline of policy and program implementation can be very useful, and should be one product of the team working on policies and programs
- The timeline can also show any key events (contextual factors) that affected implementation
- One aspect of attribution is demonstrating that the interventions you are suggesting had an effect occurred sufficiently before the outcomes to make this plausible

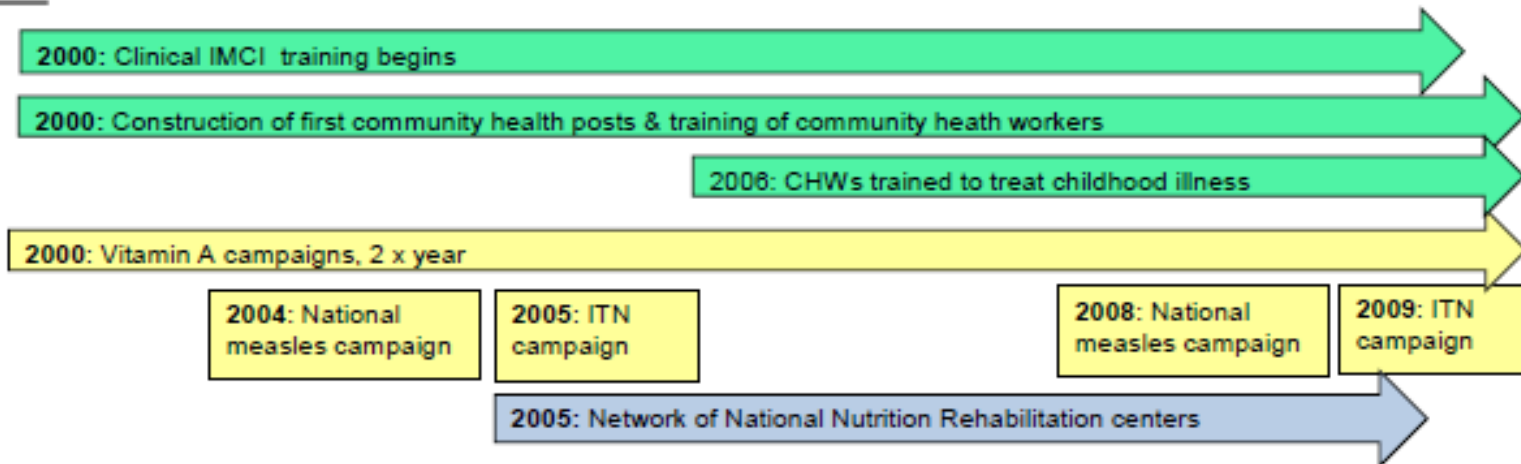


Program Documentation: Three major child survival strategies since 2000

Policies



Program inputs



 Increased access to primary health care

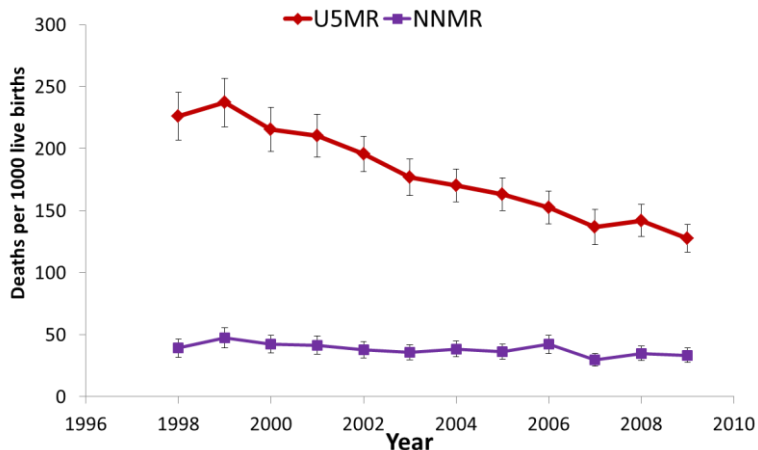
 Mass campaigns

 Intensified nutrition programs

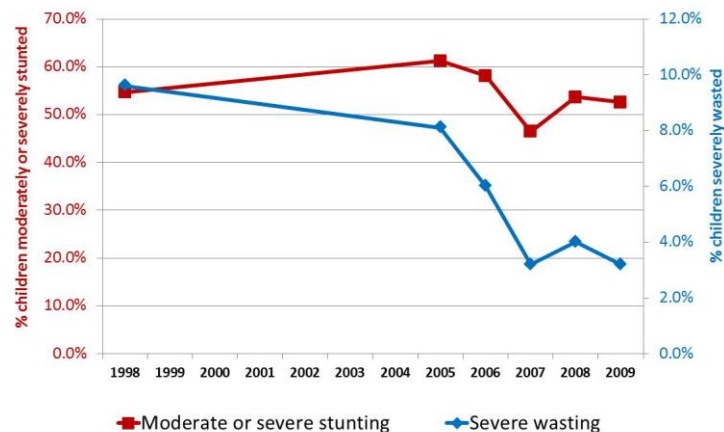


Results (Niger)

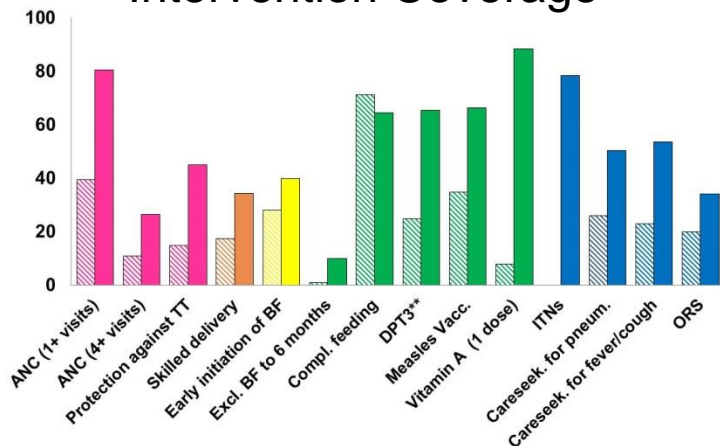
Mortality



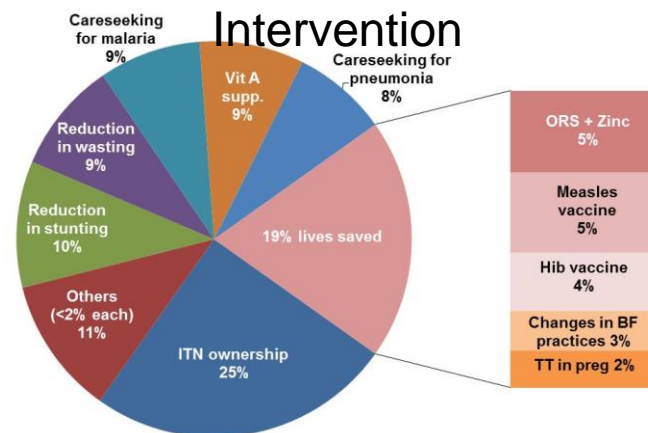
Nutritional Status



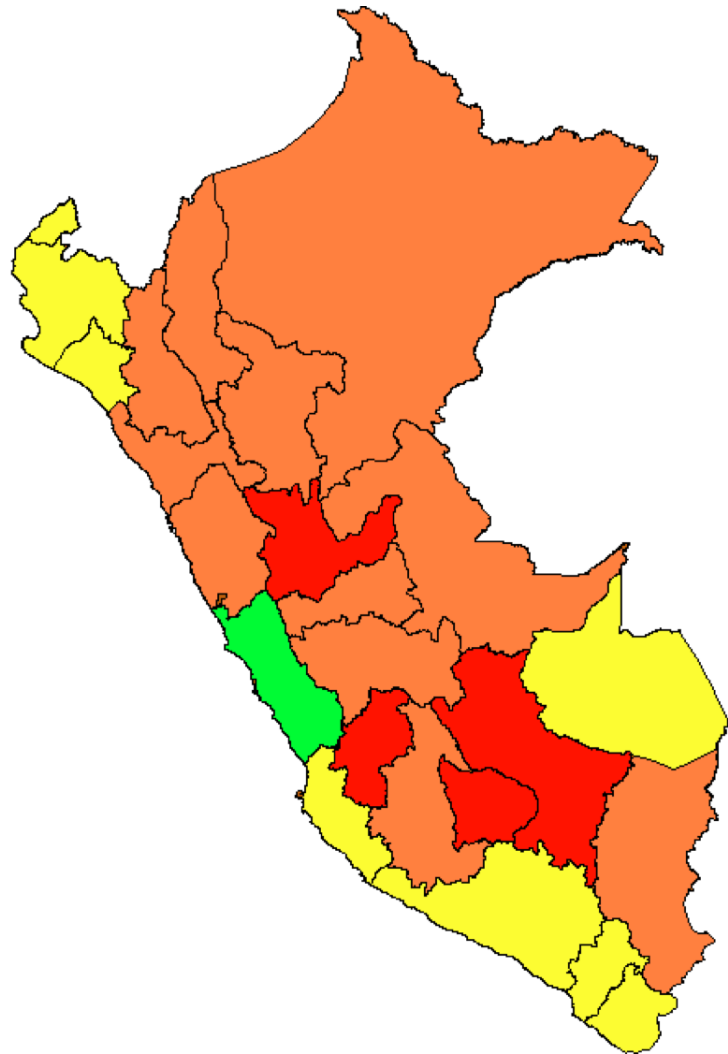
Intervention Coverage



Child Lives Saved, by Intervention



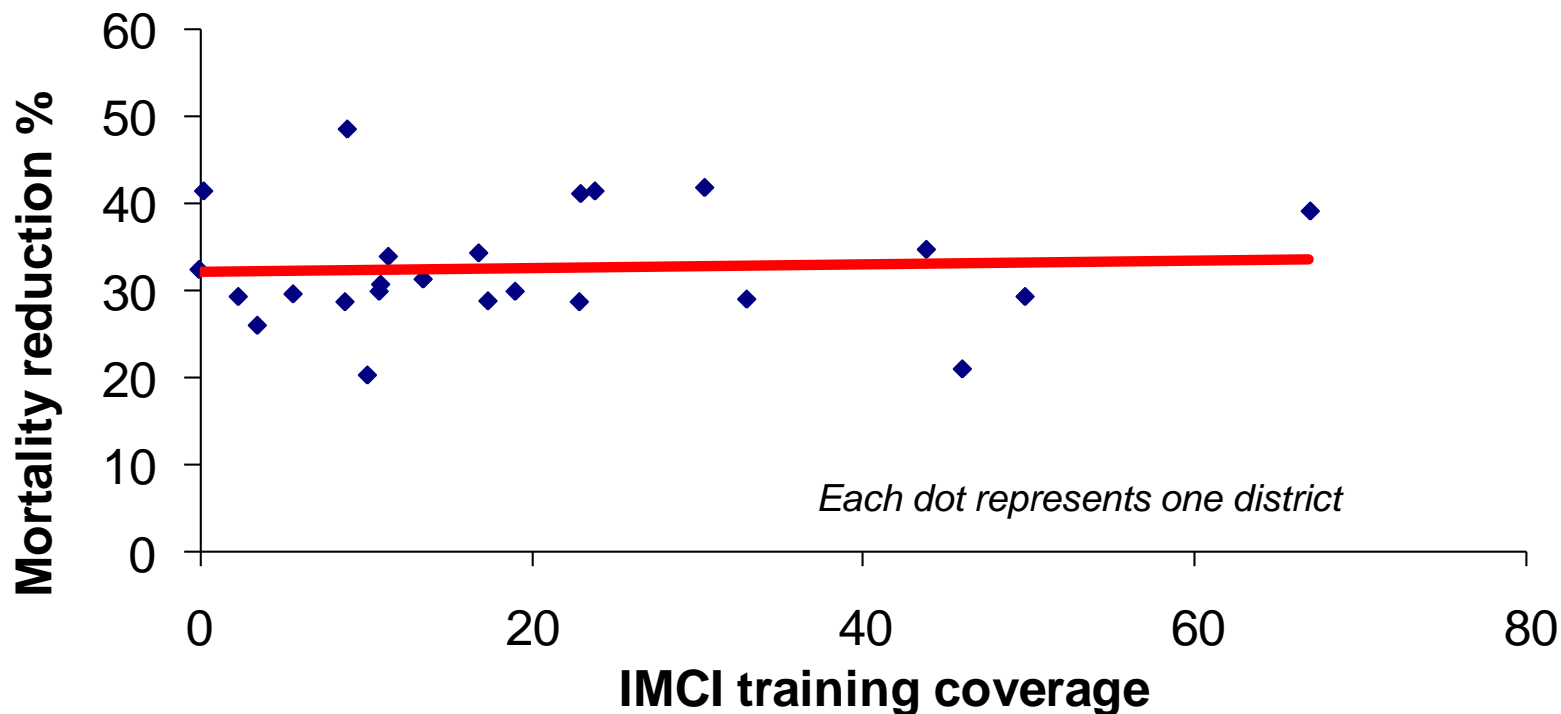
Peru map with its 24 departments/districts



- Existence of data by district allows ecological (geographical) analyses to explore the determinants of mortality and other health outcomes)
- Availability of multiple time-points for district data also allows spatio-temporal regression methods to be used in the analyses

Peru results from previous ecological analysis of IMCI

Peru: IMCI clinical training coverage (%) and underfive mortality reduction, 1996-2000



Discussion

In this order:

1. Brief summary of results
2. Interpretation of results: tell your story using the data you presented in the results
3. Rule out alternative explanations
4. Link your findings to previous research – are they consistent with what was already known? If not, why not?
5. Explain the limitations of your study, and how you addressed them. Explain why the findings are important despite the limitations.

Conclusions

- What has this study added to our knowledge about how to reduce MNCH mortality and improve health and development
- What are the potential action implications of your findings –
 - in the country itself
 - in other countries (how generalizable are the findings?)
- Is there further research or follow up that needs to be done?

Other pieces to keep in mind

- Summary or abstract
- Author contributions: what each person listed in the author list did in the process of preparing the paper (can be group authorship, or some named authors plus a group)
- Acknowledgements: who helped, and in what way?

Process points

- Good to have a clear plan for how the different pieces of the case study will come together
- Countdown uses a “contributorship” model
 - placement of authors in the list is important (e.g., 1st vs last author)
 - Individual authors plus group authorship is acceptable
- Allow time for internal review and revision, followed by Countdown review, then submission and peer review

Reduction in child mortality in Niger: a Countdown to 2015 country case study



*Agbessi Amouzou, Oumarou Habi, Khaled Bensaid, and the Niger Countdown Case Study Working Group**

Summary

Background The Millennium Development Goal 4 (MDG 4) is to reduce by two-thirds the mortality rate of children younger than 5 years, between 1990 and 2015. The 2012 Countdown profile shows that Niger has achieved far greater

 **Countdown to 2015**
Maternal, Newborn & Child Survival