



**ipa**  
INNOVATIONS FOR  
POVERTY ACTION

# Zambia Health Bulletin: Volume 1

February 2015

## Recruiting and Motivating Effective Community Health Workers in Zambia

Employing community health workers may help governments address the shortage of healthcare providers in Sub-Saharan Africa. However, it is unclear how offering incentives such as career advancement opportunities might affect who self-selects into community health worker jobs. This evaluation tests the effect of two incentive strategies on applicants' characteristics and job performance. Preliminary results show that making career incentives rather than social incentives salient attracted workers who were more qualified and performed better on the job and had similar levels of pro-social preferences.

The evaluation is now in the final stages of endline data collection with four, five-person survey teams deployed to 47 districts across Zambia. The teams are surveying a total of 752 households to gather a broad set of potential indicators on CHA performance including the frequency of the CHA visits, residents' knowledge of basic medical facts, and anthropometric measures for children under five.

Survey teams have faced numerous challenges, from the logistics of surveying in extremely remote areas during the rainy season to surveying amidst election campaigns. They have overcome punctured tires, vehicle breakdowns, and getting stuck in muddy ditches. They also encountered electoral commissioners and presidential hopefuls helicoptering throughout the countryside, giving them a closer look at the historic events taking place in Zambia.

In the next month, the final two teams will complete surveying and return to Lusaka. Researchers will then begin analysis of the survey data, looking for patterns and differences between the two CHA recruitment groups. IPA looks forward to sharing the final results of this analysis with our partners throughout 2015-16.

*Researchers: Nava Ashraf (Harvard), Oriana Bandiera (London School of Economics), Scott Lee (Harvard)*



## Improving Parental Recognition of Developmental Deficits in Children

In Chipata, Eastern Province we are assessing the impact of two simple programs designed to improve child health by increasing parents' awareness of their children's physical development, with a specific focus on stunting. This randomized evaluation is being conducted in a sub-sample of 550 households of a larger study that is working to improve food security during the hungry season. The first program distributes full-size growth charts to households so parents can measure their children every three months. The second program implements quarterly community-based child assessments. During these community meetings field teams measure the children, remind parents of the importance of protein, and provide a small amount of supplemental food to children that are stunted. Our hypothesis is that improved parental knowledge of their children's relative growth will increase parental demand for health and nutrition services and thus result in better child health.

In September 2014, we conducted the baseline survey, distributed growth charts, and held our first set of community meetings which were attended by over 1,200 children in 43 villages. We are currently in the process of conducting our second round of meetings in the same villages.



Researchers: Günther Fink (Harvard), Kelsey Jack (Tufts), Peter Rockers (Boston University)

## Understanding Male Fertility Preferences in Zambia

The Maternal Mortality Risk and Male Involvement (MMRAMI) evaluation examines whether providing information about maternal mortality risk affects desired fertility and contraceptive use. In addition—through targeting the curriculum to husbands versus wives—we hope to learn how this information spreads in the household, shedding light on the extent to which intra-household information sharing determines household behavior.

The baseline survey began in mid-August and continued (with a one-month hiatus in October) until early December. Our field team has completed 1,247 wife and 865 husband interviews (719 complete households) in low-income compounds in Lusaka. The baseline survey collected detailed measures of fertility preferences, knowledge of contraceptives, family planning attitudes, maternal risk assessment, and intra-household conflict and decision-making.

The combination of cultural taboos surrounding family planning and high mobility among our target constituents has led to several unforeseen challenges and delays. Field teams found it difficult to track men who were often either away for work or working very long hours, but they also suspect that the men were actively avoiding the surveyors due to the sensitive

nature of the survey content, which is widely considered a “woman’s topic” among Zambia’s urban poor.

The project has since stopped all baseline surveying and staff are preparing to launch the program and subsequent midline survey. The program will consist of community meetings for both spouses, in which one spouse attends a general family planning session and the other attends the same session but with an added piece on maternal mortality.

Researchers: Nava Ashraf (Harvard), Erica Field (Duke), Alessandra Voena (University of Chicago), Roberta Ziparo (Paris School of Economics)

### Our Team (Health Projects)

Rachna Nag Chowdhuri, Country Director  
Erika Keaveney, Research Manager  
Allan Lalisán, Research Associate  
Rachel Levenson, Research Associate  
Sonakshi Sharma, Research Associate

### Contact

IPA Zambia  
32 Ocean Court (Apartment #1), Mwambula Street  
Jesmondine, Lusaka  
Post Net Box 653, P/Bag E891  
Phone: +260 97 884 2369  
Email: ekeaveney@poverty-action.org

### About

Innovations for Poverty Action (IPA) discovers and promotes effective solutions to global poverty problems. We design, rigorously evaluate, and refine these solutions and their applications together with decisionmakers to ensure that the evidence created is used to improve opportunities for the world’s poor.

The Zambia Health Bulletin is designed to keep stakeholders and partners informed of on-going research in the Zambian health sector. For more information, visit <http://www.poverty-action.org/zambia>.

*Support of these studies comes from the John Templeton Foundation, GDN, 3IE, and the William and Flora Hewlett Foundation.*



*The Community Health Workers study is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The above contents are the responsibility of Innovations for Poverty Action and do not necessarily reflect the views of USAID or the United States Government.*