HEALTH CAMPAIGN EFFECTIVENESS COALITION
Strengthen Systems. Maximize Impact.

Campaign Characteristics Matrix

Assessing Compatibility

Determining Whether Campaigns Are Compatible

A critical step in applying best practices for campaign effectiveness is to align on which campaigns and their components can be integrated. As the initial first step, country teams can complete a campaign component matrix using a 4-step process:

1

Compile campaign characteristics for each domain (Immunization, Polio, Malaria, Nutrition, NTD)

i.e., for each campaign domain list targets, implementation modalities, teams, funding, microplanning practices

2

Identify **commonalities and similar practices,** as well as major differences

e.g., are different campaigns using the same training processes?

3

Identify **overarching integration opportunities** for all campaigns

i.e., what tools can be harmonized across all campaign domains, regardless of their target population, geography or timing

4

Identify **co-delivery opportunities** and specific campaigns to fully integrate

i.e., what campaigns should be merged to lower the burden on populations

Ethiopia Component & Opportunities Matrix

Campaign practices were compiled to identify commonalities and harmonization potential

Key
- Similar campaign practice
- Collaboration opportunity

	Immunization (e.g. Measles, Polio, YF)	Malaria (e.g. ITNs, SMC)	NTDs (e.g. SCH, STH, LF, MDA)	Nutrition (e.g. deworming, Vit. A)	NCD screenings (e.g. Hypertension, Diabetes)
Target pop.	Varies between diseases	General population	Varies between diseases	<5 yrs; PWLM; 10-19 yrs	Varies between NCD
Geography	Entire country/outbreaks	Malaria endemic areas	Endemic districts	Risk assessed areas	All country
Frequency	Varies between diseases	Nets:3-5yrs / IRS:annual	Varies between diseases	Vit A & deworming: twice/year	Annual campaigns
Seasonality	Measles is dry season	IRS: June/July	MDA R1:Oct/Nov R2:Apr/May	N/A	N/A
Point of delivery	Fixed post/house-to-house	Nets:posts / IRS:house	Fixed post/house-to-house	Fixed post	Fixed post (health facility)
Mode of delivery	Oral/injections	N/A	MDA:DOT	Observation by skilled HCE	N/A
Pharmaceuticals	Disease-specific	Insecticide	Disease-specific	Supplementation tablets	N/A
Supplies/logistics	EPSS delivery process	EPSS delivery process	EPSS delivery process	Unicef-Zone-Woreda-HC-HP	EPSS delivery process
Team composition	3-5: HEW, crowd control	Focal, HEW, volunteers	HEW, CDDS, teachers	HEW,HW,crowd control	Specialist, HW, support staff
Training	ToT cascading	Spray training / HEW	ToT cascading + orientation	Orientation at reg. & woreda	ToT cascading
Job aids	Manuals, posters, guides	Manuals, posters	Posters, leaflets, banners	Manuals, posters, banners	Posters, leaflets, banners
Census/registration	Conversion from census	Family folders, survey	Census updates	Conversion from census	Tally sheet; registration
Communication	Media, town crier, banners	Media, criers, banners	Media, leaders, banners	Media,criers, leaders, banners	Media,criers, leaders, banners
Supervision	Supervisors at all levels	1 supervisor/ X teams	Supervisors at all levels	Woreda Nutrition focal	Supervisors at all levels
Data collection/ Monitoring	Paper tally sheets reports	Paper logbook, survey	Tally sheet, paper form, DHIS	Nutr. card, tally sheet, form	Paper form; Summary report
Transportation	EPSS processes	EPSS processes	EPSS processes	Unicef-Zone-Woreda-HC-HP	EPSS processes/partners
Stakeholders	Gvt, partners, community	Gvt, PATH, PMU, Unicef	Woreda, partners, WASH	HEW, focals (wor., zone,	Cataract: Amrif, Orbis

Overarching Integration Opportunities in Ethiopia

Using the characterization matrix, the Ethiopia team discussed and analyzed what can be integrated across all health campaigns in Ethiopia

1 **6 areas** were identified as integration opportunities **for all campaigns,** with similar existing practices

- ***Training***
- ***Manuals/SOP/ Job aids***
- ***SBCC/ Communication***
- ***Data collection tools/reporting***
- ***Logistics***
- ***Supervision***

2 **1 area** differs amongst domains but could be streamlined across all campaigns

- ***Microplanning***

Co-Delivery Opportunities in Ethiopia

The Ethiopia team identified criteria and groups of campaigns that can be co-delivered in Ethiopia

1 5 criteria have been used to identify campaigns that can be co-delivered:

- ***Intervention Compatibility (RAC)***
- ***Point of Delivery***
- ***Timing Flexibility***
- ***HR/Teams Sustainability***
- ***Geography/regional context***

2 5 groups of campaigns have been selected for full integration:

Fixed site	*House to house*	*School*	*Community based*	
• Immunization/ measles • Nutrition • NCD screenings	• Immunization/ polio • Malaria spraying • Nutrition	• NTD (schisto, STH, STP) • NCD screenings • HPV • Adolescent nutrition	• NTD (LF, Onco) • NCD screenings • Malaria (ITN, SMC)	• NTD (Trachoma, MDAs) • TT screenings • NCD screenings • Malaria (ITN, SMC) • Nutrition