Background

Health is a key factor for human development. Unfortunately, West Africa lags behind much of the world in its maternal, new-born, child and adolescent health outcomes.

Health systems are the common-pool resource on which all programs in the health sector including Maternal, New-born, Adolescent and Child Health (MNCAH) draw. They can also be conceptualized as the foundation, pillars and the roof of a shelter for the health of the population which includes mothers, new-born, children and adolescents.
Across sub-Saharan Africa, health systems continue to face multiple, complex and urgent challenges in ensuring that service delivery is efficient, effective and equitable. The unfinished MDG 4 and 5 agendas are currently subsumed in the SDG 3 goal.

The Consortium for Mothers, Children, Adolescents and Health Policy and Systems Strengthening (COMCAHPSS) (http://www.comcahpss.org) is a South-South partnership of research, policy/practice and advocacy individuals and institutions in the countries of the ECOWAS sub-region and Cameroon. To support its research generation capacity building it has explored and established South-South partnerships beyond West Africa with the University of Cape Town (UCT) and the University of the Western Cape (UWC); and North-South partnership with the University of Leeds Institute of Health Sciences in the UK. It is currently exploring another North-South partnership with the University of Montreal.

COMCAHPSS is funded for a five year period from 1st April 2016 to 31st March 2021 by an IDRC commitment of up to approximately CAD 1,000,000 (USD 800,000). The original budget to enable full implementation of the program as originally conceived as CAD 2,400,000 (USD 2,000,000). The program has retained its original vision nevertheless; but has had to scale back the interventions to an essential core while efforts continue to be devoted to continuous process of trying to find additional funding to bring implementation back as close as possible to the original concept. The aim and the six specific objectives of COMCAHPSS are summarized below.

**Aim**

To conduct multi-level capacity building and networking at individual, institutional and country level in West Africa and Cameroon for leadership in Health Policy and Systems (HPS) and Maternal New-born Child and Adolescent health (MNCAH) research and practice to support context-relevant and effective policy and program decision making and implementation for MNCAH improvements in West Africa; and to monitor and evaluate the processes and impact of the program and lessons.

**Specific Objectives**

1. Strengthen health leadership capacity for research, innovation and change for decision making and implementation of high quality, effective, efficient and equitable MNCAH programs and services that improve outcomes in West Africa and Cameroon
2. Strengthen Health Policy and Systems and MNCAH research capacity in West Africa and Cameroon to generate evidence to support context-relevant and effective policy and program decision making and implementation of quality, effective and efficient Maternal, New-born, Child and Adolescent Health (MNCAH) services and outcomes in West Africa
3. Strengthen researcher ability to work with decision makers and implementers to identify relevant research agendas, generate, package and disseminate research information to support policy development and implementation in West Africa and Cameroon
4. Support and develop multi-disciplinary multi-level leadership and research networks for HPS and MNCAH in West Africa and Cameroon
5. Collaborate with WAHO at the contextual level to promote the use of evidence for MNCAH programs and HPS strengthening for improved MNCAH outcomes in West Africa
6. Monitor and evaluate the processes and impact of the program and lessons

The COMCAHPSS interventions

The interventions

Conceptual framework of the interventions

Specifically, the interventions are intended to:

- support networking and advocacy within and between country health systems in West Africa and Cameroon
- Catalyse innovation for health systems development that supports use of research evidence to inform scale-up and implementation of proven, effective MNCAH interventions.

Capacity is the ability to perform and produce desired outcomes. Capacity is multi-level depending on individuals and their networks, but also depending on the institutions and the context within which they work. Catalysing and strengthening capacity building has to consider individuals, the institutions within which individuals are embedded and the context within which the institutions are embedded.

COMCAHPSS Advisory and Steering Committee Meeting 2017
### Achievements to date in relation to objectives

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<tr>
<th>Themes</th>
<th>Individual &amp; institutional level</th>
<th>Contextual level</th>
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<tr>
<td>Leadership (Objective 1)</td>
<td>Collaboration in the development of open access modules for leadership capacity building in the context of the Pan African DrPH partnership and program development and implementation (<a href="http://www.panafrican-drph.org">http://www.panafrican-drph.org</a>)</td>
<td>Networking (Objective 4)</td>
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<td>Research (Objective 2)</td>
<td>Six (6) Week pre-doctoral training, coaching and mentoring program held in Accra for 8 competitively selected pre-doctoral level trainees in June/July 2017 Five trainees have research topics that contribute to COMCAHPSS evaluation. Three have topics that contribute to understanding of MNCAH &amp; HPS Contractual agreement entered into with HIGER Women, a COMCAHPSS partners in Cameroon to develop research coaching and mentoring training manual out of their vast experience.</td>
<td>Catalysis and support to the emergence, growth and maturation into full independence of the West African Network of Emerging Leaders (WANEL) (<a href="http://www.wanelhps.org">http://www.wanelhps.org</a>)</td>
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<td>Practice (Objective 3)</td>
<td>A team of individuals from partner institutions have developed the draft of a manual for Research communication, media and civil society engagement capacity building</td>
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<td>Monitoring and Evaluation (Objective 6)</td>
<td>Four COMCAHPSS doctoral fellows with topics related to COMCAHPSS evaluation (1 Nigerian, 2 Ghanaian, 1 Canadian) are enrolled in partner institution doctoral programs (UCT, UWC, Oxford, ULIHS). Their research projects will provide valuable insights into different aspects of the interventions that COMCAHPSS is involved in and how and why they work or do not work as anticipated. There are two COMCAHPSS doctoral fellows (1 Cameroon, 1 from Niger) for whom we are still exploring admission and placement possibilities. The lack of assured funding rather than their ability or the value of their research ideas has constrained our efforts. (See attached table for details).</td>
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