



MAIN KILLERS OF CHILDREN UNDER 5



Nearly half of under-5 deaths are newborn deaths



Pneumonia, diarrhoea and malaria are the 3 main killers of children under 5 following the neonatal period





EVALUATION OF THE MSF PAEDIATRIC DAYS

[January 2019] SHORT VERSION

This publication was prod<mark>uced at the request of the</mark> Organizational Committee of the Paediatric Days, under the management of the Stockholm Evaluation Unit. It was prepared independently by *Nicole Henze*.

DISCLAIMER

The author's views expressed in this publication do not necessarily reflect the views of Médecins sans Frontières or the Stockholm Evaluation Unit.

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EXECUTIVE SUMMARY

The Paediatric Days have been held only twice so far, 2016 in Stockholm and in Dakar in 2017. A third edition is planned for April 2019, again in Stockholm. The event is an international MSF event for MSF Headquarter and field staff of all Operational Centres, academic researchers, partners like Ministry of Health and other agencies; all sharing an interest in improving humanitarian paediatrics. It is organized jointly by MSF Sweden and OCBA in cooperation with the MSF International Paediatric Working Group.

This evaluation assessed both editions of the Paediatric Days against general evaluation criteria aiming to describe potential improvements of preparations and management of the Paediatric Days as well identifying opportunities for additional efforts to refine and fulfil the Paediatric Days' objectives.

The evaluation collected, reviewed and analysed primary and secondary data. Primary data was collected through 56 semi-structured in-depth interviews with 48 key stakeholders selected according to their roles in relation to the Paediatric Days and paediatric field programmes and an online survey of all participants (103 responses/32% response rate). Secondary data reviewed were for example Paediatric Day reports, videos, meeting minutes, budgets, governance documents. Primary data was triangulated with secondary data and between interviewees and online respondents.

The evaluation findings are limited by the low response and availability rate of Paediatric Advisors (50%) and stakeholders that have previously not directly been involved with the Paediatric Days (23%); creating a lack of perspective on the Paediatric Days from non-participants and those who manage and support paediatric programme components in MSF.

FINDINGS

In 2014, returning Swedish Paediatricians felt the need to push their Association to do more than providing human and financial resources to improve the quality of medical care for children in MSF field missions. Together with interested Paediatric Advisors, the idea to hold a scientific paediatric conference was born. MSF Sweden and OCBA supported and invested in the idea to create this platform. Exchange between academia and MSF on common paediatric challenges and its solutions was determined as core concept of the Paediatric Days.

Children represent a large group of MSF patients and especially neonatal mortality represents almost half of the global child mortality. MSF's paediatric care in humanitarian settings is faced with too few specialized or poorly trained staff, too few diagnostic tools and standardized or simplified protocols and large research gaps. While it is generally recognized that MSF is acknowledging these challenges now better than 10 -12 years ago, they still exist. The Paediatric Days provide a platform to discuss these challenges and aim to contribute towards improved quality of medical care for children in humanitarian settings.

The Paediatric Days are the only scientific-operational event that actively invites academic experts to share their research and strives to use that knowledge to assist MSF finding solutions to identified challenges. While presenting latest research, its usefulness for MSF operations overtakes academic originality.

The Paediatric Days are governed through a combination of a partner section working with an operational centre in close cooperation with an international technical working group. These entities are reflected through the members of the Organizing and Scientific Committee. The governance structure was established 'on-the-go' while planning and implementing the first two events and is found highly adaptable and able to plan and manage the event. The resulting shared ownership and absence of a single appointed responsible person presents a risk of lack of accountability, but this has so far not materialized. Together with a recent creation and clarification of roles and responsibilities, clear and transparent communication between the committees is needed to maintain the successful functioning of the structure. The participatory nature of the committee's work slows down decision making processes but assures needed buy-in at the same time.

The selection of topics presented at the Paediatric Days is a participatory process involving the Organizing and Scientific Committee and the Paediatric Working Group. One survey of participants of Stockholm 2016 yielded a long wish-list of topics which today still contributes to the selection of the overarching topics. Ongoing contribution of field and operational staff is not formalized. The process is supported by a clearly defined abstract review process. Chosen topics are found to be relevant for most participants' daily work.

The participation of the Paediatric Days surpassed expectations but remains limited at 250 to assure successful discussion, exchange and networking. MSF participation lies around 60% versus 40% external participants. In Dakar, the

different Operational Centres participated at different levels with OCBA and OCG presenting more than half the audience, and OCP and OCB another quarter. OCA has the lowest attendance. In Dakar, 85% of MSF participants were field-based and their participation in contributing roles has improved to 27% in Dakar compared to only 7% in Stockholm.

There is a common understanding amongst interviewees what the Paediatric Days are for. Improved quality of paediatric field care crystallized as a general objective. In absence of an explicit logical framework and set indicators, this evaluation has used three most commonly expected results for appraisal. They are presented in the table below together with their achievement.

Table 1. Expected results of the Paediatric Days (used for this evaluation) and their achievement

Expected Result	Achievement
Research related to MSF paediatric challenges are highlighted and shared and solutions and recommendations for paediatric programming and care are generated and/or advanced.	Partly achieved Recommendations: YES Solutions: NO
Advocacy messages advancing paediatric issues within MSF and beyond are created.	Poorly achieved Messages created: YES No distinction of advocacy between external advocacy and internal lobbying/influencing No vision on usage within or outside MSF
Exchange between MSF staff from missions and headquarters, academia and partners are created	Achieved

The Paediatric Days have achieved some impact. This is associated with a better understanding of possibilities (especially in neonatology) or concepts (like mother-child continuum) and tools (like eCare and telemedicine as well as increased personal, professional skills) that have been applied. Discussions at the Paediatric Days have also contributed to general and ongoing discussions on protocols and guidelines (for example shock) and changes to programmes (increase of patients in sickle cell cohort).

The Paediatric Days are well organized including online streaming and simultaneous translation, both key elements for diversity and broad attendance. The location of the Paediatric Days plays an important role towards geographical field proximity and an interest to hold the event in other locations than Dakar and Stockholm exist. Any gain of a potential new location needs to be examined and balanced with possible increased effort needed to establish the event in a new location. Further aspects of the organization of the event are managed effectively.

The budgets of both events have been effectively managed and no indication of inadequate use of any resource has been detected. The average cost of the event represents 0.07% and 0.03% of their respective total annual expenditure for MSF Sweden and OCBA with actual totals of 76 and 135 thousand Euros. Travel/accommodation and venue cost represent the two largest groups of expenses, in line with similar events in MSF.

CONCLUSIONS

After two editions of the Paediatric Days, the event is today at a point of becoming established within MSF and formalized in its governance structure.

Both Paediatric Days in itself were overwhelmingly successful but an impact beyond the actual event is expected by the organizers and by MSF's management levels.

Improved quality and a broadened range of medical care for children in humanitarian settings is the ultimate goal the Paediatric Days wish to contribute to. The development of an explicit logical framework with clearly defined general and specific as well as expected results would further facilitate establishing the Paediatric Days more solidly.

Increased inclusion and diversity in planning and implementation, choice of topics and participation will enhance the Paediatric Days and make it a more successful event. Diversity should be considered in terms of the level of seniority, the profession/role, context and location of work of contributors as well as attendees.

The key to assuring relevance of topics is to find a balance between pushing for new topics and addressing already pressing occurring challenges and choosing the associated external and internal research to address the topics and challenges. Not all topics can be equally relevant for all participants but should be at least for a majority of the target audience. MSF field missions and paediatric care in humanitarian settings generally face many challenges providing

medical care and MSF's Operational Centres have varying operational priorities. The Paediatric Days need to identify the most common and pressing ones within these parameters, which is a difficult task. An MSF-wide agreed paediatric agenda or paediatric plan of action would support and facilitate these choices.

This evaluation has found that the Paediatric Days had impact on paediatric field care, largely by individual participants picking up knowledge that they apply directly to their care of patients or continuing to discuss about and work on ongoing challenges and push for change. The Paediatric Days are lacking resources and systems to follow-up on outcomes of the event. Investing in follow-up will allow advanced learning that can be applied to the next Paediatric Days, increase organizational pick-up of recommendations and advocacy messages and increase the impact of the Paediatric Days.

In order to remain appropriate and relevant and increase efficiency, close proximity to MSF field operations is required. Including field and operational presence beyond paediatric specialists in planning, carrying out and attending the Paediatric Days will ensure this proximity while MSF and non-MSF technical, operational and academic expertise will ensure a broad view on relevant topics and priorities as well as presence of best and latest research and practice.

The organizers of the Paediatric Days can be applauded for putting together such an event with extraordinary commitment and limited resources. Now, there is an opportunity to establish the Paediatric Days within MSF and increased investments can yield in significant contributions to improved paediatric field care.

RECOMMENDATIONS

To Organizing and Core Scientific Committee

- ⇒ Recommendation 1: Create a logical framework for the Paediatric Days including a general and specific objective as well as two to four expected results including activities, smart indicators of success and assumptions.
- ⇒ Recommendation 2: Develop and implement an advocacy strategy defining target audience, activities and expected results (for example: pricing, paediatric dosages, equipment, research gaps)
- ⇒ Recommendation 3: Expand the promotion of the Paediatric Days, as well as dissemination and follow-up on key recommendations and advocacy messages, for example through identified Ambassadors from all OCs and levels (HQ, field)
- ⇒ Recommendation 4: Continue to pursue diversity and field connection through both choice of themes and participants, increase opportunities of skill development at or surrounding the event, including exploring the possibilities to create a workshop on preparing and presenting abstracts

To MSF Sweden and OCBA

⇒ Recommendation 5: Continue to support and champion the Paediatric Days and increase the investment in the Paediatric Days to improve efficiency

To the MedOps Platform

⇒ Recommendation 6: Identify intersectional paediatric priorities and support communication about and attendance to the Paediatric Days within the respective Operational Centre

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