

Capacities for Health & Oxfam

Evaluating household resilience in Wajir, Kenya

Background

Capacities for Health (CfH) is a non-governmental organization working to improve access to and quality of healthcare in 13 countries across Eastern and Southern Africa. In July 2016, Capacities for Health was commissioned by international development organization Oxfam, to evaluate a three-year livelihoods program in Kenya. The program aimed to support community members on household resilience, and beef and fodder trading practices, enabling them to better cope and recover from severe drought. For this purpose, the NGO required a data collection tool for gathering quantitative data in an accurate and timely manner in the remote region of Wajir county, Kenya.



The Challenge

Wajir is a sparsely inhabited rural district located on the Kenya-Somali border. With limited infrastructure, the main economic activity of this region is agro-pastoral herding. Clean drinking water is unavailable to 96 percent of the population. Omondi Otieno, Chief of Party at CfH, and his team of enumerators, faced both a geographic and a time-constraint challenge in the collection of data. Following on-site interviews, CfH sought to provide prompt observations back to Oxfam.

Capacities for Health had previously tried other electronic data collection tools. However, none of the electronic solutions had yet met their expectations in terms of user experience, and level of technical support from tool providers. Before working with Teamscope, some of these experiences resulted in the worst case scenario for the NGO - the complete, or partial loss of data.

Teamscope's Impact

By working with Teamscope, Capacities for Health was able to set up, test, and refine three survey tools for collecting data within just two weeks. After piloting the tool in Wajir, a number of changes were made to the surveys implementing suggestions directly from the NGO's experience.

Since the Teamscope app requires very limited bandwidth, Capacities for Health was able to swiftly load finalized surveys while still in the field, despite limited 2G connectivity.

During data collection, internet connection was not required, and enumerators could store data while being "offline", and upload it to the server every night once a connection was available. Throughout the duration of the project, the study coordinator was able to review the collected data on-the-go, making it possible to detect data quality issues and make adjustments on the spot.

Had Capacities for Health used paper questionnaires for data collection, insights on survey improvement opportunities would have been delayed until data had been manually entered and analyzed. With the help of Teamscope's support team, CfH was able to identify and solve inconsistencies in their data, and modify procedures to ensure data quality.

All 15 enumerators taking part in the interview and data collection processes had never used an electronic data collection system before. As part of their capacity training process, enumerators became familiar with the Teamscope platform, and practiced uploading questionnaires via Teamscope using trial data.

Despite being new to electronic data collection, all enumerators found Teamscope to be easy to use and appreciated the time saved while conducting interviews. Interview time was cut by 20% compared to when using pen-and-paper for data collection, reducing interviews to 40 minutes from the previous one hour.



Top of the world customer support. Our search for a reliable data collection tool is over.

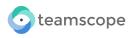


Conclusions

In total, enumerators visited 567 households within selected villages of the Wajir county. Data was analyzed and CfH was able to submit a comprehensive evaluation of the livelihoods program within 5 days of fieldwork completion. Plans are now being drawn for the use of CfH's findings to inform the re-design and further expansion of the livelihoods program.







info@teamscope.co | https://teamscope.co

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