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Assessing the influence of fairness and participation in priority setting decisionmaking during planning and implementation of malaria services and ITN* intervention in Zambia

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*Insecticide Treated Nets (ITN)

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The project: REsponse to ACcountable priority-setting for Trust in health system (REACT). An EU FP6 funded research project by 4 European and 7 African institutions that assessed the application of the Accountability for Reasonableness (AFR) framework in Zambia, Tanzania and Kenya. This presentation is based on data from Zambia.

AFR theory - the conditions

Relevance. Decisions should be made on the basis of reasons which appeal to evidence, principles, and arguments that "fair-minded" people can agree are relevant under the circumstances.

Publicity Priority setting decisions and their rationales must be publicly accessible so as to stimulate public debate on priority setting.

Appeals and revisions There should be mechanism for challenge and dispute resolution regarding limit setting decisions, and more broadly, opportunities for revision and improvement of priorities in the light of new evidence or argument.

Enforcement and leadership There should be either voluntary or public regulation of the process to ensure that the above three conditions are met.

(Based on: Daniels and Sabin 2002)

Aims: This study assesses the degree to which AFR conditions applied to priority-setting are also reflected in decision-making during planning and implementation of malaria services and ITNs distribution.

Methods: A case study and action research design.
In-depth interviews and focus

group discussions addressed decision-makers, outpatients, adolescents and pregnant women

The data were analyzed in terms of the four AFR conditions using the following analytical framework.

Analytical considerations for fairness of decisions during planning and implementation

AFR aims for priority setting	AFR conditions (the means)	AFR practice	Fairness of decisions to implement set priorities.	Assessing outcome/impact of fair decisions
Fairness	Relevance	Inclusiveness of all concerned and their values	Democratic learning and practice, health insight exchange, increasing contextual alignment	Effectiveness Efficiency Equity Sustainability - And their relation to quality, trust and other values.
&	Publicity	Active dissemination/ transparency by providers		
Legitimacy	Appeals	Response from the involved and revisions		
	Enforcement	Joint organizational and public commitment to conditions		

Results: Explicit application of the AFR process was limited during planning and implementation. The appeals condition was associated with fear to demand revisions among some stakeholders, which also seemed caused by inadequate publicity and inadequately shared leadership. Poor adherence to AFR conditions during implementation of malaria services and ITNs distribution limited participation, adjustment to values and contexts and compromised their acceptability.

Conclusion: Application of AFR was found essential for ensuring effectiveness and efficiency during provision of malaria services and ITNs distribution. The AFR priority-setting concept should be further tested as guidance for health systems management processes all the way to actual service provision.