

HEALTH SYSTEMS & COMMUNITY RESILIENCE PILLAR

Performance and Effectiveness Evaluation of iCCM/iCCM+ Service Delivery in Gedo and Kismayo, Somalia

An independent IRID assessment of Trócaire Somalia's community case management programme, generating evidence to strengthen child health coverage, quality of care, and long-term sustainability.



IRID's evaluation team reviews CHW registers and routine iCCM data with community health staff in the Gedo region, Somalia.

Partner & Institutional Framework

This assignment is being implemented in partnership with **Trócaire Somalia**, working closely with the Federal and Jubaland **Ministry of Health**, district health authorities, and community health structures across the Gedo region and Kismayo district. The assessment draws on IRID's national team of community health specialists, researchers, and MEAL practitioners.

Background

Somalia's health system continues to face significant constraints from protracted conflict, limited financing, recurrent drought, and weak health-seeking behaviour, with **rural and nomadic communities — 65% of the population —** disproportionately underserved. The country's **maternal mortality ratio stands at 396 per 100,000 live births**, neonatal mortality at **44 per 1,000**, and an estimated **20.7% of children under five are stunted**, with **13.5% acutely malnourished**. A chronic shortage of health workers — roughly **3.4 essential health workers per 10,000 people**, below the WHO minimum of 4.5 — has limited facility-based access, particularly outside urban centres.

To close this gap, **Integrated Community Case Management (iCCM)** has been implemented in Somalia since 2017 as a cost-effective strategy that trains and equips community health workers (CHWs) to diagnose and treat malaria, pneumonia, and diarrhoea at community level, referring complicated cases onward. The expanded **iCCM+ model** adds nutrition screening, treatment, and referral through **Community Management of Acute Malnutrition (CMAM)**, extending the reach of life-saving care to children in the hardest-to-reach communities.

Project Overview

Trócaire Somalia currently delivers **iCCM/iCCM+ services across 59 sites in six districts —** Luuq, Dollow, Beledhawo, Elwak, Garbaharay, and Kismayo — supported by **10 fixed referral and link health facilities**, with **7 sites** providing the expanded iCCM+ nutrition component. IRID was commissioned to conduct an independent **Performance and Effectiveness Evaluation** of this programme, examining service utilisation, quality of care, referral effectiveness, nutrition integration, and routine data quality, and generating **practical, evidence-based recommendations** for programme strengthening, scale-up, and long-term sustainability.

Objectives

The assessment is structured around eight specific objectives:

- Assess **service utilisation trends and treatment coverage** at the community level.
- Evaluate the **quality of CHW service delivery**, including adherence to clinical protocols and referral practices.
- Examine the **effectiveness of referral pathways** between CHWs and health facilities.
- Assess **integration between iCCM and nutrition programming**, including CMAM linkages.
- Conduct a rapid **data quality assessment** of routine monitoring systems.
- Identify **implementation enablers, bottlenecks, and contextual constraints**.
- Capture **community perceptions, trust, satisfaction, and acceptability** of services.
- Generate **actionable recommendations** for programme improvement, scale-up, and sustainability.

Activities and Approach

IRID is applying a **mixed-methods evaluation design**, benchmarked against the **WHO/iCCM Global Benchmark Framework's** eight programmatic components, **OECD-DAC evaluation criteria**, and Somalia's national health strategies, to triangulate findings across the following workstreams:

Quantitative Data Collection

- **Routine data analysis** — twelve months of programme data on service utilisation, treatment coverage, and referral completion.
- **CHW survey** — knowledge, protocol adherence, and case management practice, cross-checked against registers and stock cards.
- **Health facility assessment** — referral systems, service readiness, and feedback mechanisms.
- **Household survey** — approximately 500 households (20 per site across 25 sites) on care-seeking behaviour and service uptake.



An IRID researcher conducts a digital household survey interview with a caregiver in the assessment area.

Qualitative Data Collection

- **Key informant interviews** with Ministry of Health officials, district health teams, supervisors, and programme staff.
- **Focus group discussions** with CHWs and caregivers across the assessment districts.
- **Direct observation** of CHW service delivery to assess quality of care and protocol adherence.
- **Human-interest case studies** documenting programme impact at community level.



A researcher records qualitative responses during a key informant interview with community elders.

Sampling Approach

The evaluation covers **all 6 implementation districts**, all **10 link facilities**, and all **7 iCCM+ sites**, with a stratified cluster sample of **25 of the 59 total iCCM sites** selected to ensure representation across districts, accessibility, and programme maturity.



An IRID researcher orients community stakeholders on the assessment process during a facility-level visit.

Key Outputs and Achievements

IRID's deliverables to Trócaire span the full arc of the assessment:

- Inception report, including refined methodology, sampling strategy, tools, and workplan.
- Cleaned quantitative dataset and analysed qualitative transcripts.
- Draft Performance and Effectiveness Evaluation Report.
- Final Evaluation Report incorporating stakeholder feedback.
- A 2–3 page Executive Summary Brief tailored for donor dissemination.
- Three to five human-interest case studies illustrating programme impact.
- Presentation of findings to the Trócaire programme team.

Expected Outcomes and Impact

- A robust evidence base on **coverage, quality of care, referral effectiveness, nutrition integration, and data system performance**.
- Practical, evidence-based recommendations to **strengthen service delivery, supervision, and sustainability**.
- A clearer understanding of **community trust, satisfaction, and acceptability** of iCCM/iCCM+ services.
- Stronger linkages between **community case management and the formal health system**, including nutrition referral pathways.

Over the longer term, the assessment is expected to contribute to **more resilient, better-integrated community health delivery** in Gedo and Kismayo — helping ensure that children in hard-to-reach communities continue to access timely, quality treatment for malaria, pneumonia, diarrhoea, and acute malnutrition, and that Trócaire and the Ministry of Health have the evidence needed to sustain and scale the programme.

Partners and Stakeholders

- **Trócaire Somalia** — commissioning partner and programme implementer.
- **Federal and Jubaland Ministry of Health** — district and regional health authorities.
- **Community health committees, CHWs, and supervisors** across the six implementation districts.
- **Caregivers and community members** of children under five in the target sites.
- **IRID assessment team** — community health specialists, researchers, and MEAL practitioners.

Geographic Coverage

The assessment spans **six districts of Jubaland State, Somalia**: Luuq, Dollow, Beledhawo, Elwak, and Garbaharay in the Gedo region, plus Kismayo district. Across these districts, Trócaire operates **59 iCCM/iCCM+ sites** linked to **10 referral health facilities**.

District	Total iCCM Sites	Sites in Assessment Sample	Link / Referral Facilities
Luuq	16	6	2
Garbaharay	7	2	1
Beledhawo	6	2	2
Dollow	11	5	2
Elwak	8	4	1
Kismayo	11	6	2
Total	59	25	10

Funding Information

This assessment is **commissioned and funded by Trócaire Somalia** as part of its ongoing investment in iCCM/iCCM+ programme quality and accountability.

Project Status and Timeline

The assignment commenced in **May 2026** and runs over a **four-week timeframe**. The inception phase is complete; the assessment is now moving into field data collection.

Week	Milestone	Status
1	Inception report, desk review, tool development & validation, enumerator recruitment and training	Complete
2	Data collection piloting and field rollout across districts	Underway
3	Continued field data collection across all sampled sites	Upcoming
4	Data analysis, draft reporting, final validated report, and presentation of findings	Upcoming

Our Gallery

Field photography from the assessment, captured across health posts, community settlements, and household interviews in the Gedo region.



Reviewing CHW registers, Gedo region



Field discussion with community health staff



Register review near a Gedo region health post



Community orientation at a health post



Digital household survey interview



Key informant interview with community health staff

PART 2

Image Selection & Enhancement Recommendations

1. Register Review (Branded) — Recommended Hero / Banner Image



Recommended use: Hero / banner image at the top of the page, and as the lead thumbnail in the project gallery.

- Already IRID-branded, well-exposed, and sharp — minimal correction needed.
- Lift shadow detail slightly under the seated man's hat brim for full facial visibility.
- When used as a wide banner, crop to a 16:9 ratio anchored on the register book (centre-right) so the IRID logo remains visible on both desktop and mobile widths.
- Apply a very light vignette or dark gradient at the top-left if overlaying the page title in white text on a hero banner.

Suggested caption: “IRID's evaluation team reviews CHW registers and routine iCCM data with community health staff in Gedo region, Somalia.”

Alt text: Three health programme staff seated cross-legged on a patterned mat under a tree, reviewing a community health worker register book; one wears an IRID-branded field vest, with the IRID logo displayed top-right.

2. Digital Household Interview — Featured Activity Image



Recommended use: Featured image illustrating the household survey / digital data collection workstream within “Activities and Approach.”

- Apply a slight warm white-balance correction; the corrugated-iron backdrop currently casts a cool, slightly grey tone.
- Crop in from the left to reduce dead space above the researcher's head and tighten the composition around both subjects.
- Increase sharpness modestly on the researcher's face and phone screen, the clearest focal point in the frame.
- Straighten the vertical lines of the metal sheeting in the background (currently a few degrees off-axis).
- Resolution is acceptable for web use at medium size; avoid enlarging beyond ~1000px wide without upscaling.

Suggested caption: “Digital data collection during a household survey interview with a caregiver in the assessment area.”

Alt text: A researcher in a light blue shirt uses a smartphone data-collection app while interviewing a seated woman in a purple hijab inside a corrugated-iron shelter.

3. Key Informant Interview with Elders — Featured Activity Image



Recommended use: Featured image illustrating qualitative data collection (KIs/FGDs) within “Activities and Approach.”

- Correct exposure: the bright woven-fence background is close to overexposed while the foreground researcher is underexposed — pull highlights down and lift shadows to balance.
- Reduce a slight green/yellow colour cast from light filtering through the fence.
- Crop tighter on the right two-thirds of the frame to centre the researcher and minimise empty fence backdrop on the left.
- Sharpen the notebook and pen in the researcher's hands, and the visible health commodities (ORS/medicine boxes) on the mat, since they support the caption's context.
- Light noise reduction recommended if enlarged, as the image was likely shot in low light at a higher ISO.

Suggested caption: “A researcher records qualitative responses during a key informant interview with community elders in Gedo region.”

Alt text: A field researcher in a grey IRID vest writes notes in a notebook while seated near two elderly men; community health commodities are visible on a patterned mat in the foreground.

4. Community Orientation at Health Post — Featured Activity Image



Recommended use: Supporting image for the facility assessment / community engagement narrative; suitable for the gallery or a secondary feature.

- Brighten the image substantially (+25–30%); the interior is significantly underexposed relative to the bright doorway.
- Correct white balance toward neutral — the corrugated walls currently impart a strong orange-red cast under mixed lighting.
- Apply mild noise reduction, since shadow detail will introduce grain once brightened.
- Crop out the loose items on the floor (bottles, jars) in the lower third to focus attention on the standing researcher and seated participants.
- Sharpen the standing figure, the clear midground subject and focal point of the composition.

Suggested caption: “An IRID researcher orients community stakeholders on the assessment process during a facility-level visit.”

Alt text: An IRID field researcher in a grey vest stands explaining documents to two seated men inside a corrugated-iron community structure with shelving and stored items visible.

5. Outdoor Field Discussion — Gallery Image



Recommended use: Secondary gallery image; supports the “Key Informant Interviews” or “Partners and Stakeholders” narrative.

- Brighten overall exposure (+10–15%); the overcast lighting leaves the scene slightly flat.
- Increase contrast modestly and add light saturation to the blue Trócaire uniforms for visual pop.
- Crop out visible litter and debris in the upper-left background to clean up the setting.
- Correct a slight cool/blue colour cast toward a neutral, warmer tone consistent with the other field images.
- Sharpen the three seated subjects, currently slightly soft due to the wide depth of field.

Suggested caption: “IRID and Trócaire field staff conduct a key informant discussion under a tree in the Gedo region.”

Alt text: An IRID researcher and two Trócaire community health workers in blue headscarves sit on a woven mat under a tree for a field interview in a rural Gedo setting.

6. Register Review (Wide Angle) — Gallery Image



Recommended use: Alternative gallery angle of the same register-review activity shown in the hero image; useful for visual variety in the photo grid.

- Brighten exposure (+10–15%) and lift shadows slightly under the tree canopy.

- Crop out the white plastic chair and background debris on the right edge to reduce visual clutter.
- Correct mild barrel distortion / tilt from the wide-angle phone lens, particularly along the tree line.
- Boost colour vibrance on the woven mat pattern, a strong visual anchor in the frame.
- Sharpen the three seated subjects and the open binder, the focal point of the activity.

Suggested caption: “Reviewing community health worker registers on-site near a settlement in the Gedo region.”

Alt text: Three field staff seated on a woven mat near a displacement settlement, cross-checking a CHW register book and supporting documents.

SEO & Web Publishing Package

SEO Title	Evaluating iCCM/iCCM+ Child Health Services in Gedo & Kismayo, Somalia IRID
Meta Description	IRID is evaluating Trócaire's iCCM/iCCM+ programme across Gedo and Kismayo, Somalia, assessing coverage, quality of care, and referral systems for child health.
URL Slug	/iccm-performance-evaluation-gedo-kismayo-somalia/
Keywords / Tags	iCCM, iCCM+, Integrated Community Case Management, Community Health Workers, Child Health Somalia, Gedo Region, Kismayo, Trócaire, CMAM, Nutrition Integration, Health Systems Strengthening, MEAL, Somalia Health Evaluation

Meta description character count: 160 characters (within the 150–160 target range).

Homepage Teaser

Across Gedo and Kismayo, community health workers are often the first — and only — point of care when a child falls sick. IRID is conducting an independent evaluation of Trócaire's iCCM/iCCM+ programme, examining service quality, referral pathways, and nutrition integration to strengthen community-based child health delivery. The findings will help Trócaire and Somalia's Ministry of Health sustain and scale life-saving care in the country's hardest-to-reach communities.

Word count: 67 words (within the 50–75 word target range).

Information Needed Before Publication

The following items should be confirmed with the project team before this page goes live:

- **Donor / co-funder confirmation.** The inception report identifies Trócaire Somalia as the commissioning partner, but several field photos show an EU emblem on staff uniforms. Please confirm whether the programme is EU co-funded so donor visibility and crediting requirements are met accurately.
- **Confirmed project status and dates.** The inception report only specifies a four-week timeframe starting May 2026. Please confirm the actual data collection completion date and expected final report delivery date for an accurate “status” statement.
- **Photo consent and safeguarding clearance.** Several images show identifiable community members, including women and elders. Please confirm that informed consent for photography and public web use has been obtained, consistent with child safeguarding and data protection commitments described in the report.
- **Higher-resolution source images.** The supplied field photos are WhatsApp-compressed (765–1280px on the long edge). Original camera files would allow sharper, higher-quality rendering at hero/banner size.

- **District name spelling consistency.** The report uses variant spellings (e.g., Beledhawo/Belethawo, Elwak/Ceelwaaq). Please confirm IRID's preferred standard spellings for consistency with other web content.
- **Outcome and findings update.** This page currently describes the assessment as in progress, based on the inception report. Once data collection and analysis are complete, the Key Outputs and Expected Outcomes sections should be revisited and updated with validated findings.
- **Standard IRID contact details.** For consistency with other project pages, confirm whether this page should carry the standard IRID footer (Mogadishu/Hargeisa addresses, email, phone) used elsewhere on the site.