

Supplement 3. Methods for developing the case study

The development of this case study followed the standard methodological approach outlined in a case study methods guide.[1] The process included five stages: 1) document review; 2) working group meetings; 3) key informant interviews; 4) a multistakeholder review and 5) Technical expert meeting. A semi-structured questionnaire in the case study methods guide provided the structure for collecting, organizing, and analysing the data, conducted between May and July 2018.

1) Document review: A review of relevant programme reports, evaluations, and other peer-reviewed and grey literature was undertaken in May 2018, identifying relevant information, as per the semi-structured questionnaire in the case study the methods guide.

2) Working group meetings: A national consultant was engaged in Sierra Leone to conduct two country working group meetings in May and June 2018 with stakeholders who had been involved with PtPT. The purpose of the meetings was to fill in data gaps following the document review and to gain additional insights into what worked and lessons learned from the multisectoral collaboration. The semi-structured questionnaire in the case study methods guide was adapted for this purpose. Various stakeholders participated in the working group meetings, including Pikin to Pikin staff and district representatives from the Ministries of Education and Health from Kailahun and Freetown.

3) Interviews with key informants: a former member of Pikin-to-Pikin staff, still based in Kailahun, interviewed ten stakeholders (e.g. religious and community leaders, town chief, health facility manager, head teachers and parents) involved in PtPT. As with the working group meetings, the purpose of the key informant interviews was to fill in any remaining data gaps and to gain additional perspectives on what made the collaboration across sectors successful, as well as key lessons learned. Key informant interviews were also conducted over the phone with the international radio producer and the Child to Child Programme Manager for the PtPT project.

4) Multistakeholder meeting: In June 2018, a multistakeholder meeting was held at the offices of the World Health Organization in Freetown, Sierra Leone. A range of stakeholders participated from Kailahun and Freetown. Child to Child representatives from the UK also participated in the meeting. The multistakeholder review drew on both the methods used in the first Success Factors study series[2] and the PMNCH guide for multistakeholder dialogues.[3] The information collected during stages 1 to 3 was discussed in the meeting, and the multistakeholder review was used to ensure that

the case study was evidence-based, triangulated diverse information and perspectives, and represented a collaborative exercise.

5) Technical expert meeting: A group of technical experts, involved in the higher-level redesign of the project from Getting Ready for School to PtPT, met in London in July 2018. This included Child to Child international consultants who had engaged in PtPT as well as the Comic Relief grant manager for PtPT. The purpose of this meeting was to get further insights from those who were closely.

Limitations

Stakeholder input was limited to those available and willing to participate, an issue that was amplified because the project had ended. Many of those involved, from Pikin to Pikin, Child to Child, and government representatives were no longer in the same positions and unable to participate in the process in Sierra Leone. To try to address this, discussions were also held by phone where possible with key informants who had been previously involved with PtPT, including with the international radio manager and Child to Child programme manager.

References

1. PMNCH. Methods guide for country case studies on successful collaboration across sectors for health and sustainable development. 2018.

<http://www.who.int/pmnch/knowledge/case-study-methods-guide.pdf>

2. Frost L, Hinton R, Pratt BA, et al. Using multistakeholder dialogues to assess policies, programmes and progress for women's, children's and adolescents' health. *Bull World Health Organ* 2016;94(5):393-5. doi: 10.2471/BLT.16.171710 [published Online First: 2016/05/06]

³. PMNCH and WHO. Multistakeholder dialogues for women's and children's health: a guide for conveners and facilitators. 2014. http://www.who.int/pmnch/knowledge/publications/msd_guide.pdf