An increasing number of countries, even more specifically in sub-Saharan Africa, follow results-based financing (RBF) reforms to develop healthcare services’ quality and quantity. However, only few RBF reforms successfully manage to go through the different scale-up phases, towards a full expansion to the entire system.

In Burkina Faso, a pilot project has been implemented in 15 districts as a first step towards a national reform. A scaled-up RBF program is however still at embryonal stage after years of implementation.

The objective of this study is to better understand this project’s scale-up potential by using the WHO’s theoretical framework. This case study provides with a clear empirical example that can be helpful to strengthen the conception of scale-up, in regards to RBF programs more precisely. In-depth interviews (n=37) were carried out in 3 different health centres and in Ouagadougou with healthcare providers, implementers, decision-makers and external experts to discuss the intervention, the host organisation, the scale-up team, the planned/used strategies and their context.

Our study finds that the potential of a RBF scale-up is low, if the project would remain unchanged. The low involvement of some key stakeholders (mainly decision-makers) as well as the unstable context did hinder the prioritisation of the project. Not being a priority, RBF reform lost its momentum to the benefit of a user fee exemption program. A scale-up is however still in discussion, but would consist in being part of the above-mentioned program.

The low involvement of key stakeholders (decision-makers) from the beginning affected the project’s ownership, therefore its prioritisation on the political agenda. Perceptions about the project also played an important role: namely that RBF could only increase service quality (and not access, like user fee exemptions) or that it would cost too much to scale-up.

Solutions to better ensure such transition from pilot to scaled-up intervention would therefore be to include a greater variety of actors within the project’s development, implementation and evaluation phases. New practices, such as network analysis or context evaluations, should be put forward to provide adaptation or mitigation mechanisms linked to lived or perceived problems.