

DEMAND-DRIVEN EVALUATIONS FOR DECISIONS (3DE)

EVALUATION PROCESS AND LESSONS LEARNED MANUAL



3DE is a pioneering approach to support ministries in the health sector with evidence-based decision-making by using rigorous impact evaluations in a demand-driven, rapid, and efficient way. This manual aims to describe key lessons learned from the 3DE pilot program in supporting demand-driven evaluations, including sourcing evaluation questions, maintaining policy relevance in implementation, and using results to inform policy change.



THE CHALLENGE

A lack of evidence to inform health policy decisions often leads to the suboptimal use of resources and preventable morbidity and mortality. Using evidence to inform policy and practice is not a new idea, but despite literature and recommendations on this topic, the gap between research and practical decision-making persists. This is particularly true in developing countries where resource limitations are likely to impact the ability of decision-makers to access and use evidence or conduct new research where required.

In order to effectively inform policy, research must be shaped by the priorities, timelines, and practical considerations of the policy context. In other words, evidence-based decision-making may require policy-based research development.

KEY PROGRAM ACHIEVEMENTS

The 3DE pilot has generated evidence that has informed policy decisions on scale-up of the following interventions:

- Non-cash incentives can increase facility deliveries by 42 percent. Scaling up incentives in rural Zambia is expected to avert 308 maternal and neonatal deaths per year, which translates to a cost-effectiveness of US\$5,303 per life saved.
- Distributing insecticide-treated bednets (ITNs) using a community fixed-point compared to a door-to-door strategy can reduce distribution time by 35 percent and save nearly US\$1 million in costs for the 2014 distribution alone.
- Assuring commodity supplies for infant HIV testing and integrating testing services with immunizations nationally could result in an estimated 80,000-275,000 additional maternal HIV tests each year with no negative impact on infant immunization.
- Instituting a Family Clinic Day for pediatric and adolescents in antiretroviral therapy (ART) in Uganda could improve the odds of adherence to appointment schedule by 64 percent, though no impact was observed on patient retention.
- Using quality improvement officers to conduct stock and process checklists in Zambian ART clinics can increase the proportion of patients getting 3-month refills by 15 percent and reduce the number of patient visits by 35 per day, saving 9.6 hours of health worker time per day to be used to improve quality of care.

3DE APPROACH

With funding from the UK Department for International Development (DFID), CHAI launched the 3DE program in 2012 in Zambia and Uganda. 3DE aims to generate reliable impact evidence that meets the ministries' needs and is used to catalyze implementation of cost-effective health interventions. 3DE integrates the three following steps:

1. Identify evidence needed to inform policy decisions

3DE questions need to address high-priority policy issues and be answerable using rigorous methods on an accelerated timeline, providing evidence in months rather than years.

2. Conduct rigorous and rapid impact evaluations

To answer a 3DE question, an impact evaluation must be designed and conducted according to a statistically sound protocol while bearing in mind the ministries' needs, timelines, implementation capacity, and cost.

3. Use evaluation results to catalyze program and policy action

3DE works closely with ministries to appropriately apply evaluation evidence to policy decisions and to provide analytical assistance to support action. This could mean outlining an operational plan for a proposed intervention, determining the policy levers required to move forward, or analyzing the costs of national scale-up.



1. IDENTIFYING EVIDENCE NEEDED TO INFORM POLICY DECISIONS

Identifying and refining an appropriate evaluation question is the foundation of a successful 3DE. 3DE study questions aim to address ministries' high priority questions that will influence decisions and drive transformational change. In order to be impactful, a 3DE question must be answerable using rigorous evaluation methods on an accelerated timeline, and must result in answers that are useful and actionable in the hands of ministry staff.

ELICITING STRONG IMPACT EVALUATION QUESTIONS

Appropriate impact evaluation questions are identified through several steps, which are described below.

✓ Develop a short list of key evaluation questions from ministry staff	Building on pre-existing relationships, continuously engage ministry staff to identify the most important questions, challenges, and decisions that policymakers face. As necessary, conduct meetings and workshops to introduce the program goals to ministry staff and partners to encourage engagement at an early stage. Ministry decision-makers should guide the prioritization process, highlighting questions that are most important to future policy decision-making.
✓ Review literature and consult with experts to assess existing evidence	Using the list of key questions, conduct a systematic review or meta-analysis of existing published evidence and consult technical and subject-area experts. The systematic literature review (including meta-analyses where appropriate) and engagement with relevant experts is employed to determine whether there is a gap in relevant evidence that is preventing decision-making or whether providing a summary of the existing evidence base is adequate for ministry staff to progress a policy decision.
✓ Decide if a topic should move forward as a 3DE evaluation	The appropriateness of a question depends on the question's evaluation requirements and the ministries' managerial constraints. If a given question meets the conditions outlined below, then a 3DE evaluation should be conducted. Organize all of the questions sourced into a sourcing matrix, and then score each question based on program goals. The key dimensions of a question that is appropriate for a 3DE evaluation are included below.

INVESTING TIME IN BUILDING RELATIONSHIPS

3DE depends on strong relationships with government stakeholders. To establish the foundation for positive relationships, careful planning and execution is required in presenting the program goals.

Engaging senior government leadership to explain the program is often the best place to start. After receiving direction and approval from this level, information dissemination should continue down government hierarchies to relevant programmatic units.

Relationships should be built not only with government but with other types of stakeholders, including donors, implementers, and healthcare providers. Holding a stakeholders meeting early in the process can help to establish connections and create opportunities for collaboration.

BEST PRACTICES FOR IDENTIFYING EVALUATION QUESTIONS

Systematically assess potential questions. Each question should be assessed based on the primary objectives of the program. 3DE considers the following characteristics in order to identify appropriate research questions:

- *Demand:* The ministry has identified a gap in knowledge and requested evaluation
- *Clarity:* The question to be evaluated is well-defined
- *Time:* A rigorous evaluation can be conducted before a program decision is required
- *Impact:* The intervention has the potential to create large enough impact to justify the cost of an evaluation
- *Scale:* The intervention is appropriate for national scale up
- *Implementation:* Implementation capacity exists as needed by the evaluation design

Allow sufficient time for collaborative question sourcing. This step takes time and is rarely straightforward. Allow time for consultations and consideration, but also be prepared to move on from questions that are not a good fit.

Ensure a common understanding of research terms. Many stakeholders have preconceived notions of words like "impact" or "evaluation" that are not necessarily aligned with the goals of the 3DE model. Focusing on the role of impact evaluations in informing the future (rather than evaluations that focus on the past) and using terms such as "impact studies" can help helpful in introducing the model.

Invest in relationship-building to achieve long-term benefits. These efforts are time-consuming but are likely to pay off in the long run in terms of richer collaboration at all stages and increased capacity to articulate evidence needs. The first couple of evaluation questions will require the most effort to identify.

2. CONDUCTING RIGOROUS AND RAPID IMPACT EVALUATIONS

Once a question has been identified, the next step is to design a statistically sound evaluation protocol that accounts for policy needs and contextual factors. 3DE evaluations should be designed according to the ethical and quality standards of other research, but the ongoing collaboration with government partners throughout 3DE evaluations make them unique. This type of engagement is critical for balancing technical and practical requirements and maintaining awareness about any changes to the policy landscape that may influence the relevance of the evaluation findings. Additional best practices and information about presenting evaluation findings to government partners are included below.

USING APPROACHES TO MINIMIZE TIME AND COST WHILE MAINTAINING RIGOR

If the research timeline is not coordinated with the policy decision timeline, evidence may fail to be fully used; and if evaluations are too costly relative to the potential impact or cost savings, the overall benefit of an evaluation may be low. For these reasons, it is important to explore strategies to create efficiencies in terms of time and cost in conducting an evaluation. Potential approaches might include:

- Using proximal outcomes if more distal outcomes are difficult to measure and other research has already shown the link between the proximal and distal outcomes
- Asking the Ministry of Health to define the smallest benefit of an intervention that would be needed to trigger policy change
- Designing the evaluation to detect policy-relevant effects, rather than only focusing on statistical significance
- Conducting interim analysis (according to a pre-established analysis plan) and stopping the evaluation if statistically significant results are detected
- Streamlining data collection with technology
- Using existing data sources and data collection forms

CASE STUDY: Evaluating the Impact of a Family Clinic Day on Pediatric Retention in HIV Treatment

In order to improve retention rates for pediatric and adolescent antiretroviral therapy (ART), the Ministry of Health (MOH) of Uganda requested a 3DE evaluation of an intervention called Family Clinic Day (FCD), when families are seen for ART visits on the same day and receive family-centered clinical and psychosocial support. The evaluation has been designed in collaboration with MOH stakeholders and with the goal of being able to provide evidence that will influence policy decisions:

- **Developing strong intervention tools for scale-up:** The development of staff training manuals and health education tools was driven by the MOH. Content was based on recommendations from patient focus groups and expert consultations, and then a communications specialist was contracted to develop and pilot tools.
- **Utilizing MOH training protocols:** The FCD was rolled out using the standard MOH mechanisms for training staff on new interventions to ensure that if the intervention is found to be effective, scale-up will be feasible.
- **Building on and supporting local systems:** The initial phase of the evaluation uncovered challenges with data quality at the facility level. Rather than collecting separate data for purposes of the evaluation alone, 3DE worked with the MOH to train M&E officers to conduct capacity-building and data mentorship visits.
- **Engaging local and national stakeholders in the process:** Prior to study launch, sensitization meetings were held in the three study regions. Facility in-charges and District Health Officers were able to provide input, feedback and sign off on their approval for the study being conducted. National MOH collaborators weigh in on all key decisions around study implementation and data collection.
- **Providing rigorous results on a policy-relevant timeline:** Planning for this evaluation began in July 2014 and results were delivered in July 2015.

BEST PRACTICES FOR CONDUCTING EVALUATIONS

Mobilize ministry resources and activities to support the implementation of the intervention being tested. This will reduce costs and operational disruption, maintain program relevance, utilize local knowledge and experience, and build in-county experience and capacity. However, this approach must not risk the design and data quality of the evaluation.

Engage facility-based and local stakeholders in the evaluation process. When working in facilities, it is critical that local staff such as facility in-charges and district medical officers are fully aware of the evaluation, their roles in conducting the study and the potential benefits of increased evidence. Regional sensitization meetings can ensure all relevant stakeholders are aware of the study and have an opportunity to provide input or voice concerns at the outset.

Maintain high-level government engagement with regular communication and contact. The same staff that helped to source the questions should be updated on evaluation progress. This can be achieved through an initial kick-off meeting, regular update emails, and field visits. Throughout the evaluation, policy makers should be involved in decisions about implementation and evidence needs.

Create tools with consideration of the potential for intervention scale-up. If an intervention is shown to be effective, the evaluation tools and lessons learned can be useful in facilitating scale-up. During an evaluation, implementers can work to prepare an intervention package including training materials, standard operating procedures and other guides.

3. TRANSFERRING EVIDENCE INTO POLICY CHANGE

The 3DE team works with governments to catalyze decisions made on the basis of the evidence from the impact evaluations, and provides management and analytical assistance to support action based on the decision taken. This process can take a variety of shapes, including outlining an operational plan for a proposed intervention, determining the policy levers required to move forward, and analyzing the costs of national scale-up where appropriate.

DEVELOPING AND EXECUTING POLICY INFLUENCING TOOLS

The tools that are provided to ministries to facilitate the use of evaluation findings into policy are dependent on each situation. On some occasions, an operational plan and cost of scale-up is documented in collaboration with the ministry. Other evaluations may not result in a clear intervention that can be scaled up, but nonetheless produce recommendations around changes that can be outlined in a presentation or action plan.

FOSTERING RELATIONSHIPS WITH POLICY CHAMPIONS AND ALLIES

Other programs and research have indicated that identifying a policy champion to advocate for policy change is a key element in facilitating action.^{6,7} Our experience also shows that it is the policy champion and the early buy-in of all key stakeholders at the outset that sets the scene for a smooth transition of evidence into policy decision-making.

PRESENTING FINDINGS AND SHARING DATA

The relevance of the results, the quality of their presentation to government stakeholders, and government ownership of or engagement with results and data are critical factors in the degree to which evaluation findings will be translated into policy. Taking this into account, 3DE works in several different ways to make evaluation results accessible for partners:

✓ Provide results to government stakeholders as soon as possible

Government stakeholders should have access to results as soon as data is complete and the analysis has been verified to ensure that recommendations are accurate. Consider the most appropriate paths for beginning to share findings in order to allow a smooth path for the uptake of policy recommendations and foster good relationships for future research.

✓ Address policy questions when presenting results

3DE conducts evaluations that produce results based on the operational context and challenges of a particular country. Additionally, modeling and analysis can be useful in addressing the cost and feasibility concerns related to scale-up. Such exercises should be based on assumptions and costs derived from that country context.

✓ Assure ministry ownership of results for dissemination

3DE encourages government partners to take ownership of when, where, and how results are presented to implementing partners and the public. Widespread dissemination of results is encouraged, but government engagement in the process and authorship of publications often creates the best foundation for the use of findings in the policy context.

BEST PRACTICES FOR CATALYZING POLICY CHANGE

Prior to the dissemination of findings, ensure that policymakers and stakeholders with the most concerns are included in the dissemination of the study's findings.

Work with the ministry to map out the path to policy change or program implementation. For 3DE, this often took the form of an operational plan to guide the process of the intervention in place at a larger scale and to estimate the costs and/or cost-effectiveness of implementation.

Successful catalyzation relies on the ownership of the evaluation by the ministry and engagement of key stakeholders and decision makers. Should the evaluation findings cover recommendations that are the realm of a stakeholder outside of those you initially consulted, spend the time on building that relationship, explaining the findings and talking through recommended next steps.