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Family Planning Country Action Process Evaluation

Evaluation approach & methodology

FP CAPE evaluation purpose & goals

The purpose of FP CAPE is to generate evidence on <u>how</u> and <u>why</u> each portfolio of investments is, or is not driving change in key reproductive health outcomes across the Democratic Republic of the Congo (DRC) and Nigeria.



Inform investment strategy

 Generate evidence to develop the Foundation's family planning portfolio of investment strategies in Nigeria and DRC



Learn across the portfolio

 Improve cross-grantee coordination and learning to maximize the efficiency and effectiveness of program activities across the portfolios



 Enhance grantee and government partner coordination and engagement



Advance global knowledge

 Further understand how programs improve access, quality, and utilization of family planning services as well as how to conduct process evaluations of complex interventions

FP CAPE evaluation design features

The project takes a realist, theory-based approach to evaluate complex portfolios of BMGF family planning investments to improve modern contraceptive use in the DRC and Nigeria.

Portfolio Theory of Change

Developed in close collaboration with BMGF Program Officers and grantees in DRC and Nigeria.

A clear **theory of change** identifies critical assumptions on drivers of family planning use. These assumptions are then tested.

Context & interaction

A **portfolio-level evaluation** independently assesses family planning investments in DRC and Nigeria.

By observing how multiple activities work together, rather than focusing on individual grants, FP CAPE detects **interactions and synergies** between programs.

Prospective & iterative

A **prospective design** documents change, issues, and learning concurrently with implementation. This allows FP CAPE to test critical assumptions in real time.

Realist, theory-based models define and test theoretical assumptions, use realist evaluation techniques, to adapt portfolio theories of change (TOC) in

response to FP CAPE findings in an

iterative manner.

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Realist process evaluation approach

Are expected changes happening?

How did change happen?

Sentinel indicators

Are successful intervention models scaled up?

Monitoring via sentinel indicators & FP bottom-up findings CAPE

Special Study 2

Bottom-up inquiry Special Study 1

Analysis & synthesis of collected data

Special analyses

Are there emergent factors that affect program implementation and success?

FP CAPE evaluation methods

FP CAPE uses quantitative, qualitative and mixed-methods to consider the complexity inherent in evaluating diverse program activities across different socio-political contexts.



Sentinel indicators



- Select indicators are used to monitor whether expected changes are happening across the portfolio. Sentinel indicators
 use primarily, but not exclusively, quantitative data.
- Sentinel indicators are updated every 6 months, depending on the indicator and availability of new data.
- Changes are tracked across the portfolio over time.

Bottom-up inquiry process



Special studies and analyses

To delve deeper into key questions raised by bottom-up inquiry and monitoring of sentinel indicators, FP CAPE has built in flexible special studies & special analyses



Social network study

 Individual and organizational level data collection and analysis looking at social networks and coordination, collaboration and resource sharing. Also examining influence and power.



Qualitative study on the enabling environment

 Uses qualitative methods to better understand how government capacity building activities are working from the beneficiary perspective. Other themes explored include data use and decision-making



Special study on scale-up

- Mixed methods analysis of simulated counter-factual to scale-up geographic areas
- Understanding how and why scale-up happened



Special quantitative analyses

- Effect of program exposure on mCPR
- Exploring different types of user profiles



Theory of change and illustrative findings

Nigeria

Theory of change: BMGF Nigeria investment portfolio

FP CAPE's research questions are based on a theory of change that defines and monitors causal linkages, starting with portfolio investments and moving to increased national mCPR.



nationally

Theory of change: Critical assumptions



Improved enabling environment



Effective service delivery and demand generation models



Scale-up of successful models



Increased national mCPR

01	Advocacy outcome contributes to increases in domestic funding for FP as well as visibility of FP
02	Advocacy efforts lead to the operationalization of Task- Shifting & Task-Sharing policy
03	Targeted support to FMOH/SMOH strengthen donor coordination and CIPs
04	Strong measurement drives performance

01	Demand generation models result in large scale social norm change	
02	Service delivery models increase quality and access to services	
03	Introduction of new methods generate new demand for services, especially among youth	
04	The Task Shifting/Sharing Policy is operationalized and increases access to FP (implant, IUD, Injectables, SP)	

01	Contributing to national conversation on FP enables successful adoption of models
02	Strong CIPs and donor coordination support model scale-up
03	High quality data influences scale-up decisions
04	Demonstration models seen as relevant and feasible models by other states
05	Model programs remain effective when scaled up by others in new contexts
06	Matching funds and TA will incentivize scale-up of effective demonstration models.

Summary dashboard: Enabling environment

While Nigeria has a generally positive enabling environment with leadership support, data awareness, and progress on CIPs, impact on decision making and outcomes is still unclear.

Stakeholder support

Positive support of FMOH & SMOH leadership and FP stakeholders/donors toward the national FP agenda.



While data "awareness" seems high, how data is used for decisionmaking is still unknown.

Existence of quality control mechanism for service statistics

Extent to which government program managers use research and evaluation findings to improve program

% agreement, Nigeria and E-SSA





Lados

Sokoto

Zamfara

However, there is a lack of information on the outcomes, implementation, and uses of CIPs.

0.036%

FP as a % of overall national health budget

\$20,000-328,000

Range of 2017 state FP allocation

CIP progress

(BMGF deep investment state)

CIPs scaled by other donors

CIPs completed

CIPs completed

CIPs started

in 2016

print media mentions of FP

Bauch

Plateau

Taraba

Nasarawa



Summary dashboard: Demand generation

Those who use FP have high levels of FP-related self-efficacy, but the majority of women are not users. Exposure to FP messages is dropping, although many hear through their community.



of women were exposed to radio FP messages in Lagos/Kaduna

about $\frac{1}{4}$

of women heard religious figures speak about FP

35%

of women were exposed to TV FP messages in Kaduna

Special analysis: Current status of cross-grantee coordination

Nat'l/state level development
 Model testing & learning
 Replication & Scale-up
 Non-BMGF partners
 Advocacy & capacity building
 Replication & Scale-up
 Demand generation
 Non-BMGF partners

Other partners include the USAID, UNFPA, WHO, the World Bank, UN Population Division, DFID, FP2020, Society for Family Health, FHI360, Save the Children, Marie Stope International, the Children's Investment Fund Foundation (CIFF), Pfizer Inc., pharmacy community in Nigeria, Chevron Nigeria, Sapetro, Danjuma Foundation, Well Being Foundation of Africa, other non-BMGF partners, and local advocacy collaborating groups





Lessons learned

So far.....

Reflections on methodology





 Heavy input on the initial TOC resulted in high level of appropriation and use of results



- Takes time
- Less technical "precision" in the TOC and critical assumptions.

Evaluating a large number of investments



- Reflective of system reality
- Portfolio level is new

Cons

- So many moving pieces!
- ► Level a challenge
- Rely on a lot of internal systems to detect key changes/events

Interdisciplinary/ novel methods



- Interesting putting pieces together
- Technical exchange and learning within the team

Cons

- Higher risk donor needs to accept that
- Different language across disciplines
- Risk of confirmation bias with some methods

Prospective & Iterative



 Dynamic and adaptive – lots of opportunity for creativity



- No "FINAL" answer "what we know now"
- Requires continuous strategic assessment and prioritization

Reflections on partnerships & communication



 Time needed to manage team and think through communication of lots of information Requires knowledge of partners and the dynamics of their relationships

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Need to balance a lower

risk set of data sources

with higher risk ones to

ensure content



Discussion

Over to you.....

Suggested discussion topics





Experience implementing complexity aware evaluations

- What experience do you have implementing complexity aware evaluations and/or theorybased evaluations?
- What challenges have you faced and what has worked for you in handling them?
- How have you handled issues such as boundaries and evolving interventions?
- How might these types of evaluations be useful to other funders?

Experience with specific methods in complexity aware evaluations

- What specific methods have been most useful to you in complexity aware evaluations?
- What is your experience integrating systems methods into evaluations?

Experience producing and communicating results in real time

- How have you balanced time for analysis with pressure for rapid results?
- What do you see as risks and benefits of providing results in real time?
- What communication strategies have you found to be effective/ineffective?