Evidence Summit on Enhancing Child Survival and Development in Lower- and Middle-Income Countries by Achieving Population-Level Behavior Change: The Evidence Review Process

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Three Goals

1. Place today’s Evidence Summit in the context of the overall goal for evidence to inform sustainable, efficient, effective country-owned health programs.
2. Describe the evidence review process so far.
3. Set the stage for remainder of the Evidence Summit sessions which are intended to identify missing evidence and to inform recommendations on practices, policies, and research.

Why have evidence summits?

- Integral to USAID’s reform efforts under the Global Health initiative (GHI) is a renewed emphasis on the application of research and evaluation to inform strategic thinking about development.
  - “Do more of what works”
- Evidence summits are intended to inform development practice, policies, and strategies to enable low- and middle-income countries (LMICs), US government agencies, and others involved in foreign policy and assistance to achieve sustainable health outcomes at the population level.

Whom is this Evidence Summit Informing?

1. LMIC governments and agencies working in those countries with evidence-based recommendations for country-owned, sustainable options for population-level behavior interventions for child survival and development.
2. The USG with recommendations for practice, policies, and research priorities.
Three Evidence Summits So Far

- Protecting Children Outside of Family Care (December 2011)
- Enhancing Provision and Use of Maternal Health Services Through Financial Incentives (April 2012)
- Community and Formal Health System Support for Enhanced Community Health Worker Performance (May 2012)

An evidence summit is really a process—

The Post-Summit Process

- We want to change things!!!
- Develop an Evidence to Action Strategy
  - This might include:
    - Revised country plans
    - Multi-year consortium going forward
    - Broad international dissemination
- Journal publications
  - Special issue
  - Series

Final products of summit
Core components of the Evidence Review Process

- Core Group developed Concept Paper and focal questions
- Evidence Review Teams were formed for each Focal Question to review the evidence, bringing in expert knowledge and experience
- Systematic literature search and call for evidence from experts
- Held presummit at UNICEF in February
- ERTs utilized an evidence framework to make conclusions and recommendations

Focal Questions: What are the evidence-based interventions to achieve population-level behavior change for:

1. Interventions targeting families
2. Interventions targeting communities
3. Interventions targeting service providers, health systems or policy
4. Gender issues
5. Stigma and discrimination
6. New technologies/science/innovation

Evidence Gathering

- Search was designed to find key scientific journal publications that provided evidence that could be used to answer focal questions
  - Based on work done in low- and middle-income countries
- Call for Evidence was designed to bring in publications that were not found in the search as well as other kinds of documents, such as agency reports, other sets of recommendations, etc.
  - Included so-called grey literature
**Databases Searched**
- SCOPUS, Science Direct, Pubmed, JSTOR, Africa-Wide, CINAHL, CAB, Business Elite, Global Health, Cochrane

**Search Phrase**
- Social/Behavior change term + Maternal/Child term + Health term incl. Child 'Thrival' + "Intervention" + Low/Middle Income Countries

**Limits**
- English (except Scopus)
- 1/1/1990 – present
- Peer-reviewed journal

**Screening and assessment**
- Most documents were subjected to up to three screenings to identify those most relevant to the focal questions
- Many of the key studies were also subjected to quality reviews based on widely used criteria for assessing scientific quality.
- Ultimately, the ERTs chose which documents on which to base their reviews, including some that did not come in through the search or call for evidence processes.

**Inclusion Criteria**
- Intervention
  - AND
- Outcome (child health/development, behaviors (child/caregiver/health provider/community-level, etc.)

**Exclusion Criteria**
- Knowledge/Attitude outcomes without reporting health, behavior development outcomes

**Inclusion/Exclusion**
- Apply Screen 1 to full text docs

**Categorization**
- Tier (outcome type)
- Health Area
- ERT
Core components of the Evidence Review Process

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- Systematic literature search and call for evidence from experts
- Held presummit at UNICEF in February
- ERTs conducted evidence review related to their focal question

Evidence Review Teams were asked to:

- Review the evidence
- Make draft recommendations for practice, strategies, and policies
- Identify knowledge gaps to inform the research agenda

Core components of an Evidence Review Process

- Core Group developed Concept Paper and focal questions
- Evidence Review Teams were formed for each Focal Question to review the evidence, bringing in expert knowledge and experience
- Systematic literature search and call for evidence from experts
- Held presummit at UNICEF in February
- ERTs conducted an evidence review related to their focal question
- Quality assessment
- Bringing in expert knowledge and experience
- Utilize an evidence framework to make recommendations

Recommendations Discussed Today (Evidence Summit)
Approaching the Evidence: Development challenges (like enhancing population-level behavior change) are complex

- Informed by multidisciplinary expert analysis of evidence & advice.
- Evidence is likewise complex—What works in a specific context or for an individual (efficacy)? What works in a variety of contexts, populations, and countries (effectiveness)? What is affordable, feasible, scalable, and culturally appropriate (sustainability)?

You will hear two presentations from each of the Evidence Review Teams:

- An overview of the evidence used in drafting the evidence synthesis papers that were sent to you prior to the summit
- Draft recommendations
  - Policy and Practice
  - Research agenda

Note that the presentations at the Summit are provisional because we want to incorporate feedback from the Summit into the final products. Some conclusions and recommendations may change considerably.

About the Presentations:

- Each of the ERT presentations is the work of teams of about 20 experts.
- Many of these experts come from donor organizations or are the recipients of grants and contracts for work in global health.
- The views expressed in these presentations do not necessarily reflect the views of the agencies and organizations that employ the authors or of any of the sponsors of the Evidence Summit.
- Real and apparent conflicts of interest will be fully described in the final publications resulting from the Evidence Summit.

ERTs are seeking your help

- Identify evidence that may be missing from the Evidence Review
- Modify and/or prioritize draft recommendations
- Colored cards are provided for this purpose
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<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>15</td>
<td>Presentation 1: Evidence Synthesis</td>
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<tr>
<td>10</td>
<td>Q&amp;A</td>
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<tr>
<td>5</td>
<td>Write individual recommendations on: <strong>Green Cards</strong></td>
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<tr>
<td>15</td>
<td>Presentation 2: Recommendations</td>
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<tr>
<td>10</td>
<td>Q&amp;A</td>
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<td>20</td>
<td>Small group discussion. Write small group recommendations on: <strong>Blue Cards</strong></td>
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<td>15</td>
<td>Plenary session conversation.</td>
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<td>90 minutes</td>
<td>Throughout the session, participants can suggest additional evidence on the <strong>Yellow Cards</strong></td>
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