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# WEBINAR:

**Learning about Needs of and Challenges  
Faced by Program Workers and Recipients:  
A Case Study of Observational  
Implementation Research**

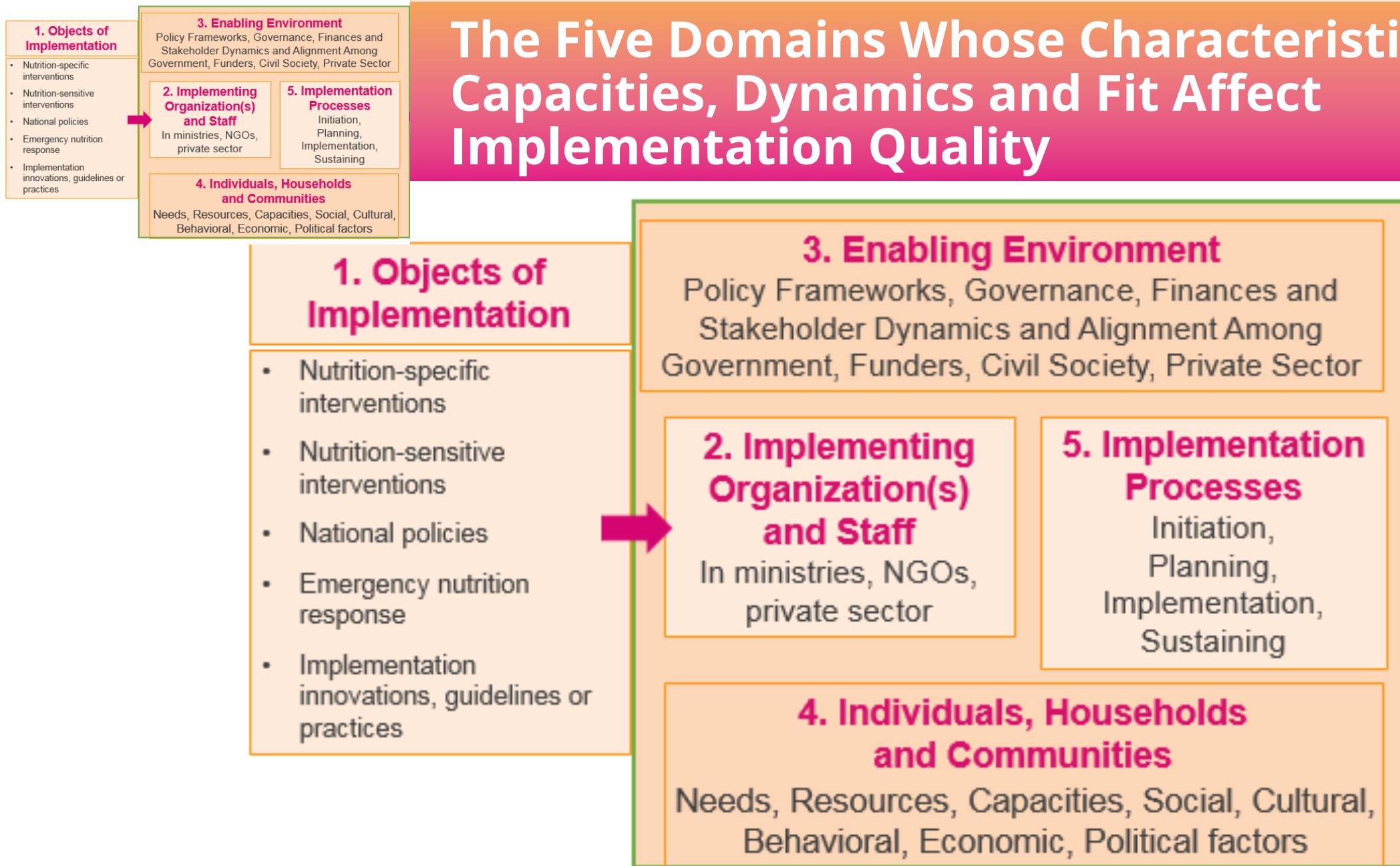
**#SISNFramework  
#InvestinIR**

**6<sup>th</sup> December 2018**



THE SOCIETY  
FOR IMPLEMENTATION  
SCIENCE IN NUTRITION

# The Five Domains Whose Characteristics, Capacities, Dynamics and Fit Affect Implementation Quality



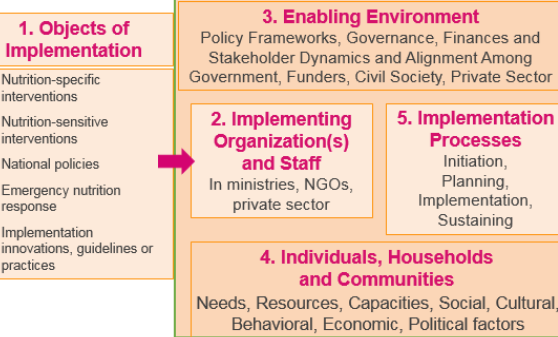
# This Framework Cautions Against:

- Focusing on generating new knowledge while neglecting the utilization of existing knowledge
- Privileging scientific knowledge while overlooking the value of contextual, experiential and tacit knowledge
- Emphasizing rigorous trials while neglecting the diverse methods for contextual inquiries
- Emphasizing research on certain objects of implementation (such as nutrition-specific interventions) and neglecting others (such as nutrition-sensitive actions, national multisectoral agendas and implementation innovations)
- Conducting research on field-level implementation processes while neglecting the problems and bottlenecks at the other three stages in the implementation cycle
- Strengthening capacity of implementing organizations and staff (through training) while neglecting critical bottlenecks in the other four domains.

# Existing types of inquiry for program learning

- Landscape assessment
- Organizational assessment
- Formative research
- Monitoring
- Process evaluation

# SISN's Classification Scheme of Implementation Research



	Commitment, Support, Financing and Sustainability		
Objects of Implementation	Initiation and Scoping	Planning and Design	Implementation, Iterative Improvement and Scaling Up
Nutrition-specific interventions			
Nutrition-sensitive actions			
Operationalizing a national multisectoral nutrition agenda			
NGO projects (typically sub-national)			
Implementation Innovations			

# Objectives for today's talk

- Lay out our conceptual understanding of observational implementation research based on our research experiences
- Discuss implications for this type of research in advancing nutrition programming

# Observational implementation research

- Combine methods to respond to specific questions about programming
- Distinction with process evaluation or formative research
  - Scope of questions
  - Mix of methods
  - Use of results
- Suited to situations where
  - Experiential knowledge and learning need to be privileged or teased out, and
  - Knowledge is specifically sought to inform strategic direction beyond the scope of a single program or policy



Table 1. Design elements of OIR.

Questions	Methods		
	Design	Data collection	Analysis
<ul style="list-style-type: none"> <li>- Scope (what motivates the study?)</li> <li>- Formulate and frame research questions (iterative and participatory process)</li> <li>- Align questions with anticipated significance and outcomes of study</li> </ul>	<ul style="list-style-type: none"> <li>- Multi-sited</li> <li>- Multi-level</li> <li>- Bringing together multiple methods</li> </ul>	<ul style="list-style-type: none"> <li>- Document reviews, policy analysis, use of monitoring data and evaluation reports, etc</li> <li>- Typically qualitative and exploratory using semi-structured or unstructured in-depth interviews (may lead to the development of targeted surveys or questionnaires)</li> </ul>	<ul style="list-style-type: none"> <li>- Documentation: analysis to address specific questions</li> <li>- Interview data: Inductive (should be guided by what is in the data)</li> <li>- Other steps: preparation of logic models, program impact pathways, etc</li> </ul>

# Objectives and questions

- Sample objectives:
  - Create body of knowledge about existing programs or targeted services
  - Become informed by and better understand the daily experiences of program recipients
  - Understand the tensions at the interface of service delivery through community-based service delivery systems for health and nutrition
- Sample questions:
  - How does this intervention interact with other nutrition or nutrition-relevant policies and programs in this context?
  - What characteristics of the target population influence their ability to engage with the program components?
  - What are the capacities and limitations of implementing actors to carry out the intervention?
  - How do organizational characteristics influence their implementation of this program or strategy?

## Objectives and questions

- Scope (what motivates the study?)
- Formulate and frame research questions (iterative and participatory process)
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# Methods: Study design

- Multiple sites: donors, government, regulators, evaluators, frontline workers, gatekeepers, implementing organizations, recipients
- Multiple levels: hierarchies; dynamics; “black boxes”

## Design

- Multi-sited
- Multi-level
- Bringing together multiple methods

# Methods: Data Collection

- Deploying multiple strategies to stitch together what is often a patchwork of actors, services, and goals
- Encircling a question or issue

## Data collection

- Document reviews, policy analysis, use of monitoring data and evaluation reports, etc
- Typically qualitative and exploratory using semi-structured or unstructured in-depth interviews (may lead to the development of targeted surveys or questionnaires)

# Methods: Analysis

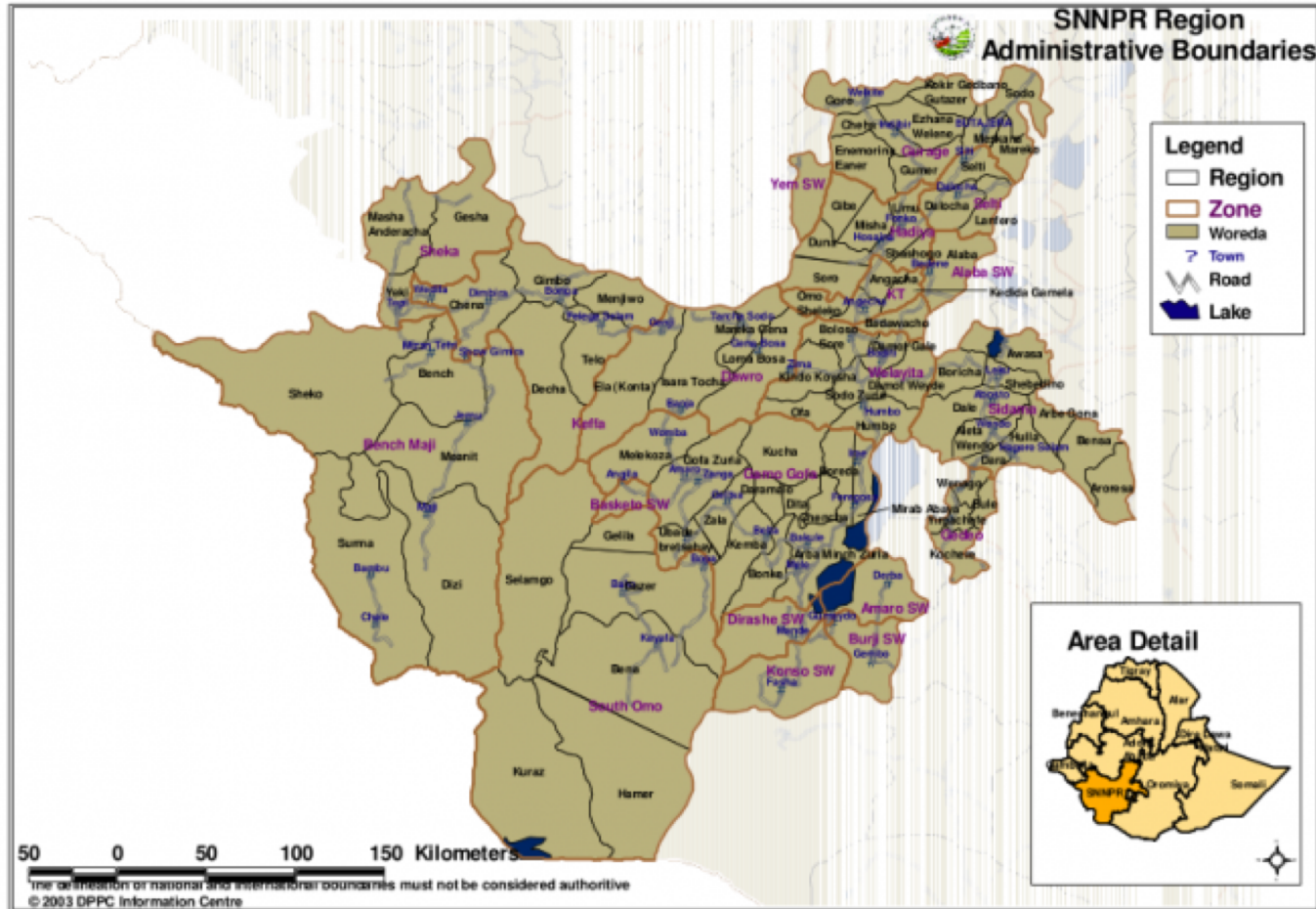
- Analysis of documentation informed or bounded by pre-determined questions
- Interview data to be analyzed inductively: Multiple steps to reduce; iterative discussion
  - Prioritize emergent themes; Preserve relationships and context; avoid fragmentation and simple summarization

## Analysis

- Documentation: analysis to address specific questions
- Interview data: Inductive (should be guided by what is in the data to privilege experiential knowledge)
- Other steps: preparation of logic models, program impact pathways, etc

# Example: Engaging with the frontlines of service delivery

- A growing number of organizations rely on community-based systems in-country to reach households and deliver services and interventions
  - More sustainable, avoid building parallel systems and can (ideally) strengthen in-country health systems
- Key tension: the ability to deliver quality services to underserved populations through these systems (e.g., community or facility-based systems) is only as strong and viable as the systems themselves
- Need: Understand the tensions at the interface of service delivery through community-based service delivery systems for health and nutrition



- Health systems organized into satellite networks – one or more major hospitals (i.e., where surgery can be performed) will typically be situated in a district or regional capital city.
- Bands of lesser and lesser-equipped hospitals, clinics, and posts will permeate the surrounding area.
- Trained and certified health workers staff each of these levels

Source: <https://reliefweb.int/map/ethiopia/ethiopia-snnpr-region-administrative-boundaries>

- (Mostly) female volunteers – often paid small stipends—recruited from within communities
  - Community volunteers form a cohesive unit with their local health clinic or post and the formalized agents of the health system, especially midwives, health extension workers, nurses, and other clinicians
  - Community health volunteers typically receive at least one formal training; periodic refreshers intended to occur
  - Typical nutrition modules will focus on the following topics:
    - Maternal nutrition, breastfeeding promotion, infant and young child nutrition and feeding practices, use of antenatal care services, use of micronutrient supplements for children, participation in growth monitoring and promotion, care practices during illness (e.g., provision of ORS during episodic diarrhea), WASH
  - The “last mile” in reaching communities is traversed by these community health workers



# OIR conceptual framing

## Objective

Understand the tensions at the interface of service delivery through community-based service delivery systems for health and nutrition



## Research questions

- A) What are the capacities and limitations of implementing actors to carry out the intervention?
- B) How do institutional characteristics influence the implementation of this program or strategy?
- C) What characteristics of the target population influence their ability to engage with the program components?



{ Achievement of shared goals }

# Supply

- Overburdened health systems
- Community-based preventative services (and burden of regular monitoring) may be placed on under (or un) paid volunteers
  - Volunteers face the same constraints as participants – time, money, geography, infrastructure
  - They may not feel valued (uniforms); thus motivation may be limited
  - Friction and/or lack of communication and leadership with the formal health system (leading to strikes, inconsistent delivery of preventative services thus interrupting the possible continuum)

# Demand

- Disuse of services often unrelated to lack of knowledge; moreover lack of resources and options
  - The walk and the wait: Hidden costs of service utilization include loss of a day's wages and childcare
  - Cost of services (even when seemingly minimal) may still be untenable
- Lack of autonomy
- Informed decision making—services on offer may not be worth the time and energy it may take to access them

# Lessons learned: Target populations

- Understanding diversity of needs that result from different constraints
  - Resources
  - Societal norms or pressures
  - Geographical
  - Physiological

# Lessons learned: Service delivery platforms

- Characteristics of service delivery platforms
  - Types of actors within and dynamics
  - Resourcing (particularly of preventative services)
  - Capacities to monitor and learn
  - Service delivery quality and consistency
  - Geographic variation
  - Histories and ideologies
- Characteristics matter in the formation and management of partnerships for implementation

# Lessons learned: Alignment

- Strategic alignment - Incorporating multiple points of view at multiple levels, both within and outside of a given system, provides a more comprehensive picture of a service provision “landscape”
- OIR can illuminate the degree of alignment between different points within a landscape, providing actionable lessons with appropriate context for decision-makers

# Conclusions

## Why now?

- Current emphasis on experiential knowledge and learning AND context-specific learnings for decision-making necessitates incisive and flexible forms of inquiry
- Popularity of (and challenges encountered in recent experiences implementing) multi-sectoral interventions also necessitates inductive and exploratory research



# Conclusions

## How is observational implementation research different?

- Scope
  - Questions that are rooted in context
  - More open and exploratory questions (What should we even be trying to do?)
- Mixture of methods and analytical strategies
  - Privileging experiential learning
- Use of results
  - Outward- and forward-looking

# Q&A

*“How long can one realistically expect a community member to  
“volunteer”?”*

– Jan Low

# Q&A

*“How were the results from the Ethiopian example utilized? Did it change the ways volunteers were used/engaged with?”*

– Jan Low

# Q&A

*“In doing observational implementation research, is it plausible to construct a hypothesis before the research?”*

– Abdul-Razak Mohammed

# Q&A

*“Given the ongoing debate on value vs cost of CHWs, is the overall/general hypothesis that CHWs could be more cost-effective than health CWs (HCWs) still stand? What if in the 1st place, the hypothesis is wrong, given Ethiopia / India is now switching to paid workers, long training, etc., these all being the elements of HCWs originally.”*

– Lilia Turcan

# Q&A

*“In many cases I've seen these semi-paid 'volunteers' have 'side hustles' where in addition to giving free care, they are also selling products to the individuals that they are providing care to (e.g. some medicines, medical supplies). This allows them to both work within the system and help fill the massive unmet need for health care workers, which allowing them to generate an income. Is this something you also see in Ethiopia?”*

**– Taylor Snyder**

# Q&A

*“Along the same line, in my experience there is understandably a range of engagement with volunteers -- some are very motivated and active, others can't manage, but in terms of fidelity of delivery it seems impossible to rely on volunteers if you want even coverage. I wonder how a research result like that is actually utilized.”*

**– Thalia Sparling**

# Q&A

*“Perhaps a more important issue is not whether paid vs unpaid is more effective, but whether it is equitable to continue to give “women” unpaid jobs.”*

– Sara Wuehler



# Q&A

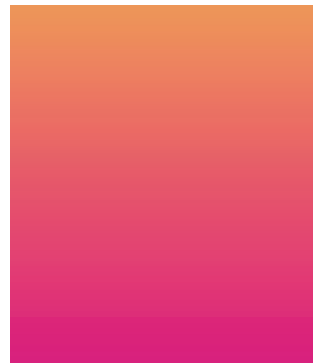
***“To what extent can Ghana benefit from the research conducted in Ethiopia?”***

**– Abdul-Razak Mohammed**

# Q&A

*“How do you convince funders to plan -- take the time and money - to do these sorts of assessment early enough to use this type of information in design.”*

**– Thalia Sparling**



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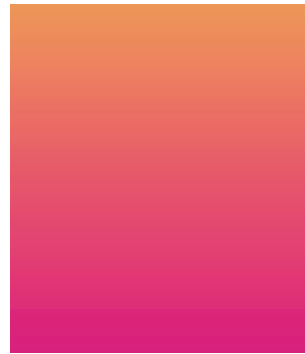
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