Identifying Problems and Questions

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I. Program Lifecycle

II. Components of Program Evaluation

   Identifying problems and questions

III. Conclusion
Lifecycle of a Program

ISSUE/PROBLEM Identification

SOLUTION DESIGN

PROGRAM IMPLEMENTATION

PROGRAM EVALUATION FOR DECISIONS

PROGRAM MONITORING AND EVALUATION
Components/Stages of **Program Evaluation**

**Conceptualising And Designing**
- Needs Assessment
- Theory of Action/Theory of Change/Results Chain
- Process Evaluation/Monitoring

**Implementation**
- Impact Evaluation

**Programme Assessment**
- Cost Effectiveness

- **What is the problem?**
- **How, in theory, would an intervention or policy fix the problem?**

- **Is the program implemented as planned?**

- **Were the desired outcomes achieved?**
  **What is the size of the change?**

- **Given the change in outcomes and cost, how does it compare to alternatives?**
NEEDS ASSESSMENT
Identifying the Problem
Needs Assessment – understanding the issue and the context

• What is the evidence of the problem?
  • What is the likely source of the problem?
  • Of the solutions already tried, why are they failing?

• What groups in the population should be targeted (Who is in most need?)

• What problems and opportunities does the target group face?

• What challenges remain unaddressed?

Needs assessment is the basis of good program design
Needs assessment can make us rethink the design of our program

1. No real problem
2. Problem is not a local priority
3. Real cause of the problem is different from what was assumed
4. Basic conditions needed to make the program effective are not in place
Case study: Incentives for Immunisation

Needs Assessment
Case study: Needs Assessment

• Every year, between 2 and 3 million children die from vaccine-preventable diseases

• Only 54% of 1-2 year olds in India receive the basic package of immunizations
  • BCG, DPT, Polio, and Measles vaccines
  • At least 5 visits

• In India, immunizations are offered for free... but the immunization rate remains low

• In rural Rajasthan, this rate is 22%

......why?
Underlying issues

• Supply side factors:
  • Average household is within 2 kilometers of the nearest clinic
  • High absenteeism at government health facilities – 45% of Auxiliary Nurse Midwives are absent on any given workday

• Demand side factors:
  • Cultural resistance, distrust in public health institutions
  • People don’t value immunizations: short-term cost for long-term (and invisible) benefits
  • Limited income: parents can’t afford to take a day off
Developing a Theory of Change
Theory of Change - How could a program, in theory, fix the problems identified?

• What are the prerequisites to raise immunization rates?

• How and why are those requirements currently lacking or failing?

• How could a program change these issues?

  • What could change the supply?

  • What could change the demand?
Case study: Incentives for Immunisation

Assessing the Theory of Change
Identifying potential solutions and designing a program

Supply-side Solutions

• Strengthen the existing government program
  • Stronger mechanisms to address staff absenteeism in clinics
  • Tracking of unimmunized children and providing immunisation
  • Immunization camps? (specific dates for immunizations)

Demand-side Solutions

• Information campaigns about benefits of vaccines
• Address parents’ doubts about adverse effects from immunizations
• Give people incentives to offset the costs of coming for immunizations?
How does the program in theory fix the problem?

**Situation/Problem Analysis:** High health worker absenteeism, low perceived value of immunization, families have limited income and time

- Incentives for immunization
- Immunization Camps
Program Theory of Change

**INPUT**

- Resources for Immunisation Camps
- Incentives for Immunisation

**OUTPUT**

- Camps are reliably open on certain dates
- Incentives are delivered to parents

**OUTCOME**

- Parents bring children to the camps
- Parents bring children to the camps repeatedly

**GOAL**

Full Immunisation

**Situation/Context Analysis:** High health worker absenteeism, low perceived value of immunisation, families have limited income and time
PROCESS EVALUATION
Making the program work
Process Evaluation - Was the program carried out as planned? Is it functioning well?

- Are basic tasks being completed?
- Is the intervention reaching the target population at the appropriate time?
- Is the intervention being completed well or efficiently and to the beneficiaries’ satisfaction?
- Are program staff well informed and working hard?
- Is all the money accounted for?

Process evaluation/Monitoring crucial for all programs
Case study: Incentives for Immunisation

Process Evaluation
Process Evaluation: 
Key implementation steps to monitor

• Establish camp
  • Hiring nurses and administrators
  • Installing temporary camp site
  • Procuring vaccines and other medical supplies

• Organize incentive scheme
  • Identify viable incentive (food handout)
  • Purchase kilos of food and dinner plate sets

• Demand side: Beneficiary compliance
  • Do parents visit the camps?
  • Do they come back five times to complete the cycle?
IMPACT EVALUATION
Measuring how well it worked
Impact Evaluation

Questions answered by impact evaluations

Impact evaluations determines if a program *causes* a change in outcome(s)

1. What is the impact of a program?
   - i.e., specific intervention or a package of interventions

2. Which elements of the program matter the most?

3. Which of alternative strategies should we pursue?
Which is the best question for an impact evaluation?

A. What percentage of 3 year old children in Rajasthan are not fully immunised?

B. What is the correlation between regular immunization camps and immunization rates?

C. Does holding regular immunization camps and providing incentives to parents improve immunization rates of children?
Case study: Incentives for Immunisation

Impact Evaluation
Randomization design

- Total Population (700+ villages)
- Target Population (134 villages)
- Not in evaluation (0)
- Evaluation Sample (134 villages)
- Random Assignment
  - Camps (30 villages)
  - Camps + Incentives (30 villages)
  - Control (74 villages)
What was the impact?

Immunization rates

- Control: 6%
- Camps: 17%
- Camps + Lentils: 38%
A good randomized evaluation MUST illuminate the process

Low immunization rates → Intervention → Black Box → No increase in full immunisation

Needs Assessment
Intervention Design
Final outcome
A good randomized evaluation MUST illuminate the process

Implementation failure

Resources for Immunisation Camps
- Camps are reliably open
- Incentives are delivered
- Parents do not bring children to the camps
- Parents do not bring children to the camps repeatedly
- No change in Immunization

Theory failure

Resources for Immunisation Camps
- Camps are reliably open
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- Parents do not bring children to the camps
- Parents do not bring children to the camps repeatedly
- No change in Immunization
COST-EFFECTIVENESS ANALYSIS

Essential for Evidence-Based Policymaking
Cost effectiveness
Costs per fully Immunised Child

Even though the food incentive raised costs, it had a big impact on immunization rates (38% vs 17%) so its costs/immunized child were much lower.
Impact Evaluation questions

What makes a good impact evaluation question?
Which are good questions for an impact evaluation?

A. Are agricultural extension agents giving farmers the same information they were trained on?
B. What share of farmers in Tanzania live on less than $2 a day?
C. Which kind of fertilizer works best for a plot of maize?
D. What is a better way to raise crop yields: new seeds or treatment with pesticides?
Which are good questions for an impact evaluation?

A. What is Tanzania’s primary school completion rate?
B. What percentage of Tanzanian students can understand an English text at the end of second grade?
C. What causes teacher absence?
D. Can double-shift schools improve student learning?
E. Can a job training designed for young women increase their employment and earnings?
F. Will changing the national curriculum to focus on competencies rather than subjects increase learning?
G. Will contracting private providers to manage government schools improve school results (graduation rates and test scores)?
Asante sana! Thank you!

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