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Research and Evaluation Report FY16

The USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project, through its research and evaluation (R&E) component, provides technical assistance and guidance on country-led research and synthesizes learning across country- and centrally funded projects on several improvement topics, including the validity of improvement indicator data, sustainability and institutionalization, spread, and economic analysis.

The ASSIST R&E agenda falls under three main categories to address two questions and one broad theme: How can ASSIST improve the way that improvement activities are implemented in the settings in which it works? What is the capacity that countries have to continue to improve health care independent of ASSIST? The major theme is improving the rigor of program evaluation and research conducted in the field of health care improvement. Many R&E activities reported here cover more than one of these broad areas.

In fiscal year (FY) 2016, the R&E unit has continued to finalize several key studies currently underway and launch new studies, especially on the topic of institutionalization and sustainability of quality improvement beyond the period of external technical assistance. There continues to be a major focus on completing ASSIST's mandates for the use of control groups, economic analysis of improvement, and data validation.

In FY16, the R&E unit supported 39 studies in 15 countries (Burundi, Cote d'Ivoire, Democratic Republic of Congo, Ecuador, Honduras, India, Kenya, Lesotho, Malawi, Mali, South Africa, Swaziland, Tanzania, Uganda, and Ukraine). In addition, the team supported four multi-country studies: 1) experiences from the Partnerships in Community Child Protection in Africa; 2) a multi-country study in Latin America and the Caribbean (LAC) evaluating a web-based improvement collaborative to prevent neonatal infections in hospitals; 3) supporting community providers through a community health system approach in Ethiopia and Tanzania; and 4) a survey of how medical schools in Africa incorporate improvement methods in their curricula. The R&E team also provided technical assistance to Botswana, Burundi, Democratic Republic of Congo (DRC), and Lesotho on validation of their improvement indicators. Data collection from control groups was planned or conducted in Burundi, DRC, Kenya, Tanzania, and Uganda.

The unit is working to disseminate knowledge generated by these studies through web-published reports, peer-reviewed journal articles, and presentations at relevant international meetings to encourage wider adoption of improvements methods.



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