Data for Impact–The D4I Approach for Strong Health Data

Data for Impact (D4I) is a five-year cooperative agreement funded by the United States Agency for International Development (USAID) that supports countries to **mobilize the power of data** as actionable evidence that can improve programs, policies, and—ultimately—health outcomes. D4I seeks to achieve the following results:

- Build **strong evidence** needed for program and policy decision making through expanded use of existing data sources and with new data generated through innovative research designs and data collection strategies

- **Strengthen individual and organizational capacity** to develop evidence for health decision making and to receive direct funding from USAID

- **Facilitate data use** to improve global health programs and policies through compelling data visualization and communication strategies.

A core principle of D4I is to focus on the knowledge gaps in global health and to consider the full range of options to address those issues. We tailor methods to the available budget, timeline, and context. When new data are needed to fill information gaps, we employ methods that are innovative, timely, and efficient.

Our evaluations **provide evidence** of how and why interventions are or are not working to further progress on **USAID's strategic priorities**: preventing child and maternal deaths, controlling the HIV/AIDS epidemic, and combating infectious diseases. We employ both **quantitative and qualitative** research methods, often together, to complement the learning process. Wherever feasible, we use **existing and routine data**.

The types of evaluations D4I conducts seek answers to the larger picture of health impacts and outcomes. **D4I does not field a team of evaluators to review a project and its implementing partners** in order to make recommendations to USAID about project operations, management, structure, or relationships with subpartners. Instead, our evaluations focus on whether a particular intervention model is the right one for the outcomes expected, based on the operating theory of change.

These evaluations are designed with scientifically rigorous protocols appropriate to answer the evaluation question(s). D4I **includes stakeholders in collaborative evaluations**, from concept and design to sharing results in appropriate formats for different audiences. We also share evaluation results that can be used to inform policy and program improvements, both for the intervention evaluated and for interventions elsewhere.

We employ **complexity-aware methods** that consider nonlinear chains of causation and contextual factors, such as leadership and governance, human capacity, parallel or competing information structures and programs, and unexpected events. Methods include sentinel indicators, plausibility design, process monitoring, most significant change, outcome harvesting, network analysis, modeling, and causal loop diagrams, among others.

D4I is experienced with real-time evaluations and adept in applying USAID's collaborating, learning, and adapting (CLA) framework. We help programs become more knowledge-driven and responsive to evolving situations.

We offer concrete guidance on how organizations can comprehensively and explicitly **integrate gender** in monitoring and evaluation (M&E), and ensure appropriate collection, analysis, and use of gender data for decision making. We have experience in rigorous evaluations in **all health areas**, including systems, policies, and programs in HIV/AIDS, emerging infectious diseases, malaria, tuberculosis, family planning and reproductive health, maternal and child health, nutrition and food security, and orphans and vulnerable children.

D4I is committed to USAID's strategy of supporting each country's **Journey to Self-Reliance**, building a country's capacity to plan, finance, and implement solutions to address its own development challenges and meet the local targets of the United States President's Emergency Plan for AIDS Relief (PEPFAR). We **employ capacity strengthening approaches** tailored to the goals of the local partner, mission, and budget. We conduct capacity assessments, develop capacity strengthening plans, and monitor progress. Our approaches are a combination of experiential learning through collaborative implementation of evidence-generating activities, mentoring, and formal training. We link partners to networks and communities of practice to reinforce learning.

The University of North Carolina at Chapel Hill, through the Carolina Population Center, leads D4I in partnership with Palladium, ICF International (ICF), John Snow, Inc. (JSI), and Tulane University. This consortium has 25 years of experience working in low-resource settings to strengthen local capacity to generate and use high-quality health data to make evidence-informed, strategic decisions for health policy and programming at local, regional, and national levels. D4I draws on the technical expertise that exists in each organization and on an extensive network of local organizations in USAID priority countries.

We focus on intervention models rather than operations, seeking answers to questions of policy and best practice rather than assessing performance. Where appropriate, we conduct the following types of evaluations:

- **Process evaluations** focus on program implementation.

- **Outcome evaluations** measure success at achieving intended outcomes.

- **Impact evaluations** measure the change in a specific intervention outcome, using a counterfactual.

- **Economic evaluations** compare the costs and outcomes of alternative interventions.

- **Implementation science** explores methods to promote uptake of research findings.

- **Operations research** answers questions about optimum functioning of programs in light of available resources.

- **Real-time evaluations** provide immediate feedback to prgram implementers.

    D4I conducts evaluations in accordance with the policies of USAID[1,2] and PEPFAR.[3]

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[1] USAID Evaluation Policy. (January 2011, updated August 2016). Retrieved from https://www.usaid.gov/evaluation/policy

[2] USAID Operational Policy (ADS) Chapter 201. (updated October 2018). Retrieved from https://www.usaid.gov/ads/policy/200/201

[3] PEPFAR Evaluation Standards of Practice, Version 3.0. (December 15, 2017). Retrieved from https://www.pepfar.gov/documents/organization/276886.pdf

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