

HIP

FAMILY
PLANNING
HIGH IMPACT
PRACTICES

HIP TAG 2017
November 29-30, 2017

Chemonics

1717 H St NW,
Washington, DC 20006



**High Impact Practices
Technical Advisory Group
Meeting Report**

November 29-30, 2017



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Technical Advisory Group Meeting Report

Day 1

Updates

Shawn Malarcher presented progress on HIP TAG recommendations from the June 2017 meeting. Most recommendations had been completed or were in process. However, two recommendations had no action over the last year:

- 1) *In order to facilitate dissemination and use of the HIP materials, the TAG recommends developing a short slide set for briefs to better assist visitors to the HIPs, to disseminate the HIPs more easily, and increase the understanding and integrity of the briefs. The joint sponsors will identify a few briefs to test the need and use of such slide sets.*
- 2) *The TAG recommends further work to finalize the recommendations for measuring effects of interventions on equity.*

The group agreed that recommendations move faster and are more likely to be accomplished when TAG members volunteer to work on issues between meetings. Volunteers should be identified during the meeting to work on particular issues of interest.

Translations

Jennie Greaney and Rodolfo Gomez updated the group on translating the briefs into French, Spanish, and Portuguese. Good progress has been made and our hope is to have all briefs and materials translated into all four languages by the June 2018 meeting.

Rodolfo discussed the opportunity to launch the Spanish and Portuguese materials at the upcoming FIGO meeting, to be held in Brazil in late 2018. Dr. Gomez requested the group's assistance in preparing and launching the HIP material.

IBP HIPs Task Team

The IBP HIPs Task Team is co-chaired by the IBP secretariat and FP2020. The Task Team has had two meetings since the last TAG where the members have discussed HIPs dissemination, including webinars and the new website. FP2020 presented their mapping analysis of the HIPs for FP2020 Countries (see Mapping Analysis of HIPs section below). The IBP Secretariat has presented on the recent IBP survey, the matrix of WHO tools and HIPs, and case studies to document implementation of HIPs. The Group discussed options for further development and use of this work.

Mapping Analysis of HIPs

FP2020 and USAID have worked on a new tool, "Mapping Analysis of the HIPs," that was presented at the Anglophone Africa Focal Point Workshop for 15 countries. The analysis includes the HIPs, the Focal Point Strategy Documents (2017 revised or new commitments, CIP, and country action plan), and data

from Track20 and PMA2020. A color-coded legend denotes investments with good potential for growth and consistency in planning, areas for further clarification, and potential missed opportunities. The analysis served to stimulate discussion and inform the 2018-2019 FP2020 country action planning process. Examples of outputs of the mapping and discussion include Sierra Leone's recognition of its high facility birth rate corresponding with the HIP on immediate postpartum family planning (PPFP) and the potential missed opportunity.

The MOH representative Dr. Conteh took a particular interest in how a program could be implemented and wrote the implementation steps into the Sierra Leone Country Action Plan. The MOH representative from Zimbabwe requested assistance to scale up a pilot program on PPFP. Focal points in Kenya, Liberia, and Nigeria reached out to discuss Adolescent and Youth-Friendly Contraceptive Services and met with the World Health Organization's (WHO's) Chandra Mouli. Mozambique was considering incorporating family planning/immunization Integration services in their action plan; and South Sudan engaged in dialogue about postabortion family planning.

Gray Review Process

On behalf of the subgroup on standards of evidence, Karen Hardee and Michelle Weinberger gave a presentation on work done since the June 2017 TAG meeting to assess the standard of evidence in HIP briefs using the modified Gray Scale that Karen had presented to the TAG. Following a meeting of the subgroup in September, Karen and Michelle developed a matrix for assessing the evidence, and Michelle showed examples of its use with the "Mass Media" and "Immediate PPFP" briefs. The TAG agreed that the modified Gray Scale worked fairly well for categorizing the evidence in the impact section of the HIP briefs (types of studies, direction and significance of effect) and that some further modification is needed to make it more useful for the HIP partnership. For example, the "Mass Media" brief made use of evidence that drew from studies that created statistical control groups, which are the gold standard for studying the effects of mass media. Likewise, the PPFP brief included service statistics as evidence, which is a legitimate source for understanding the effects of the practice. In general, the group decided to use the summary table to aid in discussions about brief categorization along with other criteria for decision making, but not to create pre-defined cutoffs for the numbers or type of evidence required to be a Proven or Promising Practice in the way the Gray Scale has been used elsewhere.

The TAG decided that authors will fill out the matrix in Excel while they are developing briefs, and HIP TAG members will independently fill out the matrix to confirm the authors' assessments of the evidence. Also, the TAG decided to review the search strategy for HIP brief development to ensure consistency across them, while allowing flexibility given the wide range of practices that the HIP Initiative encompasses.

Review of Social Franchising Brief

Sarah Thurston and Elaine Menotti, authors of the "Social Franchising" brief, provided an overview of the document. Roy Jacobstein and Erin Mielke served as discussants. Tamar Chitashvilli and Gael O'Sullivan conducted the Gray Scale review.

The group discussion focused on the limited documented evidence base and noted that most of the experience comes from routine service delivery. Issues of impact were clouded further due to study designs that do not allow for analysis of social franchising with and without a voucher component. Discussants noted that publications show large-scale implementation and high volumes of services recorded by routine data collection systems.

The TAG concluded that “Social Franchising” (SF) represents a promising service delivery HIP. The TAG recommends publication and promotion with the following revisions:

- Strengthen discussion of marketing as a component of social franchising in the background section (paragraph three).
- Table of contents: Reverse the order of benefits to clients.
- Paragraph on quality improvement (p.3): The sentence “... *demonstrating the process of quality improvement.... before quote (Munroe et a. 2015)....*” needs to be rephrased to be clear and conclusive.
- Impact:
 - Simplify and summarize the impact section (define difference in difference).
 - Revise organization to align with other briefs: (in order) contraceptive prevalence, move discussion of effect on method selection (LARCs) to this section (remove from table), scale of implementation, and cost data.
 - Shorten the text on adolescents and move it to the rationale section.
 - Add information on scale of implementations from SF networks from India, Peru, Bangladesh, Honduras, and Nicaragua. Add evidence from evaluation of the Smiling Sun Franchise in Bangladesh, as appropriate. Add Madagascar reference.
 - Add results from Track20 modeling.
 - Remove the Bashai study from cost effectiveness section, as it is not relevant.
- Tips: Include more details from the *Global Health: Science and Practice* (GHSP) publication and reference. Consider using the summary boxes from this publication.
- Research questions: Add *What is the differential impact of Social Franchising with and without a voucher component?*
- Cross reference voucher brief.

Review of Digital Health for Clients Brief

Tara Miller, Trinity Zan, and Peggy D’Adamo, authors of the “Digital Health for Clients” brief, provided an overview of the document. Victoria Jennings and Gael O’Sullivan served as discussants. No Gray Scale review was conducted for this brief.

The TAG concluded that “Digital Health for Clients” represents a promising social and behavior change (SBC) HIP. However, given the substantial revisions, TAG members Alice Payne Merritt, Gael O’Sullivan, Victoria Jennings and Sara Stratton will conduct an interim review prior to publishing the brief.

Overall feedback: Define practice more broadly as digital approaches rather than SMS. Add information on gaming.

- Brief is text heavy. Reduce text overall, particularly in the table. Delete or significantly reduce Box 1. Use layout of other briefs (background, what challenge does the brief address [but without a methodology section]).
- Revise title: Mirror more closely the title of the digital health for systems brief.
- Rationale section: Reframe behavior change as a continuum.
- Impact:
 - Include sample size in the table.
 - Add new studies on contraceptive apps.
 - Tips: Make section more concise with clear subheadings.
 - Add summary titles to Tips.
 - Discuss cost of these interventions to donor/development partner, including wide variations.
 - Privacy considerations – include ethical, practical considerations for enhancing implementation.
 - How to reach low literacy populations.
- Research questions: Add research question related to more data on platforms other than SMS. Include information on the ways that messages are communicated. Add disaggregation of impact data (age, sex, literacy).

Day 2

Review of Day One

John Pile provided an overview of the first days' meeting. This being his last meeting as a TAG member, Dr. Pile reflected on the work of the TAG over the last several years. He enumerated significant achievements and highlighted the work still to be done. The group honored John's contribution to the work of the TAG.

Web Analytics

The HIP website was redesigned and launched in June 2017. A priority for the redesign was to elevate the content in the HIP briefs to the website, optimizing search engine index so that HIP content will appear earlier in search results. In five months since the launch, we've seen a 52% increase in visits, 53% increase in users, 75% increase in page views, and 51% increase in returning visitors. We are seeing increased visits from developing country regions such as Africa, Asia, and Latin America and the Caribbean (LAC). The majority of visits are to the individual brief pages. Most-viewed briefs include: "Adolescent-Friendly Contraceptive Services" and "Community Health Workers." HIP briefs downloads total 17,212. In last six months, top tweeters were in India, Nigeria, Tanzania, and Kenya.

Review Terms of Reference

Mario Festin led a discussion to clarify the Terms of Reference (TOR) for the TAG. The group discussed processes and selection criteria for the group. Specifically, the TAG requested information on new

members be circulated prior to the meeting so that members could be better incorporated into the TAG. The group also decided not to impose specific term limits and did note the importance of selecting new members and ensuring that the TAG processes were inclusive and transparent.

Upcoming Briefs: To be reviewed by TAG June 2018

Financing: The TAG agreed to the proposed focus on domestic resource mobilization for the revised brief. The TAG also agreed that a decision-making guide on Financing that draws from existing materials would be helpful to countries.

Interpersonal communication (IPC): The TAG found the range of activities currently included under IPC may be too diverse. Others felt the current definition represents the range of activities currently considered IPC and that further disaggregation may lead to more confusion. The group encouraged the authors to consider different ways to present the evidence taking into account these points of view.

Vouchers: After considering how this fits within the broader concept of family planning financing, the group recommended keeping vouchers as a separate brief. The brief should be updated to incorporate new evidence and literature, and to ensure research questions accurately reflect the practice. The brief will need a new classification, as emerging practices have been eliminated as a category. The group discussed possible alternative options for classifying the brief including as an enhancement or as a SBC HIP. The authors were encouraged to engage a rights and an SBC expert on the writing team to strengthen these elements of the brief.

Updating Briefs: To Be Reviewed by TAG November 2018

Post abortion family planning: As the oldest HIP brief, the TAG agreed that this brief needs to be updated and that the topic is still relevant to the field. In particular, the updated brief should include a theory of change and more attention and focus on provision of family planning when medical abortion is used. In addition, the group provided the following suggestions to strengthen and update the brief:

- Consider new issues such as youth, HIV and gender-based violence.
- There's more data on scale from Population Council research or ExpandNet.
- Consult with postabortion care (PAC) Consortium or the CCAC, Ipas.
- Need to update data on incidence – Guttmacher Fact Sheet from 2017 vs Sedgh 2012 (to 2008).
- Include Doug Huber's 20-year review <http://www.ghspjournal.org/content/4/3/481>.
- Several studies found that women receiving immediate postabortion intrauterine devices and implants had fewer unintended pregnancies and repeat abortions than those who were offered delayed insertions.
- Second edition of USAID's global PAC research compendium.
- Refer to November 2013 Consensus Statement.
- USAID still maintaining postabortioncare.org (site seems outdated).
- Medical abortion – more experience/evidence to include since 2012.
- Mention of PAC/FP within continuum-of-care approach.
- New WHO guidelines to be included.

- Humanitarian settings and PAC/FP.
- Linkage of PACFP to reducing maternal mortality rate (why is this practice important section).
- Inclusion of PAC in Health Information System.
- Consider revision of practice with experience of medical abortion since 2012.

Social marketing: The TAG recommended updating program examples to reflect more recent experiences, making sure the current brief represents state of the art and evolutions in programming models for social marketing, and adding a theory of change. Sharpen the definition of the practice and consider cost effectiveness and equity in the review.

Martyn Smith and Paata Chikvaidze agreed to conduct the Gray-Scale review for this brief.

Summary of Recommendations

- In order to facilitate dissemination and use of the HIP materials, the TAG recommends developing a short slide set for each brief.

Next Steps: With assistance from IBP, the joint sponsors will identify a few briefs and develop a prototype. A small working group of interested individuals will be identified from among the HIP partners to further develop this work. Jay Gribble has agreed to assist with this work.

- The TAG recommends further work to finalize the recommendations for measuring effects of interventions on equity.

Next Steps: Sara Stratton will organize a call in early 2018 with those interested in working on finalizing this paper. This working group consists of, but is not limited to, the following individuals: Rodolfo Gomez, John Pile, Suzanne Serruya, Venkatraman Chandra-Mouli, and Ian Askew.

- PAHO's Centro Latinoamericano de Perinatología (CLAP) will coordinate a launch of the HIPs in Portuguese, including Lusophone Africa where possible.

Next Steps: Rodolfo Gomez will be the contact point regarding organizing HIPs sessions at the October 14-19, 2018, FIGO conference in Brazil in Spanish and Portuguese. We will explore ways that the HIP partners and IBP in particular can support this effort. As a first step, Spanish/Portuguese HIP TAG members including Alice Payne Merritt, Elaine Menotti, Victoria Jennings, and Ellen Eiseman agreed to be tentative speakers in the preliminary session outline submitted and brainstormed other possible speakers to confirm subsequently.

- We encourage and support continued work on linking the HIPs to WHO guidelines.

Next Steps: We will invite the IBP Secretariat to present on progress at the next HIP TAG meeting. TAG members would be willing to provide input for this work. A draft report can be circulated to TAG members for review prior to the June TAG meeting.

- Develop Gray Scale tables for each new and revised brief. These tables will be used in TAG deliberations to inform categorization recommendations.

Next Steps: Prior to the next TAG meeting, Karen Hardee will organize a call with Michelle Weinberger, Roy Jacobstein, and Maggwa Baker to finalize the Gray Scale template and review the HIP criteria to ensure alignment and identify areas that need further clarification.

Authors of the vouchers and interpersonal communication briefs will complete the Gray Scale template. In addition, Michelle Weinberger, Mario Festin, and Jennie Greaney will prepare the Gray Scale template for interpersonal communication, and Martyn Smith and Paata Chikvaidze will prepare the template for the voucher brief.

- The TAG would like to review the search strategy used by authors to ensure the briefs capture the full range of evidence available.

Next Steps: Maggwa Baker will organize a call with Karen Hardee and Mario Festin in order to review the literature search strategy for the HIP briefs. At the next TAG meeting, they will provide a summary on the current process and make recommendations for improvements.

- The TAG recommends continued discussion on developing HIP-related materials focused on family planning programming in humanitarian settings.

Next Steps: Mario Festin, Paata Chikvaidze, Jennie Greaney, Hashina Begum, Nandita Thatte, Heidi Quinn, Loulou Kobeissi will continue to monitor the situation and update at the next HIP TAG meeting.

- The TAG encourages IBP to seek opportunities to make HIP implementation case studies available to the public.
- The TAG congratulated work on the new HIP website and appreciated data on increased visits to the sites.
- With the expectation that new data on implementing immediate postpartum family planning will be available in the coming months, the TAG would like to review the need for updating the brief in the near future.
- The TAG appreciated the opportunity to review the Terms of Reference for membership. The group recommended making information on new members available to the TAG prior to the meetings and several specific recommendations on the TOR.

Next Steps: Mario Festin will incorporate feedback from the TAG and recirculate for discussion at the next HIP TAG meeting.

Annex A: Agenda



AGENDA

Technical Advisory Group Meeting

November 29 and 30, 2017 from 09:00 – 17:00

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1717 H St NW, Washington, DC 20006

Objectives

- Review draft HIP briefs and make recommendations regarding the strength and consistency of the evidence and adherence to the HIP criteria.
- Continue to refine HIP process and identify priority activities.

Wednesday, November 29, 2017: Ellen Eiseman, Chair

08:30 – 09:00	Arrival
09:00 – 10:30	Opening of Meeting – Welcome Remarks Michelle Gardner, Chemonics Updates <ul style="list-style-type: none">• Progress on HIP TAG recommendations from June 2017, Shawn Malarcher• Updates on translations, Jennie Greaney & Rodolfo Gomez• IBP Task Team, Laura Raney• FP2020, Martyn Smith & Laura Raney
10:30 – 11:00	Break
11:00 – 12:00	Gray Review Process update Karen Hardee, Michelle Weinberger, John Pile, Alice Payne Merritt, & Gael O'Sullivan <ul style="list-style-type: none">• <i>Does the Gray Scale Review assist the TAG in determining how to categorize HIPs?</i>• <i>Are TAG members willing to take on the task of completing the Gray Scale review for upcoming briefs?</i>• <i>Are there likely to be any unintended consequences from the Gray Scale Review?</i>
12:00 – 13:00	Lunch

13:00 – 15:00	Review Social Franchise Brief Authors – Sarah Thurston & Elaine Menotti Discussants – Roy Jacobstein & Erin Mielke Gray Scale Review – Tamar Chitashvilli & Gael O'Sullivan <ul style="list-style-type: none"> • <i>Does the evidence as reflected in the brief meet the HIP criteria?</i> • <i>Categorize practice based on the strength and consistency of the evidence base. (Proven, Promising, Emerging)</i> • <i>What additional evidence, if any, is needed?</i>
15:00 – 15:30	Break
15:30 – 17:30	Review Digital Health for Clients Brief Authors – Trinity Zan, Tara Miller, & Peggy D'Adamo Discussants – Victoria Jennings & Gael O'Sullivan <ul style="list-style-type: none"> • <i>Does the evidence as reflected in the brief meet the HIP criteria?</i> • <i>If appropriate, categorize practice based on the strength and consistency of the evidence base. (Proven, Promising, Emerging)</i> • <i>What additional evidence, if any, is needed?</i>
17:30	Closing Social cocktail

Thursday, November 30, 2017: Martyn Smith, Chair

08:00 – 08:30	Arrival
08:30 – 10:00	Review Recommendations from Day 1 <ul style="list-style-type: none"> • Comments and Reflections, John Pile • Review Recommendations • Humanitarian Crisis, Jennie Greaney
10:00 – 10:30	Review web analytics & IBP HIPs Utilization Survey K4Health
10:30 – 11:00	Break
11:00 – 12:00	Review and discussion of Terms of Reference for TAG Membership Mario Festin
12:00 – 13:00	Lunch

13:00 – 14:00	Review New/Updated Briefs <ul style="list-style-type: none">• Interpersonal Communication – Angie Brasington• Financing – Jay Gribble• Vouchers – Elaine Menotti
14:00 – 14:30	Break
14:30 – 15:30	Updating Briefs (two) <ul style="list-style-type: none">• Published in 2012: PAFP - Sara Stratton• Published in 2013: Social Marketing - Paata Chikvaidze
15:30 – 16:30	Review Recommendations Next Steps and Closing

Annex B: List of Participants



Technical Advisory Group Meeting

November 29 and 30, 2017, 09:00 – 17:00

List of Participants

First Name	Last Name	Organization
Hashina	Begum	UNFPA
Angie	Brasington	USAID
Tamar	Chitashvili	URC
Peggy	D'Adamo	USAID
Ellen	Eiseman	Chemonics
Mario	Festin	WHO
Michelle	Gardner	Chemonics
Rodolfo	Gomez	PAHO
Jennie	Greaney	UNFPA
Jay	Gribble	Palladium
Karen	Hardee	Population Council
Brendan	Hayes	World Bank
Roy	Jacobstein	Intrahealth
Victoria	Jennings	Institute for Reproductive Health
Baker	Maggwa	USAID
Shawn	Malarcher	USAID
Elaine	Menotti	USAID
Erin	Mielke	USAID
Gael	O'Sullivan	Abt Associates
Alice	Payne Merritt	CCP
John	Pile	UNFPA
Heidi	Quinn	IPPF
Laura	Raney	FP2020
Martyn	Smith	FP 2020
Sara	Stratton	Palladium
Michelle	Weinberger	Avenir

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TAG Recommendations June 2017 (1)

- The TAG would like website use statistics along with any other know qualitative information from the secretariat presented at the Fall 2017 HIP TAG meeting.
- *In order to facilitate dissemination and utilization of the HIP materials, the TAG recommends developing a short slide set for briefs to assist visitors to the HIPS to disseminate the HIPS more easily and increase the understanding and integrity of the briefs. The joint sponsors will identify a few briefs to test the need and use of such slide sets.*
- *The TAG recommends further work to finalize the recommendations for measuring effects of interventions on equity.* Rodolfo Gomez, John Pile, Sara Stratton, Suzanne Serruya, and Venkatraman Chandra-Mouli volunteered to finalize the existing document with assistance from Ian Askew.

TAG Recommendations June 2017 (2)

- El Centro Latinoamericano de Perinatología (CLAP) has agreed to translate HIP briefs into Portuguese.
- Due to the confusion between the “evidence summaries” and the “emerging” category, the TAG recommends eliminating the “emerging” category.
- In order to better inform HIP Brief deliberations, the TAG is exploring ways of providing additional detail on the quality of evidence not currently included in the HIP briefs. The TAG recommends testing use of the Gray Scale for this purpose. Tables will be created based on application of the Gray Scale classification to the impact section only, including level of evidence, geographic representation, scale of implementation, and result.

TAG Recommendations June 2017 (3)

- A small group of TAG members provided suggestions for standardizing inclusion of the Theory of Change (TOC). Consensus was made to keep the TOC simple and add a context column. Development of the TOC will remain flexible to ensure they are relevant to the specific practice. The group developed guidance for authors which will be adapted based on the TAG discussions and included in the overall HIP brief development guidance.
- The TAG reviewed category (enabling environment, service delivery, and social and behaviour change) definitions included in the HIP list. There was insufficient time to finalize the language. Jay Gribble, Shawn Malarcher, Alice Payne Merritt, John Pile, Nandita Thatte, and Michelle Weinberger will review feedback and finalize language for the categories.
- The TAG recommends IPC and digital health for clients go forward to develop into potential HIP briefs. The TAG would like to review the scope for IPC at the Fall meeting before further development.

TAG Recommendations June 2017 (4)

- While the concept note on family planning in humanitarian crisis settings does not represent a “practice” as typically defined in the HIP work, the TAG recognizes the importance and urgency of this issue. The TAG recommends exploring developing the concept note as a “Strategic Planning Guide”. Ellen Eisemen, Loulou Kobeissi, John Pile, Heidi Quinn, and Nandita Thatte volunteered to help work on developing this concept.
- Update Financing brief including new evidence. Consider restructuring the brief to best reflect current thinking in this area. Scope of the brief should be considered along with the planned update of the voucher brief. Jay Gribble and Sarah Fox will develop a proposed scope for the brief/s. Their proposal will be reviewed at the Fall TAG meeting.
- Update voucher brief. Consider expanding brief to cover other important demand side financing mechanisms.

BRIEFS

SOCIAL AND BEHAVIOR CHANGE PROVEN

Mass Media: Reaching audiences far and wide with messages to support healthy reproductive behaviors

HIGH IMPACT PRACTICE: Use mass media channels to support healthy reproductive behaviors.



Radio anchor Othe discusses issues with a family planning expert, Marum Mombi, during a live programme about family planning in Kisumu, Kenya. © 2017 American International Development Corporation

HIP ENHANCEMENT

Digital Health for Systems: Strengthening Family Planning Systems Through Time and Resource Efficiencies

HIGH IMPACT PRACTICE: Use digital technologies to support health systems and service delivery for family planning.



A community health worker uses Orise International's mobile application to provide comprehensive family planning services to a client in Wote, Kenya. ©2017 ICF Macro, Country of Ethiopia

SERVICE DELIVERY PROVEN

Immediate Postpartum Family Planning: A key component of childbirth care

HIGH IMPACT PRACTICE: Offer contraceptive counseling and services as part of facility-based childbirth care prior to discharge from the health facility.



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Levels of Evidence for Proven and Promising HIPs

Karen Hardee and Michelle Weinberger for the Sub-group on Standards
of Evidence*

HIP TAG Meeting

Washington, DC, November 28, 2017

*Sub-group members: Mario Festin, Gael O'Sullivan, Martyn Smith, Maggwa Baker, Michelle
Weinberger; with Shawn Malarcher

Update from the June 2017 TAG

- At the June TAG, Karen presented the Modified Gray Scale as a potential for assessing the evidence in the impact sections of HIP briefs to help determine “proven” or “promising” HIPs, using examples of CHW and Drug Shops/Pharmacies
- Held a meeting with a sub-group from the TAG who agreed to try using the Modified Gray Scale with upcoming briefs (mass media, social franchising, digital health)
- Karen and Michelle developed a matrix to use to assess the evidence using the Modified Gray Scale – examples will be shown today

Modified “Gray Scale” – Hierarchy of Evidence from Sir Muir Gray (involved in developing the Cochrane collection), with level III split

Type	Strength of evidence (modified from Gray, 1997)
I	Strong evidence from at least one systematic review of multiple well designed, randomized controlled trials.
II	Strong evidence from at least one properly designed, randomized controlled trial of appropriate size.
IIIa	Evidence from well-designed trials/studies without randomization that include a control group (e.g. quasi-experimental, matched case-control studies, pre-post with control group)
IIIb	Evidence from well-designed trials/studies without randomization that do not include a control group (e.g. single group pre-post without, cohort, time series/interrupted time series)
IV	Evidence from well-designed, non-experimental studies from more than one center or research group.
V	Opinions of respected authorities , based on clinical evidence, descriptive studies or reports of expert committees.

Gray, J. 1997. Evidence Based Health Care: How to Make Health Policy and Management Decisions. London, UK: Churchill Livingstone.

Gray, J. 2009. Evidence-Based Health Care and Public Health: How to Make Decisions About Health Services and Public Health. 3rd Edition. Edinburgh, Scotland: Churchill Livingstone Elsevier.

Moving from Grey Scale to HIP Briefs: Mass Media

Type	Study Design	# with Positive Significant Results	# with positive results but no significant test	# with mixed results	# with non-significant results	Other
I	Systematic Review of RCT	0	0	0	0	0
?	Systematic Review of non-RCTs	0	1	0	0	0
II	RCT	0	0	0	0	0
IIIa	Control with pre/post (not randomized)	0	0	1	0	0
IIIa	Control with post only (not randomized)	0	0	0	0	0
IIIb	Pre/post no control	0	0	0	0	0
?	Routine/program data	0	0	0	0	0
?	Other Rigorous Design	11	0	0	1	0
IV	Other Non-Rigorous design	0	0	0	1	0
V	Qualitative	0	0	0	0	0
		73%	7%	7%	13%	0%

Moving from Grey Scale to HIP Briefs: Immediate PFP

Type	Study Design	# with Positive Significant Results	# with positive results but no significant test	# with mixed results	# with non-significant results	Other
I	Systematic Review of RCT	0	0	0	0	0
?	Systematic Review of non-RCTs	0	0	0	0	0
II	RCT	0	0	0	0	0
IIIa	Control with pre/post (not randomized)	0	0	0	0	0
IIIa	Control with post only (not randomized)	0	0	0	0	0
IIIb	Pre/post no control	0	0	0	0	0
?	Routine/program data	1	4	0	0	0
?	Other Rigorous Design	0	0	0	0	0
IV	Other Non-Rigorous design	0	0	0	0	0
V	Qualitative	0	0	0	0	0
		20%	80%	0%	0%	0%

Further changes needed?

- Some suggested further modifications to it to for the HIP Initiative:
 - Change or remove type I: unlikely to have systematic review of multiple RCTs, very few RCTs in existence for FP related interventions
 - Systematic review of non RCTs? → **type ?? Could vary based on types of studies included.**
 - Statistical methods applied to data– e.g. propensity score matching using DHS datasets → **type IIIa or IIIc (new type)?**
 - Program data such as service statistics or client exit interview results → **type– IV or V?**

Discussion

- Modified Gray Scale seems like a useful addition to the criteria for designating proven or promising HIPs

- Can show the strength of evidence
- Need to determine rules for how many studies of what type would indicate “proven” vs. “promising” OR not provide strict cut off, but rather use evidence mapping to inform discussions?

What Works: Gray I, II or IIIa studies for at least two countries and/or five Gray IIIb, IV or V studies across more than one country.

Promising: Gray I, II or IIIa studies but in only one setting or at least two studies rated Gray IIIb, IV or V in only one country or region.

- How account for studies that *did not show positive results*? Sometimes referred to in the text, but, not included in the impact table. Factor in volume of positive vs non-positive studies? But, not full literature review or systematic review.

High Impact Practices for Family Planning (HIPs) Website-Twitter-Webinar Dissemination

Debra Dickson
K4Health Project
December 4, 2017



Website Redesign

- Early 2016 talks began about revamping the website
- Modernize and make more visually engaging
- Brief content more easily accessible and expose visitors to all HIPs information
- **AND** we wanted to optimize the brief content for search engines like Google
- Redesign team: USAID HIPs team (Shawn Malarcher, Caitlin Thistle, Erika Houghtailing), Ados Velez May, Rati Bisnoi, and a team from K4Health
- Sent out an RFP to 7 companies and got 5 proposals
- Committee selected ForumOne to redesign the website

Mass Media: Reaching audiences far and wide with messages to support healthy reproductive behaviors

HIGH IMPACT PRACTICE: Use mass media channels to support healthy reproductive behaviors.

Radio anchor Oche discusses issues with a family planning expert, Mariam Momoh, during a live programme about family planning on Wazobia FM in Abuja, Nigeria. © 2012 Akinlunde Akinleye/NURHI. Courtesy of Photoshare

References Download: EN

Background

Mass media programming in reproductive health can influence individual behaviors by providing

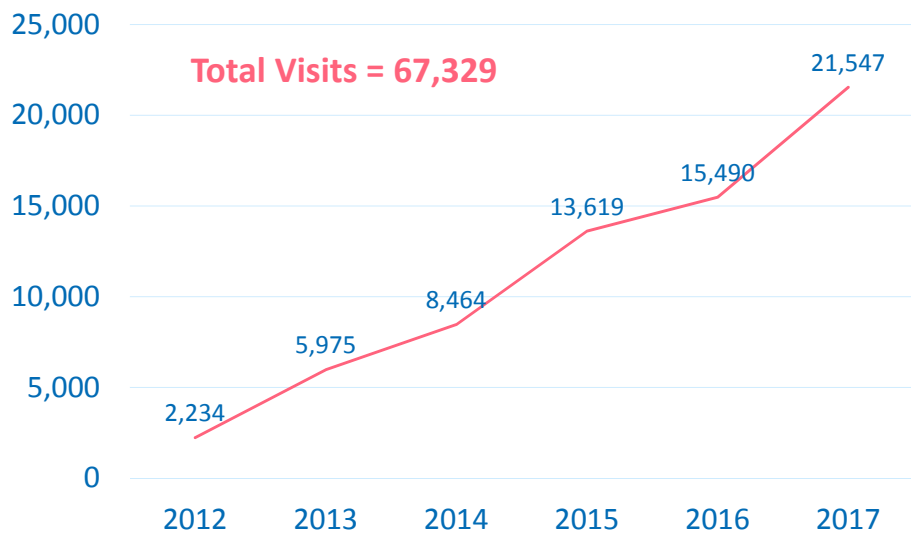
In the five months after launch ...

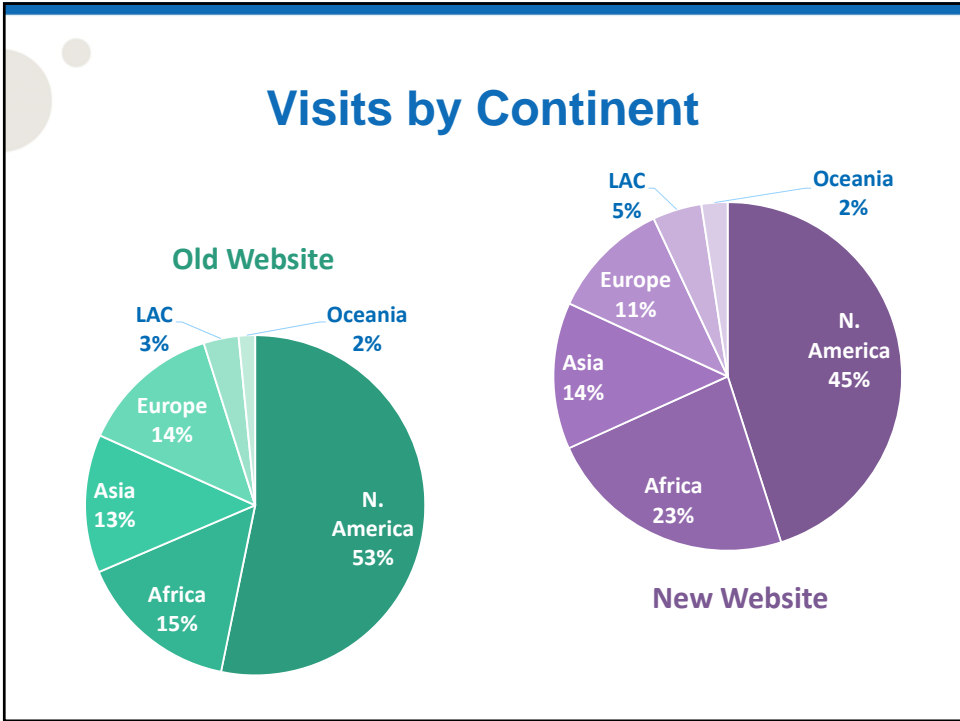
(Jun 18, 2017 – Nov 2017)

- **52%** increase in visits (8,540 to 13,021)
- **53%** increase in users (5,414 to 8,278)
- **75%** increase in pageviews (to 17,248 to 30,104)
- **51%** increase in returning visitors (3,303 to 4,981)

... compared to the five months prior to launch

HIP Website Visits





Top AFR / ASI Visits by Country

Africa	2017	2016
Nigeria	738	362
Kenya	689	504
Uganda	483	175
Tanzania	339	242
Ghana	324	145
Ethiopia	310	198
South Africa	253	155
Malawi	153	43
Zambia	139	61
Zimbabwe	86	33
All Africa	4,540	2,713

Asia	2017	2016
India	843	509
Philippines	411	451
Pakistan	339	237
Nepal	271	213
Bangladesh	192	89
Indonesia	106	165
Turkey	72	42
Myanmar	71	27
Thailand	58	41
Afghanistan	55	27
All Asia	2,945	2,251

New Website Pageviews - HIP Briefs

Brief	Pageviews
1. Adolescent-friendly Contraceptive Services	1,560
2. Community Health Workers	1,137
3. Digital Health for Systems	822
4. Mass Media	720
5. Mobile Outreach Services	658
6. Drugs Shops and Pharmacies	627
7. Community Group Engagement	623
8. Postabortion Family Planning	593
9. Social Marketing	571
10. FP/Imz Integration	517

New Website Pageviews - HIP Briefs

Brief	Pageviews
11. Galvanizing Commitment	444
12. Educating Girls	396
13. Vouchers	391
14. Health Communication	373
15. Supply Chain Management	283
16. Economic Empowerment	251
17. Policy	235
18. Leaders and Managers	176
19. Financing Commodities and Services	154
20. IPPFP	49