Applying a systems approach to evaluations of health systems strengthening interventions

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Introduction

Health systems strengthening (HSS) is widely understood to be key to achieving universal health coverage and to ensuring robust responses to health emergencies. In recent decades, global health investors have put more attention and investment towards HSS, leading to accelerated efforts to evaluate HSS policies and programs initiated by those investments. Yet, a common definition and framework for how to evaluate HSS interventions remains elusive, hampering efforts to strengthen, coordinate and amplify HSS programs.

The Health Systems Strengthening Evaluation Collaborative (HSSEC) brings together key global and national stakeholders to suggest ways to strengthen the quality of evaluations of health systems strengthening (HSS) investments in LMICs and to improve coordination across stakeholders in this space.

Three discrete but interlinked workstreams were seen as the common agenda around which the work of the HSSEC could develop. Workstream 1 was to build an understanding of the audiences that exist for the results of HSS evaluation and the nature of evidence that they expect/require. Workstream 2 was to build a shared understandings for language, methods & outcomes in HSS evaluation. Workstream 3 was to build an understanding of HSS evaluations from a national perspective. This Technical Brief fits under Workstream 2.

Key Objectives

Our objective was to reflect on how some foundational systems theories principles could provide a better grounding to the practice and methods of HSS evaluation. We conducted a limited critical review of curated publications to extract key principles, their implications for HSSEC, and illustrative examples. We also held a small consultation of purposefully selected practitioners and researchers to gather and incorporate their feedback. Whilst we recognise that this effort does not do justice to the full debate of what systems theories and practice can contribute to HSS evaluation, we hope that it can encourage a wider understanding of how to think more broadly about systems theories and health systems amongst funders and implementers of HSS Evaluations.

Main findings

Below, we highlight three principles which we think are particularly important and their implications for HSS Evaluations.

1. HSS evaluations must consider a phased approached to understanding systems complexity

- HSS evaluations must define and consider the nature of the health system within which they work by understanding structures, behaviours, and components that HSS interventions impact.
- HSS evaluations must consider the limits or boundaries in terms of scope, resources, time, and geography. Boundaries such as resources available, the geographical scope, or timing vis-à-vis the HSS interventions implementation are not fully controlled by HSS evaluators.
- HSS evaluations should critically evaluate short-term/mid-term/long-term impacts (time horizon boundary) as well as upstream and downstream health system impacts (scope boundary). Funding for HSS and HSS evaluations often provide a very limited timeframe for

detecting the desired system change. Funding cycles are too short term to see true systems change.

2. System components are interconnected and interdependent, behaving unexpectedly

- HSS interventions adapt over time to reflect the community needs and resources. HSS evaluators should be able to document both positive and negative lessons and consequences to adaptation.
- Program theories, like a Theory of Change, can help inform interdependencies, potential desired and undesired effects, related to and beyond the HSS intervention itself.
- New and unexpected behaviours which emerge can support innovation and growth in health systems, but can also be undesirable and difficult to contain.

3. Complexity in organizations has implications for stresses and dysfunctions across organizational systems

- HSS evaluation across levels needs to not only look at the hierarchy of health systems (policies, resources, programs, management, operations), but at the viability of organizational functions and their interplay level by level.
- Evaluators need to take stock of the relative complexity of the situation and phenomenon they are observing, starting with a proper consideration of the number of 'agents' (individuals, institutions, groupings), their diversity, and their level of interaction. As these increase, relative complexity increases, and evaluation methods need to adapt.
- HS stakeholders must consider how health services and health promotion organizations unavoidably change in response to significant health system or context changes and the extent to which this change promotes organizational learning and long-term performance.

Key recommendations

This brief aims to guide evaluation stakeholders to gain confidence in applying systems lenses to the evaluations. We suggest that funders who commission HSS evaluations should pay attention to:

- Differentiation: Acknowledging that HSS evaluation carries added challenges (complexity, timeline of causality) to general HS interventions and program performance evaluation, consider implications for evaluation the needs and boundaries of the exercise.
- Teasing out potential change scenarios: Encourage implementers of HSS to develop program theories which reflect on how they expect change and how fast it is anticipated to happen.
- Onboarding evaluation: Allocate time and resources to conduct analyses of HS structure, actors, power diversities and current programmatic theories – first at the design stage of HSS interventions and second at the evaluation stage.

In turn, we suggest that HSS evaluation teams could consider:

- Map interventions under study: By mapping out intervention components across different intervention types, HSS evaluations planning exercises (approach and method) can be scaled for complexity more realistically.
- Meaningful programmatic theories should document and report on original evaluation questions, as well as on how the intervention and the HS context change over time unexpectedly.
- Design flexible evaluation: Allow for evaluations to adjust and capture unexpected behaviours and emergent trends by supporting agile and flexible evaluation designs.
- Support learning: Advocate for candid and reflexive evaluations to understand positive and negative impacts from interventions.
- Evaluate both process and outcome measures: Ensure that process measures and outcomes related to system change and learning from the process of implementation are receiving adequate attention.

- Support valuation capacity: Because of the need for multi-method and multidisciplinary perspectives, HSS evaluations need to have adequate resources for HSS evaluators to expand their toolkit to support monitoring and learning in complex systems.

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