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# Monitoring and Evaluation IN ACTION!

Duff Gillespie

# CASE STUDIES

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Monitoring for Problem Identification and Resolution

Program Evaluation

Selected Issues

# GLOBAL EPI

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## Problem

Testing of vaccine potency found millions of doses that had lost their potency due to cumulative heat exposure

## Immunization campaigns being compromised because:

- children receiving worthless vaccines
- questionable vaccines destroyed
- lower coverage rates
- millions dollars wasted

# SOLUTION

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## Vaccine Vial Monitors (VVM) for:

- Oral polio
- Measles
- Hib
- BCG
- Yellow fever
- Hepatitis B
- Diphtheria
- Tetanus
- Pertussis

**VVM color coded labels allow for easy identification of vaccines over-exposed to heat**

# MONITORING CONDOM SHIPMENTS

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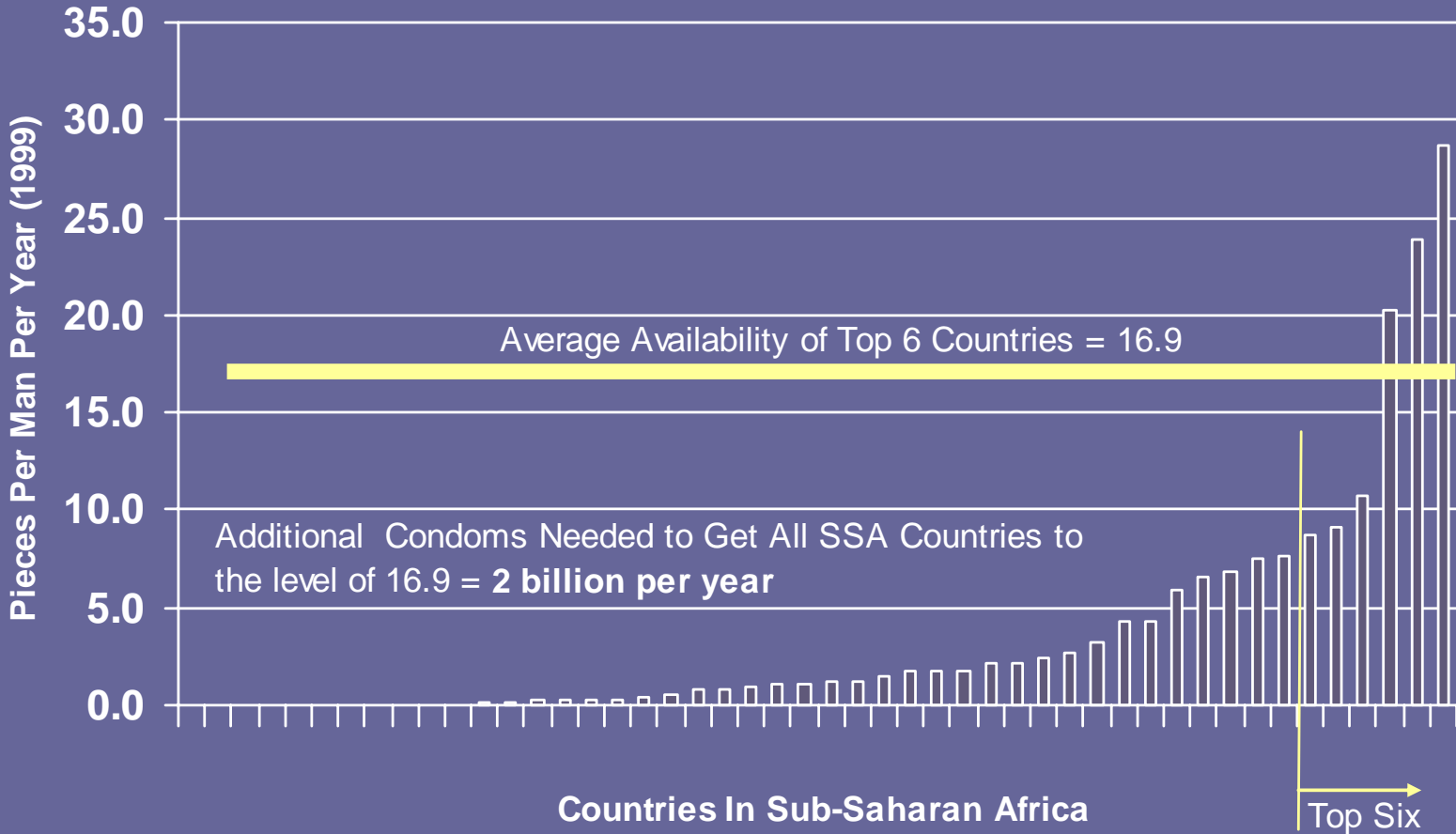
## Problem

Shipments of condoms to Sub-Saharan Africa were declining, despite rise of HIV infections

Declines not counterbalanced by other donors

Significant condom gap

# CONDOM GAP IN AFRICA



Horizontal line represents average procurement of top 6 countries - Botswana, South Africa, Zimbabwe, Togo, Congo and Kenya). Overall provision of condoms is 4.6 per man per year.

# AMELIORATIVE ACTIONS

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- Creation of Condom Fund
- Formation of Reproductive Health Supplies Coalition
- Demand Creation
- ABC battles make corrective actions difficult

# TRACKING IMMUNIZATION

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## Problem

Stagnation or decline in immunization coverage in Africa

Problem identified through surveys, well after serious degrading of EPI

Tracking of vaccine shipments or funding levels could have served as early warning system

# AMELIORATIVE ACTIONS

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- Reallocation of Funds
- UNICEF/USAID Taskforce
- Partnership for Maternal, Newborn and Child Health
- Field Guidance
- Global Alliance for Vaccines and Immunization (GAVI) and GAVI Funds (Private-Public Partnership)

# SYSTEM EVALUATIONS

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## Problem

Very Poor Access to Family Planning, especially in rural areas

- services offered by medical personnel
- rigid screening
- fixed facilities

Low Contraceptive Prevalence

# SOLUTION

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## Series of quasi-experimental studies

- areas with lay CBD providers vs. standard of care
- conducted in all geographical regions
- over 25 studies

# RESULTS

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Without exception, dramatic increases in treatment areas with modest or no increase in control areas

# IMPACT

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Change in policies and programs

CBD is now the norm

Dramatic increase in prevalence

# SELECTED M&E ISSUES

# SELECTED M&E ISSUES

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Monitoring System *must be*

Timely  
Utilized  
Accurate

# SELECTED M&E ISSUES

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## Project vs. Impact Evaluation

Project: Did the contractor do what you paid them to do?

Impact: Did you ask them to do the right thing?

# SELECTED M&E ISSUES

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## Program Evaluation from the Get Go

IMCI

Multi-country Evaluation

# SELECTED M&E ISSUES

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M&E Indicators Frame  
Program Inputs and Activities

Contraceptive Prevalence vs. Continuation Rates

# SELECTED M&E ISSUES

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## Many Decisions are **Not** Evidence Based

- *Recent examples:*
- FDA EC Decision
- Abstinence
- Condom Degradation
- Needle Exchange Programs

# SELECTED M&E ISSUES

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## Critical Mass of Evidence Often Needed for Fundamental Changes

- CBD Family Planning
- ORT
- Vitamin A Supplementation

# SELECTED M&E ISSUES

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RESULTS ARE NOT ENOUGH!

The Case of Vitamin A Supplementation

# SELECTED M&E ISSUES

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## Diffusion of Vitamin A

11 field trials

6 meta analyses

# Key Events in Diffusion of Vitamin A

