

HIFA2015

Evaluation of HIFA2015: Executive Summary

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EXECUTIVE SUMMARY

HIFA2015 is a global campaign and knowledge network, launched in October 2006 to prevent avoidable death and suffering due to lack of healthcare information in developing countries. The goal of the campaign is that by 2015, every person worldwide will have access to an informed healthcare provider.

This evaluation aimed to review HIFA2015 progress, to identify successes to date and lessons learned, and to make recommendations for the future.

The evaluation focused on the three "foundation level" outcomes HIFA2015 aims to achieve as well as commenting on appropriateness and effectiveness of its parent organisation, Global Healthcare Information Network (GHI-Net) to support HIFA2015 future plans. Foundation outcomes are that HIFA2015 will build:

Outcome 1 - a connected critical mass of healthcare knowledge system change agents; Outcome 2 - better understanding of health information needs of healthcare providers and how to meet them; and Outcome 3 - healthcare knowledge system a top priority for improving global health.

KEY FINDINGS

1. **The evaluation found that HIFA2015 has become a successful, interactive, dynamic, global network involving a diverse range of healthcare providers from high and low income countries.** Innovations such as reader-focused moderation which support members participation have contributed to this. Members are able to identify tangible benefits they gain from their participation in the network. For instance, over 95% of members find HIFA2015 forum useful or extremely useful for networking and making contacts. Membership participation is highest from a small number of low income African countries.
2. **Members report tangible gains to their knowledge in understanding and addressing health information needs through participation in the forum.** For those in low-income countries this is particularly through access to people, skills, resources and experiences from elsewhere. They also value HIFA's role in overcoming their isolation and route to participation in global discussions. For those based in the north this is particularly through direct access to knowledge from community level in "real-time". Resource limitations have impeded further development of these activities but ambitious plans and sound cooperation with international agencies should see the launch of HIFA-Lumps, easy to access and digest nuggets of knowledge about how to understand and meet health information needs. These will be on the HIFA Knowledge Base later this year.
3. **HIFA2015 has taken up opportunities for advocacy and created some opportunities and outputs for this** e.g. the development of journal articles, recruitment of a network of over 117 supporting organizations and running and participating in relevant conferences. HIFA has established a strong, institutional base ready and willing to organise together to advocate for healthcare information provision. There was evidence of at least some cases of HIFA2015 advocacy and individuals drawing on learning from HIFA bringing about changes in local healthcare provision. However, the overall activities are currently behind schedule and would benefit from a more focused, specific strategy for the next phase.
4. **HIFA2015 is operating on a severely limited budget and has achieved considerably more than its budget might suggest.** It has so far punched above its weight and in doing so demonstrated it has a

successful model for running a knowledge sharing network. It has developed a less clear, specific campaign strategy maybe because the available resources have focused primarily on creating the forum or network. For HIFA2015 to manage a step change in terms of activity and impact it needs a significant increase in resources and also a more robust, specific 3-5 year plan with SMART objectives. A combination of building on its current success, harnessing the power of the HIFA2015 network for resources and joint activity, expanding HIFA2015 capacity, focusing its work and strategy for the medium term and incorporated some practical operational recommendations should enable HIFA2015 to make a real contribution to achieve increased access to health information for all, if not by 2015 then beyond. Below are some overall conclusions and key recommendations for HIFA in its next phase.

CONCLUSIONS

- **HIFA2015 Forum growth:** The network has achieved impressive numbers and members demonstrate considerable commitment and interest to participate in it. This is building on their judgment that they gain both tangible benefits such as knowledge, skills and understanding about health information needs and how to meet them. It also addresses less tangible issues such as isolation of people working on this issue both in geographical but also sometimes professional terms. However, it is an English-language based project which limits participation from some parts of the world.
- **Members sharing:** HIFA2015 successfully enables members to access perspectives from outside their country and profession including grassroots views, to participate in global discussions which otherwise they would not have access and to access and promote relevant resources.
- **Reader focused moderations strategy:** HIFA2015 has developed some highly successful approaches to enabling a participatory forum notably the reader-focused moderation.
- **Diversity of voices:** There are some key experiences and voices currently under-represented in the forum notably community health workers and Asian low income countries.
- **Country coordinators strategy:** Country coordinators have proved successful in some countries in recruiting large numbers of members.
- **Supporting organizations:** HIFA has a strong network of 117 supporting organisations.
- **Resources:** The potential of the HIFA2015 model has been demonstrated but there is a need for significant new resourcing to enable a step change for much greater impact. This will require more robust planning, budgeting, time management and other developments.
- **Strategic management:** HIFA has quite specific operational plans outlining key outputs for each strategic area each year. However, there is a gap in between the articulation of outputs and statement of goals or aspirations and a clearer articulation of the specific changes that HIFA2015 will achieve itself in the next 3-5 years as well as those to which it will contribute (and how).
- **Monitoring and Evaluation:** The plans for the future monitoring and evaluation of HIFA2015 are well underway and (resources allowing) these will be able to build on this mid-term evaluation process. This process will include both quantitative evaluation projects and qualitative, dynamic and holistic evaluation of how people experience HIFA2015, how they learn and change and how this brings about change in their environments.
- **Commitment:** HIFA2015 staff and many supporters demonstrate impressive commitment to HIFA2015.

HIFA2015 achieves an extraordinary level of activity on minimal resources from which many people around the world benefit. It has significantly punched above its weight. However its ultimate success will depend on external funders providing additional funding, and of course continued effective use of these, if it is to achieve its ambitious plans.

RECOMMENDATIONS

Strategic recommendations

1. ***Ambitious but realistic strategy plans*** – It is recommended that HIFA2015 establish clear SMART goals for 2015. Describe the changes HIFA2015 will achieve as well as the outputs it will produce. Establish clear priorities and focus.
2. ***Harness the power of the network*** – HIFA2015 rests on an impressive web of members, supporting organisations, country coordinators and others. However it is recommended that each of these groups could do more - eg in recruitment of members, providing financial and other support to HIFA2015, building knowledge and undertaking advocacy. Develop and articulate a plan for their role in each activity.

Membership Recommendations

3. ***Promote diversity of voices*** – There are some key groups (geographical and of different types of healthcare provider) who are under-represented in HIFA2015 online discussions e.g. community health workers. Therefore it is recommended that HIFA2015 continue efforts to recruit more members from these groups and focus efforts to support their active participation in the forum.
4. ***Recruitment strategy*** – It is recommended that HIFA2015 increase membership and participation of low income countries and community health workers who are not participating at high rates now, noticeable from Asia.
5. ***Contact and content for members*** – It is recommended that HIFA2015 further develop and promote tools such as a map and members list to enable members to contact each other outside of the forum and to identify the subject matter of messages they would like to receive.

Knowledge Sharing Recommendations

6. ***Accelerate the knowledge base developments*** – It is recommended that HIFA2015 press ahead with the HIFA-Lumps development and promotion with urgency. Monitor the effectiveness or otherwise of 'HIFA-Lumps' as a method to capture and promote knowledge in an accessible way.
7. ***Increase and promote community level content*** – It is recommended that HIFA2015 prioritise knowledge from grassroots/community based initiatives in HIFA-Lumps first phase. Encourage community health workers and organisations working directly with them to participate more actively in online discussions.

Advocacy Recommendations

8. ***Advocacy strategy*** – It is recommended that HIFA2015 develop a 3-5 year strategy with SMART (specific, measurable, appropriate, realistic, time bound) aims for this time period and a clear approach for how to achieve these.

9. **Develop advocacy outputs** – It is recommended that HIFA2015 develop a set of case studies to highlight the costs of healthcare information needs not being understood or met as well as the benefits (and costs) of meeting these needs.
10. **New media learning** – It is recommended that HIFA2015 identify three decentralised global campaigns and initiatives that have achieved success at the global and local level to learn about how they designed and implemented their strategy.

Further Recommendations

11. **Resources** – It is recommended that HIFA2015 develop an operational plan and budget for HIFA based on known income and a realistic projection of anticipated income if some fund-raising is successful. Prioritise the recruitment of additional fund-raising and moderator skills to HIFA2015. Simplify the governance structure to reduce the number of groups and committees. Develop a communication plan for HIFA considering use of ICT, marketing and advocacy.
12. **Funding** – It is recommended that HIFA2015 develop a system for supporting organisations to contribute an annual fee to HIFA for membership. This could be a sliding scale to avoid discouraging wanted members. Consider levels of £1000 upwards. Establish a commercially oriented cost basis for services such as moderation training, mentoring, hosting forums, maybe even promotion of materials.
13. **Monitoring and Evaluation** – It is recommended that HIFA2015 continue to develop the current M&E framework. This will continue to build on the outcomes model being developed (DoView Results Roadmap). Once more specific SMART outcomes for the next 3-5 years are articulated the monitoring and evaluation framework can be further developed to assess these and also incorporate further qualitative processes.