

Applying outcome mapping to plan, monitor and evaluate policy influence; learning from the SHARE research consortium

LEARNING PAPER

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SHARE research consortium team.

1. Introduction

Outcome mapping (OM) is an iterative approach to project planning, monitoring and evaluation which seeks to identify, engage and work with the key stakeholders who are likely to help foster transformative change (Earl, Carden and Smutylo 2001). It has been used across a wide range of sectors aiming to achieve change in complex social or policy environments. OM focuses on contribution to change and is particularly relevant for complex programmes across multiple contexts.

The Sanitation and Hygiene Applied Research for Equity (SHARE) consortium has applied OM as an approach to plan, monitor and evaluate its research into use work across four sub-Saharan African countries (Kenya, Malawi, Tanzania and Zambia). This learning report documents SHARE's OM experience and presents key areas of learning; resourcing OM, context and culture, analysing OM data, adaptive approaches and ways of working. It also makes recommendations for other implementers using OM or OM principles in programmes.

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2. Context

Evidence-informed policy making

Using research findings to inform policy change is a complex process that can be lengthy and uncertain. Peer-reviewed journal papers, which take time to produce and publish, are often considered the most robust form of evidence. Tailored outputs to meet the needs of key stakeholders such as policy briefs (often based on peer-reviewed research) are also essential resources for decision making (Talbot and Talbot 2014). Adding to this complexity, policy making is not always based on rigorous research but may be based on local anecdotal evidence that is valued by policy makers and accepted by implementers (Nabyonga-Orem and Mijumbi 2015).

A range of actors or groups may be involved in the policy making process - including but not limited to researchers, funders, civil servants, politicians and civil society organisations. The process of policy making usually involves several stages, from identifying the problem through to development, implementation and evaluation (Sutcliffe and Court 2005). Throughout this process, windows of opportunity (Kingdon 1984) may arise, providing opportune moments for evidence to inform the policy making process. These moments come about when governments have the political will to act, when evidence and proposed solutions are offered and when the political climate is right (Bélend and Howlett 2016).

Researchers may engage policy makers through a number of different channels; from formal participation through established mechanisms such as technical working groups or joint sector review processes, to more informal contributions through meetings and leveraging interpersonal relationships.

However, windows of opportunity can be infrequent and timing remains a critical issue affecting the success of evidence uptake. Challenges include researchers and policy makers operating on different timelines - from the slow burn of research projects to fast-paced policy environments. Individual relationships between researchers and policy makers can also affect this success (Gautier and Ridde 2017). One systematic review noted the absence of personal contact with researchers as a common constraint for policy makers, in addition to lack of timeliness or relevance of research (Innvaer et al 2002). There are also challenges which are specific to low and middle income countries - these may include limited research communication resource or capacity within academic institutions and limited access to evidence sources such as journals for policymakers (INASP 2018).

In summary, policy change takes place in a complex system over many years with multiple stakeholders using a range of different influencing approaches. Influencing policy change is a long-term endeavour that may bear fruit years after research projects have ended.

Monitoring and evaluation methods in research consortia

The nature of policy development creates challenges for monitoring and evaluating policy influence; these include lengthy timelines, complexity and attribution of causality. In this context, pathways of change cannot always be predicted in advance using linear representations of change such as logical frameworks. It is also challenging to attribute change to any single influence and ‘impact’ is usually defined broadly - for example the ACCESS programme defines impact as ‘changed behaviours or relations among actors involved in any given system directly influenced by a programme’ (Shatfan and Arifin 2014: 14).

A range of newer monitoring and evaluation (M&E) approaches seek to understand how actors have contributed to change in collaboration with others and in relation to wider contextual shifts (such as political, economic or social change). These approaches include outcome mapping, qualitative comparative analysis, process tracing and contribution analysis.

Outcome mapping is a participatory approach for planning, monitoring and evaluation. Developed by the International Development Research Centre (IDRC), OM focuses on identifying, engaging and influencing key stakeholders to change their behaviour (IDRC: 2001). Outcome mapping has increasingly been acknowledged as relevant for policy influencing and advocacy and it works best in a ‘complex, multi-stakeholder environment where results are unlikely to be achieved in a linear fashion’ (Dyer: 2012).

OM provides a set of practical tools that teams can use to identify the change they want to influence and then work collaboratively with others to contribute towards this change. It has twelve defined stages under three broad categories of design, monitoring and evaluation. The Overseas Development Institute (ODI) have tailored and adapted OM to develop the three-stage Rapid Outcome Mapping Approach (ROMA) specifically to understand, engage with and influence policy (ODI 2014).

3. Outcome mapping in SHARE

SHARE’s approach

SHARE is an eight year programme which built OM into an outcome level logframe indicator for the final three years of the programme, monitoring the % of progress markers met over this time period. Like others, working with a supportive and flexible donor such as DFID helped SHARE to apply and adapt OM through the programme cycle (Dyer: 2012).

SHARE’s approach was informed by ROMA (ODI 2014). SHARE has five implementing partners, leading on research projects in Kenya, Malawi, Tanzania and Zambia. Seven target groups of boundary partners were suggested for each implementing partner to focus on: national government, local government, international agencies,



Outcome mapping workshop in Bangkok

non-governmental organisations, donors, national research institutes and research participants. Each implementing partner used these categories to map and identify specific boundary partners in their setting.

After stakeholder mapping, partners developed outcome challenges to specify the change they would like to see in boundary partner behaviours. They developed progress markers to track change and planned research uptake activities to influence change. Progress markers used the graduated approach of defining ‘expect to see’ changes through initial engagement, ‘like to see’ changes that show active engagement and ‘love to see’ changes if boundary partners take ownership of change themselves. Partners monitored change on a quarterly basis. Project reports were analysed and aggregated to understand change at the programmatic level and to inform logframe reporting.

Definitions of key terminology, as applied by SHARE

Implementing partners: This term refers to the five implementing partners running projects under the SHARE programme. Each partner carried out the OM design process for their project.

Boundary partners: We define boundary partners as individuals or organisations with whom the project interacts directly to effect change and with whom the project can anticipate some opportunities for influence (Earl et al 2001). While SHARE introduced the concept of boundary partners, internally we usually used the term ‘stakeholders’ to describe boundary partners.

Outcome challenge: Outcome challenges are statements describing the highest possible level of change that we could see from a boundary partner within the project timeframe. These statements were ambitious but also realistic as to what type of change was really possible in a three year time frame.

Progress markers: Progress markers are the incremental steps towards the change defined in our outcome challenges, with ‘love to see’ progress markers being closely aligned with the vision described in each outcome challenge. They describe observable changes in behaviour, attitudes, relationships or practices (Earl et al 2001).

Research into use: Research into use is defined as “the uptake of research which contributes to a change in policy or practice” (CARIAA: 2017). SHARE’s Theory of Change seeks to facilitate research into use through translation/communication of research, convening key stakeholders, synthesising knowledge and building capacity.

The case study below provides an insight into the kind of work that implementing partners do, how they used OM to plan and implement as well as some emerging outcomes.

Case study: Influencing the county government to consider WASH and food hygiene in Kenya

Great Lakes University Kisumu (GLUK) are delivering a WASH and food hygiene intervention in Kenya. They aimed to influence the county government to acknowledge and mention food hygiene in their WASH policies and plans. GLUK planned to influence the county government through inviting officials to their research symposiums and providing regular updates. However over time, they adapted their strategy to focus more on attending existing forums such as technical working groups, and targeted key county government individuals to initially engage them.

As a result of this intense engagement at the county level, in 2016 GLUK were invited to lead the county WASH Policy and Research Technical Working Group (TWG). This group provided GLUK with a platform to regularly engage the county government. County officials discussed research implications at TWG meetings, as well as inviting GLUK in 2018 to join a meeting to inform the draft county sanitation policy. GLUK was therefore able to ensure that hygiene was defined and included in the draft policy.

SHARE's experience

SHARE's implementing partners consist of four research institutions and one NGO, all of whom were undertaking OM for the first time. Each partner approached the design process differently - some organising face to face workshops with boundary partners while others worked with internal teams. It took between 3 - 9 months to develop a finalised OM document. Remote and in-person support was provided by the SHARE programme team during this design phase. Additionally, a workshop on OM principles was delivered to all implementing partners at an annual meeting. Ongoing support was provided by SHARE programme staff around implementing OM, Research into Use (RIU) strategies and stakeholder engagement approaches.

Annual reflection workshops took place with each implementing partner to review progress with different boundary partners, identify challenges and make changes to progress markers where necessary. The workshops supported partners to plan and revise RIU activities to better influence their boundary partners and contribute to change. They also provided an opportunity for clarification and guidance around aspects of OM.

Figure 1: Outcome mapping process in SHARE



4. What we learnt

SHARE has learnt a lot from developing and implementing outcome mapping, particularly through the challenges we faced. While change processes can be uncomfortable, we agree that ‘often that discomfort is helpful - if it’s too easy that may mean it’s too shallow’ (Abercrombie, Boswell and Thomasoo: 2018).

This section is based on feedback and discussions from programme and project level workshops, training sessions, reports and learning events between 2016 - 2018. It includes input from implementing partners and programme staff. We’ve organised what we learnt into five thematic areas and have embedded recommendations throughout. These recommendations are targeted at implementers applying OM or using OM principles in programmes. While they would be most useful to consider during programme design or inception, recommendations could also be implemented to varying degrees throughout the programme cycle.

4.1 Resourcing outcome mapping

The outcome mapping design process

The process of developing OM documents was both time and human resource intensive and took longer than originally anticipated. Specialist technical support was required to embed OM across the programme - reviewing materials, supporting partners, providing guidance and facilitating workshops became a significant component of the M&E Officer’s role. This aligns with experience elsewhere that OM is more resource intensive than traditional M&E approaches and requires significant investment of time as well as adequate budgeting (Dyer 2012, Taye, Swaans and Hendrickx 2014, Blundo-Canto et al 2017). For SHARE, this initial investment of time, energy and resource helped build a strong foundation for using OM across the programme.

SHARE collaborated across the whole consortium to facilitate mutual learning and develop skills. We found that implementing partners who know their context well are best placed to develop realistic outcome mapping documents and research into use plans. However research uptake experience, stakeholder engagement skills, communications expertise and understanding of OM principles were also needed.

Recommendation 1: Develop the right balance of skills across your programme

SHARE partners identified or recruited staff with the skills to establish rapport with stakeholders and the ability to identify and seize opportunities for influencing. One partner, Mwanza Intervention Trials Unit (MITU), invested in a full time Research into Use Coordinator to lead on this workstream. We recommend considering existing skills and investing in building capacity/recruiting staff with the right skills if needed.

It’s a bit of an unusual activity given where we are coming from as a research organisation but I think it’s one that is well worth doing. I think our final outcome mapping document is quite simple and it’s something that we need to share with other research institutions.

- Dr Roma Chilengi, CIDRZ

Monitoring outcome mapping

Ongoing planning and monitoring also required investment of time and human resources on a regular basis, as well as building timely workshops into busy projects. OM was a new approach for all involved and lacked commonalities with results-based management approaches that the programme team were more familiar with such as logframes and SMART (specific, measurable, achievable, realistic, timebound) indicators.

Recommendation 2: Provide sufficient resources for monitoring and evaluation

SHARE employed a full time M&E Officer who was trained in OM; a large component of this role was supporting partners to lead the OM process and facilitating workshops. Dedicated M&E resource was necessary to provide continuous support to partners, manage data and facilitate programmatic learning. We recommend anticipating and budgeting for M&E staff in order to successfully introduce OM to organisations.

4.2 Considering context and culture

Tailoring progress markers and plans to context

Each partner tailored their OM plan to their individual context and pre-existing relationships with boundary partners. This was essential to ensure the relevance of approaches. We had initially thought that implementing partners would have similar progress markers (and strategies) for similar boundary partners, but contexts differed more than anticipated. For example, while senior district officials attending research events was significant in Malawi, in Kenya it was more appropriate to engage these individuals using district forums.

Recommendation 3: Context matters for the design of progress markers

SHARE's outcome maps varied in terms of what kind of change was 'love to see' or 'like to see' for some boundary partners, particularly for government stakeholders who operate differently according to levels of decentralisation. For example, in some contexts the entry point to government is at district level, whereas elsewhere direct interaction with national ministries is more common. We recommend acknowledging contextual differences when designing progress markers to ensure relevance - as well as considering how this will impact the aggregation of OM results.

Process and ownership over product

Outcome mapping required a different perspective that was less project focused and more systems focused. The process of participatory workshops was easily transferrable to our NGO partner, WaterAid, who had a history of using these approaches. Generally though, OM presented a different way of working for implementing partners and it took time to develop familiarity and confidence. This learning curve to integrate OM aligns with the experience of others who have introduced OM to organisations (Deprez 2009, AcT 2014, Taye et al 2014 and Shatifan and Arifin 2014).

SHARE acknowledges that the OM documents produced may not be ‘perfect’ products of outcome mapping as a methodology - it was most important that the process was owned by implementing partners, with SHARE programme staff playing a facilitative role.

Recommendation 4: Invest time in the design process

In SHARE, the design process took longer than anticipated - but this was worthwhile in the longer term. The result was that OM design documents were owned by implementing teams, who increased their confidence around the approach. Implementing teams began using OM terminology as a shared language - for example debating whether change was really a ‘love to see’ or just a ‘like to see’. We recommend dedicating time and resource to developing and finalising OM design documents - the amount of time required depends on each team and their needs.

Outcome mapping terminology and concepts

Introducing OM to academic implementing partners who specialise in health research raised some challenges around terminology. “Outcome” has a specific meaning within health research - referring to a pre-defined robust, quantifiable and objectively verifiable measure as to whether a health impact is attributable to a specific intervention. This differs from how OM defines outcomes broadly “as changes in the behaviour, relationships, activities, or actions of the people, groups, and organizations with whom a program works directly” (Earl et al 2001).

Outcome mapping conceptualises change as complex, continuous and non-linear - this is a different way of thinking about the world than the positivist scientific approaches which underpin empirical research methods. Some implementing partners were initially cautious that progress markers were not SMART or aligned with results based management approaches. There was some concern about later adapting or changing progress markers - perhaps due to working in a setting where research outcomes cannot be changed partway through a project. It was therefore important to contextualise that OM does not focus on direct attribution but on contribution to change.

Recommendation 5: Know your audience and adapt your terminology

A greater awareness of how terminology such as ‘outcomes’ were already used by partner organisations would have helped SHARE to more effectively translate OM principles. SHARE did not include the vision and mission component of OM but later discovered that it is common practice for organisations in East and Southern Africa to define their vision and mission. This could have been a useful starting point to link OM up with what implementing partners already did. We recommend understanding current practices and using these to inform how OM is introduced.

4.3 Managing and analysing OM data

Outcome mapping reporting

OM monitoring and reporting has been done in different ways by OM practitioners and there is no “one size fits all” solution. SHARE used simple word processor templates modelled upon outcome/strategy journals, which were iteratively improved on the basis of feedback (Earl et al 2001). These templates were straightforward but lengthy to complete due to the number of progress markers (see Figure 1). Resources were needed from each implementing partner to monitor progress and this took more time for some partners depending on the structure of teams. Significant resource was also required at the programme level to review, check, analyse, aggregate and manage data.

Quantifying qualitative data

The necessity to aggregate data for quantitative logframe reporting led SHARE to use a weighted approach to quantify progress markers (i.e. ‘love to see’ indicators count for more than expect to see and ‘like to see’). Similar to CDKN and AcT’s experiences with OM, this quantitative approach provided a simple means of donor accountability (Dyer 2012, Hamza-Goodacre, Jefford and Simister 2013). While quantitative data was useful for tracking overall programme progress, it did not answer complex questions about what kind of change is happening and its significance. Qualitative data was therefore still essential for the SHARE programme.

Recommendation 6: Use mixed methods

It was useful to be able to quantify and track overall programme progress through linking OM progress markers to an aggregated logframe indicator. We recommend combining OM with quantitative methods as a way to satisfy accountability requirements, while also creating space and flexibility for learning from qualitative data.

4.4 Applying iterative and adaptive approaches

Using outcome mapping for adaptive management

OM monitoring can have multiple purposes including accountability, developing change narratives and adaptive management (Ambrose, Pasanen and Ehode: 2016). For SHARE, OM was particularly relevant for adaptive management. OM is a flexible tool which gives implementing partners space to react to opportunities and to change their approach if new opportunities or challenges emerge. One partner described their OM plans as a ‘living document’ reflecting lessons learnt throughout the project. Like other OM practitioners, SHARE applied an iterative process of adapting progress markers based on reality and removing those that turn out to be irrelevant or an inaccurate representation of how change happens (Hamza-Goodacre et al 2013, Shatifan and Arifin 2014).

Capturing unintended change

Others have found that the flexibility of OM can capture unintended positive change and this has also been true for SHARE (Shatifan and Arifin 2014, Taye et al 2014). As per the case study, Great Lakes University Kisumu (GLUK) was asked to lead the newly established county policy and research group in Kisumu - which led to further opportunities for influencing at county level. The Centre for Infectious Disease Research in Zambia (CIDRZ) participated in co-hosting a UK Parliamentary visit which contributed towards stronger donor relationships and leveraging further funding. While these possible achievements were not initially predicted in OM plans, SHARE was able to adapt OM documents to include these ‘love to see’ achievements. The documentation of how these achievements came about also provides a useful starting point for future strategic planning.

4.5 Facilitating new ways of working

Early stakeholder engagement

Others have found that the stakeholder mapping element of OM is particularly useful for facilitating early engagement (Macdonald and Miner 2014, Shatifan and Arifin 2014). Stakeholder mapping was a key element of the OM process for SHARE; it enabled partners to identify a broad set of boundary partners early on. Implementing partners were able to identify mutual interests with these boundary partners and promote the ways their project aligned with these agendas.

For example, the Malawi Epidemiology and Intervention Research Unit (MEIRU) /University of Malawi Polytechnic noted that OM helped formalise stakeholder engagement which was previously done informally, allowing for better planning. CIDRZ found that stakeholder mapping led to improved communication - communicating their randomised controlled trial to boundary partners helped avoid other projects impacting the trial. WaterAid

mapped boundary partners who they then invited to help develop OM plans at a stakeholder workshop in Tanzania. They reflected that this participatory approach helped to engage and build a sense of ownership amongst boundary partners.

Creating space for programmatic learning

Similarly to other research programmes, outcome mapping created more space for learning and reflection within SHARE (Shatifan and Arifin 2014). One implementing partner reflected that OM helped facilitate learning at the organisational level and led to mutual understanding within their project team. While formal introductions of OM concepts/theory were provided, it was more valuable for implementing partners to share their experience with other implementers. Project presentations at a programme workshop enabled an exchange of ideas and an increased understanding of different approaches.

Recommendation 7: Share learning across the programme

SHARE found it extremely valuable to share learning from projects across the programme including similarities and differences between implementing partner experiences. We recommend creating opportunities for project leads to share experience, stories, successes, challenges and lessons with others and to compare strategic approaches.

5. Conclusion

This report captures key areas of learning and recommendations from the SHARE programme's application of outcome mapping. We hope it serves as a useful reference for others using OM for research into use work and especially for academic organisations or research programmes.

To better elucidate how change happens, SHARE intends to publish a report analysing OM qualitative data, mapping pathways of change and identifying which strategies have worked for research into use. The SHARE programme closes at the end of 2018, and further progress against our logframe and OM plans will be captured in our final report.

After the closure of SHARE, we hope that our implementing partners will continue to apply principles from outcome mapping in their future work as well as use the strong skills built in relation to stakeholder engagement and policy influencing.

WaterAid gave good pointers on how to engage government starting at the county level rather than the national level and how to find and focus on interested people.

We realised we had to go to the county office rather than invite them to avoid issues around per diems. It was great to get support from an advocacy organisation that has experience doing this kind of work.

- Dr Jane Mumma, GLUK

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