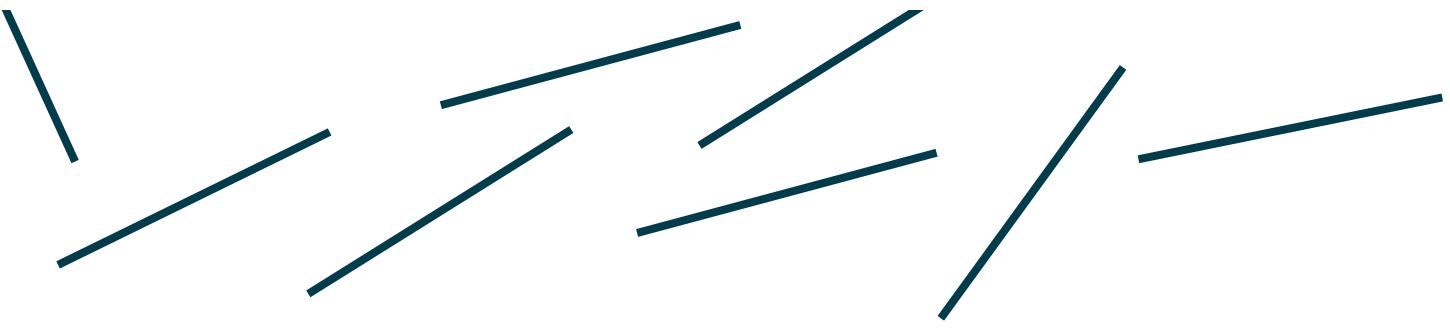




SUCCESS STORIES:

Inspiring case studies of
continuous improvement





RFM CASE STUDIES

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Case study 1: Delivering Emergency Aid in Liberia

Problem and context:

In July 2014, Liberia faced an Ebola epidemic. By March 2016 – two years since the first confirmed case – around 10,700 Liberians had contracted the disease, leaving 4,800 dead. A lack of localized awareness and adequate information-sharing prevented the crisis from being contained.

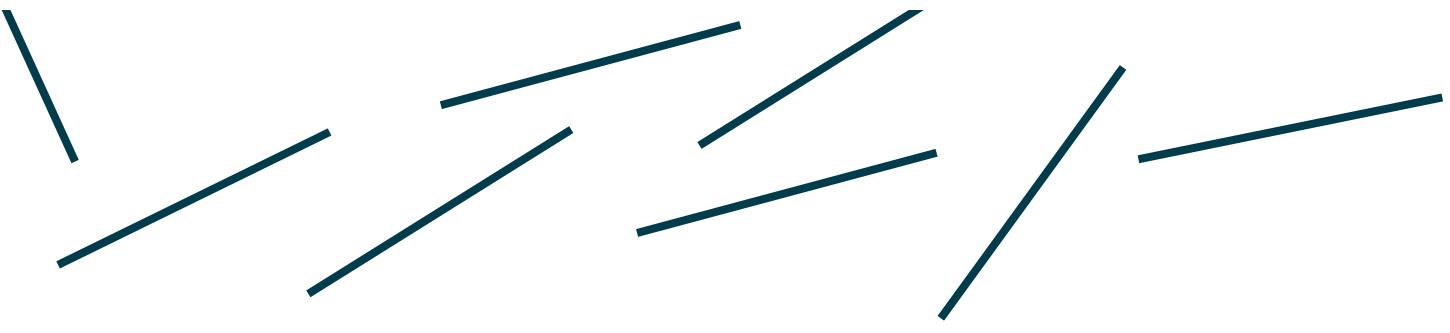
Program approach:

Operating at the peak of the outbreak in September 2014, Mercy Corps decided to launch an emergency social mobilization program – Ebola Community Action Platform (ECAP). This was designed to combat the lack of awareness and information about Ebola at the local level.

Mercy Corps recognized that community-based organizations were most trusted by local populations and so best-placed to effectively spread messages about Ebola prevention. Therefore, the ECAP program sub-granted to 77 grassroots organizations, who acted as program implementers. The sub-grants were flexible and allowed each partner to implement in a way they saw fit.

Alongside this, ECAP created an online technology-based monitoring and learning platform. They sent 1,000 mobile phones to their implementing partners, allowing them to upload their reports and insights on community attitudes to the platform. This data fed into an online dashboard, which was used as the basis for training workshops with sub-grantees, enabling them to iterate and improve further. The workshops also provided space for partners to share their own experiences. Many kept in touch after the workshops (via WhatsApp and by phone) to source ideas and advice from one another.

In one instance, a sub-grantee struggled to access an area due to informal, political dynamics. Through an ECAP Lessons Learned workshop, the partner's leaders had met another ECAP partner with strong ties to the area; they called on this other partner to facilitate an introduction. In this way, they successfully gained access to the restricted areas.



How did the program harness responsive feedback?

Partner learning and adaptation was supported through the online platform. Mercy Corps' training workshops encouraged light-touch, informal monitoring through phone calls, tests, social media, daily meetings and field observations, which empowered local decision makers to take quick and responsive pivoting decisions.

Mercy Corps encouraged partners on the ground to take decisions on quick, local changes based on field observations. Local partners moved mobilizers around to cover geographic gaps in coverage or border hot spots; changed mobilization schedules to reach farming households when families would be home; switched from repetitive door-to-door visits to more creative community engagement, like drama and puppetry; and shifted the focus of messages to address relevant issues (such as stigma) when Ebola cases waned and communities demonstrated knowledge about transmission.

Outcomes:

The program reached 2.4 million people in nine months.



Key learnings:

1. Balance accountability and flexibility:

Mercy Corps placed little requirements on partners for grant applications, and this allowed each partner to operate in a way that drew on their local strengths. Using a Fixed Obligation Grant/Fixed Amount Award funding mechanism reduced the burden of screening and financial reporting for sub-grantees.

At the same time, the publicly available dashboard reassured donors – the OFDA (US Office of Foreign Disaster Assistance) and Population Services International (PSI) – that the program was achieving its outcomes and remained accountable. Building donor confidence in this way allowed ECAP and its partners the space to iterate programs.

2. Prioritize user-friendliness over technological ambitions

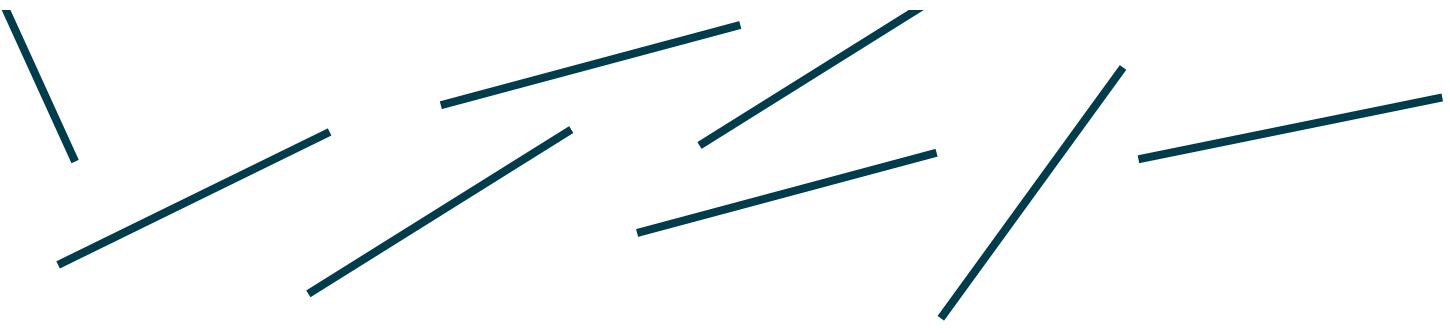
Ensure that the technological ambitions of programs are realistic within given timeframes, and do not place too much demand on program staff. In this project, setting up a real-time data system with functional feedback loops at national scale required more time and effort than was realistic for a short-term emergency program. The database was online after only six weeks but fixing data quality issues on activity reports took another two to three months.

This technological capacity is useless if implementing partners are unaware of how to best use it or are unable to access it due to network penetration problems. A more productive approach is to establish a very basic technology platform to share information, and focus efforts on ensuring that implementing partners can use it.

3. Establish and prepare adaptable procedures

Program officers should ensure that, when staff move roles, communication with partners is not disrupted. The adaptive and iterative approach, as well as the fast-paced nature of the Ebola crisis meant that the Mercy Corps staff regularly moved positions. At times this would create frustration and confusion for partners, who received inconsistent and late communication about program activities. To combat similar problems, clear on-boarding and hand-over protocols should be established, and these should emphasize the importance of communications with partners. Responsibilities should be clearly assigned to minimize confusion and overlap across staff.

Similarly, pre-preparing templates for a variety of basic compliance and procurement forms may help ease burdens on operational and finance teams. An example of such a form is a preferred supplier agreement for basic supplies like paper. Preparing these will ease the burden on operational and finance staff, which will prevent knock-on delays to the program.



Case study 2: Creating Jobs in Tunisia

Problem and context:

Tunisian economic development is impaired by structural inefficiencies, a poor allocation of resources and low productivity. Tunisia faces a 'youth bulge', with unemployment levels for college graduates at 50%. This, together with the persistence of corruption and cronyism, creates a sense of widespread dissatisfaction among the youth population.

Program approach:

The USAID Business Reform & Competitiveness Project (BRPC), implemented 2014–2017 by Pragma Corporation, aimed to create jobs for unemployed youths by working with Small and Medium Enterprises (SMEs) in sectors of the economy showing high potential.

Initially, the program offered formally structured pre-employment training programs targeted at school-leavers. However, this did not deliver the expected results.

Through feedback from SMEs, the program approach shifted to address the companies' immediate self-identified needs and constraints. BRPC activity now began to focus on providing technical assistance to enterprises to help them access market demand. By meeting this demand, it was hoped that the enterprises would grow, and therefore need to hire more employees. By aligning the project approach closely with enterprise partner goals, the program ran very effectively.

How did the program harness responsive feedback?

At the outset, key stakeholders were involved in designing the program. A cost per job indicator was triangulated with the initial 100 enterprises, which allowed a threshold to be agreed. Similarly, the needs of the partner firm, how they would be addressed and the expected results were all agreed upon. This clear collaboration from the outset ensured high buy-in from partners. Additionally, these agreements provided common benchmarks against which to measure progress and recognize early flaws.

A dedicated project M&E team helped design proper tracking approaches and tracked performance in real-time. This M&E team was also responsible for managing information flows throughout the project and coordinating with other teams such as the job creation team. This ensured that relevant information was acted upon quickly, allowing for quick iteration. It also meant that any opportunity for components to work together was capitalized on.



An enterprise information and experiential database was created from working with over 250 enterprises, and this was valuable in prioritizing curriculum reform within educational institutions.

Outcomes:

During the first two years, BRCP generated 10,000 jobs (more than doubling initial targets) at the cost of \$1000/job. This equated to 10% of net new jobs within the Tunisian economy. BRCP also established a network of 32 Career Development Centers and facilitated the approval of 12 market-relevant courses for tertiary education.

Key learnings:

1. Generate positive momentum by collaborating with partners from the outset

Designing the project in collaboration with partners ensured there was early buy-in and encouraged partners to support the iterative process. In this process, key benchmarks, thresholds and outcomes were agreed. This ensured that stakeholders understood the iterative process and were more likely to remain committed throughout the program in the face of adaptation. Early collaboration also established a precedent of clear communication and ensured all stakeholders were aligned on approaches.

Similarly, articulating key expectations to stakeholders ensured that there are no unexpected delays to programs. In this case, the program designed partnership agreements (PA) for stakeholders. M&E teams were central in designing PAs to ensure both traceability as well as compliance.

2. Appreciate the bigger picture and be creative in reaching goals

The program initially took a direct approach towards the end-goal of boosting employment, by matching school-leavers to job opportunities. This proved ineffective in an economic environment plagued by uncertainty due to ongoing political and security issues. Later, the approach shifted to providing technical assistance in order to address the self-identified demands of the partner enterprises. Although this was a more indirect, long-term approach to the programmer's overall goals, it helped ensure that local businesses were able to operate and eventually create jobs in the face of major constraining factors.



3. Compile and disseminate learnings to facilitate future iterations

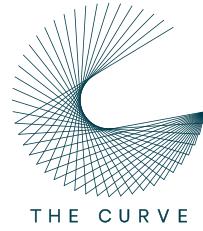
Create a central database, compiling key learnings and insights. This should be accessible for all teams and updated throughout the project cycle. In this case, a database was created which compiled the information and learnings made when working with over 250 enterprises. This was valuable to teams when identifying priorities in later iterations of the program, especially when program-staff changed.

4. Seek out local skills and knowledge

Dual citizens, local residents and those with vast in-country experience are more adept at facilitating, brokering and negotiating with local enterprises. If the program requires any facilitators, ideally try to ensure that these people have experience within the country.

5. Include M&E teams in management

Including M&E teams within management allows iteration and adaptation decisions to be taken more quickly and confidently. It also ensures that management are aware of the real-time progress of the project.



Case study 3: Pivoting Education Projects in Sierra Leone

Problem and context:

The 'LWOL' education project, managed by the International Rescue Committee (IRC), aimed to improve in-school learning opportunities for girls and boys in the Kenema district in south-eastern Sierra Leone. It was supported with an annual budget of \$600,000 from a private US-based foundation. When the May 2014 Ebola outbreak led to school-closures, it made the project impossible to implement in its original form.

Program approach:

After schools closed, LWOL used field staff's observations to conduct an informal risk assessment of the situation. Based on field staff's suggestions, they developed an alternative model for education focused on small group learning. The project provided small learning groups with pencils, papers, and books and unsalaried community teachers with stipends to enable this adaptation. These decisions were made by the field-based project manager, in consultation with the senior education manager and education coordinator. Putting this model into practice required sensitization and preparation from July through September.

How did the program harness responsive feedback?

IRC valued the observations and feedback of field staff and implementers. This feedback was complemented by a short and direct decision-making chain: the project manager, in consultation with the senior education manager and education coordinator, had the authority to make decisions about project changes and could discuss issues directly with the donor. For example, in response to community feedback, field staff recommended that donor funds be redirected for school maintenance and refurbishment. Despite not normally supporting infrastructure, this was approved by the donor.

To optimize pivoting, the donor supported a piloting approach. For example, the initial design of LWOL included adult literacy classes. However, it was found that adult literacy classes were not having the expected impact on children's reading outcomes. The LWOL team decided to scale down adult literacy classes and instead invested in piloting other approaches, such as Teacher Learning Circles.



Outcomes:

Education activities began in October, only one month after the start of the normal school year. Though LWOL itself was a relatively small project, it directly inspired the approximately \$23 million DFID-funded “Improving School in Sierra Leone” program that supports 450 schools across eight districts. This demonstrates the value of small but adaptive projects that can inform future delivery at scale.

In contrast, another education project running concurrently with the same implementing partner and similar aims had a convoluted consortium and rigid donor requirements. It suspended activities for nearly nine months at the peak of the Ebola crisis, before finally re-launching with a new approach that quickly became irrelevant.



Key learnings:

1. Empower field staff to make iterative decisions

Change within LWOL often came from field staff suggestions. Management should take active steps to empower and mentor staff, which will create an environment where field staff have great ownership of the project. Field teams should critically appraise each project's progress toward goals, identify problems, and craft solutions in consultation with community stakeholders at weekly and monthly reflection meetings. These should be established by the field-based project manager to encourage staff to discuss successes, challenges, and ways to mitigate problems.

2. Streamline decision-making chains

In this case, a short, transparent and direct decision-making chain allowed timely adaptation and iteration. Future projects should streamline decision-making chains: budget re-alignment and grant re-approvals will move more quickly if there is a lack of intermediaries between program managers and donors.

3. Build trusted networks through regular communication

The relationship established between project managers and the donor prior to the Ebola outbreak supported increased adaptability once the outbreak began. These relationships should be established and sustained through regular informal communication between the project manager, education coordinator, and donor. This will allow each party to share networks and expertise to collaboratively solve problems. In this case, the donor to connect field staff with leading thinkers in education and development, to build on their expertise and improve their responses.

4. Be flexible in terms of donor reporting requirements

From the outset, this project was designed to be iterative, with built-in annual reviews, budget revisions, and opportunities for adaptation. Payment by Results and Payment by Activity Milestones give limited space to explore whether program design assumptions and ToC are correct. This disincentivizes adaptation because it takes a long length of time to secure approval for changes to milestones. In this case, the donor also provided bridge funding during the suspension of normal activities from July to September 2014, allowing the IRC to scope out new activities.



Case study 4: Improving Governance in Nigeria

Problem and context:

SAVI (State Accountability and Voice Initiative) is a £34.7 million demand-side governance program managed by Palladium in partnership with Itad. It started in 2008, works in ten Nigerian States, and is funded by DFID Nigeria. SAVI promotes citizen engagement in governance reform.

Program approach:

SAVI supports civil society groups, media personnel and organizations, and State House of Assembly (SHoA) staff and politicians to represent citizens' interests and promote their voice and concerns.

Instead of providing grant funds to CSOs (the usual way of supporting demand-side governance), SAVI works through in-house state teams who facilitate locally led change in their own states. They support partners to think and work politically, work adaptively and learn by doing – through brokering working relationships, and providing behind-the-scenes mentoring, capacity building and seed funding support.

How did the program harness responsive feedback?

In-house state teams are the delivery arm of SAVI, but they do not directly engage in advocacy and influencing activities themselves. It is SAVI partners who are directly involved in influencing change in their state and it is partners' activities that lead to results.

The role of SAVI staff is to add value to partners' ongoing actions by providing them with strategic guidance and mentoring. This is done by encouraging partners to use feedback or 'learning' loops – analyzing, developing, learning, actioning, reflecting and planning the next stage.

Outcomes:

In response to citizen demands, the Yobe SHoA Committee on Health raised the health allocation of the overall state budget from 8 per cent in 2012 to 10.7 per cent in 2013. Similarly, in response to citizen demand, the Lagos State Governor signed landmark legislation protecting the rights of people living with disabilities (PWD) into law in 2012 and worked to make sure the national election in 2015 was fully accessible to PWDs.



Off the back of the success of SAVI, DFID scaled up the project into a new program, the Engaged Citizens Pillar (ECP). ECP is managed by the same service provider as SAVI, Palladium, and has the same core management and technical team.

Key learnings:

1. Incentivize adaptative planning through flexible donor requirements

Innovative applications of payment by results include, for example, hybrid contracts with only a portion tied to achievement of milestones, annual breaks in contracts allowing for re-negotiation of terms and conditions and different categories of milestone with different risk profiles. For example, payment milestones can be set and agreed every six months for the next two quarters, linking payments to specified deliverables. This gives the donor an opportunity to interrogate the on-going level of ambition of the program.

2. Build flexibility into program designs

Initial results frameworks should stipulate level of impact and ambition, but not predict in advance exactly what will be achieved or how. This can be achieved by using overarching logframes underpinned by nested logframes. Key indicators in the overarching logframe can include stories of change (at outcome level) and 'major' and 'moderate' results from a pre-defined menu of results at output level. By agreeing up front the achievement of a set number of stories of change and major and moderate results, according to agreed definitions, implementers can assure donors of a certain level of achievement, without restricting the program's ability to deliver results that reflect evolving needs and priorities.

3. Assign time and resources to facilitate adaptative approaches

From inception, program design needs to incorporate space, time and funds for on-going reflection and learning by doing – from failure as well as success. Staff (and partners) need space and support to identify problems, develop and test solutions, and revise approaches in the light of experience and evidence. Adaptive programming requires more sophisticated management, more management time, and more investment in management. Higher management costs need to be seen as, and demonstrated to be, investment in achieving greater impact rather than poor value for money.

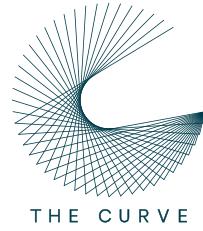


4. Recruit staff based on competencies rather than technical skills

Program staff need competencies, attitudes and behavior appropriate to adaptive planning, rather than simply technical skills. Staff recruitment, development, management and performance appraisal should encourage competencies such as a strong commitment to reform, the ability to facilitate rather than direct (often from behind-the-scenes), working as part of a team, and developing relationships of trust with partners and counterparts.

5. Incorporate strategic technical leadership *throughout* the program

This is needed to ensure technical vision and coherence, shape appropriate responses to learning and change, and guard against a series of unfocused interventions. It will help identify staff with competencies and behavior suited to adaptive facilitative working, and to help build their knowledge, skills and confidence to work in adaptive ways. It is further needed to create an enabling environment within the program for adaptive planning by shaping systems and processes to this end. Technical leadership needs to shape the operational/administrative management of finances, human resources, incentives and milestones.



Case study 5: Family-Care in Cambodia

Problem and context:

Most children in residential care institutions (RCIs) in Cambodia are not orphans but come from families who cannot afford the financial burden or believe the children will receive better care or education than at home. This is often not the case, and children are often left worse off.

Program approach:

Family Care First (FCF) Cambodia is a multi-stakeholder initiative launched by USAID that includes 27 implementing organizations. Implementers carried out campaigns to build awareness and influence behavior regarding family-based care and RCIs. The program aims to prevent family-child separation and promote the re-integration of children from residential care institutions to families.

How did the program harness responsive feedback?

FCF used pilot-learn-grow approach through lean testing and a collaborative, reflective learning process. This allowed them to quickly and iteratively test.

In a co-creation, co-design workshop, 40 participants from government, UNICEF, and development partners created basic prototypes of campaign messages and images. These were tested in workshops featuring small samples of members of the target audiences. Following feedback from these, a behavior change communications campaign was created using the messages and communication channels that resonated with the target communities. Results were evaluated from shared indicators and a shared measurement system, which was used to provide feedback to improve implementation. USAID enabled rigorous data collection and feedback loops provided implementers with timely, actionable evidence to scale their activities.

Outcomes:

National Social Work standards are being created by the Cambodian government to ensure there are quality standards in alternative care for children. Donor campaigns have reached over a million potential volunteers and donors to encourage support of community-based services and halt the generation of more institutions.



Key learnings:

1. Devote resources to program coordination

In projects where there may be a consortium of implementing partners, embed an in-country team or person to be responsible for coordinating with the large number of partners involved in the initiative. This person can also support design, implementation, and adaptation activities. This consistent point of contact will support the wider team in balancing a rigorous technical approach with the constraints of implementation by acting as a liaison between implementing and technical partners. Further, they may improve the team's understanding of the project itself and the needs of the partners, including ensuring that activities are both feasible and relevant for the partners throughout the course of the engagement. This consistent presence and point of contact for local partners, data collectors, and other stakeholders is crucial to the success of the project.

2. Set the tone and expectations

It is important to set the right tone and expectations when requesting consistent feedback. Partners must understand that suggestions will be prioritized based on several factors and that all ideals, learnings, and feedback might not be able to be implemented.

3. Plan how to navigate complex funding mechanisms

The USAID funding mechanism structure set some limitations on how far feedback loops could be integrated. Having a plan in place from the outset for how to navigate these or similar limitations will reduce confusion later in the program.

4. Establish a fail fast culture

Framing the early initiative phase as a 'pilot' encouraged honest reflection from both USAID and implementing partners. Other programs should establish a similar culture that invites honest discussion of mistakes and areas of improvement.



Case study 6: Delivering Humanitarian Aid in Syria

Problem and context:

During the Syrian civil war, use of sieges by the government and rebels exacerbated malnutrition and lack of access to basic services. Receiving funds from international partners is complicated by the financial infrastructure such as embargoes on Syria, counterterrorism regulations and regulations of surrounding countries.

Program approach:

Mercy Corps' South and Central Syria (SCS) program supports local NGOs and community-based organizations inside Syria to provide food assistance, non-food items (NFIs), water, sanitation and hygiene (WASH), livelihood support and child protection and education. The program takes a partner-led approach, where partners propose projects based on their local knowledge of needs and constraints.

How did the program harness responsive feedback?

The SCS program has built its internal analytical capacity to better understand the context and forecast future events to support a more agile strategic response. Its five-person Humanitarian Access Team draws on informant networks within Syria, social media reports, the knowledge of Syrian staff on the team, observations of implementing partners, and experience gained over the last two years of analyzing the Syrian conflict. The team invests heavily in report writing, mapping skills, and a website for information sharing, though the use of their information hinges more on personal connections and a team that work closely together.

In a striking example, the Humanitarian Access Team's knowledge of a local court system in northern Homs helped the SCS program advise a local partner who was encountering problems with armed groups stopping shipments of aid. The partner had sought extra funding to hire armed security for their distributions – a request which Mercy Corps felt could further fuel a cycle of violence. Knowing that the local court system was fairly well-functioning and respected by communities, Mercy Corps suggested that the partner raise the issue with the court and ask for mediation support.

Within a week, the court came down in favor of the partner and aid reached the besieged area.



Outcomes:

In 2015, the SCS program reached 847,179 people in some of Syria's hardest to reach areas.

Key learnings:

1. Build forward-looking capacities suited fast-paced environments

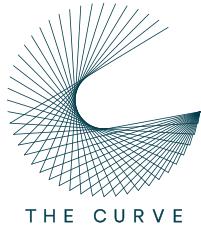
Shifting from a reactive model typical of reporting to a more anticipatory approach allowed the team to act quickly by pre-positioning food baskets, for example. Reports should be made easier to use and incorporate by including scenario forecasting.

2. Streamline reporting

Vast amounts of data and reporting are burdensome for information management and analysis. Having vital information hidden in bulky documents and not transformed into actions is ineffective. Simple presentation changes, like the use of bullet points, help streamline reporting.

3. Prepare alternative financial and compliance processes

Mercy Corps' requirements – like collecting three quotations for procurements over a certain value – were unworkable in the Syrian context. Developing and pre-approving robust alternatives, such as a matrix of supporting documentation, will ensure that this does not delay program implementation. Donors should follow suit: in one instance a donor approval took five weeks, preventing the program operating in a timely manner.



Case study 7: Improving Electricity Infrastructure in Pakistan

Problem and context:

Pakistan, a country of 183 million people, has an electricity supply that only meets 55–70% of demand. This means that millions of people in offices, classrooms and in homes across the country experience daily power outages without warning. For many, the lights are off 10–16 hours a day due to rolling blackouts which are used to manage chronic power shortages.

Program approach:

Power Distribution Program (PDP) is a 5-year, \$230 million effort to modernize Pakistan's power sector.

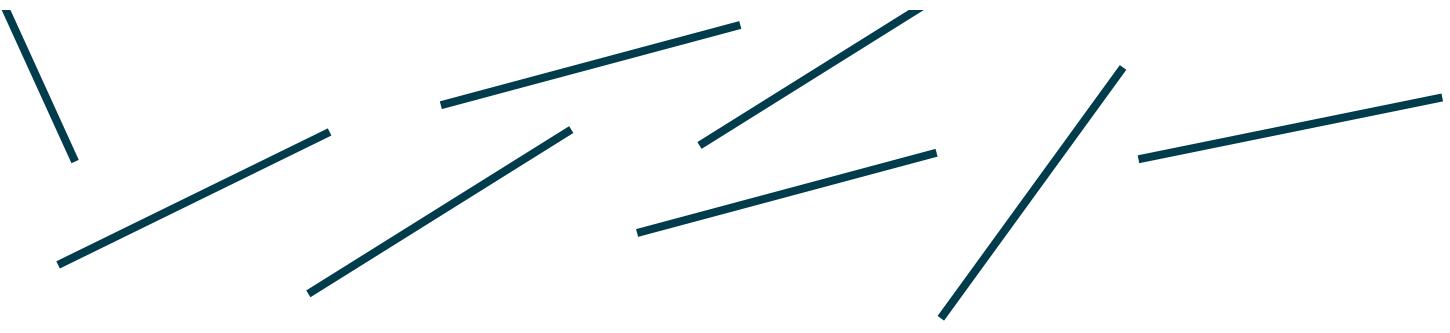
How did the program harness responsive feedback?

The program quickly discovered that there was no mechanism for determining power requirements at any given time, manual systems to monitor power flow, and no warnings when the system was overloaded and headed for a blackout. Each distribution company (DISCO), which serves a population of 35 million only had about 8 people with about 4 phone lines collecting information in paper ledgers. Each DISCO had a few areas from which they rarely received data at all. The system was plagued by miscommunication, non-communication, and miscalculation of consumption levels. If one DISCO was taking more than its share, NPCC had no way of finding out where the excess load was coming from and often made arbitrary decisions about where to impose blackouts.

In response, more than 9,000 smart meters were installed at almost every grid station. These meters contain SIM cards and use the cell phone network to relay information about electricity usage back to the DISCO headquarters every 15 seconds. This digital usage information is then relayed to the National Power Control Center and other Pakistani government agencies.

Outcomes:

From an initial investment of \$6million, the total benefit of the program was estimated to be \$180 million, with better service-delivery to 120 million people.



Key learnings:

1. Expand existing infrastructural capacities

Pakistan has the highest mobile penetration rate in South Asia, and roughly 90% of Pakistanis live in an area with cell coverage. Taking advantage of this existing system meant that the program was more easily adopted. Future programs should work to build upon existing infrastructural capacities.

2. Align with stakeholder priorities

By advertising potential revenue increases for DISCOs as a side-product of the program, USAID was able to secure their support. Future programs should be sensitive to the profit-motives of stakeholders, and pitch in a way that appeals to these.

3. Even small amounts of feedback can have impact

In this case study, only 9,000 smart meters were installed, but this resulted in benefits for 120 million people – around 63% of the population.



Case study 8: Improving Maternal Health in Timor-Leste

Problem and context:

Poor roads and infrastructure in rural areas of Timor-Leste mean that many expectant mothers give birth at home, receiving little medical support during or after pregnancy. Both maternal and infant mortality rates are very high because of this.

Program approach:

The Mobile Moms project connects midwives with mothers via mobile phones. A project survey showed that almost 70% of mothers had a cell phone or access to one.

Using these basic phones, the project sends messages to expecting women and new mothers twice per week. The vast majority of women do make a visit to a midwife early on in their pregnancy. At this visit they register for Mobile Moms and begin receiving messages timed to the stage of their pregnancy and for six weeks after they give birth.

How did the program harness responsive feedback?

Mobile Moms provides real-time data for project management. Health staff can track number of enrolled women in their communities, number of babies delivered, deliveries anticipated in the current week, and women who have requested assistance through the system. Managers can track villages where enrolment is low to improve outreach. The project can combine this information to see where Mobile Moms messages are translating to more visits to midwives and deliveries at health facilities

Outcomes:

The number of facility births in the pilot district has risen by 70% since the launch of the project, and total births assisted by a skilled attendant has increased by 32%.

Key learnings:

1. Even simple quantitative approaches are effective

The infrastructure of disadvantaged, rural areas almost never supports advanced technology. But this does not mean that quantitative data cannot be gathered. This case study provides an excellent lesson in how programs can use simple mobile phone technology to gather real-time feedback from beneficiary populations. These approaches are often more supported by the habits of local populations, and the infrastructure of the country, and therefore more likely to be successful.



Case study 9: Improving Social Dialogue in Jordan

Problem and context:

Fewer than 15% of women in Jordan participate in the workforce – despite very high education levels – because of unconducive workplaces, poor transportation and pressure to prioritize home and family.

Program approach:

The USAID Takamol program, a three-year program implemented by IREX, seeks to move toward more equitable gender policies, practices, and attitudes. This crosscutting pilot program is achieving its goal in Jordan through three main components: policy and advocacy, services for women and girls, and social dialogue. It is the latter that this case study examines.

Through this component, it aims to expand social dialogue to build grassroots momentum on gender equality, particularly among youth, in key target stakeholder communities of Amman, Ajloun, Karak, Zarqa, Jerash, Tafileh, Russeifah, and the Jordan Valley.

In its first iteration, the program held community seminars, public meetings and debates to facilitate social dialogue. In its second iteration, the program piloted sports and health initiatives which included segments of gender training. In its third iteration, the program tried three new approaches including a poetry slam initiative, a mural project bringing together international and Jordanian artists and a forum for presenting and voting on various gender programs within the community.

How did the program harness responsive feedback?

USAID Takamol repeatedly undertook a two-step process of reflection and adaption. First, it regularly and collaboratively reflected on what was and was not working and why. For example, the program collected quantitative data during the first nine months of social dialogue, which revealed that only a small proportion of those who participated in the debates (first iteration) belonged to the young demographic they wished to engage. As such, they attempted to stimulate the debate through sporting activities (second iteration) but found that engagement problems persisted.

Staff then held meetings with local government and CSOs to discuss what communities needed. From these meetings, it became clear that a key problem in engagement was that the program did not provide resources and incentives to help motivate and actualize community ideas. Further, the initial social dialogue design was composed



of disconnected activities, inhibiting sustained engagement. IREX and USAID reflected together on the social dialogue activities and results and discussed the challenges that the program was facing, as did the USAID Takamol staff internally.

After this collaborative reflection, USAID Takamol held adaption sessions — meetings with community members, among USAID Takamol staff, and between USAID and IREX — to discuss the best way to adapt the component activities based on the lessons learned from collaborative reflection. These sessions led USAID Takamol to pilot new initiatives that met criteria for sustained engagement, flexibility, being locally grounded, and the possibility of leading to further activity and local ownership.

Outcomes:

Sustained meaningful engagement with stakeholders, especially youth. Participants in the slam poetry activity, for example, continue to perform together and have expressed interest in forming a poetry association. Their videos have been viewed 6 million times online.

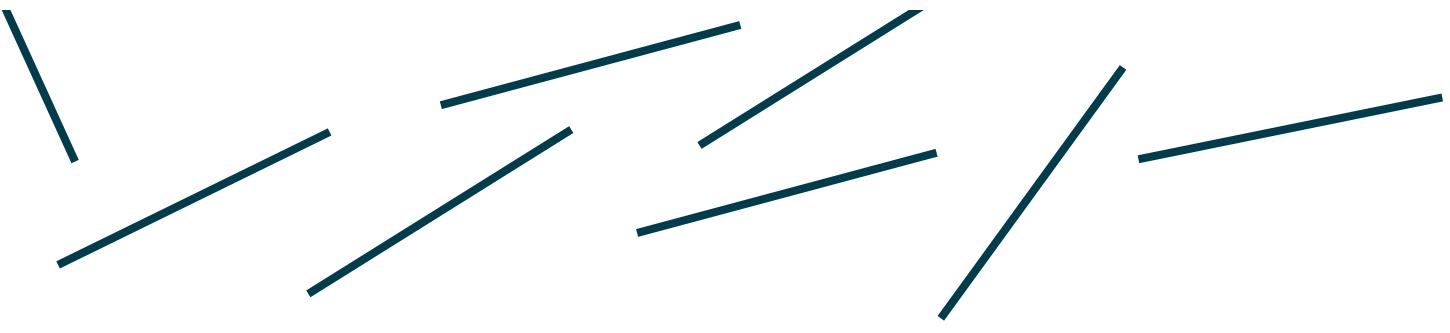
Key learnings:

1. Engage local communities

By speaking with local government, CSOs and other community members, the program was more quickly able to identify their issues and potential solutions. Insights from members of the community are a valuable resource and are vital for rapid and successful iteration. Unless community members are directly engaged, their input may otherwise not be picked up by other M&E methods.

2. Regard frequent iteration as learning and progress

While M&E can help us learn lots about a target group, it is still impossible to perfectly predict needs, interest and reactions when addressing issues, especially sensitive ones. Collaborating, learning and adapting is an effective framework not just to recognize what works, but what doesn't work. An 'unsuccessful' iteration should not be framed as a failure, but as part of a broader learning process. This helps establish a culture wherein employees recognize there will always be room for improvement and iteration within development projects.



Case study 10: Delivering Humanitarian Aid in Niger

Problem and context:

In 2016, there were an estimated 213,000 refugees, returnees, and internally displaced people in the Diffa region in southeast Niger. Escalating insecurity and violence in nearby northern Nigeria has been the main driver of this crisis. Displaced people were spread across remote host communities, with only 2% residing in refugee camps. Humanitarian actors struggled to reach communities in need due to limited infrastructure, a volatile security situation, and fluid population movements across a large geographic area.

Program approach:

The International Rescue Committee (IRC) has been working in Diffa since June 2013. The initial focus on population monitoring and protection allowed the IRC to develop a robust network for collecting information from across the region. As the crisis escalated, the response launched activities related to food, non-food items (NFIs), nutrition, health, livelihoods, and water, sanitation, and hygiene (WASH).

How did the program harness responsive feedback?

The IRC used an informant network to ensure that the response team could track population movements and rapidly respond to emerging needs. Individual citizens were provided with a phone that allows them to call the IRC and the local NGO for free. Later, the program also set up village protection committees to help with identification and protection support. This network of focal points and protection committees rapidly transferred information on population movements and needs to the IRC's field team and senior management.

The network also increased the response team's security awareness and ability to ascertain when it is unsafe to visit certain areas. This allowed them to maximize periods of relative security. The network even served as a proxy for the IRC when security restricts access; in particular, the committees carried out some program activities and provided information about services in their areas.

The IRC used their contextual awareness to create a day-long scenario planning exercise. After the planning exercise took place, the team sent proposals to emergency funders to support a rapid response mechanism in case the forecast scenarios took place. With dedicated funding and staff on this mechanism, information received from the focal points and committee network were able to trigger multi-sector assessments using household



surveys, key informant interviews, and focus group discussions. A scoring system flagged critical issues and hard-to-reach and highly vulnerable areas. The assessments led to rapid humanitarian responses when the forecast scenarios did take place.

Outcomes:

In an uncertain and volatile context, the IRC built systems to collect information and put it to actionable use. For example, in March 2014, responding to community focal points alerts, the IRC launched an assessment that revealed over 10,000 newly arrived people around Lake Chad. These people were unknown to any NGOs, with massive unmet health and water needs. Over the course of a weekend, the IRC team developed a concept note for a response, submitted it to UNHCR, and received approval with a budget of \$100,000. The response launched the following week.

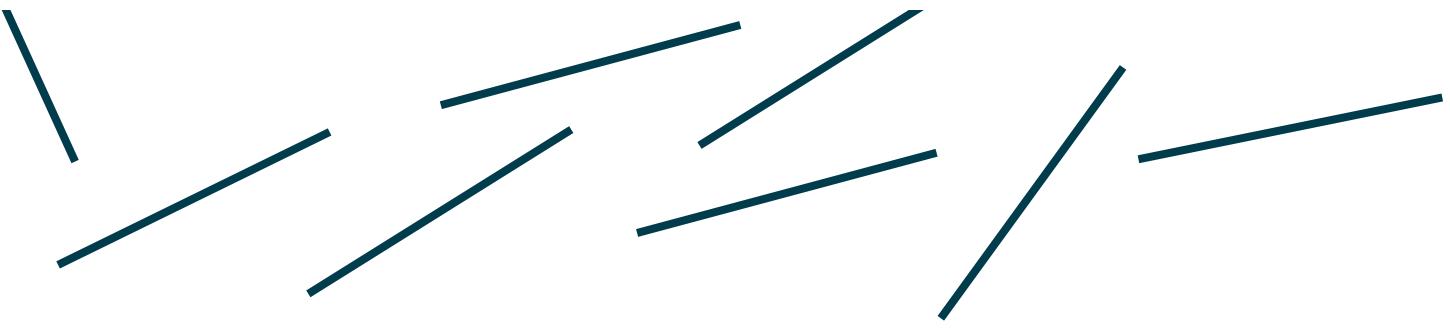
Key learnings:

1. Communicate regularly

The response team shared information through weekly reports, which switched to daily reports during the peak of the crisis. The IRC leadership team has maintained regular formal and informal channels of communication with UN agencies, donors, and local authorities. Regular updates keep all stakeholders informed of the evolving situation, which in turn makes it easier to renegotiate projects and contracts as well as secure funding for new projects to meet emerging needs. Open communication also helps foster flexibility. In the Diffa field office, daily briefings dispelled rumors and helped build team spirit. Communication allows staff at all levels to remain committed and willing to work in flexible ways, despite highly insecure and volatile contexts.

2. Build systems around people, not the other way around

IRC management staff sought to find or create flexibility in rules and policies to ensure field staff were able to do their work; this included, for example, almost doubling the financial authorization level of field coordinators, as well as developing a system of electronic approval and payment from the capital to allow for quicker action. By actively seeking and valuing information obtained by field staff, and demonstrating commitment to act rapidly on it, this has built a culture whereby field-staff feel supporting in making iterative decisions on the ground.



Case study 11: Reconciling Communities in Mali

Problem and context:

Peace in Mali has been fragile since a military coup in March 2012 led to armed violence. International military intervention helped stabilize the country and bring about democratic elections, but mistrust and fear in communities remain high.

Program approach:

USAID's Bureau of Democracy, Conflict and Humanitarian Assistance implemented reconciliation and stabilization activities to help heal tensions that remained within communities. This was done through economic incentives like cash for work programs and cultural activities to promote a sense of unity.

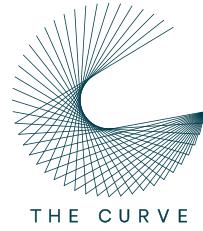
The program has iterated its activities based on community feedback. This is especially critical in an environment where the wrong approach can exacerbate underlying tensions and fuel conflict.

How did the program harness responsive feedback?

With mobile penetration at over 70%, USAID used mobile phone hotlines as a source of citizen input on its programming. In collaboration with Yeleman, a local IT firm, USAID created a hotline that users could "flash" by calling and hanging up. They would then receive a free call back from an operator that speaks their local language. Data from the calls fed into an electronic database that compiled quantitative data, geolocates callers, and produced both qualitative and quantitative reporting.

Questions about cash for work initiatives found that 96% of respondents understood how beneficiaries were selected. This feedback is important, because avoiding conflict over selection depends on people feeling the process is transparent

The hotline also helped understand how the program should best frame and articulate problems as it develops strategy. In the Gao region, 88% of respondents denied there being any 'ethnic tension'. Program developers therefore gained a key insight that framing projects through the lens of ethnicity was not effective, as this did not align with local populations' understanding of the conflict dynamics.



Outcomes:

The lessons learnt are now being applied in a scaled-up form. USAID's Peacebuilding, Stabilization and Reconciliation Project (PS&R) has a budget of almost \$20 million and will run until 2023.

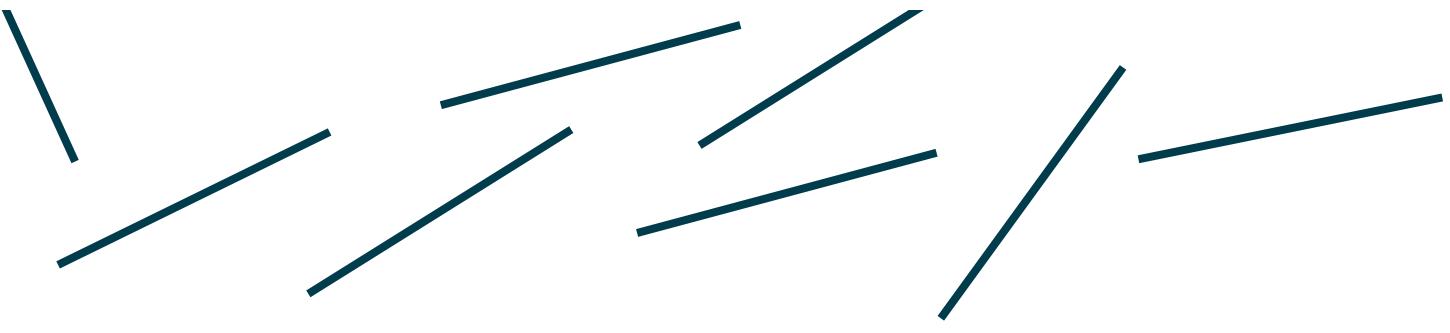
Key learnings:

1. Rapid feedback can track 'soft' measures

It is vital that programs are received well by beneficiary populations; this is a crucial precondition to success. Rapid feedback mechanisms can be helpful in tracking 'soft' measures, such as the perceived level of ethnic tensions or people's sense that opportunities are distributed fairly. These insights are immensely valuable in ensuring programs have high buy-in from local beneficiaries.

2. Make feedback mechanisms as convenient as possible

Using a free call-back service encouraged more people to give feedback, as this service was free and convenient because it connected users with local-language speakers. This helped the program gather as much data as possible, ensuring future iterations are based on a wide body of evidence.



Case study 12: Research Consortium Close Feedback Loop with CHWS in India

Problem and context:

Frontline health workers collecting data rarely receive any feedback about the data they are collecting and reporting. By closing this feedback loop, there is an opportunity to stimulate intrinsic motivation to increase the number of home visits occurring.

Program approach:

Catholic Relief Services, through its local implementing partner, Vatasalya, were supporting several Accredited Social Health Activists (ASHAs) in Uttar Pradesh, India through a mobile health program called Reducing Maternal and Newborn Deaths (ReMiND), powered by Dimagi's CommCare platform. ReMiND, working very closely with local government, focused on strengthening training and supervision of the ASHAs to increase home visits and improve service delivery.

CRS and Vatasalya partnered with researchers from Harvard University, the University of Washington, and Dimagi to develop an operational research project on top of the ReMiND project. The resulting intervention, known as the ASHA self-tracking application (ASTA), targeted intrinsic motivation of ASHAs by sending visual and written feedback about the number of home visits they performed compared to a subset of their peers. A parallel IVR-based system was also made available for ASHAs with lower literacy. The system was co-designed with the ASHAs using a human-centered, rapid iterative design process where over 20 different visual design iterations were produced.

The project was deployed and evaluated through a year-long randomized controlled trial where the ASTA system was compared to a similar control system that provided useful information, but no feedback on the work they are doing. The result was a 21.5% increase in monthly household visits in the group receiving the full ASTA intervention.

How did the program harness responsive feedback?

The design work for the ASTA visualizations involved a diverse range of literate and non-literate ASHAs and took place in two roughly sequential phases. In the first phase, researchers worked with ASHAs at multiple project sites, repeating the same process with each ASHA. At each site, we would begin by introducing (on paper) the concept of graphs and visualizations to ensure the ASHA understood visual representation of quantitative information. After introducing bar graphs, line graphs, and pie charts, researchers showed the ASHAs initial mockups of our visualizations. An important part



of the first phase was to learn how to quickly train ASHAs to read graphs. This training plan changed after each visit, absorbing the lessons from working with the ASHA. One effective strategy that researchers eventually converged on was to start by using the child health card, a familiar reference point for most ASHAs that also includes a graph. We also provided a variety of simple analogies to familiar topics, such as food or farming, to introduce and discuss graph concepts.

In the second design phase, researchers worked closely with a set of ASHAs in a neighboring block, following a rapid, participatory design process to gather feedback on over 20 design iterations. During this iterative process, input from ASHAs was combined with observations from field staff, and intuitions from the design team to create many new sets of visualizations before converging on the final set of visualizations that were deployed and evaluated.

Outcomes:

The program was deployed in an RCT with 142 health workers across 12 months. The result was a 21.5% increase in monthly household visits in the group receiving the full ASTA intervention.



Key learnings:

1. Interpretation is context-dependent

The researchers experienced numerous challenges creating visualizations that made sense to ASHAs. For example, the first set of visualizations used the color red to highlight the current day, but this led to confusion because, red is used to highlight national holidays and weekends on Indian calendars.

2. Training is a critical part of the process

Training plays an enormous role in the success of technology interventions in low-resource contexts. In this case, it was necessary to train ASHAs not only on the technical components of accessing the visualizations, but also on the conceptual understanding of graphs. The participatory design work made it clear that the concept of 'average' group performance was too abstract to be easily understood by the majority of the ASHAs without substantial training. It was much clearer to directly reference numbers. Similarly, there was confusion around labelling the ASHA's performance as 'me'. Rather, the researchers discovered that it was better to use the terms 'you' and 'other ASHAs'.

3. Different stakeholders have different priorities

During our iterative design phase, ASHAs repeatedly asked for visualizations that included ASHA names so that they would know who was performing better than they were. This request revealed fundamental tensions between what the ASHAs wanted and what the implementing partner wanted (i.e., not shaming lower performing ASHAs). Balancing each stakeholder's priorities required compromise from all parties.

4. It is beneficial to build on familiar concepts

The researchers found it beneficial to build on concepts that ASHAs were already familiar with. For example, during the fieldwork researchers noted that it was common for ASHAs to have calendars in their homes. Subsequently, the ASHAs responded favorably to a calendar visualization, saying that they liked to be able to look back and see which days they had worked. In general, the researchers tried to build on existing ASHA knowledge so that they would be comfortable with the resulting visualizations.



Case study 13: SMS Reminders to CHWS in Tanzania

Problem and context:

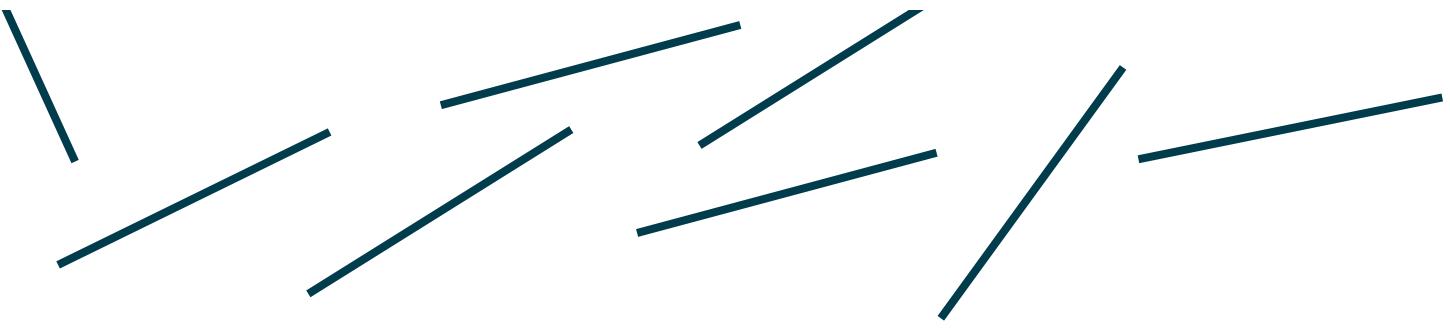
Community health workers are often given a great deal of flexibility in planning their activities, but this can lead to missed visits or long visit delays for individual clients. By building automated reminder systems for CHW activities, there is an opportunity to ensure that clients are visited on a regular schedule and that services are delivered in a timely and appropriate manner.

Program approach:

Pathfinder International, working with D-tree International were supporting several community health workers in Tanzania to visit HIV-positive clients on a monthly basis. The main purpose of the visit was to provide social support, as there was a heavy stigma around HIV in Tanzania, as well as referring sick clients to the health facility. The health workers were using a mobile data collection and patient management platform known as CommCare to keep track of their clients.

Through a research partnership with the University of Washington, the organizations worked together to develop and deploy a web-based SMS platform to pull data from the CommCare platform and send automated SMS to the health workers, alerting them to clients who were due a visit. Messages were sent daily until a visit was recorded in the CommCare application. If the visit was more than three days overdue, it would be escalated up to a supervisor who would call the health worker.

The project was initially piloted with a different program in central Tanzania but was more formally deployed and evaluated through a randomized controlled study with a 40-day baseline and intervention period. The system was allowed to run for an additional four months before a second study, with 90-day baseline and intervention periods was started to evaluate the necessity of the escalation step.



How did the program harness responsive feedback?

Based on the initial pilot in central Tanzania, researchers modified on their SMS reminder intervention in two important ways. First, in the pilot study, the earliest reminder was sent on the evening that the CHW's visit was due, too late to make an on-time visit. For the more formal evaluation, researchers incorporated proactive reminders, with the first one being sent the day before a visit is due, giving the CHWs time to plan their day and make an on-time visit to the client. Second, in the pilot when the requested action did not occur, the system continued to send SMS messages but had no means of determining why the CHW was not reporting a follow-up. To respond to this, researchers developed the escalation-to-supervisor step that would allow further intervention for overdue visits.

Outcomes:

The reminders resulted in an 86% reduction in the average number of days a CHW's clients were overdue (9.7 to 1.4 days), with only a small number of cases ever escalating to the supervisor. However, when the step of escalating to the supervisor was removed in the second study, CHW performance significantly decreased.

Key learnings:

1. Technology amplifies intent

While not noted explicitly in this research article, the work is a direct example of Toyama's Amplification Theory, which states that technology in an ICT4D setting serves to amplify the intent of people in the project. In this case, the automated SMS reminder system amplified the intent of supervisors to have all visits conducted on time.

2. All communication is bidirectional

It became immediately clear to researchers after deploying the system in Study 1 that any automated communication system must support two-way communication. CHWs were originally instructed to contact the supervisor directly if there was any confusion with any aspect of the system. However, within three days of starting the intervention period in Study 1, a CHW tried to call the automated number, which would just ring indefinitely. During that 40-day intervention period, there were a total of 21 attempts to contact the research team over SMS or voice with the automated number, not counting CHWs who called more than once in a row. In one notable message, a CHW commented that she was sick and asked to be assigned a client who was physically closer than the one referred to in the reminder SMS she had received. To address this problem, researchers rapidly extended the system to automatically send an email to the research group whenever there was a missed call or incoming SMS.

3. New technology comes with a novelty effect

Technology interventions in low-income settings are rarely studied for extended periods of time. Introducing new technology can create excitement and stimulate activity, but initially observed levels of improved performance may not be sustainable over time. The system discussed here ran continuously from November 2010 to mid-June 2011, tracking CHW performance over a nine-month period, including time before the system had been deployed.

The work gives a holistic view of performance over time, making it easy to see the effects detected in the two studies. There is a noticeable rise in performance directly after deploying the system, as well as a dip towards the end of 2010. This can partially be explained by the CHWs working less during the holiday period, but also suggests the novelty effect wearing off. After the dip, the performance of the CHWs settles into a steady state, with a significantly higher level of performance compared to the control group.

Case study 14: Using RFM to Iterate Theories of Change – NaijaCare

Problem and context

In Nigeria, patent and proprietary medicine vendors (PPMVs) are a crucial component of the private sector health system. PPMVs are defined as anyone without formal training in pharmacy who sells orthodox pharmaceutical products on a retail basis for profit. PPMVs often provide pharmaceutical products for poor and rural communities but are often not well supported in doing so. PPMVs therefore offer an opportunity to expand and primary health care and family planning services.

Program approach

NaijaCare aimed to improve the service delivery of PPMVs, whilst also meeting their business and financial needs. The program aimed to provide a digital service business for PPMVs that would improve their service delivery, whilst also meeting their business needs. The initial Theory of Change (ToC) for NaijaCare was based on a ToC used in a similar project, UJoin in Kenya. Here the premise was that the needs of low-income households could be met by driving behavioral change through leveraging the relationships between the 'duka owners' (Kenyan shop-keepers) and their customers. For example, UJoin provided duka owners with a digital community, which they accessed using their mobile phone. The community provided education and mentoring and credit to buy stock to PPMVs, as well as a 'loyalty scheme' through which discount vouchers are sent to their customers' mobile phones.

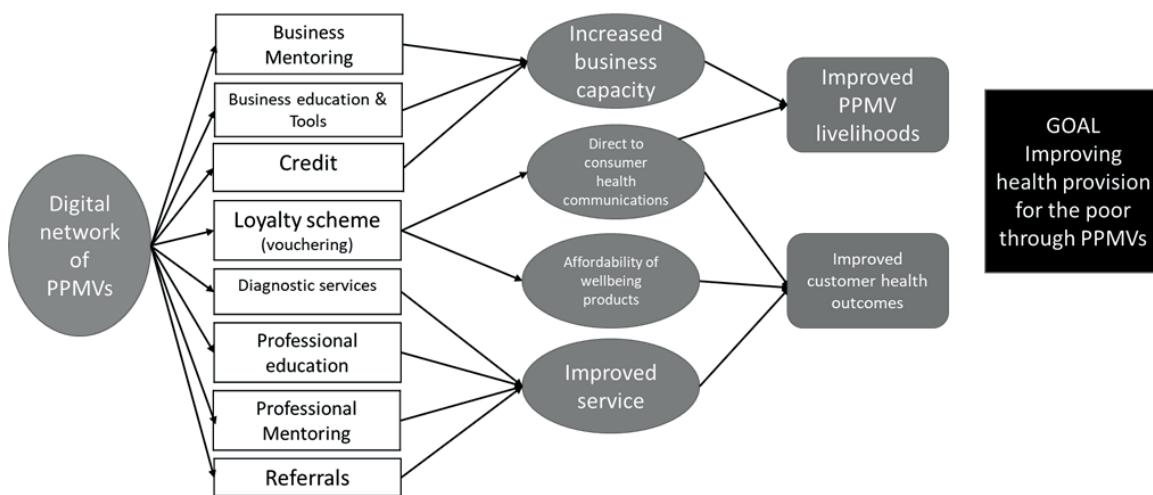
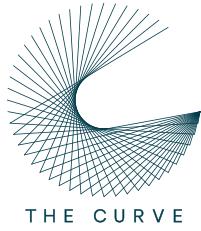


Fig 1: Initial Theory of Change for NaijaCare



How did the program harness responsive feedback?

The NaijaCare program revised its Theory of Change following user feedback and a landscape analysis with key stakeholders. The feedback showed that there were additional stakeholders that the initial ToC had not considered. Two insights suggested that the ToC needed adapting for the Nigerian context. Firstly, there were reports that PPMVs are a major route for sub-standard and counterfeit medicines and sell medicines not covered under their licenses. Secondly, imminent regulatory changes would create three tiers of PPMVs and require them to register with the Pharmacist Council of Nigeria (PCN).

These insights showed that, in order to bring about effective change, the program needed to help PPMVs mitigate the legal contraventions, facilitate the necessary registration process and target each PPMV with content appropriate to their tier. In response, the program created a 'digital ordering' facility for the PPMVs. This facility would enable the PPMVs to order medicines from an assured provider, creating a secure supply chain. Further, digital ordering can provide a digital trading history that may de-risk the provision of highly-valued credit, share distribution costs through adding further products to the basket (e.g. soaps, toothpastes, skin creams) and reduce the unit cost of stock for the PPMVs by enabling group-buying.

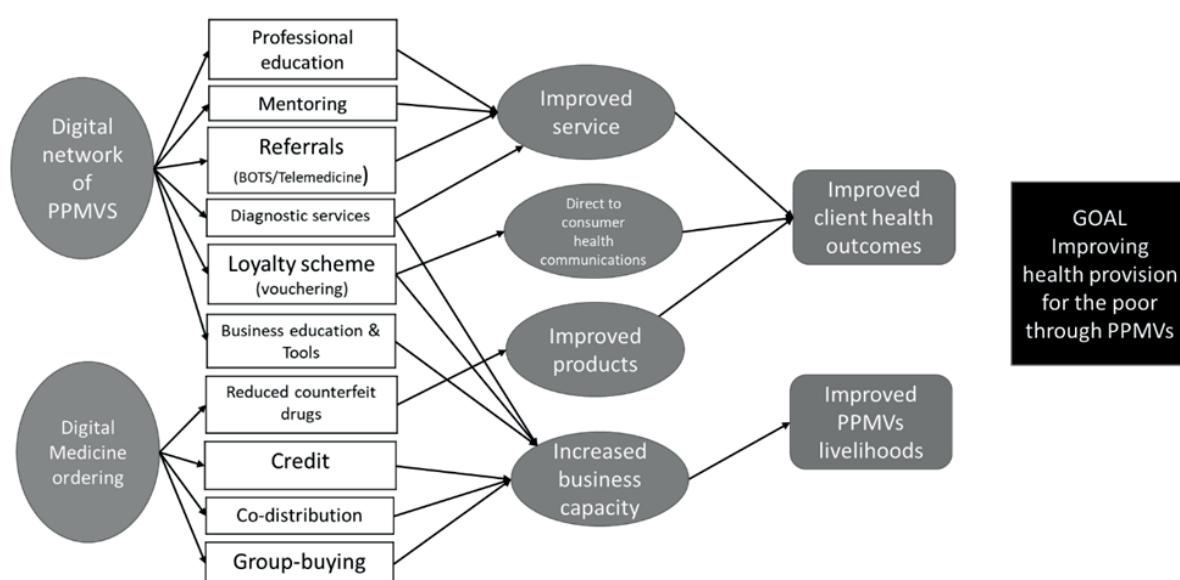
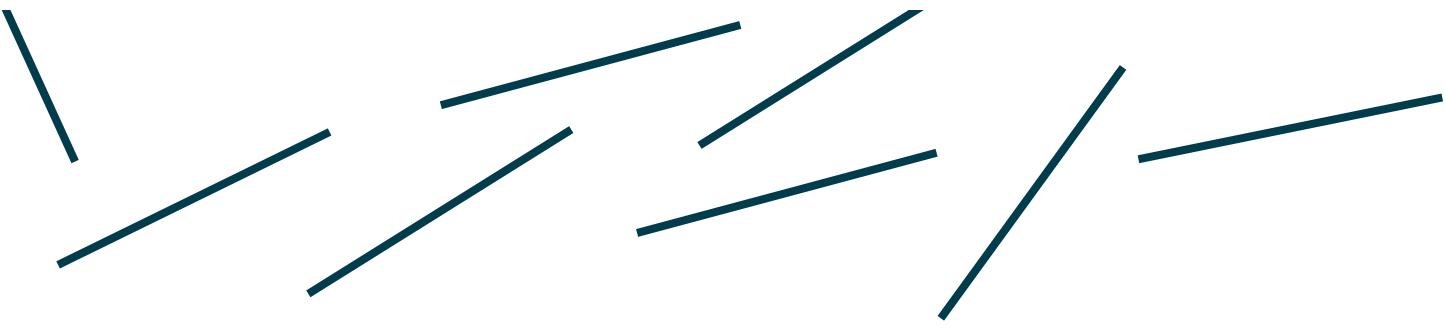


Fig 2: Revised theory of change for NaijaCare



Outcomes

The digital community has now been launched and is being refined based on user interactions and feedback. The program designers aim to test the project more formally once the intervention has stabilized.

Key learnings

1. RFMs can be used to iterate and improve Theories of Change, not just implementation methods

This case study demonstrates how RFMs can be used to improve the ToC underlying development programs, not just improve implementation designs and approaches. Here, the user feedback and landscape analysis highlighted additional stakeholders that had not been addressed within the initial ToC. The program was able to iterate at a small-scale and adapt its ToC according to this feedback.

2. Program budgets should be structured in a way that enables ToC iteration

In order to build their additional digital ordering facility, NaijaCare required additional budget to fund the necessary technology development. By structuring the budget in a way that facilitated theory change, the funder allowed the program to improve its Theory of Change and achieve effective change. The case study therefore shows that funding mechanisms need to be more flexible to allow such iteration and improvement.



Case study 15: Results for Development (R4D) – Tupaia Research with Australia’s Department of Foreign Affairs and Trade (DFAT)

Problem and context

Immunization is one of the most cost-effective health investments and a proven tool for controlling and eliminating life-threatening infectious diseases. In the Pacific Island nation of Vanuatu, however, the effectiveness of the immunization program is constrained by a paper-based reporting, ordering and forecasting system and a mountainous, remote, jungle-filled geography. These challenges are associated with inaccuracies and delays in reporting, ordering, deliveries and decision-making across Vanuatu’s immunization program.

Program approach

The program planned to roll out a Tupaia – a digital reporting, ordering and forecasting system, as well as a visual dashboard – for health workers to access, use, and interpret vaccination data. If successful, Tupaia would help support decision-makers in maintaining the cold chain system and the stock of vaccines at health facilities; essential factors in increasing immunization coverage. The pilot in Vanuatu would inform additional rollouts in neighboring countries in the Pacific.

How did the program harness responsive feedback?

The program was unsure about decision-makers’ access to and use of accurate data. Therefore, in collaboration with DFAT and R4D, the Tupaia team tested the assumptions in their Theory of Change.

At the time of this initial assumption-busting, data in Tupaia were stagnant and outdated. Health facility staff were still primarily using paper-based vaccine order forms and facilities did not yet have access to fridge sensors to track daily fridge temperatures.

The program needed to understand whether decision-makers would have the data literacy required to interpret the digital platform, and whether the information provided on the platform would prompt a relevant action from the decision-makers i.e. If they knew of an issue in the vaccine cold chain or an imminent stockout, would they act upon that information.

Outcomes

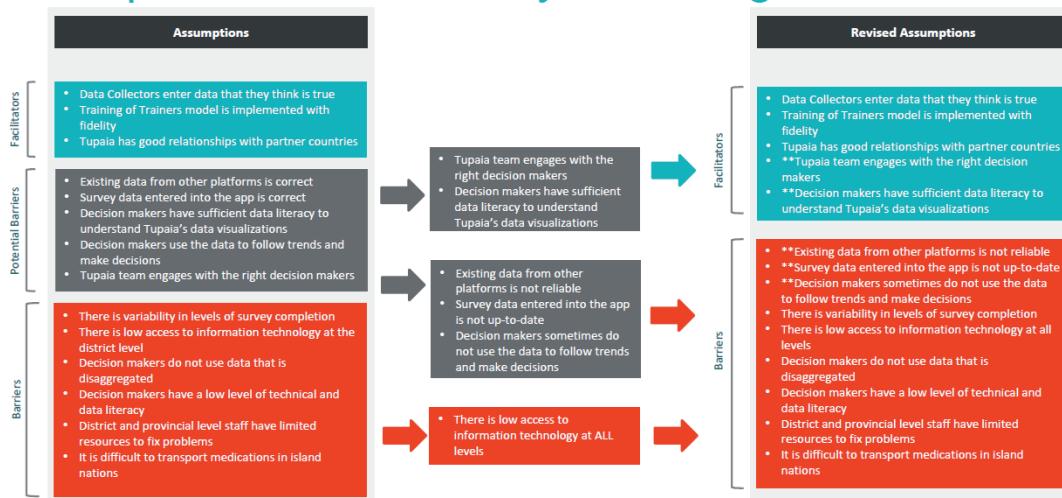
The program found multiple barriers preventing data-driven decision-making needed to maintain the cold chain and steady supply of vaccines.

Contrary to initial assumptions, national, provincial, and health facility staff all clearly demonstrated their data skills. However, their data literacy did not translate directly to success with Tupaia as many health workers faced *digital* literacy challenges, not *data* literacy. This meant that health workers sometimes had difficulties navigating through the platform to find desired information.

It also found that key individuals still did not make use of actionable information when given the opportunity. For instance, response to fridge breakdowns were delayed and disconnected. When a fridge malfunctions, health facility staff call the EPI Provincial Coordinator. He/she is then responsible for sending a technician to fix the fridge. National level staff reported that broken fridges were fixed immediately; however, health facility staff reported that they often did not receive a response, experienced long wait times, or were still waiting for a replacement fridge.

Other flaws in the original theory was the assumption that only health workers would be limited in their access to information technology. National and provincial-level Expanded Program for Immunization staff face similar challenges. Also, national, provincial, and facility-level staff *all* intermittently face connectivity, network, and technology barriers when trying to access Tupaia.

Tupaia Revised Theory of Change



Key learnings

1. Training is a critical part of the process

Training plays an enormous role in the success of technology interventions in low-resource contexts.



**To find out more information about these case studies,
please see the below sources:**

Brian DeRenzi, Leah Findlater, Jonathan Payne, Benjamin Birnbaum, Joachim Mangilima, Tapan Parikh, Gaetano Borriello and Neal Lesh (2012). 'Improving Community Health Worker Performance Through Automated SMS' in Proceedings of ICTD 2012. ACM.

Brian DeRenzi, Nicola Dell, Jeremy Wacksman, Scott Lee, and Neal Lesh. (2017). 'Supporting Community Health Workers in India through Voice- and Web-Based Feedback' in Proceedings of the 2017 CHI Conference on Human Factors in Computing Systems (CHI '17). ACM, New York, NY, USA, 2770-2781.

Christina Synowiec (2019). 'Tupaia research with DFAT'. Taken from presentation to be delivered at The Curve Summit, 2 October 2019.

Eric King and Nick Martin (2015). Turning Data into Action. US Global Development Lab, USAID.

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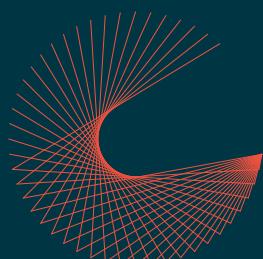
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Katherine Neidorf (2018). 'Putting Family Care First in Cambodia' in 2018 CLA Case Competition. USAID Learning Lab.

Mercy Corps (2016). ADAPTING Aid: Lessons from Six Case Studies

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Richard L. Wright, Abi Gleek, Nora Bergin, R. Algy Williams and Sohail Agha (2019). 'Using 'Theories of Change' and responsive feedback to design a digital service business for patent and proprietary medicine vendors in Nigeria' in Gates Open Research 2019, 3:1493. [Awaiting peer review]



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