

HMIS Evaluation- certain theoretical issues

- Evaluation is against a set of objectives. But there are different understanding of how a certain set of processes are related to each other and how together these relate to an outcome/objective.
- This we call “ Programme Theory” or “Framework of Understanding” that each individual or stakeholder group holds.

Example

A CCTV is installed to
prevent car thefts in a car
park

The CCTV example.

- **Caught in the act-** present offenders are caught and removed from the system.
- **You've been framed-** potential offenders are scared off because they know they'll be caught.
- **Nosy parker:** Increased use of car parks- leads to increased 'natural' surveillance.
- **Effective deployment-** may help deploy human resource more where it is more likely to happen or come in from – making both 1 and 2 more likely.
- **Publicity mechanism-** visible statement of govt acting- will deter potential car thefts.
- **Time for crime-** long duration crimes would be deterred
- **Memory jogging mechanism-** reminds drivers for responsible behaviours.
- **Appeal to the cautious-** make safe, safer and make vulnerable more vulnerable.

The context of installation

- Criminal Clustering- many offenders – or single offender doing very often.
- Style of usage- is the car park full for whole day/ at some times- can it take more cars if there are more users.
- Lie of the land- blind spots would be a problem if theory a is being considered- makes no difference for b.
- Alternative targets – crime would shift elsewhere or to other things.
- Resources context- can more security staff/ police be deployed.
- Surveillance culture- this is the correct thing for governance to be seen doing.. Enhanced image.. That too helps.

Evaluation questions:

- Have arrests and convictions increased?
- Has frequency of thefts/attempted thefts come down? Car thefts- all thefts.
- Has location and time of thefts changed?
- Has responsible car user behavior improved?
- Was publicity successful in convincing public?

ASHA evaluation- how does the programme work?

- **Demand generation:** she promotes demand and utilization of facilities. More people go to facilities and facilities save lives. Service provision by herself or conflict with service providers would be a negative influence.
- **Service Provision:** most lives are saved by changed health practices she brings about and care for common childhood illness which in turn promotes appropriate care in facility and helps her to be a successful activist.
- **Rights activist:** She cannot and should not promote care- she should organize women to demand that care is provided.

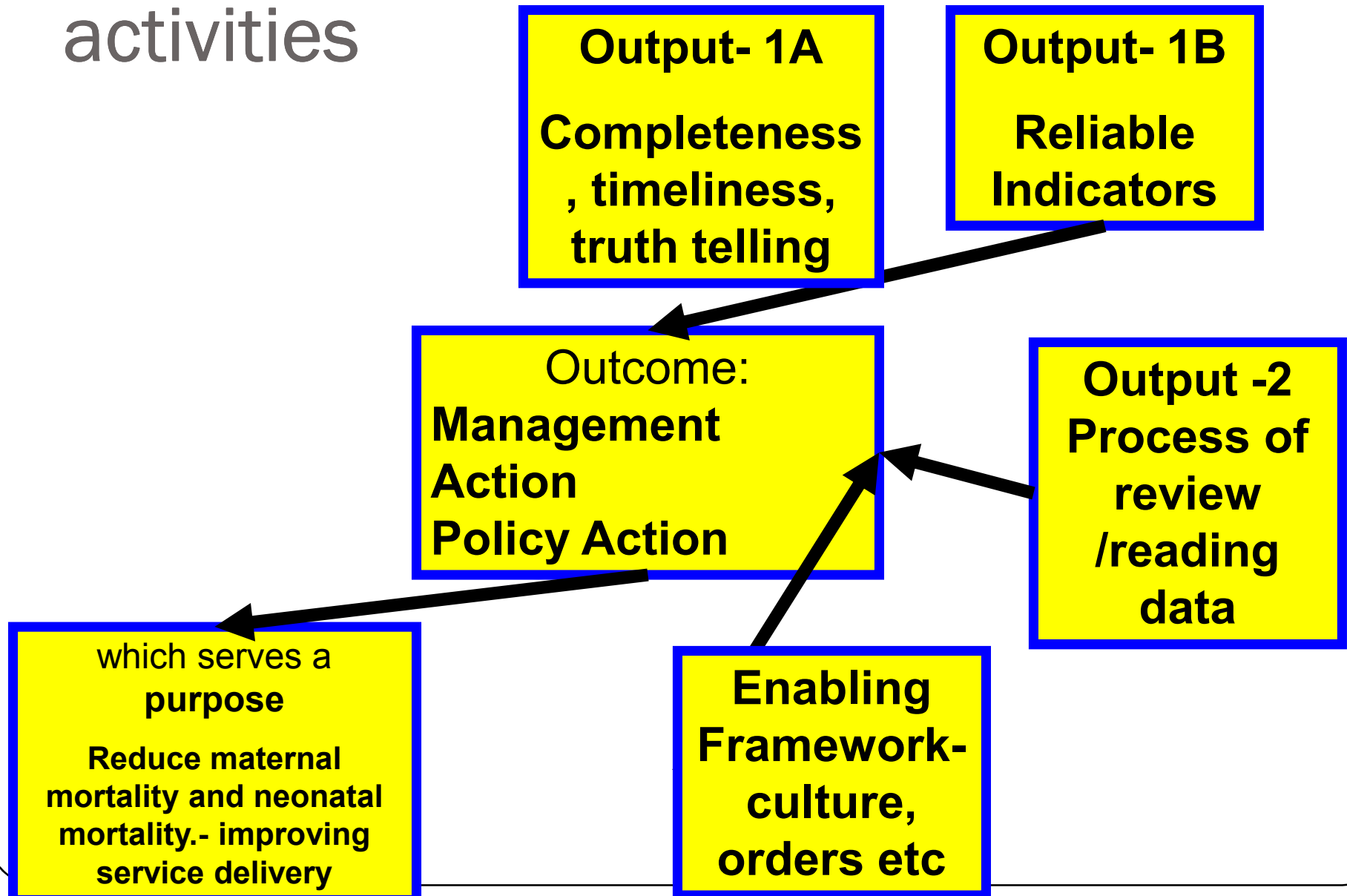
Pregnancy tracking – how does it help reduce maternal mortality.

- By helping identify all the pregnant women who did not get services.
- By helping identify and help service provider give quality follow up and delivery of all services to the pregnant woman who came into contact with the system.
- By helping the supervisor to monitor whether the service provider is providing complete services to pregnant women.
- By improving institutional delivery.
- By improving quality of HMIS and reducing false reporting in HMIS- and HMIS in turn would help provide better services
- By reducing cheating in payments under JSY.

HMIS- what is the programme

- Improves **understanding: to know how a** system works and how it might be improved (research role)
- Improves **performance monitoring: if and** how a system is performing to an agreed standard (managerial improvement role)
- for **accountability: allows work of** service providers and junior officers to be scrutinized as individuals, teams and organizations; and health department performance as a whole is visible to public.

Outcome-output Relationship activities



- Facility Level data- disaggregation is used for actions
- District level data- action from states-
- Actions could be
 - A more supervisory visits
 - Disciplinary action
 - Reward or recognition
 - More financial resources
 - More human resources.
 - Discussion/ study to understand a problem

Output -1

- Completeness- what are the issues involved- is private sector integrated- if not why not?
- Timeliness- what are the issues- are delayed responses less reliable or better off.
- Is there a verification/authentication process.
- Is recorded data match with reported data
- If yes does reported data triangulate with external surveys

Output -2

- Is there a review committee in place?
- What is the perception of reliability of data.
- Are there examples of use of data- could be sporadic and could be systematic.
- What outputs were generated- in terms of suggestions for action.

Enabling framework- context

- What is the need/ systems in place for responding to information.
- What are the processes that need data inputs for planning.
- What is the monitoring system in place and its function.
- What is the use of data for accountability- how much does it help HMIS grow- and how much does it thwart data flow.
- Context- Historical; Social; Health systems:

Thank You