USAID’S HEALTH EVALUATION AND APPLIED RESEARCH DEVELOPMENT (HEARD) PROJECT

ACCELERATING EVIDENCE-TO-USE FOR GLOBAL HEALTH AND INCLUSIVE DEVELOPMENT PRIORITIES

OVERVIEW

The Health Evaluation and Applied Research Development (HEARD) Project is a flexible implementation science (IS) and evaluation mechanism that responds to USAID’s emerging global health and inclusive development needs. Managed by University Research Co., LLC (URC), HEARD leverages a multi-stakeholder partnership of some 50 organizations—bringing together policymakers, implementers, researchers, advocates and community organizations—to improve policy and program implementation across a range of technical areas. To date, activities have spanned 19 countries (see box) thanks to investments from 11 USAID offices and seven missions.

WHAT WE DO

HEARD project partners are mobilized to address needs in the context of both global and country support efforts (in service to USAID missions and local partners). Examples of research and evaluation services include embedded evaluation or implementation research studies; scoping and design of evaluations (at any phase of program implementation); implementation trials, case studies, reviews of literature and analysis of existing data. The deep (and growing) bench of partner expertise, type and location means the capacity to tailor multidisciplinary tools, methods, and approaches to produce relevant and responsive evidence in any context.

Technical focus areas for research and evaluation activities are expandable and (so far) have included evaluations of global and country-based health systems strengthening programs, protecting children from violence, mental health and psychosocial support, disability assistive technologies, respectful maternal care, obstetric emergencies, and urban nutrition and Water, Sanitation and Hygiene (WASH).

WHERE WE WORK

Activities span 19 countries (and counting) across 7 regions:

- Southeast Asia: Bangladesh, Cambodia, Indonesia
- East Africa: Kenya, Uganda, Tanzania, Malawi, Madagascar, Rwanda
- West Africa: Guinea, Burkina Faso, Namibia, Nigeria
- Eastern Europe: Moldova
- Middle East: Jordan
- Central America: Panama, Honduras
- South America: Colombia, Ecuador

TECHNICAL AREAS

- Evaluations of global and country-based health systems strengthening programs
- Protecting children from violence
- Mental health and psychosocial support
- Disability assistive technologies
- High quality respectful maternal newborn health care
- Urban nutrition and water, sanitation and hygiene

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IMPLEMENTATION SCIENCE COLLABORATIVE: SUSTAINING TECHNICAL PARTNERSHIPS

The HEARD Project leverages its thematic networks in support of the Implementation Science Collaborative (ISC). The HEARD-led ISC is emerging as an incubator for learning across multiple partnership networks and has demonstrated the value of sustaining trusting relationships for rapid response to implementation challenges. The Project's foundational work in the creation of the Implementation Science Collaborative (ISC) continues to develop a more sustainable platform that can be accessed across technical silos and funding streams. The goal of the ISC is to:

1. Strengthen collaborative learning networks required to build and sustain the development of the fields of implementation research and delivery science.
2. Increase demand from decision-makers for better evidence and its more effective use.
3. Enhance capacity of partner institutions – particularly in local settings – to design and implement evaluations and applied research studies, and to manage implementation research processes.
4. Enhance capacity of implementers to weigh and effectively use evidence; and
5. Increase relevance of and accessibility to implementation science and evaluation study findings.

RESULTS HIGHLIGHTS

- Produced more than 20 ongoing or completed research studies, two global evaluations, and four country-specific evaluation activities.
- Supporting the Governments of Colombia, Kenya, and Namibia in their efforts to end violence against children through development and implementation of data-informed national strategies, and connecting learning through our Country Support Collaborative platform.
- Carried out implementation and effectiveness studies of four community-based psychosocial support interventions in five countries, with cross-site learning and analysis support through our MHPSS Learning Collaborative platform.
- Evidence generated from Maternal Health and Urban Health Collaborations in East Africa informed East, Central, and Southern Africa Health Community’s (ECSA-HC) Ministerial Resolutions on urban health and respectful maternity care.

PARTNERS

GLOBAL TECHNICAL ANCHORS
University of California, San Francisco and University of California Berkeley CGH/DDE
Graduate School of Public Health and Health Policy at the City University of New York

SUB-REGIONAL ANCHOR PARTNERS
East, Central and Southern Africa Health Community
Universidad de los Andes
Infectious Diseases Institute
Ifakara Health Institute
University of Indonesia
West African Health Organization

TECHNICAL RESOURCE PARTNERS
Implementation Assistance Providers
Act Together Uganda; Action Contre La Faim; Americares; Amces; CARE; Comprehensive Community Based Rehabilitation in Tanzania; Elizabeth Glaser Pediatric AIDS Foundation; GAPPs; Global Communities; Heartland Alliance International; Hebrew Immigrant Aid Society; Keeping Children Safe; LifeLine/ChildLine Namibia; LVCT Health; Pathfinder; Project Hope; TAMASHA; Tanzania Midwives Association; Tanzanian Training Center for International Health; Thamini Uhai; TPO Uganda; War Child; World Vision
Evidence Advocates
Africa Academy for Public Health; CHESTRAD; Global Alliance for Clean Cookstoves; International Society for Wheelchair Professionals; International Society for Prosthetics and Orthotics; Partners for Population and Development; Together for Girls; White Ribbon Alliance
Evaluation and Research Institutions
Africa Population and Health Research Center; Barcelona Institute for Global Health; CNF RSR; Columbia University/AMDD; Consultus; Harvard TH Chan SPH; Indiana University/AMPATH; James P Grant SPH, BRAC University; Johns Hopkins Bloomberg School of Public Health; Kamuzu College of Health Sciences; London School of Hygiene & Tropical Medicine; Maestral International; Maferinyah Center for Health Research and Training; Makerere University; Muhimbili University of Health and Allied Sciences; Population Council; PRONTO; TANDEM; Universitas Gadjah Mada; University of Bordeaux ISPED; University of Edinburgh; University of Oslo; University of Pittsburgh; University of Virginia School of Education and Human Development; University of Copenhagen; VillageReach Washington University in St. Louis / Brown School; Wi-Her

RESEARCH SYSTEMS INTEGRATOR & PROJECT MANAGER
University Research Co., LLC
HOW WE DO IT: COLLABORATIVE STRATEGIES

Serving in the role of partnership secretariat, URC functions as the Research Systems Integrator (RSI)—facilitating inputs from the complex set of actors required to identify and address evidence gaps. The RSI function involves providing strategic guidance, managing complex partnership dynamics, ensuring quality and timely outputs, and advancing sustainability of thematic area collaborations. When an evidence need arises, URC:

- Either leverages one of our existing technical collaborations or draws from within and beyond HEARD’s partner networks to assemble an appropriate technical collaboration. Technical collaborations possess the strategic, methodologic, technical, and managerial capacities required to address an evidence need in a particular context.
- Guides technical collaborations in the development and implementation of “fit-for-purpose” implementation science and evaluation activity designs.

The orange boxes in Figure 1 highlight the strategies that form the basis of our “fit-for-purpose” approaches. Partnership and Agenda Development involves stakeholder consultation to identify and build consensus around the questions/evidence gaps to be addressed. This strategy engages end-users (e.g., policy and program implementers) from the start. To address identified priorities, Data Liberation and Evidence Strengthening (i.e., use of data and evidence that already exists) and new Research Studies and Evaluations may be used in combination or independently. Process Development for Evidence-to-Use Acceleration is about leveraging stakeholder platforms for communication and dissemination of new information along decision-maker pathways at national, regional and global levels.

Learn more here: https://iscollab.org
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