

**Guidance on assessing the potential sustainability of *Practices* as part  
of an evidence review:  
Considerations for *High Impact Practices in Family Planning***



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## **The Need to Focus on Sustainability**

The Family Planning High Impact Practice (HIP) Initiative is focused on synthesizing evidence and learning on “what works” in family planning. The HIP organizes practices into three broad categories: service delivery, social and behavior change communication, and enabling environment (see website for more detail). The main role of the HIP Technical Advisory Group (TAG) is to offer an unbiased review of evidence on a specific practice in order to assess that practice’s potential to significantly improve family planning programs. The assessment of the evidence is based on a pre-determined set of criteria, such as impact on modern contraceptive use and sustainability (see [HIP list](#) for complete list of criteria). The TAG recognizes that the term, “sustainability,” is ill-defined and, to that end, requested a small group of TAG members to provide more specific guidance on how the HIP TAG should consider sustainability when determining if a practice meets the criteria to be labeled a High Impact Practice.

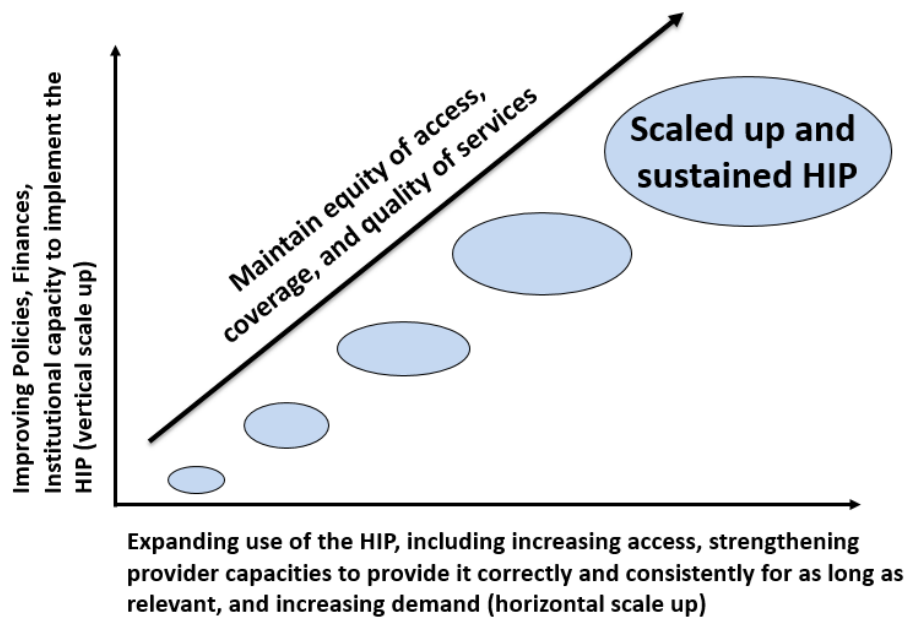
Clearly, sustainability is a key concern among decision makers when deciding whether to invest in any specific HIP. The authors considered this issue by asking three key questions: 1) How is sustainability defined? 2) What evidence is required to demonstrate a practice is sustainable? 3) How can HIPs be implemented to increase the potential for sustainability for as long as the practice is relevant for the program?

## **Evolving Definitions of Sustainability**

Over time, the definitions of sustainability have changed. In the 1990s, the term was used to refer to the ability of country family planning programs<sup>1-4</sup> and non-governmental organizations (NGOs)<sup>5-7</sup> to maintain gains after donors phased out. In the 1990s and 2000s, questions of sustainability focused on moving from pilot projects to scale up of and integration into existing programs or standardized practice. This includes the geographic expansion of programs, referred to as “horizontal scale-up,” and the inclusion of key implementation inputs into existing systems—such as training, tracking, and policies—referred to as “vertical scale-up” (see Figure 1).<sup>8</sup> The importance of “starting with the end in mind,” contributed to the development of approaches and tools.<sup>9-15</sup>

More recently, systems frameworks and tools have been developed for promoting “sustainable development,” defined by the World Commission on Environment and Development (WCED) as “development that meets the needs of the present without compromising the ability of future generations to meet their own needs.”<sup>16</sup> Sustainable development has taken on increased salience in the face of climate change issues and the growing importance of building resilient systems.<sup>2, 17-20</sup> Appendix 1 provides a table showing the evolution of definitions of sustainability.

**Figure 1. Critical Dimensions of Sustainability of HIPs**



Source: Adapted from WHO/ExpandNet, 2009: 31.

There is growing recognition that practices will not remain static over time since health systems evolve and change. For example, many countries have shifted support from doorstep delivery of pills and condoms by community health workers to a more cost-effective community depot system or through quality controlled pharmacy and drug shop distribution.<sup>21,22</sup> Programs and practices must adapt and modify over time to best meet the changing needs of the communities they serve.

### **Important Dimensions of Sustainability for Evidence Review**

For the purposes of this document, we have focused on the literature on scale up. For decades, efforts to increase the scale of promising and well-resourced pilots and small-scale projects have been limited by various factors, thus making it difficult for those projects to reach their full potential effect. Writing for ExpandNet ([www.expandnet.net](http://www.expandnet.net)), Simmons et al. defined scale up as “deliberate efforts to increase the impact of health service innovations successfully tested in pilot or experimental projects so as to benefit more people and to foster policy and program development on a lasting basis.”<sup>23</sup> The term, “lasting basis,” implies that institutional capacity building is based on local health systems and that sustainability of the practice is the end goal of any scale-up effort. Change management is seen as key to achieving sustainable scale up of interventions.<sup>15</sup> “Developing an effective process for change helps avoid the chronic mistake of underestimating what it takes to make change stick [and]...is a critical factor for successfully adapting, implementing, scaling up, and sustaining best practices.”<sup>15</sup> Sustainable scale up is not the same as routine program implementation but rather requires “extra thought, attention, and planning.”<sup>24</sup>

Four practice characteristics relevant for the work of the HIPs and any evidence review process are considered critical for predicting sustainable implementation and scale-up:

1. stakeholders must see benefit in the practice or in switching from an existing practice,
2. compatibility with existing norms and practices,
3. clarity of what is being implemented (what is different), and
4. simplicity.<sup>25,26</sup>

## Important Dimensions of Sustainability for Implementation

Sustainability is largely driven by characteristics of context and implementation. Four dimensions of scale up are particularly relevant for implementation of HIPs, with an eye toward sustainability. These relate to organizational, political, and financial sustainability of practices, while maintaining equity of access and quality of services.<sup>14,27</sup> These dimensions are often considered at the national family planning program level. Here, we focus on their relevance to supporting implementation and scale up of sustainable HIPs.

### Box 1. Four Key Dimensions of Sustainability

- Political and Policy Sustainability
- Financial Sustainability
- Organizational Sustainability
- Maintaining Equity of Access, Coverage and Quality of Services

- **Political and Policy Sustainability** – A strong enabling environment including laws, policies, and regulations that promote sustainability and political commitment. Civil society groups and organizations can promote political sustainability by highlighting demand for the practice and by holding policymakers, funders, and program implementers accountable.
  - ✓ What is the level of political support for the high impact practice from program or organizational leadership?
  - ✓ Is there consensus on the practice, or is it politically or culturally controversial?
  - ✓ Are there “champions” advocating for the high impact practice?
  - ✓ What, if any, policy (national or operational), legal, institutional, or other political changes are needed for adoption or further integration of the high impact practice into the health system?
  - ✓ Are advocacy and legitimation strategies needed to build support for sustainability of the high impact practice?
- **Financial Sustainability** – Local resources need to supplant donor resources, including income generation when needed.
  - ✓ What financial resources exist to adequately sustain the high impact practice within the health system?
  - ✓ What are the implementation costs of the high impact practice and how are they currently being funded (e.g. donor and/or country and/or other organizational funding)?

- ✓ What political, policy, legal, or institutional changes—involving which ministries or organizations—are needed to ensure sufficient financial resources for continued implementation of the high impact practice?
- **Organizational Sustainability** – Institutional/organizational/programmatic sustainability, including capacity to implement the high impact practice and make improvements in efficiency. Fundamentally, high impact practices need to have one or more organizational homes to be sustained.
  - ✓ Is the home a Ministry of Health or other ministry (e.g. Ministry of Education) or one or more NGOs?
  - ✓ Does the high impact practice require a range of organizations for implementation?
  - ✓ Does it require contracting out (e.g. for mHealth or mobile outreach services)?
  - ✓ What will be required to institutionalize the high impact practice into this/these organizations, including in all operational guides, resource allocation plans, staffing plans/succession planning, training plans, commodity procurement plans, and monitoring and evaluation (M&E) plans?
- **Maintaining Equity of Access, Coverage, and Quality of Services** – Ensuring that financial sustainability and cost considerations do not negatively affect equity of access to and coverage and quality of the delivery of the high impact practice. Increasingly, family planning programmers seek to reach marginalized, underserved, and hard-to-reach populations, including adolescents and youth. Defining sustainability in financial terms can adversely affect the reach of the high impact practice, most notably to the poor, the young, and people living in rural areas. Considerations of sustainability should include how the high impact practice will be of high quality and made widely available on an ongoing basis.

Illustrative examples:

These dimensions of sustainability have been highlighted by Chandra-Mouli et al. in their review of sustainability of adolescent sexual and reproductive health (ASRH) programming.<sup>28</sup> Reflecting on ASRH programming in a number of countries, they noted the importance of engagement and ownership of government officials at national and subnational levels; the role of civil society in creating demand for ASRH programming, developing popular support for the programming, and holding programs accountable for implementation; and the importance of sustained financing—either from donors or national sources.

## Key Questions for Developing and Reviewing HIP Briefs and Promoting Implementation of High Impact Practices in Country Programs

Stakeholders in the HIP Initiative should carefully consider sustainability in identification and classification of HIPs as well as in support of implementation of HIPs in country programs.

The characteristics that make programs scalable are well documented. ExpandNet developed a list of 12 recommendations to ensure that pilots or small-scale projects are designed to be scalable and sustainable (see Table 1).<sup>30</sup> Some of the recommendations relate to scale-up process and include such characteristics as the need to engage stakeholders and ensure that policies are in place to support the practices. These characteristics are most relevant for implementers and are context specific. Characteristics related to the practice itself, including, how well-defined it is, what level(s) of complexity is addressed, and how feasibly it can fit into the existing health system. Such attributes are most relevant for evidence producers and reviewers. Based on these observations, we propose questions to guide the HIP Initiative as it considers the potential for scale up and sustainability in identification and classification of HIPs; and for implementers and policymakers to guide scale up of high impact practices. These questions are shown in Table 1.

**Table 1. Questions and Considerations About Sustainability in Relation to the HIP Initiative, for Authors, Reviewers, and Implementers**

Questions to ask about sustainability of the HIPs	Authors/ Reviewers should address these in the HIP brief	Implementers should consider these points
Is the practice clearly defined?	X	X
Is the practice programmatically relevant?	X	
Has the practice been scaled beyond its initial setting to reach a larger portion of the target population?	X	
Has the practice been tested under routine operating conditions and existing resource constraints of relevant health systems (e.g. beyond controlled pilot settings)?	X	X
Is the practice simple enough (e.g. it is not overly complex or reliant on charismatic individuals) such that the inputs required to implement it are manageable at large scale?	X	X
Is there an organizational home and leadership for the practice? If the practice crosses organizations/ministries, are they aligned on the practice implementation and are the roles and responsibilities for implementation clear?		X
Are all relevant stakeholders involved in the process of scaling up the HIP?		X
Have the stakeholders reached consensus on their expectations for scale up?		X
Is the source of funding for the practice scaled up reliable over a reasonable time period? What are the sources of		X

funding (national/donor)?		
Are policies, regulations, and other system components in place for sustainable scale up of the practice?		<b>X</b>
Does the definition of sustainability of the practice include a focus on equity and quality—not just financial sustainability?		<b>X</b>
Is there a plan to implement M&E and learning as part of the scale-up process and/or the scaled-up practice to assess sustainable implementation of the practice?		<b>X</b>

Sources: These questions are adapted from the 12 recommendations for scaling up sustainable practices<sup>30</sup>; the Scalability Assessment Tool (MSI, 2012); the *Guide for Monitoring Scale-up of Health Practices and Interventions*<sup>24</sup>; and *A Systems Approach to Sustainability for USAID Global Health*<sup>19</sup>



## Resources on Sustainable Scale Up

Many resources and tools are available to guide and monitor the scale-up process, consider sustainability, and monitor the sustainability of interventions that have been scaled up. Given the range of proven and promising HIPs, the following tools are useful references for those developing HIP briefs to consider sustainability as they are developing the tips for implementation sections of the HIP briefs.

Rogers (2003) *Diffusion of Innovations*<sup>29</sup> is a seminal work that explains how, why, at what speed, and to what extent new ideas, technologies, and HIPs spread, take root, and are sustained by individuals, institutions, organizations, and programs. Key factors that influence adoption, continuation, scale up, and sustainability include potential adopters' perceptions of the practice's benefit, including its relative advantage over existing practice; compatibility with existing norms and practices; simplicity; and observability (i.e. visibility to potential future adopters of the practice). Taken together, these characteristics account for most of the rate and extent of a practice's adoption. Other important considerations include *who* is adopting the practice—such as the importance of identifying early adopters and cultivating “champions”—and system factors that enable or impede adoption of the high impact practice.

World Health Organization (WHO)/ExpandNet's resources are available on [www.expandnet.net](http://www.expandnet.net) and include, among many other resources, a practical guide to scaling up a project, a nine-step guide with worksheets for developing a scaling-up strategy,<sup>13</sup> and a guide for designing pilot projects with sustainable scale up in mind.<sup>30</sup>

WHO/ Implementing Best Practices Consortium (IBP) and U.S. Agency for International Development's (USAID) *Guide to Fostering Change to Scale Up Effective Health Services* (2007 and 2013) offer a “how to” process for fostering change in addition to fostering change indicators.<sup>14,15</sup> This guide is based on the principles of diffusion of innovation,<sup>29</sup> including how innovations spread and factors associated with the process of change. This guide also incorporates and links to ExpandNet tools.

Management Sciences International's (MSI) *Scaling-Up: From Vision to Large Scale Change. Tools and Techniques for Practitioners*<sup>11</sup> includes a worksheet to consider institutionalization of the practice, including the phases of start-up, development, expansion/consolidation, and sustainability. In addition, this resource includes a scalability assessment tool to guide the determination of whether an innovation/practice is likely to be relatively straightforward or if it may be difficult to scale up.

The Health Care Improvement Project's *Options for Large-Scale Spread of Simple, High Impact Interventions*<sup>31</sup> describes a framework that addresses three key questions: What are we trying to spread? To whom do we want to spread it, and by when? How will we spread it? Building on the scientific basis for spread, the report provides illustrative approaches and lessons learned from applying them. These approaches include: natural diffusion, executive mandates, use of extension agents,

emergency mobilization, use of an affinity group, collaboratives, virtual collaboration, wave sequence, campaigns, and hybrid approaches. The report lists eight lessons learned from large-scale spread.

USAID's Local Systems: A Framework for Supporting Sustainable Development<sup>18</sup> and USAID's *A Systems Approach to Sustainability for USAID Global Health*.<sup>19</sup> The framework for supporting sustainable development of local systems identifies five dimensions (5 "Rs") of a local system, namely Roles, Relationships, Rules, Resources and Results that together are the inputs, outputs, and results from the system. These dimensions, which can be strengthened in initiatives to promote sustainability of practices within health systems, are useful for implementers of HIPs to consider.

MEASURE Evaluation's Guide for Monitoring Scale-Up of Health Practices and Interventions<sup>24</sup> is designed to help monitor practices that are being scaled up and also those that have supposedly already been scaled up. The guide notes that "once scale-up is underway, few resources exist to help ensure continuous and systematic monitoring of the process to track progress toward sustainability of these innovations."<sup>24</sup> The guide is intended to help stakeholders ascertain if scale up is occurring as intended, to identify mid-course corrections if needed, and to assess if the practice can be sustained. The guide includes a flowchart to ascertain for which practices monitoring resources should be focused on and 10 considerations that serve as a "guide to monitoring how a practice or innovation is being incorporated into both services and systems in a participatory and sustainable way."<sup>24</sup>

ICF International's Family Planning Sustainability Checklist. A Project Assessment Tool for Designing and Monitoring Sustainability of Community-based Family Planning Services.<sup>9</sup> This guide is designed to assist project planners and implementers of community-based family planning projects to identify and incorporate key elements into the project in order to increase the likelihood of services continuing after the project ends. The guide includes a checklist to identify strengths and weaknesses in the systems that are needed to support and maintain community-based family planning services.

## Appendix 1. Evolution of Definitions of Sustainability

Years	Focus	Source
1980s	<b>Diffusion of Innovation</b>	<ul style="list-style-type: none"> <li>Seminal work that explains how, why, at what speed, and to what extent new ideas, technologies, and practices spread, take root, and are sustained by individuals, institutions, organizations, and programs.</li> </ul> Rogers, 2003 <sup>29</sup>
	<b>Program sustainability with donor phase out</b>	<ul style="list-style-type: none"> <li>Focus on program sustainability with donor phase out; USAID restructuring emphasized sustainable development, whereby programs receiving USAID funding should demonstrate the potential for continued health impact, even after funding ends.</li> </ul> Shediac-Rizkallh, 1998 <sup>1</sup> ; USAID, 1999 <sup>3,4</sup> ; Khalifa et al., 2001 <sup>32</sup>
		<ul style="list-style-type: none"> <li>The Office of Population at USAID emphasized sustainability in its strategic plan with two indices developed to measure family planning sustainability of programs and fertility transition.</li> </ul> Stephenson et al., 2004 <sup>2</sup>
		<ul style="list-style-type: none"> <li>Increased attention to sustainability with PEPFAR funding phase out has resulted in the development of a systems approach to sustainability for USAID Global Health.</li> </ul> USAID, 2014 <sup>18</sup> ; USAID, 2015 <sup>19</sup>
	<b>Sustainability of organizations</b>	<ul style="list-style-type: none"> <li>Focus on sustainability of NGOs as a result of donor phase out. Improving quality of services, expanding coverage, and increasing program sustainability should not be considered incompatible goals</li> </ul> Ashford and Haws, 1992 <sup>5</sup>
		<ul style="list-style-type: none"> <li><i>Sustainable Social Marketing Self-Assessment Tool</i> assesses performance across four elements of sustainability: technical, financial, institutional, and market.</li> </ul> O'Sullivan et al., 2007 <sup>6</sup>
<ul style="list-style-type: none"> <li>ProCapacity Index assesses sustainability of NGOs on three dimensions: financial, programmatic and organizational.</li> </ul> <a href="#">Abt Associates, n.d.</a> <sup>7</sup>		
2000s	<b>Sustainable scale up of specific practices/ programs</b>	<ul style="list-style-type: none"> <li>WHO's <i>Strategic Approach to Strengthening Sexual and Reproductive Health Policies and Programmes</i><sup>33</sup> directed deliberate attention to scaling up with sustainability inherent in any discussion of scale up. ExpandNet and other approaches to scale up have advocated starting with the end in mind and focusing on sustainable scale up. The fostering change guide from WHO/IBP and USAID<sup>15</sup> provides an overarching framework for scale up by emphasizing sustainability through the notion of "making change stick." Tools for sustainability of specific programs, such as community-based programs, are also available.</li> </ul> Simmons et al., 2002 <sup>23</sup> ; WHO/ExpandNet and USAID, 2007 <sup>14</sup> ; WHO/ExpandNet, 2010 <sup>13</sup> ; Cooley and Kohl, 2006 <sup>25</sup> ; MSI, 2012 <sup>11</sup> ; WHO/IBP and USAID, 2007, <sup>14</sup> 2013 <sup>15</sup> ; Arscott-Mills et al., 2012 <sup>9</sup> ; Ghiron et al., 2014 <sup>34</sup>
	<b>Sustainable development</b>	<ul style="list-style-type: none"> <li>The term "sustainable development" has been used in conjunction with family planning programs for nearly a decade, although the term is increasingly more widely used in association with the Millennium Development Goals (MDGs) and, of late, the post-2015 development agenda and Sustainable Development Goals. Sustainable development links development activities with environmental sustainability.</li> </ul> Stephenson et al., 2004 <sup>2</sup> ; Hill et al., 2013 <sup>17</sup> ; WCED, 1987; United Nations, n.d. <sup>20</sup>

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