



Maximizing Use of Existing Data to Strengthen Program Design, Evaluation and Impact Lab

Status Update

May 2020

Lead Partners:

HealthBridge Foundation of Canada
University of Montreal



PROGRESS TO DATE:

- Consulted expertise from '[Statistics 4 Sustainable Development](#)' to refine modelling relationship between non-governmental organizations (NGOs) and Demographic and Health Surveys Program (DHS) and Multiple Indicator Cluster Surveys (MICS) estimates. The co-variables being considered include geographical comparison level, years apart in data collection and seasonality.
- Partners meeting was held to coordinate project kick-off and to review and agree upon work plans and research protocols.
- Completed the selection and analysis of publicly available data with select years of DHS and MICS.
- Completed database gathering of 46 baseline reports covering 23 low-and middle-income countries. NGO's baseline reports supplied by partners using a convenience sample. Selected NGOs' baseline report and matched publicly available data from DHS/MICS produced an extraction of over 100 indicators that were compiled and analyzed.

NEXT STEPS:

- Finalize the dataset and conduct modelling in SAS and R to conduct comparisons.
- Systematize the rough work leading the project team to arrive at their final conclusions and process lessons learned.
- Conduct a case study with the Vietnam team using HealthBridge's baseline data, with future considerations for a case study in Nepal.
- Knowledge translation of project outputs using webinars, academic papers, lunch & learns and other partnership opportunities.

INSIGHTS SHARED:

- Preliminary results: Concordance between NGO and DHS/MICS estimates was highly variable. Differences are small for some indicators and larger for other indicators. Partners continue to work on understanding and documenting the patterns of concordance to determine if using DHS/MICS datasets would be useful for baseline surveys by NGOs.
- Both the DHS and MICS surveys are often collected on national and provincial levels (or equivalent) and NGO reports usually correspond to smaller regions, such as villages or targeted communities. To compare estimates from NGO baseline reports with DHS/MICS data in the absence of data from the exact same geographic locations, data was used from neighbouring locations, or a higher level in the "geopolitical hierarchy" that was available (ex. village to provincial level).



- Multiple years of DHS/MICS databases were selected to compare to the NGO data to test the stability of indicators over longer periods of time.

REFLECTION:

“The MaxData project has been able to explore an important and complex question. Many NGOs use DHS or MICS data to inform and develop their programs without knowing how closely the estimates represent their target population. Therefore, the answers to the questions we are asking will inform our sector about the validity of such a practice.”

- *Partner from HealthBridge Foundation of Canada*

