



Instituto Nacional de  
Salud Pública

Global Evaluation and Monitoring  
Network for Health (GEMNet-Health).  
Planning Meeting.



February 19-22, 2017.  
Cuernavaca, México.

# GEMNet-Health Planning Meeting

February 23–25, 2017

Cuernavaca, Mexico

Hemali Kulatilaka  
Lauren Hart  
Heather Keck

**May 2017**

WS-17-35





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## ABBREVIATIONS

ACIPH	Addis Continental Institute of Public Health
AeHIN	Asia eHealth Information Network
CESAG	Centre Africain d'Etudes Supérieures en Gestion
CLEAR	Centers for Learning on Evaluation and Results
GEMNet-Health	Global Evaluation and Monitoring Network for Health
ICT	information and communication technology
INSP	Instituto Nacional de Salud Pública
IPSR	Institute for Population and Social Research
KU	Kenyatta University
LAC	Latin America and the Caribbean
M&E	monitoring and evaluation
MOOC	massive open online course
MPH	master of public health
PHFI	Public Health Foundation of India
PRISM	Performance of Routine Information System Management
RELAC SIS	Red Latinoamericana y del Caribe para el Fortalecimiento de los Sistemas de Información de Salud
RHIS	routine health information system(s)
TOT	training of trainers
UG	University of Ghana
UP	University of Pretoria
USAID	United States Agency for International Development
3ie	International Initiative for Impact Evaluation

# INTRODUCTION

In February 2017, the Global Evaluation and Monitoring Network for Health (GEMNet-Health) met in Cuernavaca, Mexico, for their planning meeting. The meeting was hosted by the Instituto Nacional de Salud Pública (INSP). Representatives from nine of the ten GEMNet-Health partner institutions were present at the meeting, including members of the GEMNet-Health secretariat: MEASURE Evaluation (funded by the United States Agency for International Development [USAID]). A full participant list appears in Appendix V.

The purpose of this planning meeting was to review successes of the network since the last meeting, in 2015; develop a list of potential future activities for the network; and then prioritize these activities to develop an updated strategic plan for the network.

The following were the detailed objectives of this meeting:

1. Review GEMNet–Health accomplishments over the past two years.
2. Understand new and current activities related to evaluation and health systems at each of the GEMNet–Health member institutions.
3. Discuss potential collaboration with other organizations including International Initiative for Impact Evaluation (3IE) and Centers for Learning on Evaluation and Results (CLEAR).
4. Share experiences with collaborative activities around evaluation.
5. Discuss strategies for promoting future collaboration among GEMNet–Health member institutions.
6. Generate a list of potential future activities both in evaluation and health information systems for GEMNet-Health; this list will feed directly into the priority setting and strategic planning process.
7. Identify and prioritize future GEMNet–Health activities relating to rigorous evaluation and health systems strengthening.
8. Revise and update the GEMNet–Health Capacity Building and Strategic Plan, including a detailed plan for achieving network priorities discussed on days one and two.
9. Discuss and determine next steps related to transition of Steering Committee and Executive Committee positions, committee structure, and GEMNet-Health Policy on Revenue Sharing for Joint Workshops.

# DAY 1—FEBRUARY 23, 2017

## Opening Ceremony

Sanjay Zodpey, of the Public Health Foundation of India (PHFI) initiated the opening ceremony with a welcome address. Next, Sanjay Zodpey presented a brief overview of the meeting agenda as well as an icebreaker. Participants from all institutions introduced themselves.

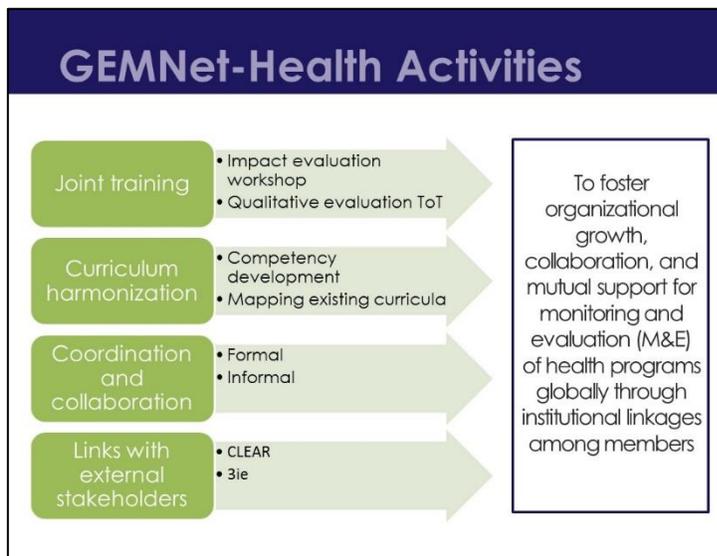
## Celebrating Successes

The next session on “Celebrating Successes” was facilitated by Sanjay Zodpey, who highlighted the network’s accomplishments since the last face-to-face meeting, in 2015, in India. Further details and discussion of these activities will take place during the meeting.

In addition to reviewing the network accomplishments, Sanjay Zodpey thanked Andy Beke (University of Pretoria [UP]) for his time and service to the network, by giving him a plaque for his service as chair of GEMNet-Health from 2014–2016. He also recognized the retirement of two Steering Committee members: Amani Koffi, from the Centre Africain d’Etudes Supérieures en



Sanjay Zodpey (PHFI), current GEMNet-Health chair, presenting Andy Beke (UP) for a plaque in honor of his service as GEMNet-Health chair from 2014 until 2016



GEMNet-Health activities as presented by Sanjay Zodpey (PHFI) during the “Celebrating Successes” presentation

Gestion (CESAG), and Amara Soonthornhdhada, from the Institute for Population and Social Research (IPSR), Mahidol University. He also welcomed new members from CESAG (El Hadji Gueye) and IPSR (Pojjana Hunchangsith).

Next, Sanjay Zodpey reviewed the other committees and groups that have met over the past two years and have been responsible for the network’s accomplishments. In 2015, the network’s committee was restructured, by dismantling the Capacity Building and Network Support Committees and creating the Coordination and Collaboration Committee on a trial basis. This decision was revisited at the business meeting scheduled at the end of

the planning meeting and reported below. Short-term task groups took on projects that did not fit within the purview of the Coordination and Collaboration Committee. Since 2015, two task groups have been convened: the Finance Task Group and the Postgraduate Evaluation Curriculum Harmonization Task Group.

Joint training has been an area of focus for GEMNet-Health over the past two years. The network has held two international workshops on impact evaluation of population, health, and nutrition programs since 2015—one in New Delhi, India, and one in Accra, Ghana—that built on the experience of the first GEMNet-Health impact evaluation workshop, held in Pretoria, South Africa. Faculty from GEMNet-Health member institutions and MEASURE Evaluation taught all three workshops. The GEMNet-Health Policy on Revenue Sharing for Joint Workshops was implemented for the first time at the Ghana workshop. The section on [Training on Impact Evaluation](#) (below) offers details.

Developing and harmonizing postgraduate evaluation course curricula is a priority for GEMNet-Health. Building on the process that GEMNet-Health followed to harmonize monitoring and evaluation (M&E) competencies, GEMNet-Health's curriculum development efforts around postgraduate evaluation education over these past two years has progressed a good deal. GEMNet-Health's first step was a competency harmonizing exercise presented in the Report of the GEMNet-Health Task Group on Core Competencies for Postgraduate Evaluation Courses. This work was presented at the American Evaluation Association meeting in Atlanta, Georgia, in October 2016. Some GEMNet-Health member institutions have already begun aligning their courses with the core competencies. Additional detail will be presented later in this report.

The task group of GEMNet-Health experts reconvened to build on the core competencies and map existing course curricula from each of the member institutions to the competencies. This work is ongoing and will be presented in detail later by the task group's chair, Juan Pablo Gutiérrez. This work will also be presented at the Public Health Research Congress, in Cuernavaca, as part of a panel on evaluation education.

MEASURE Evaluation staff members have engaged GEMNet-Health members to collaborate on training and curriculum development, in addition to the curriculum development work that was led by GEMNet-Health. GEMNet-Health representatives worked with a global group of experts, including MEASURE Evaluation staff, to develop a routine health information system (RHIS) curriculum, and PHFI and the University of Ghana (UG) are involved in piloting this curriculum. Earlier this week, GEMNet-Health representatives joined Jessica Fehringer and Carolina Mejia, both of MEASURE Evaluation, for a qualitative evaluation training of trainers (TOT). A curriculum advisory committee composed of GEMNet-Health experts and MEASURE Evaluation staff developed the curriculum for the TOT.

These past two years have illustrated the value of the relationships among partner institutions. Joint ventures outside GEMNet-Health have included collaborative research, external thesis advisors and examiners, and guest lectures. Details of these collaborations as well as reports on formal collaborations appear below. Sanjay Zodpey encouraged participants to use this meeting as a time to come together with colleagues from other institutions and explore additional ways to support each other in new and creative ways.

Over the past two years, GEMNet-Health has continued to pursue partnerships with other organizations working in evaluation capacity building. 3ie has continued to provide fellowships for the impact evaluation workshops, and GEMNet-Health has engaged in discussions both with 3ie and CLEAR about other potential ways to collaborate on capacity building, especially about training, curriculum development, and research. The

World Health Organization, South-East Asia Regional Office has also been a collaborator on RHIS capacity building and networking activities in Asia.

Sanjay. Zodpey closed the session with an overview of the focus of the meeting, with the next three days devoted to coming up with new ideas for activities to further our mission. He encouraged participants to think creatively as they brainstorm ideas for collaboration. He also noted that these meetings are an exciting opportunity to come together to build on our success and chart a way forward.

## Poster Presentation by all GEMNet-Health Member Institutions



Justice Nonvignon presenting on behalf of the University of Ghana during the poster session

and on the first day, individual institutions delivered short presentations on their posters, highlighting their offerings on evaluation and health systems strengthening.

Participants were encouraged to take time to review the posters, which were displayed throughout the meeting, as another way of sparking collaboration.



Himanshu Negandhi presenting on behalf of the Public Health Foundation of India

## Links with External Stakeholders

Although the primary focus of GEMNet-Health activities has been on promoting and expanding collaborative activities among the GEMNet-Health member institutions, exploring linkages and collaborative activities with other organizations that do similar work has also been a priority. Engagement with external

In addition to showcasing its accomplishments, the network also showcased the individual member institutions' activities related to evaluation, monitoring, and health information systems.

At this meeting, a fresh approach was adopted that involved each institution preparing a poster summarizing their institution's activities.

These posters were displayed in the meeting room



Inonge Kamungoma-Dada presenting on behalf of the University of Pretoria. Poster presentations were an opportunity for faculty from the GEMNet-Health partners to highlight their institution's work around evaluation and health systems strengthening.

stakeholders has always been of great interest, but in the past couple of years, there has been a more concerted effort to actively reach out to others who are working on evaluation-related activities. With the decision in 2015 not to expand membership of the network beyond its current composition, focus shifted to establishing linkages and exploring collaborative activities with organizations that are involved in capacity building and research activities in areas of mutual interest. A two-page briefing document highlights the scope of GEMNet-Health's evaluation-related activities, which is useful for reaching out to other agencies to identify these areas.

GEMNet-Health's most active engagements to date have been with 3ie and CLEAR. During this session, past collaborations and discussions with CLEAR and 3ie about potential activities were highlighted.

Representatives from CLEAR (Centres for Learning on Evaluation and Results) and 3ie presented their capacity building and research activities related to evaluation.

1. Gabriela Pérez Yarahuán, General Coordinator, CLEAR-Latin America and the Caribbean (LAC) and Ms. Urmy Shukla, Senior Knowledge Manager, CLEAR-LAC, represented CLEAR at the planning meeting. Since receiving trust funds in 2010, CLEAR has opened six centers in Latin America, Brazil, Africa, and Asia. Gabriela Pérez Yarahuán said that CESAG is the CLEAR regional center for Francophone Africa. CLEAR has supported and promoted a variety of conferences by providing scholarships, panels, and workshops. Currently, more than 13,000 people participate in their activities. CLEAR offers a successful diploma program for M&E training twice a year. They also offer introductory and advanced impact evaluation courses. One of CLEAR's objectives is to find financial stability in the future, including sponsorship for courses.



Laura Magaña Valladares (at the podium) introducing the session on GEMNet-Health links with external stakeholders. Sara Pacqué-Margolis (shown on screen) joined the session via WebEx.

2. In 2017, CLEAR will explore how to develop a measurement for evaluation capacities.
3. Sara Pacqué-Margolis, deputy director and head of 3ie's Washington, DC, office spoke on behalf of 3ie. 3ie is an organization that focuses on grant making and quality assurance for impact evaluation studies, replication studies, and so forth. They have produced many knowledge products online, including evidence gap maps and an impact evaluation repository. 3ie has awarded more than 200

grants in more than 50 countries, and they currently have offices in New Delhi, London, and Washington, DC. Both CLEAR and 3ie have identified the need for mixed-methods evaluations as a priority moving forward.

3ie focuses on advocacy and capacity building to promote evidence uptake and use, by including local researchers and building stakeholder alliances. 3ie collaborates with GEMNet-Health by providing bursaries for impact evaluation training workshops and is looking forward to collaboration on curriculum development and training.

4. 3ie collaborates with institutions in low- and middle-income countries by providing “policy windows.” Policy windows are funding mechanisms through which 3ie works with countries to develop questions for impact evaluations of policy and programming. 3ie has various levels of membership, with most members being national institutions

After the presentations by CLEAR and 3ie, there was discussion on the following topics:

1. Mixed-methods evaluations: CLEAR has done few mixed-methods evaluations. Some have been mixed assessments and executive evaluations, which do not have any fieldwork and are based on documents. CLEAR would like to engage in mixed-methods evaluations. 3ie has identified and incorporated research as a step in the design of impact evaluations. Mixed methods have been highlighted as a priority moving forward.
2. Curriculum development: CLEAR offers impact evaluation courses. CLEAR-LAC offers six to eight graduate programs (PhD and master’s degree). CLEAR is now trying to develop a strategy for offering training.
3. Long-term trainings: 3ie is not structured to provide funding for long-term training. 3ie has evolved from a start-up, where it received core funds from three funders, to a project-based funding model.

## **Postgraduate Evaluation Curriculum Harmonization**

The objectives of this session were as follows:

- To share GEMNet-Health’s work to date on postgraduate curriculum harmonization
- To get feedback from the group on the process and products
- To share institutional efforts to align postgraduate evaluation curricula with core competencies
- To discuss ideas for next steps for curriculum harmonization and institutional course plans

Sian Curtis, of MEASURE Evaluation, facilitated the session and presented an overview of the network’s activities to date.

Postgraduate training in evaluation is an essential part of the infrastructure for building a sustainable evaluation workforce. In response to this need, several GEMNet-Health partner institutions are engaged in or are in the process of developing postgraduate training in evaluation. GEMNet-Health identified harmonization of curricula among its member institutions as a priority activity in 2015 and convened a time-limited technical task group to advance this goal. Building on previous curriculum harmonization efforts to develop core competencies for M&E programs, the Task Group on Core Competencies for Postgraduate

Evaluation Courses aimed to identify a set of essential competencies and corresponding core elements of curricula for postgraduate evaluation courses, which would help GEMNet-Health member institutions develop a consistent and coordinated approach to evaluation training. We will hear more about the work of this task group in a moment.

Taking advantage of the group of GEMNet-Health evaluation experts who gathered for a TOT workshop on impact evaluation (Ghana; May 2016), MEASURE Evaluation added a mini-workshop on postgraduate evaluation curriculum development. The goals of the mini-workshop were as follows:

- Share experiences developing and integrating evaluation curricula in existing or new graduate-level public health courses, modules, or degree programs at the GEMNet-Health partner institutions
- Apply and verify GEMNet-Health core competencies in existing or new graduate-level public health courses, modules, or degree programs at GEMNet-Health partner institutions

The first day of the mini-workshop focused on sharing experiences integrating evaluation in graduate programs. The second day of the mini-workshop focused on reviewing the draft core competencies and comparing the draft competencies against existing curricula at each institution to identify gaps in existing institutional curricula that might need to be filled, and identify any gaps that might exist in the core competencies.

In October 2016, the task group's work was presented at the American Evaluation Association conference, in Atlanta.

The next phase of curriculum harmonization is ongoing. A task group was convened in October 2016 to focus on compiling course curricula and materials related to postgraduate evaluation courses (e.g., reference materials, slides, talking points, etc.) available at the GEMNet-Health partner institutions and categorizing and organizing them according to corresponding core competencies. As part of this process, the INSP evaluation specialization curriculum was translated into English so it could be shared with GEMNet-Health partners.

The task group has proposed next steps, which will be discussed during this session and prioritized later during the updating of the GEMNet-Health strategic plan.

Juan Pablo Gutiérrez presented the process and products of the Competency Development Task Group. Juan Pablo provided background on the task group's approach, including a rationale for following a competency-based approach to evaluation training and highlights of the task group's recommendations for core and optional competencies for an overview evaluation course at the master's level, organized by skill level and topic. He also described the follow-on phase of the Curriculum Development Task Group on compiling core materials from GEMNet-Health institutions into a repository organized by generic course sessions and core competencies. This session was an opportunity for the Curriculum Development Task Group to get feedback from the audience.

Next, each GEMNet-Health member institution gave a brief overview of the steps they had taken to develop or refine their postgraduate evaluation curricula. Many member institutions noted that they had already incorporated several core competencies in their course curricula, but others noted that bureaucratic barriers have impeded this process. In the interim, there are opportunities to integrate the competencies in a more

modularized approach. The idea of standardized modular curriculum materials was well received and was thought to be more readily accepted by member institutions.

Next, individual institutions presented updates on how they plan to align their existing evaluation course curricula with the core competencies:

- University of Pretoria (UP): A master of science degree in public health, which would address all the evaluation core competencies and beyond, has been proposed and is awaiting senate approval. The master of public health (MPH) program should benefit from the competencies, with competencies being covered in some courses.
- Mahidol University, IPSR: Some core competencies—not all—have been applied already. IPSR will continue to move forward in aligning courses with competencies.
- Addis Continental Institute of Public Health (ACIPH): Discussions are taking place on how to harmonize the existing curriculum with the competencies. Plans are to strengthen the master's degree in M&E.
- Public Health Foundation of India: The foundation has decided which two tracks would be offered during the first year of the program. Not all competencies will be covered, but the program will touch on all of them in some way in the core courses.
- University of Ghana: Some academic programs have evaluation embedded in them. Plans are to begin to use the competencies and revise existing courses. As part of the new master's program in M&E, some of the competencies can be incorporated in the course innovations in M&E.
- Kenyatta University (KU): There is agreement that the fundamentals of the M&E course will become a core course in the MPH program.
- Instituto Nacional de Salud Pública: There are at least three courses that cover evaluation topics in master's programs. It would be easier for everyone if a template syllabus were developed.
- Centre Africain d'Etudes Supérieures en Gestion: When building a program, it is necessary to consider the goal of the program and its impact on society. As a country, the demand for M&E is not there. However, there is demand for a health economics program in Senegal. The center is considering incorporating M&E in the health economics program.

There was general discussion about next steps for the task group. Consensus emerged on developing a modular syllabus and developing a package of materials (learning objectives, syllabus, slides, references, case studies, etc.) for each module. Participants felt that having such a resource would be useful as they develop new courses and strengthen existing curricula.

## **Training on Impact Evaluation**

The session's objectives were to share GEMNet-Health's experience with impact evaluation workshops and to discuss and identify next steps, including adaptation of the impact evaluation curriculum.

Gustavo Angeles and Hemali Kulatilaka, both of MEASURE Evaluation, facilitated this session. Gustavo Angeles presented an overview of the progress made toward technical sustainability of the impact evaluation

workshops. Hemali described the approach to move to financial sustainability of joint GEMNet-Health workshops.

GEMNet-Health has identified joint training programs as an important priority for the network, which would promote GEMNet-Health's profile and its role in global public health. While joint trainings could be offered on many M&E topics, training programs requiring specialized or advanced technical skills are particularly well suited to joint training, because collaborative training facilitates the sourcing of technical expertise from multiple partner sites. GEMNet-Health identified impact evaluation workshops as its top priority, beginning with its first strategic plan. The first impact evaluation workshop under the GEMNet-Health banner was conducted in 2014 in Pretoria, South Africa. This was followed by another in New Delhi, India, in 2015, and another in Accra, Ghana, in 2016.

Gustavo Angeles pointed out that the goal has always been the technical and financial sustainability of GEMNet-Health impact evaluation workshops. Impressive progress has been made toward this goal since 2014, and key financial and technical sustainability milestones were achieved at the July 2016 impact evaluation workshop.

Following the learning and mentoring model, GEMNet-Health has followed a phased approach to acquiring skills to teach in international workshops, where faculty members attend workshops and TOT events. These are followed by co-teaching of sessions accompanied by mentoring, which is then followed by teaching sessions independently. A TOT workshop, held from May 2–May 6, 2016 in Accra, Ghana, was attended by seven faculty members from UG and nine faculty members from GEMNet-Health member institutions in Ethiopia, India, Kenya, and South Africa, who are involved in teaching impact evaluation workshops and other evaluation courses. The TOT's objective was to strengthen the capacity of the pool of GEMNet-Health instructors for future impact evaluation workshops, including the July 2016 workshop in Ghana.

The aim has been for MEASURE Evaluation instructional support to be gradually reduced over time, as GEMNet-Health instructors take on increasing teaching responsibilities. The goal is for GEMNet-Health member institutions to offer these specialized training programs independently, by pooling technical expertise. The 2016 impact evaluation workshop was an example of this approach and already demonstrates progress along this continuum of capacity building. Because of the training of GEMNet-Health faculty members at the 2014 and 2015 impact evaluation workshop in South Africa and India, followed by the TOT in 2016 and mentoring by Gustavo Angeles, they are now able to lead or co-teach sessions. For the first time, a GEMNet-Health partner faculty member (Justice Nonvignon, from UG) served as the co-technical lead for the workshop with Gustavo Angeles, from MEASURE Evaluation. A team of six faculty members from two GEMNet-Health partner institutions (UG and ACIPH), assumed responsibility for teaching 17 of the 24 workshop sessions. (Note: An additional three sessions were to be taught by a faculty member from PHFI, who was unable to participate owing to medical reasons.)

Gustavo Angeles stated that ACIPH will host the 2017 impact evaluation workshop from July 24–August 4. Details are forthcoming.

Ms. Kulatilaka described the phased approach toward financial sustainability and a full cost-recovery model adopted for joint GEMNet-Health workshops. In 2015, GEMNet-Health developed a policy on revenue sharing for joint workshops. The 2016 impact evaluation workshop was the pilot test for implementing the new GEMNet-Health Policy on Revenue Sharing for Joint Workshops. This policy was developed by the

GEMNet-Health Finance Task Group and in March 2016 the GEMNet-Health Steering Committee approved it. For the first time, all expenses related to participation by GEMNet Health faculty members to teach at the 2016 workshop (i.e., honoraria, travel expenses, accommodations, and per diems) were funded with revenue generated by the workshop fees. MEASURE Evaluation covered expenses for MEASURE Evaluation instructors. For the first time, all instructors, from within the host institution or other GEMNet-Health member institutions, received a flat honorarium of US\$400 per session. The number of instructors for the workshop was decided jointly by the co-technical leads from MEASURE Evaluation and UG.

As outlined in the revenue sharing policy and decided at the March 2016 Steering Committee meeting, surplus workshop revenue was divided into two portions: 70 percent of surplus revenue was allocated to the host institution; the remaining 30 percent was also to remain at the host institution, but was earmarked for GEMNet-Health activities. UG, in consultation with MEASURE Evaluation, calculated and divided the surplus workshop revenue according to the revenue sharing matrix included in the GEMNet-Health policy.

As specified in the GEMNet-Health policy, UG, in consultation with the GEMNet-Health Executive Committee, will ensure that the GEMNet-Health earmarked portion of surplus revenue will be used for eligible GEMNet-Health-related activities.

Lessons learned from this third joint training event have been documented and shared with all GEMNet-Health partners and will inform planning of joint training programs. The GEMNet-Health Policy on Revenue Sharing for Joint Workshops will be reviewed and revised as needed, based on the Ghana workshop experience.

The discussion following the presentations covered the following topics:

- Sponsorship of workshop participants: Sources of funding for participants varied across regions. Although demand for the impact evaluation workshops is high, sponsorship of participants remains a concern. Funders include USAID, United Nations agencies, the World Bank, employers, and local universities. Preference is given to those who have funding and those who work in government or nongovernmental organizations, and the aim is to have a variety of countries in attendance.
- Translation of impact evaluation curriculum: The curriculum is available in English and Spanish. There are no plans to translate it into French.
- Country-level workshops: These have been discussed for many years. INSP continues to offer an impact evaluation workshop in Spanish for the LAC region. PHFI and UG are developing a shortened impact evaluation workshop to be offered at the country level.
- Training on basics for local government: There is a great need for this. Impact and qualitative evaluation could be twin courses. Integrating methods (qualitative and mixed methods and impact evaluation) to customize the program to meet the needs of a country or region requires training.
- Training local implementing partners: One of MEASURE Evaluation's strategic approaches is to conduct evaluations with local implementing partners and build the capacity of those partners, as well. When funding is available, we try to identify people who can attend the impact evaluation training.

## DAY 2—FEBRUARY 24, 2017

### GEMNet-Health Collaborative Evaluation Activities

#### Introduction

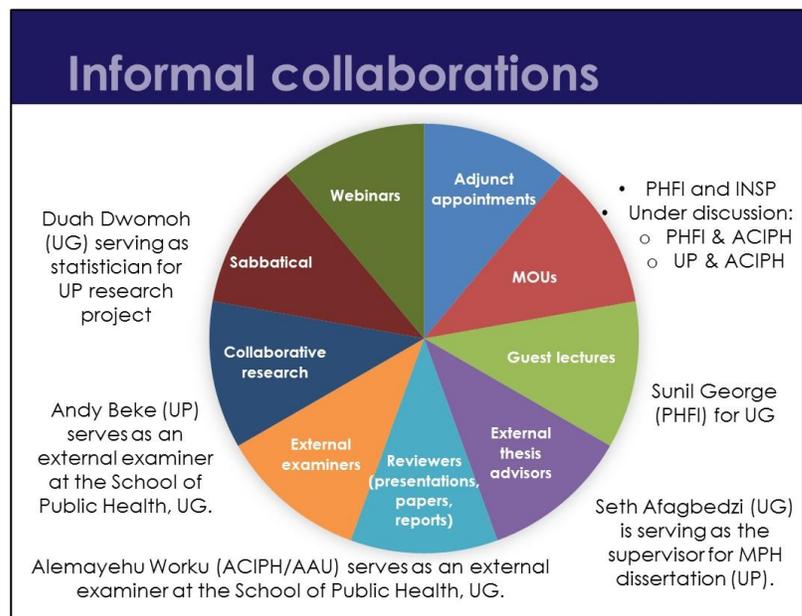
Justice Nonvignon and Dusita Phuengsamran, the focal persons for faculty exchange on the Coordination and Collaboration Committee, provided an introduction and overview. This included a brief introduction to the work of the Coordination and Collaboration Committee, with a review of collaborations between GEMNet-Health member institutions from the past two years and discussion of next steps

The work of the Coordination and Collaboration Committee includes faculty exchange, webinars, links with external stakeholders, and distance learning. As noted above, the Coordination and Collaboration Committee was set up on a trial basis to make sure that these priorities, identified when we were together in India, remained part of the GEMNet-Health agenda. The committee met quarterly over the past two years, with point people from the committee each taking on a specific area to shepherd between meetings, in collaboration with MEASURE Evaluation.

The image at right shows the wide range of collaborative activities that members could undertake with no formal prompting from the network (no outside funding, no mandate, etc.).

In addition to these informal collaborations, GEMNet-Health or MEASURE Evaluation organized several formal collaborations.

GEMNet-Health has held several webinars over the years. The most recent one was on basic data analysis training. This webinar was co-led by George Otieno from KU and Seblewengel Lemma from ACIPH, with advice and contributions from Anastasia Gage (MEASURE Evaluation). The purpose of the webinar was to present the curricula used for basic data analysis training at KU and ACIPH and to gauge interest in future webinars, particularly around data analysis. Judging by the interest—there were more than 100 registrants for the webinar—and responses during the webinar and in a follow-up survey, the network may want to include additional data analysis webinars or other work as we plan for the next two years. The experience of the data analysis webinar also highlights the utility of this format for exploring other topics, despite the challenges of



Slide from the presentation on GEMNet-Health collaborations by Justice Nonvignon and Dusita Phuengsamran. This slide shows examples of informal collaborations happening between GEMNet-Health partners.

bringing together partners from disparate time zones. Webinars are discussed in more detail later in this report.

## Presentations on Formal Collaborative Activities

To promote additional collaboration around evaluation, MEASURE Evaluation reached out to the GEMNet-Health member institutions for ideas for activities that could be pursued with a small amount of funding. Many interesting proposals were received, and support was provided for the following: process evaluation design for national health insurance schemes (with PHFI, UG, and UP as collaborating institutions); development of a module on evaluation theory (INSP, KU, and UG collaborated); and the exchange of virtual courses (with collaborations by INSP and PHFI). The teams presented their work to date and responded to questions. First, Himanshu Negandhi gave a presentation on the process evaluation design for national health insurance schemes, and then Juan Pablo Gutiérrez, and George Otieno presented on the development of a module on evaluation theory. Once these activities are completed, each team will draft a report that will be circulated to the network.

## Collaboration Around Distance Learning

Hemali Kulatilaka presented an introduction on GEMNet-Health's collaboration on distance learning. Harmonization of postgraduate evaluation curricula is an area of interest and focus for GEMNet-Health, and MEASURE Evaluation supported the translation into English of materials from INSP's virtual postgraduate evaluation-specialization curriculum. This translation of modules and an accompanying syllabus was completed late last year and was shared with all GEMNet-Health member institutions, with the hope that it would be a valuable resource for their efforts to develop and revise course curricula at their institutions.

Under the Memorandum of Understanding signed between INSP and PHFI in 2015, with MEASURE Evaluation's facilitation and support, PHFI and INSP have agreed to exchange virtual courses on evaluation. The first step in such an exchange had already been taken: the translation into English of the evaluation specialization curriculum. PHFI is interested in adapting this curriculum material to develop a virtual certificate course on evaluation in English, to be offered on PHFI's virtual learning platform. Similarly, INSP is exploring the feasibility of translating PHFI's virtual short course on M&E of population, health, and nutrition programs and offering it in Spanish through INSP's virtual learning platform.

Himanshu Negandhi presented an overview of PHFI's efforts to contextualize and adapt the course materials and structure of INSP's comprehensive evaluation course to Indian settings and prepare materials for



Hemali Kulatilaka (MEASURE Evaluation) gives an introduction to GEMNet-Health collaboration on distance learning.

uploading on PHFI's virtual platform (including recording of presentations). The certificate course is expected to be launched in June or July 2017.

## Discussion on Promoting and Encouraging Collaborative Activities

Participants engaged in a discussion of the following ideas for future informal and formal collaboration:

- Informal sharing of common training materials
- Collaborative data analysis
- Joint manuscript preparation and collaboration on research publications (some institutions can publish in certain journals for free)
- Identification of some research questions for people to work on
- Consideration of funding for manuscript editing
- Invitations to partner faculty to teach guest lectures
- Facilitation by the Coordination and Collaboration Committee to match people's research interests with activities
- Posting good, existing modules online for students
- Development of a GEMNet-Health massive open online course (MOOC) on M&E—a joint effort, which can be translated and uploaded to many sites
- Newsletter for GEMNet-Health (newsletters are inexpensive, so the electronic mail list could be quite large, allowing such a newsletter to be seen by many people)

The coordination and collaboration committee will discuss these options at its next meeting.

## World Café Sessions

Two small-group work sessions, structured in a World Café format, were held to discuss and brainstorm ideas for future GEMNet-Health activities relating to the following topic areas:



Session 1: Economic evaluation, qualitative evaluation, and evaluation of malaria programs

A small-group discussion during the World Café session



Session 2: M&E workshops, webinars, health informatics

A small-group discussion during the World Café session

The aim was to have these ideas feed into the strategic planning session on the final day of the planning meeting. The discussions are summarized below, by topic area.

## Economic Evaluation

All institutions have some offerings in training, technical assistance, or research activities relating to economic evaluation of health programs or budget prioritization among health interventions. The specific location of the faculty or staff with this expertise, and the location of the offerings, varied by institution. For example, at KU, faculty from the School of Economics teach offerings on impact evaluation. At INSP, economic evaluation is taught as part of health economics. UP, CESAG, and ACIPH all offer an economics evaluation course, and UG offers economic evaluation content within the School of Public Health. PHFI offers a five-day workshop, an elective in the MPH program, and a one-year distance-learning course on economic evaluation. IPSR offers a 10-day training and two elective courses on economic evaluation.

Most institutions expressed interest in nominating a representative for the advisory committee to work with MEASURE Evaluation on the development of the economic evaluation manual. When asked for feedback on the draft outline for the manual, the group suggested that final feedback be gathered from the advisory committee with representatives with specific expertise in economic evaluation. Ideas for topics missing included quality-adjusted life-years, consolidated health economic evaluation reporting standards, and scale-up costs.

As far as use of the manual, all institutions responded positively about using the manual to train faculty and students, including offering a regional workshop on cost-effectiveness analysis, and adapting the manual with country- or region-specific case studies. Even those who were not interested in nominating a representative for the advisory committee expressed interest in using the final product when available, although that same institution did not feel they would be able to offer a workshop independently.

## Health Informatics

As part of the health informatics discussion, the group brainstormed priority areas of capacity building for low- and middle-income countries. Suggestions included data management, data use, governance, big data analysis, need for a health orientation for information technology staff, and information and communication technology (ICT) as a tool for improved data quality and interoperability.

Next, the group discussed how the demand for health informatics programs manifests in GEMNet-Health members. PHFI offers both an MS and a PhD in health informatics that have stable demand. Faculty from UG noted that, within the domestic market, demand for their master's in health informatics is stable, and at KU, there is stable demand for the bachelor's and master's in health informatics. Generally, the group noted that there is a need-demand paradox, and while there is need, the demand for in-service training is questionable, with the private sector driving demand. Participants felt that private universities and training institutes specialize in offering these courses and that people do not look to full-service public universities for this type of training.

Ideas for filling the gap in health informatics skills were demand generation, online short courses for in-service training, other short courses, the inclusion of practical elements within courses, and master's degrees to sustain capacity.

All institutions present expressed interest in being involved in a MEASURE Evaluation activity to address gaps in training materials and training programs. There was slightly less interest in developing a new health informatics course or strengthening curricula for existing courses. Demand caused hesitation. Several institutions noted ways to integrate health informatics training in existing offerings as an "emerging issue" in their master's program (UG), in MBA training (CESAG), as part of a new master of science program (UP), or as part of necessary strengthening of ICT components of existing programs (INSP and KU). The group was also interested in the possibility of GEMNet-Health offering a joint health informatics workshop, but with the same reservations as above.

The group generated a list of potential focal persons from their institutions for carrying the discussion forward. MEASURE Evaluation staff will be in touch with next steps after discussing feedback with a health informatics point person.

## Malaria

MEASURE Evaluation has a long history of offering M&E of malaria workshops in partnership with local training partners in West Africa, including the UG. During the World Café discussion, the group talked about the possibility of GEMNet-Health member participation in a TOT for the M&E of malaria workshop. There was interest among several of the institutions in nominating a faculty member for the TOT. Additionally, those interested were positive about incorporating malaria curriculum material in training programs at their institutions, offering a regional workshop on M&E of malaria, and adapting or customizing the malaria course curriculum for a country-specific workshop.

Following the planning meeting, MEASURE Evaluation will send out a formal call for nominations for the TOT.

## Qualitative Evaluation

All institutions were interested in nominating a faculty member to teach in a pilot of the qualitative evaluation workshop later this year. All participants were also positive about incorporating curriculum material on qualitative evaluation methods in existing training programs at their institutions.

- PHFI already has a short course, a distance-learning module, and an M&E track of the MPH. New materials could be incorporated in these courses.
- ACIPH also has a short course in which they could incorporate new materials.
- IPSR does not offer a qualitative evaluation course but could use materials when available.
- KU could add content to a research methods course and could have a stand-alone course (60-hour, semester-long course) at the intermediate level for the M&E track of the MPH.
- INSP already has this content in an online course and in the master's degree program, but is interested in translating these workshop materials into Spanish to incorporate new content.
- UG stated that they could add content to a PhD-level course and could create a semester-long master's-level course.
- UP could use the material as a one-week short course.
- CESAG could add content to an MBA short course.
- UNC and Tulane could share content with professors who teach MPH qualitative methods courses.

All institutions noted interest in offering both a regional- and a country-level workshop on qualitative methods in evaluation. INSP does already offer a regional course.

## Webinars

The network expressed interest in webinars as a tool for collaboration going forward, with some caveats. Recommendations on how to use webinars most effectively follow:

1. Use when there is common and strong interest in a topic
2. Use for advanced rather than basic skills or understanding
3. Use when there is clear value to the participants
4. Examples of topics that might be a good fit
  - Thesis presentations by students at partner institutions
  - Research topics
  - To share innovative new designs

Some participants felt that webinars were better for topics other than skill sharing; other participants felt that there must be a clear benefit—including new skills—for attendees.

The group discussed previous challenges to webinars—low attendance and challenges to connectivity—and discussed ways to proceed. The group suggested several ideas around timing, including holding more than

one webinar so that the time can be convenient for everyone. Other ideas were aggressively advertising, testing the platform ahead of time, and making the recording available after the webinar.

The group generally felt that virtual lectures and webinars by a partner faculty could be incorporated in virtual courses or in-person workshops and undergraduate and graduate courses. The group suggested having short recorded lectures available, but thought that sustainability might be an issue. PHFI plans to include lectures by UG faculty in an upcoming distance learning course, and faculty from PHFI suggested that this can serve as a test case for the network.

Groups discussed the potential of other web-based platforms or tools with the potential to foster collaboration among members. Ideas shared by the group were Dropbox (flagged as low maintenance), blogs (effective for discussion), informal communication, and Twitter and Facebook (for teaching).

### **M&E Workshops**

The groups agreed that there is demand for general M&E workshops, but that sponsorship is required. The groups also discussed the need for context- and target group-specific workshops. Other challenges noted by the groups were a lack of uniform quality across workshops and marketing and the heavy burden of administration and coordination.

It was noted that PHFI and IPSR's five-day workshop format appears successful. Ideas for overcoming challenges were design of an online mandatory prerequisite, a market analysis, contacting potential clients and targeting the program to meet their needs, increased use of virtual learning, integrating preservice training, and a TOT for instructors.

All institutions were interested in developing a generic five-day workshop curriculum, but noted that there are already many similar resources, and it makes sense to take advantage of these. One idea was a course pack with quick summary factsheets.

### **INSP Tour**

The INSP tour focused on a presentation by the distance learning group at INSP. The presentation showed both the breadth and depth of this group at INSP and provided a detailed look at the process from content development through the final product: an interactive and engaging online course. INSP's experience and expertise were clear, as was their enthusiasm for collaboration and mutual learning.

## DAY 3—FEBRUARY 25, 2017

### Routine Health Information Systems

Theo Lippeveld facilitated this session. The plenary presentation covered these topics: the need for strengthening RHIS in low- and middle-income countries; development of the new standardized RHIS curriculum; development of RHIS assessment tools, including revision of the Performance of Routine Information System Management (PRISM), Data Quality Review, and RHIS Rapid Assessment tools; and regionalization of RHIS strengthening through regional networks. Involvement of GEMNet-Health member institutions in these activities at all stages was highlighted.

Potential next steps and future activities that GEMNet-Health member institutions and GEMNet-Health as a whole could undertake were also presented and discussed:

#### RHIS course

- PHFI curriculum adaptation for master's degree course
- INSP translation in Spanish under way

#### Revised PRISM tools

- Training of trainers

#### Regional RHIS strengthening networks

- Asia eHealth Information Network (AeHIN), an RHIS focus group in Asia
- Red Latinoamericana y del Caribe para el Fortalecimiento de los Sistemas de Información de Salud (RELACISIS), in Latin America
- Potential African networks

The following key points emerged from the discussion:

- Ways that RHIS can be incorporated in existing courses and programs: Modules from the RHIS course can be adapted for the bachelor's program in HIS at KU. In Kenya, the University of Nairobi and the University of Oslo work together on DHIS 2, though they do not have a full course on health information. Discussions on creating a network might be useful.
- The planned 2017 RHIS workshop in West Africa will involve collaboration with the West African Health Organization, the Ministry of Health, and others. Sponsorship for government participation needs to be explored. The World Health Organization, the University of Oslo, MEASURE Evaluation, and the Global Fund to Fight AIDS, Tuberculosis and Malaria all see a need for a basic course. The Bill & Melinda Gates Foundation is a potential donor; it is supporting several health systems strengthening activities in India and has been active in Africa, as well.
- The RHIS course is generic and can be modified when needed. It can be integrated in various models of health system strengthening.

- A strategy for training at district level and below must be created. The information culture needs to be changed.

## **Revision and Updating of GEMNet-Health's Capacity Building and Strategic Plan**

The objective of this session was to develop an updated strategic and capacity-building plan for GEMNet-Health.

Lauren Hart presented an overview of the resources and inputs into the development of the strategic plan, which covered the following:

- The experience of the network's activities over the past two years, based on the strategic plan developed in 2015
- Results of a short survey implemented before the planning meeting to identify areas of interest for collaboration
- Potential ideas for future activities generated during the first two and a half days of the planning meeting

The successes and accomplishments of the past two years were reviewed above, during the first two days of the meeting. The survey administered prior to the meeting included questions about areas of interest for collaborative research. The areas of highest interest were impact evaluation, experimental design, qualitative or mixed methods, evaluation design, and regression analysis. Respondents also highlighted key areas of interest in which they would like to receive additional training. These were eLearning methods, sampling design, integrating gender into evaluation, communication and use of results, effectiveness and benefit analysis, and survey design.

Over the first two and a half days of the meeting, the group brainstormed and generated a list of potential activities for the network for a range of topic areas. These formed the main input into the strategic planning process. The full list by topic area is in Appendix III.

For this session, meeting participants were divided into three groups by interest and expertise. Each group was assigned a set of topic areas with corresponding potential activities, and each was asked to prioritize the activities along a timeline (2017–2018, 2018–2019, and 2019 forward); note institutional challenges and strategies to address them; and identify resources required and strategies to address them. Each group then presented their results in plenary. The strategic plan that the group developed is below.

## **GEMNet-Health Steering Committee Meeting**

The February 2017 GEMNet-Health Steering Committee was held as part of the planning meeting, with all participants attending. Minutes of this meeting are in Appendix IV.

Following are highlights of the proceedings:

- Election of Professor Moses Aikins (UG) as vice chair elect
- Signing of a memorandum of understanding between ACIPH and PHFI
- Discussion of transition and election of Steering and Executive Committee members
  - Positions are institutional rather than individual, so each institution should be able to select someone to replace a retiring or transitioning member.
  - It is important for the people nominated to be familiar with the GEMNet-Health network. Those present highlighted the need to bring new people on board before a transition occurs.
- Discussion of committee structure
  - The network requires sustained willingness and commitment on the part of committee members to accomplish tasks.
  - The group agreed that the current committee structure, including the Coordination and Collaboration Committee, is working well.
  - Those present agreed that quarterly meeting of the Coordination and Collaboration Committee and meetings every other month of the Steering Committee were sufficient.
- Discussion of the joint workshop revenue sharing policy
  - The revenue sharing policy worked well in 2016. It was agreed that revisiting and further refining the policy (revenue sharing percentages and specifying a policy on how the surplus earmarked for GEMNet-Health is spent) can wait until the policy has been implemented several more times.
- Next steps regarding finalizing and approving the Capacity Building and Strategic Plan
  - The outputs of the previous session will serve as the draft of GEMNet-Health's strategic plan for. MEASURE Evaluation staff will take the outputs of the strategic planning session and develop an action plan. There are still many activities listed for 2017–2018, and we may need to prioritize these depending on availability.

## **Closing Remarks**

Sanjay Zodpey, Laura Magana, and Jason Smith presented the closing remarks and acknowledged the support of the MEASURE Evaluation secretariat for its valuable contribution in making this meeting productive and successful. The hard work of the INSP team in preparation and facilitation of the planning meeting in Cuernavaca were appreciated and acknowledged.

A meeting evaluation questionnaire was administered to all participants, and results are in Appendix I.

## APPENDIX I. EVALUATION RESULTS

### Summary ratings

	Average	Median	Mode
Overall meeting content	9.30	9	10
Overall meeting facilitation	9.30	10	10
Personal relationships/networking opportunities	9.45	10	10

### Ratings by session

Name of session	Usefulness mean score
Links with external stakeholders (CLEAR and 3ie)	8.52
Institutional poster presentations	9.39
Overview of postgraduate evaluation-curriculum harmonization	9.13
Postgraduate evaluation curriculum harmonization	9.00
Training on impact evaluation	9.13
Introduction and discussion on collaborate activities	9.26
Presentation of final/Interim products from the two formal collaborative activities	9.04
Collaboration around distance learning	9.13
Discussion of promoting and encouraging collaborative activities between two or more partners and identification of next steps	9.43
World Café Session 1	9.30
World Café Session 2	9.26
RHIS plenary presentation	8.91
Discussion and identification of potential next steps around RHIS for GEMNet-Health	9.09
Revise/update Capacity Building and Strategic Plan developed in 2015 (group work)	9.35
GEMNet-Health Steering Committee meeting	9.23

## APPENDIX II. AGENDA

# ANNUAL GENERAL MEETING AGENDA

February 23–25, 2017

Cuernavaca, Mexico

<b>DAY 0 - FEBRUARY 22, 2017</b>		
<b>17:00 – 18:00</b>	<b>REGISTRATION</b>	
<b>18:00 – 20:00</b>	<b>WELCOME RECEPTION – HORS D’OEUVRES AND DRINKS; VENUE: JARDÍN JADE</b>	
<b>DAY 1 - FEBRUARY 23, 2017</b>		
<b>8:10</b>	<b>BUS LEAVES FOR INSP</b>	
<b>8:45 – 9:00</b>	<b>REGISTRATION</b>	
<b>WELCOME/GEMNET-HEALTH ACHIEVEMENTS</b>		
<b>9:00 – 10:00</b>	<b>OPENING COMMENTS AND PARTICIPANT INTRODUCTIONS</b>	<b>FACILITATOR: SANJAY</b>
<b>10:00 – 10:15</b>	<b>OVERVIEW OF AGENDA</b>	<b>FACILITATOR: SANJAY</b>
<b>10:15 – 10:30</b>	<b>CELEBRATING SUCCESSES</b>	<b>FACILITATOR: SANJAY</b>
<b>10:30 – 10:50</b>	<b>THROUGHOUT THE FIRST DAY, EACH INSTITUTION WILL PRESENT A POSTER ABOUT INSTITUTIONAL OFFERINGS AROUND EVALUATION AND HEALTH SYSTEMS STRENGTHENING.</b> <ul style="list-style-type: none"> <li>• UNIVERSITY OF PRETORIA</li> <li>• UNIVERSITY OF GHANA</li> </ul>	
<b>10:50 – 11:00</b>	<b>TEA BREAK</b>	
<b>11:00 – 11:20</b>	<b>INSTITUTION POSTER PRESENTATIONS CONTINUED</b> <ul style="list-style-type: none"> <li>• PUBLIC HEALTH FOUNDATION OF INDIA</li> <li>• MAHIDOL UNIVERSITY’S INSTITUTE FOR POPULATION AND SOCIAL RESEARCH</li> </ul>	

11:20 – 11:50	<b>LINKS WITH EXTERNAL STAKEHOLDERS (HEMALI KULATILAKA/LAURA MAGAÑA)</b> <ul style="list-style-type: none"> <li>• DISCUSSIONS TO DATE WITH CLEAR AND OTHERS</li> <li>• PRESENTATIONS FROM CLEAR AND OTHERS ABOUT THEIR CAPACITY BUILDING AND RESEARCH ACTIVITIES</li> <li>• DISCUSSION OF IDEAS FOR FUTURE COLLABORATIONS WITH CLEAR AND OTHERS</li> <li>• IDEAS FOR COLLABORATIONS WITH OTHER AGENCIES</li> </ul>	<b>FACILITATORS:</b> <b>HEMALI KULATILAKA/LAURA MAGAÑA</b> <b>PRESENTERS:</b> <b>GABRIELA PEREZ (CLEAR), SARA PACQUE-MARGOLIS (3IE)</b>
11:50 – 12:20	<b>INSTITUTION POSTER PRESENTATIONS CONTINUED</b> <ul style="list-style-type: none"> <li>• KENYATTA UNIVERSITY</li> <li>• INSTITUTO NACIONAL DE SALUD PÚBLICA</li> <li>• CENTRE AFRICAÏN D'ETUDES SUPÉRIEURES EN GESTION</li> </ul>	
12:20 – 1:30	<b>LUNCH AND GROUP PHOTO</b>	
13:30 – 14:00	<b>INSTITUTION POSTER PRESENTATIONS</b> <ul style="list-style-type: none"> <li>• ADDIS CONTINENTAL INSTITUTE OF PUBLIC HEALTH</li> <li>• ADDIS ABABA UNIVERSITY</li> <li>• MEASURE EVALUATION</li> </ul> <b>THIS CONCLUDES INSTITUTION PRESENTATIONS.</b>	
<b>EVALUATION TOPICS – IDENTIFYING IDEAS FOR FUTURE ACTIVITIES TO FEED INTO DAY 3 STRATEGIC PLANNING SESSION</b>		
14:00 – 16:00	<b>POSTGRADUATE EVALUATION CURRICULUM HARMONIZATION</b> <ul style="list-style-type: none"> <li>• PRESENTATION OF POSTGRADUATE CURRICULUM HARMONIZATION ACTIVITIES TO DATE (SEE SLIDES IN BINDERS)</li> <li>• INSTITUTIONAL PLANS FOR REFINING/DEVELOPING POSTGRADUATE EVALUATION CURRICULA</li> <li>• IDENTIFY NEXT STEPS</li> </ul>	<b>FACILITATOR: SIAN CURTIS</b>
16:00 – 16:15	<b>TEA BREAK</b>	
16:15 – 17:45	<b>TRAINING ON IMPACT EVALUATION</b> <ul style="list-style-type: none"> <li>• IMPACT EVALUATION WORKSHOPS 2014 – 2016: MOVING TOWARDS TECHNICAL AND FINANCIAL SUSTAINABILITY</li> <li>• DISCUSSION OF NEXT STEPS INCLUDING ADAPTATIONS OF IE CURRICULUM</li> </ul>	<b>FACILITATOR:</b> <b>GUSTAVO ANGELES</b>
	<b>FREE EVENING</b>	

**DAY 2 – FEBRUARY 24, 2017**

8:10	<b>BUS LEAVES FOR INSP</b>	
<b>GEMNET-HEALTH EVALUATION COLLABORATIVE ACTIVITIES</b>		
9:00 – 9:15	<b>INTRODUCTION TO COLLABORATIVE ACTIVITIES</b> <ul style="list-style-type: none"> <li>• HIGHLIGHT INFORMAL COLLABORATIONS (E.G., EXTERNAL EXAMINERS)</li> <li>• INTRODUCTION TO FORMAL COLLABORATIONS</li> </ul>	<b>FACILITATORS:</b> <b>JUSTICE NONVIGNON AND DUSITA PHUENG SAMRAN</b>
9:15 – 10:15	<b>PRESENTATION OF FINAL/INTERIM PRODUCTS FROM THE TWO FORMAL COLLABORATIVE ACTIVITIES FOLLOWED BY DISCUSSION</b> <ul style="list-style-type: none"> <li>• PROCESS EVALUATION OF NATIONAL HEALTH INSURANCE SCHEMES (UNIVERSITY OF GHANA, UNIVERSITY OF PRETORIA, PUBLIC HEALTH FOUNDATION OF INDIA)</li> <li>• DEVELOPMENT OF A MODULE ON EVALUATION THEORY (INSTITUTO NACIONAL DE SALUD PÚBLICA, UNIVERSITY OF GHANA, KENYATTA UNIVERSITY, AND ADDIS CONTINENTAL INSTITUTE OF PUBLIC HEALTH)</li> </ul>	
10:15 – 10:45	<b>COLLABORATION AROUND DISTANCE LEARNING</b> <ul style="list-style-type: none"> <li>• HIGHLIGHT COLLABORATION BETWEEN PHFI AND INSP</li> <li>• DISCUSS AND IDENTIFY NEXT STEPS FOR GEMNET-HEALTH AND INDIVIDUAL INSTITUTIONS AROUND DISTANCE LEARNING</li> </ul>	<b>FACILITATOR: LAURA MAGAÑA</b>
10:45 – 11:00	<b>DISCUSSION ON PROMOTING AND ENCOURAGING COLLABORATIVE ACTIVITIES BETWEEN TWO OR MORE PARTNERS WITH DISCUSSION AND IDENTIFICATION OF NEXT STEPS.</b>	
11:00 – 11:30	<b>TEA BREAK</b>	
<b>EVALUATION TOPICS – IDENTIFYING IDEAS FOR FUTURE ACTIVITIES TO FEED INTO DAY 3 STRATEGIC PLANNING SESSION</b>		
11:30 – 12:45	<b>WORLD CAFÉ SESSION 1:</b> <ul style="list-style-type: none"> <li>• 10-MINUTE EXPLANATION OF THE WORLD CAFÉ FORMAT FOLLOWED BY FOUR 20-MINUTE SESSIONS. <i>(SEE INSTRUCTIONS IN BINDER)</i></li> </ul> <b>SESSION TOPICS: <i>(SEE HANDOUTS IN BINDER)</i></b> <ul style="list-style-type: none"> <li>• ECONOMIC EVALUATION (LAUREN HART)</li> <li>• QUALITATIVE EVALUATION (EMILY BOBROW)</li> <li>• MALARIA (HEMALI KULATILAKA)</li> </ul>	<b>FACILITATORS:</b> <b>LAUREN HART, EMILY BOBROW, HEMALI KULATILAKA</b>
12:45 – 13:45	<b>LUNCH</b>	
13:45 – 14:00	<b>REPORT BACK FROM 1ST WORLD CAFÉ SESSIONS</b>	<b>FACILITATORS:</b> <b>LAURA</b>

		<b>MAGAÑA/ANASTASIA GAGE</b>
<b>14:00 – 15:00</b>	<b>WORLD CAFÉ SESSION 2:</b> <ul style="list-style-type: none"> <li>• <b>THREE 20–MINUTE SESSIONS.</b></li> </ul> <b>SESSION TOPICS:</b> <ul style="list-style-type: none"> <li>• <b>WEBINARS (LAUREN HART)</b></li> <li>• <b>INFORMATICS (HEMALI KULATILAKA)</b></li> <li>• <b>M&amp;E WORKSHOPS (JASON SMITH)</b></li> </ul>	<b>FACILITATORS:</b> <b>LAUREN HART,</b> <b>HEMALI</b> <b>KULATILAKA, JASON</b> <b>SMITH</b>
<b>15:00 – 15:15</b>	<b>TEA BREAK</b>	
<b>15:15 – 15:30</b>	<b>REPORT BACK FROM 1ST WORLD CAFÉ SESSIONS</b>	<b>FACILITATORS:</b> <b>LAURA</b> <b>MAGAÑA/ANASTASIA</b> <b>GAGE</b>
<b>INSP TOUR AND OVERVIEW OF INSP OFFERINGS AND ACTIVITIES AROUND EVALUATION AND HEALTH SYSTEMS</b>		
<b>15:30 – 16:30</b>	<b>INSP TOUR</b>	<b>FACILITATOR: LAURA MAGAÑA</b>
<b>19:00</b>	<b>GROUP DINNER</b>	

DAY 3- FEBRUARY 25, 2017		
DISCUSSION OF HEALTH INFORMATION SYSTEMS – IDENTIFYING IDEAS FOR FUTURE ACTIVITIES TO FEED INTO DAY 3 STRATEGIC PLANNING SESSION		
9:00 – 9:45	RHIS PLENARY PRESENTATION	FACILITATOR: THEO
9:45 – 11:00	DISCUSSION AND IDENTIFICATION OF POTENTIAL NEXT STEPS AROUND RHIS FOR GEMNET–HEALTH <ul style="list-style-type: none"> <li>• CURRICULUM <ul style="list-style-type: none"> <li>○ PHFI CURRICULUM ADAPTATION – PRESENTATION AND DISCUSSION</li> <li>○ INSP TRANSLATION</li> </ul> </li> <li>• REGIONAL NETWORKS <ul style="list-style-type: none"> <li>○ AEHIN RHIS FOCUS GROUP IN ASIA</li> <li>○ RELAC SIS IN LATIN AMERICA</li> </ul> </li> <li>• PRISM TOOLS</li> </ul>	FACILITATOR: THEO
11:00 – 11:15	TEA BREAK	
REVISE/UPDATE GEMNET-HEALTH CAPACITY BUILDING AND STRATEGIC PLAN		
11:15 – 13:00	REVISE/UPDATE CAPACITY BUILDING AND STRATEGIC PLAN DEVELOPED IN 2015 – GROUP WORK INTRODUCTION TO STRATEGIC PLANNING (ANDY BEKE) OVERVIEW PRESENTATION (LAUREN HART) GROUP WORK INSTRUCTIONS (HEMALI KULATILAKA) <i>HANDOUTS IN BINDERS</i> <ul style="list-style-type: none"> <li>• <i>EXCERPT FROM 2015 STRATEGIC PLAN</i></li> <li>• <i>SURVEY RESULTS</i></li> <li>• <i>GROUP WORK INSTRUCTIONS</i></li> </ul>	FACILITATORS: ANDY BEKE, LAUREN HART, HEMALI KULATILAKA
13:00 – 14:00	LUNCH	
14:00 – 15:00	GROUPS PRESENT IN PLENARY <ul style="list-style-type: none"> <li>• OUTPUT: DRAFT CAPACITY BUILDING AND STRATEGIC PLAN</li> </ul>	
15:00 – 15:15	WRAP UP	FACILITATORS: ANDY BEKE
15:15 – 15:30	TEA BREAK	
15:30 – 16:30	GEMNET–HEALTH STEERING COMMITTEE MEETING ( <i>SEE AGENDA IN BINDERS</i> ) <ul style="list-style-type: none"> <li>• ELECT VICE CHAIR ELECT</li> <li>• TRANSITION OF STEERING COMMITTEE/EXECUTIVE COMMITTEE MEMBERS</li> <li>• REVISIT COMMITTEE STRUCTURE</li> <li>• REVISIT JOINT WORKSHOP REVENUE SHARING POLICY</li> <li>• NEXT STEPS REGARDING FINALIZING AND APPROVING THE CAPACITY BUILDING PLAN</li> </ul>	

	<ul style="list-style-type: none"><li>• ADDRESS PARKING LOT ISSUES/AOB</li></ul>	
16:30	CLOSING REMARKS	FACILITATOR: SANJAY

## **APPENDIX III. SUMMARY LIST OF POTENTIAL ACTIVITIES BY TOPIC AREA**

### **Postgraduate evaluation education**

- Modular syllabus for comprehensive evaluation course
- Learning objectives for core competencies
- Syllabus for short course
- Modules that can be slotted into existing courses
- Case studies
- Create training materials for competencies lacking materials

### **Impact Evaluation**

- Adaptation to one-week curriculum
- Impact evaluation for program managers and policymakers
- Record lectures for incorporation in courses
- Country-level workshop
- Virtual courses
- Market analysis

### **External stakeholders**

- Bursaries
- Curriculum development
- Curriculum review
- Participate in and teach workshops
- Co-sponsor workshops
- Develop GEMNet-Health promotional materials
- Distribute GEMNet-Health promotional materials

### **Qualitative Evaluation**

- GEMNet-Health expert participation in advisory committee and revising curriculum
- GEMNet-Health experts teaching in pilot workshop
- Develop a qualitative evaluation module for incorporation into a master's-level course

### **Economic Evaluation**

- GEMNet-Health expert participation in advisory committee
- GEMNet-Health experts writing modules for economic evaluation manual
- GEMNet-Health TOT
- GEMNet-Health regional/international workshop on economic evaluation

### **Malaria**

- GEMNet-Health participation in TOT on surveillance or evaluation

- GEMNet-Health subregional workshop on surveillance or evaluation
- Develop a malaria module for incorporation into a master's degree-level course

### **Collaborative activities**

- Internal webinars—for presenting ongoing evaluation work, innovative approaches, etc.
- Generating a ranked list of internal webinar topics
- External webinars—for sharing GEMNet-Health materials with a wider audience (e.g., curriculum harmonization efforts)
- Generating a ranked list of external webinar topics
- Social media efforts—Twitter, Facebook, and Google platforms, etc.
- Joint publication
  - Publish work around economic theory and others
  - Documenting the process of capacity building and publish
  - Funds available for review and revision
- Communication sharing platform (e.g., Dropbox, newsletter, MEASURE Evaluation's Monitor newsletter)
- Periodic communication from C&C Committee
- C&C Committee facilitating matching skills—individuals initiate collaboration
- Adjunct appointments
- Sabbatical
- Guest lectures—in person or virtual
- External thesis advisors
- Reviewers (presentations, manuscripts, reports, curricula)
- External examiners
- Collaborative research
  - Manuscript based on DHS data
- Memoranda of understanding
- Distance learning
  - MOOCs
  - Training on how to write online courses

### **Network operations**

- Incorporation
- Identify legitimate uses of funds earmarked for GEMNet-Health
- Review and revise revenue-sharing policy
- Finalize policy around transition of executive members

### **M&E Workshops**

- Market analysis
- M&E for decision makers and other focused target groups
- Developing online prerequisite
- Aggregate existing resources around shortened general M&E training
- Develop generic curriculum for general M&E training

## **RHIS**

- Adapting the RHIS curriculum for a postgraduate course
- Adapting the RHIS curriculum to serve as a training or workshop for policymakers
- RHIS virtual courses, including MOOC
- GEMNet-Health members sharing experiences around regional RHIS networks
- PRISM TOT for GEMNet-Health
- Regional workshops on PRISM
- Regional workshops on the RHIS core curriculum

## **Informatics**

- Market analysis
- GEMNet-Health regional workshop
- GEMNet-Health expert participation in MEASURE Evaluation curriculum development activity
- GEMNet-Health adaptation of a module or curriculum for incorporation in postgraduate courses
- GEMNet-Health TOT
- GEMNet-Health webinar to identify skills gaps and gaps in existing courses

## APPENDIX IV. GEMNET-HEALTH STEERING COMMITTEE MEETING AGENDA

# GEMNET-HEALTH STEERING COMMITTEE MEETING FEBRUARY 25, 2017

### MEETING MINUTES

This meeting took place as part of the February 2017 GEMNet-Health Annual General Meeting (AGM).

### Meeting Participants

GEMNet-Health Steering Committee members:

- Sanjay Zodpey, Chair – Public Health Foundation of India (PHFI)
- Andy Beke – University of Pretoria (UP)
- Jason Smith – MEASURE Evaluation - UNC/Chapel Hill
- Yemane Berhane – Addis Continental Institute of Public Health (ACIPH)
- Laura Magaña, INSP
- George Otieno, Kenyatta University
- Pojjana Hunchangsith, Mahidol University
- Moses Aikins – University of Ghana (UG)

Other GEMNet-Health Members:

- Alemayehu Worku Yalew – ACIPH
- Juan Pablo Gutiérrez – INSP
- Justice Nonvignon, UG
- Inonge Kamungoma-Dada, UP
- Himanshu Negandhi, PHFI
- Emmanuel Asampong, (UG)

- Niveditha Devasenapathy, PHFI
- El Hadji Gueye, Centre Africain d'Etudes Supérieures en Gestion (CESAG)
- Dusita Phuengsamran, Mahidol University
- Pilar Torres, INSP
- John Paul Oyore, Kenyatta University
- Sunil George, PHFI
- Phyllis Dako-Gyeke, UG
- Jacqueline Alcalde-Rabanal, INSP

Secretariat/MEASURE Evaluation Staff:

- Hemali Kulatilaka – UNC/Chapel Hill
- Lauren Hart – UNC/Chapel Hill
- Anastasia Gage – Tulane/New Orleans

United States Agency for International Development (USAID) Staff:

- Amani Selim – Bureau for Global Health

Absent:

- Gustavo Angeles, MEASURE Evaluation

### Meeting Agenda

#### Opening remarks

#### Election of Vice-Chair-Elect

Professor Moses Aikins, founding Steering Committee member from University of Ghana was elected as the new Vice Chair Elect of GEMNet-Health.

#### Transition of Steering Committee/Executive Committee members

- The institutions should be able to elect whom they choose.

- It is important that the people that are nominated are familiar with the GEMNet-Health network.
- Our structure is well laid out. We have a chair and a vice chair as a backup in the executive committee.

### **Revisit Committee Structure**

Discussion on committee structure:

- The collaboration and coordination committee work closely with the secretariat. However, it has been difficult to coordinate virtual meetings.
  - Perhaps, we need more members on the committee or subcommittees or task groups.
  - We don't necessarily need a formal subcommittee or task groups. We really need the willingness and commitment of the people here to work on tasks.
  - We need to better communicate to the Steering Committee because they are the point of entry.
  - Having quarterly meetings has been easier.

### **Revisit Joint Workshop Revenue Sharing Policy**

Discussion on the Joint Workshop Revenue Sharing Policy

- The 70/30 approval policy by the Steering Committee was useful.
- At this time, the policy is that each institution can propose ideas to the executive committee and then the committee can make a decision.
- One issue is that we need to come up with a specific policy on how the money should be used.
- We do not want to stifle creativity. Perhaps, we should wait a while to revisit and further refine the revenue sharing policy.

### **Next Steps Regarding Finalizing and Approving the Capacity Building Plan**

Next steps regarding finalizing and approving the Strategic and Capacity Building Plan

- We have essentially come up with the plan during our group work today. We will share it with everyone soon. There are still lots of ideas for 2017–2018. We may need to further prioritize and fine-tune the plan for next year. We look forward to an emerging strategic plan over the coming months.

## APPENDIX V. PARTICIPANT LIST

# PARTICIPANT LIST

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CUERNAVACA, MEXICO

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