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Strengthening the evidence base
for integrating HIV and SRH services

Integration Assessment: Why and How?

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Integration Assessment:

Two words with many meanings

✓ *Evaluating the impact of integrated services:*

- Health status and behaviours
- Health-seeking behaviours

Population

✓ *Monitoring performance in delivery of service outputs and quality*

✓ *Documenting the feasibility of the implementation process*

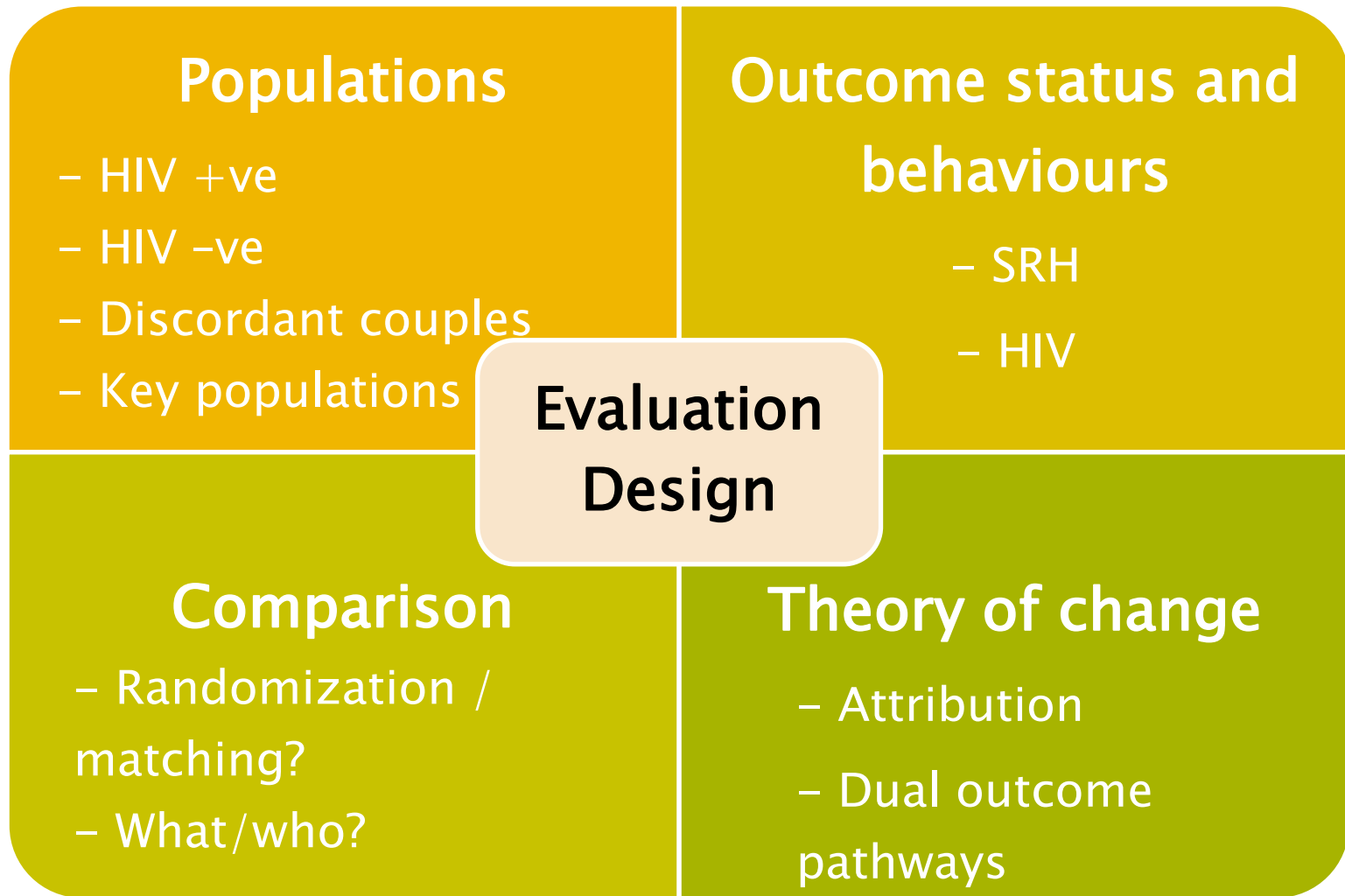
✓ *Diagnosing health system readiness to deliver integrated services*

✓ *Understanding the context for integrated services*

- Need and demand for integrated services
- Acceptability of integrated delivery mechanism(s)

System

Impact Evaluation



Choosing When – and When Not – to do an Impact Evaluation

- Is more evidence needed to justify introduction and/or expansion of an intervention?
- What type of evidence is sufficient for “*go, no-go*”?
- Who decides?
- Costs and ethics of *delaying* introduction of an effective intervention
- Costs and ethics of implementing an *ineffective* intervention



Performance Monitoring

Coverage, Access, Equity

- Population-level measures
- Health system measures

Service use

- Client records
- Programme records
- HMIS reporting
 - Dual or single programmes

Quality of care

- Clinical care
- Interpersonal care
- Stigma
- Type of integration provided

Efficiency

- Unit costs
- Incremental costs
- Cost-effectiveness
- Client costs

Documenting Feasibility

- Rarely done routinely
- Poorly described in published papers
- Introduction and implementation
- What is feasibility?
 - Modifications to system(s) “building blocks” and procedures
 - Resources required
 - Acceptability to managers and providers
 - Acceptability to clients and communities
- Integration achieved - “**index of integration**”?
- How often does feasibility need to be documented?
- Implications for scaling-up and sustainability

Diagnosing Readiness

- Relatively easy to do - instruments available
 - Building blocks framework
 - Data from:
 - Policy analyses
 - Interviews with managers
 - Health facility assessments
- Sampling - census vs. sample
- Type of integration that is feasible
- Actions to address identified “gaps” to be fully functioning



Understanding the Context

- SRH and HIV situations among various populations
- Need for, demand for and appropriateness of integrated services for various populations?
- Accountability?

Considerations

- **Value of integration assessment**
 - Often undervalued by programme managers (and donors?)
 - Often over-valued by researchers
- **Incomplete implementation is as unhelpful as a poor quality assessment**
- **Attributable outcomes**
 - How much change can be “caused” by SRH and HIV information and services?
- **Maximizing use of the data available**

 Successful integration assessment requires both researchers and managers - we're in this together!