social innovation in health MONITORING & EVALUATION FRAMEWORK

Social innovation project in Lagos, Nigeria. The 4YouthByYouth partnership brings together youth, public health researchers, entrepreneurs, and public health leaders to co-create new HIV testing services. Source: 4YouthByYouth, I-TEST, CC-BY

SOCIAL INNOVATION IN HEALTH INITIATIVE





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UNICEF • UNDP • World Bank • WHO

Social innovation in health monitoring and evaluation framework

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PREFACE

The <u>Social Innovation in Health Initiative (SIHI)</u> is a network of dedicated individuals and institutions sharing a common goal to advance social innovation in health. Through research, capacity building and advocacy, SIHI aims to accelerate progress toward universal health coverage and meet the Sustainable Development Goals (SDGs). Since 2014, SIHI has identified and studied more than 40 communitybased social innovations across 17 countries that are transforming health care delivery to improve access so no one is left behind.

The COVID-19 pandemic has highlighted the importance of community-led social innovations that overcome barriers to delivering health services and engage communities to identify and implement solutions. We have seen several innovators step up to the pandemic challenge and make a difference.

Take Noora Health, for example, a social innovation in Bangladesh and India that empowers patients' families as caregivers. To comply with social-distancing measures and reduce transmissions, Noora Health has developed tele-training materials for families caring for loved ones battling COVID-19 at home.

Such brilliant social innovations are developed every day, yet few are sustained beyond a year or so. Evidence of what works and what doesn't is often lacking to guide innovators and their stakeholders. Research is needed to help them better understand the various factors that make their innovations effective, sustainable and replicated or scaled up.

Stakeholders and experts convened by SIHI and TDR (the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases), have highlighted the need to develop research tools to help embed research in social innovations and empower all players to actively engage in them. In response, SIHI and TDR have developed a number of innovative tools:

- <u>the Crowdsourcing in health and health research</u> <u>practical guide</u> to facilitate inclusive community engagement in research; and
- research training modules on social innovation in health and on community engagement. These modules will help familiarize researchers with social innovation and community engagement approaches and will also help innovators and communities become familiar with research and engage in studies.

The Social Innovation in Health Monitoring & Evaluation Framework is an additional research tool to guide researchers, innovators, community members, decisionmakers and other social innovation actors on how to carefully monitor all steps of the social innovation development process and evaluate their effectiveness, sustainability and scalability. This framework will complement the TDR Massive Open Online Course on implementation research (IR) and <u>other TDR IR</u> tools.

WHAT IF social innovation could be embedded in research and research embedded in social innovation to make solutions inclusive, effective, affordable and sustainable? We hope that this framework will help realize this vision.

John Reeder Director, TDR

ACKNOWLEDGEMENTS

This conceptual framework was developed by a working group convened by TDR, the Special Programme for Research and Training in Tropical Diseases, co-sponsored by UNICEF, UNDP, the World Bank and WHO. TDR is able to conduct its work thanks to the commitment and support from a variety of funders. TDR receives additional funding from Sida, the Swedish International Development Cooperation Agency, to support SIHI. Members of the working group included the following individuals (in alphabetical order): Kaosar Afsana, Uche Amazigo, Phyllis Awor, Elizabeth Chen, Jean-Francois de Lavison, Beatrice Halpaap, Larry Han, Noel Juban, Saqif Khan, Eneyi Kpokiri, Jingjing Li, Kala M. Mehta, Jana Mier-Alpaño, Alberto Ong, Sarah Payne, Priyanka Shrestha, Shivani Subhedar, Weiming Tang, Joseph D. Tucker, and Isabelle Wachsmuth.

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CONTEXT

Mesoma is a Nigerian youth inspired to respond to an open call for creative ideas to improve youth HIV testing in her local community. In partnership with other youth and a multi-disciplinary group, she developed a youth-led participatory intervention grounded in community needs and preferences. Her team pitched the idea to local public health leaders, dazzling the group and winning a commendation and support for implementation. However, given that many innovations will fail, public health leaders and funders would only agree to support more widespread implementation if specific measurable key progress indicators were achieved as part of the initial pilot. Specifically, the intervention had to increase HIV testing by at least 15%, retain at least 80% of youth, convene youth and steering committees, and address other key issues. While public health leaders and funders are familiar with monitoring and evaluation generally, they were struck with the important question - how do we measure and evaluate social innovations in health? We define social innovation in health as inclusive solutions to address the health care delivery gap that meet the needs of end users through a multi-stakeholder, communityengaged process.¹ Social innovations may need a framework to guide monitoring and evaluation because the genesis of these innovations may be from disciplines outside of health, maybe for commercial purposes and may emerge from hackathons, open crowdsourcing calls, and other open events. What are feasible ways of demonstrating the health, social, and other impacts associated with social innovation beyond the typical health outcomes? Should social innovations in health be measured differently from other health interventions? How can we democratize research so that non-experts and a broader range of people are engaged in evaluation? These are some of the key questions that we will address in this conceptual framework. Brilliant social innovation ideas are developed every day in a wide

range of fields.¹⁻⁴ Yet relatively few examples of social innovations have been carefully monitored and evaluated. The rapid growth of social innovation in practice and research has contributed to a wide range of important new health related devices and services detailed in this report. However, scaling up their use in the same location, iteratively improving the approach, and adapting the innovation for other settings all depend on high-quality monitoring and evaluation. Monitoring and evaluation are an essential component of social innovation in health in order to focus the lens on what works and what does not work. Responding to this need, the Social Innovation in Health Initiative (SIHI) in partnership with TDR (the Special Programme for Research and Training in Tropical Diseases, co-sponsored by UNICEF, UNDP, the World Bank and WHO) organized workshops which identified the need for social innovation monitoring and evaluation.^{5,6}

PURPOSE

The purpose of this document is to provide a monitoring and evaluation framework for social innovations in health. Supporting monitoring and evaluation will help to democratize research and engage more stakeholders to work in partnership with researchers. The evidence generated will help us to understand effectiveness and the potential for sustainability.

STAKEHOLDERS

This framework is designed for innovators, researchers, government leaders, community-based organization directors, implementers, implementation scientists, individuals who organize hackathons or crowdsourcing calls, people interested in social innovation, and other stakeholders. The process of social innovation is inherently tied to community engagement that demands close local partnerships. From a program perspective, monitoring and evaluation generate data to guide innovators, funders, policy makers, and others interested in the intervention. Understanding the enabling and limiting factors of a project provides a compass for iteratively enhancing health services over time. Routine monitoring can be used to increase equity, expand service coverage, and improve health service quality. From a research perspective, monitoring and evaluation are critical for demonstrating individual and population-level impact, including both the benefits and the adverse outcomes associated with a social innovation. The framework focuses on monitoring and evaluating social innovations in health. It identifies the core set of activities recommended to steadily progress towards achieving impact in short- and long-term scenarios. This framework aims to provide innovators, researchers, program managers, and other stakeholders with a useful set of tools when designing, implementing, and/or evaluating social innovations in health as well as help individuals iteratively improve their social innovation. Social innovation in health research includes both implementation and non-implementation research.

BOX 1. KEY DEFINITIONS

Social innovations in health are inclusive solutions to address the health care delivery gap that meet the needs of end users through a multi-stakeholder, community-engaged process.

Community is defined as people living in the same place or sharing common interests.

Stakeholders are end users, community members, public sector officials, private sector leaders, civil societies and other local individuals who have an interest in or are impacted (directly or indirectly) by the social innovation.

Innovators are those developing and implementing the innovation.

End users are those who directly use the social innovation, inclusive of diverse individuals (e.g., people with disabilities or other groups).

Co-creation is a collaboration between innovators and end users.

2. CROWDSOURCING OPEN CALL PROCESS

This framework was developed in partnership with SIHI, a network convened by TDR and partners to advance social innovations globally. The framework involved a three-step process, including an open crowdsourcing call for ideas (described <u>here</u>), a scoping review, a series of multisectoral discussions, and an adapted Delphi process.⁷ Crowdsourcing is an approach in which a group of individuals attempt to solve all or part of a problem, then implement exceptional solutions in the community.

Our open access resources are in English, but regional SIHI hubs can be contacted for Spanish, Chinese and electronic resources in other languages (see section on Regional Social Innovation in Health Contacts, p. 20). Co-creation, a collaboration between innovators and end users, is an essential part of social innovation in health and should be incorporated at each phase in order to generate new institutional or social arrangements as well as develop a sustainable social innovation in health project. We have highlighted in bold ways where co-creation with end users and key stakeholders can and should be incorporated at each phase of a project. Alongside this conceptual framework, a research checklist has been developed to help people responsible for monitoring and evaluation of social innovations.⁷



3. CONCEPTUAL FRAMEWORK BY PHASE

The framework is divided into seven phases based on the Nesta seven stages of innovation (Figure 1):⁸ (1) opportunities and challenges – identifying a need and opportunity for social innovation in health; (2) generating ideas – developing a social innovation project and/or research study; (3) developing and testing – piloting a social innovation project and/or research study; (4) making the case – evaluating a social innovation project and/or research study; (5) delivering and implementing – expanding a social innovation project and/or research study to show impact; (6) growing and scaling – scaling up impact or scaling down for local relevance; and (7) changing systems – integrating the social innovation into routine practice. These seven phases are iterative and inter-linked to the co-creation process.



Figure 1: Seven key phases of the social innovations in health project and/or research study **Note: These seven phases are often iterative. We use the colors of SDGs to highlight this key context*

PHASE 1 Opportunities and challenges: identifying a need and opportunity for social innovation in health

Key Issues	Specific techniques/ research methods	Open access resources
Identify an unmet need according to end users, community and partners (co- creation items highlighted in bold throughout)	Scoping reviews: structured literature review synthesizing pre-specified eligibility criteria and existing knowledge	Cochrane Library: systematic reviews PRISMA Statement on Systematic Reviews and Meta Analyses:
ldentify a group of innovators, end users, partners and key individuals through a stakeholder analysis	Systematic reviews: more extensive literature review with pre-specified eligibility criteria and potential for pooled results	<u>Conducting Concerns Surveys</u> : structured way to get community feedback
Consider the opportunities in terms of settings, key stakeholders, beneficiaries (and potential for co-creation), power structures, technology and sustainability	Qualitative research: ethnographic study, case study, phenomenology, discourse analysis, grounded theory, in-depth interviews,	Development Impact & You: Nesta's toolkit on practical tools to support and trigger ideas for better results Problem Analysis: checklist to discuss and solve problems
Consider problems in terms of necessary staffing, funding, time, populations and partnerships for sustainability	Landscape analysis: policy analysis about needs and opportunities	Qualitative Research Guidelines Project: a comprehensive guide for designing, writing, reviewing and reporting qualitative research
Identify existing struggling innovators who can benefit from seed financing, project structuring and design support or linkage with partners that they have limited access to	Observational studies: observing the effect of an intervention without interfering with the exposure or outcome	Community Based Participatory Research Approach: research approach to enhance community- based research Crowdsourcing Clinic: practical tools on crowdsourcing
		<u>Crowdsourcing in Health – A</u> <u>Practical Guide</u> : guidance on crowdsourcing
		Design for Health: a design process to develop effective solutions
		Implementation Research in Health – A Practical Guide: a guide on implementation research for multiple stakeholders

¹ Methods need to be adapted to the research questions and multiple methods can be applied at the same time.

PHASE 2 Generating ideas: developing a social innovation project and/or research study

Key Issues	Specific techniques/ research methods	Open access resources
Build your team with end users, leaders and public and private sector partners	Open challenge contests: public open calls to solicit creative solutions	Design for Health: a design process to develop effective solutions
Specify the end user population as much as possible and strengthen collaborations with end users	Hackathons (also called designathons): a time- bound event to bring together collective ideas to solve a problem	<u>Crowdsourcing Clinic</u> : practical tools on open calls <u>Crowdsourcing in Health – A Practical</u> <u>Guide</u> : guidance on open calls
Identify overall objectives and aims in partnership with community members Develop your research objective, research design, project plan, roadmap and change theory	User led design-thinking studies: an iterative design- based process/tool that identifies relevant and beneficial ways to meet end users' needs	Development Impact & You Innovative Toolkit: practical tools to trigger & support social innovations Participatory Approaches: guide on using participatory methods for impact evaluation
Build on existing structures, available resources and stakeholder analysis (if applicable)	Participatory learning and action: qualitative research methods to learn about and engage with participants	<u>Community Based Participatory</u> <u>Action Research</u> : research approach to enhance community-based research
Identify social innovation metrics (key progress indicators) that are specific, measurable, achievable, relevant and culturally appropriate	Results chain: develop a visual model that illustrates how from input, through process, outputs and expected outcomes the	Implementation Research in Health – A Practical Guide: a guide on implementation research for multiple stakeholders
Develop an iterative planning, monitoring, evaluation and feedback plan	innovation will contribute to the impact	TDR Massive Open Online Course (MOOC) on Implementation Research (IR): an open online training to design and demonstrate robust IR projects for better health outcomes
		TDR Implementation Research Toolkit: seven non-linear learning modules on implementation research
		Results Chain: a guide for enterprises on creating a theory of change and results chain

PHASE 3 Developing and testing: piloting a social innovation project and/or research study

Key Issues	Specific techniques/ research methods	Open access resources
Test different ideas by building tangible products or creating experiences to gather feedback from end users, 	 Process evaluation: process to determine the development and implementation strategy as planned Usability: tests the fitness and ease of access of the social innovation Prototype research: studying a sample/design to test the concept or process User-design research: user- focused design studies to meet end users' needs Intercept interviews: a qualitative market research to collect feedback from consumers 	Qualitative Evaluation Checklist: guidance to use qualitative techniques for evaluation purposesNesta Prototype Framework: structured prototyping toolkitThe Most Significant Change Technique: participatory M&E method using systematic participatory interpretation of storiesEthical issues: describes ethical issues associated with open callsTDR MOOC on implementation research: an open online training to design and demonstrate robust IR projects for better health outcomesTDR Implementation Research Toolkit: seven non-linear learning modules on implementation research

PHASE 4 Making the case: evaluating a social innovation project and/or research study

Key Issues	Specific techniques/ research methods	Open access resources
Assess performance of social innovation based on pre- established criteria, especially:	Observational studies: non-randomized studies of an innovation (for example, quasi-experimental studies,	Implementation Research – A Practical Guide: a guide on implementation research for multiple stakeholders
 Community Acceptability Usability Social and cultural impact Effectiveness Accessibility 	ecological studies) Implementation research: scientific inquiry into	<u>B Impact Assessment</u> : guide to measure impact of a social business Evaluating a Social Innovation: a
 Feasibility Resources Potential sustainability Potential scalability 	Social impact assessment: investigates social effects	developmental evaluation approach with an adaptive process
AdaptabilityReliance on other systems	(that is, non-medical) on end-user population from the innovation	<u>Toolbox</u> : a tool to assess impact of investment and management of social innovations
	Qualitative research: ethnographic study, case study, phenomenology, discourse analysis,	<u>Cochrane Risk of Bias Tool</u> : information of bias in study designs <u>TDR MOOC on implementation</u>
	grounded theory, in-depth interviews, mixed methods, participant observations	research: an open online training to design and demonstrate robust IR projects for better health outcomes
	Preliminary economic evaluation: costing studies in the local context	<u>RCT Consort</u> : consolidated standards for reporting randomized controlled trials
	Randomized controlled trials: participants are randomly allocated to receive the intervention	<u>Nesta – Running RCTs</u> : introductory guide on RCTs in innovation

PHASE 5 Delivering and implementing: expanding a social innovation project and/or research study to show impact

Key Issues	Specific techniques/ research methods	Open access resources
Continue to test different combinations of interventions while collecting metrics on performance and impact Identify aspects of innovation that can be expanded and possible contexts for application Develop communications strategy and risk management plans Integrate community voices and stakeholder engagement (including public officials, local leaders) Communicate findings to all participants and stakeholders Include cost-benefit analysis and an investment plan	 Process evaluation: process to determine the development and implementation strategy as planned Economic evaluation: more rigorous economic analyses to examine costs and outcomes (for example, cost-effectiveness) Qualitative research: ethnographic study, in-depth interviews, other methods Participatory action research: qualitative research methods to learn about and engage with participants Time series analysis: serial and comparative interrupted time series analysis Cluster randomized trials: groups are randomized into control and intervention arms Randomized controlled trials: participants are randomly allocated to receive the intervention Observational studies: observing the effect of an intervention without interfering with the exposure or outcome Implementation research: scientific inquiry into questions concerning implementation 	Community Based Participatory. Action Research: research framework to be conducted in communitiesInterrupted time series analysis tutorial: stepwise study design to evaluate population-level study at a given point in timeSerial and comparative interrupted time series analysis: quantitative measure guide where outcome is evaluated at multiple time pointsCluster-randomized trials: Cochrane information guideObservational studies: brief guide to different types of observational studiesNesta - Running RCTs: introductory guide on RCTs in innovationPublic and social innovation labs: teams, units and funds dedicated to structuring and embedding innovation methods and practice in government to tackle social and public problemsNesta - People Powered Results: a 100-day challenge methodology that is structured and combined with coaching support

PHASE 6 Growing and scaling: scaling up impact or scaling down for local relevance

Key Issues	Specific techniques/ research methods	Open access resources
Define longer-term metrics of impact, including fidelity and related implementation metrics Assess potential to scale down to a specific local context or be adapted for another context Assess potential for dissemination of innovation to different contexts and cultures Develop impact and sustainability metrics with stakeholders and end users	Social impact assessment: investigates social effects (that is, non-medical) on end-user population from the innovation guideline development – dissemination of ideas and best practices Implementation research: implementation across subunits/ network identi-fication/ confirmatory inferences designs/effectiveness- implementation hybrids Qualitative research: ethnographic study, in- depth interviews, other methods Discrete choice experiments: quantitative measure to elicit individual preferences on innovations	 Effectiveness-Implementation Hybrid Designs: assess both clinical outcomes and implementation Social Network Analysis: guide to map relationships and networks in communities Adaptive trial designs: guide on designing adaptive clinical trials Discrete Choice Experiment: WHO guide on conducting discrete choice experiments Scaling-up guidance & tools: ExpandNet resources to guide sustainable scale up of innovations

PHASE 7 Changing systems: integrating the social innovation into routine practice

Key Issues	Specific techniques/ research methods	Open access resources
Create marketing/dissemination strategy	Documenting best practices: methods proven reliable to lead desirable results	WHO Best Practices Guide: documents criteria and format to analyse best practices
process to create the social innovation in health	Impact analysis: assess the results of the project	Impact Assessment: guide to conduct an impact analysis
Document and broadly share the impact of the social innovation in health Develop and strengthen partnerships with supporting	Delphi techniques: a structured way to aggregate knowledge from a group of people, often used in health guideline development	Implementation Research in Health – A Practical Guide: a guide on implementation research for multiple stakeholders Reporting guidelines for modelling
market actors who can sustain the model	Mathematical modelling: using mathematical formulations to guide	studies: evidence-based tools to guide research reporting
Create systems and/or integrate into existing systems and structures to institutionalize the social innovation	problems	Nesta's Funding Innovation – A Practice Guide: a guide to different financial tools to support innovations
Identify unmet needs		governments: a guide to improve governance for innovations
Adaptation and replication in other settings		Anticipatory regulation: an emerging approach that is proactive, iterative and responds to evolving markets Strengthening evaluation capacity: a guide on strengthening the M&E capacity of individuals, organizations, communities and networks

5. JUDGING SOCIAL INNOVATION IN HACKATHONS

Given the importance of social innovation monitoring and evaluation, these tools should also be considered in the context of specific events such as hackathons. Hackathons (also called design challenges, innovation pitches, innovation challenges and related events) to identify social innovations have expanded in the past five years. A hackathon is a multistage process that brings together diverse individuals to solve a problem.^{9,10} Hackathons have been used in many medical and public health settings, including health systems, health policy, communications, community engagement and clinical medicine. Early hackathons focused on bringing together diverse groups to develop software.¹¹ Since then hackathons have expanded to enhance educational programmes^{12,13} and develop new social care interventions for vulnerable populations.¹⁴⁻¹⁶ In the COVID-19 era, hackathons have been further adapted to develop new technology for COVID-19 responses (for example, mobile phone applications for contact tracing) and deal with the post-crisis era.¹⁷

Several types of monitoring and evaluation information may help judge social innovations as part of hackathons. **Box 2** below outlines several considerations related to monitoring and evaluation of hackathons, organized by stage.

BOX 2. KEY QUESTIONS RELATED TO ASSESSING HACKATHONS (ORGANIZED BY STAGE)

Steering committee. How was the overall topic for the hackathon established? Did the steering committee include individuals with knowledge of monitoring and evaluation? Has the steering committee developed a hackathon plan that engages potential participants and encourages them to bring evidence to support their social innovation?

Community engagement. Was the hackathon disseminated in diverse forums to ensure broad participation (especially related to location, gender, ethnicity and disability)?

Judging innovations. Was there a prior plan for judging criteria that was used? Do judges include end users and other key stakeholders? Do judging criteria include an assessment of health and non-health impact? Did the social innovation team describe a plan for formal evaluation of their idea?

Recognizing finalists. Did the prize structure provide mentorship, monetary support or other implementation support for monitoring and evaluation of the social innovation? Do the hackathon organizers track finalists for use in the community?

6. OPEN ACCESS TOOLS & RESOURCES

M&E TOOLS AND TRAINING RESOURCES

- <u>M&E Toolkit</u> (USAID Learning Lab): several tools for monitoring and evaluation (English)
- <u>M&E Training Guide</u> (UNDP): exercises, notes and agendas for 1–2-day training on M&E (English)
- Monitoring and evaluation systems strengthening (MEASURE): three checklists for programmes to assess M&E plans, assess capacities and report data (English, French)
- <u>M&E Fundamentals introduction</u> (MEASURE/ USAID): 2-hour introduction (English)
- <u>Planning for Monitoring and Evaluation</u> (Haas School of Business at UC Berkeley / FHI360): five modules on health monitoring and evaluation (English)
- <u>Monitoring and Evaluation module</u> (UNICEF): single module that describes M&E (English)
- <u>Dissemination and Implementation Models in</u> <u>Health Research & Practice</u>: an interactive webtool to design logic model and use dissemination and implementation models to assess their research question and practice context
- Logic model development guide (Kellogg Foundation): four chapters and two appendices on creating logic models (English)

IMPLEMENTATION RESEARCH RESOURCES

- MOOC on implementation research (TDR): a six-week online training on implementation research (English, subtitles in French, Spanish)
- <u>Implementation research toolkit</u> (TDR): seven non-linear learning modules on implementation research (English)

RESEARCH ETHICS

• <u>Global Health Bioethics, Research Ethics & Review</u> (The Global Health Network): a list of e-learning and training courses on ethics for various kinds of research available in different languages (English, Chinese, Czech, Spanish, Dutch, French, Polish, Portuguese, Russian, Swahili, Vietnamese, Română-Moldovan, Lithuanian, German)

- <u>Training Course on Ethics in Implementation</u> <u>Research</u> (TDR): facilitator and participant guide with six interactive modules on ethics in implementation research (English)
- <u>TREAD (The Research Ethics Application Database)</u>: a repository of Research Ethics Committee (REC) application forms and consent statements
- <u>The Collaborative Institutional Training Initiative</u> (<u>CITI Program</u>): provides a pool of educational courses in research, ethics, regulatory oversight, responsible conduct of research, research administration and other topics

OPEN ACCESS REFERENCE TOOLS

- <u>Mendeley</u>: open access reference manager (English)
- <u>Zotero</u>: open access reference manager software (English)

STATISTICAL AND DATA SOFTWARE

- <u>R</u>: free statistical computing and graphics software (English)
- Data Software for Social Good (formerly Open Data Kit): open access research tools (English)
- <u>DHIS2</u> (District Health Information Software): health management data platform (user interface in English, Chinese, Spanish, French, Russian, Portuguese, Vietnamese and Tajik)
- <u>Software for development</u> (Google for nonprofits): Email, document storage, meeting software (multiple languages)

OTHER RESOURCES

- <u>Social innovation research checklist</u> (English): link to the accompanying research checklist
- <u>Crowdsourcing Clinic</u> (SESH): practical tools on open calls (English)
- <u>EQUATOR Network</u>: an international initiative working to improve quality of research publications by promoting transparent and accurate reporting and wider use of robust reporting guidelines
- <u>The Global Health Network</u>: a network providing knowledge sharing and capacity development resources to transfer evidence into practice
- <u>INASP</u>: an international development organization providing online learning services with courses tailored to the needs and context of learners in the Global South.

- <u>DFID Value for Money Framework</u>: a guide on 3E framework for optimal use of resources to maximize the desired positive outcome
- <u>The Donor Committee for Enterprise Development</u> (<u>DCED</u>): a forum for learning about the most effective ways to create economic opportunities for the poor, based on practical experience in Private Sector Development (PSD)
- <u>Unite For Sight Research Methodology Course</u>: a resource to provide an overview of how to design and conduct an effective global health research study
- <u>Design Thinking Course collection</u>: a range of design thinking online courses (different languages available)



7. REGIONAL SOCIAL INNOVATION IN HEALTH CONTACTS

SOCIAL INNOVATION IN HEALTH INITIATIVE HUB NAME (URL)	SIHI HUB CONTACT
China (<u>SESH</u>)	Dr Weiming Tang
Colombia (<u>CIDEIM</u>)	Mrs María Isabel Echavarría Mejía
Ghana (<u>University of Ghana</u> / TDR Africa Regional Training Center)	Dr Phyllis Dako-Gyeke
Honduras (<u>UNAH</u>)	Dr Jackeline Alger
Indonesia (<u>Universitas Gadjah Mada</u>)	Dr Yodi Mahendradhata
Malawi (<u>University of Malawi</u>)	Dr Don Mathanga
Philippines (<u>University of Philippines Manila</u>)	Dr Noel Juban
Nigeria (<u>Nnamdi Azikiwe University Awka</u>)	Dr Obioma Nwaorgu
Rwanda (<u>University of Rwanda</u>)	Dr David Tumusiime
South Africa (<u>University of Cape Town</u> <u>Bertha Centre</u>)	Ms Katusha de Villiers
Uganda (<u>Makerere University</u>)	Dr Phyllis Awor

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