

# Management Response

## Introduction

The World Bank Management (hereafter “Management”) welcomes this independent mid-term review of the Health Results Innovation Trust Fund (HRTIF) portfolio by IOD Parc delivered April 2018. This review is the second of three evaluations that will be completed for the HRTIF. The first was carried out in 2012 and a final evaluation is planned at the close of the Trust Fund.

The objectives of this review were to assess the performance of the HRITF, to determine progress made in addressing the recommendations of the 2012 evaluation, and to make recommendations to inform on-going and future programming. The review’s methodology was agreed to by the donors and the World Bank prior to initiation.

Management is grateful for the willingness of the independent review firm, IOD Parc, for the thoughtful, extensive dialogue with the HRITF Secretariat (hereafter the “Secretariat”) and HRITF stakeholders to come to a robust understanding of the mission, processes and effects of the HRITF. Likewise, Management thanks the individuals and institutions representing HRITF donors, country teams, evaluation teams, partners and beneficiaries who were contacted and contributed to this evaluation.

## Overall Comments:

**Management broadly concurs with the findings of the review and welcomes the overall conclusions that the HRITF has made significant progress on its objectives.** As the MTR describes, the HRITF was established as an investigative effort to understand whether various forms of RBF can be an effective mechanism in improving service delivery for health systems (rather than as an advocacy arm for RBF or as an instrument to propagate RBF within the World Bank).

**The Review finds that the HRITF is relevant, well-managed, has demonstrated programmatic effectiveness, is efficient, is innovative in linking with IDA funds, and impactful.** Management is encouraged by these findings, even as the MTR finds that they may not hold for every RBF instance, noting “many of the findings of the impact reviews are not conclusive in aggregate.” Because the HRITF was established to explore the potential for RBF to be applied in a wide range of settings, it comes as no surprise that there are examples within the portfolio of varying degrees of success. That variation is a result of the size of the portfolio and its spread across more than 30 RBF instances in diverse settings of geography, norms, and institutional capacity. Moreover, the ubiquity and rigor of the impact evaluations of the HRITF portfolio offer an objective, robust means of understanding the causal attribution of a wide range of outcomes—a rarity among interventions portfolios.

**The review finds that the Secretariat has learned from challenges** evident in the experience of the front runners in the HRITF portfolio and has successfully applied that learning to benefit subsequent RBF countries.

## Thematic Comments:

**The review acknowledges that the HRITF is on track or is exceeding its targets for all outputs as assessed in the results framework.** The review notes a lack of a single, integrated theory of change that articulates the relationship between the Trust Fund and the RBF-related results it seeks to support at a country level. However, Management believes that considering the variation in the contexts in which the portfolio is active, such a single unified theory of change that binds trust-fund level actions to country-level results in a lock-stepped fashion would likely result in an undesirable outcome. Either it would A) be so specific that it would undermine the HRITF commitment to tailored programming that is responsive to country needs and fits within a country's health system and strategy, or B) end up being so broad and general as to be uninformative. Management maintains that the results framework is sufficient to meet the accountability needs of the Trust Fund, and that the RBF conceptual framework is optimal for helping a country thing through a systems approach in identifying pathways leading to the outcomes it wishes to influence.

**The MTR underscores the value of the evaluation activities undertaken by the HRITF,** and it acknowledges the widely held high regard for its rigorous and well implemented impact evaluations. Because learning has been a central element of the HRITF, the Secretariat began revising the learning strategy in 2017. Management appreciates the learning topics raised in the mid-term review and will revise the learning strategy again to take advantage of those opportunities as feasible.

**Nascent evidence from the HRITF portfolio finds RBF to be cost-effective.** Although only three RBF programs supported by the HRITF have been evaluated for cost-effectiveness, the review acknowledges all those studies have demonstrated positive results. The review rightly notes that further study is needed to further establish the generalizability of that finding.

**Management notes the limitations to the learning agenda of the HRITF.** As with cost effectiveness, the MTR lists gaps in evidence in six large, distinct areas of inquiry and implies that the HRITF should work to fill each of them. However, Management notes that the HRITF never set as its goal to be the sole purveyor of evaluative knowledge of RBF, nor to fill every knowledge gap—important though they may be. Some avenues of analysis will necessarily be left to others to explore. This reality is both practical and positive: By publishing the data collected over the course of the RBF implementation and evaluation activities, the HRITF encourages transparency, broader ownership, and constructive dialogue from a healthy range of interests.

**There are opportunities and obstacles to leverage the experience of the HRITF portfolio to learn about how RBF affects health systems.** Although the MTR recognizes that strengthening health systems was not an objective of the HRITF as originally established, the review confirms that, "HRITF has made significant contributions to health system strengthening." Although working within a health system comes with challenges in constraints to processes, information, human resources, and governance, HRITF projects have gained experience as it has sought to build capacity in these areas. As feasible, the Secretariat will seek to leverage that experience into learning.

**The MTR acknowledges advances made in the main areas highlighted in the previous evaluation.** The MTR acknowledged progress in each of the 31 recommendations made in the 2012 evaluation. Although the MTR states that three of the four key recommendations from that earlier assessment are still relevant, Management believes that distinction to be largely one of degree rather than kind. For

example, although more can always be done, the report recognizes that the HRITF has made significant strides in its management of country projects and learning agenda, and that it is laying the groundwork for countries to transition in an appropriate manner (the second and third of the remaining key recommendations). Given its importance, Management fully agrees that these activities will require continued attention from the Secretariat. The remaining recommendation from that previous evaluation has been achieved to the degree that Management feels is useful: The HRITF has developed a results framework and for reasons explained previously will not be developing a global theory of change.

**The other issues noted in the Management response from the previous evaluation have also made significant progress.** Among these achievements are

- Striking a balance between strategic case selection and being demand driven,
- Enhancing country ownership,
- Moving to resolve inherent communication challenges,
- Moving the HRITF team towards a hands-on approach,
- Reporting on the financial position of the Trust Fund,
- Augmenting the monitoring and documentation of progress of RBF projects,
- Defining and executing process for leveraging additional funds, and
- Creating a powerful and widely used website with a range of authoritative resources.

## Recommendations

**World Bank Management broadly agrees with all nine recommendations,** with a few important caveats. Management notes that the Secretariat has begun work on several of these recommendations already. For instance, Management has committed that the Secretariat will maintain adequate staffing and a separate focus on the HRITF performance, has revised the HRITF results framework, has updated the learning strategy, and has begun work in earnest to evaluate the equity implications of RBF and the effects of RBF on quality of care.

**Transitioning countries to the next stage on their RBF journey is a key priority for the HRITF.** Reflecting its objective to “support [the] design, implementation and evaluation of RBF mechanisms,” the HRITF is prepared to work with countries to plot the course that is best for them. Although the HRITF itself does not have funds to support RBF beyond its current set of pilots, it will ensure sufficient attention is given by countries to transition from HRITF, be that continuation, expansion, continuing the RBF from domestic or other resources or sunsetting the RBF pilots. As at least 14 HRITF countries have been included in the Global Financing Facility portfolio with more likely, they may use the opportunity of GFF Trust Fund and IDA resources to continue and/or expand the RBF if this is a country’s aspiration and identified priority.

**The report does not prioritize or cost out its recommendations and suggested topics for further learning.** Some recommendations will require further work or resources to deliver. Perhaps chief among these is leveraging the existing portfolio to enhance learning—and to then disseminate that knowledge. The mid-term review rightly notes that, “the 2017 HRITF Learning Strategy is now beginning to address process issues and other identified gaps in the evidence, but has limited funds for additional research.” As noted by the MTR, all HRITF funding has been committed, precluding additional studies under the current budget envelope. Indeed, the review notes that, “Knowledge brokerage is central to the HRITF,

but it is not adequately resourced to be fully effective.” This challenge will become particularly salient in addressing questions laid out by the MTR on the cost-effectiveness, long-term effects, and health systems effects of the HRITF. Although the work that has already been contracted on cost-effectiveness can be completed, there is no scope to further expand the number of countries examining cost-effectiveness or to examine the drivers behind cross-country variation in effectiveness or cost-effectiveness. Because evaluating health systems was not an original aim of the HRITF, there will not be the fiscal space to collect the needed data to examine health systems as a system *per se*, using tools such as a system dynamics model or agent-based modelling.

**In an effort to partially address this knowledge gap with existing resources, the aim will be to revisit the HRITF learning strategy to leverage the data and learning from individual countries into global lessons.** Options include assembling the existing HRITF evidence around the effect of RBF on select aspects of the six pillars of health systems individually, as facilitated by the impact evaluations. Likewise, there is an opportunity to shape the upcoming evaluations, which already have committed funding, to be able to inform (though not completely cover) aspects of the other topics singled out in the MTR recommendations: value for money (including cost-effectiveness), equity, quality of care, and demand-side versus supply-side RBF. The understanding gained through the HRITF experience is relevant for a wide body of health interventions.

## Conclusion

Management concurs with IOD Parc’s imperative to maximize the relevance and effectiveness of the HRITF portfolio. By continuing down the proposed path of improving emphasis on learning while building on the recognized progress and strengths of the portfolio, the HRITF can make a propitious contribution to support the design, implementation and monitoring of RBF mechanisms; develop and disseminate the evidence base for implementing successful RBF mechanisms; and build country institutional capacity to scale up RBF systems within the national health strategy and systems.

As the HRITF moves into the final stages of seeing its RBF programs mature and evaluations begin to be completed, the focus will be on transitioning countries from HRITF funded activities and continuing to build upon the learning from the RBF portfolio and its corresponding evaluations.