Rigorous evidence for better policy and practice for child welfare in low- and middle-income countries: the global pooled financing mechanism for policy relevant evidence synthesis

Background and rationale
Despite considerable progress in reducing child mortality, nearly six million under-fives die each year. Millions of children are poorly nourished and go to bed hungry. Parenting skills, which a growing body of evidence shows to be important for child development and future wellbeing, are poorly developed. The quality of education remains poor, and coverage of early child development programmes low. Children are at risk from multiple violation of their rights such as child labour, early marriage, violence and sexual exploitation. Children in fragile and conflict-affected states suffer enhanced levels of deprivation. Disadvantaged children become disadvantaged adolescents and adults thus perpetuating intergenerational poverty.

To tackle these problems, challenges remain in promoting sustained proper adoption of live-saving technologies such as clean water and improved sanitation, insecticide treated bednets, full immunization, biofortification etc. Hard to reach children such as street-connected children and nomadic populations remain under-served by cost effective health and education services. Culture shifts to tackle discrimination and exploitation have been hard to achieve. Ensuring child survival and development in fragile and conflict affected states presents particular difficulties.

The evidence base for effective interventions to meet these challenges is mostly weak, scattered and poorly translated to be usable by practitioners. Many widely used approaches are unsupported by rigorous evidence.

At the same time, the growing recognition of the need for an evidence informed approach to funding decisions, programme and project design, and practice. This recognition has led to many agencies commissioning systematic reviews of global evidence to inform their decision making. Increasingly, agencies in different countries – or even the different agencies in the same country – are commissioning reviews on the same subject. This is not only a waste of
resources because of duplication, but reviews which do not meet best practice quality standards may come to incorrect findings.

The proposed programme of activity will build a global repository of systematic reviews of rigorous evidence of what works, for whom and under what circumstances, supported by knowledge translation activities to make the research available to practitioners.

Commissioners of research are invited to support the programme so that their demand for evidence is coordinated with that of other commissioners. In short, rather than commission one review, supporters will be part of a mechanism which, for the same cost to them, funds ten reviews.

Developing a policy and practice oriented evidence base for child welfare in low- and middle-income countries

Evidence-based medicine has made great progress in the last two decades. Cochrane systematic reviews are used to inform the development of national and international guidelines, and use of public resources. Since its establishment in 1993, Cochrane has developed an international network of national centres, editorial groups and review producing centres which support an up to date Cochrane Library of effective health interventions.

Despite various attempts to date, including the Cochrane Public Health and Infectious Disease Groups, the Campbell Collaboration’s International Development Group, and a series of reviews funded by DFID and DFAT, the necessary critical mass of the production, synthesizing, translation and use of evidence has not been achieved for effective programmes for child welfare in low- and middle-income countries.

There is however, a growing evidence base of rigorous studies, both experimental (RCTs) and non-experimental. Not all of these studies are in the public domain, or are of low discoverability. Policy makers and practitioners are not expected to find their way around the academic literature, and distinguish good studies from bad. A programme of well-conducted systematic reviews will bring together this evidence, sorting good evidence from bad, and harnessing the global body of evidence for national programme improvements for better practice.

As more and more agencies want to access the global evidence base, there is a strong case for building a global repository of knowledge of what works to improve reduce child deaths and improve child welfare. There is also a strong case to coordinate this demand for evidence synthesis, to avoid duplication, and commission of low quality studies.
The global pooled funding mechanism

Under the global pooled research commissioning agencies, including government implementing agencies, with an interest in child welfare in low- and middle-income countries, will support a global fund to commission reviews and produce policy and practice-oriented products. Supporting agencies are part of a rolling consultation process on priority questions to be addressed.

The fund will be managed by the Campbell Collaboration. Campbell is an international research network with sixteen years’ experience in the production of systematic reviews. The Campbell network includes both topic and methods experts to manage the editorial process to ensure high quality studies. The reviews will be published in the Campbell Library, which is a global repository of knowledge of what works, why, for whom and at what cost for social and economic policy, programmes and practice.

Possible topics for reviews

Existing Campbell reviews on child welfare include ‘Interventions for Promoting Reintegration and Reducing Harmful Behaviour and Lifestyles in Street-connected Children and Young People’, ‘Deworming and Adjuvant Interventions for Improving the Developmental Health and Well-being of Children in Low- and Middle-income Countries’, ‘Strategies to Increase the Ownership and Use of Insecticide-Treated Bednets to Prevent Malaria’, ‘Relative Effectiveness of Conditional and Unconditional Cash Transfers for Schooling Outcomes in Developing Countries’, ‘Interventions to reduce the prevalence of female genital mutilation/cutting in African countries’, ‘Parental, Familial and Community Support Interventions to Improve Children’s Literacy in Developing Countries’ and ‘School Feeding for Improving the Physical and Psychosocial Health of Disadvantaged Students’.

There remains a large number of possible review topics of interventions for child welfare. As a first stage, described below, Campbell is scoping the area to define the topic most closely. Possible review topics include ‘The effectiveness of interventions to reduce the prevalence of early marriage’, ‘Interventions to reduce human trafficking of children’, ‘Interventions to reduce the prevalence of child sex work’, ‘The effectiveness of reintegration programmes for child soldiers’, ‘The effectiveness of programmes to increase child education amongst ‘last mile’ populations’, ‘The effectiveness of programmes to provide child-focused social services in emergency settings’, ‘The effectiveness of school-based health education programmes in low- and middle-income countries’, ‘The health consequences of child labour’, ‘The impact of social safety nets in low- and middle-income countries on child health and education outcomes’, and ‘the impact of sports for development programmes on child and youth welfare’. The actual titles will be chosen in consultation with pooled fund contributors and other key stakeholders.

Processes and products
Child welfare is a very broad topic area. A first round of scoping will involve:

- Preparation of a ‘mega map’ by Campbell which lays out the policy space. The map will plot existing review, but not primary studies.
- Consultation with interested parties to narrow the scope.

A second round of scoping will include preparation of 2-3 Evidence and Gap Maps. One of these maps, on adolescent wellbeing, has already been commissioned by the UNICEF Innocenti Research Centre. These Evidence and Gap Maps will feed into a broader stakeholder consultation process to derive a set of demand-driven review questions. The choice of questions will be made in consultation with pool funders, taking into account the outcome of the consultation process.

The Campbell Collaboration will then commission the first set of reviews. Reviews will be commissioned on a rolling basis over a three-year period, with a target of 50-60 reviews being commissioned in total in the first three years.

The new evidence base will be summarised in a systematic review of systematic reviews, as well as informing policy friendly summaries, an evidence portal modelled on that of the Education Endowment Foundation in the UK, model evidence informed practice guidelines, and a flagship evidence report for policy, programmes at risk for child welfare in the selected focus area.

**Budget**

The budget for the Global Pooled Fund for each topic area is US$10.4 million over five years.

It is planned that each topic will have 8-12 participating agencies contributing between US$0.25-0.50 million each year over a 3-5 year period. Ideally sufficient agencies will commit resources on this level for the fund to operate at the envisaged scale by year three. However, a flexible approach is proposed to allow the fund to start up at a smaller scale if necessary.

At present, there is possible interest in supporting the global pooled fund from Save the Children (via Save the Children International, but with contributions from across the network), DFID, WHO and the Wellcome Trust. CIFF may support the participation of developing country stakeholders in the consultation process. UNICEF Innocenti Research Centre are supporting the fund in-kind through their support for the adolescent Evidence and Gap map. They will later seek to mobilize support within UNICEF.

**A flexible approach to meet agency needs**

Agencies may contribute to the fund at a variety of levels. The Campbell Collaboration will be flexible in its approach as to how the fund may be supported, allowing agencies to determine how they wish to support the fund depending on their needs.
A proposed variety of options is shown in Table 1. An agency may decide to first fund a single review through the fund at a cost of US$150,000, possibly moving to more substantial funding at a later point in time. The costs included the full costs of the review, the Campbell editorial costs, as well as production, publication and promotion of the review. In all cases, it will take from 4-6 months from providing support to the commissioning of the review(s), and then 12-18 months for the review(s) to be completed.

**Table 1 Possible levels of support and what the funder gets**

<table>
<thead>
<tr>
<th></th>
<th>Single review</th>
<th>Pilot support</th>
<th>Full support</th>
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<tbody>
<tr>
<td><strong>What you get</strong></td>
<td>One review</td>
<td>3-5 co-funded reviews</td>
<td>8-12 co-funded reviews</td>
</tr>
<tr>
<td><strong>Who decides on review title</strong></td>
<td>The funder</td>
<td>The consortium 2-3 of funders</td>
<td>The consortium 3-5 of funders</td>
</tr>
<tr>
<td><strong>What it costs</strong></td>
<td>US$150k</td>
<td>Two annual payments of at least US$125k each</td>
<td>At least three annual payments of at least US$250k each</td>
</tr>
<tr>
<td><strong>Timing</strong></td>
<td>Anytime</td>
<td>First pilot during first part of 2017</td>
<td>First set of reviews commissioned by end of 2017</td>
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**Timeline**

Scoping work for the mega map and the Adolescent Evidence and Gap Map is underway.

**Further information**

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