



## Evidence and Learning Working Group (ELWG)

### Terms of Reference

#### **PURPOSE:**

The ELWG contributes to, develops, and promotes evidence (e.g., frameworks, guidance, and analyses) to fill gaps in information identified and prioritized by implementers, advocates, and policymakers to accelerate, scale-up, and sustain the policy and practice of self-care within health systems at national and subnational levels.

#### **GOALS:**

The ELWG will pursue the following outcomes as outlined in the SCTG Strategic Plan 2021-2025:

- **A diverse and engaged ELWG membership** as measured by participation in ELWG-hosted meetings/activities and downloads of ELWG supported materials, with targets for geographic and sectoral diversity.
- **Policies and practice are adopted and informed by evidence provided by ELWG** as measured by the reference to and use of SCTG promoted evidence by national level implementers, advocates, and policymakers.

#### **MANAGEMENT:**

The ELWG is led by a leadership team comprising of three individuals – Andrea Cutherell (PSI, self-care consultant), Dr. Sarah Onyango (PSI, Sr. Self Care TA), and Dr. Gilda Sedge (CIFF M&E consultant). The leadership team meets weekly to plan for upcoming ELWG meetings and advance ELWG workstreams. It is anticipated that this leadership model will evolve into a co-chair model with coalition members by the end of 2021.

ELWG will develop sub-working groups, and working group chairs, as needed to support specific workstreams. Sub-working groups chairs will be coalition members. Sub-working group chairs and members are on a volunteer basis.

#### **MEMBERSHIP:**

ELWG is best suited to implementers, researchers, and national policy makers who are interested to understand and advance the evidence base for self-care as an approach to strengthen health systems, and therefore look across a series of self-care interventions (diagnostics, drugs, devices, and digital). ELWG seeks to develop a diverse membership base that represents a range of health areas (including sexual and reproductive health, non-communicable diseases, maternal and newborn health, and others), draws on the universal health coverage, health financing, primary health care, and gender equity groups, and has equal representation from the global south and global north. All ELWG members must be a member of the SCTG. ELWG membership is on a voluntary basis.

#### **COMMUNICATIONS:**

- Meetings occur on an as-needed basis, which on average is every 3 months
- Meetings are typically 90 minutes long
- Invitations are sent ~4 weeks prior to the meeting



- Members are encouraged to communicate on Slack in-between meetings

## CONTEXT:

The ELWG reports to and will bring forward recommendations to the SCTG Coalition Steering Committee.

The ELWG works in close collaboration with other groups/initiatives related to the SCTG, specifically:

- National Self-Care TWG/Advocacy Networks: Representatives of national self-care TWGs/advocacy networks are represented in ELWG to ensure ELWG workstream meets national priorities and that national stakeholders apply/use the tools/guidance developed by ELWG.
- Country Advocacy Working Group: led by WRA, the CAWG grows and provides a community of and for individuals and organizations who are working, or interested in working, to advance self-care through policy, programmatic and public advocacy at national and subnational levels. This forum can be used to present ELWG-developed frameworks and tools to national self-care advocates and implementers to ensure they are used and applied.
- Global Advocacy & Communications Working Group: led by PSI, the GACWG leads a coordinated advocacy, outreach, and communications effort at the global and regional levels to support a joint advocacy strategy for the introduction and scale-up of self-care interventions within health systems. This forum can be used to promote/amplify ELWG-developed frameworks and tools (e.g. Self-Care Digital Health Framework, Quality of Care Framework, and the Policy Mapping Toolkit)
- Learning Lab: provides opportunities for members to learn across the self-care evidence, advocacy, and implementation spectrum. ELWG will contribute to the annual *Self-Care Learning and Discovery Series (SCLAD)* and the annual state of self-care report and other Learning Lab activities to be determined.
- SCTG Secretariat: provides administrative and logistical support for ELWG meetings



## ELWG WORKSTREAMS:

ELWG workstreams are identified based on stakeholder evidence priorities (e.g. member surveys), reviewed by the ELWG leadership team and approved by the SCTG Steering Committee. Funding is available to commission work under each workstream.

ELWG WORKSTREAMS (2019-2021)	LEAD	Status
<b>1. Digital Self Care Framework:</b> provides practical guidance for effectively designed, implemented and researched digital health in support of self-care addressing 4 key domains: accountability/responsibility, quality assurance, user experience, and privacy and confidentiality.	HealthEnabled	Tool final; promotion and documentation of its application is ongoing
<b>2. Quality of Care Framework:</b> helps health systems monitor quality of self-care. Adapted from the Bruce-Jain family planning quality of care framework, and includes five domains and 41 standards that can be applied to a broad range of primary health care approaches to self-care.	Population Services International & SCTG	Tool final; promotion and documentation of its application is ongoing
<b>3. Policy Mapping:</b> to understand the extent to which Kenya, Uganda and Nigeria implement the WHO Self-Care Recommendations (REC) in policy and practice in order to (a) inform national advocacy opportunities in those countries and (b) develop a toolkit for replication in other countries.	Self-Care Academic Research Unit (SCARU) Imperial College London	Study final; creation of 'slimmed down' tool for replication ongoing
<b>4. SBC Self-Care Framework:</b> to co-design a self-care framework that helps policy makers and implementers understand why and how SBC can contribute to improved SRH self-care outcomes.	Breakthrough Action	In process
<b>5. Measurement Framework:</b> to develop measurement and metrics guidance for self-care that builds on existing evidence, tools, and frameworks and meets the needs of national self-care stakeholders, including ministries of health and national HMIS programs.	Dr. Sarah Onyango & Dr. Gilda Sedge (commissioned firms TBC)	In process
<b>6. Costing Framework:</b> to develop a framework/guidance on what self-care costs and who pays (objective may be refined after landscaping).	TBC	Not started
<b>7. (TO BE CONFIRMED) Systematic review of evidence needs:</b> to develop a robust process to identify evidence needs by national implementers, advocates and policy makers which can be repeated over time	TBC	Not started

