Evidence and Learning Working Group (ELWG)
Evidence Mapping and Prioritization Workstream
Overview September 2021

BACKGROUND:

Self-care has the potential to transform healthcare, especially for people who face barriers to healthcare access, and it is an essential part of the efforts to achieve universal health coverage (UHC). Self-care in sexual and reproductive health and rights (SRHR) includes, but is not limited to HIV self-testing, self-injection of DMPA-SC, and self-managed abortion.

Stakeholders including policy makers, national implementers, advocates and funding agencies need evidence to support decision-making related to self-care. At the country and multilateral levels, evidence is needed to inform policies and guidelines. Evidence is also an essential component of measuring demand, planning programs, and monitoring outcomes and impacts of interventions that support self-care. But the resources available to fill the existing evidence gaps are limited. A mapping of evidence needs and a systematic process for identifying the most critical evidence gaps can guide investments in new knowledge generation activities.

The WHO Consolidated Guideline on Self-Care Interventions for Health (2019) identified a number of outstanding research questions related to self-care. WHO colleagues also published a framework for future research on self-care for sexual and reproductive health and rights, in which they presented 39 priority research questions, organized by self-care intervention.1 Donor agencies have also identified learning questions relevant to their portfolios of work in self-care. These separate efforts provide motivation for synthesizing the evidence needs, identifying current investments in knowledge generation and establishing a rigorous process for establishing the most critical evidence gaps in self-care.

The need for a rigorous approach to identifying and prioritizing evidence needs was corroborated in the Self Care Trailblazer Group (SCTG) 2020 member survey. As a result, the Evidence and Learning Working Group (ELWG) established this workstream focused on mapping and prioritizing evidence needs in self-care in SRHR. This effort will highlight, but not be limited to, types of evidence that is applicable to all self-care interventions.

PURPOSE:

The purpose of this workstream is to (a) synthesize findings regarding evidence needs in self-care from existing reports, (b) develop and execute a robust consultative process to identify the highest priority evidence gaps which, if filled, would support decision-making by policy and program stakeholders, (c) conduct a landscape assessment of current investments being made to fill these gaps, and (d) develop

recommendations for how ELWG and other stakeholders in the field can fill remaining high priority knowledge gaps.

EXPECTED OUTPUTS:

It is tentatively anticipated that the outputs of this work will include:

1. A report synthesizing evidence needs in self-care identified in published and gray literature.
2. The establishment and execution of a consultative process for identifying the evidence needs of highest priority to stakeholders
3. A bibliography of key references related to self-care evidence needs, to be posted on the SCTG resource library
4. A landscape assessment of current investments aimed at filling high priority evidence gaps
5. A set of recommendations for future knowledge generation (research, data collection, etc) to fill remaining evidence gaps.

PROPOSED STEPS:

It is expected that this workstream will be comprised of the following key steps:

• Scanning and synthesizing the literature on evidence gaps, learning questions and areas for future research in self-care in SRHR. This will include working with members of ELWG to identify relevant unpublished reports. Evidence needs of interest are those that are relevant to policy or program decision making and that can be addressed using feasible research and/or data collection strategies.
• Refining and mapping the evidence needs against an overarching framework, such as a person’s self care journey and the perspectives of different stakeholders, such as the user of care, program implementers, policy stakeholders and donors.
• Identifying stakeholders/key informants to interview in order to identify highest priorities among the evidence gaps identified above. Stakeholders should represent a range of relevant perspectives and areas of expertise (e.g., researchers, implementers, policy makers, advocates, donors) and geographic areas of interest and experience. It is envisioned that the survey will be administered to 150 - 200 or more key informants, including members of the Self Care Trailblazers Working Group.
• Developing and administering a survey that will solicit input from key informants on how to prioritize outstanding evidence needs
• Administering a limited number of focus group discussions, stakeholder interviews or other robust process for further refining the shortlist of high priority evidence needs identified through the survey, and identifying strategies for filling these gaps, if needed
• Conducting a landscape assessment (comprised primarily of interviews with donors) of current investments aimed at filling high priority evidence gaps
• Preparing a detailed report, as well an article for publication in a peer-reviewed journal, with methodology, key findings and recommendations
• Periodically convening and obtaining feedback and guidance from the “evidence mapping sub working group” (SWG) comprised of 10-15 ELWG members, which will be created and convened by ELWG leadership. The SWG will be convened to provide feedback on the concept, the survey instrument, the preliminary survey results and draft deliverables.
DELIVERABLES:

- **Detailed report** describing the strategic approach employed and the key findings from the synthesis, survey and landscape assessment, and recommended approaches filling knowledge gaps.
- **Journal article** summarizing the findings from the detailed report, for publication in a peer-reviewed journal.
- **Bibliography of key references** related to evidence priorities and evidence gaps in self-care, to be posted on the SCTG resource library.
- **Survey tool** and methodology which could be replicated by SCTG and other partners (and possibly integrated with SCTG annual member surveys), to track and respond to changes in evidence needs of key stakeholders.