

Knowledge Management, Research & Evaluation

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- **Knowledge Management & Translation**
- **Progress in HIV /AIDS Research**
- **Strategy, Approach & Mechanisms for**
 - **Promoting Research in HIV/AIDS**
 - **Evaluation of Programme Interventions & Impact Assessment**
- **Newer & emerging areas of HIV/AIDS Research**
- **HR & System Requirements for Research Activities**
- **Coordination & Compilation of research undertaken by different agencies**
- **Dissemination & Use of Research Outcomes at all levels; Other Issues**

Knowledge Management & Translation

- NACP-IV to have an overarching Knowledge Management strategy that encompasses different programme areas. Apart from traditional Knowledge Management principles, the strategy will emphasize on Knowledge Translation as an important element of policy making & programme management at all levels.
- While Knowledge Management looks at systematic collection, synthesis & dissemination of Knowledge in its various forms, the element of Knowledge Translation will help link Knowledge & Action.

Knowledge – Strategic Approach

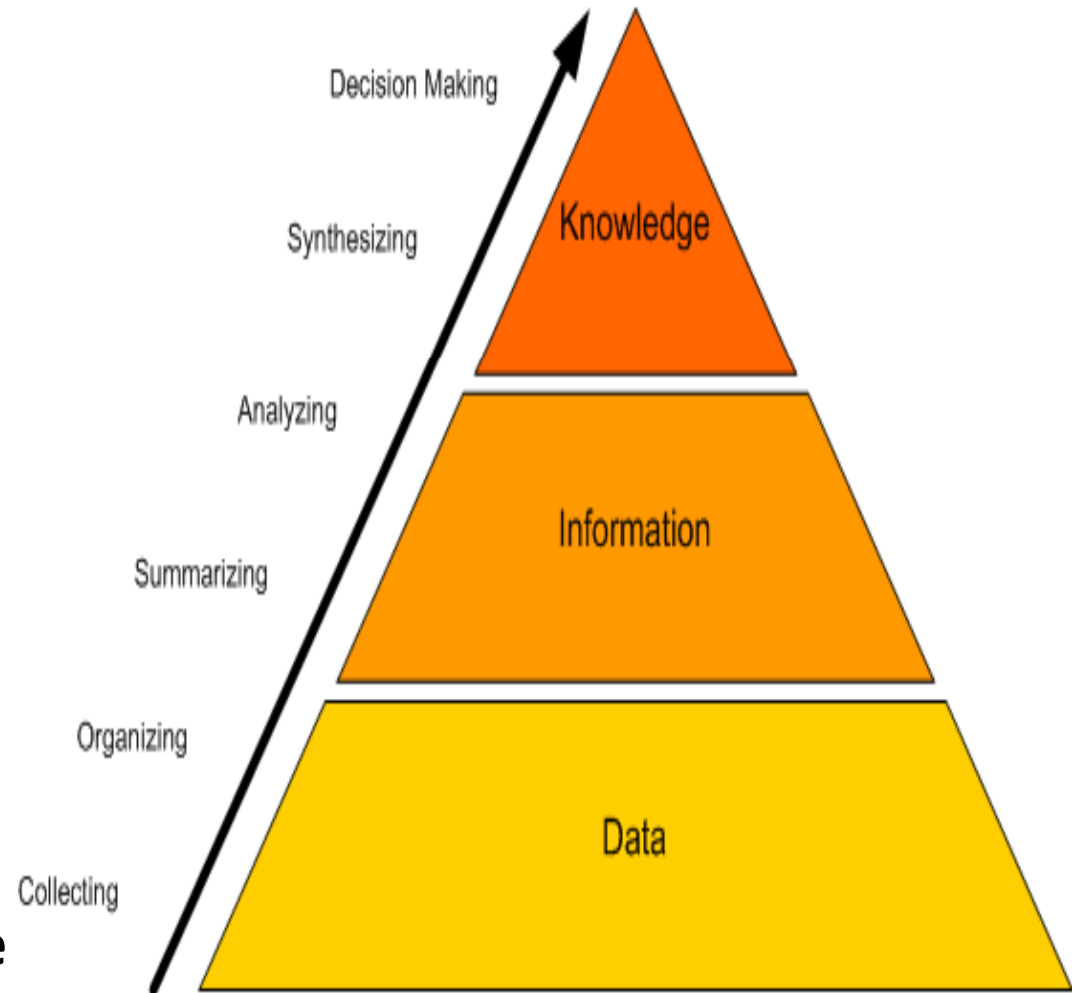
Categories

- Tacit Knowledge
- Experiential Knowledge
- Practitioner Knowledge

- Explicit Knowledge
- Codified Knowledge
- Research Knowledge

Components

1. Creation of Knowledge,
2. Knowledge collection & storage
3. Sharing of knowledge (dissemination)
4. Translation of Knowledge



Creation of Knowledge

- **Reinforce capacities for data analysis & synthesis for decision making:** Create a dedicated unit for data analysis and synthesis and compilation of other types of knowledge in NACP IV. This unit would be charged with translating knowledge into actionable recommendations & policy briefs.
- **Establish a scientific group,** involving key partners/institutes/stakeholders, to advise on various methods used for data analysis (different types of modeling, etc.) & technical and scientific approach for data analysis to ensure knowledge used for decision making is on strong scientific basis
- **Establish regular processes** for identifying strategic knowledge gaps in form of questions that can be answered through further analysis of existing data, and establish systems for discussion and feedback on the results from data analysis and how it could be made useful for decision making.
- **Encourage use of data triangulation methodologies** using data from different sources to provide answers to strategic questions. Data triangulation endeavors can be done quickly and efficiently when appropriate process is followed for developing questions and finding answers.

Knowledge collection, Documentation & Storage

- NACP IV provides opportunity to systemize documentation & collection of knowledge, using different types of Information Technology
- Allow for more regular cross feed-back between program management, program implementation, beneficiaries & community levels.
- Establish guidelines & processes for documenting best practices in a way that can be useful for learning / skills building & replication.

Knowledge Sharing & Dissemination

- **Establish various processes & channels for active/passive knowledge sharing & dissemination** - seminars & technical discussions on various aspects of the programme or the situation of the epidemic with participation of different segments of the population (communities, practitioners, NGOs, Programme managers, politicians, etc); to be done also at state and even district levels
- **Develop a knowledge hub** for NACO, linked to the NACO website, which can serve as a placeholder for various tools for knowledge sharing. This KH should contain tools for presenting programmatic and epidemiological database with various forms of data presentation and synthesizing, electronic libraries, capacity building and e-learning tools, and discussion forums.
- Regularly update KH with most recent data & reports; continuously strengthen with additional tools to serve knowledge needs of users
- Strengthen linkages with Press and Media as they are an important vehicle for knowledge dissemination. Media need to have their capacities built for proper understanding of technical aspects of the knowledge they are disseminating, and to ensure that the knowledge is disseminate in the right way to the right audience.

Knowledge Translation

- **Adapt guidelines/directives to the context of use.**
Although guidelines provide evidence in a more usable form for practitioners & health settings than a plethora of primary studies, an important and additional necessary step is adapting them to the context of use.
- All research & evaluation studies to not only consider “**understanding the situation**”, but also focus more to providing clear answers to “**what needs to be done**”.
- Ensure that all analytic reports developed by the data analysis team & by other key partners should include a thorough process of **assessing various options** for actions /directives well justified by existing data & prospective analysis of implications of different strategies/decisions

CHALLENGES IN RESEARCH

Operations Research Studies

- Scope for strengthening conceptual design & methodology for research studies
- More accurate formulation of research questions
- Focus on identifying mechanisms to provide tangible solutions to problems
- Follow-through phase – disseminate results to stakeholders and NACO.
- Stronger networking & collaboration with research institutes, universities

Evaluation Studies

- Increasingly complex, multi-component & context-specific programmes. Needed: formative research on identified problem area, formulation of a robust design/ methodology & explicit impact pathway (to yield significant results)
- Underlying behavioural theories leading to multiple behaviour changes & ultimately impact, are difficult to assess. Ensuring sufficient data for evaluation is essential. Access to baseline data & other programme monitoring data for specific evaluation study would facilitate this.
- Many services or interventions aim on affecting HIV risk factors and or vulnerabilities rather than averting HIV infections directly. Such a scenario may warrant need for an assessment of intermediate outcomes—that is, behavioural, social and structural changes—vis-à-vis changes in HIV incidence.

Gaps & Recommendations

- **Quality of Research**
- **Conduct operations research on reducing vulnerabilities of HIV for different population groups.** focus on vulnerable popln & newer popln at high risk for HIV; focus not only on the 'risks', but also on 'vulnerabilities'
- **Innovate & Integrate** Potentials of cell phone, IT. Study ways to attempt integration
- **Develop comprehensive guidelines for submitting research proposals and guiding researchers about the procedures of proposal evaluation at NACO.**
- **Ensure greater and regular dissemination of Research outputs. Hold National Conference** once every two years; regular dissemination workshops at SACs and other State agencies.
- **Conduct studies to evaluate impact of prevention programmes & cost-effectiveness analyses.** Will help understand existing loopholes, providespecific directives & evolve newer strategies
- **Explore greater involvement of private sector in the purview of HIV/AIDS Research.** Utilise private health care providers into the programme and mainstream Public-Private partnerships to evaluate quality of care. Research studies to suggest ways in which Private corporate sector to deal with the drivers of the epidemic.
- **HIV incidence** studies at national & state levels
- **Incorporate KNOWLEDGE HUB as central repository of all research studies**
- **Update List of Priority Research Areas to address goals of NACP-IV**

Challenges

- More involvement of states & NGOs in OR agenda development/ implementation & need for developing mechanisms to ensure this. Technical Advisory group (TAG) can be developed at state/ regional level.
- Multiple databases & web-based systems developed by multiple agencies - to be gathered to provide more comprehensive technical & scientific information
- Information collected (surveillance, estimations, CMIS, Field reports, reviews, evaluations & community voices) to be collated in a single platform with translation of the information to reach stakeholders
- Expand scope & responsibility of NIHAR institutions
- Incorporate existing institutional mechanisms (available in other related system to explore scope of integration & proportion of HIV related research, e.g., IDSP system with Epidemiologists at district level (Director NCDC volunteered support). DBT involved in HIV research through Indo-US collaboration. Involve NHSRC, SHSRC, SIHFW, NSSO, SCTIMST, IIPHS.
- Scope of sharing information & incorporating results in national database would help overall **knowledge system**.

Research Agenda for NACP-IV

Promote, facilitate & finance research on HIV/AIDS nationally through decentralized manner by:

- Encouraging development of State/ regional research platforms including SACS & expanded NIHAR institutions
- Encouraging participation of other sectors/ departments and State bodies like IDSP, NHSRC, SHSRC, SIHFW, NSSO, SCTIMST, IPH, IIPHs, IIT, IIIT etc, in HIV research by including them in the NIHAR institutions
- Expanding no. & scope of NIHAR institutes by including Non-govt.al institutes.
- Continue supporting capacity building in social, clinical & biomedical, basic and operational research related to HIV/AIDS and allied subjects directly & through the expanded network of NIHAR institutions
- Functioning as the central repository of relevant research systems/documents (Surveillance, estimations, SIMS, field reports, annual reports, web based systems of NACO and other stakeholders in the field of HIV and Health) & database on HIV/AIDS in the country, with mechanisms of periodic dissemination of information to, policy makers, general public and key stakeholders to ensure translation of research outputs into programmatic action and policy formulation

Evaluation of Program Interventions

- Focus on process evaluations – most interventions should do process evaluations including quality assessment, operations research & cost analyses
- Conduct few outcome/impact evaluation at the intervention level (for new interventions)
- Carry out outcome & impact evaluation of the program at the overall level
- Conduct national IBBS in stead of national BSS in every second/third year
- Go beyond implementation of BSS/IBBS/HSS - design of the studies & type of analysis to allow for attribution if possible
- Use evaluation data for program planning/improvement and making mid-course corrections
- Implement utilization-focused evaluation involving all key stakeholders

Newer & Emerging Areas of Research

- Translational research ('research/evidence to action')
- Gender & related issues in prevention, treatment, care & support among HIV infected/affected populations
- Integration & mainstreaming of HIV prevention interventions within NRHM; their monitoring & impact measurement.
- Approaches in positive prevention, reaching the intimate sexual partners, working with sero-discordant couples, and female migrants.
- Research beyond individual determinants of HIV vulnerability & risk, e.g., towards structural barriers, approaches to address such barriers
- Mortality, survival analyses and quality of life - post HIV diagnosis.
- Role of migration/mobility in changing the epidemic situations between source & destination areas; high risk populations to low risk populations
- Management, coordination & infrastructure within HIV prevention, treatment & care programs & community-based program initiatives
- Transition from emergency to a stable epidemic: Newer themes & population groups emerging out of the change in epidemic; and to sustain the gains in reduction of HIV