



Fourth AfHEA International Scientific Conference  
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UPTAKE OF EVIDENCE IN POLICY DEVELOPMENT: THE  
CASE OF USER FEES FOR HEALTH CARE IN PUBLIC HEALTH  
FACILITIES IN UGANDA

Juliet Nabyonga-Orem, Freddie Ssenooba, Rhona Mijumbi, Christine  
Kirunga Tashobya, Bruno Marchal, Bart Criel

## OUTLINE OF THE PRESENTATION

- Background
- Methodology
- Results
- Discussion
- Conclusion



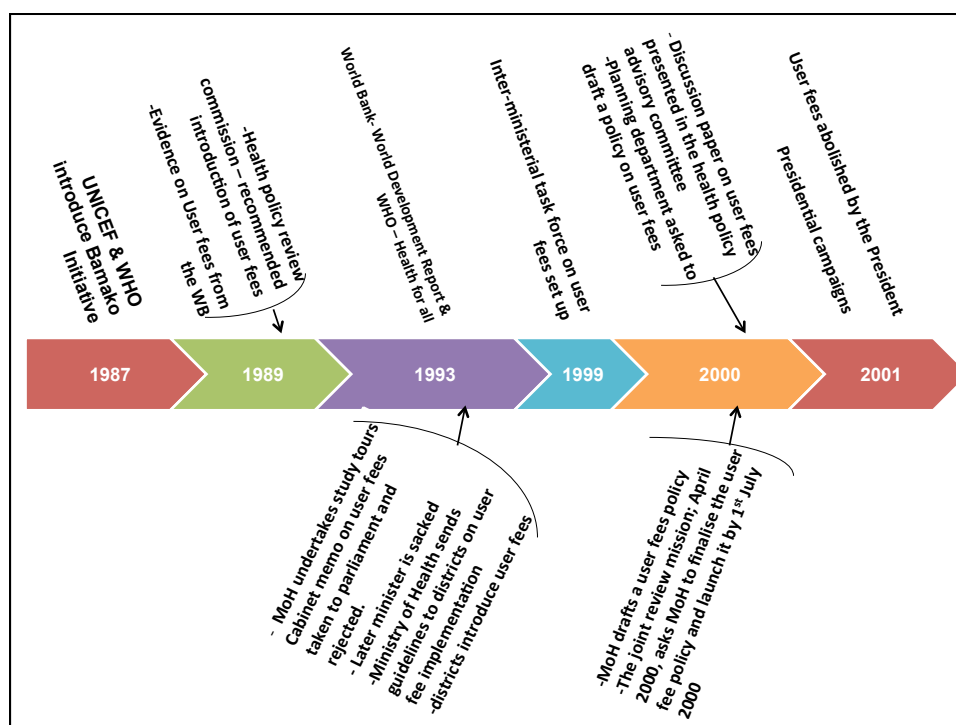
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## BACKGROUND

- In an effort to improve access to health services, several low income countries (LICs) have abolished user fees but the results in the medium- to long-term have been mixed.
- Questions as to why results are mixed continue to be explored.
- In the case of Uganda, the policy process concerning user fees occurred within a given context, which impacted the decisions that were made:



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## OBJECTIVES

- We sought to assess whether evidence was available, had or had not been considered in user fees policy development and the reasons why.
- Assessed how the actors and the context shaped the uptake of evidence.



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## METHODOLOGY

- Using mixed methods and employing a case study approach given the need for in-depth investigation.
- We reviewed documents and conducted interviews with 32 purposefully selected key informants.
- Data analysis:
  - Qualitative data - content thematic analysis
  - Quantitative data - frequency with which evidence was cited and respondents' rating of the consistency between the evidence and decisions taken.



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## RESULTS 1: CONTEXT AND EVIDENCE


Context that impacted the policy process	<ul style="list-style-type: none"> <li>Emerging from civil war with inadequate government resources to fund health.</li> <li>Policy framework within which user fees for health care were implemented.</li> <li>The focus on poverty eradication at the global and national level.</li> <li>The political context.</li> </ul>
Evidence was available, informed decision making at the different stages in the policy process	<p><b>Formal process:</b></p> <ul style="list-style-type: none"> <li>Operational research</li> <li>International evidence</li> <li>Routine M &amp; E</li> <li>Surveys</li> <li>Experience from pilots</li> </ul> <p><b>Informal process:</b> Community complaints</p>



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## RESULT 2: USE OF EVIDENCE

Use of evidence	Evidence cited	Decisions influenced
Conceptual	<ul style="list-style-type: none"> <li>Operational research and surveys, were cited most in the reviewed documents.</li> <li>Consistency between evidence and decisions taken was ranked weak at all stages of policy development. Better consistency was reported at the agenda setting stage.</li> </ul>	Abolish user fees
Symbolic		Abolish user fees
Instrumental		<ul style="list-style-type: none"> <li>Research</li> <li>Routine M &amp; E</li> </ul>



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## RESULTS 3: FACTORS

### Facilitating

- Alignment with the global agenda
- Alignment of the evidence with overall government agenda
- The political window

### Barriers

- The capacity of the MoH to lead the knowledge translation (KT) process was weak
- Partnerships for KT were informal and weak. *Duration, membership, scope of work.*
- Quality of the evidence
  - In some instances of doubtful quality, not deemed objective
  - Contradictory and inconclusive
  - Successes were mainly pilots
- Stakeholder ideology
- Poorly coordinated dissemination

## RESULTS 4: ROLES AND INFLUENCE OF ACTORS

- Different actors played different roles e.g;
  - MoH: generation of evidence; dissemination, advocacy and implementing policy decisions.
  - Donors: funding, generating evidence
  - CSOs: generating evidence, dissemination, advocacy
  - Media: dissemination
- Had varying levels of support and influence impacting the uptake of evidence.
  - Actors were divided in their support based on whether they stood to gain or lose, institutional ideology
  - The strong stakeholders were characterized by significant funding, the power of the vote, and being key decision makers



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## DISCUSSION

- What constitutes evidence? many forms of evidence that inform policy and decision making. How much evidence is enough to take a decision?
- How evidence can be used objectively amidst institutional agendas and donor conditions in aid-dependent countries?
- Can consultative platforms within which KT may occur can work alongside time-bound political processes?
- Roles and influence of actors needs to be anticipated and mitigated. Will be influence by ideology, context, resources



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## CONCLUSION

- Different actors will be influenced by different types of evidence and their level of support and influence will impact the uptake of evidence.
- Favourable factors for uptake of evidence:**
- Quality of available evidence, effective and well-coordinated dissemination may facilitate stakeholders reaching a consensus on the available evidence;
  - MoH:
    - Strengthened institutional capacity to lead KT processes,
    - Having the negotiating power to take a preferred course of action in line with evidence
    - Reduced turnover of senior officers to ensure continuity;
  - The existence of partnerships with mutual trust
  - A favourable political context
  - How evidence aligns with the overall government policy discourse



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THANK YOU