Guidance note on scaling up social norm change

**Brief 03** 

# Resourcing and value for money

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This paper is one of four companion Briefs to the main guidance note:

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Figure 01: DFID's 4E approach to value for money, p.4 reproduced under licence CC BY-NC 4.0. Colours adapted for style.





## Background

There is little available evidence on the costing and value for money of scaling up social norm change. Looking at interventions to prevent violence against women and girls, few have been rigorously evaluated to determine their effectiveness and cost-effectiveness (Ferrari et al., 2018, p. 7).

There are challenges for measuring both the cost and the effectiveness of complex social norm interventions and their scale-up (see guidance by Homan, 2016; Remme et al., 2015; Michaels-Igbokwe, 2016).

Most approaches to measuring value for money focus on quantitative methods and monetary valuation, "the financial and tangible elements of an intervention" (D'Emidio et al., 2017, p. 10). Qualitative participatory value-for-money assessments (as developed by ActionAid) set out how to judge the value of a programme based on "how much social change it has generated", with the communities themselves seen as best placed to assess this value (ibid.).

## Developing a costing and value-for-money approach

Key points	Explanation and examples	
01. Assess what costs will stay the same and what will need to change during scale-up.	<ul> <li>Identify costs for each activity to understand how an activity/the intervention can be adapted to a different context and a different scale (IRH &amp; FHI 360, 2016, p. 26):</li> <li>Separate fixed and variable components of costs;</li> <li>Identify donated inputs and indirect costs of the intervention (these include costs to beneficiaries and opportunity costs); and</li> <li>Identify and allocate shared costs of implementing partners (preferably prospectively, as they are particularly difficult to disentangle retrospectively) (Remme et al., 2015, p. 35; Homan, 2016, p. 4).</li> <li>Identify cost drivers – how unit costs are expected to evolve with scale. Identify the changes required in the (1) types, (2) quantity, and (3) source of resources during each stage of the scale-up process (IRH &amp; FHI 360, 2016, p. 26; Homan, 2016). For existing interventions: assess the optimal scale of an intervention in its current form, the degree to which activities can be sustained with increasing coverage, and at what point further inputs will be required to expand uptake of the change (Remme et al., 2015, p. 13).</li> </ul>	
02. Consider what types of resources specific to scale-up may be required.	<ul> <li>For example:</li> <li>Consider the resources (financial, human resources, time) required for an adaptive approach. (See section "H. Embedding an experimental, learning and adaptive approach" in the main guidance note.)</li> <li>Consider providing resourcing not earmarked to involved organisations to build core operational capacity (Michau et al., 2018).</li> <li>Consider how to provide bridging resourcing for "the critical stage between pilot and broad uptake" (Robinson et al., 2016, pp. 110-112).</li> <li>Plan for how "stable and predictable support" will be achieved for the long term (Robinson et al., 2016).</li> </ul>	
03. Plan what monitoring and evaluation is required.	<ul> <li>Monitor the changing relationship between cost, resource use, and outputs as the intervention is scaled up (Remme et al., 2015, p. 16).</li> <li>Monitor and evaluate costs, quality, impact, and cost-effectiveness of scaling up during implementation.</li> </ul>	
04. Plan how value for money will be defined and measured.	<ul> <li>Consider the different approaches for measuring and understanding the complexity of social norms programming (Remme et al., 2015).</li> <li>Consider the relevant mix of quantitative and qualitative monitoring and evaluation data, appropriate financial and economic analysis, and qualitative case studies and participatory research to provide evidence of the impact on people's lives. (Valters et al., 2018; Ferrari et al., 2018; D'Emidio et al., 2017).</li> </ul>	

#### Case study: IMAGE

Findings from the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) microfinance programme in rural South Africa, which integrates a curriculum on gender and HIV into women-only loan meetings, include:

"The IMAGE costing presents a clear case of economies of scale that were realised as the intervention started a quantitative scale up, going from an initial 855 client base to 2,598, thereby spreading fixed resources over more outputs and bringing unit costs down from about US\$43 to US\$13 (in 2004 USD) [...]. Personnel and consultancy costs were the largest cost category in both phases, i.e. 77 per cent for the trial training cost, 95 per cent for the cost of developing training materials, and 81 per cent for scale-up training costs. This underscores the importance of assessing the availability of human resources when planning to scale up such an intervention, either by using existing staff in the implementing organisation who are underutilised (excess capacity), or by recruiting new staff" (Remme et al., 2015, p. 39).

"The community mobilization phase was costly, involving hosting training in a facility away from participants' village, and sometimes took longer than expected since it is participant-driven and takes longer to get stakeholders on board. IMAGE resolved this challenge by revising the Phase 2 curriculum and training women in it during center meetings, as in Phase 1. Community mobilization facilitators were then selected to lead community mobilization activities" (Muvhango, 2018, pp. 3–4).

Source: Remme et al., 2015; Muvhango, 2018.

## Developing a costing and value-for-money approach

#### **Key points Explanation and examples** As noted in DFID guidance: "High impact does not mean a programme that reaches the 05. Include equity as a core largest number of people at the lowest cost. What is important is whether we reach those component of value-for-money most in need of support and whether the support is provided in the most economical, assessments of scaling up efficient and effective way" (cited in ICAI, 2018, p. 10). that does not undermine the other value-for-money areas Suggestions are to: (effectiveness, efficiency and economy) (Loryman & Meeks, Generate disaggregated data and analysis to understand who is reached by the 2016). See Figure 1. DFID's 4E intervention and in what way, adapting the programme in response to findings from this analysis to reach the most marginalised. approach to value for money. • In economic evaluations of scaling up, apply frameworks (such as distributional costeffectiveness analysis and extended cost-effectiveness analysis) that enable the consideration of equity objectives (i.e. the distribution of the intervention's impact on the most and least marginalised populations) (Carter et al., 2018, p. 36). This is necessary because of the long-term nature of social change, and other cross-06. Take a long and broad view to sectoral benefits potentially experienced by beneficiaries as a result of the change. understand the overall value for For example, cost-effectiveness estimates of the IMAGE intervention are likely to be money of sustainable impact. conservative, as they do not include the health and development benefits of the intervention beyond reduction in intimate partner violence (IPV) (Jan et al., 2011). SASA! also used only one outcome, the prevention of physical IPV, to calculate cost-effectiveness. However, it had broad-ranging effects on multiple outcomes, including reducing sexual concurrency among men (Abramsky et al., 2014). If there are multiple development outcomes, there may be an opportunity for the

If there are multiple development outcomes, there may be an opportunity for the different development sectors that benefit from the scale-up to co-finance the scaling up and be involved in the scaling-up planning (Remme et al., 2014). For example, SASA! had HIV-related outcomes, which could make it a worthwhile programme to fund with HIV resources as well as resources dedicated to preventing violence against women and girls (Michaels-Igbokwe et al., 2016). This chimes with recent interest in developing innovative outcome-focused financing instruments.

Resisting pressure for quick horizontal scaling requires funder support for a more limited size compared with costs. For example, the DFID-funded Empowerment, Voice and Accountability for Better Health and Nutrition (EVA-BHN) project in Pakistan (implemented by Palladium with a budget of GBP 18.86 million over five years) decided on a slower phased roll-out to enable the intervention to keep abreast of local politics and reach as many citizens as possible within each locality. A review found signs that this approach was supporting more sustainable change (Kirk, 2017).

Figure 1.
DFID's 4E approach to value for money

Effectiveness The outcomes achieved, relative to the resources put in	Efficiency The outputs produced in relation to the resources put in.	Economy The costs of input and resources.		
<b>Equity</b> Ensuring that interventions <b>reach the poorest and most marginalised,</b> even if they might be harder or more costly to reach.				

Source: Loryman & Meeks, 2016, p. 8, reproduced under licence CC BY-NC 4.0.

# Developing a costing and value-for-money approach

## Some key findings on costs of scaling up social norm interventions:

- With high initial development costs, some interventions can become more efficient if delivered at larger scale (provided their quality and effectiveness are not compromised). After considerable start-up costs to develop training curricula and train facilitators, group education and community mobilisation interventions tend to have a low variable cost (Remme et al., 2015, pp. 35–36).
- Planning and investing in human resources is key to successful scale-up:
  - \* A critical risk factor when scaling up is the availability of human resources. Human resource constraints can create a bottleneck: any underlying assumptions that existing staff have additional time to allocate to new activities may not be realised. This emerged as a problem during the scale-up of IMAGE (ibid., p. 39).
  - Using local facilitators can be cost-effective but requires investment in training and support. IMAGE reduced costs during scale-up by using local training facilitators rather than the overseas consultants that were a significant component of the development costs at the start (Jan et al., 2011).
  - \* Simple low-cost materials and activities can aid scale-up but don't forget support costs. The USAID Uganda Gender Roles, Equality and Transformation (GREAT) project (2010–2017) had success with a wide-reaching serialised radio drama which was created to entertain and engage on GREAT topics. Radio stations valued the content and were able to air the drama at little cost. In-person support was critical to encourage engagement with the radio drama, using it as "a framework in which community attitudes and norms related to gender roles, [gender-based violence], and [adolescent sexual and reproductive health] could be uncovered, discussed, and ultimately changed" (Lundgren, 2018, pp. 3–4).

- Choosing the right scale-up pathway depends on the resource needs and available resources or resource constraints:
- \* Effective diffusion of ideas, information and change can reduce unit costs. "A key strategy of scaling up within V4C was to catalyze young people to take action and spread key messages and create new norms. V4C evidence shows that for each young woman or man that goes through the physical safe space, they each positively shift the attitudes and behaviours of up to 6 others. This diffusion effect has implications for how we calculate cost-effectiveness and decisions about what to take to scale. When these secondary beneficiaries of physical safe spaces are taken into account, this reduces the unit cost per person reached from £174 (Girls trained in physical safe spaces alone) to £26 per girl reached" (DFID Inclusive Societies, 2017; also see Armitage & Hughes, 2017).
- \* There will be an optimal scale of operation for one organisation to cover. The theory of economies and diseconomies of scale has been confirmed in practice when analysing the cost of HIV prevention interventions that target female sex workers in India (Guinness et al., 2005). Unit costs "initially decrease as service outputs increase (or more beneficiaries are reached), but after a certain point, they may start increasing again, as it becomes more expensive to reach the additional people. This demonstrates empirically that: there is an optimal scale of operation per NGO; and that beyond this scale, it may be more efficient for another organisation to replicate the intervention" (Remme et al., 2015, p. 35).
- \* There can be opportunities to build on locally established formal and informal institutions and existing state services. For example, IMAGE built on existing social groupings on which the loan groups were based (leadership was provided by key women in these groups) and utilised existing facilities made available by the local health service. This embedded the intervention in community networks and capitalised on existing community resources (Jan et al., 2011, p. 371).

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## Case studies: IMAGE and SASA!

**IMAGE** is a microfinance programme in rural South Africa integrating a curriculum on gender and HIV into women-only loan meetings.

Compared to a comparison group, the RCT found that IMAGE reduced levels of IPV by 55% over a two-year period in the rural Limpopo province (Pronyk et al., 2016). An incremental costing analysis (which considers only the cost of adding an intervention onto existing services) found (Jan et al., 2011; Michaels-Igbokwe et al., 2016, p. 7):

- During the trial period (when the intervention reached 855 women in 12 loan centres from four study villages) the incremental cost of delivering the intervention was (2011) USD 49 per client (total cost: (2004) USD 36,706).
- After two years, with the programme reaching an additional 2,598 clients, average costs reduced to (2011) USD 15 per client.

The assessment concluded that IMAGE was "cost-effective in its trial phase and highly cost-effective in initial scale-up" (Jan et al., 2011, p. 366). Substantial improvements in cost-effectiveness were achieved with scaling-up to "a larger number of clients, and the move from an expatriate-supported training programme to the provision of training by local staff" (ibid., p. 370). Cost per case of past-year IPV averted: (Michaels-Igbokwe et al., 2016, p. 7)

- During trial phase: (2011) USD 813.
- During scale-up phase: (2011) USD 244 (30% of the trial phase estimate).

Source: Pronyk et al., 2006; Jan et al., 2011; USD 2011 figures taken from Michaels-Igbokwe et al., 2016.

**SASA!** is the first community mobilisation intervention aimed at preventing IPV that has undergone an economic evaluation, alongside a cluster RCT. The RCT found that women in SASA! communities were 52% less likely than women in control communities to report past-year physical violence by an intimate partner (Abramsky et al., 2014).

A full retrospective economic costing was undertaken from the provider's perspective to estimate total intervention costs, including (i) the development of the SASA! Activist Kit (2005–2008), and (ii) implementation of the SASA! intervention in Kampala, Uganda (four years of programming 2008–2012 and some start-up activities in 2007) (Michaels-Igbokwe et al., 2016, p. 3). The costing analysis estimated the number of roll-out sites using SASA! materials annually (50 sites in 2008, 60 sites in 2009, 70 sites in 2010 and 80 sites 2011) (ibid., p. 4). In contrast to an incremental approach, this costing approach "includes all administrative and overhead costs associated with implementing the intervention." (ibid., p. 7).

- Estimated total cost of developing SASA! Activist Kit: USD 138,598.
- Estimated total intervention costs over 4 years: USD 553,252.
- Annual cost of supporting 351 activists to conduct SASA! activities: approximately USD 389 per activist.
- Average cost per person reached in intervention communities: USD 21 over the full course of the intervention, or USD 5 annually.
- Estimated cost per case of past-year IPV averted: USD 460 (Michaels-Igbokwe et al., 2016, p. 1).

Source: Abramsky et al., 2014; Michaels-Igbokwe et al., 2016.



## **Further reading**

- ICAI's 2018 performance review sets out a number of key recommendations to strengthen DFID's approach to value for money in programme and portfolio management.
- Remme et al.'s (2015) evidence review for the What Works to Prevent Violence Against Women and Girls programme provides (1) a snapshot of the costs and cost-effectiveness of eight VAWG interventions (including IMAGE and SASA!); (2) an explanation of the challenges in monitoring, analysing and comparing costs and costeffectiveness of VAWG interventions (and therefore the issues with the available data); (3) an analysis of the costs and economics of scaling up VAWG interventions; and (4) an introduction to the crosssectoral co-financing approach for interventions with multisectoral outcomes.
- IRH primer on costing social norms interventions provides more details and tools for activity-based costing (Homan, 2016).

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