

The Challenge Initiative

Innovators in global development across sectors have been grappling with how to bring programs to transformative scale with sustainable impact. The Challenge Initiative (TCI), funded by the Bill & Melinda Gates Foundation, is a “business unusual” approach that empowers cities to rapidly and sustainably scale best-practice family planning and adolescent and youth sexual and reproductive health (AYSRH) solutions for the urban poor. Scale, impact, cost-efficiency and sustainability are TCI’s four interlocking tenets as TCI believes scale without impact is empty scale; impact at scale without increasing cost-efficiencies is not viable; and cost-efficient impact at scale that is not sustained will not produce lasting change.

TCI’s demand-driven model is premised on a shared mindset and commitment to having local players lead, make change and achieve high impact at scale. Other ingredients for success – including political and financial commitment, consensus around which evidence-based interventions to scale, and capacity to implement and institutionalize those interventions – can then come together to realize that impact.

Local governments in East Africa, Francophone West Africa, India and Nigeria adapt, implement and scale TCI’s best-practice interventions, drawing on coaching and support from its four regional hub partners: Jhpiego, Johns Hopkins Center for Communication Programs (CCP), IntraHealth International, and PSI. TCI is led by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health. Over the past three years (2016-2019), TCI has demonstrated proof of scale for its demand-driven model, and is active in 94 cities as of February 2020.

RECOGNIZING CITY-LED SUSTAINABLE SUCCESS

The Challenge Initiative’s (TCI) “business unusual” approach lets local governments self-select and lead the implementation of TCI’s best-practice family planning and adolescent and youth sexual and reproductive health (AYSRH) approaches while TCI provides coaching and access to its Challenge Fund. From the outset, local governments are set on a path toward self-reliance, eventually “graduating” from TCI. Being able to scale to more and more cities means TCI strives to graduate cities as engagement hits around three years. Currently active in 94 cities, TCI expects to engage a total of 140 cities by 2024 and at least 50 of those will graduate from TCI.

WHAT DOES IT MEAN TO GRADUATE FROM TCI?

TCI views graduation as a process and recognition of sustainable success – not an “exit strategy” or one-time event. The year-long process begins in a pre-graduation phase where the city demonstrates improvements not only in the uptake of family planning methods but also in its health systems. Throughout its engagement with a city, TCI uses the Reflection and Action to Improve Self-reliance and Effectiveness (RAISE) tool to measure a number of indicators. Results from RAISE help determine when a city is nearing graduating and, once a city is deemed ready to graduate, TCI reduces coaching and financial support and graduates the city. Post-graduation, cities are expected to sustain results, which TCI will continue to track while also providing coaching on demand.

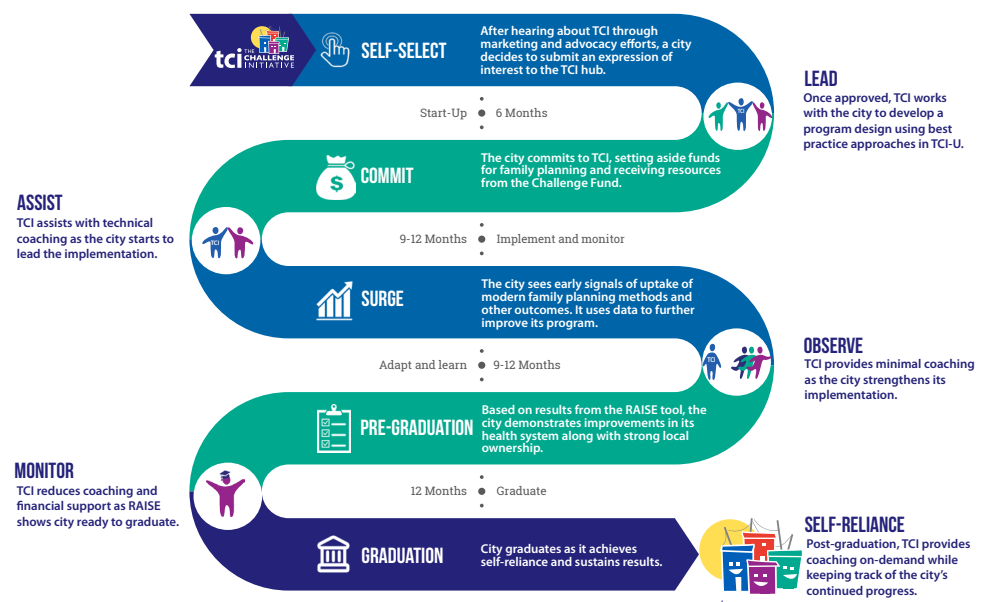


Figure 1: Infographic depicting a city's journey with TCI from expression of interest through to graduation.

Figure 2 shows how a demonstration of sustainable impact in family planning and AYSRH will lead to cities winding down their level of TCI technical coaching and support from its Challenge Fund.

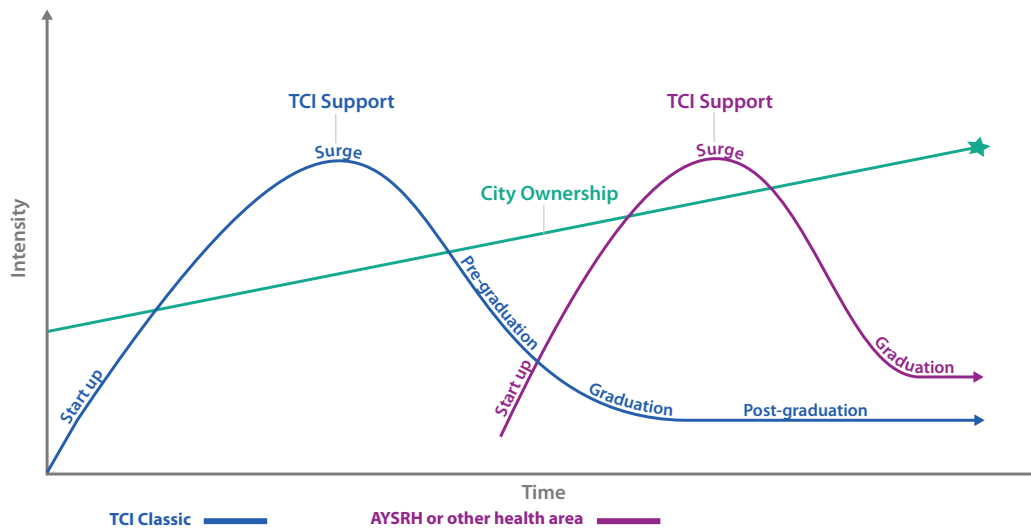


Figure 2: TCI gradually phases out support as city governments increase their own.

HOW DOES TCI ASSESS CITIES FOR GRADUATION?

TCI uses data to inform local government problem-solving and decision-making, including Health Monitoring Information Systems (HMIS), project monitoring information systems (PMIS), population-based surveys and qualitative methods such as the **Most Significant Change technique** and regular **'pause-and-reflect'** sessions. TCI's RAISE tool has specific criteria related to the available data as well as certain milestones for cities to achieve to help evaluate the quality and effectiveness of their activities.

Using RAISE, TCI can identify cities ready to graduate and start to engage local leaders to develop a data-informed graduation plan. The graduation plan considers the fiscal calendar of each government so the local government has funding available to support activities previously supported by TCI. The plan also considers the strengths and weaknesses of a government team's technical abilities and leadership skills. TCI will also help cities plan for institutionalization of TCI's high-impact interventions within its health systems. It is expected that the public sector health facilities will be using TCI's approaches as they prepare for graduation depending on depth reached in the pre-graduation phase. Local government teams adapt and institutionalize use of RAISE to systematically evaluate the effectiveness of their family planning and AYSRH interventions, identify elements that require strengthening and implement course correction to increase impact and ensure sustainability.

Developed by TCI's East Africa hub along with feedback from its local government counterparts, RAISE assesses the quality and sustainability of TCI's best-practice family planning interventions in each implementing city. Since TCI provides technical coaching to local governments as they implement the best-practice approaches found on [TCI University](#), the tool is meant to be used directly by government staff, in partnership with TCI.

Activities key to TCI's success in each city include measuring the intensity of implementation, implementing course corrective actions, maintaining quality during rapid scale-up, encouraging local ownership that leads to sustainability, and engaging stakeholders in decision-making in meaningful ways. The tool utilizes a standard set of indicators



Figure 3: TCI's four sustainability pillars.

that consider all these elements and help governments reflect on their implementation progress in four main areas identified in TCI's Sustainable Scale-Up Pillars (Figure 3).

The following graduation criteria are illustrative and may vary by hub.

- **Increased political and financial commitment:** including mission statement for values, policy and advocacy, financial commitments and actual spending for family planning, financial management and documentation of funds.
- **Family planning skills capacity transfer:** includes a costed operational plan and coordination, continuous quality improvement, use of data for decision-making and referral systems for family planning.
- **Institutionalization of best-practice approaches:** including access and utilization of TCI University, family planning coaching, continuous adaptation of best-practice approaches, method mix and integration of FP with other health services.
- **Sustained demand for family planning:** including favorable community attitudes toward contraception, women (and men) personally advocate for FP in their family and community, women (and men) refer relatives/ friends, women (and men) intend to use FP in next 12 months.

WHAT ARE THE THREE MAIN PHASES OF GRADUATION?

PRE-GRADUATION

Pre-graduation is the period where TCI works with local governments to develop its transition plan while gradually reducing the level of technical coaching and Challenge Fund support the city receives. Advocacy is ongoing to ensure continued local government investment in family planning and AYSRH. With intensive coaching provided during the surge period, TCI positions governments towards self-reliance, thus preparing them for graduation from the start of engagement. In case the city needs longer than anticipated, TCI will put together a plan based on identified gaps and challenges to better prepare the city for graduation. The results from RAISE and other monitoring methods will be used to tailor funding needs for a city poised for graduation.

GRADUATION

During the graduation process, TCI will monitor the governments to ensure they can sustain the family planning and/or AYSRH impact without TCI support. Once a graduation plan is agreed upon, TCI will test the gradual phase-out of its financial and technical assistance, making sure to continue to monitor a city's performance and provide as-needed coaching. The RAISE tool will be critical in this period as it allows governments to create action plans and review its performance. Depending on the individual needs of the city, technical coaching may need to remain consistent for a time while TCI financial contributions decreases as the government adopts TCI's high-impact interventions. The graduation process should last anywhere between 6-12 months while the government ensures it can sustain the family planning and AYSRH impact without TCI. A city may need longer than 6-12 months if it is not able to perform without TCI's coaching and financial support.



Figure 4: Illustrative lifespan for city engagement with TCI.

POST-GRADUATION

Graduated cities will join TCI's global network of "alumni," retaining access to TCI University, its Community of Practice and on-demand coaching from TCI. High-performing alumni will be supported to provide coaching to new TCI local governments during program design, implementation and graduation. If TCI layers additional health interventions onto its platform, these cities will remain priority areas because of their alumnus status, systems maturity, and network of TCI coaches and champions. TCI will continue to monitor local governments post-graduation and develop mechanisms to identify and incentivize well-performing graduates (i.e., "outstanding alumni") and celebrate their sustained success. For locations under performing post-graduation, TCI will establish mechanisms to alert governments that they are falling behind, challenge them to increase investment in family planning and provide needed coaching through the hubs.

TRIANGULATING THE DATA TO PREPARE CITIES FOR GRADUATION

Between April-June 2019, TCI's East Africa team conducted its first round of assessments using the RAISE tool for 37 cities and sub-counties. Most locations scored within the 'beginning' and 'developing' levels (see Figure 5), with the average scores being 54% (Kenya), 59% (Tanzania) and 53% (Uganda). Coupled with HMIS and TCI project records data, RAISE helped government teams develop action plans to strengthen areas in need of improvements. The majority of cities saw increases in their RAISE scores during the second round of assessments in October-December 2019 – average scores increased to 72% (+18%), 64% (+5%), and 71% (+18%) in Kenya, Tanzania and Uganda, respectively.

Using data and learning from both rounds of assessments, TCI identified locations in East Africa it considered ready to move into the pre-graduation phase in each country. TCI then sensitized government staff in these locations to the concept of graduation and developed action plans to ensure government ownership of TCI's high-impact approaches, encourage diffusion to public and private health facilities and have greater coaching emphasis on sustainability.

The East Africa team now plans to pilot graduation in these locations by reducing TCI financial support and hands-on coaching, and monitoring to see if cities can sustain achievements through the continued use of RAISE, along with other qualitative and quantitative data sources. The table on page 5 triangulates data from three cities that qualified for pre-graduation, demonstrating how their RAISE scores increased over time, as well as what TCI program activities contributed to improvements and how client volume increased over time.

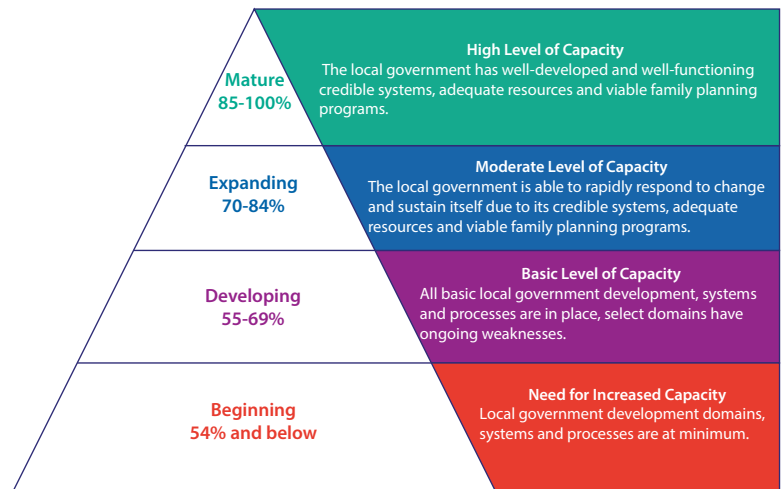


Figure 5: The four levels of performance possible when using the RAISE tool.

Qualitative		Program Activities		Quantitative	
RAISE Score 1*	RAISE Score 2*	Key areas contributing to increases	Coaching contributing to increases	% change in FP client volume compared to 12mo-base-line (Dec 2019)	Estimated annual mCPR growth (June 2019)
Migori, Kenya					
56%	70% (+14%)	Sustained demand for family planning (improved method mix), advocacy and use of data	Coaching on data quality audits in facilities, high-level advocacy on commodities and commodity redistribution; Sisi-kwa-sisi coaching between facilities for problem-solving; Engaging partners in PIT meetings; Top leadership involvement in RAISE process	12% increase	0.85%
Temeke, Tanzania					
69%	81% (+12%)	Improved quality/frequency of coaching, financial spending and use of HMIS data	Engagement and feedback on action items with PIT team and TCI-U coaches; Intensive engagement of technical teams in assessments; Coaching on program management	81% increase	3.97%
Busia, Uganda					
54%	81% (+27%)	Increased institutionalization of TCI proven approaches, documented diffusion, and public-private partnership	Dissemination of results and engagement with leadership and Town Clerk; Guidance to PIT on TCI proven solutions; Follow up of action items with geography coaches; Capacity transfer on program management, including finances and commitment to track action items; Engagement with Marie Stopes	172% increase	3.66%

*Weighted overall score out of 100%



Bill & Melinda Gates Institute for Population and Reproductive Health

