

# Evaluation of Tokelau Health Sector

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# 1. Evaluation of the Tokelau Health Sector

## 1.1 Tokelau

Tokelau consists of three small coral atolls – Fakaofu, Nukunonu and Atafu, and lies about 500km north of Samoa. The only form of transport is by ship, that departs fortnightly from Apia, Samoa. The most southern atoll, Fakaofu lies 64km south of Nukunonu, the middle atoll and Atafu is 92km further north.

Tokelau is a non-self governing territory of New Zealand with a population of 1411 people (Oct 2011 Census). As a territory of New Zealand, Tokelau has been administered through an “Administrator of Tokelau”, based in the NZ Ministry of Foreign Affairs and Trade.

The Department of Health, is led by the Director who is located on Nukunonu and has six staff members, two located in Apia and four located on Tokelau.

Each village, governed by the Village Council of Elders (Taupulega), operates a hospital that provides basic medical and health services and supplemented with referrals to Samoa or New Zealand for those patients requiring medical attention not otherwise available.

The Results Framework for the Joint Commitment for Development (2011–2015) between the Governments of Tokelau and New Zealand identifies results to be achieved by 30 June 2015. For health, the targets included are in the areas of obesity and other non-communicable diseases e.g. type 2 diabetes and hypertension, and the Tokelau Patient Referral Scheme policy implementation. These also constitute the targets for Health in the Tokelau National Strategic Plan (TNSP) 2010 – 2015 Results Framework.

## 1.2 Evaluation purpose and scope

The overall purpose of the evaluation is to **evaluate the Tokelau Health Sector for the period 2010 – 2015.**

The evaluation will inform the Director of Health together with other senior public service officials on options available to bring about improved health services delivery and move closer to achieving the strategic vision of ‘healthy and active communities with opportunities for all’ as outline (TNSP).

The evaluation will consider the interface between villages and the Department and provide practical strategies for improving efficiencies.

The evaluation will focus on provision of health services in all three villages – Atafu, Nukunonu and Fakaofu. It will also include the service provisions by staff located in Apia and the policy and implementation of the Tokelau Patient Referral Scheme (TPRS).

## 1.3 Evaluation objectives and questions

The evaluation will use **DAC Criteria** for Evaluating Development Assistance: Relevance; Effectiveness; Efficiency; Impact; Sustainability.

The objectives and questions for the evaluation are as follows:

**Objective 1:** To assess the effectiveness of the operational structures in the villages and the Department of Health for delivering good quality health services:

- How do the department and the villages work together to effect service provision?
- What changes are needed to strengthen the working relationship and improve service provision?

**Objective 2:** To assess the extent to which resources have been utilised efficiently and results achieved:

- How is the health budget (at both the department and village levels) allocated and spent to achieve required results?
- What proportion of the health budget is expended on tertiary / secondary and primary health service provision?
- What resources are provided by other donors? How are these contributing to achieving Tokelau's health sector objectives?

**Objective 3:** To identify functions or measures that should be introduced or updated to promote sustainability of community health promoting activities and public health approaches.

**Objective 4:** To assess the level of clinical service delivery at the three hospitals and at national level:

- What are the strengths and weaknesses of clinical service delivery at each hospital?
- What are the strengths and weaknesses of the clinical support provided by the department for each hospital?

**Objective 5:** To assess the effectiveness of the TPRS with regards to the delivery of quality health services for Tokelau:

- To what extent is the TPRS adhered to?
- What value does it add to health sector objectives?

## 2. Litmus Credentials

### 2.1 Litmus Ltd

Litmus Ltd is a research and evaluation consulting company based in Wellington, New Zealand, with associates across the Asia Pacific Region. Founded in 2001, we are a team of **over 20 full time employees, associates and contractors**. We have the financial capacity, insurance protection, systems and processes to undertake a project of this size, complexity and duration. Our capacity, capability and longevity mean the evaluation steering group can have confidence in our ability to resource assignments.

We would be delighted to undertake an evaluation of the Tokelau Health Sector. For this evaluation, Litmus proposes a team of up to three highly experienced consultants who together are specialists in monitoring and evaluation of health systems in the Asia Pacific Region. Sally Duckworth is a Litmus Partner, with over 20 years' evaluation experience leading large-scale strategic evaluations across the Asia Pacific Region. Margot Szamier is a Litmus associate who has experience in undertaking mixed-method evaluations across the Asia Pacific Region, and is a gender specialist. Lisa Gregg is a Litmus Senior Evaluator who has experience in mixed-method health evaluations.

### 2.2 Our credentials

Commissioning Litmus for this evaluation offers the evaluation steering group a number of significant benefits, including:

- **Experience in reviewing health systems in the Pacific Region:**
  - In 2013, Sally Duckworth was a member of the Technical Advisory Group engaged by AusAID to undertake a Mid Term Review of the Fiji Health Sector Strengthening Programme. The programme is targeted towards improving child health, maternal health and reducing NCDs in Fiji; through health promotion and strengthening primary health care; including revitalising the village/community health workers to improve service delivery.
  - In 2013, Litmus was engaged to undertake a health and social needs assessment of the Chatham Islands (a remote settlement 680km south east of New Zealand). This included an assessment of the patient transfer service, provision of medical and pharmaceutical supplies for the mainland and provision of primary care in Chatham Islands.
  - In 2011, MFAT commissioned Litmus to undertake an independent evaluation of the Fred Hollows Pacific Regional Blindness Prevention Programme (PRBPP). The purpose of the evaluation was to determine the relevance, effectiveness, efficiency and sustainability of the PRBPP across the three workforce development sites (Fiji, PNG and Timor-Leste).
  - In 2010, Litmus was commissioned by UNFPA to undertake a review of UNFPA HIV Posts across 22 countries in the Asia Pacific Region.
  - Litmus has worked alongside the governments of Solomon Islands, Vanuatu, Tonga, Kiribati, Nauru and Tuvalu to prepare country reports for the Global AIDS Response Progress (GARP).

- Litmus is involved in high profile evaluations for the New Zealand health sector, including leading the five year evaluation of the bowel cancer screening pilot, and two year evaluations of a court based drug and alcohol programme, cancer nurse professional development programme and Hepatitis B implementation.
- Litmus has worked extensively in maternal and child health. In the last two years we have undertaken a review of Counties Manukau District Health Board maternity services, research to explore barriers to immunising under 5's, and a quality review of New Zealand's Well Child Service.

▪ **A strong reputation in evaluation theory and practice.**

Litmus has a proven track record designing monitoring and evaluation frameworks, and conducting long-term, multi-phased and multi-sited evaluations. Over the last 12 years, Litmus has conducted **over 200 large and small scale evaluations** and reviews (policy, project and thematic), strategic plans, monitoring and outcomes frameworks, and social research projects across a wide range of sectors and subject areas (e.g. health, education, law and justice, infrastructure, and finance). Our strategic monitoring and evaluation expertise comprises:

- Sophisticated monitoring and evaluation scoping and design;
- Robust and appropriate performance data collection methodologies;
- Advanced strategic analysis skills and results reporting;
- Participatory approaches;
- Supporting the applied use of evaluation findings; and
- Designing innovative solutions for cost effective and authoritative monitoring and evaluation.

▪ **Robust planning and project management.**

Litmus prides itself on producing high quality project deliverables to time and budget. We have developed robust in-house project management systems, including investing in dedicated project planning at the start of every assignment, quality assurance systems, including peer review, clear lines of responsibility and task allocations. Litmus has also invested in strong data management, storage and security systems.

▪ **Proven ability writing concise evidence based reports.**

Our reports are evidence based, factually correct, presented in a clear and transparent manner and do not contain reputational risks for parties.

▪ **A deep respect for human rights and development evaluation ethics.**

Our proposed team has a personal commitment to improving development outcomes through our work as evaluators.

▪ **Professional membership**

We are members of the Australasian Evaluation Society, Aotearoa New Zealand Evaluation Association (ANZEA) and the Association of Social Science Researchers (ASSR).

## 3. Approach

### 3.1 Design considerations

The proposed evaluation approach has been designed with a number of considerations:

- The purpose, scope and objectives of the evaluation
- The importance of engaging with all three atolls
- Evaluation principles of independence, transparency and participation
- The remoteness of and access to Tokelau
- The availability of the data to inform the evaluation
- The timely completion of the evaluation
- Value for money to provide high quality evaluation.

We propose a three-phase evaluation process, summarised in the table below and described in more detail in the following sections.

Phase	Activities	Key outputs	Timing
1. Evaluation Plan	<ul style="list-style-type: none"> <li>▪ Briefing meeting</li> <li>▪ Desk review</li> <li>▪ Evaluation Plan</li> <li>▪ Evaluation tools</li> </ul>	<ul style="list-style-type: none"> <li>▪ Evaluation Plan</li> <li>▪ Evaluation tools</li> </ul>	November/December 2013
2. Data collection	<ul style="list-style-type: none"> <li>▪ Home based fieldwork (New Zealand stakeholders and regional partners)</li> <li>▪ In-country fieldwork (Tokelau/Samoa)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Raw data</li> </ul>	December 2013/January 2014
3. Analysis and reporting	<ul style="list-style-type: none"> <li>▪ Analysis and synthesis of data</li> <li>▪ Report drafting and review</li> <li>▪ Report finalisation</li> </ul>	<ul style="list-style-type: none"> <li>▪ Draft report</li> <li>▪ Final report</li> </ul>	February 2014

### 3.2 Evaluation Plan

An initial briefing meeting will be held with the evaluation contract manager and steering group to:

- Confirm our understanding of the requirements and scope of the evaluation
- Clarify areas of uncertainty and to attain further background information
- Confirm arrangements for communication during the evaluation
- Agree key next steps.

Key areas for discussion and confirmation will include: evaluation objectives and questions; methodology; key project milestones; reporting requirements; and budgets. The meeting will also confirm communication preferences between the evaluation contract manager and the evaluation team and frequency and nature of progress updates.

The Evaluation Team will undertake a **systematic and critical review** of programme documentation. The desk review will provide the evaluation team with a clear understanding of the health system's intended goal and outcomes as identified in the Results Framework. At a minimum the documents will include:

- Tokelau National Strategic Plan 2010 – 2015
- Joint Commitment for Development (Tokelau and NZ)
- Commission of Inquiry Public Services delivery, 2003
- Devolution Review 2012
- TPRS Policy 2006
- Health Activity Plan 2013 – 2014
- WHO Steps Survey (2005)
- Tokelau NCD Plan (2008).

An Evaluation Plan will be developed to be approved by the General Manager Apia prior to commencement of fieldwork. The Evaluation Plan will set out in detail the method and approach for the evaluation, including the way cross-cutting development issues such as gender, human rights and the environment will be considered. The final Evaluation Plan will include:

- Background and context to the programme
- Scope of the evaluation
- Purpose of the evaluation
- Evaluation questions and objectives
- Stakeholder analysis – list of stakeholders and their relationship with the programme
- Intended results of the programme/Results Diagram
- Information sources and data collection methods
- Data/information analysis
- Cross cutting issues
- Ethical considerations
- Risks and limitations
- Feedback of findings
- Documents to be used to inform the evaluation
- Timeline
- Appendices – interview schedules, etc.



### 3.3 Data collection

Litmus will work closely with the Department of Health to develop a list of stakeholders to be consulted in the review.

Interviews are ideal to elicit detailed information about individual aspects of the Tokelau Health System e.g. governance and oversight, infrastructure and planning, finance, workforce development and training, health information systems, monitoring and evaluation, clinical service delivery, health promotion etc, and they provide a confidential format for people to express concerns and criticisms – something they may be reluctant to do in a group situation. Small groups are preferable for stakeholders with shared experiences and perspectives, with the group dynamic often triggering interesting reflection and debate.

Anticipated length of interview is around 1 hour (individual) to 1.5 hours (meetings). Our policy is to conduct interviews in private and to schedule interviews to minimise disruption to work schedules. Stakeholders will be contacted about dates and timings for interviews/meetings as soon as possible after the Evaluation Plan is finalised, to ensure a high level of participation.

Litmus will develop qualitative interview schedules to ensure that key areas of investigation are addressed, tailored as appropriate for different stakeholder audiences.

It is expected that fieldwork will be conducted in English. All fieldwork will be audio recorded with stakeholders' permission and this record will be supplemented by evaluator notes of key themes and verbatim comments made at the time of the interviews. We recommend piloting the first few interviews to critically review the information being surfaced, to confirm interview length, logic and flow, and to manage any issues arising from the field.

**Approximately 50 interviews** will be undertaken with Tokelau, Samoa, New Zealand and regional stakeholders as follows:

- Tokelau stakeholders across the three atolls (Nukunonu, Atafu and Fakaofu) will be interviewed to inform all five objectives.
- Samoa stakeholders will also be interviewed to inform all five objectives. There will be a particular focus on the Patient Transfer Service.
- MFAT personnel will be interviewed to gain their views on the Tokelau Health sector, in the context of the Joint Commitment for Development (2011-2015) between the Governments of Tokelau and New Zealand.
- Regional partners (WHO, SPC and other regional donors) will be interviewed to gain their views on the Tokelau Health sector in the context of the Pacific region.

Phase	Face-to-face	Skype/phone
Nukunonu health providers Community organisations (Fatupaepae, Aumaga, youth), Village Council of Elders The Department of Health	10-14	
Fakaofu health providers Community organisations (Fatupaepae, Aumaga, youth), Village Council of Elders	8-12	
Atafu health providers Community organisations (Fatupaepae, Aumaga, youth), Village Council of Elders	8-12	
Apia based Department of Health staff and other relevant stakeholders	4-6	
New Zealand stakeholders	2-4	
Regional donors and stakeholders e.g. WHO, SPC and donor partners	-	3-4
<b>TOTAL</b>	<b>32-48</b>	<b>3-4</b>

### 3.4 Analysis and reporting

Following data collection, the evaluation team will systematically analyse all data streams to answer the evaluation questions. The team will undertake a thematic analysis of the qualitative data to identify patterns and themes relating to the evaluation objectives and wider contextual issues. Data quality will be checked early in the analysis process. We will triangulate and critically assess the robustness of different information sources.

Litmus regularly receives high praise for our reports. Our reports are evidence-based, and our reporting style is intelligent and concise. The evaluation report will use plain English and seek to present the voices of participants in a way that protects their anonymity. Reports will meet the OECD Development Assistance Committee (DAC) Quality Standards for Development Evaluation, and structural specifications agreed with MFAT.

A draft report will be delivered to the evaluation contract manager and the steering group for comment and review. Further work, or revision of the report, will be undertaken by Litmus, as required. A final report which incorporates reviewers' feedback will then be submitted.

## 4. Risk Management

In submitting this proposal, we have considered all other commitments in conjunction with the proposed timeframes of this study and are confident that our provision of services to deliver to this study will in no way be compromised. This is further assured through:

- Our expert team and assignment of senior experienced evaluators to the project
- The availability of another Litmus Partner in a support capacity who will 'stand-in' should any unanticipated event arise
- Robust quality assurance and internal peer review of processes and deliverables
- Our past history of consistently delivering evaluation services to time and budget.

Litmus develops a risk management plan for each assignment we undertake. One of the key purposes of the Evaluation Plan will be to identify risks for the project, identify mitigation strategies.

Throughout the project we will provide regular progress updates to the evaluation contract manager, and keep him/her informed of any issues that arise. This will enable us to jointly address emerging or minor issues before they develop into significant risks.

Litmus has identified a number of risks and strategies to mitigate these risks.

Risk	Risk Management Strategies
Stakeholders are not available when the evaluation team is in country	<ul style="list-style-type: none"> <li>▪ We will set up appointments well in advance of in-country visit</li> <li>▪ We will use other methods to engage with key personnel, if they are not in-country or not available (skype, phone, email)</li> <li>▪ We will seek to find alternative replacements, if appropriate.</li> </ul>
The evaluation is not completed on time due to transportation/ cyclone/weather issues	<ul style="list-style-type: none"> <li>▪ We will work with the transport authorities to determine the most feasible schedule</li> <li>▪ We will delay the fieldwork component, or</li> <li>▪ We will adopt other channels for data collection (skype, telephone, email) where face-to-face interviewing is not possible.</li> </ul>
Key personnel are incapacitated (sickness, etc)	<ul style="list-style-type: none"> <li>▪ Other team members will assume the role of the key personnel incapacitated</li> <li>▪ Litmus personnel are familiar with all assignments. We can therefore also assign a suitable replacement.</li> </ul>

## 5. Curriculum Vitae

### Sally Duckworth, Partner, Litmus Ltd

Wellington, New Zealand

Phone: +64 (0)4 473-3883 or +64 (0)21 473-883

Email: [sally@litmus.co.nz](mailto:sally@litmus.co.nz)

**Country experience:** New Zealand, Fiji, Vanuatu, Papua New Guinea, Solomon Islands, New Caledonia, Tonga, Timor-Leste, United Kingdom

#### Technical and sector experience

- 18 years' consulting expertise
- Leading teams – planning, implementation, resource allocation, quality assurance
- Facilitation
- Developing strategic plans, operation plans, communications plans, and concept notes
- Developing Results Frameworks and monitoring and evaluation plans
- Leading formative, mid-term reviews, outcome and impact evaluations
- Participatory approaches and capacity building
- Leading qualitative and quantitative research
- Sector expertise: Health; Justice; Governance; Infrastructure, Finance; Education

#### Qualifications

1993 Master of Arts, University of Auckland

1991 Bachelor of Arts, University of Auckland

#### Professional history

- Partner, Litmus Ltd, Wellington, New Zealand (2001 - current). Co-founder of Litmus ([www.litmus.co.nz](http://www.litmus.co.nz)) – providing social research, monitoring and evaluation, facilitation, and strategic planning services for government, business and not-for-profit. Responsible for organisational leadership and results, and key client management.
- Associate Director, the Nielsen Group, Wellington, New Zealand (1998 - 2001).
- Research Manager, the Burton Group, London, United Kingdom (1997).
- Researcher and Project Manager, Accident Compensation Corporation, Wellington, New Zealand (1996).
- Case Manager, Work and Income, Wellington, New Zealand (1994 - 1995).

## Professional membership

- Australasian Evaluation Society, Aotearoa New Zealand Evaluation Association, Association of Social Science Researchers, Marketing Association, Market Research Association New Zealand.

## Selected consultancies

- M&E specialist. Mid Term Review of the Health Sector Strengthening Programme (AusAID, 2013)
- Team Leader. Review of the Fred Hollows Pacific Regional Blindness Prevention Programme (NZ Ministry of Foreign Affairs and Trade 2011)
- Team Leader. Review of HIV/AIDS Focal Point Posts in UNFPA Regional, Sub-regional and Country Offices in Asia and the Pacific (UNFPA 2011)
- Project Lead. Gender and Socio-economic Impact Study of the Vanuatu Transport Sector Support Program (AusAID, 2013)
- Project Lead. Evaluation of the New Zealand Red Cross International Delegates Programme (NZ Red Cross, 2011)
- Consultant. Health and social needs assessment of the Chatham Islands (NZ Ministry of Health, 2013)
- Team Leader. Development of a Monitoring and Evaluation Plan for the Youth Mental Health Programme (NZ Ministry of Health, 2012/13)
- Team Leader. Development of a Monitoring and Evaluation Plan for the Physician Assistant Demonstration (NZ Ministry of Health, 2013)
- Team Leader. Evaluation of the Café for Youth Sexual Health programme (NZ Ministry of Health, 2013)
- Team Leader. Evaluation of the Pacific Island AIDS Foundation (NZ Ministry of Foreign Affairs and Trade, 2010)
- Technical Advisor. Preparation of the Global AIDS Response Progress report for the Kingdom of Tonga (UNAIDS 2012)
- Technical Advisor. Preparation of the Global AIDS Response Progress report for the Republic of Vanuatu (UNAIDS 2012)
- Technical Advisor. Preparation of the UNGASS Country Progress report for the Republic of Vanuatu (UNAIDS 2010)
- Team Leader. Review of the New Zealand Disability Strategy (NZ Ministry of Social Development 2009)
- Technical Advisor. Development of a Monitoring and Evaluation Plan for the Red Cross Canterbury Earthquake Recovery Programme (New Zealand Red Cross, 2012)

- Team Leader. Review of the WHO Safe Surgical Checklist (NZ Health Quality and Safety Commission, 2012)
- Technical Advisor. Development of a Monitoring and Evaluation Plan for the Pacific Islands HIV and STI Response Fund 2009-2013 (Secretariat of the Pacific Community, 2009)
- Technical Advisor. Development of the Vanuatu National Strategic Plan for HIV (UNAIDS, 2013)
- Team Leader. Development of New Zealand Red Cross National Operations Plan and Framework (NZ Red Cross, 2013)
- Team Leader. Testing brand concepts for the nutrition and physical activity programme (NZ Health Promotion Agency, 2013)
- Team Leader. Evaluation of the Transparency International Pacific Institutional Network and Strengthening Programme (NZ Ministry of Foreign Affairs and Trade, 2013)
- Implementation Partner. Strengthening Women's Economic Security and Rights (Markets Project) (UN Women 2010 – 2011)
- Team Leader. Qualitative Research to Explore Barriers to Immunising Under 5's (NZ Ministry of Health, 2011)
- Team Leader. Qualitative Research to Explore Barriers to Delaying Immunising Under 5's (NZ Ministry of Health, 2010)

## Margot Szamier

Honiara, Solomon Islands +677 7494703 [margot.szamier@gmail.co](mailto:margot.szamier@gmail.co)

Margot Szamier is a social development practitioner and gender specialist, with a focus on research, design, monitoring and evaluation, and institutional capacity building. She works in range of sectors, including health, rural and urban infrastructure, HIV & AIDS, peace and security, and civil society strengthening, with an emphasis on the rights and inclusion of women and girls in post-conflict, fragile and least developed countries.

Margot is presently the gender lead on a research team implementing a multi-year Socio-economic and Gender Impact Study of the Vanuatu Transport Sector Support Program (with Litmus Ltd.). Other current projects include a review of Solomon Islands' Women, Peace and Security National Action Plan and development of a framework for a gender analysis of the security sector for the Ministry of Women, Children, Youth and Family Affairs, and an evaluation of UNAIDS' M&E Capacity Strengthening project in twelve Pacific Island Countries. Since 2009, she has also provided regular technical support to UN Women's Economic Empowerment program in Melanesia, which included participatory research in markets in Vanuatu and Solomon Islands, the development of a regional framework for gender responsive market management, governance and infrastructure reform, and a strategy for the economic and social empowerment of women market vendors.

Margot has undertaken numerous national and multi-country program evaluations and reviews, using mixed qualitative and quantitative methods. She is experienced in analysing the impacts of development initiatives and in developing systems for monitoring, measuring, and reporting on progress towards the achievement of organisational, program, and policy related goals. Her skills in gender inclusion approaches and understanding of international women's rights commitments enable a robust approach to assessing and integrating gender equality dimensions in programs, and in measuring progress toward outcomes that are grounded in human rights.

Margot has lived and worked in the Autonomous Region of Bougainville, Papua New Guinea, Solomon Islands and Vanuatu, and has also undertaken field work in Fiji, Marshall Islands, New Zealand, Timor-Leste, United States, and Vietnam. She is fluent in Solomon Islands Pijin, Papua New Guinea Tok Pisin, and Bislama.

## Selected Consultancies

current	<b>Women, Peace and Security Review, Solomon Islands Ministry of Women, Children, Youth and Family Affairs/Ministry of National Unity, Reconciliation and Peace</b> Gender analysis of security sector, assessment of framework and strategy to enable development of the Solomon Islands Women, Peace and Security National Action Plan
current	<b>Lead Evaluator, UNAIDS</b> End of project evaluation of <i>Strengthening M&amp;E Capacity of Pacific Island Countries</i> , a project implemented in twelve countries; fieldwork in Solomon Islands, Fiji and Marshall Islands
Nov 2012 to present	<b>Gender Lead, Economic, Social and Gender Impact Study, AusAID</b> Member of research team (with Litmus Ltd) designing and implementing a baseline study and impact evaluation of the Vanuatu Transport Sector Support Program. Qualitative and quantitative research on Tanna, Malekula and Ambae
2012	<b>Women's Economic Empowerment Consultant, UN Women</b> Research, programme design, technical and capacity support to the Partnerships to Improve Markets initiative in Solomon Islands and Vanuatu
2012	<b>Lead Researcher and Author, UNAIDS</b> Global AIDS Response Progress Report, Solomon Islands 2010-2012
2012	<b>Workshop Design &amp; Lead Facilitator, Pacific Agribusiness Research for Development Initiative (PARDI) and UN Women</b> Designed and led one week participatory planning workshop and gender training with provincial government leaders, technical officers, and rural women vendors, for the Partnerships to Improve Markets programme-Vanuatu
2011	<b>Contributing Author, UN Women Pacific</b> Resources for Gender Responsive Market Reform, a toolkit for gender equality and women's empowerment in Melanesian Markets
2011	<b>Evaluator, UNFPA Asia-Pacific Regional Office</b> Multi-country review of the HIV/AIDS Posts Programme in Asia and the Pacific, using quantitative and qualitative research methods, led Vietnam fieldwork
2011	<b>Evaluator, NZ Ministry of Foreign Affairs and Trade and AusAID</b> Review of the Pacific Regional Blindness Prevention Programme in Pacific Island Countries and Timor-Leste, implemented by Fred Hollows Foundation. Undertook fieldwork in PNG, Solomon Islands, and Timor Leste
2011	<b>Technical Expert, European Union</b> MDG Initiative for Solomon Islands - Concept Note development and design
2011	<b>Designer &amp; Facilitator, UN Women</b> Regional Training and Knowledge Development Workshop focused on gender responsive market reform. One week workshop for 30+ Melanesian leaders, officials, rural and urban women market vendors, market authorities
2011	<b>Team Leader, Save the Children Australia</b> Research and drafted Maternal and Child Health Design. Fieldwork in rural Guadalcanal, Malaita and Western Province, Solomon Islands.
2010	<b>Technical advisor, UNIFEM</b> UN Security Council Resolutions on Women, Peace and Security - technical support toward implementation of commitments in the Autonomous Region of Bougainville
2010	<b>Gender policy and programme analysis – UNIFEM</b> Gender equality in the context of HIV/AIDS in PNG
2010	<b>Evaluator, NZAID</b> Part of evaluation team reviewing Pacific Islands AIDS Foundation
2010	<b>Gender research, UNIFEM</b> UN Security Council Resolution 1325 and Aid Effectiveness in Bougainville – analysis of donor support to implementation
2010	<b>Lead Researcher and Author, UNAIDS</b> Solomon Islands 2010 Country Progress Report, UN General Assembly Special Session on HIV and AIDS (UNGASS)
2009-2010	<b>Implementation Partner, UNIFEM</b> Strengthening Women's Economic Security and Rights – Partnerships in Markets Vanuatu. Part of team that led social research and implementation of UNIFEM's pioneering pilot initiatives in Melanesian Markets



2009	<b>Evaluator, Secretariat of the Pacific Community (SPC)</b> Evaluation of the Secretariat of the Pacific Community's HIV & STI prevention program
2009	<b>Researcher, Secretariat of the Pacific Community</b> HIV & STI Section's Strategic Plan 2010-2014
2009	<b>Technical Advisor, Pacific Islands Chiefs of Police</b> Development of a <i>Toolkit for Pacific Policewomen</i> , including indicators and data collection tools to support the Women's Advisory Network in monitoring young offenders
2009	<b>Evaluator, New Zealand Parliamentary Services</b> Measuring Parliamentary Service's responsiveness to MPs and staff
2009	<b>Evaluator, New Zealand Parliamentary Services</b> Performance measurement of Parliamentary Services' transition services during NZ 2008 General Election
2009	<b>Evaluator, NZ Ministry of Health</b> Evaluation of Post-graduate Certificate in Long-term Conditions Management
2009	<b>Evaluator, NZ Accident Compensation Corporation</b> Strategy and communications evaluation of claimants' re-injury prevention programme
1999	<b>Evaluation Team Leader, European Union</b> Bougainville Women's Microcredit Scheme (Papua New Guinea)
1999	<b>Team Leader, Foundation for the Peoples of Asia and the Pacific</b> Feasibility Study and Project Design - Bougainville Medical Supplies and Services (MSS) programme assessment for health sector strengthening initiative

## Professional Experience

SENIOR GENDER SPECIALIST  
RESEARCH COMMUNICATIONS GROUP (RCG)  
2013 to present

Part of a small global team providing high quality technical assistance and research and evaluation services.

PRINCIPAL CONSULTANT  
LITMUS LTD

Wellington, New Zealand and Honiara, Solomon Islands, 2008 to January 2012

- Established and managed Honiara office, led business development in the Pacific
- Undertook complex evaluations, reviews, scoping and design
- Planned and implemented social research projects
- Designed and conducted focus groups, community consultations, and surveys

DIRECTOR OF DEVELOPMENT AND STRATEGIC PARTNERSHIPS  
DESIGN THAT MATTERS (DtM)  
Cambridge, Massachusetts, USA, 2005-2006

Award winning non-profit design firm creating innovative tools for development

- Identified, cultivated and mobilised public, private and corporate contributions
- Led organisational planning, established strategic priorities, performance indicators
- Developed strategic communication resources and proposals

VOLUNTEERISM AND DEVELOPMENT SPECIALIST  
UNITED NATIONS VOLUNTEERS (UNV)  
New York and Bonn, 2001-2003

UN agency that contributes to peace and development through volunteerism

- Monitored global volunteering and development trends, developed strategic responses to opportunities
- Negotiated partnerships, strengthened institutional relationships and enhanced profile of United Nations Volunteers within and outside UN system
- Provided technical support in development and adoption of United Nations General Assembly

Resolutions on volunteering

- Provided policy recommendations as member of UNV Gender Focal Group and Private Sector Task Force
- Served as Deputy for New York Representation Office, Represented United Nations Volunteers within and outside the United Nations system
- Coordinated high-level events, symposia, meetings

EXECUTIVE DIRECTOR

VOLUNTEER WELLINGTON

Wellington, New Zealand, 1999-2000

Regional NGO aimed at capacity building and strengthening civil society

- Ensured organisational sustainability through new programming and resource mobilisation
- Led capacity building and re-branding initiative resulting in enhanced profile and role in the community
- Established partnerships with local and national government, business and community based organisations
- Provided leadership in national and local policy development for volunteerism and participation in the UN International Year of Volunteers
- Facilitated increased corporate volunteering and community engagement
- Led restructure of organisational financial management and operational systems

GENDER PLANNING ADVISOR

PAPUA NEW GUINEA GOVERNMENT, OFFICE OF BOUGAINVILLE AFFAIRS

Arawa, Bougainville and Port Moresby, Papua New Guinea, 1998-1999

Coordination office for the Bougainville peace, reconstruction and development process

- Set up field office for coordination of government and development partner roles in Bougainville's post-conflict reconstruction and development
- Increased women's political participation and representation in the peace process through advocacy and technical support to women's institutions
- Developed policy recommendations ensuring gender equitable access to development resources
- Undertook gender assessments of development proposals and plans; negotiated and advocated for responsive programming
- Trained staff, developed systems, facilitated links between factional representatives, and implemented a mechanism for systemic dialogue among community groups, NGOs and donors
- In a deeply fractured and fragile post-conflict environment, chaired the Women's Sectoral Working Committee held among parties to the peace agreement

MANAGEMENT TRAINER

FOUNDATION OF THE PEOPLE OF THE SOUTH PACIFIC (FSP)

Port Vila, Vanuatu 1995-1997

Integrated community development NGO, working in health, environment, governance, education, livelihoods and community planning

- Developed management capacity development program for local managers
- Designed and facilitated participatory strategic planning process resulting in localization and development of a governance board
- Developed bilingual training curriculum and communications materials
- Trained managers in project design, management, monitoring and evaluation
- Provided technical and management support to FSP's multi-sectoral rural development projects
- Built and maintained relationships with development partners, government officials, NGOs and rural communities

PROGRAM COORDINATOR  
CHITTENDEN EMERGENCY FOOD SHELF  
Burlington, Vermont, USA 1993-1994

State Community Action agency, addressing economic and social justice through food security advocacy and services

- Managed program providing emergency food and advocacy services to low-income and homeless families
- Developed monitoring and evaluation systems, prepared financial reports; recruited, supervised and evaluated staff and volunteers
- Integrated poverty and rights based analyses into food security and assistance policy responses among non-profit and State agencies
- Designed and facilitated training for staff and volunteers on cross-cultural awareness, conflict resolution, and gender analysis
- Initiated a successful outreach program for refugees, laid groundwork for Refugee Women's Support Group

#### Education

Master of Arts Intercultural and International Management

SIT Graduate Institute, Brattleboro, Vermont, 1994-1995

Thesis: Participatory Strategic Planning for Capacity Building in NGOs (1999)

Bachelor of Arts, Political Science

Saint Michael's College, Colchester, Vermont, 1991

#### Languages

Fluent: Solomon Islands Pijin, Bislama (Vanuatu), Tok Pisin (Papua New Guinea)

Basic: Japanese, Spanish

**LISA GREGG**

Senior Consultant, Litmus Ltd

[lisa@litmus.co.nz](mailto:lisa@litmus.co.nz) +64 4 901 8998

**SKILLS AND EXPERTISE SUMMARY**

- Senior Consultant at Litmus Ltd
- 5 years research and evaluation experience, including all stages of design, management, implementation, analysis and report writing
- Mixed-method data collection (qualitative and quantitative), including skill and experience with:
  - Literature reviews
  - Face-to-face in-depth interviews with a range of people from the community, professional bodies, and hard-to-reach audiences
  - Focus groups
  - Surveys and questionnaire design and implementation
  - Setting up monitoring and reporting data tools
- Project Management
- Skill in analysing data from mixed method data collection, including use of Nvivo (a qualitative analysis software package)
- Clear communication
- Concise and evidence-based report writing.

**EXAMPLES OF RECENT RELEVANT PROJECTS**

Experience implementing research, analysing data and reporting on findings from mixed-method approaches, including the following project examples:

- Review of evidence for effective interventions for victims and child witnesses of family violence (Ministry of Social Development, current)
- Review of evidence and best practice on community initiative exit and withdrawal strategies (New Zealand Police, 2012)
- Provision of advice for the qualitative evaluation of the Rangatahi Courts. 'Rangatahi Court: Evaluation of the early outcomes or Te Kooti Rangatahi' (Ministry of Justice, 2012)  
<http://www.justice.govt.nz/publications/global-publications/r/rangatahi-court-evaluation-of-the-early-outcomes-of-te-kooti-rangatahi/publication>
- Research into New Zealand Police partnerships to understand the reasons for partner satisfaction (New Zealand Police, 2011)
- Literature review to inform the evidence base for the quality review of the Well Child Tamariki Ora Programme (Ministry of Health, 2012)
- Literature search for the evaluation into the Bowel Screening Pilot in Waitemata DHB (Ministry of Health, 2012)
- Survey of Partner Satisfaction (Sport New Zealand, 2012 and current)
- Research to inform Kiwi Insurance positioning (Kiwibank, 2012)

- Study of Members' satisfaction with the Parliamentary Service over the election period (Parliamentary Service, 2012)
- Evaluation of low Cost Oral Health Services for Vulnerable Adults using District Health Board Community Oral Health Facilities (Ministry of Health, current)
- Review of the Implementation of Beating the Blues, an e-therapy tool for mild to moderate depression and anxiety (Ministry of Health, 2013)
- Quality Review of the Well Child Tamariki Ora programme (Ministry of Health, 2012)
- Evaluation of the Quality and Safety Challenge (Health Quality and Safety Commission, 2012)
- Research into the Practice of NRT Provision for Parents, Partners and Families of Children and Babies in Hospital (Hawkes Bay District Health Board and Russell Research, 2011)

### ***EMPLOYMENT HISTORY***

- 2011 – current: Litmus consultant, Wellington, NZ
- 2007 - 2011: Research Advisor, Ministry of Justice, Wellington, NZ.

### ***EDUCATION***

- Master of Social Science (majoring in psychology), University of Waikato, 2007
- National Certificate in Public Sector Services (Official Statistics), 2010

## 6. Budget Quote

All amounts are in New Zealand dollars and NZ Goods and Services Tax exclusive.

Planning and set up	6 days	\$6,000
Data collection	28 days (14 days for each consultant including travel time)	\$28,000
Analysis and reporting	15 days	\$15,000
Total	49 days	\$49,000

Costs exclude travel to and from Tokelau, per diems, and expenses.

## Appendix: Health Projects

**Evaluation of the Bowel Screening Pilot in Waitemata DHB (Ministry of Health, current):** The Bowel Screening Pilot began in October 2011 in Waitemata DHB. Activities planned include: population CATI surveys, online survey of providers, qualitative interviews with participants and non-participants, workshops with the programme provider and Ministry, and epidemiological reporting of screening data. During the evaluation regular workshops with the DHB and Ministry teams are being held to maximise usability of the evaluation findings. These workshops will inform DHB, the Ministry, providers and stakeholders, about emerging successes and challenges for the programme. The workshops will also seek their ideas and advice about mechanisms to facilitate performance and address issues.

**NZ Skin Cancer Control Strategic Framework 2011 to 2014 (HSC, 2010):** Litmus was invited to assist the NZ Skin Cancer Steering Committee with the development of the Skin Cancer Strategic Framework 2011 to 2014. The Skin Cancer Steering Committee is a national group of organisations that meets once every three years to identify priorities for the coming three years and develop the Skin Cancer Control Strategic Framework. Litmus worked collaboratively with the HSC and MelNet to set up and facilitate the August 2010 meeting. On the basis of meeting discussions, Litmus prepared a draft Strategic Framework document, which was circulated to Committee members for feedback before finalisation. Preparation of the Framework document included development of a programme logic, review of relevant skin cancer control literature and statistics, and close collaboration with HSC and MelNet to ensure the document met the needs of the sector.

**Evaluation Framework for Phase II Demonstration of Physician Assistants in New Zealand (Health Workforce New Zealand, current):** HWNZ is running a project involving 6 demonstration sites in areas identified as having high need, such as rural primary care and emergency care in rural/non-teaching hospitals. At each site US-trained Physician Assistants (PAs) will work as part of the core health delivery team for two years (i.e. alongside GPs, Nurses, Nurse Practitioners and the rest of the healthcare delivery system). HWNZ has engaged Litmus to develop the Evaluation Framework for the evaluation of the Phase II Demonstration – a process that involves significant stakeholder engagement and consultation with a wide range of stakeholders, including nurses, doctors and other health sector stakeholders working in primary and secondary healthcare settings.

**Quality reviews of the Well Child Tamariki Ora Before School Check, Six Week Check and new assessment tools (Ministry of Health current):** Litmus has recently undertaken quality reviews of components of the WCTO programme to inform the ongoing delivery, development and quality of WCTO services. The work involved consultation with sector stakeholders, and research amongst parents and caregivers of young children, and case studies with three DHBs. Litmus also developed a draft Quality Improvement Framework for the WCTO programme utilising the findings of these quality reviews.

**Research into the practice of nicotine replacement therapy provision for parents and partners of smoke-exposed children (Hawkes Bay District Health Board and Ministry of Health, 2011):** Case study research to document and understand the practice of providing free nicotine replacement therapy to parents of smoke-exposed children in hospital, and partners (who smoke) of pregnant women in hospital. Activities involved a site visit, document review, interviews with staff, and interviews with parents/partners to document how the initiative works, the perceptions of staff, and the views of parents/partners.

**Complex multi-method evaluation of the Human Papillomavirus Immunisation Programme (Ministry of Health, New Zealand, 2010-2011):** Litmus undertook an evaluation of HPV

Programme implementation to assess how well it is achieving short-term goals, objectives and implementation priorities. The evaluation applied a health equity lens to the Programme's implementation for Māori and Pacific young women and their whānau / families. A systems approach was used to frame the evaluation to ensure the complexity of the Programme design and delivery as well as the diversity and interaction of key stakeholders at national, regional and local level was considered. National level quantitative data was used to assess vaccine uptake. Facilitators and barriers to achieving equity were then identified using a mixed-method approach, grounded in Māori and Pacific research approaches. Data and information was collected from primary and secondary health care providers, regional planners and funders, NGOs, the Ministry of Health and key immunisation specialists, as well as groups and interviews with parents and young women.

<http://www.health.govt.nz/publication/hpv-immunisation-programme-implementation-evaluation>

**Barriers to consumer utilisation of Primary Maternity Services in Counties Manukau DHB (Ministry of Health, 2011):** The Ministry of Health commissioned Litmus to undertake audience research amongst young mothers who have accessed a range of different types of primary maternity care in Counties Manukau, including LMC, Shared Care and no structured antenatal care. The aim was to understand the decision-making processes and barriers young women face when accessing primary maternity services. The research required engagement with an audience which is isolated and hard to reach and involved in-depth interviews with stakeholders, including providers, and with mothers.

**Research on parents' and caregivers' role in reducing youth smoking (Health Sponsorship Council, 2011):** This qualitative audience research explored the role of parents', caregivers' and other 'significant' adults, in influencing young people's smoking attitudes and behaviours. Its aim was to inform the development of a new, adult-targeted tobacco control social marketing strategy. It involved a three-stage, multi-method research approach of family/whānau group, mini-group, and in-depth interviews with Māori, Pacific and Pākehā parents/caregivers of youth aged 10 to 16 years, followed by focus group testing of communication concepts and messages.

**Evaluation of the 'Keeping Well 2008-12 Strategy' (Hutt Valley DHB, 2009-current):** A three-year process and impact evaluation for Hutt Valley DHB focused on the implementation of the greater Wellington 'Keeping Well 2008-12 Strategy'. This evaluation also involved collaboration with Capital and Coast DHB, Hutt DHB, Wairarapa DHB and the Ministry of Health.

**Clinical Pathways evaluation (ACC, 2008):** Mapping of clinical pathways for clients who underwent knee, shoulder and spinal surgery. This involved interviews with clients to map out their pathway from GP referral, to specialist consultation to surgery and post-operative care. Litmus then presented the pathways in a workshop to the Royal College of General Practitioners, anaesthetists and surgeons. This was followed by workshop participants developing best practice pathways for these surgical procedures.

**Evaluation of Postgraduate Certificate in Long-Term Conditions Management (Ministry of Health, 2008):** The core purpose of this evaluation was to assess the effectiveness of the workforce development and coordination of the Postgraduate Certificate in Long-Term Conditions Management pilot programme being co-ordinated by the University of Auckland and funded by CTA through District Health Boards (DHBs). An important component of the evaluation focused on health outcomes for Māori and capability building of Māori nurses.

**Evaluation of the Foundation Certificate in Injury Prevention (Ministry of Health, 2008):** This evaluation reviewed the development and delivery of the Foundation Certificate in Injury Prevention. This included an evaluation of the content, delivery and assessment of the Certificate, the outcomes of the Certificate in relation to transferable skills to the workplace, marketing and promotion of the course and ongoing need and sustainability. Secondary objectives included



reviewing the current situation of injury prevention workforce development and completing a training/workforce development needs analysis of the injury prevention workforce.

**Sector consultation on ACC NIDMAR Licences (ACC, 2007):** In May 2007, ACC secured exclusive licences of five years duration for ACC and other New Zealand agencies and organisations who wish to participate in the NIDMAR approach (National Institute of Disability Management). Litmus chaired regional consultation forums with education and training providers, disability providers, consumer-led disability organisations, disabled people, central government agencies and ACC.

**Review of Implementation of *Beating the Blues* e-therapy programme (Ministry of Health, current):** Litmus is undertaking a review of this programme which will focus primarily on assessing the impact of the *process* to implement *Beating the Blues* – that is, the Ministry’s approach to the roll-out and uptake of the programme by GPs/primary mental health practitioners. Litmus will also assess the *likely* impact of the programme, to the extent that this is possible. The Review involves multiple data sources, and will include analysis of Ministry/DHB data-sets, stakeholder interviews and an online survey.

**Evaluation of Two Oral Self Care Health Trial Initiatives (Ministry of Health, current):** Litmus is conducting a formative and process evaluation of two oral self-care health trial initiatives. The ultimate objective of the Trial Initiatives is to determine whether the oral self-care health trial initiatives targeting at-risk adults are effective in improving oral health self-care, deliver value-for-money, and could be implemented nationwide. The process evaluation is weaved through the duration of the Initiatives, using provider reporting to gain insight into operational inputs and outcomes emerging. Immersion visits will be used to gain an in-depth understanding of the drivers underpinning the results, and to offer guidance to providers on their implications for the ongoing delivery of their Initiative.

**Surgical Safety Check List (Health Quality and Safety Commission, 2012):** Attitudinal research with surgical staff in five hospital sites in New Zealand undertaken for the Health Quality and Safety Commission to inform strategies to improve use of the Surgical Safety Checklist. The purpose of the research was to understand the extent to which the Checklist is used in operating theatres, how the Checklist is used, and influences on its use. The project also explored patient perceptions of use of the Checklist and the extent to which alternative checklists are being used.

**Evaluation of the Global Rating Scale (GRS) endoscopy quality service improvement tool (Ministry of Health, 2012):** The NZ GRS Tool is being trialled in the endoscopy units of four DHBs: Waitemata, Lakes, Wairarapa and Canterbury; to determine whether the NZ GRS should be rolled-out nationally. The goal of the NZ GRS is to help endoscopy units achieve a ‘patient-centred’ service. The overall purpose of the evaluation was to provide an independent review of the effectiveness of the NZ GRS tool, and provide recommendations to inform the planning of a proposed national roll-out of the NZ GRS (should it occur). The evaluation was undertaken from April to June 2012, following the first six months of the trial. A mixed method evaluation approach was used that involved the following activities: a brief documentation review; key informant interviews; national stakeholder feedback, site visits to the four DHB trial sites which included 47 interviews with staff using the NZ GRS tool; review of baseline and first six-month assessment data from the four trial DHB sites; and a findings validation workshop.

**Evaluation of two ‘Very Low Cost Access Innovative Care Model’ pilots (Taranaki District Health Board, 2009):** A process and impact evaluation and comparative analysis of two innovative primary care pilots to determine whether the alternative funding model used for the pilot projects was having a positive impact on health outcomes of high needs people with chronic condition/s. In addition to document and data analysis, Litmus used a 360° Immersion approach to undertake

qualitative research amongst all stakeholder audiences and to visit providers on-site. The pilots were assessed in terms of their cultural appropriateness, their reach of people living in rural areas, the effectiveness of the model in seeking positive lifestyle behaviour change, their sustainability and transferability both regionally and nationally. A comparative assessment was conducted with a third pilot to determine the pilots' sustainability in relation to value for money.

**Evaluation of parent education programme for parents and whānau of children with Autism Spectrum Disorder (Ministry of Health 2010-11):** Litmus evaluated three different programmes parents and whānau of children with Autism Spectrum Disorder (ASD) (programmes were *help!*, *Earlybird*, and *ASD-Plus*). Litmus conducted reviews and analysis of programme data and documentation (provider reports to the Ministry, administration and monitoring data, and other relevant documentation), as well as expert interviews, quantitative surveys of participating families/whānau and 360° Immersion Visits including in-depth qualitative interviews with funders, programme providers and parents/whānau.  
[http://www.educationcounts.govt.nz/publications/special\\_education/evaluation-of-two-asd-parent-education-programmes](http://www.educationcounts.govt.nz/publications/special_education/evaluation-of-two-asd-parent-education-programmes)