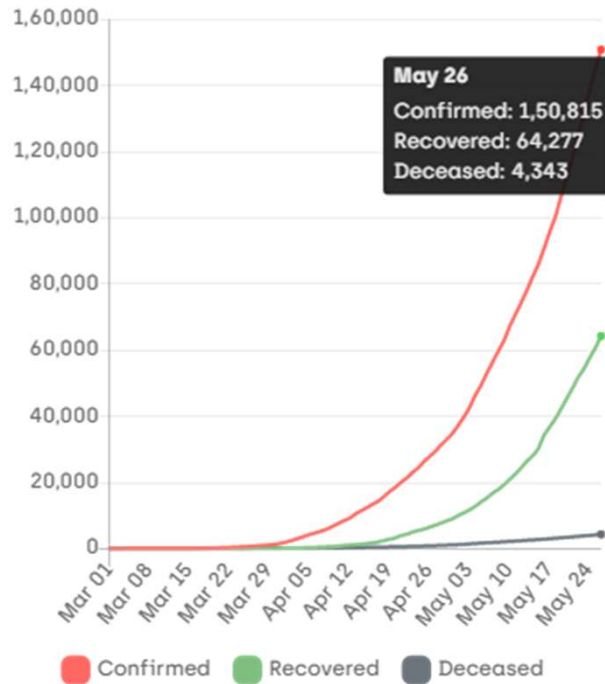


# COVID-19 IN INDIA: MUSINGS ON RESEARCH AND EVALUATION IN THE CONTEXT OF THE COVID-19 PANDEMIC

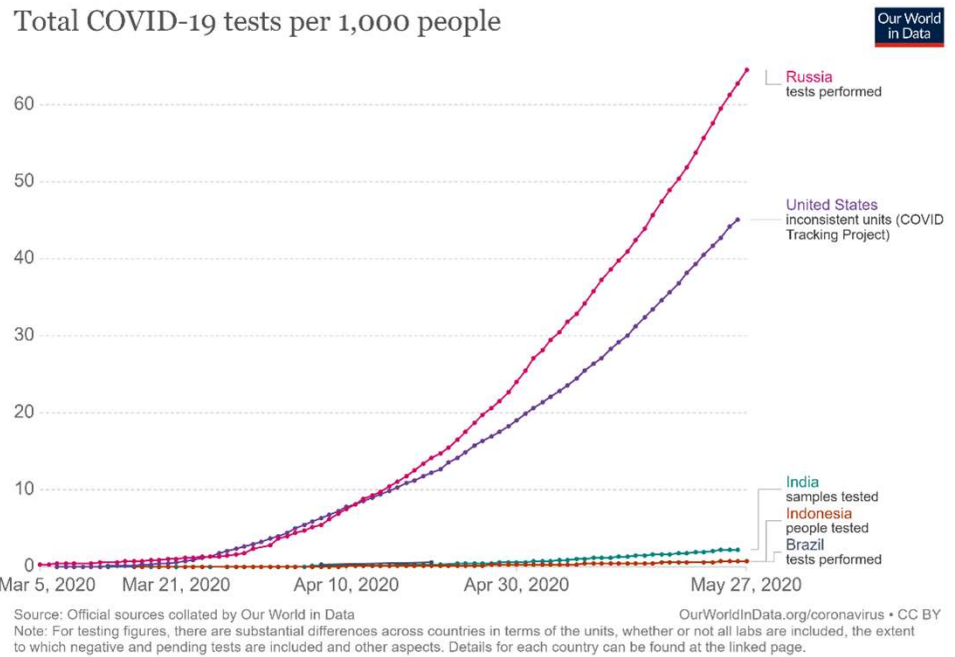
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# STATE OF THE COVID-19 PANDEMIC IN INDIA



Source <https://www.covid19india.org/deepdive>



Source: <https://ourworldindata.org/>

## ■ WHAT'S KEEPING ME UP AT NIGHT?



How can research and evaluation have impact in the context of a dynamic, evolving pandemic?



How do we foster learning and adaptation of technical support to strengthen health systems?

## ■ WHY WORRY ABOUT IMPACT?



- We are facing an **unprecedented, highly dynamic situation** and information is essential to guide the response.
- We are **accountable** for producing high quality research and for impact beyond the research domain.
- Now more than ever before, we must **measure the impact of research**: are there changes in society, economy, or environment that have been influenced by research?

## ■ WHAT IS DRIVING IMPACT?



For impact to occur, robust and relevant insights must be generated and mobilized to those who can use those insights to catalyze change.

- **Robustness:** Given the need for speed, are we jeopardizing the quality of research?
- **Ethics:** Gathering data in times of crises is very challenging and raises many ethical issues and dilemmas. Are we spending sufficient time identifying and addressing them?
- **Demand:** Is there demand for evidence? Are we actively nurturing demand?
- **Relevance:** How are we adding to the knowledge base? Are data and evidence amenable to solutioning?
- **Communication:** Policy and program decisionmakers are facing a deluge of possibly relevant information, and often look for prescriptive advice (what will work in a specific context when implemented in a specific way?). Do we understand their needs and frame evidence in a way that helps decision-making?
- **Timeliness:** There is a real need for speed, how do we cope?

## ■ HOW ARE WE RESPONDING?

**CORE Net** - The India COVID-19 Research Network is an effort to build a **community of practice** to foster exchange and collaboration among research organizations gathering information on issues relevant to the COVID-19 pandemic in India.

### **Maximize Impact**

To get relevant, synthesized evidence and insights in a timely and coordinated manner to key stakeholders

### **Bringing Ethics and Equity**

To evolve ethical research practices, with a focus on the most vulnerable populations.

### **Use & User Focus**

To surface evidence priorities & synthesize and share research findings with key stakeholders.

### **Reducing Noise, Strengthening Communication**

To streamline research efforts & speak in a voice that harnesses the power of the collective.



# HOW ARE WE RESPONDING?

## An Overarching Learning Agenda

Key Questions	
KQ 1	What are the <b>impacts of COVID-19 on households'</b> socio-economic and health status?
KQ 2	How has <b>access to and utilization of RMNCH, Nutrition and TB/NTD services (including primary health care)</b> been affected? What are the drivers of demand and utilization of healthcare services (e.g., fear, lack of transportation, etc.)?
KQ 3	How has COVID-19 <b>differentially impacted vulnerable individuals</b> and households (including those who fall in intersections of multiple categories of social and health risks) and affected health inequities?
KQ 4	How have <b>communities and community platforms/networks</b> been affected? What kinds of community responses and adaptations have emerged? What new forms of community engagement and behavior change interventions have been tried?
KQ 5	What have been the <b>gendered impacts</b> of COVID-19 – at the community and household level (e.g., women's experience of GBV, mobility, etc.) as well as within the health system (e.g., impacts on FLWs)?
KQ 6	How have the <b>Workforce, Commodities and Information pillars</b> of the health system fared in the context of COVID-19? What challenges (e.g., capacity gaps), adaptations and innovations have emerged?
KQ 7	How has <b>provision (supply) and quality of RMNCH, Nutrition and TB/NTD services</b> been affected during the time of crisis? What are the drivers of service disruption and what are the strategies/adaptations used to restore services? What minimal set of interventions are needed to meet RMNCHN, ID needs?
KQ 8	What have we learned about the <b>interconnectedness of health and other systems</b> – community, disaster management, sanitation, etc.? What essential systems (including structures and processes) need to be in place to respond to future situations?



## FOUR GUIDING PRINCIPLES

**Humility:** Are we open to questioning, being reflexive, being challenged?

**Partnership:** Are we proactively seeking out and investing in collaboration, complementarity and synergy?

**Transparency:** Are data **F**indable, **A**ccessible, **I**nteroperable, and **R**e-useable?

**Equity:** Are our resources and attention meaningfully directed toward mitigating adverse impacts on the most disadvantaged?