

# MEASURING ADVOCACY FOR POLICY CHANGE

## *the case for respectful maternity care*

### Background Reading List

#### Key Readings

1. [A Guide to Measuring Advocacy and Policy](#). Annie E. Casey Foundation and Organization Research Services (2007).
  - Overview: Defines a number of methods for measuring advocacy.
2. [Exploring evidence for disrespect and abuse in facility-based childbirth: Report of a landscape analysis](#). Bowser, D., Hill, K. (2010). USAID TRAction Project.
  - Overview: A review of the evidence of disrespect and abuse in facility-based childbirth. This includes the review of published and gray literature with regard to the definition, scope, contributors, and impact of disrespect and abuse in childbirth, promising intervention approaches, and the identification of gaps in the evidence.

#### Further Readings on Policy Advocacy

1. [Advocacy Evaluation: Review and Opportunities](#). Whelan, J. (2008).
  - Overview: Reviews the emerging literature in the field, noting the points of convergence and divergence. The author also suggests limitations on the available frameworks for evaluating advocacy and identifies opportunities for effective evaluation that meet the needs of interest groups.
2. [A Guide for Advocating for Respectful Maternity Care](#). Windau-Melmer, T. The White Ribbon Alliance (2013).
  - Overview: This provides background on RMC as well as methods and tools for advocates to work towards institutionalization of RMC as a core value of the maternal care system. This includes the Respectful Maternity Care Charter: Universal Rights of Childbearing Women.
3. [Shaking the tree: Evaluating Programs that Provide Services and Advocacy](#). Schlangen, R. Center for Evaluation Innovations (2012).
  - Overview: This paper examines the trend of reproductive health civil society organizations in developing countries that are engaging in advocacy for improved reproductive rights at the service delivery level. First, the rationale and requirements for reproductive health service delivery advocacy is introduced. Next, challenges and current practices are explored in monitoring and evaluating these efforts. Lastly, the paper presents a number of strategies to consider when developing a monitoring and evaluation approach for service delivery advocacy.
4. 'Implementing an indicator': operationalising USAID's 'Advocacy Index' in Zimbabwe. Hirschmann, D. (2002). *Development in Practice*, 12(1): 20-32. <http://dx.doi.org/10.1080/09614520220104257>
  - Overview: Provides a qualitative approach to measuring impact of policy change.

5. [Advocacy Evaluation: What It Is and Where to Find Out More About It](#). Fagen, M. C., Reed, E., Kay, J. W., Jack, L. (2009). *Health Promotion Practices*, 10(4):482-484. <http://dx.doi.org/10.1177/1524839909339584>
  - Overview: The article introduces the growing field of advocacy evaluation by describing its typical features, which include using prospective evaluation designs, emphasizing real-time data collection and use, monitoring and responding to changing environmental conditions, and assessing both individual and organizational capacity building. A number of freely available resources for learning more about advocacy evaluation's key concepts and methods are highlighted.
6. [International advocacy: Measuring performance and effectiveness](#). Kelly, L. Paper presented at the 2002 Australasian Evaluation Society International Conference October/November. Wollongong, Australia.
  - Overview: Reviews two different evaluation efforts of NGOs undertaking advocacy and policy work in developing countries.
7. [Advocacy Evaluation: Challenges and Emerging Trends](#). Devlin-Foltz, D., Fagan, M.C., Reed, E., Medina, R., Neiger, B. L. (2012) *Health Promotion Practices*, 13(5): 581-586. <http://dx.doi.org/10.1177/1524839912446482>
  - Overview: Highlights several challenges advocacy evaluators are currently facing and provides new resources for addressing them.
8. [Measuring the Impacts of Advocacy and Community Organizing: Application of a Methodology and Initial Findings](#). Ranghelli, L. (2009). *The Foundation Review*, 1(3): 132-148.
9. [The Challenge of Assessing Policy and Advocacy Activities: Strategies for a Prospective Evaluation Approach](#). Guthrie, K., Louie, J., David, T., Foster C., C. (2005) The California Endowment.
10. [Research and Advocacy for Policy Change: Measuring Progress](#). Kelly, L. (2002). The Foundation for Development Cooperation, Australia.
11. Learning for change: the art of assessing the impact of advocacy work. Coates, B., David, R. (2002). *Development in Practice*. 12(3-4): 530-541. <http://dx.doi.org/10.1080/0961450220149870>
12. Development of the Policy Advocacy Behavior Scale: Initial Reliability and Validity. Donaldson, L.P., Shields, J. (2009). *Research on Social Work Practice*, 19(1): 83-92. <http://dx.doi.org/10.1177/1049731508317254>

### Further Readings on Respectful Maternity Care

1. From 'culture of dehumanization of childbirth' to 'childbirth as a transformative experience': changes in five municipalities in northeast Brazil. Misago, C., Kendall, C., Freitas, P., Haneda, K., Silveira, D., Onuki, D., Mori, T., Sadamori, T., Umenai, T. (2001). *International Journal of Gynecology and Obstetrics*, 75: S67-72. [http://dx.doi.org/10.1016/S0020-7292\(01\)00511-2](http://dx.doi.org/10.1016/S0020-7292(01)00511-2)
  - Overview: The article compares the delivery and childbirth situation in five municipalities in the Brazilian State of Cear a, before and after an intervention which integrates humanization of childbirth elements into health care provider training.
2. Violence against women in health-care institutions: an emerging problem. d'Oliveira, A., Diniz, S., Schraiber, L. (2002). *The Lancet*, 359: 1681-85. [http://dx.doi.org/10.1016/S0140-6736\(08\)61345-8](http://dx.doi.org/10.1016/S0140-6736(08)61345-8)
  - Overview: This article analyzes research from the past decade on abuse by doctors and nurses. Four forms of abuse are discussed: neglect, verbal, physical, and sexual abuse.
3. [Why do women prefer home births in Ethiopia?](#) Shiferaw, S., Spigt, M., Godefrooij, M., Melkamu, Y., Tekie, M. (2013). *BMC Pregnancy and Childbirth*, 13(5).

- Overview: This mixed methods study looks at reasons why women prefer to deliver at home despite low-cost options being available at health care facilities. In addition to several other deterrents, women do report that poor quality of care and previous negative experiences with health facilities influence decisions on where to seek maternity care.
4. [Study protocol for promoting respectful maternity care initiative to assess, measure and design interventions to reduce disrespect and abuse during childbirth in Kenya](#). Warren, C. Njuki, R., Abuya, T., Ndwigwa, C., Maingi, G., Serwanga, J., Mbehero, F., Muteti, L., Njeru, A., Karanja, J., Olenja, J., Gitonga, L., Rakuom, C. and Bellows, B. (2013). *BMC Pregnancy and Childbirth* 13 (21).
    - Overview: This article outlines a quasi-experimental study aimed at designing, testing, and evaluating an approach to significantly reduce disrespectful and abusive (D&A) care of women during labor and delivery in facilities. Specifically the study aims to: (i) determine the manifestations, types and prevalence of D&A in childbirth (ii) develop and validate tools for assessing D&A (iii) identify and explore the potential drivers of D&A (iv) design, implement, monitor and evaluate the impact of one or more interventions to reduce D&A and (v) document and assess the dynamics of implementing interventions to reduce D&A and generate lessons for replication at scale.
  5. Quality of care in institutional deliveries: the paradox of the Dominican Republic. Miller, S., Cordero, M., Coleman, A. L., Figueroa, J., Brito-Anderson, S., Dabagh, R., Calderon, V., Caceres, F., Fernandez, A. J., Nunez, M. (2003). *International Journal of Gynecology and Obstetrics*, 82: 89-103. [http://dx.doi.org/10.1016/S0020-7292\(03\)00148-6](http://dx.doi.org/10.1016/S0020-7292(03)00148-6)
    - Overview: Using a strategic assessment process, this study seeks to understand why the Dominican Republic continues to report high maternal mortality rates while nearly all women utilize formal facilities for childbirth. Findings suggest that poor quality of care, including a lack of respect for reproductive and overall women's rights, can be attributed to the higher rates of maternal mortality.
  6. [Human rights, constructive accountability and maternal mortality in the Dominican Republic: a commentary](#). Freedman, L.P. (2003). *International Journal of Gynecology & Obstetrics*, 82(1):111-114.
    - Overview: This paper is a commentary on the childbirth situation portrayed in the Miller et al article, "Quality of care in institutional deliveries: the paradox of the Dominican Republic". The paper uses this situation to discuss the importance of recognizing that high quality delivery services are a human right and that these rights should be upheld through 'constructive accountability'. The author posits that the setting of appropriate norms for maternal care and key stakeholder, including government, participation is necessary for improved quality of care.
  7. [Accessing the "Caring" Behaviors of Skilled Maternity Care Providers During Labor and Delivery: Experience From Kenya And Bangladesh](#). CHANGE Project (2005).
  8. [Using human rights to improve maternal and neonatal health: history, connections and a proposed practical approach](#). Gruskin, S., Cottingham, J., Hilber, A.M. et al. (2008). *Bulletin of the World Health Organization*, 86(8):589-593.
  9. [Perspective: A Culture of Respect, Part 1: The Nature and Causes of Disrespectful Behavior by Physicians](#). Leape, L.L., Shore, M.F., Dienstag J.L., Mayer R.J., Edgman-Levitan S., Meyer G.S., and Healy G.B. (2012) *Academic Medicine*, 87:845–852.
  10. [An assessment of the impact of Health Workers for Change in Avellaneda, Province of Buenos Aires, Argentina](#). Pittman, P., Blatt, G. & Rodriguez, P. (2001). *Health Policy and Planning*, 16(S1):40-46.