

Beyond the Crisis: Embedding Evidence for Resilient Health Strategy

Lessons from the Evaluation of ADB's Support for Health in Asia and the Pacific

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I. Session Takeaway: Evidence is Only as Good as the System

CORE PARADIGM SHIFT

“Decision systems do not fail because of a lack of data or evaluations; they fail due to structural bottlenecks.”

To turn evaluations into resilient strategies, ADB must bridge four critical structural gaps.

1. The Mandate Gap (Policy)

Retiring outdated 25-year-old policies to prevent strategic drift and align portfolios with modern health realities.

2. The Integration Gap (Multisectoral)

Designing shared performance metrics and systematic tagging to capture invisible health benefits in non-health projects.

3. The Translation Gap (Knowledge)

Shifting from academic, text-heavy publications to direct, disaggregated data digestible for policymakers.

4. The Human Gap (Capacity)

Cultivating local technical expertise and strategic partnerships with other development partners over reliance on temporary consultancy.

II. Risk of Stale Evidence: The Legacy Policy Gap

- **Outdated Frameworks:** ADB's core health policy was established in 1999 and has not been updated since
- **Consequence:** ADB's health policy predated modern health priorities like Universal Health Coverage (UHC), pandemic preparedness, and digital health
- **Lesson:** Decision systems fail when they rely on outdated mandates that do not reflect shifting regional dynamics, such as aging populations and the rise of noncommunicable diseases

III. Challenge of Tracking "Invisible" Evidence (Multisectoral Results)

- **Tracking Across Sectors:** While health sector projects are simpler to track, ADB struggled to gather evidence on health outcomes from "multisector" projects (e.g., water, transport, or energy)
- **Monitoring Gap:** There is often no systematic "tagging" or monitoring for health outcomes in non-health projects—making it difficult to measure or attribute success to said interventions
- **Lesson:** To truly embed evidence in decision systems, institutions must develop shared performance metrics and cross-sector monitoring frameworks to capture "co-benefits" that otherwise remain invisible.

IV. Knowledge Production versus Knowledge Utilization

- **Text-Heavy Barrier:** Since 2011, ADB published 500+ knowledge products for the health sector, yet they rarely reach frontline implementers due to high technical barriers and length.
- **Data Silo:** The lack of a structured, publicly accessible data system significantly undermines the ability to evaluate investment effectiveness.
- **Lesson:** Evidence-based decision-making requires shorter, direct communication and accessible, disaggregated data.

V. Strengthening Institutional Capacity: From Data to Decisions

- **Safeguard Institutional Memory:** Rebuild the technical knowledge base eroded during previous periods of sector deprioritization to prevent "institutional amnesia"
- **Prioritize Specialists:** Translating data into policy requires a specialized workforce—doctors, health economists, and administrators—not just generalist or project managers
- **Power of Local Presence:** Success in Mongolia proves that long-term, in-country expertise could be the primary driver of sustainability and successful policy dialogue

VI. Recommendation for a Path to Evidence-Driven Planning

- **Mandate:** Replace non-binding guides with an updated health strategic framework that provides a clear vision for the region
- **Incentivize:** Create institutional rewards for cross-sectoral collaboration so health outcomes are explicitly planned and monitored
- **Deepen:** Shift from a demand-driven approach to one grounded in country-focused diagnostics and rigorous needs analysis
- **Sustain:** Invest in long-term local continuity (in-country experts), while blending capacity within ADB with other development partners

VII. IED's Contribution to Strengthening Evidence-Driven Planning

- **Follow up on evaluation recommendations:** Management Action Record System (2009)
 - Strengthening accountability of follow-up on evidence-based reform/action
- **Access to knowledge:** Lessons Database (2010) → EVA (2024)
 - Enhancing access to evaluation lessons for ADB project officers through a transition from a simple keyword search to a cognitive search aided by AI
- **Internal learning and communication:** “What Works” (2018), Country Engagement Missions (2023), and Evidence Matters (2025)
 - Raising interest and ownership of evidence within ADB and its leadership