This is a repository copy of A call for transparency in the evaluation of global maternal health projects.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/103833/

Version: Accepted Version

**Article:**

https://doi.org/10.1016/S0140-6736(16)31153-9

Article available under the terms of the CC-BY-NC-ND licence (https://creativecommons.org/licenses/by-nc-nd/4.0/)

**Reuse**
Unless indicated otherwise, fulltext items are protected by copyright with all rights reserved. The copyright exception in section 29 of the Copyright, Designs and Patents Act 1988 allows the making of a single copy solely for the purpose of non-commercial research or private study within the limits of fair dealing. The publisher or other rights-holder may allow further reproduction and re-use of this version - refer to the White Rose Research Online record for this item. Where records identify the publisher as the copyright holder, users can verify any specific terms of use on the publisher's website.

**Takedown**
If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.
A Call for Transparency in the Evaluation of Global Maternal Health Projects

1. University of Alberta, School of Public Health, 4-347 Edmonton Health Academy, 11406-87 Ave, Edmonton, AB, Canada T6G 1C9
2. Centre for Anthropological Research (CfAR), University of Johannesburg, South Africa; and School of Medicine, University of Leeds, UK.
3. University of Sheffield, Section of Public Health, Regent Court, G045a-30 Regent Street, Sheffield, United Kingdom, S1 4DA

Authors: Zubia Mumtaz¹, George TH Ellison², Alyssa Ferguson¹ and Sarah Salway ³

Send correspondence to: Dr. Zubia Mumtaz, MBBS, MPH, PhD
Associate Professor, Global Health
School of Public Health, University of Alberta
3-309 Edmonton Clinic Health Academy
11405 - 87 Ave., Edmonton, Alberta, CANADA
Tel: (780) 492-7709
Email: zmumtaz@ualberta.ca
Dear Dr. Horton,

In light of growing discussions surrounding the measurable effectiveness of maternal health programs and learning from failure – as highlighted at both the Women Deliver 2016, and Global Maternal Health 2015 conferences - we wish to draw attention to how current practices in global maternal health create perverse incentives to hide learning that could potentially improve interventional approaches. A key challenge in global maternal health today is the incongruity between ‘successes’, invariably reported at discrete program level, and the collective lack of progress in global maternal mortality rates. Evaluations of numerable projects consistently suggest a preponderance of successful interventions, yet collectively 69 of 75 high burden countries failed to achieve their MDG-5 targets.

As evaluators, we have encountered concerning instances in which unwelcome findings were selectively unreported, or led to contractual terminations. Similar experiences have been echoed by colleagues in diverse geographical contexts. This necessitates consideration of:

1) How we can protect the independence of evaluators and prevent the silencing of important evaluation insights. The scientific community has a duty of candor. We suggest an international evaluation registry, along the lines of the ISRCTN for randomized controlled trials, be established to increase transparency and reduce selective reporting.

2) Conflicts of interest preventing funders and implementing agencies from sharing negative, yet important programmatic evaluation findings. There is a need to disentangle the associations between project outcomes and individual and/or institutional credibility, and create safeguards for reporting of negative findings.

3) Whether the current evidence base produced by project evaluations can be trusted, given this positive evaluation bias. It seems likely that the more problematic a project, the less likely we are to learn of its shortcomings. As a result, we are less likely to make substantive changes to our practice.

All this demands a systematic and thorough exploration of the current practice of global maternal health evaluation, a sharper focus on scientific independence, and a responsibility of all stakeholders to facilitate the reporting of challenges and failures.

Author Contributions: ZM, GE, AF, and SS conceptualized and wrote the manuscript. All authors have approved of the final version of the manuscript.

Conflict of Interest: The authors have no conflicts of interest to declare.

REFERENCES

