Acknowledgements

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This document is a work in progress and we welcome your comments and feedback. Please send any comments and/or questions to scienceofdelivery@worldbank.org.
Guidelines for Delivery Case Studies

Learning from operations, for operations

Preface
This document has been prepared to provide guidelines for preparing Science of Delivery Case Studies.

The Science of Delivery Case Studies make up a series of case studies that investigate underexplored complex delivery problems and processes. These case studies are intended to capture implementation knowledge from operations – the staff who are involved in designing and implementing development interventions – and give practitioners access to insights about how others have confronted issues of delivery. The case study series is intended to inform the work of development practitioners worldwide.

The intended audience of these guidelines is primarily the case-writers who will prepare cases; as such, this document is intended to help and support the case writer in designing and conducting case study research, and in writing a case study based on that research. These guidelines may also be useful to potential partners who would like to contribute to the library of Delivery Case Studies, and to operational teams who want to learn more about how case studies can help them answer questions about delivery.

These guidelines answer questions about why the Science of Delivery case studies are being produced, and the ultimate goal and audience of these documents. They provide additional detailed guidance on the scope and structure of SoD case studies; the process and timeline for producing SoD case studies; and the process for writing up findings and carrying out interviews.
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1. Why are we doing Science of Delivery Case Studies?

Adequate funds, sound technical solutions, and good intentions do not always lead to desired development outcomes. Too often, interventions fail to have the intended impacts on people’s lives.

There is a growing consensus\(^1\) on the urgent need to bring about better and more consistent results on the ground and at scale. For this, we must begin to systematically develop a collective and cumulative operational know-how – on what works in international development, under what conditions, why and how. A key ambition is to develop a delivery knowledge base that brings together hitherto fragmented expertise and experience – from development agencies and multi-lateral development banks, government agencies and non-governmental implementers, private sector practitioners, as well as the research community. Such a coherent body of implementation knowledge will be critical for improving the quality of development operations and advancing the goals of development partners worldwide, including and especially the Sustainable Development Goals (SDGs). This body of implementation knowledge is what we call the Science of Delivery. Science of Delivery is defined here as the collective and cumulative knowledge base of delivery know-how that helps practitioners make more informed decisions and produce consistent results on the ground.

Implementation, or “delivery”, refers to the iterative pathway of innovation, learning and scaling up successful development interventions. As shown in Figure 1 it is the implementation process -- and the learning from this process -- which produces intended results at scale by introducing and testing new ideas, by learning what works and does not work, and why, by scaling up successful interventions, and in this process further innovating, learning and adapting development solutions. The central objective of the Science of Delivery Case Studies is to gather and assess experience with the process of implementation of interventions designed to address a specific development challenge or problem. Implementation Case Studies may focus on (a) pilots with an explicit scaling up goal, (b) interventions that represent and intermediate or final step along the pathway, or (c) interventions that cover an entire scaling up pathway from start to finish. Science of Delivery aims to develop a systematic understanding of how development interventions succeed or fail, and to better understand factors that lead to, or prevent, successful impact, including at scale.

\(^1\) The international community called for a “Science of Delivery” for international development at the June 2013 Workshop in Seoul (‘Towards a Science of Delivery for Development’), a meeting between a wide number of development partners, institutions and practitioners. In November 2011 the 4th High Level Forum on Aid Effectiveness concluded that scaling up of development cooperation and results was essential (Busan Partnership for Development Cooperation) and since then many development institutions have focused explicitly on scaling up development impact.
Central to the emerging “Science of Delivery” (SoD) is the notion of learning from operations, for operations – that is revisiting past interventions to apply knowledge about the implementation process to future operations. The SoD Case Study initiative will encourage researchers to ask questions about hitherto underexplored complex delivery problems and processes that development actors routinely grapple with: what they are, when they arise, and how they can be addressed, including detailed accounts of delivery techniques, strategies, and experiences of the twists and turns of the implementation process.

A case study is not just another “story” but an important method of applied and empirical research. Case studies can provide a clearer understanding of the sequence of events and balance the perspectives of key actors, helping us untangle cause and effect. Indeed, they can help to establish “the causes of effects” – explaining how certain outcomes came to be. More specifically, the SoD case studies seek to outline how interventions were implemented.

Systematically investigating delivery in its own right will make it possible to distil the common delivery challenges, the non-technical problems that hinder development interventions and that prevent countries and practitioners from translating technical solutions into results on the ground. For example, the fragmentation between national, state, and local authorities, staff capacity and mis-aligned incentives are just some of the delivery challenges that can undermine otherwise sound technical solutions – as in the case of the implementation of one-stop shops for administrative services in Brazil\(^2\). Cases like these highlight the importance of improving our understanding of the factors that affect development practitioners’ ability to achieve consistent and transformational impacts on the ground.

The Guidelines set out in this document are aimed at case writers, development partners and operational teams interested in systematically understanding operational processes. Case studies will be shared widely with the development community through a globally accessible, open-source, online repository – the SoD Case Study Library. As the Library of case studies expands, it will comprise delivery cases from a large number of countries and sectors, together with other forms of evidence on implementation performance. These will be made widely available to enhance practitioners’ awareness of delivery challenges and of potential obstacles to delivery in practice, and help suggest or craft new solutions to delivery bottlenecks.

### 2. What is a Science of Delivery Case Study?

A well-executed SoD Case Study has the following characteristics:

- **Scope:** In preparing delivery case studies, determining the scope is a crucial decision to be made by members of the team commissioning the case study in conjunction with the operational tema that carried out the intervention under study. Generally the SoD Case Study takes a single *development intervention* (a project or program, or particular policy or instrument) as its unit of analysis, or compares multiple interventions. The actor undertaking the intervention may be a

\(^2\) Overhauling and revamping an existing service delivery system: *One-stop shops in Minas Gerais, Brazil 2003-13* – Science of Delivery Case Study (January 2014).
country government, at national, regional, or local level; or the actor may be a development agency. Throughout these cases, the focus of the case is not simply the intervention, but is the problem to be addressed. For example, some single-intervention case studies undertaken as part of the Science of Delivery case study initiative include: how tax administration in Rio de Janeiro was streamlined; how an anti-poverty program in Indonesia was scaled up; and how a CCT program in Mexico attempted to better deliver services to marginalized indigenous populations. In these examples, the problems being addressed are sclerotic tax administration; the challenges involved in scaling up and extending coverage; and unequal coverage of CCTs. Some cases may trace multiple interventions that deal with the same problem: for example, successful and unsuccessful actions taken to reduce child mortality in selected countries. In such cases, the contexts may be different, but the ways that practitioners dealt with the particular delivery case should serve as the anchor and axis of comparison.

Regardless of whether a case focuses on a single intervention, or undertakes the (generally rarer) comparative approach, it is required to make a novel contribution to delivery knowledge by introducing a particular delivery challenge and showing how the case furthers understanding of the issue.

It documents the process of implementation of an intervention, with particular attention to the critical junctures that determined the trajectory of an intervention, and to documenting the obstacles and problems faced by implementers, and what they did (if anything) to overcome them. SoD case studies are a mixture of learning from success and learning from failure – that is, they present both interventions that succeeded in achieving their desired impact, and those that did not.

In cases where the objective of the intervention is to extend outcomes to a larger (national or even international) scale – as in the case of the Indonesian and Mexican programs mentioned above, and more generally in interventions of the types b. and c. above – the case studies will consider key determinants of the scaling up implementation process. In cases of interventions that represented pilots, the case studies will ascertain how it was integrated into the design and implementation process.

Finally, these interventions must have amassed sufficient evidence to make a statement about outcomes for citizens, and about the outcome of the implementation process. The case study itself is not an evaluation; but evaluations and IEG scores may be taken into account as indicators of success or failure. These may be taken together with less formalized indicators, such as the presence of data on citizen outcomes, and the knowledge of practitioners, so that judgment on the success or failure of an intervention is not made by the case writer, but may have been made by other measures.

Ownership and selection: The Science of Delivery Case Studies aim to learn from operations, for operations and must therefore respond to practitioner demand for a better understanding of a specific implementation process or problem. The case studies therefore should address questions that practitioners want answers to, with demand and buy-in coming from the bottom up and buy-in from senior levels. SoD case selection will occur in close consultation and with substantial input
from frontline and technical practice staff, to ensure the scope and eventual focus of the case study are of direct relevance to team leaders and other operational staff. The case study assignment consists of four distinct phases (see Section 3. for more details on the phases). In each phase, the preparation of the case study is a collaborative effort between the commissioning team and operational staff, as well as the case writer.

Each case study is defined collaboratively between the commissioning team and the Science of Delivery Team. In this initial phase, the commissioning team defines the “big questions” and implementation experiences that they seek to better understand. They define a development challenge for this case, and identify the major delivery challenges that practitioners needed to tackle in the course of the intervention (for more information on defining development and delivery challenges, see Annex XIII). Subsequently, a case writer is matched to this case.

The case writer is expected to research, prepare and author the case study. The case writer may be either a staff member of the organization preparing the case study, or may be an independent consultant hired specially for this purpose, depending on the needs of the organization. The important thing is not the writer’s job position, but that this person is familiar with case research and the Science of Delivery approach. Case writers undergo training and throughout the case, they receive ongoing guidance, feedback, and intellectual leadership from the operational and commissioning teams. For further information on the “profile” of the SoD case writer, please see Annex IX.

- **Focus**: A SoD Case Study focuses on systematically and meticulously tracing the process of implementation, identifying the root causes that underlie delivery challenges, and illustrating the critical moments, shocks, revelations, and actions which affected the trajectory of an intervention – both those under practitioner control and those beyond that control.

The key challenge facing case writers is to distil clear narratives from complex processes in which outcomes result from multiple, often endogenous, multi-stakeholder and multi-level causal pathways. The case study must also reflect the diverse and potentially divergent opinions, actions and rationales of different stakeholders, both partners and potential opponents, involved in the intervention (including a country’s public institutions, agency staff, consultants, clients, civil society, etc.); this will require both that the case writer understand the incentive and motivations of these individuals and groups, and that she incorporates their actions and perspectives into the narrative and context of the case.

- **Research methodology**: A SoD Case Study includes primary data collection (using through interviews and possibly focus groups) and supporting secondary sources, as well as a desk review of project documents, monitoring and evaluation reports, and review of the existing knowledge on the particular delivery challenge(s) in question. Interviews are guided by an interview protocol that is specifically tailored to tease out decision-making processes at the various critical junctures of the implementation process (see Annex IV – Interviews – for more detailed guidance on the interview process). The analysis must include an implementation timeline (in tabular format) relaying events, milestones and junctures in the delivery process, as identified by the participants themselves and by the case writer. Various other data analysis techniques may be relevant for identifying the
chronology of the intervention, such as root cause, systems, social network analysis and stakeholder and political economy analyses. See Annex I for more information on research methods. Annex XII summarizes the approach to be used for scaling up interventions (and for pilots with a scaling up focus).

- **Format:** A SoD Case Study uses a standardized structure to provide consistency across cases from different partner organizations and to facilitate comparability across cases in the Library of SoD Case Studies. The language used for the narrative should be jargon-free and accessible to non-sector specialists. An abbreviated version of the standardized structure for SoD Case Studies is reproduced below (please refer to Annex I for detailed guidance).

  - **Abstract (<200 words)**
    1) **Introduction to the case study (<2 pages)** – Introduction of the Development Challenge and Delivery Challenges that the case study investigates, including statement of the research questions that guide the inquiry (± 3 guiding questions) and whether or not the intervention is one that aims for limited impact or pursues impact at scale. It is important to mention the results of the project or intervention here as well, to create interest and draw the reader in.
    2) **Contextual conditions of the case study (<2 pages)** – very brief profile of the setting for the case highlighting the trends over time affecting delivery and a concise description of the state of current knowledge about implementation and delivery, particularly as it relates to the particular delivery challenge(s) in question (potentially referring to already existing Science of Delivery Case Studies, where possible, and other existing sources) – this is important to ensure that each case study builds on what is already known and is therefore not situated in a vacuum. If cases involve scaling up, this section will also assess in what knowledge base (e.g., evaluations of pilots or prototypes) the scaling up process is grounded.
    3) **Tracing the Implementation Process (<14 pages)** – this section should construct the main narrative of the case study, with the focus being the actions taken to address the delivery challenges that were encountered. It is crucial that this section also present the results, which should have been mentioned in the introduction, in greater detail – whether expected or unexpected, positive, negative, or mixed, of the intervention undertaken.
    4) **Conclusions: Lessons from the Case Study and How the Case Study Informs the Science of Delivery** – a discussion of the guiding research questions in terms of the lessons the case has generated for future delivery efforts. In addition, a brief reflection on whether and how the case study generates insights for the emerging Science of Delivery, for instance in terms of effective strategies for addressing delivery challenges and the more general applicability of the key findings, and identification of questions and avenues for future inquiry.

  - **Annexes to the Science of Delivery Case Study** – while the narrative account is the key output of the research process, supporting materials (annotated timeline, analysis of scaling up pathway, list of interviewees and data sources, bibliography, etc.) are important to enhance the readers’ understanding of the case study and for the purpose of methodological rigor.
It is important to state upfront what a SoD Case Study is NOT:

- It is **not an evaluation** of individual projects and programs; rather it explains variation in outcomes (i.e., the key factors underlying success and/or failure) by highlighting where, how, why and by whom course corrections were made and drawing out critical junctures in the implementation process.
- It is **not a historical account** of an entire country or region; rather the focus is on a single *development intervention* (a project, program, or policy).
- It is **not a showcase** of a project’s successes; rather the case provides insight into the processes and decisions that led to particular delivery outcomes (successful or otherwise).
- It should **avoid mundane delivery principles** void of context, such as for example “the importance of strong leadership”; rather, they should explain *how* strong leadership played out, and propose ways to adapt that knowledge to an environment different from the one in which it was developed.

3. **What is the process for carrying out a Science of Delivery Case Study assignment?**

The Science of Delivery Case Study assignment has four sequential phases. This four-phased structure is designed to enable the commissioning team to gauge, at regular intervals, that the case study is on track, and provide assistance and course correction if necessary. It also ensures consistency and quality in the case study production process across partner organizations. Each phase is associated with a specific objective, output and distribution of responsibilities between the parties to the SoD Case Study assignment – typically, commissioning team, operational team and case writer (see Table 1). Throughout the assignment it is critical that each party to the assignment takes ownership of the activities and outputs for which they are responsible. The four phases are as follows (a more detailed description of each phase is provided in the pages that follow):

- **Phase 1. Definition of case study scope and matching of case study writers** – the commissioning and operational teams solicit nominations for potential case studies, frame the scope of the case studies and ensure case writers are well-matched to SoD cases. At this stage, team leaders should also work to develop an initial assessment of whether or not the case under consideration involved scaling up, and may wish to conduct an initial scalability assessment.
- **Phase 2. Desk review and preparation of primary data collection** – the case writer completes the orientation and the desk review, and submits a preliminary annotated outline and research methodology to the commissioning and operational teams, who provide feedback in order to prepare the case writer for field work.
- **Phase 3. Field work and presentation of preliminary findings (first draft)** – the case writer is responsible for producing a first draft of the case study and to present it to the commissioning and operational teams, who provide feedback and comments.
- **Phase 4. Finalizing the case and editing** – the case writer is responsible for finalizing the case study based on feedback and comments received, while the commissioning team may arrange for professional editing prior to releasing the case on the online repository.
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Roles and responsibilities in the case study process

A variety of individuals with various roles and responsibilities are involved in the production of a delivery case study. These roles and responsibilities are detailed below:

Author:

- This is determined based on two types of cases:
  a) Original case study (“case study from scratch”) = Case writer
  b) Converted case study = The original author of the case converted; The case writer, who converted the case will be mentioned in the acknowledgements (exceptions: if the case study is completely re-written by the case writer).
- Agrees to be identified as author on the long and quick case

Case writer:

- Is the methodological expert, (i.e. is skilled in case writing, knows the case study methodology)
- Ensures that the case study is delivered against set deadlines and ensures methodological quality of the final product (according to ToR)
- Liaises with all relevant people during the case writing process (e.g., technical experts, regional experts, clients/partners, etc.)
- Is willing to conduct empirical research in the field and ensures that research standards are met
- Is part of the SoD case writer pool and has successfully participated in the case writer training

Acknowledgements:

- Should go to those, who actively supported the case writing process, including:
  a) additional SoD team members, who participated in review meetings
  b) particularly helpful interviewees or informants, if they agree to be named in the case
  c) any other person that supported the case writing (examples include but are not limited to project or intervention staff who facilitated meetings, outside experts who were consulted,

SoD contact person:

- Facilitates the process of case writing from selection to final publishing
- Is familiar with all process steps of case writing, which includes organizing events (clinics) as well as quality assurance and final clearance
- Supports in defining the development/delivery challenge
- Is knowledgeable on the case study methodology and provides guidance and quality assurance throughout the whole process of case writing
- Actively interacts with SoD-team members as well as the editing team if needed
- Supports in knowledge dissemination and use of the case study

Expert:

- Responsible for content/technical knowledge of the case study
- Ensures that all content of the case is correct
Guidelines for Delivery Case Studies

- Helps identify additional stakeholders, who should be involved in the case writing process
- Provides documents to the case writer that are relevant to the scope of the case
- Participates in clinics and other relevant meetings for the case writing process
- In most cases: Project leader (WBG: TTL) for the intervention under study. Can also be: an external expert who documented the case or helped evaluate it
- Uses the case and actively shares the case in his/her work context
- Agrees to be included in the expert database

Editor:

- Ensures that the final case study is proof-read, edited and delivered in the standard formats (quick case, long version)
- Is knowledgeable on the case study methodology
- Gets involved either during and/or at the end of a case writing process
## Guidelines for Delivery Case Studies

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<tr>
<th>Phases</th>
<th>Expected time</th>
<th>Objectives</th>
<th>Outputs</th>
<th>Distribution of responsibilities</th>
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<tbody>
<tr>
<td><strong>Phase 1. Definition of case study scope and matching of case study writers</strong></td>
<td></td>
<td>Expected time: 2 weeks, No case writer days</td>
<td>Frame scope of case study and ensure case writers are well-matched to SoD case</td>
<td>Commissioning team: Solicit nominations for potential SoD case studies</td>
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<td>Selected case study/ies and well-matched writers</td>
<td>Case writers: Work with operational team to frame scope of SoD Case Study and match case writers</td>
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<td>Operational team: Submit nominations for potential SoD case studies</td>
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<td><strong>Phase 2. Desk review and preparation of primary data collection</strong></td>
<td>Expected time: 4-5 weeks, 6-10 case writer days</td>
<td>Prepare case writer for fieldwork and to identify delivery challenges</td>
<td>Document outlining research methods and preliminary annotated outline</td>
<td>Commissioning team: Orientation, desk review and training</td>
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<td>Case writers: Prepare research methods and annotated outline materials for feedback.</td>
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<td>Operational team: Provide documents to the case writer</td>
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<td><strong>Phase 3. Field work and presentation of preliminary findings (first draft)</strong></td>
<td>Expected time: 4 to 6 weeks, 18-22 case writer days</td>
<td>Collect sound evidence to prepare a strong first draft of the case study</td>
<td>First rough case study draft using fieldwork data and supporting materials</td>
<td>Commissioning team: Schedule field visit and check-ins</td>
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<td>Case writers: Prepare back-to-office presentation / oral debrief</td>
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<td>Operational team: Facilitate contact with interviewees</td>
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<td><strong>Phase 4. Finalizing the case and editing</strong></td>
<td>Expected time: 5-8 weeks, 8-10 case writer days</td>
<td>Multiple revisions, Quotes clearance, Receive standardized high quality</td>
<td>Final case study document with supporting materials</td>
<td>Commissioning team: Finalize case study document based on feedback and justify revisions</td>
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<td>Case writers: Final feedback to case writer</td>
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<td>Operational team: Final feedback to case writer</td>
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*Table 1 – Objectives, Outputs and Distribution of responsibilities during the Science of Delivery Case Study Assignment*
Phase 1. Definition of case study scope and matching of case study writers

Output of Phase 1.

A selection of potential case studies for which the scope has been defined in line with the SoD Case Study characteristics and for which a suitable case study writer is available.

Responsibilities of case writers

None

Description

The aim of the first phase is to define the scope of the Science of Delivery Case Study – the intervention that will be studied and the questions that the case seeks to answer – and match the case studies with suitable case writers. The main responsibility for completing Phase 1 lies with the commissioning and the operational teams, who must work together to convert nominated development interventions into viable Science of Delivery Case Studies. The operational team should identify, and define in coordination with the commissioning team, a question or questions that they want to answer about a development intervention. Typically these will proceed from a certain result achieved in a development intervention – success, failure, or a mixture of the two – with the major question typically being something along the lines of “how did they do that (that is, succeed, or fail, or both)”? The case study should have as its unit of analysis a single development intervention (a project or program, or particular policy or instrument) or take a comparative approach that contrasts different individual interventions. The case study should make a novel contribution to our understanding of how development practitioners (a country’s public servants, agency staff, consultants, clients, civil society, etc.) design, plan, and implement the intervention and how they adapt when challenges threaten to hinder delivery or undermine sustainability. These are informed by the core development challenge and delivery challenge. Development challenges are the pressing issues that countries face, which, if addressed at scale, would significantly contribute to ending poverty and enhancing the quality of life of their citizens. Delivery challenges are the non-technical problems that hinder development interventions and that prevent countries and staff from translating technical solutions into results on the ground. It is helpful for commissioning and operational teams to jointly identify, at least tentatively, the development and delivery challenges at this stage (for more information on identifying development and delivery challenges, see Annex XIII). Cases may assume several forms:

- **Learning from success for scaling:** Something has worked well somewhere and we want to know why and understand the conditions that made it successful, in order to gauge the potential for scaling up in particular contexts (with the understanding that some successful and sustainable interventions may not scale – this itself is an important factor to understand)

- **Learning from failure:** We observe that projects do not achieve expected outcomes and want to better understand why, in order to adapt the planning and design of future interventions.

At this point, operational team leaders, in conjunction with members of the SoD team or other commissioning team, should work to develop an initial assessment of whether or not the case under consideration involved scaling up, and may wish to conduct an initial scalability assessment. Alternate, they may wish to use the case study to investigate the degree of scalability of the intervention at the heart of the case study. Whether cases are determined to be “scaling-up cases” or not, they may also differ according to whether implementing (a) free-standing interventions with no explicit consideration of a scaling up goal, (b) pilots with an explicit scaling up goal, (c) interventions that represent and intermediate or final step along the pathway, or (d) interventions that cover an entire scaling up pathway from start to finish. In any case, in most circumstances this determination will be made by the team leaders, not the case writer.
Commissioning and operational teams must ensure that a well-matched case writer is available to carry out the SoD Case Study (for instance, more sensitive operational contexts may require more experienced case writers). While case writers are not required to be technical experts in the subject of the case study, they need to be good communicators and experienced case study researchers. It is strongly recommended that the case writer has an advanced University degree in a relevant discipline and/or substantial work experience in international development and/or substantial experience in development research and policy analysis. Ability to travel is a must, as the assignment will involve primary (mostly qualitative) data collection in the field. It is the case writers’ responsibility to deliver within time and on budget a SoD Case Study based on the standards outlined in these guidelines. Case writers can be internal staff or external consultants, depending on the needs of the organization commissioning the case study, so long as they have completed the requisite training and orientation, and follow the guidelines provided.

**Phase 2. Desk review and preparation of primary data collection**

**Output of Phase 2.**

A document outlining the proposed data collection and analysis methodology (including an interview protocol – see Annex IV on interviews), a preliminary annotated outline including a sketch of the chronology and implementation process of the intervention and identified delivery challenge(s), and a brief review of the literature on the particular delivery challenge(s) or policy sphere under consideration.

**Responsibilities of case writers**

To participate and successfully complete orientation and training and submit preparatory materials for feedback.

**Description**

Once the case has been selected, and a case writer has been matched to a case, the case writer will participate in a case study orientation arranged by the WBG. Training includes guidance on the case study approach (in general and specifically in the context of the Science of Delivery); materials explaining the Science of Delivery and suggestions from the Science of Delivery team; and instruction/review with qualitative research experts on methodological issues such as interview techniques, how to conduct interviews in a development setting, and process tracing, root cause analysis, and other analytical techniques.

Following this orientation, the case writer will make preparations for the fieldwork. The case writer will be assigned to a member of the Science of Delivery team to supervise and assist the case writing process. This supervisor will introduce the case writer to the relevant members of the commissioning team, and preliminary discussions and interviews with members of this team will likely inform the case writer’s preparations. The case writer will receive a set of documents based on the scope of the case study defined in Phase 1. These include project appraisals, mid-term reviews, completion reports, and other relevant documents and evaluations. The documents serve as a guide for the case writer, but should not be overwhelming. Additional materials may be consulted by the case writer, including but not limited to policy notes, research papers internal lessons learned publications, and other external information.

Before going into the field, case writers will prepare a research design containing:

1. An annotated outline of the case study (using the standard structure provided in Annex I for discussion with the commissioning and operational teams).
2. A process/cause map of the intervention and its implementation process, which can help identify the major inflection/turning points in the intervention.
3. A brief review of the literature on the state of implementation knowledge relating to the particular delivery challenges or broader political economy problems that provide historical perspective.
4. A description of methods for data collection and analysis, a list of data sources, including prospective interviewees and tentative interview scripts, as well as a list of information that writers have not found, but would like to have.

5. An interview protocol (see Annex IV for additional guidance on interviews)

6. A list of possible interview contacts – this should include both confirmed contacts and a “wish-list” of additional contacts.

Feedback and recommendations to the case writers will be provided by the commissioning and operational teams, in particular on the interview protocol and other aspects of data collection in order to help the case writer prepare for the field visit. Interactions may take place in person or via video conferencing where in-person meetings are not feasible.

### Phase 3. Field work and presentation of preliminary findings (first draft)

**Output of Phase 3.**

1. Recorded interviews/interview notes and a list of interviewees with contact info
2. Documents, reports, monitoring data from the field
3. As needed, supporting materials for oral debrief (may include timeline, stakeholder mapping, process map)
4. First draft of case study, drawing on data from fieldwork and comments and feedback received in oral debrief.

**Responsibilities of case writers:**

Prepare field work and schedule check-ins, prepare a back-to-office presentation.

**Description**

The case writer prepares and completes a field visit of **up to two weeks** to carry out interviews with relevant stakeholders in the field (see Annex IV for additional guidance on interviews). During the period of field work, it is the responsibility of the case writer to schedule check-ins with their counterpart from the commissioning team. Within one week of returning from field work, the case writer should present a post-trip oral debrief to the commissioning and operational teams (and other relevant stakeholders). The debrief should focus in particular on the emerging storyline and indicative content of the case study, drawing on field notes and preliminary data compilations (e.g. tabular or graphic presentations), and a list of stakeholders interviewed, timelines and other analytical devices).

The debrief is critical for providing the commissioning and operational teams with an opportunity for feedback and recommendations, ensuring that the case study assignment is on track in terms of time and quality of analysis and makes an original delivery knowledge contribution.

Following this debrief, the case writer will submit to the SoD team a well-written first draft reflecting comments from the debrief.

### Phase 4. Finalizing the case and editing

**Output of Phase 4.**

1. Intermediate drafts of the case study following comments from the SoD team, commissioning team, and operational team, presented with supporting materials, and including short description (bullet points) of how comments and revisions were incorporated into the document.
2. Final draft, as approved by the Quality Assurance Board, polished and edited in conjunction with the SoD team and dedicated editor, and cleared by senior management.

**Responsibilities of case writers**

Finalize case study and incorporate comments from reviewers.

**Description**

Within 2 weeks of the post-trip debrief, the case writer will submit to the commissioning team SoD team a well-written first draft reflecting comments from the debrief. The SoD team (or a team member) will provide detailed feedback to the case writer.

In coordination with his/her supervisor, the case writer will incorporate feedback, revise, and submit a 2nd draft for further comment from the commissioning team (note that it may take multiple intermediate drafts to reach this point).

Upon incorporating feedback from the commissioning team, the final draft is submitted to the Quality Assurance Board (QAB). The QAB is composed of the operational team leader, WBG Science of Delivery team representative, representatives from relevant development partners, and/or representatives from leading academic institutions (additional peer-review input may be arranged by the QAB). The Quality Assurance board represents the final seal of approval for the case study.

To respond to feedback, the case writer may be required to collect supplementary field data via electronic means (e.g., teleconferences). After submission of the final case study report, the case study writer should be available for an additional 30 calendar days, to respond to brief follow-up queries by the QAB.

Once the QAB has approved the case study and the document has been edited, but before the case is uploaded to the Library of Delivery Case Studies, the case study must be cleared for publication by senior management. A senior management figure will facilitate the clearance meetings, which consist of vetting the case studies for consistency with the organization’s goals and mission, providing political clearance, and providing an additional layer of screening for errata.

The WBG is responsible for the editing of documents, ensuring that they adhere to a common format, and their dissemination as part of the Library of Case Studies. Editorial guidance from the SoD team will be provided throughout the course of preparing the case study, with a final copy-edit and formatting the final step before publication and dissemination. At all points in the process, the case writer will work closely with their assigned Science of Delivery supervisor (or supervisor from partner commissioning team).
Annex I. Full Standardized Structure for the Science of Delivery Case Study

Each case study requires two elements preceding the introduction:

Quick Case: the Quick Case is not prepared by the case writer. This is developed by publishing after the case writer has submitted the case study, and the case writer or partner contributor checks the document for consistency with the case. The Quick Case essentially functions as a 2-page executive summary.

Abstract: What the case is about, in 200 words, prepared by the case writer

1. Introduction to the case study (<2 pages)
   a. Construct a compelling lead to set the scene and introduce readers to the case, and introduce the major development challenge, centered on the needs/conditions of the affected group of people.
   b. Introduction of the delivery challenge(s) – that is, the central implementation problem faced by implementers – and how they defined this. In brief: What was the program? What was the core delivery challenge? What were the results?
   c. Optional: Statement of the research/delivery questions that guide the inquiry (± 3 guiding questions)

2. Contextual conditions of the case study (<2 pages)
   a. Very brief profile of the setting for the case
   b. Role of the Development Partner, if relevant

3. Tracing the Implementation Process (<14 pages)
   This section should construct the main narrative of the case study, with the main focus being the actions taken to address the delivery challenges. Throughout this section is important to braid together narrative and analysis.
   a. Lead with a brief preview paragraph or two – a nod to results, initial strategy at launch, and the problem(s) facing decision makers.
   b. This section should then describe the implementation process, chronologically, with a major focus on how implementers overcame unanticipated/negative intermediate results or dealt with external shocks (or failed to do so) in the course of the project. Break out major unexpected obstacles and how they were resolved (or not).
   c. Results, including evidence of outcomes, when available, by the end of the time period covered. Future prospects if relevant.

4. Lessons from the Case Study/Conclusions (<4 pages)
   The Case study should include one or more of the following, as appropriate
   a. If optional delivery questions used, restatement of, and answers to these, with a discussion of the insights the case study research has generated in answering them.
   b. Reflections or lessons of the case
   c. A brief assessment of whether or not – and, if yes, how – scaling up challenges and opportunities were identified and dealt as part of the intervention design and implementation process.
   d. How the case study informs the Science of Delivery - Brief reflection on whether and how
Guidelines for Delivery Case Studies

the case study generates insights for the emerging Science of Delivery, with specific reference to the SoD approaches.

d. Potential for scaling up, applicability to other settings

e. If there are additional questions to be addressed that might corroborate, clarify, or extend the lessons, or additional conclusions or reflections, they can go here.

Annexes and supporting documents for the Science of Delivery Case Study

Supporting materials are important to enhance readers’ understanding of the case study and to demonstrate methodological rigor. The following supporting materials should be included as Annexes to the main case study document when turned in (although not all of these may be published in the final version, all are important as supporting documentation):

a. A timeline of the project or program under investigation (including analytical concepts (see Annex II - Guidance for Writing and Presenting Findings – for more information)

b. An analysis of the scaling up pathway (see Annex XII).

c. A list of interviewees

d. A list of the major actors and implementers – a cast of characters or list of important figures.

e. Standard bibliography (see Annex III for guidance on references)

f. Annotated timeline (see Annex V for a sample annotated timeline and additional guidance on producing this)

G. Process map (see Annex VII for a sample process mapping and additional guidance on producing this)

h. Stakeholder map (see Annex V for a sample annotated timeline and additional guidance on producing this)

i. Additional information, such as key data and maps
Annex II. Guidance for Writing and Presenting Findings

Guidance for 1. Introduction
The introduction sets up the major delivery challenge(s) confronting the chosen development interventions. It briefly introduces the case – what the intervention was, what it did – together with the problems confronting the groups affected, and the challenges faced by implementers in delivering solutions to these problems. The initial introduction should explain to the reader why this case is interesting (what lessons it holds, what may have been unusual about the case), and frame the sections that proceed from this. A good place to start is with an engaging “hook”– the aim here is to draw readers in, presenting them with reasons to care about the case, and to want to read the study. The hook may focus on a compelling example of problems affecting end users, or it may focus directly on the dilemma facing implementers, or it may quickly point out both. For example, the following excerpt from a recent SoD Case Study sets up the particular policy problem, and comments on the effect that government concerns with the limited implementation capability have on citizens:

- “In 2003, a new government in Minas Gerais, Brazil’s second most populous state, pledged to improve government efficiency and serve citizens better. Minas Gerais’s residents had long bemoaned the difficulty of obtaining work permits, passports, drivers’ licenses, and other documents…”

The introduction should identify the core development challenge and the delivery challenge. Development challenges are the pressing issues that countries face, which, if resolved, would significantly contribute to ending poverty and enhancing the quality of life of their citizens. Delivery challenges are the non-technical problems that hinder development interventions and that prevent countries and staff from translating technical solutions into results on the ground. Neither the development challenge nor the delivery challenge is always immediately straightforward, but it is crucial that the commissioning team and casewriter take the time to define, refine, and articulate these core challenges, because attempts to overcome these challenges represent the core of the case study, and these challenges must be included in the case study (for more information on defining development and delivery challenges, please see Annex XIII). This section should also identify the intervention at the heart of the case, and briefly state the results of this intervention.

In cases where the objective of the intervention is to extend outcomes to a larger (national or even international) scale the case studies will consider key determinants of the scaling up implementation process (cases of type c and d). In cases of interventions with limited impact objectives (cases of type a and b), the case studies will ascertain whether scaling up beyond the intervention was part of the explicit objective and design; if so, how it was integrated into the implementation process; and if not, why not. (See also Annex XII)

Once the development challenge and the delivery challenge are identified, the case study can introduce the guiding questions for the case study. These questions should proceed logically from the delivery challenge and should be identified in joint consultation by the project managers and commissioning team. A later section of the case study will answer these questions, providing an important structure to the case study.
Guidelines for Delivery Case Studies

Guidance for 2. Contextual conditions

This integral section should avoid routine depictions of contextual conditions, such as the economic and demographic profiles typically used to characterize countries, instead focusing on the most relevant contextual conditions that affect the development interventions (e.g., specific political, budgetary, cultural, historic, or social conditions). This section should be as thorough as possible while also remaining brief. It is vital that readers be able to glean from this section the factors that influenced the trajectory of the project, program, or set of interventions that compose the case. At the same time, the amount of information provided should not be overwhelming. For example, while many historical factors may ultimately exert the strongest influence on the evolution of certain cases, it is impossible to provide all the details of previous interventions in a certain sector, let alone the entire historical narrative even of a single city or district, and so on. For scaling up interventions (cases of the type c and d), the background of prior pilots or relevant experience indicating whether an explicit scalability assessment has taken place.

Guidance for 3. Tracing the implementation process

This section should provide a chronological and descriptive narrative that describes the trajectory of the development intervention, initiatives implemented, actions taken, and how these played out on the ground. The narrative should be constructed, generally, in chronological sequence across the life of the project or program. This narrative traces the process of implementation, structured according to the flow of time and the programmatic sequence of the intervention under study, and the decision-making processes of relevant actors. In the course of this narrative, it should identify challenges and obstacles, as well as adaptations undertaken in the course of the program.

In cases where scaling up took place or for pilots with a scaling up objectives (cases of the type b, c and d), the section should provide an explanation how the scaling up pathway was defined, whether and how key “drivers” and “spaces” were identified, whether progress towards establishing an effective scaling up pathway was monitored and evaluated during implementation, and whether corrective actions were taken when appropriate and necessary. (Annex XII)

The section should be used to craft a strong analytical narrative that explains in greater detail how implementation processes contributed to the outcomes achieved (or not), and why key decisions were taken. The narrative and analytical components should be interwoven or braided together throughout the course of the case study in a way that affords the reader insight into the implementation process and decision-making by key stakeholders. Additionally, changes in context may be an important part of explaining why the intervention at the center of the case study unfolded as it did, and this may need to be part of the “braid.”

It is essential to focus on the relationships between particular country and sector contexts and different actors’ room for maneuver given contextual conditions – what people and organizations did (and what happened) under certain conditions to make interventions, projects and programs turn out the way they did. It is important to do justice to differing interpretations of events, if and where these occur, and to carefully weigh divergent explanations provided by interviewees. For the purpose of constructing a strong narrative, the following concepts may be mobilized at the researchers’ discretion in order to situate events as they unfolded:
Guidelines for Delivery Case Studies

- **Pain points** (situations representing adverse conditions, dissatisfaction, bottlenecks/roadblocks impeding implementation, change in policies, etc.);
- **Inflection points** (actions that implementation moved critically forward or was thwarted);
- **Adaptation/refinement** (how initial patterns of implementation changed in some helpful way, and how problems were overcome).

The major conceptual scaffolding of this analytical narrative centers on *inflection points* – the critical junctures and decisions in the life of an intervention that pointed toward positive or negative change. These should be noted in the text. Additionally, *pain points* – obstacles that arose in the course of implementation, should be noted in the course of the text, together with how they were addressed, and how this contributed to addressing the larger delivery challenges (or failed to do so).

*Adaptation/refinement* – how initial patterns of implementation changed in some helpful way – should also be noted.

Initially, examples of these should be inserted into the text using bracketed/parenthetical notation like so: *[inflection point]*. This will help the SoD team and casewriter work together to verify that these concepts are being deployed. In the final draft, these should be seamlessly written into the narrative, so that the brackets “disappear.” However, these should be incorporated then also into the annotated timeline (for an example, see Annex V).

This begins with the process of identifying the major delivery challenges – how did practitioners realize that they had a problem, and what strategies did they identify to deal with it? This should include an account of enabling conditions, such as data availability to support decision making, system support, training support, coaching. For interventions involving scaling up and for pilots with an explicit scaling up goal, potential enabling conditions include also the “drivers” and “barriers/spaces” listed in Annex XII.

This section should then describe the process of implementation. This includes how implementers overcame unanticipated/negative intermediate results or dealt with external shocks (or failed to do so) in the course of the project (pain points), and should identify major critical junctures and turning points (positive and negative) in the course of the intervention (inflection points). These pain points and inflection points form a major component of the narrative.

This section should close with a reflection on the results of the intervention. For cases involving scaling up, the results should also be assessed against the ultimate scale goal posited for the intervention. Was it considered to be successful, unsuccessful, or a mixed bag (as reflected by indicators, outside evaluations, practitioner/beneficiary interviews or surveys, and other measures)? This section on results should include evidence of development outcomes for clients/citizens when available, using qualitative and quantitative data collected, presented using tables and figures, and other types of indicators.
Guidelines for Delivery Case Studies

Guidance for 4. Conclusions and lessons from the case study
This section wraps up the case study. First, it provides a set of key “lessons learnt” on implementation. These should gather together the core insights from the preceding narrative section to explain how certain impacts were achieved (or not), and to draw possible lessons from these answers. What does the case study tell us about how a process was carried out; and, if it is possible to determine this, how generalizable are these lessons to other contexts.

The crucial inflection points should be noted here, with the focus here being on how these mattered for the implementation successes and/or failures of the intervention. Major obstacles (pain points) should be noted here where relevant, as should the adaptations that allowed practitioners to overcome these obstacles. For cases involving scaling up or a pilot with an ultimate scaling up objective, a brief assessment should be made of whether or not – and, if yes, how – scaling up challenges and opportunities were identified and dealt with as part of the intervention design and implementation process.

It may be possible to identify other important aspects of the case that do not fit neatly into the category of answers to the major delivery questions, but still hold important lessons for practitioners. Of particular interest would be if the case writer identified additional factors that seem to explain implementation successes or failures within the intervention.

After this, the case writer should present reflections on whether and how the case study generates insights for the emerging Science of Delivery, for instance in terms of effective strategies for addressing delivery challenges and the more general applicability of the key findings, and identification of questions and avenues for future inquiry. In this section, the case writer can reflect on how the findings of the study contribute to the broader theoretical direction of the Science of Delivery. Each of the five major approaches of the Science of Delivery should be mentioned. However, in some cases, the answer may be negative (e.g., practitioners did not adapt during implementation, which caused problems), or it may be null (e.g., practitioners did not seem to adapt during implementation, but this seemed to have little impact on the direction of the program). These should avoid trivial insights, with the goal being to illustrate how certain aspects of the SoD mattered in the course of the intervention, and why certain findings of the case study may contribute to learning more about the Science of Delivery. For more detail on the Science of Delivery and Science of Delivery approaches, please see Annex VI.

Additional possible ramifications, reflections, or future prospects of the intervention can also be included in this section, if relevant.
Annex III. Guidance for References

References for the GDI Case Studies follow Chicago style with in-text citations. In-text citations should appear in the text in parenthesis in author–date format (author, date).

Complete references should appear at the end of the document.

References should:

* be complete with year (or “n.d.” for no date)
* include source type (for example, report, newsletter, draft, or working paper) if not a journal or book
* include publisher name and location

Footnotes should include only additional information intended to clarify and expand on information in the text. Footnotes should not purely be a reference entry.

Formatting References

Complete source information is highly desirable, but the bare minimum that is needed is as follows:

- Books: author’s last name, date, and title
- Journals: author’s last name, date, article title, journal title, volume number or year
- Informal Publications: author’s last name, date, title, and description of publication (for example, speech or conference paper)

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<tr>
<th>Reference Type</th>
<th>Example</th>
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## Guidelines for Delivery Case Studies

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<tr>
<th>Category</th>
<th>Example</th>
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Annex IV. Interviews

Interviews should be guided by a strong interview protocol that will enable case writers to identify critical junctures in the implementation process and the rationale underlying various decisions taken. Interviews should involve a broad range of stakeholders involved and affected by the interventions, including (but not necessarily restricted to) the following:

- Development agency staff (World Bank and other) staff who were involved in the project
- Government officials from various units (as often multiple agencies and units are involved in implementation processes) and scales of government
- Non-governmental local partners involved in implementation
- Other commentators and observers (e.g., academics, journalists, citizens, etc.) who can offer a perspective on what worked or didn’t
- Across these groups, inputs should be sought from senior, mid-level and junior voices

It is important that case writers understand their position as consultants of development organizations. For instance, respondents may adjust their responses to match what they believe would perpetuate the development organization’s support of the intervention and resources, or match with the country leadership’s expectations. The skilled case writer needs to know how to listen for such biases and seek a broad range of sources to build a balanced inquiry. Case writers will need to balance possibly competing perspectives, while being sensitive to local context and the personalities involved. Interview questions should be proposed by the case writer to the commissioning and operational teams and finalized in Phase 2 as preparation for field research.

Interview questions should not be overwhelming in scope and volume, and should focus on key themes rather than inviting the interviewee to reflect on a large, complex topic at length, as this can produce too much overwhelming information, swamping the critical points. An important objective is to understand what actors and actions contributed to particular trajectories and decisions being taken, how decisions were taken and the processes of discussion and negotiation that may have accompanied these, and how local contexts and constraints affected the implementation of an intervention. Questions designed to identify these issues might include:

- What was the problem that you were trying to solve? How did you know that this was a problem that the local population was dealing with?
- What stakeholders participated in the problem definition? How do you think the composition of this the stakeholder group affect the project’s design process and implementation? Were particular actors opposed to the intervention?
- Did the design of the intervention involve the scaling up of a previously tested idea or approach (cases of type c and d), did it represent a pilot with an explicit ultimate scale goal (cases of type b), or did it involve a one-off intervention without a scale goal. For case of types b, c and d, supplementary interview questions can be found in Annex XII.
- Do you remember what stakeholders argued for and against this decision? What were their reasons for doing so?
- How did you diagnose or understand the socio-political environment and the local context?
• In your opinion, were there any systemic factors that persistently affected the problem?
• What were some of the barriers, if any, encountered? (e.g., lack of key support? Lack of technical assistance? Lack of evidence?)
• When did [this challenge] first emerge? When this challenge emerged, were you surprised?
• What risks were flagged at the design stage for this intervention, and what were the mitigation measures?
• How did you first realize that this challenge posed a problem for your project?
• What changes did you make to address this problem? How were the barrier(s) overcome?
• How long did it take to implement measures to adjust course and address this problem?
• Do you remember what key stakeholders argued for and against this adjustment? What were their reasons for doing so?
• Of the challenges that we have discussed, which do you see as having emerged from local context beyond your control?
• In retrospect, how do you think [this challenge or problem] might have been avoided?
• In retrospect, what could have made [this intervention] even more successful?
• What incentives influenced the behavior of stakeholders?
• Did some stakeholders change their position on the intervention (switching from championing it to opposing it, or vice versa)? Do you know why they did this?
• What do you think explains your success in tackling this challenge? (or: what do you think prevented this intervention from being as successful as you would have liked this to be?)

In addition, a number of useful of follow-up questions that may serve across questions:

• Can you give me some more detail about that?
• Can you tell me how you did that?
• Can you tell me what you did/was done next?
• What worked well/wrong? Please elaborate.
• What would you do differently next time? Why?
• Can you give me an example of that kind of action?
• Can you explain more about your/the reasons for arriving at that decision/conclusion?
• What were the impacts of that action or decision?
Annex V. Sample Timeline (condensed version)

*Note: This sample timeline is drawn from the case study “Argentina’s Plan Nacer / Programa Sumar: How to ensure quality health-care and coverage of uninsured populations,” by Ipsita Parida and Daniel Ortega Nieto.*

This table highlights key inflection points along the program path to quickly summarize main program highlights.

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Justification for inclusion/relevance</th>
<th>Remarks</th>
</tr>
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<tbody>
<tr>
<td>2001-2002</td>
<td>Economic Crisis</td>
<td>Increase in IMR to 16.8 (even 22) in provinces and increase in MMR showing worrying trend reversal</td>
<td>Inflection point</td>
</tr>
<tr>
<td>2003-2004</td>
<td>Conceptualization of Plan NACER</td>
<td>The idea is generated and consensus building and stakeholder collaboration activities start, before the actual launch of the program</td>
<td>The crisis triggers innovation</td>
</tr>
<tr>
<td>2003-2004</td>
<td>Selection of a results based financing model for program intervention</td>
<td>Cost-effectiveness and cost-benefit analysis done to devise the most financially sound method for program delivery</td>
<td>Feedback loop</td>
</tr>
<tr>
<td>2003-2005</td>
<td>Program design and building in course correction</td>
<td>Designing a twin contract that allows for rigidity and flexibility to allow homogeneity of quality of care and basic infrastructure (rigid contract) while also giving room for annual renegotiation of the performance targets based on capacity.</td>
<td>Adaptation</td>
</tr>
<tr>
<td>2003-2004</td>
<td>Selection of the tracers</td>
<td>Critical to program success in determining key health outcomes and selected based on previous experiments in smaller pilots in hospitals.</td>
<td>Feedback loop</td>
</tr>
<tr>
<td>2004</td>
<td>Stakeholder collaboration and accounting mechanism</td>
<td>Activation of COFESA which gave the National MOH the legitimacy to launch NACER and held provinces accountable through public documentation.</td>
<td>Facilitating tool</td>
</tr>
<tr>
<td>2004</td>
<td>Plan NACER is launched in 9 northern provinces (in the NOA and NEA). Initial pilot and test run.</td>
<td>Inflection point for the first roll out of the program. It is a maternal and child health benefit plan for mothers after 45 days of delivery and children until 6 years of age</td>
<td>Feedback loop</td>
</tr>
<tr>
<td>2004-2007</td>
<td>Information systems are created and operated to address data collection for results monitoring</td>
<td>Primary care units follow a standardized and homogenous method of documentation and diagnosis</td>
<td>Organizational change</td>
</tr>
<tr>
<td>Date</td>
<td>Event</td>
<td>Justification for inclusion/ relevance</td>
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<tr>
<td>2007</td>
<td>Program is launched in all the remaining 15 provinces</td>
<td>Due to high demand and political pressure the program is rolled out to the rest of the provinces and cross country implementation is put in place</td>
<td>Inflection point</td>
</tr>
<tr>
<td>2008</td>
<td>Corruption allegations and controversy leading to change of program staff and loss of program support</td>
<td>Critical inflection point to study how the team bounced back and how NACER was able to maintain its ground despite such political and institutional turmoil.</td>
<td>Inflection point/ Pain point</td>
</tr>
<tr>
<td>2008</td>
<td>Creation of the Government action accountability and procurement plan</td>
<td>Response to the corruption scandal and a measure to ensure more transparent procurement process.</td>
<td>Adaptation Organizational change</td>
</tr>
<tr>
<td>2010</td>
<td>Expansion of the benefits package to include Congenital Heart Disease and some high risk maternal delivery and neonatal intensive care conditions</td>
<td>Presidential challenge to bring Infant mortality down to a single digit, declared. Political support for expansion.</td>
<td>Inflection point</td>
</tr>
<tr>
<td>2012</td>
<td>Programma Sumar launched</td>
<td>Critical inflection point entailing the launch of the program, expanding the beneficiary group to include adolescents from 10-19 and all women until 64 years of age, with focus on 49 service lines and 400 benefits (including cancer care, congenital cardiopathies etc.)</td>
<td>Inflection point</td>
</tr>
<tr>
<td>2012- Ongoing</td>
<td>More provider level and outreach initiatives deployed to ensure better service delivery (like using taekwondo teachers for adolescent age groups)</td>
<td>Scaling up and expanding with the extensive menu of benefits provided under SUMAR, requires innovative incentives to involve the new stakeholders.</td>
<td>Adaptation</td>
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Annex VI. Five Science of Delivery Approaches: An Introduction

At the World Bank Group, we are driven by our commitment to eradicating poverty and boosting shared prosperity. This means putting people, and positive outcomes for people, at the center of our projects. But how can we bring better outcomes to those who need them most? This question lies at the heart of the Science of Delivery.

The Science of Delivery is the collective and cumulative knowledge base of delivery know-how that helps practitioners make more informed decisions and produce consistent results on the ground. It is emerging from the recognition that not only sound technical knowledge is critical for effective interventions that impact people’s lives – we also need to improve our ability to combine technical expertise with on-the-ground delivery know-how; and develop a more systematic, collaborative, and cumulative understanding not just of what to deliver, but also of how to deliver.

Five approaches are emerging as a central aspect of the Science of Delivery learning process. These are beginning to represent part of the delivery know-how that practitioners use on the ground to achieve results. The five approaches work together and reinforce each other. Also, they not new – we see them in practice across the development community, drawn from the success of practitioners in the field. What is new is their introduction into a systematic, cumulative body of knowledge about “the how.”

**Relentless focus on citizen outcomes at scale**
- a) Identify the nature of the problem based on a thorough understanding of citizens’ demands and the local context.
- b) Design a context-sensitive strategy to relentlessly focus on outcomes at scale, defined as measurable welfare gains of citizens in pursuit of the SDGs and the Bank’s twin goals of extreme poverty elimination and shared prosperity.
- c) Pay attention to other factors, beyond the project, that influence citizen outcomes.

**Multi-dimensional response**
- a) Facilitate multi-stakeholder coalitions and multisectoral perspectives to identify problems and solutions.
- b) Convene development partners and build on their comparative advantages.

**Evidence to achieve results**
- a) Use the best available evidence to identify the nature of problems and to develop solutions.
- b) Develop local evidence, through experimentation and other strategies, to refine solutions.
- c) Collect, throughout the project cycle, evidence of results to enable course correction.
- d) Contribute to the global body of knowledge with the evidence accumulated during implementation.

**Leadership for change**
- a) Identify the incentives that motivate individual behavior change and integrate them in solution design.
- b) Understand the political economy and drivers of change to determine how and when to best engage with the client.
- c) Ensure leadership support and facilitate coalition building among different stakeholders.

**Adaptive implementation**
- a) Develop an adaptive implementation strategy that allows for iterative experimentation, feedback loops, and course correction.
- b) Build a committed multidisciplinary team with the right skills, experience, and muscle memory.
- c) Maintain the capacity for reflection and a diagnostic mindset. Take action, step back, and assess the results of the action.
Annex VII. Process Mapping

Delivery case studies prize attention to processes, sequence, and causal chains that lie often at the heart of the case study narrative. With this in mind, casewriters are strongly encouraged to produce process maps to help them, as well as readers, to visualize the course of events. The appearance of these process maps can vary widely. An example is included below, from the delivery case study “Argentina’s Plan Nacer / Programa Sumar: How to ensure quality health-care and coverage of uninsured populations,” by Ipsita Parida and Daniel Ortega Nieto.
Annex VIII. Stakeholder Analysis and Stakeholder Mapping

Because delivery case studies focus on the details of implementation and how interventions are designed and put into action by practitioners, they often deal with the actions of a number of different actors or stakeholders, ranging from donor representatives, to NGOs, to civil servants and political leaders in-country. To ensure that these relational dynamics are being thoroughly understood, accounted for, and incorporated into the case study, case writers are strongly encouraged to conduct a stakeholder analysis, and to submit a stakeholder map with their initial drafts.

GTZ (2007) suggests that stakeholder analysis should identify key stakeholders, that is:

“those stakeholders who are significantly able to influence decision-making by virtue of their position, capabilities, knowledge, connections and scope of influence. This influence may exist in relation both, to achieving the objective and to the process of collaboration that can lead to it. Key stakeholders, for example, have considerable influence on the participation of other role players…

“Key stakeholders have also powerful connections, meaning they have numerous relationships with other role players both institution-bound and personal. Finally, key stakeholders without whose explicit consent the reform process cannot be initiated are veto players. They can build the momentum and the space to the intervention to develop, but they can also block it.”

Key stakeholders then are, simply put, the actors who influence the course of an intervention. Determining the ways in which they interact with one another and shape the course of an intervention can often be tricky. Particularly in fraught political contexts, determining these relationships should be approached with caution. Regardless, an understanding of these relationships, and the actions of key actors, is vital to understanding the course of an intervention for the purpose of the delivery case study. The technique of producing a stakeholder map can facilitate understanding of the position and relationships of key stakeholders and their impact on an intervention.

According to GTZ 2007, a stakeholder map should

“[identify] the relevant actors and their relationships to one another and [represent] these in diagrammatic form. In addition to depicting the key stakeholders, the representation includes those actors who are connected with them or who have an influence on them (primary and secondary stakeholders).

“The representation provides an overview of the field of stakeholders and enables the analyst to formulate some initial observations and hypotheses about the various kinds of influence the stakeholders have… as well as about the relationships and mutual dependencies. The map enables to draw conclusions regarding alliances, problematic relationships among stakeholders and their power relations… [and] to formulate hypotheses about especially powerful stakeholders without whose participation and active support the envisaged impacts of the intervention cannot be achieved (the “veto players”).”

There are a variety of possible visualizations of a stakeholder landscape, and casewriters should feel free to produce renderings that they feel comfortable producing and that makes sense to them – the
objective of the exercise is to better understand the stakeholder landscape and relationships that affect the intervention at the center of the case study. The figures below depict various examples of stakeholder maps.

**Figure 1: Two kinds of stakeholder mapping/visualization**

Guidelines for Delivery Case Studies

Figure 2: Another example of a stakeholder mapping, drawn from delivery case study “Scaling up Last Mile Service Delivery in Kenya: The Water Kiosk as Entry Point for Increasing Access to Water and Sanitation for the Urban Poor” (GIZ, forthcoming 2015).

References


Annex IX. Case Writer Profile

This annex draws from a paper prepared by Jennifer Widner and ISS for the World Bank

A polished case study reads so smoothly that few would guess how much talent it demanded. Rarely is it possible to find people who have minds “hard wired” for political economy concepts, an innate appreciation of the SoD audiences and their needs, research savvy, interview poise, and strong writing skill—all in one package. What aptitudes do the editors of policy-focused field-interview based case studies say they seek, and how do they test for these qualities?

On behalf of the World Bank, Princeton’s ISS program interviewed newspaper and newsmagazine editors and the directors of several related research programs to discover what wisdom they had developed. It also drew on its own experience to identify qualities that make some people better at this kind of work than others. ISS then developed a series of questions and exercises to help program directors assess talent more easily.

Lesson 1: Match the skill set to the organization.

Even smart people rarely have the full package of skills and there is an imperfect match between academic achievement and case writing talent. In fact, one of the hardest skills to find is the ability to place events in chronological order and spin a narrative.

Lesson 2: Empathy with target audiences is important.

Successful Science of Delivery casewriters should be able to empathize with and respect people who do the hard work of delivery, and those whose well-being depends on the outcomes of delivery efforts. Candidate casewriters will be asked questions that elucidate how people talk about public servants and the challenges they face. Do they understand the question? Do they demonstrate respect?

Lesson 3: The core analytical skill is facility with social science explanation.

To prepare a case study, a researcher need not be a Ph.D. social scientist or a specialist in the field the case study touches. A bare bones notion of “analytical capacity” means ability to

- parse the structure of a causal explanation and comprehend differences among explanations that focus on supporting conditions, political will/incentives, policy/vision, and strategy/implementation
- understand the level of specificity required to define a concept clearly
- operationalize a concept
- frame hypotheses
- identify a counterfactual or an apt comparison
- spot deviations from anticipated or predicted responses or outcomes.

If a candidate also has some exposure to “implementation” and “delivery,” then the amount of orientation time required diminishes. However, it is possible to teach some of these elements. Therefore, it is sometimes worth trading specific knowledge for strong interviewing or writing talent.
Lesson 4: Prize the candidates who like detective work.

Reporters often have a better nose for this aspect of the work than others do. Of course, the actual ability to follow a trail is partly a function of the organization’s access to on-line databases and journals, but someone who can’t conceptualize what s/he needs to know and how to use keywords effectively is not going to be able to use those resources well. In the interview, give candidates a problem to pursue on a set of databases and compare results. Or give someone a hypothetical situation and ask who the candidate think s/he would want to contact, why, and how s/he would go about locating the person.

Lesson 5: Recruit for interview poise.

Science of Delivery cases are based on field interviews. Someone who is not comfortable with interviewing people or dislikes the living conditions in the countries in which most partners work will fail in the job.

Respect is important. Asking questions about a candidate’s work in a low income country and how the person handled a challenge on the ground can signal a lot about respect and tone.

Lesson 6: “Conscious writing” is a crucially important skill.

The best reporters are not necessarily the best writers. However, all Science of Delivery researchers need what we call the capacity for “conscious writing”—that is, sufficient facility with language and parts of speech that they can locate most text in the right parts of the template, understand when a transition sentence or signpost is essential, move text to improve communication, and understand an editor’s instructions. A person who lacks this capacity will consume hundreds of hours of other staff time over the course of a year.

Lesson 7: Narrative sense is valuable.

To communicate effectively, a Science of Delivery case study must anticipate what the reader wants to know as well as capture the tension and drama present in real-world decision-making. A desk study about conditions supporting reform does not necessarily have to meet this same standard.

Lesson 8: Flexibility and capacity for teamwork are key attributes.

Serious researchers and writers understand that the end product is a team effort. The person who doesn’t follow protocols, can’t respond effectively to editorial suggestions, and does not learn and become better over time becomes a problem for the effort.
These various soft skills are important for selecting case-writers. In addition, casewriter and expert profiles will be developed using the following form:

1. Specialization
2. Degree(s)
3. Department name
4. Telephone number
5. Email address
6. Personal web page (including LinkedIn etc.)
7. Biography title
8. Biography text
9. Externally hosted work
Annex X. Peer Reviewer Form for Delivery Case Studies

Delivery Case Studies investigate underexplored complex delivery problems and processes. They capture implementation knowledge from operations – the staff who are involved in designing and implementing development interventions – and give practitioners access to insights about how others have confronted issues of delivery. A Delivery Case Study is not just another “story” but an important method of applied and empirical research. Most of all, Delivery Case Studies outline how interventions were implemented, with a focus on the processes, decision making, and the implementation trajectories of projects.

This form is designed to support peer reviewers of Delivery Case Studies. Visit [link to global library], the home of the Global Delivery Case Study Library. Here you can access Delivery Case Studies from across the globe and find the guidelines for case writers producing Delivery Case Studies.

The peer review form

To provide a review of a Delivery Case Study please respond to all fields on the next page. When filling in the review form, please keep in mind the following:

- Your role is to verify that the Delivery Case Study you are reviewing meets the quality assurance requirements for publication in the Global Delivery Case Study Library.
- Please make sure you understand the review criteria in this form and that you have sufficient time available to make an informed judgment.
- In cases where case writers put forward arguments about the course of an intervention, feel free to comment on specific instances where you feel claims may not be adequately evidenced, or where case writers should be clear that claims are based on their own opinion.
- This may be the first time a case writer has written a case study. Peer review should support the author to improve the case study, not undermine their enthusiasm. Please, therefore, keep comments constructive, focused on particular points, and objective.
- Submitting Your Review: To submit please send this form along with any attachments to [designated contact].

If you wish to insert your comments into the actual article document and send this through as an attachment, please ensure that you change the identity tag such that any tracked changes or comments come from an anonymous reviewer.
Guidelines for Delivery Case Studies

Name of the Delivery Case Study (ID#):

Please use this form to comment on the quality of the case you are reviewing using a ranking of 1-5 (with 5 being the highest and 1 being the lowest) and comment/recommend. Please indicate if you do not want to pass certain comments on to the case writer. Unless specifically requested otherwise by the reviewer, the editor reserves the right to communicate comments selectively to the case writer.

<table>
<thead>
<tr>
<th>Overall recommendation (delete all that do not apply):</th>
<th>Accept (no revisions)</th>
<th>Accept (minor revisions)</th>
<th>Accept (major revisions)</th>
<th>Reconsider (major revisions)</th>
<th>Reject (no revisions)</th>
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<tbody>
<tr>
<td>Overarching</td>
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<tr>
<td>Does the Delivery Case Study involve primary data collection?</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Is a standard bibliography provided (as Annex)?</td>
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<td>Sections</td>
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<tr>
<td>Executive summary (&lt;2 pages)</td>
<td>5</td>
<td>4</td>
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<td>Brief and informative</td>
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<td>1. Introduction to the case study (&lt;3 pages)</td>
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<tr>
<td>Sets the scene centered on the needs/conditions of the affected group of people</td>
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<td>Introduces an observed outcome (subsequently investigates in Section 3.)</td>
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<td>Situates the case within the context of a major problem (development challenge)</td>
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<td>Clearly articulates the specific problem (delivery challenge) faced by implementers</td>
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<td>Contains a statement of (± 3) guiding questions (delivery questions)</td>
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<td>Deals effectively with the scaling up dimension of the intervention</td>
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<td>2. Contextual conditions of the case study (&lt;2 pages)</td>
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<td>Brief profile of contextual conditions relevant for the interventions described in Section 1.</td>
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<td>3. Tracing the Implementation Process (&lt;14 pages)</td>
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<td>Clear, jargon free, and accessible to non-sector specialists</td>
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<td>Reflects diverse stakeholders’ perspectives (e.g. government, agency staff, consultants, clients, civil society, etc.)</td>
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<td>Identifies chronology of intervention and draws out critical junctures (e.g. using the notion of inflection points, pain points, adaptation/refinement, etc.)</td>
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<td>Analyses the scaling up pathway appropriately (for interventions with a scaling up dimension)</td>
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<tr>
<td>Contains table and/or using a causal map of implementation milestones and junctures</td>
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<tr>
<td>4. Lessons from the Case Study (&lt;3 pages)</td>
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<tr>
<td>Guiding questions (delivery questions) from the introduction are discussed and answered</td>
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<td>5. How the Case Study Informs the Science of Delivery (&lt;2 pages)</td>
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Guidelines for Delivery Case Studies

| Thoughtful and novel contribution to delivery knowledge (e.g. furthers understanding of a particular delivery challenge, describes effective strategies, draws out applicability of the key findings, and identification of questions and avenues for future inquiry. |   |   |   |
Annex XI. Why Case Studies?

This section is particularly indebted to a number of the individuals thanked in the acknowledgments to this document. Their reading suggestions and deep discussions shaped our understanding of case study methodology. In addition, this section draws on papers and reviews of the relevant literature prepared by Cynthia Ingols, Victoria Beard, and Jennifer Widner in 2013 for the World Bank. While it does not appear in this draft, a more comprehensive bibliography is being prepared to more fully reflect this intellectual genealogy and reflect the full breadth of perspectives on the use of case studies.

Why case studies?

Why do we believe that case studies can make a valuable contribution to building a Science of Delivery? The increased turn toward randomization and experimentation in the social sciences in general, and the development field in particular, raises the question of how case studies fit into the development landscape in general, and the Science of Delivery in particular. To put it a bit provocatively, when randomized control trials and experimental designs are touted as representing the “gold standard” of rigor in assessing development effectiveness, what can case studies possibly be good for?

The answer to this question is that strong quantitative research designs on the one hand, and case studies on the other, are good for different things because they try to do different things. RCTs and QEDs operate by isolating singular variables and testing their effects; case studies, on the other hand, offer the opportunity to trace, in detail, actions undertaken by different actors, and why certain things happened as they did. Case studies are particularly well-suited to contexts where other methods fall short. They also offer the possibility of complementing other methodological approaches.

While RCTs and experiments can yield rigorous (if sometimes somewhat circumscribed; see Woolcock 2013) evidence of what works in certain conditions, they cannot by themselves trace implementation processes or provide detailed understanding of how delivery failed or succeeded.

Case studies, on the other hand, are particularly well-suited to understanding complex problems, in which the drivers of certain outcomes are often highly endogenous, interactive, and inter-correlated, exhibiting what Woolcock (2013) refers to as “high causal density” – cases in which causal pathways are multiple and interactive, and therefore may be imperfectly understood. Many of these complex problems are exactly the problems in which World Bank clients are increasingly interested in solving (see, for example, Kim 2014).

Case studies also, according to some scholars, offer a novel contribution by way of external validity – exactly what we need if we are to figure out how can we figure out what successful innovations can travel to different places, deliver results in different contexts, and which cannot. Woolcock argues that the most important lessons of case studies lie in what they uncover about implementation processes – particularly “the ideas, principles and inspiration from which a solution was crafted and enacted” (Woolcock 2013). Patient tracing of these processes may allow us to generalize certain lessons about
Guidelines for Delivery Case Studies

implementation – “the how” – of development solutions. This is particularly so in the aggregate – that is, as case studies increase in number, they increasingly contribute to a body of delivery knowledge – and also increasingly offer grist for the mill of comparative analysis.

How do case studies do what they do?

Case studies may be used for a variety of purposes. The famous Harvard Business School case studies both examine the processes by which successes were achieved, and the conditions under which certain types of decisions were made, and are often tailored toward instruction – they are “teaching” cases. Indeed, many cases are geared toward preparing students (and scholars and practitioners) to undertake discussion in seminars as part of a course.

In medical research, case studies document clinical practices – much as the Science of Delivery case studies seek to document development implementation practices – which serves to lay the groundwork for rigorous clinical trials, bring to light important questions about the efficacy of practice, and serve as teaching tools for practitioners who may be confronted with the kinds of dilemmas exposed in the case studies.

In the social sciences, a variety of types of case study may be used with an eye toward building theories. A prominent method in constructing this type of case study is “process tracing” – examining a causal chain to explain certain outcomes or events, and embedding that analysis in a narrative (for the preeminent explanation of process tracing, see George and Bennett 2005). The degree of theorization in these types of case study may vary, from very basic historical accounts and narratives, to highly elaborated exercises in testing specific variables and alternate explanations (George and Bennett 2005).

The Science of Delivery case studies marry these approaches. Like many HBS studies, and particularly like to some process-tracing case studies (especially those concerned with policy decisions), the Science of Delivery case studies are concerned with decision making process, and with the causal chains that led to certain outcomes. Like medical case studies, the SoD case studies document practice and may lay the groundwork for prospective research. Also like many medical case studies, and like the HBS cases, the SoD case studies may be geared toward teaching about the cases.

One thing in particular, however, differentiates the SoD case studies from other leading examples of the case study method: their high degree of focus on the documentation of implementation knowledge, the systematization of this knowledge, and harnessing it to support Bank operations. Central to the case studies is the idea that practitioners’ implementation knowledge (sometimes including tacit knowledge) is very important and highly relevant across sectors or jurisdictions, and that this knowledge needs to be better captured to support the Bank’s development efforts. The SoD case studies will take on this task.

Moreover, this knowledge becomes more useful to practitioners in the aggregate. As the library of case studies expands, it increases the body of knowledge about delivery problems (and solutions), which is crucial to the development of the systematic and coherent system of thinking that lies at the heart of the Science of Delivery. This allows us to derive, where appropriate, more general principles about delivery, which can help practitioners anticipate problems in the design stage. While the inherent diversity of unique problems and projects means that this body of knowledge will never substitute for the crucial SoD approaches of outcome-focused problem-driven design, and of adaptability and iteration in implementation, it may enhance practitioners’ knowledge of what to expect in certain kinds of interventions, sectors, and contexts.
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The SoD case studies, finally, can be used to teach certain types of insight into solving complex delivery problems. Cases should particularly strive to illuminate the nature of delivery problems and bottlenecks that confronted a particular intervention; how practitioners dealt with these problems – that is, how decisions were arrived upon, and how practitioners put these decisions into action. They should identify the critical moments, revelations, and actions which affected the trajectory of an intervention, both those under the control of practitioners and those beyond that control.

To accomplish this, multiple methodological approaches may be used. Techniques that can be used to trace implementation process often investigate causality of different actions and events, and their effect on the trajectory of processes. As discussed above, process tracing (the study of a causal chain to explain certain outcomes or events by understanding causal factors) is well-suited to case studies, and often appears in different guises in different case studies. Root cause analysis goes one step beyond process-tracing approaches in that it is concerned with identifying the root causes of failures. Another way of thinking about these approaches lies in their similarities to detective stories – uncovering root causes, reconstructing chains of events (Collier 2011).

References and partial bibliography:


Woolcock, M. 2013. Using case studies to explore the external validity of 'complex' development interventions. UNU World Institute for Development Economics Research (UNU-WIDER), Helsinki, Finland.
Annex XII. Assessing the Scaling Up Dimension

The central objective of the Science of Delivery Case Studies is to gather and assess experience with the process of implementation of interventions designed to address a specific development challenge or problem. Ideally, such an intervention should support a well-specified pathway (or theory of change) towards a target impact whose scale is such as to resolve fully (or at least substantial) the particular development problem. Some interventions may have a scale target that is achieved with the successful completion of the intervention. For others, the intervention is a first step (e.g., a pilot or project 1 in the graph), or it is an intermediate or final step along the scaling up pathway (e.g., project 2 or 3 in the graph). In practice, cases may also involve one-off interventions that do not specify any scaling up target or pathway.

There are therefore four types of interventions which will be covered by case studies: (a) free-standing interventions with no explicit consideration of a scaling up goal, (b) pilots with an explicit scaling up goal, (c) interventions that represent and intermediate or final step along the pathway, or (d) interventions that cover an entire scaling up pathway from start to finish. Case studies will focus on interventions that involve consideration of scaling up (b-d).

Cases that focus on scaling up will need to explore a number of important aspects relevant to the effective implementation of a scaling up approach. The following sequence of questions will guide the interviews and the assessment of the scaling up pathway:

The vision or target of scale:
1. Given the statement of the problem to be addressed, what is the appropriate ultimate scale target? I.e., how many people, households, districts, etc. could and should ultimately be reached, not merely by this particular intervention, but also by follow-on interventions which would build on the experience with this particular intervention.

The idea/innovation/model:
2. What is the intervention that is to be scaled up, i.e., is it a new idea (innovation) or an idea adopted and adapted from prior practice elsewhere.
3. Has it been tested or evaluated for impact.
4. Has it been assessed for scalability?

The pathway to scale:

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3 Adapted from Hartmann and Linn (2008), Linn (2011), and Cooley and Linn (2014)
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5. Did the intervention define a pathway to scale from idea to target, including the key enabling conditions (drivers and barriers/spaces) and an appropriate monitoring and evaluation process?

The enabling conditions:

6. What or who are the drivers that were expected to push the scaling up process ahead? Including local leaders or champions, external catalysts and incentives, market or community demand? (see Box 1) How did the intervention develop or support the relevant drivers?

7. What barriers had to be removed or spaces created to allow the intervention to achieve the desired intermediate or final scale? (see Box 2) How did the intervention aim to do this?

8. Was there an intermediating institution that facilitated the scaling up implementation process and, if yes, how effectively did it carry out this function? If not, would an intermediating institution have been useful?

The monitoring and evaluation process:

9. Is there a monitoring and evaluation process in place which allows the tracking of impact and of the enabling conditions (drivers and barriers/spaces).

Box 1: Scaling up drivers

A few key factors drive forward the process of scaling up:

Ideas, vision, leadership: There is a need to recognize that scaling up is necessary, desirable, feasible. Successful scaling up is usually driven by champions.

External Catalysts: Political or economic crisis, pressure from outside actors (donors, EU, etc.).

Incentives and accountability: These include rewards for actors and institutions, competitions, accountability through the political process, peer and other evaluations, etc. Incentives are key to drive behavior of actors and institutions towards scaling-up; requires accountability.

Market or community demand: The scaling up process may be driven forward by market demand for commercial goods or services and by community or political demand for social services.

Box 2: Scaling up barriers or spaces

If scaling up is to succeed, barriers have to be removed or, in other words, space has to be created for the initiative to grow. The most important spaces are:

Fiscal/financial space: Fiscal and financial resources need to be mobilized to support the scaled up intervention; and/or the costs of the intervention need to be adapted to fit into the available fiscal/financial space.

Policy space: The policy (and legal) framework has to allow or needs to be adapted to support scaling up.

Institutional/organizational/staff capacity space: The institutional and organizational capacity has to be created to carry the scaling-up process forward.

Political and ownership space: Important stakeholders, both those in support and those against, the intervention need to be attended to through outreach and suitable safeguards to ensure the political support and ownership for a scaled up intervention.

Cultural space: Possible cultural obstacles or support mechanisms need to be identified and the intervention suitably adapted to permit scaling up in a culturally diverse environment.

Natural resource/environmental space: The impact of the intervention on natural resources and the environment must be considered, harmful effects mitigated or beneficial impacts promoted.
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**Partnership and ownership space:** Partners need to be mobilized to join in the effort of scaling up.

**Learning space:** Knowledge about what works and doesn't work in scaling up needs to be harnessed through monitoring and evaluation, knowledge sharing and training.

**References:**


Annex XIII. Identifying Development and Delivery Challenges

Properly defining a problem is an integral part of understanding it. When problems are properly defined we can identify key variables that impact the success or failure of development interventions. Therefore, we need to distinguish between development challenges and delivery challenges, since articulating the issues that practitioners are trying to solve, as well as those that can hinder progress along the way, provides analytical clarity and practical value.

Identifying development and delivery challenges can be thought of as a sequence that involves clarifying problems, the objectives of an intervention, as well as the details of the intervention. An intervention aims to solve a specific problem (development challenge) through the achievement of certain objectives. Attempting to solve a development challenge will, most likely, involve unexpected problems throughout implementation since most interventions unleash change processes in complex contexts. Identifying these problems (delivery challenges) is thus key for better understanding how to attain results. It is important to remember that while different organizations are trying to solve the same development challenge, the delivery challenges will be specific to an intervention and can potentially be related to the organizations involved.

General Example: In the early 90’s maternal mortality increased dramatically in Argentina. The Central Government decided to implement a results-based financing program targeting pregnant women across the country to increase the number of women receiving prenatal care. The intervention was implemented in a decentralized environment where relations between the Central and Provincial governments had deteriorated, and where responsibilities were sometimes unclear.

The following questions can be useful in identifying development and delivery challenges, as well as distinguishing them from other important issues:

**Development Challenge:**
*What is the problem we’re trying to solve?* Maternal mortality

**Intervention:**
*What is the project/program that aims to solve the Development Challenge?* Results-based financing program

**Objective of Intervention:**
*What is the intervention trying to achieve?* Increase the number of pregnant women receiving prenatal care and improve the quality of basic health care services across the country

**Delivery Challenge:**
*Why didn’t the intervention work, or to achieve its full potential?* Lack of coordination between the central and local governments
**Development Challenges**

**Development Challenges** describe in concise and simple terms the pressing issues that countries face which, if resolved, would significantly contribute to ending poverty and enhancing the quality of life of their citizens. The challenges are captured in a way that distills “what” is the fundamental problem that impedes people from improving their overall well-being. The following characteristics and examples serve as guide to identify and describe development challenges.

**Characteristic 1: A development challenge should contain one problem statement only.** It is a single challenge - not several challenges packaged into one.

**Examples:**

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Mortality</td>
<td>Maternal Mortality and Improve Hospital Management in Argentina</td>
<td>The bad example has both a development challenge (Reduce maternal mortality) and a delivery challenge (improving hospital management). This makes the core development problem unclear because it is comingled with the delivery challenge. It also refers to a specific setting.</td>
</tr>
<tr>
<td>Crime and violence</td>
<td>Crime and Violence and Reform the Legal System</td>
<td>The bad example contains both the development challenge (crime and violence) and includes a specific intervention (legal reform).</td>
</tr>
</tbody>
</table>

**Characteristic 2: A development challenge is global in nature and should travel beyond borders.** While a case study aims to capture implementation in local contexts, *phrasing* of development challenges should be broad and not limited to local contexts.

**Examples:**

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Mortality</td>
<td>Maternal Mortality in Buenos Aires</td>
<td>The bad example would be the focus of one particular case study</td>
</tr>
<tr>
<td>Crime and violence</td>
<td>Crime and Violence in middle income countries</td>
<td>The bad example would be a good example of a theme for multiple cases because many cases may focus on middle income countries</td>
</tr>
</tbody>
</table>
**Characteristic 3: A development challenge is not an intervention, project or program.**
There are multiple ways to try to address a development challenge and these should not be confused with one another. The obstacles that an intervention faces during implementation are not development challenges.

**Examples:**

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Mortality</td>
<td>Results based financing to reduce Maternal Mortality in Buenos Aires</td>
<td>Bad example of a development challenge but a good example of an intervention for a case</td>
</tr>
<tr>
<td>Crime and violence</td>
<td>Reforming local police to reduce crime</td>
<td>This is a general theme, and confuses the development challenge (crime and violence) and the intervention (police reform)</td>
</tr>
</tbody>
</table>

**Characteristic 4: A development challenge is, ideally, linked to the Sustainable Development Goals (SDG).**

**Examples:**

<table>
<thead>
<tr>
<th>Good Example</th>
<th>SDG</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Mortality</td>
<td>Goal 3</td>
<td>3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births</td>
</tr>
<tr>
<td></td>
<td>Ensure healthy lives and promote well-being for all at all ages</td>
<td></td>
</tr>
<tr>
<td>Crime and Violence</td>
<td>Goal 16</td>
<td>16.a Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime.</td>
</tr>
<tr>
<td></td>
<td>Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels</td>
<td></td>
</tr>
</tbody>
</table>

**Delivery Challenges**

**Delivery Challenges** are the non-technical problems that hinder development interventions and that prevent practitioners from translating technical solutions into results on the ground. They are intimately related to both development challenges and “how” interventions are implemented, but they can also emerge from within the organization that is leading the intervention. Delivery challenges should be the answer to the following questions: Why intervention X, aimed at solving the development challenge Y, did not work or did not achieve its full potential? What were the main obstacles that intervention X faced during its implementation?

**Characteristic 1: A delivery challenge is a non-technical problem.** Delivery challenges come into play when practitioners attempt to deploy technical solutions, and encounter issues – whether this comes from people (political or behavioral issues) or local contexts (logistics, capacity, etc.). A delivery challenge is generally an issue that occurs during implementation. As you try to achieve your
outcomes, a problem that is not entirely related to a sectoral area of expertise comes up that you need to address. This is considered a delivery challenge.

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of coordination between the central government and local government</td>
<td>Changing the diameter of water pipes</td>
<td>This is a bad example because it is focused on a technical issue.</td>
</tr>
<tr>
<td>Lack of trust in police</td>
<td>Provide better equipment to police</td>
<td>This is a bad example because it refers to an intervention and not the problem that practitioners faced while trying to implement such intervention.</td>
</tr>
<tr>
<td>Providing services in illegal settlements</td>
<td>What construction materials should be used for housing</td>
<td>This is focused on the what, not the how.</td>
</tr>
</tbody>
</table>

**Characteristic 2: A delivery challenge should be as granular as possible.** Case study authors should avoid using catch-all phrases and concepts that have limited analytical value since they are overly broad, and ultimately fail to get at knowledge that is useful for practitioners. When a delivery challenge doesn’t identify in detail what went wrong, it doesn’t help get delivery right. Focus on how these issues played out on the ground – while many contexts will exhibit difficult political relationships, low capacity, or institutional issues, it is important to be *specific* about how these problems manifested themselves on the ground.

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inefficient inter-governmental relations</td>
<td>Lack of political will</td>
</tr>
<tr>
<td>Poor existing technology</td>
<td>Lack of capacity</td>
</tr>
<tr>
<td>Lack of monitoring and evaluation skills</td>
<td>Institutional weakness</td>
</tr>
</tbody>
</table>

**Characteristics 2 and 3 of Development Challenges also apply to Delivery Challenges:**
A delivery challenge should travel beyond borders.
A delivery challenge is not an intervention, project, program, or objective.

<table>
<thead>
<tr>
<th>Good Example</th>
<th>Bad Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inefficient inter-governmental relations</td>
<td>Lack of political will in Nigeria’s water ministry</td>
</tr>
<tr>
<td>Poor existing technology</td>
<td>Lack of capacity to implement project</td>
</tr>
<tr>
<td>Mistrust in Local Government</td>
<td>How to gain trust form beneficiaries</td>
</tr>
</tbody>
</table>