



## Overview of 3ie final report structure and format

***Please note:*** All submitted versions of the final report must follow this structure and content.

In this document, we provide guidance on what should appear in the final report as well as an overview of the requisite style and structure of the final report. We hope that this document leads to clear understanding between the grantees and 3ie on what standards we set for our reports, which will be posted in the 3ie evidence portal database on our website.

We have determined the criteria for final reports based on careful consideration of technical rigor, policy relevance and usefulness and clarity to our target audiences for impact evaluation reports.<sup>1</sup> These audiences include academic researchers and evaluators, policymakers, practitioners, implementers and policy influencers. The more accessible your language and style, the more likelihood your report will be useful to non-researchers and non-specialist evaluators and policy actors.

Use the direct or active verb tense and avoid using the indirect. The school offered nutrition supplements to students describes the event more concisely than the students were offered nutrition supplements by the school. 3ie Impact Evaluation Reports are always written in first person.

Your final report will be published in the [3ies online evidence portal](#). The median length of these reports, without appendixes, is 40 pages.

3ie may also publish your report as part of the [3ie IE report series](#). If we do, this published version of your final report will be in the evidence portal, as well has have a publication description and be featured on our website. 3ie reserves the right not to publish a final report in the 3ie IE report series that does not meet minimum standards.

To avoid delays in accepting the final version and making the final payment we strongly advise authors to undertake substantive editing and copy-editing before submitting your final draft. 3ie reserves the right to edit reports to reduce length or return a report for further reductions prior to accepting it.

---

<sup>1</sup> In addition to our own experience, we have particularly drawn from:

- Grant, SP; Mayo-Wilson, E; Melendez-Torres, GJ; Montgomery, P. 2013. Reporting Quality of Social and Psychological Intervention Trials: A Systematic Review of Reporting Guidelines and Trial Publications. PLoS ONE 8(5): e65442.
- Bose, R. 2010. A checklist for the reporting of randomized control trials of social and economic policy interventions in developing countries. 3ie Working Paper 6.
- Bamberger, M. 2007. Simply the best? Understanding the market for “Good Practice” advice from government research and evaluations. A framework for assessing the quality, conclusion validity and utility of evaluations. Conference paper, American Evaluation Association.

### New Delhi

202–203, Rectangle One  
D-4, Saket District Centre  
New Delhi – 110017, India

3ie@3ieimpact.org  
Tel: +91 11 4989 4444

### London

c/o LIDC, 36 Gordon Square,  
London WC1H 0PD  
United Kingdom

3ieuk@3ieimpact.org  
Tel: +44 207 958 8351/8350

### Washington, DC

1029 Vermont Avenue, NW, Suite 1000  
Washington, DC 20005  
United States of America

3ieus@3ieimpact.org  
Tel: +1 202 629 3939

## Outline

1. Introduction
2. Intervention, theory of change and research hypotheses
3. Context
4. Timeline
5. Evaluation: Design, methods and implementation
6. Programme or policy: Design, methods and implementation
7. Impact analysis and results of the key evaluation questions
8. Discussion
9. Specific findings for policy and practice
10. Required appendixes
  - A. Field notes and other information from formative work.
  - B. Sample design.
  - C. If relevant, survey instruments (qualitative and quantitative).
  - D. Pre-analysis plan.
  - E. Sample size and power calculations.
  - F. Monitoring Plan.
  - G. Structural or theoretical model specification (if relevant).
  - H. Descriptive statistics.
  - I. Results.
  - J. Cost data for the programme implementation to provide the 'ingredients' into CEA, CBA or CUA.
  - K. .do files.

Please see below for greater detail.

## 1. Main report: structure and content guidelines

*In this section, we provide the criteria that a final report should meet. We consider these criteria important to allow the reader to make sense of the intervention and evaluation reported and to interpret the findings appropriately.*

### 1.1. Required components: a checklist

#### 1. Introduction

*Through the introduction, the researchers provide understanding on the importance of the present study and place it within the constellation of existing knowledge on the topic. In addition, it provides the reader with information about whether the research questions changed over the course of the study (and why). Finally, it provides a preview of the evaluation design and alerts the reader to the overarching structure.*

- Justify why this topic is important.
  - Importance can be established by some description of the global, regional or national scale of the problem addressed by the intervention.
  - Importance can also be established with background on policy-maker interest and buy-in at the global, national or sub-national levels.
  
- Justify why this study is interesting.
  - Lay out the broad debate that motivated this study, including previous literature on efficacy and effectiveness.
  - Place the present study within that debate, identifying the specific gap in knowledge the researchers hoped to address.
  - Explain why the timing was right to undertake an impact evaluation rather than monitoring or a different type of evaluation.
  - Provide the overarching evaluation questions and clear priors about them, based on a review of relevant literature and/or expert or peer insights.
  - Provide a brief description of the impact evaluation design used to address these questions.
  
- Report on fidelity to the questions in the pre-analysis plan (PAP).
  - Reference the research questions proposed in the PAP.
  - Clarify whether this report addresses all questions presented in the PAP submitted to 3ie. If not, provide the original questions and the reason(s) for the change.
  
- Provide an overview of the report's structure.

## 2. Intervention, theory of change and research hypotheses

*In this section, the researchers describe practicalities of the intervention, including the logistics and underlying the intervention's theory of change. It also lays out for the reader the full causal chain and linkages under investigation, with the purpose of allowing the reader to develop an intuition about the types and magnitudes of effects one might expect from such an intervention.*

- Describe the intervention, its key objectives, key activities and components.
- State the primary outcomes and impacts of interest.
  - Provide the primary research hypotheses examined as part of the evaluation.
  - If outcomes or impacts are not standard measures or involve self-perception, report on construct validity in the study setting, including any contextual validation exercises.
- Explain the components in the theory of change and the key assumptions linking the intended inputs, activities, outputs, intermediary outcomes and impacts.
  - Draw on existing evidence or expert or peer knowledge on the assumed robustness of the linkages in the causal chain.
  - Provide a sense of the anticipated time trajectory over which the intervention activities should be able to translate into the primary outcomes and impacts of interest.

## 3. Context

*In this section, the researchers place the study site in space and time. As possible, this should include “thick” description and numbers, with the purpose of helping the reader assess transferability of the programme and findings.*

- Provide the rationale on how the study site(s) (such as a district or region) was (were) selected.
- For the study site, describe relevant political, administrative, institutional and social context including any relevant local trends.
- Identify and report relevant criteria for assessing the external validity of the study site in terms of the larger context for extrapolation (geographic, population segments, seasons, institutional, scale). That is, sufficiently describe the sample of persons and settings to permit comparisons with other samples.
- Describe for the reader the extent to which the selected sample is representative of the study site's population as well as the broader (sub-national, national, regional) population.

#### 4. Timeline

*In this section, the researchers provide visualisation of the unfolding of the implementation and evaluation in the context of the study site.*

- Illustrate the flow of programme implementation, impact evaluation and relevant external shocks by providing a timeline intervention implementation and evaluation implementation, including major un/anticipated events/ externalities (e.g. baseline data collection in Feb 2011; interventions starts in March 2011; midline, ....., Economic shock in area in June 2012).

#### 5. Evaluation: Design, methods and implementation

*In this section, the researchers describe critical details of the study design, including data gathering, the treatment-assignment and identification strategy, and measures to ensure data quality.*

- Describe the measures taken to ensure ethical research, including which institutes provided ethical review and approval.
- Describe the evaluation strategy, including identification strategy.
  - As relevant, if the intervention involves questions of magnitudes and frequency (e.g., cash transfers), provide an idea of what these magnitudes mean (e.g. relative to local average incomes).
- Describe sample size determination.
  - For quantitative sampling, describe how sample size was determined, including assumptions underlying power calculations for the primary outcome of interest.
    - Besides power, describe other considerations in choosing the sample size (e.g. budget constraints)?
    - Provide further details on sample size calculations should be included in Appendix D.
  - For quantitative sampling, describe the approach taken to sampling and the benchmark used for sufficient data points
- Provide a clear description of the sampling design.
  - What were the eligibility criteria to be considered for the study sample?
  - For quantitative sampling, describe the sampling design, including stratification.
    - Delineate the sample size at different phases of the study, including the analytic sample.
    - As feasible, provide a diagram or flowchart of participants through each stage of the study, with sample size at each stage: enrolment, assignment, allocation, take-up and exposure, follow-up, analysis.

- Details of tests for differential attrition can be presented in Section 8.
  - Provide further details of the sampling design in Appendix B.
  - For qualitative sampling, describe the approach taken for representativeness and credibility.
- ☐ What was the strategy for assigning the treatment?
- If treatment assignment occurred at multiple strata (e.g. cluster and household), describe assignment at each level
  - If randomisation was used to assign treatment, describe how it was carried out.
    - What method was used to generate the random allocation?
    - Specify the allocation ratio.
    - Who performed the randomisation?
    - Was randomisation was public and, if so, which stakeholders were involved or present?
    - Was the comparison group aware of the experiment and treatment?
  - If participants or implementers indicated preferences about treatments, please explain.
- ☐ Describe data collection or dataset construction.
- If primary data collection was involved, what was the setting of collection?
  - What instruments were used to gather data (these can be elaborated in Appendix C)?
  - Who collected data and how were they trained (*including firms hired, as applicable*)? Was this the same across treatment arms and comparison groups?
  - Was any compensation provided for data collection or participation?
  - What quality control measures, such as audits and backchecks, were in place to ensure data quality and veracity?
- ☐ Describe strategies to avoid bias in both quantitative and qualitative work.
- Describe measures adopted for addressing spillover effects, John Henry effects, contamination effects, etc.
  - Describe measures adopted to attenuate bias from interviewer effects , positionality, and Hawthorne effects.

- ❑ Describe the data quality control measure in place during the data generating process. This includes:
  - Measures in place during data collection, including feedback from field managers and surveyors.
  - Measures in place during data entry.
  - Measures in place during cleaning and coding of data.

## 6. Programme or policy: Design, methods and implementation

*In this section, the researchers expand on the intervention information provided in Section 2 and then describe how the intervention was implemented in practice, with the purpose of explaining the treatment/programme under investigation.*

- ❑ Key programme elements and programmatic activities, including
  - Who developed the programme or policy content
  - The content of the programme or policy
  - The delivery method of the programme content
  - The deliverer of the programme content, including qualifications and training as well as interactions with the researchers
  - The setting in which the programme content was delivered to beneficiaries
  - The exposure quantity and duration of the programme content (sessions or episodes)
  - Activities or incentives intended to increase participation, adherence or compliance
  - The materials or technologies required for the programme
  - Whether any activities were proscribed among the treatment or comparison group
  
- ❑ Describe the monitoring system in place to track implementation roll-out (detail can be provided in Appendix F).
  - Report if the programme formally changed during the study period, in what ways and why?
  - As relevant, provide a description of deviations from study protocol, along with reasons.
  - Were the programme protocols prescriptive in how implementers do their job or did they allow/require on-the-spot innovations? How well were implementers trained?
  - For primary research, were implementers aware that they were participating in an experiment?
  
- ❑ Describe the recruitment strategy and take-up or participation in the intervention, using both quantitative and qualitative data to explain participation. Were incentives or compensation used?

- Describe the extent to which the actual group of beneficiaries matched the intervention's intended target population, using both quantitative and qualitative data (if relevant). Did the eligibility criteria work? Why/not?
- Drawing on both quantitative and qualitative process data, provide descriptive evidence on whether the implemented intervention differed in relevant ways from the planned intervention.
- As relevant, describe important unexpected or adverse events in each intervention/treatment group.
- Using the theory of change and using information collected during the study, discuss weak links in implementation of activities that were otherwise necessary for outcomes/impacts to be achieved.

## **7. Impact analysis and results of the key evaluation questions**

*In this section, the researchers describe the mixed-methods analyses undertaken and the results of these analyses, including a practical interpretation of them. When feasible, include graphics to show empirical results.*

- Provide the primary quantitative specification(s), relating to the primary hypothesis(es)
  - This should include the primary equation(s) and clarify all of the explanatory variables
  - Show a balance table for all variables in the analysis.
  - Discuss any data exclusions, e.g. outliers that were not included in the analysis.
  - Be sure it is clearly noted if any outcomes are self-reported.
- Provide the primary empirical analysis noting which were planned in the Pre-Analysis Plan (PAP) and which were not (Appendix C).
  - Results should not be omitted because they are insignificant, especially for results for analyses outlined in the proposal and the PAP.
  - Include standard errors of results.
- Provide other empirical results of interest, noting which were planned in the PAP and which were not.
- Be precise about the effects reported (ITT, ATT and (if relevant) LATE) and why these are reported.

- If missing data were imputed, describe the methods for doing so.
- If qualitative data were coded for either qualitative or quantitative analysis, what checks were in place on the consistency of this coding? (i.e. multiple coders, statistics for inter-rater agreement)
- Discuss heterogeneities of impacts, including at least all the subgroups mentioned in the PAP (as relate to socio-economic and structural factors influencing the outcomes of interest).
- What is the interpretation of the estimates reported? Translate into practical terms. (For example, translate what a coefficient on a logged of a variable means in percentage terms or what an estimate means for the average individual/household/beneficiary.)
- Provide information on costs of the intervention; conduct cost-effectiveness analysis and if relevant cost-benefit or cost-utility analyses (details can be provided in Appendix I).

## 8. Discussion

*In this section, the researchers reflect on threats to internal and external validity, with the purpose of facilitating the interpretation of the results. In addition, the researchers provide insights on the research process.*

- Review concerns and qualifications related to internal validity. These concerns may include:
  - Contamination, including the proportion (in %) of contaminated controls.
  - (Differential) attrition, including empirical checks.
  - Spillover effects.
  - Specificity and sensitivity of the results.
  - Hawthorne, novelty, disruption effects.
  - Compensatory, John Henry effects.
  - Interviewer or other researcher bias; positionality concerns.
  - Alignment between quantitative, qualitative findings.
- Review concerns and qualifications related to external validity (generalizability across time, space, scale, implementers and/or intended beneficiaries).
  - Describe features of the intervention, implementing agency capacity/connections and sample that would need to be considered carefully in a decision about going to scale and trying the intervention in another set

- What do heterogeneities in outcomes across sub-groups suggest about scale-ability?
  - Relate the results to others in the broader literature. If there are major divergences, please discuss. Are findings congruent with existing theories and evidence? Do they match with *ex ante* predictions or priors?
- As possible, comment on the influence of treatment design versus implementation on the results.
  - If research findings were presented to key stakeholders, including field staff and study participants, do the results seem to accord with their expectations and experiences?
  - Provide, for other researchers, key lessons from this study that may inform the design of monitoring and evaluation plans (this may come, *inter alia*, from progress reports).
    - Are there clear questions that future work might address?
    - Could this study be replicated in another setting? If so, would particular settings be especially fruitful?

## 9. Specific findings for policy and practice

*In this section, the researchers communicate the implications of the study's findings for policymakers, policy influencers, implementers, and practitioners. All of the findings reported here should link directly to the study detailed in this report. The researchers should make recommendations (not directives) specific, attainable by your audience and relevant to the context, considering the political economy context, power of and resources available to the main stakeholders.*

### Policy

- Group specific findings and implications according to the audience to which you are directing them.
  - For example, provide main headings for:
    - policymakers (which could be specific, such as a parliament or a ministry),
    - key influencers (such as civil society, the media, advocates).
- When feasible, separate specific findings as they relate to different contextual levels: national, state/local or project.
- Discuss relevant implications of costing and analyses of cost-benefit or cost-effectiveness.

### Programme and implementation

- If lessons emerge that relate to bottlenecks along the causal chain (awareness, take-up, enrolment, delivery of programme or policy content, adherence, etc), provide them here.

## 2. Required appendixes

Note that tables and figures should be placed in the report content, and not included as an appendix. The exception is for tables that cannot be reduced further yet are necessary to the report and that run more than four pages.

L. Field notes and other information from formative work.

M. Sample design.

N. If relevant, survey instruments (qualitative and quantitative).

O. Pre-analysis plan.

P. Sample size and power calculations: Discussion of expected effect size; power; statistical significance; intra-cluster correlation; expected attrition rates; any other relevant variables affecting sample size; a discussion of assumed values and a justification.

Q. Monitoring Plan

R. Structural or theoretical model specification (if relevant).

S. Descriptive statistics: univariate and bivariate tabulations of primary variables of interest.

T. Results:

- tables presenting the empirical analysis, mentioning clearly the statistical/econometric method
- tables showing balancing tests and results with standard errors / significance levels.

U. Cost data for the programme implementation to provide the 'ingredients' into CEA, CBA or CUA.

V. .do files.

### 3. Format and running order for the report front matter

- I. Title page (Page 1)
- Title of study/report (sentence case and bold). Titles must reflect the country or region in which the evaluation took place.
  - Authors of paper; star (\*) next to corresponding author.
  - Organisational affiliation of each author. Author names should appear as first name, the last name; affiliations should appear under every author name, not in footnotes.
  - Email ID for corresponding author only.
  - Date the report was submitted.
- II. Acknowledgements
- This section should include acknowledgements to 3ie for funding and for technical review and support throughout the study, as well as to any other funders of the study and to anyone else the authors wish to mention.
- III. Plain-language summary  
(up to 800 words);  
*this will serve as the basis for the project summary posted on 3ie's website*
- Suggested structure:*
- a. Importance, relevance of the research topic and questions.
  - b. Key impacts of interest.
  - c. Intervention design and delivery, including main activities and who delivered them, and the theory of change. Clarify what, if anything, was delivered in the comparison group.
  - d. Contextual details, including study setting and sample.
  - e. Data and evaluation design and method, including construction of counterfactual and use of mixed-methods to make causal claims. Be clear if participants were blinded to their treatment assignment.
  - f. Results for primary questions proposed to 3ie, with average effects and those for key heterogeneities, giving attention to vulnerable populations. Include practical interpretation of effect sizes for improving welfare. Be clear if analysts were blinded to treatment assignment in assessing outcomes.
  - g. Results for primary research questions, as relevant to policy, programming, and future research, organised by heading as to which type of finding.
  - h. Costing, cost-effectiveness/benefit to achieve key impacts.
  - i. Concerns related to internal and external validity, cautions for interpreting results.
- IV. Contents page
- Capitalisation is sentence case; use number style for headings and sub-headings (e.g. 1.1, 1.2).
  - Appendixes are listed in the table of contents (see below for an example of a table of contents.)

- Page numbers in the contents page:
    - Front matter through list of tables and figures is Roman.
    - All pages to be electronically, correctly linked in the contents section to the actual pages.
- V. List of figures and tables**
- All tables and figures in the report and appendixes must be numbered and titled listed on this page, with links to the pages on which they will be found.
- VI. Abbreviations and Acronyms**
- All abbreviations and acronyms used in the report must be listed here. Abbreviations of foreign language terms or names should be listed in the original and in English.
  - If a word to be abbreviated occurs only once or rarely in the text, do not abbreviate it.
  - Do not spell out or explain an abbreviation or acronym for the first time in the table of contents, abstract or a heading. In the case of an executive summary, if it is three or fewer pages, do not call out abbreviations. In a longer summary, use call outs, but repeat the call out in the main report.
  - Once an abbreviation or acronym has been called out, use it consistently throughout the report.
- VII. Appendix/es**
- All tables and figure to be in the main report must be placed where they are referenced, with the exception of tables that run more than two pages.
- VIII. References**
- Note: list only those works that are cited in the actual report. Additional works may be included in a separate bibliographic list, alphabetically.*
- All 3ie reports use the Harvard style of referencing. Please see examples of in-text citations and referencing below.
  - In the text, spell out author last names. Do not abbreviate. It is Dickens and Jones not D&J or DJ. When the name is related to a reference, use only the last name or names, e.g. Dickens and Jones (2004)
- In-text citation:** When mentioning a particular part of the work, and making direct reference to this, include a page reference, for example, Cormack (1994 pp.32–33)
- Where there are several authors (four or more), only the first author should be used, followed by *et al.*, for example, Green *et al.* (1995)

**Referencing:** Adams, RJ, Weiss, TD and Coatie, JJ, 2010. *The World Health Organization, its history and impact*. London: Perseus.

- IX.** Additional material:  
Logos
- All non-3ie logos must be submitted in high-resolution, in the exact size and format required by a given institution or donor. Ideally, send EPS or vector versions of logos.
- X.** Additional material:  
Photos
- Include any high-resolution photos (700-1000 dpi) from the project and relevant to the study topic that might be suitable for 3ie to use.

**Right-to-use:** Please provide full credits and attest subjects provided all necessary permissions (especially for children) and that you have copyright for photo use.

---

## Sample table of contents

### Contents

<b>Acknowledgements</b> .....	<b>i</b>
<b>Executive Summary</b> .....	<b>ii</b>
<b>List of figures and tables</b> .....	<b>iv</b>
<b>Abbreviations and acronyms</b> .....	<b>v</b>
<b>1. Introduction</b> .....	<b>1</b>
1.1 Summary of evaluation approach and research questions .....	1
<b>2. Background and context</b> .....	<b>2</b>
2.1 Male circumcision and HIV prevention .....	2
2.2 Cultural practices and prevalence .....	3
2.3 Access to medical male circumcision in Malawi.....	4
2.4 Measuring the demand for medical male circumcision .....	4
<b>3. Intervention and evaluation</b> .....	<b>5</b>
3.1 Data collection methods .....	5
3.2 Analysis methods .....	8
<b>4. Results</b> .....	<b>8</b>
4.1 Sample characteristics at baseline and follow-up.....	8
4.2 Take-up of voluntary medical male circumcision.....	9
4.3 Determinants of take-up.....	12
<b>5. Recommendations and conclusions</b> .....	<b>18</b>
<b>Appendix A: Sample Design</b> .....	<b>24</b>
<b>Appendix B: Survey instrument – Household Listing</b> .....	<b>25</b>
<b>Appendix C: Survey instrument – Baseline Survey</b> .....	<b>26</b>
<b>Appendix D: Survey instrument – Follow-up Survey</b> .....	<b>39</b>
<b>Appendix E: Power Calculations</b> .....	<b>54</b>
<b>References</b> .....	<b>21</b>

## 4. Font and pagination

- Arial is the official font for all 3ie reports.
- *Contents* – Arial 11 pt. (bold) for section headings, Arial 11 pt. for sub-headings.
  - Note that sub-sub headings should not be included in the contents table.
- *Main text* – Arial 11 pt.
- *Section headings* (main text) – Arial 14 pt. (bold)
  - Sub-headings – Arial 12 pt. (bold)
  - Sub-sub headings – Arial 12 pt. (italicised)
- *Titles of figures and graphs* – Arial 11 pt. (bold) and sentence case, for example:  
**Table 3: Field observations of improved stoves in three villages after eight months**
- *Footnotes* – Arial 9 pt.
- *Notes under tables* - Arial 9 pt., always preceded by Note: (singular and with a colon, not bold or italic).

- *Non-English words* - Italicise words and terms if they are in a language that is not English
- *Page numbers* – bottom of the page, centre, Arial 10 pt.
- *Line spacing* - 1.15 spacing between lines.

## 5. Additional guidance on tables, graphs and figures

- **Note to authors, copy-editors, proofers:** In order to avoid odd formatting issues that crop up in reports (especially those in Microsoft Word format) regular Microsoft © updates should be enabled to avoid these glitches which could be a result of interactions between Apple Macintosh and personal computers using older versions of Microsoft Word.
- **Establish copyrights and permissions.** 3ie must be reasonably assured that copyright has been honoured by the authors. Especially in the Replication Paper series, the replication authors must show they have gotten permission to use all graphics that come from the original study. **Special care needs to be taken when the source of a graphic appears to be from a published source.** The authors are responsible for securing all needed permissions. The technical lead will get written proof that 3ie has permission to publish the proprietary material.
- **All tables and graphs must be supplied in the original MS Excel file format** to allow formatting for printing.
- All equations must be in MS Word and not supplied as images. 3ie will contact authors if their material is not in the acceptable format.
- Avoid splitting tables across pages wherever possible. Note that tables running over many pages are likely to be dropped from a printed version. Figures that do not reproduce well in print are likely to be deleted from published printed versions.
- All tables, graphs and figures need titles, labels and numbers and other information that will allow the table to be interpreted without referencing the text. Each title should be above the table, graph or figure and use sentence case.
- Most 3ie reports are printed in black and white. Coloured graphs, figures and labelling need to be comprehensible if printed in greyscale.
- Figures that are not easily comprehensible when reproduced may have to be omitted.
- It is a good idea to verify whether data sets and tables procured from external sources have granted the necessary permissions to reproduce the same.
- Cite the source below tables, graphs and figures.