



Report

Department for International Development

**EVALUATION OF THE HUMANITARIAN
INNOVATION AND EVIDENCE PROGRAMME
(HIEP): SUMMATIVE EVALUATION PHASE 1**

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Submitted by Itad

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List of Acronyms

ACF	Action against Hunger
ALNAP	Active Learning Network for Accountability and Performance
AR	Annual Review
ARD	Africa Regional Department
BISP	Benazir Income Support Programme
BRACED	Building resilience and adaptation to climate extremes and disasters
BRCS	British Red Cross Society
CaLP	Cash Learning Partnership
CB	Capacity building
CDKN	Climate and Development Knowledge Network
CEA	Cost-Effectiveness Analysis
CHASE	DFID Conflict, Humanitarian and Security Department
CRCT	Cluster Randomised Control Trials
CRUO	Communications and Research Uptake Officer
CS	Case Study
DEPP	Disasters and Emergencies Preparedness Programme
DFID	Department for International Development
DRC	Democratic Republic of the Congo
DRM	Disaster Risk Management
DRR	Disaster Reduction and Recovery
ECHO	European Commission Humanitarian Aid and Civil Protection Department
ELAN	Electronic Cash Transfer Learning Action Network
ELRHA	Enhancing Learning and Research for Humanitarian Assistance
ENN	Emergency Nutrition Network
ESRC	Economic and Social Research Council
FfF	Fit for the Future
FIC	Feinstein International Center
GBV	Gender-Based Violence
GFDRR	Global Facility for Disaster Reduction and Recovery
GoP	Government of Pakistan
HDX	Humanitarian Data Exchange

HERR	Humanitarian Emergency Response Review
HESC	Humanitarian Evidence Synthesis and Communication
HIEP	Humanitarian Innovation and Evidence Programme
HIES	Humanitarian Innovation and Evidence Strategy
HIF	Humanitarian Innovation Fund
IRC	International Rescue Committee
IFRC	International Federation of Red Cross and Red Crescent Societies
INGO	International Non-governmental Organisation
KII	Key Informant Interviews
M&E	Monitoring and evaluation
MEI	Moving Energy Initiative
MHPSS	Mental health and psychosocial support
MoF	Ministry of Finance
MYF	Multi-year financing
NDMA	National Disaster Management Authority
NGO	Non-governmental Organisation
NRSC	Nutrition Research Steering Committee
NWG	National Working Group
OCHA	Office for the Coordination of Humanitarian Affairs
ODI	Overseas Development Institute
OFDA	Office of US Foreign Disaster Assistance
OPM	Oxford Policy Management
PCG	Political Champions Group
PDMA	Provincial Disaster Management Authorities
PEA	Political Economy Analysis
PMF	Performance Management Forms
QA	Quality Assurance
RA	Risk Assessment
RCRC	Red Cross/Red Crescent
RCT	Randomised Control Trials
RED	Research and Evidence Division
REFANI	Research on Food Assistance for Nutritional Impact
RUS	Research Uptake Strategy
SAGE	Scientific Advisory Group for Emergencies

SAVE	Secure Access in Volatile Environments
SDC	Swiss Development Cooperation
Sida	Swedish International Development Cooperation Agency
SRO	Senior Responsible Owner
ToC	Theory of Change
TRG	Technical resource group
UCL	University College London
UEA	University of East Anglia
UNDP	United Nations Development Programme
UNHCR	UN High Commissioner for Refugees
VAWG	Violence Against Women and Girls
VfM	Value for Money
VT	Virtual Team
WASH	Water, Sanitation and Hygiene
WDR	World Disasters Report
WFP	World Food Programme
WHO	World Health Organisation
WHS	World Humanitarian Summit

Executive Summary

The Humanitarian Innovation and Evidence Programme (HIEP) intends to have impact on humanitarian actors' capacity to deliver improved response and resilience programmes that are effective at supporting vulnerable people. HIEP is a £50.2 million investment that is working towards three specific outcomes:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation, and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

This report presents the findings, conclusions and recommendations from the first summative evaluation of HIEP. It is the third of four stages of an evaluation process being conducted by Itad between 2013–18. The evaluation aims to provide both an independent assessment of progress and also to produce organisational learning and recommendations for the implementation of HIEP and future programmes. The purpose of this summative phase is to provide an assessment of short-term outcomes delivered by the programme and reflection on the programme management.¹ The evaluation is organised around four key questions agreed in the inception phase:

- **Relevance:** How well has HIEP identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?
- **Effectiveness:** Which approaches have been more effective in enabling HIEP to ensure the creation, support, and application of high quality and relevant humanitarian evidence?
- **Value for money (VfM):** Which management and implementation approaches have enabled HIEP to deliver better value for money?
- **Impact:** What contributions has HIEP made to building and sustaining evidence-aware policy and practice by humanitarian organisations?

The evaluation focuses on eight of the HIEP projects as case studies and includes thematic analysis across the programme considering value for money, management, and gender and social inclusion. The more specific objectives of the first summative phase are to:

- Identify progress in the case study projects
- Assess the quality of case study outputs
- Assess the strength and progress to date in the influencing and research uptake strategies
- Identify where HIEP has contributed to change in the humanitarian sector

Inform recommendations on HIEP design and facilitate learning in the HIEP Virtual Team.

¹ Original terms of reference for the evaluation of the Humanitarian Innovation and Evidence Programme.

Background to HIEP

The Humanitarian Innovation and Evidence Programme (HIEP) is part of the Department for International Development's (DFID) commitments in response to the Humanitarian Emergency Response Review (HERR) to make humanitarian research and innovation a core part of DFID's research and evidence work and to use innovative techniques and technologies more routinely in humanitarian response.

DFID developed a Humanitarian Innovation and Evidence Strategy (HIES) that outlined an approach to four key problems affecting humanitarian effectiveness that evidence and innovation can address:

- **Problem 1:** Decision makers have inadequate access to reliable and tailored information about risk, especially as it affects the poorest
- **Problem 2:** Inadequate synthesis and generation of evidence on which humanitarian interventions work best, and new ways to tackle humanitarian problems
- **Problem 3:** Insufficient capture and systematic analysis of how to work with national and local institutions to manage disasters, especially in insecure settings
- **Problem 4:** Inadequate systems and incentives to integrate evidence production and use it routinely in humanitarian decisions and actions

HIEP is the programme that puts the strategy into action. HIEP includes projects that seek to generate new evidence, or synthesise existing evidence on what works in humanitarian action in key areas including health in emergencies, disaster risk reduction, scaling up cash-based responses, working in volatile environments, and urban resilience. There are also projects focused on support to innovation in the humanitarian sector. Projects are implemented with partners and include a range of approaches including the establishment of specific funds such as the Humanitarian Innovation Fund (HIF) and Research for Health in Humanitarian Crises (R2HC), commissioning self-contained research projects and using evaluation as a means to generate evidence. HIEP has a particular focus on working through partnerships between operational and academic organisations.

HIEP is an innovative programme in DFID being supported and implemented through cooperation across three departments: Research and Evidence Division (RED), Conflict, Humanitarian and Security (CHASE) and Africa Regional Department (ARD). The management of HIEP is a new departure in the management of humanitarian research in DFID. It is the most integrated programme to date in DFID's efforts to pool funding and involve lead adviser and programme management resources from different DFID departments. It is based on the assumptions that this structure, by including skills from across DFID departments, will produce more high quality, relevant and used research

Methodology

The summative evaluation took place between September 2015 and January 2016. At the heart of the evaluation is a case study approach in which the evaluation team follow eight of the HIEP projects up to 2018. The evaluation included three country visits – to Kenya, Ethiopia and Pakistan – which enabled the inclusion of more country-level stakeholder perspectives, and enabled meetings with research teams working locally. Key elements of the methodology included assessment of projects' responsiveness to new opportunities and methodological challenges of research and innovation in humanitarian contexts. It also

considers the quality assurance processes of projects to ensure the production of robust evidence and uses contribution analysis to assess the evidence and significance to date of HIEP's contribution to any identified results. The evaluation also conducted a review across HIEP of value for money using the 4E framework (which considers economy, efficiency, effectiveness and equity), reviewed the management model of the programme, conducted a gender and social inclusion (GASI) audit, and a user review of selected project outputs.

The evaluation experienced some constraints, notably the lack of a finalised HIEP influencing strategy, late arrival of data including project budgets and updated logframe, and engaging with the wider Virtual Team beyond case study advisers and managers.

A theory of change was developed by the evaluation team with DFID in the inception phase, which is summarised in the box below. This is being tested and refined over the course of the evaluation.

HIEP Theory of Change Summary

Through its operations, networking, influencing and funding, *alongside* coherent and convincing evidence products, DFID will attract other humanitarian funders and practitioners to invest in new technologies, and evidence-informed operational approaches and systems that the HIEP will produce.

This will influence skills, behaviours, cultures and systems among humanitarian actors to promote the routine integration of evidence into the financing, design and implementation of humanitarian interventions.

In turn, these enabling conditions, capacities and systems will support international agencies, national governments, public sector actors, civil society and private actors in fragile and conflict-affected states and countries vulnerable to disaster risks **to use context-specific applications of evidence and innovations** in their design, financing, planning and delivery of humanitarian policies, programmes and practices to manage risks and deliver rapid, effective responses in emergencies.

This will improve programmes so that lives are saved and communities recover quickly from economic and livelihood losses that arise from humanitarian crises.

Key findings

Relevance

HIEP continues to respond to priorities in the humanitarian community. It identifies and addresses important evidence gaps and questions which are prioritised by the sector. Consultation and ongoing engagement with the international humanitarian community is strong and has been aided by operational partners' good connections in their sectors. Notable has been HIEP's flexibility to respond to new research needs and opportunities, such as the West African Ebola crisis.

The overall programme portfolio and the project research designs and methodologies are appropriate to produce robust and relevant findings. Methods include cluster randomised control trials, systematic reviews, qualitative processes for data collection in multi-country projects, and evaluation including primary data collection at community level. Two projects are Funds awarding nearly 100 grants so far to research on health in emergencies and to support innovation in the humanitarian sectors. Projects make good use of peer review and external advisory groups to ensure the appropriateness of research methods and quality of analysis.

Projects have dealt well with the challenges of the humanitarian context that have demanded flexible and at times innovative approaches, for instance in terms of the data considered in systematic reviews and changes in focus countries for research due to increases in insecurity. Some projects have paid good attention to gender concerns and also ensured the inclusion of marginalised parts of communities in data collection. However, attention to gender and social inclusion has been inconsistent across HIEP projects and could be improved.

Effectiveness

HIEP is on track to produce high quality evidence and innovation products. Already a number of products have been produced and some are being used in the sector, such as in the Ebola Crisis. HIEP projects have also produced some outputs over and above their planned products which share their learning about undertaking research in humanitarian contexts. But there are also signs of some projects facing challenges to convert their robust evidence into changes in organisational behaviour in humanitarian practice, for example in organisations' reluctance to finance activities which were not previously in budget lines but found to be necessary to enable the application of new innovations.

The individual projects are well networked with intermediary organisations linking evidence to the humanitarian sector and with international operational agencies, which provides a strong basis to promote awareness of HIEP evidence. However, networks remain less developed at country level which, given the importance of domestic actors in humanitarian response, is a significant gap to address to ensure HIEP-supported evidence and innovations reaches all key humanitarian actors.

An important weakness is that HIEP project communication budgets to support research uptake are often low and plans short-term, extending to only six months or less following the production of final research reports. Also, it is unclear how far the role of HIEP project partners and DFID extends beyond building awareness of new humanitarian evidence to a role supporting its application.

Value for Money

HIEP is economical and largely efficient. There are low management costs and contractual arrangements aim for low transactions costs. DFID costs for overall management of HIEP are no more than 4.2% of the overall programme cost, which is extremely low (this does not include individual partners' own costs for management of individual projects). The efficiency of HIEP is reasonable though it has suffered from delays and budget underspend. But decision making has been timely, and governance provided valuable strategic direction at relatively low cost in terms of staff time.

HIEP resources allocated to structures and processes that support the effectiveness of HIEP have been low, notably the project communication budgets and to the HIEP Secretariat. A number of VFM-related and other recommendations that were made in the HIEP formative evaluation have not been implemented in part due to HIEP Secretariat capacity constraints. The Secretariat has had limited time to garner the full potential of the Virtual Team and to maximise the synergies across HIEP projects, for example building awareness among HIEP partners and DFID humanitarian advisers of the full range of HIEP projects and common stakeholders and interests, and also taking forward strategies to achieve HIEP outcomes. So, while HIEP is economical and relatively efficient, low resourcing levels for measures which support HIEP's effectiveness and equity may limit its value for money.

Impact

HIEP is already achieving some impact on the sectors' interest in and understanding of how to support innovation, and also in some organisations' policy and practice towards research management and use. The scale and scope of HIEP, DFID's public prioritisation of evidence and innovation, and its operational-academic partnership model are strengthening some organisations' own efforts to shift internal culture and practice towards more routine integration of evidence and innovation. HIEP's multi-pronged, concerted focus on a key process, the World Humanitarian Summit consultation, to promote understanding and commitment to innovation, has begun to bear some fruit with interest among some humanitarian actors to cooperate in a Global Alliance for Humanitarian Innovation.

However, the absence of a HIEP influencing strategy, shared and supported by the Virtual Team to progress HIEP outcomes (which are more ambitious than the uptake of evidence from individual HIEP projects) limits HIEP's potential impact on investment into evidence and innovation as well operational organisations' routine use of evidence in their work.

Gender and social inclusion

HIEP is based on strong principles that aim to address gender and social inclusion (GASI). Some HIEP projects and partners' innovative approaches and methodologies are good ways to reach women and excluded parts of communities in research. But evidence from the GASI audit strongly indicates that where projects have not had in place the expertise, systems and mechanisms, from inception, for embedding GASI considerations, opportunities for inclusive data collection and analysis are missed. Across the HIEP portfolio, less systematic attention is given to the full range of social diversity than to the gender dimensions of research. Reaching women and vulnerable people through humanitarian research is constrained by the limited capacity of Southern research institutes, and limited numbers of experienced female researchers in particular able to work in insecure environments. At the programme level, there has been limited capacity to ensure that gender and social inclusion concerns have been mainstreamed across the portfolio. Given the importance of GASI considerations to understanding vulnerability and effective responses, this is a serious risk to the quality of final HIEP products.

Management model

The HIEP cross-departmental model is proving to be an effective way to bring together skills and expertise across DFID, and the Management Committee and Virtual Team structures are valued by their participants. The HIEP Management Committee has recognised some of the key risks associated with the management arrangement where much of the technical input to projects is based largely on informal links between departments and individuals, but more could be done to strengthen these.

The HIEP model lays a strong foundation for research uptake and also for DFID to contribute to a significant transformation in the sector in support for, and use of, evidence and innovation in policy and practice. But within DFID, HIEP is seen more as a research fund rather than a programme with a team working towards shared goals.

HIEP is making a significant contribution to the sector and is on track to produce robust and relevant evidence accessible to humanitarian organisations. HIEP could have greater potential to achieve its more ambitious aims if it invested in measures which would harness the full potential of HIEP and its Virtual Team and network towards HIEP overall goals.

Recommendations

The recommendations (drafted and initially shared at the end of January 2016) have a relatively short timeframe reflecting the evaluation team's view of the urgency to focus on the communication and influencing strategies of HIEP which may involve HIEP partners, many of whom are entering their final contract year of cooperation with HIEP, with some ending in June 2016. It is acknowledged by the evaluation team that HIEP will have to balance these recommendations with other programme demands in this busy time.

	Recommendation	Who	When
1	Revisit partner communication and research uptake plans and consider increases in budgets and extending contracts for longer-term communication. Extensions will be particularly important if products are produced only in the last 3–6 months of the project to support longer-term research uptake activities. Ensure resourcing is sufficient for the production, translation and promotion of a range of products and processes.	HS* with project teams	April 2016
2	Schedule, develop and resource specific strategies to guide Virtual Team actions to support each HIEP outcome. Identify priorities in terms of countries, organisations and sectors that HIEP seeks to see change by 2018. Consider a widened donor engagement strategy; linking with key leaders within key organisations driving change in evidence and innovation; support to the HIEP network to build learning on change in organisational culture in relation to evidence and innovation; creating links between local and international influencing processes; follow-up measures for WHS. Schedule time for the VT to revisit and refine the programme Theory of Change.	HS with Virtual Team	April 2016
3	Extend partner contracts for at least one year beyond their current end point to ensure they track and maintain monitoring data on research uptake essential to be able to see the medium-term results of HIEP.	HS and teams	April 2016
4	Set up systems for better monitoring of value for money within HIEP. Include a specific VfM review across the programme at the Management Committee meeting every six months; development of guidance; VfM indicators for projects; monitoring of key cost drivers, milestones and indicators.	HS and MC**	June 2016
5	Develop and contract out a HIEP communication project or set of projects to promote uptake and application of HIEP findings particularly at the <u>national and regional levels</u>. Elements to consider include creating links and relationship for HIEP in priority countries; production of a set of evidence products and processes (events, ongoing	HS	June 2016

	communication, other) to promote evidence drawn from across HIEP on specific prioritised themes; learning products on methodological challenges and solutions in humanitarian research; promotional activities and practical support to organisations to apply evidence (in cooperation with HIEP partners)		
6	Strengthen HIEP's approach to implementing its commitments to gender and social inclusion. This should include measures to add value to and influence the GASI approaches of programmes within the current portfolio and, consolidate systems and mechanisms for embedding GASI within HIEP in preparation for the next phase.	HS	June 2016
7	Strengthen systems for ring-fencing, managing and rewarding adviser and programme manager time spent on HIEP project management.	HS	June 2016
8	Consider a specific project to build research capacity in priority humanitarian countries. This can help to increase the supply of experienced and skilled female and male researchers in the Global South, as well as building the capacity of organisations interested in undertaking research but currently not meeting quality standards of HIEP.	HS	August 2016
9	Respond to case study recommendations through lead adviser and project team meetings. HIEP Secretariat should log and track responses.	HS and project teams	February 2016

* HS: HIEP Secretariat

** MC: Management Committee

1. Introduction

1.1 Overview

This report presents the findings, conclusions and recommendations from the first summative evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP). It is the third of four stages of an evaluation process being conducted by Itad 2013–18. So far it has included an inception phase and formative evaluation. The final evaluation is scheduled for 2017–18. The evaluation aims to provide both an independent assessment of progress, and also to produce organisational learning and recommendations for the implementation of HIEP and future programmes. The purpose of this summative phase is to provide an assessment of short-term outcomes delivered by the programme, and reflection on the programme management.² It aims to address questions of HIEP's relevance, value for money, effectiveness, and impact to date. The evaluation focuses on eight projects as case studies along with thematic analysis across the programme, which considers value for money, management, and gender and social inclusion. The more specific objectives of the first summative phase are to:

- Identify progress in the case study projects
- Assess the quality of case study outputs
- Assess the strength and progress to date in the influencing and research uptake strategies
- Identify where HIEP has contributed to change in the humanitarian sector
- Inform recommendations on HIEP design, and facilitate learning in the HIEP Virtual Team.

Data collection was carried out between September and December 2015 with draft case study reports shared with DFID lead advisers and partners in December 2015.

The primary audiences for the report are the Virtual Team responsible for the delivery of HIEP and also the wider humanitarian community including research organisations and HIEP partners.

The report is organised in 9 further sections:

- **Section 2** outlines the methodology for the summative evaluation.
- **Sections 3–6** present findings on relevance, effectiveness, value for money (VfM), and impact. Each section includes findings at the project and programme levels, and considers the factors that have enabled and inhibited success. Case study scorings are included for relevance, VfM and effectiveness, but not for impact because it is too early in the programme process for these to be meaningful for individual projects. More detail on case studies is included in the case study reports (Annex 2).
- **Section 7** focuses on findings regarding gender and social inclusion.
- **Section 8** discusses the HIEP management model.
- **Section 9** discusses the theory of change and any adaptations that the findings to date suggest.
- **Section 10** concludes and makes final recommendations.

² Original terms of reference for the evaluation of the Humanitarian Innovation and Evidence Programme.

1.2 Background to the evaluation

What is HIEP?

HIEP responds to the UK Government's Humanitarian Emergency Response Review (HERR) undertaken in 2011. HIEP aims to make humanitarian research and innovation a core part of DFID's research and evidence work and use innovative techniques and technologies more routinely in humanitarian response.

Following the HERR, DFID developed the Humanitarian Innovation and Evidence Strategy (HIES), which identified four key problems that evidence and innovation could address:

- **Problem 1:** Decision makers have inadequate access to reliable and tailored information about risk, especially as it affects the poorest.
- **Problem 2:** Inadequate synthesis and generation of evidence on which humanitarian interventions work best, and new ways to tackle humanitarian problems.
- **Problem 3:** Insufficient capture and systematic analysis of how to work with national and local institutions to manage disasters, especially in insecure settings.
- **Problem 4:** Inadequate systems and incentives to integrate evidence production and use it routinely in humanitarian decisions and actions.

HIEP aims to address these problems and ultimately intends to have an impact on humanitarian actors' capacities to deliver improved response and resilience programmes that are effective at supporting vulnerable people. HIEP is working towards three specific outcomes:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications;
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions;
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

A theory of change (ToC) was developed by the evaluation team with DFDI in the inception phase. A summary of the theory of change is in Box 1 below. The fuller diagram of the ToC follows in Figure 1.³

BOX 1: HIEP THEORY OF CHANGE

HIEP Theory of Change Summary

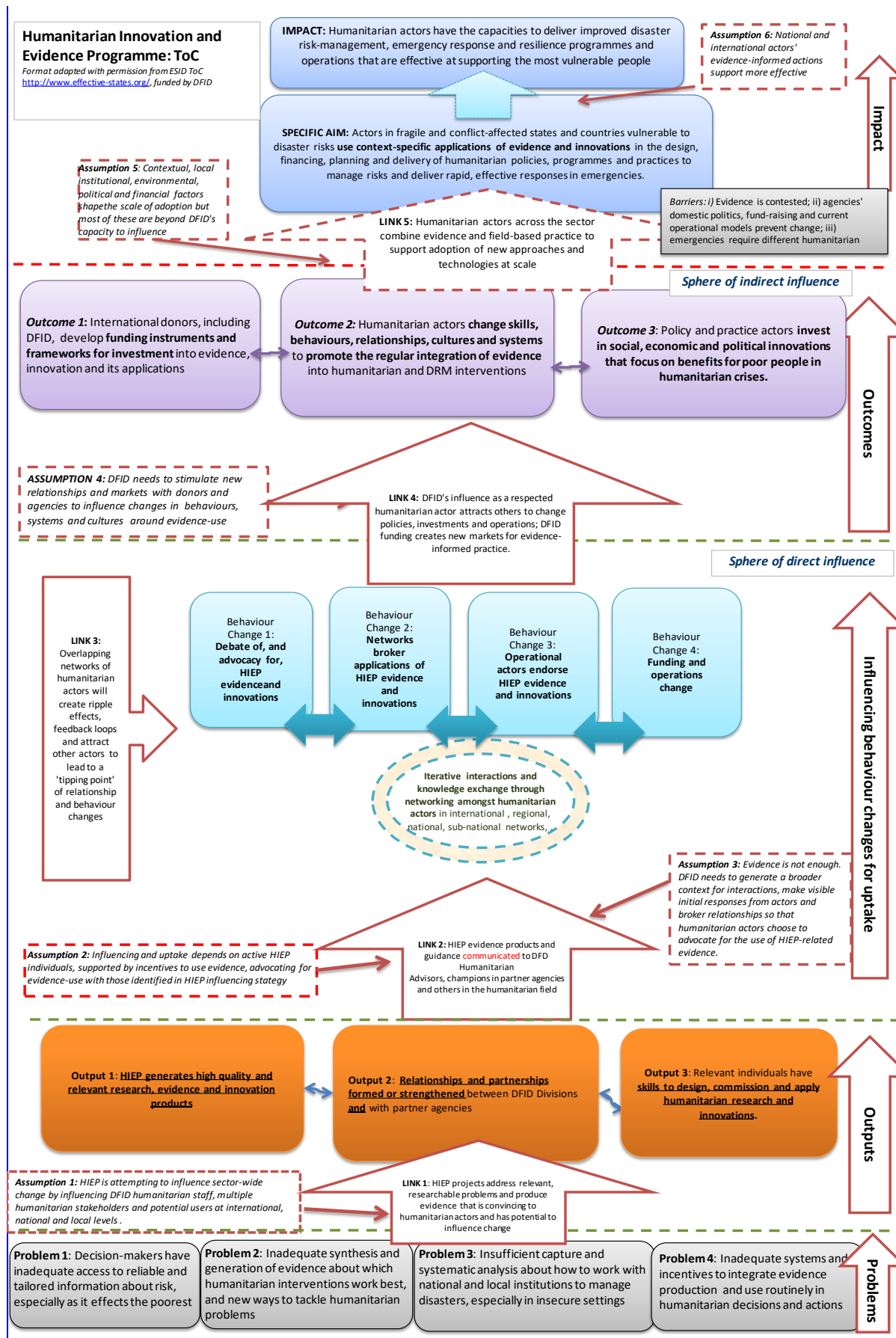
Through its operations, networking, influencing and funding, *alongside* coherent and convincing evidence products, DFID will attract other humanitarian funders and practitioners to invest in new technologies, evidence-informed operational approaches and systems that HIEP will produce. This will influence skills, behaviours, cultures and systems among humanitarian actors to promote the routine integration of evidence into the financing, design and implementation of humanitarian interventions.

In turn, these enabling conditions, capacities and systems will support international agencies, national governments, public sector actors, civil society, and private actors in fragile and conflict-affected states and countries vulnerable to disaster risks **to use context-specific applications of evidence and innovations** in their design, financing, planning and delivery of humanitarian policies, programmes and practices to manage risks and deliver rapid, effective responses in emergencies.

This will improve programmes so that lives are saved and communities recover quickly from economic and livelihood losses that arise from humanitarian crises.

³ The fuller narrative for the Theory of Change was included in the HIEP formative phase reports available from <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

FIGURE 1: HUMANITARIAN INNOVATION AND EVIDENCE PROGRAMME THEORY OF CHANGE



1.3 How is HIEP structured?

HIEP is an innovative programme in DFID being supported and implemented through cooperation across three departments: Research and Evidence Division (RED), Conflict, Humanitarian and Security (CHASE), and Africa Regional Department (ARD). HIEP is a new departure in the management of humanitarian research in DFID. It is the most integrated programme to date in DFID's efforts to pool funding and involve lead adviser and programme management resources from different DFID departments. It is based on the assumption that, by including skills from across DFID departments, the programme will produce more high quality, relevant, and used research.

HIEP is organised on a 'hub and spoke' model, with the HIEP Secretariat acting as a hub and the lead advisers and programme managers in a number of departments acting as spokes that manage projects and advocate for the uptake of research. This group together with the Management Committee, also drawn from across the departments involved in HIEP, make up a HIEP Virtual Team (VT) which meets regularly. The Secretariat is made up of four staff (2.6 full-time equivalents – a 0.4 increase from the formative phase in 2014). There have been staff changes in 2015 including the appointment of a new full-time Head of HIEP (who was formerly on the Management Committee). It is overseen by a Management Committee made up of representatives from the three participating departments of DFID and is chaired by the Chief Scientific Adviser (who also changed in late 2015).

DFID approved an initial budget of £48.3 million for HIEP. This was raised to £50.2M. By the end of 2015 £44.52 million was allocated and the remaining resources are allocated subject to approval by the Management Committee.⁴ By the end of 2015 there was a steady increase in expenditure, rising from £4.7m in 2013/14 to £9.4m in 2014/15 and anticipated spend in 2015-16 of UK£9.9M and UK£13M for 2016/17⁵. The programme is funded through three business cases. Thirty projects have been developed and approved by the HIEP Management Committee on a rolling basis.⁶ Some additional projects are in development e.g. Disability Data. A number of new projects began during this phase of the evaluation, including projects on Urban Risk in Africa launched in early March 2015, and on Shock Response Social Protection Mechanisms which began in March 2015. Projects which were completed include projects on Protracted Displacement, the East Africa humanitarian evidence mapping, and Humanitarian Data Exchange; one on Protection of Civilians was closed due to lack of progress. A full list is attached in Annex 6. Projects are implemented by a wide range of partners from civil society, universities and research institutes, with a focus on partnerships between academic and operational organisations.

1.4 The wider context

There have been a number of key changes in the wider context in which HIEP is operating since the formative phase evaluation. These include: a) the increased gap between humanitarian needs and resources;⁷ b) the new and increased scale of many humanitarian crises including the conflict-related humanitarian crisis in the Middle East, the Ebola outbreak in West Africa, and the major earthquake

⁴ This funding does not include additional funds leveraged from USAID, ESRC, Wellcome Trust and Sida, for example. Figures from September MC meeting papers.

⁵ HIEP Management Committee meeting papers December 2015 Flag A

⁶ Projects such as the literature review of education in emergencies, education in emergencies phase 1, and education in emergencies phase 2 are counted as separate projects in line with how the budgets were approved by the HIEP Management Committee. The total number does not count the independent evaluation as a project.

⁷ <http://www.globalhumanitarianassistance.org/report/gha-report-2015>

in Nepal; c) insecurity, violations of human rights and international humanitarian law, and access challenges for the international community, for example in Syria and South Sudan;⁸ d) the changing composition of the donor community;⁹ and finally e) the development of new governance frameworks that will guide humanitarian assistance and cooperation over the next 15 years.

These developments all have implications for HIEP. The increasing gap between resources and needs is building interest in innovation in the sector as organisations seek ways to meet the growing humanitarian needs. The crises in the Middle East, West Africa, and Nepal presented opportunities to trial and scale up new ways of working, such as using new technology for communication on healthcare, and for e-transfers of cash. The recent crises have also highlighted the inter-linkage of international and domestic concerns with, for example, responses to the conflict and refugee crisis in the Middle East and the Ebola crisis in West Africa, both having implications for action in the UK. Heightened insecurity and access challenges, seen for example in Syria, South Sudan, Afghanistan and Pakistan, have presented dangerous conditions not only for the delivery of humanitarian assistance but also for researchers, to which HIEP projects have had to respond.

The changing composition of the donor community has implications for HIEP, given its aim to increase funding frameworks and finance instruments dedicated to innovation and evidence. Saudi Arabia and the United Arab Emirates (UAE) are now the 6th and 15th largest government donors respectively, and the private sector is a growing partner in humanitarian practice, seen for example in its cooperation with UN and other agencies in the shelter and telecommunications sectors in disaster response.

New governance frameworks agreed in 2015 will influence the evidence demands in the future. New frameworks emphasise the interlinkage of responses to development challenges, climate change and humanitarian crises, and the need for disaster risk management as opposed to disaster response management. They also place greater emphasis on equity and inclusion than their predecessors. This is seen in the Sustainable Development Goals 2030 and The Sendai Framework to 2030 for Disaster Risk Reduction, both agreed in 2015. An important process taking place during this phase of HIEP has been the consultation process for the first World Humanitarian Summit due to take place in 2016. The WHS consultation had a focus on effectiveness, managing risk, innovation and the needs of people in conflict. In relation to gender and social inclusion issues, there has been some progress in follow-up to the UK hosted global summit in 2014 to tackle sexual violence against women in conflict, with a new centre opened at the London School of Economics dedicated to the subject. Furthermore, the application of the new UK law (2014) that puts gender equality at the heart of international development received a broadly positive review in the assessment by The Great Initiative and Plan UK in 2015.¹⁰

At the national level, despite the protected aid budget, the UK Department for International Development (DFID), like other government departments, has been under financial pressure to reduce administrative costs and demonstrate value for money. The election in 2015 and subsequent development of a new aid strategy as well as Spending and Research reviews caused uncertainty in HIEP's operating environment regarding the future priorities for DFID and thus HIEP. The new strategy emphasises the inter-linkage of humanitarian crises, poverty and climate change, and commitment to build resilience to address these, and reiterates the UK ambition to maintain a leading role in rapid humanitarian response.

⁸ <http://aidworkerssecurity.org>

⁹ <http://www.globalhumanitarianassistance.org/report/gha-report-2015>

¹⁰ One Year down the Road: The Impact of International Development (Gender Equality) Act 2014.

Humanitarian research itself has grown in scale illustrated by the establishment and growth of research initiatives in operational agencies such as International Rescue Committee (IRC) and Save the Children, as well as the establishment of a biannual World Humanitarian Studies Conference. There has also been an increase in innovation initiatives (described in Section 6).

The formative evaluation found that external stakeholders considered the scale of DFID's investment in humanitarian innovation and evidence to be significant. While relatively small in the scale of the overall DFID aid budget, it is the largest cross-sector humanitarian research fund that the evaluation could identify. The evaluation considers the relevance and contribution of HIEP in the light of this context.

1.5 Timing of the summative evaluation phase

This summative evaluation is taking place in Year 3 of the programme. It is the third of four phases of the evaluation:

- The inception phase was completed over summer 2013;
- Formative phase: January to May 2014;
- Summative phase: short-term outcomes and learning from September 2015 to February 2016;
- Summative phase: intermediate outcomes and learning from October 2017 to May 2018.

This phase of the evaluation was timed to coincide with the completion of projects which began early in HIEP's programme cycle and closed in 2015, such as Case Studies 1 and 7. It is also a point when many of the other HIEP projects are entering their final year of contracts with partners. This timing should enable emerging findings to feed into planning for any future stages at the project level. In addition, DFID is considering a second phase of HIEP, so this phase of the evaluation has been timed to feed into that design. Finally, the evaluation was sequenced with DFID's internal annual review (AR) process to be complementary.

The evaluation was undertaken by a team from Itad. The team included lead evaluators for each case study. The full team and their roles are detailed below:

- Teresa Hanley - team leader, lead on Case Studies 4 and 6, lead on Outcome 2
- Anna Paterson - lead on Case Study 3 and Management Review
- David Fleming – lead on Case Studies 1 and 7
- Tasneem Mowjee – lead on Case Study 2, lead on Outcome 1
- Isabel Vogel – lead on Case Studies 5 and 8, lead on Outcome 3
- Valsa Shah – specialist adviser on Value for Money
- Emily Richardson – lead on user-focused output review
- MaryAnn Brocklesby – specialist adviser on gender
- Roger Few – quality assurance adviser (external)¹¹

¹¹ In this phase of the evaluation Roger Few quality assured the methodology and evaluation tools to avoid any conflict of interest. Findings and report were quality assured by Itad processes.

- Julian Barr – quality assurance adviser (internal Itad)
- Rob Lloyd – project manager and quality assurance (internal Itad)

1.6 Update on recommendations from formative phase

The recommendations from the formative phase undertaken in 2014 are below, with progress to data at the beginning of the summative evaluation phase (September 2015). The recommendations were accepted by the HIEP Management Committee though the HIEP Secretariat has reported that capacity constraints in 2015 reduced the team's ability to take forward all recommendations.

Recommendation	Progress
<p><u>Recommendation 1</u> The HIEP Secretariat and Management Committee should clarify the level of HIEP's ambition in relation to transformation and change in the sector (i.e. at the outcome level) so plans, strategies and resourcing can be developed accordingly.</p>	<ul style="list-style-type: none"> • Influencing strategy drafted - not complete and revision postponed until after the spending review. The draft did not identify priority areas for where HIEP aims to achieve or contribute to change in organisational, geographic or sectoral/thematic areas which is likely to be necessary to guide collective efforts of the Virtual Team.
<p><u>Recommendation 2:</u> Before the end of 2014, the Management Committee should review the overall balance of how resources are being allocated to and within HIEP, and make adjustments taking into account decisions made in relation to Recommendation 1 and the level of ambition of HIEP.</p>	<ul style="list-style-type: none"> • Head of the HIEP increased to full time role. • No change in resourcing made in response to draft influencing strategy.
<p><u>Recommendation 3:</u> By December 2014, the HIEP Secretariat should develop a plan and identify the needed resources to support the development of the strategic role of the virtual team.</p>	<ul style="list-style-type: none"> • Secretariat report visibility of HIEP increased through insight notices, engagement of virtual team and focus on the HIEP governance model and design in RED meetings. • Some agendas for virtual team meetings introduced but no minutes kept. • No plan developed to support the development for a strategic role for the Virtual Team.
<p><u>Recommendation 4:</u> By December 2014, the Secretariat and Management Committee should put in place systems to monitor HIEP more effectively.</p>	<ul style="list-style-type: none"> • Logframe populated and finalised • Stakeholder diaries piloted but agreed with evaluation team not to take forward. • Tracking of VFM indicators begun but not finalised. • No plans in place to track result's data beyond partner contracts.
<p><u>Recommendation 5:</u> By the first quarter of 2015, the HIEP Secretariat should develop a strategy</p>	<ul style="list-style-type: none"> • HIEP Secretariat report continued engagement with country stakeholders through relevant projects and East Africa

for HIEP engagement with regional and country stakeholders.	Research Hub but no regional or country strategy developed.
<p><u>Recommendation 6:</u> By the end of 2014 the Secretariat should develop a plan to strengthen HIEP's approach to implementing its commitments to gender and social inclusion:</p>	<ul style="list-style-type: none"> • Not done
<p><u>Recommendation 7:</u> By the end of the first quarter 2015, the HIEP Secretariat should develop a strategy to ensure learning from HIEP is captured and shared across HIEP virtual team, partners and externally in key subjects.</p>	<ul style="list-style-type: none"> • Some discussion in the VT and with advisers but a plan not formalised.

2. Methodology

2.1 Overview

The HIEP evaluation is theory-based. It uses the HIEP Theory of Change (ToC) as the framework to assess progress and implementation strategies. The evaluation is organised around the four evaluation questions agreed at inception:

- **Relevance:** How well has HIEP identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?
- **Effectiveness:** Which approaches have been more effective in enabling HIEP to ensure the creation, support and application of high quality and relevant humanitarian evidence?
- **Value for Money:** Which management and implementation approaches have enabled HIEP to deliver better value for money (VfM)?
- **Impact:** What contributions has HIEP made to building and sustaining evidence-aware policy and practice by humanitarian organisations?

This formative phase of the evaluation provided a means to test and refine aspects of the evaluation framework and the theory of change. The ToC for HIEP remained largely unchanged. The evaluation matrix has been refined since the inception phase. It now brings together the judgement criteria for each evaluation question, analytical methods and sources of information into one framework (Annex 3). Judgement criteria and indicators for each evaluation question draw on the ToC to ensure coherence between these two frameworks. The evaluation matrix in Annex 3 details the full list of judgement criteria and indicators used.

At the heart of the evaluation is a case study approach. The following section describes the case study methodology in more detail, and this is followed with sections describing the methodology used to assess the HIEP management model, value for money, HIEP's approach to gender and social inclusion, and its overall impact.

2.2 Case study approach

2.2.1 The case studies

Eight HIEP projects were identified at the inception phase as case studies.¹² The formative phase tested the appropriateness and feasibility of this selection. The case studies in this phase focused particularly on relevance, effectiveness and, where appropriate, impact questions. Value for money of HIEP was considered through a separate process detailed later in Section 2.3.2 and it included a focus on a sample of five case studies. The case studies are listed below.

¹² See methodology section of the formative report and Inception report for details of the selection criteria.

TABLE 1: HIEP EVALUATION CASE STUDY PROJECTS ¹³

Case Study number	Project	Partner	Budget UK £	Dates	VfM focus
CS1	Improving the Application of Risk Modelling for Disaster Management	GFDRR	1.6M	8/13-8/15	Yes
CS2	Expanding the use of cash transfers in emergency response. A set of projects including: <ul style="list-style-type: none"> • Research on Food Assistance for Nutritional Impact (REFANI); • A study on shock-responsive social protection systems; • Fit for the Future (FfF) study and E-transfer guidelines for NGOs, and operational standards for the secure use of personal data in cash and e-transfer programmes 	Consortium OPM CaLP	5.5M Total 3.28M 998,500 95,000	3/14-5/17 11/14-11/15 3/15-3/17 1/13-4/14	No
CS3	Research for health in humanitarian crises (R2HC)	Wellcome Trust	8.8M	6/13-12/16 ¹⁴	Yes
CS4	Humanitarian Evidence Synthesis and Communication ¹⁵	Oxfam and FIC	1M	6/13-6/16	No
CS5	Innovation: testing to proof of concept (Humanitarian Innovation Fund (HIF)) phases 1 and 2	ELRHA	11.4M	12/12-12/16	Yes
CS6	Secure Access in Volatile Environments (SAVE)	Humanitarian Outcomes	1.6M	9/13-6/16	Yes
CS7	Improving the Evidence Base on How to Work with National and Local Authorities to Improve Disaster Risk Management	IFRC and OPM	1.2M	3/14-9/15	Yes
CS8	Resilience Thematic Evaluation	Valid	2M	6/14-6/17	No

2.2.2 Case study process

Each evaluation case study lead undertook update meetings with DFID and partners in early 2015. Evaluation activities from September 2015 included:

- i. Start-up meeting with DFID lead advisers and partners and preparation e.g. finalisation of country selection for visits

¹³ Based on data submitted to HIEP management committee September 2015- see Annex 6

¹⁴ An extension for a new phase is currently under discussion.

¹⁵ HESC has been launched by the implementing partners as the Humanitarian Evidence Programme (HEP) and so may be known externally by this name. In this report the original name agreed internally for DFID allocation of funds is used to avoid confusion with the wider programme, HIEP.

- ii. Data collection and analysis through document review and interviews (approximately 20–25 per case study) of internal and external stakeholders including: DFID lead adviser, partner project manager(s), selected grantee holders for Funds (CS3 R2HC and CS5 HIF), research/innovation teams, DFID humanitarian advisers and external stakeholders relevant to the sector, and potential users of evidence
- iii. Case study analysis including analysis against theory of change, identification of factors enabling and inhibiting success, and case study scoring against the evaluation questions
- iv. Production of a draft case study report shared with project partner and DFID lead adviser in December 2015 for feedback, and also peer review by an evaluation team member
- v. Finalisation of case study report.

2.2.3 Country visits

A key component of the summative evaluation was three country visits to allow more in-depth discussion with national stakeholders. Each country visit focused on one case study but was also used as an opportunity to explore programme-wide questions and/or a second project. Team members visited Pakistan (CS1 and CS7), Kenya (CS6 focus where Kenya is a base for Somalia-related research, CS5 and CS8), and Ethiopia (CS5 and CS8). These countries were selected in consultation with DFID and project partners based on consideration of a number of factors: first, they are relevant to more than one HIEP project and therefore key to HIEP; second, the projects were at a stage in their implementation where it was appropriate and not disruptive to host an evaluation visit; and third, sufficient stakeholders were available to meet in a relatively short period of time, usually four days. A fourth country visit to Niger or Pakistan had been planned but was not undertaken in response to partners' request because it could be disruptive to their research process at that stage (see CS2).

2.2.4 Data Analysis frameworks

The case studies used a number of frameworks to support analysis of data outlined below. Templates and tools to support analysis are attached in Annex 3.

i) Analysis of research output quality

The evaluation focused on the processes that each project had in place to assure quality at design, implementation and exit. Analysis also included review of selected outputs in more depth from a user focus (see later section 2.3.1).

ii) Contribution analysis

Where projects had progressed sufficiently for clear results to be identified, contribution analysis was undertaken. Contribution analysis was possible in three case studies (CS2, CS3 and CS5). The process included interviews with DFID personnel and key stakeholders (internal and external) relevant to the reported change and document review to assess:

- a) The validity of the reported change – has it happened?
- b) What did DFID/HIEP do that might have contributed to it?
- c) What other factors contributed to this change?
- d) Assessment of the strength of the evidence to demonstrate the reported change
- e) Assessment of the significance of HIEP's contribution.

For each of the three projects a contribution story was developed in line with a common template and consistent scoring system that took account of the strength of the evidence for the change that had occurred, the significance of the change, and HIEP's contribution to it.

iii) Analysis against the theory of change

Each case study was analysed against the HIEP theory of change.

iv) Case study scoring

Case studies were scored against each of the evaluation questions using the scoring system developed and trialled in the formative phase. This methodology facilitates comparison across the case studies and helps to identify patterns. It worked well in the formative phase and is summarised below.

Box 2: Scoring methodology to be used across the eight case studies

In order to provide a systematic way of making judgements across the case studies, supporting comparison between cases and revealing patterns, a scoring methodology was tested in the formative phase of the evaluation and was used to assess the strength of current plans and progress at project level in achieving relevance, VfM, effectiveness, and impact. For each case study the scoring follows the following four-step process:

- i) The evidence that had been collected against each of the evaluation questions will be synthesised and conclusions from the data developed.
- ii) The assessment will take account of the strength of the evidence supporting the conclusion. For example, a reported intention by a project team to develop strategies to address an area scores lower than a project that has a documented and resourced plan to do this.
- iii) A performance score will then be assigned for each of the evaluation criteria based on the progress that has been made to date, depth of the strategies that are in place, and the strength of the supporting evidence.

A four-point scoring scale will be used, as illustrated below:

High – There is strong evidence of progress to demonstrate relevance against all criteria

Medium – There is some evidence of progress to demonstrate relevance against three or more criteria

Low – There is some but limited evidence to demonstrate relevance

None – No strategy or evidence in place.

- iv) Scores will be reviewed by another case study lead member and adjustments made. The team leader will review the scores to ensure consistency across case studies.

2.3 Thematic analysis

2.3.1 User-focused output review

Crucial to the success of HIEP is the production of high quality and accessible evidence products that are relevant to users' operating environment. This first summative phase provided an opportunity to test a methodology for assessing outputs and their results. The user-focused review covered three key areas of quality and considered:

- The level of dissemination and circulation of the outputs
- The extent of contextualisation of outputs for users e.g. language, country, type of disaster
- The perceived utility of the evidence among key users.

Other aspects of quality including relevance of the methodology are considered in other parts of the evaluation. In the user-focused review, key Informant Interviews (KIIs) were conducted with the key DFID and/or partners' staff and then a snowball technique was used to identify potential users of the output. We aimed to conduct 3–5 interviews per output. A full list of HIEP outputs is attached in Annex 7. This review initially focused on HIEP outputs targeted at humanitarian actors for operational use. After discussion with DFID some additional outputs less focused on operational agencies, but which have been thought to be widely circulated, were included (e.g. literature reviews). This list of outputs reviewed included:

1. DFID Humanitarian Guidance Note: Cash Transfer Programming (2013) (HIEP CS2);¹⁶
2. DFID Humanitarian Guidance Note: Violence Against Women and Girls (VAWG) in Emergencies and Humanitarian Settings (2013) (HIEP programme level);¹⁷
3. Cash Learning Partnership (CaLP) E-Transfers in Emergencies: Implementation Support Guidelines (2014) (HIEP CS2);
4. Research on Food Assistance for Nutritional Impact (REFANI) Literature Review (2015) (HIEP CS2);
5. Schrecker, L. and Harmer, A. (2013) Delivering Aid in Highly Insecure Environments: a Critical Review of the Literature, Humanitarian Outcomes (HIEP CS6);
6. World Disaster Report (2015): Focus on Local Actors, the Key to Humanitarian Effectiveness, IFRC. (CS7);
7. An Evidence Review of Research on Health Interventions in Humanitarian Crises, London School of Hygiene and Tropical Medicine (2013) (CS3).

2.3.2 Value for Money

The evaluation is using the 4E framework (economy, efficiency, effectiveness, equity) to evaluate value for money (VfM). Five case studies were selected for project level VfM analysis: CS1, CS3, CS5, CS6, and CS7. The projects represent a range of ways of working and include the two large Funds (R2HC and HIF) supported by HIEP, one project with a key capacity building element (CS7), one that is focused on one country (CS1), and a multi-country research project working in some of the most inaccessible humanitarian environments (CS6).

Key elements of the approach are outlined below.

- In terms of **economy**, we analysed the programme and project budgets and contractual arrangements at the project level. The programme budget has been compared with the costs of an alternative DFID research funding model.
- For **efficiency** there has been a strong focus on the management arrangements. There has also been analysis on whether the overall programme and individual projects are running 'on time and on budget'.

¹⁶ It is noted that the DFID staff we spoke to did not perceive this document to be a HIEP output -input had been technical not financial.

¹⁷ It is noted that the DFID staff we spoke to did not perceive this document to be a HIEP output -input had been technical not financial

- In terms of **effectiveness**, the evaluation considered systems and processes to manage risk, also for learning and resourcing of the HIEP management structure. Other VfM comments e.g. relating to partnerships and project outputs are based on wider team findings on effectiveness to date (most projects are still in the implementation phase), and a consideration of resource allocation to these.
- In relation to **equity** the VfM approach considered the extent to which this was considered in HIEP decision making at programme level and the approach undertaken for it in the focus case studies. Equity is considered in more detail in the gender and social inclusion section of the evaluation.

2.3.3 Management review

This phase of the evaluation aims to provide analysis of how HIEP's management structures are functioning. This considers the benefits and challenges of the integrated, cross-departmental structure; engagement with DFID at country, regional and cadre levels; and the extent to which HIEP's collective capacity has been maximised through the HIEP Virtual Team (VT) and the Secretariat. The main data collection tools for the management review were: document review, interviews and a focus group discussion with the HIEP Virtual Team, as well as drawing on the evaluation case studies which contained insights into management issues.

2.3.4 Gender and Social Inclusion (GASI)

The focus of the GASI assessment is on the extent to which HIEP and its projects have developed strategies and processes to address gender and social inclusion issues systematically. It did this through auditing the HIEP strategies and processes to assess the extent to which HIEP:

- Incorporates a gendered understanding of the needs and interests of targeted social groups, including marginalised and vulnerable groups, in the design and implementation of the research;
- Ensures the intended/actual research outputs captured and reported on the differentiated interests of women, men and marginalised groups;
- Promotes the GASI dimensions of their partnerships and networks and, where appropriate, the gendered dimensions of capacity building Southern actors.

The GASI audit is an adapted gender audit¹⁸ and has been designed to evaluate the implementation of GASI issues into the policies, strategies, processes, and outputs of HIEP. The formative phase enabled the refinement of the audit matrix to be appropriate to HIEP through an initial GASI assessment at that phase of case study and programme design and progress.

2.3.5 Impact

The evaluation considers impact at the outcome level of the HIEP theory of change. A lead team member undertook the following process to assess progress towards each of the three HIEP outcomes.

¹⁸ Gender Audit is a generic term for a process used to identify organisational as well as programmatic strengths and challenges in integrating gender in an organisation's systems and operations, and in programmes and projects. There is no standardised methodology or tools for a gender audit, although approaches and processes used to conduct an audit are broadly similar. See Moser (2005).

- Step 1 - Harvested data from case studies
- Step 2 - Reviewed DFID own monitoring and reported results e.g. logframe data
- Step 3 - Analysed DFID strategy to achieve the outcome
- Step 4 - Environment scanning – Undertook interviews with external and, where relevant, internal stakeholders (5–7 for each outcome) to assess key trends and any new upcoming opportunities and challenges relevant to HIEP’s outcomes and strategies
- Step 5 - Identified key results and assessed the significance of DFID’s contribution to results using contribution analysis in line with the process described earlier for case study results

Two sub-team meetings focused on results at outcome level: firstly, to gather initial findings and finalise the methodological approach; secondly, there was also a larger team meeting in December to discuss overall findings and the inter-relationship of outcome findings.

2.4 Selection of evaluation interviewees

Interviews with internal and external stakeholders formed a major part of data gathering for HIEP both for case studies and also programme level thematic analysis. The majority of interviewees external to DFID were people who have had some contact with HIEP, be that as a project partner, advisory group member, or through involvement as participants in HIEP workshops or consultation processes. A smaller number were interviewees who would be targets for HIEP evidence and products with no known direct involvement with HIEP during the programme so far. Interviewees for each case study included people able to provide methodological, operational, and national as well as international perspectives. This range was important given the programme’s desire to produce robust evidence and also to achieve change in operational policy and practice.

External stakeholders were identified through initial consultation with DFID and project partners; through review of HIEP documentation e.g. attendance lists for workshops and consultations; and then through a snowball effect based on recommendations and evaluation team knowledge of the sector. However, the emphasis on people with knowledge of HIEP does mean there may be some positive bias in evaluation findings; other intended users of project products who have not been involved in these earlier stages of the project may be less positive or likely to use these products. The next phase envisages a broader range of interviewees including national level government and other stakeholders.

2.5 Evaluation management and quality assurance (QA)

The evaluation methodology was quality assured externally by the evaluation QA adviser Roger Few and by Itad internal QA processes, and some adaptations were made, for example to scoring systems, based on this feedback. The final methodology was signed off by the DFID evaluation adviser following consultation with the evaluation steering committee in August 2015.

The evaluation team worked together closely to identify common formats and approaches for case studies and to agree templates and tools in the case of thematic approaches. The evaluation team leader was in regular contact with all team members and reviewed draft reports from case study and thematic leads during the course of the evaluation. Draft case study narrative reports were reviewed by DFID lead advisers and project partners as well as by an evaluation team member peer reviewer and the team leader, who also additionally reviewed case study scorings and analysis (e.g. against

the ToC). Changes were made to case study scorings in two cases (CS5, CS6) based on (a) additional information provided by partners/DFID in response to the draft narrative reports or (b) feedback by team members as peer review and to ensure consistency in approaches to scoring.

Evaluation findings and conclusions are not based on any single source of information but rather are based on both documentary and interview evidence from two or more sources. The case studies have been fact-checked by DFID and partners as well as peer reviewed.

2.6 Constraints

The evaluation faced a number of constraints. Regular teleconferences between the evaluation team leader and the DFID evaluation adviser and HIEP Secretariat were very helpful in moving these forward. Five key issues are highlighted below.

a) Absence of influencing strategy defining priorities for change

DFID had agreed to produce a finalised HIEP influencing strategy by September 2015, which the evaluation team planned to use to identify evaluation focus areas, but only a draft influencing strategy exists for HIEP. The existing draft HIEP strategy and many of the project research uptake strategies are very broad, usually without any named priorities at country, organisation or sectoral levels, making targeting of evaluation data gathering a challenge (discussed further in effectiveness and impact sections).

b) Data and documentation availability

Some key documentation requested by the evaluation team and earlier agreed with HIEP Secretariat in August 2015 was not available, or was provided very late. In addition to the HIEP influencing strategy detailed above, missing documentation at the start-up of the evaluation included:

- the HIEP logframe with data updated for 2015,
- project and programme budgets, which were only made available on a staggered basis over October and November,
- some monitoring data for individual projects, notably CS1, which had reported significant results from monitoring in its reports earlier in 2015,
- Virtual Team meeting attendance, agendas or minutes that had not been kept despite being requested by the evaluation in the formative phase recommendations.

A data collection tool was developed by the evaluation team to track stakeholder engagement by the DFID teams and trialled but was not successful. Advisers reported difficulty in knowing which of their many contacts contribute to the HIEP outcomes (perhaps exacerbated by the lack of influencing priorities). The evaluation worked around the gaps and late provision of data but it caused disruption and inefficient use of time.

c) Data on dissemination of outputs

The user-focused review faced a number of challenges:

- i) Data is not available from DFID on downloads of items on R4D.
- ii) Some outputs on the HIEP list of outputs were not perceived by others as being from HIEP, notably the guidance notes on cash and violence against women which had

- received technical rather than financial input from HIEP. That said, regardless of ownership, no one could be found in DFID who is tracking use of these outputs.
- iii) When there is no explicit requirement to track output dissemination and uptake, most partners and DFID lead advisers do not keep information on this e.g. some of the literature reviews.
 - iv) It proved extremely time consuming to locate users of outputs, hampered further by turnover. Unfortunately, despite many efforts at contact we were unable to speak with anyone regarding Output 6 (CS7 – World Disasters Review), so it is not included in this review.
 - v) Since a snowball technique was used to select interviewees, it means that the sample is likely to comprise people who may share certain characteristics, for example those based in the global North who work closely with DFID and know each other.
 - vi) It should be noted that this user output review concentrates on individual outputs, so contextualisation of the output in the project setting is limited.

d) Risk of consultation fatigue with external stakeholders

By design, many of the HIEP projects have extensive consultation processes as part of their implementation process. The evaluation also seeks contact with these same stakeholders and so needed to work carefully to avoid impinging on project relationships. The evaluation occasionally faced stakeholder “consultation fatigue” and reluctance to give yet more feedback. However, the next phase of the evaluation anticipates focusing on a wider range of stakeholders at national and international level beyond those who have had some contact with HIEP.

e) Accessing the HIEP Virtual Team beyond the case study leads

The evaluation had excellent access to most DFID staff directly involved in HIEP overall management and case studies. However, the evaluation has found it difficult to engage with the broader Virtual Team (VT). In the formative phase, the team participated in a VT meeting and requested a survey to be completed that received a very disappointing level of response, and little data was received. This time the evaluation held focus group discussions with VT members in one of the regular meetings. Overall, attendance at this focus group discussion was disappointing. From the 30 HIEP projects that make up HIEP, only four projects’ lead advisers were represented in the meeting and only two of these were involved in HIEP projects which were not case study projects.

f) Stage of progress

HIEP projects are at different stages. A number of the HIEP projects, including nearly all of those identified as case studies, are still in implementation phase. Thus, at this point, it is too early to be able to fully identify impact which will be the focus of the next and final summative evaluation phase.

3. Relevance

Evaluation question 1. How well has HIEP identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

Key findings: *HIEP continues to respond to priorities of the humanitarian community. It addresses questions where there is a lack of systematic and robust evidence. Of particular note is HIEP's responsiveness to new needs and opportunities presented by recent humanitarian crises such as the West African Ebola crisis and 2015 earthquake in Nepal. Consultation on research focus areas and ongoing engagement with the international community is strong and has been aided by operational partners' roles in projects. Projects have dealt well with the challenges of working in the humanitarian context, which have demanded a flexible approach. The overall programme portfolio and the research methodologies used by individual projects are appropriate to produce robust and relevant findings. An area to strengthen is to have more consistent attention to gender and social inclusion in HIEP projects' research methodologies.*

3.1 Introduction

The summative evaluation considers the relevance of the questions asked in HIEP research and projects. Relevance is assessed in relation to the judgement criteria listed below.¹⁹

Judgement criteria

- Extent to which HIEP programme and project responded to needs identified in HERR and HIES and other emerging needs and opportunities to invest in humanitarian evidence and innovation
- Extent to which the programme and project design is appropriate to address needs and opportunities
- Extent to which HIEP harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

The summative phase builds on the findings of the formative phase. The formative evaluation phase found that there has been a robust process to identify and develop HIEP projects in their initial stages (usually at that point up to agreement of a project by the HIEP Management Committee). It found that HIEP focus areas responded to key problems identified in the HERR and HIES. There was some evidence of HIEP harmonising with other relevant institutional and sectoral initiatives.

The section below begins with a summary of case study findings on the relevance of projects. It goes on to discuss findings in relation to the judgement criteria which focused on responsiveness of HIEP projects to developments in the humanitarian context; appropriateness of project design and processes to produce robust evidence and operate in humanitarian contexts; and linkages of HIEP to humanitarian actors and initiatives across the sector. It concludes with some key learning on factors enabling and inhibiting HIEP's relevance and overall conclusion.

¹⁹ The evaluation matrix in annex 3 has details of indicators which guide assessment and use of the judgement criteria.

3.2 Findings

3.2.1 Summary of case study findings

Table 2 below summarises the findings from each of the eight case studies on progress that has been made, and the plans that are in place for achieving relevance. In each case study, the evidence collected was reviewed and an overall performance score for 'relevance' was assigned.

Box 2 in section 2.2.4 above for more details on the scoring methodology). Final scores are listed in Table 2 below. Further detail on each of the case studies can be found in the individual case reports (Annex 2).

TABLE 2: SUMMARY OF CASE STUDY FINDINGS: RELEVANCE

Case study	Score*	Key findings from the case studies on relevance
CS1. Improving the Application of Risk Modelling for Disaster Management	Medium	The project addresses a critical need for investment in disaster risk information and innovation in Pakistan. Its evolutionary approach to structured consultation with local actors has enabled the establishment of a locally owned risk assessment process as well as strengthened capacity of technical agencies. Weaknesses include lack of attention to gender; limited documentation, which constrains replication, and lack of linkages to other donor initiatives in Pakistan outside of the World Bank.
CS2. Expanding the use of cash transfers in emergency response	Medium	There is strong external interest in the research questions and likely to be new knowledge produced by this cluster of HIEP projects including the REFANI study on cash responses and nutrition, and also one on shock-responsive social protection (SRSP) systems. The range of stakeholders involved have good potential to link to country-level and global initiatives. CaLP outputs for e-transfers have been customised for different audiences. There are some concerns about generalisability of REFANI findings and currently no active linking to other DFID cash-related projects.
CS3. Research for Health in Humanitarian Crises (R2HC)	High	R2HC is squarely focused on the health evidence problems identified in the evidence reviews that map onto the HIES. R2HC has responded to unexpected events, notably to acute phase crises and to the Ebola emergency. The team demonstrate willingness to reflect and fine-tune Fund processes based on experience. There are good country and international level connections by partners.
CS4. Humanitarian Evidence Synthesis and Communication (HESC)	High	HESC has worked well to consult widely and ensure it focuses on questions relevant to the sector and on areas that have not previously been addressed. It is developing a methodology that combines rigour and pragmatism well, which is an appropriate approach to produce evidence syntheses in the sector. It has good links with relevant thematic sectoral groups and networks as well as the evidence sector.
CS5. Innovation: testing to proof of concept (Humanitarian Innovation Fund (HIF))	High	HIF has a strong international profile as a respected and credible funder but lower profile at regional level. HIF's independence enables it to fund smaller, riskier cutting-edge projects that are genuinely novel, in situations where a small amount of funding can make a difference. Progress is being made in capturing lessons for sector learning on innovation, but more momentum is needed. There is improved HIF capacity for innovation management and enabling linkages to other innovation funders.

CS6. Secure Access in Volatile Environments (SAVE)	High	SAVE addresses relevant questions building a solid and systematic evidence base for findings. The design of the research is appropriate and its scope, which focuses on data collection in four highly insecure countries, is good. SAVE fits and links with other initiatives at international level and at national level to some extent. There is good consultation under way with decision makers and stakeholders regarding products.
CS7. Strategic research into National and Local Capacity Building (CB) for Disaster Risk Management (DRM)	High	This project has addressed issues highly relevant to the humanitarian sector and has made a significant contribution to strengthening the evidence base on CB for DRM, a need highlighted in recent frameworks for disaster management and risk to 2030. It has responded well to emerging opportunities, particularly to increase the potential for research uptake and to make linkages with initiatives such as the Disasters and Emergencies Preparedness Programme (DEPP). The project team has been flexible in the face of unplanned developments.
CS8. Resilience Thematic Evaluation	Medium	There is potential to generate new insights from the evaluation but with important limitations because the funding instrument is only relevant to DFID, although its parallel focus will produce findings on resilience which can have wider relevance. A flexible approach has helped the project adapt to constraints such as insecurity. Planning for transferability and application of findings is in place. Users have been involved in the design of the research. There is low awareness among target groups. There is no focus on gender and social inclusion.
*Explanation of scoring scale: ²⁰ High – There is strong evidence of progress to demonstrate relevance against all criteria; Medium – There is some evidence of progress to demonstrate relevance against two or more criteria; Low – There is some but limited evidence to demonstrate relevance; None – No strategy or evidence in place.		

3.2.2 HIEP responsiveness to emerging needs and opportunities

HIEP projects have made good use of inception phases to consult widely in the sector and identify issues of priority to the humanitarian community. Given the scope of the evidence gaps and HIEP's ability to address only some of these, it has been particularly important to consult with humanitarian operational organisations to identify priorities. Consultation processes have included surveys (e.g. CS4), workshops at country levels (e.g. CS4, CS6, CS7), key informant interviews (e.g. CS2, CS4), discussions in advisory groups made up of experts and key sectoral representatives (all projects except CS1), and consultation with key inter-agency groups such as clusters and inter-agency working groups (CS4, CS2, CS3, CS4, CS6). A number of projects, e.g. CS2, CS3 and CS6, have updated their initial literature reviews to ensure the continued relevance of their work and inclusion of new evidence.

New projects developed as part of HIEP since the formative evaluation are also based on broad consultation and provide overall balance to the HIEP portfolio. For example, projects on Education in Emergencies and the Moving Energy Initiative (MEI) address key problems currently faced in refugee contexts and, in the case of MEI, also an issue that impacts on the security of women and children. MEI broadens the HIEP innovation portfolio which had previously been curtailed when the

²⁰ Detailed explanation of the scoring system is in the methodology section in Annex 3.

proposed initiative with USAID “Taking innovations to scale” did not go ahead. MEI is also engaging with the private sector, which is increasingly important in humanitarian assistance. Another project focuses on disability by addressing issues of the vulnerability of particular groups, a key priority identified by HIEP. HIEP projects fit well within the new DFID aid strategy, and are in areas where DFID has expertise among its advisers.

There has continued to be more engagement with international stakeholders rather than domestic actors in humanitarian contexts in consultation processes. The country-level connections that have been made have often been with country-level representatives of international organisations rather than national agencies such as local NGOs, social enterprises, and private sector and government departments. One exception is CS1, which focused on supporting the production of evidence and change in one country, Pakistan. This project included a structured engagement and dialogue process between the Global Facility for Disaster Reduction and Recovery (GFDRR) and the Government of Pakistan, which was an essential step in building support for and participation in the project, and thus highlighting one of the benefits of a country-focused project.

The evaluation found that projects vary in the extent to which they are finding “new” knowledge. Some projects, notably ones supporting innovation, are producing new knowledge and ways of working, such as CS5 HIF, which is described by some as a “trailblazer”, as are some of the R2HC (CS3) projects - itself a new model of funding health research in humanitarian crises. Other projects are considered by external stakeholders to be valuable instead because they are providing a more systematic evidence base for trends and approaches considered by some implementing agencies to be already “known” in the field. For example, CS1 employed the previously used approach of the World Bank and applied it in Pakistan; some stakeholders viewed knowledge being produced by CS6 and CS7 to be known through experience at operational level but valued the production of a much more robust, rigorous evidence base. Two areas valued by external stakeholders are the focus on cost-effectiveness and also on new technologies that feature in CS2, CS8 and CS6 (monitoring and evaluation component).

Some HIEP projects are extremely timely given the sector’s current priorities. For instance, CS7 is well positioned to contribute to discussions on localising disaster management, which is a key focus in WHS consultations; and CS6 responds to the growing insecurity of humanitarian contexts and corresponding access challenges for humanitarian agencies. There has been a lot of discussion around shock-responsive social protection systems in the consultations for the WHS and in other fora, so a study on designing such systems (CS2) is also timely. However, there are exceptions. For example, the resilience evaluation, CS8, is in part addressing a question that to some extent has already been answered, at least in DFID. For example, its focus on multi-year funding for resilience is now widely agreed and applied in DFID and also of less relevance to other organisations that have their own funding structures. But CS8 does include other research questions that are more relevant, particularly its findings on resilience and community experiences of it.

A notable development in HIEP has been its responsiveness to new needs, particularly its response to the West Africa Ebola crisis. The development of an additional co-funded strand to the CS2 R2HC Fund allowed HIEP to support research in an unanticipated area at scale, which, as will be discussed later, was able to have some impact on operations. Furthermore, the inclusion of a rapid response fund with pre-agreed contracts in R2HC also enabled some agencies to undertake research in the acute phase of sudden onset disasters such as the Nepal earthquake. The HIEP project implemented by Office for the Coordination of Humanitarian Affairs (OCHA) to improve the quality of data used for decision making by the international humanitarian system (HDX) was also in action in the Ebola response.

The involvement of operational organisations as partners in HIEP projects has been an important element in ensuring HIEP projects address relevant questions. Operational organisations have drawn on their own experience and interest in ensuring work is relevant to their operations, for example in Save the Children which filters its submissions to HIF to be in line with the organisation's operational priorities, and used their networks to access key informants in the sector for consultation processes. For R2HC, grantees include some of the main operational INGOs in the health sector and they have drawn on their experience in the field to inform research questions. In CS4 grantees include operational organisations with excellent links to inter-agency sector fora, such as the Shelter Cluster and inter-agency working group on child protection.

3.2.3 Project design

HIEP projects are employing a range of research methodologies, all of which were found to be appropriate. These include cluster randomised control trials (CS2), systematic reviews (e.g. CS4, CS2), qualitative processes for data collection in multi-country projects (CS2, CS6, CS7), and evaluation including primary data collection at community level (CS8). Two projects are Funds (CS3 – R2HC, and CS5 – HIF) and support nearly 100 projects between them. The sample of methodologies reviewed was judged to be appropriate. Factors that have contributed to the strength of project design are the appropriate selection of countries for multi-country projects; robust quality assurance systems in place particularly through the use of advisory groups and external peer reviewers; and tools and close project management across countries to ensure consistency of data across countries. In addition, the scale of data collection and focus on primary data collection reaching communities not often accessed for research (e.g. CS6 and CS8 and some of the grantees under CS3) is a strength of HIEP.

HIEP projects have dealt well with the challenge of balancing an aim to produce robust evidence while coping with the challenges of humanitarian contexts. For example, the approach developed regarding systematic reviews in CS4 establishes a systematic and robust process to identify and assess evidence, but includes consideration of grey material which may be excluded from systematic reviews in development processes; CS6 allowed flexibility in country data collection processes within parameters managed by the core team overseeing all country programmes to ensure consistency across countries, but which also enabled in-country teams to use their experience and skills to adapt data collection to fit with local priorities and contexts; in CS2 REFANI adapted to the design constraint which conducts randomised controlled trials (RCTs) on pre-existing interventions (so not necessarily common across all focus countries) to ensure a high degree of consistency across countries but also relevance to country contexts.

Inception phases have been extremely important in refining project design. They highlighted a number of resource issues for partners with the existing budgets. When plans had to be adjusted to fit into existing budgets, in most cases the production of high quality research was prioritised at this stage over communication and products. It is notable that the one case study that did not have an inception phase, CS1, had design problems in ensuring its relevance to other countries. Implications of communication budgets for project and overall HIEP effectiveness are discussed in more detail later.

In response to the constraints of humanitarian contexts, projects have demonstrated both flexibility and a learning approach. Constraints have included coping with the quality of existing data. For example, in CS4 grantees for systematic reviews reported that there are gaps in the existing research in terms of disaggregated data; and in CS7 the lack of access to financial data outside of IFRC limited the project to largely qualitative processes. Insecurity has been a challenge,

for instance to access insecure communities in Somalia where the CS6 research team made good use of diaspora networks to identify interviewees and build trust with communities in highly insecure locations. Other projects, such as CS7 and CS8, had to change focus countries in response to heightened insecurity or other developments such as Ebola. A willingness to take risks was notable, for example in HIF's support for small, possibly high risk projects. The two funds supported by HIEP, i.e. CS2 R2HC and CS5 HIF, which have a phased programme of grant allocations, have enabled the project teams to apply their growing understanding of needs in future rounds of grants, which they have both done well. An example is the HIF WASH review which resulted in adaptations to the model to allow for-profit and social enterprise organisations to participate and this, in turn, increased the potential for Southern-based organisations.

A key challenge facing a number of projects relates to the different timescales of academic and humanitarian processes. To meet the high standards of research emphasised in HIEP takes time and requires systematic processes of data collection but also of analysis and peer review of findings. This is time consuming. Projects faced a tension in this respect, with operational project partners and other stakeholders keen for findings that can meet current operational demands; CS2 and CS6, for example, heard this from stakeholders and operational partners. In addition, the HIEP design is based on building a receptive audience for findings through ongoing engagement and consultation, which is a challenge, particularly at country level where international humanitarian organisations often have high levels of turnover, sometimes as frequent as every three months.

A key weakness in HIEP has been the inconsistent approach to considering gender and social inclusion issues compounded by a lack of direction from DFID on this issue. This is discussed in more detail in Section 8 but it should be noted that, given the importance of gender differences in vulnerability in humanitarian crises and the need to take these into account in responses, this is a serious deficiency. That said, a number of projects, notably CS4, CS6 and some CS3 grantees, have built in good approaches to consider gender, but also faced constraints to implement these due to the lack of experienced national female researchers.

A concern regarding some projects' design is transferability of findings. In CS1 the lack of systematic monitoring means that there is not robust evidence to support communication and application in other countries. The CS8 project team is still developing a tool to support synthesis across its focus countries and in CS5 HIF a number of synthesis products with learning across projects are planned but not available yet. It was too early to tell whether the findings from the REFANI project (CS2) will be generalisable. In CS3 R2HC grantees working around common subjects have only recently begun to meet (in this case mental health issues and psychosocial intervention issues).

3.2.4 Harmonisation with other relevant institutional, sectoral and country-based initiatives and opportunities

The evaluation found most case study projects are well connected to initiatives and opportunities within their relevant sectors particularly at the international level. Examples include CS2 where some of the projects are coordinating closely with UNICEF, World Bank and European Commission Humanitarian Aid and Civil Protection Department (ECHO), also working on cash, nutrition and social protection initiatives; CS3 has a range of key health organisation representatives on its advisory group as well as key operational organisations as partners; CS4 has engaged with the sector through the UN-led clusters and inter-agency working groups on relevant issues; CS5 is well connected to the innovation community particularly through WHS processes; CS6 has links with a wide range of organisations including the inter-agency working group on humanitarian principles; CS7 made most

links in the research uptake stage through events in London, Geneva and Washington DC, and CS8's partner is well networked with key evidence and humanitarian organisations.

At country and regional level the picture is patchier. While some projects, particularly those with a multi-country methodology undertaking research in selected countries (CS2, CS6, CS7) tend to be relatively well connected to the key stakeholders in the focus countries through in-country partners, workshops and other processes to engage the country stakeholders, the evaluation found other projects had fewer regional and country links. Even where there was a country focus, as in CS1 which works only in Pakistan, while there were good links made within the Government of Pakistan across a range of departments, there was much more limited connectivity to other donor initiatives working on risk in Pakistan. There is potential for more connectivity by creating links with regional and country-level initiatives, for example local innovation initiatives such as the iHub in Kenya, which is relevant to CS5 HIF. The absence of long-term in-country structures for some projects, such as in CS6 and CS8 where the core research teams are based in Europe or the US, may also reduce their ability to respond to national opportunities for research uptake.

DFID lead advisers for HIEP projects are well networked with the relevant sectoral counterparts and the HIEP Secretariat is well connected with the international humanitarian and evidence community. In this phase of the programme there has been a particular focus by the Secretariat on processes around the World Humanitarian Summit, a key and relevant process for the sector given its scale and potential influence.

Links between HIEP and DFID humanitarian advisers, particularly those at country level and those not directly involved in the Virtual Team, are much weaker. The evaluation country visits found HIEP projects are not that well known by DFID humanitarian advisers at country level or indeed in London when advisers are not directly connected to them; this is despite some efforts by HIEP to share some project findings at the cadre annual conference.

Furthermore, project partners are not aware of other HIEP projects. This heightens risks of overlaps, for example in processes to identify existing evidence gaps, and reduces the potential to maximise synergies, for example where there are common stakeholders. More sharing of information within the HIEP network, including DFID humanitarian and other relevant sectoral advisers as well as HIEP partners on the existing portfolio, would support relevant linkages to be made. This is discussed further in the evaluation report effectiveness section.

3.3 Ensuring relevance

3.3.1 Factors enabling relevance

Key activities in HIEP have supported the programme's continued relevance. These include the following:

- In early stages of projects, wide consultation and review of evidence gaps and operational priorities for evidence have been key. Proactive HIEP partners, particularly operational agencies well-networked and interested in making connections in their operational areas, have been crucial to this.
- During implementation a commitment to flexibility in dealing with the challenges of humanitarian contexts and responsiveness to new opportunities and needs, for example in response to Ebola, have been important.

- Strong quality assurance processes have ensured good design is followed through in implementation. Key measures have included good use of peer review and advisory groups who have members with relevant expertise, consultation with potential end users of research, a commitment to produce a range of outputs, and close management of research by partners' project managers. DFID's selection of appropriately skilled and networked partners, and in turn the partners' appointment of research teams with high levels of relevant experience and skills, have provided the foundation for quality projects. HIEP projects are in areas that fit within DFID humanitarian and policy priorities and areas of expertise, which is important so DFID can provide support to projects but also means they are relevant to DFID's own agenda.
- Timeliness of specific project areas of enquiry with high levels of interest in the humanitarian community in the areas being researched supports relevance and future use of findings.

3.3.2 Challenges and factors inhibiting relevance

HIEP faces a number of key challenges to ensure continued relevance of HIEP at programme and project levels including the following:

- Inconsistent approaches to gender and social inclusion across projects may reduce the quality of findings.
- Balancing the demands of rigour in data collection and analysis with humanitarian operational needs for speedy information to inform specific decisions is an ongoing conflict to manage.
- Sustaining a receptive context for research findings is an issue when there are high levels of staff turnover in humanitarian contexts in DFID, partners and key audiences. Interest and commitment to HIEP projects and the research findings has to be continually renewed.
- Limited links with relevant regional and country-level initiatives reduced their input to identifying research priorities and so, at least, potentially their perception of the relevance of projects to their priorities.
- Lack of connectedness between HIEP projects limits the potential to take advantage of possible synergies (this is expanded later).

3.4 Conclusions

HIEP is addressing questions where there is a lack of systematic, robust evidence and that are prioritised by the humanitarian community. The overall programme mix, design and methodologies for specific projects are appropriate to produce robust and relevant findings. They have dealt well with the challenges of humanitarian contexts. The programme has consulted widely particularly with international actors and within sectors. The strong focus on relevance is a good basis from which to achieve a key output in the HIEP Theory of Change i.e. the production of high quality outputs which is crucial to ensure the evidence and innovation the programme produces will be used in the sector. Areas to improve in design relate to having more consistent approaches to consideration of gender and social inclusion and to increase the linkages to domestic actors at regional and country levels as well as between HIEP projects with common stakeholders and interests. These are also important to achieve the higher level aims of the theory of change.

4. Effectiveness

Evaluation question 2: Which approaches have been more effective in enabling HIEP to ensure the creation, support and application of high quality and relevant humanitarian evidence and innovation?

Key findings: HIEP is on track to produce high quality evidence and innovation products. Already a number of outputs have been produced and are being used in the sector though projects have also faced challenges to convert their robust evidence into changed organisational behaviour. HIEP is supporting some new and strong relationships between operational and academic organisations though these have taken time to establish. The individual projects are well networked with knowledge intermediary organisations linking evidence to the humanitarian sector and international operational agencies, which provides a strong basis to promote use of HIEP evidence, but networks remain less developed at country level. Given the importance of domestic actors in humanitarian response having networks to reach these local humanitarian actors is crucial. An important weakness is that HIEP project budgets for communication to support research uptake are often low and short-term. There is also limited capacity in the HIEP Secretariat to maximise the linkages and synergies across the portfolio of projects within HIEP e.g. to ensure that project teams and DFID humanitarian advisers are aware of the full HIEP portfolio and common stakeholders and interests across projects.

4.1 Introduction

This section considers the progress of HIEP in achieving effectiveness and assesses the strengths and challenges of current HIEP strategies. The programme has been judged against the following criteria:²¹

Judgement criteria

- Extent to which progress has been made towards achieving outputs
- Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes
- Extent to which the HIEP management model accelerates/inhibits the achievement of results²²
- Extent to which the programme maximises the potential impact of its component parts²³

The summative evaluation builds on the formative evaluation process. The formative phase found that there were solid plans to produce relevant evidence outputs and some key relationships are already established. Some projects had plans in place to support debate, networking and endorsement of HIEP-generated evidence, necessary to support HIEP outcomes. The inter-departmental design of HIEP was proving to be an effective structure to bring together expertise and perspectives from across DFID. The Virtual Team had the **potential** to increase the impact of HIEP through collective learning and joint activities. There were resourcing concerns to ensure HIEP potential is maximised. This phase of the evaluation has been able to assess project research uptake

²¹ Indicators for each judgement criteria can be found in the annexed evaluation matrix. These were applied as appropriate to each case study based on its stage of progress.

²² The following management section of the report covers this judgement criteria in more detail.

²³ The following management section of the report covers this judgement criteria in more detail.

plans and their implementation to date in more detail, with more emphasis in this stage on the national, as well as the international, level. It has also reviewed selected HIEP outputs and their uptake. The following section discusses findings on HIEP production of its planned outputs and progress towards supporting the uptake of new evidence.

4.2 Findings

4.2.1 Summary of case study findings

Table 3 below summarises the findings from each of the eight case studies on effectiveness. Further details are in the individual case reports (Annex 2).

TABLE 3: SUMMARY OF CASE STUDY FINDINGS: EFFECTIVENESS

Case study number and title	Score*	Key findings from the case studies on effectiveness
CS1. Improving the Application of Risk Modelling for Disaster Management	Medium	The project generated learning for physical and fiscal risk assessments in Pakistan. It developed government skills in risk assessments and strengthened relationships between government departments, the private sector, and academia in-country. Knowledge sharing focused within the World Bank as well as on some global processes. The main weaknesses are (a) poor implementation of the monitoring and evaluation (M&E) strategy needed to validate results, gather learning and support communication, and (b) lack of communication products and processes.
CS2. Expanding the use of cash transfers in emergency response	Medium	REFANI and shock-responsive social protection systems projects have quality assurance mechanisms and research uptake strategies in place. CaLP e-transfer guidelines and data privacy documents have been widely disseminated and used. Challenges have included cross-institutional relationships in the REFANI consortium and sample size error in the REFANI project (which should be balanced by findings from qualitative research). There is a lack of mechanisms to connect CS2 projects to other HIEP projects even when operating in the same country.
CS3. Research for Health in Humanitarian Crises (R2HC)	High	R2HC research has fed into the Ebola response. Core grantees are on track to deliver high quality research. Grantee management is good. Quality assurance processes are strong and there has been increased attention to grantee resourcing of communication. There are lessons to be learned in management of Emergency Fund calls. R2HC has been affected by staffing gaps.
CS4. Humanitarian Evidence Synthesis and Communication (HESC)	Medium	HESC is on track to meet its agreed high quality outputs of eight evidence syntheses. It is also strengthening cooperation across academic-humanitarian communities. CS4 is building research management skills in operational agencies particularly. HESC has good links in the international humanitarian community but is less connected at the country level. The resourcing for communication and uptake is very limited.
CS5. Innovation: testing to proof of concept (Humanitarian)	Medium	Project strengths include: quality assurance processes that ensure HIF is improving project design, implementation and outputs; contributions to the World Humanitarian Summit enhancing sector-wide understanding and ambition for humanitarian innovation; and

Innovation Fund (HIF))		evidence of operational actors responding to HIF-funded innovations. Areas to develop include an updated impact strategy; linkage with other parts of HIEP; and visibility at regional and country levels.
CS6. Secure Access in Volatile Environments (SAVE)	Medium	SAVE is on track to produce the planned high quality outputs. Some evidence and learning is already being applied by partner agencies (M&E). There is good and sustained engagement with key operational agencies and international networks. There is only limited linkage with other HIEP or DFID initiatives.
CS7. Strategic research into National and Local Capacity Building (CB) for Disaster Risk Management (DRM)	High	The project has generated high quality outputs customised to the needs of a different audiences and strengthened the Federation management capacity, although there are sustainability concerns for this. It has identified multiple champions and networks to advocate for the research findings within and outside of the IFRC. However, gender analysis was weak. There is an urgent need for a research uptake plan for 2016 to sustain user engagement and to track results.
CS8. Resilience Thematic Evaluation	Medium	The team invest considerable effort to maintain objectivity and rigour while dealing with logistical and security challenges in the research sites. Areas to strengthen include: capturing changes to the research approach in a design or protocol document; a more systematic approach to social inclusion issues to inform the sampling approach, data collection, coding and analysis of data; an urgent need for a detailed uptake strategy.
*Explanation of scoring scale: High – There is strong evidence of progress to demonstrate effectiveness against all criteria; Medium – There is some evidence of progress to demonstrate effectiveness against three or more criteria; Low – There is some but limited evidence to demonstrate effectiveness. None – No strategy or evidence in place.		

4.2.2 Progress towards HIEP outputs

HIEP aims to produce three types of output: high quality and relevant evidence and innovation products; cross-divisional and institutional relationships and partnerships; and skills in design, commissioning and application of evidence and innovation.

a) Evidence and innovation outputs and products

HIEP has already produced a range of high quality and relevant evidence and innovation products and is on track to produce many more in line with project timelines. Products to date include: research reports, literature reviews, innovation reports, country data sharing platforms, risk assessments, research protocols, peer-reviewed articles, and workshops. A list of outputs is attached in Annex 7.

HIEP partners have developed a number of products over and above the contracted outputs.

These include:

- i. Project products which were part of the project design and implementation process, such as evidence maps, literature reviews, guidance on systematic review and research protocols, which in some cases, such as that from CS2 REFANI, were published as a peer-reviewed article;
- ii. Learning products that detail learning from the HIEP project processes to date; for example, members of the CS3 R2HC Funding Committee published an article in *Science*

magazine in 2014 documenting some of the lessons from the first research call.²⁴ There are also plans for products to share syntheses of learning from CS5 HIF to be published in 2016. These outputs have potential to support humanitarian research in the future. There is scope for more products and processes to share lessons from across HIEP, for example on accessing hard-to-reach communities and marginalised people.

A strength of many HIEP projects has been their production of, or plans to produce, a range of products for different audiences. For example, CS7 produced policy briefs, visual outputs and country case studies, as well as the synthesis report; in CS3 Umea Ebola public health messages used in Sierra Leone were based on anthropological research; CS6 plans to produce toolkits to support operational decision making, for example on risk assessment; and in CS2, CaLP tailored outputs for different audiences and used them to develop online tools and training.

There is a high level of scrutiny in most projects rightly given to ensure that evidence is accurate and robust, but there seems to be less scrutiny given to the communication products to ensure they meet intended users' priorities and needs. The evaluation found little evidence of pre-testing of formats and processes to engage intended users with planned products. There are exceptions: for example, CS6 plans to consult with potential users regarding the focus of toolkits and format of visual presentation of findings on insecurity, humanitarian access, and quality.

However, budgets for communication vary widely across projects and only those with a higher budget have been able to produce a wider range of products, and DFID resourcing of communication or research uptake has generally been low. Higher budgets were seen in CS7 where the research uptake budget benefitted from a reallocation of funds originally intended for data collection in Sierra Leone country research, which was suspended due to the Ebola crisis; also, in CS3, R2HC management increased some grantees' budgets for communication. On the other hand, CS2 REFANI project partners had to raise additional funds from ECHO for communication after its DFID-supported communication budget was reduced at inception phase to only 3% of the total; and CS4 has sufficient funds guaranteed only for a main report for each evidence synthesis and summary but limited resources for additional products, none for translation and no funds for activities beyond 2016 despite some products only being published late in 2016. Some partners and grantees plan to input their own resources to convert outputs to peer-reviewed articles or other products but not all have sufficient resourcing for this. While some projects also have been able to ensure translation of some products – for example the CS7 executive summary is available in four languages - CS6 plans translation of some products into Spanish and Arabic, and CS2 CaLP has undertaken translation of the e-transfer guidance produced through HIEP – translation is not standard across HIEP projects and not all have budgets for this. DFID support of communication at project level has generally been low (more detail in VfM section)

Given that many projects will be producing their final findings in 2016, close attention and, if necessary, additional resourcing will be important to ensure these are presented in formats and through processes that reach the relevant audiences. In addition, there is scope to produce outputs drawing learning from across projects.

b) Cross-divisional and institutional partnerships

HIEP partnerships between academic and operational organisations have helped provide HIEP access to networks for consultation, as well as to communities for data collection. Examples are found in CS2, CS3, CS4, and CS7. HIEP has also supported the development of other linkages: for

²⁴ Ager, A et al (2014) 'Strengthening the evidence base for health programming in humanitarian crises, *SCIENCE*, Special Section: Global Health, 12 September 2014, Vol. 345, Issue 6202

example, CS1 built relationships between government departments relevant to risk management in Pakistan as well as dialogue between the government and other agencies at country level; in CS6 SAVE enabled informal connections between agencies working on similar monitoring challenges within and between countries that might otherwise not have close contact, for example organisations developing third party monitoring processes in Turkey/Syria (OCHA) with UNICEF working on this in Afghanistan. It is also noticeable that there is a recurrent group of operational agencies that are participating in the HIEP projects including Save the Children, IRC, Action Against Hunger and Oxfam. This may limit the extent to which the HIEP model contributes to changing organisational cultures around use of evidence, a HIEP outcome discussed later in the report impact section.

Some partnerships have experienced challenges in working together with a lot of time initially used to clarify roles and expectations. For example, in CS2 there were differences between REFANI operational and academic partners on a range of issues, and CS5 HIF highlighted a key learning of the need to enable more time for building collaboration.

The evaluation found that cross-departmental relationships within DFID have been enhanced through HIEP. Members reported a positive experience of being part of the inter-departmental Management Committee and Virtual Team. However, a number of the links within HIEP are informal and rely on personal contacts of lead advisers able to call on colleagues to input to project (discussed below in more detail in the section on management).

c) Skills development

On the whole, skills development has been limited. The HIEP theory of change envisaged that involvement in HIEP would build skills, for instance in research management and evidence use across DFID advisers and in operational organisations. Some partners reported benefits; for example, grantees of HESC reported receiving excellent support from the OXFAM/FIC project team in their production of systematic reviews. Oxfam staff themselves talked about the new contacts it has developed with “the evidence sector”, as well as more understanding of research from involvement in CS4 HESC. There is evidence of increased capacity in IFRC which had an (implicit) secondary capacity building aim to the CS7 project, although there are questions regarding the sustainability of the increased capacity. In addition, Government of Pakistan interviewees reported increased understanding and confidence to engage with risk assessments due to their involvement in the CS1 GFDRR projects. At project level there has been some training for individual researchers and numerators, for example in CS8, CS6 and CS2 where partners provided training for researchers in Ethiopia, Somalia/Kenya, Niger and Pakistan due to capacity gaps at country level. New skills have tended to be brought into partners, for example a project manager with academic expertise recruited into Oxfam and sector specialists into HIF. No training was provided to DFID lead advisers or project managers.

4.2.3 Progress to bring about HIEP planned changes and outcomes

The HIEP theory of change lays out the HIEP rationale to bring about change in support and use of evidence and innovation by connecting intermediary organisations that aim to link evidence to practitioners, networks and key operational agencies to the research processes, to promote debate and advocacy for findings. In addition, a key mechanism foreseen is that DFID will use the evidence as the basis for funding decisions.

The evaluation found strong progress in the development of project research uptake plans. At the formative phase many projects had yet to develop a research uptake strategy, but by this summative

stage, with the exceptions of CS1 and CS8, all projects had taken steps towards developing their plans and networks to support research uptake. Even without a strategy, in CS1 there was evidence of the chair of the National Disaster Management Agency speaking out regularly on risk assessments. This was complemented by GFDRR promotion of findings within the World Bank at the 2014 Global Risk Conference and Global Resilience Partnership Programme, as well as the DFID lead adviser feeding in experience from Pakistan into DFID's input to the Sendai negotiations to create a global framework on disaster risk reduction and management.

HIEP projects have created good links and relationships with sectoral stakeholders at the international level laying a strong foundation for the uptake and application of research findings in the future. Project launch workshops, promotional communication and ongoing consultation and communication such as blogs, updates and events have helped to raise the profile of research and emerging findings. Good links include those with intermediary organisations, particularly UK-based initiatives such as Active Learning Network for Accountability and Performance (ALNAP) and Evidence Aid. A number of projects have excellent links to inter-agency working groups where, for instance, CS3 has links with inter-agency groups on psychosocial health issues, and CS6 is linked to the inter-agency working group on humanitarian principles.

There were some examples of research being promoted within DFID. An example is using the humanitarian advisers' 2015 conference to share some emerging HIEP findings. Another example was the use of CS6 learning on remote monitoring and evaluation techniques, which fed into a DFID 2015 training process. The Humanitarian Head of Profession has played a constructive role appreciated by advisers in linking HIEP projects to relevant advisers when findings emerge. That said, HIEP advisers contacted in country visits and case studies who did not have direct roles in projects often had limited, if any, awareness of HIEP and its contents.

The evaluation found a number of examples of HIEP evidence and innovations successfully being taken up by organisations. Examples include CS3 R2HC which has already been able to feed into operations in response to Ebola (more details in Case Study 3); and practical tools supporting cash transfer programming developed in CS2 by CaLP have contributed to an increase in the use of e-transfers in humanitarian responses. In addition, HIF has produced innovations being taken up by organisations in the sector such as the menstruation management kit created by IFRC and in another project a digital mapping process developed by WFP. In addition, the Humanitarian Data Exchange platform created as part of the HIEP project implemented by OCHA was used by parts of the humanitarian community in the Ebola crisis.

Ensuring the participation in HIEP of organisations that are dedicated to networking has been productive. For instance, CaLP, a community of practitioners and network involved in cash-based humanitarian responses, has played a very positive role in the promotion of HIEP outputs on the use of e-transfers. The successful dissemination and uptake of the guidance was aided by CaLP's network and cooperation with other key intermediaries, operational agencies and links at global, regional and country levels, which supports the relevance of the HIEP theory of change which outlines such an approach. However, there is a heavy reliance of projects on dissemination via a limited number of (often UK-based) networks such as ALNAP and Evidence Aid. These are highly appropriate organisations, but it would also be appropriate to link more closely with regional networks; for example, links with iHub in Kenya are likely to be useful for HIF.

Successful uptake of HIEP products has been aided by other factors outside of HIEP. For example, from CS2 the use of the e-transfers guidance produced by CaLP and its role to support more use of e-transfers was aided by a conducive environment with new technology making e-transfers feasible in a wider range of environments and push factors of large-scale disasters, such as the 2015 Nepal

earthquake and 2013 Philippines Typhoon Haiyan where cash transfers were prioritised by many agencies. Another example is from CS3 which found effective use of the Ebola Anthropology Platform in Sierra Leone was supported by the observed limitations of other approaches aiming to influence health behaviour. Another factor which contributed to its effective use was the involvement of specialists in the response with backgrounds in HIV who had gained an appreciation of the need for culturally contextualised approaches to encouraging health-seeking behaviour.

However, projects have come up against challenges of converting high quality evidence to changes in practice. For example, CS5's HIF project, The Words of Relief (Translators without Borders), conducted an impact evaluation to show that people respond better to messages in their own language and demonstrated the faster translation that can be delivered through their services. However, the team are having to invest in advocacy to convince humanitarian agencies to include a translation component in their emergency response appeals because, despite the evaluation evidence, there is reluctance to increase funding requests for non-traditional activities. Similarly, CS3 an applied anthropological R2HC project led by Umea University, Sweden, developed culturally contextualised social messages for health-seeking behaviour based on field research in Ebola 'hotspots' in Sierra Leone, and benefitted from support from the National Ebola Response Coordinator and the Ministry of Health, but faced challenges in uptake due to delays in contracting the project and also in securing decision-makers' commitment to fund some activities. Furthermore, in the case of some of the innovation projects, projects have revealed a deeper challenge that problems are not known, so communication or diffusion activities have to tackle raising awareness among humanitarian agencies about the problem, as well as about the potential solution. For example, the Motivation project distributed suitable wheelchairs in a response but also found a lack of awareness in humanitarian organisations of the needs of disabled people in an emergency response; Words of Relief highlighted a lack of awareness about the need to deliver messages in local languages; and menstrual hygiene management and similar projects found a lack of awareness of the dignity and health impacts of gender-blind WASH facilities and hygiene kits. This issue effectively doubles the diffusion challenge and partly explains why the uptake of innovations and evidence can take so long. HIF has also found that the diffusion of many HIEP innovations has tended to be most prominent within the organisations involved rather than beyond, indicating the transferability challenge of evidence is not just between countries but also between organisations.

Challenges in evidence uptake are anticipated in the strategy underlying HIEP, but experience to date indicate there are shortcomings in the HIEP strategy to address the gap between evidence and organisational change. HIEP strategy so far has focused on building a receptive environment for new findings by involving organisations that are intended users of evidence into the HIEP project processes, for example in consultations on research priorities and in some cases as project partners. Stakeholder engagement has been done relatively successfully by projects so far but more needs to be done than is currently planned, as the examples above illustrate. Even when organisations are open to change, the evaluation heard from some that they need support to work through the process of applying new findings (CS6 stakeholder interviewees). Respondents in some projects, such as CS7, reported that their role was to make external stakeholders aware of research findings but could not go beyond this point. Resourcing does not usually enable HIEP partners to move into longer-term support processes to support the application of evidence. Such a role is something that evaluation interviewees raised as beneficial and needs to go well beyond the production of tailored communication products and workshops to disseminate these.

The process by which DFID itself will take on and use HIEP evidence is very unclear. One adviser consulted in one of the HIEP projects assumed that research findings should be turned into guidance

for DFID to be taken on by all humanitarian advisers, but the absence of formal sector specialists in the humanitarian cadre, in this case for shelter, meant it was not clear who would be responsible for doing this and have time allocated to it. Furthermore, the links with country-based humanitarian advisers is very loose with the evaluation finding that, at country level, advisers had limited if any awareness of HIEP and its projects. In one case, the grantee in-country briefed the DFID advisers on the two HIEP projects they were involved with rather than DFID facilitating any linkage between projects it is funding (CS2).

4.3 Ensuring effectiveness

4.3.1 Enabling factors

HIEP experience to date highlights a number of key approaches that support HIEP effectiveness.

- HIEP quality outputs have been most effectively taken up by operational organisations when they have been promoted by or linked to existing, strong networks with a known, identified need for new evidence or innovation.
- Multi-faceted research uptake approaches sharing findings through multiple products tailored for different audiences and promoted through many channels along with sustained dissemination are needed to reach relevant stakeholders.
- Research uptake and communication activities need to continue well after evidence is produced because change can be slow and new opportunities may arise to promote uptake. This is in addition to having engagement processes to build interest during the course of projects.

4.3.2 Inhibiting factors

Experience to date highlights some of the factors that already limit, or are likely to limit, HIEP's effectiveness:

- There is an absence of longer-term strategies to sustain dissemination and/or to respond to opportunities to promote its uptake. Resourcing levels for communication in terms of time and money at both the project and programme level are low. Many of the evidence products will be produced only in the second half of 2016. At this point contracts for many grantees end, so their official role in promotion of and/or support for the application of evidence generated also ends. DFID's role particularly that of lead and humanitarian advisers, is not clearly articulated.
- It is unclear as to how evidence and innovation products will be taken forward in DFID and by whom. It is unclear where responsibilities lie and, in particular, what the roles of different parts of DFID are in promoting and supporting uptake and application of the new evidence and innovation in DFID.
- HIEP has not developed strategies to address some of the underlying challenges to transforming evidence into changed organisational policy and practice.

4.4 Conclusion

HIEP is on track to produce high quality evidence and innovation products. There is evidence that some products already produced are being used in the sector. Some new and strong relationships between operational and academic organisations are being supported by the programme although some of these have experienced difficulties. There is some but limited evidence of skills being built

by HIEP. Capacity building has been when it has been a specific focus of the project or when a partner requires additional skills in-house, or among its own partners for high quality products. The individual projects are well networked although the emphasis continues to be on links to sectoral and international communities and are still less developed at country level in many projects. These achievements demonstrate good progress in moving HIEP's achievement beyond the output level detailed in the theory of change. They begin to secure some of the changes, such as increased discussion of findings by key organisations and of evidence and innovation more generally, which will support the uptake of HIEP evidence and innovation and contribute to HIEP outcomes, at least at the international level. The main challenges to maximising HIEP effectiveness lie in the limited resourcing of communication or research uptake in terms of both time and money, and in the lack of a detailed strategy for how HIEP addresses some of the underlying problems and blockages to transforming robust evidence into changes in organisational behaviour.

5. Value for Money

Evaluation question 3. Which management and implementation approaches have enabled HIEP to deliver better value for money (VfM)?

Key findings: HIEP is economical and largely efficient. There are low management costs, and contractual arrangements aim for low transactions costs. However, the approach to equity has been inconsistent and largely dependent on partners' commitment to and expertise in gender and social inclusion. There is room to strengthen VfM monitoring at project and programme levels. The structure of HIEP has the potential for high levels of effectiveness but the limited resources allocated to research uptake, and the Secretariat's limited capacity to identify and nurture synergies between projects within HIEP, may limit its potential value for money.

5.1 Introduction

The evaluation is using the 4E framework (economy, efficiency, effectiveness, equity) to evaluate value for money (VfM) in HIEP. This phase has examined economy and efficiency in detail, with a lesser focus on effectiveness and equity, given that these aspects are covered elsewhere.

Judgement Criteria:

Extent to which HIEP has optimised use of resources to achieve results:

- Evidence that HIEP decision making considers VfM (4E) at project and programme level.
- Evidence of effective (level of detail and timely) budgeting and monitoring processes.
- Evidence of additional funds being leveraged for/by HIEP.
- Evidence of systems and processes to address gender equality and other equity issues.
- Evidence that HIEP management model is cost-effective compared with alternatives (programme level).
- Evidence that budgets are appropriate for range of activities.

The summative evaluation builds on the formative phase, which focused on resourcing costs of HIEP and found VfM considerations were influential in resource allocation in HIEP procurement processes that gave good attention to VfM. Quality drove resource allocation rather than a need to spend money within a particular financial cycle. It was noted that one of the clear challenges facing HIEP was how it could develop a more consistent approach to monitoring VfM both between projects and at programme level. Key areas for consideration include the use of standardised VfM indicators, assigning resource allocations to logframe outputs and outcomes, and clearer guidance on how equity should be considered in VfM management across HIEP. The formative phase VfM recommendations have not been implemented.²⁵ Following the summary of the case study findings, this section discusses findings for HIEP in relation to each aspect of the 4E framework in turn, and concludes with learning on factors that are supporting and inhibiting HIEP VfM and overall conclusion. It should be noted this is the first phase of the evaluation when detailed project budgets were available.

²⁵ Formative evaluation report recommendation 4

5.2 Findings

5.2.1 Case study findings - summary

Five of the case studies were selected for more in-depth VfM analysis using a 4E framework. They represent a range of types of HIEP project and management arrangement, such as multi-country and single-country projects, funds and projects with operational organisations as research partners. The overall findings are summarised below along with each case study's allocated scoring.

TABLE 4: SUMMARY OF CASE STUDY FINDINGS: VALUE FOR MONEY

Case study number and title	Score*	Key findings
CS1. Improving the Application of Risk Modelling for Disaster Management	Low	The project demonstrates reasonable economy with staff management and administrative overheads at 14%. There was good use of low cost national consultants. Efficiency of implementation is satisfactory with good performance by the local team on time and to budget, but there was a disconnect between the HQ level management (DFID and World Bank) and the implementation team. Overall, the project was output rather than outcome driven with transferability of learning limited due to low resourcing of monitoring and evaluation.
CS3. Research for Health in Humanitarian Crises (R2HC)	High	CS3 demonstrates good economy with low staff and overhead costs (7%). Implementation is efficient due to the ELRHA's managerial expertise plus the funding committee and DFID scrutiny, which enabled a learning approach. Effectiveness is supported by good project level systems for quality assurance. While responsive to research needs in the acute phase of crises, emergency calls such as the Ebola response need fine tuning. There could be more focus on research uptake at programme level. There is evidence that grantees are trying to reach excluded groups.
CS5. Innovation: testing to proof of concept (Humanitarian Innovation Fund (HIF))	Medium	CS5 demonstrates good economy with reasonable overheads and staff costs (14%). Contractual arrangements are fine and budget scrutiny is good. Implementation is reasonably efficient but monitoring could be more active. Improvements are under way with new, additional advisers and efforts to increase flexibility and support to smaller organisations. There is limited resource allocation to research uptake, and evidence of low visibility at regional levels. There is no GASI framework or project equity profile.
CS6. Secure Access in Volatile Environments (SAVE)	High	CS6 demonstrates good economy with low fee rates and overheads (7%). The milestone-based contract has reduced transaction costs and provided flexibility. Implementation is efficient – on time, on budget. There is evidence of good local research partners complemented by good central data collection and analysis. Funds allocated to research uptake are not high at 5%–7% but implementation has had good engagement, both internationally and locally. DFID needs to develop plans for how to embed findings in 2016. Analysis included a gender lens, and data collection included marginalised groups.
CS7. Strategic research into National and Local	Low	CS7 demonstrates satisfactory economy with OPM showing good cost savings, low overheads and competitive fee rates. But IFRC management cost and overheads are high (32%) partly due to

Capacity Building for Disaster Risk Management		capacity building initiatives but these face sustainability challenges. The milestone-based contract has reduced transaction costs. Implementation has been satisfactory, but IFRC procurement mechanisms were not well designed. The learning group, which had good expertise, has been inefficient. Effectiveness is reasonable with strong research uptake processes particularly at the international level. The project was quite output driven. GASI was poorly addressed in project design.
<p>*Explanation of scoring scale: High – There is strong evidence of progress to demonstrate VfM against all criteria; Medium – There is some evidence of progress to demonstrate VfM against three or more criteria; Low – There is some but limited evidence to demonstrate VfM; None – No strategy or evidence in place.</p>		

5.2.2 Economy

In relation to economy, the evaluation considers management costs, management of VfM at programme and project levels, and additional funds leveraged to, or by, HIEP.

Management costs

On economy, in general, HIEP is performing very well. At the case study level, the findings on economy have largely been good.²⁶ Out of the five projects examined, the project staff management costs (including indirect overheads) of four projects (CS1, CS3, CS5 and CS6) range from 8.5% to 14%, which is reasonable²⁷. One project (CS7) has a high cost rate of 32%, but this includes the capacity building within the staff costs though the sustainability questions over this new capacity raise concerns.

At the programme level, the staff management costs are exceptionally low within the organisational structure equalling a maximum of 4.2% of the total programme cost. As part of this evaluation the administration costs have been benchmarked against an alternative model – the Economic and Social Research Council (ESRC) Learning Outcomes research and evidence programme. This is similar to HIEP in that it commissions research and evidence, but does so in the education sector through grants. In contrast to HIEP, the ESRC Learning Outcomes Programme fund management is fully contracted out by RED to ESRC, so it has a very light DFID staff involvement. By comparison, in terms of fund administration, overall management of HIEP is run entirely by DFID staff.

In HIEP an estimate of the costs of DFID staff time add up to roughly £256,000 per year, based on HIEP Secretariat costs²⁸, 22 advisers and 20 programme managers spending 10% of their time on HIEP²⁹, and four Management Committee meeting members working half a day a quarter. For the total duration of 6 years, this adds up to £2.1m, which is equivalent to 4.2% of the total programme budget³⁰. It is not clear that all programme managers and lead advisers will be working for the full six years, which some may not do, so this is a conservative (higher end) estimate of cost. This is a particularly low fund management staff cost and offers very good VfM.³¹ The management cost of

²⁶ It must be noted that availability to the evaluation of project budgets was severely delayed and the process very protracted with limited resources.

²⁷ The industry standard benchmark is generally considered to be 20% so overheads well below this are considered good VfM.

²⁸ At time of evaluation HIEP Secretariat was made up of 2.6 full-time equivalent staff

²⁹ This figure was based on direct discussions and survey with DFID programme staff.

³⁰ This figure does not include allowance for indirect/overhead costs which were not available. If an estimate of 10% of cost for overheads is included, it would make the overall management costs 4.6% of total which is still low.

³¹ N.B. this figure does not include extra office overheads and corporate support costs.

HIEP is 4.2% of the total budget, which is directly comparable to the ESRC Learning Outcomes management cost of 4.8% of the total budget, itself a low level for management costs. A summary of the management overheads (in terms of staff time) is given below:

TABLE 5: COMPARISON OF FUND MANAGEMENT COSTS OF HIEP AND ESRC LEARNING OUTCOMES

	ESRC Learning outcomes over 6 years	HIEP over 6 years
Programme budget	£20m	£50.2m
Fund Management costs	£800,000 ESRC fee + £163,000 of DFID staff costs	£2.1m
% of fund management cost of total budget	4.8%	4.2%

Management of VfM

There were examples of good awareness of cost economy by DFID staff and partners but VfM monitoring could improve. Examples of good practice included in CS5 HIF, where ELHRA showed good awareness and benchmarking of grantees management overheads. The evaluation asked the question to the HIEP Secretariat whether they routinely demand economy and efficiency measures from project partners, such as overhead costs, and whether these are negotiated and benchmarked. Interviewees stated that they do generally ask these questions and demand the data, but there are no formal systems to require this. Such conversations often happen in meetings and are not formally recorded.

In terms of formal systems in place, the quarterly reporting template has a VfM section to be completed by project partners. Interviews with project partners indicated that DFID had not generally given much guidance or feedback on how to effectively address this section, and that such guidance would be useful.

So, while standard cost economy metrics are discussed informally by DFID at inception stage and sometimes during project implementation, there is no requirement or routine collection of this data. There is no formal guidance on budgets and VfM.

Contract types and VfM incentives

There is evidence of good cost economy intent and awareness within DFID with the use of milestone-based contracts. The overall budget and payments are maintained and managed by the HIEP Secretariat. DFID payments are made in accordance with the contractual agreements in place, with individual advisers and project managers responsible for profiling and negotiating forecasts with partners.

HIEP projects are delivered through a range of funding mechanisms: accountable grants, memoranda of understanding, and contracts. Within these funding mechanisms there is a spectrum of types of contracts, spanning input-based contracts, where partners are paid at regular intervals based on what they spent, to milestone or output/outcome based contracts, where outputs/outcomes are agreed upfront and payments are made when these are realised. In general, these two types of contracts are part of a spectrum of risk spread between the donor and supplier. As a rule of thumb, the greater the uncertainty, the more likely it is that better VfM will be harnessed through input-based contracts. Conversely, the lower the uncertainty, the greater case for milestone-based contracts. DFID can then provide a lighter touch involvement, but also needs to maintain quality control.

It was not possible to obtain from DFID the breakdown of the portfolio in terms of milestone-based contracts and inputs based contracts. However, from the five case studies assessed for VfM purposes, three of them were input-based contracts, and two were milestone-based contracts. Partners with milestone-based contracts reported the benefits of this in terms of flexibility and low transactions costs (e.g. CS6 SAVE), and evidence showed good quality control systems. DFID has exercised its right to withhold payments on several occasions. For example, in the education and emergency literature review, when the project failed to produce a policy brief, DFID withheld payment for 6 months. This financial lever has been very important for quality control and VfM.

During interviews, the HIEP Secretariat agreed that it can be sometimes be difficult to set the milestones upfront; the education in emergencies amplify project has had this problem, for example. To mitigate against this risk as much as possible, the HIEP Secretariat were always involved in the setting of the milestones for each and every project. They cited HESC (CS4) as a good example of everyone working together in setting milestones.

HIEP's ability to leverage additional funds

The ability of HIEP to attract supplementary resources to fund evidence generation in the sector presents a seemingly positive story for HIEP although much of the funding is not additional to humanitarian evidence and innovation overall. A total of £13.3m has been levered to HIEP-supported projects, which is around 27% of the total HIEP budget. However, it is difficult to argue that this levered funding is purely additional; some of these funds would have gone to humanitarian evidence and innovation anyway without HIEP. Evaluation interviews found at least three donors already had independent decisions to support evidence and innovation (Sida, ECHO, and Dutch government) - discussed in more detail in section 6, and would have made these contributions independent of HIEP if it did not exist. Thus, while those funds are additional to HIEP, they are not additional to humanitarian evidence and innovation. Given that the HIEP logframe tracks these funds as part of its management tools, it will be important for HIEP governance to be clear on what they represent.

5.2.3 Efficiency

In relation to efficiency, the evaluation considered whether HIEP is running on time and to budget, as well as efficiency of management arrangements in relation to transaction costs and accountability.

There are mixed emerging findings for efficiency, but on balance it appears to be reasonable. The HIEP programme has suffered from some delays and budget underspend. But in terms of the approval process, the HIEP programme has been run extremely efficiently, and there is a general consensus that the Management Committee offers excellent approvals and strategic direction and decision making, at relatively low resource, time, and staff cost.

There have been mixed reviews on the day-to-day functioning of the HIEP Secretariat and Virtual Team (VT). Both the Secretariat and VT have suffered from staff turnover and gaps in posts, which has resulted in inefficiencies. There are potential risks of moral hazard³² due to the reporting structure, annual review process, and incentives for performance. The accountability of the budget sits with the HIEP Secretariat or the Senior Responsible Owner (SRO, i.e. the HIEP Secretariat team leader), whereas the actual management of the projects sits within the policy teams. This can lead to accountability problems, because HIEP VT project managers/advisers are not the SRO, or do not have the SRO within their reporting line. HIEP project managers and lead advisers are ultimately not

³² The definition of moral hazard is lack of incentive to guard against risk where one is protected from its consequences.

accountable for the projects, the HIEP Secretariat is. In the VT, interviewees stated that the structure is personality-based. There are varying degrees of time and resources dedicated to the projects by the HIEP VT members and it may be difficult to monitor and manage actual time allocated to HIEP given the rather informal management structure described later in the management section.

Another consequence of this management arrangement is that projects do not have their own in-depth annual reviews (AR). They do undergo a light touch AR as part of the overall HIEP AR process, but not with an intensive VfM focus. There are good reasons for not having individual annual reviews: there is much less of a burden on the HIEP VT staff, which potentially allows them to focus on the actual projects. Also, this evaluation is doing in-depth case studies, which are potentially good substitutes for annual reviews. At least seven HIEP projects would be big enough to have their own annual reviews if they were not part of HIEP.³³

It has been noted that some of the agreed Annual Review recommendations from a year ago have not been implemented. Nor have some of the Evaluation formative stage recommendations.

At the case study level, two of the five projects showed low levels of efficiency, with inexperienced staff, poor communication lines between donors and implementing teams, and insufficient monitoring and reporting (CS1 and CS7). There were some delays too, but three of the projects showed high levels of efficiency with staff, systems and processes to ensure smooth management. Project advisory groups/panels provided an excellent low cost way to support quality, efficiency and scrutiny in the running of projects and Funds.

5.2.4 Effectiveness and equity

In relation to effectiveness, the VfM analysis focused on the management structure of HIEP, the learning and governance arrangements, as well as the spread of resources for all activities within projects to ensure effectiveness and impact.

Management and governance structures

There were mixed views on the resourcing of the Secretariat, which has been insufficient to fulfil some activities that would maximise the impact of HIEP. The HIEP Secretariat responsibilities include (a) keeping a watching brief on all projects; (b) managing 3 to 4 projects directly; (c) financial accountability; (d) achieving HIEP outcomes over and above project outcomes; (e) facilitating learning within the VT; and (f) outreach and influencing. Currently it consists of 2 full time staff and 0.6 in total of additional administrative support, which is a small increase from 2014 when the head of HIEP was a part-time position. Given that the HIEP VT manages most of the projects, the burden is lifted to a certain extent from the HIEP Secretariat, even though they are accountable for all HIEP projects.

The oversight function that it has over all the projects is a good cross-cutting safeguard and allows cross learning and back stopping when staff leave, although this is not without difficulty at times, as described in the management section, when there is staff turnover. Furthermore, the evaluation has found the capacity is not sufficient to carry out a number of tasks that would maximise the collective potential of HIEP, for example developing and implementing a shared influencing strategy. Interviewees took the view that the HIEP Secretariat could be better resourced. At the same time, interviewees stated that there is also a lot of unseen investment by the DFID staff in general, such as

³³ R2HC £9.6 M; HIF £13.8M; Education in emergencies £3.9M; REFANI £3.2M; Thematic resilience evaluation £2.3M; ESRC Urban £2.2M; Sovereign insurance £2.1M.

the humanitarian Head of Profession. The evaluation emphasises that these functions, be they in the Secretariat or otherwise, are important to maximise HIEP's effectiveness and, thus, VfM.

On effectiveness, the HIEP cross-departmental governance structure appears to be very cost-effective in terms of ensuring that HIEP produces strategic, relevant research. The likelihood of research uptake in the HIEP cross-departmental structure is higher than in a more traditional structure of research being commissioned purely in a research division. The extent to which this is realised is discussed in the effectiveness section of the report though for many projects it is too early in implementation to see results' uptake.

At the project level, the findings were generally reasonable in terms of having the foundations laid for good VfM and effectiveness, for example for building good links with operational networks. At least three projects showed evidence of systems in place for evaluation and learning.

However, while projects' research budgets, scope and scale were found to be appropriate, most of the case studies budget analysis evaluated indicated low levels allocated to research uptake activities. In one case study allocations were reduced to 3% at the inception phase (CS2) and other projects reported that research uptake activities were the area where funds were reduced when budget cuts needed to be made. On the other hand, one project, CS7, was able to increase its research uptake budget when it had to change the programme design due to the situation in Sierra Leone preventing in-country work there, and the reallocation of funds benefitted the project communication budget. It is recommended that projects take a more proactive approach to budgeting and designing activities for research uptake.

Learning

In terms of learning, the Management Committee meetings are an excellent vehicle for strategic learning but there has been very limited facilitation of learning across HIEP projects between Virtual Team members and also HIEP partners. The concentration of very engaged individuals on the Management Committee has made this an excellent learning space. The meetings have been very open to what works and what does not. The group dynamics in the meeting give rise to high quality discussions, much better than individual decision making. The structure is unique in DFID. Advisory groups within the projects are particularly helpful for learning. These are external panels that challenge the research team effectively with good experts at relatively low cost. Case studies 4, 6 and 7 have benefitted from such groups. A number of projects (e.g. CS4 and CS5) have produced, or are producing, additional, unplanned outputs that share learning about their methodologies in relation to systematic reviews and innovation support respectively. On the other hand, Virtual Team members at the lead adviser and programme manager levels reported an interest in having more opportunity to learn from other projects about common issues. HIEP project partners reported interest in knowing more about other HIEP projects.

Equity

In terms of equity, the approach of the projects is extremely variable due, it would seem, to the lack of standardised guidance from DFID. Some grantees have implemented good approaches to ensure, among other points, that gender differences and marginalised communities are considered and included. Other projects showed little regard for gender in their project design. This is discussed in more detail in Section 7.

5.3 Ensuring VfM

5.3.1 Factors contributing to VfM

A number of activities and approaches have contributed to HIEP's VfM strengths. These include:

- Low staff administrative costs.
- Strong procurement arrangements paying attention to VfM (found in the formative phase).
- Contractual arrangements mindful of transactions costs e.g. milestone contracts when appropriate.
- Efficient Management Committee in approval process and decision making in general. It has also provided very good scrutiny and quality assurance.
- Cross-departmental structure of the HIEP programme within DFID provides excellent foundations and potential for high quality research and research uptake.
- Partner staff expertise in terms of quality control, financial management, proactive fund management.

5.3.2 Factors inhibiting VfM

Factors which inhibit HIEP from achieving its full value for money potential include the following:

- Limited resourcing for research uptake of individual projects.
- The limited Secretariat capacity means that a number of activities that could maximise the collective impact of HIEP projects – for example, through drawing out learning on approaches to humanitarian research from across projects, enabling learning between partners and building good relations with country offices – is limited. Thus the resourcing of HIEP, which is good for economy and efficiency indicators and for the production of relevant research, is more limited for its eventual take up and application in the sector, as well as for HIEP collectively to work towards HIEP programme outcomes. HIEP has great potential to do this but lean resourcing significantly reduces its potential to maximise that impact.

5.4 Conclusions

HIEP is economical and largely efficient. There are low management costs, and arrangements aim for low transactions costs. Monitoring of VfM could be stronger. The efficiency of HIEP is reasonable though it has suffered from delays and budget underspend. But decision making has been timely, and governance provided valuable strategic direction at relatively low cost in terms of staff time. The approach to equity has been inconsistent and largely dependent on partners' initiative. The achievement of the HIEP theory of change is based on a collective effort of DFID particularly the Virtual Team to work towards the programme collective aims, as well as promoting use of evidence from the projects with which they are directly working. Concerns have been raised about resourcing in the Secretariat affecting its ability to maximise the potential impact of HIEP and the Virtual Team. Some agreed HIEP formative recommendations relating to VfM and other aspects have not been implemented, at least in part due to capacity constraints. The cross-departmental structure of HIEP has potential for high levels of effectiveness and possibly impact but its low allocation of resources

to research uptake at project level, as well as to maximising potential synergies within HIEP, may limit its ability to achieve its outcomes and thus potential value for money.

6. Impact

Evaluation question 4: What contributions has HIEP made to building and sustaining evidence-aware policy and practice by humanitarian organisations?

Key findings: *HIEP is making some impact on the sectors' interest and understanding of how to support innovation and also in some organisations' policy and practice towards research management and use. The scale and scope of HIEP, DFID's public prioritisation of evidence and innovation, and its operational-academic partnership model are strengthening some organisations' own efforts to shift internal culture and practice towards evidence and innovation. HIEP's multi-pronged, concerted focus on a key process, the WHS, to promote understanding and commitment to innovation, has begun to bear some fruit with interest among some humanitarian actors in cooperation. The absence of a HIEP influencing strategy, shared and supported by the HIEP Virtual Team to progress HIEP outcomes (which are more ambitious than the uptake of evidence from individual HIEP projects) limits HIEP's potential impact on investment into evidence and innovation as well humanitarian organisations' routine use of evidence in their work.*

6.1 Introduction

The HIEP outcomes are at the level of the humanitarian system beyond the uptake of individual pieces of evidence produced by HIEP. Rather they relate to changes in (a) donor funding instruments and frameworks for investment into evidence and innovation, (b) humanitarian actors' culture and systems to integrate evidence routinely into policy and practice, and (c) policy and practice actors' investment into innovation which focuses benefit on poor people in humanitarian crises. The programme ultimately intends to have an impact on the capacity of humanitarian actors to deliver improved response and resilience programmes that are effective at supporting vulnerable people.

This section considers progress and the strength of HIEP strategies to achieve impact. As outlined in the inception report, "impact" is taken to mean change at the level of the three HIEP outcomes. The evaluation assessed progress against the following criteria.

Judgement criteria

- Extent to which HIEP has achieved change in DFID and key organisations/targets
- Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

The evaluation builds on the formative phase which found that there is a strong alignment between the aims and theories of change of individual HIEP projects and the overall HIES and HIEP theory of change. However, there was not yet a strategy for how project results and HIEP activities at the programme level would work together to maximise the potential collective impact. The evaluation recommended there be a clearer articulation, and greater analysis of and planning for the specific contexts in which DFID aims to bring about change. The section below details the evaluation findings in relation to each of the three outcomes including analysis of DFID's strategy to achieve it and evidence of progress or results at this point, and also considers the external environment and other factors that may have contributed to the identified results to locate the HIEP contribution in the wider context. This section also includes findings in relation to HIEP's impact on Southern actors'

capacity, a crucial element of the HIEP logframe and area, identified in the inception phase as important to observe if HIEP is to achieve long-term change.

6.2 Findings

6.2.1 HIEP strategy to achieve the outcomes

There was some progress in developing a draft influencing strategy for HIEP but it did not identify clear priorities and was not finalised. In 2015 the HIEP Secretariat drafted an influencing strategy and also created a 2025 vision statement. The draft influencing strategy usefully identifies HIEP stakeholders, some communication channels for HIEP, and lead champions in DFID for three aspects of HIEP: innovation, cash, and humanitarian research methods. However, the vision statement is very broad and ambitious without specific targets or milestones for progress before 2025. Moreover, the influencing strategy does not identify priorities for HIEP in relation to organisations, countries or sectors where HIEP hopes to achieve change. The stakeholders that the strategy does identify encompass potentially the entire humanitarian system. While the logframe for HIEP has some quantitative targets for monitoring progress towards outcomes discussed in Section 5, which is helpful, these are only numbers without any qualitative detail which would make them more specific, for example regarding the scale of funding instruments to be developed.

The influencing approach taken by HIEP Secretariat so far has focused on a) using HIEP projects and b) WHS consultation processes as means to achieve longer-term change. These two key components are described below.

- **First, HIEP uses its own projects as a means to achieve change.** For Outcome 1 this has meant that HIEP projects provide new vehicles for donor investment by encouraging co-financing, and some of these may become long-term instruments of funds. For Outcome 2 HIEP hopes that by supporting partnerships between operational and academic organisations it will promote changes in the behaviour and culture of operational organisations to integrate evidence more routinely into their work. In addition, some projects have capacity building as a specific objective as part of their remit. In relation to Outcome 3, HIEP projects produce learning on innovation and serve as examples of change and sources of learning about how to innovate for policy and practice actors.
- **Second, HIEP focused its limited programmatic influencing resources (mainly Secretariat time) on the WHS as a key forum and process through which to influence the sector.** HIEP has: (a) been active in the innovation theme team of the WHS consultation through the participation of the CS5 HIF manager and senior DFID staff; (b) co-convened events jointly with OCHA as part of the WHS process taking advantage of opportunities at the Oxford-based Humanitarian Innovation Conference organised by the Humanitarian Innovation Project; and (c) encouraged a multi-agency submission to WHS consultations led by HIEP partners Oxfam and FIC, which promoted evidence as key to humanitarian effectiveness and argued for more resourcing of it. This was complemented by DFID commissioned research to feed into the innovation theme team of the WHS.

In addition to these two key approaches, HIEP has aimed to feed into general consultations in the sector, such as ALNAP conferences, and aimed to build commitment among the humanitarian cadre for the HIEP agenda. The HIEP Secretariat also planned to work closely with the Humanitarian

Leadership Academy as a way to influence the culture of evidence production and use in the Global South, but this cooperation has not begun yet.

6.2.2 Progress towards HIEP outcomes

Outcome 1: International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications

Progress

In relation to Outcome 1, HIEP has had some success in enabling co-funding of HIEP projects but these are not currently envisaged to be long-term funds or financing instruments. Examples include contributions from the Dutch government and Sida for HIF, and the Wellcome Foundation for R2HC. ECHO has also supported REFANI although this was due to the HIEP project consortium's initiative, not DFID's. The two HIEP-supported Funds, R2HC and HIF, have potential to be longer-term funding instruments that facilitate donor support to innovation and evidence. However, neither has a sustainability plan outside of HIEP at this point, though other donor support to them is welcomed. Another initiative is the new Moving Energy Initiative proposal considered by the Management committee in December 2015, which outlines plans for the creation of a revolving fund for investment and loans into innovation and energy provision for humanitarian crises. This could be an additional fund also.

The major instrument that HIEP has actively contributed to is the development of a Global Alliance for Humanitarian Innovation (GAHI). If the proposed GAHI has funding attached to it, DFID will have made a significant contribution to leveraging additional funding for innovation but while WHS interviewees during the evaluation anticipated this might be the case DFID interviewees reported this was not likely. This is described in more detail in Outcome 3 below (indicating the inter-linking nature of HIEP outcomes).

There has been no documented strategy guiding HIEP's efforts to reach out to donors and little activity to reach out to new humanitarian donors in the Gulf, beyond invitations to join innovation discussions. The focus has very much been on innovation up to now although the other HIEP funds and new proposal on Moving Energy might provide opportunities to broaden that. There is no evidence of any strategy guiding collective efforts across DFID to engage donors using the different contacts and networks particularly of senior personnel.

Broader context

Evaluation interviews with government donors including ECHO and the Dutch found that they were aware of the significant DFID investment into innovation but had made their decisions for funding independently based on internal trends and drivers. A number of donor governments, such as IrishAid and ECHO, have existing funding instruments while others have programmes for investment in evidence and/or innovation (OFDA, the Dutch, and Sida). These pre-date the HIEP, or were developed in parallel with it though some have invested their funding into HIEP-developed opportunities such as HIF to which both SIDA and the Dutch government contribute. Other donors such as the Swiss Development Cooperation support partners producing humanitarian evidence on a long-term basis and finance innovation when opportunities arise. UN agencies, such as UNICEF and UNHCR, have set up innovation units and WFP also appears to be active in humanitarian innovation. However, it is clear that WHS discussions have certainly raised the profile of humanitarian innovation and potentially stimulated some investment. The WHS focus on innovation has created excitement and momentum around humanitarian innovation, so DFID's focus on influencing others through the WHS consultations seems justified. But, on the whole, the donors attributed their own

investments to their own internal drivers, particularly individual leaders and internal pressures to focus on evidence and/or innovation.

External donors highlighted the dual, seemingly contradictory, influence funding pressures are having on investment into evidence and innovation. On the one hand, the evaluation heard from external stakeholders that interest has grown in humanitarian innovation particularly around the role of the private sector, among donor governments partly due to the need to bridge the gap between humanitarian resources and needs. However, at the same time a key barrier to greater investment in evidence and innovation is the pressure to focus limited resources on life-saving activities, particularly at a time when humanitarian needs outstrip available resources. A HIEP strategy will need to take account of these pressures.

Outcome 2: Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions

Progress

The evaluation found some evidence that the HIEP model is contributing to some changes in operational organisations that are HIEP partners as well as within DFID. Four of the eight case studies promote or are implemented through academic-operational partnerships (CS3 R2HC, CS5 HIF, CS4 HESC, and CS2 REFANI). CS1 and CS7 aim to build evidence-related skills in the Government of Pakistan and IFRC respectively. Both of these have achieved some success, but sustainability questions hang over both. The synthesis report of the WHS summarising the global consultation, and which will be a basis for the upcoming conference in 2016, has two references to evidence from the inter-agency contribution submitted by HIEP partners for CS4, OXFAM/FIC.

The first key result identified is some emerging change in some operational organisations' culture, skills, and attitudes towards production and application of evidence. Examples include reports from Oxfam of gaining new relationships with "evidence organisations" from its involvement in HIEP and consideration of creating new positions to broker evidence for its humanitarian team; and examples from Save the Children of creating internal systems to maximise the quality and potential support from HIF as well as processes in place to support the development of evidence skills in regional offices.

The evaluation heard that HIEP has played an important role in supporting shifts in organisational culture towards evidence in some of its operational partners through a number of measures: (a) its provision of funds and opportunities to be involved in evidence production (the R2HC and HIF funds are important here because they are ongoing and provide time for organisations to set up systems to apply and learn how to access them); and (b) through its public prioritisation of evidence and innovation, which added weight to internal initiatives already under way in INGOs to change their culture.

The second key result is evidence of increased use of humanitarian evidence within DFID for planning. The HIEP logframe reporting for 2014 notes that two business cases refer to HIEP evidence and DFID senior managers report signs of increased use. The draft HIEP influencing strategy notes the intention to deepen the buy-in of DFID cadres and country programmes for the evidence and innovation agenda. HIEP presentations at the humanitarian advisers' annual conference, as well as regional meetings in East Africa and South Asia, have been steps to support this, as has close cooperation with the Humanitarian Head of Profession, for example, through his participation in the Virtual Team and lead for the HIEP annual review in 2015. However, so far this engagement has largely focused on supporting the uptake of HIEP evidence by the cadre rather than agreeing shared

messaging the team may undertake externally to support HIEP outcomes. Both these results are at early stages, with evidence just emerging.

Wider context

There are a number of trends in the wider context beyond HIEP that have contributed to cultural changes in organisations. Interviewees mentioned: (a) questioning in INGOs of their role and consideration of roles as knowledge intermediaries to link evidence to their partners in the global south; (b) trends towards coherence, common standards and professionalisation in the sector which themselves use evidence and also push operations to draw on evidence; and (c) humanitarian staff who are familiar with research from their own university and post-graduate study so have more skills in analysis of academic evidence.

HIEP has provided some contribution to changes in DFID staff behaviour and is likely to do so in the future by producing relevant research. But, overall, its contribution at this stage has been moderate although other factors from the wider institutional emphasis on evidence use have been significant. Measures put in place in DFID include the Heads of Profession being given an explicit role and responsibility to promote use of evidence; the shift to multi-year funding for humanitarian work means that humanitarian funding is now subjected to the same levels of scrutiny as other DFID funding; the quality assurance process of business cases focuses on use of evidence; and finally, staff induction processes provide information on where to find evidence in DFID. These measures have combined to contribute to reported shifts in culture in DFID. HIEP's focus on evidence for humanitarian decision making and engagement and active involvement of humanitarian advisers in HIEP have helped underline these efforts with some shifts in attitude reported by Heads of Profession and DFID staff.

Outcome 3: Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

Progress

There is evidence that HIEP has influenced organisations through its granting processes. For example, good practice is seen in the design of the project Education Accelerator which was developed in partnership with UNICEF and UNHCR. In particular, it has components for generating evidence for scale up, as well as mentoring and partnership brokering³⁴. There is evidence of a nuanced understanding of the challenges of scaling contextually specific innovations. As Phase 2 of the accelerator is at an early stage, the nuts and bolts of evidence generation – for example, appropriate study designs, degree of quality required – are not yet clear and are expected to emerge from the proposals received. HIEP's support for HIF is proving influential in the sector. HIF's practical experience with independent innovation support is almost unique in the sector. The HIF is acting like a champion of evidence and innovation through its influencing at the WHS. This change is 'live', still unfolding, but represents a good foundation for contribution to the HIEP's system-level outcomes.

HIEP has influenced the debate at the WHS, using its empirical findings from good quality research on humanitarian innovation. In turn, this has resulted in advancing the conditions for innovation investments, structures and programmes that are needed to populate the humanitarian innovation 'ecosystem'. There is monitoring and evaluation evidence that supports this finding, from interviews, outputs and case study reports. The HIF manager has provided insights and learning to the sector gained from hands-on granting and innovation management in practice. DFID has funded one of the

³⁴ Humanitarian Innovation and Evidence Programme: Project Annual Review 2015: Innovation in Learning and Education in Protracted Crises

main studies that is informing the design thinking about the innovation ecosystem, which is the University of Brighton study³⁵. The HIF manager and DFID HIEP lead have also provided guidance and steering to the WHS-commissioned background pieces. Evaluation interviewees indicate that DFID is the only bilateral funder who has funded innovation with such an emphasis on innovation in practice.

A key result is that the humanitarian innovation ecosystem is better researched and understood.

Many of the features identified in recent research are emerging. Important factors include increased coordination, financing, receptiveness to change and support for innovation, through different stages including scale up and application.³⁶

HIF and HIEP are considered to have significantly moved the innovation theme forward in terms of ambition and technical understanding of how humanitarian actors should develop the system for humanitarian innovation. The focus of efforts within the WHS innovation theme is now the concept of a Global Alliance for Humanitarian Innovation (GAHI), identified as a key need in the University of Brighton study. The HIEP and HIF teams have contributed to a high-level proposal for GAHI and remain very involved in shaping the initiative.

The essence of Outcome 3 is that successful innovations are being adopted into practice. Therefore, the establishment of a better-functioning ecosystem is likely to be necessary for its achievement. As HIEP is primarily a knowledge and influencing programme, without means for direct intervention, it may be more realistic for HIEP to influence the conditions for investment at the level of the innovation system, rather than aspiring to ensure that innovations are taken up. If this is a more realistic aspiration at least in the current timescale, then Outcome 3 needs to be reformulated to reflect the preceding conditions that are more within scope for HIEP to influence. If a better functioning system for humanitarian innovation is the target, then there is potential for DFID to be more explicit about its knowledge contribution to innovation thinking, and to continue to fund empirical studies and lesson-learning from practice, within an influencing strategy. There is also potential for DFID to take a stronger lead with other donors on investing in innovation, beyond the GAHI. To maintain DFID's relevance and knowledge contribution, a new frontier to explore is how to build links and alliances between national (bottom-up) and international (top-down) innovation processes. This could potentially be explored through research and funding practical projects at regional and national levels.

Wider context

The humanitarian innovation environment is becoming more populated by funds, initiatives and organisations, but the innovation system remains under-developed. 2012 saw the formation of UNOCHA's Innovation Fund, while 2015 saw the establishment of UNICEF's Global Innovation Centre, to complement the network of UNICEF's innovation labs around the world. Other bilateral donors are establishing innovation initiatives; for example, the Netherlands is developing a national

³⁵ Sources: "Humanitarian Innovation Ecosystem Research Project, Final Report", May 2015, Ben Ramalingam, Howard Rush, John Bessant, Nick Marshall, Bill Gray, Kurt Hoffman, Simon Bayley, Ian Gray and Kim Warren, University of Brighton, May 2015 <https://www.gov.uk/dfid-research-outputs/humanitarian-innovation-ecosystem-research-project-final-report> "Roadblocks for Humanitarian Innovation: a literature scan and problem statement" Joseph Guay, The Policy Lab and Northeastern University, unpublished.

³⁶ Sources: "Humanitarian Innovation Ecosystem Research Project, Final Report", May 2015, Ben Ramalingam, Howard Rush, John Bessant, Nick Marshall, Bill Gray, Kurt Hoffman, Simon Bayley, Ian Gray and Kim Warren, University of Brighton, May 2015 <https://www.gov.uk/dfid-research-outputs/humanitarian-innovation-ecosystem-research-project-final-report> "Roadblocks for Humanitarian Innovation: a literature scan and problem statement" Joseph Guay, The Policy Lab and Northeastern University, unpublished.

humanitarian innovation network in Holland and is the second largest innovation donor after DFID. On the NGO side, other initiatives include the START NGO network, which has an innovation support facility, and a number of local hubs, for example the iHub in Kenya, which collaborates on a number of humanitarian projects. However, overall resourcing levels remain low with significant gaps in the system such as the gap between local and international approaches to supporting innovation.

Increasingly, innovations are being developed at the local level, but this is challenging for international funds to tap. Some respondents feel that, up to now, innovation efforts have mainly focused on 'top-down' innovation within the humanitarian agencies. What is missing from current debates and planning at the system level is a perspective of 'grassroots' local innovation. Local innovation is becoming a dynamic area of work, through local community organisations, refugee organisations and local social enterprises. There are also small local commercial organisations, like the iHub in Kenya, that are providing support to humanitarian innovation locally. So while DFID is contributing significantly to thinking and initiatives on innovation, it is not on its own and other initiatives are also important.

6.2.3 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

HIEP is having limited impact on the ability of Southern actors to engage in research. The level of HIEP ambition to meeting this capacity gap is not clear. The impact of HIEP on Southern actors is important for longer-term impact as identified in the evaluation inception phase and recognised in HIEP's own plans and monitoring. A number of the HIEP logframe output indicators relate to Southern-led research and capacity building of Southern organisations. HIEP Business Case 3 refers to the intention to build Southern capacity to produce and use evidence. The growing importance of country-based humanitarian actors means their capacity to apply evidence and innovation is vital for HIEP eventual impact on operations and vulnerability.

The evaluation found a significant gap in Southern capacity for evidence production and use that requires significant investment to address. HIEP partners struggled with recruitment of local researchers and enumerators, particularly women, to undertake their research, and mainly in hard-to-reach and/or insecure environments (CS2, CS3 and CS6 reported this trend). Given that HIEP partners reported quite intensive efforts in this indicates an overall lack of capacity. The gap is one that needs to be addressed outside of the humanitarian crisis to enable prompt response to opportunities that sudden onset crises present for research, such as the Ebola outbreak in West Africa. Partners emphasised the importance of building capacity outside the time of humanitarian crisis to ensure that the capacity is there already to be able to respond to opportunities for research in crises.

Some HIEP projects have taken steps to address capacity gaps. Examples include on-the-job training for CS2 REFANI enumerators in Pakistan, and peer-to-peer support by the more experienced team members of CS6 in Somalia. However, these are small scale and project specific. Some HIEP projects may directly address this issue, notably the East Africa evidence mapping project and planned South Asia evidence mapping.³⁷ However, HIEP's next steps to act on the recommendations on the mapping of East Africa and the planned initiative in South Asia are currently unclear. Some projects, notably the two Funds for R2HC and HIF, have tried to adapt to support more Southern proposals but still find at this stage that most fail to meet the quality standards required to meet HIEP's ambition to produce robust evidence.

³⁷ Listed in HIEP projects, HIEP Management Committee minutes September 2015

Most HIEP projects are explicitly not resourced to build capacity even though they have found a strong appetite among Southern actors to participate in research, but often proposals from the South have failed to reach the quality standards set by HIEP. Examples include applications from actors to CS4 HESC and CS3 R2HC which often fail to qualify for support due to not reaching quality standards. HIEP reported that over 13 Southern organisations were involved in HIEP in 2015, mainly as grantees of the Funds, although in all cases they were not leading partners in projects. Other external initiatives such as the Humanitarian Leadership Academy, as well as capacity building initiatives such as the Africa Capacity Building Foundation, may be useful allies to any HIEP involvement here.

6.3 Ensuring impact

6.3.1 Factors enabling impact

Factors which have supported HIEP progress towards impact include:

- A multi-pronged approach to influence WHS, a key arena on which to focus. Activities included commissioning research, convening events, direct involvement of HIEP Secretariat and HIEP project staff in key fora and processes, use of HIEP project research, and targeted commissioning of additional inputs. Combining these with the use of research and consolidated learning from practice to advance debates and thinking on innovation has been effective, as has having combined efforts from DFID and from HIEP partners.
- Pre-existing conducive environments to progress HIEP outcomes have been important. HIEP has shown most progress where there is a pre-existing trend, for example of organisational interest in shifting its internal culture towards evidence. DFID through HIEP provides significant added weight to these efforts by means of its provision of funds, leadership, and opportunities matching leadership within partner organisations and allies.
- DFID cooperation with allies from within and outside of HIEP in WHS processes to promote the innovation agenda. There is a significant network of organisations including academic, operational and communication groups now connected to HIEP as partners, grantees, and country-level research teams. This is an extraordinary potential resource to capitalise upon.

6.3.2 Factors inhibiting impact

- DFID's influencing approach so far has been ad hoc and there is no longer-term strategy to take forward work or to guide the wider HIEP network contributions. In particular, there is no strategy to reach out to other donors and foundations to invest in innovation and evidence; no strategy about how to link international 'top-down' innovation initiatives, from within humanitarian agencies, to local innovation processes being led from outside agencies e.g. by refugee organisations, community groups, and social and for-profit enterprises; and no documented strategy for the later stages of the WHS and follow-up. This is compounded by the absence of a communication budget for HIEP over and above individual project research uptake funds.
- Limited Southern capacity in research limits the potential of humanitarian evidence initiatives.
- There is a limited range of organisations participating in HIEP, which limits the scope of HIEP to influence organisational culture through the partnership model.

6.4 Conclusion

The evaluation found HIEP is making some progress towards its outcomes. HIEP has provided donors with co-financing opportunities, such as the HIF, REFANI and R2HC though these do not currently have long-term sustainability plans. However, there was no evidence that it had contributed to the establishment of a new or expanding funding instrument yet, one of its three intended outcomes. The Moving Energy Initiative fund could also be a new instrument if it proceeds.

The scale of HIEP, DFID's prioritisation of evidence and innovation, and its operational-academic partnership model, are strengthening organisations' own efforts to shift internal culture approaches to evidence and innovation, albeit in a limited number of organisations and predominantly INGOs.

A multi-pronged, concerted focus on a key process, the WHS, to promote understanding and commitment to innovation, has begun to bear some fruit with increased awareness of how to support innovation and interest in cooperation.

However, the lack of a HIEP influencing strategy shared by the HIEP Virtual Team to guide efforts to HIEP outcomes limits its potential, which will restrict HIEP's achievement of the full theory of change to outcome level.

7. Gender and Social Inclusion (GASI)

Key findings: HIEP is based on strong principles that aim to address GASI well. There is valuable learning and some innovative approaches within HIEP project research teams about how to consider GASI in data collection processes, but this is not consistent across all projects. There are distinct differences in how DFID and its partners are addressing gender and the differences facing women, girls and other excluded groups within HIEP projects. Across the portfolio, less systematic attention is given to the full range of social diversity than to the gender dimensions of research. HIEP management and governance has limited capacity to ensure gender and social inclusion has been mainstreamed across the portfolio. There are signs that, going forward, HIEP will address social inclusion issues more systematically with the growing importance of the “leave no one behind”, and inclusive communities’ agendas.

7.1 Introduction

The focus of this GASI section is on the extent to which HIEP and its concomitant programmes have developed strategies and processes to address gender and social inclusion issues systematically. The formative evaluation found that gender and social inclusion issues were embedded within the principles underpinning HIEP.³⁸ However, a lack of HIEP guidance to project teams on what was expected by HIEP, and the lack of a system to assess and monitor gender and social inclusion at project and programme levels had resulted in inconsistent approaches across the programme. The overarching recommendation was that the Secretariat should develop a plan to strengthen HIEP’s approach to implementing its commitments to gender and social inclusion. This has not been done yet.

The summative phase integrated GASI considerations into the methodology, for example in evaluation matrix judgement criteria and indicators as well as tools used by the team, and undertook a GASI audit using an audit matrix developed for this evaluation. This section shares findings on HIEP’s responsiveness to GASI needs, its capacity and tools to ensure consideration of gender and social inclusion, as well as HIEP’s linkage to other relevant initiatives. The final sections pull together some of the key learning to date from HIEP on what is needed to enable good practice in relation to GASI in HIEP and presents final conclusions.

7.2 Findings

7.2.1 Responsiveness to need

HIEP is potentially a flexible and responsive instrument for supporting closing the evidence gaps in relation to humanitarian crises and women, girls, and marginalised/vulnerable groups. This is evidenced by a mixed portfolio of programmes which include projects that directly address specific GASI issues, such as sexual reproductive health (R2HC) and innovations for supporting menstrual hygiene during emergencies and disasters (HIF). HIEP is also developing a focus on filling gaps in the evidence in relation to some vulnerable and hard-to-reach groups by, for example, providing support to a concept note on the specific risks, vulnerabilities and needs of people living with disabilities, which has now gone to full proposal. However, some internal and external commentators felt more could be done by HIEP to take a more systematic approach in supporting this type of research.

³⁸ Within the HIEP strategy and draft refresh strategy, and, to some extent, in terms of poor women and men and vulnerable groups within the ToC.

There is growing recognition among research partners that the challenges of undertaking research in humanitarian contexts necessitates building a pool of competent national level researchers, especially women researchers who have the local knowledge and cultural understanding to work with affected communities. Evidence from field work (CS2, CS3, CS6 and CS8) indicates that programmes are being both pragmatic and innovative in finding ways to recruit and retain local researchers, especially women, who can enter communities that are too risky for non-nationals. For HIEP, lessons learnt from their experiences have the potential to strengthen both future HIEP programmes and sector-wide evidence building initiatives.

Some projects are developing strategies to engage directly with humanitarian assistance end users or beneficiaries. Where projects have reached out to community level (CS4, 6 and 8, and grantees within CS3 and 5) there has been an openness about the challenges (practical and ethical) of engaging directly with hard-to-reach excluded groups including poorer women, people living with disabilities, and so on. Their experiences have the potential to contribute to better evidence about what does and does not work in conducting gender sensitive, inclusive, and ethical research.

7.2.2 HIEP capacity and tools for GASI oversight and quality control

Course correction and quality control in relation to both gender and social inclusion, at project level, varies across the programme portfolio. All but CS1 have mechanisms in place (steering committees, advisory panels, etc.) but expectations with regard to GASI varied widely, which meant there were variations in approaches across the research sites. At the programme level, the absence of specialist GASI support undermines capacity to screen proposals and fully quality control the level of GASI reporting. The current structure of HIEP does not allow for detailed assessment.

Nevertheless, HIEP's Management Committee has an oversight function but there is no evidence that gender has featured strongly in their discussions. However, there are recent examples when the HIEP Secretariat has taken steps to course correct projects that are not addressing gender, such as the project on shock-responsive social protection systems (SRSPS) (CS2), which was asked by HIEP to review the gender dimensions of its research because of the lack of gender indicators within the logframe.

Systems and mechanisms are not yet in place within HIEP to track the extent to which GASI has been integrated into the collection, analysis and reporting of research findings. HIEP does not have a mechanism for tracking social diversity although, according to the HIEP Strategy Refresh and theory of change, there is an expectation that the differential impacts on vulnerable groups will be addressed within research. RED gender-sensitive indicators are used by HIEP but inconsistently. These indicators were appended to the logframe early on in HIEP. But the logframe being shared with some partners in 2015 did not append the RED indicators, and this has in one case (CS2-SRSPS) led directly to gender not initially being addressed.

HIEP's refresh strategy reiterates, as a principle, the importance of age and sex disaggregated data to guide and better target humanitarian interventions but does not clarify requirements of DFID staff or partners.³⁹ Unlike some other RED research programmes,⁴⁰ HIEP does not have specific and transparent guidelines or reporting requirements in relation to gender and social inclusion which lay out what is expected from projects from design through implementation and communication of

³⁹ HIEP Strategy Refresh 2014:6 and 21,23, 24–25

⁴⁰ See for example, Research programme consortia Guidance note on gender mainstreaming and social exclusion in research, DFID Research June 2009

results. Without clear guidelines from HIEP, there can be no guarantees that projects will automatically address GASI issues or contribute to portfolio coherence.

There is need for greater clarity on what level of socially disaggregated data and analysis is expected from projects. While the need to capture the full range of “gender, age, class and other social, and cultural characteristics” of research-targeted populations has been re-emphasised as an overarching principle of HIEP,⁴¹ there has yet to be portfolio wide understanding that social difference is contextual. This means that within projects (e.g. CS2, CS5 – grantees, CS7), age differences, or context-specific characteristics of vulnerability and social exclusion, have not always been captured.

There are, nevertheless, a number of instruments that in principle provide HIEP with the tools and mechanisms to mainstream GASI across its portfolio, but there is limited evidence that these are being used systematically across HIEP. Available instruments include: (a) the RED Operational Plan notes “..all new research plans and evaluations to undertake gender analysis as demonstrated in project proposals, inception reports, monitoring and evaluation frameworks and programme outputs”;⁴² (b) DFID Smart Rules on Programme delivery, which require that gender equality is considered for every programme; (c) RED Operational Plan and results framework, which provides a clear process for reporting against key gender indicators in the RED Results Framework;⁴³ and (d) the more recent RED gender team site, which provides internal divisional-wide support, guidance, tools and materials on meeting the requirements of the gender equality act (2014). In addition, DFID smart rules for better programming state that “The SRO must ensure that the impact of development or humanitarian assistance on gender equality is considered for every programme (including Conflict Pool/CSSF, International Climate Fund and cost extensions).”⁴⁴

However, there appears to be little documented evidence that HIEP has systematically operationalised the tools and mechanisms. GASI is not mentioned in the Virtual Team Handbook and has not featured in annual reviews in 2014 and 2015. RED gender indicators have not been fully embedded within the programme, resulting in only a partial tracking of the gender indicators. GASI issues are only intermittently discussed by the Management Committee.

7.2.3 Linkage with other initiatives

There is limited evidence of links with other Gender and Social Inclusion Initiatives. HIEP has clear focus on promoting DFID’s Strategic Vision for Women and Girls through, for example, research commitments on VAWG and the REFANI project, which targets assistance to women and investigates the impacts of gender on the intervention. HIEP’S emerging attention to people living with disabilities in humanitarian contexts has developed in collaboration with DFID’s inclusive Societies team. However, there was less evidence that HIEP was regularly engaging with broader sector networks or initiatives that focus on evidence building around GASI, such as the UN IASC Gender reference group on Gender and Humanitarian Action which has a specific work strand on knowledge management but the HIEP is engaging with disability networks through the Disability Data project.

⁴¹ HIEP Strategy Refresh 2014:24–25

⁴² Operational Plan 2011 – 2016 Research and Evidence Division Updated 2014 - indicator under SRP 5 to improve the lives of girls or women P7

⁴³ Gender is one of seven key results areas in RED’s Divisional Results Framework, the focus is on: supporting gender or girls/women focused research; gender mainstreaming in research and evaluation; gathering and analysing sex and age disaggregated data; and enhancing capacities of partner organisations to integrate gender dimensions in their work (specifically targeting and supporting female social and natural scientists to enhance their research and evaluation capacity).

⁴⁴ DFID 2014 Smart Rules: Better programme delivery. Updated 1 November 2015

Evidence is also limited because HIEP does not track, or ask projects to report on, the gender and inclusion dimensions of the networks and stakeholders they engage with during the course of the research.

7.3 Ensuring effective approaches to GASI

HIEP experience to date highlights a number of measures that support effective GASI approaches. These include:

- **Access to GASI specialists or clear guidance** from the concept note/proposal stage onwards, both at HIEP project and programme level.
- **More realistic budgeting and resourcing to enable systematic attention to gender and social inclusion dimensions of humanitarian research.** Analysis of project design showed a tendency not to reflect realistically the time and resources needed to reach and talk to a wide range of respondents, including those who are marginalised and socially excluded, within humanitarian contexts. Going forward, HIEP should make it a requirement for projects to detail in proposals and budgets how they will resource their intentions to target a range of respondents and socially disaggregate both qualitative and quantitative data.
- **Processes that help build a broad constituency for research findings** and more inclusive communication strategies need to include stakeholder engagement processes that are gender sensitive and socially diverse.

7.4 Conclusions

HIEP is based on strong principles that aim to address GASI well. Content of the programme and some partners' innovative approaches and methodologies are good ways to reach women and excluded people in research. But evidence from the GASI audit strongly indicates that where projects have not had in place the expertise, systems and mechanisms, from inception, for embedding GASI within the whole research approach, including realistic budgets for the research, opportunities are missed to analyse systematically and report on the full range of social diversity. It is much more challenging and problematic in terms of research rigour to make substantive adjustments to the methodological approach, data collection and analysis once research is under way.

In conclusion, at the HIEP level there has been limited capacity to ensure that gender and social inclusion has been mainstreamed across the portfolio. There are distinct differences in how HIEP and its partners are addressing gender and the associated, but potentially methodologically different, range of social/economic/cultural differences facing women girls and other excluded groups within research areas. Across the portfolio, less systematic attention is given to the full range of social diversity than to the gender dimensions of research. There are signs that, going forward, HIEP will address social inclusion issues more systematically with the growing importance of the "leave no one behind" and inclusive communities' agendas.

8. HIEP Management Model

Key findings: The HIEP cross-departmental model is proving an effective way to bring together skills and expertise across DFID, and the Management Committee and Virtual Team structures are valued by their members. The HIEP Management Committee has recognised some of the key risks associated with the management arrangement where much of the technical input to projects is based largely on informal links between departments and individuals, but more could be done to strengthen these. The HIEP model lays a strong foundation for DFID to contribute to a significant transformation in the sector in support for, and use of, evidence and innovation in policy and practice, but is currently not maximising its potential to do this.

8.1 Introduction

This section documents findings on the management model of HIEP which relate in particular to two of the evaluation's judgement criteria for effectiveness.

Judgement criteria

- Extent to which the HIEP management model accelerates/inhibits the achievement of results
- Extent to which the programme maximises the potential impact of its component parts

This section is organised differently from the preceding sections because it draws particularly on the findings from data collection at the programme level although it also draws on case study experiences where they have had management-related findings. It considers experiences of HIEP's cross-departmental model and its benefits and risks, management of HIEP with a focus on monitoring, and the extent to which the potential benefits of the cross-departmental model are being realised.

8.2 Findings

8.2.1 Experiences of the cross-departmental model

The HIEP Management Committee and Virtual Team were roundly praised by participants for their promotion of cross-departmental connections. HIEP's unusual management structure was designed to embed HIEP commissioning, management and uptake of evidence across teams. The cross-departmental structure was roundly praised by DFID respondents in the Virtual Team meeting and Management Committee interviews for its 'connectivity.' The model combines the use of DFID expertise in research and innovation management with operational expertise and focus. The Management Committee, which meets quarterly, has been playing a positive role that was widely praised by respondents as a good example of internal rigorous peer review of proposals, including a willingness to reject or require amendments to proposals that did not meet the bar as well as when necessary to close projects which are not progressing or meeting their aims. The Management Committee has played less of a strategic, goal-setting role and has yet to be involved in championing uptake of HIEP findings at a senior level, or activities to promote the achievement of HIEP outcomes that are over and above the individual project aims.

The Virtual Team (VT) made up of the lead advisers, programme managers and Management Committee has been meeting regularly except for part of 2015 due to staff turnover at the Secretariat, and most respondents were happy with the VT meetings, although attendance is

dependent on the other pressures on VT members' time. The formative evaluation recommended that the Secretariat should record VT meeting dates, attendance and skeleton minutes, or at least agendas. This has not been done by the Secretariat so it has not been possible for the evaluation to review regularity, attendance, or subject matter discussed at the VT meetings.

HIEP has rightly sought strong links with the DFID humanitarian cadre as a key stakeholder though this will be a long-term process and may benefit from being formalised. There are many informal links between HIEP projects and advisers e.g. in their provision of feedback on systematic review protocols for CS4 HESC. The management review found there has been discussion on how to incentivise HIEP work through the humanitarian cadre so that HIEP work can be recognised in the professional development of advisers within the humanitarian and other cadres. Interestingly, HIEP is now engaging with a growing range of divisions including education and other parts of policy division. The involvement of the livelihoods cadre in the humanitarian cadre annual conference in 2015, and HIEP's presentations were positive steps to engaging with them. Members of the livelihoods cadre were also involved in the 2015 Annual Review of HIEP, which was headed by the humanitarian Head of Profession (HoP). Through the year, the HoP is credited by humanitarian advisers with playing a positive role in linking them to relevant research and initiatives including that of HIEP. However, at country level, the evaluation found limited awareness of HIEP and its full range of activities, which prevents them playing a role to promote synergies between HIEP and other DFID-supported projects and also other initiatives at country level.

The uniqueness of HIEP's management structure also brings potential disadvantages particularly in dealing with staff turnover, as acknowledged in HIEP's risk register.⁴⁵ With the movement of advisory staff, projects lose their expert leads and/or locations within the organisation. Staff turnover in the Secretariat is inevitable within DFID, but the Secretariat did experience a period of difficult transition in the first half of 2015 with handovers in the roles of HIEP Head of Programme, HIEP Programme Manager and Financial Administration, and new roles for a number of HIEP project lead advisers. The risk matrix focuses on the potential for HIEP either to become dispersed across a very wide number of departments or to lose the subject expertise (and potentially commitment) of the advisory and programme manager positions as staff move from one team to another within DFID. As we noted in the formative evaluation, and as reflected in the risk matrix, HIEP had hoped that some projects be taken with their lead advisers as they moved roles, and this has happened in two cases. This cannot be guaranteed within DFID systems, however, as it will be subject to negotiations between advisers and their new managers. HIEP's own risk analysis also notes the added risk particularly when CHASE does not replace positions, as is the case with the role played by the lead adviser on the Moving Energy project (who is initially taking the lead adviser role to his new job for the first year).

The dispersal of HIEP contacts to a wider range of departments, for example policy, may be of benefit given the relevance of the HIEP agenda beyond the three original partners of the structure but it does pose a management challenge for the Secretariat to maintain coherence. The rotation of staff in DFID has been more problematic for HIEP in the area of programme management, and some programmes have been handed back to the Secretariat to manage after programme managers moved to new teams.

Resource constraints in DFID have impacted on the inter-departmental model of funding for HIEP. For example, CHASE contribution due in May 2015 was not made, and the short fall was made up by

⁴⁵ HIEP Risk Register, latest version seen by evaluation, May 2015

an additional budget transfer from the RED team. Management of this was aided by the under-spending by HIEP against projected expenditure for reasons described earlier.

Another key risk found by the evaluation and also identified in the risk register and in the formative evaluation involves the challenge to incentivise, ring-fence, recognise, and manage cross-departmental working. This relates specifically to the time spent on technical and financial management of HIEP programmes. DFID structures are designed to support budgets that are managed in a team structure. A Senior Responsible Owner (SRO) is ultimately accountable for the design, delivery and financial management of each programme, and other staff working on the programme would typically report to the SRO. In the case of HIEP, the SRO is the Head of the Secretariat, but the advisers and programme managers working on HIEP are located in teams that are not managerially responsible for these programmes' budgets, and report to their own Team Leaders. This does introduce a risk of moral hazard discussed in the earlier VfM section. All respondents confirmed that both advisers and programme managers were effectively finding time for work on HIEP "on top of my day job", "on an almost voluntary basis" or "gratis" with typical quotes from lead advisers being: "...It is difficult to get people's time because this is not formalised" and "It can be difficult to protect the time for HIEP work because you have to remind your team and your Team Leader that you are also working on HIEP."

The HIEP system for cross-departmental working is largely informal and this has a number of potential pitfalls. The principle of HIEP is that advisers are involved in the proposals and are, therefore, enthusiastic and committed to managing the programmes. Pitfalls to this informal system include that when advisers or programme managers are sick or on leave, the cover defaults to the HIEP Secretariat. Furthermore, while advisers have HIEP-related objectives in their Performance Management Forms (PMF), the quality assurer for these objectives is usually not the Head of HIEP, but the relevant Team Leader, for whom HIEP is not their main priority.

HIEP must be credited for acknowledging and monitoring the risks and challenges of joint working and encouraging review of ways of encouraging incentives for joint working.⁴⁶ Most respondents in this evaluation, especially at senior level, did not believe that "tinkering with the structure" would lead to better outcomes and might also have its own costs. Experience of Virtual Team to date indicates that some incentives for securing adviser time could be improved within the current structure, such as ensuring that PMF objectives are quality assured by a HIEP representative, by offering more training and professional development opportunities, and by allowing some form of recognition for HIEP work in professional cadres. The issue of ring-fencing programme manager and project support officer time may need more attention.

We have not been able to conduct a full analysis of the advantages and disadvantages of the embedded structure of programme management as well as advisory time versus other potential models here. However, we believe it is at least worth considering the alternative model of concentrating all programme management support within the Secretariat. We are mindful that this would also have potential disadvantages, for example in separating programme managers from the advisers who work on the HIEP programmes. However, we believe that, in a hub-and-spoke model, it might also encourage more routine collaboration between the hub and the spokes. A review that explicitly considers the strengths and weaknesses of the current and of alternative models of programme management, which also explicitly consults programme managers on the time they are using for HIEP, could be valuable particularly in advance of another phase of HIEP.

⁴⁶ Management Committee Minutes (Nov 2015) FLAG A: Management Committee finance update: HIEP total spend for financial year 2015/16

8.2.2 Monitoring of HIEP progress

The monitoring of HIEP has improved as the focus of the programme has moved further into implementation. In order for the management structure to accelerate the achievement of results, it needs to monitor those results across the programme. The formative evaluation and the 2013 Annual Review of HIEP recommended that the HIEP-level logframe be finalised and populated. This was actioned in the first half of 2014, and the logframe has been fully developed, populated and used as the basis of HIEP annual reviews. HIEP projects now have outputs, outcomes and indicators that are aligned with the HIEP logframe where possible. The Management Committee now also monitors risks regularly. However, there is still significant scope to strengthen monitoring tools and their use for management and tracking of HIEP progress particularly in relation to VfM, GASI, and outcomes (see previous sections).

8.2.3 Maximising the potential collective impact of HIEP

The evaluation found that there is not a strong sense of the HIEP Virtual Team working to shared goals or HIEP outcomes: the programme is viewed more as a Fund than a programme. The HIEP Virtual Team (VT) can maximise its potential impact through holding a shared perspective of common goals and shared planning, for example to influence priority countries or actors and to build on possible synergies due to common stakeholders across a number of projects. For instance, a number of projects identify the Red Cross and Red Crescent Movement as well as a range of UN agencies as key actors to influence at international level; and several HIEP projects have a focus on common countries, such as Pakistan, Kenya and Ethiopia. The Secretariat and VT members reported that the focus of VT meetings by end of 2015 has often been quite functional rather than strategic regarding issues such as reporting and annual review, as well as sharing relevant information such as updates on the DFID research review. The meetings have not been used to develop shared plans or share experience for learning on common issues. The evaluation found that the VT does not have a sense of shared goals and collective effort other than in the broadest sense. The HIEP theory of change is not a live tool for the team. While project reporting is now aligned to the HIEP theory of change, close monitoring is often only up to the output or short-term outcomes level, so there is no reinforcement of being part of a programme with a common rationale and shared aims i.e. the HIEP outcomes. VT members reported an interest in having more opportunity to learn from each other, but they were also wary of any additional demands on their time and clearly resistant to any initiatives that would involve more meetings.

Both Virtual Team members and Management Committee members reported seeing the HIEP as a DFID Fund rather than a programme. This has implications for the extent to which the HIEP Secretariat can drive, or at least guide, the HIEP network to contribute time and effort to the HIEP outcomes. It raises the question (identified in the HIEP formative evaluation) of whether HIEP aims are limited (though still significant) to be effective mechanisms to produce a set of individual relevant pieces of research and innovation that are used in the sector, or whether it aims to be a more ambitious, transformative programme which is described in the Strategy, theory of change and logframe, in impacting on funding practice and organisational culture in relation to support and use of evidence.

8.3 Conclusion

Experiences of the HIEP cross-departmental model have been largely positive, with participants valuing both the cross-departmental Management Committee and Virtual Team structures. Some

key risks of the model have been identified and some steps taken to address the issues of staff turnover but there is more that can be done to manage risks of a system currently based on informal links and goodwill. Monitoring of HIEP has improved but there is still scope for improvement. The HIEP model lays a strong foundation for DFID to contribute to a significant transformation in the sector in support for and use of evidence and innovation in policy and practice, but is currently not maximising its potential to do this.

9. Theory of Change

The evaluation has tested HIEP's progress and strategies against the theory of change. This provides an opportunity to refine the theory as well as assess the programme. The experience of HIEP so far largely supports the appropriateness of the theory: where robust evidence and innovation products are produced and good relationships created with knowledge brokers or intermediaries and operational agencies to promote debate, discussion and endorsement of findings, HIEP evidence has moved towards being used by agencies. Obstacles to this are identified in the theory of change, which refers to institutional barriers to change.

The evaluation has identified some areas that could refine the theory further.

- a) It could be useful to revisit the outcome statements, particularly 1 and 3, and develop sub-outcomes that articulate the outcome which HIEP can influence more directly. This could mean reframing them or adding a sub-outcome as follows:

Outcome 1: Expand Outcome 1 to include results that are increases in scale of existing funding instruments and frameworks as well as additional ones.

Outcome 3: As discussed in the impact section, this could better reflect areas within DFID influence and be reframed as "Improve the innovation ecosystem (organisations, relationships and capacities) globally and locally, to support the creation and uptake of social, economic and political innovations that focus on benefits for poor people in humanitarian crises." Indicators and milestones would need to be reformulated to reflect this.

- b) It would be useful to make clearer in the theory of change where uptake and application of specific evidence and innovations produced by HIEP sits. The evaluation team suggest this would be a fourth outcome alongside the three system-wide outcomes that are currently listed.
- c) An additional behaviour change activity could be added that describes the DFID intention to act collectively to implement strategies to achieve outcomes drawing on evidence and innovation products but also additional activities including DFID influencing, funding and networks.
- d) The role of and HIEP engagement with national actors – both humanitarian policy and practice domestic actors as well as research producers - could be more explicit in the theory of change, acknowledging the importance of capacity changes in these areas to achieve impact.

Lastly, the evaluation noted that the theory of change is not a live document for the HIEP Virtual Team despite being integrated into reporting and monitoring systems at project and programme level. If the HIEP remains committed to this theory of change, it is recommended that it be promoted within the Virtual Team, including within the Management Committee, for discussion on its strengths and any further refinements needed for a future phase of HIEP.

10. Conclusions and Recommendations

HIEP is an innovative programme on track to produce high quality evidence and there are examples of evidence already in use. HIEP is a significant contribution to the sector working on a scale beyond other evidence and innovation initiatives. However, the HIEP rationale describes a much more ambitious aim which seeks to achieve sectoral change. Some changes and additional activities are needed to achieve this ambition. The evaluation makes the following conclusions and set of recommendations to support learning and the next phase of implementation.

Relevance

HIEP is a highly relevant programme. It identifies and addresses important evidence gaps and questions which are prioritised by the humanitarian community. The overall programme mix, specific design and methodologies for specific projects are appropriate to produce robust evidence. HIEP has dealt well with the challenges of operating in the humanitarian sector, balancing the challenges of meeting academic standards for research with the logistical, security and evidence constraints of research and innovation in the sector. The programme is well connected to key stakeholders particularly at the international levels across a range of sectors, but also in some countries at the project level due to the activities of HIEP partners; this provides a potentially fruitful foundation for future application of its evidence and innovation. Key activities supporting relevance include good use of inception phases, strong quality assurance processes, and flexibility in response to new constraints and opportunities. Areas to improve include establishing a more consistent approach to consider gender and social inclusion in project design and increased engagement with domestic actors as part of global consultation processes.

Effectiveness

HIEP is on track to produce high quality evidence and innovation products but faces challenges in some places to ensure these are translated into changed organisational practice. The evaluation found some HIEP products are already being used in the sector, for example in the Ebola response and some innovations taken up within organisations. HIEP is supporting some new and strong relationships between operational and academic organisations though some of these have experienced difficulties due to different organisational cultures and time taken to clarify roles. There is some evidence of skills being built by HIEP, but this is limited and tended to be where there is a specific capacity building focus in the project or need to ensure its successful implementation.

The individual projects are well networked in the sector although the emphasis continues to be on links to sectoral and international communities and are still less developed at country level in many projects. At the project level, some HIEP projects have encountered difficulties in translating their robust evidence into changes in policy and practice within organisations due to organisational resistance to change in line with the challenges foreseen by the initial strategy underlying HIEP. HIEP needs to strengthen its strategies to support organisations to overcome obstacles to changing behaviour based on new evidence and innovation e.g. building awareness of the underlying problems research is addressing or benefits of change. It is unclear about where the limits of the HIEP programme lie in this process of change and those of different groups within it (e.g. partners, DFID humanitarian advisers, Secretariat). In other words, will it be about building a potential receptive environment and humanitarian sector awareness of its products, or will it go further to support the sector to apply its findings in practice?

Key challenges to maximise HIEP effectiveness lie in the limited resourcing of communication or research uptake in terms of time and money allocations; gaps in strategies to address challenges to

convert robust evidence into changed practice in organisations; resourcing constraints in the HIEP Secretariat to maximise linkages and synergies within HIEP; and the limited awareness and sense in the Virtual Team of working towards a common, collective goal and set of outcomes.

VfM

HIEP is economical and largely efficient but its overall value for money is at risk by limited investment in activities which assure effectiveness and equity. There are low management costs, and arrangements aim for low transactions costs. HIEP has suffered from delays and budget underspend but decision making has been timely and governance provided valuable strategic direction at relatively low cost in terms of staff time. Monitoring of VfM could be stronger. However, low levels of resourcing to the Secretariat and towards research uptake and communication more generally as well as inconsistent approaches to equity limit the potential value for money of HIEP.

Management model

The HIEP cross-departmental model is proving to be an effective way to bring together a range of skills and expertise from across DFID. The establishment of a Management Committee and Virtual Team are valuable structures. There is room for facilitating more learning across the team and coherence of the HIEP network. HIEP risks being limited to being seen as a Fund rather than a programme with a team working towards shared goals. There could be benefits of formalising some of the current interactions which rely on goodwill of advisers and others to overcome some of the identified risks of dealing with capacity shortages and staff turnover, particularly as the wider DFID context remains challenging in the current economic climate.

The structure of HIEP has the potential for high levels of effectiveness but the low level of resourcing of the Secretariat is of concern. There is evidence of the consequences of lack of capacity, such as a lack of follow-up to some annual review and evaluation recommendations, and limited awareness-raising activities to capitalise on synergies within HIEP, even within DFID. However, the reality is also that DFID, like other government departments, is constrained in how much it can invest in Secretariat structures so there may be a need to look to other ways to supplement resources for these cross-project activities.

Gender, social inclusion and equity

Some projects' teams have demonstrated strong commitment particularly to gender and have been creative in finding ways to ensure the inclusion of women and marginalised communities in HIEP research, but GASI concerns have been applied inconsistently by projects. The emphasis of primary data collection and attention to the importance of context are strong points in a number of HIEP projects. However, at the HIEP programme level there has been limited capacity to ensure that gender and social inclusion have been mainstreamed consistently across the portfolio. HIEP has not provided systematic guidance to partners or to the DFID Virtual Team on the management of GASI. There are distinct differences in how partners are addressing gender and the associated, but potentially methodologically different, range of social/economic/cultural differences facing women, girls and other excluded groups within research areas. Across the portfolio, less systematic attention is given to the full range of social diversity than to the gender dimensions of research, welcome though this is. Local research teams are developing some solutions to challenges of exclusion in humanitarian research. This knowledge and these innovations in methodology are not currently being documented or brought together in HIEP. Furthermore, GASI is not being consistently monitored at the programme level. However, it potentially is a rich resource for learning in the sector.

Impact

There is evidence of HIEP contributing to improvements in the capacity of operational organisations to engage with evidence and in the establishment of conditions to support better innovation in the humanitarian sector. These are early but positive signs. The scale of HIEP funding, DFID prioritisation of evidence and innovation, and the operational-academic partnership model are strengthening organisations' own efforts to shift internal culture approaches to evidence and innovation. A multi-pronged, concerted focus on a key process, the WHS, to promote understanding and commitment to innovation has begun to bear some fruit, with organisations in the sector reporting increased awareness of how to support innovation and interest in cooperation. A more structured, resourced strategy owned by the HIEP Virtual Team guiding activities of HIEP to achieve its outcomes will enable it to focus its range of resources in the future. Some refinement of the HIEP ambitions may also now be useful at this mid-point of HIEP's implementation.

The overall conclusion is that HIEP is on track to meet the initial stages of the theory of change at output level and in terms of promoting awareness of its evidence and new innovation particularly in the international community. However, the programme's potential to achieve results further up the theory of change is being restricted by a number of factors which have arisen consistently through the evaluation. Key ones relate to investment of resources beyond the production of evidence i.e. funding for project and programme communication, resourcing of the Secretariat and limitations on time of Virtual Team members for HIEP. In addition, important support tools have not yet been developed. These include an influencing strategy which states key priorities and could guide Virtual Team initiatives in the interest of HIEP collective outcomes and better maximise the potential impact of the full resources of HIEP. A final recurrent theme is the need to ensure gender and social inclusion is considered more consistently. These themes feed into the recommendations detailed below.

Recommendations

The evaluation makes the following recommendations. They are in order of priority and state a recommended timeline and responsible body to take them forward.

The evaluation team is mindful that the recommendations are largely targeted at the HIEP Secretariat given their lead role in the programme, but it is also aware of the capacity constraints of the team which have been highlighted in the report. Thus the recommendations to some extent focus on maximising the collective strength of the wider Virtual Team, which includes the Management Committee, and also the out-sourcing of some activities, such as in recommendation 5 which relates to communication of HIEP research to support its uptake. HIEP is on track to produce relevant and robust evidence but without implementation of these recommendation the programme seriously risks not maximising its potential impact, particularly at national level.

The recommendations (drafted and initially shared at the end of January 2016) have a relatively short timeframe reflecting the evaluation team's view of the urgency to focus on the communication and influencing strategies of HIEP which may involve HIEP partners, many of whom are entering their final contract year of cooperation with HIEP, with some ending in June 2016. It is acknowledged by the evaluation team that HIEP will have to balance these recommendations with other programme demands in this busy time.

	Recommendation	Who	When
1	<p>Resourcing HIEP projects research uptake processes</p> <p>Revisit partner communication and research uptake plans and budgets. Consider increases and extending contracts for longer-term communication particularly if products are produced only in last 3–6 months of the project to support longer-term research uptake activities. Ensure resourcing is sufficient for the production, translation and promotion of a range of products and processes.</p>	HS* with project teams	April 2016
2	<p>Strategies to achieve HIEP outcomes</p> <p>Schedule, develop and resource specific strategies to guide Virtual Team actions to support each of HIEP’s three outcomes. Identify priorities in terms of countries, organisations, and sectors/themes HIEP seeks to see change by 2018. Consider as part of these more detailed strategies:</p> <ul style="list-style-type: none"> a) Develop a wider donor engagement strategy beyond the current focus on innovation and the WHS. A number of donor governments are already funding evidence and innovation so DFID could engage proactively with them to advocate for increased investment. b) Leaders clearly play an important role in promoting greater investment in evidence and innovation, so the influencing strategy should identify and target key individuals to work with. c) Actively support the growing HIEP network of academic and operational organisations and individuals with a common interest to build momentum and learning on how to change organisational culture in relation to evidence and innovation. d) Review the range of operational organisations that are involved in HIEP and seek ways to widen its scope to achieve change through the partnership model. e) Increase outreach to other donors and foundations to invest in innovation, at international but also regional and national levels. f) Generate research and practical knowledge of how to build links and alliances between national (bottom-up) and international (top-down) innovation processes. g) Develop approaches for influencing the later stages of the WHS and ensuring that commitments will be followed up. h) Engage HIEP Management Committee in promotion of HIEP agenda within and outside of DFID. Develop a specific plan and areas of responsibility. i) In the VT review and refine the HIEP theory of change in line with experience to date to make 	HS with Virtual Team	April 2016

	explicit the intention to act collectively as HIEP Virtual Team, to make explicit the relevance of national actors, to distinguish between the HIEP programmatic aims and uptake of individual project's uptake, and refine anticipated outcomes (detailed in section 9).		
3	<p>Monitoring by partners</p> <p>Extend partner contracts for at least one year beyond their current end point to ensure they track and maintain monitoring data on research uptake - essential to be able to see the medium -term results of HIEP.</p>	HS and teams	April 2016
4	<p>Value for Money Management</p> <p>Set up systems for better monitoring of VfM within HIEP. Include:</p> <ol style="list-style-type: none"> a) Specific VfM review across the programme at the Management Committee meeting every six months b) The development of VfM guidance to include in the HIEP handbook. c) Establish specific VfM indicators which are set out during project inception phase, and monitored throughout implementation. These should include consideration of: <ul style="list-style-type: none"> • Staff management costs as a % of total costs • Fixed overhead costs or Indirect Cost Recovery (“ICR”) % rate • Delays per year as measured by months • Budget deviations per year as measured by % budget • Proportion of budget allocated to research uptake d) Monitor key cost drivers e) Monitor efficiency by tracking key milestones and indicators at both the project and programme levels such as time from contract to inception. f) Link logframe outputs and outcomes to resources to be able better to assess VfM (i.e. to know the cost of achieving results). 	HS and MC**	June 2016
5	<p>Long-term support to uptake and application of HIEP evidence in priority regions and countries</p> <p>Develop and contract out a HIEP communication project, or set of projects, to promote uptake and application of HIEP findings particularly at the <u>national and regional levels</u>. Elements of the project should include:</p> <ol style="list-style-type: none"> a) creating links and relationships for HIEP in priority countries with relevant regional and national networks and evidence brokers or intermediaries b) production of a set of evidence products and processes (events, ongoing communication, other) to promote evidence drawn from across HIEP on specific prioritised themes 	HS	June 2016

	<ul style="list-style-type: none"> c) production of a set of products drawing on the learning from HIEP research partners on methodological challenges and solutions to evidence production in humanitarian contexts d) promotional activities to increase awareness of HIEP-produced knowledge, and access to it, among humanitarian actors e) research on how to address challenges to overcoming the political economy of research uptake - translating robust evidence into change in organisational practice f) practical support to organisations that request help in the application of HIEP research (this may well need input from partners). 		
6	<p>Gender and Social Inclusion</p> <p>Develop a plan to strengthen HIEP's approach to implementing its commitments to gender and social inclusion. This should include measures to add value to and influence the GASI approaches of programmes within the current portfolio, and consolidate systems and mechanisms for embedding GASI within HIEP in preparation for the next phase. Specifically, this should include the following:</p> <ul style="list-style-type: none"> a) For any new programme funded by HIEP, provide programme managers with clear requirements, based on RED requirements on what HIEP's expectations are in relation to GASI throughout the research process, including reporting and communicating results b) Re-embed the RED indicators in the HIEP logframe c) Include a gender/social inclusion specialist within the annual review team d) Include a section within proposals in which applicants outline how they will resource (timings, costings, etc.) their approach to GASI, where it is relevant to the research, including recruitment, training and retaining of local women researchers e) Share lessons learnt across the portfolio through internal and external briefing and workshops, etc. around, for example, the following issues: <ul style="list-style-type: none"> ✓ Methodological challenges to integrating gender and social inclusion issues into humanitarian research ✓ Lessons learnt on engaging women and other hard-to-reach groups in humanitarian research processes ✓ Challenges in recruiting, building capacities and retaining Southern women researchers in humanitarian contexts. 	HS	June 2016
7	<p>Strengthening the HIEP model</p> <p>Strengthen systems for ring-fencing, managing and rewarding adviser and programme manager time spent on HIEP. This could include ensuring that reviews of HIEP staff</p>	HS	June 2016

	PMF objectives have appropriate Quality Assurers, and linking HIEP work into professional cadre development.		
8	<p>Capacity building</p> <p>Consider a specific project to build capacity in priority humanitarian countries to increase the supply of experienced and skilled female and male researchers in the Global South, as well as building the capacity of organisations interested in undertaking research but currently not meeting quality standards of HIEP.</p>	HS	August 2016
9	<p>Case study recommendations</p> <p>Respond to case study recommendations through lead adviser and project team meetings. HIEP Secretariat should log and track responses.</p>	HS and project teams	February 2016

* HS: HIEP Secretariat

** MC: Management Committee

List of Annexes

Annex 1. Terms of reference



Volume 2 Terms of Reference

Evaluation of the Humanitarian Innovation & Evidence Strategy

Closing Date for Tenders: 18 March 2013 14:00 Hours

Terms of Reference

Evaluation of the Humanitarian Innovation and Evidence Strategy

Summary: DFID seeks a team of evaluators that includes experience in evaluating (i) research impact and (ii) humanitarian aid to undertake an innovative evaluation of DFID’s Humanitarian Innovation and Evidence (HIE) Strategy, over the five-year period 2012-2017. The HIE programme involves at least 17 individual projects, with anticipated expenditure of approx. £43m over 2012-15 – the intention is to undertake evaluation within a single framework.

1. Background

DFID is commissioning an innovative evaluation of the design, process, outcomes and impact (or trajectory towards impact) of the Humanitarian Innovation and Evidence Strategy (HIE). The programme is a joint initiative between DFID’s policy, operations and research departments that aims to improve humanitarian outcomes by:

- Increasing the quality, quantity and use of evidence in decision-making
- Catalysing and bringing to scale major innovations in humanitarian practice

DFID sees higher quality evidence and practical innovation as a critical contribution to international development. Investment in research and innovation is seen as a global public good, addressing market failures that exist in relation to research to better address the problems of poor people living in developing countries.

Until recently, DFID’s considerable investment in development research and research uptake did not include significant or strategic investment in work relating to humanitarian action. It was not until 2011 that Research and Evidence Division made its first, modest investment by establishing the Humanitarian Innovation Fund, managed by ELRHA (£900,000 over two years).⁴⁷ DFID has, however, supported operational research in this area, both through the Conflict and Humanitarian Fund, which closed in 2006, and through DFID operational teams in country.

Overall, DFID’s approach to funding research and innovation in the humanitarian sector to date has been relatively *ad hoc* (compared to similar funding for development). It has, however, yielded some important results.

1.1 Humanitarian Emergency Response Review

The Humanitarian Emergency Response Review (HERR) was an independent review of the UK’s humanitarian work and called for a transformation in the way DFID and the wider global community approached the humanitarian agenda. The Government’s response to the HERR (June 2011) accepted almost all of its recommendations, including those on research and innovation⁴⁸.

The HERR consistently emphasised the need to improve the evidence base underpinning humanitarian action and to support innovation. The HERR described the mismatch between the strong need for innovation and the slow pace of change within the humanitarian system, and pointed to “...an urgent need to leverage appropriate forms of science, research, technology and private sector knowledge to

⁴⁷ ELRHA is the Enhanced Learning and Research for Humanitarian Assistance. See <http://www.humanitarianinnovation.org/> for further details of the Humanitarian Innovation Fund.

⁴⁸ Humanitarian Emergency Response Review: UK Government Response (2011)

support humanitarian innovation”⁴⁹. Delivering each of the main elements of the HERR will require better understanding of existing knowledge, the generation of new evidence to answer emerging questions, and the ability to find new solutions to old as well as emerging problems.

As part of its response to the HERR, the Coalition Government agreed to include humanitarian issues as a **core part of DFID’s research and evidence work**, and to use innovative techniques and technologies in its humanitarian response. The Secretary of State approved a new strategy to support humanitarian evidence and innovation in December 2011⁵⁰.

Specific policy commitments relevant for this strategy include:

- Make humanitarian research and innovation a core part of DFID research and evidence work.
- Use innovative techniques and technologies more routinely in humanitarian response (for instance, cash transfers).⁵¹

The strategy is set against the context of DFID’s commitment to go beyond a focus on responding to crises, and to invest in approaches that promote **resilience**. A core part of the strategy is to work with policy-makers and practitioners to deepen their understanding of the concept and application of resilience, particularly in fragile and conflict-affected situations.

1.2 Humanitarian Innovation and Evidence Strategy

The architecture for prioritising research into disaster risk and humanitarian action is at a nascent stage. The quality of the humanitarian evidence base is uneven across the sector. Considerable investment in the hard science of climate modelling and of seismology has not been matched by investment in analysis of the social and economic losses associated with major physical hazards⁵². Equally, there is a much stronger evidence base relating to health and nutrition in emergencies, than in relation to protection⁵³.

With these considerations in mind, a cross-DFID team, working with an international peer review group, and in consultation with a wide group of stakeholders developed a strategy to guide DFID’s investment in this area.

⁴⁹ See Humanitarian Emergency Response Review, page 23.

⁵⁰ Promoting innovation and evidence-based approaches to building resilience and responding to humanitarian crises: a DFID Strategy Paper (2012)

⁵¹ A third recommendation of the review was to: Improve our use of science in both predicting and preparing for disasters, drawing on the Chief Scientific Advisors’ network across government. Ensure scientific data on disaster risks is used to inform and prioritise country and regional level work on resilience. “This work is being taken forward separately by the Government Office of Science, in close collaboration with DFID.

⁵² Few R and J Barclay (2011) ‘Societal impacts of natural hazards: a review of international research funding’, report for the UK Collaborative on Development Science, University of East Anglia.

⁵³ For example, it is notable that initiatives such as Evidence Aid, a spin off from the Cochrane Collaboration has been able to develop a strong library of systematic reviews relating to health. There are few similar publications relating to protection, where the primary evidence base that has tested ‘what works’ is much more limited. See Evidence Aid at: http://www.google.co.uk/url?q=http://www.cochrane.org/evidenceaid&sa=U&ei=lleqT4miC_DT4QSAvtCRDg&ved=0CBMQFiAA&usg=AFQjCNFwQp4FcCex1EOvle4SMLMO_mXNBQ

The Humanitarian Practice Network’s Good Practice Reviews are another strong mechanism through which existing evidence is reviewed and negotiated and complement agency specific guidelines. See http://www.google.co.uk/url?q=http://www.cochrane.org/evidenceaid&sa=U&ei=lleqT4miC_DT4QSAvtCRDg&ved=0CBMQFiAA&usg=AFQjCNFwQp4FcCex1EOvle4SMLMO_mXNBQ

The technical group prioritised four areas for investment for DFID's research and innovation work. These form the core of the HIE design:

- **Pillar 1: Providing better information about risk, especially as it affects the poorest.** Without good information about risk, decision-makers (national and local governments and individuals) find it difficult to anticipate crises, lack incentives to prioritise investment in resilience and to target risk reduction efforts effectively.
- **Pillar 2: Identifying which humanitarian interventions work best, and finding new ways of tackling humanitarian problems.** To use resources effectively decision-makers need evidence about which interventions work best and to be able to identify and test new approaches.
- **Pillar 3: How best to work with national and local institutions to prevent, anticipate and respond to disasters,** including in the most insecure environments.
- **Pillar 4: Ensuring that evidence is available and used to inform decision-making** Investment is required in systems and products to track results and deepen accountability, particularly to disaster-affected communities.

In delivering this work, the intention is to develop an integrated approach that combines (i) investments in basic and operational research with (ii) support to initiatives that develop, test and bring to scale practical innovations, and (iii) investment to support the translation of evidence into improved practice within DFID and more broadly.

In an innovative arrangement which will speed integration of research findings and embed evidence and research into the operations and policy respective departments, this programme of work is being delivered through a virtual team of staff drawn from across DFID. Its management and governance reflects a collaboration between the Research and Evidence Division (RED) and Conflict, Humanitarian and Security Department (CHASE) (the policy lead) and Africa Regional Department (ARD) (the major investor in humanitarian work within DFID).

2. Purpose, Objectives and Scope of the Evaluation

The Humanitarian Innovation and Evidence strategy is a key component of the UK Government's response to the requirements of the 2011 *Humanitarian Emergency Response Review*.⁵⁴ This important and innovative evaluation will therefore have a critical role in both (i) reviewing and improving performance / delivery and design within the first three years of programme delivery, and (ii) in assessing the extent to which the programme has achieved its core objectives.

The **key purpose** of the evaluation is to:

- Assess the delivery of the HIE strategy, to ascertain to what extent the Department has fulfilled the Government's commitment in the HERR Response, and the outcomes and impact⁵⁵ of the strategy, on DFID's own practice, and more broadly.

The **target audience(s)** of the evaluation will be:

Formative phase:

- The virtual team responsible for the delivery of the strategy to facilitate change to delivery as appropriate. Utilisation of the preliminary findings will be important.
- DFID's Research and Evidence Division (RED) and Conflict, Humanitarian and Security Department (CHASE).

⁵⁴ See: *Humanitarian Emergency Response Review: UK Government Response* (2011)

⁵⁵ Possibly the trajectory towards expected impact, if there is delay in research uptake. The concept of evaluation of 'impact' should be fully-developed in the design of the evaluation.

Final report:

- The final report will be a public good, providing high quality findings for the wider humanitarian community, including research institutions and partner organizations.
- It will provide evidence on accountability for external scrutiny, for example the Independent Commission for Aid Impact (ICAI)

3. Evaluation Questions and Methodology

Due to the large scale of the investment, the Programme's ambitious objectives and innovative nature, it is important that DFID is able to understand the progress and impacts of the programme *as a whole* across the life-span of the initiative. Refining the design of the evaluation will be an important element of the Inception Phase. The programme will be delivered as at least 17 projects. The evaluators will be expected to undertake an 'overview' assessment of all projects and outputs commissioned under the Programme as well as DFID's internal management arrangements, but not to evaluate each element in detail.

The evaluation design should include development of the existing theory of change (results chain) in the strategy and business case into a fuller theory of change, to provide a holistic view of the overall portfolio, allowing consideration of how the different elements of work complement one another and where the strengths of the portfolio lie, or where change might be required. This should be used to refine the strategy's logframe, and establish a reporting framework for individual projects towards the outputs and outcomes in the revised logframe⁵⁶. Different projects may be selected for more intensive evaluation.

The evaluation is divided into four phases.

1. 0-3 months: **Inception phase:** development of the evaluation strategy, including finalisation of the Theory of Change, finalisation of the logframe and project reporting framework, design of an Evaluation Framework against the 4 pillars and selection of individual components for specific study⁵⁷.
2. 3-15 months: **Formative phase:** Assessment of relevance of portfolio and efficiency and effectiveness of delivery. This stage focuses on the commissioning process and whether it is able to produce robust and timely outputs that address the HERR commitments and are relevant to users. Additionally, this stage will assess the ability of management systems to facilitate uptake of evidence in DFID and to diffuse learning through it partnerships and operational work.
3. 15-30 months: Assessment of **short-term outcomes** delivered by the programme and reflection on the programme management process.
4. 30-60 months (2.5-5 years): **Summative evaluation:** Assessment of medium-term outcomes and sustainability of programme after completion. Assessment of trajectory towards impact-level indicators and the degree to which these are attributable to DFID's work.

Methodology: The evaluation should take a strategic approach that aims to review the implementation of the overall strategy rather than evaluating each component of the programme

⁵⁶ This should be in line with standard DFID log frame, Annual Review and Project Competition Report templates. These will be provided by the HIE Secretariat.

⁵⁷ Each of the commissioned projects will develop its own strategy for generating evidence of impact. Each will also be aware that it may be required to submit to external evaluation.

separately. During the formative phase, the evaluators will be expected to adopt a user-driven approach to the development of an evaluation strategy that will guide the work over its life-cycle.

Proposals should set out an approach and methodology for gathering and analysing data. This is likely to include a series of ‘impact-oriented case studies’, eg tracking when and how research findings have influenced policy makers, or adoption of an innovation. We envisage that 8 to 12 such studies will be appropriate selected against the four pillars. However, alternative approaches and designs may be offered. The studies should be developed in accordance with the best practice agreed within Research and Evidence Division.

The nature of the **evaluation questions** will evolve over time and will be refined through the development of the evaluation strategy. They should refer explicitly to the DAC evaluation criteria, and are likely to include:

1. Is/was the design, focus and sequencing of programme activities appropriate to meet core objectives including fulfilling commitments of the HERR response, complementing DFID’s humanitarian policy and providing new tools to the humanitarian community? (**Relevance**)
2. Have high quality researchers from a variety of relevant partners (both well-established and newer entrants) been commissioned? Are they engaging appropriately with stakeholders and are outputs meeting quality standards that ensure the programme stays on track to meet intended goals? (**Effectiveness**)
3. Has DFID’s management and implementation of the programme been efficient, achieving high impact work at the lowest possible cost, in line with DFID’s guidance on VFM? (**Efficiency/Vfm**)
4. What impact is the programme set to deliver and is the trajectory towards impact appropriate? What mid-term indicators of impact can be observed and are there any barriers to impact or unintended consequences? (**Impact**)

Gender and other excluded groups: The evaluation must draw on DFID’s gender policy and include review of the programme’s gender dimensions and impacts, gathering gender-disaggregated data where possible. Where relevant, the evaluation should also examine the inclusion or otherwise of other potentially excluded groups, for example, the elderly, disabled and different ethnic/religious groups.

Sequencing: The evaluation will be conducted in the following steps:

3.1 Inception/design phase – 0-3 months

The evaluators will develop the evaluation design, setting out clearly the strategic approach and evaluation framework. This should be based on a theory of change and revised logframe, and will include the short and medium term outcomes. The design should show clearly how the evaluation will assess the HIE portfolio’s trajectory towards impact. The evaluation design must focus on assessing the quality and rigour of research outputs, as well as their relevance to intended users.

Evaluators will also carry out an **evaluability assessment** that aims to refine elements of the strategy to ensure that the programme can be effectively and credibly evaluated.

The inception phase must include:

- Workshops with key stakeholders to refine the **theory of change** underpinning the programme. Based on the refined theory of change, the evaluating team will revise the log frame and establishing a reporting framework so that projects can report against outputs and outcomes in the log frame. The evaluators will deliver a concise report and agree the refined theory of change and log frame with the Secretariat.
- Refinement of the **evaluation methodology** in consultation with key stakeholders, including refinement of evaluation questions. The evaluators will produce a short design report (max.

10 pages) outlining the agreed approach, evaluation framework, methods, sampling, timing, roles and responsibilities and setting out clearly how the evaluation team will report to and engage with the responsible officer within the secretariat.

- Production of a **communications plan** that will detail how evaluation outputs will be effectively disseminated to the intended audience.

The evaluation will proceed to implementation only on acceptance of a quality assured and approved evaluation design. The draft inception and design report will be **quality assured externally** as well as by the steering group, and the evaluation team will be required to respond appropriately to comments.

The stakeholders with whom the evaluators should engage with while designing the evaluation framework include:

- The Secretariat responsible for delivery of the strategy
- Project responsible officers in CHASE, RED and ARD for each individual element of the portfolio.
- Staff within implementing partner organizations
- Potential users of the research in the humanitarian community including DFID country offices and senior management, other donors and practitioner agencies, partner country governments, researchers in this area, UN clusters.

3.2 Formative phase: Assessment of relevance of portfolio outputs and efficiency and effectiveness of delivery, 3-15 months.

This phase has two main focuses:

- Determine whether the programme's projected outputs and outcomes are likely to fulfil the commitments made in the HERR response and are of relevance to projected users.
- Assess the efficiency and effectiveness of programme delivery through DFID's internal management systems, and the extent to which these systems facilitate uptake of evidence and diffusion of innovation.

The evaluation will follow the design agreed in the Inception Report. At this stage, it is *suggested* that, as part of the evaluation, the evaluating team should review all projects that fall within the portfolio, and select between 8 and 12 projects of the total of 17 for more detailed follow up. These projects should be spread evenly across the four pillars (e.g. 2 or 3 from each pillar), and the team should track the activities and anticipated outcomes more rigorously than those of the remaining components. Proposals should present a methodology for conducting and analysing these impact-oriented case studies.

The team should also focus on assessing the delivery of the programme. The programme aims to engage traditional and non-traditional partners in the development of innovation and production of evidence. During this phase, the evaluators should assess the extent to which this has been successful, and whether these partnerships are on track to deliver robust outputs within specified time frames.

Additionally, evaluators should review the unique in-house management mechanism used to deliver this programme and identify the lessons of this approach for DFID. The ability of DFID's management systems to facilitate research uptake and diffusion of innovation both internally and to the wider humanitarian community should also be examined.

Evaluators will produce a **First (Interim) Report** at the end of this phase that includes a set of actionable recommendations that allow programme management to make mid-term adjustments to the programme as necessary to ensure fulfilment of the HERR commitments.

3.3 Assessment of short-term outcomes delivered by the programme and reflection on the programme management process. Timeframe 15-30 months

This phase of the evaluation has the following focuses:

- Assess the degree to which the projected outputs have been met and the quality of these outputs
- Track intermediate or short-term programme outcomes that provide a good indication of trajectory towards impact.

This phase should review the programme outputs to assess whether they are robust and relevant to users. It should then track the transformation of these outputs into outcomes, assessing what level of uptake programme outputs are experiencing at country office, country government and partner institutions level, as well as within DFID itself. This phase should also assess the quality of the innovations funded by the programme and the likelihood of further diffusion of the innovations throughout the humanitarian community.

Evaluators will produce a **Second Report** at the end of this phase that includes consideration of cross-cutting programme issues such as gender mainstreaming. This will be publicly available. Evaluators must also produce an assessment of the value for money of the programme as a whole, in accordance with DFID's guidance on the '3Es' approach to measuring value for money.

3.4 Summative Evaluation: Assessment of the intermediate outcomes and impact of the programme— 2.5–5 years

Research impact is often not seen for many years. This final phase of the evaluation will identify those mid-term outcomes that can be seen emerging up to five years after the start of the programme. This phase should examine the programme's trajectory towards impact and analyse the barriers and facilitators of impact. As specified in the initial design, the evaluators should focus on the degree to which outcomes and impacts can be **attributed to DFID-funded research**, detailing other factors that may also have influenced outcomes and impacts.

The evaluators will produce a **Final Evaluation Report** at the end of this phase that incorporates elements of all four phases of the evaluation. The final draft report will be **quality assured** by an independent panel and the evaluating team will be required to respond appropriately to comments before approval of the Report.

All outputs will be quality assured, must be of publishable standard and written in plain English. Evaluation recommendations must be clear and actionable; and must be substantiated with evidence.

4. Governance arrangements

Overall, within DFID, responsibility for delivering the Humanitarian Innovation and Evidence strategy rests with a Management Committee (chaired by the DFID Chief Scientist). The evaluation will ultimately report to this group.

A secretariat led by the Humanitarian Head of Profession is responsible at official level for delivery of the Strategy, including ensuring that a robust monitoring and evaluation framework is in place. S/he is responsible for ensuring timely commissioning of the study.

A **steering group** will be formed including representatives from RED, ARD, CHASE and chaired by a representative of EvD. The group's role will be finalised in specific Terms of Reference, but will include the following:

- Agree final terms of reference;
- Manage the commissioning and management of the evaluation
- Provide internal quality assurance of the evaluation process and outputs
- Commission external quality assurance of relevant drafts
- Approve final drafts at each stage of the evaluation
- Commission a Management Response on completion of the Evaluation.

An external representative will be appointed to the group. This might include an external peer reviewer commissioned as part of the contract or a relevant official from another donor organisation might be invited to play this role.

5. Existing information sources

The following documents give an essential understanding of the commitments and policies against which the evaluation will assess the programme.

Humanitarian Emergency Response Review, March 2011. Available at: <http://www.dfid.gov.uk/Documents/publications1/HERR.pdf>

Humanitarian Emergency Response Review: UK Government Response, Department for International Development, June 2011. Available at: <http://www.dfid.gov.uk/Documents/publications1/hum-emer-resp-rev-uk-gvmt-resp.pdf>

Promoting innovation and evidence-based approaches to building resilience and responding to humanitarian crises: A DFID Strategy Paper, Department for International Development, February 2012. Available at: <http://www.dfid.gov.uk/Documents/publications1/prom-innov-evi-bas-app-build-res-resp-hum-cris.pdf>

Amalgamated HIE business case (not yet published, attached Annex 1 as a separate document).

Amalgamated HIE log frame (not yet published, attached Annex 2 as a separate document).

6. Skills and qualifications

DFID is looking for a multi-disciplinary team, which combines knowledge of evaluating the impact of research and innovation processes, with some humanitarian knowledge and expertise. It is expected that the team will include the following skills.

- Evaluation of research impact
- Humanitarian aid and the humanitarian architecture
- Evaluation methodologies (quantitative and qualitative)
- Institutions and organizational processes
- Research and/or Evaluation uptake / utilisation
- Knowledge of the international humanitarian system

The team leader would be responsible for overseeing the evaluation, and must be able to demonstrate the following expertise:

- Proven ability to design and deliver high quality evaluations on complex issues on time and on budget

- Excellent knowledge of qualitative and quantitative evaluation methods, including of user-driven evaluations
- Exemplary writing and presentational skills.
- Strong inter-personal and negotiation skills

Desirable areas of expertise include:

- Gender
- Capacity building

7. Ethics

The evaluators will be expected to comply with the appropriate Ethical Guidelines. The study will also want to ensure that the appropriate ethical guidelines have been developed and observed in the implementation of the programme. This will be particularly important in those areas where the well-being of human subjects might be directly affected by different research studies.

8. Outputs

Output	Deadline
Inception report including: <ul style="list-style-type: none"> • Elaborated ToC, log frame and project reporting framework • Design report including: <ol style="list-style-type: none"> Detailed methodology for the main evaluation process, including selection criteria for case studies; methodological approach 	3 months after study begins
Communications plan	3 months after study begins
First Report including actionable recommendations	15 months after study begins
Second Report including actionable recommendations	2.5 years after study begins
Final Evaluation Report	2 years after strategy ends (5 years after it and the evaluation begins)

Consultation process: All outputs will be quality assured by the steering group and/or an independent panel. The quality assurance body will provide comments on the output within four weeks of submission. The evaluating team will then be required to respond appropriately to comments within 2 weeks of receiving the reviewers' observations.

In the event that there is a dispute between the evaluation team and DFID, this will be addressed by:

- A meeting between first the steering group and the evaluation team. If this does not resolve the dispute, this it will be referred to the management committee, and subsequently to the Head of EvD.
- If this does not address the concerns, then DFID will publish the report but with an annex articulating those areas of dispute for reference.

Outputs must comply with DFID’s ethical guidance, be of publishable standard and be written in plain English.

The report will be available through DFID’s website.

9. Reporting and contracting arrangements

Milestone	Payment %
Signature of contract (mobilisation fee)	10%
Inception report and communication plan	10% (3months)
Financial & Narrative Report	10% (1 year)
First Report including actionable recommendations	15% (15 months)
Financial & Narrative Report	10% (2 years)
Second Report including actionable recommendations	15% (2.5 years)
Financial & Narrative Report	10% (3.5 Years)
Final Evaluation Report	20% (5+years)

10. Budget/costings

Teams should use a benchmark of 10 impact-oriented case studies within the wider evaluation methodology for costing purposes.

11. Risks

The evaluation of research and innovation remains in its infancy, presenting a number of significant challenges to undertaking work in this area. These include:

- Difficulty in specifying indicators that provide for accurate measurement of outcome and impact in ways that are not overly onerous to evidence;
- Complexity of aggregating data and reports from multiple projects in a meaningful way;
- The challenge of time, given the need for timely information regarding the delivery of the programme, balanced against the need to take a long time frame in order to monitor outcomes.

These are complex issues, and to a degree the evaluation process itself will be an innovation, and therefore inherently risky. This places the burden on the steering group to be alert to these risks and manage them. Key priorities in risk management will be:

- Actively learning from other related studies undertaken by DFID and others (including major partners such as ESRC);
- Careful selection of the evaluation team to ensure that it is able to deliver complex outcomes in a timely and efficient manner.

Other key risks include:

- The virtual team and partners not making sufficient time available to support the evaluation. This will be mitigated by ensuring that strong monitoring and evaluation remains a priority of

the Management Committee. The Committee will use its leverage to ensure that DFID staff and others comply with the requirements of the evaluation process, and that the design of the evaluation is fit for purpose.

12. Duty of Care

The inception phase of the project will not require any in-county travel. An assessment of the Duty of Care capability and competence of the supplier, and the nature of in-county travel during the implementation phase, will be determined at the end of the inception phase.

13. Instructions for submitting a tender

Instructions for submitting a tender for the evaluation set out in this Terms of Reference can be found in *DFID Invitation to Tender Instructions (Call-down Competition)* attached in Volume 1 of the Invitation to Tender. Tenders will be scored using the Scoring Methodology (section 31) and Evaluation Criteria (section 32) set out in Volume 1.

If the scoring differential between the two top tender scores is small DFID may invite the two tenderers in question to make a short presentation followed by questions and answers. A final decision will be made by the HIE tender selection panel based on both the tender and presentation. Using the criteria set out in Volume 1, the panel will re-assess scores following the presentation/interview in order to come to a final decision. No additional criterion for the presentation/interview will be created.

Annexes:

Annex 1 : Amalgamated HIE Business Case (separate document). The amalgamated business case includes a provisional Theory of Change.

Annex 2: Amalgamated provisional HIE log frame (separate document)

Annex 2. Case study reports



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ACF	Action Against Hunger
ALNAP	Active Learning Network for Accountability and Performance
BISP	Benazir Income Support Programme
BRACED	Building resilience and adaptation to climate extremes and disasters
BRCS	British Red Cross Society
CaLP	Cash Learning Partnership
CB	Capacity building
CDKN	Climate and Development Knowledge Network
CEA	Cost-Effectiveness Analysis
CHASE	DFID Conflict, Humanitarian and Security Department
cRCT	cluster Randomised Control Trials
CRUO	Communications and Research Uptake Officer
DEPP	Disasters and Emergencies Preparedness Programme
DFID	Department for International Development
DRC	Democratic Republic of the Congo
DRM	Disaster Risk Management
DRR	Disaster Reduction and Recovery
ECHO	European Commission Humanitarian Aid and Civil Protection Department
ELAN	Electronic Cash Transfer Learning Action Network
ELRHA	Enhancing Learning and Research for Humanitarian Assistance
ENN	Emergency Nutrition Network
FfF	Fit for the Future
FIC	Feinstein International Center
GBV	Gender-Based Violence
GFDRR	Global Facility for Disaster Reduction and Recovery
GoP	Government of Pakistan
HERR	Humanitarian Emergency Response Review
HESC	Humanitarian Evidence Synthesis and Communication
HIEP	Humanitarian Innovation and Evidence Programme
HIES	Humanitarian Innovation and Evidence Strategy
HIF	Humanitarian Innovation Fund
IRC	International Rescue Committee

IFRC	International Federation of Red Cross and Red Crescent Societies
INGO	International Non-Governmental Organisation
KII	Key Informant Interviews
M&E	Monitoring and evaluation
MHPSS	Mental health and psychosocial support
MoF	Ministry of Finance
MYF	Multi-year financing
NDMA	National Disaster Management Authority
NGO	Non-governmental Organisation
NRSC	Nutrition Research Steering Committee
NWG	National Working Group
OCHA	Office for the Coordination of Humanitarian Affairs
ODI	Overseas Development Institute
OPM	Oxford Policy Management
PCG	Political Champions Group
PDMA	Provincial Disaster Management Authorities
PEA	Political Economy Analysis
QA	Quality Assurance
RA	Risk Assessment
RCRC	Red Cross/Red Crescent
RCT	Randomised Control Trials
RED	Research and Evidence Division
REFANI	Research on Food Assistance for Nutritional Impact
RUS	Research Uptake Strategy
SAGE	Scientific Advisory Group for Emergencies
SAVE	Secure Access in Volatile Environments
SDC	Swiss Development Cooperation
ToC	Theory of Change
TRG	Technical resource group
UCL	University College London
UEA	University of East Anglia
UNDP	United Nations Development Programme
UNHCR	UN High Commissioner for Refugees
VfM	Value for Money

WASH	Water, Sanitation and Hygiene
WDR	World Disasters Report
WFP	World Food Programme
WHO	World Health Organisation
WHS	World Humanitarian Summit

Case Study 1: Scaling up Innovation in Disaster Risk Management in Pakistan

David Fleming, December 2015

1. Introduction

The UK Department for International Development (DFID) provided £1.55m of support between December 2012 and December 2014 to the Global Facility for Disaster Reduction and Recovery (GFDRR) to test and scale up innovative World Bank disaster risk identification and financing tools in Pakistan.

The aim of the project was to design and implement in collaboration with the Government of Pakistan (GoP) a risk identification and financing framework to support the generation of robust and nationally-agreed evidence-based risk analysis, to inform GoP investments, policy and programming in Disaster Risk Management (DRM), and to contribute in the longer term to a reduction in disaster risk. The project sought to achieve this through **strengthening the institutional capacity and systems** of the National Disaster Management Authority (NDMA) and GoP Technical Agencies to generate and share data on hazard risks; supporting the development of a **national financial risk assessment** that identifies the steps towards the adoption of a national disaster risk financing (DRF) strategy; conducting **research, monitoring and evaluation (M&E)** on how the provision of evidence-based data can strengthen understanding of risk and the barriers to behavioural and institutional change; and **scaling up** risk management and financing in other low-income and fragile and conflict-affected environments.⁵⁸

This case study evaluation was conducted between October and December 2015, and forms part of the first summative phase of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP).⁵⁹ The five-year evaluation process consists of three data collection phases, of which this is the second, and tracks the DFID programme across its entire implementation period from 2013 to 2018. This project is one of eight projects funded through the HIEP that is being tracked by the team throughout the evaluation.

The objective of this case study evaluation is to assess the quality of the outputs, the strength of the uptake strategy to support the use of findings, and the extent to which the project is contributing to change in the sector. This short report presents key findings, conclusions and recommendations to support the project team with lesson learning and strengthening the uptake strategy; to provide DFID with evidence of progress towards outputs and outcomes; and to inform the evaluation team's synthesis of lessons and good practice across the HIEP programme. The second and final summative phase is due to take place in 2017–18.

2. Methodology

The case studies have been assessed using a common methodology adapted to the specific circumstances of the project, in relation to three evaluation questions of relevance, effectiveness and impact, as well as against an overall theory of change developed with DFID for the HIEP. The

⁵⁸ World Bank (2015), *Scaling up Innovation in Disaster Risk Management in Pakistan*, Final Report, 30 September 2015, p.2.

⁵⁹ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

judgement criteria and indicators used in the assessment draw on the HIEP Theory of Change (ToC). Questions on efficiency and value for money have been assessed through a separate process.⁶⁰

Findings drawn for this case study derive from two main data sources: i) a review of secondary documentation, including quarterly and final reports, project outputs, and some M&E data; and ii) interviews with over 30 key informants from the World Bank, GFDRR, DFID, academia, the private sector, and other stakeholders in Islamabad. The majority of these interviews were conducted face-to-face in Islamabad as part of a case study evaluation visit that took place 9–12 November 2015; other interviews were conducted by Skype.

One of the major limitations to this evaluation has been access to documentation and key stakeholders in DFID and World Bank. Some M&E data was received late in November 2015 although there are many gaps, which will be discussed in Section 4; a number of documents, including project outputs, were never received although requested from several sources; and some key stakeholders in DFID and the World Bank were either not available for interview (the project's M&E lead) or very difficult to access (the DFID lead adviser). However, sufficient triangulation has been achieved through interviews with a wide range of stakeholders, and as a result the validity of the findings is not affected. Documents reviewed are included in Evaluation Annex and a list of persons interviewed is included in the Evaluation Annex.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

There is strong evidence that the project has responded to a critical need and opportunity to invest in disaster risk information and innovation in Pakistan.

The HIEP Project Proposal explains that the project aims to contribute to all four of the problems identified in the Humanitarian Innovation and Evidence Strategy (HIES). The first problem of inadequate access to risk information by decision makers is addressed by the first output on building the capacity and systems of the National Working Group (NWG) on Risk Assessment (RA) to produce and share data on disaster risk; the third problem of insufficient analysis on how to work with national and local institutions is addressed through the third output of research, M&E and Political Economy Analysis (PEA), although, as will be discussed later in Section 4, there were some serious weaknesses in project M&E; and the project is also contributing to the second and fourth problems of inadequate synthesis of evidence and insufficient integration of evidence into decision making through focusing on building the institutional capacity of the NDMA and GoP Technical Agencies to generate, access, understand and apply disaster risk information in development planning.⁶¹

⁶⁰ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

⁶¹ World Bank (2013), *Program Theory of Change and Evaluation Strategy*, p.4; Interviewees 279, 280.

Interviews confirmed that the project responded to a critical need for investment in disaster risk information and innovation in the Pakistan context. While one World Bank respondent stated that the approach adopted was not necessarily new, having been applied globally by the Bank since 2007,⁶² many respondents agreed that the approach of embedding the risk assessment process within national systems and focusing on strengthening institutional capacity was both new and innovative in Pakistan. One respondent described how the learning derived from earlier World Bank multi-hazard vulnerability and risk assessment (MHVRA) work, which demonstrated the challenges of data access and sharing between Government departments, fed into the design of this project and the development of a data sharing platform that all members of the NWG would be able to access. Furthermore, the project's emphasis on building the capacity of national institutions can be seen as a significant step not only towards raising the bar in technical agencies' understanding of how to gather and synthesise risk information, but also towards laying the foundations for greater trust and dialogue within Government, and greater ownership of the risk assessment process and systems.⁶³

3.1.2 Extent to which the HIEP design is appropriate to address identified needs and opportunities

There is good evidence that the project's design, in particular the emphasis on stakeholder consultation and engagement, was appropriate to building understanding and application of disaster risk information. The lack of funding for scaling up to other low-income and fragile contexts necessitated a change in approach to replication. While plans for transferability and some successes were cited by respondents, the lack of formal synthesis of learning is a constraint.

The project proposal describes the evolution of approaches and conceptual frameworks for quantifying fiscal disaster risk, and conducting physical and fiscal disaster risk assessments across the developing world. Furthermore, given the limited evidence on how investment in risk information can support and influence policy and investment in DRM, particularly in fragile environments, combined with the selection of a context which already has a DRM institutional and governance framework and has demonstrated strong national demand for and ownership of disaster risk assessment and financing models, the project represents an excellent opportunity to develop new approaches for developing such models in a fragile environment.⁶⁴

Interviews with the project design and implementation team highlighted the 'evolutionary' rather than 'innovative' approach the project has taken to structured engagement and dialogue with the GoP on disaster risk, based on lessons learnt from previous work, and the analytical and consultative nature of identifying needs and designing solutions.⁶⁵ This emphasis on consultation and stakeholder engagement, combined with institutional capacity building, has helped to establish the risk assessment process as a collaborative exercise, owned and led by the Government, and has empowered the NDMA and technical agencies to advocate for more robust disaster risk information as part of a process of obtaining stronger political and strategic commitment.⁶⁶ Respondents pointed out the success in bringing the Ministry of Finance (MoF) on board and engaged with the importance of quantifying fiscal disaster risk. This entailed an extensive consultative process and a careful framing of the concepts in simple terms and through practical examples to support the MoF in

⁶² Interviewee 43.

⁶³ Interviewees 43, 275, 279, 280, 283, 291, 292.

⁶⁴ Project proposal, pp.6–7.

⁶⁵ Interviewees 281,291,292.

⁶⁶ Final report, pp.3–4; Interviewees 43, 275, 281, 291, 292.

understanding the fiscal implications of disasters for the public purse and that there were no hidden motives.⁶⁷

There was an original ambition, subject to funding, for the project to contribute to a knowledge base and provide a set of tools to equip five additional fragile and low-income countries with a work plan to scale up innovation in disaster risk management.⁶⁸ However, as one respondent confirmed, this plan had changed on account of a change in the dynamic and focus of the Political Champions for Disaster Resilience Group (PCG), and a move towards being more opportunistic in scaling up approaches and pushing out findings in other contexts.⁶⁹ Nevertheless, the final report and respondent interviews confirmed plans for the transferability and replicability of project findings to a wider platform.

For example, Sri Lanka was cited as a success case for a combined focus on physical and risk assessments, and an opportunity to combine learning and findings with the Pakistan case study to apply to the Bank's wider portfolio in South Asia. Respondents pointed out key learning from Pakistan that could be applied more widely, including the value of having a strong technical counterpart (in this case the Securities and Exchange Commission of Pakistan, SECP) to drive local stakeholder engagement and leadership; the importance of building trust and consensus between Government technical agencies to gather existing data, rather than generating new data; and the importance on the financial side of establishing a fiscal narrative rather than simply generating the numbers.⁷⁰ The final report and some respondent interviews also described the opportunity to link the World Bank's DRM and Disaster Risk Financing Initiative (DRFI) teams with the Social Protection Unit to develop scalable disaster-linked social protection programmes in Pakistan and beyond. While the final report sets out a clear plan for taking this forward, and one respondent described the effectiveness with which these communities in the World Bank came together to establish a community of practice, further investigation into progress lay outside of the scope of the evaluation.⁷¹ In summary, and as will be discussed further below, the project has identified some important findings and learning to inform scale-up and transferability to other contexts. However, the lack of formal synthesis of this learning to share within but more importantly outside the World Bank teams limits the extent to which the successes of the Pakistan project can be replicated elsewhere.

There is no evidence that gender considerations have been integrated into the project design and there is no evidence of disaggregation of datasets.

Although there is a strong emphasis on assessing vulnerability as part of the methodologies developed for the fiscal and physical risk assessments, aside from anecdotal evidence that the World Bank team tried to engage both male and female local professors in the technical capacity building and training sessions, there is no evidence from the documents available and interviews conducted that gender considerations have been integrated into the project design.⁷² Furthermore, there is no evidence from project documentation, the M&E strategy or interviews of disaggregation of datasets, or of how the project will have a differential impact on women, girls and the poorest and most vulnerable.

⁶⁷ Interviewees 275, 283, 288, 291, 292; Monitoring Journal: Ministry of Finance, Aug 2013–Mar 2014.

⁶⁸ Project proposal, pp.9–10.

⁶⁹ Interviewee 134.

⁷⁰ Interviewees 43, 281, 288, 291, 292.

⁷¹ Final report, pp.18–20; Interviewee 43.

⁷² Interviewee 288.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

There is little evidence of linkages made to other projects or initiatives in Pakistan outside of the World Bank.

Interviews at the formative phase suggested close links with DFID's programmes: Building resilience and adaptation to climate extremes and disasters (BRACED), and the Climate and Development Knowledge Network (CDKN). Although the CDKN programme was one of the first that the SI-DRM team were in touch with in the design stage, there is no evidence of any linkages made since with either programme.⁷³ In spite of potential linkages with other donor programmes in Pakistan, in particular the Asian Development Bank and United Nations Development Programme (UNDP), limited interviews with other donors highlighted that these had not been made.⁷⁴

The project also forms part of the Political Champions for Disaster Resilience work, established in 2012 and jointly chaired by the UK Secretary of State, the purpose of which was to advocate for greater emphasis on and investment in disaster risk reduction, as well as targeted support for the insurance industry in key countries. The linkages between this and the SI-DRM project are discussed below.

3.2 Strengths

The key strengths have been the project's close alignment to the problems and objectives set out in the HIES and its approach to bringing about changes in mindsets and behaviours in Government and technical agencies in Pakistan through adopting a collaborative, consultative and analytical approach that builds capacity, understanding, and ownership.

3.3 Areas to develop

Given that the project has already finished, it is too late to make suggestions for areas of improvement around relevance of its design and strategy. However, as will be discussed further below, one area of weakness has been the formal capturing and synthesis of the project's findings and learning which poses a constraint to replication, particularly outside of the World Bank. This is compounded by the lack of linkages made to other initiatives in Pakistan outside of the World Bank. Another area of weakness has been the absence of integration of gender considerations into the design.

3.4 Conclusions

There is strong evidence that the project has responded to a critical need and opportunity to invest in disaster risk information and innovation in Pakistan. There is good evidence that the project's design, in particular the emphasis on stakeholder consultation and engagement, was appropriate to building understanding and application of disaster risk information. The lack of funding for scaling up to other low-income and fragile contexts necessitated a change in approach to replication. While plans for transferability and some successes were cited by respondents, the lack of formal synthesis of learning is a constraint. There is no evidence that gender considerations have been integrated into the project design and there is no evidence of disaggregation of datasets. There is little evidence of linkages made to other projects or initiatives in Pakistan outside of the World Bank.

⁷³ Interviewee 288.

⁷⁴ Interviewees 278, 284.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

A number of respondents praised the quality of the project outputs, although evidence on the extent to which these were subject to a robust quality assurance process is limited. One of the most significant weaknesses of the project is the poor implementation of the M&E strategy and the lack of systematic evaluation and learning to inform project implementation.

The theory of change (ToC) developed for the project acknowledges that to achieve the aim of greater integration of risk information in development planning there is a need not just for high-quality evidence and products, but also a robust process for building capacity and stakeholder engagement.⁷⁵ While a number of respondents, including DFID, praised the outputs of the project as laying strong foundations for the development of a national disaster risk financing strategy, continued access to and sharing of disaster risk data, and sustained local leadership and ownership of the process,⁷⁶ a number of significant challenges were raised.

The most significant weakness relates to the project's third output around innovative research and M&E, and the almost total failure to implement the robust theory of change and evaluation strategy developed earlier in the project by an externally hired M&E consultant. The project's focus on understanding the political economy of DRM in Pakistan can be regarded as a vital tool for understanding the enablers and barriers to bringing about a change in attitudes and behaviours towards disaster risk information; and the inability to make the document public is understandable in the light of Government sensitivities.⁷⁷ However, the evaluation found very little evidence for how the findings of this research informed project implementation and the testing of assumptions behind the project's design and strategy.

Furthermore, the fact that the evaluator was not able to gain clarity on whether any M&E reports were produced until the final interviews, and that most respondents from the implementation team when asked whether M&E was conducted were not able to reply, is testament to this weakness. One respondent described how the M&E strategy was one of the strongest he had ever seen on paper, based on its robust approach to testing the project's theory and assumptions through a wide range of data collection methods and tools.⁷⁸ However, the robustness of the approach was ill-matched to the resourcing and budget available to implement it. Although the person responsible for M&E data collection and reporting started out completing and submitting M&E reports and monitoring journals, capacity was stretched, interest within the World Bank and DFID teams waned, and the momentum was quickly lost. In summary, in spite of a strong M&E strategy that asked some very important questions around contribution to outcomes and impact, its implementation became M&E for the sake of M&E, without any real added value, and the valuable early thinking was lost. Furthermore, the project missed an important opportunity to strengthen its learning by doing approach through incorporating M&E learning into project implementation and adjustment.

⁷⁵ Evaluation strategy, p.4.

⁷⁶ Interviewees 43, 134, 281.

⁷⁷ Interviewee 43.

⁷⁸ Interviewee 275.

Another weakness was the lack of an inception report for the project to set out a clear implementation plan, including how learning would be incorporated to aid mid-course correction. This was compounded by a lack of clarity around implementation arrangements, i.e. the two-tiered management approach in Washington DC and Islamabad, which according to some respondents led to poor team and client communications, lack of feedback loops and learning within the team, and a lot of critical aspects, such as M&E ‘falling through the cracks’.⁷⁹ In addition to this, the evaluation found little evidence of a robust quality assurance system in place to ensure high quality processes and products. In summary, weaknesses around quality assurance, learning and management arrangements led to a series of missed opportunities and, as one respondent described, severe challenges in delivering on such an ambitious project in such a short timeframe.⁸⁰

There is good evidence that the project has contributed to the second and third HIEP outputs of building sustainable cross-institutional relationships and strengthening in-country skills and capacities. However, concerns were raised in interviews around the project’s sustainability.

The evaluation found good evidence for strengthened cross-institutional relationships through project documentation, monitoring journals and interviews with project stakeholders. One of the most significant achievements has been transformed dialogue with the MoF, which at the start of project demonstrated strong reluctance to engage with the project team. As several respondents described, the project was successful in not only helping MoF to understand how engagement in the fiscal risk assessment process would bring value to them, but also in bringing about a change in discourse around the risk assessment process, transforming a technical and engineering issue into a whole-of-government and strategic dialogue.⁸¹ Another success has been the establishment of a National Working Group (NWG) of technical agencies. Given the perceived sensitivities around the NDMA’s role in coordinating their activities and the perception of the NDMA as a non-technical agency, this platform can be seen as an important enabler for bringing about greater cooperation and sharing of disaster risk information.⁸² While the challenges of data security and sharing still remain, the project has been able to bring agencies together and stimulate cross-agency dialogue. Furthermore, the project has also been able to stimulate dialogue between GoP, academia and the private sector, in particular the insurance industry, through establishing dialogue around the physical and fiscal assessment process. Although longer-term engagement is needed for tangible outcomes of this relationship to emerge, greater understanding within Government on the impact of disaster risk is a strong platform for this.⁸³

The project has also contributed to building NDMA and technical agency capacity to contribute to the risk assessment process and understand how disaster risk information can inform policy and decision making. The NDMA has increased its capacity to 25 staff, and has secured subsequent funding from World Food Programme until December 2016 in order to continue to conduct risk assessment exercises and to sustain the work of the World Bank project.⁸⁴ However, as some respondents pointed out, the process of building institutional capacity and embedding knowledge and skills within agencies rather than individuals is a long-term engagement. Given the compressed timeframe of the project combined with the ambitious scope and challenges faced in

⁷⁹ Interviewees 275,275,293.

⁸⁰ Interviewee 275.

⁸¹ Interviewees 281,288,291,292.

⁸² Monitoring Journal: NDMA, Aug 2013-Mar 2014; Interviewee 281.

⁸³ Interviewee 288.

⁸⁴ Interviewees 279,280.

implementation, some project stakeholders have argued that the World Bank should have maintained longer-term engagement to continue this embedding process and the functioning of the NWG, thus supporting its sustainability.⁸⁵

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and to contribute to outcomes

There is good evidence that the project has identified champions and networks to advocate for the outputs and findings, although more could be done to strengthen sharing and uptake among other donors in Pakistan. There is limited evidence at this stage that operational actors endorse the findings. Furthermore, it is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments.

One of the most important champions and advocates of the project's outputs and findings is the NDMA. Given the importance of a locally owned process for maintaining dialogue and advocating that Government decision makers invest in DRM, especially in physical and fiscal mitigation, it is essential that it continues to lead the process with support from the World Bank and other donors. Documentary evidence and interviews have confirmed the increase in confidence and understanding in the NDMA to play this role – one source cited that the NDMA Chairman mentions the importance of risk assessments in almost every speech or remark he makes publicly, and that this message has trickled down to middle management.⁸⁶ Another respondent pointed to the SECP as another important champion for the fiscal risk assessment work, given its strong technical understanding of, in particular, the value of the process for informing policy.⁸⁷

DFID, too, has played an important championing role. The lead adviser, for instance, has promoted the findings and outcomes of the project in global negotiations on risk financing and modelling, and has contributed to ensuring their representation in the 2015–2030 Sendai Framework for Disaster Risk Reduction.⁸⁸ The lead adviser's involvement in the work of the Political Champions Group (PCG) has been another important channel for dissemination at the global level. Evidence of the linkages made is limited; however, examples of where findings have been shared include the July 2014 understanding risk conference and a presentation by the World Bank Project Lead, as well as feeding findings into the development of the Global Resilience Partnership Programme, one of three legacy strands of the Group.⁸⁹ An assessment of the results of the PCG lies beyond the scope of this evaluation. However, some respondents pointed to the lack of practical progress on the insurance side of the Group's work, given the challenge of securing political will and policy priority around insurance-related issues.⁹⁰

The project also identified networks and forums both within the World Bank and GFDRR and externally in Pakistan to endorse and broker the project's findings. Within the World Bank's own unit in South Asia, one respondent from the project team reported that the final project report is getting good traction within the DRM team;⁹¹ the same respondent also commented that the project has received attention and a strong response as part of presentations to the World Bank in Washington

⁸⁵ Interviewees 275,276,288,293.

⁸⁶ Monitoring Journal: NDMA; interviewee 286.

⁸⁷ Interviewee 288.

⁸⁸ Interviewee 134.

⁸⁹ Interviewee 134.

⁹⁰ Interviewees 277, 281, 282, 289.

⁹¹ World Bank (2015), *Scaling up Innovation in Disaster Risk Management in Pakistan*, Final Report, 30 September 2015

DC, and at the GFDRR Consultative Group meeting.⁹² One of the project monitoring journals also reported donor interest in using the results of the fiscal risk assessment to further inform their DRM plans and programmes.⁹³ This was confirmed by one respondent from the project team who reported that the project played an important role in contributing to discussions and information sharing in the Pakistan DRM Donor Working Group, and that key messages from the project contributed to the uptake of messages within important political dialogues around DRM. However, the evaluation found little evidence to confirm this. While the Bank was praised by one donor for being engaged in the forum, other donors and operational actors interviewed thought that information dissemination within the forum was limited and the effectiveness of the forum was constrained by long periods of dormancy.⁹⁴ It is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments.

While the project has done well to develop valuable products and learning, which have been promoted through a range of forums and with a range of audiences, there has been a lack of a systematic and concrete uptake and dissemination plan. Furthermore, the lack of knowledge products developed represents a missed opportunity.

Respondents interviewed agreed that the project produced useful findings and learning around how to work with Government in a collaborative way to bring about changes in attitudes towards disaster risk financing and risk assessment. As discussed above, to date, most uptake and dissemination work has focused on pushing through internal and existing networks and channels such as World Bank and GFDRR regional teams, linking World Bank DRM and social protection teams in Nepal, Uganda and Ethiopia – with a view to feeding into the World Humanitarian Summit in May – as well as DFID's social protection team in Nepal.⁹⁵ However, a number of respondents pointed out the lack of a systematic plan and approach to knowledge sharing, as well as a number of missed opportunities.⁹⁶ One of the project team described an intention to develop knowledge products to distribute among Government stakeholders, as well as a hope to be able to produce knowledge products such as a handbook for conducting risk assessments, methodologies, frameworks and best practice, citing the linkages of this project to the broader World Bank risk portfolio where these would be useful. However, their failure to materialise was attributed to a lack of budget and resources for dissemination as well as time constraints given the ambitious scope of the project and challenges faced in delivering the outputs.⁹⁷ Another respondent from the project team cited use of the project's risk assessment templates and processes by the Asian Development Bank in Pakistan, as well as an intention for developing a knowledge sharing plan, but that the team did not get around to it and left it too late. He said that while dissemination was taking place more informally through a process of knowledge transfer to other recently launched World Bank projects, resourcing was not adequate, timeframes too short, and management arrangements not streamlined enough to develop and implement an effective dissemination strategy.⁹⁸

A number of suggestions were made by respondents for how the World Bank could improve uptake and dissemination of the project's key learning through identifying quick wins. One respondent described the need for a marketing strategy, particularly around the report outlining options for a

⁹² Interviewee 43.

⁹³ Monitoring Journal: Ministry of Finance

⁹⁴ Interviewees 134, 275, 276, 278.

⁹⁵ Interviewees 43, 134.

⁹⁶ Interviewees 134, 275, 276, 277, 278, 281, 289, 291, 292, 293.

⁹⁷ Interviewee 281.

⁹⁸ Interviewee 275.

national DRF strategy and risk assessment reports, to ensure that the findings are shared quickly within the Bank and with key external partners in an accessible and easy-to-read format, supplemented by presentations focusing on lessons learnt.⁹⁹ Another respondent suggested writing up a methodological note on conducting risk assessments, drawing on learning from this and other work, which could be shared throughout the Bank, GFDRR and external partners.¹⁰⁰ Another respondent suggested increasing uptake within Pakistan by sharing tailored learning products through existing forums such as the Pakistan Humanitarian Forum, National Humanitarian Network, DRR Forum, National Institute of Disaster Management, and regional initiatives such as South Asian Association for Regional Cooperation and Heart of Asia, with the aim of bringing different countries together on DRM and climate change.¹⁰¹

4.1.3 Extent to which the HIEP programme maximises the potential impact of its component parts

There is some evidence that the HIEP virtual team has worked to achieve collective impact but improvements can be made to better improve communications around the HIEP and its findings in-country.

There is some evidence that the HIEP virtual team has worked with the World Bank team to achieve collective impact, particularly, as described above, through making linkages to the Political Champions work stream, as well as scalable social protection and cash transfer work in Bangladesh.¹⁰² However, the lack of awareness of the DFID team in Islamabad of the World Bank project, and even the HIEP itself, demonstrates the need for the DFID virtual team to strengthen its approach to communication around the HIEP and its findings in-country.¹⁰³ Furthermore, there is a need to ensure that staff turnover within the virtual team does not result in a loss of strategic direction. As one respondent noted, this was partly the reason for the decline in interest within DFID in the robust M&E framework and data collection tools developed earlier in the project.¹⁰⁴

4.2 Strengths

The project has generated high-quality and highly valued products and processes, and important learning for developing and implementing physical and fiscal risk assessments in collaboration with Government stakeholders in a fragile and conflict-affected context. The project has successfully contributed to the development of local skills and capacities in designing and conducting risk assessment processes, as well as strengthening relationships and engagement between Government, the private sector, and academia in Pakistan. The project has also identified in-country champions and networks for promoting the findings and learning from the work, and has focused in particular on knowledge sharing within the World Bank and GFDRR in the region as well as globally.

4.3 Areas to develop

One of the most significant weaknesses of the project was the lack of systematic monitoring, evaluation and learning throughout the project, which could feed into improving project

⁹⁹ Interviewee 290.

¹⁰⁰ Interviewees 291, 292.

¹⁰¹ Interviewee 278.

¹⁰² Interviewee 134.

¹⁰³ Interviewee 276.

¹⁰⁴ Interviewee 275.

implementation and real-time learning. The project had contracted a consultant who produced a theory of change and evaluation strategy with a detailed plan for how the project would be evaluated. It will be important that current and future investments in Pakistan are able to implement more robustly a monitoring, evaluation and learning strategy that is focused on measuring progress towards outcomes. There is also a need to develop a strategy for sharing the findings and learning from this project and other ongoing investments focusing on risk with the broader DRM community in Pakistan and the region.

4.4 Conclusions

There is some evidence that the project contributed to the first HIEP output of high-quality processes and products, although evidence on the extent to which these were subject to a robust quality assurance process is limited. One of the most significant weaknesses of the project is the poor implementation of the M&E strategy and the lack of systematic evaluation and learning to inform project implementation. There is good evidence that the project has contributed to the second and third HIEP outputs of building sustainable cross-institutional relationships and strengthening in-country skills and capacities. However, concerns were raised in interviews around sustainability. There is good evidence that the project has identified champions and networks to advocate for the outputs and findings, although more could be done to strengthen sharing and uptake among other donors in Pakistan. There is limited evidence at this stage that operational actors endorse the findings. Furthermore, it is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments. While the project has done well to develop valuable products and learning, including physical and fiscal risk assessment reports, which have been promoted through a range of forums and with a range of audiences, there has been a lack of a systematic and concrete uptake and dissemination plan. Furthermore, the lack of knowledge products developed represents a missed opportunity. There is some evidence that the HIEP virtual team has worked to achieve collective impact, but improvements can be made to better improve communications around the HIEP and its findings in country.

5. Impact: What contribution will the project make to the HIEP aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

It is too early to identify longer-term changes and impacts at this stage. There are some signs of early contributions to change. However, there are no clear plans in place for monitoring and evaluating the project's contribution to longer-term outcomes.

It is too early to identify the extent to which the project has contributed to the HIEP outcomes of new funding instruments and frameworks for investment into evidence and innovation; changes in skills and behaviours of humanitarian actors to promote the regular use of evidence; and investment of policy and practice actors in social, economic and political innovations. Furthermore, it is too early to assess the contribution of the project to the outcome stated in the project theory of change of decision makers taking informed DRM policy actions and investments.¹⁰⁵ However, there is some evidence of progress towards this.

¹⁰⁵ Programme Theory of Change and Evaluation Strategy, p.11.

Some respondents pointed out early signs of changes in attitudes and mindsets of Government decision makers towards disaster preparedness, evidenced by the increase in demand in Government for risk assessments to be conducted (e.g. recent requests from the Governments of Punjab and Sindh), which have contributed to leverage of further World Bank investments; and the figures and narrative generated by the fiscal risk assessment were also picked up by the national media, and have provided the NDMA with ammunition to make its case to Government decision makers for investing in DRM.¹⁰⁶ Furthermore, one respondent pointed out that this project has triggered further World Bank investment in the sector to the tune of around \$250m, and that there is a pipeline of further five-year investments running until 2021; however, it is not possible to verify or evidence the validity of this claim.¹⁰⁷ While this has the potential to bring about transformative change in DRM investment in Pakistan, there is a need for longer-term monitoring of changes in knowledge, attitudes and behaviour to ensure that longer-term outcomes brought about by these investments can be sustained. Furthermore, there is a need for greater sharing of this learning among other donors to strengthen how investment in the sector brings about transformative change. The World Bank should now focus on developing a clear longer-term monitoring, evaluation and learning plan to track whether, and how, these changes are sustained, particularly around ownership and capacity of NDMA and technical agencies.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

Building capacity of government institutions has formed a core part of the project's work, although more work is needed to strengthen capacity at the provincial level.

Capacity building of Southern actors, particularly government institutions, lies at the core of the project approach, although it is focused more on technical skills around contributing to risk assessments rather than on the promotion of research and application of evidence. The strengths of this approach have already been discussed above. Another critical aspect of local capacity raised by some respondents is the importance of building capacity at the level of the Provincial Disaster Management Authorities (PDMAs). While some respondents pointed to the challenge of very weak capacity at the provincial level and the need to take a national rather than localised approach to ensure that coordination, quality and consistency is overseen at the centre,¹⁰⁸ others highlighted the weak role of the PDMAs in the NWG and the importance of developing capacities in the provinces to an optimum level, given their focal role in disaster response.¹⁰⁹ This need for stronger engagement between national and provincial level was borne out by a recent NDMA presentation to donors which, according to one donor, failed to tackle the issue head-on and left many donors very disappointed and underwhelmed.¹¹⁰

5.2 Strengths

There are some signs of early contributions to change, with some examples cited of changes in attitudes and mindsets of Government decision makers towards disaster preparedness, and the increase in Government demand for risk assessments. The project has been successful at

¹⁰⁶ Interviewee 275.

¹⁰⁷ Interviewee 43.

¹⁰⁸ Interviewees 279, 280, 283.

¹⁰⁹ Interviews 274, 276, 279, 280.

¹¹⁰ Interviewee 276.

strengthening the capacity of Southern actors in contributing to physical and fiscal risk assessments, particularly at the national level.

5.3 Areas to develop

There is a need to develop a clear plan in conjunction with the external evaluation team for monitoring and evaluating, and learning from, the project's contribution to longer-term outcomes and overcoming sustainability risks. There is also a need to consider in future capacity building programming how capacity can be strengthened at the provincial level.

5.4 Conclusions

It is too early to identify longer-term changes and impacts at this stage. There are some signs of early contributions to change. However, there are no clear plans in place for monitoring and evaluating the project's contribution to longer-term outcomes and overcoming sustainability risks. Building capacity of government institutions has formed a core part of the project's work, although more work is needed to strengthen capacity at the provincial level.

6. Summative phase 1 conclusions

The project has addressed issues highly relevant to the humanitarian sector and has responded to a critical need for investment in disaster risk information and innovation. Its evolutionary approach to structured engagement and consultation with local actors, based on lessons learnt from previous work, has enabled the establishment of a locally owned risk assessment process and strengthened capacity and empowerment of the NDMA and technical agencies to advocate for more robust disaster risk information.

The project has generated high-quality and highly valued products and processes, and important learning for developing and implementing physical and fiscal risk assessments in collaboration with Government stakeholders in a fragile and conflict-affected context. The project has successfully contributed to the development of local skills and capacities in designing and conducting risk assessment processes, as well as strengthening relationships and engagement between Government, the private sector and academia in Pakistan. The project has also identified in-country champions and networks for promoting the findings and learning from the work, and has focused in particular on knowledge sharing within the World Bank and GFDRR in the region, as well as globally.

One of the major weaknesses of the project is poor implementation of the M&E strategy which was designed to test the theory of change and critical assumptions underpinning the project's design, track progress towards outcomes and feed learning back into project implementation, and communicate findings and learning to both internal and external audiences. There is a need to develop a clear plan for monitoring and evaluating the project's contribution to longer-term outcomes and overcoming risks to the sustainability of the project's outputs. There is also a need to develop a concrete strategy for disseminating the project's key findings and learning through a small number of tailored knowledge products targeted to key actors in Pakistan and the region.

Other weaknesses include the absence of integration of gender considerations into the design, the lack of linkages made to other initiatives implemented by other donors in Pakistan, and the lack of transferable learning to other fragile and conflict-affected states (FCAS), although the latter was constrained by the lack of funding for the project to scale up to other low-income and fragile contexts.

7. Recommendations at case study level

Recommendations for World Bank/GFDRR:

1. Develop a strategy for communicating and disseminating the project's key findings and learning, based on a simplified and prioritised version of the strategy presented in the project's original evaluation strategy. This should identify a small number of knowledge products to be shared with key external actors in Pakistan as well as with DFID, World Bank and GFDRR staff globally, and should include a short methodological briefing note on conducting risk assessments, drawing on learning from this and other work, as well as a best practice briefing note.
2. Develop a longer-term M&E strategy that tracks the contribution of this work and the broader World Bank risk portfolio in Pakistan to longer-term changes in mindsets, attitudes and the policy environment. This should include developing a mechanism for real-time learning to ensure findings feed into implementation, as well as an evaluation commissioned by GFDRR in one to two years' time to assess contribution to outcomes and impact.

Recommendations for DFID:

1. Support the World Bank and GFDRR with developing a communication and dissemination plan, identifying where DFID can use its own networks to leverage uptake.
2. Develop a plan for sharing and advocating for the findings and learning of this project, and the HIEP more broadly, with DFID staff and key operational actors in Pakistan.
3. Provide more opportunities to project implementers to engage in cross-HIEP learning events and lesson-sharing forums, particularly on topics such as knowledge dissemination and maximising opportunities for uptake.

Case Study 2: Expanding the Use of Cash Transfers in Emergency Response

Tasneem Mowjee, December 2015

1. Introduction

This case study report forms part of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP).¹¹¹ The five-year evaluation process tracks the DFID programme from 2013–18. The evaluation identified eight HIEP-funded projects as case studies. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18.

In its concept note to the HIEP management committee in 2013, DFID identified five challenges with expanding the use of cash transfers, including the lack of robust evidence demonstrating the impact (causal relationship) of food aid and cash on nutrition outcomes, and the lack of evidence around whether longer-term social protection programmes can be adapted to meet the additional needs that arise in times of crisis. Therefore, the HIEP is funding a range of projects to address evidence gaps relating to the use of cash transfers in emergency response:

- The Cash Learning Partnership (CaLP) to 'strengthen and disseminate evidence-based guidance on the use of cash transfer programming in emergencies'. This comprised two outputs – the Fit for the Future (Fff) study to develop clear recommendations on appropriate institutional frameworks to enable delivery of cash in emergencies at scale, and the development of e-transfer guidelines for NGOs and operational standards for the secure use of personal data in cash and e-transfer programmes. The project ran from January 2013 to March 2014 and had a budget of £90,500.
- The Research on Food Assistance for Nutritional Impact (REFANI) project, which runs from March 2014 to May 2017 and has a budget of £3.28 million. It is a consortium comprising Action Against Hunger (ACF) International, Concern Worldwide, the Emergency Nutrition Network (ENN), and University College London (UCL).¹¹² The project aims to strengthen the evidence base on when and how cash and voucher-based food assistance programmes have an impact on child nutritional status, and the cost-effectiveness of different interventions. It is based on country studies in Pakistan, Niger and Somalia, using cluster Randomised Control Trials (cRCTs) in Pakistan and Niger and a non-randomised cluster controlled trial design in Somalia.¹¹³ ECHO has complemented DFID's funding by financing a Cost-Effectiveness Analysis (CEA) in Pakistan and Niger and a fourth intervention arm ('double cash') in Pakistan, and by contributing to the Research Uptake Strategy (RUS), including funding the Communications and Research Uptake Officer (CRUO) post.
- A study on shock-responsive social protection systems, which runs from March 2015 to March 2017 and has a budget of £998,520. Oxford Policy Management (OPM), in partnership with the Overseas Development Institute (ODI), CaLP and INASP, is undertaking the study. The study aims to strengthen the evidence base on when and how social protection systems can better scale up in response to different types of shocks in low-income countries and fragile and conflict-affected states, thus minimising negative shock impacts and reducing the need for separate humanitarian responses. It comprises desk-based analysis, including a literature review, and six case studies: three in-depth case studies in Mali, Mozambique and Pakistan; two lighter country case studies, in Lesotho and the Philippines; and a light case study of the region-wide shock-responsive social protection policies in the Sahel, with fieldwork in Burkina Faso and Senegal.

¹¹¹ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

¹¹² Action Against Hunger uses the acronym ACF which is used in this report.

¹¹³ See: <http://www.actiongainsthunger.org/refani>

2. Methodology

All case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact, and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process.¹¹⁴

During the formative phase, the case study focused on the CaLP project since the others were at very early stages, so it was not possible to comment on them. The CaLP project is complete so this case study report focuses mainly on the REFANI study, which is in the data collection phase and has started work on laying the foundation for research uptake. The shock-responsive social protection systems project has only just completed the inception phase, so it was too early to assess fully its potential to contribute to the HIEP theory of change (ToC). It will be more appropriate to assess the projects in the second summative phase, in 2017.

The evaluation team had planned a country visit to Pakistan in November 2015 to explore evaluation questions and links with other HIEP-funded projects and other relevant initiatives. The aim was to have a combined field visit with the case study on the HIEP-funded project implemented by the Global Fund for Disaster Risk Reduction in Pakistan. However, the REFANI consortium argued that the study team was in the midst of baseline data collection and the ACF Pakistan office had limited capacity to support the visit due to several other international visitors. Therefore, this case study is based instead on 26 telephone interviews with the REFANI consortium, members of REFANI's Nutrition Research Steering Committee (NRSC), the project manager for the shock-responsive social protection systems study, DFID advisers, donors, and relevant external stakeholders. This report is also based on a review of documents related to the projects covered by this case study as well as DFID's work relating to humanitarian cash transfers more broadly.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP projects have responded to needs identified and other emerging needs and opportunities to invest in humanitarian evidence and innovation

Both the REFANI and the shock-responsive social protection systems studies involved a literature review during the inception phase to identify gaps in existing evidence and develop appropriate research questions. Since DFID is funding the research component of the REFANI project, but not the interventions upon which the research is based, the researchers worked with the NGO consortium partners in each study country to identify which research questions were feasible to address within the context of planned or ongoing programme interventions.

Several external interviewees felt that the REFANI study has the potential to produce new and interesting evidence on the links between cash-based programming and the nutritional status of

¹¹⁴ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

children.¹¹⁵ The CEA of different interventions within and across the Niger and Pakistan studies was of particular interest to some stakeholders.¹¹⁶

There has been discussion of adapting social protection systems to respond to additional needs during a humanitarian crisis for a few years, with an ODI project on ‘social protection and the response to shocks’ operating from 2012–2016,¹¹⁷ ECHO engaging increasingly on this issue (in collaboration with DFID)¹¹⁸, and CaLP’s FfF study including a paper on the subject. The issue of multi-sectoral assistance and social protection systems has also been raised in the consultations for the World Humanitarian Summit (WHS) while the High Level Panel on Humanitarian Cash Transfers has recommended leveraging ‘cash transfers to link humanitarian assistance to longer-term development and social protection systems’ (ODI and CGD 2015). The inception report for the social protection systems study identifies several forums where this issue has been or will be discussed (OPM 2015). Thus, this is clearly a topical issue in the humanitarian sector and the study has the potential to contribute to the current debates.

The REFANI project has faced some unplanned events due to the nature of the contexts in which it is operating. These include challenges in Pakistan with hiring female enumerators, extremely high summer temperatures and Ramadan, which affected baseline data collection.¹¹⁹ The team also faced difficulties with finding a suitable researcher for the qualitative research in Niger and developing an appropriate study design for Somalia.¹²⁰ Nevertheless, the consortium has been able to put in place measures to address these obstacles.

An unplanned challenge for the REFANI consortium as a whole was a budget revision at the end of the inception phase because the project was over budget once the consortium had calculated real costs for the different components. Based on initial indications from DFID, the consortium had allocated 10% of the study budget for implementing an ambitious Research Uptake Strategy (RUS). However, DFID suggested reducing this to 3% so that adequate funding could be allocated to implementing the cRCTs in Pakistan and Niger. This meant that the consortium had to scale back the RUS and find additional funding for it from ECHO.

The REFANI project included gender considerations in its literature review, examining evidence around targeting cash transfers to women versus men and the implications of these decisions, in particular (REFANI 2015). Both the Pakistan and Niger studies are using qualitative research methods to get a better understanding of the impact pathways of interventions from the perspective of individuals, households and communities. This includes the role and decision making of women (REFANI 2015b).¹²¹ The studies are also gathering gender-disaggregated data as part of the data collected on the nutritional status of the children covered by the interventions.¹²²

In its inception report, the shock-responsive social protection systems study includes gender in one of its questions for mapping social protection, humanitarian and disaster risk management

¹¹⁵ Interviews 106, 107, 108, 110, 113, 116, 137 and 230.

¹¹⁶ Interviews 110, 113 and 114

¹¹⁷ See <http://www.odi.org/projects/2559-social-protection-covariate-shocks-mozambique-zimbabwe-global-financial-crisis>

¹¹⁸ ECHO commissioned a series of case studies of social protection systems in crisis contexts in 2015 – interview 109.

¹¹⁹ Interviews 102 and 104

¹²⁰ Interview 105

¹²¹ Interviews 104, 182

¹²² Interview 104

interventions (OPM 2015).¹²³ There is no other explicit reference to gender although the team plans to look at the gender breakdown when analysing data on those affected by different types of shocks. The study's logframe is aligned with the HIEP logframe. OPM, which has also managed the HIEP-funded project on Capacity Building for Disaster Risk Management from 2013–2015, was planning to include the Research and Evidence Division (RED) gender indicators that were in the logframe provided for the earlier project. However, the HIEP logframe attached to the call for proposals for the social protection systems study no longer included these RED indicators so OPM did not include them.¹²⁴

Neither REFANI nor the shock-responsive social protection systems studies have an explicit focus on social inclusion although the latter is using a vulnerability/poverty analysis as one of its four analytical tools and plans to apply a political economy lens across the analytical tools, which involves understanding 'the distribution of power and wealth between different groups and individuals' (OPM 2015: 25). It is also likely to discuss who is more vulnerable to particular kinds of shocks during Key Informant Interviews (KIIs).¹²⁵ Since the study is not going to be able to conduct a large amount of primary research on vulnerability, it will draw on existing analyses at country level. The REFANI study includes questions on social capital in both the quantitative and qualitative research. In Pakistan, the study is gathering information on social capital through KIIs with village heads or members of their family only.¹²⁶ This suggests a risk of overlooking the perspectives of those from socially excluded households so it is helpful that the Niger study is trying to include socially excluded households in the qualitative study.

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

The REFANI research team as well as external stakeholders recognise that ensuring comparability across the country studies is a challenge for the project because the research team has had to base the research on existing interventions rather than being able to design comparable interventions (for example, the cash grant amounts in Niger and Pakistan make different total contributions to household income, making it harder to compare findings).¹²⁷ The technical resource group (TRG) within the consortium, led by UCL and the ENN, has examined technical updates and lessons learned from the Niger and Pakistan country studies to understand which of the gaps identified through the literature review are being addressed by each study and to what extent these are comparable (i.e., with both case studies addressing the same issues) and to what extent they are complementary (thus enabling the study to cover a broader range of questions).¹²⁸ Also, the qualitative research should provide information that helps to identify the extent to which the findings from the cRCTs are context specific or can be generalised.¹²⁹

The social protection systems study has also grappled with issues of comparability in its design. On the one hand, ensuring that the study responds to the needs of DFID programme staff and policy makers and practitioners at country level would mean tailoring it to each context but this would

¹²³ The question is: To what extent have policy makers taken gender into account in designing social protection, humanitarian and DRM interventions? To what extent is there a difference between men and women in the ability to access social protection interventions / humanitarian assistance?

¹²⁴ Interview 184

¹²⁵ Interview 184

¹²⁶ Interview 182

¹²⁷ Interviews 69, 105, 106 and 107

¹²⁸ Interview 105

¹²⁹ Interview 106

reduce comparability. On the other hand, DFID research specialists were keen for the study to be consistent in the questions addressed across the case studies in order to produce comparable data. The study team decided to compromise by undertaking three in-depth case studies where it was likely that country-level stakeholders would take forward the work, and three lighter case studies.¹³⁰

The social protection systems study team engaged with a range of stakeholders during the inception phase through participation in several events (OPM 2015). This helped to develop consensus on the ways in which they could most usefully contribute to current debates. It worked particularly closely with the World Bank and UNICEF, both of which are engaged in closely related interventions and studies, to avoid duplication and increase the relevance of study outputs.¹³¹

One of the challenges for both the REFANI and the social protection systems studies is balancing the demand for the rapid production of evidence to inform humanitarian programming versus taking the time needed to conduct rigorous research. For example, while the academic members of the REFANI consortium wanted to publish the literature review in peer-reviewed journals (which could have taken up to a year), the guidance from DFID was that it was better to get it published quickly.¹³² As a result, the REFANI consortium published the literature review online and a condensed version in ENN's Field Exchange.¹³³ The social protection systems study team is aware that the topic of shock-responsive social protection systems is an important one for the WHS but that they will not have final outputs available until the end of 2016, several months after the WHS. Therefore, it is considering how best to contribute to the discussions at the summit and in other fora.¹³⁴

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

HIEP-funded programmes relating to cash transfers are part of a broader DFID approach to scaling up the use of cash in emergencies.¹³⁵ While DFID's internal paper on its approach to 'realising the transformative potential' of cash includes a mention of HIEP-funded projects, there is no mechanism to connect partners implementing HIEP projects to each other or to those conducting other DFID-funded studies on cash transfer programming. Therefore, the process for making connections is ad hoc. DFID had provided contact details to the REFANI consortium for initiatives such as the International Initiative for Impact Evaluation (3ie) and the Nutrition Embedding Evaluation Programme (NEEP).¹³⁶ However, it was by chance that researchers from the REFANI and social protection systems studies had met at an ENN conference, which led to REFANI sharing its literature review.¹³⁷ OPM had tried to identify other HIEP implementing partners to ensure that it had a coordinated approach to stakeholders in countries with multiple HIEP projects. However, the

¹³⁰ Interview 184

¹³¹ Interview 184

¹³² Interview 102

¹³³ This means that it will contribute to output indicator 1.3 in the HIEP logframe ('Number and topic of literature review research papers available in open access format') but not to output indicator 1.6 ('Number of peer reviewed publications produced (i.e. journal articles and other types of externally peer reviewed publications), and percentage of peer reviewed publications which comply with our open access policy').

¹³⁴ Interview 184

¹³⁵ DFID's paper on '*Cash programming in crisis situations: realising the transformative potential*' outlines the rationale and Theory of Change for this, along with 4 'pillars' or areas of focus. These are: filling key evidence gaps (through the HIEP and other DFID-funded research on cash transfer programming), influencing policy debates (including by convening the High Level Cash Panel), piloting approaches to deliver cash at scale, and investing in capacity to deliver cash at scale.

¹³⁶ Interview 103

¹³⁷ Interview 104

information was not entirely clear, with some projects appearing to have changed names.¹³⁸ As a result, it was only through this evaluation that OPM realised that the social protection systems study had an overlap with some REFANI stakeholders in Pakistan, particularly the Benazir Income Support Programme (BISP), a government cash transfer programme (the largest safety net programme in the country), and a stakeholder that both projects are seeking to influence.¹³⁹

As mentioned in Section 3.1.2, the social protection systems study team has engaged proactively with the World Bank and UNICEF, which are undertaking similar work, particularly in the Sahel. It has also coordinated with ECHO's work on social protection in fragile and conflict-affected states. The REFANI team has shared basic information about the project with relevant initiatives in Pakistan, such as the Micronutrient Initiative and the Cash Working Group.¹⁴⁰ The principal investigator also presented the study at the Nutrition Development Partners Group in April 2015, facilitated by the World Bank, which sees the study as a highly relevant one for the context.¹⁴¹ A couple of interviewees identified the MAM'Out project in Burkina Faso, commissioned by ACF France and financed by ECHO, as a potentially relevant study for REFANI since it used RCTs to assess the role of multi-annual and seasonal cash transfers in preventing acute malnutrition in children.¹⁴²

In Somalia, Concern, which is the operational partner for the REFANI study, has participated in a nutritional causal analysis with other INGOs, including ACF.¹⁴³ Since there is a need for further evidence, a DFID interviewee felt that there was potential for the REFANI study to inform and influence the direction of nutrition programming in Somalia, although the team is still in the process of finalising the study design.¹⁴⁴

3.1.4 Extent to which HIEP products are relevant to decision makers

The CaLP e-transfer guidelines and the principles and operational standards for data privacy were documents that had been disseminated widely and promoted actively¹⁴⁵ and had contributed to all four behavioural changes in the HIEP ToC.¹⁴⁶ The e-transfer guidelines are part of the user-focused review of outputs for this evaluation, which contains further details on how the guidelines have been made relevant for target audiences, including through translation into French and Spanish.

The social protection systems study had conducted extensive consultations at global, regional and national levels during the inception phase to ensure that the research questions were relevant, and to identify the needs of potential users. The team plans to continue the consultation process during the implementation phase to ensure that outputs are relevant to users and to translate key documents into French (OPM 2015). The consortium includes INASP, an international development charity aiming to improve access, production and use of research information and knowledge.¹⁴⁷

¹³⁸ Interview 184

¹³⁹ Initially, ACF in Pakistan was using the BISP poverty scorecard to identify beneficiary households for its Women and Children/Infants Improved Nutrition in Sindh (WINS) programme, which is the intervention being studied by REFANI.

¹⁴⁰ Interviews 137 and 183

¹⁴¹ The Nutrition Development Partners Group comprises donors, UN agencies and international NGOs, and is coordinated by the World Bank. ACF Pakistan is a member of the group. Interview 230

¹⁴² See <https://clinicaltrials.gov/ct2/show/NCT01866124> for further details. Interviews 104 and 108.

¹⁴³ ACF Somalia is a partner in another HIEP-funded project, Secure Access in Volatile Environments (SAVE)

¹⁴⁴ Interview 69

¹⁴⁵ Interview 231 and CaLP (2014)

¹⁴⁶ Interviews 231 and 241

¹⁴⁷ See <http://www.inasp.info/en/>

The systematic review had not been finalised at the time of this case study, so it was too early to assess its relevance for decision makers. One challenge for DFID had been the potential contradiction between the High Level Cash Panel’s assessment that there is sufficient evidence to promote the scale-up of cash transfer programming and the standard methodological approach for systematic reviews of focusing on experimental and quasi-experimental studies, which were difficult to identify. Therefore, the systematic review adapted the approach to include economic studies on the efficiency of cash-based approaches as well as observational, qualitative and mixed-methods studies. Nevertheless, the review found that the body of evidence reviewed was of low quality due to methodological limitations, limiting the strength of the conclusions for informing humanitarian policy and practice (Doocy and Tappis 2015).

There have been limited outputs from the REFANI and social protection systems studies as they are at early stages. However, REFANI has published the Pakistan study protocol in a peer-reviewed publication and its literature review. Members of REFANI’s NRSC interviewed for this evaluation had not read the literature review closely and there was no knowledge of it among the country-level stakeholders interviewed.¹⁴⁸ However, it had only been published recently so it is likely to take time for it to reach a relevant audience.¹⁴⁹ The social protection systems study was finalising its literature review for publication.

The REFANI consortium had established a website hosted by ACF and the CRUO had been keeping it up to date with information not only from the project but also related reports and articles. The consortium has also produced project implementation updates to inform stakeholders of progress.

3.2 Strengths

The strength of the CaLP e-transfer guidelines and data privacy principles and operational standards, the REFANI study, and the social protection systems study is that they are responding to gaps in evidence that have been identified as relevant through a literature review and/or consultation with stakeholders. CaLP’s work has already proved useful to humanitarian agencies and there is considerable interest in the issues being researched by the REFANI consortium and the social protection systems study.

Moreover, these projects have contributed, or have the potential to contribute, to the behavioural changes in the HIEP ToC. CaLP has been proactive in promoting the e-transfer guidelines and data privacy document and both the REFANI and social protection systems studies have clear research uptake strategies. These strengths have been due to DFID selecting appropriate partners that have been committed to ensuring the relevance of the projects and research uptake.

It is very positive that ECHO and DFID are providing complementary funding to the REFANI project, enabling the consortium to develop stronger research and uptake. It is also helpful that the social protection systems study will complement and contribute to work being undertaken by ECHO.

3.3 Areas to develop

One of the weaknesses with the HIEP is the lack of a mechanism to enable project implementers to communicate and share information with each other, in order to avoid duplicating efforts or making separate approaches to the same stakeholders. This also means that there is a limited opportunity to make linkages across projects. For example, ECHO clearly sees complementarity between the

¹⁴⁸ Interviews 106, 107, 108, 113, 115, 116, 117, 137, 183, 230,

¹⁴⁹ A separate user-focused review of HIEP outputs considered this in more detail – key points included in main report.

REFANI and shock-responsive social protection systems studies, but the project teams had not yet established communications to identify potential synergies.

DFID's lack of clear guidance on the appropriate level of funding for research uptake was also a weakness that affected the REFANI study. Therefore, DFID could perhaps develop guidance on research uptake for partners, including indications for appropriate levels of funding (while DFID has an online discussion group on research uptake, the REFANI CRUO's attempt to seek advice on implementing a RUS elicited no response).

Although DFID has an overarching ToC and view about how to realise the transformative potential of cash transfers in humanitarian response, it has yet to develop a strategy for promoting the evidence and messages emerging from HIEP and non-HIEP funded projects around cash transfer programming.

Due to the delay with agreeing the final budget for the REFANI project with DFID and the need to secure additional funding for the RUS, the CRUO has only been in post since May 2015. She was focusing on global stakeholders initially. While the NGO members of the consortium, who are linked into national networks, had provided some information and updates on the study, it was clear from the Pakistan interviews that there was little or no knowledge of the REFANI website and outputs such as the project implementation updates at national level. Therefore, it would be a useful next step for the REFANI consortium to reach out to national stakeholders.

As recognised by the REFANI Niger study, it is important to include socially excluded households when collecting data on social capital. Therefore, the Pakistan study should ensure that its qualitative research on social capital includes them.

3.4 Preliminary conclusion

Overall, the projects covered by this case study have the potential to be relevant to the evidence needs of the humanitarian sector and to contribute to the behavioural changes in the HIEP ToC. However, it is premature to make a clear judgement since the two main studies are still at early stages. There is some evidence that the projects could be made more coherent if DFID had mechanisms to promote information sharing across the research projects that it is funding, from the HIEP and other sources.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

Output 1: High quality and relevant research products: The CaLP, REFANI and social protection systems projects have all had advisory groups to provide technical guidance, which has been one form of quality assurance. REFANI's NRSC has been involved in approving study protocols and one member worked with the team to refine the qualitative research in Pakistan.

The REFANI consortium also has an internal TRG, while a UCL internal advisory group (comprising an anthropologist, two economists and a statistician) and the ENN technical directors have provided additional support. Furthermore, the study has undergone ethical review processes at both national and global levels (through the UCL Ethical Review Committee and through the Western Institutional

Review Board since the ENN does not have its own ethics committee). In both Pakistan and Niger, REFANI members have trained enumerators to ensure high quality data collection.

One challenge for the REFANI project is an error in sample size calculation, which means that the study is powered to see a 7% difference between the intervention arms and the control group, rather than the 4% originally planned.¹⁵⁰ A few interviewees raised concerns about whether failure to demonstrate a greater impact than originally planned would have a negative effect on the credibility of the findings.¹⁵¹ However, this was balanced by a view that the findings from the qualitative side of the research would help to explain the findings in a useful way, even if the study does not result in a significant impact on the nutritional status of the children.¹⁵² UCL has also argued that the studies are powered to detect changes in prevalence that are important for classifying the public health significance of the situation and the decision about whether to intervene.¹⁵³

The social protection systems study team has developed a research protocol, including templates, for all the case study teams. It has also appointed one team member to act as a research coordinator, examining data from across the case studies for lessons learned and to ensure that the data are addressing the research questions.¹⁵⁴

Output 2: Sustainable cross-institutional partnerships: The REFANI consortium comprises both research institutions and operational humanitarian agencies, a model that has proved to be challenging.¹⁵⁵ Disagreements between consortium members regarding budgeting led to the project being over budget initially (as indicated in Section 3.1.1), while the lack of a common understanding of how research should be organised and managed had a negative impact on relationships between some members.¹⁵⁶ There have also been challenges relating to roles and responsibilities.¹⁵⁷ The operational agencies are responsible for delivering the interventions on which the research is based, while also hiring and managing data collection teams, and procuring the necessary equipment because the research institutions do not have a country-level presence. The research institutions are responsible for ensuring the quality of the research and delivering on certain milestones, but without being able to design or control the interventions. The NGO members of the consortium have been used to sub-contracting research institutions and having a clear line of accountability, but ACF USA is the primary contract holder for the REFANI consortium, providing sub-contracts to each of the members, leaving the lines of accountability between sub-contractors such as Concern, UCL and the ENN unclear. This has resulted in some consortium members spending considerable time and effort in clarifying lines of communication and coordination and even organising a facilitated meeting to resolve differences. To address the challenges, consortium members have developed documents outlining their respective roles and responsibilities in each of the three countries.

Within the consortium for the social protection systems study, ODI and OPM are both experienced in policy research while the aim of including CaLP and INASP is to ensure dissemination and research uptake, particularly through CaLP's well-established networks at regional and national levels.

¹⁵⁰ Following a field visit to Niger, the study team decided to change the study design for both Pakistan and Niger from studying the difference in the incidence rates of acute malnutrition to looking at a change in the prevalence of acute malnutrition. There was an error in the design of the spreadsheet for calculating the sample sizes for the prevalence studies, resulting in an underestimation of the sample size required to detect a given decrease in the prevalence of global acute malnutrition. The TRG detected the error when it reviewed the revised protocol for the Niger study. The TRG leaders then recalculated sample sizes for both studies using alternative software.

¹⁵¹ Interviews 69 and 106

¹⁵² Interviews 104 and 106

¹⁵³ Comment on draft report

¹⁵⁴ Interview 184

¹⁵⁵ Interviews 102, 104 and 105

¹⁵⁶ Comment on draft report

¹⁵⁷ Interviews 105, 111 and 112

Therefore, the relationships are between organisations that are not very dissimilar and that have clear-cut roles.

Output 3: Strengthening skills for designing, commissioning and applying humanitarian research:

The operational agency members within REFANI already have experience of commissioning and managing research although perhaps not of the same scale as the REFANI project.¹⁵⁸ For example, ACF is engaged in several research projects in Pakistan and elsewhere, accessing funding from ECHO's Enhanced Response Capacity fund as well as DFID. The challenges related to the consortium highlight the need to draw out lessons on how best to establish cross-institutional partnerships.

One of the aims of funding CaLP for the FfF study was also to enable it to commission and manage academic research, going beyond the operational research with which it is very familiar. However, there were several challenges with this (as noted in the formative phase case study report and in CaLP (2014)). It is clear from the review of uptake of the CaLP products that the more operational e-transfer guidelines and the data privacy principles and standards have been far more successful.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and to contribute to outcomes

The CaLP e-transfer guidelines and the data privacy principles and operational standards have contributed to all four behavioural changes in the HIEP ToC.¹⁵⁹ The other projects covered by this study are at too early a stage to have led to behavioural changes, but both the REFANI and social protection systems studies have objectives and logframes aligned to those of the HIEP and a RUS.

As described in Section 3.1.1, the REFANI consortium revised the original RUS submitted with its inception report, in line with DFID's guidance, to 3% of the overall project budget. However, ACF was proactive in obtaining additional funding from ECHO for the RUS. With this, the consortium engaged a CRUO in summer 2015 who has been consulting mainly with stakeholders at global level about their information needs and developing the stakeholder analysis that accompanied the revised RUS.

ECHO was interested in financing the RUS because it realised that its other partners financed to conduct research were weak on ensuring research uptake and it felt that there was an opportunity to learn lessons that could be shared across partners. However, it recognises that its funding is based on projects achieving short-term results and that it will be challenging for the consortium to demonstrate immediate results with research uptake when the main findings from the study will not be available till the end of 2016.¹⁶⁰ This points to the challenge of ensuring that projects have funding to track research uptake after the production of findings, rather than having to end both research and uptake activities at the same time.

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

The REFANI project is aligned with the HIEP logframe and the consortium reports against four HIEP logframe outputs:

- Research and evidence products are generated that are high quality and relevant to humanitarian policy makers and practitioners
- Cross-institutional relationships and partnerships are formed, so there is an active REFANI network influencing the uptake of research and evidence

¹⁵⁸ Interviews 111 and 112

¹⁵⁹ CaLP (2014), interviews 212 and 231.

¹⁶⁰ Interview 109

- New and innovative research methods applied to humanitarian evidence generation, which demonstrates that rigorous research is both feasible and ethical in humanitarian contexts
- Two aspects of the RED indicators that form part of Output 6 in the HIEP logframe – creating an appropriate RUS and integrating gender analysis components in each of the country studies.¹⁶¹

The social protection systems study has based its ToC and logframe on those of the HIEP (OPM 2015). Like REFANI, it is reporting against Output 1 in the HIEP logframe – ‘Research and evidence products are generated that are high quality and relevant to humanitarian policy makers and practitioners’. Its Output 3 – ‘A co-productive relationship is fostered with the intended end users of the research’ also fits with the second output in the HIEP logframe on establishing cross-institutional relationships.

In the case of the REFANI project, the HIEP cross-departmental model has not contributed to promoting uptake of findings by other parts of DFID. The lead adviser has not been involved in cross-departmental relationships as a result of managing a HIEP-funded project, beyond liaising with the programme manager in CHASE. CHASE provided project management support initially but this shifted when the lead adviser changed teams.¹⁶²

4.1.4 Extent to which the HIEP programme maximises the potential impact of its component parts (coherence of project with the whole)

Although DFID lead advisers for projects relating to cash programming do communicate with each other, as described in Section 3.1.3, at present, there is no mechanism for connecting HIEP project partners to each other, even when they are operating in the same country (as is the case for REFANI and the social protection systems study in Pakistan) and potentially working with the same stakeholders (BISP and other cash grant programmes in Pakistan). DFID humanitarian staff in Pakistan had little or no knowledge of the HIEP, which meant that they were unable to promote contacts and synergies between HIEP-funded projects being implemented there. For example, while the DFID nutrition adviser was aware of the REFANI study, she had no information on the HIEP. ACF in Pakistan had made the effort to brief DFID staff on the two HIEP-funded projects that it was implementing (REFANI and a project on providing safe water to children with severe acute malnutrition, funded through the Research for Health in Humanitarian Crises (R2HC) project) as well as other global DFID initiatives such as the START Fund. However, it had not received any information about other HIEP projects.¹⁶³

4.2 Strengths

The REFANI and social protection systems studies have measures in place to ensure that they produce high quality research products. They also have research uptake strategies and logframes that are aligned to the HIEP logframe, making it easier to assess their contribution to HIEP outputs. Their RUS should help them to deliver the behavioural changes in the HIEP ToC.

The contribution of the CaLP e-transfer guidelines and data privacy principles and operational standards to all four behavioural changes in the HIEP ToC is also a positive result.

Since ECHO’s funding instruments are short term and it is a results-based organisation that requires all projects to deliver tangible results during their course, it is difficult for it to finance longer-term research projects. However, HIEP-funded projects such as REFANI, offer ECHO the opportunity to

¹⁶¹ REFANI (2015a)

¹⁶² Information provided by email

¹⁶³ Interview 112

invest in longer-term research projects without having to shoulder the entire financing burden. Thus, the HIEP could be regarded as creating vehicles in which other donors can invest.

4.3 Areas to develop

The REFANI consortium experienced major challenges due to the different ways in which academic and operational agencies work. It would have been helpful if DFID had linked the consortium to ELHRA, which is implementing two HIEP-funded projects and which has a key focus on supporting academic-operational agency partnerships. Nevertheless, the REFANI consortium has learned valuable lessons, including through developing documents to clarify the roles and responsibilities of each partner. This could be a useful model for future consortia. Since one of the aims of the HIEP is to foster cross-institutional partnerships, DFID could perhaps organise a workshop at which different consortia (including those supported by ELHRA) could share their experiences and consolidate lessons learned that could be shared with organisations setting up consortia in the future.

One of the challenges for the HIEP with ensuring research uptake is that funding for research uptake activities ends once research activities have produced their results. This will make it very difficult to track research uptake after the end of the projects that it is funding. Therefore, for future projects, HIEP could consider following the example of the Improving Communication of Research Evidence for Development (ICRED) business case and allowing project partners to build in time for monitoring research uptake after the end of research activities.¹⁶⁴

The lack of information about HIEP-funded projects among DFID staff in Pakistan had meant that they were not in a position to support HIEP partners to share information across projects even though there were at least four HIEP-funded projects in the country. Therefore, it would be helpful if DFID could ensure more systematic engagement on HIEP projects with country-level staff members.

4.4 Conclusions

The projects covered by this case study have measures in place to contribute to Output 1 on high quality and relevant research products in the HIEP ToC although the REFANI project made an error in sample size calculation for the Niger and Pakistan studies. They have also either already contributed to behavioural changes or have the potential to do so. There is less evidence of links to HIEP outcomes, but the REFANI and social protection systems studies are at early stages.

Greater support from DFID for research uptake (both financial and in terms of allowing adequate time for tracking research uptake) could help the HIEP-funded projects to contribute more effectively to the behavioural changes in the HIEP ToC.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

While the CaLP e-transfer guidelines and data privacy principles and operational standards have contributed to the four behavioural changes in the HIEP ToC, they were not intended to contribute to the three outcomes. However, by helping to improve the effectiveness of humanitarian assistance (through the greater use of e-transfers), they could be said to make a small contribution to the HIEP

¹⁶⁴ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/428324/Business-Case-ICRED.pdf

at impact level (humanitarian actors have the capacities to deliver improved emergency response programmes and operations that are effective at supporting the most vulnerable people).

In the case of the REFANI and social protection systems projects, it is too early to identify contributions to HIEP behavioural changes and outcomes. However, there has been considerable debate about how humanitarian actors can engage with social protection systems, particularly at donor level and in the consultations for the WHS. The social protection systems study team participated in a number of workshops and conferences during the inception phase. These included an FAO workshop on social protection in humanitarian contexts and presentations on the study to ECHO and DFID staff (see OPM (2015) for a full list of events). The team recognises that the challenge will be to produce findings in time for the WHS and to meet the demand for speedy information.

This case study identified that there is also considerable potential for the REFANI study to feed into discussions around cash transfer programming as well as the links between poverty and malnutrition in Pakistan. The Pakistan National Disaster Management Authority (NDMA) and Office for the Coordination of Humanitarian Affairs (OCHA) recently organised a workshop on cash transfer programming in Islamabad at which the government indicated that it was not in favour of unconditional cash transfers, although the BISP is one of the largest government safety net programmes in the world. Evidence on whether cash grants can contribute to better nutritional outcomes would be a very useful and important contribution to the debate. There is also an increasing focus on addressing malnutrition in Pakistan both within the government (with the launch of a programme in Sindh) and other development actors (the World Bank is assessing how to make its programmes in Pakistan nutrition sensitive). There has been discussion in the past about incorporating a nutrition focus into BISP's work and, according to a BISP interviewee, the programme's management is open to innovative ideas and evidence on how cash transfers could deliver specific outcomes. Thus, the REFANI project has the potential to inform more effective nutrition programming as well.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

None of the case study projects have an explicit focus on building the capacity of Southern actors to produce evidence or access funding for research. However, the social protection systems study is working with national consultants in the case study countries and has a representative from LASDEL, a research institute from the Sahel, on its Research Advisory Group (OPM 2015).

The REFANI consortium has study teams comprising local staff members in each of the study countries, and consortium members have provided training to ensure high quality data collection. In Pakistan, since the research is being conducted in a conservative area, ACF sends a male and female pair of enumerators to collect data. The female enumerators are able to access women interviewees while the male enumerators consult male members of the household. This also provides security for female enumerators, as it would not be culturally appropriate for them to travel on their own. However, it was a challenge for the consortium to hire a sufficient number of female enumerators.

One interviewee highlighted the challenge of finding a local principal investigator for DFID-funded research projects because of the stringent qualifications required. In Pakistan, it is possible to get highly qualified individuals as a principal researcher, but they tend to be 'big names' that then have

limited engagement with the conduct of the research. This inevitably results in the appointment of an expat principal researcher.¹⁶⁵

5.2 Strengths

There is considerable potential for the REFANI and social protection systems studies to make important contributions to policy debates and programming decisions at the national and global levels as long as the teams are able to produce findings in a timely way to meet the demand for evidence. It will be interesting to examine the extent to which they have been able to do this in the second summative phase of the evaluation.

5.3 Areas to develop

None of the projects covered by this case study have an explicit strategy to build the research capacity of Southern actors although the REFANI and social protection systems studies are working with local researchers. If DFID wants a greater emphasis on this, it will need to put in place clear requirements and guidelines for partners.

5.4 Conclusions

It is still too early to make a clear judgement on the contribution of the projects covered by this study to bringing about change in DFID and key stakeholders.

¹⁶⁵ Interview 112

6. Gender and social diversity

No additional comments or information.

7. Other findings and comments

ECHO has found it helpful that DFID is willing to invest in robust, longer-term research such as the REFANI project and is co-financing it from its Enhanced Response Capacity global fund. However, it also needs evidence that can answer concrete operational questions quickly and help to inform its annual funding decisions. As DFID considers a second phase of the HIEP, it should take into account the fact that humanitarian actors also need evidence that addresses specific operational challenges and that can be produced quickly enough to be relevant in fast-changing crises.

The REFANI study includes a cost-effectiveness analysis (CEA) in Pakistan and Niger, co-financed by ECHO. The primary research questions for the CEA are: which intervention is the most cost-effective in preventing cases of acute malnutrition?; what is the cost per case of acute malnutrition averted in each country study?; and how do the cost-effectiveness results compare with evidence from other interventions aimed at addressing acute malnutrition? The two country studies also ask additional specific questions (REFANI 2015b). It may be useful for the HIEP Value for Money study to review the results of the CEA during the second summative phase.

Linked to the issue of bringing about the behavioural changes in the HIEP ToC, DFID had been slow to develop a strategy to promote the High Level Cash Panel's report, leaving it to the cash panel secretariat to identify opportunities for engaging with donors.¹⁶⁶ This suggests that having the time and resources, as well as a strategy, for using DFID-funded work to bring about change in the humanitarian sector goes beyond the HIEP.

8. Summative phase 1 conclusions

The overall conclusions of this case study are that the projects appear to be on track to deliver high quality and relevant outputs and to ensure research uptake, but it is too early to make a clear judgement. The main area for development is for DFID to develop mechanisms to ensure information sharing across HIEP-funded project partners and with DFID staff members at country level in order to promote a more coordinated and synergistic approach.

9. Recommendations at case study level

The REFANI and social protection systems studies are at too early a stage to make recommendations relating to them. At the level of the HIEP portfolio of projects covered by this case study, it would be helpful if DFID implemented the proposal in the draft HIEP influencing strategy to identify 'a DFID cash champion in the virtual team to lead thematic work on cash and ensure join up between relevant HIEP projects and policy colleagues'.

¹⁶⁶ Interview 115

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Case Study 2 Appendix: Contribution to Change

1. *What change has occurred?*

There has been a considerable increase in the electronic transfer of cash grants in the humanitarian sector, aided by the development of the ‘E-Transfers in Emergencies: Implementation support guidelines’ and principles and operational standards on ‘Protecting Beneficiary Privacy’. This has been through bringing about all four behavioural changes in the HIEP ToC.

Behaviour change 1: The data privacy principles and operational standards have not only helped to move forward conceptual discussions within the humanitarian sector but have also been referenced outside the world of humanitarian cash transfers, such as a conference on information and communications technology.

Behaviour change 2: Networks such as CaLP and the Electronic Cash Transfer Learning Action Network (ELAN) have promoted the use of the documents through a range of dissemination and learning events (detailed in CaLP’s final report to DFID) and by sharing them with humanitarian practitioners at field level. The Active Learning Network for Accountability and Performance (ALNAP), the Better than Cash Alliance and some global clusters have made the documents available on their websites. CaLP has been in dialogue with entities such as the Sphere Project and the Humanitarian Accountability Partnership (which is now part of the Core Humanitarian Standard alliance) about the inclusion of the two documents in wider humanitarian guidance, principles and operational standards. In addition, CaLP has developed an online training course on operationalising the protection of beneficiary data in e-transfer programmes (available from: <http://www.cashlearning.org/capacity-building-and-learning/e-transfers-and-operationalizing-beneficiary-data-protection>) and developed tools based on the e-transfer guidelines that are available on its website in a section specifically for tools (see <http://www.cashlearning.org/resources/tools>).

Behaviour change 3: A number of humanitarian agencies have hosted events with CaLP to disseminate the e-transfer guidelines and the data privacy principles and operating standards. These include an OCHA policy forum in December 2013, where the documents were distributed to participants; a half-day event hosted by ACF Canada and CaLP in Toronto on 5 March 2014; and a full-day event on 6 March 2014 on e-transfers, hosted by CaLP, American Red Cross and Mercy Corps.

Behaviour change 4: Humanitarian agencies have used the data privacy principles and operational standards in particular, with some NGOs incorporating them into their Standard Operating Procedures (SOPs) and some humanitarian agencies adapting them for use as an annex to service agreements with implementing partners who have access to beneficiary data when providing the electronic transfers. The UN High Commissioner for Refugees (UNHCR) and Norwegian Refugee Council have incorporated them into their cash guidance. Organisations working with humanitarian agencies on developing internal policies or data systems (such as Privacy International and Reboot) have also made use of the ‘Protecting Beneficiary Privacy’ document. ACF has applied the e-transfer guidelines in preparedness activities in the Philippines.

2. *What did DFID do that might have contributed to the change?*

HIEP funding for the development of the e-transfer guidelines and the data privacy principles and operational standards was very timely in responding to demand. For example, both documents were published in time to share with cash practitioners involved in the response to Typhoon Haiyan in the Philippines. They were also produced at a time of discussions relating to counter-terrorism measures and the need for personal privacy and data management. The timeliness and relevance of the outputs has contributed to their uptake.

3. *What other factors contributed to this change?*

A number of factors have contributed to the greater use of e-transfers and attention to data privacy issues. The push to provide cash transfers in responses to large-scale emergencies such as Typhoon Haiyan, the Syria crisis and the Nepal earthquake, combined with an increasing availability of technology for electronic transfers created a demand for more information on this topic. According to CaLP's final project report, the establishment of a Technical Working Group, bringing together a range of stakeholders, also contributed significantly to the uptake and use of the outputs. In September 2013, CaLP convened a roundtable meeting for a diverse range of stakeholders to discuss the data privacy document. Discussions about its applicability at field level led to a more operational document, which has contributed to its widespread use.

4. Assessment of the significance of the change

The shift in the humanitarian sector towards the greater use of electronic payments for cash grants is an established change. Technology developments will help to ensure that the change will expand in scope and be sustained.

5. Assessment of the strength of the evidence to demonstrate the reported change

There is a strong evidence for the four behaviour changes described above. This includes data on downloads of the documents from CaLP's website, documentary evidence in the form of CaLP's final project report to DFID, and verbal evidence from CaLP and ELAN.

6. Assessment of the significance of DFID's contribution

There is evidence that the HIEP has made an important contribution to supporting change in the humanitarian sector by financing the production of the e-transfer guidelines and the principles and operational standards on data privacy. In particular, there is some evidence that the document on data privacy raised awareness of the importance of this issue.

Assessment definitions:

a) Assessment of the significance of the change.

Assessment definition - Change: 1. Significant change: evidence that change has scale, depth and sustainability; 2. Established change: evidence of change at scale and sustainability of change; 3. Emerging change: evidence of pockets of change, but not widespread; 4. Early change; 5. No evidence of change

b) Assessment of the significance of DFID's contribution.

Assessment definition: 1: Evidence that programme made a crucial contribution; 2: Evidence that programme made an important contribution; 3: Evidence that programme made some contribution; 4: No evidence that the intervention made any contribution; 5: Insufficient evidence to make an assessment.

c) Assessment of strength of evidence

Assessment definition - Strong: Verbal team and/or stakeholder evidence, strategy and implementation documents and M&E data on progress, confirmed by primary evaluation data; **Medium:** Verbal team and/or stakeholder evidence, strategy and implementation documents, confirmed by M&E data on progress; **Partial:** Verbal team and/or stakeholder evidence, strategy and implementation documents; **Weak:** Verbal team or stakeholder evidence only; **No evidence:** There is not sufficient evidence to make a judgement.

Case Study 3: The Research for Health in Humanitarian Crises (R2HC) Programme

Anna Paterson , December 2015

1. Introduction

This case study report forms part of the evaluation of DFID’s Humanitarian Innovation and Evidence Programme (HIEP).¹⁶⁷ The five-year evaluation process tracks the DFID programme 2013–18. Eight projects funded through the HIEP have been identified to follow as part of the evaluation. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18.

The Research for Health in Humanitarian Crises (R2HC) programme aims **‘to increase the level and quality of collaborative research on recognised public health challenges in humanitarian crises leading to improved health outcomes through cost-effective humanitarian interventions.’** It is partly funded by DFID through the HIEP with matched funding by the Wellcome Trust. A crucial part of the programme design is the formation and strengthening of partnerships between research institutions and humanitarian organisations, including INGOs and NGOs. The programme is managed by Enhancing Learning and Research for Humanitarian Assistance (ELRHA),¹⁶⁸ which specialises in brokering, fostering and mentoring such collaborations.

R2HC was originally set to run from June 2013 until December 2016 with a total budget of **£9,510,220** split equally between DFID and Wellcome Trust. This included an additional **£1.5m** received in 2014 for the Ebola research call, which was also split between the two donors. A second phase of funding has been agreed, lasting until March 2020 with a total budget of **£8,320,817**, also divided equally between DFID and Wellcome. R2HC has now conducted three regular calls for proposals and one call in response to the Ebola epidemic. Grantees from the first two calls have started implementing research, many Ebola grantees are near completion of their research and, for the third call, final applications will be submitted mid-December 2015 and reviewed by the end of Feb 2016. The size of grants has ranged from £79,834 to £599,935, with an average grant size of £326,000.¹⁶⁹ The types of grants are summarised here:

1. **Core grants:** This is the main type of research grant, with 6 awarded in the first research call and 9 in the second.¹⁷⁰ Two core grantees were interviewed by this evaluation.
2. **Rapid Response grants:** This is a new model for funders in humanitarian health, with two grants approved in the first research call and one in the second.¹⁷¹ It allows for pre-approval of research teams to deploy to the field to conduct research during the acute phase of a crisis that has not yet occurred. One Rapid Response grant was triggered in Haiti and Nepal in 2014, and later adapted for a further study in post-earthquake Nepal in 2015. This grantee was interviewed by the evaluation.
3. **The Ebola research call:** This additional *emergency call* was launched in 2014 in response to the Ebola epidemic in West Africa, aiming *to produce robust research findings that could*

¹⁶⁷ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

¹⁶⁸ Hosted by Save the Children UK

¹⁶⁹ R2HC (June 2015) Power Point presentation for DFID on the Third Research Call

¹⁷⁰ R2HC (May 2014) Second Call for Proposals: Guidelines for Applicants; R2HC (June 2015) Third Call for Proposals: Guidelines for Applicants; R2HC (June 2015) Third Call for Proposals: Frequently Asked Questions

¹⁷¹ Based on a model from earthquake science and from the ESRC’s Urgency Grants for social science data collection during urgent unforeseen events.

contribute to the effectiveness of the response to the outbreak in real time and to help to draw lessons for future outbreaks of Ebola and other communicable diseases. Some eight grants were awarded, of which this evaluation has spoken to five.

The main research calls involve a two-stage process, with an initial review of expressions of interest and shortlisting, and an offer of seed funding of up to £10,000 for applicants selected to go forward to the subsequent full application stage. A fuller account of the Grants approval process is included in Appendix 2. The Ebola call followed an accelerated version of the full approval process but did not follow all the steps in the main call process – without provision of seed funding, or the full involvement of the Funding Committee (instead, technical reviewers with specialist expertise were brought together with the FC to make the final decision).

2. Methodology

All case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact, and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process.¹⁷²

The evaluation methodology consisted of document review and key informant interviews. Given the evaluation's time and resources we could not cover all R2HC's 26 active grants. Therefore, we sampled 7 grants, based mostly on availability of principal investigators and a fair stage of progress towards completion. Given that round two grants are in the early stages of research, we selected two core grants, and one Rapid Response grant, from round one. These grants are all concerned with mental health and psychosocial support (MHPSS) interventions, an interesting area where a cluster of R2HC research has formed. We were interested in the Ebola call, where R2HC has reported real-time impacts on policy and practice, and which is an interesting model of rapid commissioning and management, and we sampled four of the eight R2HC grants. The full list of R2HC grantees is included in Appendix 1, with our sampled grantees also marked.

Our document review included the following types of material:

- The 2015 R2HC Annual Report to DFID and the Wellcome Trust, which includes R2HC's Phase 1 logframe.
- Documents relating to the three research calls, including guidelines for applicants and learning materials produced after the calls.
- The ELRHA Uptake and Diffusion Strategy and the separate Guidance Note produced in 2014.
- Guidelines for Applicants for the second and third research calls, and Frequently Asked Questions for the third call.
- R2HC analysis of the first and second calls, and overview of the third call in a presentation for DFID.
- Other published reflections by the Funding Committee members.¹⁷³

¹⁷² Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

¹⁷³ Ager, A. et al. (2014) 'Strengthening the evidence base for health programming in humanitarian crises', *SCIENCE, Special Section: Global Health*, 12 September 2014, Vol. 345, Issue 6202.

- The R2HC updated evidence review (2015) and reviews of the evidence on water, sanitation and hygiene (WASH), injury and rehabilitation and non-communicable diseases.
- The initial R2HC ethical framework.¹⁷⁴
- For each of the seven sampled grantees we read programme documents including proposals, interim reports, progress notes, tools, manuals and protocols where available, and research outputs including articles and draft articles where available.
- Information on R2HC and its grantees on its excellent website: <http://www.elrha.org/r2hc/home/>

Interviews were conducted with the Director at ELRHA, the R2HC Programme Manager, the Communications Manager and Finance Officer at ELRHA, the two lead advisers for R2HC at DFID, two staff responsible for R2HC management at Wellcome, and a member of R2HC's Funding Committee. Interviews were conducted with seven of R2HC's grantees. Finally, two external stakeholders were consulted.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

R2HC maps against HIEP problem two: 'Inadequate synthesis and generation of evidence about which humanitarian interventions work best, and new ways to tackle humanitarian problems', and also problem four: 'Inadequate systems and incentives to integrate evidence production and use routinely in humanitarian decisions and actions.' The core model of brokering, developing and funding partnerships between academic researchers, using robust methods and practitioners, is a new model in this sector that integrates evidence production and practice at the grantee level.

3.1.2 Extent to which design is appropriate to address identified needs and opportunities

The programme is to be credited for investing in thorough assessments of the evidence base for health interventions in humanitarian crises, both to inform R2HC programming and as global public goods. During the formative evaluation we noted that R2HC had commissioned an evidence review to identify important gaps for future research.¹⁷⁵ This first review identified a sea of evidence gaps, containing some islands that were better evidenced, reflecting the findings of the Humanitarian Emergency Response Review (HERR). The review was updated by the London School of Hygiene and Tropical Medicine (LSHTM) team in 2015¹⁷⁶ and each of the chapters from the evidence review can be downloaded as stand-alone documents and presented to the relevant thematic audiences. In

¹⁷⁴ Curry, D., Waldman, R., Caplan, A. (2014) *An Ethical Framework for the Development and Review of Health Research Proposals Involving Humanitarian Contexts*, Paper for R2HC – This will be updated in 2016 as the first version was not deemed to be as comprehensive as required.

¹⁷⁵ Blanchet, Karl & Roberts, Bayard (2013) *An Evidence Review of Research on Health Interventions in Humanitarian Crises*, London School of Hygiene and Tropical Medicine.

¹⁷⁶ Blanchet, Karl & Roberts, Bayard (2015) *An Evidence Review of Research on Health Interventions in Humanitarian Crises*, London School of Hygiene and Tropical Medicine.

addition, three additional papers were produced on the evidence for interventions to address injury and rehabilitation,¹⁷⁷ non-communicable diseases,¹⁷⁸ and water, sanitation and hygiene (WASH) interventions.¹⁷⁹ An additional paper, focusing on sexual and reproductive health, was submitted for publication in September 2015. These papers used standard systematic review methodologies, combined with qualitative expert interviews with policy makers, practitioners and academics, in the case of the updated overarching literature review. The updated papers were published on R2HC's website in autumn 2015 and were highlighted in ELRHA's newsletter in October 2015. However, the main evidence review will be published in *The Lancet* towards the end of 2015 or beginning of 2016, and a research uptake and dissemination event will take place after the *Lancet* publication. This may involve the presentation of the papers in user-friendly formats such as the use of interviews and videos.¹⁸⁰

R2HC's Rapid Response grants are a highly relevant attempt to respond to **foreseeable** humanitarian crises before they arise. The Ebola research call in 2014 may be seen as an important example of responding to an **unforeseen** crisis. We discuss both of these in the sections below.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

The fact that R2HC is funded through ELRHA means it is in a good position to be integrated with the Humanitarian Innovation Fund (HIF), another HIEP programme that is managed by ELRHA. Beyond this the evaluation found little evidence of explicit attempts from DFID to harmonise or link up R2HC with other HIEP programmes. This lack of harmonisation, or even of information sharing about what research is being funded, was noted by an external respondent.¹⁸¹ This is important to avoid duplication and to encourage results. Many of the operational agencies involved in R2HC partnerships, such as Save the Children, MSF, International Rescue Committee (IRC), are key target audiences for HIEP's wider work, so it would be interesting to be able to compare the uptake of R2HC work compared with other non-partnership-based HIEP findings during the next phase of this evaluation.

There is no doubt that R2HC is relevant to the problems identified in the HIES and to the theory of change for the HIEP, but R2HC does not have a developed 'HIEP identity' among any of our respondents. More harmonisation across HIEP would help to maximise impact and avoid duplication; for example, the HIEP Humanitarian Evidence Synthesis and Communication (HESC) programme led by Oxfam (renamed the Humanitarian Evidence Programme, HEP) is also producing a Systematic Review on mental health and psychosocial support (MHPSS) and on WASH.¹⁸² However, there has been some harmonisation with other research funded by DFID and the Wellcome Trust. In the context of the Ebola call, some R2HC funded research was complementary to Ebola research that

¹⁷⁷ Smith J., Roberts B., Knight A., Gosselin R., Blanchet K. (2015) A systematic literature review of the quality of evidence for injury and rehabilitation interventions in humanitarian crises. *Int J Public Health*. Nov 2015; 60(7):865–72.

¹⁷⁸ Ruby A., Knight A., Perel P., Blanchet K., Roberts B. (2015) The Effectiveness of Interventions for Non-Communicable Diseases in Humanitarian Crises: A Systematic Review. *PLoS ONE* 10(9)

¹⁷⁹ Ramesh A., Blanchet K., Ensink J.H.J., Roberts B. (2015) Evidence on the Effectiveness of Water, Sanitation, and Hygiene (WASH) Interventions on Health Outcomes in Humanitarian Crises: A Systematic Review. *PLoS ONE* 10(9)

¹⁸⁰ Interview 141

¹⁸¹ Interview 148

¹⁸² http://policy-practice.oxfam.org.uk/our-work/conflict-disasters/humanitarian-evidence-programme?cid=rdt_hep#4286c4ea-2db6-439b-aeb0-1349547efa66

was being funded directly by DFID and the Wellcome Trust, and some R2HC research has fed into other research programmes with non-R2HC funding.

At the grantee level, there was good evidence of harmonisation with relevant academic, policy and practitioner institutions including examples from the countries where grantees are conducting research. This was partly because R2HC grants themselves have involved directly representatives from so many of the key policy and practitioner players, such as IRC, MSF and Save the Children. For example, one grantee looking at the effectiveness of simplified psychological support in conflict-affected Pakistan is based in the World Health Organization (WHO) and, therefore, has a direct channel to feed into WHO policy and practice. Similarly, the involvement of the key academic players in so many R2HC grants allows for good harmonisation as a positive side effect of the small size of the academic community in this space. The key academics working in this field are aware of other research being conducted in the space, and in some cases they are themselves involved in it under different funding arrangements.

3.1.4 Extent to which HIEP products are relevant to decision makers

Respondents reported that the decisions in the Funding Committee, while centrally concerned with the quality of proposed research, were also concerned with the relevance of proposals to humanitarian policy makers. The Funding Committee, composed of approximately 10 experts in humanitarian health from academia, NGOs and United Nations agencies, was considered well placed to assess relevance as well as quality. But R2HC's key proposition is that relevance is built in to the design of R2HC's core grants model, in which ***'evidence of a partnership between...research institutions and operational organisations that will facilitate the implementation of the research and the uptake of findings'***¹⁸³ is a key part of the assessment criteria for proposal approval.

3.2 Strengths

It is certainly the case that all the grantees funded by R2HC are addressing identified research gaps as can be shown by mapping the grantee themes against the evidence review, and by reference to the proposals themselves, which outline the evidence gaps that their research addresses. The scale of the evidence gaps identified in R2HC's evidence reviews was such that R2HC did have a choice of whether to adopt a broad approach, inviting proposals on a very broad range of themes, or a narrow approach focusing on building a body of research in selected areas, as well as choices around whether to focus on areas where there was more or less existing evidence. With the exception of the Ebola research call, R2HC's three main research calls have highlighted thematic areas on which proposals would be welcomed, but have been broad in nature and have used likely quality and potential impact of research as the main criteria for selection of grantees.¹⁸⁴ R2HC, donor and Funding Committee respondents confirmed that the programme has repeatedly discussed and considered the idea of having narrower research calls focused on specific themes. Most respondents were in agreement that the more open calls were appropriate at present. This was partly because of the need to expand the market of researcher and practitioner suppliers responding to R2HC calls. However, one senior respondent believed that the time had come for R2HC to conduct a targeted call in an area where there was a real need for evidence, since the open calls were 'not testing the

¹⁸³ R2HC (2015) *Third Call for Proposals: Frequently Asked Questions* – p. 8 'What are the assessment criteria?'

¹⁸⁴ Interview 142

market enough'. A targeted call would require R2HC to bring the attention of potential suppliers to this call.¹⁸⁵

The result for R2HC grantees has been that they do cover a broad range of themes, as shown by the R2HC website search engine¹⁸⁶ which groups research under the following broad range of themes:

Clinical	Surveillance and Modelling	Prevention
Ebola Research	Diagnostics	WASH
Health Systems	Health Service Delivery	Resilience
Mental Health and Psychosocial	Maternal and Child Health	

It must be noted that some areas – specifically laboratory-based and clinical trials and the development of diagnostics – were exceptionally funded under the Ebola call. Moreover, R2HC continues to think about ways of coalescing research to have a bigger impact on a given evidence gap.¹⁸⁷ Further, one thematic cluster of R2HC research is forming around mental health and psychosocial support (MHPSS) interventions, with a total of eight grantees looking at psychosocial health, three in combination with other issues (Gender-Based Violence (GBV), nutrition and child-friendly spaces).¹⁸⁸ This is an area of research where the evidence review found 'a fair amount of studies and increasing quality over the years' but with less evidence available and 'substantially more required', on psychosocial (preventive) interventions, group-based and individual.¹⁸⁹ R2HC is supporting efforts to bring these grantees together to discuss emerging results and research uptake, with a planned event in Geneva organised by one of the grantees based in the WHO, in order to capitalise on the access to these WHO audiences.

3.3 Areas to develop

All the actors involved with R2HC were clear that this is a new model for funding research in the sector and that, as such, they were open to learning from what had gone well and what could be improved in the model. Against this backdrop, there is a broad recognition that more thought is needed about fine tuning the relevance of the model's approach to responding to the acute phase of crises, both foreseen and, critically, also unforeseen crises. All respondents agreed that the Rapid Response grants were a valid model, and the one Rapid Response grant that has been activated has been very effective, as discussed later in this report. However, R2HC has received fewer applications for Rapid Response grants than it would hope for. The Ebola call was a departure from R2HC's core grant model – it did not use the same partnership requirements and adopted a modified approval process, and it also included technical areas such as diagnostic work that R2HC does not normally fund. Inevitably, given the urgent nature of the timeframes, there were glitches in the process of the

¹⁸⁵ Interview 249

¹⁸⁶ [http://www.elrha.org/r2hc/projects/?searchTerm=&location_tags\[\]=171&grant_type=#results](http://www.elrha.org/r2hc/projects/?searchTerm=&location_tags[]=171&grant_type=#results)

¹⁸⁷ Interview 142

¹⁸⁸ Interview 141

¹⁸⁹ Blanchet, Karl & Roberts, Bayard (2015) *An Evidence Review of Research on Health Interventions in Humanitarian Crises*, London School of Hygiene and Tropical Medicine, pp. 130–144

call, which we discuss in more detail below. However, there are also broader lessons to be gathered about what is the optimal model for funding research in response to unforeseen crises. It would be useful to look at comparative models, for example, the Wellcome Trust itself which funded a number of Ebola research projects during the epidemic directly as well as R2HC. Certainly there are questions to be asked about the *types* of research that are appropriate for funding by R2HC in emergency calls. It is beyond the scope of this evaluation to draw firm conclusions about these lessons, but R2HC has commissioned its own review of the Ebola call, which can be expected to feed into this learning exercise. A Working Group (including DFID, the Wellcome Trust and ELRHA) has been set up to consider how best to respond to unforeseen emergency calls.

3.4 Preliminary conclusion

R2HC is on track to produce a broad range of research relevant to identified evidence gaps, and some clusters of research that have either formed organically or have been linked to the one-off thematic call on Ebola. Inevitably for such a new model, there is some lesson gathering and fine tuning to be done, especially around the optimal relevant approaches to acute phase crises. However, R2HC has adopted an open approach to learning from the process of research commissioning and implementation and appears well placed to do this.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

R2HC is squarely focused on the production of high quality research outputs and is on track to deliver these. R2HC has developed strong systems to manage quality – many of which focus on ex-ante decision making in focusing heavily on research methods and capacity to deliver them during the review and selection of proposals. The inclusion of prestigious academics in most of the partnerships also means that the grantees have professional incentives to produce peer-reviewed research outputs.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

For many of R2HC's grantees, research is still in its early stages and findings are not yet ready. However, there are a number of cases of reported outcomes in terms of involving key actors, attracting other donors, and, in the case of the Ebola research call, examples where research reportedly informed the policy response. Two indicative stories are shown below. We are not suggesting that these are the most important examples from R2HC, merely interesting examples *from the grantees that this evaluation was able to look at in more detail.*

Contributions to change¹⁹⁰

1. What change has occurred?

¹⁹⁰ Assessment definitions: See Appendix

A: Anthropological research influences the Ebola response. The Ebola Anthropology Platform,¹⁹¹ which provided an online portal with briefings and syntheses as well as conducting field research, was a breakthrough in the inclusion of ethnographic evidence and ethnographers in high-level policy debates around the response. Members of the platform were included in the UK meetings of the Scientific Advisory Group for Emergencies (SAGE) activated in response to the Ebola epidemic. (Other, medical and quantitative R2HC funded research, such as the much praised modelling project at the London School of Hygiene and Tropical Medicine, were also involved in the SAGE meetings – these projects were not part of our sample for this evaluation but are clearly of interest to research uptake lesson learning in R2HC).

Meanwhile, another applied anthropological R2HC project led by Umeå University, Sweden, used field work in ‘hotspots’ to develop culturally contextualised social messages for health-seeking behaviour based on field research in Ebola ‘hotspots’ in Sierra Leone, and was similarly able to gain a seat at the table and support from the National Ebola Response Coordinator and the Ministry of Health. However, this project was more affected by the political economy of the international and the local key actors in the response, both in positive and negative ways.

B: R2HC research complements other donors and is positioned to support scale-up: An R2HC randomised control trial of the effectiveness and cost-effectiveness of simplified psychological support in conflict-affected Pakistan¹⁹² is researching an individual level psychosocial intervention that could be scaled up. USAID has funded a complementary trial of a group-level psychosocial intervention also in Pakistan and involving some of the same researchers.

2. What did R2HC do that might have contributed to the change

A. R2HC made an **important contribution** in funding different types of anthropological research as part of the Ebola research call which is not typically included in emergency response to epidemics.

B. R2HC made **some contribution** by supporting a robust randomised control trial in an area where its evidence review noted there were evidence gaps. The project is based in the WHO working towards the WHO evidence requirements for scaling up an intervention. A positive result from this trial would require a positive result from another context to meet the WHO criteria.

3. What other factors contributed to this change?

A. The increasing use of anthropological knowledge was partly driven by the nature of the epidemic, in which draconian approaches to promoting health-seeking behaviour had failed. Another key factor was that many of the specialists involved had backgrounds in HIV, and had gained an appreciation of the need for culturally contextualised approaches to encouraging health-seeking behaviour. Certainly the role of anthropologists in the Ebola response was a wider phenomenon than the R2HC-funded work.

B. The evidence gap in this area, identified in the R2HC evidence review, is clearly recognised by policy actors who have not accessed this review. An external stakeholder reported that there has been a recent surge in interest in the evidence for MHPSS interventions and that a lot of the interest was coming from organisations in the field.¹⁹³

4. Assessment of the significance of the change

¹⁹¹ University of Sussex and LSHTM

¹⁹² Led by the WHO

¹⁹³ Interview 149

A. Established change – this is likely to be transferable to other epidemics although, as the academics involved have noted, there are institutional barriers.

B. Established change

5. Assessment of the strength of the evidence to demonstrate the reported change

A. There is strong evidence for this change, with the opening of the policy and practitioner door to anthropologist input reported by grantees themselves and by donors and external respondents in this evaluation.¹⁹⁴ One project will shortly publish a peer-reviewed article charting the experience of the project and described a ‘moment in the limelight’ for anthropologists in terms of influence on policy makers.¹⁹⁵ Other external sources have noted the role of anthropology in the Ebola response.¹⁹⁶

B. There is medium evidence for this change. The evaluation has spoken to the USAID representative managing the complementary research being undertaken by these researchers.

6. Assessment of the significance of R2HC’s contribution.

A. R2HC made an important contribution. Complementary inputs by anthropologists were made under different funding mechanisms.

B. R2HC has made some contribution. Other research to support scaling up the intervention will require support from elsewhere.

These emerging examples provide potentially rich material for a comparative study of research uptake, especially one that takes into account the political economy factors that can inhibit or facilitate uptake. This could follow a similar format to existing studies that have given a rich narrative of successful and less successful examples of research uptake.¹⁹⁷

4.1.3 Extent to which the R2HC project management model accelerates or inhibits the achievement of results

Overall, respondents were positive about the governance structure and the R2HC approval, contracting and management process. R2HC appears to be managing the performance of the grantees well overall, and one first round grantee was closed due to changes in the operational context, in a process that was described to the evaluation as ‘well-handled.’¹⁹⁸ A review of this early closure has been commissioned by R2HC.

Research under the Ebola call required particularly fast timeframes to achieve outcomes on the response in real time. Some Ebola grantees were impressed by the speed of the approval and contracting process. However, delays in review, approval and contracting were reported by some others, with repercussions for the research’s capacity to influence the response as planned. R2HC

¹⁹⁴ Interview 249

¹⁹⁵ Martineau, F., Wilkinson, A. & Parker, M. (Forthcoming) ‘Epistemologies of Ebola: Reflections on the experience of the Ebola Response Anthropology Platform, Forthcoming in *Anthropology Quarterly*

¹⁹⁶ Sprecher, A., Ebola Virus Hits West Africa: Challenges, New Approaches and the Path Ahead ASTMH63rd Annual Meeting, 2014 New Orleans. ‘we learned the hard way that we needed to bring anthropologists in’ <https://www.youtube.com/watch?v=blusrf9Kse8&feature=youtu.be>

¹⁹⁷ Carden, Fred (2009) *From Knowledge to Policy: Making the Most of Development Research*, London & New Delhi: Sage Publications

¹⁹⁸ Interview 228

did not use the full Funding Committee process for this call, but rather consulted specialist reviewers alongside available Funding Committee members. Some of the Funding Committee members were unavailable for the second round of proposal review since they were by that time themselves deployed as part of the Ebola response. There is a need to assess the appropriateness of the review, selection, contracting, and management process for an *emergency* call, including a comparison with processes in comparable research commissioned under different management models, for example in the Wellcome Trust. The above-mentioned working group (including ELRHA and its donors) on unforeseen emergency calls is an appropriate forum to discuss such comparisons.

Staffing and adequate human resources were mentioned as constraints for R2HC in the formative report and this has been a recurrent problem, felt especially during the Ebola emergency call. In the words of one respondent, there was ‘no give in the R2HC systems.’¹⁹⁹ Staffing challenges in 2015 have included: staff turnover in the key positions of Programme Manager, Finance and Grants Manager and Senior Research Adviser; the potentially under-resourced 24% full time equivalent (FTE) allocated for effective partnerships (to be replaced by a full-time post in 2016); and difficulties in bringing in key additional expertise. The ELRHA Senior Research Adviser left the programme in mid-2015 and this position will be filled in November 2015. Meanwhile the recruitment of a senior Humanitarian Health Adviser has been difficult, with two unsuccessful rounds of recruitments. Even with the eventual full complement of staff, R2HC may be stretched in terms of staffing.

4.1.4 Extent to which the HIEP programme maximises the potential impact of its component parts (coherence of project with the whole)

As discussed in the section on relevance above, R2HC has a broad range of grantees. Where grantees have coalesced around the theme of mental health and psychosocial support, there are emerging attempts to coalesce research to maximise impact on this evidence gap. R2HC has certainly used its experiences to learn lessons about a coherent approach to funding research in this area and continues to review the thematic breadth of its research calls.

4.2 Strengths

A key strength of R2HC has been its openness to learning about *how* to approach funding robust research in humanitarian settings in order to get the best possible quality and uptake. Members of the R2HC Funding Committee published an article in *Science* magazine in 2014 documenting some of these lessons based on the experience of the first research call.²⁰⁰ These lessons were grouped around points highlighting the importance of:

- **Use of evidence from non-humanitarian settings:** as a fundamental basis for programming interventions in humanitarian settings.
- **Identification of ethical bases of counterfactual analysis:** which is needed for the robust assessment of interventions, but difficult for ethical reasons in humanitarian settings. R2HC emphasises the importance of using the designs that acknowledge both these imperatives.

¹⁹⁹ Interview 229

²⁰⁰ Ager, A. et al. (2014) ‘Strengthening the evidence base for health programming in humanitarian crises’, *SCIENCE, Special Section: Global Health*, 12 September 2014, Vol. 345, Issue 6202

- **Developing *appropriate* robust methodologies:** this is linked to the finding above. There is a good spread of study types, including context-appropriate gold standard research designs in the R2HC portfolio.
- **Capacity and potential for scaling up:** this involves an appropriate balance between context appropriate research and external validity.
- **Research capacity:** the paper emphasised the importance of engagement with, and long-term capacity building of, Southern research institutions. We discuss capacity building under 5.1.2 below.

4.3 Areas to develop

As noted above, there have been glitches in the process of grant-making which require deeper review. In some cases, such as in the Ebola research call, the glitches were to do with the emergency nature of the call. In other cases, glitches were more routine and are being ironed out. For example, an initial agreement that the Wellcome Trust would fund Open Access costs proved unfeasible since there was no mechanism to do this, and was resolved when R2HC accommodated the additional costs from the existing budget. The resolution of staffing problems at R2HC can be expected to improve programme effectiveness.

4.4 Conclusions

R2HC is on track to deliver high quality research, has already produced some important research outputs and, in the case of the Ebola research call, grantees have already played a role in the humanitarian response. However, for the Ebola call in particular, there are lessons to be learned around the appropriate model of research funding to allow rapid deployment of researchers and therefore to maximise real-time outcomes.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

R2HC's logframe outcomes are explicitly aligned with outcomes 2 and 3:

- **Outcome Indicator 1: Number of key individuals in humanitarian organisations reporting shifts within their organisations (HIEP outcome 2, indicator 5)**
- **Outcome Indicator 2: Number of references to R2HC evidence products on specialist humanitarian media and network websites (HIEP outcome 2, indicator 4)**

Although we judge that R2HC is on track to achieve outcomes in these areas, the programme has not yet begun reporting substantially against these indicators, and the first milestones are in 2016. Outcomes at this level will require effective research uptake.

The formative phase of this evaluation recommended that more work be conducted in developing research uptake strategies that went beyond communications, and more work has indeed been conducted in this area. ELRHA has developed, and disseminated to R2HC grantees, an Uptake and

Diffusion Guidance Note,²⁰¹ which draws heavily from DFID’s own Research Uptake Guidance for Research Programmes.²⁰² R2HC respondents were clear that ‘we are not there yet with research uptake’²⁰³ and more work is planned to develop research uptake strategies that are more tailored to ELRHA and R2HC grantees when R2HC’s new research adviser comes on board and as the core grantees begin to produce more results.

R2HC has also shown its ability to deliver course correction on research uptake in managing its grantees. In the first and second research call, grantees had been asked to set aside an unspecified proportion of funds for research uptake. During implementation, R2HC felt that the resources grantees had allocated were insufficient and invited applications for additional resources for research uptake activities. Thirteen applications have been funded using reallocated funds saved from one project that was closed early. The third call has included a stronger focus on research uptake.²⁰⁴ The third call proposal format contains a dedicated section, and two sub-questions about dissemination and research uptake, as well as asking applicants to show what they expect their long-term impacts to be in a separate section.

A significant proportion of the responsibility for uptake must rest at the grantee level, since the audiences for uptake may be very different for different subject areas. The R2HC core grants model is meant to incorporate improved research uptake in the very design, through the inclusion of implementing partners in the projects. As one interviewee noted, this is much more conducive to uptake ‘compared to research that is quite detached which you then have to sell after it’s finished.’²⁰⁵

At the overarching R2HC level, it was difficult for this evaluation to access **external** stakeholders who had engaged with the programme. This is partly because, as one interviewee put it, ‘most of R2HC’s would-be external stakeholders are actually delivering R2HC grants.’²⁰⁶ R2HC does have a mailing list of 482 people, and the programme gathers and monitors its impact on humanitarian organisations in its logframe.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

R2HC and donor respondents emphasised that capacity building is not a primary focus of R2HC. Rather, the programme is focused on the generation of high quality evidence. However, at the grantee level, capacity building is taking place, in some cases quite intensively. Moreover, research capacity in countries affected by humanitarian crises has been highlighted as crucially important both in the reflections of the Funding Committee,²⁰⁷ and by grantees. As one grantee engaged in an RCT told us, it is important that there is an already adequately trained cadre of research partners to work with when deploying teams in these contexts: ‘You need a good team on the ground if you’re

²⁰¹ ELRHA (October 2014) *Uptake and Diffusion Guidance Note: For Projects Funded Through ELRHA*

²⁰² DFID (Last updated 2013) *Research Uptake: A Guide for DFID-funded Research Programmes*

²⁰³ Interview 141

²⁰⁴ Interview 142

²⁰⁵ Interview 147

²⁰⁶ Interview 139

²⁰⁷ Ager, A. et al. (2014) ‘Strengthening the evidence base for health programming in humanitarian crises’, *SCIENCE, Special Section: Global Health*, 12 September 2014, Vol. 345, Issue 6202

going to work in emergencies – a lot of the capacity needs to be built before the emergency.’²⁰⁸ This was echoed by one of the Ebola grantees who stated: ‘can’t attempt this unless you have a well-established and experienced local research team.’²⁰⁹ It should be noted that the grantee that reported that the most focus on avoiding extractive partnerships was clearly building on strong existing capacities: this project does not have a research team that is separate from their local partners and all data collection and analysis is shared.²¹⁰

R2HC explicitly aims to include more Southern applicants in the partnerships, as reflected in logframe output indicator 3.2: ‘the number of Southern academic research institutions conducting R2HC research projects.’ The programme acknowledges, however, that these partnerships have, so far, concentrated on a small, mostly Northern-led market of suppliers. R2HC noted in its Annual Report that, with four calls conducted, it is **‘becoming apparent that there is a limited group of key academic institutions and humanitarian organisations conducting research in humanitarian contexts.’**²¹¹ On the other hand, Southern applicants continue to apply to R2HC in high numbers and are often found ineligible at the first review stage, most frequently due to weak methodologies. Three Southern institutions are currently managing R2HC grants, two from the Ebola call.

R2HC already conducts workshops to support new partnerships, but there was a general recognition from R2HC and donor respondents that a more proactive approach²¹² to partnerships is needed. R2HC has plans to translate materials from the next research call into French and to pay for expressions of interest and proposals to be translated from French into English in order to appeal to the Francophone market of potential suppliers.

5.2 Strengths

There has been an improved focus on research uptake at the R2HC level and more resources, and more focus on, research uptake has been included at the grantee level. Crucially, research uptake is built into the partnership design.

5.3 Areas to develop

Many of R2HC’s impacts will come from the grantee level, but R2HC should also be developing programme-level relationships with key humanitarian organisations, especially for dissemination. For example, R2HC evidence reviews could be disseminated through WHO clusters. As an external interviewee who had not heard of the R2HC Evidence Reviews noted, ‘to get to me and my networks, sharing material through the cluster, for example the global protection cluster, would bring it to my attention.’²¹³ Members of the R2HC management group have communicated R2HC calls and the evidence review through their engagement with the Health cluster and WASH cluster, but R2HC acknowledges the need to develop better contacts with the cross-cutting sectors such as social protection and shelter. The foreseen R2HC senior Humanitarian Health Adviser position was designed to address this specific need, but two recruitment drives have been unsuccessful in identifying a suitable candidate for the post. Another external interviewee suggested they would expect to see R2HC’s evidence reviews on the Cochrane-linked Evidence Aid website

²⁰⁸ Interview 143

²⁰⁹ Interview 233

²¹⁰ Interview 147

²¹¹ R2HC (2015) Annual Report, p.16

²¹² Interview 228

²¹³ Interview 149

(www.evidenceaid.org). This respondent also criticised DFID for failing to update stakeholders on the various grantees (under R2HC and under HIEP more broadly), saying ‘there is a big pot of money, but I don’t know [in what area] what the outputs are or will be I am exactly the kind of person that could advocate for the use of this evidence when it comes out as we learn what the projects are working on.’²¹⁴

R2HC plans to develop more research uptake guidance that is better tailored to the types of partnerships that are its grantees. More programme-level work on identifying key audiences for dissemination and uptake activities would be appropriate, and there is scope for R2HC as a programme to learn from and draw in the key policy and practitioner partners that its grantees have access to. R2HC will need to continue efforts to strengthen and broaden its partnership approach to involve more Southern partners.

5.4 Conclusions

R2HC has responded to the need for more work on research uptake, and plans more work as the core grantees begin delivering more outputs. It is difficult to assess overall progress towards the higher outcome-impact levels of R2HC’s logframe (which are aligned with HIEP outcome 2) since R2HC is not yet systematically monitoring and reporting against these. This evaluation has seen promising indicative examples, included in the contributions to change box above.

6. Gender and social diversity

At the R2HC programme level, the extent to which gender and social diversity have been explicitly considered and reported is in many ways a function of what the programme has been asked to do by DFID. R2HC was only recently asked to report on gender, which the programme did in brief in its 2015 Annual Report. At the grantee level, the evaluation found a good level of consideration of gender and social exclusion, in many cases because grantees were looking specifically at effects on women and excluded groups. This included one project that was looking specifically at outcomes of child-friendly spaces for children. In other cases, gender and social exclusion were not the primary focus, but data were being disaggregated. This included one project in Pakistan that, while it was not powered to prove how effective the intervention was for women versus men, was disaggregating data, and planned to look for patterns indicating possible effects of gender and income on the success of the intervention. Another project in Nepal was similarly able to look for patterns in the data during analysis, having disaggregated by gender and ethnic group. Overall, R2HC notes in its Annual Report that one of the first round grantees and two of the second round grantees focus on health issues specific to women. The third round call encouraged applications on Sexual and Reproductive Health and Gender-Based Violence and received 30 expressions of interest, of which 12 applicants were invited to submit full proposals.

7. Other findings and comments

None

8. Summative phase 1 conclusions

R2HC is a new and unique model for commissioning robust research on health interventions in humanitarian crises. It is on track to deliver, and in some emerging cases has already delivered, high quality research outputs and even influenced policy and practitioner responses to humanitarian

²¹⁴ Interview 148

crises. R2HC has certainly proved the concept that partnerships of this kind can deliver quality research in contexts where many have doubted that robust research was possible. The programme is managing research well, and has engaged in course correction in closing one project that was no longer feasible, and in acknowledging, and remedying, insufficient resources for research uptake.

Inevitably for such a new model, there have been some glitches in the process, some more significant than others. R2HC has already engaged in lesson learning, and has initiated processes to learn the lessons from these glitches. The evaluation is confident that what will emerge from this process is a clearer sense of the R2HC model, how it can be adapted to respond to crises in their acute phases, and what its boundaries are (for example in terms of methodologies and types of research that it funds).

9. Recommendations at case study level

- R2HC should continue the process of reflection and fine tuning, especially with regards to rapid and emergency response research.
- More work on research uptake at the programme level can help R2HC draw upon the networks that grantees have access to, as well as help grantees.
- DFID could more explicitly harmonise and share lessons between R2HC and other HIEP programmes.
- There is significant potential for learning about the political economy of research uptake in humanitarian health interventions, building upon reflections that grantees are already documenting formally or informally.

Appendix 1: R2HC Grantees

Call	Organisation	Project title	Interviewed by evaluators
First Call	CDC Foundation	Alternative Sanitation in Protracted Emergencies	
	Johns Hopkins Bloomberg School of Public Health (Burnham/Doocy)	NCD Guidelines and mHealth Records for Refugees in Lebanon	
	Johns Hopkins Bloomberg School of Public Health (Tol)	Evaluating an integrated approach to intimate partner violence and psychosocial health in refugees	
	Save the Children UK	Effectiveness of an integrated humanitarian response delivery model in Niger	
	World Health Organization	Effectiveness and Cost-effectiveness of simplified psychological support in conflict- affected Pakistan	YES
	World Vision International	Longer-term mental health, developmental and systems impact of Child-Friendly Spaces in humanitarian emergencies.	YES
	Epicentre/MSF	RAPID (Regional Anaesthesia for Painful Injuries after Disasters)	
	Institute of Behavioural Science, Natural Hazards Center, Colorado University	Enhancing Community Resilience in the Acute Aftermath of Disaster: Evaluation of a Disaster Mental Health Intervention	YES
Second Call	Action Against Hunger USA	Evaluating the effectiveness of safe drinking water in SAM treatment	
	Action Contre La Faim France	Follow-up of severely malnourished children (FUSAM): Effectiveness of a combined nutrition, psychosocial intervention on health and development	
	CDC Foundation	Investigation of HEV transmission dynamics and epidemic evolution to improve outbreak control efforts among emergency affected populations	
	Durham University	A New Evidence base for	

		Respiratory Health Interventions in Volcanic Eruption Crises (HIVE)	
	Health Research Union	Impact of Targeted Health Insurance on Health Utilization, Expenditures and Health Status among Georgian IDPs.	
	International Medical Corps UK	Advancing the Evidence-Base of the Minimum Initial Service Package (MISP) for Reproductive Health: Using a Quality Improvement Approach in DRC	
	International Rescue Committee UK	Building a Cross-Sectoral Toolkit and Research Foundation for the Integration of Menstrual Hygiene Management into Emergency Response	
	MSF USA	Malaria Chemoprevention in Humanitarian Emergencies	
	World Health Organization	Addressing the 'access' and 'scale' challenge: Cost-Effectiveness of a new WHO-Guided Psychosocial Self-Help Programme.	
	Yale University	Health Outcomes of a Scalable Psychosocial Intervention for Refugee Youth	
Ebola Call	Institut Pasteur de Dakar	Point-of-care EVD diagnostic testing for Ebola treatment centres	
	International Rescue Committee UK	Participatory Behavioural Change to Reinforce Infection Prevention and Control for Ebola Virus Disease in Sierra Leone	
	London School of Hygiene and Tropical Medicine	Modelling Ebola in West Africa	
	London School for Hygiene and Tropical Medicine / University of Sussex	Ebola Response Anthropology Platform	YES
	Platform for Dialogue and Peace (P4DP)	Role of Traditional Healers in Transmission and Mitigation of the Ebola Outbreak	YES
	Umeå University	Development of a Social Marketing Strategy to	YES

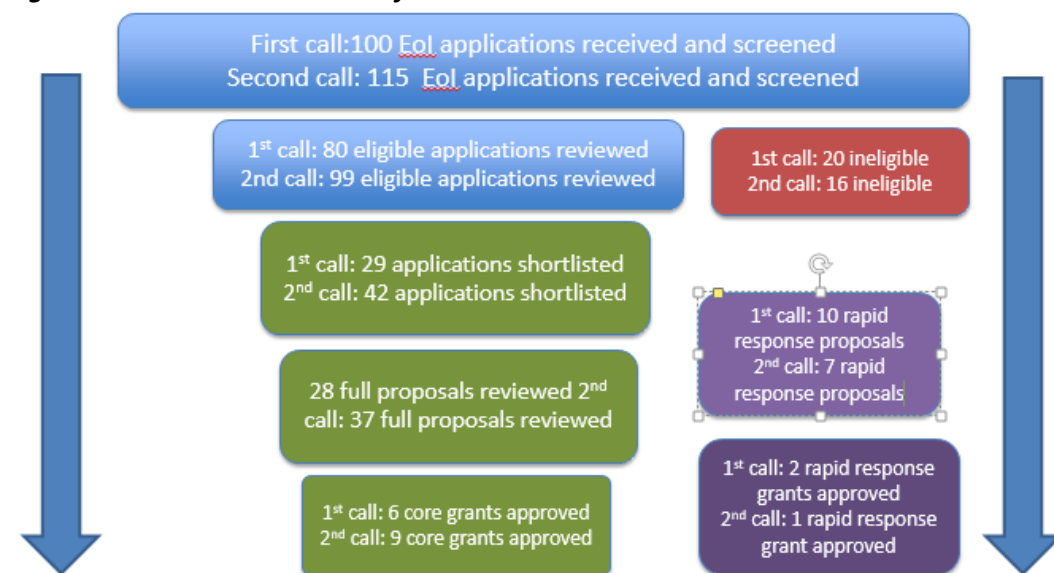
		Promote Ebola treatment-seeking behaviour in Sierra Leone	
	University of Oxford	Predicting the geographic spread of Ebola virus disease in West Africa	YES
	University of Westminster	Ebolacheck Rapid Point-of-Need EVD Diagnostics	YES

Appendix 2: R2HC Grants approval process

Figure 1: Process of grant selection²¹⁵



Figure 2: Process and outcomes from the R2HC Round 1 and 2 Research Calls²¹⁶



²¹⁵ Adapted from R2HC (June 2015) Power Point presentation for DFID on the Third Research Call

²¹⁶ Adapted from R2HC (June 2015) Power Point presentation for DFID on the Third Research Call

Case Study 4: Humanitarian Evidence Synthesis and Communication (HESC)

Teresa Hanley, December 2015

1. Introduction

This case study report forms part of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP). The five-year evaluation process tracks the DFID programme 2013–18. Eight projects funded through the HIEP have been identified to follow as case studies in the evaluation. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18. The Humanitarian Evidence Synthesis and Communication (HESC) project or 'Improving access to humanitarian evidence: Research synthesis and communication for decision makers and practitioners' is now known externally as the Humanitarian Evidence Programme (HEP). In this report the project is referred to using its original title, HESC, to distinguish it from DFID's Humanitarian Innovation and Evidence Programme, HIEP. HESC is also the name that is used in DFID's internal systems. The report covers the time period from contracting in March 2014 up to November 2015.

HESC aims to synthesise research in the humanitarian sector on priority questions in relation to 'what works' and 'what do we know'²¹⁷ and to communicate the findings to key stakeholders, with the ultimate goal of improving humanitarian policy and practice.²¹⁸ The original plan laid out in the internal proposal approved by the HIEP management committee was for a minimum of five systematic reviews and ten literature reviews cutting across sectors and packaged, presented and formatted to reach end users through various communication channels. The maximum budget approved in this internal process before the proposal was put out to tender was for £1 million, which was not publicised in the tender. This plan has been adapted through the initial contracting and implementation process and HESC will now produce eight evidence syntheses with three of these in more depth and breadth, but all eight following a systematic approach.

At the time of the formative evaluation of HIEP in March 2014, DFID was entering the final stage of a lengthy procurement process. A project contract was agreed with project partners, which are Oxfam GB and Feinstein International Center (FIC) at The Friedman School of Nutrition Science and Policy at Tufts University. The contract runs from 26 June 2014 to 23 December 2016 with a financial limit of £1,030,500.

Following calls for proposals, the HESC team (Oxfam and FIC) has so far appointed review teams for six of the syntheses, and proposals for a further two calls were in the planning stages at the time of this evaluation. Reviews are addressing or plan to address the following questions:

- **Nutrition review:** What is the evidence on the relationship between recovery and/or cure rates and relapse, default rates and/or repeated episodes in the treatment of acute malnutrition in humanitarian emergencies?
- **Shelter review:** What is the evidence on the impacts of different shelter and settlement strategies in the immediate aftermath of and recovery period following humanitarian emergencies?

²¹⁷ This focus on what we know was added after the internal proposal was approved by the HIEP Management Committee when the project contract was awarded.

²¹⁸ DFID proposal to HIEP management committee approved

- **Mental health review:** What are the effects of mental health and psychosocial support (MHPSS) interventions on affected populations in humanitarian emergencies?
- **Child protection review:** What is the impact of protection interventions on unaccompanied and separated children in humanitarian crises?
- **Urban action review:** What are the different practices to identify populations in need in humanitarian emergencies in urban settings?
- **WASH review:** What is the impact of WASH interventions in disease outbreaks in humanitarian emergencies?
- **Markets and household food security:** What is the impact of different market support interventions on household food security in humanitarian crises?
- **Food aid and pastoralist livelihoods:** What is the impact of food aid on pastoralist livelihoods in humanitarian crises?

2. Methodology

All case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact, and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions for HIEP overall are being assessed through a separate process.²¹⁹

The HESC assessment was undertaken over six evaluation days and included review of relevant documents including inception and annual reports, research calls and protocols and other project products (full list attached in Evaluation Annex 4). Interviews were undertaken with core project personnel from Oxfam, FIC, research partners, advisory group and external stakeholder (details in Evaluation Annex 5). Most data collection took place in October 2015, 18 months after the evaluation formative phase.

The evaluation focused on four of the HESC calls, which are related to WASH, child protection, shelter and acute malnutrition. Of these only the WASH protocol at the time of the evaluation had been formally approved by the programme team.²²⁰ The acute malnutrition protocol was near completion and others protocols were in development. Drafts and feedback on the WASH and acute malnutrition protocols were reviewed.

Part of the overall HIEP evaluation methodology is contribution analysis to consider the significance of HIEP activities to any identified changes in support for and use of evidence and innovation. Given the early stage of HESC implementation, at this point contribution analysis has not been used in detail but its logic, which considers other factors and initiatives under way that may influence change, has informed the evaluation analysis in relation to effectiveness and impact.

²¹⁹ Five case studies have been identified for more focused value for money (VfM) analysis as part of the VfM process of the summative evaluation.

²²⁰ At the time of writing the case study, it was unclear to the programme team if approval was needed by DFID also.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

HESC primarily addresses the problem identified in DFID's Humanitarian Innovation and Evidence Strategy of 'inadequate synthesis and generation of evidence about which humanitarian interventions works best, and new ways to tackle humanitarian problems'. Several steps were taken in HESC to ensure that the reviews undertaken respond to evidence needs. These included a mapping of available evidence syntheses relevant to the humanitarian sector and consultation by survey and key informant interviews (43). The survey received responses from 275 people in 55 countries with average work experience of 15 years each.²²¹ The HESC team has also: drawn on existing analysis of evidence gaps carried out by Evidence Aid; carried out a systematic process to prioritise questions; and conducted initial scanning of relevant evidence in advance of issuing calls for proposals. Finally, as part of the first stage of each review, the contracted relevant review team defined the terms of their question based on their expertise, and some chose a more focused question based on their own consultation with key stakeholders, initial review of evidence and analysis of need. Teams are varying in how they undertake this consultation and analysis with, for instance, the shelter team issuing a formal survey, others using key forums such as the Inter-Agency Standing Committee (IASC) working group on child protection and relevant conferences as opportunities to consult with a range of informants particularly from the operational organisations. More guidance on expectations and minimum requirements at this stage could have been helpful to ensure there is a consistent level of consultation with the sector by review teams in identifying their final questions be that in advance of developing a proposal or in the first stage of the review.

The project has the potential to provide new insights because it draws on evidence not considered collectively elsewhere. In particular, HESC reviews will draw on grey literature not necessarily shared outside organisations before, nor included in systematic reviews that have narrower inclusion criteria.

The main drawback of the consultations process to identify need and review questions has been the extent to which it involves national stakeholders in countries affected by humanitarian crises. While survey respondents are based in 55 countries, it is not possible to know how many of them are from national organisations (for example, national disaster management agencies) rather than country-based representatives of international organisations. But the key informants who were key in informing the questions are drawn primarily from UK and US-based contacts. They are relevant thought leaders, but the absence of national practitioners is a gap in defining need or relevant questions. The review teams are also, on the whole, more networked to communities that have more representation of international actors than national actors.

²²¹ Source: Annual review 2015

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

The process by which the reviews will be undertaken has been adapted from a number of sources, including the high-quality and well respected process developed by the Cochrane Collaboration for systematic reviews in the health sector. HESC takes account of the reality of the nature of humanitarian evidence that is available: there are very few randomised controlled trials outside the health sector and other evidence that would meet the standards the Cochrane process demands. Instead, an approach that is still systematic but which draws on a range of types of evidence is encouraged. HESC also requests review teams to be explicit about the quality of the sources of evidence. The HESC team has laid out an approach in a guidance note available to all teams (and externally) that is appropriate to the questions being asked and the sector. The project has taken a flexible approach where possible, for example by extending the timeframe of syntheses in response to proposals and by agreeing time schedules that enabled more consultation on the review questions in key fora such as the shelter cluster and other meetings.²²²

Potential users of the final products have been well involved in defining the focus of the programme, particularly from among the international humanitarian community.²²³ The review teams principally in WASH, child protection and shelter are particularly well connected to operational groupings including the IASC working group on child protection, the shelter cluster, and the emergency environmental and health forum. The teams have made good use of these fora for input to the development of the synthesis focus areas. The operational experience of the teams has been beneficial in enabling this. At the stage of developing the research protocol, DFID facilitated input from a relevant humanitarian adviser for each one, so DFID views on priorities are also being fed in.

For research findings to be applicable in humanitarian operations it is important to understand how context plays a role in ‘what works’ in humanitarian interventions.²²⁴ The two protocols reviewed by the evaluation have built in provision to consider context. Furthermore, some syntheses, particularly the recent call on pastoralist livelihoods, are likely to have a more geographical focus given that the Horn of Africa is the base for many pastoralist communities. Consideration of context and its impact on whether something works will be important for the syntheses’ final conclusions to be applied by humanitarian operations. This is an element emphasised in the guidance on protocols.

In terms of being able to deal with differences between groups of people, all calls have asked for disaggregated data by gender, age, location, rural-urban and others that might be relevant, such as female-headed households and unaccompanied minors. Findings are to be presented and analysed with a gender perspective. However, review teams foresee some problems in this.²²⁵ For example, it has already become clear that much of the available evidence on child protection does not clarify the age group of children being discussed, an important factor, and gender data in other areas is not always available. It could be useful to consider how this will be dealt with across the programme, and to provide guidance to review teams beyond the current guidance which recommends teams to explain how disaggregated data would have nuanced their analysis.

²²² Source: Interviews 188, 123b

²²³ IV #123b, 124b, 118, 121, 189

²²⁴ IV #136, 121

²²⁵ IV #136, 118

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

Some of the review teams are very well connected to the broader sectoral initiatives in the international community. Of the four reviews considered, three of them were notable for these connections- shelter, child protection and WASH, which have linked with relevant inter-agency initiatives, for example on children protection guidance. DFID specialist input has so far been provided on an ad hoc basis on the draft research protocols. There is no formal obligation for DFID to take forward syntheses recommendations upon completion. DFID specialist advisers have variable relations to the programme with, for instance, a humanitarian adviser with shelter expertise taking a close interest in the project but a WASH specialist approached to be on the advisory group of the WASH process not responding. Given that syntheses are likely to offer findings rather than recommendations, the extent to which evidence is applied in practice is complex. DFID is working across the department to increase incentives to use evidence in policy and programming, which is requiring a cultural shift in addition to expectations (through the SMART rules) to use the evidence that is produced. However, the process by which the reviews findings might be converted to, for instance, guidance within DFID is more complex, particularly given that humanitarian advisers tend to be generalists rather than tasked with sectoral lead roles.

Key organisations and individuals with expertise in systematic reviews are also connected to the project, for example as advisory group members, and have participated in activity. The HESC project team has been active in promoting HESC in events and conferences particularly in the UK though also in the World Humanitarian Summit, ALNAP, Cochrane Collaboration and Humanitarian Innovation Conference as well as through blogs and the website.²²⁶ This has also helped to keep the project well linked with the evidence sector.

Within DFID, the lead adviser keeps connections with DFID's own systematic review unit though this has sometimes been problematic given the lack of a formal connection to the project. For example, the project team reported that feedback from DFID's unit which had concerns about the shift from the original plan of systematic and literature reviews to a range of evidence syntheses came long after the decision was made. This was despite the original decision involving DFID. By the time the Systematic Review unit's concerns were aired, the review teams were under way with their first phase of work developing research protocols.²²⁷

The membership of the advisory group has been important to ensure duplication was avoided. For example, 3ie and IRC both planned and had to some extent begun a mapping of evidence reviews in the humanitarian sector when HESC began its mapping; the WASH review questions are very similar to those commissioned from Tufts by 3ie. Good coordination and cooperation between the agencies ensured duplication was avoided and instead led to more efficient ways of working. For instance, Tufts is undertaking both the HESC and 3ie reviews and sharing some of the costs between the two reviews which are now distinct but complementary.

3.1.4 Extent to which HIEP products are relevant to decision makers

HESC consultation with decision makers has focused the questions that the evidence syntheses should seek to answer. These consultations have focused predominantly on the international

²²⁶ HESC 2015 annual report; IV 118, 178

²²⁷ IV 118, 120

community though from across a range of countries. As the project moves into the next phase, consultation with potential users about the type of product to be produced and processes to support their uptake will be important. The HESC team has done some good mapping of some dissemination channels to reach different humanitarian audiences. The formative phase of the evaluation carried out in 2014 found scepticism in the humanitarian community regarding the extent to which availability of evidence is the issue and also regarding how systematic reviews would be used by decision makers. HESC requires each team to produce a plain language summary as well as the full report. However, a wide range of products and processes will be essential for reviews to be converted into use by decision makers. In terms of product, it is well established that lengthy reports and even summaries will have limited readership among people working in the field who require support to apply new knowledge to specific operational decisions. In terms of processes, successful dissemination has often been proactive and reactive, such as provision of learning on responses to urban earthquakes by ALNAP in the aftermath of the 2010 Haiti earthquake. The extent of the communication plan for individual systematic reviews is not clear at this time and resources for it are limited. IRC is undertaking interesting work at present to explore how to link available evidence to operational decision making and policy making.

3.2 Strengths

The key strengths in ensuring the relevance of the HESC have been:

- its wide consultation processes in the humanitarian and specific sectors to identify review questions and focus areas, and its potential contribution to building an audience for the review products;
- the development of an approach that combines a robust attitude to evidence syntheses with understanding of the reality of the evidence available from the humanitarian sector;
- focusing the evidence syntheses according to sector priorities rather than being led by DFID's own priorities which may be the case for reviews carried out internally;
- Bringing in organisations not usually involved in systematic reviews through the contracting process.

3.3 Areas to develop

Areas to consider for further development include:

- plans for how to deal with lack of disaggregated data to inform the analysis and syntheses;
- a shift now to focus on the products and processes that the reviews will produce as well as roles and responsibilities among the various partners for their production. The current resourcing of grantee/partners roles is quite limited with the production of a full report and plain language summary in addition to mapping networks and opportunities for uptake. While some may independently take the work further through their own commitment in networks, not all have independent resources to do so. The future role of OXFAM/FIC and DFID in supporting uptake and, where appropriate, application of findings and recommendations of reviews beyond 2016 is not clear either.
- ensuring that all review teams maintain strong connections to their relevant sectoral forums throughout the project period to maintain a receptive audience.

3.4 Preliminary conclusion

HESC has worked well to ensure that the reviews it produces are on questions relevant to the sector and on areas which have not previously been addressed. It is developing a methodology that combines rigour with pragmatism well, which is an appropriate approach to produce evidence syntheses in the sector. It has good links with relevant sectoral groups and networks as well as the evidence sector. The full range of research uptake products has not yet been decided beyond the review report and plain English summary. It is not known if there are plans to test them with potential audiences but this would be useful. The time for dissemination after the reviews are finalised is relatively short before the end of the project contract with Oxfam/FIC, particularly for the final two syntheses not yet contracted.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

HIEP aims to produce three main outputs: high quality evidence and innovation outputs; cross-institutional relationships and partnership; and strengthened skills in research. The original agreement for HESC was to produce 10 reviews, of which three would be systematic reviews and seven literature reviews. This has evolved into a recently agreed plan for the production of eight evidence syntheses all of which are following a systematic approach but three of which are deeper and broader in scope (acute malnutrition, WASH and mental health and psychosocial support interventions in humanitarian emergencies). The project is on track to produce all products by the end of the project period though the timing will be tight, particularly for the last two products and notably for their dissemination.

The project team has paid close attention to quality and rightly placed this ahead of hitting output targets. For example, no proposal was accepted in the first round of proposals on markets and food security due to proposals not meeting quality standards.²²⁸ There is a well-articulated approach to ensure quality assurance laid out in the inception report, which considers steps for assuring the quality of the evidence synthesis. Crucial steps include the appointment of the review teams, which followed a systematic process following up queries about any perceived team gaps. Then a key stage is the assessment and approval of the research protocol involving two to three peer reviewers drawn from people with subject, systematic review and operational expertise. Finally, review reports are approved when they are produced.²²⁹ The team adjusted the budget at inception phase to enable paid peer reviewers to be taken on for all reviews.

In addition, the HESC project team has provided close support to the review teams while they develop the research protocols as well as providing them with written guidance. Some teams have more limited experience of producing protocols. This has proven to be an extremely important phase, with the review teams extremely positive about the experience of working with the HESC team and about their support, which they note has been provided in a collegiate manner. The evaluation's consideration of feedback on the draft protocols also found feedback was clear,

²²⁸ IV 188

²²⁹ IV 120, 119

relevant, constructive, and thorough. Revised protocols addressed concerns raised before they are approved by the programme team.

Once protocols are signed off, the next formal review process is when the review teams submit their draft report. The HESC team has built in fortnightly calls or similar contact with each team to keep track of developments and provide support as needed. It may be useful to also build in a process to check the quality of what is being produced more formally before the first report draft, given that some of the teams are new to the production of reviews, the availability of evidence is unknown, and some major decisions may be needed along the way regarding how to react to evidence gaps.

In relation to the second output, HESC has supported the development of academic-humanitarian partnership between the main implementing partners of Oxfam and FIC as well as in some of the review teams, notably in the shelter team, consisting up of Habitat and University College London. Other teams such as the review team on child protection, led by Save the Children, bring in individual academics rather than being implemented through any institutional arrangement, but these personal links are still valuable and can widen organisations' range of contacts. In the case of Oxfam and FIC, HESC has helped to move the relationship on from its original basis of personal contacts between individuals in each organisation to now being an institutional arrangement. Both partners noted benefits of this arrangement and contact for their research, operations and future plans. For Oxfam, HESC has also created a whole range of contacts with a range of organisations in the evidence sector that it did not previously have.²³⁰

Interviews with both the HESC project team and operational organisations that are part of review teams highlighted that engagement in HESC is supporting their own organisations' push for increased attention to evidence-based work.²³¹ For academic partners, it is bringing them into much more direct contact with humanitarian practitioners and building their knowledge of operational priorities and contexts. The HESC project team is in discussion with ELRHA regarding potential cooperation on a presentation at the Humanitarian Studies Annual Conference in 2016 on supporting such partnerships.

In DFID, the HESC team has accessed specialist input from CHASE and is managed by a research manager in the Evidence into Action team. However, it is too early to say if these links will be sustained but, at least individually, knowledge of other departments' work has grown.²³²

In terms of HIEP's third output, building skills, the main beneficiaries would appear to be in the review teams who reported learning new skills from the protocol development process and through support from the HESC team.²³³ HESC produced guidance products, including both the guidance note for synthesis reviews in the humanitarian sector and the appraising evidence papers, which contribute to learning both within the project but are also available for use by others outside. It will be helpful to track their use.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

²³⁰ IV122

²³¹ IV 123b, 118

²³² IV 189

²³³ IV 124b, 123b, 118

The HIEP theory of change lays out the HIEP rationale that connecting knowledge brokers, networks and key operational agencies to the research processes to promote debate and advocacy for findings will contribute to bringing about change in support and use of evidence and innovation. In addition, a key mechanism foreseen is that DFID will use the evidence as the basis for funding decisions.

To date, HESC has made good contact with key groups in each of the relevant sectors and with key players in the ‘evidence community’. In DFID the informal request and agreement by DFID advisers to comment on protocols helps to build their interest in the products. HESC has built good relations with key knowledge brokers, particularly ALNAP and Evidence Aid, which are both on the advisory group. Evidence Aid anticipates hosting the products of HESC on its website. All advisory members (with the exception of a representative from the South) maintain active involvement in the project indicating their sustained interest and likely support later in the project.

At this point plans are only at very early stages for how syntheses will do more than reach a range of stakeholders and be converted into change in practice, if that is appropriate. Some review teams have an implicit expectation that advisory group members of their particular review will take the reviews and use them in new training for their staff; advisory group members have been selected with that in mind. Teams with direct participation in groups such as clusters and inter-agency working groups foresee these groups working with them to consider the implications of review findings for the sector, and so taking these forward. The division of labour here between the HESC project team (which so far has control of the budget for products and dissemination) and review teams, along with expectations of their role is not very clearly defined. In addition, the budget for dissemination is limited. Furthermore, the roles of DFID internally and externally are also unclear both in terms of how reviews might convert to changes in practice in DFID and responsibilities for taking these forward in the sector particularly after 2016. This area would benefit from attention within HESC and possibly in cooperation with other HIEP initiatives. The inclusion on the HESC advisory group of further communication specialists is a useful addition to the provision in the budget for time (19 days in total) from the Oxfam communication team. Furthermore, given the original title of the project is for both Humanitarian Evidence Synthesis and also Communication, the budget for communication/research uptake appears relatively small, approximately 10% of the whole. This means there is no provision for translation of products and limited ability to actively disseminate at country and regional levels. Again this limits the national-level connectivity of HESC.

In addition to individual sectoral initiatives, HESC co-produced a submission to the WHS advocating for evidence as the basis for effectiveness in humanitarian assistance, which was referred to twice in the WHS synthesis paper. This, together with active outreach through participation at events and blogs, contributes to the overall argument for evidence to support humanitarian decision making and action. However, attention, due at least in part to resource constraints, has focused on the international community and in particular UK INGOs, UN system and DFID, as well as some dissemination in universities in the US.

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

HESC is managed by DFID through a lead adviser based on the Evidence into Action team. A member of the advisory group is the former head of HIEP, now team leader of the Humanitarian Policy team (and HIEP management committee member). The DFID systematic review unit is connected to the

project indirectly and, at times, its inputs have been belated after discussions on an issue have moved on the project. The DFID lead adviser has successfully accessed specialist input from DFID advisers, but it should be noted there was no expectation built into the humanitarian advisers' work plan to provide this input, which is not inconsiderable when it comes to commenting on a detailed research protocol. The contracting out of the HESC to external partners (rather than being carried out by DFID's own systematic review unit) was done mainly for efficiency reasons, expecting it to move forward more quickly but it does also have the potential to be more integrated into the sector than DFID's unit may be, though it also carries the risk that products may be less integrated into DFID's processes. It is too early to say if this is more effective, but the results to date and range of engagement secured from the international humanitarian community suggest some benefits of the HESC model.

4.1.4 Extent to which the HIEP programme maximises the potential impact of its component parts (coherence of project with the whole)

HESC itself has put considerable effort into mapping initiatives in the sector to ensure coherence with developments. In DFID there are no formal links to other parts of HIEP other than occasional participation of the DFID lead adviser in HIEP virtual team meetings. Some of the DFID advisers who have reviewed research protocols have also been involved in other HIEP projects, so this helps to develop links. For example, the lead adviser for the HIEP project REFANI also reviewed the acute malnutrition protocol. However, other HIEP initiatives, such as the literature review of child protection, do not seem to be connected. DFID interviewees were of the view that having more knowledge of HIEP's full range of work, as well as more opportunities to discuss common concerns, approaches and opportunities, would be beneficial. There are no connections within DFID between HESC and any country teams at this point. It is also surprising that no scanning or mapping of evidence was available to HESC from HIEP itself given its consideration of evidence gaps to inform the development of HIEP projects.

At the same time, it should be noted that HESC itself now has a significant network of organisations involved through review teams, advisory group members and peer reviewers. This is potentially a rich resource for the future.

4.2 Strengths

The key strengths of the project's (potential) effectiveness lie in:

- HESC focus on quality assurance of synthesis processes;
- keeping to schedule while maintaining quality;
- the provision of additional resources documenting approaches and learning on evidence appraisal and syntheses in the humanitarian sector;
- the creation of good links with international humanitarian community stakeholders.

4.3 Areas to develop

Key areas to develop include:

- plans for promotion of the review products to a range of audiences including national stakeholders and for processes extending beyond 2016 including clarity on the roles and responsibilities of DFID

(and who in DFID), HIEP partners and review team partners or others, such as advisory group members.

4.4 Conclusions

The project is on track to produce high quality products on time and, to some extent, support participating organisations' efforts to increase the use of evidence and skills of those organisations. Excellent connections with sectoral and evidence communities help build links to brokers, networks and operational agencies to support the use of the syntheses findings and recommendations. The time available and resources for communication are limited, which in particular limits connections to national actors. Plans and expectations for how synthesis products will be translated into action, for example through training or cluster guidance, is not explicitly articulated. Resources in terms of time, money and people for communication of the syntheses and support for their uptake and application are extremely tight.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

HIEP has three outcomes it seeks to achieve:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

The evaluation is considering impact at the outcome level and, if and when possible, the overall intended impact of HIEP, namely that humanitarian actors have the capacities to deliver improved programmes and operations that are effective at supporting the most vulnerable people. At this stage of implementation, it is too early to expect to see any HESC impact at the HIEP outcome level. However, HESC is contributing to all three outcomes in direct and indirect ways.

For Outcome 1, the HESC advocacy for evidence to be a basis for effective humanitarian policy and practice is relevant. The HESC submission to WHS, which is cited twice in the WHS synthesis report, calls for more funding for humanitarian evidence. Following the WHS submission, HESC is now planning a joint side event with Evidence Aid at WHS in 2016 to continue advocacy for support for evidence. In addition, it is likely HESC will have substantial data systematically analysed from which to be able to comment on the quality of humanitarian research and evidence to support advocacy in the future.

For Outcome 2, HESC contributes to project and review team partners' skills and cultures in relation to the use of integration. Evaluation interviews indicated that participation in HESC strengthens initiatives in humanitarian organisations to build their own evidence-based approach; a DFID-supported initiative gives weight to internal teams' efforts as well as providing organisations with new contacts and ideas. For instance, Save the Children already organised an Evidence Day, but

HESC participated in this and in part this led to Save the Children's role in undertaking one of the reviews.²³⁴ Oxfam aims to be a thought leader in WASH, and HESC assists this through the WASH review in which Oxfam participates as an adviser. HESC has led to senior managers in Oxfam considering building more capacity in the humanitarian department for the 'translation' of research into practical implications for Oxfam policy makers and practitioners.²³⁵

The relationship to HIEP Outcome 3 is a little more indirect. The humanitarian evidence syntheses are an innovation in themselves, and this is being documented in learning products by Oxfam and FIC. The HESC approach, which aims for disaggregated data and analysis of differential impact of interventions on different groups, may also support a focus in innovations on vulnerable people.

The extent to which these outcomes are realised is something to be explored in a later stage of the evaluation.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

HESC did not include a capacity building element although the original proposal by Oxfam did have this provision, but it was cut in the contracting process to reduce the budget to £1 million. HESC has encouraged Southern actors to apply for grants and reached out to them for proposals following a mapping of researchers in the South in the relevant areas. The proposal appraisal process gave credit to proposals from the Global South and/or with team members from the South. Some review teams do have members from the South, although they are often now based in the UK and/or have only a few days allocated to the reviews. The budget for the project has not helped involve people from the South; for instance, in the acute malnutrition review an advisory group member is based in Ghana but the budget has limited scope for phone contact, often necessary when Skype fails.²³⁶

However, the project has found that there is a strong appetite for participation in such research and synthesis processes in the South (and indeed in operational agencies at the international level). There is a need here to build capacity in a range of ways, for example internet capacity and search skills, for this to be maximised. As has already been noted, the capacity particularly in budget terms to build Southern actors' connection to the reviews and skills to apply their findings is extremely limited in the project.

5.2 Strengths

HESC contributes to the HIEP outcomes. It should be noted that these activities are largely seen as additional to the project, which is focused on the production of the eight reviews. It is to the team's credit that attention is being given to documenting learning and to developing advocacy and skills.

5.3 Areas to develop

The involvement of Southern actors in the production of the reviews is extremely limited because they could not compete with applications from the North on skills, experience and capacity grounds. In addition, the milestone payment system would have been a challenge for many Southern-based individuals and entities that do not have the cushion of funding to underwrite costs. Oxfam modified

²³⁴ Annual report 2015

²³⁵ IV 122

²³⁶ IV 124b

contracts to try to counter this risk for Southern applicants, which meant it carries additional risk itself. While encouraging value for money these unintended implications need to be thought through in DFID management models. They are also not well represented on various advisory groups involved in HESC, which limits their input to identification of priorities and products.

5.4 Conclusions

HESC has good potential to impact on HIEP outcomes although the end of the project in December 2016 may limit this impact. The project has clearly helped to strengthen the appetite and initiatives for research and evidence in some operational organisations although it has limited potential to meet Southern interest. Concerted investment will be needed to engage more systematically in the South. The broad network which HESC is building has potential to impact on the sector's support for evidence but this is likely to need sustained action beyond 2016.

6. Gender and social diversity

Nothing further to add

7. Other findings and comments

The project has found there is a strong appetite for evidence in the sector, somewhat contrary to that put forward in the HIES which suggests a culture not interested in humanitarian evidence. However, what is lacking are some of the skills to produce, appraise and apply the evidence, and also resources to build this capacity in the North and South.

8. Summative phase 1 conclusions

The HESC project is on track, is extremely well managed by the project team, has appointed strong teams, and has in place systems to support the production of quality reviews. Good connections have been made with the international humanitarian community in specific sectors and the evidence community. More detailed planning for the communication of the reviews and the range of products and processes to promote their integration into humanitarian policy and practice is now necessary.

9. Recommendations at case study level

To HESC team:

- a) Build in more formal processes to check with review teams that the quality of the reviews is being sustained before the submission of the draft report.
- b) Develop guidance on how to deal with lack of disaggregated data in syntheses.
- c) Work together with the review teams to develop a detailed plan for the communication of review products and processes. This should go beyond the production of reports and spin-offs, important though they are, but should also explore how HESC can support the application of findings, for example through linkage to training processes.

To DFID:

- d) Clarify the role and process for DFID in signing off protocols and future project outputs.
- e) Build awareness across the humanitarian and, if appropriate, other cadres of their expected input to HESC processes in 2016 and beyond, and keep them close to emerging findings to

build ownership and commitment to use them in DFID processes. Formalise adviser inputs and roles in 2016 and 2017 in their objectives, so this is built into work plans.

- f) Establish a mechanism to monitor uptake of HESC products after 2016. This could include an extension to HESC current monitoring, but it will be vital given that many products will not be released until late 2016.
- g) Work with HESC to develop a shared communication plan with details of products and processes to support the uptake and further steps building on the evidence reviews. Review any limitations placed by resource constraints and the options this excludes. Make explicit DFID roles (and who in DFID) in this process in 2016 and beyond.

Case Study 5: Humanitarian Innovation Fund

Isabel Vogel, November 2015

1. Introduction

This report covers Case Study 5: Humanitarian Innovation Fund. It forms part of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP).²³⁷ The five-year evaluation process tracks the DFID programme 2013–18. Eight projects funded through the HIEP have been identified to follow as part of the evaluation. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18.

Background to the Humanitarian Innovation Fund²³⁸

The Humanitarian Innovation Fund (HIF) is an initiative supporting organisations to develop, test and share new technologies, products and processes to make humanitarian aid more effective and cost-efficient. The HIF supports organisations around the world with grants of different size and scope, as well as mentoring grantees through the innovation process and brokering partnerships.

The Fund was launched in 2011 as a partnership between ELRHA (Enhancing Learning and Research for Humanitarian Assistance) and ALNAP (The Active Learning Network for Accountability and Performance in Humanitarian Action). The HIF is managed by ELRHA within the legal structure of Save the Children UK. Phase 1 ran from 2011 to 2014, and Phase 2 began in 2015 with the agreement of a new Accountable Grant to 2018.

The HIF specifically continues to contribute to HIEP's Output 2.1: **innovative humanitarian products and processes developed and tested at scale**. The specific outcome of the HIF is **to increase innovation in humanitarian practice resulting in demonstrated and cost-effective improvements in humanitarian action**.

The HIF funds innovation projects through an open call and two thematic windows on WASH and Gender-Based Violence (GBV). The open call and WASH windows are supported by DFID, while the GBV window is supported by Swedish Sida. As well as receiving a grant, grantees are supported by the HIF secretariat through a five-stage innovation process, using a range of innovation options (discussed further below).²³⁹ Two types of grants are awarded. Large grants of £75,000 to £150,000 are awarded biannually to eligible organisations for the development and implementation (pilot testing) of innovative ideas in humanitarian practice. Projects can last between 18 months to two years. These form the bulk of the core grants stream of the HIF. The small grants facility focuses on the recognition, invention and diffusion of innovation for short periods of 3 months to 1 year. The current funding profile for DFID's input for the HIF is as follows:

²³⁷ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

²³⁸ Source: PROGRAMME ANNUAL REPORT – DFID, The Humanitarian Innovation Fund (HIF), Period: October 2014 – September 2015; HIF Website <http://www.elrha.org/hif/home/>

²³⁹ The five stages of the pathway are as follows: **recognition** of a problem, a challenge, or an obstacle, with a corresponding opportunity for innovation; **invention** of a solution, or an idea, which helps to address the problem or seize the opportunity; **development** of the innovation by creating practical plans and guidelines; **implementation** of the innovation to produce real instances of changed practice, often using pilots and then scaling up; **diffusion** of the innovation leading to its wider adoption, outside the original setting.

	Budget UK£
DFID (Phase I)	3,575,359
DFID (Phase II)	7,829,918
TOTAL	11,405,277

2. Methodology

All HIEP case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact, and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process.²⁴⁰

Additional aspects explored in the HIF case study include:

- The opportunity to learn about types of management needed to support mentoring, brokering relationships with ‘next stage’ investors and convening across sectoral boundaries.
- Processes to ensure quality including relevance of innovation and support to next stage.
- A country visit to a selection of HIF grantees in Ethiopia and Kenya.

The HIF case study involved document reviews, interviews with selected HIF team members and high-level stakeholders, and a visit to Addis Ababa, Ethiopia and Nairobi, Kenya. Country visits took place during 4–10 November 2015. The purpose of the country visits was to speak to selected grantees (in Kenya) and key stakeholders from the East African humanitarian community to contextualise the case study in a national and regional context (see Annex 5 for details of interviewees).

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

Learning from projects on specific challenges, potential solutions and understanding success in innovation process is generating new insights into humanitarian innovation.

After four years of operation, the HIF has supported 65 projects globally and has built up its experience of supporting and managing innovation projects at different scales and in diverse sectors. Respondents from the sector noted that the HIF has been a trailblazer during a time when there was

²⁴⁰ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

very little funding for innovation. Respondents emphasised that HIF's independence enables it to fund smaller, riskier cutting-edge projects that are genuinely novel, in situations where a small amount of funding can make a difference. The HIF teams are seen to have a depth of knowledge about humanitarian practice, and this gives them credibility as a funder.²⁴¹

Phase 2 of the HIF includes a specific component to enhance the **capability of the humanitarian sector to innovate** (Output 3). However, the majority of the logframe indicators associated with this output are internally focused on project partnerships and diversifying funding. These are important areas, but seem to miss the opportunity to support the HIF's growing role as a thought leader in the sector, as shall be discussed further below.

The HIF's evidence base on innovation is growing as lessons from projects are made available on the HIF website through numerous reports and blogs. The HIF final reports provide a systematic way of capturing learning from projects and building up understanding of what makes a successful innovation, while the blogs and features provide more insight into process. These are searchable using a global map or various thematic categories. There are a number of synthesis products in the pipeline, coming from four main areas of activity:

- ALNAP case studies of granted projects – eight out of 15 have now been produced and are on the website.
- Synthesis of learning from the ALNAP case studies – due in March 2016.
- WASH challenges research pieces – in production.
- Active contribution to the WHS innovation theme, including a conference in June 2015 to produce some sector principles and guidelines for humanitarian innovation management – outputs not produced yet.

Only the eight completed ALNAP case studies were available for review within the current data collection period, as there have been various delays on the synthesis products (see the Annual Report 2015). The case studies take a rigorous research approach to analysing the innovation process in 15 projects, using a common rubric to assess the success of a project, and testing a number of propositions about the factors that make for a successful innovation process.²⁴² The case study research approach provides a systematic way of capturing process and outcome lessons from individual projects. The synthesis is also being approached in a rigorous way, with a good potential for producing reliable evidence on innovation success factors and practical insights on how to work with them in innovation projects.

As well as the forthcoming ALNAP synthesis, respondents from the humanitarian sector indicated that there is an opportunity for the HIF to aggregate lessons on key topics from across the portfolio to support the capability of the sector to innovate and maintain the HIF's valued contribution to the sector. The HIF is considered to have built up insights into:

- the use of new digitisation approaches to support work in insecure areas;²⁴³

²⁴¹ Interviews 215; 216; 220; 245

²⁴² Evaluator's review of research protocols; Interviews 32 and 213; selected case study reports on HIF website

²⁴³ Projects with WFP; HelpAge

- issues of scaling and adaptation;²⁴⁴
- the role of evidence in innovation;²⁴⁵
- the potential of local social enterprises and understanding potential local markets in humanitarian innovation and emergency response;²⁴⁶
- licensing issues and implications for brokering innovation partnerships with public and private entities.²⁴⁷

HIF's relevance needs to be sustained as new entities enter the innovation space, especially in local and regional contexts.

The HIF team is considered to be well networked in the humanitarian sector, with a reputation for credibility and independence.²⁴⁸ However, an important number of respondents from the East Africa humanitarian community (potential applicants, funders and operational agencies) were not aware of the HIF at all.²⁴⁹ While not conclusive by any means, this finding suggests that there may be opportunity to target outreach in Phase 2 to regional humanitarian communities, both to promote calls and to share lessons from relevant projects in the region.

Respondents from the region also highlighted a number of regional innovation hubs that are becoming important focal points for both humanitarian and development innovation, for example, the i-hub in Kenya, and UNICEF's global innovation hubs.²⁵⁰ At a regional level, there may also be potential budgets for innovation to tap into,²⁵¹ and there is emerging flexibility in some humanitarian/development programme budgets that may create the space for an HIF grant to support an innovation project.²⁵²

Internationally, the HIF team have already taken an active role in the reports and consultations for the innovation theme within the World Humanitarian Summit.²⁵³ By sharing learning, the HIF can contribute to advancing the design and targeting of new innovation initiatives as other funds enter the humanitarian innovation space. In-depth knowledge on persistent challenges, solutions that have already been tried, and new frontiers can add value to innovation at a system level as capacities grow nationally and locally.²⁵⁴ Undertaking greater outreach, which some have termed 'ecosystem influencing',²⁵⁵ will help to maintain the HIF's relevance and position as an experienced innovation manager in the emerging humanitarian ecosystem. However, influencing activities should be brought together within a more developed and resourced diffusion and uptake strategy, discussed in the section on effectiveness.

²⁴⁴ Interview 220

²⁴⁵ Interviews 213; 211; 215

²⁴⁶ Interviews 214; 225; 226

²⁴⁷ Programme Annual Report 2015

²⁴⁸ Interviews 26; 215; 216; 220.

²⁴⁹ Interviews 64; 65; 194; 195; 197; 198; 200; 202; 203; 206; 207; 208; 209; 219

²⁵⁰ Interview 219; 246

²⁵¹ Interview 197; 219

²⁵² See Case Study 8 on multi-year funding.

²⁵³ 32; 245

²⁵⁴ Interviews 215; 245; 247

²⁵⁵ WASH Stocktake, 2014; interviews 215; 220; 245

HIF's addressing of gender and social inclusion could be strengthened in the open call and WASH window.

Gender and social inclusion are not addressed as an explicit policy in the HIF; there is no formal requirement for applicants to address gender and social inclusion issues.²⁵⁶ In the Gender-Based Violence window this requirement is much more explicit, but this lens has not been applied across the open calls and the WASH window. The grants panel does have a gender specialist and there is access to gender technical specialists, so these issues can be potentially picked up and strengthened. However, in general, it is down to the grantee to think about how the pilot would affect inclusion and access.²⁵⁷ Although the panel has become more experienced at identifying potential issues of inclusion or exclusion, this is not supported by an explicit framework or key questions which would strengthen the identification of hidden gender and inclusion issues in a proposal.

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

Enhanced staff capacity and grant management flexibility has strengthened HIF's innovation management approach.

Following an independent review of the WASH work stream, in 2014–15, the HIF team implemented a more flexible range of approaches to innovation management, facilitated by the recruitment of two specialist innovation managers to the team. These individuals have a background in enterprise development as well as humanitarian practice.

The WASH Stocktake in 2014²⁵⁸ confirmed the value of the directed innovation approach but identified a number of recommendations to strengthen the process, some of which have been implemented by the HIF team in both its open and WASH streams. The main changes that have been made to the WASH approach during 2015 include:

- commissioning of in-depth research on the challenge areas providing a package of analysis to potential problem-solvers on the root causes of problems, previously tried solutions and promising insights from other sectors to target challenges more productively;
- adoption of a wider range of innovation options tackling challenges, including open calls; soliciting proposals from targeted organisations around specific challenges; accelerated innovation processes; hackathons; building partnerships to develop an idea; or combinations of options as appropriate.²⁵⁹

In relation to the open calls, a decline in the quantity and quality of applications received in 2014–15 prompted the secretariat to revise its rules and approaches.²⁶⁰ For example, the small grants have been re-branded as Early Stage grants to reflect their purpose, and the range of funds has been increased from £0–£20,000 to £0–£50,000, in order to include a wider range of organisations. The new Phase 2 agreement with DFID now permits funding of for-profit and social enterprises as lead

²⁵⁶ Interviews 26; 32; 216

²⁵⁷ Interview 32

²⁵⁸ HIF Innovating Wash: Project Health Check, September 2014 <http://www.elrha.org/hif/innovation-resource-hub/innovation-links/hif-innovating-wash-project-health-check/>

²⁵⁹ Programme Annual Report; interviews 32; 215; 217.

²⁶⁰ Programme Annual Report – DFID, The Humanitarian Innovation Fund (HIF), Period: October 2014 – September 2015

partners²⁶¹ and gives the secretariat more discretion to support proposal development, for example, organisations in the global South.

This facility responds to the recognition that there are many potential innovators in the global South who may lack skills in proposal and business development. The first example of this new approach is a grant to a Ugandan refugee organisation that is trialling microfinance approaches with urban refugees' community initiatives in Kampala, Uganda. This project would not have been possible to fund previously, so although modest progress, it is a step in the right direction in terms of relevance and equity.²⁶²

The new agreement also gives the secretariat the scope to manage the whole portfolio more proactively, linking promising proposals received through one channel to ongoing processes in others, for example challenges in WASH or GBV. There has also been more targeted promotion of calls and challenges through social media, platforms such as Reliefweb, and activities such as webinars. Correspondingly, the team reported an improvement in quantity and quality of proposals received in the ninth round of granting in late 2015.²⁶³

HIF is exploring opportunities to support successful grantees to position themselves for follow-on funding and involve potential users in that design process.

At the HIEP formative stage, it was identified that there was a longer-term opportunity for HIF to provide support to successful projects to position themselves for scale and to access potential 'next users' of the project outputs. The HIF team are now starting to address this challenge. Many respondents identified the need to keep projects going in the short term because designing for scaling can take time and there is a need to build up a network of stakeholders and users.²⁶⁴ Support from the HIF could combine bridge funding with independent impact evaluation and business mentorship to keep the management team moving towards positioning for scale.²⁶⁵ HIF is currently in the process of designing criteria for eligibility for follow-on support of around £350,000 plus business mentoring.²⁶⁶ It is also negotiating an agreement with the government of the Netherlands' humanitarian innovation funding stream to trial the bridging approach with three bridging grants;²⁶⁷ and is establishing contact with potential funds, such as USAID's Development Innovation Ventures.²⁶⁸

Application and transferability of findings is enhanced by supporting grantees to strengthen their monitoring and evaluation.

The new innovation management approach enhances the application and transferability of findings by supporting grantees with their monitoring and evaluation. This is considered by respondents to add significant value to the HIF, as transferability is a challenge.²⁶⁹ For example, where there are

²⁶¹ Interviews 26; 32; Programme Annual Report – DFID, The Humanitarian Innovation Fund (HIF), Period: October 2014 – September 2015

²⁶² Interviews 32; 215; 243

²⁶³ Source: PROGRAMME ANNUAL REPORT – DFID, The Humanitarian Innovation Fund (HIF), Period: October 2014 – September 2015

²⁶⁴ Interviews 32; 214; 215; 217 220; 221

²⁶⁵ Interviews 32; 214; 215; 217 220; 221

²⁶⁶ Interview 32

²⁶⁷ Interview 32

²⁶⁸ Interview 32

²⁶⁹ Interviews 26; 32; 215 217.

successful projects, such as the World Food Programme (WFP) digital data collection approach, the diffusion pathways tend to be within the same agency; there are few examples of an approach travelling out to a broader sectoral group of organisations.²⁷⁰ This was confirmed by a wide range of respondents, who noted that to convince humanitarian agencies to try a new approach with any additional amount of risk is extremely difficult.²⁷¹

Generating stronger evidence from projects is important, because it helps make the case that the gains are going to be worth the risk. This needs to be evidence from trials in a real situation that demonstrates comparable costs; if there is any equipment involved, then production requires agreement on standards and criteria established by the humanitarian sector.²⁷² The Words of Relief project (Translators without Borders) conducted an impact evaluation to show that people respond better to messages in their own language, and demonstrated the faster translation that can be delivered through their services. However, the team is having to invest in advocacy to convince humanitarian agencies to include a translation component in their emergency response appeals because, despite the evaluation evidence, there is reluctance to increase funding requests for non-traditional activities.²⁷³ Providing support to produce the evidence that is looked for by potential adopters, adapters or scaling agencies is an important step for HIF.

Stronger impact assessment is needed to track outcomes at the level of the fund and projects.

An area that has not yet been fully developed in the HIF is impact assessment, either of completed projects, or the contribution of the fund as an actor in the sector. The 2015 Annual Report discusses some of the improvements that have already been made, including closer support to grantees to strengthen appropriate monitoring and evaluation of projects, and improvement of reporting templates to capture outcome and impact information. The secretariat aims to keep in contact with completed projects to follow post-HIF outcomes and impacts that may build on results gained from HIF-funded phases.

These findings suggest that there is an opportunity in Phase 2 to design a more ambitious impact assessment approach that encompasses following up projects after completion and developing assessment along the fund's own theory of change towards higher-level outcomes for affected populations (recognising the limits of the HIF's sphere of influence). This approach would help to capture the 'soft' activities of innovation management and sector influencing that the logframe may not reflect. The Phase 2 agreement has provision to develop this.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

The HIF appears to be well connected into the DFID humanitarian areas at the headquarters level; for example, there are regular briefings to CHASE.²⁷⁴ DFID's country humanitarian advisers have much lower awareness of HIF, as has been noted, despite the HIF manager leading a session on innovation at the DFID humanitarian advisers' conference in June 2015. Wider East African humanitarian stakeholders are also not as aware of the HIF as they could be.

²⁷⁰ Interviews 211; 215; 218; 220; 222; 225; 226

²⁷¹ Interviews 211; 215; 218; 220; 221; 222; 223; 224; 225; 226

²⁷² Interviews 211; 221

²⁷³ Words of Relief Case Study; interviews 32; 221; 222; 224

²⁷⁴ Interview 26

Sectorally, HIF is well networked into the WASH and the GBV areas through its thematic windows and the specialist working groups that are involved. Internationally, the HIF has a strong profile as a key partner in the WHS innovation theme.²⁷⁵ There are some connections between the HIF and emerging innovation funds such as UNHCR and UNICEF, but one respondent suggested that these could be strengthened.²⁷⁶

3.1.4 Extent to which HIEP products are relevant to decision makers

HIF requires a range of communications products from projects, but the responsibility for tailoring products lies with grantees; scaling may require more directed diffusion.

HIF projects all produce practical findings and are intended to inform practice. Project outputs are geared towards practitioner audience, and capture key lessons. The HIF requires grantees to work with the ELRHA diffusion guidelines and templates for capturing lessons in a consistent way.²⁷⁷ These are guidelines, but the specific range of products is decided by the project. Peer-reviewed articles are not a requirement although they are appropriate and desirable for some projects, such as the Massachusetts Hospital's medical innovation for managing post-partum haemorrhage.²⁷⁸ Generally, projects produce three types of product for different audiences: a journal article, a practice-oriented output, and multi-media communications for engagement. HIF shares all blogs and project reports on the website although there is a perception that this transparency makes it harder to communicate failures.²⁷⁹

3.2 Strengths

- Strong international profile as a respected and credible funder.
- Progress is being made in capturing lessons and synthesising for sector-learning.
- Improved capacity for innovation management is broadening the scope of the HIF and enabling linkages to other innovation funders.

3.3 Areas to develop

- Few products synthesising innovation lessons and insights from across the portfolio have been completed to date; there is a need to maintain momentum on the delivery of these, and to potentially add more topics.
- Visibility at the regional level is low, for both local innovators and 'next stage' users.
- Resources for grant management, innovation management and 'ecosystem influencing' may rapidly become over-stretched, even with additional posts.
- Stronger impact assessment is needed to track outcomes at the level of the fund and projects.
- Gender and social inclusion focus needs to be strengthened.

3.4 Preliminary conclusion

²⁷⁵ Interviews 26; 32; 217; 245

²⁷⁶ Interview 26

²⁷⁷ HIF Reporting templates, various.

²⁷⁸ See project reports <http://www.elrha.org/map-location/massachusetts-uterine-balloon-tamponade-implementation/>

²⁷⁹ Interview 32; 217

The HIF is producing important learning from projects on specific challenges, potential solutions and understanding success in innovation process. Greater staff capacity and flexibility has improved HIF's innovation management approach, its support to successful grantees, and stronger monitoring and evaluation. However, more ambitious impact assessment is needed to track outcomes at the level of the fund and projects in order to understand the trajectories of HIF-funded initiatives and of the HIF as an actor. HIF's addressing of gender and social inclusion could also be strengthened in the open call and WASH window to maintain a focus on how projects contribute positively to equity and inclusion.

Undertaking greater outreach, based on solid learning from experience and directed by a more detailed uptake and impact strategy, will help to maintain the HIF's relevance and position as an experienced innovation manager in the emerging humanitarian ecosystem.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

Quality assurance processes ensure that HIF is continuously improving the standard of project design, implementation and outputs.

The HIF employs a range of quality assurance processes in grant-making. At the application stage of the open call, the original panel review system has been strengthened with the inclusion of a new technical review stage. The application forms follow an academic format, with requests for literature reviews and detail on methodologies; these are considered rigorous.²⁸⁰ The Phase 2 agreement strengthens the evidence component in applications by providing funds for a framework agreement with a research provider to provide specific technical support to improve grantees' evidence gathering. However, this component has been delayed in implementation due to recruitment issues.

In terms of quality assurance of HIF's own products, the ALNAP case studies and synthesis have been designed to meet research standards for qualitative research, with structured protocols, data collection and peer review.²⁸¹

The WASH window is made up of brokered projects, which are reviewed by the WASH Technical Working Group and additional technical experts to advise which proposals are worth funding. There is some evidence from the WASH review and interviews to suggest that the partnership approach may need revising, especially when partnerships are being established between organisations from different sectors.²⁸² There are differences in values, experience and expectations that need to be explored more fully; for example, collaboration might be a more flexible model rather than sub-contracts, which are the norm for humanitarian partnerships. Some respondents suggested that a more flexible arrangement would facilitate drawing on and budgeting for full capabilities from partners, for example, pooling expertise on markets, enterprise and stakeholder engagement.²⁸³

²⁸⁰ Interviews 32 and 216; review of materials by the evaluator.

²⁸¹ Evaluator review of case study protocols and reports.

²⁸² WASH Stocktake Report, 2014; 211; 214

²⁸³ WASH Stocktake Report, 2014; 211; 214

Lessons include allowing for more process and collaboration development time in the budget and exploring different collaboration models and contracting.

During implementation, there is already close monitoring of project management and financial management. Large grants over £100,000 have hard stage gates and specific milestones that need to be met before the next tranche of funding is released, and there is more oversight than for smaller grants. With more staff resource for management and support, the HIF team is aiming to move towards proactive monitoring to help improve projects as they develop. Some of the project respondents interviewed suggested that more proactive checking-in on process and partnership would have helped them, while others felt they had received proactive support.²⁸⁴

At the output stage, communication outputs are checked but are not closely scrutinised. The final report is a requirement. An emerging issue relating to outputs relates to licensing and permissions. This was identified by some interviewees²⁸⁵ and was also mentioned in the 2015 Annual Report. Currently, there is no explicit policy on licensing, nor has there been a specific need to address this yet within a project. However, as the HIF is planning to work more with enterprise and business organisations, there may be a situation where the products from one project are taken up by a different group for adaptation or scaling, so there may be a need to plan ahead for this issue.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

Impact Strategy requires an update to meet and track HIF Phase 2 outcomes and HIEP behaviour changes.

The HIF has an explicit aim to strengthen the capability for innovation in the sector, which relates directly to the HIEP outcome areas. To support progress in this area, there is a HIF impact strategy, with a logframe and theory of change. There is also more staff resource in the team than previously for outreach and engagement: a communications officer, two new innovation managers, as well as the programme manager. The main channels of communication are the HIF website, presentations and convening conferences.

The current impact strategy is generic and has not yet been fully fleshed out with specific target groups and engagement strategies, or a plan for outreach at the regional level. The document, therefore, does not provide guidance to enable promotion of innovation thought leadership or facilitation of next-stage linkages for grantees, both key priorities for Phase 2. There is also no evidence of impact monitoring or tracking of influencing activities. Given these priorities, the strategy should be revised to provide a guiding framework for achieving and tracking change in these areas. The revision should consider who are the ‘next groups’ that the HIF needs to reach, for example:

- Potential innovators with ideas to pilot, in various sectors, non- and for-profit;
- Scale-up innovators who need support (financing and advice) for adaptation and scaling;
- Inexperienced innovators in the global South, especially from non-traditional groups;

²⁸⁴ Interviews 211; 214; 221; 222; 223; 224; 225; 226

²⁸⁵ Interviewees 211; 214

- Financing and enabling community, for example, if bridge financing is the challenge, playing a role in engaging actors and networks, identifying and developing solutions to that;
- Operational communities who are potential adopters.

The revision of the strategy would benefit from considering the HIF and HIEP theories of change and the different pathways of influence open to the HIF to identify priority target groups. Focusing on priorities within a larger framework would help to focus scarce staff resources, aiming for a comprehensive but flexible strategy.

HIF has made significant contributions to the World Humanitarian Summit (WHS) innovation theme.

The most high-profile outreach effort by the HIF has been to provide substantive contributions to the WHS process. This has been done in conjunction with DFID's direct influencing efforts through the HIEP secretariat and head of Humanitarian Policy (who is the former Head of HIEP).

Over the last two years, the HIF manager, has provided a range of inputs based on the learning from the HIF experience. This has included the shaping and drafting of synthesis reports, membership of steering committees, and conference participation. The HIF's contribution has been described as 'major and substantive' by a senior stakeholder,²⁸⁶ for example hosting an event in June 2015 to help formulate a set of humanitarian innovation management principles. The HIF's practical experience with independent innovation support is almost unique in the sector. Coupled with DFID's commitment through the HIEP to evidence and innovation, the HIF and HIEP are considered to have significantly moved the innovation theme on in terms of its understanding and ambition.²⁸⁷

The current ambition within the WHS innovation theme is the establishment of a Global Alliance for Innovation, with the sponsorship of DFID. The HIF manager remains closely involved in the design and advocacy for the alliance.²⁸⁸ Respondents who are involved in the WHS report lowered expectations of the WHS as a whole, but consider that the innovation theme has been better resourced and, therefore, has potential to produce significant global momentum around humanitarian innovation.²⁸⁹ This makes the WHS a worthwhile investment of the HIF's outreach efforts.

There is evidence of HIEP behaviour changes being supported, and evidence of operational actors responding to HIF-funded innovations.

The HIF is acting like a champion of evidence and innovation through its influencing at the WHS, and endorsing DFID's messaging about innovation and evidence. However, although humanitarian agencies have started to create innovation funds, such as UNICEF's Global Innovation Centre launched in 2015 and UNHCR's Innovation fund, established in 2012, it is not possible to say from the current data if the HIF approach has influenced these.

International NGOs, such as Oxfam, also have internal innovation funds and competitions. It was noted by one respondent that there is increasing interest in applying for innovation funds from the HIF, and that the organisation has had to implement an internal rationalisation process to ensure

²⁸⁶ Interview 245

²⁸⁷ Interviews 215; 220; 244; 245;

²⁸⁸ Interviews 32; 245

²⁸⁹ Interviews 32; 213; 214; 215; 216; 219, 245; 247

strategic fit and quality of the proposals being put forward.²⁹⁰ This suggests that the HIF has succeeded in sending an important signal about innovation, with relatively small amounts of funding.

There is some evidence of operational actors endorsing or adopting HIF-funded innovations, for example the WFP digital mapping project or the International Federation of Red Cross and Red Crescent Societies (IFRC) menstrual hygiene management approach.²⁹¹ However, equally, there is also evidence of limited or non-adoption, for reasons discussed in the impact section below. As noted previously, a more developed outreach strategy to support influencing for the HIF's different purposes would strengthen the HIF's contribution in this area.

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

An example of where the HIEP management model has worked well is in the WHS process, where the combined efforts of HIF and HIEP secretariat staff have made a significant contribution: the hands-on experience of the HIF backed by the financial leadership of DFID. However, in other aspects the HIF has not benefitted from the internal DFID project management. Although there have been briefings by HIF to CHASE and the humanitarian cadre, it has been hard to get HIF on the radar of humanitarian advisers in country offices.

4.1.4 Extent to which the programme maximises the potential impact of its component parts (coherence)

HIF is now integrated into the HIEP logframe and reporting system.

The HIF is more integrated into the HIEP now than in formative phase, with HIEP's R2HC project also hosted at ELRHA and the WHS, work which has built closer linkages. Phase 2 of the HIF links the programme into the HIEP logframe's Outcome 3 on innovation and reporting system. The HIEP annual review in 2014 focused on innovation as a cluster and included HIF and others in the portfolio in its review – Education in Emergencies and Moving Energy Initiative.²⁹² The cluster approach seems helpful for drawing lessons across the portfolio, but it is not clear to what extent HIF has meaningfully connected with the other innovation programmes in the portfolio. Being part of the HIEP might have made the Phase 2 proposal process more efficient if it was integrated more efficiently into the HIEP business case.

4.2 Strengths

- Quality assurance processes ensure that HIF is improving standards of project design, implementation and outputs.
- HIF has made significant substantive contributions to the World Humanitarian Summit (WHS) innovation theme, enhancing sector-wide understanding and ambition for humanitarian innovation.
- There is evidence of HIEP behaviour changes being influenced, and evidence of operational actors responding to HIF-funded innovations.

²⁹⁰ Interview 246

²⁹¹ Both innovation stories are more complex than this, as the case studies suggest.

²⁹² Annual Review Innovation Cluster report, Oct 2014

- HIF is integrated into HIEP monitoring and reporting systems.

4.3 Areas to develop

- Impact Strategy requires an update to meet HIF Phase 2 outcomes and HIEP behaviour changes, including plans for outreach at a regional level.
- The results of WHS activities and other influencing are not being tracked.
- HIF is not really benefitting from being part of the HIEP portfolio, for example, visibility among East African humanitarian advisers is low.

4.4 Conclusions

The HIF's quality assurance processes are effective for the creation, support and application of high quality and relevant humanitarian evidence and innovation. Sharing the HIF's knowledge-sharing and championing of innovation and evidence at the WHS has evidently made a significant contribution to the development of innovation at the system level. However, the lack of a detailed impact strategy and behaviour change tracking process may limit the potential to promote innovation thought leadership or facilitate next-stage linkages for grantees, both key priorities for Phase 2.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

HIEP has three outcomes it seeks to achieve:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment in evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises

HIF is well-positioned to contribute to the HIEP outcomes, but this requires a strategy and resources to achieve.

HIF Phase 2 positions the HIF to contribute directly to the HIEP outcomes through its work stream on enhancing the capability of the sector to innovate. Phase 2 gives HIF a mandate, therefore, to be a thought and practice leader on humanitarian innovation, an area in which it is already starting to see emerging results at both project and international levels. The contribution stories illustrate the significance of these results and the evidence behind them.

The evidence from the evaluation suggests that there is strong potential for the HIF to contribute to HIEP outcomes and 1 and 3, but also to outcome 2. However, from interviews and documents relating to Phase 2, it is not clear to what extent the HIF has a vision for itself as a thought and practice leader.²⁹³ The evaluator has not seen an organisational or influencing strategy that addresses this potential. Without a strategy, the HIF's knowledge-sharing and influencing efforts may become fragmented. As the recently expanded staff capacity is already committed, a strategy may help to set priorities within the outreach work stream, among all the other priorities.

HIF projects have contributed to direct benefits for affected people, but the HIF's value-added comes from generating knowledge – the increased learning and evidence on a previously hidden issue – and the end-user and stakeholder networks created as a result of projects, as much as from an improved solution.

HIF projects often contribute tangible benefits for affected peoples, at times for those groups marginalised within humanitarian assistance. Examples from highly diverse projects at different innovation stages include:

- Motivation project distributed 100 wheelchairs to disabled people affected by Typhoon Haiyan, as part of its field trial, which were considered to be appropriate and suitable by users;²⁹⁴
- Trials of Massachusetts's Hospital low-cost uterine package for the management of postpartum haemorrhage have seen the deployment of the device to 40 health facilities in Sierra Leone, and training of 440 health workers, and, despite the impact of Ebola, it has been used to help 17 women, who all survived;²⁹⁵
- IFRC project on mobile technology, as part of its trial, reached over 2 million Haitians seeking a wide range of information on the assistance available to them and related issues, using the service established with HIF funds. Positively evaluated, the model for Beneficiary Communications adopted in Haiti was used as an archetype for Red Cross/Crescent work elsewhere, notably as part of the Ebola crisis in West Africa.²⁹⁶
- CRS Gaza Risk Reduction and Mitigation (GRRAM) project, while not successful at demonstrating the benefits of the model being trialled, did produce and document learning, and there was evidence from follow-up surveys that the residual networks and capacity created through the project led pilot participants to be better equipped to respond and cope to the upsurge in fighting in Gaza during summer 2014.²⁹⁷

An issue noted in the ALNAP case studies is that many HIF projects arise from a deeper, and hidden, challenge, and so diffusion activities have to tackle raising awareness among humanitarian agencies as well as about the potential solution. For example, the Motivation project highlights the lack of sufficient awareness in humanitarian organisations of the needs of disabled people in an emergency response; Words of Relief highlights a lack of awareness about the need to deliver messages in local

²⁹³ Interviews 216; 220; 245

²⁹⁴ See case study report: <http://www.elrha.org/hif/innovation-resource-hub/hif-project-case-studies/motivations-appropriate-and-affordable-wheelchairs/>

²⁹⁵ See project report <http://www.elrha.org/wp-content/uploads/2015/07/Final-Report.pdf>

²⁹⁶ See case study report: <http://www.elrha.org/hif/innovation-resource-hub/hif-project-case-studies/mobile-technology-listening-voice-haitians/>

²⁹⁷ See case study report <http://www.elrha.org/hif/innovation-resource-hub/hif-project-case-studies/gaza-risk-reduction-mitigation/>

languages; menstrual hygiene management and similar projects highlight a lack of awareness of the dignity and health impacts of gender-blind WASH facilities and hygiene kits. This issue effectively doubles the diffusion challenge and partly explains why the uptake can take so long. In this regard, these HIF-funded projects have provided an important contribution to making visible the gaps in response, particularly affecting the most vulnerable groups, and putting forward potential solutions to address them.

5.2 Conclusions

HIF has strong potential to contribute to the HIEP's system change outcomes through its knowledge-sharing and influencing. There is evidence to suggest that some projects contribute to tangible benefits, but many benefits derive from the increased learning and evidence on a previously hidden issue, and networks created as a result of projects, as much as from an improved solution.

6. Gender and social inclusion

Nothing further to add.

7. Other findings and comments

None

8. Summative phase 1 conclusions

In relation to relevance, the HIF is producing important learning from projects on specific challenges, potential solutions, and understanding success in innovation process. Enhanced staff capacity and grant management flexibility has strengthened HIF's innovation management approach, and HIF is exploring opportunities to support successful grantees to position themselves for follow-on funding and involve potential users in that design process. However, HIF's addressing of gender and social inclusion could be strengthened in the open call and WASH window to maintain a focus on how projects contribute positively to equity and inclusion.

In terms of effectiveness, application and transferability of findings is enhanced by supporting grantees to strengthen their monitoring and evaluation. However, stronger impact assessment is needed to track outcomes at the level of the fund and projects in order to understand the trajectories of HIF-funded initiatives and of the HIF as an actor. Supporting successful projects to position for scale will require rigorous impact assessment, as well as more directed diffusion approaches to target groups.

Undertaking greater outreach, based on solid learning from experience, will help to maintain the HIF's relevance and position as an experienced innovation manager in the emerging humanitarian ecosystem. However, activities need to be brought together within a more developed and resourced diffusion and uptake strategy. The current strategy is generic and has not yet been fully fleshed out with specific target groups and engagement strategies, and a plan for outreach at the regional level.

The HIF has strong impact potential, but it has to help balance its efforts and resources between its core grant management, expanding its support to scaling and adaptation, as well as thought leadership at the system level. A challenge is to engage more in-depth with actors at a regional level, where there are emerging innovators and opportunities. To help in this, it may be possible to select

a priority region for Phase 2, identify potential strategic partners and build alliances for deep engagement at regional level. Organisations such as the Institute of Humanitarian Affairs, that seeks to be a ‘knowledge node’, could be potential strategic allies.

9. Recommendations at case study level

For the HIF team:

- Develop an updated impact strategy that provides more detail on the following:
 - HIF’s vision and objectives for its thought leadership work to contribute to system-level change (‘capability of the sector to innovate’);
 - Who the ‘next users’ in terms of adoption/scaling;
 - The potential innovators that need to be reached, and where;
 - A selected region for deep engagement in terms of reaching ‘grass-roots’ and building strategic alliances, to maintain relevance and effectiveness;
 - A range of topical and synthesis pieces to enhance the evidence base on innovation.

Given the pressure on resources, the impact strategy could be specified year by year. So, for example, 2015–16 prioritises a focus on the WHS, while 2016–17 might focus on developing a regional engagement.

- Develop a more ambitious and detailed impact assessment and impact monitoring strategy at the level of the fund, to include tracking contributions to behaviour and system change as part of the impact strategy. Consider using the HIEP and HIF ToC to guide the design of strategy and impact assessment to ensure coherence.
- Consider an appropriate approach to apply a gender and social inclusion lens more systematically to ensure a focus on equity and inclusion in projects.

For the HIEP Secretariat:

- Support the HIF’s regional engagement by facilitating linkages to country offices and the regional humanitarian community through DFID networks.
- Create stronger linkages between programmes in the HIEP portfolio, for example, between the HIF and other innovation programmes, to promote learning and alliances to achieve the HIEP outcomes.

Case Study 6: Secure Access in Volatile Environments (SAVE)

Teresa Hanley, December 2015

1. Introduction

Secure Access in Volatile Environments (SAVE) is a £1.58 million, three-year research programme exploring the effects of insecurity on access, quality and accountability in highly insecure contexts. The goal of the SAVE programme is to contribute to solutions for providing effective and accountable humanitarian action amid high levels of insecurity and it aims to do this by providing new, rigorous evidence on presence and coverage, aid quality, and monitoring and evaluation. The programme began in October 2013 and is being carried out by DFID partner Humanitarian Outcomes (HO) as lead agency with partners Global Public Policy Institution (GPPI) and research partners in four focus countries of Afghanistan, Somalia, South Sudan and Syria. The programme is organised around three inter-linking components that aim to:

- **Component 1 (Access)** – strengthen the evidence base for decision making by producing a quantitative evidence base for assessing security-related humanitarian access constraints.
- **Component 2 (Quality)** – identify ‘what works’ in enabling access and quality programmes in insecure settings.
- **Component 3 (Accountability and Learning)** – investigate and pilot options for addressing the challenges to monitoring and evaluation in insecure environments, particularly through differing monitoring modalities.

This evaluation case study report forms part of the evaluation of DFID’s Humanitarian Innovation and Evidence Programme (HIEP).²⁹⁸ The five-year evaluation process tracks the DFID programme 2013–18. Eight projects funded through the HIEP have been identified as case studies. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18. At the time of data gathering for the evaluation, SAVE was at approximately the 2-year mark and had completed its own data collection and initial analysis for most of components 1 and 2, undertaken initial engagement through 22 workshops at the international level and across the four countries with national stakeholders to verify findings, and was beginning implementation of component three in the fourth country with data collection in other countries complete.

2. Methodology

All case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process.²⁹⁹

The SAVE case study was undertaken over 9 days spread across September to December 2015 and included:

²⁹⁸ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

²⁹⁹ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

- Document review of interim reports, inception and annual reports, literature review and methodology options paper (full list in attached Evaluation Annex 4)
- 31 interviews with stakeholders including partner project management and research teams (8), DFID lead adviser, DFID humanitarian advisers in-country (2), SAVE advisory group members (3) and external stakeholders including those who have been involved in country-level activities, such as workshops, as learning partners, and consultations (18).
- Over half the interviews were carried out during a country visit to Nairobi, Kenya, on 9–14 November, to meet stakeholders involved in SAVE’s work in Somalia (based in Kenya) and the remainder through phone and Skype interviews. Somalia has been the focus for most external stakeholder interviews.

One element of the overall HIEP evaluation methodology is contribution analysis to consider the significance of HIEP activities to any identified changes in support for and use of evidence and innovation. It is too early to expect to identify changes that lend themselves to contribution analysis but its logic has informed the evaluation analysis in relation to effectiveness and impact (i.e. by considering other factors that may be contributing to any observed changes).

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

The formative evaluation identified that SAVE is clearly intended to address one of the four key problems identified by DFID relating to the inadequate evidence on what works in humanitarian assistance. The formative evaluation also commented on the structured approach taken by the project partners to identify evidence gaps. This evaluation phase has confirmed that the questions SAVE is asking, and issues on which it seeks to build evidence, are consistently seen as relevant by external stakeholders.³⁰⁰ The in-country consultation processes have helped to ensure it responds to priority issues in-country. This is particularly the case for component 3, which has had a more participatory and active learning approach overall and is more immediately responding to needs of at least of some of the learning partners. This is seen, for example, in its provision of input to UNICEF’s planning for Third Party Monitoring in Afghanistan regarding if and how monitoring processes can be simplified.³⁰¹

External stakeholders identified a risk that the C3 M&E focus on particular monitoring approaches might limit SAVE to only technical discussions on what works (though this is valued) rather than also being the basis for taking forward some of the broader issues relating to monitoring in insecure environments. A number of broader issues were raised. These are firstly, the need for discussion in the sector about the balance between monitoring as a means of verification and risk management versus being a means to understand contexts and the results; secondly, how monitoring and

³⁰⁰ IV 156, 162,154,173,227

³⁰¹ IV 179, 167,172

evaluation processes can help agencies, and the sector more widely, better understand the intended and unintended consequences of humanitarian assistance into that system; thirdly, the appropriate proportion of resources to put into monitoring; and finally, risk that the growing use of high-tech approaches may constrain capacity of local organisations which are seen by some as increasingly instrumentalised by international organisations in insecure environments.³⁰² Humanitarian Outcomes report plans to address some of these issues in a briefing paper to be produced in 2016, which should help to counter this risk.

In relation to access and quality, the focus of components 1 and 2, SAVE is also addressing issues valued by the sector though at this point the general feedback is that it is the systematic provision of evidence that is proving most beneficial rather than that emerging findings shared so far are producing new knowledge.³⁰³

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

A key strength of the project design highlighted by stakeholders is the four-country approach, which gives more weight to findings than a single country approach could, as well as allowing for comparison and identification of common themes and patterns across countries. The selected four countries were seen as appropriate and relevant by stakeholders being likely to produce findings that can be used outside of the countries. Stakeholders at country level in Somalia saw the other three contexts as relevant to them, which builds the receptivity to findings from outside of the Somalia context. Each component has followed its own methodology, which is quite distinct. Country-level researchers were recruited in each focus country. There are some common aspects across components including qualitative interviews, inclusion of affected population consultations, and in-country workshops, as well as joint presentations at the global level. There is also a single global Advisory Group, which includes staff with research as well as operational expertise from key, relevant organisations such as ICRC, OCHA, other UN agencies and INGOs, as well as DFID.

Component 1 undertook a wide scan of potential methodologies before selection. Definitions of coverage were debated in the advisory group and a working definition for the purposes of the research agreed.³⁰⁴ The research team also had to adapt its methodology during data collection to meet the constraints of different contexts including reluctance of agencies to share data, poor quality data and delays in collective data being shared (for example, researchers in-country reported they had adapted their plan and rather than awaiting provision of data from OCHA in Somalia the local researchers gathered it directly from the ground). Data constraints mean that the data is sufficient to present patterns of access (which has always been the intention) but not a comprehensive picture of 100% reality at any point in time. Given that the purpose of the overall research programme is, among other aims, to explore factors influencing access, this level of detail is sufficient. A strength of the methodology has been the combination of quantitative and qualitative approaches enabling it to capture much of the nuance around access. For instance, agency presence may be short term in rapid responses; presence may be low in numbers of staff present but long-term in more developmental approaches; it can be variable over time as numbers of staff in-country are reduced for short periods of time due to security issues; and community access to assistance is

³⁰² IV 168, 264, 263,157

³⁰³ IV 152,153,156, 13

³⁰⁴ IV 13

very fluid due to the changing dynamics of politics at a very local level. It will be a challenge, which the research team is aware of, to ensure that visual representations of access do not lead audiences to miss or misinterpret the nuance of access findings.

Component 2 has also had to respond to the reality of the problems surrounding data gathering in a complex environment. In Somalia the team used a range of data gathering approaches including phone data collection³⁰⁵ to reach informants; the team found ways to access people without oversight by gate-keepers in camps and also ran focus group discussions with gate-keepers providing rich sources of data.³⁰⁶

Component 3 has taken a different approach with a more participatory, active learning research process where selected learning partners worked with the research teams to explore particular aspects and methods of monitoring. This has resulted in rich data on monitoring approaches because learning partners opened up their data sources to the research teams. It has also meant that the questions asked have a high degree of relevance to the partners involved. However, it reduces the potential for more cross-country analysis of particular themes, something the stakeholders interviewed in the HIEP evaluation would value.³⁰⁷

In all three components, the research team developed tools and guidelines to ensure consistency across country research teams. In reality the tools were used more as guidance for the teams, who adapted them to what was possible and appropriate in-country – for example, how questions are asked. The central research team learnt along the way of the need to be flexible in giving teams room to interview in line with what is appropriate in-country, but also to be more detailed – for example, as regards where and who the teams on the ground needed to cover in order to collect an inadequate range of data. The close contact and good relationships between component leads and country research teams ensured that decisions made about how to respond to data collection challenges have been in line with the quality standards needed for robust evidence.³⁰⁸ Close scrutiny of interview transcripts provided a means to check on the quality of the researchers' approach.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

Some of the ways SAVE has sought to fit with other initiatives include the following:

- broad consultation with a wide range of related stakeholders at country and international levels;
- engaging with existing in-country initiatives and networks on evaluation;
- feeding into global consultations on humanitarian effectiveness with a focus on the World Humanitarian Summit;
- linking with innovation initiatives to share methodological innovations developed particularly in Component 1;

³⁰⁵ These are distinct from remote surveying by mobile phones also used in some countries. In Somalia these were telephone interviews following the same templates as in-person interviews, and were undertaken by the same Somali research team.

³⁰⁶ IV 127, 158

³⁰⁷ IV 161,162,172

³⁰⁸ IV 175, 168, 167 and inception and interim reports

- keeping abreast of, and initiating dialogue with, related initiatives at the global level; for example, another major initiative on access is the SDC-funded revision of the Access Handbook.³⁰⁹

Interviews in Somalia found that stakeholders viewed SAVE as relevant to a number of other recent and current initiatives including debates about the sector's slow and inadequate response to the 2011 famine, its response to dealing with corruption and fraud, the impact of counter-terrorism legislation, and dealing with the changing political dynamics in Somalia. Other research undertaken on cash responses to the famine (involving some of the Somalia research team), partnerships and also risk management (being undertaken by Humanitarian Outcomes partly influenced by SAVE interim findings) also link to SAVE emerging findings. Stakeholders did comment on the need for these to be considered more as a whole than always in isolation.³¹⁰

The SAVE annual report and interviews with the team indicates that there is coherence with global initiatives and good plans for linkage in 2016. Workshops upcoming in 2016 in all four focus countries will provide an opportunity to look at how findings and next steps can fit more closely with national processes, which until now have focused more on data collection and verification of analysis. It should be noted that at this stage the efforts to harmonise with other initiatives have been largely led by the project partners rather than DFID.

3.1.4 Extent to which HIEP products are relevant to decision makers

The bulk of SAVE products will be produced in 2016. Interim findings have been shared with stakeholders so far. The most directly relevant product to decision makers produced so far has been the direct feedback to learning partners in component 3 on monitoring approaches. Interviewed organisations that have received this have been very positive about the benefit. External stakeholders in the process of decision making about future plans see the relevance of the outputs planned for components 1 and 2, both in the reports about access and quality as well as the toolkits/operational guidance around risk management among other issues.³¹¹ All stakeholders emphasised the need for products to be concise and practical in terms of lending themselves to being operationalised and/or to offer clear platforms for taking forward issues pertinent in the sector for future decisions, such as regarding how to improve agencies' negotiation-for-access skills and decision-making processes for risk management. SAVE plans consultation with intended users on products.

3.2 Strengths

Two key strengths stand out in relation to questions of relevance and SAVE. First, the project has been able to combine methodological rigour in the research design, data collection and analysis with a flexible and creative approach in response to constraints posed by humanitarian contexts for research. This has been aided by careful selection of research teams that, as the evaluation could confirm in the case of Somalia, have excellent knowledge and networks in-country and are well respected in the country by humanitarian agencies. Second, a significant strength has been the efforts to engage key stakeholders to ensure the relevance of research questions and accuracy of findings and analysis. Important elements of the SAVE design have been building in sufficient time

³⁰⁹ SDC Humanitarian Access in situations of armed conflict Handbook on the Normative Framework and Humanitarian Access in Situations of Armed Conflict Practitioners' Manual.

³¹⁰ IV 175, 156,157,163,171

³¹¹ IV 152,158, 13

for consultation at different stages, flexibility to deal with unexpected incidents and a staggered approach to country research, so that learning and some findings can feed into the next country.

3.3 Areas to develop

The SAVE team is well linked into international forums and processes related to the humanitarian sector. The team does not have a permanent presence in all countries but it does in Afghanistan and, until 2016, the research team will be in South Sudan. However, in other countries the in-country research teams were contracted in. This reduces the ability to plan for, plug into and respond to national-level processes and debates. This does not seem to have hampered the relevance of what the research has explored but may have implications for taking forward findings. Stakeholders in the Somalia case study were keen to see the research presented and discussed in connection to the broader body of issues being discussed in-country and other work under way or recently carried out. The network of researchers and facilitators linked to the project provide a good resource for this in Somalia. The evaluation is not able to comment on the extent to which the resources in other countries enable this.

A second area to develop, already being considered by the team, is the inter-linkage of the three components, which have been carried out relatively independently so far. Stakeholders all discuss the three elements of access, quality, and learning and accountability together, seeing them as inherently interlinked. The SAVE team plans to produce a shared report although this is not required by DFID. More analysis, which is planned in the team, and consideration in DFID of the components collectively will make for stronger evidence and avoid a risk of it being seen as three mini-projects. It also enables a more coherent country analysis.

3.4 Preliminary conclusion

The research is addressing very relevant questions and issues valued by stakeholders at international and national levels in the humanitarian sector, particularly in the international community. Robust methodologies combined with good engagement with key stakeholders have maintained an adherence to quality and its relevance to issues important in the sector. In-depth in-country planning will be important to ensure the results are fed into live debates that have some potential to influence national decision making and operations as well as into international forums, which will be a complementary track.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

HIEP aims to produce three types of output: high quality and relevant evidence and innovation products; cross-divisional and institutional relationships and partnerships; and skills in design, commissioning and application of evidence and innovation. SAVE contributes mainly to the first and third outputs by producing evidence products and some innovation products (in terms of methodologies for research) as well as skills in the design of monitoring processes that collect evidence through the learning and accountability component.

The processes of quality assurance described earlier together with the systematic process of checking the accuracy of findings through feedback and verification workshops in-country which have been well attended have worked to contribute to high quality data collection and analysis.

SAVE is on track to produce the outputs planned to the agreed schedule. So far, these include interim reports and emerging findings shared with DFID and key stakeholders for all three components; the literature review of available evidence on the relationships between access, quality of humanitarian assistance and insecurity; direct feedback to, and linking of some component 3 learning partners across countries and agencies working on similar monitoring techniques; and finally, more than 18 workshops across the four project countries. Stakeholders in Somalia confirmed SAVE's own monitoring that workshops were of high quality aided by excellent facilitation and the relevance of the subjects.³¹² Additional outputs not made public such as a methodology options paper would be useful to circulate more widely.

The team is planning to produce more outputs than originally planned, partly to meet stakeholder demand for country-specific priorities (such as a short brief on what is special about M&E in South Sudan; this will be done for other countries too) as well as products that consider the findings in a more integrated way than through three separate components. These are valuable additions.

Interim reports have considered findings from a gendered perspective although, at the interim stage, this also meant reporting that fewer gender issues emerged in relation to access than anticipated due, it was thought, to the more limited access researchers had to women in some contexts and more limited experience of some of the female researchers. Other aspects of social difference, such as religion, age and ability, have not been so consistently analysed although the methodology was designed to ensure that a broad range of parts of communities were involved in the community consultation sections of the research, so these perspectives are included.

Further consultation on SAVE products is planned for 2016 at country level. There is also a budget for translation. Humanitarian Outcomes consultation with other agencies on their experience of translation and uptake has led to a provisional plan to translate at least some outputs into Arabic and French.

Care will be needed to create outputs that meet the dual demands of stakeholders for practical outputs that enable findings of the research to be easily applied to their work, and for outputs that take forward more sensitive, and at times political, debates within the humanitarian sector. This includes taking discussions forward at country level and in DFID rather than being confined to one-off interesting discussions in a round-up of workshops. Some planned outputs, particularly the data visualisation products of dynamic security-access maps, will need to be disseminated carefully to ensure the more nuanced analysis is considered as well as the blunter messages that visual maps usually can portray. Not all stakeholders interviewed in the evaluation understood that the goal of the project is to produce depictions of patterns of access, not maps which aim to enable immediate operational planning and coordination.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

The HIEP theory of change lays out the HIEP rationale to bring about change in the support and use of evidence and innovation by connecting knowledge brokers, networks and key operational

³¹² IV 174, 176, 168, 164

agencies to the research processes to promote debate and advocacy for findings. In addition, a key mechanism foreseen is that DFID will use the evidence as the basis for funding decisions.

SAVE has connected well to key networks, knowledge brokers such as ALNAP, processes such as the WHS consultation processes, and international humanitarian agencies at the international and national levels in the four focus countries. At country level, the key humanitarian agencies including donors, UN agencies, INGOs and some national organisations have been involved in consultations and workshops. The SAVE advisory group also has key operational agencies as members although the member interviewed reported that they reserve judgement at this point on whether they will endorse the research findings; this is reasonable until final findings are produced but may limit their role of championing findings, an expectation implicit in the HIEP theory of change.

The evaluation found external stakeholders had a range of motivations behind their interest in SAVE which has implications for whether dissemination of findings will lead to behaviour change. For instance, in relation to component 1 and 2, stakeholders have tended to feel that it is the systematic approach to building evidence that is of most value, often confirming knowledge informed by their own experience.³¹³ For some, it is seen to provide a platform for sharing their experience rather than providing them with new answers.³¹⁴ For others, it is hoped that the systematic evidence will help them in their own advocacy agendas, for example regarding responsibilities of the armed groups in conflict or to bring attention to the monitoring and evaluation challenges in insecure environments, which are not seen as mainstream in global organisations also active in development environments.³¹⁵ This could pose a communication challenge in the next stage of the project to ensure any new findings are heard and implications for organisations are thought through rather than being filtered out if they do not confirm their current beliefs.

The evaluation interviews found strong levels of satisfaction with the engagement to date and sustained interest in SAVE's findings. Learning on monitoring and the two planned toolkits were cited by a number of organisations as likely to be useful. In the case of toolkits there seemed to be an expectation that they would be found useful by either smaller organisations or organisations at a stage of decision making about future strategies in the four focus countries.³¹⁶ Some interviewees highlighted potential constraints regarding some issues raised in the research being taken forward: payment for access in Al Shabbab and government controlled areas in Somalia; impacts of counter-terrorism legislation on agency decision making meaning those most in need may not be reached; and acknowledging the reality of agency responses to insecurity (e.g. reducing personnel on the ground temporarily which is not always shared with donors). These may not be subjects that agencies or donors are willing to discuss openly. Some interviewees questioned whether DFID itself will be willing to have a more open discussion on these issues ³¹⁷.

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

SAVE is managed by DFID through a lead adviser based in RED. The former head of HIEP, now head of Humanitarian Policy team and ongoing HIEP management committee member took a close

³¹³ IV 153, 152

³¹⁴ IV 152

³¹⁵ IV 162, 163

³¹⁶ IV 158, 172, 161, 159, 13

³¹⁷ IV 127, 152, 170

interest in the project although they are not a formal member of the advisory group. This provides a mechanism to support the quality of research but means that connections to DFID’s humanitarian cadre are more informal. Most contact with other parts of DFID, particularly the humanitarian advisers, has been initiated by SAVE directly at country and London levels. This is not a problem at this point but suggests that the cross-departmental model has more limited impact in this project so far. There is good awareness of SAVE in the humanitarian cadre notably by the Humanitarian Head of Profession who has responsibility to share relevant research among the cadre and promote its uptake.³¹⁸

4.1.4 Extent to which the HIEP programme maximises the potential impact of its component parts (coherence of project with the whole)

At this point there have been limited if any links made between SAVE and other HIEP projects or other related DFID projects at country or global levels. Individual advisers have been helpful and happy to meet and also attend workshops, which has helped bring in other stakeholders too. However, linking to other DFID initiatives in-country has been frustrating to the SAVE team who would have valued knowledge of and contact with other DFID-supported research initiatives in-country. There does not seem to be an overview of all work taking in place in any one country with even the HIEP secretariat struggling (for capacity reasons) to map where HIEP projects are taking place for in-country work. Based on SAVE’s experience, an overview of linked initiatives is not easily accessible to DFID partners. To some extent, this disconnect seems to be connected to HIEP projects being commissioned from London while other research projects and related evidence activities are initiated in-country.

4.2 Strengths

SAVE products to date have been of high quality, and those planned are appropriate. It will be a challenge but essential to ensure products are accessible to support application in policy and practice, but maintain their ability to convey complex and nuanced findings to provide a platform for some of the more sensitive and political issues of concern in the sector. The team is well aware of this.

Engagement with the international humanitarian community at the global and in-country level in the four focus countries has been excellent. Evaluation interviews found stakeholders in Somalia interested, anticipating further contact with the research which, along with attendance rates at workshops to date indicates good engagement with key players in the humanitarian sector in these countries.

4.3 Areas to develop

The SAVE research was originally intended as ‘global research’ and DFID considered the three components to be separate with independent stakeholder groups. However, the in-depth analysis in four countries has clearly identified issues relevant to these particular contexts, and the evaluation found in-country interviewees interested in and able to comment on the issues raised in all three components, seeing them as very much interlinked. An option that, with the benefit of hindsight, could have been considered is a forum at national level engaged with the overall SAVE project, for example a national-level advisory group could have considered the three components in-country. While this may have entailed resources, it could be beneficial to ensure the sustainability of interest

³¹⁸ IV 227, 152

in taking up findings and recommendations at national level. Despite turnover of international staff, there is some level of stability in all agencies particularly among the national staff. The positive experience of carrying out joint workshops for the first two components of the research, which consider quality and access, are an indication of the inter-connectivity of the project's different components.

Sound plans are in place for the sharing of final findings and products at country and international level, but these run only until the end of the partner contract in November 2016. International actors repeatedly suggested to the evaluation team a need for SAVE to provide assistance in supporting them to work through how to apply the findings of SAVE to their decision making. The upcoming workshops in 2016 may provide an opportunity to go beyond the dissemination of findings and discussion and debate of them but also to begin to think through the potential action that should be taken as a result, and how agencies might apply findings. DFID can also play a key role in the future to take forward important issues given its convening power and influence at least in the four focus countries where it is a significant donor. However, there is no plan for such a role at this point.

National organisations, namely local NGOs and government departments, have been less a target and connected to the in-country processes although they have been sources of data, though some organisations were involved in workshops but to a more limited extent i.e. fewer in number. Extensive consideration of the implications of the findings for national players could be beneficial. National staff of international organisations, on the other hand, have been involved in programmes that will enhance their future use of findings given that they are less likely to move to other countries.

At the international level, when findings are agreed, it may be helpful to consider the potential roles that advisory group members can take within their own organisations and beyond. At national level, SAVE has worked with a wide network of research and learning partners. These could be a valuable asset to take forward work after the project completes.

Finally, a plan for how the findings of SAVE will be considered in DFID at international level and reach countries outside the focus countries needs to be developed. No resourcing has been allocated to this stage at present, nor to any monitoring of the use of SAVE products after November 2016. Plans should be developed for:

- DFID's own consideration of the implications for it of SAVE findings
- Monitoring of uptake of SAVE products beyond 2016.

4.4 Conclusions

SAVE has worked well to ensure the creation and support for high quality evidence. Work is most progressed at the time of the evaluation data collection in the learning and accountability component of SAVE. This is to be anticipated given the nature of the overall project, but the plans for how to ensure the application of components considering access and quality is less developed although two planned toolkits should be a significant aid to this. Other aspects of the research link to more complex debates within humanitarian assistance and in some instances to sensitive and political issues too, such as the impact of counter-terrorism legislation on agency decision making

around risk. It is not clear how these will be taken forward in DFID and the sector at country and international levels. In addition, while there is excellent engagement with the international community at global and national levels, the connection to national actors is not so strong. Plans for how to support the application of evidence to operations as well as debates relating to policy and practice beyond 2016 at international and national levels will need to be developed by DFID soon.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

HIEP has three outcomes it seeks to contribute to:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises

The evaluation is considering impact at the outcome level and, if and when possible, the overall intended impact of HIEP, namely that humanitarian actors have the capacities to deliver improved programmes and operations that are effective at supporting the most vulnerable people.

SAVE has potential to contribute to outcome 2 and 3. For instance, the learning and accountability component may support humanitarian actors in better integrating monitoring data into their interventions. If organisations choose to invest more regularly and innovatively to produce more accurate data on the humanitarian footprint in a given country, possibly building on the C1 experience, this could contribute to HIEP's Outcome 3.

It is too early to see changes in these areas at this stage of the programme. Trends in the sector that may support SAVE's contribution to HIEP's outcomes include agencies ongoing and, some say, increasing efforts to combine more qualitative monitoring processes with the quantitative processes that have seen much attention in recent years, through the use of technical tools such as digital entry often used in difficult-to-access locations and that favour the use of numbers (multiple choice) rather than narrative text.³¹⁹ There are also complementarities with initiatives in the sector that Humanitarian Outcomes is pursuing, such as the roll-out by Conflict Dynamics International of the SDC-supported revision of the handbooks for Humanitarian Access in Situations of Armed Conflict. SAVE is making contact with some of these initiatives, which could strengthen its potential impact.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

³¹⁹ IV 167, 172, 161

SAVE did not have a capacity building component. Some of the staff involved in the workshops and learning processes are Southern and some Southern NGOs have been involved in the programme, but capacity building of Southern actors is not a significant element in SAVE. The importance of high quality researchers for SAVE data gathering and analysis in the four contexts, and the lack of capacity particularly in terms of numbers of experienced female researchers in these contexts, highlights the need for capacity building.

5.2 Strengths

The strengths of SAVE lie in its robust approach to evidence production, relevance and current connectivity to other initiatives and key actors. Some of the outputs such as the toolkits and advice on monitoring should provide some potential to contribute to support the integration of evidence beyond 2016.

5.3 Areas to develop

Stakeholders are keen that findings convert to operationable guidance for more lasting impact. For the programme to contribute to *regular integration* of evidence or innovations is likely to need a process beyond the scope of the current SAVE programme, such as advocacy around monitoring approaches and support to organisations to apply findings. It will also require active promotion of the tools beyond that time period, particularly given the challenge of turnover of international staff in insecure locations.

5.4 Conclusions

SAVE has a strong potential to ensure the take-up of its own evidence in 2016. Sustained change at HIEP outcome level is likely to need further activities beyond the project time period and current contract.

6. Gender and social diversity

The project has adopted a gender sensitive approach to the research design: it recruited female researchers to interview women; adapted the methodology in each country in efforts to reach women interviewees; applied a gender lens to data analysis; has tracked the proportion of female respondents; and is tracking (through its logframe indicators) numbers of women and men at workshops. SAVE has encountered difficulties in recruiting experienced female researchers available and willing to travel to the areas of data collection, as well as in accessing women in these areas even through creative approaches. Numbers of interviewees from organisations also show a majority of male respondents though this may well reflect the representation of women at senior level in agencies.

Research teams reflected that a higher budget, more time for the recruitment of female researchers, and more targeted approaches to women working in humanitarian agencies may have increased female representation in SAVE data from both communities and humanitarian organisations. The SAVE team have been explicit about the challenges they faced.

Other aspects of social diversity, such as clan, religion, ability or wealth, have been less systematically tracked although community consultations sought to ensure a good representation across age and clan/ethnic groups.

7. Other findings and comments

The research in insecure environments has used a range of methods adapting these to the reality of each of the four locations. For example, they used phone interviews to access some of the female respondents at community level in Somalia, but found this does not work in Afghanistan. Methods using new technologies were explored, such as commodity tracking, and in most cases were found to be inappropriate at this point due to cost and the stage of development and availability of the technology. However, these could be beneficial in the future. The team has documented learning on methodology closely and this will be a valuable additional output potentially to be joined with that of other HIEP projects to inform research methodologies in humanitarian contexts.

A key factor that has contributed to the high quality of research in Somalia has been the quality of the local research teams SAVE was able to work with, who brought great understanding of the context and an ability to access people and places for interviews through creative and flexible approaches. Good relations and management at the more central level also helped ensure the quality of data gathering and analysis. The experience highlights the need for local research capacity in data collection and analysis in humanitarian contexts.

Stakeholder requests for support from SAVE or others in the application of findings suggests that the HIEP theory of change may need to be expanded to incorporate this to ensure that operational and other agencies change behaviour as a result of research projects.

8. Summative phase 1 conclusions

SAVE is addressing issues that are highly relevant to the humanitarian sector. The project is on track to produce high quality outputs to schedule. It is well connected to country-level debates although the lack of Humanitarian Outcomes and GPPi country presence limits the extent to which the team can be responsive to country-level opportunities. The SAVE team has developed excellent relations with key stakeholders at country and international level keeping them involved in the project development and informed of emerging findings. The extent to which SAVE can integrate discussion and take forward its findings at country level with country-specific issues is not clear given that this was not the original intention of the project. But organisations consulted in Somalia made a clear call for support in working through the application of findings, which could be a useful focus for workshops and consultations in 2016 as well for the role that DFID will take in 2016 and beyond to both use and support others to use the findings. SAVE is well on track to provide an evidence base that can contribute to humanitarian policy and practice in volatile environments if taken forward at various levels with input from the SAVE team, DFID and other stakeholders.

9. Recommendations at case study level

To project partners:

- a) Develop more in-depth plans for how communication processes in 2016 can feed into specific national discussions and debates.
- b) Ensure that the demand for both practical outputs and the provision of a platform for more nuanced and political issues raised by the research can be met through products and communication processes.
- c) Engage the advisory group, national research teams and other stakeholders in discussions about roles they could take on to sustain and link the SAVE products and findings to processes in their environments.

- d) Develop integrated analysis bringing together the findings of the three components at both national and global levels. However, this is beyond the current contract and planned resources but would be a valuable additional output from the project.
- e) Produce outputs that highlight lessons learned on methodology for research in humanitarian contexts and also analysis of the data gaps and inconsistencies the programme has found that constrain learning.

To DFID:

- a) Work with SAVE team to consider the implications of the SAVE findings for DFID's own programmes and funding in the four focus countries but also in other insecure environments and at the global level.
- b) Develop a resourced plan (people, time and money) to take forward issues requiring further discussion in DFID and sector, building the plan into the relevant staff's objectives for 2016 and 2017. Consider how to deal with sensitive issues such as payment for access and the impact of counter-terrorism legislation on communities' access to assistance. Consider how integrated analysis across the three components and the country-level research take-up can best be supported given that this was not originally planned beyond the final round of workshops in 2016.
- c) Plan for how momentum built around the communication processes at global and national levels can be sustained and further developed after 2016: who will be involved, resourcing of the processes and roles of DFID country and UK offices.
- d) Establish a mechanism for monitoring uptake of SAVE products after 2016 including citations, downloads, etc. Consider an extension to the SAVE budget for this.

Case Study 7: Strategic Research into National and Local Capacity Building for Disaster Risk Management

David Fleming, December 2015

1. Introduction

In April 2013, an accountable grant for £1.2m was signed between UK Department for International Development (DFID), International Federation of Red Cross and Red Crescent Societies (IFRC) and the British Red Cross Society (BRCS) for an operational research programme on national and local capacity building (CB) for disaster risk management (DRM). Additional funding contributions were made by the Canadian Government (DFATD) and Swedish Government (Sida).

In September 2013, IFRC contracted Oxford Policy Management (OPM) and the University of East Anglia (UEA) to conduct the research, which aims to increase the effectiveness of CB interventions for DRM at the national and local level through developing robust empirical evidence on what works and why when building the capacity of national and local institutions in different contexts. The research design, informed by a review of the literature on the factors that enable and constrain the development of national and local capacity for DRM, centred on a case study approach involving fieldwork in seven countries and a comparative analysis across case studies to feed into an overall synthesis of the research findings. In addition to seven country case study reports³²⁰ and a synthesis report, the research team also planned to produce three policy briefs, three externally peer-reviewed publications, and a series of conference presentations and dissemination events at the global level to support the uptake of the research findings among policy makers and practitioners. The project was due to finish in August 2015. However, a no-cost extension was agreed up until December 2015 to allow sufficient time for research uptake activities. As a result, a number of activities were still to be completed at the time of conducting this evaluation.

This case study evaluation was conducted between October and December 2015, and forms part of the first summative phase of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP).³²¹ The five-year evaluation process consists of three data collection phases, of which this is the second, and tracks the DFID programme across its entire implementation period from 2013 to 2018. This research project is one of eight projects funded through the HIEP that is being tracked by the team throughout the evaluation.

The objective of this case study evaluation is to assess the quality of the research outputs, the strength of the research uptake strategy to support the use of research findings, and the extent to which the project is contributing to change in the humanitarian sector. This short report presents key findings, conclusions and recommendations to support the research team with lesson learning and strengthening the research uptake strategy; to provide DFID with evidence of progress towards outputs and outcomes; and to inform the evaluation team's synthesis of lessons and good practice across the HIEP programme. The second and final summative phase is due to take place in 2017–18.

2. Methodology

³²⁰ Although due to the Ebola virus epidemic, Sierra Leone fieldwork was cancelled and the team only produced six reports.

³²¹ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

The case studies have been assessed using a common methodology adapted to the specific circumstances of the project, in relation to three evaluation questions of relevance, effectiveness and impact, as well as against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Questions on efficiency and value for money have been assessed through a separate process.³²²

Findings drawn for this case study derive from two main data sources: i) a review of secondary documentation, including quarterly, annual and final project reports, research outputs, meeting minutes, workshop reports, terms of reference and financial reports; and ii) interviews with over 20 key informants from DFID, IFRC, the OPM/UEA research team, the advisory group, the learning group, and external stakeholders. The majority of these interviews were conducted by telephone although two respondents were interviewed in Islamabad, as part of a data collection visit for another HIEP case study evaluation. Documents reviewed are included in the Evaluation Annex 4 and a list of persons interviewed is included in Evaluation Annex 5.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

There is strong evidence that this project has significantly strengthened the evidence base on what works and why when building the capacity of national and local institutions to manage disaster risk in a range of contexts.

The 2011 Humanitarian Emergency Response Review (HERR) emphasised the importance of building the capacity of national and local institutions, which are often the first to respond to disasters and are central to a resilient approach to long-term development and emergency response. It also highlighted the lack of direct DFID funding to governments and national and local NGOs in humanitarian crises,³²³ a point supported by the recent World Disasters Report (WDR), which found that ‘just 1.6 per cent of funding for humanitarian assistance is channelled directly to national and local NGOs’.³²⁴ In response, the third pillar of the Humanitarian Innovation and Evidence Strategy (HIES) focuses on how best to work with national and local institutions to prevent, anticipate and respond to disasters, pointing out the hitherto lack of attention to CB approaches and the dearth of evidence on which interventions are effective in which contexts.³²⁵ These concerns were supported by the research team’s initial literature review. It is within this context that the IFRC/OPM research

³²² Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

³²³ UK Government (2011), *Humanitarian Emergency Response Review*, foreword and p.18.

³²⁴ IFRC (2015), *World Disasters Report*, p.105. Quote taken from IFRC website <http://ifrc-media.org/interactive/world-disasters-report-2015/>

³²⁵ DFID (n.d.), *Business Case 1: Humanitarian Innovation and Evidence Programme: Improving disaster risk management through improved risk analysis and better use of national and local capacity for response*, p.8.

project was designed.³²⁶ As such, there is strong documentary evidence that the project was designed with the intention of addressing a major gap in the evidence.

Interviews with key informants further supported this, with unanimous agreement that the research contributed to strengthening a weak evidence base. Many respondents pointed out that although most findings were not particularly striking or new, the importance of the study lies in its validation of what many actors working in this field already knew through independent, rigorous, field-based empirical research.³²⁷ As one respondent highlighted, this study provides policy makers and practitioners with a firm and objective evidence base and a roadmap for designing more effective CB for DRM interventions.³²⁸ Another respondent championed the research team's approach to getting to the heart of the CB for DRM knowledge deficit, in exploring what the concept actually means, what should be done differently, and what approaches will lead to improved sustainability.³²⁹ Furthermore, some respondents pointed out the timeliness and relevance of this study given the current push in policy debates towards localising humanitarian response – especially around the World Humanitarian Summit (WHS) consultations and the WDR – and the need for a more solid evidence base on what works to guide investment decisions.³³⁰

DFID and the research team responded well to emerging opportunities, particularly to increase the potential for research uptake, and were flexible in the face of unplanned developments.

One of the major unplanned events that the research team had to respond to was the Ebola virus epidemic, which led to Sierra Leone being dropped as a case study. DFID and the research team maximised the opportunity of having additional funds to spend by diverting resources into further research uptake activity. This led to channelling funds into producing a chapter for the 2015 WDR, albeit based on preliminary findings of the research, with a view to influencing the narrative around localising response and using the WDR as a vehicle to shape the forthcoming WHS consultation process.³³¹ Additional outputs and activities identified included a paper developed as part of the work of the WHS Reducing Vulnerability and Managing Risk Thematic Team, and the decision to host three dissemination workshops instead of one to widen the reach of targeted stakeholders.

3.1.2 Extent to which the HIEP design is appropriate to address identified needs and opportunities

The research design was considered by most respondents to be sufficiently robust, given the low starting point identified by the literature review, and although a number of weaknesses were identified, these were not felt to be a major barrier to the validity of the findings.

The research was designed around a case study approach, with a focus on one pilot and six full case studies in a mix of low-income and fragile and conflict-affected contexts, supplemented by a financial analysis of DRM spending on CB and a global online survey. The conceptual framework was informed by an initial literature review, which identified six core principles for effective DRM CB that

³²⁶ DFID (n.d.), *Humanitarian Innovation and Evidence Programme: Proposal for Funding. Working with national and local institutions to build resilience and improve disaster response*, p.4.

³²⁷ For example, the importance of working to longer timescales, ownership, and the importance of the 'missing middle'. Interviewees 2, 3, 262, 262, 263, 268, 269, 270, 272.

³²⁸ Interviewee 270.

³²⁹ Interviewee 262.

³³⁰ Interviewees 263, 264, 267.

³³¹ Interviewees 4, 21, 128.

formed the basis of investigation during the fieldwork.³³² Key informant interviews demonstrated an appreciation of the robustness of the study, given the challenging environments studied and the low starting point of evidence.³³³

A number of weaknesses were highlighted including a lack of quantitative analysis, which was identified partly as a consequence of the difficulties faced by the research team in accessing financial data from any organisation outside of the IFRC, but also due to the lack of quantitative skills and capability in the research team. Although this lay outside the original scope of the ToR, DFID felt that more could have been done to incorporate quantitative analysis to increase the rigour of the findings.³³⁴ A second weakness identified was the approach to identifying key respondents in-country prior to case study visits. National consultants were hired in each case study country to identify key projects and actors and inform the selection of those that would form part of the study. National Societies (NS) were also asked to contribute ideas, although their main focus was to, where possible, provide operational support to the research team. Some respondents highlighted a number of missed opportunities to engage key DRM actors, in particular the World Bank, that could have been consulted in greater depth in identifying suitable projects and respondents in-country.³³⁵ In spite of the identified weaknesses, the majority of respondents felt that the research design was appropriate to addressing the weak evidence base on CB for DRM.

One of the key findings of the research was that gender and vulnerability issues are poorly understood and inadequately addressed in the design of CB for DRM interventions. However, the lack of gender expertise in the research team resulted in a generic set of policy and programme recommendations and a large gap of further research. Furthermore, there is little evidence of data disaggregation by sex and age, and incorporation of gender sensitivity into the research design.

The initial literature review highlighted the lack of attention to the gender dimensions of capacity building in relation to disaster risk, as well as the lack of information and evidence on how CB for DRM interventions should be designed to address the needs of those most vulnerable and marginalised in disaster response and management.³³⁶ These gaps were reflected in the case study findings and form the basis for one of the main policy and programme recommendations in the synthesis report,³³⁷ as well as a proposed area for further research to develop some practical tools and guidance around how gender topics could be more strongly included.³³⁸

One of the logframe indicators used to measure the robustness of the research design is the incorporation of gender analysis into the research design and tools. Although the inception report mentions that gender would be considered in the stakeholder selection process and group interviews would be divided by gender,³³⁹ there is little evidence of how the research team would disaggregate data by sex and age, and little detail on how the research would analyse participants'

³³² The six principles are flexibility and adaptability; comprehensive planning; ownership and partnership; attention to functional capacity; integration of actors and scales; and contribution to disaster risk reduction. IFRC (2015), *Strategic Research into National and Local Capacity Building for DRM: Synthesis Report*, p.25.

³³³ Interviewees 21, 262, 264.

³³⁴ Interviewee 21.

³³⁵ Interviewees 262, 264.

³³⁶ OPM (2014), *Literature Review*, p.24.

³³⁷ IFRC (2015), *Synthesis Report*, p.19.

³³⁸ Interviewee 272; IFRC (2015), *Concept Note – Research on the Inclusion of Gender and Diversity in Capacity Building for Disaster Risk Management*.

³³⁹ OPM (2014), *Inception Report*, pp.18, 54.

responses to questions around gender sensitivity and inclusion, and take into account different understandings among participants of what it means for CB for DRM interventions to be designed with greater focus on gender sensitivity. This methodological gap was picked up as part of an IFRC quality control visit during the Haiti case study fieldwork, where the IFRC research manager noticed that gender issues were not being picked up on and investigated in as much detail as they should have been, and that the line of questioning was not as clear as it could have been to enable participants to understand exactly what was being asked.³⁴⁰ It was fortuitous that the person responsible for the quality control visit happened to be a gender specialist, and it highlighted the lack of gender expertise within the research team. In response, the fieldwork team leader ensured that gender issues were probed further in interviews in subsequent case study visits, and no further issues were reported. Furthermore, the research team member responsible for conducting gender analysis and writing up this section of the synthesis report attended a gender training day at OPM.³⁴¹ Although the report was reviewed by the IFRC research manager and gender specialist, and no revisions were required, the lack of a more nuanced approach to gender analysis constitutes one of the weaker aspects of the research study.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

Although there is limited formal documentation of linkages made to other relevant initiatives, an important connection has been made to another DFID initiative focusing on building national and local capacity in this sector.

Early project documentation provided limited evidence of how the research links to broader sectoral initiatives within and outside of DFID. However, in 2014, while the DFID-funded Disasters and Emergencies Preparedness Programme (DEPP) was being designed, DFID introduced the DEPP team to the OPM Project Director. This culminated in the Project Director being invited to chair the DEPP evaluation steering committee, in addition to the presence of the DFID lead adviser for the research on the DEPP Board. Although the timings of the research outputs did not allow for the findings to feed into the design of the DEPP, an important connection was established between the two initiatives to ensure that the DEPP continues to build on the evidence base generated by this study.³⁴² Although there is limited evidence of harmonisation with other relevant initiatives outside of DFID, as well as in the case study countries, the uptake strategy (discussed further in section 4.1.2) has ensured the engagement of key stakeholders from other institutions throughout the research process.

3.1.4 Extent to which HIEP products are relevant to decision makers

There is strong evidence that the extensive range of products developed by the research team were customised to meet the needs of a broad range of academic, policy maker and practitioner audiences. While the relevance of the products was judged by users to be strong, and the launch event in Geneva was lauded as a success, a number of respondents stated that the length and structure of the synthesis report limited usability.

An extensive range of outputs were developed by the team, intended to promote the findings and recommendations of the study to a range of audiences. The synthesis report is intended for DRM

³⁴⁰ Interviewees 4, 128.

³⁴¹ Interviewees 2, 3.

³⁴² Interviewees 2, 3, 267.

policy makers and practitioners designing and implementing CB for DRM programmes, and the recommendations are targeted at both audiences; the case study reports are aimed at those designing and implementing programmes in the case study country; the policy briefs are aimed to reach a broader policy maker and practitioner audience with a focus on specific issues highlighted by the research; the peer-reviewed publications are intended to reach a more academic audience and to give the outputs greater longevity; and the policy meetings in Geneva, London and Washington DC are intended to capture key stakeholders and policy makers in these locations.³⁴³

Product users interviewed as part of this evaluation emphasised the relevance and usability of some of the recommendations and practical tools, in particular the M&E framework and video, as well as the grounding of the findings in the real world through the use of concrete examples. Furthermore, respondents interviewed after the launch event in Geneva praised the succinct style of the presentation and noted the enthusiasm among participants for further information and to gain access to the tools.³⁴⁴ However, a number of respondents pointed out that the length of the synthesis report (110 pages, excluding annexes, and including an 11-page executive summary) is too long, inaccessible to most readers and limits the usability of the report's findings and recommendations.³⁴⁵ One respondent noted that the three-page table of recommendations was not particularly useful and that she got more from the chapter in the WDR.³⁴⁶ Another respondent stated that he did not know how to read the country case study and synthesis reports due to their length and structure, and that when he shared the reports with his community of practice, they were met with silence. He suggested that more use could have been made of webinars, social media and data visualisation.³⁴⁷ Although a number of comments were made by the advisory group and the DFID lead adviser on this issue in response to earlier drafts, and an effort was made by the team to reduce the length of the report, the extent to which this was carried out in the interest of striking greater balance between research rigour and enabling uptake is reported to have been limited.

3.2 Strengths

The key strengths have been the project's close alignment to objectives set out in the HIES and its strategy to contribute to building an evidence base in an area that has not been well understood and evidenced to date; the robustness and appropriateness of its research design that has supported the development of a set of usable and credible findings and recommendations; flexibility in taking advantage of opportunities to increase the uptake and reach of the research findings; and the development of an extensive range of research outputs tailored to the needs of a wide audience.

3.3 Areas to develop

Given that the project is close to completion, it is too late to make suggestions for areas of improvement around relevance of its design and strategy. However, two key areas of weakness have been the study's approach to gender analysis and the length of the final synthesis report.

3.4 Conclusions

³⁴³ IFRC (n.d.), *Concept Note: Policy Meetings for Strategic Research on National and Local Capacity Building for Disaster Risk Management*; IFRC (2015), *Annual Report*, pp.9, 17; Interviewees 4, 21, 128.

³⁴⁴ Interviewees 263, 272.

³⁴⁵ Interviewees 4, 21, 128, 264, 267, 271, 272.

³⁴⁶ Interviewee 21.

³⁴⁷ Interviewee 267.

There is strong evidence that the project has generated important evidence on what works and why, when building the capacity of national and local institutions to manage disaster risk in a range of contexts. The research design was considered by most respondents to be sufficiently robust, given the low starting point, and although a number of weaknesses were identified, these were not felt to be a major barrier to the validity of the research findings. One of the main weaknesses was a lack of gender expertise in the team and lack of incorporation of gender analysis into the research design.

DFID and the research team responded well to emerging opportunities and were flexible in the face of unplanned developments. An important connection has been made to another DFID initiative focusing on building national and local capacity in this sector. The extensive range of products developed was customised to meet the needs of a broad range of audiences. While the relevance of the products was judged to be strong, and the launch event in Geneva was lauded as a success, a number of respondents stated that the length and structure of the synthesis report limited usability.

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

There is strong evidence that the project has contributed to the first HIEP output of high quality and relevant research. This was enabled by the establishment of an advisory group and a learning group, comprising a range of institutional, academic and practitioner perspectives, which ensured robust quality assurance of the research process and products.

An advisory group was established at the beginning of the project with the purpose of providing high-level oversight and ensuring a high-quality research process, and relevant and objective findings.³⁴⁸ The group was engaged on a voluntary basis throughout the process, ensuring that outputs were of a high quality and a broad range of perspectives were considered at key strategic points. An additional strength of the group was that it was deliberately composed of a wide range of expertise and perspectives in the sector, including humanitarian research funders, academia and Southern Red Cross Societies. One key gap was the lack of gender and diversity expertise, which would have ensured that the research developed a stronger focus on gender analysis in its design.³⁴⁹

While the group was considered a strong asset in ensuring high quality and relevant research, a number of issues were raised in interviews, the most significant of which was maintaining participation throughout the process. A number of respondents highlighted the mistake made in asking the group to comment on all outputs, including the case study reports, suggesting that it would have been more prudent to identify a smaller number of strategic entry points for the group to engage, and to ensure greater clarity around the group's added value and its link to strengthening research uptake.³⁵⁰ However, in spite of this challenge and the dwindling participation towards the end of the project, DFID and IFRC managed to successfully re-engage the group to provide comments on the final outputs and to participate in the policy events.

³⁴⁸ Terms of Reference for Research Programme Advisory Group, p.1.

³⁴⁹ Interviewees 4, 128.

³⁵⁰ Interviewees 2, 3, 4, 21, 128, 261, 262, 264, 266, 272.

In complement to the advisory group, a learning group comprising members of the Red Cross and Red Crescent (RCRC) network was established with the purpose of supporting dissemination and uptake of the project's outputs and findings, in particular within the RCRC network, and providing NS members with the opportunity to actively participate in sharing knowledge and strengthening the network's position as a leader in this field.³⁵¹ Although the main focus of the group was on uptake, it was important that the group understood the findings, and so this group was also engaged in commenting on the outputs.

There is good evidence that the project has contributed to the third HIEP output of strengthened skills to design, commission and apply humanitarian research. In spite of the challenges faced by IFRC in taking on a research commissioning and management role, the project has contributed to strengthening the Federation's approach to research coordination, evidence sharing and learning, although there is a concern about the extent to which this is sustainable.

A decision was taken by DFID to contract IFRC and BRCS to manage this study on the strength of the Federation's global humanitarian reach, and access to in-country humanitarian networks.³⁵² Given that the Federation is not experienced in managing and commissioning research of this scale and nature, this presented several challenges. One respondent questioned the Federation's capacity and experience to coordinate the research team and to steer the direction of the research, referring to the frequent deferral to DFID on technical direction; a couple of respondents linked a number of financial challenges related to money lost on exchange rates and laborious administrative and invoicing procedures to a lack of experience in procuring research of this volume; and another issue raised was the inability of some NSs in the case study countries to engage in the research, one of the original perceived added benefits of the relationship.³⁵³ However, when asked most respondents supported the decision and agreed that the challenges were outweighed by the opportunity provided to build the capacity and credibility of the Federation to manage research, to champion and invest more broadly in evidence and research within the Federation, and to strengthen relationships both within and outside the network.³⁵⁴

With regards to the sustainability of this research and evidence function, respondents within the Federation were positive about how much has been learnt institutionally from this study and how much the quality of the Federation's research has improved since the project started.³⁵⁵ There is little evidence to support this at this stage; however, a report from an internal research and evidence workshop organised earlier this year, combined with a range of other research capacity building activities, demonstrates a strong attempt to embed the benefits of this work to support more sustained and structured investment in evidence and research going forwards.³⁵⁶ This is also supported by the continuation of the work of the Learning Group as a research working group although it will be important that some of the responsibilities for uptake of the research findings from this study are transferred to the responsibilities of the new group.³⁵⁷ Concerns were raised about the sustainability of these benefits after the project finishes, given that the project's research

³⁵¹ Terms of Reference for the Research Learning Group, p.1.

³⁵² DFID, *Proposal for Funding*, p.11.

³⁵³ Interviewees 2,3,21.

³⁵⁴ Interviewees 4, 21, 83, 128, 262, 268.

³⁵⁵ Interviewees 4, 83, 128.

³⁵⁶ IFRC (2015), *Workshop on Research and Evidence Based Practice for Humanitarian Work*; IFRC (2015), *Annual Report*, p.15.

³⁵⁷ Interviewees 4, 83, 128.

unit depended on funding through this project, and about the planned departure of one of the team. As a result, it will be important to ensure that the benefits of the research are sustained and greater buy-in and investment in research, evidence and learning is championed across the Federation.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and to contribute to outcomes

There is good evidence that the project has identified multiple champions and networks to advocate for the research findings, and that it has contributed to increased awareness in and engagement with the evidence. There is also some evidence that operational actors in the sector endorse the findings, although it is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments.

The establishment of two separate research support groups can be seen as an effective approach to creating a wide network of stakeholders to champion the research findings. One member of the advisory group reported that she plans to disseminate the research findings within the NGO community in her country, and that she sees herself and her department as playing an important role in bringing attention to the research, and championing the importance of investing in initiatives that strengthen local capacities in DRM.³⁵⁸ Furthermore, learning group members interviewed described themselves as champions or intermediaries, some of whom have already supported the IFRC with pushing the research findings through influential dissemination channels. A good example is Samuel Carpenter's work in feeding preliminary findings into consultations for the WHS and influencing the thinking of the Reducing Vulnerability and Managing Risk Thematic Team, the timing of which could represent significant policy impact for DFID³⁵⁹. Others said they could support uptake if there was a plan in place for coordinating how different parts of the Federation could roll out the findings.³⁶⁰

DFID has played an important role in championing the findings in a number of fora. One member of the DFID Humanitarian Policy team has been working on applying the findings to messaging around localisation and how to develop new programming to support the building of national and local capacity as part of the WHS consultations;³⁶¹ and another member of the DFID team spoke of the role played in helping to push the findings out through other channels such as the WDR.³⁶²

Interviews with advisory and learning group members also demonstrated the extent to which they and other actors involved in the dissemination events endorse the main findings of the research.³⁶³ However, it is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments.

The project has done well to generate a range of outputs tailored to different audiences, and has had a research uptake strategy in place to guide identification of relevant activities and appropriate channels to engage key operational actors around the evidence. However, there is now a need for IFRC to think beyond the project outputs and to put in place a research uptake

³⁵⁸ Interviewee 271.

³⁵⁹ Samuel Carpenter (2015), *Strengthening National and Local Response and Risk Management Capacity: Towards More Effective International Support and Investment*.

³⁶⁰ Interviewee 270.

³⁶¹ Interviewee 21.

³⁶² Interviewee 21.

³⁶³ Interviewees 261, 262, 264, 268, 269, 270, 272.

plan for the coming 12 months to help sustain user engagement with the findings, and to track and support its contribution to changes in how CB for DRM projects are designed and funded.

The OPM inception report included a research uptake strategy that set out a plan for identifying and engaging key stakeholders of the research, understanding stakeholder needs, and tailoring dissemination activities to those needs.³⁶⁴ While this strategy identified a number of channels to disseminate the range of outputs to a wide stakeholder audience, there was an insufficient focus on contributing to and tracking the longer-term outcomes of the project. This is supported by the fact that indicators to track these activities were designed at the output level only, as well as an interview with the research team that made clear that any work to track changes beyond the output level of the logframe lay outside of the scope of its ToR.³⁶⁵ The strategy was updated in October 2014 by BRCS with support from other project stakeholders, and again in March 2015, to set out responsibilities for delivering a number of targeted and potentially high-impact activities – such as the dissemination of the findings through a chapter in the WDR, feeding findings into regional consultations of the WHS, and the three international policy meetings – and to support the uptake of the project’s findings both internally within participating organisations and externally among policy makers and practitioners³⁶⁶.

While this revised strategy is a strengthened approach to building engagement of key operational actors around the research evidence, with a particular focus on key fora such as the WHS, the absence of resources and budget after the project finishes in December 2015 raises a key concern around the extent to which this engagement will be sustained. One IFRC respondent stated that the Federation’s responsibility ends once a user is aware of the findings, and that it is that user’s responsibility to take the steps to change.³⁶⁷ Although this view was not found to be representative of the broader attitude within the Federation towards research uptake, there is a clear need to shift emphasis in activity away from getting outputs out into the public domain and towards engaging with users to support how the evidence is used and feeds into action. Therefore, the IFRC now needs to develop with the support of DFID a clear research uptake plan for the coming 12 months, after the research is complete, that:

- i. Identifies key champions within institutions such as UNDP, World Bank, IFRC and GFDRR who will support the push of key messages from the research into key policy dialogue fora;
- ii. Places the IFRC at the heart of coordinating continued engagement of users with the findings, both internally and externally;
- iii. Sets out a plan of continued uptake and dissemination activities within the Federation to increase the level of buy-in of key internal staff into using research evidence to inform learning, and to support how changes are embedded within the system;³⁶⁸
- iv. Enables the IFRC to track how it is contributing to changes in how CB for DRM projects are designed and funded.

It could be argued that a clearer plan should have been put in place by IFRC with support from OPM and DFID at the start of the project, as well as a more joined up approach to implementing that plan

³⁶⁴ OPM, *Inception Report*, pp. 53–57.

³⁶⁵ Interviewees 2, 3.

³⁶⁶ BRCS (n.d.), *Project Stakeholder Research Uptake Activity Matrix*.

³⁶⁷ Interviewee 83.

³⁶⁸ Interviewees 4,83,128,264.

between DFID, IFRC, OPM the Advisory Group and Learning Group, to ensure that the project would contribute to and track changes in the way that capacity of local actors is built, and to critically assess the theory of change developed by the project.³⁶⁹ However, the time is now ripe to build on the current momentum around the research findings and the progress made in strengthening research coordination within the Federation, and to put in place a plan that will lead to the longer-term change originally envisaged by the project.

The project logframe specifies that the outcome of more effective CB for DRM programmes would be measured through the number of case studies that demonstrate the research is being used and applied, but currently there is no clear strategy in place for how this will be tracked and measured. An IFRC respondent mentioned the possibility of conducting a follow-up survey with those who attended the policy meeting in Geneva to track any subsequent changes in policy and programming. While this would be one useful measure for assessing longer-term change, this would need to form part of a wider plan to include an analysis of the impact of dissemination through other channels such as the WDR and WHS.³⁷⁰ This, too, should form part of a 12-month follow-up uptake plan.

4.1.3 Extent to which the HIEP programme maximises the potential impact of its component parts

There is limited evidence from this case study on the extent to which the HIEP virtual team acts for potential collective impact. One respondent pointed out that, in his view, although DFID's lead adviser was very well networked and made a significant contribution to maximising project impact, the structure and staffing of the project management model (and in particular the turnover) was not sufficient to seize opportunities for how to learn at the broader programme level.³⁷¹ Another respondent pointed out weak communications between HIEP projects, and that she would like to see more attempts by the HIEP team to stimulate cross-project learning and provide project implementers with an understanding of what other HIEP projects are doing, which in turn could support stronger research uptake.³⁷²

Strengths

The project has generated high quality and relevant research. This has been enabled by the establishment of an advisory group and a learning group, which ensured robust quality assurance of the research process and products. The project has also contributed to strengthening the IFRC's capacity and credibility to manage research, to champion and invest more broadly in evidence and research within the Federation, and to strengthen relationships both within and outside the network. The project has identified multiple champions and networks to advocate for and broker the research findings, and has contributed to increased awareness in and engagement at the policy level with the evidence base. A research uptake strategy has been in place since the inception phase and was revised to focus on identifying a number of high-impact and timely uptake opportunities, such as contributing a chapter to the WDR, feeding preliminary findings into WHS consultations, and expanding from one to three international-level policy workshops.

4.2 Areas to develop

³⁶⁹ IFRC (2015), *World Disasters Report*, p.45.

³⁷⁰ Interviewees 4,128.

³⁷¹ Interviewee 264.

³⁷² Interviewees 4,128.

There is a need for the IFRC to develop a 12-month plan for how it will sustain user engagement with the findings, and track and support its contribution to change.

4.3 Conclusions

There is strong evidence that the project has contributed to the first HIEP output of high quality and relevant research. There is good evidence that the project has contributed to the third HIEP output of strengthened skills to design, commission and apply humanitarian research. In spite of the challenges faced by IFRC in taking on a research commissioning and management role, the project has contributed to strengthening the Federation's approach to research coordination, evidence sharing and learning, although there is a concern about the extent to which this is sustainable.

There is good evidence that the project has identified multiple champions and networks to advocate for and broker the research findings, and that it has contributed to increased awareness in and engagement at the policy level with the evidence base. There is also some evidence that operational actors in the sector endorse the findings, although it is too early to determine the contribution of the project to changes in DFID and other operational actors' funding and investments. The project has done well to generate a range of outputs tailored to different audiences, and has had a research uptake strategy in place to guide identification of relevant activities and appropriate channels to engage key operational actors around the evidence. However, there is now a need for IFRC to think beyond the project outputs and to put in place a research uptake plan for the coming 12 months to help sustain user engagement with the findings, and to track and support its contribution to changes in how CB for DRM projects are designed and funded.

5. Impact: What contribution will the project make to the HIEP aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

It is too early to identify longer-term changes and impacts at this stage. However, there are some signs of early contributions to change.

As stated in the IFRC annual review report, it is too early at this stage to identify any impacts or longer-term changes generated by the research in how CB for DRM programmes are funded and designed.³⁷³ However, interviews highlighted some examples of early signs of change: one respondent explained how the research findings were used to strengthen the evidence base for a concept note for a new CB project in Sudan;³⁷⁴ another cited a similar example for a DFID project in Kenya;³⁷⁵ and another cited using the findings in a recent paper on protracted crises.³⁷⁶ Furthermore, a number of respondents described the kinds of changes they would expect to see in the longer term as a result of this research, for example: clear reference to the research evidence in proposals for future investments by DFID and other donors in this area; and a suggestion that donors could develop indicators or criteria when reviewing funding applications that are based on the key findings from the study, such as project timeframe, the extent to which gender and ownership are

³⁷³ IFRC (2015), *Annual Review Report*, p.17.

³⁷⁴ Interviewee 270.

³⁷⁵ Interviewee 264.

³⁷⁶ Interviewee 268.

addressed, and strength of M&E framework.³⁷⁷ There is, therefore, a clear need for longer-term follow-up and tracking by IFRC and DFID of how the findings of this research are not just engaging key actors around the issues the study highlights, but also contributing to the changing of mind-sets and development of new funding instruments; as well as a more strategic engagement from IFRC and DFID with key actors around how the findings can directly input into new approaches. This project has the opportunity to make a significant contribution to addressing the lack of a robust evidence base and system-wide engagement in CB for DRM, something anticipated by DFID in designing this project,³⁷⁸ and it will be important to ensure that the momentum generated around the recent dissemination events is sustained.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

While a broad range of Southern organisations have been involved in dissemination, there is a need to develop a more strategic plan for engagement with national and local actors on how to understand and use the research findings and recommendations.

While the specific objective of the research was not to build capacity of Southern actors working in DRM, but rather to understand which capacity building models work best in which contexts, as one respondent noted any research into building national and local capacity should necessarily engage with and build the capacity of such actors as part of the research process.³⁷⁹ The IFRC final report explains how the research team engaged in this as far as possible, including providing on the job shadowing to national consultants and researchers when conducting the research and contributing to the reports.³⁸⁰ Also, one respondent interviewed in Pakistan described how his organisation's involvement in the research enabled them to reflect on the extent to which the six research principles related to their work and how they needed to improve.³⁸¹

Another important aspect of building Southern capacity relates to the second output of the research of building cross-institutional relationships and a network of policy makers and practitioners to use the research. One of the indicators used to measure this is the number of Southern organisations involved in dissemination, for which the target was three. Although this was exceeded, the modest ambition of the target confirms the project's focus on uptake at the global level.³⁸² However, a number of other respondents pointed out the danger of a lack of a comprehensive dissemination plan at the local level, and the implications of this for how policy recommendations at the global level trickle down to and are understood and taken on board by implementers.³⁸³

One respondent said that a dissemination plan at the local level is critical as the case studies were whistle-stops, with very little engagement with local actors on the findings, aside from sending the report out to an email list and an in-country debriefing session.³⁸⁴ This was supported by the evaluator's visit to Pakistan where a conversation with the IFRC in Pakistan highlighted a concerning

³⁷⁷ Interviewees 264, 270, 271.

³⁷⁸ Interviewee 21.

³⁷⁹ Interviewee 267.

³⁸⁰ IFRC, *Annual Review Report*, p.14.

³⁸¹ Interviewee 266.

³⁸² IFRC, *Annual Review Report*, p.11; this point was also confirmed by interviewees 2, 264.

³⁸³ Interviewees 21, 57, 262, 263, 265.

³⁸⁴ Interviewee 21.

disconnect between Geneva and country level.³⁸⁵ There is, therefore, a need for IFRC to develop a more strategic plan for how it will make stronger links to national actors around the findings of the research. One way to do this could be to identify champions within National Societies and other organisations who could build support for the evidence and recommendations among other actors in-country, and also provide a peer support function to neighbouring countries.³⁸⁶ However, given the lack of capacity within a number of NSs, it will be important to develop a central coordinated strategy at Geneva level to implement this, building on the work of the research working group.

5.2 Strengths

Some examples have been cited of the research evidence being used to inform the design of new capacity building projects, which are early signs of contribution to HIEP outcomes. The research team contributed to capacity building of Southern researchers through providing on-the-job shadowing. A wide range of Southern organisations were targeted as part of an in-country dissemination plan.

5.3 Areas to develop

There is a need for longer-term follow-up and tracking of how the findings of this research are contributing to changes in attitudes towards funding CB for DRM, as well as new funding instruments. There is a need to develop a more strategic plan for engagement with national and local actors on how to understand and use the research findings and recommendations, and for stronger coordination between IFRC Headquarters and Country Office levels around engaging in the research findings and recommendations.

5.4 Conclusions

It is too early at this stage to identify longer-term changes and impacts generated by the research. However, there are some signs of early contributions to change. While a broad range of Southern organisations have been involved in dissemination, there is a need to develop a more strategic plan for engagement with national and local actors on how to understand and use the research findings and recommendations.

6. Summative phase 1 conclusions

This project has addressed issues highly relevant to the humanitarian sector and has made a significant contribution to strengthening the evidence base on CB for DRM. It has responded well to emerging opportunities, particularly to increase the potential for research uptake and to make linkages with the DEPP, and has been flexible in the face of unplanned developments. It has generated a range of high quality outputs based on a robust research design, customised to the needs of a broad range of audiences. One weakness of the synthesis report was its length, which has constrained its usability. One weakness of the research design was its approach to gender analysis and gender sensitivity. The project has contributed to strengthening the Federation's approach to research coordination, evidence sharing and learning, although there is a concern about the extent to which this is sustainable. It has identified multiple champions and networks to advocate for the research findings, and has contributed to increased awareness in and engagement with the evidence. There is an urgent need to develop a research uptake plan for the next 12 months to help

³⁸⁵ Interviewee 265.

³⁸⁶ Interviewee 263.

sustain user engagement with the findings, and to track and support the project's contribution to changes in how CB for DRM projects are designed and funded. It is too early to identify longer-term changes and impacts at this stage. However, there are some signs of early contributions to change. A broad range of Southern organisations have been involved in dissemination, but a plan is needed to strengthen engagement around the research between IFRC Headquarters and Country Offices.

7. Recommendations at case study level

Recommendations for IFRC:

1. Develop a research uptake strategy for 2016 that includes a plan for continued uptake and dissemination activities both within and outside the Federation through targeting key stakeholders in the IFRC, UNDP, World Bank and GFDRR who can champion the findings of the research and ensure that the main messages reach key policy dialogue fora.
2. Develop a plan for longer-term follow-up and tracking of how the findings of the research are contributing to changes in attitudes towards funding CB for DRM, as well as new funding instruments. This should include a longitudinal survey of policy workshop attendees after 12 months, as well as other measures to track impact through the WDR and WHS consultations.
3. Develop a strategy for further dissemination of the research findings and recommendations at country level, through identifying Southern organisations who can champion the research and building stronger dialogue with IFRC Country Offices and National Societies around the implications of the findings for in-country implementation.
4. Ensure that support to the dissemination of knowledge and research uptake of the project outputs, which formed part of the terms of reference of the learning group, is included as part of the responsibilities of the work of the newly formed research working group.

Recommendations for DFID:

1. Support IFRC with developing a 12-month research uptake plan for 2016.
2. Draw together the learning across the HIEP on the successes and challenges of using advisory and learning groups to ensure that terms of reference for such groups on future projects are realistic in terms of expectations of member participation, and make clear the added value of the group and its role in supporting research uptake.
3. Provide more opportunities to project implementers to engage in cross-HIEP learning events and lesson-sharing forums, particularly on topics such as knowledge dissemination and maximising opportunities for research uptake.

Case Study 8: Building resilience and managing risk in fragile and conflict-affected states: A thematic evaluation of DFID’s multi-year approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen

Isabel Vogel, November 2015

1. Introduction

This case study report forms part of the evaluation of DFID’s Humanitarian Innovation and Evidence Programme (HIEP).³⁸⁷ The five-year evaluation process tracks the DFID programme 2013–18. Eight projects funded through the HIEP have been identified to follow as part of the evaluation. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017–18.

This case study report focuses on the thematic evaluation of DFID’s multi-year approaches to humanitarian action, full title ‘**Building resilience and managing risk in fragile and conflict-affected states: A thematic evaluation of DFID’s multi-year approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen.**’

1.1 Background to the Resilience Thematic Evaluation

The resilience evaluation study runs from April 2014 to 31 January 2018 and has an overall budget of £2,328,629. It is being implemented by Valid International.

The **purpose** of the evaluation is to generate learning and evidence on whether and how the multi-year humanitarian funding approach has enabled DFID programmes:

- i) to ensure timely and effective humanitarian response;
- ii) to build disaster resilience; and
- iii) achieve better value for money.

The study speaks to a fundamental challenge on how to promote resilience at the nexus between humanitarian and development programming, in a context of protracted crises where humanitarian financing is annual. DFID’s shift to multi-year financing and planning is underpinned by the hypothesis that this can result in different types of programmes being implemented by humanitarian agencies, for example investments in water infrastructure rather than water trucking.

The initial **scope** of this evaluation was DFID humanitarian programmes in DRC, Ethiopia, Sudan and Yemen. However, due to insecurity, the Yemen case study was replaced by Pakistan in 2014 where DFID has a large multi-year humanitarian and resilience programme.

The project is aiming to achieve the following **outcomes**:

- DFID country offices and relevant partners have better information about what works in terms of building resilience in fragile and conflict-affected states.
- Those involved in planning and delivery have improved knowledge and understanding of knowledge of how to design and implement.

³⁸⁷ For further information, see the HIEP Evaluation formative report available at <https://www.gov.uk/dfid-research-outputs/evaluation-of-the-humanitarian-innovation-and-evidence-programme-hiep-formative-phase-report>

- DFID and global policy frameworks are informed by robust empirical data regarding the scope and limitations of different interventions to promote resilience in fragile and conflict-affected contexts. DFID and global aid instruments are improved to increase the timeliness and appropriateness of humanitarian assistance in fragile and conflict-affected environments.

These outcomes will be supported by **outputs** for each of the study countries, as well as a synthesis product covering all four countries and a sister evaluation in Somalia. There will be another evaluation product and an uptake strategy.

The multi-year financing (MYF) and resilience evaluation contributes to HIEP output indicators 1.1 on primary research papers available in open access format, 1.2 on evaluations independently quality assured and available in open access format and 1.3. on literature review research papers available in open access format.

In terms of its **design**, the resilience evaluation is a mixed-methods evaluation, combining evaluation of DFID's MYF and a primary study of resilience from the point of view of people intended to benefit from MYF-funded interventions. Taken together, the thematic evaluation tackles three core questions:

EQ 1. Are vulnerable individuals and households more resilient to shocks and stresses as a result of the work of DFID-funded interventions? How do investments in resilience contribute to/compromise delivery of humanitarian outcomes?

EQ 2. Has the availability of pre-approved DFID funding linked to specific triggers enabled DFID to respond more quickly and effectively when conditions deteriorate?

EQ 3. To what extent does DFID multi-year and pre-approved contingency funding provide better value for money than annual funding for DFID and partners?

To address EQ 1, the study takes a qualitative approach, with the aim of then using the findings from qualitative enquiry to determine any further quantitative work. The qualitative enquiry aims to understand the dimensions of resilience for different people in the different contexts where DFID-funded interventions are implemented. The qualitative enquiry will continue throughout the three years of the evaluation.³⁸⁸

EQ 2 has been approached flexibly, as it is dependent on events. It is currently being approached as a real-time evaluation of early response and how different modalities affect agencies' response. For example, in Ethiopia, a strong El Niño event is occurring in the study's research areas, with contingency funding being channelled through the humanitarian agencies. This provides an opportunity to gather data on agency responses.³⁸⁹

EQ 3 on value for money is being approached through four lenses, using mixed methods:

- i) administrative lens, for example, understanding whether MYF enables savings through advance purchasing or improvements in quality of recruitment
- ii) operational lens, for example, the ability of agencies to make investments in infrastructure is lower cost in the short term and offer improved medium term benefits

³⁸⁸ 'Building resilience and managing risk in fragile and conflict-affected states: A thematic evaluation of DFID's multi-year approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen. Inception Report', 2014

³⁸⁹ Interview 205.

- iii) programming lens, for example, whether MYF enables more relevant or tailored interventions to affected populations
- iv) outcome lens, for example, whether the MYF-enabled investments affect the issues and people identified through the qualitative research.³⁹⁰

1.2 Current state of the MYF and Resilience Evaluation

At the time of the HIEP evaluation, the resilience evaluation has been operating since April 2014, including a six-month inception phase, and is approaching the end of its formative phase. The substantive work on resilience (EQ 1), contingency (EQ 2) and Value for Money (VfM) (EQ 3) is in progress. The resilience data gathering has entered its second round in DRC and Ethiopia. The draft Ethiopia formative report has been completed, with the DRC report nearing completion for review. There is reporting on progress and preliminary findings, but the Valid team feel that there are no significant results to report as yet.

2. Methodology

All HIEP case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process.³⁹¹

Two additional aspects are being explored in the resilience evaluation case study. These relate to the intended outputs and outcomes:

- Feasibility and added value of taking a cross-country model – synthesising from four countries plus the sister evaluation in Somalia.
- Exploring how DFID's own practice can influence wider change, through its role as an operational actor and major funder of humanitarian efforts.

The MYF and Resilience case study involved document reviews and a visit to Addis Ababa, Ethiopia, and Nairobi, Kenya. Country visits took place during 4–10 November 2015. The purpose of the country visit was to contextualise the case study in a national and regional context.

Key stakeholders in the humanitarian community were interviewed, as intended and potential users of the resilience evaluation findings. Representatives from the resilience thematic evaluation partners in Ethiopia – UN-OCHA, UNHCR and WFP – were interviewed, as well as individuals from donor agencies and international organisations working on humanitarian and development programmes in Ethiopia and Kenya (see annex 5 for details).

³⁹⁰ 'Building resilience and managing risk in fragile and conflict-affected states: A thematic evaluation of DFID's multi-year approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen. Inception Report', 2014; interview 205.

³⁹¹ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

The resilience study has good potential for generating new insights, although there are also important limitations to this.

The central challenge that the resilience evaluation is aiming to address is how to understand resilience in order to measure it, and study how it evolves over time and how it might be supported. The potentially new perspective that the evaluation brings is to take as a starting point the lived experiences of people and their coping strategies, rather than working from abstract definitions.³⁹² Documenting these through a robust and systematic qualitative approach, using panel data over time, is expected by many respondents to produce different findings from conventional designs.³⁹³

The Ethiopia formative report has already produced some counter-intuitive findings (some of which were confirmed by the HIEP evaluation interviews):

- The nature of the problems being faced by people in the study regions are long-term, and there are signs of important shifts in livelihood strategies.
- To a significant degree, both problems and coping strategies are not amenable to being addressed through aid interventions, involving social and cultural institutions as much as assets.
- In terms of VfM, the three partner agencies appreciate the predictability MYF offers and make savings and potentially improve the quality of their investments, and accordingly the quality of the assistance being provided
- However, MYF seems to have produced little change in how the three DFID partners are working, due to institutional barriers and restrictions in mandate; although planning may be becoming long-term, funding remains annualised.³⁹⁴

Respondents in Ethiopia endorse the usefulness of the research approach, especially the qualitative approach. Most of the humanitarian and resilience programmes that respondents highlighted in interviews have been designed based on experience, observation (assessments) and practice, with minimal systematic analysis or evidence to underpin operational choices and designs. Respondents indicated that this is normal practice.³⁹⁵ The findings, therefore, have wide potential relevance to programmes funded by other donors and NGOs beyond DFID, to inform the fine tuning of existing programmes, as well as the design of new programmes.

Some of the aspects of the study that respondents highlighted as novel included the approach of collecting primary data at a household level. This was flagged as a different approach, as

³⁹² Interviews 196, 205.

³⁹³ Interviews 64, 194, 195, 202, 205, 206, 208, 209.

³⁹⁴ 'Thematic evaluation of MYHF in Ethiopia, Formative report', First Draft, Formative Evaluation Report, July 2015

³⁹⁵ Interviews 64, 65, 104, 195, 198, 200, 202, 204, 206, 208, 209, 207, 202, 204.

consultancies usually look at secondary data from NGOs, or conduct surveys.³⁹⁶ Other respondents welcomed the qualitative approach, as the expectations and perspectives of communities are not often listened to.³⁹⁷ The life history and time series approach may also provide important insights into issues often overlooked by conventional methods, for example the impact of prolonged drought on girls' educations, and a suspected shift in livelihoods away from rural livelihoods that are no longer viable.³⁹⁸ Evidence on livelihoods strategies may have important implications for the current government-led policies and programmes, such as the Productive Safety Net Programme (PSNP), which support building resilience around rural livelihoods.

There is interest in having a better understanding of and good evidence on the VfM of longer-term interventions, although this would need to provide very practical insights such as unit costs of typical interventions, bench-marks, and how to consider contextual conditions.³⁹⁹

Most respondents recognise the need for operational change in the key agencies to better invest in resilience interventions. They note that evidence is needed to influence policy change at the headquarters level to address institutional barriers.⁴⁰⁰ At the national level, two respondents highlighted that independent evidence on resilience and how to support it could provide a platform to promote improved coordination.⁴⁰¹ In this way, the findings of the resilience thematic evaluation have potential wide relevance to humanitarian, resilience and development programmes, as well as to international donors and national governments.

There are some important potential limitations to the novelty and relevance of the insights.

There are limitations to the relevance of the study, at least in the Ethiopian context (it was not possible to explore these issues in the other study countries). These are many of the same issues that limit **DFID's potential to influence change through changing its own practice**.

First, the narrow focus of the study on DFID's multi-year financing instrument, and the UN partner agencies that receive it, may **reduce the broader relevance** to other donors and actors. This is a limit because many donors have developed their own instruments to deal with the challenges of building resilience in a context of recurring crises, and the need to bridge between humanitarian and development funding streams. Some donors maintain their annualised emergency funding but are able to coordinate this with development funding.⁴⁰² Others use the approach of 'crisis modifiers' and flexibility within development programmes that enable the rapid switching of funds towards emergency assistance.⁴⁰³

Notably in Ethiopia, ECHO and the EU DEVCO have combined humanitarian and development funding into a single co-managed programme, which focuses on holistic resilience building in specific geographical areas, the RESET programme.⁴⁰⁴ The particular relevance of the MYF findings to RESET was noted by respondents, as the Valid team is purposively conducting research in many of the same areas covered by RESET to explore the links between emergency and development interventions and

³⁹⁶ Interviews 206, 209.

³⁹⁷ Interviews 194, 195, 206.

³⁹⁸ Interviews 194, 195, 205.

³⁹⁹ Interviews 65, 202.

⁴⁰⁰ Interviews 64, 65, 194, 195, 196, 205, 206, 207, 208.

⁴⁰¹ Interviews 64, 208.

⁴⁰² Interview 197.

⁴⁰³ Interviews 194, 202, 204, 206, 209.

⁴⁰⁴ 'Concept Note: Linking EU's humanitarian and development interventions in the context of resilience building: The case of Ethiopia', EU RESET Programme (2014, ECHO-DEVCO)

the difference they make to people's lives. However, the team may need to explicitly draw out the links for the RESET programme teams.⁴⁰⁵

Second, the **attribution** of resilience outcomes to DFID MYF is far from straightforward, as MYF is channelled through partner agencies and depends on the agency and their mandate.⁴⁰⁶ The challenges are both methodological and practical. There is open acknowledgement that Multi-Year Humanitarian Financing seems to have produced little change in how DFID's agency partners are working, in Ethiopia, due to institutional barriers and restrictions in mandate. Although planning may be becoming long-term, funding remains annualised.⁴⁰⁷

The Ethiopia formative report concludes that the logic behind the case for multi-year humanitarian financing remains strong; the challenge is translating this into practical change.⁴⁰⁸ However, some respondents would disagree with this. They have made the critique that the narrative behind the MYF study, and by extension the multi-year financing instrument, is fundamentally wrong. DFID gives funding through multi-year agreements to pooled funds and agency partners for humanitarian response. However, these agencies cannot or will not gear up for long-term resiliency work, often due to their mandates. The donor's influence may even be reduced if funding is guaranteed.⁴⁰⁹ For other respondents, this perspective opened up a broader, and complex, debate about which funding streams should be used for resilience programming, humanitarian or development.⁴¹⁰ Producing findings that are critical to partner agencies may also negatively affect the engagement of these agencies with the study.

The Valid team recognises the potential limits to relevance, which has emerged early enough in the study process to be mitigated. To mitigate this, the team are aiming to position their findings as illuminating what is effective and is therefore possible to achieve with multi-year funding, within a broader and evidence-based understanding of resilience.⁴¹¹

Third, although respondents like the qualitative, people-centred approach, many flagged their perception that this would **limit the transferability or generalisability** of highly context-specific findings, even within Ethiopia, as the regions and countries are so different.⁴¹²

The fourth, potential, limitation is that **DFID's need for evidence on MYF** at the operational level may no longer be as strong as it was. Respondents suggested that MYF is 'already proven', and the findings that have been most helpful to date are contextual, rather than central to the research themes. Thus, there is a potential challenge for the next phases in retaining relevance as DFID's operational requirements change.⁴¹³

There is no structured focus on gender and other aspects of social inclusion. The project takes a purposive sampling approach, building on a household economy approach, aiming for maximum

⁴⁰⁵ Interviews 202; 204.

⁴⁰⁶ Interview 196.

⁴⁰⁷ Ethiopia Formative Report; interviews 202; 203; 205; 209; 207.

⁴⁰⁸ 'Thematic evaluation of MYHF in Ethiopia, Formative report', First Draft, Formative Evaluation Report, July 2015

⁴⁰⁹ Interviews 202; 203.

⁴¹⁰ Interviews 202; 203; 207; 209.

⁴¹¹ Interviews 196; 205.

⁴¹² Interview 196, 65, 198, 200, 206, 202.

⁴¹³ Interviews 65, 198, 200.

diversity in the sample.⁴¹⁴ This includes female-headed households, but there is no structured disaggregation. If focus groups are used, then women and men are convened separately.⁴¹⁵ In terms of researchers, the Valid team are actively trying to achieve a gender balance in the research teams; for example, the Sudan research team included three women and three men researchers.⁴¹⁶ There is a more detailed discussion on gender and social inclusion in the effectiveness section.

Flexibility has been applied well in the project to help adaptation to unforeseen situations.

There is flexibility in the project, to enable responsiveness to situations. Practical challenges have arisen in terms of access to study sites in Yemen and Sudan. During the inception phase, it was agreed that Yemen was too insecure to enable research there, and Pakistan was identified as an alternative site.

There have also been challenges in carrying out the work in Sudan; none of the team have been able to obtain a visa to travel there or permission from the humanitarian committee to conduct research. The project has adapted by finding national consultants who are able to negotiate access.⁴¹⁷ Other challenges that require a flexible response are logistics, security, travel time and access to remote locations.

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

Planning for transferability and application of findings is adequately planned for through the synthesis design and intentions to develop a future quantitative instrument; however, as the first synthesis has not yet been completed, plans have not been tested.

The interviews in Ethiopia endorsed its inclusion as one of the study countries. Respondents highlighted that the Ethiopian context is affected by multiple challenges, for example, refugees, food security issues, and protracted crises. The interaction of these challenges enable a holistic study of humanitarian and resilience interventions. Ethiopia also has a functioning government and social protection programmes that support a longer-term perspective. Therefore, the Ethiopian context encourages a more holistic and integrated analysis of resilience support, where it makes decreasing sense to separate out humanitarian response from resilience building.⁴¹⁸

The early stage findings from data collection in DRC and Sudan suggest that these contexts present more challenging environments for people than Ethiopia.⁴¹⁹ In DRC, the scale of the problems caused by entrenched, historical and repeated conflict seem beyond the scope of aid interventions. In Sudan, persistent and increasing insecurity seems to be the root cause of the problems people identify. There is no data from Pakistan yet.

Taken together, the study sites present a good range of challenging contexts in which to explore issues of crisis, response and resilience, and interventions to address these. National findings are likely to be highly relevant for national and regional agencies. Plans to support transferability to

⁴¹⁴ 'Building resilience and managing risk in fragile and conflict-affected states: A thematic evaluation of DFID's multi-year approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen. Inception Report', 2014

⁴¹⁵ Interviews 196, 200.

⁴¹⁶ Progress report Jan–April 2015

⁴¹⁷ Interviews 196, 205.

⁴¹⁸ Interviews 65, 194, 198, 200, 202, 204.

⁴¹⁹ Progress Reports Oct–Dec 2014 and Jan–April 2015

other settings, and to an international audience are adequate. Plans include building a quantitative analysis from the qualitative longitudinal panel data set, using the MAXQDA qualitative data analysis software package. The intention is for the synthesis to pick up the differences in context, but provide a quantitative analysis.⁴²⁰ Some common themes are emerging already from the first two rounds of data collection and analysis between Ethiopia and DRC, for example, common long-term issues such as acute poverty, conflict and weak institutions. However, as the study team have not yet begun the synthesis process, the plans for transferability have not yet been proven and it is therefore too early to comment on the value-added of the cross-country model.

To balance the potentially narrow focus on DFID's MYF, the team are also capturing parallel experiences of how other donors are approaching challenges around resilience, humanitarian and development funding streams. This is intended to potentially inform practical guidance products on resilience programmes as part of the outputs of the study.⁴²¹

Users have been involved in the design of the research

DFID teams in the study countries have been closely involved from the start of the project.⁴²² The MYF partners have also been briefed and kept in contact with the project.⁴²³ The challenge for the Valid team is to maintain contact with contact people given the high turnover of staff. For example, within DFID alone, three of the original humanitarian advisers and the project's own lead adviser have moved on.

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

There is medium-to-low awareness among key stakeholder groups, but good potential interest at national and regional level to build on.

The project is at relatively early stages, and so it is reasonable that awareness has not yet been built up among intended target groups. Generally, however, in Ethiopia, it was noted that the Valid team are well networked and make significant efforts to provide briefings and opportunities for exchange with national initiatives. They established initial contacts with key stakeholders in the study countries, including with other donors and programmes at the outset of the project, which provide a good basis for increasing awareness and exchange in due course.⁴²⁴

In Ethiopia, awareness of the MYF/resilience evaluation is highest among DFID counterparts, who are the close collaborators.⁴²⁵ UN-OCHA, UNHCR and WFP indicated awareness but not as high as could be expected for agencies intended to be partners in the study.⁴²⁶ The individuals interviewed from other international donor organisations, research organisations and NGOs had low to no awareness of the study. However, they did indicate the relevance of the findings to their work,

⁴²⁰ Interviews 196, 205.

⁴²¹ Interview 205.

⁴²² Progress reports 2014–2015; interviews 65, 198, 200.

⁴²³ Interviews 207, 208, 209.

⁴²⁴ Progress Reports Oct- Dec 2014 and Jan-April 2015

⁴²⁵ Interviews 65, 196, 198, 200, 205.

⁴²⁶ Interviews 207, 208, 209.

partners and programmes and there were several requests to be included in briefing meetings.⁴²⁷ In Ethiopia, the importance of including government representatives in briefings was emphasised, as the government is moving towards prioritising DRM, and making DRR and resilience building central to its development approach. Government actors are perceived as a key audience for the more nuanced but critical questions about resilience and potential outcomes, and evidence provides a good starting point for these discussions.⁴²⁸ At the regional level, in Kenya, the individuals interviewed had no awareness of the study at this stage but also showed interest. In Kenya, there was more awareness of the related project, Building Resilient Communities in Somalia.⁴²⁹

3.1.4 Extent to which HIEP products are relevant to decision makers

At this stage in the project, only the Ethiopia formative report has been produced in draft form. It was not possible to explore the relevance of the report as it had not been released.

3.2 Strengths

- The Valid team are experienced in humanitarian practice and seem to be well networked with operational agencies, NGOs, DFID, and other donors in the study countries.
- Qualitative design of the resilience research seems novel and relevant to a wide range of national and regional stakeholders.
- The Valid team's efforts to provide regular briefings and sharing of interim findings with national stakeholder groups helps to maintain a broad base of engagement and to capture emerging opportunities, for example convening NGO meetings.
- Capturing parallel experiences in resilience programming seems good insurance against the potential narrowing of the relevance.

3.3 Areas to develop

- Continue active maintenance of networks with DFID humanitarian advisers in study countries and with the HIEP secretariat, which could become more challenging as staff changes.
- Continue active engagement with DFID's agency partners, to balance potentially critical findings about the limited extent of their shift to multi-year approaches.
- Continue to maintain the broader relevance of the findings by positioning the project in relation to the wider agenda or debate on resilience, bridging humanitarian and development funding and other aspects.
- It may be possible, when findings emerge more fully, for the team to link these to learning and improvement questions emerging from programmes such as RESET⁴³⁰ given the apparent lack of research capacity in these programmes.
- Consider how to engage government audiences with the resilience findings.

⁴²⁷ Interviews 194, 197, 202, 203, 204, 203, 206.

⁴²⁸ Interviews 65, 194, 208.

⁴²⁹ Interviews 195, 219.

⁴³⁰ RESET is an EU-funded programme to build resilience in Ethiopia

- Find opportunities to explore regional linkages with potential knowledge brokers, such as the International Centre for Humanitarian Affairs in Kenya and Intergovernmental Authority for Development (IGAD) resilience thematic group.

3.4 Preliminary conclusion

There is **strong evidence** of progress to demonstrate relevance of the thematic evaluation of multi-year approaches to resilience. The study appears to be on track as it approaches its half-way point. The team have met a range of challenges in the study countries, but have successfully addressed these, so far producing two rounds of data in DRC and Ethiopia, and one formative report. In interviews, there was a positive response in terms of the relevance and novelty of the research approach, and interest in the findings. The team seems well networked with humanitarian operational networks, at least in Ethiopia, and are actively sharing findings as they emerge in light-touch ways.

Efforts will be needed to ensure the continuing relevance of the findings, both within and outside of DFID communities, as DFID's own evidence needs around MYF may shift. A further challenge will be to maintain productive engagement with humanitarian agencies while making important critical observations on resilience interventions. Building awareness and profile at a national and regional level, and making links to potential knowledge broker organisations for the future, will be important in creating conditions for the take-up of findings and products in due course.

4. Effectiveness: **To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?**

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

There is systematic QA of study design and monitoring of implementation.

Quality assurance is assessed during three stages: project design, project implementation and project outputs. There is a good strategy in place to ensure systematic quality assurance (QA) systems and processes. The team invest considerable effort to maintain objectivity and robustness while having to adapt to real-world conditions and logistical and security challenges in the research sites.

At the design stage, the inception report was peer-reviewed internally by Valid staff and externally stakeholders from Evidence for Development. ODI is the academic methods partner. As standard procedure with evaluations, DFID submitted the inception report to SEQAS, its own external quality assurance process.⁴³¹

For implementation, the sampling strategy is purposive, which is appropriate for the method. The team are seeking diversity and a wide cross-section of people for the sample rather than representativeness. The original sampling strategy involved conducting a village mapping as the first stage to help identify the various groups and differences by gender, ethnicity, age and income. However, the mapping has not been possible to implement consistently due to logistics and

⁴³¹ Interview 205.

variances in approach of the researchers. The Ethiopia formative report notes that with hindsight, the researchers themselves consider this to be a gap that will need to be addressed through a retrospective analysis of the detailed social and economic breakdown of the village communities (*kebeles*).⁴³²

A key strength of the research process is that there is regular training of researchers, regular peer reflection and re-training of researchers prior to and after each data collection phase. Teams from one research site provide peer support to other teams. Technical support is given to research teams on the household economy approach and interviewing techniques.⁴³³

In the second round, there has been an emphasis on translation and transposition of concepts into local languages to find the right terminology and provide quality assurance of the primary data in the local language. There is cross-referencing of data internally with previous rounds, and findings are also calibrated with other similar research, as the sample is small and non-representative.⁴³⁴

Gender and social inclusion concerns are not systematically addressed.

Although there are research protocols, these are positioned as guidelines rather than prescriptions. The protocols were not seen by the evaluator (beyond the inception report), and so it has not been possible to judge whether there is a structured approach to capturing gender and social inclusion issues within the study. The Ethiopia formative report details the characteristics of the initial panel of 60 individuals:

- 30% female (i.e. exclusively female-headed households)
- 10% under 30
- 27% over 60
- Age range 22–94.
- 2 blind, 2 disabled
- 10% self-identify as well off
- 20% self-identify as poor or very poor

However, the extent to which characteristics such as age, gender and disability will be tracked systematically through the coding of the data and analysis is not clear. Data are not disaggregated as such in the data processing and coding approach. It is important to note that this does not mean setting targets, it means developing a systematic approach to tracking gender and social inclusion issues.

It is too early for QA of products.

In terms of quality assurance of products, it is too early to assess, as only one formative report has been produced in draft form so far. However, there is evidence of good relationships with primary intended user groups for products (see preceding section).

⁴³² 'Thematic evaluation of MYHF in Ethiopia, Formative report', First Draft, Formative Evaluation Report, July 2015

⁴³³ Interviews 196, 205.

⁴³⁴ Interview 205.

In terms of HIEP's broader outputs, such as strengthening skills in design, commission and application of humanitarian research, this study has potential to contribute to the use of research if products can be tailored to the preferences and needs of NGOs, UN agencies and funders.

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

The HIEP theory of change lays out the HIEP rationale that connecting knowledge brokers, networks and key operational agencies to the research processes to promote debate and advocacy for findings will contribute to bring about change in support and use of evidence and innovation. In addition, a key mechanism foreseen is that DFID will use the evidence as the basis for funding decisions.

As noted in the section on relevance, the management team is well networked with DFID and with key humanitarian actors in study countries although the levels of awareness among target groups could be improved. Thus, the foundations are there for the evaluation to influence change through the proposed HIEP pathways. However, as yet there is no written evaluation uptake strategy, although this was due in early 2015 (according to the logframe). This is urgently needed now as it will be easy to lose track of some target groups since individuals change posts and circumstances in study countries change. As noted in the preceding section, some project stakeholders in Ethiopia already feel more distanced from the project.

There is no evidence that links are being made to knowledge brokers, networks and key operational agencies at the international level, either in relation to the MYF approach or the resilience findings. There is an intention for the team leader and project manager to share findings at the WHS, but there are no details on this to date.

Verbally, team members have given indications of the thinking about take-up and influencing, as follows.⁴³⁵ Influencing will take place at four levels:

- 1. DFID, as main client and stakeholder:** with the aim of improving understanding of whether and how to adapt instruments in protracted crises.
- 2. Set of partners who are receiving the multi-year funding:** the major UN-related humanitarian actors, at country and corporate level, with the aim of understanding how they are adapting if at all to MYF, what the blockages may be and how to address them.
- 3. Humanitarian System-level:** headquarters-level and policy-level influencing, with the aim of changing policy on multi-year financing.
- 4. Raising awareness at international events:** with the aim of contributing to global debates, such as at the WHS.

The intention is to share the findings through a range of products and channels tailored for different target audiences, from academically peer-reviewed through to policy and operational products. The Overseas Development Institute's humanitarian publications are mentioned as a possible product. Contributing to policy forums with funders, where the emphasis is on debate and exchange, are also potential channels.⁴³⁶

Given the urgency of current crises in the study countries and the large investments being made in resilience-type programming without the benefit of systematic analysis, there is an opportunity to

⁴³⁵ Interviews 196, 205.

⁴³⁶ Interviews 196, 205.

raise the profile of high-quality and independent evidence on resilience and effectiveness through a comprehensive uptake strategy. The interest of a wide group of potential users was confirmed in the interviews (see above).

As the team are investing effort and resource in briefing and sharing findings, an uptake strategy would benefit from having a simple tracker tool, such as a stakeholder engagement diary, to record and document incremental changes in stakeholders' responses and reactions over time (an example is given in case study annex).

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

The HIEP model has only provided limited facilitation of results for the resilience thematic evaluation. The HIEP secretariat facilitated the initial mapping and contacting of stakeholders, including DFID humanitarian advisers, in the study countries. The study reports progress against the HIEP output indicators 1.1, 1.2, 1.3 relating to independently quality assured evaluations and peer-reviewed publications. However, the project does not appear to be connected to other projects in the HIEP portfolio. The resilience evaluation is meant to be connected to BRICS in Somalia, but the connections do not appear strong at this stage.

DFID's Humanitarian Advisers in Ethiopia were not aware of the details of HIEP, and how the resilience study fitted into the portfolio.

Change of DFID lead may weaken links between the resilience study and stakeholders within DFID and beyond.

There has been a change of staff in DFID, so from October 2015, there is a new lead adviser for the project. This post remains based in the East Africa Research Hub and the intention is for the new lead adviser to be part of the HIEP secretariat, which is positive. The individual was new in post at the time of the evaluation but there is a suggestion that the post has been redefined somewhat, with the time allocated for HIEP and the MYF/Resilience Study reduced from 50% to 10%. This future project management arrangement could potentially exacerbate the disconnection from the wider HIEP portfolio, and weaken links to DFID's operational partners.

As the thematic evaluation is still in early stages, the lack of connection may not yet have serious implications. However, now that the study is maturing and producing findings, it is the role of the HIEP secretariat to build the links across the portfolio and across the internal DFID humanitarian networks to support the take-up and influence of the evaluation. The project team is limited in what it can do to activate these internal pathways.

4.2 Strengths

- Good strategy and implementation in place to ensure systematic QA systems and processes.
- Team is investing considerable efforts to ensure consistency and objectivity, despite having to adapt to real-world conditions and logistical and security challenges in the research sites.
- There is regular training of researchers, regular peer reflection and re-training of researchers after and prior to each data collection phase. Teams from one research site provide peer support to other teams, and there is local language expertise and technical methods expertise available to research teams.

4.3 Areas to develop

- There is an urgent need to document an evaluation uptake strategy (now due as per the logframe), accompanied by a monitoring tool.⁴³⁷
- A more explicit and systematic approach is needed to integrate gender, ethnicity, disabilities and other social inclusion issues across the research process: sampling approach, data collection, coding and analysis of data.
- There is an opportunity to integrate a gender and social inclusion lens into the after-action reviews and re-training of researchers.
- Documenting revisions to research design and implementation protocols after each round of data collection could enhance the rigour of the study.
- Now that findings are being reported, the HIEP secretariat has an opportunity to facilitate links between the resilience evaluation and other projects in the HIEP portfolio, as well as links into the DFID Humanitarian cadre.
- However, the reduction in the DFID lead adviser's time to manage the study will weaken links to internal and external stakeholders.

4.4 Conclusions

In terms of effectiveness, there is **medium evidence** of a good strategy in place to ensure systematic QA systems and processes. In due course, this will support the production of good quality, independent evidence which is operationally relevant and has the good potential to be used.

The team invest considerable effort to **maintain objectivity and rigour** in the research process while having to adapt to real-world conditions, and logistical and security challenges in the research sites. The rigour could be strengthened by capturing any changes to the research approach in a design or protocol document.

Other areas to be strengthened in the research process are related to taking a more explicit and systematic approach to **gender, ethnicity, disabilities and other social inclusion issues** to inform the sampling approach, data collection, coding and analysis of data.

The most urgent area to be addressed in relation to effectiveness is the production of a **detailed evaluation uptake strategy**. This is important to maintain the responsiveness of the study to the priorities of target users and changes in resilience work in order to create the networks and products for use and application of the findings in due course.

5. Impact: What contribution will the project make to HIEP's aim to build and sustain evidence-aware policy and practice by humanitarian organisations?

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

HIEP has three outcomes it seeks to achieve:

⁴³⁷ Tracking tools such as stakeholder diaries or outcome journals can be very useful for logging incremental changes – see recommendations section for more detail.

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

The evaluation is considering impact at this outcome level and, if and when possible, the overall intended impact of HIEP, namely that humanitarian actors have the capacities to deliver improved programmes and operations that are effective at supporting the most vulnerable people.

The MYF/resilience evaluation potentially contributes to HIEP outcomes, albeit indirectly:

- Outcome 1, potential contribution: for example, if findings are **applied** within resilience programmes to make improvements, and, through demonstration, **promote further investments** into research or evaluation of resilience, by DFID or other donor agencies.
- Outcome 2, potential contribution: if outputs include an instrument for generating independent, people-centred, systematic data on resilience in protracted crises and this is **adopted** within resilience programmes.
- Outcome 3, potential contribution: if the outputs include **evidence-based solutions** to achieving longer-term financing and programme design and these are **taken up by actors to improve** current efforts around resilience.

It is far too early to tell if any of these proposed contributions will actually take place. In addition, although there are plans to produce some of the necessary elements for contributing to HIEP outcomes – for example, applicable lessons and an instrument for generating data on resilience – there is no overall uptake plan in place to help target application and adoption by potential users.

Furthermore, any potential contributions to HIEP outcomes may well require more time than the life-span of the project. Enablers of the project's contribution to HIEP outcomes include DFID's reputation for emphasising evidence, which gives high-profile and credibility to the study findings, enhancing its reception by other donors and agencies. Constraining factors include the limits to policy and practice change noted in the section on relevance that arise from most funders having their own instruments to deal with the challenges of supporting resilience and managing the coordination of humanitarian development funding.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

There is no explicit objective to build capacity in Southern actors in the MYF/resilience study. However, the Valid team's approach has been to find high quality national research staff to tackle the access challenges they have faced. While this does not involve building capacity directly (rather it builds on local capacity), the resilience research approach involves regular training and updating in the qualitative method and regular post-data collection team-based reflections. Presumably, through their involvement in the study, researchers have also expanded their networks and formed links with other national researchers, which is a contribution to strengthening national capacity. The

Valid team consider that the perspectives and intellectual contributions of national researchers has added value to their analysis⁴³⁸ .5).

5.2 Conclusions

There is **no evidence** yet of contribution to HIEP outcomes, given the early stage of the project. There is potential to contribute to outcomes, although this may take longer than the current project timeframe.

6. Gender and social inclusion

Nothing further to add.

7. Other findings and comments

None

8. Summative phase 1 conclusions

There is **strong evidence** to support the **relevance** of the MYF/resilience evaluation, and the study appears to be on track as it nears its mid-point. There is good evidence from interviews that the study offers novel and independent evidence on key issues affecting resilience interventions. The management team has successfully addressed a range of challenges in implementing the research process to produce its formative outputs.

There is **medium evidence** on effectiveness, as the project is still at an early stage. Quality assurance strategies are good. A key strength is the investment in maintaining consistency and rigour in the research process given the challenges of implementations. The post-data collection reflections and peer training are an excellent approach to build the skills of the research teams. Research quality could be further strengthened with the addition of a gender and social inclusion framework and documentation of adapted research protocols after each round.

The most urgent area to be addressed in relation to both **relevance** and **effectiveness** is the production of a **detailed evaluation uptake strategy**. This is important to maintain the responsiveness of the study to the priorities of target users and changes in resilience work (relevance), in order to create the networks and products for use and application of the findings in due course (effectiveness). At this stage, there is only potential for contribution to the HIEP outcomes, but the foundations appear to be in place.

9. Recommendations at case study level

For the team:

- There is an urgent need to document an evaluation uptake strategy, accompanied by a monitoring tool to track engagement (appendix provides more detail on strategy and monitoring tool).
- Develop a systematic framework for integrating gender, ethnicity, disabilities and other social inclusion issues across the research process: sampling approach, data collection, coding and analysis of data, as well as the reflection process among researchers.

⁴³⁸ See interviews 196, 205

- Document revisions to research design and implementation protocols after each round of data collection to enhance the rigour of the study.

For the Secretariat:

- Now that findings are being reported, the HIEP secretariat has an opportunity to facilitate links between the resilience evaluation and other projects in the HIEP portfolio, as well as links into the DFID Humanitarian cadre.

Appendix

A. Evaluation Uptake Strategy suggested areas of focus

The evaluation uptake strategy needs to address specific target groups and objectives, but should consider the following recommendations arising from the HIEP evaluation:

- Continue to maintain the broader relevance of the findings by positioning the project in relation to the wider agenda or debate on resilience, bridging humanitarian and development funding and other aspects.
- Continue active maintenance of networks with DFID humanitarian advisers in study countries and with the HIEP secretariat, which could become more challenging as staff changes.
- Continue active engagement with DFID’s agency partners, to mitigate potentially critical findings about the limited extent of their shift to multi-year approaches.
- Seek opportunities to link findings to learning and improvement questions emerging from programmes (such as RESET or the Dutch consortia in Ethiopia), given the apparent lack of research capacity in most resilience programmes.
- Consider how to engage government audiences with the resilience findings.
- Seek opportunities to explore regional linkages with potential knowledge brokers, such as the International Centre for Humanitarian Affairs in Kenya and EGAD Resilience thematic group.

Aspects highlighted by respondents as important for an effective evaluation uptake strategy include:

- There should be appropriate resourcing and ownership, as this is often underfunded⁴³⁹
- Synthesis will be important for regional and international audiences, and primary studies useful for national audiences⁴⁴⁰
- Products should highlight practical findings, captured in guidance and toolkit-type products so that findings can be understood and operationalised – ‘the IKEA approach’ – to highlight the operational questions: how to design, how to target, timeframes for interventions, and how to coordinate with governments productively.⁴⁴¹
- Use multiple communication strategies – debate, visual infographics, 10-point summaries, statistics and videos – as reports are overwhelming.⁴⁴²
- The strategy should identify networks and organisations to play a knowledge-brokering role to aid in the translation of findings to other settings, including engaging at a regional level; for example, DFID’s regional humanitarian cadre meetings are a good forum.⁴⁴³
- For DFID humanitarian advisers, the cadre is a key channel, as long as reports are avoided.⁴⁴⁴

⁴³⁹ Interviews 195, 219

⁴⁴⁰ Interview 219

⁴⁴¹ Interviews 195, 196, 204, 209, 219

⁴⁴² Interviews 195, 196, 204, 209, 219

⁴⁴³ Interviews 65, 198, 200

⁴⁴⁴ Interviews 65, 195, 198, 200, 219

In Ethiopia, several formal channels and initiatives were mentioned for sharing findings in due course, including:

- EHCT (Ethiopian Humanitarian Country Team), because they are a high-level representation of the UN, donors and NGOs with capability to influence the humanitarian response/funding system;
- HRDG (Humanitarian and Resilience Donor Group), because they are donors;
- DRMTWG (Disaster Risk Management Technical Working Group) – a national forum chaired by the government and co-chaired by OCHA. Donors, UN agencies and NGOs are well represented, as are key government agencies.

Suggested format for uptake monitoring tool

1. Background

- Brief story

2. What happened?

- What type of action or behaviour change?
- At what location did the action take place?
- Who is responsible?/who took the action?

3. How did it happen?

- Which of your project activities contributed to the action/change?
- What else might have contributed to the action?
- Do you have independent evidence of the action and that your project contributed to the actions?

Any written evidence that can be attached, e.g. meeting minutes; copies of emails or correspondence; specific observation systematically documented

4. What does it mean?

- How does it relate to your programme outcomes?
- What have you learned from this example?
- What will you do differently as a result?

Annex 3. Evaluation matrix, tools and templates

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1. HIEP Evaluation Matrix

The matrix below details the judgement criteria, indicators, analytical methods and sources of information for each evaluation question. It also cross-references the theory of change identifying which links, outcomes, assumptions and behaviour change they refer to.

EQ1: Relevance PROG: How well has HIEP identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation? PROJ: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?		Theory of Change linkage
<u>Judgement Criteria</u>	<u>Indicators</u>	
JC1.1: Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation	<ul style="list-style-type: none"> • Evidence that HIEP provides new insights, e.g. asks new questions or applies them to new contexts. • Evidence that HIEP has addressed gender and other aspects of social exclusion. • Evidence of flexibility built into the projects and programme for unplanned opportunities and developments. • Evidence that project teams and HIEP Secretariat/MC/virtual team scan for and take up opportunities. 	Problems. Output 1,
JC1.2: Extent to which HIEP design is appropriate to address identified needs and opportunities	<ul style="list-style-type: none"> • Evidence that application and transferability of research findings is planned for. • Evidence that potential users are involved in HIEP design. • Evidence of disaggregation of population and data sets appropriate to address the need. 	Ass'n 1 Link 1 Output 1
JC1.3: Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities	<ul style="list-style-type: none"> • Evidence that HEIP links to broader sectoral initiatives within DFID. • Evidence that HIEP links to broader sectoral initiatives outside of DFID at country and international levels • Evidence that HIEP links with broader cross-cutting initiatives within humanitarian aid including though not only to address gender equality and social inclusion. 	Link 1
JC1.4 Extent to which HIEP products are relevant to decision-makers	<ul style="list-style-type: none"> • Evidence of customisation of products for users. • Assessment by intended users of products of projects (including DFID and external). • Evidence that projects are generating products and recommendations that can be applied easily to humanitarian operations. 	
Analytical methods:		

<p>Document review against programme framework</p> <p>Collation of case study and programme data against judgement criteria to identify patterns, key learning</p> <p>Analysis and scoring of 8 case studies against relevance criteria</p> <p>Synthesis and consideration of patterns and learning from scoring and qualitative feedback on selected project products</p> <p>Analysis of case study findings on enabling and inhibiting factors for relevance</p> <p>Gender and social inclusion audit</p>		
<p>Sources of information:</p> <p>HIEP documentation including:</p> <p>MC minutes</p> <p>HIEP quarterly reports</p> <p>Logframe reporting and data behind it</p> <p>HIEP business case and other reports</p> <p>DFID Annual Report</p> <p>Project annual reviews</p> <p>Project product peer review and publication data</p> <p>Case studies</p> <p>Interviews with project team (DFID and partners)</p> <p>Interviews with Secretariat, MC</p> <p>Survey with potential users of research outputs including DFID humanitarian advisers and external stakeholders (summative 2)</p> <p>Interviews with external stakeholders (key donors, subject specialists and operational personnel)</p> <p>Interviews with country stakeholders in selected countries including external stakeholders and DFID humanitarian advisers</p>		
<p>EQ2: Effectiveness</p> <p>PROG: Which approaches have been more effective in enabling HIEP to ensure the creation, support and application of high quality and relevant humanitarian evidence and innovation?</p> <p>PROJ: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?</p>		
<u>Judgement Criteria</u>	<u>Indicators</u>	
JC2.1: Extent to which progress has been made towards achieving outputs	<ul style="list-style-type: none"> ● Evidence of quality assurance processes for research processes and products ● Evidence of sustainable cross-institutional relationships and partnerships. 	Outputs 1, 2, 3

	<ul style="list-style-type: none"> • Evidence that HIEP has strengthened skills in design, commission and application of humanitarian research amongst DFID HIEP staff, staff at key partner agencies and country-based humanitarian research communities. • Evidence that the gender and social exclusion analyses inform HIEP outputs 	
JC2.2: Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes	<ul style="list-style-type: none"> • Evidence of resourced plans to achieve HIEP 4 behaviour changes (evidence advocated for, brokered, endorsed, influences DFID and others' behaviour). • Evidence that champions advocate evidence [BC1]. • Evidence of networks brokering HIEP evidence [BC2]. • Evidence that operational actors endorse evidence [BC3]. • Evidence that DFID funding is based on HIEP evidence [BC4]. • Evidence that behaviour changes are being tracked at project and programme level and learning fed into future plans. 	<ul style="list-style-type: none"> • Link 2 • Assumption 2 • BC 1,2,3,4 • Outcome 1-3 • Barriers
JC2.3: Extent to which the HIEP management model accelerates or inhibits the achievement of results	<ul style="list-style-type: none"> • Evidence of learning mechanisms in place and being used to learn from and adapt HIEP management model. • Evidence of monitoring processes in place and being used to track progress of HIEP and also include gender-disaggregated data, e.g. use of logframe. • Perceptions and experience of virtual team of benefits/problems of management model. • Evidence that the cross-departmental structure has made research more robust, and relevant to users. 	
JC2.4: Extent to which the programme maximises the potential impact of its component parts (coherence)	<ul style="list-style-type: none"> • Evidence that HIEP virtual team sees and acts for potential collective impact. • Evidence of shared planning, e.g. if common target country/actors. • Evidence that projects and programme (HIEP Secretariat and management) adequately resourced to achieve change. 	<ul style="list-style-type: none"> • Link 4 • Assumption 4 • Link 3
Analytical methods: Document review Contribution analysis Analysis of case studies to identify enabling and inhibiting factors for effectiveness Analysis of case studies and programme level data against judgement criteria Analysis of programme level activities against influencing strategy Gender and social inclusion audit		
Sources of information:		

<p>Case studies</p> <p>Logframe reporting</p> <p>Virtual team group discussion/email survey</p> <p>HIEP quarterly reports to MC</p> <p>Annual reports on HIEP related business cases/other</p> <p>Interviews with HIEP Secretariat, MC, humanitarian advisers and selected country offices</p> <p>Minutes of virtual team meetings</p> <p>Country visits for interviews with project team, donors, (potential) users of products, operational organisations</p> <p>Workshop with project teams to develop contribution stories to change</p> <p>Interviews with HIEP MC, Secretariat</p> <p>Interviews with external stakeholders to challenge/validate contribution stories; identify if/how products used</p> <p>Follow-up interviews with some survey respondents on use of HIEP products (summative 2)</p> <p>Focus group with HIEP virtual team (group from outside case study teams)</p> <p>Focus group with humanitarian advisers regarding evidence use (follow up to 2013 survey and other formative phase identified issues) (summative 2)</p>		
<p>EQ3: Value for Money</p> <p>PROG: Which management and implementation approaches have enabled HIEP to deliver better value for money (VfM)?</p> <p>PROJ: To what extent and how has the project delivered value for money (VfM)?</p>		
<u>Judgement Criteria</u>	<u>Indicators</u>	
JC2.1: Extent to which HIEP has optimised use of resources to achieve results	<ul style="list-style-type: none"> ● Evidence that HIEP decision-making considers VfM (4E) at project and programme level. ● Evidence of effective (level of detail and timely) budgeting and monitoring processes ● Evidence of additional funds being leveraged for/by HIEP. ● Evidence that programme has, and uses, systems and processes within its management and implementation approaches to address gender equality and other equity issues. ● Evidence that HIEP programme model is cost-effective compared to alternatives (programme level). ● Evidence that budgets are appropriate for range of activities e.g. research production and communication; management costs are reasonable. 	
<p>Analytical methods:</p> <p>Document review</p> <p>Analysis of financial data against economy/efficiency criteria</p> <p>Analysis of case studies and programme level data by judgement criteria</p> <p>Synthesis and scoring of case studies</p> <p>Analysis of case study findings on enabling and inhibiting factors</p>		

Comparison of costs against stand-alone model/benchmark comparisons Analysis of decision-making using VfM 4E framework – economy, efficiency, effectiveness, equity Comparison of cost of project management models in 3-5 case studies		
Source of information: Documentation including: MC minutes Project and programme annual reports Project and programme budgets and annual accounts Costs of HIEP vs. modelled costs of alternative, e.g. DFID RED education programme Case study reports Interviews with HIEP MC, Secretariat, DFID project teams (DFID and some partners) Analysis of a selection of partner procurement policies (formative)		
4. Impact PROG: What contribution has HIEP made to building and sustaining evidence-aware policy and practice by humanitarian organisations? PROJ: What contribution will the project make to HIEP aim to build and sustain evidence aware policy and practice by humanitarian organisations.		
<i>Judgement Criteria</i>	<i>Indicators</i>	
4.1 Extent to which HIEP has achieved change in DFID and key organisations/targets	<ul style="list-style-type: none"> • Evidence that HIEP has contributed to change in international donors, including DFID’s funding instruments and frameworks for investment into evidence, innovation and its applications (O1). • Evidence that HIEP has contributed to change in humanitarian actors’ skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions e.g. evidence that HIEP has brought in new providers and created markets for evidence-informed practice including research. • Evidence that HIEP has contributed to change in policy and practice actors to invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises (O3). • Evidence that changes in humanitarian actors contribute to improved results for vulnerable people (impact). 	<ul style="list-style-type: none"> • O utcomes 1,2,3 Ass’n 4
4.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation	<ul style="list-style-type: none"> • Evidence including resource allocation of plans in place and being implemented to build capacity in Southern actors <u>and</u> that takes into account gender differences and diversity. 	<ul style="list-style-type: none"> •
Analytical methods		

<p>Document review</p> <p>Analysis of case study findings for learning on enabling and inhibiting factors</p> <p>Analysis of case studies and programme level data by outcome and theme (gender and development) and against judgement criteria</p> <p>Contribution analysis to analyse select examples of changes at outcome level identified by DFID in logframe reporting and interviews</p> <p>Analysis of programme level activities against influencing strategy</p> <p>Gender and social inclusion audit</p>	
<p>Sources of information:</p> <p>Documentation including:</p> <p>Logframe reporting</p> <p>HIEP quarterly reports to MC</p> <p>Annual reports and reviews on HIEP related business cases/other</p> <p>Case study reports</p> <p>Workshop/interviews with team to collect change stories and populate pathways to change</p> <p>Interviews with HIEP Secretariat, MC, humanitarian advisers and selected country offices</p> <p>Interviews with external stakeholders</p> <p>Stakeholder engagement diaries</p>	

2. Case study analytical tools

2.1 Quality analysis and critical appraisal

Given the range of types of outputs and anticipated number of overall outputs that the evaluation will produce, the evaluation will not quality assess (QA) each and every product. Instead, the evaluation will focus on the QA processes at the three key stages of project design, implementation, and exit. The following questions will be asked. In addition, selected outputs will be reviewed in more depth from a user-focus (see later section)

Stage of project	QA assessment
Project development	<p>How robust was the QA process used to ensure the methodology developed was appropriate i.e.</p> <ul style="list-style-type: none"> • Was the inception report reviewed by external commentators? • Was a GASI specialist one of the external commentators? • Were the perspectives of both humanitarian and academics sought, including GASI specialists? • Were recommended amendments incorporated? If so, all or some and if some which ones? • How were GASI issues, if relevant, dealt with in the literature reviews? • Were products e.g. literature reviews comprehensive enough to fulfil their function? • Were methods built in to ensure findings from specific contexts can be applied to other country contexts? • Has proposed work been submitted to a rigorous ethical review/approval process? Were GASI specialists involved in the review/approval process? • How appropriate is the proposed research project and methodology to address the evidence gap? - consider focus, scope and scale, rigour and appropriateness of methods. (An external academic commentator is likely to be needed to give an expert opinion on this area).
Project implementation	<p>How well is the project being quality assured during its implementation? i.e.</p> <ul style="list-style-type: none"> • Are there research protocols to guide data collection that take account of the humanitarian contexts? • Are there mechanisms in place that ensure research teams on the ground are keeping to protocols? Do these include GASI explicitly in the protocols? • How is the project responding to any unexpected events and security concerns which impact on the quality of evidence gathered? • Have project partners received feedback on their reports from DFID? • Have project partners received feedback from research participants and other stakeholders?
Project exit	<p>How well are outputs being quality assured? What are the planned processes of QA for outputs and exit i.e.</p> <ul style="list-style-type: none"> • How are different audiences identified and Is each intended audience clearly defined?

	<ul style="list-style-type: none"> • Are outputs customised for them? • Are they peer reviewed? – Who are the peers e.g. gender balance; southern actors, practitioners etc? • Are there changes made based on feedback? <p>A specific User-focused review of outputs is dealt with in a separate process detailed in 3.3.1 which will look in more depth at selected outputs. Team members will liaise to avoid duplication.</p>
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2.2 Contribution analysis

The key analytical method that we will use in the case studies is contribution analysis. In each case study the evaluation team will develop contribution stories documenting observable changes towards HIEP outcomes. This is anticipated to be the major focus of the second summative phase. Start up interviews between the case study lead evaluator and DFID lead adviser/partner project manager will be an opportunity to identify if the case study team can identify any changes (in relation to the HIEP theory of change) to date- at the behaviour change and outcome levels. Where initial start up interviews in September 2015 do identify changes that the projects have made, the following process will be followed to create a contribution story.

Contribution analysis

Interviews with DFID personnel, key stakeholders (internal and external) relevant to the reported change, and document review which shows DFID activities to achieve the change, will be used to assess the contribution story. These will be documented and included in the narrative report of the case study. Each contribution story includes the following six sections. Scoring definitions are included below. This process, together with comments on the significance of the reported change, will form the contribution story that will be part of the case study report.

Contributions to change

[Include 2-4 contribution stories where appropriate. Additional smaller scale results may also be covered in the narrative. If the contribution story is lengthy please annex it and include in the main case study report a summary - maximum one page].

2. What change has occurred.

[Summarise the change and evidence to support its validity. Link the change to the HIEP ToC-outcome or behaviour changes]

7. What did DFID do that might have contributed to the change

8. What other factors contributed to this change?

9. Assessment of the significance of the change

10. Assessment of the strength of the evidence to demonstrate the reported change

11. Assessment of the significance of DFID's contribution.

Assessment definitions:

a) Assessment of the significance of the change.

Assessment definition - Change: 1. Significant change evidence that change has scale, depth and sustainability; 2. Established change evidence of change at scale and sustainability of change; 3. Emerging change evidence of pockets of change, but not widespread; 4. Early change; 5. No evidence of change

b) Assessment of the significance of DFID's contribution.

Assessment definition: 1: Evidence that programme made a crucial contribution; 2: Evidence that programme made an important contribution; 3: Evidence that programme made some contribution; 4: No evidence that the intervention made any contribution; 5: insufficient evidence to make an assessment.

c) Assessment of strength of evidence

Assessment definition - Strong: Verbal team and/or stakeholder evidence, strategy and implementation documents and M&E data on progress, confirmed by primary evaluation data; **Medium:** Verbal team and/or stakeholder evidence, strategy and implementation documents, confirmed by M&E data on progress; **Partial:** Verbal team and/or stakeholder evidence, strategy and implementation documents; **Weak:** Verbal team or stakeholder evidence only; **No evidence:** There is not sufficient evidence to make a judgement.

2.3 Analysis against the theory of change

The HIEP theory of change shows that relationships, networks and influence are crucial elements of the process by which HIEP anticipates achieving change. In all case studies, the team will gather data on projects' engagement with key actors and the strength of the strategies to achieve change. The four key elements to this articulated in the theory of change are:

1. Champions and sponsors within and outside of DFID advocate for and create space to debate HIEP- related activity;
2. Brokers from the sector engage wider networks in the debate;

3. Operational actors endorse the evidence;
4. DFID country offices and partners adopt and fund HIEP informed-evidence operational frameworks.

Interviews with DFID lead advisers and partner project managers will consider progress within each of these four areas. Further interviews with selected stakeholders to represent each of the four areas will be used to validate and/or challenge progress to date, and to assess the strength of the strategies in place to contribute to change.

2.4 Case study scoring

Case studies will be scored against each of the evaluation questions using the scoring system developed and trialled in the formative phase. This methodology facilitates comparison across the case studies and helps to identify patterns. It worked well in the formative phase. The scoring will follow the methodology developed in the formative phase and is summarised below.

BOX 3. SCORING METHODOLOGY TO BE USED ACROSS THE EIGHT CASE STUDIES

In order to provide a systematic way of making judgements across the case studies, supporting comparison between cases and revealing patterns, a scoring methodology was tested in the formative phase of the evaluation and will be used to assess the strength of current plans and progress at project level in achieving relevance, efficiency⁴⁴⁵, effectiveness and impact. For each case study the scoring follows the following four-step process:

The evidence that had been collected against each of the four evaluation questions will be synthesised, and conclusions from the data developed.

An assessment will be made of the strength of the evidence supporting the conclusion. For example, a reported intention by a project team to develop strategies to address an area scores lower than a project that has a documented and resourced plan to do this. This is done when some data is not available to the evaluation team, e.g. project budgets in certain cases.

A performance score will then be assigned for each of the evaluation criteria (relevance, efficiency, effectiveness and impact) based on the progress that has been made to date, the depth of the strategies that are in place, and the strength of the supporting evidence. A four-point scoring scale will be used:

- a) High – There is strong evidence of progress to demonstrate relevance/effectiveness/impact against all criteria
- b) Medium- There is some evidence of progress to demonstrate relevance against three (adjust for impact) or more criteria
- c) Low - There is some but limited evidence to demonstrate relevance
- d) None – No strategy or evidence in place

Scores will be reviewed by another case study lead member and adjustments made. The team leader will review the scores to ensure consistency across case studies

⁴⁴⁵ Efficiency will be judged for case study projects selected for VFM focus i.e. CS1, CS3, CS5, CS6, CS7.

3. Case study interview checklists

NB- the interview checklists are a guide. It may be necessary to add some questions to be able to complete the case study report in the required framework. Please check through particularly before the final interview with the lead adviser in case additional information needed.

3.1 DFID Lead adviser/project team and partner project manager

a) Interview 1 - Opening meeting in September- initial briefing and planning

- a) What has gone well and what has been a challenge in the project to date?
- b) Check the list you have for outputs is up to date.
- c) What have been the most significant results so far?
- d) The HIEP theory of change is based on evidence reaching humanitarian actors through a number of channels including:
 - that champions will advocate for the evidence
 - that intermediaries will link the evidence to actors e.g. through training, workshops, other
 - that operational actors will endorse the evidence
 - that DFID funding decisions will be based on this.

Are there examples of where the project has made progress in these areas? e.g. i)stimulated debate ii) produced findings endorsed by operational organisations iii) influenced DFID decision making iv) produced findings taken up by other networks.
- e) Is it feasible to identify contributions the project has made in the humanitarian sector already?
- f) What has aided this contribution/what else has been happening that has helped this?
- g) Who are the key stakeholders you recommend we interview in i) country visits and ii) beyond?
- h) We will schedule a more in-depth interview for October/November. The evaluation is also considering the uptake of certain outputs in more depth (see list in tool 2) and value for money of selected projects. Other team members will be in contact with you regarding these elements in October/November.

The responses to these questions which should be asked in the opening briefing/interview will inform the focus of the main data gathering. If there are significant results or contributions the project has made in the sector, these should be explored in the later interviews with both the project team and external stakeholders to build a contribution story.

b) Interview 2 - October/November

1. Relevance

- a) What type of research are you producing? How are you doing it and where and with what methods?
- b) What is new about the questions this project asks or the products it will produce?
- c) How are you ensuring quality of research processes and outputs (and other)? How do you **define research quality** in your field? What processes are in place to ensure robustness and quality? How many of these are DFID imposed processes and how many are your own?
- d) How does the humanitarian context impact on methodology? How have you dealt with this?
- e) How have you planned for the research findings to be relevant to contexts that are not being directly researched?
- f) How are issues of gender and social inclusion being addressed?

- g) Can you give me an example of how the project has had to adapt to an unplanned event? What did you do?
- h) How does this project link to other initiatives within DFID?
- i) How does this project link to other initiative within the sector at a) national level b) internationally?

2. Value for money - VfM will mainly be considered in a separate process by the relevant team members (VfM specialist and User output review lead), and concentrates on 5 projects as well as the overall programme. CS 1, 3, 5,6,7 are likely to be contacted by the VFM sub-team. However, if any VFM or efficiency issues arise, do note them and include in the interview notes, information grid and report where relevant - this is the case even for case studies not selected for VFM. Useful also to alert Valsa and Teresa to any interesting questions emerging on VFM.

3. Effectiveness

- a) What are the evidence products produced so far? What is the plan for the remainder of the project?
- b) I would like to discuss the quality assurance processes. Can you give me details of the following areas? **See QA tool in analytical tool section**
- c) What are the key cross-departmental relationships for this project within DFID (Africa/RED/CHASE/other)? How have these worked together? What has gone well? What has been difficult? Have Gender or SD advisers been involved in the networks or other informal processes of engagement?
- d) What are the key cross-organisational (academic-humanitarian) relationships in this project?
- e) How have the relationships been supported?
- f) What have been the challenges and benefits for each organisation of this relationship? Please give specific examples.
- g) Have there been any changes in the humanitarian organisation's use of evidence more generally because of this relationship? How can that be seen (or in the future looked for)?
- h) What is the plan for how evidence will reach key audiences? Is this budgeted (time and finance)?
- i) Who are the key audiences for evidence products? Please be specific?
- j) How will products for external (and internal) audiences be contextualised e.g. by language, context for different audiences? Is this budgeted?
- k) The HIEP theory of change is based on evidence reaching humanitarian actors through a number of channels including:
 - that champions will advocate for the evidence
 - that intermediaries will link the evidence to actors e.g. through training, workshops, other
 - that operational actors will endorse the evidence
 - that DFID funding decisions will be based on this.

Can you talk me through each of these strategies and how/if they are relevant to your project and what strategies and progress is in place to achieve them so far? To what extent did these strategies include specific attention to GASI issues?

- l) Which audiences/humanitarian actors do you think you have the strongest strategy to reach?
- m) Which are most difficult? How are you dealing with this?
- n) How is the project being monitored? How is use of evidence products/impact being monitored? When does that monitoring end?

4. Impact

a) How does the project contribute to the HIEP overall aims?

These are

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises

b) Does the project aim to build Southern actors' capacity to support, produce and apply evidence and innovation? How? Can you provide specific examples of capacity built? What approaches have worked best? Can you give me an idea of how you dealt with GASI issues? (e.g. Gender balance within training, mentoring or coaching processes; specific strategies to include women practitioners/actors etc.)

5.. Learning and recommendations

- a) What learning is there from this project about how to carry out relevant research (support to innovation) in a humanitarian context?
- b) What learning is there for how to ensure that the HIEP programme overall and this project is effective in ensuring evidence is use?
- c) What three lessons and/or recommendations would you highlight that HIEP should take into consider for the next three years for success?

Please prompt on GASI – to check whether there is any specific learning around GASI issues.

3.2 Research and innovation teams

Research and innovation teams are drawn from international and national groups and may involve both humanitarian and academic representatives. In some cases, a group discussion maybe more appropriate/efficient.

- a) Can you give me an introduction to the research project and how you became involved?
- b) What stage is the project at now?
- c) What has gone well?
- d) What have been the challenges? How have you dealt with these?
- e) What type of research are you producing? How are you doing it and where and with what methods?
- f) Do you have research protocols to guide you? Have these been realistic? What adaptations, if any have you made to these or in practice?
- g) How do you take into account gender and issues of inclusion?
- h) Do you gather disaggregated data? Please give details.
- i) What is new about the questions this project asks or the products it will produce?
- j) How are you ensuring quality of research processes and outputs (and others)? How do you **define research quality** in your field? What processes are in place to ensure robustness and quality? How many of these are DFID imposed processes and how many are your own?
- k) How does the humanitarian context impact on methodology? How have you dealt with this?
- l) How have you planned for the research findings to be relevant to contexts that are not being directly researched?

- m) How are issues of gender and social inclusion being addressed?
- n) Can you give me an example of how the project has had to adapt to an unplanned event? What did you do?
- o) What training /support/capacity development did you or your partners/colleagues need? Was this provided? How?
- p) What lessons are there about undertaking research/innovation in a humanitarian context and how best to support it?

3.3 External stakeholders

- These should be drawn from academics/ operational people (peers); technical specialists in the field; other humanitarian actors (donors, partners, NGOs, private sector), and practitioners. The mix will vary according to the project.
- Interviewees should include both national and international level stakeholders.
- Some of these interviews may be with DFID staff considered "external" to the project team e.g. humanitarian advisers, country level staff.
- These interviewees may have little/no knowledge of the project. You will need to provide a brief- ideally something in advance of the project e.g. summary paragraph.
- Lead advisers and the workshop should help identify appropriate interviewees. It is recommended that at least two interviewees be people not identified by DFID. Interviewees contacted in the formative phase can be revisited.
- One of the aims of the interviews is to validate/triangulate DFID/lead adviser claims so some additional questions may come from this.
- External stakeholder interviews will need to be customised according to a) stakeholder relationship to the project e.g. whether they have an intended role due to being on an advisory group or are named by DFID/project team as a potential champion, advocate or endorser b) progress in the project - how much the project has engaged external stakeholders so far.
- Questions below are for guidance.

Relevance

- a) How have you been involved in the project (if at all)? How much do you know about it?
- b) The project aims to tackle problem x. Is this a problem you recognise?
- c) The project plans to produce x [name outputs/products] - would you consider these to be useful in your work? How? What needs to happen to ensure their relevance?
- d) How does/could this project link to other initiative within the sector? Is anyone else doing this type of work?
- e) Do you think there is something new or distinctive in what the project is seeking to produce?

Effectiveness and impact

- a) The project has used x, y, z methods to engage people in the sector. Are you aware of these activities? Who is likely to be reached by them? Are there any significant groups likely to be missed?
- b) The project has produced some results [e.g. produced outputs, stimulated discussion on subject x, other]. Are you aware of this debate? Have you taken part in it? How is it relevant to your work?
- c) What else could have contributed to the HIEP result e.g. other agency activities, events in the context?
- d) How significant is the contribution of the HIEP input?
- e) Have you adapted your work in light of the debate?

4. Templates

4.1 Information Grid

The information grid is the place to collect data from document review and interviews/discussions. Note the source of findings e.g. interview number/name and document. The information grid is not for sharing with DFID or partners but provides a vital document of the source of the evaluation findings and means to track these.

EQ1: Relevance PROG: How well has HIEP identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation? PROJ: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?		Theory of Change linkage
<i>Judgement Criteria</i>	<i>Indicators</i>	
JC1.1: Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation	<ul style="list-style-type: none"> • Evidence that HIEP provides new insights, e.g. asks new questions or applies them to new contexts. • Evidence that HIEP has addressed gender and other aspects of social exclusion. • Evidence of flexibility built into the projects and programme for unplanned opportunities and developments. • Evidence that project teams and HIEP Secretariat/MC/virtual team scan for and take up opportunities. 	Problems. Output 1,
Preliminary Findings		
JC1.2: Extent to which HIEP design is appropriate to address identified needs and opportunities	<ul style="list-style-type: none"> • Evidence that application and transferability of research findings is planned for. • Evidence that potential users are involved in HIEP design. • Evidence of disaggregation of population and data sets appropriate to address the need. 	Ass'n 1 Link 1 Output 1
Preliminary Findings		
JC1.3: Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities	<ul style="list-style-type: none"> • Evidence that HEIP links to broader sectoral initiatives within DFID. • Evidence that HIEP links to broader sectoral initiatives outside of DFID at country and international levels • Evidence that HIEP links with broader cross-cutting initiatives within humanitarian aid including though not only to address gender equality and social inclusion. 	Link 1

Preliminary Findings		
JC1.4 Extent to which HIEP products are relevant to decision-makers	<ul style="list-style-type: none"> • Evidence of customisation of products for users. • Assessment by intended users of products of projects (including DFID and external). • Evidence that projects are generating products and recommendations that can be applied easily to humanitarian operations. 	
Preliminary Findings		
Evaluation question scoring		
<p>a) High –There is strong evidence of progress to demonstrate relevance against all criteria</p> <p>b) Medium- There is some evidence of progress to demonstrate relevance against three or more criteria</p> <p>c) Low - There is some but limited evidence to demonstrate relevance</p> <p>d) None – No strategy or evidence in place</p>		
EQ2: Value for Money		
PROG: Which management and implementation approaches have enabled HIEP to deliver better value for money (VfM)? PROJ: To what extent and how has the project delivered value for money (VfM)?		
<u>Judgement Criteria</u>	<u>Indicators</u>	
JC2.1: Extent to which HIEP has optimised use of resources to achieve results	<ul style="list-style-type: none"> • Evidence that HIEP decision-making considers VfM (4E) at project and programme level. • Evidence of effective (level of detail and timely) budgeting and monitoring processes • Evidence of additional funds being leveraged for/by HIEP. • Evidence that programme has and uses systems and processes within its management and implementation approaches to address gender equality and other equity issues. • Evidence that HIEP programme model is cost-effective compared to alternatives (programme level). • Evidence that budgets are appropriate for range of activities e.g. research production and communication; management costs are reasonable. 	
Preliminary Findings [VALSA will lead on VFM analysis and scoring <u>but please note any VfM and efficiency findings that do arise in interviews</u>]		

<p>Evaluation question scoring</p> <p>a) High –There is strong evidence of progress to demonstrate efficiency/VfM against all criteria</p> <p>b) Medium- There is some evidence of progress to demonstrate efficiency/VfM against some criteria</p> <p>c) There is some but limited evidence of efficiency/value for money</p> <p>d) None – No strategy or evidence in place</p>		
<p>EQ3: Effectiveness</p> <p>PROG: Which approaches have been more effective in enabling HIEP to ensure the creation, support and application of high quality and relevant humanitarian evidence and innovation?</p> <p>PROJ: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?</p>		
<p><u>Judgement Criteria</u></p>		<p><u>Indicators</u></p>
<p>JC3.1: Extent to which progress has been made towards achieving outputs</p>	<ul style="list-style-type: none"> Evidence of quality assurance processes for research processes and products (see QA criteria in 3.2.4a). Evidence of sustainable cross-institutional relationships and partnerships. Evidence that HIEP has strengthened skills in design, commission and application of humanitarian research amongst DFID HIEP staff, staff at key partner agencies and country-based humanitarian research communities. Evidence that the gender and social exclusion analyses inform HIEP outputs 	<p>Outputs 1, 2, 3</p>
<p>Preliminary Findings</p>		
<p>JC3.2: Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes</p>	<ul style="list-style-type: none"> Evidence of resourced plans to achieve HIEP 4 behaviour changes (evidence advocated for, brokered, endorsed, influences DFID and others' behaviour). Evidence that champions advocate evidence [BC1]. Evidence of networks brokering HIEP evidence [BC2]. Evidence that operational actors endorse evidence [BC3]. Evidence that DFID funding is based on HIEP evidence [BC4]. Evidence that behaviour changes are being tracked at project and programme level and learning fed into future plans. 	<ul style="list-style-type: none"> Link 2 Assumption 2 BC 1,2,3,4 Outcome 1-3 Barriers
<p>Preliminary Findings</p>		

<p>JC3.3: Extent to which the HIEP management model accelerates or inhibits the achievement of results</p>	<ul style="list-style-type: none"> • Evidence of learning mechanisms in place and being used to learn from and adapt HIEP management model. • Evidence of monitoring processes in place and being used to track progress of HIEP and also include gender-disaggregated data, e.g. use of logframe. • Perceptions and experience of virtual team of benefits/problems of management model. • Evidence that the cross-departmental structure has made research more robust, and relevant to users. 	<ul style="list-style-type: none"> • Output <ul style="list-style-type: none"> • BC 1,2,3,4
<p>Preliminary Findings</p>		
<p>JC3.4: Extent to which the programme maximises the potential impact of its component parts (coherence)</p>	<ul style="list-style-type: none"> • Evidence that HIEP virtual team sees and acts for potential collective impact. • Evidence of shared planning, e.g. if common target country/actors. • Evidence that projects and programme (HIEP Secretariat and management) adequately resourced to achieve change. 	<ul style="list-style-type: none"> • Link 4 Assumpti on 4 Link 3
<p>Preliminary Findings</p>		
<p>Evaluation question scoring</p> <p>a) High –There is strong evidence of an excellent strategy <u>and</u> progress to demonstrate effectiveness against all criteria</p> <p>b) Medium- There is some evidence of a good strategy and progress to demonstrate effectiveness against three or more criteria</p> <p>c) Low - There is some but limited evidence to demonstrate effectiveness</p> <p>d) None – No strategy or evidence in place</p>		
<p>4. Impact</p> <p>PROG: What contribution has HIEP made to building and sustaining evidence-aware policy and practice by humanitarian organisations?</p> <p>PROJ: What contribution will the project make to HIEP aim to build and sustain evidence aware policy and practice by humanitarian organisations.</p>		
<p><u>Judgement Criteria</u></p>	<p><u>Indicators</u></p>	

4.1 Extent to which HIEP has achieved change in DFID and key organisations/targets	<ul style="list-style-type: none"> ● Evidence that HIEP has contributed to change in international donors, including DFID’s funding instruments and frameworks for investment into evidence, innovation and its applications (O1). ● Evidence that HIEP has contributed to change in humanitarian actors’ skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions e.g. Evidence that HIEP has brought in new providers and created markets for evidence-informed practice including research. ● Evidence that HIEP has contributed to change in policy and practice actors to invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises (O3). ● Evidence that changes in humanitarian actors contributes to improved results for vulnerable people (impact). 	Outcomes 1,2,3 Ass’n 4 Outcome 2
Preliminary Findings		
4.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation	<ul style="list-style-type: none"> ● Evidence including resource allocation of plans in place and being implemented to build capacity in Southern actors <u>and</u> that takes into account gender differences and diversity. 	
Preliminary Findings		
<p>Evaluation question scoring</p> <p>a) High –There is strong evidence of an excellent strategy <u>and</u> progress to demonstrate impact against all criteria</p> <p>b) Medium- There is some evidence of a good strategy and progress to demonstrate effectiveness against one criterion</p> <p>c) Low - There is some but limited evidence to demonstrate impact</p> <p>d) None – No strategy or evidence in place.</p>		

4.2 Template: Case study narrative report

Case study Title- *[Number and Name of case study]*
[Author and date]

1. *[Instructions to author all italics and square brackets- please delete before submission.]*
2. *Please footnote or refer to specific documents and interviews (by number) to support findings.*
3. *Case study reports should be **no longer than 10-12 pages** excluding annexes.*
4. *Provide responses to the HIEP evaluation questions organised by judgement criteria, detailed in this template and drawing on the indicators of the evaluation matrix. Do include additional findings that fall outside the matrix if they are relevant to the evaluation questions.]*
5. **Please add Annexes with interviewees and documents reviewed in addition to the templates attached. Thanks.**

1. Introduction

[summarise the aim of the project; start and end date; partners; budget; other information as appropriate].

[Introduce the evaluation - sample text below].

This case study report forms part of the evaluation of DFID's Humanitarian Innovation and Evidence Programme (HIEP)⁴⁴⁶. The five-year evaluation process tracks the DFID programme 2013-18. Eight projects funded through the HIEP have been identified to follow as part of the evaluation. This is the first summative phase of the evaluation. The second and final summative phase will take place in 2017-18.

2. Methodology

All case studies are assessed using a common methodology adapted to the specific circumstances of the project. The case study is assessed in relation to three evaluation questions of relevance, effectiveness and impact and also against an overall theory of change developed with DFID for the HIEP. The judgement criteria and indicators used in the assessment draw on the HIEP theory of change. Value for money or efficiency questions are being assessed through a separate process⁴⁴⁷.

[Summarise the specific case study methodology-e.g. country visit/not, range of interviews attach documents reviewed and interviews undertaken to share with partners]

3. Relevance: How well has the project identified and responded to evolving priority needs and opportunities for investment in humanitarian evidence and innovation?

3.1 Emerging findings

3.1.1 Extent to which HIEP has responded to needs identified (in HERR and HIES) and other emerging needs and opportunities to invest in humanitarian evidence and innovation

3.1.2 Extent to which HIEP design is appropriate to address identified needs and opportunities

3.1.3 Extent to which HIEP fits/harmonises with other relevant institutional, sectoral and country-based initiatives and opportunities

3.1.4 Extent to which HIEP products are relevant to decision-makers

⁴⁴⁶ For further information, see the HIEP Evaluation formative report available at <http://r4d.dfid.gov.uk/Output/200759/>

⁴⁴⁷ Five case studies have been identified for more focused value for money analysis. This is being carried out through a process separate from the case study.

3.2 Strengths

[Summarise the strengths of the project in its strategy and progress to achieve relevance. What factors have contributed to this- external and/or within the project?].

3.3 Areas to develop

[Summarise the weakness of the project in its strategy and progress to achieve relevance. What factors have contributed to this- external and/or within the project?].

3.4 Preliminary conclusion

4. Effectiveness: To what extent and how has the project ensured the creation, support and application of high quality and relevant humanitarian evidence and innovation?

4.1 Emerging findings

4.1.1 Extent to which progress has been made towards producing HIEP outputs

4.1.2 Extent to which progress has been made to bring about HIEP planned behavioural changes and contribute to outcomes

Contributions to change

[Include 2-4 contribution stories where appropriate. Additional smaller scale results may also be covered in the narrative. If the contribution story is lengthy, please annex it and include in the main case study report a summary - maximum one page].

3. What change has occurred?

[Summarise the change and evidence to support its validity. Link the change to the HIEP ToC-outcome or behaviour changes]

12. What did DFID do that might have contributed to the change?

13. What other factors contributed to this change?

14. Assessment of the significance of the change

15. Assessment of the strength of the evidence to demonstrate the reported change

16. Assessment of the significance of DFID's contribution.

Assessment definitions:

d) Assessment of the significance of the change.

Assessment definition - Change: 1. Significant change evidence that change has scale, depth and sustainability; 2. Established change evidence of change at scale and sustainability of change; 3. Emerging change evidence of pockets of change, but not widespread; 4. Early change; 5. No evidence of change

e) Assessment of the significance of DFID's contribution.

Assessment definition: 1: Evidence that programme made a crucial contribution; 2: Evidence that programme made an important contribution; 3: Evidence that programme made some contribution; 4:

No evidence that the intervention made any contribution; 5: insufficient evidence to make an assessment.

f) Assessment of strength of evidence

Assessment definition - Strong: Verbal team and/or stakeholder evidence, strategy and implementation documents and M&E data on progress, confirmed by primary evaluation data; **Medium:** Verbal team and/or stakeholder evidence, strategy and implementation documents, confirmed by M&E data on progress; **Partial:** Verbal team and/or stakeholder evidence, strategy and implementation documents; **Weak:** Verbal team or stakeholder evidence only; **No evidence:** There is not sufficient evidence to make a judgement.

4.1.3 Extent to which the HIEP project management model accelerates or inhibits the achievement of results

4.1.4 Extent to which the HIEP programme maximises the potential impact of its component parts (coherence of project with the whole)

4.2 Strengths

4.3 Areas to develop

4.4 Conclusions

5. Impact: What contribution will the project make to HIEP aim to build and sustain evidence aware policy and practice by humanitarian organisations

5.1 Emerging findings

5.1.1 Extent to which HIEP has achieved change in DFID and key organisations/targets

HIEP has three outcomes it seeks to achieve.

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises

The evaluation is considering impact at this outcome level as well, if and when possible the overall intended impact of HIEP, which is that humanitarian actors have the capacities to deliver improved programmes and operations that are effective at supporting the most vulnerable people.

5.1.2 Extent to which HIEP has built capacity in Southern actors to be able to access funding for research and also to support, produce and apply evidence and innovation

5.2 Strengths

5.3 Areas to develop

5.4 Conclusions

6. Gender and social diversity (any additional comments not covered above)

7. Other findings and comments

[Include efficiency/value for money findings here if any emerge. Or other areas that are important to report but not covered in previous sections].

8. Summative phase 1 conclusions

9. Recommendations at case study level

4.3 Template: Dimensions of change: mapping the project to the HIEP theory of change

The table below details how the case study addresses each of the dimensions of change detailed in the HIEP theory of change. It summarises plans and current progress towards change. It is not anticipated that all projects address all changes. This is an update from the formative phase and swiftly summarises plans and progress against the dimensions of the ToC.

Change areas (Taken from HIEP theory of change)	Summary of the intended changes (if any) and evidence of progress in this change area
Output 1. <u>High quality and relevant</u> research and evidence products [LIST PLANNED OUTPUTS] Quality and relevance considers: a) scientific rigour, b) extent of engagement with stakeholders, and c) “reach” of outputs/dissemination	
Output 2: Relationship and partnership formed or strengthened between DFID divisions and with partner agencies	
Output 3: Relevant individuals have skills to design, commission and apply humanitarian research	
Behaviour Change 1: Debate of and advocacy for HIEP evidence	
Behaviour Change 2: Networks broker applications of HIEP evidence	
Behaviour Change 3: Operational actors endorse HIEP evidence	
Behaviour Change 4: DFID funding and operations change	

Outcome 1: International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications	
Outcome 2: Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and DRM interventions	
Outcome 3: Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises	
SPECIFIC AIM: Actors in fragile and conflict-affected states and countries vulnerable to disaster risks use context-specific applications of evidence and innovations in the design, financing, planning and delivery of humanitarian policies, programmes and practices to manage risks and deliver rapid, effective responses in emergencies	

4.4 Template: Learning on models and management

The table below will be used to collect key learning from the case study projects, e.g. in relation to key process, structural or organisational factors which enabled/inhibited achievement. This is important because we have structured the evaluation questions to focus on understanding about the different models for each of the project, and what it is about that or the context that has helped or hindered success in each of the areas we are evaluating.

Learning points/Area of evaluation	What factors enabled achievement in this area?	What factors inhibited achievement this area?	What learning can be drawn from these for other contexts?
Relevance			
Efficiency	As appropriate-possibly only for Valsa to address		
Effectiveness			
Impact			

4.5 Template: Scoring table at evaluation question level

The table below will be used to summarise conclusions and support scoring of case studies against the evaluation questions.

EQ1: Relevance	
<p>Summary of judgement: provide summary details. Summarise the key conclusions at JC level in the information grids. This is the justification for the score.</p>	<p>Score and conclusion: Score strength of <u>progress and strategies</u> to ensure relevance/efficiency/effectiveness/impact as:</p> <ul style="list-style-type: none"> a) High –There is strong evidence of progress to demonstrate relevance against all criteria b) Medium- There is some evidence of progress to demonstrate relevance against some criteria c) There is some but limited evidence of relevance d) None – No strategy or evidence in place
EQ2: Efficiency	
<p>Summary of judgement: Summarise the key conclusions at JC level in the information grids. This is the justification for the score.</p> <p>VfM specialist section- separate report</p>	<p>Score and conclusion: Score strength of <u>progress and strategies</u> to ensure relevance/efficiency/effectiveness/impact as:</p> <ul style="list-style-type: none"> a) High –There is strong evidence of progress to demonstrate efficiency against all criteria b) Medium- There is some evidence of progress to demonstrate efficiency against some criteria c) There is some but limited evidence of efficiency d) None – No strategy or evidence in place
EQ3: Effectiveness	
<p>Summary of judgement: Summarise the key conclusions at JC level in the information grids. This is the justification for the score.</p>	<p>Score and conclusion: Score strength of <u>progress and strategies</u> to ensure relevance/efficiency/effectiveness/impact as:</p> <ul style="list-style-type: none"> a) High –There is strong evidence of progress to demonstrate effectiveness against all criteria b) Medium- There is some evidence of progress to demonstrate effectiveness against some criteria c) There is some but limited evidence of effectiveness d) None – No strategy or evidence in place
EQ4: Impact	
Summary of judgement:	Score and conclusion:

<p>Summarise the key conclusions at JC level in the information grids. This is the justification for the score.</p>	<p>Score strength of <u>progress and strategies</u> to ensure relevance/efficiency/effectiveness/impact as:</p> <ul style="list-style-type: none">a) High –There is strong evidence of progress to demonstrate impact against all criteriab) Medium- There is some evidence of progress to demonstrate impact against some criteriac) There is some but limited evidence of impactd) None – No strategy or evidence in place
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5. Programme tools and templates

5.1 GASI checklists and audit template

a) Gender and Social Inclusion- Internal stakeholders

<p>EQ 1. Relevance: Evidence that HIEP has Addressed gender and other aspects of Social Inclusion</p> <ul style="list-style-type: none"> ▪ How did the HEIP secretariat respond to the requirements of the Gender Equality Act (2014) – Has it adapted guidelines policies etc.? Have management systems been discussed and modified in relation to GASI issues? ▪ How successful has HIEP been in disaggregating data and to what level? – target groups, staffing, capacity building etc. ▪ How does HEIP link into and reinforce Gender and SI initiatives across CHASE/DFID? ▪ More broadly, how has HIEP engaged with the run up to the WHS, especially around the focus on women and girls? ▪ Are there other complementary processes on gender and diversity in the sector which HIEP has engaged with or influenced to date, or planning to do so? 	
<p>EQ 2. Effectiveness</p> <ul style="list-style-type: none"> ▪ What resources are there to promote and track GASI issues? ▪ What, if any programme wide tool has HIEP used to assess differentials between projects in their effectiveness in mainstreaming GASI issues in their design, implementation and communication of results? ▪ What programme approaches appear to have been most effective in mainstreaming GASI in their research – how and why? ▪ How has HIEP ensured that projects have addressed the GASI in their communication research uptake strategies generally – Are there expectations of gendered budgeting? 	
<p>EQ 3. Efficiency: Systems mechanisms and processes used by HIEP, to address gender and other equity issues, within its management and implementation approaches</p> <ul style="list-style-type: none"> ▪ What systems/processes does HIEP use to track the RED gender indicators and/or Other GASI indicators? Who is responsible? ▪ What lessons, have been learnt, if any, on the efficiency of the different procurement processes in ensuring GASI is embedded with the research cycle? 	
<p>EQ 4. Impact</p> <ul style="list-style-type: none"> ▪ How has HEIP tracked the capacities of Southern Actors to be able to access funds etc. from a gender and social inclusion perspective? ▪ What mechanisms/ systems/resources has HEIP introduced since the formative evaluation to assess the gendered/SI 	

impacts of the Programme beyond specific indicators – e.g. if GASI mainstreamed, or not, potential for unintended impacts on end users and overall goals.	
Additional Questions <ul style="list-style-type: none"> ▪ What more, if anything, would you like to do around gender and social diversity within the HEIP programme but are prevented by the bureaucracy or system to do so? ▪ Who external to DFID might be worth talking to about GASI in HEIP or humanitarian research more broadly in the summative phase? 	

b) Interview checklist - external

Interviews

EQ1 Relevance: Evidence that HIEP has Addressed gender and other aspects of Social Inclusion <ul style="list-style-type: none"> ▪ Your view on the key evidence gaps within the humanitarian sector relating to Gender and social inclusion? ▪ What would you expect from research in promoting humanitarian practice that is gender sensitive and socially inclusive? ▪ What expectations do you have from HIEP research outputs for it to be useful in developing interventions that are gender sensitive and socially inclusive? 	
EQ2 Efficiency: Systems mechanisms and processes used by HIEP, to address gender and other equity issues, within its management and implementation approaches <ul style="list-style-type: none"> ▪ What do you think are the challenges for a fund, like HIEP, to mainstream gender and social inclusion? ▪ What, if anything, would you like to see done differently? 	
EQ3 Effectiveness <ul style="list-style-type: none"> ▪ What, if any, contact have you had with the HIEP staff and/or programmes? ▪ How, if at all, HIEP is contributing to addressing trends in the humanitarian sector around evidence gaps, or promoting innovation in relation to GASI? 	
EQ4 Impact <ul style="list-style-type: none"> ▪ Have you used any of the products generated so far by HIEP? – How and how useful were they? 	
Additional Questions <ul style="list-style-type: none"> ▪ What more, if anything, would you like HIEP to do around gender and social diversity? 	

Annex: Gender Audit Summary Evidence Matrix

HIEP/Case Study	Gender/SI Policy or Strategy	Needed GASI capacity	Specific GASI indicators	Disaggregated sex, age, diversity research data	Disaggregated GASI data on staff, Southern actors	GASI addressed in Comms Strategy	GASI modifications to systems/ approach*	Research outputs include GASI,
HIEP	X							
CS1								
CS2								
CS3								
CS4								
CS5								
CS6								
CS7								
CS8								

Key:

- CS – Case study
- SI – Social Inclusion
- GASI - Gender and Social Inclusion
- Comms- Communication
- * - modifications refers to changes made to strengthen attention to GASI during implementation in response to: a) internal/external review, b) monitoring results and emerging evidence

5.2 Management - Virtual team focus group discussion

HIEP Evaluation: First Summative Phase

Questions for the VT

1. HIEP Identity

Q 1.1 Is there a HIEP identity/brand in DFID? Do you feel that the projects you manage are part of HIEP?

Q1.2 How do you work together as a HIEP team? For instance, do you share lessons across HIEP projects or make synergies to achieve HIEP outcomes?

2. Management capacity

Q2.1 How do you manage for quality in your HIEP projects? Do you feel you have access to the right support and networks within DFID to manage the quality of your research projects?

Q2.2 Do you have a role in promoting the uptake by policymakers of your project's findings? What is this role?

Q2.3 Have you received any training or professional development as part of your HIEP role? What training would be appropriate?

3. Efficiency

Q3.1 How well is the VT running, what do you see as its purpose, and how could it be better?

Q3.2 How easy is it for you to secure time for managing your HIEP project and doing cross-HIEP work? Do you get recognized/rewarded for this?

Q 3.3 What are the costs and benefits of the cross-departmental team structure from your perspective?

4. Recommendations

Q4.1 What recommendations would you make to HIEP/DFID to maximize the potential of the HIEP over the next 2 years or beyond?

5.3 Outcome interview checklists

Interview checklist for Outcome 1

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.

Introduction to HIEP and its intended outcomes - focus on 1.

1. To what extent do you see the need for donors to invest in humanitarian research and innovation?
2. What investments have you made or do you know of in humanitarian research and innovation? Future plans are also interesting here.
3. Is this/are these one-off investments in a specific project, or part of a broader investment strategy?
4. [In the case of funding for innovation] To what extent is the funding for innovation going beyond piloting & testing to support scale-up and replication?
5. Over the past 5 years, have you seen an increase in funding for humanitarian research and/or innovation? Please give specific examples to illustrate if possible.
6. What are some of the factors that have contributed to the funding for humanitarian research and/or innovation [e.g., WHS, existence of opportunities such a HIF or HIEP-funded projects, strategy commitments? What have been the barriers to increased funding [budget cuts, increasing humanitarian needs]?
7. What contact have you had with DFID/HIEP?
8. How has it contributed to any noted changes in funding for humanitarian research and innovation? How significant has this contribution been?
9. What more could it do in the next 2-3 years to support this change?

Interview checklist for Outcome2

- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.

Introduction to HIEP and its intended outcomes - focus on 2.

1. To what extent do you recognise the problem that DFID is trying to address i.e. how do skills, behaviours, relationship, cultures and systems impede the regular integration of evidence into humanitarian interventions?
2. What are some initiatives that you know of at organisational/sectoral/other levels that are trying to encourage more use of evidence in humanitarian interventions? What level of success/other do they have?
3. Have you been involved with or noted any changes in the past 5 years of how the sector relates to (produces, uses, refers to) research and evidence? Please give specific examples to illustrate if possible. Future plans are also interesting here. Probe about differences at sector/country/international levels.
4. What are some of the factors that have contributed to this change (or prevented any change)? [try to get beyond lack of time as the factor, reports too long and more specific than "culture"]
5. What contact have you had with HIEP?
6. How has it contributed to any noted changes in support for/use of evidence in your organisation? And in the sector? How significant has this contribution been? [Adapt for WHS]
7. What more could it do in the next 2-3 years to support this change?

General and Outcome 3 Interviews Checklist

1. Briefing

DFID's Humanitarian Innovation and Evidence Programme - Running from 2013-2018, HIEP is a £48.3 million investment and consists of a portfolio of 24 projects and programmes, ranging in size, focus and country of implementation. As a whole, the HIEP programme intends to strengthen how humanitarian actors use research, evidence and innovation to improve the delivery of response and resilience.

HIEP is working towards three specific outcomes:

- **Outcome 1:** International donors, including DFID, develop funding instruments and frameworks for investment into evidence, innovation and its applications.
- **Outcome 2:** Humanitarian actors change skills, behaviours, relationships, cultures and systems to promote the regular integration of evidence into humanitarian and disaster risk management (DRM) interventions.
- **Outcome 3:** Policy and practice actors invest in social, economic and political innovations that focus on benefits for poor people in humanitarian crises.

1. Involvement in outcome area

- a) The HIEP aims to tackle 3 outcomes [see above].
- b) Are these challenges that you recognise?
- c) Are you aware of these debates? Have you taken part in them?
- d) How have you been involved in [outcome area]?
- e) How does your organisation view the issues around [outcome area]?
- f) What has happened around [result/change]? What actions have been taken by whom, in which organisation [also country?]?
- g) What did DFID and/or HIEP do that might have contributed to the change?
- h) What other factors contributed to this change? Or What else could have contributed to the HIEP result e.g. other agency activities, events in the context?
- i) How durable is this change, in your view?

- j) How significant is the contribution of the HIEP input?
- k) How have you adapted your work in light of the change / outputs / debate?

4. General issues on using evidence and innovation

- a) Have there been any changes in your organisation's use of evidence in the last 2 years? How can that be seen (or in the future looked for)?
- b) Where do you hear about new findings / evidence / practices / innovations?
- c) Are operational agencies putting in more resources to production/use of evidence and innovation?
- d) Are operational agencies taking a more holistic approach to evidence / innovation?
- e) What do you think are the drivers / blockers for this?

5. About the HIEP specifically

- a) What learning might there be from HIEP about how to carry out relevant research and/or support to innovation in a humanitarian context that would be relevant to your organisation?
- b) What three lessons and/or recommendations would you highlight that HIEP should consider for the next three years for success in achieving its outcomes?

User-Focused Output Review Template

Crucial to the success of HIEP is the production of high quality evidence products that are accessible and relate to user's operating environment. Therefore, available HIEP products⁴⁴⁸ are being reviewed as part of the summative stage. The output review focuses on outputs targeted at humanitarian actors for operational use, including by DFID humanitarian advisers and national and international actors. This first summative stage provides an opportunity to test the methodology which is envisaged to be undertaken on a larger scale in the second summative phase when more evidence outputs will have been produced.

The user-focused review covers three key areas of quality:

- **Quality of research-uptake strategy:** The strategy in place for dissemination and circulation of outputs, including reach and how tailored and flexible the approaches are. The review will also gather any monitoring data collected by partners and DFID on use/ uptake.
- **Appropriateness of the outputs and methods of dissemination:** The extent of contextualisation of outputs for users e.g. language, country, type of disaster and the extent to which the dissemination plan is followed.
- **Uptake of outputs:** The perceived utility of the evidence among key users and any recommendations for improvement in the uptake of outputs.

Quality of Research-Uptake Strategy

Red – there is no dissemination/ research-uptake strategy.

Amber – there is a dissemination/ research-uptake strategy but it does not specify tailored approaches for different, specified audiences and there is no scope for flexibility.

Green – there is a dissemination/ research-uptake strategy which specified individuals target at relevant organisations, and which outlines tailored approaches for engagement, as well as includes scope for flexibility.

- Is there a dissemination/ research-uptake strategy for outputs?
- Is there any scope for flexibility in the research-uptake strategy, such as when sudden onset disasters occur and opportunities could be responded to?

⁴⁴⁸ If we need to make a selection, we should use the following criteria: range across the programme where possible (there are limited user-focused publications at this point); whether they have some expectation of being useful externally for academic, policy and/or operational stakeholders; time since publication; funded and/or supported technically by HIEP.

- Reach - who is being targeted and who is not?
- What is the strength of the dissemination/ research-uptake strategy?

Appropriateness of the Outputs and Methods of Dissemination

Red – The output is not tailored to the context, the intended research-uptake strategy was not followed and there is no evidence of user engagement in the output throughout the project. There is no evidence of ‘unintended’ users picking up the output.

Amber – There is limited tailoring of the output to the context, the output was disseminated broadly to plan, but the users were not engaged throughout the projects. There is limited evidence of ‘unintended’ users picking up the output.

Green – The outputs have been tailored for the context, disseminated to plan, and users were engaged. There is some evidence of ‘unintended’ users picking up the output.

- The extent of contextualisation of outputs for users e.g. language, country, type of disaster.
- Was the output disseminated as per the research-uptake strategy?
- Were the intended users engaged as part of the project or only at the dissemination phase?
- Is there any evidence of other ‘unintended’ users who have heard of the output?

Uptake of Outputs

Red – the output is not being used by the intended or ‘unintended’ organisations and people, and is not useful.

Amber – the output is being used by the intended organisations and people and by some ‘unintended’ organisations and people. The output is useful but could be improved.

Green – the output is being used by the intended and ‘unintended’ people and organisations, and is useful and easy to access.

- Is the output being used by the intended organisations and people?
- Is the output being used by any other organisations and people (unintended)?
- If the output is being used, how is it being used? Is it useful in terms of content, being easy to use and being easy to access?
- How could the output be improved?

Output	Case Study	Quality of Research-Uptake Strategy	Appropriateness of the Outputs and Methods of Dissemination	Uptake of Outputs
DFID - Technical guidance note - cash in emergencies (2013)	2			
DFID - Technical guidance note - violence against women (2013)	Programme			
CaLP - E-transfers in emergencies-implementation support guidelines (2014)	2			
Refani Consortium. Research on Food Assistance for Nutritional Impact Literature Review https://s3.amazonaws.com/acf-site-files/documents/Literature+Review+(Final)+03.09.2015.pdf (2015)	2			
Blanchet, K.; Sistenich, V.; Ramesh, A.; Frison, S.; Warren, E.; Hossain, M.; Knight, A.; Lewis, C.; Smith, J.; Woodward, A.; Dahab, M.; Pantuliano, S.; Roberts, B. An evidence review of research on health interventions in humanitarian crises. Final Report 22 November 2013. London School of Hygiene and Tropical Medicine, London, UK/Harvard School of Public Health, Cambridge, MA, USA/ODI, London, UK (2013)	3			

Schrecker L et al (2013) Delivering aid in highly insecure environments: a critical review of the literature, Humanitarian Outcomes, New York. http://r4d.dfid.gov.uk/Output/192476 (2013)	6			
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Annex 4. List of documents reviewed

Case study documents



Case study 1

- **Project Reports and documents**
 - Annual Report 2014
 - Annual Report 2015
 - Proposal for Funding
 - Monitoring Journals
 - Quarterly progress reports
 - Theory of change and evaluation strategy
 - Disaster Risk Financing and Insurance Concept Note
 - Fiscal Disaster Risk Assessment: Options for Consideration
- **Other documents**
 - Insurance Development Forum: Consultation – Autumn 2015 Update – Executive Summary

Case study 2

- CaLP (2014) Programme Name: To strengthen and disseminate evidence based guidance on the use of cash transfer programming in emergencies through support to the Cash Learning Partnership (CaLP) - Donor Report.
- DFID (2015) Cash programming in crisis situations: realising the transformative potential. DFID internal document.
- Doocy, S. and H. Tappis (2015) Cash-Based approaches in Humanitarian Emergencies: A systematic review. Johns Hopkins School of Public Health.
- ODI and CGD (2015) Doing Cash Differently: How cash transfers can transform humanitarian aid. Report of the High Level Panel on Humanitarian Cash Transfers. Overseas Development Institute and Centre for Global Development. Available from: <http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9828.pdf>
- OPM (2015) DFID Shock-Responsive Social Protection Systems Research: Inception report. Oxford Policy Management in association with ODI, CaLP, INASP.
- REFANI (2015) Research on Food Assistance for Nutritional Impact (REFANI): Literature Review. Available from: <http://www.actionagainsthunger.org/publication/2015/09/refani-literature-review>
- REFANI (2015a) Annual Report: Implementation Year One (IY1). Reporting period 1 September 2014-31 August 2015.
- REFANI (2015b) Research on Food Assistance for Nutritional Impact (REFANI): Overview on project implementation. August 2015.
- REFANI Research Uptake Strategy
- REFANI Final Inception Report
- REFANI Pakistan Study Protocol
- Sossouvi, K. (2013) E-Transfers in Emergencies: Implementation support guidelines. Cash Learning Partnership. Available from: <http://www.cashlearning.org/resources/library/390-e-transfers-in-emergencies-implementation-support-guidelines>

- CaLP (2013) Protecting Beneficiary Privacy: Principles and operational standards for the secure use of personal data in cash and e-transfer programmes. Cash Learning Partnership. Available from: <http://www.cashlearning.org/resources/library/389-protecting-beneficiary-privacy-principles-and-operational-standards-for-the-secure-use-of-personal-data-in-cash-and-e-transfer-programmes>

Case study 3

- **Grantee-level documents:**

- WHO Effectiveness and Cost-effectiveness of simplified psychological support in conflict- affected Pakistan:
 - Proposal
 - Sijbrandij, Marit et al (2015) 'Problem Management Plus (PM+) for common mental health disorders in a humanitarian setting in Pakistan: study protocol for a Randomised Control Trial (RCT)' *BMC Psychiatry* 15:232
- Enhancing Community Resilience in the Acute Aftermath of Disaster: Evaluation of a Disaster Mental Health Intervention
 - Proposal
 - Progress update (October 2014)
 - Rapid Response Grant Activation Form (November 2014)
 - Haiti Time 1/Time 2 Preliminary Data Analysis
 - Community based Disaster Mental Health Intervention 3 Day Handbook: Designed for Flood-prone communities in Nepal (2015)
 - Community based Disaster Mental Health Intervention: Curriculum manual for use with earthquake affected communities in Nepal (2015)
- Longer-term mental health, developmental and systems impact of Child Friendly Spaces in humanitarian emergencies
 - Proposal
 - 12-month interim report (April 2015)
- Ebola Response Anthropology Platform
 - Proposal
 - Interim Report (November 2014)
 - Update call February 2015
 - Martineau, F, Wilkinson, A & Parker, M (Forthcoming) 'Epistemologies of Ebola: Reflections on the experience of the Ebola Response Anthropology Platform, Forthcoming in Anthropology Quarterly
- Role of Traditional Healers in Transmission and Mitigation of the Ebola Outbreak
 - Proposal
 - Response to reviewers
 - Proposal resubmission
 - Ethics approval
 - Interim Report (November 2014)
 - Update call (August 2015)
- Development of a Social Marketing Strategy to Promote Ebola treatment- seeking behaviour in Sierra Leone
 - Proposal
 - Ethics approval
 - Final Report (May 2015)
 - Publication Strategy (March 2015)

- A database of Visual Messages from Sierra Leone (January-April 2015)
- A set of empirically-derived Ebola messages for Sierra Leone (Final Draft 2015)
- Kinsman, John (April 2015) ‘Development of a social marketing strategy to promote Ebola treatment-seeking behaviour in Sierra Leone’ Presentation to Ministry of Health Sierra Leone
- Predicting the geographic spread of Ebola virus disease in West Africa
 - Proposal
 - Interim Report (November 2014)
 - Update call (February 2015)
 - Kraemer, M.U.G., Reiner, R.C., Pigott, D.M., Smith, D.L., Tatem, A.J., Hay, S.I. and Golding, N. Predicting the geographic spread of the 2014-2015 West Africa Ebola outbreak. Target Journal: PNAS
 - <http://seeg-oxford.github.io/ebola-spread/>
- Ebola check Rapid Point-of-Need EVD Diagnostics
 - Proposal
 - Interim Report (November 2014)
 - Update call (March 2015)
- **R2HC and ELRHA documents**
 - R2HC Annual Report to DFID 2015
 - R2HC (June 2015) Power Point presentation for DFID on the Third Research Call
 - R2HC (July 2013) First Call for Proposals: Guidelines for Applicants
 - R2HC (May 2014) Second Call for Proposals: Guidelines for Applicants
 - R2HC (June 2015) Third Call for Proposals: Guidelines for Applicants
 - R2HC (2015) Third Call for Proposals: Frequently Asked Questions
 - ELRHA (October 2014) Uptake and Diffusion Guidance Note: For Projects Funded Through ELRHA
- **Other Documents**
 - Ager A et al (2014) ‘Strengthening the evidence base for health programming in humanitarian crises, SCIENCE, Special Section: Global Health, 12 September 2014, Vol. 345, Issue 6202
 - Blanchet, Karl & Roberts, Bayard (2013) An Evidence Review of Research on Health Interventions in Humanitarian Crises, London School of Hygiene and Tropical Medicine
 - Blanchet, Karl & Roberts, Bayard (2015) An Evidence Review of Research on Health Interventions in Humanitarian Crises, London School of Hygiene and Tropical Medicine
 - Curry, D, Waldman, R, Caplan, A (2014) An Ethical Framework for the Development and Review of Health Research Proposals Involving Humanitarian Contexts, Paper for R2HC
 - DFID (Last updated 2013) Research Uptake: A Guide for DFID-funded Research Programmes
 - Ramesh A, Blanchet K, Ensink JHJ, Roberts B (2015) Evidence on the Effectiveness of Water, Sanitation, and Hygiene (WASH) Interventions on Health Outcomes in Humanitarian Crises: A Systematic Review. PLoS ONE 10(9)
 - Ruby A, Knight A, Perel P, Blanchet K, Roberts B (2015) The Effectiveness of Interventions for Non-Communicable Diseases in Humanitarian Crises: A Systematic Review. PLoS ONE 10(9)
 - Smith J, Roberts B, Knight A, Gosselin R, Blanchet K (2015) A systematic literature review of the quality of evidence for injury and rehabilitation interventions in humanitarian crises. Int J Public Health. 2015 Nov ;60(7):865-72
 - SPRECHER, A. Ebola Virus Hits West Africa: Challenges, New Approaches and the Path Ahead ASTMH63rd Annual Meeting, 2014 New Orleans. “we learned the hard way that we needed to bring anthropologists in”

Case study 4

- **HESC programme reports and products:**
 - HESC inception report and annexes
 - HESC Annual report 2015
 - Calls for proposals – WASH, malnutrition, protection, shelter
 - Guidance on evidence syntheses
 - Projects proposals agreed and additional information provided- WASH, malnutrition, protection, shelter
 - WASH and outbreaks research protocol
 - WASH protocol peer review feedback
 - Acute malnutrition research protocol (draft) and peer review feedback
 - Synthesising evidence in the humanitarian field
 - HESC WHS submission

- **DFID:**
 - Original HIEP proposal approved by HIEP Management Committee-Project Title: Improving access to humanitarian evidence: research synthesis and communication for decision makers and practitioners

Case study 5

- 3D Printing, Griffith University Project documents
- ALNAP Case Studies research protocols and data tables
- ELRHA Uptake Strategy and Guidelines
- Gaza Risk Reduction, ALNAP Case Studies
- GOAL/SANERGY Fecal Sludge Management Project documents
- HIEP Annual Report 2015
- HIEP Annual Review, Innovation Cluster 2015
- HIEP Evidence Brief Innovation
- HIF Annual Review Oct 2014
- HIF Grant Application documents
- HIF Impact Strategy
- HIF Logframe Phase 2
- HIF Proposal Phase 2, Submission 2015
- HIF WASH Workstream Healthcheck, 2014
- "Strengthening the Humanitarian Innovation Ecosystem", by Ben Ramalingam, Howard Rush, John Bessant, Nick Marshall, Bill Gray, Kurt Hoffman, Simon Bayley, Ian Gray and Kim Warren, Humanitarian Innovation Ecosystem Research Project Final Report, Centre for Research in Innovation Management (CENTRIM) at the University of Brighton, funded by UK aid from the UK's Department for International Development (DFID), May 2015
http://r4d.dfid.gov.uk/pdf/outputs/Hum_Response/Humanitarian_Innovation_Ecosystem_Research_Project_FINAL_report_with_recommendations.pdf

- IFRC Menstrual Hygiene Management Project documents
- Mobile Technology, Haiti, ALNAP Case Studies
- Motivation Appropriate Wheelchairs, ALNAP Case Studies
- Refugee Innovation Report, Centre for Refugee Studies
- Translators without Borders Project documents
- Words of Relief, ALNAP Case Studies

Case study 6

● SAVE programme reports

- SAVE Initiation reports – C1, C2, C3
- C2- Preliminary findings October 2015
- SAVE Annual Report November 2015
- C1 2-pager preliminary findings July 2015
- Somalia background brief July 2015
- C3 Nairobi workshop report August 2015
- C1 Interim reports May 2015
- C2 Interim report, August 2015
- C3 Interim report, August 2015
- SAVE implementation phase November 2015
- SAVE inception report and annexes March 2014
- SAVE annual review September 2014
- Methodology Conference report, 2013

● Other

- Carter, W. Component 2: Enabling access and quality aid in insecure environments Updated literature review
- Meier, P. The Role of Technology in Mapping Humanitarian Coverage & Access Trends, Draft - December 2013
- Schrecker, L. and Harmer, A. Delivering aid in highly insecure environments; A critical review of the literature 2007-2012, February 2013
- DFID Aid in insecure environments, Proposal to HIEP Management Committee, 2013

Case study 7

● Project reports and documents

- Proposal for Funding: Working with national and local institutions to build resilience and improve disaster response
- SAVE Literature Review
- Inception Report
- Case Study Country Reports
- Synthesis Report
- Quarterly Reports
- Annual Review Reports
- Notes from Kick-Off Meeting – September 25th 2013
- Project Stakeholder Research Uptake Activity Matrix.

- Concept Note: Policy Meetings for Strategic Research on National and Local Capacity Building for Disaster Risk Management
- Concept Note – Research on the Inclusion of Gender and Diversity in Capacity Building for Disaster Risk Management
- Terms of Reference for Research Programme Advisory Group
- Terms of Reference for the Research Learning Group
- London Policy Meeting PowerPoint Presentation
- Minutes from March 2015 Research Uptake Meeting
- **Other documents**
 - Carpenter, S. (2015), Strengthening National and Local Response and Risk Management Capacity: Towards More Effective International Support and Investment.
 - DFID (n.d.), Business Case 1: Humanitarian Innovation and Evidence Programme: Improving disaster risk management through improved risk analysis and better use of national and local capacity for response.
 - IFRC (2015), Workshop on Research and Evidence Based Practice for Humanitarian Work.
 - IFRC (2015), World Disasters Report.
 - UK Government (2011), Humanitarian Emergency Response Review, foreword and p.18.

Case study 8

- MYF and Resilience Inception Report, 2014
- Ethiopia Formative draft report, 2015
- Progress reports from July 2014 – June 2015
- “Concept Note: Linking EU’s humanitarian and development interventions in the context of resilience building: The case of Ethiopia”, EU RESET Programme (2014, ECHO-DEVCO)
- “Strengthening Food Security and Nutrition Resilience in Ethiopia”, draft strategy document (2014, UNICEF-WFP-FAO)
- “Early Warning, Early Action. Mechanisms for Rapid Decision-making. Drought preparedness and response in arid and semi-arid lands of Ethiopia, Kenya, Uganda and in the East Africa Region”, Operational Research Report, (2014, IFRC, SCF, Oxfam, FAO and WFP)

Programme level documents

- HIEP Annual Review 2014
- HIEP Virtual Team Handbook
- DFID (2015) Smart Rules: Better Programme Delivery
- HIEP Influencing Strategy: Programme –level priorities’, HIEP Power Point presentation
- HIEP Logframe (November 2015)
- HIEP Delivery Plan 2015
- OPM (2015) Shock Responsive Social Protection Systems: Presentation at the DFID Humanitarian and Livelihoods Day July 2015
- Crawford, Nicholas (2015) ‘Protracted Displacement: Uncertain Paths to Self-Reliance in Exile
- Humanitarian Innovation and Evidence Programme Project Annual Review 2015: Innovation in Learning and Education in Protracted Crises
- HIEP Evidence Brief Innovation, March 2015

- **Management Committee Meetings**

- HIEP Management Committee Minutes December 2014
- HIEP Management Committee Minutes January 2015

December 2015 Meeting list of documents:

- HIEP Management Committee Agenda
- FLAG B - Current forecast for total HIEP actual spend for financial year 2015/16
- FLAG C.1 - Annex 1 to Handicap International Concept note - Copy
- FLAG C.2 - Annex 2 - Handicap International Budget - Copy
- FLAG D - Revised Moving Energy Phase 2 proposal

January 2015 Meeting list of documents:

- Meeting minutes

May 2015 Meeting list of documents:

- HIEP Management Committee Agenda
- FLAG A HIEP Progress Report
- FLAG B HIEP Financial Report April 2015
- FLAG C HIEP Risk Register.xlsx
- FLAG D HIEP Vision 2015
- FLAG E Draft HIEP Influencing Strategy and Comms Plan
- FLAG F PROGRAMME INFLUENCING PRIORITIES
- MINUTE Management Committee Meeting 14th January 2014

September 2015 Meeting list of documents

- HIEP Management Committee Agenda
- FLAG A HIEP Progress Report_Sept 2015
- FLAG B HIEP Financial Report_Sept 2015
- FLAG C HIEP Risk Register_Sept 2015
- FLAG D Moving Energy Initiative Phase 2 proposal
- FLAG E MEI Phase 1 findings summary
- FLAG F HIEP Disability Data Concept

- **DFID documents**

- HIEP Virtual Team meeting minutes - 3 Dec 2015 v1Non-DFID documents / Other
- Annual Review - Summary Sheet
- Humanitarian Emergency Response Review, 28 March 2011, Lord (Paddy) Ashdown
- Promoting innovation and evidence-based approaches to building resilience and responding to humanitarian crises: A DFID Strategy Paper, 2012
- HIEP Delivery Plan 2015
- Responding to the New Normal in the year of the World Humanitarian Summit Opportunities, risks and innovation, Humanitarian Conference Report 2015,
- Promoting innovation and evidence-based approaches to building resilience and responding to humanitarian crises: An Overview of DFID's approach, 2014

- **Gender and Social Inclusion**

- HIEP Management Committee Minutes

- HIEP Quarterly Report
 - Project Annual reports and log frame reporting
 - Brown, C. (2013) Implementing a gender audit of an online knowledge service; the experience for GDNNet. Reported commissioned by GDnet February 2013.
http://r4d.dfid.gov.uk/pdf/outputs/GDNNet/Implementing_gender_audit_for_GDNNet.pdf
downloaded November 18th 2015
 - DFID (2015) DFID Smart Rules: Better Programme Version V: effective 1st November 2015 until 31st March 2016
www.gov.uk/government/uploads/system/uploads/attachment_data/file/472771/Smart_Rules_1_November_to_31_March_2016.pdf downloaded November 2015
 - DFID (2013) Gender Annexe 2 DFID strategic vision for Girls and Women November 2013 DFID
 - DFID Research (2009) Research Programme Consortia Guidance note on Gender Mainstreaming and Social Exclusion in Research June 2009
 - Murray, N. (2014) Humanitarian Innovation and Evidence Programme: virtual team handbook Internal DFID document produced by RED August 2014
 - RED (2012) RED Gender Strategy Research and Evidence Division DFID
 - RED (2014) Draft Gender guidelines 28th February 2014 Research and Evidence Division DFID
 - UK Government (2014) The International Development Gender Equalities Act 2014
- **Value for Money**
 - 2015 annual report IFRC CB for DRM
 - Budget for CS 1 (Improving the Application of Risk Modelling for Disaster Management)
 - ESRC Learning Outcomes Annual Review 2014
 - ESRC Learning Outcomes Business case
 - HIEP annual Review 2014
 - HIEP business cases
 - HIF annual report
 - HIF budget
 - HIF Proposal
 - IFRC budget and expenditure for CB for DFM
 - R2HC budget and annual report 2014
 - SAVE annual report
 - SAVE budget
 - Selection of management committee meeting notes
- **User Output Review**
 - DFID Humanitarian Guidance Note: Cash Transfer Programming (2013) (HIEP case study 2)⁴⁴⁹;
 - DFID Humanitarian Guidance Note: Violence Against Women and Girls (VAWG) in Emergencies and Humanitarian Settings (2013) (HIEP programme level)⁴⁵⁰;

⁴⁴⁹ It is noted that the DFID staff we spoke to did not perceive this document to be a HIEP output.

⁴⁵⁰ It is noted that the DFID staff we spoke to did not perceive this document to be a HIEP output.

- Cash Learning Partnership (CaLP) E-Transfers in Emergencies: Implementation Support Guidelines (2014) (HIEP case study 2);
- Research on Food Assistance for Nutritional Impact (REFANI) Literature Review (2015) (HIEP case study 2); and
- Schrecker, L. and Harmer, A. (2013) Delivering Aid in Highly Insecure Environments: a Critical Review of the Literature, Humanitarian Outcomes (HIEP case study 6).
- World Disaster Report (2015): Focus on Local Actors, the Key to Humanitarian Effectiveness, IFRC
- Blanchet, Karl & Roberts, Bayard (2013, updated 2015) An Evidence Review of Research on Health Interventions in Humanitarian Crises, London School of Hygiene and Tropical Medicine
- Ramesh A, Blanchet K, Ensink JHJ, Roberts B (2015) Evidence on the Effectiveness of Water, Sanitation, and Hygiene (WASH) Interventions on Health Outcomes in Humanitarian Crises: A Systematic Review. PLoS ONE 10(9)
- Ruby A, Knight A, Perel P, Blanchet K, Roberts B (2015) The Effectiveness of Interventions for Non-Communicable Diseases in Humanitarian Crises: A Systematic Review. PLoS ONE 10(9)
- Smith J, Roberts B, Knight A, Gosselin R, Blanchet K (2015) A systematic literature review of the quality of evidence for injury and rehabilitation interventions in humanitarian crises. Int J Public Health. 2015 Nov ;60(7):865-72

Other

- “28th ALNAP Meeting, Washington D.C. 5-7 March 2013” Background paper, Evidence & Knowledge in Humanitarian Action, ALNAP
- “Insufficient Evidence? The quality and use of evidence in humanitarian action”, February 2014, Paul Knox Clarke, ODI, ALNAP
- “Global Forum Briefing Paper, Annexes 1-7”, ODI, ALNAP
- “Strengthening the humanity and dignity of people in crisis through knowledge and practice”, 2013, Feinstein International Center, Tufts University
- “Restoring Humanity: Global Voices calling for action: Synthesis of the Consultation Process for the World Humanitarian Summit, Executive Summary”
- “Humanitarian Innovation Ecosystem Research Project, Final Report”, May 2015, Ben Ramalingam, Howard Rush, John Bessant, Nick Marshall, Bill Gray, Kurt Hoffman, Simon Bayley, Ian Gray and Kim Warren,, University of Brighton, May 2015
http://r4d.dfid.gov.uk/pdf/outputs/Hum_Response/Humanitarian_Innovation_Ecosystem_Research_Project_FINAL_report_with_recommendations.pdf
- “Roadblocks for Humanitarian Innovation: a literature scan and problem statement” Joseph Guay, The Policy Lab and Northeastern University, unpublished.
- “Refugee Innovation Humanitarian innovation that starts with communities”, Alexander Betts, Louise Bloom, and Nina Weaver, University of Oxford, July 2015 <http://www.elrha.org/wp-content/uploads/2015/07/refugee-innovation-web-5-3mb-2.pdf>



Annex 5. List of people interviewed

HIEP Interviews

Family name	First name	Organisation
Abdisalan	Abdullahi	ECHO Somalia
Abdulaahi	Khalif	Humanitarian Outcomes
Adan	Fatuma	FAO
Adnana	Guhad	Humanitarian Outcomes
Ager	Alastair	Queens Edinburgh
Akparibo	Robert	University of Sheffield,
Alam	Naveed	World Bank, Pakistan
Allen	Claire	Evidence Aid
Ambar	Ibrahim	Concern Worldwide
Ankrom-Khan	Jenny	ACF Pakistan
Annan	Jeannie	IRC
Anshur	Abdullahi	SADO
Antwi-Boasiako	Ursula	DFID

Auerbach	Becky	SANERGY
Babister	Lizzie	Habitat for Humanity
Barrette	Helen	Canadian DFATD
Berry	Chris	DFID
Bishar	Habiba	ACF Somalia
Bloom	Louise	University of Oxford, Refugee Studies Centre
Bonamy	Stephane	ICRC
Boyd	Erin	OFDA
Brass	Jonathan	IFRC
Brinelli	Prisca	Save the children UK
Brown	Rebecca	Independent
Burnett	Alistair	DFID-DRC
Camburn	Jess	ELRHA
Carlzon	Thomas	Swedish Red Cross
Carpenter	Sam	BRCS
Chatterjee	Gautam	MSF Somalia

Chazaly	Catherine	ECHO
Chow	Jack	Oxfam
Clarke	Daniel	World Bank
Clayton	Andrew	DFID
Clements	Jill	IFRC Ethiopia
Corboz	Julienne	IFRC
Cozza	Nicola	Norwegian Refugee Council-Building Resilience Programme
Cullis	Adrian	Tufts
Dale	Natalie	Christian Aid
Daniele	Lantagne	Tufts University, Civil and Environmental Engineering
Davies	Philip	Oxford Evidentia
de Riedmatten	Anne	Swiss Permanent Mission to the UN
Doherty	Lisa	IrishAid
Douglas	Rowan	Willis Re
Durrani	Zohaib	World Bank Pakistan

Eternod	Carlos Grijalva	UCL
Farooq	Muhammad	SUPARCO, Pakistan
Fazil	Zainab	DFID Pakistan
Fenn	Bridget	REFANI
Fenton	Wendy	ODI
Few	Roger	University of East Anglia
Field	Simon	DFID
Fisher	Jessica	ELRHA
Flegg	Kris	Christian Aid
Forni	Marc	World Bank
Franché	Marc-Andre	UNDP Pakistan
Friend	Tarah	DFID
Galli	Aude	IFRC
Galvin	Melanie	UNICEF Pakistan
Gigiberia	George	IFRC Pakistan
Gilert	Heidi	DFID

Gillan	Tabi	DFID
Giraldo Ospino	Juan Pablo	UNICEF
Golden	Kate	Concern
Golding	Nick	Oxford University
Gonsalves	Atish	Humanitarian Leadership Academy
Gordon	Mark	WFP Somalia
Gray	Bill	Valid
Greenhalgh	Langdon	Global Emergency Group
Groves	Jennifer	USAID Protection & psychosocial programme
Guay	Joseph	Northeastern University, Boston / The Policy Lab
Guillemois	David	Axiom
Gul	Ahmad Ali	Pakistan Space and Upper Atmosphere Research Commission (SUPARCO)

Gunasekera	Rashmin	World Bank
Haiduwa	Dorkas	Namibian Red Cross
Hailey	Peter	What Works
Hall	Lorna	DFID Pakistan
Harmer	Adele	Humanitarian Outcomes
Harmer	Anne	ELRHA
Harvey	Nick	DFID/OCHA
Haver	Katherine	Humanitarian Outcomes
Heffnick	Johan	ECHO Ethiopia
Helyer	Will	DFID
Hennion	Camille	Humanitarian Outcomes/GPPi
Hockaday	David	START Network
Hofmann	Charles-Antoine	IFRC
Huseynov	Gorkhmaz	IFRC Pakistan

Iqbal	Rizwan	CWSA
Jackson	Rosie	CaLP
Jafari	Mahsa	UN OCHA
James	Leah	University of Colorado
Janjua	Tausif Akhtar	Micronutrient Initiative Pakistan
Jansen	Jeroen	Evidence Aid
Jimena Peroni	Maria	ACF
Jones	Rachel	Unicef-Somalia
Juillard	Helene	Independent
Julien	Mulliez	DFID
Kaufmann	Silvia	World Bank Pakistan
Kebede	Emebet	DFID Ethiopia
Kestens	Ariel	IFRC
Khan	Azmat	Pakistan Meteorological Department
Khan	Ehtisham	NDMA Pakistan

Khan	Asif	NDMA Pakistan
Khan	Haris	WB Pakistan
Khan	Hidayat Ullah	UNDP
Khin	Maung	Myanmar Red Cross
Kimani	James	DFID Advisor
King	Iain	DFID
Kinsman	John	Umea University Sweden
Kisia	James	Kenya Red Cross and head of International Centre for Humanitarian Assistance
Koopmans	Onno	Minbuza, Embassy of Netherlands
Krystalli	Roxanne	Feinstein International Center, Tufts
Kull	Daniel	World Bank
Kumar-Lilani	Ashok	ACF Pakistan
Kurbiel	Lisa	Unicef-Somalia
Lantagne	Daniele	Tufts University, Civil and Environmental Engineering
Lanyon	Andrew	Somalia Resilience

Lechiguero	Luis	"Rural Development and Food Security Section Delegation of the European Union to Ethiopia"
Lee	Nancy	Wellcome Trust
Lentz	Erin	University of Texas
Lewis	Chris	DFID
Lodi	Sarosh	Professor of NED University of Engineering and Technology, Karachi
MacKay	Kevin	World Vision
Macrae	Joanna	DFID
Mahsud	Idrees	NDMA Pakistan
Maina	Phoebe	Translators Without Borders
Majid	Nisar	Humanitarian Outcomes
Makuria	Altrena	Nutrition Embedding Evaluation Programme
Malk	Samora	DFID
Malk	Amin	FAO
Mander	Tim	UN OCHA
Marsden	Rurik	DFID

Mazurana	Dyan	Feinstein International Center, Tufts
McClure	Dan	Thoughtworks
McEnroe	Tom	DFID
McGrath	Marie	ENN
MacRoibin	Seamus	DFID Pakistan
Medhurst	Louisa	DFID Ethiopia
Meier	Patrick	i-revolutions
Meissner	Laura	OFDA
Metlo	Zubaida	REFANI
Metz	Karin	Global Disaster Preparedness Center, American Red Cross
Mitchell	John	ALNAP
Mohiddin	Lili	CaLP (former)
Moschos	Sterghios	University of Westminster
Mugambe	George	IFRC
Mukuria	Altrena	Nutrition Embedding Evaluation Programme/PATH

Mulliez	Julienne	DFID
Mulligan	Jo	DFID
Mungai	Maureen	FAO
Murphy	Caroline	DFID
Murray	Virginia	Public Health England
Murray	Sara	Mercy Corps/ELAN
Nawaz	Falak	Network of Disaster Management Practitioners
Nayani	Huma	ECHO Pakistan
Neuweiler	Chantal	FDFA, Swiss Embassy, Ethiopia
Obrecht	Alice	ALNAP
O'Brien	Clare	OPM
O'Callaghan	Sorcha	BRCS
O'Sullivan	Faye	Save the Children
O'Sullivan	Olivia	DFID
Ott	Ellie	Oxfam

Otuko	Sarah	OCHA Somalia in Nairobi
Parker	Melissa	LSHTM
Parsons	Imogen	DFID
Patricia	Colbert	WFP Rome
Perham	Stephanie	UNHCR
Perrin	Karen	OCHA
Perry	Abigail	DFID
Peters	Katie	ODI
Petras	Rebecca	Translators Without Borders
Philip	Davies	Evidentia
Porter	Chris	DFID
Prodhan	Juliette	DFID Ethiopia
Prystav	Andreas	Swiss Re
Quarterman	Lara	DFID
Reade	Alan	GOAL

Reddick	Moira	DFID (seconded to UN) Nepal
Renard	Antoine	WFP
Robert	Akpiro	University of Sheffield
Rodney	Faye	ELRHA
Roxanne	Krystalli	Tufts
Rynne	John	GOAL Ethiopia
Sadvarte	Vinay	IFRC
Sanderson	David	Norwegian University of Science and Technology
Sanghvi	Menka	HIF/SCF
Sangrasi	Murtaza	REFANI
Savage	Laura	DFID
Scott	Zoe	Oxford Policy Management
Scriven	Kim	HIF / ELRHA/ SCF
Shah	Shiraz Ali	WB Pakistan
Shaikh	Irum	Benazir Income Support Programme, Pakistan

Sharif	Abdurahman	NGO Consortium Somalia
Shields	Josephine	IFRC
Shilue	Jimmy	Platform for Dialogue and Peace Liberia
Shwartz	Zvia	REFANI
Sida	Lewis	Valid
Signer	Benedikt	World Bank
Simpson	Alanna	GFDRR
Singh	Iesha	DFID
Snoad	Nigel	Google
Steets	Julia	GPPI
Stites	Dr Elizabeth	Feinstein International Center, Tufts
Stoddard	Abby	Humanitarian Outcomes
Tang	Grace	Translators Without Borders
Tehsin	Ahsan	World Bank Pakistan
Thomies	Sofie	OCHA Somalia in Nairobi

Thomson	Anna	Sida
Timmins	Nigel	Oxfam
Trousseau	Vincent	CaLP
Truelove	Sharon	Independent
Turner	Mike	Wellcome Trust
Van Ommeren	Mark	WHO
van Wieren	Jelte	Dutch Ministry of Foreign Affairs
Vince	Jessica	DFID
Waheed	Muhammed	World Bank, Pakistan
Waites	Tim	DFID
Walker	Peter	Chatham University
Wanmali	Samir	World Food Programme, Ethiopia
Warambo	Paul	Translators Without Borders
Welton Mitchel	Courtney	Colorado University
White	Howard	Campbell Collaboration

White	Emily	World Bank
Whitney	Sophie	ECHO
Whitty	Chris	LSHTM/New CSA DoH
Williamson	Katherine	Save the children UK
Wittner	Raphael	ICRC-Somalia
Wright	Emma	DFID
Yakowenko	Ellyn	REFANI



Annex 6. List of HIEP projects

	HIEP projects DFID budget	TOTAL UK£ ⁴⁵¹	Approved Spend Totals	Total subject to Ministerial/ MC approval
1	Improving the application of risk modelling for disaster risk management - Part 1	625,000		
2	Building the evidence base on the risk to urban populations in developing countries	2,200,001		
3	Secure Access in Volatile Environments (Aid in Insecure Environments)	1,600,000		
4	Improving the evidence base on how to work with national and local authorities to improve disaster risk management.	874,363		
5	Independent evaluation for the programme	163,050		
6	Improving the application of risk modelling for disaster management - Part 2	925,000		
7	Protracted Displacement research	79,851		
	Business case sub total	6,467,265	£ 6,467,264.90	
8	Enabling the diffusion of cash-based approaches to emergencies: the role of social protection	1,000,000		
9	Protection of civilians: building the evidence base on what works (ICRC)	49,600		
10	How can insurance be used to build disaster resilience	2,100,000		
11	Impact assessment in humanitarian crisis (includes 2015 top up)	1,500,000		
12	Development of technical guide to improve humanitarian practice	22,318		
13	Independent evaluation of the programme	169,793		
14	Innovation in humanitarian response (technologies and processes): testing to proof of concept (HIF)	7,713,398		
15	Innovation of humanitarian response (technologies and processes): taking innovations to scale technical assistance	0		
16	Improving understanding of the institutional framework for delivering cash in emergencies at scale	39,489		
17	Improving the evidence base on public health in emergencies.	4,755,109		
18	Innovation in humanitarian response (technologies and processes): taking innovations to scale core grant (DIV)	571,381		
19	Preventing acute under nutrition using food and cash-based approaches	3,183,151		
20	Rigorous literature review on the evidence in emergency education	35,000		
21	Education in Emergencies phase 1	122,359		
22	Increasing access to sustainable energy for displaced people (Phase 1)	641,787		
23	Protection of civilians: building the evidence base on what works (Unicef)	17,500		
24	Education in Emergencies: Phase 2	3,949,132		

⁴⁵¹ This does not include additional funds subject to approval nor additional co-financing received directly by projects from other donors.

25	Public health in emergencies: Phase 2	4,145,473	£ 4,145,472.20	£ 5,519,197.00
26	HIF: Phase 2	3,722,243		
27	Education in Emergencies Platform	79,000		
28	Moving Energy Initiative: Phase 2	0		£ 3,000,000.00
	Business case sub total	34,016,732	£ 34,016,732.31	£ 8,519,197.00
29	Strengthening the quality and use of humanitarian evaluation (Thematic)	2,328,629		
30	Improving access to humanitarian evidence (HESC)	1,030,500		
31	Building capacity for the production and use of evidence on disaster risk management in developing countries	95,646		
32	Independent evaluation on the programme	163,154		
33	Improving the quality of data used for decision-making by the international humanitarian system (UNOCHA)	320,000		
34	South Asia humanitarian evidence mapping	100,000		
35	Disability data			750,000.00
	Business case sub total	£ 4,037,929	£ 4,037,929.00	£ 750,000.00
	HIEP Programme total	£ 44,521,926	£ 44,521,926.21	£ 9,269,197.00

Annex 7. List of HIEP outputs



Literature Reviews

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