

# Uptake and Diffusion Strategy

#### 1. Introduction

- i. This document is designed to complement other ELRHA Strategies the Partnership Strategy, the Impact Strategy and the Monitoring and Evaluation Strategy. The aims of this strategy are:
  - To describe what uptake means to ELRHA (see section 2);
  - To show how the ELRHA secretariat and core programmes approach uptake and how ELRHA expects the projects it funds to also approach it (see section 3);
- ii. ELRHA's *Uptake and Diffusion Guidelines* fit under this document and currently support two ELRHA programmes the R2HC (Research for Health in Humanitarian Crises) and the HIF (Humanitarian Innovation Fund). The Guidelines are available on the ELRHA website, and describe in more detail how projects funded under the R2HC and HIF should plan, resource, implement and monitor uptake and diffusion within their projects. Most often in literature, *research uptake* is the term used for research projects and *diffusion* is used for innovation projects that do not use a research approach; in this document, the terms are used interchangeably.

### 2. Background

- iii. A recent DFID strategy paper states that 'the right systems and incentives are not in place to ensure that evidence is available and used to inform decision-making'<sup>1</sup>. They continue by writing that currently 'it is extremely difficult for practitioners to access information about good practice in order to improve their own effectiveness...'. ELRHA seeks to change this, first by facilitating partnerships between humanitarian practitioners and researchers; and secondly, by ensuring that all ELRHA core and funded work includes effective uptake mechanisms and processes.
- iv. ELRHA is not a 'frontline' agency and is not operational in the field. It also does not fund traditional humanitarian response or direct assistance in crises. Instead, to reach beneficiaries, ELRHA seeks to impact humanitarian policy, processes and practices by providing better evidence of 'what works' and influencing behaviour and structures within the system. Uptake is critical in this aim as it is, in this sense, the mechanism through which ELRHA influences these behaviours and structures.
- v. Uptake is all the activities that facilitate and contribute to the adoption and utilisation of evidence by policy-makers, practitioners and other humanitarian actors. For ELRHA core programmes and for the Secretariat as a whole, this means that all generated evidence is taken up by partners in the

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<sup>&</sup>lt;sup>1</sup> DFID, 2013. 'Promoting innovation and evidence-based approaches to building resilience and responding to humanitarian crises', A DFID Strategy Paper

- humanitarian system and has a measurable, positive impact on humanitarian effectiveness. This implies that ELRHA can and will provide humanitarian evidence and knowledge that humanitarian stakeholders can and will access, understand, trust and apply to policy and practice.
- vi. If research uptake and diffusion fail, much of the the value of ELRHA's work can be lost. Additionally, in the wider context, if the evidence and knowledge produced is not translated into more effective practice, it can lead to questions about whether research in acute phases of crises is ethically and practically desirable; and if it is possible to successfully improve the humanitarian system through innovation.
- vii. Despite the fact that uptake is central to ELRHA's work, the mechanisms that best enable humanitarians across the globe to take up evidence are not yet completely understood. Neither research uptake nor the diffusion of innovation evidence has 'best practices' packaged for different emergencies, for different kinds of humanitarian organisations or for different sectors/clusters, languages and cultural and social norms. Therefore, this document focuses on practical considerations covering four 'strands' that will, at a minimum, allow broad and creative thinking around what kind of uptake and diffusion may be most suitable for different funded projects or core ELRHA programmes. These strands, defined by DIFD, are stakeholder engagement, capacity building, communicating and uptake monitoring and evaluation.
- viii. The ELRHA Uptake and Diffusion Guidelines detail how ELRHA funded projects can and should engage with uptake by focusing on these four strands. This document will give an overview of how these are used at a Secretariat and programme level by ELRHA.

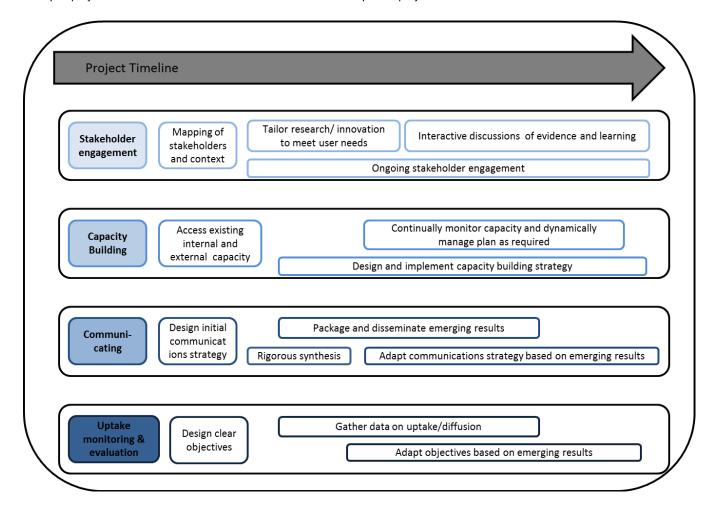
## 3. Strands of Uptake and Diffusion

x. The components of uptake, as defined by DFID, are shown in Figure 1 below.

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#### Figure 1: Strands of research uptake.

Note that while the four strands are described separately below, in reality the boundaries between them are fuzzy. Also note that while a research uptake strategy should consider all four strands, the relative importance of different strands will differ between projects. The activities shown in the diagram are illustrative. Not all activities will be carried out by all projects and other activities not shown will be carried out by some projects.



## a) Stakeholder Engagement

- xi. When seeking to influence stakeholders, powerful stories and real relationships with stakeholders are required, in addition to good evidence<sup>2</sup>. For example, some current research indicates that the successful spread of an innovation requires: priority from senior leadership; boundary-crossing intra-and inter-organisational interaction; targeted, persuasive communication; and investments in social interaction<sup>3</sup>. This means that determining who to influence, how to influence them and what specific, evidence-driven changes could be made by each humanitarian actor must be strategically determined. These considerations are important across ELRHA's programmes.
- xii. The ELRHA Secretariat has defined its stakeholders in the 2014 ELRHA Impact Strategy. These same

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<sup>&</sup>lt;sup>2</sup> STRIVE Research Programme Consortium, London School of Hygiene and Tropical Medicine, undated, 'Theory of Change' *at* strive.lshtm.ac.uk/system/files/attachments/STRIVE%20Theory%20of%20Change.pdf

<sup>&</sup>lt;sup>3</sup> Jonathan Lomas, J. 2008, 'Formalised Informality: An action plan to spread proven health innovations' *at* www.health.govt.nz/publication/formalised-informality-action-plan-spread-proven-health-innovations

audiences are used for uptake and diffusion planning. The power and impact grid of stakeholders is presented in Annexe 1.

#### b) Capacity Building

- xiv. ELRHA has one position the Senior Research Advisor to oversee and develop uptake and diffusion strategy. This person also advises project teams funded through the R2CH and the HIF an how to plan, implement and evaluate uptake or diffusion effectively. This internal capacity has proved sufficient to date, however, ELRHA would consider engaging external capacity for particular periods if required.
- xv. ELRHA also see k to address external capacity that is, the development of the capacity of key stakeholder groups to understand and engage with evidence and knowledge developed by or through ELRHA. This capacity develop is perhaps most important for humanitarian researchers and practitioners from developing countries and low resource settings. How ELRHA is and plans to be engaged in helping to build this capacity is described in the *ELRHA Partnership Strategy* and the yearly, rolling Operational Plans.

#### c) Communicating

xvi. Communication is obviously key to uptake and diffusion. A core aim of ELRHA is to increase the effectiveness of humanitarian response through partnering research and operational humanitarians. This means that ELRHA has identified a wide range of stakeholder groups, as shown in Annexe 1. Therefore, ELRHA at a minimum disseminates news, evidence and results in formats which are accessible to non-experts and non-academics, as well as those suitable for experts and specialists. ELRAH uses multiple communication paths including social media and web presence, practitioner and academic journals, and news feeds and media outlets to communicate with identified groups.

#### d) Monitoring and Evaluation

xvii. The monitoring and evaluation of research uptake needs to be just as rigorous as the M&E for the rest of ELRHA's work. Monitoring, evaluation and learning as a strategic process is outlined in the *ELRHA Monitoring, Evaluation and Learning Strategy 2014-2016.* 

# 4. Summary

- xviii. The impact which ELRHA as a whole strives to achieve is *improved effectiveness of humanitarian* action. To reach beneficiaries, ELRHA seeks to impact humanitarian policy, processes and practices by providing better evidence of 'what works' and influencing behaviour and structures within its areas of influence. Uptake mechanisms are key to this influence.
- xix. All projects funded through ELRHA's R2HC and HIF Programmes must plan for and resource adequate uptake. At the same time, the ELRHA Secretariat will continue to engage stakeholders, build its own uptake capacity, continue to prioritise communication management and effectively roll uptake outcomes and outputs into its' set of cascading log frames.

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#### Annexe 1

Influence of stakeholder

Each stakeholder is linked to impact outcomes as an audience, a partner or an influence. Which category of these they fall into fro ELRHA is described in Figure A1.

#### Figure A1: Stakeholder Mapping

1. Meet their needs 2. Key player Research Councils; Academic and research institutions; Humanitarian organisations including Donors- other; NGOs, RC/RC movement and UN; Regional Government Groups; Humanitarian staff and volunteers; National governments; Humanitarian training providers; Professional humanitarian networks and associations; Donors- ELRHA; Private sector. 3. Keep informed 4. Show consideration Local governments; Partner agencies; Academic media; Communities affected by crises; Humanitarian media. Students and aspiring humanitarians; Donor governments;

Interest (relevance) of stakeholder

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