

UPTAKE AND DIFFUSION GUIDANCE NOTE:
FOR PROJECTS FUNDED THROUGH ELRHA
OCTOBER 2014

INTRODUCTION

Elrha requires that all grantees carefully consider uptake or diffusion as a critical part of their project. These guidelines have been developed to support grantees to design clear and achievable uptake or diffusion plans for their projects. These guidelines will also be useful for projects that will not usually make a separate uptake plan (for example, grantees under the HIF small grants facility), but will need to explicitly include uptake or diffusion in their project planning documents and their reporting.

These guidelines are adapted from the *Research Uptake Guidance* written by DFID (the UK Department for International Development) in May 2013.

These guidelines are for the use of teams funded by the R2HC (Research for Health in Humanitarian Crises) programme, and the HIF (Humanitarian Innovation Fund)¹. This document is complemented by Elrha's *Uptake and Diffusion Strategy*, which is available on Elrha's website. Most often, *uptake* is the term used for research projects and *diffusion* is used for innovation; in this document, the terms are used interchangeably.

Uptake and diffusion include *all the activities that facilitate and contribute to the adoption and utilisation of evidence by researchers, practitioners and other humanitarian actors.*

For Elrha, it is key that all funded work aims to have measurable, positive impact on humanitarian effectiveness; this means that all research and innovation should be designed so that humanitarian stakeholders can and will access the evidence produced, understand it, trust it and be able to apply it to policy and practice. It is also important that, when possible, affected populations, local actors and beneficiaries are also engaged, to enable them to adopt evidence and innovations that may benefit their own recovery from crisis.

The importance of uptake and diffusion is growing in the humanitarian field. This is because international organisations, agencies and donors increasingly require projects to *demonstrate the impact* of their research or innovations in order to fuel *evidence-based humanitarian responses* and create better value for money. Uptake is a link between producing evidence and results, and having an impact on the humanitarian system. Uptake and diffusion activities interact with processes including learning, monitoring and evaluation, and impact evaluation. A simple work flow emphasising this link could be represented by Figure 1. However, different projects – particularly innovation projects that can be dynamic, with high levels of within-project learning and ongoing adaptations – may not always fit these steps.

¹ See www.elrha.org for a description of these programmes.

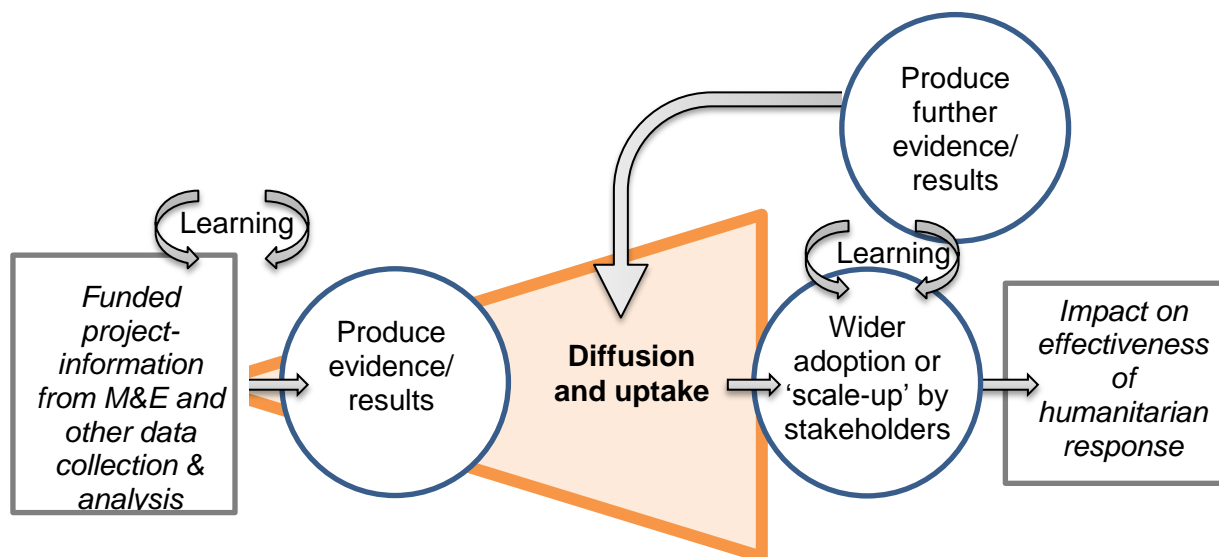


Figure 1: Simple workflow emphasising diffusion and uptake. The orange shape indicates that diffusion and uptake activities need to start at the beginning of a project and be ongoing.

In Appendix 2, there are links to resources and tools that can be used to design and implement research uptake and diffusion plans. Appendix 3 shows some actions and a potential outline that can be used to complete a logframe (logical framework) or uptake plan, although all of these ideas will not suit all projects.

There is no set amount of money that Elrha requires projects to allocate to uptake. However, it is important that the budget of each funded project reflects the need to resource uptake and diffusion creatively and effectively.

STRANDS OF UPTAKE AND DIFFUSION

DFID have broken research uptake down into four strands, as shown in Figure 2. These are: stakeholder engagement, capacity building, communication, and the monitoring and evaluation of uptake. These strands are also useful to consider for projects that are not research based; for example, a practical innovation project or field-based pilots.

Tools, discussions and evidence for many aspects of these strands are available in academic and working papers. Many of these resources are listed in Appendix 2 and Appendix 3. If grantees are unable to move forward for any reason with these strands of research uptake, they are encouraged to contact their HIF or R2HC Programme Manager for further advice.

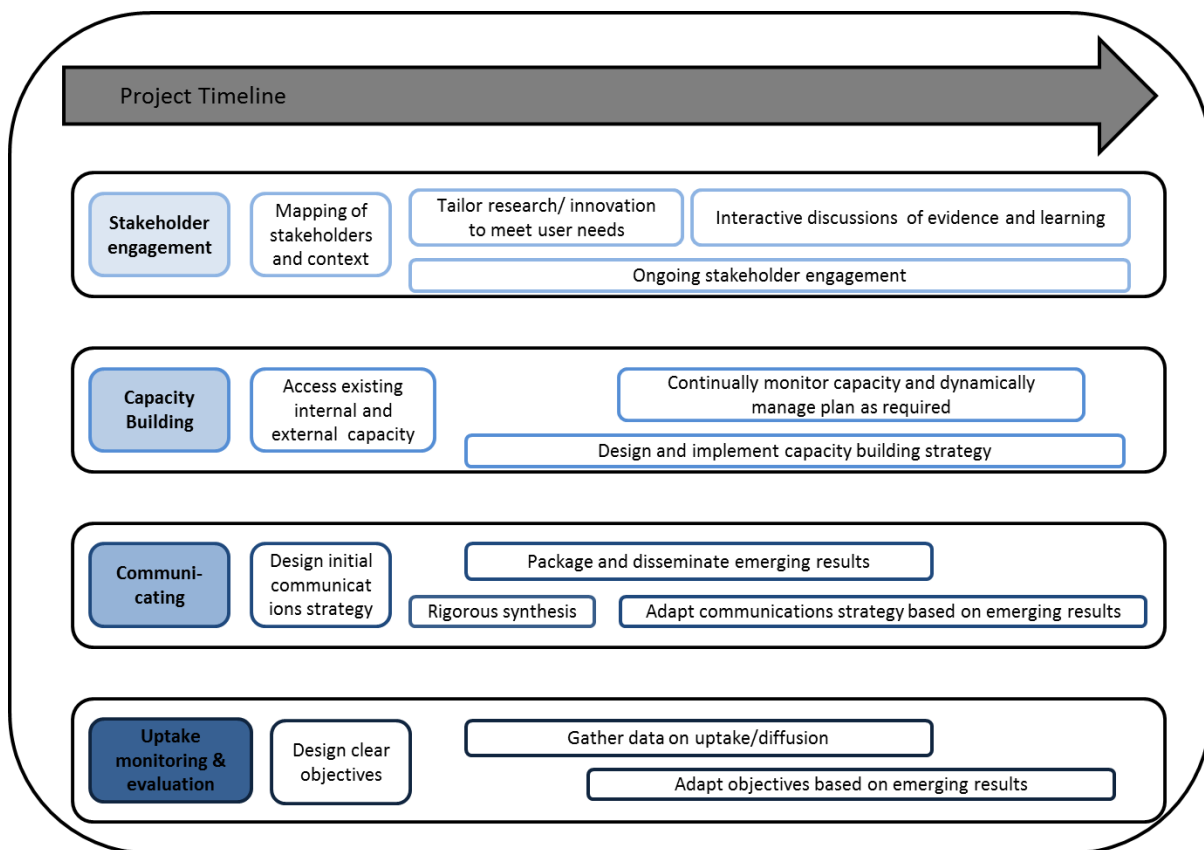


Figure 1: Strands of research uptake. Note that while the four strands are described separately, in reality the boundaries between them are fuzzy. While an uptake strategy should consider all four strands, the relative importance of different strands will differ between projects. Not all of the activities illustrated will be carried out by all projects, and other activities not shown will be important for some projects.

1. STAKEHOLDER ENGAGEMENT

When seeking to influence stakeholders, powerful stories and real relationships with stakeholders are required, in addition to good evidence². 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 interaction³. This means that determining who to influence, how to influence them and what specific, evidence-driven changes could be made by each humanitarian actor is not an ad-hoc activity that can be done at the end of a project. These considerations must inform the design of the project from the beginning.

MAPPING OF STAKEHOLDERS AND CONTEXT

When a project starts, the end results and evidence are obviously unknown. However, it is necessary to map stakeholders relevant to the key research and innovation theme(s) from

² STRIVE Research Programme Consortium, London School of Hygiene and Tropical Medicine: Theory of Change at strive.lshtm.ac.uk/system/files/attachments/STRIVE%20Theory%20of%20Change.pdf

³ 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

the beginning, so that it is clear who the project aims to benefit and who it aims to influence. Simple tools for stakeholder mapping are summarised [here](#), and in Appendix 2.

The ‘humanitarian system’ could be identified as a key diffusion audience for Elrha. However, this system is not a homogeneous body. Ideally, grantees will recognise and engage with official stakeholders, where they exist. These will be humanitarian knowledge brokers including those working under the IASC ([Inter-Agency Standing Committee](#)) and [Cluster](#) coordination mechanisms; local government offices; and national government institutions. Other humanitarian stakeholders can include international NGOs, local NGOs, community based organisations (CBOs), United Nations agencies, the Red Cross/Red Crescent movement, academic institutions, research think-tanks, and inter-governmental bodies. In some humanitarian contexts, key stakeholders will be religious leaders or institutions, private companies, small businesses, military and militia groups.

When mapping stakeholders, it is most useful to identify individuals as well as institutions, key groups, structures and processes. In this way, the need to design different engagement approaches for different stakeholder groups will become apparent. Projects funded by Elrha must proactively plan, resource and implement an uptake or diffusion plan with this in mind.

TAILORING RESEARCH OR PROJECT DESIGN TO NEEDS OF STAKEHOLDERS

A project can be designed to produce specific evidence that fills the priority gaps and most urgent needs of a particular stakeholder group. For example, there may be an urgent humanitarian problem in a particular context, and active research could produce evidence on which solutions will work most effectively. In other cases, grantees may aim to produce evidence to influence stakeholders –particularly leaders or decision makers- to prioritise humanitarian needs that they, for whatever reason, have not addressed. In both cases, it is vital from the beginning to consult with all relevant stakeholders, who may include decision-makers, field practitioners, in-country policy makers and affected populations. If the innovation or the research project does not successfully address the real causes and conditions of the humanitarian need and the need of stakeholders, then any final evidence or results will not be influential or effective.

ON-GOING ENGAGEMENT

Once project implementation has begun, decision-makers, operational agencies, affected communities and other stakeholders can often be neglected until the evidence is ready to be communicated. However, ideally engagement should be maintained with different stakeholders throughout the life of the project. This allows key audiences to continuously advise on implementation, ensuring that challenges do not become problems, which is particularly important in insecure locations. It also maintains their ongoing awareness of the research, so that they are more likely to champion the final results.

Grantees can engage with stakeholders by, for example, inviting them to sit on a project advisory team or asking them to attend periodic interactive information sessions. If a project is ongoing during a humanitarian response phase, grantees can attend cluster meetings, share information in standard formats, sit on government panels or join NGO networks. Social media can also be used to remain engaged with stakeholders.

It may be particularly important for some projects to engage with affected populations. There are very few publications describing how beneficiaries of humanitarian relief use knowledge and evidence for their own response and recovery⁴, but it is an issue worthy of consideration

⁴ van der Haar, G., Heijmans A., and Hilhorst, D. 2013. Interactive research and the construction of knowledge in conflict-affected settings in *Disasters*, 37(S1): S20–S35

from all researchers and innovators. Additionally, there are ethical reasons that should encourage interaction and information sharing with affected communities. This may be particularly the case for R2HC projects that adopt members of an affected population as subjects or patients of their health research.

For some projects, there are simple questions that may guide more engagement with local people, which may in turn produce results that are more effectively taken up by a wider range of stakeholders. These include⁵:

- Are local knowledge and customs incorporated into project planning and design?
- Does the diffusion or uptake plan flag the need for information products or reports aimed at the people directly affected by the project results?
- Do project activities enhance a local capacity to understand and utilise the information products resulting from the project?
- Is the authorship of any academic publications balanced?

The timescales of humanitarian response are a particular challenge to ongoing engagement. In acute phases, time frames are short and the focus is on saving lives, so that even contacting stakeholders is often difficult. Delaying a project until stakeholders are free is not realistic. Nevertheless, if stakeholder engagement is not prioritised from the beginning, evidence may ultimately fail to be recognised and used, and the project will fail to impact upon practice or influence policy.

EVIDENCE AND LEARNING

Learning from evidence is important whether an innovation succeeded or failed, or whether the research results were expected or unexpected.

Learning can include organisational and individual learning, and can be undertaken in many ways, with the caveat being that it is important that dissemination activities effectively impact the key stakeholders that have been identified. Learning requires a proactive approach, and some resources on this subject are presented in Appendix 2 .

2. CAPACITY BUILDING

Capacity building for uptake and diffusion can refer to grantees and their project teams, or the stakeholders that they aim to influence.

ASSESSING EXISTING CAPACITY

A capacity for uptake may include the knowledge, skills and attitudes needed to access, synthesise, use and communicate project results, outcomes and evidence. Researchers and innovation specialists may be outside their area of expertise with regards to this, perhaps particularly when it comes to designing an effective uptake plan. At an early stage, there should be an assessment of capacity both internally (i.e. within the project team) and externally (for example, for consultants or expert partners).

An assessment of the capacity of different stakeholder groups to uptake evidence may also need to be considered. Some recent reports suggest that even when information is available, decision makers in humanitarian contexts may not take it up due to a range of reasons that start with not knowing the evidence exists, but may also include a lack of understanding of

⁵ Costello, A. and Zumla, A., 2000. Moving to Research Partnerships in Developing Countries. *British Journal of Medicine*, 321(7264): 827-829

how to translate it – that is, how to interpret the evidence and apply it. From the beginning, grantees should understand the capacities of their key audiences in order to better influence them.

CAPACITY DEVELOPMENT

When capacity has been assessed, there may be a need to build or develop it. It is important to note that capacity development does not equate only to training; capacity building activities need to be tailored, well planned and relevant.

Supporting learning and development can be a specialised skill and external expertise may need to be drawn on. In a circular fashion, the first step might be to consider the capacity that is available to design and implement capacity building processes.

There is a large amount of information relevant to capacity building and development in low and middle income country projects. Some of these resources are listed in Appendix 2.

3. COMMUNICATING

Communication is obviously key to uptake and diffusion, and when a project is funded by Elrha the principle or team leader will receive an Elrha communication information pack. This pack outlines the obligations and the opportunities for communications that come with the funding. It includes guidelines on blogging, media interaction, photography which should be used for general communications as well as communications of uptake and diffusion. This pack can be requested by anyone who would like to use the information to guide their application.

In addition to these guidelines, there are aspects to planning effective communication which may also benefit from expert input.

Clearly it is not possible to decide what messages will be communicated before the project is completed. However, communication activities such as publishing in peer reviewed journals, running community meetings or timetabling government briefings need to be included at a project design stage, so that they are properly prioritised and resourced. At initial stages it is also useful to begin identifying 'windows', when stakeholders may be particularly interested in discussing project evidence and implications.

SYNTHESIS OF EVIDENCE AND RESULTS

A core aim of Elrha is to increase the effectiveness of humanitarian response, and to partner research and operational humanitarians. Therefore, it is usually necessary for grantees to synthesise evidence and results in styles and formats that are accessible to non-experts and non-academics, as well as those suitable for experts and specialists.

4. MONITORING AND EVALUATION

The monitoring and evaluation of uptake and diffusion needs to be just as rigorous as the M&E of the rest of a project. M&E usually begins at the start of the project; it is not enough to try to pull it together at the end. Monitoring and evaluation activities are similar to communication activities in that they often scale up at the end or after the end of a project, but must begin when the project begins.

MONITORING

All grantees are encouraged to design a set of key indicators, targets, milestones and

outcomes or impacts for uptake or diffusion. These should then be incorporated into project planning documents; traditionally, logframes (logical framework), workplans, or theory of change diagrams. These indicators and targets would then be monitored to measure uptake or diffusion progress and effectiveness.

It is important to choose outcomes and impacts which can be realistically achieved by the project. The ultimate impact of uptake and diffusion may be positive changes of behaviour in a community, changes in the conceptual understanding of partners and peers, changes in policy and so on. However, impacts like these can be very difficult to measure or monitor, and grantees must understand what kinds of changes they could be accountable for and which results they want to report on.

EVALUATION

Demonstrating the success of uptake and diffusion through outcomes and impacts can be difficult, not least because the uptake of research and the implementation of an innovation can take place some months or years after the Elrha funded project has been completed. Anticipated results may not occur due to factors outside the control of the project team, while unexpected effects are common in humanitarian contexts. Even when changes in policy or practice happen, they can be difficult to measure and the cause(s) of change can be hard to attribute.

Nevertheless, it is important to evaluate the impact of uptake and diffusion as far as possible, in order better to understand how and when real evidence contributes to humanitarian response, and to account for all project achievements.

SUMMARY

Elrha requires that all funded projects carefully consider uptake or diffusion as a critical part of their project. Plans do not have to be complex or long, but they do need to be clear and comprehensive. If help or support is needed, please do not hesitate to contact the HIF or R2HC programme manager.

APPENDIX 1: DFID RESEARCH UPTAKE CHECKLIST

The table below can be used to review uptake and diffusion strategies produced at the outset of the project and to review progress with uptake throughout the project. Please note that these are items to consider when reviewing uptake and diffusion, rather than requirements; it is not expected that all projects answer yes to all questions, and some questions will not be relevant at all stages of the project implementation. An editable version of this table can be found [here](#).

Question	Y	Comments
Stakeholder engagement		
Is there a plan to map relevant stakeholders?		
Will the research design take into consideration the needs of end users and affected populations?		
Are there plans for on-going engagement with stakeholders throughout the programme?		
Are there plans to facilitate evidence-informed discussions?		
Capacity Building		
Will an assessment of internal capacity to carry out and communicate research be done?		
Will an assessment of external capacity to make use of research results be done?		
Is the mix of capacity building approaches proposed appropriate?		
Does the programme team have the capacity to implement their capacity building strategy?		
Communicating		
Are there plans to carry out research synthesis during the inception phase and/or later?		
Is the programme team aware of DFID's open and enhanced access policy?		
Will outputs be published in peer review journals?		
Is there a plan to package and communicate findings to non-specialist audiences?		
Monitoring and Evaluation		
Is research uptake appropriately reflected in the <u>looframe</u> ?		
Is there a strategy for gathering and recording data on research uptake?		
Is there an appropriate evaluation strategy?		
Are there sufficient resources allocated to monitoring and evaluation?		
Is there a strategy for sharing learning on research uptake?		

APPENDIX 2: FURTHER INFORMATION AND GUIDANCE

ELRHA RESOURCES

Humanitarian Innovation Fund

<http://www.humanitarianinnovation.org/>

Research for Health in Humanitarian Crises

<http://www.elrha.org/work/r2hc>

GENERAL GUIDANCE AND RESOURCES

NESTA DIY (Development Impact and You) Toolkit

diytoolkit.org/

ODI (Overseas Development Institute): Research and Policy in Development Programme

Tools for Knowledge and Learning: A Guide for Development and Humanitarian Organisations

<http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/188.pdf>

<http://www.odi.org.uk/programmes/rapid>

<http://www.odi.org/publications/5257-stakeholder-analysis>

Review of DFID's use of theories of change

http://www.dfid.gov.uk/r4d/pdf/outputs/mis_spc/DFID_ToC_Review_VogelV7.pdf

DFID guidance note on capacity building

<https://www.gov.uk/government/publications/how-to-note-capacity-building-in-research>

DFID How-to note on appraising evidence

<https://www.gov.uk/government/publications/how-to-note-assessing-the-strength-of-evidence>

DFID-funded examples of research-uptake programmes

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/199850/EiA_programme_document.pdf

The Emergency Capacity Building Project, tools and lessons learned

<http://www.ecbproject.org/resources/library/426-ecb-project-learning-event---afternoon-session>

ALNAP – capacity development and communications guidance

<http://www.alnap.org/resources/>

Research to Action website

Contains a range of tools and resources related to research uptake.

<http://www.researchtoaction.org/>

Registry of Methods and Tools

The Canadian National Collaborating Centre for Methods and Tools provides tools for knowledge translation, diffusion and uptake, such as critical appraisal tools and guidelines for communicating research. There is a focus on public health but the tools can be relevant for other fields.

<http://www.nccmt.ca/registry/browse/all/1/view-eng.html>

Research Communications

A special issue of the Institute for Development Studies Bulletin focusing on research communication.

<http://onlinelibrary.wiley.com/doi/10.1111/idsb.2012.43.issue-5/issuetoc>

Evidence for decision making

James Darcy, Heather Stobaugh, Peter Walker, and Dan Maxwell, 2013, *The Use of Evidence in Humanitarian Decision Making* ACAPS Operational Learning Paper, Feinstein International Centre www.alnap.org/resource/8003

Introduction to stakeholder engagement

<http://www.researchtoaction.org/2014/02/introduction-to-stakeholder-engagement/>

DEFINING OUTCOMES AND IMPACTS

Knowledge to Policy

A freely downloadable book summarising various case studies on policy impact achieved by International Development Research Centre-funded research. The introduction provides a useful conceptual framework for categorising 'Impact'

<http://www.idrc.ca/EN/Resources/Publications/Pages/IDRCBookDetails.aspx?PublicationID=70>

London School of Hygiene and Tropical Medicine

A theory of change approach to research uptake (example)

<http://resyst.lshtm.ac.uk/sites/resyst.lshtm.ac.uk/files/docs/reseources/TOCposter.pdf>

UKCDS Evaluation of Research Impact page

This page summarises a workshop on evaluating research impact hosted by UKCDS, DFID and IDRC

http://www.ukcds.org.uk/page-Research_Impact_Evaluation-195.html

Economic and Social Research Council Impact Toolkit

A useful toolkit to help in tracking and capturing the impact of research.

<http://www.esrc.ac.uk/funding-and-guidance/tools-and-resources/impact-toolkit/index.aspx>

They also have a collection of impact case studies here.

<http://www.esrc.ac.uk/impacts-and-findings/features-casestudies/index.aspx>

LEARNING

ALNAP

Organisational and Institutional Learning in the Humanitarian Sector: Opening the Dialogue - A discussion paper for ALNAP

www.alnap.org/pdfs/other_studies/kvblearn.pdf

Capacity.org: Organisational learning for aid, and learning aid organisations

<http://www.capacity.org/capacity/opencms/en/topics/learning/organisational-learning-for-aid-and-learning-aid-organisations.html>

Europe Aid

Study on the uptake of learning from EuropeAid's strategic evaluations into development policy and practice, June 2014. This study shows the translation of knowledge from strategic evaluations into EU development policy and practice. From this evidence, recommendations are made to strengthen uptake.

https://ec.europa.eu/europeaid/sites/devco/files/uptake-study-main-report-2013-317962_en.pdf

INTRAC: Monitoring and Evaluating Learning Networks

<http://www.intrac.org/resources.php?action=resource&id=679>

APPENDIX 3: EXAMPLE ACTIVITIES

The table below addresses two random questions from the checklist in Appendix 1, and provides some examples of uptake and diffusion tools and activities.

Checklist question: Is there a plan to map relevant stakeholders?		
Outcome	Guidance/Tools examples	Activities
1. All stakeholders mapped and categorised into (at a minimum) primary and secondary audiences	NESTA's Evidence Planning Tool - diytoolkit.org/tools/evidence-planning-2/	1.1 Gather/virtually meet project team to clarify problem, context and planned solutions/ innovations/research question clearly.
	ODI Planning Tools: Stakeholder Analysis - www.odi.org/publications/5257-stakeholder-analysis	1.2. With project team, brainstorm all the stakeholders or interest groups associated with the project aims as defined in activity 1.1. As a beginning, consider all stakeholders in the public sector, private sector and civil society.
	Rowan University Toolkit for Conducting Focus Groups (for research projects) www.rowan.edu/colleges/chs/facultystaff/focusgrouptoolkit.pdf	1.3. In-country, nominate one implementing partner or local contact at each project location to bring together a focus group of local/affected population/research participant representatives. If necessary, provide capacity building or guidance for the partner to run a focus group discussion.
	NESTA's People & Connections Map - diytoolkit.org/tools/people-connections-map/	1.4 In-country, using the project aims defined in Activity 1, use the focus group to brainstorm a map of all relevant stakeholders from their perspective.
	Interest and power grid - www.foodsec.org/fileadmin/user_upload/eufao-fsi4dm/docs/PG_StakeHolder.pdf Other tools (page 2) - www.researchtoaction.org/live/wp-content/uploads/2014/02/Introduction-to-Stakeholder-Engagement.pdf	1.5. Use an interest and power grid or another tool to categorise both lists of stakeholders into primary and secondary (and, if necessary, other) audiences.
2. High priority stakeholders characterised relevant to aims of project	NESTA's Target Group Tool - diytoolkit.org/tools/target-group/	2.1. Describe or characterise each stakeholder group according to project needs and priorities

Checklist question: Is research uptake appropriately reflected in the logframe?

Outcome	Guidance/Tools examples	Activities
<p>All uptake objectives, targets etc. are tracked accurately using suitable monitoring methods</p>	<p><i>Research projects:</i> IDS Practice Paper: Learning about Theories of Change for the Monitoring and Evaluation of Research Uptake www.alnap.org/resource/9787</p> <p><i>All projects:</i> NESTA's Theory of Change Tool - diytoolkit.org/tools/theory-of-change/</p> <p><i>All projects:</i> Logframes betterevaluation.org/evaluation-options/logframe</p>	<p>1.1 Create a logframe, theory of change, and/or other frameworks that details planned uptake or diffusion impacts and outcomes. ALTERNATIVELY, ensure that uptake impacts, outcomes etc. are included in your existing project frameworks. An example of an uptake impact statement could be to <i>have the health innovation included in the International Federation of the Red Cross Emergency items catalogue</i>. A related outcome could be to <i>formally engage one senior staff member from IFRC in Geneva to be the innovation champion</i>.</p>
	<p>See resources in Appendix 2</p>	<p>1.2 If you are not a diffusion expert, allocate time and resources to investigating different potential activities, outputs and methods – for example, building learning networks, linking with communities of practice, facilitating workshops for key stakeholders etc. Be creative!</p>
	<p>Standard response indicators: www.humanitarianresponse.info/applications/ir</p> <p>Research logframes by DFID: www.gov.uk/government/uploads/system/uploads/attachment_data/file/209569/Logframe_guidance_for_research_programmes_Final_PDF_version.pdf</p>	<p>1.3. Using the project framework, choose indicators and targets that allow the measurement of the uptake activities chosen in 1.2. Ensure that contractual obligations are met – for example, R2HC projects should result in publications in peer reviewed journals. A measurable output target could be to <i>present evidence on the innovation to all senior management of the (in-country) Red Cross and Red Crescent National Society before 1 January</i>.</p>
		<p>1.4. Decide how often diffusion indicators will be measured – that is, when monitoring data will be collected. These will allow the creation of milestones. Diffusion data may simply be collected when other project monitoring occurs; however, consider whether diffusion data could be collected after the project has finished.</p>