

HIF Endline Evaluation

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Annex 1. Evaluation framework

Eval	uation question	Evaluation sub-questions	Methods			
Test	Testing the Elrha Theory of Change - the 4D's approach⁵					
1.	What impact and outcomes is the HIF generating?	 1.1 What outcomes has the HIF generated at different levels¹ and across the 4Ds and TOC focus areas³? 1.2 What unintended or unexpected outcomes has the HIF generated? 1.3 To what extent does the HIF's strategy² support the HIF in achieving the identified outcomes? 1.4 To what extent have funded innovations continued to operate, been adopted, and scaled? 	 This question will be answered through analysis of all data collected but specifically: Develop focus area TOCs to understand anticipated change and progress towards change for each of the focus areas. Outcome harvesting with current grantees, past grantees and local actors. Review of the TOC following the endline - mapping of outcomes harvested against the TOCs developed. Review outcomes against the HIF's strategy Analysis of monitoring and evaluation data for funded innovations Illustrative case studies to provide examples of change and HIF contribution. KIIs and surveys 			
2.	What is the value for money generated by the HIF?	2.1 What value is being generated by the HIF?2.2 How is the HIF investing its financial resources and which areas are worth the investment?2.3 What does the HIF need to do differently in the future?2.4 How is VfM affected by the level of risk the HIF takes?	 This question aims to assess the HIF's value for money. It will draw on analysis from all data collected, but with a focus on: Survey and KIIs with local actors and grantees on the value of the HIF. Desk based review of financial data and clustering of data against the 4Ds Outcome harvesting KIIs with a variety of stakeholders able to assess the value of the HIF from different perspectives (innovation funders, HIF staff, other humanitarian actors, reps of committee involved in the HIF, etc.) 			
3.	How do activities implemented	Define	This question aims to assess how the activities implemented contribute to the			

Evaluation question	Evaluation sub-questions	Methods
within the 4Ds contribute to the outcomes identified?	 3.1 How does the HIF use problem-definition to guide its work? 3.2 Who is involved in problem definition? To what extent are problems defined by crisis affected people? Develop 3.3 How does the HIF use grant-making (particularly the challenge approach) to guide its work? 3.4 Who are the HIF's partners and how are they engaged in delivering outcomes? To what extent are partnerships inclusive and how does the HIF manage power dynamics? 3.5 Who receives funding? To what extent is funding accessible to grantees from countries affected by humanitarian crisis⁶? 3.6 What non-financial support is most valuable to grantees and partners and why? Distil 3.7 What is the uptake of the HIF's resources? Who uses them and how? Drive 3.8 How does the HIF co-ordinate, share learning with, and influence the humanitarian sector? 	 outcomes across the six focus areas³. It will draw on analysis of all data collected but specifically focus on: Outcome harvesting with past and present grantees and local actors Desk-based review of internal data collected and other commissioned work Analysis of monitoring and evaluation data for funded innovations Grantees surveys KIIs with a diverse range of stakeholders (ensuring inclusive and gender representation) Illustrative case studies to provide examples of change and HIF contribution

Adaptive management, strategic decision-making and learning					
4. How effective the HIF at learning and adapting?	 is 4.1 How does the HIF make decisions about its strategy, funding, support and research and who is included? 4.2 How do VfM considerations inform decisions on strategy, funding, support and research? 4.3 How does internal (both across Elrha and within the HIF team) and external learning inform decisions and adaptation? How is the HIF learning from local initiatives to inform its broader work? 4.4 How did the changes in the HIF team contribute (positively or negatively) to the HIF's strategic decision-making? 4.5 How has the HIF responded to external funding trends? 4.6 How has the HIF responded to contextual events such as Covid-19, the Afghanistan and Ukraine crisis, and the Black Lives Matter movement? 	 This question aims to explore how the HIF learns, takes decisions and adapts through: KIIs with Elrha staff and senior leaders (including the HIF and Elrha governance body representatives) Analysis of critical turning points for the HIF Document review 			
5. How does the HIF support it partners and grantees to le and adapt?	s learning and how is that learning captured?	 This question focuses on how the HIF support learning and adaptive management with partners and grantees through: Grantee and local actor survey KIIs with a diverse range of partners and grantees 			
6. How does the HIF navigate risk⁴?	6.1 What are the main risks that the HIF is managing? Which of these are managed for its donors?	To explore risk and de-risking innovations for funders through: • KIIs with Elrha staff and reps of committees to explore approach to			

	6.2 How does the HIF manage these risks in an ethical way?6.3 What risks do grantees face and how does the HIF reduce or support grantees to mitigate these?	 risk taking and application of ethical considerations KIIs with other key stakeholders to explore and benchmark pros and cons of approaches to risk. KIIs with grantees to explore their perceptions on risk and the HIF's support
The value generated by t	he HIF within the humanitarian innov	ation ecosystem
7. What is the HIF's contribution to the sector?	 7.1 How does the HIF contribute to the sector in each focus area? 7.2 Do the HIF's partnerships contribute to its influence in the sector? 7.3 How does the HIF's differ from other humanitarian innovation funders and what are the unique contributions it makes? How is it perceived by others? 	 This question focuses on exploring the HIF's value within the wider humanitarian ecosystem through: A survey of humanitarian actors on the value of the HIF across the sector and how it differs from other innovation funders KIIs to follow up with a selected number of humanitarian actors Coordination with the GPE Light-touch comparative study, including consultations with other peer organisations (humanitarian innovation funding bodies).

Definitions used in the evaluation framework

(1) The **levels** being explored are:

- project
- focus area
- programme
- ecosystem

(2) The **strategy** refers to the HIF's 2018-2020 Programme Strategy, which covers:

- End to end solutions
- New partnerships
- Local engagement
- Bigger problems
- Innovation ecosystem change
- Creating tools

(3) The six **focus areas** are:

- DOAI
- GBV

- WASH
- Scale
- Locally-led innovation
- Skills building

(4) The **risks** include project-level risks and organisational-level risks defined in the <u>HI Guide</u>.

(5) The **4Ds** are four interacting streams of activity through which the HIF aims to achieve change:

- **Define:** Identify gaps in research and innovation by working with partners to identify, map and prioritise problems
- **Develop:** Fund and support projects by developing programmes to explore identified priority problems
- Distil: 'what works' by synthesising evidence from programmes and developing tools and guidance
- **Drive:** Advocate for and drive adoption of 'what works' by collaborating with strategic partners and influencers to adopt and scale up 'what works'

(6) Four types of **value** were defined in the inception report:

- **Scale:** that the innovations funded and supported by the HIF are able to maximise their potential, addressing the extent of the problem they aim to solve;
- Learning: that the work of the HIF is generating learning around innovation management and innovation uptake within the HIF and across the sector.
- **Relevance:** that the resources produced and the innovations funded and supported are appropriate for and respond to the most significant problems in the humanitarian sector;
- **Responsibility:** that the HIF takes an ethical approach, seeking to do no harm and paying close attention to considerations of who benefits, inclusion, equity and power dynamics in all areas of its work.

Annex 2. Nested theories of change

WASH

Problem statement

- The effectiveness of humanitarian WASH interventions is limited by the lack of evidence-based innovative solutions to priority problems.
- Key WASH agencies and field practitioners do not have sufficient incentives and guidance to explore, test and adopt new solutions that do exist.

Focus Area Theory of Change statement

If innovators develop evidence and practical guidance on how to adapt their innovations and key WASH actors incentivise Key WASH agencies to use this, then WASH field practitioners will adopt more effective WASH solutions and adapt them to different contexts in an ethical and impactful way.

This focus area is driving to understand the best solutions to pressing WASH problems, and how to develop and disseminate evidence that WASH agencies can and will use to adopt the best solutions across the sector.

The focus area team will work with a technical working group to better understand the most pressing WASH problems. They work directly with grantees that propose solutions to these problems, supporting them with funding and a multidisciplinary mentoring team to ensure that solutions are developed to suit the humanitarian system and context. Throughout the process the focus area will aim to build an evidence base on what works, provide M&E support to grantees and compile evidence in a format that is relevant to the needs of key WASH agencies. At the same time, the focus area will work with the international WASH sector to influence their organisational processes and policies to incentivise key WASH agencies to engage more systematically with new research and solutions. The international WASH sector will disseminate new research to key WASH agencies, and key WASH agencies will support field practitioners to test and adapt new solutions.

Change will come about when:

- High potential innovations are identified that address the most pressing WASH problems
- Grantees successfully collaborate with multidisciplinary teams to deliver solutions that are usercentred, sustainable and embedded in the local context/ system
- Grantees consistently test and evaluate their solutions and develop context-specific evidence that is tailored to the needs of humanitarian organisations

International WASH sector actors support and incentivise key agencies to use this research and adopt appropriate WASH solutions (by sharing guidance and evidence)

GBV

Problem statement

- The humanitarian GBV sector faces persistent and systemic challenges which influence the effectiveness of GBV in emergencies (GBViE) programming.
- Innovation addressing GBViE is not systematically applied to address critical issues to the sector, and findings from innovation are not always shared/uptaken by the community of practice.
- There is low risk appetite for innovation addressing GBV given the sensitive and life-saving nature of the work, important ethical considerations, and concerns that best practices which may not be well integrated in the innovation process

Focus Area Theory of Change statement

If innovation is able to address critical problems related to GBViE and GBViE programming then the humanitarian GBV sector will make changes to their practice that positively affects the lives of women and girls in crisis settings.

This focus area aims to understand and demonstrate how innovation can better address pressing problems affecting GBViE. The focus area team works with grantees, incorporating best practice into innovation challenges by developing an in-depth understanding of key problems, articulating clear learning objectives to guide learning outputs from innovation projects, promoting partnership with locally-based organisations and integration with existing services, and incorporating meaningful participation from women, girls and locally-based GBV practitioners as appropriate. The focus area also seeks to explore how it might better support and fund women-led, community-based organisations by making innovation challenges accessible and aligned to their needs and capacities.

Throughout the process the focus area team aims to build an evidence base on critical, persistent and systemic challenges to the sector. They will work with the international GBV sector to advocate for innovation that addresses strategic GBV problems and to influence key humanitarian actors to take-up and adapt their practice in light of learning about how to improve the outcomes of women and girls.

Change will come about when:

- High potential innovations are identified and/or further tested and supported to address strategic challenges in GBViE programming
- Grantees successfully manage innovation processes to develop and deliver solutions that effectively address and/or explore problems, reflecting the views of women and girls as appropriate.
- Grantees consistently gather learning from their innovations and develop evidence that is tailored to the needs of GBV actors.
- Elrha is a trusted GBV stakeholder who can successfully encourage humanitarian GBV actors to change their practice based on the learning.

DOAI

Problem statement

- Older people and people with disabilities experience multiple barriers to inclusion in humanitarian settings, including physical and communication barriers, laws, policies and procedures, cultural attitudes and discrimination.
- There is limited understanding of these barriers within the humanitarian system, or of the rights and capacities of older people and people with disabilities.
- Though awareness is increasing overall, there is very little good practice for inclusive humanitarian response.

People with disabilities and older people, and their representative organisations (organisations of persons with disabilities (OPDs) or older people's associations (OPAs)) rarely participate in decision making in humanitarian settings, which perpetuates the existence of barriers and discrimination.

Focus Area Theory of Change statement

If grantees increase their understanding of the barriers to inclusion faced by older people and people with disabilities within the humanitarian system, then develop and implement research and/or test solutions to address these barriers, then there will be greater inclusion of people with disabilities and older people in humanitarian settings.

This focus area aims to define the priority problems and gaps in evidence on the inclusion of people with disabilities and older people in humanitarian response, increase understanding of barriers and opportunities for inclusion, and develop solutions to respond to these. Change will be achieved through the activities of grantees themselves but also when evidence and learning on effective inclusive practice is captured and disseminated, in order to influence policy and practice towards supporting and adopting innovative solutions across the sector.

The HIF focus area team will work directly with grantees and their partners (including organisations of persons with disabilities (OPDs) or older people's associations (OPAs)), and engage with the dedicated Technical Working Group and the wider inclusion community in order to better understand barriers and opportunities.

The HIF focus area team will provide grantees with funding to develop and implement research and/or test solutions that strive to put the voices and experiences of older people and people with disabilities at the centre of the process. The grantees will contribute to an evidence base on how to increase inclusion for people with disabilities and older people; sharing this in formats that are relevant and accessible to the humanitarian sector and the inclusion community. The focus area team will compile this evidence in knowledge synthesis materials. At the same time, the focus area will work closely with experts, networks and others working on inclusion to advocate for innovation and to influence humanitarian actors across sectors to adopt and adapt effective inclusive practices.

Change will come about when:

- Priority problems and opportunities for the inclusion of people with disabilities and older people in humanitarian response are identified through gap analysis and problem exploration.
- Grantees successfully develop and implement research and/or test solutions that address the barriers to inclusion as experienced and identified by older people and people with disabilities.

- Grantees consistently gather learning from their innovations and develop evidence and tools that are accessible to practitioners, and evidence and learning is synthesised and shared effectively.
- Elrha is a trusted inclusion stakeholder who can successfully encourage humanitarian actors to change their practice based on the learning.
- Other humanitarian actors adopt and scale the solutions that have been tested.

Scale

Problem statement

Solutions to humanitarian problems too often fail to be implemented at scale because:

- There is a significant funding gap for both innovators and potential adopters of innovation to implement new solutions beyond pilot initiatives.
- Certain parameters of the humanitarian sphere, such as the 'do no harm' principle, the urgency to provide solutions and organisational aversion to risk all act as disincentives for adopting innovation in humanitarian settings.
- Innovators, humanitarian sector actors and innovation funders have limited understanding of systemic barriers to scaling and lack practical ways to overcome them.
- Innovators need specialised support to navigate a pathway to scale, specific their solution (including an understanding of potential implementation, partnership and business models, the humanitarian system).
- Agencies and field practitioners do not have sufficient awareness of potential new solutions, incentives, financial support or access to evidence about innovations that will help them to trial and adopt new solutions that already exist.

Focus Area Theory of Change statement

lf:

- More innovators are equipped with more, flexible funding together with the right skills and knowledge;
- knowledge about sector-wide barriers is shared and practical recommendations of how to overcome them are generated and agreed upon with humanitarians, funders and innovators;
- and Elrha can facilitate stronger linkages between the innovation ecosystem and the wider humanitarian system (including strengthening incentives for humanitarian decision-makers to integrate solutions within their wider practice)

...then more evidence-based solutions may be adopted at a larger scale across the sector.

This focus area aims to support and deepen our understanding of how to support solutions to reach scale. The focus area team works with grantees, providing funding to evidence-based solutions to progress along their scaling journey. They also conduct research to identify key barriers which informs training and scaling tools used with the HIF grantees (and other innovation actors in the sector) to help them develop, test and implement comprehensive scaling strategies. Throughout this process the focus area team aims to continue building their understanding of barriers by supporting grantees to overcome barriers and generate insights accordingly, and to make these accessible to the wider sector (particularly other intermediary funders). The focus area also works with key humanitarian actors and coordination bodies to address systemic barriers to scale, and identifying innovation champions and entry points for innovation in the international humanitarian markets.

Change will come about when:

• Innovators better understand barriers to scale, the different pathways to scale and are able to overcome the barriers they face

- Grantees consistently gather insights from their scaling journey and the HIF share collated insights that are relevant and accessible to the wider humanitarian sector particularly other intermediary funders and other key decision makers
- Humanitarian decision makers know about innovations, have evidence for their application and the support to trial and integrate them with their wider practice

Skills Building

Problem statement

The current humanitarian innovation ecosystem is not sufficiently resourced to develop the necessary guidance and practical support to advance the skills of innovators.

Even the most widely cited and rigorous studies provide little insight into the 'nuts and bolts' of what works, what does not, and why in innovation project management in the humanitarian sector.

Focus Area Theory of Change statement

If innovators are equipped with the most cutting edge knowledge and practices in innovation management, their innovations are more likely to be successful. In turn, this success will drive wider adoption by the sector, positively impacting people affected by crisis.

This focus area is striving to iteratively develop, curate and share best practice in innovation management while exploring the knowledge and processes required by innovators to deliver maximum impact in an increasingly diverse and complex humanitarian innovation landscape now and in the future.

The team will convene actors/innovators from across the humanitarian sector and collaboratively research their most urgent needs. In addition, they will collectively identify opportunities that will inform the development of tools, guidance and learning approaches.

This focus area will work primarily within the Humanitarian Innovation Fund (HIF) to build the skills and capabilities of Innovation Managers (IMs) as a conduit for improved innovation management approaches, greater participation and more creative, robust and ethical innovation implementations within their portfolio.

This work will provide evidence on what works to influence and support innovation management in the wider humanitarian innovation sector, further informing and influencing the practice.

Change will come about when:

- The needs, priorities and opportunities that align with viewpoints from the wider sector are identified and acted upon.
- HIF Innovation Managers are well-versed in the identified skills and capabilities and feel confident to deliver training in these areas.
- There is a clearly defined system of sharing knowledge and practices with grantees.
- Grantees adopt more ethical and inclusive practices.
- Wider humanitarian and third-sector actors/innovators and donors adopt similar practices.

Local Innovation

Problem statement

Community driven innovation is critical to effectively address the challenges faced by people affected by crises. People affected by crises and those who work for locally-led organisations often have a different perspective on humanitarian problems to that of international responders, and a different set of priorities, informed by their longer-term view and deep understanding of the physical, social and political realities of their environments. With the right resources, they are more likely than outsiders to develop appropriate, effective and sustainable solutions to those problems.

There has been huge investment in developing an ecosystem of support (financial and non-financial) for the development of innovative solutions to humanitarian challenges over the last decade. However, a notable gap persists around enabling innovative locally led organisations to innovation access and be part of that humanitarian innovation ecosystem, despite broad recognition of the need to do so.

Focus Area Theory of Change statement

If innovation teams from locally-led organisations access funding and mentorship to develop and pilot innovative solutions to problems faced by themselves and the communities they work with, and key actors (country focal point organisations) are supported to build place-based innovation ecosystems that will support the further development and growth of these solutions (and share their learning), then a greater number of effective solutions will be available to address priority problems as identified, experienced and prioritised by people affected by crisis.

This focus area is driving to understand how to support locally-led organisations and communities to design contextually-appropriate innovation processes suitable for LNGOs/ national level innovators and help national actors generate insights about how to build local innovation ecosystems. The focus area team will work with strategic partners in specific countries (SEEDS in India and the Center for Disaster Preparedness in the Philippines) and a regional partner (ADRRN) to provide training on innovation management and closed HIF funding calls (with hands-on support throughout the application and grant implementation period) to make funding more accessible to locally-led organisations.

Elrha will combine expertise with strategic partners (country focal points and ADRRN) to collaboratively train innovators from locally-led organisations, and deepen understanding of the processes that best support community-driven/locally-led humanitarian innovation. The focus area will facilitate partners to share learning across their networks to strengthen local, national and regional innovation ecosystems, and to understand more about how to enable local innovators to scale their innovations (scale may refer to sustained use, implementation beyond initial pilot projects, reaching more people as defined by the priorities of the innovating organisation). Throughout the process, the focal area will build an evidence base around the benefits of locallyled innovation and advocate to donors on different approaches that can foster this.

Change will come about when:

- Local innovators are able to access funding mechanisms to support their innovation journey
- Strategic partners (ADRRN), Country Focal Points (SEEDS in India and Centre for Disaster Preparedness in the Philippines) and local innovators have improved confidence and greater technical knowledge to support, pilot and scale innovative ideas for local problems
- Local, national, and regional ecosystems are strengthened to enhance opportunities for the development of locally-led innovations, and for those innovations to have the potential to scale

• Donors are more aware of the potential of local innovation capacity.

Annex 3. List of interviewees consulted

Grantees (26 grants, 30 individuals)	Elrha and HIF staff (12)
Arbeiter Samariter Bund (ASB) Indonesia	Elrha staff (3)
Childline Zimbabwe	HIF staff (8)
Eclipse Experience	R2HC staff (1)
Faircap	
Field Ready	Stakeholders (TWGs, partners and donors) (17)
Heartland Alliance International (2)	Elrha Board (1)
International Rescue Committee (2)	HIF Advisory Group (2)
Manchester Metropolitan University	HIF Funding Committee (1)
Make Music Matter	TWG members (5)
NASSA Caritas	Donor staff (2)
Oxfam	National partner staff (3)
Pesitho Holding Aps	Research consultants previously hired by the HIF (3)
Philippine Geographical Society	
Queen's University	Peer funders and organisations (5)
Red Cross Austria	Dutch Relief Innovation Fund
Reemi	Humanitarian Grand Challenges (2)
Rethink Relief	Start Network
Save the Children	WFP Innovation
SSRA Body Bags	
Stanford University (2)	
Syrian Expatriate Medical Association	
Tearfund (2)	
Translators without Borders	
Waterscope	
World Vision Vanuatu	

Y-Labs

Annex 4. Documents reviewed

Midline 35 end of grant reports HIF Grants Tracker HIF Theory of Change 2020 (Appendix 3)

Elrha. (2017) 'Evaluation response: learning from five years of action'. Elrha: London. www.elrha.org/wp-content/uploads/2017/09/HIF-Evaluation-Response-2017.pdf

Elrha. (2020) 'HIF programme delivering against the Elrha strategy (2021-)'. Internal document. Unpublished.

Elrha. (2017) 'Humanitarian Innovation Fund strategic approach 2018 - 2020: a responsible ambition'. Elrha: London. www.elrha.org/wp-content/uploads/2017/11/HIF-STRATEGIC-APPROACH-2018-2020.pdf

Elrha. (2021) 'Pathways to Change 2020'. Elrha: London. <u>www.elrha.org/wp-content/uploads/2021/06/Elrha-</u> <u>Pathways-to-Change-Report-2020.pdf</u>

Elrha. (2019) 'Strategic approach to engaging with people affected by crisis'. Internal document. Unpublished.

Elrha. (2019) 'Strategic approach to partnerships'. Internal document. Unpublished.

Lawday, A., Poulson, C., and Foley, C. (2017) 'The Humanitarian Innovation Fund external evaluation'. Elrha: London. <u>https://reliefweb.int/report/world/humanitarian-innovation-fund-external-evaluation-june-2017</u>

Endline

8 end of grant reports

7 narrative donor reports and proposals

HIF Grants Tracker (June 2022)

HIF Outputs database (May 2022)

Tanner, L., Ahimbisibwe, L., and Winn, C. (2020) 'M&E report for Journey to Scale'. Updated by A. Taylor 2022. Internal document. Unpublished.

Bastable, A. and Russell, L. (2013) 'Gap analysis in emergency water, sanitation and hygiene promotion'. Elrha: London. <u>www.elrha.org/wp-content/uploads/2016/01/HIF-WASH-Gap-Analysis.pdf</u>

Dodgson, K. and Crowley, C. (2021) 'Impact Evidence and Beyond: Using Evidence to Drive Adoption of Humanitarian Innovations'. Elrha: London. <u>www.elrha.org/wp-content/uploads/2021/06/Elrha-Report-2-Impact-Evidence-and-</u> <u>Beyond-Report.pdf</u>

Elrha. (2021) 'Elrha Annual Report 2020'. Internal document. Unpublished.

Elrha. (2022) 'Strategy Calibration Task Force - Elrha Leadership Group Briefing. Internal presentation and Powerpoint

slides'. Unpublished.

Elrha. (2020) 'Water, Sanitation and Hygiene Innovation Catalogue: A Collection of Innovations for the Humanitarian Sector'. Second edition. Elrha: London. <u>www.elrha.org/wp-content/uploads/2021/01/HIF-WASH-innovation-</u> <u>catalogue-2.0-WEB_spreads-2021.pdf</u>

Florescu, A., Francis, A., and Salmon. R, (2020) 'Innovation to improve monitoring & evaluation (M&E) for humanitarian GBV programming: An overview of findings from the Humanitarian Innovation Fund's portfolio'. Elrha: London. www.elrha.org/researchdatabase/innovation-to-improve-monitoring-and-evaluation-for-humanitarian-gbv-programming/

Gray, I., Purchas, H., and Fenton, G. (2021) 'Humanitarian procurement: challenges and opportunities in the adoption of WASH product innovations'. Elrha: London. <u>www.elrha.org/researchdatabase/humanitarian-procurement-challenges-and-opportunities-in-the-adoption-of-wash-product-innovations/</u>

Lantagne, D., Yates, T., Ngasala, T. et al (2021). 'Gaps in WASH in Humanitarian Response: 2021 Update'. Elrha: London <u>www.elrha.org/wp-content/uploads/2021/10/Elrha_Gaps-in-WASH-in-Humanitarian-Response_2021-Update.pdf</u>

Obrecht, A. with Warner, A. and Dillon, N. (2017) 'Working paper: Evaluating humanitarian innovation' HIF/ALNAP Working Paper. London: ODI/ALNAP.

https://www.alnap.org/help-library/evaluating-humanitarian-innovation-hif-alnap-working-paper

Small Arms Survey. (2016) 'Gender Based Violence Interventions: Opportunities for Innovation'. Humanitarian Innovation Fund Gap Analysis. Elrha: Cardiff https://www.elrha.org/wp-content/uploads/2015/11/GBV_report_23_08.pdf

Warner, A. T. (2017) Working paper: Monitoring humanitarian innovation. HIF/ALNAP Working Paper. London: ODI/ALNAP.

https://www.alnap.org/system/files/content/resource/files/main/alnap-hif-innovation-monitoring-2017.pdf

Wong, A., Worsham, K., Ali, M. et al (2021). 'Exploring problems to find innovation opportunities: a methodology for humanitarian innovators and funders developed for WASH and other sectors'. Elrha: London. <u>www.elrha.org/wp-content/uploads/2022/10/Exploring-Problems-to-Find-Innovation-Opportuities_Methodology.pdf</u>

Annex 5. Contributors to problem definition research

The below table describes who was involved in a sample of research reports that have contributed to the HIF's problem definition:

Report	Authors and participants
2021, WASH Gap Analysis	 The research was developed by actors in the WASH sector, including the Global WASH Cluster (UNICEF), Elrha and Oxfam, supported by Tufts University, Cranfield University and University of Leeds. The research drew on data collected from over 1,700 people affected by crises in 30 countries through 154 focus group discussions. Data was also collected from 700 in-country WASH practitioners and 256 global WASH actors. The methodology for the WASH gap analysis was explicitly designed to incorporate and centre the voices of those affected by crisis as a priority and a gap in itself; the report states that compared to the HIF's 2013 WASH Gap Analysis this analysis is "considerably more influenced by the perceptions of people affected by crises". In the report, the identified gaps are disaggregated to indicate the views and perspectives of people affected by crisis.
2021, GBV Gap Analysis	 The research was conducted by Global Women's Institute (GWI) at George Washington University. It included two phases of primary data collection. The first phase surveyed 93 global and country-level practitioners, of which 51 worked at national or subnational offices in humanitarian settings. The second phase validated data with 53 respondents, of which 21 worked for a national NGO or CBO. The original methodology included consultations with women and girls in humanitarian settings. However, due to Covid-19, a fully remote 'opt-in' data collection methodology was applied instead, which limited the participation of CBOs and frontline providers and was not able to include affected women and girls. Instead, the research drew on secondary data from previous consultations with women and girls.
2020, DOAI Gap Analysis	 The report was authored by commissioned experts at the Nossal Institute with input from ASB Indonesia. The gap analysis was made up of two parts: a literature review and a second phase analysis that aimed to explore how available evidence leads to improved DOAI and the barriers to uptake of evidence and good practice. The second phase included 20 interviews with humanitarian actors and disability and older age advocates (3 based in Africa and 6 based in Asia). It also included an in-person consultation with 8 people with disabilities and 6 older people in Indonesia (carried out by ASB).
2018, Too Tough To Scale	 Spring Impact carried out the research and prepared the findings, with analysis and editorial support from Science Practice and Elrha. Alongside a desk review, the research included interviews with 23 experts, including 5 staff from international NGOs, 3 staff of innovation hubs (Care

International, UNICEF and Nesta), 9 global innovation actors and researchers and 10 staff of HIF Journey to Scale grantees.
• The report focuses on a global perspective. It does not reference consultation with national or local NGOs or innovators, or crisis affected people.

Annex 6. Mapping of problem definition research to challenge calls

Disability and old-age inclusion

In 2020, Elrha carried out a gap analysis exercise for DOAI. The report, Gap Analysis: The Inclusion of People with Disability and Older People in Humanitarian Response, summarised key evidence gaps overall and in more detail against the Humanitarian Inclusion Standards. The mapping below uses the overall summary gaps. HIF funding calls since 2020 are mapped to the gaps identified. Pre-2020 DOAI grants are not mapped below (this included 2 DOAI GBV grants and 2 DOAI WASH grants awarded in 2019). It is noted that the DOAI calls since 2020 (Inclusive Preparedness and Meaningful Participation) address multiple gaps - they are therefore duplicated in the table. There was no ranking or prioritisation of gaps carried out within the gap analysis report.

#	Gaps identified in 'Gap Analysis: The Inclusion of People with Disability and Older People in Humanitarian Response' (Elrha, 2020)	HIF Challenge Call
1	Research	
1.1	Despite growing awareness of the importance of inclusive humanitarian response, there is limited evidence that people with disability and older people are being included .	2020 Inclusive Preparedness (4 grantees – research awards)
1.2	Most of the literature notes an absence of inclusive interventions . Relatedly, many articles tend towards advocating the importance of inclusion in humanitarian response.	2020 Inclusive Preparedness (4 grantees – research awards)
1.3	The current evidence base on the inclusion of people with disability and older people in response is highly diverse in terms of research topics, approach, quality and scope. Evidence is spread broadly and there is little depth of quality evidence for any sector under any HIS.	
1.4	There is a lack of research led by people with disability or older people . Two articles were authored by individuals who self-identified as Deaf. No other articles are known to be authored by people with disability or older people.	
2	Approaches in humanitarian response	
2.1	There is limited evidence on institutional barriers to the inclusion of people with disability and older people in response, or on why known inclusion principles and approaches are not widely adopted in response.	
2.2	There is evidence that the humanitarian sector has an outdated understanding of disability and tends to approach disability from a Medical Model rather than a Social Model or rights-based understanding .	
2.3	There is little critical analysis of the use and effectiveness of existing inclusive approaches and tools being applied in humanitarian response.	

2.4	There is no clear evidence on positive impacts or outcomes for people with disability and older people resulting from inclusive humanitarian response . Although impacts may be measured effectively in different ways, no randomised controlled trial studies were identified.	2020 Meaningful Participation (2 grantees)
2.5	There is limited evidence on the meaningful participation of people with disability and older people in planning and decision-making in response.	2020 Meaningful Participation (2 grantees)
3	Cost and data	
3.1	There is no evidence relating to the costing of the inclusion of people with disability or older people in humanitarian response or similar cost-benefit analyses on the most appropriate interventions.	
3.2	There is limited evidence on the effective use of data for inclusive response . The collection of data does not in itself lead to change.	
4	Representation and diversity	
4.1	The disability literature emphasises the importance of engaging with the representative organisations of people with disability in response. Aside from engaging with 'elders', no mention of an equivalent mechanism or approach to engaging with older people was identified.	2020 Meaningful Participation (2 grantees)
4.2	There is evidence that humanitarian actors mistakenly link social standing and older age . For example, by identifying, and coordinating with, 'elders' who may not represent older people more broadly .	2020 Meaningful Participation (2 grantees)
4.3	There is a lack of nuanced understanding and critical analysis of the diversity of older age beyond 60 years of age in humanitarian response.	
4.4	There is limited evidence on the intersectionality between disability and older age , and other social factors. A few articles address specific groups, such as women with disability, but there is little detailed gender analysis and almost no evidence detailing other considerations, such as race, ethnicity or class.	

Gender based violence

In 2016, Elrha carried out its first mapping of innovation opportunities to fill gaps in gender-based violence programmes. It identified four key gaps. From 2017 the HIF launched a series of challenge calls, which are mapped to the problems identified in the table below.

It is noted that the Intimate Partner Violence call in 2020 could not be clearly mapped. Though one grant, Ipas - adapting ARCHES model, addressed a gap identified, the other, WRC - evidence for CVA in GBV case management, did not clearly address any of the gaps identified. As with DOAI, There was no ranking or prioritisation of gaps carried out within the gap analysis report.

In 2021, Elrha carried out a second GBV Gap Analysis exercise, to "update the outstanding and persistent gaps that continue to challenge the GBV sector", but has not yet launched any GBV calls since its publication.

#	Gaps identified in 'Gender-based violence interventions: Opportunities for innovation Gap Analysis' (Elrha, 2016)	HIF Challenge Call
1	Improving monitoring and evaluation	2017 M&E 1 (3 grantees) 2018 M&E 2 (5 grantees) 2019 M&E 3 (2 grantees)
1.1	Measure the impact of GBV programmes	
1.2	Develop real-time monitoring tools	2020 Advancing Innovation (2 grantees) – follow on funding for M&E 1 grantees to develop tools
2	Increasing the availability and quality of GBV expertise	
2.1	Create context-specific skills-building opportunities for GBV in emergencies specialists	
2.2	Develop a transparent and tailored recruitment process for GBV practitioners	
2.3	Reduce turnover of GBV practitioners	
3	Improving GBV coordination and prioritization	
3.1	Enable a better coordination among GBV practitioners	
3.2	Strengthen advocacy skills of local GBV actors	
3.3	Encourage collaborations between humanitarian and development actors	
3.4	Ensure a more stable flow of donor funding	
4	Adapting standards for practical use in a variety of contexts	2020 Intimate Partner Violence grantee (Ipas - adapting ARCHES model)
4.1	Develop context-specific roadmaps to help practitioners meet GBV minimum standards	

Water, sanitation and hygiene

In 2013, Elrha published its first WASH Gap Analysis. At the time, it did not use a challenge call approacd the WASH TWG shortlisted seven areas as priorities based on the 2013 research. In 2016, the HIF commissioned a series of WASH in Emergencies Problem Exploration Reports in the shortlisted areas. In 2016, the HIF launched its first WASH challenge call to address the problems identified. The first table below maps the challenge calls against the 2013 Gap Analysis. The second table maps the challenge calls to the shortlisted priorities.

In 2021, Elrha carried out a second WASH Gap Analysis exercise, but has not yet launched any WASH calls since its publication.

#	Gaps identified in 'Gap Analysis in Emergency Water, Sanitation and Hygiene Promotion' (Elrha, 2013)	Priority scoring	Priority ranking	HIF Challenge Call
1	Latrines where no pits are possible (Urban, high watertable/floods,rock,sand)	37	1	
2	Community participation/empowerment of vulnerable groups inc M&E from beg	27	2	2017 User-centred Sanitation (4 grantees)
3	Latrine emptying/desludging	26	=3	
4	HP - importance of context, understanding, inc socioanthropology	26	=3	
5	CLTS and sanitation marketing	23	5	
6	Urban alternatives for excreta disposal	22	=6	2017 Disposal Sites project (1 project, 2 grantees – partners)
7	Consider exit strategies and sustainability issues from the start	22	=6	
8	Final disposal options after desludging + treatment	19	=8	2017 Disposal Sites project (1 project, 2 grantees – partners)
9	Further development of non-toilet options/early response/ mobile inc peepoo	19	=8	
10	Hand washing hardware+promotion & sustainability+soap non soap options	18	=10	2016 Handwashing Challenge (4 grantees) 2017 Handwashing Challenge (1 grantee) 2020 Covid-19 Response (2 grantees – both handwashing)
11	Treatment - bulk v POU, filters, HHWT, cost, sustainability, mobile unit	18	=10	2017 Water Filter challenge (3 grantees)
12	Need low-tech solutions acceptable and sustainable by locals	18	=10	
13	Emerg-dev continuum inc listen to existing field knowledge	18	=10	

14	Ecosan + biogas	17	14	
15	Latrines - facilitating anal cleansing	16	15	
16	Water management/WRM inc involve private sector	15	=16	
17	General drainage, from showers and wash units eg rapid onset	15	=16	2016 Surface Water Drainage Challenge (3 grantees)
18	Menstrual hygiene provision	14	18	2019 Menstrual Health Management (4 grantees)
19	Maintenance, (latrines) sustainability, cleaning, cash4work	13	19	
20	Maintenance water source and supply, spare pump parts, monitoring	12	=20	
21	Behaviour change	12	=20	
22	Environmental concerns (wastage at pump, poor drainage)	12	=20	2016 Surface Water Drainage Challenge (3 grantees)
23	Shared & Family latrine sustainability / replicablity	10	=23	
24	Solid (rubbish) waste management systems inc poss recycling	10	=23	2017 Disposal Sites project (1 project, 2 grantees – partners)
25	Hygiene extended to schools and cmmty groups, health clubs	10	=23	
26	Improved integration of DRR in WASH and empower cmmty, water safety plans	10	=23	
27	Pit Soil Stability / lining	9	=27	
28	Need for mapping and sharing info about groundwater	9	=27	
29	Latrines for children and disabled	8	=29	[2019 Incontinence (3 grantees) (Partly - research went beyond latrines)]

30	Low carbon desalination, salinity issues, alternatives	8	=29	
31	Slabs & cheap construction materials	7	=31	
32	Hygiene kits, content, timing, standardisation and evidence of impact	7	=31	
33	Rapid borehole siting & low cost drilling	7	=31	
34	Trucking / tankering, how to exit, how to avoid, how to prove impact	7	=31	
35	Water quality monitoring and testing at HH	6	=35	
36	National capacity, (low), capacity building, local participation of CBOs	6	=35	
37	Sanitation lighting	5	=37	2016 Lighting Challenge (1 grantee)
38	Appropriate low cost sewerage options	5	=37	
39	Awareness activities, campaign (inc radio x1, posters x1, tv x1)	5	=37	
40	Management of water, latrine, waste and drains during and after emergency	5	=37	
41	More research for evidence base for all WASH activities	5	=37	2019 Incontinence (3 grantees)
42	Cholera HH v other approaches (inconsistency across agencies)	4	=42	
43	Collapsible jerry can	4	=42	
44	Smallscale piped network design and mgmt	4	=42	
45	Rainwater catchment and reuse of water for garden	3	=45	

46	Chlorination issues - hardware for treatment and community options	3	=45	
47	Lack of adequate and appropriate water storage instruments	2	=47	
48	Cleaning jerry cans	2	=47	
49	Evidence base and better structured link with academia	2	=47	2020 Dissemination (2 grantees - follow on grants to document evidence) 2020 Evidence (4 grantees - follow on grants to generate additional evidence)
50	Real time GPS mapping of cholera in urban	2	=47	
51	Contamination of groundwater by pit latrines	1	=51	
52	Targeting 'mother and malnourished child' (WASH and NUT)	1	=51	
53	Separate HP for men, women and children	1	=51	
54	Bed nets and/or insecticide for flies	1	=51	
55	Issue of payment versus free water	1	=51	
56	Market based approaches in WASH	1	=51	
57	Checklist for increasing sanitation and waste water for upgrade	1	=51	
58	Monitoring with the community re maintenance (SMS for repairs etc)	1	=51	

The table below maps the challenge calls to (a) the problems shortlisted by the WASH TWG and (b) the problem exploration reports commissioned in 2016. Calls that were not aligned with these priorities included the 2017 User-centred Sanitation (4 grantees), 2019 Incontinence (3 grantees) and 2019 Menstrual Health Management (4 grantees).

#	Gaps shortlisted by the TWG	2016 Problem Exploration report	Gap analysi s rankin g	HIF Challenge Call
1	Hand washing solutions and promotion	Handwashing	=10	2016 Handwashing Challenge (4 grantees) 2017 Handwashing Challenge (1 grantee) 2020 Covid-19 Response (2 grantees – both handwashing)
2	Water treatment	Water Treatment	=10	2017 Water Filter challenge (3 grantees)
3	Community-level excreta management			
4	Solid waste management	Solid Waste Disposal		2017 Disposal Sites project (1 project, 2 grantees – partners)
5	Surface water drainage	Surface Water Drainage		2016 Surface Water Drainage Challenge (3 grantees)
6	Latrine lighting and safety			2016 Lighting Challenge (1 grantee)
7	Urban sanitation alternatives			
8		Faecal Sludge Management		

Annex 7. HIF publications during the evaluation period

Report	Website link	Theme	Type of publication	Year
Ethics for humanitarian innovation	www.elrha.org/researchdatabase/ethic s-for-humanitarian-innovation/	Innovation guidance	Tool	2022
Gap analysis of gender based violence in humanitarian settings: a global consultation	www.elrha.org/researchdatabase/gap- analysis-of-gender-based-violence-in- humanitarian-settings/	GBV	Report	2021
Gap analysis on the inclusion of people with disability and older people in humanitarian response	www.elrha.org/researchdatabase/gap- analysis-humanitarian-inclusion- disabilities-older-people-literature- review/	DOAI	Literature review x 2	2020
Gaps in WASH in humanitarian response: 2021 update	www.elrha.org/researchdatabase/gaps -in-wash-in-humanitarian-response- 2021-update/	WASH	Report and database	2021
How to scale: tactics to enable the adoption of humanitarian innovations	www.elrha.org/researchdatabase/how -to-scale-tactics-adopting- humanitarian-innovations/	Scale	Report	2022
Humanitarian innovation guide	https://higuide.elrha.org/	Guidance	Tool	2019
Humanitarian procurement: challenges and opportunities in the adoption of WASH product innovations	www.elrha.org/researchdatabase/hum anitarian-procurement-challenges- and-opportunities-in-the-adoption-of- wash-product-innovations/	WASH	Report	2021
Impact evidence and beyond: using evidence to drive adoptions of humanitarian innovation	https://www.elrha.org/researchdataba se/impact-evidence-and-beyond- using-evidence-to-drive-adoption-of- humanitarian-innovations-scaling- series/	Scale	Report	2021
Innovation opportunities in solid waste disposal in humanitarian settings	www.elrha.org/researchdatabase/inno vation-opportunities-solid-waste- disposal-humanitarian-settings/	WASH	Report and methodology	2022
Innovation to improve monitoring and evaluation for humanitarian GBV programming	www.elrha.org/researchdatabase/inno vation-to-improve-monitoring-and- evaluation-for-humanitarian-gbv- programming/	GBV	Report	2021
Partnerships review: Humanitarian Innovation Fund	www.elrha.org/researchdatabase/part nerships-review-hif/	Innovation guidance	Report	2019

Rapid review of disability and older age inclusion in GBV	www.elrha.org/researchdatabase/rapi d-review-of-disability-and-older-age- inclusion-in-gbv/	GBV and DOAI	Report	2019
Rapid review of disability and older age inclusion in humanitarian WASH interventions	www.elrha.org/researchdatabase/rapi d-review-of-disability-and-older-age- inclusion-in-wash/	WASH and DOAI	Report	2019
Water sanitation and hygiene innovation catalogue	www.elrha.org/researchdatabase/was h-innovation-catalogue/	WASH	Tool	First ed: 2019 Second ed: 2020

Annex 8. Events and policy engagements

The table below indicates the events and policy engagements HIF staff have participated in since 2019 in each focus. There is some overlap between events and policy engagements; in the table each event is referenced once.

Focus area	Events	Policy engagement activities
GBV	 5 GBV Call to Action meetings to support wider engagement and relevance with GBViE community of practice (2019-21) 4 TWG meetings (2019-21) 3 IDIA Gender and Innovation Working Group (GWIG) meetings SVRI Forum (2019) Expert Group Meeting: Global Shared Research Agenda (2021) Global Technical Advisory Group (TAG) for GBV Learning in Refugee Settings (2021) Participation in Focus Group Discussion on Ethical Funding for GBV (SVRI) (2021) 	 3 engagements with Norway MFA on Advancing GBV Innovation (2019-21) Ending SGBV, Oslo (2019) Women Deliver (2019) Panel event for the Royal College of Arts (2021) CSW65 panel event (2021) Participation in 'mini' roundtable on Design, Humanitarianism and Gender (2021)
WASH	 WASH Innovation Showcase event (2019) 9 TWG meetings (2019-22) 	 Meetings with GWC, UNICEF, UNHCR and other key stakeholders (2019) WASH procurement meeting convened with UNHCR, UNICEF, GWC and FCDO (2021) Wider stakeholder WASH procurement meeting (2022) Engagements with UNICEF supply division (2022)
DOAI	 5 TWG meetings (2021-22) 1 TWG sub-group meeting to support 2021 challenge design (2021) 2 problem exploration reflection workshops (2021) Consultation with members of the International Disability Alliance (2021) Workshop with 25 stakeholders on ideas to address problems 	 Sphere Handbook Launch (2019) Grand Challenges and WFP workshop (2020) ODI IASC Roundtable (2020) Gap Analysis presentations (2020) Participation in monthly disability reference group meetings (2021) Participation in 'Dialogue between DPOs and humanitarian actors' (2021)

	identified in the gap analysis (2021)	 2 UNPRPD Partnership Advisory Group meetings (2021) Humanitarian Network Partnerships Week webinar (2021) Participation in roundtable on the Importance of Disaggregated Data in Humanitarian Action (2021)
Scale	• Evidence for Scaling research event (2021)	 High level engagements with stakeholders in the scaling ecosystem (2019-22)
Skills building	 Roundtable event on innovation skills and capabilities with key sector actors (2021) 	None
Locally led innovation	• 1-2 workshops per cohort	None

Annex 9. Innovation pathway milestones

To explore how the HIF contributes to enabling projects to progress along the innovation pathway at different stages, outcome examples collected using the capturing change methodology were coded using ALNAP's Innovation matrix¹. The matrix maps 34 milestone indicators of progress to five stages on the innovation pathway towards scale.

Stage (ALNAP)	Component (ALNAP)	Mapped HIF stage	
Problem	Develop further understanding of the problem	Recognition	
recognition	Identify component of the problem or user needs		
	Carry out research to evidence the problem		
Opportunity	Identify relevant existing practice to address the problem	Recognition	
recognition	The problem or solution is seen as a strategic opportunity by senior management		
	Gain an understanding of the new context and its constraints		
Adapting an	Choose a solution	Adaptation	
existing solution	Apply for funding internally or externally		
	Contract partners with expertise in the solution		
Invention	Identification of relevant existing practice	Invention	
	Brainstorming of possible solutions and selection of solution to pursue		
	Conceptualise solution - create concept note or draft design brief		
	Apply for funding internally		
	Create first complete prototype		
	Formalise partnerships (division of tasks. MoUs, etc.)		
Development	Develop a road map	Development and	
	Plan ways of gathering further information on the problem or opportunity and the intended users	Pilot	

	-	
	Develop and incorporate means of monitoring pilots	
	Assess the 'translation needs' for the project and ensure a member of the innovation team can satisfy this role	
	Apply for funding externally	
	Guidance or protocols created for staff to assure consistent implementation of trials and pilots	
Informal trials with sample data (more common for tech innovations)		
	Understanding of context is refined	
	Identify potential risks to the innovation that need to be mitigated	
	Surveying pilot participants and capturing learning of necessary future changes and creating strong feedback loops for the adoption of this learning into the design	
Implementation	Continued adaptation of solution to match new context particularities	Implementation
	Apply for additional funding to do more pilots	
	Seize new/unplanned piloting opportunities	
Diffusion	Evidence gathered through trials and pilots is consolidated to help build the case for the solution	Facilitation of uptake and adoption
	Develop a clear explanation for the concept of the solution	
	Disentangle the different types of users and build a clearer picture of incentives and disincentives to adoption	
	Foster relationships and/or promote to potential early adopters	
	Commission research or evaluation to show results of successful implementation	
	Create means of facilitating take-up: Promote the solution to end users by offering training or piggy backing on training to promote the innovation; create training material; offer webinars	

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The table below shows the number of outcome examples coded to each stage. Due to variations in the type and quantity of data gathered from different grants, this was not used to quantify outcomes contributed to by the HIF. The coding was used to understand the broad concentration of outcomes in each focus area and facilitate qualitative analysis.

Stage	Total Including non- focus area grants	DOAI	GBV	WASH	Scale	Locally-led innovation
Number of grants	68	6	10	18	8	7
Recognition	49	18	3	16	4	4
Adaptation	7	1	1	3	0	1
Invention	47	13	10	14	2	4
Development and pilot	50	0	5	15	6	5
Implementation	24	1	3	8	2	1
Facilitation of uptake and adoption	76	3	7	8	25	2

Annex 10. Capturing change - outcome examples by focus area

This annex provides key outcome examples that were identified through the capturing change methodology, grouped by outcome theme (in red) and by focus area. This analysis fed into the findings described in Chapter 4.

The outcome examples described here were captured before October 2022. In October 2022 additional data was received on scaling outcomes. These are detailed in Annex 8.

Disability and old age inclusion

Grantees have produced evidence about DOAI in humanitarian response, which has been disseminated to some extent.

- Leonard Chesire produced a series of materials to disseminate their research on the lived experiences of older people and people with disabilities in climate action. The team disseminated the research at a side event on disability-inclusive climate action at the second Global Disability Summit, shared their research briefing at a dissemination event in Dhaka, and developed a package of materials for COP26. They also disseminated the research to local communities.
- Butterfly Works generated learning about the experiences of disaster preparedness information systems for older people and people with disabilities. In 2022 they ran an online launch session to disseminate the research. The reach of this event and the research is not evidenced.
- Women's Refugee Commission used the research findings to develop a Quick Start Guide for the Facilitator's Kit on Community Preparedness for Sexual and Reproductive Health and Gender, to help emergency planning and needs assessments define and improve inclusion. The guide was launched in 2022 and dissemination is not yet evidenced.

Grantees learnt about inclusive research methods and applied this learning.

- Butterfly Works gathered learning about the needs of older people and people with disabilities in order to participate in research. This led to adaptations of the research approach to improve inclusion.
- Women's Refugee Commission consulted partner organisations and CSOs for older people and people with disabilities and undertook a review of participatory methods for use with older people and people with disabilities. This informed the development of an innovative, inclusive research methodology and included communities in defining research objectives and planning research activities.

Participation in research helped participants feel included and empowered.

- Leonard Cheshire reported that participation in the research gave older people and people with disabilities an increased sense of inclusion among the community members and the ability and confidence in having their voice be heard.
- Light for the World and Butterfly Works found that community members that were trained to become Disability Inclusion Facilitators (DIFs) to facilitate research sessions had an increased sense of empowerment and acquired leadership and facilitation skills.

Through their participation in the project, community organisations for people with disabilities (OPDs) and older people's organisations (OPAs) have taken a more proactive role in humanitarian response.

- ASB Indonesia reported that participating OPDs and OPAs had improved proposal writing capacity and increased confidence in their abilities to affect humanitarian response and their own lives. They report that OPDs and OPAs are making increased contributions to humanitarian response activities at the local level.
- After participating in the Tearfund project, OPAs and OPDs that received training, mentoring and capacity building are reported to have moved away from the mentality of waiting to receive aid from humanitarians and NGOs to proactively engaging in humanitarian response and suggesting changes. The People With Disabilities (PWD) Federation is also reported to have started working together more proactively. Membership of the PWD Federation has grown with over 1,000 new individual members.

Local stakeholders have increased awareness of the inclusion of older people and people with disabilities in humanitarian planning and response.

- As a result of the Tearfund project, NGOs and local community organisations have become more aware of local OPAs and OPDs and their capacity to affect change and engage their members in humanitarian response.
- Local governments in the communities ASB operates in have committed to using a more inclusive lens for data collection, including gender, disability and age, and aim to collect data from at risk groups. Local humanitarian organisations have established partnerships with OPAs and OPDs and plan to undertake more inclusive planning.

Gender based violence

Grantees increased their understanding of M&E tools and frameworks in relation to humanitarian programme needs.

- GWI and Trocaire (M&E 3, Invention and Pilot) learned that in order to localise M&E of the GBV Minimum Standards and meet the needs of programmes, indicators and tools need to go beyond measuring Minimum Standards and consider participant safety as well as other outcomes.
- Queen's University (M&E 1) increased their understanding of the feasibility of using Sense Maker for SGBV programming in Lebanon, and its potential suitability in acute humanitarian environments that are rapidly changing and require rapid, responsive decision-making. Queen's also learned about the importance of considering users' ability to engage with the tool, such as literacy and digital skills.

Grantees identified challenges and co-designed solutions in collaboration with national and local stakeholders.

- GWI and Trocaire (M&E 3, Invention and Pilot) facilitated workshops with local psychosocial facilitators and GBV response staff in South Sudan and Myanmar, which resulted in co-designed prototype tools.
- IRC (M&E 2, Recognition) employed the 'SPRINT' methodology to identify GBV M&E challenges and ideate solutions with a multi-disciplinary team of women's protection, health and M&E experts from Burundi, DRC and Tanzania. This led to the identification of two potential solutions. Notably, although the grant was focused on Recognition, this approach enabled the grantee to move into the early stages of solution development.
- SEMA and Syrian Bright Futures (M&E 2, Recognition) developed a virtual WhatsApp forum (the first of its kind) connecting over 60 GBV actors in northern Syria, which resulted in information sharing on the challenges and gaps in GBV M&E.

GBV M&E recommendations and tools have been made available to humanitarian actors and adopted for wider use.

- IRC (M&E 1) adapted, piloted and validated measurement tools initially developed in DRC to measure the impact of GBV case management on psychosocial well-being and felt stigma among refugees in Jordan and Kenya. IRC developed a GBV Case Management Outcome Monitoring Toolkit and accompanying guidance, which were disseminated at the SVRI Forum in 2019 and are open access. IRC has adopted the toolkit across its GBV programming. In addition to the HIF's financial support, technical support and dissemination support contributed to this outcome.
- SEMA (M&E 2, Recognition) collaborated closely with the GBV Sub-Cluster (SC) Turkey Hub during its grant, a community of practice representing regional GBV actor. SEMA's findings and recommendations were adopted into the SC's work plan in 2019. The SC hired a consultant to take forward the recommendations, contributing to the standardization of M&E tools for GBV programmes across northwest Syria. This change represents a strong example of findings being taken up and acted upon by the community of practice (Sub Cluster) and therefore influencing regional guidance and current M&E practice of GBV programming. The HIF played a partnership brokering role that contributed to this outcome.

Water, sanitation and health

Grantees have increased knowledge and capacity in innovation processes and have put learning into practice.

- WaterScope received an initial £20,000 investment from the HIF in 2016 for an Early Stage Innovation grant. At the time this was the largest grant WaterScope had received and enabled them to field test their innovation for the first time. They found that the initial innovation did not meet people's needs and learnt the value of human-centred design rather than focusing only on the technology. WaterScope went on to receive a further grant from the HIF in 2020 and have built a long-term relationship with the HIF, which they attribute to 'nurturing' their growth by connecting them to different networks, improving their understanding of the ecosystem and guiding them on the right language to use.
- Members of the LSHTM team learned how to conduct research in humanitarian settings for the first time including how to train collaborators and trial staff and collect monitoring data remotely. The grant also enabled LSHTM to learn about the challenges of scaling, such as procuring soap on a medium scale.

Grantees built relationships that have facilitated their journey to scale.

- WaterScope have built up relationships and a network that is suited to demonstrating, commercialising and achieving the desired adoption and impact of the WaterScope system. They developed relationships with trusted partners who have conducted field and impact testing, and identified an external lab to enable external validation and establish the criteria needed for commercialisation. They are continuing to build relationships with potential purchasers, including UNICEF, Tearfund and Action Against Hunger.
- FairCap has partnered with IFRC (a member of the WASH TWG) to further test their rapid water testing kit. IFRC has purchased 10 kits and 1,000 tests This has been enabled by FairCap's long term relationship built with the HIF and WASH TWG.
- Save the Children created a partnership with Oxfam to increase learning and the reach of usercentred santitation design globally.

• Reemi worked with a consultant partner to develop an entrepreneurship model that could enable Reemi products to be manufactured and distributed locally within Bangladesh, improving sustainability, lowering costs and improving the local economy.

Innovations have been adopted and used by wider organisations and/or in other contexts.

- Dahdaleh Institute for Global Health Research's recommendation to include household water quality monitoring in humanitarian field settings was included in an update of the Sphere Handbook, focusing attention on the public health impact of safe water. The Sphere Handbook is an established sector-wide resource on humanitarian standards and is used widely by humanitarian practitioners. Dahdelah's analysis has been used to guide safe water supply in Tanzania, Nigeria and Bangladesh, benefiting over 300,000 people.
- Oxfam Handwashing Stations were tested at scale during its Covid-19 grant. Oxfam produced over 2,000 stations that were installed in DRC, Ethiopia and Bangladesh. Oxfam partnered with a number of organisations to enable testing at scale, including three partners that came on board after expressing interest when it was initially presented in Bangladesh. With additional funding a further 4,000 stations have been distributed for use in Oxfam programmes in other countries, including Kenya, Chad, Burkina Faso, Algeria, South Sudan and Yemen. In total, the stations are expected to have benefited 425,000 people. Oxfam Kenya have made additional orders of the station during the project and expressed interest in setting up local manufacturing. International Livestock Research Institute (ILRI) also purchased 20 stations for use in a research project on hygiene support for market vendors in Ethiopia. UNICEF's Handwashing Catalogue now includes the station, which was contributed to by the HIF's ongoing convening and advocacy efforts with UNICEF.
- INGOs used emerging research findings from the Oxfam's 'Lighting for Safer Sanitation' research project in Iraq, Nigeria, Uganda, and Bangladesh to inform new and existing humanitarian responses on lighting, sanitation and GBV. The HIF supported the dissemination of the findings.
- As a result of the success pilot and the demand for Reemi's MHM products among other workers in the factory (where the product was piloted) and elsewhere, Reemi supplied 6,000 workers in the factory where they ran the study with the product, with commitments to 10,000 more outside of that factory. World Vision is now trialling the product within its programming for people with disabilities, and other organisations have expressed interest in it.

Scale

Grantees learnt about and evidenced business models.

- Physicians for Human Rights dedicated resources to an evaluation of business models that would work to scale up its innovation, MediCapt. The HIF provided strategic guidance and advice on scaling which contributed to this outcome.
- Pesitho simultaneously tested multiple business models and different approaches in the field at the same time. HIF funding enabled them to test multiple models rather than a single model. Had they pursued one model, this may have led to company failure, as, for example, they experienced set backs around carbon-credits (one of the models tested).

Grantees have learnt about scaling processes and applied this learning.

- HRI SH+360 learned how the relationship between Head Office and Country Office differs between different organisations and how to adapt their approach accordingly to build the right relationships to move conversations about integrating SH+360 forward.
- Physicians for Human Rights learnt about the value of establishing evidence of efficacy, tailored manuals and introductory information materials before trying to introduce MediCapt in new contexts. The HIF provided strategic guidance and advice on scaling which contributed to this outcome.
- Pesitho and partners learnt that local production can be effectively supported through use of Standard Operating Procedures and training (including using documents, videos without audio and in person training), enabling them to start local production at the required volume. They also learnt that Pay-C technology was essential to the viability of their business model, but challenging to develop and implement. As a result, developing this technology has become a priority for the team.

Grantees generated new learning about their innovation in the context of scaling.

- HRI SH+360 negotiated a contract with a large INGO for the first time, learning about the challenges associated with the formatting requirements of SH+360 compared to the preexisting formatting requirements in large humanitarian INGOs. The HIF facilitated HRI's partnership with the INGO, which contributed to this outcome.
- Gravit'eau learnt that in Palestine washing hands with recycled water is not well accepted, making it difficult for the system to be adopted into institutional settings in these contexts.

One grantee adapted their innovation for application in different contexts.

• Gravit'eau developed a range of designs to meet the diverse needs of different user groups in for different settings, including differing heights, tap designs and soap types, to enable the system can be implemented in diverse settings.

Grantees have developed relationships and partnerships for potential adoption.

- HRI SH+360 signed a teaming agreement with a large INGO focused on integrating SH+ in the non-health sector and is implementing a training on SH+ for UNHCR for integrating in their largest peacebuilding program in Uganda. They also worked with a government partner to tailor the SH+ target group to their needs when confronted with the COVID-19 pandemic. The HIF contributed to both outcomes through its partnership strengthening support and facilitation.
- Physicians for Human Rights engaged with a range of government and non-government actors to identify pathways to uptake, resulting in wider interest in and support for MediCapt.

There are early indications of other organisations using innovation in new contexts.

- Gravit'eau delivered 5 prototypes of their handwashing station to MSF for trial in health facilities in Kenya and another to the Lebanese Red Cross.
- UNHCR is in the process of adopting SH+ in Uganda, aiming to reach 720 young people.

Locally-led Innovation

Grantees gained knowledge and learning relevant to their innovation.

- Philippine Geographical Society increased their understanding and ability to use 3D mapping and card games to increase the inclusion of people living with disabilities in disaster risk reduction planning.
- NASSA/Caritas Philippines staff and personnel of the Archdioceses of Palo learnt how to use the DIGITAL PH (OpenDataKit and QGIS).
- Host international and their partners increased their understanding of the potential for skilled migration as a complementary settlement pathway and increased their understanding of recruitment techniques used, identifying those that can support skilled migration.
- Makati Educators for Humanitarian Innovation learnt through consultations that other municipalities and cities did not have student-parent reunification plans in place and there was scope to scale the plans in the future to other provinces of the Philippines.

Grantees developed and tested solutions.

- NASSA/Caritas Philippines developed and started using a digital solution approach to map their existing Participatory Disaster Risk Assessment (PDRA) data. They completed the first community based comprehensive e-map of Brgy. Catmon in the Philippines, based on the Participatory Disaster Risk Assessment map made by the community, to serve as prototype for the innovation.
- Philippine Geographical Society included 85 people (48 men and 37 female), including 49 adults and 7 children with disabilities, in a dialogue on the needs and concerns of people with disability in Disaster Risk Reduction and Management through a newly produced game. The game enabled stronger inclusion and participation of people with disabilities in local level planning.
- Makati Educators for Humanitarian Innovation worked with Pitogo High School to develop tailored family preparedness and reunification plans; 987 families now have plans in place. This was the first time school-based preparedness plans were created in the local districts.

One grantee developed new relationships that enabled piloting.

• Host International expanded its research on legal and legitimate labour market opportunities for refugees to Bangladesh, India and Philippines through their partnership and access to probono work with Nokia and TrustLaw. John Holland and Nokia became private sector 'champions' that supported the pilot stage of the project.

One grantee disseminated findings through national dialogue.

• PGS increased awareness of inclusivity through the production of communication and visibility materials about the DOAI inclusive games and strategic dialogue with the National Council for Disability Affairs.

Annex 11. Scale outcomes

The table below details up to date (October 2022) data on scale numbers for grants that have scaled.

Grant	Notes	Description of scale
Panzi/MMM	Multiple grants, 2016 Scale grant	 763 women received music therapy. Step-wedge research with 200 women to demonstrate outcomes of music therapy. Make Music Matter now work in 11 countries globally.
Translators Without Borders	Multiple grants, 2016 Scale grant	 Number of people reached in their own languages is not recorded. At the end of the grant, 168 humanitarian partners with annual subscriptions; 22 million words in 277 language pairs in 2018 (doubled from 2017). Today, TWB reports 80,479,149 words translated.
Field Ready	Multiple grants, 2016 Scale grant	 Total number of products/people reached is not recorded. At end of grant - ten new deployments in partnership with humanitarian organisations; and an additional ten temporary deployments. 109 products added to Field Ready's catalogue and a further 350 tested. 103,000 people directly impacted in 2020 and 1 million people assisted indirectly.
Faircap	DIP grant 2016, Diffusion grant 2019, part of filter testing in Evidence grant 2020-22	 UNICEF Honduras purchased 6,000 FairCap Mini units Retailer in Peru purchased 2,300 Faircap Mini Action Against Hunger purchased 2,000 Faircap Mini. 200 Faircap Mini sent to Swiss NGO in Kenya 100 Faircap Mini distributed in Columbia 30 Faircap Family piloted in Mozambique 30 Faircap Family piloted in Columbia 100 Faircap Family piloted in Iraq 30 Faircap Family piloted in Gaza 20 Faircap Family piloted in Uganda Faircap Mini = 1 person (approx 10,600 people in total) Faircap Family = household/approx 3 people (approx 690 people in total) Total estimate = approx 11,290 people

Dahdelah	ESI grant 2018, WASH Evidence grant 2020	• Testing in South Sudan showed that using these targets meant that water was safe for household consumption in 71% of cases, as compared to 14% when existing Sphere standards were followed. So far, the SWOT has been used to guide safe water supply in Tanzania, Nigeria and Bangladesh, benefiting over 300,000 people.
HealthRight International, SH+360	J2S 2020	 HRI have trained more than 50 SH+ facilitators from the Ugandan Ministry of Health and from civil society groups to provide mental health interventions in Rhino Camp Refugee Settlement and in health care facilities in Kampala and Wakiso. 3,176 individuals have been reached with at least one counselling session, with plans in place to scale further in Uganda, and into Ghana, Liberia, and Ukraine.
Physicians for Human Rights (PHR), MediCapt	J2S 2020	 PHR have documented almost 2,000 cases of sexual violence using their innovation. If we assume each case is an individual (ie, that no individuals report more than one case), that's 2,000 people.
Pesitho Holding ApS, ECOCA electric solar cookstove, scale in Uganda	J2S 2020	 230 units in Malawi. 1,000 units currently in Uganda and Kenya. All have been sold at the subsidised price to vulnerable families, the vast majority to refugees in Bidibidi Settlement Uganda. They have also sold many of the units through the retailer network that has recently been set up, which employs 15 refugees to distribute the units who earn a wage from that. Using Pesitho's 6.7 family multiplier they are supporting 8,241 people.
Pragya, DMS Himalaya	ESI grant 2012, J2S 2020	 Initially designed to cover 900,000 people across 12 districts. 11 communities of practice are fully operational and generating early evidence on the DMS-Himalaya implementation, so roughly 825,000 people should benefit from increased weather data in their area which will better inform disaster risk management. The last district is expected to be completed very soon if it hasn't been already. 2,490 community and government stakeholders have been trained in Community-Based Disaster Risk Management (DRM) and the DMS-Himalaya

		 programme, including their roles and linkages in effective disaster management (DM) networks Training modules on Disaster management Leadership have been developed in collaboration with key institutions like the NIDM and rolled out. A total of 2,195 village councils have been trained thus far across the 12 districts. Training representatives of vulnerable groups (women, children, elderly, and people with disabilities) on community leadership in disaster management. Representatives / leaders of vulnerable groups have been identified (4040/7240) and mobilised in all the 12 districts. Training modules for women have been trained across the 12 districts so far.
Terre des hommes/ Gravit'eau	J2S 2020	 Delivered 5 prototypes of the handwashing station to MSF for trial in health facilities in Kenya and another to the Lebanese Red Cross. 40 systems in Mali and Burkina Faso installed (12,000 users). Users of Gravit'eau in a 12-month pilot test in 2019 were children in schools (1,450 per system per day) & child-friendly spaces (240 per system per day) in Mafa refugee camp, Nigeria.
Oxfam Handwashing Station	WASH Handwashing grant, WASH Covid-19 grant 2020	 During grant: produced over 2,000 Stations that installed in Oxfam programmes in DRC, Ethiopia and Bangladesh. Covid scaling (HIF-funded): 173,278 people Outside the grant, 4,000 Stations have been distributed for use in Oxfam programmes in other countries, including Kenya, Chad, Burkina Faso, Algeria, South Sudan and Yemen. Oxfam Kenya have made additional orders of the Station during the project and expressed interest in setting up local manufacturing. Additional scaling: At least another approx. 255,000 people* Total reach estimated to be 425,000 people*. Average 40% increase in handwashing rates from baseline (missing or very poor quality handwashing facilities)

		 International Livestock Research Institute (ILRI) purchased 20 OHS stations for use in a research project on hygiene support for market vendors in Ethiopia. Included in UNICEF's Handwashing Catalogue. *Medium estimate: If we assume that the 'last' 4,000 OHS reach 75% of the number of people per station that the 'first' 2,000 did, they would reach approx. 255,000 people. This would mean that the total number of people who have accessed the OHS is approx. 425,000.
Reemi, MHM product	WASH MHM grant 2019	 Reemi supplied 6,000 additional workers in the factory where they ran the pilot with the product, with commitments to 10,000 more outside of that factory. World Vision is trialling the product within its programming for people with disabilities, and other organisations have expressed interest in it.
Real Relief, Supertowel	WASH Handwashing grant 2016 for Magic towel, Non focus area Diffusion grant 2019 for Super Towel large scale manufacturing set up	 With its antimicrobial properties, the towel kills bacteria such as those that cause cholera and diarrhoea, and scientists believed that the towel might also kill or inactivate viruses. However, Stanford's findings indicate that the Supertowel is no more efficacious than a standard microfibre towel at inactivating surrogates for SARS-CoV-2. NB: the towel is still efficacious for preventing spread of bacteria, and humanitarian practitioners believe it has use cases despite its inefficacy on viruses. However, we have not supported further scaling of it so far as the findings have posed significant ethical questions for the use of the towel that need to be addressed first.
IRC	GBV M&E 1 grant 2017, GBV Advancing Innovation 2020	• GBV Case Management Outcome Monitoring Toolkit and accompanying guidance, adopted across all IRC GBV programming.
Save the Children, LSHTM	Surprise Soap (initial grant + evidence grant)	 Through the two HIF-funded studies, 600 children have used Surprise Soaps in Iraq, Somalia and Sudan. Additionally, Surprise Soaps have been rolled out further in Iraq, and implemented also in Kenya by Field Ready and other partners. In total, Field Ready

estimate that 25,000 children have benefited from Surprise Soap (September 2022).

Annex 12. Grant research outputs

The tables below provide grant research outputs for projects that have received funding (at least one grant) since 2016. This includes a total of 66 outputs, including 37 journal articles and 28 self-published reports (grey literature). Informal outputs such as blog posts, videos and infographics were not included.

The outputs listed were identified from HIF data on grant outputs (up to May 2022), the HIF's annual report to the FCDO (October 2022) and end of grant reports. The first table provides outputs from projects that received all or part of their funding (at least one grant) from focus area challenge calls. The second table provides outputs from earlier (pre-2020) open calls (ESI, DIP and Diffusion grants). Outputs were identified for DOAI, GBV, WASH and Scale grants. No outputs were identified for Locally-led innovation grants. Citation numbers were identified using Dimensions in October 2022.

Focus area grants

Grant	Notes	Description of output
DOAI - 6 self-p	ublished reports (grey literature)	
ASB Indonesia	DOAI grant 2019, DOAI grant 2020, Further investigation into the barriers, enablers and socioeconomic values of inclusion of persons with disabilities and older persons in the provision and quality of WASH services (Recognition research)	ASB Office for Indonesia and the Philippines (2021). 'Lessons for disability and older age inclusion from the Central Sulawesi response' (Report) ASB Office for Indonesia and the Philippines (2021). 'Practical Guidelines for Co-researching with Persons with Disabilities: Reflections and lessons learned in participatory research on Inclusive WASH in humanitarian responses' (Guidance)
Leonard Cheshire	DAOI grant 2020, Giving Voice Through Pictures and Words (Recognition research)	Carew et al (2021). <u>'Messaging for Inclusion: Identifying</u> relevant factors for disability and age inclusive disaster preparedness' (Research report)
Light for the World	DOAI grant 2020, We are part of the solution: a user- centred exploration of preparedness needs with people with disabilities and older people in Mozambique for inclusive humanitarian response (Recognition research)	Light for the World (2022). ' <u>We are part of the solution:</u> <u>A user-centred exploration of preparedness needs with</u> <u>people with disabilities and older people in Mozambique</u> <u>for inclusive humanitarian response</u> ' (Research report)
Social Development International	DOAI GBV grant 2019, Exploring DOAI in the Syrian Context (Recognition research)	Social Development International and Syria Bright Future (2022). ' <u>Barriers to Inclusion of People With Disabilities</u> <u>and Older People in GBV Programmes</u> ' (Research report)

Muslim Aid	DOAI WASH grant 2019, Landscape Analysis of Barriers to inclusion faced by people with disabilities and older people in WASH humanitarian programming in Golo and Nertiti Localities, Central Darfur State of Sudan (Recognition research)	Barrett et al (2022). ' <u>Barriers to Inclusion – Sudan 2021</u> <u>Report</u> ' (Research report)
GBV - 6 journal	articles (40 citations in total); 7 s	elf-published reports (grey literature)
Manchester Metropolitan University	Seed funding 2016, Supporting refugee-survivors of SGBV who have a communication disability	Marshall (2017) ' <u>Vulnerability of refugees with</u> communication disabilities to SGBV: evidence from <u>Rwanda</u> ' Forced Migration Review Marshall and Barrett (2017). ' <u>Human rights of refugee-</u> survivors of sexual and gender-based violence with communication disability' International Journal of Speech-Language Pathology (10 citations)
International Rescue Committee	GBV grant 2017, Raising the bar for routine M&E in GBV programs: Measuring psychosocial well-being and felt stigma outcomes; GBV Advancing Innovation grant 2020, Actionable, Impactful Data (AID) for Programmatic Decision Making	International Rescue Committee (2018) ' <u>Gender-Based</u> <u>Violence Case Management: Outcome Monitoring Toolkit</u> ' IRC/Elrha (Toolkit) International Rescue Committee (2021). ' <u>Successes and</u> <u>Opportunities for Actionable Impactful Data for</u> <u>Programmatic Decision Making</u> ' Elrha (Learning brief) Murray et al (2022). ' <u>Measuring sexual violence stigma in</u> <u>humanitarian contexts: assessment of scale psychometric</u> <u>properties and validity with female sexual violence</u> <u>survivors from Somalia and Syria</u> ' <i>Conflict and Health</i> (1 citation)
SEMA	GBV M&E grant 2018, Measuring the impact of GBV programmes in emergencies in the humanitarian Syrian context (Recognition research)	SEMA (2018). ' <u>Exploring Innovative Monitoring and</u> <u>Evaluation Practices Tailored for Gender-based Violence</u> <u>Programmes</u> ' SEMA/Elrha (Learning report)
WAHA	GBV Seed funding 2016, Using mobile phone technology to address GBV among adolescent Syrian refugees in Izmir, Turkey	Wringe et al (2019) ' <u>Altered social trajectories and risks</u> of violence among young Syrian women seeking refuge in Turkey: a qualitative study' BMC Women's Health (16 citations)

		Yankeh et al (2019) ' <u>Feasibility and acceptability of</u> mobile phone platforms to deliver interventions to address gender-based violence among Syrian adolescent girls and young women in Izmir, <u>Turkey</u> ' Vulnerable Children and Youth Studies (6 citations)	
Queen's University	GBV M&E grant 2017, Feasibility and Value of Using SenseMaker® to Improve Monitoring and Evaluation for Sexual and Gender-Based Violence Programs and Services	Bartels et al (2019). ' <u>SenseMaker® as a monitoring and</u> <u>evaluation tool to provide new insights on gender-based</u> <u>violence programs and services in Lebanon</u> ' <i>Evaluation</i> <i>and Program Planning</i> (7 citations)	
International Rescue Committee	GBV M&E grant 2018, Measuring the impact of GBV programmes in emergencies: taking a local perspective (Recognition research)	IRC (2019). ' <u>Collaboration of frontline actors for more</u> <u>effective GBV programme measurement 2019</u> ' IRC/Elrha (Learning report)	
Oxfam	GBV M&E grant 2018, Discovering opportunities to improve GBV outcomes for IDPs in post-earthquake (Recognition research)	Oxfam (2019). ' <u>Reviewing Current Practices of Gender</u> <u>Based Violence Programmes in Emergencies in Nepal</u> ' Oxfam/Elrha (Learning report)	
Childline Zimbabwe	GBV M&E grant 2018, A Comprehensive Review of the Existing Practices Used in Measuring the Impact of Gender Based Violence (GBV) programming (Recognition research)	Childline Zimbabwe (2019). ' <u>A Comprehensive Review of</u> <u>the Existing Practices used in Measuring the Impact of</u> <u>Gender-based Violence Programming: A Case of Sipepa</u> <u>in Tsholotsho, Zimbabwe</u> ' Childline Zimbabwe/Elrha (Learning report)	
Rural Development Initiatives in the Islands of Leyte	GBV M&E grant 2018, Advancing Girls and Young women for the GBV-free society (Recognition research)	Rural Development Initiatives in the Islands of Leyte (2019). ' <u>Capturing the impact of gender-based violence</u> interventions in Philippine emergency context using innovation & human-centred design' RDI/Elrha (Learning report)	
WASH - 11 journal articles (53 citations in total); 7 self-published reports (grey literature)			
Coventry UniversityWASH grant 2017, Surface Water Drainage InnovationCharlesworth et al (2017). 'Sustainable Drainage in Challenging Environments' New Water Policy and Practice (5 citations)			

		Charlesworth (2020). ' <u>Sustainable drainage, green and</u> <u>blue infrastructure in urban areas</u> '. Sustainable Water Engineering, Chapter 11 (pp.185-206) (2 citations) Charlesworth et al (2019). ' <u>The design, construction and</u> <u>maintenance of a SuDS management train to address</u> <u>surface water flows by engaging the community:</u> <u>Gawilan refugee camp, Ninewah Governate, Kurdistan</u> <u>Region of Iraq</u> '. Journal of Refugee Studies (2 citations)
Oxfam	WASH grant 2016, Lighting for Safer Sanitation Challenge	Oxfam International and WEDC (2018). ' <u>Shining a Light:</u> <u>How lighting in or around sanitation facilities affects the</u> <u>risk of gender-based violence in camps</u> ' Oxfam (Research report)
Oxfam	WASH grant 2017, User- Centred Sanitation Design through Rapid Community Engagement	Oxfam (2019) ' <u>We're Listening: An evaluation of user-</u> <u>centred community engagement in emergency sanitation</u> ' Oxfam (Evaluation report)
Save the Children	ESI grant 2013, Emergency WASH for Children Pilot Study; WASH Handwashing grant 2016, The Hidden Incentive	Watson et al (2019). ' <u>Child's play: Harnessing play and</u> <u>curiosity motives to improve child handwashing in a</u> <u>humanitarian setting</u> ' International Journal of Hygiene and Environmental Health (23 citations) Watson et al (2019). ' <u>Child handwashing in an internally</u> <u>displaced persons camp in Northern Iraq: A qualitative</u> <u>multi-method exploration of motivational drivers and</u> <u>other handwashing determinants</u> ' <i>PLoS ONE</i> (6 citations)
Real Relief	WASH grant 2016, Magic Towel, Diffusion grant 2019, Supertowel (product renamed)	 White et al (2019). '<u>Could the Supertowel be used as an alternative hand cleaning product for emergencies? An acceptability and feasibility study in a refugee camp in Ethiopia</u>' <i>PLoS ONE</i> (4 citations) Torondel et al (2019). '<u>Efficacy of the SuperTowel: An Alternative Hand-washing Product for Humanitarian Emergencies</u>' <i>American Journal of Tropical Medicine and Hygiene</i> (4 citations)
BORDA	WASH grant 2017, Disposal Sites Research	Huber and Jennings (2018). ' <u>Preparing to be unprepared:</u> Decision making and the use of guidance on sanitation systems and Faecal Sludge Management in the first phase of rapid-onset emergencies' BORDA- WESCA/Solidarites International (Report)

FHNW	WASH grant 2017, WASH Dissemination grant 2020, WASH Evidence grant 2020,	Peter and Harter (2021). <u>'Selecting Household Water</u> Filters in Emergencies: a manual for field evaluation' University Of Applied Sciences And Arts Northwestern
	Household water filters in emergencies	Switzerland (Guidance)
Dahdaleh Institute	ESI grant 2018, WASH Evidence grant 2020, Machine learning-enabled safe wateroptimization tool for humanitarian response	Ali et al (2021). ' <u>Evidence-based chlorination targets for</u> household water safety in humanitarian settings: <u>Recommendations from a multi-site study in refugee</u> <u>camps in South Sudan, Jordan, and Rwanda</u> ' Water Research (5 citations)
		De Santi et al (2021). <u>'Forecasting point-of-consumption</u> <u>chlorine residual in refugee settlements using ensembles</u> <u>of artificial neural networks</u> ' <i>npj Clean Water</i> (2 citations)
LSHTM	WASH Evidence grant 2020, Surprise Soaps	Watson and Dreibelbis (2021). ' <u>Using environmental</u> nudges to improve handwashing with soap among <u>school children</u> ' London School of Hygiene and Tropical Medicine (Guidance)
YLabs	WASH grant 2019, Cocoon: safe spaces for managing menstruation	Beeman et al (2022). ' <u>Using human-centered design to</u> <u>co-design dedicated menstrual health spaces with</u> <u>menstruators in Bidi Bidi refugee settlement, Uganda:</u> <u>Learnings for further adaptation and scale in</u> <u>humanitarian settings</u> ', (pre-print, not peer reviewed)
Reemi Charitable	WASH grant 2019, MHM Waste Project - Zero Waste	Reemi (2022). ' <u>Local Entrepreneurship Model Concept</u> <u>Note</u> ' (Concept note)
Trust	Solution	Castro and Mang (2022). <u>'Breaking the Silence - Group</u> Discussions, Social Pressure, and the Adoption of Health <u>Technologies</u> '. SSRN
Research and Grant Institute of Ghana	WASH grant 2019, WASH Programming for Women with Obstetric-Fistula Induced Incontinence in Ghana (Recognition research)	ReGIG (2022). ' <u>Programming for women with obstetric</u> <u>fistula induced incontinence in Ghana</u> ' (Project brochure)
Scale - 4 journa	l articles (13 citations in total)	
Translators Without Borders	DIP grant 2013, ESI grant 2014, Scale grant 2016, Diffusion grant 2016, 'Words of Relief'	O'Brien (2016). <u>'Training Translators for Crisis</u> <u>Communication: Translators Without Borders as an</u> <u>Example</u> ', <i>Mediating Emergencies and Conflicts</i> (pp 85– 111) (12 citations)

Make Music Matter and Panzi	DIP grant 2014, Music Therapy After-Care for Sexual Violence Survivors (Panzi); Scale grant 2016 (Panzi) and additional Scale grant 2016 (MMM), Healing in Harmony	Cikuru (2021). ' <u>Impact of the Healing in Harmony</u> program on women's mental health in a rural area in <u>South Kivu province, Democratic Republic of Congo</u> ' <i>Global Mental Health</i> , Cambridge University Press (1 citation)
HealthRight International	Scale grant 2020, Reducing psychological distress with vulnerable conflict-affected populations: scaling up Self- Help Plus with South Sudanese women refugees in Uganda	Leku et al (2020). ' <u>SH+ 360: novel model for scaling up a</u> mental health and psychosocial support programme in <u>humanitarian settings</u> ' <i>BJPsych Open</i> (0 citations)
Physicians for Human Rights	Scale grant 2020, MediCapt: Using Technology to Strengthen Capacity to Investigate and Prosecute Sexual Violence Crimes	McKeon Olson (2022). ' <u>Development and validation of a</u> <u>data quality index for forensic documentation of sexual</u> <u>and gender-based violence in Kenya</u> ' <i>PLOS3</i> (0 citations)

Non focus area grants (pre 2020)

Grant	Notes	Description of output	Theme	
	ESI, DIP and Diffusion grants - 16 journal articles (91 citations in total); 1 event briefing; 8 self-published reports (grey literature)			
University of Leicester	ESI grant 2018, Self- examination intimate DNA swabs to enhance victim- centred responses to sexual violence in humanitarian contexts	Smith et al (2019). ' <u>Achieving more</u> with less: A critical review of protocols for forensic investigation of sexual violence in low-resource environments' <i>Forensic Science International Synergy</i> (3 citations)	GBV	
Abdul Latif Jameel Poverty Action Lab (J-PAL) Europe	DIP grant 2015 (lead grantee - WAHA), Diffusion grant 2019, Linking interventions to cultural ceremonies and practices to reduce intimate partner violence among displaced populations in humanitarian crises	Sharma et al (2020). ' <u>Displacement-</u> <u>related factors influencing marital</u> <u>practices and associated intimate</u> <u>partner violence risk among Somali</u> <u>refugees in Dollo Ado, Ethiopia: a</u> <u>qualitative study</u> ' <i>Conflict and Health</i> (11 citations) Sharma et al (2020). ' <u>Khat use and</u> <u>intimate partner violence in a refugee</u> <u>population: a qualitative study in Dollo</u>	GBV	

		Ado, Ethiopia' BMC Public Health (4 citations)	
sanitation for humanitarian responses: an incremental approach for worm-based		Furlong, Lamb and Bastable (2017). ' <u>Learning from Oxfam's Tiger Worm</u> <u>Toilets projects</u> ' 40th WEDC International Conference Loughborough 2017	WASH
Universität fürDIP grant, 2016, MSQ -Bodenkultur,Development of a field test kitWien /for the microbial qualityUniversity forcontrol and detection ofNaturalpathogens in untreated andResources andtreated faecal sludgeLife Sciences,Vienna		Bousek et al (2018). ' <u>Development of a</u> <u>Field Laboratory for Monitoring of</u> <u>Fecal-Sludge Treatment Plants</u> '. Water (1 citation)	WASH
Aerosan DIP grant 2016, Measuring the effectiveness and efficiency of desiccation as a method for faecal sludge volume reduction in high density environments		Bourgault et al (2019). ' <u>Experimental</u> <u>Determination of Moisture Sorption</u> <u>Isotherm of Fecal Sludge</u> ' Water (5 citations)	WASH
IFRC DIP grant 2013, Diffusion grant 2018, Menstrual hygiene in emergency situations		Giles-Hansen et al (2019). ' <u>Experiences</u> from East Africa and lessons in addressing the menstrual hygiene needs of women and girls' Waterlines (5 citations)	WASH
		Machado Soergel and Bonucci (2022). ' <u>Menstrual Hygiene Management</u> <u>Friendly and Accessible WASH</u> <u>Facilities for Emergencies</u> ' (Guidance)	
University of ESI grant 2018, Achieving Victoria safe free residual chlorination at point of consumption in emergencies		Wu and Doria (2020). ' <u>Towards a</u> <u>Predictive Model for Initial Chlorine</u> <u>Dose in Humanitarian Emergencies</u> ' <i>Water</i> (5 citations)	WASH
		Wu and Doria (2021). ' <u>Evaluation and</u> application of chlorine decay models for humanitarian emergency water supply contexts' Environmental Technology (2 citations)	

The Nonviolent Peaceforce	ESI grant 2018, Myanmar Mobile Conflict Monitoring Initiative	Guay et al (2018). ' <u>Myanmar Civilian</u> <u>Monitoring Initiative, Learning Phase</u> <u>Final Report - Navigating Opportunity</u> <u>& Risk in the Digital Age</u> ' The Policy Lab/The Nonviolent Peace Force/Elrha (Learning report)	Peacekeeping
Jesuit Refugee Service	DIP grant 2016, Little Ripples: Refugee-led, in-home early childhood education	Jesuit Refugee Service (2019). ' <u>Little</u> <u>Ripples Assessment 2019: Refugee</u> <u>camps Kounoungou and Mile, eastern</u> <u>Chad</u> ' (Evaluation report)	Education
Liverpool School of Tropical Medicine	DIP grant 2013, Lot Quality Assurance Sampling; Diffusion grant 2019, Assessing refugee health in camps and settlements in Northern Uganda: diffusion of Lot Quality Assurance Sampling from humanitarian settings in South Sudan	Vollmer et al (2019). <u>'An Assessment</u> of Health Service Coverage in Refugee and Host Communities in Northern Uganda: Key Findings and Policy Implications from a Two-district <u>Household Survey</u> ' LSTM/Elrha (Briefing report)	Health
Action Against Hunger (UK and France)	ESI grant 2014, DIP grant 2015, Improvements in the diagnosis of child undernutrition through the assessment of emerging biomarkers of deprived metabolic status and vulnerability; ESI grant 2018, The invisible group: Understanding uncomplicated severely acutely malnourished infants <6m through systematic screening and community-based management	Kangas et al (2019). 'Impact of reduced dose of ready-to-use therapeutic foods in children with uncomplicated severe acute malnutrition: A randomised non- inferiority trial in Burkina Faso' PLoS Med (33 citations) Kangas et al (2020). 'Vitamin A and iron status of children before and after treatment of uncomplicated severe acute malnutrition' Clinical Nutrition (12 citations) Dailey-Chwalibóg et al (2020). 'Weaning and stunting affect nitrogen and carbon stable isotope natural abundances in the hair of young children' Scientific Reports (5 citations) Nikièma et al (2020). 'Adequacy of Nutrient Intakes of Severely and Acutely Malnourished Children Treated with Different Doses of Ready-To-Use Therapeutic Food in Burkina Faso' Journal of Nutrition (4 citations)	Health

Flinders University	ESI grant 2017, Scalable Satellite-Based Information Delivery	Al-Nuaimi et al (2018). ' <u>Demonstrating</u> <u>a Low-Cost and Zero-Recurrent-Cost</u> <u>Hybrid Mesh & Satellite Based Early</u>	Communicatio ns
Dalberg Global Development Advisors	DIP grant, 2017, Hotline-in-a- Box	Dalberg Design, IFRC (2020). ' <u>Hotline</u> in a Box Toolkit'. (Guidance - Grey literature)	Accountability
Oxfam	ESI grant 2016, Capturing informal feedback and complaints in humanitarian situations for more responsive and accountable programming; DIP grant 2017, Humanitarian Informal Feedback Project	Gaboune (2019) ' <u>Capturing informal</u> <u>feedback and complaints in</u> <u>humanitarian situations for more</u> <u>responsive and accountable</u> <u>programming</u> ' Oxfam (Evaluation report)	Accountability
Terre Des Hommes	DIP grant 2016, Implementing PM+ through humanitarian agencies	Nemiro et al (2020). <u>'After the</u> <u>randomized controlled trial (RCT):</u> <u>Implementing Problem Management</u> <u>Plus (PM+) through humanitarian</u> <u>agencies</u> ' Terre Des Hommes/Elrha. (Case studies)	Health
		Nikièma et al (2021). ' <u>Complementary</u> <u>feeding practices and associated</u> <u>factors of dietary diversity among</u> <u>uncomplicated severe acute</u> <u>malnourished children aged 6–23</u> <u>months in Burkina Faso' Maternal and</u> <i>Child Nutrition</i> (2 citations) Nikièma et al (2021). ' <u>Availability, use,</u> and consumption practices of ready-to- use therapeutic foods prescribed to children with uncomplicated severe acute malnutrition aged 6-59 months during outpatient treatment in Burkina Faso' Appetite (1 citation) Strysko et al (2021). ' <u>Biomarkers Make</u> the Case for a Comprehensive Approach to Diagnosing Severe Acute <u>Malnutrition' Pediatrics</u> (0 citations)	

		Humanitarian Technology Conference (GHTC) (3 citations)	
University California Davis	ESI grant 2016, An Autonomous UXO Identification Platform	Zheng (2020). ' <u>Extended Omega-k</u> algorithm for synthetic aperture radar imaging in multi-layer medium' (Self- published article)	Protection

Annex 13. Cited HIF research outputs

This annex indicates the number and examples of publications that cite HIF research outputs, for a sample of reports. This was compiled using two methods:

- 1. Verification of publications recorded by the HIF (Outputs HIF 1 May 2022). This enabled us to identify the most common HIF outputs cited in wider publications most notably the 2013 WASH Gap Analysis. Examples in column 3 include the examples in the database that we were able to verify.
- 2. **Dimensions search.** Using the <u>Dimensions</u> tool we searched for the title of the output and recorded the number of publications that were listed in the search results (column B). Column C includes examples of verified open access publications from Dimensions. It is noted that the Dimensions search is limited to academic papers with accessible reference lists. Therefore, policy papers and event briefings are not included.

Output	Number of publications that cite the output (using Dimensions title search)	Examples of open access publications and outputs examples that cite the output (from Dimensions and HIF internal reporting)
2013, Gap analysis in emergency water, sanitation and hygiene promotion (NB. No citations were found in Dimensions of the 2021 WASH Gap Analysis Update paper)	18	 Ali at al (2015) 'Effectiveness of emergency water treatment practices in refugee camps in South Sudan'. Bulletin of the World Health Organisation. Mosello et al (2016) 'Sanitation under stress: how can urban services respond to acute migration?' ODI Working Paper. ICRC (2016) 'Urban services during protracted armed conflict' International Committee of the Red Cross. Zeitoun et al (2017) 'Urban Warfare Ecology: A Study of Water Supply in Basrah' International Journal of Urban and Regional Research Yates et al (2017) 'WASH Interventions in Disease Outbreak Response' Oxfam Mitro et al (2019) 'Barriers and Facilitators to Chlorine Tablet Distribution and Use in Emergencies: A Qualitative Assessment' Water Ajibade et al (2019) 'Modelling of a sustainable refugee camp drainage system for stormwater management, Environmental Science Water Research and Technology Namara et al (2020) 'Barriers and motivators to participation in hand washing promotion programs at household level among refugees in Rhino Settlement, Arua District, Uganda' Cogent Medicine Parikh et al (2021) 'Synergies and trade-offs between sanitation and the sustainable development goals' UCL Open: Environment Pandit (2022) 'Constraints and current practices of

		 menstrual hygiene among Rohingya adolescent girls' Heliyon Wilbur et al (2022) '<u>The inclusion of disability within efforts</u> to address menstrual health during humanitarian emergencies: A systematized review' Frontiers in Water
2016, WASH in Emergencies Problem Exploration Reports (multiple reports of various themes ²)	14	 Yates et al (2017) '<u>WASH Interventions in Disease</u> <u>Outbreak Response</u>' Oxfam Salami and Umego (2018) '<u>Household Environment and</u> <u>Malaria in Pregnancy in Ibadan, Nigeria</u>' SCIRP Health Cooper et al (2021) '<u>Environmental health conditions in the</u> <u>transitional stage of forcible displacement: A systematic</u> <u>scoping review</u>' Science of the Total Environment
2018, Too Tough To Scale	1	• Lewis et al (2019) ' <u>Time to stop polishing the brass on the</u> <u>Titanic: moving beyond 'quick-and-dirty' teacher education</u> <u>for inclusion, towards sustainable theories of change</u> ' <i>Manchester Metropolitan University</i>
2019, Humanitarian Innovation Guide	6	 Wang et al (2020) 'Ethical Considerations Associated with "Humanitarian Drones": A Scoping Literature Review' Science and Engineering Ethics Wang et al (2022) 'Supporting value sensitivity in the humanitarian use of drones through an ethics assessment framework' International Review of the Red Cross Potter et al (2021) 'Academic-humanitarian technology partnerships: an unhappy marriage?' PNAS Opinion Thomas and Rony (2022) 'Lessons to Be Learned from 'Kerala Flood Response' and Building Disaster Resilience' SSRN Electronic Journal Hyland et al (2022) <u>Changing the Dynamics and Impact of Innovation Management, A Systems Approach and the ISO Standard</u> (Book)
2019, Water, Sanitation & Hygiene Innovation Catalogue: A collection of innovations for the humanitarian sector	5	 Schmitt (2021) '<u>Innovative strategies for providing</u> menstruation-supportive water, sanitation and hygiene (WASH) facilities: learning from refugee camps in Cox's <u>bazar, Bangladesh</u>' Conflict and Health Ashuro (2021) '<u>Bacteriological Quality of Drinking Water</u> and Associated Factors at the Internally Displaced People Sites, Gedeo Zone, Southern Ethiopia: A Cross-sectional Study' Environmental Health Insights
2020, Training for the inclusion of	0	• Barbelet and Palmer (2020) <u>'Implementing the IASC</u> Guidelines on inclusion of persons with disabilities in

² Faecal Sludge Management, Handwashing, Solid Waste Management, Surface Water Drainage and Water Treatment

people with disabilities and older people in the humanitarian sector: a review of current practice		humanitarian action' ODI HPG
2020, Gap Analysis: The Inclusion of People With Disability and Older People in Humanitarian Response	3	• Wilbur et al (2022) ' <u>The inclusion of disability within efforts</u> <u>to address menstrual health during humanitarian</u> <u>emergencies: A systematized review</u> ' <i>Frontiers in Water</i>
2021, Gap analysis of gender-based violence in humanitarian settings	1	 Raftery (2022) <u>'Gender-based violence (GBV) coordination</u> in humanitarian and public health emergencies: a scoping review' Conflict and Health

Annex 14. Outcomes against the 4Ds and strategy areas

To what extent does the HIF's strategy support the HIF in achieving the identified outcomes?

Strategy components	Findings/outcomes
Elrha's Strate	egy
Define	 Increased sector coordination and shared momentum around key issues through the TWGs involvement with the HIF's gap analysis work. The DOAI and GBV calls have demonstrated the potential role of innovation in 'systems change' innovation to address complex problems. The HIF contributed to similar problem prioritisation exercises, such as the Global WASH Cluster's prioritisation exercise.
Develop	• Focus on scale has contributed (alongside other external factors) to the sectors shift towards funding scaling.
Distill	 Humanitarian Innovation Guide and Too Tough To Scale publications have been published online, accessed and used by other organisations (although interviewees were unable to articulate specific outcomes of this).
Drive	 Advocacy contributed to adoption of several HIF-funded innovations, particularly in WASH where the HIF's engagements have contributed to scaled procurement of innovations from Faircap, Waterscope and Oxfam Handwashing Station. The HIF has documented learning from J2S funds on key factors for driving adoption including on established pricing, manufacturing and business models, and the 'soft-side' of relationships and strategic buy-in at different levels play critical roles.
HIF Strategy	2018-20
End to end solutions	 The HIF's Scale calls, WASH and GBV Scale grants and pre-2020 Diffusion grants have enabled projects to move beyond pilots, which has resulted in adoption outcomes. The HIF's Scale funding and Too Tough To Scale paper has made some (small) contributions towards a sector-wide shift towards driving scale. The most significant adoption outcomes are the result of multiple funding rounds and long-term support from the HIF, funding projects through the different stages of the innovation pathway (see Illustrative highlight 3). The HIF is recognised for funding research at the Recognition stage of the innovation pathway, which has contributed to grantee learning and disseminated research outputs. The extent to which the HIF plays a role in supporting the uptake of Recognition grant findings into solution development

	is not yet clear.	
New partnerships	 The HIF has continued to develop its partnership with ADRRN and national partners SEEDS and CDP. There is evidence that partnerships play an important role in achieving outcomes at every stage of the innovation pathway. Grantees cite the HIF's role in supporting this. 	
Local engagement	 The HIF has awarded grants to local organisations, which have enabled project level outcomes. The HIF's engagement with ADRRN, CDP and SEEDS has helped improve members' innovation knowledge and practice, which has made early steps towards building local innovation ecosystems in the Philippines, Indonesia and India. Extensive engagement with local actors and crisis-affected communities contributed to the WASH Gap Analysis findings, which are being used by the HIF and WASH TWG. However, due to its breadth, the direct findings from the consultation have limited use without additional research. Engagement beyond its grants and national partners is limited. There is a lack of local engagement in Distil and Drive strategies and outcomes. 	
Bigger problems	 There is evidence of shifts in understanding in the sector of the role of innovation in 'bigger', more complex problems such as GBV and DOAI programming. The HIF has funded a variety of non-product innovations, including process innovations, research, tools and guidance, a number of which have scaled, such as Field Ready (see Illustrative Highlight X) and IRC's GBV M&E Toolkit. The HIF's WASH problem definition research has contributed to increased coordination around priority problems through the TWGs. 	
Innovation ecosystem change	 The HIF's Ethical Toolkit is valued by grantees and peers as a resource that fills a gap. Outcomes and impact of the tool are not yet evidenced. The HIF's role as a convener was limited by Covid-19, but was previously valued by humanitarian innovation practitioners and made contributions to shared learning. 	
Creating tools	 The Skills building area has had limited investment so far due to funding cuts in 2021. Workshops and guidance materials have contributed to grantee learning outcomes. The value and use of these materials varies by grantee. There is stronger evidence for the contribution of tailored support, such as the intensive workshops for scaling grantees, compared to general written resources. The Humanitarian Innovation Guide has been used by grantees and, to some extent, others in the sector, but its contribution to outcomes is not well evidenced. There is limited evidence of uptake of the HIF's tools beyond grantees. Covid-19 has limited wider dissemination of tools such as the Ethical Toolkit. 	

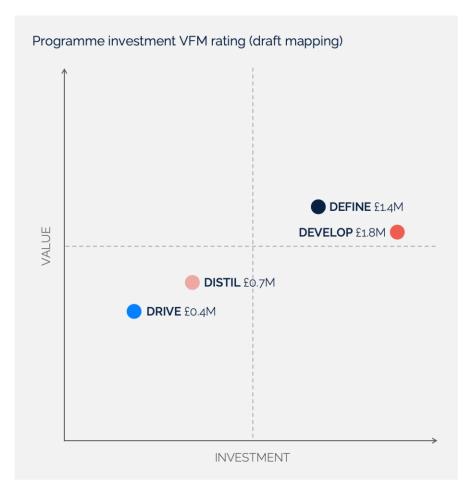
	Illustrative highlight 6 explores the ethical toolkit and some of the barriers to
	uptake in more detail.

Annex 15. Value for money

The VFM chapter notes that there was **limited clarity about what value looks like in practice for the investments beyond those in the partners** (for instance, specifically what outcomes are considered "high" value for the HIF's work on Define) and data is not usually collected to track the effect that these investments had on other actors. This annex provides some draft criteria for assessing learning and scaling outcomes for the 4Ds, which could provide a starting point for the analysis.

4Ds	Learning - rating criteria	Scaling - rating criteria	
Define	 High - research and gap analyses have identified and prioritised key problems and the learning has been used across the sector Medium - research and gap analyses have identified some problems. Dissemination has been limited. Learning tends to be used internally Low - key problems are yet to be identified thoroughly 	 High - the HIF research and gap analyses are used by senior humanitarian managers to develop projects and strategies Medium - senior humanitarian managers are starting to commit to address the problems explored in HIF research and gap analyses Low - the problem is yet to be shared with senior humanitarian managers 	
Develop	High - learning about relevant innovation project approaches has been disseminated and used across the sector Medium - learning about relevant innovation project approaches is mostly used internally Low - learning about relevant innovation project approaches has not yet been generated	 High - the HIF support services provided to grantees have been used by partners and other actors within the sector Medium - the HIF support services provided to grantees have been used by partners and other actors within the sector Low - the HIF support services provided to grantees have not yet been used by partners 	
Distil	 High - the HIF has been able to capture and package evidence that can easily be accessed by actors across the sector Medium - the HIF has captured evidence to be shared internally Low - the HIF has not yet captured evidence 	 High - the HIF has effectively disseminated evidence which currently used across the sector Medium - the HIF has disseminated evidence which currently used internally Low - the HIF has not yet disseminated evidence 	
Drive	 High - the HIF has been able to generate learning on effective adoption strategies which is currently used across the sector Medium - the HIF has been able to generate learning on effective adoption strategies which is currently used internally Low - the HIF has not yet been able to generate learning on effective adoption strategies strategies 	 High - the HIF has enabled innovations to be adopted by engaging key decision makers and actors across the sector Medium - the HIF has enabled innovations to be adopted by the innovators by engaging with each project funded Low - the HIF has not been able to support the adoption of innovations 	

Annex 16. Value for money programme level mapping



Annex 17. Due diligence

The due diligence process is outlined on the HIF website³ and includes:

- A due diligence form, covering the Directors, Supply Chains, and Professional and business standing.
- Anti-Fraud, Anti-Bribery & Anti-Terrorism Policy checks. These policies must include types of fraud, mitigating actions, checks on downstream suppliers, training and whistleblowing processes
- Child Protection and Safeguarding Vulnerable Groups Policy checks. These policies must cover work with vulnerable groups, disclosure checks, training, and reporting.
- Security policy checks (for all innovators working in "high risk countries"). This policy must cover briefings, security manuals, facilities, position on firearms, communications plans, incident reporting, evacuation and hibernation processes, and abduction and kidnapping processes.

Small organisations (<10m per year) receiving large grants as well as organisations registered outside of the large Western economies have an enhanced due diligence process that includes

- Financial management procedure checks. This document should cover cash management, bank reconciliation, segregation of duties, accounting software, invoice coding, transaction management, budget review processes, internal audits, external audits, and rules around transfer of money to partners.
- Procurement policy checks. This process should cover levels of authorisation, minimum standards of ethical procurement, due diligence processes for down-stream suppliers, when quotes are sought, the purchase process, and asset registers.
- Organisational code of conduct and organogram.

In addition to these policy checks, the teams provide the organisation's legal registration documents as well as the names, date of birth and nationality of all project staff for vetting. There is also a standard set of grant terms that can only be negotiated in very exceptional circumstances.

³ <u>https://www.elrha.org/support/hif/hif-on-boarding/</u>