Short-term strategy - 2024

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TABLE OF CONTENTS

1 Rationale 1
2 Approach 2
3 Vision, mission and values 3
4 Short-term strategies 3
   4.1 Organisation 3
   4.2 Business model and development 4
   4.3 Activities and outcomes 5
   4.4 Communications, dissemination and advocacy 6
5 Immediate actions 7
6 Future strategy 7
1 Rationale

Since its creation in 2004, Evidence Aid (EA) has been generating a large and unique body of knowledge relevant to humanitarian crises, mainly in the form of summaries of systematic reviews, which are curated in thematic collections. EA’s relevance remains because of the increasing number of humanitarian crises worldwide but, unfortunately, EA has experienced repeated financial setbacks that have compromised its viability.

Several issues have compromised the implementation of EA’s existing strategy and the achievement of EA’s objectives. These issues have been raised by EA members, partners, and stakeholders in several informal exchanges. Namely:

- evidence related to humanitarian interventions tends to be inconclusive or too context dependent, making it difficult to perceive as relevant and usable in other settings;
- while evidence summaries are valuable knowledge products, they may not be suitable in format and content to inform policy, decisions and practice;
- those making decisions or implementing programmes in humanitarian settings do not seem to perceive the need for best available evidence to support their decisions and actions; and
- the philanthropic and altruistic funding landscape seems to have become more difficult to access for those working in the area of best practice in the use of evidence to inform policy, decisions and practice.

In June 2022, several new Trustees were appointed to the EA Board and the challenging financial situation for EA became more prominent in Board meetings. Actions taken to date include: (i) attempts to rationalising and reducing expenditure; (ii) contracting a part-time ‘business developer’ to assist in business development and finding funding opportunities; (iii) searching for help and advice among preferred EA stakeholders through a series of online meetings; and (iv) preparing this new short-term strategy.

In the absence of opportunities to secure core infrastructure funding, there are two mechanisms that would allow EA to survive:

- (i) obtaining funds for specific projects (e.g. PAHO phase 4) and successful responses to requests for proposals; and
- (ii) becoming part of another institution or organisation.

Regardless of the mechanism that could bring the financial resources needed for EA to continue fulfilling its mandate, we have learned from conversations with Trustees and stakeholders that EA could benefit from short-term decisions that could, eventually, bring instrumental changes to significantly increase the chances of success.

While the viability of EA impacts the income of EA staff, it is clear that efforts to make EA viable are guided by an unequivocal vocation to serve communities making decisions related to and affected by humanitarian crises.

The objective of this short-term strategy is to put in place a series of actions that will make EA financially sustainable for at least 12 months, ensuring that EA remains faithful to its vision and mission, focusing on:
1) enhancing the relevance of EA for communities, practitioners, and decision-makers; and
2) optimising the identification and securing of funding.

This short-term strategy does not substitute, but rather complements the existing EA strategy to 2025.

The following are out of scope of this short-term strategy:

- recommendations related to becoming part of another organisation, or which organisation; and
- recommendations or suggestions for changes in the status or regulations of EA.

2 Approach

In order to develop this short-term strategy, we carried out the following activities:

- Review of progress on preparation of the draft strategy 2024 to 2029.
- Review of the draft strategy already being developed.
- Interviews with EA staff, with structured themes.
- Interviews with EA Trustees: six out of eight trustees (other than the author of this strategy) were interviewed with structured themes.
- Attendance at many of the discussion with ‘friends’ that have taken place in the context of finding mechanisms to ensure EA becomes viable.

The themes in the Trustee’s interviews were: explanation of the Trustee’s role, opinion about current EA staff, perception of the current EA financial situation and the reasons for it, options for moving forward and finding solutions, identification of the key issues to be tackled in the strategy, and positioning of the Trustees in the near future.

Based on these exchanges, common themes emerged. These themes, as well as personal perceptions and opinions, have informed the contents of this short-term strategy.

No formal protocol or qualitative research method was followed to produce this document.

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Evidence Aid Strategy 2024-2029, draft developed by Claire Allen, Ingrid Mason and Jane Copsey.

3  Vision, mission and values

The vision and purpose of this strategy adopts the spirit of the existing vision, mission and values for EA, but an alternative wording is proposed in an attempt to make it descriptive and rooted in the experiences of those affected by humanitarian crises. Although it is not urgent to adapt new wording for EA’s vision and mission, it could be helpful for short-term communication purposes (see section 4.4).

Vision

- Existing: Loss of life and livelihoods in disasters is minimised through the delivery of effective disaster risk management and response.
- New: Loss of life and livelihoods and injustices suffered by particularly vulnerable communities in humanitarian crises are effectively minimised.

Purpose

- Existing: Before, during and after disasters, the best available evidence is used to design interventions, strategies and policies to assist those affected or at risk.
- New (called ‘Mission’): To provide unbiased knowledge products, timely guidance and tailored training to support communities, practitioners and decision-makers in preparing for and facing the consequences of humanitarian crises.

Values (new)

- Compassion: our team are passionate about the work they do, and the importance of the best available evidence being used to minimize impacts on the most vulnerable populations affected by natural hazards, health emergencies and conflict, in a way that is effective, ethical, moral and fair.
- Integrity: finding the best available evidence, using our priority setting methods, working with partners, and using our judgement to provide unbiased, high-quality information and making it accessible to all.
- Value for money: ensuring that Evidence Aid provides freely available resources in a timely cost-effective manner, on a single platform to provide decision-support.

4  Short-term strategies

4.1  Organisation

Rationale

EA is compact due to the small size of its paid staff (two part-time persons). However, it counts on a network of residents, interns and volunteers, consultants, Trustees, technical advisors and partners, which is an asset to minimising costs but, at the same time, is a burden to manage and can be unstable.

Currently, the operations and scientific domains at EA do not seem to operate as efficiently as needed and the Trustees, while providing invaluable inputs, do not seem capable of influencing the
way EA operates. Some recent decisions (or lack of them) in relation to potential new working opportunities, illustrate this.

With a true recognition of the contributions made by all those involved and although subjective in nature, it seems that EA staff and Trustees have, to some extent, entered into a dynamic of conformism, if not pessimism about the future of EA, only counterbalanced by the efforts of some.

**Proposal**

At this critical stage, we need decisions to be made quickly. This can be done effectively if we find the appropriate mix of decision-space among EA staff, Trustees and technical advisors. I propose the following:

1) Daily operations of EA are carried out by an ‘Operations Director’ (OD, Claire Allen) as a paid member of staff. The current designation is ‘Operations Manager’; but the use of ‘OD’ highlights the full decision capacity of this position.

2) The OD supervises paid-for administrative support (Jane Copsey) and business development (Ingrid Mason).

3) Due to the limited paid time of the OD, additional specific support be sought from volunteers, interns, consultants, and Trustees, with specific tasks and time assignments, for limited periods of time (the ‘Executive Team’). This support includes management tasks.

4) The Scientific Director (SD, Mike Clarke) provides advice on scientific matters in a voluntary, un-paid capacity.

5) Due to the limited time availability of the SD, additional specific support be sought among volunteers, interns, consultants, and Trustees, with specific tasks and time assignments, for limited periods of time (the ‘scientific team’).

6) The OD and SD report to the Board of Trustees.

7) Without attempting to replace the guidance document for Trustees§, the Board of Trustees:
   a. will have a chair (likely newly appointed) who will support Trustees in fulfilling their roles;
   b. will focus on the financial sustainability of EA, reporting on specific actions taken; and
   c. will respond to specific requests from the OD or SD.

### 4.2 Business model and development

**Rationale**

The current business model has largely relied on framework contracts with large multilateral organisations, such as the Pan-American Health Organisation (PAHO), plus other projects that have provided variable amounts of income. Income to support EA staff and business development comes from inclusion of some of the costs in the project’s budget and the differences between the budgeted amount and the actual expenditure, which is reduced by the use of un-paid volunteers.

§ Evidence Aid. Guidance for Evidence Aid Trustees.
The funding opportunities seem to be decided on using quite a selective approach, through which EA only engages with projects that are clearly focusing on the core of EA mission.

EA has been able to progress in unexpected, emerging areas (such as during the recent COVID-19 pandemic) that made the need for evidence more acute. This is an indication of the relevance of EA, but it can also reflect a weakness.

Proposal

EA needs to consider diversifying its funding acquisition mechanisms, including:

- Core funding for infrastructure, equipment and running costs from philanthropic organisations, unlinked from specific projects.
- Fee for service contracts and becoming the ‘preferred vendor’ for multilateral organisations.
- Regular screening and responding to requests for proposals.
- Submitting unsolicited proposals.
- Considering work that is more clearly outside the health sector.
- Diversifying the activities carried out (see section 4.3).

In relation to responding to requests for proposals and in the short run, EA should:

- Create an agile decision-making mechanism implemented by the OD, supported by the Executive Team that can make decisions in less than one week.
- Continue or strengthen the search for funding opportunities with interns and volunteers under the supervision of Ingrid Mason.
- Identify and establish a database containing a diverse pool of technical experts who can be mobilised and contacted for support at short notice.
- Use a decision-making template that supports decision-making and provides transparency**.

4.3 Activities and outcomes

Rationale

From recent multiple conversations and reflections, EA is not seen as a priority support tool or ‘go to place’ for decision-makers and practitioners in the humanitarian context. This could be deemed as saying that EA is not complying with its mission or, conversely, that the decision makers are not finding the material relevant or in a format that can easily be used for their immediate needs. On the other hand, there is universal recognition that EA has built an extraordinary valuable evidence resource that can, by no means, be disregarded or allowed to disappear.

The current EA strategy lists three intended outcomes with associated activities. These outcomes are:

** Variables to include: code of the proposal; title; client; main activities; relevance for EA; expected level of effort to develop the proposal; expected level of effort by type of staff; expected budget; duration; expected start; priority (top, conditional, nice to have, not at all).
• Outcome 1 - Enhance availability and accessibility of high quality, usable evidence. *This outcome focuses on (i) making evidence products available and (ii) advocating for evidence users to demand more robust evidence standards. The main activities refer to the production of the EA summaries with little indication on the advocacy component.*

• Outcome 2 - Enhance responsiveness of research to the needs of those making decisions about disasters. *This outcome focuses on the research pillar of knowledge translation (e.g. producing systematic reviews) although activities also point to providing syntheses and synopses.*

• Outcome 3 - Skills, behaviours, attitudes, decision-making structures, and incentives support evidence-based action in disasters. *This seems to be an advocacy outcome with activities pointing to networking and training.*

The outcomes and activities attached to them describe a wide range of activities that EA can carry out. However, it seems that EA has focused on only a few of them in recent years.

**Proposal**

The current strategy has many possible activities for EA. While the outcomes could be restructured, they still harbour a widened menu of activities. The SD, as well as Trustees, should actively consider identifying opportunities in the following areas:

- Continuing to produce evidence summaries and populating existing or new EA collections.
- Carrying out systematic reviews of issues relevant (or not) to humanitarian crises, in the health sector and beyond.
- Developing methods to synthesise evaluations and carry out synthesis of evaluations; portraying this to existing partners and stakeholders.
- Developing methods on guidance development and producing guidance relevant to humanitarian crises, including considering rapid approaches.
- Considering an expansion to other types of evidence products, e.g. evidence gap maps.
- Organising or supporting training in topics related to evidence synthesis (in humanitarian settings or not), humanitarian crises (in relation to evidence synthesis or not); including scientific and methodological aspects, socio-political issues and ethics, using case studies where possible. The training initiatives could take the form of formal post-graduate training, ad hoc courses, training webinars, or other forms of on-line training. EA should consider the possibility of formally engaging with an academic institution to ensure official certification for these courses.

For most of these activities, partnerships will be required with a range of organisations (e.g. ICRC, ELHRA, H2H, SC, IRC, or academia; see Ingrid Mason’s report for further details on institutions‡).

**4.4 Communications, dissemination and advocacy**

**Rationale**

The perception of EA among partners and stakeholders is impeccable. The organisation and staff are very much appreciated and EA has a very good reputation. However, EA is often portrayed by itself as a ‘small (if not ‘humble’) initiative’ navigating a highly competitive and limited funding environment, in the humanitarian sector.
Fully recognising the value and commitment of staff and colleagues having worked in the current EA communication materials, the aesthetics of the evidence products of EA could be improved.

Proposal

EA must be portrayed as an extraordinary initiative that – with minimal management structure and costs - creates, grows, and develops a large network of experts, practitioners, and decision-makers to support the use and generation of evidence products relevant to humanitarian settings. This (or any adaptation of it) should be the EA calling card, reinforcing its uniqueness.

- The newsletter and website need an immediate change, even if this is provisional, to follow modern standards and good examples.
- Current exchanges with ‘friends’ must become strategic by identifying ‘key friends’ and bringing content to the conversations, as concretely as possible (e.g. joint proposals, training initiatives, specific examples of content relevant to them). Specific Trustees or collaborators should be assigned to specific topics, domains, or initiatives such as a Trustee with marketing experience should be specifically designated to this area in the short-term.
- Consider which activities in dissemination and advocacy bring quick returns (e.g. publications, editorials, dissemination webinars or conferences).

5 Immediate actions

This short-term strategy will be supported by the following series of actions:

1) Ensure that this short-term strategy, the processes for its adoption as well as the formal aspects, are consistent with current EA regulations and practices.
2) Each Trustee should be willing to confirm their commitment or step down from the Board considering the issues raised in this strategy.
3) Identify (as soon as possible) experts in the following fields:
   - experts who can respond to requests for proposals; and
   - communication experts / graphic / website designers.

The measure of success of this strategy is the viability of EA 12 months after adoption of the strategy.

6 Future strategy

This short-term strategy and the other actions being taken to position EA, should move EA to a place that will allow thinking and planning for the long-term. These issues will need further development:
• Reviewing the current strategies.
• Widening the portfolio of activities (see section 4.3); EA as a think-tank.
• Priority setting initiatives, including knowledge-brokering.
• Rebuilding the evidence database, considering similar initiatives such as Epistemonikos†† or Health Systems Evidence‡‡; capitalising on AI.
• Developing and implementing web enhancements (e.g. formats for the summaries, translations, gap maps) and ensuring user engagement and feedback.
• Formalising the collection of feedback from stakeholders and users of evidence.
• Generating a way to understand how the EA website is used, with web analytics and other suitable tools.
• Conducting annual critical organizational and staff appraisals, set up by Trustees.

†††† https://www.epistemonikos.org/ [accessed 10/03/2024].
‡‡‡‡ https://www.healthsystemsevidence.org/ [accessed 10/03/2024].