LINKING EVIDENCE WITH POLICY AND PRACTICE

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Up-to-date research that informs policy and practice is vital in the constantly evolving field of international development. Research ensures that development programmes respond to the realities of people. Sharing that research and knowledge effectively is critical to ensuring that what we know is acted upon. In this article, Andrew Chetley presents Healthlink Worldwide's work in support of the effective communication of research.

The World Health Organization report on *Knowledge for Better Health* (WHO, 2004) called for “stronger emphasis...on translating knowledge into action to improve public health by bridging the gap between what is known and what is actually being done”. Although the call was specific to the health sector, there are similarities in other sectors – much of the existing knowledge is not being effectively used. Greater support is needed to ask new questions of old knowledge – to explore ways of increasing access to this knowledge so new stakeholders can engage with it as they want.

If there is one thing that Healthlink Worldwide has learned over the 30 years that it has been working to share knowledge and transform sound research findings into improved practice and effective and workable policies, it is that there is no simple pathway for this process (see *Creating a dialogue – Healthlink’s role* for an example of Healthlink’s experience).

Related to that, is the understanding that there is also no single solution: systematically and strategically combining approaches attuned to the local settings and circumstances offers the most effective and sustainable way forward. It is important to look at the communication of research as the result of a complex set of interactions and relationships that includes critical analysis of decision-making processes and the actors and factors that influence those processes.

In 2004, the UK Department for International Development (DFID, 2004), introduced a framework for its investment strategy around research that included an acknowledgement that “the process of take-up of research is not linear. Policy makers act according to their own timetables, and according to the changing political situation”.

However, DFID ensured that considerable emphasis was placed on the
importance of communication and engagement with research findings in order to shape and influence development policy. A mandatory 10% of all new research funding was committed to communication of the research; and a major stand-alone programme on exploring a number of innovation pathways to encourage the uptake of research in the natural resources sector—and by adaptation to use those lessons to apply in other sectors—was launched. Early results are promising, and the expectation is that DFID’s new research strategy—due to be launched in early 2008—will increase the commitment to supporting the uptake of research knowledge.

Other donors have also recognized the importance of communicating research. AusAid says that “communication strategies need to be an integral part of all research initiatives.” (AusAid, 2007) The International Development Research Centre (IDRC) allocates an average of 40% of its expenses on communication and engagement processes. While there are no fixed guidelines on communication budget allocations within programmes, the strategic focus of the funding strategy is evidently around innovating research uptake and using participatory approaches to research methodologies and dissemination.

Creating a dialogue - Healthlink’s role

For 30 years, Healthlink Worldwide has acted as a catalyst for social change, encouraging and stimulating the sharing and use of knowledge – both local understanding and research evidence – and supporting people to find innovative, practical and sustainable ways to apply knowledge to improve health in developing countries.

Originally called AHRTAG (Appropriate Health Resources and Technologies Action Group), one of its first activities was to launch an international newsletter - “Dialogue on Diarrhoea”- in association with the World Health Organization to promote oral rehydration for preventing and treating diarrhoeal diseases. A total of 60 issues were produced between 1980 and 1995, reaching an international audience of nearly 1 million people in some 160 countries, and published in 10 editions, including English, French, Spanish, Portuguese, Tamil, Bangla and Chinese.

Great emphasis was placed on information and knowledge sharing, not simply dissemination. The experience of practitioners and policy makers from around the world in trying to implement the guidelines for effective diarrhoea management helped to inform others about what worked and what did not. It also helped to identify knowledge gaps where new evidence was needed, or where greater understanding of the change process was needed.

In the early 1990s, as a cholera epidemic began to affect Latin America and Africa and a new strain emerged in Bangladesh and India, demands
for advice and approaches increased. Healthlink responded with a special update, that according to doctors and health workers in Asia saved lives. “Special thanks for the update which has saved my patients’ lives,” was how Dr Chowdary Manik from Karnataka State, in India, described it, while a correspondent from Pakistan reported that the sharing of knowledge had made an important contribution to the reduction in childhood deaths from diarrhoea by a third.

Ultimately, the uptake of research knowledge depends on the degree to which an institution, an organisation or a government department is able to function within an environment where it is normal to look for new knowledge, where it is acceptable to question existing practice, where engaging with different perspectives is encouraged.

Part of the work of encouraging uptake may well be the often hidden, slow and resource intensive work of changing the culture of a community, an institution, or a society so that knowledge flows more easily throughout the decision-making processes. For example, in the health sector, Gillies (1998) notes that attempts to bring about change in practices and policies have a larger impact according to the degree of local community involvement in setting agendas for action. This suggests the importance of what is now commonly referred to as stakeholder engagement processes and ensuring that we look at research activities as being part of a complex ‘knowledge system’ (Surr, 2002).

For many years, the Overseas Development Institute (ODI) has been studying how to maximise the impact of research and policy through its RAPID programme (Research and Policy in Development). One of the many lessons emerging from its work is that without a holistic understanding of the context in which policy change occurs, it is difficult to make an impact (Young, 2007). ODI has developed a simple analytical framework that identifies four broad factors: external influences, the political context, the evidence and the links. External influences are those factors outside the context in which you are working, but which affect it. For example, donor policies are external factors that could be influential in many countries. The political context includes people, institutions and processes involved in policy making. The evidence refers to the type, quality, and reliability of the research and to how it is communicated. Links cover all the other actors and mechanisms that affect how evidence gets into the policy process.

All of this suggests that researchers either need an additional range of skills if they want their evidence to have an impact on policy and practice, or need to work more closely with a number of other stakeholders. This underlines the importance of networking as a key tool in ensuring engagement with evidence.

Networking as a means of communicating research is about ensuring that the spaces, time and opportunities are present to enable communication,
dialogue, assessment and analysis to take place, hopefully leading to
shared knowledge and understanding. A large part of the design of future
research needs to include networking and communication opportunities in
order to deal with the complexities faced in studying development issues.

The Canadian Institute for Health Research (CIHR) has noted recently
that “often the most exciting developments in science arise from chance
encounters between individuals struggling with the same issue from
different perspectives who, together, are able to solve big puzzles. The
CIHR’s challenge is to cultivate such encounters, making them happen
routinely rather than by chance (Hurley, 1999).” In other words, stimulate
the networking.

Healthlink Worldwide has been supporting the effective communication
of research for a number of years. In September 2006, it ran a two-day
workshop for over 40 participants that explored how UK and international
NGOs could develop their capacity in this emerging field. The workshop,
funded by DFID, was convened by the Monitoring and Evaluation
communicating research group (M&E research group). This group -a
loose network of like-minded organisations and individuals- was formed
in 2004 to address growing concerns with monitoring and evaluation in
research communication. The group’s members cover many different
disciplines and include organisations such as the International Institute
for the Environment and Development (IIED), Institute of Development
Studies (IDS), Panos London, Healthlink Worldwide, the International
Network for the Availability of Scientific Publications (INASP), the
Overseas Development Institute (ODI), Wren Media and SciDev.Net.

A scoping paper (Butcher & Yaron, 2006) supported the workshop, which
explored the subject of M&E for communicating research. The paper
highlighted four key findings about the challenges facing attempts to
assess the impact of communicating research:

- the importance of having a sound conceptual framework for research
  communication programmes,
- the difficulty of monitoring unexpected impacts of research
  communication programmes,
- the challenge of defining potential stakeholders and audiences at an early
  stage, and
- the challenge of identifying long-term impact as opposed to snapshots of
  impact.

A particularly difficult challenge is the defining of and engaging with
potential stakeholders at an early stage. A case study from Burkina Faso
identified in the scoping study illustrates this point clearly (see “Shared
Care” in Burkina Faso - the challenges of implementation). The lesson
here is that much more attention needs to be paid to understanding the policy process, its timeline, and the limited windows of opportunity to work closely with policy makers.

“Shared Care” in Burkina Faso - the challenges of implementation

In the late 1980s ‘shared care’ was proposed by a group of researchers from the Ministry of Health. The approach was based on the idea that mothers and health workers could collaborate on the recognition, care-taking and treatment-seeking of childhood illnesses. However, the approach has not been implemented, and an evaluation sought to uncover the reasons.

Major stakeholders and the researcher’s agenda were identified by a document analysis, which included a review of the research proposals, published articles, minutes and reports and other project documents. Semi-structured interviews with decision makers and researchers established the environmental context at the time shared care was proposed. Focus group discussions with staff, women’s groups and mothers -who were not included in the original analysis- examined awareness of the ideas of shared care, and how practical the approach was.

The evaluation found that although researchers managed to disseminate their results to decision-makers, these were not transformed into intervention. Failure to undertake effective stakeholder analysis early on, and to account for the policy context and awareness of the limited time available of key decision makers to process information, were major constraints to implementation.

Healthlink Worldwide, Gamos and the European Centre for Development Policy Management (ECDPM) have been collaborating on a study of around 150 policymakers globally on how they understand and access ‘evidence’ on communication in development (Perkins, 2006). A significant finding was that, despite rhetoric to the contrary, evidence plays a relatively modest role in policymaking. Political expediency is a more important driver.

The study also threw new light on what counts as evidence for policy makers. Once again, there was no single solution:

- numbers and raw data are helpful for donors and budget holders to be able to justify the reach that their investments are having;
- knowing that the academic studies have been done to underpin a particular strategy is helpful, but the fine detail of many academic
research reports is often lost on policy makers;

- stories and case studies that illustrate a point are often the most useful tools to drive understanding and change;

- personal interaction, dialogue and interpersonal communication were seen as the most important elements in policy development, supported by clear summary documents (either print or electronic) which illustrate the central issues and synthesise the evidence.

This has strong implications for where time, financial and human resources need to be invested. The work of the Chronic Poverty Research Centre provides an important lesson about the way in which policy engagement is positioned within the research process having impact on policy making (see *Tackling chronic poverty: research, analysis, engagement*).

**Tackling chronic poverty: research, analysis, engagement**

*The Chronic Poverty Research Centre — an international partnership of universities, research institutes and NGOs — uses three key pillars to create and share knowledge that leads to poverty reduction. These are:*

- **Thematic research** to deepen the understanding of poverty dynamics, particularly the nature, causes and remedies of chronic poverty, including what the chronically poor already do to escape poverty

- **Policy analysis** to assess key policy issues and aspects of the policy environments which have a bearing on chronic poverty

- **Policy engagement** to contribute to a significant shift in policy through challenging governments, policy-makers and the public about the specific needs and the capabilities of chronically poor people and to support the efforts of ‘agencies of the poor’ to develop a stronger evidence base on policies which make a difference.

The CPRC has found that it is not difficult for its Southern partners — the researchers who are closer to the reality and the policy environments that will need to be affected — to engage. ‘They do it all the time — they tend to have several jobs and understand the different worlds.’ However, the difficulty comes in getting people to communicate what they are doing, or to think more strategically about how they are doing it. This is where the emphasis needs to be placed, and where it can be costly and time consuming to come up with effective approaches.
DFID’s investment in a Research Into Use programme (see *Challenging communication practice: developing information markets*) is promising (RIU, 2007). The programme is exploring how best to strengthen the ways a number of existing policy processes, practice networks and user communities, particularly those with limited resources, can interact with existing knowledge effectively. In doing so, it seeks to explore what an effective and sustainable ‘information market’ looks like and what can be done to support such markets as a new way of using communication.

**Challenging communication practice: developing information markets**

The Research into Use (RIU) programme aims to maximise the poverty-reducing impact of natural resources research and to significantly increase the understanding of how the promotion and widespread use of such research contributes to poverty reduction and economic growth. It has adopted an innovations systems approach to better integrate the supply ‘push’ and demand ‘pull’ elements of national and regional innovation systems, improving the flow of information between the two, and strengthen the capacity of partners in the science community, government, private sector and civil society to work together in improved productive relationships.

A significant innovation within the programme is its focus on communication processes and information markets and what can be done to incentivise those markets to engage with research findings, which is one of five interdependent strategic approaches. The justification for a new approach to communication is based on recognition that despite the significant steps made by both researchers and info-mediaries over the last decade to customise research findings in order to encourage intermediary and beneficiary institutions to take them up, more needs to be done to encourage the uptake and use of such findings by resource-poor communities. There needs to be a complementary focus on ‘pull’ or demand factors and ‘information market failures’.

An area often overlooked in the use of research to influence policy is the socialization of the evidence –grounding the research in local priorities, and the engagement of local people in the process of critical enquiry and analysis. Given the acknowledged disconnect between policy made at the centre and the provision of services that really address local health and development priorities, these approaches deserve much greater attention and point to a different way of ensuring that research, policy and practice inform each other. The work of Community Information for Empowerment and Transparency (CIET) has been instrumental in advancing this area (see *Building local research capacity*) (ECDPM,
Building local research capacity

The NGO CIET builds scientific research capacity at community levels and supports local people to inform the decisions that affect their lives. Its local evidence-based planning work has looked at a range of issues stretching from input into public health priorities in Atlantic Canada to sexual violence in South Africa and corruption in Uganda. A ten-step process of ‘socialisation of evidence’ feeds back preliminary findings to the surveyed communities for interpretation and discussion of proposed solutions. This is followed by discussions of the evidence at regional and national levels and in the local media, with an emphasis on building strategies for action.

A key set of actors in any strategy to link evidence to policy are media practitioners. However, both media staff and researchers find it difficult to interact. Important research is often ignored by the media, who find it inaccessible as a source of news. It can be difficult for understaffed and under-resourced publications and radio stations to devote time to contacting researchers and cutting through the complex findings to find a suitable story or feature. In turn, academics are wary of their work being misinterpreted by the media. Often it is hard for highly specialised researchers to understand the needs of journalists and broadcasters. Panos’ RELAY programme is developing a new way of linking the media with academic research communities (Panos, 2007). RELAY works with southern radio and print journalists and radio stations to communicate development research information through features, reports and on-air discussions that target public audiences primarily in the south (see Building links between researchers and the media).

Building links between researchers and the media

The media plays a crucial role in the effective communication of development research in southern countries through bringing existing practice and new policy solutions to the public attention, stimulating civil society debate and action and bringing pressure to change to bear on government.

Workshops in Zambia, Uganda and Sri Lanka have helped to link local media with academic research institutes. At these events, journalists and academic researchers came together to discuss their roles in informing public audiences about research. Participants explored opportunities and challenges in working together to communicate important research findings and recommendations to the wider public.
The workshops were a first step in establishing good working relations between journalists and researchers. In all three countries, both parties acknowledged that it was important to actively seek each other out, and not to sit and wait to be contacted. They also identified a need to build mutual respect and to cultivate strong working relationships.

A Zambian researcher said, ‘This is the first initiative that has recognised the need to develop close co-operation between researchers and journalists. It brought out the needs of both researchers and journalists and provided a forum for them to explore avenues for collaboration.’

Healthlink Worldwide has identified six practical steps that can help to strengthen links between research, policy and practice (Vincent, 2006).

These include:

- ensuring that researchers seek input from policy makers, intended users and beneficiaries of the research early in the research planning process.
- encouraging researchers to specify the principal audiences for the research and aim to provide accessible summaries for these audiences, and any key messages that are relevant to policy.
- developing an explicit communication strategy for the research, which identifies roles and responsibilities for communicating the research between researchers, research managers, and any people who bring additional communication expertise.
- encouraging commissioners of research to include support for capacity development of researchers to facilitate networking with stakeholders and communication of research, particularly for southern researchers.
- encouraging funders of research to earmark a proportion of their support to organisations involved in applied critical enquiry beyond academia.
- ensuring that adequate investigation is undertaken to learn and share research communication lessons from development work in agriculture, natural resources management, disaster relief, advocacy and other disciplines.

We already know a lot about what helps to improve the links between evidence, policy and practice. The real challenge is making it work effectively.
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