Generate and Apply Evidence for Greater Impact

> **What do we mean?**

Evidence refers to information that gives confidence about activities and approaches make meaningful progress towards achieving humanitarian outcomes. The International Rescue Committee (IRC) approach to programmatic decision-making involves bringing together research evidence, including empirical data; practitioner experience; contextual information from the environments in which we operate; and the needs, aspirations, and desires of our clients. We then consider each of these elements together to determine the most appropriate program design within various donor frameworks.

> **What is our commitment?**

IRC has committed to making all its programs evidence-based or evidence-generating by 2020. In support of this commitment we are investing time and resources to create meaningful, actionable, and useful evidence for our staff and others in the humanitarian community to use. This means focusing our attention on generating high-quality evidence across various contexts that:

- Addresses pertinent and pressing challenges to achieving our outcomes;
- Contributes to and is based on an existing body of knowledge;
- Fills critical gaps in our current understanding; and
- Serves relevant decision-making by humanitarian practitioners and policymakers.

> **Why is this necessary?**

The evidence base for interventions in crisis-affected contexts is extremely thin. There are several examples of interventions from different disciplines in low-income countries that have been perceived to work by experts and practitioners, yet rigorous evaluations have subsequently revealed little or no impact. Thus, evidence generation is essential for strengthening our understanding of what works to achieve outcomes in humanitarian settings; promoting the implementation of high-impact and cost-effective programs; and enabling us to influence the adoption and scale of such interventions. Evidence-based solutions are a major opportunity for donors and agencies to make greater impact with limited resources.
IRC’s use of evidence will promote the implementation of high-impact and cost-effective programs, and enable us to influence the adoption and scale of such interventions to achieve significant and sustained improvements in the lives of crisis-affected populations.

> What are we asking?

Donors should allocate 10% of grants and contracts above $500,000 to support Measurement and Evaluation (M&E) as a matter of standard practice.

Donors should allot a standard percentage (3% of aggregate based on best practice) to fund evidence generation, and target that funding towards actionable research on what works in crisis-affected settings specifically.

The humanitarian community should create a public/private research collaborative that includes, donors, practitioners, and universities to conduct strategic evaluations that close the most pressing research gaps to achieve outcomes for people.

> What’s worked?

One example of how the IRC shifted from a ‘best practice’ to an evidence-based approach is the move from community-centered child protection interventions—which weren’t based on evidence of what worked, despite being widely practiced—to family-based child protection interventions, which were not widely practiced in the humanitarian sector, but had a strong evidence base in high-income countries. The IRC has since demonstrated the impact of family-based programs in reducing violence against children across three countries, becoming both a practice- and thought-leader in this sector.

The IRC has also rigorously tested and used results on community-driven reconstruction—an approach widely used in development and humanitarian settings. Mixed findings of community-driven reconstruction efforts in several countries resulted in the IRC adapting its methods and no longer implementing this intervention without an accompanying rigorous evaluation.

During the past year, the IRC has invested in systematically searching for robust, applicable research evidence about what interventions work for the outcomes defined as priorities in the countries wherein we work. The results of reviewing and consolidating this evidence are now formulated in IRC’s Evidence Maps, an adaptation of the Gap Map approach developed by the International Initiative for Impact Evaluation (3ie).