GOVERNMENT COMMISSIONED EVALUATION:
BUILDING A CULTURE OF EVIDENCE-INFORMED POLICY

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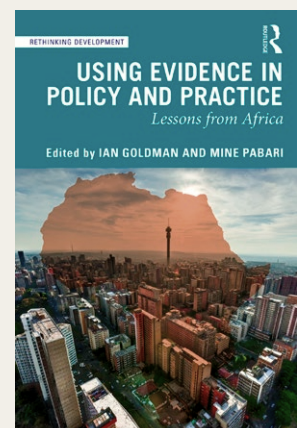CLEAR-AA

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RETHINKING DEVELOPMENT

USING EVIDENCE IN POLICY AND PRACTICE
Lessons from Africa

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SUMMARY & KEY MESSAGES

The brief shares lessons from a case study into the use of the evaluation of the South African government's response to violence against women and children (VAWC) which was commissioned by the Departments of Planning, Monitoring and Evaluation (DPME) and Social Development (DSD). The ethnographic account of the journey of a government-commissioned evaluation from evidence generation to its integration within policy decisions offers lessons both to those involved in evidence generation and those in policy-making institutions.

The research found that because government-commissioned evaluations start with a policy question and respond to demands from policy makers, this shapes the questions to be asked but also promotes subsequent use of the evidence. Having an institutionalised system (National Evaluation System) that encourages the use of evidence created adequate incentives for policy makers to act on the evidence. DPME and DSD evaluation units played an important knowledge brokering role that shaped evidence generation, ensuring that policy makers effectively participate in the evaluation process. They also translated the evaluation evidence to key policy messages, briefing policy makers, and communicating the evaluation once approved. Civil society organisations (CSOs) were also critical to enabling the use of the evaluation by providing spaces for ongoing multi-sector dialogue that proved critical to the sense-making process needed for individuals to act on the evidence. CSOs also pressured government to respond to the problem of VAWC, which created an opportunity for government to use the evidence from the diagnostic review.

The case study reaffirms that use of evidence in a highly contested, and often long, policy process is both important and complex. It is influenced by how the evidence is demanded and generated and what happens after the generation.

Introduction

The policy brief draws from a case study in South Africa of an evaluation of government's response to violence against women and children (VAWC). A diagnostic review (evaluation) was commissioned in 2014 as part of South Africa's National Evaluation System (NES), on behalf of the Inter-Ministerial Committee of Violence against Women and Children (IMC), by DPME in partnership with the national Department of Social Development (DSD). The evaluation was undertaken by KPMG and was managed by a multi-departmental steering committee. The evaluation was completed in 2016, the improvement plan was approved in 2017 and the evaluation was tabled in Cabinet in 2018.

The sector of focus is highly contested and politicised, and this makes it an interesting case to unpack a complex relationship between evidence and its utilisation in policy. Although focusing on one evaluation could be seen as a limitation, knowledge is used cumulatively, and the case study offers a rich and ethnographic account of the journey from evidence demand, through generation to its integration in policy decisions.

The research from which the policy brief draws used an analytical framework using a behaviour change model, with the following elements: internal and external context; demand from government; evidence generation process; interventions to promote evidence use; change mechanisms such as building commitment, access; leading to changes in capability, motivation and opportunity to use evidence, and finally evidence use itself. The research design used qualitative enquiry including semi-structured interviews with key informants, document review and participant observation (the main author was the evaluation lead from DPME on this project)[1]. Data was collected between November 2018 and March 2019. At the end of the brief is a description of the wider research project.

How the evaluation was used

The case study found there were instances of instrumental and conceptual use of the evaluation. For example, in 2017 DSD commenced the process to review the National Programme of Action on VAWC, an example of instrumental implementation of recommendations from the evaluation. In 2018 National

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Treasury announced additional allocation to provincial DSDs for VAWC programmes. R206 million was added for the financial year 2018/19 while R309m was added for the 2019/2020 financial year. This was a much needed increase in strained budgets and addressed a big area of concern in the diagnostic review. The DSD used the finding in the diagnostic review of poor funding for psychosocial services for victims of violence in their budget proposal for the 2019/2020 financial year. Conceptually, the evaluation findings were referenced in the draft National Strategic Plan for Gender Based Violence and Femicide (NSP for GBVF), were used to support proposals for South Africa to be a pathfinder country, and in government's response to women's uprising through the Total Shutdown movement which led to the president holding a national GBV summit in 2018.

Interventions to facilitate use

Most of the interventions implemented to ensure that evidence from the diagnostic review is used to inform policy were elements of the South African National Evaluation System (NES). These elements include dissemination, involving policy makers in the evaluation process, making evaluation evidence accessible to a wider audience, amongst others, and knowledge translation and brokering, a process through which DSD and DPME translated the research evidence to make it easier for policy makers to act on. In addition, the diagnostic review was inserted into use interventions within the wider policy ecosystem. This included an ongoing dialogue process facilitated by CSOs between NGOS, researchers and development partners. These are explained further below.

PROMOTING ACCESS TO AND AWARENESS OF THE EVALUATION

The first step in sharing the evaluation findings and recommendations was translating a long evaluation report into an easy-to-read 1/5/25 page summary report. The one-page policy brief targeted ministers, the five-page executive summary targeted senior managers in government while the 25-page summary report targeted middle to senior managers in government and outside with an interest in the issue. The summary report and the full evaluation report were shared on both DSD and DPME websites. Two policy briefs were developed based on the evaluation, one co-authored by DPME and DSD's evaluation and policy units, and one with the Institute for Security Studies (ISS) and Save the Children South Africa. This co-production of policy

briefs was intended to improve ownership[2] of results and wider dissemination of results. As required by the National Evaluation Policy Framework (NEPF) the evaluation was also presented to the Cabinet of national ministers, a mechanism that enabled wider dissemination of the report. Under the NES, once a report is approved by Cabinet without reservation, it can be made public and sent to Parliament. In addition, the diagnostic review was presented to more than 10 conferences, workshops and seminars. The wide dissemination facilitated access to and awareness of the results of the evaluation and the actions government was to take to address the gaps identified.

BUILDING OWNERSHIP BY INVOLVING POLICY MAKERS IN THE RESEARCH PROCESS

Policy makers from different departments in the VAWC 'sector' participated in the evaluation through the evaluation steering committee (ESC) headed by a senior policy head from DSD. The evaluation process was guided by the ESC. The committee defined questions to be asked, substantively shaped the research process and the recommendations, and approved the final report. Having the cross-government structure was important for the evaluation to incorporate what was happening in different subsectors and to have the support and ownership of the key departments. The findings of the diagnostic review were not radically new but, as one of the respondents indicated, the difference was that this was done by government, and government itself was acknowledging problems with its response, and that there was a formal response at Cabinet level.

KNOWLEDGE BROKERING AND TRANSLATION

Internal government evaluation units facilitated use of the diagnostic review through ongoing knowledge brokering within government and with external stakeholders. Within DSD the evaluation unit played an internal knowledge broker role, translating the research report into an internal communication memorandum for DSD management which conveyed the findings and implications of the review and the associated improvement plan. The unit also ensured that the minister was briefed before the presentation of the evaluation in Cabinet and the team presenting to Cabinet were aware of the political context DPME also played a strong knowledge broker role, working with DSD and other departments to make sure findings and lessons from the review were integrated in the Programme of Action (PoA) on VAWC and its M&E framework.

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2   Italics are used for elements of the analytical framework, in this case change mechanisms

FACILITATING ONGOING INTER SECTORAL DIALOGUE

The presentation of the diagnostic review in sectoral spaces for ongoing inter-sector dialogue like the Dialogue Forum[3] and Soul City Social Lab, led by CSOs, enabled difficult conversations between CSOs, government, development partners and academia about why interventions have not worked and how they can be strengthened. Amongst other factors, these spaces for ongoing dialogue were building trust and strengthened inter-sector relationships, which supported the insertion of diagnostic review evidence in the revised PoA and the NSP for GBVF.

Facilitators and inhibitors of use

INFLUENCE OF INDIVIDUAL VALUES AND BELIEF SYSTEMS

An important barrier to uptake and full implementation of research findings that respondents raised is the disjuncture between the values of individual public servants and those of researchers. Where research seems to be pushing for liberal positions that do not accord with the values of those implementing it, the position is less likely to be adopted and in practice the way services are provided does not significantly change. Kahan (2007) referred to this as identity-protective cognition. People are more likely to use evidence in ways that are supported by their peer groups than to be guided by the fidelity of the evidence. Therefore, most individuals will rarely form a contrary position to one held in institutions that provide them with important aspects that define their identity and social support. From the interviews it is clear that one of the reasons the diagnostic review was widely accepted is because it did not address the contentious issues in the sector. It focused on systems and how the government system was responding to the problem. Though it raised the issue of the beliefs and values of public servants, this was not a central issue of focus. Therefore, it was easier for different sectors and departments to agree on findings and recommendations.

IMPORTANCE OF RELATIONSHIPS

Relationships between researchers and government or NGOs implementing programmes was cited as an important facilitator/barrier to evidence uptake. Some respondents argued that unrecognised and inadequately addressed trauma is seen in the behaviours of individual decision makers (both in government and

NGOs) and in the nature of relations within the sector. Respondents reported that interactions between researchers, government and NGOs, and within government departments, are often hostile, characterised by serious mistrust, power misuse and personality politics, hindering evidence-informed policy discussions. When this is the case, information and knowledge does not flow between different sectors. However, when there are positive relationships between researchers and government, information flows in ways that favours integration of research evidence in policy.

INFLUENCE OF RACE

Another important issue shaping relations in the sector is race. Because of the history of apartheid in South Africa, racial tensions in wider society remain. In this sector researchers tend to be white and public service policy makers and implementers at national level are usually black, and specifically black Africans. This became an issue in the diagnostic review. When KPMG was hired to carry out the work, there were reservations because the lead researcher was a white English woman who had recently relocated to South Africa, and the team was predominately white. There were questions about the ability of the team to understand the experiences of black women and communities. To overcome this issue, the DPME project manager together with the Chief Director for M&E at DSD advised KPMG to diversify their team and sensitised the research team to what is likely to trigger pushback from the ESC. As a result, KPMG added black sector experts to their team. In addition, the project manager in DPME managed relations with the ESC, often having discussions outside of the official ESC meetings with senior officials in key departments to allay their fears about the evaluation process or team. Most of the communication to external stakeholders was done by DPME and DSD, not the evaluators. By undertaking these facilitation roles, the relationship between government and evaluators was maintained, and despite some difficult findings that pointed at failures of government, the evaluation as not racialised and therefore not rejected by government.

ORGANISATIONAL FRAGMENTATION AND COMPETITION

Organisational silos and competition between departments emerged as another challenge in the VAWC sector. In fact, some questioned if it can be referred to as a sector. VAWC programmes span many different policy domains that are the responsibility of different departments, and the silo mandates create artificial divisions within the sector that limit information flows. Respondents reported that collaboration is weak in the sector, and there is competition between NGOs (and sometime between NGOs and government) and conflictual relations between government, NGOs and evaluators. This impedes information flows between departments,

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3   Now called Violence Prevention Forum

and sometimes between different units within the same department. This is why the steering committee and other multi-sector forums were so useful in building wider ownership of findings and providing spaces for collective sense making.

How context influenced use of evidence

This section relates the findings to the analytical framework. In the context of interventions with cross-organisational silos, the following are essential:

- *Formalised involvement of different organisations and stakeholders* in the evidence-generation process. The participation of departments in the evaluation process and on structures like the steering committee/IMC task team was important to legitimise the evaluation process and the outcomes. When departments pushed against the findings or recommendations on the grounds that their departments were not consulted, DSD and DPME could remind the departments of their participation in the evaluation process.

- Dissemination of findings to *formal government coordination structures* is essential. In this case study, consideration of the review by Cabinet and the IMC allowed different departments to interrogate the evaluation and its implications for their departments (use intervention), in some cases suggesting changes to how the recommendations should be responded to.

In a sector where people hold *strong opposing beliefs* and where there is a history of conflict, oppression and subordination on the basis of race (or any other construct) (context), the following are very important:

- The representivity of the evidence-generation team (evidence generation);

- Wide dissemination of evidence led by government (use intervention);

- Knowledge brokers that can facilitate mutual understanding and trust (use intervention);

- Spaces for meaningful dialogue (use intervention), which can promote agreement, mutual understanding and trust (change mechanisms).

In a context where there is poor inter-sector communication and relations, introducing the diagnostic review (government evidence) into use interventions in the wider policy ecosystem was an important facilitator of much-needed honest discussion about how to strengthen the country's response to VAWC and therefore the use of the evidence. Examples of wider interventions included a government-led study tour to Uganda, the Violence Prevention Forum (CSO-led), the Social Lab (CSO-led) and between iolence prevention forum and Social lab. The knowledge brokering role of government (use intervention) was an important facilitator in the process.

Lessons and recommendations

GOVERNMENT INSTITUTIONALISATION OF SYSTEMS TO SUPPORT EVIDENCE USE IS IMPORTANT

The South African government having an evaluation system that was designed to facilitate use of evidence was an important enabler of use. It established the rules around commissioning and managing evaluations with the explicit intention to support policy and decision making within government. More efforts are needed for governments to institutionalise and embed evidence generation processes as part of public sector management. This can shape evidence generation processes to be responsive, answering relevant policy questions, and also can increase likely integration of empirical evidence in policy and management decisions.

IMPORTANCE OF GOVERNMENT INTERNAL CAPACITY FOR RESEARCH/EVALUATION AND KNOWLEDGE BROKERING

When government has strong evaluation/research capacity, it is better placed to shape the research agenda, ask the right policy questions, guide the production of evidence and play an effective knowledge broker role to ensure that it responds to policy needs. It is important that government invests in building and strengthening the capacity of internal evaluation units.

RESEARCH PROCESSES NEED TO OVERCOME THE IMPACT OF STRONGLY HELD VALUES, BELIEFS AND NORMS

In sectors where there are strongly held and opposing values and beliefs held by individual policy makers, politicians and staff in organisations it can be difficult for evidence that challenges these values to influence policy and transform the way policy and programmes work. To build ownership and increase the likelihood that evidence is used, it is important to open the evaluation process to interrogation by stakeholders in spaces where they can interact openly with one another and with the evaluation process. Safe spaces where meaningful conversations can be held are critical, as are the skills to facilitate such conversations. Steering committees, when managed well, can create

safe spaces for different views to be debated during the evaluation process, thus informing analysis, conclusions and recommendations from evaluation. As shown in the case study, these spaces for dialogue can also be provided outside of the evaluation process. This case study demonstrated that external stakeholders such as think tanks and CSOs have key roles to play in this regard.

THE COMPOSITION OF THE RESEARCH TEAM MATTERS

Who gets voice and the power to tell the evidence story matters. It can determine policy makers' attitude towards the piece of evidence. Therefore, when evaluators are setting up their teams, consideration is needed of the representivity and perceived legitimacy of the team. This representivity is determined by country and sector context.

RECOGNISE AND ACCEPT THE COMPLEXITY OF INTERNAL GOVERNMENT POLICY-MAKING PROCESSES

Some of the challenges with evidence use related to how policy making unfolds in the South African government. Most policy discussions are not open to non-government stakeholders. They happen between and within departments and public entities, in management fora, at clusters, Cabinet and so forth, and consultation with wider stakeholders often only happens when this process is completed. It can be difficult for an individual policy maker to push an idea through these different structures simply because it is evident in research, particularly if it challenges dominant values and views. Government needs to be more open to including wider views earlier on in processes, and individual policy makers need to be supported through what can be a lengthy policy process.

Conclusion

The case study reaffirms that the use of evidence in a highly contested and often long policy process is both important and complex. It is influenced by how the evidence is demanded and generated and what happens after the generation. It also affirmed that evidence use does not happen by itself, it requires interventions to address some barriers and strengthen facilitators of evidence use. Facilitators and barriers to evidence use are not always technical issues about the evidence, but could be shaped by specific country or sector context. Beliefs, values, political ideologies etc. can be barriers to use of evidence. Interventions to enable use need to be targeted, based on understand-

ing of the main problems affecting use. Institutionalisation through an evaluation system, for example, can be a catalyst for culture and behaviour change within the public sector. But even then, the system has to be understood as evolving, influenced by the wider political context.

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ABOUT THE RESEARCH

This brief draws on case study research carried out for the project, 'Evidence in practice: documenting and sharing lessons of evidence-informed policy making and implementation in Africa", supported by the Hewlett Foundation.

The case study research was guided by an analytical framework that combines two different frameworks: i) the Science of Using Science's framework that looks at evidence interventions and outcomes from a behaviour change perspective (Langer et al., 2016) and the Context Matters framework that serves as a tool to better understand contextual factors affecting the use of evidence (Weyrauch et al., 2016). The framework approaches evidence use from a policy makers' perspective (i.e. from a demand rather than supply perspective). The framework takes into account contextual influencers and breaks down an evidence journey into the ways in which evidence is generated, the interventions taken in order to ensure evidence use, the change mechanisms that arise as a result and the relationships between the evidence journey and the immediate and wider outcomes that emerge.

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