Evidence Aid: A resource for those preparing for and responding to natural disasters, humanitarian crises and major healthcare emergencies

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Evidence Aid - why established?

- Established after the Indian Ocean Tsunami in December 2004.
- Like minded group of individuals in The Cochrane Collaboration formed an advisory group to establish how Cochrane Reviews could help people during a natural disaster or humanitarian crisis such as the Indian Ocean Tsunami.
After the Indian Ocean Tsunami in December 2004, a group of psychiatrists in India were commissioned to carry out brief debriefing (a form of counselling).

What did they do?
Who are we?

Claire Allen  
Knowledge Manager  
Oxford, UK  
2011 -

Mike Clarke  
Founder/Project Lead  
Dublin, Ireland Belfast, UK  
2004 -

Bonnix Kayabu  
Co-ordinator  
Dublin, Ireland  
2010 -

Dominic Mellon  
PhD Student  
Bristol, UK  
2013 -

We make up the equivalent of 1 full-time staff
Evidence Aid - aims

• Use knowledge from systematic reviews to provide reliable, up-to-date evidence on interventions that might be considered in the context of natural disasters and other major healthcare emergencies.

• Highlight which interventions work, which don’t work, which need more research, and which, no matter how well meaning, might be harmful.

• Provide information to agencies and people preparing for, or responding to, disasters.
Progress 2004 - 2010

• 2004-10, no funding.
• 2010 funding from The Cochrane Collaboration, John Wiley and McCall McBain.
• Late 2010, the Evidence Aid Co-ordinator appointed to carry out a Needs Assessment.
• Needs Assessment survey showed that there was no equivalent to Evidence Aid.
Progress 2010 – 2013

• Knowledge Manager appointed.
• Preliminary results published from the needs assessment survey.
• 1st and 2nd Evidence Aid conferences held.
• Unorthodox Prize winners.
Based on our positive experience with the winner of our first prize competition, GiveDirectly, we launched a second competition in May 2013. The design and criteria were similar to the first, although we worked harder this time to solicit proposals from outside our own network and traditional philanthropic circles. We received nearly 250 submissions from around the world, covering a wide spectrum of disciplines. A number were promising, causing us to spend time reaching out to the applicants, references, and relevant thought leaders in order to make the best selection possible.

Following those efforts, we are very pleased to announce the winner of our second competition: Evidence Aid. Incubated as a project of The Cochrane Collaboration based in the U.K., Evidence Aid aims to bring rigorous evidence-based practices to the fields of disaster relief and humanitarian aid. See here for a brief description of their mission and vision.

We chose Evidence Aid for several reasons. First, its founder, Professor Mike Clarke, of Queen's University, Belfast, and the organization itself seem outstanding, with great reputations in their field. Consequently, we believe Evidence Aid has an excellent chance of achieving its ambitions, perhaps more than other proposals we received. Second, Evidence Aid is a definite "misfit," in that it falls outside the traditional issue categories of most funders. Thus, funding resulting directly and indirectly from our prize could be instrumental to its success. Third, we have been on the lookout for philanthropic opportunities in which a time-limited, targeted, and cost-effective intervention could have a big and sustained positive impact on the world's most disadvantaged people. Mitigating the lasting impacts of disasters, which are disproportionately felt by the poor, is indeed a fertile area for such opportunities.

Billions of dollars are spent annually on international humanitarian responses, yet aid budgets are not keeping pace with the increasing frequency and severity of disasters. At the same time, there is a push to professionalize the field. Evidence Aid can play a significant role in this regard by (a) conducting systematic evidence reviews to identify optimal interventions and (b) providing this information in an easily-accessible format to decision-makers and front-line relief workers. We are aware of no similar effort.
2014 and onwards

• Delivered scoping study for 3ie.
• Consolidation and further identification of systematic reviews and other information on the website.
• Evaluation of the website: use and usefulness.
• Further applications for funding.
• Building relationships and partnerships.
• Symposium in India.
Building the database

• Searchable.
• Systematic reviews from outside of health care but with health care outcomes (e.g. engineering, shelter, water and sanitation).
• Contextual summaries for systematic reviews.
• Mobile applications.
• Multi-lingual.
• Develop dynamic search options.
Snapshot of our website
(launched August 2013)
Why are systematic reviews important?

• Help understand risks, benefits and consequences of decision making.
• Establish whether an intervention works, does not work, or has the potential to cause harm.
• Present a clearer and more consistent picture of the body of evidence.
• Avoid decision-making on the basis of a single study.
• Ensure decisions are based on information that is transparent, rigorous and replicable.
• We realise trials and systematic reviews are challenging but is this reason not to do them?
Philippines Disaster

• Within 48 hours, packaged together resources for Typhoon Haiyan.
• Resource link distributed to aid agencies, NGOs, policy makers, and academics.
• Links made with medics travelling to the Philippines who are responding to the disaster.
• Letters published in the media 19 and 20 November 2013.
The technology, resources, partnerships and knowledge are all coming into place for Evidence Aid. The time has come to ensure that those making decisions about services and interventions following natural disasters and in humanitarian crises have access to the most reliable evidence for those choices.
Thank you for listening!

Contact us using:
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