This map is part of a series of maps on the evidence-informed decision-making (EIDM) landscapes in different countries in Africa. The series comprises 25 maps and is available from the Africa Evidence Network. This is map 5 in the series. Maps were produced as part of the bursary conditions for attendance at Evidence 2016 (http://evidenceconference.org.za/). Bursaries were provided as part of the UJ-BCURE programme, funded by the UK’s Department for International Development (DFID).

https://www.africaevidencenetwork.org/resources/landscape-maps/
The main role players

Research institutes
Research institutes such as Wits Health Research Consortium, and other donor funded institutes produce a significant body of evidence which evidence which informs health-related NGO programmes. Some larger national and international NGOs (e.g. Soul City) have significant budget and staff expertise to conduct research in house as well, specifically to inform intervention design.

NGOs
International and national NGOs with the technical capacity which are able to translate relevant information.

Donors
Most large donors do have the required staff capacity to support research translation. For example, USAID has utilised available research to inform the PEPFAR 3.0 strategy as well as the focus of HIV prevention strategies on the girl child as in the DREAMS funding project.

Virtual platforms
There are some virtual learning or knowledge sharing platforms accessed by NGOs which provide consolidated research. These include USAID Learning platform, Health-e and Sangonet.

Government
The National Departments of Health and Social Development are also research users, with the aim to inform policy, campaigns and funding focus. Donors are focal research users to identify priority funding areas and return on investment areas.

Rapid landscape review map
Health NGO Sector in South Africa

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The Gaps
Research institutes
Poor coordination among role players
Limited resources to support evidence generation and analysis
Limited skills and knowledge in NGO sector to utilise evidence
Poor collaboration between role-players

The Bottlenecks
- Use of evidence is not viewed as part of programmatic team responsibility
- Lack of systematic planning of how the research will translate to usage
- Bureaucracy and lack of visibility of the National Health Research Council
- Inter-institution competitiveness & funding which doesn’t encourage collaboration
- Links between research and its translation into policy and implementation

The relationship between research producers and users in...
Interactions between EIDM role players in the research-policy environment

**Research production**
- Government & international donor funding
- Research institutes
- NGOs
- Universities

**Research translation**
- Donors
- NGOs
- Virtual learning networks

**Research Use**
- Donors
- NGOs
- National Department of Health
- National Department of Social Development
Conclusion

**Interventions needed**

> A plan for how findings would be shared and used beyond publication in academic journals at the outset of research
> Funding provided for consortium research
> Funders enforce demonstration of research and evaluation utilisation among health NGOs

**Engage**
There is a need for creative mediums and approaches to increase engagement in evidence for use in decision making, bridging research generator to use

**Understand**
There are some role players which aim to enforce better understanding of evidence and its usage of evidence, but application in a practical manner remains an area of improvement.

**Impact**
If research evidence is better understood health NGOs will have improved utilisation of evidence and ensure that interventions implemented inform greatest impact, as well as more strategic fund allocation.

Research conducted by NGOs are more focused on improving operations, and because not at the policy level are more likely to influence programmatic change. Programmatic teams are more engaged in such research to improve actual service delivery.