

Evidence Institutes: Lessons for Australia from the UK, US and Canada

This report was prepared for the **Paul Ramsay Foundation** by the **Open Innovation Team**, a UK government unit that works with experts to generate analysis and ideas for policy.

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The views expressed in this report are those of the authors and do not reflect those of the UK government.

Contents

Executive summary	4 - 8
Chapter 1: Introduction	9
Chapter 2: Evidence institutes in Australia, Canada, UK and USA	10 - 17
Chapter 3: What makes an effective evidence institute	18 - 27
Chapter 4: What is the demand for evidence by key groups in Australia and what are the opportunities for establishing a new evidence initiative in Australia?	28 - 34

Bibliography	35 - 40
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Annex A: Country case studies: Australia, Canada, UK and USA	41
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1. Australia	41 - 44
2. Canada	44 - 46
3. UK	46 - 49
4. US	49 - 52

Annex B: Examples of evidence institute audiences and outputs	53 - 54
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Annex C: Note on the methodology ...	55 - 59
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Executive summary

The Paul Ramsay Foundation commissioned the Open Innovation Team to review the impact of evidence institutes and explore if a new evidence institute might help break cycles of disadvantage in Australia.

The argument that robust evidence leads to better decision making is well-rehearsed.¹ Yet, we know that simply supplying or producing evidence does not automatically lead to improved outcomes. Evidence is not always accessible, useful and usable for decision makers. And we also know that evidence is only one part of the decision-making process, often competing with a mix of factors, including political pressure, personal values, feasibility, timeliness, and cost.²

To help ensure that evidence is both useful and used, there is an expanding landscape of evidence institutes, centres and initiatives dedicated to the cause. Many of these operate as intermediaries, working with policymakers, funders and practitioners, to facilitate the use of evidence.³ However – and somewhat ironically – there is limited high quality evidence on the impact of evidence institutes, partly because their effectiveness is difficult to evaluate.

To help us understand how useful evidence institutes are and what determines their effectiveness, we looked at 58 evidence institutes in Australia, Canada, the UK and the US. Our analysis is based on 87 expert interviews, reviewing books and articles, and convening four expert workshops and it shows how evidence institutes can effectively influence decision making to improve services for citizens, achieve better outcomes, and save money.

Impact of evidence institutes

Based on our analysis, evidence institutes can be useful in four ways:

1. Shifting investment towards interventions that work.

Encouraging investment in evidence-based solutions, and cease funding for those that are proven to be ineffective.

2. Ensuring practice is effective and impactful.

Practitioners, such as teachers or social workers, are provided with guidance to help to identify and use approaches that can help improve their work. Whilst actively learning from advances in practice to help spread impactful ideas and create communities of understanding.

3. Encouraging more rigorous evaluation.

Innovating with new and more agile methods, helping improve people's ability to understand and use evidence, and encouraging government and others to test, learn and adapt.

4. Catalysing action to tackle complex issues and changing the narrative around the value of evidence.

Making the case for why evidence is important and raising the profile of particular issues or topics to ensure they are acted on by decision makers, and bringing evidence to the attention of wider audiences, such as the public.

Chapter 3 provides examples for each of these impact areas.

What makes an effective evidence institute

Effective evidence institutes can have multiple forms of impact. Although evidence institutes vary significantly in size, structure, focus, and capabilities, we have identified six key elements required to achieve impact. These six criteria are:

1. **Clarity of purpose.** Setting clear priorities and defining objectives, outcomes and desired impacts on target audiences.
2. **Strategic independence.** Acting as a neutral advisor, free from perceptions of bias or external pressures, such as those imposed by funders.
3. **Connectedness.** Being well-networked with decision makers, brokering and managing relationships to provide trusted expertise and advice.
4. **High-quality evidence.** Producing high-quality research that addresses policy-relevant topics in a timely manner.

5. **Effective communication.** Decision makers are engaged in a dialogue and evidence communicated effectively in useful formats, providing the information required and guidance on how to use it so that solutions can be implemented.
6. **Meaningful impact measurement.** Robust measurement of the evidence institute’s impact, such as on improved outcomes or its influence on decisions, to show whether it has achieved its mission.

Most evidence institutes attempt to do all these things but with differing degrees of sophistication. To help segment the sophistication of evidence institutes, we have developed the Evidence Institute Maturity Model, graded on three levels: basic, better and best.

The maturity model helps determine the effectiveness of individual evidence institutes and to understand the differences between them. It could help existing evidence institutes improve their practice and guide the creation of new evidence institutes.

	Basic	Better	Best
1 Definition of purpose	Has a wide and / or undefined focus.	Focus is clear and aims are understood.	Focus, audience and purpose are clear with defined paths to impact.
2 Strategic Independence	Funding type or source restricts long-term thinking and/or perception of neutrality.	Long-term thinking is limited by insecure funding, but maintains neutrality.	Neutral, balances short-term demands and longer strategic thinking.
3 Connectedness	Lacks relationships with key stakeholders to influence decision makers.	Established relationships but lacks capability or capacity to influence them.	Influences gatekeepers and establishes itself as a trusted as a trusted go-to expert.
4 High-quality evidence	Identifies problems and generates evidence to provide potential solutions.	Positions tactically in evidence-gaps, fills them to make recommendations.	Generates delivery-ready evidence with clear costs, trade-offs, and benefits.
5 Effective communication	Signposts and raises awareness of evidence, such as on its website or in a newsletter.	Evidence is accessible, easy to understand, and targeted to suits its key audience.	Drives change by providing evidence and supporting implementation.
6 Meaningful impact measurement	Uses “reach” as a proxy for impact, such as website hits or report downloads.	User feedback is used, such as surveys, citations, or mentions in policy.	Quantified impact measures, such as on outcomes or money saved.

Figure 1: The Evidence Institute Maturity Model

Key takeaways from evidence institutes in Australia, Canada, UK, and US

We looked at 20 evidence institutes in the UK, 13 in the US, 12 in Australia and nine in Canada. They vary significantly in size and scale. Australia evidence institutes have the lowest annual average spend, AU\$9.5m, and the US has the highest annual spend, averaging at AU\$46.7m.

Across all four countries, the government plays a major role. Government is often a core funder and a target audience for evidence institutes. Yet engagement with government and the ability to effectively influence decision making, varies across all four countries. Health is viewed as having a more established evidence system, but there is not always consistent demand for evidence across all other areas of public policy.

Evidence is not defined by a particular evaluation method. Instead, most evidence institutes tend to argue that methods should be selected on a pragmatic basis, based on the question in hand. However, there are nuances to note. When finding 'what works', and testing later stage innovations, there is a prevalence of experimental methods, such as RCTs. This is not usually to the exclusion of qualitative methods. Across all four countries there was recognition of the centrality of user voice and incorporating lived experience into conceptualisations of evidence.

Key findings for evidence institutes in Australia

This study has found that Australia has several key strengths. It has evidence institutes working across many areas of social policy, it has a thriving research and academic community, and there is a growing interest in government about how evidence can be more effectively used. Across the evidence institutes, academics and the government officials we engaged, there is a great deal of enthusiasm for interventions to strengthen the evidence ecosystem in Australia.

But there are challenges. Demand across government bodies is often patchy, there are issues in the availability and accessibility of evidence in certain policy areas, there is often a lack of reliable impact data and costed options, and there are limits in the ability of decision-makers to use evidence and implement new solutions. Furthermore, there is a lack of connectivity between evidence institutes. Specifically, there's a need for those working with evidence to convene, share knowledge, collectively advocate, and enhance the effectiveness of evidence generation and application.

Opportunities for an evidence institute to tackle disadvantage

We have identified what an effective evidence institute looks like along with an opportunity to strengthen the evidence ecosystem in Australia. But we know that there are barriers to be overcome. The original intention for this research was to explore the creation of a new evidence institute in Australia. Yet this is not our sole recommendation. Instead, rather than starting with the institutional response, there first needs to be a wider discussion and engagement to explore what interventions are needed to help strengthen the evidence system in Australia to tackle disadvantage, to ensure that key audiences and decision makers are engaged, to galvanise momentum for change, and to forge connections across the existing evidence institutes and wider ecosystem. This will help answer what institutional form – or forms – an evidence initiative should take, who could play a role, and how future work should be funded and governed.

The end result may be a new evidence institute, it may be a consortium model, it might involve supporting existing evidence institutes, or it might be something different. The intention is that the recommendations below will engage partners, funders and decision-makers to identify and test different models and set up the ones that most effectively enable smarter decision making to improve outcomes and improve lives. The steps set out below aim to help make this happen.

1. Network build

- **Create a network on disadvantage to help shape future work**, identify who can play a role, and stimulate demand for it. Experiment with events and other forms of engagement. This will help foster buy-in, avoid duplicating efforts by building upon existing expertise, and identify where new interventions to strengthen the evidence ecosystem could most add value.
- **Partner from the start.** A collaboration between government, academia, and philanthropy should be explored. Existing government interests could be harnessed to experiment with different models. This could help ensure the appropriate tiers of government are engaged to influence the right decision makers.

2. Explore models and make it happen

- **Pilot an evidence initiative on disadvantage.** Drawing upon partners and the network, test out the most promising practical solutions to help improve how evidence is generated and used. It could be a new evidence institute, incubated in an existing organisation, created as a consortium, or exist in other forms. The pilot could aim to have an impact within two years. It is crucial that it is underpinned by effective governance and a suitable funding arrangement.
- **Create a strategy that provides clarity of purpose and priorities.** Be mindful of how broad a subject disadvantage is so choose some priorities that have a clear 'owner' in government to mitigate the risk of trying to cover too much ground. Launch a pilot with example outputs that are relevant, practical and help demonstrate its usefulness.
- **Recruit credible leadership and secure broader support amongst stakeholders.** It should be led by those able to navigate the worlds of evidence, policy and politics. To foster wider buy-in, one option would be to recruit a board of influential champions who bring expertise and help ensure it is not unduly led by a single organisation or agenda.
- **Communicate the benefits in a way that resonates with different audiences.** This could involve framing around cost-savings, improved outcomes, and making life easier for decision makers. Good evidence does not speak for itself, so there needs to be a clear communications strategy and an effective communications team to help keep making the case.

3. Experiment and learn

- **Effectively influence decision making and ensure new solutions are implemented.** Learn from other evidence institutes and their funders about how to enable policymakers and practitioners to implement new solutions and solve problems. Sharpen understanding of how change happens by learning from other disciplines, such as innovation and behavioural science.
- **Synthesise existing research and conduct new research where necessary.** Utilise existing knowledge, and plug gaps where they exist. Support living evidence to stay up to date and reduce costs.
- **Commission an independent evaluation.** Learning and adaptation should happen throughout the pilot phase. At the end of the pilot, there should be a much clearer understanding of where evidence can help tackle cycles of disadvantage. If proven to be impactful, efforts should be scaled up, and will require longer-term commitment and investment.

Chapter 1: Introduction

This study explores the landscape of evidence institutes in Australia, Canada, UK, and the US. The questions we have explored are:

1. What is ‘evidence’ understood to mean in Australia and internationally? (**Chapter 1**).
2. What is the landscape of evidence institutes in Australia? What is the landscape of evidence institutes in key comparable countries? (Canada, US and UK) (**Chapter 2**).
3. How effective are evidence institutes in Australia and key comparable countries, and how do evidence institutes measure effectiveness? (**Chapter 3**).
4. What is the demand for evidence by key groups in Australia? What are the opportunities for establishing a new evidence initiative in Australia? (**Chapter 4**).

Defining evidence institutes

Evidence institute is a term coined by the Paul Ramsay Foundation. In this study, **we define evidence institutes as organisations that generate, synthesise, and curate high-quality and rigorous research, data and evaluation with a specific objective to influence and improve the decision-making of policymakers, practitioners, non-governmental organisations, the public, and others.**

This definition aims to exclude organisations that are politically or ideologically driven, rather than led by evidence. However, this line is often unclear and we have had to make choices about which organisations to include. There will be many organisations, think tanks, academic units, or evidence networks that do not feature in this report as they are beyond the scope of our study. Ultimately we have been pragmatic in our bid to learn from a wide range of practices.

Methodology

Across Australia, Canada, the UK and the US, we have analysed some of the evidence institutes currently active and those active in the past ten years. Between **October 2022 and April 2023**, we analysed **58 evidence institutes**, supported by reviewing articles and books, and conducting **87 semi-structured interviews**. Furthermore, we convened **four workshops in Australia** to discuss both the demand for evidence and the opportunities for creating an evidence institute to help tackle cycles of disadvantage.

To identify lessons for Australia, we selected the case study countries of Canada, UK and the US. These countries appear to have the highest number of evidence institutes, the US offers a comparison to Australia’s federal system, and both the US and Canada offer insights into the role and inclusion of indigenous communities in the evidence system. A more detailed discussion of our methodology is in the annex.

Chapter 2: Evidence institutes in Australia, Canada, the UK and the US

We have analysed 58 evidence institutes across Australia, Canada, UK and the US. This chapter provides an overview of where they are, what they do, and how they operate.

The map shows the spread of evidence institutes we have studied across four countries, including both those currently active and those active in the past ten years (Figure 2).

As this report has an Australian focus, we looked in greater detail at its evidence architecture.

The timeline shows the Australia evidence institutes and those we studied that operate in the wider Australian evidence ecosystem. The earliest Australian evidence institute we were aware of was created in 1964. However, the creation of evidence institutes in Australia is a relatively recent phenomena, with the majority of evidence institutes emerging in the past fifteen years.

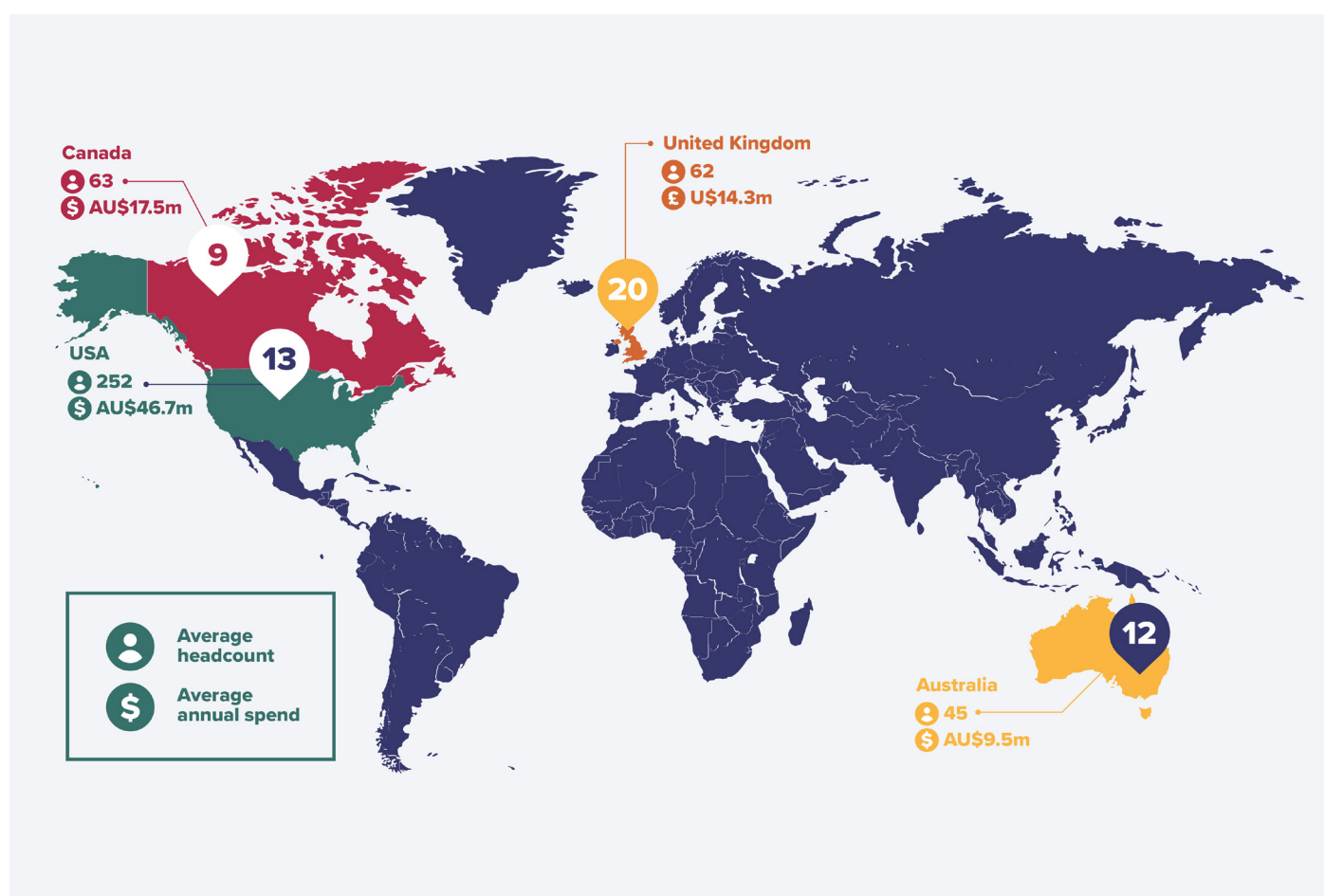
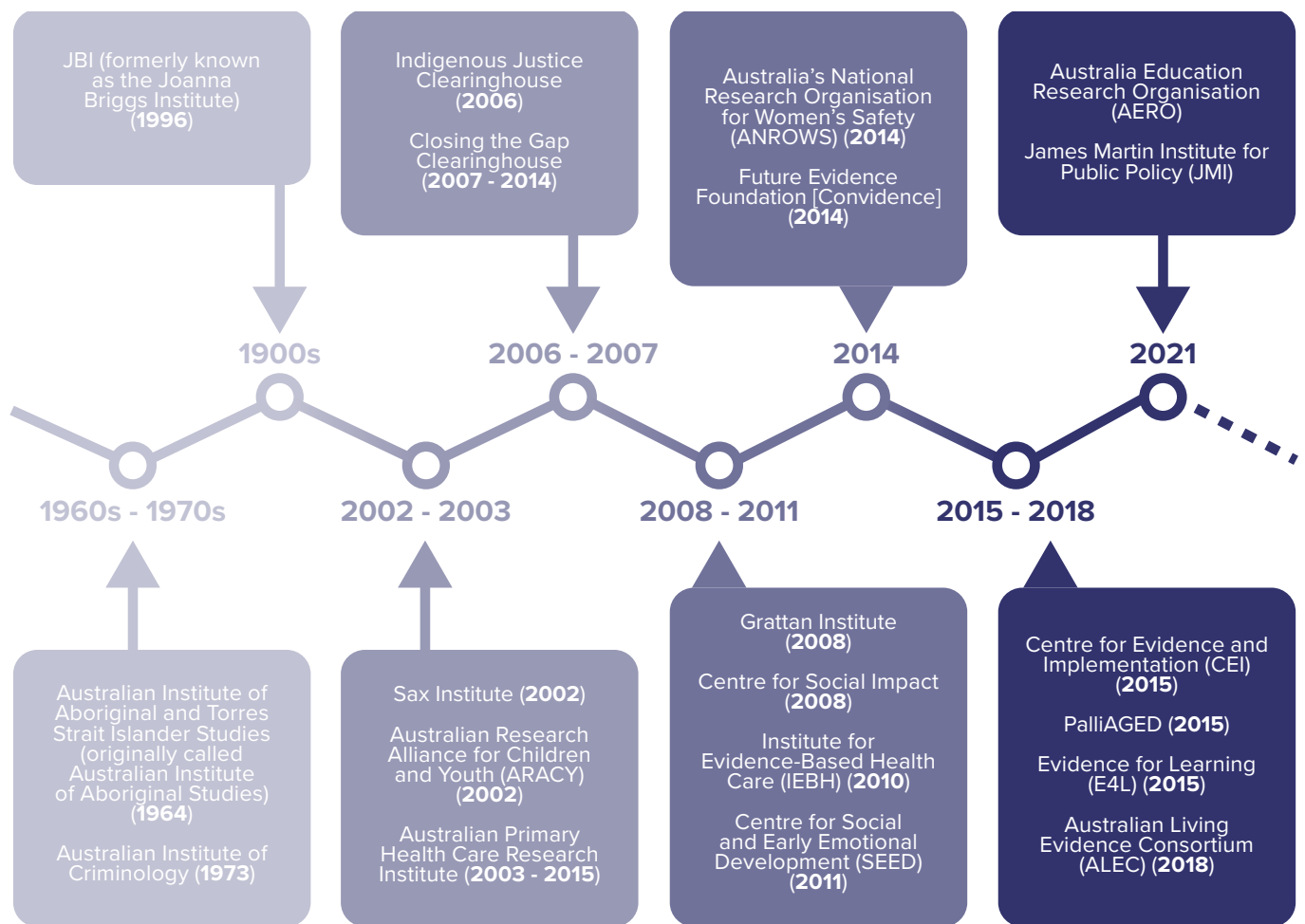


Figure 2: Sample of evidence institutes⁴



In Australia, the Government, at Commonwealth, state, and territory levels play a significant role, providing funding to 90% of evidence institutes. However, the connections between the outputs from evidence institutes and the government are not always clear. Nearly a third of evidence institutes work concern many areas of social and public policy, and the others focus exclusively on a single issue, such as health, young people and education, or supporting Aboriginal and Torres Strait communities. None explicitly focus on disadvantage. When defining evidence, there is an emphasis on the role and voice of Aboriginal and Torres Strait Islander peoples, and linked to this, a broader need to include user voice and experience.

Evidence institutes innovating with methods is a clear difference between Australia and the other three countries, and we discuss the impacts of this later in this chapter.

“ What is missing is an umbrella organisation that brings together evidence institutes from across different sectors. This would help share and build knowledge on how to generate evidence, but crucially, help to ensure evidence is effectively mobilised and used. ”

Mark Rickinson,
Monash University⁵

In Canada, we could not identify any evidence institutes that have been created since 2010. This might reflect a lack of funding or a perceived lack of need for new evidence institutes. Interviewees often said that Canadian evidence institutes are disconnected and working in isolation. Albert Armieri, First Nations Governance Information Centre, said, the “fractured system has led to all sorts of data challenges, including accessibility, quality and completeness of data. Different organisations often work in isolation from their peers, and too many evidence institutes overlap without meaningful cooperation”.⁶ Similarly to the other countries, the Canadian Government is a key target audience, but the influence on government is often unclear. In definitions of evidence, the role and voice of indigenous communities and lived experience was emphasised by Canadian evidence institutes.

In the UK, the government is a big player. It created the **What Works Network** to coordinate the **What Works Centres**, and it provides 70% of UK evidence institutes with some or all of their funding. Philanthropy also plays an important role, with 18% of UK evidence institutes relying on philanthropic funding. Nine What Works Centres, three affiliate members and one associate member collectively cover policy areas accounting for more than £250 billion of public spending.⁷ The What Works Centres are varied in what they do and operate largely independently of each other. Other countries often consider the What Works Network as an exemplary model of evidence institute architecture.

In the US, the federal government has signalled a commitment to evidence, such as through Obama’s evidence reforms⁸, and more recently, through Biden’s Year of Evidence. Compared to Australia, Canada and the UK, the US evidence institutes are more likely to engage with elected officials, more likely to produce costed options, have a stronger focus on the use of randomised evaluations to determine “what works”, and focus more on “evidence-based programmes”, often presenting solutions in clearinghouses as repositories of best practice.

The appendix provides a more detailed summary of the landscape in each country.

How evidence is defined

We asked the evidence institutes to define evidence and have generated an evidence institute-led definition of evidence. **Evidence is a pragmatic means to robustly and usefully answer questions, providing decision makers with practical guidance to solve problems and improve outcomes.**

Mixed methods are important. When finding “what works”, and evaluating later-stage innovations, more specific methods tend to be advocated, and there is a prevalence of experimental methods, such as randomised controlled trials (RCT). Qualitative methods are not excluded and are essential in understanding why something works, for whom, and why, and helping add texture to narratives for change.

All four countries recognise the **importance of user voice and lived experience.**

Australia and Canada, in particular, are increasingly emphasising the role of indigenous communities to ensure evidence incorporates indigenous ways of knowing and representation of diverse communities. John Lavis, Director of **McMaster Health Forum**, emphasised the importance of finding ways to include indigenous ways of knowing. He noted, “we need to support Indigenous communities in bringing forward these ways of knowing, both as a focus in their own right and in helping us put research evidence in context”.⁹

Standards of evidence frameworks can provide clarity on the methods used, and by using terms like “promising” and “proven”, can also indicate the level of confidence in the impacts.

“ What counts as reliable and useful and valued evidence is different for different contexts and in different countries. I’ve become a contextualist. There is no one answer to what constitutes evidence; you have to nuance this. The actors, resources and timescales are always different. ”

Brian W. Head,
University of Queensland¹⁰

“ The What Works narrative persists, but the reality is that there are a range of diffuse and divergent evidence use models and definitions of evidence. ”

Annette Boaz,
Transforming Evidence¹¹

Target audiences

Nearly all evidence institutes seek to influence policymakers in government. This reflects government being a major funder of social policy and programmes, and influencing government spending provides the most significant potential impact.

Yet this is about more than just policy or engaging the government. Evidence institutes can engage practitioners, such as social workers and teachers, and others involved in delivery services, such as philanthropic organisations. Some also aim to engage service users and the general public. Annex B provides examples of both evidence institute audiences and outputs.

“ There needs to be a change in the criteria that government social programmes use to award funding. Before a drug or medical device can get to market, it needs at least two randomised controlled trials to show it is effective. This has been true for 60 years and has led to profound improvements in human health. We need something analogous in social policy. ”

Jon Baron, President,
US Coalition for Evidence-Based Policy¹²

Funding source and scale

Evidence institutes receive funding from multiple sources, including government, philanthropists, and academia, and through various means, including endowments, grants or service contracts. The size and scale can vary significantly. To give a sense of annual spend and funding models, evidence institutes can be loosely grouped in four ways:

1. Government-funded and housed entities often have statutory obligations to respond to or deliver government priorities. Examples include the **National Institute for Health and Care Excellence (NICE)**, which spends over AU\$94.3m (£54m) annually, and acts as a non-departmental government agency providing national guidance and advice to improve health and social care. Another example is the **Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS)** which has the highest annual spend of any evidence institute in Australia (AU\$33m).

2. Government funded, often with philanthropic or academic co-investment, for semi-independent institutions that both respond to government demands and can also usually set their work agenda, with the engagement of a broad range of decision makers and practitioners from inside and outside government. Examples include the **Grattan Institute**, the **James Martin Institute (JMI)**, and the **Education Endowment Foundation (EEF)**.

3. Philanthropic or academically funded entities, often with core and project funding covered for two or more years, to advise and support government and non-government practitioners. Examples include the **Centre for Homelessness Impact**, the **Coalition for Evidence-Based Policy**, and **What Works Cities**.

4. Organisations that seek funding from government, philanthropy and others on a project-by-project basis. In this category, the budgets and types of work undertaken vary significantly. Examples include **Mathematica**, the **Centre for Evidence and Implementation (CEI)**, and the **Collaboration for Environmental Evidence (CEE)**.

Annual spend varies significantly across evidence institutes. Rather than the size of annual spend correlating to scale of impact, we found that how money is spent in terms of quality staffing and the effectiveness of outputs was much more important. We will discuss this in greater detail in the next chapter.

Lessons learned from closed evidence institutes What Works Scotland operated from 2014 - 2020. Professor Peter Craig, who was one of the co-directors, said there were a number of challenges. Peter said, “We struggled because there was no clarity of vision for the purpose of the organisation, or even our definition of evidence. This introduced uncertainty really early on and made it hard to move forwards.”¹³

Impact measurement

The majority of evidence institutes find measuring their overall impact challenging. The most sophisticated can demonstrate how their work has influenced government spending or improved outcomes. Nearly all use reach as an indirect indicator of effectiveness, encompassing metrics like website traffic, report downloads, policy paper citations, and academic article references. Most evidence institutes know that measuring reach can conflate awareness with impact.

“ Despite decades of research showing the complexities of evaluating evidence use, we are often after silver bullet solutions. We want a simple answer, even though we know it is complex, multifaceted and incredibly hard to do. ”

Annette Boaz,
Transforming Evidence¹⁴

Impacts of evidence institutes

Evidence institutes can have an impact in several areas:

1. **Shifting investment towards interventions that work.** Encourage investment in evidence-based solutions, and cease funding for those proven to be ineffective. Examples include:
 - Over the past decade, **Results for America** has helped shift more than US\$22 billion in government dollars to evidence-based programmes and policies.¹⁵
 - The **AIATSI** engaged with the NSW parliament to help influence legislation around fishing rights for Aboriginal and Torres Strait Islander people.¹⁶
 - The **Coalition for Evidence-Based Policy** has worked with the Executive Branch and Congressional officials for new policy initiatives, including the US\$142m Investing in Innovation Fund to scale up evidence-based K-12 educational intervention.¹⁷

- The **Washington State Institute of Public Policy (WSIPP)** has influenced the State’s funding decisions in several areas. For example, it identified “evidence-based” options that can reduce the future need for prison beds, save money for the state and local taxpayers, and contribute to lower crime rates.¹⁸
- The Results First Initiative tools have been used by US governments to influence spending decisions. For example, Colorado’s Office of State Planning and Budgeting (OSPB) invested over \$130 million into evidence-based policies.¹⁹

2. Ensuring practice is effective and impactful. Practitioners, such as teachers or social workers, are provided with guidance to help identify and use approaches that can help improve their work. Whilst actively learning from advances in practice to help spread impactful ideas and create communities of understanding. Examples include:

- The **Education Endowment Foundation Teaching and Learning Toolkit** provides an easy way to understand the effectiveness of different interventions to raise educational attainment. It was used by over 90% of primary schools during the Covid-19 pandemic.²⁰
- The **National Institute of Health and Clinical Excellence (NICE)** has developed clinical guidelines that have improved life chances and reduced death rates. For example, following NICE guidelines, the UK’s annual mortality rate from pulmonary emboli fell by 7,000.²¹

- Research from the **Australian Institute of Criminology** on dating app-facilitated sexual violence (DAFSV) revealed high levels of sexual harassment and aggression. This informed government policymaking and prompted dating app providers to adopt safer design principles.²²

3. Encouraging more rigorous evaluation. Innovating with new and more agile methods, helping improve people’s ability to understand and use evidence, and encouraging government and others to test, learn and adapt. Examples include:

- The **AIATSI** has provided community-led research grants to communities to undertake their own research, enabling communities to become researchers rather than research subjects.²³
- **PalliAGED** has developed Living Guidelines for the Australian Department of Health, updated via automated feeds as new evidence emerges, and relevant insights are incorporated into guidance.²³

- The **WSIPP** worked with the **Pew-MacArthur Results First Initiative** to help spread the WSIPP Benefit-Cost model to other states in the US. Twenty-five states participated in the programme, and seven states still use the model.
- The **Abdul Latif Jameel Poverty Action Lab (J-PAL)** has had a significant impact on mainstreaming the use of RCTs in social policy. J-PAL co-founders, Abhijit Banerjee and Esther Duflo, and affiliate Michael Kremer, were jointly awarded the 2019 Nobel Prize in Economics “for their experimental approach to alleviating global poverty”.²⁵

4. Catalysing action to tackle complex issues and changing the narrative around the value of evidence. Making the case for why evidence is important and raising the profile of particular issues or topics to ensure they are acted on. Examples include:

- **Australia’s National Research Organisation for Women’s Safety (ANROWS)** is becoming one of the leading authorities on violence against women. For example, it is helping to shift the discourse and understanding of coercive control.
- The **What Works Centre for Wellbeing** has helped raise the profile of wellbeing, including influencing the UK HMT Green Book to include guidance to policymakers across the government on how to factor wellbeing into new policy initiatives.²⁶
- The **Centre for Homelessness Impact’s** Evidence Gap Maps have helped the UK government reframe the definition of homelessness, moving away from simply rough sleeping to consider several other indicators.

The next chapter explores the criteria that help make an effective evidence institute.

Chapter 3: What makes an effective evidence institute

This chapter discusses the impacts of evidence institutes and identifies what makes an effective evidence institute. These insights have been used to create our Evidence Institute Maturity Model.

Based on our analysis, the activities of evidence institutes tend to fall into four impact categories.

1. Shifting investment towards interventions that work.
2. Ensuring practice is effective and impactful.
3. Encouraging more rigorous evaluation.

Catalysing action to tackle complex issues and changing the narrative around the value of evidence.

Many evidence institutes work across more than one category and deploy different methods and capabilities to achieve impact. Although evidence institutes vary significantly in size, structure, and focus, we have created the Evidence Institute Maturity Model to capture the six key elements we have identified as enabling evidence institutes to achieve impact. Operating effectively at Level 3 “Best” across all six elements strongly suggests an evidence institute will achieve demonstrable impact.

The maturity model helps determine the effectiveness of individual evidence institutes and helps understand the differences between them. It could help existing evidence institutes improve their practice and guide the creation of new evidence institutes.

Characteristics of an effective evidence institute

This section draws upon the six criteria in the maturity matrix to show why they matter and how evidence institutes operating with more advanced practice at Level 3 configure them to achieve results.

		Basic	Better	Best
1	Definition of purpose	Has a wide and / or undefined focus.	Focus is clear and aims are understood.	Focus, audience and purpose are clear with defined paths to impact.
2	Strategic Independence	Funding type or source restricts long-term thinking and/or perception of neutrality.	Long-term thinking is limited by insecure funding, but maintains neutrality.	Neutral, balances short-term demands and longer strategic thinking.
3	Connectedness	Lacks relationships with key stakeholders to influence decision makers.	Established relationships but lacks capability or capacity to influence them.	Influences gatekeepers and establishes itself as a trusted go-to expert.
4	High-quality evidence	Identifies problems and generates evidence to provide potential solutions.	Positions tactically in evidence-gaps, fills them to make recommendations.	Generates delivery-ready evidence with clear costs, trade-offs, and benefits.
5	Effective communication	Signposts and raises awareness of evidence, such as on its website or in a newsletter.	Evidence is accessible, easy to understand, and targeted to suits its key audience.	Drives change by providing evidence and supporting implementation.
6	Meaningful impact measurement	Uses “reach” as a proxy for impact, such as website hits or report downloads.	User feedback is used, such as surveys, citations, or mentions in policy.	Quantified impact measures, such as on outcomes or money saved.

Figure 1: The Evidence Institute Maturity Model

1. Definition of purpose

A purpose, clearly defined, with stated target outcomes, audience, and paths to impact. This sets internal and external expectations, fosters a clear method and way of working, helps focus on a specific audience, and creates outputs to meet their needs.

A Theory of Change can be a helpful structuring tool. It can highlight what is to be achieved and the engagement methods to aid an evidence institute's ability to identify key metrics and evaluate progress against set goals.²⁷

A clear purpose does not restrict an evidence institute to a single topic, such as education or health. It could span multiple policy areas tailored to a specific audience's needs, such as responding to the needs of a government department. In both cases, clarity on how the evidence institute operates and what it wants to achieve is essential to help audiences recognise its usefulness.

Evidence institutes may falter when they target issues with no distinct "owner" in government. This includes complex and multifaceted problems, such as disadvantage, which spans many policy areas across several government agencies and departments. A broad remit is not necessarily an issue, but it becomes problematic when there is no clear audience to engage and unidentified routes to impact.

Successful and effective evidence institutes understand what decisions are to be informed, who needs to be engaged, and the varying incentives for different audiences. Co-designing the evidence institute's purpose and outputs with key audiences is important. And this requires ongoing engagement and reflection.

The focus may evolve as the evidence institute matures. An important starting point is a clear focus, but as an evidence institute evolves, there can be value in gradually broadening so other issues are considered, or by periodically zooming back out to consider the wider policy landscape.

Examples of evidence institutes that do this well:

- During its incubation period, the **What Works Centre for Children's Social Care** used ethnography to understand the points in a social workers' day when they had to make decisions to identify how they access information. It used this to inform its understanding of the sector's evidence needs and the best way to disseminate information.²⁸
- The **EEF** provides schools, nurseries and colleges with reliable evidence and guidance to improve teaching and learning for 2 to 19-year-olds. EEF has a clear focus on teachers and practitioners in the education sector with the stated objective of breaking the link between family income and educational achievement, which means it has both a clarity of purpose and audience. According to independent polling, 70% of leaders across primary and secondary schools use EEF's Teaching and Learning Toolkit to inform their decision-making.²⁹
- **ANROWS** generates, translates and promotes knowledge, all motivated by the right of women and children to live free from violence and in safe communities. It has aligned its mission with the National Plan to Reduce Violence against Women and Children to ensure it delivers against policy priorities.

2. Strategic independence

Strategic independence enables evidence institutes to provide unbiased recommendations, balancing immediate user demands and long-term strategic vision. This requires skilful navigation of funding sources, and maintaining close yet neutral relationships with decision-makers. Being “strategic” implies engagement with funders and stakeholders while preserving the freedom to communicate evidence.

Strategic independence does not mean avoiding government funding. Complete government independence can lead to irrelevance. Government acting as a core funder means it is literally and figuratively “bought-in” to the work of evidence institutes and can provide evidence institutes with access to key decision-makers. The choice of funding source and governance arrangements is crucial to maintaining perceived neutrality and freedom in discussing findings.

“ An evidence institute that does not have close ties to the government will not achieve very much, particularly with helping disadvantaged communities. Unless people trust you, and you have people engaged from the beginning, you will not have an impact. ”

Ligia Teixeira,
Centre for Homelessness Impact³⁰

Secure funding, such as endowments or commitments longer than two years, can enable greater self-autonomy in setting agendas. Project-based fundraising can be time-consuming, distract from core work, and introduce uncertainty, often hindering staff retention.

Beyond funding, there are other means for gaining strategic independence, such as recruiting “big names” with credibility onto the advisory board and ensuring bipartisan support and representation. These tactics are discussed more in the Connectedness section.

Examples of evidence institutes that do this well:

- The **EEF** has close ties with the UK government. The UK Department for Education commissioned its establishment by The Sutton Trust and Impetus with a founding grant of £125m.³¹ It is established as an independent charity. However, close ties to the government means it can influence national policy and broker the implementation of impactful programmes and services. The broader education sector's perception of EEF's independence is crucial for its credibility among practitioners and consequent impact.
- The **WSIPP** receives state government funding and is entirely directed by the state legislature, but maintains a trusted position of perceived neutrality. WSIPP has 16 people on its bipartisan Board of Directors representing the state legislature, executive branch, and the academic community. The board structure ensures buy-in from a wide range of stakeholders and political interests.³² WSIPP has to be adaptable to respond to political priorities. As Stephanie Lee says, "We work at the direction of the legislature, so our work can change dramatically year to year."³³

- **Blueprints for Healthy Youth Development** reviews evaluations of youth prevention programmes. It is an independent non-profit housed at the University of Colorado Boulder. Pamela Buckley, Principal Investigator at Blueprints, says that being independently operated and receiving a mix of government and philanthropic funding, has built credibility and trust as a "neutral" organisation, helping to promote "a brand of trust in scientific evidence".³⁴

3. Connectedness

For evidence institutes, relationships are central to their work. Evidence institutes need strong networks with their sector to actively engage key decision makers and build trust. At Level 3, evidence institutes create pathways for cross-sector learning, brokering and managing challenging relationships, often between competing stakeholders.

The work of effective evidence institutes is heavily relational and based upon trust.

Evidence generation and use can often be depicted as linear, rational and transactional when it is anything but those things. A crucial part of relationship creation is identifying relevant change makers. Interviewees often described key staff in evidence institutes as the "movers and shakers". Often these people are already well-respected in their field and beyond. Sometimes they are more junior but are adept at forging ties to become trusted and a "go-to" point of contact for evidence and advice.

“ If we stood alone and just released products, it would be isolating and ivory towered. From very early on, we have built relationships to gain traction with palliative care organisations, state and federal governments, and carers. We don’t do things as a soloist, but we see ourselves as part of an orchestra. We try to connect the dots. ”

Jennifer Tieman,
PalliAGED³⁵

Effective evidence institutes manage to balance being close enough to the government to be influential but far enough to be objective. This is often achieved through specific governance arrangements. For example, the UK Home Office funds the **Youth Endowment Foundation (YEF)** and has put a non-voting representative on its grants committee. When the **What Works Centre for Children’s Social Care** was being incubated, the Department for Education appointed their Chief Social Worker a board member.³⁶

Decision makers and researchers can often “speak a different language”. The role of the evidence institute is to forge connections and to be able to move in and out of these different worlds. Effective evidence institutes will understand how the information will need to be presented, that different audiences may be interested in other questions, and that there may be different levels of evidence literacy. Furthermore, they will understand that different incentives often drive different audiences and use this to engage and influence.

“ You need to keep building the expertise and keep hiring people who can connect with politicians and government staff. It is not easy and it takes money and time. ”

Stephanie Lee,
Washington Institute for Public
Policy (WSIPP)³⁷

Examples of evidence institutes that do this well:

- **What Works Cities Certification**, funded by Bloomberg Philanthropies and led by Results for America, supports city and municipal governments to use data and evidence to tackle pressing challenges. It supports leaders in city governments to build a data culture and enable an evidence culture to take hold, helping make better and more equitable policy and budget decisions that improve the lives of residents.³⁸
- The **Centre for Homelessness Impact** works closely with UK governments, local authorities, and universities to support understanding of homelessness and to develop successful interventions. The Centre emphasises the power of connections and trust to identify and engage key change makers. It uses Impact Forums between the public, practitioners, and policymakers to develop solutions and share experiences. The Centre has also forged close ties with the UK government.³⁹

4. High-quality evidence generation

Evidence generation is defined by the appropriateness of the methodologies for what an evidence institute strives to achieve. Timeliness and rigour are essential to ensuring decision-makers are given what they need in a responsive and high-quality way. At Level 3, evidence institutes produce actionable, ‘delivery-ready’ evidence, with clear options like benefits, costs, and constraints.

Mapping the evidence helps identify where to fill gaps strategically. For instance, the **Centre for Homelessness Impact** used evidence mapping to commission reviews, avoiding duplication by identifying existing knowledge before generating new evidence. As Howard White, **Centre of Excellence for Development and Impact Learning (CEDIL)** says, “map the evidence and then react”.⁴⁰

Evidence institutes that are primary producers of evidence can act strategically, but can be more expensive. There is a distinction between evidence institutes that synthesise existing evidence and those that can undertake and commission primary research. The ability to drive new evidence can make an evidence institute more effective, but it can mean that they cost more and require more funding.

Some evidence institutes prioritise the inclusion of marginalised voices. These include the experiences of those historically underserved in society, from an indigenous group or a small community, with low data representation. When including diverse stakeholders’ views, processes need to be used that are deliberate and considerate and do not replicate existing hierarchies of knowledge and power.

Most evidence institutes focus both on what is working and why. Many evidence institutes advocate that finding what works requires at least one randomised controlled trial (RCT) or other quasi-experimental method. Complementing data with qualitative findings adds richness and depth to improve insights.

Evidence institutes show how confident users can be in the evidence. Standards of evidence frameworks provide clarity on the methods used. And by using terms like “promising” and “proven” these frameworks can also indicate the level of confidence in the impacts.

Evidence institutes should have the capacity to be responsive and generate evidence at short notice. Often, decision makers and researchers’ timelines do not align. Decision makers, particularly those working in a rapidly changing policy context, sometimes require evidence within hours or days rather than weeks and months. Effective evidence institutes that operate at Level 3 on the Maturity Matrix have the capacity to respond to these more urgent demands.

Examples of evidence institutes that do this well:

- The **WSIPP** draws upon systematic evidence reviews and uses meta-analytic approaches to synthesise findings. It then uses a cost-benefit model that enables costs to be built into reports for policymakers.
- The **Institute of Evidence-Based Health Care (IEBH)** has developed a process for a two-week systematic review, which uses a suite of automated tools - that is freely available for others to use - to create a systematic review in a significantly accelerated timeline.⁴¹ Paul Glasziou said, “The quality is the same or better than humans, and it was faster”.⁴²
- The **James Martin Institute (JMI)** has a rapid response capacity to address requests from ministers, chief of staff, and officials in the New South Wales Government. JMI can respond to requests within two weeks with a written briefing or, if the question requires it, JMI can bring together a group of experts in a roundtable discussion, or facilitate a one-to-one conversation between the government and an academic expert.

5. Effective communication

Closely linked to evidence generation is how evidence is communicated and made usable. At Level 3, evidence institutes ensure that evidence is accessible, easy to understand, provides the required insights, and builds capacity to enable decision makers to act on it.

Evidence institutes should apply an evidence-based approach to their messaging and engagement strategies.

This means testing and learning from different approaches to engage and influence. As an example, the Education Endowment Foundation tested various resource types, like printed summaries and webinars, to understand the impact on literacy outcomes. They found that these methods did not affect pupil performance or teachers’ research use.⁴³ Despite their prevalence and low-cost appeal, such outputs may not effectively inform decisions. Therefore, knowledge mobilisation and communication funds need effective channelling.

“ **Evidence institutes need to meet the needs of users. The way people consume evidence has changed over time and evidence institutes need to keep up with demand by adapting and developing new methods for evidence communication.** ”

Felix Greaves,
National Institute for Health and
Care Excellence (NICE)⁴⁴

There is a need to create quick wins, galvanise momentum, and demonstrate usefulness. For example, the **Centre for Homelessness Impact** launched with outputs ready to go. The **Education Endowment Foundation** quickly developed the Teaching and Learning Toolkit. These outputs are also good examples of how **visual outputs help to make evidence tangible and usable.**

Decision makers are often presented with costed options which is a useful and compelling means of communication.

The most effective evidence institutes provide details on the financial costs and associated benefits to enable decision makers to rank and compare different options, selecting solutions that best fit their context.

Furthermore, costed options can be an effective stakeholder engagement strategy with Treasuries and others who are focused on effectiveness in tight budget contexts.

Simply publishing evidence as systematic reviews or in clearinghouses is often not enough and there should be a focus on implementation. The most effective evidence institutes recognise that evidence does not speak for itself and that decision makers often need help understanding the implications. Implementation guidance should be provided to enable a shift from understanding the evidence into putting it into practice and changing policy or service delivery.

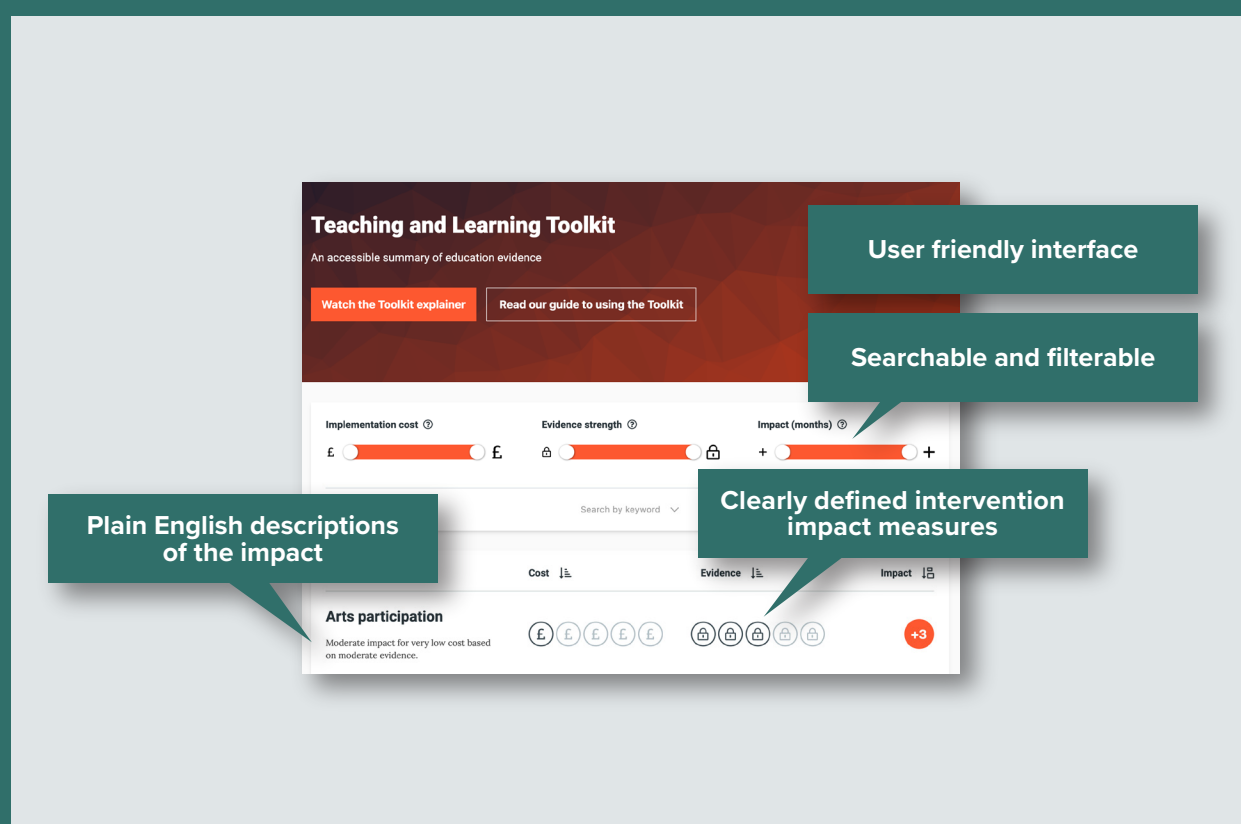
Examples of evidence institutes that do this well:

- **What Works Cities** provides support and training for city officials and administrators to set up a local infrastructure for evidence-based policy and creates peer networks for cities to support each other. It also runs Solution Sprints, a 6-to-12-week virtual learning opportunity that provides local government leaders with the support and strategies to accelerate the implementation of interventions that improve economic mobility.
- The **Centre for Evidence and Implementation (CEI)** focuses on generating and communicating robust evidence and supports decision makers to use it by providing implementation guidance.
- **Evidence for Learning (E4L)** engages with their target audiences of educators and educational leaders to understand what they need to know and in what formats they find helpful. For example, Australian early childhood educators reported struggling with responding to challenging behaviours.⁴⁵ Evidence for All commissioned a systematic review and created “tip sheets” with evidence-informed guidance presented in an easy-to-digest format.⁴⁶

Case Study: Education Endowment Foundation Teaching and Learning Toolkit

Effective outputs are easy to use and are designed with and for the intended audiences. An excellent example is the Teaching and Learning Toolkit, which supports teachers and school leaders to improve learning outcomes.

It provides high-quality information about **what is likely to be beneficial** based on the existing evidence. **Decision makers then use the information in the Toolkit** to judge what might work best in individual schools.



Source: Education Endowment Foundation (annotated by author)

6. Meaningful impact measurement

This is the ability to measure the impact of the evidence institute and whether it has achieved its mission. At level 3, evidence institutes have robust impact measures, such as improved outcomes and money saved.

Effective evidence institutes can explain how their work has made a difference.

Those that are more advanced go beyond measuring the reach and awareness of the evidence institute's work and can demonstrate how the evidence institute has achieved its mission.

Having a theory of change or logic model can help structure impact measurement. Jen Gold, former head of the What Works Network, suggested that evidence institutes can baseline information and evaluate individual strands of work. For example, testing participants' comprehension at the beginning and end of a workshop or training session, rather than just doing a feedback survey at the end, or using A/B testing on communications to see how the presentation of information can influence audience engagement.⁴⁷

Independent expert evaluators can be engaged to improve measurement of evidence institute effectiveness. This can provide advice on some of the more technical details of evaluation, and provide a more objective assessment.

Examples of evidence institutes that do this well:

- **What Works Cities** tracks investments of participating cities and has commissioned an external report monitoring progress and outcomes in its partner cities.
- The **Youth Endowment Fund (YEF)** (UK) has been independently evaluated by the Campbell Collaboration. This evaluation enabled YEF to translate the underlying evidence into accessible and actionable summaries for practitioners and commissioners and focus on areas to fund and improve.
- **Results First** uses return on investment and money saved as an outcome measure for tracking its influence on the individual US states it works with.

Chapter 4: What is the demand for evidence by key groups in Australia, and what are the opportunities for establishing a new evidence initiative?

This chapter explores the demand for evidence and the opportunities for new evidence initiatives in Australia. It sets out a series of steps to explore new evidence infrastructure in Australia and outlines the role of philanthropy, government and others in making it happen.

There is a good opportunity for evidence to be used to help tackle disadvantage in Australia. Across the evidence institutes, academics and government officials we engaged, there is great enthusiasm for interventions to strengthen the evidence ecosystem in Australia. With a public service reform agenda underway, there is an opportunity to capitalise on political momentum.

Australia has several key strengths to draw upon to support future evidence initiatives.

There are already evidence institutes operating in Australia. Although none focus explicitly on disadvantage, many work in overlapping fields and others can provide deep methodological expertise that could be applied to tackling disadvantage. Surrounding the evidence institutes is a thriving research sector, and a for-purpose sector that can often engage with high-quality evidence.

But there are challenges, including a lack of connectivity across the evidence ecosystem.

In particular, there needs to be more support for those working on evidence to convene, learn from each other and harness a collective voice to advocate for change. Our workshops in 2023 were one of the first times that some of those active in the evidence space had met to discuss what new interventions could strengthen the evidence system for tackling disadvantage.

Demand for evidence across government and beyond is often patchy.

Some areas, like health, are already well developed. In other areas, there are often issues around both the supply and generation of evidence. Barriers for decision-makers include a lack of evidence in certain policy areas (such as employment), evidence not always being accessible or timely, a lack of implementation guidance, and few costed options. As well as limited demand for evidence, there is often a lack of reliable, rigorous evaluations, with more needed, particularly RCTs, in certain areas.

Opportunities for an evidence institute to tackle disadvantage

We have identified an opportunity for the evidence system in Australia to be strengthened. We have also identified what an effective evidence institute looks like and these insights can help play a role in crafting the required interventions. But rather than focusing on the possibility of creating a new evidence institute, as was the original intention for this study, the barriers we have identified mean that more consideration about the potential solutions is required. Therefore, rather than starting with the institutional response, we instead have identified the need for wider discussion and engagement to explore what is required to help strengthen the evidence system in Australia. This should engage key audiences and decision makers, galvanise momentum for change, and forge connections across the existing evidence institutes and wider ecosystem. This will help answer what institutional form – or forms – an evidence initiative should take, who could play a role, how to build upon rather than duplicate existing efforts, and how future work should be funded and governed.

The end result may be a new evidence institute, it may be a consortium model, it might involve supporting existing evidence institutes, or it might be something different. The intention is that the recommendations below will engage partners, funders and decision-makers to identify and test different models that most effectively enable smarter decision making to improve outcomes and improve lives.

Recommendations for future work

This section recommends a practical set of next steps to explore how evidence can be more effectively generated and used to tackle disadvantage. The steps set out in Figure 3 aim to build upon Australia’s strengths and overcome the challenges by convening, influencing and innovating.

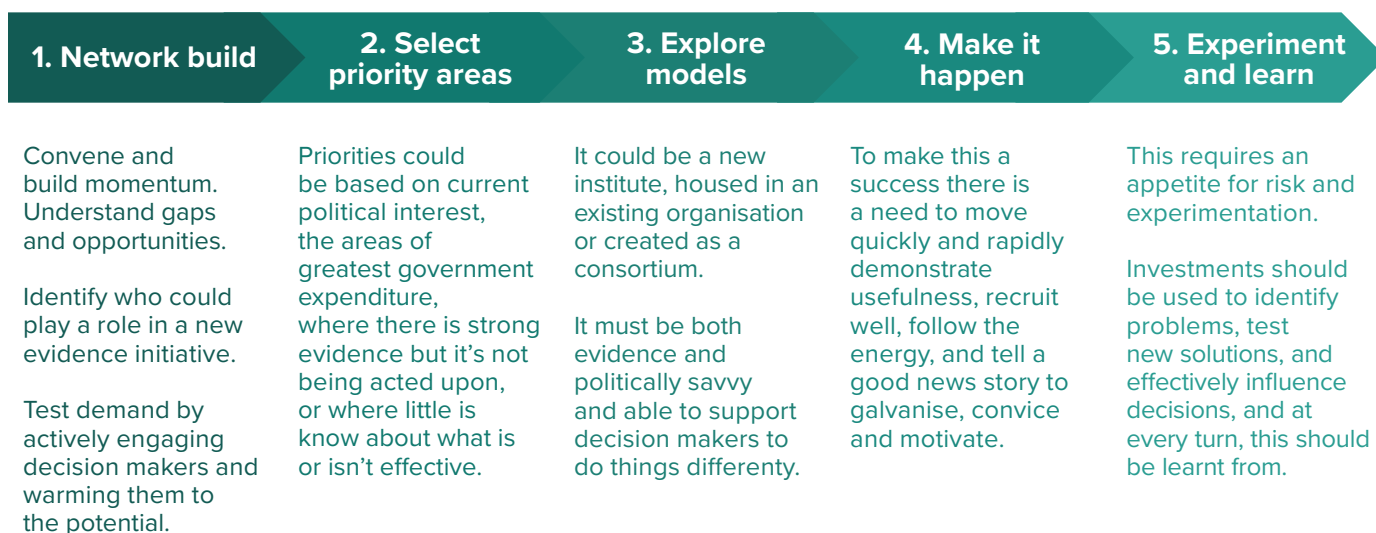


Figure 3: Next steps for future work

1. Network build

Create a network to engage, convene, raise awareness, forge connections, avoid duplications of effort, and help shape future work. Creating a network of evidence institutes and wider stakeholders would provide a focal point for evidence efforts, galvanise a coalition of the willing, and help foster a collective voice for how and why evidence can be useful.

A network could help to identify needs, gaps and opportunities to tackle disadvantage, and help to identify organisations that could play a role in this. It could seek to learn from all policy areas and sectors instead of reinforcing existing policy silos, and bring together those working in fields parallel to evidence, such as social innovation, to share knowledge and build expertise. It should include diverse groups and viewpoints, including indigenous and Torres Strait Islander people. It could leverage wider networks and contacts for political and strategic engagement, identifying allies who can help advance this work. This network could help inform decisions about priority areas of focus and the operational models that a new evidence initiative could take.

Partner from the start. A collaboration between government, academia, and philanthropy should be explored. Existing government interest could be harnessed to develop and experiment with different models. This could help ensure the appropriate tiers of government are engaged to influence the right decision makers.

The network and development of further work could be led by a “neutral” broker who can convene and catalyse without having a vested interest in any one solution.

Better still, several funders could collaborate to ensure it is not unduly swayed by a single organisational voice. However, care should be taken so that the involvement of too many organisations does not lead to issues with coordination and inertia. The Paul Ramsay Foundation could play a role in convening partners to discuss and agree on a way forward.

2. Select priority areas

A strategy should provide clarity of purpose and priorities. Disadvantage is complex, and tackling it effectively could involve many policy domains, including education, health, social care, and justice. A clear focus will help to manage expectations about what a new initiative will do and how it can be helpful to decision-makers. The exact policy focus could be selected based upon a variety of criteria, including:

- current political priorities;
- the areas of greatest government expenditure offering the potential for the highest cost savings;
- where there is strong evidence but it's not being acted upon;
- or where little is known about what is or is not effective.

These challenge areas could be reviewed, expanded and changed over time.

Ensure there are clear government ‘owners’ for the selected policy areas.

Choosing priorities that have a clear ‘owner’ in government will ensure that there is a defined target audience and help to mitigate the risk of trying to cover too much ground.

3. Explore models

Pilot an evidence initiative on disadvantage.

Drawing upon partners and the network, test out the most promising practical solutions to help improve how evidence is generated and used. A collaboration between government, academia and philanthropy could be explored to set up pilot models.

Recruit credible leadership. To embed a new evidence initiative and maximise its chances of success, it should be led by someone able to navigate the worlds of evidence, policy and politics. Staff will be required to work across and between fields, grow relationships and be seen as trusted. There may be an incubation period for a new initiative, and the person who gets it going may be different to the person who runs it in the longer term. And beyond direct hires, engage those with energy and influence. For example, recruit an advisory board of influential champions.

The initiative could be a new institute, an institute housed in an existing organisation, created as a consortium, or support could be provided to existing evidence institutes.

Wherever it is based, it would need to be well-staffed and properly resourced to make strategic investments. It should test and trial different interventions to hedge bets and maximise learning. These three possible models are detailed in **Table 1**, alongside potential advantages and drawbacks.

The pilot could aim to have an impact within two years.

There is a need to generate some quick wins to demonstrate value and usefulness early on. And this needs to be balanced with taking a longer term view to ensure big, complex issues are also addressed. Launch the pilot with example outputs that are relevant, practical and help demonstrate how it will help decision makers solve problems.

	What this could look like	Potential benefits	Potential weaknesses
Create a new evidence institute	One new organisation is tasked with all roles and responsibilities.	Provides a single focal point and a consistency in method and approach.	It could duplicate existing work, take time to hire staff, develop a track record, and garner wider buy-in.
Support existing evidence institutes	One or more existing evidence institutes are funded to develop a new initiative.	Established teams could roll out new models and approaches.	A single organisation may lack all the required skills and capabilities.
Create a consortium	Funding existing evidence institutes and others who can bring required skills and capabilities as a virtual initiative or as a spin-out to create a new entity.	It avoids duplicating efforts and draws upon existing knowledge and expertise.	Coordination and management could be more challenging.

Table 1: Potential models for an evidence initiative

Existing government interest could be harnessed to test and experiment with the pilot model. This could help ensure that the appropriate tiers of government are engaged to influence the right decision-makers. Co-funding with the government at the right level and at the right time can help ensure the government is literally and figuratively bought in.

It is crucial that it is underpinned by effective governance and a suitable funding arrangement. Whether funding comes from government, academia, philanthropy, or a mix, an evidence institute needs to ensure it can freely discuss findings and be viewed as trustworthy and credible by its audiences.

We have identified potential funding models. **Table 2** discusses their comparative strengths.

4. Make it happen

Recruit credible leadership and secure broader support amongst stakeholders.

It should be led by those able to navigate the worlds of evidence, policy and politics. To foster wider buy-in, one option would be to recruit a board of influential champions who bring expertise and help ensure it is not unduly led by a single organisation or agenda.

Synthesise existing research and conduct new research where necessary.

Utilise existing knowledge, and plug gaps where they exist. Furthermore, support living evidence to ensure that evidence is shared and updated, with the benefits of increased economies of scale and reduced costs to individual organisations.

	What this could look like	Potential benefits	Potential weaknesses
Secure funding	Funding drawn from an endowment, or core and project costs covered for longer than two years.	Greater autonomy to set their own agenda and take a longer term, experimental approach. More resourcing enables an evidence institute to do more, such as generating (often expensive) evidence, including conducting trials.	There can be high external pressure and expectations that secure resourcing will lead to rapid progress and impacts. Long term funding can foster a lack of internal urgency. It can also lack frequent “checkpoints” to ensure progress is on track to achieve the original mission.
Contract driven	Funding sought on a project-by-project basis.	Not tied to a single funder so can explore new work and opportunities.	Fundraising can be time-consuming, resource intensive, distract from core work and introduce uncertainty that can often hinder staff retention.

Table 2: Potential funding models for an evidence initiative

Communicate the benefits in a way that resonates with different audiences. This could involve framing around cost-savings, improved outcomes, and making life easier for decision makers. Good evidence does not speak for itself, so there needs to be a clear communications strategy and an effective communications team to help keep making the case.

Focus on delivery and implementation to practically solve problems. During the pilot, explore and test different tools to identify both effective solutions and effective influencing strategies. Help drive change by providing evidence and supporting policymakers and practitioners to implement new solutions.

5. Experiment and learn

Continually reflect on how to effectively influence decision making and ensure new solutions are implemented. As this report has shown, evidence institutes have existed for decades. Learn from existing evidence institutes those that have closed, and those who have played a key role in supporting or funding their efforts. This could include engaging with Arnold Ventures, Bloomberg Philanthropies, Coalition for Evidence-Based Policy Making, Kauffman Foundation, The Pew Charitable Trusts, Transforming Evidence, and William T. Grant Foundation. This would help emulate successful practices.

Sharpen understanding of how change happens by learning from other disciplines. Parallel fields, such as innovation, often strive to achieve similar goals of improving decision making and improving outcomes. Engage with these to improve understanding of how change happens.

Learn and adapt. Effective evidence institutes are not static: they are adaptable and responsive. Arguably, there is no end point and evidence will change, people's needs will change, and new challenges will emerge. This means adapting and responding to changing policy priorities, changing evidence, or the changing needs of the communities which an evidence institute is serving.

Commission an independent evaluation. Learning and adaptation should happen throughout. A formal evaluation should be commissioned so that at the end of the pilot, there is a much clearer understanding of where evidence can help tackle cycles of disadvantage. If proven to be impactful, the pilot will require longer term commitment and investment.

Who should be involved

Improvements to the evidence system in Australia should involve a wide range of stakeholders. This section focuses on the role of philanthropy and government in advancing these efforts.

Philanthropic organisations

Foundations can be catalysts and pioneers in enabling positive social change. Across the four countries we have analysed, philanthropic foundations and organisations play a key role. They are both funding the work of individual evidence institutes and often support the broader evidence ecosystem, such as by funding networks. When done well, rather than duplicating government efforts, philanthropy uses its investment as a conduit to persuade, inspire and inform government decision-making. Beyond directly funding evidence institutes, philanthropic organisations play a role in supporting the wider not-for-profit provider base. And beyond providers, they can draw upon their links into wider communities to ensure participation in evidence efforts.

“ Philanthropists can’t match the spending of the state, nor should they duplicate it. But philanthropists can have outsize impacts through ‘bending the spending’ of governments and public services towards more evidence-based and impactful activities. That includes: funding an evidence institute; robustly evaluating innovative interventions; supporting systematic or ‘living’ evidence reviews; and nurturing the skills and capabilities of policymakers to build and use evidence better. ”

David Halpern,
Former UK National What Works Advisor⁴⁸

Government

Evidence institutes need close links to the government to affect real change. In Australia, all tiers of government need engaging, but for different reasons and in different ways. There will need to be consideration of where power lies, at a federal or state level, and where the decision making resides for the issue or topic being addressed.

The Australian Government needs evidence, but it also needs warming. Interest has been identified in both New South Wales and Victoria, and these states could be good starting points to experiment and collaborate. They could also help leverage wider federal and state buy-in.

“ At the moment, government social spending generally does not prioritise or reward evidence of effectiveness. Until that changes, nothing too meaningful is going to happen with evidence-use in social policy. ”

Jon Baron, President,
US Coalition for Evidence-Based Policy⁴⁹

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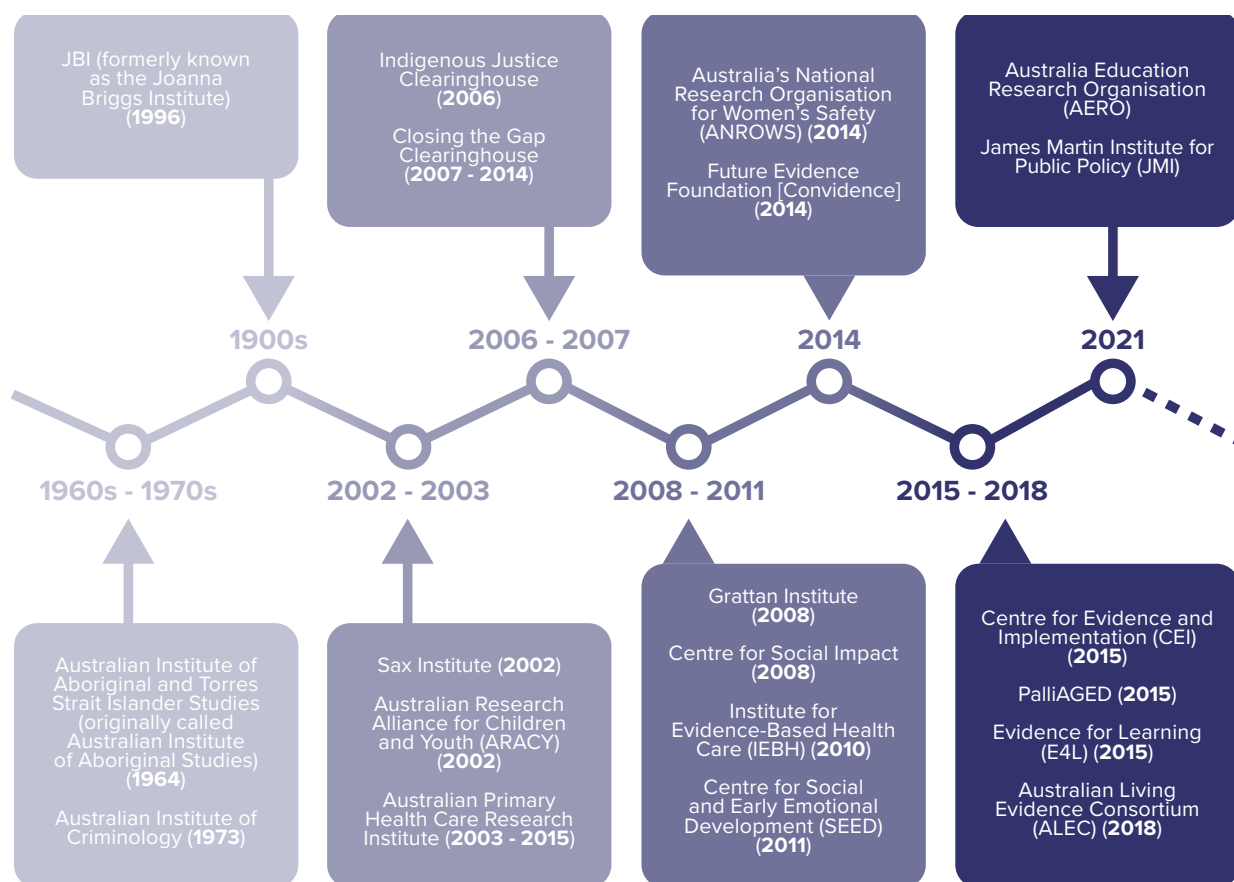
Annex A: Country case studies: Australia, Canada, UK and the US

1. Australia

We identified and analysed 20 evidence institutes and others in Australia’s evidence ecosystem. Fourteen fit our definition of an evidence institute, and then we cast the net wider to explore an additional six organisations and initiatives that play an important role in generating or communicating evidence.

History

In Australia, over the past decades, there has been a growing interest in understanding how policy making can be strengthened by the use of evidence. For example, in 2009 the Australian Government Productivity Commission convened Australian experts from government, academia and elsewhere, to critically discuss evidence-based policy making, its application, and recent methodological trends.⁵⁰ The need for new and improved systems for evidence has been explored at a national and state level, and by international organisations.⁵¹ Scholars have advocated that change in Australia is required “from three angles: from the viewpoint of research supply (production), from the viewpoint of demand (needs and capacities for research use), and from the viewpoint of intermediation or translation”.⁵²



Current landscape

The timeline shows both evidence institutes and those we studied that operate in the wider evidence ecosystem. The earliest Australian evidence institute was created in 1964. However, the creation of evidence institutes in Australia is a relatively recent phenomena, with the majority of evidence institutes emerging in the past fifteen years.

How evidence is defined

Australian evidence institutes define evidence broadly but tend to share a clear view on the most appropriate types of evidence for a given purpose. For example, evidence synthesis and systematic reviews are viewed as the “gold standard”, although it is often recognised that quicker, rapid evidence assessments are also valid. For impact evaluations of policies, programmes and practices, randomised controlled trials (RCTs) were often cited as the best method. The peer-review process was regularly mentioned as ensuring research complies with rigorous scrutiny. Cutting across methods was clear recognition of the importance of the voice of Aboriginal and Torres Strait Islander people, recognised as central to how evidence is conceptualised, defined and used. The need to incorporate these voices often prompted Australian evidence institutes to use and value qualitative methods, such as ethnography and action research.

A recurring theme across Australian evidence institutes is the need for evidence to be useful, to provide decision makers with the guidance they need in the format in which they require it. Furthermore, evidence institutes recognise that evidence is not enough. Decision makers also need assistance to navigate and use evidence. Implementation guidance is often provided to enable a shift from understanding the evidence into putting it into practice and changing policy or service delivery.

The **Australian Institute for Children and Youth (ARACY)**, **JB**I and **AERO**, all use standards of evidence frameworks. The frameworks tend to rate systematic review evidence highly, and expert opinion as low, but not meaningless; some incorporate whether evidence has shown to be effective in practice and in context, where others focus more on standards of academic rigour. **ARACY** uses the Maryland Scientific Methods Scale (SMS) and has added an additional dimension to show intervention implementability.⁵³ **JB**I uses a framework to judge the quality and rigour of evidence, rated from the highest - level 1 involving experimental designs; to level 5 which is expert opinion (JB I, 2019). **AERO**'s Standards of Evidence prioritise rigour and relevance, and are graded from Level 1 described as “Low confidence” where there is only a hypothesis to the highest Level 4, described as “Very high confidence”, showing positive effects in the context where it is to be used (AERO, 2022).

What they do

Nearly a third of evidence institutes do not have a single policy focus and work across many areas of social and public policy. For the remaining two-thirds of evidence institutes that are single issue, 25% focus on health, 16% focus on children, young people and education, and 10% are dedicated to supporting Aboriginal and Torres Strait communities.

Annual spend

Of those that publicly share their annual spend (12 out of 20), the average annual spend is AU\$9.5m. The **Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS)** has the highest annual spend, AU\$33m. This large budget may reflect the fact that it is a government agency, funded to provide statutory services. The next highest are the **Sax Institute**, funded by government/public sector and philanthropy, which spends AU\$15m a year, and both the **Centre for Social Impact**, funded by universities, and the **Australian Institute of Criminology**, funded by government, which both spend AU\$13m a year. Those with the lowest annual spend all spend in the region of AU\$2.4m per year, including the **Australian Research Alliance for Children and Youth (ARACY)**, the **Institute for Evidence-Based Health Care (IEBH)** and the **James Martin Institute for Public Policy**.

Funding source

The Australian Government, at Commonwealth, state and territory levels, plays a major role in funding evidence institutes. Government is the sole funder of 35% of evidence institutes, and provides some form of funding to 90% of all evidence institutes in Australia. Government funding is often combined with philanthropic funding, with 40% of evidence institutes receiving funding from these two funding sources. Only one evidence institute receives the majority of its funding from philanthropy, and only one is mainly funded by academia.

However, government funding does not necessarily guarantee long term buy-in. For example, the **Closing the Gap Clearinghouse** was funded 50% by the Commonwealth and 50% by all the states. One of the reasons why it closed in 2014 is because half the states wanted to stop funding it, and the Commonwealth required that all the states continue their funding if they were to continue investing.⁵⁴

Funding models

The majority of Australian evidence institutes have stable funding, with money lasting for two years or more. Endowments for Australian evidence institutes are relatively rare. For example, JMI received an AU\$10M endowment from the New South Wales Government, and the Grattan Institute has an endowment of AU\$15m, provided by the Federal and Victorian Governments (Grattan Institute, n.d.). An endowment or two years of more funding enables longer-term strategic thinking. For those that are funded on a project-to-project funded basis, such as the **Centre for Evidence and Implementation (CEI)**, shifting to a model where core costs are covered could deliver greater impacts.⁵⁵

Headcount

The average headcount of an Australian evidence institute is 45 staff members. The smallest is the **Indigenous Justice Clearinghouse** with just 1 staff member, and the largest are the **Centre for Social Action** with 122 staff and the **Australian Institute of Aboriginal and Torres Strait Islander Studies** with 182 staff members.

How impact is measured

There are a mix of approaches used by Australian evidence institutes to measure overall impact. Half measure impact of the evidence institute based on reach, using downloads of reports, attendance at events, hits on a website, or academic citations, as a proxy for impact. Over 20% (4 evidence institutes) have an external evaluation of their work, but this typically involves a process evaluation, and can include soliciting user feedback. Two evidence institutes use data on behaviour change, such as influence on government spending decisions. These latter kinds of measures provide a more compelling indication of impact on specific outcomes.

2. Canada

We have identified and analysed nine evidence institutes in Canada.

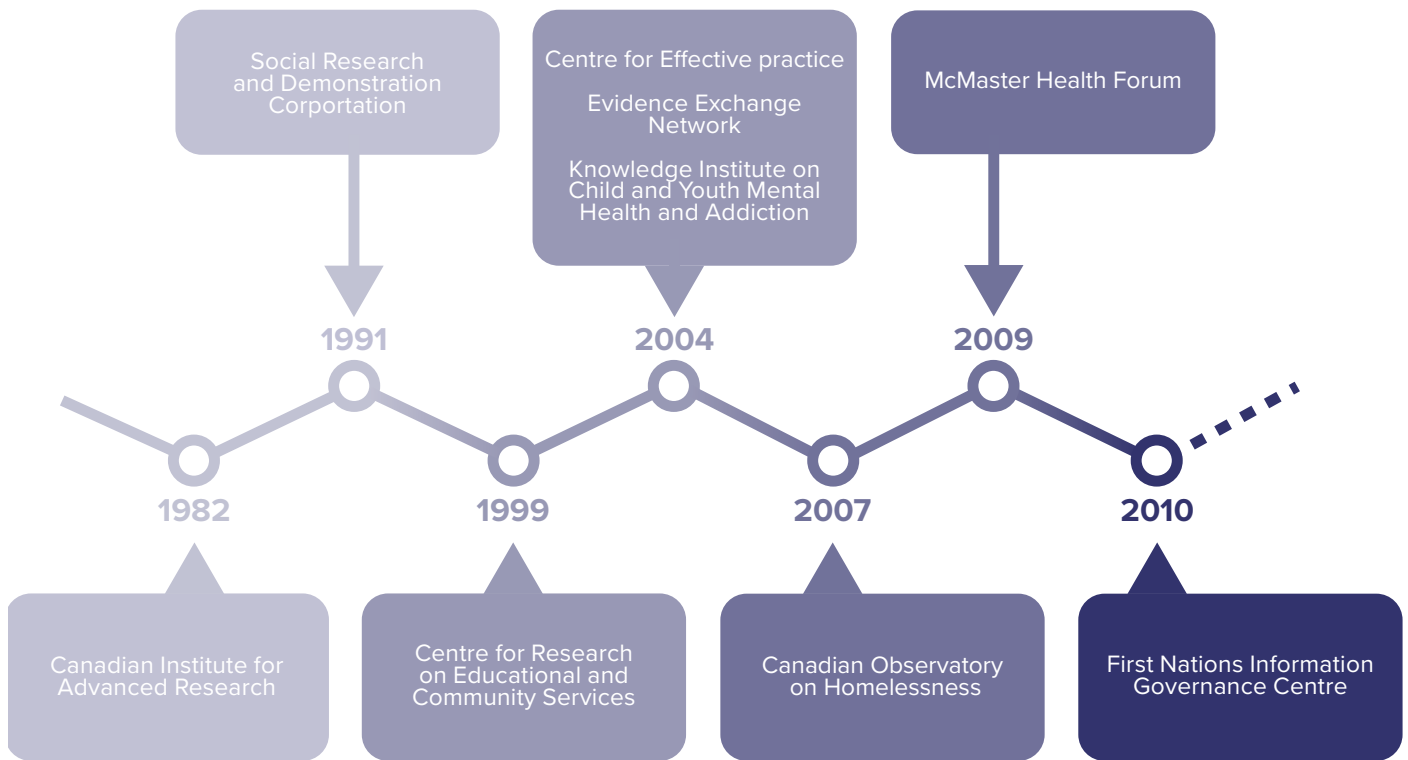
History

In Canada, evidence-informed policy has had a complicated history. Stephen Harper's premiership, which ended in 2015, was often characterised by a disregard for evidence.⁵⁶ To counter this rejection of evidence, Justin Trudeau's Liberal Party campaigned on a platform of valuing academic freedom and the promise of using evidence-based decision making.⁵⁷ However, Trudeau's decision to support the building of a fossil fuel pipeline in North America has been criticised as not being evidence-based decision making.⁵⁸

Current landscape

We have identified and analysed 9 evidence institutes in Canada. The earliest to be established was the **Canadian Institute for Advanced Research**. The majority of the Canada evidence institutes followed later and emerged between the 1990s and 2000s.

It is worth noting that we have not identified any evidence institutes that have been created since 2010, and it is not clear why. It might be due to a perception that there is no need for additional evidence institutes to operate in Canada, or there may be a lack of funding to support their development.



How evidence is defined

Canada’s evidence institutes have diverse definitions of evidence, utilising different research methods to make informed recommendations. Interestingly, McMaster Health Forum, Evidence Exchange Network, and First Nations Governance Information Centre all utilise lived experience in both their evidence generation and definition of evidence. John Lavis, Director of McMaster Health Forum, emphasised the importance of finding ways to include Indigenous ways of knowing. He noted that “we need to support Indigenous communities in bringing forward these ways of knowing, both as a focus in their own right and in helping us to put research evidence in context”.

What they do

Four of Canada’s evidence institutes do not have a particular focus and work across multiple policy domains, and the others focus on a single issue, such as homelessness, supporting indigenous people and communities, health, and children and young people.

Annual spend

There is a significant variation in spending across the three Canada evidence institutes that publish data on annual spend. The largest annual spend is AU\$46.1m (CA\$43.5m) by the **Canadian Institute for Advanced Research** and the lowest is AU\$106,000 (CA\$95,000) by the **Centre for Research on Educational and Community Services**.

Funding source

Government or public sector funding is the primary source of funding for most of the Canadian evidence institutes (6 out of 9), and three Canadian evidence institutes are funded by commissions from both governmental and non-governmental organisations, including charities and philanthropic foundations. Compared to government and public sector funding, philanthropy plays a more minor role in funding Canada's evidence institutes.

Funding models

None of the Canadian evidence institutes have an endowment, five of Canada's evidence institutes have secured funding of two years or more, and three Canadian evidence institutes receive project-by-project funding and no core funding.

Headcount

Out of the four evidence institutes that provide data on their headcount, the number of staff in the organisations ranges from 32 at the Canadian Observatory on Homelessness to 81 at the Centre for Effective Practice.

How impact is measured

There is a relatively underdeveloped approach to impact measurement across Canadian evidence institutes. Three evidence institutes measure their impact by counting the citations they receive in academic, policy documents, and media coverage. Two measure the impact of their work by evaluating their interventions and programmes. It is not clear how the remaining two evidence institutes measure impact.

3. UK

We analysed 22 evidence institutes in the UK.

History

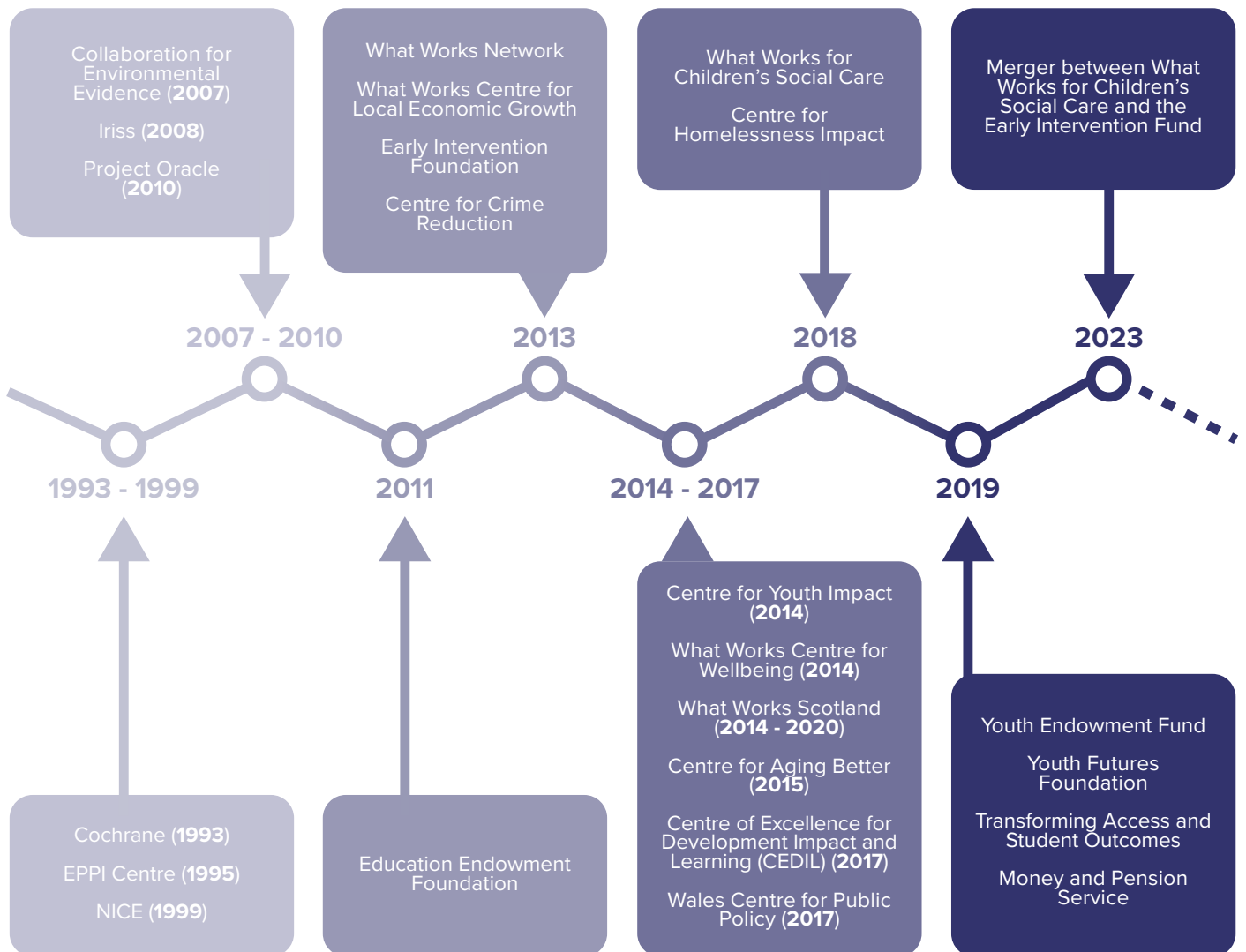
Since the 1990s, particularly under New Labour, the term 'evidence-based' has become a central part of UK public policy discourse.⁶⁰ Since then, the UK government has signalled its commitment to improving how evidence is generated, such as by creating the UK's What Works Network to coordinate and sometimes fund a group of evidence institutes to help guide decision making in other areas of social policy. In addition to evidence institutes, the UK government established the Evaluation Task Force to improve evidence use across government.⁶¹

Yet, arguably more is still needed. A report by the National Audit Office (2021) found that the UK government is committed to evidence-based decision-making, but found little government activity is either evaluated robustly, and much expenditure is not evaluated at all. In 2019, out of the government's 108 most complex and strategically significant projects, only nine – representing 8% of AU\$752 billion expenditure (£432 billion) – are evaluated robustly, while 77 (64% of spend) have no evaluation arrangements.

Current landscape

We analysed 22 evidence institutes in the UK. The first were established in the 1990s and had a health focus, reflecting the established practices of evidence-based medicine which have been around for decades (Chalmers, Dickerson, Chalmers, 1992). In the 2000s, evidence institutes focused on other policy domains, including youth services and the environment. In 2013, the **What Works Network** was created, prompting a huge growth of UK evidence institutes.

It's worth noting that not all the **What Works Centres** were created at the same time - some were established prior to the formation of the **What Works Network** and some have emerged since. Furthermore, two of the Evidence Institutes in our sample - **Project Oracle** and **What Works Scotland** - are no longer active.



The landscape is dominated by What Works Centres (WWCs). Although the Secretariat retains the power to dictate which WWCs are in the What Works Network, and to set the standards for admission, in practice, the What Works Centres largely operate independently of each other and the secretariat.

How evidence is defined

The UK evidence institutes define evidence pragmatically and are led by the question to be answered. Evidence is used in many ways to understand the field, identify gaps, and to help to generate and test solutions. It is also used to inform the evidence institute's own practices. Some still only view evidence in particular ways, such as a well conducted systematic review or a randomised controlled trial (RCT), but most evidence institutes use a mixed methods approach, involving qualitative and quantitative, user experience, and some use standards of evidence frameworks. Increasingly, there is a move towards incorporating "lived experience" into an understanding of "what works".

Many UK evidence institutes use standards of evidence frameworks to help users of evidence understand how confident they can be in the evidence or an intervention. Across the UK, there are 13 different frameworks and standards of evidence. Some of these are for meta-analyses to synthesise the findings from multiple interventions with similar aims and objectives, such as in a systematic review. Other frameworks are to understand the effectiveness of an intervention. Others assess the findings from a single study. The plethora of standards of evidence risks causing confusion across and within policy areas.

What they do

The earliest examples of UK evidence institutes focused on health and medicine, now the UK evidence institutes focus on a range of issues and topics alongside health, including local economic growth, wellbeing, criminal justice and financial advice. Over a third focus on children and young people (from birth up to aged 25). Across those that focus on children and young people, the exact focus varies and covers school education, criminal justice, employability, and higher education.

Annual spend

The annual spend varies significantly. The National Institute for Health and Care Excellence (NICE) spends over AU\$94.3m (£54m) a year, acting as a non-departmental government agency to provide national guidance and advice to improve health and social care. At the other end of the scale is the Collaboration for Environmental Evidence (CEE) which spends just under AU\$7,000 (£4,000) per year and relies heavily on volunteers.

Funding source

The UK government is a big player with the majority (70%) of UK evidence institutes receiving government funding. Half of the UK evidence institutes receive all their funding from the government, 9% receive a combination of government and philanthropic funding, and 14% receive a mix of government funding and money from commercial activities. Philanthropy also plays an important role, with 18% of UK evidence institutes relying solely on philanthropic funding.

Funding models

There is a mix of funding models. Four evidence institutes have endowments, 11 receive funding for two years or more to cover core costs and projects, whilst some do not receive any core funding and seek funds on a project-by-project basis.

How impact is measured

Nearly all the UK evidence institutes said that measuring the overall impact and the effectiveness of evidence institutes was a challenge. However, the sophistication for how impact is measured varies across all the UK evidence institutes. Some evidence institutes (40%) have been evaluated, often through an independent evaluation. These are typically completed as one-off evaluations by independent organisations, or as yearly reviews commissioned by the sponsoring government department. However, these evaluations tend not to go beyond surveys to determine changing attitudes or opinions of the evidence institute, rather than the tangible changes they are making to specific outcomes.

4. US

We identified and analysed 13 evidence institutes in the US.

History

During the Obama administration, US evidence-based policy making received a boost, described as “the most expansive opportunity for rigorous evidence to influence social policy in the history of the US government”. Central to these reforms were the Investing in Innovation Fund (i3) and the Social Innovation Fund, tasked with backing programmes with evidence of success or promise. This helped grow the non-profit, grassroots provider base, and helped to scale programmes that have more established evidence of impact.

The legacy of these initiatives influenced the Trump administration. James Riccio, MDRC, said, “Even during the Trump administration, there was evidence building, not because the administration was a strong advocate, but because these underlying commitments to evidence were in place. Government agency staff had become more skilled in understanding evidence”.⁶⁴

More recently, President Biden has signalled a commitment to evidence. In his first week in office he signed a memorandum that aims for the US government to make evidence-based decisions guided by the best available science and data. In 2022, the White House launched the Year of Evidence to accelerate how evidence is used “at the highest levels of Federal decision making and pioneering new initiatives to drive evidence-based outcomes for the American people”.⁶⁵

Current landscape

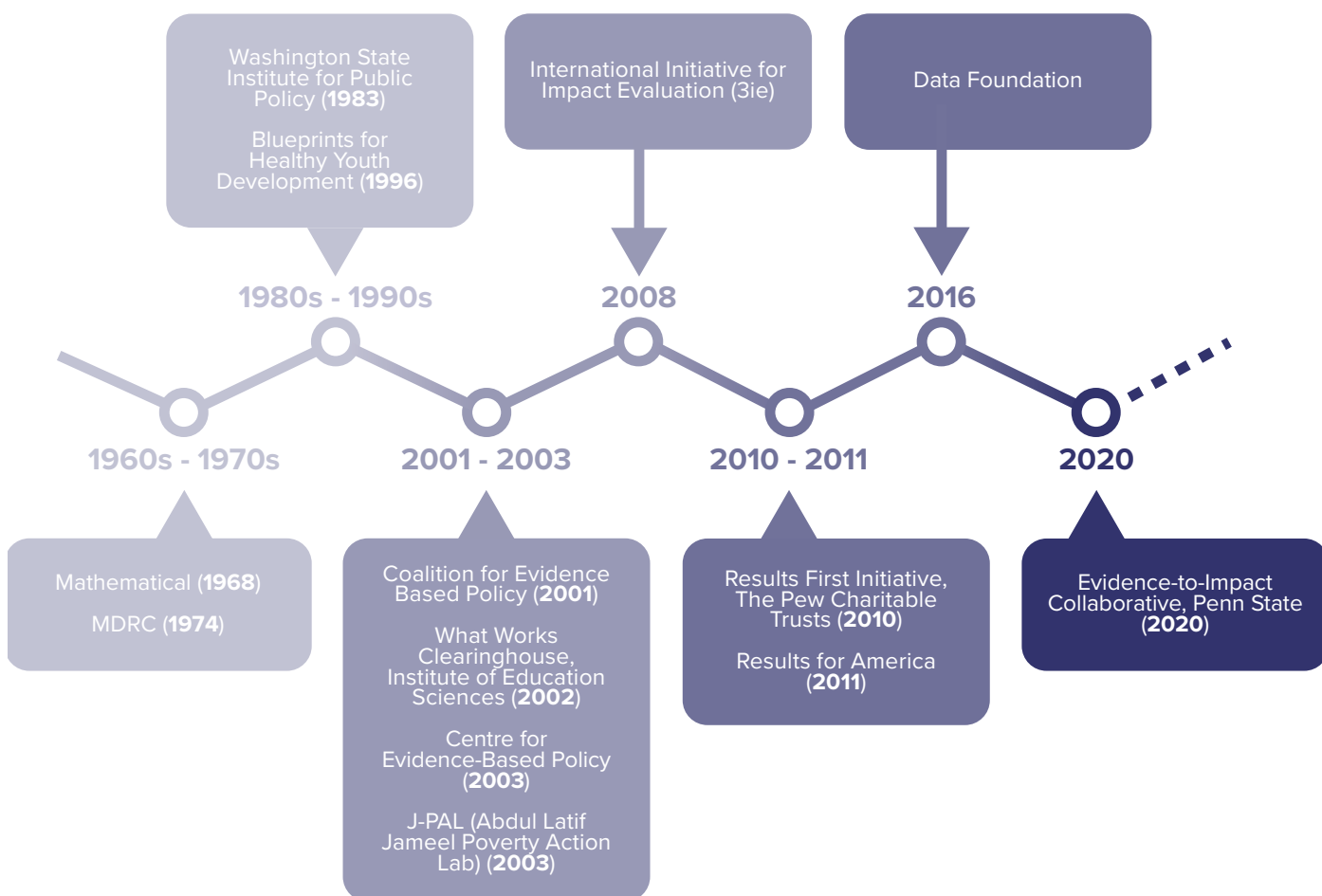
There are thirteen evidence institutes in the US. The oldest is **Mathetica**, created in 1968, followed by **MDRC**, established in 1974. Most US evidence institutes have been created in the past two decades.

How evidence is defined

US evidence institutes define evidence broadly, but there is a strong focus on the use of randomised evaluations to determine “what works”. A core feature of the US evidence institutes is the creation of “clearinghouses”, repositories of the “best” programmes and practices.

This might reflect the US focusing on proprietary, structured, “evidence-based programmes”. A focus on specific programmes” is not as common in Australia, Canada, and the UK.

However, despite most evidence institutes advocating that causal impact cannot be determined without a well-conducted RCT, there is recognition that RCTs are not always appropriate, particularly when interventions and programmes are at an earlier stage of development. Furthermore, user and community voice is increasingly seen as an important aspect of evidence in determining what is working.



What they do

Almost half of US evidence institutes focus across all areas of social and public policy. 15% focus on economic mobility and overcoming disadvantage, 15% focus on international development, and 15% focus on education, young people and children. Only one US evidence institute focuses exclusively on health, which might reflect the privatised nature of the US healthcare system.

US evidence institutes engage with a range of audiences, with a prevalence of engagement with policymakers and elected officials at a federal and state level. Some evidence institutes are reorienting their work to the city and state government level. For example, the **Evidence-to-Impact Collaborative** initially targeted federal level policymakers, included senators and elected officials, and since has expanded to industry officials, investors and policymakers. Another example is the **Coalition for Evidence-Based Policy** which is shifting its work from solely engaging with federal policymakers to experimenting with engaging state and city policymakers.

Compared to other countries, the US evidence institutes more commonly present decision makers with costed options, which is a useful and compelling means of communication.

Annual spend

There is a wide range of annual spend across the eight evidence institutes that publish data. The highest annual spend is **Mathematica** with AU\$568m (US\$400m) and the smallest is **Blueprints for Healthy Youth Development** with AU\$923,000 (US\$650,000). The majority (5 out of 8) spend between AU\$14.2m (US\$10) and AU\$21.3 (US\$15m) per year.

Funding source

Despite the federal government signalling a commitment to evidence, philanthropy plays a major role in funding US evidence institutes, providing funding in some form to 11 of the 13 evidence institutes.

Funding models

We did not identify any US evidence institutes with endowments. Instead, the majority (10 out of 13) have funding secured for more than 2 years, and the remainder are funded on a project basis.

Headcount

The largest US evidence institute is Mathematica with 1800 staff, followed by J-PAL with 478, and MDRC with 330 staff. The smallest are Blueprints for Healthy Youth Development with 5 staff, and both the Coalition for Evidence-Based Policy and the What Works Clearinghouse employ 4 staff each.

How impact is measured

The US evidence institutes are relatively advanced in how impact is measured. The majority (8 out of 13) measure both the reach of their work, such as citations, and the resulting behaviour change, such as how their outputs and interventions have influenced government spending decisions. The remainder of US evidence institutes measure impact in terms of citations in academic or policy documents, or in the media.

Beyond influencing spending decisions, US evidence institutes have helped stop the funding of ineffective programmes, encouraged more and better evaluation of social policy and programmes by government and others.

Annex B: Examples of evidence institute audiences and outputs

Evidence can seek to influence a range of different decisions and audiences. **Table 3** provides a summary.

Evidence institutes tailor their production, translation, dissemination, and engagement strategies to the specific audiences they aim to influence and their desired outcomes. Institutes that demonstrate significant impact tend to invest considerable effort in engaging with their target audiences, understanding their preferences and requirements. They consistently reflect, experiment, and enhance their understanding over time.

Focus	What this means	Audiences to involve and influence
Policy	Testing, experimenting and learning from what is effective in terms of guidelines, legislation and principles that are implemented to impact and change conditions conducive to human welfare.	<ul style="list-style-type: none"> Elected officials. Policy makers at a central/federal, state, territorial, city and local level. Academics and researchers.
Programmes	The approaches and models being developed to address social challenges, either within the public sector or outside by providers, for instance, Family Nurse Partnerships. Tasks could involve developing, testing and evaluating different programme models.	<ul style="list-style-type: none"> Commissioners and other funders, such as philanthropic foundations. Front line practitioners. Providers across the third sector, private sector and public sector. Academics and researchers. Service users.
Practice	Best practice skills and culture. Tasks could involve training or creating communities of practice.	<ul style="list-style-type: none"> Front line practitioners. Providers. Service user.
Interventions	Types of products, such as technologies, developed to address specific challenges or to enhance ways of working.	<ul style="list-style-type: none"> Front line practitioners. Service commissioners. Service users.

Table 3: Evidence institute focus and audience (Adapted from Puttick, 2012)

Table 4 provides a summarised version of some of the most prevalent types of outputs. These should not be interpreted as exhaustive or the best ones for others to emulate, but provide an overview of the types of outputs generated.

Objective	Key audiences	Example outputs
<p>To influence government policy making and spending</p>	<p>Elected officials, policymakers</p>	<ul style="list-style-type: none"> • 1:1 meetings with senior staff in government. • Roundtables/meetings • Policy briefings
<p>To communicate what works and what does not</p>	<p>Policymakers, practitioners, philanthropy.</p>	<ul style="list-style-type: none"> • Evidence gap maps • Systematic or rapid reviews • Clearinghouses and searchable repositories • Toolkits • Blogs and podcasts • Tip sheets • Research reports, including journal articles • Media engagement, such as op-eds, and social media
<p>To build the capacity of decision makers to use and apply evidence.</p>	<p>Policymakers, practitioners, philanthropy.</p>	<ul style="list-style-type: none"> • Training, including webinars and YouTube videos • Technical assistance and bespoke advice • Collaborative networks, such as between researchers and policymakers • Written implementation guidance • Policy Fellowships

Table 4: Illustrative examples of evidence institute outputs

Annex C: Note on the methodology

Case study selection

Across four countries - Australia, Canada, UK and the US - we have analysed some of the evidence institutes currently active and those active in the past ten years. We did not restrict our focus to those that work specifically on breaking cycles of disadvantage, but looked at wider policy domains to understand what can be usefully learnt from parallel sectors.

To identify lessons for Australia, we selected the case study countries of Canada, UK and the US, because they appear to have the most established evidence architecture. Furthermore, the US offers a comparison to Australia's federal system, and both the US and Canada offer insights into the role and inclusion of indigenous communities in the evidence system.

We found examples of evidence institutes in other countries, such as The Netherlands and Brazil, but because of time constraints we were unable to explore these in detail.

To identify the evidence institutes we undertook extensive desk research and scoping calls with academics and other experts. From this research we identified 193 potential examples, and from this, we selected those evidence institutes that fitted our definition. **Table 5** below shows the number of evidence institutes in each country.

Fieldwork

The research comprised 86 qualitative interviews, a review of academic articles and books, and four workshops. To summarise our approach:

- **Literature review**

Country	Number of Evidence Institutes
Canada	9
US	13
Australia	14
UK	22

Table 5: Number of evidence institutes

- We searched for articles in academic library databases using key terms, and we input our research questions and sub-questions in Elicit. Further articles were identified via our interviews.

- **Interviews**

- We conducted 86 semi-structured interviews between October 2022 and April 2023.
- We identified interviewees through desk research and the literature review. We also used snowball sampling, whereby interviewees suggested additional organisations and individuals as potential interviewees.
- We interviewed at least one staff member from each evidence institute and conducted interviews with wider experts, such as academics and government officials, to develop our understanding of evidence institutes.
- **Workshops**
- In late April and early May 2023, we held four workshops with the Paul Ramsay Foundation, Australian evidence institutes, potential funders and evidence users from government.
- These workshops started a discussion about the evidence system in Australia, the strengths and challenges, and what could happen to ensure evidence is a more central part of decision making in social policy and practice. With the participants, we explored both the demand for evidence and the opportunities for improving it, including by establishing new evidence initiatives.

Currency conversion

To enable comparison across the four countries, we have converted all currencies into Australian Dollars (AUD\$) using the following exchange rate:

- 1 US Dollar = 1.42 Australian Dollars
- 1 British Pound = 1.74 Australian Dollars
- 1 Canadian Dollar = 1.06 Australian Dollars

(Converted on xe.com, 31 January 2023.)

Limitations of the approach

Our definition for an evidence institute aims to exclude organisations that are politically or ideologically driven rather than led by evidence. But, of course, this line is often unclear and we have had to make choices about which organisations to include. Ultimately we have been pragmatic in our quest to learn from a wide range of practices on how evidence can be both effectively generated and used to inform decision making in a range of policy domains. Like all research, it is a snapshot in time and other evidence institutes may have emerged since we concluded our fieldwork. Furthermore, there will be many organisations, such as think tanks, academic units, or evidence networks, in the four countries we studied and elsewhere, that do not feature in this report. Their exclusion is not intended as a comment on the quality of their work, but instead reflects the time available for this study. We hope that this report can advance discussions about the role of evidence and evidence institutes, and further research can explore other evidence institutes in these four countries and elsewhere around the world, many of whom warrant further attention.

Interviewee list

- **Arminé Nalbandian**, Centre for Social Impact, University of New South Wales
- **Professor Nicholas Biddle**, ANU Centre for Social Research and Methods
- **Professor Matthew Gray** - ANU Centre for Social Research and Methods
- **Dr Zid Mancenido**, Australia Education Research Organisation (**AERO**)
- **Michele Robinson**, Australia's National Research Organisation for Women's Safety (**ANROWS**)
- **Padma Raman**, Australia's National Research Organisation for Women's Safety (**ANROWS**)
- **Dr Jane Lloyd**, Australia's National Research Organisation for Women's Safety (**ANROWS**)
- **Kate Thomann**, Australian Institute of Aboriginal and Torres Strait Islander Studies (**AIATSIS**)
- **Leonard Hill**, Australian Institute of Aboriginal and Torres Strait Islander Studies (**AIATSIS**)
- **Dr Rick Brown**, Australian Institute of Criminology
- **Professor Julian Elliott**, Future Evidence Foundation
- **Penny Dakin**, Australian Research Alliance for Children and Youth (**ARACY**)
- **Professor David Halpern**, Behavioural Insights Team
- **Dr Pamela Rose Buckley**, Blueprints for Healthy Youth Development
- **Amanda Ladika**, Blueprints for Healthy Youth Development
- **Dr Johnny Kung**, Canadian Institute for Advanced Research (**CIFAR**)
- **Dr Stephen Gaetz**, Canadian Observatory on Homelessness
- **Dr Robyn Parker**, Capabilities in Academic Policy Engagement (**CAPE**)
- **Professor Valerie King**, Center for Evidence-based Policy
- **Beth Shaw**, Center for Evidence-based Policy
- **Dr Pieter Hasekamp**, Centraal Planbureau
- **Jemma Moulard**, Centre for Ageing Better
- **Rachel Tuffin**, Centre for Crime Reduction (**College of Policing**)
- **Lena Salach**, Centre for Effective Practice
- **Dr Robyn Mildon**, Centre for Evidence and Implementation (**CEI**)
- **Dr Lígia Teixeira**, Centre for Homelessness Impact
- **Professor Craig Olsson**, Centre for Social and Early Emotional Development
- **Dr Eliza Kozman**, Centre for Transforming Access and Student Outcomes in Higher Education
- **Bethia McNeil**, Centre for Youth Impact
- **Professor Howard White**, Centre of Excellence for Development Impact and Learning (**CEDIL**)
- **Professor Kathryn Monk**, Collaboration for Environmental Evidence
- **Donna Molloy**, Early Intervention Foundation
- **Dr Jen Gold**, Economic and social research council
- **Professor Becky Francis**, Education Endowment Foundation
- **Matthew Deeble**, Evidence for Learning, Social Ventures Australia
- **Danielle Toon**, Evidence for Learning, Social Ventures Australia
- **Professor James Thomas**, Evidence for Policy and Practice Information and Co-ordinating Centre (**EPPI-Centre**)
- **Dr Max Crowley**, Evidence-to-Impact Collaborative

- **Albert Armieri**, First Nations Information Governance Centre
- **Dr Aaron Franks**, First Nations Information Governance Centre
- **Dr Jordana Hunter**, Grattan Institute
- **Jonathan Breckon**, POST, HM Government
- **Dr Emily Power**, HM Government
- **Martin Sweeney**, HM Government
- **Dr Ruth Levine**, ID Insight
- **Professor Paul Glasziou**, Institute for Evidence-Based Health Care (**IEBH**)
- **Laura Boeira**, Instituto Veredas
- **Libby Hackett**, James Martin Institute for Public Policy
- **Professor Abhijit Banerjee**, J-PAL (**Abdul Latif Jameel Poverty Action Lab**)
- **Professor Zoe Jordan**, JBI (**formerly known as Joanna Briggs Institute**)
- **Dr Purnima Sundar**, Knowledge Institute on Child and Youth Mental Health and Addictions
- **Jon Baron**, Laura and John Arnold Foundation
- **Professor Annette Boaz**, London School of Hygiene and Tropical Medicine
- **Dr Paul Decker**, Mathematica
- **Professor John Lavis**, McMaster Health Forum
- **Dr James Riccio**, MDRC
- **Andrew Leigh**, Member of the Australian House of Representatives
- **Professor Peter Bragge**, Monash Sustainable Development Institute
- **Professor Rod Glover**, Monash University
- **Professor Mark Rickinson**, Monash University
- **Dr Felix Greaves**, National Institute for Health and Care Excellence (**NICE**)
- **Professor Jennifer Tieman**, PalliAGED
- **Professor Sandy Oliver**, Partnership for Evidence and Equity in Responsive Social Systems (**PEERSS**)
- **Dr Vicky Ward**, Research Unit for Research Utilisation
- **Karen Lyons**, Results First Initiative (**Pew Foundation and NIRN**)
- **Nick Bibby**, Scottish Policy and Research Exchange (**SPRE**)
- **David Gyarmati**, Social Research and Demonstration Corporation (**SRDC**)
- **Misan Rewane**, Stanford Impact Labs
- **Peter Bailey**, The Money and Pensions Service
- **Dr Martin McNamara**, The Sax Institute
- **Dr Kathryn Oliver**, Transforming Evidence
- **Professor Brian W. Head**, University of Queensland
- **Professor Huw Davies**, University of St Andrews
- **Professor Paul Cairney**, University of Stirling
- **Anna Numa Hopkins**, University of Warwick
- **Professor Karen Bogenschneider**, University of Wisconsin-Madison
- **Professor Steve Martin**, Wales Centre for Public Policy
- **Stephanie Lee**, Washington State Institute for Public Policy
- **Danielle Mason**, What Works Centre for Local Economic Growth
- **Lauren Su**, What Works Cities
- **Dr Jonathan Jacobson**, What Works Clearinghouse
- **Betsy Wolf**, What Works Clearinghouse

- **Dr Aoife O’Higgins**, What Works for Children’s Social Care
- **Professor Peter Craig**, What Works Scotland
- **Dr Kim DuMont**, William T. Grant Foundation
- **Chris Goulden**, Youth Futures Foundation

Workshop participants

- **Ben Gales**, Paul Ramsay Foundation
- **Jackie Ruddock**, Paul Ramsay Foundation
- **Abhilash Mudaliar**, Paul Ramsay Foundation
- **Sacha Edema**, Paul Ramsay Foundation
- **Jenny Tran**, Paul Ramsay Foundation
- **Kai Graylee**, Paul Ramsay Foundation
- **Liz Yeo**, Paul Ramsay Foundation
- **Melanie Loveridge**, Paul Ramsay Foundation
- **Professor Julian Elliott**, Future Evidence Foundation
- **Padma Raman**, Australia’s National Research Organisation for Women’s Safety (**ANROWS**)
- **Matthew Deeble**, Evidence for Learning, Social Ventures
- **Professor Peter Bragge**, Monash University
- **Renee Tao**, New South Wales Treasury
- **Dr Jonathan McGuire**, New South Wales Department of Education
- **Dr Vafa Ghazavi**, James Martin Institute for Public Purpose

- **Arminé Nalbandian**, Centre for Social Impact, University of New South Wales
- **Danielle Toon**, Evidence for Learning, Social Ventures Australia
- **Professor Jennifer Tieman**, PalliAGED
- **Libby Hackett**, James Martin Institute for Public Policy
- **Professor Mark Rickinson**, Monash University
- **Dr Martin McNamara**, The Sax Institute
- **Professor Nicholas Biddle**, ANU Centre for Social Research and Methods
- **Professor Paul Glasziou**, Institute for Evidence-Based Health Care (**IEBH**)
- **Dr Robyn Mildon**, Centre for Evidence and Implementation (**CEI**)
- **Professor Rod Glover**, Monash University
- **Diana Harris**, Australian Research Alliance for Children and Youth (**ARACY**)