

**Program in Policy Decision-Making**

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# **Supporting the Use of Evidence by Policymakers in LMICs: Evidence-Informed Policy Networks**

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**Calls for linking research to action**

**Addressing challenges in linking research to policy**

**Evidence-Informed Policy Networks (EVIPNet)**

**Monitoring and evaluating EVIPNet**

# **Calls for Linking Research to Action**



**“Stronger emphasis should be placed on translating knowledge into action to improve public health by bridging the gap between what is known and what is actually being done.”**

**-- World Report on Knowledge for Better Health (2004)**

**“National governments to establish sustainable programmes to support evidence-based public health and health care delivery systems, and evidence-based health related policies.”**

**-- Mexico Statement on Health Research (2005)**

# **Calls for Linking Research to Action (2)**



**Member states “to establish or strengthen mechanisms to transfer knowledge in support of evidence-based public health and health-care delivery systems, and evidence-based health-related policies.”**

**WHO’s Director-General “to assist in the development of more effective mechanisms to bridge the divide between ways in which knowledge is generated and ways in which it is used, including the transformation of health-research findings into policy and practice.”**

**-- World Health Assembly (2005)**

# Addressing Challenges in Linking Research to Policy



**Increasingly efforts to support linking research to policy strive to address the two factors that emerged with some consistency in a systematic review of the factors that increased the prospects for research use**

- Interactions between researchers and policymakers
  - Engage policymakers in priority-setting, research (including systematic reviews), and deliberative dialogues
- Timing / timeliness
  - Facilitate retrieval of optimally packaged high-quality and high-relevance systematic reviews (e.g., one-stop shopping, rapid response units)

# Challenges in Linking Research to Policy



- 1. Research competes with many other factors in the policymaking process**
- 2. Research isn't valued as an information input**
- 3. Research isn't relevant**
- 4. Research isn't easy to use**

# Addressing Challenge 1



## Challenge 1

- Research competes with many other factors in the policymaking process
  - Institutional constraints (e.g., constitutional rules)
  - Interest group pressure
  - Citizens' values
  - Other types of information (e.g., experience)

## One option (among many) for addressing challenge 1

- Improve democratic processes (but this is beyond the scope of most of us) or create “routine” processes (as many countries have done for new technologies)

# Addressing Challenge 2



## Challenge 2

- Research isn't valued as an information input

## One option (among many) for addressing challenge 2

- Convince policymakers to place value on the use of research by highlighting examples from the past or from other jurisdictions where research made the difference between policy success and policy failure



# Addressing Challenge 3



## Challenge 3

- Research isn't relevant

## One option (among many) for addressing challenge 3

- Engage policymakers periodically in priority-setting processes and communicate the priorities to researchers (both shorter term requirements for systematic reviews and longer term requirements for new empirical research)

# Addressing Challenge 4a



## Challenge 4

- Research isn't easy to use

## Challenge 4a

- Research isn't communicated effectively (i.e., policymakers hear noise instead of music)

## One option (among many) for addressing challenge 4a

- Identify relevant systematic reviews, identify “take-home messages” for policymakers, and send briefing notes based on these messages to policymakers

# Addressing Challenge 4b



## Challenge 4

- Research isn't easy to use

## Challenge 4b

- Research isn't available when policymakers need it and in a form that they can use

## One option (among many) for addressing challenge 4b

- Maintain a policymaker-targeted website that provides “one stop shopping” for optimally packaged high-quality and high-relevance reviews
  - 216 of 359 systematic reviews of the effects of health system governance, financial and delivery arrangements are Cochrane reviews

# Addressing Challenge 4c



## Challenge 4

- Research isn't easy to use

## Challenge 4c

- Policymakers lack mechanisms to prompt them to use research in policymaking

## **One option (among many) for addressing challenge 4c**

- Propose changes to cabinet submissions and program plans to prompt policy analysts to summarize whether and how research informed the definition of a policy problem, the specification of policy options to address the problem, and the proposed approach to policy implementation

# Addressing Challenge 4d



## Challenge 4

- Research isn't easy to use

## Challenge 4d

- Policymakers lack forums where policy challenges can be discussed with key stakeholders

## One option (among many) for addressing challenge 4d

- Plan deliberative dialogues at which pre-circulated evidence summaries serve as the starting point for off-the-record deliberations involving policymakers, civil society groups, researchers and others

# Addressing Challenges in Linking Research to Policy



- 1. Research isn't valued as an information input [General climate for research use]**
- 2. Research isn't relevant [Production]**
- 3. Research isn't easy to use [Translation]**
  - a. Research isn't communicated effectively [Push]
  - b. Research isn't available when policymakers need it and in a form that they can use [Facilitating pull]
  - c. Policymakers lack mechanisms to prompt them to use research in policymaking [Pull]
  - d. Policymakers lack forums where policy challenges can be discussed with key stakeholders [Exchange]

# Evidence-Informed Policy Networks (EVIPNet)



**WHO and three regional offices (WPRO, AFRO, and PAHO/AMRO) have sponsored the development of evidence-to-policy partnerships whose aim is to support systematic, multi-faceted efforts to address the challenges in linking research to policy**

- Preceded by a unique effort in east Africa, called the Regional East African Community Health (REACH) Policy initiative
- Nurtured by a global steering group
- Supported by both global and regional resource groups (which include many Cochrane members)



## **Evidence-Informed Policy Networks (EVIPNet) Asia**

- Participating jurisdictions include China (Beijing municipality and both Shandong and Sichuan provinces), Laos, Malaysia, Philippines, and Vietnam
- Call for letters of intent (planning phase)
- Inaugural meeting held in Kuala Lumpur, Malaysia from 13-15 June 2005
- Call for full applications (implementation phase)
- Follow-up meeting and workshop on systematic reviews held in Kuala Lumpur, Malaysia from 25-29 June 2007



# EVIPNet (3)





## **EVIPNet Africa (and REACH-Policy)**

- Participating jurisdictions include Burkina Faso, Cameroon, Central African Republic, Ethiopia, Mozambique, Niger, and Zambia (and Kenya, Tanzania, and Uganda)
- Inaugural meeting held in Brazzaville, Congo from 27-29 March 2006
- Call for letters of intent (planning phase)
- Follow-up meetings with country participants held in Yaounde, Cameroon in June 2006 and in Arusha, Tanzania in October 2006, and will be held in Cape Town, South Africa in November 2007

# EVIPNet (5)





## EVIPNet Americas

- Invited jurisdictions include Bolivia, Brazil, Chile, Colombia, Costa Rica, Mexico (both the whole country and the Mexico/US border region), Paraguay, Puerto Rico, and Trinidad and Tobago
- Inaugural meeting held in Washington, DC from 2-3 July 2007

# Monitoring and Evaluating EVIPNet



## **Core investigators**

- Maimunah Hamid (Malaysia), John Lavis (Canada), Pierre Ongolo-Zogo (Cameroon), Tomas Pantoja (Chile), Nelson Sewankambo (Uganda)

## **Collaborators**

- Haichao Lei (China), Andy Oxman (Norway), Goran Tomson (Sweden), among others

## **Local investigators based in each participating jurisdiction**

# Monitoring and Evaluating EVIPNet (2)



## Objectives

- To describe annually the activities (processes) and outputs of each KT platform, as well as the (infra)structural and contextual factors that may affect the relationships among activities, outputs and (eventually) outcomes and impact
- To conduct formative evaluations of the priority-setting processes, packaged evidence summaries (policy briefs) and deliberative dialogues organized by each KT platform in year 1

# Monitoring and Evaluating EVIPNet (3)



## Objectives (2)

- To conduct outcome evaluations of each KT platform at baseline (for comparative purposes) and in years 2 and 4 with a focus on the platforms' anticipated outcomes
  - Health research evidence about high-priority policy issues is made available
  - Relationships among policymakers, researchers and KT specialists are developed or strengthened
  - Policymakers' capacity to support the use of health research evidence in health systems policymaking is strengthened

# Monitoring and Evaluating EVIPNet (4)



## Objectives (3)

- To conduct impact evaluations of each KT platform in years 3 and 5 with a focus on the platforms' anticipated impact: health systems policymaking processes take into account health research evidence



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- **Reijo Salmela (WPRO)**

## **Alliance for Health Policy and Systems Research**

- **Sara Bennett**

# Reference and Contact Information



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