

Program in Policy Decision-Making

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From Mexico to Mali: Taking Stock of Developments in Linking Research to Policy in and about Health Systems

**'From Mexico to Mali' Workshop: Taking Stock of Achievements
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Overview



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Background



In November 2004 health ministers and heads of delegations from 52 countries called for strengthened efforts to translate the knowledge arising from research into the types of actions on the ground that can improve health and health equity

We take stock of developments at the country level that have occurred since then, with a particular focus on the 26 jurisdictions in three regions -- Asia, Africa, and the Americas -- where evidence-to-policy networks (or knowledge-translation platforms) have been developed to lead such efforts (EVIPNet, REACH Policy, and ZAMFOHR)

Background (2)



Evidence-to-policy networks undertake systematic, multi-faceted efforts to link research to policy in and about health systems, with activities including:

- Promoting a climate that supports research use
- Undertaking priority-setting processes to ensuring that research is produced on high-priority topics
- Synthesizing and packaging highly relevant research
- Supporting the use of research evidence by making it readily available through ‘one-stop shops,’ sponsoring policy dialogues to discuss its implications, and developing capacity among policymakers to acquire, assess, adapt and apply research evidence

Background (3)



Challenges the networks are striving to address

- 1. Research isn't valued as an information input [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]



- 1) We examined national strategic plans for the health sector that were published in 2005-2007 in terms of whether and how government officials in the jurisdictions identified ‘linking research to policy’ as a strategic priority – Note that 11 have been found to date, 6 are not eligible, and up to 6 are missing (Lao PDR, Philippines, and Vietnam in Asia; Centrafrique and Mozambique in Africa; and Brazil in the Americas)**
- 2) We summarized data about the annual production of systematic reviews, a key source of evidence for policymaking, by corresponding authors based in the jurisdictions between 2004 and 2007**

Methods (2)



- 3) We analyzed data from the 29 organizations producing guidelines, health technology assessments and policy-relevant research that were surveyed in the jurisdictions in 2005 to identify how the organizations support the use of research evidence**
- 4) We identified two innovations introduced by the evidence-to-policy networks and the networks' desired impact and outcomes**
- 5) We identified the number of empirical studies about the use of research evidence in policymaking published over the last seven five-year periods**

Findings



- 1) All of the national strategic plans identified ‘linking research to policy’ as a low-level strategic priority and in two of four cases the concept is conceived more broadly than health management information systems and monitoring and evaluation**
- 2) While there has been a general upward trend in systematic review production, two jurisdictions dominate this production (Brazil and China), in 10 of the jurisdictions no systematic reviews were produced in a 3.5 year period, and in none of the jurisdictions were a significant number of systematic reviews about health system arrangements produced**



3) Most of the 29 organizations surveyed attempt to package, disseminate and support the use of research evidence in at least some promising ways

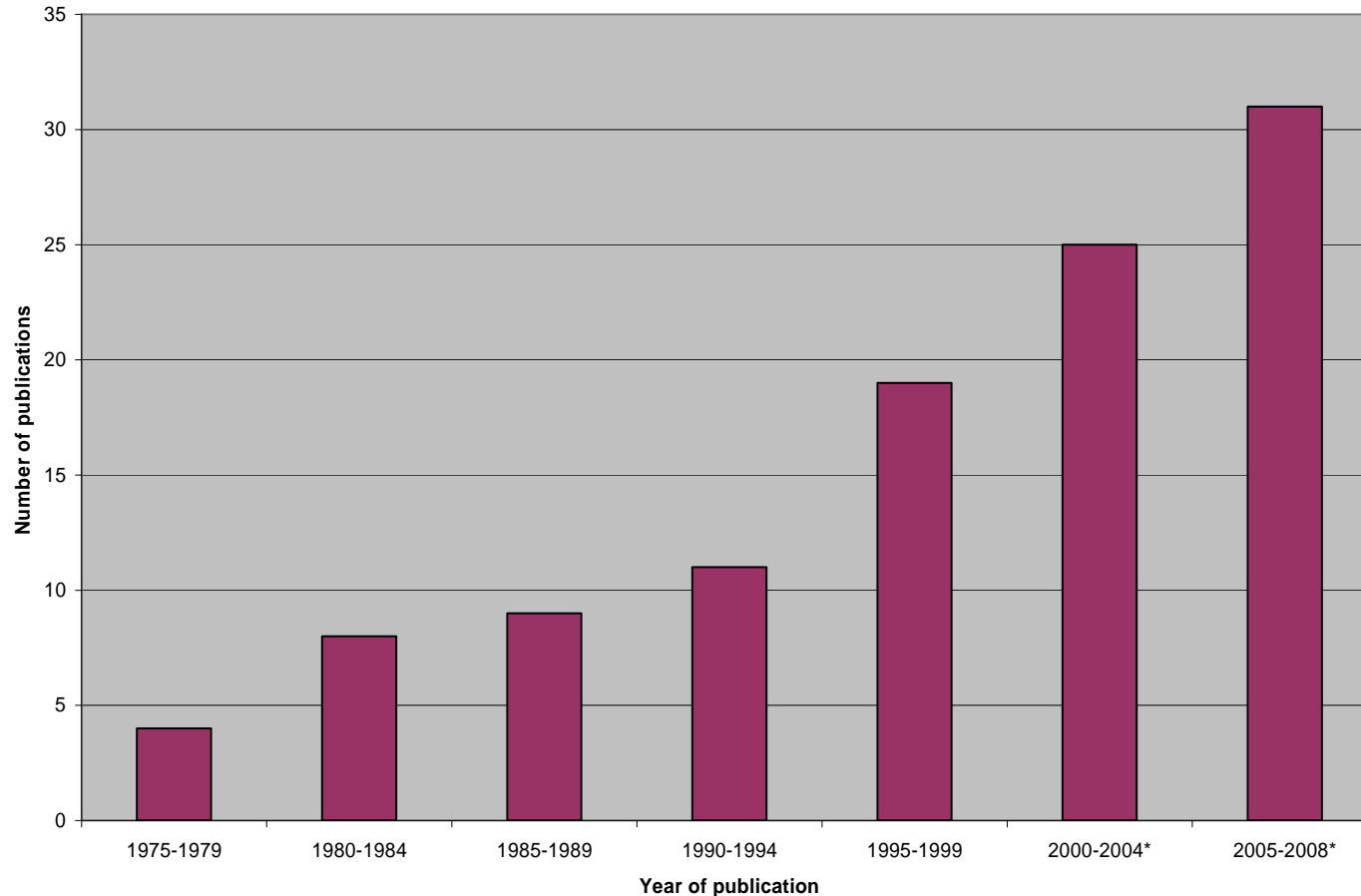
4) Evidence-to-policy networks

- Most significant innovations
 - Policy briefs (panel 1) and policy dialogues (panel 2)
 - Development of capacity to use research evidence
- Key elements of the log frame (Table 4)
 - Desired impact is that health systems policymaking processes take into account health research evidence
 - Desired outcomes involve perceptions of evidence availability, the strength of relationships among researchers and policymakers, and policymakers' capacity to support the use of research evidence

Findings (3)



5) Number of empirical studies about the use of research evidence in policymaking, by year





Some indicators of the demand for research evidence, supply of synthesized research evidence, and efforts to support its use bode well for the future

- All of the national strategic plans identify linking research to policy as a (low-level) strategic priority
- At least some jurisdictions are producing systematic reviews
- At least some organizations in these jurisdictions attempt to package, disseminate and support the use of research evidence
- Experimentation with policy briefs and policy dialogues, along with a serious commitment to their formative evaluation and to the monitoring and evaluation of the broader range of initiatives organized by the networks
- Slow but steady increase in observational studies of research use in policymaking

Interpretation (2)



Other indicators bode less well

- Lack of attention given to supporting the synthesis, packaging and use of research evidence in many national strategic plans (versus production and dissemination)
- Lack of production of systematic reviews in many jurisdictions and lack of production of significant numbers of systematic reviews about health system arrangements in all jurisdictions

Interpretation (3)



Strengths of the stock taking

- Focus on country efforts to link research evidence to policy in and about health systems
- Focus on the diverse set of 26 jurisdictions that have launched evidence-to-policy networks
- Identification and use of key indicators of the demand for research evidence, the supply of synthesized research evidence, and efforts to support research use
- Profiling of two innovations and the impact and outcomes that will be the focus for the networks' monitoring and evaluation, which could inspire others to undertake similar experimentation



Weaknesses of the stock taking

- Possibility that mentions of linking research to policy in the national strategic plans may reflect perceptions about what donors want to hear (and time lags, among other factors, preclude statements about attribution)
- Profiling of systematic review production did not involve searching region-specific databases or specifically seeking articles published in a language other than English
- Sample-identification process for the survey, while much more comprehensive than past efforts, may still have failed to identify all organizations involved in supporting the use of research evidence in the countries
- Lack of focused effort to explore whether and how donors have supported evidence-to-policy initiatives

Interpretation (5)



Donors, with several notable exceptions, have been relatively slow to appreciate the need to support these nascent evidence-to-policy networks and a broader portfolio of evidence-to-policy initiatives

International agencies have been slow to appreciate the need to promote evidence-to-policy networks and related initiatives and to recognize that their guidance plays a critical mediating role between research evidence and policymaking in many low- and middle-income countries

Interpretation (6)



Linking research to policy in and about health systems represents an unfinished agenda from Mexico and one that participants in the meeting in Bamako are uniquely positioned to push forward