



# Making Systematic Reviews Policy Relevant

**Global Evidence Synthesis Initiative | Cochrane Learning Live**

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## Declaration of Conflicts of Interest

- I am or was involved in some of the initiatives I will be describing
  - SUPPORT tools and the Evidence-Informed Policy Networks that use them
  - Health Systems Evidence (and soon Social Systems Evidence)
  - Cochrane, including the group that developed the KT framework
  - SPARK tool
  - UJ-BCURE → Africa Centre for Evidence



## Poll 1

- Please indicate where you're based
  - 1) High-income country
  - 2) Low- or middle-income country



## Poll 2

- Please indicate where you're based
  - 1) Africa
  - 2) East Asia and Pacific
  - 3) Europe and Central Asia
  - 4) Latin America and Caribbean
  - 5) Other (Middle East and North Africa, South Africa, and Canada/U.S.)



# Overview

- Context
  - Different types of policymakers
  - Policymakers have many questions, need many types of evidence syntheses, and need more than evidence syntheses
- Thematic groupings of activities to support the use of evidence syntheses, many of which pertain to making them more policy-relevant
  - Prioritization and co-production
  - Packaging, push and support to implementation
  - Facilitating pull
  - Exchange
  - Improving climate / building demand
  - [Sustainable knowledge translation (KT) processes]



## Poll 3

- Please indicate how confident you are that you know ‘your’ policymakers, the types of questions they have, the types of evidence syntheses they need, and the types of factors that influence their decision-making
  - 1) Not confident
  - 2) Somewhat confident
  - 3) Confident
  - 4) Very confident
  - 5) Don’t know

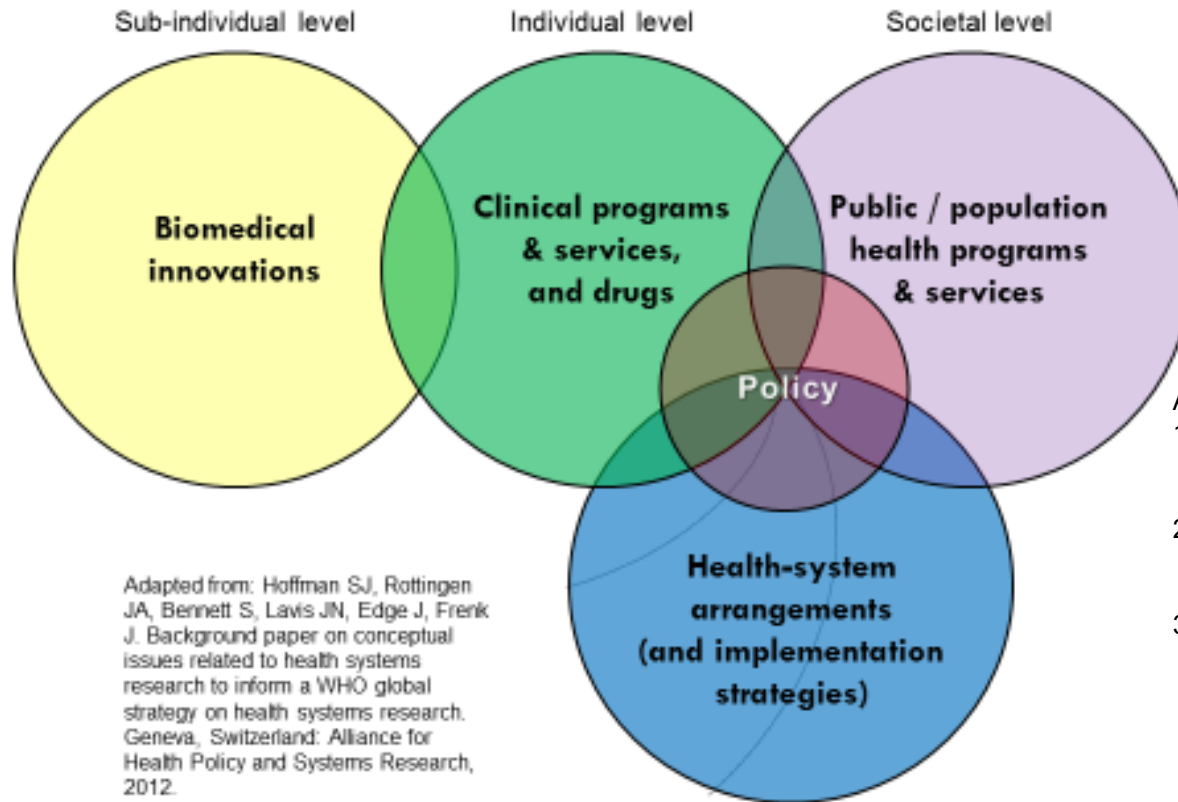


# Cochrane KT Framework Identifies Four Target Audiences Plus Intermediaries (e.g., Journalists)





# At Least Three Distinct Types of Policymakers, One of Which Will be More Used to 'Clinical' Approaches



Adapted from: Hoffman SJ, Rottingen JA, Bennett S, Lavis JN, Edge J, Frenk J. Background paper on conceptual issues related to health systems research to inform a WHO global strategy on health systems research. Geneva, Switzerland: Alliance for Health Policy and Systems Research, 2012.

- Analogue outside health:
- 1) Programs, services and technologies for individuals
  - 2) Programs and services for populations
  - 3) Governance, financial and delivery arrangements within which programs and services are provided, as well as implementation strategies





# Policymakers Have Many Questions That Can Be Answered by Evidence Syntheses

- E.g., GRADE evidence-to-decision framework to inform policy about clinical issues (or more generally about programs, services and technologies)
  - Burden of condition
  - Benefits and harms
  - Values and preferences
  - Resource use
  - Equity
  - Acceptability (within the political system)
  - Feasibility (within the health, social or other system)



## Policymakers Have Many Questions That Can Be Answered by Evidence Syntheses (2)

- E.g., SUPPORT tool to inform policy about (health) system issues
  - Problem and its causes
    - Comparisons
    - Framing
  - Options to address the problem
    - Benefits and harms
    - Cost-effectiveness
    - How and why it works (process evaluations)
    - Stakeholders' views and experiences
  - Implementation considerations
    - Barriers and facilitators
    - Benefits, harms, etc. of implementation strategies



## Policymakers Need Many Types of Evidence Syntheses

- E.g., rapid syntheses (rapid overviews of systematic reviews) in 3, 10 or 30 business days
- E.g., evidence briefs that provide a context-specific summary of what's known from systematic reviews (and from local data and studies) about a problem and its causes, options, and implementation considerations
- E.g., living, rapid and full systematic reviews addressing a range of types of specific questions (or evidence/gap maps that document the full range for a specific policy issue)
  - E.g., systematic review of effects (for benefits and maybe harms)
  - E.g., critical interpretive synthesis (for framing questions)
  - E.g., realist synthesis (for how and why questions)



## Poll 4

- Please indicate how many evidence syntheses that you have produced, not counting systematic reviews of effects
  - 1) None
  - 2) 1-2
  - 3) 3-5
  - 4) 6-10
  - 5) More than 10



# Polymakers Need Much More Than Evidence Syntheses to Make Decisions

- Evidence-informed policymaking means using the best available (i.e., highest quality and most locally applicable) data and research evidence – systematically and transparently – in the time available in each of
  - Prioritizing problems and understanding their causes (agenda setting)
  - Deciding which option to pursue (policy development)
  - Ensuring that the chosen option makes an optimal impact at acceptable cost (policy implementation)
- ... alongside the institutional constraints, interest-group pressure, values and other sources of ideas that influence the policy process (3Is)



# Cochrane KT Framework Has Five (or Six) Themes





## Prioritization and Co-Production

- Producing evidence syntheses that meet the needs of policymakers
  - Using systematic and transparent processes for eliciting the short-, medium- and long-term priorities of policymakers (e.g., that can be addressed in 6-12 weeks by evidence briefs and 6-12 months by full systematic reviews)
    - E.g., SPARK Tool for Prioritizing Review Questions for Systematic Reviews in Health Policy and Systems Research
  - Involving policymakers in all steps of the evidence synthesis process (i.e., what some call ‘integrated knowledge translation’), from articulating the question to designing the approach to merit review to end-of-project knowledge translation
    - E.g., Steering committee members, key informants and merit reviewers for evidence briefs (and later as dialogue participants where the evidence brief is considered alongside all factors)



## Poll 5

- Please indicate the number of evidence syntheses in which you've meaningfully involved at least one policymaker in its development
  - 1) None
  - 2) 1-2
  - 3) 3-5
  - 4) 6-10
  - 5) More than 10





# Packaging, Push and Support to Implementation

- Ensuring policymakers receive and can act on evidence syntheses
  - Preparing policymaker-targeted summaries of systematic reviews that profile policy-relevant information (e.g., Cochrane Australia) or preparing evidence briefs on priority policy issues (e.g., EVIPNet)
  - Designing and implementing proactive knowledge translation plans – particularly when ‘policy windows’ open (perhaps it wasn’t policy relevant before, but now it is) – that address five questions
    - What’s the message?
    - To whom should it be directed?
    - By whom should it be delivered?
    - How should it be delivered?
    - With what effect (or goal) should it be delivered?



## Poll 6

- Please indicate the number of evidence syntheses for which you've prepared a policymaker-targeted summary
  - 1) None
  - 2) 1-2
  - 3) 3-5
  - 4) 6-10
  - 5) More than 10



## Facilitating Pull

- Growing policymakers' capacity to find and use policy-relevant evidence syntheses
  - Promoting one-stop shops for pre-appraised evidence syntheses that highlight policy-relevant information, provide links policymaker-targeted summaries, and offer free monthly evidence services
    - ACCESSSS for clinical evidence
    - Health Evidence for public health evidence
    - Health Systems Evidence for evidence about how we organize ourselves to get the rights programs, services and drugs to those who need them (available in Chinese, French, Portuguese, Spanish)
    - (Soon) Social Systems Evidence, which will cover many program and service areas & related system arrangements & implementation strat.
      - Citizenship | children & youth services | community & social services | consumer protection | culture & gender | economic development & growth | education | employment | food safety and security | government services | housing | infrastructure | public safety and justice | recreation | transportation



## Facilitating Pull (2)

- Growing policymakers' capacity to find and use policy-relevant evidence syntheses (2)
  - Administering a rapid-response service that prepares rapid syntheses (rapid overviews of systematic reviews) in 3, 10 or 30 business days (e.g., REACH Policy - Uganda, EVIPNet Cameroon)
  - Building capacity among policymakers to find and use policy-relevant evidence syntheses as part of their policy analysis work (e.g., UJ-BCURE → Africa Centre for Evidence)



## Exchange

- Engaging with policymakers to support their use of policy-relevant evidence syntheses
  - Convening policy dialogues where policy challenges can be discussed with those who will be involved in or affected by decisions, all of whom are supported by
    - Context-specific summary of what's known from systematic reviews (and from local data and studies) about a problem and its causes, options, and implementation considerations (and evidence brief)
    - Systematically and transparently elicited values and preferences of citizens (through excerpts from a citizen panel summary that are included in the evidence brief)
    - Facilitation of the deliberations to draw out tacit knowledge and real-world views and experiences about the full range of factors that will influence decision-making (3Is) and about next steps for different constituencies



## Improving Climate / Building Demand

- Advocating for evidence-informed decision-making
  - Strong messages from all levels of government that research evidence is a key input to the policymaking process
  - Performance criteria for government staff related to their use of research evidence
  - Research evidence checklist that must be completed before briefing materials are submitted to Ministers or cabinet
  - External audits of government reports
  - Journalists who highlight when government statements aren't supported by research evidence



## Conclusion

- Making evidence syntheses more policy relevant means
  - Knowing ‘your’ policymakers, the types of questions they have, the types of evidence syntheses they need, and the types of factors that influence their decision-making  
(and as part of improving climate / building demand, helping them to understand how types of evidence syntheses map to questions)
  - Engaging in prioritization (to ensure that the syntheses are on the right topics) and co-production (to ensure the syntheses have the greatest chance of yielding the needed types of information)
  - Packaging evidence syntheses to highlight policy-relevant info.
  - Engaging in other activities that help to get policy-relevant evidence syntheses used
    - Push and support to implement. (when ‘policy relevance’ shifts)
    - Facilitating pull | Exchange



## Last Question from Me

- Please write in the chat box one thing that you are going to do better or differently in the coming year to make evidence syntheses more policy relevant





# Resources

- [Cochrane KT framework](#)
- McMaster Health Forum and Forum+
  - [Finding and using research evidence](#) (PDF)
  - [SUPPORT Tools for evidence-informed Policymaking](#) (PDF)
    - Also available in [Chinese](#), [French](#), [Portuguese](#), and [Spanish](#)
  - [Taxonomy of health-system arrangements and implementation strategies](#) (PDF)
  - [Using Health Systems Evidence](#) (PDF)
  - Coming soon
    - [www.mcmasterforum.org](http://www.mcmasterforum.org) (a revamped version of the McMaster Health Forum website, which will include Forum+) – end of June
    - [www.socialsystemsevidence.org](http://www.socialsystemsevidence.org) – mid-September



# What Have I Missed? Comments? Questions?