Session 11. Using research findings to influence policy

Health Systems Research Course
Western China School of Public Health
7-11 December 2015
Background

• Increasing concern that health policies should be evidence based
  – EBP in health draws on the tradition of EBM

• Calls for effective policies by health campaigners
  – People denied effective treatment due to lack of uptake of evidence

• Political recognition of the need for EBP

• Current research project at LSHTM
Form WHO Director General Lee-Jong Wook (2003):

“Scientifically excellent public health guidelines and other reliable information sit inert in journals and databases unless there is political commitment...to turning knowledge into action that will get results on the ground.”
Rationale for evidence use

• Desire for more effective policy

• To conserve and use resources more effectively and efficiently

• Need to justify policies and the allocation of money and services
  – Scientific evidence as a ‘rational’ way to do this

• Increasingly now research funders expect evidence of policy influence
  – Research applications expect you to set out a knowledge transfer strategy or even a policy influencing strategy
Understanding Evidence Informed Policy

What is (good) evidence?
- Politics of issues
- Institutional structures

What is (good) evidence use?
What is research evidence?

• What information counts as evidence?
  – From which sources?
  – On which outcomes (e.g. Morbidity, mortality, cost, equity, rights, morality values, etc.)

• Related concepts: evidence, knowledge, research

• Are different forms of evidence applicable to different issues/contexts in different ways?
What is ‘good’ evidence?

• Health/Medicine – imposed hierarchy of evidence:
  – RCT as the ‘gold standard’ (clinical research)
  – Appropriateness across health policy issues?

• Evidence in the social sciences

• How can we judge the strength of evidence?
  – ... or choose between conflicting evidence?
Evidence use

• What does it mean to use evidence (effectively)?

• Power, vested interests and the misuse of evidence?

• Framing of issues and public opinion

• Policy debates are never just about evidence; they are always political

  – Role of values and ideas
• We need to understand what makes a specific issue political in a specific place and/or time

• Politicisation affects the framing of an issue, the types of evidence seen as relevant and the these debates depend on
Agenda setting

• Getting issues on to the policy agenda
  – Identifying it as a policy problem that needs a solution
  – Identifying it as priority policy area (as opposed to others)

• This involves political contestation between competing priorities

• Setting the terms of the debate; policy framing

• Additional evidence will be used to inform policy interventions once they have been identified as priorities
  – If you want to solve problem X then you should do Y based on the evidence of effectiveness
  – E.g. of alcohol policy
What is ‘good’ evidence use?

• Evidence can be used in different ways & for different purposes?
  – To decide what areas need a policy response
  – To decide what to do in areas identified as policy problems

• Good governance of evidence; key principles:
  – Open/ transparent
  – Clear criteria/ procedures
  – Consultation/ public engagement
  – Awareness of conflicts of interest

• Will these vary from issue to issue/place to place?

• Outcome based versus process based accounts
Knowledge Transfer

• The process of taking knowledge and getting it to decision makers and policy makers

• This requires evidence to be summarized, shortened, simplified and/or repackaged

• Use of ‘1 pagers,’ policy briefs, charts and diagrams

• Use of knowledge brokers and key contacts

• Identifying key decision makers and channels of influence
Influencing strategies

• What is wrong with the current policy

• What should the policy be
  – Why: ethical issues, social impact, economic impact
  – Evidence of problem, of effectiveness of intervention

• How will you communicate this

• How is the policy made/ where are the key decisions taken?

• How will you engage decision makers and convince them

• Who will oppose it
  – How will you overcome this;
  – What alliances can you build with other supporters
Summary

• Shift towards evidence use in policy making, but political factors and values are also key factors in decision making

• Need to use appropriate evidence to inform different policy debates

• Researchers can promote policies on the basis of evidence but will also need political skills
  – Need to overcome opposition and build alliances

• Complex strategies are needed to bring about policy change

• This requires researchers to build alliances and networks with other actors and policy influencers who can promote research findings
Thank you!
Exercise

• In your groups, think about the HSR study you are designing throughout this wee

• Consider what are the policy implications of your research might be

• Who will you want to read your research (and possibly act on it)?

• How will you communicate with them?

• Using the handout, develop a knowledge transfer and policy influencing strategy for your project

• Prepare a short (5 min) presentation on the ethical issues raised by your project to share with other groups

• You have 30 minutes to complete the task before the presentations
Copyright

You are free:

To Share – to copy, distribute and transmit the work
To Remix – to adapt the work

Under the following conditions:

Attribution You must attribute the work in the manner specified by the author or licensor (but not in any way that suggests that they endorse you or your use of the work).
Non-commercial You may not use this work for commercial purposes.
Share Alike If you alter, transform, or build upon this work, you may distribute the resulting work but only under the same or similar license to this one.

Other conditions

For any reuse or distribution, you must make clear to others the license terms of this work.

Nothing in this license impairs or restricts the authors’ moral rights.

Nothing in this license impairs or restricts the rights of authors whose work is referenced in this document.

Cited works used in this document must be cited following usual academic conventions.

Citation of this work must follow normal academic conventions.
The CHEPSAA partners

University of Dar Es Salaam
Institute of Development Studies

University of Ghana
School of Public Health, Department of Health Policy, Planning and Management

University of Nigeria Enugu
Health Policy Research Group & the Department of Health Administration and Management

Great Lakes University of Kisumu
Tropical Institute of Community Health and Development

University of Cape Town
Health Policy and Systems Programme, Health Economics Unit

University of the Western Cape
School of Public Health

University of the Witwatersrand
Centre for Health Policy

University of Leeds
Nuffield Centre for International Health and Development

London School of Hygiene and Tropical Medicine
Health Economics and Systems Analysis Group, Depart of Global Health & Dev.

Karolinska Institutet
Health Systems and Policy Group, Department of Public Health Sciences

Swiss Tropical and Public Health Institute
Health Systems Research Group