THCS
TRANSFORMING HEALTH AND CARE SYSTEMS

Deliverable 5.1

Review of best strategies and tools to support the translation of R&I projects' results to policy

WP5

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Executive Summary

This executive summary provides an overview of THCS Deliverable D5.1, focusing on the review of best strategies and tools to support the translation of Research and Innovation (R&I) projects' results into policy. The document comprises three main chapters: Introduction and Rationale, Strategies and Tools for Policy Uptake, and Innovation's Research Role in Policy Development. Additionally, it includes a Fact Sheet outlining implications for advancing policy translation within the Partnership for Transforming Health and Care Systems (THCS) Project.

Chapter I: Introduction and Rationale

This chapter sets the context for the toolbox by examining the facilitators and barriers to the uptake of research in policy making. It presents findings from both survey results and desk research, shedding light on key factors influencing the translation of R&I projects' results into policy decisions.

Chapter II: Strategies and Tools for Policy Uptake

Building upon the insights gained in Chapter I, Chapter II explores various strategies and tools aimed at facilitating the uptake of evidence-based research into policy making processes. The information serves as a practical resource for stakeholders seeking to leverage R&I projects for informed decision-making.

Chapter III: Innovation's Research Role in Policy Development

This chapter delves into the role of innovation in shaping policy development processes. It highlights the importance of integrating innovative research methods and technologies to address emerging challenges in healthcare and social care systems.

Fact Sheet: Implications for Advancing Policy Translation within THCS

The factsheet outlines key implications derived from the review for advancing policy translation within the THCS Project. It provides actionable recommendations for leveraging the project's outcomes to influence policy agendas and drive systemic reforms in health and care systems. By aligning project objectives with policy priorities and engaging relevant stakeholders, THCS can maximize its impact on shaping the future of healthcare delivery.

In summary, THCS Deliverable D5.1 provides valuable insights aimed at improving the translation of R&I projects' outcomes into actionable policy measures. This version serves as an initial release, with additional data expected to be incorporated following interviews with key stakeholders.

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Chapter I – Introduction and Rationale

A) Context

Evidence-based policy making is essential for creating policies that are effective, efficient, equitable, and transparent. It helps building public trust, ensures the responsible use of resources, and fosters policies that are adaptable to changing circumstances. In the ever-evolving landscape of academia and real-world application, a persistent challenge emerges: the gap between research and policy. This chasm, often depicted as a problem, signifies the disparity between the wealth of knowledge generated within research spheres and its implementation or integration into policymaking. The consequences of this gap reverberate across multiple domains. In healthcare, groundbreaking medical discoveries may languish in academic journals, failing to translate into improved patients and societal outcomes due to implementation barriers or misalignment with applied practices.

Researchers and policymakers often struggle to see eye to eye due to inherent differences in their objectives, timelines, priorities, and methods of operation. At its core, this divide reflects a fundamental disconnection between the realms of theory and application. While research endeavours aim to expand the frontiers of knowledge, uncovering insights, testing hypotheses, and scrutinizing phenomena, their impact can be diluted if they remain confined within academic silos. Conversely, practitioners and policymakers operate within dynamic environments, facing real-world constraints, uncertainties, and demands that often diverge from the controlled conditions of research.

Research projects often unfold over extended periods, involving iterative processes of data collection, analysis, and peer review before findings are disseminated to the broader community. In contrast, policymakers operate within constrained timelines dictated by electoral cycles, political agendas, and immediate demands for action, even though with short term effect. The discrepancy in timelines can lead to tensions, as policymakers may require timely evidence and actionable recommendations to inform decision-making, whereas researchers may prioritize thoroughness and academic rigor, which may not align with policymakers' urgent needs. Moreso, researchers may prioritize intellectual exploration, pursuing topics of personal interest or academic significance, which may not always align with the immediate priorities or concerns of policymakers. The misalignment in priorities can create barriers to collaboration, as researchers may struggle to demonstrate the relevance and applicability of their work to policymakers' concerns. Ultimately, the gap between research and policy should not be viewed solely as a problem, but as an opportunity for transformation and growth. By embracing the challenge of integration and actively bridging disciplinary boundaries, we can cultivate a more dynamic and responsive ecosystem where knowledge flows freely, enriching both academia and society at large.

The THCS project recognizes the critical importance of integrating research insights with practical policy action. At its core, the THCS project is guided by the belief that researchers and policymakers, despite their divergent perspectives and methods, ultimately share a common goal. Both camps are driven by a commitment to improving the human condition, whether through advancing scientific knowledge or crafting policies that address pressing societal challenges. Through a series of interdisciplinary initiatives, THCS aims to create platforms for dialogue, knowledge exchange, and co-creation between researchers and policymakers by creating this space for dialogue, the project endeavours to bridge the communication gap between researchers and policymakers, enabling them to understand each other's perspectives, priorities, and constraints.

As a pivotal first step towards its mission, the THCS project initiated the employment of a survey aimed at both researchers and policymakers. By gathering insights into existing barriers, roles and facilitators, the survey provided valuable data to inform the subsequent phases of the project. This includes crafting an interview guide for deeper exploration and laying the groundwork for the toolbox's development. The decision to create a toolbox stemmed from a recognition of the multifaceted challenges inherent in translating research insights into actionable policy solutions. As an evolving resource, the toolbox will continue to grow and adapt as more insights are generated to meet the evolving needs of its users, ensuring its relevance and impact in driving meaningful action and impact.

This version of the toolbox was shaped by responses from the survey on the theme of using research in policymaking, as well as insights from a literature review on perceived barriers that stakeholders face in translating research into policy, alongside strategies and tools for the uptake of evidence-based research in policy making. Information was gathered by looking at two distinct populations: researchers and policymakers. The primary focus of toolbox development centred on examining what each group identified as facilitators and barriers, followed by strategies that can help bridge that gap.

B) *Survey results and desk research findings about facilitators and barriers to uptake of research in policy making*

The survey results indicate that policymakers view international best practices as the main facilitator for using research evidence, whereas researchers prioritize having more time and resources. The researchers also suggested other facilitators such as transparency; building a skilled healthcare workforce within policy-making institutions, that can identify and translate evidence-based research results into implementable policy recommendations; national structure for evidence-based policies ("Ministry"); political will and commitment; collaboration and involvement of researchers within the policy process; standardized procedures.

Predefined barriers to the integration of research evidence into policy were also examined across various stages of the policy process, including agenda setting, policy development, implementation, and evaluation, from the perspectives of both groups. The lack of relevant

research findings was identified as a significant barrier, particularly during the policy development stage. Policymakers also highlighted this as a barrier during the agenda setting stage.

Additionally, both groups encountered challenges related to the lack of research findings presented in a usable format during policy development. Another common barrier was the lack of time to seek out research resources, particularly during the agenda setting stage. During policy development, both policymakers and researchers struggled with the lack of knowledge on how to incorporate research into the policymaking process. Additionally, lack of support from their institution's leadership acted as a major barrier during policy development.

Differences emerged in perceptions of barriers related to lack of contacts/networks and institutional mechanisms. Researchers found it challenging to establish contacts/networks during agenda setting, while policymakers faced this barrier during policy development. Concerning institutional mechanisms, policymakers encountered difficulties during the implementation phase, while researchers faced challenges across agenda setting, implementation, and policy development stages.

During desk research, a systematic review emerged outlining seven primary barriers and related facilitators to integrate evidence into policymaking, such as:

Barriers	Facilitators
- the availability and access to research/improved dissemination; - clarity; - relevance; - reliability of research findings; - timing and opportunity; - policymaker research skills; - costs.	- availability and access to research/improved dissemination; - collaboration; - clarity; - relevance and reliability of research findings; - relationship with policymakers; - relationship with researchers/information staff[1].

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[1] Oliver K, Innvar S, Lorenc T, Woodman J, Thomas J. A systematic review of barriers to and facilitators of the use of evidence by policymakers. BMC Health Serv Res [Internet]. 2014 Jan 3 [cited 2024 May 30];14(1):1–12. Available from: https://link.springer.com/articles/10.1186/1472-6963-14-2

Chapter II – Strategies and tools for the uptake of evidence-based research into policy making

For this version of the toolbox, the development process primarily involved a search for systematic reviews detailing various strategies and tools, alongside individual research articles. This was further enriched by valuable insights from the World Health Organization's Evidence-Informed Policy Network (EVIPNet) resources.

Effective translation of research evidence into health policy and practice is essential for improving public health outcomes. This process, known as Knowledge Translation (KT), involves a range of strategies and tools designed to bridge the gap between research and policymaking. Key KT strategies include creating systematic reviews, policy briefs, and interactive processes such as policy dialogues and stakeholder engagements. These approaches help tailor research evidence to the specific needs and contexts of decision-makers, fostering trust and collaboration[2]. One article talks about KT tools and strategies that enable researchers to present evidence tailored to the concerns and needs of decision-makers. This involves packaging evidence to address various feasibility dimensions such as social acceptability, cost-effectiveness, community benefits, and the health system's readiness to implement the intervention. These KT processes include:

Encouraging researchers to create and disseminate implementation research that aligns with current health system needs.	*Compiling systematic reviews of broad, high-quality implementation research literature with specific recommendations.*	*Preparing policy briefs and executive summaries of implementation research results for policymakers.*	*Producing scientific publications with joint authorship between researchers and policymakers[3].*

Interactive KT processes help overcome technical and political barriers to research implementation. They facilitate mutual interest identification, foster trust and engagement with research evidence, and improve collaboration between policymakers and researchers.

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[2] Panisset U, Koehlmoos TP, Alkhatib AH, Pantoja T, Singh P, Kengey-Kayondo J, et al. Implementation research evidence uptake and use for policy-making. Health Res Policy Syst [Internet]. 2012 Jul 2 [cited 2024 May 30];10(1):1–7. Available from: https://health-policy-systems.biomedcentral.com/articles/10.1186/1478-4505-10-20

[3] Lavis JN, Oxman AD, Lewin S, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP) - Introduction. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 May 30];10(3):235–9. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-I1

Systematic reviews indicate that interactions between researchers and healthcare policymakers increase the likelihood of research utilization by policymakers. Examples of these interactive KT processes include:

Organizing deliberative policy dialogues or other stakeholder engagement approaches to review and initiate policy options, involving policymakers, managers, healthcare providers, and researchers to draw out tacit knowledge and assess feasibility.	Conducting priority-setting exercises where policymakers and researchers create a shared research and policy agenda.	Establishing clearinghouses with accessible, relevant case studies, systematic reviews, and other publications to aid policy implementation.	Hosting learning workshops for decision-makers with researchers to promote collaboration in finding, evaluating, and applying implementation research[4,5].

Deliberative dialogues are specifically designed to extract policymakers' tacit knowledge and to negotiate positions, using research evidence to confirm or challenge these positions. Research results for such dialogues must be carefully evaluated to determine their reliability. Interactive processes like these also foster a shared value framework among researchers and stakeholders, enhancing team building and distributed leadership. Trust in these dialogues hinges on the careful selection of participants and adherence to confidentiality and diffusion rules.

There are several strategies to enhance the capacity for evidence-informed decision-making. A systematic review identified barriers and facilitators to evidence-informed decision-making in public health, primarily in high-income countries, but the following recommendations are broadly applicable:

• foster strong relationships between policymakers and researchers, as interactions increase the likelihood of research being utilized by policymakers.

• address and manage conflicts between policymakers and researchers.

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[4] Lavis JN, Boyko J, Oxman AD, Lewin S, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP) 14: Organising and using policy dialogues to support evidence-informed policymaking. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 May 30];10(5):514–9. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S14

[5] Lavis JN. How Can We Support the Use of Systematic Reviews in Policymaking? PLoS Med [Internet]. 2009 Nov [cited 2024 May 30];6(11):e1000141. Available from: https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1000141

- promote interactions among stakeholders, researchers, and policymakers to ensure decisions incorporate stakeholder input.

- encourage collaboration between healthcare organizations and networks, especially between newer and more established entities.

- enhance policymakers' capacity to use research, which is an effective strategy for increasing research utilization[6].

To integrate these strategies and create a conducive environment for knowledge translation (KT), it is beneficial to establish national mechanisms or KT platforms that systematically utilize evidence in policymaking, particularly in low- and middle-income countries. EVIPNet represents a successful World Health Organization (WHO) program, and it operates as a global social network comprising 26 Knowledge Translation (KT) platforms, or country teams, aimed at promoting evidence-informed decision-making in public health at various jurisdictional levels. Each country team in EVIPNet includes researchers, high-level decision-makers, and other stakeholders such as patients, healthcare workers, and civil society representatives. This diversity fosters sustainable partnerships and facilitates the exchange of best practices and feedback[7].

EVIPNet organizes capacity-building workshops to improve the knowledge translation abilities of policymakers, researchers, and other stakeholders. The diverse participation in these workshops enhances the learning experience, promoting a "learning by doing together" philosophy to improve collaborative efforts. The capacity-strengthening programs focus on creating tangible outputs like evidence-informed policy briefs and preparing processes such as deliberative dialogues. This approach helps policymakers develop skills in problem identification, research problem framing, context mapping, and priority setting, among others. The skills and insights gained by policymakers and researchers contribute to the sustainable strengthening of health systems.

EVIPNet serves as a platform for promoting the systematic use of health research evidence in policymaking, offering valuable guidance and expertise in evidence-informed decision-making processes. The KT platform integrates knowledge translation activities that encompass the following key elements:

- a governing body that includes representatives from groups such as evidence producers, distributors, and users.

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[6] Innvær S, Vist G, Trommald M, Oxman A. Health policy-makers' perceptions of their use of evidence: a systematic review. http://dx.doi.org/101258/135581902320432778 [Internet]. 2002 Oct 1 [cited 2024 May 30];7(4):239–44. Available from: https://journals.sagepub.com/doi/10.1258/135581902320432778

- the political commitment to act on the best available evidence.

- regular prioritization processes to guarantee that attempts to link research to concrete action are highly appropriate to the requirements of potential research users.

- initiatives to incorporate evidence into policymaking in areas where actionable insights have been identified.

- various efforts to promote the active use of evidence by users[8]

Another WHO important document titled "Guide to qualitative evidence synthesis. Evidence-informed policy-making. Using research in the EVIPNet Framework" was developed in EVIPNet Europe. The document serves as a valuable resource for those involved in commissioning, developing, or reviewing qualitative evidence syntheses or similar synthesis products that incorporate qualitative data. While it doesn't offer a detailed, step-by-step guide, it provides a comprehensive overview of methods and references other relevant sources of information, making it a useful tool for navigating the qualitative evidence synthesis process. The document offers valuable insights into conducting qualitative evidence synthesis within the policymaking domain. It covers essential aspects such as formulating research questions, searching for relevant literature, critically appraising findings, and reporting results effectively. Additionally, it provides resources and references to aid researchers and practitioners in conducting rigorous qualitative evidence synthesis[9].

WHO developed other guides for evidence-informed decision-making, such as ''The Evidence, policy, impact.'', a document that contains 2 sections:

- the first one delves into the question "What is EIDM and why is the use of research evidence important?". It introduces evidence-informed decision-making (EIDM) and underscores its significance. The section further explores the types of evidence necessary for EIDM and strategies for closing the research-to-policy gap, with a focus on knowledge translation. Additionally, it discusses the potential impact of EIDM on WHO and its Member States.

- the second one focuses on the evidence ecosystem that concentrates on understanding and enhancing the global ecosystem for impactful action. It introduces a framework aimed at improving the evidence creation process, covering inquiry, synthesis, and evidence product development. Furthermore, it explores the application of evidence in the policy/action cycle, emphasizing phases like problem understanding, solution design, implementation, and

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[8] Lavis JN, Lomas J, Hamid M, Sewankambo NK. Assessing country-level efforts to link research to action. Bull World Health Organ. 2006;84(8).

[9] WHO. GUIDE TO QUALITATIVE EVIDENCE SYNTHESIS EVIDENCE-INFORMED POLICY-MAKING USING RESEARCH IN THE EVIPNET FRAMEWORK EVIDENCE-INFORMED POLICY NETWORK (EVIPNET) EUROPE. 2021 [cited 2024 May 30]; Available from: http://apps.who.int/bookorders.

sustainability. This section underscores the crucial connection between evidence creation and application, with a focus on promoting global health and equity[10].

Another WHO publication, titled "Evidence Briefs for Policy. Using the Integrated Knowledge Translation Approach: A Guiding Manual" provides a comprehensive guide for implementing the integrated knowledge translation approach in policy development. The manual offers a systematic approach from initial coordination to evaluation, emphasizing stakeholder engagement, evidence synthesis, and effective communication strategies throughout the policy development process. It contains three main sections:

• what to consider before getting started: before diving into the process, it's essential to establish a foundation for collaboration. This involves initiating informal coordination among involved parties and then formalizing collaboration by defining goals, objectives, and duties. Appointing team leads for collaboration and follow-up ensures accountability, while clear communication terms, timelines, and financial arrangements set the groundwork for productive collaboration.

• technical support and coaching: provides detailed guidance on the technical aspects of preparing for, writing, and implementing evidence briefs. It begins with the pre-writing phase, where priorities are set, and the Evidence Briefs for Policy (EBP) team and steering committee are identified. Understanding the policy and political landscape and mapping stakeholders are crucial steps before developing a work plan with clear timelines. Writing the EBP involves several stages, from creating a problem tree and terms of reference to synthesizing literature and framing problems and options. The post-EBP uptake phase focuses on facilitating policy dialogue, summarizing discussions, and executing advocacy and communication plans.

• evaluation: is key to assessing the effectiveness of the process and outcomes. The manual provides tools such as EBP evaluation forms, policy dialogue evaluation forms, and comprehensive evaluation from multiple perspectives to gauge the impact of the evidence briefs and policy dialogues.

A policy brief provides valuable insights to policymakers, guiding their decisions or encouraging action. Importantly, it differs from advocacy or opinion pieces, maintaining an analytical stance focused on objectivity and factual accuracy. While it may present compelling evidence, its primary goal is to remain unbiased. Additionally, a well-crafted policy brief incorporates

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[10] Violeta Stoimenova. Supporting the routine use of evidence during the policy-making process. 2023 [cited 2024 May 30]; Available from: http://apps.who.int/bookorders.

contextual and structural considerations, allowing for the application of broader evidence to local contexts[11].

Format preferences play a crucial role in the utilization of policy briefs by policymakers. In literature, it is emphasized the significance of concise documents that can be swiftly processed, stressing the importance of presenting evidence in an understandable and visually appealing manner. Moreover, it was highlighted the impact of tailored messaging and appropriate contextualization on the effectiveness of research communication. Policymakers prefer clear, expert-authored documents that offer focused information and actionable recommendations. If involved in a workshop, sending policy briefs ahead of time enhances their utility, as acknowledged information allows for more in-depth discussions during the event. This aligns with other findings, suggesting that interventions combining evidence communication and stakeholder interactions are more likely to succeed.

Additionally, there are strategies highlighting the importance of stakeholder engagement, flexibility, and co-creation in promoting the uptake of research into policy and practice. One article refers to three key strategies for incorporating research into policy and practice which include:

Direct engagement with researchers
Stakeholders actively sought evidence from researchers, particularly for urgent issues like HIV and same-day ART initiation. This direct approach led to the immediate uptake of findings into international policies and guidelines. The timeliness, relevance, and credibility of research were crucial for this strategy.
Sustainable collaborations and supportive policy environment
Engaging stakeholders from the early stages of research through advisory and steering groups facilitated continuous information exchange and influenced policy decisions. Early involvement helped set research priorities and adapt to policy environments. Flexibility and additional funding after initial grants were recommended to maintain continuity and adapt to changes in the policy landscape. Effective stakeholder relationships and capacity within government bodies to apply research findings were essential.
Participatory and transdisciplinary research approaches
Co-creation and equal partnerships in research projects, such as those in Guatemala and COHESION, promoted co-learning and minimized power imbalances. This approach ensured solutions were culturally relevant and implementable. Involving stakeholders in agenda-

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[11] Arnautu D, Dagenais C. Use and effectiveness of policy briefs as a knowledge transfer tool: a scoping review. Humanities and Social Sciences Communications 2021 8:1 [Internet]. 2021 Sep 13 [cited 2024 May 30];8(1):1–14. Available from: https://www.nature.com/articles/s41599-021-00885-9

Accurate media reporting is another crucial way to provide policymakers with up-to-date evidence. Researchers can collaborate with journalists to disseminate evidence to decision-makers and inform the public through media reports. Strategies and tools developed to support accurate research reporting by journalists include structured press releases, fact boxes, press conferences, ready-to-use stories, jargon-free communication, expert access, tip sheets, and training workshops. Researchers often prepare media releases for systematic reviews and contextualize locally conducted studies, ensuring that the evidence presented is timely and relevant.

Amidst the abundance of information in contemporary society, scholars are increasingly exploring the potential of social media and various online channels. It's evident that academics have become increasingly intrigued by unconventional means of assessing their scholarly influence. These alternative measurements, referred to as 'altmetrics', offer researchers a way to assess the resonance and visibility of their research within the digital sphere, surpassing conventional metrics like citation counts and journal impact factors. A study mentions ten strategies that researchers can use in order to enhance the exposure of research findings, aiming to ultimately influence policy and/or practice positively, such as: collaborating with a diverse range of co-authors to expand their network, choosing titles and keywords carefully to improve discoverability, publishing articles as open access to broaden accessibility, utilizing social media platforms effectively to disseminate research, developing and sharing podcasts to engage wider audiences, sharing various research outputs beyond manuscripts, establishing a personal blog to showcase your work and insights, obtaining a unique author identifier like ORCID for distinct recognition, creating policy briefs or evidence summaries in lay language for policymakers, exploring additional dissemination tools to further amplify your research reach[13].

Another article examined advice from academic and 'grey' literature to compile a list of recommendations for academics aiming to achieve 'impact' from their research, highlighting the challenges and considerations surrounding effective engagement, navigating the policymaking

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[12] Erismann S, Pesantes MA, Beran D, Leuenberger A, Farnham A, Berger Gonzalez de White M, et al. How to bring research evidence into policy? Synthesizing strategies of five research projects in low-and middle-income countries. Health Res Policy Syst [Internet]. 2021 Dec 1 [cited 2024 May 30];19(1):1–13. Available from: https://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-020-00646-1

[13] Tripathy JP, Bhatnagar A, Shewade HD, Kumar AM V., Zachariah R, Harries AD. Ten tips to improve the visibility and dissemination of research for policy makers and practitioners. Public Health Action [Internet]. 2017 Mar 3 [cited 2024 May 30];7(1):10. Available from: /pmc/articles/PMC5526489/

system, and the extent of efforts required to achieve tangible policy impact and recognition. These insights underscore essential recommendations for academics striving to enhance the impact of their research. These include conducting rigorous research using established methodologies, ensuring research outputs are accessible and relevant, comprehending the complexities of the policy-making process, engaging collaboratively with policymakers, defining one's role as either an advocate or a neutral broker of evidence, cultivating partnerships with policymakers, developing effective communication and persuasion skills, and continuously reflecting on and adapting to the dynamics of policymaking[14].

One paper that gathered data said that successful methods for enhancing access to research evidence necessitate a comprehensive approach. This approach involves integrating skill development, accessing a knowledge broker, providing resources and tools for evidence-informed decision-making, and promoting networking for sharing information. Interviews and survey analyses indicated that such interventions should target both individual and organizational levels. This includes workforce development, improving access to evidence, maintaining consistent communication with a knowledge broker to enhance access to intervention evidence, fostering skill development in evaluating and incorporating evidence, reinforcing networks, and investigating organizational elements to foster cultures that embrace evidence-based practices[15].

Investigating methods like knowledge brokerage and educational workshops helps integrate research findings into health services. These approaches can potentially lead to systematic and structural enhancements in healthcare delivery. Nonetheless, numerous obstacles hinder effective implementation. Both individuals and health services encounter financial disincentives, time constraints, lack of awareness of extensive evidence resources, limited critical appraisal skills, and challenges in contextualizing evidence[16].

A series of tools designed to help policymakers use research evidence in health policy decision-making titled "SUPPORT Tools for evidence-informed health Policymaking (STP)" have also been developed. These tools address the challenges of integrating evidence into policy processes, ensuring decisions are informed by reliable research. These tools are addressed primarily to

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[14] Cairney P, Oliver K. How Should Academics Engage in Policymaking to Achieve Impact? https://doi.org/101177/1478929918807714 [Internet]. 2018 Nov 16 [cited 2024 May 30];18(2):228–44. Available from: https://journals.sagepub.com/doi/full/10.1177/1478929918807714

[15] Armstrong R, Waters E, Dobbins M, Anderson L, Moore L, Petticrew M, et al. Knowledge translation strategies to improve the use of evidence in public health decision making in local government: Intervention design and implementation plan. Implementation Science. 2013 Oct 9;8(1).

[16] Sarkies MN, Bowles KA, Skinner EH, Haas R, Lane H, Haines TP. The effectiveness of research implementation strategies for promoting evidence-informed policy and management decisions in healthcare: A systematic review. Implementation Science [Internet]. 2017 Nov 14 [cited 2024 May 30];12(1):1–20. Available from: https://implementationscience.biomedcentral.com/articles/10.1186/s13012-017-0662-0

health policymakers, including government officials, advisors, and other stakeholders involved in the creation and implementation of health policies. The tools are intended to:

• improve the use of research evidence in policymaking.

• provide a structured approach to evidence-informed decision-making.

• enhance the capacity of policymakers to interpret and apply research findings effectively.

The SUPPORT tools are designed for use in a variety of contexts, including low- and middle-income countries, as well as high-income ones. Each article starts with one to three typical scenarios. These scenarios are designed to motivate readers to use the described tools and help them determine the level of detail they need[17].

There are 18 articles in total, and in this series, each article introduces a tool for those involved in utilizing research evidence to support health policymaking. The series covers four main areas:

• Promoting evidence-informed policymaking (Articles 1-3): these articles help understand what evidence-informed policymaking is, how organizations can support it, and how to set priorities[18, 19, 20].

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[17] Lavis JN, Oxman AD, Lewin S, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP) - Introduction. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):235–9. Available from: https://health-policy-systems.biomedcentral.com/articles/10.1186/1478-4505-7-S1-I1

[18] Lavis JN, Oxman AD, Lewin S, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP) 3: Setting priorities for supporting evidence-informed policymaking. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):255–61. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S3

[19] Oxman AD, Vandvik PO, Lavis JN, Fretheim A, Lewin S. SUPPORT Tools for evidence-informed health Policymaking (STP) 2: Improving how your organisation support the use of research evidence to inform policymaking. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):247–54. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S2

[20] Oxman AD, Lavis JN, Lewin S, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP) 1: What is evidence-informed policymaking? Health Res Policy Syst [Internet]. 2009 Dec 16 [cited 2024 Jun 4];7(S1):1–7. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S1

- Identifying research evidence needs in policymaking steps (Articles 4-6): focuses on clarifying problems, framing options, and planning implementation[21, 22, 23].

- Finding and evaluating evidence - systematic reviews (Articles 7-10) and other evidence types (Articles 11-12): Guides on finding systematic reviews, assessing their reliability, applicability, and considering equity[24, 25, 26, 27, 28, 29].

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[21] Fretheim A, Munabi-Babigumira S, Oxman AD, Lavis JN, Lewin S. Support tools for evidence-informed policymaking in health 6: Using research evidence to address how an option will be implemented. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):276–83. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S6

[22] Lavis JN, Wilson MG, Oxman AD, Grimshaw J, Lewin S, Fretheim A. Support tools for evidence-informed health policymaking (STP) 5: Using research evidence to frame options to address a problem. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):269–75. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S5

[23] Lavis JN, Wilson MG, Oxman AD, Lewin S, Fretheim A. Support tools for evidence-informed health policymaking (STP) 4: Using research evidence to clarify a problem. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(3):262–8. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S4

[24] Oxman AD, Fretheim A, Lavis JN, Lewin S. SUPPORT tools for evidence-informed health policymaking (STP) 12: Finding and using research evidence about resource use and costs. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(4):422–8. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S12

[25] Lewin S, Oxman AD, Lavis JN, Fretheim A, Marti SG, Munabi-Babigumira S. SUPPORT tools for evidence-informed policymaking in health 11: Finding and using evidence about local conditions. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(4):412–21. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S11

[26] Oxman AD, Lavis JN, Lewin S, Fretheim A. SUPPORT tools for evidence-informed health policymaking (STP) 10: Taking equity into consideration when assessing the findings of a systematic review. Chinese Journal of Evidence-Based Medicine [Internet]. 2010 Dec 16 [cited 2024 Jun 4];10(4):405–11. Available from: https://link.springer.com/articles/10.1186/1478-4505-7-S1-S10

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• Translating research into decisions - engaging stakeholders (Articles 13-15) and using evidence in decisions (Articles 16-18): discusses engaging stakeholders, using policy briefs and dialogues, balancing pros and cons of policies, dealing with insufficient evidence, and planning monitoring and evaluation [30],[31],[32],[33],[34],[35].

Each article provides a set of questions to guide activities supporting evidence-informed policymaking. The series is useful for those seeking to enhance their understanding and application of research evidence in health policy decisions.

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Chapter III – Innovation's Research Role in Policy Development

In today's rapidly evolving landscape, the intersection of innovation and policymaking stands as a pivotal arena for shaping the future of societies and economies.

While innovation in drugs, technologies, procedures, and healthcare delivery methods significantly impacts health systems, uncertainty about their benefits and unintended consequences makes managing innovation complex. Although innovation is widely pursued, most health innovation ideas do not advance into viable products, services, or changes in healthcare delivery. Only a small number of those successfully developed and tested in one location are effectively implemented or achieve the expected outcomes in that setting, and even fewer are scaled up to their full potential and become standard practice [36].

This has led to a significant increase in policy complexity, resulting in the coexistence of multiple innovation policies within the same country or region. These policies are based on different rationales, employ various instruments, and correspond to different policy domains. Policy evaluation should be integral to these processes of reflection, learning, and ongoing adaptation. Traditionally, innovation policy instruments have primarily consisted of hard economic instruments aimed at influencing the quantity and distribution of goods and services. However, since the 1990s, they have evolved to include more sophisticated demand-based and interactive elements. Additionally, soft and non-coercive instruments, emphasizing cooperation between actors, have emerged as systemic policy rationales have evolved. It's important to note that new instruments don't simply replace previous ones; rather, their objectives may be modified to align with the new systemic rationales. As a result, the mix of policy rationales within a given innovation system is complemented by a variety of policy instruments targeting different actors within the system. Various policy domains contribute another layer to the policy mix. Innovation theories have progressed from emphasizing science and technology as the primary drivers of innovation to recognizing that learning in a broader sense is the central process. Furthermore, innovation is now understood to encompass non-technological elements such as organizational and social innovations [37].

Science, Technology and Innovation (STI) policy evaluations are increasingly recognized as crucial learning tools. They assist policymakers and implementers in refining policy design and operations while enhancing their understanding of specific contexts. Moreover, governments

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[36] Gupta A, Thorpe C, Bhattacharyya O, Zwarenstein M. Promoting development and uptake of health innovations: The Nose to Tail Tool. F1000Res [Internet]. 2016 [cited 2024 May 30];5. Available from: /pmc/articles/PMC4863676/

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and taxpayers need credible and robust evidence that economic and societal policy objectives are being met efficiently, effectively, and economically[38].

Decision-making in complex public innovation processes requires creating a productive 'authorizing environment' supported by various actors and interconnected power relations. The challenge is to enable new practices in public service systems while demonstrating their public value and building the capacity to govern them effectively. A new type of public authority role is proposed, one that distributes efforts and resources to address problems collaboratively. This approach recognizes the state as one knowledgeable actor among many, leveraging collective capacity for better public outcomes. Effective public governance requires co-production and collaboration, creating new 'publics' and 'authorizing environments'. However, public authorities may still need to validate or sanction procedures when necessary. In public innovation, there isn't always a direct link between authoritative knowledge and interventions; decision-making conditions must be explored and learned. Policymakers must ensure openness, accuracy, and impartiality, leveraging digital tools to facilitate shared decision-making. The public sector's role now involves enabling collaboration with private actors and fostering environments for co-production[39].

While a primary objective of evidence-based policymaking is to allocate resources to strategies supported by robust evidence, relying solely on established approaches can hinder the discovery of new and innovative solutions to national challenges. Therefore, fostering innovation must be a crucial aspect of evidence-based policymaking. This is particularly important in policy areas where the evidence base is sparse, and there is limited research to inform funding and programmatic decisions. Testing innovative approaches in these areas is vital for advancing evidence-based policy[40].

Limited information was found on the adoption of innovation strategies in policymaking in healthcare. Maybe consideration should be given to transitioning towards policy monitoring and evaluation to ensure that innovations are effectively producing desired outcomes. By prioritizing evaluation, policymakers can systematically assess the impact of innovative approaches and make data-driven decisions.

This shift not only enhances accountability and transparency but also fosters a culture of continuous improvement. As we move forward, embracing rigorous evaluation methods will be

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[38] ERA LEARN. Science, Technology and Innovation Policy Evaluation — ERA-LEARN [Internet]. 2021 [cited 2024 May 30]. Available from: https://www.era-learn.eu/news-events/events/science-technology-and-innovation-policy-evaluation

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[40] Urban Institute. EVIDENCE-BASED POLICYMAKING COLLABORATIVE Principles of Evidence-Based Policymaking. 2016.

crucial in refining policies to better serve the public and address emerging challenges. Ultimately, this commitment to evidence-based policy evaluation will pave the way for more effective and sustainable innovations in governance.

For researchers, this shift has significant implications. It opens new avenues for academic inquiry and practical application, driving demand for comprehensive studies on policy outcomes and the factors that influence their success. Researchers can play a pivotal role in developing and refining evaluation methodologies, contributing to a deeper understanding of what works and why. This collaborative effort between policymakers and researchers can advance policy research and ensure that innovations are grounded in solid empirical evidence.

Factsheet: Implications for Advancing Policy Translation within the Partnership for Transforming Health and Care Systems (THCS) Project

One of the main aims of the THCS project, through the Strategic Research and Innovation Agenda (SRIA), is represented by the transformative opportunity for researchers to leverage their expertise and contribute meaningfully to the advancement of health and care systems.

By identifying strategic priorities, enhancing funding opportunities, and promoting cross-sectoral collaboration, this agenda empowers researchers to generate actionable evidence that directly informs policy formulation, implementation, and evaluation. The THCS project team can provide researchers alongside policymakers with the right tools to make multifaceted contributions, for example by actively driving forward its objectives by leveraging Joint Translation Calls (JTCs) within Work Package 7 (WP7), through mechanisms for funding research projects with a clear mandate to facilitate translation into policy-making outcomes. Enhancing the criteria for selecting research proposals can reinforce the imperative for researchers to envision tangible policy impacts. Key elements that could enrich these criteria might include:

Formal Collaboration Requirement	Inclusion of Policymakers in Project Teams	Policy Paper Development	Policy Recommendations	Alignment with Policy Cycle
This could entail a structured partnership approach between researchers and policymakers, ensuring ongoing engagement and alignment of research with policy needs.	Encourage grant applicants to incorporate at least one policymaker within their project teams.	Emphasize the importance of producing policy papers as a deliverable from research projects.	Require researchers to provide explicit policy recommendations based on their research findings.	Mandate that project proposals clearly articulate the relevance of the research to the policy cycle.

Under the projects' Work package 5 (WP5), common goals and vision for both researchers and policymakers can be established. Initially, separate workshops can be held with each group in order to understand their dynamics before bringing them together at the same table. During these workshops, parallel topics can be addressed. For example, researchers can learn how to develop a policy brief, while policymakers can focus on understanding its importance, how to read and interpret it effectively, and practical tips for utilizing such briefs. This dual approach ensures that both groups gain relevant skills and insights, enhancing their collaborative efforts. Practical workshops should then be organized around real healthcare issues, allowing both groups to collaborate on tangible cases. These real-world problems can be tailored to the specific

implementation contexts of different countries that are part of the project, fostering effective collaboration and problem-solving skills. Addressing these tailored issues will offer valuable insights into the coordination and communication challenges that arise among collaborating groups. At the end of the workshops, a feedback session can be held to discuss outcomes and guide future activities, ensuring continuous improvement and relevance of the initiatives.

By integrating these elements, the THCS project can ramp up fostering a culture of research translation and it ensures its direct contribution to advancing policy objectives within health and care systems.