

Summary report on the

WHO-EM/RPC/043/E

Expert consultation on fostering institutional and structural capacity for evidence-based health policy-making

Cairo, Egypt
29–30 November 2017



REGIONAL OFFICE FOR THE

World Health
Organization

Eastern Mediterranean

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1. Introduction

In October 2017, the 64th session of the WHO Regional Committee for the Eastern Mediterranean, recognizing the importance of the use of research evidence in health policy-making, requested the WHO Regional Director to establish regional mechanisms to support the bridging of gaps between research institutions and policy-makers and the translation of research evidence into health policy.

With this in mind, the WHO Regional Office for the Eastern Mediterranean held a two-day expert consultation on fostering institutional and structural capacity for evidence-based health policy-making, from 28 to 29 November 2017 in Cairo, Egypt.

The objectives of the meeting were to:

- present and deliberate on different global/regional knowledge translation mechanisms and incorporating research evidence into health-policy making;
- discuss different structural approaches to enhance formal institutionalization of use of research evidence in national policy-making for health, including linkages with health technology assessment and national standard setting for health care delivery, clinical practice and public health; and
- identify effective and innovative approaches for engaging relevant stakeholders, which would streamline evidence-based health policy-making and foster systematic usage of approaches such policy briefs and dialogues.

The meeting was inaugurated by Dr Jaouad Mahjour, Acting Regional Director, WHO Regional Office for the Eastern Mediterranean, who provided a general introduction to the meeting's objectives and the intended deliverables. The meeting was chaired by Dr Arash

Rashidian (Director of Information, Evidence and Research, WHO Regional Office for the Eastern Mediterranean). Dr Ahmad Firas Khalid (Canada) was the meeting's rapporteur.

Participants included Professor Mohamed Awad Tag El Din (Former Minister of Health, Egypt), Professor Hoda Rashad (Director, Social Research Center, American University in Cairo, Egypt), Professor Reza Majdzadeh (Director, National Institute of Health Research, Islamic Republic of Iran), Dr Abbas Vosoogh (Health Policy Advisor, Ministry of Health and Medical Education, Islamic Republic of Iran), Dr Elie Akl (Director, GRADE Center, American University in Beirut, Lebanon), Professor Fadi El-Jardali (Director, Knowledge 2 Practice Center, American University in Beirut, Lebanon), Dr Babar Shaikh (Associate Professor, Health Services Academy, Pakistan), Professor Abdulaziz Bin Saeed (Former Vice Minister for Public Health, Saudi Arabia), Dr Mohammad Khashoggi (General Supervisor, Healthy Cities Programme, Saudi Arabia), Professor Mohamed Hsairi (Professor of Public Health, Tunisia), Professor Salman Rawaf (Director, Imperial College, United Kingdom), Dr Mohamed Godah (Medical Epidemiologist, Egypt), Dr Ahmad Firas Khalid (WHO Temporary Advisor, McMaster University, Canada), Dr Rand Salman (Director, Palestinian National Institute of Public Health, occupied Palestinian territory), Dr Arash Rashidian (Director, Information, Evidence and Research, WHO Regional Office for the Eastern Mediterranean), Dr Abdul Ghaffar (Executive Director, Alliance for Health Policy and Systems Research, WHO), Dr Ahmed Mandil (Coordinator, Research, Development and Innovation, WHO Regional Office for the Eastern Mediterranean), Dr Adham Ismail Abdel-Monem (Regional Adviser, Health Technologies and Medical Devices, WHO Regional Office for the Eastern Mediterranean), Dr Samar ElFeky (Technical Officer, Research Promotion and Development, WHO Regional Office for the Eastern Mediterranean).

2. Summary of discussions

The two day expert-consultation involved expert presentations (followed by discussions) as well as group works. The presentations covered the following topics:

- Institutional capacity to generate and use evidence in lower middle-income countries (Abdul Ghaffar)
- Institutional approaches of the UK/NHS in using evidence in policy-making (Salman Rawaf)
- Use of data and evidence for policy-making: a WHO perspective (Vaseeharan Sathiyamoorthy)
- The use of evidence in public health decision-making: the case of EVIPnet, GESI, K2P/Lebanon (Fadi El-Jardali)
- The use of evidence in public health decision-making: the case of the Islamic Republic of Iran (Abbas Vosoogh)
- The role of academia in supporting evidence-based policy-making: SPARK and AUB GRADE Center experience (Elie Akl)
- The role of academia in supporting evidence-based policy-making: TUMS and NIHR experience (Reza Majdzadeh)
- Evidence-based policy-making structural approaches: comparative country experience (Arash Rashidian)
- Development of health technology assessment programmes within ministries of health: barriers to effective application in EMR countries (Adham Ismail).

The following key points were noted in the discussions.

Linking the use of data and evidence for policy-making

There is a need to separate between two key domains when discussing how best to incorporate research evidence into health policy-making: academic research published in research journals that contributes to

knowledge; and research for policy that addresses needs. A systematic process is required, starting with defining what is meant by “evidence” and the mechanisms for validating research evidence.

WHO seeks to link evidence to policy-making through the Evidence-Informed Policy Network (EVIPNet) that promotes the systematic use of research evidence in health policy-making in order to strengthen health systems and ensure the right programmes, services and medicines get to those who need them. In addition, WHO’s Global Observatory on Health Research and Development works with other databases to create “one place” where different global databases can come together. The aim is to provide critical information to support needs-driven research and development investment based on unmet public health needs for populations where the global disease burden is focused.

WHO needs to consider three prerequisites to encourage the utilization of research in policy-making: governance (are there articulated long-term goals responding to the needs of the population); platforms (are there platforms for policy dialogue); and whether there is space for researchers to have discourse with policy-makers on the approach they are adopting to meet common goals.

Increasing funding for important regional programmes requires effective and clear communication of the available research evidence.

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