INDEPTH NETWORK

"MOVING RESEARCH TO POLICY"

REPORT ON A TWO-DAY MEETING OF THE RESEARCH TO POLICY WORKING GROUP

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1.   INTRODUCTION

The second objective of the INDEPTH network is "To increase the use of INDEPTH's evidence-based recommendations by governments and other stakeholders in their decision making by 2016". To this end the 47 high quality HDSS sites in 21 countries offer policy-makers access to up-to-date health and demographic information and trends from a variety of contexts. The HDSS centres also continuously monitor all individuals in a given area for births and deaths, causes of death, and in-and-out-migrations. This provides policy-makers with an accurate and detailed view of population demographics that is particularly important in contexts where national statistics are either lacking or weak. This monitoring system also provides a platform for the design and evaluation of a wide range of social, economic, behavioral and health interventions and research studies

Though some work has been done to assess this area, it is not clear how much and how effective this has been. As part of the 2013 – 2016 strategic plan, INDEPTH set a goal of "…. maintaining an ongoing dialogue with key stakeholders at all levels, to ensure that our work is known, understood and used by those who develop policies and programs". The methods for achieving this goal included the following;

- Encouraging and supporting Working Groups to publish research findings and policy analyses in varied formats, including peer-reviewed articles in international journals, working papers and research reports, policy briefs, fact sheets, media releases and newspaper articles; our emphasis wherever possible will be on "open access".
- Organising forums, meetings and briefings with key stakeholders
- Participating in international conferences and agenda-setting meetings
- Strengthening and collaborating with national and regional entities focused on population, health and development.
- Assessing existing policies and the policymaking environment, and on the basis of evidence, making relevant recommendations.

The purpose of this meeting was to get the constituted Working group to brainstorm, develop and plan for achieving this goal.

2.   THE CONCEPT (Developed by Prof. Osman Sankoh}

Background

Health research is at the basis of improving community health, the ultimate goal of a health system. To increase the contribution of scientific evidence in decision making, evidence-informed health policy making began in the late 1990s as an approach to policy decisions that aims to ensure that decision making is well-informed by the best available research evidence (Buse K. et al. 2005). The utilisation of health research in policy-making should contribute to policies that may eventually lead to desired outcomes, including health gains.

Policy-making is an extremely fluid and complex process that involves those in positions of authority making choices that have a special status within the group to which they will apply (Hanney et al. 2003). It is of value to explore the variety of policy-making/utilisation connections because they underline the

argument that it is not realistic to expect policy-making always to follow the ends-means rational model that might entail the clearest use of research. Research can make a contribution in at least four phases of the policy-making process: agenda setting; policy formulation; implementation; impact/outcome evaluation. Research could also be of symbolic use in helping to build support for implementation through assistance with communicating or justifying the policy and being used to generate support for it in terms of financial resources, political commitment, and public opinion (Walt G. 1994).

The goal

The goal of this exercise is to develop a framework for appraising research utilisation by policy makers in INDEPTH member countries. This should assist with the formulation of assessment tools that help reveal the full picture of the way INDEPTH research is used in policy-making. This also has advocacy, and accountability advantages, as well as increased understanding of the value of research. INDEPTH particularly needs the results of such an assessment as evidence of how core funding improves its organisational capacity to help translate the massive scientific data it generates into policy decision-making.

The INDEPTH Network

INDEPTH is a pioneer in health and population research, providing robust answers to some of the most important questions in development. The lack of a reliable information base to support the identification, prevention and treatment of health problems is a major contributing factor to the high burden of disease in low and middle income countries. Through its global network of 49 health and demographic surveillance system (HDSS) sites run by 42 research centres in 20 countries in Africa, Asia and the Pacific region, INDEPTH is an organisation in the Global South capable of developing that information base, providing high quality longitudinal data not only about the lives of people in low and middle-income countries, but about the impact on those lives of development policies and programmes.

In the countries where HDSSs are located, births and deaths are not properly registered, and the traditional source of information for policy makers comes from health facilities whose data exclude those who do not use or have access to these health facilities. Thus the data that policy makers rely upon only provide a partial picture of a community's health system. HDSSs collect data from whole communities over extended periods of time, and these more accurately and comprehensively reflect health and population problems at least for the population contained within the HDSSs.

INDEPTH's Strategic Objectives

1.   Support and strengthen the ability of INDEPTH centres to conduct longitudinal health and demographic studies in defined populations

2.   Facilitate the translation of INDEPTH findings to maximise impact on policy and practice

Facilitate and support research capability strengthening relevant to INDEPTH activities

3.   Stimulate and co-ordinate multi-site applications to research funding bodies for specific research activities

Documenting INDEPTH's contribution to policy making

After a decade and half of existence since its establishment in 1998, the INDEPTH Network has witnessed the steady rise in output reflected in the publication of books, articles and journal collections. These address gaps ranging from unrecorded trends in mortality and cause of death to fine-grained descriptions of migration and its health consequences. INDEPTH and its growing network members have carried out a number of landmark research studies that have had major impacts on policy at various levels around the world.

"When the story of the elimination of malaria is told years to come, it will not be complete without mentioning the tremendous contribution of the INDEPTH Network" (AMMREN MAGAZINE 2013). This is in direct reference to all basic long-term information on malaria transmission and population impact in the different HDSS sites and also the INDEPTH Network Effectiveness and Safety Studies of anti-malarial drugs in Africa (INESS) which aims to enable African research centers to carry out large Phase IV trials. This will result in systematic, evidence-based reviews of the comparative effectiveness and safety of malaria drugs in many widely used drug classes, and apply the findings to inform public policy and related activities in local settings.

The critical contribution of INDEPTH to global health is however not yet sufficiently documented and just how results generated at INDEPTH member HDSS centres have shaped policy does not lend itself to easy determination.

Questions to be answered

INDEPTH now yearns to answer the questions:

1.   What policies have been instituted or changed at national and global levels because of the work that we do and the results that we produce?

2.   What processes have been involved in bringing about the policy change and which are the key determinants in these processes?

3.   What is the operational framework for documenting research utilisation at INDEPTH member centres?

Key strategies for the future

INDEPTH is currently pursuing the following axes to reach policy level:

1.   Raising the profile of HDSS centres among the national and international stakeholders and the policy community by synthesising and presenting results to governments, international agencies, donors and academics. The key instrument for this process is INDEPTHStats within the open access approach.

2.   Increase the awareness of potential data uses through strengthening its tagline, Better Health Systems for Better Health Policy, by refocusing on its Strategic Objective Two: "To facilitate the translation of INDEPTH findings to maximise impact on policy and practice". This in turn leads to a reposition of INDEPTH as a visible and relevant Network driving evidence-based decisions that are adaptable, replicable and transferrable throughout low- and middle-income countries through the

translation of its massive data into actionable information for policy making and programme development.

Initiatives to be pursued

In order to pursue the above strategies, the following initiatives have been enunciated:

1.   Template for documenting policy initiatives and tracking research utilisation

Develop a template for INDEPTH member centres to document the various policies and programmes at the local and global levels that have been influenced directly or indirectly by research results generated by the site. The template will be circulated to all centre leaders who are expected to designate officers to provide the requisite information regarding policies that have benefitted from results and inputs from the research centre.

Objective

To guide centre leaders to document standardised and systematically policies at the local and global levels that result from research evidence gathered from their centres.

2.   Organise a workshop to examine the strategy and determine a framework for INDEPTH's work

Convene a workshop to present results of the INDEPTH survey and examine the strategy and determine a framework for translating INDEPTH's research to maximise impact on policy and practice. A template will then be developed for INDEPTH's work in this field. Such a workshop should ideally take place in a country where a case study can be identified so as to benefit from the reactions of policy makers and structures involved in the utilisation process.

Objective

To examine the strategy and determine a framework for assessing the level of research utilisation by various actors (local organisations, national governments and international institutions) of results generated at INDEPTH member centres.

3.   Regular cycles of research utilisation case studies

Based on results submitted by the centres, INDEPTH will conduct two or more case studies of policies representing different intervention areas as documented by the HDSSs and document the various research utilisation processes leading to the policy using a proposed conceptual framework.

Objective

To propose a framework for conducting research utilisation studies of key policies informed by results generated by INDEPTH member centres.

4.   Policy Briefs

Regularly prepare policy briefs on research studies or interventions after some major results have been achieved with sufficient evidence to warrant being brought to scale and replicated.

Objective

To help policy makers in low- and middle-income countries understand scientific evidence by making a compelling case of how evidence from a scientific study could be to used improve policies and programmes.

5.   Dissemination at the INDEPTH Scientific Conference

Regularly convene a dissemination workshop as part of the biennial INDEPTH Scientific Conference. This will involve a multiplicity of stakeholders including, but not limited to, policy makers, political office holders, researchers health champions, academics.

Objective

To regularly share findings of relevant studies by INDEPTH member centres as part of the core activity of the Secretariat.

Role of the INDEPTH Secretariat

The INDEPTH Secretariat will identify partner institutions (public sector or civil society organizations) as potential collaborators in the work of translating research into policy. This is to provide institutional guidance on how to effectively facilitate the process of getting research work onto the policy makers' agenda and foster further utilisation.

The Secretariat will continuously monitor the various levels of research utilisation with evidence provided by studies conducted by INDEPTH member centres.

3.   THE MEETING

The meeting of the Working Group on Research to Policy took place at the Ampomaah Tourist Hotel in Accra, Ghana, from the 13th to 14th March 2014. The objectives of the meeting were;

> 1. To agree on and adopt the terms of reference for this working group

> 2. To identify the strategies for research to policy that have worked

> 3. To develop a work plan for the working group and the secretariat for enhancing research to policy and programmes

The meeting was attended by participants from the following centres; Ifakara (Tanzania), Kersa, Dabat, and Kilite, (All from Ethiopia), AAgincourt (South Africa), Navrongo (Ghana), and Vadu (India). Resource persons who made presentations were Mr. Charles Acquah from the Ghana Health Services and Miss Eunice Menka, from African Media and Malaria Research Network (AMMREN). The meeting was opened by the Executive Director, Prof. Osman Sankoh. He made the observation that policy dialogue had not received much attention and it was time to step up efforts at addressing that and also gave an assurance his full support for this group. All centres present made presentations on what studies had led to policy, what strategies had been adopted to ensure this and made recommendations to the Working Group as to how to carry this forward. The two resource persons made presentations on "Enhancing Research to Policy: The Policy Maker's Perspective." And "Enhancing Research to Policy: The Role of the Media."

Respectively. All these presentations were summarized and presented at the beginning of the second day. The meeting was then divided into 2 groups to work on the outputs of the meeting which are

1. The Term of Reference of the Working Group
2. Strategies for enhancing research to policy, and
3. A workplan for the working group.

4.   OUTPUTS OF THE MEETING

4.1   TERMS OF REFERENCE FOR THE WORKING GROUP

The group discussed and adopted the following as the terms of reference.

- Identify and document strategies for the enhancement of research to policy and programmes
- Identify, enhance and organize research to policy dialogues
    - In country
    - Inter-country
- Organize training for researchers on getting research into policy and programmes
- Assist centres to identify champions for research to policy exercise.
- Support for research to policy/programme activities
    - financial
    - technical
- Support development of communication in the various centres and involved them in the research-policy workshops
- Institute an award system for institutions/Centres that have put their research into policies.
- Improve visibility of the Secretariat and centres for better interaction and working relationship between them and policymakers.
- Support the Institutions/Centres to produce policy briefs, web articles and fact sheets.

4.2   THE ORGANISATION OF THE RESEARCH TO POLICY WORKING GROUP

The membership of the working group is as follows;

1. David Mbulumi (Ifakara HDSS, Tanzania)   Leader
2. Dr. James Akazili (Navrongo Research Centre, Ghana)   Coordinator (West Africa)
3. Nicolette Pingo (MRC/Wits Rural Public Health, Agincourt, SA)   Coordinator (Southern Africa)
4. Ms. Rutuja Patil (Vadu)   Coordinator (Asia)
5. Dr. Abebaw Gebeyehu (Dabat, Ethiopia)   Coordinator (East Africa)
6. Dr. Afework Mulugeta Bezabih (Kilite-Awlaelo, Ethiopia)   Member
7. Dr. Evelyn Sakeah (Navrongo Research Centre, Ghana)   Member
8. Dr. Nega Assefa (Kersa HDSS)   Member
9. Prof. Margaret Gyapong (Dodowa, Ghana)   Member
10. Sonia Mocumbi (Mohinca, Mozambique)   Member

4.3   SUMMARY OF STRATEGIES FOR MOVING RESEARCH TO POLICY

From all the presentations made, the strategies and recommendations for moving research to policy were summarized as follows;

Types of Policy Impacts

- National Policy Development and Amendments
- National improvements in programme design and implementation- incl: availability of treatment options in all health care facilities, and changes to health system, social sector services
- International Best Practice- scaled up interventions tested in HDSS Centres
- Local Level implementation of health, economic and social programs for community and individual capacity building as well as local government development
- Raise profile of particular issue for future policy intervention or strategic health planning initiative
- Quality data sharing

Factors that enable policy impact

- Networking with/ between key stakeholders:
  o Identifying and engaging key champions
  o Government actors as part of advisory board
  o Recruitment of staff with previous policymaking experience
  o Sustained relationships with relevant policymakers
  o Engagement of policy makers throughout research process
  o In country collaboration- Network of INDEPTH Centres in each country
  o Involving decision makers, donors in board of directors/trustees and scientific committee in the research strategy to generate interest
  o Personal contact with policymakers
- Capacitated dedicated research, dissemination and policy units in the centres

- Site Visits
  o VIP visits and Open days to show work of the centre

- Offering services simultaneously while research is conducted (advice, referrals, vaccinations etc.)

- Dissemination of Research Findings
  o Ensure quality data to encourage policy use
  o Simple, innovative clear synthesis of research with policy recommendations
  o Website
  o Policy briefs
  o Document Notes
  o Newsletters highlighting research findings
  o Knowledge Forums
  o Journal Articles

- o Provision of costing information of proposed interventions

- Focus on the local communities can generate important results
    - o Provide regular information for those living in the study site
    - o Building capacity of local community and local government actors

- Media Engagement-
    - o Build capacity for scientists to interact with the Media in productive manner and vis-versa
    - o Use of TV, radio and print media
    - o Use of appropriate laymen's language

Recommendations

- Collaboration
    - o Involvement of all policy actors in the process incl: donors, media, CBOs, NGOs, mass media and research organisations
    - o Identification of champions key
    - o Personal contact between researchers and policy makers is crucial (scientists who worked in government before)
    - o Important to involve street level bureaucrats- as they are frontline service providers
    - o International partners- donor partners, international agencies- as partners not merely funders

- Research Findings:
    - o Policy component of research thought through as part of study design
    - o Make DSS data accessible for those outside of centres
    - o Timing of key research results critical
    - o Understanding of pressured time constraints faced by policymakers

- Dissemination
    - o Reports have to be simplified, with main points highlighted- incl. policy relevance – SIMPLE LANGUAGE
    - o Consider the various perspectives when providing evidence for policy changes- cost effectiveness, implementation, cultural appropriateness, effects on health inequalities all of which are important for policy making
    - o Sensitive to political context while avoiding being too confrontational and alienating readers

- Media:
    - o Develop good working relationship with media stakeholders
    - o Use the media to convey results to policy makers
    - o Training for scientists engaging with the media- learn and use media advocacy techniques, transform data into easily understandable language and format, how to work with media
    - o Training for journalists in understanding scientific language and systems to be able to translate for general public; form a critical mass of journalists to disseminate findings

- Establish formal relationship with AMMREN (who are extending work beyond Malaria under AMMREN PLUS)

- Understand policy/political acumen
- Relative to Human Resources- Build in research to policy as KPIs for Scientists together with grant generation- in centres
- Establish dedicated knowledge hubs within line ministries

4.4 WORKPLAN FOR WORKING GROUP

Problem: - Poor utilization of evidence generated from the research work in the HDSS site

Goal: - To bridge the gap in the use of research information to inform policy and programs

Strategies

1.   Networking within ourselves, with the community, and with other stakeholders

2.   Generating credible and quality evidence for policy makers

3.   Dissemination of research findings (capacitated, dedicated research dissemination office (Resource center))

4.   Support for research to policy activities (Financial and technical support)

5.   Advocacy (media, champions, NGOs, etc.)

6.   Developing M & E framework (Centre level)

7.   Follow up of policy and its implementation

The detailed workplan can be found in the attached excel worksheet.

5. MONITORING AND EVALUATION

Indicators for Assessment of Research to policy working Group

		1	2	3	4	5
1	Does the centre has dedicated communication personnel					
2	Number of publications using HDSS data					
3	Deliverables like annual reports, website updates, newletters, flyers etc.					
4	Number of HDSS focused Policy Briefs and fact sheets produced					
5	Use of communication media including social media					
6	Community Interaction					
7	General stakeholder engagement (Ex: Knowledge forum, Health Calendars)					
8	Number of policies/programs influences by studies from the centre (Evidences utilized from the centres)					
9	Capacity built /strengthened by the centres					
10	Level of media engagement (Stories, documentaries)					

References

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4.	Walt G. &Gilson L. (1994): Reforming the health sector in developing countries: the central role of policy analysis. Health Policy Plan. 9(4):353-70