



Ten Lessons Learned About Supporting Evidence-Informed Policymaking in Canada

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Ten Lessons Learned (and Five Key ‘Methods’)

1. Be clear about the goal
2. **Learn and use a systematic approach to analyzing priority issues**
→ **Workshops for policymakers**
3. Look for the right types of research evidence
4. **Look in the right places for research evidence** → **HSE & SSE**
5. **Package the best available evidence in right format / on right timeline** → **Rapid syntheses**
6. Use research evidence as the jumping-off point for **citizen deliberations** → **Citizen panels**
7. Use research evidence and citizen values as the jumping-off point for **stakeholder deliberations** → **Stakeholder dialogues informed by an evidence brief and citizen values (from citizen panels)**
8. Use the resulting story – evidence, values & insights – to drive change
9. Make it the norm to use these types of inputs to drive change
10. Evaluate innovations in 2-9 and make adjustments as needed



1. Be Clear About the Goal

- Evidence-informed policymaking means using the **best available** 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 or program development)
 - Ensuring that the chosen option makes an optimal impact at acceptable cost (policy or program **implementation**)
 - Monitoring implementation and **evaluating** impact
- ... alongside the institutional constraints, interest-group pressure, citizen values and other sources of ideas that influence the decision-making process (i.e., **alongside political forces**)

Top part is policy analysis, bottom part is political analysis, and middle part (options) draws on systems analysis (so we need skills in **policy, political and systems analysis**, as well as in **evidence synthesis and stakeholder engagement**)



2. Learn and Use a Systematic Approach to Analyzing Priority Issues → Workshops for Policymakers

- 1) Prioritizing **problems** and understanding their causes (agenda setting)
 - ❑ Risk factor or condition
 - ❑ Programs, services or products
 - ❑ Governance, financial and delivery arrangements
 - ❑ Implementation of agreed courses of action
- 2) Deciding which **option** to pursue (policy or program development)
 - ❑ Add, drop or change programs, services or products
 - ❑ Change governance, financial and delivery arrangements
- 3) Ensuring the chosen option makes an optimal impact at acceptable cost (policy or program **implementation**)
 - ❑ Prioritize & diagnose and design & deliver an implementation strategy at the level of clients/citizens, providers, organizations and/or the system
- 4) Monitoring implementation and **evaluating** impact (bringing us back to 1)



3. Look for the Right Types of Research Evidence

- 1) Prioritizing **problems** and understanding their causes (agenda setting)
 - ❑ Comparisons – administrative database studies or community surveys
 - ❑ Framing – qualitative studies
- 2) Deciding which **option** to pursue (policy or program development)
 - ❑ Benefits – effectiveness studies
 - ❑ Harms – effectiveness or observational studies
 - ❑ Cost-effectiveness – cost-effectiveness evaluations
 - ❑ Adaptations – qualitative (process) evaluations
 - ❑ Stakeholders' views and experiences – qualitative (acceptability) studies
- 3) Ensuring the chosen option makes an optimal impact at acceptable cost (policy or program **implementation**)
 - ❑ Barriers and facilitators – qualitative studies
 - ❑ Benefits, harms, cost-effectiveness, etc. of implementation strategies
- 4) Monitoring implementation and **evaluating** impact (bringing us back to 1)

... **in 1-4, starting with systematic reviews**, which use systematic & explicit methods to identify, select & appraise studies, and to synthesize data



4. Look in the Right Places (vs Google) for Research Evidence → HSE & SSE

- One-stop shops for pre-appraised, synthesized research evidence
 - ACCESSSS – High-quality, published studies and systematic reviews about **clinical** programs and services and about prescription drugs
 - Health Evidence – Quality-rated, published systematic reviews of the effects of **public health** programs and services
 - Health Systems Evidence – Quality-rated systematic reviews (and economic evaluations) about how to strengthen **health systems** and get the right programs, services and drugs to those who need them
 - Social Systems Evidence - Quality-rated systematic reviews (and economic evaluations) about **non-health programs, services and products**, and about how to strengthen **social systems** and get the right programs, services and products to those who need them

Citizenship
 Children & youth services*
 Climate action**
 Community & social services
 Consumer protection

Culture & gender
 Economic dev & growth
 Education
 Employment
 Energy**

Environmental protection**
 Financial protection
 Food safety & security
 Government services
 Housing

Infrastructure
 Natural resources**
 Public safety & justice
 Recreation
 Transportation



5. Package the *Best Available Evidence in the Right Format / Right Timeline → Rapid Syntheses

- User-friendly summaries of the research (linked to from HSE & SSE)
- **Rapid syntheses** about a problem, option and/or implementation considerations in **3, 10, 30, 60 or 90 business days**
- Evidence briefs (that take an equity lens appropriate to the issue)
 - Health & social system context and political system context
 - Problem and its causes
 - Three options (or three elements of a potentially comprehensive approach) for addressing the problems
 - Key implementation considerations
- Citizen briefs that do the same thing but for citizens

* Best available = highest quality, most locally applicable



6. Use Research Evidence as the Jumping-Off Point for Citizen Deliberations → Citizen Panels

Features of citizen panels	
Address a priority issue	*Convene a diverse group
Discuss problem features	Engage a facilitator
Discuss options	Follow Chatham House rule
Discuss implementation	Do not aim for consensus
Informed by a citizen brief	*Focus on values



7. Use Research Evidence and Citizen Values as the Jumping-Off Point for Stakeholder Deliberations → Stakeholder Dialogues

Features of stakeholder dialogues	
Address a priority issue	*Informed by discussion of all factors
Discuss problem features	*Convene involved and affected
Discuss options	Aim for fair representation
Discuss implementation	Engage a facilitator
*Discuss who could do what	Follow Chatham House rule
*Informed by evidence brief	Do not aim for consensus



7. Use Research Evidence and Citizen Values as the Jumping-Off Point for Stakeholder Deliberations (2) → Stakeholder Dialogues

- Example of a 7-week timeline (our fastest ever)
 - Call from an Associate Deputy Minister (second from top)
 - Steering Committee
 - Terms of reference for the evidence brief
 - Key informant interviews with 20+ people
 - Evidence brief
 - Stakeholder dialogue
 - Dialogue summary
 - Personalized briefing
 - Cabinet decision
- ← Adding a citizen brief and three panels would add another 3-4 weeks



8. Use the Resulting Story – Evidence, Values and Insights – to Drive Change

- Combination of research evidence, citizen values, and stakeholders' insights makes for a compelling story that can drive change at multiple levels
 - Policymakers (e.g., cabinet, prime minister/premier, ministers, ministry staff, regulatory body staff), who need to be convinced there's a compelling **problem**, workable **policy** option, and viable **politics**
 - Service commissioners (e.g., district authorities)
 - Organizational leaders
 - Practitioner and service provider associations
 - Client and citizen groups



9. Make it the Norm to Use These Types of Inputs to Drive Change

- Strong messages from all levels that research evidence is a key input to the policymaking process (as are citizen values and stakeholder insights)
- Performance criteria for staff related to their use of research evidence
- Research evidence checklist that must be completed before briefing materials are submitted to the minister or to cabinet
- Expert review groups required to draw on research evidence, involve a methodologist & citizens, and link their recommendations to evidence
- Journalists that closely examine statements



10. Evaluate Innovations and Make Adjustments As Needed

- We can point to many examples of direct impacts on the policy process
 - E.g., seven weeks from the ‘call’ to a cabinet decision
- Reading an evidence brief and participating in a stakeholder dialogue lead to strong intentions to act
- Formative evaluations of citizen/evidence briefs and dialogues/panels find very high ratings of all design features
- We see a virtuous cycle of more evidence-informed policymaking leading to
 - More evidence-informed interest-group pressure
 - More policy-relevant research



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Three Directions We're Moving In Now:

1) Engaging Citizens

- Learn how
 - **Workshops** for health- and social-system leaders (and now **for citizens**) in how to find & use evidence and how to understand & push for change in systems [120+]
 - Book (and short online course) on how the health system works
- Find evidence
 - HSE [8200+ systematic reviews] & SSE [1050+ reviews]
 - **Citizen-targeted McMaster Optimal Aging Portal** (blog posts, evidence summaries, patient decision aids, web resource ratings, & 'hitting the headlines')
 - Rapid syntheses in 3, 10, 30, 60 or 90 business days [40+ rapid syntheses]
 - **Citizen briefs** [25+] and evidence briefs [55+]
- Spark insights
 - **Citizen panels** [45+] and stakeholder dialogues [55+] (full-serve)
- Embed supports
- Evaluate innovations
 - Impact Lab [100+ studies]



Three Directions We're Moving In Now:

2) Joining Up 'Ecosystems' of Policy-Supporting Orgs

Groups / organizations	Focus	
	Phase(s) of the policymaking process	Programs, services & products or health- & social-system arrangements
Data analytics	Clarifying problems & monitoring implementation	Programs, services and products
Guidelines*	Selecting options (practice)	Programs, services and products
Technology assessments*	Selecting options (system)	Programs, services and products
Modelling	Selecting options (reach, needs)	All
Implementation research (behavioural insights)	Identifying implementation considerations (or developing implementation plans)	Programs, services and products
Evidence-informed policymaking supports (e.g., EVIPNet)*	Clarifying problems, selecting options, and identifying implementation considerations	Health- & social-system arrangements
Evaluation	Monitoring implementation & evaluating impact	Programs, services and products

*Similarly rely on existing evidence (versus it de novo)



Three Directions We're Moving In Now:

3) Using a 'Rapid-Learning Systems' Lens

- A rapid-learning system is the combination of a health &/or social system (e.g., child & family services) and a research system that at all levels in the system – self-management/care, provider encounter, program, organization, district/region and government – and in all parts of the system – sectors, conditions / problems, treatments / interventions, and populations – is
 - ❑ Anchored on clients' needs, perspectives and aspirations (1)
 - ❑ Driven by timely data (2) and evidence (3)
 - ❑ Supported by appropriate decision supports (4) and aligned governance, financial and delivery arrangements (5)
 - ❑ Enabled with a culture of (6) and competencies for (7) rapid learning and improvement



Any Questions?