

Policy Brief 2

Bridging the gap between health researchers and policy-makers in the Eastern Mediterranean Region

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About ... RESCAP-MED

RESCAP-MED aims to build research capacity for public health in countries around the eastern and southern Mediterranean. Its purpose is to develop research skills for the challenge of non-communicable diseases (NCDs) and their social determinants. RESCAP-MED links 11 partners. Six of these are academic institutions around the Mediterranean: Jordan, Lebanon, Palestine, Syria, Tunisia and Turkey. Four are academic institutions within the EU (in the UK and Ireland) and one is the WHO East Mediterranean Regional Office (EMRO). RESCAP-MED is funded by the European Commission for three years (2012-2014).

RESCAP-MED aims to create a Mediterranean regional network for NCD researchers, in five key public health disciplines:



Executive summary

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This policy brief highlights the gap between research and health policy formulation in EMR, and suggests different actions to bridge the gap between researchers and policy makers. Challenges that hinder the impact of health research in the EMR are many and include insufficient financial and institutional resources, lack of direction of funds towards priority health problems, researchers' poor comprehension of policy process, and inadequate capacity among policy makers.

The following actions are recommended to enhance the utilization of evidence in policy making and to bridge the gap between researchers and policy makers:

- Improving packaging of evidence for easy use by policymakers, enhancing the relevance of research results and writing clear policy briefs.
- Strengthening the capacity of policymakers to access, understand and utilize research evidence through a series of workshops, technical briefings and short courses.
- Creating formal processes to facilitate dialogue through joint workshops between policy-makers and researchers, a regular forum for interactions and interactive conferences.
- Increasing interaction and communication between researchers and policymakers in the form of interpersonal relationships and social networks to improve the use of evidence in policymaking.
- Establishing incentives for researchers and policy makers to encourage or even oblige policymakers to use evidence in policymaking.
- Coordinating the efforts of all stakeholders in local and regional scientific journals to promote local journals as windows to the research in the region.
- Increasing funding in knowledge transfer activities and in priority health research in the region.



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RESCAP-MED POLICY BRIEF 2

This policy brief is based on the findings of the RESCAP-MED report "Mapping health institutions engaged in health-related research in five partner countries (Jordan, Lebanon, Palestine, Tunisia and Turkey)"(2012), RESCAP-MED workshop "The Health Policy Evaluation Workshop - Amman/Jordan 3-6 June 2013", and the relevant literature review in the eastern Mediterranean region (EMR).



This policy brief addresses the utilization of scientific evidence in policy-making in the eastern

Mediterranean countries, highlights the gap between research and health policy formulation, and suggests different actions and strategies to bridge the gap between health researches and policy makers in the EMR.

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Introduction

Well-informed policies that make use of the best health policy and health research evidence available are essential to improve health conditions and access to health care. The role of research in improving health systems and healthcare delivery is becoming increasingly recognized by policymakers and researchers worldwide. Despite global calls for promoting research and its application ^{1,2}, the gap between health research evidence and the use of evidence in policymaking and practice continues to exist in the EMR^{3,4}. In its recent strategic directions for research for health, WHO Eastern Mediterranean Regional Office emphasized the forceful implementation and expansion of research for health as a fundamental tool for health development and informing health policy changes¹. However, the divide between research and policy is substantial in many countries in the region.

The utilization of scientific evidence in policymaking in EMR

Studies in the EMR reported a low level of engagement of researchers in knowledge transfer activities and showed that such activities are not frequently undertaken by policymakers and researchers in EMR countries^{5,6}. A study among 238 researchers in 12 countries in the EMR⁶ indicated that research evidence about high priority policy issues was rarely made available to policymakers, interaction between policymakers and researchers was limited and mostly informal, and that policymakers rarely identified or created

places for utilizing research evidence in decisionmaking (Box 1).

Box 1. Use of health systems and policy research evidence in the health policymaking in eastern Mediterranean countries: views and practices of researchers⁶.

A total of 238 researchers who published health systems and policy relevant research in 12 countries in the EMR (Bahrain, Egypt, Iran, Jordan, Lebanon, Libya, Morocco, Oman, Palestine, Sudan, Syria, and Yemen) were surveyed. Two thirds (67.2%) of researchers indicated transferring results to other researchers and 40.5% indicated transferring results to policymakers in the government. Less than onequarter stated that they produced policy briefs (14.5%), disseminated messages that specified possible actions (24.4%), interacted with policymakers and stakeholders in priority-setting (16%), and involved them in their research (19.8%). About two thirds of researchers reported that insufficient policy dialogue opportunities and collaboration between researchers and policymakers and stakeholders hindered the use of evidence. Other factors that hindered the use of evidence were reported and included constraints to implementation (66%), non-receptive policy environment (61.3%), and politically sensitive findings (57.7%). Factors that increase researchers' engagement in KTE activities in the region were associated with involving policymakers and stakeholders at various stages such as priority-setting exercises and provision of technical assistance.

Challenges hindering the impact of health research in the EMR

During the "Health Policy Evaluation Workshop-Amman/Jordan 3-6 June 2013", 29 participants discussed the national health policy analysis framework and presented country specific cases of health policy situation from selected EM countries. The attendants including 25 researchers and 4 national health administrators addressed the gap between research and health policy formulation in the region. They identified many challenges hindering the impact of health research in the EMR (Box 2) including insufficient financial and institutional resources, lack of direction of funds towards priority health problems, researchers' poor comprehension of policy process, and inadequate capacity among policy makers.

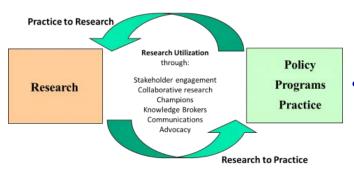
Box 2. Challenges hindering the impact of health research in the EMR

- Insufficient financial and institutional resources, lack of direction of funds towards priority health problems, and lack of supportive research environments.
- Researchers' poor comprehension of policy process and unrealistic recommendations.
- Inadequate supply of, and access to, research by policy makers and ineffective communication of research by researchers.
- Inadequate capacity among policy makers, lack of appreciation of research by policy-makers, and low political commitment to research.
- Fragmented and weak management, collaboration and coordination of research for health within and between countries and poor identification of priorities in the region.
- Insufficient networking and partnerships among the various sectors to conduct and utilize research for health.
- Bureaucratization of policy making, centralized decision making and a policy making culture that gives little importance to evidence based research.

Bridging the gap between researchers and policy-makers: Actions and strategies

There are many actions that can be taken by policy-makers and health researchers to enhance the use of evidence in the policymaking process (Figure 1).

Figure 1. Research utilization process



Policy decision-makers could actively interact with health researchers; communicate and suggest research areas for policy implementation and identify points where evidence is missing.

Researchers could reach out to policy-makers and engage them early in the question-forming process, get involved in policy-making processes, communicate with policy-makers better and more frequently, demonstrate the utility of research results, and ask policy-makers for questions that need to be answered.

The following actions and strategies are recommended to enhance the utilization of evidence in policy making and to bridge the gap between researchers and policy-makers:

 Improving packaging of evidence for easy use by policy-makers. Enhancing the relevance of research results and writing clear policy briefs will allow policy-makers to use the evidence and make informed decisions.

- Strengthening the capacity of policymakers to access, understand and utilize research evidence and training them in fostering a more positive attitude towards the use of research findings. Improving capacity can take several forms: a series of workshops, technical briefings, short courses or even mini-rotations of policy-makers in research institutions.
- dialogue where policy-makers can discuss research results with researchers and build stronger relationships between them. This may include joint workshops between policy-makers and researchers, a regular forum for interactions and interactive conferences.
- Increasing interaction and communication between researchers and policymakers in the form of interpersonal relationships to improving the use of evidence in policymaking. The development of social networks between policy-makers and researchers may be an important process not only to convey evidence but also to develop trust.
 - Establishing incentives for researchers and policy makers: Establishing incentives in the form of legislations to encourage or even oblige policymakers to use evidence in policymaking. Non-financial incentives to recognize the role of research in policy, encourage researchers to work with real life

- problems faced by the national health system and recognize the contribution of evidence in decisions are important for sustainability.
- Coordinating the efforts of all stakeholders in local and regional scientific journals to promote local journals as windows to the research in the region.

Other actions include:

- Establishment of health policy units with researchers.
- Enhancing human and financial resources of parliamentary committees may facilitate the policy-makers' access to evidence.
- Increasing funding in knowledge transfer activities and in priority health research in the region.
- o Funding bodies can also play a major role in enhancing research use by requiring that a detailed knowledge transfer component be present as part of the research process.

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