

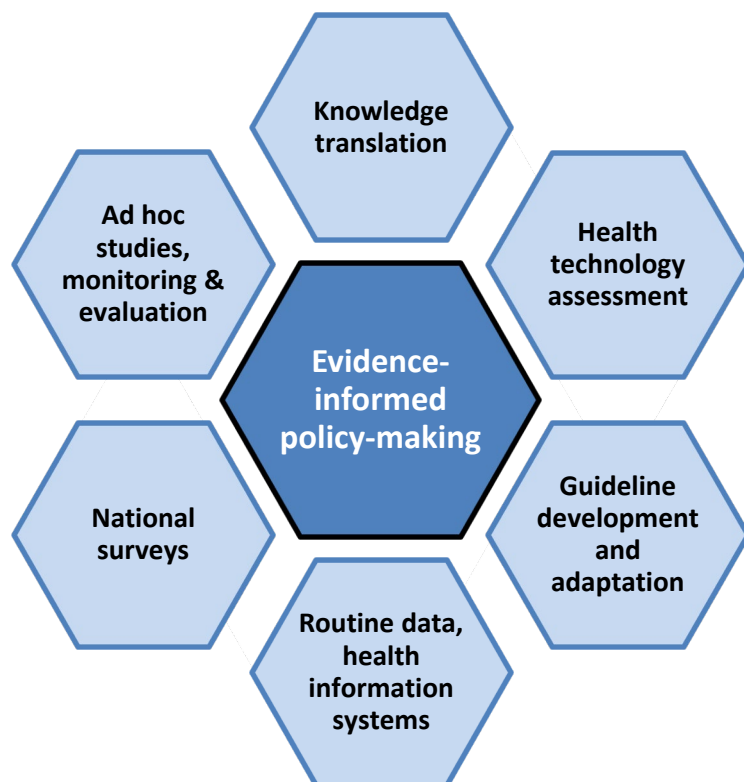
Framework for action to improve national institutional capacity for the use of evidence in health policy-making in the Eastern Mediterranean Region

Country categories	Country action	Support from WHO and other development partners
A All countries	<ul style="list-style-type: none"> Establish mechanisms to regulate and manage conflicts of interests in policy-making Enhance the capacity of the ministry of health planning department for critical appraisal of knowledge products and evidence synthesis reports (i.e. policy briefs, health technology assessments, guidelines and systematic reviews) Ensure access of the ministry of health to sources of research evidence for health (e.g. through the WHO HINARI programme) Improve cause of death reports and national observatory for national health indicators including surveillance reports 	<ul style="list-style-type: none"> Provide technical support for selection of appropriate national institutional methods for evidence-informed policy-making Provide technical support for key national capacity-building for evidence-informed policy-making Support the development of policy briefs of regional importance Support the adaptation of global WHO guidelines to the regional context for high priority topics Support the development of multicountry or regional guidelines for high priority topics Establish a regional network of institutions that actively supports evidence-informed policy-making at the national level
B Countries with limited academic resources	<p>In addition to A:</p> <ul style="list-style-type: none"> Ensure a minimum capacity (epidemiology and cost analysis) for development of policy reports Focus on adaptation of high priority evidence synthesis reports to the national setting Include resource funds for evidence-to-policy activities in donor requests to enhance national capacity 	<p>In addition to A:</p> <ul style="list-style-type: none"> Support the development of policy briefs and adaptation of WHO guidelines for national priorities
C Countries affected by protracted or acute emergencies	<p>In addition to A:</p> <ul style="list-style-type: none"> Ensure a minimum capacity (epidemiology and cost analysis) for development of policy reports Include resource funds for evidence-to-policy activities in donor requests to enhance national capacity 	<p>In addition to A and B:</p> <ul style="list-style-type: none"> Support rapid processes for adaptation or development of policy synthesis products for the country's needs
D Countries with large academic capacity/resources and small populations	<p>In addition to A:</p> <ul style="list-style-type: none"> Establish programmes for national health technology assessments and guideline adaptation/development in collaboration with academic institutions Establish formalized evidence-to-policy processes, including for developing policy briefs and conducting policy dialogues Establish an evidence-to-policy team within the ministry of health including all key areas of expertise Develop plans for mid-term (e.g. 10-year) national household surveys Establish an effective cancer registry and pharmacovigilance programme 	As in A
E Countries with large academic capacity/resources and large populations	<p>In addition to A and D:</p> <ul style="list-style-type: none"> Establish institutes affiliated with the ministry of health (e.g. NIPH; NIHR; NICE) tasked with commissioning, developing, appraising or adapting national guidelines, health technology assessments and policy briefs Enhance the capacity of academic institutions to cover all areas needed for evidence-to-policy processes 	As in A



NIPH: National Institute for Public Health; NIHR: National Institute for Health Research; NICE: National Institute of Health and Clinical Excellence

Integrated multi-concept approach to evidence-informed policy-making for health



Sources of evidence and knowledge products to address policy questions

Main policy question	Usual sources of evidence	Main knowledge products that address the policy question
What are the main priority issues/problems for decision-making?	Household and facility surveys Surveillance studies Routine health information Cause of death and burden of disease studies	Policy briefs Data fact sheets Health information observatories
What can be done (potential policy interventions and their safety and effectiveness)?	Systematic reviews of interventional studies Interventional studies Surveillance studies (for safety)	Clinical or public health guidelines Health technology assessment studies Policy briefs
Are the policy options cost-effective?	Systematic reviews of cost-effectiveness studies Economic modelling and cost analyses	Health technology assessment studies Clinical or public health guidelines Policy briefs
How feasible are the policy options (sustainability, affordability, acceptability and implementation strategies)?	Systematic reviews of qualitative studies Economic modelling and cost analyses Qualitative studies Process evaluations User and provider surveys	Policy briefs Policy dialogue Health technology assessment studies Clinical or public health guidelines