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Resolution

**REGIONAL COMMITTEE FOR THE
EASTERN MEDITERRANEAN**

**EM/RC66/R.5
October 2019**

**Sixty-sixth Session
Agenda item 3(d)**

Developing national institutional capacity for evidence-informed policy-making for health

The Regional Committee,

Having reviewed the technical paper on developing national institutional capacity for evidence-informed policy-making for health;¹

Recalling resolutions WHA58.34 on the Ministerial Summit on Health Research, EM/RC55/R.7 on bridging the gap between health researchers and policy-makers, EM/RC58/R.3 on strategic directions for scaling up research for health, EM/RC60/R.8 on monitoring health situation, trends and health system performance, and EM/RC64/R.1 which inter alia urged Member States to build national capacity to use evidence from health research in national policy-making for health;

Recognizing the sustained efforts of Member States to enhance research capacity and improve national health data systems;

Emphasizing the critical role of evidence-informed policy-making for health in achieving health-related Sustainable Development Goals;

Recognizing the gaps in national institutional capacities to facilitate and establish evidence-informed policy-making processes for health;

Emphasizing that evidence-informed policy-making is a necessity for all countries to ensure that resources result in the best possible health outcomes;

1. **ENDORSES** the framework for improving national institutional capacity for evidence-informed policy-making for health in the Eastern Mediterranean Region, 2020–2024 (which is annexed to this resolution);
2. **URGES** Member States to:
 - 2.1 Scale up initiatives to foster evidence-informed policy-making for health, focusing on an integrated multiconcept approach to improving national capacity;

¹ EM/RC66/6.

- 2.2 Establish national mechanisms for the systematic consideration of evidence (for example, through policy briefs and policy dialogue) in making national health policies;
 - 2.3 Establish national programmes to adapt and/or develop evidence-based public health and clinical practice guidelines on national priority issues;
 - 2.4 Ensure the systematic use of health technology assessment reports in policy-making;
 - 2.5 Enlist academic institutions in national capacity-building for evidence-informed policy-making;
 - 2.6 Establish national observatories for health to promote the use of valid national data in evidence-informed policy-making;
 - 2.7 Ensure adherence to research ethics and establish mechanisms to manage conflicts of interest in policy-making;
- 3. CALLS ON** Member States, especially those with successful institutional mechanisms for evidence-informed policy-making, to share insights and experiences in support of regional and national efforts to implement the framework;
- 4. REQUESTS** the Regional Director to:
- 4.1 Develop an action plan for the implementation of the framework in consultation with Member States;
 - 4.2 Support Member States in strengthening their national institutional capacity for the use of evidence in policy-making for health;
 - 4.3 Support development of the technical capacity of Member States to adapt or develop guidelines, systematic reviews, health technology assessment studies and policy briefs;
 - 4.4 Develop policy briefs on topics of regional importance, and adapt WHO guidelines to the regional context for areas of high priority;
 - 4.5 Support the development of rapid processes for the adaptation or development of policy synthesis products in response to the priority needs of those Member States affected by emergency situations;
 - 4.6 Strengthen the role of existing research networks and WHO collaborating centres and make plans to establish a regional network of institutions to actively support evidence-informed policy-making at national level;
 - 4.7 Enhance the regional observatory for health, and support Member States in establishing national observatories for health;
 - 4.8 Report on progress made in implementing the framework to the 68th and 70th sessions of the Regional Committee, and present a final report to the 72nd session in 2025.

Annex 1. 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 	<p>As in A</p>
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 	<p>As in A</p>

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