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EMBEDDING EVIDENCE-INFORMED DECISION-MAKING INTO POLICIES THAT BENEFIT HEALTH

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BACKGROUND
It is well recognised that evidence-informed decision-making (EIDM) provides the basis for sound policies that stand the test of time. Evidence-informed decision-making refers to the use of evidence to inform the decisions [1, 2] of policymakers, researchers and practitioners. Policy-makers who use EIDM effectively access the best available evidence, critically analyse that evidence and then integrate or adapt it to inform policy-making decisions. However, there are three other key elements that predict the use of evidence to inform policy.

First, the onus is on academic researchers to ensure that evidence is both relevant and readily accessible. Relevance refers to fit between the research and organisational needs. In terms of policy, research that is considered to be part of a wider policy agenda is more likely to be used.[3] Relevance can be enhanced by researchers and end-users working collaboratively to: i) develop research agendas, [4] and ii) coordinate timing of outputs that are key to policy development timelines.[4] Accessibility of research findings is determined by a number of factors, including the presentation of results: i) in a timely manner (as soon as possible after research completion), ii) in a forum that can be readily accessed (e.g. open access journals), and iii) in a way that is easily understood (e.g. reducing research jargon and using the language of policy-makers).

Second, research is more likely to be utilised and applied if there is an organisational culture that supports evidence-informed decision-making.[5] Organisations that support EIDM have structures and processes in place to not only to support skill development, but also to: i) provide resources for personnel to use these skills to inform a policy, and ii) recognise and reward these activities. Many organisations initiate and/or support staff to attend workshops to develop their EIDM skills. Infrastructure support is seen as an important precursor for the incorporation of evidence into decision making. [6, 7] Incorporation or embedding of EIDM skills requires the establishment on structures and processes to support EIDM. It also requires the active promotion of an organisational culture that values the use of best available evidence in policy-making.[7] This valuing of EIDM includes recognition and rewarding of evidence-informed decision-making in policy development. One way of creating an organisational culture that sees EIDM as fundamental to policy development would be to specify EIDM skills in position descriptions and performance indicators. Other strategies to integrate EIDM into organisational culture include the provision of resources for accessing and utilising evidence. Resources include: i) allowing reasonable time for accessing and utilising evidence, for example longer lead-in periods for the development of policies, ii) providing facilities that allow ready access to relevant evidence, for example internet access, iii) providing technical support to enhance EIDM skills and/or complete part of the process, for example, undertake a critical review of the evidence, and iv) build a critical mass of staff members who can support the use of EIDM in policy development.[8]

The third element that determines the use of EIDM to inform policy is the quality of links between researchers and users.[9] The use of knowledge exchange processes to build this researcher-policy-maker relationship will be the subject of a future paper.

In sum, EIDM in the development of policy in
an organisation requires a critical mass of people who have the skills to acquire, assess and adapt evidence to inform policy, the availability of timely, relevant evidence in language that resonates for policy-makers, an organisational culture where there are clear structures and processes in place to support EIDM, and that recognises and rewards the use of EIDM, and strong researcher-end-user relationships.

The organisations involved in the TROPIC project in Fiji (see Waqa et al. this volume), including the Ministry of Health, are now well-placed to build on: i) excellent relationships with researchers, and ii) the growing number of personnel who have acquired EIDM skills through the TROPIC project. The next challenge is to continue to develop a culture where there is a solid organisational infrastructure to support evidence-informed decision-making that informs all policies that have potential health benefits.

REFERENCES