
8 Facilitating better linkages between evidence and health policy: the role of the Cochrane Collaboration

Sally Green and Miranda Cumpston

Australasian Cochrane Centre

Abstract

Partly because of the large volume of scientific research available to today's policy makers, using research evidence in shaping policy is still difficult. The Cochrane Collaboration aims to increase the use of evidence in health care decisions by overcoming the barriers to research use, such as lack of contact with researchers or the need for skills in critical appraisal. The Cochrane Collaboration publishes systematic reviews of reliable research in The Cochrane Library, and is conducting research into strategies to effectively support policy makers in using high quality research evidence.

8.1 Introduction

There is a gap between today's scientific advances and their application: between what we know and what is actually being done. (Lee Jong-wook, former Director-General, World Health Organization 2004)

This quote sums up the challenge of the work of the Cochrane Collaboration. This paper, and the presentation that accompanies it:

- introduces the Cochrane Collaboration, including the purpose and scope of Cochrane systematic reviews
- outlines strategies to support the use of research evidence in policy-making environments, including an overview of the Australasian Cochrane Centre's Policy Liaison Initiative.

8.2 What is a Cochrane systematic review?

A systematic review is a scientific tool used to summarise, appraise and communicate the results and implications of otherwise unmanageable quantities of research. Systematic reviews bring together all the separately conducted studies answering a particular healthcare question, sometimes with conflicting findings, and synthesise the results. Systematic reviews are an efficient way to access all of the available research to answer a question. In this way, systematic reviews recognise that science is cumulative and all research should be viewed in the context of what has been done before, aiming for decisions based on a body of evidence, rather than a single piece of research.

The Cochrane Collaboration is an international, not-for-profit organisation that aims to help people make well-informed decisions about health care by preparing, maintaining and promoting the accessibility of systematic reviews of the effects of healthcare interventions (www.cochrane.org). The Cochrane Collaboration looks at health decision making at the policy, individual practitioner and consumer levels, and endeavours to provide information that is evidence-based, easily accessible, internationally developed, quality controlled and useful. Cochrane reviews are updated every two to three years. The questions addressed by Cochrane reviews are predominantly those of clinical intervention, although we have many reviews relevant to effective practice and organisation of health care, public health and consumers and communication, as well as a new initiative for systematic reviews of diagnostic test accuracy.

Cochrane reviews are published electronically in *The Cochrane Library* (www.thecochranelibrary.com). In Australia we are privileged to have a national subscription to *The Cochrane Library*, funded by the Department of Health and Ageing.

While Cochrane reviews are predominantly of randomised control trials, there are several examples where Cochrane reviews extend beyond randomised control trials depending on the question (for example, reviews to inform the organisation of health systems or public health interventions are likely to synthesise research other than randomised controlled trials).

The Cochrane Collaboration has a sister organisation, the Campbell Collaboration, which is undertaking similar work preparing and maintaining systematic reviews relevant to social policy and education. While more recently established than Cochrane, Campbell is publishing an increasing number of reviews, which are available at its website (www.campbellcollaboration.org).

8.3 How do we strengthen the uptake of evidence from research into health policy?

There are barriers to using research evidence in both practice and policy environments, resulting in a ‘gap’ between the large amount of information available, much of which is based on very high quality scientific research, and how much of that information makes its way into policy and practice. The most frequently identified barriers to the use of research evidence are lack of time; lack of access to research; lack of skills to find, appraise and apply research; and lack of capacity within organisations to support research use. The Cochrane Collaboration aims to overcome these barriers by publishing systematic reviews of all available reliable research evaluating healthcare interventions in an accessible format.

In addition to synthesising and disseminating evidence, The Cochrane Collaboration is increasingly working to close the gap by complementing our reviews with strategies for evidence-based implementation. There is a research agenda evolving in this area to identify and evaluate effective strategies to integrate high-quality research evidence into health policy, fostering communication and exchange between researcher and policy makers, yielding better policy decisions and ultimately improved health outcomes.

There are many different models describing the complexity of health-care decision making and the role of research in supporting evidence-based policy. Figure 8.1 details one of those models, highlighting the pivotal importance of research, balanced with the many other factors at play when policy is developed. Within that complexity, however, policy makers have identified factors that can facilitate their use of evidence.

A systematic review of different strategies to increase the uptake of research-based information into health policy (Innvær et al. 2002) includes 24 interview-based studies with a total sample of 2000 policy makers around the world. The greatest barriers to research use were found to be lack of personal contact and trust between researchers and policy agencies; that research is not always timely or relevant to policy decisions; power and budget struggles; poor quality of available research; and political instability.

Another study has investigated factors that predict the use of systematic reviews by health policy makers. Key factors included demonstrating a culture that values the use of research for decision making within the organisation; provision of access to online database searching; and training in critical appraisal for teams. Also, if the user believed that systematic reviews reduce the time required to find and use evidence, help to overcome lack of critical appraisal skills, or were easy to use, the use of reviews increased (Dobbins et al. 2007).

Figure 8.1 A healthcare decision-making model
Factors influencing the role of research in policy decision-making



Source: Davies (2005).

A number of policy organisations internationally are now beginning to implement strategies to address these identified factors and remove barriers to the use of evidence in policy. Those strategies aim to enable policy makers to access and use evidence not only during large-scale evaluations and for new policy proposals, but as a routine part of their daily activities.

8.4 A case study: the Policy Liaison Initiative

An example of facilitating the use of evidence in policy making is the Australasian Cochrane Centre's Policy Liaison Initiative. This work, funded by the Department of Health and Ageing, is designed to address policy makers' needs and to help make Cochrane reviews more accessible to the policy-making environment.

The initiative was established in 2004, incorporating the available evidence on effective interventions of this kind, and informed by surveys of policy makers that identified their needs and perceptions in relation to research. The initiative is focused within Australia's National Health Priority Areas, but also includes reviews relevant to effective practice and organisation of care, consumers and communication, and public health.

Strategies aiming to facilitate greater access to Cochrane reviews within the Policy Liaison Initiative are those termed ‘facilitating user pull’ (Lavis 2006); that is, those aiming to increase research receptiveness and the usability of systematic reviews. We have a website, indexed by subject, which includes summaries of relevant Cochrane reviews as well as other information resources relevant to evidence-based policy. As one of the barriers to evidence use is lack of personal contact, a staff member at the Australasian Cochrane Centre serves as a policy liaison officer, available by email or phone to answer the questions of individual staff members. We prepare quarterly bulletins and have provided numerous seminars and training workshops on subjects such as asking answerable questions, how to search and find evidence, critical appraisal, implementation and e-health.

8.5 Conclusion

Many opportunities to use evidence from research in the development and evaluation of policy are currently missed. Policy makers describe many barriers to using research findings, one of which is difficulty accessing summaries and syntheses of research. The Cochrane Collaboration, through the preparation, publishing and maintenance of reliable systematic reviews, and through ongoing efforts to support their implementation in practice and policy, has an important role to play in facilitating better linkages between evidence and health policy.

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