

IMPACT BRIEF: Using research evidence for national and regional decision-making

Introduction

According to World Health Organization, effective use of evidence in development policy-making can save lives as those policies will better respond to scientific and technological advances, use resources more efficiently, and better meet citizens' needs. Poorly informed decision-making, on the other hand, can prevent services from reaching those who need them most and cause countries to miss their national and international goals, such as the United Nations' Sustainable Development Goals.

Researchers and donors have grappled with the best way to promote compelling findings and boost uptake of research evidence among policy-makers at local, regional, and national levels.

Developing evidence-informed policies was at the heart of the Innovating for Maternal and Child Health in Africa (IMCHA) initiative. The IMCHA model was designed to have a decision-maker embedded as a core member of each research team, regardless of whether the projects implemented activities at the community level to increase awareness and use of maternal, newborn and child health (MNCH) services; at the facility/primary healthcare level to improve equity and quality of MNCH services; or at the national level to inform the health policy agenda and programs.

Between 2014 and 2022, IMCHA made important strides toward improving the lives of women and children in 11 countries in sub-Saharan Africa. Co-funded by Global Affairs Canada, the Canadian Institutes of Health Research, and Canada's International Development Research Centre, IMCHA was a eight-year, \$36 million initiative that supported 28 projects through 19 research teams, as well as two Health Policy and Research Organizations (HPROs) to complement the research teams' outreach efforts.



ALEX WYNTER/WHO

"It's a huge success to have a senior government official appreciate the value of evidence in informing his or her decision or the decision of a ministry in terms of issues to do with maternal and child health."

Lynette Kamau, Focal point, East Africa HPRO

Overview of the challenges

- On their own, research findings are rarely enough to trigger changes in policies or programs to improve people's health and wellbeing.
- Knowledge about and availability of effective interventions do not mean that they are applied or practiced.
- It takes a long time for researchers to generate evidence while decision-makers need the information much more quickly to respond to issues in real time.



The benefits of using evidence for policy-making

By closing the gap between what researchers know and decision-makers do, all members of the health system—from patients to policy-makers—understand their options and so make better informed decisions that:

- enhance health services and products
- improve health outcomes
- make best use of scarce resources
- strengthen the health system

SUCCESS STORIES

Linking researchers and decision-makers to effect change

IMCHA funded two HPROs, one each in West and East Africa, that worked to strengthen the capacity of research teams to bring evidence to bear on policies and programs. HPROs worked closely with IMCHA research teams—six teams and nine projects in West Africa; 13 teams and 19 projects in Eastern and Central Africa. Specifically, they

- helped researchers gather and translate their evidence more effectively and supported them in organizing activities and producing research outputs to reach out to their constituencies;
- provided strategic inputs into high-level health summits;
- worked with embedded policy-makers to refine policy engagement approaches;
- created national platforms and provided regional forums to increase interactions between researchers and decision-makers;
- fostered national and regional networking, collaboration, and peer-learning between research teams.

OUTCOMES

IMCHA projects have informed the adoption or revision of more than 20 policies and practices across sub-Saharan Africa. Countries demonstrated more reliance on evidence to develop or revise their healthcare policies, plans, standards, and protocols at local and national levels. For example:

- In Ethiopia, a research team was formed to inform strategies for civil registration and vital statistics, and for incorporating cause of death data as a priority within new national health strategies.
- Mental health desks have been established at the state and federal levels in Nigeria and mental health screening has been integrated in routine prenatal care services at the state level.
- Recommendations made to increase community health workers' motivation in Senegal are being adopted by the Ministère de la Santé et de l'Action Sociale.
- Bauchi State, Nigeria, is rolling out the practice of home visits by community extension workers state-wide.

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15 ministers of Health in West Africa adopted a resolution in 2017 to use evidence in developing healthcare policies, plans, standards, and protocols. The West-Africa HPRO has since developed a first-of-its-kind guidebook for the use of evidence.

In 2018, the East and Central Africa HPRO contributed to passing two critical resolutions to be implemented by all the **10 member states**. One focused on strengthening health systems to advance respectful maternity care. The other dealt with monitoring and evaluating reproductive, neonatal, maternal, adolescent and child health goals.

Extending emergency obstetric care and training

Tanzania's shortage of obstetrical and neonatal care in health facilities is a major barrier to reducing maternal and newborn deaths. Researchers sought to redress this shortage by implementing proven intervention strategies: training on emergency obstetrical care and post-training mentorship and support. The team developed a Comprehensive Emergency Obstetric and Newborn Care (CEmONC) resource package and prepared six eLearning modules. To ensure research uptake by key stakeholders, the research team showed that this intervention fit into national plans.

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All **five health centres** in the project area are now providing CEmONC services as planned: only two offered these services previously.

In August 2020, the government accepted and started **rolling out a three-month educational training** curriculum for CEmONC and a six-month curriculum for anaesthesia.

The government of Tanzania rehabilitated and constructed **360 new CEmONC health centres**. The Morogoro regional administration plans to upgrade 80% of the health centres to provide these services.

Consolidating collaboration between decision-makers and researchers

In May 2016, the government of Burkina Faso introduced a free healthcare policy for pregnant women and children under five years of age. To monitor the impact of this decision, the Ministry of Health needed information and analyses. The IMCHA project was one of the first global studies to provide empirical evidence documenting the benefits of free health services for children.

The research team found that the policy significantly improved maternal and child health indicators, but its terms and coverage didn't correspond with on-the-ground realities. It also concluded that, on its own, the policy was not effective in overcoming social and cultural factors that prevented women from using services.

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After the policy was introduced, 95% of women attended an antenatal consultation, **13 % more than previously**: 67% attended four consultations, up from 34%.

Health centre visits for ill children **increased by 17%** in the districts where research was carried out.

The Ministry of Health created a management and **knowledge-transfer unit** to consolidate collaboration between decision-makers and researchers, synthesize and share evidence, and support decision-makers to use evidence to improve maternal and child health programs.

"We demonstrated to decision-makers and researchers that they need each other, even if they do not have the same vision. Once they start exchanging, they begin to understand each other."

– Issiaka Sombié, Principal Investigator, West Africa HPRO

LESSONS LEARNED

Partnering with decision-makers in research projects early on and at the right authority level ensures local relevance and ownership over the process and the solutions, strong policy buy-in and continued engagement for problem solving and adoption of solutions.

The HPRO model provides a good platform for bringing scientific evidence to high-level decision-makers that researchers usually do not have access to, and in formats and terms tailored to their needs.

Although the production of evidence is often slower than the needs of decision-makers, research teams and decision-makers can effectively collaborate to advance research, knowledge, evidence-based decision-making, and ultimately improve health outcomes.

[Learn more in our videos](#)