**Reviewer's report**

**Title:** Use of Health Systems Evidence by Policymakers in Eastern Mediterranean Countries: Views, Practices, and Contextual Influences

**Version:** 1  **Date:** 3 January 2012

**Reviewer:** Judith Healy

**Reviewer's report:**

This paper contributes knowledge about the use of health systems evidence by policymakers in countries in the WHO Eastern Mediterranean region. This is important given increasing investment internationally in strengthening access to and use of health systems information by policymakers. As the authors point out, there is a dearth of research on how best to do this in low and middle income countries. The paper suggests a range of strategies for improving the use of research evidence. The interpretation and discussion of the survey data, however, could be made clearer. Also, the findings are somewhat obscured by more statistical analysis than warranted given the possibly opportunistic sampling methods and limited sub-sample sizes.

**Major compulsory revisions**

1. Some readers may be puzzled by the inclusion of Pakistan as an ‘Eastern Mediterranean’ country. Can the authors find another term for categorising these 10 countries? They should also explain up front that these are 10 of 22 countries in the WHO Eastern Mediterranean Region.

2. Add the response rate per country to Table 1 especially as the authors say later that this was very variable. Also add total sample (N=237) and overall response rate (56%).

3. Explain briefly the basis for the respondent sample size per country.

4. As the choice of respondents within the broad categories depended on a ‘focal person’ in each country, I wonder whether this choice was more opportunistic than ‘purposive’ - as acknowledged later under ‘Strengths and Limitations’. Better to be clear on this in the Methods section.

5. Explain 5-point scale scoring (p.8): 5=strongly agree to 1=strongly disagree?

6. Tables 3 and 4. The N values should be entered in a heading row in each table eg. Pakistan 42, Donor Agency 19.

7. Country comparisons: does a pattern emerge from Table 3 from the data analysis? The Results and Discussion section pick out some country differences but is there any underlying rationale – whether politics or capacity? How should these results be interpreted? As the authors point out it is necessary to understand the context of a country, it would be more satisfying for the reader if the discussion of country differences could reflect some such understanding.

8. Respondent affiliation (pp. 14-16). This is not explained very clearly. Are the
authors essentially saying that respondents outside government are much more critical of the policy process that those inside government? I would expect this to be universally so!

9. Discussion on corruption (p. 19). I can’t see how conclusions about corruption can be drawn from these survey results – apart from being drawn from other literature.

Discretionary revisions

10. Table 3 country comparisons: I suggest Table 3 could follow the format set out in Table 2, or more simply, list only the ‘strongly agree/agree’ percentage. Table 3 is hard to follow with findings on 30 statements by 10 countries while the meaning of each mean value is not immediately clear. I don’t think the statistical analysis is warranted given (a) the table is descriptive rather than analytical (there is no hypothesis); (b) the sampling basis is uncertain; (c) big differences in country response sizes affect statistical significance.

11. Table 4 respondent affiliation. Again, I suggest listing the percentage who ‘strongly agree/agree’ with each statement – rather than means and SDs. Compare MOH and Non-Government (numbers are small for professional associations and donor agencies).

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare I have no competing interests.