Reviewer's report

Title: Exploring evidence-policy linkages in health research plans: a case study from six countries

Version: 1 Date: 12 June 2007

Reviewer: John H Bryant

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General
MEMO
TO HARPS Editorial Team
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DATE June 11, 2007

This article is indeed intriguing. There is no doubting the importance of orienting research toward the building of evidence that is supportive of policy formulations that are relevant to priority concerns of a locality or nation. However, as the article puts forward so insistently, the relationships among the diverse subjects and processes that must be involved in evidence-policy linkages are exceedingly complex. An important strength of the article is the way in which it systematically reviews and analyses the various factors that must be taken into account in the evidence-to-policy interactions.

Further, the applications of these processes to six nations provide both practical and interesting illustrations of the process.

This work is the product of a research consortium – Future Health Systems: Innovations for Equity – which is conducting health systems explorations in six Asian and African countries.

The core conceptualization of this process is presented early in the article, through three key activities:
• Presentation of four key considerations that are relevant to strengthening evidence-policy linkages;
• These considerations are applied to research proposals in each of the six countries
• The utility of such approaches is discussed, including contrasting lessons derived from the six countries.

The four considerations, simple to state, are profound in their implications for practical action:
• Developmental perspective with four dimensions: poverty, vulnerabilities, capabilities, and health shocks;
• Research plans focusing on the real world, as health system development;
• Focusing on research prioritized by decision makers, within a politicized health arena;
• The full engagement of multiple stakeholders from local to national levels.

It is when one turns to the matrix, Table 1, which presents the six country research projects, each relating distinctively to each of the four evidence-policy considerations, that the analytical strength of the process becomes more fully apparent.

Research proposals in each of the six partner countries are examined with a lens provided by these key research-policy considerations. The research proposals tackle many of the suggested considerations for strengthening evidence-policy linkages. However, five key areas that may warrant further exploration emerge from a cross country review of current proposals.

First, some country proposals may enrich their exploration of the development context with a greater focus on individual and community capabilities. This “capability” as opposed to “vulnerability” focused paradigm may produce findings that contribute to innovative health systems and is likely to capture decision maker attention.
Second, careful attention should be given to the facilitation of innovations into health systems either from key informants or from the global knowledge pool. An analysis of common current pathways of innovation diffusion in low and middle income settings may be particularly useful in informing future strategies for effective health system innovation diffusion.

Third, key networks which influence decision making need identification and further analysis in many of the countries. Exploration of these key networks involved at the national, district and community levels may provide useful information on decision making processes.

Fourth, many research proposals have limited focus on institutions involved in the decision making process. These need to be included as power and knowledge are often concentrated within such institutions.

Lastly, some research proposals require further clarity on the methodology for engaging key stakeholders. In particular, systematic consideration of the entire range of possible stakeholders is desirable while the iterative nature of stakeholder analysis also needs highlighting.

The paper states that the research consortium, Future Health Systems: Innovations for Equity, has an opportunity to plan and conduct focused health systems and policy research in some of the largest low-income countries in the world. As a result, careful planning for research, setting priorities, and analyzing the potential for success in both the conduct of the research and its utilization for policy change are critical. It can be added that the importance of this process is similarly important for the large number of smaller low-income countries.

A review of the planned research is instrumental for analyzing the specific potential for innovation within each country and also for contributing to the global pool of knowledge.

To conclude, this paper utilizes a four dimensional framework of key considerations to identify potential leverage points at the evidence-policy interface for future health systems in low-income countries. Not only is the basic conceptualization of this structured approach to the evidence-policy interface truly creative, the testing and further analysis of the process, as through its implementation in a series of countries, are steady and constructive. The conceptualization, applications and further reflections on the overall process are truly impressive.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept without revision

Level of interest: An exceptional article

Quality of written English: Acceptable

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