Supporting the use of research evidence in the Americas through an online “one-stop shop”: the EVIPNet VHL

Suporte para uso de evidências de pesquisa nas Américas através do “one-stop shop” eletrônico: EVIPNet VHL

Apoyar el empleo de investigaciones sanitarias de la más alta calidad (evidencias) en las Américas, mediante un servicio de ventanilla única online: el EVIPNet BVS

Abstract

Since the release of the ‘World Report on Knowledge for Better Health’ in 2004, a transformation has occurred in the field of health policy and systems research that has brought with it an increased emphasis on supporting the use of research evidence in the policy process. There has been an identified need for comprehensive online “one-stop shops” that facilitate the timely retrieval of research evidence in the policy process. This report highlights the EVIPNet VHL, a recently established project that was developed to meet the need for online repositories of relevant evidence to support knowledge translation efforts in the Americas, which can help contribute to strengthening health systems in the region.

Delivery of Health Care; Knowledge Management for Health Research; Evidence-Based Practice

Resumo

Desde a publicação do World Report on Knowledge for Better Health em 2004, ocorreu uma transformação no campo da política da saúde e em pesquisa de sistemas, resultando numa ênfase crescente sobre o suporte para evidências de pesquisa no processo decisório. Foi identificada a necessidade de “one-stop shops” eletrônicos abrangentes que facilitem a recuperação oportuna de evidências no processo decisório. O relatório destaca a EVIPNet VHL, um projeto recém-criado que foi desenvolvido para atender a necessidade de repositórios eletrônicos de evidências relevantes para apoiar os esforços de translação de conhecimento nas Américas, contribuindo assim para o fortalecimento de sistemas de saúde na região.

Assistência à Saúde; Gestão do Conhecimento para a Pesquisa em Saúde; Prática Clínica Baseada em Evidências
Background

The field of health policy and systems research has experienced an increased focus on efforts that aim to support the use of research evidence in policy making, and a number of high-profile international events (such as the Mexico Ministerial Summit on Health Research) have helped to confirm that there is a strong commitment to establish or strengthen existing mechanisms that can contribute to progress in this area. As a direct response to (and in concert with) these events, the World Health Organization/Pan American Health Organization (WHO/PAHO) supported the establishment of Evidence-Informed Policy Networks (EVIPNet): an initiative that brings together policymakers, stakeholders and researchers to act on these commitments within countries. EVIPNet now consists of many teams globally, seven of which are located in countries across the Americas: Argentina, Brazil, Chile, Colombia, Ecuador, Paraguay and Peru.

EVIPNet teams have been involved in preparing evidence briefs for policy and convening deliberative (policy) dialogues that use those briefs as an input, which, taken together, address the majority of the barriers found to hinder the greater use of research evidence (i.e. research isn’t highly valued, relevant or easy to use), while building on factors found to increase the likelihood that research will be used to inform policy decisions (e.g. timeliness and interactions). These efforts require timely access to the full range of policy-relevant, high-quality and optimally packaged research evidence (and in particular, systematic reviews and economic evaluations), which can help define the problems underlying priority policy issues, frame options for addressing these problems, and identify implementation considerations. As such, there is a need for comprehensive online “one-stop shops” that ensure quick retrieval of policy-relevant research evidence. These efforts are viewed as key elements in strategies to strengthen national health systems. This report highlights the EVIPNet Virtual Health Library (VHL), one initiative that has been developed to meet the need for online repositories of relevant research evidence.

EVIPNet VHL

The EVIPNet VHL (http://global.evipnet.org) is an online repository that was launched at the 66th World Health Assembly to support country teams in undertaking evidence-informed health policy making efforts (e.g. preparing evidence briefs for policy), aiming to ensure timely access to the full range of policy-relevant research evidence in the Americas (and globally) through the establishment of a comprehensive online “one-stop shop”. It is the result of a partnership between PAHO and the McMaster Health Forum and involves the integration of the Health Systems Evidence (HSE) database (http://www.healthsystems evidence.org) with PAHO’s VHL (http://regional.bvsalud.org), which is maintained by the Latin American and Caribbean Centre on Health Sciences Information (known by the acronym BIREME). The integration of these two sources allows for both the timely identification of research on the programs, services and drugs that can be adopted to improve health (a particular strength of PAHO’s VHL), and the health systems arrangements and implementation strategies that can support getting cost-effective programs, services and drugs to those who need them (the focus of HSE). Furthermore, the resource is available in English, French, Portuguese and Spanish (among other languages), which facilitates access to its resources in a number of languages that are spoken in the Americas.

The EVIPNet VHL enables users to quickly access more than 50,000 “key sources” currently contained in the VHL, which includes a range of overviews of reviews, systematic reviews, randomized controlled trials, economic evaluations and other single studies that focus on the programs, services and drugs that can improve health in the Americas. The EVIPNet VHL also contains important tools that can guide and inform efforts to support the use of research in health systems policymaking (e.g. the SUPPORT Tools) – ensuring those preparing briefs, convening dialogues and pursuing the range of other activities that support evidence-informed health policy can quickly retrieve information about how to design and implement these activities. Search results are organized by type of document (e.g. evidence briefs for policy, systematic review etc.) by the main subject addressed in the document (e.g. treatment outcomes, controls, risk factors, etc.) by population-specific “limits” (e.g. females, males, pregnant women, etc.), by countries that serve as the focus of the document, the journal in which the record is published, the language in which the record is written and the year published. The repository also enables users to quickly identify records for which there is a free full-text available. These features can help to ensure policymakers and those supporting them can quickly find information about the programs, services and drugs that relate to a priority issue currently being addressed in their jurisdiction, as well as the tools available to support the use of...
this information to those making decisions about these issues.

The integration of Health Systems Evidence within the EVIPNet VHL

One of the core strengths of the EVIPNet VHL is the integration of HSE into the search engine because this expands the focus of the VHL beyond its predominant focus on “what” programs, services and drugs to include “how” to get those programs, services and drugs to those who need them. HSE is a continuously updated repository of syntheses of research evidence about governance, financial and delivery arrangements within health systems, and about implementation strategies. The types of syntheses in HSE include (as of October 2014): 121 evidence briefs for policy, 55 overviews of systematic reviews, more than 4,000 systematic reviews, 422 systematic reviews in progress (i.e. protocols for systematic reviews), and 230 systematic reviews being planned (i.e. registered titles for systematic reviews). The database also contains a continuously updated repository of economic evaluations in these same domains (and there are currently 2,181 in HSE), over 1,000 descriptions of health system reforms (with links to syntheses and economic evaluations when possible), and over 200 descriptions of health systems (to assist with assessments of the local applicability of research evidence and of how reforms are embedded within health systems). HSE also provides significant “value-added” content that can save time for policymakers and stakeholders, including: how recently the search for studies was conducted or when the document was published, the quality of the synthesis (for reviews), links to user-friendly summaries, scientific abstracts, and full-text reports (available through open access or BIREME subscriptions). For each systematic review, HSE also provides links to the studies contained in the review – enabling quick access to country-specific single studies that can be utilized to contextualize the findings of the review. It also links search results to other documents in the database that focus on a similar topic (e.g. a systematic review retrieved will be linked to any available economic evaluations that focus on a similar topic), and facilitates easy searching by providing users with an option to use a general ‘open’ search, while also enabling more specific searches through an advanced search page with which users can limit results in a number of ways (e.g. by health system topic, disease domain, sector or country focus).

Conclusion

Overall, the EVIPNet VHL provides a useful online tool for health systems policymakers and stakeholders who need timely access to relevant evidence about the programs, services and drugs that can improve health in the Americas, as well as research about the health systems arrangements that can ensure cost-effective solutions reach those who need them. As a comprehensive, single-entry point to this evidence, this resource also serves as an important resource for those pursuing efforts to support the use of research evidence in policymaking – including the seven EVIPNet teams in the Americas. As this resource continues to expand to include a more comprehensive stock of policy-relevant research evidence, we hope that it is increasingly utilized to improve health care decisions in the Americas.
Resumen

Desde la publicación del Informe Mundial sobre el Conocimiento Orientado a Mejorar la Salud en 2004, se ha producido una transformación en el ámbito de las políticas de salud y sistemas de investigación, que ha llevado consigo un énfasis creciente en el apoyo al uso de investigaciones sanitarias de la más alta calidad (evidencias), durante el proceso de desarrollo de políticas en el ámbito de la salud. Se identificó la necesidad de un servicio práctico de ventanilla única on-line, que facilitara la recuperación efectiva de evidencias en el ámbito de la salud. Este trabajo se centra en la Biblioteca Virtual en Salud (BVS) EVIPNet, un proyecto implantado recientemente que ha sido desarrollado con el fin de satisfacer la necesidad de un banco de evidencias relevantes online para apoyar el conocimiento, y la difusión del mismo, junto a los esfuerzos realizados en las Américas en esta dirección, lo que puede ayudar a contribuir en el fortalecimiento de los sistemas de salud en la región.

Prestación de Atención de Salud; Gestión del Conocimiento para la Investigación en Salud; Práctica Clínica Basada en la Evidencia

Contributors

K. A. Moat conceptualized this brief communication and was responsible for writing the manuscript. J. N. Lavis contributed to the conceptualization of this brief communication, and contributed to drafting and editing the manuscript.

References


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