Políticas de salud informadas por los resultados de investigación científica:
la BVS como espacio para la interacción y práctica entre tomadores de decisión, científicos y la sociedad civil.

Ulysses PANI SSET
IER - RPC
**EVidence-Informed Policies** (knowledge-translation):

the VHL as an environment for interaction and practice among decision-makers, researchers and civil society.

Ulysses PANISSSET
IER - RPC

World Health Organization
Discussion topics

- What is EVIPNet and how it works (objectives and activities)
- EVIPNet contributions to the advancements in methodologies and tools that are specific to knowledge translation (KT) platforms in Low and Middle Income Countries
- The VHL-EVIPNet Portal as a learning environment and ethical imperative: challenges and opportunities.
“There is nothing a politician likes so little as to be well informed, it makes decision making so complex and difficult.”

John Maynard Keynes
"All countries need to step up efforts to increase investment in health research(...). At the same time, full use should be made of scientific evidence, and we should also work to bridge gaps between decision-making and scientific research."

Chen Zhu, Minister of Health, People's Republic of China
What is EVIPNet?

- Promotes systematic use of evidence in policy-making in low and middle-income countries.
- Social network: Promotes partnerships at country level between policy-makers, researchers and civil society to facilitate policy development and implementation through use of the best scientific evidence available.
“If you are poor, actually you need more evidence before you invest, rather than if you are rich.”

Dr Hassan Mshinda
Ifakara Centre, Tanzania
What is EVIPNet:

- **Innovation process**: policy as product
- **Country focused**, sustainable mechanism inserted in the policy-making and implementation pathway
- **Social network** to support the advancement of knowledge in evidence to policy links (global, regional, national)
- **Demonstration program** in 25 selected countries
- **Essential part of WHO research strategy**
Fundamental building blocks needed to establish sustainable "knowledge translation platforms" in Low and Middle Income Countries
Country teams and regional and global support structures
EVIPNet BUILDING BLOCKS

Research synthesis & Policy briefs

World Health Organization
How does EVIPNet work?

- Country teams and regional and global support structures

- Research synthesis and Policy briefs
  - 1:3:25 pages format

“The Ethiopian Ministry of Health fully supports EVIPNet. I strongly believe that EVIPNet policy briefs will help policymakers to control [diseases]…in their respective countries.”

Dr Tedros Adhanom, Minister of Health, Ethiopia
Country dialogues (safe harbor)
EVIPNet BUILDING BLOCKS

Capacity development & empowerment

World Health Organization
EVIPNet BUILDING BLOCKS

Country dialogues
(safe harbor)

Capacity development & empowerment

Country teams and regional and global support structures

Research synthesis & Policy briefs

Monitoring and evaluation - Development of new methodologies
EVIPNet in action

- The world is not what is/exists, but what happens
- O mundo não é o que existe, mas o acontece
  - "The last flight of the flamingo"
  - Mia Couto, Mozambican author
1st. EVIPNet Policy Brief Workshop
- Addis Ababa, February 2008 -

- 8 policymakers and 7 researchers
- Learning by doing, producing, and evaluating
- Learning together to work together
Develop 1 draft policy brief for each country team

- Evidence based options to policy makers on how to support the widespread use of artemisin-based combination therapies (ACT) to treat uncomplicated falciparum malaria
- Includes supportive governance, financial and delivery arrangements within health systems, and implementation strategies
Preparation before workshop focused on:

- Terms of reference for Policy Brief
- Identification of relevant systematic reviews, national research, and health information
- Locating relevant studies specific to their country (or sub-region)
- Drafting the section titled “magnitude of the problems or challenges linked to the policy issue” (burden of disease)
During workshop.....

- how to bring about change,
- Working with policy pathways (how to better influence policy)
- techniques of writing, evaluating, and communicating PBs.
- how to Organize and evaluate a national policy dialogue with policymakers, researchers, & civil society to:
  - Refine PB
  - Further contextualize
  - Validate
EVI PNet Portal Strategy

- Ethical imperative: responsibility to monitor, evaluate, provide access to information and evidence, disseminate achievements and obstacles in evidence-informed policymaking in a timely basis.
  - Transparency, credibility

- Dissemination and generation of knowledge in the use of research evidence in policymaking

- Ownership and empowerment: Develop interactive learning environment: discussion, exchange of experiences to learn and work together -
EVI PNet Portal challenges

- **BIREME:** Virtual Health Library paradigm
- **Interactive:** Elaboration of cooperative and collective applications
- **Workflow for pull and push:** Data, information and documentation on best evidence
- **Publishing protocol standard & decentralized quality control**
- **Languages** ($ resources: English, French, Spanish, Portuguese, Chinese)
Challenges: …in the making of

- How to include civil society (who?)
- Challenges of doing this in LMICs (From CAR to Brazil, from Laos to China): need to tailor make - One size does not fit all.
- Portal development
- Funding (EC FP7, IDRC)
- How to harness "coal face" experience, tacit knowledge (Country dialogues?)
Challenges:

- District level "People have the strange habit of not getting sick or healthy at the global or regional level!

- EQUITY:
  - How to translate Commission Social Determinants of Health into policy at country level?
  - EVI PNet Portal: equity in access to information
Thank you
Merci
Obrigado
Gracias
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