Combined list of networks for outreach and contacts

i. 3IE – contact: Birte Snilsveit (bsnilstveit@3ieimpact.org)

ii. Agency for Healthcare Research and Quality (AHRQ) Evidence-based Practice Centers – contact: Stephanie Chang (Stephanie.Chang@ahrq.hhs.gov) (or via Jerry Osheroff josheroff@tmitconsulting.com)

iii. Africa Evidence Network, which includes groups like Africa Centre for Evidence, University of Johannesburg and the Centre for Rapid Evidence Synthesis, Makerere University – contact: Ruth Stewart, Africa Centre for Evidence (ruths@uj.ac.za)

iv. Campbell Collaboration – contact: Vivian Welch (vwelch@campbellcollaboration.org)

v. Campbell UK and Ireland – contact: Declan Devane (declan.devane@nuigalway.ie)

vi. Centre for Learning and Evaluation Results – contact: Laurenz Langer (llanger@uj.ac.za)

vii. Cochrane Geographic Groups, including Cochrane US Network (4 EPCs are members) – contact: Sylvia de Haan (sdehaan@cochrane.org)

viii. Collaboration for Environmental Evidence – contact: Ruth Stewart, Africa Centre for Evidence (ruths@uj.ac.za)

ix. European Network for Health Technology Assessment (EUnetHTA) – contact: Claudia Wild, Austrian HTA agency (claudia.wild@aihta.at), contact person: Ozren Sehic (ozren.sehic@aihta.at)

x. Evidence Aid – contact: Ben Heaven-Taylor (bhtaylor@evidenceaid.org)

xi. Evidence-Informed Policy Network (EVIPNet) – contacts: John Lavis and Ludovic Reveiz (lavisj@mcmaster.ca) and (reveizl@paho.org)

xii. Global Evidence Synthesis Initiative (GESI) – contacts: Tamara Loutfi and Elie Akl (tamara_loutfi@hotmail.com) and (ea32@aub.edu.lb)

xiii. Guidelines International Network (GIN), including its regional sub-networks – contacts: Per-Olav Vandvik and Zachary Munn (per@magicproject.org) and (vice-chair@g-i-n.net)

xiv. Health Information for All (HIFA) – contact: Sylvia de Haan (who is a member of the listserv) (sdehaan@cochrane.org)

xv. Health Technology Assessment International (HTAi) – contact: Lucy Henry, HTAi (lhenry@htai.org)

xvi. International Network of Government Science Advisors – contact: Ruth Stewart or Laurenz Langer (ruths@uj.ac.za) or (llanger@uj.ac.za)

xvii. International Network of Health Technology Assessment Agencies – contact: Sophie Söderholm Werkö by INAHTA (sophie.werko@sbu.se)

xviii. National Collaborating Centres (Canada) – contact: Maureen Dobbins (dobbinsm@mcmaster.ca)

xix. Red de Evaluación de Tecnologías en Salud de las Américas (RedETSA) – contact: Ludovic Reveiz (reveizl@paho.org)

xx. SPOR Support Units (Canada) – contact: Andrea Tricco (andrea.tricco@unityhealth.to)

xxi. University of Malaya – contact: Liew Su May (su_mayliew@um.edu.my)
Final content for message to networks

Key message for communication to be adapted by colleagues reaching out the networks in the first instance.

Why we are reaching out
- Due to the COVID-19 pandemic, evidence and evidence synthesis in particular have arguably never been needed more to support rapid decision-making in health and social systems.
- Given the unprecedented scale of decision-makers’ evidence needs, large-scale collaboration and shared learning within the evidence community is required.
- The COVID-19 Evidence Network to support Decision-making (COVID-END) has come together to help those already supporting decision-making to find and use the best evidence that is already out there (i.e. to support the evidence-demand side) and to help reduce duplication in and better coordinate the evidence syntheses, technology assessment and guidelines being produced (i.e., to support the evidence supply side).
- COVID-END aims to support the evidence community in avoiding duplication and efforts and to strengthen collaboration and co-ordination between different organizations within the global evidence community.

How COVID-END might be of support to your organization
- Rather than have teams supporting decision-making in dozens of countries scrambling to find existing research evidence on the same question or similar questions, COVID-END provides support to find what’s already there and then whether to use it, adapt it or identify research partners to fill a gap in what’s known.
- In more detail, COVID-END can support your organization by:
  - **Saving you time to find evidence** by accessing a detailed list of existing COVID-END evidence sources (see here)
  - **Avoiding duplication** by ensuring that your evidence synthesis hasn’t already been attempted by checking sites included in the COVID-END evidence sources (see above)
  - **Providing practical tips and tools** on how to rapidly produce and use evidence by accessing a list of tools tailored for either researchers (see here) or decision-makers (see here). This also includes an in-depth collection of resources and tools for COVID-19 evidence syntheses (see here), which might be of help in designing and producing your evidence synthesis.
  - **Providing a rapid-evidence model** to be used or adapted to facilitate a 3-hour rapid response to decision-makers (see here)
  - **Connect you with a community** of researchers and decision-makers committed to support sharing and co-ordination in order to enhance an efficient and equitable COVID-19 evidence response (see more below)
Connecting with the COVID-END community

COVID-END is a community of researchers and decision-makers committed to support sharing and co-ordination in order to enhance an efficient and equitable COVID-19 evidence response. If you are interested in being involved in this vibrant community, we will add you to a listserv for joint discussion and engagement on topics of interest related to evidence, evidence synthesis and COVID-19. To join the listserv, we just need you to confirm your opt-in in response to this email. Our aim is to commence with the listserv in mid-June.

In the listserv, we are planning to discuss a range of issues and considerations in producing evidence, evidence syntheses and guidelines for COVID-19. These will include shared experiences and learnings of COVID-END community members for example in relation to producing more rapid and responsive COVID-19 evidence services across contexts. It will also include the exploration of a few principles that might support the production of COVID-19 evidence syntheses and guidelines. Based on initial discussions some topics of interest include:

- Registration of synthesis titles and protocols (e.g. via Prospero)
- Open-access principles for synthesis publications
- Priority setting for COVID-19 evidence syntheses
- Critical appraisal and strength of the evidence assessments in rapid COVID-19 reviews.

This is just an initial set of ideas and the listserv will be fully member-driven in identifying relevant topics for discussion.

Process for outreach

1. Initial outreach to groups via email by trusted contact
2. Use of listserv thereafter to manage centralized communication (exact listserv tbc)