

Resources to support evidence packaging
(Last updated 4 June 2020)

- 1) *Communicating in plain language*
 - a. Glossaries of COVID-19 terms like the one from the [Kaiser Family Foundation](#)
 - b. Tools to assess the readability of a communication like the one built into [MS Word](#)
 - c. Consistent style for plain-language summaries like this one from [Cochrane](#)
 - d. Complementary products like the [blogshot](#), [podcast](#), [visual abstract](#) from Cochrane (as well as additional visual abstracts from [Emory University's School of Medicine](#) and infographics from [BMJ](#))
 - e. Resources to address the use of the same word/phrase to mean different things (e.g., rapid reviews) and to understand quality ratings of evidence syntheses, technology assessments, and guidelines (e.g., what an AMSTAR score for a systematic review means, what a GRADE assessment of the strength of evidence means) and the value (or not) of potential proxies for quality (e.g., peer review)
- 2) *Translating content into multiple languages*
 - a. Services provided by groups like [Translators without Borders](#) and technical second-best options like a [Google Translate widget](#) on a webpage
 - b. Organization-wide commitments to translating content into multiple languages by groups like [Cochrane](#) and [Evidence Aid](#)
- 3) *Meeting the needs of groups with distinct information needs*
 - a. Patients, consumers and citizens
 - i. Resources to help make sense of health information from [Cochrane](#) and from the [Cochrane Consumer Network](#)
 - ii. Opportunity to collaborate on rapid reviews as part of the [COVID-19 consumer rapid-response group](#) or as citizen scientists on the [Cochrane Crowd platform](#)
 - b. Service providers
 - i. Actionable information to support point-of-care decision-making from [Cochrane Clinical Answers](#)
 - ii. Living systematic reviews that are updated regularly like the one on drug treatments from [Cochrane France](#)
 - c. Policymakers and managers
 - i. Approach to drawing out implementation considerations like this one from [Cochrane](#)
 - ii. Profiles of COVID-relevant evidence from [Cochrane's Effective Practice and Organization of Care review group](#)
- 4) *Grouping content thematically for those with shared interests*
 - a. Resources for different clinical specialties like [fertility and pregnancy](#), special collections for public-health and clinical management [topics like infection prevention and control](#), and resources for broader health domains like [aging](#) from Cochrane
 - b. Resources for organizations engaged in addressing humanitarian emergencies from [Evidence Aid](#)
- 5) *Combatting mis-information*
 - a. Resources to support fact checking from the [Public Media Alliance](#)
 - b. Fact-checking services from [Africa Check](#) (Live Guide), [Cochrane Ireland](#) (iHealthFacts), and the [World Health Organization](#) (Myth busters)
- 6) *Providing a 'daily fix' about what we know and don't know*

- a. *Daily updates about COVID-19 in general like the one from [Johns Hopkins School of Public Health](#) or about COVID-19 evidence in particular like the one from Australia's [Agency for Clinical Innovation](#)*