

<p><b>1. FOLLOW-UP ON ACTION ITEMS</b></p> <p>a. Review notes and action items from previous meeting (see attachment 2)</p>	<b>5 min</b>
<p><b>2. COVID-END RE-STRUCTURING</b></p> <p>a. Review potential adjustments for working groups (see attachment 3)</p> <ul style="list-style-type: none"> <li>• Jeremy walked through the document and the possible adjustments</li> <li>• Constituency based working groups – less sure of where they stand and their natural evolution, for example:             <ol style="list-style-type: none"> <li>1) Digitizing in which there is a lot of work happening outside the working group, such as COKA and ACTS</li> <li>2) Synthesizing – they’ve created the resources for researchers on COVID-END website, but we’re not sure whether that group needs to continue to meet on their own or with other groups</li> <li>3) Recommending – currently have an active agenda but in the next few months, do they need to still meet in the same way and alone, or joint with another group such as Synthesizing?</li> </ol> </li> </ul> <p><b>Reflections to the document and possible adjustments:</b></p> <p><b>David:</b></p> <ol style="list-style-type: none"> <li>1) Equity and inclusion is in the COVID-END logic model, so it goes against the grain to see that as a short-term issue, especially as it is one of the guiding principles that COVID-END stands on             <ul style="list-style-type: none"> <li>o Maybe it can eventually be built into another group</li> <li>o Jeremy: We see this popping up as an important task but it will continue to be an important component of what we do, but we need to find a way to ensure that equity is represented no matter what the working groups structure may be</li> </ul> </li> <li>2) Digitizing – ongoing field, but anxious that it may not continue to be a coherent group</li> <li>3) Wonders if any of this thinking would change to potentially broaden into the social science, for example SRC in UK set up a reservatory of social science for COVID. We see that certain tasks and milestones are ‘met’, however they may not have been met for the social sciences</li> </ol> <p><b>Airton:</b></p> <ul style="list-style-type: none"> <li>• Need to think through how to tackle with intuitive narrative in which people tend to be more pragmatic to manipulate opinions in which the setting has misleading or misinformed leadership</li> </ul>	<b>20 min</b>

<ul style="list-style-type: none"> <li>• Perhaps the Advocating group may help us think about the ‘fake news’ or misinformation</li> </ul> <p><b>Declan:</b></p> <ul style="list-style-type: none"> <li>• Likes the thinking of the structuring around the working groups</li> <li>• A networking function is needed</li> <li>• In terms of the equity, understands it to be transcending all of the groups and will require coordination of harnessing all of the various ideas across the working groups</li> <li>• Who are our audiences and how do we capacity build?</li> <li>• The evidence synthesis community struggles in going beyond into the policymaking community and the public to position where evidence synthesis fits around the decision making process</li> <li>• Maybe COVID-END can take over some capacity building. This may be done through education around where evidence fits into ‘good’ health decisions, and targeting the broader community</li> <li>• In terms of equity, there is an opportunity that COVID-END has to build capacity and provide support for evidence synthesis communities in LMIC, maybe around methodological support. Also, there is a lot to learn on how we translate our evidence syntheses into the broader community, so there’s bidirectional capacity building</li> <li>• Jeremy noted Evidence Synthesis Ireland’s work of myth busting and whether we can start to learn from the activities across the partnership and outside the partnership</li> </ul>	
<p><b>3. PAPERS FOR DISCUSSION</b></p> <p>a. WHO position paper (see attachment 4)</p> <ul style="list-style-type: none"> <li>• This is from the Evidence Collaborative COVID-19 (ECC-19), an initiative that started off initially as displaying various organizations’ achievements and current work</li> <li>• Around July, WHO ECC-19 asked COVID-END and Cochrane to join their secretariat and help them plan their work and now meeting on a regular basis</li> <li>• One of the suggestions made at their meetings was to try and produce a position paper that would move across WHO, COVID-END and Cochrane and articulate the need for evidence synthesis</li> <li>• The attachment is the first draft of the position paper and Jeremy is planning on working on another draft and it will be circulated to the ECC-19 group and COVID-END this Thursday 5 November 3, 2020</li> </ul> <p><b>Reflections to the draft:</b> <b>David:</b></p>	<p><b>25 min</b></p>

<ul style="list-style-type: none"> <li>• More framing of the ESI’s position to be made explicit</li> </ul> <p><b>Declan:</b></p> <ul style="list-style-type: none"> <li>• To add the positioning of the evidence synthesis as one part of the decision-making process. Evidence synthesis does generate good decisions, however, it does so within an overall system too</li> </ul> <p><b>Airton:</b></p> <ul style="list-style-type: none"> <li>• To add digital access and inequity beyond COVID</li> <li>• Try to identify barriers and enablers, such as the political climate (e.g. democracy)</li> <li>• Mention of the media</li> <li>• Think through new emerging careers in healthcare due to the COVID pandemic</li> </ul> <p><b>Jeremy:</b></p> <ul style="list-style-type: none"> <li>• In the first wave, there was a lack of COVID learning from other countries, and perhaps that is also in relation to the pandemic evidence response</li> </ul> <p><b>Moses:</b></p> <ul style="list-style-type: none"> <li>• In most LMICs, the use of evidence in decision-making is not a high priority, especially in the issues of context specific evidence, and it will usually be drawn from high income countries</li> <li>• This needs to be highlighted in the paper</li> <li>• Also, is the evidence synthesis community going to use the same or similar processes for the second wave or are we going to bridge information and learning across the two phases of the pandemic?</li> </ul> <p><b>Jeremy:</b></p> <ul style="list-style-type: none"> <li>• There are inequities in the primary research production. If we are going to continue to largely generate COVID research in the global north, it may further exacerbate the challenges in the global south on how to contextualize the evidence to local settings</li> <li>• As we move from the first to the second wave, instead of having a rapid review, we want to move into a more coordination fashion such as generating systematic reviews in which different countries can utilize the evidence in a timely fashion based on when they are experiencing the different COVID phases</li> </ul> <p><b>ACTION: Jeremy to share second draft on Thursday’s partners call (and to those that are not able to attend the call) for further feedback</b></p> <p>b. Follow-up LMIC paper Not discussed at this meeting</p>	
<p><b>4. ANY OTHER BUSINESS</b></p>	<p><b>5 min</b></p>