Three sets of recommendations, three common priorities

- Three sets of recommendations
  - Cochrane Convenes report
  - EVIPNet call for action
  - Global Commission on Evidence to Address Societal Challenges (Evidence Commission) report

- Three common priorities
  - Strengthen national evidence-support systems
  - Enhance and leverage the global evidence architecture
  - Put evidence at the centre of everyday life
Strengthen national evidence-support systems alongside national evidence-implementation systems, research systems & innovation systems

Evidence-support system – Grounded in an understanding of a national context (including time constraints), demand-driven, and focused on contextualizing the evidence for a given decision in an equity-sensitive way

Examples of infrastructure:
- evidence-support units that can combine:
  - power of national evidence – in the form of data analytics, modelling, evaluation, behavioural/implementation research, and qualitative insights – that tell us what has been learned in our own country
  - power of global evidence – in the form of evidence syntheses – that tell us what has been learned from around the world, including how it varies by groups and contexts
- expert panels that follow rigorous processes to develop evidence-based recommendations
- government science advisors who speak in a way that makes it possible to judge their accuracy
- processes to:
  1) elicit and prioritize evidence needs
  2) find and package evidence that meets these needs within set time constraints (and build additional evidence as part of ongoing evaluations)
  3) strengthen capacity for evidence use (e.g., evidence-use workshops and handbook)
  4) incorporate evidence use into routine processes (e.g., cabinet submissions, budget proposals)
Why now?

• Cadre of political leaders who have personal experience with what worked well during COVID-19 and what could work better
• Innovations in evidence products and processes, such as living evidence syntheses and living guidelines about COVID-19
• COVID-19 evidence investments coming to an end
• Lesson learned about needing to have evidence supports in place that can pivot to address health emergencies like COVID-19
• Recognition of the growing array of health challenges other than COVID-19 where best evidence is needed
• What else?
Enhance and leverage the global evidence architecture

• **WHO**: needs the funds to sustain rigorous approaches – in norms and standards, in technical assistance, and in evidence-related global public goods – and apply them across the full range of health challenges we face.

• **Most other UN system entities**: need to move away from an ‘expert knows best’ model for normative guidance and technical assistance and from an underinvestment in evidence-related global public goods.
  
  - e.g., UN’s ‘quintet of change,’ which is meant to support the UN’s transformation from 2021 to 2025, needs to be expanded beyond data analytics, behavioural/implementation research, and evaluation to include the many other needed forms of evidence.
  
  - e.g., reinvigoration of the UN Secretary-General Scientific Advisory Board, as mentioned in the UN Secretary General’s Our Common Agenda report, provides an opportunity to do better with an important independent expert panel, comprised of social as well as natural scientists.

• **Producers of evidence-related global public goods**: need to improve prioritization, increase coordination, and foreground equity and context considerations in their work, and need the funds to maintain a suite of high-quality living evidence syntheses on priority topics.

• **Funders**: need to invest in the global evidence architecture (and national evidence-support systems).
Engage citizen leaders and citizen-serving NGOs in putting evidence at the centre of everyday life

• **Focus** of curated resources
  - Making decisions about one's and one's family's well-being based on best evidence (e.g., drug facts boxes)
  - Spending money on products and services that are backed by best evidence (e.g., Wirecutter)
  - Volunteering time and donating money to initiatives that use best evidence to make decisions about what they do and how they do it (e.g., 80,000 hours and GiveWell)
  - Supporting politicians who commit to using best evidence to address societal challenges and who commit (along with others) to supporting the use of evidence in everyday life

• **Types** of curated resources
  - Access to best evidence (e.g., Cochrane plain-language summaries)
  - Access to evidence-checked claims (e.g., fact-checking websites)
  - Simple-to-use evidence-backed resources and websites to make informed choices (e.g., impact investing sites)
  - Training to build media and information literacy (e.g., thatsacclaim.org)
  - Transparency for citizens to know when decisions, services and initiatives are based on best evidence (e.g., food labels and kitemarks)
  - Culture where evidence is understood, valued and used (e.g., Sense About Science)