3.3 Government policymakers and the context for their use of evidence

Government policymakers are one of four key types of decision-makers. They also shape the scope and supports for decision-making by organizational leaders, professionals and citizens, just as organizational leaders can do this for professionals and citizens, and professionals can do it for citizens. Citizen leaders, like the young Swedish environmental activist Greta Thunberg, can seemingly also shape the scope for decision-making by government policymakers, organizational leaders and others. Here we provide context for how government policymakers make decisions, using questions likely to elicit factors that could support (or discourage) their use of evidence. Given the array of policy, system and political analysis skills required to answer these questions, some evidence intermediaries focus exclusively on government policymakers.

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<th>Questions</th>
<th>Prompts</th>
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| **What types of decisions do they make?** | - Domestic sectoral, domestic cross-sectoral or global (e.g., as a member state in the UN system)  
- One-off versus on-going process with defined re-assessment points  
- Routinized versus ad hoc (e.g., adding a product or service to an existing benefits package using established procedures versus creating a new benefits package)  
- Products and services versus the governance, financial and delivery arrangements that determine whether the right mix of products and services get to those who need them  
- One policy instrument versus another (see section 7.1 for examples of information/education, voluntary, economic and legal policy instruments) |
| **Where and how are decisions made?** | - National, provincial/state or local level of government  
- Executive, legislative or judicial* branch of government  
  - If executive: cabinet or other cross-government entity, minister or secretary (and their political staff), and public servants in central agencies, ministries or departments, government agencies, and regulatory bodies  
- Personal decision (command), consult, consensus or vote  
- Time constraint |
| **What factors may influence decision-making?** | - Need a compelling problem, a viable policy and conducive politics to get an issue onto the decision agenda  
- Make decisions within institutional constraints (e.g., veto points and legacies of past policies), contending with interest-group pressure (e.g., support or opposition from those who will gain or lose a lot), considering both ‘what is’ (e.g., data analytics) and ‘what should be’ (values), and in light of external events (e.g., economic crisis) |
| **What ‘structures’ may provide a way in for evidence (and for institutionalizing evidence support)?** | - Internal evidence-support coordination unit and contributing data-analytics, evaluation, behavioural-insights, and other units  
- Internal government science advisor units  
- External evidence support from advisory groups, assessment panels, independent commissions, monitoring boards, review committees, and technical task forces  
- Internal units for budgeting and planning, monitoring, auditing, and complaints investigation (e.g., ombudsperson)  
- External support from management-consulting firms  
- External support from normative-guidance and technical-assistance units in the UN system and other multilateral organizations  
- External support from global public-good producers |
| **What ‘processes’ may provide a way in for evidence?** | - Budgeting, planning and monitoring  
- Policies, procedures, handbooks and other tools to support workflows  
- Hiring criteria, performance-review criteria, promotion criteria, turn-over rate, and professional development for policy, program, technical and library staff  
- Stakeholder, public and media engagement, as well as public-opinion polling  
- Legislative debate and committee meetings  
- Elections and political-party platforms  
- Global and regional programs of action and accountability frameworks |

* The judicial branch of government considers evidence as conceived in this report as something introduced by expert witnesses and as something to be considered alongside other testimonial evidence as well as physical evidence (e.g., fingerprints and DNA), demonstrative evidence (e.g., maps and photos), and documentary evidence (e.g., contracts and diary entries).

** Some of these structures and processes are explicitly evidence-related while others can be considered ‘mainstream’ structures and processes where evidence can be a helpful input.
Many evidence syntheses address the factors that influence the use of evidence in government and the strategies that increase the appropriate use of evidence in government, while others examine similar issues for decision-making in governments and organizations without explicitly differentiating the two. Many of the evidence syntheses addressing the factors that influence the use of evidence are of medium quality and focus on the health sector, although some address many sectors. [4, 5] The evidence syntheses addressing strategies tend to be of higher quality and focused on the health sector. [6-9] The studies included in these evidence syntheses are challenging to conduct for many reasons, including the difficulty of identifying the individuals involved in high-level behind-the-scenes decision-making, the difficulty of securing their participation given the confidentiality and time constraints that many work under, the complexity of the competing political forces at play, and the lack of simple measures of evidence use that reflect an understanding of political environments and can be applied at scale. Randomized-controlled trials are very infrequent, with only a few notable exceptions like the SPIRIT trial, [10] and natural experiments are very difficult to evaluate in ways that make causal statements possible. Medium-quality evidence syntheses also address complementary issues, such as evidence intermediaries’ use of a range of strategies to support evidence use in policymaking in the health sector, technical-advisory groups’ support for policymaking and program decision-making specifically about immunization, and cultures of evidence use in a range of non-health sectors. [11-14]

More operationally, many governments have developed handbooks to assist their staff in using evidence, [15-17] some audits of government documents have provided a window into at least the citation practices of many departments, [18] and some rich descriptions of evidence use in a single government have shed light on what this can look like ‘on the ground.’ [19]

I work in a very fast-paced environment where decisions must be made based on the best available evidence, ideally presented in formats appropriate to busy executives. So the parts of the Evidence Commission report that are most important for me are the ones that could help our authorities develop the types of ultra-rapid evidence-support system that we need in Abu Dhabi. Some examples include section 2.4 (examples of approaches to prioritizing challenges to address, especially the final column about COVID-END’s approaches), section 4.7 (living evidence products, especially living evidence syntheses that we can keep returning to), section 5.3 (strategies used by evidence intermediaries, especially rapid-evidence services), and section 6.2 (equitably distributed capacities, especially how our own internal processes can better intersect with the norms and guidance, technical assistance and global public goods). If we can create ‘wins’ that meet our current needs better, then I’m hopeful we can introduce the need to be working on multiple time horizons. No doubt we can better anticipate challenges in advance and help to build a local evidence base while we also look at what has been learned in the Gulf Cooperation Council countries, in our region and globally.

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