

Global Research Agenda on Knowledge Translation and Evidence-informed Policy-making

Project Summary and Progress Report (May 2025)

Background

In today's era of competing narratives and misinformation, grounding policy decisions in the best available evidence is more important than ever to enhance its effectiveness, transparency, and equity yet only a small portion of relevant research findings are ultimately reflected in policy and practice.

Knowledge Translation (KT) research - also referred to by other terms such as research on research use - studies the methods, mechanisms, and measurements that support the translation of research evidence into action. The field continues to grow, though progress is often limited by fragmented efforts, a lack of cooperation and uneven distribution of resources. Project-based funding models and siloed donor priorities contribute to duplicate work and neglected research gaps, preventing the development of a cohesive and responsive evidence ecosystem.

Addressing these challenges calls for a shared, inclusive research agenda shaped by a wide range of actors within the evidence ecosystem.

Project Description

To strengthen global governance for KT research, the World Health Organization (WHO) led a comprehensive research priority-setting initiative from 2023 to 2025. Coordinated by the Evidence to Policy and Impact Unit in the Research for Health Department of WHO's Science Division, this initiative involved over 130 global experts from more than 40 countries. With strategic guidance from an international Advisory Group, the initiative extended beyond health to include related sectors, notably education and environment. A wide range of stakeholders - including representatives from civil society, academia, government, United Nations agencies, and other international organizations - actively contributed to the process through structured reviews, global consultations, and a multi-round Delphi survey. Together, these activities served to identify, refine, and validate key research priorities in KT and evidence-informed policy-making (EIP).

With its global mandate and longstanding experience in research priority-setting, WHO plays a pivotal role in promoting the use of research evidence into policy and practice. This initiative aligns with WHO's Thirteenth and Fourteenth General Programmes of Work ([GPW 13](#) and [GPW 14](#)), particularly in its focus on strengthening country data capacity systems and supporting locally-led, context-sensitive KT to address pressing public health challenges. It is the first truly global research agenda of its kind that is not only involving experts from all regions but also spans across sectors beyond just health.

Methodology

WHO, supported by an international advisory group, initiated an [open call](#) in December 2023 to engage KT researchers and practitioners in a consultative prioritization process. During the initial scoping phase, a preliminary list of 121 research areas was developed through a combination of literature reviews and responses to an open survey. Between March 2023 and February 2024, WHO convened two major expert consultations and conducted two rounds of online Delphi surveys. These activities aimed to consolidate, refine, and prioritize the research areas based on their relative importance and according to their potential impact, inclusivity, and feasibility. In total, 131 KT experts from 38 countries

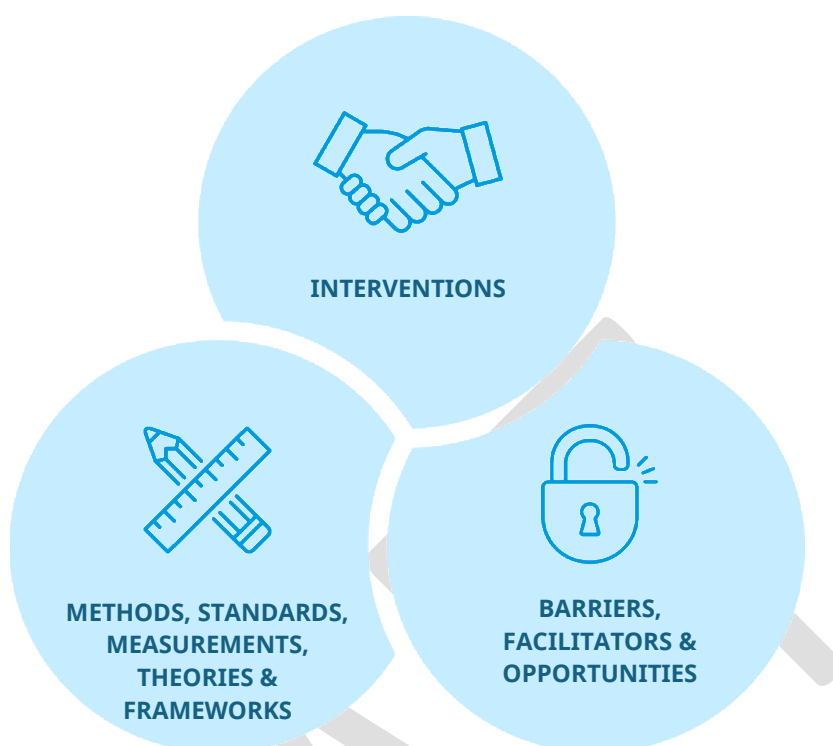
Project Goals and Impact

The priority-setting exercise aims to maximize the benefits of KT research by:

- Improving efficiencies and synergies for KT research;
- Directing and catalyzing KT research funding into priority areas;
- Enhancing understanding of successful evidence use and synthesis for policy-making;
- Fostering collaboration on KT research within health and across sectors;
- Raising awareness about KT research and evidence use for policy-making.

Results

The agenda-setting process identified three key research domains, encompassing 19 core areas established as global research priorities for KT and EIP:



1) Research on KT & EIP interventions:

This domain focuses on the design, implementation, sustainability, institutionalization, and evaluation of interventions that support decision-makers in using evidence effectively.

- a. Eight priority areas were identified, including institutionalization; evaluation; engagement processes and mechanisms; responses during public health emergencies; capacity-strengthening; scale-up; and research communication.

2) Research on barriers, facilitators, and opportunities for KT & EIP:

This domain aims to understand the factors that either enable or hinder the effective translation and uptake of research evidence into policy.

- a. Six key research priorities emerged, including research on contextual factors; the engagement of decision-makers; and the integration of diversity, equity, and inclusion (DEI). Emphasis was also placed on deepening the understanding of policy learning mechanisms; involving individuals with lived experiences; and investigating relational dynamics, including co-creation and co-production.

3) Research on KT & EIP methods, standards, measurements, theories, and frameworks:

This domain examines a range of methodological and conceptual instruments – such as methods, tools, standards, measurements, theories, models, frameworks, taxonomies, and typologies – that contribute to a deeper understanding of KT processes.

- a. Five priority areas were identified, focusing on the role of emerging technologies (e.g. artificial intelligence); decolonizing knowledge and methods; intersecting KT with basic science and other fields; harmonizing local and global knowledge; and advancing typologies, metrics, and standardizations for KT approaches.

These broad research domains are designed to be cross-cutting and applicable across various sectors and disciplines. The following three boxes present the complete set of 19 research priorities that constitute the Global Research Agenda. A comprehensive monitoring and evaluation plan will be developed to track the outcomes and impact of the research agenda over time. Implementation activities, including the creation of a collaborator network, will be carried forward by the [Global Coalition for Evidence](#).

INTERVENTIONS



1. Identify, develop, and assess strategies and approaches to **institutionalize evidence production, translation, and use.**
2. **Evaluate the impacts** of KT/EIP products and interventions.
3. **Explore engagement processes** between evidence generators, intermediaries, and users, including co-creation and co-production, for evidence uptake by decision-makers.
4. Understand, develop, and assess strategies for translating evidence during **public health emergencies.**
5. Assess **capacity-strengthening interventions**, including their adaptation and scale-up.
6. Identify, develop, and assess strategies for **scaling-up KT/EIP interventions.**
7. Identify, develop, and **assess evidence-to-policy engagement mechanisms** and best practices.
8. **Improve the communication** of research findings.

BARRIERS, FACILITATORS & OPPORTUNITIES



1. Examine **contextual factors** and their role in research uptake, implementation, and scaling-up of KT/EIP approaches at different levels.
2. Analyze **factors determining the engagement** of decision-makers in evidence uptake.
3. Integrate a **Diversity, Equity, and Inclusion (DEI)** lens into KT/EIP activities.
4. Understand and develop approaches for **policy learning** and transfer of successful KT/EIP experiences between countries and sectors.
5. **Engage individuals with lived experiences** in knowledge generation and translation.
6. Investigate factors that affect the **relationship** between evidence generators, intermediaries, users, and citizens, including **co-creation and co-production**.

METHODS, STANDARDS, MEASUREMENTS, THEORIES & FRAMEWORKS



1. Explore **innovative and evolving technologies** that support KT/EIP, such as Artificial Intelligence (AI).
2. Investigate methods, theories, and frameworks for **decolonizing** knowledge, research methods, and measures.
3. Explore methods for **intersecting KT/EIP with basic science**, clinical practice, public health, political science, and science diplomacy.
4. Explore methods for **integrating and harmonizing local and global knowledge** in the KT/EIP process, and for improving evidence contextualization.
5. Develop **typologies, metrics, and standardizations** for KT/EIP approaches.

Contact

For more information, please contact the WHO Secretariat at eidm@who.int.

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