

THE EVIPNET EUROPE MULTICOUNTRY MEETING FOR EASTERN EUROPE AND CENTRAL ASIA

18–20 FEBRUARY 2020 | BISHKEK, KYRGYZSTAN

Regular multicountry EVIPNet Europe meetings serve as a platform for communication, collaboration and capacity building within the network.

The multicountry meeting for Eastern Europe and Central Asia held in Bishkek, Kyrgyzstan, from 18 to 20 February 2020, brought together twenty network members from Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Russian Federation, Tajikistan, Ukraine and Uzbekistan.

Hosted by the Kyrgyzstan Ministry of Health, the meeting in Bishkek had four specific objectives:

- ▶ To increase the commitment to EIP and EVIPNet Europe;
- ▶ To build technical capacity in conducting rapid syntheses;
- ▶ To explore strategies for institutionalization of EIP and EVIPNet work;
- ▶ To facilitate exchange of experience and knowledge.



© WHO / MIKHAIL GRIGOREV

During a three-day meeting, participants discussed feasible strategies to further strengthen national EIP capacities and ways to institutionalize knowledge translation platforms in their respective countries.

Expert presentations stimulated discussions about the EIP landscape in EVIPNet member countries and opportunities and priorities for action. Delegates learned, among other things, about cultural contexts of decision-making and data search in English and Russian.

The practical part of the meeting was intended to train participants in conducting rapid syntheses of best available research evidence as a basis for taking strategic decisions and informing policies.

In a guided practical exercise over the course of two days, meeting participants had a unique chance to practice all the steps of developing a rapid synthesis. A practical outcome of the meeting was a number of draft rapid syntheses documents addressing selected country-specific health issues.

EVIPNet Europe

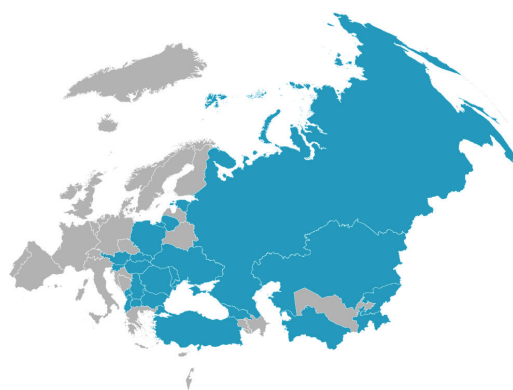
The Evidence-informed Policy Network (EVIPNet) Europe is an initiative of the WHO Regional Office for Europe supporting WHO Member States to develop culture and practice of designing health policies based on the best available research evidence.

The key objectives of the network are to:

- ▶ promote the systematic use of research evidence in policy-making to improve health systems through a networked structure;
- ▶ increase country capacity in knowledge translation;
- ▶ institutionalize knowledge translation through the establishment of knowledge translation platforms.

EVIPNet Europe operates on two levels: regional and country level. The Network Secretariat acts as a catalyzer for regional exchange of experiences and networking.

On a country level, it supports the network members in building their national capacity for evidence-informed policy-making and developing knowledge translation tools.



EVIPNet EUROPE: 23 MEMBERS



© WHO / MIKHAIL GRIGOREV

Rapid synthesis

Rapid synthesis of research evidence is a tool for decision-making in situations where time does not allow to conduct a full-fledged evidence brief for policy.

In the context of short policy timelines, a rapid synthesis of the best available scientific evidence on pressing health issues can provide policy-makers with the solid ground to inform their decisions.

A rapid synthesis addresses health- or social-system questions, and depending on the complexity of the issue, can have several timelines from 3 to 90 days.

"We appreciate what we have learned in this meeting. Very often capacity building offered by international partners and donors in Ukraine does not involve Ministry of Health officials, while we equally need such training."

Representative of the Ministry
of Health, Ukraine

Learning from experience

EVIPNet Europe uses experience from other countries as an effective way to strengthen evidence-informed policy-making. In this meeting, participants learned from four country cases presented by national EIP champions.

The Estonian example of using an evidence brief for policy (EBP) to address obesity demonstrated that for instance increasing tax on sweetened beverages has among other policy options potential to reduce sugar consumption.

Development of an evidence brief for policy in Moldova illustrated that this process may take several iterations and amendments. Initially aimed to demonstrate the adverse effects of alcohol on health, its final iteration stimulated changes in legislation on alcohol sale.

Situation analyses conducted in Kazakhstan and Kyrgyzstan to better understand the EIP landscape and opportunities for its institutionalization identified similar priorities for immediate action: improving skills and practice to obtain and apply high-quality research evidence.

Institutionalizing EIP in countries

The meeting in Bishkek served as a platform for exploring country opportunities to further strengthen EIP capacity and institutionalize knowledge translation platforms (KTPs). The WHO Secretariat of EVIPNet Europe facilitated a discussion based on the results of the SWOT-analyses countries were asked to conduct prior to the meeting.

Further sessions facilitated by the WHO Secretariat served as a basis for planning the next steps. Results of a rapid EIP stakeholder mapping exercise

conducted by the Secretariat identified a very limited number of institutions producing and synthesizing evidence for policy-making in the member countries represented at the meeting.

A presentation of four potential KTP structures invited country delegations to discuss which KTP structure would be most appropriate to their respective country contexts, what resources and conditions are required to facilitate its institutionalization, as well as immediate and longer-term actions.