

## What are the considerations for living evidence in policy decision-making?

### EXPLANATORY STATEMENT

Project ID: 37509

Chief Investigator: Dr Samantha Chakraborty

Email: [samantha.chakraborty@monash.edu](mailto:samantha.chakraborty@monash.edu)

You are invited to take part in this study. Please read this Explanatory Statement in full before deciding whether or not to participate in this research. If you would like further information regarding any aspect of this project, you are encouraged to contact Dr Samantha Chakraborty via [samantha.chakraborty@monash.edu](mailto:samantha.chakraborty@monash.edu).

#### What we mean by living evidence

Living evidence syntheses are continually updated, systematically appraised, summaries of the body of research evidence so that they are always up to date. This means that new research is added as it is completed and new policy contexts or changes in the environment are accommodated.

#### Why is this research important?

There is growing interest in using living evidence in health decision-making. However, we know very little about how to adopt living evidence into health policy effectively.

The aim of this study is to explore the experiences of knowledge brokers and policymakers who have used living evidence to inform health policy and identify opportunities and challenges for (i) knowledge brokers when considering whether to translate evidence, and (ii) policymakers when considering whether to use or when using living evidence to inform health policy. Our objectives are to: describe the experience of knowledge brokers when translating/policymakers when using living evidence syntheses; understand the capability and willingness of knowledge brokers/policymakers to use living evidence synthesis, and the circumstances under

which living evidence approaches may be considered by policymakers; identify challenges and opportunities for translating living evidence synthesis into health policy; and prioritise issues to address in a research program.

Knowledge brokers and government policy makers **who have used living evidence to support a policy decision** will be asked to participate in an interview (via telephone or zoom) and/or online roundtable discussion to: 1. explore current perceptions of knowledge brokers/policymakers regarding living evidence synthesis, 2. Understand conditions under which living evidence approaches may be helpful for policymakers, and 3. Identify challenges and opportunities for translating living evidence into healthcare policy and 4. Help to prioritise the issues to be addressed in a research program.

#### What does the research involve?

Participation in the interview will require you to reflect on your experiences related to translating/using living evidence synthesis products to develop health policy. Responses from the interviews will be collated and presented at the roundtable discussion for further clarification and selection of priority areas for research.

The interview will take approximately 30 minutes and the roundtable discussion will take approximately 1 hour. If you are unable to participate in both the interview and the roundtable but would like to participate in one of these activities, you are welcome to do so. The interviews and roundtable discussions will be conducted via zoom and audio-recorded to ensure that all concepts discussed are captured. If you

would like to participate, you will be asked to nominate up to three dates and times for the interview.

### **Why were you chosen for this research?**

You have been identified as a knowledge broker or government policymaker who may have had the opportunity to use living evidence synthesis products (such as living systematic reviews, living evidence briefs or living guidelines) in health policy decisions.

### **Source of funding**

This project is being conducted as a collaboration between Monash University, the World Health Organization, Pan-African Collective for Evidence and National Institute for Health and Care Excellence. No funding has been received for this project.

### **Consenting to participate in the project and withdrawing from the research**

By indicating your availability for an interview and/or roundtable and returning this information to the project team, you are providing your consent to participate. Your consent to participate in the study and to be audio-recorded will be confirmed verbally before the interview / roundtable. You may withdraw from the research at any time up until the point at which the data has been analysed. If you choose to withdraw, any information you have provided, that can be attributed to you, will be deleted.

### **Possible benefits and risks to participants**

It is unlikely that there will be any direct benefit to you as a result of participating in this study. However, this study will provide you with the opportunity to reflect on your experiences with using or considering the use of living evidence synthesis in health policy, and it will highlight opportunities and gaps that can be addressed in future research and other activities. By understanding the opportunities and challenges from the perspective of knowledge brokers/policymaker

users of living evidence synthesis, researchers can design, produce and disseminate living evidence synthesis so that these can be used by policymakers to make evidence-informed health policy decisions. It is expected that participation may represent a minor inconvenience as a result of the time taken to participate.

### **Confidentiality**

Only the Monash University research team will have access to the study data through password-protected accounts. Only non-identifiable data will be reported in study publications, and no individual people will be able to be identified from any reports arising from the research.

### **Storage of data**

The interview and roundtable will be audio recorded. All electronic study data will be stored at Monash University in a secure research environment. Monash University requires that data and study documentation is retained for at least five years following study publication.

### **Results**

We will prepare a plain-language summary of the main findings to be made publicly available. Should you wish to receive a summary of findings, please contact the research team. The project may also form the basis of academic publications and conference presentations. No individual participating in the research will be identifiable in any reports or publications.

### **Complaints**

Should you have any concerns or complaints about the conduct of the project, you are welcome to contact the Executive Officer, Monash University Human Research Ethics Committee (MUHREC):

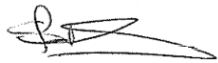
Executive Officer  
Monash University Human Research Ethics  
Committee (MUHREC)  
Room 111, Chancellery Building D,  
26 Sports Walk, Clayton Campus  
Research Office  
Monash University VIC 3800

Tel: +61 3 9905 2052

Email: [muhrec@monash.edu](mailto:muhrec@monash.edu)

Fax: +61 3 9905 3831

Thank you,



Dr Samantha Chakraborty

Senior Research Fellow  
Cochrane Australia and the Australian Living Evidence  
Collaboration  
School of Public Health and Preventive Medicine  
Monash University