



Enhancing Evidence Infrastructure to Inform Policy: Learning from International Experience

Proceedings Report of the 2018 Converge3
Symposium



About this Report

This report was prepared by Converge3 to document the proceedings of the 2018 Converge3 Symposium. Celine Cressman was responsible for preparing the initial draft of the report, which was reviewed by the symposium speakers and other members of the Converge3 team. Converge3 would like to thank a number of people who were integral to organizing the 2018 Converge3 Symposium, including Christine Chan, Celine Cressman, Vinusha Gunaseelan and Joy Perez. Converge3 receives funding from the Province of Ontario. The views expressed in this report are those of the authors and do not necessarily reflect those of the Province of Ontario.

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About Converge3

Converge3 is a policy research centre based in the Institute of Health Policy, Management and Evaluation at the University of Toronto, that focuses on integrating health, economic and equity evidence to inform policy. The Centre is funded by the Province of Ontario and includes multiple partner organizations, including Li Ka Shing Knowledge Institute at St. Michael's Hospital, McMaster University, Ottawa Hospital Research Institute, ICES, Health Quality Ontario, Public Health Ontario, and the Ministry of Health and Long-Term Care.

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Converge3 is a new centre based in the Institute of Health Policy, Management and Evaluation (IHPME) at the University of Toronto that focuses on integrating health, economic and equity evidence to inform policy. The Centre is funded by the Ontario Ministry of Health and Long-Term Care and involves multiple partner organizations, including the Li Ka Shing Knowledge Institute at St. Michael's Hospital, McMaster University, the Ottawa Hospital Research Institute, ICES, Health Quality Ontario, and Public Health Ontario.

Converge3's inaugural Symposium, entitled: ***Enhancing evidence infrastructure to inform policy: Learning from international experience***, was held on 22 June 2018 in Toronto. The aim for the half-day event was to advance participants' knowledge and understanding of methods and approaches for integrating evidence into policy processes, with a specific focus on partnerships between policy-makers, researchers and the public. The Symposium featured three invited speakers representing different international evidence-informed policy models: (i) Mara Airoidi, the Director of the Government Outcomes Lab (in the United Kingdom); (ii) Mary Ann Bates, the Executive Director of J-PAL North America; and, (iii) Stephanie Lee, the Director of the Washington State Institute for Public Policy.

The invited speakers explained the unique contexts in which they contribute to evidence-informed-policy. They shared their experiences and advice on how to effectively generate and sustain partnerships with stakeholders from across governments, academia and the public, and how to have meaningful impact across stakeholder groups. The Converge3 Symposium provided the opportunity to learn from these leaders, as their experiences will help inform how Converge3 can evolve most effectively and efficiently.

Symposium attendees represented stakeholders from multiple Government Ministries (Ministry of Health and Long-Term Care, Ministry of Children and Youth Services, Ministry of Community and Social Services), health care agencies, public and patient representatives, academia and members of the broader research and policy community. A total of 66 attendees participated.



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Integrating health, economic and equity evidence to inform policy

Summary of the Program

Introduction & Origin of Converge3:

Adalsteinn Brown, Co-Chair, Converge3 Governance Committee

The afternoon began with opening remarks from Dr. Adalsteinn Brown who is the Co-Chair of Converge3's Governance Board as well as the Dean of the Dalla Lana School of Public Health at the University of Toronto. As the original architect of the Centre, Dr. Brown introduced the day and briefly outlined the origin of Converge3. Reflecting on his years in Government and academia he noted that when he started his career, evidence-based policy was not taken for granted. Even 10-15 years ago, it was felt that basing decisions on evidence would take something out of care, and providers might become stuck in 'cookbook' medicine. Dr. Brown suggested there is a similar and fairly large shift in policy that is happening now. His message was that Converge3 aims to support the pursuit of more informed decisions through engaged partnerships among key stakeholders, to lead to positive impacts—something that all stakeholders want.



Mark Dobrow
Executive Director, Converge3



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Overview of Converge3

Mark Dobrow, Executive Director, Converge3

Next, Dr. Mark Dobrow, the Executive Director of Converge3 and Dr. Ahmed Bayoumi, the Scientific Director of Converge3 provided an overview of the work Converge3 is undertaking and the services they offer Ontario health and social system stakeholders. Dr. Dobrow explained the context for building a centre that contributes to evidence-informed policy as the following:

- Persistent cost pressures / constrained growth
- Longstanding focus on effectiveness/ efficiency
- Increased attention on value/sustainability
- Increased accountability
- Increased expectations for evidence

He also outlined key infrastructure elements needed to support evidence-informed policy:

- Identification of policy/program priorities and questions
- Identification of relevant policy/program options
- Development of robust evidence base to inform policy
- Accessibility to and consultation with appropriate experts and knowledge users in a timely fashion
- Development of practical guidance that is focused, in a useful format, and trusted
- Facilitating the understanding/use of evidence/guidance
- Supporting ongoing capacity/capability building

Dr. Dobrow noted that the name Converge3 represents the integration of perspectives, approaches, and types of evidence:

- Integrating perspectives of policymakers, researchers and the public
- Integrating approaches that are relevant, engaged and rigorous
- Integrating evidence on health, economic and equity impacts

He outlined Converge3's five core functions:

- Ongoing stakeholder engagement to: identify/prioritize policy research questions; identify relevant Ontario-based research expertise; and review/interpret/apply evidence
- Analyses and evidence syntheses of policy research questions and methods questions
- Reports: evidence reports, guidance reports, methods reports and knowledge translation reports
- Knowledge translation through: knowledge user dialogues; plain language report summaries; traditional/social media; and, academic publications
- Capacity building through masterclasses, symposia and fellowships



Ahmed Bayoumi
Scientific Director, Converge3



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Integrating health, economic and equity evidence to inform policy

Converge3 represents the integration of perspectives of policymakers, researchers and the public; integration of approaches that are relevant, engaged and rigorous; and integration of evidence on health, economic and equity impacts.

Ahmed Bayoumi, Scientific Director, Converge3

Dr. Bayoumi presented an example of the work Converge3 has done. One of the first questions Converge3 undertook was: *What is the optimal mix of effective mental health and addictions programs and services for immigrant, refugee, ethno-cultural and racialized (IRER) populations in Ontario?* The focus was on understanding when it is better to have mainstream services that are adapted for specific populations or to have programs and services that are designed for specific populations. Converge3's partner in this project, the Centre for Addiction and Mental Health's Provincial System Support Program, conducted a scoping review of the scientific and grey literature.

He explained that Converge3 identified this as an important policy question because IRER populations in Canada access mental health and addiction services less often than the general population, face numerous barriers when accessing services, and have poorer mental health outcomes. This is a timely question because of the recent influx of refugee populations with a high prevalence of mental health issues.

Using the three lenses, Converge3 then assessed:

- **Health:** What approaches result in optimal mental health outcomes?
- **Equity:** How can we address disparities in care?
- **Economics:** How can we deliver services in a manner that are cost-effective?

The scoping review demonstrated several large-scale examples of culturally specific interventions. There is also evidence that culturally adapted psychotherapies improve treatment outcomes.

However, there was no evidence to directly compare culturally adapted and culturally specific interventions.

The Converge3 process involves: Priority setting exercise → Question selection → Partner selection → Evidence reports → Recommendations → Knowledge user dialogue → Final recommendation. The example of IRER mental health and addictions programs is at the evidence report stage. Recommendations, knowledge user dialogue and final recommendation are forthcoming.

Dr. Bayoumi then explained that Converge3 came to the current research questions through a priority-setting exercise that involved document review, policy maker consultations, and a public opinion survey. The resulting top 10 priority themes were:

- Ideal mix of **home care**, long-term care and other forms of supportive housing
- **Mental health** and wellness resiliency among at-risk populations
- Increase **housing** stock, including private sector sources of capital
- **Access to care** in rural and remote areas
- **New health care facilities** considering the changing demographics and models of care
- Accessibility and affordability to **healthy foods in First Nations communities**
- Plan for **future long-term care needs** of Ontarians
- Create **built environments** that promote physical activity

Question selection is based on the topic being: a priority for Ontario health policy; framed as a policy research question; having buy-in within the Ministry of Health and Long-Term Care and other Ministries; having a policy champion; and being feasible to answer within the time horizon.

- Ensure the uptake of **low-income health benefits**
- Redirect non-urgent patients away from **emergency departments**

Question selection is based on the topic being: a priority for Ontario health policy; framed as a policy research question; having buy-in within the Ministry of Health and Long-Term Care and other Ministries; having a policy champion; and being feasible to answer within the time horizon. From the identified priorities, a research question must be generated. Converge3 will also develop methodological papers to complement its other reports. Dr. Bayoumi concluded by stating Converge3's aspiration is to meaningfully inform policy decisions with the best available evidence and policy research methods, noting that Converge3 will be evaluated by its contributions to policy.

International Perspectives on Informing Policy: Speaker Presentations

The aim of the Symposium Speaker Presentations was for Symposium participants to gain an understanding of each of the three organizations' stage of evolution, scope and scale to contextualize their key learnings on how their organizations contribute to evidence-informed policy.

Each invited speaker provided a brief overview of their organization, explaining how they work with key partners and stakeholders to (a) identify and prioritize what policy questions they will work on, and/or (b) translate evidence. They also each provided an example of where their organization used evidence effectively and/or efficiently to inform, shape or shift policy.



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Integrating health, economic and equity evidence to inform policy

Mary Ann Bates

Executive Director, J-PAL North America

J-PAL was founded in 2003 at the Massachusetts Institute of Technology (MIT) with a global perspective and the objective to support the use of, and encourage policy changes based on results of high quality evidence. J-PAL North America is one of six regional offices, with 40 full-time staff. J-PAL's mission is to ensure that policies are driven by evidence and that research is translated into action. They do this by focusing their efforts on three different areas:

- Research **evaluations**: J-PAL works in support of that mission by supporting evaluations of anti-poverty programs
- Policy **outreach**: reaching out to decision-makers to help them understand the results of evaluations and to encourage the replication and scale-up of effective programs
- **Capacity building**: by building the capacity of their partners to use and generate evidence through trainings and technical assistance

J-PAL relies on a large network of affiliated professors, many of whom are economists. These independent academics are united by their use of randomized evaluations to test critical policy questions broadly related to poverty (e.g. interventions related to agriculture, crime, education, the environment, finance, health care, labor markets, and governance).

There is often a divide between innovative government leaders and academic researchers. Rigorous evaluations take a great deal of coordination, effort and funding to accomplish, specifically:

- Governments do not know which academics match with their interests and policy questions
- Academics do not know which governments match their interests and have the capability or capacity for a study
- Both policymakers and researchers have questions they want to answer – but they may be unaware of the other's interest of the topic in question

Policymakers then often have to make decisions without research to support those decisions, and researchers may be unable to otherwise connect on projects. In response to these challenges, J-PAL seeks to:

- Find ways to bridge the knowledge gaps between researchers and policymakers.
- Find ways to provide technical assistance to prepare jurisdictions for evaluations, and support those evaluations of innovative solutions to eradicating poverty.
- Invest in long-term collaborations between researchers and policymakers to institutionalize an evidence-driven approach to policymaking.

After launching the North American office, J-PAL took stock of what they had already done, and realized that the most powerful interventions impacting the most people often involved working directly with government partners. J-PAL wanted to play a role in launching and supporting more work with government partners. Out of this came the State and Local Innovation Initiative.

After launching the North American office, J-PAL took stock of what they had already done, and realized that the most powerful interventions impacting the most people often involved working directly with government partners.

Ms. Bates described what made for successful partnerships at J-PAL:

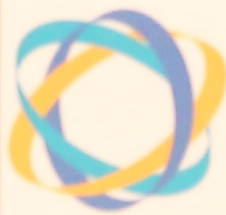
- Institutional relationships and matchmaking—a strong partnership makes for good evaluation
- Questions that are motivated by government priorities, such that when brought together with an academic orientation the results can be useful in the longer term, not just for a one-off evaluation

She also reflected on the importance of critical infrastructure:

- Linked administrative data that is collected for purposes other than research.
- Collecting original data is the most expensive part of any evaluation, so must think about what outcomes Governments, schools, hospitals, and non-profits already track. It is important to consider: is that data collected for the control group too; and, can we link across different data sets?

The key takeaways from J-PAL's presentation were to:

- Ask ahead of time: how will we really know if a program worked?
- Importance of genuine long-term partnerships with researchers and Governments
- Linked administrative data is essential



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*Integrating health, economic and
equity evidence to inform policy*

The Washington State Institute for Public Policy (WSIPP) was established by the State Legislature in 1983 and provides a longitudinal perspective on approaches to injecting evidence into policy making processes. Ms. Lee outlined the structure and process of the evidence-to-policy work WSIPP undertakes:

- **Governance structure:** WSIPP has a unique governance structure. Staff are non-partisan, and governance is bi-partisan, including members representing each party and each chamber of the legislature, as well as representatives from the Governor's office and state institutions of higher education. WSIPP was established via a joint resolution, but is not in statute. WSIPP is situated at The Evergreen State College, which provides some resources and independence.
- **Process:** Projects are assigned via legislative bills or through the Board of Directors. Funding is primarily project-based and typically related to crime, child welfare, education, public health, behavioural health or health care policy. WSIPP's approach is to write academically rigorous and timely reports for a lay audience, and make them publicly available through their website. WSIPP aims to demonstrate its value through the evidence they bring to policymakers.

In terms of research methods, WSIPP often conducts primary outcome evaluations, but also do evidence syntheses about a type or set of interventions. They catalogue all cost-benefit analyses they have done over past years. Benefit-cost analyses typically answer three core questions:

1. What is the evidence?
 - a. Find all program evaluations on a given topic.
 - b. Select only those that meet standards for rigour (e.g., is there a comparison group? Statistical controls? Measures of causality?)
 - c. Meta-analyze the average effect on each outcome using a standardized metric; how much change can we expect? (e.g., how much change do we observe in crime on average? How much change do we observe in high school graduation on average?)
2. What are the economics?
 - a. What is the 'price' of each outcome? (e.g., in a policy question related to crime, would assess costs to the criminal justice system as well as to victims; for a question about high school graduation, might assess labour market earnings and health care utilization and costs)
3. What is the risk?
 - a. Include what we know about uncertainty across many domains (e.g., program effectiveness, general assumptions about discount rate and value of a statistical life)
 - b. Conduct Monte Carlo analysis to assess how likely for the program to at least 'break even' (pay for itself over the long term)

WSIPP has a unique governance structure. Staff are non-partisan, and governance is bi-partisan, including members representing each party and each chamber of the legislature, as well as representatives from the Governor's office and state institutions of higher education.

WSIPP measures the impact of their work in terms of budgetary changes (e.g., impact of WSIPP work on budget allocations for evidence-based services and the impact of those services related to juvenile justice, corrections, and education) and in terms of practice changes (e.g., enhancing quality assurance and increasing the provision of evidence-based services in child mental health).



Converge3

Integrating health, economic and equity evidence to inform policy

Mara Airoidi Director, GO Lab

The Government Outcomes Lab (GO Lab) is a centre of academic research and practice based in the Blavatnik School of Government at the University of Oxford. The GO Lab was formed in 2016 through a joint partnership between the UK Government and the University of Oxford. The GO Lab seeks to deepen the understanding of outcomes-based models, including the impacts of commissioning approaches (e.g., social impact bonds), and provide independent support, data, and evidence on what works (and what doesn't), how, when and for whom.

At the root of the work GO Lab does, is the belief that there is room to improve the way Government commissions public services in order to deliver greater social impact and value—focusing on services that tackle complex and social issues across health, social care, criminal justice, employment and education.

With the ambition of informing Government, GO Lab aims to improve the provision of public services through research, policy advice and cross-sector collaboration. Dr. Airoidi reflected on what it means to 'inform policy' and emphasized the need to think about **for whom** you are informing policy; **why** you are informing policy; and **how** you are informing policy. In the case of GO Lab:

- Why they are informing policy: For people—they want to make the lives of those in the community better. Why social impact bonds: they have recently been very popular, but their impact and effectiveness has not been well studied, thus a natural experiment to look at in the UK.

- Who are they trying to inform: Work closely with three central governments: funder; cabinet office and treasury; and Ministries that work in this area (e.g., justice, housing, children). They are also actively present on the ground—there are 400+ agencies in UK and GO Lab works with 80 to 90. Having this double approach of top-down and ground-up is very important to Go Lab's vision and success.
- How they are informing: **Research** – generating, synthesizing and communicating knowledge for practitioners and academics; **Advise** – developing commissioners' skills through learning opportunities and advice, and through connecting people and nurturing peer-to-peer network; **Connect** – raising awareness and debate by convening academics and practitioners, celebrating good practice, and via public communications

Importantly, Dr. Airoidi noted that research is co-produced with the intended users, but acknowledged that this takes a lot of time. Together, they can answer: does this governance/ financing mechanism work in improving outcomes? Under which circumstances? Why? For whom? How?

In their advising role, they run a 'Knowledge Hub' (which includes how-to guides, webinars, events and workshops, advice surgeries, a projects database) and facilitate communities of practice.

At the root of the work GO Lab does, is the belief that there is room to improve the way Government commissions public services in order to deliver greater social impact and value.

Reflecting on the personal journey of leading GO Lab through its first 18 months, Dr. Airoidi shared that GO Lab is mission driven: 'a world better served'. The work is extremely rewarding: offering daily opportunities to teach and to learn. It is also extremely hard: tensions are unavoidable, and it takes time and effort to manage them. She concluded that the 'magic dust' of informing policy with evidence is **creating a learning culture**, meaning 'the real failure is failing to learn'; being open to learning means not being afraid to take risks and to be surprised by the answers.



Reflections on Effective and Efficient Approaches for Developing Evidence Infrastructure to Inform Policy: Panel Discussion

Panelists:

Mara Airoidi - Director, GO Lab

Mary Ann Bates - Executive Director, J-PAL North America

Stephanie Lee - Director, WSIPP

Moderator:

Mark Dobrow, Executive Director, Converge3

The aim of the Panel Discussion was to provide the opportunity for Symposium participants to interact directly with the Panel to reflect on effective and efficient approaches to develop the evidence infrastructure (capacities and capabilities) needed to inform policy. Dr. Dobrow moderated the discussion with questions taken from the audience.

Audience question: *Can you elaborate on the tensions you experience in working with government and/or other stakeholders?*

→ **M. AIROLDI**

Including results even when and/or if they are negative. You must be advising or evaluating; it is difficult to do both.

→ **M.A. BATES:**

The perception that evaluation is too hard. We must work to tell the story that evaluation is easier to build in than you (the community) think(s)

→ **S. LEE**

The expectation that we will produce definitive answers (e.g., that a policy option definitively works or definitively doesn't). Sometimes that not achievable, especially given timelines.

Audience question: *For those groups nested in academia, how important are those ties to academia, and do you use graduate students?*

→ **M. AIROLDI**

We are embedded in the university, and the ethos there is to do independent research. We do not hesitate to say 'no' to requests for research with a set agenda. The University of Oxford has a worldwide reputation, which is also very helpful in recruiting talents as part of the team and to produce rigorous research.

→ **M.A. BATES:**

Being nested in academia is a huge part of our identity. This is important because it means J-PAL has access to faculty who have aligned interests. And yes, we use grad students a lot. They are not only a high-quality resource at a low cost but also contributes to growing a whole cohort of people who will go onto do this type of research.

→ **S. LEE**

We are not embedded but the informal relationships with state research institutions are very important because they give a check on the integrity of the work we are doing. Sometimes we reach out and ask for methodological advice and review.

Audience question: *How do you engage with users in terms of patient and citizen perspectives? Is it early on, when deciding what topic is relevant, or is it only after policymakers come to you with what they deem relevant? And thinking about those who will be affected by the policies, do you consider them as possibly contributing to research or evidence?*

→ **M. AIROLDI**

The main users of GO Lab's work is commissioners, especially in local government. We are in the process of designing focus groups with communities to define which outcomes are important to the users. Also, we interview people as part of program evaluation in terms of what has changed and what has not and has this addressed the main issue.

→ **M.A. BATES:**

Some of J-PAL's research does not engage with the community it studies. Studies that engage with providers are easier to do this with (e.g., city of Washington DC testing the use of body-worn cameras by police—researchers engaged with both police and citizens in terms of: what would they like to have answered with this study; what do they think answers will be, etc.; and then shared the results with those communities). Engaging community is very important in terms of making sure you are asking the right question. J-PAL also relies on elected officials to be representing voices of their constituents—this is a more efficient process than asking citizens every time, but we could do more with respect to user engagement.

→ **S. LEE**

WSIPP does not directly engage with citizens other than making reports available. However, the public is involved on the front end through defining research questions—usually this comes through some sort of public engagement process, and filtered through legislators.

Audience question: *Having lived through significant political change over the last few years, can you comment on how to react to changing political contexts, and how that has affected your work or organizations?*

→ **M. AIROLDI**

Focusing on what difference you are trying to make to people who are having a difficult time, in GO Lab's case, is directive. Everyone agrees that the way we are delivering public services is unsatisfactory for some sector of society. Regardless of political orientation, everyone agrees something needs to be done to provide more opportunities to vulnerable people—the narrative and rationale and emphasis that you put around it will change (i.e., efficiency vs. vulnerable sectors), and both are true but at the end of the day flourishing communities is a point of agreement. We try to link work to these outcomes for society.

→ **M.A. BATES:**

J-PAL works with both city and state governments, that have representation from both parties. Even without a major change, any political transition can result in long-term funding being cut short. Structural things can be done from the start, like planning for evaluations, and planning for data sharing agreements can help make sure that commitments are followed through on. On the political side, transparency and trust are important. Evidence can be politically charged, but can often be framed in a way that both sides can agree on (e.g., ensuring public funds are being used wisely). Sometimes it is a question of shifting the framing around *why* you are doing the work, without losing focus on what you are doing.

→ **S. LEE**

WSIPP has had continued success over multiple administrations, one tool being cost-benefit analysis/cost-effectiveness analysis, because it is something both sides are interested in. Efficiency and controlling spending is always appealing. If you can demonstrate improved outcomes while spending less money (or projecting long-term monetary benefits), different groups can find something of value in there. Transparency and quality is important to showing WSIPP can be responsive to whomever is in charge.

Audience question: *Thinking about social policy—how do you reconcile differences of opinion? For example, with ‘stop and frisk’ policy in Ontario, the Black community is against it, but there are also some reasonable arguments for it. Another example is HIV policy and stigma. When engaging with policymakers how do you deal with these sorts of controversial topics, and how does this influence recommendations?*

→ **M. AIROLDI**

We cannot control the interpretation of results. As researchers, we can only put out results in a neutral way, and have to expect there will be different interpretations.

→ **M.A. BATES:**

Some of those issues are not really appropriate for RCTs, e.g., no government wants to randomize a stop and frisk policy. When Washington, DC looked at body-worn cameras, that was a very controversial topic connected to race and policing, so testing the effect of the cameras was helpful, and engaging with the community and with police from the beginning was really important. For topics that people love to disagree about, running an experiment can be really helpful. Another example is with an abstinence-only program in Kenya. That was a super controversial topic but the results of the RCT were powerful. Study results won't solve ideological debates but they are a useful input that can be included in decision-making.

→ **S. LEE**

We try to make sure to include the context of different policies—the history of a particular policy is really important when we are writing up the background of a report— and we try to do it in the most neutral way possible, even if that makes people unhappy. We can talk about history and about if it is or isn't working, but sometimes that interplay is difficult to speak to.

Audience question: *Where does behavioural economics fit? It has been part of the zeitgeist in public policy over last few years, how does this tie into work you are doing?*

→ **M. AIROLDI**

GO Lab is starting to work with a behavioural psychology team, looking at why something works and under what circumstances and for whom. This requires explicitly articulating what caused a change in behavior, and so GO Lab drew from the literature that exists to justify the assumption. The outcome is what you see at the end but also want to know why this particular policy, under these circumstances etc. Behavioural economics is a tool to help understand what works and when.

→ **M.A. BATES:**

It is an arm of the work J-PAL does. Most of what J-PAL does focuses on economics and a subset of that is behavioural economics. Particularly the work with the Federal Government, e.g., small nudges, like sent letters, reminders etc., and much of work on education, e.g., sending texts to parents, in their home language. It has also served to challenge some of the assumptions around how humans behave and whether we are always rational or not.

→ **S. LEE**

WSIPP also looks at small nudge evaluations, e.g., meta analyses of text messages for student exams, and phone calls to patients after hospital discharge to ensure they follow-up with doctors. Interest is growing for this type of evaluation.

Audience question: *There is lots of talk about “evidence” today. In the diagram for Converge3, there were policymakers, researchers and the public. I imagine there is a difference within these groups about what constitutes evidence, and what is reliable and sufficient. It is important that people are speaking the same language. Do you have recommendations about what can help all the parties have as much of a common understanding as possible and what gets in the way of that? What suggestions do you have?*

→ **M. AIROLDI**

As part of my teaching to international students in public policy, we have a course on how we develop evidence and how to use evidence. What is very helpful is looking at examples of public policy, and discussing whether they think it worked and why, and have a debate about the evidence. It helps to look at narratives and evidence. You need to dig down and discuss what might have happened otherwise.

→ **M.A. BATES**

The kind of evidence you need depends on the type of question you are asking. Since J-PAL focuses on RCTs it can sometimes feel like we are a hammer looking for nails. If you flip that to: what’s the question we are asking? If you want to know: what is the problem we are facing? Then you need a needs assessment. Helping people think about what is the question you want to answer and what is the best way to answer it is important. We also try to stay away from the idea of a “gold standard”. You first need to answer if you’re looking for causal evidence or what was the impact of a specific thing, or are you asking a different question around: “does this problem exist here too”. In terms of using the same language, J-PAL has worked on this too. If you just go with people’s stories, some are louder than others. It is important to do an analysis, and try to use research to show the average.

→ **S. LEE**

We try to speak to the average. Not what works for one person, but on average. If we are serving the whole population, need to show averages, which can be boring. We try to step outside individual experience and show what will be best for the population on average. We are trying to help legislators spend dollars on what will produce the most good for the most people.

Audience question: *What characterizes a good question, in terms of how you work with Government stakeholders and with researchers? Some of the experience we have had is that what a researcher finds to be a good question may not align with what Government thinks is a good question. We also find a lot of variation within Government Ministries about what that question should be. It affects the types of evidence you go out and seek and the nature of that evidence. What is your experience with identifying and characterizing a good question?*

→ **M. AIROLDI**

I agree with identifying the underlying mechanism. Another important question is: does it make a material difference? If not material, it is not as interesting in policy-making. Some things that are interesting to the academic community don't make a big difference to outcomes. Another question to ask is: who is the user of this evidence? And then maybe I can engage the user in an earlier stage. The earlier you engage the user, the more likely they are to use the results.

→ **M.A. BATES:**

The importance of underlying mechanisms is hard to overstate. For example, when I make the pitch to a foundation and talk about them giving money to improve the world, you don't just want to pay for an evaluation of whether a specific program in Camden NJ helped some people for a short time. Rather, if you can unpack some underlying mechanism about *why* it worked, that is more useful. For example, persistence in community colleges is very low in the US. Many people start and very few complete a degree—one could imagine testing a bundle of things, but at the end of the day it is going to be hard to know what worked. But if you can think about answering questions of what components worked and why, the impacts are useful to a far broader degree, beyond original context, by doing a bunch of randomized experiments. I would argue from a societal perspective, that if we are spending public dollars, the results should be applicable to many.

→ **S. LEE**

It is important that the question doesn't assume an outcome. WSIPP often gets draft language that assumes a particular intervention is not working. We explain that a more useful question is: what is the evidence of the positive or negative outcomes; what are the harms and benefits of this intervention? Framing must be neutral.

Audience question: *Given that this kind of work involves various levels of government, how do you generalize the results? And what do you do about spread when you get a result?*

→ **M. AIROLDI**

Agree that it's messy. Have a rule of thumb that it's important to think of the potential user, especially if going to scale it up, who is up-taking it and who should we influence, and have them on board as soon as you can. We try to create a community of practice, the sooner the better.

→ **M.A. BATES:**

Sometimes you scale up a result because you're working with an entity that has the ability to do so. In other cases, it's about answering a debate where some evidence can shift the thinking. For example, J-PAL looked at whether charging a small amount for mosquito nets in Kenya would result in higher uptake than if they were free. There was a huge debate in international development about this issue. We found that free was dramatically better and this finding impacted policy internationally on many issues. How that happens in practice is through academic papers, policy briefs, one-on-one conversations with key decision makers, with media—there are lots of channels to influence and in truth the process is pretty messy.

→ **S. LEE**

WSIPP has a different take given that we are a service for the Government. We don't do any advocacy of results. No media outreach. We leave that to decision-makers, and instead let data and reports speak for themselves (posted on website). Some things have been taken up and spread nationally. We don't consider spread to be part of WSIPP's job. We leave it to those who have the money and who are tasked with creating policy.

Audience question: *Evidence-informed policy has been evolving, for a number of years, a number of decades. What is the one thing your organization would change to have greater impact moving forward?*

→ **M. AIROLDI**

Linked datasets are the biggest barrier. Also, when you work with agencies, you create data infrastructure. If you can show them that collecting that information is not so complicated and can improve your decision-making if you make it more frequent and longer-term—if you can show them that they can use it to improve their own work, we can create a culture of data generation and use rather than just a one-time use/slice in time. When you do the evaluation, you should leverage the opportunity to generate data and use it all along the way to inform decisions.

→ **M.A. BATES:**

Cannot overstate the importance of infrastructure, and specifically linked databases, that are shared across academia and government. Better infrastructure for actual data, better linked across many entities, and mechanisms to share it (and ensure it is used ethically and safely) would be huge.

→ **S. LEE**

WSIPP has lots of struggles to access and clean and use data. We hope and dream for the ability to leverage historical data, because the service landscape has changed so much, and in many areas, the state is now providing so many more services that have been tested and demonstrated to be effective than in the past. Ideally, we could capture and demonstrate changes over time and learn from that. It would be great to know how policy changes have impacted outcomes over time.

Closing Remarks

Ahmed Bayoumi, Scientific Director, Converge3

Dr. Bayoumi provided some summative reflections on the day. He noted that while all the centres share some common goals, focusing on some of the differences in approaches would be most informative for learning how we can improve. He invited all the centres to share experiences and learn from one another going forward:

1. **Evidence to Guidance:** Some centres only have a mandate to generate, collect, or collate evidence and stop short of issuing recommendations or guidance based on that evidence; that is, their mandate is to produce inputs only. Other centers, like Converge3, have a mandate to build upon the evidence and produce guidance for health policy stakeholders.
2. **Integration of Economic Evidence:** While WSIPP routinely integrates economic evaluation into their analyses, the other organizations do not do so consistently. Converge3 has a mandate to include economic evidence in all analyses. Going forward, Converge3 will need to develop a suite of economic evaluation methods and to determine which method is most suitable for each analysis.
3. **Integration of Equity Considerations:** While the other organizations sometimes address equity implicitly within the question being asked (such as poverty reduction strategies for J-PAL), Converge3 is unique in having a mandate to incorporate equity concerns into each analysis. A forthcoming report will detail how equity can be conceptualized in a way that is useful for Converge3 reports.
4. **Engaging the public:** In Canada, there is an increasingly strong emphasis on incorporating public perspectives in all aspects of health decision making, from priority setting to framing questions, conducting research, and issuing guidance. Effective public engagement requires addressing questions about representation (how do we determine that the public members are sufficiently similar to the people they are meant to represent?), agency (who gets to make decisions on behalf of the public?) and accountability (to whom do the public representatives answer?). Converge3 will address these questions as it evolves.
5. **Question generation:** Converge3 has used a broad consultative approach to identify its questions. J-PAL matches the research needs of governments and academics to help one another develop questions. WSIPP has questions assigned directly by the legislature. It will be instructive to review how each approach produces questions and how broadly these questions guide health policies.
6. **The location of reports within the evidence cycle:** J-PAL produces a lot of original evidence, while GO Lab, WSIPP, and Converge3 focus on evidence synthesis. Converge3 will also want to think about implementation science (e.g., questions about how to adopt and scale up evidence from one context to another).

Dr. Bayoumi concluded that all of the organizations represented at the Symposium are committed to bringing greater evidence-based thinking to decision making. He asked symposium attendees to reflect on the nature of evidence and noted that there is an increasing willingness to think more expansively about what constitutes evidence. Historically, debates about evidence have focused on questions of the difference between interventional and observational studies or on the relative contributions of qualitative and quantitative analyses. The next step will be to consider how other methods can contribute to evidence generation, including case series, policy analyses, and patients' stories. He asked attendees to consider how we might define rigour when incorporating the public voice as evidence. These questions will be particularly important as we attempt to build an inclusive process that fully engages all stakeholders.

Appendix: Symposium Program and Speaker Profiles

**Converge3***Integrating health, economic and equity evidence to inform policy*

SYMPOSIUM PROGRAM: Enhancing evidence infrastructure to inform policy: Learning from international experience

Friday, June 22, 2018
12:00 p.m. to 3:30 p.m.
MaRS Discovery District Auditorium,
101 College St, Toronto

12:00 - 12:30pm **Lunch**

12:30 - 1:00pm

Welcome

Introduction and Origin of Converge3

Adalsteinn Brown

Dean, Dalla Lana School of Public Health, University of Toronto

Co-Chair, Converge3 Governance Committee

Converge3: An Overview

Mark Dobrow, Executive Director, Converge3

Associate Professor, Institute of Health Policy, Management and Evaluation
University of Toronto

Ahmed Bayoumi, Scientific Director, Converge3

Professor, Department of Medicine and Institute of Health Policy, Management
and Evaluation, University of Toronto

General Internist, St. Michael's Hospital

1:00 - 1:45pm

International Perspectives on Informing Policy

Stephanie Lee, Director, Washington State Institute for Public Policy, USA

Mary Ann Bates, Executive Director, J-PAL North America

Mara Airoidi, Director, Government Outcomes Lab, UK

1:45 - 2:00pm

Break

2:00 - 3:15pm

Panel Discussion

Reflections on Effective and Efficient Approaches to Developing Evidence Capacity and Capability to Inform Policy

Moderator: Mark Dobrow, Executive Director, Converge3

Panelists: Mara Airoidi, Mary Ann Bates, Stephanie Lee

3:15 - 3:30pm

Symposium Reflections and Wrap Up

Ahmed Bayoumi, Scientific Director, Converge3

Notice of photography: Please be advised that photographs will be taken at this event. These images may appear on the Converge3 website, in promotional materials and in other online/print publications.



Converge3

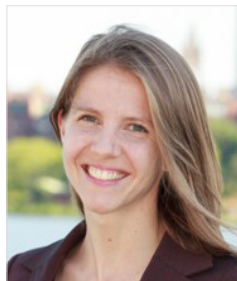
Integrating health, economic and equity evidence to inform policy

SYMPOSIUM SPEAKERS



Dr. Mara Airoidi (PhD, FRSA) is Director of the Government Outcomes Lab at the Blavatnik School of Government, University of Oxford, which aims at supporting innovative public sector commissioning to achieve better social out-

comes through stronger multi-stakeholder collaboration. She is an Economist and a Decision Analyst by background with degrees from Bocconi University in Milan and the London School of Economics and Political Science. She has held research and teaching positions at the London School of Economics and the University of Oxford particularly on Decision Making, Policy Evaluation & Implementation, Health Economics. Mara has 10+ years experience of researching and working with healthcare commissioners, with a particular focus on the English and the Italian NHS. She has also consulted for the Ontario Ministry of Health and Long-Term Care, the Home Office, the Ministry of Defence and the Department for Environment, Food and Rural Affairs in England, NATO and the Global Fund to fight Aids, Tuberculosis and Malaria.



Ms. Mary Ann Bates is the Executive Director of the North America office of the Abdul Latif Jameel Poverty Action Lab (J-PAL) at MIT, aimed at reducing poverty by ensuring that policy is informed by scientific evidence. Her work at J-PAL

has cut across multiple sectors, including health, energy, and education, and has focused on U.S. domestic policy as well as international development. She is a co-chair of J-PAL North America's State and Local Innovation Initiative, which provides resources to U.S. state and local governments interested in testing important policy questions with randomized evaluations. She was also instrumental in designing and launching the U.S. Health Care Delivery Initiative, which supports building the evidence base on interventions that can improve the efficiency and effectiveness of health care delivery. She holds a Master of Public Policy from UC Berkeley's Goldman School of Public Policy, where she received the Richard and Rhoda Goldman Fellowship, and has conducted research as a Fulbright Scholar in Switzerland.



Dr. Ahmed M. Bayoumi is the Scientific Director of Converge3. He is a Scientist at the Centre for Urban Health Solutions at the Li Ka Shing Knowledge Institute of St. Michael's Hospital, and a general internist and Human Immunodeficiency

Virus (HIV) physician at St. Michael's Hospital. He holds the Foundation Baxter & Alma Ricard Chair in Inner City Health at St. Michael's and the University of Toronto. He is a Professor in the Department of Medicine and in the Institute of Health Policy, Management and Evaluation at the University of Toronto. His research interests include economic evaluation, decision analysis, and quality of life assessment, particularly for marginalized populations. He is a Senior Adjunct Scientist at the Institute for Clinical Evaluative Sciences, past President of the Society for Medical Decision Making and a member of the Canadian Drug Expert Committee.



Dr. Adalsteinn (Steini) Brown is the Co-Chair of the Governance Committee of Converge3. He is the Dean of the Dalla Lana School of Public Health at the University of Toronto and the Dalla Lana Chair of Public Health Policy at the University of

Toronto. He has held senior leadership roles in policy and strategy within the Ontario government, founding roles in start-up companies, and has extensive experience in performance assessment. He received his undergraduate degree in government from Harvard University and his doctorate from the University of Oxford, where he was a Rhodes Scholar.

**Converge3***Integrating health, economic and equity evidence to inform policy*

SYMPOSIUM SPEAKERS



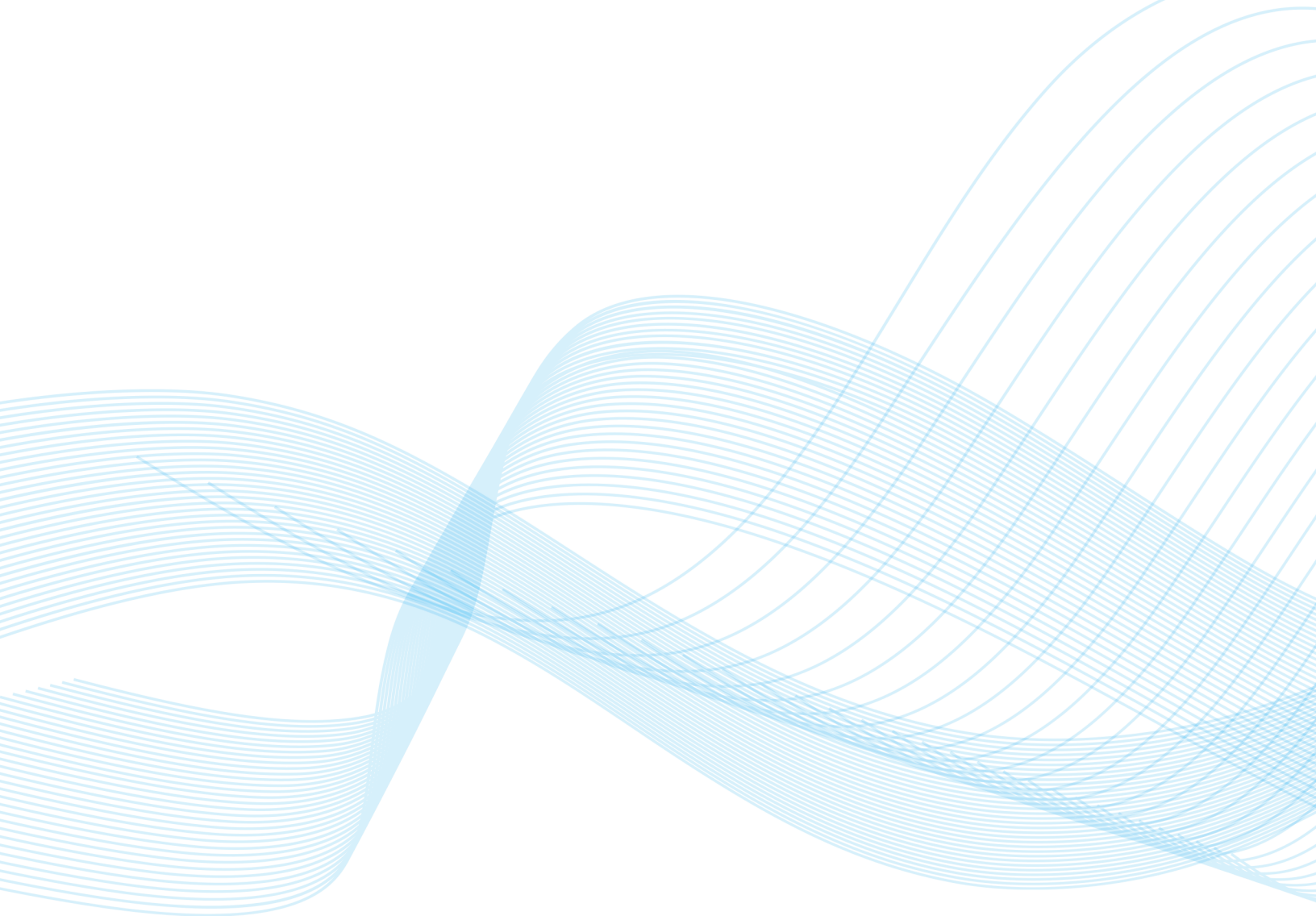
Dr. Mark Dobrow is the Executive Director of Converge3. He is an Associate Professor in the Institute of Health Policy, Management and Evaluation within the Dalla Lana School of Public Health at the University of Toronto. His research inter-

ests focus on the development and use of different types of evidence (i.e., research, contextual, experiential) to inform policy and the design and function of evidence infrastructure to support decision-making within health systems. In addition to his academic role, he has experience as an embedded scientist within a provincial cancer agency (Cancer Care Ontario) and held senior leadership positions with both national (Health Council of Canada) and provincial health care agencies (Health Quality Ontario). He has done postdoctoral work in the UK and was a Harkness fellow with the US-based Commonwealth Fund.



Ms. Stephanie Lee is the Director of the Washington State Institute for Public Policy (WSIPP), an applied research group that supports the Washington State legislature. She began her research career at a community-based

charity in the United Kingdom, where her interest in evidence-based prevention strategies was sparked. Stephanie joined WSIPP in 2007, and has focused since then on investigating the societal benefits and costs of programs and policies across a wide variety of public policy areas, including child welfare, education, criminal justice, and public health. She has led the development of the WSIPP benefit-cost model and WSIPP's collaboration with the Pew-MacArthur Results First Initiative, which provides support to 25 states and nine counties across the country as they work to incorporate research and economic evidence into public policymaking. Stephanie holds a Bachelor's degree in psychology from Trinity University and a Master's in experimental psychology from Washington University in St. Louis.



Converge3

Integrating health, economic and equity evidence to inform policy

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