Table 2: Studies promoting the use of systematic reviews

Study ID	Study Type/methods	Research aims & objectives	Main results	Comments
Atkins 2005 USA	Discussion paper with recommendations for increasing impact of systematic reviews.	Describe lessons learned about how to increase the efficiency and impact of systematic reviews from network of evidence based practice centres across North America	Say that reviews must produce knowledge that is relevant to specific clinical and policy decisions and present information in concise and easily understood format. Planning for translation and implementation should be part of initial planning of the review. Impact not necessarily a function of rigour of the review. Lessons learned: - Identify the right targets for evidence - Define appropriate questions and scope of a review - Working with partners important but reports need to address needs of partners without excessive tailoring to narrow interests of a single organisation - Balance consistency and flexibility in methods - Expand inclusion criteria to 'best available evidence' if higher quality evidence is lacking - Involving experts important but they need to be open minded enough to critically re-examine some of accepted conclusions in their field.	Based on experience over 7 years programme been running. Approach not formally evaluated
Brussoni 2006 UK	Description of process to translate evidence into practice Uses a case study of reviews of evidence of effectiveness of smoke alarm installation Involved meetings with practitioners to discuss issues around implementation of interventions identified as effective.	To bring together scientific evidence of what works in injury prevention with the knowledge and experience of practitioners.	Topics discussed: National policies and drivers seen as important influence on resources and staffing Multi-agency partnerships seen as crucial Authors say the meetings acted as valuable training tools and provided mechanism for strengthening local partnerships Describes a process that they say considers local context and results in practical recommendations that reflect real-world practice	Approach not formally evaluated
Ciliska 1999 Canada	Telephone survey (before and after receiving systematic reviews) with public-health policy makers in Ontario Focus groups used to develop survey tool. Questionnaire pre-tested for content validity, revised and retested.	To gain an understanding of the research needs, perceptions of barriers to research utilization, and attitudes towards systematic reviews of decision-makers in public health.	277 people eligible. 87% participated in first survey and 93% at the follow up. 57% had heard of systematic reviews, when prompted with a description 86% said the description sounded familiar and 62% were able to give examples of reviews they knew about. When asked about priority reviews should be given in research agenda 62% said high and 9% top. For those who read the reviews most focused on the conclusions, discussion and results. Very few looked at tables. **Barriers to research use:**	Cannot discern from this survey whether policy makers actively use research

			- Time - Availability of research results - Resources to implement research - Relevance - Policy climate - Timeliness	
Centre for Reviews and Dissemination 2009 UK	Description of a framework for use by researchers seeking to promote the findings of a systematic review	To improve the dissemination of systematic reviews	Framework involves: - Targeting right people with clear and relevant message - Communicating via appropriate (and multiple) channels - Taking account of environment in which message will be received Need to consider: - Message - Audience - Source - Setting/context - Communication channels - Implementation of strategy - Feed back and evaluation Dissemination integral part of review process and should be considered at an early stage to allow time for planning and development.	Authors say framework supported by theoretical research and used for over a decade.
Dobbins 2001 (reported in two papers Dobbins 2001a & Dobbins 2001b) Canada	Telephone administered cross-sectional survey Included decision makers from all public health units in Ontario Sample size n=141	To determine the extent to which 5 systematic reviews influenced public health decisions and policy development and to determine which characteristics of the innovation, organisation, environment, and individual predicted the influence the reviews had on those decisions	85% public health units & 96% of decision makers participated in the survey 63% reported using at least one SR in the past 2 yrs to make a decision 50% perceived SR as having great deal of influence on program justification and 41% on planning decisions 44% indicated SR has not influenced policy development at all **Facilitators of research use** - Perception that one's organisation valued the use of research evidence for decision making - ongoing training in critical appraisal **Predictors of research use** - Position - expecting to use a review in the future - perception that reviews were easy to use and that they overcame barrier of limited critical appraisal skills.	Culture in Ontario that values research evidence. Authors point out that results only generalisable to organisations included in this study.
Dobbins 2004b Canada	Telephone administered cross-sectional survey Sample size n=51	To determine whether the results of recently completed systematic reviews evaluating the	85% of decision makers participated in the survey 96% of respondents reported that the systematic reviews played a part in developing new guidelines 47% reported they contributed a great deal to the development of new	Review topics chosen in collaboration with provincial advisory group so relevant to

		effectiveness of public health interventions were used in the development of new provincial policies for public health practice	recommendations for practice Decision makers valued the use of the systematic reviews to a greater extent than they did other types of information Significant predictor variables included the importance of the reviews in comparison to other sources of information and relevance of the reviews to policy decisions Majority of decision-makers rated executive summary as being the most important component of the systematic reviews	public health policies under consideration. Culture in Ontario that values research evidence. Results only generalisable to organisations included in this study. Small sample size.
Dobbins 2004a Canada	Focus groups with decision makers from local/regional, provincial and federal public health units. Nine semi-structured one-hour focus groups held in 7 cities across Canada. Purposeful sampling techniques used. Sample n=47 (77% of those invited to attend). Grounded theory approach to data analysis.	To discover public health decision makers' preferences for content, format, and channels for receiving research knowledge.	**Barriers:** • Lack of time to locate, appraise, synthesize, interpret, and incorporate research evidence into decision making barrier to research use. **Potential facilitators** • Research seen as credible and high quality • Consistency in format • Reliable method of online/electronic delivery • Regular updates • Timeliness – e.g. relating to issues they currently involved with • More education & training about purpose & methodology of systematic reviews and credibility of online information sources Research should be: • Current • Take local context into account • Be jargon-free • Include recommendations ranked in order of effectiveness • Include cost-analyses	Findings used to create online registry of reviews evaluating effectiveness of public health and health promotion activities
Dobbins 2009a, 2009b Canada	RCT & qualitative interviews. 108 of 141 (77%) of public health organisations in Canada participated in the study. Involved three groups: 1) Control (who had access to an online registry of systematic reviews evaluating public health interventions) 2) targeted message group (same as control plus direct mailing)	To test the effectiveness of KTE strategies in Canadian public health decision making on programs related to the promotion of physical activity and healthy body weight in children.	Findings from RCT include: • Having access to a registry of synthesised and translated research evidence (control grp) has no impact on evidence informed decision making (EIDM) (p<0.45) • Targeted messaging significantly more effective in promoting EIDM than other strategies (p<.009) • A number of organisational factors modified the treatment effect • Simple KTE strategies may be as effective as complex ones (but need to be active rather than passive) • KB more more effective in those organisations that placed less value on research evidence and was less effective in those organisations that	

			already recognised the importance of evidence-based decision making.	
	3) knowledge brokering (KB) group who received one-to-one input to build capacity of EIDM and assist in translating research evidence. Intervention based on Dobbins framework (Dobbins 2002) Data collected baseline, post intervention, and 12 months.		Qualitative findings contradicted quantitative results. Participants in KB group perceived the KB to have significantly impacted EIDM capacity for them personally as well as for their organisation. Authors conclude that KB intervention may not have contained all the necessary components to produce a positive effect.	
Keown 2008 Canada	Discussion paper	To describe various stakeholder engagement opportunities they employ throughout the stages of conducting a systematic review to increase knowledge utilization. Based on experience of 22 systematic reviews over 4 yr period.	They have identified 5 potential opportunities for stakeholder engagement: • Stakeholder topic consultation • Stakeholder input meeting (e.g. input into setting question, literature searches) • Stakeholder as review team member • Stakeholder reaction meeting (discuss draft findings) • Stakeholder involvement in dissemination Observed benefits • Added depth to review • Help to define research question and add search terms • Improve clarity of final report and input into recommendations • Policy-makers feel it helps to make reviews more useful • Building capacity Challenges • Maintaining flexibility without compromising scientific rigour • Time and resource intensive • Difficult to find appropriate stakeholder to be review team member • Review may reveal controversial findings contrary to stakeholders expectations	Not a formal evaluation. Hard to generalise results to other settings
Lavis 2005 Canada	Systematic Review and interviews. Review included 17 studies 10 of which focused on health care policy-makers. In addition, they carried out interviews with policy makers in Canada and the UK to elicit views and experiences of using or commissioning systematic reviews.	To identify ways to improve the usefulness of systematic reviews for health care managers and policy makers One of their main aims was to identify ways in which researchers could improve the usefulness of systematic reviews for health care managers and public policy-	Ranked factors that influenced the use of research by managers and policy makers from the most to the least rigorously demonstrated and consistent. Most important **facilitators** appeared to be: • interactions between researchers and health care policy makers • Timing and timeliness. Other factors included: • Policy networks that brought policy-makers & researchers together through formally structured mechanisms • Trust in the researcher **Barriers** on the part of policy-makers included: • negative attitudes towards research evidence	Overall there was a lack of research evidence in this area and it lacked rigour and consistency

		makers.	• lack of necessary skills and expertise • lack of perceived relevance • use of jargon • only publishing for a scholarly audience in academic journals In those instances where policy makers reported using research evidence none cited systematic reviews. Many factors other than research influenced decision including legal issues, pressure from stakeholders and public opinion.	
Yousefi-Nooraie 2009 Iran	Questionnaires delivered to participants in systematic review workshops N=131	To assess views of researchers and policy makers on how evidence from systematic reviews can be promoted in a country with limited resources	Most frequently selected facilitators: • Willingness and competency of health policy makers to use systematic reviews • Competency of researchers to conduct systematic reviews • Access to international databases • Training of professional methodologists in systematic review related field	