



The Role of Health Research Evidence in Supporting Policy Decisions and Initiatives

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Outline

- Aging in the Federal Government
 - The Policy Cycle
 - Policy Formulation
 - Evidence Based Policy
 - Knowledge Translation/Communicating Research
 - CLSA example
 - Opportunities
 - Discussion/Questions
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Aging in the Federal Government

Seniors' Health Issues are a Shared Responsibility:

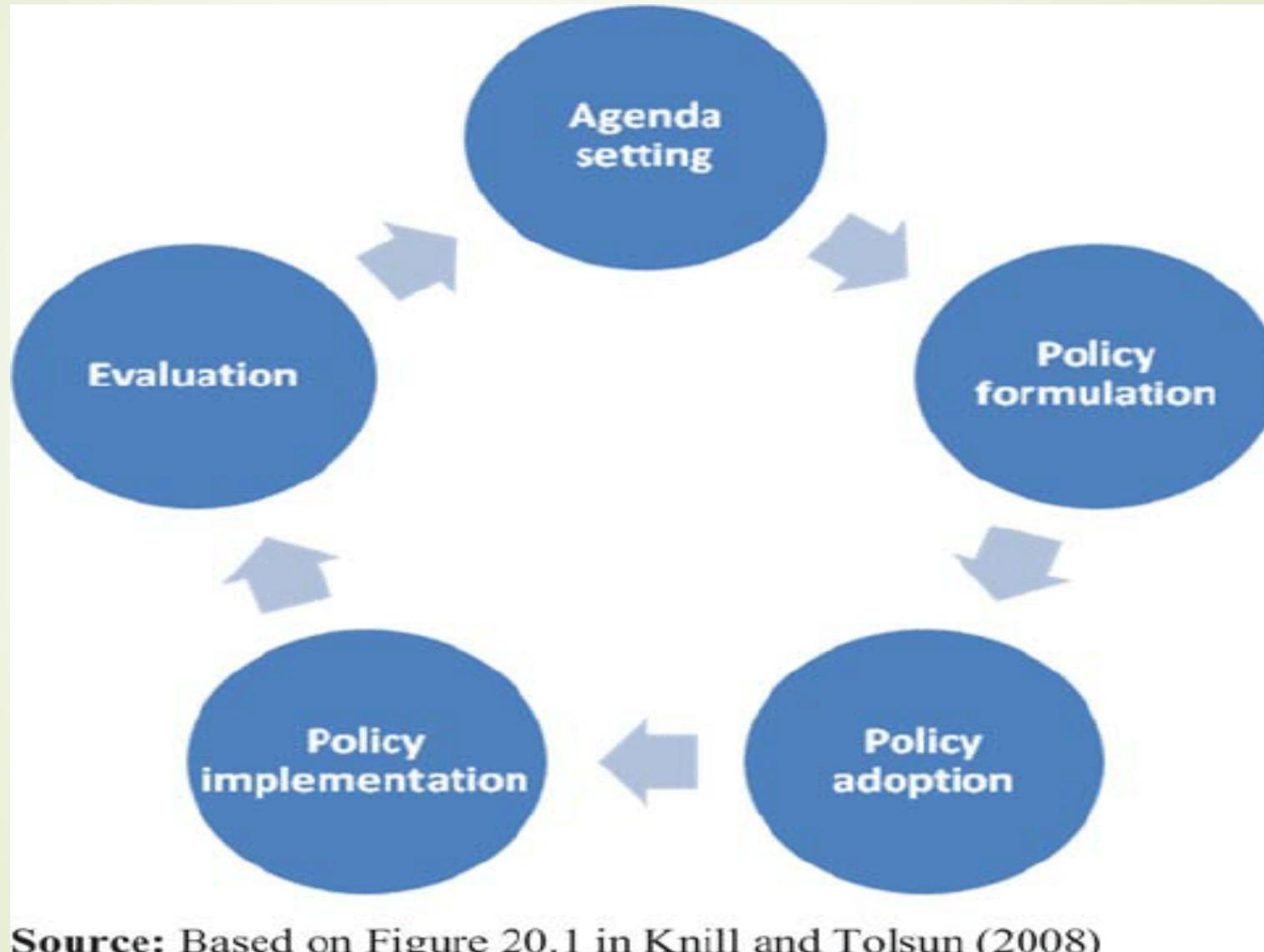
PHAC: Supports the development of policies and initiatives that promotes seniors health and quality of life, monitors and reports on the health of older Canadians, and promotes their health and well-being.

Health Canada: Fosters sustainable health care systems that ensure seniors have access to appropriate and effective health care.

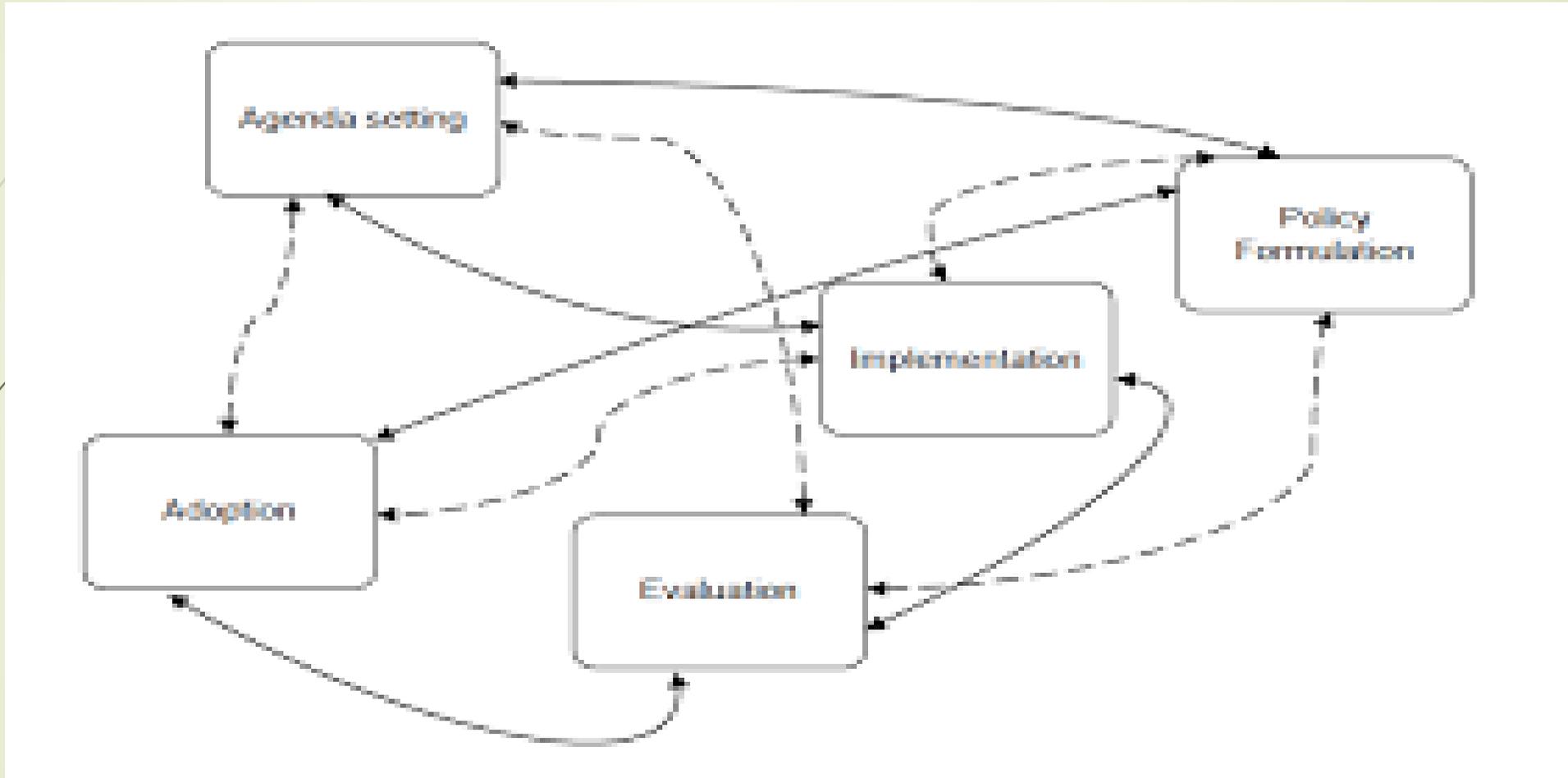
CIHR: *Supports innovative research to better understand the health challenges faced by older Canadians, and to identify evidence based solutions for optimizing health outcomes across the life course*

Employment and Social Development Canada: *Improving the income security of seniors; Fostering the social inclusion and engagement of seniors; Coordination on seniors' issues for the Government of Canada*

The Policy Cycle

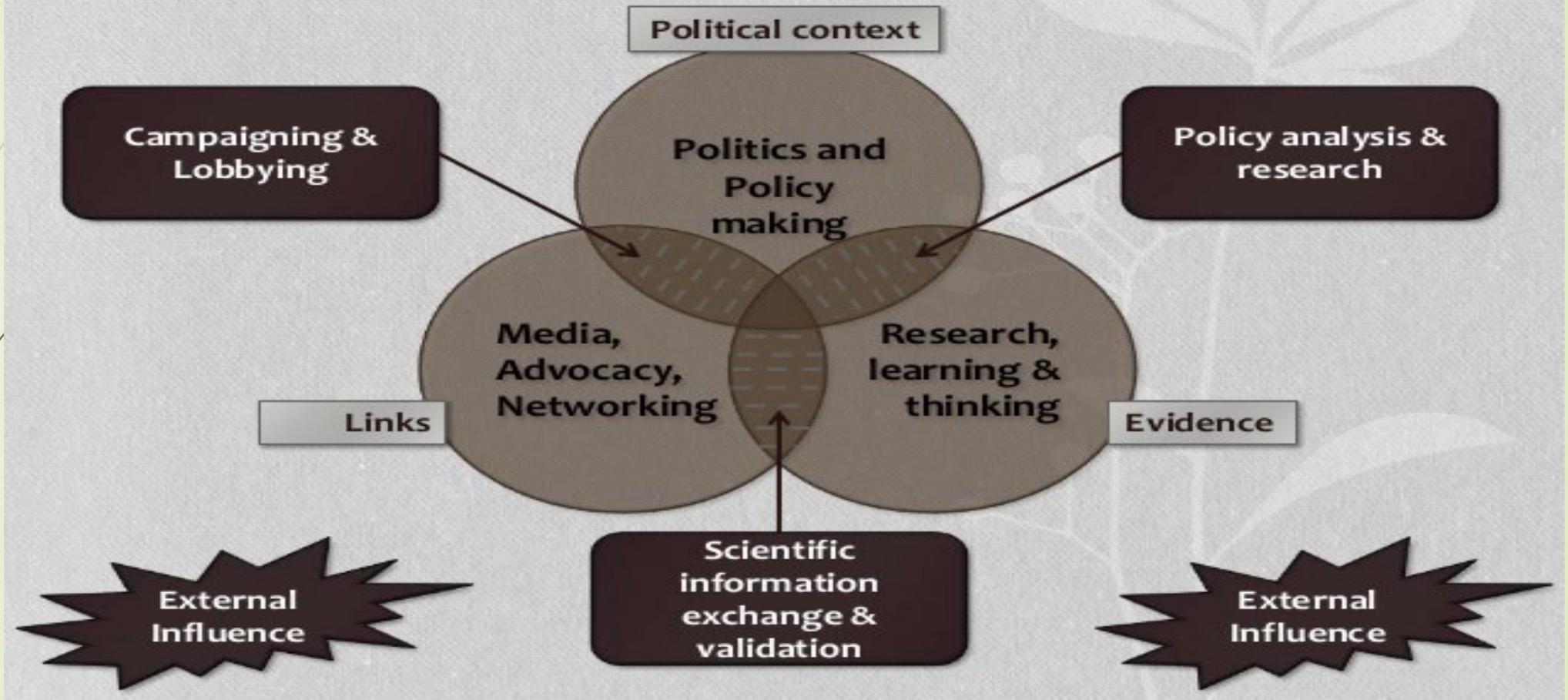


The Policy Cycle: A Turbulent Flow



Source: National Collaborating Centre for Healthy Public Policy

Factors which Influence Policy Formulation Process

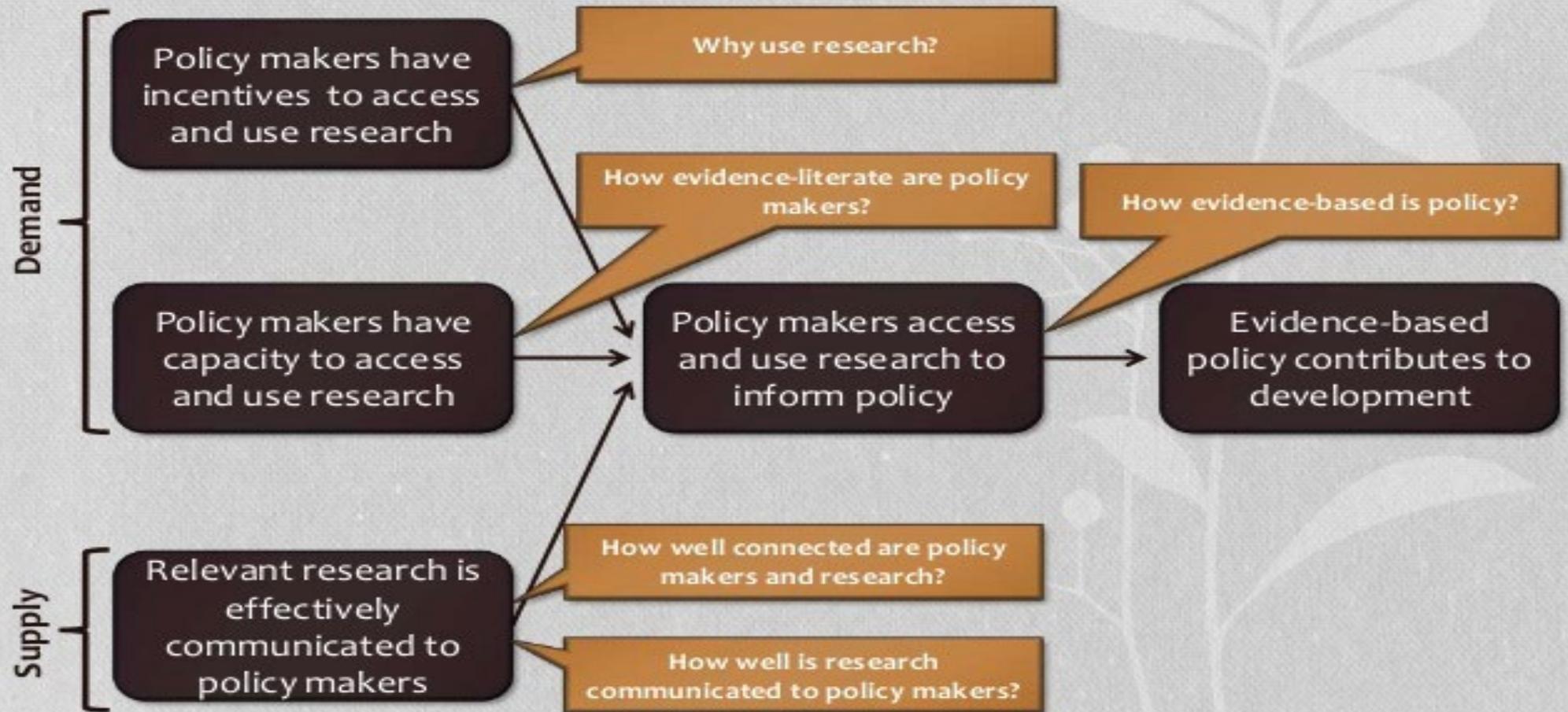


Evidence Based Policy

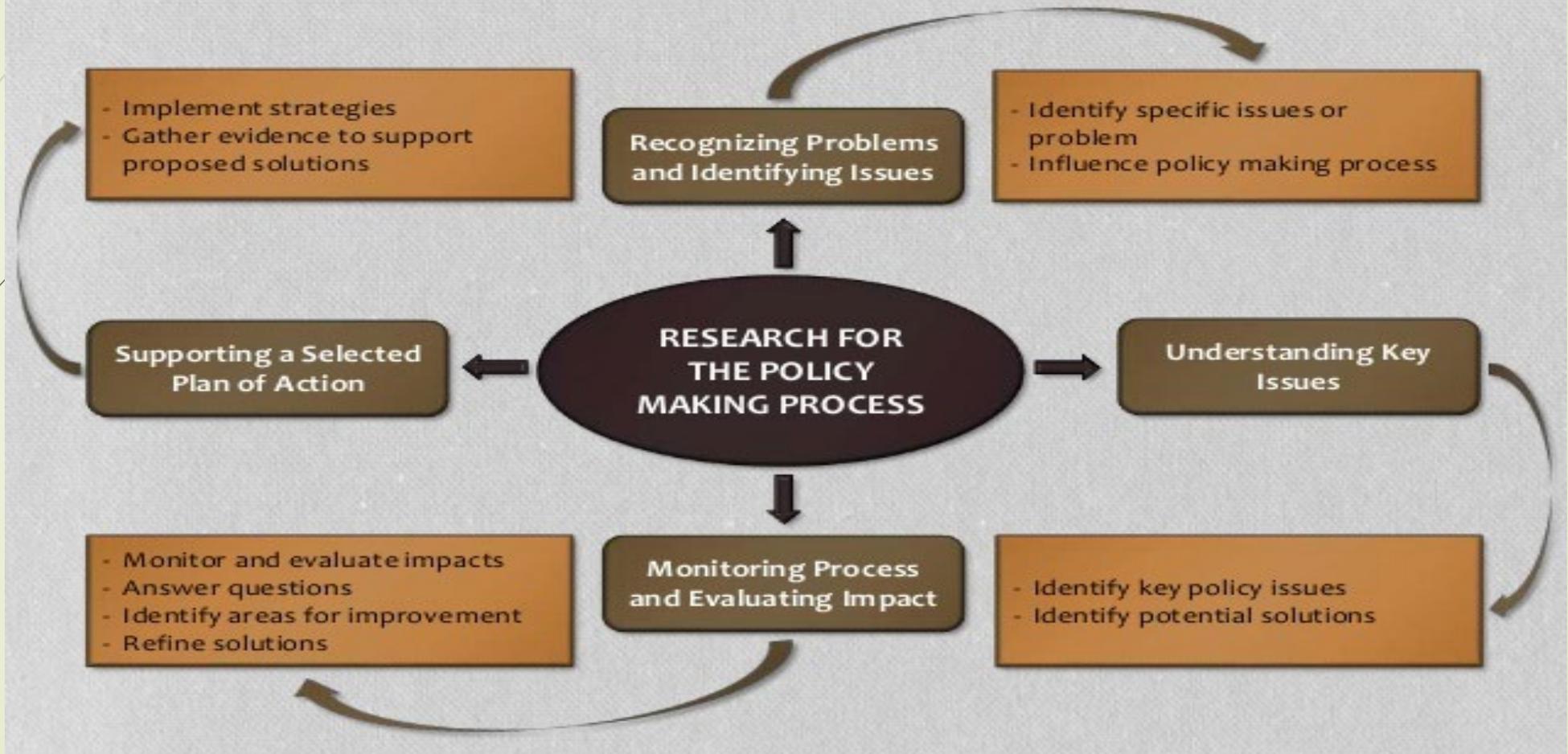


Source: American Council on Science and Health

Evidence-based Policy Making



How Policy Research can be used in Policy Making?





A Mutualistic Relationship:

Scientists  Policy Makers

Evidence based policy? Policy informed research? Or both?

- Scientists produce evidence which policy makers use for decisions.
- Policy makers provide scientists with research needs and resources for research



Research Accessibility

- Increasing the accessibility of research is an important way to help strengthen the link between research and policy, and to increase the use of evidence in decision-making.
- Three dimensions:
 - Physical: getting access to articles
 - Social: How social network and connections may influence research uptake (e.g., co-production with decision makers)
 - Intellectual: How research is communicated (e.g., comprehensibility, language, and tone)

Source: Erika Malich, 2016

Communicating research



Phil Johnson

Examples of Knowledge Products

STROKE CANADA

WHAT IS A STROKE?

A **STROKE** is a sudden loss of brain function caused by a sudden brain blood vessel blockage (ischemic stroke) or rupture (hemorrhagic stroke). Ischemic stroke is the most common type of stroke.

Stroke can happen at any age, so **know the signs and know what it looks like.**

WHO IS AFFECTED?

ABOUT **741,800** CANADIAN ADULTS OR **365,000** MALES AND **376,800** FEMALES ARE UNDER AGE 65. **STROKE PREVALENCE RISES SHARPLY AFTER AGE 55.**

1/4 OF CANADIANS WHO HAVE HAD A STROKE ARE UNDER AGE 65.

That's equivalent to the population of New Brunswick!

WHAT ARE THE RISKS?

ONLY 21% OF CANADIANS ARE AWARE THAT **HIGH BLOOD PRESSURE** IS THE **STRONGEST RISK FACTOR** FOR A STROKE.

OTHER RISK FACTORS include Smoking, Obesity, Diabetes, High Blood Cholesterol, Atrial Fibrillation (AFib).

HOW TO PREVENT A STROKE

- KEEP BLOOD PRESSURE UNDER CONTROL
- BE PHYSICALLY ACTIVE
- MAINTAIN A HEALTHY DIET
- QUIT SMOKING

LEARN THE SIGNS OF STROKE

FACE Is it drooping?
ARM(S) Can you raise both?
SPEECH Is it slurred or jumbled?
TIME To call 9-1-1 right away.

EVERY MINUTE COUNTS in a STROKE EMERGENCY!

Survival and full recovery are possible if one acts...

VISIT canada.ca AND SEARCH: STROKE
 FOLLOW US ON TWITTER: @GOVCANHEALTH
WWW.TWITTER.COM/GOVCANHEALTH

Canada

Dementia in Canada
 Including Alzheimer's disease

Dementia is the loss of mental function affecting daily activities, caused by brain diseases and brain injuries. Alzheimer's disease is the most common cause of dementia.

Symptoms can include

- MEMORY LOSS
- JUDGEMENT and REASONING PROBLEMS
- changes in BEHAVIOUR, MOOD, and COMMUNICATION ABILITIES

Canada

SENIORS' FALLS IN CANADA

FALLS are the **LEADING CAUSE OF INJURY** among older Canadians: **20-30%** of seniors experience **1+** falls each year.

FALLS CAUSE:

- 85%** of seniors' injury-related hospitalizations
- 95%** of all hip fractures
- \$2 Billion** a year in direct healthcare costs

EVERY 1/3 of seniors are admitted to **LONG-TERM CARE** following hospitalization for a fall.

The average Canadian senior stays in hospital **10 DAYS** longer for falls than for any other cause.

- Falls cost **17,000** in chronic pain, reduced mobility, loss of independence and even death
- 50%** of all falls causing hospitalization **SUFFER AT HOME**

WOMEN due to falls rose **43%** between 2003 and 2008

80% due to falls rose **65%** between 2003 and 2008

The good news is that falls are preventable and action can be taken by all. READ THE FULL REPORT FOR MORE AT: www.publichealth.gc.ca/seniors

Canada

SENIORS' FALLS IN CANADA

SECOND REPORT

PROTECTING CANADIANS FROM ILLNESS

Canada

AGING AND CHRONIC DISEASES

A PROFILE OF CANADIAN SENIORS

Canada

CLSA Example

PHAC support for CLSA

- FU1: elder abuse, history of child maltreatment, oral health
- FU2: mental health, intimate partner violence
- COVID study on effects of pandemic on older adults
- Dementia: early identification of people living with dementia and those at risk.

"By gaining better data on dementia, we will be able to make better informed decision on how to support people living with dementia and their caregivers so they feel valued and supported and have an optimal quality of life" The Honourable Patty Hujdu, Minister of Health

Knowledge Translation:

- Baseline Report of Findings
- Health Canada Science Research Forum
- International Federation on Aging 2018 conference
- CLSA Knowledge Translation and Communications Committee
- Other future opportunities.....





Opportunities

- Policy priorities related to aging (Speech from the Throne, Fall Economic Statement, Federal Budget, Ministers Mandate Letters, Parliamentary/Senate Reports; International Commitments)
 - Supporting older adults to stay in their homes longer
 - Mental health
 - Long term care
 - Palliative care
 - Family violence
- UN Decade of Healthy Ageing

UN Decade of Healthy Ageing (2021 – 2030)

- ▶ A global collaboration that brings together governments, civil society, international agencies, professionals, **academia**, the media, and the private sector to improve the lives of older people, their families, and the communities in which they live.
- ▶ *Four Action Areas:*
 - ▶ *Combatting ageism*
 - ▶ *Age-Friendly Environments*
 - ▶ *Integrated Care*
 - ▶ *Long Term Care*

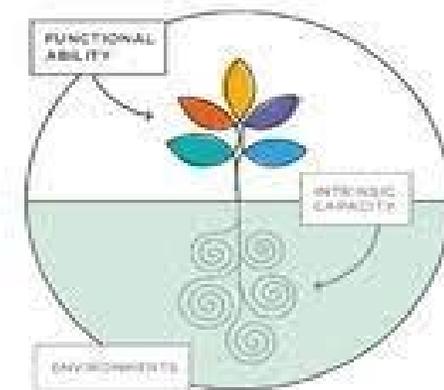


UN Decade of Healthy Ageing (2021 – 2030)

- ▶ *Enabler: Strengthening data, research and innovation to accelerate implementation*
 - ▶ Address the current needs of older people, anticipate future challenges and link the social, biological, economic and environmental conditions and determinants of healthy ageing and evaluate interventions to improve healthy ageing trajectories.
 - ▶ Studies should reflect research priorities, gaps in evidence and the preferences of older people; they should be gender-sensitive and designed to improve health equity.
 - ▶ Syntheses of evidence on activities and interventions that can benefit older people, their families and communities and for ways to scale them up to reach more people
 - ▶ Innovations must be relevant and change people's lives. Every country can contribute to and learn from such a knowledge base.



WHO Launches Baseline Report for Decade of Healthy Ageing



DECADE OF
HEALTHY AGEING
BASELINE REPORT

UN Decade of Healthy Ageing (2021 – 2030)

The Decade Platform

A digital space designed to find, share, and produce the knowledge needed to generate impact and create a world for all ages.



<https://www.decadeofhealthyageing.org/>

[What is the Platform? - Decade of Healthy Ageing – YouTube](#)

<https://www.decadeofhealthyageing.org/platform-guide-to-knowledge>



Final Thoughts

- Policy making is complex
 - Research evidence plays a crucial role in policy
 - The researcher – policy maker relationship is important for supporting evidence based research and policy informed research
 - Knowledge translation supports policy decision making but there is no one way to communicate research; know your audience
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Discussion

- Questions?
- Thoughts?
- Sharing of experiences?

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