VIGNETTE 2

# Policy and decision-making

*Using the global living evidence map on evidence-informed policymaking (EIPM)*

## Use case

A ministry's evidence-and-learning unit has been tasked with strengthening the use of research evidence in policy design. An internal review found that policy papers cited research inconsistently and that staff often lacked awareness of available evidence before drafting began. With a fixed budget for the coming cycle, the unit must decide which mechanism, or feasible combination of mechanisms, to introduce or strengthen. It consults the living evidence map to understand which approaches have been examined, where they have been implemented and what outcomes have been studied before committing resources used. This scenario is illustrative.

**433**
of the 1 010 studies are coded as 'evidence use for policy design'

**75%**
of those 433 combine two or more mechanisms, not one alone

**147**
most-represented mechanism pairing (Access + Interaction) among the 433

**25%**
of region codes on these studies are in the World Health Organization (WHO) African Region

> *All four figures describe the 433 studies (of 1 010 in the full map) coded as 'evidence use for policy design'. They describe how often a pattern is represented, not how effective it is.*

## The decision

The unit must decide how best to use its available funding to address two identified challenges: limited awareness of existing research and inconsistent use of evidence in policy development. Should it prioritise improving access to relevant evidence, strengthening interaction between researchers and policymakers, or combining these approaches? The unit uses the map to identify documented intervention approaches and assess which options warrant closer examination before selecting an intervention for the next budget cycle.

## Using the map

The ministry's evidence-and-learning unit uses the map in four stages to identify relevant interventions and narrow the options for further consideration:

1. **Identify the relevant outcome.** The unit filters the map to studies examining evidence use for policy design, identifying 433 of the 1 010 mapped studies.
2. **See which mechanisms are represented, and how often.** Interaction between researchers and decision-makers (M4) is the most frequently examined mechanism (259 studies, 60%), followed by access to evidence (M3; 240 studies, 55%), skills development (M5; 172 studies, 40%), structures and processes (M6; 172 studies, 40%), agreement (M2; 118 studies, 27%) and awareness (M1; 23 studies, 5%). Most studies examine two or more mechanisms, with access and interaction forming the most frequently represented pairing (147 studies). These patterns indicate which approaches have received research attention, rather than which are most effective.

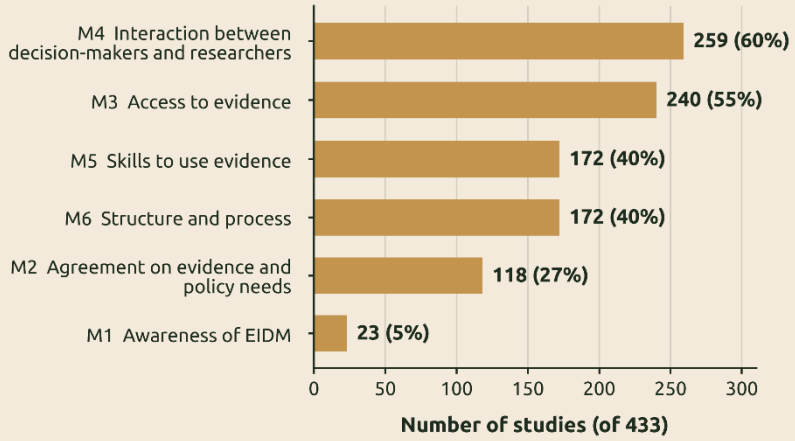



*Figure 1. Number of the 433 studies coded as 'evidence use for policy design' that code each mechanism (November 2026 update). A study can carry more than one mechanism, so the counts and percentages overlap.*

*Full names: Awareness of EIDM (M1); Agreement on evidence and policy needs (M2); Access to evidence (M3); Interaction between decision-makers and researchers (M4); Skills to use evidence (M5); Structure and process for EIDM (M6).*

3. **Check geographic coverage**. The 433 studies account for 550 regional classifications because some cover multiple regions. The WHO Region of the Americas accounts for 28% of these classifications, followed by the WHO African Region (25%) and European Region (17%). The unit uses this information to identify studies conducted in settings potentially relevant to its policy context.

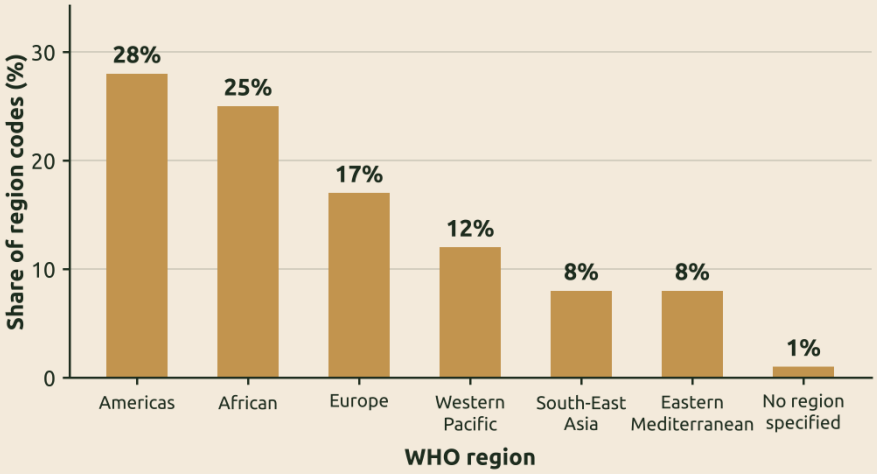



*Figure 2. Distribution of region codes by WHO region for the 433 policy-design studies (550 region codes in total; 12 November 2026 update). Some studies span more than one region. The shares shown add up to 99%.*

4. **Narrow to a specific combination and setting.** Given the ministry's challenges with identifying and using research during policy development, the unit focuses on studies examining access to evidence (M3), interaction between researchers and decision-makers (M4), or their combination. It then filters by the relevant geographical setting and examines the underlying studies to understand how these approaches were implemented, what outcomes were assessed and what findings were reported. This provides a basis for considering which approach may be feasible and appropriate within the ministry's budget.

## What the map can reveal and what it cannot establish

| The map can reveal | The map cannot establish |
|---|---|
| • How much mapped evidence exists for this outcome, and how it is distributed across the six mechanisms.<br>• Whether interventions are typically single-mechanism or combined, and which combinations are most represented<br>• The geographical coverage of the mapped studies, including where research is concentrated or limited. | • Whether one mechanism is more effective than another, or why a frequent combination is frequent.<br>• Whether any specific documented intervention would work inside the ministry's own directorate.<br>• Whether findings from one setting, even in the same region, are transferable to another. |

## Evidence gaps and what they mean

Awareness of EIDM (M1) combined with development impact is among the least frequently examined mechanism–outcome combinations, with only four studies across the 1,010-study evidence base and none covering low-income countries. This indicates limited research coverage rather than evidence that awareness interventions are ineffective.

Funding source information is reported for only 33% of the 1,010 studies in the map. This indicates a gap in funding reporting and does not imply that the remaining studies received no funding.

For the ministry, these gaps highlight the importance of examining the available evidence before selecting an intervention. Where relevant evidence is limited, a carefully designed and evaluated pilot may provide an opportunity to test an approach in the ministry's context while contributing to the wider evidence base.

## Practical takeaway

> *The ministry shortlists a combination of improved access to evidence (M3) and stronger interaction between researchers and decision-makers (M4) as a potential approach to strengthening evidence use in policy design. This combination is frequently represented in the mapped studies, providing a starting point for examining how similar interventions have been implemented and what outcomes they have achieved. Before committing funds, the unit reviews relevant studies, assesses their applicability to the ministry's context and determines whether a combined approach is feasible within its budget.*

## A note on sources and currency

This vignette is grounded in the interactive evidence map's underlying study dataset (November 2026 update, n=1 010) and the 2024 World Health Organization (WHO) technical report, which supplies the 2024 comparison figures used above. The search strategy remained consistent across updates, with studies identified through external contributions also added to the evidence base. The reported 64% increase therefore reflects growth in the mapped evidence base and should not be interpreted as an increase in newly published studies alone. Because this is a living map, updated periodically as new studies are added, later updates may show different figures.

**References:** World Health Organization (2024). *The art and science of promoting evidence-informed decision-making: a global living evidence map.* World Health Organization. https://iris.who.int/handle/10665/382279. License: CC BY-NC-SA 3.0 IGO

# About

**About PACE**

The Pan-African Collective for Evidence (PACE) is a non-profit organisation that supports evidence-informed policymaking across Africa. Its vision is a world free of poverty. PACE works to unlock the potential of evidence capacities, evidence communities, and evidence synthesis to strengthen institutionalised evidence-to-policy systems and support meaningful development and transformation. For more information: https://pace-evidence.org/art-and-science

**About this vignette**

This vignette is part of a series showcasing how policymakers can use the Global Living Evidence Map on Evidence-Informed Policymaking (EIPM).

**Suggested citation**

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