

SURE Guides for Preparing and Using Evidence-Based Policy Briefs

5. Identifying and addressing barriers to implementing policy options

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The SURE Collaboration

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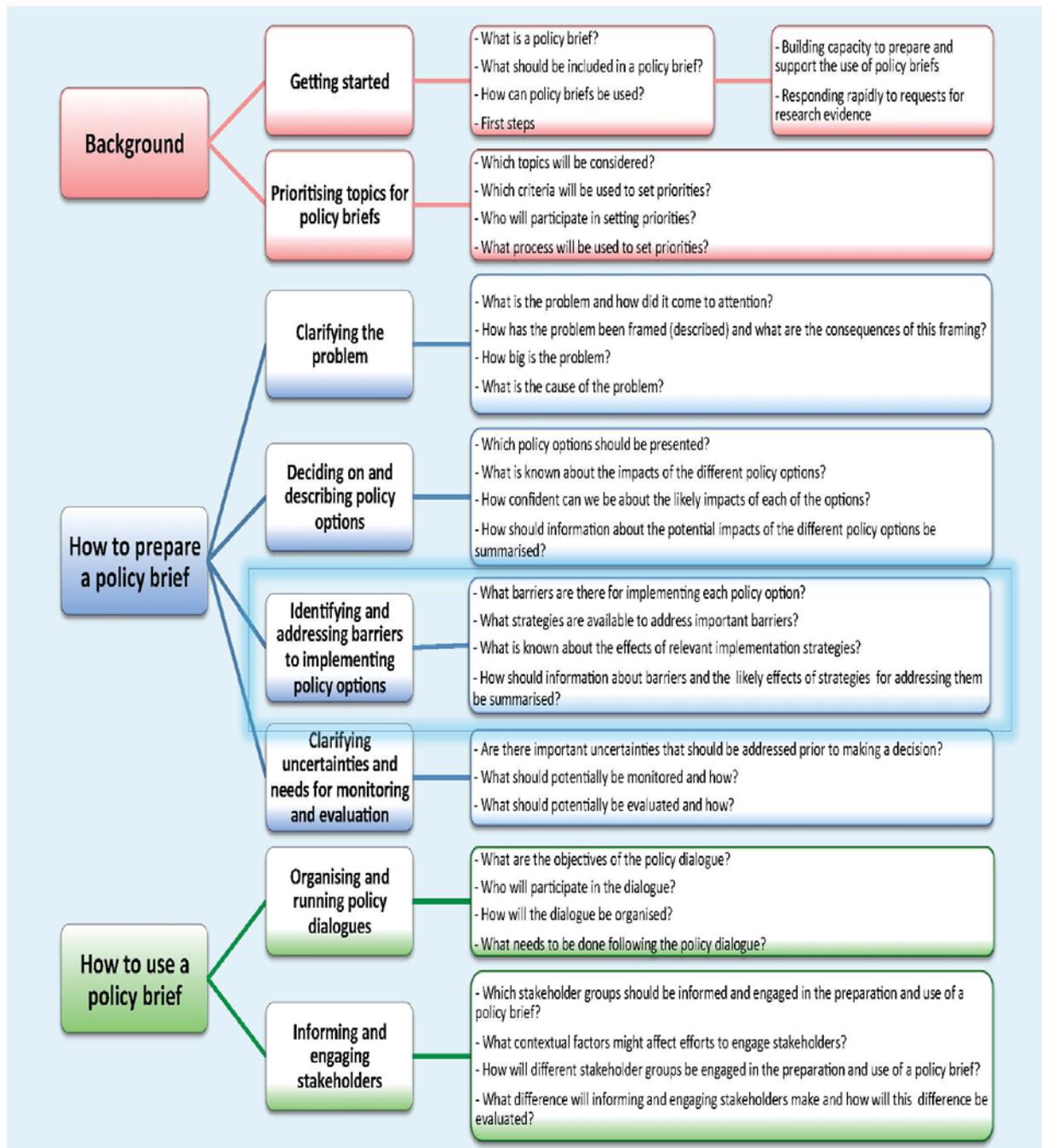


SURE is a collaborative project that builds on and supports the Evidence-Informed Policy Network (EVIPNet) in Africa and the Regional East African Community Health (REACH) Policy Initiative. The project involves teams of researchers and policymakers in seven African countries and is supported by research teams in three European countries and Canada. SURE is funded by the European Commission's 7th Framework Programme (Grant agreement no 222881).

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5. Identifying and addressing barriers to implementing policy options



Summary

After you have described viable policy options for addressing a problem, the next step in preparing a policy brief is to consider barriers to implementing those options and strategies for addressing them. This entails four steps:

- Identifying potential barriers
- Identifying strategies to address those barriers
- Finding and appraising evidence of the effects of those strategies
- Summarising what is known about potential barriers and the likely effects of strategies for addressing them

Evaluating the guides

As you use the guides, please complete the [evaluation form](#) included in the 'Additional Resources' section so that the guide can be improved.

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Background

If viable policy options are not properly implemented they are unlikely to be effective. It is therefore important to consider what potential barriers there may be to the implementation of policy options and how to address these. Identifying and addressing barriers to implementing policy options entails the following steps: identifying potential barriers; identifying strategies to address them; finding and appraising evidence of the effects of those strategies; and summarising what is known. These processes often depend on brainstorming. Frameworks and structured processes can help to ensure that important barriers are identified and addressed. Evidence of the importance of potential barriers can come from qualitative studies (including case studies, interview and focus group studies), surveys, or structured processes. Systematic reviews should be used, as far as possible, as a means to identify barriers to implementing a policy option and for describing the likely impacts of implementation strategies.

Implementing policy options may require changes at various levels, including changes in the behaviours of the recipients and providers of healthcare, organisational changes, and changes in the governance and financing of healthcare. The methods used to identify barriers to implementing policy options, and to tailoring interventions to address them are not well developed and it is often unclear which methods are most appropriate. Tailored interventions, for example, have been found to be more effective than having no intervention for implementing clinical practice guidelines. But little is known about the effectiveness and efficiency of the different methods for identifying barriers and tailoring interventions to address them.¹

Evidence of the effects of implementation strategies is often limited, particularly evidence from low- and middle-income countries. Consequently, decisions frequently need to be made based on low-quality evidence. Despite this, descriptions of implementation strategies to address important barriers should include a summary of the available evidence, as well as the logic used to identify specific strategies for further consideration in the policy brief. Performing only a cursory review of the evidence entails risks, including: unreliable descriptions of implementation strategies, a loss of credibility, the introduction of biased assessments, and overstating or understating the degree of confidence that can be placed in estimates or assumptions about the effects of implementation strategies. An investment of time in order to ensure systematic and transparent processes is likely to be warranted both in terms of the specific policy brief and as a way to ensure, as far as possible, that the decisions about how to implement policy options are well-informed by the best available research evidence. Systematic reviews should be used as a basis for describing the likely impacts of implementation strategies as far as possible.

The methods used to find, appraise, and summarise evidence about the effects of implementation strategies are similar to those described in [SURE Guide 4. Deciding and Describing the Policy Options to Address the Problem](#).

The following questions can be used to identify and describe barriers to implementing options and strategies for addressing those barriers:

- What barriers are there to implementing each policy option?
- What strategies are available to address important barriers?
- What is known about the effects of relevant implementation strategies?
- How should information about barriers and the likely effects of strategies for addressing them be summarised?

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What barriers are there to implementing each policy option?

The identification of potential barriers to implementing policy options is often done informally and in implicit and unsystematic ways. More structured approaches can help to ensure that important barriers are not overlooked and that unimportant barriers are not given undue attention. This requires the use of a framework to systematically consider potential barriers and the identification and appraisal of evidence of the extent of potentially important barriers.

Barriers to change and enablers of change are referred to in different ways, including 'moderators and mediators', 'problems and incentives' or 'barriers and facilitators' – terms which reflect subtle variations in meaning. In this guide, we have chosen to use the terms 'barriers and enablers' to describe all factors that might inhibit or facilitate the implementation of a policy option. Barriers and enablers are often the mirror image of each other. In this guide the term 'barriers' is used to describe 'barriers and enablers'. It should be remembered that both enablers and barriers must be considered when implementing policy options.

Published lists of barriers for implementing changes in healthcare often show a high degree of overlap.²⁻⁹ A [checklist for identifying barriers to implementing a policy option](#) which is adapted to focus on barriers to implementing health systems changes is available in the '[Additional resources](#)' section of this guide. This checklist can be used when considering different types of barriers and to flag those that warrant further consideration. For example, a team preparing a policy brief might choose to go through the list individually first and then discuss their assessments and the likelihood of potentially important barriers.

Several other methods can be used to identify and clarify the importance of potential barriers, including:

- **Brainstorming** – the bringing together of a group of people with relevant expertise and perspectives to generate ideas about barriers and their likely importance
- **Contacting key informants** – discussing potentially important barriers with individuals who understand and have insight into the problem or situation
- **Searching for published or unpublished studies**, including:
 - Case studies – descriptions and analysis of past efforts to implement similar options, usually involving a variety of data collection techniques
 - Qualitative studies, including those using:
 - Interviews – face-to-face or telephone discussions with individuals at relevant levels of the health system to ask specific questions and explore their perceptions of barriers and enablers in depth
 - Focus group discussions – facilitated discussions among groups in which a moderator uses open-ended questions to encourage a discussion of barriers and enablers
 - Direct observations – where interpersonal interactions, events, or activities in relevant settings are watched and listened to
 - Surveys – studies where participants are asked a standardised set of questions that assess, for example, their knowledge, attitudes, or self-reported behaviour

Efforts should be made to find local evidence whenever it is available, and strategies to find relevant studies are shown below. Links to [materials for a workshop about how to find local evidence](#) and a related [PowerPoint presentation](#) are located in the 'Additional resources' section of this guide. A [SUPPORT tool providing guidance on how to find and use evidence about local conditions](#) is also provided.

Strategies to find relevant studies include:

- Searching databases of published research papers, such as PubMed. Validated search strategies (or 'hedges') can be used to find qualitative research in the PubMed database and are available at www.nlm.nih.gov/nichsr/hedges/search.html
- Sources such as Google Scholar (<http://scholar.google.com/schhp?hl=en&tab=ws>) and the WHO Library Information System (<http://dosei.who.int/uhtbin/cgiisirs/Mon+May++4+21:00:46+MEST+2009/0/49>) to search for 'grey' or unpublished literature
- Contacting researchers in relevant universities, research institutes or health departments, or research networks

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What strategies are available to address important barriers?

Brainstorming is a useful method for identifying potential implementation strategies to address important barriers and enablers. This can be done in a structured or unstructured way. Typically, brainstorming generates ideas through face-to-face interaction as participants respond to each other's suggestions to identify new ones, without criticism. Any evaluation of ideas is explicitly forbidden until after the generation process is completed. Participants can attend a session either in person or exchange ideas over the Internet.

Bringing together a group of people with different types of expertise and perspectives to generate as many potential solutions as possible increases the chance of finding valuable ideas. Subsequent discussion of proposed solutions and their merits can also help to focus attention on the ones that are most promising.

Theories can be used to inform the selection of interventions, but it also relies to a large extent on logic and judgement. Wensing and colleagues, for example, successfully matched implementation strategies to barriers related to changing professional practice, using a set of constructs derived from theories relevant to changing professional practice.^{6,10,11} Similarly, Michie and colleagues matched theoretically-derived behavioural determinants to behaviour change techniques.¹² However, there is little research evidence supporting the use of specific interventions for specific barriers. Therefore, a 'common sense' use of theories can help to identify interventions to address different types of barriers, but this is mainly by providing frameworks and approaches to identifying interventions. Similarly, theory-based approaches can also be used when structuring and organising brainstorming sessions.

[A checklist for identifying barriers and enablers to implementing a policy option and enablers](#) and [examples of potential interventions to address different types of barriers](#) are provided in the '[Additional resources](#)' section of this guide. An [example showing how this checklist was applied](#) by the REACH team in Uganda in their policy brief on task shifting is also provided in the '[Additional resources](#)'.

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What is known about the effects of relevant implementation strategies?

The process of finding and appraising evidence of the effects of strategies for implementing policy options is similar to the process described earlier for finding and appraising evidence of the impacts of the policy options. This entails finding, selecting, and assessing the reliability of systematic reviews. Based on the evidence from these, judgements are then made about the effects of implementation strategies and about how much confidence to place in those estimates.

A systematic review is the ideal starting point for finding out what is known about the effects of implementation strategies. Many systematic reviews of strategies for changing the behaviours of recipients and providers of care are now available; however, there are fewer that focus on strategies for addressing health system, social, and political constraints. Health Systems Evidence (www.healthsystemsevidence.org) is a good place to begin searching for systematic reviews that address the effects of implementation strategies. Other sources that can be searched for systematic reviews of the impacts of health system arrangements and implementation strategies include CADTH Rx for Change (www.cadth.ca/en/resources/rx-for-change), The Cochrane Library, and PubMed.

SUPPORT has prepared concise summaries of the best available evidence of the effects of health systems interventions, including implementation strategies, for low and middle-income countries. These summaries are provided in the Libraries section of these guides.

Strategies for finding systematic reviews of implementation strategies are available in the 'Additional resources' section of this guide.

Reviews of implementation strategies commonly address overlapping questions from different perspectives. For example, reviews of strategies for improving professional practice may address the effects of a type of intervention across different practices (e.g. educational meetings), or the effects of different types of interventions to address a single problem or condition (e.g. diabetes), or a type of behaviour or practice across different conditions (e.g. prescribing). Sometimes reviews are restricted to a specific setting (e.g. primary care in low- and middle-income countries), or to a specific type of health worker (e.g. traditional birth attendants). There may be good reasons for undertaking reviews from these different perspectives, but reviews with an overly narrow focus may be misleading. Such reviews may, for example, draw spurious conclusions about the effects of a type of intervention. If there is a paucity of studies of a particular intervention that meets the selection criteria, a review of the effects of the intervention across different conditions and settings may provide a better estimate of its potential effects than a review of its effects in very specific circumstances. Therefore, when searching for and selecting reviews of the effects of implementation strategies, it is prudent to search for broadly-focused reviews and to be cautious when interpreting the results of more narrowly-focused reviews.

Once a relevant systematic review is found, a decision is then needed about how much confidence to place in it. A [SURE checklist for making judgements about how much confidence to place in a systematic review](#) included in the 'Additional resources' section of SURE Guide 4 can also guide judgements about the reliability of reviews of implementation strategies.

If a systematic review without important limitations cannot be found, searching for individual studies may be necessary, either to supplement the information in a review or in place of a systematic review. If this is done, attention should be paid to the same processes used when selecting studies for inclusion in a systematic review. In other words, as far as possible, systematic and transparent (explicit) methods should be used to find, select, and critically appraise studies, as well as to synthesise the results of relevant studies. Ideally, the methods used to do this should be described in an appendix to the policy brief.

Judgements about the potential effects of implementation strategies are similar to the judgements that must be made about the potential impacts of the policy options being implemented. The GRADE framework provides the structured and transparent approach needed to make these judgements, including those related to how much confidence to place in estimates of the likely effects of implementation strategies. The [SURE worksheet for preparing a summary of findings using GRADE](#), is appended to [SURE Guide 4](#), and can be used to guide judgements about the estimates of effect of implementation strategies.

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How should information about barriers and the likely effects of strategies for addressing them be summarised?

In a policy brief, the section describing implementation considerations should include descriptions of the following:

- Important barriers to implementing each option, including:
 - The evidence and judgements used to characterise the barriers
- Strategies for addressing the barriers, including:
 - A concise summary of the advantages and disadvantages (including costs) of the implementation strategies
 - The quality of the evidence
 - Any important limitations of systematic reviews or processes used to summarise the evidence of the likely effects of implementation strategies
 - Important gaps in the evidence

A summary of findings, as described in [SURE Guide 4 \(together with worksheets for providing a summary of findings\)](#), can help decision makers to develop an accurate understanding of the effects of the implementation strategies described in a policy brief. The summary of findings should include:

1. The characteristics of the evidence, including the types of participants, the types study settings, the implementation strategy, and what the strategy was compared to
2. The most important outcomes, including intended changes (benefits) and possible harms and costs
3. The estimated effect of the intervention on each important outcome (preferably in quantitative form)
4. The amount of information upon which the information is based
5. The quality of the evidence for each outcome

The same additional considerations described in [SURE Guide 4](#) are relevant to implementation strategies. These include: judgements about the impacts on equity, resource usage and costs, and the need for monitoring and evaluation. An example of a Summary of Findings table for an implementation strategy is provided in Table 5.1. Additional examples, as well as guidance on making judgements about impacts on [equity, resource use and costs](#), and [monitoring and evaluation](#) can be found in the SUPPORT Summaries (www.support-collaboration.org).

[Workshop materials and a presentation on identifying and addressing barriers to implementing options](#) are provided in the 'Additional resources' section of this guide. Further guidance on [addressing how an option will be implemented is available in the SUPPORT Tool](#).

Table 5.1 An example of a Summary of Findings table for an implementation strategy: Educational meetings for health professionals

Patient or population: Health care professionals
Settings: Primary and secondary care
Intervention: Educational meetings with or without other interventions*
Comparison: No intervention

Outcomes	Adjusted absolute improvement (risk difference) [†] median (Interquartile range)	Number of studies	Quality of the evidence (GRADE)*	Comments
Compliance with desired practice	Median 6% (1.8 to 15.9)	30	⊕⊕⊕⊖ Moderate [‡]	The effect appears to be larger with higher attendance at the educational meetings and with mixed interactive and didactic educational meetings. Educational meetings did not appear to be effective for complex behaviours and they appeared to be less effective for less serious outcomes.
Patient outcomes	Median 3.0% (0.1% to 4.0%)	5	⊕⊕⊕⊖ Moderate [‡]	

*GRADE Working Group grades of evidence

⊕⊕⊕⊕ **High:** We are confident that the true effect lies close to what was found in the research

⊕⊕⊕⊖ **Moderate:** The true effect is likely to be close to what was found, but there is a possibility that it is substantially different

⊕⊕⊖⊖ **Low:** The true effect may be substantially different from what was found

⊕⊖⊖⊖ **Very low:** We are very uncertain about the effect

Footnotes

* The effect of educational meetings alone on professional practice was the same as for multifaceted interventions that included educational meetings

†The post intervention risk differences are adjusted for pre-intervention differences between the comparison groups

‡We have downgraded the evidence from high to moderate because of inconsistency in the results that could not be fully explained

Additional resources

[Evaluation form](#)

A form for evaluating the SURE Guides

[Glossary](#)

A glossary of terms used in the guides

[Checklist for identifying barriers to implementing a policy option](#)

Checklist for identifying factors affecting the implementation of a policy option

[Workshop materials and presentations](#)

Workshop materials and a PowerPoint presentation on finding and using local evidence

[SUPPORT Tool for finding and using evidence about local conditions](#)

Questions to consider when finding and using local evidence

[Examples of implementation strategies](#)

Examples of implementation strategies to address different types of barriers

[Example of the checklist for identifying barriers – task shifting](#)

Example of the checklist for identifying factors affecting the implementation of a policy option—as used by the REACH team in Uganda in their policy brief on task shifting

[Strategies for finding systematic reviews of barriers and implementation strategies](#)

Strategies for finding systematic reviews of barriers and implementation strategies to address them

[SUPPORT Summaries](#)

Concise summaries of the best available evidence of the effects of health systems interventions and maternal and child health interventions for low and middle-income countries

[Workshop materials and presentations](#)

Workshop materials and a PowerPoint presentation on identifying and addressing barriers to implementing options

[SUPPORT Tool for using research evidence to address how an option will be implemented](#)

Questions to consider when using research evidence to address how a policy option will be implemented

SUPPORT Tool for taking equity into consideration when assessing the findings of a systematic review

Questions to consider about equity when assessing the findings of a systematic review

SUPPORT Tool for finding and using research evidence about resource use and costs

Questions to consider when finding and using research evidence about resource use and costs

SUPPORT Tool for planning monitoring and evaluation of policies

Questions to consider when planning monitoring and evaluation of policies

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