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What factors influence evidence use in policy? An updated systematic map

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Abstract

In 2014, a large systematic map found that relational factors were amongst the most frequently reported facilitators of evidence use in policy. Since then, there has been a growth in evidence-use initiatives and research, many of which have attempted to address relational factors. In this timely updated map, we describe the current state of research about which factors influence evidence use in policy. A search strategy combining 'evidence', 'barriers and facilitators' and 'policy/policymakers' was used to identify studies across 15 electronic databases between 2012 and 2022. Studies were screened for those that include empirical data about evidence use in policy. Data extraction enabled descriptive analyses characterising studies in terms of focus, topic area, setting, and types of factors influencing use. Two thousand, one hundred and ninety-nine studies were included, a 20-fold increase over 10 years. The most commonly reported factors influencing use were the relevance of evidence, and then organisational (resources, skills, personnel and managerial support). A large number of studies reported on evidence-use interventions ($n = 877$) of which 379 were evaluations. Findings may indicate a shift towards relational and systemic thinking about evidence use. There appears to be a growing recognition of the resourcing, work, time, and workforce required to embed evidence use within and between organisations. With this huge growth in the literature, particularly in new evidence use interventions being tested across policy sectors, continued review and mobilisation is necessary to effectively inform the design and implementation of evidence use interventions and research.

Background

Research into evidence use in policymaking has had a long and often repetitive history. Debates about what counts as evidence are as lively now as they were 50 years ago (Weiss, 1968; Oakley, 1989; Mackillop and Downe, 2023). Political scientists and sociologists, many drawing on Weiss's work from the 1970s (WEISS, 1979), continue to categorise evidence use (Capano and Malandrino, 2022). Others focus on the long-established concept of 'cultures' or 'communities' of evidence production and use (Caplan, 1979), and how these may influence decision-making

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(Lorenc et al., 2014; Bandola-Gill et al., 2024; Strassheim, 2024). Scholars from every research discipline contribute to the ever-growing body of literature about evidence production, mobilisation and use.

There is a small, interdisciplinary field which takes evidence use as their primary focus of study. Within this field, theory on evidence use has developed over the past decade, with Best and Holmes (2010) describing this evolution as 'generations' of thinking about evidence use: Linear, relational and systemic. Linear approaches to evidence use, such as rapid evidence synthesis programmes, were prompted by evidence showing that research characteristics such as evidence accessibility, format and relevance were facilitators of evidence use (Innvaer, 2002). This framing encourages approaches which target particular factors that might hasten the uptake of research evidence (Orton, 2011). Such approaches reflect the linear model, whereby research evidence is produced, it is mobilised through various means (such as research dissemination, or stakeholder engagement) and then used to address a policy or practice problem (Best et al., 2010). However, it is now recognised that the linear model is an over-simplification of the process by which decision-makers draw on evidence (Author, 2014; Etzkowitz, 2006).

In 2014, a systematic map of factors influencing evidence use was undertaken (Author, 2014), identifying 145 studies reporting barriers and facilitators of evidence use. In 2014, relational factors (alongside relevance) were the most frequently reported factors which influenced evidence use. Typically, relational initiatives—also referred to as 'linkage and exchange' (Lomas and 2000; Ward et al., 2009)—assume that contact between knowledge users and producers is likely to result in greater trust between stakeholders, the production of useful knowledge, and its use by decision-makers. Co-production is now much more common in research and knowledge production, reflecting this shift (Turnhout et al., 2020). However, as studies of relational initiatives show, these interventions need to be locally situated, targeted at local need and context, and to draw on local knowledge if they are to be effective (Durrant et al., 2024; Neal et al., 2023).

The evidence use field has long established empirically that decision-makers draw upon a wide range of types of knowledge, and that how they do so is a complex, dynamic process (Cairney, 2016; Boaz et al., 2019; Innvaer, 2002); the contextual and contingent nature of 'evidence' (Cairney 2016, Parkhurst, 2016); the ways that many kinds of knowledge could and should play a role in decision-making (Oliver S, Duncan S, etc); and the importance but insufficiency of relational working (Holmes, 2008). Within the field, empiricists seek ways to measure or quantify evidence use (Hall and Van Ryzin, 2019; Supplee, Mayo-Wilson 2022; Long E and Smith R, 2021). Interventionalists design and evaluate experimental approaches to increase or improve evidence use (Crowley, Cooper on RPPs, CAPE, etc). Recent systematic review of reviews found that many individual and multi-faceted interventions are being implemented with limited effect (Nduku et al., 2024); and that there is a need to think more about how interventions need to respond to and be situated within individual contexts (Boaz et al., 2024). These studies correspond with the broader literature on evidence use emphasising the need and difficulty of taking a systemic approach (Boaz et al., 2024).

The evidence use field has charted these developments, while frequently calling out the lack of cross-disciplinary learning and the repetitive and wasteful nature of much of this research (Author 2019; Boaz 2019; Head 2016). Much of the research in this area has framed the problem in terms of barriers and facilitators, i.e. as factors which have a causal relationship with evidence use. Why, then, is it worth considering the somewhat linear question of how factors influence evidence use, if this framing will not lead to actionable lessons?

Aims of the review

Firstly, updating an existing scoping map is a way to take stock of the literature. The question of what influences evidence use has been a lively one for several decades (Innvaer, 2002; Author, 2014; Orton, 2014; Verboom, 202; Capano and Gilbert, 2024). Innvaer (2002) focused on use of evidence by health policymakers; Author (2014) updated this review and broadened to all policy areas, finding a large increase in the published literature on this topic (145 studies up from 22 in 2002). Has this body of literature further increased, and are more policy domains represented? It allows us to see how researchers in different fields are thinking about the relationship between evidence production and use. Given the often siloed and disjointed approaches to understanding evidence production

and use across fields (Author, 2019), by including a focus on systemic factors, this update will be particularly useful for gaining a comprehensive understanding beyond individual academic disciplines.

Second, we need to have a better understanding of what a systemic approach to evidence use might look like. While the field accepts that a systemic approach is necessary to enable effective linear and relational approaches, there is less clarity about what this means in practice. In 2002, accessibility and relevance were identified as critical factors, helping researchers and decision-makers identify ways to communicate with each other more effectively. In 2014, relational factors were reported as most frequent, helping to shape our understanding of evidence use as a contingent and interpersonal process. Now, identifying factors influencing evidence in contemporary literature may help us to better describe a potential systemic approach to promoting evidence use.

Third, we need to understand how learning from the field is being translated into interventions to promote evidence use. Funders, governments, researchers and practitioners all demonstrate a growing interest in evidence use. Following the 2014 review, the last ten years has seen a huge increase in the number of evidence use initiatives which draw on relational thinking, from the development of fellowship schemes (Kumpunen et al., 2023, Buckley and Oliver, 2024), to initiatives providing networking and match-making opportunities (Crowley et al., 2021), to longer-term collaborations (Armstrong Rebecca et al., 2013; Pettigrew, 2019). A huge amount of money has been expended on relational initiatives, so it is important to assess whether relational factors remain highly reported, or whether a different set of concerns have been identified in the literature. There has been a huge increase in global attention towards how evidence-using systems can be better supported (Topp et al., 2018; Evidence, 2024; Challenges, 2024). As a field, we need to offer these funders and practitioners the best possible actionable findings about what seems likely to improve evidence use.

Methods

This is an update of a previous systematic map (Author, 2014) and drew on the criteria and data extraction templates. The key differences in this updated map were search dates and the conflation of barriers and facilitators into factors. This was done as the previous review found that many included studies reported factors which could be coded as either, or both. For example, 'budgets' could be understood as a barrier to evidence use, or as a facilitator. The same coding tool was used, but categories were expanded where necessary, e.g. around policy domains, or countries, which had not been included in the 2014 systematic map.

Other than the search dates, inclusion criteria were the same. To be included, studies were:

- Published between Jan 2012 (the date of the previous search) and June 2022.
- Empirical research, defined as having some indication of where data presented in the study originated from and how it had been analysed. Commentaries, opinion pieces, and advertorials were excluded.
- About policy, defined as decisions made by a state organisation, or a group of state organisations, at a national, regional or conurbation level, e.g. school district. Studies of clinical decision-making for individual patients, or protocols for single sites were excluded.
- About factors influencing the use of evidence (categorised as evidence, organisation and resources, contact and collaboration, policymaker characteristics, policy characteristics or research directly, or others).

We excluded studies in languages other than English due to team resources and the size of the review. Studies were also excluded if they were not peer-reviewed (e.g. were conference papers or abstracts), or were theses and books.

We followed the updated Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines for systematic reviews (Page et al., 2021) to guide our reporting. We did not complete critical appraisal, risk of bias or synthesis of effects as a systematic map would typically not include those stages.

A search strategy building on the 2014 review was compiled in the OvidSP Medline database by an experienced information specialist (JF), and is available as Supplementary File 1. The search included strings of terms, synonyms and controlled vocabulary terms (where available) to reflect three concepts: 'Evidence', 'Barriers and facilitators' and

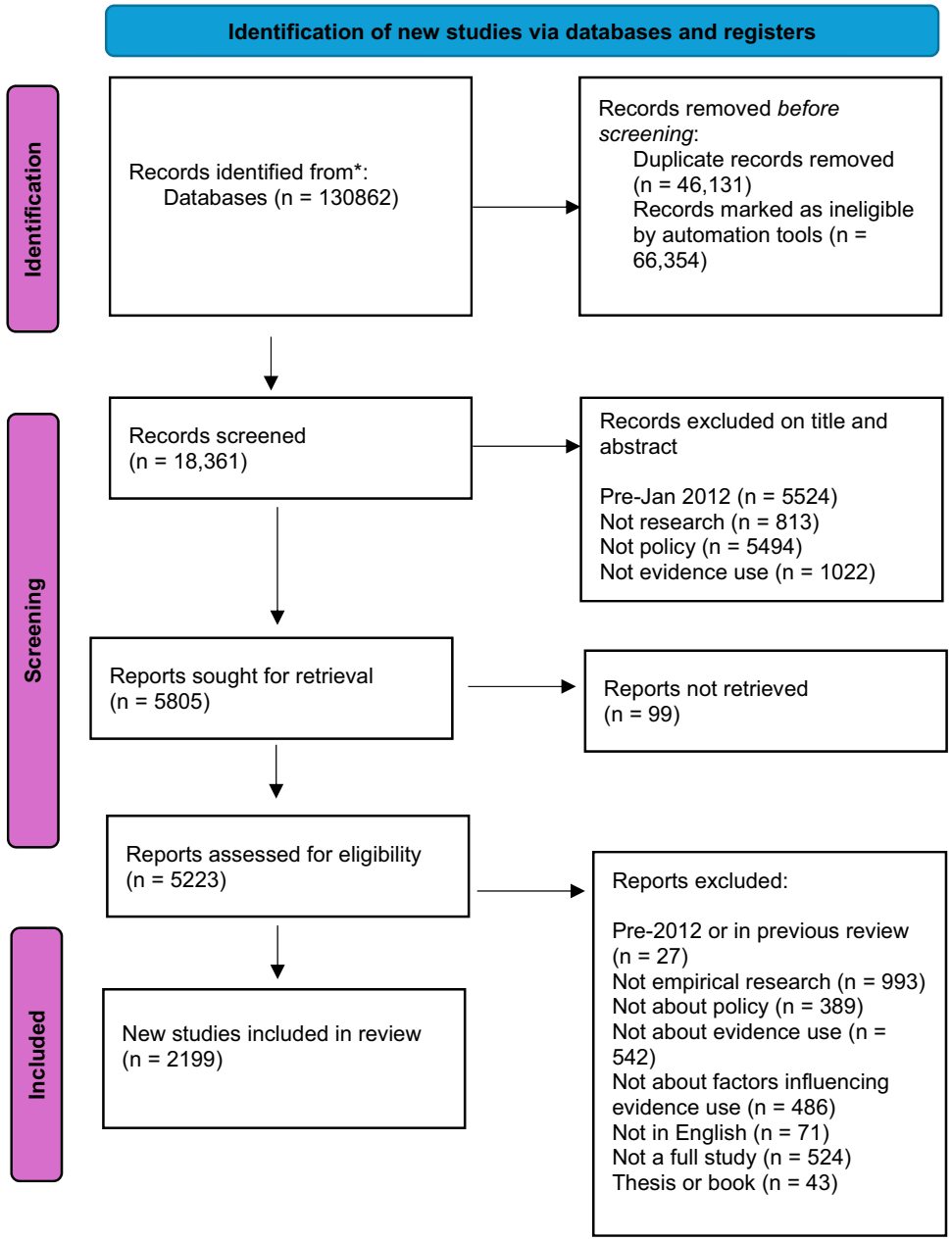

Fig. 1 Flow of studies through the review.

'policymakers'. The search terms used in this search are very common so we used proximity searches to increase the precision of the search, where this technique was available. In order to capture information from across disciplines and contexts, no geographical, methodological or language limits were applied. This search strategy was refined with the project team until the results retrieved reflected the scope of the project.

Fifteen bibliographic databases covering social, political, natural and physical sciences were searched on 22 June 2022. The agreed OvidSP Medline search was adapted for each database to incorporate database-specific syntax and controlled vocabularies. The search results from the previous review were imported into the EndNote 20 software. Then all citations identified by our updated searches were imported. This allowed accurate updating of results with only items not previously retrieved being put forward for screening. Duplicates were identified and removed in a multi-step method (Falconer, 2018). Results were exported in .ris format from EndNote 20 to EPPI-Reviewer Web software for screening (Thomas, 2010).

Studies were screened initially on title and abstract by the team, with Author 1 double-screening all to ensure consistency. The EPPI-Reviewer Screening Wizard, which uses a learning algorithm to identify the most relevant studies, was used to support the screening. This algorithm prioritises studies most relevant to the inclusion criteria for screening first. Once studies were being included at less than one per hundred screened, no further screening was undertaken on title and abstract. Studies excluded on this basis are marked as 'records marked ineligible by automation' in Fig. 1.

Full texts were retrieved and stored on EPPI-Reviewer, and then screened for inclusion, again with all studies being double-screened by Author 1. Disagreements were resolved by group discussions between Author 1 and relevant team members.

Studies were then coded using a keywording tool, available online at https://eppi.ioe.ac.uk/eppi-vis/login/open?webdbid=616. All studies were hand-coded by Author 1, with double coding by co-authors following training and induction. For every study, data were extracted on:

- Knowledge domain (i.e. what policy or practice sector, and/or academic discipline the study focused on).
- Focus of the study (describing or evaluating an intervention, impact or measurement of evidence use, feasibility of evidence use, or reporting on factors).
- Primary focus on evidence production (who, how and what knowledge and evidence is created), mobilisation (how knowledge and evidence is translated, made accessible, re-formatted, tailored, shared, or otherwise made more available for users) or use (focusing on how knowledge and evidence forms part of decision-making processes and settings)
- Definitions and types of evidence referred to in the study (e.g. systematic reviews, surveillance data, evaluation data).
- Characteristics of the study (country, study design, data collected, level of policy).
- Factors influencing evidence use. Pre-defined themes were used to organise factors: evidence characteristics (e.g. type and accessibility), policy characteristics (e.g. context of decision-making), contact and collaboration (e.g. relationships or opportunities for contact), organisation and resources) e.g. managerial support), researcher characteristics (e.g. researchers' skills), policymaker characteristics (e.g. will and support). Two themes were not broken down further: intermediary characteristics, and other participants.
- Types of interventions (if applicable).

After completion of coding, descriptive statistics were used to characterise the overall review findings and to assess trends in the literature. Because of the number of factors identified, categories derived from the previous review were used to group these individual factors together into themes. A single study could report one or multiple factors, and under one or multiple categories.

Findings

A total of 130,862 results were retrieved by the database searches. After de-duplication ($n = 46{,}131$ (35%)), screening on title and abstract ($n = 18{,}361$) and screening on full text ($n = 5223$), 2199 studies were included on full text. All studies were double-data extracted to enable descriptive analyses characterising studies in terms of focus, topic area, setting, and types of factors influencing use. The flow of studies through the review can be seen in Fig. 1.

A full set of visualisations and data from the review is available at https://eppi.ioe.ac.uk/eppi-vis/Review/Index/616. The searches for this dataset continue to be updated and the live dataset is available.

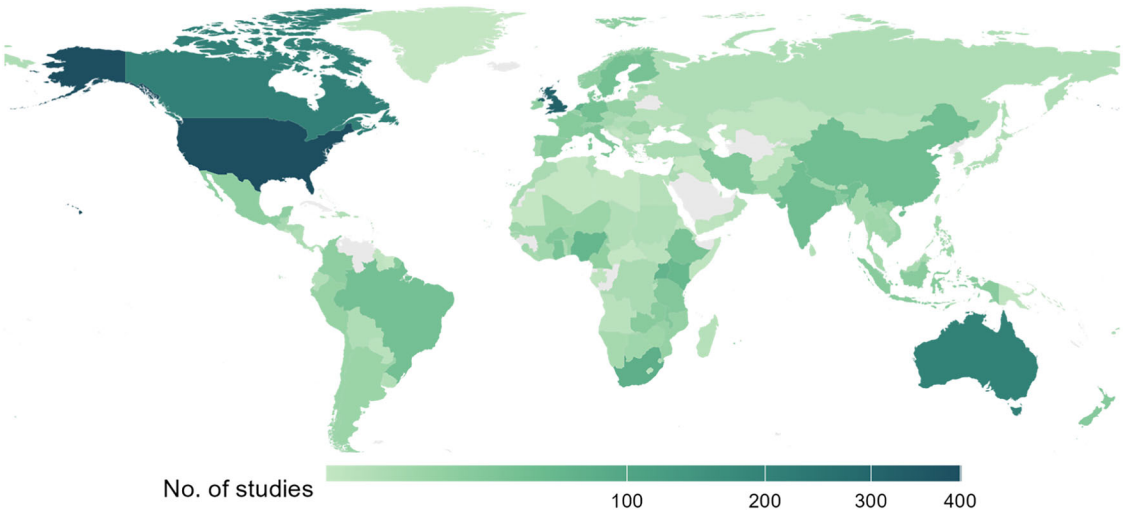

Fig. 2 In which countries and regions were studies undertaken?

Insert here: Fig. 1: Flow of studies through the review

Characteristics of included studies

There has been a huge increase in the number of studies in this field, with 2,199 studies included in this update. The previous review included 145 studies between 2000-2012, averaging one included paper per month. Over the period included for this systematic map, this had increased to over 23 studies per month.

The most frequently reported country setting was the USA ($n = 400$), followed by the UK ($n = 317$), Canada ($n = 210$), Australia ($n = 203$) and South Africa ($n = 79$). One hundred and thirteen countries or principalities had 10 or fewer studies. Six hundred and forty-seven studies (29%) were conducted in Asia, South and Central America, and Africa. Overall, 1306 (59%) studies were undertaken in the Global North only, 591 (27%) in the Global South only, and 228 (10%) in neither (e.g. were global systematic reviews or did not specify). Not counting studies which did not specify country of interest or where not relevant (e.g. for systematic reviews), only 74 studies (3%) included countries from both the Global South and the Global North (UK, Europe, Canada, USA Australia, New Zealand, Israel and Japan). For clarity, the figures below have been colour-coded to show the proportion of studies undertaken in these broad categories (see Fig. 2).

Insert here: Fig. 2: Countries and regions where studies were undertaken

Most (57%) studies used interviews or cross-sectional surveys, or both. However, we also identified 259 systematic reviews: an average of one new systematic review on this topic every two weeks. This category included all types of systematic syntheses, from maps to realist reviews, meta-ethnographies and meta-analyses. The Case studies code ($n = 562$) was used to describe studies taking an in-depth approach to study one or more settings, relying on one or more data collection approach.

Insert here: Fig. 3. Data collection methods used by included studies

We found a high number of documentary analyses ($n = 736$), which included analyses of legislative documents, policy and strategy publications, as well as emails and other archival material (see Fig. 3). Observations ($n = 141$) were used to describe studies where researchers had drawn on online or in-person meetings and discussions and focus groups ($n = 418$) described any workshop or meeting or group interview. Ethnography ($n = 54$) was used to describe

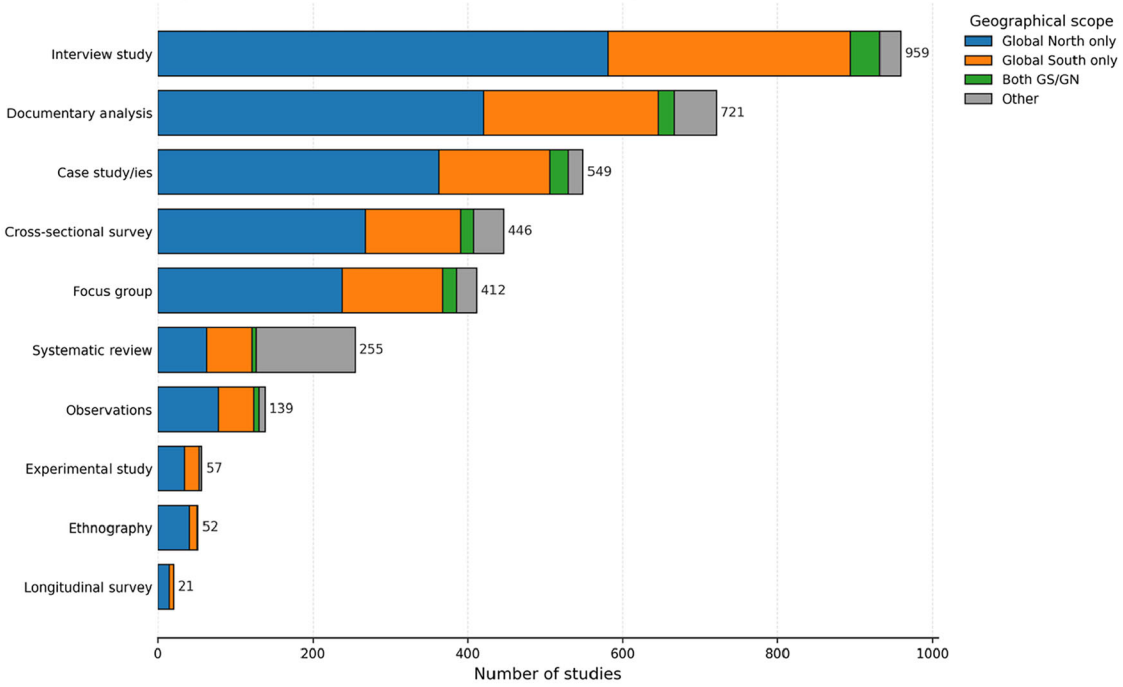

Fig. 3 Data collection methods used by included studies.

studies which explicitly used this term or a defined related approach (e.g. anthropological enquiry). Finally, we also found 57 experimental studies which was an entirely new category. Methods used appears to be consistent across the Global North and South.

Around half of the studies reported policymakers' views and experiences ($n = 1139$), with researchers ($n = 1002$), practitioners ($n = 887$), civil society ($n = 306$), industry and private sector ($n = 220$) and politicians ($n = 125$) also represented. Knowledge brokers ($n = 164$) and funders ($n = 91$) were two new categories coded. Most studies were about national policy ($n = 1020$), with international ($n = 181$), regional ($n = 609$) and local ($n = 506$) all heavily researched.

A large proportion of studies were about health ($n = 1294$, 58%) with 57% of those ($n = 735$) about public health (see Fig. 4). Health care ($n = 321$), health promotion ($n = 60$), drugs, alcohol and tobacco ($n = 76$) and mental health ($n = 56$) constituted significant sections of the evidence base. Perhaps unsurprisingly, COVID-19 was mentioned in around 20% of papers published since 2020 ($n = 134$).

Insert here Fig. 4: Which sectors and disciplines are represented in the review?

Twenty-five percent ($n = 548$) of studies focused on conservation and environmental issues. Within this category, climate change was a frequent focus ($n = 144$), with water ($n = 82$), agriculture ($n = 78$), biodiversity ($n = 74$) and forests ($n = 36$) also well-represented. Development ($n = 41$) and sustainable development ($n = 44$) were substantial literatures. Overall, the sustainable development goals were mentioned in 201 studies.

Other sectors included public administration, which was used to describe public policy generally, as well as government and legislature studies ($n = 233$). Social care and social work ($n = 68$), children and youth ($n = 108$), and families ($n = 53$) were well-represented, perhaps reflecting the growth in research funding for evidence use studies in these fields. City and regional planning ($n = 115$), education ($n = 85$), food ($n = 84$) and innovation and technology ($n = 63$) were also significant literatures with criminal justice ($n = 35$), transport ($n = 33$), economics ($n = 33$), and energy ($n = 27$) similarly sized. Newly identified in this review, compared with the 2014 sectors, were foreign policy ($n = 3$), accounting ($n = 5$), work and pensions ($n = 17$), migration ($n = 13$), and national security ($n = 12$). There do not appear to be any major differences in disciplines represented by Global North and Global South studies.

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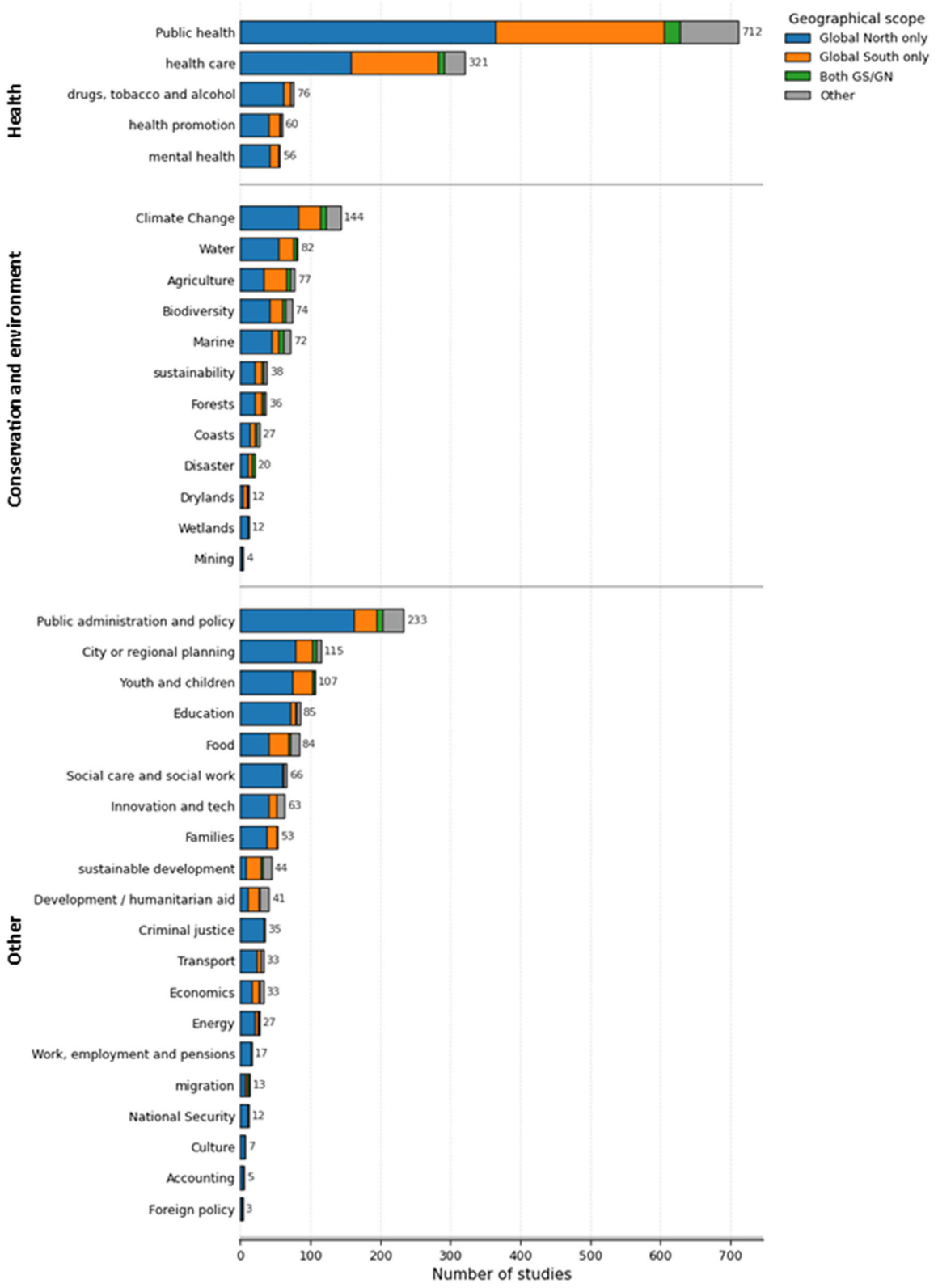

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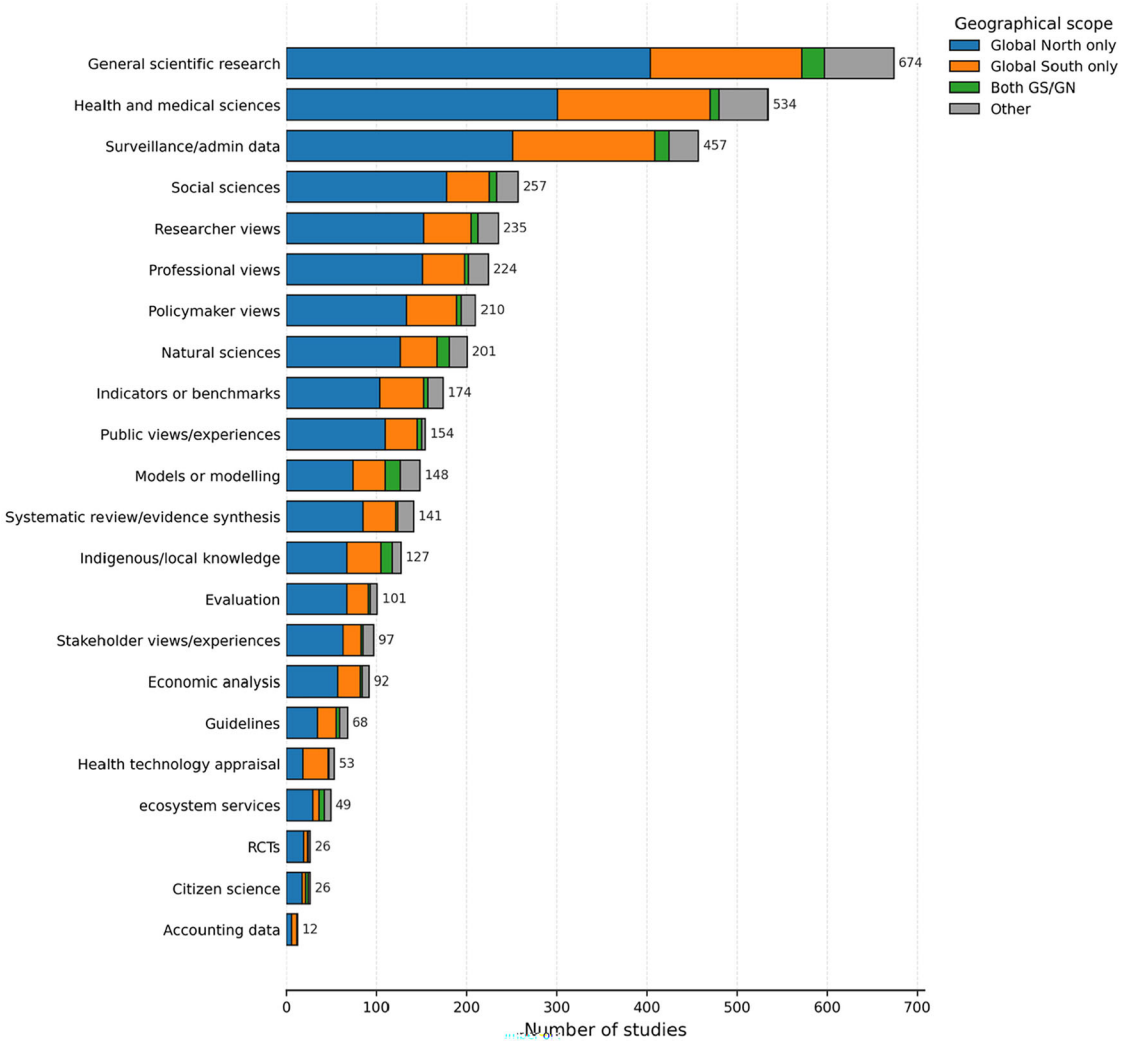

Fig. 5 Which types of evidence did include studies focus on?

What type of evidence was being studied?

We coded studies according to what they meant by 'evidence', i.e. what types of evidence and knowledge was being utilised, or potentially utilised by participants in the studies (see Fig. 5). We coded studies which did not have a clearly defined evidence type but referred only to 'science' or 'research'. as 'general scientific research', ($n = 674$). Other than this category, included studies most commonly focused on evidence from health and medical science ($n = 535$). Almost one fifth focused on evidence from professional expertise (comprising public, professional and policymaker views; $n = 414$). There is a notable subset of studies focusing on evidence from public knowledge ($n = 154$), indigenous or local knowledge ($n = 127$), and citizen science ($n = 26$). Again, types of evidence studied appears to be consistent across Global North and, South, other than Health Technology Appraisal evidence which is disproportionally studied in the Global South. Where the evidence studied fitted one or more categories (e.g. RCTs in the health and medical field) both were coded.

Insert Fig. 5: Which types of evidence did include studies focus on?

There has been a large increase in the number of studies looking at the use of surveillance and administrative data ($n = 457$) or indicators ($n = 174$), as opposed to research evidence. Some studies focused on specific types of research

Table 1 Focus and aim of studies.

	Using evidence	Mobilising evidence	Making evidence
Describe an intervention	92 (4%)	365 (17%)	107 (5%)
Impact and measurement of evidence use	205 (9%)	150 (7%)	27 (1%)
Feasibility of research use	42 (2%)	54 (2%)	18 (1%)
Reports on factors influencing evidence use	814 (37%)	1065 (48%)	320 (15%)
Evaluate an intervention (or systematic review of intervention evals)	59 (3%)	260 (12%)	59 (3%)

Table 2 Most frequently reported factors influencing evidence use (>55% studies).

Factor influencing evidence use	Number of studies (total 2199)	% of total studies
Relevance, function of evidence	1069	49%
Staff and personnel resources	1019	46%
Opportunities and resource for contact	960	44%
Material resources - access to research and data	943	43%
Type of evidence	906	41%
Managerial support	833	38%
Communication channels	694	32%
Context of decision-making	676	31%
Funding	652	30%
Policymaker will and support	652	30%
Availability of evidence	641	29%
Credibility of evidence	567	26%

or other formal data, such as systematic reviews in specific fields ($n = 141$, of which 22 were systematic reviews themselves), models and modelling ($n = 148$), evaluation ($n = 101$), or economic analyses ($n = 92$). Perhaps surprisingly, given the extensive research already in this area, 26 studies focused on the use of randomised controlled trials.

Study focus

Most studies focused on the mobilisation of evidence ($n = 1065$), or its use ($n = 814$), with fewer focusing on knowledge production ($n = 320$) (categories exclusive to reflect the primary focus of the study). This appears to be a genuine shift in the literature, as—although not coded in the initial review—most studies then focused on research practices and activities, which we coded as 'making' in this review. All studies reported on factors influencing evidence, which was a criterion for inclusion. In addition, they described ($n = 564$) or evaluated interventions ($n = 378$), reported on impact and measurement of evidence use ($n = 382$), or on feasibility of evidence use ($n = 114$). Table 1 shows how these topics mapped across the three foci of making, mobilising and using evidence:

Factors influencing evidence use

Partly because of the scale of the review, we decided to code factors rather than barriers and facilitators, as so many papers report the same factors as acting as both. It is not possible to reference every study which reports these factors, so examples have been chosen for interest and representativeness. All studies can be identified in the online dataset.

The most frequently reported factor (summarised in Table 2) overall was the relevance of evidence ($n = 1069$), followed by staff and personnel ($n = 1019$), opportunities and resources for contact ($n = 960$), material resources such as access to research data ($n = 943$), and type of evidence ($n = 906$). In comparison, the top 5 factors identified in the 2014 review were availability and access to research ($n = 63$), clarity and relevance of research findings ($n = 54$), collaboration ($n = 49$), timing and opportunity for collaboration ($n = 42$), and relationships ($n = 39$).

Table 3 Number of studies reporting factors influencing evidence use.

Category of factor	Number of studies overall	Factor	Studies reporting this factor
Evidence characteristics	1782	Type of evidence	906
		Source of evidence	520
		Availability	641
		Credibility	567
		Legitimacy	268
		Actionable	529
		Accessibility	508
		Content (i.e. what it says)	411
		Relevance, function	1069
Policy characteristics	925	Importance of policy	176
		Other pressures on policy	422
		Context of decision-making	676
		Framing	325
Contact and collaboration	1336	Timing	193
		Pre-existing relationships	260
		Trust	333
		Opportunities for new relationships	361
		Maintaining relationships	285
		Opportunities and resource for contact	960
		Participatory, collaborative research	466
		Transparency	154
Organisation and resources	1659	Managerial support	833
		Legislative support	329
		Staff and personnel resources	1019
		Material resources - access to research and data	943
		Turnover and continuity	147
		Funding	652
		Communication channels	694
		Time	274
		Culture	351
Researcher characteristics	560	Skills	329
		Policy awareness	316
		Will/interest	190
		Credibility	142
Policymaker characteristics	978	Will and support	652
		Research awareness	453
		Research skills	360
Factors relating to Intermediaries (funders, media, knowledge brokers, NGOs)			419
Characteristics of other participants			255

We used categories derived from the previous review to group these individual factors together into themes (see Table 3). A single study could report one or multiple factors, and under one or multiple categories. The most frequently reported category was evidence characteristics ($n = 1782$), followed by organisation and resources ($n = 1659$), contact and collaboration ($n = 1336$), policymaker characteristics ($n = 978$, policy characteristics ($n = 925$) and researcher characteristics ($n = 560$). We also identified two new categories of factors relating to intermediaries such as funders and knowledge brokers ($n = 419$), and characteristics of other participants, such as

industry or the public ($n = 255$). While it has not been possible to describe every study, illustrative examples to give the reader a sense of the scope and diversity within categories have been selected.

The category of *Evidence characteristics* was used to group factors relating to the evidence itself; its quality, format, content, relevance and so on. The provision of easily accessible, relevant, and actionable evidence remains a major factor affecting evidence use. A significant number of studies discussed the legitimacy and credibility of evidence, often in relation to source or funding, but also around politicisation of evidence and of research organisations. Credibility was discussed as being related to rigour, peer review, and research quality as well as more political qualities such as objectivity and partisanship (e.g. Donadelli, 2020; Bogenschneider, 2020). Within 'type of evidence', the methodology used (e.g. qualitative vs. quantitative epistemologies) was not commonly reported as a factor influencing evidence use, with more focus on, e.g. consensus (Mabon et al., 2019; Goldman et al., 2020) and uncertainty (Bromley-Trujillo and Karch, 2021; Knaggård, 2014). However, the content of evidence was mentioned in several studies—for example whether a research study explicitly demonstrated a policy was ineffective or harmful (Mitchell and Font, 2017).

Organisation and Resources was the second largest category overall, and included factors specifically relating to organisational culture, workforce, training and access to equipment and data. Factors relating to managerial support, access to data and research, and communication channels were also reflected in the earlier review. In addition, we found a large focus on leadership and systems management. Three hundred and twenty-nine studies focused on legislative support for evidence use, which included government legislative requirements (e.g. the USA's Foundations for Evidence-Based Policymaking Act of 2018), as well as institutionalisation of evidence (Mabon et al., 2019). Leadership was not a factor identified in advance of the review, but was discussed in relation to evidence use as a key facilitator, through championing evidence use, modelling behaviour, developing accountability mechanisms for evidence use including regulatory requirements, and leading to organisational culture change such as recruitment patterns (Goldman et al., 2020; Allen et al., 2018; Aryeetey et al., 2017; Sinead, 2013; Connolly, 2020). Multiple roles for leaders were discussed, such as promoting formal science systems (Cressman et al., 2021), developing policy frameworks for evaluation and data sharing (Tantivess et al., 2019), and developing and supporting systems for feedback and adaptive learning within policy organisations (Tobin et al., 2022; Hirschfeld, 2020). The relative importance of good leadership particularly within fragile organisations and systems (i.e. those liable to change and pivot away from evidence as a cultural priority) was also emphasised (Shroff Zubin et al., 2015).

Contact and collaboration factors remain highly discussed in the literature, with trust, collaboration and relationships all being highly reported. Three hundred and thirty-three studies reported on trust as a factor, and also a significant proportion discussing participatory or collaborative research, i.e engaging in collaborative research activities as a factor ($n = 466$). However, the high number of studies in this category can nearly all be accounted for by one factor, 'opportunities for resources and contact', which accounts for over 71%. This factor was coded where included studies discussed for example, the importance of having the chance to interact with evidence users, or the ability to make time for frequent collaboration.

Researcher characteristics were reported in five hundred and sixty studies. These were barely reported in the earlier review, but here researcher's skills (often to do with engagement with policy stakeholders), their awareness of policy and their motivation and will to address policy needs, and their overall credibility were all frequently mentioned. In the earlier review, *Policymaker characteristics*, particularly their research skills, were often reported. Here, research skills are still frequently reported but policymaker awareness of research ($n = 453$) and their will and support for evidence use ($n = 652$) are more commonly referenced. *Policy Characteristics*, i.e. the political context, policy framing and other pressures were very frequently reported, in over nine hundred included studies (42%).

Characteristics of intermediaries and other participants were reported in 419 and 255 studies respectively. Both were new categories. Studies exploring the role of intermediaries often looked at the role of non-governmental organisations or philanthropic funders on evidence use (Cole et al., 2021; Reckhow and Tompkins-Stange, 2018; Cochrane and McGilloway, 2017), think tanks (Shaw, 2018, Smith et al., 2013, Ardila, 2020), or explored the role of the media and social media (Grande et al., 2014; Ndumbe-Eyoh and Mazzucco, 2016; Stucki, 2016; Yanovitzky and Weber Matthew, 2019). Civil society groups and members of the public were included in the 'other participants' category.

Table 4 Types of interventions and their focus (number of studies; in parentheses, number of evaluations).

Type of intervention	Using evidence	Mobilising evidence	Making evidence	Total
Provision of a resource (e.g. indicators, a database or map)	38 (11)	131 (67)	26 (10)	195 (88)
Training or capacity building	26 (14)	91 (61)	11 (6)	128 (81)
Research infrastructure (e.g. new synthesis unit, funding stream etc)	9 (3)	53 (26)	39 (17)	101 (46)
Policy briefs	11 (4)	67 (45)	10 (6)	88 (55)
Knowledge broker/embedded researcher	9 (3)	68 (35)	6 (4)	83 (42)
Other research collaboration	5 (4)	40 (9)	24 (3)	70 (16)
Policy strategy	21 (4)	34 (13)	10 (3)	65 (20)
Research/policy/practice partnership	11 (6)	32 (16)	10 (4)	53 (26)
Policy dialogues	4 (1)	45 (28)	0 (0)	49 (32)
Advisory committee/structure	12 (1)	31 (10)	1 (0)	44 (11)
Research/practice partnership	4 (2)	29 (10)	9 (7)	42 (19)
Network	4 (1)	29 (16)	6 (2)	39 (19)
Other	6 (3)	24 (11)	7 (1)	37 (15)
Intermediary organisation activity	4 (2)	24 (7)	4 (1)	32 (10)
Research/policy partnership	5 (4)	19 (6)	8 (3)	32 (13)
University-based knowledge exchange	2 (0)	18 (9)	4 (1)	24 (10)
HTA process	1 (0)	15 (3)	1 (1)	17 (4)
Policy labs	3 (1)	8 (3)	3 (2)	14 (6)

Overall, 877 studies reported an intervention, of which 378 studies evaluated an intervention (43%, see Table 4). Nearly all the identified interventions were about the mobilisation of knowledge, i.e. about providing opportunities for knowledge exchange, dialogue or otherwise hastening the translation of knowledge. Within this category, the most frequently reported types of interventions were provision of a resource (such as a local map with indicators), training and capacity building (usually aimed at upskilling academics and researchers around policy engagement) and people exchange schemes such as knowledge brokerage or fellowship opportunities.

Within the 'making' category, most interventions were about the creation of new research units such as evidence synthesis units, or about provision of research funding to enable research activities. There were also a considerable number of collaborative research projects which were studied as interventions in evidence use, all coded under 'other research collaboration'.

Overall, a minority of interventions focused on use of evidence, while the majority of evaluated interventions in this space being about training and capacity-building (e.g. of policymakers to use research), or provision of a resource (which in this case would usually be evaluation of whether provision of new data or systems had changed decision-making practices). For example, there were several projects which aimed to design new data platforms or analytic capacities of models to demonstrate what could be done with better maps/models/estimates (Gourevitch et al., 2019; Bethel Matthew et al., 2014).

Interventions in the 'other' category were either knowledge exchange strategies otherwise unspecified, games ($n = 9$) or conferences as an intervention ($n = 8$). Most intervention studies reported on multi-component studies, e.g. a training scheme which also offered mentoring and networking opportunities. Table 4 presents the types of interventions identified in the systematic map.

Discussion

Increase in size and scope of literature

This systematic map found a huge increase in the size and scope of the literature on the factors that influence evidence use in this space. With over two thousand primary studies, and over 250 systematic reviews, our update describes the findings from an enormous amount of literature about how we make, mobilise, and use evidence in policy. Compared to our previous review, more policy sectors and settings at all levels of government are represented in this dataset, from almost every nation on the planet. This aligns with the huge growth in interventions, funding and initiative to support evidence use seen globally (Turner et al., 2023).

Factors suggesting a shift towards a systemic understanding of evidence use

Relevance The 2014 systematic review identified timely access to relevant research, collaboration between researchers and policymakers, and skills-building with policymakers as the most frequently reported factors influencing evidence use. In this updated systematic map which takes a snapshot of the literature between 2012 and 2022, the importance of accessible and available relevant evidence remains clear as the most reported factor. While this is clearly not a new finding, it is striking that it remains so strongly reported in the literature, suggesting lack of relevance remains a serious problem.

Responses to the identification of low relevance have tended to draw on linear thinking, i.e. focusing on a focus on knowledge production as the primary means to improve evidence use, and ultimately decision-making. In the early 2000s, in the UK and much of the Global North, this thinking translated into a focus on systematic reviews to improve evidence use (Oliver, 2001; Perrier et al., 2011; Lavis et al., 2009). This thinking is still evident with much of the funding and activity in the field focusing on research production and evaluation (currently often called Metascience, or Research on Research) (Oliver and Boaz, 2019). Indeed, recent calls from the UK's Economic and Social Research Council[1] and the Wellcome Trust[2] suggest that evidence synthesis is still regarded as a primary mode for effective delivery of evidence to decision-makers.

Evidence synthesis may well be a useful tool for policymaking, yet this review (amongst many, many others (Durrant et al., 2024; Neal et al., 2023) suggests that provision of knowledge alone will not be sufficient to support evidence-informed decision-making. Addressing relevance is essential. Rather than starting with summaries of existing knowledge, relevance can be most easily achieved where there is a clear and shared understanding of a policy need and an ongoing discussion with potential users about their changing and adapting work, to enable researchers to understand when and where their contributions might be genuinely useful. Recent initiatives such as the US's Learning Agendas and the UK's Areas of Research Interest[3] are a way to begin these discussions, and offer a starting point from which to move towards relevance. Similarly, the Africa Evidence maps offer an innovative process to meet policymakers' needs. The creation of these evidence maps is led by policy officials, giving them deep relevance and traction on the wider system of evidence production and use (Stewart, 2019).

The language used to describe useful evidence also seems to have shifted, with studies now often using phrases such as 'actionable knowledge' (Brunet et al., 2018; Gerber Leah et al., 2020; Project, 2021; Nguyen Vivian et al., 2019) rather than 'evidence' which may indicate a shift towards more applied and epistemologically inclusive research. There also seems to be a growth of studies looking at 'engaged' research and scholarship (McIsaac and Riley, 2020; Patel, 2018; Springs et al., 2019) where researchers themselves participate in stakeholders' processes and activities, rather than requiring stakeholders to get involved with research. This responds to calls for greater reflection by researchers, and to recognise that much of the evidence-policy 'gap' can be attributed to problems within

[1] https://www.ukri.org/opportunity/transforming-global-evidence-ai-driven-evidence-synthesis-for-policymaking/.

[2] https://wellcome.org/news/evidence-synthesis-infrastructure-collaborative.

[3] https://ari.org.uk.

academia, rather than to stakeholders' failure to engage with research (Shaw, 2018; Crossgrove et al., 2019; Corluka et al., 2014).

A shift from relational to organisational factors Most of the highest-reported factors were organisational (resources, skills, personnel and managerial support), rather than about contact and collaboration, as was the case with the previous review. This remained the highest category whether papers focused on evidence production, mobilisation or use. This may reflect a growing awareness amongst researchers about the work, time and skill it takes to support evidence use. As Best and Holmes (2009) argued, relational factors may be necessary (as is the provision of research itself), but they are not sufficient to ensure evidence utilisation. Effective collaboration and contact may require a broader system that provides absorptive capacity, learning, and feedback (Best and Holmes 2010). The studies in this review and the wider field discussed various aspects of organisational resources, including team culture (Hanlin and Andersen, 2019), performance management and expectations. The wider literature also notes the importance of thinking about local context, and the need for nuance in the application of evidence use interventions (Durrant et al., 2024; Boaz et al., 2024). Practically, this evolution can be understood as moving from thinking primarily about improving evidence use by: (a) improving the quality and quantity of evidence production, (b) increasing and improving the interactions between knowledge users and producers, and (c) creating a supportive organisational and inter-organisational culture for evidence use.

Evolving from relational to systemic thinking about evidence use Discussions about evidence use systems, what they might be and how they might be reported are a feature of the studies in the review, and in the wider field (Amisi Matodzi et al., 2021; Best et al., 2010; Doshmangir et al., 2022; Fynn Judith et al., 2021; Williamson et al., 2019). To do this well means moving beyond the usual considerations of knowledge management and opportunities for linkage and exchange, towards considering what an evidence-using organisation might need in terms of capacity, capabilities and resources (Ward et al., 2009). As Best and Holmes argued in 2010, conceptualising evidence use as a process that occurs within a complex system more accurately depicts the dynamic process of knowledge (co-)production and evidence uptake - and that this perspective can better inform the design of initiatives (Holmes et al., 2017; Best et al., 2010; Oliver et al., 2022). What this review shows us is that there is a growing recognition across the world that merely providing opportunities for relevant evidence to be presented to policy-makers is not sufficient. Rather, we need to think about how to build evidence-use systems which enable learning within policy organisations, provide policymakers with sufficient skills, time and support to engage effectively with research, and provide researchers with the skills, incentives and time to produce policy-relevant evidence. Unpacking these goals demonstrates how many career structures, funding pathways, training opportunities and project activities need to be aligned in order to achieve evidence use well. Supporting and nurturing this system, while difficult, may be our best opportunity to truly transform policymaking.

Learning translated into interventions? An explosion of (mostly relational) interventions There was a large growth in the number of interventions identified ($n = 877$). Most of these interventions focused on relational mechanisms to address evidence use, for example collaborative research/policy partnerships, people exchanges like fellowships, or policy dialogues —as identified by other similar reviews (Neal et al., 2023). There were also a significant number about mobilising evidence through more direct translational means, such as formatting into evidence briefs or through data clearing-houses.

Most interventions target evidence production and mobilisation. This may mean that interventions are not addressing the identified factors relating to organisational resources or other systemic factors such as leadership. This misalignment could lead to an increase in the number of initiatives which in effect compete with each other, leading to duplication and waste, as is suggested elsewhere in the literature (Hopkins et al., 2021; Oliver et al., 2022). However, an in-depth synthesis of the evaluations would be required to ascertain this fully. With the proliferation of studies reporting on interventions, including the 877 identified in this review (at an average rate of seven per month), taking a systems perspective will likely be challenging. Ideally, new initiatives would be able to consult existing evaluation of similar interventions before embarking on their own implementation.

Limitations

This review was limited by the team resources available. As this was unfunded, the team fluctuated in size and required significant training and quality assurance to ensure screening and coding tools were being applied consistently. As a result, Author 1 screened and coded all abstracts and studies to ensure consistency across all coders.

We did not publish an a priori protocol, as this was an updated systematic map and therefore aimed to replicate the methods published in Author, 2014. In theory, this made the review vulnerable to changes, although having team members drawn from the earlier review, and adding a professional librarian to the team ensured consistency, comprehensiveness in searches, and rigour in review methods.

The searches were completed in June 2022, which represents some delay before publication. This is in part due to the unfunded nature of this review, and partly due to academic publishing processes. However, to mitigate this and in recognition of the continued high level of interest in this field, the searches have since been updated (Jan 2026) and the live dataset will continue to be made available as coding is completed. This dataset should enable many in-depth syntheses to be undertaken as greater pace.

The review contains a very wide range of studies. As a result, the coding undertaken is relatively shallow and general, which may have contributed to the interpretation of results by minimising small trends and overlooking unique aspects of subsets of the dataset. For example, we have focused just on studies which report on policy made at a local, regional or national level, rather than at an individual organisational level. We have also been unable to conduct in-depth analyses, but rather offer here a descriptive synthesis which shows the shape of the evidence base in this area, ideally enabling more focused syntheses in the future. Because of this descriptive nature, we do not offer a set of factors which, when combined or addressed in the right way, operate as a recipe for successful evidence use. Rather, we offer some insights about the broad field of research which continues to grow.

Conclusions

There has been a 20-fold increase in the literature on evidence use in policy over the last 10 years. The most commonly reported factors influencing use were the relevance of evidence, and then organisational (resources, skills, personnel and managerial support). A large number of studies reported on evidence-use interventions ($n = 877$), of which 379 were evaluations. These findings may represent an evolution towards towards relational and systemic thinking about evidence use. There appears to be a growing recognition of the resourcing, work, time, and workforce required to embed evidence use within and between organisations. With this huge growth in the literature, particularly in new evidence use interventions being tested across policy sectors, continued review and mobilisation is necessary to effectively inform the design and implementation of evidence use interventions and research

Firstly, there are several indicators that a global movement thinking about and supporting evidence use in decision-making continues to grow. The very size of this review is striking. Clearly, the question of evidence use and how it can be better supported only grows in importance across settings, disciplines and sectors. The growth in the literature may be consistent with the overall growth in scientific literature, although an expansion of over 20-fold seems disproportionately large (Hanson et al., 2023). Overall, we conclude that there has been a large growth in studies on evidence. Whether these studies are all high quality is unknown but seems unlikely. There is remarkable consistency across these studies, which suggests that those of us working in this field need to do more to surface what we already know and ensure this learning is shared across boundaries. Hundreds of interventions are being tested across policy sectors to improve the production of relevant evidence and mobilise it effectively.

Secondly, the relevance of evidence remains the most highly reported factor, alongside organisational factors such as workforce, managerial support, and time. These factors suggest there is a growing recognition of the work it takes to mobilise evidence effectively; to identify policy knowledge needs, to support and incentivise researchers to address these needs, to resource effective and responsible engagement between policymakers and researchers, and to support a learning culture within policy organisations.

Finally, there has been a huge grown in interventions, which mostly tackle relational factors, by, for example, providing opportunities for interaction between policymakers and researchers. The literature identified in this review raises the possibility that relational approaches need to be supported by systems-level thinking and intervention. Addressing systemic factors will require complex programmes of work which sit within and between multiple organisations and sectors, requiring buy-in and coordination across all to produce transformative results. It seems likely that one-off initiatives work best when supported within a system, although further clarification of what this means in practice is needed. However, we can suggest that evidence use systems require careful management and coordination, and there has been a significant growth in studies recognising the work and skill required to embed evidence use practices sustainably. For example, factors identified in this review could be used to inform the design and delivery of knowledge mobilisation, knowledge brokering, or even policy fellowship programmes or interventions, with the aim to advance evidence use in policy institutions. The importance of relevance of research to later uptake and use, while not surprising, reinforces the need for stakeholders and the public to be actively involved in the identification and prioritisation of new research addressing policy and practice needs. Our study provides important insights for funders wishing to support evidence use, in ensuring new initiatives are evidence-based, systems-strengthening, and complementary to existing structures and initiatives.

Future research

As a systematic map this review is primarily descriptive, but offers opportunities to conduct in-depth syntheses drawing on specific subsets such as education or conservation, or examining all studies operating within local government, or focusing on particular forms of knowledge such as traditional knowledge More needs to be done to ensure that this learning is captured and shared between disciplines, and to embed learning from evaluations of interventions into practice. There has been a welcome growth in empirical data and evaluations of evidence use initiatives, and it would be useful for the field to focus on developing and sharing this learning rather than continuing to report on very repetitive factors influencing evidence use. The review dataset will be kept updated and is available for future studies.

Obvious next steps would also be to look at the systematic reviews identified within this map and to explore their findings and overlap. This would enable a more in-depth exploration of the mechanisms underpinning the factors identified, as well as any causal link with evidence use.

It would also be interested to conduct a broader citation analysis of the included studies to explore how fragmented or cohesive the literature in the review is. If, as the proliferation of studies suggests, there is limited cross-referencing, we will need to think carefully as a field about how to better surface key lessons from the existing literature, to ensure that future research efforts focus on genuine unknowns, rather than addressing problems which have been extensively characterised and addressed.

Given the spread of studies across disciplines and sectors, even identifying these studies is a challenge beyond the resources of many. The evidence use field needs to consider how it can make this learning more available to those who need it, supporting better coordination and use of resources within the overall system (Turner et al., 2021). For example, living systematic reviews of research on evidence use could be developed and maintained, with accompanying open access bibliographic databases and freely available translational products that make this evidence more actionable (Elliott et al., 2021; Turner et al., 2023).

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