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Mind the Gap

Exploring evidence-based policymaking for improved preventive and mental health services in the Swedish health system

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Akademisk avhandling

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Abstract

Background: The challenges in the utilization of scientific findings in the fields of prevention and mental health are well documented. Scholars have found significant gaps between the knowledge available and the knowledge applied in healthcare. In order to address this gap, health systems at global, national, regional and local levels have made diverse efforts to facilitate the uptake of research for example through evidence-based policy processes. The overall aim of this thesis is to explore evidence-based policy processes, and to further understand barriers to implementation of policies in the fields of preventive and mental health services.
Method: A multiple case study approach was used, and data were collected from several sources. Qualitative content analysis methodology was used.
Result: The sources and procedures for policy formulation differed in the studied cases as did the approaches to promote the implementation of the policies. The policy processes were cyclical, and phases overlapped to a large degree. The policy actors intended to promote implementation, both during and after the policy formulation process. The thesis shows variation in how the key policy actors defined and used research evidence in the policy processes. In addition, other types of knowledge (e.g. politics, context, experience) served as alternative or multiple sources to inform the health policies. The composition of sources that informed the policies changed over time .During the policy formulation and implementation process, efforts to integrate research evidence with clinical experiences and values were associated with tension and recurrent dilemmas.
Conclusion: The concept of evidence holds a key position in terms of goals and means for health policymaking in the Swedish health system. Broad definitions of evidence – including research and non-research evidence - were requested and to various extents utilized by the policy actors in the studied cases. Particular determinants to implementation, such as the interventions characteristic, are to a considerable degree established early in the policy process, during agenda setting and policy formulation. This early phase offers unique opportunities to assess and build capacity, initiate and facilitate implementation.

Keywords
Evidence-based policymaking, guidelines, implementation, prevention, depression

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