



The Sax Institute: An Evidence Specialist

Research evidence can make an invaluable contribution to the development of effective policies, programs and services. Used appropriately, evidence can help ensure the best outcomes and effective use of the more than \$185 billion that Australia spends on health each year.

The Sax Institute is an independent Evidence Specialist – we help decision makers find and make the best use of evidence from research to solve real-world challenges.

Our impact

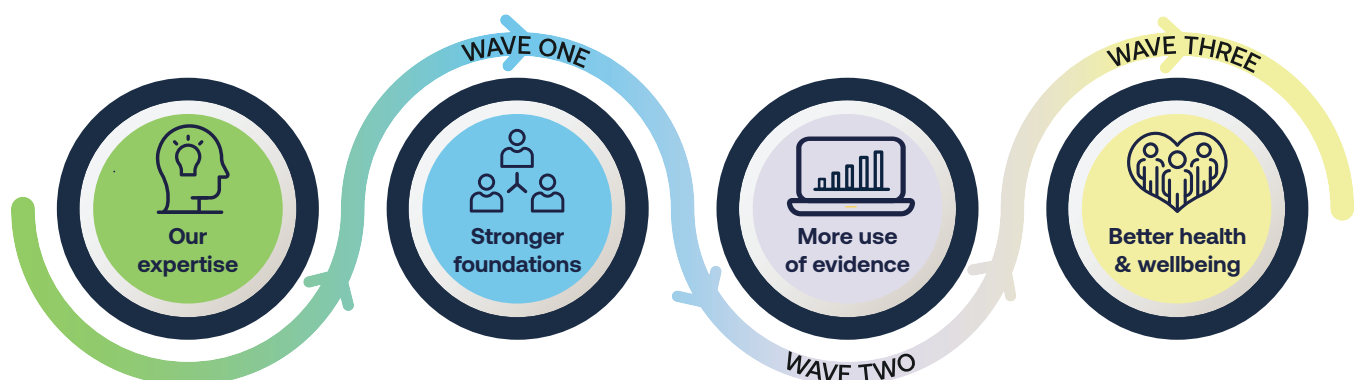
As an Evidence Specialist working with many research and health organisations, our unique skills help to create change.

We form and sustain coalitions for change, knowing that meaningful action requires support from a range of agencies and individuals, each with their own perspectives, responsibilities and expertise.

We work directly and indirectly right across the research-to-policy continuum to increase the use of evidence in analysing, evaluating and forming policy and programs.

Our work has impact across three key stages in building and enabling:

- **Stronger foundations** (wave one impact), including the development of new concepts and methods; improved evidence for policy; greater capacity; and stronger partnerships
- **Greater use of evidence in policy** (wave two impact)
- **Better health and wellbeing** (wave three impact), which is realised in the longer term and involves many actors outside the Institute.



The problem

There are many reasons why opportunities to use research evidence are missed:

- Too often, research relevant to the core issue has not been done
- Relevant research can be hard to find, with estimates that a new health and medical research paper is published every 26 seconds
- Research findings can be contradictory, confusing or difficult to apply.

The best use of evidence in policy, programs and services will usually require action over a long period of time and the involvement of many different organisations and actors.

Activities taken by different organisations are often uncoordinated unless specific attention is paid to ensuring alignment and cohesion.

Evidence to action: A messy process requiring many players



Solutions

We understand that solutions to improving health and wellbeing:

- Are likely to be complex, requiring a systems approach
- Will often require action by many different players
- Will often be incremental over many years, with sustained effort necessary over that time
- Require many different skills and approaches.

The Sax Institute has the necessary expertise to address the many different barriers to using evidence in policy, practice and service delivery.

We draw on expertise nationally to analyse health decision challenges; undertake evaluations and reviews; interrogate data to inform decisions; and facilitate Australia's wider research efforts by making available some of the country's most important research assets and platforms.

Stronger foundations

The Institute builds stronger foundations that support more use of evidence in policy, programs and services in four key ways:

Finding and interpreting research evidence

The Institute has transformed the capacity of decision makers to rapidly find and interpret the best available evidence. We have developed innovative approaches to help policy makers integrate complex evidence to support decision making.

We pioneered the concept of knowledge brokers to help health decision makers better define the evidence they need. By June 2020, the Sax Institute had produced more than 500 reviews and reports for health decision makers. This includes more than 350 rapid evidence reviews that in many cases have played a key role in policy analysis and policy outcomes.

Facilitating research to inform health decisions

We manage research assets that enable fast, high-quality and locally relevant research – using current data to inform timely health decisions.

Our internationally renowned 45 and Up Study and our SEARCH partnership on Aboriginal health can provide rapid answers to health policy issues. Our innovative SURE platform allows researchers to access these data in a secure, protected environment.

Together, these assets have supported more than 400 research projects and attracted more than \$150m in competitive research funds. The Aboriginal data have supported publication of 39 papers about the health of urban Aboriginal children, addressing an important evidence deficit vital to the policy goal of closing the gap in life expectancy.



Forging partnerships and collaborations

Building and sustaining coalitions is a vital part of achieving positive change. The Institute has run 200 collaborative research projects involving at least three other organisations besides the Institute.

These include a 15-year collaboration between Aboriginal Community Controlled Health Services, researchers and policy makers through the SEARCH cohort; a 15-year collaboration between Cancer Council NSW, the National Heart Foundation and the Institute to deliver the 45 and Up Study; and 200 researchers and 36 policy agencies who are part of The Australian Prevention Partnership Centre, which is administered by the Sax Institute.

Build skills and expertise

We work with health and wellbeing decision makers and researchers to build their skills in collaboration and finding and using research.

We have enabled:

- 200 new research posts for early career researchers
- Training for 75 early career researchers in working with policy agencies
- Training for 720 policy makers in finding and using research

Recognition of 17 early- and middle-career researchers who have made a significant impact on policy, programs and services.

IMPACT WAVE 2

More use of research evidence in policy, programs and services



The Institute drives the use of research in policy, programs and service delivery. We can point to more than 150 verified examples of the Institute's work changing policy, programs or services.

We have contributed to: changing recommendations about red meat intake; setting of new targets and investment for Hepatitis C treatment in NSW; decisions about training for suicide support workers in western NSW; ensuring safety for the introduction of CAR-T therapy for cancer; new strategies for reducing childhood overweight and obesity in NSW; and policy to reduce smoking in Queensland.

Through the 45 and Up Study we have informed: the COVID-19 response; the NSW Premier's priorities on green space; vaccination policy and guidelines; approaches to restricting smoking in common areas of buildings; policy on pharmaceutical surveillance when new drugs enter the real world; development of a severe chronic disease management program; and a healthy weight action plan.

IMPACT WAVE 3

Better health and wellbeing



Significant improvements in health and wellbeing take a long time to achieve and require action by many different organisations and individuals.

We contribute our expertise throughout the change trajectory – demonstrating the need for change, testing potential solutions and catalysing the many people needed to make change happen. Our capacity to join the dots and stay engaged for the long term is critical to the changes required for better health and wellbeing.

Clear and compelling examples of positive impact on health care outcomes include:

- Improvements in approaches to treating hearing loss and speech problems in urban Aboriginal children
- Dietary improvements among Aboriginal and Torres Strait Islander people in the Northern Territory.

We have enabled:

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Training for

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Training for

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Recognition of

17

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Our work in practice



The right evidence at the right time: rapid reviews

Policy agencies can struggle to find the most relevant and useful evidence in the right time frame. We have delivered more than 350 rapid reviews for policy agencies through our Evidence Check program and almost all reviews were used by the agency for, on average, three different purposes. Our reviews have influenced targets and treatment for hepatitis C, Heart Foundation recommendations for red meat consumption, and guidance about CAR T-Cell cancer therapy.

“I can’t speak highly enough of the Evidence Check service in enabling the connection between the evidence base and real-world implementation.”

– Policy Maker, Mental Health Services, Western Sydney Local Health District.



Complex challenges: innovative ‘what if’ tools

Health decision makers are often faced with complex problems influenced by many interacting factors and where many potential solutions compete for policy attention. Our innovative approach uses simulation modelling to develop interactive, evidence-informed decision-support tools to assist policy makers to analyse complex problems.

These ‘what if’ tools forecast the impact of alternative decision options, allowing decision makers to test the effect of combining specific interventions in different ways. We apply a unique participatory approach to provide better transparency of our models and their assumptions, enabling us to draw on evidence, data and real-world knowledge to build robust and accessible tools.

Models have been developed for health challenges including childhood overweight and obesity, mental health services, and smoking reduction, for many different agencies including the NSW Ministry of Health, NSW Agency for Clinical Innovation, the Tasmanian Department of Health, NSW Mental Health Commission, Queensland Health and various Primary Health Networks.

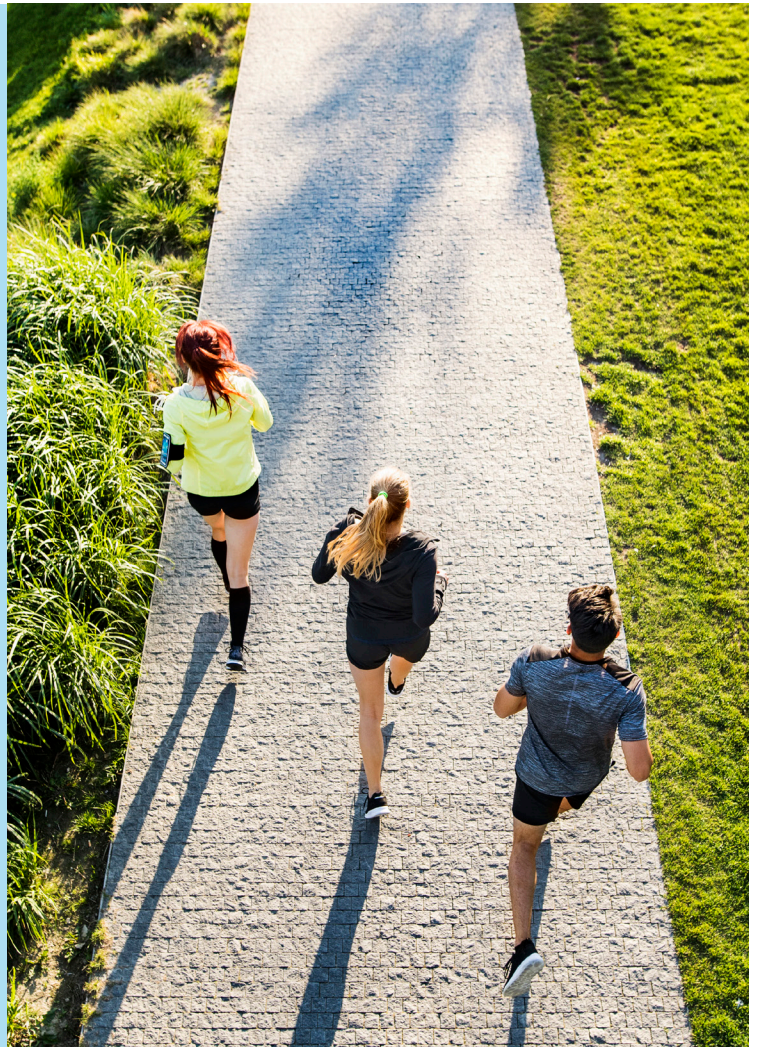




Enabling policy-relevant research: the 45 and Up Study

Large long-term data resources enable rapid high-quality answers to policy questions. The 45 and Up Study is Australia's largest ongoing data resource about health and ageing, with 260,000 participants. It has been used for more than 400 papers, by more than 700 researchers across 90 organisations, and has attracted more than \$35 million in competitive research funds.

Findings from the 45 and Up Study have informed many policies and programs, including the COVID-19 response; the NSW Premier's priorities on green space; vaccination policy and guidelines; approaches to restricting smoking in common areas of buildings; post-market pharmaceutical surveillance (for the Therapeutic Goods Administration); development of a severe chronic disease management program (for NSW Health); and a healthy weight action plan (for the ACT Government)



Building partnerships for prevention

The Sax Institute coordinates large scale, long-term collaborations which can drive change. For example, it has administered The Australian Prevention Partnership Centre since its inception in 2013. The Prevention Centre is a national collaboration of researchers, policy makers and practitioners who identify new ways of understanding what works to prevent lifestyle-related chronic health problems in Australia.

Through collaboration with an increasing number of investigators and agency partners, the Prevention Centre has developed engagement across research discovery, synthesis, communication and action. The collaborations included 36 agencies across all states and territories and 200 individuals from 22 research institutions and practice settings.

The value of the Prevention Centre's work has been recognised by funding from the National Health and Medical Research Council; Australian Government Department of Health; ACT Health; Cancer Council Australia; NSW Ministry of Health; South Australian Department for Health and Wellbeing; Tasmanian Department of Health; and the Victorian Health Promotion Foundation, VicHealth.



Improving strategic investment in suicide prevention

We used a dynamic modelling approach to help policy makers and service providers understand which combination of strategies are likely to result in the maximum reduction in attempted suicide and suicide in Western NSW over the short and longer term.

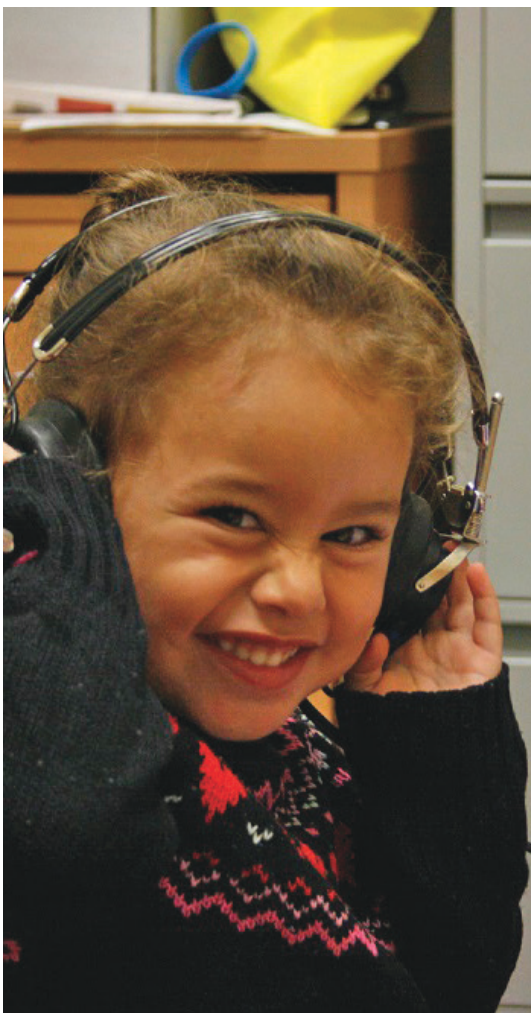
We worked closely with Western NSW Primary Health Network to develop the model. It supported building the capacity of workers who typically deliver community programs and aftercare support services including practical, psychosocial and/or peer supports. As a result, Western NSW PHN will provide additional support to develop the skills of community members in supporting people at risk of suicide.



Driving tobacco control

Data from the 45 and Up Study showed that up to two-thirds of current smokers could be expected to die from their habit if they continued to smoke, the first large-scale evidence of the impact of smoking in Australia. Leading tobacco control NGOs immediately used these results to directly advertise to smokers about the greater than previously recognised hazards of smoking, and greater benefits of quitting.

Health departments at national, state and territory levels also used the results in their tobacco control strategies (e.g. Department of Prime Minister and Cabinet; Australian Institute of Health and Welfare). Non-government organisations (The Cancer Council, Heart Foundation) have changed their advice, and the results have been cited as evidence for changes to tobacco control legislation.



Improving hearing in Aboriginal children

We found that many urban Aboriginal children were experiencing hearing loss. In our cohort of children attending Aboriginal Community Controlled Health Services we found 12% of children had hearing loss; about 30% had middle ear disease; and more than one third had language delays. These findings contributed to an investment by the NSW Ministry of Health of more than \$20 million in improved ear surgery and speech pathology services for these children.

We contributed to the development and trialling of a new approach to ear health testing and care through Aboriginal Community Controlled Health Services that delivered 8000 speech pathology services to 1047 children and ear surgery to more than 300 Aboriginal children.

“The parents tell me they have seen huge improvements in their kids. There are kids who are now speaking clearly and some are able to be understood for the first time. This affects the whole family unit. It is so much bigger than delivering a technical service – the bigger picture is that it is giving a huge, huge hand up to these kids.”

– Aboriginal Ear Health Worker, Riverina Medical and Dental Aboriginal Corporation



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