

# Definition of EIP Institutionalization

**EIP institutionalization as the “process and outcome of (re-) creating, maintaining and reinforcing norms, regulations, and standard practices that, based on collective meaning and values, actions as well as endowment of resources, allow evidence to become—over time—a legitimate and taken-for-granted part of health policy-making”.\***

# WHO E2P institutionalization checklist



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## Domains and processes for institutionalizing evidence-informed health policy-making: a critical interpretive synthesis

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### Abstract

**Background:** While calls for institutionalization of evidence-informed policy-making (EIP) have become stronger in recent years, there is a paucity of methods that governments and organizational knowledge brokers can use to sustain and integrate EIP as part of mainstream health policy-making. The objective of this paper was to conduct a knowledge synthesis of the published and grey literatures to develop a theoretical framework with the key features of EIP institutionalization.

**Methods:** We applied a critical interpretive synthesis (CIS) that allowed for a systematic, yet iterative and dynamic analysis of heterogeneous bodies of literature to develop an explanatory framework for EIP institutionalization. We used a "compass" question to create a detailed search strategy and conducted electronic searches to identify relevant papers based on their potential relevance to EIP institutionalization. Papers were screened and extracted independently and in duplicate. A constant comparative method was applied to develop a framework on EIP institutionalization. The CIS was triangulated with the findings of stakeholder dialogues that involved civil servants, policy-makers and researchers.

**Results:** We identified 3001 references, of which 88 papers met our eligibility criteria. This CIS resulted in a framework of EIP institutionalization as the "process and outcome of (re-)creating, maintaining and reinforcing norms, values and standard practices that, based on collective meaning and values, actions as well as endowment of resources, allow evidence to become—over time—a legitimate and taken-for-granted part of health policy-making. The resulting theoretical framework comprised six key domains of EIP institutionalization that capture both the process and the outcome: (1) governance; (2) standards and routinized processes; (3) partnership, collective action and support; (4) leadership and commitment; (5) resources; and (6) culture. Furthermore, EIP institutionalization is being achieved through five overlapping stages: (i) precipitating events; (ii) de-institutionalization; (iii) semi-institutionalization; (iv) institutionalization; and (v) renewed de-institutionalization process.

**Conclusions:** This CIS advances the theoretical and conceptual discussions on EIP institutionalization and provides new insights into an evidence-informed framework for initiating, strengthening and/or assessing efforts to institutionalize EIP.

