

HOW THE KNOWLEDGE TO POLICY CENTER CREATED A RAPID-RESPONSE SERVICE TO INFORM LEBANON'S COVID-19 RESPONSE

STORY OF CHANGE

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The COVID-19 pandemic placed unprecedented pressure on decision-makers at all levels to make rapid decisions, often in the face of uncertainty and with long-term consequences for the lives of millions of people. Using the best available research evidence and data to guide decisions is integral to an effective and efficient response to public health emergencies.

Recognizing the need for trustworthy sources of evidence during the pandemic, the Knowledge to Policy (K2P) Center in Lebanon launched the [K2P COVID-19 Series Initiative](#), with support from the Partnership for Evidence and Equity in Rapid and Responsive Social Systems (PEERSS). The COVID-19 Series Initiative provided rapid-response support to help policymakers and national health authorities make evidence-informed decisions. Informed by requests from stakeholders, K2P synthesized global research evidence, local data, and tacit knowledge on high-priority issues related to the pandemic, delivering its guidance within three, 10, or 30 days from the time of the request, depending on the urgency and scope of the issue.

Prioritizing Topics for Evidence Synthesis

To develop these products, the K2P Center used a systematic and standardized process to prioritize topics, search for and synthesize high-quality evidence, and tailor the collected information to the Lebanese context. The center also co-produced products with policymakers, parliamentarians, and experts (including virologists and tobacco control experts) to ensure high-quality deliverables and facilitate uptake of the recommendations.

The K2P Center used a variety of mechanisms and tools to inform this work, including:

- Engaging decision-makers and stakeholders to identify priorities
- Producing rapid-response evidence products
- Co-producing evidence, targeting both upstream and downstream actors
- Using multiple dissemination channels to reach different audiences
- Providing platforms for cross-sector dialogue

Over the course of the pandemic, the initiative produced more than 25 products that addressed a wide spectrum of topics related to pandemic response, from hospital

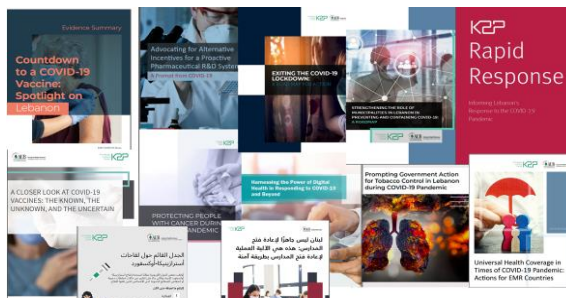


Figure 1: K2P evidence products developed for the COVID-19 response

preparedness to lockdowns, school closures, and vaccines. In March 2020, one month after the first confirmed COVID-19 case was reported in Lebanon, the K2P Center collaborated with the Ministry of Public Health to produce the [first rapid-response product](#), a document that synthesized the latest national and global evidence about the coronavirus and urged health actors in Lebanon to reinforce infection prevention and control at national, community, and health system levels. As the first document in the series, it cemented and reinforced K2P's role as a trusted source of evidence and guidance related to COVID-19.

Translating the Evidence Using a Balanced Approach

The K2P team had to determine the best approach to translating the COVID-19 evidence. A top-down approach prioritizes high-level planning and decision-making by policymakers and governments, while the bottom-up approach prioritizes translating policy decisions into actions on the ground by policy implementers, including municipalities, health professionals, nongovernmental organizations (NGOs), and communities. Given the scale and breadth of the pandemic, a top-down approach alone was unlikely to achieve the desired impact, so K2P sought a balance between the two approaches. For the policy implementers, lack of clarity about their roles and responsibilities had hindered their initial involvement in the pandemic response. To help them overcome this, the K2P team produced evidence-based guidance on the roles of the various actors (including [health care organizations](#), [municipalities](#), and [NGOs](#)) and their links to the national pandemic response. These documents helped empower the various actors and prompted the government to strengthen its stewardship function for a more effective and efficient response.

As Lebanon authorities considered ending lockdown measures in late April 2020, K2P issued [another rapid-response document](#) that synthesized available evidence and country experiences related to easing confinement measures while safeguarding public health and responding to the growing economic and social crisis. In September 2020, K2P issued a three-part series looking at [the clinical features and transmission of COVID-19 in children](#), [the impact of school closures](#), and [strategies to safely reopen educational institutions](#). In late 2020 and early 2021, as the first COVID-19 vaccines with the potential to prevent severe illness were being rolled out and other vaccine candidates were in development, the K2P Center co-produced [“Integrating COVID-19 Vaccination into the Primary Health Care Network in Lebanon”](#) and [“Countdown to a COVID-19 Vaccine: Spotlight on Lebanon”](#) with the Primary Health Care Department at the Ministry of Public Health and the National Immunization Committee, respectively.



Figure 2: Stakeholders communicate evidence-based guidance on news stations

Increasing Support for Addressing Health Sector Challenges

Not only did the K2P series help strengthen collaboration among a diverse range of conventional and nonconventional stakeholders, but health authorities and partner organizations in Lebanon adopted several of the recommendations in the documents, leading to increased support for measures to address specific health sector challenges as well as tangible policy and regulatory changes. For

example, K2P announced its [evidence-informed roadmap for Lebanon’s COVID-19 response](#) in a prime-time television interview and shared it with parliamentarians, policymakers, and representatives of the COVID-19 national committee. The document became a central reference guide in the public, private, and civil society sectors.

Lebanon introduced stricter social distancing measures shortly after K2P recommended such measures in an evidence review document. Several COVID-19 committees across the country used a K2P [rapid-response document on strategies to end lockdown measures](#) to inform the reopening process in Lebanon. Similarly, an evidence synthesis on COVID-19 vaccines helped authorities shape vaccination plans and became a basis for informational campaigns about vaccination in communities and health care facilities.

To contribute to the field of evidence-informed policymaking, the K2P Center made its products available for adaptation by other PEERSS partners. For example, the center has collaborated closely with PEERSS partners in Brazil to contextualize and adapt the evidence series to that country and translate the documents into Portuguese.

[A recent journal article](#) explored K2P’s experience with creating the COVID-19 rapid-response series; [another journal article](#) discussed the initiative alongside similar efforts in Germany, Hong Kong, and Pakistan.



Figure 3: Co-produced evidence product adapted for Brazil context