

How should we engage collaborators and partners in evidence syntheses?

OBJECTIVES

To develop guidance for collaborator and partner engagement in health care evidence syntheses. Specifically, to:

- 1. Identify, map, and synthesize qualitative and quantitative findings related to collaborator and partner engagement in evidence syntheses
- Explore perspectives on how collaborator and partner engagement in evidence syntheses promotes health equity
- Develop equity-oriented guidance on methods for collaborator and patient engagement in evidence synthesis
- Develop guidance on methods for evaluating collaborator and partner engagement in evidence syntheses
- Develop a guideline for reporting collaborator and partner engagement in evidence syntheses (Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) extension)

COLLABORATORS AND PARTNERS

Patients, patient caregivers, patient advocates/ organizations	Those with lived experience with the condition of interest or who care for or advocate on behalf of those with lived experience
Payers of health research	Individuals and organizations that fund research projects, such as government funders, industry funders, foundations
Payers / Purchasers of Health Services	Individuals, organizations and entities that pay for health services
Peer Reviewed Journal Editors	Those who set journal policy on guidelines and manage the peer review process and editing
Policymakers	Individuals, organizations and entities that craft public or private policy (on health) at any level of government
Principal Investigators and all members of the of research team	Individuals, organizations, and associations that conduct or advocate health research
Producers and commissioners of guidelines	Institutions and organizations that commission, develop, or implement guideline development procedures
Product makers	Individuals working for companies that manufacture pharmaceuticals, medical devices, medical procedures, health technologies, or for profit educational and behavioural packages
Program managers	Managers/directors who plan, lead, oversee, or deliver any program that provides public health, community services, or clinical care (e.g., budgeting, hiring, staffing, organizing, coordinating, reporting)
Providers	Persons and their professional associations who provide health care in a professional capacity and allowed by regulatory bodies to provide a health care service
Public	Individuals in the general population of a defined geographic area excluding patients, caregivers, and health professionals living or working with the condition of interest

METHODS

2023-2024

Conduct reviews on: Methods of engagement Barriers and facilitators Impact of engagement Conflicts of interest Equity considerations



collaborator and partner engagement: International survey

Key informant interviews

2025

Host a consensus meeting with partners and collaborators to develop guidance Dissemination plan: Peer reviewed publications

2025+

Online tools Conference presentations Social media and newsletters

Engagement of collaborators and partners



READ OUR PUBLISHED PROTOCOL:

Tugwell, P., Welch, V., **Magwood, O*.,** Todhunter-Brown, A., Akl, E. A., Concannon, T. W., ... & Petkovic, J. (2023). Protocol for the development of guidance for collaborator and partner engagement in health care evidence syntheses. *Systematic Reviews*, 12(1), 1-10. https://doi.org/10.1186/s13643-023-02279-1



ABOUT THE MUSE CONSORTIUM

Established in 2015, the MuSE Consortium is an international group of over 160 individuals interested in stakeholder engagement in research and guidelines.

INTERESTED IN WORKING WITH US? Contact Jennifer Petkovic: jennifer.petkovic@uottawa.ca