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
2. Explore perspectives on how collaborator and partner engagement in evidence syntheses promotes health equity
3. Develop equity-oriented guidance on methods for collaborator and patient engagement in evidence syntheses
4. Develop guidance on methods for evaluating collaborator and partner engagement in evidence syntheses
5. 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 commissioner 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

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

2024-2025

2. Gather perspectives about collaborator and partner engagement:
   - International survey
   - Key informant interviews

2025

3. Host a consensus meeting with partners and collaborators to develop guidance

2025+

4. Dissemination plan:
   - Peer reviewed publications
   - Online tools
   - Conference presentations
   - Social media and newsletters

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**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?**

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