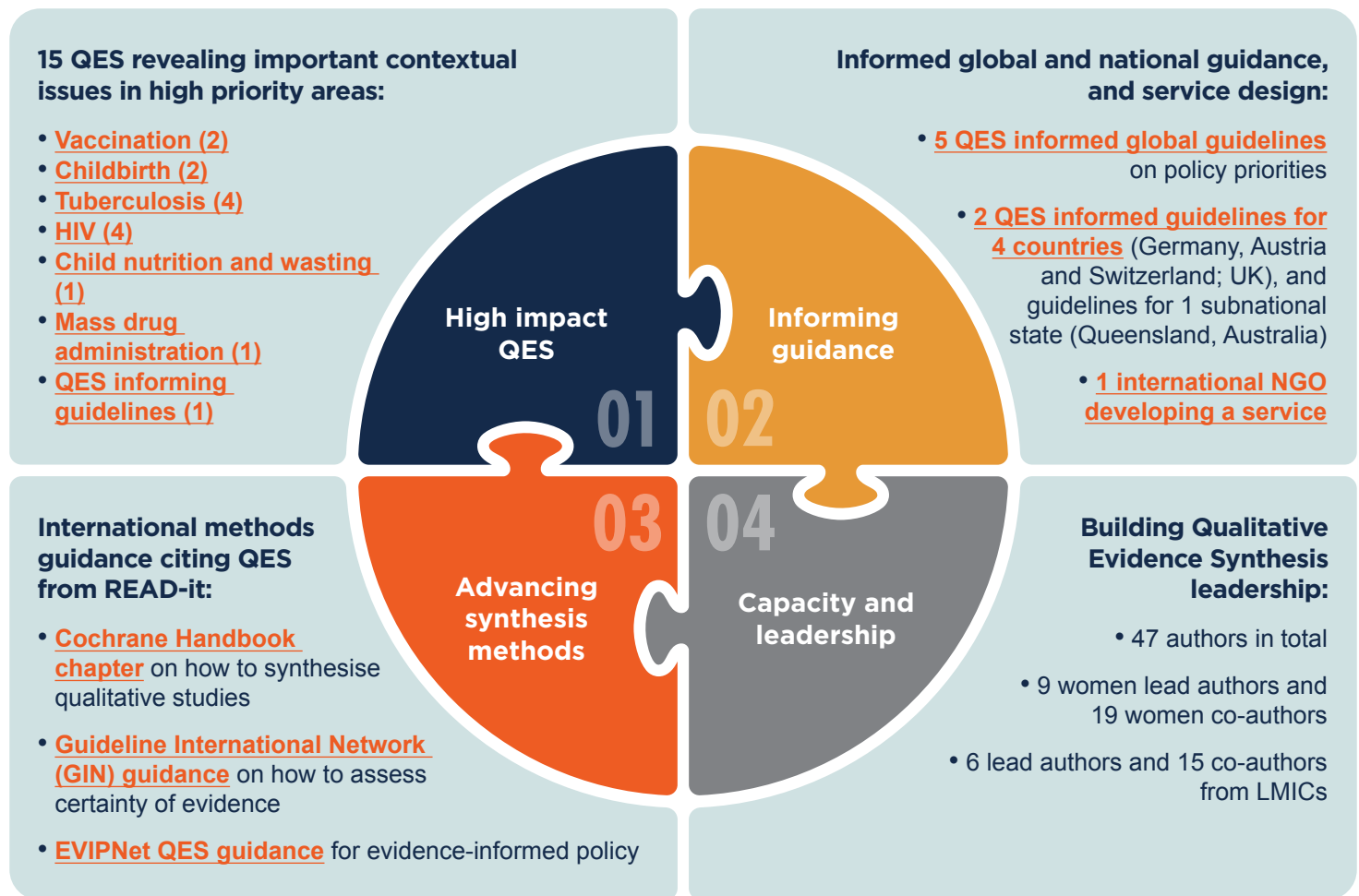


READ-It is informing policy and changing practice with syntheses of qualitative research

Introduction: The Research, Evidence and Development Initiative (READ-It) provides core sustained financial support to institutions in South Africa, India, Norway and the UK, to do evidence synthesis and related activities aimed at improving health outcomes in the poor and vulnerable in low- and middle-income countries (LMICs).

For six years, READ-It has been synthesising qualitative research to understand health problems and programmes from the perspectives of communities and the professionals developing or delivering policies or programmes for those communities. Here, we describe **qualitative evidence syntheses (QES)** addressing important policy topics of **tuberculosis, nutrition and childbirth and their impact on guidelines, service delivery and synthesis methods**.

Qualitative evidence synthesis (QES) brings together systematically what can be reliably concluded from studies of various experiences, opinions and contexts of problems or potential solutions, to understand issues in a more coherent and comprehensive way than is possible from an individual study.



Conclusion: READ-It researchers have advanced qualitative synthesis methods to produce evidence that has informed international, national and subnational guidance for health, and international guidance for synthesis methods.

Supporting information



1. High impact QES

7 Cochrane and 9 non-Cochrane QES

• 2 Vaccination QES

- [Parents' and informal caregivers' views and experiences of communication about routine childhood vaccination: a synthesis of qualitative evidence*](#)
- [Factors that influence parents' and informal caregivers' views and practices regarding routine childhood vaccination: a qualitative evidence synthesis*](#)

• 2 Childbirth QES

- [Factors that influence the provision of intrapartum and postnatal care by skilled birth attendants in low- and middle-income countries: a qualitative evidence synthesis](#)
- [Perceptions and experiences of labour companionship: a qualitative evidence synthesis](#)

• 4 Tuberculosis QES

- [Rapid molecular tests for tuberculosis and tuberculosis drug resistance: a qualitative evidence synthesis of recipient and provider views](#)
- [Factors contributing to pre-treatment loss to follow-up in adults with pulmonary tuberculosis: a qualitative evidence synthesis of patient and healthcare worker perspectives](#)
- [Patient adherence to tuberculosis treatment in the Indian subcontinent: systematic review and meta-synthesis of qualitative research](#)
- [Community views on active case finding for tuberculosis in low- and middle-income countries: a qualitative evidence synthesis](#)

• 4 HIV QES

- [Being HIV positive and staying on antiretroviral therapy in Africa: A qualitative systematic review and theoretical model](#)
- [A mega-aggregation framework synthesis of the barriers and facilitators to linkage, adherence to ART and retention in care among people living with HIV](#)
- [Testing for saturation in qualitative evidence syntheses: An update of HIV adherence in Africa](#)
- [Storyboarding HIV infected young people's adherence to antiretroviral therapy in lower- to upper middle-income countries: a new-materialist qualitative evidence synthesis](#)

• 1 Child nutrition and wasting QES

- [Effectiveness of community prevention interventions \(e.g. nutritional supplementation, social protection programs, cash transfers, etc.\) for prevention of wasting in communities with infants and children up to five years at risk of wasting](#)

• 1 Mass drug administration QES

- [Community views on mass drug administration for filariasis: a qualitative evidence synthesis](#)

• 1 QES guideline development

- [Use of qualitative research in World Health Organisation guidelines: a document analysis](#)

*These two QES were published in 2017 as part of the Effective Health Care Research Consortium (grant number 5242), funded by UK aid from the UK government.

2. Informing guidance and service design

Informed global and national guidance, and service design

- **5 QES informed global guidance on policy priorities.**
 - [Implementing the primary health care approach: a primer \(WHO\)](#)
 - [Health workers in focus: policies and practices for successful public response to COVID-19 vaccination: strategic considerations for member states in the WHO European Region \(WHO\)](#)
 - [WHO standard: universal access to rapid tuberculosis diagnostics](#)
 - [WHO recommendations: intrapartum care for a positive childbirth experience](#)
 - [WHO Evidence-to-action brief: Companion of choice during labour and childbirth for improved quality of care](#)
 - [WHO guideline on the prevention and management of wasting and nutritional oedema \(acute malnutrition\) in infants and children under 5 years](#)
- **2 QES informed national or subnational guidelines on policy priorities**
 - [NICE guideline: Vaccine uptake in the general population](#) for UK
 - [SARS-CoV-2 in pregnancy, birth and the postpartum period](#) for Germany, Austria and Switzerland
 - [Guideline: Intrapartum pain management](#) for Queensland, Australia
- **1 QES informed design of an international NGO service.**
 - [A person-centred care service to re-engage patients after HIV treatment interruption](#)

3. Advancing synthesis methods

International methods guidance citing READ-It reviews

- **Cochrane Handbook chapter on how to synthesise qualitative evidence**
 - [Chapter 21: Qualitative evidence | Cochrane Training](#)
- **Guideline International Network (GIN) guidance on how to assess certainty of evidence**
 - [Practical advice for incorporating research evidence on patient or public views in the guideline process](#)
- **EVIPNet QES guidance for evidence-informed policy**
 - [Guide to qualitative evidence synthesis: evidence-informed policy-making using research in the EVIPNET framework](#)

