Is This Evidence Useful to Me?

Assessing the Applicability and Transferability of Evidence

What is this tool? It provides a process and criteria for assessing the usability of research evidence for public health and

community service programming and planning contexts.

Adapted from: Buffet, C., Ciliska, D., & Thomas, H. (2007). Can I Use This Evidence in my Program Decision? Assessing

Applicability and Transferability of Evidence. Hamilton, ON: National Collaborating Centre for Methods

and Tools.

Who this tool is for? Health equity-focused program managers and planners.

When to use this tool: After you have searched for, retrieved, and appraised the quality of research evidence pertinent to a

programming or planning decision you face.

How to use this tool: a) Choose stakeholders to be involved in the decision.

b) Decide which of the criteria listed below are most important for your decision. Not all criteria are important all the time. You may decide to weigh some criteria as being more important than others,

for this particular decision.

c) Decide whether or not to use a formal scoring system or a discussion/consensus approach.

d) Document your process in applying the tool.

	USABILITY CRITERION	QUESTIONS TO ASK	RESOURCES AND TIPS TO HELP ANSWER THE QUESTION
1	Applicability: Is there an evidence-based intervention that could be implemented?	Does the research recommend something to do (e.g. a program to introduce or a policy to change)?	Recommendations may appear in the paper conclusion, or the protocol may be cited in the bibliography. The protocol may be described in the research paper (or in a series of related papers). The protocol may also be in an appendix to the paper.
2	Applicability	Is there sufficient description of what to do/how to do it/what outcomes I could expect? What are the full costs of the intervention (e.g. supplies, systems, space requirements, staff, training, technology)? What are the core mechanisms that are essential to the intervention, and what aspects of the intervention can be changed/adapted?	If the protocol is not described in enough detail in the research report, more information may still be available. Contact the researchers directly and ask them. Start by looking up the researcher's name at the research institution reported on the article. You could also post a question on your professional listservs.
3	Applicability: Equity considerations	Does the intervention reduce or exacerbate health inequities? Does the intervention aim to reduce health inequities by ensuring access for all those in need? ("horizontal equity") Does the intervention aim to reduce health inequities by giving preferential priority to the most vulnerable? ("vertical equity")	Often, those who use/benefit from an intervention most are those who need the intervention the least. Likewise, those in greatest need often have the worst access to the intervention and the poorest outcomes. Look for evidence that the intervention will reach the target population, and will not exacerbate inequities. Are access issues, for those who might have greatest challenges, addressed? Vertical equity is the hardest to achieve yet the most needed if health inequities are to be reduced. Are the most vulnerable populations provided the most support in the intervention?

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	RELEVANCE CRITERION	QUESTIONS TO ASK	RESOURCES AND TIPS TO HELP ANSWER THE QUESTION
4	Acceptability: Is the evidence- based intervention aligned with other relevant values in my context?	Is the intervention acceptable to affected communities?	Consult community members about priority needs and preferred interventions.
		Is the intervention ethical and culturally appropriate for your clients and communities?	Involve community members in brainstorming ways to tailor the intervention for the local context.
5	Acceptability	Does the intervention comply with local/state policy priorities?	Share the protocol with diverse stakeholders for feedback/approval. Review relevant regulations for potential concerns.
6	Acceptability	Are the anticipated health and other benefits worth the costs of the intervention in my context? Is the intervention of minimal cost for maximal effect on health inequities?	Examine any cost benefit analyses that have been conducted on the program. Consider benefits for and impact on both health and non-health issues.
7	Feasibility Is the evidence-based intervention possible in my context?	Does the intervention require more than currently available resources?	Acquire detailed information about the study intervention (see #2 above).
8	Feasibility	Can my personnel be trained to a comparable level as the study personnel? Is training affordable?	Review staff capacity. Acquire detailed information about the study intervention (see #2 above).
9	Generalizability	What is needed to tailor the intervention locally?	Consult community (see #4, above).
	Is the evidence- based intervention transferable to my context?	Can tailoring occur without reducing the effectiveness of the intervention?	Review the protocol (see #2, above).
10	Adaptability: Is my target population similar to the study	Is there a match between my context and the study's context? On what dimensions (e.g. socioeconomic factors, ethnicity, age, size, risk status, prevalence of need, etc.)?	Acquire local data/needs assessments about your local context from reliable sources, such as census, local public health and survey departments, internal records.
		Will these differences have an impact on intervention success?	Acquire detailed information about the study intervention (see #2 above).
11	Transferability & Adaptability	Can this program be adapted to suit my needs? What information is available in the program description to enable me to adapt the program to my population(s), set of available resources, and time line? What aspects of fidelity should I consider tracking?	Most programs require some adaptation prior to implementation. Do you have enough information on the 'critical ingredients' of program effectiveness to ensure that your adaptation keeps intact those program components? What fidelity tools could you use?
12	Transferability & Adaptability: Reach	Will the intervention broadly cover my target community/clients?	What outreach, retention, or scaling up activities do you have to implement to reach your target population(s)?

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