



Strategy to 2020

Trusted evidence.
Informed decisions.
Better health.

Cochrane's *Strategy to 2020* is based around achieving four key goals:

GOAL 1: Producing evidence

To produce high-quality, relevant, up-to-date systematic reviews and other synthesized research evidence to inform health decision making.

GOAL 2: Making our evidence accessible

To make Cochrane evidence accessible and useful to everybody, everywhere in the world.

GOAL 3: Advocating for evidence

To make Cochrane the 'home of evidence' to inform health decision making, build greater recognition of our work, and become the leading advocate for evidence-informed health care.

GOAL 4: Building an effective & sustainable organization

To be a diverse, inclusive and transparent international organization that effectively harnesses the enthusiasm and skills of our contributors, is guided by our principles, governed accountably, managed efficiently and makes optimal use of its resources.

Introduction

Cochrane exists so that healthcare decisions get better. Over the past 20 years we have helped to transform the way health decisions are made. We do this by identifying, appraising and synthesizing individual research findings to produce the best available evidence on what can work, what might harm and where more research is needed.

We are widely acknowledged as one of the world's leading organisations in the health sector, with a reputation for producing high-quality, credible information to inform health decision-making. But we want to achieve more.

***Strategy 2020* aims to put Cochrane evidence at the heart of health decision-making all over the world.**

It defines how we intend to accomplish this and provides a framework for Cochrane's future decision-making, helping us respond to the strategic opportunities and challenges that we face in the next decade and beyond. It is the result of a collaborative process undertaken by our global network of contributors; and represents the collective vision of the organisation to 2020 that relies on those contributors to ensure its success.

Strategy to 2020 aims to achieve four key Goals: structured as three interlocking areas of equal focus and priority (Goals 1-3), underpinned by a fourth foundational area (Goal 4) designed to strengthen the organisation and support our new mission 'to promote evidence-informed health decision making by producing high-quality, relevant, accessible systematic reviews and other synthesized research evidence'. There are now many more providers of health evidence than two decades ago when Cochrane was founded; and the needs of those who use it are more complex and demanding than ever before. *Strategy to 2020* is our response to these challenges.

In a world of ever increasing accessibility to the mountains of research evidence produced each year, the feasibility of any individual getting a balanced overview of this research decreases; and the risks of misinterpreting its highly technical content increases. In this context, Cochrane's mission to identify and appraise research findings to the highest standards in order to provide timely, accessible, credible evidence on which decisions can be taken has never been more important or useful for improving global health outcomes.

Mark Wilson
Chief Executive Officer, Cochrane





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Who we are

Cochrane is a global independent network of health practitioners, researchers, patient advocates and others, responding to the challenge of making the vast amounts of evidence generated through research useful for informing decisions about health. We are a not-for-profit organization with collaborators from over 120 countries working together to produce credible, accessible health information that is free from commercial sponsorship and other conflicts of interest.

Our vision

Our vision is a world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence.

Our strapline

Trusted evidence. Informed decisions. Better health.

The principles that guide our work

Our principles have guided the development of the *Strategy to 2020* and will continue to guide Cochrane in the future.

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| 1 | Collaboration | by fostering global co-operation, teamwork, and open and transparent communication and decision making. |
| 2 | Building on the enthusiasm of individuals | by involving, supporting and training people of different skills and backgrounds. |
| 3 | Avoiding duplication of effort | by good management, co-ordination and effective internal communications to maximize economy of effort. |
| 4 | Minimizing bias | through a variety of approaches such as scientific rigour, ensuring broad participation, and avoiding conflicts of interest. |
| 5 | Keeping up-to-date | by a commitment to ensure that Cochrane Systematic Reviews are maintained through identification and incorporation of new evidence. |
| 6 | Striving for relevance | by promoting the assessment of health questions using outcomes that matter to people making choices in health and health care. |
| 7 | Promoting access | by wide dissemination of our outputs, taking advantage of strategic alliances, and by promoting appropriate access models and delivery solutions to meet the needs of users worldwide. |
| 8 | Ensuring quality | by applying advances in methodology, developing systems for quality improvement, and being open and responsive to criticism. |
| 9 | Continuity | by ensuring that responsibility for reviews, editorial processes and key functions is maintained and renewed. |
| 10 | Enabling wide participation | in our work by reducing barriers to contributing and by encouraging diversity. |



Our mission

Our mission is to promote evidence-informed health decision making by producing high-quality, relevant, accessible systematic reviews and other synthesized research evidence.

When Cochrane was established 20 years ago, the concept of evidence-based health care was confined to the academic discussion of a handful of pioneers. Today it is regarded as a scientific milestone of the last century¹ and one in which Cochrane and its contributors can rightly claim to have played a pivotal role in developing. As the concept becomes more mainstream there are now many other providers of information and advocates for evidence informed decision making – so while we are still recognized as a leader in this sector we are no longer unique. In order to maintain our leading position, make the most of our unique strengths, ensure long-term sustainability and deliver our mission, we must respond to this more competitive, complex and demanding environment.

The *Strategy to 2020* is our response to those challenges and opportunities. It establishes our aspirations and priorities for the next five years and sets out how we plan to achieve our vision. Within the context of our mission it is based around achieving four key goals.

¹ Medical Milestones: Celebrating Key Advances since 1840. ISSN 0959-8138, BMJ January 2007; 334 (suppl):s1-22. Available from: bmj.com/highwire/filestream/438857/field_highwire_adjunct_files/0

GOAL 1: Producing evidence

To produce high-quality, relevant, up-to-date systematic reviews and other synthesized research evidence to inform health decision making.

GOAL 2: Making our evidence accessible

To make Cochrane evidence accessible and useful to everybody, everywhere.

GOAL 3: Advocating for evidence

To make Cochrane the 'home of evidence' to inform health decision making, build greater recognition of our work, and become the leading advocate for evidence-informed health care.

GOAL 4: Building an effective & sustainable organization

To be a diverse, inclusive and transparent international organization that effectively harnesses the enthusiasm and skills of our contributors, is guided by our principles, governed accountably, managed efficiently and makes optimal use of its resources.

These goals are structured as three interlocking areas of equal focus and priority (Goals 1-3), underpinned by a fourth foundational area (Goal 4) designed to strengthen Cochrane and support our mission.

Goal 1: Producing evidence

To produce high-quality, relevant, up-to-date systematic reviews and other synthesised research evidence to inform health decision making.

Producing high-quality, relevant evidence

Cochrane's origins lie with a small group of clinical researchers seeking to improve the quality of care provided to women and infants during pregnancy and childbirth². The target users for the evidence they produced were well-defined, the relevance of the questions to those users was clear, and the uptake of the evidence into practice was potentially immediate. Since those early days the number of contributors has grown dramatically, as has the number, remit and use of Cochrane Systematic Reviews. In 2001 there were 1,700 registered Cochrane contributors; today there are more than 36,000³. In January 2016 the number of published Cochrane Reviews passed 6,000⁴, addressing a broad range of health topics and questions; and full-text review downloads by users of the Cochrane Library exceeded 6,803,000⁵ in 2015.

We must continue to ensure that the priorities of our contributors in expanding the breadth and depth of our evidence match those of our growing number of end users. In other words, the relevance and applicability of Cochrane evidence for informing people's decision making must remain at the heart of its design. We already know, for example, the Cochrane Systematic Reviews that users are accessing most frequently correspond closely to trends in global health⁶. We have both the opportunity and responsibility to expand the evidence we produce in these key areas.

“Reviews should address outcomes that are meaningful to people making decisions about health care.”

From the Cochrane Handbook for Systematic Reviews of Interventions

Maximizing production efficiencies

Our credibility is based on our commitment to high-quality, independently produced information. We have a tradition of using information technology to support our production and distribution processes – the Cochrane Database of Systematic Reviews was available on the web by 1996⁷ and we believe that the publication record of the Cochrane Pregnancy & Childbirth group represents the longest serving electronic publication in medicine. We have also relied on a steady and increasing stream of contributors to produce Cochrane Systematic Reviews.

However, we recognize that there can be tensions between quality, speed of production, and the capacity of contributors to produce and maintain complex systematic reviews. We now need to re-focus on taking maximum advantage of new technologies, and increase the capacity-building of our contributor base, to bring efficiencies and improvements to our processes and methods, allowing us to deliver our evidence to users more quickly and effectively without compromising on quality.

² M.J. Friedrich. The Cochrane Collaboration Turns 20. Available from: JAMA, May 8, 2013–Vol 309, No. 18 1881

³ Data sourced from Archie. Available from: archie.cochrane.org

⁴ Data sourced from the Cochrane Library. Available from: thecochranelibrary.com/view/0/AboutTheCochraneLibrary.html

⁵ Data sourced from John Wiley & Sons, Ltd. Available from Oxford 2013 Steering Group agenda: cochrane.org/community/organisation-administration/minutes-reports/full-meetings-ccsg

⁶ The top 10 most accessed Cochrane Systematic Reviews in 2015 address topics in smoking cessation, care of older people, obesity and mental health. Data sourced from John Wiley & Sons, Ltd.

⁷ The Cochrane Collaboration Chronology. Available from: cochrane.org/about-us/history Producing evidence: Our Objectives to 2020

Producing evidence: Our Objectives to 2020

High-quality

1. We will continue to develop and implement comprehensive quality assurance mechanisms for editorial and methodological standards throughout our production and updating processes.

Relevant

2. We will engage with patients and other healthcare consumers, health practitioners, policy makers, guidelines developers and research funders to identify questions that are most relevant and important to them; and prioritize the production and updating of Cochrane Systematic Reviews accordingly.

Up-to-date

3. We will ensure that Cochrane Systematic Reviews represent the best evidence currently available by establishing and managing performance against updating targets, particularly for high priority reviews.

Wide coverage

4. We will continue to support the production of Cochrane Systematic Reviews across a broad range of questions in order to develop the widest possible body of reliable knowledge about health.

Pioneering methods

5. We will ensure that established methods are applied consistently and appropriately in Cochrane Systematic Reviews; and continue to develop innovative methods for designing and conducting research evidence synthesis that help us to achieve our mission.

Efficient production

6. We will improve our technology and revise our processes to create more timely, consistent and efficient editorial and production systems.

7. We will expand our training and capacity-building programmes, promote innovation, and improve the experience of Cochrane Systematic Review production teams⁸ to retain and develop our contributor base.

⁸ Cochrane Systematic Review production teams are the teams of authors, editors, statisticians and others who produce and maintain reviews.



Goal 2: Making our evidence accessible

To make Cochrane evidence accessible and useful to everybody, everywhere in the world.

Designing useful, usable information

Cochrane Systematic Reviews are widely regarded as the highest standard of evidence to inform health decision making, credibility that is both based in, and reflected by, their format and structure; they are the process record and written culmination of a comprehensive scientific investigation. However, user feedback shows that they are not the most accessible or usable way of presenting evidence to people to inform their health decision making.

Cochrane will therefore improve the accessibility and usability of all our content, and regularly consult with our users to plan further developments.

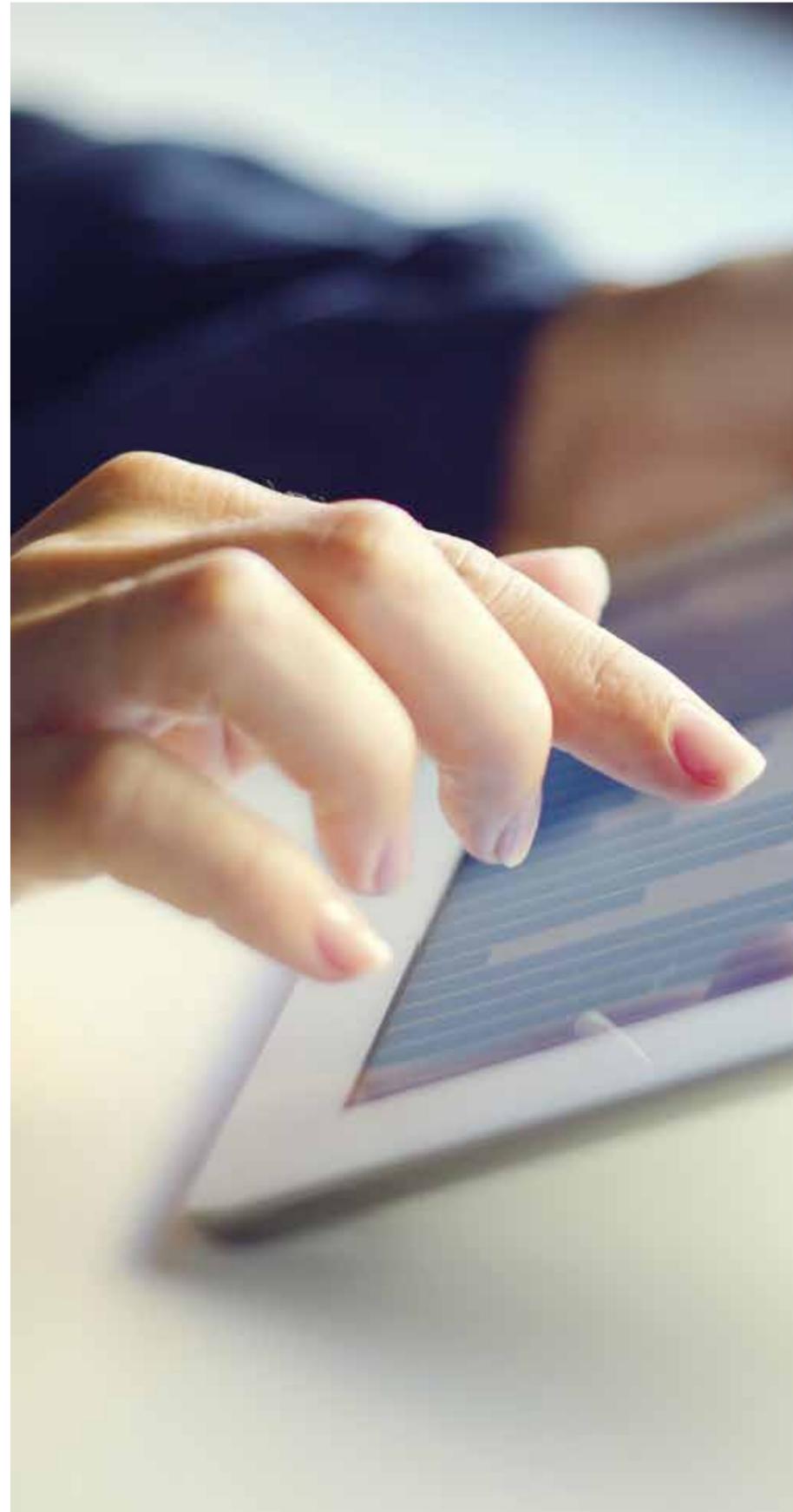
Actively responding to open access

We are living in a world of increasing open access to scholarly research via the internet. Already more than half the world's population has one-click access to Cochrane content on the Cochrane Library through licenses or free access made possible by our low and middle-income countries programme. In collaboration with our publishing partner, John Wiley & Sons, Ltd, we have made all Cochrane Systematic Reviews and updates published from February 2013 available open access twelve months after publication in the Cochrane Database of Systematic Reviews, and in PubMed Central or various country-specific PubMed databases. Additionally, authors and funders have the option to fund individual articles, or groups of articles, to be open access immediately upon publication.

However, we are aware that users all over the world are increasingly looking for information right now, free of charge or other access barriers, and in the languages they speak; and if they can't access it through Cochrane they will seek it elsewhere – even if that means compromising on quality. They want usable interfaces to knowledge on a wide variety of technology platforms in their own language. Our challenge, therefore, is to continue to move proactively towards global open access for all Cochrane Systematic Reviews in a multiplicity of languages whilst securing sufficient licensing income and other revenues to sustain and grow all of Cochrane's activities.

“Open access is not enough; we must learn how to communicate our research to make it truly accessible.”

From a blog post by Brant Moscovitch discussing access to primary research findings.



Making our evidence accessible: Our Objectives to 2020

User-centred design and delivery

1. We will put the needs of our users at the heart of our content design and delivery.
2. We will consult with our users to develop creative and flexible formats and delivery solutions for our content that make it more discoverable, accessible, useful and usable in diverse contexts and settings worldwide.
3. We will engage with our users to bring the concepts and methodologies of evidence synthesis into mainstream use beyond the research and medical communities, so that people know why and how evidence should be used to inform their health decision making.

Open access

4. We will achieve universal open access to Cochrane Systematic Reviews immediately upon publication for both new and updated reviews, and the archive of existing published reviews.

Accessible language

5. We will simplify and standardise the language used across our content to improve readability and reduce ambiguity.

Multi-lingual

6. We will translate key content into at least the five other official languages of the World Health Organization (Spanish, French, Russian, Chinese and Arabic); and make it accessible in the same way as English-language content.



Goal 3: Advocating for evidence

To make Cochrane the ‘home of evidence’ to inform health decision making, build greater recognition of our work, and become the leading advocate for evidence-informed health care.

Building our profile; demonstrating our impact

In its first 20 years Cochrane has established an international reputation for producing high quality, credible information to inform health decision making. We have focussed on getting the product ‘right’ and have invested our resources in achieving this aim convinced that the quality of our evidence will speak for itself.

While this approach has been sustainable as we built our reputation in the academic community, we now need to develop far greater recognition of the value of our work amongst users, especially health practitioners, patients and other healthcare consumers, policymakers and guidelines developers.

Cochrane evidence plays a key role in health decision making from the level of the individual to the planning of health services on an international scale. But our influence and impact could be even greater. Our challenge – and our opportunity – is not just to make our evidence even more accessible and widely used, but to use our profile, reputation and voice to advocate for evidence-informed health decision making. We have recognized that this is essential to fulfilling our mission; and at an operational level, to demonstrating our relevance and usefulness to funders and supporters. An important example of this is our commitment to the campaign to ensure that all clinical trials, everywhere in the world, are registered and their results are reported and easily accessible.

Making our voice clearer

There are noticeable inconsistencies in the ways that Cochrane is promoted across the world, exacerbated by the complexity of our organisational structure and a lack of focus on advocacy and external communication. Clarifying, simplifying and improving the way we present ourselves will be essential to building our profile and demonstrating impact. At the same time, in recognition of the complexity of the issues we are dealing with, we need to take advantage of opportunities to partner with other organisations that help us to reach people making decisions in health.

An essential part of the ‘health evidence lifecycle’

We can also do more to increase our profile as the link between primary research and health decision making in the ‘health evidence lifecycle’ of primary research, evidence synthesis, decision making and outcomes. Our role in this lifecycle puts us in a key position both to inform decision making at the implementation stage; and to influence the primary research agenda by promoting research that is centred on the health decisions that people are making, identifying uncertainties, missing or poor evidence, improving health research methodologies, and campaigning for transparency in scientific conduct. Promoting this dual role will have two key benefits: i) it will reinforce the value argument for Cochrane’s position as an essential ‘knowledge provider’ in the health sector and global public good; and ii) it will improve the evidence base on which our work is conducted and our reputation built.



Advocating for evidence: Our Objectives to 2020

Global profile

1. We will clarify, simplify and improve the way we communicate to the world by creating an overarching ‘Cochrane’ brand.

The ‘home of evidence’

2. We will make Cochrane the ‘go-to’ place for evidence to inform health decision making by offering a range of evidence-informed products and resources.

3. We will build greater recognition of Cochrane’s role as an essential link between primary research and health decision making.

Global advocate

4. We will advocate for evidence-informed health care and the uptake of synthesized research evidence in health policy making and services planning.

5. We will promote reliable, high-quality primary research that is prioritised to answer real world health questions and improves the evidence base on which our work is built.

6. We will campaign for transparency and integrity in scientific conduct, including the registration and reporting of results from all clinical trials, to ensure that the totality of evidence is available to those conducting research or making health decisions.

Global partner

7. We will build international and local partnerships and alliances with organizations that help us to reach people making decisions in health, particularly guidelines developers, policy makers, associations of healthcare practitioners and patient organizations.

Global impact

8. We will demonstrate Cochrane’s value and impact to funders, users and other beneficiaries of our work.



Goal 4: Building an effective & sustainable organization

To be a diverse, inclusive and transparent international organization that effectively harnesses the enthusiasm and skills of our contributors, is guided by our principles, governed accountably, managed efficiently and makes optimal use of its resources.

Investing in our contributors

Underpinning Cochrane's work is a collaborative network of more than 36,000 contributors from over 120 countries, whose ongoing commitment will be the deciding factor in the organization's long-term success. Our contributors are responsible for the vast majority of our work by producing, maintaining and developing new directions for Cochrane evidence; advocating for it within different geographical regions and health specialties; and raising the funding to conduct it through a global network of groups. They are supported by a small staff – the Central Executive – which ensures editorial standards; manages production and distribution; co-ordinates training and methods development; and leads the business.

Feedback from our contributors shows that there are some key challenges that need to be addressed as we seek to build a more effective and sustainable organization. Despite an international pool of people who contribute to Cochrane Systematic Review production teams, the majority of our groups – which are the 'engine rooms' of the organization and the routes through which people contribute to our work – are located in high-income countries and are tied to the funding raised by a relatively small number of world-leading academics. If we truly aspire to be a global organization with global impact, we need to establish an organizational presence in all regions, promote diversity, and invest in developing the next generation of Cochrane leaders across the world.

Increasing efficiency and achieving sustainability

At the same time we need to address the sustainability of our network of groups. These groups are under increasing pressure to maintain their funding from governments, research institutions and other non-commercial sources in a volatile global economy and a climate of decreasing investment in research. This financial pressure is coupled with increasing workloads as Cochrane Systematic Reviews increase in scope and complexity, and the number of new contributors wanting to produce reviews also increases. We need to re-assess our organizational structure and business processes to ensure that they are optimally configured to enable us to achieve our goals.

Within the timeframe of this *Strategy to 2020* we will need to replace some of our income from sales of licences to the Cochrane Library as it is currently made available to users in order to meet our objective of providing universal open access to Cochrane Systematic Reviews. To achieve this we will need to take a proactive approach to expanding and diversifying our sources of income. This income will be used to secure the organization's long-term sustainability by resourcing the objectives and targets set out in this *Strategy to 2020*.



Building an effective & sustainable organization: Our Objectives to 2020

Inclusive and open

1. We will establish a membership structure to improve our organizational cohesiveness and to reduce barriers to participation by creating a clear and open route into the organization for people who want to get involved.

Global and diverse

2. We will become a truly global organization by establishing a Cochrane organizational presence in all regions, building capacity in low- and middle-income countries; promoting gender, linguistic and geographic diversity; and enabling generational change.

Financially strong

3. We will strengthen Cochrane's financial position by diversifying and expanding our funding base, both at core and group level.

Efficiently run

4. We will review and adjust the structure and business processes of the organization to ensure that they are optimally configured to enable us to achieve our goals.

Investing in people

5. We will make major new investments in the skills and leadership development of our contributors.

Transparently governed

6. We will increase the transparency of the organization's governance and improve the opportunities for any contributor to participate in governing the organization and/or to be appointed to a leadership position.

Environmentally responsible

7. We will review and adjust our operations to reduce their environmental impact.

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