Introduction
EVIPNet Europe is a World Health Organization (WHO) Regional Office for Europe initiative. It aims to increase country capacity in developing health policies informed by the best available research evidence – in line with and in support of "Health 2020" implementation (1). EVIPNet Europe institutionalizes knowledge translation (KT) – the process of fostering research use in policy-making – through the establishment of national country teams (so-called knowledge translation platforms (KTPs)). These groups plan and implement KT activities at country level. This summary describes the launch of the network’s pilot phase in Slovenia (full report available upon request from the WHO Regional Office for Europe).

Launching EVIPNet Europe in Slovenia
EVIPNet Europe is supporting Slovenia in translating research evidence into policies. The network was launched through a two-day workshop in March 2014 with participants from the National Institute of Public Health (NIPH), the Ministry of Health, WHO (regional and country office representatives) and key personnel from major national public health agencies. The event was crucial to:

- raising awareness of and getting the support of national decision-makers and stakeholders for EVIPNet Europe and its future activities in Slovenia;
- familiarizing evidence-informed policy (EIP) leaders with the situation analysis methodology and conducting an EIP mapping exercise; and
- identifying national EIP capacity.

Outputs of the EVIPNet Europe pilot phase
The launch of the EVIPNet Europe pilot phase resulted in an initial assessment of the EIP context in Slovenia including the following outputs: (a) a SWOT (strengths, weaknesses, opportunities, threats) analysis detailing core EIP driving forces and barriers and (b) a mapping of health system institutions and their roles for EVIPNet.

Stakeholders’ responses
Stakeholders stressed the need to establish a KTP to institutionalize EIP activities and to build a sustainable national KT infrastructure and capacity for the systematic and transparent use of evidence. Country KTPs are the fundamental unit of EVIPNet, driving national agendas for fostering EIP. At the regional level, EVIPNet brings members of these KTPs together to share common problems and exchange experiences and lessons learned. In Slovenia, stakeholders identified the following requirements for building a KTP:

- strong commitment and support from national stakeholders (i.e. Ministry of Health);
- systematized interaction between researchers and policy-makers;
- equal partnerships between stakeholders involved in the KTP; and
- participation of health practitioners as additional stakeholders (next to policy-makers, researchers and civil society) in national KT activities.
The **Council for Research** emerged as a potential focal point for EVIPNet Europe and the KTP in Slovenia. The Council is a recent initiative led by the NIPH to provide a venue for public health research institutions in Slovenia to (a) discuss relevant issues and (b) represent member institutions with respect to other stakeholders when necessary.

**Existing research and policy-making interfaces in Slovenia**

- "Target Research Projects" financed by the Slovene Research Agency and the Ministry of Health have allowed the latter to gain a prominent role in shaping the research agenda, and to increase research projects' applicability and usefulness.
- The "Resolution on Legislative Regulation" passed by the Parliament in 2011 called for rigorous and in-depth impact assessment of legislative proposals (ex-ante).
- Experts in working groups are involved in drafting policy proposals, strategies and strategic plans. However, these strategies are seldomly used in either shaping legislation or other policy-making and policy-steering activities. The inclusion of experts cannot be equated automatically with use of evidence.

**The way forward for KT for better health in Slovenia**

- Slovenia will invest in EVIPNet Europe as a sustainable, long-term national (change) process. Experts and stakeholders should lead the delivery of inputs and resources for the national KTP, while being able to consult the WHO Secretariat of EVIPNet Europe for technical support and guidance.
- An initial assessment of the Slovene EIP context, actors and interfaces (situation analysis) guided by the WHO Secretariat is regarded as an essential facilitator of success for the national KTP.
- Slovene EIP activities and interventions should follow a systematic approach of institutionalization (e.g. the establishment of a KT standard for all research proposals and the establishment of a KT checklist for researchers) and build upon best practices from other countries.
- Primary health care has the potential to become a KTP priority due to the high demand for synthesis of evidence to support ongoing reform processes in this area.
- Slovenia's efforts for national EIP capacity building and the implementation of the pilot phase should complement the actions undertaken in the context of the strategic policy framework "Health 2020" (1).

**References**