On November 5th, 2015, the SECURE health programme celebrated one and half years of successful implementation of the programme in Malawi. This meeting brought together researchers, policymakers, Members of Parliament, parliamentary staff as well as representatives from the donor community and civil society. The meeting took place at the Wamkulu Palace in Lilongwe.

In his remarks, the guest of honor, Dr Charles Mwansambo, the Chief of Health Services (Malawi Ministry of Health), emphasized that the health sector relies on research evidence to enhance service delivery, and in contributing to the achievement of the health targets in the sustainable development goals (SDGs), and Malawi Growth and Development Strategy.

“The success of the health sector’s strategic plan in achieving better health service delivery depends on careful evidence-based policy and decision-making. Health research provides the evidence we need for policy and decision-making”, highlighted Dr Mwansambo.

The Parliamentary representative, Honourable Juliana Lunguzi (Chairperson of the Parliamentary Committee on Health) expressed gratitude noting that the SECURE Health Programme is working with the Parliamentary Committee of Health through the Ministry of Health. She pointed out that the Committee is happy to represent the needs of the people in health matters, but this can only be effective if relevant research evidence is made accessible. She urged researchers to demonstrate the value addition of research in decision-making especially by making sure evidence informs budget formulation.

During the meeting, it was noted that the Ministry of Health is working hand in hand with its stakeholders to ensure that research evidence informs its programmes and strategies.

Therefore, it is to the advantage of the health sector that the SECURE Health programme is adding value to current government efforts such as the Knowledge Translation Platform, in ensuring that research evidence is utilised in all the decision-making processes. The SECURE Health programme is contributing to the optimisation of leadership, technical and institutional capacity for increased use of research evidence in decision-making.

After one and a half years of implementation, the successes of the programme include the training on evidence-informed policy making (EIPM) of 24 middle-level managers from all directorates within the Ministry of Health, 12 Committee and Table Clerks from the National Assembly, and one officer from the Ministry of Youth. Other successes include the development of the EIPM guidelines, and training manuals on evidence-informed policymaking.

In order to strengthen the outcomes of the programme, a number of pertinent issues were raised and these include the need to incorporate EIPM in the curriculum of other key training institutions specifically those who offer management training for college graduates on policy and other issues e.g. the College of Medicine (CoM), Malawi Institute of Management (MIM) and Mpemba School of Management. It was discussed that CoM should incorporate issues of EIPM in its curriculum of the two-year programme under the Health Systems and Policy Department in the School of Public Health and Medicine, which trains health managers. Stakeholders at the meeting also called for availability of strong mentorship for the trainees especially in applying the skills acquired during the EIPM training.
Kenyan Policymakers and Experts Deliberate on Key Public Health Issues at the 4th Research-to-Policy Conference

**By Jones Abisi**

During the 4th Annual Health Research to Policy Conference held from November 27th to 29th, 2015 at the Great Rift Valley Lodge in Naivasha, Kenya, the Ministry of Health (Division of Health Research and Development -DHRD) organised three Science Policy Cafes on: 1) Genetically Modified Organisms (GMOs) and Health; 2) Community Health Strategy; and 3) Health and the Sustainable Development Goals (SDGs). The Café’s which are supported by AFIDEP’s SECURE Health Programme, saw the engagement of key stakeholders including researchers, national and county-level policymakers, programme implementers, and development partners, engage in the deliberations.

**Science Policy Café on Genetically Modified Organisms and Health**

Kenya has had an ongoing debate on the lifting of the ban on Genetically Modified Organisms as evidenced by discussions of the Kenyan cabinet meeting of November 8, 2012 and a Kenya Gazette Notice No. 13607. The debate has mainly been led by politicians but not necessarily backed by scientific explanations for members of the public to comprehend. The bone of contention has been whether GMOs are safe for human consumption or not, what scientific evidence exists on GMOs and health, and what implications lifting the ban on GMOs would have on health policy and programming in the country. This debate therefore led the Ministry of Health finding the need to facilitate a Science Policy Café on GMOs as it is a priority public health issue.

The Café was moderated by Prof Thairu Kihumbu, a Physiologist from the University of Nairobi. The panelists included three experts; Dr Peter Mokaya (Organic Consumers Alliance) who opposed introduction of GMOs in Kenya without proven safety, Dr Joel W. Ochieng (Kenya University Biotechnology Consortium) who was a proponent of introduction and use of GMOs, and Dr Kephia Ombacho (Director, Public Health - Ministry of Health) who explained the government’s intent on instituting a policy framework that would inform the introduction of GMOs.

According to the World Health Organization (WHO), GMOs are defined as organisms (animals, plants or microorganisms) in which a carrier of genetic material deoxyribonucleic acid (DNA), has been altered in a way that does not occur naturally by mating or natural recombination. The Café deliberated on the available evidence that supports use of GMO technology to help improve the development of drought-resistant crops that are resilient against certain pests and diseases, which in turn will contribute to alleviating food shortages that has often led famine and malnutrition among populations. However, counter arguments were voiced by Dr Mokaya for lack of any scientific study done on humans to prove the safety of GMOs as food for humans. Of concern was the fact that the scientists argued that initial clinical studies done globally had linked the GM foods to cancerous tumors in rats. They concluded that Kenya needs to consider safe alternatives to food challenges rather than risk the health and safety of its population through use of GMOs. From the Ministry of Health’s policy perspective, it emerged that Kenya is not opposed to GMOs but confusion still abounds as to what policy gaps exist when there’s little information about the safety of GMOs in Kenya. In addition, scientific experts have not been consulted on the GMOs debate, neither has the general public, including farmers. The Café recommended that a structured forum to engage scientists, policymakers and other stakeholders be constituted to deliberate on a way forward for Kenya.

**Science Policy Café on Community Health Strategy**

This Café sought to deliberate on the evidence on what works in implementing the Community Health Strategy (CHS) thereby effectively expanding access to quality healthcare in Kenya. The Café was moderated by Prof. Miriam Were the Vice Chancellor, Moi University and a community goodwill ambassador. The panelists were Prof Dan Kaseje (Great Lakes University of Kisumu), Dr Salim Hussein (Ministry of Health) and Ms Anne Thitu (programme implementer, Kajiado County).

The discussions were centred on what Kenya needs to do differently in order to effectively implement the Community Health Strategy. The participants noted that the Ministry of Health developed the Community Health Strategy in 2006 as a response to reducing the high deaths of mothers and infants despite increased investments in health. As a community-based approach, the Community Health Strategy sort to empower households and communities to take charge of improving their own health and health-related development issues. Both Prof Kaseje and Ms Thitu alluded to overwhelming evidence that community health interventions under this strategy continue to work both at local and global level. Dr Hussein articulated the role played by the Ministry of Health in instituting national policy documents, guidelines, and scheme of services for health providers at community-level to guide implementation of the Community Health Strategy in Kenya.

Following the 2013 general elections in Kenya, healthcare services were devolved to counties as provided for in the 2010 Constitution of Kenya, with the expectation that this would largely improve healthcare but this has not been the case. The Café discussions identified some challenges hindering effective implementation of the Community Health Strategy. These include: lack of a regulatory framework to ensure that national policy documents are adapted to address specific county needs; existing gaps...
in research to guide adaptation of national documents to county realities; a lack of or slow transition from manual to electronic-based health information management system (HMIS) and how to make the system sustainable; and lack of county-specific budget allocation for Community Health Strategy interventions.

The Café proposed a number of recommendations to address these challenges:

- Make budgetary provisions for implementation of the Community Health Strategy including research for health;
- Explore financing of the Community Health Strategy through the Sustainable Development Goals (SDGs) under Universal Health Coverage Goal no.3, and establishment of a fund by the World Bank to support the Community Health Strategy implementation;
- Partner with research and academic institutions for support and capacity strengthening at the county level;
- Commissioning of a study on cost effectiveness to assess the potential of cost reduction in the implementation of the Community Health Strategy.

Science Policy Café on Health and the Sustainable Development Goals (SDGs)

This Café was moderated by Dr. Eliya Zulu, the (Executive Director, AFIDEP) with 2 panelists: Prof Matilu Mwau (Director, Consortium for National Health Research - CNHR), and Elkana Onguti (Chief Economist, Ministry of Health).

The Café explored the opportunities for leveraging on the SDGs to make health research matter in policymaking in Kenya. The successes and challenges of the Millennium Development Goals (MDGs) globally as well as in Kenya were noted to have played a significant role in improving healthcare particularly in maternal and child health, not only in Kenya but in sub-Saharan Africa (SSA). The Ministry of Health reported of the tremendous political goodwill experienced during the implementation of MDGs including the ability to mobilise resources from both international and local development partners to address key health challenges including HIV/AIDS, maternal and child health among others.

However, one of the participants doubted whether Kenya really achieved significant progress in maternal and child health. Kenya’s First Lady Dr Margaret Kenyatta has been a champion of maternal health since she launched the Beyond Zero campaign which seeks to improve access to maternity services at the county-level. Further, a question was raised as to how Kenya’s health sector stands to gain from the SDGs. The discussants, citing Goal 3 of the SDGs, which is to ‘ensure healthy lives and promote well-being for all at all ages’ concurred that it covers all spheres of the health sector. It was further noted that the SDGs focus on quality education, poverty reduction and seeks to improve the health of nations by 2030.

“The outcome of the SDGs in Africa may be unrealistic and unachievable if the gap between the rich and the poor continues to widen,” argued one the panellists. The Café participants were in agreement that the outcomes of the SDGs will largely depend on the emphasis laid upon the means of implementation, monitoring and evaluation.

Recommendations from the Café called upon closer collaboration among researchers, policymakers and politicians particularly in negotiations on the SDGs as a platform to make research evidence matter in policy formulation and implementation thereby improving health in Kenya. For instance, according to the Abuja Declaration, only five African countries managed to set aside 15 percent of their GDP for investment in the health sector, with Kenya setting aside less than 8 percent. There is need to learn from the lessons of countries that have managed to improve their health indicators in determining better delivery modes for health services and improving the health of their populations.

The Research to Policy conference was hosted by the Ministry of Health and CNHR in partnership with AFIDEP and the National Commission for Science and Technology and Innovation (NACOSTI).

Skills Building: Programme Trainees Complete UK-POST Fellowship

The United Kingdom Parliamentary Office of Science and Technology (UK POST) fellowship programme is an extension of SECURE Health’s Evidence-Informed Policymaking (EIPM) trainings conducted in Malawi and Kenya. The one-month fellowships which began on 20th October 2015 were awarded to two parliamentary staff from both countries namely; Sharon Rotino (Kenya) and Kondwani Chikafa (Malawi). In the course of the programme, they had placements in three different sections; POST (Host Section), House of Commons Select Committee on Environment, Food and Rural Affairs (EFRA), as well as the House of Commons (Library).

The fellowship programme was designed to enhance skills in accessing, appraising and using evidence as part of parliamentary scrutiny processes; develop ability to lead the development and continuation of good practices for accessing, appraising and using evidence; and assist in the development of future plans to encourage and support better engagement with evidence as part of parliamentary processes. Commenting on his experiences during the fellowship, Mr Chikafa said, “The skills acquired will go a long way in improving good quality research services in the Parliament of Malawi.”

“Through the fellowship, I was able to gain further understanding in accessing, appraising and applying [research] evidence in parliamentary scrutiny processes,” Ms Rotino said.

After the fellowship, there will be a 9-month follow-up programme by POST seeking to provide continued support in the application of skills and knowledge acquired during the fellowship. It is envisioned that two more government officials will undergo the same internship beginning February 2016.
By Nissily Mushani

The College of Medicine (CoM) and its affiliates held its 19th Annual Research Dissemination Conference (RDC) from 20th to 21st November 2015. The theme of the conference was Addressing the double threat of non-communicable and communicable diseases in Malawi.

The first day of the conference began with the Research Open Day characterised by exhibitions by the College of Medicine and different affiliates, speed talks, and a Science Policy Café organised by AFIDEP’s SECURE Health programme. The Café, titled Who’s Agenda is it: Bridging the Gaps between Research, Policy and Practice brought together Members of Parliament, researchers, policymakers, civil society, students and the general public, in a discussion on the growing need to enhance the way health research is informing policy and healthcare service delivery.

Of importance during the conference opening was the keynote address by AFIDEP’s Executive Director, Dr. Eliya Zulu whose speech focused on Optimising the Role of Research in Health Policy and Practice in the Context of the Sustainable Development Goals (SDGs) framework. In his speech, Dr. Zulu unpacked the role of evidence in policymaking, highlighting the barriers to research uptake with emphasis on the demand and supply factors; emerging opportunities for increasing evidence use; health and the Sustainable Development Goals (SDGs); some practical considerations in navigating barriers of evidence use; as well as the consideration of ethics in evidence uptake.

The aim of the conference was two-fold; one, to disseminate emerging research findings to stakeholders in the health sector, researchers and the general public; two, to assess the relevance of the research findings to health policy formulation, programme implementation and clinical practice. The conference brought together research scientists, health practitioners and policymakers from within and outside Malawi. Specifically, participation was drawn from government, civil society organisations (CSOs), development partners, universities, media, the private sector, industries and research institutions.

Of much interest were the speed talks which showcased on-going and planned research activities at the College of Medicine and its research affiliates; Blantyre Malaria Project (BMP), Johns Hopkins Project (JHP), Malaria Alert Centre (MAC), Malawi Liverpool Wellcome Trust Clinical Research Programme (MLW) and Malawi Epidemiological and Intervention Research Unit (MEIRU). This was an opportunity for stakeholders and members of the general public to have informal interaction with research scientists on the purpose and relevance of their research activities. The speed talks allowed the affiliates to present their research goals, strategies and activities.

The emphasis from the affiliates was on how their research is informing policy and programmes in the health sector in Malawi and beyond. Most of the affiliates felt that their research has had a chance to inform policy (as in the quotes below), although more needs to be done.

“...The research which CoM is conducting has contributed to the health and productivity of Malawians...”
(Dr Mwapatsa Mipando, Principal, CoM)

“...We have contributed to policy formulation through our research...”
(Prof Moffat Nyirenda, Director, Malawi Epidemiological Intervention Research Unit)

“...Our research has contributed to the changes in the malaria policy and guidelines...”
(Mrs. Esther Gondwe, Project Administrator, Blantyre Malaria Project)

“...Where are our priorities in research? It is the high time we looked at the research being produced and marry it to the health sector's needs...”
(Prof Atupele Kapito , Deputy Director, Malaria Alert Centre)

Despite these successes, the affiliates lamented over the inadequate forums for interaction with policymakers. They noted that there is a lot of research being conducted in the country but most of it is not informing policy and programme implementation adequately. Evidence of this is the persistent high disease burden and deaths from preventable diseases in the country.

AFIDEP’s SECURE Health programme has put in a lot of effort in advocating for the use of research evidence in health policymaking in Malawi. Change in the way policymaking is conducted cannot be an overnight success but judging from the conversations at the conference, Malawi is on the right track. The views from Mr. Michael Udedi (Assistant Director of Clinical Services, Ministry of Health, Malawi) are testimony to this.

“The skills acquired are very crucial to the work that I am assigned... For instance, currently, our department is in the process of developing the alcohol and drug policy as well as reviewing the 2000 Mental Health Policy. It is imperative that the policy should be informed by evidence if it is going to have impact.”

**Upcoming Events - February to April 2016**

- County-level EIPM training workshops (Nairobi and Kajiado Counties - Kenya)
- EIPM follow-up trainings for parliamentary staff in Kenya and Malawi
- Follow up meetings on Science Policy Café’s held in 2015 in Kenya and Malawi (i.e. free maternal services and sexual reproductive health and rights respectively) to stimulate uptake of the recommendations
- Dissemination of findings of the retrospective policy analysis study within the Ministry of Health in Kenya and Malawi