The Strengthening Capacity to Use Research Evidence in Health Policy (SECURE Health) programme is coming to an end on February 28, 2017, having been implemented for three years in Kenya and Malawi since November 2013. As the programme comes to an end, AFIDEP in collaboration with the Ministry of Health (MoH) and Parliament in Kenya and Malawi hosted a learning forum on February 22 and 27, respectively, to discuss lessons and share tools from the implementation of the programme.

Among the key interventions implemented by the SECURE Health programme included sustained advocacy with top leaders on prioritising investments and structural reforms that enable evidence use, hosting of regular dialogues to discuss evidence on urgent health issues, development of guidelines for evidence use in policy-making, development of a policy framework and priorities for guiding the generation and application of research for health in Kenya, and mid-term review of the effectiveness of Malawi’s National Health Research Agenda, and implementation of a comprehensive training and mentorship programme on evidence-informed policymaking. Some of these interventions have been very successful in improving capacity and motivation to use evidence, while others have not.

Programme Impact

Generally, the programme has stimulated and nurtured a culture of evidence use. Results from both external evaluation of the SECURE Health programme funded by DFID and internal evaluation by the consortium have shown that at Individual Level, the programme has:

- Increased awareness and stimulated a mind-set shift on the value of evidence-informed policymaking (EIPM) among top leaders and technical staff in MoH and Parliament in Kenya and Malawi.
- Improved skills and confidence in EIPM, with MoH and Parliament staff in Kenya and Malawi sharing concrete examples of how they are now incorporating evidence in their work following the EIPM training undertaken by the programme.
- Produced champions of evidence use within the MoH and Parliament in Kenya and Malawi who are now actively encouraging and supporting evidence use within their institutions.

At Institutional level, external evaluation results show that the programme has:

- Increased priority to research use within the MoH in Kenya and Malawi as demonstrated through declarations of leaders and resource allocation to the Kenya MoH’s Research unit.
- Increased leadership for EIPM in the Kenyan Parliament, where MPs have formed a caucus championing evidence use (i.e. Parliamentary Caucus on Evidence-Informed Oversight and Decision-making) following their interaction with the programme to champion evidence use in the legislature.
- Provided MoH and Parliament in Kenya and Malawi with tools for guiding and embedding evidence use in their work. Specifically, the Guidelines for Evidence Use in Policy-Making developed by the programme have been adopted and launched by the MoH as important tools for promoting and guiding evidence use. Also, the programme has developed a comprehensive curriculum for EIPM, which the Kenya MoH is now using to strengthen capacity at the county level on evidence use. Furthermore, the programme is in the process of finalising the development of the National Research for Health Policy Framework and Priorities for Kenya. This will guide the generation of research evidence that is responsive to policy needs as well as guide and support its translation into policy decisions and programme action. For Parliament, the programme developed Guidelines for Evidence Use in Policy Analysis and Decision-Making, which are being reviewed for adoption.
For Kenya MoH, the programme generated evidence that is informing reforms in EIPM processes and structures. Specifically, the programme’s work on developing guidelines for evidence stimulated the MoH to develop guidelines on the health policy development process as this was identified by the programme as a gap. Also, the programme’s study on the use of evidence in past policy development processes identified various gaps in the use of evidence including the use of poor quality evidence in informing policy decisions. This pointed to weak interest and capacity to appraise evidence before using it in decision-making, among others. The study’s recommendations were discussed with MoH and there are efforts within MoH to explore how the MoH can implement the recommendations.

What government officials from Kenya and Malawi had to say as we marked end of programme

Mr. Bonnie Mathooko, Head of Research Services Unit at the Kenya Parliament said: “Partnership with the SECURE Health programme has made it possible for us at parliament to crystallize our dream of evidence informed decision-making”.

Dr. David Soti, Head of Preventive and Promotive Health Services, Kenya Ministry of Health, speaking on behalf of the Director of Medical Services said: “The project was a successful and we need to make it more successful by entrenching an evidence-informed decision-making norm. SECURE Health was a project, but MoH wants to make it a programme so that there is a critical mass of EIPM experts.”

Dr. Charles Mwansambo, Chief of Health Services in the Malawi MoH said: “The SECURE health programme has so far contributed to the strengthening of leadership, technical and institutional capacity for increased use of research evidence in decision-making. I hope that even though the programme is coming to an end, the use of research evidence will become a culture within the health sector”.

In Kenya, the event attracted more than 70 people drawn from MoH, Parliament and development partners. Key development partners at the event included senior representatives of the DFID Kenya office, WHO, IDRC, Hewlett Foundation, AMREF, the Health NGOs Network in Kenya (HENNET), among others. In Malawi, the event attracted more than 60 people drawn from MoH, Parliament, civil society, universities, and media. Key development partners included senior representatives of DFID Malawi office, WHO, College of Medicine, among others.

Lessons from programme implementation

Generally, the programme has confirmed that well-designed and executed capacity building programmes can improve capacity and entrench a culture of evidence use. The programme has also confirmed that there exist a huge demand for technical capacity strengthening in EIPM in government agencies in Africa. Such capacity building programmes need to be implemented collaboratively with government agencies for ownership and sustainability. Also, such programmes need longer-term funding investments for them to have a lasting impact, especially on strengthening institutions for enabling evidence use.

Programme Tools and Publications on strengthening capacity in utilization of evidence

Programme interventions sought to nurture a culture of evidence use within the Kenya and Malawi MoH and Parliaments and beyond. A culture of evidence use means that public officers not only have the technical skills, motivation and time to use evidence in their day-to-work, but also that there are supportive institutional policies, systems and structures that promote, support and enable the use of evidence. As part of these efforts, the programme produced tools and publications as listed below:

EIPM Tools

- Guidelines for Evidence Use in Decision-Making (Malawi Parliament). Published in 2016. Available at: https://www.afidep.org/?page_id=5808
- Guidelines for Evidence Use in Policy-Making (Malawi Ministry of Health). Published in 2016. Available at: https://www.afidep.org/?page_id=4390
- Guidelines for Evidence Use in Policy-Making (Kenya Ministry of Health). Published in 2016. Available at: https://www.afidep.org/?page_id=5808

Publications

Blogs

1. The uphill task of building capacity to use research evidence in the Malawi National Assembly. Available at: https://www.afidep.org/?p=4315
2. Struggles of Kenya Parliament staff in supporting MPs to use research evidence. Available at: https://www.afidep.org/?p=3711
3. Evidence-informed policy-making in Kenya's health sector: The devil is in the quality of evidence. Available at: https://www.afidep.org/?p=3098
4. Using training as one approach for building the capacity of health policymakers in evidence-informed policy-making: Recent experiences and reflections from Kenya and Malawi. Available at: https://www.afidep.org/?p=2164
5. Barriers to research use in the public sector in Kenya and Malawi. Available at: https://www.afidep.org/?p=54

In the Words of Programme Beneficiaries

“Following the EIPM training, I now base my contributions on facts gleaned from research evidence. I believe research evidence is a crucial tool not only for the executive officials to be more effective in their decision-making roles, but also for their daily work. The EIPM course has helped me augment my capacity to contribute to debates in the County Assembly.”

- Former Kenya Ministry of Health Staff

“I now understand the importance of giving credible information. Credible information cannot be credible if it is not backed by evidence. So all my write-ups nowadays are backed by evidence and another thing that I benefited from, was how to acknowledge properly and present the evidence in different ways. I have improved my writing skills, my presentation skills…”

- Researcher, Parliament of Kenya

“I have learned that the aspect of generating evidence based information can get more attention and change the setup of the policymaking as opposed to information that is not that credible. And sometimes also, after this training the key thing that I have learned is that information that is not evidence packed can affect the policymaking process and the policy that comes out of that process…”

- Researcher, Parliament of Kenya

“Using evidence such as statistics has made me to be trusted by many including fellow MPs. There is a change from the time the Health Committee started working with AFIDEP through the SECURE Health and now. Members have become more confident in the use of evidence than before. They are able to demand it.”

- Member of Parliament, Malawi

“The EIPM Guidelines are used when one is not sure how to generate evidence needed in some committees. The guidelines have also been used to help my staff to be conscious on how to use some language when writing background papers for Malawi MPs when they travel outside the country.”

- Management Staff, Parliament of Malawi

“The training has assisted me in acknowledging importance of evidence based decision making. Any decision that I am currently making I am ensuring that it is backed by evidence either from program data or literature that is available.”

- Malawi Ministry of Health Staff

References

- Longwe-Ngwira, A, N Mushani, V Murunga, R Oronje, E Zulu (2014) An Assessment of capacity needs for application of research evidence in decision-making in the health sector in Malawi. Available at: https://www.afidep.org/?page_id=4382
- Contribution of a Science-Policy Café to a Shift in Kenya’s Free Maternity Service Policy. Case Study. Available at: https://www.afidep.org/?page_id=4832
- Improving the Implementation of the Free-of-Charge Maternity Services Programme in Kenya. Science Policy Café Briefing. Available at: https://www.afidep.org/?page_id=2083