### Unlocking development potential in sub-Saharan Africa

Weak institutional and individual capacities coupled with poor governance and weak accountabilty structures and processes are among the major barriers to development progress in Africa.



### AFIDEP on the move to accelerate the promise of ICPD25

Our work in 2019 on population and sustainable development, directly contributed to several of the ICPD25 concerns development.

### Leveraging Africa's demographic transition: AFIDEP's education imperative

AFIDEP's education strategy will have as its overall purpose the promotion of use of evidence in education policymaking in Africa in order to develop the requisite critical technical skills.



# **AFIDEP TIMES**

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# AFIDEP's Vision for Africa in our Strategy 2024

### By Elizabeth Kahurani

The African Institute for Development Policy (AFIDEP) is pleased to launch a new strategic plan for the period 2020-2024. In line with our purpose to have evidence used consistently to transform lives in Africa, the new road map for the institute outlines ways through which we aim to promote a shift from a culture of low evidence use in decision-making, to a setting where poli-cy and programme actors actively seek and routinely use evidence. In doing so, the right in-vestments can be made towards development that transforms the lives of all African people.

On the occasion of the launch our five-year Strategic Plan (2020-2024), known as Strategy 2024, AFIDEP Times (AT) talked to Nyovani Madise, who led the process to develop the new strategic plan.

AT: Briefly summarise the overall aim of Strategy 2024

NM: In Strategy 2024, we will build on our work between 2015-2019 by expanding our scope to promote the use of evidence not only in policymaking but going beyond to implementation of those policies, to the design, and evaluation of programmes also. We are also focusing our work on accelerating the achievement of the Sustainable Development Goals (SDGs).

AT: There are 17 SDGs. Do you intend to address all of them or you have specific focus areas?

NM: Through our analysis of the progress that Africa has made on the SDGs, we have identi-fied the following as our five priority areas under Strategy 2024, where we feel Africa has made least progress and needs to change gears to accelerate progress:

- Population dynamics and the demographic dividend;
- Health and well-being;
- 3. Transformative education and skills development;
- 4. The environment and climate change; and
- 5. Governance and accountability.

We want **gender** to feature in all of the work that we do, so it will be a cross-cutting theme across all of our programmes. What this means is that we will place greater emphasis on un-derstanding how

to accelerate gender equality, how to address barriers for female participa-tion in all spheres of life, and how to improve health and economic outcomes for girls, boys, men, and women.

AT: What difference do you anticipate the new strategy will make by the end of 2024

 $\ensuremath{\text{NM}}\xspace$  : For us, success will be when :

- We see Increased political commitment to achieving the SDGs and addressing development challenges in at least 10 countries that we are working in;
- African governments allocate funding, technical and human resources to accelerate progress

on the SDGs; and

- Evidence is used consistently in at least 10 countries when designing and implementing programmes for achieving the SDGs.
- 5 countries that we work in move from low income status to lowermiddle income, and 5 from lowermiddle to upper-middle income. Most importantly, we should see poverty levels and inequalities reduce in these countries.

AT: Briefly tell us the process that went into developing the new strategic plan

NM: It was a rigorous consultative process that started in 2018 involving Staff, Board of



### HEALTH & WELLBEING: NEW GYM

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past performance, we looked at what

is happening to the development

landscape and funding availability,

and set our ambitions for the direction that we want Africa to take.

We believe that our focus on institutionalising a culture of EIDM is timely and critical to transforming Africa's development prospects. As we approach the 2030 deadline for achieving the SDGs and the ten-year mark for the African Union Agenda 2063, we anticipate that there will be increased demand for evidence

from policymakers and development actors, to support decision-making and performance monitoring on these roadmaps.

Professor Madise is the Director of Research and Head of Malawi office at AFIDEP



### By Paul Kawale

Sepsis is a life-threatening condition caused by your body's toxic response to infection. It is the second biggest cause of death in the world. Globally, there are an estimated 30 million cases of sepsis each year, with over 7 million ending in death. Of these deaths, at least 2 million are estimated to occur in Africa according to the World Health Organisation (WHO). Despite being a major killer, sepsis is largely unknown by the general public and health care

workers. It is also not prioritised by policy-makers.

The African Research Collaboration on Sepsis (ARCS) initiative is being implemented in Malawi, Gabon and Uganda and lead by Liverpool School of Tropical Medicine. The main aims of the project are to highlight the dangers of sepsis and to ensure that it is prioritized in policies and the healthcare system, and to recommend clinical practices for better management of sepsis to prevent mortality. The challenges that As an example of how AFIDEP

ARCS has identified so far include: lack of a standardised definition for sepsis even among health practitioners; lack of data on sepsis; and lack of awareness among the public.

AFIDEP's contribution to the ARCS collaboration is to support efforts to highlight the importance of sepsis as a major killer and as an important marker of the quality of care of a health system. To achieve this, AFIDEP has identified several approaches including: providing information on what sepsis is to the public using a factsheet and through the media; compelling decision makers to act using a policy brief; research to understand how sepsis is viewed by health policymakers and practitioners and what approaches work best to get sepsis prioritised; formation of a network comprising stakeholders from health, environment, civil society organisations, academic researchers, patients' groups, and others to act as a sounding board for initiatives to elevate sepsis as a priority disease; and capacity strengthening for decision makers to help them to access, appraise, and evaluate evidence for better decision-making.

is engaging the public, on 2<sup>nd</sup> April, 2019, Paul Kawale, AFIDEP knowledge Translation Scientist, engaged the media in a live radio interview on Timveni Radio in Malawi. The general public called in during the programme from across the country, most stating that they had little or no knowledge of sepsis. The main queries from the general public were: how widespread sepsis is in Malawi, who is at risk, what preventive measures there are, and what AFIDEP is doing about it. In reinforcing public awareness, on 13th September 2019 during World Sepsis Day, AFIDEP Communications Officer for Southern Africa, Victory Kamthunzi led a social media campaign to promote awareness on the digital social platform Twitter with an approximate reach of over 1665 impressions and 46 engagements per post.. These included infographics and other key messages, and a co-authored blog on sepsis shared on the AFIDEP website and the African Sepsis Alliance website.

The project will be rated as successful when sepsis is prioritised as a major health issue in Africa's healthcare systems and efforts are enhanced to reduce mortality due to the disease.

### **IMPALA Project tackling Lung Health** and TB in Africa

By Emma Heneine and Vincent Otieno

According to the World health organization (WHO), respiratory diseases are the leading causes of death and disability in the world. Leading the pack is tuberculosis (TB), which kills approximately 1.4 million people every year—one quarter of whom are in Africa. However, there are also other dangerous and growing respiratory diseases. Chronic obstructive pulmonary disease, for example, is the third leading cause of death worldwide. Asthma affects 334 million people, most of whom are children. Lung cancer is the deadliest cancer, with 1.6 million deaths each year. Lower respiratory tract infection is a leading killer among children under 5 and is estimated to cause 4 million deaths each year. The list could go on.

Despite these stark realities, lung health remains neglected, especially in Africa where efforts have concentrated on TB. The International Multidisciplinary Programme to Address Lung Health and TB in Africa "IMPALA" seeks to change that narrative. A research consortium funded by the UK's National Institute for Health Research, IMPALA aims to generate Africa-focused scientific knowledge and implementable solutions for these high-burden, under-funded, and under-researched

health problems, beyond just TB.

In June 2019, AFIDEP facilitated a two-day course for researchers to provide them with skills for enhancing the uptake by policymakers of the research. The training is already proving useful as the teams have produced a national stakeholder and policy engagement strategy in collaboration with local lung health/ TB researchers. Health economics PhD candidate, Martin Njoroge, for example, has generated buy-in for his research on the health and economic cost of non-communicable respiratory diseases in Malawi and effective interventions to reduce this burden.

Malawi Chikwawa Health Research Committee, comprised of district health policymakers and medical officers, asked that he present his findings to the committee and district, in order to address their implications. Similarly, policy delivery and impact PhD candidate, Brenda Mungai, facilitated a dialogue with key stakeholders in Kenya, including MoH TB and Lung Disease county officers to strategise direction for national engagement—a model that is now being replicated across other IMPALA

Regional-level engagement is also proving successful, with a few standing out. Several researchers attended the first International



Post-Tuberculosis Symposium at Stellenbosch, which was wellattended by officers from ministries of health across the continent. In fact, post TB chronic lung disease has become a central focus as we seek to leverage existing TB resources to bring attention to other chronic lung health problems. The Stellenbosch meeting revealed the need for accessible information on post TB lung disease in order to engage with stakeholders, something the programme is now developing. IMPALA also dominated the 50th Union World Conference on Lung Health, with 12 abstracts accepted, nine sessions chaired, and a booth. Beyond conferences, IMPALA researchers continue to engage with

key regional stakeholders, including East African Community and the Global Fund.

Ultimately, the evidence being generated through IMPALA is filling major evidence gaps and is beginning to draw much needed attention and resources to improve regional lung health. Assuming you took three minutes to read this article, you breathed about 48 times. IMPALA exists so that every person can have that same luxury, inhaling and exhaling with ease more than 960 times an hour, 23,040 times a day, and 8,409,600 times a year.

Chronic obstructive pulmonary disease (COPD) is a type of obstructive lung disease characterized by long-term breathing problems and poor airflow. This includes conditions such as chronic bronchitis

### Tackling the threat of drug-resistant bacteria in Malawi and Uganda



### By Claire Jensen

Imagine a world in which antibiotics we rely on to treat diseases like tuberculosis, pneumonia, and even common bacterial infections like urinary tract infections are no longer effective. This is already becoming a reality as bacteria develop resistance to antibiotics. The phenomenon is known as antimicrobial resistance (AMR), and it is one of the biggest health concerns of our time.

Antibiotic use contributes to AMR, though there is still much that is not understood about how resistance is spread. In a country like Malawi with an overstretched healthcare system, health care professionals might prescribe antibiotics when it is unclear if they are needed because they are unsure if they will see the patient again. For example, a health worker might prescribe antibiotics to a sick child who has travelled a great distance with their parents to reach a clinic in a rural area. In

such an environment, patients might also ask for antibiotics when they are not needed as they believe that they are the only way to treat their illness. Thus, antibiotics may be used more than necessary, contributing to resistance.

This is complicated by the fact that antibiotic use is not limited to humans. Antibiotics are also commonly used in livestock and other animals. Human and animal waste then spills into the larger environment, meaning that the issue of AMR is not just a human health issue – it is a One Health issue that affects animals, humans, and the environment.

The growing threat of drug resistant bacteria is likely to affect low and middle-income countries (LMICs) like Malawi more severely because of limited access to alternative antibiotics. Thus, developing and implementing effective policy to address AMR is critical and will require coordination between multiple

sectors including the human health, animal health, agriculture, and environmental sectors.

As part of the Liverpool School of Tropical Medicine (LSTM)-led Drivers of Resistance in Uganda and Malawi (DRUM) Consortium, AFIDEP is leading research on the AMR policy landscape in Malawi with the aim to better understand key stakeholders' perceptions of barriers to collaborative multi-sectoral development and implementation of policy in line with the antimicrobial resistance strategy in Malawi.

As a first step, AFIDEP conducted interviews with policy makers and other stakeholders involved with national-level AMR policy in Lilongwe. Preliminary results reveal the need for greater awareness among the general public of the impact of unnecessary use of antibiotics on AMR. While there is buy-in at the technical level in relevant ministries, there is limited engagement and knowledge at senior level in some key institutions. Funding and resource gaps were described as significant barriers to the development and implementation of effective AMR policy. There appears to be greater prioritisation of AMR in the human health sector than other sectors. These and other findings were presented by Claire Jensen at the University of Malawi College of Medicine Research Dissemination Conference in November 2019.

AFIDEP is actively working to increase awareness of this important and complex issue. On 20th November, AFIDEP joined the Malawi Ministry of Health and Population (MOHP),

key stakeholder institutions and organisations from the private sector in a 'Big Walk' through Lilongwe City, Malawi to commemorate Antibiotic Awareness Week. The aim of the Walk was to bring awareness to the general public on the dangers of the misuse and overuse of antibiotics. The walk saw over 3,000 printed awareness materials disseminated, 1,850 of which were produced by AFIDEP including a comic strip explaining AMR in both English and Chichewa and a fact sheet about AMR.

There is still much to understand about AMR in Africa, including how effective policies can be developed and implemented to control the spread of resistance. AFIDEP's involvement in the DRUM Consortium is much in-line with our efforts to work hand-in-hand with policy makers to ensure they have the evidence they need to develop sound policy to address some of the world's most critical health issues.

### **AFIDEP's Antimicrobial resistance** study in Malawi

Policy implications:

- While AMR policy is largely coordinated by the human health sector, it is important to recognise the competing priorities of the agriculture and environmental sectors.
- Efforts to increase awareness of AMR and address funding gaps are needed to develop and implement effective AMR policy.
- Awareness efforts should not only target the public, but also policy makers and stakeholders at key institutions that do not have an understanding of AMR

# Spotlight on vector control in Burkina Faso, **Cameroon and Malawi**

### By Nurudeen Alhassan

Vector-borne diseases are a form of human illness caused by parasites, viruses and bacteria, and are transmitted by vectors such as mosquitoes, ticks, tsetse flies, lice, and snails. Globally, vector-borne diseases account for more than 700,000 deaths annually. The burden of vector-borne diseases is highest in Africa with malaria, the leading vectorborne disease, causing more than 400,000 deaths annually. Despite the multitude of interventions in Africa including vector-control programmes, integration of these programmes/

strategies and collaboration among various stakeholders is still quite low. The capacity of scientists/researchers to conduct high-quality and relevant research to inform policy is also low.

The Programme for Increasing the Impact of Vector Control (PIIVeC) seeks to reduce the burden of vectorborne diseases in low and middleincome countries through effective, locally appropriate and sustainable vector control. To achieve its objective, PIIVeC recognises the need to strengthen local research capacity, provide a solid evidence base and engage critical stakeholders at the

regional and national levels. AFIDEP is the technical partner responsible for promoting evidence uptake and policy engagement under the PIIVeC programme.

To inform PIIVeC's regional engagement strategy, AFIDEP conducted regional policy and stakeholder analyses. The analyses revealed that AU which is the leading continental governance body in Africa has no explicit integrated vector management strategy or policy despite the recent interest and renewed efforts in neglected vectorborne diseases and malaria. Among the sub-regional governmental bodies. ECOWAS is the most advanced in vector control policy/ strategy. ECOWAS is in the early phase of establishing an integrated vector control programme—West Africa Integrated Vector Management (WA-IVM) Programme. Aside the regional governance bodies, a few other organisations such as PAMCA, ARNTD and AMREEN are critical regional stakeholders in vector control. However, there is little collaboration between these organisations and the regional governance bodies in the implementation of vector control programmes/strategies.

In Malawi, AFIDEP has been instrumental in the launch of the Malawi Technical Vector Control Advisory Group (TVCAG) on 24th October 2018. The Malawi TVCAG

is set up as an organ of the ministry of health with the aim of providing technical advice on effective tools, strategies and interventions on vector control. During the launch of the Malawi TVCAG, Dr. Nurudeen Alhassan presented on the need to engage policymakers and other relevant stakeholders early on in the activities of the TVCAG. He emphasised the importance of generating demand for research findings and buy-in from the ministry

AFIDEP will continue to provide support in the implementation of the PIIVeC programme in Burkina Faso, Cameroon and Malawi. The immediate focus at the regional level is on engaging WHO and ECOWAS to leverage on PIIVeC learnings for other countries in West Africa.

### Key project highlights 2019

- AFIDEP has been instrumental in the launch of the Malawi Technical Vector Control **Advisory Group**
- Study shows need for guidelines at regional level; AFIDEP embarks on Policy engagement efforts at regional level – AU and **ECOWAS**
- Policy engagement and evidence uptake training for PIIVEC researchers who were supported to develop Policy Briefs

### The impact of poverty on teen pregnancy and school dropout in Malawi



### By Claire Jensen

"A lot of girls get pregnant because of lack of money. If a boy has money and he asks you to sleep with him, you cannot say no when you have no money to buy soap for washing your uniform with. That is why a lot of girls get pregnant and drop out of school." -15-year-old focus group discussant in Form 1 from Dowa, Malawi.

Poverty is a major driver of teen pregnancy in Malawi, along with child marriage, cultural practices such as initiation ceremonies, and unprotected sex. This according to findings from the AFIDEP Initiative for Learning and Evidence to Address Teen Pregnancy Among Girls in School in Malawi (I-LEARN).

The goal of the study was to better understand the causes of school dropout due to pregnancy in Malawi as well as best practices to prevent teen pregnancy and keep girls in school. In order to shed light on these issues and possible solutions, the initiative explored drivers of pregnancy among girls in school, effective interventions to prevent teen pregnancy among girls in school,

and employed interviews and focus group discussions to understand the perspectives of teens, teachers, health workers, and other community members in two districts in Malawi -Dowa and Mangochi.

### Findings from the I-LEARN study

The study found that a major cause of both teenage pregnancy and school dropouts is poverty. In nearly all of the focus group discussions, inability to pay school fees was described as a main underlying factor for dropping out of school, with related expenses like uniforms, books, and boarding fees also raised by participants. As for teenage pregnancy, poverty can put girls in situations in which they are pressured or coerced to exchange sex for financial or material support from men, such as money for school or boarding fees. Poverty can also be a factor in child marriages, as parents may pressure their daughters to drop out of school and get married in order for the family to receive financial support from the groom, or so that the girl will be supported by someone else. Finally, although teens appear to have knowledge around contraceptive use, it came out that girls are sometimes pressured to have sex without a condom, and that condom use is discouraged by cultural beliefs in some areas.

As for interventions, school attendance by itself was found to be protective against teenage pregnancy. Given the findings around poverty as a driver of teenage pregnancy, it is unsurprising that some of the most effective interventions were those that took a holistic approach and sought to keep girls in school by addressing economic and social barriers to school attendance, such as paying school fees or providing uniforms, as well as providing safe spaces for girls to discuss such issues. Sex education was found to be important, but insufficient by itself to address the issue of teenage pregnancy.

Key policy recommendations coming out of the study include treating school attendance as an intervention that works to prevent teenage pregnancy, finding ways to ensure financial empowerment for vulnerable girls and their families, and augmenting sex education for teenagers with appropriate services

and resources

### Addressing the evidence needs of

AFIDEP occasionally gets requests from government to provide information on an issue quickly. I-LEARN is an example of how AFIDEP responds to such requests in a timely fashion with minimal funding. It has also allowed AFIDEP to expand its work in the area. As Dr Nurudeen Alhassan notes:

"For me, what I-LEARN has done is open up the opportunity to explore the data more critically on issues of adolescent reproductive health, particularly on contraception and the various challenges adolescents face in accessing family planning services." - Nurudeen Alhassan, PhD

In November 2019, Claire Jensen presented two I-LEARN posters at the 8th African Population Conference in Entebbe, Uganda. In Addition, in August, a blog post about I-LEARN preliminary findings prepared by Claire Jensen and Victory Kamthunzi was featured on the ICPD website.

expand contraceptive method choice for young people aged 15-24 years. The specific objectives include:

- To increase the global evidence base on expanded method choice for youth
- To generate evidence on youth's access to expanded method
- To inform policy shifts and programmatic actions in Kenya among others
- To undertake measurement, learning, and evaluation (MLE) alignment across BMGF investments focused on expanded method choice for youth.

These objectives will be achieved by

defining the pathway through learning agenda questions. These questions were arrived at by key stakeholders within the SRHR space in their respective counties to respond to queries based on the available data for decision making. The questions continue to guide the secondary data analysis as well as subsequent literature reviews on the key thematic areas that need evidence. Interesting results have been highlighted in the secondary data analysis component of the project.

These results, presented in a national fact sheet, highlight the fact that a significant proportion of girls have engaged in sex with as low as 15-year olds confirming that apart from their sexual debut at that tender age, they are in fact sexually active (recently engaged in sex within the last six months). However, the uptake of contraception is glaringly low despite high levels of knowledge of some form of modern contraception.

Another qualitative study has also been conducted to get the indepth information about the facts discouraging contraceptive use among adolescents and young girls. This is expected to provide clarity of the most feasible approaches to take in defining SRHR policies for young

Just at mid-year as an advocacy strategy, AFIDEP hosted a policy dialogue on teenage pregnancy in Kenya. Over 70 stakeholders drawn from research, academia, policymakers, media, religion and youth groups attended the dialogue that resulted in a call to action for policy interventions that work in addressing the issue of teen pregnancies. The voice of the youth echoed the need for their inclusion in key decisions that affect them. The plea of the youth was to have youth-oriented discussions around SRHR targeting policy where youths themselves are stakeholders.



### It is only fair to contribute **Social Welfare**

### By Hleziwe Hara

They say charity begins at home, and at AFIDEP we believe in supporting communities and staff in their different aspects of life. Through the Social Welfare Committee, we celebrate births, contribute towards social developments among staff as well as support during bereavement. A reflection of the principal determinants of population change namely: fertility, mortality and migration. The organisation therefore sets aside funds to contribute towards new-borns, weddings as well as bereavement. The committee membership includes Elizabeth Mutinda (Chair), Flora Okidia (Secretary), Evans Chumo and Joyce Mbithi, for the Nairobi Office. In Lilongwe, the membership is made up of Martin Phiri, Victoria Kusamale and Salim Mapila. In the course of the year, the Social Welfare Fund has supported Dr Eliya Zulu, Hleziwe Hara and Edward Mwamadi through the loss of their mother, brother and father respectively.

On 21 March 2019 the Committee met and made recommendations to adjust the contributions upwards to factor in inflation over the last five years (average of 5.82 per annum). The revisions were as follows:

Category	Old rate	Rate from March 2019
Baby	\$50.00	\$100.00
Wedding	\$100.00	\$150.00
Bereavement	\$200.00	\$300.00

The Committee justified that the monthly contributions of \$3 from about 30 staff (\$90/month) was sufficient to cover projected disbursements for about two births, one loss and one wedding a year. The Committee noted the need to review the Fund's beneficiaries list, which was previously based on the organisation's HR policy. This includes staff's spouse, parents, parents-in-law, and children; however, it excludes siblings. During a monthly staff meeting in August, this was put to a vote and majority were in favour of including siblings, and this would be revised accordingly.



### By Vincent Otieno

raised concern among stakeholders in Kenya. According to the United Nations Population Fund (UNFPA), nearly 378,400 adolescent girls in Kenya aged 10 to 19 years became pregnant between July 2016 and June 2017 alone. Of those pregnant, 28,932 were aged between 10 and 14 years, while 349,465 girls were between 15 to 19 years. Stakeholders have had to grapple with solutions including policy, in a bid to eradicate the vice. However, evidence to back the right approach has been limited or missing in a number of instances.

It is with that in mind that AFIDEP and the Carolina Population Center, at the University of North Carolina through funding from the Bill & Melinda Gates Foundation (BMGF) developed the Full Access, Full

"I have read the report produced by the Short-Term Technical Experts (STTEs) for the Joint Committee commissioned by the Parliament of Malawi to review the Interest Rate Capping Bill and I must say I was greatly impressed...I would like to thank the Parliamentary Budget Office, and I would also like to specially thank the Malawi Parliamentary Support Initiative (M-PSI) for coming in when we needed them the most."

> Mrs. Fiona Kalemba Clerk of the Parliament of Malawi

### By Salim A. Mapila

Over the years, the Parliament of Malawi has been riddled with several challenges that have hindered the institution's threefold mandate of legislation, oversight, and representation. One particular example is the insufficiency of parliamentary staff to support the institution's committees which are a key element in determining the quality of debate that occurs in the chamber. The Parliament of Malawi has a total of twenty Parliamentary Committees appointed to address topical issues, gather evidence, and draw reasoned

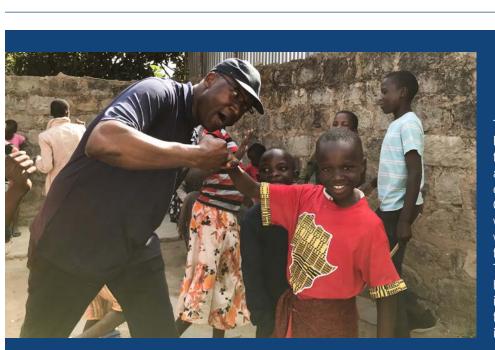


conclusions for consideration by parliamentarians when it comes to decision making.

However, against these twenty Parliamentary Committees, the Parliament of Malawi only has a handful of five Researchers working in the Research Section to support

the Institution's research and evidence needs. Such examples of inadequacies in technical personnel (and capacity) of parliamentary staff warrant the need for projects like the Malawi Parliamentary Support Initiative (M-PSI).

M-PSI is a two-year project



### The Corporate Social Responsibility **Initiative**

The idea behind Corporate Social Responsibility CSR is to contribute to societal goals of a philanthropic, activist, or charitable nature by engaging in volunteering practices. Consequently, the AFIDEP CSR Fund to support the needy in society was set up last year (2018) as our way to give back to society, with the first activity held in December, 2018. The Nairobi office visited a children's home in Kibera (one of the city's informal settlements) and donated food and drinks. In its formation, the initiative hoped that Management

would match funds raised for sustainability. The Fund Patron's thoughts are that the Fund should be more strategic and responsive – and less reactive in its efforts as part of the Institute's social responsibility. Ideally, the Fund should have scheduled support to a cause during the year perhaps, quarterly, as opposed to waiting to visit during the Christmas season only.

implemented by AFIDEP, supported by USAID/Malawi through a subgrant from Counterpart International (CPI). The overall goal of the project is to improve the capacity and performance of the Parliament of Malawi in carrying out its functions. Specifically, the project seeks to strengthen support systems and resources required to institutionalise a culture of evidence-informed budget analysis, financial scrutiny and policy making; to strengthen technical knowledge and skills of parliamentary

staff in budget analysis and financial scrutiny and evidence informed decision-making; and to provide informative and objective nonpartisan budget analyses and related research to support the legislative, oversight, and representative roles of Parliament.

A flagship activity of M-PSI was the placement of six Short-Term Technical Experts (STTEs) to enhance the technical capacity of the Parliament of Malawi in three key sections; the Research Section, Legal Section,

and the Parliamentary Budget Office (PBO). During the eight months that the STTEs served in the PBO, they produced high quality budget analyses for the institution and supported parliamentary committees (and individual parliamentarians) with their evidence requests. The work of the STTEs in the PBO received much acclaim from senior management in Parliament, prompting the institution to retain them as permanent staff.

AFIDEP has thus far trained over 90 parliamentary staff in the processes

of conducting legislative research, budget analysis, and bill drafting. Additionally, AFIDEP has developed three guidelines and manuals namely: i) Guidelines on Bill Drafting and Analysis, ii) Legislative Research Manual, and iii) Budget Analysis Manual. These three documents have been hailed by the Clerk of Parliament for their technical usefulness and strategic contribution to fulfilling the institution's mandate



### **Supporting African** parliaments towards separation of powers

By Martin Phiri

'Power, concentrated in a few hands, is dangerous'. This old adage seems to be a very fitting justification for the question of the doctrine of separation of powers as it pertains to the Parliament of Malawi. The understanding of this principle is that government is made up of three separate arms (the executive, the legislature and the judiciary). This has been difficult to implement, starting with the general view that the Head of State, who heads the executive and is Chief Executive of the country, is above the Heads of the other two arms. Yet the framers of the doctrine had in mind a situation where irrespective of the level of influence in state affairs, the powers need to be checked, through a built-in system of checks and balances.

In order to achieve this, the parliament of Malawi and the judiciary need the requisite capacity granted through legal, financial and

administrative avenues. The Malawi Parliament Enhancement Project (MPEP) was thus established in this regard. It has, as its outcomes, increased functionality of Malawi Parliament and increased operational efficiency of Malawi Parliament. These are aimed at building the capacity for parliament to play its rightful role in the governance of the country more effectively, without being subservient to another arm of government. It is aimed at creating awareness in the other arms of government to accord each other the space to operate without undue interference.

Under the first outcome, the period since the general elections in May, and a disputed outcome, has not been very conducive for conducting most planned project activities. As such, the project has focussed on preparatory works for hosting a conference on interdependence. In this regard, the project commissioned the production of a background paper and the building of consensus around the need for the conference as well as its hosting arrangements. A high-level meeting of technocrats was held, at which the need was agreed on and a mandate given to form a task force to oversee conference preparations.

Another notable effort was meeting with political party Secretaries General, Whips and Publicity

Secretaries to lobby them on the use of objective criteria for allocating MPs to Committees, as well as on the need to begin to give serious thought to political party financing. Indications are that a plea for the need to strengthen committees through consideration of the abilities of the MPs was heeded. The other good news is that the Political Parties Act passed in 2018 has placed a significant burden for accountability for party finances on Secretaries General, even stipulating custodial sentences as penalties for noncompliance.

There is also the need to reach out to the public with information on the work of Parliament, particularly the achievements of the 2014/19 parliament. In this regard, the project held a radio panel discussion on 3rd July 2019, with panellists ranging from former and serving MPs as well as some governance experts. As part of capacity building for the media on parliamentary reporting, two workshops were held in April and August targeting 27 journalists from 12 media houses. The workshops sought to provide basic, to more advanced knowledge about parliament and encourage all round coverage of parliamentary business.

With regard to legal reforms, the notable things are the draft committee

mandates, which have assisted to determine which committees to drop under the new parliament. Work has begun on the development of rules and guidelines for operationalising the Parliamentary Service Act. For this to be finalised, there is need for further consultations with parliamentary staff. The beauty of MPEP is that in as much as we are building the capacity of parliament, every day is an opportunity to learn.

The IAC member Hon Peter Oloo Aringo, former MP Keny inducting new cohort of MPs to MPEP - Lilongwe Malawi



### TILI LIMODZI

List of Kenyan and Malawian mental health service providers:

### We are here for you



### Kenya:

Amani Counselling Center website: https://www.sapta.or.ke/ email: frontdesk@sapta.or.ke Tel: +254724511709

Kenya Association of Professional Counsellors website: https://www.kapc.or.ke/ Tel: +254721296912, +254733761242

SAPTA Kenya email: https://www.amanicentre.org/ Tel: +254722 626 590, +25420-6002672/3/4

Harm Reduction Awareness Counselling and Testing Services

Tel: +265999317529

Prime Health

Location: Area 47, sector 5

Tel: +265888358307, +2659995482905

Pumzi Counselling Location: Area 18 Tel: +265999482905

### Promoting food safety through water, sanitation and hygiene

Even though fish landing sites and fish markets are considered priority areas of food safety in most of the country policies, the unique sanitation and hygiene needs of fishing communities are not prioritised in the policies.



### By Nurudeen Alhassan, Timothy Chikoti and Hleziwe Hara

The Great African Lakes region has some of the largest and ecologically diverse freshwater systems in the world. The major lakes in the region include Lake Victoria, Lake Tanganyika and Lake Malawi. These lakes are major sources of fish and other aquatic products that are vital for food and income generation. Despite the contribution of the lakes to the economies of countries bordering them, fishing communities along them lack basic water, sanitation and hygiene (WASH) services. AFIDEP was engaged by the Centre for Water, Sanitation, Health and Appropriate Technology Development (WASHTED) to review the policy and regulatory frameworks for sanitation, hygiene and safety in fisheries in five countries in the Great African Lakes Region—Malawi, Kenya, Tanzania, Uganda and Zambia.

The study found that all five countries had regulations and policies for promoting sanitation and hygiene. In a few instances such as in Uganda and Malawi, the sanitation policy and the public health act respectively have elapsed. Nevertheless, none of the countries had a comprehensive policy on food safety including safety in fisheries. Only Zambia had a food safety bill before parliament for approval. The existing regulations that addressed food safety concerns in all the countries were those on food standards and public health. However, these regulations were not

comprehensive enough to address food safety issues in the entire food production, supply and consumption

The study also revealed that responsibility for the implementation of policies and regulations on sanitation, hygiene and food safety in sites and fish markets are considered the five countries is vested in several priority areas of food safety in most institutions, with little coordination and of the country policies, the unique collaboration among them. In some sanitation and hygiene needs of of the countries, the ministry of health fishing communities are not prioritised is the mainline ministry overseeing the implementation of sanitation and hygiene policies while in others that responsibility is vested in the ministry in charge of water, sanitation and environment. In general, there is overlap and duplication of functions among various ministries and agencies in the implementation of

sanitation, hygiene and food safety policies and regulations.

With regards to the target population, the study showed that policies in all the five countries target all segments of society and all manner of food products. Even though fish landing in the policies. In addition, food safety and quality standards in the fisheries sector are mainly enforced on fishers and fish products exported to European and other developed markets and not fish meant for local consumption.

**AFIDEP TIMES** 

### By Salim A.Mapila

Over the past years, Evidence-Informed Decision-Making (EIDM) and policy-driven research has gained traction in advancing development efforts globally, and more recently in Africa. The need to make the best use of available resources, combined with the progress in addressing some of the continent's developmental challenges, have fuelled the growing demand to justify decision-making at every level. It is thus not surprising to find initiatives like the Evidence Leaders in Africa (ELA) place emphasis on the need to expand leadership for the use of evidence in policy formulation and implementation by African Governments.

The ELA project, launched in 2019, is a two-year project jointly implemented by the African Institute for Development Policy (AFIDEP) and the African Academy of Sciences (AAS). As one of Africa's leading institutions in the push for evidence use in decision-making, AFIDEP works with governments and other evidence actors to institutionalize a culture of EIDM across Africa. Likewise, AAS is a Pan-African organization working to transform lives through science, technology and innovation.

ELA seeks to empower distinguished AAS scholars to proactively engage governments to use science and innovation and champion the institutionalization of EIDM in East and West Africa. Accordingly, the project aims at achieving three key outcomes: i) Increased number of academic leaders championing



EIDM in Africa, ii) Increased number of government agencies in East and West Africa taking specific actions to institutionalize EIDM, and iii) Expanded evidence and space for EIDM learning in Africa

Evidence in various forms – whether it is primary research, evidence mapping, or evidence synthesis products – needs to be perceived as useful in order to be used by decision makers. As such, ELA has over the past year undertaken several activities to highlight this need and empower EIDM champions to respond to it appropriately.

For instance, the project held a workshop in May 2019 on leadership development and knowledge sharing for AAS's accomplished scholars to come up with pathways to entrench an EIDM culture in government agencies. The project has also established a Seed Grant for AAS fellows and grantees to implement initiatives that institutionalize EIDM in government agencies in their

Going forward, ELA plans to hold a capacity development training in EIDM targeting early and mid-career researchers within the AAS networks

in East and West Africa. Additionally the project shall also introduce an EIDM leadership Award within the AAS Awards Scheme - the Olusegun Obasanjo Prize for Scientific Discovery and/or Technological Innovation – which awards AAS scholars for excellence every two years. Ultimately, the project will host a lesson-sharing International Conference for AAS fellows and researchers in East and West Africa to solidify its efforts and commitment towards "...expanding leadership for the use of evidence in policy formulation and implementation by African Governments"



Successful development efforts in low- and middle-income countries depend on sound policies and programmes, informed by the latest research. However, researchers and policymakers often operate independent of each another. This gap is exemplified in the words of Hon Juliana Lunguzi, former MP for Dedza District, Malawi, who purports that "the difference exists in the fact that researchers talk research while politicians talk politics". This suggests that not only is there no collaboration between researchers and policymakers, but that they are not even speaking the same language. Because policymakers are mostly driven by political interests, the onus is often on researchers to convince politicians

evidence to impact communities. At a time when high value is placed on evidence-informed policies and programmes, it is important to ensure that researchers can properly communicate their research to

To address this need, the Population Reference Bureau (PRB) developed the Policy Communication Fellows Program, which has been running for over 20 years. The program has three components, including Online Coursework, the Summer Institute (training) and Policy Communication assignments. This year's training, in collaboration with AFIDEP, with funding from the U.S. Agency for International Development (USAID), was held in Lilongwe, Malawi between 6th and 12th June 2019.

The yearlong fellowship programme, tailored for PhD students, seeks to train and empower the next generation of leaders shaping policy in their respective countries. The overall program goals include: understanding the research-topolicy process, learning how to communicate research to policy audiences in a way that encourages action and to improve participants' communication skills.

After a competitive application process, 12 early career researchers from Uganda, Kenya, Haiti, Pakistan, Bangladesh, India, Nigeria, Malawi and Ethiopia were selected to participate in the program. Through the collaboration with AFIDEP, the program received applications from Malawi for the first time this year. The motivation behind the training is that, as much as research has implications for policy development, without proper communication between the research community and policy audiences, the significance of research findings may be lost. This invigorating training involved plenary discussions, small working groups, individual exercises, role plays, and conversations with policymakers and leading local researchers working with policymakers. This gave the fellows first-hand experience on why good research goes beyond just publishing a paper, but writing it in a way that prompts readers to action.

### What needs to happen

Fellows were able to reflect deeper on why they are doing their

research, and whether they have communicated the message well enough to prompt action from the targeted audience. Expressing her sentiments towards this development, Olutoyin Opeyemi a PhD candidate at the Obafemi Awolowo University Ile Ife Nigeria said, "we have the expertise to conduct research but no one really teaches you how to effectively communicate findings from that research". Interactions with the researchers revealed the need for conscious efforts to reach out to policymakers and relay a clear message if they are to make a difference in people's lives.

One of the major reasons why research does not get to inform policy and programme decisions is the weak or often lacking relationship and connection between policymakers and researchers. The relationship between researchers and policymakers is best described in the title "Researchers Are From Mars; Policymakers Are From Venus" by Feldman et al. That is to say, there is poor coordination between the two agencies. This Fellows programme therefore pushes to ensure that researchers and policymakers are coexisting within the same 'planet'. To advance the already existing work, PRB and AFIDEP recently signed a memorandum of understanding for strategic partnership, for two years. This partnership also aims to collaborate in the development of joint proposals.

### Researchers' active promotion of knowledge translation: **Challenges and solutions**



### By Violet Murunga

The Developing Excellence in Learning, Training and Science in Africa (DELTAS) project is a Wellcome Trust funded research capacity strengthening programme involving a network of 11 research consortia from across East, West and South Africa. AFIDEP is a partner on the project supporting the training of one PhD student by September 2020. The information from the PhD research will help the DELTAS research network to learn whether researchers are interested in and are actively communicating and disseminating their research

recommendations to people and organisations that can put them into practice. It will also identify the challenges they face and suggest solutions.

Preliminary results reveal that despite a strong focus of the programme to reach out to communities, policymakers and industry, two main widely documented bottlenecks to the DELTAS research network efforts to actively communicate and disseminate their research recommendations persist. One is lack of institutional incentives and support for researchers to engage in

knowledge translation activities and the other is inadequate funding for knowledge translation even among donors supporting this work.

In addition, discovery scientists face an uphill battle to take their research from the 'bench to the bedside' due to policies that do not favour privatesector research and development. On the other hand, research findings demonstrate the value of allocating funding for knowledge translation and integration of modules focusing on policy analysis, communicating research and knowledge translation approaches within research training programmes.

A sizeable number of researchers in the network are beginning to think about their research impact beyond the traditional scientific publications and conferences. Through this programme, some young researchers are emerging as champions from the exposure and strong mentorship. However, such success stories can only be sustained if research institutions incorporate incentives for researchers engaging in knowledge translation activities, and funders and research ethics committees assess it in their research proposal assessments.



### **Anti-Sexual Harassment Policy and Trainings**

AFIDEP, as an employer, takes responsibility to ensure that at all times, the work environment is free from all forms of discrimination, bias, harassment and other unprofessional conduct. Management will ensure that staff members adhere to high standards of moral conduct at all times and that every staff member shall have the right to be treated with dignity and respect, free from abuse or harassment. Please refer to the AFIDEP Anti-Sexual Harassment Policy for more information.

Both AFIDEP (Kenya and Malawi) offices received anti-sexual harassment trainings in 2019 – the Malawi office on 6th May, and the Nairobi office on 20th May.



### By Rose Oronje

Among the major barriers hindering development progress in Africa, one can mention weak institutional and individual capacities as well as poor governance and frail accountability structures and processes. AFIDEP works to contribute towards the demolition of these major development barriers in various countries in Africa. In the last six months, we have made notable strides in these efforts in our work with parliaments and parliamentary networks, Ministries of Health, and researchers.

With a new parliament in place in Malawi following the May general elections, we focused our efforts to prepare and support the new leadership of parliament (i.e. Parliamentary Service Commission and Business Committee), committees, and MPs to effectively perform their functions of oversight, law-making, and representation.

Prior to the elections, we supported technical staff to prepare strategies and work plans for the incoming committees, ensuring that the new committees build on the successes of the previous committees. The support provided to the new parliament has been in the form of capacity and sensitization sessions for parliament's leadership, committees and MPs on key parliament reforms needed to enable improved performance of parliament's functions and budget analysis as well as legislative analysis.

In addition to our work with parliament, we have, in an innovative project, initiated work with the Ministries of Health in Kenya, Malawi and Uganda to strengthen institutional systems and structures for enabling use of research evidence in decision-making. A major activity of this initiative will be working with the ministries' Technical Working Groups to build capacity and support

sustained use or consideration of research and data in their deliberations. The Technical Working Groups are existing structures within the Ministries of Health that convene ministry officials and stakeholders to deliberate and provide recommendations on policy and programming for health sector service provision. Another intervention is to

Complementing our work with government agencies, we have also worked with researchers, specifically stimulating interest and building their capacity in better communication of

jointly work with training institutions

to incorporate training modules on

evidence-informed decision-making

in existing pre-service and in-service

training programmes for civil servants.

This will ensure that all civil servants

in these three countries have access

improve their skills in using research

to training programmes that will

and other evidence in decision-

their research and engagement with policy-makers. These efforts have been realized through innovative partnerships with the African Academy of Sciences, the Population Reference Bureau, and the Liverpool School of Tropical Medicine. Through these partnerships, we have worked with more than 60 researchers in the last six months to strengthen their knowledge and skills in research translation and policy engagement.

Beyond strengthening capacities for evidence use, we have also presented and discussed evidence in national and regional decision-making platforms in order to inform decisions made in these platforms. Among others, we presented and facilitated discussions of evidence on ending teenage pregnancies and early marriages, as well as harnessing the demographic dividend at the annual meeting of the Network of African Parliamentary Committees on Health (NEAPACOH) held in Uganda on October 30-31, 2019. The evidence and ensuing discussions informed the commitments that parliamentary committees made to implement in their countries in the coming year to tackle these development challenges

Looking into 2020, we will focus on documenting and sharing lessons from our work to inform future efforts aiming to improve decisionmaking, leadership, accountability and good governance. We will also focus on expanding our innovative work on strengthening institutional capacities for enabling evidenceinformed decision-making in government agencies. Designing creative projects that support other policy actors (including civil society, media, and citizens) in effective use or consideration of evidence in their work will also be an important priority

## AFIDEP on the move to accelerate the promise of ICPD25

By Bernard Onyango

AFIDEP is on the move. Almost a generation since the watershed International Conference on Population and Development (ICPD) in Cairo, Egypt in 1994, we find our work at the centre of the just concluded ICPD25 Nairobi Summit. In 1994, an ambitious agenda was agreed on by 179 states to deliver inclusive, equitable and sustainable development with priorities that included promoting equality, sexual and reproductive health and rights (SRHR), empowerment of women and education of girls, among others.

Though we have made incredible gains, 25 years later, too many people are still being left behind, and too many nations have not been able to fully reap the demographic dividend (DD) because young people and other groups still lack agency, education and access to critical health services.

Our work in 2019 on population and sustainable development, directly contributed to several of the ICPD25 concerns. We made strides towards supporting African governments to actively put in place strategies to capitalise on the potential of their young populations to accelerate sustainable development. We also contributed to strengthening the evidence base to achieve "zero unmet need for family planning" which is one of three key global commitments for ICPD25.

In particular, two separate yet related projects in Kenya and Botswana, that we have initiated this year, are a breakthrough in our efforts over several years to be able to provide concrete support to governments in the region, to implement their DD strategies. First, AFIDEP and the African Population and Health Research Centre (APHRC) had one of eight successful bids from 81 submissions to be funded by the William and Flora Hewlett Foundation to bolster the capacity, will and institutional tools and systems that

governments use to apply data and evidence to decision-making. Our 2-year project, funded to the tune of USD 800.000, intends to create a demographic dividend module within the existing but little used National Integrated Monitoring and Evaluation System (NIMES) to operationalise Kenya's Demographic Dividend Roadmap. Focusing on two counties, the project will pilot making the data systems work for decision-making to harness the demographic dividend. The project also has a strong learning component intended for scale-up to the other 45 counties after the two-year period. To ensure sustainability, we are collaborating with the Government of Kenya through the Monitoring and Evaluation Department (MED) who run the NIMES system and the National Council for Population and Development (NCPD)

In Botswana, after a prolonged period of negotiation, AFIDEP and Gaiasoft, have recently embarked on the inception period of a project to Mainstream the Demographic Dividend through a National Delivery System for Performance Monitoring and Accountability. The project intends to deliver a functional

DD Delivery System to enable implementation of Presidential and DD Priority Projects. The system will be suitable for extension to full Annual and Medium-term Development Plan data collection. Uniquely, this project had been requested by the Ministry for Economic Development (MFED) and will be fully funded by the Government of Botswana. Notably, it is the first time that we have received a significant funding commitment from a Government in the region to implement a project to meet their needs. It is also the first time we are partnering with a player from the private sector. Our implementation partner, Gaisoft, is a UK-incorporated company that develops software and solutions, including for performance management.

Bernard Onyango at the "What's Changed in Middle-Income Countries in Southern Africa?" dialogue in Namibia

**CELEBRATING 50 YEARS OF ENSURING** 

**RIGHTS AND CHOICES FOR ALL** 

During the year, we also continued to build the evidence base to inform programming aimed at expanding contraceptive method choice for youth in Kenya. This is through the Full Access Full Choice (FAFC) project that we are implementing in Kenya in partnership with the University of North Carolina Population Centre and funded by the Bill and Melinda Gates Foundation. As part of our efforts to bridge the

evidence gaps, we conducted a qualitative study on contraceptive method choice and use by youth in Nairobi, Migori and Mombasa counties. The results of this study as well as the analysis from our learning agenda which we project to conclude by the end of the year will be a significant contribution towards meeting the ICPD25 objective to reach zero unmet need for family planning information and services, and universal availability of quality, affordable and safe modern contraceptives. The work will also support our continued efforts towards lowering teenage pregnancies in Africa.

eccet

We believe through our activities in 2019, AFIDEP has in our own little way made significant strides towards meeting the goals of the ICPD Plan of Action and the related 2030 Sustainable Development Goals agenda that barely has a decade to be fulfilled.

of 20 percent of the national budget. The proposed 2019-2020 budget, present in September, has brought that percentage to 10.6. Regardless of whether the education budget falls below or surpasses the 20 percent mark, it has always been insufficient due to the actual size of the Malawi economy. Yet, it is only by making education a national priority that the economy can grow in a meaningful and equitable way.

AFIDEP's education strategy will have as its overall purpose the promotion of use of evidence in education policymaking in Africa in order to develop the requisite critical technical skills. AFIDEP will leverage its expertise in capacity strengthening, evidence synthesis and translation, technical assistance, and engagement with policymakers and other key stakeholders to support the alignment of global, regional and national education goals. AFIDEP will also support monitoring and evaluation of progress in the implementation of the aligned goals, with the Agenda 2063 vision as the broader aim.

### Africa's demographic transition, AFIDEP's education imperative

By Steve Sharra

No country can meaningfully benefit from a demographic transition to lower fertility if its youth are largely uneducated, unskilled, and underemployed. Investing in these aspects will provide the necessary push to transform the continent and achieve the vision of "an integrated, prosperous and peaceful Africa, driven by its own competent citizens and representing a dynamic force in the global arena." That vision is at the core of the continental blueprint widely known as Agenda 2063.

A 2016 report from the Africa Capacity Building Foundation (ACBF) observed that the "single biggest challenge to ownership of Africa's development agenda and management of its key development programs" was rooted in critical technical skills. The continent was facing serious shortages of critical technical skills and professionals needed to drive key initiatives. There was little evidence that governments were making critical technical skills a part of national development strategies, the ACBF report stated.

In order to overcome this challenge, the report recommended improving capacity in the continent's training institutions, and overhauling training and education systems. The report further recommended formation of consortia of top universities, research institutes and think tanks to drive the critical technical skills agenda. A demographic country case study helps put into context the education imperatives facing the continent in the drive towards Agenda 2063.

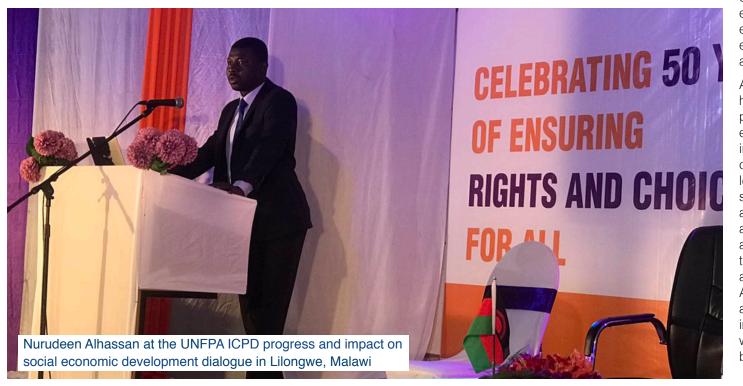
Numbers from Malawi's most recent population census, conducted in 2018, show 78 percent of the Malawian population being categorized as children and youth. Many of these youths are not in school. Four out of five young Malawians of secondary school age, 14-17, are out of school. Only 37 percent of the students who passed the 2019 primary school leaving



exam were selected to various public secondary schools, leaving out 63 percent. Of the country's 3.7 million young people aged 15-24, less than 50,000 are attending tertiary education, representing about 1.4 percent.

In view of the above education context on the continent, AFIDEP will, in Strategy 2024, expand its work to support countries in using robust evidence for education policymaking and the design and implementation

of interventions. AFIDEP will leverage its expertise in capacity strengthening, evidence synthesis and translation, data and policy analysis, and scenario modelling to engage policymakers and other key stakeholders to support the alignment of global, regional and national education goals. AFIDEP will also support monitoring and evaluation of progress in achievement of the SDGs Goal 4 and the African Union's Agenda 2063 continental strategy on education.



### The "Demographic Dividend" concept; Widely used but Misunderstood



### By Hleziwe Hara, Bernard Onyango, and Nyovani Madise

There are about 799 million people in Africa under the age of 25 years and this number is projected to increase to 1.26 billion by 2050. Like the rest of the world, Africa has been going from high birth and death rates, to low birth and death rates. In the majority of countries outside Africa, their population agestructures (or population pyramids) are experiencing or have already experienced a "youth bulge".

For the majority of African countries, the rate of fertility decline is slow such that there is still very high young dependency ratio of around 78 per every 100 working age people. The global average is 53 per 100 working age people. Simply put, most African countries' population pyramids still have the triangle shape with a large base of young children. This is be confused with a youth bulge.

Why is this important? The youth bulge is associated with a phenomenon called the "demographic dividend", which is a temporary economic boost that a country can get if the youth are skilled and productively engaged. The term, "demographic dividend," can be heard in the corridors of most African economic planning departments. Furthermore, many African leaders allude to the economic bonus that is being realized from their youthful populations. Sadly, this is not strictly

The East African Research Fund of the UK's Department for International Development provided AFIDEP with funding to explain the demographic

dividend and how it comes about to East African policymakers. AFIDEP's review of the literature and its own population projections in four East African countries (Kenya, Tanzania, Rwanda, and Uganda) made a number of suggestions to help African governments to understand the concept of the demographic

For countries to benefit from their youthful population, a number of things need to happen. Firstly, childhood mortality and most importantly fertility should decline sharply since if fertility does not decline or if it is declining slowly, the country will just continue to have larger and larger subsequent cohorts of births. The consequence is that

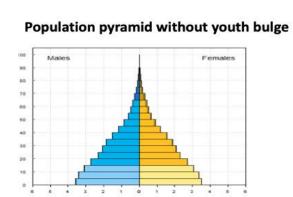
individuals who are of working ages will continue to support large numbers of dependent children; governments' budgets will mostly go to children's services and less on infrastructure and creating economic environment for growth. Secondly, the youth who are transitioning into economicallyproductive ages should be healthy, well-educated, and economically productive. Thirdly and finally, the demographic dividend is temporary, for surely the youth bulge will disappear over time, and lower fertility will mean fewer people joining the labour force. This means that during the period of the first demographic dividend, governments must promote a culture of savings and investment for financial security in older ages, improve governance to attract

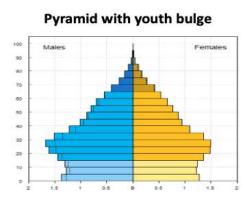
investors, and countries must invest in mechanisms for higher labour productivity

AFIDEP's analysis of the prospects of harnessing demographic dividends in the four East African countries showed that Rwanda, and possibly Kenya, if they continued with their fertility transition and in investments in youth's education and skills development, may begin to reap a demographic dividend by 2050. Significantly, the demand for primary and secondary school places is expected to increase significantly as the population of young people continues to increase. Tanzania and Uganda can expect a tripling of the demand for school places between 2015 and 2065.

### Defining the "youth bulge"

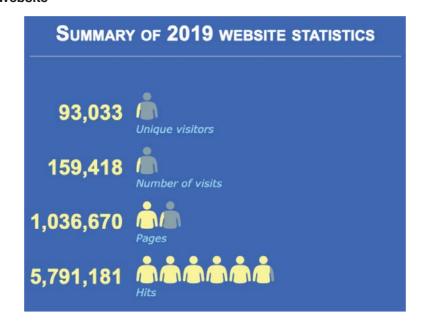
- A "youth bulge" is a temporary demographic phenomenon which occurs when childhood mortality declines and fertility falls rapidly so that the previous cohort of births is larger than subsequent cohorts.
- As the large cohorts of births move into the working ages (15-64 years), we get a bulge in the population pyramid.

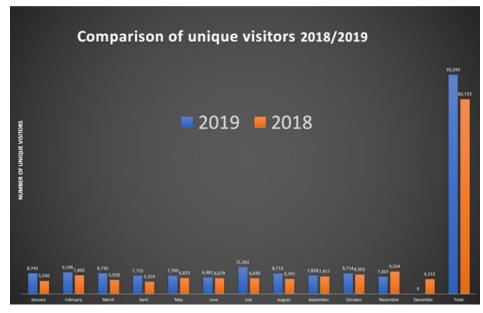




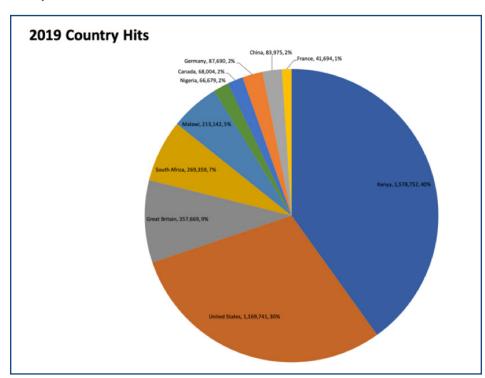
### **AFIDEP 2019 Communications Footprint**







Top 10 Countries AFIDEP was most searched



### Popular keywords used on search engines



### **Number of Publications - 22**

- 9 journal articles published
- 2 policy briefs
- 1 fact sheet
- 3 research briefs
- 1 research report

Annual report, Development Perspectives, Newsletter, Bi-annual enews, Strategic plan

### **Success Factors/Enablers:**

- Institutional leadership buy-in and support
- Communications budget and other resources
- · Technical team of skilled and willing staff
- Talented and Hardworking Communications team
- Media engagement: Journalist dinner in Malawi; Media training via MPEP; Direct contact with editors; journalist training in Kenya

### **Publications Downloads on the website**

Title	Downloads	Date of upload
Top 10 downloads (2019 non-		
technical publications)		
Annual Report 2018	574	2019/August
A Call to Action: Sepsis is Africa's		J
Neglected Silent Killer	239	2019/May
Information Sheet on Lung Health &		
TB in Africa	179	2019/May
African Development Perspectives	170	2010/May
2019	162	2019/ November
Health Challenges Youth Face In	102	Z013/ NOVEITIBEI
Rwanda	103	2019/April
January-June Newsletter 2019	98	2019/ November
AFIDEP Brochure - 2019	91	2019/April
Call To Action On Teenage		
Pregnancy In Kenya	77	2019/July
Education Challenges Youth Face In		
Rwanda	58	2019/April
July - December 2018 Newsletter	54	2019/April

Kenya Health Policy 2014-2030	43687	2015/May
Malawi Growth Development		001001
Strategy (MGDS III)	6157	2018/March
Kenya NCPD Sessional Paper		
Population Policy For National		
Development 2012	5932	2015/May
Malawi Ministry of Health Guidelines		
for Evidence Use in Policy-Making	4821	2016/March
Improving Access To Mental Health		
Services In Malawi	4543	2016/July
301 11300 111 111 and 111		

### Improving nutritional status of young children in urban poor settings There are very few studies which have looked at nutritional interventions for preventing or correcting stunting in underfive children living in slums and poor urban settings. The handful of research shows that nutritional interventions which work in rural areas do not appear to be effective in urban poor settings. This was the conclusion of a systematic review by our staff reporter, Nyovani Madise, who worked

for three years searching for evidence in partnership with

Loughborough University in the UK, Cochrane, and AXA

### By Nyovani Madise

At least 1 billion people are living in urban slums. More than 90% of these are in low and middle-income nations and the residents of these slums are usually living with food insecurity and inadequate sanitation. A consequence of this is stunting, a status where children are short for their age. Stunting is associated with greater susceptibility to infection, cognitive and behavioural deficits, and lower adult work performance and earnings.

In 2008, a Lancet review series highlighted many studies with clear evidence of addressing the immediate causes of stunting such as diarrhoea, intrauterine growth restriction, breastfeeding behaviours, and previous malnutrition. However, until the 2019 Cochrane review,

nutritional interventions to improve infant and young children's growth in urban informal settlements had not been comprehensively or systematically assessed.

Research Fund

The systematic review used the Cochrane Reviews' methodology to select studies for inclusion in the review and to grade the quality of evidence. There were no eligible studies in Africa, the few available studies were conducted in Asia and Latin America. Only 15 out of more than 100 hundred studies were selected, covering 9,261 underfive children and 3,664 pregnant

women. Of these, only three studies were graded as "moderate", for the certainty of the evidence. 73% of children included were less than 1 year old. The interventions included use of food supplements for infants, micronutrient supplementation for infants, and promotion of improved maternal nutrition. Less than half of the studies adapted the interventions

The findings of the systematic review

to the urban poor context.

 None of the studies reviewed found any evidence that the interventions improved stunting

among children.

- Only two studies showed that interventions targeting pregnant women have the potential to improve infants' birth weight.
- Very few studies had been conducted on this topic in Africa, and none were of sufficiently rigorous methodology to be included in a Cochrane review

The conclusion by the authors is that there is need for research on effective approaches to tackling malnutrition in urban slums. In addition, the authors emphasised that rural approaches cannot be easily transferred to urban contexts so there is need to rethink the way we address childhood stunting in the urban poor environment.



### By Libby Duckett and Victory

On 30 October 2019, the Malawi Government together with development partners and stakeholders converged at the Bingu International Conference Centre (BICC) in Lilongwe Malawi for the National Symposium on Population and Development, in preparation for the International Conference on Population and Development (ICPD) Nairobi Summit on 12-14 November 2019. The theme of the symposium was "ICPD@25: Accelerating Malawi's she cited improved maternal Promise" to review Malawi's progress so far and recommend national commitments in advancing the global commitments going forward.

AFIDEP facilitated the event with Prof. Nyovani Madise presenting on the 'Status of ICPD Programme

of Action in Malawi'. She noted that though the country had done well in the adoption of contraceptive use, with 58% of Malawian women using modern methods of contraception in 2016 up from 7% in 1992, there is still room for improvement as only 32% of unmarried adolescents aged 15-19 years were using modern methods of contraception in 2016 up from 17% in

In recommending areas where stakeholders need to intensify efforts to 'accelerate Malawi's promise', health, reduction in child marriages, reduction in early childbearing and quality education as the vital elements.

"Primary education is not enough for meaningful empowerment of girls and women", she said.

Also in attendance were Hon. Dr Ben Phiri, MP—Minister of Local Government and Rural Development (Guest of Honour), Dr Thomas Munthali—Director General, National Planning Commission, Won Young Hong—UNFPA, Country Representative and Littleton Tazewell-USAID, Mission Director

Dr Thomas Munthali presented the keynote address on the 'Integration of population dynamics into national development and harnessing the youth bulge', where he spoke on the development of a successor to vision 2020; National transformation 2063, with a wealth creation agenda, 'from poverty reduction to spearheading wealth creation for all'. He asserted that there is need to have a more positive mindset in tackling the key strategies for creating wealth. He cited the two key messages in the wealth creation agenda as harnessing the existing demographic dividend and providing for a quality population looking into the future, specifically access to education and family planning services. "It is possible in this country. It is possible to be selfreliant", he said.

In preparing for the Symposium, AFIDEP strived to synthesise the evidence and highlight the "unfinished agenda" where efforts should be intensified. AFIDEP's influence is apparent in many key commitments, notably those targeting maternal mortality, the expansion of education, the elimination of child marriage and the provision of youthfriendly SRH services.

In this connection, the Government of Malawi has made the following commitments:-

- Malawi commits to continue to lower the maternal mortality ratio to 110 per 100,000 live births by
- Malawi commits to include 30% representation of youth in decision making bodies
- Malawi commits to providing 12 years of free quality education for every child.
- Malawi will end child marriage by
- Malawi commits to ensuring all humanitarian responses incorporate sexual and reproductive health and rights.
- Malawi commits to achieve 100% of the service points delivering sexual and reproductive health and rights services that are youth friendly.
- Malawi commits to full digitalization of population data collection systems by 2030.
- Malawi commits to reduce unmet needs for all women to below 11% by 2030

### **Partnerships**

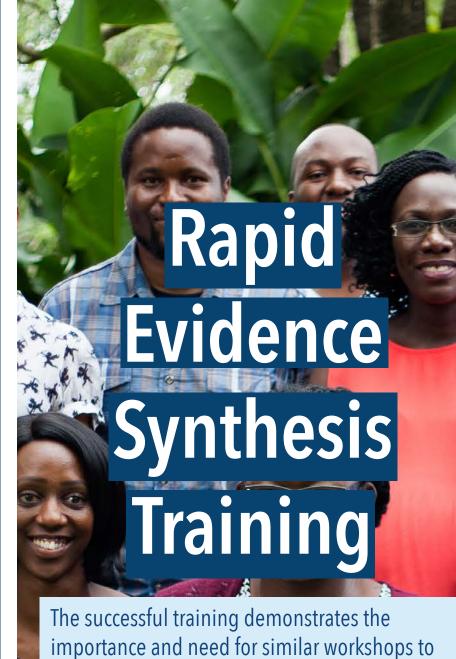


### By Joyce Mbiti

In 2019 AFIDEP is honored to have worked with a host of the William and Flora Hewlett Advised Fund, the Bill and Melinda Gates Foundation, United Nations Population Fund (UNFPA), United States Agency for International Development / University of North Carolina / Population Reference Bureau / Global Health Corps Fellows, the Norwegian Ministry of Foreign Affairs/Norwegian Embassy Malawi, Wellcome Trust, World Health Organisation (WHO), United Kingdom (UK) Department of International Development (DFID), National Institute of Health Research, UK Research and Innovation (UKRI) and the Government of Botswana.

AFIDEP is a friend and strategic partner to many. The following partners have been a key cog in the Institute's project implementation, proposal development and outreach of work and impact. To the Liverpool School of Tropical Medicine, Population Reference Bureau (PRB), College of Medicine Malawi, Kenya Institute for Public Policy Research and Analysis (KIPPRA), Kenya Medical Research Institute (KEMRI), Loughborough University, Wits University, London School of Economics, Africa Academy of Science, Centre for Water Sanitation Health, and Appropriate Technology development WASHTED), African Population & Health Research Centre (APHRC), the National Council for Population and Development (NCPD) Kenya, the ministries of health (Kenya and Malawi), the Malawi National Planning Committee, the Minstry of Planning / Monitoring and Evaluation Department (Kenya), the parliaments of Malawi and Kenya, Africa Medical and Research Foundation (AMREF) and many others – AFIDEP thanks

These partnerships are a testament to AFIDEP's reputation as a thought leader and trusted partner and the Institute looks forward to deepening these engagements in 2020 and beyond.



for knowledge translation. 等語的語》從認為

maximise individual and institutional capacities

### By Emma Heneine

From 11-18 March 2019, AFIDEP's technical staff came together in Lilongwe for rapid evidence synthesis training facilitated by the Centre for Rapid Evidence Synthesis (ACRES) in Makerere University.

The goal of the training was to strengthen staffs' knowledge translation through learning a systematic way of developing rapid evidence syntheses. To ensure practical application of the skills acquired, staff syntheses on key topics: (1) M&E for youth empowerment projects in Kenya; (2) improving functionality of Malawi Parliament; (3) implementation of Universal Health Coverage in Kenya; (4) expanding contraceptive methods choice in Nairobi; (5) implementation of comprehensive sex education in Malawi; and (6) implementation capacity of the Malawi National Education Sector Plan.

Throughout the week, the trainees learned the importance of rapid response services in

promoting evidence-informed decision-making (EIDM) and the literature it is grounded in. Participants practised the different steps of rapid evidence syntheses: analysing a policy problem and its causes, developing a corresponding research question, appraising research through systematic reviews, evaluating the quality of the evidence, identifying policy options for solutions and packaging the evidence.

According to the evaluation report of the training, "staff gained a good understanding of knowledge translation but did fully understand the application of it." The evaluation recommends more capacity building for technical staff who are directly involved in the project to fully understand the application of evidenceinformed policy-making (EIPM) and different strategies in the knowledge translation framework. The workshop has revealed the need for more training to maximise individual and institutional capacities for knowledge translation.

### **Team building:** Zumba

Exercise is good, and the benefits of physical activity cannot be ignored

By Flora Elvira Okidia

When you think of something hat could threaten your life, you probably don't think about your chair at work huh? But according to many researchers, it's one of the biggest potential threats to your health. How you ask, let me

n the 21st century, many employees lead sedentary lives, a lifestyle that is becoming a significant public health issue. Sedentary lifestyles appear to be ncreasingly widespread in many nations despite being linked to a range of chronic health conditions You must have heard people say, 'Sitting is the new smoking'.

This is one of the motivating factors behind organizing a Zumba -Cardio workout session at a local gym in Nairobi, a time when all staff were engaged in a two hour work-out session at the local gym This was not only a time to engage in physical activity but also an opportunity for staff to interact and bond in a setting outside the office At AFIDEP, all members of staff receive membership to the gym as an employee benefit and are encouraged to use the facility as a means of promoting their health and well-being

Not only does physical activity promote health and wellness, it also works as preventative medicine and increases productivity in the workplace. Additionally, the act of exercising regularly has many health benefits such as help in improving sleep and lowering stress levels. It also help with weight management and reduce the risk of cardio vascular diseases A number of studies have shown that exercise can boost mood and help to help alleviate anxiety. This can be attributed to the release of endorphins otherwise known as 'feel good hormones'. Exercise is good, and the benefits of physical activity cannot be ignored.



### **Finance Report**

### i. Summary of Revenue

The 2019 approved budget had a revenue income target of US\$ 4,137,634 for both contracted and committed and expected Income as follows;

Income Category	2019 Approved Budget (\$)
Contracted Income	3,086,255
Committed Income	30,000
Expected Income	1,021,237
Total Income	4,137,492

By end of 31st August, 2019 the contracted income was \$3,317,689 representing 80 % of the projected revenue for the year.

The total funds received in the period under review (1st January to 31st August, 2019) was \$2,475,508 (Accrued \$12,620, Deferred \$720,678 & Income received \$1,767,450) which represents 75% of the total funds expected to date.

### ii.Expenses report

The Institute's expenditure as at end of August was US\$ 691,186 against income of \$2,475,508 which is 28% underspent. We are projecting that the expenses will increase in the fourth quarter due to the intensive programme work that will take place in the last quarter.

In the remaining 4 months, we anticipate the program activities to increase and the projected expenditure at year end will be \$3,506,780 against projected income of \$4,125,623 representing 85% underspending.



Income Category	Approved Budget (\$)	Year to date Planned Budget as at 31st August,2019 (\$)	Income Received as at 31st August,2019 (\$)	Year to date expenditure as at 31st August,2019 (\$)	% variance ( YTD income Vs YTD expenditure)
Contracted Income	3,086,255	3,317,689	2,475,808	691,186	28%
Committed Income	30,000	0	0	0	100%
Expected Income (to be raised)	1,021,237	0	0	0	100%
Total Income	4,137,492	3,317,689	2,475,808	691,186	28%

### **Staff News**



### lew Staff

We welcomed Richard Cheburet Chelagat, Steve Sharra PH.D., HFW, Paul Kawale MPH, PH.D, Kevin Rua Jefua, Derrick Ssewanyana, Edward Mwamadi, Ann Waithaka, Anastasia Njuguna, Beryl Owuor, Hannah Mwaniki, Chikondi Kasamba, Lekereni Mbewe, Levi Kalitsilo, and Ronald Maniomo to the AFIDEP team in 2019.

Diana Warira, Eve Kasambara, Edward Njenga, and Timothy Chikoti have moved on to pursue other ventures. We wish them the best.

AFIDEP congratulates the following on their bundles of joy:

Brenda Nyambura welcomed baby Zani in February 2019.

Elizabeth Mutinda welcomed baby Pendo in July 2019.

Carol Mukiira welcomed baby Tarmaj in July 2019.

AFIDEP congratulates the following on their wedding:

Chikondi Kasamba married in August 2019. Edward Mwamadi married in October 2019.

### **2019 Media Appearances**

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- All Africa [Re-post] Ghana: Teach Culturally Appropriate Sexual Education in Schools – Population experts (online news) - quotes Nyovani Madise, November 20, 2019 https://allafrica.com/ stories/201911200502.html
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- Daily Times (Malawi) Violence pushes 2,000 out of school - quotes Steve Sharra, November 18, 2019 https://times. mw/violence-pushes-2000-out-of-school/
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- DW News (Germany) DW News Africa with Christine Mhundwa (television)
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- The Nation (Malawi) Accelerating Africa's promise in SRHR (newspaper) - opinion piece by Nyovani Madise, November 11, 2019
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- 12. Kenya News Alerts [Repost] Teen pregnancies still a major challenge-opinion piece by Bernard Onyango and Elizabeth Kahurani, November 5, 2019 https://kenya-news-alerts.com/teen-pregnancies-still-a-major-challenge/
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### **Crossword Puzzle**

# Complete the crossword puzzle below

### **Across**

- Factual basis
- **4.** A potential bonus from population structure change 6. Wellness for all
- 8. Considered approach
- 9. How to make better choices the AFIDEP way! 10. A fancy word for an institution that supports skills and talent

### Sudoku

	4	7		9		8		2
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5		9	2		3			4
	9	4	7	1	5			6
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7	5	1		3	2	9		8
				6		1	9	7
	6				7	4		3
	7					6		5

### **Answers:**

AT3V3T	.01
EIDW	.6
Policy	.8
Employment	٠.
Universal Health	.6
Допұр	.6
ПП	.4

Education

Evidence

**SDG** 

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What is AMR?





Down

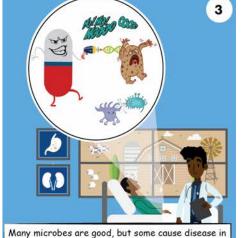
Schooling

7. Occupation

1. Global targets for 2030

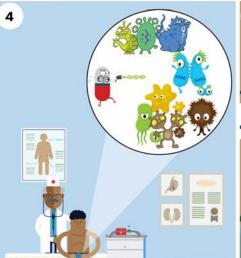
**5.** The future is in their hands

Microbes exist everywhere in the world, including in humans, animals, and the environment. Humans, inimals, and the environment interact with each other, and microbes spread between them. Tizilombo tosaoneka ndi maso timapezeka paliponse kuphatikiza munthu, munyama komanso :hilengwedwe. Ndipo tizilomboti timatha kufalikila m'njira zosiyanasiyana.



iumans and animals. To fight disease caused by icrobes, we use medicines called antibiotics Tizilombo tambari ndi tabwino, koma tina

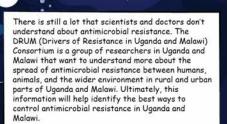
imahweretsa matenda kwa anthu kamansa zinyan Pofuna kuthana ndi matenda omwe amabwera ndi izilombo timeneti timagwiritsa ntchito mankhwal tchedwa antibayotikisi (antibiotics).



Antibiotics kill the microbes most of the time, but over time, some microbes become resistant to these medicines - this is antimicrobial resistance. Nthawi zambiri ma antibiotics amanha tizilamba timeneti koma tizilombe tina sitifa ndi mankhwala



This can result in untreatable illness in humans and animals, as common antibiotics and other antimicrobials become ineffective against resistant microbes. Although scientists do not know how it effects the Zimenezi zitha kubweretsa matenda osachilitsika kwa anthu komanso zinyama. Izi zimachitika pamene mankhwala asiya kugwira ntchito pa tizilombo timeneti. Tizilombo tokana mankhwalati timathanso kufarikira ku chilengedwe, madzi komanso nthaka. Akadaulo a kafukufuku sanamvetsetsebe kuti tizilombo tokana



Akadaulo aza sayansi (science) ndi aza umoyo etsetsabe za tizilombo tokana mankhwala. DRUM ndi gulu la akadaulo a akafukufuku aku Malaw ndi Uganda amene afuna amvetsetse zambiri za nmene tizilamba takana mankhwalati nakati na anthi iyama komanso chilengwedwe m'mdera akutauni ndi akumudzi ku Ugunda ndi ku Malawi. Kafukufuku ameneyu athandiza kupeza njira zabwina zothanirana ndi tizilombo tokana mankh



### **Events 2019**

- 1. Kenya inaugural symposium for think tanks & government -AFIDEP moderated a session on demand for evidence at the different stages of the public policy process. 27 November,
- 2. Walk to commemorate Antibiotic Awareness Week Bring awareness to the general public on the dangers of the misuse and overuse of antibiotics: 20 November, Lilongwe, Malawi
- 3. Press briefing event To increase media knowledge on antibiotic resistance and its effects as a means of increasing public awareness: 18 November - at the Public Health Institute of Malawi (PHIM), Lilongwe, Malawi
- 4. 8th African Population Conference (APC):18-22 November, Kampala Uganda
- 5. International Conference Population and Development (ICPD) 25 Summit - 12-14 November, Nairobi, Kenya
- 6. Regional Policy Dialogue on ICPD25 African perspectives on emergent imperatives for the population and development agenda: 11 November, Nairobi, Kenya
- 7. 23rd Research Dissemination Conference Enablers of and barriers to the development and implementation of antibacterial resistance control policy in Malawi: Preliminary findings: 8 November, Malawi
- 8. KfW (Kreditanstalt Für Wiederaufbau) German Development Bank lunch-event - 'Africa's Demographic challenge' AFIDEP on panel: 5 November, Berlin, Germany
- 9. 11th Network of African Parliamentary Committees of Health (NEAPACOH) meeting: 30-31 October - Munyonyo Uganda
- 10. National Symposium on Population and Development -AFIDEP facilitated the symposium in informing Malawi's ICPD commitments ahead of the Nairobi Summit: 30th October, Lilongwe, Malawi
- 11. What Works Global Summit (WWGS 2019):16-18 October, Mexico
- 12. CORE Group regional conference Global health practitioners conference: 14-16 October, Nairobi Kenya
- 13. Heightening Institutional Capacity for Government Use of Health Research (HIGH-Res) meeting - An inception meeting by AFIDEP and partners: 10-12 October, Nairobi, Kenya
- 14. EvIDeNt Network meeting Improve the health and economic status of Malawi by mainstreaming the use of evidence about health policy and practice: 1 October - Malawi
- 15. 3rd International Advisory Committee (IAC) meeting- MPEP initiative: 23-24 September - Lilongwe, Malawi
- 16. 11th European Conference on Tropical Medicine and International Health - presentation on demographic trends that might influence global malaria eradication 16-20 September, Liverpool UK
- 17. A pre-ICPD event: "What's Changed in Middle-Income Countries in Southern Africa?" - AFIDEP on panel: 11 September, Namibia
- 18. 16th International Inter-Ministerial Conference on Population and Development - AFIDEP keynote on "South-South Cooperation for Harnessing Demographic Dividend for Achieving the PD Programme of Action (POA) and the 2030 Development Goals 2030": 4 September, Tunis, Tunisia
- 19. Kenya Correspondents Association (KCA) National Media Conference - Media and the Challenges of Reporting Devolution: 3-4 September, Nairobi Kenya
- 20. Launch of Ndizotheka Eminent Speaker Series Achieving wealth creation for all agendas in Malawi: 21 August, Lilongwe, Malawi
- 21. Launch of ICPD progress and impact on social economic development: 15 August, Lilongwe, Malawi
- 22. Journalist training workshop Training by AFIDEP and Parliament of Malawi to improve the quality of media coverage of parliament: 10 August, Salima Malawi
- 23. International youth day Commemorating inter International youth day: 9 August, Nairobi Kenya
- 24. Launch of the (PC-IEDM) Strategic Plan The Parliamentary Caucus on Evidence-informed Oversight and Decision-Making

- (PC-EIDM's) second strategic plan: 9 August, Nairobi, Kenya
- 25. Annual Media Summit and training Training on census reporting and the annual journalism gala awards: 7-9 August, Nairobi,
- 26. Regional validation of evidence-based policy-making guidelines for West African - Guidelines for evidence use for health sector: 25-25 July - Dakar, Senegal
- 27. DELTAS Africa Scientific Conference Annual meeting and launching the Evidence Leaders in Africa project: 15-17 July
- 28. World population Day ICPD25: Accelerating the promise. 11 July, Makueni, Kenya
- 29. International Union for the Scientific Study of Population (IUSSP): 27-29 June, Michigan, United States.
- 30. 9th Eastern Africa Reproductive Health Network Coordination meeting - Implementation of the EARHN Strategic Plan and the interface with the ICPD25 agenda: 24-25 June, Nairobi Kenya
- 31. Write-shop Brainstorm and develop one key objective and an output for a one-year action plan for the "StepUP the Fight on Teenage Pregnancy campaign: 24-25th June, Nairobi, Kenya
- 32. IMPALA Policy Communications workshop Packaging Evidence and Monitoring and Evaluation for Policy Influence: 13-14 June, Dar es Salaam, Tanzania
- 33. African Research Collaboration on Sepsis (ARCS) initiative meeting - sepsis in Malawi, Gabon and Uganda and the need to highlight sepsis as a policy issue: 14-16 June, Dar es Salaam,
- 34. PRB 2019-2020 Summer Institute Workshop bridging the gap between the research community and policy audiences through effective communication: 6-12 June, Lilongwe, Malawi
- 35. Orientation of newly elected Members of Parliament Malawi Members of Parliament: 10 June, Lilongwe, Malawi
- 36. Evidence Leaders in Africa (ELA) workshop Convened to increase capacity of scholars and scientists to drive evidence uptake in government decision-making: 22- 24 May, Nairobi,
- 37. Policy Dialogue on teenage pregnancy FIDEP and UNFPA event on youth sexual and reproductive health and ending teenage pregnancy in Kenya: 16 May, Nairobi, Kenya
- 38. Convention on innovative approaches to research evidence uptake - and use in Africa Towards a Pan-African Transformation: Innovative Approaches to Evidence Uptake & Use in Africa: 2-3 May, Nairobi, Kenya
- 39. Population Association of America (PAA) 2019 Annual Meeting - AFIDEP, a co-authored poster presentation: One Size Fits All a Typology of African Countries to Guide Investments for the Demographic Dividend: April 12, Austin, Texas
- 40. Addressing child marriage in Malawi Learning event hosted by the Ministry of Gender, Children, Disability and Social Welfare: 21 March 2019 - Malawi
- 41. The 6th annual Devolution Conference 2019 Reflecting on the devolution journeys and milestones achieved over the last successful: 4-8 March, Kirinyaga, Kenya
- 42. Networks for Policy engagement workshop Support the use of research in informing health policy & practice in low & middleincome countries and take stock of how the Wellcome Trust's grantees are progressing in their policy engagement efforts: 25-27 February, Lilongwe, Malawi
- 43. 2nd International Advisory Committee Meeting AFIDEP's Malawi Parliament Enhancement Project (MPEP): 20 February, Lilongwe,
- 44. 33rd pre-Summit consultative meeting Mainstreaming gender in the African Union: 5 February, Addis Ababa, Ethiopia
- 45. Nursing education in Uganda workshop AFIDEP took part in the workshop that aimed to build a common understanding of the current state of nursing education in Uganda: 29-31 January,



### A year in review: Executive Directors' Note

The progress we made in 2019 was possible through the exceptional dedication of AFIDEP staff members and the valuable strategic advice and direction from our Board.

By Eliya Zulu

2019 has been a great year at AFIDEP. We have seen expansion across the board from our personner, to our systems, to the impact of our work. We completed Development Strategy 2024, which will commence in 2020 when we will commemorate our 10th anniversary. AFIDEP is recongnised as the Go-To research and policy institute striving to see an Africa where evidence is consistently used to transform lives, and the future looks bright.

2019 witnessed considerable growth in the scope of our programme work. The demographic dividend (DD)

team secured two grants from the Government of Botswana and the Hewlett Foundation to support governments in Botswana and Kenya operationalise the DD framework. We expanded our work to increase senior and junior evidence informed decision-making champions through the Evidence Leaders in Africa project funded by the Hewlett Foundation and the USAID-funded partnership with the Population Reference Bureau. The WHO-funded project "Heightening Institutional Capacity for Government use of Health Research" in Kenya, Malawi and Uganda will reinforce our expertise in strengthening institutional culture and systems needed to ensure consistent use of evidence in Governments.

We expanded our partnership with the

Liverpool School of Tropical Medicine and we now have seven joint projects where we provide research uptake and policy engagement expertise on key health issues like lung health, Sepsis, antimicrobial resistance, vector control, and HIV/AIDS. Our work in the Malawi Parliament and through the Network of African Parliamentary Committees for Health has reinforced our stature in strengthening evidence-informed governance and accountability.

Our Communications work went a notch higher, producing quality publications, facilitating proactive engagement with policy makers and the media, and redesigning our website to be launched later this month.

We bolstered our expertise by hiring well-qualified and experienced staff, and we streamlined our human resource portfolio. We trained staff in rapid evidence synthesis and supported various individuals attend professional training courses. I look forward to seeing the value of these capacity development investments in the work done by staff.

Our finance and administration teams streamlined our policies and financial

management systems, ensuring that the Institute provides a good working environment and is fully accountable to its funders.

AFIDEP staff made valuable contributions to policy formulation processes and academic conferences. We played key roles in preparing for and during the Nairobi ICPD25 summit, including facilitating the development of ICPD commitments for Malawi and social media campaigns. AFIDEP also led the scientific committee for the 8th African Population Conference, featuring in 12 sessions. Congratulations to Nyovani Madise for her election as the Vice President of the Union of African Population Studies.

The progress we made in 2019 was possible through the exceptional dedication of AFIDEP staff members and the valuable strategic advice and direction from our Board. I also thank our funders, partners and clients for supporting our dream to make evidence matter in transforming lives in Africa.