Editorial

Dear Readers,

We are extremely pleased to share the first newsletter for Collaboration for Evidence Based Healthcare and Public Health in Africa (CEBHA+) project. CEBHA+ brings together a consortium of African and German collaborators to conduct research for evidence to inform practice and policy towards improved prevention management of selected Non Communicable Diseases (NCDs).

We are highly appreciative of the German Federal Ministry of Education and Research (BMBF), which initiated and funded this work with an overall objective of improving health in Africa. This is through projects that contribute to building long-term research capacity and infrastructure for evidence-based healthcare and public health in Sub-Saharan Africa.

This project is primarily managed in Africa, with support from our German partners. As the African coordinator, based at Makerere University, this project has been both exciting and challenging. The project has also had a “hidden agenda”, promoting African countries to work together, supplement each other, sharing successes and co-discussing barriers, frustrations as well as lessons learnt.

Navigating through the bureaucracy of conducting research across Africa (Ethiopia, Malawi, Rwanda, South Africa and Uganda) has had its challenges and lessons learnt. Often, in the past collaborative research has been a Western partner and an African institution (North-South). Here CEBHA+ uses a South-South model, with support from partners in the North (North-South-South model). As we move towards a unified Africa, the future of health research is in African countries and researchers working together, not just competing for rankings. The strong pull up the weak, the novices learning from the experts and all working towards a healthier and happier Africa.

We are highly appreciative of the German government which initiated this project, the German research partners for their guidance, but working more in the background, and leaving us Africans to be at the helm; as well as the various country support systems. This includes the Ministries of Health, the Universities, the regulatory bodies and the colleagues we work with.

Here, in the first newsletter, we share our progress so far, both teething problems and successes. Enjoy.

Prof. Harriet Mayanja-Kizza (the CEBHA+ African coordinator)
CEBHA+ Implementation
The CEBHA+ Research Tasks (RT)

RT1: Screening approaches for hypertension and diabetes, and those at high risk of cardiovascular diseases (CVD) in Sub-Saharan Africa (SSA).
RT2: Integrated models of health delivery for hypertension and diabetes in SSA.
RT3: Population level interventions to prevent hypertension and diabetes in SSA.
RT4: Improved implementation of road injury prevention interventions.
RT5: Promotion of an integrated, rigorous methodological approach across CEBHA+ research tasks and activities.

Work Packages (WP)
- **Capacity building:** Within CEBHA+ we focus on building capacity at individual, institutional and health system level or society at large.
- **Networking:** We focus on improving connectivity through the mentoring programme, scientific exchange programme and Networking meetings.

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CEBHA+ First Planning Meeting

In April 2014, a team of African and German researchers and decision-makers came together for a meeting in Addis Ababa, Ethiopia. The aim of this meeting was, to discuss the BMBF fund for proposal and strategies and to look at the common NCD in Africa.

Based on a priority-setting survey among others, the team discussed and agreed to focus on hypertension, diabetes and road traffic injuries which are on a high rise across Africa.

For more information visit [www.cebha.plus](http://www.cebha.plus)

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CEBHA+ Launch
Kick-off meeting and launch of the CEBHA+ project

CEBHA+ was officially launched in February 2017. This was during the Research Networks for Health Innovations in Sub-Saharan Africa kick-off meeting organised by BMBF on 14th to 15th February 2017 in Oyster Bay, Dar-es-Salaam, Tanzania. The project partners, experts, political/policy decision-makers from the five African-German networks came together and discussed in-depth the prospects of the BMBF initiative. The team discussed how to strengthen the networks, synergies between networks and translation of research results into policy and practice. The CEBHA+ administrators, coordinators and finance persons received training on BMBF funding regulations and reporting.

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Overview

The Collaboration for Evidence-Based Healthcare and Public Health in Africa (CEBHA+) represents one of five African-German “Research Networks for Health Innovations in Sub-Saharan Africa” funded by the German Federal Ministry of Education and Research (BMBF). As an overarching goal, CEBHA+ aims to build long-term capacity and infrastructure for Evidence-Based Healthcare and Public Health (EBPH) in Sub-Saharan Africa, notably in Ethiopia (AHRI), Malawi (University of Malawi), Rwanda (University of Rwanda), South Africa (Stellenbosch University, Cochrane South Africa, Chronic Disease Initiative for Africa) and Uganda (Makerere University). These countries work in collaboration with two CEBHA+ Germany institutions (Ludwig-Maximilians-Universitatem Munich and Cochrane Germany). We aim to accomplish the CEBHA+ goal of gathering evidence to inform policy and practice on strategies to decrease the society’s impact of selected Non Communicable Diseases (NCDs). Our goal is to undertake research in areas of hypertension, diabetes and road traffic injuries. For more information visit [www.cebha.plus](http://www.cebha.plus).
The CEBHA+ Stakeholders Engagement

One of the key activities of CEBHA+ is continual engagement with policy and proactive persons. The CEBHA+ stakeholders include members of parliament, line ministries/departments, healthcare professionals, other researchers, the media among others. CEBHA+ has to ensure that relevant stakeholders are engaged throughout the research process in order to overcome the disconnect between primary research, evidence synthesis and implementation into policy-and-practice. This enables them to embrace use of evidence in policy development, adaptation and implementation. All CEBHA+ partners held stakeholder’s engagement meetings to introduce CEBHA+ and seek buy-in among stakeholders. We share with you two stakeholder engagement events in Malawi and Rwanda.

CEBHA+ Stakeholders Engagement Meeting in Malawi

The University of Malawi, College of Medicine is contributing towards three CEBHA+ research tasks (RT) cardiovascular disease, and diabetes. They organised a successful national stakeholders’ engagement meeting in 2018. “...Our national stakeholders are excited with the upcoming situation analysis of population-level interventions targeting risk factors for diabetes and hypertension in Malawi which is RT3, now undergoing ethical review process led by Dr. Tamara Phiri...” said Dr. Gertrude Chapotera CEBHA+ leader in Malawi. “...the selected NCDs align well with the current national essential health package which prioritize mental health, diabetes and hypertension to be area of focus...” said by one official from Ministry of Health, Malawi.

CEBHA+ Stakeholders Engagement Meeting in Rwanda

In Rwanda, CEBHA+ is hosted by the University of Rwanda (UR). The UR contributes to Research Tasks (RT) 1, 2, 3 and 4. The UR is leading on RT3 which is “population level intervention to prevent diabetes and hypertension in Sub-Saharan Africa”. The UR has been engaged in various activities with stakeholders especially with Rwanda Ministry of Health (MoH), Rwanda Biomedical Centre (RBC) and the Police among others.

Dr. Stephen Rulisa (Leader CEBHA+ Rwanda) introducing CEBHA+ to Stakeholders in 2018 in Kigali, Rwanda

Dr. Tamara Phiri making a presentation during CEBHA+Stakeholders engagement at Ministry of Health, Malawi, NCD Department in 2018
CEBHA+ Outputs and Activities

The 1st Annual CEBHA+ Networking Meeting 2018

Makerere University College of Health Sciences (MakCHS) organized this meeting on 13th – 15th February 2018 at the Speke Resort Hotel, Munyonyo in Kampala, Uganda. A total of 43 participants from Africa and Germany CEBHA+ partners attended. There was interaction amongst CEBHA+ members, the Ugandan policy makers and the local/international delegates, including an advisory board member Dr. Bernard Opar, MoH Uganda attending the first MakCHS NCD symposium at same venue.

Dr. Bubikire Stanley – Programme Head, Injuries and Disabilities, Uganda Ministry of Health officially opening the meeting in Uganda. He commended CEBHA+ for focusing on a critical area of NCDs which are on the rise in Uganda and other African countries. He appreciated the involvement of policy makers which eases transfer of research findings into policy and practice.

Prof. Harriet Mayanja-Kizza (the CEBHA+ African coordinator), briefly gave an overview on the prior meetings in Addis Ababa (1st planning meetings in April 2014) and in Tanzania (the kick-off in 2017) that formed strong foundation for CEBHA+. Since CEBHA+ sites were just starting, she advised the team to share lessons learnt, ideas, updates on progress and future plans at respective sites. She urged members to interact with policy makers, students and NCD experts from different countries.

Prof. Eva Rehfuess (the CEBHA+ German Coordinator). She illustrated the vision of CEBHA+ using an analogy of a team rowing a boat with emphasis on the 5 key pillars of long term success which include: Vision, Perseverance, Technical rigor, Team work, and Friendship. She added that winning teams build friendships, continuously network, and rely on “good coaching” such as that offered by the CEBHA+ Scientific Advisory Board.

Details of the networking report, presentations and photos can be found in the Google-drive link below https://drive.google.com/drive/folders/16L2jiLYfQWVsI2JrSZCDdOVYNrA8AsWu
The Evidence-based Public Health (Ebph) Training /Workshop in Uganda

The first CEBHA+ EBPH workshop was successfully conducted at Makerere University-Uganda from 8th - 12th October 2018. It was attended by 30 participants from diverse disciplines and backgrounds: researchers, public health practitioners, Master’s and PhD students selected out of the 97 candidates who responded to the advert for the course. The workshop was conducted by five trainers from CEBHA+ partners i.e. Rwanda, Uganda, Germany and South Africa. The training was accredited by Stellenbosch University and certificates of attendance were awarded after the course. Broadly, the areas covered were: introducing concepts of EBPH, appraising, findings, interpreting results, study designs for evaluation and applying best evidence to public health questions relevant to the African settings.

The Integrated Knowledge Translation Workshop in South Africa

In South Africa, Stellenbosch University (SU), Cochrane South Africa (CSA) (South African Medical Research Council (SAMRC)), and the Chronic Disease Initiative in Africa (CDIA) are involved in research tasks 1, 2 and 3. While SU and CSA are mainly involved in evidence syntheses and in providing methodological support across CEBHA+, CDIA leads the primary research. Through regular consultations with key stakeholders the three partners work together to promote the uptake of evidence into policy and practice.

Integrated knowledge translation (IKT) aims at engaging decision-makers throughout the research process from research question, results interpretation, dissemination and use of findings. The Munich team (with significant expertise in IKT) worked with IKT focal persons at CEBHA+ institutions in Africa and developed the overall IKT approach for CEBHA+.

Stellenbosch University organized a highly successful IKT workshop in Cape Town, South Africa from 31st October to 2nd November 2018. At least one member from each CEBHA+ partner attended. The workshop equipped participants from CEBHA+ partner institutions with knowledge, skills and tools to develop and implement site-specific IKT strategies. The workshop focused on: The science, context specific knowledge translation (KT). Designing KT strategy for stakeholders; strategies to disseminate research outputs; means of evaluating KT efforts and mapping of stakeholders.
CEBHA+ Students Corner

A total of 2 PhD students, 1 Masters student and 1 Post-doctoral research fellow were recruited by the end of 2018. These were from Uganda and South Africa.

Dr. Shahista Mustafa Jaffer, Masters student, Stellenbosch University, South Africa. Area of Masters Research: RT2

Esther Bayiga, PhD student, Makerere University, Uganda. Area of PhD Research: RT4

Jimmy Osuret, PhD student Makerere University, Uganda. Area of PhD Research: RT4

Dr. Kufre Joseph Okop, Post-doctoral Research fellow, CDIA, South Africa. Area of post-doctoral Research: RT1
Dr. Nasheeta Peer, a senior colleague working at the NCD Unit, South Africa Medical Research Council, got a bursary from CSA and presented on “Association between cardio metabolic abnormalities and adiposity by gender and population grown in South Africa” at the International Diabetes Federation (IDF) Congress in Abu Dhabi, from 4th to 8th December 2017. “...it is an exciting conference to attend as there are several parallel scientific sessions covering all aspects of diabetes including epidemiology, treatment, diabetes in children, and ground-breaking latest research, among other topics... The speakers were diverse from both developed and developing countries and were therefore able to offer different perspectives and experiences on various aspects of diabetes.” Dr. Nasheeta Peer said while sharing her experience with the CEBHA+ team.

The CEBHA+ Africa Coordination Office

The fully operational CEBHA+ Africa Coordination Office was established at Makerere University, College of Health Sciences and is: organizing, coordinating and monitoring meetings and other activities across the network and is the repository for all CEBHA+ core documents.
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