











COLLABORATION FOR EVIDENCE-BASED HEALTHCARE AND PUBLIC HEALTH IN AFRICA

The rising burden of NCDs in sub-Saharan Africa

The population of sub-Saharan Africa is affected by a considerable disease burden. In addition to infectious diseases, sub-Saharan Africa is increasingly burdened by non-communicable diseases (NCDs) and unintentional injuries. The Collaboration for Evidence-Based Healthcare and Public Health in Africa (CEBHA+) project has thus emerged out of a need to develop and implement evidence-based interventions to prevent and treat NCDs and unintentional injuries as well as to address their root causes.

The overall aim of CEBHA+ is to build long-term capacity and infrastructure for evidence-based healthcare and public health in sub-Saharan Africa; including primary research, evidence synthesis, and evidence-based policy-and-practice focusing on diabetes, hypertension and road traffic injuries as priority areas.





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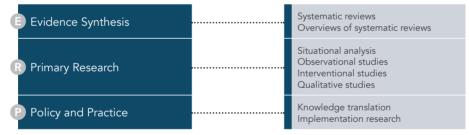
CEBHA+ FRAMEWORK

Reducing the increasing burden of non-communicable diseases in sub-Saharan Africa by establishing long-term capacity and infrastructure for evidence-based healthcare and evidence-based public health.



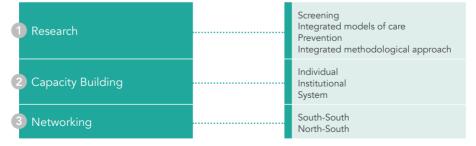
RESEARCH AND IMPLEMENTATION

FRAMEWORK



WORK PACKAGES

TO REALIZE THE GOALS



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RESEARCH TASKS

CEBHA+ applies a rigorous methodological approach coupled with an integrated knowledge translation strategy across all research tasks

Evidence-informed policies and practices on screening approaches for hypertension and diabetes, and those at high risk of cardiovascular disease (CVD) in sub-Saharan Africa (SSA)

- Reviews of existing evidence on the effectiveness of different screening approaches for hypertension and diabetes in LMICs
- Robust evaluation of total nonlaboratory CVD risk score use in Rwanda, Malawi and Ethiopia

Evidence-informed policies and practices on integrated models of health delivery for hypertension and diabetes in SSA

- Study determining the prevalence of diabetes, hypertension and depression amongst HIV-positive people receiving ART
- Review existing evidence on integration of care for hypertension and diabetes

- Review of existing evidence on integration of care for other diseases
- Study to implement a comprehensive approach to patient education and counselling for patients with non-communicable chronic diseases in primary care

Evidence-informed policies and practices on population level interventions to prevent hypertension and diabetes in SSA

- Review of the effectiveness of population-level interventions to increase physical activity to prevent diabetes and cardiovascular diseases in LMICs
- Situational analysis to identify population-level interventions currently being implemented in Malawi, South Africa and Rwanda.

Evidence for improved implementation of road traffic injury prevention interventions

 Assess the quality of currently available data on the epidemiology of road traffic injuries in Uganda and Rwanda









- Identify key policy and programmatic aspects in the design, implementation, monitoring and evaluation of interventions to reduce incidence of pedestrian road traffic injuries in Uganda and Rwanda
- Systematic review to evaluate the effectiveness of interventions to prevent pedestrian crashes globally
- Evaluate the implementation of existing pedestrian-targeted interventions of road traffic injuries in Uganda and Rwanda

POLICY TRANSFER

Within CEBHA+ we aim to

- Invite decision makers to participate in CEBHA+ activities and events including capacity strengthening
- Participate in stakeholder
 engagements and policy
 discussions, including relevant
 technical and/or advisory groups
- Establish a platform for continuous engagement and dialogue between CEBHA+ researchers and decision makers









"Building long-term capacity and infrastructure for evidence-based healthcare and public health in sub-Saharan Africa"



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