

## NEWS BRIEF

### Evidence for Health Action: Research to Policy



#### *Introduction*

There are efforts to strengthen evidence-based policy decisions and practices within the health system of Ethiopia by broadening stakeholder consultation. This has become critical because of the data being generated among local populations in the collaborative research activities of the HDSS sites located within the six public universities in Ethiopia (Dabat, Gilgel Gibe, Arba Minch, Butajira, Kilite-Awlaelo and Kersa). There is also increasing awareness that the end result of research is to save lives.

It is for this reason that 72 researchers, academicians, policy makers, public health and media practitioners met at a forum at the Capital Hotel and Spa in Addis Ababa, Ethiopia on August 19, 2016 with the aim to discuss challenges and strategies to promote stakeholder networking, and practical ways to bridge the research to policy and practice divide within the health systems in the country. The forum was funded by the INDEPTH Network and organised by the Health and Demographic Surveillance System (HDSS) sites and their parent universities (Addis Ababa, Haramaya, Gondar, Jimma, Mekelle and Arba Minch) in collaboration with the Ethiopian Public Health Association, Federal Ministry of Health and the Centers for Disease Control and Prevention (CDC). An international NGO, Save the Children, also provided additional funding for the activity.

Similar forums have been held in Ghana in December 2014, India in January 2015 and Tanzania in April 2015 and were funded by the INDEPTH Network.

### ***Meeting Objectives***

- To identify gaps and challenges in moving research to policy in public health practices and programmes.
- To disseminate findings from a recent collaborative research on maternal and child health, and causes of death of women and children based on the results of the verbal autopsy conducted through the HDSS by the research centers over six years period.



### ***Summary of Workshop Presentations***

Dr. Fikreab Kebede, Board Chair of the Ethiopian Public Health Association, gave the opening speech and said a lot of research has been done and it was time to link research to policy while also encouraging the dissemination of research findings to the public through the media.

“Media write articles on health not quoting the right sources. But we have a lot of research done here, which the media could report about. There is need for closer ties between researchers and the media,” he said.

Mr. Fasil Tessema, Chairperson of the Ethiopian Universities Research Centres Network (EURCN) touched on work of the HDSSs, research centres and the future, saying networking was important for learning, sharing, standardising HDSS procedures, tools and also pooling data for joint analysis and reporting.

Mr. Tessema said networking increased visibility and funding opportunities, adding that networking has created a learning and experience sharing forum between universities and promoted team experience sharing visits in-country and among African sites such as Ghana and South Africa.

Prof. Yemane Berhane of the Addis Continental Institute of Public Health, in his presentation on research and policy divide, mentioned weak evidence, cost of research and lack of collaboration among researchers as some of the challenges hindering evidence-based policies. He said to improve the policy making process there should be sustained collaboration among stakeholders and the use of advocacy groups. He said conferences and workshops should be organised to discuss research ideas and disseminate results.

Prof. Berhane reminded researchers to go beyond the traditional linear research-policy framework and understand that there are many external factors affecting policy making dynamics (political, economic etc); also taking into consideration that research is not the only source of evidence that policy makers use. He also stressed on evidence credibility and appropriate packaging of evidence for the policy makers.

Prof. Damen Hailemariam of Addis Ababa University gave an overview of maternal and child health policies and context mapping in Ethiopia. He mentioned the National Newborn and Child Survival Strategy Document Brief Summary (2015-2020) and the roadmap for accelerating the reduction of maternal and newborn morbidity and mortality in Ethiopia (2012) documents, as some policy instruments available to address issues in health care delivery. He commented on the establishment National Research Council (NRC) and expressed the hope that it will live up to expectation.

Dr. Negari Lencho of School of Journalism from Addis Ababa University and Mr. Asferi Tilahun of the Ethiopia Broadcasting Corporation led a panel session on health research communication and media in Ethiopia. According to Dr Lencho, development means empowerment and freedom through access to relevant information, however, large sections of the population is living in abject poverty due to lack of empowerment and health information. He noted that most developing countries have a culture of rich health research but an information-poor society, which fuels health inequalities.

Mr. Tilahun, on his part, said the mass media has excellent potential to promote good health outcomes through their agenda-setting role and the provision of accurate and comprehensive information. He noted however, in Ethiopia, media coverage of health research is poor due to the weak link between journalists and researchers. He stressed on the need to build the capacity of media practitioners and researchers to work together.

Mr. Tsedeke Mathewos of the Federal Ministry of Health spoke on information revolution and its power to transform the health system. He noted that the advancement in the Information Communication Technology provides enormous opportunities for healthcare delivery. He pointed out that the appropriate and timely dissemination of health related information is an essential element in the process of transforming the health sector. He noted that in general, all

functions of the health system rely on the availability of timely, accurate and dependable information for decision-making.

Dr. Muluemebet Abera of Jimma University and Gibe Gibe HDSS Centre Leader presented findings on the “Maternal health service utilisation in the HDSS in Ethiopia 2010-2014”. She noted that a woman’s health is critical to her own life, the well-being of her family, the economy of her community and her country. She stressed that the health care that a mother receives during pregnancy, at the time of delivery and soon after delivery, is important for the survival and well-being of both the mother and the child.



One of the key findings of the study was that out of a total 28,839 pregnant women followed at the five HDSS sites over five years, only 12,140 (42.1%) attended at least one Antenatal Care (ANC) visit and only 11.6% completed the recommended 4 visits. Dr. Abera said 57.2% of women in the HDSSs were not using ANC services. The report concluded that adverse pregnancy outcomes could be avoided if a mother received care early in the pregnancy and continued through delivery. The policy recommendation, she said, is that to reduce health risks to mothers and newborns, proportions of mothers receiving care and babies that are delivered in health facilities should be increased.

Dr. Nega Assefa of the Haramaya University, who is also the Centre Leader of Kersa HDSS, presented findings on neonate, infant, under-five and maternal mortality and their causes using the verbal autopsy method (**from which study and where and when was it conducted?**). He said identifying the cause of death is necessary for planning, and programming health interventions. He said the findings showed that tuberculosis is the single most important cause of death among women aged 15-49, followed by HIV/AIDS and malaria. The major specific causes of maternal mortality are post-partum hemorrhage, obstructed labor and that

pregnancy hypertensive disorders as a cause of death are increasing over time. Neonatal causes of death include bacterial sepsis of the newborn, and children aged 1-4 years cause of death include malnutrition.

### ***Discussions and Recommendations***

The meeting generated discussions, gaps were identified and some recommendations were made including the following:

- Support from the universities to the centres and HDSS is limited and should be addressed.
- Collaboration with regional or federal level offices is limited and should be strengthened.
- Research centres should proactively engage the media and include a media advocacy budget when putting in proposals for research funding.
- The media should move away from event-oriented coverage of health issues but specialise in health communication.
- Training of journalists in health communication is key.
- Need to introduce incentives for researchers who engage in policy-related activities.
- Sensitising and encouraging researchers and data collectors on quality of data generation.
- Encouraging networking by involving universities and stakeholders.
- Encourage and support the establishment of more HDSS sites in Ethiopia to get better representative indicators at national level.

### ***Outcome***

The meeting created a stakeholder platform among academicians, media practitioners, researchers, policy makers and public health practitioners, among others. It also helped to identify challenges and share ideas in narrowing the research to policy divide and brought to the fore the need for researchers and academicians to move away from doing research only for promotion. The meeting agreed on the need for the politicians and policy makers in Ethiopia to avoid making health policies for the sake of expediency and power but should rather collaborate with scientists to chart a future course for evidence-based public health practice. A two months' timetable was agreed on for the proposal development of the formal establishment of a network of the research centres operating under Ethiopian universities.

Mr. Fasil Tessema, Dr. Muluemebet Abera and Dr. Nega Assefa on behalf of Ethiopian HDSSs expressed gratitude to INDEPTH Network for supporting their centres, particularly in the area of capacity building.