The EIDM rapid landscape review map in Malawi's health sector

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This map is part of a series of maps on the evidence-informed decision-making (EIDM) landscapes in different countries in Africa. The series comprises 25 maps and is available from the Africa Evidence Network. This is map 10 in the series. Maps were produced as part of the bursary conditions for attendance at Evidence 2016 (<u>http://evidenceconference.org.za/</u>). Bursaries were provided as part of the UJ-BCURE programme, funded by the UK's Department for International Development (DFID).

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Strengthening Evidence-Informed Decision-Making in Africa

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Section 1: Background Information

What country / sector / area of work your map relates to.

The map presented below relates to Malawi Health Sector

An overview of who the main role players are in the EIDM landscape (please explain acronyms used in the map in full).

The first key player in the Landscape map are the Government ministries who are the main end users of various research evidence generated. The ministries are supposed to engage with available evidence when making decisions and formulating policies. Second group of key players are the research producers. In the health sector in Malawi, College of medicine at university of Malawi features highly when it comes to research generation. Research institutes and NGOs are also key when it comes to generating evidence for policy making. Thirdly, there is knowledge translation to facilitate evidence use by policy makers. Here the key players are AFIDEP, DIGNITAs and Knowledge translation Platform under Ministry of health.

Explanation of Acronyms.

NCST: National Commission for Science and Technology	MLW: Malawi Liverpool welcome Trust
NSO: National Statics Office	UNIMA: University of Malawi
AFIDEP: African Institute for development Policy	CoM: College of Medicine
CHAI: Clinton Health Access Initiative	MZUNI: Mzuzu University
PACHI: Parent and Child Health Initiative	LUANAR: Lilongwe University of Agriculture and Natural Resources
AAH: Action Against Hunger	JHU: John Hopkins University projects
SECURE Health: Strengthening Capacity for Utilization of Research	University of North Carolina Project
Evidence in the Health Sector	
NGO: non-Governmental Organization	UJ-BCURE: University of Johannesburg-Building capacity for
	Utilization of Research Evidence program

What gaps exist in the EIDM landscape (i.e. what type of organisations/initiatives are currently missing)?

The main existing gap lies on strengthening interaction between evidence producers and Users. We need more institutions in the knowledge translation field in the map. Of most important are Evidence informed decision-making networks. Currently there is none operating in Malawi. Knowledge translation platform tries to fill this gap but faced with lots of resource constraints in terms of both human and financial resources.

Are there bottlenecks or organisational silos that impede the flow of evidence through the system?

Based on the experience I have had on the ground through SECURE Health, The main bottle necks that impede flow of information in the system has to do with capacity and communication.

Capacity: This both and institutional and Individual level. At institutional level, there are few incentives as well as lack of enabling environment to promote use of evidence in decision making processes. At individual level, weak capacity in for policy makers to access, appraise, synthesize and use the available evidence.

Communication: poor packaging and dissemination of research findings by research producers, reduces the probability of evidence reaching the appropriate target group involved in decision making.

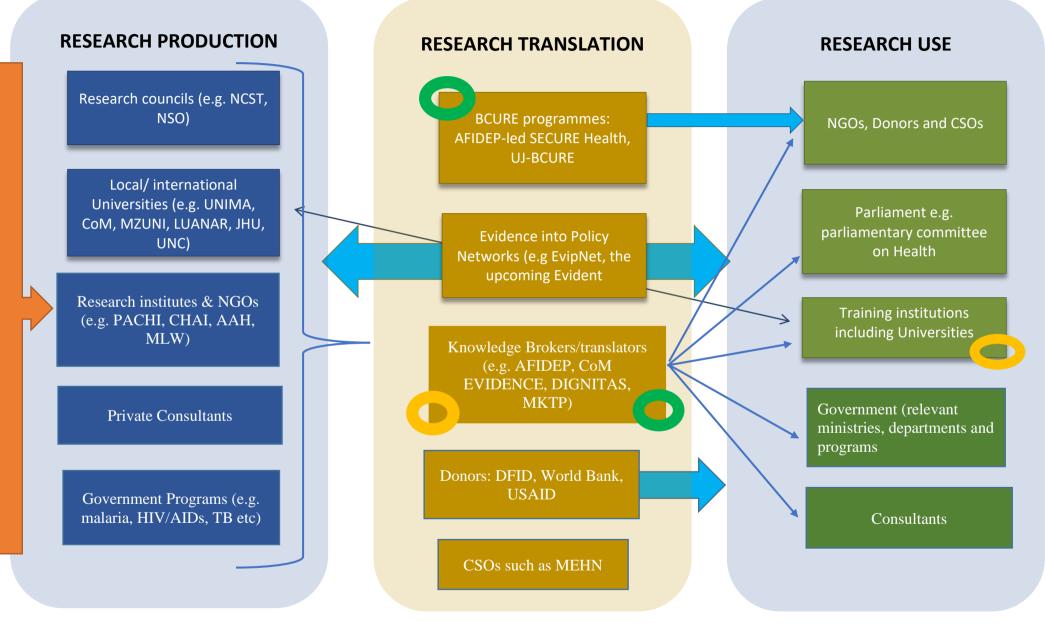
What best characterises the relationship between research producers and users in your country/the sector you are describing (e.g. distinct groups; co-producers of knowledge; etc.)?

Partly co-producers of Knowledge. We see both producers and users of evidence operating as distinct groups without any overlap. At the same time they do interact once in a while through Technical working groups, Science-Policy cafes and research conferences. However, there still a lot players who are not engaged in these activities.

Section 2 The Landscape review Map

Map the position of and interactions between EIDM role players in the research-policy in health sector in Malawi

See next page



Section 3: Conclusion:

Consider answering the following questions:

• What type of intervention/support would the system most benefit from?

The system would most benefit from an intervention which build capacity on both supply and demand side of evidence decision making. This will ensure that producers focus on research which will unveil policy oriented research while the users will be forth coming to demand, comprehend and use available evidence. A second intervention should focus on increasing the interaction between the two parties.

• Comment on how your map relates to the three themes of the Evidence 2016 conference: engage, understand, impact.

The role players in the research production mostly play within the engaging and understanding themes by making sure that policy oriented research is produced and made available for usage. The players in the Knowledge Translation block address issues of all themes. Facilitating the usage of research by making sure that there is interaction between the producers and users but also ensuring that effective communication takes place between these two groups in order to yield impact. The last group in the research use categories ensure that research produced is used to yield impact. Formulating policies and making decisions that are evidence based and cost effective.

•Do you think that there are aspects of the engagement described in your map that works well and has potential to be upscaled? Yes! Engaging policy makers through increased participation in conferences and science-policy cafes. Capacity building on evidence use processes especially how to access, appraise and synthesize research evidence should be promoted.

• Is there a creative metaphor to describe the overall EIDM system (e.g. evidence eco-system/jungle; research to policy highway etc.)?

Evidence to policy conduit, Evidence structure, research to policy cobweb.