UNAIDS major report: ‘How AIDS changed everything’
A major UNAIDS report released in Addis Ababa, Ethiopia on 14 July 2015 announced that the goal of getting 15 million people on life-saving HIV treatment by 2015 has been achieved nine months ahead of schedule. “The world has delivered on halting and reversing the AIDS epidemic,” said Ban Ki-moon, Secretary-General of the United Nations. This means that the AIDS target of Millennium Development Goal 6 has been achieved and exceeded. The number of AIDS-related deaths and new infections a year have fallen since 2005 by 41% and 24% respectively. Examples of countries that have done well in bringing down the numbers are Ethiopia - their death rate has declined by 71% from its peak in 2005; and South Africa - which has reduced the death rate by 58% in the past five years.

MamaYe, a campaign initiated by Evidence for Action, has released a factsheet that highlights the Malawian government’s decreasing healthcare expenditure. Statistics from the 2015 Health Expenditure Indicators show that between 2013 and 2014 the healthcare budget in Malawi has been reduced from USD21 to USD19 per person. This undermines Malawi’s ability to provide its citizens with basic healthcare.

Africa needs a health policy to help people with albinism according to Caradee Yael Wright, a scientist from the South Africa Medical Research Council. She reveals that albinos in Africa have a double challenge. They not only face discrimination, but there is also no health policy that ensures they get services for their condition.

Developing South Africa’s national evaluation policy and system: First Lessons Learned provides a vast chronicle of the development of South Africa’s National Evaluation System (NES) from late 2011 to mid-2014. The system focuses on improving performance, as well as improved accountability, by national government departments selected for the national evaluation plan.

Aku Kwamie’s article featured on the International Health Policies (IHP) network is a reflection of the first meeting of emerging health policy and systems practice and research leaders in West Africa. This meeting was about how the field can be developed, as evidence shows that West Africa has the lowest development indicators.

Announcements

- Call for comments: South Africa’s Committee on Violence against Foreign Nationals is calling for submissions from affected parties.
- Call for applications: VakaYiko’s 2015/16 learning exchange programme is open for bids.

The latest AEN blog by Laurenz Langer from UJ-BCURE focuses on behavioural sciences and evidence-informed decision-making (EIDM). The blog highlights the importance of creating an enabling environment for EIDM which supports the actual activity of using evidence. AEN blog submissions are welcome on our website.
Country priorities for data development: what does history tell us?
The Overseas Development Institute (ODI) report by Amina Khan, Joseph Wales and Elizabeth Stuart considers the question: what are country priorities and how should they position donor investments in statistics? In the quest to answer this question, the paper looks at the evolution of statistical systems in three middle-income countries, namely South Africa, Pakistan and Mexico. The key lessons are highlighted from each country. South Africa’s experience, for example, demonstrates the importance of census as the backbone of a national data system and vital contributor to the state’s effort as a service provider. This promotes greater prioritisation of censuses, civil registration and the collection of data. Secondly, Pakistan’s experience highlights the need to create a single statistical entity as opposed to several different ones. Lastly, Mexico’s experience indicates the need for the National Statistical Office to be autonomous.

INTERNATIONAL EVIDENCE

The Wellcome Trust website promotes policy engagement between researchers and policy makers by outlining five key factors that promote the use of evidence in policy making. These factors are: (1) commitment and credibility, (2) timeliness and early engagement, (3) understanding the political context, (4) networks and intermediaries to leverage influence and (5) targeted dissemination strategies.

What’s the secret to effectively bridging the gap between research and policy? According to David Evans relationships are more important than convincing the government to support your research, but their success is dependent on ongoing relationships between policy makers and researchers. One of the characteristics of relationships is being willing to support policy makers in other work that goes beyond agreed terms of reference.

A blog about academic data sharing featured on LSE’s website opens up a debate about the failure of current policies that seek to motivate researchers to publish their data for the common good. Academia is described as a reputation economy in which the individual researcher’s career depends on recognition. Therefore, policies are not adopted by researchers because their work is driven by recognition. It is suggested that new policies should follow the guiding principle of reputation instead of obligation to increase data sharing.

Evidence from academia

Cooke et al: ‘On-going collaborative priority-setting for research activity: a method of capacity building to reduce the research-practice translational gap’


Oliver et al: ‘Capacity for conducting systematic reviews in low- and middle-income countries: a rapid appraisal’

The Centre for Evidence-based Health Care (CEBHC) at Stellenbosch University introduces the GREAT Network. This network is an international partnership. Their goal is to facilitate the efforts of local stakeholders focused on enhancing maternal and perinatal health in low and middle income countries, through the implementation of relevant evidence-based guidelines. One of its initiatives is a quarterly newsletter which showcases excellent work that is being done globally in the area of knowledge translation and guideline implementation in maternal healthcare.