Our Previous Projects

The use of rigorous data and research evidence can help improve health outcomes and reduce the high disease burden in Africa by informing the formulation of robust policies and implementation plans, and the design of effective health interventions.

Some projects that AFIDEP undertook to address health challenges

International Multidisciplinary Programme to Address Lung Health and TB in Africa
The project sought to expand the scientific knowledge and implementable solutions for issues related to lung health in Africa.

01 **IMPALA**

Heightening Institutional Capacity for Government Use of Health Research
The project sought to strengthen institutional capacity for the use of health research in policy and programme decisions in Kenya, Malawi and Uganda.

02 **HIGH-Res**

03 **LIGHT**

04 **ARC**

05 **PIIVec**

Leaving no-one behInd: Transforming Gendered pathways to Health for TB
LIGHT provides new evidence on the effectiveness of different gender-sensitive pathways and approaches to health for those with TB in urban, HIV-prevalent settings boosting efforts to stop the spread of TB.

African Research Collaboration on Sepsis
ARCS sought to improve the survival and quality of life of sepsis patients using relevant innovations at the individual and health system level, through multidisciplinary applied health research.

Partnership for Increasing the Impact of Vector Control
The overall objectives were to accelerate research uptake using evidence synthesis and policy analysis, and to strengthen linkages between vector control research and policy at project levels.

> Without strong health systems, African countries are unlikely to make significant progress on persistent health challenges as well as emerging epidemics such as non-communicable diseases, antimicrobial resistance, neglected tropical diseases and many others.
>
> Rose Oronje, Ph.D
> Director of Public Policy and Knowledge Translation, and Head of Kenya Office, AFIDEP

About AFIDEP

AFIDEP is an African-led, pan-African non-profit research and policy institute, established in 2010 to institutionalise a culture of evidence use in the public sector and to bridge the gaps between research, policy and practice in development efforts in Africa. AFIDEP is registered as a Non-Governmental Organisation in Kenya and Malawi and as a non-profit institution in the USA, with 501(c)3 status.

AFIDEP contributes to the realisation of the Sustainable Development Goals (SDGs) and other development strategies by enabling the use of evidence in the formulation and implementation of development policies and programmes.

What we do:
- Strengthen capacity in evidence-informed decision-making (EIDM)
- Generate, synthesize and translate demand-driven evidence on SDGs 3, 4, 5, 13, and 16
- Conduct advocacy to stimulate evidence uptake
- Elevate African voices in national and global discourses

AFIDEP implements work in following six thematic areas:
- Population dynamics and demographic dividend
- Health and well-being
- Transformative education and skills development
- Environment and climate change
- Governance and accountability
- Gender equality

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3 GOOD HEALTH AND WELL-BEING

HEALTH AND WELLBEING

Health Approach

Most African governments are not spending enough on health care. As a result, the Sustainable Development Goal 3 targets of universal health coverage and financial risk protection by 2030 are unlikely to be achieved. Without strong health systems, African countries are unlikely to make significant progress on persistent health challenges as well as emerging epidemics such as non-communicable diseases, antimicrobial resistance and neglected tropical diseases.
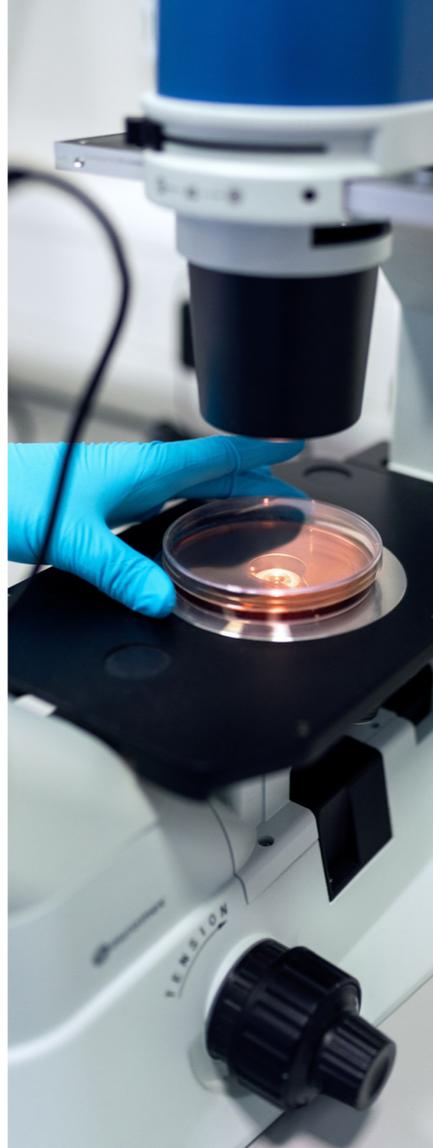
Our health and wellbeing priority focus area seeks to provide capacity strengthening and technical assistance for evidence-informed decision-making. Specifically, we will focus on:

- Designing of inclusive health policies and programmes as well as performance monitoring of existing interventions.

- Achieving universal access to primary healthcare, health financing and financial risk protection, including access to health insurance.

- Addressing inequalities in health outcomes, including for under-served sub-groups such as persons living with disability and older people.

- Universal access to sexual and reproductive health and rights, elimination of harmful practices and gender-based violence, and promotion of adolescent's wellbeing.

Implementation of Our Work

- Supported the Government of Kenya to automate the reproductive, maternal, newborn, child, and adolescent health data from the district health information system and develop a performance monitoring and accountability framework.

- Trained policymakers in Kenya's Ministry of Health at national and sub-national levels on how to access, interpret and use evidence in decision-making.

- Supported Ministries of Health in Kenya and Malawi to develop guidelines for evidence use and in the development of health research agendas.

- Supported the development and national scale up of reporting tool for adolescents sexual and reproductive health services in Kenya.

- Supported in strengthening of linkages between vector control research and policy at the global, regional, national and project levels.

- Supported efforts to investigate barriers to and facilitators of collaborative policy development in Malawi, and coordinated efforts in policy engagement and strategic communications.

Our Current Work

1. Supporting micro-planning for maternal, neonatal, newborn, child, adolescent health, nutrition, and Neglected Tropical Diseases (NTDs) in Kenya, Nigeria, and Ethiopia. Collecting Health Management Information System (HMIS) data assessing health service utilisation in the era of COVID-19.

2. Facilitating informed, objective, inclusive and balanced discussions on the design, development, and use of transformative technologies to address critical health challenges in sub-Saharan Africa.

3. Investigating gender gaps in tuberculosis policy and informing country guidelines and strategies that drive gender-sensitive approaches in efforts to end TB in Nigeria, Kenya, Uganda and Malawi.

4. Generating demand-driven evidence on post-tuberculosis lung disease care as a health priority in Malawi and Kenya.