The Center for Rapid Evidence Synthesis Report 2022



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# About the Center for Rapid Evidence Synthesis (ACRES)

The Center for Rapid Evidence Synthesis (ACRES) is a knowledge brokering and research institution founded in Uganda in 2018 to implement interventions that promote the access to evidence for decision-making in a timely manner.



Vision

To be responsive to decision-makers' needs for evidence ensuring use of evidence at all times that improves inclusivity and equity in decision-making for better and socioeconomic outcomes.



**Mission** 

To provide and engage with timely and responsive high-quality evidence that strengthens policymaking.

# **Objectives**

- 1. To research, evaluate, and innovate pathways and strategies for evidenceinformed decision-making.
- 2. To build and sustain the capacity of researchers, knowledge brokers, and decision-makers in strategies for evidence-informed decision-making.
- **3.** To engage policy networks to improve the implementation of evidence-informed decision-making.
- 4. To build a world-class profile for mechanisms and strategies that promote timely access and evidence use.

# **Our Rapid Response Service**

ACRES' flagship program, the rapid response service now modelled in over 15 countries globally is the first implemented and proven feasible in any low and middle-income country. Under the rapid response service, ACRES engages with decision-makers and stakeholders to ensure that high quality evidence is available to support decision-making whenever it is needed, often within hours to days, up to 28 days.



# **Operational Units**

# Policy engagement and analysis

Aim to understand and analyze the polict context to strengthen EIDM through engagement with policy process

### **Capacity Building**

Train Researchers, knowledge brokers and policy makers on best practices, critical thinking for strengthening EIDM

ACRES THE CENTER FOR RAPID EVIDENCE SYNTHESIS

### Rapid Evidence Synthesis

Provide the best available evidence in a timely manner

### Researchers, evaluation, and innovation

Researchers to understand, appraise, improve and innovate approaches for strengthening EIDM for public systems

# Year 2021-2022 In Brief







## **Our Successes**

# 1. Providing timely access to the best available evidence in health and non-health sectors

This year, we have scaled up to respond to more decision-makers at national and subnational levels respectively.

- At the national level, we have supported processes at the Ministry of Health, Ministry of Gender, Labour and Social Development (MGLSD); Education service commission, Ministry of Education and Sports; Office of the President and Office of the Prime Minister.
- At the district level, we scaled up the service to ten districts from three in 2020. The districts were organized around collaborative regions.

#### i) Response to the COVID-19 Pandemic

COVID-19 brought to the forefront the importance of rapid responses as an approach for promoting evidence use in policy processes. ACRES worked to ensure that evidence was available whilst highlighting different products of the rapid response service. As a result, we developed different products such as rapid review reports that synthesize monitoring and evaluation reports.

### Our Response



#### **RAPID REVIEW BRIEFS**

roduced six rapid response briefs within two weeks to manage ommunity outbreaks and strenghthen laboratory services to romptly detect cases and contacts



#### POLICY DIALOGUE

Held a policy dialogue with Ministry of Health to address vaccine hesitancy in Uganda. It brought together member of the youth groups; religious leaders; researchers, CSOs and the media



#### **CITIZEN PANEL**

Held a citizen panel with teachers from primary and secondary school to discuss factors that promote, and measures that address vaccine hesitancy in Uganda

### 2. Stakeholder engagement within the rapid response service

#### i) Community engagement with the less empowered population.

The Center conducted nine citizen panels among communities of people including the less empowered, such as women working in markets, streets, and local neighborhoods. Citizen panels provide a platform to engage communities with evidence to fit their context and lived experiences. The panels are also an opportunity to empower communities to effectively participate in policy processes.

- Amendment of the labor law to include exclusive breastfeeding for women in the informal sector, these panels revealed that poverty was a major hinderance to exclusive breastfeeding in this sector (four panels).
- Vaccine hesitancy (one panel)
- Strategies to involve males in reducing teenage pregnancies in Kamuli district (four panels)

#### Citizen panel on strategies to involve males to reduce teenage pregnancies in Kamuli district



During the panels, we developed and tested innovative approaches to communicate evidence to the citizens. The center developed illustration briefs where we used pictures and infographics to illustrate messages from the evidence.

i. Deliberative policy dialogues

We conducted three deliberative dialogues to support different policy processes at the national level. The dialogues are a platform for eliciting decision makers' tacit knowledge into the evidence informed decision-making process.

ii. Vaccine hesitancy

After almost two years of schools' shutdown to curb the spread of COVID19, President Yoweri Museveni announced in August 2021 that nursery, primary and secondary schools would reopen only after 550,000 teaching and support staff were vaccinated. Although some teachers quickly embraced vaccination as a means to regain their livelihood, many others were hesitant and distrustful, citing lack of information and fear of side effects as key hinderances. It is against this background that ACRES held a policy dialogue with teachers from Kampala, Mukono, Jinja and Rukungiri districts to discuss factors that promote and measures to address vaccine hesitancy in Uganda. This dialogue was held on October 8 2021. The teachers stated that leaders have an important role in demonstrating the value of vaccines and that healthcare workers should be deliberate about providing clear and easy to understand messages to the public.

iii. Teachers' code of conduct – policy dialogue

Under the Partnership for Evidence and Equity in Responsive Social Systems (PEERSS) consortium, ACRES held a policy dialogue with heads of academic institutions on the Teachers' Professional Code of Conduct. The dialogue revealed the distinction in enforcing the current Code of Conduct (CoC) depending on the education level and school proprietorship. For example, implementation of the CoC in privately owned schools is heavily reliant on the school proprietors whereas government-funded schools often have a void in implementation as penalties of breaching the CoC is unclear, with violators often being transferred to other schools.



### 3. Capacity building

The Center for Rapid Evidence has continued to build capacity of researchers, knowledge brokers, and decision-makers in the rapid response service and evidence informed decision making. The current strategy in capacity building has pivoted towards strategies that strengthen the sustainability of and application of the principles shared.

In the last year, we organized three training workshops including.

- District training to introduce the rapid response service to support decisionmaking
- ii. Civil service organizations to introduce the principles of evidence informed decisionmaking and creating collaborations to strengthen the use of evidence in civil society organizations that target youth policies.



iii. Staff orientation workshop

We are also developed an online curriculum for the rapid response service as a pilot of the online programs to be offered at the Center. The programs shall build knowledge and skills required in for knowledge translation. In addition, we trained researchers based at Busitema in evidence gap maps as an initial step towards creating collaborations to developing a training program for evidence informed decision-making.

### 4. Broadened our collaboration portfolio

In the last year, ACRES expanded its collaborations and partnerships to more than 15 from 10 at the program's inception. New partnerships have been formed with the following organizations: African Institute for Development Policy (AFIDEP); Education Service Commission; Ministry of Health; Malawi Liverpool Wellcome Trust and the Africa Center for Evidence at the University of Johannesburg in South Africa and Uganda National Health Research Organization (UNHRO).

Still, the Center signed memoranda of understanding with civil society organizations including Youth Advocacy Network (YADNET).

## **Our Collaborators**



ACRES has worked with the Ministries of Health and Gender to update the Sector Governance and Management Guidelines and develop breastfeeding regulations to support lactating mothers in the informal sector respectively.



IBFAN worked with ACRES to identify ways to support breastfeeding at the workplace in the informal sector.



Malawi-Liverpool-Wellcome Clinical Research Programme



ACRES collaborated with UNHRO to provide technical support in developing evidence-informed priorities for the health sector for the next five years.





JOHANNESBURG



EDUCATION SERVICE COMMISSION

ACRES and the Education Service Commission held a policy dialogue and two teachers' panels to steer the revision and update of the Professional Teachers' Code of Conduct in Uganda.



OFFICE OF THE PRESIDENT THE REPUBLIC OF UGANDA

Together with the Office of the President, ACRES worked to incorporate use of evidence in the process of conducting Regulatory Impact Assessments (RIA) for policies to be introduced.





### 5. Research, evaluation, and innovation

- i. Developing a measurement index for rapid knowledge translation models The Center is in the process of developing a measurement index for rapid knowledge translation models. The aim of the process is to develop a robust tool that considers the complexity and challenges of measuring outcomes in the application of knowledge translation models including the rapid response service. We are using a mix of methods including a critical interpretive synthesis to develop a theoretical framework accounting for the complexity in rapid knowledge translation models. Other methods will include a modified Delphi process to develop the tool or checklist and testing the tool using three case studies in different country settings. We completed the critical interpretive synthesis.
- **ii.** Strengthening collaborative governance structures; reviewing and updating guidelines for governance structures
- iii. Assessment of the value of incentives in evidence informed decision-making In the past financial year, the Centre developed two major evidence-use incentives namely: evidence-use guidelines and checklists. The guidelines are an easy-to-understand step by step guide on how to apply EIDM concepts, right from identifying a need for evidence to accessing, appraising, synthesizing and contextualizing evidence. Additionally, the evidence-inclusion and evidence-review checklists were drawn. We successfully incorporated the incentives into the Ministry of Health's Governance and Management Structure guidelines.

### 6. Organizational development

i) Center of Excellence for Rapid Evidence Synthesis

In 2018, ACRES was formed as a Center of Excellence to implement, scale-up, and stimulate innovative approaches of the rapid response service in both the health and non-health sectors. Subsequently in 2021, ACRES transitioned into an autonomous entity to scale up its operations and to independently mobilize and manage its financial and human resources. To support the work of the now independent center, five additional staff were recruited, new working space acquired, and operational units piloted to scale up rapid response established.

The units are:

- Rapid evidence synthesis.
- Policy engagement and analysis.
- Capacity building

### 7. Research, innovation, and evaluation unit.

i. Attracted more funding

The Centre has attracted more funding from diverse sources which has supported the expansion of the rapid response service and supported the day-to-day work of personnel. It received funding from the World Health Organization (WHO) to strengthen Ministry of Health's institutional capacity to use health research evidence. Additionally, the Centre received five-years funding to support recruitment and sustainability of additional human resource.

ii. Continuous professional development for staff

In the past one year, ACRES staff have grown in leadership and continued to impact on Evidence-Informed Decision-Making. For example, Dr. Rhona Mijumbi-Deve is now a senior lecturer at the Liverpool School of Tropical Medicine and is building the policy analysis unit at Malawi Liverpool Wellcome Trust Collaboration. She was also appointed to the board of Sunbird AI, a non-profit organization developing artificial intelligence systems with the aim of better use of data technology to inform and guide policy decisions.

Furthermore, Dr. Ismael Kawooya has risen to the rank of Senior Research Scientist from Research Scientist and currently serves as head of the office. Edward Kayongo, a former research scientist was also promoted to the post of Senior Research Scientist and is the contact person for the Partnership for Evidence and Equity in Responsive Social Systems (PEERSS) at ACRES. PEERSS is a global partnership working to advance the use of evidence for progress in social systems.

# **Stories of impact**

#### Promotion of exclusive breastfeeding in the informal sector in Uganda

The Ministry of Gender, Labour, and Social Development (MGLSD), together with partners, conducted consultative regional-level meetings in 15 districts in October 2021 to present findings of studies that would inform provisions within the Employment (Breastfeeding and Childcare facilities) Regulations that was being drafted. The provisions of the regulations aimed improving the working conditions of breastfeeding mothers at workplaces, as the Employment Act, 2006. This was important because the Act did not contain explicit provisions on how mothers could continue breastfeeding after maternity leave.

At the consultative meetings, it was agreed that they include information about the informal sector, which had been left out of the studies. This was needed a month before they had to send the draft regulations to the Ministry of Justice. The Ministry of Gender, Labour and Social Development and the international baby food network (IBFAN) approached the Centre for Rapid Evidence Synthesis to support them with the needed evidence to the question on "How to promote exclusive breastfeeding in the informal sector in Uganda."

A rapid response brief describing the strategies and roles of stakeholders in supporting exclusive breastfeeding in the informal sector was given to the Ministry and IBFAN after two weeks. The ACRES team also presented the evidence to a committee deliberating the provisions of the regulations. Additionally, the evidence was supplemented with the living experiences from two groups of mothers, "less empowered", e.g., working in food "markets" and "empowered", e.g., working in malls. The evidence was translated into illustrated evidence profiles. In these panels, the participants highlighted the fact that it was not about the strategies, but the context within which they live, e.g., most have no alternative to work in the conditions, minimal support at home, informal support networks at work, and negative perceptions for expressing breast milk.

The ACRES team presented the evidence at a national validation meeting organized by the Ministry to inform the draft employment (Breastfeeding and Childcare facilities at Workplace regulations). At the meeting, it was adopted for the Regulations to include the informal sector for their effective implementation.

IBFAN and UNICEF have since increased their support for the informal sector adopting the strategies within the rapid response and citizen briefs. For example, UNICEF renovated the existing breastfeeding corners in markets located in Kampala city, starting with Wandegeya Market. The government has also actively taken steps to improve the infrastructure of markets, with measures including the provision of breastfeeding corners in all newly constructed markets, creating a safe and comfortable space for nursing mothers.

The Ministry of Health got the brief and requested for evidence on how to encourage health professionals to educate breastfeeding mothers while at the healthcare facilities. ACRES was invited to join conversations on a Twitter space organized by the Ministry of Health during the World Breastfeeding week, August 2023. The space had participation from celebrity advocates, influencers, and working mothers who had successfully overcome challenges related to breastfeeding. Their stories would inspire and motivate other mothers facing similar hurdles. Together with Ministry of Gender, Labour and Social Development (MGLSD), Office of the President, Parliament of Uganda and the International Baby Foods Action Network; ACRES has developed breastfeeding regulations to support lactating mothers in the informal sector to exclusively breastfeed their newborns. This includes women doing street vending to those with market stalls and grocery stores. The ACRES team reviewed, summarized and provided research and other evidence on suitable approaches to implement this in a low-resource setting like Uganda. In order to contextualize the synthesized evidence, ACRES conducted citizen panels to engage women in the informal sector to share their lived experience and offer plausible solutions. This information formed the bulk of the recommendations which have been included the final regulations. The regulations are now with the solicitor general.



#### Adoption of evidence-informed decision making by Ministry of Health

ACRES has supported reviewing and updating the Ministry of Health's (MoH) Governance and Management Structure Implementation Guidelines. These updated guidelines exist to ensure effective oversight, coalition building, regulation and accountability in the health system. Additionally, the guidelines guarantee proper coordination between different stakeholders to ensure effective ownership, policy coherence and sustainable programs. Working with the Ministry's Steering Group, ACRES conducted several stakeholder engagements, a policy dialogue and elaborate evidence synthesis to ensure that supportive evidence was adopted. Through the Centre's recommendation, MoH has adopted the principle of evidence-informed decision making in all governance structures to ensure that the best available evidence is incorporated in decision-making processes. The revised guidelines were launched on September 29 2022.



#### Efficacy and safety of convalescent blood products for Ebolavirus disease

On 1st Oct 2022, the dailies reported the death of a Tanzanian surgeon to another Ebolavirus outbreak in Uganda. The doctor was a medical graduate student at Kampala International University and was one of the 15 healthcare workers infected and six dead from the deadly virus. This caused public outcry about the state of healthcare workers during the epidemic and the quality of care received by those who were infected. The healthcare workers were shunning the sick. On 2nd Oct 2022, the Ministry of Health's scientific committee guiding the government's approach contacted the Center for Rapid Evidence Synthesis to support them get evidence on the effectiveness and longevity of neutralizing antibodies from convalescent plasma in the treatment of Ebolavirus disease. There were two camps within the committee: one, was conducting studies on the same and a bank of blood products from survivors of the previous Ebolavirus outbreaks. They argued for compassionate use of the convalescent blood products to save the healthcare workers and the situation. The other camp was in doubt because of the scarcity of the evidence around the products and at worst cause of harm.

The evidence was needed within 48 hours to inform a strategic meeting that would decide on whether to start compassionate treatment or request for a controlled trial on the blood products during the outbreak. The evidence in brief showed that there was a lot of uncertainty on the efficacy of the neutralizing antibodies from convalescent blood products and if these would prevent death or not. The ministry decided to request the scientists to conduct a controlled trial rather than institute the treatment right away.

However, on 14th Oct 2022, the US government donated experimental monoclonal antibodies which had better efficacy.

# **Future Outlook**

- Over the next years, ACRES will continue to secure funds to ensure that vital personnel such as a development economist and educationist are added to the team.
- Implement capacity building in evidence informed decision making for different personnel in governance agencies.
- Incorporate policy dialogues into the policy processes and workplan of Ministry of Health.

## Meet the team



**Dr. Rhona Mijumbi Deve** Director

Dr. Mijumbi is the founding and current director of the Center for Rapid Evidence Synthesis at Makerere University. She is an experienced Public Policy Analyst, Researcher and Evidence Synthesis specialist with interest in the use of evidence in complex decision-making processes.



Prof. Emeritus Sewankambo

#### **Co-Director**

Prof. Emeritus Sewankambo is the Co-Director of the Centre for Rapid Evidence Synthesis and a past Principal of Makerere University's College of Health Sciences. He has devoted his last 17 years of professional life to the advancement of medical education, research, and capacity development.



**Dr. Ismael Kawooya** Research Scientist

Dr. Kawooya is a research scientist with the Centre for Rapid Evidence synthesis. Wielding a wealth of experience in supporting policy and decision making, he coordinates implementation of the rapid response service supporting decision making at district level.



Edward Kayongo Research Scientist

Kayongo is a research scientist and currently coordinates implementation of the Rapid Response Service in the Education and Gender Sectors at national level. He provides policy makers with **20** imely and contextualized evidence.



Pastan Lusiba Research Scientist

Pastan is a research scientist with extensive research experience in both quantitative and qualitative approaches. He Masters in Clinical Epidemiology and Biostatistics and an Implementation Science fellowship from Makerere University.



Philip Orishaba Research Scientist

Orishaba boasts of more than five years of research and evidence synthesis experience. He is passionate about evidence synthesis of "what works" in health, education, gender, agriculture and labor systems for sustainable livelihoods.



**Perez Kirya Izizinga** Research Assistant

Perez Kirya holds the position of Administrator for the Centre of Rapid Evidence Synthesis. He is responsible for the administrative tasks for the center including managing event bookings, travel and team building. He is highly adept in strategic program administration, planning and management.



**Caroline Nakalema** Research Assistant

Caroline is a knowledge translation practitioner at the Centre for Rapid Evidence Synthesis. Her work involves taking research evidence into policy and practice through the Rapid Response Service. She has supported decision-makers at the national and sub-national levels in making evidence-informed decisions.



**Faith Nakirija** Administrator

Faith supports the regional administration, communication, and coordination of activities with stakeholders. She is involved in planning and budgeting through keeping track of financial and grant records to determine expenditure and execution of planned activities.



#### **Peter Fulgence Kasadha** Research Assistant

Peter specializes in the Rapid Response Brief services, initiates and maintains engagement with policymakers and stakeholders, contributes and takes part in capacity-building programs, carries out monitoring and evaluation of the different projects under ACRES including HIGH-RES and PEERS. ACRES continues to lead Evidence - Informed Decision Making in SubSaharan Afria, setting the trend in innovative knowledge translation mechanisms that enhance the rapid response service.





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