

Effective Health Care Research Programme Consortium

Better decisions in health in low- and middle-income countries

BACKGROUND AND SCOPE

- The Effective Health Care Research Programme Consortium aims to increase evidenceinformed decisions to improve health and health care for the poor in low- and middleincome countries (LMIC).
- The work builds on DFID support since 1992 in building the science, the reviews, the networks, and the influence of The Cochrane Collaboration in Africa, Asia, China and globally, through the World Health Organization (WHO).

AIMS

- We aim to synthesise relevant and reliable research to contribute to a global evidencebase to make health care more effective, improve health, reduce illness and death, and avoid the public and providers wasting money on ineffective health care.
- We focus on producing Cochrane Reviews and other systematic reviews in infectious diseases, (malaria, tuberculosis (TB), and diarrhoea); HIV; mental health; reproductive health; and health systems; all relevant to the health of the poor, particularly women, in LMIC.

OUR PEOPLE

- Our contributors are embedded in The Cochrane Collaboration through large research networks in Africa, South Asia, and China; and through global teams synthesising research in infectious diseases and health service organization and financing.
- All have track records in preparing high quality, systematic reviews relevant to LMIC; all are skilled in effective dissemination and know how to influence policy; and all have highly effective working relationships with each other.

Capacity development

• The Consortium is committed to capacity development. We published 28 peer-reviewed publications in the past year with LMIC first authors; 18/28 (64%) of these first authors were women.



Participants at GRADE workshop, South Africa October 2013

INSTITUTIONS

- The South Asian Cochrane Centre & Network, Vellore, was established in 2005. The network currently has sites in India, Pakistan, Bangladesh and Sri Lanka, and supports and mentors the work of over 448 Cochrane authors and nine Editors.
- The Centre for Evidence-based Health Care was established in 2011 at Stellenbosch University and is set to become a Centre of Excellence for evidence-based healthcare in the African region.

Fellowships & Training

- We increased the individual support to review teams, offering visiting fellowships of 2-4 weeks in Consortium centres of expertise. This is an effective way of moving reviews forward.
- Consortium staff carried out several bespoke training courses such as primers in systematic reviews and GRADE workshops for policymakers.
- Consortium staff helped run a training course in Cornell University USA for reviews in nutrition.



Attendees at a primer in systematic reviews, Dar Es Salaam, August 2012



Attendees at Cornell University course, July 2014

OUR OUTPUTS

- We published 23 new Cochrane Reviews, eight updated Cochrane Reviews, four other systematic reviews and 12 articles of primary research in 12 months from May 2013. More than half are Open Access (24/47).
- We evaluated the WHO guidelines process. The publication has had over 1000 pdf downloads and has helped strengthening of quality control processes and systems in WHO.

Policy impacts

- Seventeen Cochrane Reviews used to guide the WHO Technical Expert Group in drafting the new malaria guidelines.
- A Cochrane review and update about TB diagnostic tests fed into WHO policy recommendations.
- The WHO has issued a statement that iron can be used to help prevent anaemia in malarial areas on the basis of our Cochrane review on the topic.
- The 2012 update of the review evaluating the effect of routine deworming of children continues to have impact, with 3ie commissioning replication analysis of one trial from Kenya.
- A Cochrane Review of decentralisation in HIV treatment commissioned by WHO, and helped change policy in the WHO HIV guideline.
- The Kenya Paediatric Association Guideline Panel with methodological input from UK Consortium staff, convened three guideline panels on priority topics, including rapid fluid bolus for children with septic shock.



Kenya Paediatric Association Cord Care Guideline Panel, Mombasa April 2013

Partners

- University of Stellenbosch, South Africa
- Christian Medical College Vellore, India
- Chongqing Medical University, China
- Liverpool School of Tropical Medicine, UK
- Norwegian Knowledge Centre, Norway





