

RPC no.7

Final Five-Year Report

April 2005 to March 2010

1. BACKGROUND INFORMATION

Title of RPC:	Effective Health Care Research Consortium
Reference number:	RPC no.7
Period covered:	Years 1 to 5: April 2005 to March 2010
Name of lead institution and RPC Director:	Liverpool School of Tropical Medicine (LSTM) Paul Garner (Professor)
Report Date	10 May 2010

Key RPC Partners:	Link Person	Designation
Nigeria Effective Health Care Alliance Programme , Calabar Institute of Tropical Diseases Research and Prevention, College of Medical Sciences, Calabar	Martin Meremikwu (Professor)	Partner
China Effective Health Care Network , Chongqing Effective Health Care Research Programme, School of Public Health	Wang Yang (Professor)	Lead Partner
South Asian Cochrane Network and Centre, India Effective Health Care Research Programme, Vellore	Prathap Tharyan (Professor)	Lead Partner
South African Cochrane Centre , South Africa Effective Health Care Research Programme, MRC, Cape Town	Jimmy Volmink (Professor)	Lead Partner
Department of Clinical Epidemiology , College of Medicine, University of the Philippines, Manila	Issa Alejandria (Dr)	Partner
Centro de Estudos de AIDS/DST do RS (CEARGS), Cochrane Sexually Transmitted Diseases Group, Porto Alegre/RS, Brazil (until Feb 2009)	Mauro Cunha Ramos (Dr)	Co-ordinating Editor
Faculty of Health Sciences, Stellenbosch University, South Africa	Jimmy Volmink (Professor)	Lead Partner
Effective Health Care Research Consortium (incorporating the Cochrane Infectious Diseases Group), Liverpool School of Tropical Medicine	Paul Garner (Professor)	RPC Director
World Health Organization		
Medicines Policy and Standards	Sue Hill (Scientist)	Partner liaison
Alliance for Health Policy and Systems Research, Systematic Review Centres	Kent Ranson (Scientist)	Alliance Acting Director
Cochrane Collaboration	David Tovey (editor in chief)	Collaboration liaison

Countries covered by research so far:

Cochrane Infectious Diseases Group and The Cochrane Collaboration: worldwide

Effective Health Care Research Consortium:

African, South Asian and China Partner Leads manage semi-autonomous regional and country networks.

In Africa, the active network includes South Africa, Kenya, Nigeria, Tanzania, Uganda, Ethiopia, and Cameroon;

In South Asia, it includes India, Bangladesh, Pakistan, Sri Lanka;

China Network includes Partners in Philippines and Thailand.

Brazil (through Centro de Estudos de AIDS/DST do RS) from April 2008 to December 2009

Through collaboration with the Alliance Health Policy and Systems Research Centres: Bangladesh, Chile, China, Uganda

2. SUMMARY

Purpose

The purpose is to increase decisions relating to the health sector based on best available evidence in low- and middle-income countries.

We do this by:

- Preparing and updating reliable systematic reviews of all relevant research related to specific policy questions.
- Promoting access and use of evidence-informed approaches, particularly in relation to the Millennium Development Goals (MDGs). This we do in a variety of ways through several policy networks and stakeholder groups.

The RPC is closely integrated with the global Cochrane Collaboration, which is a network of 24,014 people in 109 countries committed to preparing reliable, up to date summaries of research evidence about the effects of health care.

In terms of global decision-making:

- We have worked directly with World Health Organization (WHO) through commissioned Cochrane Reviews, and participating in guidelines groups in nutrition, tuberculosis (TB) and child health.
- We have contributed to the movement forward in evidence in WHO and other multilateral and bilateral organizations.
- Our reviews are widely used by the WHO in guidelines processes in all areas.
- We have produced reviews that have been taken up by lobbying groups and affected change (for example, stopping the sale of ineffective electronic mosquito repellents on commercial airline flights).

Table 1 outlines a few of the reviews that have contributed influenced to policy at a global level, with the key messages they contain.

Condition	Intervention	Key message	
Malaria	Artesunate for severe malaria:	Artesunate reduces deaths in severe malaria by 40% compared to quinine	
	Artemisinin combination treatments for malaria:	Dihydroartemisinin-piperaquine is highly effective	
	Nets in pregnancy:	Insecticide-treated nets reduce the risk of miscarriage by one third in Africa	
	Intermittent presumptive treatment:	Malaria illnesses in children halved by taking antimalarial drugs regularly	
	Iron supplements in malaria:	Iron supplements in children are safe in malarial areas	
	Sonic repellents for malaria:	Sonic mosquito repellents do not work	
ТВ	Direct observation for TB:	Direct observation does not increase adherence	
	Steroids for TB meningitis:	Steroids reduce deaths by a fifth in TB meningitis	
Diarrhoea	Hand washing:	Hand washing reduces diarrhoea episodes by 30%	
	Zinc:	Zinc makes illness shorter in children with diarrhoea	
Helmintic drugs	Anthelmintics for children:	No evidence that deworming drugs in community programmes improve school performance	

Table 1. Systematic reviews we prepared with clear messages

In terms of regional decision making: we have influenced national policies in malaria in India and in Nigeria; had influence on policies in HIV and health systems in South Africa; and have been influencing policy makers in the Ministry of Health (MOH) in China around using evidence in their policy formulation.

Outputs

1. Reviews

- We have been astonishingly productive, completing 65 new systematic reviews, and completing 28 updates of existing reviews.
- We have developed new methods, and are working on reviews in health systems, and in reviews relevant to fragile states.

2. Promoting access and use

- One click free access to *The Cochrane Library* provided by the publisher was a result of our lobbying and our research.
- A national site licence for *The Cochrane Library* in India paid for by the Indian Council for Medical Research (ICMR) was because of Effective Health Care Research Consortium efforts, led by the South Asian Cochrane Centre Director.
- We have prepared many summaries and derivative publications to help ensure our reviews and the results in them reach a variety of audiences.

Capacity development

- We have contributed to rigorous scientific training through authorship (equivalent to apprenticeship) for Cochrane reviews: of 65 reviews completed, 41 first authors are from developing countries. The reviews are published in The Cochrane Library, which has an impact factor of 5.2.
- Our RPC has contributed to the establishment of a) the South Asia Cochrane Centre in India, supported by the Indian Council for Medical Research; b) the Centre for Evidence Based Nutrition, in South Africa; c) the China Evidence-Based Health Care Network and the Joint Dissemination Strategy between the Ministry of Health, WHO and Universities.
- Two centres (Africa, India) have been given World Health Organization approval as primary registers for the prospective notification of all randomised controlled trials.
- We have developed management systems in lead partners that ensure rigor, accountability, and ensure responsiveness in funding, and an ability to take remedial action when required.

Communication strategy

Policy makers, guideline developers, organizations delivering care, individual clinicians and the public are our key stakeholders. We have completed Cochrane reviews that in response to policy maker needs. *The Cochrane Library* impact factor of 5.1 shows they are clearly being used.

In terms of communication to influence decision-making, we have had more than 15 press/web pickups for 15 of our reviews. This includes press coverage in the Daily Express, Daily Telegraph, The Times (UK), The Times (India), and Science (see Box 2 and Appendix 2).

Value for money

Reviews: We estimate, if we apportion half the grant to production of reviews, the cost is £22,000 per new or major updated review. Given most Health Technology Assessment (HTA) commissions are for at least twice that amount, this is remarkably cost effective.

Multiplier effect: This grant contributes to The Cochrane Collaboration, an organization preparing reviews in all areas of health care, and some relevant to developing countries. The total number of new Cochrane Reviews published April 2005 to March 2010 is 1924.

Leverage: The Consortium is highly effective in leverage on the whole Cochrane Collaboration to carry out reviews relevant to low- and middle-income countries. As the total annual investment in Cochrane activities is £18 million a year, this enhances our value for money.

3. HIGHLIGHTS OF THE RESEARCH

A. Reliable reviews & value for money

- 1. **Targets:** We outperformed on our target for systematic review production (total 65). Each is the equivalent of a small research project, taking several years and involving many people in the production.
- 2. **Multiplier effects:** The Cochrane Collaboration published 1924 reviews in this period, many of these relevant to low- and middle-income countries. So our contribution has a large multiplier effect.
- 3. Leverage: £16 million is the total amount annually invested in Cochrane activities globally. This Consortium levers this resource towards MDG and poverty relevant reviews.

1. Targets

We outperformed on our targets. This is total systematic reviews, and includes the Reviewers for Africa Programme of which we are part, and the HIV reviews prepared under this umbrella:

Category	Target	Achieved	% against target
New reviews	45	65	44% over target
Review updates	22	28	27% over target

On target in the Cochrane Infectious Diseases Group (details in Annex 5).

For our targets in health systems reviews, we contributed to the 'Centres for Systematic Reviews of Health Policy and Systems Research in the South' who have completed two Cochrane reviews, with a further 4 in progress.¹

For methodologically challenging reviews, we advanced the methods in a variety of different areas, including research in fragile states (see Box 1).

Our brief set by the Collaboration is infectious diseases. Figure 1 gives the breakdown of reviews by topic (details in Annex 5).

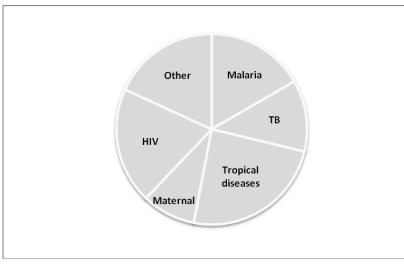
2. Multiplier effects

This grant is part of the UK's contribution to The Cochrane Collaboration. The number of new Cochrane Reviews published between April 2005 and March 2010 (Issue 2, 2005 to Issue 3, 2010) is 1924. The number of updated Cochrane Reviews published between April 2005 and March 2010 is 924. This includes reviews prepared by groups in pregnancy and childbirth, fertility regulation, acute respiratory tract infection, tobacco addiction, and other areas relevant to low- and middle-income countries.

There is thus considerable added value to this investment.

¹ See: <u>http://www.who.int/alliance-hpsr/researchsynthesis/project2/en/index.html</u>

Figure 1. New Cochrane reviews produced by the RPC



Health systems reviews excluded as carried out through separate project

3. Leverage

The total annual investment in The Cochrane Collaboration globally is £16 million. Consortium leadership from the partners in India, South Africa, Nigeria and UK affords considerable leverage on the massive resources by:

- Demonstrating that **people** from low- and middle-income countries can make brilliant authors and editors, but that we need to develop inclusive policies and strategies.
- Advocating the need to prioritise **reviews** that tackle the MDGs and are relevant to people in poorer countries.
- Helping ensure **linkage** with global priorities and fostering communication between the World Health Organization and the Cochrane Collaboration.
- Providing exemplary models of **capacity development** that others can draw on.

We also influence The Cochrane Collaboration in other ways related to review quality. For example, we developed the style guide, and were part of the group that was instrumental in creating a post for an Editor in Chief of *The Cochrane Library*.

Box 1. Methodologically challenging reviews

Synthesis of qualitative research: barriers to TB treatment adherence; led to an MRC grant to review factors influencing uptake of malaria preventive interventions in pregnancy.

Studies on mosquitoes: synthesised entomological research in electronic mosquito repellents review.

Treating dangerous pathogens: treatments of SARS, and Crimea-Congo Haemorrhagic Fever, both commissioned by the WHO.

Reviews in health systems: Strategies to increase doctors in underprivileged areas; strategies to expand health insurance coverage; supervision of health workers.

Fragile states: whether investment in health services improves stability.²

² Gordon S, Baker A, Duten A, Garner P. Health and Conflict Study. Study for the UK Cross Government Group on Health and Conflict 2010 (draft report).

B. Influence global policy³

- 1. We have helped stimulate demand and use of evidence in the World Health Organization.
- 2. Our reviews were used by WHO to update the malaria guidelines.
- 3. Our reviews were used in a global public campaign that stopped airlines selling ineffective mosquito repellents.

1. Stimulate demand and use of evidence

<u>The World Health Organization</u> has established a Guidelines Committee with substantive oversight over all guideline development. Guideline development in WHO has changed dramatically as a result and central to this are systematic reviews, particularly Cochrane reviews, and GRADE summaries from these.

The Effective Health Care Research Consortium is involved **in malaria.** We (UK, India, South Africa) prepared a Cochrane Review relevant to the changes being considered by the panel, set up a GRADE sub-group, and considered the main questions the panel were addressing in relation to the evidence; in **TB**, the Consortium (UK, India) are part of a group considering the relationship with nutrition and preparing relevant Cochrane Reviews in this regard. In **nutrition**, Consortium Cochrane Reviews are being widely used (India, South Africa, Italy), and the panel includes our authors.

At a recent WHO Technical Consensus Meeting for the Partnership on Maternal, Newborn and Child Health to establish a core set of interventions, the starting point for every intervention was whether a Cochrane Review had been carried out.

<u>The Gates Foundation</u> use Consortium reviews to inform their global policies. For example, the zinc in diarrhoea review is being used for policies around distributing zinc; the iron in malaria review is the subject of the first annex of a global consultation on this topic.

<u>The Department for International Development</u> has adopted the need for reliable research syntheses to help guide policy decisions.

2. Global and regional policy decisions

Review that specifically led to changes in practice:

- Artemisinin-based combination treatments (ACTs) Cochrane Review led the WHO panel to recommend one new combination and to drop two others.
- Primaquine in vivax malaria Cochrane Review led India to alter their guidelines.
- Beta-blockers review from South Africa influenced UK policy, as the NHS did not relegate beta-blockers in the treatment of hypertension. This review was the third most accessed Cochrane Review in 2007.

Reviews that consolidated the evidence base to improve investment:

- Insecticide-treated mosquito nets in pregnant women Cochrane Review quantifying the impact strengthened the policy push for this.
- Intermittent treatment for preventing malaria in children.
- Cochrane Review of hand washing to prevent diarrhoea.
- Cochrane review of zinc in diarrhoea.

³ See also Appendix 1. DFID Research Case Studies. Items 1-3

Reviews that raised doubts about policies and investments:

- Anthelmintic drugs in schoolchildren Cochrane Review update raised doubts about continued investment in this area: we understand DFID has used the review of routine anthelmintic drugs in school children to make funding decisions around this intervention.
- The iron in malaria Cochrane Review questioned the recent WHO meeting that changed the guidelines about iron supplementation in malarial areas.

3. Public campaigns

The electronic mosquito repellents review contributed to KLM and British Airways (BA) withdrawing the product from sale, and was reported in Science (see Box 2 and Appendix 1, item 3).

Box 2. Examples of newspaper coverage of RPC reviews



C. Successful communication

- 1. Our reviews had high press coverage.
- 2. One-click free access of *The Cochrane Library* in low-income countries is the result of our lobbying and our research.
- 3. We were pivotal in India's national licence to *The Cochrane Library*.
- 4. Humanitarian disasters project, Evidence Aid, established for disseminating relevant information.
- 5. Range of products prepared for a variety of stakeholders
- 6. We continually develop, extend and actively manage our Communication Strategy.

1. Press coverage

A total of 26 Cochrane reviews from the Effective Health Care Research Consortium has at least one press release issued. Box 2 gives examples of some of the highlights. Four of our reviews were made available as Podcasts on *The Cochrane Library* website.

We have a 'review specific dissemination strategy' which we apply to all new reviews that have some potential significance in achieving the MDGs. This checklist ensures we maximise the impact and dissemination of the review at the time of publication.

Box 3. Media attention and RPC reviews: highlights ⁴

The Times and New Scientist on malaria vaccines (2006).

New York Times on malaria vaccines (2006); China pregnancy review (2007).

UK Government press release by Hilary Benn, on mosquito nets in pregnancy (2006).

Daily Express on electronic mosquito repellents (also 97 news items, 2007).

Science on a campaign to stop electronic mosquito repellent sale by KLM & BA (2010).

Daily Telegraph on hand washing to prevent diarrhoea (also 49 news items, 2008).

ABC Radio National News feature on the South Asian Cochrane Centre (2010).

In addition, several reviews had large media coverage:

Zinc for treating diarrhoea: 27 news items

Circumcision for preventing HIV: over 100 news items

2. One click free access in low-income countries

Harriet MacLehose and Paul Garner contributed to a document lobbying for free access for developing countries that led to Wiley announcing free access of *The Cochrane Library* for low-income countries, defined as all HINARI band 1 countries.

Our research on access to electronic health information in Africa, led by Helen Smith, highlighted the severe problems with HINARI. This contributed to Wiley's decision.

⁴ Appendix 2 has a wider range of press cuttings.

3. India site licence⁵

The IMCR purchased a national subscription in January 2007 to *The Cochrane Library.* This was a deal brokered by the South Asia Cochrane Centre following a symposium in Delhi between the South Asian Cochrane Centre Director, the Effective Health Care Research Consortium Director, and the ICMR. This means everyone in India can access *The Cochrane Library* for free. ICMR have just renewed this commitment for 2010–2013.

Before the site licence (2006) an average of 500 full text articles were downloaded each month. In 2009, this had risen dramatically to an average of 4,500 full text downloads per month.

4. Evidence Aid for humanitarian disasters

A resource prepared by The Cochrane Collaboration, utilising *Evidence Update* summaries where they are available. This product summarises evidence relevant to crisis situations and is made available to humanitarian workers via The Cochrane Collaboration website. Consortium staff collaborated with the Australasian Cochrane Centre in a full evaluation of this; aid workers thought it a useful product, but the extent to which it is actually accessed and used is unclear. Relevant *Evidence Update* summaries were translated into Spanish for use in the recent Haiti earthquake.

http://www.thecochranelibrary.com/details/collection/587779/Cochrane-Evidence-Aid-resources-for-Chile-and-Haiti-earthquakes.html.

Following the evaluation, we are examining other options for tailoring products to the information needs of this stakeholder group.

5. Range of products prepared

Evidence Update: UK – prepared exclusively for use in training and advocacy. *Evidence Update* has been published in *Africa Health Journal* since 2002, and is translated into local languages by some Partners (China, Russia). In India, *Evidence Update* summaries are distributed to over 1000 doctors in rural and urban areas.⁶

http://www.liv.ac.uk/evidence/

Support Summaries: South Africa – prepared in collaboration with the Norwegian Knowledge Centre. These focus on reviews in maternal health, child health, and health systems.

http://www.support-collaboration.org/summaries.htm

PICO pilot: We are participating in a pilot project with *The Cochrane Library* to develop Cochrane PICOs which are concise summaries of Cochrane Reviews, written to a template, that will be a readable, digestible, 'entry point' to sit between e-textbooks such as 'Essential Evidence plus' or decision support applications, and full text Cochrane Reviews. The PICO is based on our *Evidence Update* product.

Others: Increasingly, other infomediaries and publications are drawing on our reviews, including *Evidence Based Child Health: a Cochrane Review Journal* (abstracted and commented on five of our reviews); *International Journal of Epidemiology* (abstracted and commented on five of our reviews), and *Clinical Evidence* (BMJ publications) continue to use our reviews.

⁵ See Appendix 1, item 4. National subscription to *The Cochrane Library*, India.

⁶ See Appendix 1, item 5. Influencing medical practice in India.

6. The Communication Strategy

We have a clear vision for communication; we have an experienced and proactive communication specialist, and through our communications strategy strive to demonstrate a clear link between generating evidence, and using evidence. Figure 2 shows how the communications strategy operates.

A culture of credibility, respect, combined with research responsiveness led by demand and regional priorities are the trademarks of the Consortium. Communications activities over the five years have increased year on year to support this. The global communications strategy is based on a three tiered approach (annex 4):

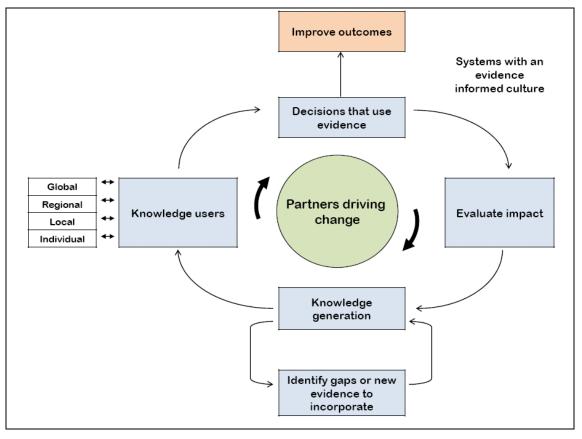
- 1) disseminate tailored synthesis ('push');
- increase dialogue with policy makers in planning reviews, and interpreting ('exchange');
- 3) increasing demand for evidence ('pull').

Each partner outlines plans for communications activities and these are continually developed and actively managed to reflect research and policy priorities.

The Liverpool team provides support and leads on the strategic direction for communications within the Consortium. It works with Consortium partners to maximise their effectiveness in the dissemination of research and review findings and increase the use of the evidence in a local, regional, national and international context.

Qualitative research has been conducted to identify barriers and facilitators to research uptake. These findings have fed into policy discussions at DFID and WHO and have been debated in the *British Medical Journal*.⁷

Figure 2. The global communications strategy



⁷ Appendix 1. item 9. Access to electronic health knowledge in five countries in Africa.

D. Dynamic, effective regional programmes

Regional programmes have:

- Strong leaders with a collaborative, supportive ethos;
- An impressive array of research, development and communication activities;
- Clear evidence their skills and knowledge are respected and needed by ministries.

There are existing strong linkages between Nigeria, South Africa and India, through Cochrane activities; the Effective Health Care Research Consortium helped the Philippines and China to work together; and in addition, the RPC increased communication between China partners and India.

South Asia Programme

Prathap Tharyan set up the South Asian Cochrane Network during this period, consisting of 22 institutions in the region, including Pakistan and Bangladesh. He worked with the Effective Health Care Research Consortium and the ICMR to highlight the importance of systematic reviews in policy development. In an important workshop in Delhi hosted by the ICMR in 2006, in which the Consortium Director participated, the following outcomes were achieved:

- Commitment of ICMR to a national site licence for *The Cochrane Library*, making it freely available to anyone living in India.
- An ICMR Development grant for the Cochrane Centre.

Prathap then succeeded in registering as a Cochrane Centre, which requires certain stringent criteria are met; and has established a dynamic training and author support programme. Recently the Consortium has seconded a member of staff, Dave Sinclair, Editor with the Cochrane Infectious Diseases Group, to help train and organize review production in Vellore.

The impact of the Centre has been massive: since 2007, there have been 25 titles registered, 11 protocols published, and 13 Cochrane Reviews published.

Prathap successfully lobbied the government to provide access to *The Cochrane Library* nationwide; the ICMR agreed to fund an initial site license in 2008 and have just renewed this commitment for 2010–2013 (Appendix 1). The figure for full text downloads in 2009 was 54,522.

Prathap has done extensive work on highlighting the need for medical journals in India to improve their reporting requirements of authors, and also for the need for trials registration. The Consortium and Prathap were instrumental in India gaining primary register status for clinical trials, which is now run by the ICMR (see <u>http://www.ctri.in/</u>).

Prathap and the Consortium have been instrumental in links with WHO related to infomediary activities, and this has led to the Indian Government formally requesting WHO support the development of Evidence-Informed Policy Network (EvipNet) in the country.

In addition, Prathap has organized two large international meetings in Vellore on evidence-informed health care, and an extensive training programme in systematic reviews and their interpretation. He was recently interviewed by ABC Radio National, Australia on his work in trials and evidence-based psychiatry.

Africa Programme

South Africa

The Co-ordination Centre for the Region, the South African Cochrane Centre (SACC) had a number of notable successes. It managed the large Nigeria Programme, and the Reviewers for Africa Programme, with a number of authors completing their reviews. The SACC carried out work in Cameroon, supporting authors, and also is developing links with Ethiopia, with a fellow visiting them and initiating activities in his own hospital.

As part of the European and Developing Countries Clinical Trials Partnership (EDCTP) Grant (of which Liverpool are a collaborator) the WHO approved the SACC a primary register for Randomized Controlled Trials in Africa. This is a major coup for the SACC, for The Cochrane Collaboration, for EDCTP and for South Africa.

At Stellenbosch University, Jimmy Volmink is establishing the Centre for Evidencebased Nutrition, with a three year budget provided by the University. This will also take into account Food Security issues, and they are currently scoping reviews that might be relevant in this field.⁸

On the policy side, the SACC chaired a panel developing evidence-based guidelines for first aid programmes in sub-Saharan Africa, sponsored by the Red Cross Societies, focusing on injuries and diseases common in Africa for first aid training in the country.

The SACC (Nandi Siegfried) was part of the WHO antiretroviral guidelines update, preparing rapid advice summaries on antiretroviral therapy in adults, and also in children and adolescents.

Nigeria

Martin Meremikwu has led the Nigerian Programme with involvement of Cochrane authors across the country. He has involved the Minister for Health in deliberations about a Cochrane Centre, and has had considerable input to state decision making in developing a malaria control programme.

In terms of review output, Nigerians have had some of the highest impact reviews of the period, for example, hand washing for diarrhoea; malaria and iron supplementation; and preventing adolescent pregnancy The Calabar Institute for Tropical Diseases Research is providing some author support, and the first Reviewers for Africa Programme held outside South Africa was run in Abuja in 2009.

Martin has organized a meeting and training session on evidence-based practice with the West Africa Health Organization.

In terms of policy influence, the partner manager is a key central resource to Federal and State level malaria control programmes.⁹ He has contributed to the Cross River State/Canadian Red Cross Free Bed net Evaluation Programme; been part of the team evaluating Africare/Shell Health Intervention project in six Niger Delta States; and participated in a TB reduction programme in some states.

As part of the partner commitment to communicating review findings and evidencebased materials nationally and locally, Martin established a media liaison office based in Lagos, which co-ordinates interaction with the media and journalists.

⁸ See Appendix 1, item 10. Centre for Evidence-Based Nutrition, South Africa.

⁹ See Appendix 1, item 8. Improving malaria policy in Cross River State, Nigeria.

Far East Programme

China

China has established a successful programme in influencing policy.

Partners in Chongqing established the successful joint dissemination project for evidence-based health policy and public health research in China in collaboration with WHO China Office, Ministry of Health (MOH), China, Shandong University and *Chinese Journal of Evidence-based Medicine*. The collaboration helps promote the use of evidence-based health decision-making in China by disseminating summaries and commentaries on original systematic reviews in the *Chinese Journal of Evidence-based Medicine*, on project websites and in various workshops. Since the beginning of the project, 36 papers have been published in total.¹⁰

The China Network are directly linked into the Government Health Policy Support Project (HPSP) which supports the development of equitable and pro-poor health policies and guidelines and improve the evidence supporting the policy making process. Consortium staff contributed to workshops for HPSP staff outlining the methods and options for synthesising evidence on health policy questions. The Network has subsequently been commissioned by MOH to produce systematic reviews in a number of areas.

Philippines

The Philippines team during this period worked closely with the China team. In an initial meeting of all people interested and working in evidence-based health care in China, a network was formed to enhance communication. The Manila group came to this meeting, along with Prathap Tharyan, in our initial plans to regionalise management and encourage communication.

The Philippines team work on a portfolio of reviews and some include the China team. They carried out a range of projects – they worked with the Health Policy Development Program which assists the Department of Health (DOH) in reviewing and crafting policies, preparing briefing notes and policy documents in TB control, policy briefs on HIV/AIDS, prepared a family health booklet, and contributed to the development of Clinical and Service Guidelines for the Family Health Book Core Service Package.

The group also contributed to an integrated policy framework for the Avian Influenza Preparedness Program in response to the DOH Emerging and Re-emerging Infectious Diseases control programme.

They also carried out a feasibility project of sending SMS reminders to TB patients, and are working with the partners in China to repeat this project.

¹⁰ See Appendix 1, item 6. Joint Dissemination Project-getting research into policy in China.

E. Sustained capacity development

- 1. The majority of our reviews have a first author from a developing country.
- 2. We have won most of the Cochrane prizes for best developing country author.
- 3. We have developed a management structure that ensures rigor and accountability.
- 4. We have examples of substantive institutional and individual capacity development ¹¹

1. First author from a developing country

Of 65 reviews, 41 first authors from developing country

We publish, on average, eight reviews per year with a developing country first author: that is two out of three of all our reviews, in a peer-reviewed journal with an impact factor of 5.1. This single fact is an important indicator of our capacity development, particularly as most of these people have never prepared a systematic review before.

2. Prizes

The Kenneth Warren Prize is awarded annually to a national living in a developing country, for a review that is judged to be both of high methodological quality and relevant to health problems in developing countries. Consortium supported reviews and authors have won two out of the four awards made in the period, and a third who is part of the SACC:

2007 – Gawrie Galappaththy, Ministry of Health, Colombo, Sri Lanka. Primaquine for preventing relapses in people with Plasmodium vivax malaria.

2008 – Martin Meremikwu, University of Calabar, Nigeria. Chemoprophylaxis and intermittent treatment for preventing malaria in children.

2009 – Nandi Seigfried, Co-director, South African Cochrane Centre. Male circumcision to prevent HIV.

3. We develop management to ensure rigor and accountability

We have a cohesive strategy of management development within the Consortium which includes:

Consortium Executive Committee

This comprises the main leads (from India, South Africa, and UK). We decide on sanctions when partner performance is low, which includes stopping funding, and appraise all partner work plans before contracts are agreed. Here are some examples of good practice by the Consortium Executive Committee:

The Committee considered the Tatarstan work plan to be inadequate and the partner was dropped.

The Committee put tight conditional milestones on the Sexually Transmitted Diseases (STD) Group (Brazil) for the first year funding, and when these were not met, withheld the second year.

The Committee also decide on management of any projected potential under-spend in their October meeting.

¹¹ See also Appendix 1, items 11-16.

Consortium contracts

All partners have contracts, with specified milestones and timelines. This also includes various policies the partners sign up to, including a sexual harassment policy. This policy shifted norms within one partner organization, and indirectly helped the partner to deal firmly with sexual harassment in his organization.

Financial management support

At least one partner's organization has limited accounting capacity. To avoid problems, he established an NGO to avoid the institution dipping in to his funds, but then needed help with accounting. The Consortium has supplied accountancy consultancy to help.

Regional management

In Year two we started moving towards regional management. So in Africa, for example, South Africa is the lead partner and Liverpool and Cape Town are jointly managing the Programme, with joint visits and joint teleconferences with partners in other countries in Africa.

In the development of a Kenya partner, this was instigated by Cape Town, and developed jointly with Liverpool, with several joint visits to negotiate a programme of work with people we knew. Despite considerable political pressure to fund this group, there was clear evidence that: a) a collaborative network in the country had not been formed and b) the budget was over inflated. Because of the clear trusting relationship between Cape Town and Liverpool, a difficult decision was made not to go ahead.

Projects, flexible funding, academic achievement

Figure 3 shows the ethos of the Effective Health Care Research Consortium and the process by which we aim to build **institutional competence**. This is enhanced by the supportive nature of The Cochrane Collaboration, and that our Consortium authors are immediately accepted into this large international network. The Consortium nimble funding helps support good communication and implementation initiatives.

4. Examples of capacity development

Scientific credibility and capacity to influence change are linked **within individuals.** Partners develop capacity in systematic reviewing and applied health services research by contributing to the science base, and through this individual Partner credibility is strengthened. The Consortium capacity development cycle is illustrated in Figure 4.

Editors from middle and low income countries

The Cochrane Infectious Diseases Group recruited two new editors from developing countries in the period. The Effective Health Care Research Consortium has initiated a training course, to increase the editing skills base in African authors so they are more likely to be made editors, due to run in September 2010.

The Consortium also included capacity strengthening in statistics, with the appointment of a statistician (part-time) to the South Africa Partner.

Institutional consolidation

The Centre of Nutrition and Food Security is being established in Cape Town, started in 2009, by Jimmy Volmink.

The South Asia Cochrane Centre and Network opened in 2007 through the efforts of Prathap Tharyan.

External grants

Professor Meng at Shandong University became the Alliance Centre for Systematic Reviews in health systems (financing) linked directly with the RPC management office

http://www.who.int/alliance-hpsr/researchsynthesis/project2/en/index.html

Professor Martin Meremikwu at Calabar University is part of EDCTP to run a malaria trial; and has a further grant of three million Canadian dollars to set up and run a demographic surveillance programme in three States.

Wang Yang at Chongqing University has demonstrated that they are respected for their work in China, with substantive contracts from China MOH to carry out systematic reviews in a variety of areas relevant to policy in China.

Promotion

Several authors, partners, and Consortium employees have been promoted and are actively impacting on the generation and use of evidence globally.

- JP Pena-Rosas became co-ordinator of the WHO micronutrients unit (Cochrane fellowship in 2001).
- Mary Ann Lansang became Director of the Knowledge Management Unit in the Global Fund (Consortium Partner Manager and Cochrane Author).
- Meng Qingque first became Dean of Public Health in Shandong, and recently become director of the China Centre for Health Development and Research.
- Harriet MacLehose appointed Senior Editor in *The Cochrane Library* (previously employed by the Consortium for eight years as an assistant editor).

Projects highlighted at the Cochrane Colloquium

At the Cochrane Colloquium, the Consortium featured centrally in the first plenary of the 2009 meeting (see Box 4). The keynote speaker was Sue Kinn from DFID, with a further five presentations about capacity development projects or initiatives. The Consortium was central to two of the presentations, and had had contributed to or was involved in the remaining three: *thus the RPC was part of five out of six plenary presentations*.

Box 4. Capacity development: Consortium influence at the 17th Cochrane Colloquium in Singapore, 2009

Plenary 1: The Cochrane Collaboration as a virtual college: approaches to capacity development

Chairs: Paul Garner, Cochrane Infectious Diseases Group, UK; Ova Emilia, Gadjah Mada University, Indonesia

As an organisation, and through the efforts of many of its entities and members, The Cochrane Collaboration has played a substantial role in capacity development for research synthesis and knowledge translation globally. While rarely captured in our publications and outputs, the formation of a global network that supports, trains and mentors is potentially a contribution that rivals review production and goes beyond the technical support of individuals.

International approaches to capacity development	Sue Kinn, DFID, UK
South East Asia: SEA-ORCHID	Pisake Lumbiganon, Thai Cochrane Network
South America: EVIPNet	Tomás Pantoja, Pontificia Universidad Católica de Chile
Africa: Reviews for Africa	Jimmy Volmink, South African Cochrane Centre
Middle East: ViTaMIN Project	Zbys Fedorowicz, Bahrain Cochrane Branch
World Health Organization	David Tovey, Cochrane Library; Davina Ghersi, WHO

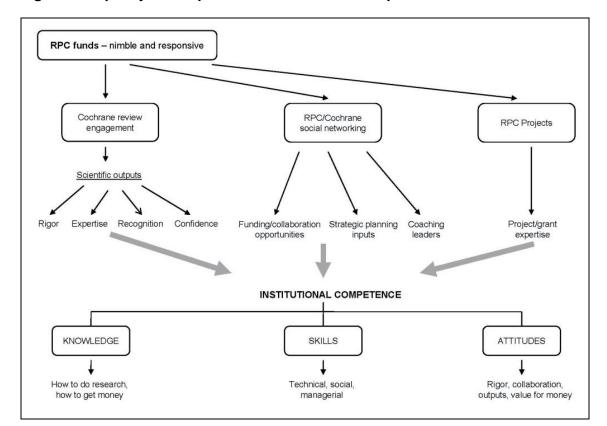
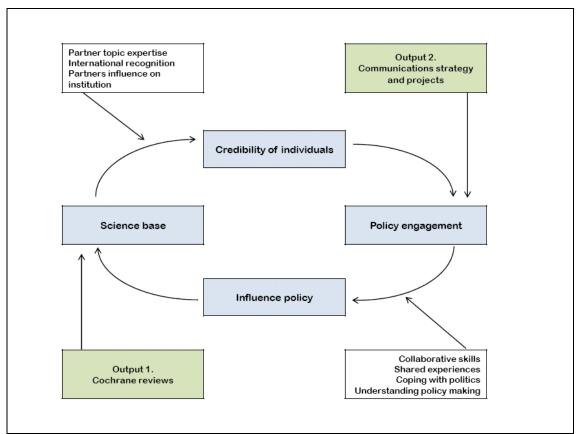


Figure 3. Capacity development for institutional competence

Figure 4. Capacity development for policy influence



4. ACHIEVEMENTS: RESEARCH OUTPUTS AND PURPOSE

What are the research outputs?

Output	OVIs	Progress	Comment
1.	1.1 New systematic reviews	32 with CIDG, and 33 with others: total 65	Exceeded target
	1.2 Updated systematic reviews	24 with CIDG, 4 with others: total 28	On target
	1.3 Methodologically challenging reviews completed in qualitative synthesis; health systems	8 completed, including 3 in health systems	
	1.5 Priorities for policy and practice	Formulated or updated in 93 reviews	
	1.6 Priorities for research	Formulated or updated in 93 reviews	
	1.7 Capacity for evidence-based research	India Cochrane Centre opened; Shandong Systems Unit capacity strengthened; Nigeria accounts improved; Nutrition Unit at Stellenbosch supported; Chongqing Unit expanding scope	
	1.8 Cochrane authors and editors	61 new authors from developing countries in CIDG	
		3 new editors from developing countries appointed	
	1.9 improved overall quality	Cochrane Editor in Chief appointed; CIDG form strategic plan	
		<i>The Cochrane Library</i> now has an impact factor 5.2; 2009)	
		CIDG initiatives rolled out to whole Cochrane Collaboration: prioritisation topics against MDGs, priorities for updating reviews, Cochrane style guide	
	1.10 Improved statistical quality	Statistical refereeing improved Statistician appointed in Cape Town Statistical network established	
2.	2.1 Consortium global strategy implemented	Web site overhaul; logo completed; com. officer appointed; review specific dissemination strategy implemented; pro- active media engagement; range of products for variety of stakeholders; high press up take; wide range of dissemination products	
	2.2 National Partner strategies	Nigeria more focused	
		China established strategy with policy makers South Africa comprehensive	
	2.3 Capacity for communication enhanced	Increased capacity through learning and sharing experience; experienced communication officer appointed	

What programme outputs were achieved

The Programme outputs were achieved.

Who benefited as a result of these outputs?

In areas where reviews contributed to guideline development and policy makers used the information, better health care and better public health policies were formed. As most reviews are pro-poor, this will benefit low-income groups.

Output	OVIs	Progress	Recommendations/ Comments
Purpose	OVIs	Progress	Recommendations/ comments
Increase in decisions relating to the health sector based on best available evidence in low- and middle- income countries.	 1.1 Providers select technical options based on Consortium or Cochrane Review evidence in a) health policy decisions; b) clinical practice; or c) consumer demand. 	 Providers WHO Guidelines now use Cochrane reviews for guidelines in all areas. Our reviews used in malaria treatment, diarrhoea management, TB treatment. National governments in Nigeria, South Africa, & India using Cochrane reviews in guideline development. DFID used reviews in determining policies on anthelmintic drugs policy. Clinicians Surveys indicate large know- do gap. No directly measured surveys of change. Consumers Increasing demand of consumers for evidence based information. High level of media attention for 5 reviews. 	Private sector in developing countries outside this influence- starting study to examine how to influence.

What are the research impacts?

	Finding	Year	Impact			
Infectious of	Infectious diseases					
Malaria: treatment	Cure increased by 70% in malaria treatments with artemisinin	2005	ACTs recommend for 1 st line malaria treatment (WHO Malaria Guidelines Committee 2006)			
	Artesunate reduces deaths in severe malaria by 40% compared to quinine	2007	In adults, this has become standard treatment			
	Dihydroartemisinin-piperaquine is highly effective	2009	WHO prequalification a priority			
Malaria: prevention	Insecticide-treated nets reduce the risk of miscarriage by one third in Africa	2006	Donor investment enhanced			
	Malaria illnesses in children halved by taking antimalarial drugs regularly	2008	Not tracked			
	Iron supplements in children are safe in malarial areas	2009	Debate raised; informed Gates Global Consensus			
ТВ	Direct observation does not increase adherence	2007	WHO changed policy			
	Steroids reduce deaths by a fifth in TB meningitis	2008	Clinical guidelines are changing			
Diarrhoea	Hand washing reduces diarrhoea episodes by 30%	2008	Used to justify water and health promotion projects			
	Zinc makes illness shorter in children with diarrhoea	2008	Gates Foundation exploring how to implement			
Helminths	No evidence that deworming drugs in community programmes improve school performance	2008	Slowed some enthusiasm and investment			

Specific examples of impact emerging during existing Consortium funding 2005–2010

Delivery of the communication strategy

For Cochrane reviews, our staged process (title registration, protocol, review) means that the editors can provide targeted support to authors which helps ensure completion of the work and its publication. The publishers have an effective dissemination mechanism; the Consortium communication strategy is highly effective with many outputs, publications, and press pickup. Our various stakeholders are aware of Cochrane products and use our reviews.

Increased awareness that has changed attitudes and practice

There has been a sea change in the WHO over the last two years, which we have been part of, particularly though the establishment of the WHO Guidelines Committee. Cochrane Reviews are now centre stage of all guidelines processes.

Progress on capacity development

- The Consortium produced eight Cochrane reviews per year with the first author from a developing country.
- Two thirds of all Consortium Cochrane Reviews had a first author from a developing country.

• Partners made considerable progress in establishing leadership in research synthesis in their regions and internationally.

How did the research contribute and impact on the wider environments at national and international levels?

The work we do has a substantive impact on thinking around evidence-based policies and practice. In WHO, in countries, in governments, in donors, and in hospitals people are *aware* that evidence is important, and are *demanding* relevant information for decision making.

5. LESSONS LEARNT

Working with Partners

- 1. Individualised work plans for each partner helps make our work more effective. Because each partner is different, and each has their own sphere of influence and research and policy networks with which they are engaged, blueprints in terms of approach, or topic, is inappropriate. Thus the Consortium has an enabling framework, broad outputs (related to MDG's, influencing change, and capacity development) within which partner plans are crafted.
- 2. In influencing change, it is a good general principle to find the leader, seed the ideas and principles, and let them develop their programmes. This has always been a way The Cochrane Collaboration has worked with review topics, and has been a helpful maxim for the extension of this work into communication, policy change and capacity development.
- 3. Insist that partners take an inclusive approach in planning to make a constructive national network. The China partner did this, with excellent results working across institutions. The Kenya prospective partner did not do this, and this was one reason their membership of the network was declined.
- 4. Don't fund partners if their planned programme does not pass muster in terms of cost-effectiveness. We were under tremendous pressure to fund the Kenya Programme, and had committed to do so, but because there was no evidence of partnerships forming in the planning process between groups working on systematic reviews in Kenya, and because the proposal was overbudgeted with padding, we declined committing the Consortium, with considerable fall out.
- 5. Some partners may not be strong in their formal planning and financial management processes, and take up considerable management time, but nevertheless may be extremely productive in their work. For example, the Nigeria partner has required considerable input and support, and still has much work to do, but have produced three very high impact review quality reviews in this period.
- 6. **Take risks but be ready to pull out.** We provided technical and financial support to a Group in Brazil trying to set up a Cochrane Sexually Transmitted Diseases Review Group. We knew there were technical and language problems with this, and in particular the proposed co-ordinating editor, while enthusiastic, had not completed a Cochrane Review before. We supported this on a two year programme but with the second year conditional on clearly established milestones at year one-and, after these were not met, there was mutual agreement to wind down the initiative.

Good Practice/Innovation

- 7. Our logframe outputs relate to the MDGs, and this has meant we appraise each Cochrane Review topic against this and prioritise accordingly. Other Cochrane Review Groups to date take all topics irrespective of burden of disease or impact on health and many are heavily overburdened with reviews with very limited potential impact. Our approach is being adopted by several other Cochrane Review Groups, and many are establishing priority setting processes based on our experience.
- 8. Effective Health Care Research Consortium Executive Committee helps manage difficult problems with partners. For example, we have one partner who is over committed, does not have any senior people to help with their work, and is not providing support to authors in his country, which is what the Consortium expects of him. When the Committee judged a course he was

planning with the Consortium was insufficiently planned, we insisted he postpone the course.

- 9. Our contracts with partners included partners signing the Consortium Sexual Harassment Policy. This has had demonstrable effects: in India (see above).
- 10. We were responsible for several initiatives that have been rolled out to the whole Cochrane Collaboration:
 - We developed a Style Guide for Cochrane Reviews, which has now been rolled out across the whole Cochrane Collaboration.
 - We have developed a system of prioritising reviews for updating, and a number of different groups in The Cochrane Collaboration are adopting this.
 - With South Africa, we developed a bespoke training scheme and obtained funding for developing country authors who have a title accepted.

Project/Programme Management

- 11. **Regional restructure of partners has really helped.** Whilst The Cochrane Collaboration is relatively flat organization, the Consortium needs a structure to help with accountability and enable effective teams. Restructuring into Far East (Philippines and all the various China groups managed directly by Chongqing), Bangladesh, Pakistan and India partners working through SACC; and the Cochrane Africa Network, managed jointly by SACC and the Consortium Director, has been highly effective.
- 12. Some partners need advice and assistance in managing money and multiple grants. We have provided some support to the Nigeria partner, but still further work is required. This is in part just to ensure effective management of funds, and to ensure partners are not left vulnerable because of poor accounting systems.
- 13. The relationship with partners needs to be underpinned by a formal contract and milestones, but this also requires careful monitoring and systems. We established formal contracts with milestones, but the Consortium Director has had insufficient time to formally track progress on this, and take remedial action where required.
- 14. The logframe and risk management are useful tools, but people need training and help to prepare them. Whilst the Consortium Director tried to implement logframes through 'learning by doing' this often meant the Director then ended up writing or extensively revising the logframes.

Communication

- 15. In China and Russia, any review abstract must be translated, and it is best to obtain a commentary in the national language.
- 16. Dialogue with policy makers is important to manage their expectations of systematic reviews. In China in particular, policy makers have tended to think of Cochrane Reviews as a standard template that can be applied to all policy relevant questions. But the questions policy makers ask are usually broad and often not answerable in a systematic review.
- 17. Being proactive in stimulating press releases is important. For example, the communication officer sent out a press release about the mosquito repellents, and this was picked up by the journal Science as a news item.
- 18. To maintain profile, we need to identify Cochrane topics of relevance to consumers. We are now actually identifying 1–2 topics a year that we know will be of interest to consumers, and try and identify authors.

- 19. Each Cochrane Review needs a specific dissemination strategy. Each Cochrane Review has a different set of specific stakeholders for whom the review may be relevant. Therefore, we need to consider each review individually, and design a communication strategy relevant to the review topic and findings.
- 20. Research into use-need to understand how people access information. Publishing a Cochrane Review is a 'push' strategy, and we still have much more to do in understanding how policy makers and practitioners access and use evidence from reviews and derivative products.
- 21. **Translating findings from reviews needs specialist communication skills.** We had an unfortunate example in Nigeria, where our partner sent a full Cochrane Review to a journalist. The journalist misread the abstract and plain language summary. Indeed, it was ambiguously phrased, but tried to state that the effectiveness of condom promotion strategies was unclear. The journalist interpreted this as "condoms do not prevent HIV".
- 22. Social networking for dissemination may be region specific. For example, Facebook does not operate in China.
- 23. **Social networking should not be regimented.** What we need to do is encourage its use but not demand it; attach its use to events where people get together, including training, in-service, or something social; and remember that often the dissemination will be transitory and relevant to a particular group at a particular time.

6. PROGRAMME MANAGEMENT

How researchable problems/themes were defined and prioritised

Cochrane reviews

- The Cochrane Editors every year consider priority topics in the respective areas covered by the groups, and highlight those where reviews are priority, because of new interventions, new questions, or considerable policy interest.
- The Consortium Director maintains a dialogue with WHO and other specialists in the field to identify possible topics in need of review.
- The Consortium Partner Managers maintain a watching brief on topics internationally and in their own region.
- For authors with prospective topics, the Liverpool Cochrane Infectious Diseases Group apply a priority assessment tool to decide whether to accept or reject them.

Audit and communication projects

- Disease burden, likelihood of impact, likelihood of poor practice.
- Likely contribution to capacity development.
- Strength of the question.

Mechanisms in place for partners to contribute to programme management

- The partners design their own programmes and establish their own milestones, on the condition that it contributes to the MDGs and is in line with the outputs of the Consortium logframe.
- The Consortium Executive Committee consists of Directors of the Cochrane Centres in South Africa and in India and this is the main strategy setting body of the grant. The Committee has good communication and effective decision making. For example, the Committee decide on whether partners are to be added or discontinued, what to do with poor performance, and contribute to decisions about financial management, including all development grants.

Information regarding any changes to the programme during the reporting period and how these changes address gaps between achievements, outputs and purpose (this refers to both management structures changes and research theme changes)

- In the original logframe there were targets for systematic reviews in reproductive health and health systems. In fact, these are well managed by the Cochrane Pregnancy and Childbirth Group and the Cochrane Effective Practice and Organization of Care Group-the former with editors in WHO, and the latter with a grant to carry out reviews relevant to low- and middle-income countries. Therefore, targets in these areas were set too high.
- In the original logframe 2 Cochrane Centres were to be established. Despite best efforts, there was a failure to establish a Centre in Nigeria; priority was given to try and ensure the Nigeria Branch provided support and advice to authors at a basic minimum level.

Information regarding any changes to key assumptions (as detailed in the programme's logframe) change, which led to a re-assessment of risks? If so, please ensure details are included in the risk assessment annex.

- No changes to key assumptions.
- Some minor adjustments to the risk register were made.

Progress of expenditure and steps taken to ensure the research budget was fully spent

- All partners have established, agreed budget against work plan. Payment frequency varies depending on the partners' arrangement.
- Regular checks of expenditure against budget in October in Period 3 to examine under spend. At this point, projected costs are estimated to the end of the financial year. If any under spend apparent, then management team in Liverpool consider this, discuss this with the Consortium Executive Committee and seek any initiatives in need of funding. If there are areas, then a project proposal is requested with objectives, deliverables and budget. This is then agreed by the Consortium Executive Committee before it moves forward, and budget adjusted accordingly.

Information regarding any particular problem areas and any significant changes to the financial plan

- No problem areas.
- We are still concerned about financial management in Nigeria, in particular at times it seems the partner under-budgets and the programme is running at an apparent deficit.

Multiplier funding obtained during life of programme, additional information in the financial annex

Large grants: Several large grants have been awarded related to evidence based work to major Consortium partners:

Calabar:	1.2 million Can Dollars (£788,000) from International Development Research Centre for demographic surveillance system.
Stellenbosch:	7 Million Rand (£624,000) from the University to establish Evidence Based Nutrition Centre
Shandong:	290,400 US Dollars (£195,000) from WHO for Health Systems Reviews.
Vellore:	25,856,826 Rs (£315,327) from ICMR for South Asian Cochrane Centre.

Small grants: Many small grants related to individual reviews.

Total number of multiplier grants/awards: 70

7. LONG-TERM SUSTAINABILITY OF THE RESEARCH

- **Promotion:** The Cochrane Collaboration will continue with funding for developed country problems and for people from high-income countries to participate.
- Access: the systematic reviews produced by this programme and others will continue to be made available through *The Cochrane Library*.
- Follow on: We have submitted a tender for Research Programme Consortia 2009, HRPC09: Evidence Building and Synthesis Research. This builds on the outputs of the current work programme. We do not know the outcome of this bid.
- **Some reviews have enduring impact** that will outlast the programme funding, particularly if the review answers the policy question. This includes impregnated mosquito nets to prevent deaths in children, first published in 2004 and hand washing for preventing diarrhoea in 2008.

ANNEX 1: LOGICAL FRAMEWORK

April 2005 to March 2010 GLOBAL PROGRAMME 16 April 2009 version 2.4; minor changes to 15 March 2007 (version 2.33) Important Verifiable indicators Means of Narrative summary verification assumptions Super goal: Better health in low-Performance against MDGs to reduce child mortality (4), to improve maternal and middle-income countries. health (5), and combat AIDs, tuberculosis and malaria (6). Goal: Improved health 1.1 Change in public health policies or 1.1 Change in care for the poor in guidelines in child health, infectious practice low- and middlediseases, reproductive health and demonstrated organisation of care. income countries. through WHO monitoring, 1.2 Improved efficiency of health care research, or provision. Partner field assessments. 1.2 Studies of implications of reported practice change and effects on health and resource use. Purpose: 1.1 Providers select technical options 1.1 Review of WHO Politics. Increase in decisions relating based on Consortium or Cochrane public health and vested to the health sector Review evidence in a) health policy clinical guidelines interests and assessed in based on best decisions; b) clinical practice; or c) organisations available evidence consumer demand. will allow reports. in middle- and lowevidence-1.2 Review of income countries. based national policies. decisions to 1.3 Review of be studies of implemented. reported practice published in journals or conducted by collaborators. 1.4 Assessment of new research and reference to reviews. 1.5 Analysis of media coverage in RPC Partner countries.

Outputs:	Verifiable indicators	Means of verification	Important assumptions
1. Reliable, up to date, scientifically defensible and relevant evidence in malaria, TB, child health, maternal health, and health systems.	1.1 New systematic reviews in malaria artemisinin-based combination therapies (ACTs) (1) and other areas (12); TB (8), tropical diseases (12) and child health (6); ¹² and in health systems (6).	1.1 Cochrane Database of Systematic Reviews; overview of head- to-head artemisinin combination reviews completed.	Policy makers, professionals and users will act on the information.
	1.2 Updated systematic reviews in malaria (6), TB (6), and tropical diseases (4) and child health (4); in reproductive health (3); and in health systems (2).	1.2 Cochrane Database of Systematic Reviews.	Health policy makers value research synthesis for decision making.
	1.3 Methodologically challenging reviews completed: a) qualitative research synthesis in infectious diseases; and b) health systems reviews relevant to country level decisions.	 a) Completed policy briefs and articles in malaria, TB or a tropical disease; b) Health systems reviews completed with the Alliance for Health Policy and Systems Research. 	
	1.4 Priorities for policy and practice are clarified or updated.	Analysis of implications for practice section in new and updated reviews.	
	1.5 Priorities for research are clarified or updated.	Analysis of implications for research section in new and updated Cochrane Reviews.	
	1.6 Capacity for evidence-based health care research developed or enhanced in five locations through: a) establishment of Cochrane Centres (two locations); b) new evidence-based medicine (EBM) research grant funds (all locations); c) through implementation of our communications strategy (output 2).	Cochrane Centres established by Partners. Partner multiplier funding & institutional support.	

¹² Reproductive health review targets removed after the MTR as a separate group with WHO covers this

	1.7 Trained and experienced Cochrane authors and editors based in developing countries.	Number of authors from developing countries identified and completing protocols. Number of authors from developing countries completing Cochrane Reviews. Case studies of authors; research and policy portfolio of Partners.	
	1.8 Improved overall quality of Cochrane Reviews.	CIDG: a) progress against indicators in our editorial improvement strategy; b) external assessment by Cochrane Monitoring and Registration Group. The Cochrane Collaboration: uptake of CIDG quality initiatives by collaboration.	
	1.9 Improved statistical quality of Cochrane Reviews through development and adoption of new methods.	Analysis of reviews with cluster- randomized trial designs. Improved inferences through indirect comparisons of malaria reviews.	
	1.10 Relevant research priorities developed with Partners in areas where there are gaps and a) policy and research dialogue in countries over priorities; b) areas identified; c) pilot studies of interventions in priority areas; and d) designed and successfully funded.	Analysis of Cochrane Reviews. Pilot studies reports. Trials funded.	
2. Stakeholders able to access and use evidence- informed approaches in relation to MDGs.	2.1 Consortium global strategy for effective communication (between Partners, and with multilaterals, donors, national policy makers, clinicians, training institutions) developed, implemented and updated.	Scrutiny of consortium completed global strategy, activities and report. Evaluation of outcomes achieved against specific health problem dissemination strategies.	

2.2	National Partner strategies for effective communication developed, implemented and updated.	Scrutiny of Partners' strategy completed with indicators.	
		Partner's reports of review topics identified by dialogue with policy makers.	
		Partner's reports of participation in national policy decisions.	
		Partner's annual report of performance against strategy.	
2.3	Capacity of Consortium in communication and influence enhanced.	Evidence of direct influence on policy of communication initiatives; Partner's initiative in shaping national policy agenda and direction through dialogue and research findings.	

April 2005 to March 2010 GLOBAL PROGRAMME (15 March 2007) ACTIVITIES OUTPUT 1	
	Develop, implement and monitor quality improvement strategy.
	Provide specialist support and training to authors.
	Enhance statistical quality of Cochrane Reviews.
1.2	Develop and use new synthesis methods
1.2	Qualitative research synthesis.
	Pilot synthesis in diagnostic studies in one area.
	Health systems reviews relevant to country decisions.
	Improve inferences through indirect comparisons in malaria reviews.
1.3	Develop capacity of the RPC
1.5	Support registration of India and Nigeria Cochrane Centres.
1.4	Increase Consortium communication capacity.
	Identify research priorities and pilot test new interventions
	Use reviews and other information to identify research priorities.
	Pilot test and evaluate new interventions relevant to the MDGs.
OUTPUT 2: <u>Global and national/regional communication strategies will draw on these potential activities:</u>	
2.1	Raise awareness and facilitate access
	Prepare summaries of Cochrane Reviews appropriate for the various stakeholders.
	Give examples of how policy makers and clinicians can influence review priorities, and how researchers can identify important reviews for policy.
	Demonstrate 'know-do' gap, with examples, through papers, presentations, and policy briefs.
	Assess usability of evidence-based materials (including <i>Evidence Update</i>) in other languages.
	Help target groups access knowledge from systematic reviews that is useful to them.
	Using email newsletters in dissemination and promoting access.
2.2	Increase dialogue
	Identify stakeholders and their particular priorities and information needs. This involves defining stakeholders (e.g. health ministry policy makers, donor aid advisers, professional groups, consumer groups, and managers); continued dialogue around priorities; and horizon scanning.
	Seek opportunities to demonstrate change through guidelines development, audit projects, and health
	financing policies to increase decisions based on evidence; compile bespoke packages of evidence-based materials for change projects.
	Initiate consumer engagement through the media.
	Seek opportunities for joint working with the private medical care delivery sector or insurance
	organizations.
	Dialogue between research groups disseminating findings to consider opinions about effective approaches
	and how to improve the strategy.
	Research evaluating relevance of trial/systematic review outcomes to consumers.
2.3	Influencing key stake holders
	Build national government capacity to critique and challenge where appropriate bilateral and multilateral policies in the health sector.
	Encourage national policies for evidence based guidelines, with management systems to ensure that guidelines are implemented and monitored.
	Encourage financing and organisational arrangements that include use of evidence in determining policies and practice.
	Help institutions to train doctors, nurses, and other health staff to use evidence-based approaches.
<u>Other</u>	<u>r activities:</u>
2.4	Planning and monitoring visits by Consortium Director and deputy Director and between Consortium Partners in developing and monitoring strategy.
2.5	Consortium Partner meetings to consider effectiveness of communication strategies.

ANNEX 2: FINANCE

Confidential section (not included)

ANNEX 3: RISK REGISTER (UPDATED APRIL 2009)

Note: risks scored as "low" have been deleted. Underline means risk altered

Description of risk	Probability	Consequence	Impact	Score	Mitigation actions	Responsibility
OUTPUTS			•	•		
1. Cochrane Reviews						
Reviews not relevant due to timing	Medium	Not used by guidelines panels	High	High	Liaise with policy makers on priorities	CIDG editorial team
					Fast track route for reviews	
Reviews which require updating	Low	Reviews not credible	Medium	<u>Medium</u>	Implement assessment of new trials	Information Retrieval Specialist
Reviews not relevant to MDGs	Low	Not useful	High	Medium	Include question in title registration & monitor	CIDG editorial team
Poor quality authors	Low	Reviews slow and weak	<u>High</u>	<u>High</u>	Outline skills required; active recruitment; appraise teams at registration	CIDG team and RPC Partners
Quality of submitted reviews poor	Low	Reviews not credible	High	Medium	RPC statisticians; make explicit RPC role, and decentralise support expectations; appraise teams at registration	CIDG editorial team RPC Partners
Authors technical capacity limited in review topic	Low	Poor quality review	Medium	Medium	Ensure authorship teams have high technical competence	CIDG editorial team & RPC Partners
Authors do not complete reviews	Medium	No output; opportunity cost	Medium	Medium	Collaborators assist authors stay on track	RPC Partners
2. Dialogue and communication		·			•	·
Global Communication strategy not implemented	Medium	Dissemination and communication limited	High	High	Ensure strategy developed and monitored with RPC Partners	RPC Director and Deputy Director with Consortium Executive Committee

Description of risk	Probability	Consequence	Impact	Score	Mitigation actions	Responsibility
Cochrane Reviews not understood by target groups	High	Not used	High	High	Critical appraisal and policy related training facilitated through Partners; revise communications strategy	All
Non-English speaking target groups do not understand our materials	Medium	Evidence not accessed or used in decision making	Medium	Medium	RPC Partners consider relevant translations and country-specific communications strategies	China, Brazil and RPC Partner managers
Communication materials are not useful to users	Medium	Evidence not accessed or used in decision making	Medium	Medium	Prepare and evaluate material in different formats.	RPC Director and Deputy Director with Consortium Executive Committee
<i>Evidence Update</i> not used by target audiences	Medium	Evidence not accessed or used in decision making	Medium	Medium	Evaluation with various target audiences in progress	RPC Director and Deputy Director with Consortium Executive Committee
Limited capacity for communications activities including partners	Medium	Communications strategy not developed or implemented	Medium	Medium	Recruit communication specialist	RPC Director
Partners unable to reach important stakeholders	Low	Evidence not accessed or used in decision making	Medium	Medium	Identify target audiences carefully and focus communication activities according to Partner influence	RPC Partners
Inadequate monitoring of communications strategy	Medium	Cannot demonstrate impact on policy or practice	Medium	Medium	Develop measurable process and outcome indicators for communications activities. Use success stories and case studies where relevant	All
MANAGEMENT						
Workload too high	High	Health and stress	High	High	Limit registration of titles; dialogue with DFID about more staff; increase paid editorial time	RPC Director

Description of risk	Probability	Consequence	Impact	Score	Mitigation actions	Responsibility
Partners do not achieve contracted outputs	<u>Medium</u>	Inefficiency, poor performance overall, threatens whole programme	High	High	Good consortium management systems Consortium Executive Committee active	RPC Director, RPC Partners; Supervisory clerical officer
					·	Version: 16 April 2009

ANNEX 4: GLOBAL COMMUNICATIONS STRATEGY

There are no changes to the global communication strategy since 2 April 2008.

Effective Health Care Research Consortium

Global communications strategy

Version: 2 April 2008

Background

The **purpose** of the Effective Health Care Research Consortium is to increase decisions relating to the health sector that are based on best available evidence in low and middle income countries.

The Consortium communications strategy is embedded within the logframe **output 2** relates to stakeholders being able to access and use evidence-based approaches in relation to the MDGs.

We do this with stakeholders in a three tiered approach:

1. Disseminate tailored research syntheses ('push')

We aim to increase awareness of research synthesis among policy makers, providers and researchers. We will do this by using dissemination materials tailored to specific audiences and needs.

2. Increase dialogue ('exchange')

We want to increase opportunities for dialogue between policy makers – particularly the WHO – and authors in preparing reviews as policy windows emerge. We will seek opportunities to influence policy decisions in areas where Partner managers are recognised with authority and where there are strategic opportunities to engage with policy makers. We will explore options to influence treatment and practice decisions with consumers and the private sector

3. Increase demand for evidence ('pull')

We want to create and increase demand for evidence from different target groups and ensure evidence-informed thinking and decision making is embedded in national and regional health structures. We will do this through demonstration projects to illustrate evidence is important, and through formal training in reading, interpreting and applying systematic reviews.

Figure 2 explains how the communications strategy operates in general.

Stakeholders

Bringing about the changes in policy and practice described will require influencing various stakeholder groups and targeting different audiences or potential users of research evidence. Target audiences will vary by country and specific health problem, and this will be reflected in Partner communication strategies and activities.

Our communication strategy also helps inform research decision making.

	1	ication strategy: main sta	
Stakeholder	Information needs	Target audience	Activities
International decision makers	Technical policy content How to deliver services	WHO technical experts National experts influential in their field formulating guidelines	Participate in guideline development teams Collaborate with existing global knowledge sharing initiatives Policy briefs Commissioned reviews
International donors	For decisions about a) resource allocation; b) technical advice on MDGs	DFID advisors DFID country offices World Bank country offices	Policy briefs E-newsletters Summaries of Cochrane Reviews
National policy makers	Policy content & implementation	MOH advisors WHO country offices Policy researchers or analysts Technical staff formulating guidelines	Participate in priority setting meetings Research synthesis workshops in specific health topics Regional or local conferences
National research & training institutions	Developing capacity of future health leaders	Senior staff in national training or research institutions Researchers influential in their field Practising clinicians with a training responsibility	Research synthesis workshops in specific health topics Protocol development workshops Summaries of Cochrane Reviews Web based materials Journal publications
Health professionals	Routine clinical decision making for particular patients/health problems	Practising clinicians nurses or other health professionals Clinicians in training Guideline developers	Summaries of Cochrane Reviews Packages of evidence-based materials Audit projects E-newsletters Regional or local conferences Journal publications
General public	Treatment and care decisions	Consumers of healthcare Civil society Journalists	Local or national press Local language TV or radio programmes Orientation for journalists
Private sector and NGOs	Research & practice standards	Private practitioners NGOs working in specific health areas Special interest or consumer groups	Policy briefs Summaries of Cochrane Reviews Local language TV or radio programmes Packaged evidence-based materials
Research strategy and funding	Research questions and gaps identified by systematic reviews	DFID MRC WHO	Cochrane Reviews Summaries of Cochrane Reviews
Researchers	Research questions and gaps identified by systematic reviews	Trial specialists Health service researchers Clinical researchers	Cochrane Reviews Summaries of Cochrane Reviews Journal papers

Communications activities

Disseminate tailored research syntheses

- Prepare summaries of Cochrane Reviews appropriate for various stakeholders.
- Give examples of how policy makers and clinicians can influence review priorities, and how researchers can identify important reviews for policy.
- Demonstrate know-do gap, with examples, through papers, presentations, and policy briefs.
- Assess usability of evidence-based materials (including Evidence Update) and their interpretation in other languages.
- Help target groups access knowledge from systematic reviews that is useful to them.
- Use email newsletters in dissemination and promoting access.

Increase dialogue

- Identify stakeholders and their particular priorities and information needs. This involves defining stakeholders (e.g. health ministry policy makers, donor aid advisers, professional groups, consumer groups, and managers); continued dialogue around priorities; and horizon scanning.
- Seek opportunities to demonstrate change through guidelines development, audit projects, and health financing policies to increase decisions based on evidence; put together bespoke packages of evidence-based materials for change projects.
- Initiate consumer engagement through the media.
- Establish joint projects with the private medical care delivery sector or insurance organisations.
- Dialogue between research groups disseminating findings to consider opinions about effective approaches and how to improve the strategy.
- Evaluate the relevance of trial/systematic review outcomes to consumers.

Increase demand for evidence

- Build national government capacity to critique and challenge where appropriate bilateral and multilateral policies in the health sector.
- Encourage national policies for evidence based guidelines, with management systems to ensure that guidelines are implemented and monitored.
- Encourage financing and organisational arrangements that include use of evidence in determining policies and practice.
- Help institutions to train doctors, nurses, and other health staff to use evidence-based approaches.

The Liverpool hub communications strategy

Cochrane Reviews

The Cochrane Infectious Diseases Group has a strategy for each review:

1. Dialogue with the publishers prior to publication about whether the review is worthy of a press release. We draft the press release.

- 2. *Health Behavior News Service* in the US also prepares press releases after they have scrutinised reviews in press.
- 3. We forward copies of the review prior to publication to individuals in WHO, DFID and other organizations with an interest in the topic area.
- 4. Where appropriate, summary publications are prepared and submitted to academic journals to increase reach.

Cochrane Review derivative products

Evidence Update

- 5. For MDG relevant reviews, we prepare *Evidence Update* for dissemination to the Consortium, to DFID, through emails with hypertext links and from the web-page. This includes reviews from infectious diseases, maternal and child health, health systems and public health.
- 6. Partner Managers in China and Nigeria select reviews for translation into Chinese and French.

Clinical Evidence and other products

- 7. Seek opportunities to prepare evidence-based materials in the BMJ Clinical Evidence, which is free in developing countries. This includes maintaining sections on sickle cell disease, malaria and TB.
- 8. Partners seek opportunities to disseminate through other synopses at global, regional and national level in their own countries (see below).

Other RPC outputs

9. Research on dissemination, or projects about feasibility of evidenceinformed approaches, or about how evidence-informed knowledge may be used, is disseminated in ways that are appropriate to maximise the usefulness and influence.

Partner communications strategies

Dissemination of research findings and dialogue with policy makers, researchers and consumers have always been embedded in each Partner's logframe and Partners have significant experience engaging in national and international policy debate and awareness raising activities in their areas of expertise. The challenge is formalising this dissemination experience into a formal strategy which incorporates specific communications activities; each Partner Manager is moving towards a national or regional strategy. An important part of this process will be to consider more carefully the various stakeholders and their information needs. The Consortium team work at country level to:

- Use achievements to date in dissemination to develop a focus for future communication activities
- Develop a communication strategy based on their areas of expertise and influence
- Identify important stakeholders and target audiences nationally and regionally
- Develop appropriate messages for each audience
- Specify appropriate communications activities/tools to reach different audiences
- Monitor and evaluate the strategy based on activities or outputs

Capacity development

Scientific credibility and capacity to influence change are linked. Partners develop capacity in systematic reviewing and applied health services research by contributing to the science base, and through this individual Partner credibility is strengthened. The Consortium capacity development cycle is illustrated in Figure 2.

DFID funds are substantive levers. They are nimble and focused on good people. Combined with the links to The Cochrane Collaboration, they have the opportunity for considerable capacity development by the rigor of the science, by the networking and influence of the Collaboration and Consortium, and specific experience in managing grants with the dissemination and health services research grants scheme.

Risk assessment

We will identify and monitor risks associated with implementing the communications strategy in collaboration with Partners through annual planning and monitoring visits. We will assess risks in Consortium Advisory Group meetings. Risks will be communicated in the Consortium annual reporting to DFID. Risk assessment for the Global Communications Strategy is outlined in the overall Consortium risk register (Annex 3).

Monitoring and evaluation of the communications strategy

Process and outcome indicators for each objective will be monitored by each Partner on an annual basis. The impact of the global communications strategy on policy and practice will be demonstrated through success stories and case studies where possible as this can convey important shifts in awareness and decision making more effectively than a single indicator.

Objective	Process indicators	Outcome indicators
To raise awareness and facilitate access to evidence	 Number of <i>Evidence Update</i> summaries prepared and disseminated via web Number of <i>Evidence Update</i> summaries downloaded from websites Number of articles in local, regional and international journals Number of policy briefs produced Number of e-newsletters Research on usefulness of communications materials 	 National subscriptions to electronic health knowledge databases Evidence of demand for summaries of Cochrane Reviews Reviews commissioned by key stakeholders
To increase dialogue about using reliable evidence	 Number of meetings with policy makers Number of workshops or meetings with specific target audiences Number of press releases or news items 	 Changes in stakeholder opinions or actions Changes in media coverage of a health issue Evidence-informed practice onto regional and national conference agendas Partner reports of review topics identified in dialogue with policy makers

Influencing key stakeholders	• Evidence of Partner influence on policy agenda and decisions in countries
	 National or regional guidelines produced based on evidence
	 Postgraduate training courses in evidence based approaches established

ANNEX 5: PRODUCTS AND PUBLICATIONS

Table 1. RPC Systematic Reviews output

Note: When we set our targets in child health, we had not considered that these were likely also to be reviews in malaria, TB or tropical diseases. In counting, we have classified reviews against the primary disease condition, but if the reviews are exclusively related to children, this number is given in brackets. They are thus NOT double counted in our aggregate.

Indicator	Торіс		New revi	ews	U	Updated reviews		
		Target	CIDG	Total	5 year target	CIDG	Total	
1.1	Malaria	13	11	11	6	9	9	
	ТВ	8	6	8	6	6	6	
	Tropical diseases	12	15	16	4	8	8	
	Child health	6	0 (5) ^a	0 (5)	4	0 (2) ^b	0 (2)	
	Health systems	6		1 (1) ^c	2		1	
	Total (MDG)	45	32	36	22	23	24	
	Reproductive ¹³	No target		4	No target		1	
	HIV	No target		13 ^d	No target		2	
	Other	No target		12	No target	1	1	
	Grand total	45		65	22	24	28	
	 also classed one malaria reviews one TB revie 	as child hea review and o w was also o	Ith reviews ne tropical classed as	diseases reviev health systems	ews and one rev vs were also clas review lled by HIV edito	ssed as child h	·	
1.3	 Systematic reviews in methodologically challenging areas: a) Qualitative research synthesis (1): TB b) Health systems (3): Strategies for integration; contracts for TB adherence; strategies to expand health insurance c) Other (4) : SARS treatments; Crimea-Congo Haemorrhagic Fever; China herbal ingredients; electronic mosquito repellents For new Cochrane reviews (all groups), 41 (67%) had the first author from a low- or middle-income country. 						bal	
	country. For CIDG, 61 ne		••••					

¹³ Reproductive health reviews removed from target and logframe after mid-term review, as these are well resourced and supported through the Cochrane Pregnancy and Childbirth Group, and WHO.

i) Peer reviewed publications and Cochrane Reviews (new and substantive updates)

* indicates the editorial management through the Cochrane Infectious Diseases Group

More important outputs have grey backgro	und
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Country	Publication	New or Update
Brazil	Menezes VM, Soares BGO, Fontes CJF. Drugs for treating paracoccidioidomycosis. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD004967. DOI: 10.1002/14651858.CD004967.pub2.	New*
China	Liu Q, Abba K, Alejandria MM, Balanag VM, Berba RP, Lansang MAD. Reminder systems and late patient tracers in the diagnosis and management of tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD006594. DOI: 10.1002/14651858.CD006594.pub2. With the Philippines	New
UK	Briggs CJ, Garner P. Strategies for integrating primary health services in middle- and low- income countries at the point of delivery. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD003318. DOI: 10.1002/14651858.CD003318.pub2. [Update]	Update
Denmark	Schiøler KL, Samuel M, Wai KL. Vaccines for preventing Japanese encephalitis. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 3. Art. No.: CD004263. DOI: 10.1002/14651858.CD004263.pub2.	New
Germany	Metzger W, Mordmueller BG. Vaccines for preventing smallpox. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 3. Art. No.: CD004913. DOI: 10.1002/14651858.CD004913.pub2.	New
Holland	Jutte PC, Van Loenhout-Rooyackers JH. Routine surgery in addition to chemotherapy for treating spinal tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 1. Art. No.: CD004532. DOI: 10.1002/14651858.CD004532.pub2.	New
India	Adinarayanan S, Critchley J, Das PK, Gelband H. Diethylcarbamazine (DEC)-medicated salt for community-based control of lymphatic filariasis. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 1. Art. No.: CD003758. DOI: 10.1002/14651858.CD003758.pub2.	New
	Galappaththy GNL, Omari AAA, Tharyan P. Primaquine for preventing relapses in people with Plasmodium vivax malaria. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 1. Art. No.: CD004389. DOI: 10.1002/14651858.CD004389.pub2.	New
	Premkumar TS, Pick J. Lamotrigine for schizophrenia. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 4. Art. No.: CD005962. DOI: 10.1002/14651858.CD005962.pub2.	New
	Prasad K, Singh MB. Corticosteroids for managing tuberculous meningitis. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 1. Art. No.: CD002244. DOI: 10.1002/14651858.CD002244.pub3.	Update
	Sudarsanam TD, Rupali P, Tharyan P, Abraham OC, Thomas K. Pre-admission antibiotics for suspected cases of meningococcal disease. <i>Cochrane Database of</i> <i>Systematic Reviews</i> 2008, Issue 1. Art. No.: CD005437. DOI: 10.1002/14651858.CD005437.pub2.	New

India	George K, Nair R, Tharyan P. Ovulation triggers in anovulatory women undergoing ovulation induction. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 3. Art. No.: CD006900. DOI: 10.1002/14651858.CD006900.pub2.	New
	George R, Jeba J, Ramkumar G, Chacko AG, Leng M, Tharyan P. Interventions for the treatment of metastatic extradural spinal cord compression in adults. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD006716. DOI: 10.1002/14651858.CD006716.pub2.	New
	Abba K, Sudarsanam TD, Grobler L, Volmink J. Nutritional supplements for people being treated for active tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD006086. DOI: 10.1002/14651858.CD006086.pub2.	New
	R.H. Prince Christopher, David KV, John SM, Sankarapandian V. Antibiotic therapy for Shigella dysentery. <i>Cochrane Database of Systematic Reviews</i> 2010, Issue 1. Art. No.: CD006784. DOI: 10.1002/14651858.CD006784.pub3.	New
	Mohanan P, Kamath A. Family support for reducing morbidity and mortality in people with HIV/AIDS. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD006046. DOI: 10.1002/14651858.CD006046.pub2.	New
Iran	Enayati AA, Hemingway J, Garner P. Electronic mosquito repellents for preventing mosquito bites and malaria infection. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 2. Art. No.: CD005434. DOI: 10.1002/14651858.CD005434.pub2.	New
Israel	Fraser A, Paul M, Attamna A, Leibovici L. Drugs for preventing tuberculosis in people at risk of multiple-drug-resistant pulmonary tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD005435. DOI: 10.1002/14651858.CD005435.pub2.	New*
Italy	Demicheli V, Debalini MG, Rivetti A. Vaccines for preventing tick-borne encephalitis. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD000977. DOI: 10.1002/14651858.CD000977.pub2.	Update
	Lazzerini M, Ronfani L. Oral zinc for treating diarrhoea in children. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 3. Art. No.: CD005436. DOI: 10.1002/14651858.CD005436.pub2.	New
Nigeria	Okebe JU, Lasserson TJ, Meremikwu MM, Richards S. Therapeutic interventions for Burkitt's lymphoma in children. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 4. Art. No.: CD005198.pub2. DOI: 10.1002/14651858.CD005198.pub2.	New
	Oniyangi O, Omari AAA. Malaria chemoprophylaxis in sickle cell disease. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 4. Art. No.: CD003489. DOI: 10.1002/14651858.CD003489.pub2.	Update*
	Ejemot RI, Ehiri JE, Meremikwu MM, Critchley JA. Hand washing for preventing diarrhoea. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 1. Art. No.: CD004265. DOI: 10.1002/14651858.CD004265.pub2.	New
	Effa EE, Bukirwa H. Azithromycin for treating uncomplicated typhoid and paratyphoid fever (enteric fever). <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD006083. DOI: 10.1002/14651858.CD006083.pub2.	New
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Nigeria	Nwachukwu CE, Okebe JU. Antimotility agents for chronic diarrhoea in people with HIV/AIDS. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD005644. DOI: 10.1002/14651858.CD005644.pub2.	New
	Oringanje C, Nemecek E, Oniyangi O. Hematopoietic stem cell transplantation for children with sickle cell disease. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD007001. DOI: 10.1002/14651858.CD007001.pub2.	New
	Okwundu CI, Okoromah CAN. Antiretroviral pre-exposure prophylaxis (PrEP) for preventing HIV in high-risk individuals. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD007189. DOI: 10.1002/14651858.CD007189.pub2.	New
	Oladapo OT, Fawole B. Treatments for suppression of lactation. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD005937. DOI: 10.1002/14651858.CD005937.pub2.	New
	Adetifa I, Okomo U. Iron supplementation for reducing morbidity and mortality in children with HIV. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD006736. DOI: 10.1002/14651858.CD006736.pub2.	New
	Meremikwu MM, Donegan S, Esu E. Chemoprophylaxis and intermittent treatment for preventing malaria in children. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 2. Art. No.: CD003756. DOI: 10.1002/14651858.CD003756.pub3.	Update
	Oringanje C, Meremikwu MM, Eko H, Esu E, Meremikwu A, Ehiri JE. Interventions for preventing unintended pregnancies among adolescents. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 4. Art. No.: CD005215. DOI: 10.1002/14651858.CD005215.pub2.	New
	Oduwole O, Meremikwu MM, Oyo-Ita A, Udoh EE. Honey for acute cough in children. <i>Cochrane Database of Systematic Reviews</i> 2010, Issue 1. Art. No.: CD007094. DOI: 10.1002/14651858.CD007094.pub2.	New
	Odey F, Okomo U, Oyo-Ita A. Vaccines for preventing invasive salmonella infections in people with sickle cell disease. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 4. Art. No.: CD006975. DOI: 10.1002/14651858.CD006975.pub2.	New
	Ojukwu JU, Okebe JU, Yahav D, Paul M. Oral iron supplementation for preventing or treating anaemia among children in malaria-endemic areas. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD006589. DOI: 10.1002/14651858.CD006589.pub2.	New
Pakistan	Thaver D, Zaidi AK, Critchley J, Bhutta ZA. Fluoroquinolones for treating typhoid and paratyphoid fever (enteric fever). <i>Cochrane Database of Systematic Reviews</i> 2005, Issue 2. Art. No.: CD004530. DOI: 10.1002/14651858.CD004530.pub2.	New
	Thaver D, Zaidi AKM, Critchley JA, Azmatullah A, Madni SA, Bhutta ZA. Fluoroquinolones for treating typhoid and paratyphoid fever (enteric fever). <i>Cochrane</i> <i>Database of Systematic Reviews</i> 2008, Issue 4. Art. No.: CD004530. DOI: 10.1002/14651858.CD004530.pub3.	Update
Philippines	Gonzales MLM, Dans LF, Martinez EG. Antiamoebic drugs for treating amoebic colitis. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 2. Art. No.: CD006085. DOI: 10.1002/14651858.CD006085.pub2.	New

Philippines	Gregorio GV, Gonzales MLM, Dans LF, Martinez EG. Polymer-based oral rehydration solution for treating acute watery diarrhoea. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 2. Art. No.: CD006519. DOI: 10.1002/14651858.CD006519.pub2.	New
	Alejandria MM, Lansang MAD, Dans LF, Mantaring III JB. Intravenous immunoglobulin for treating sepsis, severe sepsis and septic shock. <i>Cochrane Database of Systematic Reviews</i> 2010, Issue 2.	Update
Russia	Ziganshina LE, Vizel AA, Squire SB. Fluoroquinolones for treating tuberculosis. The <i>Cochrane Database of Systematic Reviews</i> 2005, Issue 3. Art No.: CD004795. DOI: 10.1002/14651858. CD004795.pub2.	New*
	Vlassov VV, MacLehose HG. Low level laser therapy for treating tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD003490. DOI: 10.1002/14651858.CD003490.pub2.	Update*
	Ziganshina LE, Squire SB. Fluoroquinolones for treating tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 1. Art. No.: CD004795. DOI: 10.1002/14651858.CD004795.pub3.	Update
South Africa	Volmink J, Garner P. Directly observed therapy for treating tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD003343. DOI: 10.1002/14651858.CD003343.pub2. [Update]	Update
	Wiysonge CS, Bradley H, Mayosi BM, Maroney R, Mbewu A, Opie LH, Volmink J. Beta- blockers for hypertension. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 1. Art. No.: CD002003. DOI: 10. 1002/14651858. CD002003.pub2.	New
	Pienaar ED, Young T, Holmes H. Interventions for the prevention and management of oropharyngeal candidiasis associated with HIV infection in adults and children. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 3. Art. No.: CD003940. DOI: 10.1002/14651858.CD003940.pub2.	New
	Volmink J, Siegfried NL, van der Merwe L, Brocklehurst P. Antiretrovirals for reducing the risk of mother-to-child transmission of HIV infection. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 1. Art. No.: CD003510. DOI: 10.1002/14651858.CD003510.pub2.	Update
	Bateganya MH, Abdulwadud OA, Kiene SM. Home-based HIV voluntary counseling and testing in developing countries. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 4. Art. No.: CD006493. DOI: 10.1002/14651858.CD006493.pub2	New
	Engel ME, Matchaba PT, Volmink J. Corticosteroids for tuberculous pleurisy. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 4. Art. No.: CD001876. DOI: 10.1002/14651858.CD001876.pub2.	Update
	Gichuhi S, Irlam JJH. Interventions for squamous cell carcinoma of the conjunctiva in HIV-infected individuals. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 2. Art. No.: CD005643. DOI: 10.1002/14651858.CD005643.pub2	New
	Volmink J, Garner P. Directly observed therapy for treating tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 4. Art. No.: CD003343. DOI: 10.1002/14651858.CD003343.pub3.	Update
	Uthman OA, Abdulmalik JO. Adjunctive therapies for AIDS dementia complex. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 3. Art. No.: CD006496. DOI: 10.1002/14651858.CD006496.pub2.	New

South Africa	Kongnyuy EJ, Wiysonge CS. Interventions to reduce haemorrhage during myomectomy for fibroids. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD005355. DOI: 10.1002/14651858.CD005355.pub3.	New
	Kredo T, Van der Walt JS, Siegfried N, Cohen K. Therapeutic drug monitoring of antiretrovirals for people with HIV. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD007268. DOI: 10.1002/14651858.CD007268.pub2.	New
	Shey M, Kongnyuy EJ, Shang J, Wiysonge CS. A combination drug of abacavir- lamivudine-zidovudine (Trizivir®) for treating HIV infection and AIDS. <i>Cochrane Database</i> <i>of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD005481. DOI: 10.1002/14651858.CD005481.pub2.	New
	Yengopal V, Harnekar SY, Patel N, Siegfried N. Dental fillings for the treatment of caries in the primary dentition. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 2. Art. No.: CD004483. DOI: 10.1002/14651858.CD004483.pub2.	New
	Siegfried N, Muller M, Deeks JJ, Volmink J. Male circumcision for prevention of heterosexual acquisition of HIV in men. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 2. Art. No.: CD003362. DOI: 10.1002/14651858.CD003362.pub2.	New
	Grobler L, Marais BJ, Mabunda SA, Marindi PN, Reuter H, Volmink J. Interventions for increasing the proportion of health professionals practising in rural and other underserved areas. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD005314. DOI: 10.1002/14651858.CD005314.pub2.	New
	Gray DM, Young T, Cotton M, Zar H. Impact of tuberculosis preventive therapy on tuberculosis and mortality in HIV-infected children. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 1. Art. No.: CD006418	New
	Young T, Busgeeth K. Home-based care for reducing morbidity and mortality in people infected with HIV/AIDS. <i>Cochrane Database of Systematic Reviews</i> 2010, Issue 1. Art. No.: CD005417. DOI: 10.1002/14651858.CD005417.pub2.	New
	Oduyebo OO, Anorlu RI, Ogunsola FT. The effects of antimicrobial therapy on bacterial vaginosis in non-pregnant women. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 3. Art. No.: CD006055. DOI: 10.1002/14651858.CD006055.pub2.	New
	Yahaya I, Uthman AO, Uthman MMB. Interventions for HIV-associated nephropathy. <i>Cochrane Database of Systematic Reviews</i> 2009, Issue 4. Art. No.: CD007183. DOI: 10.1002/14651858.CD007183.pub2.	New
Thailand	Panpanich R, Sornchai P, Kanjanaratanakorn K. Corticosteroids for treating dengue shock syndrome. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 3. Art. No.: CD003488. DOI: 10.1002/14651858.CD003488.pub2.	New *
Uganda	Gamble C, Ekwaru JP, ter Kuile FO. Insecticide-treated nets for preventing malaria in pregnancy. <i>Cochrane Database of Systematic Reviews</i> 2006, Issue 2. Art. No.: CD003755. DOI: 10.1002/14651858.CD003755.pub2.	New*
UK	Bukirwa H, Critchley J. Sulfadoxine-pyrimethamine plus artesunate versus sulfadoxine- pyrimethamine plus amodiaquine for treating uncomplicated malaria. <i>Cochrane Database</i> <i>for Systematic Reviews</i> 2006, Issue 1. Art No.: CD004966. DOI: 10.1002/14651858.CD004966.pub2.	New
	Critchley J, Addiss D Gamble C Garner P Gelband H Ejere H. Albendazole for lymphatic filariasis. <i>Cochrane Database of Systematic Reviews</i> 2005, Issue 4. Art. No.: CD003753.DOI: 10.1002/14651858.CD003753.pub3. [Update]	Update

UK	Omari AAA, Gamble CL, Garner P. Artemether-lumefantrine (six-dose regimen) for treating uncomplicated falciparum malaria. <i>Cochrane Database of Systematic Reviews</i> 2005, Issue 4. Art. No.: CD005564. DOI: 10.1002/14651858.CD005564. [update]	Update
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India	Asokan GV, Tharyan P. Evidence-Informed One Health. <i>Journal of Evidence-Based Medicine</i> (Submitted for publication)
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iii) Books or book chapters; reports

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Nigeria	Meremikwu M. Sickle Cell Disease. <i>Clinical Evidence</i> BMJ Publications. (Updated in third quarter 2005)

Nigeria	Meremikwu M. Sickle Cell Disease. In: <i>Clinical Evidence</i> London: BMJ Publications (2009 update – published)
	Meremikwu M, Ezedinachi E, Ehiri JE. Malaria in Women and Children. In: Ehiri JE. International Perspectives in Maternal and Child Health. Springler 2009
Philippines	Alejandria MM, Tumanan-Mendoza BA, Villaruz-Sulit MV, Dans AL. Evaluation of Systematic Reviews. In: Dans, AL, Dans LF, Silvestre MA, editors. Painless Evidence-Based Medicine. John Wiley & Sons, Ltd. England. 2008: 99-113
	Punzalan E, Mantaring JBV, Dans AL,. Evaluating articles on Prognosis. In Dans AL, Dans LDF, Silvestre MAA (eds). Painless Evidence-Based Medicine. John Wiley & Sons, Ltd. England
	Mantaring JBV, Dans AL, Punzalan E. Evaluating articles on Harm. In Dans AL, Dans LDF, Silvestre MAA (eds). Painless Evidence-Based Medicine. John Wiley & Sons, Ltd. England
	Alejandria M. Dengue hemorrhagic fever or dengue shock síndrome in children. In: <i>Clinical Evidence</i> London: BMJ Publications (2008 update - published).
Russia	Chuchalin AG, Lepakhin VK, Ziganshina LE, editors. Drug reference guide "Lekarstvennye sredstva" (for patients). Moscow: Geotar-Media; 2007 (in press)
	Chuchalin AG, Belousov YuB, Khabriev RU and Ziganshina LE, editors. Guide to rational use of medicines. Formulary system. Moscow: Geotar-Media; 2006: 768 p ¹⁴ .
	CD-ROM "Lekarstvennye sredstva" based on the drug reference guide included as an annex to 2 National publications: Russian therapeutic guide. Editor: Chuchalin AG., 2006 Internal Medicine. Textbook for medical students. Editors: Mukhin NA, Moiseev VS, Martinov AI., 2007
	Galiullin NI, Ziganshina LE, Safiullin RS, Yarkaeva FF, editors. Republican formulary of medicines: guide-glossary of trade names, dosage forms and classification positions of medicines. 4 th edition. Kazan: Medicina; 2006: 304 p.
	Pokrovsky VV. (Makarova M.V. and Ziganshina LE, editors. HIV-infection and AIDS (Clinical guidelines). Moscow: Geotar-Media; 2006: 128 p.
	Khabriev RU, Chuchalin AG, Ziganshina LE, editors. Drug reference guide "Lekarstvennye sredstva", Reference guide to medicines dispensed on physician's (nurse's) prescription in supplementary medical care provided to certain categories of citizens entitled to state provided social support (Federal Drug Reimbursement Program). 3rd edition. Moscow: Geotar-Media; 2006: 800 p.
	Ziganshina L, Garner P. Tuberculosis. In: <i>Clinical Evidence</i> . London: BMJ Publications (2007 update - published).
	Guide to rational use of medicines. Formulary system. Editors: Chuchalin AG, Belousov YuB, Khabriev RU and Ziganshina LE. Moscow: Geotar-Media 2007:729

¹⁴ Recommended by the Methodology Committee on Medical and Pharmaceutical Education of higher education institutions of the Russian Federation for the system of continuing medical education of physicians.

Russia	Drug reference guide "Lekarstvennye sredstva", 4d edition. Reference guide to medicines dispensed on physician's (nurse's) prescription in supplementary medical care provided to certain categories of citizens entitled to state provided social support (Federal Drug Reimbursement Program). Editors: Khabriev RU, Chuchalin AG, Ziganshina LE. Moscow: Geotar-Media 2006 (4): 755.Only became available in 2007.
South Africa	Gibson PG, Abramson M, Wood-Baker R, Volmink JA, Hensley M, and Costable, Ulrich (Eds) Evidenced-based Respiratory Medicine. BMJ Books: United Kingdom. ISBN 13:978-0-7279- 1605-1/ISBN 10:0-7279-1605-X
	Volmink JA, Murphy C. Evidence-based Respiratory Medicine, Section Editor: 4, Infection 299; Contributor: 4.3 Pulmonary tuberculosis, 321. BMJ Books United Kingdom. ISBN 13:978-0-7279- 1605-1/ISBN 10:0-7279-1605-X
UK	Jacob A, Solomon T, Garner P. Corticosteroids in central nervous system infections. In: Warlow C, Candelise L, Hughes R, editors. Evidence-based neurology. London: BMJ Publishing Group; pp, 151-60
WHO	Smith H, Gülmezoglu M, Garner P. Evidence-led obstetric care: strategies to change practice and policy. World Health Organization, Department of Reproductive Health and Research. 2005; 1-59. WHO. WHO/RHR/05.14. http://www.who.int/reproductive-health/publications/evidence_led_obstetric_care/text.pdf
	World Health Organization (Jones K and Garner P: members of the Technical Guidelines Group; members of the Guideline Drafting Committee). WHO Guidelines for the treatment of malaria. WHO, Geneva, Roll Back Malaria. 2006; 1-266. WHO/HTM/MAL/2006.1108. <u>http://www.who.int/malaria/docs/TreatmentGuidelines2006.pdf</u>
Reports	
China	Liu Q, Wang Y, Wang H, Li L et al. Strategies on Public-private Partnership in the Provision of Health Care Services: A Descriptive Systematic Review. Document dated 15 January 2009.
China	Wang Y, Tang XJ, Zeng H et al. Review and Assessment of Pro-poor Initiatives in TB Control Programmes Among Floating Population in China. Document dated 25 October 2008. Submitted to WHO China Office
International	Hill S, Garner P, MacLehose H, Oxman A, for the Co-ordinating Editors Executive. Proposal to establish an Editorial Board and Editor-in-Chief for The Cochrane Collaboration. Document dated 14 March 2008 due to be presented to Cochrane Steering Group, Vellore, April 2008 (total funding requested £360K per year)
Nigeria	Meremikwu M, Ugot I. Status of malaria control in Cross River State: report of a state-wide malaria indicator survey. Department of Roll Back Malaria Office of the Governor Cross River State, November 2008
	Meremikwu M, Orji B, Garner P. Health technology assessment in Nigeria – strategic options (unpublished report)
	Midterm evaluation of Phase one and baseline study for Phase 2 Global Fund Round 4 grant for scaling up malaria control in Nigeria - Report of a malaria indicator survey. Federal Ministry of Health, Abuja in collaboration with Society for Family Health & Yakubu Gowon Centre (Principal Recipients of the Global Fund for AIDS, Tuberculosis and Malaria in Nigeria; Round 4 Phase 2), 2008

Asuzu M. Meremikwu M. Africare/SPDC Malaria/Health Integration Project (HIP) Report of The
Final Evaluation August 2009
Amarillo, ML. Technical Report on Expanded Evaluation of HIV Rapid/Screening Tests Done the STI-AIDS Central Coordinating Laboratory (SACCL) DOH – San Lazaro Hospital
Jones K, Ridge A, Harte H, Report on a Technical Update of the Essential Medicines Library. For the World Health Organization. July 2006
Abba K, Sinfield R, Hart T, Garner P. Pathogens associated with persistent diarrhoea in children in developing countries: Systematic review of observational studies. For the World Health Organization (2007)
Activity item: Commissioned paper for WHO
Abba K, Sinfield R, Hart T, Garner P. Is the routine use of antimicrobials useful for persistent diarrhoea in children under six in low and middle income countries? A systematic review of randomized trials. For the World Health Organisation (2007)
Activity item: Commissioned paper for WHO
Kelly M, Garner, P, Weiss K, Wyss C, Bosch X. GAVI Health Systems Strengthening Knowledge Bank: Identification of relevant topics and mapping of existing initiatives for knowledge synthesis and translation. Consultancy Report, commissioned by GAVI. 2009
Smith H, Xu Qian. Migration and women's reproductive health. For the World Health Organisation Commission on the Social Determinants of Health (2008)
Activity item: commissioned paper for Department of Reproductive Health & Research, WHO.

iv) In-house publications – to include working papers, newsletters, internal series (peer reviewed externally and not peer reviewed externally)

Country	Publication details
India	Sinclair D, Tharyan P. Report of the 'Evidence Informed Health Policy workshop' held during the Winter Symposium 2010
	George A, Mulliyil J, Balraj V, Tharyan P, Helan J, Abraham A. Framing Evidence-Informed Health Policy in India- the example of rubella vaccines. (PhD proposal cleared by IRB, CMC Vellore)
	South Asian Cochrane Network Issue 1, 2007
	South Asian Cochrane Network Issue 2, 2007
	South Asian Cochrane Network, 2009
Nigeria	Mosquito Net – Best Prevention Method for Malaria (IEC Material – Pamphlet)
	ACT (Artemisinin-Based Combination Therapy) Fast – The sure way to treat malaria! (IEC Material- Pamphlet)
	Effective Health Care Quarterly Newsletter (paper) 2006
	Effective Health Care Research Programme Nigeria Quarterly Newsletters: March, June, September and December 2007 editions.
	Effective Health Care Research Programme Nigeria Quarterly Newsletters, June and December 2008.

Nigeria	Effective Health Care Research Programme Nigeria Newsletter December 2009 The Importance of Cost Effectiveness Evaluation in Achieving MDGs 4 and 5
	Cochrane Nigeria Info Sheet – April 2009, July 2009, October 2009, January 2010 (E-newsletter)
Philippines	Evidence Update TB series and Dengue reprinted in the Philippines. <i>Journal of Microbiology and Infectious Diseases</i> July-Dec 2008 issue
South Africa (Cape Town)	Atkins S, Fouten E. A qualitative study of access and trust in health information in low income communities in South Africa. March 2009
	Araotinbo ID, Young TN. Clinical guideline pilot project. July 2009
UK (Consortium)	EHCRC Newsletter – Spring 2005 EHCRC Newsletter – Summer 2005 EHCRC Newsletter – Autumn 2005 EHCRC Newsletter – July 2006 EHCRC Newsletter – November 2006 EHCRC Newsletter – March 2007 EHCRC Newsletter – June 2007 EHCRC Newsletter – September 2007 EHCRC Newsletter – March 2008 EHCRC Newsletter – August 2008 EHCRC Newsletter – July 2009 EHCRC Newsletter – November 2009

v) In-house published products – toolkits/CD-ROMs, videos (peer reviewed externally and not peer reviewed externally)

Country	Product details	
Consortium	See podcasts produced to support Cochrane Systematic Reviews	
India	Video-recordings of the Plenary Sessions of the 8 th Winter symposium of the Christian Medical College, Vellore and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare, 11-14 January 2010. Available at: <u>www.cochrane-sacn.org</u>	
UK	CD produced by Cochrane Infectious Diseases Group and respiratory Epidemiology and Clinical research Unit, Montreal. 'Systematic Reviews and Meta-analyses of Diagnostic Test Accuracy. June 2009	
	Video produced of Dr Peter Olumese from the World Health Organization's Global Malaria Programme talking about the new edition of Malaria Treatment Guidelines: 18th March 2010 <u>http://www.research4development.info/news.asp?ArticleID=50604</u> and on You Tube	

vi) Policy briefs

Country	Publication	
China	Adherence to TB treatment in Chongqing: Situational analysis and policy implications http://www.liv.ac.uk/evidence/Policy-brief_TB-adherence_17MAR06.pdf	
India	The South Asian Cochrane Network: Helping to provide evidence for interventions in health care (19 April, 2006) Report submitted to The Indian Council of Medical Research, New Delhi.	
Nigeria	Medium Term Sector Strategy for Roll Back Malaria, Cross River State 2008-2011. A strategic plan developed by the Department of Roll Back Malaria with technical support of Nigeria RPC Partner and submitted to the Office of the Economic Adviser to the Governor of Cross River State Nigeria.	
	Survey of Malaria control in Cross River State: A summary of findings with technical support of Nigeria RPC partner and submitted to the Office of the Economic Adviser to the Governor of Cross River State Nigeria.	
Nigeria & UK	Meremikwu, Orji B, Garner P. Health Technology Assessment in Nigeria: strategic options.	
Nigeria, Uganda & UK	Research on access to electronic health knowledge in Africa: Policy brief http://www.liv.ac.uk/evidence/Policy-brief_Access-study_7NOV06.pdf	
Philippines	Festin MR, Habana T, Toral J, Mantaring JV, et al. Maternal and Child Health in the Philippines: Family Health Book. FACE-HPDP, 2009. (Completed report, unpublished)	
	Alejandria M, Salamat S. Developing an integrated policy framework for the avian influenza preparedness program	
Russia	Analytical review: Evaluation of rationality of use of state provided funds (Funds of obligatory medical insurance) allocated for supplementary medical care provided to certain categories of citizens entitled to state provided social support (Federal Drug Reimbursement Program) in 2006 by means of clinical-pharmacological analysis of validity of prescriptions and by ABC/VEN analysis (December 2007). Report submitted to the Federal Fund of Obligatory Medical Insurance of the Russian Federation. (37 pages)	
	Analytical review: Evaluation of rationality of use of state provided funds (Funds of obligatory medical insurance) allocated for supplementary medical care provided to certain categories of citizens entitled to state provided social support (Federal Drug Reimbursement Program) in 2006 by means of WHO indicator analysis and ATC/DDD analysis (December 2007). Report submitted to the Federal Fund of Obligatory Medical Insurance of the Russian Federation. (45 pages)	

vii) Targeted research for DFID use e.g. a note for Insight, a seminar paper for DFID, providing materials for Advisors retreat

Numerous contributions to R4D.

Country	Publication/poster
India	Tharyan P. The need for Evidence Based Medicine. Invited plenary session of the symposium on EBM, held at the Annual Sessions of the Ceylon College of Physicians; Cinnamon Grand, Colombo, 2009 Sep 26
	Barnabas JE, Yamuna BGC, Venkatesh P, Sangeetha V, Tharyan P. Access to evidence from countries in South Asia: the South Asian Database of Controlled Clinical Trials and the South Asian Cochrane Network and Centre's Digital Library. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	George A, Kirubakaran R, Barnabas JE, Yamuna BGC, Manuelraj, Tharyan P. Editorial policy and the reporting of randomized controlled trials in Indian medical journals in 2004-2005 versus 2007-2008. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Ashokan GV, George A, Kirubakaran R, Tharyan P. Levels of evidence and the conclusions of the Cochrane systematic reviews. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
Nigeria	Odey, F; Meremikwu, MM; Oringanje, CM. Open label trial of Artesunate + Naphtoquine for treating uncomplicated malaria in adults in Calabar, Nigeria. Proceedings of the 5 th MIM Pan-African Malaria Conference; 2009 2-6 Nov; Narobi, Kenya
	Siyanbade, F; Fever resolution time in children treated with ACTs in University of Calabar Teaching Hospital. Proceedings of the 5 th MIM Pan-African Malaria Conference; 2009 2-6 Nov; Narobi, Kenya
	Nwagbara, BA; Effa, EE, Bello,S; Pattern, Determinants and Mental Health Consequences of Sexual Violence among female undergraduate students in Calabar, Southern Nigeria at the SVRI forum July 6-9, 2009 in Johannesburg, South Africa
	Meremikwu, MM; Udoh EE; Nwagbara BA; Effa EE; Edet B; Nwagbara E, Bello S, Oringanje C, Eke F. Priority setting for system review of health care interventions in Nigeria. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Chibuzor, MT; Meremikwu, MM; Preliminary Assessment of handsearching programmes for RCTs in Nigeria (Poster). Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
South Africa (Cape Town)	Abrams A. The Pan African Clinical Trials Registry. 5th European and Developing Countries Clinical Trials Partnership Forum, Arusha, Tanzania. 12-14 October 2009
	Volmink J. The Cochrane Collaboration as a virtual college: approaches to capacity development. Reviews for Africa Programme. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Abrams A. The Pan African Clinical Trials Registry. 4th African Vaccine Regulatory Forum (AVAREF) Meeting, Abuja, Nigeria. 21-25 September 2009
	Young T, Hopewell S. Seek and ye shall find: methods for obtaining unpublished data. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Horvath TH, Siegfried NL, Kennedy GE, Humphreys EH, Rutherford GW. The Cochrane HIV/AIDS Group, and rapid advice for the World Health Organization. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.

viii) International conference papers/posters 2009 and 2010 items only

South Africa (Cape Town)	Abrams A, Pienaar E, Siegfried N. The Pan African Clinical Trials Registry: Early analysis reveals a focus on interventions aimed at children and HIV/AIDS. 1st African Regional Conference on Immunization, Harare, Zimbabwe. 14-17 December 2009
	Lutje V, Gerritsen A, Siegfried N, Garner P. Registering and analyzing malaria clinical trials in Africa: the PACT registry initiative. Proceedings of the 5 th MIM Pan-African Malaria Conference; 2009 2-6 Nov; Narobi, Kenya
	Pienaar E, Siegfried N, Oliver J, Zani B. The Cochrane HIV/AIDS Trials Register: five years of achievements, progress and challenges. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Zani B, Siegfried N, Pienaar E. Randomized controlled trials of HIV/AIDS prevention and treatment in Africa: results from the Cochrane HIV/AIDS Specialized Register. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Horvath TH, Siegfried NL, Kennedy GE, Humphreys EH, Rutherford GW. Effective collaboration between the Cochrane HIV/AIDS Group and the World Health Organization. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Siegfried N. Male circumcision for prevention of HIV acquisition in heterosexual men: Updated Cochrane systematic review provides best evidence. 5th IAS Conference on HIV Pathogenesis, Treatment and Prevention, Cape Town, South Africa. 19-22 July 2009
	Young T, Busgeeth K. Home-based care for reducing morbidity and mortality in people infected with HIV/AIDS. 5th IAS Conference on HIV Pathogenesis, Treatment and Prevention, Cape Town, South Africa. 19-22 July 2009
	Kredo T, van der Walt JS, Siegfried N, Cohen K. Therapeutic drug monitoring of antiretrovirals - A Cochrane systematic review. 16th Conference on Retroviruses and Opportunistic Infections, Montreal, Canada. 8-11 February 2009
UK	Abrams A, Pienaar E, Siegfried N, Oliver J, Zani B, and Lutje V. Meeting the Millennium development goals – the Pan-African Clinical Trials Registry. 2009 Public Health Association of South Africa Conference, Durban, SA, 30 November-2 December 2009
	Gerritsen AAM, Lutje V, Siegfried N, Garner P. Characteristics of randomized controlled trials of malaria prevention and treatment in Africa. 5 th Public Health Association of South Africa Conference, Durban, SA, 30 November-2 December 2009
	Lutje V, Gerritsen A, Siegfried N, Garner P. Registering and analyzing malaria clinical trials in Africa: the PACT registry initiative. Proceedings of the 5 th MIM Pan-African Malaria Conference; 2009 2-6 Nov; Narobi, Kenya
	Donegan S, Garner P Faragher B. Cluster randomised trials in Cochrane reviews of infectious diseases. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.
	Donegan S, Tudur-Smith C Gamble C Williamson P. Methodological and reporting quality of indirect comparisons in published reviews. Proceedings of the 17 th Cochrane Colloquium; 2009 Oct 11-14; Singapore.

Country	Publication
India	Tharyan P. Can tomorrow's doctors be trusted to know what is good for their patients? Invited paper at the 2 nd Asian and 3 rd Indian Medical Students Research Conference (MEDICON 2009), TMA Pai auditorium, Mangalore, 27 June 2009
	Tharyan P. The Science and ethics of interventional trials: issues in the design, conduct and reporting of clinical trials. Presented at the 1 st regional conference on Ethical issues in Stem Cell Research, sponsored by the Department of Biotechnology, Government of India; The World Health Organization; The Centre for Stem Cell Research, CMC Vellore; and the South Asian Cochrane Network, held at CMC Vellore from 31 July-1 August 2009
	Tharyan P. Evidence for Public Health and Health Policy. Paper presented at the National Institute of Public Health and NICE International conference on, "Strengthening Clinical Governance through Evidence Based Health Care," Hyderabad, 2 August 2009
	Tharyan P. Role of research in setting standards for education. (Invited plenary talk) Proceedings of the 13 th National Conference of the Nursing Research Society of India. CMC Vellore, 13 November 2010
	Tharyan P. Towards improving the design, conduct, reporting, interpretation and implementation of research evidence in India. Proceedings (Plenary presentation) of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare- Evidence for better health. CMC Vellore, 11 January 2010
	George A, Kirubakaran R, Tharyan P. Plagiarism in Indian Medical Journals. Proceedings of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare- Evidence for better health. CMC Vellore, 12 January 2010
	Sebind Kumar, Prathap Tharyan, Naveen Thomas, Clive Adams. Modafinil for clozapine induced adverse effects in people with schizophrenia and schizoaffective disorder in remission: a randomized, placebo-controlled trial stopped early for harms. Proceedings of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare-Evidence for better health. CMC Vellore, 12 January 2010
	Asokan GV, Dave Sinclair and Prathap Tharyan. Google Insights into The Cochrane Library usage in India: is the national subscription being used? Proceedings of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare- Evidence for better health. CMC Vellore, 12 January 2010
	Jabez Paul Barnabas E, Prathap Tharyan, Venkatesh Parthasarathy. Access to evidence from countries in South Asia: The South Asian Database of Controlled Clinical Trials and the South Asian Cochrane Network and Centre's Digital Library – An Update. Proceedings of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare-Evidence for better health. CMC Vellore, 12 January 2010
	Aneesh George, Richard Kirubakaran, Prathap Tharyan, Jabez Paul, Manuel Raj. Editorial policy and the reporting of Randomized Controlled Trials in Indian Medical Journals in 2004 & 2005 compared to 2007 & 2008. Proceedings of the 8 th Winter Symposium and 3 rd South Asian Regional Symposium on Evidence-Informed Healthcare- Evidence for better health. CMC Vellore, 12 January 2010

ix) Other conference papers (including proceedings) 2009 and 2010 items only

India	Tharyan P. Evaluating outcomes in scaled research programs: Keynote address at the Symposium on "Exchange of research experiences in India", co-organized by the London School of Hygiene & Tropical Medicine & the ICICI Centre for Child Health and Nutrition. India Habitat Centre, New Delhi, 3 March 2010
	Tharyan P. Building Research Consortia: the South Asian Cochrane Centre and Network and the Effective Healthcare Research Partnership Consortium. Plenary address at the Symposium on "Exchange of research experiences in India", co-organized by the London School of Hygiene & Tropical Medicine & the ICICI Centre for Child Health and Nutrition. India Habitat Centre, New Delhi, 4 March 2010
	Tharyan P. Evidence Informed Policy Network (EVIPNet): models for India. Presented at the parallel session on Establishing EVIPNet at the South East Asian Regional Conference on Epidemiology held at the Taj Palace Hotel, New Delhi, 9 March 2010
	Tharyan P. Has evidence made an impact in developing countries? Plenary presentation at the symposium "Evidence on Trial", held in conjunction with Steering Group and Centre Directors Meeting of the Cochrane Collaboration; Auckland City Hospital, Auckland, New Zealand, 22 March 2010
South Africa (Cape Town)	Volmink J. The HIV exposed but uninfected infant (HEU): How to explain excess morbidity and mortality. Peter Wall Institute for Advanced Studies Colloquium Abroad, Stellenbosch, Cape Town. 4-5 November 2009
	Siegfried N. Using systematic reviews to inform evidence-based policy and practice in poor countries: challenges, facilitators and opportunities. Medical Research Council Research Day, Medical Research Council, Cape Town. 14-15 September 2009
	Volmink J. Mind the Gap: avoiding missteps on the path from evidence to practice. Biological Psychiatry Congress 2009, Kleinmond, Western Cape. 28-31 May 200
	Gerritsen A, Lutje V, Siegfried N, Garner P. Characteristics of randomized controlled trials of malaria prevention and treatment in Africa. 5th Public Health Association of South Africa Conference 2009, Durban, South Africa. 30 November - 2 December 2009
	Abrams A, Siegfried N. Pan African Clinical Trials Registry. Western Cape Provincial Health Research Committee Meeting, Stellenbosch. 21 October 2009
	Abrams A, Pienaar E, Siegfried N, Oliver J, Zani B, Lutge V. Meeting the millennium development goals - the Pan African Clinical Trials Registry. 5th Public Health Association of South Africa Conference 2009, Durban, South Africa. 30 November - 2 December 2009
	Siegfried N, Pienaar E. Meeting MDG 6: learn about how the Cochrane HIV/AIDS Review Group can help you meet this challenge. 5th Public Health Association of South Africa Conference 2009, Durban, South Africa. 30 November - 2 December 2009
UK	Translating research into practice: using systematic reviews in policies, guidelines and influencing change [Plenary]. European Congress on Tropical Medicine and International Health, Verona, Italy

Year / Country	Press releases or press articles	Media hits
Year 1		•
Global	Health Behavior News Service Becky Ham, Science Writer. Not Enough Is Known About Treating Malaria in Pregnancy, Researchers Say. Release Date: July 19, 2005	
	Health Behavior News Service. Becky Ham, Science Writer. Older Drugs May Be Good Stopgap Treatment for Malaria in Africa. Release Date: January 24, 2006	3 recorded
Year 2		
India	Wiley Press Release: India's National provision (subscription to the Cochrane Library) February 2007	3 recorded
	The news of the national provision for <i>The Cochrane Library</i> in India was picked up by <i>The Telegraph</i> , a national daily published from Calcutta. Ganapati Mudur, who also writes in the BMJ on health related news from India, published an erudite piece on this initiative that can be accessed at:	
	http://www.telegraphindia.com/1070204/asp/nation/story_7348274.asp	
	Also in: The New Indian Express: <u>http://epaper.newindpress.com/Login.aspx?selPg=375&page=06_02_2007_103.</u> jpg&ed=396	
	News Today: http://www.newstodaynet.com/10feb/ss2.htm	
Nigeria	Solution for Treating Dehydration caused by Acute Diarrhoea in Children.	1

x) Any publicity coverage in local and international media – newspapers, TV, radio, mobile phones, websites and magazines

	jpg&ed=396	
	News Today: <u>http://www.newstodaynet.com/10feb/ss2.htm</u>	
Nigeria	Solution for Treating Dehydration caused by Acute Diarrhoea in Children. <i>Business Day</i> , 5 September 2006	1
	South African Cochrane Centre Establishes Branch in Nigeria. <i>Business Day</i> , 6 September 2006	2
	Why Cochrane is Essential in Health Care Delivery. <i>Daily Champion</i> ,13 September 2006	1
	Introducing Evidence-based medicine: The core basics. 2006 Edition of <i>The Syringe</i> . Official Publication of the University of Calabar Medical Students Association.	1
Russia	TV has been used on regular basis to communicate to community the knowledge, acquired through systematic reviews (Tatarstan level).	
	Topics covered: multivitamins for children, pregnant, breastfeeding women and the elderly; antibiotic use in upper respiratory infections; hormonal preparations and women's' health; rational pharmacotherapy of gastrointestinal problems in children.	
Global	Wiley Press Release: Directly Observed Therapy does not help fight Tuberculosis (updated review) April 2006	1 recorded
	Picked up by The Scientist online	

	DFID Press Release: Insecticide treated nets beneficial for pregnant women in malaria-endemic Africa. 25 April 2006	1 recorded
	AlphaGalileo Press Release. New research will raise awareness of how to protect unborn children from malaria. 02 April 2007	
	Health Behavior News Service. Laura Kennedy, Contributing Writer. Anti-Malaria Bed Nets Improve Health of Mothers, Babies in Africa. Release Date: May 1, 2006.	
	Quote by Hilary Ben, International Development Secretary plus article about research, DFID Website, 25 April 2006	
	Wiley Press Release: Don't' bother with intravenous rehydration for diarrhoea – oral rehydration works just as well. 19 July 2006	
	Wiley Press Release: Treating water at home is effective in preventing diarrhoea, a major cause of death in young children in developing countries. 19 July 2006	
	PLoS Medicine Article: No proof that SARS therapies worked	1 recorded
	Health Behavior News Service. Becky Ham, Science Writer. Vaccine Against Early-Stage Malaria Shows Real Potential, Review Finds Release. Release Date: October 17, 2006	2 recorded
	New Scientist online	
	Times online	
	ld21 Highlights	4
	'Should diazepam be given to people with tetanus?' id21 Research Highlight: 17 February 2006	
	'Systematic review: Does watching people take their TB drugs increase treatment success?' id21 Research Highlight: 29 September 2006	
	'Systematic review: Does regular antimalarial treatment benefit young children?' id21 Research Highlight: 6 October 2006	
	'Systematic review: Do lay health workers improve healthcare delivery and healthcare outcomes?' id21 Research Highlight: 23 October 2006	
	Health Behavior News Service: Drug-Enriched Salt could Prevent Devastating Tropical Disease Date: March 1, 2007	1 recorded
Year 3		1
Russia	Publications in the weekly All-Tatarstan newspaper "Medical-Pharmaceutical	

Russia	Publications in the weekly All-Tatarstan newspaper "Medical-Pharmaceutical Newsletter"	
	Participation in TV-health programme "ORZ"	

UK	Wiley Press Release: Electronic mosquito repellents for preventing malaria infection – April 2007	97 worldwide
	DAILY EXPRESS	
	Sonic Mozzie 'curb' useless: By Geoff Maynard	
	http://www.express.co.uk/posts/view/4700/Sonic+mozzie+'curb'+useles	
	Center for the Advancement of Health	
	Electronic Mosquito Repellents Fail to Prevent Malaria Transmission: By Bruce Sylvester	
	http://www.cfah.org/hbns/getDocument.cfm?documentID=1480	
	Medical News Today	
	Electronic Mosquito Repellents Fail To Prevent Malaria Transmission	
	http://www.medicalnewstoday.com/articles/68540.php	
	Science Daily	
	Electronic Mosquito Repellents Don't Work, Say Researchers	
	http://www.sciencedaily.com/releases/2007/04/070417194230.htm	
	Wiley Press Release: Handwashing for preventing diarrhoea - January 2008 TELEGRAPH	49 worldwide
	Hand washing can prevent hundreds of deaths: By Laura Clout	
	http://www.telegraph.co.uk/news/main.jhtml?xml=/news/2008/01/23/nhealth323. xml	
	Sanitation Updates	
	2008 Review of Handwashing for the Prevention of Diarrhoea	
	http://sanitationupdates.wordpress.com/2008/01/24/2008-review-of-	
	handwashing-for-the-prevention-of-diarrhoea/	
	Science Daily	
	Handwashing Can Reduce Diarrhea Episodes By About One Third	
	http://www.sciencedaily.com/releases/2008/01/080122203221.htm	
	Medscape Medical News	
	Hand Washing May Reduce Episodes of Diarrhea by 30% : By Laurie Barclay, MD	
	http://www.medscape.com/viewarticle/569159	
	Medscape Medical News	
	Hand Washing May Reduce Episodes of Diarrhea by 30% : By Laurie Barclay, MD	
	http://www.medscape.com/viewarticle/569159	
	Wiley press alert: Interventions for treating scabies - September 2007	
	Wiley press alert: Artesunate versus quinine for treating severe malaria - December 2007 <i>Picked up Malaria World Nr. 136 (29 October 2007)</i>	
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UK	Wiley press alert: Deworming drugs for treating soil-transmitted intestinal worms 4 in children December 2007	
	Picked up by NHS National Library for Health	
	http://www.library.nhs.uk/ChildHealth/ViewResource.aspx?resID=236585	
	Wiley press alert: Corticosteroids for managing tuberculous meningitis December 2007	
Year 4		
Brazil	Translation of abstracts of existing reviews to Portuguese and Spanish will be published in the new home page of SRG. Efforts to translate to other languages	
UK	Wiley Press Release: Zinc for children with diarrhoea.	27
	Health Behavior News Service. Zinc Could Saves Lives of Children With Diarrhea. Release date: July 29, 2008	
	Wiley Press Release: Metrifonate and praziquantel for schistosomiasis. 16 July 2008	9
	Wiley Press Release: IPT for malaria	10
Year 5		
India	ndia Press articles from 8 th Winter Symposium and the 3 rd South Asian Regional Symposium on Evidence Informed Health Care. January 2010	
	The Hindu	
	Evidence informed Public Health, 13 January 2010 - Special Correspondent	
	http://www.hinduonnet.com/thehindu/thscrip/print.pl?file=2010011352170300.ht m&date=2010/01/13/&prd=th&	
	Sunday Express- CMC all set on International Meet on Healthcare- Express News Service, 10 January 2010	
	www.expressbuzz.com	
	New Indian Express- Changing Health Perceptions - V Narayanamurthy; 12 January 2010	
	www.expressbuzz.com	
	Two radio interviews by Norman Swan (30 mins each) on Australian Broadcasting Corporation Radio National. Broadcast 1 st and 8 th February 2010.	
	Topics: Mental Health Research from Southern India and Drug trials undertaken in India and the reporting of medical trials. Audio and transcript available to download.	
	Available on R4D at	
	http://www.research4development.info/news.asp?ArticleID=50589	
	Wiley Press Release: Indian National Provision to The Cochrane Library renewed for three years – 22 March 2010 <u>www.cochrane.org</u> 22 March 2010 and on Twitter	1 plus Twitter coverage

Nigeria	Current status of malaria control in cross river state [press statement]. Prepared for Press Briefing by Dr Iyam Ugot (Special Adviser to the Governor on Roll Back Malaria) and Prof Martin Meremikwu (Institute of Tropical Diseases Research and Prevention, University of Calabar Teaching Hospital) - January 2010. Quarterly Press Releases from the Publishers of the Cochrane Library diseminated to National Media organizations in the mailing list of the Nigeria		
	disseminated to National Media organizations in the mailing list of the Nigeria Consortium office.		
South Africa	Wiley Press Release: Male circumcision for prevention of heterosexual acquisition of HIV in men. The review received wide coverage, over 100 hits on The Cochrane Library as well as in local and international media. Dr Siegfried was interviewed on SABC News International. A number of websites either highlighted the review or created a link to the information. She was also interviewed by the AIDS journal. April 2009		
	Health Behaviour News Service: Review Supports Circumcision in HIV Prevention. Release Date : April14, 2009		
	Podcast: The Cochrane Collaboration April 2009 http://www.cochrane.org/podcasts/issue-2-april-2009/male-circumcision- prevention-heterosexual-acquisition-hiv-men		
UK	Print article on 'Evidence-based Tropical Medicine' – Evidence in Practice, July 2009, Issue 4	1	
	Wiley Press Release: Oral rehydration solution for Diarrhoea: more research needed on new formulations. Wiley News Alert. 15 April 2009 Podcast in English available on www.cochrane.org	16 worldwide	
	Wiley Press Release: Give children iron supplements: they don't increase malaria risk. Wiley News Alert. 8 July 2009	45 worldwide	
	Wiley Press Release: Continued vigilance against drug resistant malaria is needed. Wiley News Alert. 8 July 2009		
	Wiley Press Release: Drugs for preventing malaria in travellers. Wiley News Alert. 7 October 2009 Podcast in English and French; The Cochrane Library, October 2009 <u>http://www.cochrane.org/podcasts/issue-4-october-2009/drugs-preventing-malaria-travellers</u>	10 worldwide	
	Health Behaviour News Service. Two Malaria Drugs for Travellers Have Fewer Side Effects. Release date: October 6,2009		
	Print article in Tropical Medicine & International Health Journal and on MDlinx.com website 'Tuberculosis patient expenditure on drugs and tests in subsidized, public services in China, November 2009	1	
	Wiley Press Release: Young T. Prepared a press release for the "Effects of home-based care for HIV/AIDS" review which was highlighted by Wiley. Podcast: The Cochrane Collaboration, 20 January 2010. http://www.cochrane.org/podcasts/issues-1-3-january-march-2010/home-based-care-reducing-morbidity-and-mortality-people-infec		
	Web Article: Artemisinin-based combination therapy for malaria, but which one? Guest editorial by P. Garner in clinicalevidence.bmj.com – February 2010	1	

UK	Effective Health Care Research Consortium Press Release from LSTM Press Office. Campaign to end sale of electronic mosquito repellents. 25 February 2010	11 worldwide
	Including print article in Science	
	http://www.sciencemag.org/cgi/content/full/sci;327/5970/1183- b?maxtoshow=&hits=10&RESULTFORMAT=&fulltext=won%27t+fly&searchid=1 &FIRSTINDEX=0&issue=5970&resourcetype=HWCIT	
	and Financial Times Blog and R4D http://www.research4development.info/news.asp?ArticleID=50590	
	R4D Research News item – <u>DFID-funded RPC contributes to new WHO Malaria</u> <u>Guidelineshttp://www.research4development.info/news.asp?ArticleID=50604</u> Video also of Peter Olumese, WHO talking about RPC contribution to Guidelines	1
	R4D Research News item – Effective Health Care Research Consortium research featured in 'special collection' http://www.research4development.info/news.asp?ArticleID=50608	1
India	Wiley Press Release: Indian National Provision to The Cochrane Library renewed for three years – 22 March 2010 <u>www.cochrane.org</u> 22 March 2010 and on Twitter	1 plus Twitter coverage

xi) Website links

Country	Website address
Brazil	Cochrane STD Group http://www.igh.org/Cochrane/STD/
Brazil	Centro de Estudos de AIDS e DST do Rio Grande do Sul (CEARGS) http://www.ceargs.org.br/
China	EHCRPC China Network: http://www.chinaehcrpc.cn
India	South Asian Cochrane Network. http://www.cochrane-sacn.org
Nigeria	Effective Health Care Research Programme Nigeria. http://www.ehcapng.org
Russia	Kazan State Medical Academy Консорциум Исследовательских Программ для Эффективного Здравоохранения. Вестник доказательной медицины
	Kazan Partner – Major Site http://www.evidence-update.ru/
	Kazan Partner – sister site <u>http://www.evidence.edu.mhost.ru</u>
	Ministry of health of the Republic of Tatarstan http://www.minzdrav.tatar.ru

Russia	Формуляр. RU Formulary system in the Russian Federation <u>http://www.formular.ru</u> (accessed 24 April 2008) Drug monographs with evidence-based indications used for the development of the formulary text.
South Africa	South African Cochrane Centre, MRC. http://www.mrc.ac.za/cochrane
South Africa	Faculty of Health Sciences, Stellenbosch University http://sun025.sun.ac.za/portal/page/portal/Health_Sciences/English/Home
UK	Effective Health Care Research Consortium, LSTM. http://www.liv.ac.uk/evidence/
The Cochrane Library	http://www.thecochranelibrary.com/view/0/index.html
The Cochrane Collaboration	http://www.cochrane.org/evidenceaid/project.htm

xii) RPC reports

Country	Report/Publications	
China	EHCRC China Network. Report of the EHCRC China (Chongqing) RPC Programme Partner Collaborators Network first meeting; September 13-14 2006, Chongqing.	
	EHCRP China Network. Report of the EHCRC RPC Asia Regional Partners Meeting, Chongqing. 2-4 November 2007	
India	South Asian Cochrane Network and Centre report, Cochrane Collaboration Centre Director's Meeting, Auckland, 23-24 March 2010	
	Annual Report of the Prof. BV Moses and ICMR Advanced Centre for Research and Training in Evidence Informed Healthcare (South Asian Cochrane Centre) Indian Council of Medical Research, New Delhi, 12 July 2009	
Nigeria	M Meremikwu et al: Situational Analysis of Malaria Control in Cross River State Nigeria. September 2007: Submitted to the Office of the Special Adviser to the Governor on Roll Bac Malaria	
	Anne Asuquo et al: Reducing Tuberculosis Burden by Improving care-seeking Attitudes of Communities in Akwa Ibom State Nigeria; Presented to the Ministry of Health Akwa Ibom State; and at the 107th Annual General Meeting of the American Society for Microbiology (ASM); Toronto Canada; 21-25 May 2007	
	Nigerian Branch of South African Cochrane Centre. Report of the Nigerian Cochrane Contributors Meeting. Abuja, 4-6 February 2008.	
	Nigerian Branch of South African Cochrane Centre. Report of the Nigerian Cochrane Consumers Meeting. Abuja, 6 February 2008.	

South Africa	Bambas Nolen L, Volmink J. Shaping the health information supply. Improving media coverage of health issues in sub-Saharan Africa. Prepared for Center for the Advancement of Health, Washington DC. October 2006.
UK	EHCRC Annual Report – Year 1 (15/5/06) EHCRC Annual Report - Year 2 (3/5/07)
	EHCRC Annual Report - Year 3 (15/5/08)
	EHCRC Annual Report - Year 4 (15/5/09)

xiii) Dissemination events (include key people who attended the meeting/workshop)

Country	Meeting/Workshop	Facilitators	Target audience
Brazil	EBH and systematic review (Distance learning training offered by Brazilian Cochrane Center)	Alvaro Atallah	Cochrane authors, researchers
	Meeting on EBH and STD (Brazilian Congress of STD)	Mauro Cunha Ramos	Health professionals, reserchers
	Workshop on EBH/Cochrane Collaboration (Scientific Writing Course/CEARGS-UCSF)	Mauro Cunha Ramos	Health professionals, reserchers
China	EHCRC China (Chongqing) RPC Programme Partner Collaborators Network first meeting. Chongqing, 13- 14 September 2006	Paul Garner; Helen Smith; Mary Ann Lansang; China network partners	China network partners (Beijing University; China CDC; Chinese Cochrane Centre; Chongqing Medical University; Fudan University; Yunnan Infectious Diseases hospital)
	Training Seminar on Systematic Review/ Meta-Analysis Methodology. Peking, 25-29 September 2006	Jianping Liu (China Network Partner); Edwin Chan; Heather McIntosh	China network partners
	Evidence-informed decisions for pro- poor health policy in ChinaMethods and options for assembling the evidence. Peking, 10-18 January 2007	Paul Garner; Helen Smith; Shenglan Tang (from WHO); Gao Jun (from MOH, China)	Officials from WHO and MOH, China; Professors, researchers and master students on EBM and policy from different universities in China
	EHCRC RPC Asia Regional Partners Meeting, Chongqing, 2-4 November 2007	Garner P, Smith H, Lansang MA, Tharyan P, China network Partners	China network Partners

China	Evidence-informed decisions for pro- poor health policy in China – Methods and options for assembling the evidence, Peking, 17-18 April 2007	Tang S (from WHO), Jun G (from Ministry of Health, China), Li Y (from Peking University), Baorong Y (from Shandong University), Qin L (China Network)	Officials from WHO and Ministry of Health, China; Professors, researchers and master students on EBM and policy from different universities in China
	Training Workshop on Systematic Reviews in Health Policy, Peking, 14-16 December 2007	Tang S (from WHO), Jun G (from Ministry of Health, China), Li Y (from Peking University), Baorong Y (from Shandong University), Qin L (China Network)	Officials from WHO and Ministry of Health, China; Professors, researchers and master students on EBM and policy from different universities in China
	Planning workshop on joint dissemination of evidence-based health policy and evidence-based public health research in China, Peking, 1 March 2008	Tang S (from WHO), Jun G (from Ministry of Health, China), Qingyue M (from Shandong University), Youping L, Li W (from Chinese Cochrane Center), Liang D (from Chinese Journal of EBM), Yang W, Qin L (China Network)	Policy makers
	A special session on dissemination and communication during the 5 th Asia- Pacific EBM Lanzhou conference, 23- 26 May 2009	Garner P, Tang SL, Meng QY, Gao Jun, China network Partners	Researchers, policy makers
	A one-day dissemination workshop on evidence based decision making	MOH, China. China network Partners	Researchers, policy makers
India	Evidence Based Psychiatry: implications for clinical practice. [Plenary session presentation] International Conference on Psychiatry sponsored by the South Asian Forum, The World Psychiatry Association, The Royal College of Psychiatrists and the Sri Lankan College of Psychiatrists, Colombo, 25-27 July 2005	Tharyan P	Policy makers, clinicians, conference delegates
	Can systematic reviews help improve clinical practice? Evidence Bases Medicine: Introductory workshop at Shillong, November 2005	Tharyan P	Clinicians (government doctors and GPs)

India	Are Cochrane reviews asking the right questions? Seek but you may not find. [Plenary session presentation]. XIII Cochrane Colloquium, Melbourne, Australia, 22-26 October 2005	Tharyan P	Cochrane Collaboration contributors and those interested in research synthesis
	The South Asian Cochrane Network: Supporting reviewers in South Asia and contributing to the global Cochrane agenda. XIII Cochrane Colloquium, Melbourne, Australia, 22-26 October 2005	Tharyan P	Cochrane Collaboration contributors and those interested in research synthesis
	Protocol development workshop for Cochrane Reviews. Held at CMC, Vellore, June 2005	South Asian Cochrane Network	Review authors
	Workshop on developing a protocol for a Cochrane Systematic Review at the Faculty of Medicine, Colombo, 28-29 July 2005	South Asian Cochrane Network	Review authors
	Training of trainers workshop at Mumbai, September 2005	South Asian Cochrane Network	Members of the Steering Group of the SACN; editors, review authors
	How to identify and access appropriate materials useful in teaching others how to start and complete a systematic review. Workshop on Training the trainers at the XIII Cochrane Colloquium, Melbourne, Australia, 22- 26 October 2005	South Asian Cochrane Network	Those interested in teaching systematic reviews
	Workshop on developing a protocol for a Cochrane Systematic Review: University of Perediniya, Sri Lanka, November 2005	South Asian Cochrane Network	Faculty of the University of Perediniya
	Evidence Based Medicine: workshop on using evidence based resources for clinical practice, held at the Post Graduate Institute, Colombo, Sri Lanka, November 2005	South Asian Cochrane Network	Post Graduate students from all over Sri Lanka
	Cochrane Systematic Review Completion workshop; held at the CMC, Vellore, November 2006	South Asian Cochrane Network	Review authors with registered protocols
	Evidence Based Resources for assessing the effects of interventions in health care; workshop on Mental health: the new frontier? Held at the World Council of Churches General Assembly, Porto Alegre, February 2006	South Asian Cochrane Network	Members of church related organizations involved in health care

India	Protocol development and review completion workshops held at Chennai, March 2006	South Asian Cochrane Network	Review authors
	Using Evidence to Inform healthcare and health policy. (Paul Garner and Prathap Tharyan). New Delhi, 10 October 2006	Scientists and policy makers of the Indian Council of Medical Education	Policy Makers, guideline developers, researchers
	Tharyan P. Evidence based psychiatry in the new millennium. National Symposium on Recent Trends in Health Science Research held at Vellore Institute of Technology (Deemed University), 18 August 2006	Scientists postgraduate and postdoctoral students in biotechnology	General public
	Roqué M, Pardo J, Young T, Urrútia G, McDonald S, Garner P, Tharyan P, Lumbiganon P. Face-To-Face Training For Developing Countries: Do They Come Or Should We Go? Poster presented at the Cochrane Colloquium, Dublin, Ireland, 23 October 2006	Cochrane workshop trainers	Cochrane Collaboration Colloquium Attendees
	The global relevance of the Cochrane Collaboration. Presented at the Cochrane Colloquium, Dublin, Ireland, 23 October 2006	Tharyan P.	Potential Cochrane Collaboration contributors, media
	Using the results of systematic reviews to guide evidence based health care and policy. Paper presented at the annual sessions of the Sri Lankan Medical Association, Colombo, Sri Lanka, 18 November 2006	Tharyan P.	Members of the Sri Lanka Medical Association
	When are placebo controlled trials justified? Paper presented at the NIH- Fogarty national symposium on Research Ethics at NIMHANS Bangalore, 11 December 2006	Tharyan P.	Clinicians, postgraduate students, research ethicists
	Evidence based Ethics. Paper presented at the Fogarty/NIH/ICMR/GCP workshop on 'Contemporary Issues in research ethics and good clinical practice' held at CMC Vellore, 19-21 February 2007	Tharyan P	Research ethicists, clinicians
	Should Trials Registers have a vision? Advisory group meeting of the Indian Clinical Trials Register held at New Delhi, 4 December 2006	Tharyan P	Indian Trials Register Advisory Group, WHO SEARO representatives

India	Tharyan P. Critical Issues in Randomized Controlled Trials. Research Methodology Workshop at the Betty Cowan Research and Innovation Centre, CMC Ludhiana, 13- 14 May 2008	Tharyan P, Faculty and students of the medical college in Punjab	Medical researchers
	Tharyan P. Systematic Reviews and Evidence Based health Care. Research Methodology Workshop at the Betty Cowan Research and Innovation Centre, CMC Ludhiana, 13-14 May 2008	Tharyan P, Faculty and students of the medical college in Punjab	Medical researchers
	Tharyan P. Ethical Issues in Clinical Research. Research Methodology Workshop at the Betty Cowan Research and Innovation Centre, CMC Ludhiana, 13-14 May 2008	Tharyan P, Faculty and students of the medical college in Punjab	Medical researchers
	Tharyan P. 'Wider access to the evidence from systematic reviews- learning from the Indian Experience.' Paper presented at the Annual National Conference of Consumers United for Evidence-based Healthcare (CUE), at the Dupont Circle area campus of the Johns Hopkins University School of Advanced International Studies (SAIS), Washington, D.C., USA, July 23 2008	Tharyan P, Kay Dickersin, US Cochrane centre staff, Consumers in the US	Consumers
	Tharyan P. 'Evidence-informed Health Policy and Care - indispensible for everyone.' Paper presented at the National Health Policy Forum's session "Introduction to the Cochrane Collaboration and Fundamentals of Evidence-based Health", the first of a series of sessions for Congressional staff on "Everything You Always Wanted to Know about Comparative Effectiveness but Were Afraid to Ask"; Reserve Officers Association of the United States, Washington DC, USA, 25 July 2008	Tharyan P, Kay Dickersin, Roger Sol, Lorne Becker	US Congressional Staffers

India	Tharyan P. Controlled Clinical Trials- Randomized and non-randomized. Presented at the Workshop on EBM for clinicians held at Assam Medical College, Dibrugarh, Assam on 5 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Systematic Reviews, Meta- analysis and Evidence-Informed health Care. Presented at the Workshop on EBM for clinicians held at Assam Medical College, Dibrugarh, Assam on 5 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Ethical Issues in Clinical Research. Presented at the Workshop on EBM for clinicians held at Assam Medical College, Dibrugarh, Assam on 6 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Controlled Clinical Trials- Randomized and non-randomized. Presented at the Workshop on "Translational Research: from bench to bedside- a systematic approach", held at Guwahati Medical College, Guwahati, Assam on 8 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Systematic Reviews, Meta- analysis and Evidence-Informed health Care. Presented at the Workshop on "Translational Research: from bench to bedside- a systematic approach", held at Guwahati Medical College, Guwahati, Assam on 8 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Ethical Issues in Clinical Research. Presented at the Workshop on "Translational Research: from bench to bedside- a systematic approach", held at Guwahati Medical College, Guwahati, Assam on 8 August 2008	Tharyan P, Kalita S	Medical Faculty and students
	Tharyan P. Ethical issues in terminal illness. Paper presented at 'Ethics Bites' at the Texas Health Centre at San Antonio, Texas, 22 September 2008	Tharyan P	Medical faculty and students

India	Tharyan P. Evidence Based health Care and Public Health Informatics. Paper presented at the WHO Public Health Informatics Workshop, Gurgaon, New Delhi, 4 November 2008	Tharyan P	WHO, ICMR, INCLEN, Policy makers
	Tharyan P. Interpreting the results and conclusions of clinical trial data and policy implications. Paper presented at the ICMR- Paediatric Haematology Conference (PHOCON), New Delhi, 7 November 2008	Tharyan P, ICMR	Paediatric Oncologists
	Tharyan P. Critical Issues in the Design, Conduct, Reporting and Interpretation of Randomized Controlled Trials. Paper presented at the Research methodology Workshop at KEM Hospital Mumbai, 19 November 2008	Tharyan P	Medical Faculty and students
	Tharyan P. Introduction to Evidence Based Health Care. Paper presented at the Research Methodology Workshop, Tata Memorial Hospital, Mumbai, 18 November 2008	Tharyan P	Medical Faculty and students
	Tharyan P. Evidence Based Medicine and Evidence Based Health Care. Paper presented at the Introduction to EBM Workshop, Manipal University, 5 December 2008	Tharyan P, Kalita S, George A	Medical Faculty and students
	Tharyan P. Systematic Reviews & Meta-analysis. Paper presented at the Introduction to EBM Workshop, Manipal University, 5 December 2008	Tharyan P, Kalita S, George A	Medical Faculty and students
	Tharyan P. The Cochrane Collaboration and the South Asian Cochrane Network. Paper presented at the Introduction to EBM Workshop, Manipal University, 5 December 2008	Tharyan P, Kalita S, George A	Medical Faculty and students
	Tharyan P, Barnabas JP, Yamuna G, Sangeetha P, Monalisa J, George A, Kalita S, Venkatesh P, Kalita S. The Cochrane Collaboration and Evidence Informed Healthcare in South Asia. Paper presented at Meditel, 2008 at SRM University, Chennai, 10 December 2008	Tharyan P	Information specialists

India	Tharyan P. The role of systematic reviews and meta-analysis in Evidence- Based Dentistry. Paper presented at the Workshop on Evidence Based Dentistry conducted by the Indian Association of Public Health Dentistry, Government Dental College & Research Institute, Bangalore, 16 January 2009	Tharyan P, Kalita S, George A	Oral Health specialists
	Tharyan P. Systematic Reviews and Meta-analysis in Health Care. Paper presented at the Workshop for Medical Writers at iLabs Centre, Hyderabad, 9 March 2009	Tharyan P	Medical writers
	3 rd South Asian Regional symposium on Evidence Informed healthcare, 11-14 January 2010	Prathap Tharyan, Dave Sinclair, Bridget Jones; Billy Stewart, Aneesh George, Richard Kirubakaran	Policy Makers, researchers, students, clinicians
Nigeria	Martin Meremikwu, Christy Okoromah, Bose Afolabi, Bright Orji. Seminar on Evidence Based Health Care for Health Care Institution Librarians. Nigerian Institute for Medical Research Yaba Lagos, second quarter 2005	Martin Meremikwu, Christy Okoromah, Bose Afolabi, Bright Orji	Librarians and Researchers in Health care institutions
	Martin Meremikwu. Role of Evidence based medicine in control HIV/AIDS. National Conference of Association of Resident Doctors, July 2005	Martin Meremikwu	Trainee doctors, medical students and specialists for teaching and specialist hospitals in Nigeria
	Martin Meremikwu, Bright Orji. Evidence-based health promotion, Faculty of Public Health, University of Ibadan, 26 August 2005	Martin Meremikwu, Bright Orji.	Students and staff in the faculty
	Martin Meremikwu. Strategic plan for malaria control in Nigeria: 2001-2005: A desk review, Abuja, 7 November 2005.	Martin Meremikwu	Policy makers (Minister and commissioners), Programme officers, development partners
	Martin Meremikwu. Artemisinin-based combination therapy - current management of malaria (Key Note Public Presentation) – Lagos Sheraton, 7 February 2006	Martin Meremikwu	Policy makers, health providers, consumers, Media (local and international)
	Ekong Udoh, Emmanuel Effah, Chukwuemeka Nwachukwu, Angela Oyo-Ita. A Cochrane Protocol Workshop; Calabar 15 February, 2006	Ekong Udoh, Emmanuel Effah, Chukwuemeka Nwachukwu, Angela Oyo- Ita	14 persons (Doctors, social scientist, Lab scientist)

Nigeria	Martin Meremikwu. Effort to promote evidence-based medicine in Nigeria. MRC Cape Town, 17 March 2006	Martin Meremikwu	Advisory Board, South African Cochrane Centre
	Martin Meremikwu. Applied Evidence- Based Health Practice in Nigeria at the Leadership and Human Resource Development in Health Workshop organized by Cross River State Ministry of Health	Martin Meremikwu	Senior Health workers and heads of department in the State Ministry of Health
	Cochrane Protocol Development Workshop Institute of Tropical Diseases Research and Prevention, Calabar, April 2006	Martin Meremikwu, Friday Odey, Ekong Udoh	Doctors, Nurses, Lab Scientists, Social Scientists
	Research-in-Progress Workshop. Institute of Tropical Diseases Research and Prevention, Calabar, May 2006	Martin Meremikwu, Ekong Udoh	Doctors, nurses, social scientists
	Research-in-Progress Workshop. Institute of Tropical Diseases Research and Prevention, Calabar, July 2006	Martin Meremikwu, Angela Oyo-Ita	Doctors, nurses, social scientists
	Research-in-Progress Workshop. Institute of Tropical Diseases Research and Prevention, Calabar, September 2006	Regina Nwadiaro, Ekong Udoh	Doctors, nurses, social scientists, lab scientists
	Cochrane Protocol Development / RevMan Workshop. Institute of Tropical Diseases Research and Prevention, Calabar, October 2006	Ekong Udoh, Regina Nwadiaro	Doctors, nurses, social scientists
	Evidence-Based Medicine Workshop for Medical students. Conference Room, Old Medical School, College of Medical Sciences, University of Calabar, Calabar, Nigeria, April 2006	Martin Meremikwu, Angela Oyo-Ita	Doctors, nurses, social scientists
	Evidence-based Primary Health Care. National Association of Community Health Practitioners, Annual Conference, Calabar, Nigeria, May 2006.	Martin Meremikwu, Angela Oyo-Ita	Primary health care practitioners, policy makers
	Evidence-Based Health Care Workshop. Imo State University Teaching Hospital, Orlu, Imo State, Nigeria, August 2006	Angela Oyo-Ita, Emmanuel Effa	Doctors, nurses, lab scientists, pharmacists

Nigeria	Evidence-Based Medicine Paper Presentation. 32 nd Medic Africa International Medical Exhibition and Conference at Ladi Kwali Conference Centre, Sheraton, Abuja, Nigeria, December 2006	Angela Oyo-Ita	Policy makers and doctors,
	Evidence-Based Medicine Workshop. National Eye Centre, Kaduna, Kaduna State, Nigeria, February 2007	Mansur Rabiu, Oluseyi Oniyangi, Emeka Nwachukwu, MB Alhassan	Policy makers, doctors, researchers, nurses, Lab Scientists
	Evidence-Based Medicine Symposium. University of Uyo Teaching Hospital, Uyo, Akwa Ibom State, Nigeria, February 2007	Paul Garner, Jimmy Volmink, Martin Meremikwu	Policy makers, doctors, researchers, nurse, lab scientists
	Evidence-Based Medicine workshop for Clinical Students of College of Medical Sciences, University of Calabar, Nigeria, February 2007	Jimmy Volmink, Martin Meremikwu, Angela Oyo- Ita	Students, doctors
	Paper presentation on "The Febrile Child: A Diagnostic Challenge by Martin Meremikwu at Nigeria Medical Association Continuing Medical Education series in Calabar, Nigeria, March 2007	Martin Meremikwu, Phillip Ephraim	Doctors, Policy makers, researchers
	Nigerian Branch South African Cochrane Centre: A Cochrane Protocol Development Workshop, Calabar.,15 May 2007	Oyo-Ita A, Nwachukwu E, Ekong U (resources persons)	Health care professionals and researchers involved in systematic review
	Nigerian Branch South African Cochrane Centre: EBM and Cochrane awareness workshop, Abuja, 11-12 June 2007	Nwachukwu E. Rabiu Mansur, Oniyangi O. (resource persons)	Medical consultants, laboratory scientists, National Hospital, Abuja and other Consultants and Heads of departments
	Nigerian Branch SACC EBM and Cochrane awareness workshop, Abuja, 23 July 2007, Aba	Nwachukwu E. Ekong U, Odey F. (resource persons); Medical director and head of training of Abia State University Teaching Hospital, (ABSUTH) Aba	Medical consultants across all specialties, laboratory, nursing and records staff Resident doctors across all specialties in ABSUTH, Private practitioners

Nigeria	Oyo-Ita, A: How to read: Critical appraisal of scholarly work in research Centre for Clinical Governance, Ministry of Health, Cross River State, Calabar, 10-11 May 2007 Nwachukwu, Emeka: Introduction to HINARI: Centre for Clinical Governance, Ministry of Health, Cross River State, Calabar, 10-11 May 2007		Researchers and healthcare practitioners, PHC managers, health policy makers, trainee nurses, community health practitioners, etc
	Oyo-Ita A. E: EBM, Evidence on Malaria Control in Nigeria. Awka, Anambra State, 28-30 August 2007		Community health physicians from across the country
	Meremikwu, M.M; Causes of Malaria and the new Treatment regime in Nigeria. Workshop organized by the Men's Fellowship of the Church of God Mission International. Calabar, Cross River State, 5 August 2007		Lay public and consumer groups (about 300 people in attendance)
	Meremikwu, M.M: Practicing Medicine that is Evidenced based. Annual biennial conference of the Medical and Dental Consultants Association of Nigeria (MDCAN). Abuja, Nigeria, 7 September 2007,	Chairman Medical and Dental Council of Nigeria, Directors/ top officials of Federal Ministry of Health	Medical consultants from all parts of the country more than 50 people in attendance)
	Meremikwu, M.M: Why was the malaria policy changed – a review of the research evidence. Rotary Club Calabar, 6 August 2007	Rotarians and guests	Consumers, policy makers, health care providers
	Nigeria RPC Partner: Students Lecture in Evidence Based Nursing. Department of Nursing,Sciences University of Calabar, 12 September 2007	Prof Martin Meremikwu (lecturer), Prof Mildred John, HOD of Nursing University of Calabar, Nurse Tutors/lecturers	Final year students in nursing
	Nigerian Branch SACC: EBM Workshop on Evidence-based Medicine and the Introduction to Systematic Reviews and the Cochrane Library. At the Federal Psychiatric hospital, Calabar, 7 December 2007	Meremikwu MM, Oyo-Ita A E and Odey F (resource persons); Head, Training; consultants in the hospital	Medical consultants, resident doctors in training and other medical personnel
	Meremikwu M: ACTs and Malaria treatment: Cross River State Ministry of Health and Community Health Workers Registration Board. 16-18 April 2008 on the theme: Community Health Practitioners and the MDGs	Junior/Community Health Extension Workers	Junior/Community Health Extension workers

Nigeria	Meremikwu M, Odey F: Evidence- based health reporting for media professionals in conjunction with Jpiego. Uyo, Akwa-Ibom State, 22-23 April 2008	Prof Emmanuel Otolorin and Media professional from 12 private and public media outfits	Media professionals
	Afolabi L, Meremikwu M, Oyo-Ita A: Evidence-based Medical practice. West African College of Physicians in conjunction with Royal College of Paediatrics and Child Health.Abuja, Nigeria, 8-11 November 2008	Dr Tony Akobeng, Medical practitioners.	Medical professionals
	Meremikwu M: Searching for evidence- based health information using the Cochrane Library, Association of Health Librarians of Nigeria, John Harris Library, University of Benin, 12-13 November 2008	Junior/Community Health Extension Workers	Junior/Community Health Extension workers
	Nwachukwu E: Evidence-based medicine help desk at Hypertension Society of Nigeria Conference, Calabar, 4-7 June 2008	Prof Emmanuel Otolorin and Media professional from 12 private and public media outfits.	Media professionals
	Meremikwu M: Malaria in Sickle Cell in Seminar on Bone Marrow transplantation in Thalassaemia and Sickle Cell; National Hospital in collaboration with Mediterranean Institute of Haematology (International Centre for transplantation in Thalassaemia and sickle cell anaemia), 19-23 June 2008	Dr Tony Akobeng, Medical practitioners. National Executive Members of Association of Health Librarians Executive committee of Hypertension society of Nigeria	Medical professionals Health Librarians Medical practitioners
	Meremikwu M, Oyo-Ita A, Effa E: Developing a search strategy for Cochrane review; Assessment of quality of studies and criteria for selecting studies for inclusion in Cochrane review: Protocol Development/RevMan workshop, Calabar, Nigeria, 20-22 November 2008	Prof Guido Lucarelli, Director of International Centre for transplantation in Thalassaemia and sickle cell anaemia, Dr Marco Andreani and Dr Pietro Sodani	(Haematologists, Paediatricians, Obstetricians, Physicians, General Practitioners etc), Medical Laboratory Scientists, Nurses, Genetic Counsellors, Embryologists, administrators and all stakeholders in the care and management of patients with sickle cell disease.
	Meremikwu M, Aja G: Evidence-based medicine and The Cochrane Library for Post Graduate Medical Students, Adventist hospital, Ogun State, Nigeria, 17-18 January 2009	Faculty staff and Heads of Departments	Post graduate medical students

Nigeria	Adebayo S, Meremikwu M; Ezedinachi, E: Research Methods and Statistics for Health in conjunction with the Institute of Tropical Diseases Research and Prevention, Calabar, 15-21 March 2009	Chief Medical Director, UCTH, Medical practitioners Researchers and academics	Health researchers and academics
	West African Health Organization Training of Trainers workshop for heads of department of Obstetrics and Gynaecology in West African College of Surgeons accredited institutions in West Africa	Heads of department of O&G in West Africa Meremikwu, MM, Odusote, K	Heads of Obstetrics and Gynecology in WACS accredited Institutions
	Protocol development and RevMan5 workshop for new Cochrane reviewers. Calabar, Nigeria, 14-15 May 2009	Meremikwu, MM, Oyo-Ita A, Effa EE, Nigerian Cochrane reviewers	Nigerian Cochrane Reviewers
	Reviews for Africa Programme (RAP) Nigeria for training in systematic reviewing. 19-31 October 2009	Meremikwu, MM;, Effa EE, Oniyangi O, Nwachukwu C, Nigerian Cochrane Reviewers with registered Titles	Nigerian Cochrane reviewers with registered Cochrane titles
	Workshop on critical appraisal and reading of papers for senior researchers in biomedical field. Calabar, Nigeria, 25-26 May 2009	Clinicians, heads of department, researchers	Clinicians, heads of department, researchers
	Consumer workshop for dissemination of Cochrane Reviews in Malaria, HIV/AIDS and Tuberculosis to NGOs, CBOs and consumer groups. First round of workshops at four locations in the country (Ibadan, Abuja, Abakiliki and Calabar). Second round of workshops ongoing. With Cochrane Opportunities Workshops run in collaboration with Cochrane Consumer Network and South African Cochrane Centre with funds provided by the Cochrane Opportunities Fund grant allocated to the Nigerian Branch SACC. Grant : held in 2009	Aja G, Oyo-Ita O, Chioma Oringanje, Felix Eke, Moriam Chibuzo. Consumer groups	Consumer Groups
Philippines	Workshop on systematic reviews and meta-analyses. Manila, Philippines, 19 April 2006 Lecture on "Systematic reviews in infectious diseases – finding the policy window". Manila, Philippines, 20 April 2006	Garner P	Medical residents, fellows and consultants from UP-PGH and reps from PNHRS
	Workshop on systematic reviews and meta-analyses. Manila, Philippines, 28 March 2007	Alejandria, M	Residents and fellows from the Dept of Med, UP-PGH

Philippines	PRA Workshop on Clinical Practice Guideline Development, Manila, Philippines, 16 March 2007	Dans, LF	Rheumatologists
	Poster presentation on "Knowledge management for improved health and development. University of the Philippines College of Medicine, A project partner of the Effective Health Care Research Programme Consortium". Knowledge Management for Development Forum (KM4Dev 2007) ADB Philippines, 8-9 February 2007	Lansang MA, Alejandria M.	KM practitioners from 18 countries in Asia, Europe, USA
	Elective course on systematic reviews (Course title: Synthesis of Research), University of the Philippines Manila	Alejandria M, Mantaring JB	4 MSc Epidemiology students at the University. of the Philippines Manila enrolled
	Workshop on systematic reviews and meta-analyses, Manila, Philippines, April 2007	Alejandria M	Residents and fellows from the Dept. of Pediatrics, The Medical City, Philippines
	Alejandria M, Amarillo L, Lansang MA. The accessibility and utilization of mobile phones among TB patients: a feasibility study for Short Messaging Service (SMS) as a strategy to improve adherence to TB services. 14 th Annual Philippine Coalition Against Tuberculosis (PhilCAT) Convention, Manila, Philippines, 16-17 August 2007 (Poster presentation)		Members of the Philippine Coalition against Tuberculosis, funding agencies, local researchers
	Asia-Pacific Center EBM Trainer's Training Workshop on How to Teach and Practice EBM. Faculty and Lecturer. Eugenio Lopez, Antipolo, 14- 17 June 2007 <u>and</u> National University of Singapore, 25-28	Dans L	Asia-Pacific: Health professionals and pharmaceutical cos. (June 2007); Doctors & nurses (Feb. 2008)
	February 2008 Oxford EBM workshop. Centre for Evidence-based Medicine, Oxford, UK, 10-14 September 2007	Dans L	By invitation—interested practitioners globally
	Teaching the EBM trainers' facilitating skills, Fort Canning, Singapore., 11-12 January 2008	Dans L	Faculty of medicine, National University of Singapore

Philippines	Workshop on systematic reviews and meta-analyses, Manila, Philippines, 26 March 2008	Alejandria M, Mantaring JB	Residents and fellows from the Dept of Medicine, University of the Philippines; General Hospital
	"Globalizing the application of evidence- based practices". 16 th Cochrane Colloquium, Freiburg, Germany., 3-7 October 2008	Dans L	Cochrane Colloquium participants
	Presentation of results and experience in conducting the systematic review on "Reminder systems and late patient tracers in the diagnosis and management of tuberculosis" in the 2008 Workshop on Developing Systematic Reviews and Workshop, Philippine General Hospital, Manila, Philippines	Qin L	Residents, fellows, consultants of the Dept of Medicine and Pediatrics, Philippine General Hospital
	What is Evidence-Based Medicine? Talk on introduction to EBM delivered at the Chongqing University, 13 November 2009	Mantaring J	Chongqing University medical students
	Effective Health Care Research Consortium Planning Meeting in Chongqing University, China., 9-14 November 2009	Alejandria M, Mantaring, Jacinto, Liu Qin, Wang Yang	RPC China Faculty (Chongqing University)
Russia	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for specialist in internal medicine and paediatrics). Kazan, Russia, 5 September–2 October 2006	Kazan team	5 physicians and 19 residents
	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for specialist in infectious diseases). Kazan, Russia, 5 September–2 October 2006	Kazan team	24 physicians and 8 residents
	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for health managers and drug procurement specialists). Kazan, Russia, 30 October–11 November 2006	Kazan team	11 managers, 6 pharmacists

Russia	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for surgeons and obstetricians). Kazan, Russia, 13 November-9 December 2006	Kazan team	26 residents in surgery and obstetrics, 3 physicians
	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for out-patient physicians and family physicians). Kazan, Russia, 27 November-23 December 2006	Kazan team	36 physicians
	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for clinical pharmacologists and specialist care providers). Kazan, Russia, 10 January– 6 February 2007	Kazan team	12 physicians and 26 residents
	Teaching course: "Clinical pharmacology" (576 academic hours, 4 months, primary specialization course for clinical pharmacologists). Kazan, Russia, 08 February–06 April 2007	Kazan team	20 physicians
	Teaching course: "Basics of clinical pharmacology and rational use of medicines" (tailored for health managers and drug procurement specialists). Kazan, Russia, 9-21 April 2007	Kazan team	10 managers and 2 pharmacists
	Teaching courses organized by the Kazan State medical Academy. 9 courses	All Team – Kazan Partners	Physicians, residents, pharmacists, and health managers; 178 participants in total
South Africa	MacLehose H, Young T, Garner P, Volmink J, Siegfried N, Oliver J, Kennedy G. Reviews for Africa Programme (RAP): training in the science of research synthesis. 14th International Cochrane Colloquium, Dublin, Ireland. 23-26 October 2006 (Oral Presentation)	SACC	Cochrane Collaborators
	Lewin S, Munro S, Smith H, Engel M, Fretheim A, Volmink J. Conducting a meta-ethnography of qualitative tuberculosis treatment adherence studies: a reflection on the process. 14th Cochrane Colloquium. Dublin, Ireland, 23-26 October 2006. (Oral Presentation)		

	Roqué M, Pardo J, Young T, Urrútia G, McDonald S, Garner P, Tharyan P, Lumbiganon P. Face-to-face training for developing countries: do they come or should we go? 14th International Cochrane Colloquium, Dublin, Ireland. 23-26 October 2006 (Poster)		
South Africa	Lewin S, Munro S, Smith H, Engel M, Fretheim A, Volmink J. Conducting a meta-ethnography of qualitative tuberculosis treatment adherence studies: a reflection on the process. British Sociological Association Medical Sociology Group. Heriot-Watt University, Edinburgh, Scotland, 14-16 September 2006. (Oral Presentation)	SACC	
	Pienaar E. Satellite Symposium: Evidence-based ophthalmology: Principles & practice. Finding, appraising and applying evidence. Ophthalmologic Society of East Africa: 34th Annual Scientific Conference, Kenya Nairobi, Kenya. 24-25 August 2006 (Workshop Facilitator)	SACC	Ophthalmologists
	Volmink J. Translating knowledge to action – how far have we come? 5th Joanna Briggs Colloquium: Waves of knowledge, Durban, South Africa. 6-8 August 2006 (Invited Speaker)	SACC	Nurses in South Africa
	Volmink J. Evidence-based health care: the state of play in sub-Saharan Africa. 5th Joanna Briggs Colloquium: Waves of knowledge, Durban, South Africa. 6-8 August 2006 (Workshop Facilitator)		
	Pienaar E. What is Evidence-based practice and why do we need it? 7th Annual Congress of the International Federation of Infection Control, Spier, Stellenbosch. 3-5 July 2006 (Workshop Facilitator)	SACC	Infection control specialists
	Munro S, Lewin S, Smith H, Engel M, Fretheim A, Volmink J. Abstract quality: a "spoke in the wheel" of meta- syntheses of qualitative studies. Cochrane Qualitative Methods Group Regional Symposium, Adelaide, Australia. 10-11 July 2006 (Oral Presentation)	SACC	Cochrane Collaborators; qualitative researchers

South Africa	Munro S, Lewin S, Smith H, Engel M, Fretheim A, Volmink J. Interpreting interpretations: accounting for primary authors' views in qualitative meta- syntheses. Cochrane Qualitative Methods Group Regional Symposium, Adelaide, Australia. 10-11 July 2006 (Oral Presentation)	SACC	Cochrane Collaborators; qualitative researchers
	Volmink J. The international trials registry for AIDS, tuberculosis and malaria. EDCTP Investigators Meeting, Medical Research Council, Cape Town. 22-23 July 2006 (Oral Presentation)	SACC	Trialists
	Munro S, Lewin S, Smith H, Engel M, Fretheim A, Volmink J. Stakeholder perceptions of factors influencing tuberculosis medication adherence: a meta-ethnography. International Institute for Qualitative Methodology: 7th international interdisciplinary conference, advances in qualitative methods, Surfers Paradise, Australia. 13-16 July 2006 (Oral Presentation)	SACC	Qualitative researchers
	Munro S, Lewin S, Smith H, Engel M, Fretheim A, Volmink J. Conducting a meta-ethnography of qualitative tuberculosis treatment adherence studies: a reflection on the process. International Institute for Qualitative Methodology: 7th international interdisciplinary conference, advances in qualitative methods, Surfers Paradise, Australia. 13-16 July 2006 (Poster)		
	Volmink J. Tracking and using HIV/AIDS evidence base. HIV/AIDS National Strategies: the evidence base Global Forum on Health and Development at the Ministerial Summit of the Afro-Caribbean Pacific Forum, Port Moresby, Papua New Guinea. 1 June 2006 (Oral Presentation)	SACC	Policy makers
	Volmink J. The MDG for HIV/AIDS, malaria and other diseases: can rhetoric become reality? XV Cochrane Colloquium, São Paulo, Brazil October. 23–27 October 2007 (Plenary speaker)	SACC	Cochrane Collaborators

South Africa	Volmink J. Masterclass: How to apply evidence in real life. Symposium: Beyond the evidence - Cochrane's reflection on EBM, Amsterdam, The Netherlands. 18 April 2007 (Oral presentation)	SACC	Cochrane Collaborators
	Volmink J. Translating knowledge to action: overcoming the challenges. Rhodes Scholar Southern Africa Forum, Mandela-Rhodes Foundation, Cape Town. 11 April 2007 (Oral presentation)	SACC	South Africa policy makers
	Young T. Systematic reviews. International Consortium for Trials of Chemotherapeutic Agents in Tuberculosis (INTERTB) Meeting, Durban. 5-7 March 2007 (Oral presentation)	SACC	TB specialists
	Volmink J. Getting the evidence into practice - overcoming the challenges. Lecture given to students on the Fogarty Programme, University of Cape Town. Cape Town. 9 February 2007	SACC	Students
	Volmink J. How to ask answerable questions and find the best evidence. Lecture given to students on the Fogarty Programme, University of Cape Town. Cape Town. 5 February 2007		
	Young T, Wiysonge C, Araoyinbo I. Using research evidence to inform healthcare policy and practice. A one- day workshop with policy-makers from the Western Cape Department of Health. Cape Town, South Africa. 19 October 2007	SACC	South Africa policy makers
	Wiysonge C. Research Synthesis: principles and procedures. Course given to MPH students at the College of Medicine, University of Malawi. Malawi. 10-12 October 2007	SACC	Students
	Young T. Stakeholders workshop on translating health research into policy and practice at the Institute of Tropical and Infectious Diseases, University of Nairobi. Nairobi, Kenya. 11-12 October 2007	SACC	Policy makers

South Africa	Volmink J. HIV/AIDS and Nutrition - verdicts in search of evidence. 2nd South Asian Regional Symposium on Evidence Informed Health Care, Vellore, India. 9 April 2008	SACC	Conference participants
	Volmink J. Nutrition and TB: from molecular considerations to population health interventions. 39th Union World Conference on Lung Health of the International Union Against Tuberculosis and Lung Disease (The Union), Paris, France. 16-20 October 2008	SACC	Conference participants
	Wiysonge C. Beyond systematic reviews: translating reliable research evidence into policy and management decisions on women's and child's health in sub-Saharan Africa. 6th Canadian Cochrane Symposium, Toronto, Canada. 6-7 March 2008	SACC	Conference participants
	Zani B, Young T, Goldring D, Maharaj R and Mabaso M. The suitability of amodiaquine for combination with artesunate for the treatment of uncomplicated malaria: a systematic review. Keystone Symposia on Infectious and Drug Resistant organisms, Bangkok, Thailand. 22-27 October 2008	SACC	Conference participants
	Young T. The SUPPORT Collaboration: SUPporting POlicy relevant Reviews and Trials. Nigerian Cochrane Contributors' Meeting, Abuja, Nigeria. 4- 6 February 2008	SACC	Nigerian Cochrane contributors
	Young T. Introduction to The Cochrane Collaboration, SACC, and Nigerian Branch of the SACC. Nigerian Cochrane Contributors' Meeting, Abuja, Nigeria. 4-6 February 2008	SACC	Nigerian Cochrane contributors
	Young T. Functions and role of the South African Cochrane Centre (SACC) and the relationship with the Nigeria Branch of the SACC. Nigerian Cochrane Contributors' Meeting, Abuja, Nigeria. 4-6 February 2008	SACC	Nigerian Cochrane contributors

South Africa	Grobler L, Araoyinbo I. ATM Registry. Nigerian Cochrane Contributors' Meeting, Abuja, Nigeria. 4-6 February 2008	SACC	Nigerian Cochrane contributors
	Volmink J. What role does The Cochrane Collaboration play? Pharmaceutical Care Management Association (PCMA) Seminar, Johannesburg. 12 March 2008	SACC	Conference participants
	Volmink J. Nutrition, HIV and TB. Nutrition Congress 2008, Pretoria. 30 September 2008	SACC	Conference participants
	Volmink J. Effects of micronutrients on HIV/AIDS: Cochrane Review. Nutrition and HIV/AIDS Symposium 2008, MRC, Cape Town. 4 September 2008	SACC	Conference participants
	Wiysonge CS, Rosenbaum S, Glenton C, Oxman A, Young T on behalf of the SUPPORT Collaboration. Involving policymakers in summarising research evidence for a policymaker audience: what have we learned? 4th Public Health Association of South Africa (PHASA), Cape Town. 2-4 June 2008	SACC	Conference participants
	Young T, Wiysonge C on behalf of the SUPPORT Collaboration. Supporting policy-relevant reviews and trials on maternal and child health in low- and middle income countries. 4th Public Health Association of South Africa (PHASA), Cape Town. 2-4 June 2008	SACC	Conference participants
	Communicating reliable health research information to the public. Nigerian Cochrane Contributors' meeting. Abuja, Nigeria, 6 February 2008	Aja G, Young T, Lesi A	Cochrane collaboration
	Getting the evidence right: practicing evidence-based public health. 4th Public Health Association of South Africa (PHASA), Cape Town., -4 June 2008	Young T, Siegfried N, Wiysonge C	Cochrane collaboration
	Train the trainers of evidence-based healthcare workshops. 17th International Cochrane Colloquium, Singapore.,11-14 October 2009	Scherer R, Young T	Cochrane collaboration

South Africa	Cochrane review authors speak up: what Cochrane entities can do to	Okwundu C, Oliver J	Cochrane collaboration
	support authors from developing countries. 17th International Cochrane Colloquium, Singapore, 11-14 October 2009		
	Understanding Cochrane Systematic Reviews. International Conference on Occupational Health 2009, Cape Town, South Africa, 22-27 March 2009	Verbeek J, Young T	Cochrane collaboration
	How to conduct a Cochrane Systematic Review. International Conference on Occupational Health 2009, Cape Town, South Africa, 22-27 March 2009	Verbeek J, Young T	Cochrane collaboration
South Africa & UK	The HIV/AIDS, TB and Malaria (ATM) Clinical Trials Registry. Science with Africa conference, Addis Ababa, Ethiopia, March 2008	Grobler L, Siegfried N, Lutje V, Pienaar E, Oliver J	Researchers
	Trends in randomized controlled trials of malaria treatment and prophylaxis in Africa. Oral presentation at the Cochrane Colloquium 2008 - Freiburg	V Lutje, L Grober, P Garner, N Siegfried	Cochrane collaboration
UK	Consortium Safety Panel on IPTi (Intermittent presumptive treatment for malaria in infants). Review and meta- analysis of safety data from RCTs of SP versus placebo in sub-Saharan Africa to inform IPTi Executive Steering group.	Alistair Breckenbridge, Andrea Egan, Peter Winstanley, Alex Dodoo	Researchers
	Fourth MIM Pan African Malaria Conference (Multi-lateral initiatives against Malaria), Yaounde, Cameroon, 13-18 November 2005	Lutje V, Jones	Malaria researchers and policy-makers
	Editorial strategy for revising Cochrane reviews: does it help? [Poster abstract] XIII Cochrane Colloquium, Melbourne, Australia, 22-26 October 2005	Lutje V, MacLehose H, Garner P	Cochrane contributors
	Survey of the use of Cochrane Style Guide guidance in published Cochrane reviews. [Poster presentation] XIII Cochrane Colloquium, Melbourne, Australia, 22-26 October 2005	MacLehose HM, Mellor L, Remmington T	Cochrane contributors
	Reducing duplication: an example of collaboration between Guideline developers and Cochrane Collaborative Review Groups [Poster presentation] XIII Cochrane Colloquium, Melbourne, Australia, 22-26 October 2005	Parnham J, Coren E, MacLehose H	Cochrane contributors

UK	Computer assisted qualitative data analysis [Seminar]. January 2006	Smith H	School of Public Health Fudan University and School of Public Health, Chongqing University of Medical Sciences, China
	Reducing errors in reviews by improving editorial procedures. 15th Cochrane Colloquium, São Paulo, Brazil. 23–27 October 2007 (Workshop)	MacLehose H, Henderson S, Farquhar C, Willis N.	The Cochrane Collaboration
	Rotavirus vaccines: a comparison of Brazilian healthcare policy and evidence from a Cochrane Review. 15th Cochrane Colloquium, São Paulo, Brazil. 23–27 October 2007 (Oral presentation)	Soares-Weiser K, Goldberg E, MacLehose H.	The Cochrane Collaboration; rotavirus vaccine specialists
	Trends in randomized controlled trials of malaria treatment and prophylaxis in Africa. 16 th Cochrane Colloquium, Freiburg, Germany. 3-7 October 2008 (Oral presentation)	Lutje V, Grober L, Garner P, Siegfried N.	The Cochrane Collaboration
	Understanding and utilising systematic reviews [workshop]. International Confederation of Midwives 28 th triennial congress, Glasgow, UK	Smith H, Lavender T	Cochrane collaboration

xiv) Dissemination related items

Country	Press releases
China	Eleven <i>Evidence Update</i> summaries (from the Child Health, Mental Health, Other Infectious Diseases, Respiratory Tract Infections and Tuberculosis series) translated into Chinese by partners in the Chongqing Network; available at: http://www.chinaehcrpc.cn
	39 <i>Evidence Update summaries</i> (from the Maternal Health, Child Health, HIV, Health Sector Development, Trauma and Malaria series) translated into Chinese by project partners in Shanghai; available at: http://www.shmu.edu.cn/effect/index.html
	Translated 21 <i>Evidence Update</i> summaries into Chinese and disseminated through the China network website
	Translated 10 <i>Evidence Update</i> summaries into Chinese and disseminated through the China network website
China	Translated 10 <i>Evidence Update</i> ' summaries into Chinese and disseminated through the China network website

India	Should all pregnant women be given anti-malarial drugs? <i>Evidence Update</i> August 2003; disseminated in: Current Medical Issues: Continuing Medical Education Journal 2006; 8(2): 22
	Should people with malaria being treated with quinine receive a high first dose? <i>Evidence Update</i> February 2005: disseminated in: Current Medical Issues: Continuing Medical Education Journal 2006; 8(2): 23
	Is reduced osmolality oral rehydration solution better than standard solution for children with diarrhoea and dehydration? <i>Evidence Update</i> August 2005: disseminated in: Current Medical Issues: Continuing Medical Education Journal 2006; 8(2): 30
	In caesarian section, do antibiotics reduce complications caused by infections? <i>Evidence Update</i> January 2005: disseminated in: Current Medical Issues: Continuing Medical Education Journal 2006; 8(2): 31.
	Dissemination of 44 summaries of Cochrane Reviews (<i>Evidence Update</i>) through the CME journal "Contemporary Issues in Medicine" of the Christian Medical College, Vellore to around 400 general practioners in the country; each with a commentary by a clinician in CMC.
Nigeria	<i>Evidence Update</i> sent to medical practitioners through their various commissioners of health. February/March 2006 (Cross River, Abia, Anambra, Imo, Rivers, Akwa Ibom, Bayelsa, Ebonyi, Delta, Edo, Oyo, Ekiti, Ondo, and Kogi States of Nigeria)
	Igbo language IEC materials on ITN and AIDS respectively (in collaboration with Federation of Igbo Medical Students) Igbo-speaking Nigerian of all ages – especially youths
	The Cochrane Collaboration. IEC material introducing The Collaboration and the Nigeria Branch
Nigeria	i. ACT FAST, the sure way to treat Malaria
	ii. Mosquito Nets, Best prevention Method for Malaria
Russia	43 Evidence Updates translated into the Russian language; available at:
	http://www.evidence-update.ru/
	Leaflets on quality use of medicines (300 medicines) included in the brochures "Kodex zdorovya I dolgoletya" [Code of health and longevity] developed under the MOH of the Russian Federation for the Priority National Project on Health.
	Translated 47 <i>Evidence Update'</i> summaries into Russian and published on the web site <u>www.evidence-update.ru</u>
	E-Lek postings: approximately 800 subscribers, 172 postings
South Africa	Oliver J. Researching HIV/AIDS: Want the best available evidence on HIV/AIDS? Look no further. National AIDS Council of South Africa (NACOSA) Newsletter. August 2009
	Young T, Pienaar E. Reviews for Africa Programme: What 5 years of RAPping did for Africa! Cochrane News 2009 Issue 46
	Young T. Contacting authors for missing data – what do reviewers report? The Cochrane Collaboration Methods Group Newsletter Volume 13 June 2009
	Muller M. Male circumcision for prevention of heterosexual acquisition of HIV in men. Published in the South African Centre for Epidemiological Modelling and Analysis (SACEMA) Quarterly. Issue 2, June 2009

UK &	Evidence Update
Consortium	Produced by the Effective Health Care Research Consortium:
	All Evidence Update's are available from: http://www.liv.ac.uk/evidence/evidence.htm
	Child Health Series
	Should vitamin A be given routinely to children with pneumonia unrelated to measles? <i>Evidence Update</i> May 2006.
	Do bathing, sponging, and fanning help manage fever in children? <i>Evidence Update</i> November 2007
	In communities where intestinal worms are common, does giving children deworming drugs regularly improve their growth and school performance? <i>Evidence Update</i> May 2008 †
	Does the provision of school meals or snacks to children improve their nutritional status and educational achievement? <i>Evidence Update</i> August 2008 †
	In children developing mild or moderate pneumonia at home, is three days of antibiotics enough? <i>Evidence Update</i> December 2009 †
	Diarrhoea Series
	Are probiotics effective for treating infectious diarrhoea? Evidence Update February 2007
	In areas where diarrhoeal disease is common, do interventions that aim to improve the quality of drinking water prevent diarrhoea? <i>Evidence Update</i> January 2007 †
	Do interventions to promote hand washing prevent diarrhoea? <i>Evidence Update</i> September 2009 †
	Filariasis
	Does community distribution of diethylcarbamazine (DEC)-mediated salt reduce lymphatic filariasis infection in endemic areas? <i>Evidence Update</i> November 2007 †
	Health Sector Development Series
	Do lay health workers improve health care delivery and healthcare outcomes? <i>Evidence Update</i> March 2006 †
	Do specialist outreach clinics improve health care? Evidence Update December 2005
	Respiratory Tract Infection Series. Should acellular vaccines replace whole cell vaccines to prevent whooping cough in children? <i>Evidence Update</i> January 2006
	Do community animal health services with paraveterinary workers improve the wealth and health of households in low-income farming communities? <i>Evidence Update</i> April 2006
	What is the best way to improve health worker prescribing of antibiotics? <i>Evidence Update</i> July 2007 †
	Is patient care improved by integrating different types of primary care service in low- and middle- income countries? <i>Evidence Update</i> March 2007
	HIV/AIDS Series
	Should HIV-infected adults with chronic unsuppressed viraemia have a treatment break before starting a new HIV regimen? <i>Evidence Updates</i> March 2007
	Should people with HIV infection, pneumocystis pneumonia, and hypoxaemia receive corticosteroids? <i>Evidence Updates</i> March 2007
	Malaria Series
	Is chlorproguanil-dapsone effective and safe for treating uncomplicated falciparum malaria? <i>Evidence Update</i> December 2005 †
	Is intrarectal quinine as effective as intravenous quinine for people with malaria? <i>Evidence Update</i> April 2005

	rugs are most effective for treating uncomplicated falciparum malaria during pregnancy? a <i>Update</i> March 2006 †
	e unit-dose packaging of antimalarial drugs reduce treatment failures in people with icated malaria? <i>Evidence Update</i> April 2006
•	phylaxis or intermittent treatment with antimalarial drugs benefit young children living in the malaria? <i>Evidence Update</i> May 2006 †
Should p	regnant women living in malarial areas use insecticide-treated nets? <i>Evidence Update</i> 2006 †
Do pre-e 2008	rythrocyte vaccines prevent malaria illness and infection? <i>Evidence Update</i> February
	nes targeting the blood stage of the malaria parasite prevent malaria illness and ? <i>Evidence Update</i> February 2008
	maquine prevent relapses in people with Plasmodium vivax malaria? <i>Evidence Update</i>
•	Il pregnant women be given antimalarial drugs? Evidence Update January 2008
	nate better than quinine for treating severe malaria? Evidence Update August 2008 †
	oung children living in malarial areas be given iron every day? Evidence Update March
Materna	I Health Series
	ctive is magnesium sulphate compared to diazepam for women with eclampsia? <i>Update</i> November 2005 †
Do pregr <i>Update</i> J	nant women and their babies benefit from multiple micronutrient supplements? <i>Evidence</i> luly 2007
Should a	Il pregnant women be given antimalarial drugs? Evidence Update January 2008
	ditional support for breastfeeding help women to continue breastfeeding? <i>Evidence</i> August 2008
	has given to women during the first stage of labour benefit women and their babies? <i>Update</i> August 2008
	abies, is it best to clamp the umbilical cord immediately at delivery or wait? <i>Evidence</i> //arch 2009 †
Which at	odominal incision is best to use in Caesarean section? Evidence Update February 2009
What dru 2009 †	ig should be used to treat primary postpartum haemorrhage? Evidence Update April
Mental H	lealth Series
Can folat	te be used to treat depression? Evidence Update March 2006
	nological treatments delivered by paraprofessionals improve symptoms in people with or depressive disorders? <i>Evidence Update</i> February 2006
	ef psychological debriefing help manage psychological distress after trauma and post traumatic stress disorder? <i>Evidence Update</i> January 2006
• •	itol be used to treat depression? <i>Evidence Update</i> April 2006
Which dr May 200	ug should be used for treating mild to moderate chronic depression? <i>Evidence Update</i> 6
Do psych	nological treatments reduce symptoms of post-traumatic stress disorder? <i>Evidence</i> August 2008
Non-Cor	nmunicable Diseases Series

Do beta-blockers prevent heart disease and strokes in people with high blood pressure? *Evidence Update* February 2008. †

Other Infectious Diseases Series
Should diazepam be given to people with tetanus? Evidence Update June 2005 †
Do corticosteroids improve survival in people with dengue shock syndrome? <i>Evidence Update</i> March 2007
Is it better to use oral or intravenous rehydration in children with dehydration due to gastroenteritis? <i>Evidence Update</i> December 2006 †
What is the best way to treat trachoma trichiasis? Evidence Update July 2007 †
Is azithromycin better than current first line treatments for typhoid and paratyphoid fever? <i>Evidence Update</i> January 2010 †
Sickle Cell Disease Series
Do drugs that aim to reduce the dehydration of red blood cells prevent crises in people with sickle cell disease? <i>Evidence Update</i> March 2008 †
Trauma Series
Are tissue adhesives better than sutures for closing traumatic lacerations? <i>Evidence Update</i> November 2006
How effective is tap water for wound cleansing? Evidence Update November 2006
Tuberculosis Series
Does watching patients take their TB drugs improve treatment cure and completion? <i>Evidence Update</i> June 2006 †
Should every patient with uncomplicated TB of the spine have surgery? <i>Evidence Update</i> February 2007
Are corticosteroid drugs effective in people with tuberculous meningitis? <i>Evidence Update</i> August 2008 †
Do corticosteroids prevent death and improve respiratory function in people with tuberculous pleurisy? <i>Evidence Update</i> February 2009
Should people on TB treatment be given nutritional supplements? <i>Evidence Update</i> March 2009 †
<i>† Evidence Update's</i> published in Africa Health 2005-10.

ANNEX 6: DEVELOPING CAPACITY

Our conceptual framework for capacity development is in figure 2 and 3. Figure 2 (Annex 4) is part of our communication framework and how we aim to increase influence and change. Figure 3 is about how the Effective Health Care Research Consortium uses flexible funding for projects and reviews, in combination with the Cochrane process, and other aspects of our capacity strengthening, to further help institutions build an ability to carry out independent research.

Achievements

1. Individual

Liu Qin, partner manager in China, has passed her final interview for outstanding PhD students applying for staff positions in the University-and has gained a permanent post.

Martin Meremikwu was the Kenneth Warren prize for his Cochrane Review from a developing country judged to be of the highest methodological quality and potential to influence policy.

Hasifa Bukirwa, one year special research fellow, made Editor within Cochrane Infectious Diseases Group; and recently awarded a Gates PhD fellowship.

Juan Pena-Rosas, former mentorship participant, now at WHO Geneva leading an initiative to develop an Evidence-Based Nutrition Library.

Mary Ann Lansang, partner manager in the Philippines, is now heading the Health Advisory Unit in the Global Fund (GF), which consists mainly of senior advisors in HIV/AIDS, TB, malaria, health systems strengthening, gender, sexual minorities plus a senior specialist on knowledge translation. This group provide support and advice to the GF Secretariat on relevant technical and scientific issues using best evidence and practice, so, knowledge sharing and translation is core.

Harriet MacLehose, appointed deputy co-ordinating editor, Cochrane Infectious Diseases Group. Now has moved to a new post as senior editor in the Cochrane Editor in Chief's Office.

2. Group

NIGERIA

Strategic group to establish Nigerian Cochrane Centre: The Nigeria Consortium has identified the establishment of a full-fledged Nigerian Cochrane Centre as a strategic step towards establishing and sustaining evidence-based healthcare decision-making processes in the country by providing an institutional structure equipped to support and training Nigeria reviewers, health providers and consumers. The Nigerian Cochrane Strategic Working Group was established in February 2008 to facilitate the process of achieving this objective. The group plenary sessions met in Calabar (31 July to 2 August 2008), and again in March Lagos (at the Nigerian Institute of Medical Research Yaba).

Grants: Martin has obtained grants to run an EDCTP Trial in malaria treatments, and a grant to establish a demographic surveillance programme in two states (3 million Canadian Dollars).

SOUTH AFRICA

Statistician appointed: joint post with MRC Statistics Unit, 50% funded by the RPC to help with authors. Working with Liverpool part-time statistician, who is mentoring in refereeing.

CIDG author appointed: a young author with Cochrane Infectious Diseases Group on the artemisinin malaria review has just been appointed to the SACC as a researcher.

Wellcome Trust grant on financial incentives to improve TB adherence: A trial of financial incentives for improving adherence to TB treatment funded jointly by the National Department of Health of South Africa and the Dutch KNCV is being conducted in Durban. This study now in the pilot phase of implementation forms the major part of the PhD thesis of Elizabeth Lutge who is a recipient of a Wellcome Trust research development grant. She is also carrying out a review with Cochrane Infectious Diseases Group.

CHINA

MOH commission reviews: One review on 'Public-private partnerships in the provision of health care services' was completed and the report was submitted to the Ministry of Health, China. It is one of the key issues related to health care reform. We drew international experience in this area and provide evidence for policy making.

One review on 'Risk assessment of infectious diseases in large dam areas' was completed and submitted to the national Centers for Diseases Control and Prevention (CDC) in order to help clarify priorities for national policy and research.

One review on 'Pro-poor initiatives in TB control programmes in China' was completed and the report was submitted to the WHO. It reviewed and assessed equity-related national and international studies and pro-poor initiatives/activities in accessing to and utilization of TB care services in China, especially for social vulnerable group, in order to make recommendations to improve TB control in China.

One review on 'Interventions on preventing and improving mental health in forced migrants' is developing for providing evidence base for policy making in three gorges migrants.