INTRODUCTION

The Evidence for HIV Prevention in Southern Africa (EHPSA) programme (2014-2018) is a catalytic intervention contributing to national, regional and global processes on HIV prevention through generating evidence of what works and why, and developing strategies to inform policy making processes. The programme specifically targets HIV prevention efforts for some of the most vulnerable populations – adolescents, prisoners and men who have sex with men, across selected countries in eastern and southern Africa.

EHPSA is in essence a programme that deals with Evidence into Action (EiA). It has been designed to achieve this goal by working on evidence supply and demand simultaneously by:

- Generating new evidence & filling knowledge gaps through the Regional Research and Innovation Fund; and
- Stimulating engagement between stakeholders to increase demand for evidence and to encourage debate.

EHPSA delivers on its EiA targets through various modalities, underpinned by early, continuous and responsible engagement between policy makers and academics along the research continuum. EHPSA leverages the evidence-making process by systematically ensuring ongoing policy and stakeholder engagement during the research continuum. Each research study that EHPSA funds reports regularly on policy influence and stakeholder engagement activities. EHPSA also organises technical fora, regional symposia and fellowships, and implements an active knowledge management strategy.

The importance of building the capacity of policy makers to become better equipped in evidence-informed policy making is widely regarded as central to EiA. This idea has gained momentum in the region, resulting in an increasing number of initiatives encouraging evidence use in policy-making processes. However the effectiveness of each of these approaches is unclear.

1. EHPSA is funded by UKAID and Sweden in partnership with the World Bank and managed by Mott MacDonald.
In the early phase of EHPSA, the programme piloted a specific approach to capacity building: the EHPSA Fellowship Scheme. This case study reflects on the experiences of the implementing the scheme, with a focus on one fellowship in Swaziland during 2016.

**ABOUT THE EHPSA FELLOWSHIP SCHEME**

Fellowships between academia and policy makers were intended to promote learning between a host organisation and a visiting organisation (ie individual academics). The purpose of the programme was to initiate and sustain a formalised system of policy buddies, linking academia to health policy makers. EHPSA’s approach aimed to foster long-term relationships that could be drawn on for future needs. To ensure sustainability, the EHPSA Fellowship Scheme was built around core elements of reciprocity and cost sharing. Academic institutions would cover salaries and policy makers would provide office and communication costs, with top-up funds from EHPSA for travel and other logistical costs.

The underlying theory of change of the EHPSA Fellowship Scheme was that joint work on existing routine datasets (on HIV prevention) would strengthen the relationships between academics and policy makers and improve the policy makers’ capacity to access and apply good quality evidence more effectively when formulating policy. The expected outcome would be better quality HIV prevention policies, ultimately benefitting people in the region.

EHPSA’s efforts with implementing the fellowship scheme were geared at testing a novel mechanism to build evidence uptake capacity among key policy makers, through an adaptation of the traditional technical assistance model. If successful, the intention was to institutionalise this modality as one of EHPSA’s key EiA activities.

**GETTING THE FELLOWSHIP SCHEME UP AND RUNNING**

From early 2015 EHPSA invested in raising awareness on the Fellowship Scheme by visiting countries within the region and targeting key stakeholders to gauge feasibility and explore terms and conditions for the possible fellowship exchanges.

During this “road show” phase EHPSA met with representatives from various ministries of health, national AIDS councils, central statistical offices and development partners. The visits resulted in a broad scope of work for the focus of several fellowships, which were then transformed into country-specific terms of reference.

Scoping visits, calls and meetings also took place with relevant academic institutions to assess the appetite for participation in the Fellowship Scheme.

Simultaneously, EHPSA built up its database of suitable academics through the creation of a talent pool, based on academic profiles. In order to increase the supply of suitable academics, EHPSA also placed a call for expressions of interest in the Mail & Guardian in June 2015. Unfortunately, this call yielded very minimal and rather disappointing results. Nevertheless, the database was utilised to match the fellowship terms of reference with the most suitable academic(s).

After the road show EHPSA had a working list of six possible fellowships in Lesotho, Swaziland, Zambia, Malawi and Tanzania (see Annexure 1).

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3. EHPSA visited University of Cape Town, Stellenbosch University, University of the Western Cape, University of Kwazulu Natal (HEARD), and CAPRISA and had engagements with the University of the Witswatersrand and University of Johannesburg, the University of Windhoek and Wilfrid Laurier University.
THE GENESIS OF THE SWAZILAND FELLOWSHIP PILOT

The Swaziland fellowship was the first to come to fruition and has been documented as a pilot for the fellowship EiA modality. The pilot took place in Swaziland between academia and policy makers in an environment conducive for capacity building, and aimed to promote the uptake of HIV research.

The two scoping visits to the Swaziland’s National Emergency Response Council on HIV and AIDS (NERCHA) leveraged the fact that Swaziland was also host to one of EHPSA’s evidence-generating activities, implemented by the World Bank. The World Bank impact assessment analysed the population-wide benefits of conditional cash transfers to adolescent girls for HIV prevention. In the light of this impact assessment, the NERCHA team expressed an interest in supplementing the impact assessment with a strategic piece of research on the economic cost of school dropout. NERCHA was actively building a policy influence case with the anticipated findings around a positive impact of cash transfers linked to school attendance, triangulated with an economic argument around school dropout.

Upon finalisation of the terms of reference, EHPSA circulated a call for expressions of interest amongst academics with profiles in the database and received a response, from Professor Alan Whiteside of Balsillie School of International Affairs & Wilfrid Laurier University. Professor Whiteside, an economist, has a long-standing supportive relationship with Swaziland, and with NERCHA in particular. The focus of the study in Swaziland and the cost analysis fitted well with his profile, reputation, experience and expertise. The second scoping visit to Swaziland was a joint visit by EHPSA and Professor Whiteside, and served as an opportunity to engage and finalise the scope of the study and negotiate the principles and modalities of the fellowship and the cost-sharing elements. The topic was determined by NERCHA in consultation with various ministries in Swaziland and was considered a policy priority and problem area with clear interest from policy makers in shaping the approach to tackle school dropout.

The fellow was recruited to work in Swaziland with NERCHA for a maximum of 45 days. The scope of the fellowship was to:

Conduct an assessment to investigate the economic costs of school dropouts for adolescents between the ages of 10-19 years in Swaziland and develop a protocol for the study. This included sharing skills for conducting stakeholder meetings, a cost analysis of the economic effects of dropouts, analysis of the critical causes of school dropouts as well as the economic costs and the implications of school dropout for the HIV rate amongst the adolescents;

Build capacity for the uptake of HIV evidence into policy and practice through the collaboration with Cabinet, Members of Parliament, the Deputy Prime Minister’s office, Ministry of Health, Ministry of Education, Ministry of Economic Planning and the Ministry of Tinkhundla (District) Administration and Development; and

To guide NERCHA in preparation for a proposed meeting in Swaziland ahead of the 21st International AIDS Conference in Durban (AIDS2016), and ensure the best papers are published in a special issue of the African Journal of AIDS Research in 2017.

4. and to date the only fellowship to be commissioned
5. Also Professor Emeritus, University of KwaZulu-Natal.
6. Negotiations concluded a three-way agreement: travel and accommodation supported by EPHSA, a small honorarium paid by NERCHA, Professor Whiteside significantly lowered his fee rate and supported the international travel component from Canada to South Africa.
RESULTS OF THE SWAZILAND FELLOWSHIP

The fellowship in Swaziland produced three significant results.

The study was based on an extensive review of the literature from Swaziland complemented by routinely collected data from the Education Management Information System. The findings were unexpected: Swaziland is doing well in education when measured by the standard of the absolute numbers in school, increasing coverage, progression rates and support to those most vulnerable in the system. These findings posed challenges on the use of the evidence to shape the policy agenda. It appeared that the evidence was expected to support prevailing opinions and views around the existence of school dropout as a societal problem. The fact that the study indicates that this is not true has caused some friction between different policy actors around the acceptance of the results. The outcomes of the study have been received and considered by NERCHA, in part due to the relationship of trust established with the fellow. However, to date, the same study outcomes remain a topic of contention and discussion between NERCHA and other line Ministries.

National HIV and AIDS Conference: “From AIDS Crisis to Opportunities: What the world can learn from Swaziland” 12 -14 July 2016. The conference was a direct spin-off from the EHPSA Fellowship and highlights the fact that flexibility and the ability to respond to opportunities are key features in the design of the fellowship. The objective of the conference was to build networking and dissemination opportunities for Government, community, and leading Swazi and international researchers. The conference had significant political involvement from parliament, traditional leaders and senior government officials. Over 70 abstracts were submitted and 30 oral presentations made. The vast majority of the participants and presenters were Swazi and it was clear that the meeting was ‘owned’ by the government and NERCHA. The team also produced and distributed a ‘road map’ of all Swazi related papers, posters and events to be presented at the subsequent international conference, AIDS2016.

Publication of a Special Issue of the African Journal of AIDS Research (AJAR). A second spin off from the EHPSA Fellowship is the publication of a special issue on Swaziland and the AIDS response. The process is supported by EHPSA and includes the development of guidelines for writing, as well as a comprehensive mentorship programme to support the authors and ensure the papers are of sufficient standard before they are sent for peer review. Once papers are submitted they will follow the normal review process for an academic publication. The issue will be co-produced between policy makers and researchers, with guest editors supplied by NERCHA and the Swaziland AIDS Research Network (SARN). The AJAR special issue will be published in 2017 and will be open source.

CONCLUSION AND WIDER APPLICATION

The Swaziland Fellowship

The EHPSA fellowship in Swaziland was largely successful in achieving the desired outcomes. The fellow successfully parted with expertise and learning to NERCHA and the fellowship has sustained a buddy system, linking academia to policy makers and creating an atmosphere in which all parties can contact each other for evidence-related support; quicker and easier in the future. However, it is important to note that in this case the ingredients for the buddy system pre-existed the EHPSA programme and have been present for many decades. EHPSA built on these existing structures, relationships and opportunities. EHPSA’s flexibility to respond to spin-offs, including the conference and the AJAR special issue, has contributed to further cementing...
the positive outcomes. Furthermore, the calibre of fellow matched to a policymaker of equal calibre, detailed attention to localised contextual matters, and joint work being completed in Swaziland have been elements that contributed to success. The ultimate impact, measured in evidence-into-action, can only be determined in the next 5-10 years, taking relevant policy cycle dynamics and timelines into consideration.

Lessons learned

During the road show phase of the programme EHPSA was confronted with several challenges in the conceptual design of the fellowship scheme, which hampered its implementation. Academics raised concerns and emphasised that capacity building is an organic task, which requires sufficient time investment and is already the responsibility of many universities in the region. Thus ad-hoc opportunities with little linkage to sustainable long-term capacity building efforts are not promoted or supported by academics and the capacity building potential of short-term fellowships, as conceived by EHPSA, were not considered optimal. In addition, senior academic staff are often fully occupied in teaching and on long term funded projects. Therefore EHPSA’s assumption that unallocated academic time could be utilised for the fellowship was fundamentally flawed.

On the other hand, most policymakers perceived the fellowship to be a service more similar to short-term technical assistance, and not a capacity building initiative for EiA skills. Moreover, the required time investment from the senior policymakers was unrealistic and EHPSA found better leverage at the mid-management level. Finally, the cost-sharing principle envisaged by the scheme was unworkable in most countries due to severe budget constraints.

The confluence of these challenges led to a situation where, with the exception of Swaziland, none of the fellowships identified on the road show have yet come to fruition.

The learning generated from the Swaziland pilot also indicates other flaws in the fellowship model as it was originally conceived. The key ingredient for the success of the Swaziland fellowship, viz. the pre-existing relationship of trust between the fellow and the policy makers, would be difficult to replicate. The fellowship could almost be characterised as an alignment of the stars in the right place and at the right time.

The learning from both the road show experience and the Swaziland fellowship is relevant to EHPSA’s wider approach to EiA, and this case study concludes that fellowships should not be the main vehicle to deliver on the EiA objectives of the EHPSA programme. EHPSA’s other modalities to stimulate EiA would seem to be more effective, provide better value for money and should be prioritised. If opportunities for additional fellowships arise, EHPSA can respond and build the evidence base on the impact of this modality further. However, the transaction costs and level of effort required to implement the EHPSA Fellowship Scheme are not aligned to the returned results. That said, the momentum created by the Swazi fellowship at national level in terms of engagement and debate around evidence, has highlighted a critical element of localisation and ownership. It shows that EHPSA has an opportunity to create more momentum and traction for EiA at national and local level, linked to specific policy and programme windows of opportunities.
### ANNEXURE 1: POTENTIAL EHPSA FELLOWSHIPS AS AT JULY 2016

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<thead>
<tr>
<th>Country</th>
<th>Process</th>
<th>Fellowship Focus</th>
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<tbody>
<tr>
<td>Lesotho</td>
<td>Three visits to the Ministry of Health and development Partners in 2014 and 2015, development of the terms of reference by the EHPSA team. In 2016, during face-to-face interaction at the EHPSA technical forum on HIV &amp; prisons, an opportunity arose with Lesotho Prisons Services. This opportunity has been follow-up with two teleconferences and email exchanges and the EHPSA team has developed the Terms of Reference.</td>
<td>Using routine data to develop an evidence brief on HIV prevention and adolescents. Secondary analysis and triangulation of all routine monitoring and data sources for scientific information that can inform HIV programming for Lesotho Correctional Services.</td>
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<td>Malawi</td>
<td>One visit in 2015 to Ministry of Health, National AIDS Council and various academic partners and development partners. Terms of reference have been developed by the EHPSA team and shared with key counterparts in Malawi.</td>
<td>Trend analysis of routine HIV data from 620+ sites and the development of a policy brief on HIV prevention, for which the NAC already advertised twice without finding a successful candidate.</td>
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<td>Swaziland</td>
<td>Two visits to NERCHA and development partners in 2015 and two teleconferences. Terms of Reference subsequently developed by the NERCHA team. The Study was aligned to the ongoing World Bank impact evaluation, and focused on the economic costs of school drop-out.</td>
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<tr>
<td>Tanzania</td>
<td>Three face-to-face meetings with key policy makers at EHPSA EIA events, which identified the scope of the fellowship. Term of reference developed by the EHPSA team and shared with counterparts in the Ministry of Health in Tanzania.</td>
<td>Using routine data collection on key populations, specifically men who have sex with men to develop an HIV prevention evidence brief.</td>
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<tr>
<td>Zambia</td>
<td>One visit in 2015 to the National AIDS Commission and to Zambia Prison Services to identify a list of opportunities. Two sets of terms of reference were developed by the EHPSA team and shared with key counterparts in Zambia.</td>
<td>Prison services: mapping HIV incidence in prisons through the analysis of routine monitoring data NAC: Triangulation of data with the new DHS to support more granular and localised data availability.</td>
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**More about EHPSA: [www.ehpsa.org](http://www.ehpsa.org)**