EXECUTIVE SUMMARY

**Seminar objectives:**
Following four successful years working together with multi-disciplinary teams from both West and East Africa, the 2008 IUHPE/CDC seminar on Cardiovascular Health Promotion and Chronic Disease Epidemiology in Africa brought together experienced international faculty and participants from three countries - Kenya, Uganda and Tanzania.

The course aimed to build capacity to address the increasing non-communicable disease (NCD) burden of heart disease, stroke, and diabetes, with a focus on prevention through population-based health promotion interventions and policies in sub-Saharan Africa. It also addressed risk factors for cardiovascular disease (CVD), such as physical inactivity, poor nutrition, and smoking.

The course objective was to provide the tools to enable participants to:

1. Understand the principles and practice of surveillance for NCD;
2. Understand the principles of health promotion for NCD control;
3. Acquire a comprehensive knowledge of the epidemiology of cardiovascular disease in Africa;
4. Understand how to build/work with a multi-disciplinary team to achieve health promotion goals;
5. Be able to formulate a plan for CVD risk factor control;
6. Be able to train other health professionals on lessons learnt.

The lectures were structured to embrace five major areas:

1. General principles and rationale of: (i) Health promotion and chronic disease prevention in Africa; ii) Basic public health and epidemiology; iii) Surveillance for CVD and risk factors in the African context; iv) Evaluation plans and designs; v) Project development (core principles and expectations);
2. Prevention of specific diseases and/or risk behaviors
3. Partnerships
4. Data collection and methods
5. Communication, advocacy, social marketing, etc.
Seminar structure:

Over the 10 days of the seminar duration, lectures around guest faculty areas of expertise were held in the mornings and afternoons were dedicated for teams to develop appropriate health promotion and disease prevention activities. Team projects development was guided by various members of the faculty who provided a unique expert perspective to inform the team project development and ensure synergistic team dynamics. The concluding sessions consisted in each country team presenting their project to members of the faculty and fellow teams. Strengths and weaknesses were discussed informing modifications and revision of their proposal.

A unique year for the Annual Seminar Series

This 5th Annual Seminar and first seminar to be held under the second IUHPE/CDC Cooperative Agreement provided a great platform for the integration of a module on physical activity and health promotion, symbol of a strong commitment to adopting a more holistic approach to Cardiovascular Health Promotion and Chronic Disease Prevention. Professor Vicky Lambert, an expert in the field of physical activity and health promotion working in South Africa was invited as an additional faculty member to lead a series of lectures on the barriers, determinants and guidelines for physical activity; planning and evaluation of physical activity interventions; and to provide her invaluable South African experience. Additionally, two team leaders from the Western Africa seminar series (Dr Jacob Plange-Rhule from Ghana and Professor Adesola Ogunniyi from Nigeria) were invited to share their experiences in the African region following the courses that were held. Participants felt this input to be extremely valuable. It is important to remember that one key objective of the initiative is for fellows and team leaders to be able to train others.

However, the 2008 seminar witnessed a weakness in the absence of Marsha Houston, faculty and expert in the fields of social marketing, advocacy, media and communications. Over the past four years, Marsha Houston provided a unique aspect to this programme, taking current state of the art approaches to communication and adapting them for usability in different parts of the world and particularly in sub-Saharan Africa and contributed to building local capacity in the region through multi-disciplinary teams training, follow-up and support following the seminar. The topics were presented by other members of the faculty.

Moreover, an IUHPE coordinated Advocacy Meeting to Build a Case for Healthy Public Policies on Non-Communicable Diseases (NCDs) in Africa Using a Health Promotion Approach was organised by the African Institute for Health and Development (AIHD) through a partnership with the Department of Health of England, as part of the IUHPE Global Programme on Health Promotion Effectiveness (GPHPE) and was held on July 30th through August 1st 2008. WHO was a major partner in this initiative (see Annex 2 – Summary Report). The IUHPE/CDC Cooperative Agreement has significantly supported activities related to the Global Programme on Health Promotion Effectiveness in the past. The aim of holding this meeting back to back with the Seminar was to ensure cross-fertilization through:
• an opening session for the Advocacy meeting held on July 30th, 2008 with all Seminar Participants and Advocacy Invitees, key players in the field of NCD prevention and control in Africa, followed by a social event enabling knowledge and experience exchange along with networking and relationship development;

• and the participation of the whole faculty and the four team leaders in the Advocacy meeting in order to share invaluable experiences in the various fields of expertise, develop knowledge around advocacy tools and become advocates for NCDs prevention in their respective country.

This cross-fertilization between the two events presented a great opportunity to not only bridge with the Cardiovascular Health Promotion seminar series in sub-Saharan Africa but also engage in an interactive meeting to attempt to move the field of advocacy for non-communicable disease control forward in the region.

Finally, under this new IUHPE/CDC Cooperative Agreement, a comprehensive evaluation of the first four annual seminars, conducted under the previous Cooperative Agreement, is being carried out. The evaluation will provide evidence around the seminars impact and outcomes to provide sustainability of this initiative as well as developing tools to integrate a systematic evaluation process for assessment of subsequent seminars.

**Seminar outcomes:**

The participants attending this seminar are hoped to have acquired the knowledge and skills to advocate for public health policies, promote healthy lifestyles, develop relevant health promotion programs and interventions, and create supportive environments to maximize risk reduction and enhance disease prevention and health development in their respective country.

Each year, pre-seminar and post-seminar surveys are completed by the participants anonymously to assess the groups general level of knowledge around issues on cardiovascular health and related topics taught throughout the course before and upon completion of the seminar. This year the average score of the group improved by 8.9% from 63% at the start to 71.9% at the end of the course. Although no statistical analysis has been conducted on this data, it appears that the course did improve immediate knowledge around cardiovascular health promotion principles, practices and workforce skills.

Additionally, the 5th Annual Seminar for Cardiovascular Health Promotion and Chronic Disease Epidemiology enabled the team leaders to provide an update on the progress of the 2007 team projects. Overall the progress of all team projects was delayed by logistical issues around opening institutional bank accounts, essential for wire transfer of the seed funds to conduct the project, and around signing an agreement with the African Institute for Health and Development, key contact point for the teams. Two of the four teams appeared to have made considerable progress, since the finalisation of the funds transfer and agreement. The other two teams were still dealing with these administrative steps.
Following up the progress of team works is sometimes a challenge for team leaders due to their commitment to other projects. This year two of the teams had a member acting as deputy team leader. It was deemed by faculty that deputy team leaders should become more systematic in order to enable better sustained progress of team projects and to facilitate follow-up and time investment to implement the projects efficiently.

The faculty also decided that it would hold a series of 3 to 4 conference calls throughout the year in order to best prepare for the 6th Annual Seminar, planned to take place in Uganda in 2009, so as to avoid duplicating information presented by the various faculty members, allow sufficient time for fellows to read through the provided reading materials and to allow more time for discussion and innovative thinking during the seminars.

**Seminar feedback:**

Since the completion of both the 5th Annual Seminar on Cardiovascular Health Promotion and Chronic Disease Epidemiology and the Advocacy Meeting to Build a Case for Healthy Public Policies on Non-Communicable Diseases (NCDs) in Africa Using a Health Promotion Approach, a number of communications sharing views, experience and feedback on these events were received. A few examples of the feedback are provided below:

‘I just wanted to thank you all for a most wonderful experience in Bagamoyo! I have appreciated the learnings which I have taken with me, from aspects of teaching evaluation, NCD’s, health promotion, study design, etc., to the coordination of an effective course and the building of teams, to issues of importance in the rest of Africa. I am overwhelmed by the paradoxes of Africa, and yet the capacity and potential that exist for change’ – Professor Vicky Lambert, South Africa, faculty.

‘It was a great week and my thanks to you for the superb organization and keeping us all motivated!! Thanks to all the faculty for their usual excellence and support and a special welcome to Vicky and her expertise. Look forward to the call in January’ – Elinor Wilson, Canada, faculty

‘I want to thank, CDC, IUHPE, AIHD, and all the Faculty members for the wonderful training we had. It was the best training I have ever gone for. I learnt a lot and my strength for work and health promotion is renewed. Thank you very much for the great opportunity. Thank you very much for helping me with my PhD project. In fact, I am looking forward to my PhD more than before the training’ – Alice Ndong, Nairobi Kenya team member.

‘Thanks for the wonderful organisation of the seminar. Personally, I gained a lot and am looking forward to implementing our project soon.’ – Monica Nakisige, Uganda team member.
‘The conference was planned well and I learnt a lot. As the team leader of the Eldoret Kenya Team, I would like to report that the hospital administration has accepted that we do our research at the hospital and now they require a letter from your organisation stating the kind of research and the fact that IUHPE and CDC are committed in supervising us through the proposal development up to data analysis.’ – Julia Songok, Eldoret Kenya Deputy Team Leader

‘It was wonderful meeting all of you. Thank you so much for bringing the Seminar on Cardiovascular Health Promotion and Chronic Disease Epidemiology to Africa. I really enjoyed and learnt a lot during the seminar. We have a task in this part of the continent to teach, educate and provide leadership in a number of areas including the risks of CVD. I felt retooled and repackaged for the task of providing leadership and information in my community. Thank you very much.’ – Vincent Ochieng Onywera, Nairobi Kenya team member.

‘I just want to say that the collaborative spirit and the excitement in Bagamoyo was tremendous. Thank you for making it so transparent, open, and effective.’ – Gauden Galea, WHO