

Table 1 details the priority setting processes of each sub-region

Hub Name/Region	Priority setting process	Lessons learned
Southern Eastern Hub	We are exploring priorities in Renal Disease for the East African region (Kenya, Tanzania, Burundi and Rwanda). We brainstormed topics with the CAN members, identifying relevant decision makers. We plan for engagement with professional society, to host workshops to define key priorities, conduct evidence mapping and identify systematic reviews topics	Time consuming and important to identify policy opportunity.
Francophone Hub	To promote evidence-based decision making in the health sector in Cameroon We used email and door-to-door priority setting with Ministry of Health staff and other stakeholders; systematic review workshops with researchers; supporting authors of Cochrane reviews; evidence-based-practice workshops with clinicians, journalists and civil society organisations; translation and dissemination of Cochrane review summaries, evidence assessments and the creation of evidence-based-medicine (EBM) task forces within selected hospitals in Cameroon.	The door-to door priority setting exercise was the most fruitful, with a three-fold response rate compared to email. Setting priorities with stakeholders enhances end-user participation. Collaborating with other centres is necessary to avoid duplication of translation efforts. Engaging a wide variety of stakeholders in the generation of evidence augments uptake and use.
West African	To identify priority systematic review topics that address common health problems in Nigeria, we used a combination of methods aimed at making the process systematic, transparent, involving end-users and other stakeholders in topic selection with the use of Delphi-like approach for topic ranking. The process involved identifying national priority health problems using key informants, searching the Cochrane library and PubMed, conducting a gap analysis of the outputs, nominating potential review topics and ranking the topics using pre-determined criteria.	Priority health problems were categorized into Child health, maternal health as well as communicable and non-communicable diseases. Highly ranked potential review topics related to malaria, diarrheal diseases as well as reproductive health and cross cutting issues involving informal health sector incorporation into the health system. Post dissemination feedback: Although the process was quite iterative and involved extensive stakeholder involvement, feedback suggested trauma, mental health and neglected tropical diseases which are emerging concerns were unfortunately not captured.