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"CDDEP integrates high-quality health science and economic information to advise policy. This is a vital bridge towards improving global health."

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"CDDEP is unique in its combination of knowledge and talents for all the fields—economics, biology, and public health—needed to deal with the rapidly developing and increasingly dangerous emergence of drug resistance. CDDEP and its collaborators have already proven that they can identify the key issues and devise innovative solutions to the world's major challenges in all possible facets of disease control."

Kenneth J. Arrow, Nobel Laureate in Economics

"Those at CDDEP have imaginatively helped realize major innovations in global health, such as the Affordable Medicines Facility–malaria (AMFm), and they will continue to do so."

Sir Richard Peto, Oxford University

"In today's world of economic austerity, the Center for Disease Dynamics, Economics & Policy is vital for decision-makers, helping them understand the scientific basis and cost effectiveness of policy options to improve health, and the feasibility of applying these options in various settings."

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ABOUT CDDEP

The Center for Disease Dynamics, Economics & Policy supports evidence-based health policy around the world.

CDDEP combines expertise in economics, epidemiology, disease modeling, risk analysis, and statistics to produce evidence-based, actionable, policy-oriented studies. Projects span topics in global health, including febrile illness management, malaria, antibiotic resistance, disease control priorities, environmental health, and the effects of alcohol and tobacco.

CDDEP projects address health issues in both the developed countries of North America and Europe and the low- and middle-income countries in Africa and Asia. CDDEP's strength derives from a pragmatic, actionable, and evidence-based approach to tackling country- and region-specific health problems, as well as global challenges.

CDDEP's work encompasses new methods for analysis and encourages cross-fertilization between developed-country and developing-country research. CDDEP researchers have contributed to the design of a global subsidy for antimalarial drugs, reframed and analyzed antibiotic resistance as a challenge in natural resources management, developed new analytic tools for assessing the economic returns to health system interventions, and pioneered the use of structured expert elicitation tools for measuring uncertainty in health.

Founded in 2010, CDDEP has offices in Washington, DC, and New Delhi and collaborates with a global team of distinguished academics and policy analysts.

CDDEP'S RESEARCH PORTFOLIO DRAWS ON EXPERTISE FROM MULTIPLE DISCIPLINES TO INFORM POLICIES THAT IMPROVE HEALTH.

Understanding and communicating drug resistance trends

Through the Global Antibiotic Resistance Partnership (GARP) and Extending the Cure, CDDEP has created tools to visualize and communicate changes in antibiotic resistance, from the regional level to community hospitals. ResistanceMap and the Drug Resistance Index track antibiotic use and resistance over time, communicating trends clearly and precisely.

Supporting evidence-based, local solutions to manage antibiotics

In low-income settings, curbing antibiotic resistance must be balanced with expanding access to antibiotic treatments. GARP supports multisectoral working groups in developing countries to fill gaps in research and develop strategies for encouraging appropriate antibiotic use, with the goal of preserving the efficacy of these essential drugs. In 2011, GARP hosted the 1st Global Forum on Bacterial Infections in New Delhi, following which ministers from five countries—Ghana, Kenya, Mozambique, South Africa, and Vietnam—signed the *New Delhi Call to Action on Preserving the Power of Antibiotics.* National working groups have now been established in eight countries.

Piloting a subsidy for antimalarial drugs

CDDEP researchers were among the architects of the Affordable Medicines Facility–malaria (AMFm), an innovative financing mechanism to provide affordable, effective antimalarial drugs worldwide. CDDEP continues to conduct research in refining the subsidy approach, which includes assessing the role of rapid diagnostic tests for the appropriate treatment of febrile illnesses.

Identifying disease control priorities

As partners in the Disease Control Priorities Network, CDDEP researchers evaluate the potential costs and benefits of allocating funding to a range of health service delivery platforms, as well as the development of new health technologies and new health interventions.

Modeling disease dynamics

Febrile illnesses, particularly pneumococcal disease and malaria, are among the leading killers in the developing world. CDDEP researchers have developed PneuMOD, a working, multistrain pneumococcal model that can simulate disease transmission patterns and test interventions. By using computational models, CDDEP is able to simulate the effects of childhood disease and nutrition on cognitive development and human capital formation in the developing world.

Exploring innovations in health care

CDDEP's Learning from the Bottom Billion project identifies health system innovations in developing countries that may help lower costs or improve quality of care in the US. CDDEP pinpoints obstacles to innovation in the United States system, including possible disincentives and regulatory barriers.