Although the National Institute for Medical Research (NIMR), Mwanza Centre in collaboration with the London School of Hygiene & Tropical Medicine (LSHTM) have had successful and productive research on Sexually Transmitted Infections (STIs), including HIV over the years, initial achievements were limited by lack of facilities for carrying out cutting edge laboratory testing. The STIs/HIV research at Mwanza Centre were supported by laboratory facilities which could only perform basic diagnostic tests such as the Enzyme Linked Immunosorbent Assays (ELISAs) for HIV-1 and HSV-2, particle agglutination tests for syphilis, culture for *Trichomonas vaginalis* and *Neisseria gonorrhoeae* and qualitative detection of *Chlamydia trachomatis* and *N. gonorrhoeae* by Nucleic acid Amplification tests among other tests. This meant that only a limited range of assays could be performed locally and samples often had to be shipped to overseas laboratories for specialized testing. This limitation impacted on competitiveness of NIMR Mwanza Centre for STIs/HIV research because of costs involved in shipping and sample testing at external laboratories. For example, although the Mwanza Centre is a leading centre for STIs and HIV research in the country, it could...
Dear Readers,

THRiVE welcomes Dr Jeremy Farrar who joined as Director of the Wellcome Trust on 1st October, 2013 succeeding Sir Mark Walport who stepped down in March 2013. Dr Farrar’s appointment was greeted with excitement but also with some uncertainty as to what the future may turn out to be for the African Institutions Initiative (AII). This event coupled with the end of our 4th grant year and the completion of the membership of THRiVE Advisory Board calendar year 2013, all make this a suitable time to reflect on THRiVE’s achievements and challenges, and to plan for accelerating future improvements in nurturing individual excellence and building strong institutions.

This is in line with what Dr Jimmy Whitworth, Head of International Activities at the Trust, advocated for in his AII ‘Update’ message in October 2013: ‘….consortia need to identify what their lasting scientific and operational achievements at the individual and institutional level have been over the past 5 years, and be able to clearly monitor and document the progress that has been made under the current award.’ He added “When thinking about the future, consortia should aim to consolidate and build on their strengths and successes, having rethought areas that have not worked well and focussing on quality rather than quantity.”

Dr Jane Kengeya-Kayondo, the Trust’s Special Adviser for Africa identified six ‘potholes’ that should be avoided: The illusion that more is necessarily better and neglecting attention to quality; Not planning for engagement of stakeholders; Treating accountability as a choice and not an obligation; Inadequate long term investments in capacity building by African countries and other funders so as to ensure sustainability; Poor synergies and inadequate efforts to learn from across consortia; Neglecting monitoring, evaluation and learning and reminding us of the old adage that ‘What gets measured gets done’. In 2014 THRiVE will make a deliberate effort to identify key THRiVE achievements and challenges since its inception. To this end THRiVE-sponsored Master’s and PhD students and postdoc researchers are encouraged to submit very high quality abstracts for the Wellcome Trust-sponsored scientific conference to be held in Uganda in May 2014 (See Call for abstracts, page 6 in this issue of THRiVE News). For THRiVE to solve important health problems we need to bring the best minds to work together across networks and institutions.

Membership of the THRiVE Advisory Board

1. Prof. Wilfred Mbacham, Chair, Rest of Africa
2. Prof. Hannah Akuffo, Outside Africa
3. Dr. JPR Ochieng’Odero, Other Consortia
4. Prof. Jerome Kabakyenga, Uganda
5. Dr. Val Snowin, Wellcome Trust
6. Prof. Dominic Makawiti, Kenya
7. Dr. Hassan Mshinda, Tanzania
8. Prof. Nelson K. Sewankambo, Director, THRiVE
9. Dr. Saidi Kapiga, Deputy Director
10. Dr. Jean Baptiste Mazarati, Rwanda

THRiVE support has helped to leap frog the laboratory capacity at NIMR Mwanza Centre

THiRV supports have provided the NIMR Mwanza Centre laboratory with new equipment. This has greatly improved our downstream processes such as PCR and sequencing by ensuring that only the appropriate RNA/DNA products are taken to the later stages, hence increasing efficiency and reducing cost. For THRiVE to solve important health problems we need to bring the best minds to work together across networks and institutions.

Instrumentation

ABI 3500 Genetic Analyser

In 2014 THRiVE will make a deliberate effort to identify key THRiVE achievements and challenges since its inception. To this end THRiVE-sponsored Master’s and PhD students and postdoc researchers are encouraged to submit very high quality abstracts for the Wellcome Trust-sponsored scientific conference to be held in Uganda in May 2014 (See Call for abstracts, page 6 in this issue of THRiVE News). For THRiVE to solve important health problems we need to bring the best minds to work together across networks and institutions.

For THRiVE to solve important health problems we need to bring the best minds to work together across networks and institutions.

The ABI 3500 offers enhanced data quality and more successful samples per run, minimum reagent and sample consumption, high reliability, easy maintenance, and automated operation with accurate sample tracking. The sequencing facility has the capacity to perform genotyping and expand into HIV drug resistance testing.

However, in order to maximize the efficiency of these downstream processes, it was imperative for the extraction products (RNA/DNA) to be of the required quality and quantity. The laboratory has therefore also acquired and installed a Thermo Scientific NanoDrop Spectrophotometer (Model ND2000c). The Spectrophotometer is capable of assessing the quality and quantity of RNA/DNA extracts by measuring absorbance at specific wavelengths. This has greatly improved our downstream processes such as PCR and sequencing by ensuring that only the appropriate RNA/DNA products are taken to the later stages, hence increasing efficiency and reducing cost.

Moreover, acquisition of the Spectrophotometer has ensured that the laboratory does not use the laborious and environment unfriendly gel-electrophoresis which uses ethidium bromide which is potentially carcinogenic. These equipment were acquired either in part or wholly through THRiVE funding. This achievement has greatly been made possible thanks to the generous support received from the Wellcome Trust through THRiVE, for which we are very grateful.

The ABI 3500 offers enhanced data quality and more successful samples per run, minimum reagent and sample consumption, high reliability, easy maintenance, and automated operation with accurate sample tracking. The sequencing facility has the capacity to perform genotyping and expand into HIV drug resistance testing.

However, in order to maximize the efficiency of these downstream processes, it was imperative for the extraction products (RNA/DNA) to be of the required quality and quantity. The laboratory has therefore also acquired and installed a Thermo Scientific NanoDrop Spectrophotometer (Model ND2000c). The Spectrophotometer is capable of assessing the quality and quantity of RNA/DNA extracts by measuring absorbance at specific wavelengths. This has greatly improved our downstream processes such as PCR and sequencing by ensuring that only the appropriate RNA/DNA products are taken to the later stages, hence increasing efficiency and reducing cost.

Moreover, acquisition of the Spectrophotometer has ensured that the laboratory does not use the laborious and environment unfriendly gel-electrophoresis which uses ethidium bromide which is potentially carcinogenic. These equipment were acquired either in part or wholly through THRiVE funding. This achievement has greatly been made possible thanks to the generous support received from the Wellcome Trust through THRiVE, for which we are very grateful.

Instrumentation

ABI 3500 Genetic Analyser

A Rotorgene qPCR Amplification run

The ABI 3500 offers enhanced data quality and more successful samples per run, minimum reagent and sample consumption, high reliability, easy maintenance, and automated operation with accurate sample tracking. The sequencing facility has the capacity to perform genotyping and expand into HIV drug resistance testing.

However, in order to maximize the efficiency of these downstream processes, it was imperative for the extraction products (RNA/DNA) to be of the required quality and quantity. The laboratory has therefore also acquired and installed a Thermo Scientific NanoDrop Spectrophotometer (Model ND2000c). The Spectrophotometer is capable of assessing the quality and quantity of RNA/DNA extracts by measuring absorbance at specific wavelengths. This has greatly improved our downstream processes such as PCR and sequencing by ensuring that only the appropriate RNA/DNA products are taken to the later stages, hence increasing efficiency and reducing cost.

Moreover, acquisition of the Spectrophotometer has ensured that the laboratory does not use the laborious and environment unfriendly gel-electrophoresis which uses ethidium bromide which is potentially carcinogenic. These equipment were acquired either in part or wholly through THRiVE funding. This achievement has greatly been made possible thanks to the generous support received from the Wellcome Trust through THRiVE, for which we are very grateful.

For THRiVE to solve important health problems we need to bring the best minds to work together across networks and institutions.
These barriers were purely health workers. Some of the spouse and unfriendly disclosure of HIV status to lack of transport, fear of privacy during counseling, appointment dates, lack of missing appointments among the reasons for child transmission of HIV prevention of mother-to-child programs, which was at less than 5%. This was a real down side to option B+ that has been hailed by many as a strategy that will lead to the World Health Organisation’s call for virtual elimination of mother to child transmission of HIV by 2015. While impressive advances have been made in reducing antenatal and perinatal transmission of HIV, the period 0–24 months has remained problematic mainly due to failure to retain mother-baby pairs in care. I had to use the opportunity given to me by THRiVE to do something about this challenge of low retention of mother-baby pairs. I undertook a short study to determine the barriers to and facilitators for retention of mother-baby pairs in care under option B+ in Prevention of mother to child transmission of HIV (PMTCT).

Among the reasons for missing appointments were mothers forgetting appointment dates, lack of privacy during counseling, lack of transport, fear of disclosure of HIV status to the spouse and unfriendly health workers. Some of these barriers were purely health facility related barriers. We therefore undertook quality improvement measures to address the health facility related barriers. Among the changes were; synchronizing appointment dates for both mother and baby, keeping mother and baby cards together, active identification of HIV exposed infants during immunization and then actively escorting mother and baby to the service point, and ensuring privacy during counseling. These measures saw a marked improvement in the rate of retention of mother-baby pairs in care. Facilitators for retention of mother-baby pairs included having mother and baby weighed, having the baby undergo medical examination and treatment, mothers’ interest in knowing more about baby feeding, availability of transport and need for more counseling for the mothers. We worked with the health facilities to strengthen these facilitators so as to enhance retention of mother baby pairs in care. The effect of the intervention has been tremendous with facilities now reporting improvement in retention of more than 50% in a space of 4 months.

My experience during the field attachment and findings of the study raised several research questions that have led to my research for the dissertation, fully sponsored by THRiVE. The MHSR course has opened a whole world of opportunities. All I can do now is to successfully complete the course within the next six months and start giving back to the community by way of beneficial research. My main focus is now health services and health systems research, which I hope to pursue at PhD level. Mentoring undergraduate students in research, sharing with fellow staff members through journal clubs and seminar series, and strengthening Gulu University Institutional Review Board remain one of my foci up on completion of my MHSR course and return to Gulu University.

The Role of the THRiVE consortium in changing scene of research administration at the partner institutions

Harriet Nambooze

When the Wellcome Trust issued a call for applications under the African Institutions Initiative (AlI) in 2008, there were hardly any well organised systems in place at most of the would-be THRiVE partner institutions to support grant development and submission processes. Makerere University College of Health Sciences (MakCHS) and especially the Consortium Director had to shoulder responsibility for the bulk of the work that led to putting together the THRiVE application (including organizing partner planning meetings, assembling documents from the partner institutions, budget development, obtaining support documents and the relevant signatures, collection of collaborator forms and populating the grant form). The Co-Applicants from the various partner institutions also played very important roles in the process and it was one of the best manifestations of a team effort and true partnership led by the South. One of the senior researchers from Uganda Virus Research Institute spearheaded the budget development process and worked like a bee, talked to all institutional leaders, and regularly brought back to the proposal development team draft budget ideas to be discussed and agreed upon. It wasn’t an easy task to coordinate co-applicants located in different parts of the world. A day before submission I arrived in office a little earlier than usual only to find my mail box clogged with messages from all co-applicants. The Director was experiencing a similar flood of mails as he attended a meeting in the US. This meant that I
The Role of the THRiVE consortium in changing scene of research administration at the partner institutions

By Muyomba Dickson
THRiVE IT officer

In Sub-Saharan Africa, institutions that increasingly embrace use of ICT, their IT professionals focus on creating an efficient and reliable network that can support day-to-day institutional activities. Although it is work in progress, the feature is promising for most of these institutions. Unfortunately little or no attention is given to the most basic measures for information security especially at the end user computers. Often times IT professionals know what is supposed to be done under an ideal situation but because of limitations they tend to focus all resources towards network performance ignoring even the basics for the end user information security. The issue of information security was re-emphasised in November 2013 during a THRiVE internal audit conducted by Deloitte LLP of London, UK on behalf of Wellcome Trust. This was a great opportunity for THRiVE and we are ever so grateful that we were selected to be audited. The benefits of being ‘assessed’ by external eyes cannot be underestimated. Many researchers and administrators or managers do not usually think that a finance audit will also examine the institution’s situation regarding the status of information security. What is also surprising is that these professionals, and I dare say, including IT personnel may very well know what they are supposed to do to ensure information security but are lax on ensuring that they adhere to the good practices. This is a behavioural challenge and should be viewed and addressed with that lens.

Today I would like to share with you a few basic tips on information security that make it easy to protect, access and recover your data in case of failure or loss of your computer.

Tip 1: Partitioning
Partition your hard drive into different logical drives and save your vital information onto the logical drives. This will help in case your primary drive (normally C :) crashes and you need to format and reinstall a new OS. However this option may not be helpful in case of computer theft.

Tip 2: External drive
Backup your vital information on an external hard drive. Avoid keeping your backup together with your computer. Offentimes computer users keep their backup together with or near the computer for example in their laptop bags. This is wrong. In case of theft, it’s most likely that your computer and backup too will be taken. Always lock your backup drive in a safe and ensure to backup regularly.
Ignore the Basics in ICT at your Own Peril

**Tip 3: Cloud computing**
If you’re the kind who doesn’t like to travel with gadgets for fear of losing them while in transit, this option allows you to access your vital information off your work station. There are several free options you can subscribe to although they come with space limitation. These include dropbox (2GB free), Apple’s iCloud (5GB free), Microsoft’s Sky drive (7GB free) and Google drive (16 GB free). Additional storage space can be purchased.

**Tip 4: Hard disc encryption**
It’s important to take steps in protecting data on your computer. Encryption software changes the way information looks on the hard drive so that without the correct password it can’t be read. It’s always advisable for personal laptops to encrypt specific folders as opposed to the entire hard drive.

**Tip 5: Password protection**
Avoid using open accounts on your computer. Always ensure that your devices are password-protected. This will avoid anyone logging on and accessing your vital information. The challenge with this option is that most computer users share passwords with friends/workmates. If you’re the kind then create a Guest account or frequently change your password. You can use the Microsoft utility to create a hard to crack password [here](http://www.microsoft.com/security/online-privacy/passwords-create.aspx).

It’s always good practice to ensure that you have the minimum controls on your electronic data.

**Tip 6: Educate end users**
The IT team should always educate the end users about the best practices for digital information security. This is a more effective strategy than constantly reacting to the end user bad practice.

---

**THRiVE in Cambridge – 2013 in Review**

By Pauline Essah

2013 has been a very busy year for the THRiVE team at the University of Cambridge. However, we cannot complain, as four years after its inception, our programme is continuing to thrive! We have offered visiting African THRiVE fellows access to a wide range of training courses/lectures/seminars, as appropriate. Cambridge mentors across health-related disciplines also hosted the visiting fellows in their labs, encouraged them to give presentations about their research in their host departments, and guided them in preparing research manuscripts for publication. THRiVE in Cambridge also created opportunities for visiting fellows to present their research to a multi-disciplinary audience outside their departments (e.g. at the Centre of African Studies, or in Hughes Hall), thus giving fellows greater exposure in Cambridge, constructive suggestions from the audience, and new contacts for their research. Feedback from the fellows suggests that they have found the support to be useful, and we will therefore do our best to keep this going in 2014 and beyond.

THRiVE in Cambridge was also a major catalyst for the exponentially growing interest in Africa-related activities and events at the University of Cambridge in 2013. This has led to the establishment of the new, umbrella Cambridge-Africa Programme, which covers all subject areas. We have therefore now expanded our THRiVE Committee to form a Cambridge-Africa Committee with representatives across Schools, and now have a larger and more varied database of current and potential Cambridge mentors/ collaborators for African researchers, across a wide range of subjects. We have also launched a new Cambridge-Africa website [here](http://www.cambridge-africa.cam.ac.uk) to publicise Africa in Cambridge and vice versa. Furthermore, we have initiated a Cambridge-Africa seminar series at King’s College, Cambridge, and invite speakers from Cambridge and elsewhere to give presentations about Africa-related topics. We have also connected and are supporting the full-time African students in Cambridge: we helped them to form a new and active University Society that now meets frequently for intellectual discussions and social events.
My first 1st Society for Research Administrators Annual Meeting Experience

Richard Jonathan Senvewo, Administrative Officer Malaria COHRE Programme

I have always heard and used the words research administration but could not really clearly distinguish between research administration roles and general administrative roles. Soon after completing my Bachelor’s degree I worked as an administrative assistant for four years, after which I was recruited as a project administrator and this is when feeling the words research administration concerned me as well. However, it was still not clear what my contribution was as a research administrator beyond the duties stipulated in my appointment letter. So when the opportunity to attend the Society of Research Administrators (SRA) Annual meeting in New Orleans Louisiana from the 26th to 31st October 2013 came up, it excited me not only because it was going to be my first trip to the USA but most importantly, that now was my opportunity to get more enlightened on research administration.

Fat Forward: SRA Meeting New Orleans, Louisiana 26th – 31st October 2013

It bothered me that the pre-SRA meeting workshops were more expensive than the main meeting itself and whether I really needed to attend them, after all most of the topics in these workshops were again listed in the main meeting. However, it was in these pre-meeting workshops where I benefited the most largely because of the adequate time that was allocated to discussing a topic which made understanding easy even to newcomers like myself.

One of the key issues I learnt in these workshops is that research administrators equally play a vital role in the success or failure of a project as the researchers. It was clarified that the Principal Investigator’s main role is to write and implement the science while the administrator’s role is to ensure all activities are implemented according to the funder’s, as well as institutional regulations.

Unlike before, I’m now more conscious of the fact that reading and understanding the Notice of Award and institutional policies is more of my obligation than the PI. Indeed this is an important aspect because most research...
The WellcomeTrust is hosting a research capacity scientific conference in Uganda in May 2014. The conference (20-21 May) will precede a meeting of All directors and principal investigators of the Trust capacity-strengthening Strategic Awards (22-23 May) and will showcase the breadth and quality of the science outputs from the Trust’s capacity-building projects. The meetings will be attended by senior Wellcome Trust colleagues and governors.

Wellcome Trust invites the submission of abstracts for the scientific conference from Masters students, PhD students and postdoctoral researchers funded through the Wellcome Trust capacity strengthening portfolio, both from the All consortia and the capacity-strengthening Strategic Awards. Details of the call for abstracts below:

**Research Capacity Strengthening:**

**We are inviting abstracts for the Wellcome Trust research capacity strengthening conference in Uganda on 20-22nd May 2014.**

Submissions are invited from Masters Students, PhD students and postdoctoral researchers funded through the Wellcome Trust research capacity strengthening portfolio. Please complete the online form at wellcometrustevents.org/2014scientificconference to submit your abstract. A £1,000 meeting bursary will be awarded to the best poster and the best presentation at the conference. Call for abstracts now open. Call for abstracts closes: 24th January. If you have any queries, please contact aii@wellcome.ac.uk

The link to the submission website in here. The submission website clearly states what information is required and the obligatory fields for each abstract submission must be completed in a single sitting. The abstracts will be assessed on merit by a selection committee made up of Wellcome Trust staff, governors and researchers. Successful students and researchers will be informed in February 2014 and invited to register for the conference, their travel and accommodation will be arranged and funded by the Trust.

The conference is an excellent opportunity for Masters students, PhD students and postdoctoral researchers to showcase their best science. The abstracts submitted should be of highest quality reflecting a good representation of the work of THRiVE and other programmes. The best oral and poster presentations will receive an award.

Abstracts should be submitted through the submission website - https://www.wellcometrustevents.org/wellcome/frontend/reg/thome.csp?pageID=79112&ef_sel_menu=2319&eventID=255&eventID=255

The closing date for submission of abstracts to the Wellcome Trust is Friday 24th January 2014.
Emilio Ovuga

Wellcome Trust and Research Management: Engaging in the intricate system of managing research can be a nightmare. The demands placed on the Principal Investigator to conduct ethical and scientifically sound research does not allow enough time for him/her to attend to documentations of financial transactions, let alone paying attention to human resources needs, and ensuring logistical supplies are available to research teams on time, among other things. A functional Grants Management Unit (GMU) therefore frees researchers from the daily hassles of financial and other aspects of research management, thus ensuring that the quality of research conducted at the institution is valid and of highly credible standard. The establishment of a critical mass of researchers thus of necessity includes the development of a strong Grants Management structure that is recognized as an integral part of the university or research institution. The philosophy of the Wellcome Trust-funded THRiVE project provided the rationale for and justification to establish a GMU at Gulu University Faculty of Medicine. In our opinion, it is not enough to train only health researchers whose skills in general research management are wanting. The team of research scientists and research managers begin to impact positively on population health, or even in overall social and economic development when research scientists work together as members of the same team, though with different roles and responsibilities but for the same goal. This has been possible with research scientists in the THRiVE family doing their business together and attending conferences, workshops and seminars together. Thus with funding from THRiVE, research managers from Gulu University have attended the annual conference of the Association of Research Administrators in Africa (ARAA) at least two times in the past three years. Two members of Gulu University research administrative staff are now members of ARAA. With the skills the administrators gain while attending administrators’ conferences, and with encouragement from research scientists, research administrators are able to articulate research management issues confidently for the success of research for the benefit of all stakeholders. To have meaning and understanding, these developments must be viewed in the context of Gulu as a young University whose circumstances are described in the following paragraphs.

Established in 2002 in an underserved post-conflict region of Uganda, Gulu University faces the triple challenges of establishing itself as a credible public institution of higher learning able to attract human resources and students, surviving into an international and universal institution and the institution showing evidence of its willingness, capability and capacity to serve the Ugandan people by conducting research needed to generate evidence to guide development initiatives in all areas of human endeavor. However, establishing a credible research system to support the institution was not easy; the concept of research management as a science and profession in its own right is often hazy, as this profession is not even provided for within the establishment. This difficulty negatively impacts on research staff recruitment, financing of research management activities, and finding office space with adequate furniture and equipment needed to build the skills and knowledge base of research management staff for effective research management. Additional challenges that face grants management system include the attitude and work style of researchers and grants management system itself. The GMU at Gulu University Faculty of Medicine consists of six sub-units; namely: Finance and Accounts, Administration, Scientific, Grants, ICT, and Internal Audit. The Finance and Accounts sub-unit is manned by a Finance and Accounts Officer, an Accounts Assistant and an Assistant Cashier. The Administration sub-unit handles all issues of research funds. Administration sub-unit, which has a Project Administrator, a copy typist, cleaner/messenger and driver handles the general management of research projects.
No Researchers Without Grants Managers

including but not limited to record keeping of project documents, monitoring of project activities, sorting and channeling of communications to various stakeholders and for the attention of the Principal Investigator, and report writing. The Scientific sub-unit that comprises the Principal Investigator of each research project and the various research staff under his or her leadership is responsible for the technical implementation of research activities, the ethical conduct of research, the management of research data, the safety of research data, data analysis, report writing, publications, and dissemination and preparation of documents for presentation to the Finance and Accounts Department through the Project Administrator. The Grants Management Department is concerned with the sourcing of and dissemination of information on research grants and funding opportunities, the recording of grant applications and of research grants received, provision of various forms of technical support to researchers, and support to the training of researchers and students on the practicalities of grants and projects. The Information, Communications Technology (ICT) sub-unit comprises staff with training, knowledge and experience in electronic handling of documents and supports members of the institution in the preparation of reports, presentations, publications, archiving and dissemination of information. Needless to say, the team also supports the institution with routine maintenance of ICT hardware, the safety and security of documents.

Internal Audit sub-unit: An internal auditor assigned to the Faculty performs both pre-audit and post-audit verifications of all financial transactions and submits his/her report direct to the University Secretary who is the Accounting Officer at Gulu University, with a copy to the Dean of the Faculty of Medicine. External Audit is the sixth sub-unit, and supports the other five sub-units by performing external audits of all financial transactions on all projects and reports direct to the sponsors of respective research projects with copies to the Vice Chancellor, the University Secretary and the Dean of the Faculty of Medicine.

Challenges: The main challenge facing research projects at the Faculty is the overall shortage of human resources and the funds needed to pay for services. The presentation in this Grants Management Unit (GMU) is therefore our ideal. The growth and development of the GMU is likely to face continuing challenges and difficulties. The engagement of an external audit firm will require finances. Similarly the dedicated service of the staff of the GMU will require financing to support the commitment of the staff of the GMU. Clarifying the role, relevance and significance of the GMU as an essential entity within the university system can be addressed through regular meetings, seminars, and workshops and, through exposure to external research management environment at conferences and courses. Grants office appears to duplicate the functions and roles of Finance and Accounts Department on the surface but the distinct nature of the two departments can become obvious through discussions beginning with the research management unit itself before the characters of each department are explained to other members of the institution. The motivation of GMU staff will be enhanced if they are engaged in future proposal development activities right from the conceptual stage to the management of successful grants.

My first 1st Society for Research Administrators Annual Meeting Experience

administration roles revolve on it for example; providing guidance and interpretation of federal regulations and University policies and procedures, preparing and submission of financial and progress reports, responding to ad hoc audit requests, monitoring and reconciling expenditures to ensure allowability, allocability and reasonableness, and so on.

One of the most interesting sessions I attended at the SRA meeting was Research Administration as a change agent. In this session, I was enlightened that besides professionalism, personal development is another vital area in research administration. Basics like effective communication, being credible, avoiding negativity, being proactive and inclusive, among things, can help an administrator for example identify problems and how they can be fixed or improved. So is being bold to take risks, thinking of better ways to do things among other aspects.

At institutional level Intuitions I liked the idea of institutions in some countries having pre-award and post-award offices that bring together all administrators in those respective fields, which I think is something we can borrow at the College of Health Sciences especially now that we are building the Research Support Center.

A lot of useful information was discussed at the SRA meeting which will enhance the way I have been executing by duties as a research administrator. I can’t thank enough my sponsors; the Uganda Malaria Clinical Operations and Health Services Research Programme (Malaria COHRE) who supported my attendance at the SRA meeting and I’m sure this investment makes me a better research administrator for the COHRE and other programs.
Shem Wakaindha, MakCHS

The Makerere University College of Health Sciences (MakCHS) Research Administration function is one that I joined in mid 2011 as a Grants & Contracts Officer under a newly set up Grants Office responsible for Research Mobilisation, Capacity Building and Support of Post-award processes through ensuring compliance to donor requirements. Having come from an audit / accounting background, this change came with its challenges; taking on something entirely different from what I was used to was no cup of tea. Fortunately through some capacity building initiatives and trainings by programmes such as MESAU and THRiVE, the unknown has been simplified. The recent SRA meeting in New Orleans from 26th to 30th October 2013 was just one of them. During this conference, my understanding of two financial compliance issues was clarified during one of the sessions facilitated by the MEPI Grants Management Specialist from Forgaty International Centre, Ms Elizabeth Whittington.

The first issue discussed and clarified, was that of all organizations being subjected to NIH organizational audits on top of the specific project audits carried out for projects receiving more than USD 500,000 in any fiscal year. This clause just like so many others in the NIH Grants policy statement was not quite clear to me before this conference. However, on this occasion I had the opportunity of inquiring directly during the session and to my understanding even the small projects earning below the aforementioned amount should be subjected to an NIH organizational audit under the OMB circular A-133 if the total awards to the institution cumulatively sum up to USD 500,000 and above. As institutions therefore, this calls for better organization to enable higher levels of compliance by all NIH program PIs including those conducting small projects as they at any time can be subjected to surprise visits from the donor to ascertain compliance to this requirement.

The other issue of major importance discussed during this particular session and bordered on unallowable costs was the VAT taxes that are unallowable to NIH. Most LMICs apply for research funding due to inability of their governments / institutions to fund health research so going back to the same people to ask them to pay such taxes even on small products such as airtime for coordination of donor-funded research presents another complex equation as they might not be forthcoming. During this conference we had opportunity to raise these concerns and were advised to continue advocating for a policy change here by raising such issues at regular meetings attended by NIH officials now that grants sent out include foreign applicants and some rules might present their own challenges, practically.

In conclusion, it is through such continuous capacity building arrangements for research administrators that donor/grantee relationships and research in general can be improved especially if the administrators’ newly acquired knowledge is put to practice.
Roles, Accomplishments and Impact of the MakCHS Grants Office

Shem Wakaindha

The Makerere University College of Health Sciences Grants and Contracts (GC) Office was established in May 2011 principally with the mandate to assist researchers at the College to obtain and manage awards that fund scholarly activities and sponsored capacity building programmes. The Office also supports proper stewardship of grant/project resources, ensuring proper adherence to donor contract terms and laws of the land.

The GC Office provides advice to researchers and the administration at MakCHS in order to increase the number of externally financed research projects.

The Office has made considerable strides in contributing towards MakCHS strategic plan aspirations through 3 core focus areas of Resource Mobilisation, Capacity Building and Grants and Contracts Management.

Through Resource Mobilisation, the Office has contributed towards increasing and diversifying sustainable sources of income. The Office regularly looks for funding opportunities from various donor sites and shares them with faculty to express interest. The Office then supports the various proposal Development Teams with budget development, and other research administrative issues until final submissions to various donor agencies. Since inception of the Grants Office in May 2011, 17 grants applications submitted through the office worth $6.2M have been awarded.

A number of grants are in the pipeline and are likely to be awarded in the foreseeable future. Awarded grants through the office are mainly from the National Institute of Health (NIH), Grand Challenges Canada, European and Development Countries Clinical Trials Partnership (EDCTP), International Atomic Energy Agency (IAEA) and other smaller funding agencies.

Under capacity building, the Grants Office staff have participated in various international capacity building initiatives such as attendance of the Society of Research Administrators International annual conferences in Florida and New Orleans, USA, exchange visits with research administrators from John Hopkins University (JHU), attendance of Association of Research Administrators of Africa (ARAA) conference in Nairobi, KPMG / Wellcome Trust Finance training in Nairobi and many others. Through such trainings, knowledge, skills, contacts and useful resource materials have been obtained and used to design training materials for faculty in grants writing, research administration and management as well as understanding various donor policies, terms and conditions.

In the spirit of partnership and cooperation, the office has been able to support the Faculty of Medicine in Mbarara University of Science and Technology (MUST) and Gulu University ran their Grants Writing training workshops for faculty and research support staff. The office designed a hands-on training such that a total of 4 grant applications were submitted for funding after these trainings. The Office also facilitated the development of a strategic plan for the Office of Research Administration at the MUST - Faculty of Medicine.

Under Grants and Contracts Management, the office has focused mainly around upcoming grants and support to ongoing grants and projects. The office has supported contract negotiation and sign off for 5 new grants, supported inception meetings for 3 grants as well as induction programs for project administrators. The office has also been key in spearheading the transition to the Payment Management system for the NIH funded programs in the college. The office recently coordinated the financial and administrative sponsor site visit for H3 Africa Bio repository Grant that was eventually awarded to Makerere’ College of Health Sciences. The grant is currently implementing phase 1 of its activities as they hope to transition to the 5 year phase 2 stage.

The office overall continues to provide routine budget development, budget support, financial field monitoring support, financial reporting, contract and addendum drafting, no cost extension applications, report compilations and sponsor just in time information requirements.

Grants Office staff, Joan Larok, Shem Wakaindha and Harriet Nambooze at the 2013 SRA conference getting lessons on usage of a new grants management software.
The THRIVE programme in KCMC has seeded a number of initiatives which are now linking in a variety of ways. The development of networks is an important component of our vision of establishing a School of Public Health in KCMC. Here are some examples.

Lecturers and students on the MSc in epidemiology won a THRIVE ‘pump priming grant’ as a collaboration between staff from NIMR and KCMC to explore the feasibility of screening and referring people with raised blood pressure to practices. The feasibility is increasingly prevalent in Africa and yet few patients are diagnosed, fewer still are under regular treatment and even fewer have their blood pressure controlled. This puts large numbers of people at risk of stroke and heart disease, often with catastrophic consequences to families and communities. The BP screening project is primarily directed towards case detection. Fewer than 20% of adult men attend a health facility each year while more than 70% attend a pharmacy (duka la dawa). This provides a potential opportunity to identify people with high blood pressure. We are evaluating the free self-use of electronic blood pressure devices located in drug shops in Mwanza. People with raised BP are given a letter recommending that they attend the local hospital outpatients and referring people with raised blood pressure. Hypertension is increasingly prevalent in Africa and yet few patients are diagnosed, fewer still are under regular treatment and even fewer have their blood pressure controlled. This puts large numbers of people at risk of stroke and heart disease, often with catastrophic consequences to families and communities. The BP screening project is primarily directed towards case detection. Fewer than 20% of adult men attend a health facility each year while more than 70% attend a pharmacy (duka la dawa). This provides a potential opportunity to identify people with high blood pressure. We are evaluating the free self-use of electronic blood pressure devices located in drug shops in Mwanza. People with raised BP are given a letter recommending that they attend the local hospital outpatients and referring people with raised blood pressure.

The East African DTMH is just completing its third year. This is an important collaboration between LSHTM, KCMC and Makerere University (see separate article in this newsletter). An important new development is the possibility for students to convert their DTMH course in Mwanza and LSHTM to full MSc using modules from THRIVE-run courses such as the East African Research Methods course in Mwanza and LSHTM distance learning modules. Links between the MPH students at KCMC and academic staff in the Department of Epidemiology are enriching student theses and research in both departments. Last year, THRIVE-sponsored staff in the department of epidemiology and biostatistics supervised six MPH students. This close collaboration between the Department of Community Health, which coordinates the MPH programme, and Department of Epidemiology and Biostatistics continues on many levels including teaching in each others’ courses, and supervising students’ research projects. Studies included “Behavioural risk factors for HIV among porters working on Mt. Kilimanjaro, Tanzania” and “Antimicrobial susceptibility patterns and trends in multidrug resistant Salmonella typhi among paediatric patients at Korogwe District Hospital, Tanzania”.

Achieving MDG-4 (to reduce child mortality by two thirds by 2015) is challenged by persistently high neonatal mortality, particularly in Sub-Saharan Africa. The prevention of neonatal hypothermia in a resource poor setting is a potentially important strategy to reduce rates of sepsis, respiratory distress and mortality. In response to this need THRIVE are supporting Dr Rune Philemon, a KCMC paediatrician, in running the “Hot Cot” project. Collaborating with a paediatrician at LSHTM and staff at Mulago Hospital, Kampala, the team are evaluating the use of a low-cost incubator for the care of premature babies (see photo). Social scientists from KCMC Public Health Department will collect data on the acceptability of the cot to mothers, while quantitative data will be analysed with support from the Epidemiology Department at KCMC. This project provides a good example of interdisciplinary work at KCMC, where we are keen to develop linkages between clinical research, social science and epidemiology. This study also helps to build collaborative relationships across a number of international institutions. These are just a few examples that underline the potential role for a School of Public Health at KCMC that we hope to develop with funds from THRIVE and other sources. In the broadest sense public health should be the focal meeting point of all health science disciplines, and at KCMC the vision includes the Departments of Public Health and Epidemiology with close collaborations with clinical disciplines. This approach will enhance the quality of our MMed, MSc and PhD programmes as well as creating an effective platform for high quality international research.

Why Audits are Important!

Paul Teefe, THRiVE Finance Officer
Makerere University is a public institution.

The University’s source of income is mainly Government Grants (subvention), Non-Tax Revenue (NTR) like fees from private students and projects. Being a government institution, Makerere University gets numerous audits for both the subvention & NTR and projects where different funders require separate Audit Reports. Recently, in November 2013, Wellcome Trust arranged for THRiVE to undergo the Trust’s Internal Audit conducted on its behalf by Deloittee LLP (from London, UK).

Apart from the extra effort put in by staff when dealing with auditors, the College of Health Sciences is always happy to receive auditors either from within or out of the country. The College knows that there are benefits of being audited, interalia, including: gaining confidence that the College is on the right track in handling finances, that there is compliance with terms and conditions of the grant, that there are adequate internal controls in the University financial system and also that the policies and procedures of the University are being adhered to.

The other benefit is that the auditors support management’s effort to establish a culture that embraces ethics, honesty and integrity. They assist management with the evaluation of internal controls. College management is aware that it takes effort and time to have all internal controls codified in policy and guidelines. If a control weakness that could potentially cause vulnerability is identified, the auditors will make a recommendation as they did in this case, to implement a control and the onus is on the institution to comply. Internal Audit’s findings elsewhere the College internal auditors report confirm the College management thinking that having audits is good and gives confidence to staff.
Since 2010 THRiVE has been supporting the development and teaching of an MSc in Epidemiology and Applied Biostatistics at Kilimanjaro Christian Medical College (KCMC). As part of this programme, Lecturers from KCMC and LSHTM have supervised 15 students to conduct their own independent research. During their first year the students develop their research ideas and undertake a detailed review of the literature. By applying their newly gained theoretical knowledge they move this idea forward into a full proposal which they present at a local scientific forum. In the second year, their attachment to the research institute that generated their data and the advanced biostatistics modules enable them to organise, analyse and interpret their data and complete their research thesis. The students unanimously reported that this whole process was an integral part of their learning; helping them to better understand how to manage research projects, large data sets, use different data analysis techniques, interpret their data and how to review and critique the literature. In this article, we present feedback from a few of the students and illustrate how this process is crucial for the development of our future scientists:

Comment: “This project has given me the opportunity to work outside the hospital environment and has shown me the importance of assessing the needs of marginalised communities in terms of health education and access to health care. I now have knowledge and confidence in conducting community field work and capturing important data to analyse scientifically; it was an amazing moment for me.”

Publication status: For submission to Journal of Development and Child Neurology waiting on authors final comments.

Name: Emmanuel Martin; MSc EAB year 2
Current position: Student – has recently applied for statistician positions with THRiVE partners.
Research title: Effectiveness of PMTCT services on reducing Mother to child transmission of HIV in Tanzania from 2009 to 2012

Methods: Retrospective medical records based cohort study
Comment: “My research provides evidence to show the effectiveness of Tanzania’s PMTCT services. The study highlights the challenge of retaining children in PMTCT services; in my sample more than 79% did not attend clinic beyond 3 months, despite the guidelines stating they should attend to 18 months. It may be they were being captured elsewhere, however without any system to link data from MCH clinics and PMTCT it is not possible to know.”

Publication status: Submitted to BMC Public Health and waiting for the reviewers comments.

Name: Jane Rogathi, MSc EAB Graduate
Current position: Epidemiology assistant lecturer and researcher at KCMC
Research Title: Association between nutrition and childhood epilepsy in Hai District Kilimanjaro, Tanzania
Methods: A community based case control study

Comment: “to improve the data management in the region, I will be able to analyse the data locally for the purpose of programme planning and evaluation. It has also enabled me to know how to conduct complex analysis for other epidemiological studies.”

Publication status: For submission to AIDS Research and Treatment waiting on authors final comments.

The THRiVE supported MSc in Epidemiology and Biostatistics is helping to train the Tanzanian scientists of the future. Our students and graduates are now regularly invited to take part in national workshops to support data analysis and interpretation. Furthermore, one of our graduates was awarded an HIV Research Trust Fellowship. As part of this fellowship he received a scholarship to be attached to the UVRI/MRC statistics department. He states that “this not only provided me a chance to travel outside of my country, but also a chance for me to work in an international research organisation and share with others some of the skills I learnt during my MSc in Epidemiology and Biostatistics”.

Moving forward; many of our graduates are interested in pursuing PhDs. In September of 2013, one student started his PhD at KCMC in collaboration with the Technical University of Denmark. His PhD research will be to develop a hospital based survey on infectious bacteria circulating around KCMC and mapping their resistance to antimicrobial agents. His successful completion of the MSc was a crucial step in his career path as a promising junior scientist within KCMC.
Developing a new Masters course in Epidemiology and Applied Biostatistics (MSc EAB) at KCMUC

THRiVE support to the conception, birth and development of the course

By Jim Todd (LSHTM/ KCMUC)

The idea for a new course was conceived early in 2010. The mother of the course, who carried the course to term and delivered the programme to expectant students, was Kilimanjaro Christian Medical University College (KCMUCo). The concept was enabled through EDCTP funds for supporting students and courses within East Africa. The money came through Kilimanjaro Christian Research Institute (KCRI) and supported four students in the first year.

Fertilization of the idea came from LSHTM, and specifically from David Mabey. LSHTM has developed and delivered many different courses for Masters level training in Epidemiology and Biostatistics. A LSHTM Senior Lecturer, Jim Todd, had helped develop many different short courses in East Africa, teaching Epidemiology, Biostatistics and Research Methods in a range of different institutions. Using THRiVE funds LSHTM recruited Jim Todd to develop short courses to enhance research in East Africa (THRiVE’s mandate is Training Health Researchers in East Africa). The money came through Kilimanjaro Christian Research Institute (KCRI) and supported four students in the first year.

The midwife to the course was the THRiVE Education and Small Grants Committee. Headed by Hugh Reyburn, in early 2010 the committee carried out an Assessment of Training needs among THRiVE partners. In the responses, Epidemiology and Biostatistics was top of the list. Despite the short courses available, it was difficult to put them together to get a rounded out view of how to use the different methods, which methods were appropriate for different studies, and how to integrate the statistical methods with other disciplines. Many comments were received about the need for a longer more integrated approach to research methods, including study design, epidemiology and applied biostatistics. Other support for the course came from THRiVE, by purchasing computers for the computer lab for postgraduate teaching (64 PC computers and a dedicated fibre optic internet connection).

For the course to be a success, the modules needed to be properly prepared. Jim Todd, Seif Shekalaghe and Jonathan Levin (Uganda Virus Research Institute) met in July and spent a week developing four modules that would be the basis of the MSc in Epidemiology and Applied Biostatistics (MSc EAB). These were the introduction to different regression techniques (Linear regression, Logistic regression and Poisson regression, along with a simple description of Likelihood). The MSc would utilise many of the modules from the LSHTM Masters in Public Health to teach students about Epidemiology.

The students were enrolled on the new course in October 2010. The new modules were popular, with an extra 5 students turning up for the regression modules. However it was difficult, as the background the students had in statistics was poor, and a lot of time was spent in basic statistical concepts. In 2011, Jenny Renju was appointed as a new joint LSHTM/ KCMU college Senior Lecturer in Epidemiology. Jenny not only reorganised the Epidemiology modules, which were useful for both MSc EAB students and MPH students, but she also devised the idea of a Foundation course. The Foundation course is for all Masters students in KCMU college, and covers the basic topics of Epidemiology, Basic Biostatistics, and Research Methods. This has taken three years to develop into a proper, integrated course, but it has been worth watching it grow. The sessions have changed from didactic lectures on Research methods to a more practical based approach based on the development of a research proposal. This has included group work focussed on an Outbreak investigation, and practical analysis using the free Epi-Info software. We are confident that the majority of masters students graduating from KCMUCo can now analyse the data from their own research project.

By the second year of the course, external lecturers were being asked to come and contribute to the course. Two advanced modules were taught by LSHTM lecturers and one by a lecturer from the University of Copenhagen (through the BSU collaboration). Two different NIMR centres contributed lecturers in different areas, with Bruno Mmbando (NIMR Tanga) teaching the R module, and Wambura Mwitia (NIMR Mwanza) teaching the Logistic regression modules.

The first year of students graduated in 2012. Although the course was difficult for them, and still being developed while they were being taught, both students and staff learned some new and interesting concepts in epidemiology, statistics and teaching through those times. It did not do those students any harm, as after they graduated they are now teaching four modules on the MSc EAB (with mentoring from senior staff) and three out of four have enrolled in PhD studies.
October 2013 was fairly quiet with respect to THRiVE activities in Cambridge, as we did not have any fellows visiting. However, the THRiVE/Cambridge-Africa team was busy preparing to host some of the leaders of our key African partner institutions in Cambridge. This is because we were launching our new Wellcome Trust-Cambridge Centre for Global Health Research (WT-CCGHR: which has a focus on Africa – particularly the THRiVE institutions in East Africa) in Cambridge on 13th November 2013. We were exceptionally delighted and honoured to have THRiVE’s Director Professor Nelson Sewankambo (a Co-PI for the Centre) and THRiVE partner Professor Pontiano Kaleebu (MRC/UVRI Research Unit on AIDS) join us and give inspiring presentations at the very exciting event. Thanks to Professor Sewankambo for carrying several copies of THRiVE News September 2013 all the way from Uganda to Cambridge, we were able to distribute copies of this quarterly newsletter to the event attendees, which was great! Dr Jimmy Whitworth (Head of International Activities, Wellcome Trust) also received guidance on the analysis of his PhD research results, and attended several seminars during his time with us. Humphrey also got the opportunity to give two presentations about his research to a varied audience in Cambridge. Furthermore, he was able to draft some research manuscripts during his one-month stay, which he hopes will be accepted for publication in a peer-reviewed international journals in the near future. We have no doubt, though, that the absolute highlight of Humphrey’s visit to the UK was the opportunity for him to travel with Professor Dunne to the Emirates Stadium in London, to watch a live match involving their favourite team – Arsenal! Although the final score (Arsenal 1:1 Everton) was not what the pair of avid Arsenal/Gunners fans would have hoped for, it was definitely a special day for Humphrey, and we are glad that he was able to have this experience during his visit (work hard and play hard….).

We hope this ‘extracurricular activity’ will inspire Humphrey to produce a deep and insightful analysis of the wealth of data his project has generated, prepare more manuscripts for publication, and win many more awards and funding for his research! We look forward to welcoming more THRiVE fellows to Cambridge soon – you never know what ‘experience’ we might have in store for you!
Major developments in Information Communication Technology (ICT) physical infrastructure and Bioinformatics during 2013 at UVRI have culminated in setting up of lay-out for a superfast internet connectivity through high-speed MTN fiber optic cable, near completion of the resource building to expand the bioinformatics cluster and grant funding for a medical informatics data center. These have been made possible partly by infrastructural upgrades and human resource support provided through THRiVE/WT capacity strengthening over the past 3 years.

UVRI-Information Technology (IT) has tremendously benefited from THRiVE support. Local Area Network (LAN) extensions, increased internet band-width, new servers, new inverters, an institutional Web-site (www.uvri.go.ug) and purchases of various specialized software have been made thanks primarily to WT support with additional funds leverage from other partners. As a result, the ICT capacity and capabilities at the institute have greatly been enhanced. UVRI’s cyber presence has been consolidated through its website.

The improved internet connection and faster speeds will go a long way in strengthening networking and research applications at the institute. Fiber is magnitudes of times faster than available broadband, enabling instant online information access. Students and scientists will now easily get face to face contact with their overseas mentors and collaborators through Skype or teleconferencing. Joint project planning and proposal applications are increasingly being carried out elsewhere online between colleagues and staff are taking online training modules, and UVRI too can now partake in such developments.

Wellcome Trust funding provided through the Makerere-UVRI research training centre in Infection and Immunity (MUII), with MRC and CDC co-funding has resulted in the new resource building, now nearing completion, which will house THRiVE-supported and MRC-supported bioinformatics cluster expansions and part of the data center and is poised to create a more conducive up-to-date research and training environment at the institute. Online data transfers and remote analysis will become a reality.

All in all, the above initiatives greatly enhance UVRI’s physical infrastructural and human resource capacity in research. They also facilitate information access, data management and storage. We are extremely pleased that the joint efforts of THRiVE and others have been effective in the facilitation of institutional capacity strengthening.
It is over a hundred years since the two UK Schools of Tropical Medicine established their landmark DTM&H training courses for doctors bound for the tropics. This year has seen the successful completion of the third East African Diploma in Tropical Medicine and Hygiene: a 3-month postgraduate certificate accredited by LSHTM and taught entirely in East Africa. Sixty postgraduate doctors from five continents spent six weeks at KCMUC learning about the principles of epidemiology, parasitology and clinical infectious diseases, before moving to Mulago Hospital & Makerere University to study the impact of HIV & TB, non-communicable diseases and maternal and child health.

The East African DTM&H takes an innovative approach to learning; combining research-based seminars with clinical rounds and small group practical classes. In addition students spend a week in rural Tanzania examining barriers in access to healthcare, followed by a similar project in Uganda looking at the programmatic management of neglected tropical diseases. As a result throughout the course over sixty visiting academics joined dozens of local faculty in delivering high quality education.

The aim of the DTM&H is to whet the students’ appetite for a career in clinical research in the tropics. Early cross-cultural collaboration is encouraged and a prize is awarded for the best piece of original work presented at the annual academic careers day. To this end the course counts as 60 transferable credits towards a blended learning Masters due to start in 2015.

The East African DTM&H offers 20 low cost scholarships for local doctors. This year they were awarded to individuals from Kenya, South Sudan, Tanzania, Uganda and Zambia. In addition this year’s students have raised over £8500 to cover the cost of an extra scholarship for an East African doctor next year. If you are interested in applying to attend the 2014 East African DTM&H please email either Francis Mumbowa (francmumbowa@yahoo.co.uk) or Philip Gothard (philip.gothard@gmail.com) for further details.
capita academic performance of an institution. For the last three years, National University of Rwanda (NUR) was always ranked among the 100 best African Universities. This was mainly due to a deliberate policy of research promotion in an environment where academics are daily confronted with basic subsistence issues; a common phenomenon in most Sub-Saharan African countries. The former National University of Rwanda dared to initiate the above mentioned policy despite this challenge. It is worth mentioning that its School of Public Health (NURSPH) was the flagship model in that exercise. The emergence of NURSPH as a prominent research and teaching higher education institution in the country is due to three main determining factors: its decision *proprio motu*, support from faithful partners and benchmarking against their performance. THRiVE Consortium is indisputably one of these partners. When National University of Rwanda embarked on the joint application that led to THRiVE Consortium creation, NUR’s expectations did not clearly focus on research training. However, along the way and with the help of the expressed NURSPH’s desire to focus on research, a common goal was developed and justified the need to work together. In order to build or strengthen an operational research environment, four prerequisites should be considered, i.e. qualified researchers, skilled mentors, well – skilled research administrators, and an up-to-date ICT support system. THRiVE Consortium contributed to the promotion of all this at National University of Rwanda through its Schools of Medicine and Public Health: scholarships for Masters’ degrees were awarded to teaching and research assistants, training of PhD mentors and research administrators, renewal of computers lab, computerization of school library, and installation of optic fibre. This in turn led to successful and appreciated initiatives like organization of regular monthly seminars for MPhil and PhD students, creation of a PhD and MPhil laboratory, establishing of an operational video conference infrastructure, and orientation towards applied research activities.

Thus, Rwanda’s participation in the THRiVE Consortium’s first phase activities has been highly productive; directly and indirectly contributing to the strengthening of the research environment within the health higher education institutions of the country.

**THRiVE Consortium: a scientific platform conducive to research culture promotion**

**University Of Rwanda Headquarters**

Dr. Segenet Kelemu, an Ethiopian scientist, has been appointed the new Director General of icipe, taking over from Prof. Christian Borgemeister, who has been at the helm of the Centre for the past eight years. Dr. Kelemu becomes the fourth chief executive officer, and the first woman to head icipe. Prior to her appointment, Dr. Kelemu was the Vice President for Programmes at the Alliance for a Green Revolution in Africa (AGRA). She joined AGRA from the International Livestock Research Institute (ILRI), where she served as Director of the Biosciences eastern and central Africa (BecA). Previously, Dr. Kelemu was a Senior Scientist, and later the Leader of Crop and Agroecosystem Health Management, at the International Centre for Tropical Agriculture (CIAT) in Cali, Colombia. She has also worked as a researcher at Cornell University, and at Montana and Kansas State Universities, in the USA.
Evaluation and Learning: Process and lessons implementing THRIVE, a South-South and South-North Capacity Building Consortium

Achilles Katamba

Based on the Theory of Change approach and with guidance from RAND Europe (RAND), THRIVE used a logic modeling tool to identify inputs, activities or process, expected outputs, expected outcomes and impacts and develop an Evaluation and Learning (E & L) framework for THRIVE consortium. The framework requires partner institutions to collect both quantitative and qualitative data on an ongoing basis and through THRIVE secretariat at Makerere submit reports to RAND at agreed time-interval annually. The initial participatory manner between THRIVE partner institutions and RAND provided an opportunity to think systematically about the consortium elements, how they are interlinked, identifying areas that are interdependent, discovering potential gaps in processes to achieve THRIVE objectives and laying a framework of quantitative and qualitative indicators through which THRIVE progress can assessed.

As stated above, the process of developing the E & L framework and data collection tools was participatory and it was assumed that THRIVE African Partner Institutions (API) had the competency to collect complete data to inform E & L of THRIVE activities at partner institutions. Overtime, it was realized that institutional E & L reports were wanting and at the 4th Annual General Meeting (AGM), June 2012, icipe Nairobi Kenya, it was recommended that as a way of enriching the ongoing E & L exercise a team composed of members from THRIVE partner institutions visit API to collect information first hand regarding the progress of THRIVE activities at institutions and network level. The visits confirmed the assumption of under-capturing and consequently reporting of impacts of THRIVE. To address the gap in collecting E & L data, THRIVE at the 5th AGM organized a workshop facilitated by RAND to refresh on a Theory of Change led-evaluation and enhance the understanding of E & L and improve data collection. As institutions plan to integrate E & L in capacity building initiatives, it is worthwhile investing in developing capacity to conduct E & L and it should be augmented by visits to participating institutions.

One of the benefits emerging from E & L is using the data to inform program direction. For example, the inability of National University of Rwanda staff to obtain THRIVE PhD fellowships drove the institution to proactively mentor faculty in proposal and scientific writing which later led to 10 successful PhD fellowships supported by other funders. In terms of accountability, by collecting E & L data we were able to justify for funding provided by the Wellcome Trust and demonstrate achievements and challenges across THRIVE objectives. Although a number of lessons and achievements have been realized when implementing E & L, a several challenges have been encountered including: i) incomplete collection or submission of data by partner institutions; ii) inadequate understanding of E & L by staff; and iii) collecting data, writing reports, reflecting on what the data is telling us and using the information for program guidance requires time commitment. As a way forward there is need to train people, budget for resources and to constantly encourage implementers to pay attention to E & L.

RAND Facilitated E & L workshop of THRIVE partner Institutions at Makerere, July 13th 2013
Publications arising out of THRiVE funded Work


During her watch at BecA Hub, Dr. Kelemu used her passion for capacity building to lead the centre to tremendous growth in scope and depth. We anticipate that as she leads icipe, our contribution to THRiVE’s research and capacity building programs will benefit from her considerable experience, and commitment to excellence.

Dr. Kelemu has received many international accolades, including the prestigious Friendship Award granted by the People’s Republic of China for outstanding contributions to China’s economic and social development, TWAS Prize for Agricultural Sciences in 2011, and CIAT’s Outstanding Senior Scientist Award, for her numerous contributions to the Centre and its mission. Dr. Kelemu was also recently (2013) admitted to the membership of the African Academy of Sciences, together with Baldwyn Torto.