Dear reader,

Welcome to yet another edition of THRiVE News. We are delighted to share with you the amazing progress made by all THRiVE partner institutions in the region. Many institutions have grown stronger and have continued to thrive in their work. Just a snapshot view of what has been going on:

• Some institutions have acquired modern laboratory equipment and have set up state-of-the-art laboratories that will enable them carry out cutting edge research addressing current issues in health

• Some institutions conducted training in research methods and use of statistical packages for their staff to put them at a level where they can compare with the best in the world

• PhD Fellows wherever they are have embarked on their work with the level of and enthusiasm that characterizes winners; interactions between PLD and Post-doc fellows and mentors have been strengthened through both formal and informal activities

• Several researchers in the different institutions are creating more partnerships, bringing institutions even closer and creating synergies that foster sustainability of efforts.

• He visited Cambridge but failed to punt; Find out why and who he is!

There is a lot more for you in THRiVE News. We welcome comments, contributions and any other feedback on the issues addressed in this newsletter.

Prof. Nelson K. Sewankambo
THRiVE Director

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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. Prof. Florent Senyana, Rwanda
6. Dr. Val Snewin, Wellcome Trust
7. Dr. Elizabeth Bukusi, Kenya
8. Dr. Hassan Mshinda, Tanzania
9. Prof. Nelson K. Sewankambo, Director, THRiVE
10. Dr. Saidi Kapiga, Deputy Director
One by one, directors and representatives of the seven Wellcome Trust Research consortia arrived at the New Africa Hotel, in downtown Dar es Salaam; the largest city in Tanzania. This was the second time such a meeting was being convened. The first one was held in London, UK in October 2010.

Under the African institutions initiative, Wellcome Trust - a UK-based research funding agency is spending GBP 30 million to support 7 African research consortia with partners across 50 institutions in mainly Africa and UK for a period of 5 years. The initiative seeks to support the realization of a dynamic and vibrant health research environment in Africa, where the products of research foster development – both for the nations and the communities where the research is conducted.

Uganda’s Makerere University College of Health Sciences (MakCHS) is the lead institution for THRiVE (Training Health Researchers into Vocational Excellence), one of the Wellcome under the African institutions initiative. MakCHS is the lead institution for THRiVE (Training Health Researchers into Vocational Excellence), one of the Wellcome Trust’s African institutions initiative.

Cambridge Fellows Settle in as they Eagerly Embark on their Work

Mr. Kennedy Amone-P’Olak of Gulu University, who arrived in Cambridge in September 2011, gave a presentation about his research on mental health in war-affected Ugandan youth to an audience at the Centre of African Studies in November 2011. This was covered by a volunteer reporter from the Humanitarian Centre (a Cambridge-based network for international relief and development), who published an article about the presentation on various websites (see http://www.humanitariancentre.org/2011/11/uganda-new-approaches-to-research-on-the-effects-of-war-on-mental-health/). Ms Allen Kabagenyi (PhD Fellow at Makerere University) also was welcomed to Cambridge in November 2011 for a 3-week stay. Allen attended lectures in study design and data management at the Institute of Public Health, and presented her research at the Centre for African Studies in November 2011. Ms Allen Kabagenyi with mentor Dr. Alice Reid
The dream for a centralized molecular biology/bioinformatics facility at the Uganda Virus Research Institute (UVRI) has finally been realized and thanks to THRiVE and other capacity building partnerships. Four years ago, the establishment of a shared research facility at the UVRI campus was identified as a priority, and several strategies on how to finance it including international partnerships were considered. It was envisaged to operate as a multi-disciplinary laboratory providing specialized infrastructural capacity for molecular biology and bioinformatics applications. It is a set up with rooms where nucleic acid extractions, PCR-based DNA amplifications, electrophoresis, sequencing and bioinformatics analysis can be performed. This is a resource open to the entire campus research community and UVRI networking partners. When fully operational, it will bring about sharing and pooling of scientific expertise and equipment, resulting in reduced duplications and operational costs.

UVRI is a leading scientific research institution in Uganda and the region. However, from the late 1970’s to mid 1980’s research and infrastructure at UVRI deteriorated due to civil strife and interruption of international collaboration. The institute has since the late 1980’s been reversing this process through partnerships, like the THRiVE capacity building endeavor. The European and Developing Countries Clinical Trial Partnerships (EDCTP) and the International Association of National Public Health Institutions (IANPHI) funding allowed initial renovations and furnishings. The core facility then benefited from THRiVE funding, which in-turn has facilitated leveraging for more support possible from, EDCTP, IANPHI, The International AIDS Vaccine Initiative (IAVI), and the UK Medical Research Council (MRC), CDC, Makerere University Water Reed Collaboration (MUWRP) and Government of Uganda (GOU) among others.

THRiVE’s contribution to human resource and infrastructural capacity to the UVRI-Core labs is enormous. It includes provision of the following:

- Local Area Network (LAN) extensions for increased ICT capacity and laboratory space renovations
- Increased internet bandwidth to support enhanced bioinformatics applications
- Desktop computers and UPS’s
- Macintosh computers for specialized data analyses
- Bio-safety cabinets, Centrifuges and Freezers for nucleic acid extractions, reagents and sample storage
- PCR machine for nucleic acid amplifications
- U.V Trans-illuminator for PCR product gel viewing
- Nanodrop spectrophotometer for nucleic acid quantifications
- Sequencher DNA sequence analysis software
- Partial salary support to the lab technologist and senior scientist

The above platform greatly enhances UVRI’s capacity in molecular biology and bioinformatics research. It also
The UVRI-Core Labs: an Example of Successful Capacity Development Through Partnerships

facilitates information access, data management and storage. It is available to attached students, THRiVE fellows and collaborators. It also greatly contributes to UVRI’s mandate of carrying out health research and contributing to its future continuity across the region.

We are extremely pleased that the joint efforts of THRiVE and others have been effective in the facilitation of institutional capacity strengthening. This model of capacity building has been demonstrated to work.

Meanwhile, as a result of the THRiVE collaboration, we can report new partnerships with UVRI in the following ways:

1. Drs Jandouwe Villinger (icipe) and Josephine Birungi (UVRI) received a pump-priming grant to study “Developing molecular tools for studying the population biology of mosquitoes of genus Mansonia, a vector of arboviruses”. This collaboration also includes Jonathan Kayondo of UVRI and Dan Masiga of ICIPE as named collaborators.

2. UVRI hosted a PhD student (Martha Kaddumukassa), who is supervised by Dr. Charles Masembe (Makerere) and Charles Lutwama (UVRI). She was supported by a TWOS fellowship which enabled her to spend time at KEMRI and icipe.

3. UVRI participated in project proposal effort for submission to Wellcome Trust and NIH under the Human Heredity and Health in Africa (H3Africa) Initiative. In addition to other partners, the consortium involves UVRI.

DNA amplification on the Applied Biosystems GeneAmp 9700 PCR machine
By Emilio Ovuga

In building research capacity at southern member institutions of THRiVE, the Wellcome Trust recently permitted Gulu University to use its unutilized funds allocated to support senior lecturer time at Gulu for research by academic staff. Gulu utilized Uganda shillings thirty-five million to fund three research groups at the Faculty of Medicine. The three teams out of ten applicant groups received the grants through competitive bidding. The groups have now submitted their preliminary reports and are preparing to use their raw data at a data management and publications writing workshop. The authors will present full results and discussion of their findings after the training. Below is a synopsis of the researches:

Bacteriology and antibiotic sensitivity study

Dr Odongo Charles Okot and his colleagues conducted a sensitivity study of urine samples from 339 patients over a three month period at Gulu Regional Referral Hospital. The purpose of the study was to test the validity of current recommendations in the Uganda Clinical Guides (issue 2010) that uncomplicated urinary tract infections be treated empirically using amoxicillin or co-trimoxazole. The urine samples were collected from participants who complained of lower abdominal pains and dysuria at the hospital. The group cultured the urine samples and subjected bacterial isolates to sensitivity studies. The results indicated that culture from 41 samples (12%) yielded significant bacterial growth consistent with clinical findings for urinary tract infection. The commonest pathogens of concern were Staphylococcus species, Escherichia coli, Enterococcus species, Klebsiella species and Proteus species. Staphylococcal species caused majority of infections in this study which was rather surprising. The researchers report widespread resistance to the commonly used antibiotics including amoxicillin and co-trimoxazole. The results indicated good susceptibility of bacterial isolates to Gentamycin, Levofloxacin, Augmentin and Ciprofloxacin, all of which are expensive and out of reach of the rural residents of Gulu district. The authors made two conclusions; namely: that clinicians should be aware of this disparity and take it into consideration while prescribing empirically, and that in issuing future clinical guidelines, the health ministry should be mindful of the changing trends in bacterial sensitivity patterns.

Anemia among pregnant women attending antenatal clinics in Gulu and Hoima

Dr Obai Gerald and his colleagues conducted a comparative institutional-based study to determine the prevalence of anemia among pregnant women attending antenatal clinics at Gulu and Hoima Regional Referral Hospitals. The researchers report a prevalence of anemia among their research participants as 159/361 (44%) at Gulu Regional Referral Hospital and 116/386 (30.1%) at Hoima Regional Hospital. These rates are high in these rural districts of Uganda. Poverty is a significant risk factor for malnutrition and anemia that has been associated with significant morbidity and mortality among pregnant women and under-five children.

Availability and affordability of antimalarials in Gulu and Kitgum towns

Since malaria is a significant cause of morbidity and mortality in Uganda, Dr. Mshilla and his colleagues investigated the availability and affordability of the common anti-malarial drugs in pharmacies and drug shops in Gulu and Kitgum towns of northern Uganda. Preliminary results indicate that coartem, fansidar, oral quinine and parenteral quinine were the most widely available drugs in drug shops and pharmacies. However, patients considered coartem and quinine preparations as the best of the four anti-malarials in terms of their clinical outcome despite their being expensive. It appears from the available results that the availability of the preferred anti-malarial drugs is influenced by the preferences of both pharmacy and drug-shop owners as well as that of patients. A significant drawback of the results is the reported high refusal rate among pharmacy owners to participate in the study out of fear that they were being investigated for possible punitive action,
Institutions initiative. THRiVE is a programme that comprises 6 academic institutions in East Africa and Europe and three research institutes in Africa.

Objectives of THRiVE are:

a. Develop and sustain a consortium functioning as a strong network
b. Contribute to empowering institutions to build a critical mass of well-trained research scientists capable of winning competitive national and international grants
c. Augment the development of a conducive institutional environment for research and research training

d. Support systems for improved governance/management of research activities

At this four day meeting, Vice - Chancellors (VC’s) of participating African universities were invited. Consortia directors and VC’s took time to discuss the challenge of creating a dynamic and supportive research environment where researchers and trainees can thrive, and research topics are informed by real societal needs and where policies and structures are in place to translate research into development. The conferees also discussed how to ensure researchers are motivated to engage policy and decision makers, the media as well as the general public in the planning and delivery of research studies. In her remarks, Professor Lillian Tibatemwa-Ekirikubinza, the Deputy Vice - Chancellor for Academic Affairs at Makerere University noted that, “when these publics are engaged early, research topics chosen are more likely to respond to actual societal needs." She called on University Vice - Chancellors to support research by ensuring an enabling environment at their institutions and through their regional and continental associations, to lobby decision makers to provide more budgets to support translation of research into policy and into actual development programmes.

During the governance meetings between consortia directors and the Wellcome Trust officers, some best practices were highlighted. THRiVE was commended for its innovative arrangement where faculty are taking on short teaching assignments in other universities within the THRiVE consortium. The excellent and timely finance reporting as well as the Secretariat’s weekly network committee meetings where all THRiVE partners discuss updates on the programme at the different sites were also pointed out as good practices to be shared with other members of the Africa Institutions Initiative.

In order to strengthen synergies and learn from each other across the consortia, consortia directors proposed to share information on; training needs, grant calls, available vacancies, Data sets(publications, studies, data sharing policies), events and available short courses as well as best practices and lessons learned. Furthermore members felt that technologies, expertise, laboratories and equipment should be shared among the participating institutional partners. In line with this, deep sea sourcing, where a list of consortia partners’ profiles and those of their PhD and Post-doc students can be accessed online by all partners was proposed. This list will be used as database where members in the African institutions initiative can draw on each other’s expertise.
Personal experiences and progress as a THRIVE PhD Fellow

Humphrey D. Mazigo, Makerere University PhD THRIVE fellow

To me, THRIVE means “turning dreams into reality” and to realize these dreams requires self-motivation, sacrifice, commitment, tolerance and hard work. A number of challenges may arise during the PhD registration process at Makerere University and as student, you need to learn how to overcome them in time and move forward. Importantly, the process requires tolerance, learning how to take and respond to positive and negative comments from reviewers. Learning various strategies from ongoing PhD students and working in close tie with supervisors is very helpful.

Developing, implementing and respecting the Personal Development Plan (PDP) is an initial step for meeting the objectives and time keeping for doctoral program. My experience in the past 8 months following up the registration process at Makerere University; I have realized that as a student you need to learn to manage your time very well; the earlier you submit your documents i.e. concept paper or full proposal for review and ethical clearance, you stand a high chance of meeting the PDP set-up plans. In fact as a student you need to be self-motivated and an initiator of each and every step concerning the doctoral registration process.

For the IRB submission, follow the stipulated guidelines and when writing the full proposal be focused on your topic and the specific objectives of the study. The more you make the proposal clear and well understood, expect less criticism from reviewers and the less the time you will take to clear the documents to the next step. Learning experiences from ongoing PhD students at the university is important; this was the advice of one PhD student, Dr. Vincent Batwala, “Revise the presented concept within a short period of time and resubmit it back to IRB and while waiting for the IRB decision and recommendation for provisional registration, develop a full proposal, submit to supervisors and then submit it to IRB immediately after receiving provisional registration. Don’t relax during the one year of provisional registration.”

Support from the supervisors in Uganda, Great Britain and NIMR Mwanza has been excellent. Their prompt response has made me progress this far within 8 month of the scholarship. For the Northern institute, not only does Prof. David W. Dunne support me as a supervisor but I also receive support from other members of the Schistosomiasis Research Group (SRG) at the University of Cambridge. Dr. Angela Pinot de Moira has especially been very supportive in developing study tools. To show their commitment to my PhD project, Dr. Angela and Prof. Dunne will be visiting the study sites in Mwanza in November 2011.

What next as the 1st year of the scholarship comes to an end in February 2012? In October 2011, I received Approval Letter from Makerere University School of Public Health IRB with subsequent recommendation for PhD full registration at the School of Graduate Studies, Makerere University. Towards the end of October 2011, the project received ethical clearance certificate from the Lake Zone Institutional Review Board under National Health Research Ethics Review Committee, Tanzania and data collection started in February 2012.

I think at this point, my PDP continues to THRIVE.

Cambridge Hosts Dr. Kennedy Amone P’Olak from Gulu University

Dr Kennedy Amone P’Olak who arrived in Cambridge for his post-doctoral fellowship September 2011 and progressed smoothly with his program with the kind support of Dr Pauline Essah and Prof. David Dunne, and his Cambridge mentors, Dr Tim Croudace and Dr Rosemary Abbott and Dr Richard Meiser-Stedman. Dr Amone P’Olak made a presentation about his work at the Department of Developmental Psychiatry and gave a talk at the Centre of African Studies in Cambridge. Together with Dr Pauline Essah, Dr P’Olak had a film shoot for the Humanitarian Centre in Cambridge. An in-depth interview was carried out with the Humanitarian Centre about the work of Dr P’Olak with war-affected youth in Uganda. Dr P’Olak attended the World Mental Health Congress in Cape Town, South Africa and learnt a lot about what is going on in the field and met many congress participants who are very eager to learn more about work in northern Uganda.

Kennedy hopes to submitted his first article based on the data collected in Gulu.

Dr. Amone P’Olak
was adopted from the THRiVE goal of “training health researchers into vocational excellence”. The participation of members of other faculties and administration was justified by a) the unique status of Gulu University as an upcoming young institution that needed support in building “a critical mass” of its staff in administration, research and teaching b) improving the administration of research in all faculties and institutes at the university and c) contributing to the development of electronic management and financial tracking system at the institution. What remains now is for the institution to put into practice the knowledge, skills and experience of all participants that benefitted from the training.

Gulu Conducts SPSS Training

By Emilio Ovuga

The Gulu University THRiVE Institutional Implementation Committee organized a much welcome training for Gulu University staff in the use of SPSS (Statistical Package for Social Scientist) for data analysis. The purpose of the training conducted by Gillaw Consultants in Gulu was to a) equip the staff with skills to analyze research data b) build confidence in academic staff in the conduct and management of research c) increase high quality and successful research outputs (more publications in refereed journals) from Gulu University and d) contribute to the growth and reputation of Gulu University internationally. Forty course participants who completed the five-day course in full came from all faculties. The theme of the workshop was:

Gulu Conducts SPSS Training

By Amos Olal-Odur

THRiVE COMPETITIVE GRANTS

By Amos Olal-Odur

As suggested in the name, the THRiVE Consortium was established to nurture health researchers into vocational excellence. To achieve excellence in research, a number of competitive small grants were established. They are: Master’s fellowship research grant, pump-priming grant, equipment grant, and mini-sabbatical grant. The objectives of each of the small grants will be explained below.

The Education and Small Grants Committee (ESGC) of THRiVE is charged with the responsibility of administering these small grants.

1. Master’s Research Grant
The objective of this grant is to enhance the quality of Master’s theses in health related areas such that the manuscripts arising therefrom can be submitted to peer-reviewed journals for publication. This grant is intended to assist Masters degree students carrying out their researches in health related fields to conduct high quality research and write up high quality Master’s theses.

The Education and Small Grants Committee prepared the call and arranged for it to be published. The Committee also identified the reviewers for the applications.

The first call for this grant was published at the beginning of 2011 and by the end of March 2011, 55 applications had been received. The applications were reviewed by three experts who scored the applicants and made comments on the applications. 13 applicants were selected for this offer and embarked on their research work.
## THRiVE COMPETITIVE GRANTS

### Recipients of the THRiVE Masters Research Fellowships

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<th>Name</th>
<th>Institution</th>
<th>Title of Proposals</th>
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<tr>
<td>Ms. Agnes Nyabigambo</td>
<td>Makerere University</td>
<td>Determinants Affecting Utilisation of Transitional Clinic Services at Infectious Diseases Institute, Mulago.</td>
</tr>
<tr>
<td>Mr. Robert Shao Elichilia</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Prevalence of HIV-1 Subtypes and Mutations with known associations to Antiretroviral Therapy Resistance among Infants in Northern Tanzania</td>
</tr>
<tr>
<td>Mr. Charles Kabugo</td>
<td>Makerere University</td>
<td>Prevalence and factors associated with tuberculosis IRIS among HIV positive patients on HAART in Masaka Regional Referral Hospital.</td>
</tr>
<tr>
<td>Mr. Boniface Richard</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Introducing Compulsory Community Health Fund; Views from the Stakeholders: In Liwale District (Lindi Region) Tanzania</td>
</tr>
<tr>
<td>Mr. Ladislas Bizimana</td>
<td>National University of Rwanda</td>
<td>The Use of HIV Post Exposure Prophylaxis in Kigali</td>
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<tr>
<td>Mr. Moses Elaju</td>
<td>Makerere University</td>
<td>Mortality among Cardiac Patients awaiting surgery at Uganda Heart Institute and factors associated with it.</td>
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<tr>
<td>Mr. Moses Ringo</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Prevalence of Risk Factors for Selected Non Communicable Diseases among Adults in Ilala, Dar es Salaam, Tanzania.</td>
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<tr>
<td>Mr. Seth Chekata Inzaule</td>
<td>Makerere University</td>
<td>Frequency, Reasons and Factors Associated with Antiretroviral Treatment Switch/Discontinuation among HIV Infected Patients in Western Kenya.</td>
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<tr>
<td>Ms. Dinah Amongin</td>
<td>Makerere University</td>
<td>Effects of recurrent pregnancies among HIV positive women followed up in the MTCT-Plus programme in Uganda: a retrospective cohort study.</td>
</tr>
<tr>
<td>Ms. Elizabeth Lyimo</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Differential effect of bonding and bridging social capital on self-rated risk behavior for HIV infection among secondary school students.</td>
</tr>
<tr>
<td>Ms. Ritah Nakiboneka</td>
<td>Makerere University</td>
<td>Characterising functionality of broadly cross-reactive HIV 1 Specific epitopes.</td>
</tr>
<tr>
<td>Ms. Utamuliza Mathilde</td>
<td>National University of Rwanda</td>
<td>The Impact of the Palliative Care Services in Kibagabaga District Hospital, Rwanda.</td>
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### THRiVE COMPETITIVE GRANTS

**Recipients of the THRiVE Masters Research Fellowships**

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<th>No.</th>
<th>Name</th>
<th>Institution</th>
<th>Research Topic</th>
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<tr>
<td>13.</td>
<td>Dr. Caspar Male</td>
<td>Makerere University College of Health Sciences</td>
<td>Therapeutic role of oral water soluble contrast media in management of patients with adhesive small bowel obstruction undergoing conservative management</td>
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<tr>
<td>14.</td>
<td>Dr. Martina Nanteza</td>
<td>Makerere University College of Health Sciences</td>
<td>Prevalence of oral lesions and their association with CD4+ count among HIV positive patients in Hoima District.</td>
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<td>15.</td>
<td>Dr. Musa Odongo</td>
<td>Makerere University College of Health Sciences</td>
<td>Prevalence, intensity of infection and risk factors of soil transmitted helminth infections in preschool age</td>
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<td>16.</td>
<td>Dr. Ronald Kintu Luwaga</td>
<td>Makerere University College of Health Sciences</td>
<td>Serum lactate and phosphate as markers of intestinal ischaemia among patients with mechanical intestinal obstruction in Mulago Hospital</td>
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<td>17.</td>
<td>Dr. Theoneste Rubanzabigwi</td>
<td>National University of Rwanda</td>
<td>Assessment of vasectomy outcome in Musanze District regarding follow-up, complications, satisfaction and pregnancy prevention</td>
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<td>18.</td>
<td>Mr. David Nzeyimana</td>
<td>National University of Rwanda</td>
<td>Understanding the use of healthcare services among low income genocide survivors: a cross-sectional analysis for both urban and rural residents</td>
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<tr>
<td>19.</td>
<td>Mr. Juma Magambo John Morigo</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Envelope sequence diversity and the development of broadly neutralizing antibodies in chronically hiv-1 infected individuals from rural Uganda</td>
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<tr>
<td>20.</td>
<td>Ms. Lucille Lyaruu</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Aedes species of medical importance species distribution in Northern Tanzania</td>
</tr>
<tr>
<td>21.</td>
<td>Mr. Martin Lukindu</td>
<td>Makerere University</td>
<td>A synergy of population genetics, ecology and behaviour of arboviral vector aedes africanus, a proacti</td>
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<tr>
<td>22.</td>
<td>Ms. Harriet Rachel Kagoya</td>
<td>Makerere University College of Health Sciences</td>
<td>Awareness, responsiveness and practice of patients' rights at public health facilities in Uganda: a case of Mulago Hospital</td>
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<tr>
<td>23.</td>
<td>Ms. Jane Januarius Rogathi</td>
<td>Kilimanjaro Christian Medical College</td>
<td>Association between nutrition and childhood epilepsy in Tai District, Kilimanjaro Region, Tanzania</td>
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<tr>
<td>24.</td>
<td>Ms. Josephine Akellot</td>
<td>Makerere University College of Health Sciences</td>
<td>Effect of parental involvement, social support and self-esteem on academic skills of deaf children</td>
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<tr>
<td>25.</td>
<td>Ms. Josephine Nalusiba</td>
<td>Makerere University College of Health Sciences</td>
<td>Prevalence and factors associated with pulmonary tuberculosis among adults in fishing communities of Lake Victoria, Uganda</td>
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<tr>
<td>26.</td>
<td>Ms. Lydia Namuyimba</td>
<td>Makerere University College of Health Sciences</td>
<td>Assessment of the nutrition status in patients with chronic kidney disease in Mulago Hospital.</td>
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<tr>
<td>27.</td>
<td>Ms. Prossy Namuwulya</td>
<td>Makerere University College of Health Sciences</td>
<td>Determining and characterizing the circulating rubella genotypes in Uganda</td>
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</tbody>
</table>


2. **Pump-priming Grant**

These are grants competitively awarded to researchers of THRiVE member institutions for the development of joint research proposals involving at least two partner institutions. The grants are meant to enable researchers to collect relevant preliminary data.

The objectives of the pump-priming grants are to:

- a) Foster collaboration among thrive institutions and staff;
- b) Encourage the sharing of specialized tools and expertise;
- c) Encourage the production and submission of joint proposals for research funding; and
- d) Provide resources to develop new research ideas and proposals for funding.

THRiVE has planned to award pump-priming grants to about 20 groups of researchers.

The first call for the pump-priming grant was made and it attracted 19 applications.

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**Table showing the 1st set of pump priming grants awarded by THRiVE**

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<th>Name (s) of Co-Principal Investigator (s)</th>
<th>Title of the Proposal</th>
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<td>Dr. Steve Cose from Uganda Virus Research Institute (UVRI)</td>
<td>Dr. Lukande from Makerere University College of Health Sciences (MakCHS)</td>
<td>A Pilot Study to Examine Human Tissue-specific Immune Responses to Mycobacterium Tuberculosis directly ex vivo</td>
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<tr>
<td>Dr. Catherine Abbo (MakCHS)</td>
<td>Prof. Ovuga &amp; Dr. Akello from Gulu University (GU)</td>
<td>School Mental Health Psychosocial Competence in Adolescents in Selected Secondary Schools in Uganda</td>
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<tr>
<td>Dr. Joel M. Francis from National Institute for Medical Research (NIMR), Mwanza, Tanzania</td>
<td>Dr. Nyombi from Kilimanjaro Christian Medical College (KCMC), Moshi, Tanzania</td>
<td>Development of Laboratory Capacity and Validation of Biomarkers for Alcohol Use in Northwestern Tanzania</td>
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<tr>
<td>Dr. Noah Kiwanuka (MakCHS)</td>
<td>Dr. Kamali (UVRI)</td>
<td>Assessing the Suitability of Fishing Communities around Lake Victoria, Uganda as Potential HIV-1 Vaccine Efficacy Trial Population- A Preparatory Study</td>
</tr>
<tr>
<td>Dr. Harr F. Njai (NIMR)</td>
<td>Dr. Andreason from London School of Hygiene and Tropical Medicine (LSHTM); Dr. Balthazar and Dr. Boniface (KCMC)</td>
<td>Setting up of a Cost-effective Human Immunodeficiency Virus (HIV) Viral Load Assay: A Quality Control Measure to Complement the New HIV Sequencing Facility in NIMR, Mwanza</td>
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<tr>
<td>Dr. George PrayGod (NIMR)</td>
<td>Dr. Torok from University of Cambridge (UC)</td>
<td>Epidemiology of Severe Pneumonia in Children Below 5 Years: A Pilot Study in Mwanza, Tanzania</td>
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<td>Dr. Jandouwe Villinger from International Centre of Insect Physiology and Ecology (ICIPE)</td>
<td>Dr. Birungi &amp; Dr. Kayondo (UVRI)</td>
<td>Developing Molecular Tools for Studying the Population Biology of Mosquitoes of Genus Mansonia, A Vector of Arboviruses</td>
</tr>
<tr>
<td>Dr. Chris Parry from Medical Research Council (MRC)/UVRI</td>
<td>Dr. Temu &amp; Dr. Andreason (NIMR)</td>
<td>Genotypic and Phenotypic HIV Drug Resistance Capacity Building in East Africa</td>
</tr>
<tr>
<td>Prof. Raimos Olomi (KCMC)</td>
<td>Dr. Kiguli (MakCHS), Dr. Olupot of Mbale Hospital in Uganda &amp; Dr. Mtow (NIMR)</td>
<td>A Pilot Study to Determine the Diversity of Invasive Bacterial Disease in Children Presenting with Severe Febrile Illness in Tanzania and Uganda</td>
</tr>
<tr>
<td>Dr. Rachael Manongi (KCMC)</td>
<td>Dr. Brooker (LSHTM)</td>
<td>The Influence of Hospital Access on Childhood Mortality: A New Collaboration between LSHTM and KCMC</td>
</tr>
</tbody>
</table>
The THRiVE Secretariat sent summaries of the comments made by the independent reviewers to the applicants who were not selected for these awards advising them either to improve on the existing proposals and submit or prepare fresh ones for the next call.

Since the funds for the grants had not yet been exhausted, another call was published with the deadline of 27th September 2011. 14 applications were received following this second call and they have been sent for review. Out of the 14 applicants, 4 have been selected for the award of the grants; another 4 were requested to revise and resubmit their proposals which they have done and are being reviewed again now. Six were not recommended for the award of the grants and they have received communication to that effect.

The table below provides the names and titles of the proposals for the four successful applicants of the second call for the pump-priming grants:

### Recipients of the THRiVE Pump Priming Grants (2nd Call for Proposals)

<table>
<thead>
<tr>
<th>Names of PI</th>
<th>Names of Co-Investigators</th>
<th>Title of Proposal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Grace Akello-Ayebare (Gulu University)</td>
<td>Denis Anywar, GU, Prof. Grace Ndeez, MakCHS, Catherine Abbo, MakCHS Freddie Bwanga, MakCHS</td>
<td>School Children as Agents of Change for Risk Behaviours Exposing them to Schistosomiasis</td>
</tr>
<tr>
<td>Dr. Achilles Katamba (MakCHS)</td>
<td>Gerald Obai, GU, Eng. Priscilla Nakiboneka, MOH UG Bruce J Kirenga, MakCHS</td>
<td>Nosocomial Tuberculosis Transmission: Adequacy of Airborne Ventilation in Patient-Care Areas in Gulu and Makerere Teaching Hospitals, Uganda</td>
</tr>
<tr>
<td>Dr. Erisa Mwaka Sabakaki (MakCHS)</td>
<td>Dr. Kitara David Lagoro, GU</td>
<td>An Analysis of Musculoskeleton Disorder Risk among Ugandan Nurses</td>
</tr>
<tr>
<td>Dr. Norber Tmbain ICIPE</td>
<td>Patrick P’odyek Abila, GU</td>
<td>Identification and Development of new Attractants that can Improve the Performance of Bait Technology to Control Glossina Fuscipes Fuscipes, the Main Vector of African Human Trypanosomosis</td>
</tr>
<tr>
<td>Dr. Isaac Okullo (MakCHs)</td>
<td>Dr. Felix Kaducu, Gulu University</td>
<td>The Rate of Latent Tuberculosis Infection among Paramedical Students in Uganda</td>
</tr>
<tr>
<td>Dr. Pontiano Bayo Gulu University</td>
<td>Dr. Emmanuel Ochola, Lacor Hospital, Gulu, Dr. Caroline Oleo, Gulu University, Dr. Amos Deogratius Mwaka, MakCHS</td>
<td>Hepatitis B Virus Infection among Pregnant Women in Gulu: Prevalence, Infectivity and Associated Factors</td>
</tr>
</tbody>
</table>
THRiVE COMPETITIVE GRANTS

3 Equipment Grant
In April, 2011, THRiVE advertised the call for equipment grants which was prepared by the Education and Small Grants Committee.

The purpose of the equipment grant is to support research conducted by the staff or students of THRiVE Institutions in Africa particularly the ones funded by the THRiVE PhD and Postdoctoral fellowships.

Six applications were received following the call made. Expert reviewers evaluated the applications and recommended them for funding. 5 of the selected candidates have received the funds while the sixth one has been requested to utilise the money which had previously been allocated to him for equipment before additional funding, if still required for equipment, is awarded to him.

The recipients of the equipment grant are indicated in the table below.

<table>
<thead>
<tr>
<th>Name</th>
<th>Items to be Procured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sabina Wangui Wachira - International Centre of Insect Physiology and Ecology (ICIPE), Kenya</td>
<td>Insect Growth Chamber</td>
</tr>
<tr>
<td>Robert Lukande- Makerere University College of Health Sciences (MakCHS), Uganda</td>
<td>A Binocular Microscope, a Rotary Microtome, a Paraffin Wax Dispenser, and a Hot Air Oven</td>
</tr>
<tr>
<td>Reginald Kavishe - National Institute for Medical Research (NIMR), Mwanza, Tanzania</td>
<td>A Gel Electropheresis, a Multidispenser Pipette, ELISA</td>
</tr>
<tr>
<td>Josephine Bwogi - Uganda Virus Research Institute (UVRI), Uganda</td>
<td>A Thermal Cycler and the Servicing Agreement</td>
</tr>
<tr>
<td>Florida Muro - Kilimanjaro Christian Medical College (KCMC)</td>
<td>Laboratory Equipment, a Computer and Ancillary</td>
</tr>
</tbody>
</table>

The recipients of the equipment grant are indicated in the table below.

4. Mini-sabbatical Grant
This is yet another grant instituted by THRiVE, the purpose of which is to enable a staff member involved in teaching or research at one of the African THRiVE Institutions to spend up to six months working with another scientist in one of the other partner Institutions.

The objectives of this grant are:

a) To foster collaboration between individuals and sites;
b) To facilitate access to specialized tools and processes;
c) To encourage sharing of expertise;
d) To encourage the production and submission of joint proposals; and

e) To provide resources to develop new ideas and proposals.

Following a call made, one applicant, Mr. Mathew Lukenge from Uganda Virus Research Institute (UVRI), Uganda, received the first award of the mini-sabbatical grant. He will have a hands-on training in the isolation and identification techniques of entomopathogenic microbes at International Centre of Insect Physiology and Ecology, Kenya.

One application was received after the second call was published. The applicant who was awarded the grant is Dr. Joel M. Francis from NIMR. The grant will facilitate his three-month study visit to the London School of Hygiene and Tropical Medicine (LSHTM) where he will develop a research proposal on the epidemiology of alcohol use and alcohol use disorders among young people.

ESGC has planned to publish more calls for the small grants in future.

Recipients of the THRiVE Mini Sabbaticals

<table>
<thead>
<tr>
<th>Names of PI</th>
<th>Title of Proposal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Joel M. Francis National Institute for Medical Research (NIMR)</td>
<td>The epidemiology of alcohol use and alcohol use disorders among young people and their contribution to sexually transmitted infections including HIV and their economic impact in northern Tanzania</td>
</tr>
<tr>
<td>Mr. Mathew Lukenge Uganda Virus Research Institute</td>
<td>Hands-on training in isolation and identification techniques of entomopathogenic microbe</td>
</tr>
</tbody>
</table>
Cambridge Fellows Settle in as they Eagerly Embark on their Work

and had meetings with her Cambridge Mentor (Dr Alice Reid of the Department of Geography), to discuss her PhD research plan and progress.

THiVE in Cambridge is also very pleased to welcome Dr Sabina Wangui Wachira (THiVE postdoctoral fellow at icipe, Kenya) into the Cambridge family. Sabina is now being mentored by Dr David Spring of the Department of Chemistry at the University of Cambridge.

To balance the visits from East Africa to Cambridge, Professor David Dunne (Director of the THiVE Programme in Cambridge) and Dr Angela Pinot de Moira (a Research Associate in Professor Dunne’s Schistosomiasis Research Group in Cambridge) also visited Professor Dunne’s THiVE Mentee (Dr Humphrey Mazigo of Makerere University and NIMR - Mwanza) in Tanzania in November 2011. They met and interacted with Humphrey and his local PhD Supervisors, discussed the PhD project, and visited the sites where Humphrey is conducting his field study on HIV-schistosomiasis co-infections.
Cambridge Fellows Settle in as they Eagerly Embark on their Work

Although not physically present in Cambridge, Dr Amos Mwaka (THRiVE PhD Fellow at Makerere University, researching cancer care in Uganda) also gave a presentation (via video link) at the ‘Cambridge Post-UN summit on Non Communicable Diseases and Mental Health in Developing Countries’ in January 2012.’ This generated more publicity for THRiVE, and highlighted the need for more collaboration between researchers in Cambridge and Africa. The findings from this conference were also presented to Members of Parliament (belonging to the International Development Committee) at a reception at the Houses of Parliament in London, UK. The Cambridge Coordinator represented THRiVE at this event. (See http://www.humanitariancentre.org/2012/01/ncds-mental-health-in-developing-countries-policy-recommendations-following-cambridge-conference/ for the conference presentations, slides and recommendations.)

It was not all about ‘research training’ for the THRiVE Fellows visiting Cambridge, though. We also organised a Formal Hall dinner in Wolfson College in November 2011. (This is more elaborate three-course dinner in Hall with wine and waiter service, and requires smart attire and a gown.) The dinner was well attended by Cambridge Committee Members, Mentors and Visiting African Fellows. It was great to see Kennedy and Allen embrace the Cambridge tradition of wearing black gowns to such formal dinners (see photographs), and they appeared to enjoy the sounding of gongs to announce the start and end of dinner. We now look forward to introducing the next set of THRiVE Fellows visiting Cambridge in 2012 to more of these memorable Cambridge traditions and conventions.

Members of the Cambridge THRiVE Cambridge Mentors/Advisors, and East African fellows visiting the University of Cambridge for training and mentorship attended a formal Hall in Wolfson College in November 2011.
By Moses Galukande

Preparing to visit Cambridge was amidst a frenzy of activities, so there was a palpable level of nervousness arising from the thought that I may have missed an entire or a part of a vital mail and therefore find myself ill-prepared or face unpleasant surprises upon arrival at UK immigrations or at Cambridge.

The travel was uneventful until I was in Cambridge and got into a cab to Hinxton a 25min drive. It’s the cab driver that added some color to that journey albeit at the end. He was a PhD holder but don’t ask why he was doing cab driving. He was rather chatty and we talked about; Uganda, Amin, Africa’s economy, causes of disease, the role of genes, death and the purpose of life. I must add that he said was building a boat and he showed me a picture on his i-phone; the purpose of the boat was to use it for preaching the Gospel. At this point we had stood outside the Sanger conference hall offices for long enough for ‘security’ to come over and inquire what was going on. At this point we exchanged business cards and bade each other fare well.

I checked in at the front desk and was directed to my room which I ended up sharing with a pleasant bloke from Oxford. An apple and a cup of tea sufficed since it was late to order for dinner. I stayed over a total of 7 days. Over 50 presentations were made at the Genomics meeting I attended as one part of my Cambridge agenda, it was an overkill since my only intention was rather modest; to first understand the basics of genomics. I did a presentation too which surprisingly attracted a number of inquiries, perhaps partly because it was the only one from Africa, it was about breast cancer and half the participants were women. At the end of the conference, we had an evening of a sumptuous dinner preceded by a walk and punting at the famous river, but I did not punt because the weather then wasn’t particularly inviting.

Apart from rediscovering that the UK is an expensive place to live with Bed & Breakfast going for £66 to 95 at Cambridge, there were some more pleasant findings; my Cambridge UK Supervisor Prof. Andy Futreal is brilliant and is the most pleasant collaborator I have ever met and exceedingly supportive about my project. Every minute with him was well spent and I anticipate a lot of learning and success with him and all others he introduced me to.

Sanger Institute is extremely well resourced; perhaps I wouldn’t have found a better place. I visited Pauline and Prof. David Dunne at Cambridge City Center; both were very helpful and made me feel at home and we had a pleasurable chat while at their office.

The last two days I was joined by family; we did some site seeing. I also visited Addenbrookes’ hospital and met with Prof Caldos and learnt about his breast cancer work and the opportunities there for me. The challenge of cost of living will be eased now that I am a visiting scholar at Wolfson College. The accommodation should cost me half of what the market value is, but even then all those who intend to go there and stay for some time may need extra funding. I look forward to visiting again and this time to throw myself in the deep end of the gene sequencing world.