

CARTA News

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CARTA vice chancellors meet in Nairobi



CARTA was represented by its co-directors, Prof. Sharon Fonn, Dr. Alex Ezeh and the CARTA secretariat. Other participants were from the University of Nairobi, heads of CARTA's partner research institutions, CARTA's northern partner institutions, the Kenyan Ministry of Higher Education and the Commission for University Education.

By Eunice Kilonzo, CARTA communications officer.

Prof. Peter Mbithi, the vice chancellor of the University of Nairobi (UoN), hosted the CARTA 2nd Vice Chancellors' meeting on 10-11 July in Nairobi, Kenya.

Speaking to the more than 70 participants from eight universities across sub-Saharan Africa, Prof. Mbithi in his opening remarks warned that the risk of failure to achieve development goals was substantial "if Africa does not invest in quality research."

The conference provided an opportunity for university representatives to reinforce their commitment to advancing Africa's research and graduate training capacity, while also sorting through the most appropriate ways to increase investment. One idea was to take the investment case directly to heads of state and government, to urge more direct domestic investment for research and multi-university collaboration. Stronger research capacity in universities, Prof. Mbithi added, translates to intellectual capital that can address problems specific to Africa among other benefits.

Prof. Mbithi used the example of the University of Nairobi's own efforts to promote partnership and collaboration as a way to improve graduate training and research. The university has broadened the scope of opportunity available to its graduate students, and is helping to ensure that UoN researchers are contributing to the body of evidence in various disciplines. This is through collaborative ventures such as patent protection and licensing, or formal mentorship programs with industry whether with private sector firms or other institutions.



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The University of Nairobi senate members attended the meeting's morning session as Prof. Mbithi wanted to afford them the opportunity to understand CARTA and the work it does in training African scholars and researchers.

Prof. Chacha Nyaigotti-Chacha, the board chair for the Commission for University Education, delivered the keynote address on behalf of Kenya's Education Cabinet Secretary Dr. Fred Matiang'i. He noted that professors and academics have changed their priorities and are instead focused on publication and not on learners. Further, underfunding of universities meant that the academic environment is not living up to its true potential.

Prof. Nyaigotti said: "I wish CARTA well and request the consortium to work together with CUE to improve the quality of university education particularly in postgraduate training so that Africa can produce great scholarly outputs and minds."

Prof. Sharon Fonn, CARTA co-director, discussed CARTA role and aim to build a critical mass of PhDs. She highlighted how CARTA offered three grants to three universities (Obafemi Awolowo University, University

of Rwanda and Makerere University) to specifically institutionalize useful aspects of CARTA at their home universities. The institutionalization involves digitization of the CARTA curriculum. Partner institutions pledge to allow staff the time to participate in CARTA activities. Universities are also requested to commit to paying full salaries of staff on PhD fellowship, reduce the workload of staff on research projects, and waive fees.

Her presentation highlighted how CARTA has to date supported 175 scholars, of whom nearly 40 have completed their PhDs. These fellows have produced nearly 530 peer reviewed publications and raised nearly US\$5million in grant funding as principal investigators for their own research. She challenged participants at the meeting to find ways to best secure the future of CARTA graduates and increase research output and quality in their home institutions.

The anchor of the two days of discussions was the need to develop an investment case for domestic funding for university graduate leadership programs.

CARTA co-director Dr. Alex Ezeh—APHRC former executive director—presented his thinking on "Rethinking Doctoral

Level Training in African Universities: The Comparative Advantage of CARTA." He shared data from an independent evaluation done in 2015 that showed that CARTA was a model for doctoral training in low and middle income countries. The evaluators recommended to the Swedish International Development Cooperation Agency (SIDA)—who had commissioned the study—explored how they can support CARTA further.

The VCs' meeting further deliberated how to best institutionalize improvements in doctoral training at Africa universities. The VCs shared interventions that are being pursued at their various institutions to institutionalize CARTA programs.

On the evening of the first day of the meeting, a wider audience, including embassy staff, donors and researchers were invited to a cocktail reception. Prof. Göran Bondjers, from the University of Gothenburg—one of CARTA'S Northern partners—reflected about CARTA and its international relevance. "Africa is in the forefront in efforts to increase the quality of research training, CARTA is an innovation that is relevant not only for Africa but for Europe as well."

APHRC's new executive director



 Dr. Catherine Kyobutungi was previously APHRC's Director of Research.

Dr. Catherine Kyobutungi, distinguished epidemiologist and research leader, is the African Population and Health Research Center's next executive director. She has held several leadership roles over the past decade at APHRC. She assumed the role in October 2017. Her appointment was announced by the organization's Board of Directors on 21 July, 2017.

"It is deeply satisfying to search the world for the best candidate to lead APHRC into its next

chapter and to find her among the Center's most respected leaders. From its earliest days, APHRC has been dedicated to engaging exceptional African researchers and global leaders in using evidence to improve lives. Catherine is a stellar example of the Center's success in doing so," said Tamara Fox, chair of the APHRC Board of Directors. "The board is very much looking forward to working with her in this new role."

Dr. Kyobutungi succeeds Dr. Alex Ezeh, who has led APHRC for 18 years. "Under Alex Ezeh's exceptional direction over the past 18 years, APHRC grew from an incredible idea to an institution that has earned the respect of everyone it touches. It feels woefully inadequate to say how deeply grateful the board is for Alex's dedication and tireless work to create a place where some of Africa's most esteemed and most promising researchers can thrive," said Tamara Fox.

"It is impossible to imagine a better person to take APHRC into its next phase than Catherine," said Dr. Ezeh. "Her skills as a researcher, a manager, a mentor, and a leader

have been part of APHRC's culture and success for many years, and she will now have the chance to put her stamp on the Center's continuing successes."

Dr. Kyobutungi shared: "It is a great honor to be selected as APHRC's next executive director. Amplifying the voices of African scholars and building research capacity in the region have been my life's work, and this opportunity to guide APHRC is a chance to work with an exceptional group of colleagues and the board to continue bringing African voices and leadership to the fore."

Dr. Kyobutungi holds a MBChB from Makerere University in Uganda, and both a MSc in Community and Health Management and a PhD in Epidemiology from the University of Heidelberg in Germany. She served as a Medical Officer at Rushere Hospital in Mbarara District, Uganda, and Medical Officer in Charge of the Mbarara Municipality Health Sub-district. She was also an assistant lecturer and lecturer in the Department of Community Health at Mbarara University of Science and Technology in Uganda.

CARTA fellow named vice dean

CARTA Cohort 4 fellow Boladale Mapayi has been appointed the vice dean of the Faculty of Clinical Sciences at Obafemi Awolowo University, Nigeria. The PhD fellow, a senior lecturer in the institution's Department of Mental Health and a clinical psychologist, was appointed to her new role on 1 July, 2017. Shortly after sharing the announcement, Dr. Mapayi said: "I thank CARTA for being a major stakeholder in my success story. The leadership skills training are coming in handy. Great job CARTA team."



CARTA PhD at University of Rwanda

Dr. Francois Niragire, CARTA Cohort 1 fellow, has been added to the list of PhD holders at the University of Rwanda. This followed the successful defense of his doctoral research thesis on 31 July, 2017 titled "Spatial Modelling of the Relationship between HIV Prevalence and Determinants of Child Mortality in Rwanda". His PhD research sought to assess the factors through which the HIV/AIDS epidemic influenced child mortality trends in Rwanda, and pathways by which its overall impact was circumvented during the study period.

Inaugural CARTA institutionalization awards

Obafemi Awolowo University (OAU), Makerere University and University of Rwanda have each been awarded US\$100,000 to incorporate CARTA practices at their respective institutions. These inaugural awards will institutionalize aspects that strengthen and sustain PhD training, build research-supportive environments, and accelerate high-quality research activity such as supervision, mentorship, faculty

visits and improved administration in African institutions.

The awards are meant to support CARTA's African partner institutions to mainstream and institutionalize proven and tested innovations with a strong emphasis on documentation of experiences and lessons learned. Some of the tested and effective innovations that will be adopted by awardees include faculty and staff training and interactions with VCs.

Only one application per University is permitted and applications were received through university, faculty, and school or department level. The grants were awarded on a competitive basis and proposals were evaluated on the basis of relevance, replicability, methods and track record. By applying for these awards, African universities partner are able to draw on focal points, supervisors, faculty and staff training participants, and returning CARTA fellows to establish CARTA innovations.

Opinion: Why Africa needs postdoctoral training

By Tom Kariuki, director of Alliance for Accelerating Excellence in Science in Africa (AESA) and interim executive director of the African Academy of Sciences.

African youth are enrolling at university in droves, taking a special interest in science. In the last decade, enrolment at the continent's institutions has risen. Unfortunately, the quality and depth of teaching and research has not kept pace with the needs of the growing student population to prepare them for research careers in the global economy.

The ratio of lecturers to students in Africa's universities is as high as 1:47; as a result, academics are overwhelmed with teaching loads, leaving little to no time or resources for research. Moreover, training of faculty itself also falls short of international standards. Just 15, African universities achieve global university rankings.

Today, the most talented African PhD graduates seek internationally competitive postdoctoral training abroad. Many of these well-trained scientists remain in their host country for their productive careers, depriving Africa of the opportunity to build a world-class research infrastructure at home.

Addressing this challenge requires that Africa develops the capacity for globally competitive postdoctoral training: critical to promoting scientific and research excellence and leadership.

Postdoctoral training, a period of "apprenticeship" for a newly



 Dr. Tom Kariuki director of AESA and interim executive director of the African Academy of Sciences in a recent photo.

minted researcher to hone their skills in a research lab, typically follows completion of the doctoral degree and, depending on the scientific field and other factors, can last from one to many years. Fellowships are generally located in the laboratories of accomplished scientists at established universities in Organization for Economic

Co-operation and Development countries, where the postdoctoral dedicates themselves in depth to a particular research challenge. The postdoctoral fellowship is usually funded by the research grant of the principal investigator (PI, the head of lab) and is expected to result in one or more published research articles with original findings. Empirical evidence demonstrates that scientists with postdoc experience advance their careers faster and achieve greater overall success than those without.

Africa must create research universities capable of producing world-class research and innovation and serving as training incubators at the graduate and postdoctoral levels. A thriving research establishment requires a critical mass of postdoctoral fellows who not only dedicate their time to intensive research, but also provide guidance and practical training to graduate students (those studying for Masters and PhD degrees). Universities that aspire to become competitive research institutions must attract the best trained PhD holders from anywhere in the world as postdoctoral to provide critical contributions to the research, entrepreneurial and innovative outputs of these institutions. In order to recruit and retain this level of talent, sustained funding and infrastructure (including the most modern equipment) must be provided. This is the purpose of the post-doc training programs being developed and offered by the Alliance for Accelerating Excellence in Science in Africa (AESA), the funding arm of the African Academy of Sciences (AAS).

AESA postdoctoral programs seek to build a critical mass of African researchers and to prepare them as independent scientific research leaders. This requires not only research training and resources, but also the capacity to engage successfully with funders, governments, policy makers, communities and other stakeholders, and to serve as mentors and supervisors for the next generation of researchers.

“Postdoctoral training is a critical element of building Africa’s population of researchers.”

Postdoctoral training is already offered through AESA initiatives, including the Developing Excellence in Leadership, Training and Science (DELTAS) Africa program; the Climate Impact Research Capacity and Leadership Enhancement (CIRCLE) program and the AESA RISE Postdoctoral Fellowship. Future AESA programs will also contribute to expanding postdoctoral training in Africa to support young scientists to live, work, and scientifically thrive on the continent. This will be offered at two levels:

- Postdoctoral training for career development that provides three-year, Africa-based research grants
- Reintegration grants through which research institutions on the continent receive research and infrastructure support when hosting returning African professionals trained abroad

Postdoctoral training is a critical element of building Africa’s population of researchers. These globally competitive scientists are essential to transforming universities into research hubs and providing them with skilled staff to mentor the next generation of well-trained scientists to advance knowledge-based African economies.

Testimonies from Cohort 4 fellows

Six fellows reflect on the support, guidance and facilitation that CARTA has accorded them over the past three years.

Michael Mutua



“I am a PhD student at University of the Witwatersrand but working at APHRC Nairobi, Kenya. My PhD study is on the quality of post-abortion care in healthcare facilities in Kenya; and CARTA provided all the necessary financial support for me to work one-on-one with my supervisors. The CARTA facilitation system provided constant tracking of my study progress against clearly set standards. This ensured consistent progress in my studies. More importantly, CARTA’s Joint Advanced Seminar (JAS) series were extremely helpful in creating time to focus on my PhD work. Often I worked closely with facilitators who understood my support needs and offered the support in a timely manner. This often translated to good use of time and working towards achieving key milestones such as writing my literature review and data analysis. In addition, sharing my work with colleagues and CARTA faculty during the JAS seminars gave me a whole different perspective on my own work. For instance, during JAS 3, I got an opportunity to review two of my colleagues’ methodology sections as they reviewed my introduction and literature review section, which substantively improved the quality of my initial chapters.”

Boladale Mapayi

“My PhD story starts and ends with CARTA. I have big dreams. But the biggest of them all is to be one of the best researchers in mental health. I endeavor to tell a story, to be the voice for the voiceless, to use data and evidence from the field to make a change for good, to make lives better. My list of big dreams has been brought to life with the tools CARTA gave me. Through the consortium, I got the chance to be a part of an elite group of researchers, to work in a team, to be a student of Prof Sharon Fonn and Dr. Alex Ezeh, who I consider accomplished academics. They embody technical expertise and were willing to walk with me through every step of my PhD journey. CARTA’s training sessions such as the Joint Advanced Seminars (JAS) and ESE:O (Escitura paraliderar) built my writing skills, research capacity and ability to lead tremendously. The help with referencing was phenomenal. CARTA made it possible for me to travel to Canada, where I presented my research findings. I know I am a better researcher, clinician, teacher and leader because the CARTA giants allowed me to stand on their shoulders.”



Irene Moshi

“As a fellow, the support I received from the CARTA Fellowship Program is beyond financial assistance. It provided me with a stepping stone, and a great platform for me to prosper in my research career. My research explores the relationships between outdoor human activities and persistent malaria transmission in rural Tanzanian populations. Among CARTA programs provided, the JASes has been the most beneficial.

They increased my personal development by fostering collaborations with other aspiring scientists and allowing me to acquire knowledge through writing of quality research. Furthermore, pursuing my PhD under CARTA Fellowship did not deprive me of my social expectations.

As a mother and a wife, CARTA provided extensive social and financial support for both me and my child, including childcare during the JASes, which allowed me to focus on my studies. This is a unique and rare support that CARTA provides, which distinguishes it from other PhD programs. The program support that was offered enabled me to pursue studies in a foreign country, while also affording me the flexibility to continue with work. Out of my PhD, I have written manuscripts which are at peer review stage and will soon be published. I have also won grants that focus on population health improvement.”



Winnie Mutai

“My PhD journey as a CARTA fellow began in March 2014. During my doctoral research I set out to research the bacterium that can cause symptoms ranging from diarrhea to life-threatening inflammation of the colon. Fortunately, during my second year of study I was blessed with a baby and at that point I set my mind to put the PhD on hold.

To my surprise though, what I thought was going to be a stumbling block was not. CARTA was very supportive throughout this period; it has a policy that does not discriminate against mothers and all fellows are given equal opportunity to achieve their career goal. It is one-of-a-kind program that genuinely supports mothers, their babies and the baby minders especially during the JAS training and

internship. In addition to the family support system, CARTA has sharpened my teaching and research skills especially in the area of writing competitive proposals for grants.

During the entire period I won three grants amounting US\$27,500 (AstraZeneca US\$2500, University of Nairobi Deans Research Grant US\$5000, and National Research Fund US\$20,000). These grants seemed small but they boosted the laboratory aspect of my research work, which was quite expensive. In addition through the internship support program, I had the opportunity to do part of my research at the University of Cape Town department of molecular biology. It was an honor networking with renowned scientists in the field of gastroenterology and molecular biology.”



Flavia Kiweewa

“I was specifically attracted to the CARTA PhD program by the interdisciplinary approach and the level of support offered to fellows through the Joint Advanced Seminars (JAS). These JASes are designed to enhance fellows’ knowledge and skills in research as well as provide a platform for building networks. In the first JAS, I immediately appreciated the value of collaboration, partnership and mentorship. CARTA Co-Director, Prof. Sharon Fonn linked me up with two experts in my area of interest who agreed to become my supervisors. With their guidance, I refined my research topic to the level of successfully competing for National Institutes of Health (NIH) R01 grant. This was not only an answered prayer for my PhD work but a starting point to roll over the stone for Africa to make significant scientific contribution in the study of bone health. This is an area which had received little attention in resource-

limited settings, yet it carries significant public health concerns—especially among women. This is the first study globally to assess the combined effect of depo-provera and tenofovir-containing antiretroviral therapy on bone health of HIV infected young women. Following this award, I have received international recognition from both media and the scientific community across the globe. I have been invited to join several grant writing teams, and scientific committees locally and internationally. Over all, I have learned that PhD is 90% networking. I am grateful to CARTA for providing me with the platform for carving my niche; indeed, joining CARTA has been one of the most rewarding experiences in my professional career. I pledge to use resources and skills available to me to inspire and boost the careers of other young African scientists.”



Nillian Mukungu

“CARTA has endeavored to bring out the capacity within young African researchers and develop them to great researchers in their various fields. It has nurtured the full potential within me. I was exposed to top-notch researchers from around the world, it is only expected that this greatness will rub off on you to become the best researcher and a transforming agent in your specific field. Through the JASes and inter-JAS activities, I was mentored through the entire process of research work including conceptualizing a research idea, writing skills, critical thinking and analysis as well as presentation of research work. The support socially, professionally as well as materially was so immense that I found a family away from home. Thank you CARTA for making me who I am and for making my research on the antimalarial activity of plants used for treating malaria in rural western Kenya a reality.”



Fellows' corner

CARTA fellow emerges winner in abstract presentation

By Eunice Kilonzo, CARTA communications officer



▲ Nomfundo Moroe with the award that she won at the Developing Excellence in Leadership, Training and Science (DELTA) Africa Annual Meeting in Accra, Ghana from 3-5 July, 2017.

CARTA fellow Nomfundo Moroe won the best abstract award in Accra, Ghana during the Developing Excellence in Leadership, Training and Science (DELTA) Africa Annual Meeting. The convening from 3-5 July, 2017, brought together African health researchers from 31 African countries to showcase groundbreaking research done on the continent to address Africa's health challenges. Ms. Moroe had an engaging rapid-fire presentation—under three minutes—where she presented her pitch about the management of noise and hearing loss in the mines in South Africa. She beat 14 other fellows from DELTA Africa and from India who presented their research, living true to the theme of the AGM of “showcasing the best so far.”

Ms. Moroe, from the University of Witwatersrand, was one of five CARTA fellows who showcased their work in Accra, on topics ranging from childhood immunization, maternal health to occupational hearing loss. The other fellows were Mary Wanjira (Cohort 6), Sulaimon Taiwo Adedokun (Cohort 1),

Joshua Odunayo Akinyemi (Cohort 1) and Tonney Nyirenda (Cohort 3). They were among Africa's most prominent scientific researchers drawn from 54 institutions in 31 countries. CARTA Co-director Prof. Sharon Fonn and CARTA Program Manager Prof. Peter Ngure attended the Annual meeting.

DELTA Africa is dedicated to training the next generation of scientific leaders on the continent at the level of master's, PhD and postdoctoral fellowship. It also builds the

infrastructure to produce world class research to address Africa's health and research priorities. DELTA is a US\$100 million program to build world-class research leaders and was launched in 2015 with funding commitments through 2020 by the African Academy of Sciences and the NEPAD Agency's Alliance for Accelerating Excellence in Science in Africa (AESA). The Wellcome Trust and the UK's Department for International Development also support the ambitious project.



▲ Nomfundo Moroe while making her presentation about the management of noise and hearing loss in mines in South Africa.

CARTA Northern partner institutions

By Justus Musasiah, CARTA cohort 7 fellow

Northern partner institutions provide expertise to CARTA fellows and supervisors in data analysis and research. Senior faculty from Northern partner institutions have assisted in the selection of fellows, facilitated JASes, Faculty and Administrators seminars, graduate workshops and supervisors' training, research placement and internships, mentorship, replacement teachers for fellows and postdoctoral, proposal development and fundraising.

Some of the Northern partner institutions that have hosted a number of CARTA fellows include teaching replacement, PhD courses, postdoctoral and protected writing time at the University of Gothenburg, courses at Umeå University, postdocs at the University of Warwick as well as courses and conferences at Brown University.

The Northern partners' have representation on the CARTA Board through Prof. Nino Kuenzli. He represents Brown University, Canadian Coalition of Global Health Research, Swiss TPH, Umeå University, University of Gothenburg and University of Warwick.



Northern Partners are involved in CARTA Graduate workshop. Seen above is Hakan Billig from the University of Gothenburg who was the coordinator of a recent training.

Fellows' corner

CARTA set me on a path to confirm that ear infections are a public health problem in Rwanda



By Kaitesi Batamuliza Mukara

Cohort 4 fellow from the University of Rwanda

Are ear infections a public health problem? I can confidently say that they are. My research, sponsored by CARTA, found a prevalence of ear infections in Rwanda of 6% higher than the 4% considered by the World Health Organization to signal a public health issue. Through the same research, we now know why the prevalence

is high and are proposing ways to address it through the existing primary health system.

I have a special interest in audio-otology with a bias towards health promotion. Specifically how the primary health care system can effectively be used in prevention and treatment of ear infections in children under 5. I am an otolaryngologist and audiologist living and working in Rwanda, trained in the medical and surgical management and treatment of patients with diseases and disorders of the ear, nose, throat (ENT), and related structures of the head and neck. I lead the ENT department at the University of Rwanda's College of Medicine and Health Sciences, where I am also a senior lecturer in the School of Medicine and Pharmacy.

As a Rwandese citizen who works and lives in a developing country, I am faced with diverse challenges in the planning and implementation of strategies to prevent causes of hearing loss in children who need hearing devices in infancy. I want to ensure, in my small way, that every child is given equal opportunities to excel in school. Prior to CARTA's support, I had tried many avenues to tackle the issue of preventable hearing loss with little success. I come from a clinical background and the only evidence I had were clinical records. A common question whose answer I could not find was: How is this a public health problem?

At that time, I saw a CARTA announcement taped on the wall of a meeting room on my campus. It was a call for applications for PhD scholarships in population health. My eyes roved to the requirements section and seeing that I fulfilled them, I tore a piece of paper from a newspaper I was reading and wrote down the website. Shortly after, I began the application. Today, I am a fellow in Cohort 4, I am one of 150 others from 14 other institutions across sub-Saharan Africa.

The CARTA PhD fellowship has exposed me to global leaders in different fields including medicine, teaching, policymaking and research. These leaders not only shared their knowledge and expertise during didactic sessions but are willing to mentor, collaborate and guide fellows towards flourishing careers in their respective fields. I have immensely benefited from traveling and networking with colleagues from different institutions in the CARTA consortium. In addition, this research work should yield five publications.

The highlight of my fellowship, other than being able to generate the desired evidence to inform policy and practice were experienced ENT surgeons from Sweden who replaced me, for six weeks, from the daily clinical and teaching responsibilities so that I could concentrate on my PhD. They offered expertise in medical and surgical treatment to our patients. They also evaluated the department and gave recommendations for improvement.

My post-doctoral research experience

By Tonney Nyirenda

Cohort 3 fellow from the University of Malawi

Pursuing PhD training for me was a great and most fulfilling three-and-a-half-year experience. I planned to inform vaccine development strategies through studying the immunity of African children who had invasive Salmonella disease. The disease is difficult to distinguish clinically from malaria.

I received financial support from CARTA and a Commonwealth Scholarship. With support from the Commonwealth, I travelled to the United Kingdom to use advanced laboratory technologies at University of Liverpool for my PhD training. Through the CARTA fellowship, I travelled to four African cities: Dar es Salaam (Tanzania), Johannesburg (South Africa), Ibadan (Nigeria) and Nairobi (Kenya) to attend various CARTA events. Such as the one-month long Joint Advanced Seminars (JAS) where I learned everything from critical thinking, research methodologies, data analysis and writing skills. JAS experiences were also packed with quality time with CARTA fellows and facilitators, sharing experiences, and enjoying local food. My family and supervisors were very supportive throughout my PhD training.

After six months of writing a PhD thesis, I received the news of successful PhD defense with great excitement in March 2015 at the College of Medicine (CoM), of the University of Malawi. This excitement culminated with a colorful graduation ceremony at the Chancellor College, Great Hall in Zomba Municipality, in Malawi.

I was so proud, humbled and honored for achieving my long-term dream. Dressed in the much coveted red gown and wearing the wisdom hat. In an interview aired on the national TV and radio stations I said: "as an immunologist I will work towards eradication of infectious diseases such as malaria and diarrhea which retard our country's development. We need to develop vaccines for infectious diseases".

I strongly felt this was the beginning of two journeys towards eradication of vaccine preventable infectious diseases and research independence. My plan was to join the University of Malawi as a lecturer and commence postdoctoral research training. I

chose focus my research on the immunology of malaria and invasive bacterial infections in African children. At the same time, I learnt that early preparation for the transition from PhD studentship to lectureship and or postdoctoral fellowship is critical.

In my case, I submitted my applications for lectureship and postdoctoral fellowship 8 to 12 months before PhD thesis submission. Through these efforts, I secured both lectureship position at CoM and Southern Africa Consortium of Research Excellence (SACORE) Post-Doctoral Fellowship (12 months long) before completion of PhD studies. This allowed me to hit the ground running after my PhD completion and to my relief CoM provided me 70% protected-time for research-related activities.

A senior investigator at CoM, Dr. Anja Terlouw who told me that "the early postdoctoral phase is the most critical phase in building a successful research career". With this advice in mind, I vowed to grab as many opportunities as I can. I came across the call for applications for the CARTA re-entry grant. I applied the grant to supplement my SACORE postdoctoral funds. I also attended the CARTA grant writing workshop where I learnt skills that would be useful in several grant applications including NIH career development grant (the December 2016 call). I have received an excellent score pending final decision. I have also learned that non-funded grant applications should not prevent me seeking research funding elsewhere.

I am indebted to CARTA for its continued support through its postdoctoral award which has created the critical bridge for me to secure long-term funding for further career advancement. Through this support, I am hosted by the Blantyre Malaria Project in Malawi to primarily acquire advanced techniques in malaria parasites and conduct in-depth investigations. These will go a long way to improve my understanding of malaria and other invasive bacterial diseases interactions in children from malaria endemic settings.

As a CARTA fellow, I am developing skills and knowledge in scientific publishing, building network of collaborators, supervision of PhD and MSc students, and grant writing. I envisage that in time, I will secure long-term career development funding which will help me to develop into a leader in immunology of infectious diseases in Africa.

My CARTA experience

By Oyinlola Funmilola Folasade

Cohort 7 fellow from Obafemi Awolowo University

Were it not been for CARTA, I would never have seen or boarded a plane. I remember how I prayed and worked hard to win the competitive CARTA PhD fellowship. Fortunately, I was selected and I was supposed to attend the month-long Joint Advanced Seminar 1 at Makerere University in Kampala, Uganda. My excitement however, turned into worry; I had just had a baby, what would I do? Would I go to Kampala?

As if they had anticipated my concern, I received an email from the secretariat inviting me and other breastfeeding fellows to submit names and passport biodata for both their babies and caregivers. A pleasant surprise: CARTA would pay for their flight and upkeep while at Makerere University!

Boarding the plane for the first time at Murtala Muhammed Airport in Lagos, Nigeria, with my son and caregiver, I was so scared, confused and anxious. I begged the cabin crew to allow me occupy the window seat so as to open it for fresh air if it gets hot. However, I was politely asked not to attempt it but I did not understand why. Shortly after, while in the washroom I flushed it while still seated. The suction pressure almost pulled me down the plane. Then it dawned on me what would have happened if I had opened the window.

The JAS classes were an eye-opening opportunity as I met with people including facilitators who were of great minds and intellect. As a lecturer, I thought I knew demography as a course but I was shocked when I heard the word 'epistemology', which I was hearing for the first time in my academic history. The zeal to teach and willingness to attend to all problems by facilitators sparked up something in me in learning how not to get tired of my students.

CARTA has exposed me to a better way of thinking, and how to work with people from different backgrounds. I have learned how to use appropriate language, a team spirit and respect for people's differing opinions. house when we got back from Kampala, to appreciate us.



👤 Participants attending JAS 1 and 4 in Makerere University from February 27th - March 22nd 2017

What it takes to host JAS 1 and 4: lessons and experiences

By Anne Katahoire, CARTA focal person Makerere University

Makerere University expressed interest in hosting Joint Advanced Seminar (JAS) 1 and 4 in September 2016 during the Board of Management meeting. A total of four JAS are planned during the course of PhD fellowship, each covering a specific topic such as data analysis, finalization of proposal, interpretation and presentation of research findings by each fellow. They range from four weeks to six months.

This interest was followed by a formal written request to the directors of CARTA by the principal of Makerere University College of health sciences in November 2016. Prior this, the team at Makerere (focal point persons, the dean School of Public Health and CARTA fellows who had completed their PhDs) identified venues for the training and accommodation. The dean at the School of Public Health offered one of the university training facilities at Kololo that had room to accommodate both JAS 1 and 4 fellows at the same time as the university was going to be in session from February to March in 2017.

The second task was to identify a place that could accommodate approximately 70 people close-by. It involved visits to several hotels around where were shortlisted and their quotations sent to the CARTA secretariat. A couple of weeks later, the CARTA Secretariat gave Makerere a go-ahead to host the seminars.

The planning phase and what it took to deliver

Two people from the CARTA Secretariat came to inspect the proposed training venue and the different accommodation options. This was very helpful as it was agreed that dates for the JASes would be changed and thus the workshops began one week earlier. In addition, the CARTA secretariat handled the hotel bookings directly. The School of Public Health recommended one of their experienced project administrators to be part of the planning process. She ably mobilized a team of other support staff who worked during the JASes to ensure that everything ran smoothly.

Once the logistics was sorted, the planning team shifted their focus to the academic program, which required coordination by facilitators at different institutions and continents. The CARTA secretariat identified and contacted facilitators from outside of Makerere. The Makerere team identified and got in touch with facilitators at Makerere. Some facilitators confirmed their availability promptly, others required follow up, while others confirmed then withdrew due to unforeseen circumstances. Fortunately, all the sessions had facilitators.

Working with the CARTA secretariat

made hosting of the JASes much easier. With their help, accommodation and meals were arranged, letters for the fellows and facilitators drafted and signed, travel arrangements including airport pick-ups and drop offs arranged. The experienced CARTA Secretariat team as well as the Makerere administrator made the planning and running of the workshops smooth and seamless.

Lessons learned: The support from top administrators within the University including the Principal College of Health Sciences and the Dean School of Public Health made it made worthwhile. Most of the tasks were handled by the CARTA Secretariat which was helpful for the host institutions.

There was also joint planning where tasks were shared out between the host institution and the CARTA Secretariat. Involving CARTA fellows who had been through the JASes was helpful as they were able to share their experiences of what had worked well and what didn't which was important in the planning process. The fellows assisted in the planning and facilitation of field trips and dinners, they guided the visiting fellows. While we learned that hosting two JASes concurrently at the same venue is demanding it enables those in JAS 4 to support those in JAS 1. It might be useful in the future to explore how facilitators can be shared between the two JASes as well.

Program updates

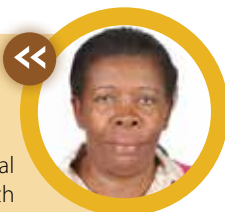
New focal persons at the University of Nairobi

Dr. Anne Khasakhala and Prof. Mutuku Mwanthi have been appointed to promote CARTA program visibility. They will recruit and nominate CARTA fellows and other CARTA program beneficiaries. They will also vet the supervisors list before it is made available to students, provide support to CARTA fellows registered at the university including arbitrations (e.g. when fellows do not receive teaching relief) and monitor progress of CARTA fellows at home institution.

Dr. Anne Khasakhala

CARTA focal person

Dr. Khasakhala has over 30 years of professional work in the fields of population, maternal health and reproductive health as a lecturer, researcher consultant and an administrator. She holds a BSc. Sociology; Post Graduate Diploma in Social Policy and Planning in developing countries; Post Graduate Diploma, Population Studies; MSc. Medical Demography; and a doctorate in Population sciences.



Prof. Mutuku Mwanthi

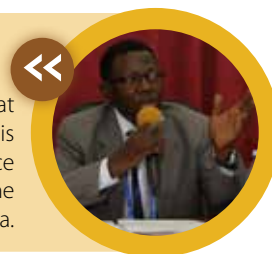
CARTA co-focal person.

Prof. Mwanthi is a Professor of Community/ Public Health Sciences (Environmental & Occupational Health and Safety). He holds a BSc.in Biology with Minor in Chemistry; MSEH/ MSC Environmental Health; and a doctorate in Community Health Sciences.



Prof. Buyinza Mukadasi - CARTA Board Chair

Prof. Buyinza was appointed chair of the CARTA Board at the 15th Board of Management meeting held at Makerere University in March 2017. He has previously served as a CARTA board member. Prof. Buyinza is currently the director, Directorate of Research and Graduate Studies. He is a professor of Forestry Resource Economics. As the Board chairperson, Prof Buyinza will oversee the governance and management of the CARTA partner universities in collaboration with APHRC and the University of the Witwatersrand, South Africa.



Eunice Kilonzo - CARTA communications officer

Eunice Kilonzo is the Communications Officer. She is passionate about communicating scientific research results and evidence in a creative, simple to understand manner. Before joining CARTA she was a senior health reporter at the Daily Nation newspaper in Nairobi. She provided health and science content for other Nation Media Group publications such as Business Daily, The EastAfrican (a regional publication), The Citizen (Tanzania), and Africa Review. Her writings have also appeared in the French newspaper, Le Monde; South African, Voices of Africa, and Women and Girls Hub.



Cohort 7 leadership

Olusola Olawoye, President

Olusola is a senior lecturer and glaucoma specialist, Department of Ophthalmology, College of Medicine, University of Ibadan, Nigeria. She has published over 25 papers in peer-reviewed journals. She currently is a member of the Board of Governors of the World Glaucoma Association and the financial secretary of the Oyo State branch of the Academic Staff Union of Universities in Nigeria. She is involved in residency training in Ophthalmology and fellowship training in Nigeria.

Alexander Kagaha, Vice President

Alexander Kagaha is a young scholar of sociology in Uganda and an assistant lecturer at Makerere University. He was a Research Fellow at the Liverpool School of Tropical Medicine (LSTM) from 2009-2012. Alexander is a PhD student of Sociology of health and medical systems at the University of the Witwatersrand.

Photo gallery



⤴ CARTA cohort 6 fellow Nomfundo Moroe (Right), from the University of Witwatersrand, next to her is Mary Njue (Cohort 6), Tonney Nyirenda (Cohort 3) and Sulaimon Taiwo Adedokunin (Cohort 1) in Accra, Ghana during the Developing Excellence in Leadership, Training and Science (DELTA) Africa Annual Meeting in July 2017.



⤴ Cohort 7 fellows in a group exercise during JAS 1 in Makerere from 27 February - 22 March, 2017 (Left-Right: Oluseye Ademola Okunola, Kellen Karimi, Stevens Kisaka, Cadmus Eniola, Marie Claire Uwamahoro)



⤴ Cohort 7 fellows taking a group photo with facilitators at JAS 1 (Facilitators: John Eyers, London School of Hygiene & Tropical Medicine & Bo Eriksson, University of Gothenburg)



⤴ John Eyers, a facilitator from London School of Hygiene & Tropical Medicine facilitating a session on database searcher.



⤴ Alex Exeh, former CARTA co-director with Ugandan Ambassador to Kenya Her Excellency Angelina Wapakhabulo during the Vice Chancellors meeting held in Nairobi in July 2017



⤴ Cohort 4 and Cohort 7 fellows taking a group photo with the VC of Makerere University Prof. John Ddumba-Ssentamu after the official opening of JAS 1 & 4 at Makerere University on February 27, 2017.

JANUARY - JUNE 2017 PUBLICATIONS

1. Abubakar-Abdullateef, A., **Adedokun, B.**, & Omigbodun, O. (2017). A comparative study of the prevalence and correlates of psychiatric disorders in Almajiris and public primary school pupils in Zaria, Northwest Nigeria. *Child and adolescent psychiatry and mental health*, 11(1), 29.
2. Abuya, B. A., Ngware, W. M., **Mutisya, M.**, & Nyariro, M. (2017). Girls' primary education and transition to secondary school in Nairobi: perceptions of community members at the onset of an education intervention. *International Journal of Adolescence and Youth*, 22(3), 349-363.
3. Adebowale, S. A., **Morakinyo, O. M.**, & Ana, G. R. (2017). Housing materials as predictors of under-five mortality in Nigeria: evidence from 2013 demographic and health survey. *BMC pediatrics*, 17(1), 30.
4. **Adedini, S. A.**, & Odimegwu, C. (2017). Polygynous family system, neighbourhood contexts and under-five mortality in sub-Saharan Africa. *Development Southern Africa*, 1-17.
5. **Adedokun, S. T.**, Adekanmbi, V. T., Uthman, O. A., & Lilford, R. J. (2017). Contextual factors associated with health care service utilization for children with acute childhood illnesses in Nigeria. *PLoS one*, 12(3), e0173578.
6. **Adedokun, S. T.**, Uthman, O. A., Adekanmbi, V. T., & Wiysonge, C. S. (2017). Incomplete childhood immunization in Nigeria: a multilevel analysis of individual and contextual factors. *BMC public health*, 17(1), 236.
7. Adekanmbi, V. T., **Adedokun, S. T.**, Taylor-Phillips, S., Uthman, O. A., & Clarke, A. (2017). Predictors of differences in health services utilization for children in Nigerian communities. *Preventive medicine*, 96, 67-72.
8. Adeoye, I., Quadri, G., & **Adedini, S. A.** (2017). Maternal health care utilization and neonatal mortality in Nigeria: looking beyond the micro-level pathway of influence. *African Population Studies*, 31(1).
9. **Agunbiade, O. M.**, & Akinyemi, A. I. (2017). Neoliberalism and Resilience Among Older Yoruba People in a Semiurban Community, South West Nigeria. In *Cross-Cultural and Cross-Disciplinary Perspectives in Social Gerontology* (pp. 85-107). Springer Singapore.
10. **Akinyemi, J. O.**, Odimegwu, C. O., & Adebowale, A. S. (2017). The effect of internal migration, individual and contextual characteristics on contraceptive use among Nigerian women. *Health Care for Women International*, 1-20.
11. **Akinyemi, J. O.**, Odimegwu, C. O., & **Banjo, O. O.** (2017). Dynamics of maternal union dissolution and childhood mortality in sub-Saharan Africa. *Development Southern Africa*, 1-19.
12. **Akinyemi, J. O.**, Ogunbosi, B. O., Fayemiwo, A. S., Adesina, O. A., Obaro, M., Kuti, M. A., ... & Adewole, I. F. (2017). Demographic and epidemiological characteristics of HIV opportunistic infections among older adults in Nigeria. *African Health Sciences*, 17(2), 315-321.
13. Alabi, O., Oyedokun, O. A., Doctor, H. V., & **Adedini, S. A.** (2017). Determinants of under-five mortality clustering in a health and demographic surveillance system in Zamfara State, northern Nigeria. *African Population Studies*, 31(1).
14. Alo, O. D., **Akinyemi, J. O.**, Akpa, M. O., Yusuf, O. B., Fagbamigbe, A. F., Bamgboye, E. A., ... & Eziro, O. (2017). Level and determinants of pharmacovigilance program awareness in Nigeria: A multilevel analysis. *African Journal of Pharmacy and Pharmacology*, 11(29), 342-348.
15. **Alonge, A. J.**, Kiai, W., & Ndati, N. (2017). Assessment of factors affecting social media use for HIV and AIDS communication among undergraduate students in South-Western Nigeria. *Journal of Development and Communication Studies*, 5(1), 56-77.
16. Amulen, D. R., Spanoghe, P., Houbraken, M., **Tamale, A.**, de Graaf, D. C., Cross, P., & Smagghe, G. (2017). Environmental contaminants of honeybee products in Uganda detected using LC-MS/MS and GC-ECD. *PLoS one*, 12(6), e0178546.
17. **Awotidebe, T. O.**, Adedoyin, R. A., Oke, K. I., Ativie, R. N., **Opiyo, R.**, Ikujeysi, E. O., ... & Afolabi, M. A. (2017). Relationship between functional capacity and health-related quality of life of patients with type-2 diabetes. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews*, 11(1), 1-5.
18. **Awotidebe, T. O.**, Adeyeye, V. O., Adedoyin, R. A., Ogunyemi, S. A., Oke, K. I., Ativie, R. N., ... & Balogun, M. O. (2017). Assessment of functional capacity and sleep quality of patients with chronic heart failure. *Hong Kong Physiotherapy Journal*, 36, 17-24.
19. **Awotidebe, T. O.**, Bisiriyu, L. A., Ativie, R. N., Oke, K. I., Adedoyin, R. A., **Nabakwe, E. C.**, ... & **Mwakalinga, V. M.** (2017). Prevalence of physical inactivity among Nigerian women: do socio-demographic characteristics, women's personal attributes and psychosocial factors play any role?. *Journal of Exercise Therapy and Rehabilitation*, 4(1), 33-45.
20. Ayodapo, A. O., **Sekoni, O. O.**, & Asuzu, M. C. (2017). Pattern of intimate partner violence disclosure among pregnant women attending ante-natal clinic in Oyo East Local Government, Nigeria. *South African Family Practice*, 1-5.
21. **Balogun, F. M.**, Alohan, A. O., & Orimadegun, A. E. (2017). Self-reported sleep pattern, quality, and problems among schooling adolescents in southwestern Nigeria. *Sleep Medicine*, 30, 245-250.
22. Batte, A., Lwabi, P., Lubega, S., Kiguli, S., **Otwombe, K.**, Chimozi, L., ... & Karamagi, C. (2017). Wasting, underweight and stunting among children with congenital heart disease presenting at Mulago hospital, Uganda. *BMC pediatrics*, 17(1), 10.
23. Cassim, H., **Otwombe, K.**, Lazarus, E., Liberty, A., Gray, G. E., Greeff, O. B., & Violari, A. (2017). A retrospective case-cohort study comparing treatment outcomes in abacavir versus stavudine containing first line antiretroviral treatment regimens in children < 3yrs old, at a paediatric program based in Soweto, South Africa. *PLoS one*, 12(7), e0180645.
24. Cheserem, L. K., **Akinyemi, J. O.**, & Ayeni, O. (2017). Regional variations in seasonality of births in Nigeria, 1990-2007: A

- trigonometric regression model approach. *African Population Studies*, 31(1).
25. Chilale, H. K., Silungwe, N. D., Gondwe, S., & Masulani-Mwale, C. (2017). Clients and carers perception of mental illness and factors that influence help-seeking: Where they go first and why. *International Journal of Social Psychiatry*, 0020764017709848.
 26. Chisumpa, V. H., & De Wet, N. (2017). Estimating regional variations in adult mortality in Zambia. *Etude de la Population Africaine*, 31(1).
 27. De Wet, N. (2017). Family formation and economic insecurity among youth in South Africa. *Development Southern Africa*, 1-10.
 28. De Wet, N., & Odimegwu, C. (2017). Contextual determinants of adolescent mortality in South Africa. *African Health Sciences*, 17(1), 62-69.
 29. Dube, N., Nkomo, T. S., & Khosa, P. (2017). Condom Usage Negotiation Among Customarily Married Women in Katlehong, Johannesburg. *SAGE Open*, 7(1), 2158244016687345.
 30. Fagbamigbe, A. F., & Idemudia, E. (2017). Diversities in timing of sexual debut among Nigerian youths aged 15-24 years: parametric and non-parametric survival analysis approach. *African Health Sciences*, 17(1), 39-51.
 31. Fagbamigbe, A. F., & Idemudia, E. S. (2017). Wealth and antenatal care utilization in Nigeria: Policy implications. *Health care for women international*, 38(1), 17-37.
 32. Fagbamigbe, A. F., & Makanjuola, V. A. (2017). Modeling association between times to recurrence of the different polarities in bipolar disorder among service seekers in urban Nigeria: a survival analysis approach. *Neuropsychiatric Disease and Treatment*, 13, 1967.
 33. Fagbamigbe, A. F., & Ojebuyi, R. B. (2017). Influence of Spousal Communication about Family Planning and HIV/AIDS-related Issues on Modern Contraceptive Use in Nigeria. *Journal of Health Management*, 0972063417699693.
 34. Fagbamigbe, A. F., Adebowale, A. S., & Bamgboye, E. A. (2017). A Survival Analysis Model for Measuring Association between Bivariate Censored Outcomes: Validation Using Mathematical Simulation. *American Journal of Mathematics and Statistics*, 7(1), 7-14.
 35. Faronbi, J. O., & Olaogun, A. A. (2017). The influence of caregivers' burden on the quality of life for caregivers of older adults with chronic illness in Nigeria. *International Psychogeriatrics*, 1-9.
 36. Faronbi, J. O., Adebowale, O., Faronbi, G. O., Musa, O. O., & Ayamolowo, J. (2017). Perception Knowledge and Attitude of Nursing Students towards the Care of Older Patients. *International Journal of Africa Nursing Sciences*.
 37. Golaz, V., Wandera, S. O., & Rutaremwa, G. (2017). Understanding the vulnerability of older adults: extent of and breaches in support systems in Uganda. *Ageing & Society*, 37(1), 63-89.
 38. Goodman, O. O., Aderibigbe, S. A., Sekoni, O. O., Olatona, F. A., & Kuyinu, Y. A. (2016). Effect of health workers sensitization on satisfaction with immunization services among mothers of under fives in Ilorin, North Central Nigeria. *Research Journal of Health Sciences*, 4(4), 304-315.
 39. Innes, S., van Toorn, R., Otjombe, K., Dobbels, E., van Zyl, G., Cotton, M. F., & Loughton, B. (2017). Late Onset HIV Encephalopathy in Children with Long-Standing Virologic Suppression Followed by Slow Spontaneous Recovery despite No Change in Antiretroviral Therapy-Four Case Reports. *The Pediatric Infectious Disease Journal*.
 40. Kaindoa, E. W., Matowo, N. S., Ngowo, H. S., Mkandawile, G., Mmbando, A., Finda, M., & Okumu, F. O. (2017). Interventions that effectively target Anopheles funestus mosquitoes could significantly improve control of persistent malaria transmission in south-eastern Tanzania. *PLoS one*, 12(5), e0177807.
 41. Kamau, J. W., Omigbodun, O. O., Bella-Awusah, T., & Adedokun, B. (2017). Who seeks child and adolescent mental health care in Kenya? A descriptive clinic profile at a tertiary referral facility. *Child and Adolescent Psychiatry and Mental Health*, 11(1), 14.
 42. Kelly, H. A., Ngou, J., Chikandiwa, A., Sawadogo, B., Gilham, C., Omar, T., ... & Delany-Moretlwe, S. (2017). Associations of Human Papillomavirus (HPV) genotypes with high-grade cervical neoplasia (CIN2+) in a cohort of women living with HIV in Burkina Faso and South Africa. *PLoS one*, 12(3), e0174117.
 43. Kelly, H. A., Sawadogo, B., Chikandiwa, A., Segondy, M., Gilham, C., Lompo, O., ... & Weiss, H. A. (2017). Epidemiology of high-risk human papillomavirus and cervical lesions in African women living with HIV/AIDS: effect of anti-retroviral therapy. *Aids*, 31(2), 273-285.
 44. Khosa, P., Dube, N., & Nkomo, T. S. (2017). Investigating the Implementation of the Ke-Moja Substance Abuse Prevention Program in South Africa's Gauteng Province. *Open Journal of Social Sciences*, 5(08), 70.
 45. Khuluza, F., Kigera, S., & Heide, L. (2017). Low prevalence of substandard and falsified antimalarial and antibiotic medicines in public and faith-based health facilities of Southern Malawi. *The American journal of tropical medicine and hygiene*, 96(5), 1124-1135.
 46. Kistan, J., Laher, F., Otjombe, K., Panchia, R., Mawaka, N., Lebina, L., ... & Martinson, N. (2017). Pulmonary TB: varying radiological presentations in individuals with HIV in Soweto, South Africa. *Transactions of The Royal Society of Tropical Medicine and Hygiene*, 111(3), 132-136.
 47. Kiweewa, F. M., Mugwanya, K. K., & Kiweewa, F. (2017). Anti-Retroviral-Based HIV Pre-Exposure Prophylaxis for Women: Recent Advances and Next Steps. In *HIV/AIDS-Contemporary Challenges*. InTech.
 48. Kumwenda, S., El Hadji, A. N., Orondo, P. W., William, P., Oyinlola, L., Bongo, G. N., & Chiwona, B. (2017). Challenges facing young African scientists in their research careers: A qualitative exploratory study. *Malawi Medical Journal*, 29(1), 1-4.
 49. Kumwenda, S., Msefula, C., Kadewa, W., Diness, Y., Kato, C., Morse, T., & Ngwira, B. (2017). Is there a difference in prevalence of helminths between households using ecological sanitation and those using traditional pit latrines? A latrine based cross sectional comparative study in Malawi. *BMC research notes*, 10(1), 200.
 50. Kyamanywa, P., Mukara, K. B., & Sewankambo, N. K. (2017).

Academic Collaborations: Do's and Don'ts. *Current Anesthesiology Reports*, 1(7), 15-22.

51. Laidlaw, R., Dixon, D., Morse, T., Beattie, T. K., **Kumwenda, S.**, & Mmemberera, G. (2017). Using participatory methods to design an mHealth intervention for a low income country, a case study in Chikwawa, Malawi. *BMC Medical Informatics and Decision Making*.
52. Laktabai, J., Lesser, A., Platt, A., Maffioli, E., Mohanan, M., **Menya, D.**, ... & Turner, E. L. (2017). Innovative public-private partnership to target subsidised antimalarials: a study protocol for a cluster randomised controlled trial to evaluate a community intervention in Western Kenya. *BMJ open*, 7(3), e013972.
53. **Longwe, H.**, & Phiri, K. (2017). Changing the policy for intermittent preventive treatment with sulfadoxine-pyrimethamine during pregnancy in Malawi.
54. Malatji, H., & **Dube, N.** (2017). Experiences and challenges related to residential care and the expression of cultural identity of adolescent boys at a Child and Youth Care Centre (CYCC) in Johannesburg. *Social Work*, 53(1), 109-126.
55. Mapanga, W., Elhakeem, A., Feresu, S. A., **Maseko, F.**, & Chipato, T. (2017). Prevention of cervical cancer in HIV-seropositive women from developing countries: a systematic review protocol. *Systematic reviews*, 6(1), 91.
56. Mathias, L., Baraka, V., **Philbert, A.**, Innocent, E., Francis, F., Nkwengulila, G., & Kweka, E. J. (2017). Habitat productivity and pyrethroid susceptibility status of *Aedes aegypti* mosquitoes in Dar es Salaam, Tanzania. *Infectious Diseases of Poverty*, 6(1), 102.
57. Matovu, N., **Matovu, F. K.**, Sseguya, W., & Tushemerirwe, F. (2017). Association of dietary intake and BMI among newly diagnosed type 2 diabetes patients attending diabetic clinics in Kampala. *BMC Nutrition*, 3(1), 21.
58. Mbada, C. E., Olowokere, A. E., **Faronbi, J. O.**, Faremi, F. A., & Oginni, M. O. (2017). Breastfeeding profile and practice of Nigerian mothers: a cross-sectional survey. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*, 3(4), 969-976.
59. **Mbalinda, S. N.**, Nabirye, R. C., Ombeva, E. A., Brown, S. D., & Leffers, J. M. (2017). Nursing Partnership Activities, Components, and Outcomes: Health Volunteers Overseas in Uganda 2001-2016. *Frontiers in Public Health*, 5.
60. **Mbuthia, G. W.**, Wanzala, P., Ngugi, C., & Nyamogoba, H. Assessing the effectiveness of alcohol and drug abuse awareness campaigns among University students in Kenya: A quasi-experimental study.
61. Mlacha, Y. P., Chaki, P. P., **Mwakalinga, V. M.**, Govella, N. J., Limwagu, A. J., Paliga, J. M., ... & Dongus, S. (2017). Fine scale mapping of malaria infection clusters by using routinely collected health facility data in urban Dar es Salaam, Tanzania. *Geospatial Health*, 12(1).
62. **Modupe Oladunni Taiwo**, and Funmi-Togonu Bickersteth, "Association between Psychological Wellbeing and Antiretroviral Therapy Adherence in North-Central, Nigeria." *American Journal of Applied Psychology*, vol. 5, no. 1 (2017): 18-24. doi: 10.12691/ajap-5-1-4.
63. **Morakinyo, O. M.**, & **Fagbamigbe, A. F.** (2017). Neonatal, infant and under-five mortalities in Nigeria: An examination of trends and drivers (2003-2013). *PLoS one*, 12(8), e0182990.
64. **Morakinyo, O. M.**, Adebowale, A. S., Mokgobu, M. I., & Mukhola, M. S. (2017). Health risk of inhalation exposure to sub-10 µm particulate matter and gaseous pollutants in an urban-industrial area in South Africa: an ecological study. *BMJ open*, 7(3), e013941.
65. **Moroe, N. F.**, & Hughes, K. (2017). Parents are aware of the ototoxic effects of chemotherapy in paediatrics undergoing cancer treatment-Professional versus parental views: A pilot study. *South African Journal of Communication Disorders*, 64(1), 1-10.
66. **Moshi, I. R.**, Ngowo, H., Dillip, A., Msellemu, D., Madumla, E. P., Okumu, F. O., ... & Manderson, L. (2017). Community perceptions on outdoor malaria transmission in Kilombero Valley, Southern Tanzania. *Malaria Journal*, 16(1), 274.
67. Mosley, E. A., King, E. J., Schulz, A. J., Harris, L. H., **De Wet, N.**, & Anderson, B. A. (2017). Abortion attitudes among South Africans: findings from the 2013 social attitudes survey. *Culture, health & sexuality*, 1-16.
68. Muchiri, E., Odimegwu, C., & **De Wet, N.** (2017). HIV risk perception and consistency in condom use among adolescents and young adults in urban Cape Town, South Africa: a cumulative risk analysis. *Southern African Journal of Infectious Diseases*, 1-6.
69. Muchiri, E., Odimegwu, C., Banda, P., Ntoimo, L., & **Adedini, S.** (2017). Ecological correlates of multiple sexual partnerships among adolescents and young adults in urban Cape Town: a cumulative risk factor approach. *African Journal of AIDS Research*, 16(2), 119-128.
70. Murphy, G., McCormack, V., **Menya, D.**, Mmbaga, B., Van Loon, K., Mmbaga, E., ... & Mwachiro, M. (2017). Development of an African Esophageal Cancer Consortium.
71. Muthuri, S. K., Oyolola, M., & **Faye, C.** (2017). Trends and correlates of single motherhood in Kenya: Results from the Demographic and Health Survey. *Health care for women international*, 38(1), 38-54.
72. **Mutua, M. M.**, Achia, T. N., **Maina, B. W.**, & Izugbara, C. O. (2017). A cross-sectional analysis of Kenyan postabortion care services using a nationally representative sample. *International Journal of Gynecology & Obstetrics*, 138(3), 276-282.
73. **Mwamtobe, P. M.**, Simelane, S. M., Abelman, S., & Tchuente, J. M. (2017). Mathematical analysis of a lymphatic filariasis model with quarantine and treatment. *BMC public health*, 17(1), 265.
74. Mwendera, C. A., Jager, C., **Longwe, H.**, Hongoro, C., Mutero, C. M., & Phiri, K. S. (2017). Malaria research in Malawi from 1984 to 2016: a literature review and bibliometric analysis. *Malaria Journal*, 16(1), 246.
75. Mwendera, C. A., Jager, C., **Longwe, H.**, Phiri, K., Hongoro, C., & Mutero, C. M. (2017). Changing the policy for intermittent preventive treatment with sulfadoxine-pyrimethamine during pregnancy in Malawi. *Malaria journal*, 16(1), 84.
76. **Nakubulwa, S.**, Kaye, D. K., Bwanga, F., Tumwesigye, N. M., Nakku-Joloba, E., & Mirembe, F. (2017). Effect of suppressive acyclovir administered to HSV-2 positive mothers from week

- 28 to 36 weeks of pregnancy on adverse obstetric outcomes: a double-blind randomised placebo-controlled trial. *Reproductive health*, 14(1), 31.
77. **Niragire, F.,** & Nshimiyiryo, A. (2017). Determinants of increasing duration of first unemployment among first degree holders in Rwanda: a logistic regression analysis. *Journal of Education and Work*, 30(3), 235-248.
 78. **Niragire, F.,** Achia, T. N., Lyambabaje, A., & Ntaganira, J. (2017). Child mortality inequalities across Rwanda districts: a geoadditive continuous-time survival analysis. *Geospatial Health*, 12(1).
 79. **Nyirenda, T. S.,** Nyirenda, J. T., Tembo, D. L., Storm, J., Dube, Q., Msefula, C. L., ... & Mandala, W. L. (2017). Loss of Humoral and Cellular Immunity to Invasive Nontyphoidal Salmonella During Current or Convalescent Plasmodium falciparum Infection in Malawian Children. *Clinical and Vaccine Immunology*, CVI-00057.
 80. **Obasola, O. I.,** & Mabawonku, I. M. (2017). Women's Use of Information and Communication Technology in Accessing Maternal and Child Health Information in Nigeria. *African Journal of Library, Archives & Information Science*, 27(1).
 81. **Obiyan, M. O., Fagbamigbe, A. F., Adetutu, O. M.,** & Oyinlo-la, F. F. (2017). Fertility, labour force participation and poverty among married women in Nigeria. *African Population Studies*, 31(1).
 82. Odimegwu, C., & **Somefun, O. D.** (2017). Ethnicity, gender and risky sexual behaviour among Nigerian youth: an alternative explanation. *Reproductive Health*, 14(1), 16.
 83. Odimegwu, C., **Somefun, O. D.,** & **De Wet, N.** (2017). Contextual determinants of family dissolution in sub-Saharan Africa. *Development Southern Africa*, 1-17.
 84. Oduguwa, A. O., **Adedokun, B.,** & Omigbodun, O. O. (2017). Effect of a mental health training program on Nigerian school pupils' perceptions of mental illness. *Child and adolescent psychiatry and mental health*, 11(1), 19.
 85. Oginni, O. A., Mosaku, K. S., **Mapayi, B. M.,** Akinsulore, A., & Afolabi, T. O. (2017). Depression and Associated Factors Among Gay and Heterosexual Male University Students in Nigeria. *Archives of Sexual Behavior*, 1-14.
 86. **Olufunmilola, B. O.,** Odunayo, A. J., & Arlette, S. F. (2017). Changes in women's status and fertility behaviour in sub-Saharan Africa (SSA): a decomposition analysis. *Gender and Behaviour*, 15(1), 8197-8216.
 87. Omole, O., **Ijadunola, M. Y.,** Olotu, E., Omotoso, O., Bello, B., Awoniran, O., ... & Fatusi, A. (2017). The effect of mobile phone short message service on maternal health in south-west Nigeria. *The International Journal of Health Planning and Management*.
 88. Pastakia, S. D., Manyara, S. M., Vedanthan, R., Kamano, J. H., **Menya, D.,** Andama, B., ... & Laktabai, J. (2017). Impact of bridging income generation with group integrated care (BIGPIC) on hypertension and diabetes in rural Western Kenya. *Journal of general internal medicine*, 32(5), 540-548.
 89. **Philbert, A.,** Lyantagaye, S. L., Pradel, G., Ngwa, C. J., & Nkwen-gulilla, G. (2017). Pyrethroids and DDT tolerance of Anopheles gambiae sl from Sengerema District, an area of intensive pesticide usage in north-western Tanzania. *Tropical Medicine & International Health*, 22(4), 388-398.
 90. Shodimu, M. A., Yusuf, O. B., **Akinyemi, J. O., Fagbamigbe, A. F.,** Bamgboye, E. A., Ngige, E., ... & Bashorun, A. (2017). Determinants of perceived stigmatizing and discriminating attitudes towards people living with HIV/AIDS among women of reproductive age in Nigeria. *Journal of AIDS and HIV Research*, 9(6), 139-151.
 91. Somotun, O. A. A., Osungbade, K. O., **Akinyemi, O. O., Obembe, T. A.,** & Adeniji, F. I. (2017). What factors influence the average length of stay among stroke patients in a Nigerian tertiary hospital?. *The Pan African medical journal*, 26.
 92. **Tamale, A.,** Ejobi, F., Muyanja, C., Naigaga, I., Nakavuma, J., Drago, C. K., & Amulen, D. R. (2017). Sociocultural factors associated with fish consumption in Lake Albert fishing community: Guidelines for lead and mercury. *Cogent Environmental Science*, 3(1), 1304604.
 93. **Thomas, O. E.,** & Mustapha, A. K. (2017). Development of a visible spectrophotometric method for the assay of methyl-dopa following oxidative coupling with N-(1-naphthyl) ethylenediamine dihydrochloride. *Nigerian Journal of Pharmaceutical Research*, 11(1), 147-153.
 94. Tshuma, N., & **Nyasulu, P.** (2017). P4. 75 Exploring the relationship between social factors and treatment adherence among clinically stable art patients: structural equation modelling technique.
 95. Tshuma, N., Muloongo, K., Nkwei, E. S., Alaba, O. A., Meera, M. S., Mokgobi, M. G., & **Nyasulu, P. S.** (2017). The mediating role of self-efficacy in the relationship between premotivational cognitions and engagement in multiple health behaviors: a theory-based cross-sectional study among township residents in South Africa. *Journal of multidisciplinary healthcare*, 10, 29.
 96. Uthman, O. A., **Adedokun, S. T.,** Olukade, T., Watson, S., Adetokunboh, O., Adeniran, A., ... & Wiysonge, C. S. (2017). Children Who Have Received No Routine Polio Vaccines in Nigeria: Who Are They and Where Do They Live?. *Human Vaccines & Immunotherapeutics*, (just-accepted).
 97. **Wandera, S. O.,** Clarke, K., Knight, L., Allen, E., Walakira, E., Namy, S., ... & Devries, K. (2017). Violence against children perpetrated by peers: a cross-sectional school-based survey in Uganda. *Child Abuse & Neglect*, 68, 65-73.
 98. Weny, G., Okwee-Acai, J., Okech, S. G., **Tumwine, G.,** Ndyana-bo, S., Abigaba, S., & Goldberg, T. L. (2017). Prevalence and Risk Factors Associated with Hemoparasites in Cattle and Goats at the Edge of Kibale National Park, Western Uganda. *Journal of Parasitology*, 103(1), 69-74.
 99. **Zakumumpa, H.,** Bennett, S., & Ssengooba, F. (2017). Alternative financing mechanisms for ART programs in health facilities in Uganda: a mixed-methods approach. *BMC health services research*, 17(1), 65.
 100. **Zakumumpa, H.,** Bennett, S., & Ssengooba, F. (2017). Modifications to ART service delivery models by health facilities in Uganda in promotion of intervention sustainability: a mixed methods study. *Implementation Science*, 12(1), 45.

Calendar of activities: January - December 2017

Activity	Date	Venue
JAS 1 Cohort 7 JAS 4 Cohort 4	27 February – 22 March, 2017	Makerere University, Uganda
15th CARTA Board of Management Meeting	21 March, 2017	Makerere University, Uganda
Institutionalization Finalists' Meeting	22-23 May, 2017	Nairobi, Kenya
Vice Chancellors' Meeting	10-11 July, 2017	Nairobi, Kenya
Faculty and Administrators' Workshop	17 – 19 July, 2017	University of Rwanda
DELTAS Annual Meeting	3-5 July, 2017	Accra, Ghana
JAS 3 Cohort 5	31 July - 23 August, 2017	University of Ibadan, Nigeria
8th CARTA Partners' Annual Forum	18-19 September, 2017	Nairobi, Kenya
16th CARTA Board of Management and Funders' Meeting	20 September, 2017	Nairobi, Kenya
CARTA Graduate Workshop	25-29 September, 2017	Nairobi, Kenya
JAS 2 Cohort 7	6 – 29 November, 2017	University of the Witwatersrand, South Africa
Supervisors' Training	27- 30 November, 2017	University of the Witwatersrand, South Africa



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Emmanuel Otukpa | Eunice Kilonzo | Evelyne Kemunto | James Kisia | Justus Musasiah
Lauren Gelfand | Mercy Ndwiga | Peter Ngure | Shylee Mbuchucha

Contact us:

Consortium for Advanced Research Training in Africa

African Population & Health Research Center

APHRC Campus, 2nd Floor, Kirawa Road, off Peponi Road

P.O. Box 10787-00100, Nairobi, Kenya

Telephone: +254 (20) 400 1000, 266 2244, or 266 2255 | Mobile: +254 722 205 933, 733 410 102

E-mail: carta@aphrc.org | Website: www.cartafrika.org

