

# Contents

1. *Documents on capacity building*

2. *Organizations:*

- The New Partnership for Africa's Development
- Capacity4Dev group: Capacity Development & Technical Cooperation Reform
- UNDP Capacity Development
- OECD-CD Alliance
- The African Capacity Building Foundation (ACBF)
- THET- a UK similar initiative
- IANPHI
- EADI
- COHRED

3. *Outline of capacity-building work amongst EAGHA members*

### **Articles and documents on capacity-building :**

- [Southern Perspectives on Capacity Development](#), Issues Brief 6. December 2009.
- Global Health Partnerships. The UK contribution to health in developing countries. (28 page). Crisp, Nigel. February 2007. [http://www.ansa-africa.net/uploads/documents/publications/Global\\_Health\\_Partnerships.pdf](http://www.ansa-africa.net/uploads/documents/publications/Global_Health_Partnerships.pdf)
- Ethics and Best Practice Guidelines for Training Experiences in Global Health. Crump, John et al. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2990028/>
- Guidelines for Research in Partnership with Developing Countries: 11 Principles [http://www.kfpe.ch/download/Guidelines\\_e.pdf](http://www.kfpe.ch/download/Guidelines_e.pdf)
- The Royal Society. Knowledge, networks and nations. Global scientific collaboration in the 21<sup>st</sup> century. [http://royalsociety.org/uploadedFiles/Royal\\_Society\\_Content/Influencing\\_Policy/Reports/2011-03-28-Knowledge-networks-nations.pdf](http://royalsociety.org/uploadedFiles/Royal_Society_Content/Influencing_Policy/Reports/2011-03-28-Knowledge-networks-nations.pdf)
- Indicators of sustainable capacity building for health research: analysis of four African case studies. Health Research and Policy Systems. I Bates et al. 2011. <http://www.health-policy-systems.com/content/9/1/14>
- Evaluation of a learner-designed course for teaching health research skills in Ghana. I Bates et al. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1913503/>
- Evaluating Health Research Capacity-building: an evidence-based tool. I Bates et al. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1502158/>
- Research Partnerships in International Health: Capitalizing on Opportunity. EM Rathgeber. March 2009. <http://berlin.tropika.net/public-access/stakeholders-meeting/background-papers/background-paper.pdf/view>
- **Submitted for publication :**

### ***Assessing and strengthening African universities' capacity for doctoral programmes***

#### *Authors:*

I Bates, R Phillips, R Martin-Peprah, G Kibiki, O Gaye, K Phiri, H Tagbor, S Purnell

National policy makers rely on high quality, locally-generated research to prioritise and address health needs. Universities contribute to improving the health outcomes of their local population by training researchers and providing them with an enabling research environment. Very few universities in low-income African countries are able to 'home grow' adequate numbers of high-class researchers to generate the amount of new knowledge required for decision-making. There is however, little understanding in the international academic community about the policies and processes that are needed to develop research capacity in different contexts, and there is no single tool that can be used to evaluate all the components required for a successful doctoral programme. It is therefore difficult for universities to develop any coherent plan to identify and remedy deficiencies in their policies and processes for doctoral programmes.

We have used published literature to develop a draft tool to evaluate doctoral programmes from multiple perspectives. We refined the tool by testing it in five African universities. The final tool, which consisted of questions mapped to specific interviewees and a review of documents and facilities, enabled the universities to identify gaps in their provision for

doctoral programmes and to develop and monitor their own strategies to address these gaps. Gaps that could not easily be rectified by the universities themselves formed a well-defined and measurable strategy that universities could use to justify, commission and monitor inputs by external funders while retaining leadership of the process.

### **Organizations:**

#### **The New Partnership for Africa's Development**

<http://www.nepad.org/crosscuttingissues/capacitydevelopment>

The Capacity Development Programme prioritises the AU/NEPAD Capacity Development Strategic Framework (CDSF) through all its work, including through collaboration with academic institutions and other stakeholders

The AU/NEPAD Capacity Development efforts are aimed at setting in motion processes that will allow for sustained success in capacity development in Africa focusing on the following:

- Addressing Africa's real capacity challenges in a sustainable manner through a strategic, long term perspective that focuses on organisational systems rather than on individuals or hardware alone;
- Working towards fundamental transformation, re-orientation, re-alignment and strengthening of the African institutional framework to enable both the public and private sectors to respond effectively to new demands and expectations arising from Africa's challenges and positioning in a globalising world;
- To promote the adoption and application of the CDSF tool by countries and institutions to achieve transformation.
- The Capacity Development Initiative is developing targeted interventions with stakeholders and sector groups, including:
- Capacity support to agricultural parliamentarians.
- **Capacity support to African universities**, tertiary and research institutions with the aim of improving their relevance to national, sub-regional and the continent's development agenda.

An annual *State of Capacity Development in Africa Report* (Africa-CDR) will be published annually, starting at the end of 2011.

#### **Capacity4Dev group: Capacity Development & Technical Cooperation Reform**

<http://www.capacity4dev.eu/topic/capacity-development-technical-cooperation-reform>

**UNDP Capacity Development** <http://www.undp.org/capacity/>

#### **OECD-CD Alliance** (OECD Capacity Development Alliance)

[http://www.oecd.org/document/55/0,3343,en\\_2649\\_34565\\_43338103\\_1\\_1\\_1\\_1,00.html](http://www.oecd.org/document/55/0,3343,en_2649_34565_43338103_1_1_1_1,00.html)

The CD Alliance is an informal and flexible forum for Southern political leaders to discuss, share experiences, and identify best practices for capacity development.

objectives:

- assemble a representative base of Southern perspectives on issues of capacity development
- use priority international/regional forums and events to communicate Southern Perspectives on capacity development

- influence the learning and consolidation processes on best practices and approaches in relations to the capacity development priorities of the AAA

**The African Capacity Building Foundation (ACBF)**

<http://www.acbf-pact.org/approach-to-capacity-building.aspx>

**THET- a UK initiative**

<http://www.thet.org/health-links/about-links/>

**IANPHI (International Association of National Public Health Institutes)**

<http://www.ianphi.org/who-we-are/>

**EADI (European Association of Development Institutes) [www.eadi.org](http://www.eadi.org)**

**COHRED (Council on Health Research for Development) [www.cohred.org](http://www.cohred.org)**

---

## **EAGHA Partnership and Capacity Strengthening Activities**

(survey results from December 2010)

**You'll find below institutional responses to the following two questions:**

1. Please give the title and brief outline of the two largest projects.  
*\*Answers for this were inserted into this report only if they were partnerships with South institutions or had a clear capacity building component.*
2. Does the institution participate in capacity development/ strengthening activity in collaboration with low /middle income countries? In which topic areas? With which countries/institutions?

**Although this does not capture the breadth of partnerships of capacity strengthening activities, it may provide some insight into specific projects occurring across EAGHA members. Results are printed in the words of the responding institutions themselves, with modifications only in order to be concise.**

Brighton and Sussex Medical School .....	7
Institute for Global Health of Barcelona (ISGLOBAL) / Universitat de Barcelona.....	7
University of Belgrade, Faculty of Medicine, Center School of Public Health .....	9
School of Public Health, Bielefeld University.....	9
Braun School of Public Health & Community Medicine, Jerusalem, Israel.....	9
Charité Berlin School Public Health (BSPH).....	12
Division of Public Health, Institute of Psychology, Health and Society, University of Liverpool .....	12
Ecole des Hautes Etudes en Santé Publique-EHESP School of Public Health .....	13
Escuela Nacional de Sanidad (ENS Spanish National School of Health) .....	13
Institute of Global Health Innovation (IGHI) (Imperial College London) .....	14
Institute of Tropical Medicine and International Health Berlin.....	15
Liverpool School of Tropical Medicine.....	16
LSHTM (London School of Hygiene and Tropical Medicine) .....	16
Department of International Health, Maastricht University .....	18

Institute of Public Health and Preventive Medicine - Catholic University "Sacro Cuore" .....	19
Department of Public Health, University of Turin .....	19
Centre for International Health, University of Bergen .....	21
University College London .....	21
Faculty of Public Health, Medical University of Varna, Bulgaria.....	23
National Institute of Public Health, Warsaw.....	23
Network of 3 centres : Centre for Tropical Diseases of the “Fondazione don Giovanni Calabria per le Malattie Tropicali”, the Clinica di Malattie Infettive e Tropicali, University of Firenze, Ospedale di Careggi .....	24
Institute of Public Health, Heidelberg University.....	23
Institute of Tropical Medicine, Antwerp, Belgium.....	28
University of Ghent, Belgium.....	31

## Brighton and Sussex Medical School

### Two largest projects.

1. TB genetics in The Gambia: characterising infant responses to neonatal BCG in The Gambia and conducting a genome scan in a twin cohort to identify chromosomal regions linked to immune responses. Funded by the Wellcome Trust and the British Lung Foundation.
2. Podoconiosis in Ethiopia: Podoconiosis (non-infectious geochemical elephantiasis) is a chronic tropical disease that resembles filariasis. Research includes multi-case family analysis estimating the heritability of podoconiosis; genetic studies to identify the gene involved; qualitative research to explore issues around the consent process and conducting ethical genetic research in one of the poorest regions of Ethiopia where few individuals have received any formal education. Funded by the Wellcome Trust.

Partnership with low and middle income countries to strengthen collaboration, promote long term capacity development and impact global health policy and practice are central to all our research and teaching activities. A specific example is:

1. Lusaka Link Project – Along with Brighton and Sussex University Hospitals NHS Trust, we have a link with the University Teaching Hospital Lusaka and the School of Medicine, University of Zambia to foster collaboration in education, research and clinical practice. This link has led to bilateral visits by practitioners from both countries, the exchange of medical students on clinical electives and a successful HIV nurse education project funded through the joint DFID/British Council Development partnerships in Higher Education (DeLPH) scheme.
- 

## Institute for Global Health of Barcelona (ISGLOBAL) / Universitat de Barcelona

*\*The recently created “Institute for Global Health of Barcelona” (ISGLOBAL) includes the “Barcelona Centre for International Health Research” (CRESIB).*

### Two largest projects

1. Mal055: A phase III, double-blind (observer-blind), randomized, controlled multi-centre study to evaluate, in infants and children, the efficacy of the RTS,S/AS01E candidate vaccine against malaria disease caused by *Plasmodium falciparum* infection across diverse malaria transmission settings in Africa.

RTS,S is the world’s most advanced malaria vaccine candidate and the first to demonstrate in clinical trials that it can protect young children living in malaria-endemic areas against infection and clinical disease caused by *Plasmodium falciparum*. This vaccine was created in 1987, and CRESIB together with the Manhíça Health Research Centre (CISM) is working since 2002 in the clinical development of the vaccine, in collaboration with PATH Malaria Vaccine Initiative (MVI) and GlaxoSmithKline Biologicals (GSK).

In 2003, the first phase IIb trial in Mozambican children aged 1 to 4 years old was initiated and has proven that RTS,S reduces the incidence of clinical malaria episodes (35,3%), and severe malaria (48,6%) for a period of 18 months post vaccination.

CRESIB and CISM carried out the first I/IIb clinical trials in infants to evaluate safety, efficacy and immunogenicity which results were published in 2007, proving that the vaccine is safe, well tolerated and efficacious against new infections (65,9%) in this age group.

In May 2009 GSK, PATH MVI and 11 leading African research centers launched a Phase III trial of GSK's RTS,S malaria vaccine candidate, known as the MAL055 study, in Mozambique and six other African countries, with an enrolment target of 16.000 children and infants.

The main objectives of this study are to continue evaluating safety, efficacy and immunogenicity of the candidate vaccine, this time in different conditions of malaria transmission and if the results are favourable, they will allow for its licensing in the near future.

## **2. The *Plasmodium vivax* Consortium:**

*Plasmodium vivax* is geographically the most widely distributed cause of malaria in people, with up to 2.500 million people at risk and an estimated 80 million to 300 million clinical cases every year, including severe disease and death. Despite this large burden of disease, *P. vivax* is overlooked and left in the shadow of the enormous problem caused by *Plasmodium falciparum* in sub-Saharan Africa. As a consequence, there are substantial gaps of knowledge on the clinics, epidemiology and physiopathology of the infection caused by this parasite.

The *Plasmodium vivax* Consortium is a four year program coordinated by CRESIB and funded by Fundació Cellex with the objective of improving the knowledge on *P.vivax* malaria and accelerating the development of new control tools, especially vaccines. The consortium is formed by 6 institutions from 5 different countries (Papua New Guinea, India, Brazil, Colombia and Spain), focused on 5 specific objectives:

- Carry out prospective longitudinal studies on the epidemiology of *P.vivax* malaria in two regions with different transmission: Brazil and Papua New Guinea.
  - Study the natural immunity against *P.vivax* antigens and identify immune responses correlated with clinical protection
  - Study the pathological spectrum caused by *P.vivax* malaria with the objective of defining severity criteria for malaria caused by this parasite.
  - Identify new vaccine candidates against the *P. vivax* asexual erythrocytic stages
  - Support the clinical development of the 2 currently more advanced *P.vivax* candidate vaccines, based on the Duffy binding protein (PvDBP) and the circumsporozoite protein (PvCSP)
- 

### **Capacity strengthening:**

ISGLOBAL carries out capacity strengthening activities mainly in Mozambique, Morocco, Bolivia and Peru. The areas of intervention are the reinforcement and consolidation of national biomedical research structures and institutions and the development of academic programmes and courses in biomedical research related disciplines.

In Mozambique, the partnership with the Manhica Health Research Centre (CISM) and Fundação Manhica includes the support to the CISM organization, management and scientific programme

definition and implementation. Besides, a Master and PhD fellow's programme is offered to young researchers committed to develop their professional careers in Mozambican institutions and local research initiatives.

We also have a training programme in health sciences in collaboration with the Eduardo Mondlane University for skill development and strengthening of academic capacities in the Faculty of Medicine

In Morocco, the biomedical research capacity development is focused in the creation and implementation of a research laboratory in the University Hospital of Rabat, focused in mother and child communicable diseases. Activities of technology transfer; equipment, training and professional exchanges are also part of this programme. In training, the collaboration with the INAS ("Institut National d'Administration Sanitaire") includes the creation of a Postgraduate diploma in Epidemiology and Public Health. The Master and PhD fellow's programme is also offered in Morocco.

In Bolivia, research capacity strengthening is focused in Chaga's disease. A specialised research, training and medical assistance platform for Chagas disease and Chagas patients is being developed with the Universidad Mayor de San Simón and Viedma Hospital in Cochabamba and with the Chagas National Control Programme of the Ministry of Health.

In Perú, the research laboratory of microbiology of the Cayetano Heredia University is being equipped and a training programme in new lab techniques is being developed.

We collaborate with more than 60 academic centres in more than 30 different countries.

---

## University of Belgrade, Faculty of Medicine, Center School of Public Health

### Capacity strengthening:

- CIS (Tajikistan, Uzbekistan), SEE, Pacific region (via WFPHA), Ethiopia (13th World Congress via membership in the International Scientific Committee)
  - Topics: Curriculum development in public health, health management and health promotion; development of performance standards and competencies, building of research capacity, RAR and SWApS in the health sector
- 

## School of Public Health, Bielefeld University

### Two largest projects

1. University Partnership India-Turkey-Nigeria (Funded by German Academic Exchange Service)
  2. ACBRIDGE – Bridging Academic Institutions, PhD programme partnership with University of Accra, Ghana (Funded by German Academic Exchange Service)
- 

## Braun School of Public Health & Community Medicine, Jerusalem, Israel

In recognition of our ongoing public health efforts in Israel and abroad, the World Health Organization designated the School as a WHO Collaborating Centre for Capacity Building in Public Health.

To date, our International MPH degree has been awarded to over 700 graduates from 90 countries in developing and transition regions of Africa, Asia, Latin America, and central and eastern European former socialist countries, as well as high-income countries of North America and Western Europe (see country list below).

Given the number of graduates, where they come from, and the work they do upon their return, the IMPH has had real and sustainable impact on public health in developing countries (see sample of alumni below). As but one recent example, a cholera prevention program developed by a group of 2008/9 IMPH students in one of their courses, was utilized by the Kenyan Red Cross in displaced persons camps during the recent political crisis in Kenya, and was found to be highly effective in prevention and management of the disease. The International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Movement (IFRC) have adopted the program and are implementing it beyond the camps.

Together with our graduates we have played active roles in establishing schools of public health and public health training programs in numerous countries including Albania, Macedonia, Moldova, Mongolia, the Philippines, Ethiopia, and Russia. In 2002, the Braun SPH hosted a conference on development of new schools of public health in Eastern Europe and former Soviet countries. The Proceedings of these conferences were published as special issues of *Public Health Reviews*.

Tulchinsky T.H. [editor]. Proceedings of the Israeli-Palestinian Conference on Micronutrient Deficiency Conditions and their Prevention. *Public Health Reviews*. 2000;28:1-264.

Tulchinsky T.H, Epstein L, Normand C [eds]. Developing New Schools of Public Health in Countries of Eastern Europe and the Newly Independent States. *Public Health Reviews*, 2002;1-4:1-295.

### **International PhD Program**

The Braun SPH also has a doctoral program for students from LIC/MICs. Like our IMPH students, all PhD students from LIC/MICs receive scholarships to complete their research on a public health issue relevant to their own country.

### **Other International Training Activities**

Alongside our MPH training programs, we regularly carry out training workshops on various health topics in countries Africa, Eastern Europe, and Asia, and host short-training courses in Jerusalem for health-professionals from developing and transition countries.

Since 2001, the Braun School has conducted annual Visiting Faculty Workshops with over 100 participants from former-Soviet Union and Asian countries. The main objective of these workshops is to familiarize mid-level and senior-level faculty and managerial personnel from countries who are developing new schools of public health with the culture, content and teaching methods of public health in a western country and in a school with longstanding and strong international experience. In 2008, for example, a series of workshops were conducted for physicians and hospital directors from the Chinese Qing Hai and Guizhou provinces, and from the Kazakh Ministry of Health.

Responding to a request from the Open Health Institute of Moscow, in 2007, the Braun School organized a bi-lateral workshop on Migrant Health with special emphasis on HIV, TB, sexually transmitted diseases, vaccines, as well as legal aspects, health education and insurance, women trafficking and advocacy. The workshop was attended by Russian participants from government, research institutes and NGOs, and numerous Israeli professionals from academia, the Ministry of Health and other governmental agencies, as well as NGOs involved with migrants.

In February 2010, we hosted a 10-day continuing-education workshop for 20 African graduates of our IMPH Program. As part of the workshop, we held a one-day symposium on "Health in Africa 2010" that was also

attended by public health experts from South Africa and from Kenya, and health professionals, academics and students from numerous Israeli universities, governmental agencies and NGOs.

In parallel to these on-site training and education activities, members of the School's faculty often travel abroad to lecture on issues ranging from HIV/AIDS prevention, community-oriented primary care, health behavior, advanced research methods, and more. By way of illustration, two Braun faculty members - Professor Elliot Berry (Head, WHO Collaborating Centre for Capacity Building in Public Health) and Dr. Ronny Shtarkshall conducted a 2-week seminar in Kumasi, Ghana on the topic of "Prevention and management of lifestyle related diseases through cultural adaptation". Twenty-five health professionals – doctors, nurses, nutritionists, pharmacists and laboratory technologists – worked on projects concerning nutrition, smoking prevention, hypertension screening and environmental health. The seminar was co-sponsored by the Millennium Cities Initiative of Columbia University Earth Institute in New York, and the Center for International Cooperation and Development of the Ministry of Foreign Affairs of Israel (MASHAV).

Since 2002, Professor Elihu D. Richter has been centrally involved in the development and conduct of annual and semi-annual courses for practitioners of occupational and environmental medicine at Maulina Azad Medical College (MAMC) (Delhi—contact: Professor TK Joshi), and sponsored by MAMC for specialists in safety, occupational hygiene and nursing around India. The Indian side of this program has been funded by USAID and the Indian Government. Professor Richter also lectures at the Fattal Medical College, Kamsarat in Gujarat State. He participates in ongoing activities to promote ban of asbestos manufacture and use in India via the Collegium Ramazzini. A medico-legal opinion he submitted to an NGO served as the basis for Supreme Court ruling on the health effects of exposure to silica and silicosis among stone cutters in and around Delhi. He is currently working with these and other institutions to develop a joint Indian-Israel Life Corps project in capacity building, training and volunteer work in public health, community safety, sanitation and education for Israeli young travelers in India.

Several senior faculty members have ongoing collaborative scientific research projects with Palestinian researchers. Examples of such scientific collaboration include an extensive investigation of childhood lead exposure in the Palestinian Authority, Israel, and Jordan which was spearheaded by Professor Elihu Richter of our School, Professor Jamal Safi of the Environmental Protection and Research Institute in Gaza, Dr. Sameer El Haj of the Birzeit University, and Dr. Madi Jaghabir of the Jordan University in Amman, with cooperation and funding from U.S. Agency for International Development, Health Canada, New York University, and several medical centers in Israel and the US. See for example: Safi J, Fischbein A, El Haj S, Sansour R, Jaghabir M, Hashish MA, Suleiman H, Safi N, Abu-Hamda A, Witt JK, Platkov E, Reingold S, Alayyan A, Berman T, Bercovitch M, Choudhri Y, Richter ED. Childhood lead exposure in the Palestinian authority, Israel, and Jordan: results from the Middle Eastern regional cooperation project, 1996-2000. *Environ Health Perspect.* 2006 Jun;114(6):917-22.

The Cooperative Project on Leishmaniasis in Israel and the West Bank is a multi-disciplinary, long-term, comprehensive collaborative study of leishmaniasis linking Hebrew University and Al-Quds researchers with colleagues from Egypt, Jordan, Morocco and Tunisia. Among the principal investigators are Professor Charles Greenblatt of our School, and Professor Ziad Abseen and Dr. Khaldoun Bader (a graduate of our IMPH Program) of the Al-Quds University. This project has resulted in more than sixty peer-reviewed scientific publications to date, most recently: Jacobson RL. Leishmaniasis in an Era of Conflict in the Middle East. *Vector Borne Zoonotic Dis.* 2010 Sep 16.

Professor Harold Sgan-Cohen continues to work with Palestinian colleagues on the promotion of oral health and caries prevention among Palestinian children.

## Charité Berlin School Public Health (BSPH)

Teaching: Master of Science in Public Health (Health&Society: Gender and Diversity Studies) is an international program with participants in particular from low and middle income countries. The program addresses topics of international and global public health.

The BSPH and its members are involved in numerous international collaborations. The guest professors in the Health&Society program (Rahel-Hirsch guest professor) come from high but also from low income countries (South Africa, Bangladesh). The BSPH has a collaboration network with middle income countries in Eastern Europe.

---

## Division of Public Health, Institute of Psychology, Health and Society, University of Liverpool

### Two largest projects.

#### 1. Improving child survival through enhanced understanding of barriers to health care access in rural Guatemala

To better understand the reasons for low uptake of medical care for critical childhood diseases in rural Guatemala, and work with community and service stakeholders to initiate change at local and national levels.

The objectives of this study are to:

- Conduct mapping and assessment of health care provision;
- Describe providers' perspectives on reasons for low uptake of health care among children under-5, for antenatal care and care around the time of birth among pregnant women.
- Identify which social, economic, cultural, and related factors are the principal determinants of care seeking for childhood illness, antenatal care, and care around the time of delivery;
- Investigate pathways through care (all providers), and reasons, for cases of ALRI and diarrhoea, including deaths, and complications during pregnancy and birth,
- Engage with communities and health service stakeholders (local and national) to feed back findings to inform practical measures and policies for improving access.

The study is now nearing completion and we have applied for additional funding to work with the local Ministry of Health to develop new ways of improving health service access.

2. ALPS (Affordability Ladder Program), a policy research initiative funded by the Rockefeller Foundation in New York. The aim is to conduct policy analyses of health sector reforms, focusing on affordable access to health care and the prevention of the medical poverty trap in rich as well as low-income countries. Countries involved in this program include India, Sri Lanka, Vietnam, China, United Kingdom, Sweden, South Africa, Tanzania and Uganda

### Capacity strengthening :

Capacity strengthening is done insofar as this relates to research strengthening in relation to access to healthcare. Partners include University del Valle, Guatemala (Access study)

In relation to the ALPS project, there are project partners in Sri Lanka, China, Uganda, South Africa, India, Vietnam, and Tanzania. For a full listing, please follow the link below.

[http://www.liv.ac.uk/PublicHealth/alps/root/affordability%20ladder%20program%20-%20ALPS/research%20and%20partners/alps\\_partners\\_page\\_141204.pdf](http://www.liv.ac.uk/PublicHealth/alps/root/affordability%20ladder%20program%20-%20ALPS/research%20and%20partners/alps_partners_page_141204.pdf)

## Ecole des Hautes Etudes en Santé Publique-EHESP School of Public Health

### Two largest projects.

1. **CoPanFlu International:** multi-country cohort study identifying the epidemiologic, environmental, immunologic, social, genetic and virologic determinants of risk for A(H1N1)-swl virus infection at the individual level
2. **Strategic partnerships with LIC / MICs:** In 2009, EHESP has engaged into very close collaborations with three LIC: Laos, Mali and Bolivia, where the School will develop a range of research and training activities related to public health. In May 2010, a small EHESP branch center was inaugurated in Vientiane, Laos.

### Capacity strengthening :

- Hospital management (Chile), healthcare establishments management (13 French-speaking African countries), strategic planning and health services (Rwanda), professionals in environmental health (Morocco), health administration and inspection bodies (Morocco, Romania), care for disabled children (Romania); currently: capacity building of health service managers in management and epidemiology (Laos), hospital management (Vietnam)
  - Institutions: Ministries of Health (Chile, Morocco, Romania, Rwanda), Schools of Administration (ENA-CI Ivory Coast's National School of Administration)
- 

## Escuela Nacional de Sanidad (ENS Spanish National School of Health)

### Two largest projects :

1. Fight against Aids and other prevalent illness among disadvantaged populations in Guatemala, El Salvador, Honduras, Nicaragua, República Dominicana and Haiti. Financing Institution: The Spanish Agency for Cooperation & Development (AECID). External Budget: 176,061.68€ per year for 4 years.
2. Barriers for access to Palliative Care in highly disseminated population areas. Financing Institution: Universidad Nacional Autónoma de México (they are paying for a 1-year stage of an associate Mexican researcher in our school) Investigadora principal: Belén Sanz. ENS. External Budget: 4.025 €

### Capacity strengthening :

- Epidemiology, public health, health systems, and service development
  - Most of the Latin American countries, Equatorial Guinea, Mali, Ethiopia, Mozambique
-

## Institute of Global Health Innovation (IGHI) (Imperial College London)

- Please note that IGHI was launched on 01/10/10 and is in its developing stages. Teaching programmes etc. will be established over the next year

### Two largest projects :

- [Microbicide Development Programme](#) (MDP) African-European partnership to develop vaginal microbicides to reduce the risk of HIV infection in women.
- [Schistosomiasis Control Initiative](#) (SCI) aims to control or eliminate the [seven most prevalent NTDs](#) from sub-Saharan Africa

### Capacity strengthening :

Staff are involved in supporting capacity development in collaboration with a number of low / middle income countries in particular in health worker training in infectious diseases control, emergency triage, critical care, chronic disease, mathematical modelling and epidemiology etc. in the following countries:

Country	Institution link
Kenya	KEMRI Wellcome Trust Research Programme
Peru	Universidad Peruana Cayetana Heredia AB Prisma
Uganda	Malaria Consortium MRC Entebbe JCRC Kampala Infectious Diseases Institute Makerere University Mbale, Mulago, Soroti, Lacor District Hospitals
Tanzania	National Institute of Medical Research Institute Mbeta Medical Research Programme
Ethiopia	University of Addis Ababa
Rwanda	University Teaching hospital of kigali (CHUK)
Brazil	Centro de investigacao em Saude Manhica
South Africa	The university of Kwazulu-Natal Wellcome Trust Africa Centre University of Witwatersrand University of Cape Town Red Cross Children's Hospital Cape Town
Gambia	The MRC Centre, Gambia

Other countries include Burundi, Mali, Niger, Egypt, Vietnam and Zimbabwe, Mali, Malawi, Burkina Faso. Staff are involved in supporting and developing junior researchers with much needed skills in economic evaluation and policy analysis in Senegal, Gambia, Ghana and India. More specifically the Centre for Health Policy collaborates with a number of international agencies in strengthening

capacity, including the World Bank and the World Health Organization, particularly on topics related to health system performance assessment and health system financing.

---

## Institute of Tropical Medicine and International Health Berlin

### Two largest projects:

#### 1. Prevention of Mother-to-Child Transmission of HIV (PMTCT) in East-Africa

With support of the German Ministry of Cooperation, a PMTCT program was established in Kenya, Tanzania and Uganda, offering pregnant HIV-positive women and their newborns antiretroviral drugs during pregnancy, delivery and in the postpartum period. Within this program, several research cohorts have been established and numerous research questions have been addressed, as regarding the following topics:

- KAPB studies on mother-to-child transmission in different population groups
- Practice of infant nutrition in areas with high prevalence of HIV
- Minimal requirements for the implementation of PMTCT programs
- Analysis of different strategies of nevirapine administration
- Comparison of different methods to simplify treatment monitoring
- Cost-benefit analyses
- Male partner involvement into PMTCT services
- Analysis of factors influencing the vertical transmission (point of time of nevirapine intake, relationship of viral load and nevirapine concentration in different body compartments such as plasma, breast milk, vaginal- and oropharyngeal secretions)
- Resistance formation in breast milk and plasma of mothers and children
- Analysis of clinical, immunological, virological treatment outcome in the patient groups of 3 countries in Eastern Africa
- Side effects of treatment in the patient groups in Eastern Africa
- Adherence to treatment in peripheral areas of Eastern Africa

Currently, data from a study regarding feasibility, side effects and outcomes of combination prophylaxis according to new PMTCT guidelines in a rural hospital in Mbeya Region, Tanzania, is being analysed.

#### 2. Clinic and Research Partnership with Butare, Ruanda

Since March 2009, an "ESTHER"-partnership has been established between University hospital of Butare (Centre Hospitalier Universitaire Butare, CHUB), Ruanda, and the Institute of Tropical Medicine Berlin. The partnership involves the implementation of research projects in the following areas:

- HIV, malaria, geohelminths and malnutrition: In a pilot study in spring 2010, 750 children from the Butare area were examined. Preliminary data reveal high prevalences of geohelminths, malnutrition, anaemia, and also of malaria. Further typing of host and parasite specimens is ongoing.

- Based on the analysis of disease prevalence data (HIMAGEMEMA phase I), an applied research proposal on common, poverty-related neglected diseases, HIV/AIDS, malnutrition and/or anaemia is currently being developed with CHUB.

### Capacity Strengthening

- Capacity development and strengthening in fields like HIV prevention, counseling strategies, HIV testing, drug administration, infant feeding, family planning, M&E, etc. in PMTCT program Mbeya Region, Tanzania. Involving doctors, nurses, counselors, midwives, laboratory technicians; training takes place on a continuous basis. Support of key local staff in achieving postgraduate degrees (MPH).
  - Clinical and research partnership (exchange of staff for clinical management, laboratory techniques etc.; research on HIV, malaria, helminth infection, malnutrition - University Hospital Butare, Ruanda.
  - Clinical and research partnership with capacity development and strengthening of HIV management, neonatology, data analysis, statistics, laboratory techniques; exchange of staff; research on HIV, malaria; joint supervision of PhD students etc. - Virika Hospital Fort Portal, Uganda.
  - Research partnership (laboratory techniques, PhD student exchange) - Univ. of Hyderabad, India
  - Research partnership on maternal health, specifically quality of maternal health, and cluster-randomised controlled trial methodology with the Centre for Research on Human Reproduction and Demography/Benin, Centre Muraz/Burkina Faso, and the Ministry of Health/Niger
- 

## Liverpool School of Tropical Medicine

### Two largest projects

Innovative Vector Control Consortium (IVCC)- aims to overcome the barriers to innovation in the development of new insecticides for public health vector control and to develop information systems and tools which will enable new and existing pesticides to be used more effectively.

Malaria in Pregnancy Consortium (MiP)- The MiP Consortium is a global research initiative of 47 research institutions, led by the Liverpool School of Tropical Medicine, undertaking a five year programme of research (2007-2012) to evaluate new and improved existing interventions for the prevention and treatment of malaria in pregnancy

### Capacity strengthening:

Yes – many countries in Africa, Asia, Middle East and South America. Many topics e.g. public health, health systems, research, education, malaria, immunology etc

---

## LSHTM (London School of Hygiene and Tropical Medicine)

### Two largest projects

**1. The ACT Consortium** is supported by a grant for \$39,795,736.00 from the Bill and Melinda Gates Foundation through October 2012 and includes almost 50 academic institutions in Africa, Asia, Europe and the USA. The ACT Consortium is conducting a co-ordinated research programme to

identify how best to optimize the delivery and cost-effectiveness of combination drug treatment for malaria in Africa and Asia, and across a range of epidemiological and healthcare settings. This includes work on improving access to antimalarials, better targeting and diagnosis, determining drug side-effects and detecting counterfeit drugs. The research coordinated from LSHTM is being undertaken by a consortium of academic institutions including Dangwe West Research Centre in Ghana, International Health Research Development Centre in Tanzania, the Karolinska Institute in Sweden, the Liverpool School of Tropical Medicine, the National Institute of Medical Research at the University of Copenhagen, and the University of Cape Town. It is currently directed by Prof David Schellenberg.

2. The London School of Hygiene & Tropical Medicine received over \$ `14 million from the Bill & Melinda Gates Foundation to run **the IDEAS (Informed Decisions for Actions) project** which is designed to provide a better evidence base to guide future maternal and newborn health programmes. Between 2010 and 2015, the IDEAS group will work together with a series of innovative maternal and newborn implementation projects funded by the Gates Foundation in North-Eastern Nigeria, Uttar Pradesh in India, and Ethiopia, each of which has a high burden of maternal and newborn deaths.

Three questions will be addressed: 1. Have the projects been successful in enhancing interactions between families and front-line health workers? 2. Have the approaches tested in these projects been taken up more widely? If so, how? And if not, why not? 3. Where models have been scaled-up, has newborn survival improved?

Working in partnership, the IDEAS group will establish a Technical Resource Centre to enhance local capacity in measurement, learning and evaluation for improved maternal and newborn health. Existing and new data from each setting will be analysed for evidence of enhanced interactions between families and front line workers. Further, new data will be collected to investigate the extent of scale-up of health programmes for mothers and newborns, and whether survival has improved as a result. Finally, the group will disseminate best practice in learning and measurement in maternal and newborn health and promote evidence for effective decision-making.

The project is co-ordinated from the MARCH Centre for Maternal, Reproductive and Child Health at the London School of Hygiene & Tropical Medicine, and led by Joanna Schellenberg, Reader in Epidemiology & International Health at the London School of Hygiene & Tropical Medicine.

### Capacity strengthening

The LSHTM has around 120 staff are based overseas at any time, and capacity strengthening is part of all our research activities overseas.

Specific examples include:

The School participates in 4 African Institution capacity strengthening programmes funded by the Wellcome Trust :

- One Medicine Africa-UK Research Capacity Development Partnership Programme for Infectious Diseases in Southern Africa (SACIDS consortium)
- Tanzania, Mozambique, Democratic Republic of the Congo, Zambia, South Africa, Kenya and UK Director: Professor Mark Rweyemamu, Sokoine University of Agriculture, Tanzania

- Southern Africa Consortium for Research Excellence (SACORE)
- Malawi, Zambia, Zimbabwe, Botswana, South Africa and UK  
Director: Dr Newton Kumwenda, Malawi College of Medicine
- Strengthening Research Capacity in Environmental Health (SNOWS)
- Kenya, Ghana, Uganda, South Africa, Sudan, Denmark and UK  
Director: Professor Esi Awuah, Kwame Nkrumah University of Science and Technology, Ghana
- Training Health Researchers into Vocational Excellence in East Africa (THRiVE)
- Uganda, Rwanda, Tanzania, Kenya and UK  
Director: Professor Nelson Sewankambo, Makerere University, Uganda

1. The Malaria Capacity Development Consortium, funded by the Wellcome Trust and the Bill and Melinda Gates Foundation, is providing PhD training and continued mentorship to PhD students trained earlier as part of the Gate Malaria Partnership.
2. The LSHTM is currently piloting a course designed to form part of an East African Diploma in Tropical medicine and Hygiene course, which is being delivered at KCMC in Moshi Tanzania and at Makerere University, Kampala Uganda.
3. A short course on immunology and Infection has been established at UVRI in Entebbe, Uganda, delivered there and at Makerere University, Kampala, with funding from the Wellcome Trust.
4. In addition the LSHTM has longstanding links with many other institutions in Africa.
5. Capacity building activities have been a feature of DFID-funded Research Programme Consortia fun from the LSHTM.
6. UK-PHFI activities with India :

LSHTM also coordinates the UK academic collaboration with the Public Health Foundation of India, with £5million funding from the Wellcome Trust for the period 2009-2014. India Partners Public Health Foundation of India <http://www.phfi.org/> This links 4 Indian Institutes of Public Health (Delhi, Hyderabad, Gandhinagar, Shillong) with the Centre of Excellence in Chronic Diseases (Delhi), with 13 UK universities:

- UK Partners <http://phfi-uk.org/13> UK Universities
  - UK Faculty of Public Health, Health Protection Agency
- 

## Department of International Health, Maastricht University

### Capacity strengthening

- International Human Dimensions Programme on Global Environmental Change (IHDP)  
<http://www.ihdp.unu.edu/>
  - Collaborations with the Chinese Academy of Sciences
-

## **Institute of Public Health and Preventive Medicine - Catholic University "Sacro Cuore"**

### **Capacity strengthening**

On the field research on: regional comparison of country specific on type 2 diabetes (Eastern and Western Europe and Asia)-case study: Myanmar, Hungary, and Italy REGIONAL COMPARISON OF COUNTRY SPECIFIC ON TYPE 2 DIABETES (EASTERN AND WESTERN EUROPE AND ASIA) - CASE STUDY: MYANMAR, HUNGARY AND ITALY

Erasmus Mundus Master 2009-2010 Research and Internship of Drs Htun Nan Shwe New (MD in Myanmar)

---

## **Department of Public Health, University of Turin**

### **Two largest projects**

1. THE HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN (HBSC) STUDY: The HBSC research network is an international alliance of researchers and research teams that collaborate on "Health Behaviour in School-aged Children" cross-national survey of school students. This survey involves 41 countries and regions and it builds a longitudinal data base that offers a convincing picture of patterns and issues in relation to the health and well-being of young people in many parts of the world. The international HBSC research network is multidisciplinary with members coming from sociology, pedagogy, paediatrics, psychology, epidemiology, clinical medicine, human biology and public health. The ethos of the HBSC study is that the participating young people are not "subjects" to be studied, but rather are partners in creating a data base that will influence the actions of policy-makers, public health experts, teachers, parents and other key stakeholders in the countries in which they live. Periodical reports describe patterns of health and behavior with respect to gender, age, geographic and socioeconomic dimensions of health differentials and health inequalities. The findings of this study will enable health systems to review their impacts and strengthen their stewardship in relation to initiatives that affect young people's health. Results reported in periodical reports provide reliable data that health systems in Member States can use to support and encourage sectors such as education, social inclusion and housing to achieve their primary goals and, in so doing, have beneficial effects on young people's health.

2. THE DEVELOPMENT OF AN INTEGRATED BIOMONITORING APPROACH FOR THE WUHAN WATER SYSTEM: The Wuhan Water System project is an international project that involves the Department of Public Health of Turin, the Yangtze Valley Water Resources Protection Bureau (China) and the Sustainable Development Association (UK). The aim of this project is the review of the status and the adequacy of the water quality monitoring program in the Wuhan Municipal Area and the development of a permanent biological monitoring program, for the Wuhan rivers water system. The overall project objective is to introduce the bio-monitoring techniques in order to understand the effects of the environmental pollution and to support the objective of high environmental standard in water quality management. The project is developed in 4 phases:

- Phase 1 – Need Assessment Study (kick off meeting, introductory workshop, Site visit, overview of current monitoring system, needs assessment questionnaire, stakeholder interviews, press release and design of project website).
- Phase 2 – Analysis of Phase 1 Activities and development of Strategic Action Plan (analysis of needs assessment data, incorporation of proposals from Wuhan Water Monitoring Authority, development of a strategic plan for the pilot study).
- Phase 3 – Pilot Study ( establishment of a test approach, analysis of surface water body, analysis of drinking water, presentation of initial data, definition of an integrated bio-monitoring approach for Wuhan).
- Phase 4 – Dissemination of Findings to stakeholders and legislative bodies .

The EU partners gained valuable experience in working with Chinese partner organizations. This will benefit future cooperation with this region.

### Capacity Strengthening

Title: Strengthening the training capacity of the A.M. Dogliotti College of Medicine, Monrovia, Liberia

#### Background

The Republic of Liberia is a West African state that in 1989 suddenly was gripped by a terrible civil war that lasted for nearly 15 years. In 2003 the Accra Comprehensive Peace Agreement (ACPA) was signed, followed by a United Nations mission that setup a national transition government (NTGL). In Liberia there are presently circa 389 active health centres, many supported and managed by non government organizations (NGOs) or other humanitarian agencies, mostly run and managed with emergency, or post-emergency funding.

Due to the long period of civil war and social chaos, Liberia suffers from a chronic shortage of qualified health personnel, in correspondence to the generation denied access to further education during the civil war. To further exacerbate this situation, many qualified doctors have emigrated from Liberia, and very few doctors have qualified. The overall result is that very few young doctors are available for teaching, and in the short term it is difficult to find personnel that may be available for academic and specialist training.

The Dogliotti College of Medicine is the faculty of medicine of the University of Liberia, and the only institute officially recognized to train doctors in Liberia. In the academic year 2007 - 2008, 50 new students enrolled for the course of medicine at the College, but this number is deemed too high for the present capacity of the College. The ability of the Dogliotti College to train and develop Liberian doctors has been seriously compromised by the civil war, as can be seen by the statistics: in the '80s around 500 doctors worked in Liberia, whereas today there are only 126, and of these only 51 are Liberians.

#### Project Strategy

- Renovate and improve the entire infrastructure of the College: the academic, administrative and dormitory buildings. The renovation work on the infrastructure will be completed by the installation of air conditioning and an Internet/Intranet for the entire College. Completion of this phase is planned for December 2010
- Restructure and reinforce the support areas of the College, more specifically, the laboratories, the Library and other administrative areas. Construct a new building to house visiting professors from other countries.

- Update and improve the qualitative teaching standards of the College by increasing the number of professors and tutors, organizing professional updates, and training new teachers. The content and methodologies of teaching will also be updated and improved: in fact, the Curriculum is presently undergoing revision.

## Objectives

To improve the health standards of the Liberian population through ensuring adequate training of its health officials, and more specifically, to improve and strengthen the capacity of the A.M. Dogliotti College of Medicine to train and produce competent and qualified doctors. This objective is in line with the request made in 2007 during the official visit to Italy by the President of Liberia, Ellen Johnson Sirleaf, when the Italian Government's help was requested to reinforce the Liberian health sector, and in particular the faculty of medicine of the University of Liberia, the A.M. Dogliotti College of Medicine. Following the visit in 2008 by the Italian Ambassador to Liberia, the Ministry of Foreign Affairs, through the DCGS (Direzione Generale Cooperazione allo Sviluppo) nominated the Istituto Superiore di Sanità (the Italian National Health Institute) as the organization responsible for designing, implementing, and completing the requalification and strengthening of the Dogliotti College of Medicine. In order to realize this project, the ISS is supported by the specific skills and competence of the Fondazione per la Sicurezza in Salute (Foundation for Health Safety).

---

## Centre for International Health, University of Bergen

### Capacity-strengthening

- HIV/AIDS ; Child health and nutrition; TB ; Climate change and health
  - Mainly Zambia, South-Africa, Uganda, Tanzania, Ethiopia, Sudan, India, Nepal
- 

## University College London

### Two largest projects

Pan-African Consortium for the Evaluation of Antituberculosis Antibiotics (PanACEA) - A consortium network of 6 European research organisations, 12 sub-Saharan clinical trial sites, and 3 pharmaceutical companies - 28m Euros. PanACEA draws together 3 independent clinical trial programmes for improved treatment of tuberculosis, consolidating experience and resources for development of drugs, as well as building capacity in Africa for the delivery of tuberculosis clinical trials.

International Research Consortium on HIV Vaccine Development. Led by Professor Robin Weiss this \$25 million international research consortium is funded by Bill & Melinda Gates Foundation, and involves scientists in academic institutions and biotech labs across seven European countries, as well as doctors in the USA and Africa. This consortium is part of the Gates-funded Collaboration for AIDS Vaccine Discovery. As new vaccine candidates are created, researchers will test vaccines, share data and compare results, so that the most promising vaccines can be quickly prioritised for further development and clinical trials.

## Capacity strengthening

Many UCL research projects involve capacity building in collaboration with low and middle income countries, as well as running programmes with a specific capacity building focus.

Towards 4+5 – A DFID research consortium on maternal and child health, led by Prof Anthony Costello, which included a significant research capacity building component for research partners in Burkina Faso, Ghana, Malawi, Nepal and Bangladesh.

Professor Stephen Gillespie led a programme to develop and implement a diploma and Bachelors course in Health Care Sciences in Tanzania. These are now self-funding and self-sufficient, addressing the weakness in lower and middle grade health care scientists. We have also been funded to deliver a molecular diagnostic course for more established health care scientists across East Africa, with the intention of improving diagnostic services at reference laboratory level and supporting the science base.

The Uganda Women's Health Initiative (UWHI) is a collaboration between The Institute for Women's Health at UCL, Makerere University, Mulago Hospital, and Hospice Africa Uganda. Work to date includes training in prevention of post-partum haemorrhage, training of doctors in vesico-vaginal fistula repair, training/education fellowships for doctors and nurses, training of nurses and midwives in neonatal resuscitation, health education and breast/cancer screening, radiotherapy treatment for advanced cancer patients, palliative care services for cancer patients, construction of the Radiotherapy Hostel, conferences on women's health issues, equipment from Middlesex Hospital, London to Mulago Hospital.

The Africa Centre for Health and Population Studies – led by Professor Marie-Louise Newell – is a Wellcome Trust research centre at the University of KwaZulu Natal, South Africa, working in a rural setting. As well as research, the Centre aims to build capacity at all levels, primarily through its staff. 20 percent of its 500 staff are health care workers at various levels employed in the HIV treatment and care programme. This service programme is a partnership between the Centre and the local Department of Health, which provide training for people working in primary health care e.g. basic training in HIV testing and treatment counseling, home-based care and nursing, and specific HIV-related training, on-the-job support and further training.

Professor Ali Zumla has over 20 years experience of collaborative work with several African countries (Ethiopia, Gambia, Tanzania, Zambia, Malawi, South Africa). His team have obtained DFID, EC, and other charitable funding to conduct research and training on tuberculosis and HIV/AIDS including PhD training, MMed, MRCP teaching for African graduates, short courses for technical staff, training of technical lab staff in specialist lab techniques, lectures by visiting staff from UCL on a variety of subjects, involvement of medical students in our research, and development of local R and D teams in longitudinal studies. The team have also written 10 textbooks and delivered them at one tenth the publisher's price through BookPower.

Other examples of existing work include involvement in training via telemedicine projects and capacity building of visiting academics and post-graduate students from Africa.

We are currently developing a Wellcome Trust 'Research Capacity in Africa' proposal in collaboration with three African universities, three African institutions and three other UK universities, with the goal of developing institutional and scientific leadership capacity within the Southern Africa Region.

---

## Faculty of Public Health, Medical University of Varna, Bulgaria

### Two largest projects:

7<sup>th</sup> Framework Programme of the European Commission, Project "Mobility of Health Professionals", 2009 - continues. The project aims to investigate and analyze the main tendencies and streams of health professionals mobility in European union.

7<sup>th</sup> Framework Programme of the European Commission, Project "European best practice guidelines for QA, Provision and Use of Genome based information and technology (PHGEN II) " № 2008302, 2009-2012. The project aims to develop the first set of guidelines on the quality assurance, provision and use of genome based knowledge and technologies. The guidelines should reflect both the advances in basic sciences, but also the demand from citizens.

---

## National Institute of Public Health, Warsaw

### Two largest projects:

**"Capacity-Building Information NIPH – NIH"** - realization 2009-2011

Project co-financed in 85% from the European Regional Development Fund and in 15% from the State Budget.

Project in its' greater part relates to the development and modernization of the network and the increase of power of computing, network capacity, as well as provide a web server for the purposes of scientific research. Expansion of the LAN through the exchange of the existing wiring on the wiring of the traditional categories of UTP 6e, connecting objects in buildings where there was no network yet, and connecting the buildings of the Institute by optic cables. Develop access to the network through wireless devices to facilitate work on laptops, through the purchase and installation 4 Wireless LAN devices.

The project also includes creation of database applications initially for three Departments (Epidemiology, Virology and the Center for Monitoring and Analysis of Health of the Population), with a possibility of further extension for the remaining 18 Departments of NIH.

National Institute of Public Health - National Institute of Hygiene as a central institution which conduct epidemiological surveillance for the purposes of the Ministry of Health, should function efficiently, should be modern and have efficient IT support and technical devices, mainly because the activities and researches undertaken at the Institute are strategic from the point of view of national safety. Data generated in the Institute are very important from both informational and statistical site. These data are forwarded to the Ministries and other government institutions and

administrations in the country and prepared for the needs of international organizations such as WHO, ECDC, OECD and European Commission (DG SANCO). Data allow tracking the trends taking place in health (eg. mortality, birth, etc.).

- POIG-02.03.00-00-015/08

National Institute of Public Health within the framework of Innovative Economy, National Cohesion Strategy - project: Potential antibiotic and the method of obtaining novel antibacterial compounds, number UDA-POIG.01.03.01-14-136/09.

Project manager: Jolanta Solecka Ph.D.

Project co-financed in 85% from the European Regional Development Fund and in 15% from the State Budget.

Executive time: February 2009- December 2013

Due to the spread of multidrug resistant bacterial strains, there is an increasing need to explore novel antibacterial compounds and new mechanisms of action. In this project a new compound, DD-peptidase inhibitor that possesses antibacterial properties is examined. During this work intensive research is made to verify whether this compound will be clinically applicable as well as its analogs are tested for their bioactivity. Results of the project will be the base of further research and studies with the international dimension and with different economic partners

#### **Capacity strengthening:**

The specialists working for NIPH-NIH are often invited as experts to international organizations such as WHO, ECDC, EFSA or to European Commission. They are participating in many international programmes, for example poliomyelitis eradication program, measles, congenital rubella elimination programs

---

### **Network of 3 centres : Centre for Tropical Diseases of the “Fondazione don Giovanni Calabria per le Malattie Tropicali”, the Clinica di Malattie Infettive e Tropicali, University of Firenze, Ospedale di Careggi**

The Centre for Tropical Diseases of the “Fondazione don Giovanni Calabria per le Malattie Tropicali”, Negrar, Verona, the Clinica di Malattie Infettive e Tropicali, University of Firenze, Ospedale di Careggi, Florence, Italy. The three institutions are further strengthening their mutual links through a formal protocol of agreement that is going to be signed very shortly and are planning to increasingly join their efforts in research as well as teaching.

## Centre for Tropical Diseases of the “Fondazione don Giovanni Calabria per le Malattie Tropicali”, S. Cuore Hospital, Negrar, Verona

### Two largest projects

- 1) Effectiveness and Cost-Effectiveness of Rapid Diagnostic Tests for Malaria. Study carried out in Burkina Faso, funded by “Fondazione UNIDEA – UNICREDIT Foundation”. Started 2005, involving about 5400 patients. Clinical trial results (safety, adherence) and results of test accuracy for malaria attributable fever already published, currently analysing results and shortly submitting paper on cost effectiveness.
- 2) COHEMI, EC-funded FP7 COOPERATION HEALTH coordinating action on health of Latin American Migrants in Europe, starting January, 2011. Main specific CTD activities concerning Neglected Tropical Diseases (Chagas, cysticercosis, strongyloidiasis, including a multi centre clinical trial), in collaboration with eight European and Latin American institutions.

### Capacity strengthening

In Ecuador CTD co-founded the CECOMET (a centre of capacity strengthening and operational research applied to Primary Health Care) and regularly collaborates to capacity building, training and research. In Burkina Faso has collaborated with the MOH for regular training activities on community epidemiology and on clinical decision at the peripheral level, through regular support to the project An Ka Heresso (Bobo Dioulasso) and has trained clinical research assistants in the field (P.H.C.).

### Clinica di Malattie Infettive e Tropicali (University of Brescia, Italy)

#### Two largest projects:

- 1) The ESTHER project to fight HIV/AIDS in Burkina Faso. The project is funded by the Italian Ministry of Health and the Italian Ministry of Foreign Affairs. The project is jointly run since 2003 by the University of Brescia, the Spedali Civili di Brescia General Hospital and the NGO Medicus Mundi Italy. Local partners are the Camillian religious Order and the Ministry of Health. Apart from clinical activities, the project encompasses preventive activities, teaching activities and research activities. Many papers have already been published in international journals
- 2) Technical assistance to the TB Department of the Ministry of Health of Burkina Faso. The project is funded by the World Health Organization since 2007. A long term expert from the University of Brescia is located in Ouagadougou. His main responsibilities are to cooperate in prepare the yearly TB control Plan and to organize training for health workers
- 3) The University of Brescia has agreements involving health topics with the following academic institutions:
  - a. University of Addis Ababa (Ethiopia)
  - b. University of Ouagadougou (Burkina Faso)

c. Mahidol University (Bangkok)

- 4) Any research project run at the Clinic has a training component
- 5) The Clinic is WHO Collaborating Center for HIV/TB joint activities. Training activity in resource-poor countries is among the key activities of the Collaborating Center

**Clinica di Malattie Infettive, Dipartimento di Area Critica Medico Chirurgica, Università di Firenze, Ospedale di Careggi, Florence, Italy (UFDID).**

#### **Two largest projects:**

- 1) Emerging antimicrobial resistance mechanisms management and control (Bacterialnet), 2007-2011. UFDID is international coordinator of this co-operation project between higher education institutions from Europe (Italy, Belgium, Spain) and Latin America (Venezuela, Peru, Bolivia, Argentina), financed by the EU within the ALFA programme.
- 2) COHEMI, EC-funded FP7 COOPERATION HEALTH coordinating action on health of Latin American Migrants in Europe, starting January, 2011. Main specific UFDID activities are concerning Neglected parasitic diseases, Tuberculosis and Non communicable chronic disorders, in collaboration with eight European and Latin American institutions.

#### **Capacity Strengthening**

Within the ANTRES project, UFDID promoted both in Bolivia and Peru the training of health technicians, laboratory staff and physician, to investigate antimicrobial resistance and resistance trends in commensal bacteria. Within the ALFA project, study exchanges were realised involving Peruvian, Venezuelan and Italian physicians to offer them the possibility to observe and discuss research and clinical activities.

## **Institute of Public Health, Heidelberg University**

### **1) Institution Building**

A 22 year long journey of joint research cum institutional-building between the IPH and what was founded as the “Centre de Recherche en Santé” (CRSN) started with a large EC grant on health systems research in 1989, more grants were added and in 1992 a Demographic Surveillance System in the Nouna District was jointly set. up. Since 1999, after winning a large long-term (12 y) Research Grant with the German Science Foundation “Control of Tropical Infectious Diseases” the Ministry of Research of the State of Baden Württemberg, in which Heidelberg University lies, has provided an annual structural/core grant of 250,000 €, which has proven key to institutional capacity building. In 2000, the CRSN was institutionalized by government decree as a research centre of the MoH of Burkina Faso, reporting directly to the Secretary General of the Minister of Health. The Burkinian Government has contributed about 15% of the budget of CRSN, 20% German core funding and 65% acquired research funds. The common goal (both the IPH and CRSN) to diversity the research

partners of the CRSN has been achieved in the mean time: The CRSN has a large number of independently acquired projects with pharmaceutical companies on drug trials, with NIH, Volkswagenstiftung, Gates Foundation, INDEPTH, French partners and more. Annual joint short course on applied epidemiology and statistics have been carried out since 2005. A two-week accredited course on climate change and health is scheduled to be taught for the first time in 2012.

## **2) Project-based Research partnerships**

With 23 universities and ministries in the following low and middle income countries: Burkina Faso, Ghana, Sénégal, Mali, Tanzania, Uganda, Kenya, South Africa, Malawi, Phillipines, Thailand, Cameron, Jordan, Turkey, India, Pakistan, Afghanistan, Viet Nam, Indonesia, Nepal, China.

## **3) Teaching**

### *(i) Establishment of formal master courses in partner universities*

Apart from the Master of Sc. in International Health (doubly accredited by TropEd and the German accreditation body) has been taught since 16 years. It has been the inspiration of establishing similar course in partner countries:

- A Master of Public Health with and at Muhimbili University, DarEssalam. was established in this university in 2003, based on the Heidelberg MPH curriculum, but strongly adapted to local context and needs. A decreasing involvement of Heidelberg Faculty as lecturers, external examiners has essentially led to the master course being completely and solely run by faculty of Muhimbili university.
- Master of Science in Health Economics. In cooperation with National Economics University, Hanoi, established in 2002 with World Bank Funding, taught once, unfortunately no institutional follow up.
- A master of public health at Tunis University, Tunisia is currently being explored.

### *(ii) Short courses in public health topics in and with partner universities:*

15 short courses (as of 2011) are being taught with more than 75% participation from low and middle income countries in Heidelberg. From these accredited 1-3 wk courses, the following were adapted with partners in African and Asian countries:

- Quality Management: With BRAC University, Bangladesh, with the Ministry of Family and Welfare, Dehli, with Muhimbili University, Dar and Emory University, Kenya.
- Climate change and health, with the MoH, Tunis, Tunisia; the BRAC University, Dhaka and (planned) the PHFI (Public Health Foundation of India) and the Nouna Health Research Centre (CRSN)
- Leadership and change management, taught for executives of MoHs and Universities of 3 African countries in 2010

## Institute of Tropical Medicine of Antwerp, Belgium

### Two largest projects

1. Institutional collaboration with the Instituto de Medicina Tropical "Alexander von Humboldt" in Lima, Peru (IMTAvH): from generation to dissemination of knowledge and practice

Objectives: To strengthen the IMTAvH as a scientifically autonomous centre of excellence in the field of applied clinical research on infectious and tropical diseases. There is special emphasis on the study of chemotherapy failure and/or disease progress in 6 diseases (AIDS, tuberculosis, malaria, leishmaniasis, HTLV-1-associated diseases, and bacterial resistance).

2. Institutional strengthening of the reference laboratory in the Democratic Republic of the Congo: Institut National de Recherche Biomédicale (INRB)

Objectives: To strengthen the capacity of INRB in Kinshasa to fulfill its role as national reference laboratory and research centre for infectious diseases in the Democratic Republic of Congo

### Capacity Strengthening Activity

At the Institute of Tropical Medicine of Antwerp (ITM), the major projects aiming at capacity strengthening in low- and middle-income countries are integrated in a multiyear Framework Agreement entitled "Switching the poles". The 2008-2013 Framework Agreement is an agreement between the Belgian Development Cooperation and the ITM. It is financed as indirect development aid (scientific development cooperation) by the Belgian federal ministry of development.

(<http://www.itg.be/itg/GeneralSite/Default.aspx?WPID=139&L=E>).

The "Switching the poles" theme results from a reflection on how scientists and institutes in the South can truly take the lead in the international efforts to improve the health situation in their countries. It refers to the challenge of resetting the balance between North and South in the institutional capacity to perform autonomous research, organize training and deliver reference services. The purpose of capacity development is pursued at the individual, institutional and

international level. In addition, support is given to the Belgian sector of international health development and cooperation.

The programme is split into two 3-year periods with budgets of € 32.5 million (2008-2010) and € 39 million (2011-2013 to be approved)

The programme is divided into the following five subprogrammes:

***Subprogramme 1: Training***

Purpose: train at post-graduate level health experts and scientists from developing countries in the management of health services and disease control programmes, in health-related research or in the delivery of reference health services. This objective is realized through master and short courses at the ITM for experienced health professionals from the South (55 scholarships for both master and short courses) per year, a “individual” PhD programme for selected alumni in collaboration with their home institutions (approx. 15 scholarships ongoing) , the development and application of educational tools, targeted e-learning programmes, alumni support (for over 2500 former students) , educational networking, and student support.

***Subprogramme 2: Institutional collaboration:***

Purpose: strengthen institutions and organizations in developing countries in order to enable them to conduct research, provide training, perform reference services and improve practices and policies in human and animal health. The 15 institutions involved in this collaboration are listed below. The collaboration includes PhD-training (24 on-going) and postdoc support among other things.

Country	Key partner institutions and organizations
Bolivia	Universidad Mayor de San Simón
Burkina Faso	Centre International de Recherche-Développement sur l'Elevage
Cambodia	Sihanouk Hospital Center of HOPE
Cuba	Instituto Pedro Kouri and Instituto Nacional de Higiene, Epidemiología y Microbiología
Democratic Republic of Congo	Institut National de Recherche Biomédicale
Ecuador	Public Health Institute at Pontificia Universidad Católica del Ecuador and Centro Internacional de Zoonosis
India	Institute of Public Health (Bangalore)
Morocco	Institut National d'Administration Sanitaire
Peru	Instituto de Medicina Tropical Alexander von Humboldt, Universidad Peruana Cayetano Heredia
Senegal	Centre Hospitalier Universitaire de Dakar

South Africa	University of Pretoria
Uganda	Public Health Institute at Makerere University
Vietnam and Cambodia	National Institute of Malariology, Parasitology and Entomology and National Center for Malaria Control, Parasitology and Entomology
Zambia	Tropical Diseases Research Centre

### ***Subprogramme 3. Strategic programmes:***

Purpose: addressing and completing strategic priorities by targeted additional projects and partnerships, and through networking the partners on several topics such as Health Systems and International Health Policy, Tuberculosis, Neglected Diseases and Zoonoses, Laboratory Quality Management and Clinical Research.

See website of some of the networks:

- [www.strengtheninghealthsystems.be](http://www.strengtheninghealthsystems.be)
- [www.onehealthnet.be](http://www.onehealthnet.be)
- <http://www.itg.be/ihp> (blog)

### ***Subprogramme 4. Policy support and advocacy***

Purpose: supporting of the Belgian development cooperation in its policy development and implementation and its international networking

This subprogramme includes a project on International colloquia held in the South:

- 2005: Improving case management and control of tuberculosis and Buruli ulcer in Africa. Cotonou, Bénin
- 2007: Malaria control in the Mekong Region: challenges and opportunities. Hanoi, Vietnam.
- 2009: Neglected diseases of Latin America. Lima, Peru

### ***Subprogramme 5. Management***

Purpose: ensuring adequate administrative and financial management of the programme

## University of Ghent, Belgium

*The Faculty of Medicine and Health Sciences participates in several Institutional University Cooperation programmes, financed by the Flemish Interuniversity Council – University Development Cooperation, specifically aimed at capacity developing in developing countries. In addition, many international research programmes include a capacity building part. Examples of universities and other institutions in developing countries that are involved in the capacity building programmes of the Faculty of Medicine and Health Sciences are: University of the Witwatersrand (Johannesburg, South Africa), Western Cape University (Cape Town, South Africa), ICRH Kenya (Mombasa, Kenya), Patient and child initiative of the Kamuzu Central Hospital and Ministry of Health (Malawi), (Eduardo Mondlane University (Maputo, Mozambique), Universidad de Cuenca (Ecuador), Instituto Centro Americano de la Salud (Nicaragua), Institut de recherche en sciences de la Santé (Burkina-Faso), Université Catholique de Bukavu (DRCongo), China Medical Association (China), Chinese society for family planning (China), National Research Institute for family planning (China), West China Second University Hospital, Sichuan University (China), Moi University (Kenya, Makerere University (Kampala, Uganda), Mbarara university of Science and Technology (Uganda), université of Botswana (Gaborone, South-Africa)).*

*Specific topics of the capacity building programmes vary according to the project and the partner, but generally they are situated within the fields of reproductive health/HIV/Aids, mother and child care, and primary health care.*