



African Population and Health Research Center

ANNUAL REPORT 2005



Promoting the well-being of Africans through policy-relevant research on population and health

APHRC IN BRIEF

The African Population and Health Research Center (APHRC) is a non-profit, non-governmental international organization that is committed to conducting policy-relevant research on population and health in sub-Saharan Africa, and facilitating use of research evidence in policy and practice in the region. The Center also carries out research capacity strengthening to enhance the skills of African scholars in generating credible scientific evidence.

Mission

Promoting the well-being of Africans through policy-relevant research on population and health.

Objectives

- Contribution to Science through high impact research projects and publications,
- Inform Policy Decisions with research evidence, and
- Strengthen Research Capacity in sub-Saharan Africa.

To achieve its mission and objectives, APHRC brings together African scholars to take the lead in developing priority research programs and enhancing use of research findings for policy formulation and program improvement in sub-Saharan Africa.

Institutional Strengths

The key strengths of APHRC stem from its strong commitment to research excellence coupled with the policy orientation and responsiveness of its work. The Center's research emphasizes development of innovative projects that are relevant and responsive to local and regional policy needs and strongly emphasizes interdisciplinary approach to research. This is made possible by the Center's multidisciplinary research team that brings together a combination of skills and scholarly expertise including demography, economics, sociology, anthropology, public health, biostatistics and epidemiology. The regional outlook of the Center is another key strength that enables it to effectively define and address research

and policy priorities across sub-Saharan Africa. This regional outlook is reflected in staffing (researchers are drawn from 12 different African countries), the regional focus of its research programs, as well as the international composition of its Board of Directors.

Building Partnerships

APHRC values partnerships and it builds these through strong collaborative linkages with African and other academic/research and advocacy institutions to achieve common goals and objectives, and extend the reach and impact of the Center's work. Currently, the Center has established partnerships with government/public policy institutions, NGOs and research institutions with common goals and interests, and universities both local and international. APHRC is also a member of international research networks such as the INDEPTH Network, WHO's Health Metrics Network, Committee for International Cooperation in National Research in Demography (CICRED), and Global Equity Gauge Alliance (GEGA), among others.

Governance

APHRC is governed by an independent Board of Directors comprising 12 internationally distinguished professionals and leaders in health, social sciences, management and development (see page 15). The Center is headed by an Executive Director, a non-voting member and secretary to the board, who oversees its daily operations and programs. The Board of Directors meets at least once a year to discuss and give guidance and direction to the Center's overall research, policy dialogue, and research capacity strengthening programs.

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Message from the Board Chair ●●●



Demissie Habte, M.D.

Dear friends,

Welcome to the 2005 Annual Report of the African Population and Health Research Center (APHRC). I feel proud to present to you this record of remarkable achievement made by the Center in the past year. APHRC's work has continued to contribute to Africa's development efforts, particularly in areas of population, health and education. In the past year, APHRC's research focused on Urban Health and Poverty, HIV and AIDS, Sexual and Reproductive Health and Rights, and Education. The Center not only generated scientific evidence to inform policy and practice in these areas, but also made significant progress in facilitating the uptake of this evidence by policy makers and program implementers. These are evident in the increased number of publications and strengthened links with policy makers, as well as active participation in policy dialogue events. Commitment to strengthening research capacity in the sub-Saharan Africa region still remains a priority for the Center; many African scholars benefited from the Center's capacity strengthening programs in the past year.

APHRC researchers worked untiringly to raise funds through proposals, many of which yielded positive results. Of particular importance is the number of multi-year research grants the Center received in 2005. This means that the Center's financial health remains strong. Proud as I am to present this report, I am confident that we will work even harder in the coming year to surpass the achievement standards set in 2005.

I wish to sincerely thank our donors and partners for their continued support. I congratulate the APHRC staff, management and board for making this happen; their dedication and selfless commitment to the Center are exceptional.

A handwritten signature in blue ink, appearing to read 'Demissie Habte'.

Sincerely,
Demissie Habte, M.D.
Chair, APHRC Board of Directors

Introduction by the Executive Director ●●●



Alex Ezeh, Ph.D.

APHRC places emphasis on three core program priorities: i) generation of credible policy-relevant evidence base, ii) translation of such evidence to inform policy and practice, and iii) strengthening professional and institutional capacity for high quality research in sub-Saharan Africa. These priorities form the core of the Center's current Strategic Plan 2002-2006. The Center made considerable progress in each of these priority areas in 2005.

On research, a number of new research projects were initiated during the year, including a community-based HIV testing project in two slum settings in Nairobi to understand the social, health and economic contexts of HIV and AIDS in urban poor settings. This project is being implemented in the same slum communities where the Center runs its longitudinal Nairobi Urban Health and Demographic Surveillance System. APHRC, in collaboration with its partners in the Nairobi Urban Health and Poverty Partnership, also started the implementation of interventions in the two slum communities during the year. These interventions involve upgrading the capacity of health services in managing childhood illnesses; improvement of water supply and environmental sanitation; and community empowerment in improving health seeking behavior and hygienic practices. A major milestone involved extension of the Center's urban health and poverty work in Nairobi to other African cities including Accra (Ghana) and Blantyre (Malawi). Similar efforts are underway in Kampala (Uganda). APHRC will expand its focus on urban health and poverty work in 2006 following the initiation of a new five-year research program titled 'Urbanization, Poverty and Health Dynamics', to investigate the impact of migration and poverty on child and maternal health, adolescent transitions, and on older persons. The Center made similar progress in initiating, continuing, or completing work in other areas including schooling, sexual and reproductive health and rights, maternal health, sexuality, and adolescents' HIV/AIDS risks. In addition to these activities, the Center's research staff produced 14 publications while six other manuscripts were already accepted for publication by the end of the year.

APHRC continued to address the weak research capacity in sub-Saharan Africa through its research capacity strengthening program. Under this program, APHRC recruited two post-doctoral fellows and hosted six doctoral students as interns. APHRC also awarded four sabbatical fellowships to faculties at four African universities and one of its research trainees proceeded to pursue doctoral training in Biostatistics. The Center undertook several internal research capacity strengthening activities for staff (including tailored training for non-research staff). Several staff also benefited from external training opportunities.

The Center made significant achievements in facilitating the translation of research into policy and practice, and in contributing to

important discourses at national, regional and global levels. In Kenya, besides featuring in the media, the Center continued its partnerships with government agencies and ministries as well as service-delivery NGOs and community-based organizations. APHRC collaborated with the National Coordinating Agency for Population and Development (NCAPD), the Kenyan Ministry of Health, City Council of Nairobi, and UNFPA to host a workshop on repositioning family planning and reproductive health in Kenya for the Kenyan Members of Parliament and other parliamentarians from Southern and East African Parliamentary Alliance of Committees on Health. This workshop led to the setting up of a parliamentary interest group on population and reproductive health in Kenya. The Center is currently supporting the Kenyan Ministry of Health in a new initiative to reach the poor with health services.

Regionally, APHRC worked with other partners including NCAPD, Center for African Family Studies and the African Population Advisory Council to host a workshop for heads of National Population Councils and National AIDS Councils. In addition, APHRC researchers continued to participate in key regional and international policy forums and to serve on various expert panels.

These achievements were made against the backdrop of rapidly changing operating circumstances. 2005 presented unique challenges to the Center. Although the Center's current Strategic Plan recommended that about 40% of the Center's resources are needed from unrestricted general support grants in order to achieve its core priority programs, 2005 saw a significant departure from this expected funding mix. Compared to prior years where general support accounted for 60-80% of the Center's resources, close to 80% of the Center's finances in 2005 came from project specific grants. This was made possible by the Center's relentless efforts to raise funds through research proposals to offset a huge shortfall in general support. The current funding mix has huge implications for the Center's core programs, especially those related to translation of research into policy and practice, and strengthening of research capacity in the region. With the expiration of the Center's current Strategic Plan at the end of 2006, a rethinking of the Center's programs and priorities for 2007-2011, planned for 2006, could not have come at a more opportune time.

The Center continued to demonstrate excellence not only in its research, policy dialogue, and research capacity strengthening programs, but also in its financial management. Its recently completed audited accounts by KPMG for 2005 again raised no single issue for management to either address or improve on. The Center continues to attract the best of African scientists and support staff, with eight new staff having been recruited in 2005.

Although APHRC made significant achievements in 2005, these pale in comparison to the enormous needs that exist throughout the region including weak human resource capacity, a huge disease burden, and severe poverty. These present a challenge as well as an opportunity for APHRC to work towards greater impact in the coming years.

I wish to thank our board members, management and staff, collaborators and other partners for their contribution without which 2005 would not have been such a successful year. We are looking forward to greater impact in the years ahead.

Alex Ezeh, Ph.D.
Executive Director, APHRC

Research ●●●

APHRC's research focuses on improving understanding of population and health issues in Africa through development and implementation of innovative policy-oriented research programs. The Center's research is guided by two themes: (a) clarifying changing linkages between urban health and poverty; and (b) investigating critical and emerging population and health issues in sub-Saharan Africa.

Urban Health and Poverty – The motivation for this theme is the combined impacts of rapid urbanization, increasing poverty and deteriorating health conditions in African cities which pose serious constraints to development efforts in the region.

Critical and Emerging Issues - Africa is typified by unique demographic and health indicators such as high population growth, young age structure and the severe impacts of the HIV and AIDS pandemic. The Center is committed to increasing global understanding of key aspects of the social, economic, and cultural environment that sustain these conditions.

Guided by these two themes, APHRC's research focused on addressing a number of population and health challenges in the areas of Urban Health and Poverty, HIV and AIDS, Sexual and Reproductive Health and Rights, and Education. The following is a summary of progress made under each of these research areas/programs in 2005.

Urban Health and Poverty ●●●

The Center's urban health and poverty work seeks to provide evidence that can guide policies and programs aimed at improving the well-being of the urban poor. Under this program, APHRC has instituted various research projects in the areas of child health, maternal health, migration and its effects on various health outcomes, health equity, among others. These projects are discussed in detail below.

● Nairobi Urban Health and Poverty Partnership

The Nairobi Urban Health and Poverty Partnership (NUHPP) is a program of research and action that seeks to determine cost-effective strategies for addressing the health and livelihood



Poor environmental conditions in slums impact negatively on child health.

needs of the poor residents of Nairobi City, and to export lessons from the Nairobi experience to other sub-Saharan African countries with similar urbanization patterns. NUHPP's immediate goal is to define and evaluate a package of health service upgrade, environmental sanitation, and livelihood interventions to reduce the excessively high infant and child mortality rates among residents of Nairobi City living in slum settlements. The interventions involve improvement of the capacity of health services in managing childhood illnesses; improvement of water supply and environmental sanitation; and community empowerment in improving health seeking behavior and hygienic practices.

NUHPP started implementing pilot interventions in early 2005 in Nairobi's Korogocho slums, with a focus on addressing the major determinants of child morbidity and mortality, and with emphasis on preventive strategies at the community level. At the close of the year, three toilets had been constructed, while two more were still underway. Also, a rapid health facility assessment was conducted in the two City Council of Nairobi health facilities with shocking results. The facilities lack basic health equipment and there is need to upgrade them and train the health personnel. Following this, service providers were trained in Infection Prevention as a way of helping them improve hygiene in the health facilities. On behavior change communication, a photography training session for youth was conducted as a strategy for communicating health behavior change among community members. Photographs of unsanitary conditions were shot, and the plan is to set up a community photo gallery to show-case the unsanitary habits and conditions in Korogocho. This two-year pilot phase, which ends in 2006, will serve to inform the implementation of the five-year scale-up phase of these interventions.

NUHPP is a partnership among APHRC (responsible for monitoring and evaluation); JHPIEGO - an affiliate of the John Hopkins University (responsible for health facility upgrade interventions); Intermediate Technology Development Group (responsible for water and environmental sanitation interventions); Program for Appropriate Technology in Health (responsible for community empowerment and behavior change communication interventions); and the City Council of Nairobi (responsible for coordinating and facilitating interventions and applying lessons learnt into the government policy framework). The partnership's pilot interventions are funded by the European Commission and the Embassy of Finland.

● Regional Urban Health and Poverty Program

One of NUHPP's objectives is to export lessons from the Nairobi experience to other sub-Saharan African countries with similar urbanization patterns. This has been realized through the Regional Urban Health and Poverty project which was launched in two other Africa cities - Accra (Ghana) and Blantyre (Malawi) - in 2005. The project conducted exploratory studies towards community action on key child health problems, current conditions of personal hygiene and environmental sanitation, mothers' health seeking behavior, and the status of public health facilities accessible to poor urban residents in the two cities. Dissemination of the findings from these studies will be



Eliya Zulu, Senior Research Scientist and Deputy Director. He heads the Regional Urban Health and Poverty Project, among others.

carried out in early 2006, with a view to building consensus around child health issues among the urban poor, and getting inputs from policy makers and donors on the way forward in addressing such issues.

APHRC is working with the Center for Social Research, University of Malawi, and the Institute of Social, Statistical, and Economic Research, University of Ghana on this program. Part of the funding from the European Commission covers the expansion of the urban health and poverty work to the two cities. Plans are also underway to extend this work to Kampala (Uganda).

● **Nairobi Urban Health and Demographic Surveillance System**

The Nairobi Urban Health and Demographic Surveillance System (NUHDSS) is APHRC's primary research tool for monitoring and evaluating health and poverty alleviation programs in poor urban settings. The NUHDSS was set up in 2000 to provide



Through the Nairobi Urban Health and Demographic Surveillance System, APHRC monitors key health, demographic, and livelihood events of slum residents every four months.

a longitudinal platform for investigating changing linkages between urbanization, poverty and health, and to serve as a tool for monitoring and evaluating the impact of various interventions designed to improve the well-being of the urban poor in Kenya and other sub-Saharan African countries with similar urbanization and economic patterns.

The NUHDSS monitors about 60,000 people located in two slum settlements (Korogocho and Viwandani) in Nairobi City. It involves visits to individuals, households and their dwelling

units once every 120 days to monitor a number of key health, demographic, and livelihood events (such as morbidity, mortality, pregnancy, migration, and so on).

In 2005, APHRC researchers generated analyzable data-sets for the first two years of the scaled-up surveillance system (2003 and 2004), and thus 2006 promises to be the year when APHRC will focus on disseminating findings from the NUHDSS. The NUHDSS is part of the INDEPTH Network, and is mainly supported by a number of APHRC projects that use the NUHDSS platform.

● **Refining the Evidence Base for Policies and Programs on Child Health, Food Security and Education among the Urban Poor in Sub-Saharan Africa**

Completed in 2005, this project sought to enhance APHRC's research on clarifying the changing linkages between urban health and poverty in sub-Saharan Africa and to enhance the utilization of its research findings to improve policies and programs affecting the urban poor. Some of the project's key achievements include:

- Strengthening of APHRC's work on urban health and poverty including supporting the continuity and enhancement of the NUHDSS which has several other projects nested to it like the NUHPP, education research program, maternal health project, and the HIV/AIDS project;
- Development of research tools to monitor trends and linkages between child health, food security (and nutrition), and schooling;
- Strengthening APHRC's efforts to actively participate in dialogue with policy makers and program managers by supporting the Nairobi Urban Health Equity Gauge (NUHEG).

NUHEG is a collaboration between APHRC, the National Coordinating Agency for Population and Development (NCAPD which is the Kenyan government agency responsible for the development and implementation of Kenya's population policy under the Ministry of Planning & National Development), and the Urban Slums Development Project/City Council of Nairobi (USDPI/CCN).

NUHEG documents and disseminates inequities in health outcomes in Nairobi. The program seeks to establish and consolidate linkages with public policy and program development institutions, and to enrich their efforts in improving the health outcomes of the urban poor. NUHEG is a member of the Global Equity Gauge Alliance (GEGA), which works toward equity in health worldwide by supporting the routine collection of equity-sensitive data and linking the information to advocacy for pro-equity policies and community empowerment.

Under NUHEG, APHRC engaged directly with policy makers through a parliamentary workshop in April 2005 dubbed "Repositioning Population and Reproductive Health for Attainment of National and Millennium Development Goals". The workshop, attended by Kenyan Parliamentarians, Government Officials, the Donor community, among other stakeholders,

provided an opportunity for APHRC researchers to lobby policy makers and donors to prioritize the allocation of resources to family planning and reproductive health programs (more details and outcomes of this workshop are discussed under the section on Policy Dialogue). NUHEG also worked to strengthen the capacity of community-based organizations working in slum settlements.

The project was funded by the Rockefeller Foundation. Even though this funding ended in late 2005, APHRC is exploring other funds to continue sustaining the NUHEG component and possibly expand its activities.

● **Averting Preventable Maternal Mortality: Delays and Barriers to Utilization of Emergency Obstetric Care**

Maternal health remains a challenge in developing countries. The numbers of women dying every year from maternal-related causes have remained high in poor countries despite various efforts to bring them down. Over 500,000 women, mainly from poor countries, are estimated to die each year from complications arising from pregnancy and childbirth. Most direct causes of maternal mortality, such as excess bleeding and obstructed labor and complications from unsafe abortion require immediate medical treatment. This makes the availability and accessibility of emergency obstetric care critical in improving maternal health outcomes in poor countries.



Poor women suffer worse maternal health outcomes.

APHRC initiated a study in 2005 to determine the delays and barriers to proper maternal health services that have, in turn, sustained the high maternal deaths in poor countries. This study, which is funded by the World Bank, is part of a multi-country project being implemented in Ghana and India. Under the study, APHRC will (i) assess women's treatment seeking behavior in response to obstetric emergencies and barriers to seeking care; (ii) investigate past maternal deaths to reveal the specific causes and timing, and the individual, family, and service-related factors; and (iii) assess the functioning and type of emergency obstetric care facilities. These activities will be carried out in two poor urban settlements in Nairobi - Korogocho and Viwandani - in Kenya.

The results of this study will contribute to better understanding of the delays and barriers to emergency obstetric care utilization

and maternal health seeking behavior among the urban poor. They will also help identify the maternal health intervention strategies most likely to improve the utilization of emergency obstetric care.

● **Urbanization, Poverty and Health Dynamics in Sub-Saharan Africa**

This is a new research program that received funding from the Wellcome Trust Foundation in 2005. The program seeks to uncover the extent to which poverty and ill-health among urban slum residents are linked to the length of residence in these areas. The study will answer the question: Are the people who move to these areas responding to life crises that have badly affected their health or is it residence in the slums that has adverse consequences on their health and well-being? The study will specifically examine how these linkages operate at different stages of life (i.e. childhood, adolescence, adulthood, and old age).

The backdrop of this project is the unprecedented urban population growth in the context of lackluster economic performance in most African countries which has created a new face of poverty characterized by a significant proportion of urban populations living in over-crowded informal settlements, commonly known as slums. The experiences of the urban poor are unique and often characterized by reliance on cash economy, overcrowding, poor environmental sanitation, lack of security, lack of social and health services, greater indulgence in risky sexual practices, social fragmentation, and high levels of migration. The health issues among residents of slum settlements may have far-reaching consequences on regional and national health dynamics and also on the achievement of the Millennium Development Goals (for example goals to improve maternal health, child health, food security, and to halt HIV infections). This program will focus on the five areas:

- **Migration dynamics and poverty in informal settlements:** This component will assess patterns and reasons for migration among residents in Nairobi's informal settlements, the linkages between migration, livelihood conditions, and health status.
- **Migration, poverty and child health:** This component will examine the impact of migration, poverty, household composition and other factors on morbidity and mortality of under-five children living in informal settlements.
- **Migration, poverty and transition to adulthood:** This component will identify protective and risk factors in the lives of adolescents (aged 12-24 years) growing up in Nairobi's informal settlements, how these factors influence the staging of their transition to adulthood, and how these transitions differ by migration and poverty status.
- **Migration, poverty and maternal health outcomes:** This component will examine maternal health outcomes and postpartum reproductive and sexual behavior, and how these are affected by poverty and migration status.
- **Migration, poverty and the well-being of the elderly:** This component will investigate the living arrangements and health profiles of the elderly (60+) living in informal settlements and how these differ by migration status and socioeconomic circumstances.

APHRC has partnered with the London School of Hygiene and Tropical Medicine, the University of Southampton, and *l'Institut de Recherche pour le Développement* (France) in the implementation of this research program. The project will run for a period of five years, starting January 2006.

HIV and AIDS: Africa's Dilemma ●●●

HIV and AIDS remain Africa's biggest health challenge of our times. Its impact is not only devastating to the population and health gains made by Africa in the past years, but to all the other sectors of Africa's fragile economies. In response to the epidemic, APHRC has developed two research projects as discussed below.

● **Understanding HIV and AIDS Risks among Adolescents in Sub-Saharan - Protecting the Next Generation Project**

The Protecting the Next Generation (PNG) project, a five-year multi-country study initiated in 2002, seeks to enhance understanding of HIV and AIDS and other reproductive health risks among adolescents in sub-Saharan Africa. Notably, adolescents (age 12-19) constitute the largest proportion of the population in most of sub-Saharan Africa. Evidence that the HIV and AIDS epidemic is most prevalent among adolescents is worrying given that this group is Africa's future, yet very vulnerable to the deadly virus. This makes the understanding of the multiple sexual and reproductive health risks that adolescents face critical to Protecting the Next Generation.

The PNG study is being conducted in four African countries (Burkina Faso, Ghana, Malawi and Uganda). It seeks to provide policy makers and program managers with a better understanding of adolescent attitudes and risk behaviors, and their potential impact on the HIV epidemic by establishing a knowledge base of relevant evidence and stimulating policy and program reform through sustained and targeted communication and advocacy activities. The primary goal of this project is to reduce the spread of HIV among adolescents in sub-Saharan Africa.



Nyovani Madise, Senior Research Scientist, heads the HIV and AIDS Projects.

The project has collected and analyzed new evidence on adolescent sexual and reproductive health using qualitative and quantitative techniques. Data collection was achieved through national surveys with the youth and qualitative interviews with adolescents, service providers, and gatekeepers (teachers, religious leaders, and parents) in the four countries.

Dissemination of the evidence started in 2005 through presentation of research papers in international scientific conferences as well as through communication and policy advocacy events in national and international forums. This is set to continue with increased momentum in 2006 and 2007.

PNG is a collaboration between APHRC, Guttmacher Institute, and research and policy advocacy institutions in the four countries, including l'Institut Supérieur des Sciences de la Population - ISSP and Initiative Privée et Communautaire de Lutte Contre le VIH/SIDA - IPC/BF (Burkina Faso); University of Cape Coast and Planned Parenthood Association of Ghana - PPAG (Ghana); Center for Social Research and Youth Net and Counseling - YONECO (Malawi); and Makerere Institute of Social Research and Panos Eastern Africa (Uganda). PNG is funded by the Bill and Melinda Gates Foundation and the National Institute of Child Health and Human Development (US).

● **Social, Health and Economic Contexts of HIV and AIDS in Poor Urban Settings**

APHRC initiated a new project to study the social, health, and economic contexts of HIV and AIDS in poor urban settings in Kenya in 2005. This was in recognition of the fact that the design and implementation of HIV and AIDS interventions need to take into account the different contexts within which people live. Recent estimates of HIV prevalence from the Kenyan Demographic and Health Survey conducted in 2003 suggest that 12% of urban women and 8% of urban men are HIV positive, and that national rates for women and men are 9% and 5%, respectively. The high HIV prevalence rates in urban areas have to be viewed in a context of growing urban poverty since significant proportions of urban dwellers in many African cities are living in informal settlements which are characterized by extreme poverty and high levels of risky sexual behavior (Zulu et al., 2002). This new project, which represents APHRC's initial efforts in biomedical research, will involve community-based HIV testing in two slum settings (i.e. Korogocho and Viwandani) where APHRC runs the Nairobi Urban Health and Demographic Surveillance System. APHRC is collaborating with the Kenya Medical Research Institute (KEMRI) in this undertaking. The findings will inform HIV and AIDS intervention programs targeted at the urban poor. This project is funded by the Rockefeller Foundation.



Young people's high vulnerability to HIV makes it critical to protect them through proper policies and targeted programs.

Promoting Sexual and Reproductive Health and Rights ●●●

Despite two decades of sustained efforts to improve sexual and reproductive health in Africa, progress has remained slow. The field of sexuality and the whole issue of sexual and reproductive health and rights are still poorly understood in the region. More importantly, many African countries are still experiencing high

mortality and morbidity arising from poor sexual and reproductive health and rights; these are, in turn, compromising the region's efforts to reduce poverty. APHRC is implementing two research projects to address some of the sexual and reproductive health challenges facing Africa.

● Education and Sexuality Program

This is a fellowship program funded by the Ford Foundation that seeks to strengthen intellectual capacity for research on sexuality and education in sub-Saharan Africa. The program provides residential sabbatical fellowships for senior African scholars to provide intellectual leadership in developing the conceptual and theoretical framework for the study of education and sexuality. The program also provides post-doctoral fellowships to African scholars. The fellowships specifically target junior scholars with good grounding in behavioral sciences and a keen interest to develop expertise and career in the field of sexuality research.

Under this program, APHRC organized a two-day workshop entitled 'Theorizing Sexuality in sub-Saharan Africa' in May 2005 in Nairobi, Kenya. This workshop sought to identify the broad notions of sexuality across the region, review the state of knowledge on sexuality and existing theories, and work towards developing theoretical frameworks for understanding sexuality in Africa. The workshop brought together over 30 leading scholars from a range of disciplines to share their intellectual expertise in defining the conceptual/theoretical frameworks for sexuality research in sub-Saharan Africa. Workshop deliberations focused on the meaning of sexuality in the African context, the state of knowledge on sexuality in the region, and the conceptual framework(s) for sexuality research. The participants were drawn primarily from the sub-Saharan Africa region.

The program also recruited four sabbatical fellows who will spend six months each at the Center in 2006 (see section on Sabbatical Fellowships under Capacity Strengthening for more details).

● Realizing Sexual and Reproductive Health and Rights of Poor and Vulnerable Populations

APHRC entered into a partnership on a new Research Program Consortium (RPC) led by the Institute of Development Studies (IDS), University of Sussex (UK), which seeks to address factors underlying the persistent low priority given to sexual and reproductive health (SRH) and rights in policy and practice by developing countries. This RPC is motivated by the fact that despite two decades of sustained effort, progress on improving SRH has remained slow and SRH rights are still poorly understood.

The RPC, whose overall objective is to improve sexual and reproductive health for poor and vulnerable populations, will provide evidence on the high levels of morbidity and mortality associated with poor SRH, and the unmet need for SRH services. The Consortium will communicate this evidence to the various stakeholders in this area. The project will further formulate innovative ways to improve access to existing and new low cost SRH technologies and services by the poor, as

well as, improve knowledge of the constraints to translating SRH rights into reality. In addition, the Consortium will build national consensus and capacity of various actors to include SRH and rights into the policy agenda and contribute to the realization of the Millennium Development Goals. The Consortium studies will be implemented in Africa and Asia.

To inform the work of the Consortium, APHRC organized a consultative workshop in November 2005 to deliberate on various SRH and rights challenges and reach a consensus on the key challenges among vulnerable communities. Following the workshop deliberations, it was agreed that a number of SRH conditions afflicting poor and vulnerable women have been neglected and have, therefore, remained largely invisible. Particularly neglected issues, according to the workshop, include unsafe abortion, sexually transmitted infections, reproductive cancers, menstrual problems, sexual/gender violence, infertility, fistula, among others.



Eliya Zulu, APHRC's Deputy Director, addresses participants during a consultative workshop to deliberate on various SRH and rights challenges.

Other partners in the RPC include BRAC (Bangladesh), EngenderHealth, INDEPTH Network, and the London School of Hygiene and Tropical Medicine. The RPC is funded by the Department for International Development (DFID) of the United Kingdom, and will be implemented over a five-year period from September 2005.

Understanding Africa's Education Challenges ●●●

Education is seen as a cornerstone for poverty eradication. And this is perhaps the reason why poor countries have committed to achieving the Universal Primary Education (UPE) Millennium Development Goal by 2015. APHRC's wishes to see this happen are reflected in its Education Research Project discussed below.

● Education Research Project

The Education Research Project (ERP), initiated in 2004, seeks to assess circumstances and reasons associated with primary school enrolment, retention, dropout, and progression among slum and non-slum residents of Nairobi. The project



Frederick Mugisha, a Research Scientist, heads the Education Project.

focuses on assessing factors, other than school fees, that affect schooling at the primary level and progression to secondary school. This is important because some African countries (including Kenya which introduced free primary education in 2003) are using the free-primary education policy as their main vehicle to attaining the UPE Millennium Development Goal. The project, which collects comparative data on primary schooling in urban slum and non-slum settings of Nairobi, has its overall aim as providing the evidence base to guide policy makers in sub-Saharan Africa on mechanisms for achieving UPE.

In 2005, the ERP collected baseline data in the study communities i.e. slum (Korogocho & Viwandani) and non-slum (Harambe & Jericho) in Nairobi. The collected data were processed and are being analyzed. In 2006, the ERP, which is following up children aged 5-19 years for a three-year period,



Informal schools in Nairobi's slum settings lack basic physical facilities and equipment, as well as qualified teaching staff.

will continue with data collection and analysis, as well as initiate dissemination and policy dialogue processes with its targeted audiences. This project is scheduled for completion in 2007 and is funded by the William and Flora Hewlett Foundation.

Technical Assistance ●●●

The Center provides technical assistance to governmental and non-governmental organizations working in the development field. This ranges from carrying out exploratory/baseline studies, operations research to determine cost-effective methods of administering services, to designing, monitoring and evaluation procedures to determine the impact of intervention programs in areas where the Center has technical expertise or comparative advantage. The Technical Assistance program contributes to enhanced dialogue with governments and policy-makers around the continent. The program also enhances the visibility and relevance of the Center's work, as well as, expanding the Center's partnerships in Africa.

In 2005, APHRC provided assistance to two projects. The first project was commissioned by the World Health Organization. The project seeks to assess the impact of introducing Visual Inspection with Acetic Acid (VIA) screening approach to increase the proportion of eligible women screened and treated when necessary to curb or reduce the prevalence of cervical cancer in seven African countries (Madagascar, Malawi, Nigeria, Tanzania, Uganda, Zambia, and Zimbabwe). APHRC is providing technical assistance in monitoring and evaluation of the feasibility of setting up the intervention.

The second project, titled "Identifying and Targeting the Poor for Waivers of Service Fees at District Hospitals in Kenya", seeks to assist the Ministry of Health in Kenya to develop mechanisms for identifying vulnerable people to benefit from a hospital waiver program. APHRC's responsibility is to develop an instrument that is less intensive on data, but with high degree of accuracy that can be easily and routinely administered within a hospital setting to identify the poor for waiver of hospital fees. Data was collected in 2005 and the instrument will be finalized in early 2006.

Capacity Strengthening ●●●

APHRC continues to be strongly committed to strengthening professional and institutional research capacity in the region through targeted scientific and methodological seminars, sabbatical and post-doctoral fellowships, scholar exchanges, and research internship and traineeship programs linked to its ongoing research projects. Below are more details on APHRC's capacity strengthening achievements in 2005.



Zewdu Woubalem

● Post-Doctoral Fellowships

The Post-Doctoral Fellowship program targets scholars with a PhD or equivalent in either social, behavioral or health sciences or public health, and demonstrated promise of intellectual leadership in a field relevant to the Center's mission. In 2005, APHRC's Post-Doctoral program continued hosting the four Fellows (Jean-Christophe Fotso - Cameroonian, Zewdu Woubalem - Ethiopian, Chi-Chi Undie - Nigerian and Johannes John-Langba - Sierra Leonean) recruited in 2004. The program also recruited two more Fellows (Kabwe Benaya - Zambia and Adama Konseiga - Burkina Faso). Zewdu and Jean-Christophe were promoted to new positions i.e. Research Associate and Associate Research Scientist, respectively, later in the year.



Johannes John-Langba



Adama Konseiga



Jean-Christophe Fotso



Chi-Chi Undie



Kabwe Benaya

● Sabbatical Fellowships

Sabbatical Fellowships are targeted at senior university lecturers and scholars in other institutions with a proven track-record of conducting research. With funding from the Ford Foundation under the Education and Sexuality project, APHRC recruited four Sabbatical Fellows in 2005 who will spend six months each at the Center in 2006. These include:

- Dr. Chimaraoke Otutubike Izugbara (Nigerian), Lecturer, Department of Sociology & Anthropology, University of Uyo, Nigeria
- Prof. Akim J. Mturi (Tanzanian), Associate Professor of Demography and Program Director (Population Studies), School of Development Studies, University of KwaZulu-Natal, South Africa
- Dr. Wanjiku Khamasi (Kenyan), Senior Lecturer, School of Education, Department of Family and Consumer Services, Moi University, Kenya
- Prof. Patricia Kameri-Mbote (Kenyan), Senior Lecturer and former Dean of the Faculty of Law, University of Nairobi, Kenya

● Research Trainee Fellowships

The Research Trainee Fellowships are targeted at young Africans with masters-level training in either the social and health sciences, or related fields. Through the program, trainees develop practical experience in research and are expected to proceed for their doctoral training at the end of the fellowship. The Center continued to train four Research Trainees: Elizabeth Kimani (Kenya), Eugene Darteh (Ghana), Robert Ndugwa (Uganda) and Abdallah Ziraba (Uganda) during the year. Robert Ndugwa left to pursue doctoral studies at the University of Heidelberg, Germany in August 2005.



Abdallah Ziraba



Elizabeth Kimani



Eugene Darteh

● Internships

The Internship Program targets doctoral students who seek to explore or define their thesis projects, or require field experience in Africa. These are short-term practical training fellowships. In 2005, APHRC hosted five interns (Michelle Osborn from Case Western Reserve University, USA; Salome Wawire and Blessing Mberu both from Brown University, USA; Gloria Chepng'eno from the University of Southampton, UK; and Joana Crichton from the University of Sussex, UK); Gloria and Joana are still at the Center and will complete their internships in 2006.

● Macro-Level Analysis Training

In a new move to strengthen APHRC researchers' capacity in macro-level studies, the Center facilitated three researchers (Drs. Frederick Mugisha, Zewdu Woubalem and Jean-Christophe Fotso) to attend a 3-month training offered by the International Institute for Applied Systems Analysis (IIASA) in Austria between June-August 2005. APHRC's research has been based mainly on micro-level analysis, but as the Center expands, there is need to go beyond this and be able to carry out more macro-level studies.

During the training, the researchers focused mainly on multi-state methods of human capital projections, taking educational attainment as a major source of demographic heterogeneity. They used census and survey data from Kenya, Malawi and Uganda to estimate mortality and fertility differentials by educational attainment, and education transition rates. Using these estimates, multi-state techniques were used for population projections and analysis of any implications. This, according to the trio, was further enriched by a series of lectures and seminars conducted by scholars associated with IIASA as members of staff or associates. According to Dr. Zewdu, the training made him realize "that comparative macro-level analysis among countries in the region is an important research area which has been less explored".

Policy Dialogue



APHRC's Executive Director, Dr. Alex Ezeh (right) with other participants, follow proceedings of a seminar for Heads of National Population & AIDS Councils in Africa to discuss the 'Contribution of National Population Offices to Achieving the ICPD Agenda' held in Nairobi in September 2005.

Policy Dialogue and Dissemination ●●●

One of APHRC's strategic objectives is to promote utilization of empirical evidence for policy formulation and program improvement through targeted and sustained dissemination of research findings and engaging policy makers throughout the research process. The Center also seeks to play a central role in defining key research issues and influencing international policies on issues relevant to sub-Saharan Africa by participating actively in international meetings and technical panels that discuss various research, development, and capacity strengthening issues relating to the continent.

APHRC implements policy dialogue and dissemination through collaborations with policy makers and agencies, workshops, the mass media, and publications.

● Collaborations with Policy Makers and Agencies

APHRC staff continued to work closely with the City Council of Nairobi in implementing the Nairobi Urban Health and Poverty Partnership. The role of the City Council in this partnership is to coordinate and facilitate the interventions being implemented by the partnership, and to apply lessons learnt in the government policy framework.

The Center also worked closely with the National Coordinating Agency for Population and Development (NCAPD) in implementing the Nairobi Urban Health Equity Gauge project. Through this collaboration, APHRC is able to feed its research evidence into NCAPD's policy processes, and together, lobby the government and other developing partners in addressing issues emerging from the Center's research.

● Workshops

Through its collaboration with the NCAPD, APHRC engaged with parliamentarians in a workshop titled "Repositioning Population and Reproductive Health for Attainment of National and Millennium Development Goals" held in April 2005. The



Members of the Kenyan National Assembly, Government of Kenya officials and Donor Representatives follow proceedings of the workshop on "Repositioning Population and Reproductive Health for Attainment of National and Millennium Development Goals".

purpose of the workshop was to call on policy makers to prioritize issues of reproductive health; these issues have been marginalized over the past decade with attention having largely shifted to HIV and AIDS. The workshop was attended by several members of the Kenyan National Assembly, Kenyan government officials from Ministries of Health and Planning & National Development, with wide representation from the donor community, the Southern Africa Parliamentary Alliance on Health, the Global Equity Gauge Alliance, and research institutions in Kenya. Some of the immediate results of the workshop were the formation of an Interim Parliamentary Network on Population and Reproductive Health to lobby for increased budgetary allocation for Population, Family Planning and Reproductive Health in Parliament, among others; and the commitment by Kenyan government to have a budget-line for reproductive health and family planning commodities starting from the 2005-2006 budget.

Further, APHRC collaborated with the African Population Advisory Council, NCAPD, the Center for African Family Studies, and the Kenya office for the United Nations Population Fund to organize a seminar for Heads of National Population & AIDS Councils in Africa to discuss the 'Contribution of National Population Offices to Achieving the ICPD Agenda' in September 2005. The seminar noted a number of challenges facing National Population Offices in Africa which hinder progress in their programs, among them, lack of adequate and comparable data for the implementation of population and development policies and programs; growing poverty within countries; gender imbalances in policy and development programs; and limited resource mobilization for population and development programs. The seminar also noted that there are emerging population challenges in Africa which need to be addressed urgently, including migration, urbanization, family transitions (i.e. child-headed as well as grand-parents-headed households), and aging. The seminar further discussed ways of bridging the research-policy gap in the region.

In addition to these policy dialogue events, APHRC staff participated in a number of international and local conferences and seminars where they contributed to dialogue on population and health policies on the continent.

● Mass Media

APHRC uses the mass media to inform policy debates on issues of population, health and development in Africa. In 2005, the Center used both local Kenyan media as well as regional and international media to disseminate its research and create awareness about its work. The following is a list of media appearances in 2005:

- February 7-14 2005: "APHRC on GNet Africa Window," *GNet Website*.
- May 4, 2005: "African Sexuality 'not understood'," *The Kenya Times*. This was a spot news item. *Kenya Times* a privately-owned daily newspaper with semi-national coverage in Kenya.

- May 4, 2005: "Support AIDS Research, Center Urges," *The Standard*. This was a spot news item. *The Standard* is a privately-owned daily newspaper with national coverage in Kenya.
- July 11, 2005: "Urban Population Explosion and Increasing Social Inequalities in sub-Saharan African Cities," *The EastAfrican*. This was published to mark the World Population Day celebrated on July 11th 2005 whose theme was "Equality". *The EastAfrican* is a regional weekly newspaper for the East African region.
- July 27, 2005: "Build Cities to Contain Population Explosion," *The Standard*. This was a commentary piece on the current rapid urbanization in SSA and the resulting congestion in cities and poor health outcomes of city residents.
- October 1, 2005: "African Population and Health Research Center," *British Medical Journal*. This particular issue of the journal was focusing on Africa.

● Publications

APHRC uses publications to disseminate its findings to both scientific and non-scientific audiences. These include newsletters, fact sheets, policy briefs, peer-reviewed journal articles, book chapters, and working papers. In 2005, APHRC published three quarterly newsletters, one fact sheet, eight peer-reviewed journal articles, five book chapters, and one working paper. Some of these are detailed below:

Peer-Reviewed Journal Articles and Book Chapters

Amuyunzu-Nyamongo, M. and **A. C. Ezeh** (2005). "A Qualitative Assessment of Support Mechanisms in Informal Settlements of Nairobi, Kenya". *Journal of Poverty*, 9(3), 2005.

Chimbwete, C. E., Susan C. W. and **E. M. Zulu** (2005). "The Evolution of Population Policies in Kenya and Malawi", *Population Research and Policy Review*, 2005, 24:85-106.

DeRose, L. F. and **A. C. Ezeh** (2005). "Men's Influence on the Onset and Progress of Fertility Decline in Ghana 1988-98", *Population Studies*, 2005, 59(2): 197-210.

Fotso, J. C. and B. Kuate-Defo (2005). "Measuring Socioeconomic Status in Health Research in Developing Countries: Should we be Focusing on Household, Communities or Both?" *Social Indicators Research*, 72(2): 189-237.

Fotso, J. C. and B. Kuate-Defo (2005). "Household and Community Socioeconomic Influences on Early Childhood Malnutrition in Africa". *Journal of Biosocial Science*, DOI 10.1017/S002193 2005 026143.

Hennink, M. and **N. J. Madise** (2005). "Influence of User Fees on Contraceptive Use in Malawi". *African Journal of Population Studies*, 20(2): 125-141.

Konseiga, A. (2005). "Economic Development and Globalization: New Patterns of Migration in West Africa". In Veronika Bilger & Albert Kraler (eds), *African Migration: Historical Perspectives and Contemporary Dynamics*, Part I.

Montgomery, M. R. and **A. C. Ezeh** (2005). "The Health of Urban Populations in Developing Countries: An Overview". In Sandro Galea and David Vlahov (eds), *Handbook of Urban Health: Populations, Methods and Practice*. New Jersey: Springer, Chapter 10.

Montgomery, M. R. and **A. C. Ezeh** (2005). "Urban Health in Developing Countries: Insights from Demographic Theory and Practice". In Sandro Galea and David Vlahov (eds), *Handbook of Urban Health: Populations, Methods and Practice*. New Jersey: Springer, Chapter 17.

Mugisha, F. (2005). "Urban-rural Differentials in Child Labor: How Effective is the Multiple Indicator Cluster Surveys in Informing Policies that Promote the Human Rights of Children in Urban Areas? An Example of Kenya". In Alberto Minujin, Enrique Delamonica, and Marina Komarecki (eds), *Human Rights and Social Policies for Children and Women: MICS Application in Theory and Practice*, New York: New School University and UNICEF, Chapter 14.

Taffa, N. and **G. Chepngeno** (2005). "Determinants of Health Care Seeking for Childhood Illnesses in Nairobi Slums", *Tropical Medicine and International Health*, March 2005, 10(3): 240-245.

Woubalem, Z. (2005). "Half-Baked HIV/AIDS Knowledge: Blessing or Curse?" *Journal of Health and Population in Developing Countries*, March 29, 2005, <http://www.jhpd.unc.edu/2005papers/woubalem.pdf>.

Zulu, E. M. and A. Sibanda (2005). "Racial Differences in Household Structure." In Tukufu Zuberi, Amson Sibanda and Eric Udjo (eds.), *The Demography of South Africa*. New York: M. E. Sharpe, Chapter 8.

Working Papers

Mberu, B. (2005). *Internal Migration and Household Living Conditions in Ethiopia*. APHRC Working Paper. Nairobi: APHRC.

Website

APHRC also made use of the Internet to disseminate its publications and activities. The Center's publications were posted on its website and e-publications circulated through emailing lists and relevant Internet networks. APHRC started redesigning its website to make it more dynamic and easy to navigate; the new website will be launched in 2006.

Financial Report ●●●

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2005

	2005 US\$	2004 US\$
INCOME		
Grant income	1,801,617	1,806,502
Other income	74,405	35,707
Interest income	<u>8,246</u>	<u>2,879</u>
Total income	<u>1,884,268</u>	<u>1,845,088</u>
EXPENDITURE		
Programme costs	1,496,371	1,094,955
Administration and support costs	<u>375,188</u>	<u>395,830</u>
Total expenditure	<u>1,871,559</u>	<u>1,490,785</u>
Surplus/(deficit) for the year	12,709	354,303

BALANCE SHEET AT 31 DECEMBER 2005

	2005 US\$	2004 US\$
ASSETS		
Non current assets		
Equipment and motor vehicles	<u>126,521</u>	<u>125,773</u>
Current assets		
Cash and bank balances	1,278,371	779,824
Investments	480,167	309,022
Debtors and deposits	<u>488,480</u>	<u>335,991</u>
	<u>2,247,018</u>	<u>1,424,837</u>
TOTAL ASSETS	<u>2,373,539</u>	<u>1,550,610</u>
FUND BALANCE AND LIABILITIES		
Fund balance	<u>1,334,625</u>	<u>1,321,168</u>
Current liabilities		
Deferred income	967,575	177,930
Creditors and accruals	71,339	51,512
	<u>1,038,914</u>	<u>169,442</u>
TOTAL FUND BALANCE AND LIABILITIES	<u>2,373,539</u>	<u>1,550,610</u>

Board and Staff ●●●

2005 Board Meeting

APHRC held its 6th annual meeting of the Board of Directors in November 2005 in Naivasha (Kenya). The meeting, which brought together eleven board members, was also attended by representatives from some of the Center's main financial supporters (The Rockefeller Foundation & The William and Flora Hewlett Foundation). The meeting commended the Center for exemplary performance in 2005 manifested in the increased number of publications, and the overall growth in terms of its research projects and financial budget; these grew by 25% from the previous year. The meeting also discussed the development of a new strategic plan for the period 2007-2011 given that the current one ends in 2006. The meeting recommended that the new strategic plan be developed by the Center's management (with staff involvement) and be finalized in later 2006 through input from external stakeholders. Other issues discussed were: the need for the Center to (i) consolidate its research work into three-five research programs (e.g. urban health, education, HIV and AIDS, and Reproductive Health), (ii) boost its dissemination and advocacy activities, and (iii) recruit more senior African research scientists. The meeting served to officially welcome two new board members i.e. Drs Musimbi Kanyoro (General Secretary, World Young Women's Christian Association) and Mark Montgomery (Senior Research Associate of the Policy Research Division at the Population Council & Professor of Economics at the State University of New York).



Members of APHRC Board, Management and Donor Representatives from the Rockefeller and Hewlett Foundations during the 2005 Annual Board meeting.

Staffing

APHRC is staffed by a multi-disciplinary team of highly-trained scientists drawn from different parts of Africa. Currently, the Center has 17 researchers (drawn from 12 African countries) supported by 12 administrative, communication and technical staff. The Center also employs 54 field workers and data entry clerks who work on its Nairobi Urban Health and Demographic Surveillance System.

In 2005, APHRC continued to strengthen its research arm by recruiting:

- Two Post-Doctoral Fellows:
 - Kabwe Benaya from Zambia. Kabwe has a PhD in Social Statistics from the University of Southampton, UK; and
 - Adama Konseiga from Burkina Faso. Adama has a PhD in Economics (a collaboration between the University of Bonn in Germany and the University of Auvergne in France).
- One Data Analyst - James Ciera from Kenya. James has two Masters Degrees in Applied Statistics and Biostatistics from Limburgs Universitair Centrum (LUC), Belgium.
- Three Research Officers - Charles Epari (Masters of Education Degree in Education Planning from Kenyatta University, Kenya), Teresa Saliku (Masters Degree in Community Health and Health Management in Developing Countries from University of Heidelberg, Germany), and John Kebaso (Masters Degree in Public Health and Epidemiology from Kenyatta University, Kenya). The three are Kenyans.



James Ciera



Charles Epari



Teresa Saliku



John Kebaso

2005 Board of Directors ●●●



*Demissie Habte
(Chair, 2003-2006)
International Director,
James P. Grant School of
Public Health,
BRAC University, Dhaka,
Bangladesh.*



*Wolfgang Lutz
(Deputy Chair)
Project Leader,
International Institute for
Applied Systems Analysis
(IIASA),
Luxemburg, Austria.*



*Alex Ezeh
Executive Director, African
Population and Health
Research Center,
Nairobi, Kenya.*



*Anastasia Gage
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Dept. of International
Health & Development,
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*Ayo Ajayi
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Population Council,
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*Sara Seims
(Chair, 2001-2003)
Director,
Population Program,
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Hewlett Foundation,
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*Eddah Gachukia
Proprietor,
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*Jotham Musinguzi
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Ministry of Finance,
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Kampala, Uganda.*



*Mohamed S. Abdullah,
Department of Medicine,
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Nairobi*



*Souleymane Mboup
Director,
Africa Aids Research
Network and Professor,
Univ. Cheikh Anta Diop,
Dakar, Senegal*



*Jane Menken
Distinguished Professor
and Director, Institute
of Behavioral Science,
University of Colorado
at Boulder, USA*



*Musimbi Kanyoro
General Secretary,
World Young Women's
Christian Association
(YWCA)*

*Mark Montgomery,
Senior Research
Associate,
Policy Research
Division, Population
Council &
Professor of Economics
at the State University
of New York*

Funding and Partnerships ●●●

Funding and other Support ●●●

APHRC is grateful to the following institutions for their continued support of its activities:

- European Commission
- Ford Foundation
- Government of Kenya
- National Institute of Child Health and Development (US)
- Rockefeller Foundation
- UK Government's Department for International Development (DFID)
- Wellcome Trust
- William and Flora Hewlett Foundation
- World Bank
- World Health Organization (WHO)

Partnerships ●●●

In 2005, the Center maintained partnerships with many local and international organizations as follows:

Government Agencies

- Central Bureau of Statistics, Kenya
- City Council of Nairobi
- Kenya Medical Research Institute (KEMRI)
- Ministry of Health, Government of Kenya
- National Coordinating Agency for Population and Development (Ministry of Planning and National Development, Kenya)

Non-Governmental Organizations and Networks

- BRAC (Bangladesh)
- Committee for International Cooperation in National Research in Demography (CICRED)
- EngenderHealth (USA)
- Global Equity Gauge Alliance (GEGA)
- Guttmacher Institute
- INDEPTH Network
- Initiative Privée et Communautaire de Lutte Contre le VIH/SIDA (IPC/BF)
- Institut de Recherche pour le Développement, France (IRD)
- Intermediate Technology Development Group (ITDG)
- International Union for Health Promotion and Education
- JHPIEGO - an affiliate of John Hopkins University
- Panos Eastern Africa
- Planned Parenthood Association of Ghana (PPAG)
- Program for Appropriate Technology in Health (PATH)
- Union of African Population Studies (UAPS)
- Youth Net and Counseling (YONECO - Malawi)
- WHO's Health Metrics Network

Universities

- Brown University (US)
- London School of Hygiene & Tropical Medicine (UK)
- Makerere University (Uganda)
- Umea University (Sweden)
- Université de Ouagadougou (Burkina Faso)
- University of Amsterdam (Netherlands)
- University of Cape Coast (Ghana)
- University of Colorado (US)
- University of Ghana
- University of Malawi
- University of Nairobi (Kenya)
- University of Southampton (UK)
- University of Sussex, UK
- University of Witwatersrand (South Africa)

OUR CORE PROGRAMS

- **CONTRIBUTION TO SCIENCE**

The Center seeks to contribute to science by generating credible knowledge that can inform policy formulation and program improvements on the continent. A key index of excellence is the quality of the scientific papers published by APHRC staff in leading international peer-reviewed journals in population, health, education and other development fields. The scientific papers also serve to enhance the Center's role and that of African researchers in informing global understanding of population and health challenges facing sub-Saharan Africa. All the research done at the Center conform to national and international ethical review procedures.

- **POLICY DIALOGUE**

To ensure its research products are locally owned, relevant and responsive to local policy needs, the Center emphasizes continuous dialogue with policy makers and program managers at all stages of the research process. The Center provides guidance to international population and health discourse on Africa through peer-reviewed publications, targeted dissemination seminars, participation in conferences and seminars, and serving on various international panels. The Center's research results are further disseminated through the mass media and an array of non-technical in-house publications.

- **STRENGTHENING RESEARCH CAPACITY**

To boost the role of African scholars in generating credible evidence to inform population and health policies and programs in the region, the Center undertakes a number of capacity strengthening initiatives. APHRC organizes technical workshops to enhance the technical skills of African scholars. The workshops focus on cutting-edge theoretical, analytical and methodological issues in population, health, and development research. The Center's other research capacity strengthening programs include research traineeships and internships, post-doctoral and sabbatical fellowships, and scholar exchanges. Through these programs, APHRC not only provides guidance in research processes, but also creates opportunities for promising African scholars to develop and maintain active research careers.



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