



African Population and Health Research Center



2009
Annual Report

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





Our Vision:

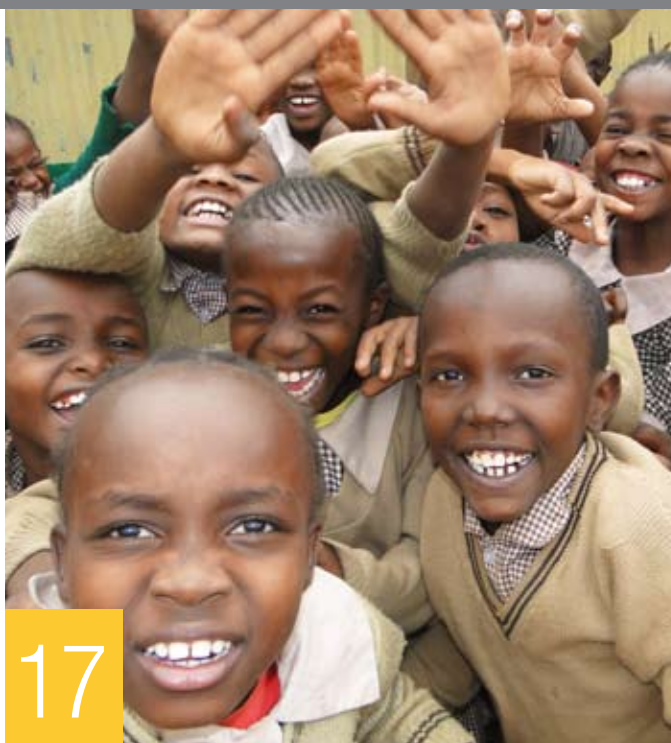
*To be a global center of excellence,
consistently delivering sound scientific
evidence for policy and action*

Our Mission:

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

CREDITS:

Photos: African Population & Health Research Center
Back cover: An artist's impression of the new APHRC
headquarters.



17 Education Research Program

The theme made considerable progress in all the goals that it set out to achieve as indicated under its three primary projects.

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APHRC IN BRIEF

The African Population and Health Research Center (APHRC) is a pan-African, non-profit, non-governmental international organization committed to conducting policy-relevant research on population, health and education issues in sub-Saharan Africa. The Center was established in 1995 as a program of the Population Council and became an autonomous research institute in 2001. In addition to conducting research, APHRC promotes the use of research evidence in policy and practice, and strengthens the capacity of African scholars and institutions to conduct research and undertake policy analysis. APHRC seeks to contribute to science by generating credible knowledge that can inform policy formulation and program improvements on the continent.

The vision of the Center is to be a global center of excellence, consistently delivering sound scientific evidence for policy and action, and the mission is to promote the well-being of Africans through policy-relevant research. The Center's work is guided by the values of commitment to excellence; independence and innovation; dedication to conducting research in an ethical manner; integrity, fairness, transparency, and accountability in all its work; and concern for social and economic equity.

RESEARCH PROGRAMS

The Center's research seeks to improve the understanding of population, health, and education issues through the development and implementation of innovative policy-oriented research programs to address the region's key challenges in those areas. Currently, the Center's priority research areas are urbanization and well-being, population dynamics and reproductive health, health challenges and systems, and education. Over the past three years, APHRC researchers have published more than 100 peer-reviewed journal articles and successfully implemented over 30 primary research projects. The Center is becoming a leading think tank in its fields of research in sub-Saharan Africa. Globally, its reputation is growing rapidly as a result of its credibility as a source of evidence-based information on key issues confronting Africa.

POLICY DIALOGUE AND COMMUNICATION

To ensure that the Center's research products are locally-owned, relevant and responsive to local policy and program needs, APHRC emphasizes continuous dialogue with policy makers and program managers at all stages of the research process. Collaboration with policy makers in research projects, targeted policy engagement and dissemination events, serving on various international panels, and the mass media are some of the Center's key channels for policy dialogue. Engagement with the mass media has seen APHRC's findings extensively featured in the print and electronic media in Kenya, across the region, and globally.

STRENGTHENING RESEARCH CAPACITY

APHRC is committed to strengthening professional and institutional research capacity in the region through targeted scientific and methodological seminars, research traineeships and internships, post-doctoral and sabbatical fellowships, scholar exchanges, and supporting doctoral training programs in African universities. The pur-

pose is to enhance the role of African scholars in generating credible evidence to inform population, health, and education policies and programs in the region.

OUR STRENGTHS

Key strengths of APHRC stem from its strong commitment to excellence in research, centered on the design and implementation of innovative projects that are relevant and responsive to local and regional policy and program needs. The Center implements these projects through an interdisciplinary approach, which is made possible by its multidisciplinary research teams that bring together a combination of skills and scholarly expertise from such disciplines as anthropology, demography, economics, epidemiology, education, health promotion, sociology, statistics, and public health. APHRC is able to effectively define and address research and policy priorities across sub-Saharan Africa given its regional outlook reflected in (i) staffing, with researchers drawn from 12 different African countries, (ii) the number of countries in Africa where APHRC undertakes primary research programs, and (iii) the international composition of the Center's Board of Directors.

FUNDING

APHRC is supported by a diverse range of donors that include William and Flora Hewlett Foundation, the Rockefeller Foundation, the Ford Foundation, Google.Org, Wellcome Trust, Packard Foundation, the World Health Organization (WHO), the Department for International Development (DfID), the National Institutes of Health (NIH), Bill and Melinda Gates Foundation, the International Development Research Center (IDRC, Canada), Global Fund through ICF Macro International, Ipas, Doris Duke Charitable Foundation, International Planned Parenthood Federation, World Toilet Association, USAID, Carnegie Corporation of New York, the World Diabetes Foundation and the Government of Kenya. In all, there were 29 funding partners; 14 of them funded new projects and activities in 2009.



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Introduction

This report summarizes progress made in designing and implementing projects and activities in the three core program areas at APHRC, namely: Research, Research Capacity Strengthening, and Policy Engagement and Communication.

Coming at the critical mid-point in the implementation of the Center's 2007-2011 Strategic Plan, this year's report focuses on the progress made in implementing the Center's core activities over the past year, while reflecting some possible new directions as the Center approaches its 10th anniversary in 2011.

The 2007-2011 Strategic Plan marked a significant departure in the way the Center was organized. The research program was reorganized into four substantive thematic areas of work, namely: urbanization and well-being, population dynamics and reproductive health, health challenges and systems, and education. Each of the themes is headed by a senior scholar, and develops its own strategy, goals, and objectives. In order to enhance

the capacity in translating research findings into policy and action, the Center has provided additional resources for the Policy Engagement and Communications unit, which focuses its efforts on promoting the use of research evidence to inform policies that promote the well-being of Africans.

Additionally, the Center sought to reinforce its hugely successful research capacity strengthening programs by forging strong partnerships with African and Northern universities and other research institutions to strengthen postgraduate training in the region. Furthermore, in all its core programs, the Center sought to expand and strengthen its partnership base as well as geographical scope and influence, while consolidating its efforts to become the leading African think-tank on population, health, and education issues.

This report highlights the progress made in implementing ongoing projects and in defining new programs, in line with the strategic plan and the priorities set for 2009.

The Center sought to reinforce its hugely successful research capacity strengthening programs by forging strong partnerships with African and Northern universities and other research institutions to strengthen postgraduate training in the region.



Industrialist Manu Chandaria and Osnat Keidar, a Visiting Scholar at APHRC, join the students of Ngunyumu Primary School, Korogocho, Nairobi, in a dance after the handover of toilets and handwashing facilities to the school.

Executive Summary

During the past year, the Center made considerable strides in consolidating its work and defining new programs in line with its strategic plan and core program priorities established at the beginning of the year.

Despite the global economic and financial crisis of the last two years, APHRC has continued to sustain the growth trajectory and momentum that started in 2005. 2009 represents a uniquely important milestone for the Center in terms of the number of new partnerships and programs it developed. Researchers at the Center worked diligently to implement ongoing research programs and write new proposals to generate the financial resources required for new programs. The combined result was remarkable progress in all the three core programs, and in attracting support from funding partners.

APHRC researchers produced 36 peer-reviewed journal articles that were accepted or published during the year. In addition, over 30 articles were submitted to various journals and were at different stages of the peer review process at the end of the year. The list of publications for the year is available on our website, www.aphrc.org/publications. Staff members made over 50 presentations in various international and national conferences and policy meetings during the year.

The year also witnessed a major expansion in the geographic scope of the Center's work, as researchers successfully completed the evaluation of the 10-year Packard Foundation's family planning program in Ethiopia, an assessment of progress in implementing the Maputo Plan of Action in nine countries, and the evaluation of the impact of the Global Fund to Fight AIDS, Tuberculosis, and Malaria in five African countries. Overall, the Center's research yielded important results

which portend great significance for influencing public policies in population, health, and education in sub-Saharan Africa.

For the first time since their establishment, all the four research themes developed, initiated, or participated in evaluation projects that provided very useful evidence to guide policy making on the improvement of health and other socioeconomic outcomes for the urban and rural poor in the continent. For instance, the Population Dynamics and Reproductive Health Theme is part of a consortium evaluating the impact of a six-year initiative funded by the Bill and Melinda Gates Foundation to improve reproductive health outcomes in urban areas in Kenya, Nigeria, Senegal, and India. The theme also initiated a new program funded by the Packard Foundation to evaluate the impact of interventions to reverse the stall in contraceptive use and fertility decline in Western Kenya.

The Education Research Theme launched a new program funded by the Hewlett Foundation to evaluate an intervention aimed at improving learning outcomes in reading and mathematics in early primary school grades 1, 2, and 3 in Kenya and Uganda.

The Health Challenges and Systems Theme continued with dissemination of results from the evaluation of the health impact of the Global Fund to Fight AIDS, Tuberculosis, and Malaria. The project was implemented in partnership with Macro International Inc., WHO, Harvard University, and Johns Hopkins University. Other projects by the Health Challenges and Systems Theme include a verbal autopsy research to determine causes of death in two Nairobi slums, the study and treat-

ment of cardiovascular disorders, and a study of aids for AIDS.

Another key milestone during the year was the fostering of partnerships with universities to improve research capacity and the quality of graduate studies in African universities. This initiative stands to make lasting impact in improving research capacity in Africa because it seeks to address the root cause of the problem at the level where the professionals are produced, rather than the symptoms which become evident after people graduate from universities. The year saw Research Capacity Strengthening metamorphose into a theme with significant progress in generating financial support for its expanding program of work.

The strategic decision to strengthen the Policy Engagement and Communication unit started paying off during the past year with greater engagement and interaction between researchers and potential end users of research results, including journalists and policy makers. This has led to greater visibility of the Center and its work in national and regional media networks. The unit organized a series of insightful training workshops to educate researchers on how to engage with journalists and policy makers.

The year started with APHRC's Executive Director Dr Alex Ezeh, and the Director of Research Dr Eliya Zulu contributing to the global population debate on "The World in 2050" at the University of California, Berkeley. It ended with many activities that included the co-hosting of the 8th International Conference on Urban Health (ICUH), active participation in the 2009 conference of the International Union for the Scientific Study of Population (IUSSP) in Marrakech, and in the International Family Planning Conference in Kampala, Uganda.

Looking back nine years . . . and looking into the future

As we look back to the founding of the Center eight years ago, we can't help but marvel at the remarkable achievements that now make it possible to start constructing the new office complex that will cost US\$7.2 million.



Jane Menken, PhD

The 2009 Annual Report of the African Population and Health Research Center (APHRC) comes against the background of the receding global financial crisis, which fortunately has not affected the Center adversely, as its growth and momentum of past years continue to the present. This year, APHRC achieved several milestones in its work, among which are the groundbreaking for the new headquarters building, the release of an independent external review of the institution, the development of metrics for continual monitoring and evaluation of the Center's programs, sustained success in attracting funding support from partners, and the start-up of the Consortium for Advanced Research Training in Africa (CARTA). The scientific productivity and international recognition of the fine work of APHRC staff continue.

As members of the APHRC Board of Directors, my colleagues and I are ever mindful of the Center's mission to promote the well-being of Africans through policy-relevant research on population, health, and education, and the vision to be a global center of excellence, which consistently delivers sound scientific evidence for policy and action. As we look back to the founding of the Center eight years ago, we can't help but marvel at the remarkable achievements that now make it possible to start constructing the new office complex that will cost US\$7.2 million. The 6-acre expanse of land is large enough to accommodate offices in two four-floor towers, an amphitheatre, seminar rooms, a restaurant, a training/meeting center with 40 self-contained residential rooms, and recreational facilities. The first stage of construction, the office complex, will be completed in early 2011, just before the 10th anniversary of the Center – to the pride of all Board members, APHRC staff, and our partners.

During 2009, the board-mandated external evaluation of the Center to identify opportunities and concerns, offered praise for the Center and its work, advice for improvement, and a recommendation for continuation of our strategic direction. Similarly, the assessment project funded by the William and Flora Hewlett Foundation to develop and pilot test metrics for measuring the impact of APHRC's programs concluded that the operations of the Center's research themes

are in accord with high professional standards. CARTA, co-led by APHRC and the University of the Witwatersrand School of Public Health, is poised to begin its program with an initial group of nine PhD-granting African universities.

As I celebrate my ninth year on the board, having been a member of the Founding Board, I am most struck by the steady growth in both the number of programs and financial support from partners and the quality of APHRC staff members. Whereas in 2001, we had five projects that commanded US\$1.0 million, at the end of 2009, we had 41 projects that cost US\$8.6 million to implement. This is an increase of 61% from the 2008 budget of US\$5.3 million. Remarkably, 15 partners continued support in 2009 and seven first-time donors came on board.

As a mark of the fine relationships between APHRC and its partners, the 10th APHRC Board meeting was hosted by the David and Lucile Packard Foundation in Palo Alto, California between November 8 and 11, 2009. That meeting saw the election of Board member Dr Marion Jacobs, Dean of Health Sciences at the University of Capetown, as the next Chair. She will take over at the end of 2010, when I leave after the nine years in which I have been privileged to serve with this Board. It is with a high sense of responsibility and a feeling of satisfaction that I look forward to continued association with APHRC and its many partners in the years ahead.

Under the focused and energetic leadership of Dr Alex Ezech, the founding Executive Director, who, with his management team, has nurtured the Center from a small project to a pan-African think tank, I am confident that APHRC will continue to grow and serve as a model of excellence in research and service to promote the well-being of Africans.

I am grateful to all funding and other partners for their continued confidence in APHRC. I commend all staff, management, and board members for their dedication that made the remarkable achievements of 2009 possible.

Sincerely,

Jane Menken, PhD
Chair, APHRC Board of Directors

Our progress has been steady... we have maintained the momentum

I am pleased to share this report on APHRC's activities in 2009 with you. The year was indeed a great success for APHRC in many respects; our progress in pursuing the Center's mission and vision remained steady, as was our commitment to excellence in every aspect of our work. APHRC reached several milestones in its work in 2009 despite the global financial crisis that negatively impacted the Center in a number of ways. The year was generally characterized by sustained growth and progress in a number of programmatic areas; a consolidation of several existing areas of work; and the development of new partnerships and initiatives.

The Center's emphasis on undertaking rigorous policy-relevant research on population, health, and education issues in sub-Saharan Africa continued to grow with dozens of publications in high impact peer-reviewed publications in 2009. A major shift in these publications was that a substantial proportion of them were based on APHRC-specific datasets rather than on external secondary datasets such as the Demographic and Health Surveys (DHS) or other publicly-available datasets. There has also been a lot of positive response to the work coming out of the Center with growing invitations from journal editors and editors of books to researchers at the Center to contribute articles. A number of the research themes started new programs that either expanded their geographic coverage, substantive focus, or simply solidified key areas of work.

The Center witnessed phenomenal growth in its Research Capacity Strengthening programs. In particular, 2009 saw the effective implementation of several programs as part of the Center's efforts to strengthen its partnership with African universities. The Consortium for Advanced Research Training in Africa (CARTA) took off to a great start while the African Doctoral Dissertation Research Fellowship continued its support to several doctoral students in African universities. The Policy Engagement and Communication (PEC) team success-

fully organized a number of activities to build relationships with media houses and officials of government ministries. Through the PEC unit, the Center partnered with many groups to engage policy makers in different forums across the region as well as/and also participated on/in several agenda-setting meetings organized by groups such as WHO, UNFPA, IUSSP, Association of African Universities, among others. The demand on APHRC staff to participate on these forums has continued to grow and remains a challenge as staff struggle to balance their workloads with the growing demands on their time.

In addition to programmatic milestones in each of the Center's core programs, 2009 also witnessed expansion of the Center's engagement with its various publics. The Center hosted several training workshops and international conferences including the IUSSP scientific conference on "Gender and Empowerment in the 21st Century in Africa" and the 8th International Conference on Urban Health (ICUH). The IUSSP seminar brought together researchers, policy makers, program managers, and other development partners to share experiences on innovative policies and programs that have pushed the region forward in promoting gender equality and women's empowerment in some countries, as well as highlight experiences that have undermined such efforts in other settings. The ICUH attracted close to 1,000 participants drawn from 45 countries across all continents.

Despite several setbacks in our efforts to find a permanent home for APHRC that would meet its growing needs for space and training facilities, 2009 represents a great breakthrough for the Center in this area. We finalized arrangements for start of work on the construction of the Center's headquarters offices in Kitsuru, Nairobi. The development, which is expected to be completed by early 2011, will greatly enhance APHRC's effectiveness and competitiveness as well as enhance its long-term sustainability. Another major milestone in 2009 was the institution of an external evaluation of the Center. Through the support of our Board and key



Alex Ezeh, PhD

funders, an external evaluation of the Center was commissioned in 2009. We are particularly grateful to the Hewlett Foundation who funded the external evaluation and to Arnon Mishkin, Pape Gaye, John Bongaarts, and Nelson Sewankambo for the diligence and candidness in the report which emerged from the evaluation. The report is available on request.

The Center's finances continue to be very well managed. The audited accounts for 2009 raised no issues but identified one area where the Center can continue to ensure more robust administrative systems: regular physical verification of fixed assets and inventory count of library stock.

None of these achievements and milestones would have been possible without the sustained commitment of all APHRC staff, the continued dedication of our board, and the dependable support of our funders. Our various partners, especially the Government of Kenya and the communities in which we work, have continued to enrich our work and to propel us to greater heights. We remain resolute in our commitment to honor and maintain the trust reposed on us. As we look to 2010 and to celebrating our 10th anniversary in 2011, we thank you for believing in us and for your continued support.



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Research Theme Reports

APHRC's research activities are organized into these four research themes:

- Urbanization and Well-being Research Program
- Population Dynamics and Reproductive Health Research Theme
- Health Challenges and Systems Research Theme
- Education Research Program

Urbanization and Well-being Research Program

The vision of the Urbanization and Well-being Research Program (UWRP), which was led by Dr Eliya Zulu, is to be a pacesetter in defining research priorities and producing credible evidence for understanding and addressing problems related to urbanization in Africa. This theme investigates a range of issues that include:

- How high rates of urbanization and growing urban poverty are likely to affect demographic indicators and development;
- The extent to which poverty and ill-health are linked to the length of residence in slum areas;
- Whether people move to slum settlements in response to life crises that have already impaired their health, or their health deteriorates as a result of living in slums;
- The extent to which slum dwellers move in and out of poverty, and how such transitions affect their health; and
- Whether the linkages between poverty, migration and health status vary at different stages of the lifecycle from childhood through old age.

This report highlights the major achievements of the Urbanization and Well-being Research Program (UWRP) in 2009. The UWRP has two main components: specific research projects addressing various aspects of urbanization and well-being, and management of the Data Unit, which was set up in 2007 to streamline data management, processing, and analysis for the Nairobi Urban Health and Demographic Surveillance System (NUHDSS) and all research activities nested on it.

THE NAIROBI URBAN HEALTH AND DEMOGRAPHIC SURVEILLANCE SYSTEM (NUHDSS)

The NUHDSS was set up in 2000 to provide a longitudinal platform for investigating linkages between urbanization, poverty and health, as well as to serve as a primary research tool for monitoring and evaluating the impact of interventions designed to improve the well-being of the urban poor in Kenya.

The APHRC Data Unit manages the NUHDSS, and it has successfully maintained a record of high quality data over the years.

This ensures the integrity of the Center's research evidence. An important way in which the unit remains strategic and effective is by adapting to the use of modern technology. In 2009, the unit developed and tested the use of Personal Digital Assistant (PDA) system for electronic data collection and entry. By eliminating manual data entry, the PDA improves the quality and speed of processing data and at the same time lowers operational costs. Shortly, all NUHDSS data collection and entry at the Center would be by PDAs only.

Since 2008, APHRC has been using the Geographic Information System (GIS) to locate households within the NUHDSS, map out health services as well as identify environmental hazards so as to determine associations between proximity to these features and the health status of the community. This year, the Data Unit set out to update the Center's GIS data by conducting a mapping exercise that identified new structures/households and any other recent physical developments within the study communities that needed to be captured by the system.

Further, the unit upgraded computer application systems used for data management by replacing the existing system with a more generic one that would automate creation of data entry screens to ensure prompt data entry. All these efforts helped in streamlining the Center's data collection and management systems, as a result of which the unit is now developing standard operational procedures as a reference manual to guide future activities. By the end of 2009, the NUHDSS had collected 21 rounds of longitudinal data and all data collected in the period 2003-2008 was ready for analysis.

URBANIZATION, POVERTY AND HEALTH DYNAMICS (UPHD)

The UPHD program, funded by the Wellcome Trust has six components that look at urbanization and its linkages to poverty, migration and the well-being of the urban poor at different stages of the life course, namely – childhood, adolescence, adulthood and old age. In particular, it seeks to investigate whether the people who move to slum areas are responding to life crises that have had adverse impacts on their health or whether slum residence itself has adverse consequences on the health and well-being of the residents.



Eliya Zulu,
Director of
Research



Netsayi Mudege,
Associate Research
Scientist



Donatien Beguy,
Associate Research
Scientist



Jacques Emina,
Associate
Research Scientist



Research from the UPHD generates evidence to address key health consequences of rapid urbanization and growing urban poverty. This five-year (2006-2010) program is being implemented in partnership with the London School of Hygiene and Tropical Medicine (UK) and the University of Southampton (UK). With one year to the end of the program, the team focused mostly on finalizing data collection and analyzing existing data to answer various research questions, particularly in these areas:

- **Child Health:** Children in informal settlements have been shown to have worse health outcomes compared to those in other urban or rural areas.
- **Maternal Health:** Maternal mortality is high in Nairobi's informal settlements at 706/100,000 compared to 488/100,000 countrywide.
- **Migration in Nairobi Slum Settlements:** The majority of residents in informal settlements come from rural areas.
- **Sexual Behavior among the Youth:** At 15 years of age, 14% of males and 10% of females in informal settlements have engaged in first sexual intercourse.
- **Poverty in Nairobi's Informal Settlements:** Poverty and unemployment levels are high, but higher levels of education reduce chances of being poor.
- **Health of Older People in Informal Settlements:** People who are aged 50 and above account for 5% of the

total population studied by the NUHDSS and the majority (63%) are male. They report inadequate access to health care.

TECHNICAL WORKSHOPS

In 2009, the theme held three special technical workshops on accurate data analysis, data documentation, and GIS applications to improve the skills of researchers.

- **Accurate data analysis:** The UPHD team addressed the problems of data quality arising from attrition and cases of non-response by organizing a three-day technical training workshop, which was facilitated by researchers from the University of Southampton and the London School of Hygiene and Tropical Medicine in September 2009.
- **Data documentation training for Health and Demographic Surveillance Systems:** Theme members participated in an INDEPTH Network training to introduce health demographic surveillance sites to the Data Documentation Initiative, a system that promotes intersite data sharing.
- **Training on Geographic Information Systems (GIS):** Researchers from the theme attended a special training to strengthen their skills in the use of GIS software. These training engagements helped sharpen the skills of researchers and equip them with requisite new knowl-



Hildah Essendi, Research Officer



Patricia Elungata, DSS Data Manager



Kanyiva Muindi, Research Officer



Ousmane Faye, Post-Doctoral Fellow



Harrison Njamba, IT Manager



In doing so, the theme also seeks to fully address the broader issues relating to drivers, challenges, and implications of rapid urbanization in Africa.

edge to be more productive, especially in publishing and presenting at learned conferences.

PAPERS

Researchers working on the Urbanization and Well-being Research Program had 13 peer-reviewed articles published in various journals and developed 16 scientific papers using data from the UPHD program for a special issue of the *Journal of Urban Health* which is scheduled for release in 2010. An additional set of 10 manuscripts were under peer-review at the end of the year.

FUTURE PLANS

The final year of the UPHD program (2010) will be dedicated to analyzing the longitudinal data that have already been collected. Theme members plan to submit the follow-up proposal to UPHD (called UPHD II) to Wellcome Trust. This will address several gaps in the current UPHD.

As a critical part of the search for pathways to reduce health inequities and improve living conditions among urban poor in Kenya and in other parts of sub-Saharan Africa, theme mem-

bers propose to undertake a follow-up survey to the Nairobi Cross-Sectional Survey (NCSS), which APHRC had conducted in 2000. That pioneering study had greatly helped in setting the plight of the urban poor living in Nairobi's informal settlements on the agenda of international agencies, governments, local authorities and the research community in Kenya and in the sub-region.

With the world health community marking 2010 as the year for urban health, the APHRC Urbanization and Well-being Research Program plans to be part of the global efforts to highlight the need to take action to improve health in cities.

Many of the activities of the theme in 2009 contributed to policy debates and interventions for addressing urban health inequities in Kenya and other parts of sub-Saharan Africa. No less is expected in the years ahead.



Samuel Kamiru, Data Programmer



Marilyn Wamukoya, Data Analyst



Thaddaeus Egondi, Data Analyst



Clement Oduor, DSS Field Supervisor



Nelson Mbaya, Assistant Database Programmer



Sheila Mwero, Personal Assistant to Director of Research

Population Dynamics and Reproductive Health Research Theme

The theme remains committed to expanding the scope of the Center's work on population dynamics and has embarked on development of proposals to seek funding for this work in the coming year, including forming a panel of African scholars to revisit the application of various fertility transition theories on Africa.



The goal of the Population Dynamics and Reproductive Health (PDRH) Theme is to provide scientific evidence for sustainable population policies and improved reproductive health in sub-Saharan Africa. The theme's work is categorized into four sub-thematic areas, namely Sexual and Reproductive Health and Rights, Fertility and Population Growth, Maternal and Child Health, and Monitoring and Evaluation of Population and Reproductive Health Programs. The theme, which is led by Dr Jean Christophe Fotso, expanded its operations in 2009, as a result of the consolidation of some activities and the initiation of new large, long-term, multi-country projects.

Under Sexual and Reproductive Health and Rights, the theme continued the implementation of key projects under the DFID-funded Realizing Rights Research Program Consortium. By December

2009, fieldwork for the study on gender-based violence carried out in the Korogocho and Viwandani slums of Nairobi was nearing completion. The theme also undertook a synthesis of research on marital rape and a scoping study on the use of menstrual cups by school girls and young women in Nairobi. The theme initiated an investigation into the family planning needs of HIV discordant couples, and a project on masculinity in slums.

Under the Fertility and Population Growth component, the theme provided leadership in selecting manuscripts for producing the first ever comparative monograph on fertility trends involving 25 Health and Demographic Surveillance Sites (HDSS) in the INDEPTH Network across Africa and Asia. The low-fertility sites are mostly in Asia. The theme initiated another comparative study involving five DSS sites in three countries in Africa (Kenya, Ghana and Burkina Faso) to un-

derstand the impact of birth intervals on child survival.

The Reproductive Norms in Nigeria project was successfully completed in early 2009, and its results written up in the report 'Change and Continuity in Reproductive Norms and Behavior: A Northern Nigeria Study'. Overall, the project produced new evidence showing that despite years of sexual and reproductive health (SRH) campaigns, traditional sexual norms are still predominant in parts of northern Nigeria. A new project on abortion and unwanted pregnancies among the urban poor in Nairobi was initiated and will continue throughout 2010. These projects under fertility and population growth were funded by DFID, through Ipas, and the Packard Foundation.

Under the Maternal and Child Health component, the PDRH theme provided



Jean-Christophe Fotso, Head, Population and Reproductive Health



Gwendolyn Morgan, Technical Leader



Michael Mutua, Data Analyst



Carol Mukira, Senior Research Assistant



Martin Mutua, Data Analyst

leadership in UPHD's Maternal and Child Health project, which seeks to investigate the patterns of malnutrition, morbidity and mortality, and to identify the main diseases and causes of deaths among neonates, infants and children in Nairobi's informal settlements. It also examines patterns of sexual and contraceptive behavior among post-partum women in these communities. All children born in the study area and their mothers are being prospectively followed up. The results show the high magnitude of infant and child malnutrition and the extent of unwanted fertility. The results on malnutrition are being used by the Nutrition Working Group of the Ministry of Public Health and Sanitation in Kenya to improve on its services to the people.

In the Monitoring and Evaluation of Population and Reproductive Health Programs, a major milestone was the initiation of the six-year Gates Foundation-funded Measurement, Learning & Evaluation (MLE) program of the Urban Reproductive Health Initiative (URHI) in large cities across Nigeria, Kenya, Senegal and India. APHRC is partnering with the Carolina Population Center at the University of North Carolina at Chapel Hill, Population Reference Bureau (PRB), and the International Center for Research on Women (ICRW). This project was done to evaluate the impact of urbanization, family planning and reproductive health activities accords well with the Center's mission and efforts to expand the regional scope of its work.

In 2009, the theme also developed and initiated a Packard Foundation-funded three-year project seeking to reverse the stall in contraceptive use and fertility decline in Western and Nyanza provinces in Kenya. APHRC is working with the Great Lakes University of Kisumu (GLUK) to monitor and evaluate the impact of the interventions to be implemented by Marie Stopes – Kenya and the Family Health Options of Kenya. Earlier in the year, the theme had completed a successful evaluation of the ten-year Packard Population Program in Ethiopia, which was found to have been largely successful.

Yet another evaluation project was the baseline study to assess the progress in implementing the Maputo Plan of Action (MPA) in nine African countries which was successfully completed. This yielded interesting results which showed that some countries have no policies to provide a framework for implementing the MPA, while others that have policies lack the political will to implement them. The assessment was funded by IPPF and the final report has been published and released.

Although the PDRH's basic mandate is research, the theme also articulates policy and program priorities in population and development. In 2009, the theme carried out a number of dis-



semination activities and engaged policy makers, including parliamentarians in Eastern and Southern Africa. Theme members carried out extensive analyses of other secondary data, wrote papers for publication, and made conference and policy-oriented presentations on various aspects of fertility and population dynamics in Africa. The theme contributed to the improvement of the research capacity of junior scholars in population studies and public health through the Global Research Training in Population and Health program funded by NIH and in partnership with the University of Colorado, Boulder and University of the Witwatersrand, South Africa.

FUTURE PLANS

The PDRH Theme remains committed to expanding the scope of the Center's work on population dynamics and it has embarked on the development of proposals to seek funding for this work in the coming year. It is keen on forming a panel of African scholars to revisit the application of various fertility transition theories on Africa.

Over the next year and beyond, the theme's priorities will include the development of a new long-term program to replace the DfID Realizing Rights Program, which ends in September 2010, developing a new program to focus on fertility and population growth, and continued successful implementation of the ongoing projects. The long-term nature of the Gates Foundation's MLE and Packard Foundation's Stalled Fertility evaluation projects will help stabilize and consolidate the theme's activities and provide evidence for effective policy engagement in Africa.



Rhoune Ochako,
Research Officer



David Ngilawa,
Research Officer



Mercy Ndwiga,
Program Assistant



Latifat Ibisomi,
Post-Doctoral
Fellow



Blessing Mberu,
Associate
Research
Scientist

Health Challenges and Systems Research Theme



The goals of the Health Challenges and Systems Theme, which is led by Dr Catherine Kyobutungi, are to: excel in research on common and resurgent infectious diseases; lead regional efforts in research about chronic non-communicable diseases; lead regional efforts to design, implement and evaluate efficient strategies to strengthen health systems; and articulate the regional views on global issues at various international gatherings. The key issues the theme seeks to address under each of the three goals include:

- Infectious diseases: HIV/AIDS and urban informal settlements, malaria transmission in urban settings, and mortality and causes of death ascertainment;
- Non-communicable diseases: epidemiology of cardiovascular diseases in African populations; and
- Strengthening health systems: access to health services in urban informal settlements; health care delivery models for chronic non-communicable diseases; health service delivery models for the urban poor, and integration of routine (facility-based), population-based health information systems.

Over the past year, the theme successfully implemented a number of projects under each of the three goals. A major shift in the theme's work involved strengthening partnerships and engagement with national and local health authorities in project design and implementation, increased media coverage of the theme's activities, and development of proposals to expand the scope and depth of its work. The projects that were implemented included evaluation of the Presidential Initiative on AIDS, identifying the causes of death in Nairobi slums, investigating risk factors for cardiovascular diseases, and improving access to quality health care in informal settlements, among others.

EVALUATION OF THE PRESIDENTIAL INITIATIVE ON AIDS STRATEGY FOR COMMUNICATION TO THE YOUTH (PIASCY) IN UGANDA

In partnership with the Population Council, the health theme conducted a formative evaluation of the PIASCY project in Uganda. PIASCY is a school-based program that has sought to address the HIV/AIDS epidemic in Uganda in a holistic manner since 2002 and it targets young people, school personnel, parents, and the wider community. The evaluation exercise established that child-centric activities such as assemblies, music, dance, drama and safety friends' networks have the strongest impact.

IDENTIFYING CAUSES OF DEATH IN NAIROBI SLUMS – APPLICATION OF VERBAL AUTOPSIES

In 2009, APHRC continued the Verbal Autopsy (VA) project which involves interviewing the primary caregivers of people who have died recently to determine the circumstances surrounding their death. The study sites are Viwandani and Korogocho informal settlements of Nairobi. In the absence of vital registration systems, Verbal Autopsy provides a very useful and practical alternative for generating information on causes of death, which makes it possible to estimate the burden of diseases in a community. So far, the results show that children under the age of five years have more than four times the mortality burden of the rest of the population, with pneumonia and diarrhea being the two main causes of death. The results are being used to inform the review of the current Kenya National Health Policy 1994-2010.

ASSESSMENT OF RISK FACTORS FOR CARDIOVASCULAR DISEASES IN INFORMAL SETTLEMENTS

Since 2008, the health theme has been investigating behavioral and physiological risk factors for cardiovascular diseases (CVDs) among adults in Nairobi's informal settlements. Data collection that involved interviews, anthropometric and blood pressure measurements and screening of blood samples of a random sample of 5,000 adults in Korogocho and Viwandani was completed in 2009. Preliminary results



Catherine Kyobutungi, Senior Research Scientist and Theme Leader



Akaco Ekirapa, Research Officer



Samuel Oti, Research Officer



George Mgomella, Research Officer

indicate that about 17% of adults in informal settlements are hypertensive or diabetic. As a result of these findings, APHRC has been holding outreach clinics fortnightly in Korogocho and Viwandani to offer free medical services to those affected by these conditions. The clinics serve about 500 patients every month and a total of 890 individuals have been reached through this service.

IMPROVING ACCESS TO QUALITY HEALTH CARE IN INFORMAL SETTLEMENTS

Improving infrastructure and training of medical staff: In 2009, the theme conducted a training needs assessment in public and private health centers that serve poor people living in the urban centers to determine their capacity to respond to rising cases of non-communicable diseases. It was found out that the health care system is poorly prepared to deal with these emerging health issues because a majority of the medical staff is not trained in the management of these conditions and most facilities lack basic equipment to screen for these conditions.

With support from the World Diabetes Foundation, APHRC worked with the Ministry of Public Health and Sanitation in Kenya and the Kenya Diabetes and Management Information Center to train 117 health care providers in 15 health centers in Nairobi on the management and control of diabetes and high blood pressure. These health centers were also provided with state-of-the-art screening and monitoring equipment which included blood pressure machines, glucose meters, weighing scales, and stethoscopes.

General assessment of health facilities in the slums: Through an initiative called 'Partnership for a Healthy Nairobi' which aimed at improving access to quality health care for the poor people living in Nairobi, APHRC and other partners carried out a situation analysis of health care delivery in Kibera, Korogocho and Viwandani informal settle-

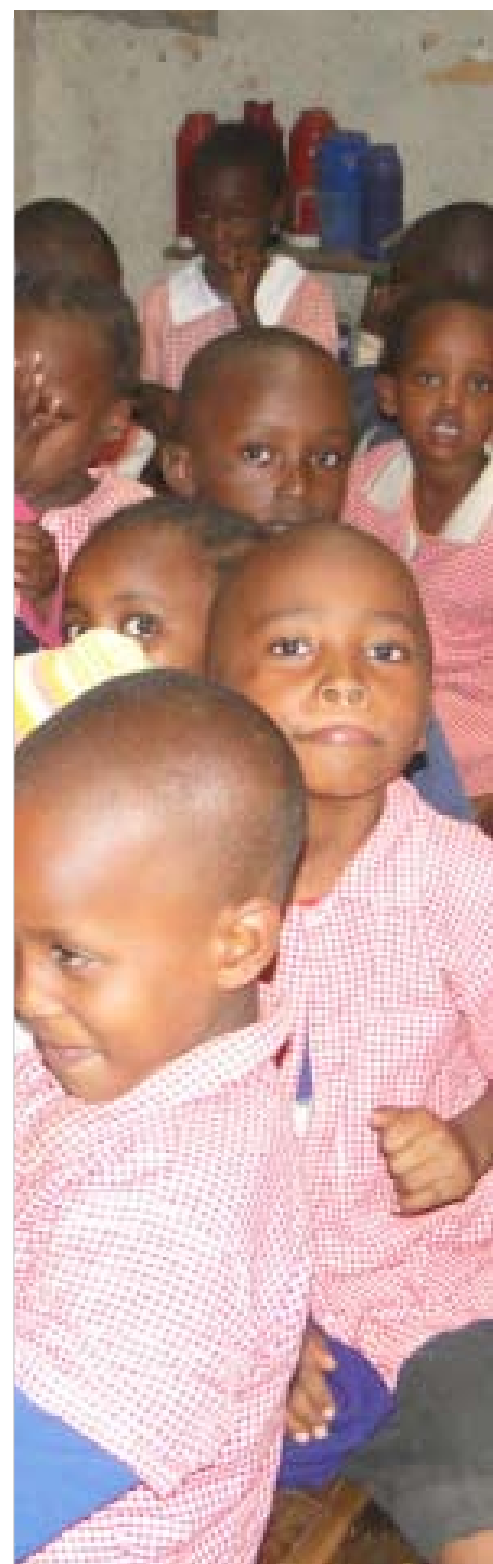
ments of Nairobi. This was in preparation for a proposal for the Doris Duke Charitable Foundation (DDCF). The assessment revealed that a majority (85%) of health facilities that serve the city's informal settlements are private-for-profit. Partners in this initiative include the African Medical Research Foundation (AMREF – Kenya), City Council of Nairobi, JHPIEGO – an affiliate of Johns Hopkins University, Nairobi Health Management Board, Population Council, AAR Health Services, Kenya Medical Training College and the National Health Insurance Fund.

STRENGTHENING INFORMATION SYSTEMS, KNOWLEDGE SHARING, AND PARTNERSHIPS FOR ADDRESSING URBAN HEALTH VULNERABILITIES IN THE SLUMS OF NAIROBI

In August 2009, the health theme conducted training on monitoring and evaluation (M&E) of community-level programs to enhance the skills of community resource persons, civil society organizations, public health providers and other key stakeholders. The training covered basic concepts of M&E and the production of data summaries and reports in graphical and other formats. Following this exercise, some of the organizations were selected for further training to enhance their M&E skills to enable them to carry out efficient implementation and evaluation activities in their projects.

HEALTH PROMOTION IN SCHOOLS

Following the results of the study on health promoting schools by a visiting scholar, Ms Osnat Keidar, the health theme initiated an intervention to improve hygiene in schools by providing water facilities and soap to the pupils. The intervention has several components that include creating a supportive healthy school environment, the introduction of health policies in the school structure, the training of health coordinators and teachers on health issues, and partnering with the parents and the community in the planning and implementation of the project. The goal of this three-year project is to improve personal hygiene in schools in Korogocho and evaluate its impact on health outcomes among school children and community members.



Osnat Keidar,
Visiting Scholar



The goal of this three-year project is to improve personal hygiene in schools in Korogocho and evaluate its impact on health outcomes among school children and community members.

HOW COMMUNITIES PERCEIVE HIV/AIDS DONOR FUNDING

The health theme participated in a study to explore how HIV/AIDS funding affects beneficiary communities in three African countries, namely Kenya, Malawi and Zambia.

In Kenya, we partnered with the Institute of Development Studies, University of Sussex, UK, to conduct the study, which revealed that while access to services and resources improved, aid for HIV/AIDS did not always have wholesome effects.

REVIEW OF THE KENYA NATIONAL HEALTH POLICY

A key milestone for the health theme in 2009 was its involvement in the process of evaluating the performance of the Kenya health sector for the period of the current National Health Policy Framework (1994 to 2010) in order to inform the development of a new national health policy. Theme members reviewed all health data such as surveys and facility reports covering the past 10 years to evaluate trends in demographic and health situations; coverage trends for key intervention areas such as reproductive health, HIV/AIDS, TB and Malaria; health systems investment trends and assessment of progress and performance against set goals such as the MDGs. They also participated in drafting the full report of the review, and contributed to various sections which include the burden of disease in Kenya, and trends in non-communicable diseases and neglected tropical diseases.

DISSEMINATION OF GLOBAL FUND IMPACT EVALUATION RESULTS

The health theme played an active role in the five-year Global Fund Impact Evaluation project, whose aim was to assess the impact of the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other major funding initiatives, on the morbidity and mortality from the three conditions. APHRC managed the evaluation in these five African countries: Benin, Burundi, Congo, Malawi and Ghana. The partners were Macro International Inc., WHO, Johns Hopkins University, and Harvard University.

PROVIDING TECHNICAL ASSISTANCE ON AN ALTERNATIVE METHOD FOR CERVICAL CANCER SCREENING

With increasing cases of cancer, especially in developing countries, the health theme was interested in affordable detection methods. An opportunity came in APHRC's involvement in providing technical assistance in data management systems to six African countries namely, Madagascar, Malawi, Nigeria, Tanzania, Uganda and Zambia that implemented a demonstration pilot project on cervical cancer screening using Acetic Acid (VIA) technique. The project started in September 2005 and ended in 2009. During the period, a total of 19,579 clients from the six countries were screened and their cases processed accordingly. The demonstration project was successful and the screening method has now been incorporated in the cervical cancer prevention system in existing reproductive health services in the six countries.

DISSEMINATION

Theme members published four scientific papers in peer reviewed journals in 2009. Also, of the 84 media appearances by APHRC, the health theme featured in almost half (38) of them and this is an indication that the issues the theme is working on are relevant and of high public health concern and interest.

FUTURE PLANS

The health theme has been developing proposals seeking for funding to implement research activities on certain key health issues. These include the impact of rolling out Anti-Retroviral Therapy (ART) on individuals, communities and health systems; determinants of ART retention; non-specific effects of vaccines on child health; the unique interaction between tobacco use and HIV/AIDS; and the effects of indoor air pollution on acute and chronic lung disease. Theme members also plan to continue engaging in dissemination activities to inform the public and key stakeholders on various important issues as well as play an active role in health policy discourses.

Education Research Program

The primary goal of the Education Research Program (ERP), which is headed by Dr Moses Oketch, is to undertake rigorous world-class research that informs education policy and improves educational outcomes among all populations in sub-Saharan Africa.

The theme strives to undertake quality research on educational access and schooling patterns among different populations in Africa; engage policy makers at local, national, regional and international levels; and recommend options for improvement of education policy and educational outcomes in sub-Saharan Africa.

The theme also seeks to forge partnerships with peer organizations that demonstrate value for quality research in education in sub-Saharan Africa; with funding organizations in order to strengthen the theme's resource base; and with governments in order to create an enabling environment for buy-in of the theme's research findings.

In 2009, the main goals that the theme set for itself were to: 1) ensure continuity in the study of the impact of free primary education in Nairobi settlements; 2) expand its research beyond Nairobi and Kenya to include aspects of the quality of learning; 3) expand its partnership and engagement with other research organizations and potential end-users of its findings, including Kenya's Ministry of Education; 4) increase scientific publication and dissemination of its research through national and international conferences; and 5) attract the right mix of research staff. The theme made considerable progress in all the goals that it set out to achieve.

FREE PRIMARY EDUCATION

Research on primary school participation among slum and non-slum children in Nairobi within the context of the Free Primary Education (FPE) policy in Kenya progressed well in 2009. Kenya introduced the FPE policy in 2003. It was in this context that in 2005 APHRC started implementation of a six-year project to study primary school participation among slum and non-slum children in Nairobi.

In 2009, the theme updated data for 24,012 individuals aged 5-23 and updated data on 210 primary schools that individuals in the study population sample attend. The project also collected new information on teacher attributes.

This research project yielded a number of findings with important policy implications. In brief, parents were initially positive about FPE as reflected in the high primary school enrollment



figures. However, after three years, they started withdrawing their children from public schools benefiting from FPE, sending them instead to private low fee-paying schools. This strongly suggests that Kenya's urban poor have perceptions of what constitutes quality education, that they value education and that they are willing to pay for this 'quality' education.

The research also shows that there is excess demand for education in the slums which FPE alone has not been able to meet. The theme will be following up on the policy implications of these findings in the coming year.

The project is funded by the Hewlett Foundation and it is implemented in partnership with the Ministry of Education, the City Council of Nairobi's Education Department, the Kenya National Examinations Council and Concern Worldwide, among other NGOs.

CLASSROOM OBSERVATION STUDY

To examine the teaching process and pupil academic outcomes, the theme embarked on a major study based on classroom observation of the quality of teaching and learning in primary schools in Kenya. It is hoped that findings from this study will lead to objective policy advice on the quality of teaching and learning in Kenya's schools.

During the year, the theme collected pupil, teacher and school data from a mix of top and bottom performing 72 public and private primary schools in six districts in Kenya. The districts were Nairobi, Embu, Murang'a, Baringo, Gucha and Garissa.

The theme also administered a standardized mathematics test to pupils in class six, and a mathematics diagnostic test to teachers. This would help the theme examine the linkages between



Moses Oketch,
Senior Research
Scientist & Theme
Leader



Moses Ngunjiri,
Associate
Research Scientist



Peter Musyoka,
Research
Assistant



Eva Nderu,
Post-Doctoral
Fellow



Charles Epari,
Senior Research
Officer

The situation in Uganda is so dire that Grade 2 pupils perform poorly (15%) in Grade 1 items. As the theme continues to gather and analyze more data, it is hoped that the findings will be enlightening enough to influence policy decisions in both countries.

teacher subject knowledge, their classroom interaction, and pupil achievement.

The preliminary results from this project suggest that teachers' competency levels in mathematics are average. They scored an average of 60% while pupils scored 40%. The results show that there are no differences in teacher pedagogical knowledge between those in low-performing schools and those in high-performing schools; that teachers subject knowledge is not a predictor of pupil performance outcomes; and that most teachers "teach" one or two students in their classes leaving out the vast majority of pupils, who are more often than not, "floating".

In terms of policy implications, teachers cannot, therefore, be expected to raise pupils' performance in mathematics without specific interventions targeting the teachers first.

Google.Org funds the project and it is implemented in partnership with Kenya's Ministry of Education.

EAST AFRICAN QUALITY IN EARLY LEARNING (EAQEL)

Lastly, an impact evaluation of the East African Quality in Early Learning (EAQEL) intervention to improve learning outcomes in reading and mathematics in early primary school grades (1-3) in Kenya and Uganda was undertaken.

This study is an independent impact evaluation of the Aga Khan Foundation's (AKF) Reading to Learn (RtL) methodology under their EAQEL initiative to determine whether the initiative improves learning outcomes in the early grades (1-3). The districts of focus are Kwale and Kinango in Kenya and Dokolo and Amolatar in Uganda. This is a randomized controlled study, the first that the Center is undertaking and normally considered the gold standard in impact evaluation studies.

The theme collected data from 221 primary schools on pupil, teacher and school characteristics as well as standardized tests in numeracy and literacy in classes one and two. From the data so far collected, it is clear that numeracy and literacy levels in early grades in both Kenya and Uganda are poor with Uganda (at 15%) doing substantially worse than Kenya (40%). The situation in Uganda is so dire that Grade 2 pupils perform poorly in Grade 1 items. As the theme continues to gather and analyze more data, it is hoped that the findings will be enlightening enough to influence policy decisions in both countries.

The project, which is funded by Hewlett Foundation, is being implemented in partnership with AKF, and the Ministries of Education in Kenya and Uganda.

DISSEMINATION

The theme also sought to enhance its presence in key international education conferences. Members presented papers at three such conferences: the 53rd Annual Comparative and International Education Society (CIES) Conference in the USA, the 10th Oxford Education and International Development Conference (UKFIET) in the UK, and the Impact Evaluation Conference in Cairo.

In July 2009, the theme leader attended the African Ministers of Finance and Education Conference in Tunis, Tunisia, and made presentations on the need to increase investments in education in spite of the economic downturn. Theme members participated in high-level meetings with senior officials from Kenya's ministries of education and those of the Kenya National Examinations Council. In addition, they published eight papers in refereed international journals, with 10 currently undergoing peer review.

FUTURE PLANS

Over the coming years, the theme will continue to implement ongoing projects and develop new ones to expand the ongoing work. The theme plans to raise funds to study teacher preparation and continuing professional development in five sub-Saharan African countries of Mali, Senegal, Kenya, Tanzania and Uganda.

Since the EAQEL project has funding for slightly more than two years, the theme has embarked on efforts to attract enough resources to take the evaluation beyond the research and development phase currently funded by the Hewlett Foundation. Such funding would enable the project to have baseline, midline, and endline data.

The theme also plans to hold discussions with the Education Team at the Hewlett Foundation to share ideas on priority areas of research on education in sub-Saharan Africa – in which the theme is increasingly becoming a regionally recognized leader in – as well as the importance of extending the flagship FPE study beyond 2011, including funding for specific interventions to address key challenges faced by pupils in informal settlements in Nairobi slum settlements.



Maurice Mutisya,
Data Analyst



Catherine Macharia,
Program Assistant



- Consortium for Advanced Research Training in Africa (CARTA)
- CARTA-Medical
- African Doctoral Dissertation Research Fellowship (ADDRF) Program

3

Research Capacity Strengthening

The overall goal of APHRC's Research Capacity Strengthening unit is to expand and strengthen professional and institutional capacity to produce high quality, policy-relevant research on population, health, and education in sub-Saharan Africa. The unit pursues this goal through a range of strategies and activities that include:

- (i) Providing fellowships and hands-on training in research to pre-doctoral fellows, advanced doctoral students, and post-doctoral fellows;
- (ii) Conducting technical training workshops on research methods for professionals working in the population, health, and education fields in Africa;
- (iii) Contributing to the improvement of graduate training in general, and doctoral training in particular, in the broader fields of population and health at African universities; and
- (iv) Contributing to building appropriate human resources for medical care in Africa.

The Center's Research Capacity Strengthening activities prior to 2007 focused on the provision of training fellowships and technical training workshops for professionals in population and health. While these programs and activities remain important, the year 2009 marked a key milestone in APHRC's capacity strengthening activities in that the Center expanded its focus to include forging strong partnerships with universities and other research institutions in order to improve the research capacities of university lecturers, graduate students, and the institutions themselves. The cornerstone of this achievement was the development and launching of the Consortium for Advanced Research Training in Africa (CARTA) and the expansion of the African Doctoral Dissertation Research Fellowship (ADDRF) program. The first phase will take five years (2009 to 2014) and will cost US \$20 million of which US \$12 million has already been secured.

Consortium for Advanced Research Training in Africa (CARTA)

The Consortium for Advanced Research Training in Africa (CARTA) is an initiative involving nine African universities, four African research institutes, and selected northern partners. The objectives of the program are to: 1) initiate a model collaborative doctoral training program with strong supervision and mentoring components; 2) support institutional capacity of African universities to conduct quality research by strengthening infrastructure and enhancing faculty and staff capacity to lead and manage research undertakings; and 3) create environments at African universities that facilitate and motivate researchers so as to achieve a higher retention rate for research practitioners within the region. APHRC and the University of the Witwatersrand (Wits, South Africa) jointly lead CARTA.

Wellcome Trust provides the primary funding for CARTA, with additional funding so far committed from the Carnegie Corporation of New York. The team also submitted a proposal to the Ford Foundation to support the program by including doctoral students in the field of sexuality, and another proposal to the Hewlett Foundation (Organizational Effectiveness grant) to facilitate the development of the governance systems for the CARTA initiative. During the year, the team organized a very successful planning retreat with donors and partners at the Rockefeller Foundation's Bellagio Conference Center in Italy. One of the key outcomes from the Bellagio Conference was the invitation from the Carnegie Corporation of New York for a US \$2 million proposal to support the CARTA program for three years. The CARTA program was successfully launched in Kenya and South Africa.

An important aspect of the program is the hosting of joint seminars which are designed to foster critical thinking among the students and teachers, and will be held on a rotational basis in different hosting member institutions. Work on the development of the curricula for the Joint Advanced Seminars (JAS) I and II also commenced with a meeting that was hosted in Nairobi in November for a team of scholars and specialists in sexuality. Dr

List of CARTA Members

African Universities	Research Institutes	Northern Partners
<ul style="list-style-type: none"> • Makerere University, Uganda • Moi University, Kenya • National University of Rwanda • Obafemi Awolowo University, Nigeria • University of Dar es Salaam, Tanzania • University of Ibadan, Nigeria • University of Malawi • University of Nairobi, Kenya • University of the Witwatersrand, South Africa 	<ul style="list-style-type: none"> • African Population & Health Research Center (APHRC) • Agincourt Population and Health Unit, South Africa • Ifakara Health Institute, Tanzania • KEMRI/Wellcome Trust Research Programme, Kilifi, Kenya 	<ul style="list-style-type: none"> • Canadian Coalition for Global Health Research (CCGHR) • Monash University, Australia • Swiss Tropical Institute, Switzerland • University of Colorado, USA • University of Warwick, UK • WHO Special Program for Training and Research in Tropical Diseases (TDR)



The objectives of the fellowships are to facilitate more rigorous engagement of doctoral students in research, to strengthen their research skills thereby enhancing the quality of their dissertations, and to shorten the period it takes to complete doctoral dissertations.

Chimaraoke Izugbara, who has been very active in crystallizing the ideas for expanded programming in research capacity building, has been appointed the head of the Research Capacity Strengthening unit, and efforts are under way to recruit an experienced and versatile professional to lead the CARTA program.

CARTA-Medical

CARTA-Medical (CARTA-Med) is a component of the CARTA program that seeks to assess feasible and promising strategies for: 1) meeting the region's human resources for health needs; and 2) enhancing the local production of well-trained and highly-skilled researchers and clinicians who will provide leadership in the fields of medicine, population studies, and public health. CARTA-Med activities are currently implemented in four countries, namely South Africa, Nigeria, Kenya, and Uganda. This program is funded by the Gates Foundation, and it is implemented in partnership with Wits, Makerere University (Uganda), University of Ibadan (Nigeria), Obafemi Awolowo University, (Nigeria), University of Nairobi (Kenya), and Moi University (Kenya).

In 2009, the program hosted three consultative research meetings with partners from focal countries and other stakeholders. The program also implemented a research study on the appropriateness of selected health systems interventions to improve the performance of clinical officers in Kenya, Uganda, and South Africa, and on feasible interventions for specialist and leadership training of medical doctors. The team also worked on an academic article describing the conceptual approach to the study of mid-level health workers.

African Doctoral Dissertation Research Fellowship (ADDRF) Program

The African Doctoral Dissertation Research Fellowship (ADDRF) program is designed for doctoral students enrolled in sub-Saharan African universities, and are conducting health-systems or sexuality-related research. The objectives of the fellowships are to facilitate more rigorous engagement of doctoral students in research, to strengthen their research skills thereby enhancing the quality of their dissertations, and to shorten the period it takes to complete doctoral dissertations.

Taken together, these are expected to lead to a higher retention of a new generation of highly-skilled and locally-trained African scholars in research and academic positions within the region. The program is primarily funded by the International Development Research Centre (IDRC), with additional support from the Ford Foundation to support sexuality-related research.

Twenty-five candidates from 13 African countries constitute the 2009 cohort. They were selected from a pool of 162 applicants. In 2009, the program organized a research methods workshop for the 2009 cohort and a scientific writing workshop for the 2008 cohort.

Over the next year, the Research Capacity Strengthening team will focus on rolling out the implementation of the CARTA program, development of a proposal for CARTA-Med, and engaging other funding institutions to raise additional financial resources for the CARTA and ADDRf programs. These are important activities that underline APHRC's commitment to strengthening the capacity of African institutions and researchers so they can become more active promoters of societal development through policy-relevant research and evidence-based interventions on population, health, and education.



Chimaraoke Izugbara,
Research Scientist



Caroline Kabiru,
Associate
Research Scientist



Suzanne Wambugu,
Research Assistant

4

Policy Engagement and Communication



■ Policy Engagement

■ Communication

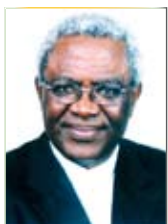
APHRC's vision to be a global center of excellence, consistently delivering sound scientific evidence for policy and action places a heavy burden on the staff in Policy Engagement and Communication (PEC) to be knowledge translators who can successfully communicate research results to relevant publics, especially media people and policy makers.

Policy Engagement and Communication at APHRC started at the inception of the Center in 2001, but got a fillip with the employment of the first officer in 2002. As 2009 eclipsed, the unit had five officers with expertise in different aspects of Policy Engagement and Communication. Consonant with the main objectives for policy engagement as outlined in the 2007-2011 Strategic Plan, the unit's targets were to reach out to leaders across the region, encourage policy makers to demand and use research evidence, and be the first port of call for policy-relevant evidence on population, health, and education.

In this regard, the PEC team emphasized activities in two major areas: (1) communicating APHRC's performance to the media and (2) engaging with policy makers.

Policy Engagement

Public policy making and how this can be leveraged by scientific research is often not very clearly understood by many people. To realize its mission, APHRC encourages researchers to get more acquainted with policy making. PEC championed this by bringing policy experts from the Institute of Policy Analysis and Research (IPAR) and the Kenya Institute of Public Policy Research and Analysis (KIPPRA) to make presentations on the policy process and why researchers should know more about policy making. To complement the work of the PEC unit, the Education Research Program (ERP) invited two visiting professors from Stanford and Vanderbilt Universities in the US, who are specialists in policy research, to make presentations to APHRC researchers on the value of policies and the need for researchers to appreciate policy making processes.



Charles Okigbo,
Head of Policy
Engagement and
Communication



Chaacha Mwita,
Policy Engagement &
Communication Manager



Rose Oronje,
Communication
Manager



The Center's staff were active in key regional policy engagement forums, which were designed to address policy issues. These included regional meetings of the parliamentary committees on health, which were organized by Partners in Population and Development (PPD) in Uganda and Kenya, the Regional Network on Equity in Health (EQUINET), and the Southern and East African Parliamentary Alliance of Committees on Health (SEAPACoH).

The PEC unit initiated a program of having one-day orientation workshops that brought researchers, journalists, policy makers and health NGO staff to the Center to explore ways of working more closely together to advance evidence-based policy making. This new program worked well, leading to more researchers becoming aware of the future policy directions of the Kenyan Ministry of Medical Services, and some health policy makers appreciating the roles of journalists and researchers in policy making.

The unit also expanded the regional scope of its operations by organizing a one-day workshop in Abuja, Nigeria for senior officers from the Ministries of Health and Education, the National Planning Commission, the National Population Commission, eight national media institutions, and 12 NGOs. APHRC Board member and former Presidential Economic Adviser, Professor Osita Ogbu, was instrumental to the success of the Abuja workshop in August.

Communication

Communication in the form of selective information packaging and dissemination is the fundamental function of the PEC, and the unit took this function very seriously in 2009 by providing a series of in-house training in media relations for APHRC researchers, developing close working relationships with the media, and strategically matching some APHRC researchers with specialist journalists interested in our results. Many researchers were exposed to periodic instruction on media relations and strategies for translating scientific research results into easy-to-understand stories. The result led to increased APHRC presence in both local and international media.

From January to December 2009, APHRC had 84 appearances in various media that included *The East African*, *The Nation*, *The Standard*, Kenya Broadcasting Corporation, and BBC. Many stories featured in online outlets. A search of Google News showed that many international news stories about APHRC were on health issues, particularly on the significant rise in obesity, sexual health, sanitation, and CVDs in informal settlements.

Successes in media communication soften the grounds for policy engagement activities, which many researchers embraced with passion as they tried to share their results with government officials, parliamentarians, and policy makers.

OTHER ACTIVITIES

PEC led in the implementation of the Hewlett Foundation grant for the development and pilot testing of appropriate metrics for the monitoring and evaluation of APHRC's work. Every research theme and organizational unit at the Center now has a customized instrument for routine collection of essential data for tracking its performance.

PEC staff engaged the research communities of Korogocho and Viwandani, Nairobi, in exploring issues of fatigue and increasing refusals among research subjects in longitudinal studies. The results portend great significance for researchers and funding organizations that are concerned about issues of research subjects fatigue in



longitudinal studies. This three-year project which is funded by the Wellcome Trust will end in December 2010.

As part of the 8th International Conference on Urban Health, PEC coordinated the call for manuscripts for a book on Strategic Health Communication in Urban Contexts. Contributions were received from all world regions and a 2010 publication date is envisaged.

As the Center continues to grow and the demand for its research increases among various local and international groups, PEC is fielding many interview requests from journalists who recognize our researchers' expertise in some critical areas such as cardiovascular disorders, migration dynamics, family planning, and schooling patterns.

The BBC World Service Trust (BBC-WST) used many of APHRC's health research results for its special youth health program, Kimasomaso, which is designed to strengthen the interaction and communication between health researchers and a wide range of research users in the Swahili-speaking eastern African region. APHRC's research results are also used extensively by other media producers, including soap opera script writers. Mediae, the TV soap opera production company in Kenya continues to use APHRC's health research results on family planning for its long-running TV drama *Makutano Junction*. In the years ahead, PEC staff hope to continue to promote greater use of research results by media people and policy makers, as well as engaging members of research communities to have a better appreciation of the research process.



Elizabeth Kahurani,
Communication Officer



Mathew Shahi,
Webmaster



Kennedy Olsola,
NUHDSS
Coordinator

5

Administration

The Finance and Administration team which is led by Mr Joseph Gichuru has maintained its consistent good performance record, delivering a clean audit report for 2009 for the 7th year running.

APHRC has continued in its growth trajectory and momentum, despite the global recession which affected many similar non-profit organizations worldwide. In 2009, the general support income showed a 13.6% increase over the previous year, rising from US\$0.9 million to slightly over US\$1.0 million.

Project support and other incomes increased more significantly by 70%, from US\$4.43 million in 2008 to US\$7.55 in 2009. Overall income went up by US\$3.6 from US\$5.3 million in 2008 to US\$8.6million in 2009, an increase of 61%. This was made possible by our retaining 15 of our funding partners from the previous year, while adding 14 partners for new 2009 projects and activities. Seven new funding partners came on board for the first time in 2009.

APHRC recorded a 17% growth in the number of projects it implemented between 2008 (with 35 projects) and 2009 (with 41 projects). Some of the new 2009 projects and activities were made possible by grants from the Carnegie Corporation of New York, the International Planned Parenthood Federation (IPPF), the World Diabetes Foundation, World Toilet Association, and MacArthur Foundation.

Other areas of significant achievements are in human resources management, growth in programs, good management of procurement processes, the formulation of new guidelines and policies, and general staff satisfaction. On the whole, APHRC staff strength grew by 11.6% from 103 employees in 2008 to 115 people, as of December 2009. Contributing to this growth was the recruitment of 23 new employees within the year as a result of expansion in programs and activities. However, some staff left for further studies, and few moved to other opportunities.

In 2009, APHRC management decided to upgrade the Research Capacity Strengthening program, which has experienced the most rapid growth in the last three years, to the status of a theme, and appointed Dr Chimaroke Izugbara the pioneer theme leader.

The Finance and Administration team led in the process of procuring the consultants and contractors for the new APHRC offices at



Construction workers lay the foundation for the upcoming APHRC office complex in Kitsuru, Nairobi.



Joseph Gichuru,
Head of Finance and
Administration



Lilian Okoth,
Human Resources
Manager



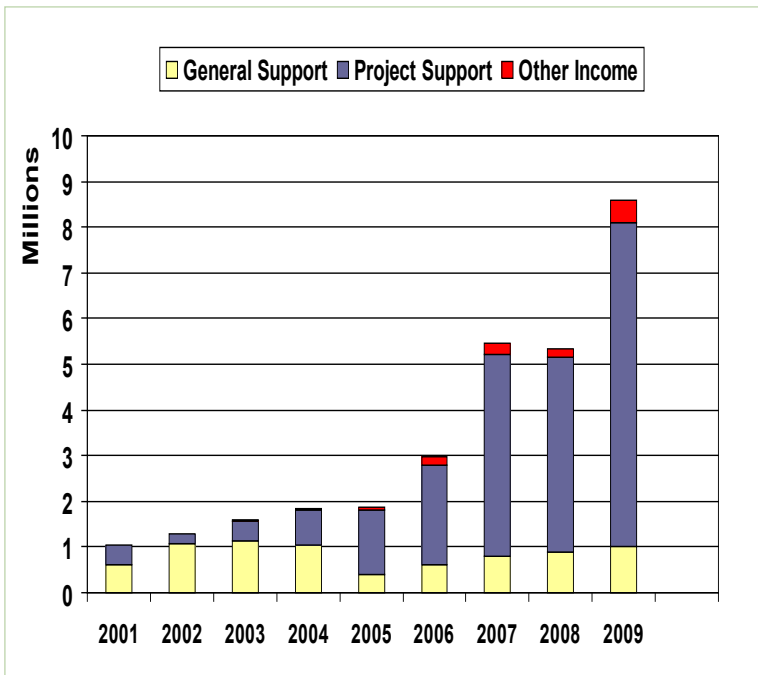
Antony Maina,
Systems
Administrator



Beatrice Arionget
Development
Manager

■ ADMINISTRATION

Figure 1: Income in US\$ since inception (2001 - 2009)



The new office complex would cost US\$ 7.6 million, most of which will come from a program-related investment from the Packard Foundation and grants from the Rockefeller Foundation and other sources.

use of IT resources at the Center. The staff in the Finance and Administration unit were found by the Centre-wide assessment by an external consultant to be generally very satisfied with their work and conditions.

Kitsuru on the western side of Nairobi, near the United Nations Headquarters.

This involved a design competition where four architectural firms participated, followed by the appointment of a team of consultants that included a project manager, a quantity surveyor, civil and structural engineers, mechanical and electrical engineers, and architects. Nine contractors were pre-qualified for the main building works, and by the year's end the long processes yielded the final choice of China Zhongxing Construction Company which is supported by sub-contractors and building specialists. The new office complex would cost US\$ 7.6 million, most of which will come from a program-related investment from the Packard Foundation and grants from the Rockefeller Foundation and other sources.

In 2009, APHRC formalized three office policies and guidelines relating to procedures for the engagement of associates, publications and use of APHRC data for secondary analysis, and the judicious



Morris Mbogo,
IT support
Assistant



Steve Ngure,
Project Accountant



Peter Onyango,
Driver



Rosalyn Kamau,
Receptionist/
Administrative
Assistant



Duncan Gatoto,
Finance Manager



Booker Nyadhaya,
Driver/Office
Assistant



David Ireri,
Driver



Dorcas Mwikali,
Accounts Assistant



Edith Mbogo,
Financial accountant



Joseph Kiprotich
Tanui,
Office Assistant



Julia Ombasiyi,
Senior Administrative
Assistant



Nkatha Karichu,
Senior Human
Resources Assistant

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2009

	2009 US\$	2008 US\$
INCOME		
Grant income	8,121,023	5,156,971
Other income	396,013	94,100
Interest income	57,531	72,682
Total income	8,574,567	5,323,753
EXPENDITURE		
Programme costs	6,913,290	4,106,712
Administration and support costs	1,042,837	1,374,754
Total expenditure	7,956,127	5,481,466
Surplus/ (Deficit) for the year	618,440	(157,713)

BALANCE SHEET AS AT 31 DECEMBER 2009

	2009 US\$	2008 US\$
ASSETS		
Non current assets		
Equipment and motor vehicles	198,327	137,930
Current assets		
Cash and cash equivalents	7,341,025	3,301,977
Investments	383,523	377,051
Grants receivables	17,507,377	5,882,130
Debtors and deposits	664,082	327,162
	25,896,007	9,888,320
TOTAL ASSETS	26,094,334	10,026,250
FUND BALANCE AND LIABILITIES		
Fund balances		
Restricted funds	692,593	586,242
Unrestricted funds	2,579,209	2,005,399
	3,271,802	2,591,641
Current liabilities		
Deferred income	21,434,916	6,859,496
Creditors and accruals	1,387,616	575,113
	22,822,532	7,434,609
TOTAL FUND BALANCE AND LIABILITIES	26,094,334	10,026,250

6

Funders and Partners

APHRC FUNDERS

- Bill and Melinda Gates Foundation
- Carnegie Corporation
- DfID
- Doris Duke Charitable Foundation
- Ford Foundation
- Google.org
- Global Fund
- INDEPTH Network
- Institute of Development Studies (IDS), University of Sussex
- Institute of International Education (IIE)
- International Conference on Urban Health
- International Development Research Centre (IDRC)
- International Planned Parenthood Federation (IPPF)
- International Union of the Scientific Study of Population (IUSSP)
- Ipas
- MacArthur Foundation
- National Institute of Drug Abuse (NIDA)
- National Institute of Health, through the University of Colorado
- Packard Foundation
- Rockefeller Foundation
- USAID
- Wellcome Trust
- William and Flora Hewlett Foundation
- World Diabetes Foundation
- World Health Organization
- World Toilet Association

APHRC PARTNERS

- African Development Bank
- Agincourt Health and Population Unit, South Africa
- Canadian Coalition for Global Health Research
- City Council of Nairobi
- European Union
- Finnish Embassy
- Government of Kenya
- Ifakara Health Institute, Tanzania
- Jhpiego
- Kenya Medical Research Institute, Kenya
- London School of Economics
- London School of Hygiene and Tropical Medicine
- Macro International
- Makerere University, Uganda
- Moi University, Kenya
- Monash University, Australia
- National Coordinating Agency for Population and Development (NCPD), Kenya
- National University of Rwanda
- Obafemi Awolowo University, Nigeria
- Panos London
- Swiss Tropical Institute, Switzerland
- UN-Habitat
- University of Colorado, USA
- University of Dar es Salaam, Tanzania
- University of Ibadan, Nigeria
- University of Malawi
- University of Nairobi, Kenya
- University of Southampton, UK
- University of the Witwatersrand, South Africa
- University of Warwick, UK
- WHO Special Program for Training and Research in Tropical Diseases

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Education Director,
The World Bank.



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Jeffrey Tolin, Board Member: Jeff Tolin practices in a variety of areas of tax law with a focus on international and business tax planning. He is a partner at the Hogan & Hartson LLP, New York.

An artist's impression of the new APHRC headquarters



African Population and Health Research Center (APHRC)

P.O. Box 10787 - 00100 GPO

Shelter Afrique Center, Longonot Road, Upper Hill
Nairobi, Kenya

Tel: +254 20 2720400/1/2; Fax: +254 20 2720380

Email: info@aphrc.org; Website: www.aphrc.org