



APHRC ANNUAL REPORT 2021

The cogs that turn the APHRC machine



**African Population and
Health Research Center**



OUR VISION

Transforming lives in Africa through research



OUR MISSION

Generating evidence, strengthening research and related capacity in the African R&D ecosystem, and engaging policy to inform action on health and development



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Introduction

This year, our annual report is a special commemorative edition. It covers our achievements over the past year and the last two decades as we are celebrating our 20th anniversary since the Center's inception.

The Center has experienced tremendous growth in the number of staff, projects and countries where we work. Our researchers have published over 1000 peer-reviewed articles, technical reports as well as policy-oriented products." The Center's work has shaped and continues to shape policy and programmatic decisions in different countries and at the regional and global levels. Our capacity strengthening efforts have seen some of the staff who joined us in our first decade as research interns growing to become senior researchers after attaining their PhDs and taking on leadership positions. We have also made a tangible contribution to building the next generation of researchers on the continent through our doctoral programs, which have produced over 314 PhD graduates. The program is designed to train and retain Africa's brightest minds on the continent while providing opportunities for them to thrive and forge successful careers in academia. The Center moved into its own purpose-built office facility at its headquarters in Nairobi, Kenya and opened a second office for the West African region in Dakar, Senegal.

The Center's 20 year journey is an African success story and so as we trace this journey we pay tribute to three African traditions - **basket-weaving, metal forging and clay-molding**. We describe our work through the lens of these African traditions that are rooted in the continent's culture, that have served generations of Africans and continue to define us.

Through strong partnerships and collaborations, we are **weaving** a beautiful tapestry of research, capacity strengthening and, policy engagement and communications networks on the continent and beyond that keep taking us closer to achieving our vision.

Metals are formed or shaped through the process of **forging**. Similarly, our work in capacity strengthening has nurtured research leaders at the Center and beyond. Our training programs are thorough, delivered by world class facilitators and partner universities and together, we are shaping research leaders from the continent.

The potter's work of **molding** captures our efforts to shape new policies, and decisions that have programmatic impact on the continent and beyond.

These three components, weaving, forging and molding summarize what the cogs that turn the Center's wheels are. Without the formidable partnerships, both with internal and external stakeholders in different areas of work, the Center would not be able to achieve its goals.

Join us on this walk down memory lane, as we reminisce on our growth over the years. This was only possible through forging, building, nurturing and sustaining partnerships with many of you. We take this opportunity to say *thank you, asante sana, merci beaucoup* for coming along on this exciting journey.

“ These three components, weaving, forging and molding summarize what the cogs that turn the Center's wheels are. Without the formidable partnerships, both with internal and external stakeholders in different areas of work, the Center would not be able to achieve its goals. ”

Remarks by the Board Chair and the Executive Director



Bunmi Makinwa
Board Chair

The year 2021 was a special one for APHRC; we marked our 20th anniversary and recorded significant achievements and contributions to Africa's development. Amidst the unfortunate COVID19 pandemic that devastated lives and threatened public health gains achieved over the years, the Center continued its vision of being the pre-eminent research organization in the continent.

In 2021, many institutions struggled to withstand the significant global disruption but APHRC remained relevant and agile. Our progressive investment in effective systems and processes paid off as we continued to grow, thrive and impact lives in all our programmatic areas.

In 20 years, we have built a track record of using independent and locally generated evidence to spur dialogue and shape policies that have transformed African lives. We deepened our evidence-informed decision-making approach at the continental, regional and national levels working with the African Union, regional economic blocs, federal governments, civil society, and

multilateral agencies. Our doctoral program is on track to building the next generation of researchers.

While we celebrated our history and milestones, we also took time to think, plan and focus our energy on the future. Our newly launched impact focused 2022-2026 Strategic Plan reinforces our commitment to playing an instrumental role in shaping the continent's future. Bold and ambitious, the new Strategic Plan redefines the Center's role as a catalyst and enabler in the African R&D ecosystem. Our ambition for the next five years rests on the foundation of excellent work done over the last 20 and the strong systems, processes, and networks we have built over the years.

We could not have achieved sustained growth and impact without the support of our partners: funders, governments, academia, media, and civil society, and the dedication and commitment of our staff. We thank you all for your continued support for the APHRC vision over the last 20 years, enabling us to look forward confidently to the next 20 years.



Catherine Kyobutungi
Executive Director

Bunmi Makinwa and Catherine Kyobutungi

A close-up photograph of a person's hands weaving a basket. The person is wearing a red apron over a light-colored shirt. The basket is made of light-colored woven reeds or bamboo. The background is slightly blurred, showing other people and wooden chairs, suggesting a workshop or community center setting.

Weaving

*Alone we can do so little; together we
can do so much.*

– Helen Keller –

After 20 years of independent operations, our vision to transform lives in Africa through research is shaping up. It is a bold vision that cannot be achieved single-handedly. Therefore, we have embraced the practice of weaving—we have developed networks and partnerships across our programmatic areas, in different sectors, with organizations operating at different levels across and within decision-making spaces, and organizations with different mandates in all sub regions of the continent and beyond. We have woven partnerships by aligning, learning, and collaborating with critical institutions that impact the continent's development including civil society, academic institutions, funders, government agencies, multilateral organizations, and grassroots organizations among others.

Our collaboration with the African Union Commission (AU), UNECA¹, and the World Health Organization (WHO) has resulted in the increased awareness about the need for an aging agenda. APHRC's research has been used within the 'AU Policy Framework and Plan of Action on Aging in Africa'. It has informed the 'Africa Common Position on the Rights of Older People' and the 'Protocol on the Rights of Older Persons in Africa'. The Center has also developed practical guidelines to improve older people's wellbeing in Africa 'Towards Long-term Care Systems in sub-Saharan Africa'.

At the same time, the Center is cognizant of the impact of gender inequality on women, from the unequal burden of unpaid care work, mental health, economic empowerment and sexual and gender based violence. It is for this reason that the Center is engaging in multi-year partnerships with stakeholders to advance Africa-led research and policy engagement on violence against women and girls, and maternal health. Under the Innovating for Maternal and Child Health in Africa initiative (IMCHA), APHRC has been working on strengthening individual and institutional research capacity, enabling national-level ownership of research, building coherence, and facilitating mutual learning. Between 2014 and 2022, IMCHA built a network of committed actors, highlighting the need for evidence-informed decision making on maternal and child health.

The Center pioneered the implementation of a community-based after-school support program targeting adolescents and parents living in Korogocho and Viwandani, two informal settlements in Nairobi, Kenya. Since its inception in 2013 and working with two grassroots organizations - Miss Koch and U-Tena, the program has reached over 2000 adolescents, and has resulted in enhanced learning outcomes, and reduced gender disparities in numeracy and literacy skills between adolescent girls and boys.

¹The United Nations Economic Commission for Africa



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APHRC's research has been used within the 'AU Policy Framework and Plan of Action on Aging in Africa'.

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This was possible through a long-standing partnership with The Wellsprings Philanthropic Fund, whose support spanned over eight years and enabled the education and youth empowerment unit to improve education outcomes and wellbeing for young people in informal settlements in Nairobi.

Over the years, our work has continued to shine the spotlight on key issues such as safe abortion, adolescent sexual and reproductive health, and access to contraceptives. Within our network of collaborators is the Guttmacher Institute, Ipas, the Ministry of Health, Kenya Obstetrical and Gynecological Society (KOGS), Kisumu Medical and Education Trust (K-MET), Kenya Medical Association (KMA), Kenyatta National Hospital (KNH) and the Population Studies and Research Institute (PSRI), whose work with us culminated in the widely cited Incidence and Complications of Unsafe Abortion in Kenya: Key Findings of a National Study report, including as part of a landmark case by the Center for Reproductive Rights in 2019, challenging the government's withdrawal of the standards and guidelines for reducing morbidity and mortality from unsafe abortion in Kenya. The 10-year old report continues to be the go-to source of information for government, media, and civil society organizations about abortion in the country.



2000
adolescents

the number of adolescents who have
participated in the ALOT-Change program
since 2013.

Within the same line of work, our Challenging the Politics of Social Exclusion project has expanded our reach, working with partners in Burkina Faso, Kenya, Liberia, Malawi, Rwanda, Sierra Leone, and Zambia to generate evidence on three main areas: adolescent sexual and reproductive health, abortion as well as sexual and gender minorities in Africa. The project, which has been running since 2018, supports a cross-section of actors working to overcome the barriers and advance the full domestication and realization of continental sexual and reproductive health and rights (SRHR) commitments. In addition, some of our earlier work on adolescent sexual and reproductive health in urban informal settlements contributed to the development of the 2015 Kenya National Adolescent Sexual and Reproductive Health Policy.

The practice of weaving is encapsulated by the notion that there is a common thread, a shared mindset and understanding, that has been evidenced recently through the Complex Urban Systems for Sustainability and Health (CUSSH) Enrichment program. We are working with partners in the county of Kisumu to build a shared understanding of the multiple interactions between different parts of the urban system that will inform the development and implementation of new city policies. We have trained journalists and youth champions in Kisumu on solutions journalism, empowering them to document innovative solutions to waste management that are being adopted in their communities. Working with school environmental clubs, we have also contributed to sensitizing children on environmental conservation and waste management in four informal settlements in Kisumu, Kenya.

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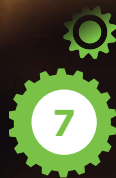
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Metal forging

*Leaders become great, not because of
their power, but because of their ability
to empower others.*

– John Maxwell –



More than ever, we are cognizant of the critical place of training and mentorship in nurturing leadership for the sustainability of the continent's research and development agenda. Just like the age-old practice of forging metal, we have remained steadfast in our commitment to building Africa's next generation of research leaders and seeking out strategic partnerships to do this at scale.

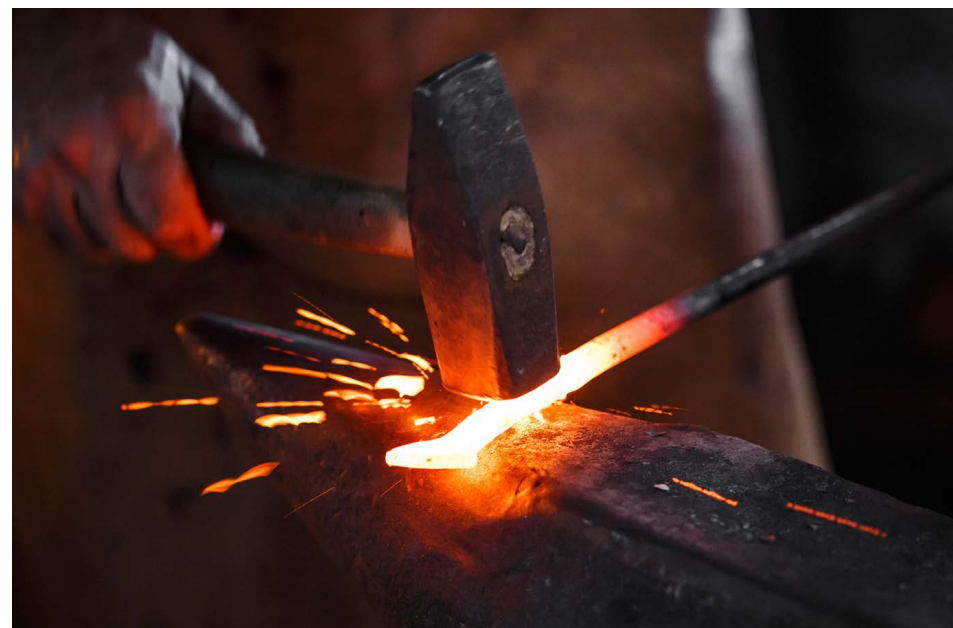
Leveraging the extensive network of partnerships forged over the past 20 years, we have developed and implemented capacity strengthening programs of varying lengths and depths. APHRC has over the years developed a capacity strengthening philosophy that focuses on sustainable skills transfer, critical mass and enabling institutional environments. In the first decade of its existence, the Center largely focused on inward looking capacity strengthening in the form of research traineeships and post-doctoral fellowships. Through this approach, the Center has been able to grow a formidable team of African scholars that are driving the Center's research programs. Over the last 10 years, the Center has supported 13 staff to earn their PhDs and mentored them towards leading research initiatives across the continent, while 14 others are currently enrolled.

Our capacity strengthening ethos has evolved and incorporated large scale outward looking initiatives, targeting non-APHRC staff and partner institutions. Through our flagship doctoral training programs; the African Doctoral Dissertation Fellowship (ADDRF) program and the Consortium for Advanced Research Training in Africa (CARTA) we have continued to support research capacity strengthening in sub-Saharan Africa. Since 2008, our ADDRf program has provided last-mile support to 219 fellows, from 22 African countries. The program has graduated 183 PhD and two Masters degree holders. CARTA - a consortium of eight African universities and four research institutes has enrolled 245 PhD fellows at its partner institutions. Of them, 131 are now PhD graduates and more than 70 have received post-doctoral awards. More than 90% of ADDRf and CARTA graduates remain research active on the continent.

Within our teams, we have invested in leadership coaching, supervisory and professional training, to a tune of approximately USD 1.2 million in the last 20 years. Through our internship program, we have hosted 137 interns and 31 visiting scholars from across the continent and abroad. In 2020, we redesigned our internship program to a paid, demand-driven model for postgraduate and undergraduate students keen on establishing careers in research. Through the new approach, the Center recruits at least 14 interns annually.

Our capacity strengthening efforts are all-encompassing. We have sought to enhance the governance, financial, procurement and human resource systems and processes of our grantees using the Good Financial Grant Practice (GFGP) to evaluate and improve their internal capacities. Within the CARTA program, we are working towards the sustainability, upscaling and diffusion of gains made under the program by institutionalizing capacity strengthening interventions in partner African universities.

The Center has developed the right philosophy and models for capacity strengthening on the continent that will greatly contribute to the critical mass of African research leaders and strong research institutions that the continent needs.



“

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”

A close-up photograph of a potter's hands shaping a clay jar on a pottery wheel. The potter's hands are covered in wet clay. In the background, many other finished clay jars are arranged in rows on a wooden surface. The scene is set outdoors, with natural light illuminating the workspace.

Shaping and Molding

We can't do evidence-based policy without evidence.

– Richard H. Thaler –

The Center has remained steadfast in our vision to create robust and replicable evidence generated by African researchers in our hopes to drive the continent's policy agenda. Our research has explored how improving outcomes in our programmatic work streams are linked to development and growth on the continent, and how those improved outcomes can help to shape policy, advance resource mobilization, and enhance implementation of best practices.

APHRC has made deep inroads into the East African health space with its flagship work in Kenya, relationships with key decision makers, and diverse regional activities. Our work spans various issues including sanitation, aging populations, non-communicable diseases, nutrition, and most recently COVID-19. The Center has also expanded its geographic footprint and currently implements 112 projects in 34 African countries. Below we highlight a few of our policy successes.

The Center remains one of the few African research institutions engaged in evidence generation on responding to the growing needs of more than 60 million people in Africa, over the age of 60. Our evidence-informed argument on the need for differentiated models of long-term care for Africa's elderly population was adopted as the African Union's common position on aging.

More than 70 per cent of the population in Eastern and Southern Africa (340 million people) have no access to basic sanitation services. Addressing issues in sanitation is crucial to creating a healthier and more prosperous Africa. In close collaboration with Kenya's Ministry of Health, the Ministry of Water, Sanitation and Irrigation, and other stakeholders, we developed the National Sanitation Management Policy. APHRC led the process for Kenya, making it the first African country to develop a policy in line with the African Sanitation Policy Guidelines (ASPG), developed by the African Union through the African Ministers Council on Water (AMCOW), and SDGs. The lessons learnt in Kenya are being applied to other countries to progressively strengthen the policy environment for WASH on the continent.

A crucial pillar of our work includes fostering political engagement and ownership. Often the best solutions start at national level and their success leads to uptake on a regional level. An exploration of the policy environment for prevention, control and management of cardiovascular diseases in primary health care in Kenya led to the Center making a number of notable contributions to the design and revision of national health policy frameworks, in Kenya and Mozambique, including the Kenya National Strategy for the Prevention and Control of Non-Communicable Diseases (2015-2020).

Through our platforms and relationships and with the help of our partners, we ensure that policy makers work with researchers, and contribute to concrete actions for health and development in the region. Working in partnership with the Kenyan Ministry of Health, the Center inaugurated the second-ever human milk bank in a sub-Saharan African country in order to help ever-larger numbers of women meet the WHO recommendations of six months of exclusive breastfeeding for their babies.

An adolescent-focused project to understand the barriers to access to a range of family planning and contraceptives for young people, contributed to the development of national health policies in Kenya and provided lessons in policy-relevant evidence generation at the regional level during the convening of the Network of African Parliamentary Committees of Health (NEAPACOH). At the county level, we are engaging Turkana and Samburu counties on a co-created longitudinal study to improve the nutrition surveillance systems in arid and semi-arid lands. This work will inform interventions on persistent and acute malnutrition in the region.

“

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”

2021 Achievements

Research



55

New projects commenced in 2021 across our programmatic areas of work



157

APHRC led publications: 157 research outputs, 117 being peer reviewed articles

Centre-wide Achievements



Development of the 2022-2026 Strategic Plan

Research Capacity Strengthening



151

CARTA program had a total of 151 fellows, with 48 completing their fellowships



33

ADDRF program had 33 total fellowships in 2021



185

CARTA fellows had 185 publications



12

ADDRF fellows had 12 publications



22

Interns joined through the RCS and were attached to various units at the Center



385

Participants registered in our short course workshops under the training unit

Operations



The Center completed the rollout of the enterprise resource planning software to manage and integrate our core business processes.

APHRC Through the years

2001



Following a 2001 headquarters agreement with the Government of Kenya, APHRC became an autonomous regional institute.

First Board chaired by Dr. Sarah Seims.



2002



APHRC launches its first strategic plan (2002-2006); establishing three core program priorities: i) evidence generation ii) knowledge translation and, iii) strengthening capacity for high quality research in sub-Saharan Africa.

Release of the Nairobi Cross-sectional Slums Survey Report 2002; creation of the Nairobi Urban Health and Demographic Surveillance System.



2003

2003

Urbanization, Poverty and Health Dynamics program launched. The UPHD program, a multi-million dollar, Wellcome Trust funded program was instrumental in launching the Center on its current trajectory.

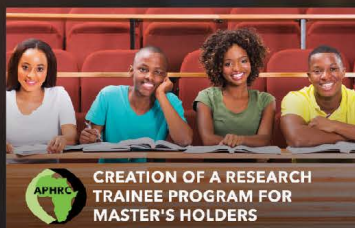


2007

APHRC staff body is 100-strong.



2006



Creation of a research trainee program for Master's holders; among these were Abdhahah Ziraba, Elizabeth Kimani-Murage and Gloria Langat - all currently head Research Units at the Center.

2008



APHRC launches its second strategic plan (2007-2011) in which the research program was organized into four thematic areas: urbanization and wellbeing; population dynamics and reproductive health; health systems and challenges; and education.

2008



APHRC in partnership with the International Development Research Centre established the African Doctoral Dissertation Research Fellowship (ADDRF) program, the first large-scale outward facing capacity strengthening initiative for the Center.

APHRC has more than 50 projects in its portfolio.

APHRC HAS MORE THAN 50 PROJECTS IN ITS PORTFOLIO



2011



The Consortium for Advanced Research Training in Africa (CARTA) enrolled its first cohort. CARTA is a partnership of eight African universities, four African research institutions and non-African partners offering fully funded doctoral and post-doctoral training opportunities to attract, train and retain the continent's brightest minds.

APHRC's annual budget crosses the \$10m dollar mark.



2011

2011



Launch of the APHRC Campus.

Launch of the PAMANECH project to assess the impact of strengthening public-private partnerships for the delivery of healthcare in Nairobi's informal settlements. This marked a significant shift towards implementation research to complement observational research.



2012

APHRC launched the Jubilee Education Fund to provide financial support for needy students from some of the informal settlements in Nairobi.



2012



2012

APHRC launched its third strategic plan (2012-2016); establishing three program divisions and an operations division. It also established a research program on Aging and Development and a Statistics and Surveys Unit.

2013



Publication of the Incidence and Complications of Unsafe Abortion in Kenya report - a multistakeholder effort that highlighted this critical issue. It is still the go-to source of information on abortion in the country.

First CARTA fellow graduates.



2014

Contributed to the development of the Kenya National Strategy for the Prevention and Control of Non-Communicable Diseases (2015-2020)



2014



Release of the second Nairobi Cross-Sectional Slum Survey (NCSS) report. The overarching goal of the NCSS was to strengthen the evidence base to guide policies and programs aimed at improving the wellbeing of the urban poor.

2014 - 2021



APHRC led the East Africa Health Policy and Research Organization (EA-HPRO) for the IMCHA initiative and worked with 13 research teams in six countries: Ethiopia, Malawi, Mozambique, South Sudan, Tanzania, and Uganda to promote the uptake of evidence on maternal, newborn, and child health.

2015

APHRC was the institutional laureate for the 2015 UN Population Award.



2016



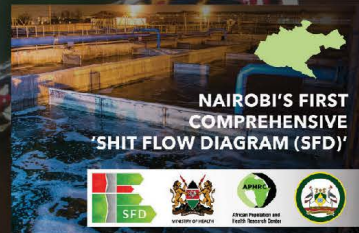
APHRC joined Countdown 2030 as the lead for the Africa regional initiative: Countdown2030 is a collaboration of academics from different regions of the world, multilateral agencies and civil society organizations, to track progress at country level towards SDGs related to Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (RMNCAH+N).

2016 - 2021

The Think Tanks and Civil Societies Program of the Lauder Institute at the University of Pennsylvania rated APHRC as the top-ranked African think tank for domestic health policy.



APHRC worked with the Ministry of Health, and the City County of Nairobi to develop Nairobi's first comprehensive 'Shit Flow Diagram (SFD)'. The SFD helps visualize and understand how fecal waste flows (and escapes) through the city's infrastructure from defecation to disposal or end-use.



The Center worked in partnership with the Ministry of Health (Kenya) and PATH to inaugurate the second human milk bank in sub-Saharan Africa at Pumwani maternity hospital, Nairobi.



2017

2018

2017



APHRC introduced its fourth strategic plan (2017-2021); with a reorientation of our research toward a more deliberate focus on signature issues. The Signature Issues Approach aims to deepen our policy outreach in a strategic manner for greater impact.

2019



APHRC launched the Challenging the Politics of Social Exclusion (CPSE) project which aims to generate a co-created African-owned body of evidence on so-called contentious issues, based on demand by critical actors in policy and programs as well as individuals with lived experiences on these issues.

2019

Launch of Ulwazi Place in Nairobi, Kenya.



2020

APHRC is announced as one of ten finalists of the Rockefeller Foundation Food Systems Vision Prize.



2019



Launch of the West Africa Regional Office in Dakar, Senegal.

2020

SEX, GENDER
AND COVID-19
PROJECT



APHRC embarked on the Sex, Gender and COVID19 Project in partnership with GH5050 and ICRW Asia. The project is building the world's largest database of sex-disaggregated data on COVID-19 and advocating for effective gender-responsive approaches to pandemics.

2020

APHRC fully rolls out its Enterprise Resource Planning system.

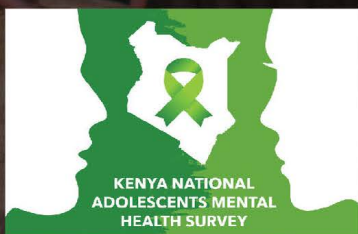


2021

CARTA celebrates 10 years of operation; 100th CARTA fellow graduates.



2021



APHRC launched the Kenya National Adolescent Mental Health Survey to determine the prevalence of mental health conditions among adolescents aged 10-17 years.

2021



APHRC established a Virtual academy; a versatile platform that supports virtual and blended learning and ensures the best experience for trainees during their learning process. It positions the Center to provide training for a much wider audience at an affordable cost.



2021 Financials

The Center bases its research programs on global and regional development priorities because it holds the conviction that decisions affecting better growth and development must prioritize Africa and evidence produced on the continent. We provide solutions that result in more efficient policies, initiatives, and technologies that enhance people's lives all over the continent. We keep a careful eye on our financial situation and are dedicated to maintaining the fiscal restraint required to uphold the Center's track record of success.

Income

Income vs expenditure

Category	2021	2020	Increase/decrease in %
Income	22,525,805	15,956,572	41%
Expenditure	20,784,479	15,773,886	32%

Income breakdown

Category	Restricted	Unrestricted	2021	2020
Grant income	17,684,654	3,810,369	21,495,023	15,155,643
Other income		1,030,782	1,030,782	800,929
Total	17,684,654	4,841,151	22,525,805	15,956,572

Uses of Funds

Expenditure breakdown

Sources of expenditure	Restricted	Unrestricted	2021	2020
Direct programme expenses	17,684,654	335,897	18,020,551	13,014,186
Administration and support		2,763,928	2,763,928	2,759,700
Total	17,684,654	3,099,825	20,784,479	15,773,886

Surplus

Surplus	Restricted	Unrestricted	Total 2021	Total 2020
Net operating income		1,741,326	1,741,326	182,686
Finance income		193,306	193,306	160,293
Surplus for the year		1,934,632	1,934,632	342,979

Other comprehensive income, net of tax	Restricted	Unrestricted	Total 2021	Total 2020
Total comprehensive income		1,934,632	1,934,632	342,979

Total Assets

Non-current assets

Non-current assets	2021	2020
Property and equipment	12,725,791	13,006,241
Intangible assets	8,782	91,542
Total non-current assets	12,734,573	13,097,783

Current assets

Current assets	2021	2020
Cash and bank balances	15,635,764	11,432,868
Debtors and deposits	1,269,722	800,033
Grant receivable	2,127,163	1,460,302
Total current assets	19,032,649	13,693,203

2021 ASSETS

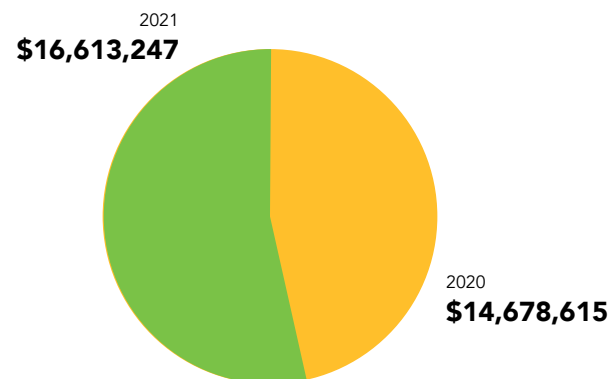
\$31,767,222

2020 ASSETS

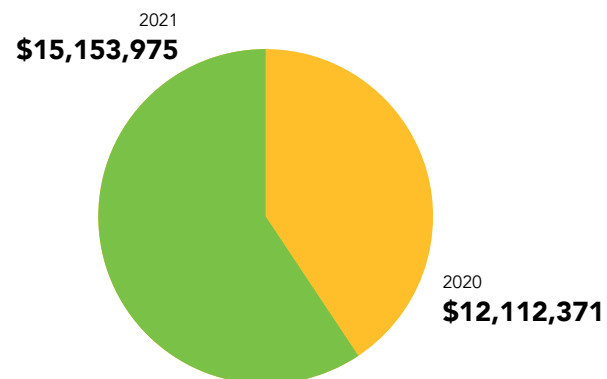
\$26,790,986

Fund Balances and Liabilities

Total Fund balances



Total Liabilities



2021 FUND BALANCES

AND LIABILITIES

\$31,767,222

2020 FUND BALANCES

AND LIABILITIES

\$26,790,986

APHRC Funders and Partners

Funders

1. Africa Research Excellence Fund (AREF)
2. African Union Commission
3. AXA Research Fund
4. Bill & Melinda Gates Foundation
5. The British Academy
6. Carnegie Corporation of New York
7. Children's Investment Fund Foundation (CIFF)
8. Comic Relief
9. DAAD (The German Academic Exchange Service)
10. Danish International Development Agency (DANIDA)
11. The David and Lucile Packard Foundation
12. Dutch Foreign Affairs Ministry
13. Echidna Giving
14. EDCTP (The European and Developing Countries Clinical Trials Partnership)
15. Elrha
16. The ELMA Foundation
17. Episcopal Relief & Development
18. European Commission
19. Foreign Commonwealth and Development Office (FCDO)
20. Gates Ventures
21. The Hewlett Foundation
22. The International Association of Gerontology and Geriatrics (IAGG)
23. International Development Research Centre (IDRC)
24. Italian Agency for Development Cooperation
25. Manitou Fund
26. National Institute for Health Research (NIHR)
27. New Venture Fund
28. National Institutes of Health (NIH)
29. Norwegian Agency for Development Cooperation (NORAD)
30. Pivotal Ventures
31. The Rockefeller Foundation
32. Slovak Agency for International Development (SlovakAid)
33. Swedish International Development Cooperation Agency (Sida)
34. The Royal Society
35. UKAid- FSD Africa
36. UKAid- IMMANA fellowships
37. UKRI GCRF
38. UKRI MRC
39. The United States Agency for International Development (USAID)
40. Uppsala Monitoring Centre (UMC)
41. Wellcome Trust
42. Wellsprings Philanthropic Fund

Partners

1. 3iE
2. Africa Academy of Sciences (AAS)
3. African Renaissance
4. Agakhan University
5. Agincourt MRC
6. Akademiya 2063
7. Amref Health Africa
8. Amsterdam Institute for Global Health and Development
9. Amsterdam School of Economics
10. Beyond Initiative for Social Concern (BISC)
11. Boston Consulting Group (BCG)
12. Brac Institute of Governance and Development (BIGD)
13. Brac University
14. Brown University
15. Canadian Coalition for the Global Health Research
16. Cardiff University
17. CitiesArise
18. Center for Global Development
19. Centre for Social Research (CSR) Malawi
20. Consortium for Research on the Generational Economy (CREG)
21. Development Gateway
22. Drexel University
23. EANNASO
24. Economic Policy Research Centre Uganda
25. ESE: O
26. Ethiopia Public Health Institution
27. Gothenburg University
28. Guttmacher Institute
29. Harvard University
30. Highridge Development Group
31. Hivos
32. Household of Love
33. HR Alliance
34. Hygiene and Behaviour Change Coalition
35. ICIPE
36. I-DAIR
37. IDinsight
38. IDVIK
39. The Indepth Network
40. Ifakara Health Institute
41. Institute for Population Studies (IPS)
42. Institute of Tropical Medicine (ITM) Antwerp
43. Institute on Inequalities in Global Health, University of Southern California
44. Institut National de la Statistique (INS-Niger)
45. Institut national de santé publique
46. Institut de Santé et Développement
47. Institut Supérieur Des Sciences De La Population (ISSP)
48. International Union for the Scientific Study of Population (IUSSP)
49. Ipas
50. Jaramogi Oginga Odinga University of Science and Technology
51. Joep Lange Institute
52. Kamuzu University of Health Sciences
53. Kenya Medical Research Institute (KEMRI)
54. Kidogo
55. Kingstone Unity CBO
56. Koch FM
57. Komb Green
58. Light and Hope Centre
59. Little Bells
60. Liverpool School of Tropical Medicine- LSTM
61. London School of Hygiene and Tropical Medicine-LSHTM
62. Loughborough University
63. Maisha Girls
64. Makerere Centre for Health and Population Research
65. Makerere University
66. Malawi Epidemiology and Intervention Research Unit (MEIRU)
67. Ministry of Education
68. Ministry of Health
69. Ministry of Water and Sanitation
70. Miss Koch
71. Moi University
72. Mukuru Daima Youth
73. Network of African Science Academies (NASAC)
74. Obafemi Awolowo University
75. Oxfam International
76. PATH
77. Population Council
78. Population Reference Bureau (PRB)
79. Public Library of Science (PLOS)
80. Reckitt Global Hygiene Institute (RGHI)
81. Research and Communication Services (RCS) Limited
82. RTI International
83. Rutgers University
84. Stichting PharmAccess International
85. Sciensano
86. Sinai Ghetto Shiners
87. Sinai Paradise Youth
88. SIYD
89. Slum Child Foundation
90. Swiss Tropical and Public Health Institute
91. Team Revolution
92. Tetra Tech International
93. Tony Blair Institute (TBI)
94. Uchumi Ni Sisi Youth Group
95. Umea University
96. UNAIDS
97. UNDP
98. UNFPA
99. UN Women
100. UNICEF - USA
101. University of Bergen, Norway
102. University of Bristol
103. University of California
104. University of Capetown
105. University of Chile
106. University College London
107. University of Ghana
108. University of Ibadan
109. University of Malawi
110. University of Maryland
111. University of Nairobi
112. University of Queensland
113. University of Rwanda
114. University of Witwatersrand
115. University of Zambia
116. University Research Co. (URC)
117. U-Tena
118. VICCO
119. Warwick University
120. WHO



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