



**African Population and
Health Research Center**

ANNUAL

PERFORMANCE REVIEW REPORT

2021

AUTHORS

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ACRONYMS AND ABBREVIATIONS

AAD	Aging and Development
ADDRF	African Doctoral Dissertation Research Fellowship
AMCOW	African Ministers' Council on Water
APHRC	African Population and Health Research Center
CARTA	Consortium for Advanced Research Training in Africa
CPSE	Challenging the Politics of Social Exclusion
DME	Data Measurement and Evaluation
eDMS	Electronic Document Management System
EIP	Evidence and Information for Policy
ERP	Enterprise Resource Planning
EYE	Education and Youth Empowerment
HR	Human Resource
HSH	Health and Systems for Health
IAI	Immunization Advocacy Initiative
IMCHA	Innovating for Maternal and Child Health in Africa
IT	Information Technology
JAS	Joint Advanced Seminar
MCW	Maternal and Child Wellbeing
MoH	Ministry of Health
NACOSTI	National Commission for Science Technology and Innovation
NUHDSS	Nairobi Urban Health Demographic Surveillance System
PDRH	Population Dynamics and Reproductive Health
PEC	Policy Engagement and Communication
RCS	Research Capacity Strengthening
REDCap	Research Electronic Data Capture
RELI	Regional Education Learning Initiative
SMT	Senior Management Team
SRHR	Sexual and Reproductive Health and Rights
SSA	Sub-Saharan Africa
USD	United States Dollars
UWB	Urbanization and Wellbeing in Africa
WARO	West African Regional Office

EXECUTIVE SUMMARY

This Performance Review Report 2021 is the fourth and final annual review of the 2017-2021 APHRC strategic plan. It emphasizes the key achievements in each of the four Strategic Objectives and highlights how each of the units/divisions contributed towards the attainment of these objectives. During this reporting year, there were 156 projects, 55 of which commenced in 2021. 44 projects closed in 2021 and 112 projects were ongoing into 2022. These projects were implemented across 34 African countries with most projects (144) implemented in Kenya. In terms of addressing the signature, synergy and other Issues 81 projects in the Research division tackled Signature Issues, 46 Synergy Issues and 41 tackled other issues. There were 90 prime awards and 66 sub-awards with the lifetime value of projects in 2021 for the whole Center at USD 94.1 million. There was a total of 157 research outputs with 117 being peer reviewed articles and the others distributed among book chapters, policy briefs, supplements and technical reports. The Center developed 167 proposals with a proposal success rate of 66% and a dollar success rate of 40%.

The policies and programs informed by evidence from APHRC included the East Africa Community (EAC) Sexual Reproductive Health (SHR) Bill, 2021 through CPSE project; Revised 2021-2025 National policy guidelines on immunization through the IAI project and Sanitation Policy Guideline and Policy Monitoring and Assessment Tool through the National Sanitation Policy advocacy project. The Center continued to pursue its policy engagement and communication objectives through dissemination activities and stakeholder engagements.

The CARTA program in the RCS division partnered with 13 African institutions and 8 non-African partners and had 5 Institutions complete their institutionalization grants. CARTA had 151 combined fellowships of post-doctoral, doctoral and re-entry fellows in 2021 with 48 fellows completing fellowships and 30 doctoral fellows expected to graduate.

The RCS division also had 33 fellows in the ADDRf Fellowships, 4 in the WHO-HRP Masters' fellowships and 8 in other Masters' fellowships. CARTA fellows had 185 publications and ADDRf fellows had 12 publications.

In 2021, the Center saw an increase in income and expenses as well as an increase in surplus to 1.9 million with a burn rate of 103%. The Center engaged 183 regular employees in 2021 and registered a net turnover rate of 4.2%.

Overall, the Center's performance across the four strategic objectives was impressive despite the continued challenges of the COVID-19 pandemic. The findings from this report will form the benchmark for target setting in the development of the implementation plan for the new strategy.

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CHAPTER 1

Introduction

1.1 Background information on APHRC

The African Population and Health Research Center (APHRC) was established in 1995 as a fellowship program of the Population Council, with funding from the Rockefeller Foundation. In 2001, APHRC, Inc. registered in Kenya as a branch of the US-registered entity. The Centre's work across sub-Saharan Africa is coordinated from the head office in Nairobi, Kenya and the West African regional office in Senegal. Guided by its mission to generate evidence, strengthen research capacity and engage policy to inform action on population health and wellbeing, the Center strives to achieve its vision of transforming lives in Africa through research.

APHRC activities are led by four guiding principles; to be innovation-driven, collaborative, truly African in reach and impact-oriented in all engagements and activities. The Center is committed to generating an Africa-led and Africa-owned body of evidence to inform decision making for an effective and sustainable response to the most critical challenges facing the continent. It is anchored on its core values of fairness, excellence and integrity.

1.2 Brief Overview of Strategic Plan 2017-2021

The 2017-2021 Strategic Plan is a dynamic blueprint that sets the course for APHRC and acts as a guide to the operationalization of the Center's vision. It is a roadmap for broader and deeper engagement in its signature areas of interest in its second decade as a premier research institution and think tank in Africa. The Strategic Plan also lays out the necessary changes needed within the Center to achieve its goals; beginning with the reorientation of research towards a more deliberate focus on signature issues.

It outlines a bold agenda predicated on four strategic objectives that form the chapters of this report. The strategy seeks to achieve four programmatic objectives: Generate scientific knowledge aligned to local and global development agendas, develop and nurture the next generation of African research leaders, engage with decision-makers using evidence to drive optimal development and implementation of policies and create operational efficiencies in systems and processes for maximum programmatic impact.

1.3 Brief Overview of APHRC Divisions and Units

In this Strategic Plan (2017-2021) period, APHRC implemented its activities under four divisions: Research, Research Capacity Strengthening (RCS), Policy Engagement and Communications (PEC) and Operations.

Table 1 below shows the different units in each of the divisions whose performance was reviewed in this report. The report also highlights the performance of the West African Regional Office (WARO).

Table 1: List of Units and Divisions

Research Division	Operations Division
❖ Maternal and Child Wellbeing Unit (MCW) ❖ Aging and Development Unit (AAD) ❖ Education and Youth Empowerment Unit (EYE) ❖ Health and Systems for Health Unit (HSH) ❖ Urbanization and Wellbeing in Africa Unit (UWB) ❖ Data, Measurement and Evaluation Unit (DME) ❖ Population Dynamics and Reproductive Health Unit (PDRH) ❖ West African Regional Office (WARO)¹	❖ Finance Unit ❖ Human Resource Unit ❖ Business Development Unit ❖ Information Technology (IT) Unit ❖ Facilities and Administration Unit ❖ Internal Audit Unit ❖
Research Capacity Strengthening (RCS) Division	Policy Engagement and Communications (PEC) Division
❖ Partnerships with Universities and Research Institutions ❖ Fellowships and Internships ❖ Training Programs ❖ Research on Higher Education and Research Capacity Strengthening	❖ Visibility unit ❖ Advocacy Unit ❖ Synergy Unit

The research units drive the strategic objectives through the implementation of the signature, synergy and other issues that are also highlighted in the Strategic Plan and in Table 2.

Table 2: Signature, synergy and other issues

Signatures	1. Emerging models and approaches to long-term care.
Issues	2. Understanding how to make Africa's education systems more inclusive and equitable.
	3. Chronic conditions management.
	4. Maternal, infant and young child nutrition with focus on breastfeeding optimization.
	5. Young people's sexual and reproductive health and rights.
	6. Unsafe abortion.

¹ Though WARO is the West Africa Regional Office, for the purpose of reporting it is categorized under the Research Division.

	7. Clarifying the role of slum systems for health and well-being in Africa's urban spaces. 8. Data and measurement
Synergy Issues	1. Ageing and the Demographic Dividend/ Population dynamics, sustainable development and Africa's first Demographic Dividend 2. Alignment of education policies to national development goals. 3. Examining the magnitude, burden and impacts of non-communicable diseases 1. 4. Early Childhood Development (ECD).
Other Issues	1. Later-life wellbeing and inequity. 2. Understand pathways to productive human capital in Africa. 3. Understand and characterize the health system needs to end the big epidemics. 4. Maternal, Newborn and Child Health. 5. Gender and sexuality-related vulnerabilities. 6. Environmental impact on health and wellbeing in urban contexts. 7. The causes, course and consequences of rapid urbanization. 8. Enhancing the utility of the Nairobi Urban Health Demographic Surveillance System (NUHDSS). 9. Establishing robust data systems to enhance the collection, access and use of data. 10. 10. Advancing the field of measurement.

1.4 Annual Performance Review Process

The development of this report followed a comprehensive consultative review process with each of the units in the four divisions. The Monitoring and Evaluation Officer under the Development Unit spearheaded the process of reviewing various reports and systems. These included SMT quarterly reports 2021, SMT annual planning reports 2021, project update sheets 2021, proposal tracker and go-no-go reports 2021, annual performance review report 2019, annual performance review report 2020, operational systems such as the REDCap publication repository, as well as unit-specific data requests among others.

This review included performance of process and output indicators as indicated in the M&E Framework 2019-2021. Performance of outcome indicators were also reported as part of results monitoring. However, a more in-depth analysis of the strategic outcomes was conducted during an external end-line evaluation of the 2017-2021 strategic plan.

This Performance Review Report 2021 is the fourth annual review of the Strategic Plan 2017-2021. It emphasizes the key achievements in each of the four Strategic Objectives guided by the Monitoring and Evaluation Framework indicators and highlights performance of the units, challenges, lessons learnt and best practices. The report further pinpoints the priorities of the units going into the Year 2022 that shall guide their activities and work plans. The findings from this report will form the benchmark for target setting in the development of the implementation plan for the new strategy. This report will be published on the APHRC website and intranet.

CHAPTER 2

Strategic Objective 1: Generate scientific knowledge aligned to local and global development agendas on population health and wellbeing

The Center's overall thrust, through the Research Division, is informed by a drive towards conducting research that leads to change and impact. Over the last 20 years, APHRC has generated and shared substantial amounts of research evidence with a growing number of decision-makers and technical partners in various African countries and beyond, to inform policy and practice. Understanding of the broader developmental priorities articulated at the global level and how these priorities may be domesticated, will be achieved through identifying and filling evidence gaps. This chapter highlights ways in which this strategic objective was met (or contributed to).

2.1 APHRC Projects

2.1.1. Project Profiles

During the reporting period, there were 55 new projects with 156 total projects, a 27% increase in the total projects running from the previous year as shown in figure 1.

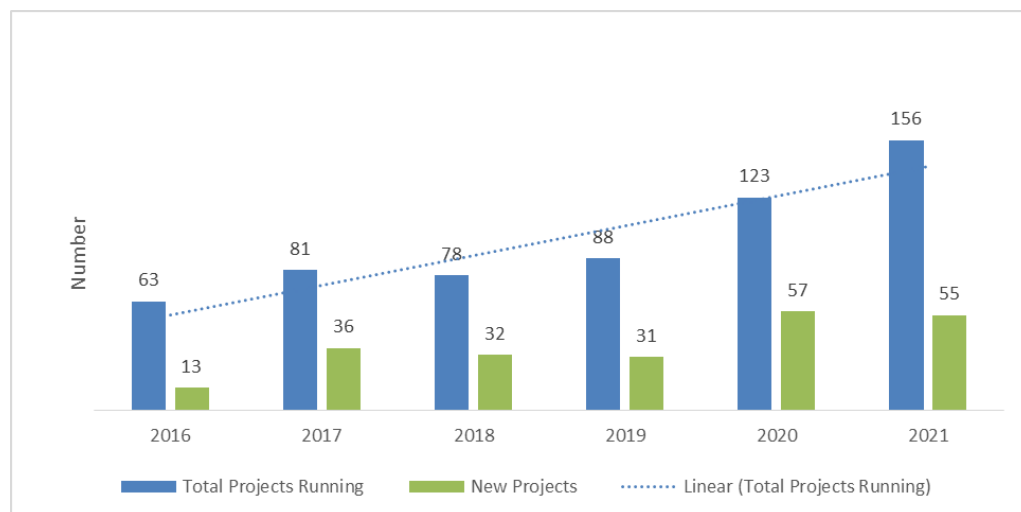


Figure 1: Trends of number of APHRC projects

The project distribution per division in 2021 was; 118 projects (76%) in the research division, 24 (15%) in RCS, 11 (7%) in PEC and 3 (2%) in operations as shown in figure 2.

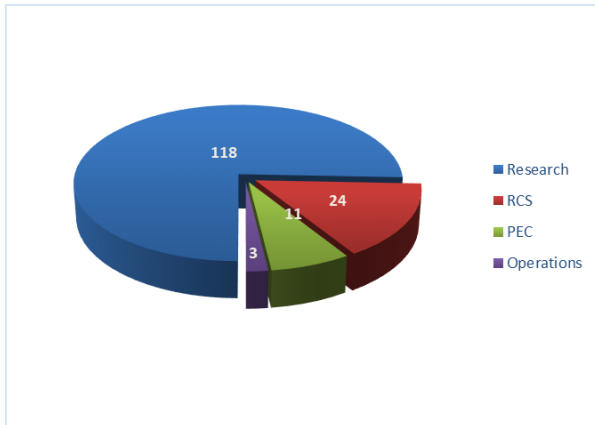
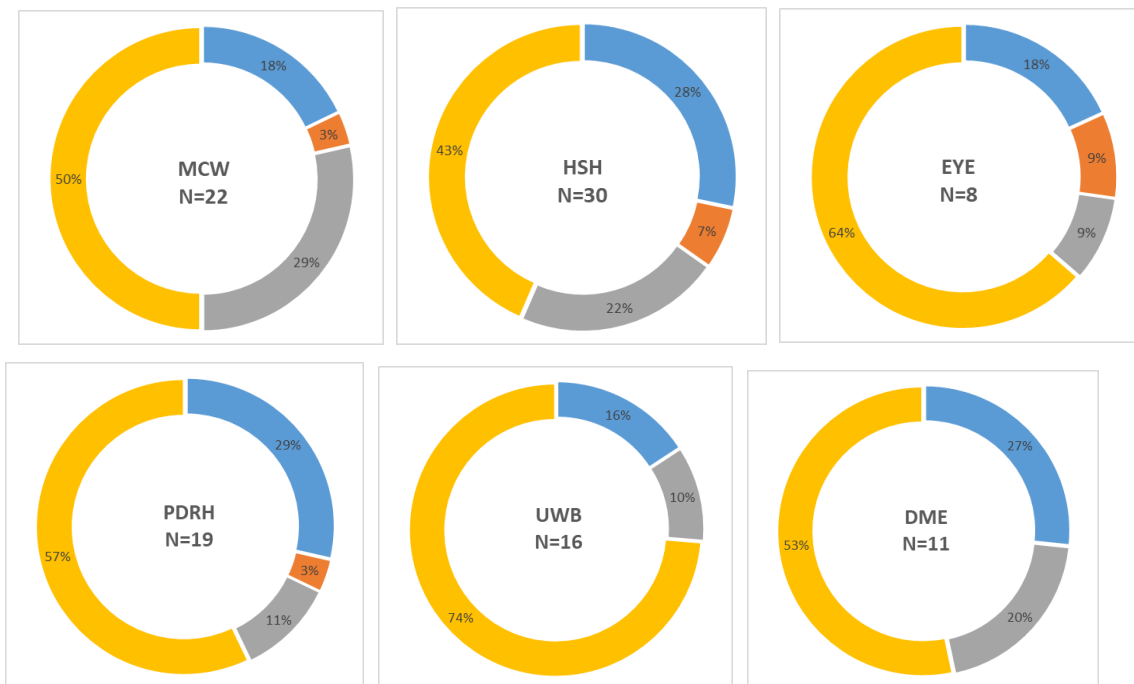


Figure 2: Number of projects per division

In 2021, of the 156 implemented projects, 144 (92%) were multi-year projects whose implementation spanned more than one year. Any project below one year was considered short-term. There were 44 projects that closed in 2021. By the end of the reporting year there were 112 projects that would be ongoing in 2022; 89 in Research Division, 15 in RCS, 7 in PEC and 1 in Operations. Figure 3 highlights project status by units/divisions.



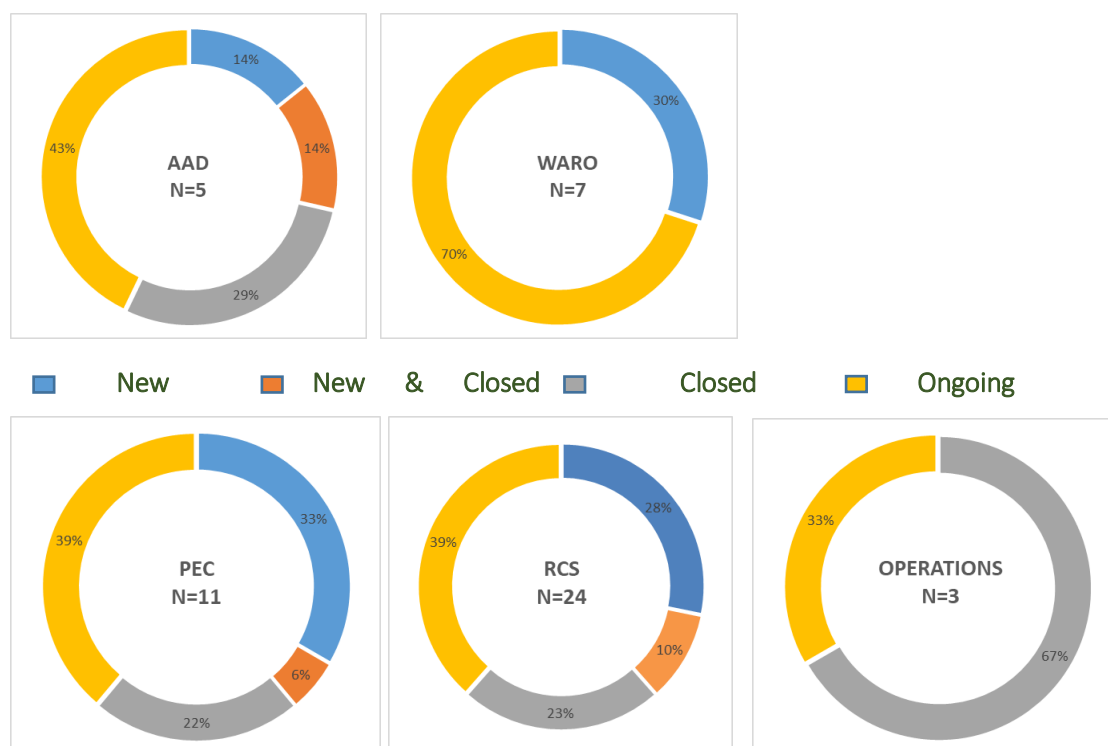


Figure 3: Status of 2021 projects by units/divisions

Note: Projects under *new and closed* are the short-term projects that commenced and closed within the same year 2021. Thus, they cannot be placed only in the *new* category or the *closed* category.

2.1.2. Project implementation in African Countries

During this reporting year, projects' activities were implemented in 34 African countries as seen on Image 1; compared to 2020 and 2019 where the Centre's projects reached 41 and 29 countries respectively.

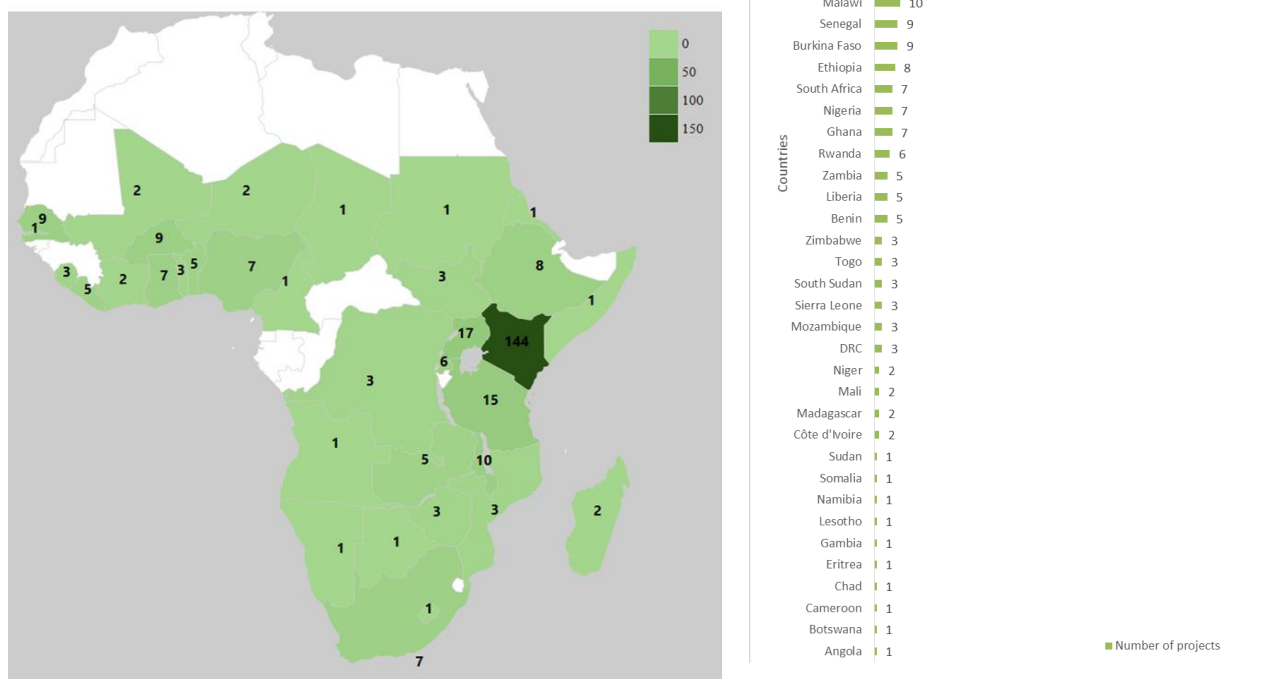


Image 1: Map representation of project implementation in African Countries

In terms of countries where projects are implementing activities across the continent, WARO's Gates Countdown 2030 phase 2 had the highest reach with 28 countries, followed by Sida JPIAMR and ADDRf in RCS division with 13 and 12 countries respectively. UN Women - Spotlight Initiative in PDRH under the research division was implementing activities in 8 countries.

2.1.3. Prime Awards and their life-time Monetary Value

In 2021, 58% (90) of the projects were prime awards² as was the case in 2020 (58%) and an increase from 2019 (55%). PEC had all its awards as prime awards while the UWB unit under research division had most of its awards as sub-awards (75%) as seen in figures 4 and 5.

² Prime awards are grants that have been awarded directly to APHRC and thus are not sub-awards.

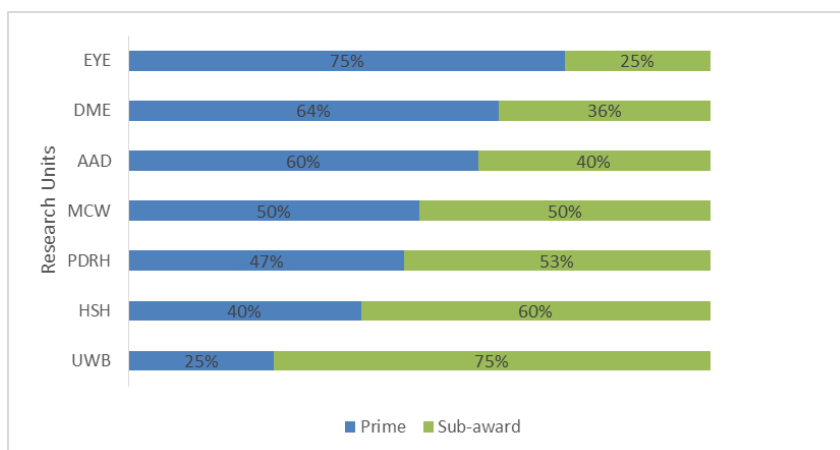


Figure 4: Prime award vs sub-award by units/divisions

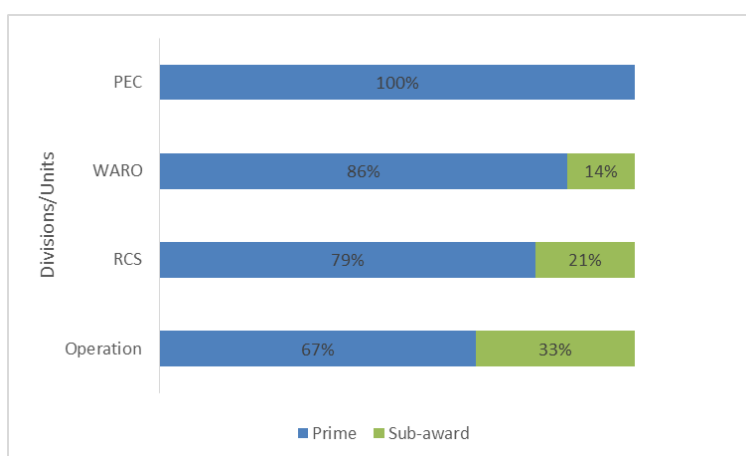


Figure 5: Prime award vs sub-award by Divisions/Units

The lifetime value of projects in 2021 for the whole Center was at USD 94.1 million, an increase from USD 83.1 million in 2020 and USD 61.1 million in 2019. The distribution of prime and sub-award grant amounts is as seen in figures 6 and 7.

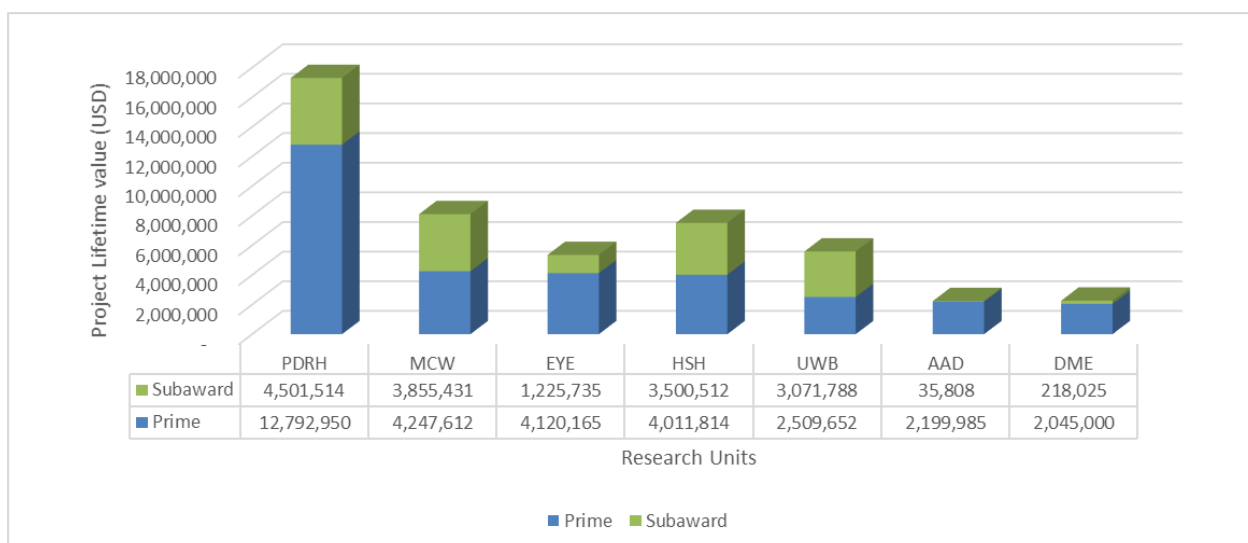


Figure 6: Lifetime value of projects by units/division

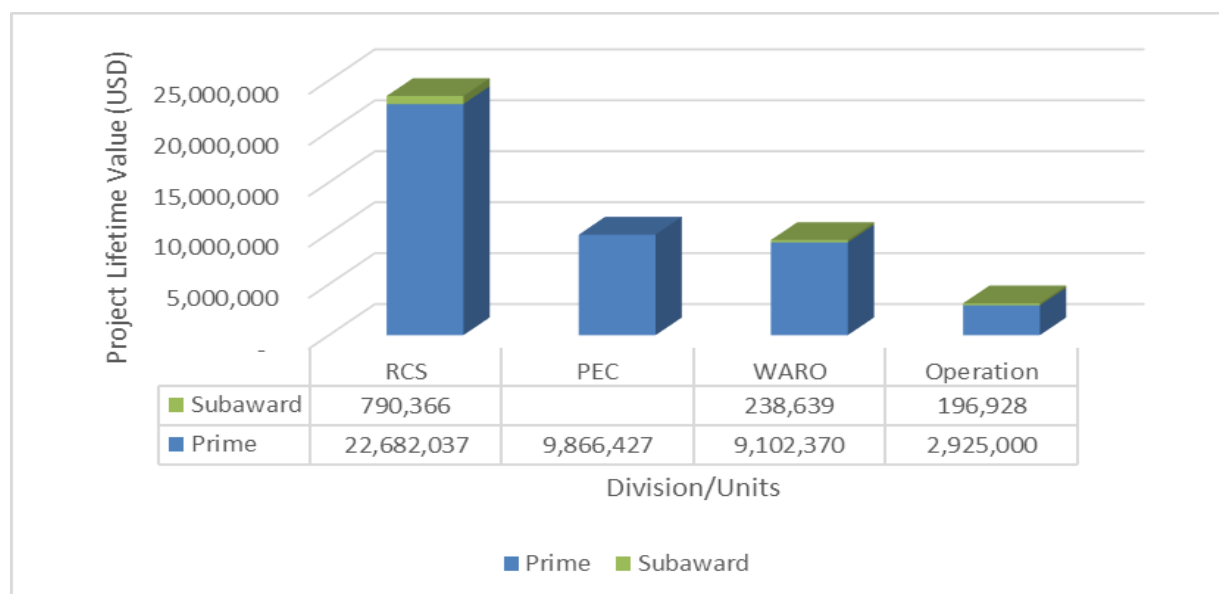


Figure 7: Lifetime value of projects by units/division

2.1.4. Signature, Synergy and Other Issues

During this reporting year 2021, 81 projects in the Research division tackled Signature Issues, 46 Synergy Issues and 41 tackled other issues. Important to note, there were some projects that tackled more than one issue. The signature, synergy and other issues are listed in Section 1.3. Figure 8 shows the distribution of the issues by unit.

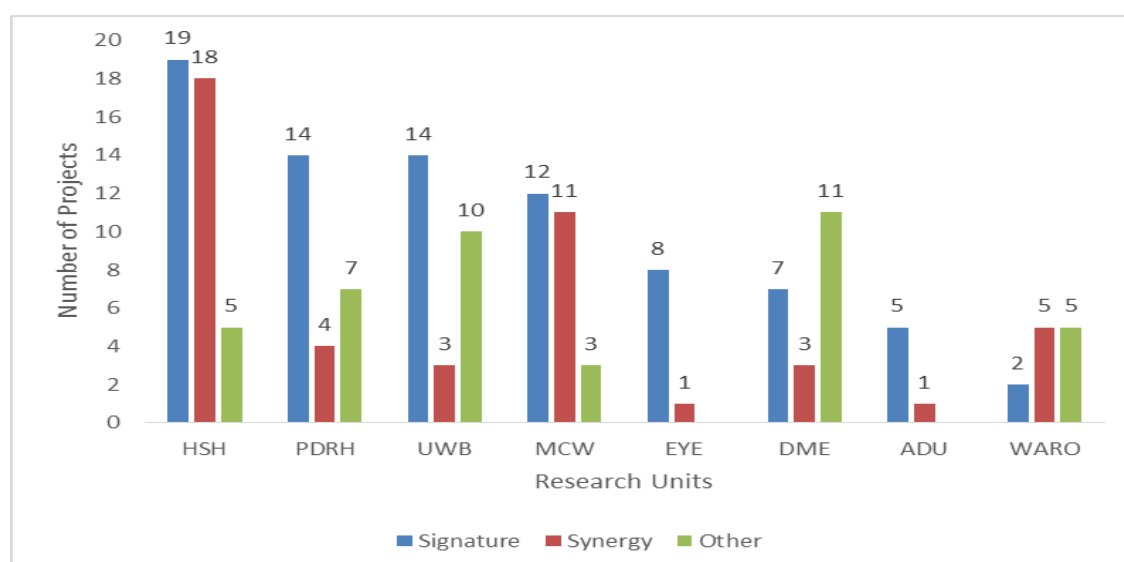


Figure 8: Signature, Synergy and Other Issues by Units

2.2 Research outputs

There were 157 research outputs in 2021, an increase from 148 in 2020 and 122 in 2019. Research outputs were book chapters, policy briefs, published papers/peer reviewed articles, supplements and technical reports and included those that had a means of verification. PDRH, MCW and HSH had the highest published papers with 28, 27 and 25 respectively. However, HSH had the most research outputs as seen in figure 9. Research Division had notably more publications as compared to RCS and PEC since scientific publications are one of its core outputs. Annex 1 lists all the APHRC publications developed in 2021.

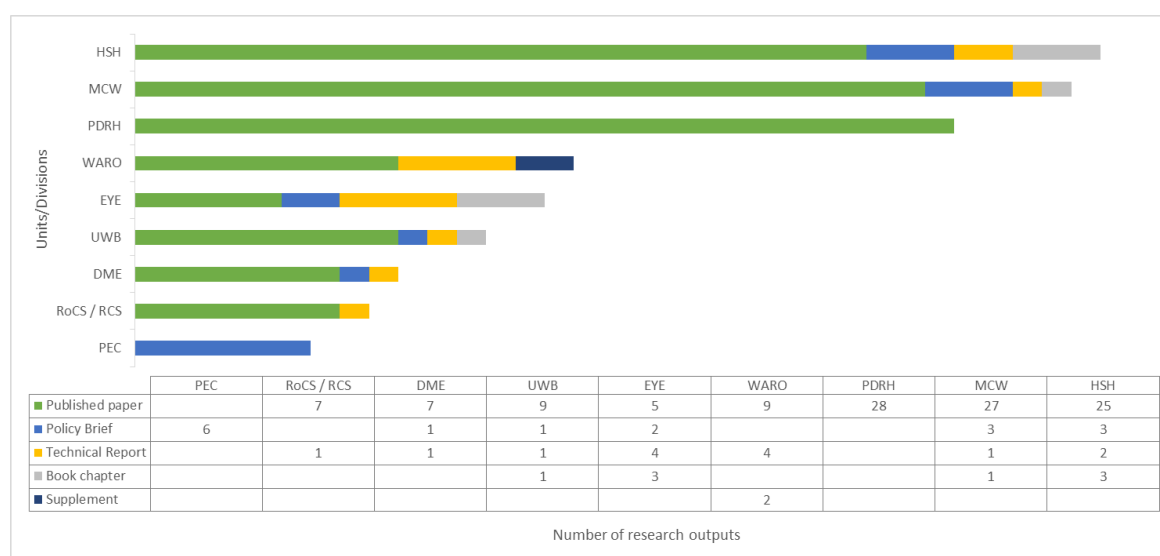


Figure 9: Research outputs by units and division

2.3 Microdata portal requests in 2021

A total of 36 individual requested data from the microdata portal working within different institutions compared to 51 and 17 individual data requests in 2020 and 2019 respectively. There were no data requests from institutions during the reporting period in comparison to 2 and 1 institutions that used the micro data portal in 2020 and 2019 respectively.

2.4 Grant Proposals for Business development

During this reporting year, there were 167 proposals developed, an increase from 159 and 100 in 2020 and 2019 respectively. There were 58 successful and 30 unsuccessful proposals while the rest were still awaiting feedback. Thus, the number success rate³ was 66%, the highest in four years. The dollar success

³ Proposal success rate={successful proposal/successful proposal + unsuccessful proposals}*100}

rate was at 40% compared to 29% in 2020. Operations and UWB had 100% and 92% success in their proposals as shown in table 3.

Table 3: Grant proposal success rate scorecard

Units/Division	Total No of proposals submitted	Proposal Performance			Dollars in successful proposals	Number Success rate			Dollar Success rate		
		No. of successful proposals	No. of unsuccessful proposals	Awaiting response		2019	2020	2021	2019	2020	2021
HSB	29	10	3	16	4,390,499	50%	59%	77%	42%	38%	28%
EYE	13	2	2	9	1,365,165	44%	46%	50%	11%	24%	44%
PDRH	24	11	4	9	1,821,119	30%	18%	73%	41%	2%	18%
MCW	20	2	10	8	1,248,350	43%	64%	17%	25%	41%	15%
UWB	19	8	1	10	1,592,016	43%	60%	89%	62%	33%	92%
DME	22	6	5	11	644,012	27%	50%	55%	12%	66%	24%
WARO	6	3	1	2	829,149	100%	100%	75%	100%	100%	60%
RCS	17	6	1	10	8,354,504	60%	63%	86%	33%	26%	74%
PEC	11	5	3	3	2,205,000	100%	40%	63%	100%	9%	55%
Operations	6	5	0	1	3,257,000	100%	50%	100%	100%	74%	100%
Center wide	167	58	30	79	25,706,814	46%	55%	66%	27%	29%	40%

Key:

	>=70%
	40%-69%
	Below 40%

2.5 Policies and Programs Informed by Evidence from APHRC

A number of recent projects have been able to address policy-relevant issues during this reporting year.

These were:

- CPSE under PEC contributed to the technical input to the EAC SRH Bill 2021 drafting and provided an evidence synthesis report to buttress the need for policy action on SRHR in East Africa. The phrasing of clauses of the Bill was largely influenced by the evidence received from CPSE.
- APHRC through Immunization Advocacy Initiative (IAI) made inputs into the National policy guidelines on immunization. The revised 2021-2025 National policy guidelines on immunization was finalized with support from immunization partners including the WHO, UNICEF, and PATH among others. With request from APHRC, the new policy guidelines have an inclusion of immunization financing and Monitoring, Evaluation, Accountability, and Learning (MEAL). This will guide key decision-makers and policy advisors on the increase of domestic financing and accountability at the national and county levels.
- The National Sanitation Policy advocacy project has immensely contributed to the organizational goal of contributing to policy change. Kenya has become the first country to develop an African Sanitation Policy Guideline compliant policy, which is responsive to SDG aspirations. The policy is in the final stages of being adopted. APHRC supported the entire process, taking lead in stakeholder mapping, stakeholder consultation in the policy process, as well as the policy development process and drafting. Further, APHRC was approached by WHO to support the

review and input into the Policy Monitoring and Assessment Tool, which will be piloted for implementation. This puts APHRC at the position where it has supported the development of the tool, which will be rolled out for use globally, to monitor policy development and assessment.

- HSH project and research outputs have contributed to the development of the National Strategic Plan for the Prevention and Control on Non-Communicable Diseases 2021/22 - 2025/26 in Kenya. The evidence from Ngao ya Afya on effectiveness of digital platforms for management of hypertension and diabetes is also feeding into the MOH policies on home-based care for chronic diseases.
- The Improving Girls Education (IGE) project brought together Policy Makers, Non- Governmental Organizations (NGOs) in a dissemination workshop on “The State of Education and Sexual and Reproductive Health and Rights for Adolescent Girls in Senegal: Findings of the Exploratory Study.” As a result, calls for evidence and multi-sectoral collaborations to support girls’ education emanated.

CHAPTER 3

Strategic Objective 2: Develop and nurture the next generation of African research leaders

This chapter looks at the second strategic objective that highlights the Center's efforts to build a sustainable human capital for research and development through strengthening both individual and institutional capacities for research in Africa. APHRC, through the Research and Capacity Strengthening (RCS) division works to increase the number of research leaders in the region and improve institutional capacity for research across academia. This is conducted through four programs: partnerships with universities and research institutions, fellows and internships program, research on capacity strengthening and training programs.

3.1 Partnerships with Universities and Research Institutions

During this reporting year, there were 22 partner institutions working with CARTA. These were 13 African institutions and 9 non-African partners as shown in table 4. The African partners are shown on Image 2.

Table 4: CARTA partner institutions

African Partners	Non-African Partners
❖ Makerere University ❖ Moi University ❖ University of Nairobi ❖ KEMRI/ Wellcome Trust Research Program ❖ African Population and Health Research Center (APHRC) ❖ Ifakara Health Institute ❖ University of Malawi ❖ University of Witwatersrand ❖ Agincourt Population and Health Unit ❖ University of Rwanda ❖ Obafemi Awolowo University ❖ University of Ibadan ❖ University of Zambia	❖ Brown University, USA ❖ Canadian Coalition for the Global Health Research, Canada ❖ Swiss Tropical and Public Health Institute, Switzerland ❖ University of Gothenburg, Sweden ❖ Umea University, Sweden ❖ University of Warwick, United Kingdom ❖ University of Bergen, Norway ❖ University of Chile, Chile ❖ ESE: O, Chile

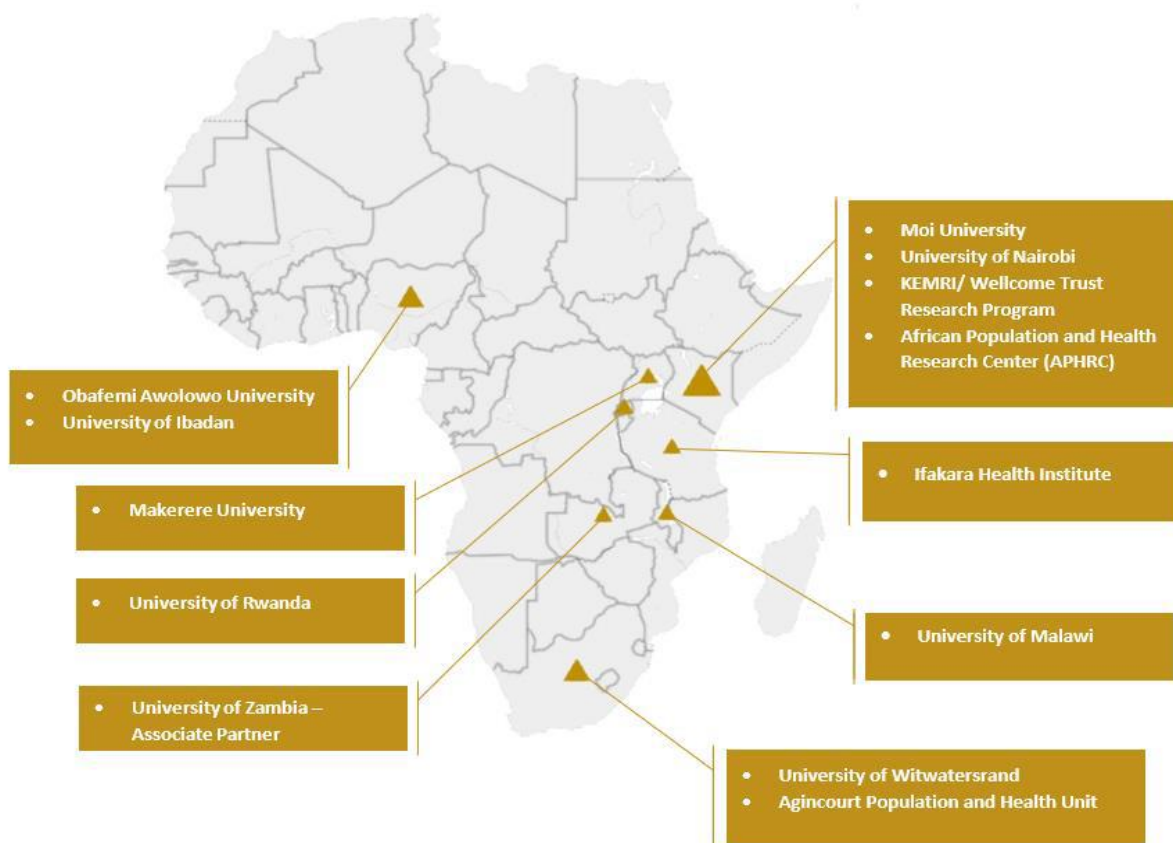


Image 2: 2021 CARTA partner institutions

The number of partnerships with universities and research institutions stayed the same as 2020 and 2019. Five institutions completed their institutionalization grants; Obafemi Awolowo University, Makerere University, University of Ibadan, University of Nairobi, and Moi University. There were no CARTA institutional grants awarded in 2021.

3.2 Fellowships and Internships

In 2021, the CARTA program had a total of 151 fellows under doctoral, postdoctoral and re-entry fellowships. There were 48 fellows who completed their fellowships; 30 doctoral (expected to graduate), 4 postdoctoral and 15 re-entry as shown in table 5.

Table 5: Distribution of CARTA fellows

Status/Type of fellowship	Doctoral Fellows	Postdoctoral Fellows	Re-entry Fellows
Total in 2021	132	4	16
New in 2021	0	0	1
Ongoing	102	0	1
Completed in 2021	30	4	15

Since the CARTA program began, 183 fellows have completed the fellowship program distributed as shown in figure 10.

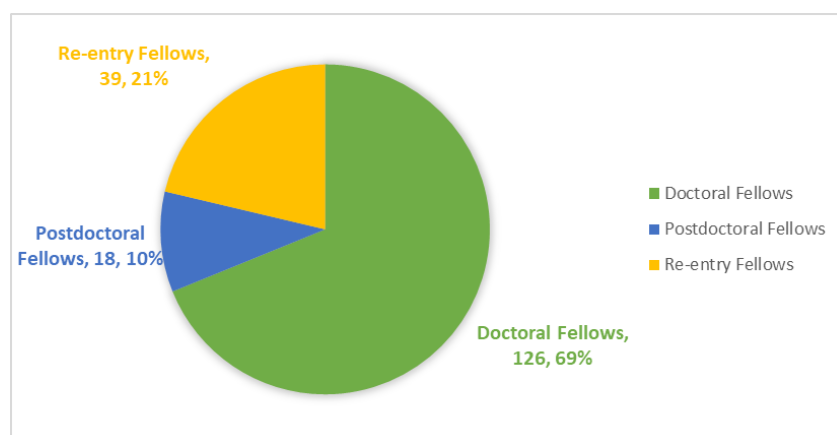


Figure 10: Accumulated completed fellowships

Under the ADDRf program, there was one new postdoctoral fellow in 2021, 32 ongoing and 33 total fellowships. During this reporting year, no ADDRf fellow completed their fellowships as seen in Table 6. There was a total of 12 masters' fellows with 4 under the WHO-HRP masters' fellowship. 2021 had 2 new visiting scholars enrolled and both completed their visit.

Table 6: Other fellowships

Status/Type of fellowship and scholarship	ADDRf Postdoctoral Fellows	Masters Fellows	WHO-HRP Masters Fellows	Visiting Scholars
Total in 2021	33	8	4	2
New in 2021	1	8	4	2
Ongoing	32	0	0	0
Completed in 2021	0	0	0	2

There were 22 interns who joined through the RCS and were attached to various units at the Center and five completed their internship during this reporting period. This was an increase from 11 interns who joined in 2020 and 9 interns who joined in 2019.

Table 7: Internships in 2021

Interns	Enrolled	Completed
Post-Doctoral	0	0
Doctoral	1	1
Masters	4	4
Post-Bachelors	17	0
Total	22	5

3.3 Publications and Research Outputs by Fellows

In 2021, CARTA fellows published 185 peer-reviewed articles in comparison to the 193 and 140 peer-reviewed articles published in 2020 and 2019 respectively. Other publications by CARTA fellows during the

reporting period included 3 book chapters and 16 blogs. ADDRf fellows published 12 peer-reviewed articles a decline from 22 and 31 peer-reviewed articles in 2020 and 2019 respectively as shown in figure 11.

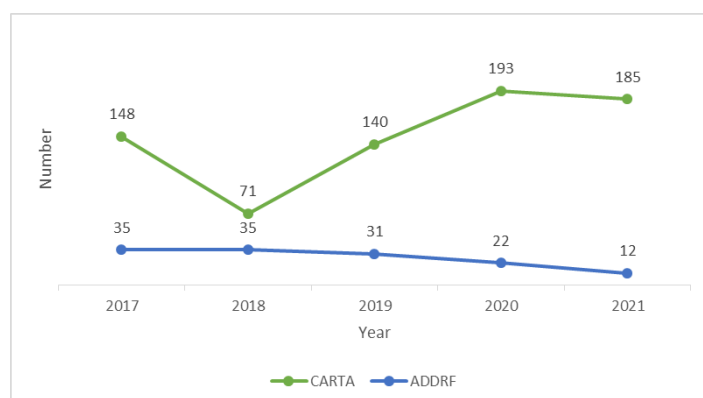


Figure 11: Trends of published papers by fellows

In 2021, 36 CARTA fellows won 39 grants, a decline from 62 grants won by 52 fellows in 2020. The grants won were worth nearly USD 1 million compared to USD 2.7 million in the previous year. Grants won were either research, scholarships, conferences or travel grants. Research grants formed majority (74%) of all the grants won by fellows as seen on Table 8.

Table 8: Grants won by CARTA fellows in 2021

Type of grant/Year	Number of fellows who won grants		Number of grants won		Worth of grants won (USD)	
	2020	2021	2020	2021	2020	2021
Research Grants	39	26	46	29	2,515,293	925,308
Scholarships Grants	5	4	5	4	146,970	65,982
Conference Grants	5	5	8	5	7,850	3,480
Travel Grants	3	1	3	1	7,500	500
Grand Total	52	36	62	39	2,677,613	995,270

3.4 Capacity Strengthening Activities

3.4.1. Capacity Strengthening for Fellows and Faculty

1. The CARTA program facilitated capacity strengthening for fellows virtually hosted by the University of Ibadan for JAS 3 cohort 8 and Pre-JAS 3 refresher cohort 9 where 27 and 22 fellows participated respectively. Makerere University virtually hosted JAS cohort 8 where 27 fellows participated.
2. The CARTA program facilitated capacity strengthening for faculty through a Supervisors workshop for Cohort 10 fellows' supervisors attended by 24 supervisors drawn from the CARTA partner institutions.

3. WHO-HRP Alliance for research capacity strengthening through the Department of Reproductive Health and Research (RHR) sponsored 14 students and faculty from the university of Nairobi and Aga Khan University for a Short Course on Research Methodology.
4. The Hivos – Youth Research Academy organized a research methodology short course and a hackathon workshop.
5. Capacity strengthening also occurred through the Breaking Barriers for Women in STEM stakeholder engagement workshops

3.4.2. Capacity Strengthening of APHRC Staff and External Participants

The Centre through RCS organized trainings for both APHRC staff and external participants. Training offered by the trainings program included both bespoke and public offerings. The various trainings and courses are as listed in table 9 showing the attendance by APHRC staff and external participants.

Table 9: Capacity strengthening activities

Course	Type of offering	APHRC Staff	External Participants	Total
Monitoring and Evaluating Community and Public Engagement projects	Bespoke	0	7	7
A series of training workshops on Monitoring and Evaluation	Bespoke	0	10	10
Training				
Grants Proposal Writing Workshop (for Immunization Advocacy Initiative (IAI) Partners from Ghana Partners)	Bespoke	0	17	17
Grants Proposal Writing Workshop (for Immunization Advocacy Initiative (IAI) project partners in Côte d'Ivoire)	Bespoke	0	16	16
Scientific Writing Workshop (for GCRF)	Bespoke	1	20	21
IR/IS Writing Activity (for USAID participants)	Bespoke	0	20	20
USAID IR/IS Writing Activity (Workshop III: Results, Discussion & Conclusion)	Bespoke	0	20	20
Quantitative Data Analysis & Visualization using R	Public Offering	6	10	16
Grants Proposal Writing (for Inter-University Council of East Africa [IUCEA] partners)	Bespoke	0	18	18
Grants Proposal Writing (for SADC-PF)	Bespoke	0	24	24
Implementation Research with Emphasis on Infectious Diseases	Public offering	1	33	34
USAID IR/IS Writing Activity (Workshop IV: Final Review and Feedback on the Manuscripts)	Bespoke	0	20	20
Grants Proposal Writing (for GCRF)	Bespoke	0	18	18
Scientific Writing & Publishing (for ICIPE)	Bespoke	0	63	63
Research Methodology – public offering	Public Offering	0	19	19
Research Management & Leadership (for ICIPE)	Bespoke	0	37	37
Grants Proposal Writing (for ICIPE)	Bespoke	0	19	19
Implementation Research with Emphasis on Infectious Diseases	Bespoke	0	23	23

3.4.3. Brown Bags

Various Brownbag presentations were held during the reporting year. Brown bags are fora for promoting dialogue and information sharing amongst colleagues within the Center. As highlighted in figure 12, during 2021, there were 7 brown bag sessions held, a decrease, from 14 in 2020 and 36 in 2019.

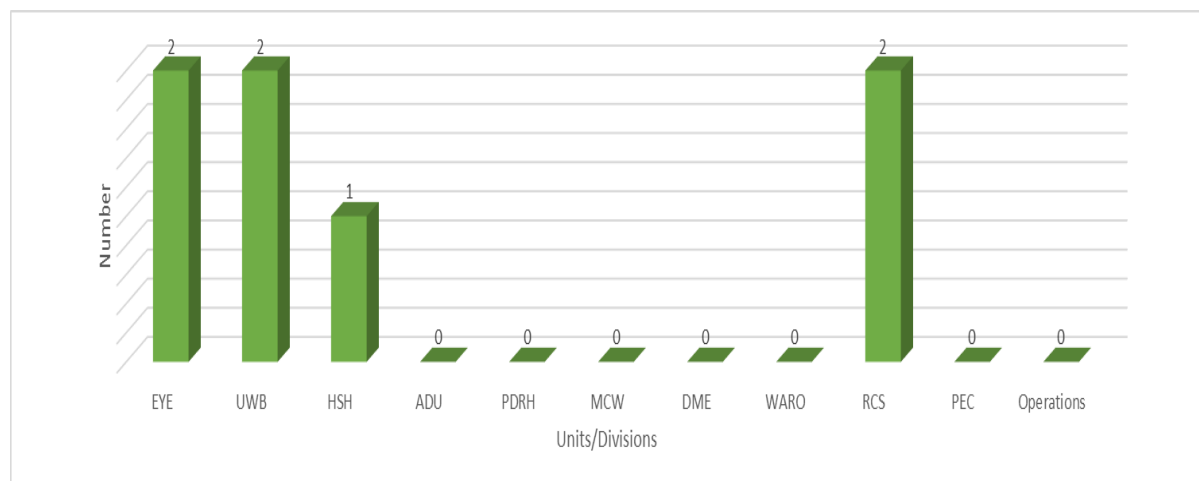


Figure 12: Distribution of brown bags by unit

3.5 Career Development

Career progression and development of innovations by fellows are elements the Center strives to achieve in nurturing the next generation of African leaders. During this year fellows advanced in their career as follows:

ADDRF

1. Solomon Chuwang Chollom, ADDRf 2016 was appointed as Specialist (Virology) with Viapath, Kings College Hospital, London, UK and as visiting lecturer with Federal University, Wukari (Nigeria). Viapath is a partnership between SYNLAB UK & Ireland, Guy's & St Thomas' NHS Foundation Trust and King's College Hospital NHS Foundation Trust. The organization brings together the very best in clinical, scientific and operational expertise to provide a service which helps clinics to create better outcomes for their patients, and which makes a positive difference to population health and wellbeing.
2. Mbada Chidozie Emmanuel, ADDRf 2010, appointed as Associate Professor of Physiotherapy at the Obafemi Awolowo University (OAU), Nigeria with effect from October 1st, 2017 (Backdated). Also appointed as a Visiting Research Fellow by the Manchester Metropolitan University United Kingdom.
3. Gitobu Cosmas Mugambi, ADDRf 2016 was selected as a Fogarty Global Health Post-Doctoral Fellow from July 1, 2021 to June 30, 2022 scholarship to pursue the prestigious National Institutes of Health (NIH) Fogarty Northern Pacific Global Health Research Fellows Training Consortium.

CARTA

1. Boladake Mapayi, (CARTA Cohort 4) and Marcellina Ijadunola (CARTA Cohort 6) of Obafemi Awolowo University were promoted to the position of Associate Professor.
2. Esther Afolabi (CARTA Cohort 5, Obafemi Awolowo University) was promoted to the position of a Senior Lecturer.
3. Monday Olodu (CARTA Cohort 10, Obafemi Awolowo University) was promoted to the position of a Senior Lecturer.
4. Lilian Njagi, (CARTA, Cohort 9, University of Nairobi) was appointed as a sub investigator at KEMRI Center for Respiratory Disease Research.
5. Emmanuel Kaindoa (CARTA Cohort 5), and Irene Moshi (CARTA Cohort 4) of Ifakara Health Institute, were appointed Adjunct faculty at Nelson Mandela Africa Institute of Science and Technology
6. Olufunmilayo Banjo (CARTA Cohort 7 of Obafemi Awolowo University) was appointed as an Acting Director, Centre for Gender and Social Policy.
7. Taofeek Awotidebe, (CARTA Cohort 1, Obafemi Awolowo University) was elected as the Vice Dean, Faculty of Basic Medicine.
8. Melvin Ojo (CARTA Cohort 3, of Obafemi Awolowo University) is co-coordinator of the University-wide Research Methodology for all Doctoral Candidates at OAU.
9. Joel Faronbi (CARTA Cohort 3, Esther Afolabi Cohort 5, John Abe Cohort 6 of Obafemi Awolowo University) are coordinators of Postgraduate programmes in their departments at University of Obafemi Awolowo University
10. Nkosiya Dube (CARTA Cohort 4 of University of the Witwatersrand) was appointed as deputy Head of Department and Course Coordinator for the Masters of Arts in Social Development at Wits' Department of Social Work, School of Human and Community Development
11. Godwin Anywar (CARTA Cohort 6, of Makerere University) was appointed as a Review editor in the Journal Frontiers in Pharmacology-Ethnopharmacology Section.
12. Noel Korukire (CARTA Cohort 9 of University of Rwanda) was voted in as the chairperson of the National Council Board (NCB) of Rwanda Allied Health Professions Council (RAHPC) and nominated to be head of the commanding of the COVID-19 response team at the level of College of Medicine and Health Sciences, University of Rwanda.
13. Rose Opiy (CARTA Cohort 1 of University of Nairobi) was appointed a member of College of Health Sciences, University of Nairobi Committee on Guidelines for PhD Equivalent Qualifications for Clinicians. and also appointed a member of St Paul's University Research Ethics Review Committee

14. Kennedy Otvombe (CARTA Cohort 1, of University of the Witwatersrand) was appointed to the Council of the AMREF International University in Nairobi.
15. Charles Ssemugabo (CARTA Cohort 9 of Makerere University) was voted Co-chair for Emerging Voices for Global Health

CHAPTER 4

Strategic Objective 3: Engage with decision-makers using evidence to drive optimal development and implementation of policies that will have a transformative impact on lives in Africa

This objective encompasses the Center's evolving strategic direction of investing in wider efforts to export its own evidence-to-policy model, as well as shape how global development agendas are domesticated to the African context. APHRC through the Policy Engagement and Communications division touches three PEC portfolios; namely policy engagement, knowledge management and communications. In line with this, the Division is configured under three units, namely advocacy, synergy and visibility units. More important is PEC-led efforts to foster the vital relationships that enable the Center to contribute to meaningful action towards improving the lives of all Africans. This chapter highlights ways in which this strategic objective was met (or contributed to).

4.1 Advocacy and Policy Engagement Projects

In 2021, APHRC undertook four major projects in advocacy and policy engagement through the PEC division. These were the Challenging the Politics of Social Exclusion (CPSE), Immunization Advocacy Initiative (IAI), Innovating for Maternal and Child Health in Africa (IMCHA), and the National Sanitation Policy Advocacy project. The PEC also participated in synergy projects with other units and divisions aimed at advocacy and policy engagement.

The CPSE project main goal is to establish and sustain collaborative relationship and partnerships with national, sub regional and regional policy partners. CPSE has continued to nurture partnership with the East Africa Legislative Assembly (EALA), East Africa Community (EAC), Southern African Development Community Parliamentary Forum (SADC PF), Ministries of Health in Kenya, Sierra Leone, Malawi, UN Agencies such as UNFPA, UNAIDS, UNESCO, UN-Women and UNDP. Through these relationships and partnerships, CPSE has been able to contribute to the development of the EAC SRH Bill, 2021 and the numerous stakeholder consultations related to the Bill making process. CPSE has also worked with UN agencies to develop a regional strategic policy engagement strategy on SRHR for the Eastern and Southern Africa Region (ESA). CPSE has contributed to the strengthening of the capacity of SADC PF and member state parliaments through 5 capacity strengthening sessions (policy engagement, communication, evidence use, outcome harvesting and proposal writing).

The IAI project sought to arm civil societies with technical skills in using evidence to drive advocacy priorities, for an effective level of influence on government decisions to fund a stronger and more resilient health system, with equitable and inclusive coverage of routine immunization as a foundation for that system.

IMCHA supports the implementation research, and the use of evidence to address critical knowledge gaps in policy and practice around delivering primary health care, generate tangible solutions that can be effectively scaled-up to achieve better health outcomes and equity and strengthen the uptake of maternal, neonatal and child health results into policy and practice. The ultimate goal of this unique model is to complement the teams' efforts to integrate the evidence they generate into policies and practices to improve maternal and child health outcomes in the targeted countries.

The sanitation project engaged government and other sector players in ensuring the adoption of the 2019 sanitation conference recommendations as well as support for the AMCOW guidelines for sanitation across Africa. APHRC has also had the opportunity to support WHO with the development and review of the tool that would monitor and assess policy work internationally.

4.2 Dissemination of research products to decision makers

Various units and divisions disseminated the research products from various projects. Table 10 summarizes some of the key dissemination activities⁴.

Table 10: Dissemination activities by units/divisions

Units	Dissemination activities
DME	• DME participated in a data and policy conference by IDRC; Lessons for policy-data interactions after COVID-19 focusing on building FAIR, sustainable, harmonized COVID-19 data to inform policy makers and researchers in Kenya and Malawi.
EYE	• Validation of the exploratory study findings with policymakers and NGOs on The State of Education and Sexual and Reproductive Health and Rights for Adolescent Girls in Senegal.
HSB	• Dissemination workshops of Cost of Eating Healthy projects findings involving representatives from the National, County and Sub County governments from Kisumu, Isiolo and Nairobi, Kenya.
MCW	• Dissemination meetings (NIHR-BFCl) on Mapping the Functioning of the Baby Friendly Community Initiative and Identifying its Needs within the Kenyan Health System involving national, county and sub county level officials working in health and nutrition.

⁴ The comprehensive dissemination activities for all units and divisions can be found in the unit-specific annual planning reports 2021

PDRH	• Dissemination of the end line report to share findings from the In their Hands (ITH) project with stakeholders at County level (HomaBay County) and involved the Homa Bay county commissioners office, County Director of Medical Services, Education and community affairs offices.
UWB	• ARISE-Post graduate Conference Early career Research presented findings of their sub-study work at a conference organized by the Liverpool School of Tropical Medicine (LSTM) with ARISE partners, Global students and researchers being in attendance.
WARO	• Dissemination meeting of the Countdown COVID-19 Findings across West African and Eastern African countries involving UNICEF, JHU, MOH, Public institutions and University of Manitoba.
RCS	• CARTA JAS 4 Scientific conference Virtually organized and hosted by Makerere University involving CARTA fellows and graduates
PEC	• The CPSE project team and the Center of Social Research held validation and dissemination workshops with stakeholders on October 5th and 7th for a survey conducted to understand the lived experiences of pregnant and parenting adolescents (PPAs) in Malawi. In attendance at the validation meeting were PPAs and representatives from CSOs and the government. The dissemination workshop attended by representatives from the University of Malawi, CSOs, SIDA and IDRC, saw stakeholders pledge their commitment to implementing the findings of the study. • Webinar on domestication of the Maputo protocol in Africa that involved CSOs, Government Policy actors (DRC, EAC, SADC, ECOWAS) • The CPSE in PEC and the Center of Social Research held validation and dissemination workshops with stakeholders for a survey conducted to understand the lived experiences of pregnant and parenting adolescents (PPAs) in Malawi. In attendance at the validation meeting were PPAs and representatives from CSOs and the government. The dissemination workshop was also attended by representatives from the University of Malawi, CSOs, SIDA and IDRC.

4.3 Notable engagement events with policy makers and agents of change

Policy engagement events include consultative meetings with decision-makers, conferences, fora, summits, symposiums, policy cafes and dissemination workshops as well technical meetings; where the Center were presenters, discussants, keynote speakers, attendees, chaired sessions etc. Notable engagements events were:

- WARO hosted a dissemination workshop on the results of the RMNCH Indicator Review by the Côte d'Ivoire Country Collaboration for the Countdown Phase II project. Represented in the workshop was the Cote d'Ivoire ministry of health through the directors of nursing and maternity care, health information and informatics and the national institute of public health. UNICEF, WHO, UNFPA, MSH, and JICA were among the organizations represented.
- WARO participated in the UNICEF COVID-19 study: Country workshops. The workshops were organized with Countdown country collaboration for data compilation and preparation for analysis to assess the impact of COVID-19 on the use of health services. RMNCH decision-makers and analysts from 13 SSA countries, academic/university partners and GFF focal points participated in the workshops.
- PDRH participated in the Regional Contextualization Workshop on Harnessing Data to End Child Marriage hosted by the Population Council and attended by Amref Health Africa, Plan International and CIFF
- PDRH participated as a co-convenor in the General-Purpose Committee (GPC) and stakeholders workshop on the EAC SRHR Bill 2021 with Members of Parliament and parliamentary staff across the EAC community represented in the workshop.

4.4 Collaborations with thought-leaders to develop policy and programs

Some of the notable collaborations include:

- **DME:** Two expert interviews with policy experts in Kenya and other partners in India conducted to understand and contribute to gender responsive approaches to vaccine policy around COVID-19
- **EYE Urban education:** The team established relations with the bureau of statistics in the countries of focus; Tanzania, Sierra Leone and Nigeria and continued to engage with those of Kenya and Uganda. Virtual meetings were held with various entities between March and August 2021. In Tanzania, HakiElimu (partner) organized a meeting between the directorate of policy and planning in the Ministry of Education and the National Bureau of Statistics on urban education, with NBS agreeing to partner to co-generate evidence. Besides holding virtual discussions with the representatives from the bureaus of statistics, material were shared including reports of the urban education work. In Uganda, the team organized a meeting on evidence generation and shared emerging findings from the secondary data analysis with the Ministry of Education, the Uganda Bureau of Statistics and the Kampala Capital City Authority. The outcome of the meeting was sharing of updated datasets by the MoES and UBOS for further analysis to inform the discourse on urban education as well as identification of more indicators for primary data collection.

- **EYE:** COVID-19 Observatory in Education in Africa: One Webinar was held at regional level and attended by two ministers of education; and senior MoE officials. The focus was on COVID-19 in education in SSA.
- **HSH:** The unit leader was a keynote speaker invited to talk about health services availability and how COVID-19 is impacting access. This was at the National Health Conference that took place in September and attended by over 100 participants including Governors, and policy makers. <https://www.amnestykenya.org/wp-content/uploads/2021/09/National-Health-Conference-Communique-Finale.pdf>
- **HSH:** APHRC supported launch of NCD framework which was attended by 120 people who were stakeholders from counties, national government, media, and organizations doing NCD work including WHO.
- **MCW:** Zero Hunger Initiative had engagements with the Kenyan Ministry of Health and the Ministry of Agriculture and the County Government of Nairobi on the initiative and support for buy-in into the initiative in a journey towards ending hunger and all forms of malnutrition in Kenyan Cities by 2030. A multi stakeholder advisory group was formed that includes different government sectors, UN Agencies, academia, the civil society, the private sector and community to help steer the initiative.
- **MCW:** The Human Milk Banking project team had meetings with government officials from the Ministry of health regarding moving human milk banking forward. There are indications of human milk banking being adopted and scaled to promote neonatal health and survival in Kenya.
- **MCW:** The NECS and CoP project teams held meetings with four (4) members of the Nairobi Metropolitan Services Departments of Health and Education to discuss how childcare provision within the County could be improved. These discussions fed into the ECD Advocacy Strategy document. The Strategy document outlines ways in which the components of the nurturing care framework could be incorporated at different levels of service provision.
- **MCW:** The CAPS-ECD project team had continual engagement with three officials of the Kajiado County Health and Education Departments to discuss ways in which the needs of marginalized communities in providing optimal parenting can be met.
- **MCW:** The NAWIRI team has been engaging the Turkana and Samburu Counties officials within the multi sectoral platform on findings from the baseline study. The team also produced policy briefs.
- **PDRH:** East Africa Community (EAC), East African Legislative Assembly (EALA), and The Eastern Africa National Networks of AIDS and Health Service Organizations (EANNASO) were all involved in the development of the East African Community SRHR Bill
- **PDRH:** Ministry of Health and Sanitation Sierra Leone collaborated in implementation of abortion incidence survey and potentially training of providers on post-abortion care.

- **PDRH:** Ministry of Health Kenya was involved in the development of the Kenya Adolescent Health Strategy; printing, launch and dissemination of the Handbook for Engaging Adolescents, Parents and Leaders in the Community, which was developed by the Ministry of Health through the Division of Adolescents and School Health (DASH)
- **WARO:** Launch of the BMC Adolescent and sexual reproductive health for all in sub-Saharan Africa: are inequalities reducing series on 23rd June with attendance from Policy experts and Partners. <https://www.countdown2030.org/countdown-news/asrh-for-all-in-sub-saharan-africa-are-inequalities-reducing>
- **WARO:** Launch of the BMC Health Facility Data series on 2nd September with attendance from GFF, WHO, MOH officials and Public Institutions.
- **WARO:** Countdown 2030 UNICEF COVID-19 dissemination on "What impact did the COVID pandemic have on the continuation of health services? Preliminary findings from health facility data in sub-Saharan Africa".
- **WARO:** Facilitated panel discussion at the Ouagadougou Partnership Coordination Unit (OCPU) seminar on Family Planning in the context of humanitarian crisis, Niamey, Niger 28-30 September 2021 <https://partenariatouaga.org/tag/atelier-regional-sur-la-pf-en-contexte-de-crise-humanitaire/>
- **WARO:** IDRC high level webinar on gender issues- facilitated with Barrel and Cheikh
- **PEC-Advocacy:** IMCHA as part of the scaling exchange work, through APHRC, has engaged about 10 people who have worked in programming and policy in the development sector.
- **Mbeteza - Maputo Protocol – DRC:** APHRC hosted 70 policy actors at the regional Maputo protocol presentation on how to mirror the DRC process in domestication and implementation of the protocol.
- **Sanitation:** APHRC hosted key stakeholders in 47 counties from the civil society, national government, county governments and regulatory authorities as part of the development of the national sanitation policy.

4.5 Social media campaigns, media hits and mentions of APHRC research

There were 9 social media campaigns conducted during the reporting year. These were: Women in Science Day, International Women's Day, World Health Day, and Global Action Week for Education, Africa Vaccination Week, Africa Integration Day, BMC Reproductive Health supplement launch, Youth, Gender and COVID-19 symposium, and 3D-Commission report launch. The social media analytics is on annex 5.

Table 11: Blogs by units

Unit	Number of blogs
HSB	1
MCW	3
PDRH	4
PEC	2
RCS	2
UWB	1
Total	13

Various units developed 13 blogs, as seen on Table 11. APHRC had 141 media hits from different outlets such as Print, Radio, TV, online platforms. There were over 20 media engagements in local, regional and international outlets during the reporting period. The list of blogs is on Annex 2 while the media hits on Annex 4. Notable visibility activities were:

- The center kicked off the ED-led COVID-19 misinformation campaign in partnership with Portland Communications. Through the campaign the Centre has secured a content partnership with The Conversation Africa and The Mail & Guardian's – The Continent.
- APHRC hosted a high-level webinar on vaccine rollout in Africa featuring the ED, Dr. Githinji Gitahi, GCEO, AMREF, and Dr. Ayoade Alakija, Co-chair of the AU's Africa Vaccine Delivery Alliance (AVDA). The theme of the webinar was 'where is Africa in the global COVID-19 vaccine rollout'.

4.6 Capacity Strengthening Activities on Policy Engagement

The following were capacity strengthening activities conducted in 2021:

- The CPSE project conducted a virtual training on policy engagement, communication, and evidence use in policy for the Southern Africa Development Community Parliamentary Forum (SADC-PF) where 47 participants attended.
- APHRC facilitated a virtual training on grants proposal writing for the SADC-PF. The 32 participants were drawn from SADC-PF staff and member state parliaments, including Angola, Botswana, Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, South Africa, Zambia, and Zimbabwe.
- CPSE contracted the Southern Hemisphere to conduct training on outcome harvesting for SADC PF and member state parliamentary staffers with 17 participants attending. Outcome Harvesting is an evaluation approach that is very well suited to the complexity of monitoring and evaluating policy engagement.

- PEC participated in the Aga Khan Graduate School of media curriculum review with the aim of strengthening the capacity of universities to build the right communications professionals for the Health Communications sector.
- As part of the capacity-building component of the Right to Food project, member- community organized groups were trained on non-technical writing. This included a short course on “Shaping Policy with Evidence” by the Institute of Development Studies.

CHAPTER 5

Strategic Objective 4: Create operational efficiencies in systems and processes for maximum programmatic impact

The Operations Division at APHRC provides support services in the areas of finance, internal audit, human resources, business development, information technology, facilities and administration. To enhance service delivery and to provide operational efficiencies, the Division seeks to re-engineer the Center's business processes through effective implementation of information communication technology and pursuing non-routine priorities. This chapter highlights ways in which this strategic objective was met (or contributed to).

5.1 Best practices for Operational Efficiencies

The following outlines the new systems and processes that were best practices that ensured operational efficiencies:

- New and Updated policies, manuals and guidelines – These included Remote Working Policy, Gender Equality Policy, HIV/AIDS Policy, Health and Safety Policy, Procurement Manual, Finance Policies and Procedures Manual, Risk Management Policy and Framework, Data Protection Policy and the Partnership Strategy and Guidelines.
- The Center conducted a legal review to assess the Center's compliance with the relevant laws, policies, guidelines and processes including, but not limited to, the Constitution of Kenya 2010, Companies Act 2015, and Data Protection Act 2019 among others; and for a similar exercise for the WARO office.
- Engagement with stakeholders towards the development of a multi-stakeholder funding platform to strengthen institutional capacity.
- The risk management function was separated from the auditing function to enhance coordination and efficiency.
- The center received two general operating support grants from the Hewlett Foundation and the Packard Foundation, one organizational effectiveness grant from the Hewlett Foundation and one fund management grant from SIDA.

5.2 Finance - Income, Expenses and Burn Rates

In 2021, there was an increase in income and expenses compared to 2020 with a subsequent increase in surplus to USD 1.9 million from USD 342,979 in 2020 as seen in Figure 13. Annex 3 lists APHRC funders in 2021.

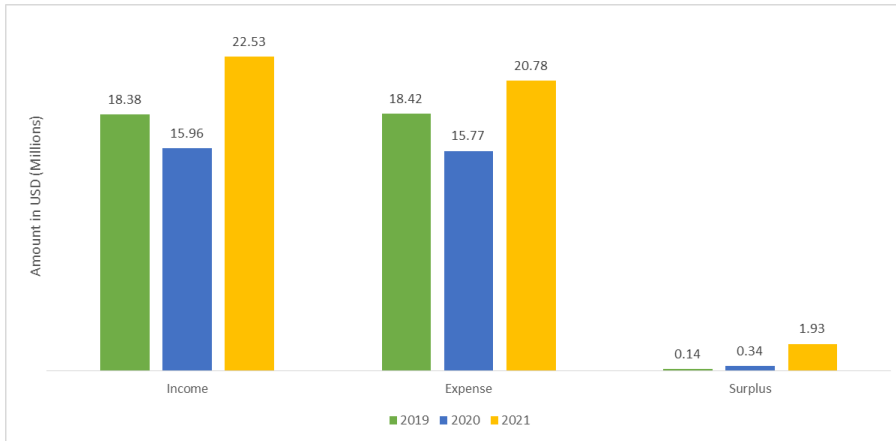


Figure 13: Income and expenditure in 2021

The overall burn rate for the Center was at 103% up from 82% in 2020 and 77% in 2019. This could be attributed to the eased COVID- 19 restrictions that allowed more implementation of delayed projects at the height of the pandemic. Figure 14 highlights the burn rates for each unit/division.

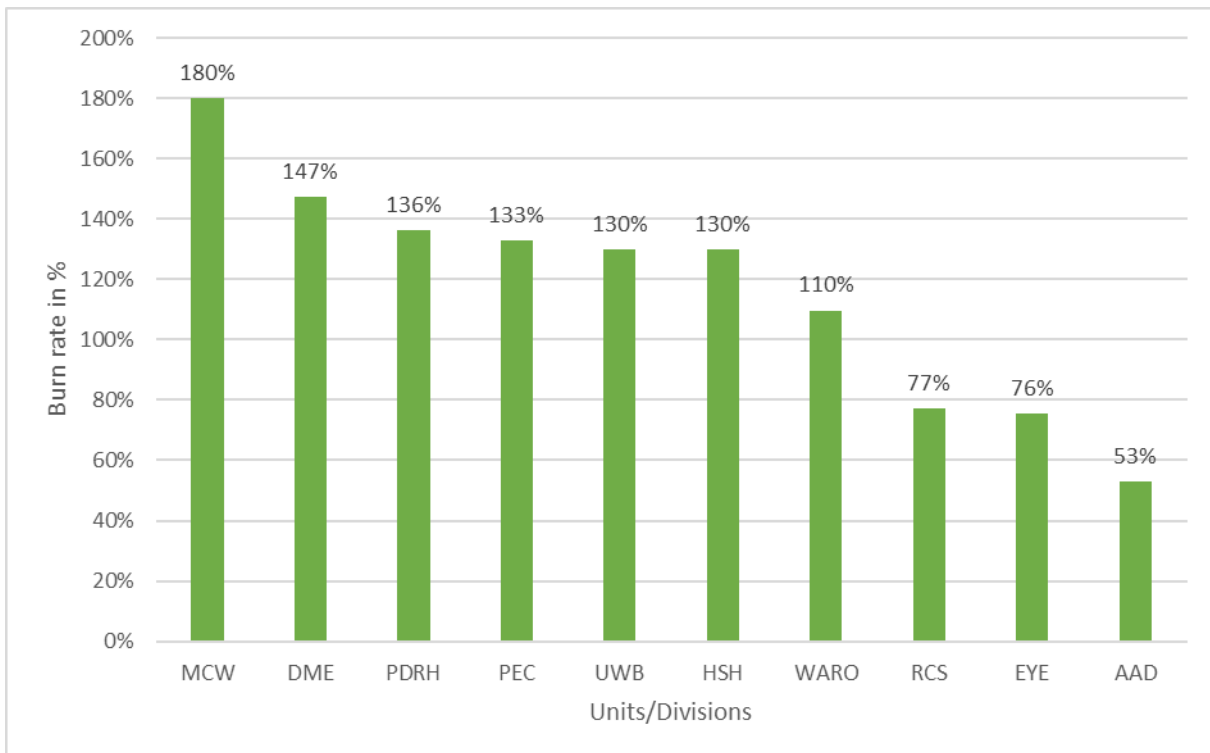


Figure 14: Burn rates by units/divisions

5.3 Human Resources

There were 183 regular employees⁵ during the reporting period with 175 employees at the end of 2021 after the exit of 8 employees seen in figure 15.

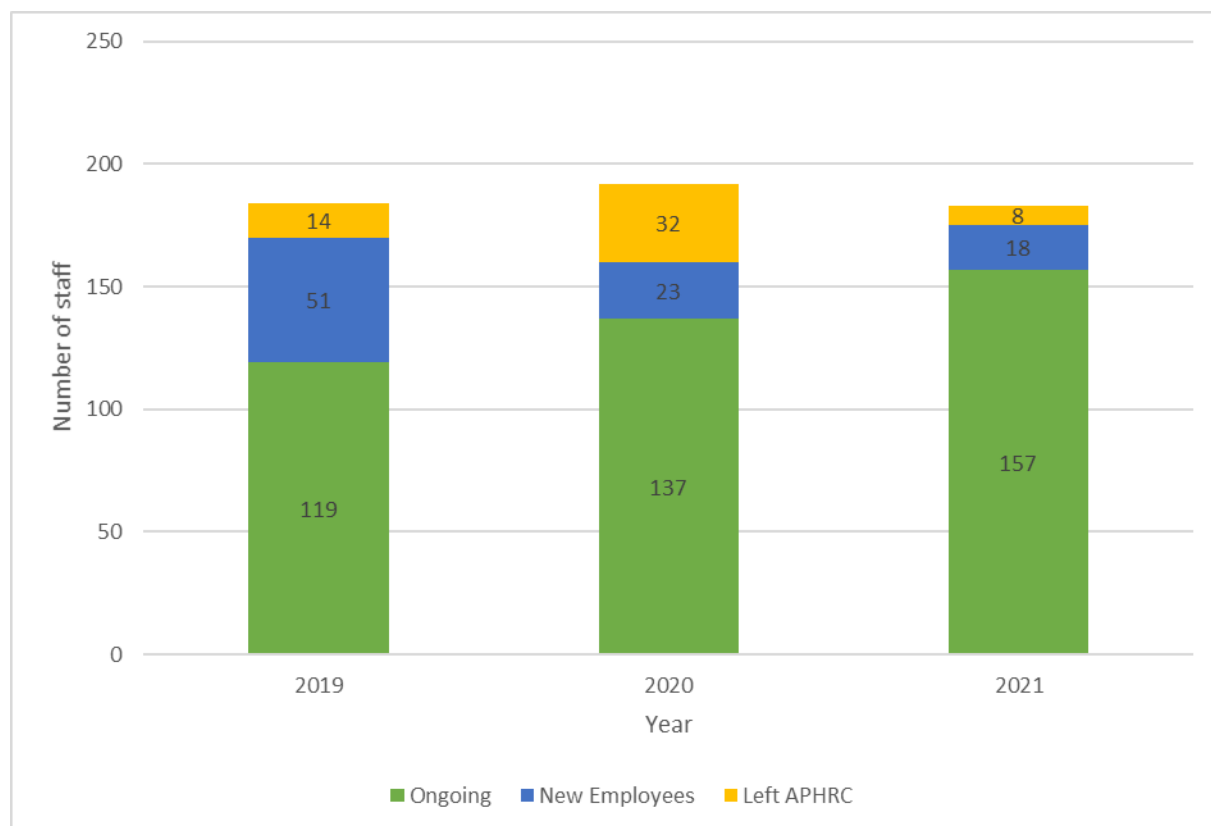


Figure 15: Trend-distribution of total number of employees

There was a total of 12 nationalities represented in the Center's staff; Senegalese, Malawian, Ugandan, Burkinabe, Cameroonian, Malian, Ghanaian, Nigerian, Ethiopian, American, Spanish and Kenyan. The Centre engaged 482 flexi personnel on short term contracts during the year. 8 staff left the Centre in 2021. In 2021, the net turnover rate was at 4.2% as compared to 6.8% (32) in 2020 and 4.9% (14) in 2019. There was a total of 33 interns at the Centre in 2021 inclusive of the research interns who joined through RCS as seen in section 3.2.

The distribution of employees by sex as at the end of 2021 was 93 males and 82 females as shown in image 3. In 2020, there were 84 males and 76 females while there were 77 males 93 females in 2019.



⁵ The data excludes consultants, interns and temporary staff

5.4 Go-No Go Approval for Business Development

In 2021, there were 23 consolidated synopses that were shared for the go-no go approval process with only 5 receiving the No-Go feedback. Single synopses were also shared for approval under special circumstances such as tight proposal submission deadlines. All the 167 proposals that were developed went through the go- no go process and were given a go ahead (data on the proposals can be found on section 2.4)

5.5 Internal audit

In 2021, the internal audit unit conducted 8 audits and the reports shared. These were recruitment audit, compliance with ethical protocols, procurement audit, ERP post implementation review, audit of controls in place to reduce the risk of research fraud at APHRC, program partners/collaborator audit, legal audit and the West Africa Regional Office audit.

The non-assurance internal audit activities were risk management coordination where the audit unit provided risk training to projects/programs, facilitated the review and update of the Center's risk registers and facilitated the project and program level risk assessment on request. The audit program was developed and is to be implemented in 2022. Follow-up audits were carried out to ensure implementation of the corrective actions and audit recommendations. The audit team reported a decrease in the number of internal audit recommendations. There was regular reporting to management through the activity audit reports. The annual internal audit status report was shared with management and the board.

5.6 Facilities Unit

The facilities unit was able to secure full rent and service charge from the tenant at the APHRC Campus (UNHCR) as well as continued to manage arising issues through quarterly meetings with UNHCR. The unit also supported management initiatives for the new accommodation block including management of the contract with Triatum. Alongside this, the facilities unit carried out campus improvements and major renovations; development of Ulwazi access road which was completed and commissioned and successfully completed phase 1 of the installation of additional security enhancements. The operationalization of the borehole was put on hold due to water quality issues. Throughout the reporting period, facilities unit was involved in management of suppliers and outsourcing contractor agreements.

5.7 Information Technology (IT) Unit

The IT unit continued to support the Center in its information technology needs. The role of the IT unit was more critical during the on-going COVID-19 pandemic in ensuring connectivity among staff especially with the continued remote working. They provided technical support and capacity building of staff while

using various virtual platforms for communication and engagements. During the reporting period, the IT unit was able to undertake ERP replication between the HQ in Kenya and WARO Office in Senegal to ensure smooth operations across the ERP platform.

CHAPTER 6

Key Challenges and Lessons Learnt

The following highlights some of the key cross cutting challenges and lessons learnt. Unit-specific challenges and lessons learnt can be found in the Unit-specific planning reports 2021:

Table 12: Key challenges and lessons learnt

Challenges	Lessons Learnt
The COVID-19 pandemic continued to affect the operations of the Center in different ways directly or indirectly related to project implementation.	Adapting new ways of operating during the pandemic. Conducting field activities while adhering to COVID-19 regulations Having virtual meetings internally and with external stakeholders
Coordination of virtual meetings with community members due to technological challenges like lack of smartphones and poor network. Challenges with remote data collection like privacy led to low response rate in some instances.	Projects that plan virtual meetings with community members should have airtime money ready after the meeting to avoid numerous calls made from them due to payment delays.
Delays in getting research permit approval due to bureaucracies and slow access to sample lists due to General Data Protection Regulation (GDPR) regulations.	Forging of relationships with resource persons from different countries and maintaining a database of these persons at the Center and anticipate delays in approvals and factor them into project work plans
Challenges with mobilization for stakeholder engagements due to bureaucracies as well as COVID-19 due to competing priorities, travelling arrangements	Working closely with networks who have access to decision makers, adopting virtual meetings and align plans with the target stakeholders
Working in a Francophone country requires regular translation, which is only possible with additional resources.	The different materials (reports, PowerPoint presentations etc.) were translated into French. Future projects working in Francophone countries to include a budget for translation and interpretation.
Slow response rate for routine processes related to administrative and operations such as accounting, appraisals, etc.	Sensitization on importance of the guidelines and timelines
Lack of certain expertise in new projects or delays in getting consultants for the specific roles.	Review remuneration package for some technical roles. Make the tendering process of inclusive, responsive and fast to allow on-boarding of consultants easily.

Increased workload in certain areas like LOEs review, proposal development and budgeting, IT support, HR support and general operations support, as there has been increased desk-based work resulting in numerous short-term awards with increased staff needs.	Better planning, smarter working and team engagement, have proven necessary.
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CHAPTER 7

Key Priorities for the Year 2022

Each unit identified the following key priorities for the year 2022⁶:

Research Division

Data Measurement and Evaluation Unit

1. Re-design of the Nairobi Urban Health and Demographic Surveillance System (NUHDSS)
2. Implementation Network for Sharing Population Information from Research Entities (INSPIRE)
3. INSPIRE Platform for Evaluation and Analysis of COVID-19 Harmonized data (PEACH) (or Global South AI4COVID)
4. Policy engagement plans
5. Statistical Modeling & Data Analysis.
6. Implement activities for ongoing projects i.e. Measurement and Impact Evaluation (MIE) project, Digital Dividend Evaluation and Data Quality Assessment project (DDE & DQA), Advanced Newborn Care in Ghana (MEBCI 2.0) Outcome Evaluation, UCL Global Health 50/50, Community Development and Engagement, Robust Data Systems,

Education and Youth Empowerment unit

1. Implement activities for ongoing projects i.e. A LOT-Change III, Role of education in addressing inequalities REAI - Gender and Education, Urban Education, RELI-DE Data and Evidence, Out of School Children and Youth in SSA and COVID-19 Observatory in Education in Africa
2. Policy engagement plans

Health and Systems for Health Unit

1. Implement activities for ongoing projects i.e. AWIGEN II (Africa-Wits INDEPTH partnership on Genomic Research), Community Engagement in Biobanking and Genomics (CEBioGen), Joep Lange 4, IDRC Global RECAP, Developing a package of effective interventions for healthier food environments in Kenya, Tanzania, and Uganda, EPIInA: Epilepsy Pathway Innovation in Africa, INFORMAS 2.0 Project: Harmonized indicators for measuring progress on creating healthy and sustainable food systems, MRC-PaLs: Patient-led support groups in the management of hypertension and diabetes in low-resource settings: mixed methods study of an innovative model, GECO-Kenya: Healthcare and Socio-economic Impacts of COVID-19 on Patients with Diabetes in Kenya, Long COVID-19 (Long-term clinical outcomes of SARS-CoV-2 infection and associated chronic inflammatory markers—a prospective cohort study in Kenya, Inequalities framework and toolkit to support the new Global AIDS Strategy

⁶ Further details on priorities can be found in the unit-specific annual planning report 2021

2021-2026, DREAMS Impact Evaluation, Channels & Actors Project: How Young People in Low and Middle Income Countries engage with mental health science, MADIVA: Multimorbidity in Africa: Digital innovation, visualization and application Research Hub and GECO: Healthcare and Socio-economic Impacts of COVID-19 on Patients with Diabetes in Kenya

2. Policy engagement plans

Maternal and Child Wellbeing Unit

1. Implement activities for ongoing projects i.e. Public Engagement (Right to Food Project), Nairobi Food System Vision, HORIZON 2020: Healthy Food Africa, Food System Transformative Integrated Policy (FS-TIP), Nairobi Early Childcare in Slums (NECS), CAPS- ECD, Community of Practice (CoP), WCSP, GrOW East Africa (GrOW II), USAID-NAWIRI, i-PUSH - small grant for paper development, NIH RO1 award on Kinship, marriage and child outcomes, *EDCTP Fellowship*, BRAC study: Digital finance services, women's economic empowerment, and maternal mental wellbeing: An ethnographic study in rural Kenya.

2. Policy engagement plans

Population Dynamics and Sexual and Reproductive Health Rights Unit

1. Implement activities for ongoing projects i.e. Kenya National Adolescent Mental Health Survey, Safire Project Evaluation, Challenging the Politics of Social Exclusion, Who Abortion Safety Study, Ethnography of Infanticide In Senegal, "Baobab": Filling Gaps In Evidence To Enhance Sexual and Reproductive Health and Rights Among Vulnerable Populations In Refugee Settings in The East And Horn Of Africa, Abortion Study In Humanitarian Settings (R2hc), Testing the Global (WHO) Standard Instrument For Assessing Sexual Health-Related Practices and Behaviors Using Cross-Cultural Cognitive Interviews In Nairobi and Kiambu Counties, Kenya, Spotlight Initiative, Channels & Actors Study and empowering adolescent mothers through education.

2. Policy engagement plans

Urbanization and Wellbeing Unit

1. Implement activities for ongoing projects i.e. Complex Urban Systems on Sustainability and Health (CUSSH), Future Leaders – Africa Independent Research Fellowship (FLAIR), Accountability and Equity in Informal Settlements (ARISE) Project, Statistical and Agent-based Modeling of Complex Microbial Systems (PATHOME) Project, Scale-up of SHOFCO Water Supply Projects Supported by Manitou Fund in Kibera, Kenya, WASH and Disability in the Elderly, PM Pollution Justice, Transforming Institutions to Advance women leaders in Science, Reckitt Fellowship, Evaluation of Jengu Handwashing facility, and transforming Institutions to Advance women leaders in Science (IDRC Gender & STEM).

2. Policy engagement plans

WARO

1. Implement activities for ongoing projects i.e. Gates Data system project, Countdown Phase 2, IDRC-ADO-SRHR project, Infanticide Project, Hewlett care system and WHO frontline

Research Capacity Strengthening (RCS) Division

1. Implement activities for ongoing projects i.e. ADDRf, The Africa Research Excellence Fund (AREF) fellowship programme, CARTA Fellowship, WHO-HRP, Emerging Voices, IDRC Breaking barriers project. Examining participation and quality of experiences of women in Science Technology Engineering and Mathematics: postgraduate training programs and careers in East Africa study, EU Personalized Medicine
2. Internships and Fellowships
3. Trainings
4. Emerging Voices secretariat contract under the Framework V of DGD

Policy Engagement and Communications (PEC) Division

1. Implement activities for the ongoing project i.e. Challenging the Politics of Social Exclusion project

Operations

1. 2022-2026 Strategic Planning objectives roll-out including developing unit-specific strategies, implementation plan and M & E framework.
2. Finance leadership and support to the Center in Audits, budgeting, accounting and reporting.
3. Human Resources leadership and support to the Center in recruitments, orientation, staff welfare and mentoring.
4. Business Development, legal and compliance, and corporate monitoring and evaluation
5. Internal audit facilitation in quality assurance and compliance activities.
6. Facilities and administrative activities in projects planning and management.
7. IT leadership and support to the Center in IT hardware and software including ERP.
8. Continued engagement with Thinking partners and policy actors through the Strengthening Institutions Research Capacity in Africa (SIRCA) work.
9. Continue engagement with various institutions through serving in the GFGP Scheme governing committee and promoting GFGP usage across the globe.

CHAPTER 8

Conclusion

This reporting year 2021 has been one of many achievements despite the COVID-19 pandemic. The eased COVID-19 restrictions saw the Center implement pending projects from the previous year. Through the projects across the 4 Divisions, there has been project activity implementation in 34 African countries. The West African regional office has also widely expanded having one of the projects, Gates Countdown 2030 phase 2, with 28 countries where the project is implementing activities. The Center continued to form partnerships with universities, research institutions and other organizations to generate evidence, nurture the next generation of African researchers and engage policy to inform action on population health and wellbeing. APHRC has also collaborated with policy actors in various sectors to address policy relevant issues and inform programs.

Priority for the year 2022 shall be to continue with the same momentum of striving for excellence in its quest to address the strategic issues; in line with local and international agendas. The Centre shall build on the achievements of the strategic plan 2017-2021 as it draws up a new Strategic Plan for the next five years. The Center shall also seek to build on networks and partnerships to maximize regional reach and effectively contribute to policy intervention.

ANNEXES

Annex 1: APHRC Publications

Peer Reviewed Articles

1. Turi, E., Simegnaw, D., Fekadu, G., Tolossa, T., Desalegn, M., Bayisa, L., Mulisa, D. and Abajobir, A. (2021). High Perceived Stigma Among People Living with HIV/AIDS in a Resource Limited Setting in Western Ethiopia: The Effect of Depression and Low Social Support. *HIV AIDS (Auckl)*,13:389-397. 10.2147/HIV.S295110
2. Porth, J.M., Treleaven, E., Fleischer, N.L. and Mutua, M.K. (2021). The influence of maternal migration on child vaccination in Kenya: An inverse probability of treatment-weighted analysis. *International Journal of Infectious Diseases*, 106, 105-114. 10.1016/j.ijid.2021.03.067.
3. Iddi, S., Akeyo, D., Bagayoko, M., Kiwuwa-Muyingo, S., Chikozho, C. and Kadengye, D.T. (2021). Determinants of transitions in water and sanitation services in two urban slums of Nairobi: A multi-state modeling approach. *Global Epidemiology*, 3, 100050. 10.1016/j.gloepi.2021.100050
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11. Mwangi, K., Gathecha, G., Nyamongo, M., Kimaiyo, S., Kamano, J., Bukachi, F., Odhiambo, F., Meme, H., Abubakar, H., Mwangi, N., Nato, J., Oti, S., Kyobutungi, C., Wamukoya, M., Mohamed, S.F., Wanyonyi, E., Ali, Z., Nyanjau, L., Nganga, A., Kiptui, D., Karagu, A., Nyangasi, M., Mwenda, V., Mwangi, M., Mulaki, A., Mwai, D., Waweru, P., Anyona, M., Masibo, P., Beran, D., Guessous, I., Coates, M., Bukhman, G. and Gupta, N. (2021). Reframing Non-Communicable Diseases and Injuries for Equity in the Era of Universal Health Coverage: Findings and Recommendations from the Kenya NCDI Poverty Commission. *Annals of Global Health*, 87(1), p.3. 10.5334/aogh.3085
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Supplements

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Annex 2: APHRC Blogs and Articles

10. Nawiri: In search for sustainable solutions to acute malnutrition by Michelle Mbuthia
11. Promoting access to nutritious foods in Nairobi urban poor settings by David, Hilda, Antonina, Faith, Liz Kimani
12. Investing in the health of the urban poor in Kenya: a multi-sectoral approach matters by Pauline Bakibinga
13. How young researchers are crucial to the study of unintended pregnancies and safe and legal abortion by Research Assistants under the Safe Choices project.
14. Why your sexual health is important in this digital era by Sally Odunga
15. My experience in ethnography by Anne Achieng'
16. Of suicide prevention: here's how we can make a difference by Liz Mwaniki
17. Addressing maternal mental health for generational wellness by Liz Mwaniki
18. My experience at the APHRC Youth Research Academy by Tedy Ouma
19. For the youth, by the youth: My experience at the APHRC Youth Research Academy by Miriam Ngarega
20. Pupils as ambassadors of waste management in the community by Sween Khayanga
21. <https://aphrc.org/blogarticle/supporting-urban-farms-in-nairobis-urban-poor-settlements/> by Allan Musumba
22. Using radio to convey gender and SRH information to adolescents by Vivian Nyakangi

Annex 3: APHRC Funders/Donors

1. Africa Academy of Sciences
2. Africa Asia Communications Forum
3. Africa Research Excellence Fund (AREF)
4. African Union Commission
5. AIGHD
6. AMREF
7. Amsterdam Institute For Global Health & Devt.
8. Anonymous
9. AXA Research Fund
10. BMGF
11. Brac Institute of Governance and Development (BIGD)
12. British Academy
13. Cardiff University
14. Carnigie
15. CGD
16. CIFF
17. Comic Relief
18. DAAD
19. Danida
20. Development Gateway
21. DFID
22. Dutch Foreign Affairs Ministry (Joep Lange Chair Project)
23. Echidna Giving & Imaginable Futures
24. EDCTP
25. ELHRA
26. Elma Foundation
27. Episcopal Releif & Development
28. European Union
29. FCDO
30. FSD
31. Gates Ventures
32. GCRF
33. GCRF University of Glasgow
34. Guttmacher Institute
35. Harvard
36. Hewlett Foundation
37. HIVOS
38. HRA Alliance
39. IAGG 2016
40. ICIPE
41. I-DAIR (The International Digital Health and Artificial Intelligence Research)
42. IDRC
43. IMMANA
44. Indepth
45. Institute of Tropical Medicine (ITM) Antwerp
46. IPAS
47. Italian Agency for Development Cooperation
48. IUSSP
49. Kenya Medical Research Institute
50. Liverpool School of Tropical Medicine-LSTM
51. London School of Hygiene & Tropical Medicine-LSHTM
52. Loughborough University
53. Manitou Fund
54. National Institute for Health Research
55. Network of African Science Academies (NASAC)
56. New Venture Fund
57. NIH
58. Brown University
59. Norwegian Agency for Development Cooperation (NORAD)
60. Oxfam-Ibis
61. Packard Foundation
62. PATH-DHB
63. Population Council
64. Population Reference Bureau
65. Public Library of Science (PLOS)
66. Reckitt Global Hygiene Institute (RGHI)
67. Rockefeller Foundation
68. RTI International
69. Rutgers
70. SIDA
71. Slovak Agency for International Development
72. SOE Amserdam Economics
73. Stichting PharmAccess International
74. Tetra Tech Technologies
75. The Royal Society
76. THE UNIVERSITY OF QUEENSLAND
77. UKRI GCRF/ Newton Fund Agile
78. UKRI MRC
79. UN Women
80. UNAIDS
81. UNDP
82. UNFPA
83. UNFPA ESARO
84. UNFPA WCARO
85. UNICEF - USA
86. Unilever
87. University College London (UCL)
88. UNIVERSITY OF GHANA
89. University of Maryland

- 90. UNIVERSITY OF WARWICK
- 91. Uppsala Monitoring Centre (UMC)
- 92. USAID
- 93. Wellcome Trust
- 94. Wellsprings Philanthropic Fund

- 95. WHO

Annex 4: Media Hits Tracker

1. From students to adults: The alarming suicide trends by Fred Wekesa in Daily Nation
2. African countries differ widely in prenatal HIV testing: why it matters by Anthony Ajayi in The Conversation Africa
3. Kenya's researchers conduct innovations to enhance food security in urban slums by Liz Kimani in MENAFN
4. African countries differ widely in prenatal HIV testing: why it matters by Anthony Ajayi in Health Business
5. COVID-19 data on men and women is critical by Siki Kigongo in iAfrikan
6. African perspectives: Discussion on the continent's capacity to develop vaccines by Catherine Kyobutungi in SABC News
7. US malaria project attacked as 'scientific colonialism' by Catherine Kyobutungi in Research Professional News
8. Why having COVID-19 data on men and women is critical by Siki Kigongo in SciDev
9. Honoring women and girls in science by Liz Kimani in SABC News
10. What Tanzania's COVID-19 vaccine reluctance means for its citizens and the world by Catherine Kyobutungi in The Conversation Africa
11. What Tanzania's COVID-19 vaccine reluctance means for its citizens and the world by Catherine Kyobutungi in Modern Ghana
12. What Tanzania's COVID-19 vaccine reluctance means for its citizens and the world by Catherine Kyobutungi in The Star Kenya
13. How borehole water hurts your health; APHRC research on water quality in The Standard
14. The ins and outs of Kenya's COVID-19 vaccine rollout plan by Catherine Kyobutungi in The Conversation Africa
15. Kenya Receives 1M Vaccine Doses, Will Distribute to Health Workers First by Catherine Kyobutungi in Voice of America
16. Kenyan Women's Rights Groups Hail Lifting of US Abortion Funding 'Gag Rule' by Boniface Ushie in Voice of America
17. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in The Conversation Africa
18. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in Sowetan Live
19. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in Dispatch Live
20. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in SABC News
21. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in Times Live
22. COVID-19 affects men and women differently. It's important to track the data by Sylvia Muyingo in Medical Xpress
23. Celebrating International Women's Day by Catherine Kyobutungi in BBC News Africa (Facebook Live)
24. 'Does anyone have any of these?': Lab-supply shortages strike amid global pandemic by Evelyne Gitau in Nature
25. Why educated Kenyan women are more obese; APHRC research on obesity in The Standard
26. Inside Kenya's COVID-19 vaccine strategy by Catherine Kyobutungi in Health Business
27. Mental health to blame for suicides; APHRC research on mental health in The Standard
28. Vaccine roll out in Kenya by Catherine Kyobutungi in RTL Nieuws
29. Risico op coronamutaties omdat Westerse vaccins inslaan by Catherine Kyobutungi in RTL Nieuws
30. Securing the education of Kenya's girls' during COVID-19 by Benta Abuya in The Conversation Africa

31. AstraZeneca COVID-19 vaccine effective, US study finds by Catherine Kyobutungi in Nation Africa
32. Hidden toll of COVID in Africa threatens global pandemic progress by Catherine Kyobutungi in Scientific American
33. How to take the lead in your career by Evelyn Gitau in Nature
34. Turning findings into policy: six tips for researchers by Boniface Ushie; Anthony Ajayi; Caroline Kabiru; in The Conversation Africa
35. Turning findings into policy: six tips for researchers by Boniface Ushie; Anthony Ajayi; Caroline Kabiru; in Malaysia Sun Business
36. Turning findings into policy: six tips for researchers by Boniface Ushie; Anthony Ajayi; Caroline Kabiru; in Modern Ghana
37. Eine Schwangerschaft beendet häufig die Schullaufbahn by Benta Abuya in Zeit
38. Governments are 'gender blind' to COVID-19's greater impact on women, global studies say by APHRC in France24
39. Governments are 'gender blind' to COVID-19's greater impact on women, global studies say by APHRC in Yahoo!
40. Kenya's COVID-19 vaccine rollout has got off to a slow start: the gaps, and how to fix them by Catherine Kyobutungi in Modern Ghana
41. Kenya's COVID-19 vaccine rollout has got off to a slow start: the gaps, and how to fix them by Catherine Kyobutungi in The Conversation Africa
42. Debunking vaccine fears by Catherine Kyobutungi in Debunk
43. Address education quality in urban informal settlements by Caroline Thiong'o in The Standard
44. Western Warnings Tarnish Covid Vaccines the World Badly Needs by Catherine Kyobutungi in New York Times
45. Western Warnings Tarnish Covid Vaccines the World Badly Needs by Catherine Kyobutungi in First Post
46. The AstraZeneca jab and the price of fragmented decision-making by Abdhallah Ziraba in Al-Jazeera
47. What can be done to better support women pursuing their PhDs in Africa by Anne Khisa in The Citizen
48. Coronavirus: Africa's vaccination rollout off to slow start by Catherine Kyobutungi in Deutsche-Welle
49. Kenyan scientists protest US takeover of malaria research by Catherine Kyobutungi in The Star Kenya
50. Vaccines as game-changer in fighting coronavirus by Catherine Kyobutungi in Business Daily
51. Vaccine roll out in Africa by Catherine Kyobutungi in CNN
52. Make abortion laws flexible to prevent many deaths; APHRC research on unsafe abortion mentioned in People Daily
53. Use COVID-19 levy to fund vaccines and immunisation activities by APHRC/ IAI Project in News Ghana
54. Kenya's COVID-19 vaccine rollout has got off to a slow start: the gaps, and how to fix them by Catherine Kyobutungi in The Knowledge Warehouse
55. Why Kenya does not have a stand-alone tax on sugary drinks by Gershim Asiki and Milka Wanjohi in The Conversation Africa
56. Why Kenya does not have a stand-alone tax on sugary drinks by Gershim Asiki and Milka Wanjohi in Health Business
57. It's time to stop ignoring paid childcare in urban Africa by Patricia Wekulo/Ruth Muendo in The Conversation Africa
58. Western Countries Prevented African Nations From Having Their Own Vaccine by Catherine Kyobutungi in Vice News
59. 'Gender inequality' fuels 1 million midwife shortage by Pauline Bakibinga in The Conversation Africa
60. Domestic immunization financing needed to sustain key programs by IAI in NTV
61. APHRC Research Scientist Dr. Benta Abuya is Working to Improve the Lives of Children in Urban Informal Settlements through Educational Programs by Benta Abuya in Potentash.com

62. African countries must muscle up their support and fill massive R&D gap by Catherine Kyobutungi et al. in The Conversation Africa
63. Can Africa produce its own Covid vaccines? by Catherine Kyobutungi in BBC Africa Daily Podcast
64. State urged to have inclusive, equitable food systems by Elizabeth Kimani in The Star Kenya
65. City women reduce deforestation through making briquettes by CUSSH project in Science Africa
66. UKRI 101 Jobs Campaign by Ivy Nandongwa in UKRI News
67. Lobbyists urge policy review to guarantee right to safe and affordable food by Elizabeth Kimani in Capital News
68. Europe addresses Africa's COVID vaccine dilemma by Catherine Kyobutungi in DW
69. Concerns on the safety, availability and administration of COVID-19 vaccines by Evelyne Gitau in KTN News
70. Tricked and uniformed: why so many young girls in Kenya are falling pregnant by Anthony Ajayi in The Conversation Africa
71. We must seize the moment for a global pandemic surveillance and response scheme by Gershim Asiki and Sylvia Muyingo in BMJ
72. Child marriage linked to domestic violence by Anthony Ajayi in eNCA
73. Slow Vaccination Rate in Africa Could Have Major Consequences, Experts Warn by Abdhalla Ziraba in VOA
74. Slow Vaccination Rate in Africa Could Have Major Consequences, Experts Warn by Abdhalla Ziraba in AllAfrica
75. Slow Vaccination Rate in Africa Could Have Major Consequences, Experts Warn by Abdhalla Ziraba in DMC News
76. From routine data collection to policy design: sex and gender both matter in COVID-19 by Michelle Mbuthia in Lancet
77. Day of the African Child by Caroline Kabiru in KTN News
78. Government urged to provide transportation for CHPS Compounds by IAI in Business Ghana
79. Baby-Friendly Community Initiative by Antonina Mutoro in Radio Citizen
80. Is donor dependency stifling African health research? by Catherine Kyobutungi in Devex
81. Creating Affordable, High-Quality Child Care—Lessons from Kenya by Patricia Wekulo in Foreign Policy
82. Let's transform agriculture to produce enough food for all by Elizabeth Kimani/ David Osogo/Faith Kathoka in The Standard
83. Are we doing enough towards achieving the right to food? by Elizabeth Kimani/ David Osogo/Faith Kathoka in Route to Food
84. This is no time to neglect hepatitis - 70 million Africans are infected by Pauline Bakibinga in The Conversation Africa
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86. This is no time to neglect hepatitis - 70 million Africans are infected by Pauline Bakibinga in NewsCentral
87. I had a baby at 14, an abortion at 17 but I regret everything; APHRC research on unsafe abortion mentioned in Daily Nation
88. Community initiative keeps Kenyan women breastfeeding exclusively for longer by Antonina Mutoro/Elizabeth Kimani in Modern Ghana
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90. With 1.6% vaccinated against Covid, Africa struggles to get doses by Evelyne Gitau in Rio Preto
91. Where a Vast Global Vaccination Program Went Wrong by Catherine Kyobutungi in New York Times
92. Misplaced hopes:Where a Vast Global Vaccination Program Went Wrong by Catherine Kyobutungi in DT Next

93. Working from home could not have come at a better time for breastfeeding mothers by Lynette Kamau in SABC News
94. The importance of optimal breastfeeding as World marks breastfeeding week amid a COVID-19 pandemic by Antonina Mutoro in KTN News
95. Breastfeeding: A Smart Investment by Lynette Kamau in TV47
96. Chronic diseases reduce Kenya income by 29 percent by Fred Wekesah in Scidev
97. The scientist's path by Benta Abuya in Science Media Africa
98. Can a government impose a vaccine mandate? by A. Ziraba in SABC News
99. Value of immunization by Jane Mangwana in Daily Nation
100. Adolescent sexual and reproductive health research is patchy in Africa by Anthony Ajayi/ Emmanuel Otukpa in The Conversation Africa
101. Future-proofing research resilience by Evelyn Gitau in Nature Index
102. Half a million abortions in Kenya every year, despite ban? Yes – and decade-old estimate still relevant; APHRC evidence mentioned in AfricaCheck
103. Time For A Paradigm Shift: The New Way To Achieve Zero Hunger By 2030 by Liz Kimani in Africa Centre for Ideas and Dialogue
104. USC Africa Hub aims to solve global health problems through collaboration with local partners; APHRC project mentioned in USC News
105. Breastfeeding trends show most developing countries may miss global nutrition targets by Dickson Amugsi in The Conversation Africa
106. Want to know about vaccine rollouts in Africa? Click on a country here and find out by Catherine Kyobutungi in The Conversation Africa
107. Unpacking Africa's vaccine rollout by Catherine Kyobutungi in Nairobi Ideas Podcast
108. Secondary Education: Kenya Needs to Think Beyond 100% Transition by Benta Abuya in The Elephant
109. Strengthening Africa's COVID-19 Data Ecosystem using Artificial Intelligence by Michelle Mbuthia in Global South AI4COVID Program
110. Kenya: Explainer - What Is the COVID-19 Pill and How Does It Reduce Chance of Death? by Catherine Kyobutungi in All Africa
111. Kenya: Explainer - What Is the COVID-19 Pill and How Does It Reduce Chance of Death? by Catherine Kyobutungi in Daily Nation
112. Will the world's first malaria vaccine eradicate the disease? by Abdhahah Ziraba in Al-Jazeera
113. Matters Evaluation and why Evaluation Matters by Francis Kiroro in Africa Evidence Network
114. What's the fuss? A glance at Measurement and Impact Evaluation by Michelle Mbuthia in Africa Evidence Network
115. Jaw-dropping colonial hangover!: fury greets Matt Hancock's UN Africa role by Catherine Kyobutungi in The Telegraph
116. Women Left Behind: Gender Gap Emerges in Africa's Vaccines by Abdhahah Ziraba in Los Angeles Sentinel
117. African voices missing from review of ACT-A covid response. Expert calls for WHO envoy Carl Bildt to resign by Catherine Kyobutungi in Development Today
118. Violence against women in Kenya: data provides a glimpse into a grim situation by Yohannes Dibaba in The Conversation Africa
119. Experts advise Kenya to mix and match COVID-19 vaccines by Catherine Kyobutungi in Nation Africa
120. I rekindled my love for cycling during the pandemic by Florence Sipalla in Nation Africa
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Annex 5: Social media analytics

Twitter:

Profiles

Review your aggregate profile metrics from the reporting period.

Profile [▲]	Followers	Net Follower Growth	Published Posts	Impressions	Engagements	Post Link Clicks	Engagement Rate (per Impression)
Reporting Period	11,499	1,762	267	900,732	34,258	7,337	3.8%
Jan 1, 2021 - Dec 31, 2021	—	—	↘ 23.5%	↘ 42.3%	↘ 12.3%	↗ 0.8%	↗ 51.8%
Compare to	—	—	349	1,559,721	39,084	7,280	2.5%
Jan 2, 2020 - Dec 31, 2020							
 @aphrc	11,499	1,762	267	900,732	34,258	7,337	3.8%