



The African Postdoctoral Training Initiative (APTI)

Induction Meeting for APTI2

Dates: 31 January - 2 February 2024

Venue: Golden Tulip Hotel, Banjul, The Gambia

Concept Note

1 Background information on APTI

Over the years, the National Institutes of Health (NIH), Bill and Melinda Gates Foundation (BMGF), and other funders, working in partnership with African institutions such as the African Academy of Sciences (AAS), and various universities and research centres in Africa, have made substantial investments to strengthen research capacity in sub-Saharan Africa. These investments advance the search for new interventions, treatments, and cures and improve health, which is a key development indicator. A core principle is to engage African scientists as partners and independent contributors in the research enterprise. In 2018, the AAS secured a generous investment from the BMGF to support public health-related research capacity for African researchers affiliated to African institutions. As part of that process, three core partners (AAS, NIH, and BMGF) created the African Post-Doctoral Fellowship Initiative (APTI) scheme. Additionally, the African Research Excellence Fund (AREF) provides research leadership capacity strengthening support for the Fellows.

The APTI programme focuses strongly on entrenching post-doctoral fellowships in African home institutions (universities and research centres) and involves two phases: a two-year fellowship at the NIH and two-year research implementation at the home institutions. The programme targets training 30 African fellows between 2018 and 2024 with the goal of turning the selected fellows into scientific leaders who can advocate for increased research and innovation projects in Africa. The APTI program has been implemented since 2018 with 30 postdoctoral fellows (distributed in three cohorts of 10 each) currently active.

To kick-off the second phase of APTI 2 fellowships, the AAS is organising an Inception Meeting for APTI 2 stakeholders in the Gambia. The main objective of the meeting is to showcase the work to be implemented by APTI 2 fellows as well as deliberate on the next steps of the programme. Specifically, the meeting seeks to

1. Provide visibility to the work being done by APTI 2 fellows,
2. Enhance the home institution's capacity to support the APTI fellows,
3. Set expectations for the fellowship.

2 Agenda for the scientific meeting

Time	Activities	Facilitator
DAY 1: Thursday, 31st February 2024 (Closed session)		
8.45–9.00	Arrival of guests	
9.00–10.00	<ul style="list-style-type: none"> • Introductions • Opening remarks from Dr. Peggy Oti-Boateng, AAS ED (10 mins) • Opening Remarks from VC MRC-Gambia (5 mins) • Keynote presentation: Africa's R&I Agenda – perspectives from the AAS (30 mins), <i>Prof. Paco Sereme, AAS VP West Africa</i> 	MC: Obed
10.00–10.30	Break/photo op	
10.30–11.15	Rising Research Leaders programme at the AAS <ul style="list-style-type: none"> • The AAS ECR theory of change • Objectives of, and support package for, APTI Fellowships • Mentorship program • Q&A 	Obed Ogega
11.15–12.15	<ul style="list-style-type: none"> • MEL protocols/tools • Q&A 	Rowland
12.15–13.15	Lunch break & departure of APTI 1 fellows	
13.15–14.30	<ul style="list-style-type: none"> • Good Finance Grant Practice (GFGP) • Financial Reporting Requirements for APTI • Q&A 	Alex
14.30–15.00	Break	All
APTI 2 Project highlight presentations (20 mins presentation, 10 mins Q&A)		
15.00–18.00	<ol style="list-style-type: none"> 1. African Trypanosomiasis and Leishmaniasis: Population Genomics and Therapeutics (Dr. Chukwudi) 2. Genomic investigation of Schistosoma hybrids in reservoir and vector hosts in schistosomiasis endemic communities in Nigeria (Dr. Ajakaye) 3. Whole genome sequencing, metagenomics, and bioinformatics (Dr. Bojang) 4. The role of var2CSA in the pathogenesis of severe malaria in children (Dr. Mensah-Brown) 5. Impact of family communal coping and stigma on health behavioral outcomes for neuropsychiatric-related genomic disorders (Dr. Matshabane) 6. Defining the mechanisms of dormancy in Plasmodium Falciparum (Dr. Kiboi) 	Boniface

	7. Microbiome of Buruli ulcer associated with clinical outcomes and therapeutic efficacy and Longitudinal Analysis of SARS-CoV2 (Dr. Frimpong 8. Deciphering the association between genetic markers and TB treatment response (Dr. Mnyambwa)	
18:00-18:30	<i>Closing remarks:</i> <ul style="list-style-type: none"> • NIH • BMGF • AAS 	
18:30-20:00	<i>Networking dinner (APTII + APTI2)</i>	
	<i>DAY 2 – Thursday, 1st February 2024</i>	
09:00-11:00	<i>APTI Programme Learning – shared experiences on</i> <ul style="list-style-type: none"> • Home Institution support • Research implementation: success stories, good practices, lessons learnt, and recommendations • Q&A 	Rowland
11:00-11:30	<i>Health Break</i>	
11:30-12:15	<ul style="list-style-type: none"> • Procurement procedures and AAS support • Q&A 	Caroline Yatich
12:15-12:45	Visioning Exercise <ul style="list-style-type: none"> • Explore where grantees want to go and what they need to get there • Identify capacity building needs • A reflection on personal and professional development objectives 	Dr. Obed Ogega, AAS
12:45-13:45	<i>Lunch Break</i>	
13:45-17:00	<ul style="list-style-type: none"> • Learning visit (TBC) 	All
	<i>DAY 3 – Friday, 2nd February 2024</i>	
09:00 – 10:30	Research Ethics in the African Context: Good practices and recommendations	Dr. Rakeshni (TBC)
10:30-11:00	<i>Break</i>	
11:00-12:30	Research management: frameworks, manuals, and procedures (Part 1)	
12:30-13:30	<i>Lunch break</i>	
13:30-15:30	Research management: frameworks, manuals, and procedures (Part 2)	
15:45-16:30	Reflections and wrap up	

3 Expected outcomes from the meeting

The meeting will result in the following grant deliverables;

1. A better understanding of APTI fellowship implementation
2. Enhanced host institution support to the APTI fellowship process
3. Enhanced visibility for the APTI fellowship