HEALTHY FUTURES

Health, environmental change and adaptive capacity; mapping, examining & anticipating future risks of water-related vector-borne diseases in eastern Africa

Collaborative Project
Seventh Framework Programme
Cooperation

Deliverable 7.2

Expert Review Panel Meeting 2

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Second Meeting of External Review Panel, MS Training Centre for Development Cooperation, Arusha, Tanzania May 10th 2012

Report on Second External Review Panel Meeting
Introduction

The HEALTHY FUTURES project deals with “Health, environmental change and adaptive capacity: mapping, examining and anticipating future risks of water-related vector-borne diseases in Eastern Africa”. The project is currently in the second year of the implementation, the main focus being on the construction of disease risk mapping system for three water-related high impact VBD (malaria, Rift Valley Fever & schistosomiasis) in Eastern Africa, taking into account environmental/climatic trends and change in socio-economic conditions to predict future risk.

The second Expert Review Panel (ERP) was originally scheduled to take place in month 15 (March 2012). In order to facilitate the interaction with participants of the 3rd partners’ meeting, the ERP meeting was moved to the 10th May, in month 17, after the partners’ meeting that took place on the 8th and 9th May. Both meetings took place in MS Training Centre for Development Cooperation, in Arusha Tanzania. This enabled external reviewers to participate to both meetings as requested in the previous ERP meeting that took place in Kampala. Attending the 3rd partners’ meeting gave ERP members the picture of the progress made from last year and enough insights on how the recommendations formulated towards HEALTHY FUTURES partners were addressed. This facilitated also the deliberation and guidance during the ERP meeting that followed.

The main focus of ERP meeting is to promote synergy in networking, and coordination with other climate and healthy-related projects - be they are funded by the EU 7th Framework Programme or not – and researchers internationally and regionally. It has to provide oversight, results review and evaluation, assurance of quality control, guidance on next steps and use of best practices including highest compliance with ethical guidelines. In Arusha, emphasis was placed on progressive review of achievements and recommendations on necessary adjustments for better scientific results and enhancement of collaboration with other stakeholders. Observations and recommendation formulated are presented below.
1. Meeting report:

The list of attendees to the meeting is as follows.

Attendees:

David Taylor, Professor, Trinity College, University of Dublin, Ireland (TCD)
Theophil Niyonzima, Doctor, National University of Rwanda, Rwanda (NUR)
Colin Jones, Doctor, Swedish Meteorological and Hydrological Institute, Sweden (SMHI)
Mark Booth, Doctor, University of Durham, United Kingdom (UDUR)
Madeleine Thomson, Senior Research Scientist (Climate Information for Public Health), International Research Institute for Climate and Society/Senior Research Scholar, Maliman School of Public Health, Columbia Earth Institute, USA
John Malone, Professor, School of Veterinary Medicine, Baton Rouge, LA, USA
Maurice Ope, Doctor, East African Community Secretariat (EAC) Disease Surveillance and Epidemiology Officer, Tanzania
Paul Lowen, Project Officer, AquaTT, Ireland (AQUATT)

The following is a list of main findings and recommendations of the ERP from the meeting per Work Package.

General

1) For promoting cross-cutting discussion, there is a need to identify the interdependence between the activities and Work Packages.

WP2 - Disease information & database construction

1) Project database:
   a. There is a need to define the purpose of the overall project database and who will be the end-use during the life-time of the project and potential users if the database is maintained beyond the project timeframe. There is a need to distinguish between decision-tools for decision-makers and research tools for researchers.
   b. Purpose of the collection of disease specific information to be defined; focus on data collection required for the development and validation of the disease models.

2) Historical Disease Database: For more clarity:
   a. Define the purpose of the historical database and how it feeds in to the rest of the project.
   b. Look at published reviews of literature and investigate what questions have already been answered and define a niche for new work.
3) **Climate and Environmental data:**
   a. Investigate whether MODIS Night time LST can be used as a proxy for minimum temperature.
   b. Harmonise data scales using 1km as the optimum for disease modelling while ensuring that uncertainty in data and model output is identified.

   **WP3 - Environment-disease transmission relationships & modelling**

1) A significant progress on the disease modelling side was noted. Observation: limited testing of model assumptions had been made. It was recommended:
   a. To ensure that there are reviews and validation of outputs produced, especially with regards to modelling work carried out.
   b. To formalise an expert-led process to test models against real observations for each disease considering the 3 key variables i) Spatial structure, ii) Seasonality, iii) Year to year variability.

   **WP4 - Disease risk and vulnerability mapping**

1) Vulnerability mapping to be based on sound epidemiological and biological based principles that can be understood by the Health community. For example, differences in levels of immunity should be fundamental to any disease vulnerability mapping.

2) Vulnerability to be defined and based on good biological principles with the incorporation of immunity specified in terms of biological relevant indicators (infection, disease and death) and must be incorporated into the vulnerability mapping structure.

   **WP5 - Adaptation and support tools: Development of decision support tools**

1) Stockholm Environment Institute (SEI) to liaise with representatives from PLUS and ILRI before submitting a written report for consideration by the ERP by 25 May 2012 stating the status and exact anticipated date of completion of all incomplete tasks and overdue associated deliverables relating to WP5.

   **WP6 - Stakeholder engagement and empowerment through sharing of knowledge and training**

1) For more engagement of HEALTHY FUTURES in regional healthy research and policy activities in the region, it was recommended to create an enabling environment for African-based
partners to further project activities through engagement and dissemination activities using partner resources and new resources where possible.

2) HEALTHY FUTURES partners to identify opportunities to represent the project in relevant policy and practice forum. For example, at the Informal Consultation on Public Health Vulnerabilities of African Countries to Climate Change (meeting, Addis Ababa July 2012).

3) HEALTHY FUTURES to host a symposium from a health perspective at the next East African Community Annual Health and Scientific Conference originally scheduled for September 2012 but likely to take place in Kigali, Rwanda in March 2013.

**WP7 - Enhancing research synergy & application**

1) In relation to excessive charges on airline tickets for NUR, need to document NUR travel issues and formal statement and request to be made to the travel agent and the University of the challenges to the project, to further funded research activities available to the University and impacting on further capacity building of the University.

**Conclusion**

The second Expert Review Panel has been strengthened by the presence of a representative of the East African Community, Dr Maurice OPE. His participation permitted an open discussion on how HEALTHY FUTURES research on climate change and health can complement with other research conducted in East Africa. The Panel was also reinforced by HEALTHY FUTURES members Dr Colin Jones from Sveriges Meteorologiska och Hydrologiska Institut (SMHI), Sweden and Mark Booth from the University of Durham (UDUR), UK. These participated on a voluntarily basis as they are not regular members of the Expert Review Panel meeting but are members of the Scientific Committee for the project. The ERP benefited from their presence especially when it came to discussing the progress made in modelling and way forward.

During the meeting, the participants scrutinised how the recommendations formulated in Kampala were addressed and discussed the overall progress made in the second year of the project implementation in different Work Packages. A particular emphasis was placed on how the HEALTHY FUTURES project activities integrate in the research agenda of the East African Community. New recommendations were formulated for the continuation of the project. The overall observation was that the ERP meeting has successfully achieved its objectives.

More in depth information of the meeting discussions can be found in the minutes which are available on the project website, [http://www.healthyfutures.eu/](http://www.healthyfutures.eu/), along with further project information.