HEALTHY FUTURES

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

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Cooperation

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Identification and engagement of key stakeholders
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List of terms and abbreviations

ABBREVIATION: Explanation

AU-IBAR: African Union Interafican Bureau for Animal Resources
CCCU: Climate Change Coordination Unit, Prime Minister’s Office (Kenya)
CCU: Climate Change Unit, Directorate of Environmental Affairs (Uganda)
CCU: Climate Change Unit, Ministry of Agriculture (Kenya)
CH: Department for Community Health, Ministry of Health (Uganda)
COSTECH: Tanzania Commission for Science and Technology
CTN: Contrôle des Maladies Tropicales Négligées [Control of Neglected Tropical Diseases Programme], Département des Projets et Programmes des Santés (Burundi)
DC: Department for Disease Control (Uganda)
DCD: Disease Control Department, Ministry of Public Health and Sanitation (Kenya)
DDSR: Division of Disease Surveillance and Response, Department of Disease Control (Kenya)
DEA: Directorate of Environmental Affairs, Ministry of Water and Environment (Uganda)
DFID: Department for International Development (UK)
DI: Département de l'Infrastructure [Department of Infrastructure], Ministère de l'Énergie et des Minéraux (Burundi)
DI: Department of Irrigation (Tanzania)
DLHE: Department of Livestock Health and Entomology, Ministry of Agriculture, Animal Industry and Fisheries (Uganda)
DMC: Division of Malaria Control, Department of Disease Control (Kenya)
DMD: Disaster Management Department (Tanzania)
DOE: Department of Environment (Tanzania)
DPPS: Département des Projets et Programmes des Santés [Department of Programmes and Projects], Ministère de la Santé Publique et le Lutte contre le SIDA (Burundi)
DRDPM: Department of Relief, Disaster Preparedness and Management, Office of Prime Minister (Uganda)
DSE: Disease Surveillance and Epidemiology, Ministry of Health and Social Welfare (Tanzania)
DVD: Division of Vector Borne Diseases, Department of Disease Control (Kenya)
Identification and engagement of key stakeholders

DWD  Directorate of Water Development, Ministry of Water and Environment (Uganda)
DWRM  Directorate of Water Resources Management, Ministry of Water and Environment (Uganda)
EIDD  Epidemic Infectious Diseases Division, Rwanda Biomedical Centre
EPU  Emergency Preparedness Unit, Ministry of Health and Social Welfare (Tanzania)
ESD  Epidemiology and Surveillance Division, Department for Disease Control (Uganda)
FAO  Food and Agriculture Organisation
GN  Genie Rural, Ministère de l’Agriculture et de l’Élevage (Burundi)
ICCTC  Inter-institutional Climate Change Technical Committee (Uganda)
ICIPE  International Centre of Insect Physiology and Ecology
ILRI  International Livestock Research Institute
IUCN  International Union for the Conservation of Nature
IWRM  integrated water resources management
KARI  Kenya Agricultural Research Institute
KCCWG  Kenya Climate Change Working Group
KEMRI  Kenya Medical Research Institute
KMD  Kenya Meteorological Department
MAAIF  Ministry of Agriculture, Animal Industry and Fisheries (Uganda)
MAE  Ministère de l’Agriculture et de l’Élevage [Ministry of Agriculture and Livestock] (Burundi)
MCP  Malaria Control Programme (Uganda)
MEM  Ministère de l’Énergie et des Minéraux [Ministry of Energy and Minerals] (Burundi)
MEMR  Ministry of Environment and Mineral Resources (Kenya)
MIDIMAR  Ministry of Disaster Management and Refugees (Rwanda)
MINAGRI  Ministry of Agriculture and Animal Resources (Rwanda)
MINEAC  Ministry of East African Community (Rwanda)
MINELA  Ministry of Natural Resources (Rwanda)
MOAG  Ministry of Agriculture (Kenya)
MoH  Ministry of Health (Rwanda)
MOH  Ministry of Health (Uganda)
MOL  Ministry of Livestock Development (Kenya)
MOLF  Ministry of Livestock and Fisheries Development (Tanzania)
Mal & OPDD  Malaria and Other Parasitic Diseases Division, Rwanda Biomedical Centre
MOPHS  Ministry of Public Health and Sanitation (Kenya)
MOHSSW  Ministry of Health and Social Welfare (Tanzania)
MOW  Ministry of Water and Irrigation (Tanzania)
MOWI  Ministry of Water and Irrigation (Kenya)
MRC  Medical Research Centre, Rwanda Biomedical Centre
MRC  Uganda Malaria Research Centre
MSP  Ministère de la Santé Publique et le Lutte contre le SIDA [Ministry for Public Health and the Fight against AIDS] (Burundi)
MWE  Ministry of Water and Environment (Uganda)
NCCS  National Climate Change Secretariat, Ministry of Environment and Mineral Resources (Kenya)
NDCC  National Disaster Coordinating Committee (Kenya)
NDOC  National Disaster Operations Centre, President’s Office (Kenya)
NEMA  National Environmental Management Authority (Kenya)
NEMA  National Environmental Management Authority, Ministry of Water and Environment (Uganda)
Summary

This document provides the results of a strategic network mapping of stakeholders for the HEALTHY FUTURES project. For each country, a list of relevant organisations, including national ministries, other governmental entities, research institutes and NGOs is given. Cross-sectoral coordination bodies/mechanisms that could serve as possible entry points for engaging with stakeholders and liaising for input into the adaptation decision explorer tools are identified. Lastly, for each country, a strategic network map is provided, which details relevant actors and the planning, information and financial flows between them. These maps are based primarily on personal interviews with stakeholders in each country, during which stakeholders and the interviewer together created a hand-drawn map of connection between various national players in terms of human and animal health, environment, climate change and related sectors. The maps, in effect, capture the nature and pattern of personal interrelationships and information and financial flows between key actors in relevant organisations. By their very nature, the maps are time-dependent, with the patterns and inter-connections shown likely to vary over time as the administrative landscape changes.
Introduction

One of the key deliverables of the HEALTHY FUTURES project is decision support tools to guide policymakers on addressing the three target diseases – malaria, schistosomiasis and Rift Valley Fever – under conditions of global change (including environmental, climate and socioeconomic change). To engage stakeholders and identify relevant points of entry, network mapping exercises were undertaken in the five East African Community countries (Burundi, Kenya, Rwanda, Tanzania and Uganda) with two objectives: (i) to identify links between organisations and flows of information between key stakeholders; and (ii) to explore implementation linkages between disease interventions and surveillance, vector control, and health promotion and environmental health programmes within the health sector as a whole. This was done to better understand how different actors take decisions and is particularly relevant for strengthening the way in which early warnings of disease outbreak are used.

An emphasis was placed on identifying intra- and multi-sectoral linkages. For each country, cross-sectoral coordination bodies/mechanisms that could serve as possible entry points for HEALTHY FUTURES to engage and liaise with stakeholders and for input into the adaptation decision explorer tools were identified. For each country that is currently a member of the east African community region, and thus falls within the study area of HEALTHY FUTURES, a strategic network map was constructed summarising links between various players at national level in the areas of human and animal health, environment, climate change and related sectors. The maps were based on personal interviews with stakeholders in each country. By their very nature, the maps are time-dependent, with the patterns and inter-connections shown likely to vary over time as the administrative landscape changes.

1. Burundi

The key ministry in Burundi for engagement is Ministère de la Santé Publique et le Lutte contre le SIDA (MSP) [Ministry for Public Health and the Fight against AIDS] and its Département des Projets et Programmes des Santés (DPPS) [Department of Programmes and Projects]. Under the DPPS, the two principal units to interact with are the Programme National Intégré Lutte contre le Paludisme (PNILP) [National Malaria Control Programme] and Contrôle des Maladies Tropicales Négligées (CTN) [Control of Neglected Tropical Diseases Programme]. There is no unit in the MSP that deals with Rift Valley Fever, which has not been a major issue in the country thus far.

Additional Burundian ministries with a role to play include: Ministère de l'Agriculture et de l'Élevage (MAE) [Ministry of Agriculture and Livestock], with a component that manages irrigation schemes, Genie Rural (GN); Ministère de l'Environnement, l'Aménagement du Territoire et l’Urbanisme (MEAU); [Ministry of Environment, Territory Management and City Planning]; and Ministère de l'Énergie et des Minéraux (MEM) [Ministry of Energy and Minerals], with the Département de l'Infrastructure (DI) [Department of Infrastructure], with responsibility for water supply.

Burundi has a large number of donors working in the health sector, many of whom provide not only financial support for health programmes but also technical assistance to the sector. These include multilaterals such as World Bank, African Development Bank and World Health Organisation; bilaterals, with USAID and GIZ playing a big role; and various health and welfare international NGOs, including CARE; Catholic Relief Services; CONCERN; Global Fund to Fight AIDS, Tuberculosis and Malaria; International Committee of Red Cross; Médecins sans Frontières; Population Services International; and World Vision.
A possible cross-sectoral unit that could be effective in engaging stakeholders for HEALTHY FUTURES is the GIZ-supported Programme Sectoriel Eau (PROSECEAU), which focuses on: urban and rural water supply and sanitation; strengthening the institutional and legal framework for integrated water resources management (IWRM); supporting implementation of water sector reform; and improving strategic sectoral planning [http://www.giz.de/en/worldwide/19214.html]. PROSECEAU includes representation at the ministerial level from MEAU and MEM, as well as representation at the directorate and implementation level from: Agence de l’Hydraulique Rurale; Département de Promotion de la Santé, de l’Hygiène et de l’Assainissement de Base; Direction Générale des Infrastructures Hydrauliques et de l’Assainissement; Direction Générale des Ressources en Eau et Assainissement ; Institut Géographique du Burundi ; Régie de Production et de Distribution d’Eau et d’Électricité; and Services Techniques Municipaux.

Figure 1: Stakeholder network map, Burundi

2. Kenya
The focal point for HEALTHY FUTURES engagement in Kenya is Ministry of Public Health and Sanitation (MOPHS), Department of Disease Control (DCD) and its sub-units: Division of Vector Borne Diseases (DVD); Division of Malaria Control (DMC); Division of Disease Surveillance and Response (DDSR); Division of Neglected Tropical Diseases (NTD); and Zoonotic Disease Unit (ZDU). Also important to engage are Ministry of Water and Irrigation (MOWI) and its sub-unit, Department of Irrigation.

Additional Government of Kenya entities are the Ministry of Agriculture’s Climate Change Unit (CCU) and the Ministry of Environment and Mineral Resources’ National Climate Change Secretariat (NCCS). Other relevant government stakeholders include Kenya Meteorological Department (KMD); National Environmental Management Authority (NEMA); Ministry of Livestock Development (MOL); Office of President, including National Disaster Operations Centre (NDOC) and Disaster Risk Management and Preparedness; and Prime Minister’s Office, Climate Change Coordination Unit (CCCU). Relevant research institutes are International Centre of Insect Physiology and Ecology (ICIPE); International Livestock Research Institute (ILRI); Kenya Agricultural Research Institute (KARI); and Kenya Medical Research Institute (KEMRI). NGOs and civil society actors include ActionAid; AMREF; Care International; International Union for the Conservation of Nature (IUCN); Kenya Climate Change Working Group (KCCWG), Forest Action Network; Oxfam; World Vision and World Wildlife Fund (WWF).

Possible cross-sectoral coordination bodies are:

- National Climate Change Activities Coordinating Committee: this is a subcommittee of the Inter-Ministerial Committee on Environment and includes members from a number of ministries, including Agriculture, Environment and Mineral Resources, Forestry and Wildlife, as well as universities and NGOs; and

- National Disaster Coordinating Committee (NDCC): this is a multi-sectoral body drawn from different ministries, including Health, Water and Irrigation, Environment and Mineral Resources, Agriculture, and Livestock Development. The NDCC focuses on coordinating responses to disasters.
Figure 2: Stakeholder network map, Kenya

3. Rwanda

Rwanda Biomedical Centre (RBC), which includes the Malaria and Other Parasitic Diseases Division (Mal & OPDD), the division that deals with both communicable and non-communicable diseases, is the central stakeholder for HEALTHY FUTURES. RBC is an autonomous agency affiliated to the Ministry of Health (MoH). Also essential to engage is the Rwanda Meteorological Centre, which is the entity that validates the meteorological data collected at Mal & OPDD. Another key stakeholder for the project is the Rwanda Environment Management Authority (REMA), under which the responsibility for climate change falls.

Other ministries with important functions related to HEALTHY FUTURES aims include Ministry of Natural Resources (MINIRENA), under which REMA falls; Ministry of Agriculture and Animal Resources (MINAGRI) and its sub-unit, Rwanda Agricultural Board (RAB), in terms of livestock, irrigation and land use change; Ministry of East African Community (MINEAC), which liaises with MoH and RBC, MINIRENA and REMA, MINAGRI and EAC headquarters; and Ministry of Disaster Management and Refugees (MIDIMAR), which works closely with MoH & RBC.

Academic and research institutions working with MoH on health issues include RBC’s Medical Research Centre (MRC), which has the mission to write grant proposals but does not undertake
research; National University of Rwanda (NUR), which is an autonomous institution, and its School of Public Health; and Kigali Institute of Science and Technology. Prominent donors to the health sector include: the Global Fund to Fight AIDS, Tuberculosis and Malaria; U.S. President’s Emergency Plan for AIDS Relief (PEPFAR); President’s Malaria Initiative USA (PMI), Department for International Development UK (DFID); Belgium Technical Cooperation; European Union; Swedish International Development Agency (SIDA); and UN agencies.

A possible inter-sectoral coordination mechanism could be a working group or task force established under the Mal & OPDD (the division selected by MoH to be the focal point for climate change in the health sector) and MoH’s Environmental Health Desk, both of which participate as representatives of MoH within the MINIRENA steering committee on climate change; other relevant ministries and REMA could also be included.

![Stakeholder network map, Rwanda](image_url)
4. Tanzania

The lead Tanzanian ministry for HEALTHY FUTURES engagement is the Ministry of Health and Social Welfare (MOHSW), which includes the section, Disease Surveillance and Epidemiology (DSE). Under DSE is Vector-borne Diseases, which includes: the National Malaria Control Programme (NMCP); Schistosomiasis Control Initiative (SCI); and Rift Valley Fever unit, which is a collaborative effort between MOHSW and Ministry of Livestock and Fisheries Development (MOLF). Another MOHSW key player is the Emergency Preparedness Unit (EPU), which serves as the ministry focal point for climate change. Within MOLF, there is a Zoonotic Diseases Unit (ZDU) that works closely with MOHSW’s Vector-borne Diseases (VBD) unit. Other relevant government stakeholders are: Ministry of Natural Resources and Tourism, under which there is National Environment Management Council (NEMC); Ministry of Water and Irrigation (MOW) and its sub-unit, Department of Irrigation (DI); Prime Minister’s Office (PMO), Disaster Management Department (DMD); Vice President’s Office (VPO), Department of Environment (DOE), which is the government focal point for climate change; and Tanzania Commission for Science and Technology (COSTECH). Relevant research institutes and organisational partners include Ardhi University, African Union Interafrican Bureau for Animal Resources (AU-IBAR), Food and Agriculture Organisation (FAO), Ifakara Health Institute, International Livestock Research Institute (ILRI), Sokoine University of Agriculture, University of Dar es Salaam and World Health Organisation (WHO). NGOs and civil society organisations include: CARE International; IUCN; WaterAid; World Vision; and World Wildlife Fund.

A possible intra-sectoral body that could be used to engage stakeholders for HEALTHY FUTURES is the Environmental Health and Sanitation Steering Committee, under the Ministry of Agriculture, Food Security and Co-operatives. This committee includes representatives drawn from various ministries and other organisations working in the area of health, environment and water. Donors and NGOs are also represented on this committee.
The focal point for HEALTHY FUTURES engagement is the Ministry of Health (MOH). The Department for Community Health (CH), which is a HEALTHY FUTURES partner organisation, is a key actor; its
sub-components include: Environmental Health; Public Health Emergencies Section; Vector Borne Disease Control; and Veterinary Public Health. The Department for Disease Control’s (DC) Epidemiology and Surveillance Division (ESD), with its health management information system and integrated disease surveillance system, is another key stakeholder; ESD’s goal is ‘to have a robust and sustainable system for forecasting, early detection and response to epidemics, emergencies and other priority diseases so as to improve disease prevention and public health response at all levels’ (http://health.go.ug/mohweb/). Responsibility for malaria and schistosomiasis falls under Malaria Control Programme and the Vector Control Division, all under MOH. The surveillance of these diseases is shared between ESD and these institutions. The Uganda Malaria Research Centre (MRC), which is administratively under MOH, also has a role to play.

Additional governmental stakeholders that are important to engage include the Ministry of Water and Environment’s (MWE) Directorate of Environmental Affairs (DEA), which includes the Climate Change Unit (CCU) and Meteorology; Directorate of Water Resources Management (DWRM); and Directorate of Water Development (DWD), which has responsibility for urban and rural drinking water supplies. Another MWE entity is the National Environmental Management Authority (NEMA), which is an autonomous agency. Further, the Ministry of Agriculture, Animal Industry and Fisheries (MAAIF) and its Department of Livestock Health and Entomology (DLHE) must be engaged for input on Rift Valley Fever. From the Office of Prime Minister (OPM), the Department of Relief, Disaster Preparedness and Management (DRDPM) should be included, as well as the National Emergency Coordination and Operations Centre. Lastly, the Parliamentary Forum on Climate Change is a relevant stakeholder.

Relevant NGOs, civil society organisations and donors include: AMREF, CARE, DFID, GIZ, Malaria Consortium, Oxfam, Red Cross, Save the Children, World Vision, WHO, Uganda Climate Action Network, UNICEF and World Vision.

Possible intra-sectoral coordination mechanisms are:

- **Public Private Partnership for Health (PPPH) Technical Working Group**: the Government of Uganda recognises the important role the private sector plays in national development and poverty eradication as well as the fact that the private health sector is a major partner in national health development (National Policy on Public Private Partnerships in Health, 2012). The PPPH Technical Working Group is convened by MOH and includes broad participation across both governmental and non-governmental entities. This is the result of an established mechanism that MoH has for bringing together health sector partners to ensure coordinated implementation through various multi-sectoral working groups which hold regular meetings (Health Sector Strategic and Investment Plan, 2010-2015, Section 7 on governance and coordination of the health sector in Uganda, p. 139);

- **Climate Change Policy Committee**: this multi-sectoral committee, chaired by the Permanent Secretary Ministry of Water and Environment, has 14 members drawn from governmental as well as private institutions. The coordinator of CCU serves as its secretary. MOH is actively represented on this committee; and

- **Inter-institutional Climate Change Technical Committee (ICCTC)**: the ICCTC is made up of climate change desk officers from various ministries. One of its main goals is ‘to bridge the gap between the Climate Change Unit and the respective institutions, facilitating exchange
of information’ ([http://ccu.go.ug](http://ccu.go.ug)). The Ministry of Health has a desk officer who links the ministry with the CCU, allowing for information exchanges between the health sector and other ministries.

Figure 5: Stakeholder network map, Uganda
Persons Consulted

BURUNDI

Baradahana, Dr. Lydwine. Directeur du Programme National Intégré de lutte contre le Paludisme, Ministère de la Santé Publique et de la lutte contre le SIDA.

Ndayishimiye, Dr Onésime. Directeur du Programme National Intégré de lutte contre les Maladies Tropicales Négligées et la Cécité, Ministère de la Santé Publique et de la lutte contre le SIDA.

Nsabiyumva, Dr. Lievin. USAID Malaria Programme.

Ntirampeba, Dr Protais. Directeur du Département de la Promotion de la Santé, Hygiène et Assainissement, Ministère de la Santé Publique et de Lutte contre le Sida.

KENYA

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RWANDA

Ngombwa, Achille. Water Resources Database Manager, Ministry of Natural Resources.

Uwimana, Dr. Aline. Rwanda Biomedical Centre.

Uwimana, Immaculée. Climate Change Mitigation Officer, REMA.

TANZANIA

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Patrick, Philipo. Acting Pangani Basin Water Officer, Pangani Basin Water Board.

Rwelengera, Barthasar. Environment Health Officer, Environmental Protection Unit and Vector Control Unit, Ministry of Health and Social Welfare.

Sadiki, Hamza. Director of Water Resources, Ministry of Water and Irrigation.

Timanywa, Jofta. Head of Environmental Management Unit, Tanzania Airports Authority. Previously with Community Forest Conservation Network of Tanzania (MJUMITA).

Tinuga, Dr. Deusdedit Kajojo. Epidemiologist, Ministry of Livestock Development and Fisheries.

UGANDA