Kintampo Health Research Centre

INDEPTH capacity building workshop
Our mission is to conduct public health research and develop health research capacity which will contribute to a reduction in ill-health and the achievement of the Millennium Development Goals for Africa’s most disadvantaged communities.

- To deliver high quality research that is relevant to healthcare priorities in Ghana in particular and across Africa.
Mandate

Policy

Program

Research
- New innovations
- Operational

Service delivery
Staff profile

• In the last 10 years has ranged between 300 and 500

• Currently about 350
  – Senior staff about 120 (70% are scientific staff)
  – Scientific staff
    • 80% are project staff 20% permanent staff of Ghana Health Service.
    • Mainly males
    • Mostly recruited at the bachelors level (no PhD ever recruited)
Capacity building in KHRC

• The training committee is responsible for making recommendations to management
  – Objective of TC is to identify and train staff on various disciplines relevant to KHRCs vision and mission
  – Identify gaps in specific disciplines and address them
How to apply

• Discuss with your project lead/dept head
• Write to TC with recommendation from PL/DH
• TC will meet and recommend based on
  – Competency for chosen area
  – Duration of service
  – Relevance to KHRC
  – Need for area of expertise
  – Contribution to KHRCs scientific development
  – Good conduct
Types of training

• **Formal**
  – Diploma
  – MSc
  – PhD

• **Informal**
  – short courses
  – In house training
So Far.....Long training

- Diploma
  - 2011 = 1
  - 2012 = 1 (Hospitality management)
  - 2013 = 1 (Laboratory technician)

- Masters
  - 2011 = 6 (public health -3, immunology -1, microbiology -1, clinical trials -1)
  - 2012 = 4 (Pharmacology therapeutics =1, Biochem=1, immunology=1, MPH=1,
  - 2013 = 6 (clinical microbiology -1, entomology -1, Pop studies -1, Social Science/sociology -2, Biostatistics -1, Biostats/epid =1)
  - 2014 = 7 (1 Health Economic, 1 social science, 1 data management, 1 molecular bio, 3 others
  - 2015 = 4 (1 Molecular Biology, 2 Population studies, 1 MPH,)
Long training

- **PhD**
  - 2011 = 0
  - 2012 = 2
  - 2013 = 1
  - 2014 = 5
    - 1 PH
    - 2 Demography
    - 1 Molecular Bio
    - 1 Immunology
    - 1 Epidemiology
  - 2015
    - 1 Epidemiology
    - 1 Population studies
Short term training

• Small Grants approach.
  – At initiative of management
  – Aim is to develop capacity among young scientist
  – Yearly calls are made
  – Top ten proposals are selected by 3 independent reviewers
  – Award of 2000USD to implement proposals
  – So far twenty proposals are sponsored
  – About 80% of competed projects are published
Other short term training

• KHRC Scientific and technical meetings where scientific proposal writing is discussed
• Working groups on proposal development for existing and new areas
• Mentorship: proposals write up and review
• External workshop
  – Good Clinical Practice
  – Immunology
  – Statistics
  – Demography
  – Others
Funding

• No core fund for training
• Depends on projects
  – Overheads
  – Some projects associated with training though few
• Look out for calls
• INDEPTH has been very supportive
## Training Required

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<tr>
<th>Area</th>
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<tr>
<td>Statistics</td>
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<td>Virology</td>
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<td>Epidemiology</td>
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Training others

• Ghana Health Service staff

• Training Centre for students
  – PhD thesis
  – Masters thesis
  – Studentship

• Sabbatical internship

• Medical and Dental Council Accredited for Continuous Professional Development.
Collaborating Training Institutions

- University of Ghana
  - College of Health Sciences – SPH, UGMS
- Kwame Nkrumah University of Science and Technology
- Institute of Psychiatry, UK
- London School of Hygiene and Tropical Medicine
- Michigan University
- Columbia University
- Georgetown University
- Global Health Network, Oxford, UK
KDSS data review with Dr. Mbacke,
16th July 2013
Key issues

• Data collection and quality does not match scientific outputs
  – publications
  – scientific briefs
  – Communication: Policy briefs, advocacy, etc
  – Annual report
  – hypothesis generation

• Reason:
  – ?Critical analysis,
  – ?statisticians – Post docs
  – ?Competing interests
  – ?Inadequate critical mass – no core funding.
  – ?Use of modern technologies
    • Electronic data capture
    • Complex analytical tools (Fox Pro to SQL)
Key issues

- Bonding
- Completion of course
  - Must complete in time given
  - Must submit reports
  - Must submit certificate for KHRC to be recognized at the next level (RO, RF etc)
- Capital intensive
- Too long a time
  - From Recruitment - MSc – PhD: Almost 10 years
  - ?? Long distance studies
- Attrition
Thank you