



THE NATIONAL HIV AND AIDS RESEARCH AGENDA

2020/21-2024/25



UGANDA AIDS COMMISSION
SEPTEMBER 2021



The development and publication of this national HIV and AIDS research agenda was made possible by financial support from the Government of Uganda, UNAIDS-Uganda and The Global Fund to Fight AIDS, Tuberculosis and Malaria.

Published by:

Uganda AIDS Commission

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Preferred citation:

Uganda National HIV and AIDS Research Agenda 2020/21-2024/25; Uganda AIDS Commission; Kampala, Uganda; September 2021.

Available from:

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Foreword

The Uganda AIDS Commission (UAC) presents the National HIV and AIDS Research Agenda for the period 2020-2025. The agenda serves as a guide to the implementation of research at both national and sub-national levels to support the National HIV and AIDS Strategy and attainment of the goals of the Presidential Fast Track Initiative (PFTI).

For more than 30 years, Ugandan researchers have contributed to the production of groundbreaking HIV research outputs that enabled the development and delivery of safe, effective antiretroviral therapy to extend the lifespan of people with HIV, and the design and implementation of effective interventions to prevent HIV transmission and acquisition. Nonetheless, new HIV infections continue to occur at rates that are incompatible with ending the pandemic. UAC will continue to coordinate basic, clinical, and translational research to develop cutting edge solutions for the ongoing challenges in the HIV and AIDS response. This research agenda outlines a robust agenda for prevention, treatment, social support and protection, and health systems strengthening, to enable achievement of the goals of the National HIV and AIDS Strategic Plan (NSP) and PFTI. Implementation of the agenda will require improved collaboration and partnerships that effectively address the challenges and move us closer to ending the HIV pandemic and improving health outcomes for all persons with or at risk of HIV infection.

With sincere appreciation,

Dr. Eddie Mukooyo Sefuluya,

Chairman.



Acknowledgements

The development of the National HIV and AIDS Research Agenda was enabled by the tremendous support provided by the stakeholders of the national HIV response. We thank Dr. Dan Byamukama, who coordinated the development of the research agenda.

We thank the members of the research agenda Task Force for their oversight, guidance, and feedback during the development of the research agenda namely: Dr. Sam Okware (UNHRO), Prof. Pontiano Kaleebu (UVRI), Dr. Joshua Musinguzi (MoH), Dr. Stella Alamo (CDC), Dr. Simon Kasasa (MaKSPH), Dr. Aggrey Mukose (MaKSPH), Dr. Lynn Atuyambe (MaKSPH), Dr. Andrew Kambugu (IDI), Dr. Lydia Mungherera (Maama's Club), Dr. Denis Muhangi (Makerere University), Ms. Rosemary Kindyomunda (UNFPA), Dr. Francis Ssali (JCRC), Dr. Flavia Matovu (MU-JHU), Dr. Patrick Ongol (UNCST), and Dr. Zepher Karyabakabo (UAC).

In addition, we are very grateful for the contributions and input that we received from over 120 stakeholders (see Page 24).

The development of the research agenda was conducted by a team of independent consultants comprised of Dr. Esther Kabaswaga (Lead Consultant), and Dr. Simon Walusimbi (Associate Consultant), assisted by Ms. Caroline Otike.

Funding for developing the National HIV and AIDS Research Agenda was provided by UNAIDS-Uganda. Funding for printing the research agenda was provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Thank you all for your contributions.

Dr. Nelson Musoba,

Director General.



List of Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
ARVs	Antiretrovirals
CDC	Center for Disease Control and Prevention
CHNRI	Child Health and Nutrition Research Initiative
CSW	Commercial Sex Workers
DREAMS	Determined Resilient Empowered AIDS-Free Mentored and Safe Women
DSDM	Differentiated Service Delivery Model
EDCPT	European and Developing Countries Clinical Trials Partnership
EMTCT	Elimination of Mother to Child Transmission of HIV
HIV	Human Immunodeficiency Virus
IAS	International AIDS Society
IDI	Infectious Diseases Institute
JCRC	Joint Clinical Research Centre
KP	Key Populations
MaKCHS	Makerere University College of Health Sciences
MaKCHUSS	Makerere University College of Humanities and Social Sciences
MaKSPH	Makerere University School of Public Health
MSM	Men who have sex with men
MUJHU	Makerere University Johns Hopkins University Research Collaboration
MUST	Mbarara University of Science and Technology
NADIC	National AIDS Documentation and Information Centre
NSP	National Strategic Plan
PFTI	The Presidential Fast Track Initiative to End AIDS
PMTCT	Prevention of Mother to Child Transmission of HIV
SMC	Safe Male Circumcision
UAC	Uganda AIDS Commission
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNCST	Uganda National Council for Science and Technology
UNHRO	Uganda National Health Research Organization
UVRI	Uganda Virus Research Institute
WHO	World Health Organization



Chapter 1: Introduction

1.1 HIV and AIDS Situation in Uganda

Uganda is committed to ending AIDS as a Public Health threat by 2030, as evidenced by the launch in 2017 of the Presidential Fast Track Initiative (PTFI) on ending AIDS as a public health threat in Uganda, and the newly developed National HIV and AIDS Strategic Plan (NSP) for 2020/2021–2024/2025, whose stated goal is to increase productivity, inclusiveness, and well-being of the Ugandan population, through ending the AIDS epidemic by 2030.

During the last two national strategic plan periods, specifically since 2010, there has been a 44% reduction in new HIV infections and a 58% reduction in annual AIDS related deaths. Further, Uganda achieved the 90–90–90 HIV treatment targets by 2020. Based on this experience, the country has set new 95–95–95 HIV treatment targets to be achieved by 2025.

However, achievement of the NSP goals and targets could easily be derailed by several existing and unforeseen challenges. These include, among others, an increase in engagement in higher risk sexual behavior, including multiple sexual partners, low condom use among those engaging in higher risk sex, and a decline in the age of sexual debut. In addition, there is stagnation in levels of comprehensive HIV knowledge. Coupled to this, is the long-standing challenge of widespread self-stigma, low

uptake of couples testing, and significant proportions of men living with HIV, who do not know their HIV status. Furthermore, behavior change efforts have not been sufficiently implemented to scale to produce significant and sustainable declines in new HIV infections. More recently (since March 2020), Uganda like the rest of the world has been adversely impacted by the COVID-19 pandemic, which poses a risk of permanently altering established effective models of HIV service delivery.

Therefore, if Uganda is to achieve long term sustainable HIV epidemic control, efforts are required to identify implementation gaps in the current HIV response that would hinder the attainment of the PFTI and NSP goals. Several research questions therefore need to be answered to guide effective policy-making and programming to ensure attainment of the national 2030 commitment. In 2019, the government of Uganda established a National Research and Innovation fund worth 500 billion Ugandan shillings¹. To guide HIV research in Uganda, the **National HIV/AIDS Research Agenda** will facilitate the identification of the priority HIV research areas for this fund and other related research funding programs.

¹The National Research and Innovation Programme (NRIP) Framework

1.2. The National HIV Response

The number of people living with HIV in Uganda is estimated to be 1,460,000, of which 89% know their HIV status². Of all persons living with HIV who know their status, 94% are on treatment, of which 92% are virally suppressed. HIV prevalence is estimated to be 7.1% in women versus 4.3% in men, 2.8% among young women versus 1.1% among young men. Among certain population groups, particularly key populations (KPs), HIV prevalence is estimated to be significantly higher, ranging from 13.7% among MSM and 17% among people who inject drugs to as high as 22%-29% among fisherfolk and 31%-37% among sex workers. The burden of HIV in Uganda is particularly high in the Central, Western and Southwestern regions compared to the Karamoja, and West Nile regions. For example, HIV prevalence is estimated at 3.1% in West Nile and 8.0% in the Central region. Of note, the prevalence of HIV has declined from 6.6% in 2010 to 6.1% in 2015, and then to 5.6% in December 2019. Similarly, HIV incidence (per 1,000) has reduced from 3.19 in 2010 to 1.93 in 2015, and then down to 1.31 in 2019. Consistent declines have also been achieved concerning AIDS-related deaths to approximately 21,000 in 2019 versus 29,000 in 2015, and 53,000 in 2010. However, on account of their lower ART coverage and poor health-seeking behavior, men are more disproportionately affected by AIDS related death. Annual new HIV infections in Uganda remains significantly higher than all-cause mortality among people living with HIV implying there is still a net increase in HIV infections and that HIV epidemic control is not yet attained.

The National response to the HIV/AIDS epidemic in Uganda is currently guided by two major frameworks namely; The Presidential Fast Track Initiative (PFTI) on ending AIDS as a public health threat in Uganda by 2030 [1], and the newly formulated National HIV and AIDS Strategic Plan (NSP) for 2020/2021–2024/2025 [2]. The PFTI, which was launched in June 2017, emphasizes: (1) engagement of men in HIV prevention and closing the tap on new infections particularly among adolescent girls and young women; (2) consolidating progress on elimination of mother-to-child transmission of HIV; (3) accelerating implementation of Test and Treat particularly among men and young people; (4) ensuring financial sustainability for the HIV and AIDS response; and (5) ensuring institutional effectiveness for a well-coordinated multi-sectoral response. The NSP for the period 2020/2021–2024/2025 focuses on the following areas: (1) rolling out of combination HIV prevention interventions consisting of behavioral, biomedical and structural components, tailored to population groups based on their characteristics; (2) reaching the 95–95–95 HIV treatment targets by 2025 for all population age and sex groups and KPs; (3) consolidating EMTCT gains and closing emerging gaps; (4) supporting social enablers for equitable uptake of HIV prevention and care; (5) removing gender and human rights barriers to HIV prevention and care services; and (6) improving systems and maximizing efficiency for optimum service delivery.

1.3. Overview on HIV and AIDS Research in Uganda

Organization of research in Uganda

Uganda has an outstanding reputation in HIV research including ground-breaking studies in PMTCT, voluntary medical male circumcision, strategic use of ARVs for prevention and studies on the development of microbicides. Over the years, the country has developed an excellent ecosystem of research institutions with particular focus on HIV. However, a major gap in the National HIV/AIDS response has been the absence of a National HIV Research Agenda that clearly outlines the priority research questions to inform policy

²Uganda Population based HIV impact assessment (UPHIA), 2020



and practice in the country. Of the 120 research studies conducted in the past NSP period (2015-2020), 63% were on care and treatment and 31% on HIV prevention. This left a gap in studies to inform evidence-based policies around social support and systems strengthening. To address this gap, the NSP for the period 2020/2021–2024/2025 dedicated a section to Monitoring and Evaluation and Research. The new NSP includes a specific strategic objective to promote information sharing and utilization among producers and users of HIV and AIDS data and information at all levels. Under this strategic objective, the HIV community will develop and disseminate the national research agenda to guide

research for the HIV response, and commission operations research that is guided by the agenda to improve HIV and AIDS programming. The development of the National HIV Research Agenda is a component of the broad National Research Agenda over a period of five years and aims to: (1) consolidate and synthesize HIV and AIDS research to make it more informative and useful; (2) create a usable national HIV dataset and institute a sustainable mechanism for regularly updating this dataset; (3) support implementation of HIV research studies related to social support and systems strengthening; and (4) aggregate HIV and AIDS research products into a centralized repository.

1.4. Contextual Issues of Relevance to the National HIV/AIDS Research Agenda

Setting up a national research agenda has been found to stimulate and direct research around priority research questions [3]. This in turn impacts the public health response to the disease in question through guideline and policy development. At the global level, the HIV research agenda during the past five years has focused on specific populations and highly specialized topics. Thus, the current global HIV research agenda is focused on children and adolescents living with HIV [4, 5], women who use or inject drugs [6], and sex workers- including women, men, and transgender people [7]. The specialized priority research topics include HIV cure [8], HIV-associated tuberculosis [9], oral health and disease in HIV [10], and post-exposure prophylaxis for HIV [11].

The largest funder for HIV/AIDS research globally is the US National Institutes of Health (NIH) [12]. The NIH HIV research priorities between 2021 and 2025 focus on: HIV-associated co-morbidities, coinfections, and complications; reducing the HIV incidence through prevention technologies such as vaccines; pre-exposure prophylaxis, and treatment as prevention; development of next generation HIV therapies that are less toxic and long-lasting; and research towards an HIV cure [12]. This research agenda is interwoven with

cross-cutting areas comprising basic virology and immunology, behavioral and social sciences, epidemiology, health disparities, information dissemination, implementation science, research training, infrastructure and capacity building. The above research priorities overlap with those of the European and Developing Countries Clinical Trials Partnership (EDCTP), another major funder of HIV, TB, and Malaria research on the African continent [13].

Publications of a national HIV research agenda developed by African countries are limited. Our literature review yielded a national HIV research agenda for only Kenya and Zimbabwe [14, 15]. Of note, no research agenda was available for South Africa, a leader of HIV research on the African continent. Perhaps because of the absence of a national HIV research agenda, and the resultant limited funding, a lot of the HIV research on the continent has been led by North America and Europe [16]. However, stakeholders from the continent identified research priorities to inform specific policy initiatives such as the “Test and Treat” policy - concerning treatment of all people with HIV, irrespective of disease stage or CD4 cell count [17, 18].



This research agenda was developed to identify and inform strategies for promoting timely uptake of HIV treatment, retention in care, and sustained viral suppression and addressing bottlenecks to the implementation of the Test and Treat policy. Therefore, the national HIV research agenda is upstream and is focused on implementation and public health policy.

In developing the national HIV research agenda, the commonly used approach is the Child Health and Nutrition Research Initiative (CHNRI) methodology [19]. The CHNRI methodology involves five phases namely: a definition of the scope of research by an expert working group, a survey to collect priority

research questions, consolidation of the obtained questions into a collated list, scoring of the collated list of questions against predefined criteria, and reviewing the final questions/themes from the scoring process by subject experts to account for existing policies, systematic reviews, published literature, and planned and ongoing research.

A key challenge for implementing a national HIV research agenda is poor coordination, leading to neglect of important research studies [20]. Other challenges include ethical and legal uncertainties, and absence of financial and professional incentives to encourage investigators to undertake proposed research [21].

1.5. Synopsis of the Previous (2015-2020) HIV/AIDS Research Agenda

The 2015-2020 HIV/AIDS research agenda was developed with three main objectives, namely, to: (1) document what is known about HIV prevention and care, gender-based violence; stigma and discrimination, (2) identify gaps in knowledge about the HIV/AIDS epidemic in Uganda, and (3) determine HIV research priorities that need to be implemented to improve HIV service delivery. The following research priorities were identified by thematic area:

HIV Prevention: (1) Evaluation of the impact of the national PMTCT programs; (2) Evaluation of quality of safe male circumcision (SMC) (service, procedure, adverse events, new technologies, counseling and messaging); (3) Evaluation of barriers to uptake of SMC; (4) Evaluation of post SMC behavior dynamics; (5) Determining population size estimates of key populations [including rapid assessment of magnitude of injection drug use (IDU) in Kampala]; (6) Modeling of the HIV epidemic for planning and budgeting.

HIV Care and Treatment: (1) Understanding the

barriers and motivators for staying within the HIV care cascade (including linkage and retention) for the general population and different subgroups including key populations, adolescents, children, and pregnant & lactating mothers; (2) Economic evaluation of models that promote linkage and retention into care for the general population and subgroups including key populations, adolescents, children, and pregnant & lactating mothers; (3) Economic evaluation of point-of-care testing versus facility-based testing on entry and retention into care within a program setting; (4) Evaluation of interventions to mitigate the impact of mental illness on patient adherence, retention and patient coping.

Gender-based Violence: (1) Research on forms and patterns of violence, magnitude, risk factors and association to HIV and other consequences of violence against women & men and some key populations (CSWs and MSM).



1.6. Purpose and Objectives of the National HIV and AIDS Research Agenda

The purpose of the national HIV and AIDS research agenda is to guide the implementation of research at both national and sub-national levels to support the National HIV and AIDS Strategy and facilitate attainment of the PFTI goals. The objectives of the national HIV and AIDS research agenda are:

- To articulate HIV and AIDS research priorities for the period 2020/2021–2024/2025
- To serve as a national framework to guide HIV research in Uganda
- To facilitate the coordination of HIV and AIDS research among stakeholders
- To serve as a tool for resource allocation and mobilization for HIV research in Uganda

1.7. Target audience

The primary audience for the National HIV and AIDS Research Agenda is the individuals and organizations conducting research on HIV and AIDS in Uganda. Therefore, the research agenda is useful for academic and research organizations, research students, ethics committees, and both national and international donor agencies. The following entities should particularly find the research agenda useful: Ministry of Health, Ministry of Science, Technology, and Innovation, Uganda National Council for Science and Technology, all Public and Private Universities, and The Uganda National Academy of Sciences.

Chapter 2: Process of Development of the Research Agenda

2.1. Methodology

The development of the National HIV and AIDS Research Agenda was based on the well-established Child Health and Nutrition Research Initiative (CHNRI) approach for setting health research priorities [19]. This process is summarized in **Figure 1** below. **First**, an expert group (Appendix 1) comprised of researchers, programmers, implementers, donors, civil society, key affected populations and community representatives, was convened to oversee and guide the development of the research agenda. The expert group provided guidance on the concepts, scope, and methodology for development of the research agenda. **Secondly**, a questionnaire survey was administered widely to collect priority research questions. The design of the questionnaire was based on the National Strategic Plan (NSP). The themes in the NSP formed the overarching topics for the intended research, while the desired impact and outcomes under each theme formed more specific topics for research in each area. A combination of online surveys (via email), and one-on-one expert interviews, was employed to administer the questionnaire. Respondents were identified on the recommendation of the expert group

and from the list of the individuals and organizations who participated in the development of the NSP and the PFTI (as indicated in the appendix sections of the two documents). Respondents were asked to tag their questions with the relevant research theme and topics. **Thirdly**, the collected questions were analyzed and consolidated into a collated list per theme. This was achieved by reading and re-reading the questions from the various respondents in Microsoft Excel. **Fourthly**, an extensive document and literature review was conducted during which ongoing and planned research in the country was identified. Questions identified from the third and fourth steps were combined and subjected to prioritization based on the prioritization matrix shown in **Table 1**. In the final **fifth** step, the prioritized list of questions was presented at virtual validation workshops by thematic area. Proposed improvements and additions from the workshops were made, and the revised questions were presented to another validation workshop combining all the thematic areas. Finally, the developed product was presented to the task force for review and approval.

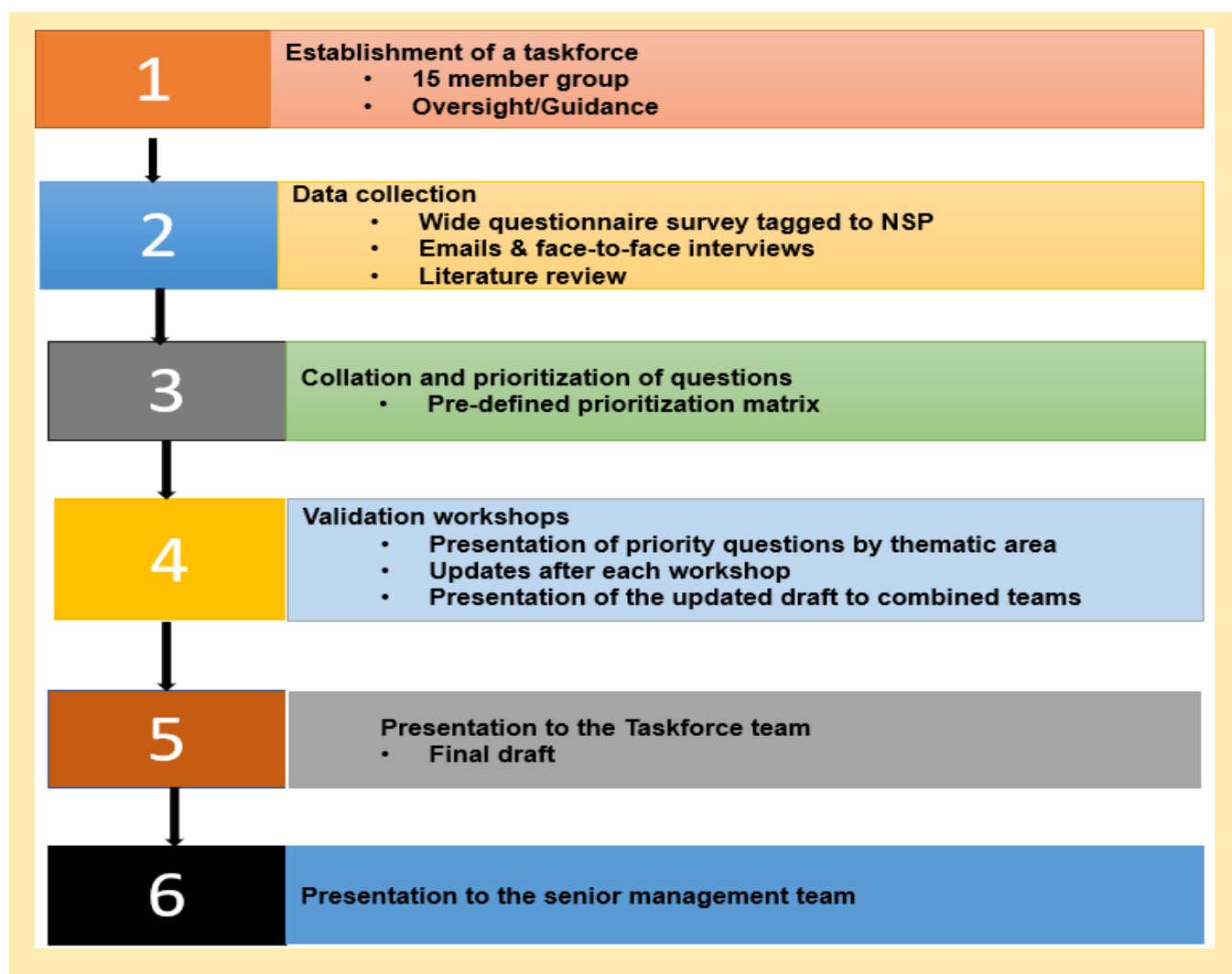


Figure 1. General Methodology for Developing the Research Agenda.

The prioritization matrix was composed of five criteria namely, answerability, relevance, maximum potential for disease burden reduction, deliverability and effect on equity. Each of the criteria had specific questions, as summarized in **Table 1**:



Table 1. Prioritization Matrix

<p>Answerability.</p> <ul style="list-style-type: none"> ● Will the research idea likely raise more ethical concerns than the others? ● Is the research question well framed with well-defined end points? ● Is there in-country capacity to conduct the proposed research idea? ● Will the research results be likely accepted by the general public?
<p>Relevance</p> <ul style="list-style-type: none"> ● Will the proposed research idea likely generate truly novel and non-existing knowledge? ● Will the research idea be more likely to lead to publications in high-impact journals? ● Will the research idea be more likely to generate knowledge that will be translated into health interventions? ● Will the research have greater likelihood of generating patents or other potentially lucrative products, thus promising greater financial return on investments, regardless of their impact on disease burden? ● Is the proposed research idea more likely to be aligned with broader government initiatives than the others?
<p>Maximum potential for disease burden reduction</p> <ul style="list-style-type: none"> ● Will the proposed research idea be more likely to generate truly effective health interventions? ● Does the proposed research idea have theoretical potential to reduce much larger portions of the existing disease burden than the others? ● Will the research idea have more additional positive effects through community involvement?
<p>Deliverability</p> <ul style="list-style-type: none"> ● Will the translation or implementation of the knowledge generated through the proposed research idea be affordable? ● Will the impact or health interventions of the proposed research idea be sustainable? ● Does the research idea require more funding than the others? ● Will the research idea be more likely to receive funding support than the others?
<p>Effect on equity</p> <ul style="list-style-type: none"> ● Will the research idea lead to health interventions that will only be accessible to the privileged in the society, thus increasing inequity



2.2. Management of the Research Agenda Development Process

The process of developing this National HIV and AIDS Research Agenda was consultative and participatory, and was supervised and coordinated by UAC. A multi-sectoral national taskforce was constituted to oversee and guide the UAC secretariat and supported the external consultants undertaking the development of the national research agenda. The taskforce provided technical input and reviewed the concepts and methodology for the development of the research agenda. The consultant updated the drafts of the agenda by incorporating all the feedback received from reviewers to produce a final draft. A final draft was presented to the UAC board for approval.

Chapter 3: Results

A total of 396 questions were collected through the questionnaire survey and the literature review. After collation and prioritization, 90 questions were identified as priority. This is summarized in **Figure 2** below:

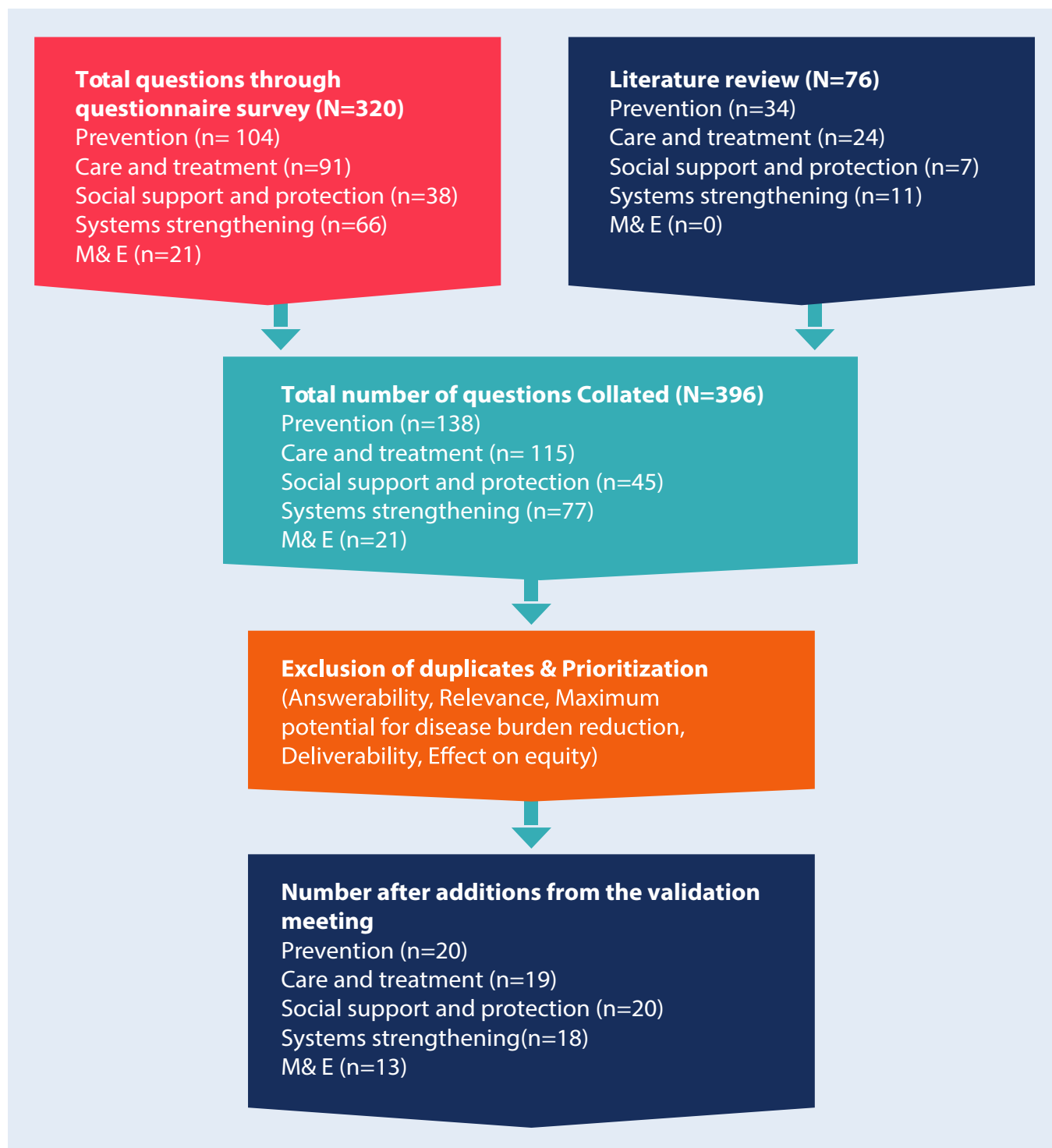


Figure 2. A Flow Diagram of Identification of Priority Research Questions.



3.1. Priority Topics under HIV Prevention

Based on the NSP, three main topics were identified under the HIV prevention theme. The three topics were: (1) increased adoption of safer sexual behavior and reduction in high-risk behaviors among key populations, priority population groups and the general population, (2) increased coverage and utilization of biomedical HIV prevention interventions delivered as part of integrated health care services scale-up, and (3) mitigation of underlying sociocultural, gender and other factors that drive the HIV epidemic. Overall, **138 questions** were obtained under the HIV prevention theme, from which **20 were generated** after collation (**Table 2**).

Table 2: Research Questions - HIV Prevention Theme

No	Research topic or question
<p>Increased adoption of safer sexual behavior and reduction in high-risk behaviors among key populations, priority population groups and the general population.</p>	
<p>1</p>	<p>Behavioral prevention:</p> <ol style="list-style-type: none"> 1. What new behavioral and social-structural interventions are required to effectively prevent HIV transmission [targeting key and vulnerable populations]? 2. In what ways can digital health technologies [including social media platforms] be utilized to improve the national HIV prevention and care response? 3. Evaluation studies on the impact of the following strategies for promoting adoption of safer sexual behaviors and HIV prevention: <ol style="list-style-type: none"> (i) Engagement of male champions (ii) Engagement of community/religious leaders (iii) Peer-to-peer support (iv) Targeted HIV prevention programs, e.g., DREAMS (v) Option B+/EID (vi) Risk reduction behaviors among virally suppressed PLHIV (vii) HIV self-testing, assisted partner notification, and linkage to care and prevention services (viii) Social network strategies among key populations (ix) ABC HIV prevention strategy
<p>Increased coverage and utilization of biomedical HIV prevention interventions delivered as part of integrated health care services scale-up</p>	



<p>2</p>	<p>Implementation of new HIV prevention technologies:</p> <ol style="list-style-type: none"> 1. Studies to document best practices, challenges, and the effectiveness of needle and syringe exchange programs and medically assisted therapy for HIV prevention 2. Evaluation of the effectiveness of integrating harm reduction services with ART and PrEP for people who use drugs 3. Studies to determine the effectiveness of using peers in the needle and syringe exchange program for HIV prevention 4. Studies to increase prevention coverage among key populations and their sexual partners 5. Studies on HIV vaccine development [including clinical trials of HIV vaccines, implementation research for the rapid delivery and uptake of HIV vaccines] 6. Effectiveness of differentiated service delivery strategies including peer-delivered combination prevention (HIV self-testing, ART, PrEP, needle and syringe exchange, and condoms) 7. Studies on new ARV formulations and methods [e.g., injectables, implants, and vaginal rings] for HIV pre-exposure and post-exposure prophylaxis
<p>3</p>	<p>Program evaluation and optimization:</p> <ol style="list-style-type: none"> 1. What strategies or interventions are required to improve access and uptake of EMTCT services (HIV testing in infants and children and optimizing the PMTCT cascade) 2. Studies on strategies/interventions to optimize early infant HIV diagnosis. 3. Evaluation on the demand, availability, and accessibility of harm reduction programmes 4. Studies for novel and effective interventions for STI prevention programmes (including vaccine preventable infections such as HPV) targeting, KPs, PLHIV, adolescents' girls and young women, and prisoners 5. Studies on strategies/interventions to increase uptake of PrEP and contraception for prevention of HIV and unintended pregnancies 6. studies on the incentives and disincentives for improved uptake of HIV prevention interventions e.g., safe male circumcision 7. What implementation strategies could improve systematic uptake of evidence-based prevention, care, and treatment interventions including medically assisted therapy, in diverse settings and populations [islands, refugee settings, prisons, and cross-border/migrant populations] 8. Economic evaluations covering the whole range of HIV prevention interventions
<p>Mitigation of underlying sociocultural, gender and other factors that drive the HIV epidemic.</p>	
<p>4</p>	<p>Socio-cultural drivers of HIV:</p> <ol style="list-style-type: none"> 1. Studies to understand how new social structural dynamics fuel the HIV epidemic across diverse populations and settings 2. Studies on socio-cultural, economic, legal and gender factors [including GBV] that continue to drive the HIV epidemic in Uganda and influence personal health choices

3.2. Priority Topics under Care and Treatment

Based on the NSP, five main topics were identified under the HIV care and treatment. The five topics were: (1) linkage to antiretroviral therapy; (2) retention on antiretroviral therapy; (3) adherence to antiretroviral therapy; (4) viral load suppression and; (5) integration of HIV care and treatment with other health services. Overall, **115 questions** were obtained under the care and treatment theme, from which **19 were generated** after collation (**Table 3**).

Table 3: Research Questions - HIV Care and Treatment Theme

No	Research topic or question
Linkage to antiretroviral therapy	
1	<p>Optimizing effective linkage to care:</p> <ol style="list-style-type: none"> 1. Novel interventions to enable timely and effective linkage to care and adherence to HIV treatment [e.g., reminder cues, point-of-care viral load testing, and tailored feedback on adherence to ART, conditional economic incentives, digital Health] 2. Analysis, evaluations, of gaps in the HIV care cascade with focus on linkage for key populations
Retention on antiretroviral therapy	
2	<p>Optimizing retention in HIV care:</p> <ol style="list-style-type: none"> 1. What people-centered strategies or interventions are required to improve access, uptake of, and retention in HIV care, and the factors that impact their success? 2. Studies on the effectiveness of economic incentives to improve retention and adherence on ART [focusing on adolescents and key populations]
Adherence to antiretroviral therapy;	
3	<p>Adherence and ARV resistance:</p> <ol style="list-style-type: none"> 1. Epidemiologic and treatment outcome studies on HIV-associated comorbidities and co-infections [TB, diabetes, cardiovascular diseases, cancers, mental illness, substance abuse] 2. Toxicity studies of ART regimens, including their implications for ageing populations 3. Studies on treatment fatigue resulting from long term ARV treatment in specific population groups 4. Genotypic studies to track and prevent development of HIV drug resistance [with focus on children and other priority population groups] 5. Studies on the effectiveness of psychosocial and family support strategies or interventions to improve individual and programmatic outcomes [including online versus face-to-face counselling models]
Viral load suppression	



4	<p>Impact of comorbidities, coinfections, and delivery models on HIV Viral load:</p> <ol style="list-style-type: none"> 1. Studies on the effect of neglected tropical diseases on HIV treatment outcomes 2. Studies on new service delivery models to improve individual and programmatic outcomes along the HIV care cascade, including peer interventions, point-of-care diagnostics and DSD models 3. Studies to further understand HIV-associated comorbidities, coinfections, and complications and their impacts on HIV treatment outcomes 4. Studies on novel diagnostics and treatment therapies or strategies that could be more effective in suppressing viral replication
5	<p>Impact of COVID and other health emergencies:</p> <ol style="list-style-type: none"> 1. Studies to evaluate and document the impacts of COVID and other health emergencies on HIV services uptake and delivery among various population groups and communities
<p>Integration of HIV care and treatment with other health services</p>	
6	<p>Program optimization:</p> <ol style="list-style-type: none"> 1. Studies on the facilitators and barriers to the integration of HIV care and treatment services with other health services 2. Evaluation studies on DSDM among key and vulnerable populations [MSM, transgender persons, sex workers, and drug users, and fishing communities] 3. New ways [models] to make HIV services more client-centered; including the preferred health services among KPs (MSM, transgender, sex workers, adolescents, drug users, prisoners and fishing communities) 4. Assessments to determine the inclusiveness of prevention and treatment interventions for all populations affected by HIV 5. Economic evaluations covering the whole range of HIV care and treatment interventions

3.3. Priority Topics under Social Support and Protection.

Based on the NSP, five main topics were identified under the Social Support and Protection theme. The five topics were: (1) minimizing HIV related stigma and discrimination; (2) reducing socioeconomic vulnerability for people living with HIV and other vulnerable groups; (3) reducing gender-based violence and discrimination; (4) improving child protection and reducing violence against children; (5) improving the legal and policy framework on HIV and AIDS to ensure inclusive access by all people living with HIV, key populations and other vulnerable populations. Overall, **45 questions** were obtained, from which **20 were generated** after collation (**Table 4**).



Table 4: Research Questions –Social Support and Protection

No	Research topic or questions
Minimizing HIV related stigma and discrimination	
1	<p>Describing HIV related stigma</p> <ol style="list-style-type: none"> 1. Analysis of trends and patterns of HIV-related stigma among: (i) children born with/affected by HIV; (ii) young people; (iii) key and priority populations; (iv) religious leaders 2. Description and analysis of the geographical variation in HIV related stigma 3. Determination of the level of internalized stigma among PLWH 4. Impacts of HIV related stigma on the livelihoods of PLWH e.g., job loss, aborted marriage intentions
2	<p>Stigma reduction interventions</p> <ol style="list-style-type: none"> 1. What novel stigma-reduction interventions are required to improve the lives of PLWH [optimize HIV-related outcomes] across various population age-groups 2. Design and evaluation of models for integrated service delivery to reduce HIV related stigma and discrimination 3. Description and analysis of the factors that fuel HIV related stigma at community level 4. Description and analysis of the negative impacts of legislation and policies on the national HIV response
Reducing socio-economic vulnerability for people living with HIV and other vulnerable groups	
3	<p>Workable vulnerability reduction interventions</p> <ol style="list-style-type: none"> 1. Effect of socio-structural interventions [livelihood interventions, cash grants, material supply], on the mitigation of the social forces that influence the emergence and spread of HIV according to the regions of the country 2. Studies to support the design of effective socio-economic intervention packages for HIV prevention 3. Analysis and estimates of the out-of-pocket expenditures incurred by individuals living with HIV as they seek for care 4. Studies to inform the development of a business continuity plan for HIV programs for the sustainability of HIV services
Reducing gender-based violence and discrimination	
4	<p>Strengthening the response to GBV and HIV</p> <ol style="list-style-type: none"> 1. Economic evaluation studies on the impact of GBV in the context of HIV prevention 2. Types and consequences of GBV and discrimination experienced by children, female sex workers, MSM, and transgender women 3. Evidence-based strategies to increase access to emergency ARVs, contraceptives, and counseling services for victims of GBV



Improving child protection and reducing violence against children	
5	<p>Effectiveness of child protection systems</p> <ol style="list-style-type: none"> 1. Evaluations on the effectiveness of the existing child protection systems for reducing violence against children and intimate partner violence (IPV) among adolescent girls 2. Longitudinal studies to track outcomes of HIV prevention and treatment of adolescents transitioning into adulthood, including cultural vulnerability among adolescent boys
Improving the legal and policy framework on HIV and AIDS to ensure inclusive access by all people living with HIV, key populations and other vulnerable populations	
6	<p>Equity and social inclusion</p> <ol style="list-style-type: none"> 1. Studies to determine access to human rights services among in PLHIV, including KPs, drug users and female sex workers 2. Studies to analyze the policy and legal environment on access to social and health services by PLHIV [including key populations and other vulnerable populations] 3. An assessment of the extent to which the Uganda policy review process addressed regional and international health priorities on equity and social inclusion for vulnerable groups

3.4. Priority Topics under Health Systems Strengthening

Based on the NSP, six main topics were identified under Health Systems Strengthening. The six topics were: (1) strengthening governance and leadership of the multi-sectoral HIV and AIDS response at all levels; (2) ensuring availability of adequate human resources for the delivery of quality HIV services; (3) reducing stock-outs of medicines and supplies in health facilities; (4) improving the health infrastructure’s responsiveness to HIV service needs; (5) strengthening community systems for delivery of HIV services, and (6) increasing efficient utilization, accountability and management of resources. Overall, **77 questions** were obtained from which **18 were generated** after collation (**Table 5**).

Table 5: Research Questions - HIV Systems Strengthening Theme

No	Research topic or question
Strengthening governance and leadership of the multi-sectoral HIV and AIDS response at all levels	
1	<p>Effectiveness of national leadership and coordination frameworks</p> <ol style="list-style-type: none"> 1. Evaluation of the effectiveness and functionality of the national framework for the multi-sectoral HIV & AIDS HIV/AIDS response 2. Assessment studies on effectiveness of Uganda’s governance, leadership, and ownership of the national HIV/AIDS response 3. Documentation of the facilitators and barriers towards the country ownership of the HIV response



Ensuring availability of adequate human resources for the delivery of quality HIV services	
2	<p>Workforce for delivery of HIV services</p> <ol style="list-style-type: none"> 1. Studies on the quantity and quality of the workforce involved in the delivery of quality HIV services 2. Studies to establish the drivers of attrition in the HIV/AIDS workforce 3. Studies to inform the potential new roles of primary health or lay providers and community health workers (VHTs) in delivery of HIV services 4. Studies to optimize the use of ICT in the training of health workers for delivery of HIV services
Reducing stock-outs of medicines and supplies in health facilities	
3	<p>Innovations for optimizing HIV supply chain systems</p> <ol style="list-style-type: none"> 1. What innovative strategies and interventions are required to reduce stock outs of HIV medical products 2. Novel ICT-based interventions to optimize national HIV supply management systems 3. Studies to establish the impact environmental issues on the national HIV medical supply chain
Improving health infrastructure responsiveness to HIV service needs	
4	<p>Infrastructure for delivery of HIV services</p> <ol style="list-style-type: none"> 1. Studies to assess the appropriateness of the existing infrastructure utilized to deliver HIV services, e.g., for elderly, people with disabilities, adolescents
Strengthening Community systems for delivery of HIV services	
5	<p>HIV community systems</p> <ol style="list-style-type: none"> 1. Studies to document best practices of community health systems (e.g., community linkage facilitators, peer support groups) and their contribution to the HIV response 2. Research studies on feasible mechanisms for main-streaming HIV in the parish development model approach of the Government of Uganda
Increasing efficient utilization, accountability and management of mobilized HIV and AIDS resources	
6	<p>Sustainable financing of the country HIV response</p> <ol style="list-style-type: none"> 1. Evaluation of the strengths and weaknesses of the existing resource mobilization and accountability strategies 2. Studies for innovative ways to improve domestic financing of the HIV/AIDS response and accountability strategy 3. What is the effectiveness of community insurance systems in enabling access to quality HIV care services? 4. Multidisciplinary research studies on topical issues in the HIV Investment Case Framework for Uganda, 2021-2030 5. Economic evaluations of the systems for delivery of HIV services



3.5. Priority Topics under Monitoring & Evaluation

Two main topics were identified under monitoring and evaluation. These were: (1) a strengthened national mechanism for generating comprehensive, quality and timely HIV and AIDS information for monitoring and evaluation; and (2) improved information sharing and utilization among producers and users of HIV and AIDS data and information at all levels. Overall, **21 questions** were obtained, from which **13 were generated** after collation (**Table 6**).

Table 6: Research Questions -Monitoring and Evaluation

No	Research topic or question
	Strengthening HIV monitoring and evaluation mechanisms
1	<p>Generation of strategic information</p> <ol style="list-style-type: none"> 1. Studies to determine HIV prevalence across different population groups and districts/ geographic regions 2. Size estimation studies of HIV high risk populations by age and sex, and the contribution to the HIV epidemic of each high-risk population; 3. Evaluation studies on men, adolescents and children in relation to linkage to care, retention in care, and HIV Viral Load suppression 4. Evaluation of the National HIV/AIDS Strategic Plan 5. Assessment studies on the effectiveness of HIV M&E systems to generate comprehensive, quality, and timely information 6. Development of a national M&E strategy for the HIV response [incorporating data storage, information-sharing, and utilization plans] 7. Improved sharing and utilization of HIV information
2	<p>Information sharing and use</p> <ol style="list-style-type: none"> 1. Evaluation studies on the utilization of routine M&E data at policy level and at service delivery points 2. Evaluation studies on the impact of the newly deployed HIV electronic M&E systems on the health outcomes of patients with chronic diseases beyond HIV and TB 3. Assessment studies on differences in the quality of provided HIV services by location and delivery model 4. Studies on novel interventions to collect and link patient information across all HIV treatment facilities [public and private] 5. Studies on novel interventions to enable HIV/AIDS service providers to utilize data for decision-making and action 6. Studies on interventions to motivate health workers to collect, maintain quality patient information



Chapter 4: Operationalization of the Research Agenda

4.1. Financing of Research Agenda

Dedicated financing is required to ensure effective implementation of the HIV research agenda, and the related processes such as translation of research into practice and policy. The National Research and Innovation Program, which was established in 2019 under the Ministry of Science, Technology and Innovation (MoSTI) will be leveraged to finance the agenda. However, for the sustained financing of the HIV research, legislation linking research to program challenges is required.

Besides financing gaps, existing capacity gaps for research [especially] at district level will need to be addressed. Capacity will need to be developed in areas such as epidemiologic surveillance, policy analysis, data collection and data analysis, and good clinical practices. Competencies in development of quality research protocols, research procedures, literature, and systematic reviews will need to be developed.

4.2. Stakeholder Roles and Responsibilities

The envisaged coordination and implementation arrangements for the National HIV and AIDS Research agenda is as follows. The Uganda AIDS commission (UAC) will take the leadership role for the coordination, promotion and implementation of the HIV research agenda. The research office at UAC will lead the implementation of the HIV research agenda in collaboration with MoH. In addition, UAC will engage with: the Ministry of Science Technology & Innovation; the Uganda National Health Research Organization; the Uganda National Council of Science and Technology; the Uganda Virus Research Institute; and the Uganda National Academy of Science on the implementation of the agenda. The envisaged tasks will include enhancing in-country capacity for sound research and peer reviewed publication, strengthening coordination and tracking of HIV research, sensitizing ethics review committees on the HIV research priorities, strengthening district HIV research capabilities including epidemiologic surveillance, good laboratory and clinical practice and ethics. With policy and science evolving at a rapid pace, the agenda will be updated after year three of implementation, preferably at the time of the mid-term review of the National HIV Strategic Plan. As part of implementing the research agenda, UAC through its research office should organize and conduct a periodic national HIV Scientific conference that provides an essential forum for a broad spectrum of HIV professionals to share their expertise and real-world experiences and identify gaps in knowledge. In addition, UAC will strengthen the National Aids Documentation and Information Centre (NADIC) to enable it act as a one stop center for HIV/AIDS knowledge.

4.3. Dissemination of Research Agenda and Related Products.

The research agenda and the related ongoing or completed research projects will be uploaded on the UAC website. Further, research findings will be published in open access scientific journals, and presented at national and international conferences and meetings of professional associations such as the Annual Joint AIDS Review conference, the annual UNHRO Research Symposium, and the International AIDS Society conference. In addition, research findings will be disseminated through publications in print media, press releases via radio, TV, and the UAC Twitter account, for example on World AIDS Day.



Table 7: Roles and Responsibilities of Different Stakeholders

No	Entity	Role and Responsibility
1	Uganda AIDS Commission	Lead the coordination, promotion and implementation of the research agenda. Mobilize funds to implement the research agenda, and update the research agenda
2	Ministry of Health	Integrate HIV research in HIV programming. Support financing of the research agenda
3	Ministry of Science Technology & Innovation	Strengthen coordination and tracking of HIV research across sectors.
4	Uganda National Health Research Organization	Periodic National HIV Scientific Conference that provides an essential forum for a broad spectrum of HIV professionals to share their expertise and real-world experiences and identify gaps in knowledge
5	Uganda National Council of Science and Technology	Sensitize ethics review committees on the National HIV Research Agenda
6	Research Institutions	Collaborate with UAC and Ministry of Health on implementation of the research agenda
7	Uganda National Academy of Science	Collaborate with UAC and Ministry of Health on implementation of the research agenda
8	Academic institutions	Develop HIV research proposals and grants, implement and conduct research
9	Individual researchers	Develop HIV research proposals and grant applications
10	Funding agencies, Civil Society	Fund national research priorities



Chapter 5: Monitoring and Evaluation for the Research Agenda

5.1. Expected Results

The following are the expected results for implementing the national HIV/AIDS research agenda:

- Well-articulated HIV and AIDS research priorities for the period 2020/2021–2024/2025. This in turn is expected to enhance monitoring, review, and analysis of the HIV research agenda in Uganda.
- Improved coordination of HIV and AIDS research among stakeholders. This in turn is expected to reduce unnecessary duplication, promote collaborations, and timely application of research findings.
- Improved resource mobilization and allocation for HIV research in Uganda.

5.2. Output and Outcome Indicators

A range of output and outcome indicators have been identified in four key areas. These are shown in **Table 8** below.

Table 8: Research Agenda Outputs and Indicators

Scientific productivity	<ol style="list-style-type: none"> 1. Number of new peer reviewed papers from Uganda and by Ugandan investigators (tabulate by discipline) 2. Number of finished study reports uploaded into the research hub 3. Number of abstracts submitted to national and international Conferences 4. Number of study protocols related to the HIV research agenda, approved by Ethical Review Committees quarterly
Knowledge Management and Information	<ol style="list-style-type: none"> 1. Number of website hits to the national HIV Research Hub 2. Number of national policies and guidelines informed by the evidence generated from the national research agenda
Capacity building at national and sub-national levels	<ol style="list-style-type: none"> 1. Number of new investigators funded to conduct research related to the national HIV research agenda 2. Number of people trained to conduct HIV related research at national and sub-national level
Domestic and External funding for HIV research	<ol style="list-style-type: none"> 1. Amount and percentage of domestic and external financial resources mobilized for HIV Research 2. Percentage of UAC funds allocated to HIV Research

Chapter 6: Appendices

6.1. Taskforce Members

	Name	Institution
1	Dr Sam Okware	Uganda National Health Research Organization, (UNHRO)
2	Prof. Pontiano Kaleebu	Uganda Virus Research Institute (UVRI), Medical Research Council (MRC), and London School of Hygiene and Tropical Medicine (LSHTM)
3	Dr Joshua Musinguzi	AIDS Control Program, Ministry of Health (MoH)
4	Dr Stella Alamo	Centres for Disease Control and Prevention (CDC)
5	Dr Aggrey Mukose	Makerere University School of Public Health
6	Dr Simon Kasasa	Makerere University School of Public Health
7	Dr Andrew Kambugu	Infectious Diseases Institute (IDI)
8	Prof. Lynn Atuyambe	Makerere University School of Public Health
9	Ms Rosemary Kindyomunda	UNFPA
10	Dr Denis Muhangi	Makerere university Dept. of Social Work & Social Administration
11	Dr Lydia Mungherera	Maama's Club
12	Dr Francis Ssali	Joint Clinical research Centre (JCRC)
13	Dr Flavia Matovu	Makerere university-John's Hopkins University Research Collaboration (MU-JHU)
14	Dr Martin Patrick Ongol	Uganda National Council for Science and Technology (UNCST)
15	Dr Zepher Karyabakabo	Uganda AIDS Commission (UAC)

6.2. Documents Reviewed

No	Document
1	National HIV/AIDS Strategic Plan 2020/21-2024/25
2	The Presidential Fast Track Initiative to End HIV/AIDS
3	A Report of the presidential fast track initiative on ending AIDS as a public health threat in Uganda by 2030.
4	Consolidated Guidelines for the Prevention and Treatment of HIV/AIDS in Uganda 2020
5	NIH Strategic Plan for HIV and HIV-Related Research



6	EDCTP Strategic Research Agenda (version 4)
7	Global Research Agenda for Adolescents Living with HIV, WHO, 2017
8	UNAIDS Uganda Report, 2020
9	Assessment of Access to HIV/AIDS and Sexual and Reproductive Health Services among Adolescents in Uganda, MOH, 2016
10	Joint AIDS Review Report, 2019/2020
11	Kenya HIV and AIDS Research Agenda 2014/15-2018/19
12	All in Phase II In-Depth Analysis of Country Assessment to Strengthen the Adolescent Component of the National HIV Programme, Report for Uganda, 2016.
13	Identifying Priorities for HIV-Associated Tuberculosis Research Through the WHO Guidelines Process
14	Synthesis, Consolidation and Building Consensus on Key and Priority Population Size Estimation Numbers in Uganda, 2019
15	National HIV and AIDS Research Priorities-Zimbabwe, 2016-2020
16	TASO Research Strategy 2017 -2021
17	CDC HIV Country Plan for 2020-2025
18	Mid and End Term NSP Review Reports
19	Landmark HIV/AIDS Studies in Uganda
20	HIV/AIDS Situation Analysis Report 2020
21	National Health Research Policy
22	UPHIA Uganda report 2019
23	UBOS household survey, 2017
24	National Health Research Strategic Plan
25	Demographic and Health Survey Report
26	HIV Investment Case Report 2020
27	Karuna Project Report 2020
28	Uganda National HIV Research Agenda, 2015-2020
29	National Development Plan III (Year)



30	PEPFAR Country Operating Plan and Recommendations, 2020
31	Review of SDGs and Recommendations on Science
32	HIV Research Priorities for Uganda: 2015-2020
33	National Child Policy-Ministry of Gender Labor and Social Development, 2020

6.3. Contacted Individuals

No	Names	Organization
1	Kyomukama Flavia	Action Group for Health, Human Rights and HIV/AIDS
2	Dr. Augustine Lubanga	AHF – Uganda Cares
3	Dr. Sulaimani Kawooya	AHF – Uganda Cares
4	Mbabazi MarthaAtai	AHF – Uganda Cares
5	Methuselah Kahungu	AHF – Uganda Cares
6	Dr. Hilder Kizito	AIDS Information Centre
7	Nabwire Resty	Alliance of Mayors' Initiative for Community Action on AIDS at Local Level
8	Dr Christine Ocokoru	Baylor-Uganda
9	Dr Denise Birungi	Baylor-Uganda
10	Dr. Adeodata Kekitiinwa	Baylor-Uganda
11	Sunday Komakech	Baylor-Uganda
12	Dr. Denis Bwayo	Busitema University
13	Dr. Matovu Joseph	Busitema University
14	Dr Alice Namale	Centres for Disease Control and Prevention-Uganda
15	Dr Joseph Kabanda	Centres for Disease Control and Prevention-Uganda
16	Dr Joseph Lubwama	Centres for Disease Control and Prevention-Uganda
17	Dr. Alamo Stella	Centres for Disease Control and Prevention-Uganda
18	Mr Mukundane Armstrong	Communication for Health Communities
19	Dr. Martin Odoch	Gulu University
20	Dr. Namara Warren	Health Monitoring Unit, State house
21	Flavia Zalwango	Human Rights Awareness and Promotion Forum
22	Dr. Isaac Lwanga	Infectious Diseases Institute
23	Dr. Kambugu Andrew	Infectious Diseases Institute
24	William Kidega	International AIDS Vaccine Initiative
25	Betty Kwagala	International Community of Women Living with HIV East Africa.



26	Lillian Mworeko	International Community of Women Living with HIV East Africa.
27	Margaret Happy	International Community of Women Living with HIV, East Africa.
28	Dr. Hakim Sendagire	Islamic University in Uganda
29	Prof Kironde Fred	Islamic University in Uganda
30	Dr. Francis Ssali	Joint Clinical Research Centre
31	Dr. Victor Musiime	Joint Clinical Research Centre
32	Mr Micheal Kabugo	Joint Clinical Research Centre
33	Richard Lusimbo	LGBT Activist
34	Dr. Pancras Odongo	Lira University
35	Dr. Lydia Mungherera	Maama's club
36	Dr. Sabrina Kitaka	Makerere University College of Health Sciences
37	Dr. Denis Muhangi	Makerere University College of Humanities and Social Sciences
38	Dr. Flavia Matovu	Makerere University Johns Hopkins University Research Collaboration(MU-JHU)
39	Prof. Philipa Musoke	Makerere University Johns Hopkins University Research Collaboration (MU-JHU)
40	Dr. Fred Ssemitala	Makerere University Joint AIDS Programme
41	Dr Aggrey Mukose	Makerere University School of Public Health
42	Dr Esther Buregyeya	Makerere University School of Public Health
43	Dr John Bosco Ddamulira	Makerere University School of Public Health
44	Dr. Kagaayi Joseph	Makerere University School of Public Health
45	Dr. Simon Kasasa	Makerere University School of Public Health
46	Dr. Viola Gwokyalia	Makerere University School of Public Health
47	Prof Lynn Atuyambe	Makerere University School of Public Health
48	Prof Rhoda Wanyenze	Makerere University School of Public Health
49	Dr. Francis Kiwewa	Makerere University Water Reed Project (MUWRP)
50	Dr. Edith Wakida	Mbarara University of Science and Technology
51	Dr. Babra Namatta	Mildmay Uganda
52	Dr. Jane Nakaweesi	Mildmay Uganda
53	Brig. Gen. Dr. Steven Kusasira	Ministry of Defence and Veteran affairs
54	Kasule Mohammed	Ministry of Education and Sports
55	Mr Johnson Mutesigensi	Ministry of Finance Planning and Economic Development
56	Annet Nakafeero	Ministry of Gender, Labour and Social Development
57	Tumwine N. Apophia	Ministry of Gender, Labour and Social Development
58	Harriet Luyima	Ministry of Gender, Labour, and Social Development
59	Dr. Barbra Nanteza	Ministry of Health/AIDS Control Programme
60	Dr. Cordelia Katurebbe	Ministry of Health/AIDS Control Programme



61	Carol Nanteza	Ministry of Health/AIDS Control Programme
62	Dr. Kadama Herbert	Ministry of Health/AIDS Control Programme
63	Dr. Linda Nabitaka	Ministry of Health/AIDS Control Programme
64	Dr. Joshua Musinguzi	Ministry of Health/AIDS Control Programme
65	Dr. Mudiope Peter	Ministry of Health/AIDS Control Programme
66	Dr. Taasi Geofrey	Ministry of Health/AIDS Control Programme
67	Dr. Wilfred Kirungi	Ministry of Health/AIDS Control Programme
68	Eleanor Namusoke Magongo	Ministry of Health/AIDS Control Programme
69	Kibirige Vastha	Ministry of Health/AIDS Control Programme
70	Ms Juliet Cheptoris	Ministry of Health/AIDS Control Programme
71	Firmina Acuba	Ministry of Water and Environment
72	Winnie Adoch Gena	Ministry of Works and Transport
73	Mulindwa Ismael	Ministry of Education and Sports
74	Evelyn Akello	Monitoring and Evaluation Technical Support Program
75	Gorreti Akidi	Monitoring and Evaluation Technical Support Program
76	Isaac Ssebuliba	Monitoring and Evaluation Technical Support Program
77	Dr. Peter Kyambadde	Most at Risk Populations Initiative
78	Mubiru Sam	Naguru Youth Health Network
79	Sharifah Nakabubi	Naguru Youth Health Network
80	Ms. Molly Rwankore	National Community of Women Living with HIV&AIDS in Uganda
81	Dr. Stephen Watiti	National Forum for People living with HIV/AIDS Networks in Uganda
82	Twinamastsiko Cathius	National Forum of People Living with HIV/AIDS Networks in Uganda
83	Ssenoga Martine Kigozi	National Union of Disabled Persons of Uganda
84	Mukasa Florence	National Union of Women with Disability of Uganda
85	Beat Bisangwa	Office of the First Lady
86	Mr Pande Joshua	Office of the Prime Minister
87	Prof. Vinand Nantulya	One Dollar Initiative- Uganda
88	Major Rubaramira Ruranga	Operation Wealth Creation
89	Prof. Serwadda David	Rakai Health Sciences Programme
90	Bridget Kyobutungi	Shops Plus
91	David Talima	Straight Talk Foundation
92	Dr. Kenneth Mugisha	The AIDS Support Organisation
93	Dr. Noreen Kaleeba	The AIDS Support Organisation
94	Nabirye Betty	The AIDS Support Organisation
95	Carol Nakkazi	Uganda AIDS Commission
96	Enid Wamani	Uganda AIDS Commission
97	Etii Tom	Uganda AIDS Commission



98	Elizabeth Ggombe Mabuwule	Uganda Blood Transfusion Services
99	Mugisha William	Uganda Blood Transfusion Services
100	Alice Kayongo	UGANDA CARES
101	Dr. Ronald Kasyaba	Uganda Catholic Medical Bureau
102	Dr. Wamala Twaib	Uganda Harm Reduction Network
103	Samuel Balyejjusa	Uganda Health Service Commission
104	Dr. Ongol Martin	Uganda National Council of Science and Technology
105	Dr. Sam Okware	Uganda National Health Research Organisation
106	Esther Mabel Komugisha	Uganda Network of AIDS Service Organisation
107	Ignatius Biryomumisho	Uganda Network of AIDS Service Organisation
108	Nakasi Sylvia	Uganda Network of AIDS Service Organisation
109	Ms. Sylvia Nakassi	Uganda Network of AIDS Service Organisations
110	Ms. Martha Clara Nakato	Uganda Network of Young People Living with HIV&AIDS
111	Dora Kiconco Musinguzi	Uganda Network on Law Ethics and HIV/AIDS
112	Falal Rubanga Faith Jennifer	Uganda Network on Law Ethics and HIV/AIDS
113	Grace Nayiga	Uganda Network on Law Ethics and HIV/AIDS
114	Dr Brenda Okech	Uganda Virus Research Institute
115	Prof. Pontiano Kaleebu	Uganda Virus Research Institute (UVRI), and Medical Research Council (MRC), London School of Hygiene and Tropical Medicine (LSHTM)
116	Elizabeth Mushabe	UN WOMEN
117	Draecabo Charles	United Nations Educational Scientific and Cultural Organisation
118	Dr. Asire Barbra	United Nations International Children's Emergency Fund
119	Dr. Rosemary Kindyomunda	United Nations Population Fund
120	Tseday Alemseged	United Nations Programme for HIV/AIDS
121	Akhmedov Komiljon	United Nations Programme on HIV/AIDS
122	Jotham Mubangizi	United Nations Programme on HIV/AIDS
123	Nakku Sarah	United Nations Programme on HIV/AIDS
124	Rose Okot-Ochono	United States Agency for International Development
125	Susan Oregede	UN-Women
126	Dr. Namuwenge Norah	USAID-Strategic Information Technical Support Project
127	Rita Nalwadda	World Health Organisation-Uganda
128	Kaggwa Mugagga	World Health Organisation-Uganda

6.4: Ongoing Clinical Trials Authorized in Uganda since 2016 – Updated on 7th July 2021 (Source-NDA)

Title	Authorization date	Institution
“Doxycycline for the treatment of nodding syndrome: A phase II, randomized placebo controlled trial”	4/5/2016	Department of Pediatrics and Child Health, MUCHS
“Phase I/II, Multi-Center, Open-Label Pharmacokinetic, Safety, Tolerability, and Anti-Retroviral Activity of GSK 1349572 (Dolutegravir), a Novel Integrase Inhibitor, in Combination Regimens in HIV-1 Infected Infants, Children and Adolescents (IMPAACT P1093)”	5/19/2016	MU-JHU Care Ltd.
“A Phase 3, Randomized, Open Label Study to Evaluate the Safety and Efficacy of Switching to a Fixed Dose Combination (FDC) of GS -9883/ Emtricitabine/ Tenofovir Alafenamide (GS - 9883/F/TAF) from Elvitegravir /Cobicistat / Emtricitabine/Tenofovir Alafenamide (E/C/F/TAF), Elvitegravir/Cobicistat/ Emtricitabine/Tenofovir Disoproxil Fumarate (E/C/F/TDF), or Atazanavir + Ritonavir + Emtricitabine/Tenofovir Disoproxil Fumerate (ATV+RTV+FTC/ TDF) in Virologically Suppressed HIV-1 Infected Women.”	5/11/2016	Joint Clinical Research Centre
“A randomized trial of dolutegravir (DTG)-based antiretroviral therapy vs standard of care (SOC) in children with HIV infection starting first line or switching to second line ART (ODYSSEY PENTA 20)”	7/15/2016	Joint Clinical Research Centre
“Investigation of rheumatic AF Treatment Using Vitamin K antagonists, rivaroxaban or aspirin Studies. (INVICTUS)”	12/12/2016	Uganda Heart Institute
“A multi-country, prospective, clinical safety study of subjects exposed to the candidate Ebola vaccines Ad26.ZEBOV and/or MVA –BN-Filo”	9/2/2016	MRC/UVRI
“A Pharmacokinetic Evaluation of Increased Dose Levonorgestrel Implant and Efavirenz-Based Antiretroviral Therapy In HIV-Infected Women”	3/10/2017	Infectious Diseases Institute
“A Follow-Up Open Label Trial to Assess The Continued Safety of and Adherence to the Dapivirine (25mg) Vaginal Ring-004 in Healthy HIV-Negative Women (Phase IIIb)”	10/10/2016	MRC/UVRI
“Defining the Molecular profile of Breast Cancer in Uganda and its Clinical Implications”	3/2/2017	Uganda Cancer Institute
“Optimizing Hydroxyurea Therapy in Children with Sickle Cell Anemia in Malaria Endemic Areas : The NOHARM Maximum Tolerated Dose (MTD) Extension Study”	3/28/2017	Global Health Uganda / Pediatric Department, Mulago Hospital
“A Phase 2/3 , Open Label Study of the Pharmacokinetics , Safety, and Antiviral Activity of the GS-9883/ Emtricitabine/Tenofovir Alafenamide (GS- 9883/F/TAF) in HIV-1 infected Virologically Suppressed Adolescents and Children”	3/17/2017	Joint Clinical Research Centre
“Rifapentine-containing treatment shortening regimens for pulmonary tuberculosis: A randomized, open-label, controlled phase 3 clinical trial”	4/26/2017	Joint Clinical Research Centre
“An international multi-center controlled clinical trial to evaluate 1200mg and 1800mg rifampicin daily in the reduction of treatment duration for pulmonary tuberculosis from 6 months to 4 months (Rifashort)”	6/14/2017	Epicentre - Mbarara Research Base
“Hormonal Contraception and Bacterial Vaginosis (HCBV): The Effect of Norethisterone Enanthate on Recurrent Bacterial Vaginosis among Women at High Risk for HIV infection in Kampala, Uganda”	3/29/2017	MRC/UVRI
“The evaluation of a standard treatment regimen of anti-tuberculosis drugs for patients with MDR-TB (STREAM)”	5/23/2017	Makerere University – Lung Institute



“Assessing the tolerability and safety of single low dose Primaquine in African Children with Acute Uncomplicated Falciparum Malaria and Glucose-6-Phoasphate Dehydrogenase Deficiency.”	6/22/2017	Mbale Clinical Research Institute
“First line Antimicrobials in Children with complicated Severe Acute Malnutrition (FLACSAM)”	6/22/2017	Mbale Clinical Research Institute
“IMPAACT 2010: Phase III Study of the Virologic Efficacy and Safety of Dolutegravir Containing versus Efavirenz Containing Antiretroviral Therapy Regimens in HIV-1-Infected Pregnant Women and their Infants.”	9/29/2017	MU-JHU care Ltd.
“Randomized clinical trial evaluating sertraline plus fluconazole verses fluconazole alone for pre-emptive treatment of asymptomatic cryptococcal antigenemia in HIV-Infected persons living with AIDS.”	8/11/2017	Infectious Diseases Institute
“IMPAACT 2010: Phase III Study of the Virologic Efficacy and Safety of Dolutegravir –Containing Versus Efavirenz-Containing Antiretroviral Therapy Regimens in HIV-1 Infected Pregnant Women and their Infants”	10/20/2017	Baylor College of Medicine Children’s Foundation Uganda
“HPTN084: A Phase 3 Double Blind Safety and Efficacy Study of Long Acting Injectable Cabotegravir Compared to Daily Oral TDF/FTC for Pre-Exposure Prophylaxis in HIV- Uninfected Women.” Version 1.0 dated 2 nd March 2017.	10/13/2017	MU-JHU care Ltd.
“Randomized Trial to Prevent Vascular Events in HIV-REPRIEVE” Protocol No: A5332	9/27/2017	Joint Clinical Research Centre
“A Phase two interventional multi-center randomized open-label study to determine the effective and tolerable dose of KAF156 and Lumefantrine Solid Dispersible Formulation in the combination given once daily for 1,2 and 3 days to adults and children with uncomplicated Plasmodium Falciparum Malaria”	3/9/2018	Infectious Diseases Research Collaboration
“A Phase two interventional multi-center randomized open-label study to determine the effective and tolerable dose of KAF156 and Lumefantrine Solid Dispersible Formulation in the combination given once daily for 1,2,and 3 days to adults and children with uncomplicated Plasmodium Falciparum Malaria”	1/10/2018	MRC/UVRI
“Optimizing iron status while minimizing morbidity in HIV-Infected Ugandan Children” .	1/3/2018	Joint Clinical Research Centre
“An open Label Phase III Randomized Controlled Multicenter Non inferiority Trial to compare Efficacy and Safety of Miltefosine and Paramomycin with Sodium Stigboguconate and Paramomycin combination for the treatment of Primary Visceral Leishmaniasis (VL) in East Africa.”	1/22/2018	Department of Immunology and Molecular Biology, Makerere University
“Dolutegravir in Pregnant HIV Mothers and their Neonates (DOLPHIN-2)”.	12/12/2017	Infectious Diseases Institute
“A Pilot Study of Nelfinavir for the Treatment of Kaposi’s Sarcoma (AmC 098).”	10/16/2018	Uganda Cancer Institute
“A phase 2a Crossover Trial to Evaluate the Safety of and Adherence to a Vaginal Matrix Ring Containing Dapivirine and Oral Emtricitabine/Tenofovir Disoproxil Fumarate in an Adolescent and Young Adult Female Population.”	7/9/2018	MU-JHU Research Collaboration
“HIV Self-testing to empower Prevention Choices in Sex workers.”	1/3/2018	Infectious Diseases Institute
“Simplified Isoniazid Preventive Therapy (SPIRIT) Strategy to reduce TB burden”	11/8/2018	Infectious Disease Research Collaboration
“A phase 3 Double Blind Safety and Efficacy Study of Long-Acting Injectable Cabotegravir Compared to Daily Oral TDF/FTC for Pre-Exposure Prophylaxis in HIV-Uninfected Women. (HPTN 084)” .	4/4/2018	Baylor College of Medicine Children’s Foundation
“A Phase 2, Study to Evaluate the Efficacy of GS-9131 Functional Monotherapy in HIV-1-Infected Adults Failing a Nucleos(t)ide Reverse Transcriptase Inhibitor-Containing Regimen with Nucloes(t)ide Transcriptase Inhibitor Resistant Virus, Followed by Continued Treatment with a GS-9131+Bictegravir+Darunavir+Ritonavir Regimen”.	2/6/2018	Joint Clinical Research Centre



“HIV Self-Testing and PrEP to Increase Testing and Prevention Uptake among Male Partners and improve postpartum ART Use in PMTCT B+ Programs in Uganda”	1/3/2018	Infectious Diseases Institute
“Impact of Concurrent Initiation of DMPA Contraception and Tenofovir PrEP on Bone Loss in Young Women.”	4/17/2018	Infectious Diseases Institute
“A Pharmacokinetic Evaluation of Etonogestrel Implant in HIV-Infected Women on Darunavir Versus Rilpivirine-Based Antiretroviral Therapy (DRIVE-1)”	6/26/2018	Infectious Diseases Institute
“A Pharmacokinetic Evaluation of Levonorgestrel Implant in HIV-Infected Women on Darunavir versus Rilpivirine-based Antiretroviral Therapy (DRIVE-2)”	6/27/2018	Infectious Diseases Institute
“A Phase 3 Double Blind Safety and Efficacy Study of Long-Acting Injectable Cabotegravir compared to Daily Oral TDF/FTC for Pre-Exposure Prophylaxis in HIV Uninfected Women”	4/4/2018	Uganda Virus Research Institute- International AIDS Vaccine Initiative
“Integrated PrEP and ART delivered in Ugandan public health clinics to improve HIV and ART outcomes for HIV serodiscordant couples”	6/21/2018	Infectious Diseases Institute
“High-Dose Intravenous Rifampicin to Improve Survival of Tuberculosis Meningitis: A phase II open-label randomized controlled trial (RifT Study).”	6/18/2018	Infectious Diseases Institute
“IMPAACT 2009: Pharmacokinetics, Feasibility, Acceptability and Safety of Oral Pre-Exposure Prophylaxis for Primary HIV Prevention during Pregnancy and Postpartum in Adolescents and Young Women and their Infants.”	6/22/2018	MUJHU Research Collaboration
“EMaBS TB Vaccine Study: Open label, dose escalation and age de-escalation for ChAdox1 85A in Ugandan adults and adolescents, followed by a Phase IIa randomized, open-label trial among adolescents comparing ChAdOx1 85A prime followed by MVA85A boost versus BCG re-vaccination”.	7/20/2018	MRC/UVRI and LSHTM Uganda Research Unit
High Dose AMBISOME on a fluconazole backbone for Cryptococcal Meningitis Induction Therapy in sub-Saharan Africa: A Phase 3 Randomized Non- Inferiority Trial” (AMBITION-CM). Version 1.0 dated 13th February 2018	6/22/2018	Infectious Diseases Institute
“A Phase 2/3 Multi-center, Open-label, Randomized study evaluating the Safety and Anti-viral effect of once daily integrase inhibitor administered with Darunavir/ritonavir (DRV/r) compared to current Standard of Care (SOC) antiretroviral therapy in HIV-1 infected, virologically suppressed Pediatric participants”	6/22/2018	Joint Clinical Research Centre
“Children with HIV in Africa - Pharmacokinetics and Acceptability of Simple Second-line Anti-Retroviral Regimens.”	7/29/2018	Joint Clinical Research Center
“Efficacy and Safety of Artemether-Lumefantrine, Artesunate-Amodiaquine and Dihydroartemisinin-Piperaquine for The Treatment of Uncomplicated Plasmodium Falciparum Malaria in Uganda.”	7/4/2018	Infectious Diseases Research Collaboration
“Gwoko Adunu pa Lutino” (GOAL Trial) – Determining the Impact of Penicillin on Latent Rheumatic Heart Disease: A Randomized Controlled Trial” Version 1.0	8/20/2018	Uganda Heart Institute
“Encochleated Oral Amphotericin for Cryptococcal Meningitis (EnACT)”..	10/4/2018	Infectious Diseases Institute
“A Phase 1 Open-Label, Dose-Escalation Clinical Trial to Evaluate the Safety, Tolerability and Immunogenicity of Two Doses of an Ebola Sudan Chimpanzee Adenovirus Vector Vaccine, VRC-EBOADC086-00-VP (cAd3-EBO S), in Healthy Adults.”	11/26/2018	Makerere University Walter Reed Project
“Zinc for Infection Prevention in Sickle Cell Anemia (ZIPS)”	8/23/2018	Department of Pediatrics and Child Health,
“An Open-label, Single Arm Study to Provide Additional Information on Safety and Effectiveness of rVSV?G-ZEBOV-GP.”	9/21/2018	MUCHS Epicenter Mbarara Research Center
“A Multi-country, Prospective, Clinical Safety Study of Subjects Exposed to the Candidate Ebola vaccines Ad26.ZEBOV and/or MVA-BN-Filo, Phase 3.”	11/2/2018	Makerere University Walter Reed Project

“Immunogenicity of Fractional One-fifth and One-half Doses of Yellow Fever Vaccine Compared to Full Dose in Children 9-23 Months Old in Uganda.”	10/12/2018	Infectious Diseases Institute
“A Single-arm Study to Evaluate the Feasibility and Efficacy of a Minimal Monitoring Strategy to Deliver Pan-genotypic Ribavirin-free HCV Therapy to HCV Infected Populations who are HCV Treatment Naïve with Evidence of Active HCV Infection.”	11/26/2018	Joint Clinical Research Centre
“An Open-label, Partially Randomized Trial to Evaluate the Efficacy, Safety and Tolerability of a 4 Month Treatment of Bedaquiline plus Pretomanid plus Moxifloxacin plus Pyrazinamide (BPamZ) Compared to a 6 Month Treatment of HRZE/HR (Control) in Adult Participants with Drug- Sensitive Smear-Positive Pulmonary Tuberculosis (DS-TB) and a 6-month Treatment of BPamZ in Adult Participants with Drug-Resistant, Smear-Positive Pulmonary Tuberculosis (DR-TB).”	12/4/2018	Case Western Reserve University Research Collaboration
A Phase 2, Open-label, Multicenter, Single arm study to evaluate the Pharmacokinetics, Safety, Tolerability and Anti-Mycobacterial activity of TCM207 in combination with a Background regimen (BR) of Multidrug Resistant Tuberculosis (MDR-TB) Medications for the treatment of children and adolescents 0 months to <18 years of age who have Confirmed or Probable Pulmonary MDR-TB”	9/12/2019	MUCHS, Lung Institute
“Pharmacokinetic and Pharmacodynamic Evaluation of Etonogestrel Dose Escalation with Efavirenz based Antiretroviral Therapy in HIV-infected Ugandan Women (PK-20)”	1/7/2019	Infectious Diseases institute
“IMPAACT 2009: Pharmacokinetics, Feasibility, Acceptability and Safety of Oral Pre-Exposure Prophylaxis for Primary HIV Prevention during Pregnancy and Postpartum in Adolescents and Young Women and their Infants.”	11/26/2018	Baylor College of Medicine Children’s Foundation
“Randomized trial to compare Magnesium Sulphate administration for preeclampsia and eclampsia: Springfusor versus standard approach”	1/18/2019	Department of Obstetrics & Gynecology, MAKCHS
“A Randomized, Four-arm Open-Label Phase iib Clinical Trial to Evaluate the Pharmacokinetics, Safety/Tolerability and Efficacy of High Dose Rifampicin in TB-HIV Co-infected patients on Efavirenze-or Dolutegravir based Antiretroviral Therapy (SAEFRIF)”	3/15/2019	Infectious Disease Institute
“Single Dose Liposomal Amphotericin for Asymptomatic Cryptococcal Antigenemia (ACACIA).”	4/23/2019	Infectious Diseases Institute
“Optimizing benefits while reducing risks of iron in malaria-endemic areas: OptiM”	3/15/2019	Department of Pediatrics, MAKCHS
“Population Difference in Vaccine Response: The Role, Reversibility and Mediators of Immunomodulation by Chronic Infections in the Tropics (POPVAC).” – Protocol A: The Effect of Intensive Treatment for Schistosomiasis on Response to Vaccines among Island Adolescents.	5/28/2019	MRC-UVRI and LSHTM
“Population Difference in Vaccine Response: The Role, Reversibility and Mediators of Immunomodulation by Chronic Infections in the Tropics (POPVAC).” – Protocol C: The Impact of BCG ‘Pre-Immunisation’ on the Response to Vaccines among Ugandan Adolescents Participating in the Entebbe Mother and Baby Study.	5/28/2019	MRC-UVRI and LSHTM
“A Randomized, Open-label, Parallel-group, Single Dose Regimen, Phase 2a Study to Investigate the Clinical and Parasitocidal Activity and the Pharmacokinetics of 3 Dose Levels of Artefenomel (OZ439) Given in Combination with Ferroquine (FQ) and FQ Alone, in African Patients with Uncomplicated Plasmodium Falciparum Malaria.”	5/2/2019	Infectious Diseases Research Collaboration
“Randomized Trial to Evaluate Mirasol Whole Blood Pathogen Reduction Technology System to Reduce Malaria and Other Transfusion Transmitted Infections (Uganda Mirasol Trial).”	7/4/2019	MU-JHU
“Pharmacokinetics ad Pharmacodynamics of Azithromycin in Severe Malaria Bacterial Co-infection in African Children: TABS PKPD Study”	11/25/2019	Mbale Clinical Research Institute



“Monitored Emergency Use of Unregistered and Experimental Drugs (MEURI): Favipiravir for Exposed Staff to Filovirus (Marbug and Ebola) in Uganda”	6/18/2019	MSF Epicenter Mbarara
“Nucleosides and Darunavir/Dolutegravir in Africa (The NADIA Trial): A Randomised Controlled Trial of Darunavir versus Dolutegravir and Tenofovir versus Zidovudine in Second-line Antiretroviral Therapy Regimens for the Public Health Approach in Sub-Saharan Africa”	6/11/2019	Infectious Disease Institute
“A Phase I/II Study of the Safety, Reactogenicity, and Immunogenicity of Sm-TSP-2/Alhydrogel® with or without AP 10-701 for Intestinal Schistosomiasis in Healthy Ugandan Adults.”	8/28/2019	MUWRP
An open-label, single arm study to provide additional information on immunogenicity and safety of Ad26.ZEBOV/MVA-BN-Filo”	6/19/2019	MRC/UVRI and LSHTM
Two-month Regimens Using Novel Combinations to Augment Treatment Effectiveness for Drug-Sensitive Tuberculosis (TRUNCATE-TB).”	8/16/2019	Infectious Disease Institute
“Remdesivir (GS-5734): Monitored Emergency Use for Ebola Virus Disease”	6/18/2019	Ministry of Health
“REGN3470-3471-3479: Monitored Emergency Use for Ebola virus Disease”	6/18/2019	Ministry of Health
“ZMapp: Monitored Emergency Use for Ebola Virus Disease”	6/18/2019	Ministry of Health
“A Phase IV Open-Label Trial to Assess Bone Mineral Density in a Cohort of African Women on Depo-provera and Tenofovir Disoproxil Fumarate Switched to Tenofovir Alafenamide Fumarate based Anti-Retroviral Therapy”	9/4/2019	MU-JHU Research Collaboration
“Combined HIV Adolescent PrEP and Prevention: On Demand Pre-Exposure Prophylaxis to Provide Protection from HIV in Men using Foreskin Tissue to Estimate Protection (CHAPS II)”	9/19/2019	MRC/UVRI and LSHTM Uganda Research Institute
“Non-Inferiority Fractional-Doses Trial for Yellow Fever Vaccine”	9/23/2019	Epicentre Mbarara Research Centre
“Efficacy and Safety of fexinidazole in patients with Human African Trypanosomiasis (HAT) due to Trypanosoma brucei rhodesiense: a multicenter, open-label clinical trial”	12/27/2019	Makerere University, College of Veterinary Medicine, Animal Resources and B
“A5300B/12003B/PHOENIX: Protecting Households on Exposure to Newly Diagnosed Index Multidrug-Resistant Tuberculosis Patients (PHOENIX MDR-TB)”	9/27/2019	Joint Clinical Research Centre
“A5300B/12003B/PHOENIX: Protecting Households on Exposure to Newly Diagnosed Index Multidrug-Resistant Tuberculosis Patients (PHOENIX MDR-TB), Version 2.0, dated 25 September 2018”.	10/21/2019	MU-JHU
“Population differences in vaccine response: the role, reversibility and mediators of immunomodulation by chronic infections in the tropics (POPVAC). – Protocol B: The effect of intermittent preventive treatment for Malaria with dihydroartemisinin –piperquine on response to vaccines among rural adolescents”	9/11/2019	MRC-UVRI and LSHTM
“High Dose Oral Rifampicin to Improve Survival from Adult Tuberculosis Meningitis: A Double-blinded Randomised Controlled Phase III Trial”	12/23/2019	Infectious Disease Institute
“Empirical treatment against cytomegalovirus and tuberculosis in HIV-infected infants with severe pneumonia: A multicenter open label randomized controlled clinical trial”	3/11/2020	MUCHS
“Birth Asphyxia in Uganda: Prevalence, Associated Factors and Effect of Intra-Partum Oxygen Administration on Fetal and Early Neonatal Outcomes”	12/11/2019	Department of Nursing, College of Health Sciences, Makerere University.
“Phase 3b, Randomized, Open Label Safety Trial of Dapivirine Vaginal Ring and Oral TRUVADA® Use in Pregnancy”	12/6/2019	MU-JHU



“Impact of increased praziquantel frequency on childhood fibrosis in persistent schistosomiasis morbidity hotspots (FibroScHot)”	1/23/2020	Vector Control Division
“Safety and efficacy of Dolutegravir and EFV400 for pregnant and breastfeeding women: a randomised non-inferiority clinical trial”	5/8/2020	Department of pharmacology and Therapeutics, MAKCHS
“A phase 11b three-arm, two-stage HIV-1 prophylactic vaccine trial with a second randomisation to compare TAF/FTC in comparison to TDF/FTC as pre-exposure prophylaxis (PrEPVacc)”	3/26/2020	MRC/UVRI
“A Phase 3, Open-label, Dose Escalation Study to Determine the Pharmacokinetics of Atazanavir administered with Rifampicin to HIV Positive Adults on Second-line ART Regimen with Suppressed HIV-1 Viral Load (DERIVE).”	5/22/2020	Joint Clinical Research Centre
“DPART Study Dihydroartemisinin in the context of Antiretroviral Therapy”	7/30/2020	Baylor College of Medicine , Childrens Foundation
“A multicenter, phase III double blind, randomized active controlled study to evaluate the efficacy and safety of VPM1002 in comparison with BCG in prevention of Mycobacterium tuberculosis infection in new born infants”	7/8/2020	Makerere University School of Public Health
“Phase 3B, Randomized, Open-label, Safety and Drug Detection Study of Dapivirine Vaginal Ring and Oral TRUVADA® in breastfeeding Mother-infant Pairs. Protocol”	5/3/2020	MU-JHU
“Rosuvastatin evaluation as a tuberculosis treatment adjunct (rosetta)”	7/20/2020	Joint Clinical Research Center
“Impact of oral step-down to amoxicillin or co-amoxiclav and duration of antibiotic therapy on effectiveness, safety and selection of antibiotic resistance in severe childhood community-acquired pneumonia (CAP): a randomized controlled trial”	6/15/2020	Department of pediatrics and child health MAKCHS
“Praziquantel for children under age four years: A phase ii PK/PD driven dose finding trial (PIP)”	7/27/2020	MRC/UVRI AND LSHTM
“Safety, Tolerability and Acceptability of Long-Acting Cabotegravir (CABLA) for Prevention of HIV among Female Adolescents-A Sub-study of HPTN084”	6/26/2020	MU-JHU
“Optimal chemopreventive regimens to prevent malaria and improve birth in Uganda”	7/30/2020	IDRC
“Pharmacokinetics and tolerability of Adjunctive Linezolid for the Treatment of tubERCulous meningitis (ALTER): a Phase II trial, open-label, randomized trial”	9/11/2020	MRC/UVRI & London School of Hygiene and Tropical Medicine
“Comparison of Mortality and Frequency of Red Blood Cell Alloimmunization in recipients of Leukoreduced and Non-Leukoreduced Blood Transfusion in Uganda”	9/22/2020	Uganda Cancer Institute
“Randomized controlled non-inferiority trial of topical chlorhexidine 0.2% versus topical natamycin 5% for fungal keratitis in East Africa”	9/30/2020	Mbarara University and Referral Eye Center
“The safety and immunogenicity of a combined Pertussis-containing vaccine (Tdap) for HIV-infected pregnant women and their newborns-A Randomized Clinical Trial (woMANPOWER).”	9/23/2020	Makerere University College of Health Sciences
“Optimizing DPT-containing vaccine infant immunization schedules in UGANDA.”	2/4/2021	MRC/UVRI
“The Efficacy and Safety of hydroxychloroquine for the treatment of non-severe covid-19 in adults in Uganda. A randomized open label phase II clinical trial”	9/9/2020	Makerere University College of Health Sciences
“Effectives of low-dose Theophylline for the management of Biomass-associated COPD”	12/10/2020	Makerere University Lung Institute
“Optimizing Malaria Treatment for HIV-Malaria Co-infected Individuals by addressing Artemether-Lumefantriene and Efavirenz, A randomized Controlled Trial (OPTIMAL)”	3/11/2020	MAKCHS

“Assessment of safety and efficacy of COVID-19 Convalescent Plasma for treatment of COVID-19 in adults in Uganda; A phase III randomized controlled trial (CCP)”	9/14/2020	Makerere University Lung Institute
“Hydroxyurea Therapy for Neurological and Cognitive Protection in Pediatric Sickle Cell Anemia in Uganda: A single Arm Open Label Trial. (BRAIN SAFE II)”	12/2/2020	MAKCHS
“Pilot feasibility study for uptake and implementation of a clinical algorithm for warfarin dosing in sub-saharan African patients in the War-PATH Ugandan and South African Clinical study sites.”	1/8/2021	IDI
“Dihydroartemisinin-Piperaquine or Sulphadoxine-Pyrimethamine for the Chemoprevention of Malaria in Children with Sickle Cell Anemia in Eastern and Southern Africa”	11/19/2020	MAKCHS
“A Phase 2b study to evaluate the safety and efficacy of IMR-687 in subjects with sickle cell Disease”	2/24/2021	UCI
“A Phase 2b study to evaluate the safety and efficacy of IMR-687 in subjects with sickle cell Disease”	2/24/2021	Jinja Regiona Referral Hospital, Sickle Cell Clinic
“A Phase 2b study to evaluate the safety and efficacy of IMR-687 in subjects with sickle cell Disease”	2/24/2021	JCRC
“A Phase 2b study to evaluate the safety and efficacy of IMR-687 in subjects with sickle cell Disease”	2/24/2021	IDRC
“A Phase 2b study to evaluate the safety and efficacy of IMR-687 in subjects with sickle cell Disease”	2/24/2021	Makerere College of Health Sciences/ Mulago Hospital
“An Open-Label, Roll-over study with Rilpivirine in Combination with a Background Regimen Containing Other Antiretrovirals (ARVs) in Human Immunodeficiency Virus Type 1 (HIV-1) Infected Subjects Who Participated in Rilpivirine Pediatric Studies”	2/10/2021	JCRC
“Multicenter, Adaptive, Randomized, Blinded Controlled Trial of safety and Efficacy of investigational Therapeutics for hospitalized patients with COVID-19”	1/20/2021	MRC/UVRI and LSHTM
“Effect of Vitamin D supplementation on sickle cell disease hospitalization and related complications among children in Mulago Hospital: A randomized clinical trial”	2/22/2021	Department of Pediatrics and Child Health
“Safety and Pharmacokinetics of the combination Broadly Neutralizing Antibodies, 3BNC117-LS-J and 10-1074-LS-J, in Healthy American and African Adults”	2/17/2021	IDI
“An Open-label, randomized, Single intravenous dosing to investigate the effect of fixed dose combinations of tenofovir/lamivudine or atazanavir/ritonavir on the pharmacokinetics of remdesivir in Ugandan healthy volunteers”	2/12/2021	IDI
“Intensified tuberculosis treatment with or without aspirin to reduce the mortality of HIV-Infected and HIV-uninfected patients with tuberculosis meningitis : a phase III Randomized Controlled Trial”	4/8/2021	MUST
“A Phase 3b, Randomized, Multicenter, Open-Label Study Evaluating the Efficacy, Safety and Tolerability of Switching to Long-Acting Cabotegravir Plus Long-Acting Rilpivirine From Current Antiretroviral Regimen in HIV-Infected, Virological Suppressed Adults in Sub-Saharan Africa”	3/3/2021	JCRC
“A clinical Evaluation of Efficacy , Safety , Immunogenicity and Tolerability of UBV-10N, A Natural Product in Adult Patients Infected with Sar-Cov-2 (Covid-19) in Uganda”	1/25/2021	Director, Natural Chemotherapeutics Research Institute
“Safety and Pharmacokinetics of the combination Broadly Neutralizing Antibodies, 3BNC117-LS-J and 10-1074-LS-J, in Healthy American and African Adults”	3/24/2021	UVRI/IAVI
“Identification, Validation & Optimization of available drug molecules for clinical treatment of COVID-19”	3/4/2021	Department of Pharmacology &Therapeutics



“A randomized Trial to investigate strategies to reduce mortality among HIV-Infected and HIV-exposed children admitted with severe acute malnutrition in Mulago Hospital, Kampala, Uganda”	5/4/2021	Makerere University College of Health Sciences
“Evaluation of pharmacokinetics, safety and feasibility for administration of two doses of intravenous ascorbic acid combined with vitamin B1 for the management of adult patients admitted with sepsis to kiruddu national referral hospital”	6/8/2021	IDI
“A Phase 1 Trial of ChAD0x1- and MVA-vectored Conserved Mosaic HIV-1 Vaccines in Healthy, Adult HIV-1-negative Volunteers in Eastern and Southern African”	6/4/2021	MRC/UVRI

6.5. Questionnaire for Development of the National HIV/AIDS Research Agenda

Background: The Uganda AIDS Commission (UAC) is in the process of developing a National HIV/AIDS Research Agenda. The purpose of the national HIV and AIDS research agenda is to guide the implementation of research at both National and sub-national level to support the National HIV and AIDS strategy (NSP) and enable attainment of the Presidential Fast Track Initiative (PFTI) goal of ending AIDS in Uganda.

1. What perspective(s) are you representing (please check all that apply)

1.1.	Clinician	
1.2.	Government Ministry/Department/Agency	
1.3.	Research Organization	
1.4.	Implementing Partner	
1.5.	Regulatory	
1.6.	Academia/University	
1.7.	Funder of research	
1.8.	Civil Society	
1.9.	Faith Based Organization	

2. What is your area of expertise (please check all that apply)

2.1.	HIV prevention	
2.2.	Care and treatment	
2.3.	Social support and protection	
2.4.	Systems strengthening	
2.5.	Monitoring and Evaluation and Research	



2.6.	Years of experience in area of expertise	
<p>3. Thinking of your area of expertise, what do you believe are the most important research questions in HIV/AIDS research in relation to the National HIV and AIDS strategic plan for 2020/21-2024/25? Please list at least three. [provide rationale/contextual information on the proposed question]</p>		
<p>3.1. Future HIV/AIDS research concerning HIV prevention</p>		
<p>Topic 1: Increased adoption of safer sexual behaviors and reduction in high-risk behaviors among key populations, priority population groups and the general population.</p>		
Q1.		
Q2.		
Q3.		
<p>Topic 2: Increased coverage and utilization of biomedical HIV prevention interventions delivered as part of integrated health care services scale-up.</p>		
Q1.		
Q2.		
Q3.		
<p>Topic 3: Mitigation of underlying sociocultural, gender and other factors that drive the HIV epidemic</p>		
Q1.		
Q2.		
Q3.		
<p>3.2. Future HIV/AIDS research concerning care and treatment</p>		
<p>Topic 1: Increase in linkage to antiretroviral therapy to achieve NSP targets</p>		
Q1.		
Q2.		
Q3.		
<p>Topic 2: Increase in retention on antiretroviral therapy to achieve NSP targets.</p>		
Q1.		
Q2.		
Q3.		
<p>Topic 3: Increase in adherence on antiretroviral therapy to achieve NSP targets.</p>		
Q1.		
Q2.		
Q3.		



Topic 4: Increasing Viral load suppression to achieve NSP targets.
Q1.
Q2.
Q3.
Topic 5: Strengthening integration of HIV care and treatment across programmes.
Q1.
Q2.
Q3.
3.3. Future HIV/AIDS research concerning Social Support and Protection
Topic 1: Minimizing HIV related stigma and discrimination.
Q1.
Q2.
Q3.
Topic 2: Reducing socioeconomic vulnerability for people living with HIV and other vulnerable groups
Q1.
Q2.
Q3.
Topic 3: Reducing gender-based violence and discrimination.
Q1.
Q2.
Q3.
Topic 4: Improving child protection and reducing violence against children.
Q1.
Q2.
Q3.
Topic 5: Improving the legal and policy framework on HIV and AIDS to ensure inclusive access by all people living with HIV, key populations and other vulnerable populations
Q1.
Q2.
Q3.
3.4. Future HIV/AIDS research concerning Systems Strengthening
Topic 1: Strengthening governance and leadership of the multi-sectoral HIV and AIDS response at all levels.
Q1.
Q2.



Q3.
Topic 2: Ensuring availability of adequate human resources for the delivery of quality HIV services.
Q1.
Q2.
Q3.
Topic 3: Reducing stock-outs of medicines and supplies in health facilities.
Q1.
Q2.
Q3.
Topic 4: Improving health infrastructure responsive to HIV service needs
Q1.
Q2.
Q3.
Topic 5: Strengthening Community systems for delivery of HIV services.
Q1.
Q2.
Q3.
Topic 6: Increasing efficient utilization, accountability and management of mobilized HIV and AIDS resources.
Q1.
Q2.
Q3.
3.5. Future HIV/AIDS research concerning Monitoring and Evaluation and Research
Topic 1: Generating comprehensive, quality and timely HIV and AIDS information for monitoring and evaluation
Q1.
Q2.
Q3.
Topic 2: improving Information sharing and utilization among producers and users of HIV and AIDS data and information at all levels.
Q1.
Q2.
Q3.



7. References

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