



FEDERATION OF AFRICAN MEDICAL STUDENTS'
ASSOCIATION (FAMSA).

The 38th FAMSA General Assembly and Scientific Conference

ILE-IFE 2024

THEME:

**Aligning Global Practices with Local
Realities for Healthcare transformation
in Africa.**

SPONSOR

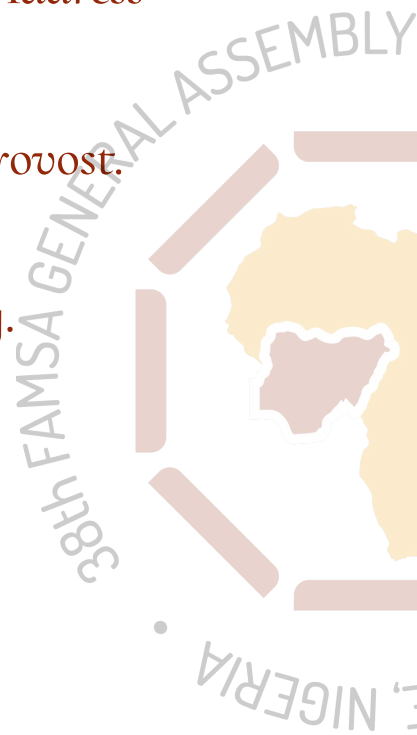


PARTNERS



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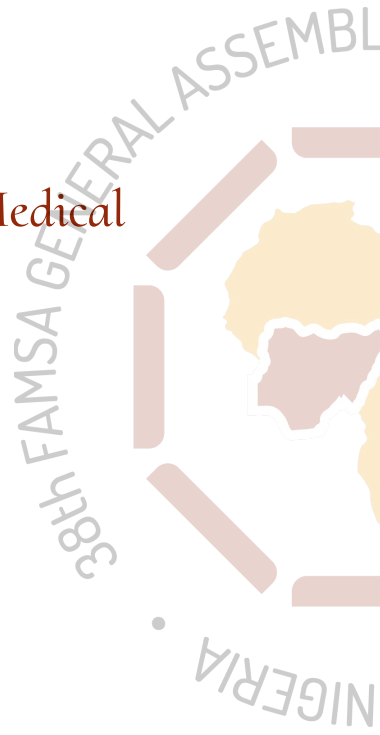
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Organizing Chairpersons' Welcome Address



Esteemed Guests and Delegates,

On behalf of the organizing committee, it is our great pleasure to welcome you to the 38th FAMSA General Assembly and Scientific Conference 2024 of the Federation of African Medical Students' Associations (FAMSA) being hosted by Obafemi Awolowo University Medical Students' Association (IFUMSA) in the ancient city of Ile-Ife, Osun State, Nigeria from the 3rd-8th of November, 2024. We are thrilled to bring together esteemed experts, scholars, advocates and students from across Africa and beyond to share knowledge, experiences, and innovative solutions in Healthcare.

We chose the theme "Aligning Global Practices with Local Realities in Africa" because we recognize the urgent need for collective action to address the complex challenges facing our continent. This conference offers a unique platform for meaningful discussions, networking, and collaboration.

Over the next few days, we will engage in thought-provoking sessions, training and workshops. Our distinguished speakers and panelists will share insights on selected themes, while our interactive parallel sessions will provide opportunities for you to contribute to the conversations.

We will also have various social events to further build the bond, network and explore the diverse cultures amongst us as Medical Students in Africa.

We express our gratitude to our keynote speakers, panelists, sponsors, partners, well-wishers and school authorities for their invaluable support. Your commitment to this conference has enabled us to bring together this diverse and impressive gathering.

To our delegates, we thank you for choosing to join us. Your participation is crucial to the success of this conference. We encourage you to engage fully, ask questions, and share your experiences.

As we begin this journey together, let us embrace the spirit of collaboration, creativity, and openness. Let us challenge assumptions, explore new ideas, and forge partnerships that will propel us forward.

Welcome to the 38TH FAMSA GA!

Best wishes,

Temitayo Femi Matthew
Lawal Abdulrahman
Sobayo Oluwapelumi
Aluko-Olokun Kikilobaoluwa

*Organizing Chairpersons,
38th FAMSA General Assembly and Scientific Conference 2024*

38th FAMSA GENERAL ASSEMBLY
NIGERIA

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FAMSA President's Welcome Address



Dear Delegates, Distinguished Guests, and Friends,

It is my absolute pleasure to welcome you all to the 38th FAMSA General Assembly. This gathering is not only the pinnacle of our organization's activities but also a vital platform where our collective aspirations for a healthier Africa converge.

As we unite from across the continent, we reaffirm our shared commitment to driving impactful change in healthcare, empowering youth leaders, and advocating for a more equitable and sustainable future. This General Assembly is also an important milestone, as it provides a forum to elect the next Executive Council – those who will lead us into the future with vision and purpose.

I urge each of you to participate fully, exchange ideas, and collaborate, as the decisions made here will shape the course of our organization for the years to come. Together, we continue to champion the cause of a healthier, more connected Africa.

Thank you all for being here, and I wish us a successful and inspiring assembly.

Sincerely,
Cinamon B. Nyagaka
President, FAMSA

Welcome Address From The Provost



Dear Delegates, Distinguished Guests, and Friends,

It is with immense pleasure and a deep sense of pride that I welcome you all to the 38th General Assembly & Scientific Conference of the Federation of African Medical Students' Associations (FAMSA), held this year under the theme, "Aligning Global Practices with Local Realities for Healthcare Transformation in Africa." As we gather here in Ile-Ife, Osun State, from the 3rd to the 8th of November 2024, I am reminded of the powerful potential of events like this, where we unite with a common vision for a healthier, more resilient Africa.

On behalf of the College of Health Sciences at Obafemi Awolowo University, I extend a warm welcome to each of you to what is proudly known as the most beautiful campus in Africa. Here, against a backdrop of lush greenery and iconic architecture, you'll find an atmosphere uniquely suited to inspire innovation and foster meaningful connections. We hope you enjoy not only the beauty of our campus but also the rich cultural heritage of Ile-Ife, a town known as the "Cradle of Yoruba Civilization." This blend of modern academia and historical significance sets a fitting stage for transformative dialogue and collaborative growth.

This General Assembly & Scientific Conference is a major milestone in the journey of African medical students to improving the healthcare of the underserved populace within the continent. It presents a unique networking opportunity that will lead to lasting relationships and collaborations as we seek to transform healthcare in Africa.

Over the next few days as delegates, I encourage you to immerse yourself in the wealth of knowledge and experiences shared by our esteemed speakers, each bringing a wealth of expertise and insight. Engage fully in the vibrant discussions, thought-provoking plenary sessions, dynamic breakout sessions, and insightful abstract presentations. These exchanges are designed to challenge conventional thinking, inspire novel solutions, and drive actionable steps that will advance healthcare across the continent. Remember, each idea shared, and every conversation sparked here has the potential to ripple outward, creating tangible improvements in the lives of those we serve.

I congratulate all members of the Organising Committee and the host association (Obafemi Awolowo University Medical Students' Association) for all the effort that went into making an event of this magnitude a reality.

In closing, I welcome you all once more to the 38th FAMSA General Assembly and Scientific Conference. May this event serve as a catalyst for groundbreaking ideas and lasting partnerships. It is our hope that you find your time here in Ile-Ife both fulfilling and inspiring and that you leave with renewed energy to contribute to the health and well-being of our beloved continent.

Welcome to Nigeria, welcome to Ile-Ife, welcome to Obafemi Awolowo University, and welcome to a gathering that promises to inspire and transform.

Prof. B. A. Kolawole,
*Provost, College of Health Sciences,
Obafemi Awolowo University, Ile-Ife.*





OBAFEMI AWOLOWO UNIVERSITY

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Obafemi Awolowo University (OAU) is a premier federal university located in Ile-Ife, Osun State, Nigeria. Established between 1961 and 1962 as the University of Ife, OAU was renamed on May 12, 1987, in honor of Chief Jeremiah Obafemi Awolowo, a Nigerian statesman, lawyer, politician and founding father.

Dubbed Africa's Most Beautiful Campus, the university sits on a vast piece of land, the second biggest in the country with several buildings that marvel both students and outsiders alike.

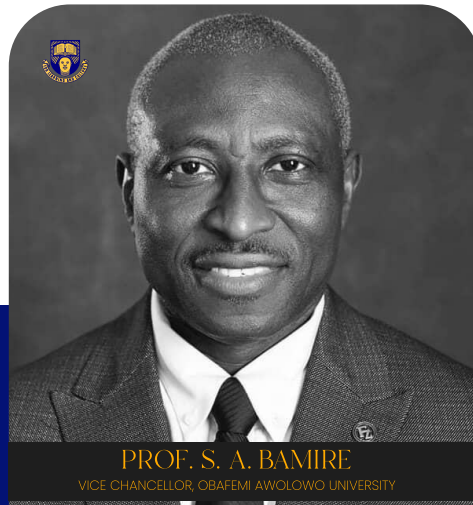
The university is organized into 13 faculties, 2 colleges, and several institutes, which offer a range of undergraduate courses, postgraduate education and training.

OAU is renowned for its research contributions, particularly in areas such as; Agriculture and food security, Renewable energy and sustainability, Health and medicine amongst others.

The university, over the years, has produced notable alumni recognized both nationally and globally for their impactful contributions, and academic prowess amongst other qualities. One such alumni is Akinwande Oluwole "Wole" Babatunde Soyinka, a Nigerian playwright, novelist, poet and essayist in English Language. He was awarded the 1986 Nobel Prize in Literature for his wide cultural perspective and poetic overtones fashioning the drama of existence. Another alumni worthy of mention is Femi Falana (SAN), a Nigerian lawyer and human rights activist well known for opposing oppression from successive military authorities.

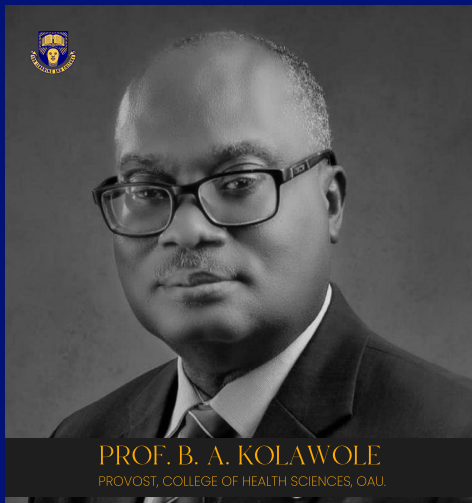


OBAFEMI AWOLOWO UNIVERSITY



PROF. S. A. BAMIRE

VICE CHANCELLOR, OBAFEMI AWOLOWO UNIVERSITY



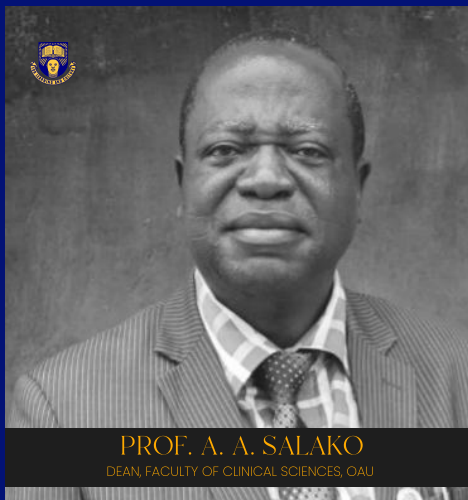
PROF. B. A. KOLAWOLE

PROVOST, COLLEGE OF HEALTH SCIENCES, OAU.



PROF. J. A. O. OKENIYA

CHIEF MEDICAL DIRECTOR, OBAFEMI AWOLOWO UNIVERSITY TEACHING HOSPITALS COMPLEX, ILE-IFE



PROF. A. A. SALAKO

DEAN, FACULTY OF CLINICAL SCIENCES, OAU



PROF. G. O. OMONIYI-ESAN

DEAN, FACULTY OF BASIC MEDICAL SCIENCES, OAU

PROGRAMME OF EVENTS

DAY I: MONDAY, 4TH NOVEMBER, 2024.

| TIME ^{GMT + 1} | EVENT | TOPIC/THEME | SPEAKERS/RESPONSIBLE PERSONS |
|-------------------------|---------------------------|---|---|
| 8:30-9:00 | Photo Session | | |
| 09:00 – 10:00 | Opening Ceremony | Goodwill Remarks | <ul style="list-style-type: none"> • Dr Jean Kaseya, Director-General, Africa Centres For Disease Control And Prevention. • Prof. S. A. Bamire, Vice Chancellor, Obafemi Awolowo University, Ile-Ife. • Prof. J.A.O. Okeniyi, Chief Medical Director, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife • Prof. B. A. Kolawole, Provost, College Of Health Sciences, Obafemi Awolowo University, Ile-Ife. • Prof. A. A. Salako, Dean, Faculty Of Clinical Sciences, Obafemi Awolowo University, Ile-Ife. • Prof. G. O. Omoniyi-Esan, Dean, Faculty Of Basic Medical Sciences, Obafemi Awolowo University, Ile-Ife. |
| 10:00 – 11:00 | Keynote Speech. | Aligning Global Practices With Local Realities For Healthcare Transformation In Africa. | Dr Matshidiso Moeti , Regional Director For Africa, World Health Organisation (WHO) Represented By Dr Walter Kazadi Mulombo , WHO Representative In Nigeria |
| 11:00 – 11:10 | Oral Presentation I. | Digital Transformation Of Health Systems In Africa. | |
| 11:10 – 12:30 | Panel Session I | Digital Transformation Of Health Systems In Africa. | <ul style="list-style-type: none"> • Dr Babajide Oyeduntan, Vice President, Business Development And Sales (EClat Healthcare), Interswitch Group, • Atef Fawaz, Executive Director, EHealth Africa Represented By Abubakar Shehu • Dr Mories Atoki, CEO, African Business Coalition For Health • Dr Habeeb Moshood, CEO, Healthcare Analytics Consults. • George Enows Stevens, Youth Engagement Consultant, DTH-Lab. • Dr Olukayode Oluro, Clinician Analyst, UT Southwestern • Mr Olofinsao Charity, Moderator |
| 12:30 – 13:00 | Poster Presentation | | |
| 13:00 – 14:00 | Lunch | | |
| 14:00 – 14:10 | Oral Presentation II. | Enhancing Social Accountability, Patient Involvement And Quality Assurance In Medical Education In Africa | |
| 14:10 – 15:30 | Panel Session II | Enhancing Social Accountability, Patient Involvement And Quality Assurance In Medical Education In Africa | <ul style="list-style-type: none"> • Prof. Ibiwari Erekosima, International Director, Institute Of Medical Education, Bayelsa Medical University, Yenagooa • Prof. Emiola Oluwabunmi Olapade-Olaopa, Executive Council Member, World Federation Of Medical Education • Dr Charles Chineme Nwobu, Medical And Program Director For Ghana, Child Family Health International • Prof. Uche Onwudiegwu, Director, Institute Of Medical Education, Bayelsa Medical University, Yenagooa. • Miss Adebowale Oluwafisayomi, Moderator |
| 15:30 – 16:30 | Parallel Sessions I | Peace For Health | Muhammad Isa Jafaar |
| | | Health Equity And Determinants Of Health | Nwodo Chidinma Faith & Oreoluwa Odutoye |
| | | Urban Health And Healthy Cities | Salako Opeyemi Precious |
| 16:30 – 18:30 | General Assembly Proper I | | |

PROGRAMME OF EVENTS

DAY II: TUESDAY, 5TH NOVEMBER, 2024

| TIME ^{GMT + 1} | EVENT | TOPIC/THEME | SPEAKERS/RESPONSIBLE PERSONS |
|-------------------------|----------------------------|--|--|
| 8:30-9:00 | Photo Session | | |
| 09:00 - 9:20 | Oral Presentations III | Addressing Health Emergencies, Biosecurity, Climate Change And Multisectoral Response Mechanisms For Health Security In Africa | |
| 09:20 - 10:40 | Panel Session III | Addressing Health Emergencies, Biosecurity, Climate Change And Multisectoral Response Mechanisms For Health Security In Africa | <ul style="list-style-type: none"> • Dr Bamidele Mutiu, Director, Lagos State Biobank • Prof. Oyewale Tomori, Former President, Nigerian Academy Of Science. • Prof. O. A. Esimai, Director, Institute Of Public Health, Obafemi Awolowo University, Ile-Ife Represented By Dr Aluko • <i>Dr Olaoluwa Olorunfemi</i>, . |
| 10:40 - 12:00 | Panel Session IV | Protection Of Healthcare & Human Rights In Forced Displacement, Migration, Emergencies And Disasters In Africa | <i>Miss Oluwapelumi Sobayo, Moderator</i> |
| 12:00 - 12:20 | Poster Presentation | | |
| 12:20 - 13:20 | Parallel Sessions II | Primary Healthcare And Universal Health Coverage | Oreoluwa Odutoye & Chalaty A. Young |
| | | The COVID-19 Pandemic - Lessons Learnt For Future Health Threats | Dimeji Olawuyi & Korede Adekanye |
| | | The Emerging Importance Of Occupational Health In Africa | Imeke Patience Onajomo |
| 13:20 - 14:20 | Lunch | | |
| 14:20 - 15:40 | Panel Session V | Advancing Local Production In Vaccines, Diagnostics And Therapeutics In Africa. | <ul style="list-style-type: none"> • Sammy Ogunjimi, Group MD/CEO, Codix Pharma Limited • Chika (Kemi) Offor, Founder/CEO, Vaccine Network For Disease Control (VNDC) Represented By Chika Nwankwo • <i>Dr Khalil-Ur-Rahman Abdullah, Moderator</i> |
| 15:40 - 16:00 | Policy Session I | | |
| 16:00 - 18:00 | General Assembly Proper II | | |

PROGRAMME OF EVENTS

DAY III: WEDNESDAY, 6TH NOVEMBER, 2024

| TIME ^{GMT + 1} | EVENT | TOPIC/THEME | SPEAKERS/RESPONSIBLE PERSONS |
|-------------------------|-----------------------------|--|---|
| 8:30–9:00 | Photo Session | | |
| 09:00 – 9:20 | Oral Presentations VI | Combating Antimicrobial Resistance, Infectious Diseases And Neglected Tropical Diseases In Africa. | |
| 09:20 – 10:40 | Panel Session VI | Combating Antimicrobial Resistance, Infectious Diseases And Neglected Tropical Diseases In Africa. | <ul style="list-style-type: none"> • Mr. Abiola Oshunniyi, <i>Global Development Expert.</i> • Dr Akingbola Adewunmi, <i>Infectious Diseases Scientist</i> • <i>Dr Olawale Mayomikun, Moderator</i> |
| 10:40 – 10:50 | Brand Presentation | | Journal Of African Medical Students |
| 10:50 – 12:00 | Panel Session VII | Open Science, Responsible Research And Research Education In Africa | <ul style="list-style-type: none"> • Prof. Adeboye Adejare, <i>Professor, Philadelphia College Of Pharmacy (PCP) Of Saint Joseph's University</i> • Dr Akaninyene Bernard Ubom, <i>Vice President, World Association Of OBGYN Trainees,</i> • <i>Miss Omotosho Faithfulness, Moderator</i> |
| 12:00 – 12:20 | Poster Presentation | | |
| 12:30 – 13:30 | Parallel Sessions III | Defying Addiction And Substance Abuse | Nwodo Chidinma Faith & Chalaty A. Young |
| | | Water, Sanitation & Hygiene | Muhammad Isa Jaafar & Imeke Patience Onajomo |
| | | Infodemic Management | Oreoluwa Odutoye & Korede Adekanye |
| 13:30 – 14:30 | Lunch | | |
| 14:30 – 15:00 | Workshop/Training A | | Design For Health Practice, Co-Health Hub |
| 15:00 – 16:00 | Workshop/Training B | The Role Of Artificial Intelligence In Personalised Medical Learning | Lecturio |
| 16:00 – 18:00 | General Assembly Proper III | | |

PROGRAMME OF EVENTS

DAY IV: THURSDAY, 7TH NOVEMBER, 2024

| TIME ^{GMT + 1} | EVENT | TOPIC/THEME | SPEAKERS/RESPONSIBLE PERSONS |
|-------------------------|----------------------------|--|---|
| 8:30–9:00 | Photo Session | | |
| 09:00 – 9:20 | Oral Presentation VIII | Unmasking The Silent Epidemics In Africa: Non-Communicable Diseases And Mental Health | |
| 09:00 – 9:10 | Panel Session VIII | Unmasking The Silent Epidemics In Africa: Non-Communicable Diseases And Mental Health | <ul style="list-style-type: none"> • Prof. Fredrick Chite Asirwa, Executive Director, International Cancer Institute, • Dr Adelard Kakunze, Non-Communicable Diseases, Injuries And Mental Health Program Lead, Africa Center For Disease Control And Prevention , • Dr Usman Aliyu, Director-General, National Institute Of Cancer Research And Treatment • Dr. Chris Onyebuchi Ifediora, Founder & President, OCI Foundation • Prof Ifeoma Okoye, President, Breast Without Spots, Founding President ICW. • Prof. Olusegun Isaac Alatise, Co-Founder, African Research Group For Oncology • Dr Fikayo Benson-Adeyemi, Executive Director, Sage And Enamel Foundation • Dr Mulli Opeyemi, Moderator |
| 10:30 – 11:50 | Panel Session IX | Empowering Communities To Combat Gender-Based Violence And Abolish Harmful Traditional Practices In Africa | <ul style="list-style-type: none"> • Dr Gifty Addico, UNFPA Resident Representative In Nigeria • Prof. Olofinbiyi Babatunde, CEO, Adolescent Friendly Research Initiative And Care (ADOLFRIC) • Samuel Abimbade, Country Focal Point, Inter-African Committee On Harmful Traditional Practices Affecting Women And Children, • Oluwatoyin Chukwudozie, Executive Director, Education As A Vaccine (EVA) Nigeria, Represented By Sandra Jonathan • Dr Funmike Oyekunle, Moderator |
| 11:50 – 13:50 | Workshop/Training C | Designing Merchandise For Advocacy And Fundraising | Pharm. Oluwakorede Adedeji |
| 13:50 – 14:10 | Poster Presentation | | |
| 14:10 – 15:10 | Lunch | | |
| 12:20 – 13:20 | Parallel Sessions IV | Adolescent & Menstrual Health | Imeke Patience Onajomo |
| | | Decolonising Global Health | Muhammad Isa Jafaar & Salako Opeyemi Precious |
| | | Ethics And Human Rights In Health | Chalaty A. Young |
| 13:20 – 14:20 | General Assembly Proper IV | | |



MEET OUR
KEYNOTE
SPEAKER



DR MATSHIDISO MOETI

Dr Matshidiso Rebecca Moeti, the first-ever woman to hold the post of Regional Director of World Health Organization (WHO) in the African Region, spearheaded a radical transformation of the Organization's regional activities during her dual terms from 2015–2025, significantly improving WHO's performance on emergencies, enhancing accountability, and driving progress towards Universal Health Coverage.

Through her bold Transformation Agenda, a unique strategy for change introduced in 2015, the public health veteran of 45 years led the repositioning of WHO in the African Region as a credible, responsive institution. The Transformation Agenda has also been a key influence on global WHO transformation efforts.

Notable public health outcomes over the decade of Dr Moeti's leadership include the certification of the WHO African Region as free of indigenous wild polio in August 2020, significant improvements in disease outbreak responses, critical progress towards reducing maternal mortality rates, and enhanced support for country-level operations.

Investments in areas such as surveillance, training, innovation, community engagement and partnerships have better capacitated African Region countries to prepare for and respond to health emergencies and outbreaks of diseases like Ebola, COVID-19, Marburg and mpox. Notably, timeliness of outbreak detection has improved by 50%, translating to illnesses averted and lives saved, while the overall time to contain outbreaks was reduced by 60%, from 156 to 63 days (2017–2023).

Along with a critical shift in the internal culture of WHO in the African Region, achieved by enhancing leadership capabilities and confronting sensitive issues such as gender equity and harassment, the Transformation Agenda also bolstered continent-wide recognition of the need for strong and resilient health systems to manage external shocks.

Innovations and digital health are now being leveraged as key tools to improve health outcomes and accelerate national development, as African countries pursue reforms to expand access to services, to achieve equity and universal access to health care for all, especially the most vulnerable.

A key feature of Dr Moeti's leadership was the cultivation of strong partnerships, both with traditional and new partners, including philanthropic foundations, civil society, academia, and increasing engagement with young people and women in global health.

Her extensive knowledge and experience in national and international health policy and strategy development, implementation, monitoring and evaluation, as well as the global health agenda and global health governance, is the result of a life-time career devoted to improving public health care on the African continent.

After earning her Bachelor of Medicine and Bachelor of Surgery degrees from the Royal Free Hospital School of Medicine at the University of London in 1978, and a Master of Science in Community Health for Developing Countries from the London School of Hygiene and Tropical Medicine in 1986, Dr Moeti worked with the Joint United Nations Programme on HIV/AIDS (UNAIDS) as Team Leader of the Africa and Middle East Desk in Geneva (1997–1999); with the United Nations Children's Fund (UNICEF) as Regional Health Advisor for East and Southern Africa; and with Botswana's Ministry of Health as a clinician and public health specialist.

She joined WHO in 1999, holding several senior positions in the African Region before being named Regional Director. These included serving as Deputy Regional Director, Assistant Regional Director, Director of Noncommunicable Diseases, WHO Representative for Malawi, Coordinator of the Inter-Country Support Team for the South and East African countries, and Regional Advisor for HIV/AIDS.

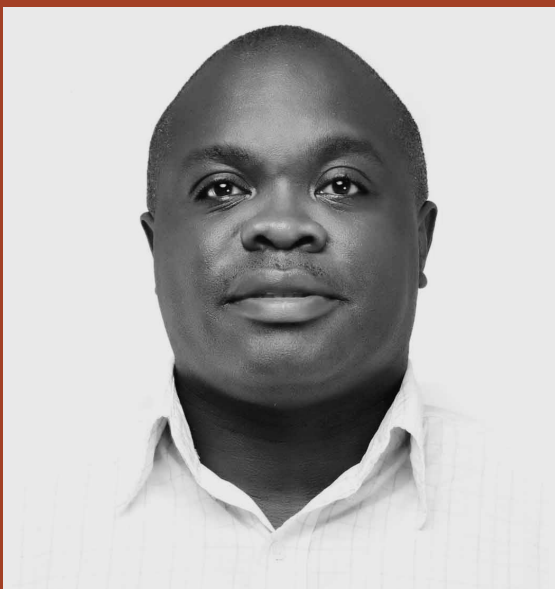
Dr Moeti is renowned for having led WHO's "3 by 5" Initiative in Botswana, her home country after her doctor parents moved the family from South Africa when she was child. At the height of the HIV/AIDS epidemic, she supported the empowerment of nurses to start people on antiretroviral therapy, significantly increasing access to treatment. Her focus on HIV continued during her dual terms as WHO's Regional Director, with marked progress made towards controlling HIV, especially eliminating mother-to-child transmission.

A champion for women in leadership in global health, Dr Moeti has received many accolades and honorary fellowships from renowned academic institutions in recognition of her excellent service to humanity. These include honorary fellowships from the London School of Hygiene and Tropical Medicine and the Colleges of Medicine of South Africa, and honorary doctorates from the University of Health & Allied Sciences, Ghana, and the University of Pretoria in South Africa.

Dr Moeti was also named a COVID-19 Heroine by the Ellen Johnson Sirleaf Presidential Center for Women and Development, was honoured with Membership of the United States National Academy of Medicine, and was recognised for African health leadership on COVID-19 by AMREF Health Africa.



MEET OUR PANELISTS



PROF. FREDRICK CHITE ASIRWA
MD.

Prof. Fredrick Chite Asirwa M.D. is the CEO of International Cancer Institute, a not-for-profit organization whose main purpose is to expand Education, Clinical Care and Training opportunities in cancer control and research across sub-Saharan Africa (SSA) through multi-sectoral collaborations and partnerships with relevant organizations both governmental and NGOs.

Dr. Asirwa is a Medical Oncologist & Hematologist, PD/PI of many access to personalized cancer care and research initiatives including Blueprint Program (Kenya, Rwanda, Tanzania, Burundi, and Uganda), Shining Tower Program, Clinical Trials Program—all geared towards enhancing early detection, promoting primary HPV screening, providing SOC diagnostics & therapeutics cancer research. He has developed several training programs including SSA Oncology Preceptorship training, Digital Pathology Program, Telemedicine Program, Oncology training for Physician assistants (Clinical Officers), development of Oncology Nursing training program in Kenya, a Medical Oncology Fellowship Program, an Oncology Pharmacy program and assisted in the development of a gynecologic oncology program. He has assisted in establishing 17 screening and early detection centres for breast and cervical cancers in Kenya working closely with the county's MOH and other local partners named EMPOWER clinics. Dr Asirwa is also the PI of over 15 global multi-centre Oncology and Hematology Clinical Trials in SSA.

He was previously (2011–2019), the Director of Academic Model Providing Access to Health Care (AMPATH Oncology & Hematology Consortium) in Kenya— a consortium of a dozen Universities in the United States in partnership with Moi University and Moi Hospital in Eldoret, Kenya. In this role he conceptualized and developed infrastructure for telemedicine at AMPATH, created a robust hematology & oncology outreach program in rural Kenya and participated in the development of the Kenya National Cancer Control policies, strategic plans and guidelines by the National MOH. As PI to various clinical and research programs he established Multiple Myeloma program, Lymphoma Program, functional tumor registry, Integrated Breast & Cervical Cancer screening & treatment program, Hemophilia and Sickle cell diagnostics, treatment & research, EMR for Oncology care and screening, a multinational Lung Cancer Control Program, MLCCP (Kenya, South Africa, Lesotho, Tanzania, and Eswatini). He also teaches at various Universities in SSA and participates in Scientific Review Committees (SRC) and Data and Safety Monitoring Board (DSMB) of various Oncology/Hematology Clinical Trials both in the U.S. and SSA

He has also been an active ASCO member through ASCO's Multidisciplinary Cancer Management Course (MCMC), International Affairs Committee (IAC), Education Council, ASCO's Academic Global Oncology Task Force and as a Peer reviewer to ASCO Journals. He is also currently a member of ASCO-ESMO Global Oncology Curriculum committee, International Association for the Study of Lung Cancer (IASLC) patient advocate committee, and one of the ASCO's board of directors(2022–2026). He has been recognized for his work to increase access to cancer control for the underserved through various awards including the United States' National Cancer Institute's Pearlman Global Cancer Research Humanitarian Award, 2020; The Children's



ATEF FAWAZ

Executive Director, eHealth Africa

Atef oversees the strategic and operational management of eHealth Africa, driving programmatic success and business development. Since joining eHA in 2012, he has led transformative initiatives, including the establishment of eight Polio Emergency Operations Centers in Nigeria, funded by the Gates Foundation, and the rapid response to the Ebola outbreak in Lagos. His efforts have expanded eHA's impact across 19 African countries, contributing to polio eradication, Ebola response, and various health mapping projects.

With over 10 years of experience in operations management, Atef excels in optimizing processes, building strategic partnerships, and enhancing organizational performance. Prior to eHA, he served as Chief Operating Officer at Electronic Connections Ltd., where he focused on personnel management and process efficiency.

Atef holds a BSc in Computer Communications Engineering from the Lebanese International University and an MSc in Global Studies. His contributions to public health have earned him recognition, including a service award from Rotary International and a nomination to the Kano State COVID-19 Task Force.

In his current role, Atef provides executive leadership, ensuring that eHealth Africa continues to improve healthcare accessibility in underserved regions while building sustainable, scalable solutions for global health challenges.



PROF. EMERITUS IFEOMA JOY OKOYE

President, Breast Without Spots

Ifeoma Joy Okoye, MBBS, FMCR, FWACS, is an Emeritus Professor of Radiation Medicine and an Ashoka Globalizer Fellow. She is Founding Director at the University of Nigeria Nsukka's Center of Excellence for Clinical Trials (UNNCECT).

With over 44 years in practice, Prof. Okoye specializes in Women's Health, Interventional Radiology, and various cancers, including Breast, Cervical, Prostate, Liver, and Lung. Her expertise was enhanced by short capacity building attachments at the Royal Marsden Hospital; Brompton Hospital, London; Birmingham Maternity Hospital; Mayday Hospital (currently known as: Cromwell University Hospital, South London); Edinburgh Royal Infirmary; Western General Hospital Edinburgh & Innsbruck Medical University Hospital, Austria. Prof. Okoye leads cancer control initiatives & implements community engagement programs for cancer awareness and screening. She has played pivotal roles in clinical trials, biomedical research, and health-system strengthening, focusing on non-communicable diseases like Diabetes, Sickle Cell Disease, and Chronic Kidney Disease.

Her recent work includes advancing precision medicine, AI in healthcare, imaging genomics, data management, and disease registries. Prof. Okoye initiated/founded the International Cancer Week in Nigeria, Breast Without Spot (BWS), and the Association for Good Clinical Practice in Nigeria (AGCPN) whose 2006 policy recommendation gave rise to the establishment of the National Health Research Ethics Committee, NHREC. A prolific scholar and international speaker, Prof. Okoye has published over 128 peer-reviewed articles and authored ten books. In 2024, she delivered lectures/chaired sessions at the Association of Nigerian Physicians in the Americas Conference; Stanford University, and the University of Pennsylvania. She serves as Editor of the West African Journal of Radiology and the Journal of Medical Women Association (J-MWAN). Her holistic contributions have significantly advanced cancer control, research ethics, and healthcare system strengthening in Nigeria and beyond.

Dr. Bamidele Mutiu is a 1997 medical graduate of University of Ibadan. He did his housemanship at the University College Hospital Ibadan in 1997. He worked as a Medical officer at the Federal Medical Center, Nguru Yobe State as a member of the National Youth Service Corps in 1998.

He bagged the award of the Fellowship of the National Postgraduate Medical College of Nigeria in Pathology (Medical Microbiology) in 2006. He joined Olabisi Onabanjo University as a Lecturer/ Consultant Medical Microbiologist in November 2006. And is at present a Senior Lecturer in Medical Microbiology and Parasitology at the Lagos State University College of Medicine (LASUCOM), Lagos and Honorary Consultant Microbiologist to the Lagos State University Teaching Hospital (LASUTH) Ikeja, Lagos, Nigeria since 2010.



DR. WASIU BAMIDELE MUTIU

(MBBS, FMCPATH, PGD Theology, IFBA Cert Biorisk Management & Biosecurity)

Up to date, he has participated in the training of over 2000 Medical Doctors, 18 Postgraduate doctors who are now Consultants and more than 1500 Infection Prevention Practitioners. In 2014, he worked as a lead Physician at the Ebola Treatment Center, Mainland Hospital Yaba during the Ebola outbreak in Nigeria.

He holds International Federation Of Biological safety Association, Canada Certification in Biorisk management and Biosecurity.

He is also a graduate of the Redeemed Christian Bible College 2001, The RCCG School of Disciples 2002, Pointman Leadership Institute USA, 2002, Businesschool Netherland 2014, INSEAD Business School, Abu Dhabi campus UAE 2016.

He is member of Society for Quality Healthcare in Nigeria, Nigerian Biological Safety Association, Nigeria Infection Control Association and College of Nigerian Pathologists.

Currently, he is the Head of Medical Microbiology & Parasitology In both Lagos State University Teaching Hospital and the acting Head of the same department in Lagos State University College of Medicine He is also the Director, Lagos State Biobank; the Laboratory that played a major role in COVID-19 Pandemic control in Nigeria.



ADELARD KAKUNZE

Lead, Non-communicable diseases and Mental health Program
Affiliation: Africa Centres for Disease Control and Prevention

Dr Kakunze holds a Medical Doctor degree from the University of Burundi and a Master in Public Health from Peking University with a decade of clinical and public health experience at national and continental level.

He has been working with Africa CDC since November 2018, initially as Public Health Officer in the Office of the Director till September 2020. Since September 2020, he is the Unit Lead for Non-communicable diseases (NCDs), Injuries and Mental Health in the Division of Disease Control and Prevention. Notable achievements include the development of the Africa CDC strategy on NCDs, Injuries and Mental health validated by Member States in April 2022 and published in high-level peer reviewed journal, the design, negotiation and successful launch of the Africa CDC Mental Health Leadership Programme, the AU/Africa CDC Multisectoral Taskforce on NCDs, Injuries and Mental health, the integration of mental health and psycho-social support in Africa CDC's emergency and preparedness work, the support to Member States to strengthen governance, improve surveillance and build capacity for the prevention and control of NCDs, Injuries and Mental ill-health.

Dr Kakunze is an International Visitor Leadership Programme alumnus, and other prestigious international and regional programmes.



ADEBOYE ADEJARE

Ph.D.

Professor Adebayo Adejare received BS and MS in Chemistry from The University of Iowa and Ph.D. in Medicinal Chemistry from The Ohio State University.

He did postdoctoral studies at the National Institutes of Health (NIH) before beginning his career in academia. He is currently Professor of Pharmaceutical Sciences at the Philadelphia College of Pharmacy (PCP), Saint Joseph's University, Philadelphia, PA. His research is in drug discovery. He was/is funded by the NIH, state agencies, and pharmaceutical companies. He was selected twice as a Carnegie African Diaspora Fellow. These efforts have resulted in over 50 publications, 5 patents and over 110 meeting presentations. He is the Editor-in-Chief of Remington: The Science and Practice of Pharmacy.

He is also the Editor of "Drug Discovery Approaches for the Treatment of Neurodegenerative Disorders: Alzheimer's Disease".

He serves on several national panels including the NIH, National Science Foundation, Veterans Administration and Alzheimer's Association. In Nigeria, he serves in an advisory capacity to the National Agency for Food and Drug Administration and Control (NAFDAC) and the Pharmacy Council of Nigeria (PCN). He is the recipient of many awards including The Ohio State University's Jack Beal Award (2022), the Igbobi College, Yaba Lagos, Nigeria, Old Boys Association's Award of Merit (2017) and the Nigerians in Diaspora Commission (NiDCOM) National Merit Award in the field of Medicine and Healthcare (2024).



DR CHRIS ONYEBUCHI IFEDIORA

Dr Chris Onyebuchi Ifediora is an Associate Professor at Griffith University School of Medicine and Dentistry, Gold Coast, Australia. He is a practising family physician and the Founder and President of the OCI (Onyebuchi Chris Ifediora) Foundation, a Nigerian-Australian-British international charity organisation established in 2016 to “Promote and Advance Health,” “Advance Education,” and “Advance Social and Public Welfare.”

Ifediora has academic and professional experiences from 4 different continents. These include an MBBS degree from the Nnamdi Azikiwe University (Awka, Nigeria, Africa) and an MPH degree from the University of Liverpool (United Kingdom, Europe). He is also an alumnus of the Harvard Postgraduate Medical School (USA, North America) and is just finalising a PhD study at the University of Southern Queensland (Australia, Asia-Pacific).

He is a Fellow of the Royal Australian College of General Physicians (RACGP) and has served two terms as an elected member of the RACGP Faculty Council in the State of Queensland, Australia. He is also an Associate Fellow of the Australian and New Zealand Association for Health Professional Educators (ANZAHPE). As the need arises, he teaches, supervises, mentors, educates and examines medical students, registrars and other junior doctors.

As a medical undergraduate, Dr Ifediora served as the Secretary-General of the Federation of African Medical

Students’ Associations (FAMSA) in 2001. He was also actively involved in the activities of the Nigerian Medical Students Association (NiMSA).

He has published dozens of papers in reputable journals, some of which have significantly contributed to policy and practice in Nigeria, Australia, and beyond. Dr Ifediora holds over 40 national and international humanitarian and leadership awards, including those from Rotary International and the Association of Global Youths. He is also an “Eminent Peace Ambassador,” an international recognition from the International Association of World Peace Advocates (IAWPA). In 2022, he was honoured with the United Nations’s Mayor of World Peace (MP-UN) Award and has received recognitions in Lusaka (Zambia), Sydney (Australia), and London (United Kingdom).

He holds the traditional title of Chizitelu (Godsent) the 1st of Nigeria. In 2016, he formulated the now-popular slogan, “We Rise, By Lifting Others.”, which is the official Motto of the OCI Foundation.



DR. MORIES ATOKI (HON.)

CHIEF EXECUTIVE OFFICER (ABCH_{Health})

Dr. Mories Atoki (Hon) is the Chief Executive Officer for the African Business Coalition for Health (ABCH_{Health}), a not-for-profit Social enterprise Coalition of African business leaders working with other critical stakeholders to support the Governments of African Countries to improve the continent's health sector.

She serves as the Facilitator of the Health Policy Commission (HPC) at the Nigerian Economic Summit Group (NESG) and she is an alumnus of the Harvard Business School (HBS), London Business School (LBS), and YALE University. Mories has Masters degrees in Law, Finance, and Business Administration, among other academic achievements and her career spans various industries and fields in the public and private sectors. Mories currently sits on the boards of a number of organizations.

An avid reader and leadership coach, Mories is passionate about youth empowerment, sustainable development, and service delivery.



DR ENOW AWAH GEORGES STEVENS

Youth Engagement Consultant, DTH-Lab

Enow Awah Georges Stevens, MD, MPH (@Drenowawah) is a Youth Frontline Health Worker, Sexual and Reproductive Health expert, and a skilled youth engagement consultant. He has extensive clinical and programming experience on global health; HIV/AIDS; and sexual, reproductive, maternal, new-born, child, and adolescent health (SRM_{NCAH}). Enow strongly believes in the power of Digital health technology and innovation in edifying society and works in line with health applications of technology.

This complements his work as the Youth engagement consultant for The Digital Transformations of Health Lab (DTH-Lab), a global consortium of partners working to drive implementation of the Lancet and Financial Times Commission on Governing Health Futures 2030's recommendations for value-based and youth-centered digital transformations of health at global and national levels. Enow is convinced that digital health is the future of medicine not only for developed countries but for economically disadvantaged countries as well. Inventing and providing such tools that are cheap, effective and that do not depend entirely on the internet is key.

He has strong relationship-building abilities, project management experience, and knowledge of digital health product deployment, and leverages these to oversee and support complex projects and initiatives, product deployment and delivery, and improve end-user experiences.

Enow is a member of the WHO Youth Council and has been a consultant for various international and intergovernmental agencies. He is a leader in advocating for meaningful youth engagement and the role of young people in sustainable development and decision-making.



SAMMY OGUNJIMI

Group MD/CEO Codix Pharma Limited

Sammy Ogunjimi is an entrepreneur and philanthropist with a background in the pharmaceutical industry. He currently holds the Group Managing Director/CEO position at Codix Group and serves as the Executive Chairman of Colexa Biosensor Ltd.

After a career in the pharmaceutical industry with Merck Pharmaceuticals in the UK, he returned to Nigeria and founded Codix Pharma Ltd in 2008, now with subsidiaries and affiliates in 12 countries.

Sammy is a visionary with a track record of driving a culture of innovation and entrepreneurship. He notably initiated efforts toward self-reliance on the African continent by focusing on backward integration and local production of essential medical devices. This culminated in the completion and launch of Colexa Biosensor Ltd in 2023, representing the 1st Blood Glucose Meters and strips factory in Nigeria and Sub-Saharan Africa.

Recognizing his contributions to the pharmaceutical industry, he was made an honorary pharmacist and member of the Pharmaceutical Society of Nigeria in 2017. He currently serves as the Vice President of the Nigerian Representatives of Overseas Pharmaceutical Manufacturers (NIROPHARM) and is the Vice President, Federation of Nigeria Pharmaceutical Industry Associations (FENPIA). Additionally, he is actively involved in community service and serves on various boards, including an appointment to the Management Board of Olabisi Onabanjo Teaching Hospital (OOUTH) by the Executive Governor of the Ogun State Government.

He is also a member of the Governing Council of Remo Growth & Development Foundation (RemoGDF), where he leads the Health Directorate, and serves as the Chairman of the Royal Initiative for the Development of Sagamu Community (RIDSCo).



PROFESSOR EMIOLA OLUWABUNMI OLAPADE-OLAOPA

FAS, FNAMed, FAMedS

Emiola Oluwabunmi Olapade-Olaopa is a professor of Surgery at the University of Ibadan, and an Honorary Consultant Urologist at the University College Hospital, Ibadan. His academic and professional careers span surgery, urology, molecular biology, medical education, and health systems research and development.

He is the Immediate-Past Provost of the College of Medicine, University of Ibadan, and has been an Adviser on health-professionals training and health systems development to several African countries, the WHO, and the United States and Finland Governments.

He is currently the President of the Association of Medical Schools in Africa; and Chairman of the membership Section (Africa and the Middle East), of the Societe Internationale d'Urologie. He is a Fellow of the Nigerian Academies of Science; Medicine, and Medicine Specialties.



SAMUEL ABIMBADE

Samuel Abimbade is an Climate action advocate with over 12 years of experience in community engagement, policy drafts, systems strengthening as well as qualitative program implementation. He is the Head of Programs for Value Female Network, Africa; a not-for-profit organization that protects the rights and health of women and girls and also drawing a linkage between Climate and SHRH. Samuel is also a Focal point for the Inter-African Committee on traditional practices affecting the health of women and girls in Nigeria. Samuel had led numerous impact-driven projects on how climate effect influence Traditional harmful practices, most especially on mitigating the practices of Female Genital Mutilation.

He coordinated the Largest gathering of adolescent network in Africa: The Adolescent Boot Camp, where he mobilized 1023 girls from 71 communities annually, to raise an adolescent surveillance team across high-affected communities. Through this project, Samuel was able to increase the knowledge of these girls on FGM and its effects as well as raise whistle-blowers in these communities. He holds a diploma in Public relations, bachelor's degree in International Relations, Master's in Business Administration and Public Administration.

He sits on Numerous Executive boards as a youth focal person helping highlight the need to work with young people in Achieving all the sustainable developmental Goals before 2030. Samuel is mostly known for his desire to redefine youth leadership and strengthen systems.



DR. BABAJIDE OYEDUNTAN

*Vice President, Sales & Business Development,
Interswitch EClat Healthcare Limited*

Dr. Babajide Oyeduntan is a seasoned medical doctor and business development executive with over 17 years post-qualification experience. An alumnus of Obafemi Awolowo University, Dr. Oyeduntan's career took an intriguing turn when he transitioned from the practice of clinical medicine to the dynamic world of business development in healthcare.

Dr. Oyeduntan's journey in business development took off at Hygeia HMO, where he served as a Client Services Manager. This early experience in account management and sales laid a strong foundation for his later career, which saw him excel in roles at Scib Insurance Brokers, Avon HMO, Redcare HMO, and Total Health Trust Ltd.

As Vice President of Sales and Business Development at Interswitch EClat Healthcare Limited, Dr. Oyeduntan leverages his extensive industry knowledge and analytical skills to foster and maintain value-driven, long-term relationships. His focus on creating competitive advantages and expanding market share underscores his dedication to the growth and success of the organizations he serves.



DR UBOM, AKANINYENE ESEME BERNARD

Dr Ubom is a Senior Registrar in the Department of Obstetrics, Gynaecology & Perinatology, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria, with fellowships in breast & gynaecological cancers, palliative medicine, reproductive medicine and medical education. He is an Associate Fellow of the National Postgraduate Medical College of Nigeria (NPMCN), and a Fellow of the American-Austrian Open Medical Institute (OMI). He is the Vice President of the World Association of Trainees in Obstetrics & Gynaecology (WATOG) and a Member of International Federation of Gynaecology & Obstetrics (FIGO) Childbirth & Postpartum Haemorrhage Committee, the American Society of Clinical Oncology (ASCO), the Young British Journal of Surgery (BJS) Society, and the International Society of Surgery (ISS/SIC). A member of the Research Collaboration Network (RCN) of the Nigerian Association of Resident Doctors (NARD), he is well published in multiple peer-reviewed journals. Dr Ubom is a 2nd Prize Winner of the 2022 Society of Gynaecology & Obstetrics of Nigeria (SOGON) Young Gynaecologist & Obstetrician Award, and is part of the COVIDSurg/GlobalSurg Collaborative, which won the 2021 Guinness World Record for the World's Largest Scientific Collaboration/Most Authors on a Single Peer-reviewed Academic Paper. He serves as an Associate Editor for the International Journal of Gynecology and Obstetrics (IJGO), and The Pan African Medical Journal (PAMJ); as Academic Editor for PLOS ONE; and as Editorial Board Member for BMC Pregnancy and Childbirth and the Postgraduate Medical Journal (PMJ).

He is a peer reviewer for many local and international journals. In October 2024, he received the 2024 IJGO Best Editor Award, completed an MSc degree programme in the Department of Physiological Sciences, Obafemi Awolowo University, Ile-Ife, and passed his Part 2/Fellowship examinations in obstetrics and gynaecology, West African College of Surgeons (WACS).



DR OLURO KAYODE

Dr. Oluro Olukayode graduated from Obafemi Awolowo as his class valedictorian and captain 20 years ago. Practiced in Nigeria for 9 years before going abroad where he is currently a Physician Informaticist and multiple certified Clinician Analyst. He loves to read, travel and act.



ABIOLA OSHUNNIYI

Abiola Oshunniyi is a tri-sector innovator, sustainability-focused impact professional, and strategist with over 15 years of experience spanning financial services, healthcare, international development, governance, sustainability, and strategy consulting. Abiola is passionate about advancing public health systems, sustainability initiatives, and social development across Africa. He has led numerous initiatives aimed at maximizing resource impact, promoting digital health transformation, and fostering health system resilience. Abiola's vast experience includes managing complex programs and providing advisory services for globally recognized institutions such as the Global Fund, World Bank, USAID, Bill & Melinda Gates Foundation, PACT, SFH, DFID, Qualcomm Wireless Reach, BMJ, UK Space Agency, CHAI, Inmarsat UK, Project HOPE, Salient Advisory, ACIOE Associates and the Clinton Health Access Initiative (CHAI). His technical leadership has contributed to strengthening public health systems through the digitization of healthcare processes, strategic planning, and capacity-building initiatives. He has successfully implemented health interventions that have impacted over 10 million Africans. He has designed and managed healthcare digitization efforts across over 10,000 healthcare workers in 36 states and led the implementation of innovative epidemic preparedness and response programs working with private, public, and development organizations (both local and international).

With a commitment to building sustainable global brands of African origin, Abiola has supported governments and the private sector in leveraging sustainability strategies and corporate social responsibility (CSR) to drive long-term value.

His work with private sector institutions like Access Bank has contributed to numerous awards recognizing their leadership in sustainability, gender equality, and social responsibility. Abiola has served and currently serving as a Technical Advisor to NASIDA, NASENI, NSBP, Global Fund C19RM/RSSH with the NCDC, and BMGF-funded Digitally Enable PHC Project and the NDHI. He holds educational qualifications and certifications from prestigious institutions such as the UCLA Anderson School of Management, the University of Edinburgh, and the Massachusetts Institute of Technology. In addition to his professional achievements, Abiola is passionate about mentoring the next generation of innovators, businesses, and global leaders. He has served as a mentor and judge for various health tech accelerators, sharing his knowledge and experience to support emerging entrepreneurs in Africa's health space, and sustainability. He is passionate about growing enterprises from African origin.



CHIKA (KEMI) OFFOR

She is the Founder of Vaccine Network for Disease Control, Tour Culture Renaissance, President of Business and Professional Women (BPW) Premier Club, Abuja and National VP Projects BPW. She is a gender expert and she is very tenacious in her fight against diseases such as illiteracy and gender-based violence, that plague the lives of girls in rural communities. She also own a Hotel and a logistics company. Asides being a boss lady she is a mum!. She loves to be called Vaccine Mama.



DR AKINGBOLA ADEWUNMI

Adewunmi is a medical Doctor and the founder of HealthDrive Nigeria, an initiative tasked with the responsibility of tackling the menace of infectious diseases in Nigeria. He is a Masters of Philosophy graduate of Population Health Sciences at the prestigious University of Cambridge through the Kings College Quantedge and Rowan Williams Cambridge Scholarship, and currently a Real World Evidence Analyst with Arcturus Data at Oxford.

In 2020, he was recognized by ex-president Bill Clinton through the Clinton Global Initiative University for his works in combating the menace of Hepatitis In Nigeria. He was selected as one of the top 25 Changemakers out of 700 over nominees from 24 African countries to receive the Africa 25 under 25 awards in Health category for his works, He was selected as one of the top 5 Changemakers in Nigeria to receive the Nigeria young Changemakers award. He was also selected as one of the 30 recipients of AfriSAFE '20 Awards (Won Community Hero Category), he was listed as one of the Top 500 Most Inspiring Youths in the African Continent. He is one of the finalists for the Nigerian Citizenship Awards by ITakeActions, 2022 Finalist of the prestigious Dalai Lama Fellowship, was selected as one of the 8 Nigerian recipient of 2021 Diana Award in remembrance of Princess Diana of the British Royal Family, for the recognition of his works in the health space, and recently received the Passion in Science Awards as one of the 12 scientists globally, and his masters thesis emerged the winner of the Cambridge Public Health Early Career Researchers competition Prize on advancing precision public health.



GIFTY ADDICO
Resident Representative United Nations
Population Fund, (UNFPA) Nigeria

In her role as UNFPA Resident Representative, **Gifty Addico** provides overall vision and leadership for the work of UNFPA in Nigeria and is accountable for the implementation of UNFPA’s country programme and operations.

A national of Ghana, Gifty brings over 25 years of experience in strategic leadership in international development and health programmes at global and national levels, with a focus on developing countries.

Prior to assuming her role as Resident Representative, Gifty was most recently Chief of the Commodity Security branch in the Technical Division of UNFPA, providing strategic direction and technical leadership for UNFPA’s work in family planning and reproductive health supplies.

Gifty has also served in several capacities in UNFPA including as Technical Adviser in the Technical Division, New York, and in the East and Southern Africa Regional Office, Johannesburg; Humanitarian Emergency Coordinator in Yemen; UN Reform Specialist and Policy Adviser in Rwanda, and Sexual and Reproductive Health Specialist in the UNFPA Country Support Team (CST), Addis Ababa. Prior to these appointments, Gifty worked in various positions with the Government of Ghana at district levels and at the School of Public Health, University of Ghana.

Gifty is a medical doctor by training. She has a Master of Public Health (MPH), from the School of Public Health, University of Ghana, and a Medical Degree from Kwame Nkrumah University of Science and Technology, Kumasi Ghana.



OLUWAFIKAYO ADEYEMI-BENSON

Oluwafikayo Adeyemi-Benson is a dedicated professional at the forefront of healthcare and global initiatives. As the Executive Director of the Sage and Enamel Foundation (SANDEF), the Benson Adeyemi Foundation (BAF), and the Director of Global Goals at UNA-USA Greater Chicago Area, Oluwafikayo brings a wealth of experience and expertise to his roles.

He obtained his Medical Degree (MD) from Ladoké Akintola University of Technology, a Master of Public Health (MPH) from the University of Illinois at Springfield (UIS), and a Doctor of Philosophy (PhD) in Community Health and Preventive Medicine from University of Illinois at Urbana-Champaign (UIUC). His commitment to education led him to become an adjunct faculty member in UIS's Public Health Department, where he shares his knowledge by teaching Biostatistics.

Before pursuing his Master's in Public Health, Oluwafikayo accumulated extensive experience working with various hospitals and community health care centers in Nigeria. He is a dedicated volunteer for community health initiatives, with a particular interest in nutrition, maternal health, and addressing health disparities. He firmly believes in the equal rights of all individuals.

Oluwafikayo's professional journey includes valuable contributions at the Illinois Department of Public Health (IDPH) Division of Infectious Diseases.



OLUWATOYIN CHUKWUDOZIE

Represented by [Sandra Jonathan](#)

Sandra Jonathan is a gender expert with over 5 years experience in championing and advocating for the rights of women and girls in their diversity, with focus on ending Gender Based Violence.

With a strong commitment to social justice and gender equality, Sandra has devoted her career to developing and contributing to impactful initiatives that empower women and girls to reach full potential.

She has led several advocacy efforts in Nigeria aimed at addressing gender discrimination and violence. She actively engages with communities, and policy makers to amplify women's voices in decision making at all levels, fostering an environment where their needs and perspectives are prioritized.



PROFESSOR IBIWARI EREKOSIMA

BMedSc, MBBS, MMedSc, MAcadMEd,
PGCME, SFHEA UK, FRCP (Lond),
FRCP (Edin), FWACP

Professor Ibiwari Erekosima is a Consultant Renal Physician and Clinical Academic working with the Salford Royal Hospital Manchester which is part of the Northern Care Alliance NHS Foundation Trust Manchester UK where he provides general nephrology, pre-dialysis, dialysis and kidney transplant services. He is an Honorary Senior Lecturer/Clinical Teaching Fellow at the University of Manchester Medical School and Honorary Visiting Professor of Medicine and Medical Education to the University of Port Harcourt, Nigeria. He obtained his MBBS degree at the University of Port Harcourt, in 1988 and a master's degree in Nephrology and Medical Education from the University of Sheffield and Edgehill University Ormskirk Merseyside UK. He is a Fellow of the Royal College of Physicians London and Royal College of Physicians Edinburgh. He is also a Fellow of the West African College of Physicians. He was awarded the internationally renowned Senior Fellowship of the Higher Education Academy (SFHEA) UK in recognition of his strategic influence as an educational leader in medical education in the UK and Internationally. He is a member of the Academy of Medical Educators UK.

He has a scholarly profile with several national/international conference presentations and publications in peer reviewed journals.

He has keen interest in the development of sustainable renal care and training in Africa through the advancement of global nephrology program of the International Society of Nephrology (ISN).

He pioneered the International Society of Nephrology Sister Renal Unit (ISN-SRC) program and partnership as liaison officer between the Salford Royal Hospital UK and University Port Harcourt Teaching Hospital Renal Unit.

He has established a national and international profile in the field of clinical teaching and medical education for both undergraduate and postgraduate medical trainers in the Northwest of England and has contributed immensely to delivering the medical education workshops and the master's degree program in Medical Education of the College of Health Sciences University of Port Harcourt. He was awarded the Postgraduate Tutor of the Year 2023 by Health Education England Northwest in recognition of his contribution to undergraduate and postgraduate medical in Northwest of England. He is the International Director of the Institute of Medical Education in the Bayelsa Medical University Yenagoa.



THE MODERATORS



DR OLUFUNMIKE OYEKUNLE

Dr. Olufunmike Oyekunle is a newly graduated medical doctor from the University of Ilorin, Kwara state Nigeria who is passionate about contributing her quota to the advancement of SDGs 3 & 5 through volunteering, project planning and execution.

Dr Oyekunle is the convener of The Gender Dialogue With Funmike, a stage committed to promoting gender equality and fostering meaningful discussions on gender-related issues.

During her time as a medical student, she gained over five years of experience in leadership and administration. She was actively involved in her immediate medical students' association, ILUMSA, as well as organizations such as NiMSA and FAMSA.

Her interests include Sexual and Reproductive Health and Rights, Gender Equality, and Research. She strives to be a leading changemaker in ending sexual and gender-based violence in her immediate community and globally through advocacy and community engagement.

Previously, Dr. Oyekunle served as the Kwara State Coordinator and program officer at Value Female Network, a non-profit organization committed to addressing deleterious gender issues, particularly Female Genital Mutilation. This experience has further shaped her commitment to gender equality and women's rights.

As a fresh medical doctor, Dr. Oyekunle continues to combine her medical expertise with her passion for social change, working towards a more equitable and healthier society, particularly for women and girls.



DR ESTHER IFY EZEZ

Esther Ify Ezea is a Medical Doctor who graduated from University of Abuja, she currently just completed her Housemanship training at National Hospital Abuja, she is passionate about public health and leadership and have actively been involved in politics and advocacy through out her years in the University of Abuja. She held various leadership positions in the University of Abuja Medical Students Association (UAMSA) where she served as one time Director of Welfare, Vice President and Chairperson of 2019 University of Abuja Medical Students Association UAMSA Health week. In the Nigerian Medical Students Association (NiMSA) she served as National Secretary of Standing Committee on Capacity Building 2019, Director-Female International Summit,2020, and 1st ever coordinator of NiMSA International Health Summit, 2021. In 2022, she emerged President of University of Abuja Medical Students Association; the first female President of the Association since inception. She is also passionate about global surgery and was one time the Head of Advocacy, International Student surgical Network (INCISION Nigeria) Her passion for Sexual and Reproductive Health and Right led to her being selected for a fully funded Ipas SHRH advocacy training in 2019 and Royal College of Obstetrics and Gynecology Sexual and Reproductive Health Champion Network training in 2022.

She has been a nominee and recipients of numerous awards and certifications; of notable mention are, Nominee, HER global leaders Awards, 2020, First prize, 'Take back Nigeria' essay competition, 2020, Best pitch, Planned parenthood/family planning Conference,2021, Most popular female and Female Personality of the year of her MSA in 2019, best Performing NEC member 3rd quarter of the 2021, NiMSA administration.

She is the convener of AUDHERCITY, a groupchat where she and other young women with like minds motivate each other and help build confidence to excel in various areas of life, especially in leadership.

In 2022, she founded her NGO Healthy Neighborhood Africa, an NGO focused on Rural health documentaries and medical outreaches with the goal of ensuring that everyone in Africa irrespective of their socio-economic status should have access to quality health care services, this they have been able to push through free medical outreaches, health education and advocacy and have won grants to support the goal.

She is also a writer and a public speaker.



KHALIL-UR-RAHMAN ABDULLAH

Khalil-ur-Rahman Abdullah is a dedicated medical doctor and project manager with a keen interest in global health systems research and healthcare project management. With over five years of experience working at the intersection of the above, he has continuously leveraged his skills to improve healthcare delivery, especially in vulnerable and underserved populations.

He recently completed his housemanship with the Lagos State Health Service Commission in September 2024, where he gained hands-on experience in patient care and clinical management.

Previously, he worked as the Project Manager at the African Public Health Students Network Initiative, overseeing program design, monitoring, and collaboration efforts aimed at improving public health outcomes across Africa between July 2022 – June 2024.

In addition to his clinical and project management roles, Khalil-ur-Rahman interned at the Kwara State Primary Healthcare Development Agency and was directly involved in data collection and analysis during supportive supervision visits to primary healthcare centres across all local governments in Nigeria under the Accelerating Nutrition Results in Nigeria (ANRiN) Programme between April and June 2022 at the University of Ilorin where he had his undergraduate medical education. He was the pioneer chairman of the University of Ilorin Medical Students Association Research and Journal Club, where he led efforts to improve research skills among medical students. His leadership and dedication were recognized when he was named one of the 100 Most Reputable Students at the University in 2019, out of a student population of 45,000. That same year, he received the Awofeso Young Researcher's Award for his "distinguished contribution to medical research at the Undergraduate Level."

He holds certificates in Leadership & Management in Health and Project Management in Global Health from the University of Washington, and has consistently demonstrated strong leadership, as evidenced by feedback from peers and project evaluations.

In his free time, Khalil-ur-Rahman enjoys taking walks, reading autobiographies and memoirs, or playing football.



DR OLAWALE MAYOMIKUN

Dr. Olawale Mayomikun is a medical doctor with a keen interest in public health and infectious diseases. He graduated with a Bachelor of Medicine, Bachelor of Surgery (MBBS) from Bowen University, Nigeria, where he also earned a Bachelor of Science (Hons) in Physiology. His academic journey has been marked by excellence, with several distinctions and awards.

Dr. Olawale has enriched his education with a series of micro-masters from the University of Washington, focusing on Policy Development and Advocacy in Health, Project Management in Global Health, and Leadership and Management in Health. He is a Fellow of LEAP Africa and was part of the YALI-Africa 2020 cohort, recognized among the top 80 young change-makers across Africa that year.

In 2020, he made history as the first Student Vice Chancellor of Bowen University for a day, a pioneering role in Nigeria's educational landscape. His commitment to leadership is further exemplified by his service as Secretary to the Federation of African Medical Students' Association, Policy and Advisory Council (F-PAC) in 2021, and his contributions to the FAMSA Standing Committee on Health and Environment.

With extensive experience in health initiatives, Dr. Olawale has served in various leadership roles, including President of the Bowen Association of Medical Students and Convener of the Ogbomosho Health Summit. He has a proven track record in organizing health campaigns, vaccination schemes, promoting research, and addressing public health challenges within underserved communities.

Dr. Olawale has also contributed to research on infectious diseases and public health, with publications that address critical issues in healthcare. His dedication to improving health outcomes in Africa is evident in his active participation in initiatives aimed at combating antimicrobial resistance and enhancing healthcare access.



MISS FAITHFULNESS OMOTOSHO

Miss Faithfulness K. Omotosho is a 4th year medical student at the College of Health Sciences, Obafemi Awolowo University, Ile-Ife, Nigeria. She obtained a First-Class Honors degree in Biochemistry from the Federal University of Technology, Akure (FUTA) where her interest in research was birthed. With an interest in translational research (bench to bedside) and medical oncology, particularly in women's reproductive health and wellbeing, her long-term goal is to become a physician-scientist, merging medical proficiency with research to drive significant advancements in these fields.

As a budding student researcher, she was selected as a 2024 Pan-African Organization for Health Education and Research (POHER) Scholar from Nigeria for the research mentorship program. She was selected as a 2024 POHER-AHPBCC Science Communication Fellow alongside 10 other medical students from Africa and received a travel grant award to attend the 3rd annual Meeting of the Africa HepatoPancreatoBiliary Cancer Consortium (AHPBCC) Meeting in Mombasa, Kenya.

Faithfulness co-authored an unpublished paper titled "Assessment of Knowledge, Attitude, and Willingness to Pursue Oncology Specialty Among Undergraduate Medical Students in Southwest, Nigeria (2022)." This paper won the Best Oral Presentation award at the 3rd scientific conference of the Obafemi Awolowo University Medical Student's Association and was accepted for a poster presentation at the African Organization for Research and Training in Cancer (AORTIC), one of the largest African-based non-governmental organizations dedicated to cancer control and palliation in Africa.

With a strong commitment to promoting and upholding medical ethics, Faithfulness leads the research team for the MAKAMEDS study, assessing Nigerian medical students' knowledge of medical ethics and exploring its impact on their perspectives as future physicians. She serves as a student editor at the International Journal of Medical Students, an open-access, peer-reviewed scientific journal (ISSN 2076-6327). Faithfulness demonstrates exceptional organizational, time management, effective communication, and multitasking skills through volunteer work and dedication to serving others.

She contributes to empowering women in STEM fields as Mentorship Program Relations for Empowering Female Minds in STEM (EFEMS), a Canadian non-profit organization spearheaded by African women for African women, working to decrease the STEM gender disparity in Africa by providing opportunities for mentorship, funding, and professional development.

She has held various leadership roles, including Assistant Program Coordinator for the Standing Committee on Medical Education (SCOME) and Secretary and Medical Content Writer for the NiMSA Medical Ethics Advocacy within the Obafemi Awolowo University Medical Student Association (IFUMSA).

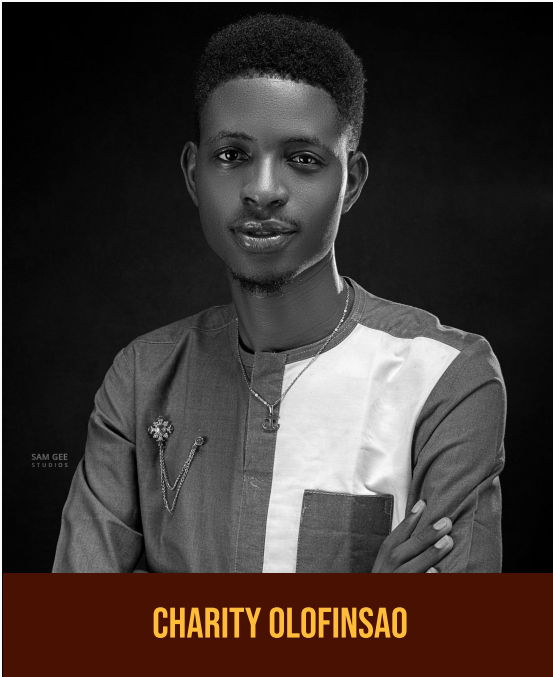
Faithfulness received notable recognition for her exceptional achievements, including the Nigerian Society of Biochemistry Student Award of Excellence and the FUTA School of Sciences Dean's Award. She maintains active membership in esteemed professional associations, such as the World Medical Association, Oncology Interest Group Nigeria, and American Society of Clinical Oncology (ASCO).

Outside of academics and professional pursuits, Faithfulness finds joy in her faith, enjoys playing the guitar, engages with like-minded individuals sharing her interests and aspirations, and continues learning and growing personally and professionally.



MISS OLUWAFISAYOMI ADEBOWALE

Fisayomi Adebowale is a medical student at Obafemi Awolowo University with a robust background in health communications, community outreach, and digital health initiatives. Over the years, she has led impactful health-based projects, from moderating and facilitating panels and workshops to organizing health fairs and community education on essential issues like reproductive health, mental wellness, and infectious diseases. With a unique skill in inspiring and navigating purposeful dialogues that lead to implementable decisions, she has collaborated with diverse stakeholders to enhance access to healthcare information and drive health awareness across Nigeria.



CHARITY OLOFINSAO

Charity Mosimiloluwa OLOFINSAO is a handsome young man, the firstborn and son of Pst S.A. and Dr. O.M. Olofinsao. Born in Ile-Ife in the late 90s, he however hails from the indigenous core of Ondo central, Ilara-Mokin, Ondo State. He had his primary school education at The Vine Nursery and Primary School after which he proceeded to Ambassadors College Ile - Ife for his secondary school education, from which he finished as the Best Graduating Student in 2014. He gained admission into Obafemi Awolowo University, Ile-Ife in 2015 to study Medical Rehabilitation and after a spell in the department, switched to study Medicine.

He is an excellent public speaker and debater, establishing his footprints on the sands of time as an excellent speaker, having won a myriad of competitions for himself and the department both locally and internationally.

A handful of his accomplishments include;

- Winner and Best Poet at The Pan African Bates Motel Open, 2020
- Winner and Best Speaker at AMSUL Debate Championship, 2021
- Semifinalist Breaking Adjudicator at the July Open, British Parliamentary Debate Championship 2020
- Finalist at British Parliamentary Debate Championship for Medical Students, 2021
- Quarterfinalist, Pan African University British Parliamentary Debate Championship, 2020
- Winner and Best Speaker at IFUMSA Health Week Debate, 2021, to mention a few.

In the department, he has contributed by serving in various capacities, including:

- Debate Coach, IFUMSA Quiz and Debate Club
- Debate Chairman, 2022 Health Week LOC
- Secretary, Standing Committee on HIV/AIDS and Sexual Reproductive Health (SCORA)
- Moderator, Panel Session, IFUMSA Doctor plus 5.0.
- Moderator, Panel Session, 36th IFUMSA Health Week, 2023
- Proud member and currently Serving as the Assistant Representative of the Part 6 Class (Stalwarts).

He is an outstanding writer, with multifarious honours to show for his proficiency. He is a Christian, a Musician and an avid lover and savvy user of technology.



OLUWAPELUMI SOBAYO

Oluwapelumi Blessing Sobayo is a fourth-year medical student at Obafemi Awolowo University, known for her active engagement in university politics and student-led initiatives. With a dedication to advocacy and representation, she strives to amplify student voices and address critical issues impacting her peers in medical school.

Oluwapelumi's commitment to social justice and human rights extends beyond her campus. As a human rights educator and trainer with the International Federation of Medical Students' Associations (IFMSA), she plays a pivotal role in educating her peers on essential human rights principles and practices. Her dedication to the cause led to her appointment as the IFMSA Regional Assistant for Africa within the Standing Committee on Human Rights and Peace (SCORP). In this regional leadership role, Oluwapelumi worked closely with student organizations across Africa to promote peace, advocate for human rights, and foster a culture of empathy and equity within the healthcare field.

Her contributions include organizing workshops, developing training materials, and supporting local and regional initiatives that empower medical students to advocate for patients' rights, health equity, and social justice. Her leadership and dedication reflect her vision of a healthcare system that respects and upholds the dignity and rights of all individuals.

Oluwapelumi is widely regarded among her peers and mentors as a proactive leader and compassionate advocate. Her unique blend of medical training, advocacy experience, and leadership skills positions her as an inspiring force in both local and international medical student communities, paving the way toward a more inclusive and just healthcare future.



DR. MULI OPEYEMI AMINAT

A graduate of Medicine and Surgery from the prestigious Obafemi Awolowo University(OAU) , Ile Ife , Osun State, Nigeria. A Public Health Enthusiast with keen interest in Policy Making and Healthcare Financing.

The Former Vice President, Obafemi Awolowo University Medical Students' Association, Ile Ife, Osun State. Former Director, Standing Committee on Population Activities, Federation of African Medical Students Association.

She was the SouthWest Regional Coordinator, Nigerian Medical Students' Association (NiMSA) for the year 2020.

She is a Mental Health Advocate, and a former Counselor at Mentally Aware Nigeria Initiative(MANI).

She is the Executive Director of 15- J Foundation founded in 2018, a Non-Governmental Organisation aimed at ensuring the wholesome health and wellbeing of the less privileged including but not limited to orphans, motherless babies, Internally displaced people, refugees, victims of war and other natural disasters and other categories of destitutes through quarterly visitations to common places in the SouthWest and has constantly provided them with basic amenities of life including food, clothing and shelter. The organisation has also further imparted their lives by providing them with quality education through support and aid provided by both government and in collaboration with other non governmental organisations. She currently serves as the Director of Medical Outreaches for Auxano Foundation for Empowerment and Development (AFED) , a Non-profit Organization dedicated to advancing social justice and community development.

She also volunteers with the National Agency for the Prohibition of Trafficking in Persons (NAPTIP) as a clinician where she sees to the health needs of victims of human trafficking and other similar human rights violations as well as the suspects.



OLUWATIMILEYIN SAMUEL AJAO

Oluwatimileyin Samuel Ajao is a dedicated third-year medical student at Obafemi Awolowo University, Ile-Ife, renowned for his skills as a public speaker and accomplished event host. Known for his professionalism and charisma, he has successfully hosted a range of corporate events and conferences, earning a reputation for his engaging stage presence and adept communication skills.

A passionate advocate for student leadership, advocacy, and service, Oluwatimileyin is actively involved in initiatives that uplift and empower his peers and community. His commitment to these values is evident in his extensive involvement with the Obafemi Awolowo University Medical Students' Association (IFUMSA), the Nigerian Medical Students' Association (NiMSA), and other organizations. Through these roles, he has worked to advance the welfare of students, promote health awareness, and advocate for positive change within the healthcare field.

Beyond his leadership roles, Oluwatimileyin is a lifelong learner who believes in the power of collaboration and service. He continually seeks opportunities to contribute meaningfully to student organizations and health-focused initiatives, making a lasting impact within and beyond his academic community.



THE FACILITATORS



OREOLUWA ODUTOYE

Oreoluwa Odutoye, a Nigerian poet and a 5th year medical student at Bowen University, is a passionate advocate for equitable and sustainable healthcare access. Driven by this vision, he seamlessly blends his expertise in medicine, finance, public speaking, poetry, and research to amplify advocacy and awareness initiatives.

A gifted communicator, Oreoluwa has excelled in various platforms, including the 2022 All Nigerian Universities Debate and Public Speaking competition where he was a top ten speaker, and the Royal Rhetorics Public Speaking Competition, which he won. His work has been published in the world record Longest Anthology, Tacenda Publications' "Musings - Mundane and Mortal," and other publications.

As the Vice President External of the Nigerian Medical Students Association (NiMSA), Oreoluwa actively contributes to the organization's mission of promoting medical education and healthcare in Nigeria. A strong believer in creative thought and continuous learning, he aspires to forge a career at the intersection of literature and medicine, paving the way for a future where healthcare is accessible and affordable for all.

When he's not being stressed by Medical school, he's being stressed by Manchester United Football Club.



CHALATY A. YOUNG

Chalaty A. Young is a driven fourth-year medical student at the A. M. Dogliotti School of Medicine, College of Health Sciences, University of Liberia, with a strong commitment to advancing healthcare and community empowerment. With over a decade of experience in leadership, education, and community service, Chalaty is actively involved in roles that bridge academics, advocacy, and volunteerism. He currently serves as an adjunct faculty member in the Department of Biological Sciences at both the University of Liberia and the African Methodist Episcopal University, where he leads laboratory sessions and mentors students in practical, hands-on applications of their studies.

Chalaty began his academic journey with a Bachelor of Science in Biology and Chemistry and has continued to expand his skills through medical training, certification in Basic Life Support (BLS), and engagement in healthcare policy

His dedication to student advocacy is evident through his leadership positions in organizations such as the Federation of African Medical Students' Association (FAMSA), where he currently serves as the West Africa Regional Coordinator, and the Liberia Medical Students' Association (LMSA), where he served as Secretary General. These roles allow him to champion the wellbeing of medical students, foster partnerships, and lead initiatives aimed at improving healthcare education.

Beyond his academic and professional pursuits, Chalaty is passionate about volunteerism and youth empowerment. As Executive Supervisor of the Liberia Association of Volunteers (LAV), he oversees community-based projects that focus on health education and youth engagement. Chalaty's career is guided by a vision to bridge gaps in healthcare access and foster patient empowerment, with aspirations of making a lasting impact both in Liberia and across Africa.

In his personal time, Chalaty enjoys reading, writing, making new connections, and exploring collaborative opportunities that align with his goals of healthcare improvement and community service.



MUHAMMAD ISA JAFAR

Muhammad Isa Jafar, a dedicated fourth-year medical student at the Federal University Dutse, stands out as a passionate advocate for public health and positive change. His commitment to service is evident through his various roles and engagements within both local, national and international spheres.

Locally, in 2020, Muhammad served as a distinguished congressman, representing medical students at the university's Students Representative Assembly. Simultaneously, he assumed the role of Parliamentary Secretary, showcasing his multitasking capabilities and leadership acumen. Further attesting to his skills, Muhammad served as the Secretary of the Independent School Electoral Committee in 2022 and took on the role of Organizing Officer in the same committee in 2023, demonstrating a consistent commitment to excellence, critical thinking, and unwavering integrity.

On a national scale, Muhammad actively contributes to the Nigerian Medical Students Association (NIMSA). In 2020, he served as the Local Officer for the Standing Committee on Sexual and Reproductive Health and Rights, including HIV and AIDS (SCORA). Additionally, he held the position of Secretary for the Standing Committee on Research Exchange. Internationally, Muhammad has left a lasting impact, serving as the Program Officer at the Standing Committee on Health and Environment (SCOHE) for the Federation of African Medical Students Associations (FAMSA) in both 2021 and 2022. In 2023, he ascended to the role of Chairperson, a testament to his exceptional team-building skills, unwavering commitment, and dedication to excellence. His outstanding contributions were recognized with the prestigious Outstanding Executive Council Member of the Year award. Currently, Muhammad holds the position as the chairperson of the 2024 FAMSA Policy Advisory Council, heading the drafting of over 10 policy statements presented at the 74th Session of WHO Afro meeting in Brazzaville Congo. Also, pioneering and leading the development of FAMSA Internal Working Policies, External Policies and FAMSA Strategic Plan.

Within the International Federation of Medical Students Associations (IFMSA), Muhammad has actively participated in various programs, earning the distinction of becoming a Certified IFMSA Trainer. In this capacity, he takes on the responsibility of training fellow medical students in essential leadership and professional development skills. Muhammad's multifaceted involvement and contributions underscore his commitment to making a meaningful impact in the field of medicine and beyond.



DIMEJI ABDULSOBUR

Dimeji Abdulsobur Olawuyi is a fifth-year medical student at the College of Medicine, University of Ibadan, with extensive involvement in health advocacy, research, and public health initiatives across Africa.

A dedicated member of the Federation of African Medical Students' Associations (FAMSA), Dimeji serves as the Board Secretary at FAMSA Headquarters, where he oversees board correspondence, document organization, and research projects, bringing a meticulous approach to improving internal processes. As a former Program Officer for the FAMSA COVID-19 Technical Working Group, Dimeji contributed significantly to pandemic response efforts, managing awareness projects and disseminating crucial updates to keep communities informed. His commitment to research is evident in his role as Assistant Editor at the Journal of African Medical Students, where he ensures quality control in peer-reviewed publications. Dimeji's academic contributions include peer-reviewed publications in local and international journals on topics such as COVID-19 impacts and vaccination barriers, showcasing his drive to advance health outcomes in underserved areas.

Beyond his editorial and administrative roles, Dimeji is also recognized for his design and communications expertise, having held positions such as Program & Design Officer for FAMSA-SCOMER, where he played a vital role in promoting medical education initiatives. His work has earned him several distinctions, including the AMR Youth Champion Award and recognition as FAMSA PCC Member of the Year. At the 2024 FAMSA General Assembly, Dimeji will bring his well-rounded expertise to facilitate a parallel session on lessons learned from the COVID-19 pandemic, blending his experience in public health, research, and organizational leadership to offer valuable insights into future health threat management.



CHIDINMA NWODO

Chidinma Nwodo is a trailblazing penultimate clinical student who is a firm believer on the importance of capacity building, growth of expertise and authentic leadership.

She is an exceptional clinical student at Obafemi Awolowo University, Ile-Ife, Nigeria, who has distinguished herself through her unwavering dedication to academic excellence and passionate advocacy. As a mental health enthusiast, African politics advocate, and public speaker, Chidinma embodies a unique blend of leadership, compassion, and intellectual curiosity.

Currently serving as Chairman of the IFUMSA Care Team, Chidinma plays a pivotal role in supporting the wellbeing and mental health of medical students within the association. Her commitment to this cause stems from a deep understanding of the challenges faced by her peers and a desire to create a supportive community that fosters emotional resilience.

Her leadership acumen and passion for African politics led to her historic appointment as the first female President of the National Association of Delta State Students. This achievement not only underscores her exceptional leadership skills but also highlights her ability to break down barriers and pave the way for future generations.

Throughout her academic journey, Chidinma has consistently demonstrated excellence and a penchant for achievement. Notably, she emerged as a Top 10% Public Speaker at the Delta State Got Talent competition, showcasing her remarkable communication skills and ability to inspire and engage audiences. Additionally, she has been recognized as a Carrington Youth Fellow, further solidifying her reputation as a rising leader in her field.

She worked with the Pioneer Medical Initiative, a non-profit organization dedicated to providing optimal healthcare to underserved communities in Nigeria which focuses on delivering healthcare to vulnerable groups in rural and underserved communities, advocating for their inclusion in the healthcare system, and securing funding to provide universal coverage. Beyond her impressive achievements, She is deeply invested in community engagement and peer support. As the founder of a thriving online community, she provides a platform for medical students to connect, share experiences, and find inspiration. This initiative exemplifies her commitment to fostering a culture of empathy, understanding, and collective growth.

Her interests extend beyond her academic pursuits. She is an avid writer, comics creator, and singer, leveraging these creative outlets to express herself and connect with others. Through her diverse passions, she showcases her unique blend of creativity, intellectual curiosity, and emotional intelligence.

In conclusion, she embodies the qualities of a trailblazing leader, compassionate advocate, and exceptional scholar. Her dedication to mental health advocacy, African politics, and community engagement inspires her peers to prioritize their wellbeing, engage in meaningful discourse, and pursue their passions with purpose and conviction. As Chidinma continues on her academic and professional journey, her impact will undoubtedly resonate within her community and beyond.



KOREDE ADEKANYE

Korede Adekanye is a 5th-year medical student at Bowen University, with a committed interest in global health, focusing on infectious diseases, One Health, and public health advocacy. A firm believer in the importance of knowledge-sharing and capacity building, Korede has actively pursued advanced learning through various courses, summer schools, and specialized trainings, including programs on global health and vaccinology.

In his role as Local Officer for the NiMSA Technical Office for Infectious and Communicable Diseases (TOICD) at his MSA level, Korede led impactful advocacy drives focused on immunization and community outreach programs to raise malaria awareness. His passion for tackling antimicrobial resistance (AMR) has motivated his work as the president of his university's AMR Club, where he collaborates with peers to champion responsible antimicrobial use and spread awareness on this urgent public health threat.

Korede's leadership extends beyond his university. As a certified IFMSA Trainer, he brings valuable experience in training and mentoring, notably coordinating educational programs for One Health Lessons, a nonprofit that empowers volunteers to advocate for the interconnectedness of human, animal, and environmental health. Through these diverse roles, Korede demonstrates his unwavering dedication to global health, educating, and empowering his peers to meet the pressing health challenges of today.



PATIENCE ONAJOMO IMEKE

Patience Onajomo Imeke is a brilliant, young and versatile 4th year Medicine & Surgery student at the Ambrose Alli University, Ekpoma, Edo State, Nigeria. She was born in Nigeria, hails from Urohbo tribe, Delta State, resides in Lagos and is The Vice President of Ambrose Alli University Medical Students Association (AAUMSA) and District Secretary (Special Duties) of Rotaract District 9141 (which is the Rotaract Clubs in Edo, Delta, Bayelsa & Port-Harcourt State). She is the founder of The SMILE BETTER INITIATIVE centred on promoting, educating and empowering communities through SDGs 3: Good Health and Well-being, 4: Quality Education, 6: Clean Water and Sanitation and 2: Zero Hunger.

For as long as she could remember, Patience has always been passionate about advocacies on Women Empowerment, Child Abuse, Social Impact, Public Health, Quality Education and Leadership, this drive translated itself into Patience's experiences and involvement in the community and her continuous dedication to Social, Health and Community Action projects. Throughout her teenage years and currently in her university years, she has successfully organized Philanthropic projects, Health campaigns and Social-Economic movements; which through her remarkable leadership, she plans to continue in the future in a larger scale. Patience (popularly called ONA or VERSATONA) aspires to further her advocating skills professionally where she can learn and cultivate these essential tools to promote and provide her own contributions in the development of community and countries in a larger scale.

She was also The President, Rotaract Club of Ambrose Alli University (2022-2023), SCOEPA Liaison Officer to NGOs (2023), AAUMSA Liaison Officer to FAMS-SCOHE (2023), Special Assistant on Finance & Welfare to the NiMSA VP Internal (2023), National Programs Coordinator to the NiMSA Mwan Liaison Officer (2023), NiMSA Director on Planning, Implementation and Evaluation 2022, SCOEB National Director on Budget and Planning 2022, AAUMSA Liaison Officer to FAMS- SCOPA 2021 and AAUMSA Liaison Officer to NiMSA SCOPH 2021 but to mention a few. She is sure versatile by nature and an advocate for inclusive politics.



ABSTRACTS

A REVIEW ON DIETARY MANAGEMENT TO ENHANCE GUT MICROBIOME IN INFANTS AND THE IMPORTANCE OF EXCLUSIVE BREASTFEEDING.

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Background: Bifidobacterium is an important type of gut microbiome in infants which plays an important role in the maturation of the immune system among other important functions. Development of these gut microbiomes in infancy occurs during a 'critical window' and a disturbance in this process may cause immune diseases and allergic diseases. Therefore disordered gut microbiota health early in life can have lifelong ramifications. Gut microbiome health has received a significant amount of attention in recent years; however dietary management of gut microbiomes is overlooked especially in low and middle-income countries, for instance most people use antibiotics treatment in infant infections without knowing it's implication on their gut microbiome furthermore only 37% of children younger than 6 months of age are exclusively breastfed. This review aimed to explore effective management strategies to enhance gut microbiome and its importance in preventing diseases.

Methods: A rapid review of scientific literature was conducted to consolidate currently available information on gut microbiome research. A comprehensive and systematic search of literature from November 1, 2010 to December 20, 2023, was conducted on Google scholar and pubmed to identify studies eligible for inclusion. Of the 34 papers identified, 18 were included in this review.

Results: The findings show that most studies suggest that exclusively breastfeeding during the initial six months after birth promotes a healthy gut microbiota, reducing the risk of diseases like sepsis, food allergies, asthma, Atopic Dermatitis, Diabetes and Autism. The findings also underscore the significance of introducing supplementary foods such as fiber-rich foods like whole grains, vegetables; fermented foods like yogurt; healthy fats like nuts and also highlights the importance of avoiding certain foods like ultra-processed foods like fizzy beverages and packaged snacks, refined sugar to preserve a well-balanced gut microbiome.

Conclusion: In conclusion, mothers are recommended to exclusively breastfeed their babies during the initial 6 months, and couple it with appropriate supplemental foods after the 6 months.

Key words: Gut Microbiome in infants, Exclusive breastfeeding

THE PERSPECTIVES OF EYE CARE PROFESSIONALS ON THE INTEGRATION OF ARTIFICIAL INTELLIGENCE IN EYE CARE PRACTICES: A SYSTEMATIC REVIEW.

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Background: Artificial intelligence (AI) technology has recently been integrated into the health-care industry, including in optometry and ophthalmology. This systematic review assessed the opinions (i.e., perspectives, concerns, and degrees of acceptance) of eye care professionals regarding AI integration into eye care practices.

Method: The literature search was conducted using the PubMed and MEDLINE databases. A total of 780 related articles were identified. Among these articles, 304 duplicates were removed, 450 articles were excluded after reviewing the abstract, and 18 articles were excluded after reviewing the full text as these articles were not relevant and/or did not report surveys. The remaining eight included studies were assessed accordingly.

Results: Most ophthalmologists and optometrists had a positive perception toward incorporating AI into eye care practices, and these professionals shared that AI would effectively enhance clinical eye care practices. However, certain eye care professionals were concerned about the diagnostic accuracy of AI, the high implementation costs, privacy issues, and the quality of AI-integrated patient care. Several eye care professionals also expressed concerns that AI technology could eventually replace some of their major responsibilities in the practice, suggesting that stakeholders should essentially address these concerns and ensure that AI integration in eye care practices is implemented thoughtfully and ethically to maximize its benefits while preserving the quality of patient care.

Conclusion: This systematic review highlighted the predominantly positive attitude among eye care professionals toward AI integration into eye care practices, warranting further research and collaboration between AI developers and eye care professionals to effectively address the current challenges. This could result in the increased integration of AI technology into eye healthcare systems across various medical facilities, particularly in Africa.

Keywords: Artificial intelligence, perspective of ophthalmologists, perspective of optometrists, eye care

LEVERAGING THE STUDENT WORKFORCE TO PROMOTE DIGITAL TRANSFORMATION OF HEALTH SYSTEMS IN AFRICA: CROSS-DISCIPLINARY STRATEGIES FOR ENHANCING PUBLIC HEALTH OUTCOMES.

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Background: Digital transformation in Africa's health systems offers a significant opportunity to enhance public health outcomes through innovative technologies (Africa CDC, 2023). Telemedicine and health data analytics are pivotal tools in addressing healthcare challenges, such as limited access to care in remote areas and resource optimization (Parthasarathi et al., 2024). The integration of digital technologies in health systems across the continent has the potential to address critical challenges, including inadequate healthcare access, workforce shortages, and inefficiencies in care delivery (Omaghomi et al., 2024). To maximize the impact of these technologies, it is crucial to engage the student workforce—an underutilized yet powerful resource—in driving innovation and adaptation within African health systems.

Methods: A comprehensive bibliographic search was conducted across PubMed, Scopus, and Google Scholar to identify studies published from inception until August 1, 2024. The search utilized keywords such as "Digital Transformation," "Health Systems," "Telemedicine," "Health Data Analytics," "Cross-Disciplinary," and "Public Health. Inclusion criteria were studies written in English that investigated the application of telemedicine and health data analytics in the digital transformation of Low and Middle-Income Countries (LMIC) health systems. Furthermore, case studies of successful student-led initiatives were also included.

Results: The study revealed that student engagement in telemedicine and health data analytics projects significantly enhanced healthcare delivery and management outcomes. Key strategies identified included the establishment of telemedicine hubs in universities and the integration of health data analytics into medical curricula. Cross-disciplinary collaboration among students was found to be essential in developing innovative solutions tailored to the specific needs of African communities. The study also identified potential barriers, such as limited resources and the need for more structured support systems.

Conclusion: The findings underscore the importance of interdisciplinary collaboration and student involvement in driving the digital transformation of health systems in Africa. Leveraging the expertise and enthusiasm of the student workforce will make it possible to implement effective telemedicine and health data analytics solutions that address the unique challenges of healthcare in Africa. These student-led initiatives have the potential to significantly improve public health outcomes and contribute to the sustainable development of health systems across the continent.

Keywords: Digital Transformation; Health Systems; Telemedicine; Health Data Analytics; Cross-disciplinary; Public Health.

THE ROLE OF COMPREHENSIVE SEXUAL HEALTH EDUCATION POLICY TO ADDRESS THE PRACTICE OF FEMALE GENITAL MUTILATION ADOLESCENTS IN NIGERIA: A SYSTEMATIC REVIEW

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Background: Adolescence is a period of sexual maturation and age-occasion sexual vulnerabilities and this necessitates adequate sexual health attention. Therefore, it is essential to have adequate national support and societal support for adolescent sexual health in terms of sexual education. On the contrary, a recent pivotal change occurred on 3 November 2022; the Federal Government of Nigeria sanctioned the removal of sexual health education from the basic education curriculum; despite well-documented evidence that sexual health education is positively correlated with positive sexual outcomes in adolescents. As the practice of female genital mutilation, FGM in Nigeria has a negative sexual health outcome, this study aims to review the role of comprehensive sexual health education in addressing the practice of female genital mutilation among adolescents in Nigeria.

Methodology: This study is a systematic literature review. PubMed, EMBASE and African Journals Online were searched for relevant studies on the incidence of FGM in Nigeria published between 1st January 2018 and 27th July 2023. Risk of bias assessment was done using the JBI Critical Appraisal Checklist for Studies Reporting Prevalence data. 5 articles were included.

Results: The prevalence of FGM has lowered but the number of incidences is still significant as some victims still suffer type I, type II, and the brutal forms of FGM such as infibulations. The only identified factor in the reduction in the prevalence of FGM in Nigeria is the mother's higher education level, with a study showing that the odds of daughters being genitally mutilated can be reduced by up to 40% if the mother has attained higher education. Other factors that contribute to the acceptance of FGM are cultural beliefs in FGM as a rite of passage, religious beliefs, lower socioeconomic status, and residence in rural areas.

Conclusion: This systematic review shows the need for a strong political commitment to comprehensive sexual education policy at the basic education level and in rural areas to reduce the incidence of FGM among adolescents in Nigeria to zero.

Keywords: Sexual Health Education, Female Genital Mutilation, Adolescents, Nigeria

COMMUNITY-LED INITIATIVES: A KEY TO UNLOCKING SUSTAINABLE CHANGE IN THE FIGHT AGAINST GBV AND HTPS IN AFRICA.

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Background: Gender-based violence (GBV) and harmful traditional practices (HTPs) persistently plague communities across Africa, perpetuating cycles of suffering and inequality. These practices, deeply entrenched in cultural norms, undermine the well-being and dignity of women and girls. Addressing GBV and HTPs requires a multifaceted approach that empowers communities to challenge harmful beliefs, advocate for change, and create safe spaces.

Description: This paper examines community-led initiatives aimed at combating GBV and abolishing HTPs in Africa. Drawing on case studies from various regions, we explore successful strategies, challenges faced, and lessons learned. Community engagement, education, legal reforms, and collaboration with local leaders are central to these efforts. Grassroots organizations, NGOs, and governmental bodies play pivotal roles in fostering awareness, providing support, and promoting gender equality.

Lessons Learned:

1. **Community Ownership:** Empowering communities to take ownership of anti-GBV and anti-HTP initiatives is essential. When community members actively participate in designing and implementing programs, they become invested in sustainable change.
2. **Holistic Approaches:** Addressing GBV and HTPs requires holistic approaches that integrate legal, social, and health interventions. Combining awareness campaigns, legal reforms, and psychosocial support yields more significant impact.
3. **Challenging Norms:** Cultural norms perpetuate GBV and HTPs. Community dialogues, workshops, and media campaigns challenge harmful beliefs, encouraging critical reflection and behavior change.
4. **Youth Engagement:** Engaging young people as advocates and change agents is crucial. Youth-led initiatives disrupt generational cycles of violence and promote progressive attitudes.

Conclusion: Empowering communities is crucial for combating GBV and abolishing HTPs in Africa. Our study demonstrates the effectiveness of community-centered approaches in promoting sustainable change. We recommend scaling up community-led initiatives, supporting policy reforms, and fostering collaborative partnerships to eradicate GBV and HTPs in Africa.

Keywords: Gender-Based Violence (GBV), Harmful Traditional Practices (HTPs), Community Empowerment, Africa, Human Rights, Community-Led Initiatives

PROFILE OF ADMISSIONS AND OUTCOMES OF SURGICAL PATIENTS ADMITTED TO THE INTENSIVE CARE UNIT OF IRRUA SPECIALIST TEACHING HOSPITAL: A THREE-YEAR ANALYSIS.

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Background: Intensive care unit (ICU) admissions are crucial for the management of critically ill surgical patients. Understanding the patterns of ICU admission and outcomes is essential for improving patient care, especially in resource-limited settings like Nigeria. This study aimed to investigate the admission and outcome patterns of surgical patients admitted to the ICU at Irrua Specialist Teaching Hospital (ISTH), Edo State, Nigeria

Method: This was a retrospective study conducted at ISTH. Data on biodata, admission diagnoses, length of stay and patient outcomes were collected from the ICU register for all surgical patients admitted to the ICU over a 3-year period, between January 1, 2019 to December 31, 2021, and analyzed.

Results: A total of 341 patients were admitted to the ICU during the study period, out of which 202 (59.2%) were surgical patients, including 129 (63.9%) males. The middle aged and elderly group (40-79 years) accounted for 59.9% (121) of the surgical admissions. The most common sources of surgical admission were general surgery and neurosurgery, accounting for 129 (63.9%) and 34 (16.8%) admissions, respectively. Among surgical patients, the most frequent admission diagnoses were generalized peritonitis secondary to perforated viscus (58, 28.7%), bowel obstruction (28, 13.9%) and traumatic brain injury (22, 10.9%), with case fatality rates of 55.2%, 42.8% and 68.2%, respectively. The mortality rate during the study period was 48.7% (99), and this was significantly associated with patient age ($p < 0.05$).

Conclusion: The high mortality rate highlights the need for improved critical care resources and comprehensive strategies to enhance the management of critically ill surgical patients in similar resource-limited settings.

Keywords: Intensive care, Intensive care unit, Admission, Outcome, Surgical

SURGICAL PRACTICE IN A LOW-RESOURCE SETTING IN AN AFRICAN CONTEXT: THE WAY FORWARD; A NARRATIVE REVIEW.

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Background: A vast array of serious and quite common illnesses, such as obstructed labor, congenital defects, cancer, complications from diabetes, cataracts, hernias, and traumatic injuries, require more than 234 million surgical treatments every year. Most of the world's population lives in low- and middle-income countries (LMICs), where access to necessary surgical treatment is still severely restricted. In spite of the increasing need, there has been almost little discussion in the global health discourse about the development and provision of surgical and anesthetic care in low- and middle-income countries (LMICs). The aim of this study is to examine surgical procedures in low- and middle-income environments, with a focus on Africa, and to develop practical recommendations for enhancing the provision of surgical care.

Methodology: The study utilized five online databases, namely Web of Science, PubMed, Science direct, Semantic Scholar and Google Scholar by using the relevant search terms that were developed for the study.

Result: The retrieved papers were reviewed and discussed in terms of the history of surgery within the African healthcare system and the different surgical specialties obtainable within the region. It also looked at the different progress made over the years and the challenges ravaging the surgical practice of the region. Furthermore, recommendations were made with the focus on multidisciplinary collective efforts and proper engagement with different stakeholders.

Conclusion: Surgery in Africa has progressed to evidence-based practices through international training, yet challenges like poor infrastructure and a lack of qualified surgeons persist, especially in rural areas. Political commitment to healthcare funding in Africa is insufficient, neglecting surgical needs. The emigration of African surgeons worsens workforce shortages. Enhancing surgical care in low-resource settings requires a multidisciplinary approach, including diverse training and improved infrastructure. Collaboration with specialists is vital for comprehensive care. African nations should adopt WHO surgical service standards, emphasizing infrastructure and education for quality evaluation. Strengthening research is essential for evidence-based policies. Policy reforms must tackle physician shortages, improve access, and explore non-monetary incentives. Targeted laparoscopic training should be part of postgraduate programs, with cooperation among governments, international organizations, and healthcare managers crucial for sustainable improvements.

Keywords: Surgery, Low-resource setting, Africa, Public Health.

FEEDING PRACTICES AND CHALLENGES IN PROVISION OF OPTIMAL NUTRITION AMONG YOUNG CHILDREN IN KILIMANJARO VILLAGES TANZANIA

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Background: Exclusive breastfeeding is the practice of giving an infant breast milk only up to the age of six months. Optimal feeding practices among young children with a particular emphasis on exclusive breastfeeding have been kept forward by the government. Now despite the efforts made, still 30% of children have stunting, 3% wasting and 12% underweight giving the need for assessment of nutritional status of young children and barriers faced by caregivers to the lowest level possible. Our study aimed to analyze the prevalence of the prevailing feeding practices and the factors influencing them and barriers faced by caregivers, which is crucial for promoting optimal nutrition, child health and survival in Moshi, Kilimanjaro.

Methods: A cross-sectional study design was employed to collect data from rural villages (Machame and Masama Kati) in Kilimanjaro between August 2023 and June 2024. A representative sample of caregivers of children aged 0–59 months was selected using a systematic random sampling technique. Data on feeding practices, including exclusive breastfeeding, complementary feeding initiation, that is introduction of other foods, were collected through structured interviews and questionnaires. Socio-demographic characteristics and factors influencing feeding practices were also assessed.

Results: A total of 110 Women participated. The prevalence of exclusive breastfeeding up to six months in Kilimanjaro villages was 64.1% due to the factors such as maternal education, access to healthcare services, and cultural beliefs influencing the initiation and duration of exclusive breastfeeding. Overwhelming tasks to women and financial constraints was affecting 35% of women towards providing optimal nutrition. Complementary feeding practices showed variations in the timing of introduction, types of foods given, and 12% adherence to appropriate feeding guidelines.

Conclusion: Although our study has limited generalization feeding practices among young children in rural villages exhibit a complex interplay of cultural, socio-economic, and healthcare-related factors. The findings underscore the need for targeted interventions and education programs to promote optimal feeding practices, including exclusive breastfeeding in these communities. Understanding the determinants of feeding practices can inform the development of context-specific strategies to improve child nutrition and overall health outcomes.

HIV RELATED KNOWLEDGE AND PRACTICES AMONG UNDERGRADUATE STUDENTS IN AFRICA: A CROSS-SECTIONAL MULTINATIONAL STUDY

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Background: Africa has the highest burden of HIV/AIDS globally, with young people being the most affected. This study aimed to assess HIV knowledge and practices among undergraduate students in Africa.

Methods: An analytical cross-sectional study was conducted in ten African countries using an online, self-administered, pre-validated questionnaire. The study was conducted in 10 African countries, located in 5 different regions across Africa including Kenya, Algeria, Botswana, Burkina Faso, Ethiopia, Nigeria, Rwanda, Sudan, Tanzania, and Uganda, during the academic year 2022–2023. A convenience sampling approach was utilized to collect the data. African undergraduates who were 18 years and older, enrolled in universities across ten African countries and were willing to participate and gave an e-informed consent were included.

Shapiro-Wilk test was utilized to check the data normality. Student's t-test and Chi-square test were used for continuous and categorical variables in independent samples. Mann-Whitney U and Kruskal-Wallis tests were used for nonparametric comparisons. Logistic regression was used for identifying the predictors for the knowledge regarding HIV. Significance level was set at $p < 0.05$.

Results: A total of 3727 undergraduate students responded to the questionnaire. Most students were medical students (68.1%), single (94.9%), and living in urban areas (78.7%). The overall median HIV knowledge score was 14, and medical students had significantly higher knowledge than non-medical students ($p < 0.001$). While the students had a strong understanding of HIV transmission, some aspects of their knowledge were inadequate. Most students relied on academic curricula for HIV information (72.3%) and their institutions provided formal HIV prevention strategies (57.8%). A low percentage engaged in risky sexual behaviors. The results indicated that being male (AOR (95% CI) = 4 (1.2–13.2)), pursuing medical education (AOR (95% CI) = 2.4 (2–2.8)), being in the final years of study (i.e. fourth, fifth, and sixth years) (AOR (95% CI) = 1.3 (1.02–1.6), 1.6 (1.2–2.1), 2.4 (1.6–3.8)), ever testing for HIV (AOR (95% CI) = 2.3 (1.9–2.8)), and ever engaging in sexual activity (AOR (95% CI) = 2.6 (2.3–3)) were independent predictors of good knowledge of HIV.

Conclusion: The findings of this study reveal a notable proficiency in HIV knowledge among African undergraduate students, particularly those enrolled in medical programs. However, there remains scope for enhancing their HIV-related practices, particularly in the areas of routine HIV testing and the establishment of Voluntary Counseling and Testing (VCT) services.

Keywords: HIV, Acquired Immunodeficiency Syndrome, Knowledge, Public Health, Practice, Africa, Students

ADVANCING SURGICAL CARE IN LOW-RESOURCE AFRICAN SETTINGS: CHALLENGES, INNOVATIONS, AND RECOMMENDATIONS

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Background: Access to surgical care in low- and middle-income countries (LMICs) is critically limited, contributing to high rates of preventable morbidity and mortality. Africa, with a significant share of the global disease burden and a limited surgical workforce, faces unique challenges. This study examines the state of surgical care in LMICs, particularly in Africa, and offers recommendations for improving access to safe and effective surgical interventions.

Methods: A systematic literature review was conducted across five databases: Web of Science, PubMed, and ScienceDirect. Additional studies were sourced from Google Scholar and Semantic Scholar to identify challenges, barriers, innovations, and solutions in surgical care.

Results: Limited access to advanced techniques like laparoscopy, inadequate multidisciplinary teams, and a scarcity of formal training programs impede surgical practice in LMICs, especially across Africa. Insufficient infrastructure, such as unreliable basic services and poor sterilization protocols, further hampers quality care. While innovative workforce solutions and localized strategies offer some relief, enhancing surgical capacity across the continent requires improved training, infrastructure, and stakeholder collaboration.

The way forward involves adopting the WHO's minimum standards for infrastructure, equipment, and training. Emphasizing multidisciplinary skills acquisition and developing formal training programs are crucial. Improved access to laparoscopy and better sterilization protocols are essential for better patient outcomes. These strategies should aim to align surgical practices in low-income regions with global standards.

Countries like Uganda, Kenya, Malawi, and Mozambique have improved surgical practice by training anesthetic officers and nurse anesthetists, addressing workforce shortages. Rwanda's multidisciplinary approach, with collaboration among government agencies, international organizations, and stakeholders, underscores the importance of inclusive decision-making and structured communication in advancing surgical care across Africa and other low-resource settings.

Conclusion: Surgical care in low-resource African settings is below global standards. Workforce training, affordable medical solutions, and multidisciplinary approaches, as seen in Rwanda, can be adapted across Africa. Adopting WHO standards, enhancing technological access, and fostering collaboration are key to improving surgical care across LMICs. This approach will strengthen health systems to better address health emergencies and contribute to a resilient health security framework in Africa.

SOCIAL ACCOUNTABILITY IN MEDICAL EDUCATION: SECURING THE FUTURE OF AFRICAN HEALTHCARE AND HEALTHCARE PRACTITIONERS FOR SOCIETAL BENEFITS.

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Background: Social accountability of medical institutions is the obligation to direct their education, research and training activities towards solving the priority health challenges of communities, regions or nations.

Approaches used include, admission procedures to ensure that students from rural areas are given priority, who will return and address the challenges in their communities; building medical institutions and training centers in rural communities affiliated with bigger centers; medical education curriculum that stipulates compulsory rural placements as part of medical trainings, introducing community outreach programs as mandatory for students. This paper explores from existing papers, how we can shape a better future for our healthcare system in Africa through social accountability in Medical Education and practice.

Method: A comprehensive review of literature was carried out, on abstracts and papers that gave insights on the impacts of social accountability in our medical education, on the overall healthcare system. We used Google Scholar to filter available papers using keywords like "Social accountability", "Medical Education", "African Healthcare", "Patient involvement", and "Quality assurance". We reviewed all these papers noting the progress so far, the setbacks faced or to anticipate, and the future positions of our medical institutions and healthcare systems in Africa.

Results: We found out that social accountability will be very effective in raising young health professionals that can change our healthcare system, using the results we obtained from the US, UK, Australia, etc. We noted the introduction of programs like "conditional admission strategies for the minority", "Grow your own strategies", "Widening participation", "Making the Link", etc, geared towards developing rural workforce, and exposing medical students to their healthcare challenges, and guiding them to plan towards working with these communities for improved Healthcare deliveries.

Conclusion: One of the key things that policy makers should focus on is to ensure that the quality of social accountability included in medical institutions' curriculum becomes a requirement for accreditations and registrations. This will hasten its uptake thereby helping the African nation to train practitioners who can identify health challenges and collaborate with their communities or countries to solve them.

Keywords: Social accountability, Medical education, African Healthcare system, Healthcare practitioners, rural communities, medical institutions curriculum, Future.

LEVEL OF AWARENESS, PERCEPTION AND FACTORS INFLUENCING PROCUREMENTS OF HEALTH INSURANCE AMONG CLINIC ATTENDEES IN A TERTIARY HEALTH INSTITUTION IN OGBOMOSO, OYO STATE.

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Background: Access to quality healthcare in low- and middle-income countries remains a critical challenge. In Nigeria, the National Health Insurance Scheme (NHIS) was established to address financial barriers to healthcare, yet its coverage is markedly low, with only 3% of the population enrolled. This research investigates the level of awareness, perception, and factors influencing the procurement of NHIS among clinic attendees at a tertiary health institution in Ogbomosho, Nigeria.

Objective: The primary aim of this ongoing study is to explore how awareness of NHIS, along with factors such as affordability, accessibility, and perception, influences health insurance procurement among residents of Ogbomosho. The research seeks to identify barriers and facilitators to NHIS uptake to inform targeted interventions and policy improvements.

Methods: This cross-sectional study is being conducted at Bowen University Teaching Hospital in Ogbomosho. A semi-structured questionnaire is being administered to a sample of 361 adult clinic attendees selected through systematic sampling. Data collection is ongoing, and the study employs both descriptive and inferential statistical methods to assess the level of awareness, perceptions, and influencing factors related to NHIS procurement. Quantitative data from the survey will be performed using International Business Machines Corporation's (IBM) Statistical Package for the Social Sciences (SPSS) version 25.

Anticipated Outcomes: The study is expected to reveal insights into the current levels of awareness and understanding of NHIS among different demographic groups. It aims to identify key factors influencing health insurance procurement and the barriers preventing higher enrolment rates. Understanding these factors will be crucial for developing effective strategies to enhance NHIS utilization and contribute to achieving Universal Health Coverage (UHC) in Nigeria.

Conclusion: While results are pending, the research is anticipated to provide valuable information on the challenges and opportunities related to health insurance uptake in Ogbomosho. The findings will inform targeted policy interventions and contribute to broader efforts to improve healthcare access and financial protection in Nigeria.

Keywords: National Health Insurance Scheme, health insurance awareness, healthcare access, Nigeria, Ogbomosho, Universal Health Coverage.

"MENTAL HEALTH PROFESSIONALS AS TIKTOK INFLUENCERS: A CONTENT ANALYSIS OF THEIR DIGITAL PRESENCE AND CONTRIBUTION TO MENTAL HEALTH LITERACY IN AFRICA".

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Background: With over 150 million TikTok users in Africa, the platform has become a key tool for mental health professionals to influence public health literacy. This study examines the impact of African mental health professionals as TikTok influencers, focusing on how their content promotes mental health literacy. The objective was to assess how these influencers enhance their audience's understanding of mental health issues across the continent.

Methods: We systematically searched TikTok using keywords such as "African Mental Health," "African Psychologists," and "African Psychiatrists" to identify African mental health professionals with over 1,000 followers. From the identified influencers, we recorded their follower counts and total likes. We then analysed audience comments from their last five posts, totalling 200 posts. The comments were coded into seven mental health literacy categories: recognition of disorders, seeking mental health information, knowledge of risk factors, understanding causes, self-treatment knowledge, awareness of professional help, and attitudes promoting help-seeking behaviours.

Results: The 40 influencers collectively reached an audience of over 714.5 million views, representing over 51% of Africa's 1.4 billion estimated population. Audience engagement analysis showed an overall 78.7% positive influence on mental health literacy. The breakdown of this impact across the seven key categories is as follows: Recognition of specific disorders: 81.2%, Knowledge of seeking mental health information: 76.5%, Understanding risk factors of mental illness: 79.0%, Knowledge of causes of mental illness: 74.8%, Awareness of self-treatments: 77.3%, Knowledge of professional help available: 80.1%, Attitudes towards help-seeking: 82.4%. These influencers significantly contribute to improving mental health literacy, particularly in recognizing disorders, increasing awareness of professional help, and fostering healthier help-seeking attitudes across Africa.

Conclusion: This study reveals that TikTok influencers who are mental health professionals significantly enhance mental health literacy in Africa, improving awareness and promoting help-seeking behaviour. It highlights the powerful role social media plays in public health education, especially where mental health resources are scarce. Mental health professionals should leverage these platforms to combat stigma and provide accurate information.

Keywords: African Psychiatrist, African Mental health professionals, African Psychotherapist, African Psychologist

FACTORS INFLUENCING HEALTH-RELATED QUALITY OF LIFE (HRQoL) OF NIGERIA'S YOUNG PEOPLE LIVING WITH HIV: A SYSTEMATIC REVIEW.

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Background: The burden of HIV/AIDS among Nigerian youths and adolescents is one of the highest in the world. Their quality of life is critical to the goals of 95-95-95 in the country. This review aimed to systematically highlight the factors affecting the health-related quality of life among this demographic.

Methods: Following the PRISMA guidelines, PubMed, Embase, and African Journals Online databases were searched for peer-reviewed literature published between January 2018 and July 2023. Studies eligible for inclusion in the review were observational studies in Nigeria that investigated the factors influencing health-related quality of life among youths and adolescents with HIV/AIDS. A risk of bias assessment was done using the JBI Critical Appraisal Checklist for Studies Reporting Prevalence Data. Data was extracted and summarized to highlight essential barriers and facilitators affecting the quality of life of young people in Nigeria.

Results: After screening, 7 eligible studies were selected, including 6 quantitative studies and 1 mixed methods study. The data described mental health, stigma, and health-related quality of life. For the various outcomes related to quality of life, the data revealed a number of significant barriers and facilitators. Being of sexual minority as a young person living with HIV/AIDS was associated with higher odds of general anxiety. Stigma was reported as a key outcome affecting quality of life. Access to HAART, being educated, and being from a monogamous family were associated with high health-related quality of life scores. Being female was associated with lower health-related quality of life scores. Lack of financial means to access sexual and reproductive health services for the management of HIV/AIDS is another identified barrier to improved quality of life.

Conclusion: Multiple factors are implicated in affecting health-related quality of life in HIV-positive youths and adolescents in Nigeria. Recommendations include comprehensive sexual health education of adolescents, mass sensitization of adolescents and the general population against HIV/AIDS discrimination, and the provision of youth/adolescent-tailored reproductive health services for improvement of outcomes.

Keywords: Health-related quality of life, HIV/AIDS, Adolescents, Youths, Nigeria

ANTIMICROBIAL SUSCEPTIBILITY RESULTS' UTILIZATION AND ITS IMPLICATIONS FOR ANTIMICROBIAL STEWARDSHIP PROGRAM AT BUGANDO MEDICAL CENTRE, MWANZA, TANZANIA.

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Background: Bugando Medical Centre (BMC) is contributing 35% - 40% of antimicrobial resistance (AMR) surveillance data to the National Public Health Laboratory and WHO-GLASS since 2020, and generated data are used to inform hospital antibiograms for priority infectious diseases. However, utilization of culture and antimicrobial susceptibility testing (AST) results to guide specific patients' management remain to be explored.

Methods: A cross-sectional analytical study was conducted at BMC in April 2024. Positive culture results and AST were obtained from BMC Clinical Microbiology Laboratory, and tracked in the electronic hospital management information system (eHMIS) to assess utilization, and conformity to antimicrobial stewardship (AMS) program targets.

Results: The median age (IQR) of 359 patients enrolled was 38 (13-61) years. Female and outpatients accounted for 59.3% and 54.0%, respectively. Empirical antibiotic prescription was 64.0%, and out of 250 antibiotic encounters; access, watch and reserve groups of antibiotics were 46.8%, 50.0% and 3.2%, respectively. The most common samples were urine (46.8%), pus (28.7%), blood (12.0%) and sputum (10.6%), and a total of 470 bacteria species were isolated with predominance of *Escherichia coli* (21.7%), *Klebsiella pneumoniae* (14.9%), *Enterococcus spp* (13.4%) and *Acinetobacter spp* (10.6%). The overall laboratory results utilization was 42.1% (151/359), and was associated with inpatient ($p=0.001$) and lower median age group ($p=0.042$). Of note, while cephalosporins contributed to 27.2% of all antibiotics prescribed, resistance to this group among Gram negative bacteria was 59.0%.

Conclusion: Four out of every 10 patients' results are utilized to guide management. Empirical prescriptions largely involve access and watch groups, with only reserve group conforming to the WHO target of <12.0%. Comprehensive AMS measures should be strengthened at patient-, prescriber- and system-levels to conform to country and global AMS targets.

Keywords: Antimicrobial susceptibility testing, antimicrobial resistance, Mwanza.

INTEGRATING STRATEGIES TO COMBAT ANTIMICROBIAL RESISTANCE, INFECTIOUS DISEASES, AND NEGLECTED TROPICAL DISEASES IN SUB-SAHARAN AFRICA, A COMPREHENSIVE MIXED-METHODS STUDY.

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Background: Antimicrobial resistance, infectious diseases, and neglected tropical diseases pose significant public health challenges in Africa, exacerbating morbidity, mortality, and economic burdens. The convergence of these health threats necessitates a comprehensive approach to enhance diagnostic, therapeutic, and preventive strategies.

Methods: This study employed a mixed-methods approach incorporating epidemiological surveillance, microbiological analyses and socio-economic assessments. Data were collected from healthcare facilities and community health programs across five sub-Saharan African countries between 2020-2023. Molecular techniques, including whole-genome sequencing were utilized to identify and characterize AMR genes in prevalent pathogens. Concurrently, quantitative surveys and qualitative interviews were conducted to evaluate healthcare infrastructure, treatment adherence, and public awareness.

Results: Epidemiological surveillance revealed a high prevalence of AMR in key pathogens, including *Staphylococcus aureus*, and *Plasmodium falciparum*. Notably, over 60% of isolated *E. coli* strains exhibited resistance to third-generation cephalosporin, while 40% of *P. falciparum* samples harbored resistance markers to artemisinin-based combination therapies. Molecular analyses identified multiple resistance genes, such as *pfk13* mutations, driving this resistance. Socioeconomic assessments highlighted critical gaps in healthcare infrastructure, particularly in rural areas, with inadequate diagnostic facilities and inconsistent supply chains for essential medicines. Furthermore, community-level interviews underscored low awareness and adherence to prescribed treatment regimens, significantly contributing to the propagation of resistant strains.

Conclusion: The findings underscore the urgent need for a holistic and integrated approach to combat AMR and infectious diseases. Strengthening healthcare infrastructure, enhancing molecular diagnostic capabilities, and fostering community education are pivotal. Additionally, implementing robust surveillance systems and promoting interdisciplinary collaboration among healthcare providers, policymakers, and researchers are crucial to curbing the spread of resistance. Tailored public health interventions, emphasizing preventive measures and rational use of antimicrobials, are essential to mitigate the impact of these health threats and improve health outcomes across the continent.

HIV RELATED KNOWLEDGE AND PRACTICES AMONG UNDERGRADUATE STUDENTS IN AFRICA: A CROSS-SECTIONAL MULTINATIONAL STUDY.

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Background: Africa has the highest burden of HIV/AIDS globally, with young people being the most affected. The HIV epidemic in Africa has severe social and economic implications, including increased poverty, decreased life expectancy, increased health spending and reduced economic productivity, among others. This study aimed to assess HIV knowledge and practices among undergraduate students in Africa.

Methods: An analytical cross-sectional study was conducted in ten African countries using an online, self-administered, pre-validated questionnaire. The study was conducted in 10 African countries during the academic year 2022–2023. Shapiro-Wilk test was utilized to check the data normality. Student's t-test and Chi-square test were used for continuous and categorical variables in independent samples. Mann-Whitney U and Kruskal-Wallis tests were used for nonparametric comparisons.

Results: A total of 3727 undergraduate students responded to the questionnaire. Most students were medical students (68.1 %), single (94.9 %), and living in urban areas (78.7 %). Most students relied on academic curricula for HIV information (72.3 %) and their institutions provided formal HIV prevention strategies (57.8 %). Only 1.5 % of the participants reported being HIV-positive. A relatively low percentage of the study participants engaged in risky sexual behaviors such as transactional sex (1.3 %), having sexual partners who were at least 10 years older (2.6 %), having sex under the influence of drugs (2.9 %), having multiple sexual partners (8.3 %), and engaging in unprotected sex (18.1 %). The most frequently reported barriers to utilizing VCT services were inaccessibility (30.6 %), fear of testing positive (29.6 %), and fear of stigma (20.9 %).

Conclusion: The findings of this study reveal a notable proficiency in HIV knowledge among African undergraduate students, particularly those enrolled in medical programs. However, there remains scope for enhancing their HIV-related practices, particularly in the areas of routine HIV testing and the establishment of Voluntary Counseling and Testing (VCT) services.

Keywords: HIV, Acquired Immunodeficiency Syndrome, Public Health, Africa, Students

CLIMATE CHANGE ADAPTATION STRATEGIES FOR HEALTH INFRASTRUCTURE IN AFRICA.

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Background: Climate change presents a profound challenge to health infrastructure across Africa, a continent already grappling with socio-economic vulnerabilities. The effects of climate change are exacerbating these challenges and placing additional stress on health systems (Wright et al., 2024; McKinsey, 2024). Although the impacts of climate change on health infrastructure in Africa are well-documented, there remains a significant gap in understanding the adaptation strategies specifically designed for the continent's unique challenges. Existing literature often fails to address the unique conditions of low-resource settings, limiting the effectiveness of proposed solutions. This lack of tailored approaches highlights the need for more context-sensitive research and strategies that can address the specific vulnerabilities of African health infrastructure.

Method: We searched PubMed and Google Scholar for keywords related to "climate change," "health infrastructure," "Africa," and "adaptation strategies," incorporating Boolean operators and MeSH terms. Inclusion criteria encompassed peer-reviewed articles that specifically addressed African countries or regions and their health infrastructure's response to climate-related risks. Non-peer-reviewed articles, studies focusing on non-African contexts, or those outside the specified time frame were excluded. The search yielded 145 articles, which were screened for eligibility. Observational studies published in English between 2010 and July 2024 were included. 28 articles were eligible. Data extraction was then performed, and a comprehensive narrative synthesis of findings was conducted.

Results: This review highlighted several critical adaptation strategies being implemented to strengthen health infrastructure against climate change in Africa. These include the construction of climate-resilient health facilities, the incorporation of climate risk assessments into national health policies, and the enhancement of early warning systems for climate-related health emergencies. Furthermore, this review also identified persistent challenges, such as inadequate financial resources, poor policy enforcement, and a general lack of technical expertise necessary for large-scale implementation.

Conclusion: Although there has been progress in adapting African health infrastructure to the challenges posed by climate change, significant gaps remain. Addressing these issues requires a collaborative, multi-sectoral approach to scaling up adaptation efforts. This study underscores the importance of targeted financial investments, robust policy frameworks, and capacity building to ensure the resilience of health infrastructure across the continent.

Keywords: Climate change, Health infrastructure, Adaptation strategies, Africa.

INTEGRATION OF AI AND TELEMEDICINE INTO EXISTING HEALTHCARE INFRASTRUCTURE: CHALLENGES AND OPPORTUNITIES IN AFRICA.

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Background: Africa carries the world highest burden of disease with over 20% of the global burden of disease. However, Many African countries face significant challenges in healthcare delivery due to inadequate infrastructure, the burden of communicable and non-communicable diseases, a shortage of skilled professionals, and limited access to quality health care. The integration of artificial intelligence (AI) and telemedicine into the existing healthcare infrastructure presents promising solutions that can potentially revolutionize healthcare delivery. However, these opportunities come with their own challenges; hence, this study aims to explore the integration of AI and telemedicine into existing healthcare infrastructure in Africa, highlighting the potential opportunities for improving healthcare delivery and the challenges that must be overcome to ensure successful implementation.

Methods: A comprehensive literature review was conducted to gather information on the current state of AI and telemedicine in Africa, the challenges faced, and potential solutions. Key stakeholders, including healthcare professionals, policymakers, and technology experts, were interviewed to gain insights into the practical implementation of these technologies.

Results: The study identified several potential benefits of the integration of AI and telemedicine in Africa, including enhanced access to care, improved diagnostic accuracy, efficient workflow management, personalized treatment plan, predictive analysis, personalized treatment plan, remote patient monitoring, cost reduction and, autonomous delivery systems etc. However, challenges including limited infrastructure, training and workforce gap, limited resources, data privacy and security concerns, regulatory barriers and, cultural resistance to technology adoption etc must be overcome to ensure successful implementation.

Conclusion: The integration of AI and telemedicine into existing healthcare infrastructure in Africa presents both challenges and opportunities. Addressing the identified challenges and leveraging the potential benefits requires a collaborative effort among stakeholders, including governments, healthcare providers, technology companies, and the public. By investing in infrastructure, training healthcare professionals, and creating enabling policies, Africa can harness the power of AI and telemedicine to improve healthcare outcomes and achieve universal health coverage.

Keywords: Artificial intelligence, telemedicine, Africa, healthcare infrastructure, remote patient monitoring, regulatory barrier, data privacy, training, access to care, disease burden.

REVOLUTIONIZING ANATOMY EDUCATION: AR AND VR SOLUTIONS FOR ACHIEVING UNIVERSAL HEALTH COVERAGE.

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Background: Traditional anatomy education is limited by high costs, ethical concerns, and accessibility issues. Augmented Reality (AR) and Virtual Reality (VR) offer promising solutions, potentially enhancing educational outcomes and accessibility. This study systematically reviews AR and VR technologies to assess their impact on anatomy education and their role in achieving Universal Health Coverage (UHC).

Methodology: This study employs a comprehensive literature review, case studies, and comparative analysis. Secondary data from peer-reviewed research, educational videos, news articles, and case studies were analyzed. Key metrics, including clinical skills proficiency, knowledge retention, and student confidence, were evaluated before and after AR/VR integration.

Results: The integration of AR and VR technologies yielded significant benefits, including a 20% improvement in clinical skills proficiency, knowledge retention, and confidence in performing surgeries. These results underscore the specific advantages of AR and VR over traditional cadaver dissection methods, such as enhanced learning outcomes and greater accessibility. While challenges such as high costs and technical limitations were also noted, the benefits clearly outweigh these concerns.

Conclusion: AR and VR technologies significantly enhance anatomy education, offering superior methods to traditional techniques. Their integration supports the goal of UHC by providing high-quality educational tools that transcend the limitations of physical resources.

Keywords: Anatomy education, Augmented Reality, Virtual Reality, Universal Health Coverage, medical training, innovation.

MODERN CONTRACEPTIVE UPTAKE AMONG ADOLESCENT GIRLS AND YOUNG WOMEN RECEIVING POST-ABORTION CARE IN NORTHERN UGANDA: A CROSS-SECTIONAL STUDY USING THE SOCIO-ECOLOGICAL MODEL.

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Background: About half of the global burden of unintended pregnancies are reported among adolescent girls and young women (AGYW). We aimed to investigate modern contraceptive knowledge, attitudes, preferences, practices, and barriers among AGYW receiving post-abortion care (PAC) in Northern Uganda, using the socio-ecological model.

Methods: This quantitative cross-sectional study was conducted at Lalogi Health Center IV (Omoro District) and Gulu Regional Referral Hospital (Gulu City) in Uganda between August and September 2023. AGYW aged 10 – 24 years receiving PAC consecutively enrolled after obtaining written informed consent. Data was collected using structured questionnaire before the provision of contraception counseling during PAC. Factors associated with modern contraceptive uptake were assessed using a multivariable modified Poisson regression model with robust standard errors, adjusting for potential confounders. A $p < 0.05$ was considered statistically significant.

Results: In total, 129 AGYW, with a median age was 21 (IQR: 20 – 23) years were recruited, with more than half in some form of marriage, union, or relationship (62.0%). The median age at sexual debut was 17 years (IQR: 16 – 18 years). About 24% of the abortions were induced, with 83.9% of these being due to unintended pregnancy. Overall, 98% were aware of modern contraceptives, while 78% had ever used them, with male condoms (70.0%), implants (32.0%), and oral pills (32%) being the most frequent. Only age at sexual debut retained significance at multivariable analysis (incidence risk ratio: 0.93, 95% CI: 0.88 – 0.99, $p = 0.021$). Frequent barriers to modern contraceptive use included inadequate information (24.0%), myths and misconceptions (23.3%), peer pressure (20.2%), partner opposition (5.5%), and long distances (14.7%).

Conclusion: In this study, over 7 in 10 AGYW receiving PAC had used modern contraceptives, and this was higher in those with early sexual debut. We recommend strengthening reproductive health policies and practices in Uganda, particularly in PAC settings. Targeted educational programs and counseling may address inadequate information, myths, and misconceptions prevalent in this population. Further research should evaluate effective implementation strategies for increasing modern contraception uptake in this population.

Keywords: Adolescent Girls and Young Women (AGYW), Post-Abortion Care (PAC), Modern Contraceptive Uptake, Socio-ecological Model, Northern Uganda.

UNMASKING THE SILENT EPIDEMICS IN AFRICA: NON-COMMUNICABLE DISEASES AND MENTAL HEALTH.

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Background: Africa faces a growing burden of non-communicable diseases (NCDs) and mental health disorders yet it remained neglected underprioritized with limited resources to prevention, diagnosis and treatment .

Objective: This study highlight the epidemiological trends, risk factors, and consequences of NCDs and mental health disorders in Africa, and to advocate for integrated prevention and control strategies.

Methods: A comprehensive review of existing literature, data from WHO Global Health Observatory Data Repository and Mental Health Atlas 2011, and policies related to NCDs and mental health studies done in African countries using pubmed, Google scholar, peer reviewed journal and research gate. The inclusion criteria comprised studies reporting at least one NCD and mental health disorder conducted between 2011 till date, study population included high-risk groups using an observational, experimental or quasi-experimental study design. Two independent reviewers conducted a quality assessment using a 10-item appraisal tool.

Meta-analysis and meta-regression were performed using a random-effects model.

Results: The review reveals:

- The funding of mental health disorder in Africa is much lower (less than 3%) compared to WHO recommendation, which suggests a minimum of 15% of total health budget. Fewer than 0.5 beds per 100,000 population with the exception of South Africa (with 6.85 beds per 100,000 population).
- Only 44% of African countries have mental health policies
- Patients with anxiety or depression are 1.26–1.48 times more likely to develop NCDs than patients without such mental disorders independent of demographic variables, biological risk factors and health behaviours.
- Individuals with schizophrenia-spectrum disorders and bipolar disorder are 1.5–2 times more likely to develop diabetes, dyslipidaemia, hypertension and obesity than the general population.

Recommendations:

- Integrated NCD and mental health policies should be developed
- Prevention and control programs should be fully funded.
- Healthcare workforce capacity and training should be improved.
- Communities and civil society should be involved in awareness and advocacy efforts.

Conclusion: NCDs and mental health disorders pose significant threats to Africa's health, economic development, and human capital. Unmasking these silent epidemics will birth a healthier Africa.

THE CURRENT MALARIA PROTOCOL AMONG HEALTHCARE WORKERS IN IGBO-ORA: AWARENESS, PERCEPTION AND PRACTICE.

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Background: Nigeria is one of the largest contributors to the global burden of malaria. The WHO and National Guidelines emphasize prompt diagnosis and effective treatment, relying on rapid diagnostic tests (RDTs) and Artemisinin-based combination therapies (ACTs). However, healthcare workers often diagnose based on symptoms alone, potentially leading to overtreatment and resistance. This study aims to assess awareness, perception, and practice of the current malaria protocol among healthcare workers in Igbo-Ora, Nigeria and identify factors influencing adherence to the guidelines.

Methods: A cross-sectional survey was conducted among all consenting healthcare workers (N=82) spanning public and private facilities within seven wards in Igbo-Ora, Oyo State, Nigeria. Data collection involved interviewer-administered questionnaires to capture sociodemographic and occupational characteristics, awareness, knowledge, perception, and practice of national malaria guidelines. Key domains assessed included diagnosis and case management of uncomplicated and severe malaria, including malaria-in-pregnancy. Scores were calculated to categorize practice levels as good ($\geq 75\%$) or poor ($< 75\%$). Chi-square tests examined associations between practice levels and independent factors such as demographics, occupational characteristics, knowledge, and attitudes. All inferential statistics were conducted at $\alpha 0.05$.

Results: Of the 64 (95.3%) respondents that were aware of the national guideline for malaria diagnosis and treatment, only 17.2% of them had good knowledge of the National Guidelines for Diagnosis and Treatment of Malaria. Only 12% of respondents had a personal copy of the guidelines, and only 43.8% had ever read them. Most of the knowledge on the present guidelines came from medical education and training programs. Regarding attitude to the Guidelines, roughly 57.8% of respondents had a good attitude, 32.8% fair, and 9.4% poor. While it was well practised by 59.4%, fairly by 39.1%, and poorly by 1.6% of respondents. Years of experience, knowledge and practice level were significant associations. The results also revealed serious gaps in the understanding and treatment of severe malaria and malaria during pregnancy.

Conclusion: To ensure adherence to global and national guidelines, there needs to be easy access, regular evaluation and training with a more focused strategy to develop areas of weakness.

Keywords: National Malaria Guidelines, Adherence, Healthcare Workers, Malaria, Nigeria

EXPLORING FAMILY PLANNING AWARENESS, ATTITUDES, AND PRACTICES AMONG MALE AUTO MECHANICS IN ILORIN-SOUTH, NIGERIA: A CROSS-SECTIONAL STUDY.

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Background: Family planning is crucial for managing population growth and enhancing maternal health. Men's participation in reproductive health, particularly in family planning, is key to achieving the Sustainable Development Goals (SDGs) of reducing maternal mortality. Despite the recognised role of men in women's contraceptive use, limited research has focused on the knowledge, attitudes, and practices of family planning among low-income men in Nigeria. This study examines these aspects among male auto-mechanics in Ilorin-South LGA, an urban community, emphasising the influence of spousal approval in family planning decisions.

Methods: A simple random sampling technique was utilised in this study. Participants were selected from a comprehensive list of auto mechanics in the area. A cross-sectional study was conducted using a semi-structured interviewer-administered questionnaire to gather data from male auto-mechanics. Data analysis was done using Statistical Package for Social Sciences (SPSS) V.25.0 software.

Results: The study found a high level of family planning knowledge among respondents, with 114 out of 120 participants (95.0%) familiar with specific methods, while 6 (5.0%) were not. Attitudes were largely positive, with 98 (81.7%) holding favourable views on family planning. However, practical adoption varied; 60 participants (50%) were willing to accompany their wives to clinics, but many hesitated to use male-specific methods due to cultural and religious beliefs, as well as misconceptions about side effects. Notably, 93 participants (77.5%) believed that enhancing men-orientated family planning programs could improve male participation.

Conclusion: Despite positive knowledge and attitudes, the practical adoption of family planning among male auto-mechanics remains limited due to cultural norms, religious beliefs, and misconceptions. The study advocates for targeted educational initiatives and cultural sensitisation programs to increase male involvement. Additionally, developing inclusive family planning policies that engage both men and their spouses is crucial for broader participation and effectiveness.

FINANCIAL IMPLICATIONS OF TELEMEDICINE AND DATA-DRIVEN DECISION-MAKING IN THE DIGITAL HEALTH TRANSFORMATION OF AFRICAN HEALTH SYSTEMS.

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Background: As African health systems grapple with limited resources and access challenges, the implementation of digital health technologies such as telemedicine and data-driven decision-making is emerging as a critical strategy for transformation. Understanding the financial implications of these technologies is crucial for optimizing their adoption and sustainability.

Methods: Data reported in this study was obtained from Google Scholar, PubMed and ResearchGate. We used the boolean operators AND and OR to combine the following keywords: "Telemedicine", "Telehealth", "mHealth", "eHealth", "Cost-effectiveness", and "Financial impact". We included reviews and original studies from Africa. Twenty-one papers were eventually selected.

Results: This study revealed that the implementation of telemedicine in African health systems has demonstrated notable financial benefits, including reduced costs associated with physical consultations, travel, and improved healthcare resource utilization. Data-driven decision-making, through advanced health analytics, contributes to more efficient resource allocation and operational cost reductions. However, the financial impact is limited by factors such as infrastructure costs, implementation barriers, and regional economic disparities.

Conclusion: The financial implications of telemedicine and data-driven decision-making in African health systems are generally positive, with significant potential for cost savings and improved efficiency. However, realizing these benefits requires addressing challenges related to infrastructure, training, and data management. A strategic approach to implementation, including investment in supportive infrastructure and addressing contextual challenges, is essential for maximizing the economic benefits of digital health transformation in Africa.

Keywords: Telemedicine, Digital Health Transformation, African Health Systems, Cost-effectiveness and Financial impact

ANZA MWAKA KWA KUIJUA AFYA YAKO 2024.

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Background: Noncommunicable diseases (NCDs) have been reported to contribute significantly to morbidity and mortality worldwide especially in developing countries including Tanzania, in a year 2017 it was estimated that of the 57.8 million deaths worldwide were due to NCDs. As a way of improving the health of the communities around Mwanza region and the lake zone in general the Tanzania Medical Students' Association at CUHAS Chapter developed a centralized screening program for NCDs entitled "Anza Mwaka Kujua Afya Yako", the Swahili words for, "Start the Year by Knowing Your Health", to enable rapid and efficient evaluation of the community health status and hence recommend potential treatments to the affected communities.

Description: We established a centralized camp at Furahisha grounds at Nyamagana district in Mwanza on Saturday, 27th January 2024. 87 people were screened and measured for hypertension, body anthropometric indices and diabetes. The tasks involved measuring of blood pressure, diabetes screening through measuring of blood glucose level. Besides that, AMR education was also provided to all individuals who were screened. We also conducted a blood donation program under the supervision of Damu Salama from MoH. Medical students under the supervision of licensed doctors were the key people in facilitating all activities.

Outcomes: There is a little public awareness concerning NCDs, including risk factors, prevention and treatment. The key findings among the participants were a high prevalence of hypertension by 8.96% and obesity by 12.4%. There was a significant correlation between age and blood pressure. There was a significant correlation between body mass index and systolic blood pressure depicting increased BMI as a risk factor for hypertension.

Conclusion: There is a little awareness about health issues in the community regarding NCDs thus there is a need to strengthen health system intervention and promote accountability of various sectors in addressing NCDs and their risk factors. We also recommend that more community outreaches for diseases of public importance should be organized to give people knowledge and services for disease prevention, treatment and elimination.

Key terms: NCDs, Screening, TAMSA, Anza Mwaka.



WORKSHOPS

WORKSHOP TITLE

The Role Of Artificial Intelligence In Personalised Medical Learning

Wednesday, 6th November, 2024

FACILITATOR

The logo for Lecturio, featuring the word "Lecturio" in a dark grey, sans-serif font. The letter "o" at the end is replaced by a green circular icon containing a white play button symbol.

Lecturio

WORKSHOP TITLE

Designing Merchandise For Advocacy And Fundraising

Thursday, 7th November, 2024

FACILITATOR



Pharm. Oluwakorede Adedeji

ABOUT FAMSA

FAMSA Is An Independent, Non-Political Federation Of Medical Students Associations In Africa. She Was Founded In 1968 As A Nigerian, Ghanaian And Ugandan Initiative To Foster The Spirit Of Friendship And Cooperation Among African Medical Students.

VISION:

To Become A Strong Network Of Medical Students Aware Of Global Health Issues And Responsive To Current Questions Facing The Medical Profession And International Health.

AIMS AND OBJECTIVES:

- To Enhance And Broaden The General And Special Education Of Member Medical Students In And About Various Parts Of Africa As A Special Furtherance Of The Diligent Efforts Of The Medical Schools, And Thus To Contribute To The Improvement Of Medical Education In Africa.
- To Project The Image Of African Medical Students Both In The Continental And International Scene.
- To Establish Contact With Every Medical Students' Association In Africa On Purely Professional Matters.
- To Generate Initiatives In Population, Health Surveys As Well As Bio-Medical Research In African Medical Students And To Collate And Disseminate Original Findings On All Matters Of Health In Africa.
- To Encourage And Assist Member Associations In Fulfilling The Essence Of This Education, Which Is To Contribute Towards Improving Health Conditions In Africa By Rendering Help In All Projects Where Medical Students Can Assist.

AFFILIATES AND PARTNERS:

- The IFMSA (International Federation Of Medical Students Associations)
- The AMSA (Asian Medical Students' Association)
- The EMSA (European Medical Students' Association)
- The IPSF (International Pharmaceutical Students' Federation) African Regional Office
- The WPC (World Pre-Health Conference)
- Lecturio
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OBAFEMI AWOLOWO UNIVERSITY MEDICAL STUDENTS' ASSOCIATION

IFUMSA



The Obafemi Awolowo University Medical Students' Association (IFUMSA), formerly known as the Ife University Medical Students' Association, is the umbrella body for all students in the Bachelor of Medicine and Bachelor of Surgery (M.B Ch.B.) program in the prestigious College of Health Sciences, Obafemi Awolowo University, Ile-Ife.

Established in 1972, IFUMSA was formed to ensure the welfare of all medical students within the university and currently maintains a membership of over 700 students alongside a distinguished alumni network.

The association is affiliated with the Nigerian Medical Students' Association (NIMSA), the Federation of African Medical Students' Associations (FAMSA), and the International Federation of Medical Students' Associations (IFMSA), connecting its members to both national and global networks of medical students.

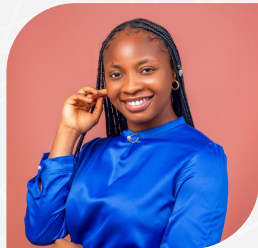
IFUMSA comprises an Executive Council (its executive arm), a Students' Representative Council (its legislative body), and various clubs and organs that provide members with diverse avenues for professional growth, leadership, and community engagement.

As a leading student association within Obafemi Awolowo University and Nigeria at large, IFUMSA is actively involved in initiatives that contribute to the development of health and non-health sectors alike. Notable IFUMSA programs include the IFUMSA Health Week, Doctor Plus, Honour's Day, and the Mega Alumni Reunion, all of which highlight the association's commitment to impactful healthcare advocacy and alumni engagement.

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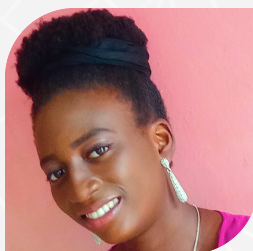


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CLERK, IFUMSA SRB

ORGANISING COMMITTEE



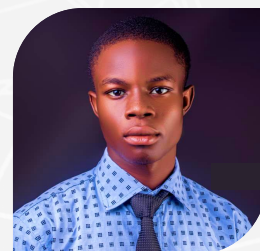
TEMITAYO FEMI MATTHEW
CHAIRPERSON



**ALUKO-OLOKUN
KIKILOBAOLUWA**
VICE-CHAIRPERSON
HEAD OF LOGISTICS



**OLUWAPELUMI SOBAYO
BLESSING**
VICE-CHAIRPERSON



LAWAL ABDULRAHMAN
VICE-CHAIRPERSON



AGUNBIADE ENIOLA
HEAD OF PUBLIC RELATIONS



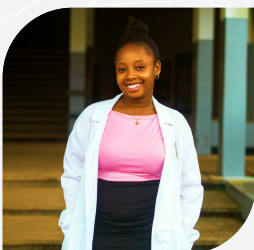
AMINU KEHINDE
HEAD OF WELFARE



OLUSEGUN AROBO
HEAD OF SCIENTIFIC CONFERENCE



OLAIWOLA PETER
HEAD OF SPONSORSHIP



OLAMIDE OLAYADE
HEAD OF SOCIALS



ADEWUNMI OLALEKAN
HEAD OF TRANSPORTATION



FALEYE TOLUWALOPE
HEAD OF FINANCE



AKINBO OLUWADAMILOLA
SECRETARY



**FEMI FAMAKINWA
TIWALOLA**
SECRETARY

VOLUNTEERS

LOGISTICS TEAM

- ADEBOWALE DAVID
- OLUWALONIMI TAIWO
- OLASOJI MOLOLUWA ESTHER
- AKANDE MOTILAYO
- ODEWALE GODSDELIGHT
- ADELEYE OPEMIPO
- PROMISE OLADEJO
- SHABA SAMUEL
- OLURONKE PECULIAR OJASOPE
- JOHNSON ELIZABETH GELE
- AGBOOLA OLAMIDIPUPO FAVOUR
- AGBOOLA TEMILOLUWA

SCIENTIFIC CONFERENCE TEAM

- OLASOJI MOLOLUWA ESTHER
- ODEWALE GODSDELIGHT
- OLURONKE PECULIAR OJASOPE

WELFARE TEAM

- ADARAMOLA OLUWADAMILOLA JULIET
- EHINMITAN RONKE MARY
- AYOMIDE PAUL AJAYI
- AGBOMUSERIN BOTIWOLUWA FAITH
- INIOLUWA OPEYEMI OLANIYI
- OBANIYI OLUWATOTELE ADESOLA
- ESTEMOKHAI OKHESOMI

MEDIA TEAM

- OMONIYI IFEDOLAPO
- OLAWOLE VICTORIA
- AFOLABI PETER
- OLADUJI OLAKUNLE
- OBINDO TOMISIN
- AKANDE MOTILAYO
- AGBOMUSERIN BOTIWOLUWA FAITH

SPONSORSHIP TEAM

- BELLA-OMUNAGBE LOVETH OWERO

SOCIAL TEAM

- CLARE AKWUBA
- OLUWADARE GOODNESS
- OLABISI PRECIOUS
- IREKPONOR BARTHOLOMEW
- PETER OGUNBOYEDDE
- ADELEKE STEPHEN
- ABODERIN TOBILOBA
- BANKOLE JOSEPH
- MADUKA CHIDINMA
- AGUNBIADE CHRISTIANA
- ANNE MAYUNGBE
- OYEDIRAN DIVINE

TRANSPORTATION TEAM

- ONADIPE ABDULMUGHNIY OLOLADE
- ADEBAYO ABDULLAH MODUPE
- OLADELE-BUKOLA ABDULBASIT TIMILEHIN

PUBLIC RELATIONS TEAM

- YAKUBU ABDULLAHI
- AHOSSINME HASLER ELISÉ TOWAMÈ
- ESTHER OKPOR EKENEMECHUKWU
- TEMILOLUWA OYEMAKIN

38th FAMSAs GENERAL ASSEMBLY
NIGERIA

GA'24

SPONSORS & PARTNERS

SPONSOR



PARTNERS





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