

News Report 2017

Centre for Health Systems
Research & Development

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*Inspiring excellence. Transforming lives.
Inspireer uitnemendheid. Verander lewens.*

UNIVERSITY OF THE
FREE STATE
UNIVERSITEIT VAN DIE
VRYSTAAT
YUNIVESITHI YA
FREISTATA



UFS·UV
THE HUMANITIES
GEESTESWETENSKAPPE

News Report 2017

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Background, Mission, Focus Areas and Aims

Established at the University of the Free State (UFS) in 1993, the CHSR&D stems from a rich tradition of research and training in medical sociology and sociology of health and healthcare. The Centre was founded specifically to address the need for bio-social scientific enquiry, operational research, and the development of research skills in the field of health systems. It has also accumulated commendable experience and expertise in key methodological approaches: quantitative, qualitative, mixed-methods, and monitoring and evaluation.

The Centre's mission is to generate and disseminate scientific knowledge on health, healthcare and health systems at local, provincial and national levels, and to use this knowledge to improve and inform new and existing policies, strategies and practices. The Centre also commits to developing health systems capacity via implementation science and postgraduate research training.

Specific aims for realising this mission are to:

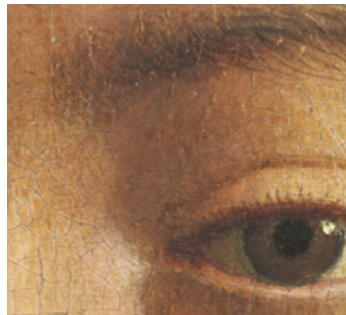
1. Meet the need for multidisciplinary research and development in the domain of health, health systems and healthcare.
2. Generate and disseminate research findings and information on health and health systems, and promote the translation of research findings into policy and practice.
3. Inform the strengthening of health systems with a view to greater equity, effectiveness and efficiency.
4. Provide postgraduate training and capacity building that contributes to expanding expertise in health, health systems, and healthcare research and development.

Our main focus areas of research are:

1. Health systems
 - Public health in South Africa (includes engagement with health policy and strategy, operational functioning, and specialist areas such as Occupational Health).
2. Priority health programmes
 - Tuberculosis (TB) prevention and control
 - HIV & AIDS
 - TB-HIV co-epidemic
 - Sexual and reproductive health.

The Year in Retrospect

2017 saw the CHSR&D increasing our research outputs and exploring new frontiers of research with an eye to optimising the reach of our work, and adapting to shifts in the funding environment. We began directing more attention to cross-cutting issues such as stigma, mental health, and gender — as these interface with our long-standing expertise and continuing work in health and health systems research, and more specifically in HIV, TB, Occupational Health, and Health Communication.



To explore and expand on new thinking we initiated new local relationships and accepted invitations to visit international partners at the University of St Gallen (Switzerland) and the University of Agder (Norway).

Existing projects forged ahead. We successfully completed the Intervention phase of our four-year flagship project, *Towards a health-enabling working environment: developing and testing interventions to decrease HIV- and TB-stigma among healthcare workers in the Free State* — our Centre's first encounter with Social and Behavioural Change Communication (SBCC) research in the context of Randomised Control Trial (RCT) design. Work also continued on the multi-site, multi-partner project *PROLIFE: Improving TB outcomes by modifying life-style behaviours through a brief motivational intervention*. And we completed a local project on the pressing issue of *Tuberculosis prevention through systematic household contact investigation in the Free State*.

We also initiated a new interdisciplinary project: *Between a rock and a hard place: emotional well-being and work engagement of nurses who moonlight in Free State hospitals*.

Research findings were disseminated in thirteen articles in peer-reviewed, rated journals. And our director co-edited a 14-article, Special Edition published in the IBSS-rated, international journal, *Qualitative Sociology Review*. Six papers were presented at international conferences, and five were presented at the Free State Department of Health's annual Research Day—a key local conference.

On a more personal note, Director Dr Asta Rau and Deputy Director Dr Michelle Engelbrecht were both awarded NRF rating. And research-support staff administrator Ms Bridget Smit completed her undergraduate BA degree.

CHSR&D Staff



Back row (left to right): Alfi Moolman (Junior Researcher), Belinda Jacobs (Senior Administrative Officer), André Janse van Rensburg (Researcher), Bridget Smit (Administrator) and Ryan Mayne (Research Assistant).

Front row (left to right): Michelle Engelbrecht (Deputy Director), Asta Rau (Director) and Gladys Kigozi (Senior Researcher).



*Absent from the photo,
Prof Christo Heunis*

Senior Research Associates

Professor Extraordinary Dingie van Rensburg (CHSR&D)

Research Associates

Prof dr Edwin Wouters (Research Centre for Longitudinal and Life Course Studies [CELLO], Department of Sociology, University of Antwerp)

Prof Francois Steyn (Department of Social Work and Criminology, University of Pretoria)

Dr Kerry Uebel (Free State Department of Health; Department of Internal Medicine, UFS)

Staff Achievements

Dr Asta Rau and Dr Michelle Engelbrecht were awarded rating from the NRF.

Ms Bridget Smit completed her Bachelor of Arts degree.

Staff Development

Dr Gladys Kigozi, Dr Michelle Engelbrecht and Mr André Janse van Rensburg continued with their advanced statistical analysis training using IBM SPSS 24.

Mrs Belinda Jacobs and Ms Bridget Smit attended Diversity Inclusion Training.

Ms Bridget Smit successfully completed a Management Skills Programme.

Completed Research Projects

Towards prevention through systematic household contact investigation in the Free State, South Africa

Project leader: Dr Gladys Kigozi

CHSR&D staff: Prof Christo Heunis, Dr Michelle Engelbrecht, André Janse van Rensburg, Belinda Jacobs, Bridget Smit, Ryan Mayne

Free State Department of Health (FSDoH) staff: Dr Perpetual Chikobvu (Health Information, Research and Training Directorate)

University of Western Cape staff: Dr Jeannine Uwimana-Nicol

Contact investigation/tracing and household-level infection control form part of community-level promotion and disease prevention activities of ward-based outreach teams (WBOTs) under the Primary Health Care (PHC) Re-engineering Strategy. However, it is unclear how regularly or systematically household contact investigation and TB infection control measures are undertaken by the teams. The study assessed the *status* and *yield* of systematic household contact investigation when the TB index case: 1) has sputum smear-positive pulmonary TB, 2) has multidrug-resistant TB (proven or suspected), 3) is living with HIV, or 4) is a child <5 years.

Data were gathered among TB patients, household contacts and lay and professional service providers across 40 PHC facilities in the Mangaung metropolitan district. In terms of the status of systematic household contact TB investigation, findings indicated that there are huge challenges in the metro. A substantial proportion of facilities were not actively involved in household contact investigation activities and, by extension, recording and monitoring thereof. Of the 102 symptomatic household contacts referred for clinical evaluation at PHC facilities, more than half (52.9%) did not attend despite telephonic reminders and repeat visits to their households to encourage them. Barriers to attendance at PHC facilities were attributed to personal and health systems related limitations. In terms of yield, 48 contacts were clinically evaluated, of whom 17 were newly diagnosed with TB and 7 were initiated on isoniazid preventive therapy. Results also showed variation in the yield of TB across the different index TB patient risk groups, with the highest yield among contacts of HIV-negative patients. Better human and physical resourcing and concerted efforts to follow-up contacts for clinical evaluation are critical to optimise systematic household TB investigation.

Funding: African Doctoral Dissertation Research Fellowship Re-entry Grant; Thuthuka-National Research Foundation Grant

Ongoing Research Projects

Towards a health-enabling working environment: developing and testing interventions to decrease HIV- and TB-stigma among healthcare workers in the Free State, South Africa

Project leaders: Prof Edwin Wouters (University of Antwerp), Dr Asta Rau, Dr Michelle Engelbrecht (CHSR&D)

CHSR&D staff: Dr Gladys Kigozi, André Janse van Rensburg, Alfi Moolman, Belinda Jacobs, Bridget Smit

In the context of a devastating HIV-TB co-epidemic and severe human resource shortages in the health sector, HIV and TB stigma among healthcare workers threatens the health of the workforce as well as the health of the broader population visiting healthcare facilities. In response, the project aims to 1) scientifically assess the extent and sources of HIV and TB stigma among the healthcare workforce in the Free State Province and 2) refine and test innovative stigma-reduction interventions.



Social marketing campaign materials

The design applies a combination prevention approach by focusing on clinical, behavioural and structural factors that influence HIV and TB stigma in the workplace. In addition, stigma reduction activities are designed to target three social-ecology levels (individual, community, and structural). The research is structured as a classic Randomised Control Trial (RCT). A baseline study (completed in 2016) measured HIV and TB stigma in randomly selected hospitals in the Free State among randomly selected respondents—using a self-administered questionnaire with validated stigma scales to measure stigma and other key variables. Data showed stigma levels high enough to warrant HIV and TB stigma-reduction interventions. All piloted and semi-final interventions were thus comprehensively workshopped with FSDoH stakeholders, and were rolled out in 2017. Post-intervention, all respondents from the baseline will be followed up using the same questionnaire. Qualitative data will also be collected to explore if and how interventions influence HIV and TB stigma in the workplace and to uncover the processes through which change happens.

Funding: VLIR-UOS (Vlaamse Interuniversitaire Raad; Flemish-Interuniversity Council)

Student funding: 2 x PhD bursaries for students registered at University of Antwerp: 1 funded by FWO (Flanders Research Foundation) and 1 funded by BOF (University of Antwerp).

Ongoing Research Projects

PROLIFE: Improving TB outcomes by modifying *life*-style behaviours through a brief motivational intervention

Project leaders: Prof Olalekan Ayo-Yusuf (Sefako Makgatho Health Sciences University), Dr Kamran Siddiqi (University of York)

Project team: Dr Goedeke Louwagie (University of Pretoria), Prof Neo Morojele (Medical Research Council), Prof Steve Parrot, Dr Mona Kanaan, Noreen Medge (University of York), Prof Max O Bachmann (University of East Anglia), Dr Tolullah Oni (University of Cape Town), **Dr Michelle Engelbrecht, Dr Asta Rau, André Janse van Rensburg, Ryan Mayne, Mosilo Machere (University of the Free State), Dr Olu Omole (University of Witwatersrand), Prof John Tumbo (Sefako Makgatho University)**

Smoking and alcohol abuse among TB patients are associated with poor drug adherence and low treatment success. Addressing these risky lifestyle behaviours in an integrated way could improve TB treatment outcomes. This project aims to develop a complex behavioural intervention, the PROLIFE model, comprised of a brief motivational interviewing (MI) counselling strategy augmented with subsequent text messaging (SMS). The MI intervention targets several areas: tobacco smoking, alcohol use, and TB and antiretroviral treatment (ART) initiation and adherence.

The findings from the formative phase of the project indicated that the implementation of the PROLIFE intervention was feasible and acceptable within TB clinics. The proposed novel approach of enhancing MI with SMS messages was welcomed by the TB patient and lay health worker participants, supporting adoption of the proposed model in the main trial. The lay health workers were also well received by the patients but require extended training in recognition of the complexity of MI as a counselling method.

Based on progress made in the formative phase, funding was extended for two years, which allows for the rollout of the intervention in a Randomised Control Trial. The primary objective of the trial is to assess the effectiveness of the PROLIFE package in improving TB outcomes and modifying lifestyle behaviours. The trial commences in 2018 at the 30 primary care clinics with the highest TB caseload in three districts (Lejweleputswa in the Free State, Bojanala in the North West province and Sedibeng in Gauteng province).

Funding: The Newton Foundation through the South African Medical Research Council (SAMRC).

New Research Projects

Between a rock and a hard place: Emotional well-being and work engagement of nurses who moonlight in Free State hospitals

Project leader: Dr Michelle Engelbrecht (CHSR&D)

CHSR&D staff: Dr Asta Rau, André Janse van Rensburg, Alf Moolman, Bridget Smit

Department of Industrial Psychology: Dr Petrus Nel

School of Nursing: Dr Marisa Wilke

'Moonlighting' nurses hold a permanent nursing job, plus one or more part-time nursing jobs. Very little evidence exists on the emotional well-being of moonlighters and their work engagement.

This research aims to fill this gap. It is also designed to identify coping skills of moonlighters who report higher levels of well-being — we envisage that this will inform subsequent intervention-focused phases. A cross-sectional survey, as well as focus group discussions will gather data from all categories of nurses who moonlight at public or private hospitals in the Free State, including correctional service and army hospitals.

Key foci are to: 1) investigate job demands faced by moonlighting nurses; 2) investigate resources of moonlighting nurses; 3) identify associations between burnout, compassion fatigue, compassion satisfaction, general health, psychological capital, coping skills and work engagement; and 4) gain deeper insight into how job demands and resources of moonlighting nurses interface with their work engagement.

Funding: UFS Interdisciplinary Grant

Publications



Peer-reviewed journal articles co-published by CHSR&D staff

Coetzee JK & Rau A.

The narrative study of lives: editorial notes. *Qualitative Sociology Review (QSR)*, 13(1): 6-9.

Coetzee JK & Rau A.

Between enslavement and liberation: narratives of belonging from two farm workers in rural South Africa. *Qualitative Sociology Review (QSR)*, 13(1): 10-31.

Engelbrecht MC, Kigozi NG, Chikobvu P, Botha S & Van Rensburg HCJ.

Unsuccessful TB treatment outcomes with a focus on HIV co-infected cases: a cross sectional retrospective record review in a high-burdened province of South Africa. *BMC Health Services Research*, 17:470. DOI 10.1186/s12913-017-2406-x.

Heunis C, Kigozi G, Chikobvu P, Botha S & Van Rensburg HCJ.

Risk factors for mortality in tuberculosis patients: a ten-year electronic routine record review in a South African province. *BMC Public Health*, 17:38. DOI: 10.1186/s12889-016-3972-2.

Kigozi NG, Heunis JC, Engelbrecht C, Janse van Rensburg AP & Van Rensburg HCJ.

Tuberculosis knowledge, attitudes and practices of patients at primary health care facilities in a South African metropolitan: research towards improved health education. *BMC Public Health*, 17:795. DOI: 10.1186/s12889-017-4825-3.

Publications

Kigozi NG, Heunis JC, Chikobvu P & van der Merwe S.

Factors influencing treatment default among tuberculosis patients in a high burden province of South Africa. *International Journal of Infectious Diseases*, 54: 95–102.

Majali Z, Coetzee JK & Rau A.

Everyday hair discourses of African black women. *Qualitative Sociology Review (QSR)*, 13(1): 158–172.

Moletsane M, Coetzee JK & Rau A.

Life as a stranger: experiences of labour migrants from Lesotho. *Qualitative Sociology Review (QSR)*, 13(1): 74–91.

Muzigaba M, Kigozi G & Puone T.

Short term and sustained effects of a health system strengthening intervention to improve mortality trends for paediatric severe malnutrition in rural South African hospitals: an interrupted time series design. *South African Journal of Child Health*, 11(1): 38–45.

Liautaud A, Adu PA, Yassi A, Zungu M, Spiegel JM, Rawat A, Bryce EA & Engelbrecht MC.

Strengthening HIV and tuberculosis prevention capacity among South African healthcare workers: a mixed methods study of a collaborative occupational health program. *Safety and Health at Work*. DOI: 10.1016/j.shaw.2017.08.004.

O'Hara LM, Yassi A, Bryce EA, Janse van Rensburg A, Engelbrecht MC, Zungu M, Nophale LE & FitzGerald JM.

Infection control and tuberculosis in health care workers: an assessment of 28 hospitals in South Africa. *International Journal of Tuberculosis and Lung Disease*, 21(3): 320–326.

Sommerland N, Wouters E, Masquillier C, Engelbrecht M, Kigozi G, Uebel K, Janse van Rensburg A & Rau A.

Stigma as a barrier to the use of occupational health units for tuberculosis services in South Africa. *International Journal of Tuberculosis and Lung Disease*, 21(Suppl 1): S75–S80. DOI: <https://doi.org/10.5588/ijtld.17.0030>.

Wouters E, Masquillier C, Sommerland N, Engelbrecht M, Van Rensburg AJ, Kigozi G & Rau A.

Measuring HIV- and TB-related stigma among health care workers in South Africa: a validation and reliability study. *International Journal of Tuberculosis and Lung Disease*, 21 (Suppl 1): S19–S25(7). DOI: <https://doi.org/10.5588/ijtld.16.0749>.

Research Reports

Janse van Rensburg A & Rau A.

Qualitative assessment of the Integrated School Health Programme in rural South Africa using Normalisation Process Theory. Bloemfontein: CHSR&D.

Janse van Rensburg A & Engelbrecht MC.

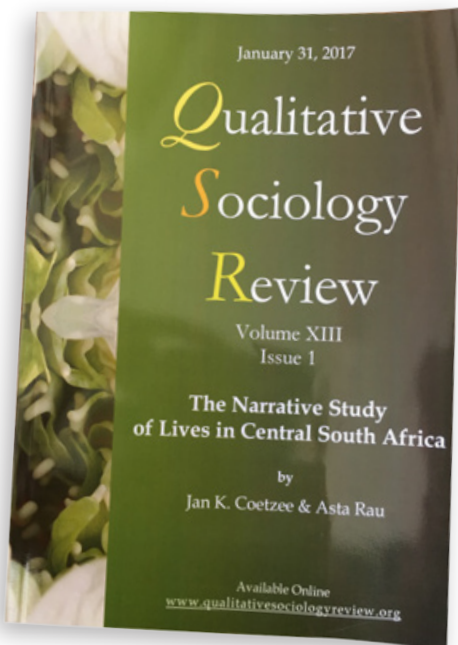
A report on the organisational capacity and readiness for change as well as the barriers and facilitators for the PROLIFE Model. Bloemfontein: CHSR&D.

Special Edition of Qualitative Sociology Review (QSR)

Dr Asta Rau (CHSR&D) and Prof Jan Coetzee (Sociology, UFS) co-edited a 14-article Special Edition of the IBSS-rated, international journal QSR.

All the articles derive from Prof Coetzee's programme: '*The Narrative Study of Lives*' — in which Dr Rau co-supervises Master's and Doctoral students.

Many of the articles are written by students. Thus the Special Edition showcases a neglected aspect of postgraduate training — guiding students to distil their theses into articles for publication in an accredited journal.



Conferences

International conference presentations

Heunis JC, Chikobvu P, Kigozi NG, van der Spoel-van Dijk A, Van Rensburg HCJ, Janse van Rensburg AP & Engelbrecht MC.

Research towards improved tuberculosis control in the Free State, South Africa – a narrative review. 10th European Congress of Tropical Medicine and International Health, Antwerp, Belgium, 16-20 October.

Kheleroa SM, Chikobvu P, Lenyehelo MS, Tshilo TR, Khajoane R, Setlogelo M, Heunis JC, Kigozi NG, Van Rensburg HCJ & Nophale M.

Implementation of a web-based health information system: lessons learnt from a pilot study in the Free State Province, South Africa. 10th European Congress of Tropical Medicine and International Health, Antwerp, Belgium, 16-20 October.

Kigozi G, Heunis C, Engelbrecht M, Janse van Rensburg A & Uwimana-Nicol J.

Community health workers in tuberculosis control in the Free State Province (South Africa): pointers for service improvement. Community Health workers and their contribution towards Sustainable Development Goals, Kampala, Uganda, 21-23 February.

Kigozi NG, Heunis JC, Engelbrecht MC, Janse van Rensburg AP & Van Rensburg HCJ.

Household contact tuberculosis investigation under re-engineered primary health care in the Free State Province, South Africa. 10th European Congress of Tropical Medicine and International Health, Antwerp, Belgium, 16-20 October.

Van Rensburg HCJ.

Human Resources for Health (HRH) challenges, constraints, crises. International Conference on Nursing & Healthcare, Dubai, UAE, 13-15 November.

National and local conference presentations

Engelbrecht M, Rau A, Kigozi G, Janse van Rensburg A, Wouters E, Sommerland N, Masquillier C & Uebel K.

Factors associated with health care workers' fears of occupationally acquired tuberculosis (TB). 6th Annual Free State Provincial Health Research Day, 2-3 November.

Conferences

Janse van Rensburg A, Engelbrecht MC, Kigozi NG & Van Rensburg HCJ.

Tuberculosis prevention knowledge, attitudes and practices of primary healthcare nurses in a South African district. 6th Annual Free State Provincial Health Research Day, 2-3 November.

Kigozi NG, Heunis JC, Engelbrecht MC, Janse van Rensburg AP, Uwimana–Nicol J, Chikobvu P & van Rensburg HCJ.

Household contact non-uptake of tuberculosis clinical evaluation in a high burden district in South Africa. 6th Annual Free State Provincial Health Research Day, 2-3 November.

Malakoane B, Heunis C, Chikobvu P, Kigozi G & Kruger W.

Situational analysis of the public healthcare service in a South African province: an opportunity for system improvement. 6th Annual Free State Provincial Health Research Day, 2-3 November.

Heunis JC, Van Rensburg HCJ & Kigozi NG.

Inequality and inequity in the supply of healthcare workers in South Africa. 6th Annual Free State Provincial Health Research Day, 2-3 November.

Invited presentations

Heunis JC & Van Rensburg HCJ.

Disparity in supply of health professionals: how the Free State features in the South African Health Review, 1995-2015. Free State Department of Health Human Resource Consultative Forum on 'Revitalisation of Human Resources', Bloemfontein, Free State Department of Health, 21-23 June.

Rau A, Engelbrecht MC, Kigozi G, Janse van Rensburg A, Uebel K, Masquillier C, Sommerland N, Wouters E.

Randomised-control trial (RCT) methodology: integrating quantitative and qualitative methods. Swiss Sociological Association, University of St. Gallen, Switzerland, 18 May.

Van Rensburg, HCJ.

Human Resources for Health: How real and relative the crisis? Master class Sociology of Health and Social Well-being, University of Antwerp, Belgium, 19 October.

Teaching, Postgraduate Supervision and Research Capacity Building



Alex Heggenstaller

Completed Doctoral degree studies

Heggenstaller Alex, Ms:

Doctor of Philosophy (Sociology). Dissertation title: *The role of cosmetic surgery in the embodied experience of female beauty*. Supervised by Prof J Coetzee (Sociology) and Dr A Rau (CHSR&D). Alex graduates in June 2018.



Ansie du Plooy (left) Receiving her prize as the best Masters student in Gender Studies from Dr Nadine Lake (right), Programme Director of Gender Studies

Completed Master's degree studies

Du Plooy Ansie, Ms:

Master of Gender Studies (with distinction). Dissertation title *Barriers to HIV and AIDS treatment and care as experienced by women living with HIV and AIDS*. Supervised by Dr A Rau.

Teaching, Postgraduate Supervision and Research Capacity Building



Professor JK Coetzee (Sociology), Ms Ndaka Chikonzo, Dr Asta Rau (CHSR&D)

Ndakaitei Chikonzo, Ms:

Master of Sociology (with distinction). Dissertation title: *Growing old with HIV: Narratives of women in Manicaland, Zimbabwe*. Supervised by Prof J Coetzee (Sociology) and Dr A Rau.



Ms Shamiso Shumba and her son Craig

Shumba Shamiso, Ms:

Master of Development Studies. Dissertation title: *An investigation of Anti-retroviral therapy uptake by children, a case of in Chivi district, Zimbabwe*. Supervised by Dr A Rau.



Ms Farirai Zinatsi

Zinatsi Farirai, Ms:

Master of Development Studies. Dissertation title: *Strategies to improve tuberculosis infection control among primary healthcare workers in Mangaung Metro*. Supervised by Dr MC Engelbrecht.

Oliver Jomarie, Ms:

Master of Development Studies. Dissertation title: *The implications of clinic management practices on healthcare provision in the rural Western Free State*. Supervised by A Janse van Rensburg.



All CHSR&D research staff contributed to the design of the Master of Health Systems Studies (by dissertation) which was approved in 2017. The first intake of students will be in 2018.

Community Engagement



Prof Christo Heunis was a member of the organising committee, edited the abstract book and served as oral and poster presentation judge of the 6th Annual Free State Provincial Health Research Day 2017, Bloemfontein, 2–3 November.

Prof Christo Heunis served as Vice-Chairperson of the Free State Provincial Health Research Committee.

Dr Gladys Kigozi co-chaired a session on Tuberculosis at the 6th Annual Free State Provincial Health Research Day 2017, Bloemfontein, 2–3 November.

Visitors To The CHSR&D



Nina Sommerland from the University of Antwerp (Belgium) visited the CHSR&D to collaborate on the HIV- & TB-Stigma project.



Prof Shoou-Yih Daniel Lee Gillings from the School of Global Public Health at the University of North Carolina at Chapel Hill (USA) visited on 21 August to discuss possibilities for collaboration on research projects.



Visits By CHSR&D Staff To Other Institutions



Photograph © Emilie Müller

Dr Florian Elliker, University of St. Gallen

Dr Asta Rau (CHSR&D) and Prof Jan K. Coetzee (Sociology) visited the University of St. Gallen (Switzerland) from 15-19 May on invitation from Dr Florian Elliker to discuss joint publications, and to present on the methodology of the HIV- & TB-Stigma project to the Swiss Sociological Association.


Dr Asta Rau presented on the *Narrative Study of Lives (NSol)*: A synopsis of the QSR special edition 13(1), the programme, and an exemplar to the Sociology Department staff and postgraduate students.



Prof Anne Ryen, University of Agder

Dr Asta Rau (CHSR&D) and Prof Jan Coetzee (Sociology) visited the University of Agder (Norway) from 25-26 May on invitation from Prof Anne Ryen to discuss joint publications, and explore future cooperation with CHSR&D's work in Health Systems Research.

Dr Asta Rau presented on the *Narrative Study of Lives (NSol)*: A synopsis of the QSR special edition 13(1), the programme, and an exemplar to Sociology Department staff and postgraduate students.



Thank You

With this *News Report*, we express our sincere thanks to all those funders who in previous years, and especially during 2017, so generously supported the efforts of the CHSR&D:

- African Doctoral Dissertation Research Fellowship of the African Population and Health Research Center
- African-Asian Society (AAS)
- American International Health Alliance (AIHA) HIV/AIDS Twinning Center funded by CDC through PEPFAR
- Andrew Mellon Foundation
- Atlantic Philanthropies
- Australian Agency for International Development (AusAID)
- Bristol-Myers Squibb
- Canadian International Development Agency (CIDA)
- Canadian Institutes of Health Research (CIHR)
- Centers for Disease Control and Prevention (CDC USA, South Africa)
- Department of Community Health, UFS
- Department for International Development (DfID, UK) via HLSP
- Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ) via Health Focus GmbH
- Desmond Tutu TB Centre (DTTC), Stellenbosch University
- Development Cooperation Ireland (DCI)
- Development Economics Research Group (DERG), World Bank
- Directorate Research Development, UFS
- Doris Duke Charitable Foundation (DDCF)
- European Union (EU)
- Flanders International Cooperation Agency (FICA)
- Ford Foundation
- Free State Department of Health (FSDoH)

- Global Health Research Initiative (GHRI)
- Health Systems Trust (HST)
- HIVCare (an operating division of Medicross Healthcare Group)
- Infectious Disease Epidemiology Unit (IDEU, University of Cape Town)
- International Development Research Centre (IDRC, Canada)
- International Projects Advisory Service (Ipas)
- International Union against Tuberculosis and Lung Disease (“The Union”)
- Joint Economics, Aids and Poverty Programme (JEAPP)
- Medical Research Council of South Africa (MRC)
- National Research Foundation of South Africa (NRF)
- Netherlands Support Programme, World Bank
- Open Society Foundation for South Africa (OSF-SA)
- Programme to Support Pro-Poor Policy Development (PSPPD)
- Research Matters (IDRC)
- Save the Children (UK)
- South African-Flemish Bilateral Scientific and Technological Cooperation Programme
- South African Labour and Development Research Unit (SALDRU)
- State University of New York Downstate Medical Center (SUNY-DMC)
- Strategic Academic Cluster for New Frontiers in Poverty Reduction and Sustainable Development, UFS
- Swiss Agency for Development and Cooperation (SDC)
- Technology, Research, Education and Technical Assistance for **Tuberculosis** (TREAT TB)
- United Nations Development Programme (UNDP)
- United States President’s Emergency Plan for AIDS Relief (PEPFAR)
- United States Agency for International Development (USAID)
- University of British Columbia (UBC)
- University of the Free State (UFS)
- VLIR-UOS (Vlaamse Interuniversitaire Raad / Flemish Interuniversity Council)
- World Health Organization (WHO)
- WK Kellogg Foundation



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