

THE 2026 MANUSCRIPT  
WRITING HUB ACADEMY



*Virtual Conference*

THEME:

# AFRICAN VOICES FOR TRANSDISCIPLINARY RESEARCH

→ DATE: 20TH - 22ND MAY 2026 ←



**Organizing Entity:**  
The Manuscript Writing Hub Academy,  
in partnership with SAA.



RESEARCHERS' HUB  
With BOLU & MO

## WELCOME MESSAGE FROM THE FACILITATOR

Welcome, esteemed colleagues, distinguished speakers, and passionate champions of African scholarship.

My name is Dr. Qudus Lawal, and it is my distinct honour, as the facilitator of the Manuscript Writing Hub Academy, to welcome you to the 2026 Manuscript Writing Hub Academy Virtual Conference. I want to extend a special thank you to our partner, the Society for AIDS in Africa, for making this gathering possible.

Over the next three days, from May 20th to 22nd, we gather under a bold and necessary theme: Amplifying African Scholarship: Writing for Impact in a Complex World. This is a call to action. For too long, the production of knowledge about Africa has occurred at a distance, shaped by external priorities and published in spaces that do not always centre our questions, our methods, or our voices. This week, we want to contribute to changing that. We are here to declare that African researchers are not data collectors or local collaborators in someone else's story. We are the primary authors of the continent's intellectual future.

This declaration is the very reason the Manuscript Writing Hub Academy exists. Our vision is straightforward yet transformative: to build a continent where every African researcher, regardless of discipline, institution, or access to resources, possesses the skills, confidence, and networks to write their work into global conversations. We believe that the academy system, for all its rigour, has historically underinvested in the craft of writing. Brilliant minds generate brilliant data, but without the ability to structure an argument, navigate peer review, or tell a compelling story, that brilliance remains trapped in field notes and hard drives. The Manuscript Writing Hub Academy was founded to close that gap. We do what we do because we have seen too many promising careers stall at the writing stage. We do what we do because we know that every unpublished paper is a missed opportunity to influence policy, to shift a paradigm, or to inspire a young researcher in a neighbouring country. We do what we do because we believe that the future of African scholarship depends not on waiting for permission from distant gatekeepers, but on building our own table, our own standards, and our own platforms. This conference is one expression of that commitment: three days of



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**DR.  
QUDUS  
LAWAL**



**FACILITATOR**

intentional learning, strategic networking, and collective empowerment.

The programme has been carefully designed to contribute to our goals alongside those of others - move you from critique to competence to confidence. Each day opens with a keynote that names the systemic challenges: from the need for transdisciplinary research that truly serves African communities, to the politics of publishing that governs whose work becomes visible, to the urgent task of writing the untold stories that only we can tell. Following those keynotes, we will hear from emerging voices through our oral abstract sessions, where five researchers each day will have five minutes to share their work and their vision. Each day closes with a skills-building workshop where you will leave with practical tools: whether learning to dare to dream boldly on the page, leveraging digital tools to write more efficiently, or making a paradigm shift by placing storytelling at the heart of your science.

This year's competitive selection process received 72 submissions—32 more than in 2025—of which only 14 were accepted for presentation after some were disqualified for plagiarism or poor quality. All eligible abstracts underwent two rounds of constructive review through the manuscript hub mentorship, and the 14 selected presenters received additional training on abstract presentation, with top presenters benefiting from a 12-month mentorship sponsored by the Society for AIDS in Africa. The 14 accepted abstracts included 82 authors from six African countries: Nigeria contributed eight abstracts, Rwanda two, and Benin, Ghana, Morocco, and Zimbabwe one each. Cross-sectional surveys were the most common design, accounting for nine studies, complemented by one qualitative study, one quasi-experimental intervention, two laboratory-based investigations, one surveillance system evaluation, and one comparative case study. Study populations spanned medical and health students, nurses and midwives, people living with HIV, adolescents and youth, gender and sexual minorities, children under five, farmers and rural entrepreneurs, osteoarthritis patients, and general

clinical populations. This array of abstracts reflects a robust and methodologically diverse body of emerging research from across the continent.

To our keynote speakers -Dr. Seye Abimbola, Dr. Tolulope Osayomi, and Professor Greg Erhabor -thank you for lending your wisdom and your courage to this gathering. To our facilitators, abstract session chairs, and skill builders -Dr. Nyaradzo Mgodzi, Dr. Henry Nagai, Professor Jeane Condo, Osahon Otaigbe, Stephen Ayisi-Addo, Munya Saruchera, Professor Babatunde Salako, Dr. Tayo Owoeye, Ifedayo Adeyefa-Olasupo, Musa Aminu, and Matthew Oluwaniyi -we thank you for your generosity, your expertise, and your commitment to building the next generation of African scholars. And to every single one of you who has logged in from across Africa and beyond—from Lagos to Nairobi, from Harare to Accra, from diaspora to home—you are the reason this academy exists. Your questions, your curiosity, and your determination to write Africa's stories are what will make these three days unforgettable.

So, please settle in. Keep your cameras on when you can, your questions ready, and your notebooks open. Let us learn together, challenge together, and leave this conference not just inspired but equipped to write Africa's next chapter - one manuscript, one story, one published paper at a time.

Welcome once again to the 2026 Manuscript Writing Hub Academy.

Let us begin.

## WELCOME MESSAGE FROM THE CO-FACILITATOR

Dear esteemed participants, distinguished speakers, skill builders, and fellow facilitators, it is my honour to welcome you to the 2026 Manuscript Writing Hub Academy Virtual Conference. I am Dr. Osahon Otaigbe, and I stand with you as a co-facilitator and a fellow traveller on this journey we have all chosen, the journey of amplifying African scholarship through the written word. Over the next three days, from the 20th to the 22nd of May 2026, we gather under the powerful theme, Amplifying African Scholarship: Writing for Impact in a Complex World, and I want to offer you three key messages to carry with you through every session, every keynote, and every skills-building workshop.

First, I want to speak to the question of voice. For too long, the stories of this continent, its discoveries, its innovations, its struggles, and its triumphs, have been filtered through lenses not our own. This conference is a declaration that African voices are not supplementary to global scholarship; they are central to it. Each of you sitting here today, whether you are presenting an abstract for the first time or delivering a keynote from decades of experience, carries within you a perspective that no one else on earth can replicate. The complex world we write for does not need more of the same. It needs the particular, the rooted, the authentic. And that is what you bring. So my first message is this: do not shrink. Do not write to please imagined gatekeepers in distant time zones. Write from your truth, your data, your community, and your questions. That is what amplifying African scholarship truly means.

My second message is about the act of writing itself. We often treat writing as the final chore of research, the tedious task that comes after the real work of data collection and analysis is complete. I am here to tell you that writing is not the end of research. Writing is research. The moment you put words to a page, you are thinking, refining, and discovering connections you did not see in your spreadsheets or your field notes. This conference is designed to



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honour writing as a rigorous, creative, and deeply intellectual act. Our skill builders and keynote speakers are not here to give you formulas; they are here to help you find your own process, your own rhythm, your own discipline. My second message to you is this: take writing seriously. Defend time for it. Practise it like the craft it is. Because the most brilliant research that never gets written might as well have never been done.

My third and final message is about community. The path of the African researcher is often a lonely one, marked by limited resources, heavy teaching loads, and the constant pressure to prove oneself on terms set elsewhere. But look around this virtual room. Look at the names on our programme: Seye Abimbola, Tolulope Osayomi, Gregory Erhabor, Ifedayo Adeyefa-Olasupo, Musa Aminu, Matthew Oluwaniyi, and so many more. You are not alone. You are part of a growing, vibrant, and increasingly visible ecosystem of scholars who are choosing to do things differently, to collaborate rather than compete, to mentor rather than hoard, and to publish not just for promotion but for transformation. My third message is this: reach out.

Connect with the person whose abstract challenges your thinking. Ask a question in the chat. Exchange emails with a speaker whose work inspires you. Build the network you wish existed. Because the future of African scholarship will not be built by isolated geniuses working in silos. It will be built by a community of practitioners who read each other's work, cite each other's papers, and lift each other as they climb.

So, as we begin these three days together, I invite you to bring your full self, your questions, your doubts, your ambitions, and your dreams. The Manuscript Writing Hub Academy and our partners at the Society for AIDS in Africa have crafted a programme that moves from transdisciplinary research to untold stories, from the politics of publishing to digital tools, from storytelling as a paradigm shift to the audacity of daring to dream for Africa. Let us enter this space with intention. Let us leave it transformed. Welcome, everyone. Welcome to the 2026 Manuscript Writing Hub Academy Virtual Conference. Let us begin

**CONFERENCE PROGRAMME**

**2026 MANUSCRIPT WRITING HUB ACADEMY VIRTUAL CONFERENCE**

**AMPLIFYING AFRICAN SCHOLARSHIP: WRITING FOR IMPACT IN A COMPLEX WORLD**



EVENT	DAY 1: 20TH MAY 2026	DAY 2: 21TH MAY 2026	DAY 3: 22TH MAY 2026
Keynote Speakers  100pm WAT	<p><b>Topic:</b> Transdisciplinary Research and Africa's Future</p> <p><b>Speaker:</b> Seye Abimbola</p> <p><b>Facilitator:</b> Nyaradzo Mgodzi</p>	<p><b>Topic:</b> Writing the untold Africa stories</p> <p><b>Speaker:</b> Tolulope Osayomi</p> <p><b>Facilitator:</b> Henry Nagai</p>	<p><b>Topic:</b> The Politics of Publishing – Journals, Ethics and Open Science</p> <p><b>Speaker:</b> Greg Erhabor</p> <p><b>Facilitator:</b> Jeanine Condo</p>
<b>5 MINUTES OF STRETCH BREAK</b>			
Oral Abstract Presentations  200pm WAT	<p><b>5 minutes, 5 Abstracts</b></p> <p><b>Facilitator:</b> Osahon Otaigbe</p>	<p><b>5 minutes, 5 Abstracts</b></p> <p><b>Facilitator:</b> Stephen Ayisi-Addo</p>	<p>5 minutes, 5 Abstracts</p> <p><b>Facilitator:</b> Munya Saruchera</p>
<b>5 MINUTES OF WATER BREAK</b>			
Skills Building Sessions  300pm WAT	<p><b>Topic:</b> Dare to Dream for Africa</p> <p><b>Speaker:</b> Ifedayo Adeyefa-Olasupo</p> <p><b>Facilitator:</b> Qudus Lawal</p>	<p><b>Topic:</b> A paradigm shift with storytelling</p> <p><b>Speaker:</b> Musa Aminu</p> <p><b>Facilitator:</b> Babatunde Salako</p>	<p><b>Topic:</b> Leveraging digital tools to support manuscript writing</p> <p><b>Speaker:</b> Matthew Oluwaniyi</p> <p><b>Facilitator:</b> Tayo Owoeye</p>
Closing Sessions	Overview for Day 1	Overview for Day 2	Overview for Day 3



2026

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DAY ONE

## KEYNOTE ADDRESS

TRANSDISCIPLINARY RESEARCH  
AND AFRICA'S FUTURE

→ 20TH MAY 2026 ←

Today's keynote address will be delivered by Dr. Seye Abimbola, a Nigerian-trained physician turned health systems researcher who has emerged as one of the most compelling and disruptive voices in global health. Abimbola is not your typical academic; he began his career on the front lines at Nigeria's National Primary Health Care Development Agency, where he witnessed firsthand the uncomfortable power asymmetries between deep-pocketed international donors and the local communities they claimed to serve. That experience became the moral compass for his life's work. Now an Associate Professor and Principal Research Fellow at the School of Public Health, University of Sydney, Abimbola holds an extraordinary list of honours: he was the inaugural Editor-in-Chief of BMJ Global Health for nearly a decade, transforming it from just another journal into a fierce platform for voices from the Global South. He has held the prestigious Prince Claus Chair in Equity and Development at Utrecht University and served as a Thinker in Residence at the WHO's Alliance for Health Policy and Systems Research, a role created specifically to inject his critical perspective into the WHO Secretariat. He was also named a Radulovacki Visiting Scholar at Northwestern University. In 2024, he published his landmark open-access book, *The Foreign Gaze: Essays on Global Health*, which distils his core thesis: the physical and social distance between those who produce knowledge (usually in the West) and those who are the subjects of that knowledge (usually in Africa) is the root cause of inequitable research practices. He is not merely a researcher; he is a diagnostician of global health's deepest ailment.

For his talk on transdisciplinary research and Africa's future, Dr. Abimbola will reject business-as-usual models with characteristic clarity. He will begin by deconstructing what he calls the "foreign gaze" in research, arguing that even well-intentioned transdisciplinary projects often remain extractive. He will challenge the standard template where African researchers serve as

Speaker: Seye Abimbola



Facilitator: Nyaradzo Mgodli



data collectors or junior co-authors rather than principal investigators, defining the problem as the distance between where knowledge is produced, the pose, and where its audience sits, the gaze. For Africa to secure its future, he insists, research must be led by questions that matter to African communities, not by donor-driven priorities. Next, he will push the audience to move from mere participation to genuine ownership. While transdisciplinary research by definition involves multiple disciplines, Abimbola argues for a dignity-based practice where local governance structures and community knowledge systems sit as equal partners at the table, not as stakeholders to be consulted and then set aside. Finally, he will tackle the politics of knowledge head-on, showing how current funding structures and the requirements of high-impact journals, almost all based in high-income countries and published almost exclusively in English, actively shape what gets studied in Africa and what remains invisible. His prescription is decolonial action: a thorough reform of how research is funded, taught, and published so that African scholars finally control their own research agendas. Listen for his signature refrain: "If you find yourself repeatedly explaining something and know there's a better way to do it, write it down. Don't expect career rewards... but they're vital for shaping the field."

Stepping in as facilitator is Dr. Nyaradzo Mgodzi, a distinguished clinical researcher based at the University of Zimbabwe in Harare. While Abimbola

offers the theoretical critique of power structures, Mgodzi lives the messy, pragmatic reality of implementation science. She specialises in HIV prevention, focusing with particular intensity on adolescent girls and young women as well as pregnant and breastfeeding populations. She is a lead investigator on several major Microbicide Trials Network studies, including the DELIVER trial on the safety of PrEP in pregnancy and the HPTN 084-01 study on long-acting injectable PrEP for adolescents. Beyond her clinical trials, Mgodzi is known for wearing many hats with uncommon grace: she co-chairs the INTEREST Conference in Africa and leads scientific working groups at the University of Zimbabwe Clinical Trials Research Center, where she actively mentors early-career African researchers in scientific writing, constantly emphasising the importance of turning African data into African-authored publications. She is the ideal facilitator for this conversation because she represents the boots-on-the-ground reality of transdisciplinary research, successfully running complex, multi-country trials in resource-limited settings while training the next generation of African scientists. Together, Abimbola and Mgodzi promise a session that moves from sharp critique to practical possibility.



DAY 1

THEME 1

ABSTRACTS

## HEALTH SYSTEMS, CLINICAL COMPETENCE, AND SERVICE DELIVERY

The Day 1 abstract session, themed Health Systems, Clinical Competence, and Service Delivery, is designed to showcase the work of early-career researchers who are already practising what the opening keynote by Dr. Seye Abimbola will advocate: the urgent need to move beyond disciplinary silos and toward knowledge production that is collaborative, context-sensitive, and problem-driven. Africa's grand challenges, from climate vulnerability and infectious disease outbreaks to food insecurity, rapid urbanisation, and health systems fragmentation, cannot be solved by any single discipline working alone. Epidemiology cannot speak to the political economy of vaccine distribution. Climate science cannot address the cultural dimensions of agricultural adaptation without anthropology. Engineering solutions for water access fail without an understanding of local governance structures.

This abstract session will bring several distinct contributions to the conference. First, it will ground the theoretical arguments of the keynote in real, ongoing research. While Dr. Abimbola will diagnose

the problem of the foreign gaze and the extractive nature of conventional transdisciplinarity, these abstracts will offer concrete examples of researchers who are attempting to do things differently, with all the messiness, reflexivity, and local ownership that such an approach requires. Second, the session will elevate early-career voices, which are often underrepresented in conferences that prioritise established professors. By giving ten emerging researchers exactly three minutes each, the session trains participants in the difficult art of distilling complex, multi-method research into a sharp, compelling narrative, a skill that is essential for grant applications, policy briefs, and media engagement. Third, the rapid-fire format, facilitated with warmth and precision, creates an energising break from longer lecture-style presentations. The audience will hear ten distinct ideas, ten different methods, and ten unique African contexts in the span of approximately forty minutes, generating a wealth of cross-disciplinary connections and potential collaborations. Fourth, the session serves as a bridge between the keynote and the skills-building workshop. After hearing about the theory of transdisciplinary research, and then seeing examples of it in practice, participants will be better prepared to engage with the practical writing workshop on daring to dream for Africa, understanding that those dreams are already being pursued by peers across the continent.

Facilitating this session is Dr. Osahon Otaigbe, whose role is both logistical and inspirational. As facilitator, Dr. Otaigbe will ensure that each presenter adheres strictly to the three-minute limit, that transitions between presenters are smooth, and that the session stays on schedule for the benefit of all participants. But beyond these technical responsibilities, Dr. Otaigbe will shape the

emotional tone of the session. He will open by reminding the audience that behind every abstract is a real researcher who has laboured over data collection, wrestled with ethical approvals, navigated institutional obstacles, and dared to submit their work for public scrutiny. He will create a supportive atmosphere where early-career researchers feel seen and celebrated rather than judged. He will manage the chat and Q&A, ensuring that questions to presenters are respectful, constructive, and genuinely curious. And he will close the session by drawing thematic threads across the ten presentations, highlighting patterns and insights that might otherwise be missed in the

rapid-fire format. Dr. Otaigbe's facilitation ensures that this session is not merely a parade of summaries but a coherent, meaningful, and encouraging experience for both presenters and audience members, embodying the conference's commitment to amplifying African scholarship by creating platforms where emerging voices can be heard with dignity and purpose.

DAY 1

SKILLS BUILDING

## DARE TO DREAM FOR AFRICA

20TH MAY 2026

Speaker: Ifedayo A. Olasupo



Facilitator: Godus Lawal



Today's one-hour skills-building session will be delivered by Ifedayo Adeyefa-Olasupo, a researcher whose work sits at the fascinating intersection of cognitive psychology, physics, and visual perception. Based at the University of Oregon, Adeyefa-Olasupo has carved out a distinctive niche in the scientific community by applying principles from classical physics to understand how the human brain processes visual information. His most significant contribution to date involves the mechanics of predictive remapping—how the visual system anticipates and compensates for eye movements so that our perception of the world remains stable and continuous. In 2023, he published a landmark paper in *Physical Review Research* that identified a fundamental law governing this phenomenon, demonstrating that visual space actually curves before eye movements, a finding that challenges conventional models of

visual perception. This builds on his earlier work, including a comprehensive tutorial review on the memory colour effect spanning nearly a century of research from 1923 to 2016, as well as a 2021 paper on retinotopic mechanics derived using classical physics. What makes Adeyefa-Olasupo particularly compelling is his interdisciplinary boldness: he does not merely borrow concepts from physics as metaphors but applies them as analytical tools to decode the brain's computational strategies. His ability to bridge the hard sciences and cognitive neuroscience makes him an ideal skill builder for an audience of researchers who need to think beyond traditional disciplinary boundaries.

This skills-building session is designed to help early-career researchers turn their boldest ideas for the continent into published science that matters. Anchored in the theme Dare to Dream for Africa, the session moves beyond technical instruction to ask a fundamental question: how do African researchers take ambitious, locally grounded questions and transform them into compelling manuscripts that command global attention? Adeyefa-Olasupo brings a unique perspective to this task because his own career demonstrates that daring to dream requires conceptual clarity, interdisciplinary courage, and rigorous argumentation. Participants can expect to move beyond surface-level grammar tips and journal formatting into deeper strategic thinking about how to structure a paper so that its central claim is both testable and memorable. Drawing on his experience publishing in high-impact venues like *Physical Review Research*, he will address how to craft an introduction that frames a research question as a genuine puzzle worthy of the continent's brightest minds, how to present methods and results with transparency and precision, and how to write a discussion that honestly engages with limitations while still advancing a bold conclusion. The session will also explore what it means to dare to dream in practical terms: selecting the right journal to amplify African voices, responding productively to peer review

without losing the integrity of locally grounded questions, and building a publication track record that opens doors for future funding and collaboration. For researchers across Africa who often operate in resource-constrained settings, mastering these skills is about how a new generation of African scientists transforms audacious dreams into visible, citable, and impactful knowledge that shapes the future of the continent.

Stepping in as facilitator for this session is Dr. Qudus Lawal, a Consultant Obstetrician and Gynaecologist with a specialization in gynaecological oncology at Irrua Specialist Teaching Hospital in Nigeria, where he also serves as an honorary lecturer at Ambrose Ali University. Dr. Lawal is a formidable advocate for cervical cancer elimination, leading national efforts through CANCAD Nigeria and the End Cervical Cancer Nigeria Initiative, while also serving on the Monitoring and Evaluation Committee of Nigeria's National Task Force for Cervical Cancer Elimination. His appointment as a junior faculty mentor with the International Gynaecological Cancer Society for the 2024 to 2026 term speaks directly to his expertise in manuscript writing and research capacity building, as the role explicitly involves mentoring early-

career researchers in scientific writing and networking. Dr. Lawal is also the Program Coordinator for IPVS Nigeria and serves on the steering committee of the Africa Cancer Research and Control ECHO program. Notably, he is the founder of the Students Manuscript Writing Hub Fellowship, a programme he conceived after a conversation with his mentor about the lack of in-depth research training for undergraduates. The fellowship selected twenty medical and dental students across Nigeria for six months of weekly training, mentorship, and assessment. Dr. Lawal's research portfolio spans cervical cancer prevention, Lassa fever management, and health systems strengthening, with publications in journals including BMC Infectious Diseases, BMJ Open, and SAGE Open Medical Case Reports. As facilitator, he brings an intimate understanding of the manuscript writing challenges faced by African researchers, making him the perfect bridge between Adeyefa-Olasupo's conceptual framework and the practical realities of building a research career on the continent.



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DAY TWO

## KEYNOTE ADDRESS

# WRITING THE UNTOLD AFRICA STORIES

→ 21ST MAY 2026 ←

Today's keynote address on writing the untold Africa stories will be delivered by Dr. Tolulope Osayomi, an Associate Professor in the Department of Geography at Nigeria's premier university, the University of Ibadan, where he has spent over a decade training the next generation of geographers and public health researchers. Osayomi earned his PhD in health and medical geography from the same institution, and his scholarship sits at a rare and compelling intersection: spatial epidemiology and medical humanities. This means he is equally comfortable mapping disease clusters using sophisticated spatial statistics and employing tools like ethnography, critical discourse analysis, and counter-storytelling to understand how African societies interpret and respond to illness. In March 2020, as the COVID-19 pandemic swept across the globe, Osayomi founded and directed the COVID-19 Mapping Lab at the University of Ibadan, a virtual collaborative of faculty and graduate students that provided daily and weekly geovisual updates to the public, complementing the efforts of the Nigerian Centre for Disease Control and the ECOWAS CDC. His research has consistently challenged conventional narratives: he has published widely on the geography of COVID-19, the spatial patterns of under-five mortality and its macroeconomic predictors, the emergence of a diabetes pocket in Nigeria, the relationship between fast food outlets and obesity, and even the political economy of overweight and obesity with its provocative finding that being fat is not seen as a disease but as a sign of good living. His recent work on the African COVID-19 paradox asks why the continent was spared from the devastating impact predicted by global health models, and he answers that question not by looking to Western experts but by centering African agency, African ingenuity, and African voices. Osayomi has been honoured as an Africa Oxford Initiative visiting fellow at Oxford University, a TORCH international fellow at Oxford's Humanities Division, a visiting scholar at Oxford's Centre for the History of Science, Medicine and Technology, a pioneer fellow of Nigeria's globally acclaimed Ife Institute of

Speaker: Tolulope Osayomi



Facilitator: Henry Nagai



Advanced Studies, and a 2025 Nigerian Science Leadership Programme fellow. He is also serving as guest editor for a special issue on geospatial responses to COVID-19 in Africa for the Journal of Geovisualisation and Spatial Analysis, published by Springer Nature.

The focus of Dr. Osayomi's keynote, titled *Writing the Untold Africa Stories*, emerges directly from his scholarly trajectory and his deepening engagement with decolonial frameworks. He will argue that for too long, the stories told about health, disease, and resilience in Africa have been authored from elsewhere, shaped by the foreign gaze that determines which research questions matter and which findings count as knowledge. Drawing on his project deconstructing the African COVID-19 paradox, which he worked on during his time at Oxford, Osayomi will invite the audience to ask why Africa was spared from the envisaged impact of the virus when global health models predicted catastrophe. His answer will not rest on biological or climatic explanations alone, but on what he calls the dynamic expressions of African agency: community-led responses, indigenous knowledge systems, and forms of resilience that rarely make it into high-impact journals. He will challenge researchers to move beyond simply filling gaps identified by Northern scholars and instead to tell stories that begin from African questions, African experiences, and African solutions. He will demonstrate how tools such as disease mapping, counter-storytelling, and online ethnography can be combined to produce scholarship that is both rigorous and radically re-centering. Ultimately, Osayomi will call on African researchers to see themselves not as data collectors or local collaborators in someone else's project, but as the primary authors of the continent's health narratives,

capable of reshaping global health discourse from the ground up.

Facilitating this important conversation is Dr. Henry Nagai, a seasoned public health physician scientist and international development advisor with over twenty-five years of experience in global public health practice. Dr. Nagai has dedicated his career to addressing some of Africa's most pressing health challenges, including HIV, tuberculosis, neglected tropical diseases, human papillomavirus, and immunisation. His work integrates implementation science, systems science, and clinical research, ensuring that evidence does not remain on the page but translates into practical interventions that reach the most vulnerable populations. He has served as an advisor and member of the international steering committee of the Society for AIDS in Africa, the custodian and organiser of the International Conference on AIDS and STIs in Africa, known as ICASA. At the ICASA 2025 conference hosted by Ghana, Dr. Nagai was among only fourteen individuals from across the continent to receive an international award recognising his long years of support to the Society for AIDS in Africa in organising that critical convening. As facilitator, Dr. Nagai brings a practitioner's grounding to Osayomi's theoretical critique, ensuring that the conversation about untold stories remains tethered to the real-world work of saving lives, strengthening health systems, and amplifying African leadership on the global stage.

Facilitator: Stephen A. Addo



DAY 2

THEME 2

ABSTRACTS

## VULNERABLE POPULATIONS, MENTAL HEALTH, AND SEXUAL/REPRODUCTIVE HEALTH

The Day 2 abstract session, themed Vulnerable Populations, Mental Health, and Sexual/Reproductive Health, is designed to do exactly what its title promises: to shatter the long-standing quiet around stories that have been marginalised, misrepresented, or simply never told. This session recognises that silence in global scholarship is not accidental. It is produced by structural inequities in who gets funded, who gets published, and whose questions are deemed worthy of investigation. For decades, the dominant narratives about Africa have been authored from outside the continent, often reducing complex realities to single stories of disease, poverty, or conflict. This session calls on emerging researchers to actively break that silence by presenting work that centres African perspectives, African methodologies, and African solutions to African problems.

What will this abstract session bring to the conference? First, it brings visibility to locally grounded research that might otherwise remain unseen. Each presenter has three minutes to distil their study into a compelling oral abstract, and those three minutes are a powerful act of intervention into the global knowledge economy. Second, the session brings

methodological diversity. The ten abstracts on Day 2 will showcase a range of approaches, from qualitative studies that amplify community voices to implementation science that tests locally adapted interventions. Third, the session brings accountability. By providing a platform for African researchers to present their findings to an audience of peers, mentors, and potential collaborators, the session reinforces the principle that African scholarship must be judged first by African standards of rigour and relevance, not solely by the metrics of journals based elsewhere.

The session is facilitated by Mr. Stephen Ayisi-Addo, the Programme Manager of Ghana's National AIDS/STI Control Programme (NACP) at the Ghana Health Service. Mr. Ayisi-Addo is not an academic who writes about health systems from a distance; he is a public health leader who operates within them daily, managing one of Ghana's most critical disease control programmes. His research portfolio spans HIV surveillance, prevention of mother-to-child transmission, antiretroviral therapy outcomes, and the often-overlooked epidemiology of HIV, Hepatitis B, and Hepatitis C among people who use and inject drugs in Ghana. With over a decade of peer-reviewed publications and citations numbering in the hundreds, he brings a practitioner's understanding of how research translates into policy. He is particularly well-suited to facilitate a session on breaking silence because his own career has been defined by working with populations that are frequently silenced in public discourse: adolescents living with HIV, family caregivers navigating disclosure, and people who use drugs in stigmatised communities. As facilitator, Mr. Ayisi-Addo will ensure that each abstract presentation receives fair timing, that questions are handled with respect, and that the session remains a supportive space for early-career researchers to step into their authority as narrators of Africa's health story.

DAY 2 SKILLS BUILDING

## A PARADIGM SHIFT WITH STORYTELLING

21ST MAY 2026

Speaker: Musa Aminu



Facilitator: Babatunde Salako



Today's skills-building session on a paradigm shift with storytelling will be led by Dr. Musa Aminu, a neuroscientist whose work bridges the seemingly distant worlds of addiction neuroscience and community-engaged science communication. Dr. Aminu holds a doctorate in addiction neuroscience, and his research focuses on understanding how the use of cannabis affect synaptic plasticity and addiction-related behaviors by examining behavioral, transcriptional, and microRNA-related mechanisms. This work has become urgently relevant as African countries move toward legalizing cannabis, raising pressing questions about the adolescent brain and long-term public health outcomes. But what makes Dr. Aminu truly distinctive is that he does not stop at the laboratory door. As a science communication expert supporting the INFORM Africa project, he has pioneered the use of radio drama series, animations, newsletters, and storytelling to report

research outcomes to both scientific and non-scientific audiences. His co-creation model with communities has already produced two manuscripts currently underway for publication and has been instrumental in building the trust necessary for ethical, impactful research. He currently serves as chairperson of the DS I Africa consortium partnership and outreach working group and has contributed to a manuscript on engaging policymakers in health research in Africa, demonstrating that his commitment to storytelling extends from the village square to the highest levels of policy influence. Dr. Aminu embodies the principle that science does not speak for itself, that researchers must become skilled narrators if their findings are to travel from journals into the lives and decisions of the people those findings are meant to serve.

The aim of this skills-building session, titled " A Paradigm Shift with Storytelling, " is to help researchers recognise that storytelling is not a soft skill or an add-on to serious science but a fundamental tool for knowledge translation, community engagement, and research impact. Dr. Aminu will argue that a true paradigm shift requires African researchers to move beyond the traditional model where scientists produce knowledge in isolation and only later, if at all, attempt to communicate it. Instead, he will introduce participants to his co-creation model, in which storytelling is integrated from the very beginning of the research process: communities help shape the questions, radio dramas and animations become vehicles for sharing emerging findings, and researchers learn to listen as much as they speak. Participants can expect to learn practical techniques for translating complex data into narrative forms that resonate with diverse

audiences, for building trust through transparent and respectful communication, and for using storytelling not just to disseminate results but to democratise the research process itself. The session will also address how storytelling can enhance manuscript writing, helping researchers craft introductions that hook readers, methods sections that honour participant voices, and discussions that connect local findings to global conversations. For researchers across Africa working in resource-constrained settings where community trust is both fragile and essential, mastering the art of storytelling is not merely about public relations; it is about ethical practice, policy influence, and the long-term sustainability of research partnerships.

Facilitating this session is Professor Babatunde Lawal Salako, a physician, nephrologist, and one of Nigeria's most distinguished medical research leaders. Professor Salako is a Professor of Medicine at the University of Ibadan and served as the tenth Provost of the College of Medicine, University of Ibadan, before being appointed Director General of the Nigerian Institute of Medical Research, a position he held for eight transformative years from 2016 to 2024. Under his leadership, NIMR achieved remarkable advancements: he completed a state-of-the-art administrative building that had been abandoned for years, earning praise from international figures including U.S. Secretary of

State Antony Blinken, and his team conducted the genetic sequencing of Nigeria's index COVID-19 case, the first such sequencing in Africa, which earned international recognition. He established vital linkages between the Nigerian Institute of Medical Research and universities, enabling staff to attain academic promotions, including professorships, and led the institute to test over sixty thousand individuals during the pandemic while acquiring essential research equipment and building sequencing centres. A fellow of the Royal College of Physicians of Edinburgh and the Royal College of Physicians of London, Professor Salako has published over 250 papers with more than 4,500 citations and an h index of 33, and he represents Nigeria on the General Assembly of the European and Developing Country Clinical Trial Partnership. As a facilitator, he brings the perspective of an institutional leader who understands that storytelling is not merely an individual researcher's practice but a strategic imperative for research institutes seeking to communicate their value to governments, funders, and the public, making him the ideal bridge between Dr. Aminu's innovative communication strategies and the systemic changes needed to embed those strategies across African research institutions.



2026

MANUSCRIPT WRITING  
HUB ACADEMY  
**VIRTUAL CONFERENCE**

DAY THREE

## KEYNOTE ADDRESS

# THE POLITICS OF PUBLISHING – JOURNALS, ETHICS AND OPEN SCIENCE

→ 22ND MAY 2026 ←

Speaker: Greg Erhabor



Facilitator: Jeanine Condo



Today's keynote address on the politics of publishing, journals, ethics, and open science will be delivered by Professor Gregory Efosa Erhabor, a towering figure in African medicine and respiratory research whose career spans nearly four decades at Obafemi Awolowo University and its teaching hospital complex in Ile-Ife, Nigeria. Born in July 1957, Professor Erhabor is a Professor of Medicine, a Consultant Physician and Pulmonologist, and the head of the Respiratory Unit at one of Nigeria's premier teaching hospitals. His scholarly output is formidable: he has authored over 290 documents that have garnered nearly 1,800 citations, with an h-index of 19, and his work has appeared in prestigious journals including the European Respiratory Journal, CHEST, The Lancet Oncology, and the Journal of Psychosomatic Research. Yet his influence extends far beyond his own publications. Professor Erhabor is the Editor-in-Chief of the West African Journal of Medicine, the flagship medical journal for physicians and surgeons across the entire West African sub-region, a position that places him at the very centre of the continent's academic publishing ecosystem. He is also the pioneering founder of the Pan-African Thoracic Society, a former president of the Nigerian Thoracic Society, a former chairman of STOP TB Nigeria, and a long-standing member of both the American Thoracic Society and the British Thoracic Society. He has served as chief examiner and internal assessor for the Faculty of Internal Medicine of the West African College of Physicians, and he currently coordinates the College's examination programme at the Abuja centre, shaping the next generation of specialists across the region. Professor Erhabor is also a sought-after global voice: when the COP27 climate change conference urgently called for action for Africa and the world, he was among a small group of editors from leading journals who co-authored and signed the

landmark editorial demanding accountability. His research portfolio is equally impressive, spanning chronic obstructive pulmonary disease, asthma, tuberculosis, HIV co-infections, sleep apnoea, occupational lung diseases from wood smoke and biomass exposure, and even the mental health dimensions of chronic illness. He has led major multinational studies, including the Burden of Obstructive Lung Disease study across dozens of sites worldwide, and his work has shaped our understanding of everything from the relationship between asthma control and quality of life to the proteomic profiling of sweat as a diagnostic biofluid for active tuberculosis. What makes Professor Erhabor truly remarkable is not merely his longevity or productivity, but his unwavering commitment to building African publishing infrastructure from within. He has been a co-editor of the African Journal of Respiratory Medicine, which later became the Journal of the Pan-African Thoracic Society, and as Editor-in-Chief of the West African Journal of Medicine, he holds one of the most consequential gatekeeping roles on the continent.

The focus of Professor Erhabor's keynote on the politics of publishing could not be more timely or more necessary. Entitled Journals, Ethics and Open Science, his address will pull back the curtain on the hidden power structures that determine whose research gets published, who gets to peer review, and who ultimately shapes the global scientific record. Drawing on his decades of experience as a journal editor, a global collaborator, and an African scientist navigating a publishing system still heavily centred in the Global North, Professor Erhabor will argue that publishing is never neutral: it is deeply political. He will likely discuss how editorial boards are constituted, how peer review can either perpetuate or disrupt bias, and how the very

metrics that supposedly measure research quality, such as impact factors, often disadvantage African institutions and African journals. He will address the ethical minefields that plague scholarly communication: authorship disputes, predatory publishing, duplicate submission, and the exploitation of early-career researchers as unpaid reviewers. But he will also turn to the future and the promise of open science. What would it mean for African research to be truly open, not just in the sense of free access but in the sense of transparent methods, shared data, and inclusive governance? How can open science reduce the gatekeeping power of a few wealthy publishers and allow African scholars to read and be read on more equal terms? Professor Erhabor is uniquely positioned to answer these questions because he lives them: as Editor-in-Chief of the West African Journal of Medicine, he has wrestled firsthand with the challenges of maintaining ethical standards, attracting high-quality submissions, and keeping a regional journal viable in an era of mega-publishers and article processing charges. He will almost certainly call for a reimagining of the publishing ecosystem, one where African researchers are not merely consumers of knowledge produced elsewhere but are active producers, editors, reviewers, and owners of the scholarly record. And he will ground this call in the urgent realities of health research, reminding his audience that publishing decisions have life-and-death consequences. When research on tuberculosis, COPD, or climate change and health fails to be published, fails to be accessible, or fails to be trusted, it is not merely an academic failure—it is a failure of justice to the communities that need that knowledge most.

Facilitating this critical conversation is Professor

Jeane Condo, a medical doctor and public health scholar whose career exemplifies the bridge between rigorous research and high-level health system leadership. She holds a PhD in Public Health from Tulane University and serves as an Adjunct Associate Professor at the University of Rwanda and Tulane University. Her most distinguished role to date was as Director General of the Rwanda Biomedical Centre, the implementing institution of Rwanda's Ministry of Health, where she oversaw fourteen divisions, including the National Reference Laboratory, procurement and distribution of drugs and medical supplies for all public health facilities, and divisions covering communicable diseases such as HIV, TB, and malaria, as well as non-communicable diseases. Before that, she served as Deputy Dean of Research, Dean of the School of Public Health, and ultimately Principal of the College of Medicine and Health Sciences at the

University of Rwanda. She has served on the Technical Evaluation Review Group at the Global Fund, the Evaluation Advisory Committee at GAVI, and the International Advisory Group for Primary Health Care at the World Health Organization, and is a member of both the African Academy of Sciences and the Rwanda Academy of Science. With over fifty peer-reviewed publications to her name, Professor Condo brings to the facilitation role a practitioner's understanding of how publishing shapes policy, how ethics must be lived, not just declared, and how open science can be harnessed to strengthen health systems across Africa.

Facilitator: Munya Saruchera



DAY 3

THEME 3

ABSTRACTS

## AGRICULTURE, FOOD SYSTEMS, NUTRITION, AND BIOMEDICAL INNOVATION

Day Three of the 2026 Manuscript Writing Hub Academy Virtual Conference introduces a theme on Agriculture, Food Systems, Nutrition, and Biomedical Innovation. This abstract session is about understanding the complex, often intimidating terrain that lies between a completed manuscript and its transformation into published, citable, impactful knowledge. The publishing ecosystem is vast and uneven, shaped by factors that range from journal hierarchies and article processing charges to peer review politics and the growing demands of open science. For African researchers, navigating this space requires more than writing skills; it demands strategic intelligence about where to submit, how to respond to reviewers, when to push back and when to concede, and how to build a publication record that advances both personal careers and continental knowledge production.

This abstract session brings several distinct contributions to the broader conference. First, it bridges the gap between the political critique offered by speakers like Seye Abimbola on

epistemic justice and Gregory Erhabor on the politics of publishing and the practical, hands-on guidance provided by skill builders like Matthew Oluwaniyi on digital tools. By hearing from emerging researchers who have actually navigated these challenges, participants gain access to real-world case studies, cautionary tales, and replicable successes. Second, the session transforms the conference from a one-way transmission of expert knowledge into a genuine dialogue, where junior scholars are positioned not as passive recipients but as active contributors to the collective wisdom of the community. Third, by focusing specifically on the ecosystem of publishing, this session equips participants with the strategic literacy they need to make informed decisions about their own publication trajectories, from selecting target journals to building productive relationships with editors and reviewers. The ultimate value of this session lies in its potential to demystify what too often feels like a closed system, revealing the rules, the gatekeepers, and the leverage points that African researchers can use to claim their rightful place in global scholarly conversations.

Facilitating this session is Dr. Munya Saruchera, a scholar and practitioner whose career embodies the very navigation this theme explores. Dr. Saruchera is the Director of the Africa Centre for Inclusive Health Management at Stellenbosch University, where he also serves as a senior lecturer supervising numerous master's and PhD students across a range of health-related topics. His deep engagement with the publishing ecosystem is most vividly demonstrated through his role as a member of the editorial board of the African Journal for AIDS and Infectious Diseases (AJAID), a newly launched pan-African journal created to address the gap in locally relevant research publishing. He has also

been instrumental in conceptualising an abstract writing mentorship programme designed to encourage young and emerging researchers to submit their work, directly aligning with the capacity-building mission of this conference. His research portfolio is equally rich, spanning corruption and health, youth engagement in governance, agricultural policy, and HIV/AIDS management, with recent publications examining tax and corruption in South Africa and youth participation in anti-corruption efforts in Zimbabwe. This combination of editorial leadership,

mentorship commitment, and scholarly productivity makes As he has said, "For a long time, Africa's stories have been told by other people. Here is an opportunity for us to tell it on our own terms, in our own ways". Under his facilitation, this abstract session promises to be not just informative but genuinely transformative.

DAY 3 SKILLS BUILDING

## LEVERAGING DIGITAL TOOLS TO SUPPORT MANUSCRIPT WRITING

22ND MAY 2026

Speaker: Matthew Oluwaniyi



Facilitator: Tayo Owoeye



Today's skills-building session on leveraging digital tools to support manuscript writing will be delivered by Matthew Oluwaniyi, a researcher and writer who has built a reputation at the intersection of academic scholarship and digital innovation. Oluwaniyi is known for his ability to demystify the technical aspects of research writing, helping scholars move from blank pages to polished manuscripts by using the right software and digital workflows. His approach combines practical knowledge of reference managers, grammar checkers, plagiarism detectors, and collaboration platforms with a deep understanding of the psychological barriers that often keep researchers stuck. What makes Oluwaniyi particularly effective is his recognition that digital tools are not magic solutions; they are only as powerful as the writer's strategy for using them. He consistently emphasises that tools like citation managers and outline builders must serve the writer's argument, not the

other way around. His engaging, no-nonsense delivery style has made him a sought-after facilitator for academic writing workshops, and his ability to translate complex digital concepts into clear, actionable steps ensures that participants leave with immediately usable skills. Oluwaniyi's work speaks directly to the researcher who knows what they want to say but struggles with the how of getting it onto the page professionally and efficiently.

This skills-building session aims to equip early-career researchers with a curated toolkit of digital resources that streamline the manuscript writing process from first draft to final submission. Oluwaniyi will guide participants through the landscape of available tools, distinguishing between those that genuinely save time and those that create more work than they solve. The session will cover practical demonstrations of reference management software for organising citations, collaborative writing platforms for co-authoring across distances, grammar and style checkers for polishing prose, and outlining tools for structuring arguments logically. Beyond mere demonstration, Oluwaniyi will address common pitfalls, such as over-relying on automated tools at the expense of critical thinking, and will offer strategies for integrating digital tools into a sustainable writing routine. For researchers across Africa who often work in bandwidth-limited environments or without institutional access to expensive software, the session will also highlight free and low-cost alternatives that level the playing field. Ultimately, the goal is to enable participants to write faster, revise more effectively, and submit manuscripts with greater confidence, transforming digital tools from intimidating novelties into everyday allies in the research journey.

Facilitating this session is Dr. Tayo Owoeye, a researcher and academic whose work bridges clinical practice and scholarly communication. Dr. Owoeye brings a facilitator's sensitivity to the session, ensuring that the conversation remains interactive, that participant questions are surfaced and addressed, and that the practical demonstrations of tools translate into genuine skill building rather than passive observation. With a background that values clarity, structure, and researcher development, Dr. Owoeye is well positioned to guide the audience through what might otherwise be an overwhelming array of digital options. As facilitator, they will keep the session

focused on actionable outcomes, manage the pacing of demonstrations, and create space for participants to share their own experiences with digital tools. Dr. Owoeye's presence ensures that Oluwaniyi's expertise lands effectively, making the session not just informative but truly transformational for how attendees approach their next manuscript.



# ABSTRACT

**Abstract 26001****Knowledge, Attitude, and Practice of Vital Signs Assessment Among Medical Students in Nigeria**

Mr. Amir Yahaya<sup>1,2</sup>, Dr. Anas Ibrahim Muhammad<sup>1,2</sup>, Dr. Noah Olumide<sup>1,3</sup>, Miss Okwukweamaka Okoli<sup>1,4</sup>, Mr. Uchechukwu Favour Chidera<sup>1,4</sup>, Dr. Iyoha Ehi-Iyoha<sup>1,5</sup>, Dr. Harry Okwilagwe<sup>1,5</sup>, Miss Uzoma Kaosisochukwu Chinaelo<sup>1,6</sup>, Dr. Alabi Badrudeen Olalekan<sup>1,7</sup>, Dr. Okafor Stanley Chukwudi<sup>1,8</sup>, Mr. David Adeyinka<sup>1,9</sup>, Mr. Orakwe Kenechukwu Uchenna<sup>1,9</sup>

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**Background**

Vital signs assessment (VSA) is critical for the early detection of patient deterioration, but there is limited evidence on medical students' ability to conduct VSA. This study evaluated knowledge, attitudes, and practices (KAP) regarding VSA among clinical medical students in Nigeria.

**Methods**

A cross-sectional pilot survey was conducted between September and October 2025 among clinical-year students recruited through convenience sampling from accredited medical schools across all six geopolitical zones of Nigeria. Data were collected using an online questionnaire. Knowledge was tested with four multiple-choice questions (maximum score 4; good knowledge defined as  $\geq 3$  correct). Attitude and practice were each assessed with four 4-point Likert items (maximum score 16; good attitude and good practice were defined as  $\geq 10$  each). Associations between knowledge, attitude, and practice were examined with Pearson's chi-square test. Ethical approval was obtained from the Ambrose Alli University Health Research Ethics Committee (REF: 189/25).

**Results**

The mean age of the 400 study participants was  $23.33 \pm 2.55$  years, with 57.5% being male. Overall, 37.0% demonstrated good knowledge (mean score  $2.04 \pm 1.12$  out of 4), 57.5% showed good attitude (mean  $9.97 \pm 2.91$  out of 16), and only 17.0% had good practice (mean  $6.88 \pm 2.84$  out of 16). Attitude correlated positively with practice ( $r=0.439$ ,  $p<0.001$ ), whereas knowledge did not correlate with practice ( $r=-0.060$ ,  $p=0.231$ ).

## Conclusion

The findings highlight a gap between knowledge and practice of VAS among medical students in Nigeria. Bridging this gap may require structured competency-based training, integration of mandatory observed skill assessments, simulation-based learning, and the use of standardized checklists during clinical rotations, alongside improved supervision.

## Abstract 26002

### Determinants of Health-Related Quality of Life Among People Living with HIV in Rwanda: A Cross-Sectional Study

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#### Background

For people living with HIV (PLHIV), understanding which aspects of health are associated with overall well-being is essential for improving care. This study assessed the association of physical and mental health domains with quality of life among PLHIV in Rwanda.

#### Methods

We conducted a cross-sectional study in May 2022 and recruited adults aged 18 years and older who were receiving antiretroviral treatment at 12 health facilities in Rwanda. Participants completed the Medical Outcomes Study HIV Health Survey (MOS-HIV), which assessed physical (PHS) and mental health (MHS) on scales ranging from 0 to 100. Participants rated their overall quality of life using a five-point scale, which was categorized as good (score  $\geq 3$ ) or poor (score  $< 3$ ). Missing values were imputed using median values for the respective variables. Variance inflation factors (VIF) were calculated to assess multicollinearity between PHS and MHS. Logistic regression models were used to examine associations between each health domain and quality-of-life outcomes. Odds ratios were expressed per 10-point increase for easier interpretation. Ethical approval was obtained from the Rwanda National Ethics Committee, and written informed consent was obtained from all participants.

#### Results

The median age of the 1,208 participants enrolled was 43 years, and 85% reported a good quality of life. Physical health scores ranged from 41 to 75, with a median of 65.5, while mental health scores

ranged from 25 to 95, with a median of 67. No multicollinearity was detected between PHS and MHS (VIF=1.10). PHS was not significantly associated with quality-of-life outcomes (OR=1.017 per point; per 10-point increase: OR=1.19, 95% CI: 0.95-1.48). In contrast, higher MHS were significantly associated with lower odds of poor quality of life; a 10-point increase in MHS was associated with a 23% reduction in the odds of poor quality of life (OR=0.77, 95% CI: 0.72-0.83,  $p<0.001$ ). Ten participants with low physical health scores (0.8%) or low mental health scores (1.3%) reported poor quality of life.

## Conclusions

The lack of association with physical health may reflect limited variability in physical health scores among participants. These findings highlight the importance of integrating mental health support into HIV care programs to improve perceived quality of life among PLHIV. Further studies using alternative measurement approaches are recommended to better understand the relationship between physical health and quality of life in this population.

## Abstract 26003

### Factors influencing willingness to Implement Newborn Screening for SCD among Nurses and Midwives in selected Hospitals in Oyo, Oyo State

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## Background

Early detection and intervention are crucial in managing Sickle cell disease (SCD) to improve health outcomes for affected individuals. This study examines the attitude and factors that may affect nurses and midwives' willingness to implement newborn screening for SCD in selected hospitals in Oyo, Oyo State.

## Methods

This was a cross-sectional research design conducted among nurses and midwives working at two purposively selected health facilities in Oyo, Oyo State. The sample size was determined using the Taro Yamane formula for a known population, followed by proportional allocation. Data were collected using a structured self-administered questionnaire. A descriptive analysis was

conducted. Ethical approval to conduct the study was obtained from the Oyo State Ministry of Health.

### **Results**

There were 95 respondents. Most of the nurses and midwives (70.5%) had a positive attitude towards implementing newborn screening. However, more than 50% of the participants identified time constraint (63.2%), lack of adequate resources (68.4%), lack of training (64.2%), and workload pressure (68.5%) as major factors that may affect their willingness to implement screening.

### **Conclusion**

Nurses in Oyo State seem willing to implement newborn screening for SCD, but multiple factors limit their ability to implement. Individual and institutional competencies need to be built to facilitate SCD screening in a community like Oyo State, where the risk of the disease is high.

### **Abstract 26004**

#### **Learning Styles, Preferred Teaching Methods, And Academic Performance Among Physiotherapy Students in a Nigerian University.**

Jessica Dalhatu, Oluwatoba Adeyinka, Timothy Adeyemi

Department of Physiotherapy, College of Health Sciences, Bowen University, Iwo, Nigeria.

### **Background**

Empirically validated data on the learning style profiles of physiotherapy students in Nigeria are not publicly available. This study investigated the predominant learning modalities and preferred teaching approaches among undergraduate physiotherapy students at a private university in Nigeria.

### **Methods:**

A cross-sectional survey was conducted among undergraduate physiotherapy students. All students were eligible to participate. Three validated instruments were administered: (1) the Learning Channel Preference Checklist; (2) the Preferred Teaching Methods and Instructional Activities Scale; and (3) a five-point Likert-based perceived academic performance (PAP). Unimodality was defined by the dominant sensory channel, identified as the highest score achieved out of the maximum 30 points per channel. Spearman's Rank correlation was conducted to

determine associations between learning style scores and PAP. Ethical clearance was obtained from the BUTH Research Ethics Committee (BUTH/REC-1126).

### Results

Visual learning was identified by 61 (46.6%) participants, kinaesthetic by 34 (25.9%), and auditory by 14 (10.6%). The remaining 16.9% exhibited multimodal profiles. Also, 83.2% of students classified as unimodal learners indicated a single, clearly dominant sensory channel. A statistically significant positive association between visual learning scores and PAP ( $\rho = 0.314$ ,  $p < 0.001$ ). The associations between auditory ( $r = 0.116$ ,  $p = 0.188$ ), kinaesthetic ( $r = 0.136$ ,  $p = 0.121$ ), and PAP scores were non-significant. Visual learning scores were also positively associated with preference for detailed, reading-based instructional activities ( $r = 0.278$ ,  $p = 0.001$ ).

### Conclusion

In this sample of undergraduate Nigerian physiotherapy students, Visual learning was the dominant modality associated with PAP, suggesting that curricula emphasising visual instructional strategies may support improved educational outcomes. Future multi-site studies incorporating objective academic performance data and longitudinal or interventional designs are recommended to establish broader generalisability and support continent-wide health science education policy reform.

### Abstract 26005

#### Evaluation of Sexually Transmitted Infections Surveillance System in Gakenke District, Rwanda

Cyprien Niyonsenga<sup>1</sup>, Amanuel Kidane<sup>1</sup>, Walter Nsengiyumva<sup>2</sup>

<sup>1</sup>University of Rwanda, Kigali, Rwanda, <sup>2</sup>Ruli District Hospital, Gakenke District, Rwanda

### Background

Sexually transmitted infections (STIs) remain a major global public health problem, with over one million new curable infections occurring daily, yet the district-level surveillance systems in Rwanda remain largely unevaluated. This study assessed the structure, core functions, and performance attributes of the surveillance system in Gakenke District to identify operational strengths and gaps and generate evidence for targeted system improvement.

### Methods

This was a cross-sectional study that collected data from eight (three district hospitals and 15 health centers) health facilities in Gakenke District, guided by CDC guidelines for evaluating Public Health Surveillance Systems. Data reported for the year 2024 were extracted from HMIS and facility registers. Primary data were collected through structured interviews conducted with healthcare professionals. Attributes were scored using a four-category scale: Poor <40%; Average 41–60%; Good 61–80%; Very Good 81–100%, and core functions were assessed based on the WHO-recommended performance threshold  $\geq 80\%$ . Ethical approval was granted by the University of Rwanda CMHS Institutional Review Board (Ref: CMHS/IRB/760/2025) and the Gakenke District authorized data collection process (Ref: 1369/07.04.02/DHU/JMH).

## Results

There were 3,433 STI cases recorded in 2024. Of the 94 health care providers interviewed, 71 (81%) rated acceptability as very good, 88 (94%) were willing to continue using the system, 71 (81%) reported timeliness, and 83 (88%) reported completeness. However, the usefulness of the system was rated poor by 44 (47%) respondents, with 39 (41%) reporting routine use of STI data for decision making. System stability was rated poor by 38 (40%) respondents due to frequent stockouts of the reporting forms and commodities. Laboratory confirmation was obtained in 653 (19%) reported cases. Only 4 (20%) of the facilities receive quarterly feedback, and 6% of the facilities have a trained data manager.

## Conclusion

The STI surveillance system in Gakenke District is functional and operationally compliant yet remains reporting-oriented rather than data-driven. The most urgent priorities are strengthening feedback mechanisms, building trained data management capacity at the facility level, and piloting sentinel laboratory confirmation to improve surveillance accuracy and support evidence-based STI control.

## Abstract 26006

### Gender, STIs, and HIV among young people in Couffo, Benin: equal knowledge, unequal protection

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## **Background**

In Benin, the HIV epidemic is concentrated among adolescents and young people, but little is known about their knowledge of STI/HIV risks, protective practices, and sexual negotiation capacity. Our research question is therefore: to what extent do knowledge of STI/HIV risks, protective practices (HIV testing and condom use), and sexual negotiation capacity differ between young women and young men aged 18 to 24?

## **Methods**

A cross-sectional study was conducted among adolescents and young people aged 18 to 24 years in the six communes of the Couffo department in Benin (Aplahoué, Djakotomey, Dogbo, Klouékanmè, Lalo, and Toviklin). A multistage probabilistic sampling was conducted. Data were collected between March and April 2026 using a structured interviewer-administered questionnaire as part of the baseline assessment of the Miitchité Project. Data was collected across three dimensions: knowledge (STI/HIV prevention), protective practices (HIV testing and current condom use), and sexual negotiation capacity (recognition of the right to demand condom use). Differences in the gender scores were determined. Ethics approval was obtained from the Departmental Health and Educational Directorates of Couffo.

## **Results**

The sample includes 851 young people (563 women and 288 men), representing 33.8%. There was no gender difference in the knowledge of STI/HIV prevention; fewer women had undertaken an HIV test in the last twelve months ( $p < 0.001$ ), and more males than females used the male condom ( $p < 0.001$ ). In addition, more men than women believe they can refuse sexual intercourse without negative consequences ( $p = 0.021$ ).

## **Conclusion**

The study findings reflect a deficit in female agency rather than an information deficit. Intervention studies to reduce the risk of HIV and STIs among adolescents need to address the practices and negotiation capacity of women rather than develop similar training curricula for both genders.

**Abstract 26007****The Effect of No Means No Worldwide on Sexual-Based Violence Knowledge Among Adolescents in Benue State, Nigeria**

Tochukwu Ezekwe<sup>1</sup>, Anita Ejideh,<sup>2</sup> Samuel Oyibo<sup>1</sup>, Cletus Shiche<sup>1</sup>, Juwon Ibiloye<sup>1</sup>, Evans Ejimkaraonye<sup>1</sup>, Enebi Achimugu<sup>1</sup>, Kelechi Ngwoke<sup>1</sup>, Mikhail Obaje<sup>1</sup>, Uche Okezie<sup>1</sup>, Ifeyinwa Onwuatuelo<sup>1</sup>, Prosper Okonkwo<sup>1</sup>

<sup>1</sup>APIN Public Health Initiatives, Nigeria; <sup>2</sup>Benue State University Teaching Hospital

**Background**

The No Means No Worldwide (NMNW) program is a dual-gender intervention designed to prevent sex-based violence by educating adolescents aged 9–14. This study assesses the effect of NMNW intervention on knowledge of sex-based violence among boys and girls aged 9–14 years.

**Methods**

This was a quasi-experimental study conducted between October 2023 and September 2024 in Benue State, Nigeria. Adolescents were randomly selected to participate in the pre- and post-intervention assessments after providing informed consent and completing either of two interventions with an exposure for 10 hours: 5 days for five 2-hour sessions and 10 days for ten 1-hour sessions. A pre- and post-study design was used to assess participants' knowledge of sex-based violence. Data was collected using a validated, culturally adapted curriculum for the program. ANOVA and F-statistics were applied to compare pre- and post-intervention knowledge scores. Ethical approval was obtained from the APIN institutional review board. Informed consent was obtained from parents and assent from participating adolescents.

**Results**

A total of 5,314 adolescents (2,526 boys, 2,788 girls) were assessed. The number of participants with improved knowledge of SBV increased from 455 (18%) at baseline to 2,172 (86%) post-intervention for boys ( $p < 0.01$ ), and from 585 (21%) to 2,565 (92%) for girls ( $p = 0.0154$ ). The F-statistics for boys (19,312.6) and girls (19,812.6) were well above critical values.

**Conclusion**

The intervention improved the knowledge of sex-based violence among adolescents in Benue State. Future studies are needed to examine knowledge retention and behavior change resulting from the program intervention.

**Abstract 26008****The Burden of Poor Mental Health and Structural Barriers to Care Among Gender and Sexual Minorities in Bulawayo, Zimbabwe**

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**Background**

Gender and sexual minority (GSM) populations in sub-Saharan Africa face a disproportionate burden of HIV and mental health problems, but population-level data on the prevalence of depression, anxiety, and stress-related disorders among GSM populations in Zimbabwe remain sparse. This study aimed to describe the proportion of GSM with depression, anxiety, and stress, and to identify structural barriers to care.

**Methods**

This was a cross-sectional survey conducted between December 2024 and May 2025 among GSM participants recruited in Bulawayo through community-based sampling techniques. Mental health status was assessed using survey questionnaires asking participants to self-report the experience of poor mental health and specific conditions (depression, anxiety, stress, eating disorders, and self-harm). The questionnaire also collected data on cannabis use, educational status, HIV testing, health-seeking behaviour, and service denial. Three binary logistic regression models were fitted to identify predictors of: (i) recent HIV testing (defined as testing within the past 12 months versus more than 12 months prior or never tested); (ii) fear of healthcare seeking (self-reported fear of seeking care from health services); and (iii) service denial (self-reported denial of healthcare services). Ethical approval was obtained from the National University of Science and Technology's institutional review board.

**Results**

There were 247 participants with a mean age of 29.3 years (SD = 6.6). Participants were predominantly bisexual (44.9%), transgender women (19.4%), gay men (14.2%), and lesbians (10.5%). Overall, 194 (78.5%) reported poor mental health: depression (80.4%), stress (41.8%), and anxiety (32.0%), and 24.7% of those affected had accessed mental health services. Also, 37.6% feared seeking care. In logistic regression analyses, cannabis use was the only significant predictor of lack of recent HIV testing (OR = 0.49, 95% CI: 0.27–0.90) and was strongly associated with fear of healthcare seeking (OR = 5.52, 95% CI: 2.48–12.29). Higher educational attainment was associated

with increased odds of reporting service denial (OR = 1.94, 95% CI: 1.39–2.72).

## Conclusions

GSM people in Zimbabwe experience a high burden of mental health disorders and receive inadequate care. Integrating responsive mental healthcare services within HIV service platforms is a critical strategy.

## Abstract 26009

### **Sleep, Academic Workload, and Extracurricular Activities among Students at a College of Health Sciences in a Private University in Nigeria**

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## Background

Students in health sciences programmes frequently sacrifice sleep to manage academic demands, yet little is known about how their academic workload and extracurricular activities affect their sleep quality. This study aimed to assess the association between sleep quality, academic workload, and extracurricular activities among clinical students at a private university in Osun State, Nigeria.

## Methods

This cross-sectional study recruited a convenience sample of clinical students in years 3–7 between June and August 2024. Data were collected using the Pittsburgh Sleep Quality Index (PSQI), and two researchers developed questionnaires assessing academic workload (study hours, credit load, clinical and practical hours) and extracurricular activities (hours spent on extracurricular activities). Pearson correlation analyses were performed to examine associations between variables. Ethical approval was obtained from the Bowen University Teaching Hospital Health Research and Ethics Committee (BUTH/REC-2141).

## Results

Of the 260 respondents, 170 (65%) were female with a mean age of 21.77 years (range: 18–28), predominantly at the 500 level (60%). Students reported a mean study time of 14.42 hours per week, and 38.8% reported difficulty falling asleep. A significant negative association was found

between study hours per week and sleep quality ( $r = -0.907$ ,  $p=0.012$ ). A significant negative association was also detected between extracurricular activity involvement and sleep quality ( $r = -0.860$ ,  $p=0.0014$ ).

## Conclusion

Despite the study's limitations, the findings highlight associations that need further investigation through longitudinal or interventional study designs. In the meantime, institutional efforts to monitor student sleep health and explore the role of both academic scheduling and extracurricular engagement in contributing to sleep difficulties among health sciences students would be a valuable step forward.

## Abstract 26010

### Association of pain with physical activity and health-related quality of life among patients with knee osteoarthritis in Oyo state.

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## Background

While Knee osteoarthritis (OA) is known to affect function and psychosocial well-being, few studies in Nigeria have examined how pain intensity relates simultaneously to physical activity and health-related quality of life (HRQoL) among populations who visit the clinic. The study aimed to determine the associations between pain, physical activity, BMI, and HRQoL dimensions at a 0.05 significance level.

## Methods

This was a cross-sectional hospital-based study that included patients clinically diagnosed with OA attending the physiotherapy outpatient departments of a tertiary health institution in Oyo State, Nigeria. Participants were adults aged 40 years and above with a radiographic or clinical diagnosis of knee OA. Excluded were patients with psychiatric illness, lower-limb amputation, or previous knee arthroplasty. Data were collected between March and June 2024 using a structured questionnaire incorporating the Numerical Pain Rating Scale (NPRS) for pain intensity, the International Physical Activity Questionnaire- Short Form (IPAQ-SF) for activity level, and the EQ-5D-5L for HRQoL. Anthropometric data (height, weight, BMI) were obtained using standard

procedures. Chi-square test was used to determine the associations between pain, physical activity, BMI, and HRQoL dimensions. Ethical approval was obtained from the BUTH Research Ethics Committee.

## Results

The mean age of the 79 patients recruited was  $57.96 \pm 9.95$  years. Most participants (74.7%) reported moderate pain intensity, and 63.3% demonstrated low physical activity levels. The EQ-VAS mean score was  $58.0 \pm 13.8$ . Over 80% reported problems with pain/discomfort and mobility, while 62% had no difficulties with self-care. No significant association was found between pain intensity and physical activity level ( $p=0.068$ ) or between BMI and overall physical activity ( $p = 0.056$ ). Significant associations were found between pain intensity and all HRQoL dimensions: mobility ( $p = 0.012$ ), self-care ( $p=0.043$ ), usual activities ( $p = 0.019$ ), pain/discomfort ( $p = 0.009$ ), and anxiety/depression ( $p=0.001$ ). Additionally, BMI was significantly related to the self-care dimension ( $p=0.014$ ).

## Conclusion

Although pain may not fully deter physical engagement, it affects patients' perceived well-being, functional independence, and emotional health. Future studies using larger, randomly selected samples and multivariate analyses are needed to explore causal pathways and interactions between pain, physical activity, and HRQoL among Nigerian populations.

## Abstract 26011

### Digital Entrepreneurship and Food Security: Reconfiguring Rural-Urban Value Chains in Morocco

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## Background

The structural disconnect between rural production zones and urban consumption centers in the Moroccan agricultural sector is amplified by a multi-layered intermediary system that reduces smallholder profit margins while inflating food prices. This study examines how digital entrepreneurial initiatives reconfigure rural-urban agricultural value chains in Morocco.

## Methods

A qualitative comparative case study design was employed across two contrasting Moroccan regions: Fez-Meknès, an agricultural zone with relative market proximity, and Drâa-Tafilet, a geographically remote oasis-based region. Semi-structured interviews and focus group discussions were used to elicit data on: (i) participants' experiences with digital tools in agricultural trade; (ii) the conditions enabling or inhibiting technology adoption, including cost, connectivity, and social norms; (iii) changes in intermediary relationships and pricing dynamics; and (iv) transitions in cooperative market engagement and distribution practices. Inductive thematic analysis was conducted.

## Results

Interviews were conducted with 14 rural entrepreneurs and 5 logistics stakeholders. In addition, 6 focus groups were also conducted. Three themes emerged: Digital disintermediation and market access enhanced price transparency and cost reduction, and information asymmetry was reduced. Second, social embeddedness as adoption infrastructure, where initiatives integrated into existing kinship demonstrated higher transactional reliability than external platforms; and peer endorsement within cooperatives legitimized entrepreneurs' digital roles. Third, regional logistical constraints and adaptive responses captured divergent regional dynamics such as last-mile distribution efficiencies that reduced average time-to-market (Fez-Meknès), and remote price discovery and order aggregation partially offset geographic isolation, though persistent connectivity deficits and road infrastructure gaps constrained scalability (Drâa-Tafilet). Across both regions, participants articulated a shift in self-identification from subsistence farmer to active market agent.

## Conclusions

Digital entrepreneurship can improve value chain efficiency, reduce intermediary dependency, and strengthen smallholder market participation in rural Morocco, contingent on social embeddedness and adequate infrastructural conditions. Future research could employ longitudinal mixed-methods designs to quantify household-level food security impacts and assess the durability of digital adoption across different rural settings.

## Abstract 26012

**Food Insecurity, Dietary Diversity, and Nutritional Status of Children in Beneficiary and Non-beneficiary Communities of the GROWING Project**

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## Background

Nutrition-sensitive agricultural interventions offer potential solutions to address the underlying determinants of malnutrition. This study assessed the impact of an agricultural intervention project on improving household food security, dietary diversity, and child nutritional outcomes among children under five years in beneficiary and non-beneficiary communities in the Northern Region of Ghana.

## Methods

A cross-sectional study was conducted between July and October 2025. A multi-stage sampling technique was used to identify mothers with children under five from households across 17 communities (beneficiary and non-beneficiary of the GROWING project) in two districts (Gushegu and Saboba). A structured questionnaire was used to gather data on household food insecurity, dietary diversity, nutrition-related knowledge and attitude, and under-5 children's nutritional status. Non-beneficiary communities were randomly selected from the same districts. The intervention was the exposure variable with outcomes including food insecurity, dietary diversity, minimum acceptable diet, and child nutritional status. Potential confounders were household size, wealth index, parental education, maternal age, and maternal nutrition knowledge. Multivariable logistic regression was used to determine the independent association of the intervention on the food insecurity, dietary diversity, and nutritional status of children, adjusting for potential confounders.

## Results

The sample included 658 mothers (329 beneficiaries and 329 non-beneficiaries). Participation in the project lowered the odds of food insecurity [AOR=0.29, 95% CI (0.16-0.52),  $p<0.001$ ], stunting [AOR=0.44, 95% CI (0.28-0.68),  $p<0.001$ ], underweight [AOR=0.49, 95% CI (0.29-0.84),  $p=0.009$ ], and wasting [AOR=0.48, 95% CI (0.25-0.92),  $p=0.029$ ]. Beneficiary households had higher odds of meeting dietary diversity among older children (24-59 months) [AOR=5.85, 95% CI (3.12-10.96),

$p < 0.001$ ], and mothers/caregivers [AOR=1.79, 95% CI (1.15–2.78),  $p = 0.009$ ] assessed using a 24-hour dietary. However, no significant association was found in the minimum acceptable diet of younger children (6–23 months) [24.4% beneficiaries vs 19.8% non-beneficiaries; AOR=1.94, 95% CI (0.72–5.21),  $p = 0.188$ ].

## Conclusion

The GROWING project is associated with reduced food insecurity, improved dietary diversity among children as well as mothers/caregivers, and reduced malnutrition among children under five. However, it showed no significant association with the minimum acceptable diet of younger children (6–23 months). The findings highlight the need to scale up and institutionalize nutrition-sensitive agriculture interventions, such as the GROWING project, within the national policy framework to improve food security, dietary diversity, and child nutritional outcomes.

## Abstract 26013

### Synthesis of a New Thienopyridine Derivative (BCT) and its Insilico Activity against Ischaemic Stroke

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## Background

Studies have demonstrated that Methyl (S)-2-(2-chlorophenyl)-2-(6,7-dihydrothieno[3,2-c]pyridin-5(4H)-yl)acetate (clopidogrel), when coupled with 2-acetoxybenzoic acid (aspirin), works better for the treatment of ischaemic stroke, but leads to an increase in the side effects of the anti-thrombotic drug. This study aimed to synthesize a new thienopyridine derivative (R)-2-(2-bromophenyl)-1-(5-chlorothiophen-2-yl)-2-(ethyl(thiophen-2-ylmethyl)amino)ethan-1-one (BCT) and determine its insilico activity against ischaemic stroke.

## Methods

BCT was synthesized by the reaction of 2-bromo-2-(2-bromophenyl) acetonitrile with 4,5,6,7-tetrahydrothieno[2,3-c]pyridine, which produced a suitable intermediate that underwent further alkylation and condensation reactions. The compound was obtained as a pale green liquid and was fully characterized by <sup>1</sup>H NMR, <sup>13</sup>C NMR and IR spectroscopy with diagnostic signals. The ADME-

Tox properties and insilico activity of BCT were carried out on Maestro Schrodinger Suite 2023-1 using clopidogrel as a reference compound. The compounds were prepared using Ligprep with OPLS4 with ionization states at pH  $7.0 \pm 2.0$ . 4PXZ was prepared using the protein preparation wizard. Site mapping was performed to precisely map protein-interacting binding sites, and a receptor glide grid was generated for the molecular docking of the receptor with the compounds. The molecular docking of the compounds was performed with the P2Y<sub>12</sub> receptor PDB ID: 4PXZ (a receptor that causes platelet aggregation in ischaemic stroke) to evaluate binding interactions relative to clopidogrel.

## Results

BCT has a higher binding energy (-39.105 kcal/mol) and a docking score of -3.351 kcal/mol when compared with clopidogrel, which has a binding energy of -26.174 kcal/mol and a docking score of -2.875 kcal/mol. Clopidogrel displayed hydrogen bonds with ARG<sub>231</sub> and LYS<sub>237</sub>, while BCT displayed a halogen bond with LYS<sub>237</sub>, which improves BCT affinities without disrupting other structurally important interactions. BCT also displayed pi-cation interaction with ARG<sub>231</sub> and LYS<sub>125</sub> in both of its thiophene rings, while clopidogrel displayed pi-cation interaction with only LYS<sub>125</sub>. Both compounds have a molecular weight less than 500, obey the Lipinski rule of five in relation to hydrogen bond donor, hydrogen bond acceptor, and QPlogP /w. It also predicted that the compounds have 100% human oral absorption, and the polar surface area of both compounds is relatively lower and has a close range of values (BCT: 36.321 Å<sup>2</sup>, Clopidogrel: 35.056 Å<sup>2</sup>).

## Conclusion

BCT exhibited drug-like characteristics expected of an oral drug, making it a potential drug candidate. The molecular docking results of BCT showed it has a stronger affinity for the binding site of the P2Y<sub>12</sub> receptor, as it stabilizes the protein and allows an interface for the delivery of the drug.

## Abstract 26014

### Genetic and Physiological Characterization of *Neurospora crassa* Strain IYN 65: Growth, Carbon Metabolism, and Mating Type

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## Background

*Neurospora crassa* is a model filamentous fungus widely used in genetics and physiology. This study aimed to compare the growth characteristics, carbon utilization, and mating type of a newly isolated Nigerian strain (IYN 65) with those of a standard laboratory strain (CECT 2728). Strain IYN 65 was isolated from soil in Atan, Ijebu-Ode, Ogun State, Nigeria, while CECT 2728 represents the Lawrence 74-OR8-1a strain from California, USA.

## Methods

Both strains were cultured on Potato Dextrose Agar (PDA) and Vogel's minimal medium (V2G) containing 2% glucose and 2% agar. Growth rates were measured using race tubes, and mycelial biomass was assessed on five carbon sources (glucose, fructose, sucrose, maltose, and dextrose) under controlled conditions (28 °C, 7 days, liquid medium). Mating type was determined through genetic crosses with reference strains of known mating types. Ethical clearance was not required for this study, as it involved non-pathogenic environmental fungal isolates.

## Results

Strain IYN 65 demonstrated superior growth compared to CECT 2728, with average radial extension of  $7.95 \pm 0.48$  cm on PDA and  $7.96 \pm 0.43$  cm on V2G, versus  $6.68 \pm 0.13$  cm and  $6.80 \pm 0.50$  cm, respectively, for CECT 2728. Biomass production was higher in IYN 65 across all sugars tested, with maximum yield on glucose (6.71 g wet weight). Both strains showed stronger growth on monosaccharides than on disaccharides, supported by comparative biomass values. Clarification of sugar preparations confirmed that glucose and dextrose were equivalent, and the observed difference likely reflects experimental variation. Mating type analysis revealed that IYN 65 crossed successfully with CECT 2728 (Mat a) to produce viable black ascospores but failed with CECT 2729 (Mat A), confirming IYN 65 as Mat A. Replicate crosses consistently supported this finding.

## Conclusion

IYN 65 exhibits enhanced growth fitness under laboratory conditions, particularly in carbon utilization, compared to the established laboratory strain. The ability of wild isolates to metabolize diverse carbon sources suggests adaptive advantages shaped by local environmental pressures.

