

**NIGERIAN INSTITUTE OF
MEDICAL RESEARCH
(NIMR) FOUNDATION**



Four-Year Impact Report 2021-2025

Demonstrating Results, Accountability, and
National Impact



@NIMR Foundation

FOREWORD

FROM VISION TO MOMENTUM: THE NIMR FOUNDATION STORY

In the years following the COVID-19 pandemic, one truth became impossible to ignore – that no nation can outsource its health security. The pandemic did not just test the resilience of Nigeria’s health system; it exposed the deep dependency on external research, foreign innovations, and imported solutions. Yet, within that moment of vulnerability, a new resolve emerged - the determination to build homegrown capacity, to empower our scientists, and to drive innovation from within.

It was from this conviction that the Nigerian Institute of Medical Research Foundation was born. Established in 2020 by the Nigerian Institute of Medical Research (NIMR), the Foundation set out to do something unprecedented: to mobilize private-sector resources for public good, and to empower Nigerian researchers to generate the evidence, innovations, and health solutions that our nation urgently needs.

When the Foundation was officially launched on November 4, 2021, at the Eko Hotels and Suites in Lagos, the vision resonated across sectors. At the event, I spoke of a new chapter – one in which “medical research would no longer be a government-only affair.” Alongside myself stood His Highness Muhammad Sanusi II, CON , Chief (Mrs.) Moji Makanjuola, MFR , Prof. Oye Gureje, FAS, FNAMed NNOM , and Prof. Oni Idigbe – a diverse team united by a single purpose: to turn Nigeria’s research potential into tangible impact.

Since then, the Foundation has transformed bold vision into measurable action. Our Grantsmanship and Mentorship Training Programme (GMTP) has become a beacon of what is possible when local commitment meets strategic investment. Designed to equip early-career scientists with the skills to write winning research proposals, access local and international grants, and lead high-quality studies, the GMTP has already begun shaping the future of medical research in Nigeria. Through the programme, young Nigerian scientists who once saw global research funding as unattainable are now competing – and winning – on the world stage.

As captured in a recent feature by *Nigeria Health Watch*, the GMTP is “shaping the future of medical research in Nigeria,” not only by strengthening technical competence but also by building confidence and community among a new generation of investigators. The Foundation’s Executive Director, Dr. Olajide Sobande, described it as “a pipeline for leadership – where research meets mentorship, and innovation meets impact.”

Beyond training, the Foundation has invested in a culture of innovation – one that nurtures locally driven health technologies, diagnostics, and biomedical devices. Its partnerships with universities, research institutions, and industry are fostering what Nigeria has long needed: a functional bridge between science and commercialization.

The Foundation's growing innovation ecosystem supports teams working on solutions to diseases of national importance – from malaria and Lassa fever to non-communicable diseases and mental health.

Across Nigeria's six geopolitical zones, these investments are beginning to bear fruit. Scholars funded through NIMR Foundation programmes are not only producing high-quality research; they are staying in-country, leading projects, publishing in reputable journals, and mentoring others. The brain drain that once depleted Nigeria's scientific community is being met with a new narrative – one of brain gain, powered by purpose and opportunity.

This shift is not accidental. It is the result of a deliberate effort to **build systems of accountability, transparency, and impact measurement**. Every donation to NIMR Foundation – whether from individual philanthropists, corporate partners, or global donors – is managed under a trust fund structure with professional trusteeship by UTL Trust Management Services Limited. Annual audits, published reports, and rigorous monitoring frameworks ensure that every naira contributes directly to advancing research, innovation, and human capital development.

As **His Highness Muhammad Sanusi II, CON**, emphasized at the media parley preceding the launch, "Nigeria's progress will depend on how well we invest in knowledge." Four years on, that investment is beginning to pay off – not only in numbers but in national confidence. From Lagos to Kano, Ibadan to Enugu, Nigerian scientists are writing a new story of self-reliance and scientific excellence.

The NIMR Foundation's journey is still unfolding, but its message is clear and urgent: that homegrown solutions are not a luxury – they are a necessity for sustainable health and development. As Nigeria stands at the crossroads of its next decade, the Foundation remains committed to driving a movement – one where research translates to real-world impact, innovation creates local value, and the brilliance of Nigerian minds lights the path toward better health for all.

Because when Nigerians invest in Nigerians, when research becomes a national priority rather than an afterthought, and when vision is matched with will, the result is transformation – one discovery, one researcher, one community at a time.



Mr. Babatunde Raji Fashola SAN, CON

Chairman

Nigerian Institute of Medical Research Foundation

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EXECUTIVE SUMMARY

Four Years of Purpose, Progress, and Proof

When the Nigerian Institute of Medical Research Foundation (NIMR Foundation) was launched in November 2021, its founders imagined a future where Nigerians could fund, lead, and sustain the research aligns with the nation's health priorities and lead to home grown innovations and development of vaccines, medicines and technologies that addresses Nigeria's health challenges.

Four years later, that vision has matured into measurable impact – transforming limited resources into lasting results, and gradually turning belief into a movement for homegrown innovation.

The Foundation began with a bold target: to raise **₦10 billion** for Nigeria's medical research endowment. While that target remains a long-term aspiration, the **₦502 million** mobilized to date has demonstrated extraordinary leverage and value-for-money impact.

KEY ACHIEVEMENTS (2021-2025)

- **₦502 million mobilized** through donations and seed funds, professionally managed under a SEC-regulated Trust Fund administered by UTL Trust Management Services Ltd.
- **₦295.9 million disbursed** to programmes and operations, with a **net income of ₦148.9 million** earned through prudent investment.
- **120 early-career researchers** trained under the flagship **Grantsmanship and Mentorship Training Programme (GMTP)**, now evolved into a 12-month Fellowship that integrates online learning, in-person workshops, and structured mentorship.
- GMTP Fellows have collectively secured over **₦1.195 billion in new research grants**, **₦221.5 million** in travel awards and fellowships, published **799 scientific papers**, and completed **18 systematic or scoping reviews** (with ten already published in high-impact journals).
- **High-level advocacy** led by the Board of Trustees, under the chairmanship of **Mr. Babatunde Raji Fashola, SAN, CON**, has contributed to an **additional ₦2 billion federal allocation** for medical research at the Nigerian Institute of Medical Research through policy engagement with the Ministry of Finance and the National Assembly.

- The Foundation’s governance framework – anchored by transparency, quarterly reporting, independent audits, and dual oversight by Trustees and UTL – continues to earn donor trust and institutional credibility.

Value-for-Money and Leverage

For every ₦1 invested in training and mentorship, NIMR Foundation Fellows have generated ₦4 in external research grants and counting – a 400% return on social investment. This multiplier effect reflects the Foundation’s strategy of focusing on **capacity development** rather than dependency – equipping Nigerian researchers to attract global funding independently.

Beyond the Numbers

The stories behind these figures reveal a movement of purpose:

- A virologist who, after GMTP training, won four international grants.
- A neonatologist whose NIMR-inspired proposal now funds maternal-child health research.
- A lecturer from Taraba State who turned his GMTP experience into global recognition and new opportunities.

Each represents the same truth: when talent meets opportunity, Nigerian research thrives.

Looking Forward

As the Foundation prepares for its next strategic phase (2026-2030), its priorities are clear:

- Scale up the **GMTP Fellowship** to reach twice as many researchers annually.
- Launch **Postdoctoral, PhD, and Medical Fellowship awards**.
- Establish a **dedicated NIMR Foundation Research Grants Scheme**.
- Grow the **Endowment Fund** for long-term sustainability.
- Deepen collaboration with government, private sector, and development partners to institutionalize health-research funding.

The NIMR Foundation’s story is one of accountability, innovation, and national pride – proof that Nigerians can fund and sustain the research that shapes their future. The next chapter invites every partner, philanthropist, and policymaker to join in scaling this success, because the health of our nation depends not only on science, but on belief – belief that Nigeria’s solutions can come from Nigeria.

Executive Reflection: A Journey of Purpose and Proof

When the Nigerian Institute of Medical Research Foundation was launched on November 4, 2021, there were feelings of excitement and responsibility. Excitement because we were igniting something truly new: a movement to power Nigerian health research through Nigerian resources. Responsibility because we understood that our nation's wellbeing depended on whether we could turn that vision into real, measurable impact.

The idea behind NIMR Foundation was simple yet bold - to create a sustainable bridge between science and society, and to give Nigerian researchers the opportunity to solve Nigeria's health challenges from within. For too long, brilliant minds have left our shores in search of the funding and mentorship they could not find here at home. We wanted to change that story.



Four years later, we can say that change is happening. Through our **Grantsmanship and Mentorship Training Programme (GMTP)**, we have equipped hundreds of early-career scientists with the skills to design high-quality proposals, secure local and international grants, and lead impactful research. Many of these researchers now head projects addressing diseases of national importance – from malaria and tuberculosis to cancer and mental health. What was once a dream of building capacity has become a reality of multiplying excellence.

But beyond the numbers, what moves me most are the stories. The young microbiologist from Kano who won her first international grant after GMTP training. The Paediatrician in Ogun State who just received funding to conduct clinical trials for an intervention that could save babies who had difficulties taking their first breaths (perinatal asphyxia). Each of these stories reminds us why we exist – to create the conditions where Nigerian innovation can thrive.

Our progress so far also reaffirms an important truth: **when Nigerians invest in Nigerians, transformation becomes possible**. The private sector, philanthropists, and well-meaning citizens have all shown that shared purpose can achieve what government funding alone cannot. With their trust and partnership, we've built transparent systems that ensure every naira is managed responsibly and every outcome measured for impact.

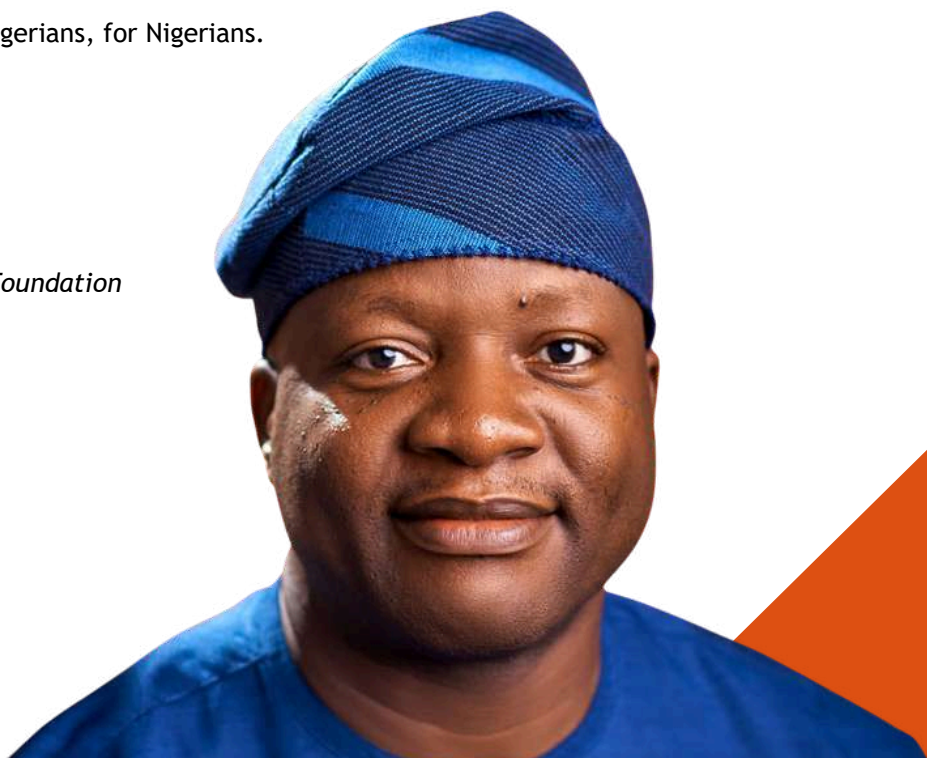
The work is far from finished. Our next chapter is about scale – expanding opportunities for more researchers, fostering commercialization of discoveries, and building partnerships that turn knowledge into solutions. It is about proving that medical research is not just an academic exercise but an engine for economic and human development.

As I look back, I am filled with gratitude - to our trustees, our partners, and the dedicated team that drives this mission daily. And I am filled with hope - because I can see the ripple effects already forming across Nigeria's research ecosystem.

Together, we are demonstrating that the future of Nigerian health innovation is not a distant aspiration; it is being built right here, right now – by Nigerians, for Nigerians.

Dr. Olajide Sobande

*Executive Director
Nigerian Institute of Medical Research Foundation*





SECTION 1: FROM VISION TO MOMENTUM

"How a **Bold Dream**
Became a Proven
Force for Nigerian
Health Research"

On 4 November 2021, at Eko Hotels & Suites in Lagos, the Nigerian Institute of Medical Research (NIMR) Foundation was officially launched. It was an event filled with conviction and courage: a collective belief that Nigeria could fund its own discoveries, nurture its own scientists, and lead its own health-innovation story.

Guided by the Board of Trustees under the leadership of Mr. Babatunde Raji Fashola, SAN, CON and inspired by the vision of Professor Babatunde Lawal Salako, FNAMed, FAS, then Director-General of NIMR, the Foundation set out with an audacious target – to raise **₦10 billion** to endow and sustain medical-research excellence in Nigeria.

At the time, the idea felt almost revolutionary. Funding for research in Nigeria had long relied on foreign grants and intermittent public allocations. Yet the Foundation's founders believed a different model was possible—one where Nigerians, through philanthropy and partnership, could underwrite the nation's scientific future.



NIMR Foundation's Launch Event at Eko Hotel and Suites



A Beginning Built on Faith and Trust

Within months of the launch, distinguished individuals and organizations rallied behind the cause. Through early donations totaling **₦352 million**, and a **₦150 million seed fund** from NIMR itself, the Foundation laid the first bricks of an enduring structure. Those contributions - far short of the original **₦10 billion** goal - would nevertheless prove transformative. They became the capital that ignited the Foundation's first flagship initiative: the **Grantsmanship and Mentorship Training Programme (GMTP)**.

Anchored in Governance, Driven by Purpose

From the outset, the Foundation embedded transparency into its DNA. All unrestricted funds are held under the **NIMR Foundation Endowment Fund**, professionally administered by **UTL Trust Management Services Ltd** and audited annually by independent chartered accountants. This structure ensures that every donor's contribution remains protected, accounted for, and purpose-driven.

Meet Our Board Of Trustees



Mr. Babatunde Raji Fashola
Chairman



HRH Muhammed Sanusi II
MEMBER



Prof. Oye Gureje
MEMBER



Prof. Oni Idigbe
MEMBER



Chief (Mrs.) Moji Makanjuola
MEMBER



Prof. Babatunde Salako
MEMBER



Prof. John Obafunwa
MEMBER



NIMR Foundation's BOT during an advocacy visit to the Honourable Minister of Budget and Economic Planning

As Dr. Olajide Sobande, Executive Director of the Foundation, reflects:

“ We may not have raised all that we set out to achieve, but we have raised something far more valuable - trust, credibility, and a generation of researchers now confident that their ideas matter. ”

Momentum with Meaning

The Foundation's first four years have transformed an audacious vision into measurable national value—combining philanthropy, governance, and mentorship to strengthen Nigeria's research ecosystem. From laboratories in Kano to classrooms in Ibadan, from federal policymakers to private-sector partners, the ripple effects are visible.

And this is only the beginning.

The Foundation now moves forward with renewed purpose—to scale its fellowship programme, deepen partnerships, and build an enduring endowment that secures the future of Nigerian-led medical research for generations to come.



NIMR FOUNDATION LAUNCHING - 4TH NOVEMBER 2021







SECTION 2: : THE CASE FOR ACTION

"Why **Homegrown Research** and Innovation Matter for Nigeria's Health Future"



Nigeria is a nation of brilliance - a country whose universities and medical schools have produced some of the world's most respected scientists, innovators, and healthcare professionals. Yet, beneath this reservoir of talent lies a sobering paradox: while our people hold the potential to lead in global health innovation, our systems often lack the structure and support to make that potential thrive. The result is a persistent gap - between research and impact, between knowledge and implementation, between promise and possibility.



Across our country, diseases that should no longer claim lives continue to do so – not for lack of intelligence or commitment, but for lack of sustained funding, mentorship, and enabling environments for innovation. From malaria and tuberculosis to emerging infections like Lassa fever, and a growing tide of non-communicable diseases such as cancer, hypertension, diabetes, and mental health conditions, Nigeria bears a heavy burden. The cost is not only in human suffering but also in lost productivity, economic stagnation, and diminished confidence in our ability to produce local solutions.



The Missing Link: Sustained, Strategic Investment in Research

For decades, Nigeria's health research system has depended largely on government allocations and foreign grants. While those efforts have produced important results, they remain insufficient and often unsustainable. Many global funders are restricted from directly supporting government agencies, leaving capable Nigerian researchers without access to critical funding streams.

Meanwhile, the private sector – a powerful engine of innovation – has only recently begun to see health research as a viable arena for investment. This funding vacuum has led to chronic underinvestment in discovery, capacity development, and the commercialization of research outcomes

The consequences are visible. Promising young researchers, unable to find local support, seek opportunities abroad. Groundbreaking studies conducted in Nigeria often fail to translate into products or policies that change lives. Research findings are too frequently lost between the lab bench and the policymaker's desk.

This is the challenge that the **Nigerian Institute of Medical Research Foundation** was created to confront – and it remains the reason our mission is more relevant than ever.

Bridging the Divide: A Catalyst for Capacity and Innovation

Since its establishment, NIMR Foundation has worked to fill a critical gap - mobilizing private-sector and philanthropic resources to complement government efforts and accelerate the translation of research into action.

Our **focus** is clear:

- To **build capacity** for early-career and mid-level researchers through mentorship, training, and funding opportunities.
- To **stimulate innovation and product development** – supporting scientists to design diagnostics, therapeutics, and medical technologies that are affordable and made for the African context.
- To **promote collaboration** between academia, industry, and policy actors, ensuring that research informs real-world solutions.
- And to **demonstrate value-for-money** through transparent fund management, measurable outcomes, and independent audits.

This vision is not abstract; it is already alive in the people and programmes we support.



The Human Face of Impact

When the Foundation launched its **Grantsmanship and Mentorship Training Programme**, the goal was simple yet transformative – to equip young Nigerian scientists with the practical skills and confidence to compete for local and global research funding.

What began as a small, experimental initiative has now become a national model for research capacity development. From microbiologists in Kano to molecular biologists in Lagos, from clinical researchers in Ibadan to public health scientists in Enugu, participants of the GMTTP are already writing a new narrative – one of competence, confidence, and contribution.

These are researchers who no longer feel invisible in the global funding ecosystem. They are applying for grants, leading studies, and mentoring others. In doing so, they are proving that when opportunity meets preparation, Nigerian science can match any in the world.

More Than Research: A Question of National Resilience

Beyond the labs and training halls, this work is about national resilience. Every locally designed diagnostic test, every indigenous vaccine prototype, and every policy informed by Nigerian data strengthens our collective security.

The COVID-19 pandemic made this painfully clear: reliance on foreign research pipelines and supply chains leaves nations vulnerable. The only sustainable path forward is one where we build – and fund – our own. NIMR Foundation is leading that transition.



Accountability and Trust: Our Model of Stewardship

From inception, the Foundation has been deliberate about financial integrity. From inception, the Foundation has been deliberate about financial integrity. All funds mobilized – whether donations, endowments, or grants – are managed under a trust fund structure administered by UTL Trust Management Services Limited, ensuring transparency and independence.

Disbursements are guided by the Board of Trustees and governed by a clearly defined Trust Deed.

This structure reassures our donors that their contributions are ring-fenced and used solely for defined objectives. Our annual audits, progress reports, and monitoring frameworks reflect our commitment to accountability – not only as a value but as a practice.

Why the Work Must Continue

The NIMR Foundation has shown what is possible – but our journey is far from over. The scale of Nigeria’s health research needs still dwarfs the resources available. To train, mentor, and retain hundreds more researchers, to fund groundbreaking studies, and to drive commercialization of innovations, we must expand our partnerships and deepen our funding base.

Every contribution - large or small - helps sustain the movement for homegrown solutions. The ₦352 million in donations, ₦150 million seed fund from NIMR, and the £44,136 grant from Africa Research Excellence Fund (AREF) have already proven that even limited resources, when well-managed, can produce measurable impact. Imagine what we can achieve together with sustained investment.

The case for action is not just about science; it is about sovereignty, dignity, and the belief that Nigeria’s future health and prosperity should be secured by Nigerian minds and means.

A photograph of two men in traditional Nigerian attire. The man on the left is wearing a light-colored traditional cap and a patterned shirt, and is holding a green award plaque. The man on the right is wearing a striped traditional cap and a dark patterned shirt. The background is slightly blurred, showing a banner with the text 'OF MEDICAL'.

SECTION 3: FOUR YEARS OF IMPACT – RESULTS IN MOTION

"Building a **Movement**
of Knowledge,
Influence, and Hope"

A green award plaque with white text. The text on the plaque reads: 'UNION HOTEL & RESORTS', 'DIRECTOR GENERAL AND BEST EXTERNAL YOUNG RESEARCHER AWARD', 'This is graciously presented to', 'AFISU BASIRU', 'In recognition of your outstanding performance and dedication during the Health Summit Conference 2024', '27th - 28th November 2024', and 'Grand Premier Hotel, Lagos State'.

UNION HOTEL & RESORTS
DIRECTOR GENERAL AND BEST EXTERNAL
YOUNG RESEARCHER AWARD
This is graciously presented to
AFISU BASIRU
In recognition of your outstanding performance
and dedication during the
Health Summit Conference 2024
27th - 28th November 2024
Grand Premier Hotel, Lagos State

PARTICIPANT



When the Nigerian Institute of Medical Research Foundation was launched in November 2021, it began with a promise: to turn ideas into impact and create a sustainable pipeline of Nigerian researchers capable of solving Nigeria's health challenges.

Four years later, that promise has become a demonstrable reality. From training 120 early-career scientists to shaping national policy dialogue on health-research funding, the Foundation has proven that vision and accountability can transform even modest resources into measurable results.



Every programme delivered, every researcher trained, and every publication achieved tells one simple truth: **impact is not a function of how much you start with, but how wisely you use it.**

1. The Grantsmanship and Mentorship Training

Programme (GMTP): From Course to Fellowship

The Grantsmanship and Mentorship Training Programme (GMTP) represents the heart of the NIMR Foundation's mission to develop the next generation of Nigerian researchers. Its evolution tells a story of intentional growth, national inclusiveness, and the disciplined pursuit of excellence.

A Programme Rooted in National Need

The GMTP began in 2019 at the Nigerian Institute of Medical Research (NIMR), supported by **pilot funding from the Wellcome Trust**. The maiden edition trained 30 early-career researchers, guided by NIMR's mandate to:

- Build a critical mass of junior and mid-level researchers
- Strengthen national research capacity
- Enable homegrown solutions to Nigeria's health challenges

Building on the success of the inaugural edition, and following the establishment of the NIMR Foundation in 2020, the program expanded into subsequent cohorts.

A Rigorous, Transparent, and Inclusive Selection Process

Across the 2022, 2023, 2024, and 2025 cohorts, the selection of GMTP candidates followed a deliberate and transparent process designed to reflect Nigeria's diversity and uphold high standards of merit. Applications were assessed against four pillars:

1. Academic and Professional Merit

Applicants were evaluated on research experience, clarity of goals, alignment with national health priorities, and potential for future research leadership.

2. Geographical Representation

The Foundation ensured **balanced selection from all six geopolitical zones**. Year after year, applications were received from universities, teaching hospitals and research institutes across the country. Final cohorts always reflected national spread.

3. Gender Sensitivity

Gender balance was a priority. Over four years, the programme consistently improved the proportion of female fellows, ensuring women - who face greater structural barriers in science - were well represented.

4. Institutional Inclusion

Slots were reserved for early-career researchers from:

- NIMR
- NIMR-affiliated institutions
- Federal teaching hospitals
- Universities and research centres across all regions

This approach ensured that the programme strengthened both individuals and institutions, building a wider ecosystem of capacity.



Programme Evolution: From Intensive Workshop to Structured Fellowship 2022 & 2023 - The 21-Day Residential Model

The 2nd and 3rd editions of the GMT (2022 and 2023) were held as 21-day residential workshops at the Biomedical Research Centre, NIMR, Yaba, Lagos.

The curriculum was delivered through the nationally approved Grantsmanship and Mentorship Training Programme Curriculum led by NIMR. Participants were trained through a **blended learning model**, starting with pre-course online self-directed modules and continuing with intensive onsite teaching.

Methods included:

- Didactic lectures
- Hands-on practical sessions
- Role-play exercises
- Group discussions
- Micro-teaching
- Webinars and online learning
- Peer-review simulations
- Independent study, homework, and term papers

Training focused on:

- Research methodology and ethics
- Mentorship and scientific leadership
- Networking and collaboration
- Grant proposal writing
- Manuscript development
- Communication for science and policy

The result was transformative. Participants left with refined research ideas, stronger scientific writing skills, and new networks that would shape their careers.

2024 & 2025 - The GMTF Fellowship Model

But by 2024, through careful evaluation and participant feedback, the Foundation realized it could do even more. What began as a short-term training course has now matured into a structured, year-long **GMTF Fellowship Programme** – a comprehensive learning experience designed to build depth, discipline, and lasting impact.

The new Fellowship model spans 12 months and integrates three phases of progressive learning and mentorship:

- **Online Training (12 weeks)**

A hands-on, interactive program focused on manuscript writing and the development of systematic or scoping reviews. Fellows engage in guided exercises culminating in a publishable review.

- **In-Person Intensive Grant-Writing Workshop (14 days)**

A residential, practice-based workshop covering research proposal development, ethics, science communication, mentorship, and collaboration – a true laboratory of ideas where fellows learn by doing.

- **Mentored Grant Writing (9 months)**

A structured phase pairing each fellow with an experienced, funded researcher who provides personalized guidance through proposal design, submission, and feedback cycles to targeted local and international funders.

The Fellowship adopts a **blended learning approach**, combining pre-course readings, virtual sessions, group assignments, reflective exercises, and immersive in-person instruction. Teaching methods include **didactic lectures, role-plays, peer-review simulations, webinars, and guided independent study.**

Already, the results are compelling: fellows have completed eighteen (18) systematic reviews, ten (10) of which have been published in reputable open-access, indexed journals – a significant output for a program barely four years old.

While resource limitations meant we focused on local travel grants instead of international ones, this adjustment has amplified collaboration within Nigeria, allowing participants to share findings with peers, build professional networks, and strengthen domestic research ecosystems.

“The Fellowship has changed how I see myself as a scientist,” one participant reflected. “I now have a publishable paper, a mentor who believes in me, and a proposal ready for submission. I feel part of a movement.”



GMTP 2022





GMTP 2023



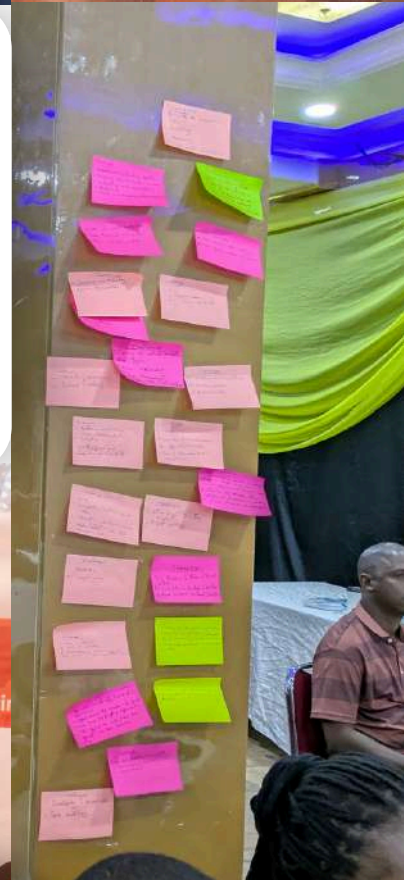


GMTP 2024





GMTP 2025





2. Advocacy and Influence: Moving the Needle on Research Funding

Beyond building individual capacity, NIMR Foundation has begun to shape the national conversation around research investment. Under the leadership of **Mr. Babatunde Raji Fashola, SAN, CON**, Chairman of the Board of Trustees, the Foundation has championed **high-level advocacy** for improved funding of the Nigerian Institute of the Nigerian Institute of Medical Research (NIMR) and the broader national research ecosystem

Between 2022 and 2023, the Trustees led strategic visits to the **former Honourable Minister of Finance, Mrs. Zainab Ahmed**, and to the leadership of the **9th National Assembly** – including the Speaker of the House of Representatives and the Senate President. These engagements yielded a remarkable outcome: since 2023, the Federal Government has allocated an **additional ₦2 billion** to the Nigerian Institute of Medical Research specifically dedicated to medical-research funding in alignment with Nigeria’s health-research agenda.

This achievement demonstrates that the Foundation’s impact extends beyond training rooms to the policy tables where national priorities are set. It is a powerful example of how a non-profit can serve as both **capacity-builder and catalyst for systemic change**.

3. Accountability and Stewardship

Transparency remains a core pillar of NIMR Foundation. All unrestricted donations - the **₦352 million mobilized from individual and corporate donors** and the **₦150 million seed fund from NIMR** - are managed within the **Trust Fund administered by UTL Trust Management Services Limited**, with full oversight by the Board of Trustees and independent annual audits.

Project-specific funds such as the **£44,136 Africa Research Excellence Fund (AREF)** grant are managed directly and expended in accordance with donor terms - in this case, fully devoted to delivering the 2025 GMTF Fellowship cohort.

This careful stewardship reassures our donors that every contribution – however modest – is translated into tangible, measurable outcomes.

4. Human Capital and Learning at the Core

Every fellow trained, every mentor engaged, and every publication produced strengthens Nigeria's scientific fabric. The Foundation's deliberate inclusion of participants from all 36 states and its emphasis on gender balance ensure equity in opportunity.

Through mentoring, publication, and professional networking, NIMR Foundation is cultivating a generation of scholars who will sustain Nigeria's capacity to innovate, adapt, and lead in health research.

5. Multiplying Impact Through Collaboration and Storytelling

In 2024, the Foundation expanded its outreach by working with media partners such as **Nigeria Health Watch**, **Pharmanews**, and **NAN News** to amplify stories of transformation. These publications have profiled the GMTP as a "homegrown solution to solving Nigeria's health challenges," celebrating how the Foundation is demonstrating value-for-money impact.

This storytelling has helped attract new partners and raised national awareness of why investing in medical research is not charity – it is nation-building.




6. Looking Ahead

The lessons of the past four years are clear: lasting change is born of persistence, partnership, and purpose. The transformation of GMTP into a Fellowship, the achievement of national-level advocacy outcomes, and the tangible publications produced by young scientists all point to a simple truth – that small, well-governed investments can drive systemic impact.

Our next chapter will focus on **scaling** – expanding Fellowship cohorts, strengthening post-training support, and deepening collaboration with universities, donors, and policymakers to sustain the momentum.


Because in every fellowship, every advocacy visit, and every research paper lies a shared conviction: that Nigeria's health future must be designed, researched, and delivered by Nigerians themselves.



NIGERIAN
INSTITUTE
OF MEDICAL
RESEARCH
FOUNDATION

SECTION 4: FACES OF IMPACT

"Demonstrating Results,
Changing Lives, and
Strengthening Systems"



In just four years, the Nigerian Institute of Medical Research Foundation (NIMR Foundation) has demonstrated what disciplined focus, structured mentorship, and transparent stewardship can achieve. From the first cohort in 2022 through to 2024, the Foundation's **Grantsmanship and Mentorship Training Programme** has directly equipped **120 early-career researchers** across Nigeria's six geopolitical zones with the competencies to compete, publish, and lead. These outcomes, verified through post-training surveys and independent review, underscore the Foundation's value-for-money impact and national reach.

Quantifiable Results (2022-2024)

1. Proposal Development and Submission

- **61 Fellows** have submitted research proposals following the GMTP Fellowship.
- A total of **88 proposals** have been developed and submitted to both local (39) and international (49) funding agencies.
- Fellows reported improved confidence and technical ability to identify suitable calls, write competitive proposals, and manage submissions to high-value funders such as **TETFund, TWAS, AREF, GCRF, ACEPHAP, IDRC, and Grand Challenges**.

"Before GMTP, I didn't know how to make funders believe in my idea," said one fellow. "Now, I not only have proposals under review – I've begun mentoring others to do the same."

2. Grants Won and Funding Secured

- **29 Fellows** have been awarded grants since completing the programme, totaling **₦1,195,583,710.90** in cumulative value.
- These include major competitive awards such as:
 - **TETFund Institutional-Based Research Grants**
 - **Africa Research Excellence Fund Development Fellowship**
 - **American Association for Cancer Research Grant**
 - **Grand Challenges Nigeria Maternal & Child Health Seed Grant**
 - **The World Academy of Science (TWAS)-DFG Fellowship (Germany)**
 - **International Society of Neurochemistry Grant**

Each grant represents not only individual success but a validation of the Foundation's model – training Nigerian researchers to access global funding streams independently and sustainably.

As **Dr. Lawrence Dayo Adedayo**, a GMTP 2024 Fellow and senior lecturer at Federal University, Wukari, shared: "Since that training, it has been one opportunity after another. I've received funding from the International Society of Neurochemistry, attended global trainings in Morocco and Malaysia, and secured a TETFund grant."

(Nigeria Health Watch, 2025)



3. Travel Awards, Honors, and Fellowships

- **22 Fellows** have received **27 travel awards**, valued at **₦160.7 million**, enabling participation in major international scientific meetings, including the **Global Health Security Conference (Australia)**, **EDCTP Conference (Rwanda)**, **American Society of Human Genetics (USA)**, and **International Society of Pediatric Diabetes Annual Conference (2024)**.
- **34 Fellows** have earned **fellowships, honors, and professional recognitions** across Nigeria, Africa, and beyond, collectively valued at **₦60.7 million**.



These recognitions not only expand professional networks but also enhance Nigeria’s visibility in global research discourse. “After GMP, my career took a 360-degree turn,” said **Dr. Ijeoma Ifeora**, a virologist from the University of Nigeria, Nsukka. “I’ve won four major grants – from the American Association for Cancer Research, AREF, TWAS, and Northwestern University. It opened doors I never imagined.” (NAN News, 2025)



4. Publications and Scientific Visibility

- Fellows have collectively produced **799 peer-reviewed publications** since the inception of the programme.
- In addition, the Foundation has **commissioned, funded, or provided technical support for 18 systematic and scoping reviews**, integrating these projects into the hands-on learning framework of the GMP Fellowship.

- **16 completed, 15 submitted for peer review, 10 published, 2 accepted, and 3 undergoing peer review** in high quality, open access, indexed journals.
- Published works include contributions to **PLOS ONE, Malaria Journal, Frontiers in Clinical Diabetes and Healthcare, International Journal of Environmental Research and Public Health, Frontiers in Pharmacology, and PLOS Digital Health.**

“The systematic review assignment turned out to be one of the most rewarding experiences,” said a 2023 Fellow. “It pushed us to publish, to contribute real evidence that could shape health policy.”

Employment and Professional Growth

- **16 Fellows** have gained new employment or advanced roles within academia and research institutions since their GMTTP participation.
- Several now serve as co-investigators on national research projects or mentors within their home universities.
- This aligns with the Foundation’s broader goal to strengthen institutional capacity and stem the brain drain in Nigerian science.

“The training refined how I think and how I write,” said **Dr. Victor Ayeni**, a neonatologist at Babcock University Teaching Hospital and 2024 GMTTP Fellow. “Just four months after the programme, I secured a Grand Challenges Nigeria grant to improve newborn health outcomes. That experience changed the trajectory of my work.” (NAN News, 2025)

Impact in Perspective

In total, between 2022 and 2024, GMTTP Fellows have achieved:

- **88 proposals developed,**
- **Over ₦1.195 Billion in grants won,**
- **28 travel awards and 34 honors/fellowships with cumulative value of 221.5 million,**
- **799 scientific publications,**
- **18 systematic/scoping reviews supported by NIMR Foundation, and**
- **10 small research grants (₦2 -5 million) for primary research by NIMR Foundation Fellows**

These are not just numbers - they are proof of a thriving ecosystem of researchers equipped to sustain Nigeria’s health innovation agenda. The GMTTP model continues to attract recognition as a **homegrown solution** that is both effective and scalable, bridging the critical gap between training, mentorship, and tangible outcomes.

“This programme is shaping the future of medical research in Nigeria,” Nigeria Health Watch concluded in its 2025 feature - a sentiment echoed by every fellow, donor, and partner who has witnessed the results firsthand.

Faces Of Impact

FOCUS

Dr. Ijeoma Ifeorah's scientific journey is a testament to how strategic skills development and mentorship translate into international recognition and tangible research success. After participating in the NIMR Foundation's GMTP, she experienced what she described as a "360-degree" transformation in her research career – expanding both her grant-writing capacity and her professional research network. "The GMTP organised by the NIMR Foundation has really helped me to not just improve my grant writing skills ability, but it has supported me in winning some grants of my own. "Apart from winning these grants, I have also gained access to mentors who have impacted my career positively and access to peer mentors that I have collaborated with," Her post-GMTP achievements are noteworthy and internationally recognised: she secured but not limited to four key research awards and fellowships, including prestigious support from the American Association for Cancer Research (AACR) - Beginner Investigator Grant for Catalytic Research, the African Research Excellence Fund (AREF) Development Fellowship, an institutional seed award from Northwestern University, USA, and a World Academy of Sciences (TWAS) fellowship that included a three-month advanced training in Germany. These awards reflect both her talent and the value of the skills she gained through GMTP, enabling her to compete successfully on the global research stage. "The GMTP organised by the NIMR Foundation has really helped me to not just improve my grant writing skills ability, but it has supported me in winning some grants of my own.

"Apart from winning these grants, I have also gained access to mentors who have impacted my career positively and access to peer mentors that I have collaborated with,"

Her work focuses on identifying molecular markers and epigenetic changes in high-risk human papillomavirus (HPV), with the potential to improve early detection and surveillance of cervical cancer in Nigerian populations – a contribution that bridges local health needs with global scientific development.



DR. JEOMA IFEORAH

Virologist • Senior Lecturer • Global Research Fellow

FOCUS

Dr. Victor Ayeni, research is deeply rooted in service – particularly in improving outcomes for newborns and children. His participation in the GMTP equipped him with clearer strategies for structuring research proposals and positioning his ideas in ways that align with competitive funding priorities.

Less than four months after completing the GMTP, Dr. Ayeni was awarded a Grand Challenges Nigeria 2025/2026 Maternal, Newborn and Child Health Seed Grant to fund a research project aimed at reducing disabilities associated with birth asphyxia – a leading cause of neonatal morbidity and mortality. This achievement demonstrates how the programme accelerates not just skills development but also tangible research outcomes that address pressing public health challenges in Nigeria.

“I knew that I needed to do high-quality research to achieve a better outcome for what I have always looked forward to for children in the country. But to do that, it will require funding that is not personally available. I applied for the NIMR foundation programme; the training helped me to refine my thoughts and how best to compose the thoughts in a way to win funding for research. Part of what I also learnt was personal development goals and this prepared me ahead when the call for the grant was announced and I got the grant”

His story underscores how targeted capacity building enables clinical researchers to convert passion into funded research that promises real impact on maternal and newborn health.

Dr. Lawrence Dayo Adedayo's experience illustrates how structured capacity building can broaden professional horizons and elevate research success. As a GMTP Fellow, he enhanced his scientific writing, proposal development, and grant-capture skills, positioning him for competitive international recognition.

After his GMTP training, Dr. Adedayo secured multiple research awards, including a grant from the International Society of Neurochemistry that provided him opportunities to participate in advanced global neuroscience training in both Morocco and Malaysia. He also received a TETFund Institution-Based Research grant, further strengthening his portfolio of competitively won, peer-reviewed funding.

His work in neurodegenerative disease and neuroinflammation research not only advances scientific knowledge, but also contributes toward the development of novel therapeutic strategies – a critical priority in a region where neurological health challenges often remain under-resourced.



DR. VICTOR AYENI
Neonatologist • Researcher in
Maternal & Child Health



#GMTP



**DR. LAWRENCE
ADEDAYO**

Senior Lecturer • Neuroscience
Researcher • Global Scholar

Faces Of Impact

FOCUS

Dr. Ismail Ayoade Odetokun's career exemplifies how rigorous research training and global partnership can tackle some of the most pressing health challenges of our time. Following his participation in the NIMR Foundation's Grantsmanship and Mentorship Training Programme (GMTP), Dr. Odetokun strengthened his scientific communication and strategic grant development skills – positioning him to compete successfully for major international funding.

In 2024, he led a research consortium awarded a 1.6 million Canadian dollar grant from the International Development Research Centre (IDRC), Canada. This consortium, comprising collaborators from Nigeria, Spain, and the United Kingdom, is working to develop bacteriocin-rich extracts as innovative alternatives to conventional antibiotics for therapeutic use in livestock and aquaculture – a critical area in the global fight against antimicrobial resistance.

The project not only advances scientific innovation in veterinary and food-animal health but also builds research capacity by engaging postgraduate students and fostering cross-continental collaboration. Dr. Odetokun's leadership reflects the NIMR Foundation's vision of elevating Nigerian researchers to the forefront of solutions that have both national and global impact.



**DR. ISMAIL AYOADE
ODETOKUN**

Leading solutions for antimicrobial resistance and
global collaboration



Our Research Footprint

www.nimrfoundation.org

UTILIZATION OF INSECTICIDE-TREATED NETS FOR MALARIA PREVENTION AMONG CHILDREN IN AFRICA: A SYSTEMATIC REVIEW AND META-ANALYSIS

Despite the proven effectiveness of insecticide-treated nets (ITNs) in reducing malaria incidence and mortality, their usage among children in Africa remains inadequate. This systematic review and meta-analysis aimed to ascertain the prevalence of ITN usage for malaria control among children in Africa.

WHY THIS RESEARCH MATTERS:

Malaria remains one of the leading causes of illness and death among African children. ITNs are simple and highly effective - yet usage varies widely. This research pulls together data from 30 studies and over 76,000 children to give a clearer picture of how well ITNs are being used.



REVIEW

Open Access

Utilization of insecticide-treated nets for malaria prevention among children in Africa: a systematic review and meta-analysis

Afisu Basiru^{1*}, Uchenna B. Alozieuwa², Mercy I. Aboh³, Umar Y. Usman⁴, Ogochukwu N. Nwaefulu⁵, Oluchukwu P. Okeke⁶, Folahanmi T. Akinsolu^{7,8} and Olajide O. Sobande⁶

Abstract

Background Despite the proven effectiveness of insecticide-treated nets (ITNs) in reducing malaria incidence and mortality, their usage among children in Africa remains inadequate. This systematic review and meta-analysis aimed to ascertain the prevalence of ITN usage for malaria control among children in Africa.

Methods This review was registered with Prospero (CRD42023474978). A search was conducted in Scopus, PubMed, and Google Scholar for publications between 2013 and 2023. The study population was children in Africa, the intervention was ITN utilization, and the prevalence of ITN use was the outcome. The Jonna Briggs Institute (JBI) criteria were used to evaluate the quality of the included studies. A random effects model determined the overall pooled prevalence of ITN utilization. A sub-group analysis was carried out based on regions of Africa. Egger's Regression-based test was used to identify publication bias.

Results This review included 30 studies with 76,045 children, 50 households, and 1009 caregivers. Among the 30 included studies, 26 (86.7%) determined the ITN utilization in children, three (10%) evaluated the use of ITN by caregivers of children, and one (3.3%) article reported ITN utilization in households with children. In addition, 28 (93.3%) studies were cross-sectional. The pooled prevalence of ITN utilization was 69.50% with a 95% CI (64.5–74.5%). Statistically significant heterogeneity was observed ($I^2 = 100%$, $p = 0.001$). ITN utilization was highest in Central Africa (85.44%, 95% CI 85.3–85.6), followed by Southern Africa (80.7%, 95% CI 80.6–80.9) and Eastern Africa (69.2%, 95% CI 63.8–74.6), and lowest in West Africa (67.0%, 95% CI 56.2–77.8).

Conclusion The prevalence of ITN utilization among children in Africa is low and varies by region. This utilization needs to be improved.

Keywords Child health, Public health, Malaria control, Africa, Health intervention

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KEY INSIGHTS:

Overall ITN use among children is 69.5%. Still far from ideal for malaria control.

Usage differs across regions:

- Central Africa: 85%
- Southern Africa: 81%
- Eastern Africa: 69%
- West Africa: 67%

Most included studies were cross-sectional, and significant differences across countries highlight the need for targeted strategies.

WHAT THIS MEANS FOR POLICY & PRACTICE

The findings are clear: We must do more to ensure every child sleeps under an insecticide-treated net. Strengthening community awareness, improving access, and tailoring interventions to regional needs can help close the gap.

DETERMINANTS OF METABOLIC SYNDROME IN PEOPLE LIVING WITH HUMAN IMMUNODEFICIENCY VIRUS IN AFRICA: A SYSTEMATIC REVIEW AND META-ANALYSIS

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Determinants of metabolic syndrome in people living with human immunodeficiency virus in Africa: a systematic review and meta-analysis

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Background: Metabolic syndrome (MetS) among people living with HIV (PLHIV) is an emerging concern in Africa, but its underlying causes remain unclear. This study is a systematic review and meta-analysis of observational studies published between January 2000 and June 2025 to synthesize evidence on the determinants of MetS among PLHIV in Africa.

Methods: PubMed, Web of Science, Scopus, and Cumulative Index to Nursing and Allied Health Literature (CINAHL) databases were searched for studies reporting determinants of MetS among PLHIV in Africa. Two reviewers independently screened and extracted data, and the risk of bias was assessed with the Newcastle-Ottawa Scale.

Results: Thirty-six studies were included, while 23 were meta-analyzed. Female sex was strongly associated with MetS [Pooled odds ratios (PORs) = 2.86, 95% CI: 1.74–4.72], as was alcohol consumption (POR = 1.46, 95% CI: 1.04–2.03).

Metabolic syndrome (MetS) among people living with HIV (PLHIV) is an emerging concern in Africa, but its underlying causes remain unclear. This study is a systematic review and meta-analysis of observational studies published between January 2000 and June 2025 to synthesize evidence on the determinants of MetS among PLHIV in Africa.

WHY THIS RESEARCH MATTERS:

As HIV treatment continues to improve, people are living longer, healthier lives. But with increased longevity comes a new challenge: metabolic syndrome - a cluster of conditions that raises the risk of heart disease, diabetes, and stroke. This study brings together evidence from 36 observational studies to understand what exactly puts PLHIV at higher risk.



KEY INSIGHTS:

- Women were almost 3× more likely to develop metabolic syndrome. (POR = 2.86)
- Higher body weight (BMI >25 kg/m²) was one of the strongest predictors. (POR = 4.27)
- Alcohol consumption increased risk significantly. (POR = 1.46)
- HIV status itself played a role, contributing to metabolic changes. (OR = 1.04)



This study reinforces the need to move toward holistic, integrated HIV care-care that includes:

- routine metabolic screening,
- lifestyle support,
- targeted counselling, and
- strategies tailored to African contexts and health systems.

Addressing metabolic risk early can significantly improve long-term health outcomes for PLHIV.

CLINICAL OUTCOMES OF SEVERE LASSA FEVER IN WEST AFRICA: A SYSTEMATIC REVIEW AND META-ANALYSIS

Environmental Research and Public Health



Systematic Review

Clinical Outcomes of Severe Lassa Fever in West Africa: A Systematic Review and Meta-Analysis

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Abstract

Lassa fever (LF) is an acute viral hemorrhagic fever that poses a substantial public health security threat in West Africa. The non-specific clinical presentation of LF, coupled with a lack of reliable point-of-care diagnostics, means delayed diagnosis, leading to severe complications and mortality during epidemics. A systematic review and meta-analyses were performed by conducting an extensive online search using PubMed, Web of Science, Scopus, CINAHL, and Google Scholar (PROSPERO protocol identifier number CRD42024587426). Only peer-reviewed studies written in English were included in publications from 1 September 2014, to 31 August 2024. The analysis and reporting followed PRISMA guidelines. The quality of the included studies was assessed using the critical appraisal tools developed from the Joanna Briggs Institute Systematic Review Checklist for cohort studies. We included 19 studies that contained data from 4177 patients hospitalized with LF of any age. Most included studies employed a retrospective cohort design and were conducted in Nigeria (16/19; 84.2%). The mortality rate was highest in a Sierra Leonean study (63.0%), whereas a group-based analysis of Nigerian studies using a random-effects model identified Owo as having the highest mortality rate of 13% (95% CI: 6–23; $I^2 = 98\%$). The pooled mortality rate for severe LF was 19% (95% confidence interval [CI]: 10–32). The most common complications of LF are acute kidney injury (AKI) at a pooled proportion of 19% (95% CI: 13–26; $I^2 = 89\%$), followed by abnormal bleeding at a pooled proportion of



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WHY THIS RESEARCH MATTERS:

Lassa fever (LF) remains a major health threat in West Africa. One of the biggest challenges is that its symptoms look like many other common illnesses, and there are no quick, reliable tests available in most places. This often leads to late diagnosis, which increases the risk of severe illness and death. This study reviewed 10 years' worth of research (2014–2024), examining 19 published studies with data from 4,177 hospitalized Lassa fever patients of all ages. Most of the studies were from Nigeria.



KEY INSIGHTS:

These findings highlight the urgent need for earlier diagnosis, better supportive care, and investment in health systems in Lassa-endemic regions.

- About 1 in 5 patients with severe Lassa fever do not survive
- Common complications include kidney injury (19%), abnormal bleeding (17%), and CNS dysfunction (15%)
- For clinicians: early detection of kidney and neurological complications can save lives.
- For policymakers: targeted resource allocation and rapid diagnostic capacity are key.
- For communities: prevention and early care-seeking remain essential

WHAT THIS MEANS FOR POLICY & PRACTICE

For every five people hospitalized with Lassa fever in West Africa, one will likely die. This highlights the urgent need for rapid diagnostic tools, effective vaccines, and new treatments. Beyond this, improving community awareness, strengthening healthcare worker training, creating regional treatment guidelines, and decentralizing Lassa fever care units can significantly improve early detection and survival.



INTEGRATING DIGITAL HEALTH TECHNOLOGIES INTO THE HEALTHCARE SYSTEM: CHALLENGES AND OPPORTUNITIES IN NIGERIA

Integrating digital health technologies (DHTs) in Nigeria's healthcare system holds promise, yet the opportunities, challenges, and strategies influencing their success remain insufficiently explored. This scoping review aimed to map these factors, focusing on healthcare settings in Nigeria.

WHY THIS RESEARCH MATTERS:

Digital health technologies – including mHealth apps, telemedicine, electronic health records, and digital data systems – promise to expand access, enhance quality, and strengthen health systems across low-resource settings. Yet real-world integration remains uneven and context-dependent.

KEY INSIGHTS:

A total of 31 studies across Nigeria were mapped, covering users such as healthcare workers, patients, caregivers, and community members.

- **Opportunities:** DHTs showed clear benefits – improved treatment adherence, increased healthcare utilization, strengthened maternal and child health outcomes, and better data quality.
- **Challenges:** Barriers included infrastructure gaps (network, devices), digital literacy, cost constraints, privacy concerns, and cultural norms.
- **Strategies for success:** Community engagement, tailored training for healthcare workers, culturally sensitive interventions, and reliable infrastructure were critical enablers. that changes lives.



RESEARCH ARTICLE

Integrating digital health technologies into the healthcare system: Challenges and opportunities in Nigeria

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Abstract

Integrating digital health technologies (DHTs) in Nigeria's healthcare system holds promise, yet the opportunities, challenges, and strategies influencing their success remain insufficiently explored. This scoping review aimed to map these factors, focusing on healthcare settings in Nigeria. A comprehensive search of databases (PubMed, Scopus, Web of Science, and CINAHL) and Google Scholar identified publications on DHT use in Nigeria from July 1, 2014, to June 30, 2024. A total of 31 observational and experimental studies were included involving healthcare workers, patients, caregivers, or other stakeholders impacted by DHT integration. Key findings revealed that DHTs enhanced treatment adherence, healthcare utilization, and community engagement while expanding technology infrastructure for scaling interventions. Notable opportunities included support and training and improved data quality. However, challenges such as operational and logistical barriers, inadequate network coverage, and cultural and gender sensitivity issues were prevalent. Strategies to address these challenges focused on continuous training for healthcare

WHAT THIS MEANS FOR POLICY & PRACTICE

To scale digital health effectively in Nigeria (and similar contexts), we need:

- Investment in digital infrastructure and training
- Inclusive design that addresses cultural & gender norms
- Strong governance and data security frameworks
- Mechanisms for sustained community engagement

THERAPEUTIC EFFECTS OF BALANITES AEGYPTIACA DEL EXTRACT ON DIABETES MELLITUS: A SYSTEMATIC REVIEW

WHY THIS RESEARCH MATTERS:

Diabetes mellitus (DM) is a major cause of morbidity and mortality globally as it is associated with long-term health complications which affect the quality of life. Several plants are used in traditional medicine to manage diabetes, with claims of efficacy from traditional healers. One such plant is *Balanites aegyptiaca* (L.) Delile commonly called Desert Date. This review brings together the available evidence to better understand its effects.

KEY INSIGHTS:

From 32 animal studies using diabetic rats and mice:

- *Balanites aegyptiaca* consistently reduced blood glucose levels.
- It also lowered lipid levels, reduced weight gain, and boosted insulin production.
- These effects were observed regardless of plant part or form – including extracts, teas, meals, fruit, or capsules.
- Mechanistically, the plant appears to work by modulating enzymes involved in glucose metabolism.



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Therapeutic effects of *Balanites aegyptiaca* DEL extract on diabetes mellitus: a systematic review

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Background: Diabetes mellitus (DM) is a major cause of morbidity and mortality globally as it is associated with long-term health complications which affect the quality of life. Several plants are used in traditional medicine to manage diabetes, with claims of efficacy from traditional healers. One such plant is *Balanites aegyptiaca* (L.) Delile commonly called Desert Date. This systematic review examines the therapeutic effect of *B.aegyptiaca* on diabetes mellitus.

Methods: The protocol for the systematic review was registered with PROSPERO [CRD42024587444]. Four databases were searched for articles from 1986 to 1st August 2024. Keywords related to "therapeutic effect", "*Balanites aegyptiaca*" and "diabetes mellitus" were used. Studies included were all animal models. Each article was critically appraised by two independent reviewers for their methodological quality using the Joanna Briggs Institute Case Control Checklist. The Cochrane SYRICLE Risk of bias tool was used for risk of bias assessment in these animal intervention studies. The animal experiments were conducted mainly in Alloxan- and streptozotocin-induced rat/mice diabetes and a control of non-diabetes induced rats.

Result: A total of 32 articles were included. All the studies were appraised for

WHAT THIS MEANS FOR POLICY & PRACTICE

The findings highlight the strong potential of *Balanites aegyptiaca* as a natural therapy for diabetes. However, all current evidence comes from animal studies. To translate these benefits to humans:

Clinical trials are urgently needed to assess safety, dosage, and effectiveness.

Policymakers and health systems can support research on herbal therapies and explore ways to integrate evidence-based plant treatments into diabetes management programs.

PREVALENCE OF NEPHROPATHY AMONG PATIENTS WITH DIABETES MELLITUS IN AFRICA: A SYSTEMATIC REVIEW AND META-ANALYSIS



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Prevalence of nephropathy among patients with diabetes mellitus in Africa: a systematic review and meta-analysis

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Background: Diabetic nephropathy (DN) is one of the most frequent microvascular consequences of diabetes, accounting for a significant portion of morbidity and mortality in diabetic patients in Africa. This study aims to report on the prevalence of nephropathy among patients with diabetes mellitus patients in Africa and the risk factors.

Methods: This systematic review was reported using Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) standards, and the protocol was pre-registered in PROSPERO with the registration number CRD42024587467. The search was conducted across databases such as PubMed, Google Scholar, CINAHL, and Scopus to retrieve studies published between January 2000 and August 2024. All statistical analyses were conducted using R software (version 4.4.2). The pooled prevalence of nephropathy in patients with diabetes was calculated with a 95% confidence interval (CI).

Results: Thirty-four (34) articles met the inclusion criteria. Only 28 studies were incorporated into the meta-analysis to determine the pooled prevalence of nephropathy among diabetes patients. The findings indicated a pooled prevalence of 21% (95% CI: 16–28) of nephropathy among diabetes patients. Among type 1 and type 2 diabetes patients, the pooled prevalence of nephropathy is 46% (95% CI: 18–77; $I^2 = 98\%$) and 20% (95% CI: 14–27; $I^2 = 98\%$), respectively. Weighted prevalence of 47%, 31%, 33% and 11% were reported in North Africa, Central Africa, South Africa and West Africa respectively. The result also showed that diabetes patients with hypertension are more than three times at risk of developing nephropathy compared to those without hypertension (OR: 3.46 (95% CI: 2.61–4.59)).

WHY THIS RESEARCH MATTERS:

Diabetic nephropathy (DN) is one of the most frequent microvascular consequences of diabetes, accounting for a significant portion of morbidity and mortality in diabetic patients in Africa. This study aims to report on the prevalence of nephropathy among patients with diabetes mellitus patients in Africa and the risk factors.

KEY INSIGHTS

- About 1 in 5 diabetes patients in Africa develop nephropathy (kidney damage).
- North Africa faces the highest risk (47%), while West Africa fares better (11%).
- High blood pressure = 3x higher risk for kidney disease in diabetics.
- Surprisingly, duration of diabetes wasn't a major risk factor here.
- Diet, cultural habits, and healthcare access are shaping outcomes across regions

WHAT THIS MEANS FOR POLICY & PRACTICE

- Regular screening for DN and hypertension management should be prioritized in diabetes care programs.
- Awareness campaigns and interventions targeting dietary and lifestyle factors may be especially important in regions with higher prevalence, like North Africa.



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Efficacy of pharmacological interventions and therapeutic exercises for rheumatoid arthritis: a systematic review and meta-analysis

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Olajide Odunayo Sobande ¹⁰¹Department of Physiotherapy, Bowen University, Iwo, Nigeria, ²Department of Physiotherapy, Bowen University Teaching Hospital, Ogbomoso, Oyo, Nigeria, ³Department of Industrial and Medical Chemistry, David Ulimah Federal University of Health Sciences, Uburu, Ebonyi, Nigeria, ⁴Department of Anaesthesia, Lagos University Teaching Hospital, Idi-Araba Lagos, Nigeria, ⁵Department of Clinical Pharmacy and Pharmacy Administration, Delta State University, Abraka, Nigeria, ⁶Department of Paediatrics, Babcock University, Ilesha, Ogun, Nigeria, ⁷Department of Epidemiology and Population Health, Ife Independent Research Centre Trust, Ife, Nigeria, ⁸Department of Clinical Pharmacy and Pharmacy Management, University of Nigeria, Nsukka, Nigeria, ⁹Department of Nursing Science, Obafemi Awolowo University, Ife, Nigeria, ¹⁰Nigerian Institute of Medical Research Foundation, Yaba, Lagos, Nigeria, ¹¹Department of Epidemiology and Biostatistics, Nnamdi Medical University, Nnamdi, Chiba, ¹²Clinical Sciences Department, Lead City University, Ibadan, Nigeria, ¹³Nigerian Institute of Medical Research, Yaba, Lagos, Nigeria**Background:** Rheumatoid arthritis (RA) is a chronic inflammatory autoimmune disease characterized by persistent synovitis, systemic inflammation, and progressive joint damage. Medication and physical exercise are the most common interventions documented for the treatment of RA. The current systematic review examined the efficacy of pharmacological and physical exercise interventions for RA.**Methods:** A systematic literature search utilized databases (PubMed, Web of Science, Google Scholar, Scopus, and CINAHL) to identify relevant randomized controlled trials (RCTs). The search strategy included keywords related to rheumatoid arthritis, pharmacological interventions, exercise therapy, and clinical outcomes. The review was registered with PROSPERO (CRD42024587378). Two independent reviewers screened the identified articles, and relevant data were extracted for analysis. The quality of evidence for the outcomes of interest in this systematic review and meta-analysis was assessed using the Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) framework. Meta-analysis was carried out using a random-effects model. For the meta-analysis, we assessed the heterogeneity using the I² statistic.**Results:** Eighteen RCTs with a total sample size of 7,062 were included. Of these, eleven studies (61.11%) investigated the efficacy of different pharmacological

Key insights from the study

Exercise interventions work
Programs such as aerobic exercises, strength training, and sensorimotor training improved:

- Functional ability
- Pain levels
- Overall quality of life

Pharmacological interventions remain effective. Across 11 studies, medications showed consistent reductions in disease activity and improved functioning-though treatment outcomes varied depending on immunogenicity and patients' disease stages.**Strong evidence from pooled results:**

- Clinical improvements after 24 months: ACR 20 (1.89), ACR 50 (2.46), ACR 70 (2.63)
- Significant reductions in disease activity and improved function noted after 24 week.

Major gap identified: There is substantial heterogeneity in reported outcomes, influenced largely by differences in pharmacological regimens-not just statistical variation.

What this means for policy & practice

The findings underscore the importance of integrated RA care that combines:

- Evidence-based medications
- Structured physical exercise programs
- Personalized treatment guided by disease stage and patient characteristics

The review also highlights the urgent need for more RCTs in Sub-Saharan Africa, where RA remains understudied and underdiagnosed.

Efficacy of pharmacological interventions and therapeutic exercises for rheumatoid arthritis: a systematic review and meta-analysis

Why this research matters

Rheumatoid Arthritis is a chronic autoimmune disease that causes persistent inflammation, pain, and long-term joint damage. While medications are standard practice, physical exercise has increasingly emerged as a crucial complementary therapy. This review brings together evidence from 18 randomized controlled trials to offer clearer guidance on what actually works for patients.



Prevalence of Sexual Coercion and Associated factors among Adolescents and Young Adults in Africa: A Systematic Review and Meta-Analysis

Why this research matters

Sexual coercion is not just a statistic - it affects real lives, confidence, mental health, and the future of young people. Yet, despite how widespread it is, the true burden among adolescents and young adults in Africa has often been unclear or overlooked.

This study brings together evidence from 33 research papers across 14 African countries, giving us a clearer, more honest picture of the situation. This review brings together evidence from 18 randomized controlled trials to offer clearer guidance on what actually works for patients.

Key insights from the study:

- 1 in 5 young people have experienced sexual coercion.
- A number that shows why continued awareness and protection matter.
- Girls are more affected than boys.
- Females: 23% • Males: 19%
- School environments show higher reports; School-based studies: 26% Community studies: 16%

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Prevalence of sexual coercion and associated factors among adolescents and young adults in Africa: a systematic review and meta-analysis

Posi Emmanuel Aduroja¹, Adebukunola Olajumoke Afolabi¹, Ayobami Adebayo Bakare^{1*}, Oluwaseyi Isaihi Olabisi¹, Atimi Atinga², Hameed Akande Bashiru³, Abiola Solomon⁴, Iyanu Adufe⁵, Oziegbe Oghide⁶, Oluchukwu Perpetual Okeke⁷, Olunike Rebecca Abiodunni⁸, Folahanmi Akinsolu⁹ and Olatide Odunayo Sobande¹⁰

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Introduction: Sexual coercion is a major public health and human rights concern, yet its burden among African adolescents and young adults remains poorly synthesized. This review aimed to estimate the prevalence of sexual coercion in this population and examine variations by gender, setting, and region.

Methods: We systematically searched Web of Science, Scopus, MEDLINE/PubMed, and CINAHL for studies published between January 2000 and June 2025. Two reviewers independently screened, extracted, and appraised eligible studies. A narrative synthesis was integrated with a random-effects meta-analysis due to anticipated high heterogeneity to derive pooled prevalence estimates and conduct subgroup analyses.

Results: Thirty-three studies involving 63,954 participants from 14 African countries were included. The pooled prevalence of sexual coercion was 20% (95% CI: 17%–23%). Females reported higher prevalence (23%) than males (19%). School-based studies showed greater prevalence (26%) compared with community-based studies (16%).

Discussion: Sexual coercion remains a major public health and human rights concern among African adolescents, particularly school-going females. Strengthening school- and community-based programs that integrate comprehensive sexuality education on consent, negotiation, and gender equality is essential. Developing a standardized, context-sensitive tool for measuring sexual coercion will also enhance evidence quality and policy response.

What this means for policy & action

This study sends a strong message: Young people need safe spaces, proper education, and supportive systems-both in school and in their communities.

The authors call for:

- Stronger school and community programs
- Comprehensive sexuality education that teaches consent, boundaries, and gender equality
- Tools that measure sexual coercion more consistently, so policies and responses can be more effective

Depression and Anxiety among Women with Polycystic Ovarian Syndrome in Low-and Middle-Income Countries: A Systematic Review and Meta-analysis



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Depression and anxiety among women with polycystic ovarian syndrome in low- and middle-income countries: a systematic review and meta-analysis

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Background: Increasing evidence links Polycystic ovary syndrome (PCOS) with adverse mental health outcomes, particularly depression and anxiety. These challenges may be amplified in low- and middle-income countries (LMICs) due to limited awareness, restricted healthcare access, and sociocultural stigma.

Objectives: To estimate the pooled prevalence of depression and anxiety among women of reproductive age with PCOS in LMICs and to examine clinical factors associated with these outcomes.

Methods: Following PRISMA guidelines (PROSPERO CRD420251069068), we systematically searched PubMed, Scopus, Web of Science, and CINAHL for studies published between January 2005 and June 2025. Eligible studies included observational research reporting the prevalence of depression and/or anxiety in women aged 15–49 years with clinically diagnosed PCOS and assessed using validated tools. Data were pooled using a random-effects model. Subgroup and meta-regression analyses explored variations by study design, age, body mass index (BMI), country, and assessment tools.

Why this matters

PCOS is more than a hormonal condition. For many women, it comes with emotional and psychological weight-shaped by symptoms like infertility, acne, and hirsutism, and intensified by stigma, poor awareness, and limited access to care in LMICs. This study brings together evidence from 40 high-quality studies to better understand the mental health burden women with PCOS face.

Key insights from the study:

- Depression affects 1 in 2 women with PCOS. Pooled prevalence: 51%
- Anxiety is also very common. Pooled prevalence: 45%
- Young women (20-25 years) are most affected. Depression: 63% • Anxiety: 56%
- India reported some of the highest rates.

What this means for policy & action

The message is clear:

PCOS care must include mental health support.

Routine screening, culturally sensitive counselling, and better awareness are essential-especially in resource-limited settings where many women suffer in silence.

PHARMACOLOGIC NEUROPROTECTIVE AGENTS FOR THE TREATMENT OF PERINATAL ASPHYXIA IN LOW-INCOME AND LOWER-MIDDLE-INCOME COUNTRIES

WHY THIS RESEARCH MATTERS:

Perinatal asphyxia (PA) is a major contributor to neonatal mortality and long-term neurodevelopmental impairment, particularly in low- and middle-income countries (LMICs), where the effectiveness of therapeutic hypothermia remains limited. Pharmacologic neuroprotective agents have shown potential as alternative treatments, but their efficacy in low-income and lower-middle-income countries (LILMICs) is not well established.

KEY INSIGHTS:

- 12 RCTs involving 1,008 newborns were analysed.
- Most studies were conducted in Asia, with only one from Africa.
- Magnesium sulphate was the most frequently evaluated intervention.
- Melatonin showed notable improvement in survival.
- Erythropoietin, citicoline, topiramate, and magnesium sulphate improved short-term neurological outcomes.
- Long-term developmental outcomes (3-19 months) were positive but limited in available data.
- 90% of trials were from Asia - **major evidence gap in Africa**



RESEARCH ARTICLE

Pharmacologic neuroprotective agents for the treatment of perinatal asphyxia in low-income and lower-middle-income countries: A systematic review and meta-analysis of randomised controlled trials

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Abstract

Background

Perinatal asphyxia (PA) is a major contributor to neonatal mortality and long-term neurodevelopmental impairment, particularly in low- and middle-income countries (LMICs), where the effectiveness of therapeutic hypothermia remains limited. Pharmacologic neuroprotective agents have shown potential as alternative treatments, but their efficacy in low-income and lower-middle-income countries (LILMICs) is not well established. This systematic review aimed to assess the effectiveness of pharmacologic interventions in neonates with PA in LILMICs.

Methods

A systematic search of PubMed, Web of Science, CINAHL, and Google Scholar was conducted for randomised controlled trials (RCTs) published between 2000 and 2024. Eligible studies compared pharmacologic neuroprotective agents with placebo or standard care, excluding therapeutic hypothermia, among neonates diagnosed with

WHAT THIS MEANS FOR POLICY & PRACTICE

These findings highlight the potential of pharmacologic neuroprotection as a feasible alternative to therapeutic hypothermia in LMICs. To advance newborn survival, we need:

- More multi-centre studies-particularly in Africa
- Greater investment in affordable neuroprotective strategies
- Updated neonatal care guidelines informed by emerging evidence



SECTION 5: ACCOUNTABILITY AND VALUE-FOR-MONEY

"Building Trust Through
Transparency,
Stewardship, and
Measurable Impact"



From inception, the Nigerian Institute of Medical Research Foundation has been guided by a clear conviction: **every naira entrusted to us must translate into measurable impact.** This principle defines our governance, our financial management, and our approach to partnership.

Over four years, the Foundation has built a financial stewardship model anchored on transparency, independent oversight, and strategic fund utilization – ensuring that donor confidence remains at the heart of our operations.

1. Financial Overview (2021-2025)

Since launch, the Foundation has mobilized a total of **₦502 million**, comprising **₦352 million** in donations from distinguished individuals and organizations, and a **₦150 million seed fund** from the Nigerian Institute of Medical Research (NIMR).

Thank you

FUNDERS



Julius Berger Nigeria Plc
(#100,000,000)



Aliko Dangote Foundation
(#65,000,000)



Nigeria Governors' Forum
(#50,000,000)



Edo State Government
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BUA Group / ASR Africa Initiative
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(#10,000,000)



Caverton Offshore Support Group
(#10,000,000)



Geregu Power Plc
(#10,000,000)



Globus Bank
(#5,000,000)



Chief Philip C. Asiodu
(#2,000,000)

Table 1: Key Donors to NIMR Foundation (2021-2022)

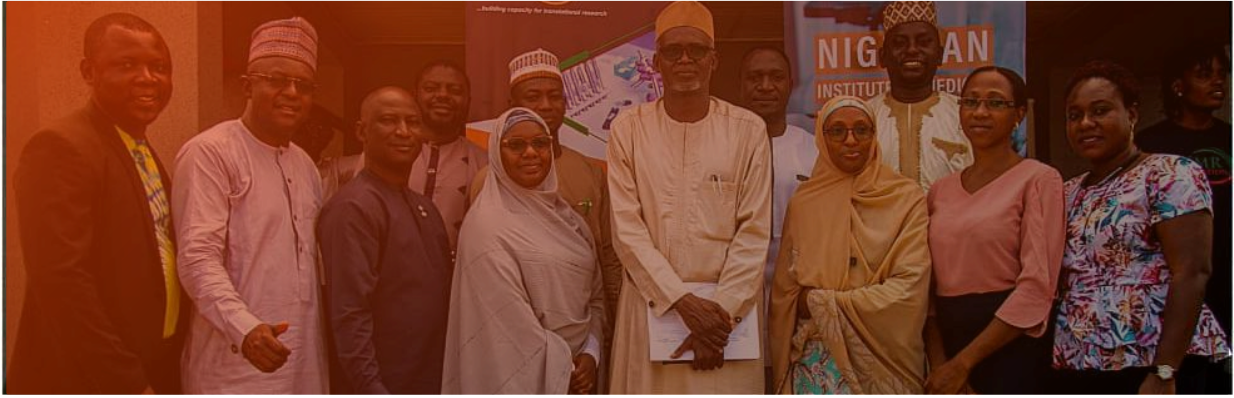
DONOR	ORGANIZATION	AMOUNT
Total Donations	-	₦352,000,000
Seed Fund from NIMR	-	₦150,000,000
GRAND TOTAL		₦502,000,000

2. Fund Utilization and Growth

The Foundation’s finances are managed under the **NIMR Foundation Trust**, professionally administered by **UTL Trust Management Services Ltd**, a firm licensed by the **Securities and Exchange Commission (SEC)**. As of **30 September 2025**, the Fund had disbursed a total of **₦295,893,875** to support programmes and operations of the Foundation while generating a **net income of ₦148,895,661.88** from prudent investment.

Disbursement Summary (₦)

NO	FISCAL YEAR	DISBURSEMENT
1	FY 2022	61,000,000
2	FY 2023	80,465,004
3	FY 2024	154,428,871
4	TOTAL DISBURSEMENT	295,893,875



The Trust Fund recorded an accrued gross income of **₦157.35 million**, with a net surplus of **₦148.9 million** after management fees and VAT. This demonstrates a disciplined balance between spending for immediate impact and preserving capital for sustainability.

3. Programme Expenditure and Efficiency

Breakdown of Programme Expenditure (₦)

NO	CATEGORY	FY 2022	FY 2023	FY 2024
1	GMTP Programmes (training, fellowship, grants, etc.)	26,209,000	28,999,000	36,493,000
2	Operating Expenses	26,814,000	34,868,000	43,127,000
3	Advocacy & Communications	610,000	746,000	3,234,000
ANNUAL SURPLUS		7,367,000	21,721,004	72,816,871

Through careful cost management, the Foundation maintained operational efficiency while expanding programmatic reach. Across all cohorts of the **Grantsmanship and Mentorship Training Programme (GMTP)**, the Foundation trained **120 fellows**, resulting in a **cost-per-fellow of approximately ₦764,000**, a figure that compares favorably with similar research training initiatives globally.

The Foundation’s multiplier effect is even more striking: For every **₦1 invested in training and mentorship**, fellows have collectively attracted **₦4 in external research grants** – a direct return on investment of over **400%**.

This outcome validates the Foundation’s approach to value-for-money – building skills that multiply impact beyond the Foundation’s own financial footprint.



4. Governance, Oversight, and Transparency

The Trust Deed, executed on 18 July 2022, defines a robust governance framework for the Endowment Fund. Under this arrangement:

- UTL Trust Management Services Ltd. acts as independent Trustee and portfolio manager, ensuring capital preservation and steady income through diversified investments.
- Dual-layer oversight is in place: all fund disbursements require both Trustee authorization and approval from the Foundation’s Board of Trustees.
- Quarterly performance and investment reports are submitted by UTL and reviewed by the Foundation’s Board of Trustees.
- Annual audits are conducted by Udoffia & Co. (Chartered Accountants), whose reports are publicly available on the Foundation’s website.
- Protectors of the Trust, including Mr. Babatunde Raji Fashola,^{SAN} and Prof. Oye Gureje, provide independent oversight and assurance on adherence to the Trust’s purpose.

This layered structure has ensured full compliance, accountability, and donor confidence since inception.

“We wanted a governance structure where transparency was not optional - it was built into the DNA of the Foundation,” said one Trustee. “Every kobo spent must tell a story of impact.”

5. Value-for-Money Achievements

The Foundation’s disciplined approach has yielded demonstrable results:

- ₦502 million mobilized in total funds
- ₦295.9 million disbursed for programs and operations

- **₦148.9 million** net income accrued through investment
- **₦1.195 billion** leveraged by Fellows in new research grants
- **18 systematic reviews** commissioned, **10 published**, **2 accepted**
- **799 independent publications** by GMTP Fellows
- **120 researchers** trained and mentored across Nigeria

Beyond numbers, this performance reflects efficiency, sustainability, and a multiplier model where **research capacity generates continuous dividends** for national development.

6. The Road Ahead (2026-2030)

The Foundation's next strategic phase aims to deepen and diversify its funding sources while scaling programmatic offerings. Plans include:

- **Doubling GMTP Fellowship cycles** from one to two annually.
- Launching **NIMR Foundation Awards for PhDs, Medical Fellowships, and Postdoctoral and Sabbatical Awards.**
- Establishing a dedicated **NIMR Foundation Research Grants Scheme** aligned with Nigeria's national health research agenda.
- Expanding **travel grants** to support conference participation and summer research placements.
- Pursuing an **expanded endowment target** to ensure long-term sustainability.

The Foundation also plans to intensify **advocacy with government and private sector partners**, ensuring that NIMR itself receives sustained funding to institutionalize the gains of the Foundation's early years.

7. Sustaining Trust and Legacy

Through its partnership with **UTL Trust Management Services Ltd.**, rigorous governance systems, and consistent external audits, NIMR Foundation stands as a model of responsible, transparent philanthropy in Nigeria's research and innovation landscape.

As we look ahead, we remain guided by the same principle that has shaped our journey so far - **trust is earned, not assumed.** Every act of stewardship, every report, and every fellow trained is our way of honoring that trust.



A hand holding a clapperboard with a red tie and a chalkboard with the word 'ACTION' written on it.

SECTION 6: CONCLUSION AND CALL TO ACTION

"From **Promise to Proof**
— and a Future Worth
Building Together"



Four years ago, the Nigerian Institute of Medical Research Foundation began with a vision – to make medical research in Nigeria not just sustainable, but proudly homegrown.

From that vision has emerged a story of resilience, purpose, and measurable impact. What started with a bold ₦10 billion target and a handful of believers has grown into a credible institution that has:

- Trained **120 researchers** across Nigeria through the Grantsmanship and Mentorship Training Programme (GMTP);
- Enabled Fellows to attract ₦1.195 billion in competitive grants from both local and international funders;
- Supported 18 systematic and scoping reviews, with 10 already published in leading indexed journals;
- Strengthened Nigeria’s research ecosystem through advocacy that unlocked an additional ₦2 billion in federal research funding; and
- Demonstrated accountability and stewardship over ₦502 million in total funds raised, transparently managed and independently audited.

These results represent more than progress – they represent proof: proof that Nigerian talent, when supported and trusted, can compete globally; proof that local philanthropy can drive national development; proof that health innovation can flourish with structure, mentorship, and faith.

A Model for Impact and Integrity

NIMR Foundation’s approach has redefined what value-for-money means in research development. With every programme, we’ve demonstrated that impact multiplies when investment meets integrity.

Each fellowship trained, each publication produced, and each grant won is not just a data point – it is a return on trust.

Our governance systems – anchored by UTL Trust Management Services Ltd., guided by the Board of Trustees, and protected by an independent Trust Deed – ensure that every donor’s contribution is not only safe but working for Nigeria’s scientific and public health future.

“We set out to build a bridge between vision and delivery,” said Dr. Olajide Sobande, Executive Director of NIMR Foundation.

“Four years later, that bridge is carrying the hopes of hundreds of young researchers and the health aspirations of millions of Nigerians.”

The Future We See

Looking ahead to 2030, NIMR Foundation envisions a Nigeria where:

- Every young scientist has access to mentorship, funding, and tools to drive discovery.
- Every health policy is informed by high-quality, locally generated research.
- Every donor, corporate or individual, can see their contribution translated into tangible lives changed.

Our next phase will expand our reach and deepen our impact. We will:

- **Double the GMTP Fellowship cycles** to train more researchers each year.
- **Launch new award schemes** for PhDs, postdoctoral researchers, and medical fellows.
- **Create dedicated research grants** to fund translational projects that address Nigeria's most pressing health priorities.
- **Grow our endowment** to ensure continuity and resilience.
- **Strengthen partnerships** with universities, industry, and global funders to bring Nigeria's innovation capacity to the global stage.



An Invitation to Join the Journey

The progress of the past four years is not the destination – it is the beginning of a larger journey. The Foundation now stands as a trusted platform for partnership, where every contribution, no matter the size, becomes part of a shared national legacy.

We invite:

- **Donors and philanthropists** – to invest in a proven model that transforms capacity into measurable change.
- **Corporate partners** – to align their CSR portfolios with a cause that advances health and science in Nigeria.
- **Government stakeholders** – to sustain and expand funding for the Nigerian Institute of Medical Research and national health innovation.
- **The public** – to believe, as we do, that Nigerian science can and must shape Nigerian health outcomes.

As Mr. Babatunde Raji Fashola ^{SAN, CON}, Chairman of the Board of Trustees, often notes,

“The future of our health security depends not on others’ research, but on our own. NIMR Foundation is proof that we have both the talent and the will to make that future real.”

Closing Reflection

The Nigerian Institute of Medical Research Foundation has shown what is possible when vision meets structure, when passion meets integrity, and when a nation decides to invest in itself.

- Our story is one of accountability, innovation, and hope – a testament to every donor who gave, every fellow who learned, and every leader who believed.
- We have moved from promise to proof.
- Now, together, we must move from proof to scale.
- Because the health of Nigeria's future deserves nothing less.



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