

# THE RHSP NEWSLETTER

The Official Rakai Health Sciences Program Newsletter



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## RHSP advances regional preparedness through Marburg and WHO-Priority Pathogen Serosurveillance Study

The Rakai Health Sciences Program (RHSP) successfully completed field activities for the Seroprevalence of Marburg Virus Infection and Other WHO-Priority Pathogens Study, a groundbreaking multi-country project conducted across Uganda, Ghana, Cameroon, and Guinea. The study aims to generate critical population-level data on past exposure to Marburg virus and related high-threat pathogens, strengthening Africa’s outbreak preparedness and global health security.

Supported by Kumasi Centre for Collaborative Research in Tropical Medicine (KCCR), Uganda Virus Institute (UVRI) and implemented by RHSP through population-based household surveys, the study responded to the increasing occurrence of viral haemorrhagic fevers and arboviral infections on the continent. Limited empirical data on immunity and exposure patterns has historically created gaps in planning and rapid response—gaps this study seeks to bridge.

In Uganda, RHSP served as one of the key implementing sites, leveraging more than 30 years of public health research experience, extensive laboratory capacity, and trusted community networks across Rakai, Kyotera, Masaka, and Lyantonde districts. The study was conducted in Kyotera district, a region with ecological and climatic conditions that support bat habitats—the natural reservoirs for Marburg virus—and a high potential for cross-border pathogen movement.

A multidisciplinary field team—including research assistants, phlebotomists, drivers, community mobilizers, and laboratory staff—carried out systematic household visits guided by geolocation tools such as the OsmAnd mobile app. Participants provided sociodemographic information and blood samples for serological testing against Marburg virus and other priority pathogens.

Once consented, participants provided household and individual data via standardized questionnaires and a 10ml blood sample, which would be processed into plasma and cell aliquots, securely stored under national and international regulations, and shipped to the Kumasi Centre for Collaborative Research in Tropical Medicine (KCCR) for centralized laboratory assays, with all procedures conducted by trained staff under strict SOPs and ethical agreements.



**In pictures:** A household participating in the Seromav study verbal and written informed consent from household heads and individual participants (with parental consent and adolescent assent for minors).

Strong community engagement was central to the study's success. RHSP worked closely with local leaders, village health teams, cultural and religious representatives, and residents to ensure transparency, address concerns, and promote understanding of the study's public health value.

Despite challenges—including mobility of adult males, adolescents being at school, scattered households, and misconceptions related to Marburg virus—the teams used flexible scheduling, repeated home visits, and clear communication to maximize participation. Data collection was fully digital, using REDCap electronic systems to enhance accuracy, security, and real-time quality assurance. Samples were collected, transported under strict cold-chain protocols, processed in RHSP's accredited laboratories, and stored safely for advanced analysis. Continuous oversight from study leadership ensured alignment with protocols, quality standards, and ethical guidelines.

RHSP remains committed to supporting national and global epidemic preparedness by generating high-quality evidence, strengthening laboratory and field capacities, and working closely with communities to build resilient health systems.

# RHSP announces new research and leadership appointments

The Rakai Health Sciences Program (RHSP) announced a number of strategic appointments that strengthen our scientific leadership, expand our research capacity, and reaffirm our commitment to advancing high-impact public health research in Uganda and beyond.



## **DR. GERTRUDE NAKIGOZI – SENIOR RESEARCH SCIENTIST**

A seasoned Physician and Public Health Specialist with over 20 years of experience in HIV programming, epidemiology, and biostatistics, Dr. Gertrude Nakigozi brings a distinguished career in research leadership and program implementation. She has previously served as RHSP's Director of Programs and Director of Research, supporting HIV prevention, care, and treatment across 12 districts and contributing to over 100 peer-reviewed publications. In her new role, she will continue driving innovation in HIV, NCD, and climate research.

## **DR. FRED NALUGODA – SENIOR RESEARCH SCIENTIST**

With more than 25 years at RHSP, Dr. Fred Nalugoda has been at the forefront of landmark studies including the Rakai Community Cohort Study and pioneering HIV prevention trials. His leadership in grants, training, and research capacity building has shaped the next generation of scientists. As Senior Research Scientist, he will continue advancing evidence-based public health solutions and impactful research.



## **NEEMA NAKYANJO – SENIOR RESEARCH SCIENTIST**

A seasoned social and behavioral scientist, Neema Nakyanjo has risen through RHSP's ranks from data collector to head of the Social and Behavioral Sciences Department. With extensive expertise in qualitative research, she has generated critical insights that inform community health programs and HIV prevention efforts. Her new role as Research Scientist strengthens RHSP's integration of social science into public health research.

**DR. EDWARD KANKAKA – DIRECTOR, RESEARCH**

Dr. Edward Kankaka, a physician-scientist trained at Johns Hopkins University, has built a strong research portfolio in HIV persistence, cure research, and strategic information. With numerous publications, international presentations, and successful global research grants, he brings exceptional scientific leadership to his new role as Director of Research.



**DR. ROBERT SSEKUBUGU – DEPUTY DIRECTOR, RESEARCH & HEAD OF GRANTS, SCIENCE, AND TRAINING**

Dr. Robert Ssekubugu has over 15 years of experience in surveillance, research, and social work, including leading the Rakai Community Cohort Study for the last seven years. His expertise in innovative survey methodologies and data quality strengthens RHSP’s research infrastructure and grants management.

**WILLIAM DDAAKI – HEAD, SOCIAL AND BEHAVIOURAL SCIENCES**

With more than 20 years of service at RHSP, George William Ddaaki brings deep experience in qualitative research and behavioral health. His work has shaped interventions in HIV prevention, reproductive health, and community programs. As Head of the Social and Behavioural Sciences Department, he will lead efforts to generate insights that inform policy and program design.



# RHSP, JHU and NIH launch IN-STEP study to strengthen HIV and STI prevention

The Rakai Health Sciences Program (RHSP), in collaboration with Johns Hopkins University (JHU) and partners from NIH, Harvard University, Imperial College London, and Abbott Diagnostics, officially launched the Integrated Female Sexually Transmitted Infection Testing for HIV Epidemic Control through PrEP (INSTEP) Study in communities around Kyotera District.

The event brought together a dynamic team of scientists and public health experts including Drs, Ronald M. Galiwango, Gertrude Nakigozi, Josephine Mpagazi, Larry William Chang, Caitlin Kennedy, Aggrey Anok, and many others representing both Ugandan and international institutions—all came together to advance HIV and STI prevention through innovation and collaboration.

## Addressing a Critical Public Health Question

**At the heart of IN-STEP lies an important question:**

Can STI diagnostics—objective markers of HIV risk—help improve how we screen for PrEP eligibility, support PrEP persistence, and strengthen female and child health outcomes?

In partnership with colleagues from the NIH intramural and extramural programs and Abbott Diagnostics, the study aims to generate evidence that could redefine how HIV prevention is approached across sub-Saharan Africa.

## How the Study Works

IN-STEP enrolled 5,560 women aged 15–49 years from both inland and fishing communities within Rakai. Participants were randomly assigned to one of two groups:

- **Control Group:** Receives standard-of-care PrEP screening and syndromic management of sexually transmitted infections (STIs).

- **Intervention Group:** Receives enhanced screening, including etiological (lab-based) testing for gonorrhea, chlamydia, syphilis, and trichomoniasis, in addition to the standard-of-care approach.



An INSTEP study participant signing a consent form. 5



On 14th October 2025, RHSP convened an IN-STEP PrEP sensitization session, bringing together 25 health workers from surrounding health facilities to strengthen referral pathways and ensure smooth continuity of care for our study participants.

*Image: Dr. Robert Kairania training Health workers on Integrated Female STI Testing for HIV Epidemic Control through PrEP.*

Across both groups, participants are screened for PrEP eligibility, provided with a one-month PrEP starter pack, and linked to government health facilities for continued care, including cervical cancer screening and management.

In addition to laboratory testing, the study is also exploring how women recognize STI symptoms, seek treatment, and navigate care, particularly in settings where syndromic management remains the standard of care.

### **A step toward smarter, integrated care**

By integrating curable STI testing into routine PrEP and reproductive health services, IN-STEP seeks to determine whether such an approach can enhance HIV prevention, improve STI awareness, and promote healthier outcomes for women and their families.

RHSP extends sincere appreciation to its community partners, funders, and collaborators whose continued commitment makes such groundbreaking work possible. As the study moves forward, the team looks forward to sharing findings that could shape the future of integrated HIV/STI prevention and female health in Africa.

# RHSP secures new funding to advance research on women's care-seeking for STIs

The Rakai Health Sciences Program (RHSP) is pleased to announce new support from the Bill & Melinda Gates Foundation to implement an important qualitative study titled “Understanding Women’s Care-Seeking Behaviours for STIs in Uganda.”

The study will run from October 1, 2025, to March 30, 2027, under the leadership of Principal Investigator Dr. Ronald M. Galiwango, with Mr. William Ddaaki serving as the Qualitative Research Team Lead.

Nested within the ongoing NIH-funded Integrated Female Sexually Transmitted Infection Testing for HIV Epidemic Control through PrEP (INSTEP) clinical trial, this research will explore critical gaps in women’s experiences with STI symptoms and care. The study seeks to understand:

- Why women with STI symptoms often delay or avoid seeking care
- How they interpret and respond to these symptoms
- Their experiences with partner notification and treatment
- The cultural relevance and usability of STI symptom questionnaires to support syndromic management.

## Why This Study Is Important:

Sexually transmitted infections remain a significant public health challenge across East and Central Africa. Despite this burden, limited data exists on women’s care-seeking behaviours—an essential factor in shaping effective prevention and treatment strategies.

## Findings from this study will help:

- Inform innovative, context-driven interventions to improve STI diagnosis
- Enhance the acceptability of treatment options for women and communities



Consent reading to study participants.

- Strengthen partner engagement and notification approaches
- Reduce STI transmission by addressing social and cultural barriers to care.

## Acknowledgment:

RHSP extends sincere appreciation to the Bill & Melinda Gates Foundation for supporting this high-impact work. We also recognize the dedication of Dr. Ronald M. Galiwango, Mr. William Ddaaki, and the entire research team.

# ICARE study officially starts in Rakai to transform Adolescent participation in HIV Prevention Trials



Young girls taking part in RHSP football tournaments as community mobilization tool.

The ICARE Study—Improving Understanding of Capacity to Consent to Sensitive Biomedical Research among Adolescents in Rakai, Uganda was officially launched in August 2025.

Led by Principal Investigators Dr. Fred Nalugoda (Uganda) and Dr. Philip Kreniske (USA), and supported by Co-Investigators Dr. John Santelli, Dr. Tom Lutalo, Dr. Robert Ssekubugu, Neema Nakyanjo, and William Ddaaki, the study is a collaborative effort between the Rakai Health Sciences Program (Uganda) and Columbia University (USA).

The study was transitioned from its pilot phase to full implementation, with data collection underway across rural communities in the RHSP cohort.

This marks an important step in advancing ethical HIV prevention research—particularly for adolescents, a demographic often underrepresented in biomedical studies due to consent-related challenges.

## Why ICARE Matters:

Adolescents aged 10–19 remain a priority population in global HIV prevention efforts, yet their involvement in research is frequently constrained by complex ethical considerations. ICARE aims to address these gaps by:

- Assessing adolescents' cognitive capacity to consent to HIV prevention trials
- Exploring the decision-making processes of both adolescents and their guardians
- Developing a digital ethics toolkit to guide researchers and ethical review boards in low-resource settings.

The findings will contribute to global best practices for ethical adolescent inclusion, ensuring that young people's voices, autonomy, and lived experiences shape the future of HIV prevention research.

The qualitative research team will continue conducting interviews with adolescents and guardians across RHSP cohort communities. These insights will help strengthen ethical frameworks and empower adolescents to participate meaningfully in biomedical research worldwide.

We extend our gratitude to all investigators and partner institutions for their leadership and commitment. Together, RHSP and Columbia University are advancing adolescent health research and setting new standards for ethical inclusion in biomedical studies.

# Prof. David Dowdy visits RHSP to launch TB Sequelae Study

RHSP was honored to host Dr. David Dowdy, Professor of Epidemiology at the Johns Hopkins Bloomberg School of Public Health, whose visit marked a pivotal moment in our efforts to understand and address the long-term effects of tuberculosis (TB) in our communities. His visit is part of a collaborative study between RHSP and Johns Hopkins University, funded by the National Institutes of Health (NIH), aimed at investigating Post-TB Lung Disease and its impact on population health.



Dr David Dowdy sharing the Post-TB Lung Disease and the TB Sequelae Study presentation to the RHSP team.



Dr David Dowdy (center), Dr. Ronald Galiwango (left), Silas Odiya (center) and Dr Rober Ssekubugu (right) in Kyotera district interacting with RHSP community mobilizers .

Dr. Dowdy spent time in the field observing how the Rakai Community Cohort Study (RCCS) conducts census activities in the community. He also met with clinicians in Kalisizo Hospital, Kasasa, and Lwanda Health Center to learn firsthand how TB is diagnosed and how patients are integrated into care systems.

Dr. Dowdy's visit also included a scientific presentation on Post-TB Lung Disease and the TB Sequelae Study, offering fresh insights into a critical but often overlooked public health challenge.

## Understanding the Burden of Post-TB Lung Disease

Post-TB lung disease refers to the lasting damage TB can leave on the lungs even after successful treatment. But as Dr. Dowdy emphasized, the real question is: how much of this damage is caused by TB itself, and how much existed beforehand?

“Many people who’ve had TB and completed treatment still show poor lung function,” he noted. “What we lack is a population-representative group with lung function data from before they got TB. That’s what this study aims to uncover.”

## The Study Design

The TB Sequelae Study will follow participants over time, leveraging two powerful platforms:

- VICINITY: The Epidemiology and Impact of the HIV, NCD, and Urbanization Syndemic in Africa study
- RCCS: Rakai Community Cohort Study, which will now include baseline spirometry (lung function testing)

Participants who undergo spirometry and later develop TB will be retested during illness and after recovery. This longitudinal approach will help researchers distinguish between pre-existing lung conditions and TB-related damage, offering a clearer picture of TB’s true impact on lung health.

Beyond its scientific value, the study is designed to promote lung health in the Rakai region. Participants will receive information about any underlying lung problems identified through spirometry, empowering them to seek timely care and make informed health decisions. By identifying individuals with compromised lung function, the study not only connects them to treatment but also ensures that no one is left behind.



Importantly, the findings will be used to advocate for improved TB care and post-TB support services—ensuring that the evidence generated translates into better policies, stronger health systems, and healthier communities.

Dr. Dowdy’s visit reaffirmed RHSP’s commitment to combining rigorous science with compassionate service. We are grateful for his partnership and look forward to the insights this study will bring—not just for Rakai, but for TB-affected communities worldwide.

## Prof. Serwadda & Prof. Sewankambo recognized as Heroes in Health

At the Africa Health Summit 2025, under the powerful theme “Reclaiming Africa’s Sovereignty through Innovation and Solidarity,” the Ministry of Health Uganda honored over 8,000 recipients of the Heroes in Health Awards.



We are proud to celebrate our very own founders, Prof. David Serwadda and Prof. Nelson Sewankambo, who received the Excellence in Health Academia Award for their groundbreaking contributions to public health and academia.

From reporting the first cases of Slim Disease (later known as HIV/AIDS) in Uganda in 1985, to co-founding the Rakai Health Sciences Program (RHSP)

and establishing the Rakai Community Cohort Study (RCCS), one of the world’s oldest and largest HIV cohorts, their work has impacted millions of lives globally.

Their pioneering research, including evidence for antiretroviral treatment in HIV prevention and innovations like Voluntary Medical Male Circumcision (VMMC), continues to shape the fight against HIV/AIDS and inspire generations of scientists.



Image above: Prof Serwadda accepting his award during the event.  
Image below: Prof. Sewankambo giving a speech during the HIHA Award. *Courtesy photos*



## RHSP participates at the SANTHE 2025 meeting



Dr. Edward Kankaka, RHSP Director Research shares a moment with Dr. Krista Dong during the SANTHE meeting.

The RHSP was invited, for the first time, to participate in the annual scientific meeting of the SANTHE Network, which occurred in Kigali, Rwanda.

The Sub-Saharan African Network for TB and HIV Research Excellence (SANTHE), funded by the Gates Foundation, Ragon Institute, and the Science for Africa Foundation, brings together established and emerging investigators in Africa who focus on acute infection studies, HIV-1 vaccine and cure research, TB research, HIV/TB co-infections, associated morbidities, and emerging diseases in Africa.

The meeting is an opportunity to showcase and network for HIV/TB and emerging infection science on the African continent.

At this meeting, the RHSP was represented by Dr. Ronald M. Galiwango (Research Scientist and Laboratory Director) and Dr. Edward Kankaka (Research Scientist and Director Research).

Dr. Kankaka (RHSP) presented on cases of individuals with complex longitudinal patterns of changes in HIV serostatus in the absence of antiretroviral therapy, dating back to before the test-and-start era. Some of these individuals eventually showed consistent positive status, others continued to waffle between positive and negative status, and a few showed consistent negative results. This presentation resulted in one of the most interesting discussions with the audience, and invitations to collaborate with groups in South Africa and Cameroun who had observed a few such cases.

The RHSP plans to conduct thorough investigation to rule out common errors like test errors and mislabelling of samples. If these are ruled out, we will investigate the true biology underlying these surprising changes in HIV serostatus without treatment, which could provide clues to how the balance might be tipped against the virus, and possibly, inform cure strategies.



## RHSP at the 12<sup>th</sup> Annual National Research Ethics Conference

The 12<sup>th</sup> Annual National Research Ethics Conference (ANREC), organized by the Uganda National Council for Science and Technology (UNCST) was held on October 21 – 22, 2025, at Hotel Africana in Kampala, Uganda. The theme of the conference was “Communities as partners: Strengthening community engagement in research”.

Participants were from several Research and Service delivery institutions in Uganda and neighboring countries. ANREC was a platform for interaction, networking, and the exchange of ideas among various actors involved with human research. Sessions were delivered through plenary and parallel sessions. Prof. Nelson Sewankambo, Dr. Robert Ssekubugu, Mr. John Bosco Wasswa, and Dr. Fred Nalugoda attended the meeting on behalf of RHSP.

There were four major highlights from the conference.

- 1)** The community should be involved in research right from the initial stage (Planning stage), during implementation, and post-implementation, and the need to include the Community Advisory Board (CAB), Sports events, exhibitions, and open days, etc. The reason is to understand community needs and design relevant and beneficial research;
- 2)** Updates on the Helsinki Declaration 2024 were shared. They included replacing the word “subjects” with “participants”; the word “free” had been added on the Informed Consent, now it is, “Free and Informed Consent”, etc.;
- 3)** The New UNCST guidelines were launched (National Guidelines for research involving humans as research participants, National guidelines for Joint Scientific and Ethical Review of Research, and National guidelines for Community Engagement in research); and
- 4)** All protocols to include a section on environment due to the growing climate changes; medical research should strive for environmental sustainability.

Overall, ANREC 2025 reinforced our commitment to ethical, community-engaged, and sustainable research. The insights gained will strengthen participant protection, ensure compliance with updated guidelines, and enhance the relevance and impact of RHSP’s research within the communities it serves.

## HRIS training for RHSP staff



RHSP held a hands-on training on our Human Resource Information System (HRIS), with full staff participation across departments. This session strengthened our collective capacity to manage data efficiently, streamline HR processes, and support our growing team with precision and care.

Empowering staff with the right tools is key to sustaining excellence and we’re proud to invest in systems that enhance both performance and people.

# Strengthening quality and expanding capacity at the RHSP Laboratory



Jane Flavia Nakachwa, Lab Quality Manager leading the RHSP laboratory Management review meeting.

The RHSP Laboratory team convened for a management review meeting to evaluate the effectiveness of the Quality Management System (QMS) and identify opportunities for continuous improvement. The review provided a valuable platform to reflect on performance, reinforce best practices, and chart priorities for the year ahead.

Feedback from key stakeholders strongly reaffirmed the laboratory's commitment to quality service delivery. Patients reported a 91% satisfaction rate, commending the team for timely services and a high standard of care, while also encouraging further strengthening of feedback channels.

Health workers expressed an impressive 98% satisfaction level, highlighting the laboratory team's professionalism, efficiency, and responsiveness.

The meeting also reviewed critical quality and operational processes, including the collection of client feedback through emails, suggestion boxes, and phone calls; ensuring the accuracy and reliability of test results through Proficiency Testing (PT) and Inter-Laboratory Comparisons (ILC); strengthening risk management through systematic identification, analysis, and mitigation; and evaluating suppliers alongside improvements in inventory management systems.

Notably, the RHSP Laboratory continues to expand its diagnostic and research capacity. The laboratory can now perform 41 different tests across both research and clinical programs, including advanced assays such as IPDA, HPV Abbott, and CT/NG Abbott. This growing capacity enhances RHSP's ability to advance scientific research while delivering high-impact laboratory services to the communities it serves.

As RHSP looks ahead, the laboratory remains committed to excellence, innovation, and service anchored in quality systems that support reliable results, informed research, and better health outcomes.

# ACRN Visits RHSP in Kalisizo

We were honored to welcome Dr. Tapiwa Chifamba and Mr. Knowledge Ushamba from the African Clinical Research Network (ACRN) to the RHSP Kalisizo site in Kyotera District. Their visit was part of ACRN’s mission to expand a network of robust and efficient Clinical Research-Ready sites across Africa.

The visit provided a valuable opportunity for both teams to exchange insights and explore areas of collaboration.



The ACRN team touring the RHSP laboratory.

RHSP shared its strategic goals, community-based engagement systems, and current research portfolio, highlighting our capacity to conduct both national and international clinical studies.

In turn, the ACRN team presented their organizational mission and outlined their efforts to strengthen clinical trial infrastructure across the continent.

To conclude the visit, the ACRN team toured the Kalisizo site, engaging with staff across departments and reviewing key infrastructure, including our laboratory and IT systems.

We are deeply grateful for the opportunity to connect with ACRN and look forward to future collaborations that strengthen research capacity and improve health outcomes across Africa.



The ACRN team posed for a group photo with RHSP department leads during their visit.

# From the shores of Ssesse to the heart of Rakai: The remarkable journey of sister Betty Nantume



Betty giving a farewell speech at the Farewell mass.

When you listen to Sister Betty Nantume recount her life story, you are immediately struck by her calm humility and dedication. From her early days on the quiet shores of Ssesse Island to decades of tireless service in the field of public health, Sister Betty's journey is one of courage, compassion, and purpose.

## Humble Beginnings on the Island

Born and raised on the serene Ssesse Islands in Kalangala District, Betty's childhood was simple yet full of lessons that shaped her enduring humility. "I grew up in a simple family," she recalls. "I was the second born among eleven children. Both my parents—Regina and Zakaria—are gone now, but they raised us with love and discipline."

Her early education took her from Kalangala to Masaka, moving between relatives' homes in search of better schooling opportunities. After completing her primary education, she joined Masaka Secondary School, where her interest in caring for others began to blossom.

Her journey into nursing began at St. Charles Lwanga School of Nursing in Nyakibale, where she trained as an enrolled nurse. Betty later worked at Villa Maria Hospital, before returning to school at Nsambya Nursing Training School for her diploma in registered nursing, and later a diploma in midwifery.

“I wanted to serve better,” she says with quiet pride. “Every time I advanced, I saw the lives I touched grow wider.”

By the early 1990s, Betty had gained experience at Kitovu Hospital, including with the mobile HIV clinic—a new initiative then dedicated to helping communities facing the growing HIV crisis. It was there that fate intervened.

### **A Leap into Research: Joining the Rakai Project**

One morning, while reading the daily notices at the hospital, Betty saw a job advert from the Rakai Project—the early beginnings of what is now the Rakai Health Sciences Program (RHSP). Encouraged by colleagues, she applied and was invited for an interview in Mulago, chaired by Professor David Serwadda and a panel of doctors.

“I was lucky,” she recalls. “The rest, as they say, is history.”

In October 1994, Sister Betty officially joined the Rakai Project as a nurse in the STD trial. For her, the world of research was entirely new. “We were used to bedside nursing,” she explains.

Patients came to us—we didn’t go to them. But in Rakai, we went out to people’s homes, talking to them about health, collecting data, and offering care. It was all new, but exciting.

### **Learning, Leading, and Growing with RHSP**

From those early days, Sister Betty became a pillar of dedication. She vividly remembers how the team—mostly new recruits—bonded through fieldwork and teamwork. “We were like a family,” she says fondly. “If someone had a wedding, everyone chipped in—from the directors to the drivers. We used to dance, share food, and support each other. Rakai was not just a workplace; it was a home.”

Her talent did not go unnoticed. When her supervisor took leave, Betty was appointed acting team leader—a role she would later take on permanently. “It wasn’t easy,” she admits. “We used to go from house to house, introducing ourselves, convincing people to participate in studies, and sometimes facing rejection or even insults. But we carried on with smiles.”



Sister Betty in the field attending to a study participant.

Over the years, Sister Betty became known for her integrity and hard work, leading field teams for various studies—including the Bacterial Vaginosis study and later the Circumcision Trial. When asked to learn motorcycle riding to reach participants in remote villages, she laughed at the memory. “I had never even ridden a bicycle! But I learned.

I even fell into a banana plantation once,” she chuckles. “Still, I got back on and rode again.”

Her courage and adaptability carried her through to new roles, including as supervisor in the Rakai Community Cohort Study (RCCS)—a position she held faithfully until her retirement.

## Moments That Stayed With Her

Among her most unforgettable memories are moments of deep human connection. Once, during a field visit, she helped deliver a baby after a man stopped the team vehicle seeking help. “I had my gloves and my bag with me. I delivered the baby boy safely,” she smiles. “We named him Robert. Every time I went back to that village, the family would welcome me with tea. It was so fulfilling.”

Not all moments were joyful. Some community encounters were heartbreaking or frightening, especially in the early days when people misunderstood the work of RHSP. “Some feared us, others hid from us,” she recalls. “But over time, they saw we were helping, and they began to trust us.”

## A Life Transformed by RHSP

Looking back, Sister Betty describes RHSP as “a father” in her life. “Everything I have today came from Rakai,” she says with emotion. “It gave me friends, experience, education, and even my confidence. The people I’ve worked with—many are still my family.”

She smiles as she recalls her early salary—50,000 UGX at Kitovu—tripling when she joined RHSP. “I felt valued,” she says. “But more than that, I felt I was part of something meaningful.”

### Retirement, Faith, and Legacy

Now retired, Sister Betty spends her days farming and serving in her Catholic Charismatic Renewal community in Masaka. “I love going to preach and support people spiritually,” she shares. “It keeps me grounded.”

She is also a devoted mother, caring for her triplets, who eagerly wait for her every evening after school. “They don’t want me to go anywhere,” she laughs. “They say, ‘Mama, stay home!’ So now I’m finally home—for them.”

When asked what advice she has for young professionals, her answer is simple yet profound:

“Work from your heart. Don’t just chase money—serve with love. Find your passion, and do even the smallest task with excellence.”

And what legacy does she hope to leave behind? “I want to be remembered as someone who loved people,” she says softly. “When you love people, you can never do them harm. Love makes service meaningful.”



Sister Betty shares a cake-cutting moment with the RHSP leadership team and her family at her farewell Mass led by Fr. Father Deus Dedit Nsaale of Kaliro Parish.

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# *Happy Holidays*

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As we celebrate this Christmas season, we extend heartfelt gratitude to each of you—our dedicated staff and donors—for the commitment, compassion, and support that have defined 2025. Together, we have advanced RHSP’s mission, strengthened communities, and brought hope to countless lives.

May this festive season bring joy, peace, and renewal to you and your families. We look forward to continuing this journey of high impact and partnership in 2026.

Merry Christmas and Happy New Year.

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