



OTHER RESOURCES



Samples from the field are stored in high-grade freezers

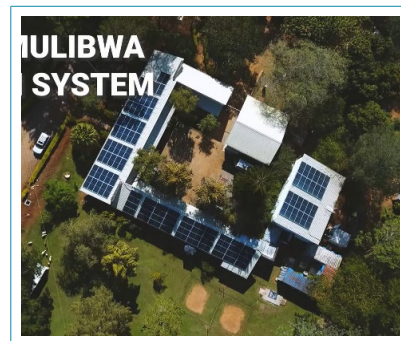
The GPC is the source of rich longitudinal population and clinic data since 1989. These data, as well as other demographic, epidemiological and genomic data from individual external projects, are extensively linked. These provide an important resource for future studies, and the Unit is actively increasing their access. Similarly, we have long-term blood samples for every survey round since 1989, as well as samples from other projects. The samples are available for answering research questions for both Unit and external scientists – more than 40 papers have been published in the quinquennium, based on analyses of historical serum samples. These stored samples also make the GPC particularly attractive for future field research because they provide the ability to compare data historically.



TRAINING

The GPC offers an excellent training environment. This includes in providing a platform for field activities, as well as the ability to utilize the rich data and extensive collection of samples already available. We have supported numerous MSc and PhD students over the years. Besides formal training, the GPC also provides staff and students unparalleled opportunity for on-the-job training in fieldwork and community engagement.

OPERATIONAL INFRASTRUCTURE



An aerial view of the solar energy system at the GPC

A well-organized infrastructure offers the GPC a particular attraction. This includes office space, a study clinic and well-equipped clinical laboratory. The installation of solar panels on most buildings ensures that on-site research is uninterrupted and that resultant costs on energy are effectively managed. The Platform is supported with a small fleet of vehicles and motorcycles for field work. More importantly, the GPC has a well-trained staff with vast experience in field studies, data collection and management. The GPC works collaboratively with other platforms in the Unit, and is supported by the Unit's Operations department, Research Support Office, Research Governance and Data and Statistics. We also have collaborations with the Ministry of Health, Makerere University and other institutions internationally.

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Medical Research Council



Uganda Virus Research Institute

LONDON SCHOOL of HYGIENE & TROPICAL MEDICINE



**THE GENERAL
POPULATION
COHORT - GPC**



GOAL

The GPC aims to provide a solid platform for population-based research, which has been crucial in improving our understanding of HIV. More recently, this dynamic structure proved critical in studies on community transmission and impact of SARS-COV2 (COVID-19). Thus, the GPC is not only a source of rich longitudinal data to do your data, but also a resource to embed numerous short-term externally funded studies. It supports all our research themes.



Hubs bring multiple clinical services closer to communities in study villages



CLINICAL CARE AND RESEARCH



Tracking mechanisms at the clinic enable close monitoring of study participants

The GPC has a clinic that provides modest care for patients that come from the study villages. This is a free service and a contribution by the Unit to the community. The clinic has an average of 100 patients per day. In addition to the general service, the clinic is also a source for research activity. For example, we follow up patients with diabetes and hypertension to understand the natural course of disease and response to treatment. The clinic also hosts a specialized service to provide antiretroviral therapy to patients living with HIV. Resources for this service are provided by the Uganda government.



COMMUNITY ENGAGEMENT AND MOBILIZATION



Community meetings are a key tool for engagement in study villages.

Community engagement is a major activity in the GPC and has contributed to its long existence and success. We have a well-organized structure to deliver engagement activities. For example, we have strong links with the authorities, including the District Health Officer. We have created an active Community Advisory Board, which facilitates our engagement with the community, especially in conducting sensitization and mobilization meetings. Many of our field staff are recruited from within the community and therefore know the local environment well; this enhances community understanding and participation in our research.



BACKGROUND

Through a collaboration between the MRC and UVRI in 1989, the GPC was established in Kyamulibwa sub county, Kalungu district. It comprises a population of around 22,000 people within 25 adjacent study villages. Its original aim was to study the epidemiology of HIV/AIDS in the general population, and data from the GPC has made major contributions to our understanding

of the changing patterns of HIV and informed policy and practice both in Uganda and internationally. Over time, research at the GPC has expanded to address scientific questions on other infectious diseases and non communicable diseases (NCDs), ranging from basic science, epidemiology, social science and intervention research.

OUR RESEARCH FIELD RESEARCH

Field research constitutes the major part of our studies at the GPC and includes census (house to house demographic surveillance) and survey activities. We have conducted HIV sero surveys since 1989 to determine the prevalence and incidence of HIV. In recent years we have collected data on hepatitis B and C, NCDs, SARS COV2 and population genetic data. From

the census, we have data births and deaths, including verbal autopsy.

Census is currently conducted through 'Field Research Hubs' periodically set up at central locations within the 25 research villages. Their proximity in the communities has boosted participation in surveys and continues to be a cost effective means of attaining research targets.

