

Projects awarded a grant in the call “Mobility – Global Medicine and Health Research Joint call – 2020”¹.

Project title	There is no app for this! Regulating the migration of health apps in Sub-Saharan Africa
Main applicant Sharifah Sekalala, University of Warwick, United Kingdom	Migration usually refers to people, but the migration of data is becoming equally important. Many health apps facilitate data migration from the global south to north. Whereas other kinds of transnational health data collection and transfer tend to be highly regulated (e.g., vaccine technology, which is protected through intellectual property), data migration through health apps is inadequately regulated. This project brings together a consortium of scholars and activists to examine how to construct regulatory solutions to the problem of health data migration in Africa. In this project, we will use the framework of digital health colonialism to analyse proposed regulatory solutions. We will set up an incubator for app developers to trial designs under different regulatory conditions, to discover their feasibility. We will use a socio-legal approach to synthesise our findings to develop legal guidelines for health data regulation, which will be disseminated by our consortium partners.
Co-applicants 1: Pamela Andanda, University of the Witwatersrand, South Africa 2: Elijah Bitange Ndemo, University of Nairobi, Kenya	

Project title	Understanding how mobility affects forcibly displaced people’s continuity of chronic disease care (CONTINUITY)
Main applicant Morten Skovdal, University of Copenhagen, Denmark	In South Sudan, nearly 4 million people have been forced to leave their home because of violence, poverty, and hunger. As a result, many experience disruptions in their access to health services or care. They often end up in camps or settlements with poor healthcare infrastructures, and often rely on the care and support of people in their social network and at a community level. CONTINUITY seeks to understand and address the challenges forcibly displaced persons (FDPs) face in accessing and maintaining diabetes and hypertension care, chronic conditions that global data suggest affect between 10-18% of FDPs. Focusing on the South Sudan to Uganda migration corridor, the project brings together an interdisciplinary team of researchers and practitioners, who, together with FDPs and other actors will draw on research findings to develop innovative frameworks and educational products to advance responses to the diabetes and hypertension care needs of FDPs in the region.
Co-applicants 1: David Kyaddondo, Makerere University, Uganda 2: Patterson Siema, African Population and Health Research Centre, Kenya	

¹ Please note that call conditions for the joint call “Transdisciplinary approaches to mobility and global health – 2024” have been updated as compared to the call “Mobility – Global Medicine and Health Research – Joint call – 2020”

Project title	Transforming data collection and surveillance around vaccination (including COVID-19) and key diseases in migrants in the MENA region
Main applicant Ana Requena-Méndez, Barcelona Institute for Global Health (ISGlobal), Spain	Health monitoring with reliable data is key to improve the health of migrants residing in the Middle East North Africa (MENA) Region, populations who are currently excluded from health and data systems. We will develop, evaluate, and implement the Migrant Health Country Profile tool, an innovative digital tool that will strengthen data collection in key areas of migrant health, including tuberculosis, HIV, viral hepatitis, vaccine-preventable diseases (including COVID-19), malaria and neglected tropical diseases, and non-communicable diseases, and embed it into health and data systems. This research, led by the Migrant Health MENA Working Group, will transform data collection, service delivery, and policy making across the MENA Region to ensure migrants are included, particularly in the COVID-19 vaccine response. We will also develop research capacity in the MENA region to deliver this research, supporting early- and mid-career researchers, and establish a regional research network.
Co-applicants 1: Sally Hargreaves, University of London, United Kingdom 2: Mahmoud Hilali, Blue Nile National Institute for Communicable Diseases, Sudan 3: Habib Ghedira, Office National de la Famille et de la Population, Tunisisa 4: Wafa Chemaou Elfihiri, École Nationale de Santé Publique (ENSP), France	

Project title	Mobile mosquitoes – Understanding the entangled mobilities of Aedes mosquitoes and humans in India, Mexico, Tanzania and Germany
Main applicant Ulrike Beisel, Freie Universität Berlin, Germany	Invasive mosquitoes can transmit dangerous diseases. In the last decades Aedes aegypti, the yellow fever mosquito, and Aedes albopictus, the Asian tiger mosquito, have spread across the globe and brought with them diseases such as Dengue, Zika, or Chikungunya. In their travels mosquitoes have taken advantage of human infrastructure: travelling in buses, trains, boats and planes to settle in new places. The mobility of humans and invasive mosquitoes are connected. In this project, experts for mosquitoes –entomologists and ecologists – and experts for human mobility – anthropologists and human geographers– work together to understand how the mobility of mosquitoes and humans is linked. We identify mobility patterns of humans, travelling for work or leisure, as well as understand how and where Aedes mosquitoes move. Understanding the linked mobilities of humans and mosquitoes enables the design of new public health interventions that control the spread of invasive mosquitoes and disease.
Co-applicants 1: Carsten Wergin, Heidelberg University, Germany 2: Fredros Okumu, Ifakara Health Research Institute, Tanzania 3: Gerardo Suzán, National Autonomous University of Mexico, Mexico 4: Ashwani Kumar, Indian Council of Medical Research, India	

Project title	Antimicrobial resistance and labour migration across healthcare boundaries in Northern South Asia (AMR@LAB)
Main applicant Jens Seeberg, University of Aarhus, Denmark	Antibiotics that were effective yesterday against common infections may not work tomorrow as a growing number of disease-causing microorganisms develop resistance against them. Therefore, it is predicted that ordinary infections may become the most common cause of death by 2050. At the same time, the corona pandemic has shown how quickly pathogens spread worldwide. While mobile populations are often blamed, protecting them better from infection and ensuring access to services when needed would serve both the migrant workers and the common good. AMR@LAB contributes to this goal by developing a solid understanding of migrant worker's life conditions in Nepal and India as linked to the presence of common pathogens and medicines. It engages with policy makers and local communities to translate the findings into policy recommendations and accessible education, in addition to sharing with the global scientific community both findings and original way of working across different disciplines.
Co-applicants 1: Deepak Kumar Yadav, B.P. Koirala Institute of Health Sciences, Nepal. 2: Mallika Shakya, South Asian University, India. 3: Mandira Varma-Basil, University of Delhi, India	

Project title	Multilingualism in providing quality mental health care to migrants – Needs, resources and practices (MiM2M)
Main applicant Mike Mösko, University Medical Center Hamburg-Eppendorf, Germany	Migrants world-wide struggle to access mental health care. Language barriers between migrants and their health care providers (HCP) are among the strongest barriers; but these barriers remain under-researched. This innovative study conducted in two high-income and three middle-income countries investigates current (in-)formal practices that deal with language gaps in providing mental health care for migrants. By taking an interdisciplinary and transnational approach, with countries from Africa, Asia, and Europe, the project intends to produce an international guideline for bridging language barriers, and a multilingual sensitive training for local mental HCP. The project benefits from a strong multidisciplinary team with experience in diverse countries and contexts and allows for a participatory learning approach to address complex questions in resource-constrained environments.
Co-applicants 1: Leslie Swartz, Stellenbosch University, South Africa 2: Razvan Mircea Chereches, Babeş-Bolyai University, Romania 3: Brian Hall, New York University Shanghai, China 4: Ted Sanders, Utrecht University, Netherlands	

<p>Project title</p>	<p>Mobility regimes of pandemic preparedness and response (MoREPPaR): The case of COVID-19</p>
<p>Main applicant Hansjörg Dilger, Freie Universität Berlin, Germany</p>	<p>This project assumes that the huge social and emotional impact of the COVID-19 pandemic response on people’s lives, notably mobility restrictions, shapes their preparedness for future pandemics. We ask: (1) how restrictions on mobility (lockdown, isolation, border closures) are constituted by specific kinds of expert knowledge; (2) what unequal consequences mobility restrictions have depending on age, class, gender, or race; and (3) how mobility restrictions have been emotionally experienced and inscribed onto people’s bodies. Our qualitative research in South Africa, Germany, the Democratic Republic of the Congo, and South Korea explores the differences and similarities as well as the interconnectedness between these dynamics across the four locations. Together with communities and stakeholders at our research settings, we will develop an inter- and transdisciplinary understanding of pandemic preparedness that firmly incorporates the concerned populations’ perceptions and needs.</p>
<p>Co-applicants 1: Julia Hornberger, University of the Witwatersrand, South Africa 2: Nene Morisho, Pole Institute, the Democratic Republic of the Congo 3: Bo Kyeong Seo, Yonsei University, South Korea</p>	