Darwin Initiative Innovation Annual Report

To be completed with reference to the "Project Reporting Information Note": (https://www.darwininitiative.org.uk/resources/information-notes/)

It is expected that this report will be a maximum of 20 pages in length, excluding annexes)

Submission Deadline: 30th April 2025

Submit to: BCF-Reports@niras.com including your project ref in the subject line

Darwin Initiative Project Information

Project reference	DARNV025
Project title	Improving wildlife health monitoring using community networks, screening, and immunology
Country/ies	Kenya, Tanzania, Rwanda
Lead Organisation	University of Manchester
Project partner(s)	University of Manchester; Dr. Elisa Manase from Tanzania Relief Initiatives; Mpala Research Centre; Dr. Richard Gashururu from the College of Agriculture, Animal Science, and Veterinary Medicine (CAVM), University of Rwanda; Dr. Francis Gakuya from the Wildlife Research and Training Institute (WRTI); Bernard Bett from the International Livestock Research Institute (ILRI); Dr. Folorunso Fasina from the University of Pretoria and FAO; Dr. Iddi Lipende from the Tanzania Wildlife Research Institute (TAWIRI); Dr. Drew Bantlin from African Parks; and the IMPACT initiative.
Darwin Initiative grant value	£199,873.00
Start/end dates of project	April 2024 to March 2026
Reporting period (e.g. Apr 2024 – Mar 2025) and number (e.g. Annual Report 1, 2, 3)	April 2024 – March 2025; Annual Report 1
Project Leader name	Professor Susanne Shultz
Project website/blog/social media	TBC
Report author(s) and date	Cianjoka Gichuyia (UoM), Richard Gashururu (UoR), Susanne Shultz (UoM), Elisa Manase (TANAPA/ TRI) April 30th 2025

1. Project summary

The project aims to strengthen capacity for identifying and measuring disease risk in wildlife, particularly at the wildlife-livestock interface. This is being achieved through two key innovations. First, the project engages existing animal health networks—including community animal health workers, wildlife rangers, and grazing managers—to contribute to wildlife health monitoring. These local actors possess valuable knowledge and experience in identifying early signs of disease in livestock yet have not previously been involved in wildlife health surveillance. By leveraging their expertise and presence at the interface, the project opens up a new and practical reporting mechanism.

The second innovation involves applying ecological immunology (ecoimmunology) to assess wildlife immune responses to pathogens and parasites in real-world conditions. This approach offers a non-invasive way to evaluate health status in wildlife and livestock using immune markers. A suite of immune assays, largely based on fecal samples, has been developed to assess inflammatory states in non-model organisms. These are supplemented with blood cytokine and leukocyte profiles, providing a more comprehensive understanding of immune function. The project is exploring how these immune markers vary across species, habitats, and seasons to better identify health risk factors. Embedding this ecoimmunological approach within regional wildlife health working groups is expected to strengthen long-term wildlife health surveillance capacity across East Africa.

The project addresses significant biodiversity challenges by focusing on the underexplored role of chronic, endemic infectious diseases in East Africa's wildlife populations. Nearly half of the region's large herbivores are listed as threatened or conservation dependent due to pressures such as habitat loss, human-wildlife conflict, and infectious disease. Although notifiable diseases like MERS, rabies, and anthrax receive attention, the impacts of persistent endemic pathogens and parasites remain poorly understood. These diseases are known to affect livestock and may also contribute to mortality in wildlife, particularly during climatic extremes or conservation interventions.

Understanding disease dynamics at the wildlife-livestock interface is essential for wildlife conservation, ecosystem management, livestock productivity, and public health. Poor wildlife health increases the risk of spillover to livestock and humans, especially in communities living near conservation areas. Livestock diseases such as helminths, giardia, Q fever, and brucellosis impose major economic and health burdens, particularly for low-income households. Chronic disease reduces productivity and increases treatment costs, with estimates suggesting annual losses of up to 18% in affected areas. Strengthening wildlife disease surveillance can therefore support food security, resilience, and livelihoods. Furthermore, improved control of zoonotic pathogens can reduce human disease burden, particularly from diarrhoeal diseases, which are a leading cause of under-five mortality and adult illness across sub-Saharan Africa.

These priorities were identified through a review of relevant literature, informal consultations with conservation stakeholders, community members, and wildlife and livestock veterinarians. Additionally, a UMRI-funded workshop held at WRTI in January 2024 convened stakeholders from across the region. Their input helped refine the focus of the project and shaped subsequent activities under the Darwin Initiative.

Project activities span transboundary regions, involving collaborators from Kenya, Tanzania, and Rwanda. Fieldwork has been concentrated in Laikipia and Kajiado counties in Kenya, and West Kilimanjaro in Tanzania (Figure 1). The map below highlights the focal sampling areas. A summary of samples collected, and analyses completed is presented in Output 3.

Figure 1: Study sites

This project brings together a large international and multisectoral team with representation from Kenya, Tanzania, Rwanda, and the UK. Core partner institutions include the University of Manchester, the Government of Kenya's Wildlife Research and Training Institute (WRTI), Kenya Wildlife Service, the United Nations Food and Agriculture Organisation (FAO), Tanzania National Parks Authority (TANAPA), Tanzania Wildlife Research Institute (TAWIRI), University of Nairobi, International Livestock Research Institute (ILRI), African Parks in Rwanda, the University of Rwanda, and Mpala Research Centre.

These partnerships were established based on identified demand from wildlife health management and research authorities in each country. Key partners were selected for their roles in wildlife conservation, policy influence, and research infrastructure. Each organisation has played an active role in planning and implementation, with participation in workshops, field visits, and meetings. There has been strong buy-in across institutions, demonstrated through consistent engagement and support.

In Year 1, the project successfully delivered two major workshops. The first was the project initiation meeting held in October 2024 in Naivasha, Kenya. The second was a training workshop hosted in Arusha, Tanzania, which brought together 26 participants. Both events were well attended and well received, with partners contributing to content planning and coordination.

Specific partner contributions included:

- **TANAPA/TAWIRI**: Hosted Workshop 2 and facilitated permit processes in Tanzania.

- **Mpala Research Centre**: Provided lab access, permitting support, and hosted field visits in Laikipia.
- **WRTI**: Co-hosted Workshop 1 and provided national-level technical input.
- **African Parks** and the **University of Rwanda**: Participated in both workshops and supported fieldwork.
- **FAO**: Provided policy engagement and stakeholder representation, with further involvement planned in Year 2.
- **ILRI**: Participated in Workshop 1 and contributed through its livestock health networks.

In addition to formal partners, the project engaged several other stakeholders. These included the Tanzania Veterinary Laboratory Agency and the Kenya Institute of Primate Research. There were also productive interactions with County Executive Committee Members for Health in Laikipia and Kajiado, Kenya—key public health authorities at the county level. Expanding this model of engagement to Tanzania is a priority for Year 2.

Challenges during the reporting period included budget adjustments and underestimations, as well as differing administrative procedures between the University of Manchester and partner institutions. These differences, particularly around per diem rates and fund transfers, required ongoing negotiation and adaptation. Logistical challenges, such as venue suitability and infrastructure limitations, also affected planning. In some cases, expectations among partners exceeded the project's available resources, as outlined in Section 8.

2. Project progress

2.1 Progress in carrying out project Activities

Output 1 – Regional working group established, and stakeholders trained in innovative disease monitoring techniques.

1.1. Key stakeholder invitation and conduction of an inception workshop at the Wildlife Research and Training Institute (WRTI).

On October 7–8, 2024, the University of Manchester led an inception workshop at WRTI in Naivasha, Kenya. Nineteen stakeholders from Kenya, Rwanda, and Tanzania attended, representing wildlife and animal health sectors. Participants reviewed existing surveillance practices, identified gaps, and prioritised pathogens and parasites for monitoring. Key outcomes included consensus on: (1) the need for regional alignment in disease reporting systems; (2) expanding surveillance to capture fitness and productivity impacts of non-lethal diseases using eco-immunology biomarkers; (3) integrating indigenous knowledge to detect non-acute pathogens; and (4) modelling and mapping transmission dynamics across species. The workshop outputs are being compiled into a report, which will inform a policy-oriented white paper and a peer-reviewed position paper (See Annex 4, Supplementary material 1).

1.2. Holding a 2-week training workshop in Arusha, Tanzania for early career researchers and team members associated with the working group.

From March 26–28, 2025, a three-day intensive training was held in Arusha, Tanzania, for 26 early career researchers (14 men, 12 women) and professionals working in livestock and wildlife health and conservation. Participants represented 19 organisations across academia, government, and NGOs. The training covered participatory epidemiology, ecological immunology, and population genetics and molecular epidemiology through a mix of lectures, case studies, and hands-on laboratory and data analysis sessions.

Participant feedback indicated high levels of satisfaction, with all respondents rating the training 4 or 5 on a 5-point Likert scale. Pre- and post-training self-assessments showed measurable improvements in subject knowledge:

- Participatory epidemiology: 2.7 to 4.5
- Ecological immunology: 2.5 to 4.3
- Population genetics and monitoring: 2.0 to 3.7

All respondents expressed an intention to apply the methods learned in their work. Specifically, 90.5% plan to apply participatory epidemiology concepts, 85.7% ecological immunology, and 71.4% population genetics and molecular epidemiology.

Please see Annex 4, Supplementary Material 3, for the detailed report.

Output 2 - System for monitoring wildlife health tested in two areas in each case study country (Kenya, Tanzania and Rwanda) involving members of regional working group and para-vets.

Year 1 activities under this output included:

2.1.1. Establishing a network of paravets in each of two focal areas through visits by team leaders, and

We have developed a network of wildlife and (livestock) county veterinarians. We have also liaised with other key projects (Smithsonian) that are developing reporting schemes for wildlife illness and injury. Our progress with paravets has been less successful. We have had tentative meetings with Community Disease Reporters. Investing in this network and relationships will be a major goal for year two.

2.1.2. Implementing and testing a system for monitoring wildlife health with regional working group member and paravets.

As previously mentioned in our half-year report, we had considerable delays with the recruitment of a PDRA/ project manager and ended up having her in place in January 2025 (i.e., Q4). We therefore postponed the implementation of these activities to commence in Q1 of year 2 (25/26) and are confident that these will be achieved in 3 focal areas overall (Laikipia and Kajiado in Kenya, and west Arusha-Kilimanjaro) before end of year 2. By successfully implementing activity 1.1 and 1.2., we have identified relevant stakeholders that would support these activities

Output 3: Health burden of co-morbidity on wildlife and livestock evaluated in two areas in each case study country (Kenya, Tanzania and Rwanda using innovative tools to validate reports made using wildlife health surveillance system

The delays in recruitment previously mentioned have led us to postpone conducting interviews with community members to establish traditional understanding of diseases, transmission routes and frequency of outbreaks (3.1.1.) to begin in Q1 of year 2. In year one, we have concentrated on collecting samples from wildlife and livestock and screening them for endemic pathogens and assessing immune state. Across the three landscapes we have collected approximately 1500 samples. We have completed some initial screening and immune state profiling to measuring disease burden in livestock and wildlife (3.1.2) and analyzing evidence of wildlife disease impacts from non-invasive profiling (3.1.3). A summary of samples is below.

Region	Property Type	Wildlife	Livestock	Total
Laikipia	Community	6	306	312

	Private Reserve	425	280	705
Kajiado	Community	45	150	195
West Kilimanjaro	Community	122	150	272
	WMA	131	60	191
	Ranch	90	60	150
		Total Samples		1825
		Immunoassays		570
		Initial Parasite Screening		450

Activities under Output 4 and 5 have been scheduled for Q3 and Q4 in year 2.

2.2 Progress towards project Outputs

Output 1: Regional working group established, and stakeholders of group trained in innovative disease monitoring techniques.

Indicator 1.1: One regional working group established

A regional working group comprising 31 stakeholders from Kenya, Tanzania, and Rwanda was established following an inception workshop held at the Wildlife Research and Training Institute (WRTI) in Naivasha, Kenya, on 7–8 October 2024. This group includes veterinary professionals, early-career researchers, and conservation practitioners. A perspective article co-authored by members of the group is under preparation for submission to a peer-reviewed journal (Annex 4, Supplementary material 1). Evidence of progress includes attendance records, meeting minutes, and workshop outputs.

Indicator 1.2: Minimum of 20 stakeholders (at least 8 women) trained in eco-immunology, population genetics, and traditional ethnoveterinary knowledge by end of Y2

A three-day regional training was conducted in Arusha, Tanzania, in collaboration with the Tanzania Veterinary Laboratory Agency (TVLA), engaging 24 participants (12 women, 12 men) from the three project countries. The training covered eco-immunology, population genetics, and ethnoveterinary approaches. Pre- and post-training self-assessments using a 5-point Likert scale (n=24) showed a measurable increase in participants' confidence and technical knowledge Annex 4, Supplementary material 3)

Indicator 1.3: Minimum of 10 organisations responsible for animal health in Kenya, Tanzania and Rwanda with improved staff capability and capacity as a result of project by end of Y2.

A full capacity-change survey is scheduled for Q4 Year 2 in line with the workplan. We have also leveraged the Darwin Innovation Project to secure additional funding to support the training of two master' students, one from Kenya and one from Tanzania. This funding has helped these two students work with and support interviews and sample collections for this project.

Output 2: System for monitoring wildlife health tested in two areas in each case study country (Kenya, Tanzania and Rwanda) involving members of regional working group and para-vets.

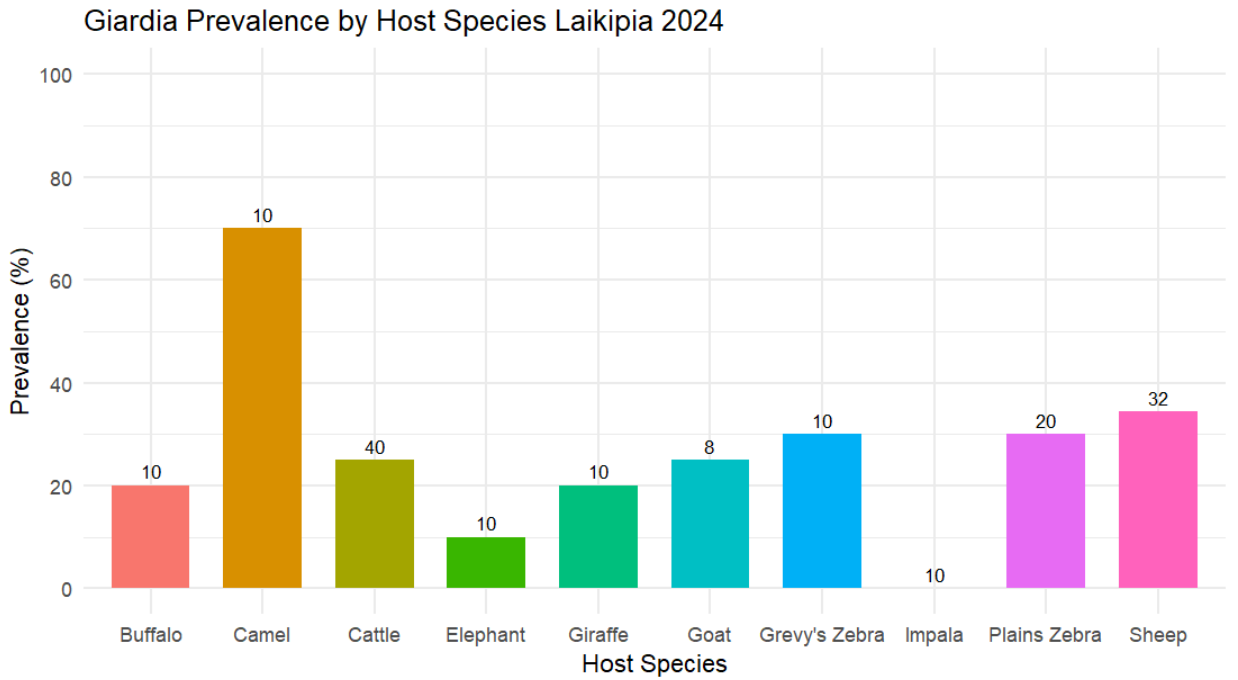
Indicator 2.1: One wildlife health surveillance system developed and tested in two areas in each case study country by end of Y2 with at least 50 users (including stakeholders involved in regional working group, and 25 local paravets).

Due to the unforeseen delays mentioned above, we plan to work towards this indicator from Q1 of Year 2. We will begin with the two focal areas in Kenya (Laikipia and Kajiado) where we currently have existing structures and relationships and then expand to the west-Kilimanjaro region bordering Kajiado in Kenya. We will be in a better position to give a more tangible assessment of progress and whether we can still cover another focal region in Tanzania as well as the two focal regions in Rwanda.

Output 3: Health burden of co-morbidity on wildlife and livestock evaluated in two areas in each case study country (Kenya, Tanzania and Rwanda using innovative tools to validate reports made using wildlife health surveillance system.

Indicator 3.1: Documentation of endemic disease burden in livestock and wildlife from two areas in each case study country

We have now evaluated ~500 samples for key water borne protozoan parasites (Giardia and Cryptosporidium). We will have screened the majority of these samples by the end of Q2 2025. We have found very high levels of infection (and coinfection) by these parasites in both wildlife and livestock.



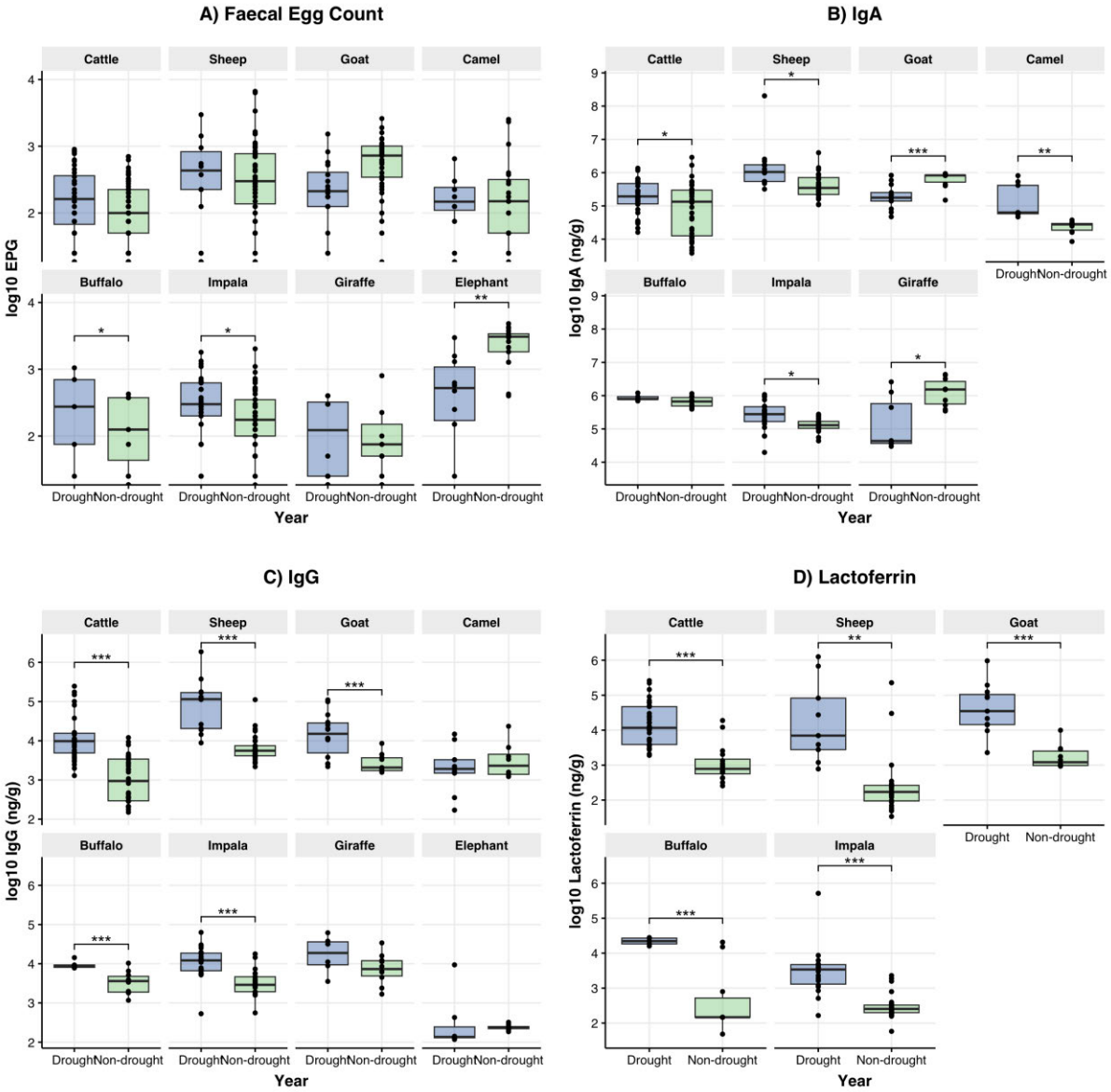
Indicator 3.1.1: Co-infection and disease burden evidence for 500 livestock from 100 households

Refer to section 2.1., Output 3

Indicator 3.1.2: Co-infection and disease burden evidence for 300 wildlife individuals

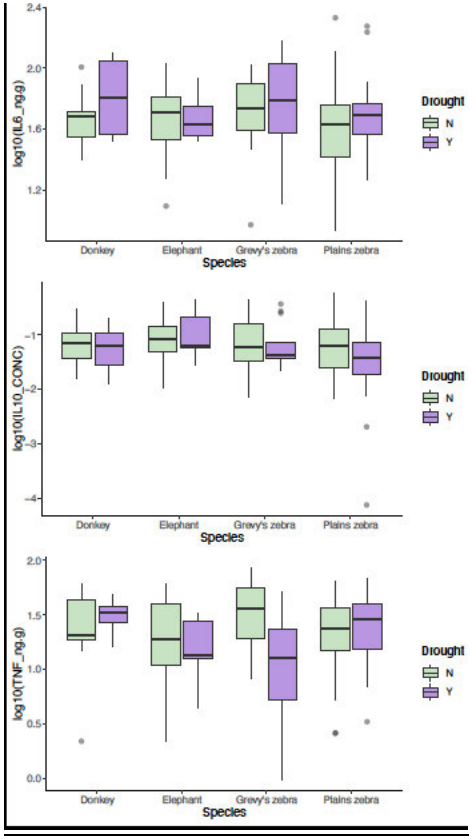
Refer to Section 2.1., Output 3

Indicator 3.1.3: Evidence of wildlife disease impacts from non-invasive profiling



We have documented immune state changes associated with drought. We have not yet completed our analyses on how these profiles relate to parasites, but initial results suggest that co-infection plays a key role in immune state.

Immunoassay results: extreme climate exacerbates the impact of endemic disease on both a) ruminants and b) equids. Note, these results are unpublished and confidential.



Output 4: Lessons learned, and best practices disseminated to policy makers, stakeholders and researchers.

Indicator 4.1. Two case studies (Kenya and Tanzania) contributing data and insights into a multilateral Environmental Agreements and one scoping exercise for scaling and capacity building (Akagera).

These are scheduled for the last two quarters in year 2 and are on track with analysis of pathogen screening data from wildlife and livestock and will be on track once we set up the community animal health monitoring networks in the first two quarters of year 2.

Indicator 4.2: Two best practice guides on innovative approaches to animal health monitoring (involving community reporting and immunology screening) endorsed by the regional working group.

Note: One guide will be a minimally technical document in Swahili for para-vets. One guide will be aimed at community members and will be written in an easily accessible style and translated into Swahili, Maa and Kinyarwanda.

Output 5: A multilateral framework for improved animal health monitoring in East Africa

Indicator 5.1: One technical report for government and non-government stakeholders involved in regional health surveillance in East Africa.

The report will be compiled at the end of the project based on all the data collected and samples analysed.

2.3 Progress towards the project Outcome

Project outcome: Regional network of wildlife and livestock veterinarians and conservation stakeholders established, with improved capacity for research and surveillance on wildlife health and capable of providing evidence-based guidance on wildlife health.

Indicator 0.1 One regional working group involving 20 stakeholders from Kenya, Tanzania and Rwanda is active by end of Y2 and meeting on a regular basis to research, monitor and provide and guidance on wildlife health surveillance.

By achieving the inception workshop in October 2024, the training workshop in March 2025, and with the planned activities in year 2, the project will be on track to put together a working group involving 20 stakeholders from Kenya, Tanzania, and Rwanda.

2.4 Monitoring of assumptions

Assumption 1: *Stakeholders selected to participate in the regional working group remain in position*
Status: This assumption holds. All members of the regional working group have remained in their respective positions throughout Year 1, ensuring continuity in engagement and coordination.

Assumption 2: ECR Individuals selected to join training sessions will be in the position to apply training. Both trainers and trainees are able to adaptively assess baseline understanding and modify the course (up or down) to be most informative.

Status: This assumption held true. Participants were selected based on a transparent matrix that prioritised professional alignment with wildlife, livestock, and conservation work. This ensured both relevance and opportunity for skill application (Annex 4, Supplementary material 3).Training needs were matched with individual profiles, and trainers adjusted delivery accordingly. Annex 4, Supplementary material 3 provides supporting quotes and evidence of training relevance and applicability.

Assumption 3: Samples from livestock and wildlife can be obtained. Communities will be willing to have livestock sampled.

Status: This assumption held. We successfully collected approximately 1,800 samples from wildlife and livestock across six communities and protected areas in Kenya and Tanzania. Community willingness to participate was strong, aided by established relationships and community engagement protocols.

Assumption 4: Team members will be able to accurately and sensitively identify infectious. This screening must be done in a timely manner and results fed back to owners.

Status: We are yet to fully test this assumption. We are currently screening samples and will look to collect additional samples from syndromic animals. By the end of Quarter 2 of year 2, we should have sufficient results to evaluate how well we can identify infection and disease burden from biomarkers.

Assumption 5: Enough samples are collected and analysed to provide sufficient evidence to underpin case studies

Status: We have collected sufficient samples in year 1 to address the immunoassay aspects. In year two we will concentrate on increasing interviews and health data to relate our findings to independent assessment of disease prevalence.

Assumption 6: That all team members remain engaged with the project through to the point of producing a final report and engaging with policy teams at a multilateral level

Comments: We will only be able to comment on this assumption at the end of the project.

2.5 Impact: achievement of positive impact on biodiversity and multidimensional poverty reduction

Intended Impact (as per original application):

The project aims to contribute to the establishment of a regional working group to mitigate health risks for animals and people through innovative research and wildlife health monitoring, and to inform regional animal health policy.

Contribution to Biodiversity Conservation:
While the long-term impact on biodiversity cannot be fully assessed within the project lifetime, this initiative contributes to biodiversity conservation by piloting a scalable, community-based wildlife health surveillance model. The model integrates existing community animal health networks, ethnoveterinary knowledge, and novel, non-invasive eco-immunology tools to detect disease threats early. This approach has the potential to reduce wildlife morbidity and mortality from endemic infections, thereby enhancing the resilience of key wildlife populations.

Contribution to Human Development and Wellbeing (Poverty Reduction):

The project supports poverty reduction by protecting livestock health and, consequently, the livelihoods and food security of pastoral and agro-pastoral communities living along the wildlife-livestock interface. Reduced livestock loss contributes to sustained income, cultural continuity, and household resilience. In the short term, 24 early-career and mid-level professionals from Kenya, Tanzania, and Rwanda have been trained in integrated disease monitoring techniques. Feedback from these participants highlights improved capacity to respond to animal health threats, which in turn supports both animal and human wellbeing in these regions (Annex 4, Supplementary material 3)

3. Project support to the Conventions, Treaties or Agreements

During the reporting period, the project has contributed to several national and international policy frameworks relevant to biodiversity conservation, public health, and sustainable development.

By generating data on zoonotic parasites in livestock (see section 2.2., Output 3), the project highlights key areas for infection prevention and control of community-acquired infections—an essential component of AMR containment. This aligns with national and global priorities to reduce antibiotic use through improved disease prevention strategies.

The project contributes directly to the World Organisation for Animal Health (WOAH) Wildlife Health Framework (2021), under the objective of "Protecting Wildlife Health to Achieve One Health." Specifically, the data support increased understanding of infectious disease threats to wild species and potential zoonoses involving wildlife. Field observations, laboratory diagnostics, and immunological profiles generated through the project add to the regional knowledge base and can inform future regional health surveillance strategies.

Kenya, Tanzania, and Rwanda are signatories to the CBD. This project supports the CBD’s targets by strengthening national capacity in wildlife disease surveillance and by building technical skills relevant to biodiversity monitoring. The training of 26 stakeholders from key wildlife and animal health institutions

in eco-immunology and disease surveillance methods (Annex 4, Supplementary material 3) directly contributes to Article 12 on Research and Training and Article 18 on Technical and Scientific Cooperation.

While no formal meetings were held with Convention focal points during the reporting period, project partners have ongoing institutional relationships with national veterinary services and wildlife authorities. Plans are underway to share preliminary results with relevant ministries and Convention focal point representatives during the second year of implementation, in alignment with national reporting timelines.

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4. Project support for multidimensional poverty reduction

This project contributes to multidimensional poverty reduction by strengthening the capacity of wildlife and animal health practitioners, conservationists, and early-career researchers from Kenya, Rwanda, and Tanzania. These professionals serve communities living at the wildlife-livestock-human interface—areas often characterised by high vulnerability to zoonotic disease, livestock losses, and environmental degradation, all of which contribute to chronic poverty.

Expected Beneficiaries and Community Engagement

The primary beneficiaries are rural pastoral and agro-pastoral communities that depend on livestock for food security and income. These communities are also at heightened risk of exposure to zoonotic pathogens due to their proximity to wildlife. The project engaged local stakeholders through an inception workshop, which brought together representatives from government agencies, non-governmental organisations (NGOs), and academic and research institutions. Participants identified gaps in current surveillance systems and contributed to defining priority pathogens and surveillance strategies. This ensured alignment between project activities and local needs, including the integration of indigenous knowledge in disease detection and control.

Direct and Indirect Poverty Impacts

In the short term, the project has contributed to increased human capital through training. In Year 1, 26 individuals from Kenya, Rwanda, and Tanzania, representing multiple institutions engaged in animal and wildlife health, received hands-on training in participatory epidemiology, eco-immunology, and molecular tools for pathogen surveillance. Pre- and post-training assessments demonstrated measurable improvements in knowledge and confidence Annex 4, Supplementary material 3) These skills are already being applied in their respective institutions and roles, directly contributing to better health outcomes for livestock and, by extension, community livelihoods.

The training also created opportunities for longer-term personal development. Two participants were supported to apply for PhD programmes at the University of Manchester—one in the Faculty of Science and Engineering, and another at the Global Development Institute. These opportunities are expected to enhance their capacity to contribute meaningfully to both biodiversity conservation and poverty alleviation within their home countries.

Long-Term Contribution and Global Public Good

The project serves as a proof of concept for a low-cost, scalable approach to wildlife-livestock disease surveillance. By integrating non-invasive eco-immunology tools, ethnoveterinary knowledge, and community animal health networks, the project contributes to global understanding of how disease monitoring can be expanded in resource-limited contexts. Over time, improved surveillance is expected to reduce livestock losses, enhance food and income security, and protect biodiversity by reducing undiagnosed disease outbreaks in wildlife.

Notable Achievements in Year 1

- Formation of a regional working group of 31 members, actively contributing to shared surveillance goals.
- Successful delivery of regional training for 26 professionals across three countries.
- Inception workshop involving local government, NGO, and academic stakeholders to co-develop surveillance priorities.
- Support for two early-career researchers to pursue advanced training through PhD applications.

In summary, the project contributes both directly and indirectly to poverty reduction by enhancing surveillance systems that protect livestock-dependent livelihoods, strengthening professional capacity in underserved areas, and advancing the knowledge base for regional and global benefit.

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5. Gender Equality and Social Inclusion (GESI)

GESI Scale	Description	Put X where you think your project is on the scale
Not yet sensitive	The GESI context may have been considered but the project isn't quite meeting the requirements of a 'sensitive' approach	
Sensitive	The GESI context has been considered and project activities take this into account in their design and implementation. The project addresses basic needs and vulnerabilities of women and marginalised groups and the project will not contribute to or create further inequalities.	X
Empowering	The project has all the characteristics of a 'sensitive' approach whilst also increasing equal access to assets, resources and capabilities for women and marginalised groups	
Transformative	The project has all the characteristics of an 'empowering' approach whilst also addressing unequal power relationships and seeking institutional and societal change	

Justification for Assessment:

The project currently meets the criteria for a **GESI Sensitive** approach. The GESI context was considered during project design and implementation, particularly in relation to the division of roles, local stressors, inclusion of marginalised voices, and equitable access to training and resources. The project

addresses basic needs and seeks to reduce the risk of exacerbating existing inequalities, particularly for women, early-career researchers, and communities living in vulnerable pastoralist systems.

Key Actions and Evidence Supporting GESI Sensitivity:

- **Representation and Participation:**
  In the inception and training workshops held this year, we actively tracked gender representation. For example, the training held in Arusha, Tanzania, included 12 women out of 26 participants (46%), ensuring women's participation was deliberate and meaningful. Early-career researchers were a priority group, and participants were drawn from a range of institutions to ensure diversity in terms of age, gender, and institutional background. Representation also included stakeholders from historically marginalised communities, such as pastoralist populations living at the wildlife-livestock interface.
- **Practice and Customary Norms:**
  The project recognises the value of indigenous knowledge in shaping wildlife-livestock health surveillance priorities. By incorporating participatory epidemiology into the Arusha training (dedicated session), participants learned inclusive approaches to gathering animal health intelligence that acknowledge local roles, perceptions, and traditional responsibilities in animal care. Of those trained, 19 out of 21 indicated that they would incorporate participatory epidemiology into their ongoing or future projects Annex 4, Supplementary material 3)
- **Environment and Vulnerability:**
  Project activities are focused in ecologically and economically vulnerable areas where communities are affected by disease transmission across species. In these settings, loss of livestock disproportionately affects women and children. By working to strengthen disease surveillance capacity, the project contributes to reducing economic shocks related to livestock health, thereby indirectly benefiting household-level well-being.
- **Resources and Roles:**
  The project supports inclusive capacity building by ensuring equal access to training opportunities and by supporting applications for higher education. Two participants from marginalised backgrounds were supported to apply for PhD programmes, which—if successful—will enhance long-term inclusion in research and policy spaces.

Lessons Learned and Challenges:
While gender balance was proactively addressed, we recognise the need to go beyond numeric representation to ensure all voices—particularly those from underrepresented social identities—are heard in technical discussions and decision-making processes. We aim to strengthen facilitation approaches in Year 2 workshops to ensure more equitable participation during group work and feedback sessions.

In summary, while the project is currently GESI Sensitive, we will continue working toward greater empowerment and inclusivity by deepening our engagement with women and marginalised communities, including pastoralist groups, and by supporting their active participation in both local and regional animal health surveillance systems.

6. Monitoring and evaluation

The project lead is responsible for overall monitoring and evaluation (M&E), which is being coordinated by the recently hired PDRA/Project Manager. As this was the first year of implementation, much of the focus has been on initiating activities, onboarding new staff, and finalising collaborative agreements with

partners. These early-stage challenges (as noted in the half-year report) limited the ability to assess long-term change, but progress has been made on initial outputs, and systems are now in place to improve monitoring moving forward.

One indicator of achievement is the successful delivery of the inception workshop, which has resulted in a co-authored perspective article currently in development for submission to a peer-reviewed journal (Annex 4, Supplementary material 1). For the training workshop targeting early-career researchers, indicators of achievement include improvements in pre- and post-workshop self-assessment scores, as well as the use of a structured selection matrix to ensure participants were in roles where they could immediately apply the knowledge gained. Many participants work in wildlife or domestic animal health, research, conservation, or teaching, and are well-placed to integrate these skills into their daily work Annex 4, Supplementary material 3)

Throughout Year 1, the project lead maintained close and regular communication with country leads, typically through monthly updates. More intensive engagement occurred during key activities, such as the October 2024 inception workshop and the March 2025 training. Since joining the project, the PDRA/Project Manager has also been meeting weekly with the project lead to support coordination and planning.

Now that staffing and partner coordination have stabilised, the project will adopt a more structured M&E approach in Year 2, including:

1. **Progress Review in May:** We will assess achievements against the logframe and make adjustments to prioritise delayed milestones.
2. **Monthly Zoom Check-ins:** The project manager will hold monthly calls with project staff to flag delays or operational issues early.
3. **Quarterly Partner Coordination Meetings:** These will include:
    - A brief written summary of progress (Part 1), circulated to all partners
    - A longer Zoom meeting (Part 2), open to all partners, for more in-depth review and discussion
      The project manager will prepare agendas and minutes for all meetings. All key documents will be stored in a shared Dropbox folder accessible to the leadership team (UoM researchers, the project manager, and country leads).
4. **Quarterly Budget Reviews:** These will help ensure expenditure remains aligned with the budget and that any variances are addressed promptly.

In summary, while Year 1 focused on foundational work and initial implementation, the systems now in place will allow for more robust monitoring, adaptive planning, and evidence-based reporting in Year 2

7. Lessons learnt

What worked well and what didn't:
Engagement with individual stakeholders was successful, and overall buy-in to the project was high. However, establishing a fully functioning regional network has progressed more slowly than anticipated. Managing an ODA-funded project through the university has presented logistical challenges, particularly due to differing expectations and timelines between UK and international partners regarding reporting, reimbursements, and contract processing. The delayed recruitment of key staff contributed to setbacks in delivering reports and meeting some Year 1 milestones.

What we would do differently:
If repeating this process, we would simplify the project structure and retain more of the budget centrally to minimise delays related to payments and contracting. We would also define partner roles more clearly and communicate University of Manchester accounting procedures—including reimbursement processes and budgetary constraints—at the outset. Early agreement on budget management between UoM and implementing partners would help prevent misunderstandings and delays.

Recommendations to others working in similar contexts:
A thorough understanding of the costs and administrative procedures associated with participant involvement (e.g. delegate travel, per diems, and contract types) would support better budgeting and more efficient project management.

How this learning will be applied:
Planning for Workshop 3 will begin earlier, with clear expectations set for all participants in advance. Roles, timelines, and procedures will be clarified to reduce ambiguity and ensure smoother delivery.

Changes planned as a result of learning:
Yes, we intend to submit a formal Change Request for Year 2 to address budget overspends incurred during Year 1 and to realign financial planning with revised activity timelines

8. Actions taken in response to previous reviews (if applicable)

Feeback received when our project was funded was addressed in our half-year report.

9. Risk Management

New risks identified:
A key financial risk emerged during the reporting period related to underbudgeting for certain project components. While overall budgeting was carefully considered during the proposal stage, some unavoidable and unforeseen costs have necessitated a reassessment of planned Year 2 activities to ensure continued alignment with available resources.

Adaptations to project design:
No major changes have been made to the overall project design in Year 1 in response to emerging risks. However, adjustments will be made to upcoming workplans to manage resource use more efficiently in Year 2.

Next steps:
A revised risk register reflecting this updated financial consideration will be submitted alongside this Annual Report, as required by the Darwin Initiative.

10. Scalability and durability

The project has been designed with sustainability in mind, ensuring that key components—such as the regional working group and training approaches—can be maintained or scaled with minimal additional resources.

Durability of Achievements:

The regional working group has been established as a collaborative platform for cross-country engagement in wildlife health surveillance. Its virtual nature allows for ongoing coordination without significant financial input. However, we acknowledge that sustaining consistent engagement over time—particularly where there are competing professional demands—may require us to explore non-financial incentives such as co-authorship on publications, professional development opportunities, or formal recognition of contributions.

Although the initial training in Tanzania required investment, group members are now equipped to replicate key components in their own institutions, extending the training's impact at low cost Annex 4, Supplementary material 3). In Year 2, the project will also pilot a wildlife health reporting system using WhatsApp—a tool widely accessible across the region and already used for similar surveillance purposes. While implementation is pending, its low infrastructure requirements make it a promising, sustainable option.

Scalability Potential:

The project offers several pathways for scale:

1. **Geographic Scaling (Landscape):**
   The working group model is adaptable and could be expanded beyond the three initial countries to a broader regional platform.
2. **Capacitation Scaling:**
   The training curriculum, combined with a 'train-the-trainer' approach, can be delivered by working group members to additional cohorts, multiplying capacity over time.
3. **Systems Change Scaling:**
   The wildlife reporting model, if effective, could be adopted and formalised by national or regional authorities, contributing to long-term improvements in wildlife health monitoring systems.

Stakeholder Engagement and Incentives:

Stakeholders from government, academia, and local conservation organisations have been actively engaged. The project's alignment with existing responsibilities and institutional priorities has helped secure early buy-in. However, as the project moves beyond the funded period, we recognise the need to think strategically about how to maintain momentum—particularly among working group members whose ongoing contributions may not be directly compensated.

Exit Strategy and Progress:

The original exit plan focused on leaving behind strengthened capacity, low-cost surveillance tools, and a functional regional network. Key progress has been made in Year 1, and Year 2 will prioritise embedding the reporting system, expanding training opportunities, and co-developing outputs that support continued engagement and visibility.

Risks and Mitigation:

Limited funding for future scale-up remains a risk, especially in relation to sustaining voluntary participation. This will be partially addressed through the use of cost-effective technologies and by seeking creative ways to align engagement with professional goals and academic recognition.

11. Darwin Initiative identity

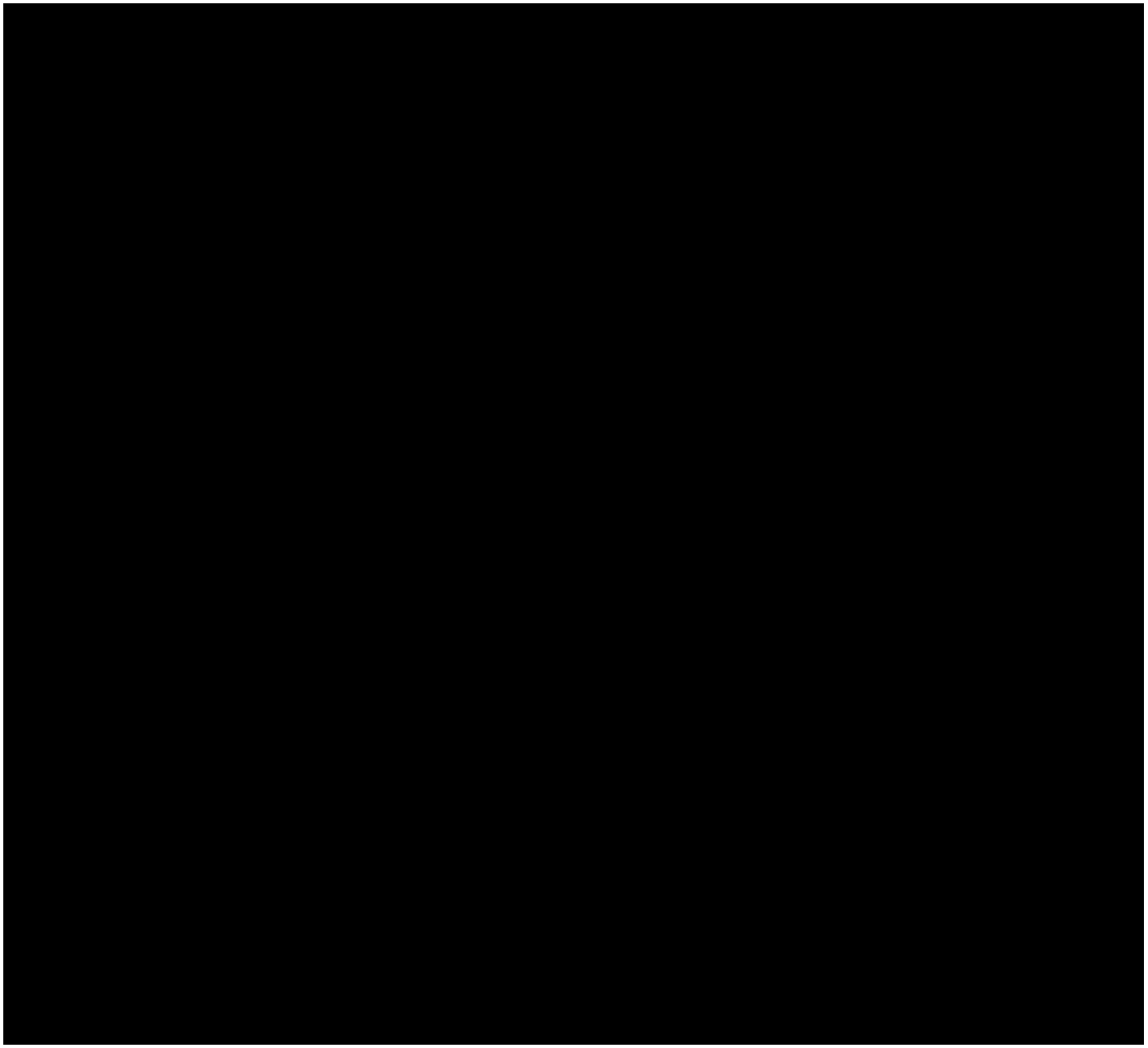
In both major project activities conducted this year—the inception workshop and the regional training—efforts were made to clearly acknowledge and publicise Darwin Initiative funding. All presentation materials included the Darwin Initiative logo.

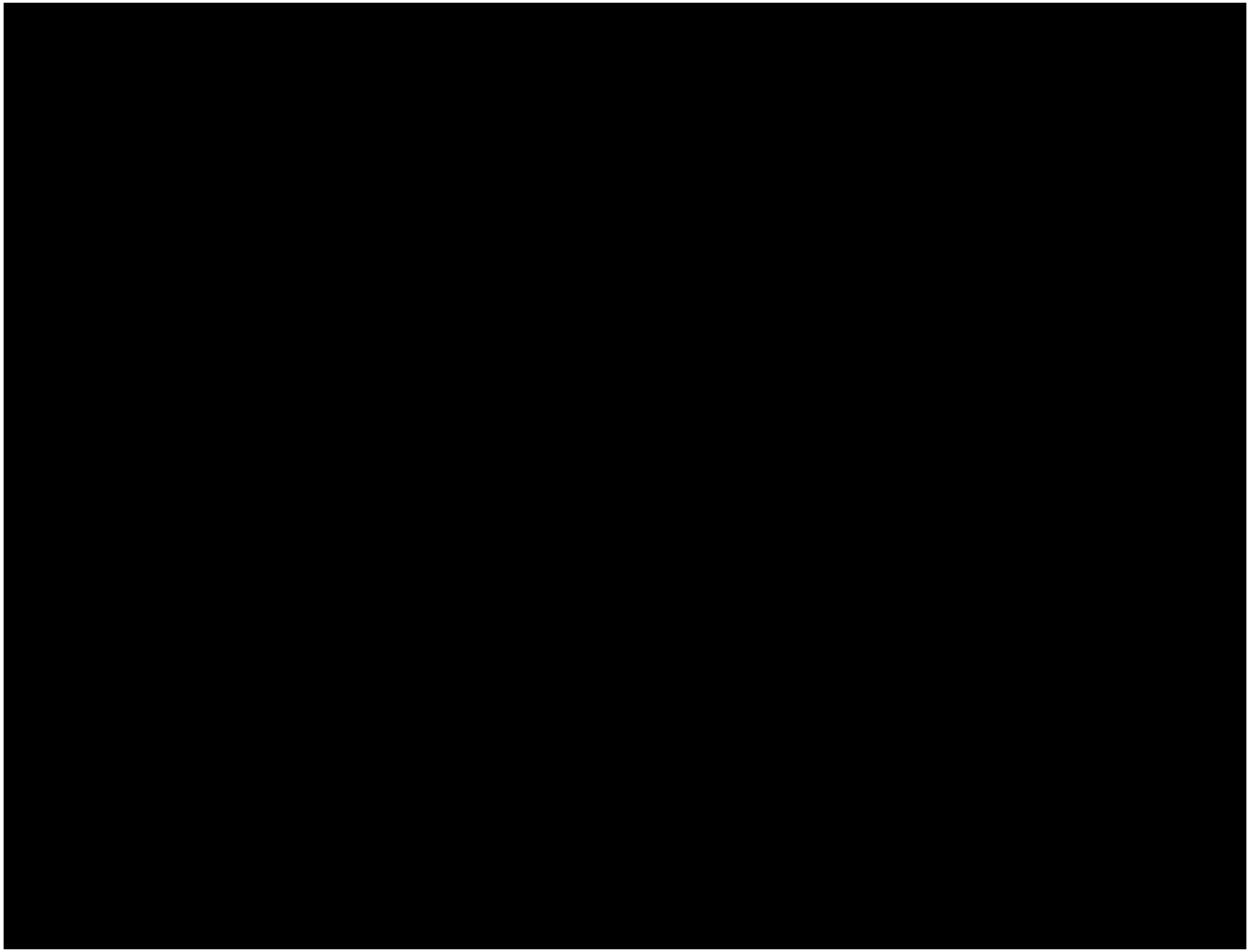
The project has promoted the Darwin Initiative as a distinct fund supporting targeted research and capacity building in biodiversity and health surveillance. Although the project operates in alignment with broader institutional goals, the Darwin Initiative funding has been presented as a standalone project with its own objectives, identity, and reporting requirements.

In terms of awareness within the host countries (Kenya, Tanzania, and Rwanda), understanding of the Darwin Initiative is still developing, but growing. Project stakeholders—including government partners, veterinary services, and academic institutions—have been introduced to the Darwin Initiative during meetings and trainings. It is likely that individuals directly engaged with the project (e.g. workshop participants and institutional collaborators) are most familiar with the Initiative at this stage.

The project does not yet have a dedicated social media presence but plans to increase visibility during Year 2 through institutional channels and by linking to Darwin Initiative and Biodiversity Challenge Fund (BCF) content via relevant platforms such as LinkedIn and Twitter/X. Future posts will include appropriate tagging and references to ensure greater recognition of UK Government support and project outcomes

12. Safeguarding





13. Project expenditure

Table 1: Project expenditure during the reporting period (1 April 2024 – 31 March 2025)

Project spend (indicative) since last Annual Report	2024/25 Grant (£)	2024/25 Total Darwin Initiative Costs (£)	Variance %	Comments (please explain significant variances)
Staff costs (see below)	[redacted]			
Consultancy costs				
Overhead Costs				
Travel and subsistence				
Operating Costs				
Capital items (see below)				
Others (see below)				
TOTAL	87673	84783	3.41	

We discussed the staffing underspend. However, we did not discuss increasing the number of workshop participants from 15 to 26. This activity occurred in Q4- we had predicted to stay within budget until we had unexpected interest, with high quality applicants, near the end of the reporting period.

Table 2: Project mobilised or matched funding during the reporting period (1 April 2024 – 31 March 2025)

	Secured to date	Expected by end of project	Sources
Matched funding leveraged by the partners to deliver the project (£)	[redacted]	[redacted]	UoM and UKRI studentship.

Total additional finance mobilised for new activities occurring outside of the project, building on evidence, best practices and the project (£)	[redacted]	[redacted]	ISPF and UoM UoM PhD project to be allocated to increase capacity for the project activities.

14. Other comments on progress not covered elsewhere

NA

15. OPTIONAL: Outstanding achievements or progress of your project so far (300-400 words maximum). This section may be used for publicity purposes

I agree for the Biodiversity Challenge Funds to edit and use the following for various promotional purposes (please leave this line in to indicate your agreement to use any material you provide here).

Annex 1: Report of progress and achievements against logframe for Financial Year 2024-2025

Project summary	Progress and Achievements April 2024 - March 2025	Actions required/planned for next period
Impact A regional working group established to mitigate health risks for animals and people using innovative approaches to research and wildlife health and inform regional animal health policy	A regional working group has been established, comprising thirteen members from key institutions, including the Shared Landscapes Research Group at the University of Manchester, the University of Rwanda, the Tanzania Wildlife Research Institute (TAWIRI), Tanzania National Parks (TANAPA), the Wildlife Research and Training Institute (WRTI), the Ministry of Agriculture and Livestock in Kenya, the Food and Agriculture Organization (FAO), the University of Pretoria, African Parks Rwanda, the Tanzanian Ministry of Livestock and Fisheries, and the International Livestock Research Institute (ILRI) in Kenya. Following a regional training workshop held in Arusha for early career researchers and practitioners, plans are underway to expand the working group by recruiting at least seven additional members from among the workshop participants.	[redacted]

Outcome Regional network of wildlife and livestock veterinarians and conservation stakeholders established, with improved capacity for research and surveillance on wildlife health and capable of providing evidence-based guidance on wildlife health.		
Outcome indicator 0.1 One regional working group involving 20 stakeholders from Kenya, Tanzania and Rwanda is active by end of Y2 and meeting on a regular basis to research, monitor and provide and guidance on wildlife health surveillance	A regional working group has been established, comprising thirteen members from institutions across Kenya, Tanzania, Rwanda, and international partners. Members represent the Shared Landscapes Research Group (University of Manchester), University of Rwanda, Tanzania Wildlife Research Institute (TAWIRI), Tanzania National Parks (TANAPA), Wildlife Research and Training Institute (WRTI), Ministry of Agriculture and Livestock (Kenya), Food and Agriculture Organization (FAO), University of Pretoria, African Parks Rwanda, Tanzanian Ministry of Livestock and Fisheries, and the International Livestock Research Institute (ILRI). Evidence provided in Section 3.1 and Annex 4..	The project will expand the regional working group by recruiting at least seven additional members from among participants who attended the regional training workshop held from 26–28 March 2025 in Arusha.
Output 1 Regional working group established, and stakeholders of group trained in innovative disease monitoring techniques.		
Output indicator 1.1 1 regional working group established	A regional working group has been established, comprising thirteen members from institutions across Kenya, Tanzania, Rwanda, and international partners. Members represent the Shared Landscapes Research Group (University of Manchester), University of Rwanda, Tanzania Wildlife Research Institute (TAWIRI), Tanzania National Parks (TANAPA), Wildlife Research and Training Institute (WRTI), Ministry of Agriculture and Livestock (Kenya), Food and Agriculture Organization (FAO), University of Pretoria, African Parks Rwanda, Tanzanian Ministry of Livestock and Fisheries, and the International Livestock Research Institute (ILRI). Evidence provided in Section 3.1 and Annex 4..	The project will expand the regional working group by recruiting at least seven additional members from among participants who attended the regional training workshop held from 26–28 March 2025 in Arusha.
Output indicator 1.2, Minimum of 20 stakeholders from Kenya, Tanzania and Rwanda (including at least 8 women) involved in 2 weeks of training in eco-	A three-day, master's-level workshop was delivered, engaging 26 participants (12 women, 14 men) from 19 organizations involved in wildlife, livestock health, and conservation across Kenya, Rwanda, and Tanzania. The training covered eco-immunology, population genetics, and	NA

immunology, population genetics and using traditional ethnoveterinary knowledge by end of Y2	ethnoveterinary knowledge. Evidence provided in Sections 3.1 and 3.2 and Annex 4 [redacted]	
Output indicator 1.3. Minimum of 10 organisations responsible for animal health in Kenya, Tanzania and Rwanda with improved staff capability and capacity as a result of project by end of Y2.	The Arusha workshop engaged representatives from 19 organizations: 10 from Tanzania, 5 from Kenya, and 4 from Rwanda. Pre- and post-workshop self-assessments showed improvements in mean learning outcomes: from 2.7 to 4.5 in community-based participatory epidemiology, 2.5 to 4.3 in ecological immunology, and 2.0 to 3.7 in population genetics and molecular epidemiology (5-point Likert scale). Additionally, 90.5%, 85.7%, and 71.4% of participants respectively indicated plans to apply participatory epidemiology, ecological immunology, and population genetics and molecular epidemiology concepts in their work. Evidence provided in Section 3.2 and Annex 4 (Supplementary Material XX).	The project will recruit seven members from the training cohort into the regional working group, ensuring representation from diverse organizations across Kenya, Tanzania, and Rwanda. Continuous engagement through project activities will further strengthen the capacity of these strategically positioned individuals.
Output 2. System for monitoring wildlife health tested in two areas in each case study country (Kenya, Tanzania and Rwanda) involving members of regional working group and para-vets		
Output indicator 2.1. Wildlife health surveillance system developed and tested in two areas in each case study country by end of Y2 with at least 50 users (including stakeholders involved in regional working group, and 25 local paravets).	Implementation of activities contributing to this output was delayed due to recruitment challenges for the project manager. As a result, development and testing of the wildlife health surveillance system was not initiated within the original timeframe. Evidence provided in Section 3.2	The project will initiate development and testing of the wildlife health surveillance system in Kajiado and Laikipia (Kenya), followed by the West Kilimanjaro region (Tanzania). Further expansion to other areas will depend on available time and resources.
Output 3. Health burden of co-morbidity on wildlife and livestock evaluated in two areas in each case study country (Kenya, Tanzania and Rwanda using innovative tools to validate reports made using wildlife health surveillance system		
Output indicator 3.1. Documentation of endemic disease burden in livestock and wildlife from two areas in each case study country including: 3.1.1. Co-infection and disease burden evidence for 500 livestock from 100 households 3.1.2. Co-infection and disease burden evidence for 300 wildlife individuals	Activities supporting this output were brought forward to compensate for delays under Output 2. Fieldwork focused on collecting and screening samples from livestock and wildlife across three landscapes in Kenya and Tanzania. Approximately 1,500 samples were collected, with initial screening and immune state profiling completed to assess co-infection patterns and disease burden in livestock and wildlife (3.1.2) and to generate evidence of wildlife disease	The project will continue statistical analysis of the collected data and draft two articles for submission to peer-reviewed journals.

3.1.3. Evidence of wildlife disease impacts from non-invasive profiling	impacts through non-invasive profiling (3.1.3). Evidence provided in Sections 3.1 and 3.2.	
Output 4: Lessons learned, and best practices disseminated to policy makers, stakeholders, and researchers		
Output indicator 4.1. Two case studies (Kenya and Tanzania) contributing data and insights into a multilateral Environmental Agreements and one scoping exercise for scaling and capacity building (Akagera)	To be implemented in Year 2	Activity 4.1 – 4.3
Output indicator 4.2. Two best practice guides on innovative approaches to animal health monitoring (involving community reporting and immunology screening) endorsed by the regional working group.	To be implemented in year 2	Activity 4.1 – 4.3
Output indicator 4.3. One published case study from each case study country (Kenya, Tanzania, Rwanda)	To be implemented in year 2	Activity 4.1 – 4.3
Output 5: A multilateral framework for improved animal health monitoring in East Africa		
Output indicator 5.1. One technical report for government and non-government stakeholders involved in regional animal health surveillance in East Africa	To be implemented in year 2	Activity 5.1.

Annex 2: Project's full current logframe as presented in the application form (unless changes have been agreed)

Project summary	SMART Indicators	Means of verification	Important Assumptions
Impact: A regional working group established to mitigate health risks for animals and people using innovative approaches to research and wildlife health and inform regional animal health policy			
Outcome: Regional network of wildlife and livestock veterinarians and conservation stakeholders established, with improved capacity for research and surveillance on wildlife health and capable of providing evidence-based guidance on wildlife health	0.1 One regional working group involving 20 stakeholders from Kenya, Tanzania and Rwanda is active by end of Y2 and meeting on a regular basis to research, monitor and provide and guidance on wildlife health surveillance	0.1 Correspondence files; meeting minutes; resources produced for policymakers	Stakeholders selected to participate in regional working group remain in position
Output 1 Regional working group established and stakeholders of group trained in innovative disease monitoring techniques	1.1. One regional working group established 1.2. Minimum of 20 stakeholders from Kenya, Tanzania and Rwanda (including at least 8 women) involved in 2 weeks of training in eco-immunology, population genetics and using traditional ethnoveterinary knowledge by end of Y2 [D1-A01] 1.3 Minimum of 10 organisations responsible for animal health in Kenya, Tanzania and Rwanda with improved staff capability and capacity as a result of project by end of Y2 [D1-A03]	1.1 Meeting minutes from regional working group meetings; attendance records 1.2 Attendance records and workshop documentation 1.3 Virtual surveys completed by working group stakeholders at end of project	ECR Individuals selected to join training sessions will be in the position to apply training. Both trainers and trainees are able to adaptively assess baseline understanding and modify the course (up or down) to be most informative.
Output 2 System for monitoring wildlife health tested in two areas in each case study country (Kenya, Tanzania and Rwanda) involving members of regional working group and para-vets	2.1 One wildlife health surveillance system developed and tested in two areas in each case study country by end of Y2 with at least 50 users (including stakeholders involved in regional working gr	2.1 Records from wildlife health surveillance system	Samples from livestock and wildlife can be obtained. Communities will be willing to have livestock sampled.
Output 3 Health burden of co-morbidity on wildlife and livestock evaluated in two areas in each case study country (Kenya,	3.1 Documentation of endemic disease burden in livestock and wildlife from two areas in each case study country [DID18] including:	3.1 1 dataset 3.1 2 peer review journal articles submitted	Team members will be able to accurately and sensitively identify infectious. This screening must be done

Tanzania and Rwanda using innovative tools to validate reports made using wildlife health surveillance system	3.1.1 Co-infection and disease burden evidence for 500 livestock from 100 households [DI-B04] 3.1.2 Co-infection and disease burden evidence for 300 wildlife individuals [DI-D18] 3.1.3 Evidence of wildlife disease impacts from non-invasive profiling [DI-E03]	3.1.3 Statistical analyses of ELISA results coupled with PCR screening that evaluate potential relatioships	in a timely manner and results fed back to owners.
Output 4 Lessons learned and best practices disseminated to policy makers, stakeholders and researchers.	4.1 Two case studies (Kenya and Tanzania) contributing data and insights into a multilateral Environmental Agreements and one scoping exercise for scaling and capacity building (Akagera) [DI- C05] 4.2 Two best practice guides on innovative approaches to animal health monitoring (involving community reporting and immunology screening) endorsed by the regional working group. [DI- C01] Note: One guide will be a minimally technical document in Swahili for para-vets. One guide will be aimed at community members and will be written in an easily accessible style and translated into Swahili, Maa and Kinyarwanda. 4.3 One published case study from each case study country (Kenya, Tanzania, Rwanda). [DI-C10]	4.1 Published case studies 4.2 Published best practice guides 4.3 Publications in peer reviewed or grey literature	Enough samples are collected and analysed to provide sufficient evidence to underpin case studies.
Output 5 A multilateral framework for improved animal health monitoring in East Africa	5.1 One technical report for government and non-government stakeholders involved in regional animal health surveillance in East Africa [DI-C05]	5.1 Published report	That all team members remain engaged with the project through to the point of producing a final report and engaging with policy teams at a multilateral level.

Activities (each activity is numbered according to the output that it will contribute towards, for example 1.1, 1.2 and 1.3 are contributing to Output 1)

1.1 Invite key stakeholders to join working group and hold inception workshop at WRTI Naivasha, Kenya to share paravet capacity across the region and required evidence to develop functional regional wildlife-livestock health agenda.

1.2 Hold 2-week training workshop in Arusha, Tanzania for early career researchers and team members associated with the working group.

1.3 Conduct surveys to assess capacity change as a result of project

2.1.1 Establish network of para-vets in each of two focal areas through visits by team leaders

2.1.2 Implement and test system for monitoring wildlife health with regional working group members and paravets

3.1 Validate reports made using wildlife health surveillance system by: Conducting interviews with community members to establish traditional understanding of diseases, transmission routes and frequency of outbreaks Measuring disease burden in livestock and wildlife. Analysing evidence of wildlife disease impacts from non-invasive profiling

4.1 Collate and feedback data and results from each pilot study.

4.2 Share results and good practice guides with key stakeholders, including participating communities

4.3 Published case studies from each landscape.

5.1 Hold wrap up meeting with team members to share results and draft outline of technical report

Checklist for submission

	Check
Different reporting templates have different questions, and it is important you use the correct one. Have you checked you have used the **correct template** (checking fund, scheme, type of report (i.e. Annual or Final), and year) and **deleted the blue guidance text** before submission?	X
Is the report less than 10MB? If so, please email to BCF-Reports@niras.com putting the project number in the Subject line.	X
Is your report more than 10MB? If so, please consider the best way to submit. One zipped file, or a download option is recommended. We can work with most online options and will be in touch if we have a problem accessing material. If unsure, please discuss with BCF-Reports@niras.com about the best way to deliver the report, putting the project number in the Subject line.	
Have you included means of verification? You should not submit every project document, but the main outputs and a selection of the others would strengthen the report.	X
Have you provided an updated risk register? If you have an existing risk register you should provide an updated version alongside your report. If your project was funded prior to this being a requirement, you are encouraged to develop a risk register.	X
If you are submitting photos for publicity purposes, do these meet the outlined requirements (see section 16)?	X
Have you involved your partners in preparation of the report and named the main contributors	X
Have you completed the Project Expenditure table fully?	X
Do not include claim forms or other communications with this report.	