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NEWS OF THE MONTH - MAY 2026

Dear Readers,

Spring is in full swing across Europe, and the rhythm of conference season, summer schools, and grant deadlines has picked up considerably. This May edition of the FESTMIH News of the Month brings together a dense package of opportunities for the months ahead, from a five-day window to apply for fully-funded summer school places, through six conferences and short courses spanning Turin, Berlin, Singapore, Montrouge, Montréal and "online from wherever you are", to three digital resources that we think deserve a permanent bookmark.

Our Editor's Choice this month stays in the pages of Tropical Medicine & International Health and turns the spotlight on what actually happens during routine immunisation clinics in Nigeria and on why standardising vaccine communication is not a cosmetic issue but a measurable determinant of trust and uptake.

As always, NOTM is at its best when it is community-driven. If you have a call, a course, or a paper you would like to see in the June edition, please share it with us before the 10th of the month.

Warm regards,
The FESTMIH NOTM Team

TOPICS

Good News of the Month

Real-world evidence: one in eight child deaths averted by the RTS,S malaria vaccine

Editors Choice

Content and Factors Influencing Health Education in Immunisation Clinics in Nigeria

Global Career and Funding Opportunities

Wide range of international grants, fellowships, awards, and career calls

Events

Conferences, webinars, and networking opportunities

Digital

- World Bank Data
- InfoNTD



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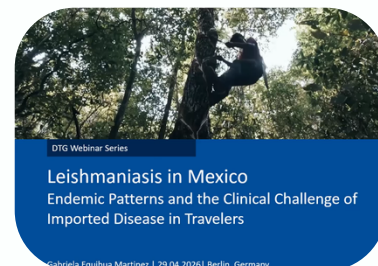
NTDS AROUND THE WORLD – MEXICO

Webinar series on demand

Organized by DTG (Working Group for NTDs) in collaboration with FESTMIH

~70 minutes · freely available on YouTube

The newest installment of the NTDs Around the World webinar series, organised by the working group for NTDs within the DTG in collaboration with FESTMIH, turns to Mexico – and to three diseases whose clinical profiles are not nearly as well known in European clinics as they should be: cutaneous leishmaniasis, chagasic cardiomyopathy, and disseminated histoplasmosis. Each is presented by an early- or mid-career clinician-researcher who bridges a Mexican and a European institution, and each talk is anchored in real patient material rather than textbook epidemiology.



[Watch this Episode](#)

The session is moderated by Dr. Antonia Walther and Dr. Anna Dornaika and features Dr. Gabriela Equihua Martínez (Charité Berlin) on the changing geography of leishmaniasis in Mexico – including a recent cluster of imported cases along the Tren Maya corridor –, Dr. Antonio Jordán Ríos (National Heart Institute, Mexico City) on the global health challenges of chagasic cardiomyopathy, and Dr. Javier José Hernández Buen Abad on disseminated histoplasmosis as an under-recognised opportunistic infection in advanced HIV. Together, the three talks make a quietly powerful case that "neglected tropical disease" is no longer a useful synonym for "stays where it started" – each of these conditions now presents with measurable frequency in European clinics, and the diagnostic pipelines in receiving countries are not always optimally tuned for them.

The Mexico session is part of an ongoing series and is freely available on the "junge DTG"s YouTube channel, alongside previous editions and further episodes planned through 2026. Readers who would like to follow upcoming webinars can subscribe to the channel directly or join the mailing list via the sign-up form below.

[YouTube Channel](#)

[Sign up for
upcoming NTD
Webinars](#)

Key information

- **Format:** recorded webinar, ~70 minutes, freely viewable on YouTube
- **Series:** NTDs Around the World, organised by the working group for NTDs within the DTG & FESTMIH
- **Topics covered:** leishmaniasis, Chagas disease, histoplasmosis (Mexico focus)
- **Future webinars:** sign-up form for the series available via the link below



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Real-world evidence:**One in eight child deaths averted by the RTS,S malaria vaccine***WHO / The Lancet - 8 May 2026*

After five years of careful follow-up, the largest real-world evaluation of a malaria vaccine to date has landed in *The Lancet* – and the headline number is the kind that public health rarely gets to write down with confidence. In Ghana, Kenya and Malawi, the three countries that introduced the RTS,S vaccine through the WHO-coordinated Malaria Vaccine Implementation Programme in 2019, around one in eight deaths among eligible young children were averted over the four-year evaluation period.

[Read Article](#)

This is not an efficacy estimate from a tightly controlled trial. It is what happened in routine immunisation clinics across thousands of communities, in children who were also using bednets or anti-malarials or neither, with all the friction of real African health systems.

The detail underneath the headline is just as encouraging. Introducing a four-dose vaccine into already-busy immunisation schedules did not displace measles or meningitis vaccination; if anything, the additional clinic contacts created opportunities to deliver other childhood interventions, from vitamin A to insecticide-treated nets. Crucially, a meaningful share of children who had previously not been sleeping under a net were reached for the first time through the vaccination programme – meaning that, for many households, RTS,S did not replace existing prevention but extended the door to it. Twenty-five African countries are now offering malaria vaccines as part of their routine programmes, with more than ten million children targeted each year.

There is, of course, a sober counterweight. Malaria still kills an estimated 438,000 African children every year, artemisinin partial-resistance has now been confirmed in four African countries, and the rollout faces a funding gap that supply alone cannot close. "Demand is high and supply is sufficient," says WHO's Dr Kate O'Brien, "but more financing is needed so that countries can purchase enough vaccine, along with other malaria prevention tools, to reach all the kids most at risk." Read the right way, this is exactly what good news in global health looks like in 2026 – not the end of a problem, but solid, peer-reviewed evidence that a hard-won tool is working at scale, and an open question about whether the rest of us are willing to pay for it to keep working.



Content and Factors Influencing Health Education in Immunisation Clinics in Nigeria

Tropical Medicine & International Health (2026).

KEY POINTS

- A qualitative study in eight immunisation clinics across Borno (north) and Cross River (south) Nigeria found that group health-education talks delivered to caregivers vary widely in length, content, and tone – both between and within the same health workers.
- Of 16 recorded talks, six (37.5%) drifted into non-vaccine topics such as breastfeeding or family planning; topic selection was driven by clinic schedules, current outbreaks, or the health worker's mood on the day.
- Most health workers reported little to no formal training on how to deliver vaccine communication; their competence rested on what they had picked up during pre-service schooling, from adjacent health programmes, or from mass-media campaigns.
- Caregivers valued the sessions but identified short, rushed talks, long overall clinic times, and occasional discourtesy as the main negative experiences; barriers that are likely to depress return visits and full-schedule completion.

Routine childhood immunisation is one of the most cost-effective public health interventions on record, yet global coverage has stagnated – particularly in low- and middle-income countries. Nigeria ranks among the ten countries with the lowest childhood vaccine uptake worldwide and contributes roughly 15% of the global population of "zero-dose" children. A central, and often underappreciated, determinant of vaccine acceptance is the moment of contact itself: what caregivers are actually told when they arrive at a clinic. While the one-on-one provider-patient conversation is the norm in most high-income settings, vaccine education in Nigeria typically takes the form of a group health-education talk, with a single health worker addressing a benches-full waiting area of parents. But what exactly is being communicated in those sessions – and how consistently?

A qualitative study by Ekhaguere and colleagues, recently published in *Tropical Medicine & International Health*, addresses precisely this gap. The research team recorded health talks across eight rural and urban immunisation clinics in Borno and Cross River states, deliberately choosing one northern and one southern context to capture the linguistic and sociocultural diversity of Nigerian primary care. To limit observer bias, half of the recordings used a "secret shopper" design, meaning that the health workers delivering those talks did not know they were being recorded. The findings amount to a quiet wake-up call. The content and delivery of the talks varied substantially – not only between different health workers, but within talks given by the same worker on different days. While many sessions covered essential vaccine topics, 37.5% drifted into adjacent areas such as family planning or breastfeeding, often at the expense of the core vaccine messages parents had come for. The structural reason was straightforward: clinic staff reported receiving virtually no formal training in group vaccine communication, and described topic selection as ad hoc – driven by the clinic's daily schedule, the current outbreak landscape, or, strikingly, by the health worker's mood on the day. There is, however, a real silver lining. The caregivers interviewed for the study consistently described the sessions as informative and valuable, and singled out two specific qualities they appreciated: health workers who spoke in local dialects and who broke complex information down into accessible language. The barriers they named were equally specific – long overall waiting times, talks that were rushed or perfunctory, and the occasional experience of being addressed discourteously.



TAKEAWAYS

- **Acknowledge LMIC Realities:** Existing training manuals from WHO and UNICEF focus heavily on one-on-one interactions or community-based household visits. However, in much of sub-Saharan Africa, clinic-based group education is the standard. We urgently need research and communication strategies tailored specifically to this group clinic setting.
- **Standardization is Key:** There is a critical need for a standardized minimum curriculum for these group talks. Core messages—such as vaccine schedules, common side effects, and their management—must be delivered consistently, without stifling the flexibility to adapt to local languages or immediate health concerns.
- **Empower and Relieve Staff:** We cannot simply blame overworked primary care staff for a lack of training. Health systems need to provide feasible, low-cost support, such as peer mentorship or brief communication modules. Additionally, scalable options like standardized pre-recorded audio/visual messages with pictorial guides could ensure message consistency while reducing the burden on staff in high-volume clinics.

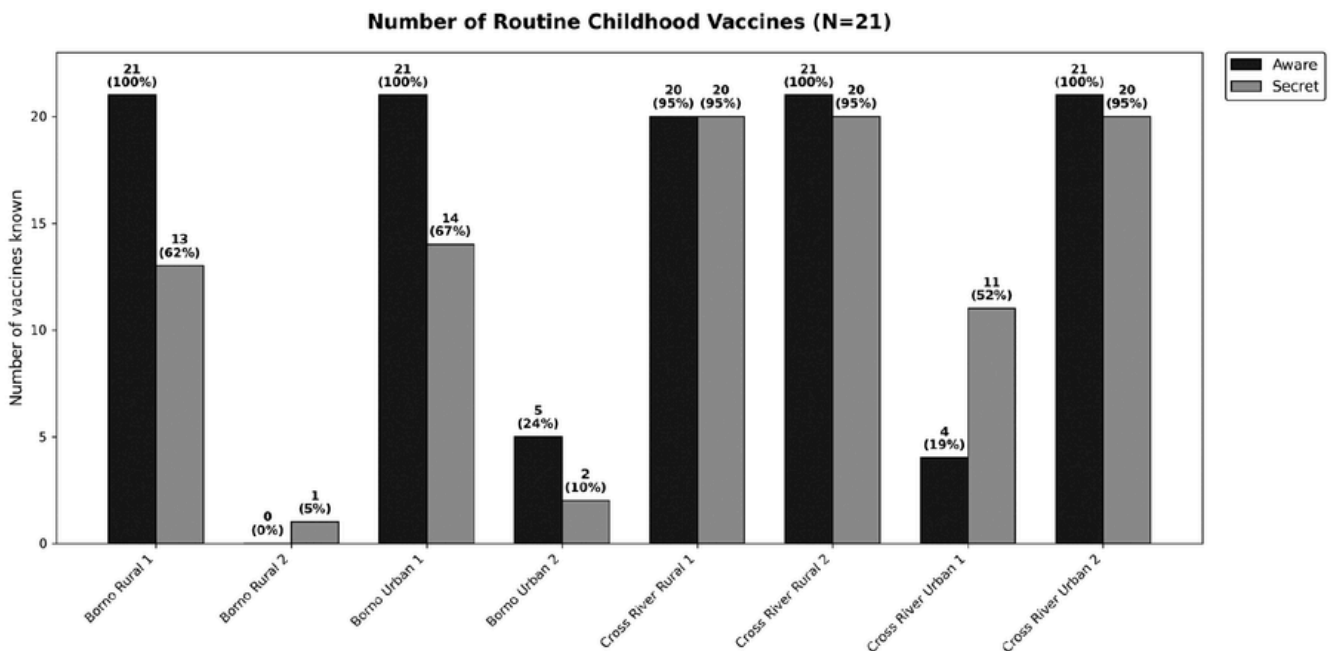


FIGURE 2 | ■ Assessment, while providers were aware they were being recorded. ■ Assessment, while providers were unaware, they were being recorded (secret shopper).

The figure strikingly illustrates a discrepancy in information delivery, as healthcare workers at many sites mentioned significantly more vaccines when they were aware of being recorded compared to the unannounced "secret shopper" sessions. This finding underscores the study's central conclusion that the comprehensiveness of routine vaccine education fluctuates heavily in everyday clinical practice, highlighting an urgent need for standardized guidelines.

[Read Paper](#)





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GLOBAL CAREER & FUNDING OPPORTUNITIES

Three fully-funded LMIC places at UMC Utrecht's Global & Planetary Health Summer Schools 2026

For one of the most consistently strong summer school programmes in European global health, UMC Utrecht has opened three full LMIC participation vouchers for July 2026. The vouchers cover the full course fee – including course materials, daily lunch, and the social programme around it – and are offered as a direct response to the funding asymmetry that keeps many of the colleagues whose work the field most needs to hear from out of the room. Travel and accommodation are not covered, which is worth flagging up front; the rest is.

Who can apply

- Individuals currently living and/or working in a low- or middle-income country (as classified by the World Bank).
- LMIC nationals currently residing in a high-income country who do not have institutional or personal funding to attend.
- Applicants must have selected, and be willing to commit to, one of the five eligible courses listed below.

Overview of the Five Summer Courses

All five intensive, one-week courses (1.5 ECTS, Master/PhD level) offered by UMC Utrecht feature interactive, small-group teaching led by international experts. They are designed to push participants into structured exchanges rather than standard university lectures.

- **Fundamentals of Global Health (6–10 July 2026):** A core introduction covering global health governance, health systems, ethics, and the impacts of climate and migration. Tailored for professionals and postgraduates with a background in public health or epidemiology.
- **Public Health in Humanitarian Contexts (13–17 July 2026):** Led by experienced practitioners, this practical course covers outbreak response, reproductive health, nutrition, and psychosocial support in crisis settings. Ideal for clinicians and researchers actively working in or entering humanitarian operations.
- **Foundations of Planetary Health (13–17 July 2026):** Frames the planetary health crisis beyond just climate change, emphasizing social inequities, unequal resource access, and political power. Open to health professionals, policymakers, and PhD researchers.
- **Transforming Systems for Planetary Health (20–24 July 2026):** An advanced companion module diving into the structural drivers of the crisis, including power dynamics, economics, and decoloniality. Designed for those with prior background (Note: combining both planetary health courses grants a 10% discount).
- **Global Health Ethics & Equity (20–24 July 2026):** One of Europe's premier short courses on health ethics. Topics range from research and climate ethics to AI in global health and equitable partnerships. Open to a broad, interdisciplinary audience, including doctors, bioethicists, and policymakers.

[More Information](#)



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GLOBAL CAREER & FUNDING OPPORTUNITIES

Professor Dominic Kwiatkowski Fellowship 2026 – ASTMH × Gates Foundation

Established in memory of the late Professor Dominic Kwiatkowski (1953–2023), a pioneering figure in malaria genomics and the founder of MalariaGEN, this fellowship from the American Society of Tropical Medicine & Hygiene (ASTMH), in partnership with the Gates Foundation, is awarded annually to one early- to mid-career researcher from and working in a low- or middle-income country whose work blends laboratory and field epidemiological approaches in malaria genomics. The award is intended both as recognition and as concrete project support: \$20,000 over a one-year project period, covering project-related costs (not salary or institutional overhead).

Who is eligible:

- Citizens of LMICs currently working and/or living in a malaria-endemic country.
- Early- to mid-career scientists – up to five continuous years post-training (residency, post-doc, MPH or equivalent); senior faculty already leading research programmes are not eligible.
- A Master's degree or higher with a focus on malaria genomics is desired.
- ASTMH membership is preferred (non-members may apply).

Applicants submit:

- A research proposal (max. 3 pages) covering specific aims and rationale, a detailed work plan with timelines and other funding sources, and a description of how the project will advance the applicant's career.
- A separate one-page budget narrative.
- A letter of support from the applicant's primary mentor or home institution, plus the mentor's CV.
- An NIH-style biosketch (education, training, employment, research support, publications).

Award: USD 20,000, one-year project period.

Application deadline: 27 May 2026.

Contact: Rhonda Schultz, Manager, Board and Fellowships, ASTMH.

AWARD:
\$20,000

In partnership with the
Gates Foundation



Application Deadline:
May 27, 2026

[Apply here](#)



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EVENTS

Journée scientifique de la SFMTSI
Jeudi 21 mai 2026

Envenimements tropicaux

Croix-Rouge Française - 21/23 rue de la Vanne, 92 220 Montrouge
en présentiel et distanciel

Comité scientifique : Jacques Chandenier, Jean-Philippe Chippaux, Alain Epelboin, Pierre Gazin, François Mouton, Eric Richard, Jacques Sevestre
Comité d'organisation : Paul-Henri Consigny, Jean-François Faucher, Pierre Gazin, Sylviane Le Gurun

Société francophone de médecine tropicale et santé internationale (anciennement SFTI)
Institut Pasteur, 25 Rue du Dr Roux, 75015 Paris

SFMTSI Spring Meeting – Tropical Envenomations (reminder)

Date reminder: The SFMTSI Spring Meeting on tropical envenomations takes place on 21 May 2026 at the French Red Cross in Montrouge, with hybrid in-person and online attendance. The programme covers epidemiology, pathophysiology, symbolic representations, and clinical management of envenomations, a group of conditions classified by the WHO as neglected tropical diseases but rarely given a dedicated forum.

KEY INFORMATION

- Date: 21 May 2026.
- Format: hybrid (in person + online).
- Venue: French Red Cross, 21/23 rue de la Vanne, 92220 Montrouge (France).
- Fees: SFMTSI member €15 · non-member €30 · free for health-profession students and (under conditions) for distant online participants.

[E-Mail](#)

SIMET 2026 – 11th National Congress: "New Challenges in Global Health"

The Italian Society of Tropical Medicine and Global Health (SIMET) holds its 11th National Congress in Turin from 11 to 13 June 2026. Under the heading "New Challenges in Global Health" the programme is built around emerging issues in infectious diseases and their interaction with planetary and structural determinants of health, and is intended as an opportunity for healthcare professionals - clinicians, microbiologists, public health practitioners - to compare experience and practice across the national and international landscape.

KEY INFORMATION

- Dates: 11-13 June 2026.
- Venue: University of Turin – Department of Veterinary Sciences, Grugliasco (TO), Italy.
- Scientific Director: Dr. Guido Calleri (Infectious and Tropical Diseases Unit, ASL Città di Torino).
- Audience: infectious disease and tropical medicine specialists, public health professionals, residents.

SIMET 2026
TORINO

XI Congresso Nazionale
Nuove sfide della salute globale
New challenges of global health

11-13 giugno 2026

AULA MAGNA A-B
Università degli Studi di Torino, Dipartimento di Scienze Veterinarie
Grugliasco (To)



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EVENTS



CLIMADEMIC Summer School 2026 Climate, Pandemics, AI

Hosted in Berlin by the Centre for Artificial Intelligence in Public Health Research (ZKI-PH) at the Robert Koch Institute, CLIMADEMIC is a one-week intensive bringing together climate modelling, infectious-disease epidemiology, and AI methods. The programme is structured around three thematic blocks – climate modelling and its impacts on health and society; infectious-disease epidemiology under climate change; and AI approaches in climate science – and is aimed at PhD students and post-docs with a background in climate research, epidemiology, public health, machine learning, or data science.

KEY INFORMATION

- Dates: 29 June – 3 July 2026.
- Venue: Conference Centre of the Federal Ministries, Mauerstraße 27, 10117 Berlin.
- Language: English. 40 places available.
- Fees: standard €450 · reduced €150 for members of partner institutions and the ELLIS Network.
- Travel and accommodation are not included.

[Registration](#)

International Pandemic Sciences Conference 2026 "From Response to Resilience"

The fourth annual International Pandemic Sciences Conference moves to Asia for the first time, co-hosted by the Pandemic Sciences Institute at the University of Oxford and Singapore's Programme for Research in Epidemic Preparedness and REsponse (PREPARE). Over three days the programme spans ethics, data science and AI, vaccines and immunology, diagnostics and therapeutics, pathogen biology, and policy and governance, with plenary, parallel, and networking sessions designed to translate response-era lessons into peacetime resilience. A dedicated early-career stream and LMIC bursaries (travel, accommodation, visa support) are part of the package.

KEY INFORMATION

- Dates: 1-3 July 2026.
- Format: in person in Singapore + online.
- Theme: "From Response to Resilience".
- LMIC bursaries available; abstract submission has closed (27 February 2026) but registration remains open.

INTERNATIONAL
PANDEMIC SCIENCES
CONFERENCE 2026
FROM RESPONSE TO RESILIENCE
1-3 JULY 2026 | SINGAPORE

[Registration](#)



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EVENTS

[Website](#)



ICOPA 2026 16th International Congress of Parasitology

ICOPA 2026 brings together researchers, clinicians, and public health experts working across the full spectrum of parasitology – from basic and translational science to applied control programmes – under the theme "Parasites in a Changing World". For European tropical medicine and global health professionals this is one of the largest international meetings of the year and a natural venue for both presenting recent work and tracking new tool development in helminth and protozoal disease.

KEY INFORMATION

- **Dates:** 16–21 August 2026.
- **Abstract submission:** regular deadline closed 2 Feb 2026; late-breaker submissions open until 27 May 2026.
- **Venue:** Montréal, Canada.
- **Theme:** "Parasites in a Changing World".

tropEd Global Health Summer School 2026 online, free of charge

The tropEd Network's online Summer School returns for a fifth edition with five days of free, live learning on some of the most pressing issues in global health. The 2026 curriculum spans gender-based violence, migration, child health rights, and vaccine equity, with sessions delivered by faculty from 13 tropEd member institutions across four continents. The course is aimed at students, early-career professionals, and anyone curious about a structured pathway into the MSc in Global Health offered by the tropEd Network.

KEY INFORMATION

- **Dates:** 31 August - 4 September 2026.
- **Format:** online via Zoom.
- **Cost:** free; optional certificate €50 (administrative fee).
- **Application deadline:** 15 July 2026.

[Apply.](#)



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"Nothing About Youth, Without Youth" – a video on the inclusion of Youth in NTD work



Voices Of Young People From NTD Youth Initiatives Network

Key information

- Format: short film, approximately 5 minutes; freely viewable on YouTube and InfoNTD.
- Theme: meaningful youth engagement in NTD policy and programmes.

Published via InfoNTD's monthly bulletin in 2026, this five-minute film asks a simple but uncomfortable question of the entire NTD community: are young people genuinely being included in the decisions that shape NTD programmes, or are they being invited along once the decisions are already made? The piece contains statements from different NTD youth leaders around the world.

[Watch YouTube
Video](#)



"Our lasting benefits for Europe and Africa" Global Health EDCTP3 booklet

Also surfaced via InfoNTD this month, the new booklet from Global Health EDCTP3 – the third iteration of the European & Developing Countries Clinical Trials Partnership – sets out what the programme has delivered and where it is heading. EDCTP is one of the largest funders of cross-continental global health clinical research and a flagship Africa-Europe partnership, focused on HIV/AIDS, tuberculosis, malaria, and neglected infectious diseases, alongside cross-cutting threats such as antimicrobial resistance and climate-driven outbreaks. The booklet is a useful reference for grant-seekers and for anyone preparing strategy papers or teaching materials on Africa-Europe health research cooperation.

[Website](#)

Key information

- Publisher: Global Health EDCTP3 (2026).
- Format: PDF booklet, freely downloadable.
- Scope: HIV/AIDS, TB, malaria, NIDs; AMR; climate-related outbreaks; clinical research capacity; digital/AI innovation.





News of the Month – May 2026

Thank you for reading, sharing, and contributing to the NOTM. With conference season opening up and a long stretch of summer schools just around the corner, this edition has been heavier than usual on events and short courses; the June edition will rebalance towards publications and funding calls. If you are heading to Turin, Berlin, Singapore, Montréal, or simply joining tropEd online from your desk, we wish you good conversations and useful new connections.

Until next month,
The FESTMIH NOTM Team

SHARE YOUR EVENTS & FEEDBACK

Do you have an upcoming event from within your institution, society, or network that you would like to see featured in the News of the Month?

We invite our cooperation partners to share relevant announcements with the FESTMIH Secretariat. Submissions received before the 10th of each month will be considered for inclusion in the following edition.

We also value your thoughts on the NOTM. You can provide feedback anytime by simply scanning the QR code included in this newsletter.

Your contributions and ideas help us keep the NOTM a vibrant and useful resource for the FESTMIH community.

