ECLIPSE Newsletter #1 March 2020





F ECLIPSE in the spotlight

ECLIPSE is a four-year global health programme, funded by the UK's National Institute for Health Research, working around cutaneous leishmaniasis (CL) in underserved communities across Brazil, Ethiopia and Sri Lanka. CL is a neglected tropical disease caused by a parasite which is spread through the bite of a sand fly. This disease can be highly stigmatising as it causes visible skin lesions which may leave permanent scarring. CL is among the most neglected of neglected tropical diseases (NTDs). It is neglected in terms of early diagnosis and robust treatment pathways, as well as in terms of social science research on the psychosocial and healthcare challenges that people with CL face.

INSIDE THIS ISSUE

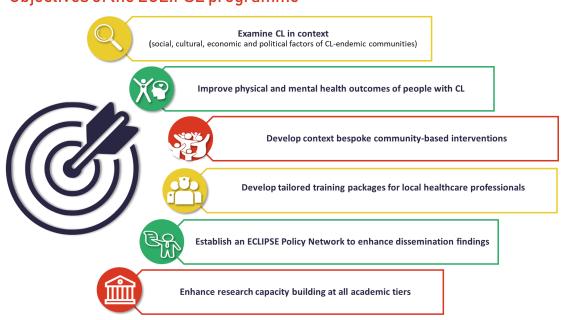
- ♦ Introducing ECLIPSE
- ECLIPSE in the community
- **#WeAreECLIPSE** updates
- ♦ Meet the UK and **Brazil ECLIPSE teams**
- Meet the ANGLES artist
- **Upcoming events**





The ECLIPSE programme, led by Keele University (UK), brings together an interdisciplinary, cross-cultural research partnership with the Federal University of Bahia (Brazil), Mekelle University (Ethiopia) and Rajarata University of Sri Lanka. Our aim is to raise awareness around CL, reduce CL-related stigma and improve the patient journey of people with CL.

Objectives of the ECLIPSE programme











We are in the community

'No research about us without us':

ECLIPSE is *in the community* — that is the ethos that underpins our applied healthcare programme. ECLIPSE team members will not conduct any research activities without input from those who live in the rural, and often remote, CL-affected communities in Brazil, Ethiopia and Sri Lanka. Therefore, robust community engagement and involvement is running throughout all research, intervention and evaluation activities.

The ECLIPSE researchers will use a range of research methods to gain an in-depth understanding of the experiences, understandings and perceptions of CL of patients, community members and healthcare professionals. The insights we gain will inform the development of the ECLIPSE interventions. One of these methodological approaches is conducting ethnographic fieldwork.





Ethnographic fieldwork

The ECLIPSE ethnographers will focus on the people, their context, culture and society and not only on CL. The experience of having CL is never restricted to just a single person. It always affects, and is affected by, family, friends, local communities and the wider social, cultural, economic and political context of each affected community. Observing community members and participating in daily activities and their interactions with one another is crucial for teasing out socially bounded concepts affecting health and well-being. In particular, our ethnographic approach will be important to understanding the structural barriers to optimal CL diagnosis and treatment, and it will allow to map out local stigmas and if there are different stigmas at play.

Ethnographic vignettes

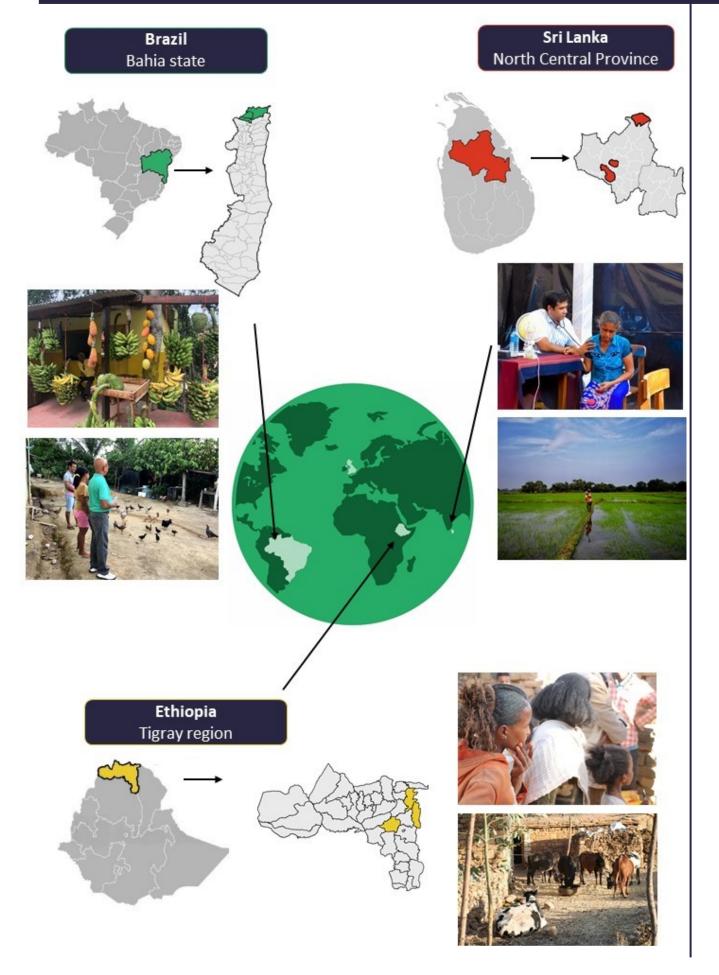
The ECLIPSE Newsletter and the ECLIPSE website will bring you updates on our fieldwork and findings through ethnographic vignettes and photo essays. The ECLIPSE teams all around the world are excited to start the fieldwork in Brazil, Ethiopia and Sri Lanka when the current COVID-19 restrictions ease and the ECLIPSE researchers can be again in the community.



🗜 COVID-19 pandemic

Our hearts and minds go out to all the community members, clinicians, researchers and all colleagues affected by the ongoing COVID-19 pandemic. This Newsletter reports on activities from November 2019 to March 2020. ECLIPSE Newsletter #2 will be dedicated to experiences and stories about COVID-19 in the ECLIPSE countries.







Start-up workshop in Brazil

In March 2020, some of the UK ECLIPSE team (Prof Lisa Dikomitis, Dr Helen Price, Dr Brianne Wenning and Dr Kay Polidano), together with ANGLES artist Ms Martine Vandevelde, travelled to Salvador (Brazil) to meet the Brazil ECLIPSE team based at the Federal University of Bahia (UFBA).

Bahia is the fourth largest Brazilian state (population ~15 million) and is located in the northeastern part of the country on the Atlantic coast. Portuguese is the official language, with Catholicism, Pentecostal Christianity and the Afro-Brazilian Candomblé as the main religious traditions. The influence of African culture is prominent, as Salvador was once the largest slave trade port in the Americas.







Leishmaniasis reference centre

Cutaneous leishmaniasis (CL) is highly endemic in Brazil. It is indeed among one of seven countries reporting 90% of CL cases worldwide. Incidence is particularly high in the Bahia state, where our field sites are located. One of these sites is the rural area of Corte de Pedra, where the Leishmaniasis Reference Centre, covering a catchment area of 270 km², has been established since 1998. As part of our fieldtrip, we observed the positive impact that this reference centre has on people from the region.









Meeting the communities

Community engagement and involvement lies at the heart of ECLIPSE. The research team visited the three ECLIPSE field sites in Bahia. They had conversations with healthcare professionals, people with CL, community members and municipal health officers. These discussions shed light on various issues which we will further explore in our ethnographic fieldwork, such as health beliefs around CL, experience of various stigma (not only CL-related), self-treatment and challenges with accessing formal treatment (e.g., getting to the leishmaniasis reference centre by public transport).



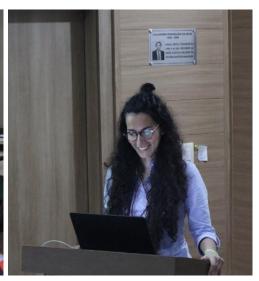


Introducing ECLIPSE at UFBA



Dr Helen Price and Prof Lisa Dikomitis introduced the ECLIPSE programme to members of UFBA's senior leadership team. At the Institute of Collective Health (UFBA), we also conducted a start-up workshop which featured several discussions about our plans for upcoming research activities, including community engagement, ethnography and creative workshops. These meetings proved to be intellectually stimulating and a fantastic teambuilding opportunity.







$Pictures \, from \, the \, start-up \, workshop \, in \, Brazil$





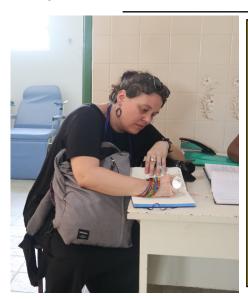








Vignettes from our field notes



CL patients per year at the Corte de Pedra Leishmaniasis Reference Centre

- 2015 = 780
- 2016 = 874
- 2017 = 1384
- 2018 = 629
- 2019 = 334

30,301 people with CL have been treated in the reference centre since its establishment in September 1987









In our conversations with community members, we learned that some locals avoid certain foods when they have active CL lesions. For instance, some believe that beans and root vegetables (e.g. *inhame* - yams) may encourage the lesions to root in one's body, thus preventing the treatment from working.

During a roda de conversa (roundtable discussion), community members shared their insights about alternative treatments for CL that some people in their community use. These varied from home-made creams and leaf baths to more invasive practices, like pouring battery acid into the CL lesion.







Meet the ECLIPSE UK team

The **Ethiopia** and **Sri Lanka** ECLIPSE teams will be introduced in the next ECLIPSE newsletter.



Dr Helen Price
Parasitologist | Associate Professor
(Keele University)

ECLIPSE Co-Principal Investigator

Prof Lisa Dikomitis
Anthropologist | Professor of
Anthropology and Sociology of Health
(Keele University)

ECLIPSE Co-Principal Investigator





Prof Christian MallenCo-Investigator



Dr Tom Shepherd Co-Investigator



Dr Toby HelliwellCo-Investigator



Prof Athula Sumathipala Co-Investigator



Dr Brianne WenningPostdoctoral researcher



Dr Kay PolidanoPostdoctoral researcher



Ms Michelle Robinson Research assistant



Ms Linda Parton Lay Co-Investigator



Dr Alina Andras Research Programme Manager



Ms Rachel Huddleston Project administrator





Meet the ECLIPSE Brazil team



Dr Paulo MachadoDermatologist | Coordinator of Immunology Service (UFBA)

Brazil ECLIPSE country lead

Prof Dr Leny Trad
Anthropologist | Director of
Institute of Collective Health (UFBA)

Brazil ECLIPSE co-lead





Dr Marie Aliaga Co-investigator



Dr Christine ZonzonPostdoctoral researcher



Dr Leo PedranaPostdoctoral researcher



Ms Verônica Santos PhD student



Ms Greice Bezerra Viana PhD student



Ms Gisela Naiara dos Santos Research assistant



Ms Nathália Rozemberg Research assistant



Mr Alex Lago Collaborator at Leishmaniasis Reference Centre



Mr Ednaldo Lago Collaborator at Leishmaniasis Reference Centre



Ms Giselle Ferraz Project coordinator



Ms Rosália Santos Sá Project administrator





Announcements









Lisa Dikomitis has been promoted to full professor in January 2020. She is now Professor of Anthropology and Sociology of Health, working across the School of Medicine and School of Primary, Community and Social Care (Keele University).

Helen Price, who works at the Centre for Applied Entemology and Parasitology, School of Life Sciences (Keele University) has been promoted to Associate Professor in March 2020. Kay Polidano has been awarded her PhD, after successfully defending her doctoral thesis, entitled 'Psychological needs and support following stoma surgery: exploring the perspectives of young adults and healthcare professionals', in January 2020 (Keele University).

Dr Helen Price and Prof Lisa
Dikomitis are CoInvestigators on a recently
awarded interdisciplinary
research project on visceral
leishmaniasis in India. This
project is led by Prof Patrick
Steel at Durham University,
and is funded by the
Engineering and Physical
Sciences Research Council
(ESPRC) under the Global
Challenges Research Fund.

ANGLES: Artistic engagement in global health residence scheme

Funded by QR GCRF Keele, ANGLES is the pilot artist-in-residence scheme at the Institute for Global Health (Keele University), led by Prof Lisa Dikomitis. The aim is to pair up artists from Keele, Brazil and Ethiopia, who will collaborate in the creation of socially engaged art, as part of ECLIPSE fieldwork. **Martine Vandevelde**, who has been selected as the first 'Keele' artist, has joined the UK team on their Brazil trip where she met with several Brazilian artists. Her artistic work, relating to CL and inspired by her visit to Bahia, will be showcased at an ECLIPSE exhibition at Keele University.











Recent publications

Agostino, V. S., Trinconi, C. M., Galuppo, M. K., **Price, H.**, & Uliana, S. R. (2020). Evaluation of NanoLuc, RedLuc and Luc2 as bioluminescent reporters in a cutaneous leishmaniasis model. *Acta Tropica*, 105444.

Arachchi, N. S. M., Ganegama, R., Husna, A. W. F., Chandima, D. L., Hettigama, N., Premadasa, J., ... & **Agampodi, S. B.** (2019). Suicidal ideation and intentional self-harm in pregnancy as a neglected agenda in maternal health; an experience from rural Sri Lanka. *Reproductive health*, *16*(1), 1-7.

Belay, S., Sebert Kuhlmann, A. K., & Lewis Wall, L. (2020). Girls' attendance at school after a menstrual hygiene intervention in northern Ethiopia. *International Journal of Gynecology & Obstetrics*. (in press)

Buture, A., Boland, J. W., Ahmed, F., & **Dikomitis, L.** (2019). Images depicting headache pain—a tool to aid the diagnosis of cluster headache: a pilot study. *Journal of multidisciplinary healthcare*, *12*, 691.

Dikomitis, L. and Argyrou, V. (in press, fc. 2020) The politics of restoring religious sites and cemeteries in the north of Cyprus: an ethnography among Greek Cypriot refugees, in Kruse, T., Faustmann, H. and Rogge, S. (Ed). When the cemetery becomes political. Dealing with the religious heritage in multi-ethnic regions. (Munster, Wasmann Verlag)

Gebremariam, K., Zelenko, O., Hadis, Z., **Mulugeta, A.**, Gallegos, D. (2020). Exploring the challenges and opportunities towards optimal breastfeeding in Ethiopia: a formative qualitative study. *International Breastfeeding Journal*, 15, 20.

Kidanemariam Berhe, A., Olatunbosun Ilesanmi, A., Odianosen Aimakhu, C., **Mulugeta, A.** (2020). Awareness of pregnancy induced hypertension among pregnant women in Tigray Regional State, Ethiopia. *The Pan African Medical Journal*, 35, 71.

Paape, D., Prendergast, C. T., **Price, H. P.**, Doehl, J. S., & Smith, D. F. (2020). Genetic validation of Leishmania genes essential for amastigote survival in vivo using N-myristoyltransferase as a model. *Parasites & Vectors*, *13*(1), 1-16.

Nakafero, G., Grainge, M. J., Myles, P. R., **Mallen, C. D.**, Zhang, W., Doherty, M., & Nguyen-Van-Tam, J. S. (2019). Effectiveness of inactivated influenza vaccine in autoimmune rheumatic diseases treated with disease modifying anti-rheumatic drugs. *Annals of the Rheumatic Diseases*. (in press)

Troya, M. I., Chew-Graham, C. A., Babatunde, O., Bartlam, B., Mughal, F., & **Dikomitis, L.** (2019). Role of primary care in supporting older adults who self-harm: a qualitative study in England. *British Journal of General Practice*, 69(688), e740-e751

Wijerathne, B. T. B., Meier, R. J., Salgado, S. S., & **Agampodi, S. B.** (2020). Qualitative and quantitative dermatoglyphics of chronic kidney disease of unknown origin (CKDu) in Sri Lanka. *Journal of Physiological Anthropology*, *39*(1), 1-14



Congratulations to...

- Dr Marie Aliaga (Brazil) on the birth of her daughter Lua
- Dr Leo Pedrana (Brazil) on the birth of his son Martín
- Dr Paulo Machado (Brazil) for becoming a grandfather to Marcelo





Documentary

ECLIPSE researcher Dr Christine Zonzon, together with the 'Marias Felipas Study Group and Feminist Intervention in Capoeira', has recently directed a documentary entitled 'Mulheres da Pá Virada'. Filmed in Salvador (Brazil), this film presents the stories and struggles of capoerista women, bringing an ethnic-racial and generational perspective. English subtitles are available.

Click on URL to watch:

https://mariasfelipas.wo rdpress.com/mulheresda-pa-virada-historias-etrajetorias-na-capoeira/



historias e trajetorias na capoeira

Find out more:



eclipse.community@keele.ac.uk



www.eclipse-community.com



@ECLIPSE_Keele

This research is funded by the National Institute for Health Research (NIHR) (NIHR200135) using UK aid from the UK Government to support global health research. The views expressed in this publication are those of the authors and not necessarily those of the NIHR or the UK Department of Health and Social Care.



