

FUNDING PROPOSAL

Establishment of a Clinical Research & Biobanking Facility

Location: Jos, Plateau State, Nigeria

Funding Required: £90,000

Ownership Structure: Founder-owned Research Facility

1. Executive Summary

This proposal seeks £90,000 in seed funding to establish a founder-owned, clinical research and biobanking facility in Jos, Plateau State, Nigeria. The facility will operate in full alignment with international Good Clinical Practice (GCP) and Good Laboratory Practice (GLP) standards and will provide high-quality support for:

- Observational and interventional clinical trials
- Diagnostic and pathology services
- Biological sample processing and long-term storage (biobanking)
- Data handling, monitoring, and regulatory-compliant research support

The venture is designed to address a critical yet persistent gap in global research: the persistent under-representation of African and Black populations in clinical trials, despite Africa carrying a disproportionately high disease burden and being a major end user of medicines, vaccines, and public health interventions developed elsewhere.

The founder is an experienced clinical research nurse in the NHS with extensive experience delivering NIHR portfolio, commercial and non-commercial research studies in the UK, member, Academic Partnership Board, Betsi Cadwaladr University Health Board. Combined with over nine years of clinical experience in Jos, including work at Jos University Teaching Hospital (JUTH) and Bingham University Teaching Hospital. This dual exposure uniquely positions the founder to bridge international research expectations with local realities, trust, and operational feasibility.

This project is scientifically necessary and ethically responsible enterprise that aligns global research standards with African leadership, ownership, and participation.

2. Founder Background, Training & Institutional Roots

2.1 Professional Background

The founder is a clinically trained nurse and research professional with:

- Extensive NHS experience delivering NIHR and commercial clinical trials
- Practical expertise in GCP compliance, research governance, ethics submissions, monitoring visits, and sponsor interactions
- Direct collaboration with CROs, pharmaceutical sponsors, and academic research teams
- Strong understanding of data integrity, protocol adherence, participant safety, and regulatory inspections

This experience provides immediate credibility with international partners and reduces start-up execution risk.

2.2 Academic & Training Institutions (Alma Mater)

The founder's professional formation is deeply rooted in Plateau State and Northern Nigeria, including training and professional links with:

- University of Jos – Faculty of Medical Sciences
- Colleges of Nursing and Midwifery (Plateau State)
- Plateau state university Bokkos

These institutions represent a strong academic pipeline for:

- Nursing professionals
- Laboratory scientists
- Allied health professionals
- Early-career researchers

The facility will actively engage graduates and trainees from these institutions, creating a local talent-to-employment pathway.

2.3 Clinical Institutions & Teaching Hospitals

The project will strategically align with major clinical centres in Jos, including:

- Jos University Teaching Hospital (JUTH)
- Bingham University Teaching Hospital
- Plateau State Specialist Hospital

These hospitals collectively serve a large and diverse patient population and already function as referral and teaching centres. Their presence significantly strengthens feasibility for participant recruitment, sample flow, and collaborative research activity.

3. Personal Motivation & Ethical Imperative

The founder is an Autistic, Black, African, and Nigerian, and has repeatedly observed how:

- African populations are excluded from trials but expected to trust outcomes
- Medicines and vaccines are deployed widely in Africa despite minimal African representation during development
- Communities refuse participation due to unresolved historical research abuses and lack of transparency

This exclusion is not only weakens scientific validity but compromises safety signals, and perpetuates mistrust.

The founder firmly believes that:

Representation builds trust, and trust is strongest when research is owned, led, and communicated by professionals who understand both the science and the people.

4. Problem Statement & Global Research Gap

Establishing a clinical trial center in Jos, Nigeria, is a strategic necessity to address the critical under representation in global health research.

Despite Africa accounting for 25% of the global disease burden, the continent currently hosts only 1.1% of global clinical trials, with less than 2% of the world's genomic data derived from African populations.

The founder aim to leverage an established academic hub with a high volume, diverse patient base that remains largely "treatment naive", a significant advantage for rapid recruitment and data integrity. Furthermore, this center will directly align with Nigeria's national goal to establish 435 clinical research centers by 2028, transforming the region from a passive consumer of foreign medical data into an active contributor to precision medicine. Furthermore, fostering local job creation, reversing the "brain drain" of medical talent, and ensuring that future therapies are safe and effective for the Nigerian population.

Beyond professional qualifications, this project is deeply personal.

Global clinical research continues to face structural deficiencies:

- Poor ethnic and genetic diversity in trial populations
- Over-concentration of trials in Western Europe and North America
- Limited African-led infrastructure capable of meeting sponsor standards
- Persistent mistrust driven by historical unethical research practices

Africa bears a significant share of infectious disease, chronic illness, and emerging public health threats, yet remains under-represented at the point where evidence is generated.

This disconnects results in:

- Reduced generalisability of trial outcomes
- Delayed safety signal detection
- Poor community uptake of proven interventions
- Continued dependency on externally led research agendas

5. Strategic Location: Jos, Plateau State

5.1 Geographic & Demographic Context

Jos is located in North-Central Nigeria and serves as a major urban and academic centre in Plateau State.

- Estimated population: Approximately 900,000–1,000,000 (Jos metropolitan area)
- Known for ethnic, cultural, and genetic diversity
- Acts as a referral hub for surrounding states of Nasarawa, Bauchi, and Benue states.

5.2 Strategic Advantages

Jos offers several advantages:

- Presence of multiple teaching hospitals and universities
- Lower operational and property costs
- Lack of competition for clinical research infrastructure
- High availability of trainable healthcare professionals
- Strong community networks and social cohesion when trust is established

The founder's lived experience in Jos enables realistic budgeting, culturally sensitive engagement, and risk-aware planning.

6. Project Description & Services

The proposed facility will provide:

- Clinical trial sample processing
- Diagnostic and pathology services
- Support for observational and interventional trials
- Long-term biological sample storage (biobanking)
- Data handling, monitoring preparation, and audit support
- Training and mentorship for local research staff

All operations will be designed to meet GCP, GLP, and sponsor audit expectations, enabling collaboration with UK, European, and global partners.

7. Community Impact & Capacity Building

The project delivers immense social value:

- Restoration of trust through transparency and local leadership
- Increased trial participation in historically reluctant communities
- Employment opportunities for nurses, scientists, technicians, and administrators
- Structured mentorship for early-career professionals
- Long-term skills transfer and professional retention

Importantly, this model avoids extractive research by ensuring local ownership of scientific contribution.

8. Governance, Ethics & Regulatory Compliance

The facility will operate under strict governance frameworks:

- Ethical approval via recognised Institutional Review Boards (IRBs)
- Regulatory oversight through National Agency for Food and Drugs Administration and Control (NAFDAC)
- Full Standard Operating Procedure development and version control
- Continuous staff training and competency assessment
- Regular internal audits and external monitoring readiness

Transparency and compliance are non-negotiable pillars of this enterprise.

9. Funding Requirement & Use of Funds

Total funding required: £90,000

Item	Estimated Cost (£)
Property fit-out	32,000
Ultra-low temperature freezer (-80°C)	20,000
Backup generator & power stabilisation	6,000
Class II biosafety cabinet	5,000
Clinical centrifuge	3,000
Laboratory refrigerator (2-8°C)	2,500
Autoclave	3,500
Work benches & storage	3,000

IT systems&software	2,000
PPE&starter consumables	3,000
Temperature monitoring&alarms	2,000
Total	£90,000

Conclusion

This project is a corrective intervention in global clinical research.

By placing ownership, leadership, and trust in the hands of an experienced local professional with international research credentials, this facility addresses scientific validity and ethical responsibility.

This facility will become a credible bridge between global research and African participation delivering value to local communities and scientific validity