

Draft 2012 Work Plan

March 2012

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Scientific Research Coordination

Head: Martin Bangha

Other Staff: Samuelina Arthur

Title	Proposed activities	Timelines
WORKING GROUPS		
Adult Health and Aging (AHA)	<ol style="list-style-type: none"> 1. Enriching INDEPTH-SAGE dataset with additional variables including education, migration, household composition and mortality 2. Finalizing and publishing a second round of papers 3. Conducting wave-2 of INDEPTH-SAGE short in 8 INDEPTH centers; funds permitting, will involve supplement self-reported responses with objective measures 4. Data entry of SAGE-INDEPTH 'long', conducted 2006/7, completed; analyses get underway with WHO-SAGE team 5. Revision of INDEPTH-Harvard NIH-PO1 application 	<p>Q1-Q4</p> <p>Q1-Q4</p> <p>Q1</p>
Migration Urbanization & Health (MUHWG)	<ol style="list-style-type: none"> 1. Functional Committee; Review data sites (including online data support for centres); Draft report on data-quality; Draft report on scientific production. 2. Presenting reports on 12th March MADIMAH Africa meeting (INDEPTH Statistics); write proposal for funding for 3rd MADIMAH I (Africa) workshop 3. Preparation MADIMAH I & Asia workshop; editorial group of MADIMAH will meet to analyze / write up the data on demographic trends in the MADIMAH 1 HDSS sites; write proposal for funding for 3rd MADIMAH I (Africa) workshop 4. Third Madimah Africa workshop; Preparation MADIMAH Asia workshop 5. First MADIMAH Asia Workshop; sites to write site specific articles on migration and mortality 6. 2nd Madimah Asia workshop; sites to write site specific articles on migration and mortality; Review & Reporting process MADIMAH Asia; sites to write site specific articles on migration and mortality 	<p>Q1 – Q2</p> <p>Q1</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q4</p>
Vaccinations and Child Survival	<p>I. Research training project: “Monitoring and assessing the impact of vaccinations and other childhood interventions for both boys and girls”</p> <ul style="list-style-type: none"> • First statistical training workshop to be held in Accra in last week of January • Several sites visits to be organized during 2012: Kintampo in March, Navrongo in March • Long training visits to Copenhagen to analyze data and learn more statistics: Martin Kavao (Nairobi). 	<p>Q1</p> <p>Q1</p> <p>TBC</p>

	<p>II. Optimising the impact and cost-effectiveness of existing child health intervention programmes for vaccines and micronutrients in low-income countries (EU project)</p> <ul style="list-style-type: none"> • Second consortium meeting in Nouna • Finalize the protocol for early measles vaccination trial and obtain local ethical and political acceptance of trial in Burkina Faso, Ghana and Bissau • Field visits to monitor progress of trial <p>III. Collaborative analyses of existing data sets Analysis several data sets on vaccinations in collaboration with other sites: Publication of papers</p> <p>IV. Other possible activities Generate more interest in the non-specific effects of vaccinations and with vitamin A supplementation with the publication of several randomised trials from. Publication of papers to generate more interest in the international donor community. The controversial observation on vitamin A has already generated funding for several new trials on vitamin A at birth – Kintampo and Ifakara are involved in these studies.</p>	<p>March 2012</p> <p>TBC</p> <p>Q1 – Q4</p> <p>Q1 – Q4</p>
Health Systems Research	<p>Funded Project by RF</p> <ul style="list-style-type: none"> • To be piloted in Navrongo and FilaBavi • Kick off meeting/workshop to agree on a comparable instrument for data collection • Develop standardized tool for data collection • Initiate data collection/activities at the pilot centers (Navrongo and FilaBavi) 	<p>Feb 2012</p> <p>Q2</p> <p>Q2 – Q4</p>
Tuberculosis (TB)	<p>Population-based Research on TB (PoRT) Bandim HDSS: <u>TB suspects:</u></p> <ul style="list-style-type: none"> • Validate TB score for diagnosis. <p><u>TB risk factors:</u></p> <ul style="list-style-type: none"> • Continued identification of TB cases from HDSS • Mental illness risk screen from February 2012. • Smoking, pollution and COPD data may be added from 2013 	<p>Q1-Q3</p> <p>Q1-Q4</p>

	<p>Karonga HDSS <u>TB suspects:</u></p> <ul style="list-style-type: none"> • Implement procedures, include and follow up cases. Start analyses. • Complete coverage of HDSS, all suspects identified <p><u>TB risk factors:</u></p> <ul style="list-style-type: none"> • 49 adult TB cases identified in HDSA since 2009. • Continued identification of TB cases from HDSS <p>Kisumu HDSS</p> <ul style="list-style-type: none"> • Plan to carry on with identification of TB suspects and follow up in 2012. • We target to identify 100 suspects for the 6 months study period up to April 2012 • Follow up participants and monitor verbal autopsy records • Draft manuscript on suspected but undiagnosed cases • Present findings at ISC Meeting 	<p>Q1-Q3</p> <p>Q1 – Q4</p> <p>Q1-Q4</p>
<p>Cause of Death Determination (CODD) Groups</p>	<p>The Secretariat will continue to intensify efforts to help centers code their VA form up to the most current year.</p> <p>INDEPTH/ ALPHA/HMN Collaboration: <i>Interactions between HIV and pregnancy as causes of death</i></p> <ul style="list-style-type: none"> • Presentation of Kisumu results at the MOVE IT Meeting in Cape Town • Drafting of papers (center-specific) and cross-center comparative analysis of VA using interVA • Compile manuscripts of papers for journal supplement <p>Cause of Death Monograph: <i>Making sense of longstanding physician-coded material</i></p> <ul style="list-style-type: none"> • Making best use of previously physician-coded material, even though now somewhat outdated • Possible inclusion into supplement with site-specific papers perhaps in combination with retrospective application of new short form <p>INDEPTH/WHO/HMN/Umeå: Collaboration on new short-form VA tool and corresponding InterVA-4 model</p> <ul style="list-style-type: none"> • Applying new short-form tools retrospectively to existing site VA data and processing with InterVA-4 – may require a workshop or might be done at distance 	<p>Jan 21-22</p> <p>Q1 – Q3</p> <p>Q4</p> <p>Q1-Q4</p> <p>Q1-Q4</p>

	<ul style="list-style-type: none"> • Possible supplement with site-specific papers (which might include output from previously physician-coded material) • Plan and organize multi-method data analysis workshop to assess best approach for assigning cause of death <p>VA with clinical Post-mortem</p> <ul style="list-style-type: none"> • Write a protocol with the goal of completion and entered into ethical clearance procedures • Conduct a feasibility study to obtain at least 6-10 autopsies, among different ages/genders on site at two HDSS centers • Take advantage of an already planned VA-post-mortem study in the KEMRI/CDC HDSS on persons who die from respiratory disease (funded through the Global Fund to the National TB Program) in order to learn best practices etc for the larger multi-site VA-post mortem studies • Create/enhance existing rapid alert systems for death notification at the two INDEPTH centers. • Initiate data collection 	Q1-Q4
Climate Change, Migration and Mortality (CLIMIMO)	<ul style="list-style-type: none"> • Further analysis of data and revision of analytical outputs • Proposal for data analysis submitted to Doris Duke • Writing workshop to finalize draft papers (center-specific) and compile manuscript for submission to journal (GHA) • Cross-center comparative analysis and drafting of multi-center articles for publication in high impact journal 	Q1 Q2 – Q4
Indoor Air Pollution (IAP)/ Chronic Obstructive Pulmonary Diseases (COPD)	<p>Proposal finalization workshop Pune India</p> <p>Submission to a funder</p>	19-21 March 2012 Q2
Newborn Health and Epidemiology	<ol style="list-style-type: none"> 1. Draft proposal for the Group 2. Work on a cross-site paper for publication using already available data. 3. Scientific writing workshop <p><i>Proposed topics</i></p> <ol style="list-style-type: none"> a) The epidemiology of newborn mortality and still births across selected INDEPTH centres or b) Neonatal mortality and still birth trends across HDSS sites c) Pregnancy surveillance practices and effectiveness across HDSS sites d) Look at the tools used at each site. Describe how data is 	Q1 Q1 – Q4

	collected and what has changed over time and why	
Mortality Analysis	<ul style="list-style-type: none"> • Final review, cleaning and identification of data errors for certain centers and agreement on way forward • Analysis and Publications 	Q1 –Q2 Q2 – Q4
Interest Groups		
Social Autopsy	<ul style="list-style-type: none"> • Proposal for implementation of the SA tools in identified cluster of interested HDSSs. • Identification of interested sites to participate in the implementation • Implementation workshop • Deployment of SA at the various sites for at least one year 	Q1 Q1 Q2 Q4
Vaccine Safety Group	<ul style="list-style-type: none"> • Activities to start once funding is secured 	
Household Dynamics	<ul style="list-style-type: none"> • Proposal for funding multi-centre research and PopPov Network call 	Q1
Antibiotic Resistance -INDEPTH (ARIN)	<ul style="list-style-type: none"> • Complete pre-proposal to Wellcome T • If proposal successful, first draft of the full proposal • Full proposal is revised and submitted. 	Q1 Q2
Mental Health and Neurology	<ul style="list-style-type: none"> • Start studies on the Psychiatric co-morbidity of Epilepsy in Kintampo • Start studies on Stroke in the INDEPTH sites 	Q1-Q3 Q4
Ongoing Projects		
Sexual and Reproductive Health (SRH)	<p>The five funded centers (Kisumu, Magu, Nairobi, Navrongo and Rakai) to complete pending projects and activities and produce center-specific results, / Cross Centre analysis of the results.</p> <p>The long term goal is to develop a proposal (on Transitions to Adulthood) for funding that will allow for series of studies on adolescent sexuality and RH. Eventually, recruit cohort of adolescents to be followed over the years once funding secured.</p> <ul style="list-style-type: none"> - Consultative meeting - Follow up meetings and final concept - Submitting to funders 	Q1 – Q4 Jan 21-22, Q2 Q3

Demographic and Health Transition	Finalization of cross-center paper for submission to journal Prepare a research application that builds on the previous grant and approach funder to scale up study to a wider number of member HDSSs	Q1 - Q3 Q1 - Q3
INDEPTHStats	<ul style="list-style-type: none"> • Consistency checks on all datasets received • INDEPTHStats Meeting to agree on final strategy • Launch of INDEPTHStats 	Q1 -Q4 Q1 Q4
Data Sharing Initiative/iSHARE	<ul style="list-style-type: none"> • Transformation of iSHARE into next generation iSHARE where all INDEPTH members will share the data • Automated ETL module to be used by all iSHARE members. • Installation and training of Centre-in-Box to 8-10 INDEPTH centers. • DDI 2.1 documentation of all iSHARE data. 	Q1-Q2 Q3 Q2-Q3 Q1-Q4
International Research Consortium on Dengue Risk Assessment, Management and Surveillance (IDAMS)	Consultative meeting on DENGUE IN AFRICA Dec 2012	Q4
INDEPTH Training and Research Centers of Excellence (INTREC)	<ul style="list-style-type: none"> • Kick off meeting in Umea • Identify and recruit 4 social scientists/RAs (transcribers and translators) in participating countries • Workshop for training of social scientists in Indonesia • Epidemiologic/public health & curricula review • IAG Meeting (Heidelberg August 2012) 	Jan 2012 Q1 Q1 Q1-Q3 Q3
	Projects Under Development	
HDSS-Census-DHS Triangulation/ INDEPTH-ACAP Collaboration	<ul style="list-style-type: none"> • Meeting with 9 countries at Bellagio Study Center • Adoption of a research agenda that involves use of HDSS data, censuses and DHS • Drafting of first papers 	Feb 2012 Q3 Q4
Human Heredity and Health in Africa (H3Africa)	Investigating the genetic and environmental contributions to obesity, fat distribution and body composition, and their role in cardiometabolic disease in sub-Saharan African populations at different stages of the epidemiological transition (INDEPTH and Wits) <ul style="list-style-type: none"> • Proposal submitted to NIA: Given successful pre-proposal, development of full proposal 	 Q1 Q3-Q4

	<ul style="list-style-type: none"> Activities to start once funding is secured 	
EMBRACE - Maternal, Newborn & Child Health	<p>Implementation research on maternal, newborn and child health to strengthen continuum of care (JICA, MOFA, Japan Embassy and University of Tokyo)</p> <ul style="list-style-type: none"> JICA, MOFA, Japan Embassy & U Tokyo to sign agreement with GHS Meeting to launch activities and develop concrete action plan Formative research involving 3 centers (Dodowa, Kintampo and Navrongo) Intervention component to be implemented in one center (Kintampo most likely) 	<p>March 2012</p> <p>May-June 2012</p> <p>Q2</p> <p>Q4</p>
Sexual and Reproductive Health (SRH)	<p>Transitions to Adulthood (ASRH):</p> <p>Develop proposal for funding that will allow for series of studies based on a cohort of adolescence to be recruited and followed over time once funding secured</p> <ul style="list-style-type: none"> Concept note - first draft to be shared Rough review of reviews on ARH Group meeting in San Francisco prior to start of PAA Meeting with the centers in Accra Finalized concept note & final selection of centers to be included in the study Visiting funders and marketing concept/fund raising 	<p>April 2012</p> <p>April 2012</p> <p>Q2</p> <p>Q2</p> <p>Q3</p> <p>Q3-Q4</p>
Scientific Meetings		
INDEPTH Scientific Conference	<p>While the next ISC is scheduled for 2013, the planning will have to start right away. A major aspect of this preparation will entail drafting a proposal and raising funds for the next ISC.</p> <ul style="list-style-type: none"> Locate venue and agree on precise dates for meeting Liaise with SAC to identify and agree on the 2013 ISC theme Constitute various committees to work on different aspects of the planning process. Prepare and circulate call for the ISC detailing timelines for activities leading to the conference Develop a fund raising plan. 	<p>Q1</p> <p>Q1</p> <p>Q2</p> <p>Q2</p> <p>Q2-Q3</p>
Scientific Advisory Committee (SAC)	In 2012, the Secretariat will continue to tap into the rich	

	<p>experience of the SAC members and involve the SAC Members in more scientific activities.</p> <ul style="list-style-type: none"> • The SAC is expected to have several teleconferences in 2012. • Advise Board and Secretariat on all scientific issues • Contribute expertise to support proposal writing and fund raising effort 	Q2-Q4
	Scientific Products/Publications	
Publications of Cohort profiles	Compile, edit and publish member cohort profiles in the International Journal of Epidemiology (IJE)	All year round

Capacity Strengthening and Training

Head: Martin Bangha

Other Staff: Beatrice Mensah

Title	Proposed activities	Timelines
INDEPTH Scientific Development and Leadership Program (iSDLP),	<p>Building on previous successful INDEPTH training initiative, the long term training efforts will include but not limited to: a) continue supporting HDSS staff at Wits; b) Developing a track for data management scientists; c) Creating and/or identifying a career path for junior HDSS scientists/researchers (esp. MSc. graduates/Fellows) to move from masters to PhD and/or postdoctoral training; d) continue the INDEPTH Fellowship program.</p> <p><i>Ongoing MSc. PBFE (Wits)</i></p> <ul style="list-style-type: none"> • Support to two continuing students of 2011 cohort to ensure they complete and graduate • Continue building database on the training program, esp. the alumni (output and productivity) for other useful purposes • Work with Wits on the selection and accreditation of two new HDSS host training centers for the field attachment component • Support two new students on program for the 2012 cohort with particular attention to gender (i.e. increasing the quota of trained females graduates) • Coordinate with Wits and select HDSS field training centers to ensure the training of the corresponding students supervisors as well as organize the coordinators/supervisors meeting (when necessary) • Continue the small grant (Re-entry) program so as to enhance the capacities of young graduates to conceive and lead individual research project and thereby place them on career track. <p><i>Develop the Research Data Management (RDM) track</i></p> <ul style="list-style-type: none"> • Work with Wits on the accreditation/approval of the course through the graduate committee • Course planning and full curriculum development of the track • Set the criteria for admission or full requirements • Selection of the inaugural cohort of students (data managers) for training (number TBD) <p><i>Doctoral Level Training Efforts</i></p> <ul style="list-style-type: none"> • Provide partial support to students (HDSS young scientists) registered at local/national universities in home country to 	<p>Q1-Q2</p> <p>Q1-Q4</p> <p>Q1</p> <p>Q1-Q4</p> <p>Q2</p> <p>Q3-Q4</p> <p>Q1-Q4</p> <p>As and when</p>

	<p>facilitate completion of program</p> <ul style="list-style-type: none"> • Partial support to HDSS young scientists on sandwich doctoral programs in the North (in collaboration with Southern Universities). • Build PhD training into projects and major working group activities until the time when funds are secured establish own program • Identify other collaborative arrangements to facilitate PhD training of HDSS young scientists. 	possible
INDEPTH Fellowships	<p>In effort to build a pool of skilled indigenous young scientists/researchers at member HDSSs that lack adequate human resources (in specific areas):</p> <ul style="list-style-type: none"> • Continue to provide support for fellows (MSc +PhD holders) to be posted to centers that require assistance (2 fellows). 	Q3-Q4
Training Workshops	<p>Training workshops and short courses are quick to mount and remain a primary vehicle through which specific skills and improved methodological developments are conveyed to the wider membership.</p> <ul style="list-style-type: none"> • Coordinate such trainings with Science, especially the working groups, to ensure that all training is useful to the members, or serves to generate specific outputs. 	All year round
Young Scientists	<p>Solicit funding to organize a more comprehensive workshop with Cyril Engmann and Cheryl Moyer. This will cover topics that include but not limited to: identifying novel research questions; developing a research protocol; grant writing; drafting compelling manuscripts; identifying appropriate target journals for publication; etc.</p>	Q3-Q4
<i>Asian-specific event history analysis workshop</i>	<p>Work with the MADIMAH team to facilitate workshop(s) within the framework of the mortality analysis and/or migration (both theory and hands-on practical event history analysis of data) for the Asian HDSSs.</p> <p>Proposal submitted to IDRC Asia</p>	Jul-Dec 2012
<i>Workshop on data linkage</i>	<p>Several HDSSs have invested considerable efforts in linking demographic surveillance data with health facility data. A data linkage workshop is planned for first quarter. This will provide an opportunity for members to share experience in data linkage and hone in on the particular issues and potentials in the hope of coming up with the most efficient approaches to data linkage</p>	6-8 Feb 2012

	<p>for member centers.</p> <ul style="list-style-type: none"> To be hosted by Kintampo HDSS, the ultimate aim of this workshop is to come up with the most efficient approach that could be recommended to members going forward. 	
<i>Demonstrative analysis</i>	<p>A key short term strategy for strengthening the analytical capacities of young scientists at Member HDSSs and at same time increasing INDEPTH's scientific productivity is through demonstrative analysis.</p> <ul style="list-style-type: none"> Currently, we are planning to have a demonstrative analysis during the first half of 2012 on the seasonal analysis of mortality In consultation with the SAC and other senior scientists connected with the Network, we will identify other key research publications by INDEPTH members that can be used to conduct illustrative analysis for young scientists at other centers to replicate. 	<p>Q2-Q3</p> <p>Q4</p>
<i>Short Courses</i>	<p>Specialized courses also provide targeted training for scientists based at INDEPTH HDSSs. Short courses could be organized either as standalone seminars or in collaboration with partners Universities and research centers in Africa and Asia. Short courses of one or two week's duration will be offered in response to the needs of HDSS centers, and may include courses on data management, research study design, and longitudinal data analysis.</p> <ul style="list-style-type: none"> One short training is planned for 8 researchers from Asia and Africa in Yogyakarta, Indonesia under the framework of the EU-funded INTREC project Also short courses at IPSR at Mahidol University in Bangkok Thailand and other universities 	<p>Q1</p> <p>As and when possible</p>
Technical support to HDSS members	<p>Technical support to members will cover but not limited to the areas like field operations, instrument design, data entry and management procedures, etc.</p>	<p>As and when needed/possible</p>
<i>Mentorship program</i>	<p>Identify experienced scientists to visit member HDSSs (that express the need) as mentors for a week. During this time at the centers, the mentors are interact with the center directors and scientists, review their work plan, strategic/business plan, troubleshoot, identify opportunities and challenges, and suggest/recommend a way forward. The mentors' reports should provide the Secretariat with pointers to how the centers</p>	<p>As and when needed/possible</p>

	can be assisted as well as serve the respective centers on how to improve their performance.	
<i>Data management, cleaning and quality support</i>	<p>Following recent developments and the outcome of the mortality analysis, this seems to be the area that will demand more focus attention and resources.</p> <p>A technical support team will be set up to provide assistance to HDSSs in</p> <ul style="list-style-type: none"> • producing key routine health and demographic indicators; • Coordinate development of standardized and comparable longitudinal datasets for HDSS multicentre thematic analysis, • Run queries to identify and correct inconsistencies in data; • practice guidelines for longitudinal data management and analysis; • Train HDSS researchers on EHA and build capacity to analyze/interpret results; • Create a harmonized template for data quality checks, etc. • In this light a data quality meeting bringing together various data support groups (mortality analysis group, InterVA analysis, iSHARE, MADIMAH, Fertility group, INDEPTHstats, WHO/HMN) has been scheduled for March 12-14 2012 so as to coordinate the various efforts into an effective strategy of assisting members with data quality issues 	April-Dec 2012
<i>Support to improve on data systems</i>	<p>With FoxPro gradually not being supported by Microsoft/Fox Technologies, this poses a huge challenge for some HDSS members of the INDEPTH Network who now have to move the database management systems to more user-friendly and most widely used systems like SQL.</p> <ul style="list-style-type: none"> • The Secretariat will continue to collaborate with members to provide similar support when and where necessary. • Another such technical support is help some existing HDSSs currently doing paper capture to transition to paperless data capture • Piloting/eventual migration from the previous HRS platform and/or non-HRS platform to OpenHDS: we are keen on this process, and will be assisting members in this change. 	As and when needed/possible
<i>Facilitating technical exchange visits</i>	Exchange visit will be encouraged and facilitated between member centers to enhance the sharing and transfer of knowledge which is not only key to career development of	As and when needed/possible

	<p>technical staff but also vital for institutional collaboration. These include English upgrade attachments.</p> <ul style="list-style-type: none"> • We plan to support about two young scientists on the language upgrade and similarly about two exchange visits between HDSSs. 	
INDEPTH Member Survey	<ul style="list-style-type: none"> • Review of questionnaire to identify items that might be added, drop redundant and rephrase questions • Follow up and update data compiled from survey questionnaire 	Jan-June 2012
Long Term Training Facilities	<p>As part of the efforts to build sustainable capacity in health research at member HDSSs, one long term plan is to develop an INDEPTH Training Centre that will host series of activities (including advanced courses, workshops and seminars) to strengthen member capacity as well as house the Secretariat. Such a centre will be equipped with modern communication technology, incorporating the virtual classroom (distance learning and lectures) in our training and capacity strengthening efforts. This technology side will ensure that we not only deliver high level training to members but will also facilitate the use of highly qualified experts without most of the time having to move them away from their duty stations. This will appear expensive due to the initial financial investment involved. However, it will allow a long term cut in operational costs of delivering the much needed capacity training (conducting short courses, workshops, seminars and planning meetings).</p> <p>A draft proposal has been prepared to assist the ED in soliciting funding for these long term efforts.</p>	All year round

IT Support and Projects Administration

Head: Titus Tei

Other staff: Francis Ameni

Title	Proposed activities	Timelines
Pilot study. Improving rate of VA coding at HDSSs.	This study aims to test new thinking through the use of templates and SMS, to improve on the rate at which VAs are coded at the HDSSs. We would provide technical supervision and monitor the progress of the pilot study.	Q2
Piloting the Open HDS at one HDSS Centre.	Based on the Open HDS presentations at the 2011 ISC, the plan is to test the software in a real life situation in one HDSS, by organising the technical meetings and implementation of the trial.	Q2
Providing support to new and emerging HDSSs.	To continue to seek out potential HDSSs that are currently not members of the network and encourage them to join the fold. To support the establishment of new HDSS through technical assistance.	Q1-Q4
Promoting the use of INDEPTH developed tools.	Make available all INDEPTH tools e.g. SES tool, VA tool, HRWeb, Resource Kit and Social Autopsy tool, for use by member centres and scientists.	Q1-Q4
Platform for INDEPTH Facebook and INDEPTHStats.	To provide support for INDEPTH's visibility through Facebook and also the development of INDEPTHStats..	Q1
INDEPTH AGM 2012	To provide support for the hosting of the 2012 INDEPTH AGM as coordinators with online technical support	Q1-Q4
Moving the Secretariat Network platform from a Workgroup to a Domain.	In the attempt to improve documentation, security and overall performance, we plan to migrate the network environment from the current workgroup status to a domain.	Q2
INDEPTH RBM	Monitor outputs from the Network, analyse reports and evaluate overall performance of key Network activities, through the online metrics.	Q1
INDEPTH website	To revise and revamp the network website with up-to-date information and better security.	Q1
Data Sharing and Data	To improve these two platforms and enhance network outputs,	Q2-Q3

Documentation.	working with the iSHARE team	
Video Conferencing Equipment	To maximise the VCE usage and improve communication among network members and funders.	Q1-Q2
Proposal for funding bandwidth at the Secretariat and one HDSS field site with poor infrastructure.	Internet bandwidth constraints hamper work and affects timely responses to emails and data issues all across Africa. An attempt would be made to develop a proposal, that will look for funding the cost of adequate bandwidth at the Secretariat and one other HDSS field site within the Network	Q1

Communication & External Relations

Head: (JQ)

Other staff: (BJ)

Title	Proposed activities	Timelines
Communication Workshops	A workshop for selected INDEPTH centres on health and demographic communication	Q2
Media Exposure	Establish and maintain online exchanges with editors and managers of local and international media	As and when needed
International engagements (seminars, conferences)	Represent INDEPTH at relevant national, regional and international fora to make presentations and exhibit promotional materials and publications on research findings and project impact	Q1-Q4
Production of promotional materials	Calendars, Diaries etc.	Q4
Sponsorship	Sponsor one journalism award for excellence in health reporting. (Ghana and beyond)	As and when necessary
Advocacy	Work with relevant organizations to do a synthesis of INDEPTH's multi-centre research and contribution to specific health interventions	Q2-Q3
Website Redesign	Complete website redesign to give it a new improved look and feel and enhance accessibility and content management	Q1
Contribution to Fundraising	<ol style="list-style-type: none"> 1. Constantly review funding opportunities and bring these to the attention of other managers so as to collectively or individually write grant proposals as appropriate. 2. Be actively involved in developing proposals and sourcing for funds for ISC 2013 3. Pursue specific funding opportunities for the Communications and External Relations section 	Q1-Q4
Secretariat Communications policy	Finalize internal communications policy	Q1
Audio-visual outreach	Production of a 30-minute documentary on INDEPTH	Q1-Q3
Policy Engagement	Facilitate two major one-on-one meetings/interactive engagements with policy makers.	Q2-Q4

Information Dissemination to targeted audiences	<ol style="list-style-type: none"> 1. Production and dissemination of 4 quarterly electronic newsletters, 2011 Annual report 2. Manage and ensure greater utilization of the listserv by creating sub-groups and circulating at least one general e-mail per month 	Q1-Q4

General Administration

Head: Prof Osman Sankoh
Supported by: Sixtus Apaliyah

Title	Proposed activities	Timelines
Health Insurance Scheme	Implementing Health Insurance scheme for Staff	Q1
Midyear Staff evaluations	Performance appraisals of Staff	Q2 & Q4
Office Space	Movement of Staff from Annex to New Office	Q2
Renovation of Main Office	Painting of Office Building	Q2
Support to Activities	General Administrative Support to Research Activities	Q1-Q4
Staff Retreat	Development of 2013 work plan	December 2012
Human Resource Management	Leave Schedules etc	Q1 – Q4
Maintenance	General Management of INDEPTH Resources	Q1 – Q4

Finance

Head: Sixtus Apaliyah
Other staff: Adam Osman
Raymond Akparibo
Gloria Kessie

Title	Proposed activities	Timelines
Annual audit	PWC's annual audit	Jan-Feb 2012
Board Meeting	Preparation for Board meeting	March 2012
Form 990	Filing of form 990 with the USA IRS	May 2012
Financial reports to donors	Financial Reports to Donors	Q1-Q4
Budget	Budget/ forecast analysis	Q1-Q4
General financial activities	Strengthening financial controls	Q1-Q4
Mid Year Audit	PWC midyear review	Q3
Audit of Sub grantees	Annual review of Sub grantee	Q2 – Q4

Grants Administration

Staff: Felicia Manu

Title	Proposed activities	Timelines
Awards	Ensure that award letters are signed, copy retained and original returned to grantor both electronic and courier	As and when necessary
Reports to funders	Ensure technical and financial reports to funders are submitted	Q1-Q4
Sub-Grantees' reports	Ensure reports from sub-grants awarded by INDEPTH to member centres and partners are submitted on schedule	Q1-Q4
Sub-grants Contracts	Prepare contracts for sub-grants	As and when approved by ED
Projects Evaluation	Travel to at least 2 centres to assess status of funded activities, in consultation with the Finance manager	Q2-Q4