INDEPTH NETWORK

SECRETARIAT

WORK PLAN 2005

INDEPTH Network Secretariat
Accra, Ghana

December 2004

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Executive Summary

INDEPTH currently consists of **36 demographic surveillance system (DSS) field sites in 19 developing countries** that collectively monitor over 2,000,000 people at a household-level. The Network utilises the resources from its development partners to foster, fund and co-ordinate cross-site studies, multi-site research and other network-level activities.

Every year, the INDEPTH Secretariat develops a work plan to prioritise scientific and capacity building initiatives for the Network for a specific year. This work plan is based on the general INDEPTH Strategic Plan. In this document, the **Secretariat's Work Plan 2005** is presented.

The Secretariat has identified the following as key priority activities in 2005:

Scientific:
- Cause of Death, Health Equity II, and INDEPTH/ACAP collaboration
- Health Intervention Trials Platform, Adult Health and Aging, Migration and Urbanisation, Environment and Health
- Asia/Oceania working group – Fertility and NCD
- AGM 2005
- GC13 – if INDEPTH proposal is successful

Capacity Building:
- INDEPTH Scientific Development and Leadership Programme
- INDEPTH Senior Fellowship Programme
- Workshops: Data managers, Financial managers, Scientific Writing, Proposal development, GCP Training, and Analysis.

Administration:
- Fundraising for the Network
- Secretariat's support and networking
- Board of Trustees
- Scientific Advisory Committee

The Work Plan 2005 provides details of the processes involved in each of the strategic thrusts, informs on the current status of events, and charts a path to follow in 2005. Some of the activities presented will be carried over from 2004.

PART A

1. The Scientific Agenda – Working Groups

INDEPTH utilises Working Groups dedicated to key issues of interest to the Network. These groups are expected to act as generators and incubators for multi-site research and development projects. Members are encouraged to identify issues, conduct research, perform analyses, and help shape the future of the Network. Regrettably, however, most of these groups have not been active. Staff in the INDEPTH Secretariat have had to lead some of these groups in order to push their agenda forward. This should not be the case since it may impair the Secretariat from effectively performing its main functions.

Based on this experience, the Secretariat has made a clear distinction between a Working Group and an Interest Group. The Secretariat will accord such a group the full status of a ***Working Group*** if and only if it has **a defined research question with a draft proposal that will lead to a cross-site collaborative project within the INDEPTH research portfolio.**

The financial implication is that the Secretariat prepares budgets only for Working Groups. Interest groups compete for available funds.

The following are groups accorded Working Group status by the Secretariat for 2005.

1.1 Cause of death at INDEPTH Sites

Headed by Fred Binka, this group has continued to make efforts to analyze cause of death data from INDEPTH sites. Several challenges have been encountered. These include the difficulty concerning merging VA data collected through various coding procedures, and determining correct population denominators. Several analysis workshops have therefore been held to address these issues. The most recent workshop – VA coders, 8-10 December 2004 – brought for the first time those who do the actual coding of VA at sites to present their procedures, share experiences, and look at the possibility of agreeing on INDEPTH minimum core categories of death for coders using WHO ICD10.

Work Plan in 2005

Irrespective of the challenges, this group has progressed steadily especially in terms of editing site chapters and analysing the data. Further analysis and editorial work will be done in early 2005. The group hopes to complete the entire exercise and submit the work for publication in 2005.

Budget

1.2 Health Equity II

Phase II of the INDEPTH Health Equity Study deals with making interventions to have a pro-poor focus. Before Hanoi AGM in May 2004, the Secretariat funded the following projects:

- *Dikgale:* Evaluation of an outreach programme to increase participation of poor women in PMTCT programme in the Dikgale DSS, Limpopo Province, South Africa. **(Dec 2003 – Nov 2004; $37,900)**
- *Navrongo:* Will community lay counsellors improve access to voluntary counselling and HIV testing services for the poor in Ghana? **(Dec 2003 – Dec 2005; $90,990)**
- *Ifakara:* Reaching the poor with VCT and TOI. **(Dec 2004 – Dec 2004; $80,576)**

At the Hanoi AGM, it was agreed that the call for proposals be extended and a new deadline of 15 June 2004 was set. A total of twelve proposals from ten sites were received at the Secretariat.

The following six new proposals were approved and awards were subsequently made.

- *Rufiji, Tanzania*: Malaria and Poverty: The Equity-Effectiveness of the Tanzania National Voucher Scheme for Promoting ITN Coverage in South-East Tanzania: How much does the Poor Benefit? **(Aug 2004 – Sept 2005; $36,040)**
- *Kanchanaburi, Thailand*: Health Equity of the Elderly: Deployment of INDEPTH Tool **(Aug 2004 – Dec 2005; $10,000)**
- *Navrongo, Ghana*: Deploying the INDEPTH health equity tool in the Navrongo Demographic Surveillance Area **(Aug 2004 – Aug 2005; $49,660)**
- *Vadu, India*: Socio-Economic Status assessment of population for understanding Health Equity in the Vadu DSA **(Sept 2004 – Mar 2005; $25,410)**
- *Purworejo, Indonesia*: Measuring Socio-Economic Status in Purworejo DSS **(Sept 2004 – Jan 2005; $38,171)**
- *Agincourt, South Africa*: Evaluation of a pro-poor intervention to improve the health outcomes of the poorest of the poor in the Agincourt DSS **(Sept 2004 – Dec 2005; $36,000)**

It is expected that there will be end of year reports on all the projects by December 2004. These will be incorporated in INDEPTH annual reports to donors and there would be cross-site analysis at the final end of the projects.

Work Plan in 2005

The projects are expected to end in June 2005. Before that there will be a workshop for data analysis.

There are plans to develop further proposals for funding by other funding partners.

Budget

1.3 ACAP-INDEPTH Collaboration

Recognizing that both African censuses archived by ACAP and the Demographic Surveillance Systems (DSS) coordinated by the INDEPTH Network produce vast and complementary kinds of demographic data for Africa that offers an exciting potential to examine African population and health, a collaboration between the two institutions was consolidated. The main objective of this collaboration is to pool the resources and expertise of ACAP and INDEPTH to undertake high-quality joint research projects in order to inform demographic and health policy in Africa.

Achievements

With initial funding from the Rockefeller Foundation the collaboration began in 2002. This initial funding led to the production of a research proposal to secure further funding to address specific scientific questions, and eventually to broaden the participation of countries/sites for the long-term realization of the set objectives. Over the period of the grant considerable accomplishments were made. The Bellagio workshop on *Demography and Health in Africa* was convened where the strategy for the collaboration was outlined and a joint research agenda was adopted. A grant proposal was submitted to the National Institutes of Health (NIH) and several researchers and students have been integrated into the program.

A large amount of data has been acquired from both ACAP country-collaborators and the INDEPTH DSS sites identified for the initial phase. The datasets have been created for used in the programme and some preliminary analyses have been conducted using these data. Initial interest focused on comparable data analysis of geography or administrative regions by locating the exact census area covered by each DSS. For most of the sites a lower administrative district that houses the DSA was located and mortality indicators both from the DSS data and the census data compared. Another area of interest has been the relationship between poverty and health in Africa. Poverty, as we know, exacerbates ill health and often tends to negatively affect the health status of individuals. In the absence of reliable income data in Africa, one of the markers of poverty or socioeconomic status is ownership of durable assets and housing/household conditions. Data on these variables have been used to generate an index of poverty or socioeconomic status.

A number of data managers and researchers from Burkina Faso, Ghana, Mozambique, South Africa and Tanzania were provided the opportunity to spend some time at the University of Pennsylvania to work with researchers of the project on various aspects of the program and to acquaint themselves with some of the data analytical techniques. As part of the efforts to strengthen the technical expertise and analytical capacity of researchers in the collaborating countries, a researcher from one of the INDEPTH Network sites in Tanzania was accepted for the PhD training in Demography at the University of Pennsylvania. Finally, during the grant period results of the ongoing collaborative research have been presented and discussed at various scientific meetings. Also, during the grant period, Ayaga Bawah (current coordinator for the collaboration) received his PhD in Demography at the University of Penn and served as the Co-ordinator of this collaborative programme.

Work Plan in 2005

1.   Meetings are being planned in Burkina Faso, Ghana, Mozambique and South Africa, to engage the various INDEPTH sites in those countries with managers and officials of their respective census bureaus. The secretariat successfully coordinated and one such meeting in Tanzania last year. This was extremely useful as it has now set in motion a strong collaboration between the National Bureau of Statistics and the INDEPTH sites in

Tanzania. In similar vein, we have now planned others for the countries mentioned above. The sites in Tanzania have requested for technical assistance to help them analyze the census and DSS data, as has been started for Mozambique and Burkina Faso.

2. As part of the expected output from the collaboration, we outlined a scientific agenda including the production of peer reviewed scientific papers. Although we have done some preliminary analysis of the data acquired so far, we have planned detailed analysis which requires additional data. We plan to do detailed analysis using the data we have so far acquired during the no cost extension period.

3. The Co-Principal Investigators will meet in Philadelphia, USA to review progress of the collaboration and chart the way forward .

4. In order to fully engage and sustain the interest of the sites and to allow them to continue to provide data we request for this work, we plan to provide some modest support from the funds still unspent to allow them provide in a timely manner the rest of the data we are requesting for the detailed scientific analysis.

5. The Coordinator of the collaboration will visit Tanzania and other countries to provide such support over the course of the next six months.

Budget

$202,895.00

1.4 Asia/Oceania Group

At the Hanoi AGM, an INDEPTH Asia/Oceania group held a working group session for the first time. The group was convened by Nguyen Tran Hien (Filabavi DSS, Vietnam). Present were representatives from the following sites: Kanchanaburi, Thailand; Matlab and HSID, Bangladesh; Vadu and Ballabgarh, India; Filabavi, Vietnam; Purwojero, Indoesia; and Wosera, Papua New Guinea.

The group discussed the following issues: Mortality differentials – overall and cause-specific; Low prevalence of HIV / AIDS; •Increasing prevalence of NCDs; and Stronger health systems.

A strategic working workshop for Asia is planned August 2004 in Jakarta. The purpose would be to chart a common research agenda for Asian sites and to undertake strategic planning for training activities and identify regional and south-south training opportunities.

The Asia/Oceania meeting was held in Jogjakarta as planned in late August 2004. It was attended by site leaders and site representatives from 10 sites in Asia/Oceania. The INDEPTH Executive Director Prof. Fred Binka also participated. Two research areas, namely Reproductive Health and Adult Health, were identified as the common research ground among INDEPTH Asia/Oceania sites. Interested sites identified themselves with the groups and co-ordinators were appointed. The Asia-specific Adult Health group then decided to submit a grant proposal to the INDEPTH Secretariat and the Reproductive Health group agreed on a workshop in Bangkok to discuss the way forward.

The Asia/Oceania group has moved swiftly.

1) The **Asia-specific Adult Health group** has submitted a proposal on **NCD Risk Factor Surveillance** to the INDEPTH Secretariat. The overall aim of this study is to strengthen the capacity of Asia/Oceania DSS sites for NCD risk factor surveillance. Specific objectives are:
1. To collect information on NCD risk factors using STEP 1 and STEP 2 approaches of WHO standardized methods
2. To compare NCD risk factors data across sites
3. To incorporate appropriate elements of NCD risk factor module into regular surveillance of the DSS sites

The Secretariat arranged for expert review of the proposal. The reviews were generally good and the Asia/Oceania group has addressed the comments. A revised grant proposal was submitted and the Secretariat and the following funding was approved for the participating sites, totalling an amount of **$234,505**:

1.	Ballabgarh, India	-	8,976
2.	Chililab, Vietnam	-	24,706
3.	Filabavi, Vietnam	-	23,056
4.	HSID, Bangladesh	-	34,527
5.	Kanchanaburi, Thailand	-	29,101
6.	Matlab, Bangladesh	-	26,876
7.	Purworejo, Indonesia	-	31,680
8.	Vadu, India	-	28,446
9.	Watch, Bangladesh	-	18,590
10.	Equipment for all sites	-	8,547

2) The **Fertility Group** was funded by the Secretariat to meet in Bangkok, Thailand; 22-24 November 2004. The meeting was hosted by Kanchanaburi DSS.

Objective: To discuss the preparation of a monograph using longitudinal data on fertility and reproductive health among INDEPTH sites in the Asian region.

Participants:
1. Dr. Nguyen Thi Kim Chuc (Filabavi)
2. Dr. Kim Streatfield (Matlab)
3. Dr. Carel van Mels (HSID)
4. Dr. Siddhi Hirve (Vadu)
5. Dr. Siswanto Wilopo (Purworejo)
6. Dr. Sureeporn Punpuing (Kanchanaburi)
7. Dr. Abdullahel Hadi (Watch)

The group agreed to produce a monograph on fertility issues and proposed the following title: '**Linkages Between Poverty and Reproductive Health in Asian Countries: Evidence from Longitudinal Data'**.

The Asia-specific fertility group discussed data issues and agreed on a template for the publication. At the end a workshop was developed. A preliminary proposal to the Secretariat regarding further activities of the group is undergoing review.

Budget (Workshop)

- $20,000 for Adult Health group
- $20,000 for Reproductive Health group

1.5 Annual General and Scientific Meeting

The Annual General and Scientific Meeting (AGM) is the General Assembly of the Network that takes final decisions on issues tabled by the Board and/or the Executive Director. The AGM generates the scientific agenda through its working groups and reviews progress of joint work undertaken. In addition, INDEPTH utilises its AGM as a Scientific Forum for members to share their experiences in Demographic Surveillance in the form of presentations of scientific papers. Posters are also presented at the AGM especially by young scientists who are sponsored by the Network. The 4th AGM was held in Hanoi, Vietnam in May 2004. The 5th AGM will be held in Durban, South Africa in May 2005.

Budget

1.6 Grand Challenge 13

GC 13: Develop technologies that permit quantitative assessment of population health status

Together with the London School of Hygiene and Tropical Medicine, UK, the Swiss Tropical Institute in Basel, Switzerland and SattelLife, USA and ACAP, INDEPTH has recently submitted an LOI to the NIH for the Gates Grand Challenge 13. Building on the firm foundation of this network of surveillance sites, the goal of the proposed programme of research is to establish a fundamentally new sentinel health and disease surveillance model to inform optimal delivery and evaluation of interventions, strengthen health systems, and contribute to a global database for equitable health development.

Title:
Establishing a Sentinel Model of Population Health Surveillance for Measuring Health and Disease, Evaluating Interventions, and Guiding Equitable Health Policies in Developing Countries

Work Plan 2005

It is expected that there will be a host of activities. These would be funded by own GC13 funds.

1.7 Interest Groups

INDEPTH Health Intervention Trials Platform

The goal of this initiative is to enable participating INDEPTH sites compete effectively on the international arena for health intervention trials, thereby validate and confirm the intrinsic value of INDEPTH as a solid intervention trials platform in developing countries. The platform will focus on activities related but not limited to: Cohort identification; Epidemiology for current and other diseases; GCP/GLP; Ethics and Ethical certification from NIH and other established bodies elsewhere; and Data analysis for clinical trials.

Process
In March 2004 the Secretariat organised a meeting of site PIs in Accra to launch the establishment of the platform. Participants demonstrated enthusiasm and by the end of the workshop, two draft proposals for the first pre-proposals to the EDCTP were written. A second set of pre-proposals was also submitted to the EDCTP. Unfortunately, both attempts were unsuccessful.

The main goal of the Platform has been to develop a generic proposal that can be used to search for a larger grant for site capacity building. With Dr. Wendy Ewart facilitating, the Secretariat organised a second meeting of PIs in Accra, 16-20 November. Complete draft proposals were developed. These are now under review so that they could be submitted to appropriate funders for consideration.

Work Plan 2005
The group will submit two grant proposals on Malaria and HIV/AIDS in early 2007 to appropriate foundations. Results of the grant proposal applications would significantly affect the activities of this group. A training workshop on GCP will be hosted by Manhica DSS, Mozambique.

Adult Health and Aging

The increasing emergence of incidence of non-communicable diseases being witnessed in many developing countries, especially in Africa and Asia calls for an active program to monitor adult health. The Network would support sites that may be interested in collecting prospective data on the major risk factors, which predict chronic diseases in adults. An Adult Health and Aging workshop was held in Hanoi, Vietnam just before the AGM started.

Funded proposal

Project Title:	World Health Survey Study on Global Aging – INDEPTH Supplement
Project Duration:	2 years (FY2004 – FY2005)
Amount:	$175,000 (The INDEPTH Secretariat will manage the funds. We

expect transfer to be made soon from WHO)

This proposal supplements the NIA Interagency Agreement with the World Health Organization for the World Health Survey Study on Global Aging (SGA) by establishing linkages to the International Network for the continuous Demographic Evaluation of Populations and Their Health in developing countries (INDEPTH). The current SGA has three major components: (i) oversampling of the population over age 50 years in eight countries that completed the 2003 round of the World Health Survey (China, Ghana, India, Mexico, Morocco, Russian Federation,

South Africa and Zimbabwe); (ii) two rounds of longitudinal follow-up surveys among the older adult samples in each country as well as a smaller subset of adults under age 50 who completed the first interviews; (iii) cross-validation of the anchoring vignette approach to improving comparability of self-reported health measures, through implementation of measured performance tests on selected domains of health among a sub-sample of the older adult population.

Migration and Urbanisation

The migration & urbanisation study plans to conduct a comprehensive analysis of population migration and urbanisation trends across multiple countries and continents. INDEPTH will co-ordinate and standardise existing site-level data to enable the comparison of data and finding across multiple sites and countries. A workshop was held in Kisumu, Kenya in November 2004. The Secretariat is awaiting a report from the group.

Environment and Health

INDEPTH member sites have the capabilities to monitor the health consequences of environmental change. DSS data can be linked to geographic and meteorological data using remote sensing (RS) and geographical information system (GIS). The group met in Burkina Faso in October and developed a draft full grant proposal to be submitted to NIH.

Title: Climate Variability and Malaria in Africa and Asia

Research Aims

Over a five-year period, this project will combine new population-based malaria transmission data (parasitological and entomological) with climate variability data to develop an early warning system that will be used to predict changes in malaria transmission in Africa and Asia. Ultimately, we hope to develop a tool that will inform public health programs with well-targeted and cost-effective preventive response measures, so as to reduce transmission of malaria and malaria-related deaths particularly in children under five in Africa and Asia.

Budget for all Interest Groups

Part B

2. Capacity Building Activities

2.1 INDEPTH Scientific Development and Leadership Programme

One of INDEPTH's key missions is to strengthen the capacity of developing-country scientific research. In February 2005, it will launch a Masters Programme in Population-based Field Epidemiology at the University of Witwatersrand in Johannesburg, South Africa.

The eighteen-month course will combine face-to-face teaching with at least six months of fieldwork at INDEPTH sites in Navrongo (Ghana), Africa Centre (South Africa) and Ifakara (Tanzania). This will enable students to benefit from the wealth of data available at DSS sites, as well as drawing on the experience of multidisciplinary teams of epidemiologists, biostatisticians, demographers and social scientists. During the fieldwork period, teaching will be conducted through a distance-learning module.

The course will focus on five areas: Epidemiology; Biostatistics and data management; Demography and other social sciences; Information technologies for demographic and health surveillance; and Leadership.

The course aims to develop scientists who can identify and find solutions to key biomedical and public health problems that may be addressed by epidemiological or demographic studies. It will teach students how to plan, execute and analyse field-based scientific research, and give them the communication and leadership skills to explain and promote the research with different audiences, including policy-makers, donors and academics.

In its first year, the Masters programme will train between ten and fifteen students mostly from INDEPTH sites across the developing world. It is hoped that after three years, the University of Witwatersrand will continue to develop the program.

<u>Funding from the Gates Foundation</u>

The INDEPTH Secretariat was successful in securing funding from the Gates Foundation -- $551,821.

Funds were requested specifically to:
1) Support the University of the Witwatersrand, South Africa to develop the new M.Sc. programme, recruit a scientific co-ordinator, develop a distance-learning component in the second year to increase student-time at field sites, and build capacity to continue the programme after the end of the initial support from INDEPTH.
2) Enable INDEPTH award five scholarships to students from INDEPTH sites each year for three years.
3) Enable the INDEPTH Secretariat to effectively manage the activities of the programme.

Current Status
  a. Curriculum has been developed and the program is set to start in January 2005 at WITS.
  b. Contract between INDEPTH and WITS signed.
  c. First progress report has been submitted by WITS
  d. INDEPTH second year support ($100,000) to WITS has been transferred.

e. Memoranda of Understanding (MOU) have been signed between INDEPTH and the 3 learning sites and first year support (**$50,000**), (2 years in the case of ACDIS) has been transferred to the sites to enable them start necessary preparations.
f. Call for a course coordinator (WITS) has been published on the WHO/TDR website, INDEPTH website, and other media.
g. Course has been advertised and students have applied and been selected.
h. A 5-member INDEPTH fellowship review panel has been set up.
i. INDEPTH fellowship application forms have been sent out to selected students.
j. Initial discussions have taken place between INDEPTH/WITS/LSHTM to explore the possibility of working together to develop the DBL component of the INDEPTH/WITS MSc.

Work Plan 2005

1. The INDEPTH fellowship panel will review applications submitted and award 5 INDEPTH fellowships shortly (December 2004)
2. First batch of admissions – January 2005
3. Choose Partner(s) to join INDEPTH and University of Witwatersrand in the development of Distance Learning Component and source for funding. This calls for the development of a joint proposal. Initial discussions with the LSHTM look encouraging.
4. Review and planning meeting at WITS. This would include coordinators from Learning Sites – (April 2005).
5. Co-ordination of Leadership programme from INDEPTH Secretariat

Budget

2.2 INDEPTH Senior Fellowship Programme

It has become evident over the years that INDEPTH sites have become increasingly busy with site-specific work to the extent that participating in network activities is a great challenge for many of the sites.

To help this situation, the Secretariat plans to establish an INDEPTH Senior Fellowship Programme. The programme will recruit senior-level people to work at sites. The main focus would be to:

1. Develop collaborations
2. Develop capacity to analyse …. (NOT CLEAR)

The Secretariat hopes to develop this concept further and approach funders and/or appropriate collaborating institutions to partner the Network in developing the programme.

In 2005, the Secretariat will develop a proposal with PopCouncil to seek funding from Hewlett Foundation.

Budget

2.3 INDEPTH Capacity Building Workshops

In 2004 the Secretariat organised a series of **capacity-building workshops**. These were: 1) Data Managers Workshop; 2) Financial Managers Workshop; 3) DSS Leadership and Management Workshop; 4) Scientific Writing Workshop; and 5) VA Coders Workshop.

Based on feedback from participants (see below an example and evaluation of the financial managers workshop) and assessment by the Secretariat of how productive and important the previous workshops were, the following workshops will be held in 2005.

Data Managers

The INDEPTH Secretariat encounters a lot of difficulties getting data from DSS sites for network level activities. Even though DSS sites generate and store large volumes of data, it is so difficult to get anything out of them. Data Managers have to grapple with difficulties caused by a multiplicity of factors: Technological Constraints; Human Resource Constraints; and absence of effective support network for database systems used in DSS sites.

These sentiments have been raised in various INDEPTH meetings including AGM2003, SQL meeting held in South Africa 2003, and the Data Managers Meeting held in Ho in June 2004. Meanwhile, skills and expertise exist within the network that can be harnessed to the benefit of more member sites.

This meeting will provide a forum that will facilitate sharing of experiences, solutions, and other related issues to ensure that the data is readily provided for network-level activities. Based on the success of the 2004 meeting the Secretariat has decided to continue with this programme.

Objectives

The objectives of this meeting are to:
  i. Bring together Data Managers and Statisticians from all sites to discuss difficulties they encounter in data management within the sites.
 ii. Discuss how these problems can be overcome with the support of the network. Training sessions will include:
      a. Understanding the fundamentals of an RDB and most importantly how to design add-ons to an existing
      b. The use of STATA to build work files for mortality and fertility analysis.
      c. Using SQL for data extraction and analysis
iii. To enable the INDEPTH Secretariat share/discuss various issues with Data Managers that will enhance smooth communication between the Secretariat and the INDEPTH sites, with regards to the information.
 iv. To discuss the promotion of site visibility and information dissemination through websites.

Expected Outcomes

The objectives of this meeting are to:

  i. Bring together Data Managers and Statisticians from all sites to discuss difficulties they encounter in data management within the sites.
 ii. Discuss how these problems can be overcome with the support of the network. Training sessions will include:

a. Understanding the fundamentals of an RDB and most importantly how to design add-ons to an existing
b. The use of STATA to build work files for mortality and fertility analysis.
c. Using SQL for data extraction and analysis

iii. To enable the INDEPTH Secretariat share/discuss various issues with Data Managers that will enhance smooth communication between the Secretariat and the INDEPTH sites, with regards to the information.

iv. To discuss the promotion of site visibility and information dissemination through websites.

Budget

<u>Scientific Writing</u>

With funding from the Wellcome Trust, the INDEPTH Secretariat organised a workshop on scientific writing in Accra, Ghana from 6-10 December 2004. Starting with a selection pre-selection process in which INDEPTH young scientists submitted abstracts and later drafts of full papers intended for publication in international journals, the INDEPTH Secretariat arranged for reviews of the 12 selected papers and authors were brought to Accra to address the reviewers' comments under the guidance of experienced facilitators. All INDEPTH sites were invited to take part in the process. All scientists who could submit a draft of their papers for review were invited to the workshop. Full papers reviewed came from Filabavi DSS (Vietnam), Matlab DSS (Bangladesh), Purworejo DSS (Indonesia), Navrongo DSS (Ghana), Nairobi DSS (Kenya), Agincourt DSS (South Africa), Digkale DSS (South Africa) and Africa Centre DSS (South Africa). The authors were honoured to have Prof. Peter Smith at the London School of Hygiene and Tropical Medicine was the lead facilitator. Dr. K. Koram at the Noguchi Memoriam Institute for Medical Research in Accra also provided expert guidance. The objective of the workshop was to expand possibilities for INDEPTH young scientists to get good results published. By the end of the workshop, all our authors almost completed their papers. The authors hope to submit their papers to identified journals soon.

Since the pilot workshop went well, a similar workshop with the same objectives will be held in 2005.

Specific Objectives:

- To help scientists in INDEPTH sites develop the ability to communicate their thoughts effectively through writing;
- To build skills for writing in peer-reviewed journals;
- To understand how the peer-review process works and to gain some experience of peer-review on own writing; and
- To facilitate peer-review and feedback on a set of DSS focused papers among developing country researchers and practitioners.

Sample feedback from participants at the INDEPTH workshops

----- Original Message -----

From: Sirajul Islam

Sent: Thursday, October 21, 2004 4:06 AM

Subject: Re: Thanks - INDEPTH Leadership and Financial Managers workshops

Dear All:

First of all thanks a lot to the INDEPTH officials…The workshop was well-organised and I personally enjoyed it very much. I learnt a lot from the presentations of my friends attended the workshop as Finance Managers from different sites of Asia, Africa and Australia. The presentations and discussions were lively for the smart and talented facilitations of Tony and Joseph. … Beyond the formal sessions, the cross-cultural experiences that we shared during our interactions both with the Finance Managers, Site Managers and Experts at social gatherings have also significantly increased our knowledge on the socio-economic and traditional norms and values of our respective countries and regions.

Sincerely,

Md. Sirajul Islam Molla
Division Coordination Manager
and Finance Manager of Field Sites

----- Original Message -----

From: Betuel S

Sent: Tuesday, October 19, 2004 1:24 PM

Subject: RE: Thanks - INDEPTH Leadership and Financial Managers workshops

Dear All

Thank you to INDEPTH team and the facilitators, for the opportunity to better understand leadership and financial management.

We (Gonzalo and I) arrived Maputo, Manhiça safely.

Betuel Sigauque, MD

Manhiça health research center

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Mozambique

Workshop: FINANCIAL MANAGERS – Ho, Ghana 12-15 Oct 2004	Average Grade
Overall content of the workshop	4
Facilitation	
- Capability	5
- Method used	5
- Interaction with participants	5
Sessions	
- Relevance of the joint sessions	4
- Appropraiteness of the talks	4
- Number of presentations per session	4
- Length of presentations	4
- Discussions	4
Presentations	
- Value of site presentations	4
- Duration of presentations	4
Relevance	
- To your work at the DSS site	5
- To your ability to contribute to INDEPTH	4
Your contribution	
- Assessment of your presentation	4
- Assessment of your overall contribution to the workshop	4
General atmosphere	4
Travel arrangements	
- visa	4
- airport pickup and assistance	3
Venue	
- Accommodation	5
- Conference facilities	4
- Meals	4
- social events	4
Overall administration/organisation	4

The following topics were covered in the **Financial Managers** Workshop: *The role of the finance manager, budgeting, internal control, accounting systems, corporate governance, fraud and irregularity*. Indicate, if any, topics that should also be considered in future workshops and/or those above that need more focus.

Strategic planning and management; Costing; Social responsibility; leadership skills; time management; communication skills

2.4 Health Informatics

The objectives of this activity are:

1. Technical support to the University of Ghana to develop a new programme in **HEALTH INFORMATICS** to strengthen the capacity in research and use of computer-based tools and information management in health care delivery: data storage, information retrieval, data analysis, and data communication
2. Develop capacity of INDEPTH member-sites by supporting 2-3 students from INDEPTH sites to participate in this programme. The purpose is to develop people who can take over from Prof. Bruce Macleod (University of South Maim, USA) who has so far been responsible for the development and support of the HRS software that is used by quite a number of INDEPTH Sites.

Programme

The new programme is a multi-disciplinary arrangement between the School of Public Health and the Computer Science Department, which will award an MPH in Health Informatics.

All trainees should be formal degree candidates. Program will encourage application from nurses, physicians, researchers, medical librarians, and other health research professionals.

This programme will focus on capacity building that combines knowledge of current application of computers in the field with a broad appreciation of the issues involved in the management and use of Health Information Systems. The emphasis of this programme will be on the scientific methods required to build systems that process health information systems in a useful way.

INDEPTH'S Strategy

INDEPTH will support Professor Bruce Macleod's time in the development of the new programme. Bruce Macleod has worked extensively with INDEPTH sites in supporting the Household Registration System (HRS), and will be working with the University of Ghana to develop this new programme which will have a focus on longitudinal systems.

Expected Outcome

  i. New 1yr MPH programme in Health Informatics.
 ii. 2-3 students from INDEPTH sites supported to undertake this course.
iii. Train personnel in the health sector on this programme.

Work Plan 2005

1. Approval of Academic Board March 2005
2. Development of curriculum January – June 2005
3. Advertisement and Student – June- July 2005
4. Programme starts - September 2005

Budget

3. Secretariat

The principal overall responsibilities of the Secretariat are to:
- Identify key health and social issues and questions that need to be investigated
- Maintain donor relations and generate funding for network-level studies and evaluations
- Efficiently coordinate and support the conduct of network studies and evaluations
- Publish and disseminate results to impact health and social policy and practice
- Promote DSS and its capabilities
- Position INDEPTH among regional and international institutions

In addition to the above responsibilities, the Secretariat provides diverse support services to INDEPTH sites.

3.1 Fundraising for the Network

The Secretariat will take fundraising as a priority activity in 2005. All efforts will be put on writing proposals and getting core funding.

3.1.1 Proposals Submitted in 2004

a) Gates Grand Challenge 13 (see Sections1.6 and 4.2; status: awaiting results in early 2005)

> Title: Establishing a Sentinel Model of Population Health Surveillance for Measuring Health and Disease, Evaluating Interventions, and Guiding Equitable Health Policies in Developing Countries

b) EDCTP

The following titles of LOIs were submitted to EDCTP in response to two separate calls. None was successful.

First Call

Title: A randomised multi-center phase ii/iii drug trial for uncomplicated malaria in children comparing artemisinin combination to chloroquine and sulphadoxine-pyrimethamine + amodiaquine

Title: Developing the capacity to conduct multi-centre trials of HIV treatment in sub Saharan Africa

Second Call

Title: Capacity building in, and preparation of INDEPTH Sites for the conduct of malaria candidate vaccine trials.

Title: Developing the capacity to conduct multi-centre trials of HIV vaccines and microbicides in Sub-Saharan Africa.

c) Gates Foundation (Successful. See section 2.1)
INDEPTH Scientific Development and Leadership Programme.

d) DFID, UK

   i- Improving Maternal and Child Health in Africa and Asia: Utilizing Demographic Surveillance Technologies from INDEPTH Sites (Unsuccessful)

ii- In collaboration with external institutions
    1. Bridging the Gap: Translating Sexual and Reproductive Health Rights into Policy and Practice (Sussex, LSHTM, etc.) – LOI successful. Full proposal by January 2005
    2. Communicable Diseases (LSHTM) – LOI successful. Full proposal by January 2005

Current funding status of the Network

a) The third (<u>final</u>) year of core funding from the **Rockefeller Foundation** and the **Wellcome Trust** will end in June 2005. (Rockefeller Foundation: $500,000/year; Wellcome Trust: $100,000/year).
b) Funding from the **World Bank** will end in **December 2004**.
c) There is continued funding from **Sida/SAREC** for the period 2004-2007 of an amount of SEK 1.5M (about $150,000) per year.
d) Recently, the Secretariat received funding of $575,000 from the **Gates Foundation** for the Scientific Development and Leadership Programme.

3.1.2 Strategies for raising Core Funding

a) *Expand the funder-base – approach new funders*

i- The Secretariat will develop a new generic grant proposal for core funding which will be sent to potential **new** funders: e.g. **USAID, Ford Foundation, Hewlett Foundation.** It should however be noted that many of the foundations do not accept <u>unsolicited grants proposals</u>. Efforts have been ongoing in the Secretariat to prepare a comprehensive database of potential funders.

ii- The Secretariat will organise a London-type INDEPTH-funder meeting:

    <u>Options</u>

    1. Work with a current INDEPTH funder to host a meeting of funder-colleagues in which INDEPTH will be presented. An INDEPTH-funder meeting hosted by Sida/SAREC, for instance, would have a higher chance to be attended by many funder-colleagues.
    2. INDEPTH hosts a meeting of invited funders at one of its sites (e.g. Navrongo, Nouna, Manhica, Ifakara) where DSS activities could be showcased.
    3. Invite potential funders to AGM 2005 and hold a meeting of fundrers. This is always a good opportunity for funders to experience science generated by DSS. Donors who have attended INDEPTH AGMs have always said that they were glad they did since it was possible for them to know INDEPTH and the sites better than from reading reports sent to them.

iii- Involve the SAC and Board: The Secretariat would expect Board and SAC members to contribute towards its fundraising efforts. Members could contact colleagues in funding agencies to introduce INDEPTH.

b) *Visit by INDEPTH staff to seats of current funders to present Network's progress*

The Executive Director began intensifying fundraising efforts with a trip to the US in mid August 2004 in which he held presentations at the **Rockefeller Foundation** and at the **World**

Bank. He also explored further opportunities. There is need to have similar presentations at the **Wellcome Trust** in London and **Sida/SAREC** in Stockholm.

3.1.3 Strategies for raising Research Funding

The Secretariat is particularly concerned about the apparent lack of research funding for the Network. Ideally, research grant proposals should be written by INDEPTH working groups which are expected to serve as the research engine of the Network. This has however not been successful.

Only two groups have been able to raise a substantial research funds -- the **Health Equity Group** from the World Bank and the **ACAP/INDEPTH** group from Rockefeller Foundation. Both grants will however end soon. The **Adult Health** group was able to secure a sub-grant to WHO.

The Secretariat expects the situation to improve in 2005. For instance, the Environment and Health has drafted an NIH grant proposal. The Health Intervention Trials Platform is also completing two grant proposals.

The Secretariat will continue to motivate the working groups to develop grant proposals and submit them for funding. It is hoped that the Secretariat will be able to raise some funds through research-based grants for its co-ordinating role.

3.1.4 Strategies for raising Capacity Building Funding

As mentioned earlier, the Secretariat was able to secure funding from the **Gates Foundation** for the **INDEPTH Scientific Development and Leadership Programme**. Also, funding was received from the **Wellcome Trust** for the **INDEPTH Scientific Writing Workshop**.

The Secretariat will continue to contact various foundations to provide full or part funding for its capacity building activities. These funds will augment the strides by the Secretariat to raise core funds.

The Secretariat has asked Prof. Stig Wall (SAC member) to guide it regarding seeking partnership with external institutions in co-funding INDEPTH training workshops.

3.1.5 Other strategies

There will be need for the Secretariat to strengthen existing collaborations such as ACAP-INDEPTH and pursue new collaborations.

Currently, the Secretariat is working on the following DFID proposals.

1. **Bridging the Gap: Translating Sexual and Reproductive Health Rights into Policy and Practice**
Collaborators
    a. The Institute of Development Studies (IDS), University of Sussex, UK (lead)
    b. London School of Hygiene and Tropical Medicine
    c. INDEPTH Network,
    d. EngenderHealth
    e. African Population and Health Research Centre
    f. BRAC Bangladesh

2. Communicable disease knowledge programme.
<u>Collaborators</u>
STI,
KNCV Tuberculosis Foundation (Amsterdam),
ZAMBART (Zambia),
Ifakara Centre (Tanzania), Mekerere University(Uganda),
Centre for Health Research and Development (India)
INDEPTH Network

Budget

3.2 Integrating DSS Funding in National Programmes

As it becomes increasingly difficult for sites to secure funding for core DSS activities, the Secretariat is convinced that international funders would be better attracted to funding core DSS activities if they saw the evidence of national governments partially supporting the sites. For instance, donors such as the World Bank usually fund national programmes rather than smaller institutions. Consequently, relevant ministries should be urged to include core funding for DSS in their funding proposals to multilateral agencies.

As a pilot project, the Secretariat wishes to start with the Ministries of Health in Ghana and Tanzania.

Budget

3.3 Staff

INDEPTH is led by the Secretariat, headed by a full-time Executive Director. Additional network support capabilities are to be provided through a Communications and External Relations Manager, an IT Manager, an Administrative Officer, an Accountant and an Administrative Secretary.

GC13 Proposal: If successful, additional staff would be recruited. The following positions were budgeted for:

- Manager at 0.125 FTE
- Administrator at 0.25 FTE
- Accountant at 0.25 FTE
- Database administrator at 0.25 FTE
- Secretary at 0.25 FTE
- Health Economist – full time

There would also be senior fellows for some sites.

Budget

3.4 Board of Trustees

The Board's primary role is to provide oversight and accountability for the activities of the Secretariat and the Network as a whole.

The Board had two face-to-face conferences and one telephone conference in 2004.

In 2005 we expect the Board to hold at least two face-to-face and two telephone conferences.

<u>Important Information on the Board</u>

- At the Hanoi AGM, site leaders suggested that **rules for Board elections should be modified** to enable a more effective participation in the election process, i.e., nominations should close a day before elections at the AGM.
  Article 29(vi)(j) reads: *Nominations of candidates for election to the Executive Council shall be published to all members entitled to attend and vote at the Annual General Meeting with sufficient notice prior to the election.*
  The Secretariat consulted its legal adviser. He has provided the following draft resolution amending Article 29(vi)(j) of the Regulations:
  Nominations of candidates for the election to the Executive Council shall close 24 hours before elections at the Annual General Meeting and the names of all nominees shall be published to all members entitled to attend and vote at the Annual General Meeting.
- **Details for next elections**:
  Two members (**Bocar Kouyate** and **Nguyen T.K. Chuc**), elected in 2002, are due for retirement at AGM 2005 having served a term of two years each from their re-election in Accra 2003. One member (**Hassan Mshinda**), elected in 2003, is due for re-election for a one-year term.

  Appointed Board members **Regina Rabinovich, Anita Sandstrom** and **Don de Savigny** are eligible to serve a maximum of two years per term and a maximum of two consecutive terms. **Don de Savigny** will have served two years by AGM 2005 and is eligible for a second and final term of two years.

- The Board should consider whether there is need for training for the Board.

Budget

3.5 Scientific Advisory Committee

The Scientific Advisory Committee provides guidance, scientific review and leadership to the Secretariat and the Board, in maintaining focus on critical health, population and social issues and areas of greatest potential impact. The SAC provides advice and recommendations on the research and development portfolio of the Network.

In 2004 the SAC had one face-to-face and one telephone conference in 2004.

At a recent meeting, the SAC requested to have several more telephone conferences. We therefore expect that the SAC will at least one face-two-face conference and three teleconferences in 2005.

Other information

The Board should consider the following issues:
- Rotation of SAC members
- Terms of office of SAC members

Budget

3.6 Web sites – improving Internet access for member sites

Background
A number of INDEPTH sites either do not have their own websites or where they do, are buried in a "small corner" of the parent organisation's website. This situation does not give DSS sites the prominence and visibility that they need. The INDEPTH Secretariat therefore undertook the initiative to help interested sites develop their own websites. So far INDEPTH has registered domains and created websites for 6 DSS sites. The Secretariat also has a website. The experience so far has been that after the sites have been created, the content is not updated regularly. The Secretariat is therefore instituting the INDEPTH Prize for the best website i.e. the site has most content and is updated frequently.

Objectives
   i.   Provide more visibility for INDEPTH member-sites
   ii. Facilitate information dissemination
   iii. Encourage INDEPTH sites (with own websites) to update their websites regularly with content
   iv. Encourage DSS sites that do not have websites to develop websites
   v. Renew domain registrations and maintain existing sites

Expected Outcomes
   -   Websites Created
   -   More visibility created for DSS sites
   -   Declare winner of website that is most regularly updated with content
   -   Renewed domain names
   -   Websites maintained / Updated

Processs
The Secretariat made an offer to INDEPTH sites who wanted websites developed for them. The responses were very slow, but a few sites took advantage of the offer. The Secretariat registered domains and developed the websites using material provided by the sites.

Current Status
The under-listed sites have been developed so far:
   1. Navrongo (www.navrongo.org)
   2. Butajira (www.butajira.org)
   3. Brac   (www.bracdss.org)
   4. Magu   (www.magudss.net)
   5. Dikgale (www.dikgale.org)
   6. Manhica (www.manhica.org)
   7. Indepth (www.indepth-network.net, www.indepth-network.org)

Work Plan 2005
The next steps in 2005 are as ff:

   1. Secretariat's offer is still open. Encourage interested sites to take advantage
   2. Maintenance of current websites
   3. Workshop to bring together site information managers
   4. Awarding prize for best website.

Budget

3.7 COLLEXIS –SHARED Knowledge
SIDA / INDEPTH PROJECT

Background

The Collexis® technology suite this was originally developed in a prototype version to match across jargon, languages and large, distributed data systems. The motivation for that objective came from an EC funded, collaborative project (Concerted Action, SHARED 1996-2002) in which The Netherlands Organization for Scientific Research (NWO, The Netherlands) and the Deutsche Gesellschaft fur Technische Zusammenarbeit (GTZ, Germany) took the technical lead in software development, in close reciprocal consultation with the operational partners from Developing Countries.

Through the University of Rotterdam, NWO financed the development of the prototype of what is now known as **the FingerPrinting technology**, and retained the Intellectual Property Rights of that technology.

Later, when the SHARED and the FingerPrinting technology appeared to have commercial value, a spin-off company was created (Collexis B.V). Collexis acquired the Intellectual Property Rights of the technology from the technical developers (NWO and GTZ). Part of the arrangement was the availability of the software free of license for qualifying organizations working in or for Developing Countries. At a later stage, the SHARED initiative included additional partners from Southern regions. Several of these partners have created "in house" development and support capacity for the **Collexis® technology** and these partners also have complementary technology to offer to the network.

I2A is a not-for-profit initiative, originating from the SHARED project and enabled by the structural partnership with prominent public partners in the various regions. I2A has negotiated with Collexis that Collexis® Fingerprints representing valuable Collexions in the private sector, such as Elsevier science, all free medical and agricultural journals, E-BioSci, all HINARI publishers, GeneBio/SwissProt etc., will be made available under conditions restricted to non-commercial use. In addition, all Fingerprints of valuable content made and published by any I2A customer under the free license of I2A will be public domain.

Objectives

  i. The main goal of the proposed Sida project is to offer all technology and content available to I2A (**FingerPrinting technologies)** from the practical work of all INDEPTH members, initially via an ASP at the headquarters, possibly followed by local installations where desired. Connecting the content of INDEPTH interactively to major health information resources like the Cochrane Library, MedLine and Free Medical Journals will be the scope of the first common project.

  ii. Connecting INDEPTH to the global initiatives that are set up to connect all available genetic, proteomic and epidemiological data, like E-BioSci is an ambition.

Approach

The approach would be to leave the static part of the INDEPTH site exactly as it is, but equip it with a link to an interactive application where each text record that INDEPTH holds in its databases is fingerprinted and interactively linked to a large number of resources.

A link of all experts of INDEPTH via I-Research is another ambition. INDEPTH could play an important role in stimulating the participation of health and population research institutions and councils in it's 18 member countries. The expert profiles of all relevant people for INDEPTH can be drawn from I-Research, and additional specific profiles can be created for INDEPTH were appropriate. This will strongly support the networking objectives of INDEPTH and also increase the visibility of its expert around the world in the field of clinical and social epidemiological research areas.

Finally, this project will prepare INDEPTH to be one of the first networks to implement the meta-analysis software currently developed at the University of Rotterdam as soon as it becomes a Collexis product and consequently becomes freely available under the I2A license

Expected Outcome

Collexis technologies installed and accessible from INDEPTH

Current Status
- The development of the Collexis INDEPTH application was delayed. However a BETA version this finger-printing software has been installed on the Server, and the ICT manager at the Secretariat has tested this software and made comments.
- Technical training on the development and use of the Collexis ASP application took place in Cape Town (August 2004) and INDEPTH participated in the training.
- A revised version of the application which addresses some concerns raised by INDEPTH has been installed for INDEPTH to continue testing the application.
- 22 INDEPTH websites and content on the INDEPTH website have been finger-printed and are available in the INDEPTH ASP application.

Work Plan 2005

i.   Conclude testing of product
ii. Demonstration and training for INDEPTH Secretariat Staff
iii. Training of INDEPTH member-sites in the use of the Collexis application
iv. Collection of more material / content to be finger-printed

3.8 Other Activities

<u>Running of the Secretariat</u>

This concerns all other institutional costs that are not covered in activities described above. For instance, travel by Secretariat Staff, procurement of capital equipment and rent of office space, printing of promotional materials and annual reports, stationery, and vehicle use.

<u>Visits to INDEPTH Sites</u>

The Secretariat has considered it worthwhile to make visits to member sites. Several sites were visited in 2004. Site visits are expected in 2005 but these will have to be linked to specific objectives.

<u>Support to INDEPTH Sites for Technical Exchange Visits</u>

Several requests to the INDEPTH Secretariat were made in 2004 by member sites who wanted to exchange technical visits to learn what the other does. The Secretariat supports this technical site exchange visits since they also give the opportunity to the non scientific staff at INDEPTH sites to travel and see what operates in other sites.

Budget

4. Budget and Projections

4.1 Budget

<mark>(To be finalised with the ED)</mark>

4.2 Projections and Scenarios
+
The following is the worse case scenario for 2005 and 2006 if no additional funding is raised.

Funder	2005	2006
Rockefeller Foundation	$450,000	
Wellcome Trust	$100,000	
Sida/SAREC	$148,500	$150,000
Total	**$698,500**	**$150,000**

However, if the INDEPTH GC 13 grant proposal is successful, it will considerably improve the funding situation of the Network. The following is a summary of the requested funds in the proposal.

Budget line items	Year1	Year2	Year3	Year4	Year5	Total
Personnel	489,400	577,395	564,921	534,719.45	174,668.25	2,161,103.70
Fringe benefits	73,410	86,609.25	84,738.15	53,207.92	26,200.24	324,165.56
Travel	37,955	45,049	43,401.45	31,779.66	17,334.28	175,519.39
Equipment	28,000	6,000				34,000
Other Supplies	385,040	182,890	210,625.50	107,193.02	70,620.91	956,369.43
Contracted Services	49,000	95,200	71,460	27,783	29,172.15	272,615.15
Sub grants to other organisations	2,180,942.86	2,070,001.47	1,516,210.09	1,538,189.62	690,706.97	7,996,051,01
Consultants	62,000	12,600	13,230	11,113.20	5,834.43	104,777.63
Indirect costs	164,520.75	149,961.49	148,256.42	87,869.44	48,574.54	659,483.77
Total Grant Request	**3,470,268.61**	**3,225,706.21**	**2,652,842.61**	**2,211,855.31**	**1,063,111.76**	**12,684,085.63**