

# **INDEPTH NETWORK**

## **WORK PLAN 2007**

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## **Introduction**

INDEPTH currently consists of 37 demographic surveillance system (DSS) sites in 19 developing countries that collectively monitor over 2,000,000 people at a household-level. The Network utilises the resources it raises from funders to foster, fund and co-ordinate cross-site studies, multi-site research and other capacity-building/strengthening activities.

This work plan prioritises scientific, capacity building/strengthening and administrative activities for the Network for the year 2007, based on the general INDEPTH Strategic Plan 2004-2009. The work plan 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 2007.

The activities presented are mostly carried over from the previous year. The new activities include the launch of a short-term fellowships programme for DSS and universities in Ghana, Kenya and South Africa; working on a proposal (and implementing the activities, if funded) on developing an INDEPTH data system that should facilitate a more effective access to and dissemination of DSS-generated data; and working on a proposal (and implementing the activities, if funded) for DSS sites to conduct Phase IV trials of drugs.

This work plan has not included activities related to the Malaria Clinical Trials Alliance (MCTA). A separate work plan for MCTA is available.

Following is a summary of the areas of work presented in the work plan.

### **Scientific activities:**

- Cause of Death
- Health Intervention Trials Platform – HIV/AIDS (ART rollout)
- Adult Health and Aging
- Migration and Urbanisation
- NCD Monitoring in Asia
- DSS and Phase IV trials
- TARGETS
- Real Rights
- AGM 2007
- DSS and University collaboration
- Scientific Advisory Committee
- Involvement of Project Officers

### **Capacity building/strengthening activities:**

- INDEPTH Scientific Development and Leadership Programme
- Workshops: Scientific Writing, Proposal development, and Data Analysis.

### **Administrative activities:**

- Fundraising for the Network
- Secretariat's support and networking
- Board of Trustees

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## Part A Scientific Activities

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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. DSS site members are encouraged to identify issues, conduct research, perform analyses, and help shape the future of the Network. In 2007, the Secretariat will continue to urge scientists in DSS sites to take leadership of cross-site activities.

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### 1. Working Groups

#### 1.1 *Causes of Death*

Headed by Fred Binka, this group is currently working on a monograph on cause of death data from INDEPTH sites. A book proposal has been accepted by Ashgate Publishers in the UK. The group is now addressing the comments and preparing a few more chapters for the publication.

##### Work Plan in 2007

- Continue work on the monograph: copyediting, finalise manuscript.
- Work on a second paper for an international journal.
- Update cause of death data.

##### Budget

\$15,000 – for buybacks of published work

#### 1.2 *Adult Health and Aging*

The group secured in late 2004 a supplementary grant made by the National Institute on Aging of the National Institutes of Health, USA, to the SAGE Initiative (Survey on Adult Health and Global Aging) of the World Health Organisation, to support collaborative work with the INDEPTH Network and its initiative on Adult Health and Aging.

##### Work Plan in 2007

Further funds were raised in late 2006 from the same source to undertake a Study on Global Ageing and Adult Health (SAGE) - Implementing SAGE in INDEPTH field sites. INDEPTH will implement the full SAGE questionnaire and summary questionnaire in three field sites, plus the summary questionnaire in an additional three field sites. The aim is to improve our empirical understanding of ageing and older persons within and across countries, to assess follow-up strategies and test new survey methods.

##### Budget

\$141,319 – These funds are administered by the WG leader in South Africa

#### 1.3 *Multidimensional platform for social and interventions research - HIV/AIDS*

With funding from the Rockefeller Foundation, INDEPTH has been working on developing a grant proposal in the area of HIV/AIDS, focusing on the consequences and correlates of anti-retroviral therapy (ART) rollout. Workshops were held in 2006, facilitated by a consultant. A final draft proposal was submitted to the Secretariat in

late December. An INDEPTH PI has been identified.

Title is: A population-based longitudinal assessment of ART rollout: effects on individuals, population and health systems. The following 12 sites will participate: Agincourt, South Africa; Nairobi, Kenya; Bandim, Guinea-Bissau; Nouna, Burkina Faso, Iganga, Uganda; Kintampo, Ghana; Manhica, Mozambique; Navrongo, Ghana; Rakai, Uganda; and Oubritenga, Burkina Faso.

#### Work Plan in 2007

In 2007, the INDEPTH PI will work with the Secretariat to tailor the proposal to suit the requirements of a few funders (Gates Foundation, DFID, Wellcome Trust) and get it submitted.

The Secretariat has asked Africa Centre to lead (site leader has agreed) an INDEPTH proposal to EDCTP on capacity strengthening to conduct clinical trials of HIV vaccines in African countries to ensure that novel candidate vaccines are expeditiously evaluated with the highest scientific and ethical standards. We expect Manhica (Mozambique) and Rakai (Uganda) to form the core sites for the application. These could then be a conduit for access to other sites with respect to capacity building.

#### Budget

\$80,000 – Available from RF grant

### 1.4 *NCD Monitoring in Asia*

The following sites in Asia were funded by INDEPTH to undertake a multi-site study on NCD risk factor surveillance: Kanchanaburi, Thailand; Chililab, Vietnam; Filabavi, Vietnam; Purworejo, Indonesia; HSID, Bangladesh; Matlab, Bangladesh; HSID, Bangladesh; and Vadu, India. Specifically, the sites were to collect information on NCD risk factors using STEP 1 and STEP 2 approaches of WHO standardized methods, compare NCD risk factors data across all the sites, and build capacity across sites in NCD in general and NCD risk factor surveillance specifically.

The study was successfully completed and a report submitted to the secretariat. The group also presented the findings of the study at the last AGM at Ouagadougou.

#### Work Plan in 2007

In 2007, the group plans to continue their collaborative efforts and will be seeking funds to do this. Meanwhile, the group will work towards bringing out publications in the form of research papers. First drafts of the papers are ready and respective authors will work towards finalizing their papers. The group will communicate with various journals to explore possibility of publishing all papers in special issues of some peer reviewed journal.

Following topics were decided for taking up and the lead persons accepted to work further on their respective topics. The group envisages that all papers would be ready in early 2007.

<u>Titles of the papers</u>	<u>Responsible Person</u>
Methodological issue on cross-site analysis of NCD risk factors	Nawi

Health seeking behavior in Asian region	Sanjay
Smoking: what is the risk involved?	Ali
Pattern of alcohol consumption in Asian region: does culture matter?	Quang
Diet pattern in Asian region: to eat or to sell?	Uraiwan
Measuring physical activities in Asian region	Hadi
Reported chronic disease in Asian region	Minh
Blood pressure (stroke and heart disease)	Kusol
Clustering of NCD risk factors	Hadi
Obesity epidemic in Asian region: is it really a problem?	Lutfun
Reaching the policy makers?	Ali and Sanjay

#### Budget

\$5,000 – For the scientific review process

### 1.5 *Migration and Urbanisation*

This group raised funds from the Mellon Foundation (Wits Mellon Node) for A comparative, multi-country study, applying the method of demographic surveillance systems to the study of migration, mobility and health in the developing world. The Secretariat approved funds to be administered by the group's leadership based in Agincourt.

The group is working to produce a monograph which presents scientific work from demographic surveillance sites, aiming at examining empirically, using the longitudinal nature of the data, the relationships between migration, mobility and health in multiple developing world settings in Africa and Asia. Each study will be presented as a site chapter in the volume.

#### Work Plan 2007

The group has held a workshop and has taken part in meetings in 2006, and plans to continue work on the monograph in 2007. It is hoped that work will be completed before end of the year.

#### Budget

\$15,000 – For buybacks for the published product

### 1.6 *Targets*

Collaborators: The London School of Hygiene and Tropical Medicine (LSHTM), the Swiss Tropical Institute (STI), Centers for Disease Control, Atlanta (CDC), the World Health Organization Special Program on Tropical Disease Research (WHO/TDR), and the World Health Organization Regional Office for Africa (WHO/AFRO)

The objectives of this collaborative work are to: improve health of the poor and vulnerable through generating and facilitating the uptake of evidence based policies, and approaches to effective control and prevention of communicable diseases; develop concepts, methods and tools to achieve the millennium development goals through effective interventions in vulnerable groups; build capacity in southern partner and collaborating institutions for conducting research to generate policy-relevant new knowledge; and facilitate effective and timely dissemination of new knowledge to policy makers and planners.

During the year 2006, INDEPTH initiated a cross-site study on “Community acceptability of artesunate-amodiaquine for the treatment of uncomplicated malaria in Ghana.” Rational for conducting this study was in response to a policy backlash following the introduction of a new antimalaria in Ghana (Artesunate-amodiaquine). Ghana officially changed her malaria drug policy from monotherapy with the use of chloroquine to artesunate-amodiaquine due to resistance of malaria to chloroquine. A month after the policy switch one person allegedly died after taking artesunate-amodiaquine and many other people complained of side effects. This resulted in the drug labeled as “killer drug” by many people. As a result the Ministry of Health authorized the Food and Drugs Board (FDB) to withdraw some formulations of the drug. This development created anxiety among the general population. This study was therefore designed to assess the community reactions towards the use of the new antimalaria drug-artesunate amodiaquine. Specifically, the study wanted to:

1. Establish community perception, knowledge and attitudes towards the new malaria treatment
2. Assess health care seeking behavior concerning the new drug
3. Examine the level of patient utilization and compliance to the new antimalaria drug-artesunate-amodiaquine
4. Assess the level of usage of chloroquine and other antimalaria drugs
5. Document some of the case reports on the side effects of the new drug

Data collection ended in December 2006.

#### Work Plan in 2007

Data analysis will begin early 2007. When data analysis is complete and results written up, we will organize a dissemination seminar to share results with policy makers in the first quarter of 2007.

Further plans are in the works to initiate phase IV trials of new antimalaria drug resistance using the broad platform of the network to:

- Determine acceptability and use of new antimalarials
- Determine the cost effectiveness of new antimalarials
- Document short and long term adverse reactions to new antimalarials

#### Budget

\$93,780 - Available from DFID grant

### 1.7 *Real Rights*

#### **Realising Rights: improving sexual and reproductive health for poor and vulnerable populations**

INDEPTH in partnership with the Institute for Development Studies (University of Sussex, UK), African Population and Health Research Centre (Kenya), London School of Hygiene and Tropical Medicine (UK), EngenderHealth (USA), and BRAC (Bangladesh), formed a research consortium to examine issues related to reproductive health and rights of vulnerable populations. Specific aims of the consortium were to:

1. Improve the evidence base on levels of sexual reproductive health morbidity,

- mortality and unmet needs, and communicating it to relevant actors.
2. Find innovative ways to improve access to existing and new low cost sexual reproductive health technologies and services by poor women and men
  3. Improve knowledge of the constraints to translating sexual reproductive health rights into reality

This is a five year program of work, with an initial inception phase which involved preparatory work and stakeholder consultations in the focused countries of work. The inception phase involved identifying priority policy issues that could be taken up with policy makers for implementation.

During the inception phase, which has just ended, INDEPTH organized a stakeholder consultative workshop to ascertain critical areas of interest and focus. Following on the workshop, which took place in October of 2005, a position paper was commissioned to address some of the key issues that came up for discussion in the work. Of specific interest, among many other issues, related to the problem of inconsistencies between the reproductive policy and legal frameworks thus constraining the implementation of the policy.

During the year, extensive review of major national and international policy documents was made, as well as discussions with national stakeholders resulting in the preparation of a position paper. On November 9, INDEPTH organized a workshop with select sub-committees of Parliament to share findings of the policy paper. Reactions and discussions resulting from the workshop is being used to revise the paper for final submission.

During the year 2006, INDEPTH also managed to co-organize successfully two meetings with the HIV and Reproductive Health Research Consortium in Accra in order to leverage some cross-RPC initiatives. In addition, the Secretariat has participated in meetings organized by the Alliance for Reproductive Health Change, an advocacy group based in Ghana.

#### Work Plan in 2007

INDEPTH has in addition to work described above in collaboration with other consortium partners been working on other projects. In collaboration with the APHRC and LSHTM, the following work is either planned or currently ongoing. Reanalysis of existing data in the area of contraception in Africa. The key questions are to:

- Better understanding of contraceptive and fertility trends
- Reasons for stall in fertility decline in a number of countries
- Better understanding of policy dynamics related to FP programmes and fertility

Specific areas of interests include family planning and method switching, post-partum contraception and contraception-fertility links. A workshop is being planned for March 2007 with funding from British Council through their DELPHI grants to examine these issues and to develop a proposal to source funding to further pursue this work.

#### Budget

\$42,500 – Available from the DFID grant

## 2. DSS–University collaboration in Africa

The Secretariat secured funding in late 2005 from the Hewlett Foundation to organise a consultative meeting of DSS sites and University population programmes in Ghana, Kenya and South Africa. The meeting was held in February 2006. It deliberated on opportunities of a partnership between the two types of institutions and sketched out a grant proposal for such a partnership. In late 2006, the Hewlett Foundation funded the Secretariat's proposal to match analytic and training skills and opportunity among DSS sites and university population training centres.

The programme will involve:

- Short-term training workshops that could be jointly organised by the DSS sites and the universities on the analysis of specific data;
- Short-term attachment of researchers to faculty members who could guide on the analysis of specific data;
- Short-term residency opportunities for students/faculty attachment to specific sites to help provide analytic skills for analysis of specific data; and
- Experienced researchers from the DSS sites with specialised skills in data analysis and scientific writing could also have short-term opportunities at universities to impart such skills both to students and junior scholars.

The INDEPTH Network will:

- Assist participating institutions and DSS sites identify and establish country-specific areas of collaboration; and
- Co-ordinate all collaborative activities within the envisaged partnership.

The new INDEPTH programme aims to:

1. Promote networking among senior staff, researchers and students in in-country partner institutions;
2. Enable the teaching programme of the training institutions to produce more skilled graduates;
3. Explore the huge longitudinal data in the associating DSS; and
4. Contribute to the realisation of the potential of DSS sites.

### Work Plan in 2007

In 2007 the proposed short-term fellowships programme will be launched. An announcement has been developed. The first fellowships are expected to be awarded in 2007. Support is expected to be provided to host DSS sites, to a university participating and to the fellows.

### Budget

\$175,000 – Available from the Hewlett grant

## 3. Data Access and Dissemination

INDEPTH has developed a data sharing initiative concept to address the complex set of issues associated with improving the production of high quality comparable analytical data sets from INDEPTH demographic surveillance sites. Addressing these issues will improve the quantity and quality of experimental data in all sites, ensuring that best practice in well developed sites can be used to strengthen data capture and analysis in less-well developed sites. A new generation of data banks will ensure that access to data from sites and their scientific collaborators will be significantly



improved. Reaching the objective of improved data sharing will greatly enhance INDEPTH sites' capacity to address major health problems affecting developing countries.

A pre-proposal was submitted to the Wellcome Trust to obtain support for a process that will involve INDEPTH and member site expertise as well as professional software development expertise to develop a detailed funding proposal to support and implement the INDEPTH Data System (IDS). This grant proposal was successful.

#### Work Plan in 2007

##### Development Workshop

A four-day workshop to which selected site data managers, scientists and INDEPTH secretariat members will be invited. Most of the invited persons would have been involved in the development of the IDS concept. Prior to the workshop a Request for Information (RFI) call will be issued to interested independent IT consultants and software companies (or entities e.g. computer science departments) to submit short proposals to participate in the process. Three to five companies will be short listed on the basis of their proposals and invited to participate in the workshop. All the companies that have participated in the workshop will then be invited to tender for the development and support of one or both of the IDS software components.

##### Post Workshop Proposal Development

Subsequent to the workshop a small core team will complete the design and editing of the proposal, including finalizing the project budget. The team will also draft the tender specifications for the software development that will subsequently be issued by the INDEPTH Secretariat. The tender responses by the tendering companies will form part of the final funding proposal. Evaluation of the full IDS bid will also provide an opportunity to make a recommendation on the software provider (IT consultants).

##### Budget

\$95,000 – Available from the Wellcome Trust grant

#### **4. DSS and Phase IV Trials**

##### Phase IV Effectiveness Trials on emerging new Malaria Drugs and Interventions

The INDEPTH-NETWORK, Swiss Tropical Institute (STI), The World Health Organization Special Program on Disease Research (WHO/TDR), The London School of Hygiene and Tropical Medicine (LSHTM), Centers for Disease Control (CDC) and the WHO Regional Office for Africa (AFRO), have entered into a partnership to develop a program of work that will look at Phase IV Clinical Trials Effectiveness studies. Partners proposed the development of a Phase IV Effectiveness Trials Platform that will address the full range of malaria intervention effectiveness issues arising from new products including comparative effectiveness of existing malaria drugs and how new products can be best integrated into existing malaria control programmes.

##### **Objective 1. Adapting interventions to the health system.**

This objective determines the optimal adaptation, integration and implementation of the new (malaria) intervention(s) in health systems.

##### **Objective 2. Effectiveness, health impacts and costs in real life health systems.**

The second objective is to assess the effectiveness, health impacts and costs of new interventions at scale in real life health systems. In pursuing this objective two elements will be included.

#### Work Plan in 2007

In late January 2007, a development planning workshop will be organized in Accra by partners to discuss details of the proposed program of work and to complete a proposal that will be sent out for funding.

#### Budget

\$20,000

### **5. Annual General and Scientific Meeting 2007**

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, the AGM is utilised 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 6<sup>th</sup> AGM was held in Ouagadougou, Burkina Faso in September 2006.

The 7<sup>th</sup> AGM will be held in Nairobi, Kenya on 3-7 September 2007. The hosts will be the DSS sites in Kenya: Kilifi, Kisumu and Nairobi. The conference theme is the role of DSS in monitoring progress on the MDGs.

In 2007, the Secretariat will work closely with the AGM hosts to ensure a successful AGM.

#### Budget

\$150,000

### **6. 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 2006 the SAC had one face-to-face and one telephone conference.

The SAC is expected to have at least one face-to-face conference and two teleconferences in 2007.

Another four SAC members will rotate off in 2007. The Board will therefore be appointing new SAC members in 2007.

#### Budget

\$40,000

## **7. Collaborations – new targets**

Maintaining and establishing partnerships – both with funders and donors as well as with parallel groups – is essential to realising INDEPTH’s vision and mission. INDEPTH has developed collaborations and is working on potential ones with several institutions. The Network and its members look at specific opportunities and work closely with funders, product development groups, parallel groups, local governments, policy makers (including national ministries of health and census bureaus), service delivery NGOs and local community-based groups.

The current list of collaborators includes WHO, TDR, University of Witwatersrand, London School of Hygiene and Tropical Medicine, Swiss Tropical Institute, the Health Metrics Network, University of Ghana, and the EAGLES Project.

In 2007, INDEPTH will continue to maintain current collaborations and pursue new strategic collaborations. The following are highlighted:

### Cancer Network

Potential collaboration on cross-site research in Africa on common cancers - liver, colon, prostate.

### Chlamydia Trachomatis test

Potential collaboration with the University of Cambridge on the Chlamydia Trachomatis rapid test. The test uses non-invasive and easy-to-collect samples. INDEPTH sites will be used to deploy this test. Plans are underway to work with a pharma company to donate the drugs for treatment.

### World Agroforestry Organisation

Potential collaboration with the World Agroforestry Organisation to support DSS sites with agroforestry skills and products toward the achievement of some MDGs.

## **8. Project Officers / Consultants**

In 2007, INDEPTH plans to increase the effectiveness of the Secretariat through project officers for the scientific thrusts of the Network and consultants for specific areas of expertise. These people may not necessarily be based in the Secretariat in Accra. Areas to consider are Adult Health and Aging, the INDEPTH Data System, Phase IV, and Health Information Systems.

### Budget

\$120,000

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## **Part B Capacity Building/Strengthening Activities**

INDEPTH organises capacity building/strengthening initiatives across the lifecycle of both institutional DSS site development and individual professional training. These initiatives help the global public health sector get better information and scientific work from the efforts of the sites, and increase the scientific and operational strength of the member sites.

## 9. Scientific Development and Leadership Programme

The key objectives of the Scientific Development and Leadership Programme are:

- A.** To develop a genre of African scientists from INDEPTH sites and elsewhere through practical on-the-job training in a unique Masters programme that combines epidemiology, biostatistics, demography and other social sciences with a focus on demographic and health surveillance in developing countries, who
- can identify key biomedical and public health problems that may be addressed by epidemiological or demographic studies and design solutions to those problems;
  - have the appropriate analytical skills and can understand, plan and execute field-based scientific research; and
  - have good communication skills to make research results understandable to diverse audiences.
- B.** To develop the capacity of scientists in the INDEPTH Network to:
- have negotiating power to engage external collaborators;
  - compete effectively for international resources; and
  - take leadership roles at their workplaces.

### Work Plan in 2007

1. Coordination - January - December 2007
2. Stakeholder workshop - April 2007
3. Report writing - November - December 2007

### Budget

313,313 – scholarships for students

## 10. Cross-site capacity building small grants

With funding from Sida/SAREC, the Secretariat launched a small grants programme whose overall goal is to foster research collaboration and research training between INDEPTH sites in the developing world by providing seed grants of US\$25,000 per grant to at least three member sites participating in a cross-site activity.

The seed grants are intended to facilitate stronger collaborations among INDEPTH sites. Specifically the objectives which are intentionally broad are to:

- Promote and fund research training;
- Promote equal opportunities, encouraging a gender and geographically balanced generation of scientists;
- Foster international, North-South and South-South collaborations;
- Encourage public health research methodology development and cost-effectiveness in research;
- Strengthen data collection systems at INDEPTH sites and their ability to share with other partners;
- Promote joint data analysis and develop analytical skills and techniques for data extraction;
- Provide the opportunity for young scientists at the sites to strengthen their skills in scientific writing and grant proposal development and possibly senior degrees; and
- Enable joint attendance at research training courses and workshops.

The programme also supports international exchange and co-operation and facilitates comparative studies and methodological development. It mainly serves to initiate and only partially support project activities. For research training activities, the programme will facilitate cross-site activities, training courses and supervision as well as support joint proposal writing activities. The grant is awarded to one site for cross-site activities involving at least three sites.

By the end of 2006, the first year of the programme, small grants were awarded to the following lead site applicants. A credible review process was put in place: Purworejo; Iganga; Vadu; Ouagadougou; and Dodowa.

**Dodowa, Kintampo and Navrongo:**

*Strengthening Research Capacity Through Collaboration among DSS Sites in Ghana.* PI: Dr. Margaret Gyapong; Period: November 2006 – April 2007  
Amount: \$25,000

**Iganga, Leon and Filabavi:**

*Mainstreaming gender into Demographic Surveillance Sites.* PI: Dr. George Pariyo; Period: November 2006 – March 2007; Amount: \$25,000

**Iganga, Ifakara, Africa Centre and Ouagadougou:**

*Development of Next Generation Data Systems for INDEPTH Sites.* PI: Dr. George Pariyo; Period: June 2006 – April 2007; Amount: \$24,900.

**Ouagadougou, Niakhar, Nouna and Mlomp/Bandafassi:**

*Making Usable Knowledge Available to Research Participants - How best to communicate scientific results in various socio-cultural contexts.* PI: Dr. Younoussi Zourkaleini; Period: July 2006 to June 2007; Amount: \$24,862

**Purworejo, Filabavi and Butajira:**

*Capacity Building for Chronic Disease Research and Prevention In INDEPTH Sites.* PI: Prof. Mohammad Hakimi; Period: July 2006 – April 2007; Amount: \$25,000.

**Vadu, Kanchanaburi and Wosera:**

*Developing a Prototype for Data Sharing – Building Capacity in Data management across India, Thailand and Papua New Guinea.* PI: Dr. Sanjay Juvekar; Period: July 2006 – October 2007; Amount: \$25,000.

In 2007 the Secretariat will be following up with progress of activities and will consider looking for new funding to extend this successful programme. All grantees have submitted interim reports to the Secretariat.

## **11. Scientific Writing Workshop**

The Secretariat plans to organise a workshop on scientific writing in 2007. Starting with a pre-selection process in which young scientists will submit abstracts and later drafts of full papers intended for publication in international journals, the Secretariat will arrange for reviews of the selected papers and authors will be brought to address the reviewers' comments under the guidance of experienced facilitators.

The objectives of the workshop are to:

- help scientists in INDEPTH sites develop the ability to communicate their thoughts effectively through writing;
- build skills for writing in peer-reviewed journals;
- understand how the peer-review process works and to gain some experience of peer-review on own writing; and

- facilitate peer-review and feedback on a set of DSS focused papers among developing country researchers and practitioners.

## **Part C Administrative Activities**

### **12. The 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

#### Running of the Secretariat

This activity concerns all other institutional costs that are not covered in activities described above. These include maintenance of websites, procurement of capital equipment and rent of office space; printing of promotional materials and annual reports; stationery; audit; legal issues; and vehicle use.

In 2007 the Secretariat is striving to acquire a new status (diplomatic status) for the Network. This would enable the Network attract international staff.

#### Travel

- *Visits to Sites*  
The Secretariat makes visits to member sites. A few visits are expected in 2007 which will be linked to specific objectives.
- *Support to Sites for Technical Exchange Visits*  
The Secretariat will in 2007 continue supporting technical site exchange visits and funding technical support to sites.
- *Attendance at relevant international conferences*

#### Budget

\$121,000 Running cost

### **13. Fundraising for the Network**

The Secretariat was successful in 2006 in raising \$17,000,000 from the Gates Foundation to establish MCTA. Further success was a \$522,000 grant from the Hewlett Foundation to match analytic and training skills among DSS sites and university population training centres in three African countries. It should be noted that most of the \$17M raised will be used to refurbish trial sites over a four-year period. It is therefore necessary for INDEPTH to intensify its efforts to raise core funds.

#### *Strategies for raising Core Funding*

##### a) Approaching Current funders

The Secretariat will consider submitting in 2007 a new proposal to Sida/SAREC.

b) Expand the funder-base – approach new funders

- i- The Secretariat will approach potential funders: **USAID, Ford Foundation, DANIDA, DFID, JICA**, etc., especially public foundations.
- ii- Invite potential funders to AGM 2007. This is always a good opportunity for funders to experience science generated by DSS.
- iii- Get the SAC and Board more involved in fundraising.

*Strategies for raising Research Funding*

The Secretariat will get working groups / member sites more active in raising research grants. The Adult Health group and the Migration and Urbanisation group were successful in raising project funds in 2006. The HIV/AIDS group has completed a proposal which will be submitted in early 2007.

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.

*Strategies for raising Capacity Building Funding*

The Secretariat will continue to contact various foundations to provide full or part funding for its capacity building activities.

*Other strategies*

The Secretariat will strengthen existing collaborations such as with the Health Metrics Network and pursue new collaborations. These could be a source for raising funds for collaborative work.

Budget  
\$20,000

**14. 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 2006.

In 2007 we expect the Board to hold at least two face-to-face and two telephone conferences.

Budget  
\$40,000

**15. Secretariat Staff**

INDEPTH is led by a permanent executive body ("the Secretariat"), which is headed

by a full-time Executive Director. A Deputy Executive Director was appointed in June 2006 to respond to the need created by the establishment of the Malaria Clinical Trials Alliance for which the current Executive Director doubles as the Project Director for the alliance. Also, to increase the scientific resource at the Secretariat, a full-time Senior Research Associate was recruited in August 2006.

Additional network support capabilities are provided through an ICT Manager, an Accountant, an Administrative Officer and an Administrative Secretary.

The INDEPTH Secretariat was made even stronger as it hosts the secretariat of the new MCTA project, making it possible for key MCTA staff to provide support to core INDEPTH work.

Budget  
\$529,688