OVERVIEW OF HEALTH & DEMOGRAPHIC SURVEILLANCE SITES IN VIETNAM - CAPACITY STRENGTHENING & TRAINING ACTIVITIES

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OUTLINE

- Brief introduction
- Research topics
- Structure
- Training activities
- Challenges and Future plan
THE FILA BAVI SETTING

FilaBavi, from 1999
FILABAVI HDSS

- A longitudinal population – based surveillance system
- An open cohort
DEFINING CHARACTERISTICS OF HDSS

- A geographically-defined population
- Under a continuous health & demographic monitoring
- With a timely production of data on births, deaths, migrations, etc...

⇒ Epidemiological transition on health & demographic
GENERAL AIMS OF HDSS

- To generate basic health data for health planning and policy making
- To develop a platform for research and training on community health
Cluster Random Sampling (Stratified by geographical areas)

Bavi district (352 clusters)

FilaBavi (71 clusters)

All households

14,500 households
56,000 persons
**DATA COLLECTION**

- Baseline survey + 7 re-census (repeated every 2 yrs)
- 56 quarterly follow up surveys

=> Database of 50,000 person-years

- Specific studies

=> 50 sub-studies
Baseline Information

- **Household level**: Socio-economic status: housing status, income, expenditures, land ownership, assets; distance to health care facilities …

- **Individual level**: Age, sex, marital status, ethnicity, religion, education, occupation, …
FOLLOW UP EVENTS

- Birth
- Death
- Pregnancy
- In/out-migration
- Marital event
- Reported illness & health care practice
RESEARCH TOPICS

- Epidemiology: communicable diseases/NCDs
- Mortality/Verbal autopsy
- Health care utilisation and equity in health
- Health Economics
- Rational use of drugs/antibiotics
- Reproductive health
- Adult health and aging
STRUCTURE OF HUMAN RESOURCES

Steering board
7 members

Scientific committee
8 members (2 Assoc Prof, 3 PhD, 3 MA)

Field office
Data manager (2); Field manager (1); Data entry clerk (3) Field investigator (6); Field surveyor (40)
TRAINING ACTIVITIES

- Training for field workers at Filabavi
  - Training on data collection on baseline survey and follow-up.
  - Re-training on data collection on every re-census
  - Training on data collection for specific studies
  - Training on data entry
TRAINING ACTIVITIES

- Capacity strengthening for staffs of Filabavi
  - Sent staffs to training workshop organized by Hanoi Medical University (epidemiology, good, family health promotion, clinical practice, ethical in research, etc); INDEPTH network (i-share, etc); collaborative institutions (grant writing, project management, etc)
  - Sent staffs for further study(PhD, Master)
TRAINING ACTIVITIES

- Capacity building in general
  - Filabavi serves as a setting for epidemiological training for students (undergraduate and graduate), PhD candidate, doctors and health workers, etc
  - Dissertation (up to 2012): 23 PhDs, 27 Masters, 12 Bachelors
  - About 150 articles published on international journals and about 70 articles published on Vietnamese journals
TRAINING POLICY

- Long term commitment
- Provide all-sided capacity building
FUNDING

- SIDA/SAREC (Health System Research Project – PhD, Master)
- INDEPTH network – short training, Master)
- EC (African/Asian Regional Capacity development Project) – short training
CHALLENGES

- Short-term funding
- Not clear career development plan
- Continuous training for junior staffs
- Huge dataset has not been used
FUTURE PLAN

- Maintain the normal activities of Filabavi => need support in grant writing training
- Increase high-trained staffs (Master & PhD level)
- Produce scientific articles/reports to raise the voice to policy makers => need support in scientific research (data analysis, statistics, research method, etc)
THANK YOU