
Ethiopian Universities Research Centers Network

Experiences, Challenges and Future Directions

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ISC 2015, INDEPTH Network
Ghion Hotel, Addis Ababa, Ethiopia
11 November 2015



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HDSS Network in Ethiopia

- The idea of Networking of HDSS sites was initiated by Universities and EPHA/CDC.
- Four Universities (AAU, JU, HU, UoG) through the AIDS mortality surveillance work in 2007
- ***“Ethiopian Universities Research Centers Network (EURCN)” Established in 2007***
- Chairperson and secretary assigned
- Mekelle and Arba Minch joined the Network in 2009

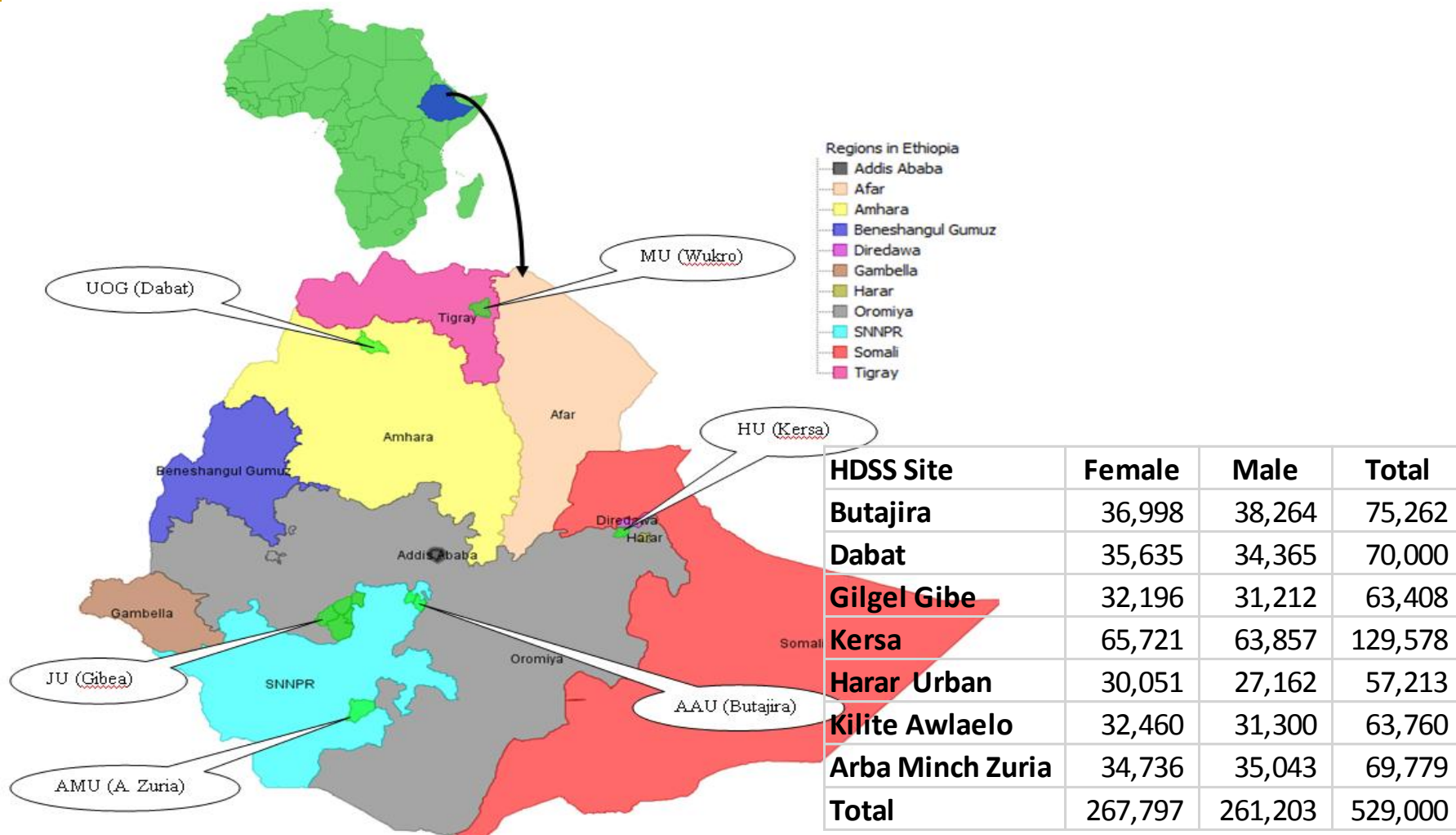


Networked HDSS sites in Ethiopia

1. Butajira Rural Health Program (1987), AAU
2. Dabat Research Center (1996), UoG
3. Gilgel Gibe Field Research Center (2005), JU
4. Kersa HDSS (2007), HU
5. Kililte Awlalo Rural Health Program (2009), MU
6. Arba Minch Zuria Rural Health Program (2009), AU

Also the Addis Ababa Mortality Surveillance Program
Harar Urban HDSS, HU (2011)





Location of University based research centers in Ethiopia



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Why Networking

- Opportunity for learning and sharing knowledge, skills and mentorship to each other.
- Standardizing DSS procedures & tools
- Can serve as a platform for universities and stakeholders to undertake collaborative & multi-site studies
- Pooling data for joint analysis, reporting and sharing
- Increasing visibility and funding opportunity



Vision and Mission

Vision: To see evidence based decision making practices in health and development sectors in Ethiopia

Mission: Provision & promotion of the use of valuable information for evidence based decision making, policy formulation, program design, evaluation and execution in public health practices



General Objective

Support to generate longitudinal data and promote the use of strategic information for evidence based decision making and coordination of activities among university based surveillance and research sites.



Specific Objectives

- Support graduate level trainees to use the sites for research and generated data
- Provide technical support to network members and new sites
- Strengthen DSS sites capacity to generate and disseminate information on major vital events and population dynamics
- Support to undertake different add on studies at community level
- Develop data warehouse and avail for local and international users



The Network so far (1)

- 👍 Regular quarterly meetings and joint proposal development
- 👍 Initiated Arba Minch & Mekelle universities to establish research centers
- 👍 Standardize tools, methods & procedures for HDSS and VA activities



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The Network so far (2)

- 👍 Capacity building & skill trainings for members – longitudinal data analysis using STATA, GIS, etc.
- 👍 Created learning and experience sharing forum between universities
- 👍 In country and African sites (Ghana, SA) team experience sharing visits



Experience Sharing at visits to Kintampo, Navrongo, and Agincourt Research Center in Ghana and SA



The Network so far (3)

- 👍 Implemented longitudinal database management system in all the site – HRS2
- 👍 Now we are working to moving to OpenHDS
 - OpenHDS and legacy data migration training



The Network so far (4)

- 👍 A number of joint data analysis, with pooled data were conducted, reports produced and shared to stakeholders
- 👍 Data sharing and standardization documents developed



Challenges

- ‡ Limited support from the Universities as there are many competing activities
- ‡ Unable to expand HDSS sites
 - ‡ In terms of content and Geographic areas
- ‡ It is only EPHA through the CDC-Ethiopia who is supporting the surveillance activities
- ‡ Limited collaboration with stakeholders including RHB, MoH, etc.



The way forward (1)

- 👉 Formalize the Network by involving Universities & stakeholders
- 👉 Stipulate national priority research agendas in consultation with stakeholders
- 👉 Enhance the use of DSS sites and the data for capacity building (Masters, PhD, Post Docs)
- 👉 Encourage & support for the establishment of more DSS sites in Ethiopia

The way forward (2)

- ✎ Work for the implementation of mobile data collection system across the local sites
- ✎ Create a national HDSS data archive/warehouse for public access and use
- ✎ Support the national CRVS with the available critical and experienced staff in the sites
- ✎ Expansion of existing sites in terms of content and geographic coverage

The way forward (3)

- 👉 Engage sites for multi-center studies that include clinical and community trials
- 👉 Surveillance and add on modules on:
 - 👉 Morbidity surveillance
 - 👉 Nutrition surveillance
 - 👉 Maternal, newborn and child health

Acknowledgment

- The communities in the different sites
- The Universities
- EPHA and CDC for technical and financial support
- INDEPTH Network for the capacity building support

