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Health and Demographic Surveillance Systems (HDSS) Asia Network Meeting

Meeting Report

5 March 2020, Kuala Lumpur, Malaysia



Partners



Asia Pacific Observatory
on Health Systems and Policies
(co-host)





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Aim

To bring together representatives of HDSS sites from Malaysia, Viet Nam, India, Bangladesh, and Indonesia for the first HDSS Asia Network meeting. To reflect upon the importance of HDSS Network in Asia and to explore means in strengthening regional collaborations. All attendees are part of the working group for the formulation of the HDSS Asia Network.

Summary

- The working group has aligned on the values and urgency to establish an HDSS Asia Network, focusing on South-South collaboration
- The working group leverage the many important lessons learnt from the INDEPTH Network for this meeting
- Action plans include timeline and scope of work, available in section 5.0



Agenda

Time	Activity	Chair
8.30	Registration	
9:00	Welcome <ul style="list-style-type: none"> • Prof. Pascale Allotey - Director UNU-IIGH • Dr. Nima Asgari-Jirhandeh - Director APO • Prof. Tin Tun Su - Director SEACO, Monash University Malaysia 	Pascale Allotey
9.20	Introductions and expectations	
9.30	Background to meeting <ul style="list-style-type: none"> • Daniel Reidpath - Senior Director of Health Systems and Population Health - icddr,b • Discussion 	Daniel Reidpath
10.00	Overview of HDSS Sites 20 minutes each <ul style="list-style-type: none"> • Profile • Strengths • Weaknesses • Strategic direction <p>1. Prof TinTin Su (SEACO Malaysia)</p>	Nirmala Devarajan
10.20	Coffee break	
10.40	<ol style="list-style-type: none"> 2. Dr. Sanjay Juvekar (Vadu HDSS) 3. Prof Hoang Van Minh (Chililab HDSS) 4. Dr Fatwa Sari Tetra Dewi (Indonesia) 5. Dr S.M. Manzoor Ahmed Hanifi (Matlab Bangladesh) 	Nirmala Devarajan
12.00	APO and UNU-IIGH perspectives on HDSS	
12.30	Lunch	
13.30	Value of Asian Network - Round Table Discussion to address: <ul style="list-style-type: none"> • Value to sites • Value to region and countries • Value to funders and external stakeholders • Constitution, governance (drawing on lessons from INDEPTH Network) 	Nima Asgari-Jirhandeh
14.45	Next steps <ul style="list-style-type: none"> • Data collaboration • Health systems collaboration • Research collaboration • Quality assurance • Training / Fellowship opportunities • Strategic relationships and resource mobilization. 	Daniel Reidpath
15.45	Close	



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Meeting Attendance

In Attendance

Dr. Nima Asgari-Jirhandeh

Director, Asia Pacific Observatory on Health Systems and Policies (APO)

Prof. Pascale Allotey

Director, United Nations University - International Institute for Global Health (UNU-IIGH)

Prof. Daniel Reidpath

Senior Director, Health Systems and Population Studies, International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b)

Prof. Tin Tin Su

Director, South East Asia Community Observatory (SEACO)

Dr. Nirmala Devarajan

Director, Quality Assurance and Compliance, Monash University Malaysia

Prof. Sanjay Juvekar

Officer in Charge, Vadu Rural Health Program, India

Dr. Quyen Tu Bui

The Chi Linh Health and Demographic Surveillance System (CHILILAB HDSS), Viet Nam

Dr. Michael Penkunas

Research Fellow, United Nations University - International Institute for Global Health (UNU-IIGH)

Dr. Feisul Idzwan b. Mustapha

Deputy Director, NCD, MOH Malaysia

Dr. Fatwa Sari Tetra Dewi*

Sleman Health and Demographic Surveillance System (HDSS), Universitas Gadjah Mada, Yogyakarta, Indonesia

Dr. S.M. Manzoor Ahmed Hanifi*

Matlab HDSS of ICDDR,B, Bangladesh

*Via Zoom

Programme Support (from UNU-IIGH)

Vithiya Sathivelu
Suzainur K. Abdul Rahman
Derrick Z Chan



Full Record

1.0 Introduction

Prof. Allotey opened the meeting by welcoming attendees to Kuala Lumpur, and to the HDSS Asia Network Meeting. She spoke about the overarching objectives of the meeting, emphasising that the goal was to conclude with specific directions in moving forward.

Co-host, Dr. Nima of Asia Pacific Observatory on Health Systems and Policies, echoed Prof. Allotey on the importance of HDSS bodies from Asia coming together. He talked about the prospects of using data to bridge gaps in evidence and health policies, as well as to develop a regional understanding of health issues.

Prof. Tin Tin Su of SEACO, Monash credited Prof. Reidpath for his early intentions of forming an HDSS Asia Network. She also thanked the UNU-IIGH programme team for overseeing the logistics of this meeting, and the other attendees for joining the meeting.

Next, Prof. Allotey sought introductions from all attendees along with their expectations of the meeting.

Name	Institute	Expectations/Indications
Dr. Fatwa	Sleman Health and Demographic Surveillance System (HDSS), Universitas Gadjah Mada, Yogyakarta, Indonesia	<ul style="list-style-type: none"> • Increase capacity building • Identify ways to improve the administration of data collection • Financing of HDSS
Dr. Hanifi	Matlab HDSS of icddr,b, Bangladesh	<ul style="list-style-type: none"> • Explore ways to use longitudinal data for policy developments
Dr. Penkunas	UNU-IIGH	<ul style="list-style-type: none"> • To learn more about the network and its goals • Understand the data being collected and their potential • Identifying capacity building opportunities; e.g., being open to have students onboard to investigate these data • To work collaboratively on south-south engagements under IIGH's Pillar 3 • To develop knowledge products that would inform decisions in policy making
Prof. Sanjay	Vadu Rural Health Program	<ul style="list-style-type: none"> • To identify lessons learnt from INDEPTH Network • To see to the Asia Network's sustainability



Name	Institute	Expectations/Indications
Dr. Quyen	CHILILAB HDSS	<ul style="list-style-type: none"> To position CHILILAB as part of the network To identify opportunities for collaboration To share available data; e.g., to inform policy development
Dr. Devarajan	Monash/SEACO	<ul style="list-style-type: none"> To see SEACO collaborate with 'sister' sites across the Asia region To build capacity To explore data sharing

Prof. Reidpath discussed the background of the meeting. He began by listing the advantages for having an HDSS Asia Network, taking the idea from the SEACO's advisory meeting a step further. The INDEPTH Network can be used as a point of reference to examine what has worked and what has not. Examples shared by attendees were the absence of effective governance, Asia members were less represented (attributed to the geographical location), its work tends to gravitate towards Africa, there are strict criteria to be part of the network, and so on. The vision stated was to take those lessons learnt from the INDEPTH Network, and bring together Asia HDSS sites to benefit from those past experience.

Key takeaway:

- Knowing the value and relevance of the work (e.g., the value of data)
- Recognising the potentials of historical data (often underutilised)
- Funding dilemma: not enough money for retrospective analyses to build upon prospective data collection
- Have a sense of the governance structure
- Know the stakeholders involved
- Re-thinking the relationship with the INDEPTH Network (elements of moving forward together as (a new) HDSS Asia Network is being established)
- The need to work with the local authorities/ministries: i.e., to avoid duplication of work/data observed
- Recognising that HDSS Asia Network would further help contextualise (health) issues within the region

2.0 Overview of HDSS Sites

This session was chaired by Dr. Nirmla which saw representatives presenting their respective HDSS site based on the framework below followed by Q&As.

- History of the surveillance system
- Types of data collected, source, and storage
- Population distribution
- The team
- Strengths and weaknesses of the surveillance system
- Organisation partners



Refer to PowerPoint decks for details:

- (a) SEACO HDSS, Malaysia
- (b) Vadu HDSS, India
- (c) CHILILAB HDSS, Viet Nam
- (d) Sleman HDSS, Indonesia
- (e) icddr,b, Bangladesh

3.0 APO and UNU-IIGH perspectives on HDSS

APO

- Many overlaps in the work across HDSS sites discussed; these are good from a problem standpoint but focal points are needed
- Strategic viewpoint: what would the network do if the report of surveys is different than what the government stated (inconsistent findings)?
- How to convey narratives effectively to policymakers?
- Think of comparability of data/indicator for HDSS network: making sense of upcoming collaborations

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- The validity of HDSS data is important: community engagement is constant. Segamat is a small part of the population, but by far it is the richest data that represents the local population (referring to SEACO)
 - Caution that the while HDSS (i.e., SEACO) has the potential to answer certain questions but need to recognise that the answers may not be generalised for the state/country population
 - National data may not make sense on primary health care delivery because it is a highly contextualised issue
 - We need to be valuing different data because of the people we are serving
 - Data could be used to challenge presumptions of (national) health policies and add value to the policy-making agenda
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4.0 Value of Asia Network - Round Table Discussion

This session was led by Dr. Nima of APO. An overview was provided by Dr. Nima on how APO can add value to the Network in Asia:

- APO can be thought of as a platform: i.e., publishing cross country work
- APO to review its budget: (1) actual work; (2) publishing
- A plus point is that there is an internal review panel, especially to look at proposals for quality assurance
- APO focus now: 1) Urban health outcomes, 2) Primary Healthcare, 3) Diabetes & TB co-management, and 4) Antimicrobial resistance (AMR)
- APO's 2021 stream: Urban Health, demographical change - at least for the next 4 years in conferences
- Suggestions for network engagement strategies: (1) conference; (2) room for side meetings (pre-conference)
- Future engagement may look at WHO's Primary Health Care Performance Initiative (PHCPI)
- Next steps: attendees have agreed on some good ideas - to get proposals sorted out for funding

4.1. Value to sites

- There is a need for a shared framework in methodology: types of data, fieldwork training, analytical science, and publications
- Mapping exercise for existing data across sites and perform cross-site analysis
- Recognising variant in governance; e.g., from the community to government policies
- HDSS Asia sites may leverage on shared funding
- To sustain resources and capacity building (wary of one-off workshops): one suggestion was to develop online courses - this is especially advantageous where meet up is not possible; focus on developing young scientists
- To accelerate outputs from sites there needs to be a translation to policy (i.e., evidence/ journal publications)
- The initial funding agenda should focus on the power of 'coming together' to formulate collective intentions/plans
- Sites could focus on outputs together; i.e. writing and co-supervising
- In the interest of time, the network could do things concurrently; i.e., strategising its approach and scale-up
- Discuss and learn from challenges experienced by each site
- South-South collaboration is a topic of interest

4.2. Value to region and countries

- Essential to compare steps taken by different country on health surveillance
- Finding out what evidence is available/published so far (e.g., from the INDEPTH Network)
- Important to have knowledge products
- Think about whether the network is to look at influencing regional agenda, though it might be difficult without regional evidence
- Therefore, it is important to look at how HDSS sites could harmonise on data of 'regional importance'
- The European governments were said to have more engagements where they would highlight evidence required in certain areas
- Digital health platforms can be leveraged for impact



4.3. Value to funders and external stakeholders

- It is advantageous to know the primary interest of donors
- Funders seek data; it is important to know which data can be made available
- Based on experience: funders would typically insist on data
- HDSS Data scoping options, going back (a) 5 years or (b) 20 years back; but first, the working group must recognise the pros and cons. Whether they are relevant to show impact and that funders would have their preference as well

4.4 Constitution, governance (drawing on lessons from INDEPTH Network)

- Data management policies (governance) should be followed; ethical review boards, typically within universities could be involved in making sure that only aggregated data were shared (no personal information can be identified)
 - Attendees could all look into respective ethical processes when it comes to taking other institute's data
 - Reference: Data Safe Haven - tech that can ensure the protection of data
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5.0 Next steps

Actions	Actor	Timeline
5.1. Data collaboration <ul style="list-style-type: none"> Each institute to share selected data on Excel sheets for scoping purpose Mapping of data and identifying areas of interest 	Prof. Tin Tin Su	2 Weeks 20 th March 2020
5.2. Health systems collaboration <ul style="list-style-type: none"> Memorandum of Understanding Memorandum of Agreement 	Prof. Reidpath, to draft MOU Prof. Sanjay (secondary) to support/follow through	A month to circulate draft MOU Expectations: 6 months to sign (early September 2020)
5.3. Research collaboration <ul style="list-style-type: none"> Concept note to SIDA* on prospective work: a harmonised proposal (from harmonised data sets) to go for a grant To be sent to all for review 	Prof. Reidpath Dr. Penkunas offered support on prospective work	End March/ Early April 2020
5.4. Quality assurance <ul style="list-style-type: none"> Data governance: discussed in general terms 	N/A	N/A
5.5. Training / Fellowship opportunities <ul style="list-style-type: none"> Discussed in general terms 	N/A	N/A
5.6. Strategic relationships and resource mobilisation <ul style="list-style-type: none"> Linked to item 5.1 Review of sites' output - an analysis of past data for gap analysis (scoping/data paper - identifying potential areas of research) Formulation of research questions 	Prof. Tin Tin Su	TBC

¹The Swedish International Development Cooperation Agency (Sida) is Sweden's government agency for development cooperation that strive to reduce world poverty by allocating resources and knowledge with the goal of making a difference for people in Africa, Asia, Europe and South America.



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