

Memorandum of Understanding

between

The Ethiopian Public Health Institute

and

University based Health and Demographic Surveillance System Sites and Mortality
Surveillance Program in Ethiopia

February, 2020

1. Introduction

Information Revolution is one of the four major agendas of the Health Sector Transformation Plan (HSTP 2015/16-2019/20), which seeks to change the techniques of data and information management as well as to bring fundamental cultural and attitudinal changes regarding the perceived value and practical use of public health data. The Information Revolution Roadmap (IRR) recognizes phenomenal advances in the methods and practice of collecting, analyzing, presenting, and disseminating information that can influence decisions in transforming the economic and social sectors. Capitalizing on data generated by different institutes and academia in Ethiopia including Ethiopian Public Health Institute (EPHI) and Universities, the IRR strives to maximize the availability, accessibility, quality, and use of health information for decision-making to positively impact HSTP's and Sustainability Development Goal (SDG) major goals and national policies. Achieving the information revolution agenda is a major priority of EPHI and is also part of a mission of Universities on top of the academic exercise with their respective Universities. Collaboration between EPHI and Universities would help to synergize the efforts to provide nationally relevant research outputs and to ensure sustainability of the information revolution.

Ethiopian Public Health Institute

EPHI is legally mandated national public health research institute that undertakes public health research on national and sub-national priority health problems and evaluates strategies and initiatives in Ethiopia. EPHI conducts surveillance and provides quality laboratory services for early identification and detection of public health risks and emergencies. EPHI aims to improve the health of populations in Ethiopia through generating quality evidence, measuring and tracking health program performance at different levels and translating evidence to decisions in the country. In 2017, EPHI has established a National Data Management Center (NDMC) for health that is considered as flagship initiatives of EPHI and Ministry of Health towards achieving the Information Revolution agenda owing to its innovative approach, relevance and timelines. NDMC is aiming to fill national gap through establishing a system to centrally coordinate, manage, utilize, and make these data available for further research and effective use of these data for decision-making to improve population health outcomes in Ethiopia. To enhance its mission, EPHI is expected to collaborate with national and international Universities on research and evidence generation, public health emergency, laboratory capacity building and workforce development.

Universities with Health and Demographic Surveillance Sites

Ten legally registered public universities that provide health science training in Ethiopia have owned Health and Demographic Surveillance System Sites (HDSS) and mortality projects as part of their research training program. The HDSS and mortality projects have significant contribution in the evidence informed health decision process of the country on but not limited to maternal and child health, infectious and non-communicable diseases, injuries and other public health challenges. In this regard, universities have strategic alignment with EPHI that motivates the collaboration to create synergism. The HDSS follow an open dynamic cohort of geographically defined population and update the population every 3 to 6 months regularly with standardized procedures and tools. Cohort data generated from HDSS have significance to overcome limitations of surveillance and survey data to address causal and temporal relationships. HDSS are registering vital events (births, deaths, marital changes, in and out migrations, mortality and cause of death, morbidity and social determinants and other health related data) in different parts of the country. The Addis Ababa Mortality Surveillance Program is a prospective surveillance of burials with verbal autopsy methodology to identify causes of death in Addis Ababa. In addition, universities collect other health and health related data important for public health decision. Health and Demographic Surveillance Sites (HDSS) with their respective universities are listed below.

1. Arba Minch Health and Demographic Surveillance System, Arba Minch University
2. Butajira Health and Demographic Surveillance System and Addis Ababa Mortality Surveillance Program, Addis Ababa University
3. Dabat Research Center, Health and Demographic Surveillance System, University of Gondar
4. Dale Wonsoho Health and Demographic Surveillance System, Hawassa University
5. Gilgel Gibe Field Research Center, Health and Demographic Surveillance System, Jimma University
6. Kelilte Awlaello Health and Demographic Surveillance System, Mekelle University
7. Kersa Health and Demographic Surveillance System, Haramaya University
8. Micha Health and Demographic Surveillance System, Bahir Dar University
9. North Shewa Health and Demographic Surveillance System, St. Paul Millennium Medical College
10. Wolaita Sodo Health and Demographic Surveillance System, Wolaita Sodo University

2. Memorandum of Understanding for collaboration

This Memorandum of Understanding (hereinafter referred to as the “MOU”) is made and entered into by and between the Ethiopian Public Health Institute, Ethiopia (hereinafter referred to as “EPHI”) and nine

Universities (hereinafter referred to as “Universities”)in order to collaborate and support improved health in Ethiopia through the National Data Management Center for health at EPHI (hereinafter referred to as “NDMC”) and the Health and Demographic Surveillance Sites (HDSS) and Addis Ababa Mortality Surveillance Program(AAMSP) at the universities (hereinafter referred to as “HDSS”) on the use of data for the population in accordance with the “information revolution” described in the Health Sector Transformation Plan.

3. Purpose of Collaboration

This collaboration is aiming to maximize opportunities for NDMC located at EPHI and HDSS located in the Universities on research capacity building, research funding, data access and sharing, identifying research priorities and dissemination of findings to inform national and subnational health policy in Ethiopia. By working together, NDMC and HDSS will enable Ethiopia to have the most accurate characterization of public health problems so that evidence-informed–based decision can guide the development and evaluation of policies and programs. This collaborative endeavor will also improve the visibility, credibility and significance of NDMC and HDSS in the country and beyond.

Specific purposes of this collaboration are

1. to establish a working collaboration between NDMC and HDSS
2. to support improvements in the health sector through generating data and strong evidence and translating evidence to action in the health sector
3. to sustain a continuous, accessible data storage and archiving in NDMC
4. to develop collaborative research and surveillance projects

4. Process of collaboration and implementation

This collaboration aims to bring together the necessary expertise and funding (if secured through third parties) so that NDMC and HDSS can sustainably support Ministry of Health. Such a collaboration is expected to enable NDMC and HDSS to generate data and apply scientifically sound principles to use the available data so that population health can be characterized, the performance of health programs can be monitored, impact can be assessed, and information can be generated to inform policy makers, health practitioners, and researchers to promote evidence-based decisions. In formalizing this collaboration through this MOU, NDMC and HDSS agree to subsequently develop short and long term strategic plan that will enable NDMC and HDSS, where appropriate, to collect, share and analyze available data and disseminate results. Following signing of this MOU, NDMC and HDSS will work to develop collaborative research grant proposals to support the mission of EPHI and Universities, support HDSS

core activities, to build their capacities, to conduct research projects, evaluations, and other health-related projects. There will be data sharing between NDMC and HDSS and share expertise. The data shared between NDMC and HDSS can be used but not limited to national and subnational burden of disease analysis, socio-demographic analyses, historical analyses, and more localized geographic analyses and to train students.

To best facilitate this collaboration,

1. NDMC and HDSS each designate specific focal person for coordination a project management and research point of contact
2. NDMC chairs the collaboration and the secretary be selected from HDSS
3. The identified team from NDMC and HDSS advise on the inclusion of principal investigators and co-investigators for new grants and authors for journal
4. The identified team will develop guidelines and standard operating manuals on data access and storage, data quality assurance
5. The team will develop short and long term joint strategic plan

5. Data sharing and ownership

Generating timely and quality data and disseminating reliable results are essential for policy decision. NDMC and HDSS will maintain ownership of their raw data emanating from their respective sources. The data sharing practice will be in accordance with EPHI and respective universities data sharing guidelines/policy. NDMC and HDSS will develop data use and storage guideline in line with NDMC overall data storage and data use policy. NDMC and HDSS are expected to share data that include, subject to availability, demographic data, all-cause mortality, morbidity and disability, causes of death, health risk factors, covariates, and other related data such as information that identifies the geographic source of the information.

6. Expected outcomes

This collaboration is expected to build strong research data system, fill critical gaps of generating quality data and evidence, use of evidence for action and changing data use culture at different levels.

1. NDMC and HDSS build their data management, data analytics capacity and share expertise
2. NDMC and HDSS advance data availability and sharing

3. NDMC and HDSS analyze the data to produce estimates of the burden of diseases and injuries and risk factors at the national and subnational level
4. NDMC and HDSS develop win-win research collaboration culture to better serve the country and improve their visibility and creditability
5. NDMC and HDSS create sustainable funding scheme to achieve their mission
6. Both facilitate the use of evidence for action to Ministry of Health and partners through different mechanisms

7. Results dissemination and publication

NDMC and HDSS agree that results should be disseminated in order for both organizations to fulfill their missions and have the greatest impact. The results of the collaborative works are expected to be published through reputable peer-reviewed journals and potentially other types of publications.

- This MOU does not restrict either HDSS or NDMC to conduct their own analysis and publish or present their own results using their own data outside of this collaboration including explicit sharing of data sources to third parties as criteria for publication or partnership.
- HDSS and NDMC shall work together to develop and co-author publications.
- Individuals from NDMC and HDSS can be the lead author for publications and will be based on consensus to be reached by both.

The rules of authorship shall be governed by the journal to which a submission is made. Where rules are not clearly stated, both agrees to adhere to the International Committee of Medical Journal Editors (ICMJE). Both shall notify and acknowledge each other in publications resulting from shared results unless different arrangements are made in advance.

8. Technical support, Training and Knowledge Exchange

This MOU aims to strengthen collaboration between NDMC and HDSS. Both agree to support one another through technical support, training, and knowledge exchange happen in the following ways (not exclusive of other opportunities):

- NDMC nationally coordinates HDSS for different activities
- NDMC will support HDSS pending availability of funding
- NDMC will provide opportunities for staff members of HDSS for short-term trainings pending availability of funds and enrollment availability overall.

- HDSS will provide guidance and technical assistance to NDMC
- NDMC and HDSS work together and create opportunity for longer-term formal training programs on data science.
- NDMC and HDSS will work strategically in seeking and securing grant where NDMC coordinates for the effectiveness of the strategy and managing communications and grant calls.
- NDMC and HDSS works together to standardize HDSS tools
- HDSS and NDMC works to promote the establishment of new HDSS
- NDMC and HDSS jointly provide policy reports for Ministry of Health and partners.

9. Resources

This MOU affirms the intentions of NDMC and HDSS to work together to support the mandate of NDMC and HDSS and to solicit funding sources to sustain and build their capacities to improve the health of the people of Ethiopia. Attaining external funding is crucial to implement the various joint activities between NDMC and HDSS described herein. To secure external funding, NDMC and HDSS will work together to identify funding sources that can support the aspirations of this MOU. Grant secured by both parties will be managed at EPHI and shared accordingly to participating HDSS sites. Where interests are aligned, HDSS and NDMC will work together to develop a proposal that would support joint plans. Furthermore, both will work together to strengthen the data repository and management system of NDMC.

10. Beneficiaries

The first beneficiaries of this collaboration are EPHI and Universities, researchers and students through building their data and analytics capacity, generating quality data, sharing data and producing robust research outputs for decision and science.

The second beneficiaries of this collaboration are the health sector and the population of Ethiopia. Research findings will be inputs in designing health policy, strategy and interventions to improve people's health.

The third beneficiaries of this collaboration are expected to be local and international institutes, research partners, scientific community through publications from this collaboration, data access and sharing practices.

11. Terms, amendment and termination

This MOU shall become effective on the date of last signature of respective presidents of universities where HDSS are located and shall continue for 5 years. The collaboration will continue after reviewing the performance jointly every five years. This MOU can be modified or amended with mutual agreement between EPHI and Universities. This MOU can be terminated at any time upon three-month advance notice.

12. Signature

University/College _____

Signature _____

Date _____

12.1. Addis Ababa University

University/College _____

Signature

Date

12.2. Arba Minch University

University/College _____

Signature

Date

12.3.. Bahir Dar University

University/College _____

Signature

Date

12.4.. Haramaya University

University/College _____

Signature

Date

12.5.. Hawassa University

University/College _____

Signature

Date

12.6.. Jimma University

University/College _____

Signature

Date

12.7.. Mekelle University

University/College _____

Signature

Date

12.8.. St. Paul Millennium
Medical College

University/College _____

Signature

Date

12.9. Wolaita Sodo University

University/College _____

Signature

Date

12.10. University of Gondar

Ethiopian Public Health Institute

Date