Pre-CODIST Workshop Report
on *Enlisting NMAs in the Fight Against HIV/AIDS*

Monday, April 27th, 2009, 09:00 – 18:00, UNCC CR2

Objectives

This workshop represents the first-ever pan-African event bridging health sector leadership and national mapping agencies to initiate a community of practice to support planning, implementation, and monitoring and evaluation of HIV/AIDS prevention, care and treatment programs.

Attendance

The workshop was attended by at least 170 CODIST delegates and observers drawn from 35 African member States and 13 countries from Europe, North America, and Asia. Gender representation was approximately 20% female.

Summary

Following opening remarks by the Chair, representatives of the workshop sponsors—UNAIDS, USAID/PEPFAR, and ECA—offered introductory remarks. The workshop facilitator from MEASURE Evaluation outlined the purpose of the workshop and a conceptual overview of spatial data infrastructures and how GIS can inform HIV/AIDS programs.

Five (5) formal presentations comprised the two morning sessions organized around the themes of National Service Provision and Community-Based Reporting. The five (5) presentations were as follows:

National Service Provision
Analysing geographic coverage of ART clinics using GIS: example of collaboration between several institutions in Malawi delivered and detailed some of the characteristics and challenges of Malawi's successful deployment of GIS to assist in the assessment of antiretroviral therapy coverage.

Mapping Task Force Committee: developing a health facility GIS database in Tanzania focused on Tanzania's experiences towards harmonizing the mapping activities carried out by various stakeholders in the health sector. The presenter further elaborated on some of the technical issues (such as uniquely identifying health facilities) in designing the database.

GIS applied to HIV/AIDS interventions monitoring: the case of Rwanda TRACnet System documented how GIS is used in Rwanda to monitor HIV/AIDS services and program information. The system allows for the real-time population of the database through various channels (PDA, Smartphone, Web, cell phone, etc.) and facilitates near real-time decision support through forms and dashboards providing national-, district-, and facility-level summary data.

Community-Based Reporting
Identifying priorities for improving the quality of routine community HIV and AIDS information in Kenya described how routine community-level health data are uploaded to the national monitoring and evaluation HIV database in Kenya. The speaker shared

how GIS was valuable for identifying data quality issues and how challenges of data quality and gaps in reporting were bridged.

The use of GIS for mapping HIV/AIDS susceptible areas in Addis Ababa, Ethiopia showcased how GIS can be leveraged to plan, prioritize, and allocates resources to attenuate HIV/AIDS transmission. Using GIS and spatial analytics, it was possible to identify areas of discord between HIV/AIDS susceptibility and the spatial distribution of existing VCT centres.

The afternoon session was comprised of group breakout sessions in which participants were divided into six (6) geographic and linguistic groups. Each group was charged with enumerating data and technical capacity requirements, assessing current capacities, and then identifying linkages between the health sector and national mapping agencies and the challenges to the formation of these linkages.

This exercise also allowed participants to
o Share and discuss their experiences with linkages between the health sector and national mapping agencies;
o Identify potential areas of collaboration including the development of expertise directories, metadata catalogues and data standards;
o Identify other potential limitations or challenges not part of the original group exercise.

It is expected that further knoweldge and information will be gleaned from a subsequent analysis of the institutional capacity form circulated during the group work.

Major Outcomes
The workshop
o Confirmed the importance of forging robust networks between the health sector and the other key players, starting with the national mapping agencies, when it comes to the use of geographic information in support of HIV/AIDS programs;
o Found that overcoming the challenges in establishing and maintaining these linkages requires national-level leadership to ensure sustainability;
o Illustrated that National Spatial Data Infrastructures (NSDIs) are better built around addressing real problems instead of as an end in itself. In this context, the exigency of public health, beyond just HIV/AIDS, can be seen as an effective driver of NSDI implementations;
o Underlined the importance of several technical issues including understanding of the data flow.

A short survey conducted during the afternoon session also identified the following top three (3) constraints to health geoinformatics (in order of priority):
a. resources (overall, personnel, and financing);
b. spatial data (collection, availability, acquiring, and sharing);
c. awareness (collaboration and cooperation).

These results highlighted the importance of synergistic activities by those institutions involved in public health and NSDI activities in countries such as donor agencies and other partners including industry leaders, civil society and academia.

Notably, national mapping agencies and health sector representatives initiated new contacts during the workshop itself and committed to pursue them upon return.

Resolutions

On Enlisting National Mapping Agencies in the Fight Against HIV/AIDS

Recognizing

That HIV/AIDS is a major concern on the African continent that affects all aspects of society;

That there is a strong geographic dimension to the planning, implementation, and monitoring and evaluation of HIV/AIDS prevention, care and treatment programs;

That very often health is not taken into account when developing the National Spatial Data Infrastructure (NSDI);

Recommends

The strengthening of the linkage between the key players in the heath sector (Ministries of Health, Social Services and National AIDS Commissions) and the institution(s) driving the NSDI in country.

Welcomes

The organization of the Pre-CODIST workshop "Enlisting National Mapping Agencies in the Fight Against HIV/AIDS: Building Partnerships with Ministries of Health & Social Services and National AIDS Commissions" which took place in Addis Ababa, 27 April 2009.

Urges

1. Member States to ensure that the key players in the heath sector (Ministries of Health and / or Social Services as well as National AIDS Commissions) actively participate in the NSDI process to ensure that public health issues such as HIV/AIDS are addressed;

2. UNECA, with the help of partners, to establish a community of practice allowing for the transfer of knowledge and experiences integrating health into the NSDI process among countries on the African continent and discuss issues such as developing a common terminology (ontology);

3. Institutions acting in the effort to realize universal access to HIV/AIDS prevention and treatment to develop and implement a communication and advocacy strategy for the use of geographic information at the continental, regional and national levels;

4. Institutions involved in public health and NSDI activities in member States, including donor agencies, industry leaders, civil society and academia, to support all of the above, for example through public-private partnerships.