GDHN November 2023 Webinar

Digital transformation lessons learned from the USAID-funded Country Health Information Systems and Data Use Project (CHISU) and the Ethiopia Digital Health Activity (DHA)

Global Digital **Health** Forum **2023**

December 4- 6, 2023

Hybrid Event - Virtual (Asia and East Africa time zones)
In-Person - Washington D.C.

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Digital Transformation: Lessons Learned from the USAID-funded Country Health Information Systems and Data Use Project (CHISU) and the Ethiopia Digital Health Activity (DHA)

Global Digital Health Network Monthly Webinar

November 2023

Presenting Projects

Country Health Information Systems and Data Use (CHISU)

- The flagship data and information system project of the USAID Bureau for Global Health, Office of Health Systems.

- Strengthens host country capacity and leadership to manage and use high-quality health information systems (HIS) to improve evidence-based decision-making.

- Implements interoperable information architecture, strengthens data use, and supports countries' self-reliance

Digital Health Activity (DHA)

- A five-year, USAID-funded activity implemented by JSI.

- Four key pillars: digitization, data use, capacity strengthening and governance.

- Helping build a sustainable, resilient, and interoperable HIS that ensures the entire health sector has the data, analytics, and skills necessary to improve the health and wellbeing of all Ethiopians.

Speaker Panel

Country Health Information Systems and Data Use (CHISU)

Global Digital Health Network

November 2023

Vision

Country health systems in which **stakeholders at every level can access high-quality data generated from multiple, interoperated data sources, and use those data** to guide policy, improve resource allocation, service delivery, and system performance.

CHISU: Objectives

Strengthened **governance** and enabling environment of host-country health information systems
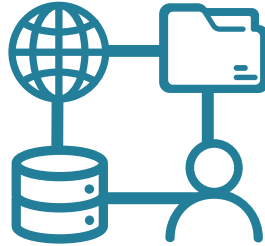
Increased **availability and interoperability** of quality health data and information systems

Increased **demand and use** of health data and information to address health priorities, gaps, and challenges

Strengthened organizational development of **local partners** for sustained health data use

Gender, Data Security

Current Countries

One Team

JSI

RTI INTERNATIONAL

Vital Strategies

MACRO-EYES HEALTH

GEMNet Health
Global Evaluation & Monitoring
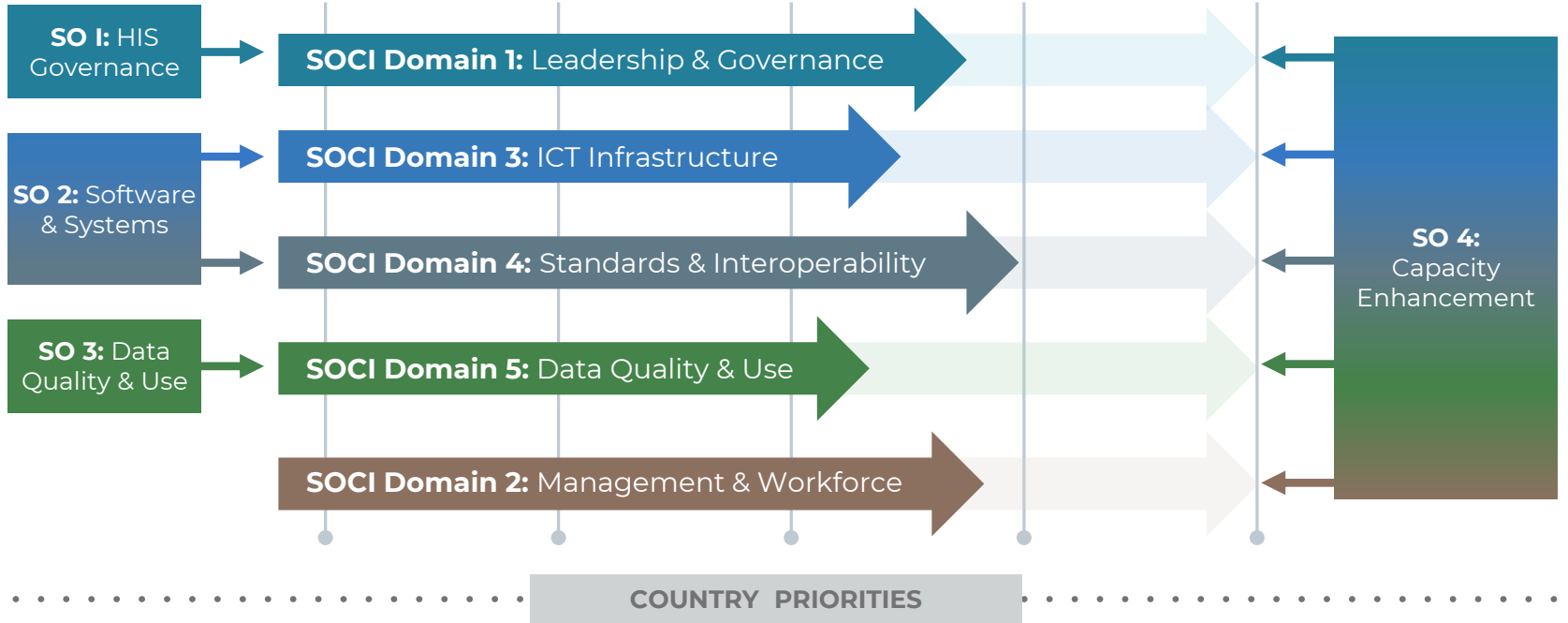Network for Health

jembi
health systems NPC

RESOURCE PARTNERS

- » Asia eHealth Information Network (AeHIN)
- » BAO Systems
- » Bluesquare
- » Cooper/Smith
- » Data Science Ltd.
- » European Agency for Development and Health (AEDES)
- » Excella Consulting

- » Institute for Healthcare Improvement (IHI)
- » inSupply
- » Medic Mobile
- » Central American Health Informatics Network (ReCAINSA)
- » Routine Health Information Network (RHINO)
- » The Medical Concierge Group (TMCG)
- » U3 SystemsWork

Stages of Continuous HIS Improvement

Emerging · · · Repeatable · · · Defined · · · Managed · · · Optimized

SO 1: HIS Governance → SOCI Domain 1: Leadership & Governance

SO 2: Software & Systems → SOCI Domain 3: ICT Infrastructure

SOCI Domain 4: Standards & Interoperability

SO 3: Data Quality & Use → SOCI Domain 5: Data Quality & Use

SOCI Domain 2: Management & Workforce

SO 4: Capacity Enhancement

COUNTRY PRIORITIES

CHISU and Data Use

What have we learned?

What have we learned so far?

— Data demand is driving system development and deployment

» COVID-19 pandemic increased the need for data globally and has been a useful entry point for strengthening HIS

» Automation of bulletins, e.g., in Malawi

— Greater focus needed on data analysis and interpretation

— Learning about data use across different programs

What have we learned so far?

- There is an appreciation for leadership and coordination
  - » Support technical working groups (TWG) as platform at national and subnational levels
  - » CHISU participates in TWG, e.g., Malawi, ESC
  - » Also supports various data review meetings and platforms, e.g., NMCP, M&E, etc.
- Coordination with local partners to promote data use
  - » CHISU Indonesia developed data quality assessment (DQA) toolkit in collaboration with WHO based on context (individual and aggregate data), and implemented at subnational level

What have we learned so far?

Some barriers to data use:

- Data use assessments lack a standardized approach
  - » Malawi and Indonesia developed checklists to measure data use
- Access to data
- Infrastructure
- Governance issues
- Lack of user input in dashboard design leads to incoherent output (e.g., too many graphics over too long a period)

- Understanding of importance
- Conflicting imperatives
- Lack of motivation
- Lack of confidence in the data
- Actual and perceived data quality problems
- Poor job satisfaction / demoralization
- Insufficient training
- Inadequate tools

What can we explore further?

— Learning reflection questions

   i. What interventions improve data use the most? Can we prioritize? At what level(s) of the health system should we intervene?

   ii. Can we replicate promising practices in other countries?

      1. E.g., automated bulletins, standard dashboards, data review meetings, etc.

   iii. How do we know we have improved data use?

      1. Measurement of data use remains a challenge. We are trying new things, e.g., ad hoc but standardized reporting of data use instances

What can we explore further?

— Developing standards to ensure solid foundation for data use

— Instituting data use surveys (qualitative assessment interviews with key informants to determine best practices)

— Promoting use of improved data visualizations

— The role of AI or automated interpretation of data visualizations, e.g., automated bulletins

— Interoperability between data platforms and integrated supportive supervision (ISS) platforms to make ISS processes more efficient

What can we explore further?

— Promoting non-traditional methods for measuring data use already available

  » Web access metrics

  » Surveys

  » Case studies

— Supporting tools to increase data use

  » Dashboards

  » Bulletins

  » Mathematical modeling

Gender

CHISU's gender approach

— CHISU's **Gender Plan** outlines how CHISU will institutionalize gender throughout its activities and four strategic objective areas.

　» All new team members receive **gender orientation**, setting the stage for gender awareness and gender integration

　» Activity teams have **semi-annual calls** with CHISU's gender advisor and specialist to plan their gender integration approaches

　» CHISU activities share **quarterly reports** on their progress, successes, and challenges for selected gender considerations based on country work plans

— The **SOCI framework** is gender-integrated and includes benchmarks along the stages of progression that promote awareness, document progress, and advocate for the inclusion of gender in HIS strengthening.

Global level efforts

— Co-lead of the Digital Health and Interoperability (DH&I) Gender/DEI small working group

— Conferences

» Health Systems Research conference in Bogota, Colombia in November 2022

» Global Digital Health Forum panel in December 2023

— International Women's Day 2023 blog post and short videos on how gender integration contributes to more equitable HIS.

— Gender webinar on integrating gender into HIS strengthening with experiences from Burkina Faso, Ghana, and Indonesia in March 2023

— CHISU contributed to the African Women in Digital Health flagship initiative action plan.

CHISU's gender materials

— **Gender Considerations Guide**

» Based on CHISU's technical approaches

» Menu of options to consider applying in the country context

» Tailored to help teams identify relevant and impactful areas for gender integration

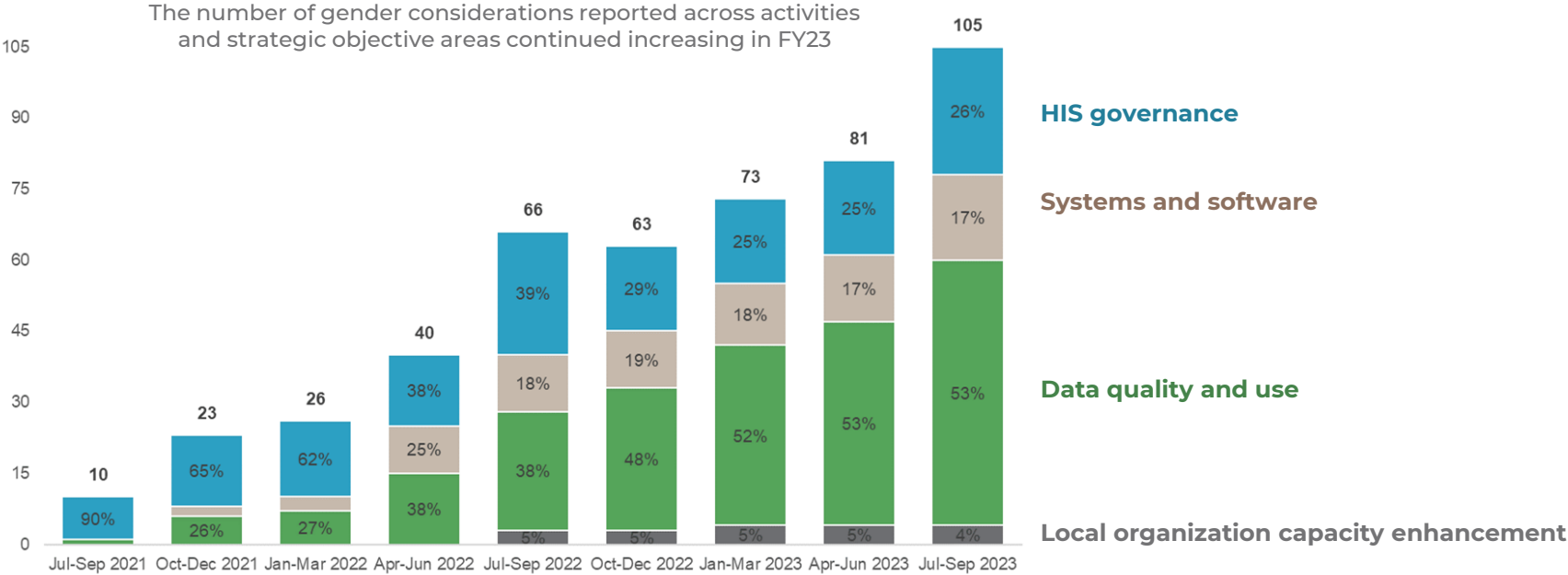| SO2: Increased availability and interoperability of quality health data and information systems		
Does your activity....	**Then consider....**	**Where do I report this?**
2.1 Conduct workshops or meetings for developing reports and dashboards, modifying systems or working with new software?	Ensure gender aspects are included by: • Carefully discuss how new programs or dashboards could exacerbate or overlook gender inequities or possibly improve inequities. • Invite and encourage participation of women in workshops; support women to get up to speed on relevant issues; listen to and elevate their feedback. • Discuss disaggregation by sex, gender, age, and other equity factors such as race, ethnicity, caste, class, and education	B_Gender If hosting an event, also report under: D_Knowledge Management
2.1 Include training on digital systems or distribution of technology supplies?	Consider the importance of the gender digital divide in your work. Women may lack expertise in mobile devices and online navigation, and this may be a reason to offer additional training, rather than overlook them in favor of prioritizing more experienced men for technology distribution or point people. • Ensure trainings are delivered equitably, with a focus on encouraging/supporting women or disadvantaged groups to attend trainings and are able to use the system to enter, analyze and use data.	B_Gender If conducting a training event, also report under: D_Knowledge Management
2.2 Support increased interoperability between	• Advocate that disaggregation by sex and age are maintained across systems and included in standards of interoperability.	B_Gender

CHISU Gender Considerations by SO Guide, page 4

Applying gender considerations

HIS governance

In **Serbia**, CHISU supports the integration of gender considerations into policies, standards and protocols that emphasize the importance of sex-disaggregated data during data collection, analysis, interpretation, and use for decision-making. CHISU included gender approaches in job descriptions for new positions at the Institute of Public Health Batut that were being recruited to support the development of HIS SOPs.

Systems and software

In the **Eastern and Southern Caribbean,** CHISU is supporting the development of new COVID-19 vaccination data systems in several countries (Antigua and Barbuda, Saint Lucia, Suriname) and ensuring that the modules have functionality and capability to disaggregate data by sex

In **Indonesia**, CHISU advocates that disaggregation by sex and age is maintained across systems and included in standards of interoperability

In **Ghana**, CHISU promotes gender sensitivity in its workshops and trainings by using examples of gender analysis and interpretation to emphasize the importance of considering gender in malaria data when working with regional malaria surveillance, monitoring, and evaluation teams. Acknowledging the gender digital divide by discussing ways to address potential gender-based barriers to utilizing the DHIS2 eTracker application for service provision in a training with healthcare workers.

Data quality and use

Monitoring gender integration

The number of gender considerations reported across activities and strategic objective areas continued increasing in FY23

HIS governance

Systems and software

Data quality and use

Local organization capacity enhancement

	Jul-Sep 2021	Oct-Dec 2021	Jan-Mar 2022	Apr-Jun 2022	Jul-Sep 2022	Oct-Dec 2022	Jan-Mar 2023	Apr-Jun 2023	Jul-Sep 2023
Total	10	23	26	40	66	63	73	81	105
HIS governance	90%	65%	62%	38%	39%	29%	25%	25%	26%
Systems and software				25%	18%	19%	18%	17%	17%
Data quality and use		26%	27%	38%	38%	48%	52%	53%	53%
Local organization capacity enhancement					5%	5%	5%	5%	4%

Looking ahead

- Continue global representation and advocacy

- Continue systematic monitoring

- Gender Tiers Framework

  » Places gender considerations on a gender continuum

  » Move beyond systematic monitoring across menu of items

  » Provides a path on a map to progression

  » Measure the impact of our gender integration work

CHISU Indonesia

Thank you!

Digital Health Activity Ethiopia

About DHA

Who are we?

The Digital Health Activity (DHA) is a five-year (2019–2024) USAID-funded JSI led flagship project that supports the health sector in achieving its Information Revolution Roadmap by building a sustainable HIS that ensures the entire health sector has the data and skills required to improve the health and well-being of all Ethiopians

Geographic and Targeted Population Focus

- National presence: covers all regions and city administrations
- Target populations include:
  - Health systems leaders, managers, health services providers, communities, individuals and IDPs
- Focuses on the IR but benefit goes beyond
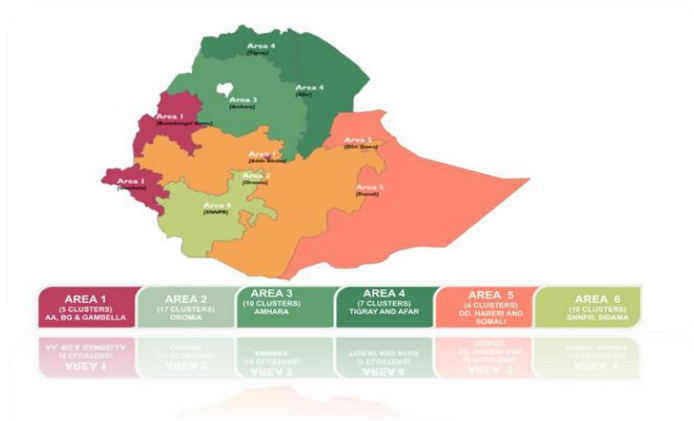
Objectives

Goal: Improvement in quality of life through enhancing health service quality and health outcome

Objective 1

Support Information technology Systems and Data Repository

_____

Objective 2

Build a Culture of Data Use and Improve Service Quality

_____

Objective 3

Capacity Building and Governance

_____

Objective 4

Improve Availability & use of Quality Data in Conflict Areas & IDPs for Rapid & Tailored Health Services

_____
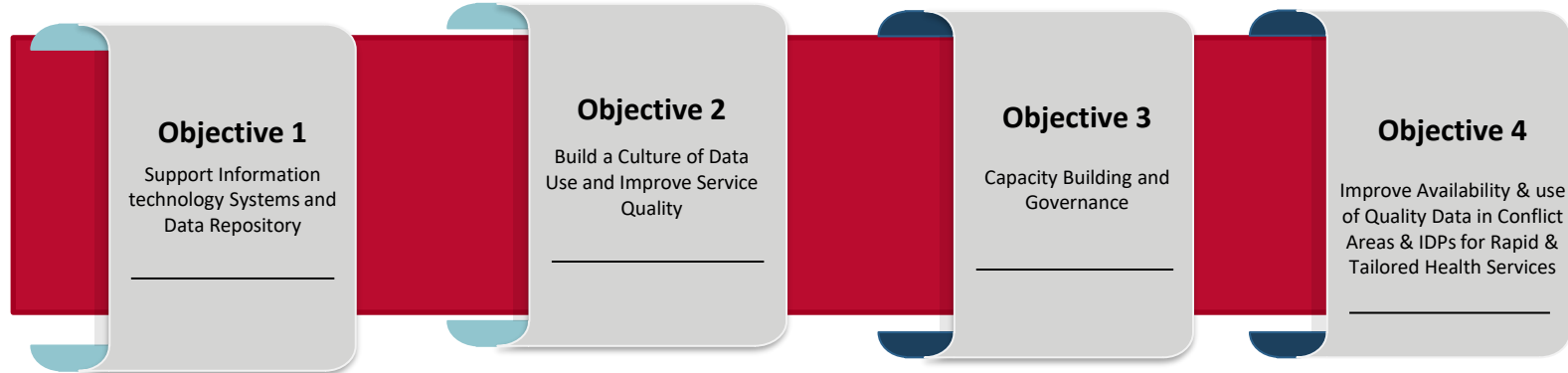
Learnings

- Coordination, cocreated and locally-led priorities

- Expanding the roles of private partners, universities, and youth enterprises

- Flexibility and agility to respond to ever-changing needs of the health sector

- Striking the right balance between program needs and HIS strengthening support

- Importance of thinking through HIS resilience in times of emergency

- The need to strike the right balance between digitization, data use and capacity building initiatives

- Person-centered, community-tailored design

Coordination, Alignment, Locally led
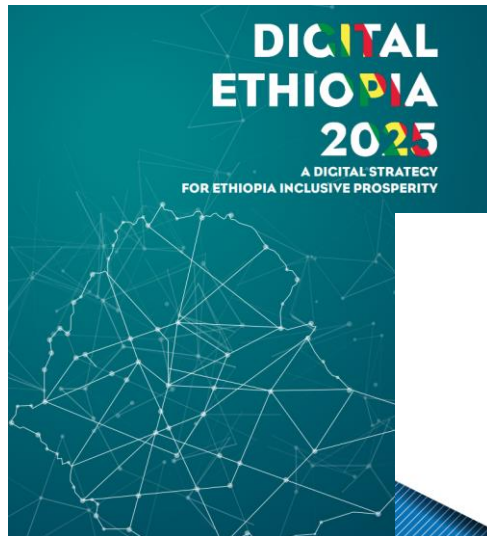
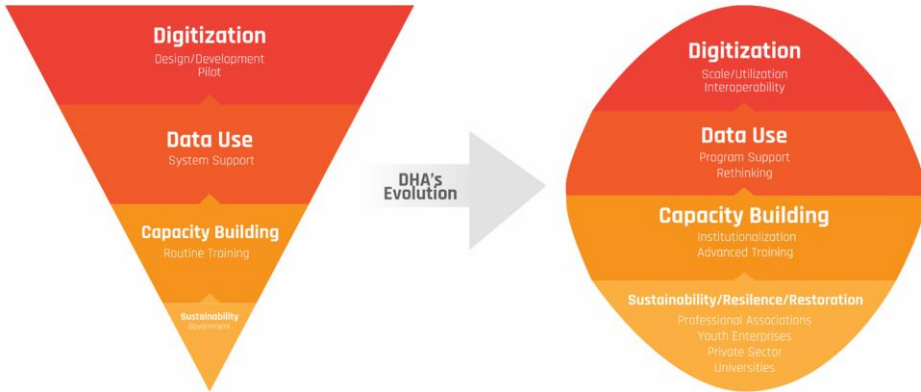# Expanding Roles of Private Partners, Universities, Youth Enterprise

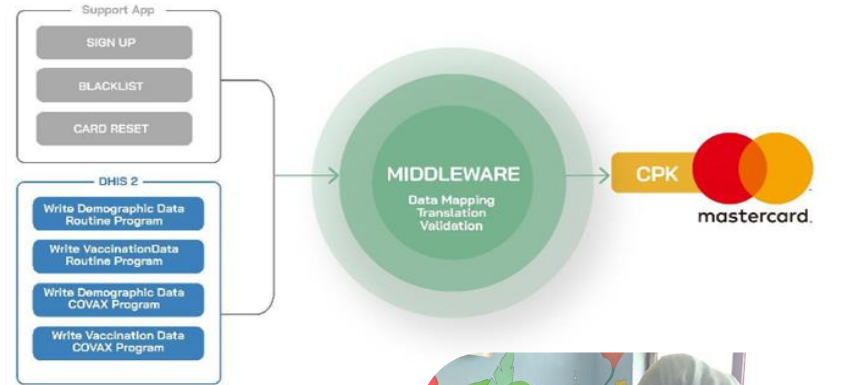# Balance between Program Needs and HIS Strengthening

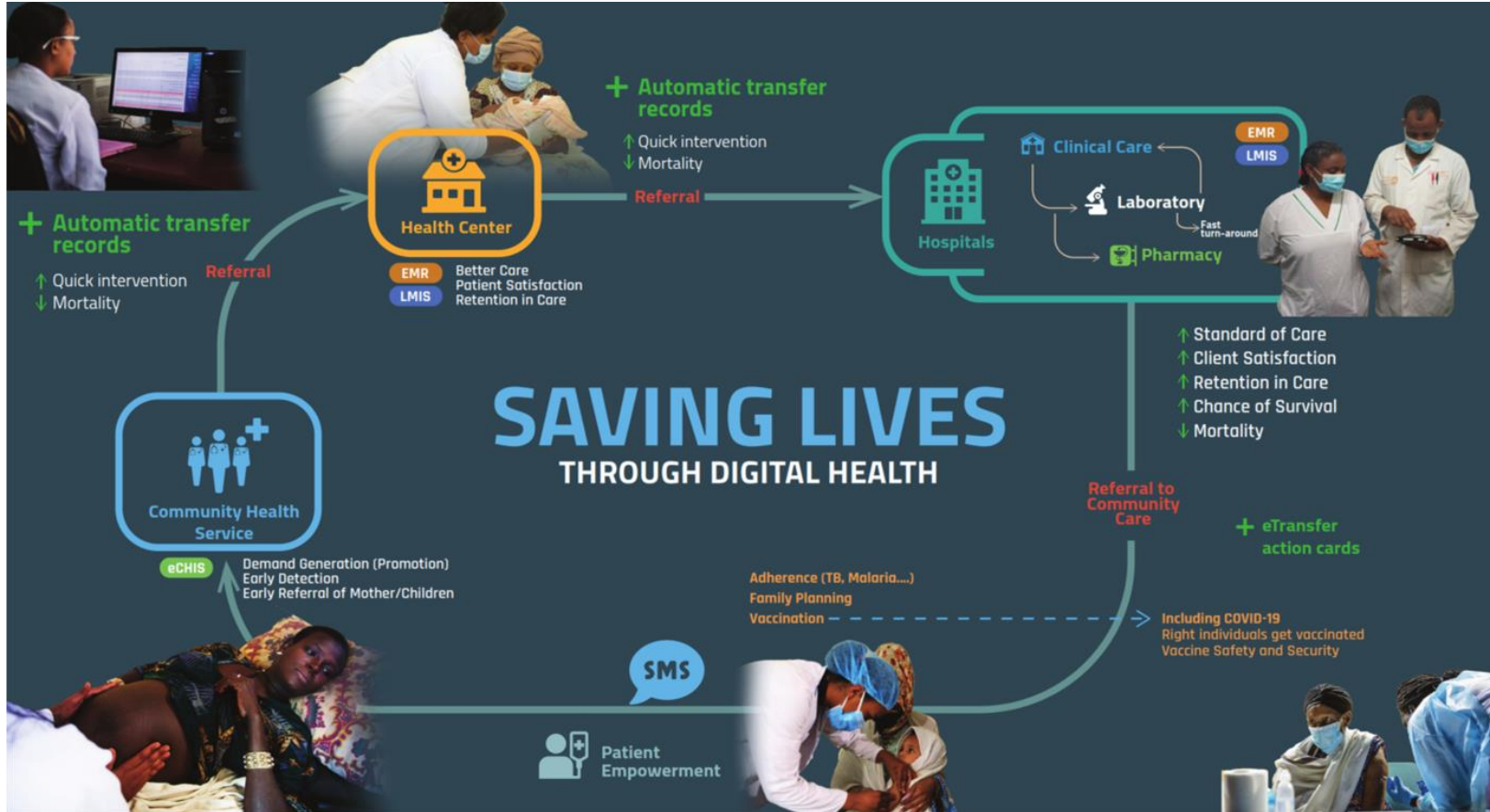# Core Tenants: Flexibility and Balance

Flexibility and agility to respond to an evolving health sector

Striking balance between digitization, data use and capacity strengthening

So what?

Thank you!

QUESTIONS?

Closing Thoughts

Thank you!

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