

UNICEF

Contribution to health data governance

- [MICS programme](#) – (more than health data, but still contains core health indicators) designed to be **country owned**, a first principle of good data governance, and has a set of principles agreed with country governments around **data sharing**
- Piloting a system starting with the community level and setting up an **ideal data flow** from the community up through health information system, aggregated at every level with clarity around **privacy and sharing**, with data principles would include a process of **ensuring feedback back down** to community health worker to be able to use the data they were instrumental in collecting. Also used for **accountability purpose**.
- Importance of birth registration and unique identifiers (which are often separate!) as a basic human right because they give an individual **legal status** and **access to services**, requires good governance on setting up [birth registration](#), **death registration** systems, and providing people with unique ID: central to health services
- **Interoperability between different [health data systems](#)** – for **monitoring** of services and the **quality of care**, but that linking of data systems also requires thinking through **data ethics** and **governance** on who is responsible for managing these linked data systems, etc. Examples include how to sort out and streamline **multiple health registries** in clinics, to how to **link HH surveys with facility data** to have a better sense of quality of care and bottlenecks