



HEALTH DATA COLLABORATIVE

Note for the Record – Monthly HDC SRG Meeting		
Location: Zoom		
Date: 27 January 2022, 16:00-17:00 CET		
Meeting Chair: Stephen MacFeely (WHO)		
Co-Chairs	Jennifer Requejo (UNICEF)	
Participants:	Countries	
	Multilateral and Intergovernmental Organisations	Rachel Snow (UNFPA) Sainan Zhang (UNFPA) Anh Chu (WHO) Theresa Babovic (WHO) Solome Nampewo (WHO - Malawi) Bob Stefanski (WMO) Nadege Ade (UNICEF)
	Bilateral Donors, Philanthropic Institutions, Regional Funding Entities	Nicola Wardrop (UK FCDO) Zainab Naimy (NORAD) Rachel Lucas (USAID) Julianna Kohler (USAID) Ramy Guirguis (USAID) Michelle Panneton (CDC Foundation)
	Global Health Initiatives	Emily Bigelow (PHCPI) Heidi Reynolds (GAVI) Philip Setel (Vital Strategies) James Mwanza (Vital Strategies) Ana Torrens (Vital Strategies) Fatima Marinho (Vital Strategies) Joan Sara Thomas (Vital Strategies) Derek Kunaka (CHISU-JSI) Steve Ollis (CHISU-JSI) Jamiru Mpiima (Last Mile Health) Joanna Barczyk (Global Fund) Justyna Tarwid (Drugs for Neglected Diseases Initiative – DNDI) Kirsten Mathieson (Transform Health)
	Civil Society	Maxwell Antwi (PharmAccess Group) Brian Taliesin (PATH) Lola Dare (CHESTRAD) Rachel Goodermote (IFRC)
	Research, Academia and Technical Networks	Pam Dixon (World Privacy Forum) Laticha Walters (Council for Scientific and Industrial Research, South Africa) Kathy Gallagher (CDC) Chris Murrill (CDC) Carrie Eggers (CDC)



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		Brian Munkombwe (CDC) Emily Cercone (CDC) Patricia Richter (CDC) Evelyn Waweru (KEMRI) Kristin Braa (University of Oslo) Scott McKee Russpatrick (University of Oslo) Manish Kumar (UNC-CH) Paul Nunesdea (Heath Data Forum) Rita Sembajwe (RTI International)
	Private Sector	Patricia Monthe MedXCare Ifeoluwa Olokode (Helium Health) Grace Kiwanuka (Uganda Healthcare Federation) Ivan Onyutta (Uganda Healthcare Federation) Steffen Tengesdal (BAO Systems)
	Observers	Ilana R. Siegal Ann-Marie Sevcsik Owen Priestley (Liquid Light) Christopher Neu Philippe Veltsos Tracey Li
Working groups:	<i>CRVS</i> Azza Mohamed Badr (WHO) Debra Jackson (LSHTM) <i>Data and Digital Governance</i> Vikas Dwivedi (Palladium Group) <i>RHIS</i> Jean Pierre de Lamalle (RHINO) Norah Stoops (HISP SA) <i>PHI</i> Karl Schenkel (WHO)	
WHO secretariat:	Craig Burgess, Mwenya Kasonde, Alexandra Laheurte Sloyka	
Objectives:	<ol style="list-style-type: none"> To confirm representation of constituencies and working group co-chairs for 2022-2023 To review and approve HDC Workplan, Milestones, Governance for 2022 To follow up action points on the Global Partners Meeting 	
Agenda:	<ol style="list-style-type: none"> Welcome and introductions (chair) (5 mins) HDC Governance (20 mins) <ul style="list-style-type: none"> Added value of constituencies Confirm representation of constituencies and working group co-chairs for 2022-2023 HDC Workplan, Milestones, Governance for 2022 (for approval) HDC and SDG GAP (20 mins) 	



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- SDG GAP update
- Follow up action points of December Global Partners Meeting
- Country engagement update

4. Comms and events (10 mins)

- HDC Webinar schedule for 2022 (for approval)
- Website update

5. Next steps: Chair (5 mins)



SUMMARY OF DISCUSSION

HDC Governance (20 mins)

Added value of constituencies

Confirm representation of constituencies and working group co-chairs for 2022-2023

HDC Workplan, Milestones, Governance for 2022 (for approval)

HDC Secretariat – Craig Burgess

- Stakeholder Reference Group
 - Adding another representative from the SDG GAP to the Stakeholder Reference Group since the SDG GAP Data and Digital Accelerator merged with the HDC.
 - Co-Chair, Helen, is looking to step down.
 - 3 multilaterals (WHO, UNFPA, and another is being confirmed).
 - Alternates: WHO EMRO, UNSD, UNICEF.
 - 2 from bilateral donors and foundations.
 - 1 from Global Health Initiatives, represented by PHCPI.
 - 2 from Research, academia, and technical networks.
 - 1 from Civil Society.
 - 1 from Private Sector.
- 3 co-chairs of HDC
 - Country: Helen Kiarie (MoH Kenya)
 - UNICEF: Jennifer Requejo
 - WHO: Stephen MacFeely
- Any member of the HDC can join the 7 working groups.
 - Encourage anyone who is interested in joining the working groups to contact Secretariat
- HDC 2022-2023 Workplan and Milestones
 - SRG is being asked to approve the Work Plan and Milestones.
 - There are intentionally no budget figures as the plan is to have the activities and milestones approved first before talking about budget.
- Objectives:
 - To strengthen country capacity to plan, implement, monitor and review progress and standardize processes for data collection, storage, sharing and analysis, and use to achieve national health-related targets.
 - To have government-led partners coordination mechanism.
 - National data institute for capacity building.
 - 2-3 data/digital priorities.
 - Data/digital champion in place.



- Data/digital tools are used and adapted to different contexts (e.g., SCORE, GIS, RHIS strategy).
- To improve efficiency of technical and financial investments in health data and digital systems through collective action and aligning with country-identified priorities.
- To increase the impact of global public goods and tolls on country health data systems through increased sharing, learning and country engagement.
- To ensure HDC has governance processes and structures in place to provide transparent accountability mechanisms to all countries and partners, communications to all stakeholders, and advocacy to strengthen political capital.
 - Aim to increase country membership from 11 to 16 by the end of the year.
 - Aim to increase institutional membership.
 - Biannual leadership events.
 - Will commission an independent evaluation of the HDC in the second half of this year and hope to receive recommendations for next year.
 - Website revamp to be functional by Q3 2022.

Questions

FCDO-Nicola Wardrop

- There should be more discussion about the investment case for HIS, such as who the main audience would be, what the purpose is, and how it will move things forward for HDC.
 - Our constituency is not convinced that it would address the major challenges.
- Is it possible to add a milestone in Objective 2 to identify the challenges at the country level for alignment and determine what more can be done to support the alignment agenda?
 - There might be something more specific that we can do to look at country level alignment, such as a workshop with partners or something to generate ideas about how we can strengthen this.

Data and Digital Governance-Vikas

- How do we ensure that milestones or activities that are not currently funded or don't have any sort of project supporting it, are supported and moved forward? Maybe we can address this at some point.

CDC-Carrier Eggers

- A couple of these objectives are very focus on country level activities, is there a way to bring better awareness to who the focal point for the HDC is in each of these countries?
- It would help to know who the point of contact is or if there is a focal point or focal center for these countries for some of these activities that we could connect with.

UNC-CH-Manish Kumar

- It would be useful to know how these milestones connect with some of the things that the working groups might also be doing.



- These are not only milestones for this group. It is also possible to accomplish if there are other smaller working groups pursuing similar goals in terms of governance and collaborations.
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UNFPA-Sainan Zhang

- Is there an overview of the working groups, such as the goals, composition of membership, etc.?
- Does each working group have their own terms of reference and its own activities? This would be helpful to know.

NORAD-Zainab Naimy

- Are the deliverables of the working groups reflected here in the work plan? Didn't come out clearly.

In response

HDC Secretariat – Craig Burgess

- We can send out a detailed list of the working groups, including their terms of reference, their deliverables, who the co-chairs are, etc.
- Regarding the investment case, the current thinking is to raise the profile of how important health information systems are, specifically investment of political, technical and financial resources into health information systems.
 - In December, it was agreed that the target audience should be the Ministries of Finance in countries and the global community to raise awareness of what it would take to strengthen health information systems, such as unit costs, added value, return on investment, etc.
 - It's still in initial thinking. We will be reaching out to the RHIS working group for more ideas on the investment case and how it can be shaped.
- Regarding funding, our intention is to get the activities and milestones approved first and then look at budget requirements.
 - Several working groups have contributed to the work plan.
 - If a donor or funding entity wanted to get involved with a technical aspect of work, then they could fund it.
 - At country level, the funding mechanism would be different as it has more to do with existing coordination mechanisms or funding health information systems at countries led by governments.

HDC Secretariat – Mwenya Kasonde

- Each working group has their own specific terms of reference and the deliverables. We are trying to ensure that the deliverables and everything is integrated into one work plan to the extent that it is possible.
- Regarding focal points, there are HDC focal points for each country.
 - Have specific focal points in country at WHO, UNICEF and regional offices.



- Have other focal points established in Nepal, UNICEF, GIZ, UNFPA, etc.
- All countries have at least one focal point within WHO, UNICEF, Ministries of Health, and other agencies.
- Also have a government focal point in each country.
- The caveat to this is the modality for communication. Getting in touch with them is a different issue. The process is to go through the regional office, then the country office, then to the Ministry of Health.
 - There are relationships established, but we need to be careful with the way in which we communicate with country colleagues and respect necessary protocols.
- Regarding the alignment question, consultants, Nadege and Serena, have undertaken an in-depth assessment of the current status of alignment in terms of technical, international investments in health information systems in Kenya, Cameroon, Zambia, and Nepal.
 - This will hopefully inform our activities moving forward on how to interact with these countries and other HDC countries.

WHO-Anh Chu

- We have got approval for the WHO Routine Health Information System strategy and are going to launch that together with the call for support from partners to support countries.
- Will share with the HDC network.
- Also had input from the working groups.
- Will continue to work with HDC on the investment case for health information system to see how we can mobilize the available technical tools, the framework and technical support to help strengthen countries' routine health information systems.
- This is part of the health information overall and will link that with health data in the country in general.

Questions

Helium Health - Ifeoluwa Olokode

- May we have a copy of the report the consultants created of this assessment, or was this already shared?

UNICEF-Jennifer Requejo

- For the country specific work, I think the workplan is fine as is for approval purposes.
- Would be good to have more in-depth discussions on how we achieve the "proof of concept" for HDC engagement in 1-3 HDC priority countries, and what we are offering for the additional countries that have expressed interest in joining.
- Agree in principle with expanding to more countries, but think we need to reach greater clarity on what the HDC will deliver for these countries that are interested in joining. This is related to the learnings from the consultancies Mwenya just described.



- The consultants are still working on their reports. They are not ready yet for broader circulation, but the PowerPoint they gave in December describing the purpose of their consultancy and the countries they are working in can be shared.

UNFPA-Rachel Snow

- At some point, it would be good to learn more about the Regional Data Institutes.

In response

HDC Secretariat – Craig Burgess

- The thinking behind the Regional Data Institutes is to focus on regional coordination and regional institutes as we scale up the HDC.
- Could play 3 main roles: capacity building, technical support and advocacy for data and related efforts.
- 2 institutes hosted the December event. This year, we are hoping one Asia institute could host an event.
- There are multiple institutes in different regions that can support HDC efforts under the constituency of research, academia and technical networks.
- Quite a few joined last year and we're hoping the support will be mutual.

HDC and SDG GAP (20 mins)

SDG GAP update

Follow up action points of December Global Partners Meeting

Country engagement update

UNFPA-Rachel Snow

- Want to make sure people are on board with the integration of SDG3 GAP Data and Digital Health Accelerator with the HDC.
- Objective is to ensure there are greater efficiencies at country level.
- It was recognized that there's complimentary and some overlapping actors, both in terms of the institutions you represent and as individuals.
- SDG3 GAP Data and Digital Health Accelerator is largely multilaterals. It's a smaller group.
 - Has a narrower focus on GIS for health and scaling of the CRVS.
- Could be more effective if we align with HDC and engage more effectively with civil society, the private sector, academic researches, and the country.
- Identified 3 pilot countries, 2 of which overlap with HDC countries.
- At country level, there is the potential to focus on mapping the population's geographic proximity to services. We are also focused on SRH and family planning services.
 - Methodology and applications are broad and can be applied across the board.



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- Have been working in Malawi because they had a 2017 census.
- We are linking census data, where available, to get the population distribution.
- There is unevenness across the country for health facility maps and details.
- Useful for helping governments look at where there may be misalignments based on the latest population data.
- We have access to census cartography by partnering with governments and statistical agencies which can help WHO efforts to have a global health facility database for every country. There's an opportunity for synergies and our partnership here.
- We're interested in the capacity and strengthening.
- We know that the HDC working group on CRVS is active. Looking forward to engaging with Vital Strategies to working on the scope and scale of CRVS.
- Made a big investment in CRVS by agreeing to host IDRC Center of Excellence on Civil Registration.
 - Canadian government ask UNFPA to take over this hosting.
- Keen to make sure the work is aligned with the work of HDC.

Question

CRVS-Debrah Jackson

- As one of the co-chairs for CRVS, I'm excited to potentially increase resources and collaboration.
- Is HDC becoming the SDG GAP? Or is it a subcommittee?
- How would we work with SDG GAP on resources? We need people and funding to get CRVS in as many countries as possible. There's a strong interest from countries to work with us on this.

Philippe Veltsos

- Is there a working group on GIS for health? It would be great to collaborate on the work, including colleagues from GRID3 & WorldPop.

CRVS-Azza Mohamed Badr

- We are rich in resources. Our staff is the best resource. We have the whole WHO organization structure behind us as well as the organization structure of UNFPA.
- Have support from country office staff, regional office staff, and have some funding.
- Happy that we're joining with Rachel and Romesh on CRVS as they have done a lot of work in the past.
- We're both interested in Vital Statistics and causes of death.
- Thank you, Rachel, for your intervention.

In response

CRVS-Debrah Jackson

- Digital & Interoperability Working Group might have a GIS subgroup.



UNICEF-Jennifer Requejo

- Agree with that GIS is an important area to think, but we would need to determine what the role of the group and value add is – would it be to align activities in this space or to discuss which methodologies are best?
- UNICEF is also forming a frontier data hub in the data side and has been working in GIS data for a while. We are trying to grapple with the most efficient way to leverage resources and determine the added value of different partners in this space – it's definitely a growing area.

UNFPA-Rachel Snow

- We have worked with GRID3 & WorldPop for years.
 - We are one of the founding members of GRID3.
 - Do a lot of modeling with WorldPop in the area of family planning.
- Agree that there's alignment with UNICEF.

HDC Secretariat – Craig Burgess

- The reason why SDG GAP Data and Digital Accelerator is coming together with HDC is to make better use of people's time as there are overlapping members from the multilateral and global health initiatives.
- SDG GAP has a bit more emphasis on political advocacy and linkage with principles of the agency, data for action, and data for primary health and delivery.
- Bringing the 2 groups together leverages the thinking around other constituencies such as civil society and private sector.
- Hoping it increase resources in terms of intellectual capacity in the working group and focus on countries collaboratively.
- There are still practical issues that need to be ironed out, which will be done once we start working with the countries more coherently.
- The secretariats for the HDC and the SDG GAP are working closely together.

Comms and events (10 mins)

HDC Webinar schedule for 2022 (for approval)

Website update

HDC Secretariat – Mwenya Kasonde

- Thank you to those who attended the December meeting.
- Link to the background documents and report for the meeting:
https://drive.google.com/drive/u/2/folders/1d6pmr5rYfJVovENyD_QtbDhbtXfvpgJ
https://www.healthdatacollaborative.org/fileadmin/uploads/hdc/Documents/2021/Meeting_Minutes/HDC_Global_Partners_Meeting_December2021.pdf
- Recording is online on YouTube.
- 4 strategic shifts for 2022-2023



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- Diversity – increasing countries, CSOs, private sectors, research, academia and technical.
- Communications and advocacy and strategy.
- Scaling up by engaging with more countries.
- Investment case.
- Other conclusions from the meeting
 - Take regional institute engagement further (to Asia and others).
 - Link to different initiatives, including UHC2030 and SDP GAP.
 - Look at the investment case to commission this more practically.
 - Need for regional alignments.
 - Reach out to 2 fragile contexts.
- Country engagement update
 - 8 active countries in the HDC: Kenya, Malawi, Botswana, Uganda, Zambia, Cameroon, Tanzania, Nepal.
 - 3 inactive countries in HDC due to COVID: Indonesia, Myanmar, Bangladesh. Hope to re-engage with them this year.
 - 7 countries have expressed interest.
 - Possible countries with fragile context for consideration: Afghanistan, Yemen, South Sudan, Haiti.
 - Please come forward if you have work that is taking place in these countries so that we can discuss more on country engagement.
- Monthly webinar schedule for 2022 to be circulated.
 - First webinar to be held on February 22. UNICEF to present on adolescent health data.
 - No webinars on March as there will be a biannual meeting.
 - Still some topics are being confirmed, but please come forward if you want to have a slot in the schedule.

Liquid Light-Owen

- Design and development process:
 - Project starts next week with the discovery phase. It includes activities such as determining problems to solve, opportunities for improvements, identifying audiences, etc.
 - Definition phase includes website and information architecture, user journey, developing wireframes, etc.
 - Design phase is to understand personas, develop mood boards, etc.
 - Development phase will include website building, content management configuration, developing workspaces, implement design, and testing.
- Focus is to understanding the audience, creating efficient user journeys, specifying workspaces areas, disseminating information and resources, and creating an optimum knowledge repository.
- Should be ready for launch in Q3 2022.
- Hoping to get a lot of input from the larger HDC group to ensure the website serves the audience correctly.



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Next steps: Chair (5 mins)

WHO-Stephen MacFeely

- Thank you for the verbal and chat contributions.
- Happy New Year to everyone.

Action Points

Action	Person Responsible	Timeframe
Send out a detailed list of the working groups, including their terms of reference, their deliverables, who the co-chairs are, membership, etc.	Secretariat	
Share December PowerPoint presentation from consultants.	Secretariat	
Circulate monthly webinar schedule for 2022.	Secretariat	
Circulate presentation slides.	Secretariat	