



Note for the Record – Monthly HDC SRG Meeting		
Location: MS Teams (virtual)		
Date: 15 June 2023, 16:00-17:00 CET		
Meeting Chair: Craig Burgess (HDC Secretariat)		
Co-Chairs	Joao Pedro Azevedo (UNICEF)	
Participants:	Countries	
	Multilateral and Intergovernmental Organisations	Melissa Cederqvist Njihia (WHO) George Mwinnyaa (UNICEF)
	Donors	Heidi Reynolds (GAVI)
	GHIs	
	Civil Society	Maxwell Antwi (PharmAccess)
	Research, Academia and Technical Networks	Christopher Murrill (US CDC)
	Private Sector	Patricia Monthe (MEDxCare)
	Observers	Xavier Bosch-Capblanch (Swiss Tropical & Public Health Institute) Anisa Hasan-Granier (CEPA) Christian von Drehle (CEPA) Kaveri Kumar (CEPA)
Working groups:	<i>Community Data</i> Ana Scholl (USAID)	
	<i>Data and Digital Governance</i> Vikas Dwivedi (Palladium)	
	CRVS Debra Jackson (LSHTM)	
WHO secretariat:	Craig Burgess, Mwenya Kasonde, Carolina Futuro, Isabella Maina, Pandula Anilpriya Siribaddana	
Objectives:		
<ol style="list-style-type: none"> 1. To provide an update on the HDC Evaluation 2. To provide an update on Country Engagement 3. To review action points and next steps of Leadership event 		
Agenda:		
<ol style="list-style-type: none"> 1. Welcome (5 mins) 2. HDC Governance (15 mins) <ul style="list-style-type: none"> • Update on HDC Evaluation • Update on Workplan 3. Country Engagement Updates (10 mins) <ul style="list-style-type: none"> • Update on engagement 2023-24 4. Working Group Updates (20 mins) 		



- Review of workplans and deliverables
- Update and next steps for RHIS investment case

5. Communications and events (20 mins)

- Update on Leadership event 2023
- Discussion on plans for September SRG

6. Next steps and AOB (20 mins)

SUMMARY OF DISCUSSION

Welcome (5 mins)

HDC Secretariat – Craig Burgess

- Shifting agenda items to accommodate a colleague.
- 3 co-chairs send their apologies. They were unable to attend this meeting.
- SRG meeting is held once a month to exchange information, make decision and provide updates from the HDC.

UNICEF – George Mwinnyaa

- I'm new and joining this meeting for the first time. I am a statistics and monitoring specialist for the data and analytics team at the UNICEF Headquarters.

WHO – Melissa Cederqvist Njihia

- I'm a Digital Partners Consultant with the Digital Health and Innovation department at WHO Geneva.

Working Group Updates (20 mins)

Update and next steps for RHIS investment case

Swiss TPH – Xavier Bosch- Capblanch

- Thank you, Craig, for moving up this agenda item.
- Same presentation at the May 19 event but shortened for this meeting.
- Objective 1 – scoping review of the literature and examples of return on investments
- Objective 2 – looking at 6 country case studies, and in 2 subnational areas, we inquired about the national health information system.
 - Information from South Sudan not yet incorporated
 - Economic analyses of costs and amenable deaths
- Findings: RHIS, as opposed to other systems, is “special” as it is permanently active, all encompassing, has universal distribution, data collection point is the same as data use point, and carries personal information.
- Lots of issues identified in countries, including COVID-19 related issues.



- Gather expert opinion on the status of other subsystems and compared it with the SCORE assessments. They are similar in our assessments and performance in countries.
- Estimate that the annual cost of RHIS ranges between \$2-31 million USD depending on the country. Annual person-time (hours) ranges from approximately \$5 million to \$43 million, depending on the country.
 - HR costs are the largest portion of the RHIS cost.
- Conclusions:
 - RHIS is inextricable from health care processes.
 - Receives marginal funding.
 - Poorly used.
- Actions required from multilaterals, governments, technical partners and funders.
- Need to invest more and invest better in the future and in good governance of systems.

HDC Secretariat – Craig Burgess

- Feedback from external expert panel:
 - To try and estimate economic return ROI on HIS is difficult but groundbreaking.
 - Country studies are the most important part to see what works or doesn't work.
 - RHIS is part of a larger ecosystem of broad health systems, national statistics offices, and other sectors about collecting data and information.
 - Need a counter-argument: What if there was no investment in RHIS? What would that look like?
 - Communities left behind rely on data on civil society and the private sector. Ensure they are engaged.
 - Don't think of this work as an investment case – think of it more as how we can have more efficient investment (technical, financial or political).
 - Make sure target audience also include ministries of finance and governmental systems.

Questions

GAVI – Heidi Reynolds

- Why are there differences and/or similarities between countries? Why do you see differences in those inputs? I want to understand what drives different or similar results on a country-by-country comparison.

WHO – Melissa Cederqvist Njihia

- Did you reference what was formerly called the Global Digital Health Index, now called Global Digital Health Monitor, as you are comparing countries and the HIS status in countries shown?
- This tool presents the maturity of digital health in various countries and have various indicators.

In response

Swiss TPH – Xavier Bosch- Capblanch



- No, we have not been using the Global Digital Health Monitor tool.
- Regarding differences or similarities, one of the main drivers is the salary costs of workers and the time used by the workers.

HDC Secretariat – Craig Burgess

- Next steps on this work are commissioned by the HDC/SRG:
 - Support Swiss TPH in finalizing the products.
 - More analysis on country data.
 - Providing a manuscript for submission to a peer review journal. Specific journal to be decided.

HDC Governance (15 mins)

Update on HDC Evaluation

Update on Workplan

CEPA – Kaveri Kumar

- Independent evaluation commissioned by the HDC to understand its progress to date and since inception.
- Being at the midpoint of the SDGs, how can HDC better orient itself to support the 2030 health-related SDGs? Objective is to provide several actionable recommendations.
- Progress update: the core phase of data collection and evidence gathering to be completed by mid- to end of July. Then report to be collated and presented to the HDC.
 - Completed desk-based document review and key informant interviews/focus group discussions.
 - Country case studies, e-survey, comparator analysis and counterfactual analysis are still in progress.
- Evaluation framework includes relevance and coherence, efficiency, effectiveness, sustainability and impact, lessons learned and recommendations.
- Timelines:
 - End of July – circulate draft report for comments and feedback.
 - September SRG – results of the evaluation and findings to be presented. This is also an opportunity to provide feedback.
 - End of September – work to conclude following receipt of feedback.

HDC Secretariat – Craig Burgess

- Feedback can be sent anytime to the HDC Secretariat who will then forward to the CEPA team.

HDC Secretariat – Mwenya Kasonde

- SRG had agreed to extend the 2020-2023 HDC workplan to 2025 and discussed success metrics.



- Presented the status of each item within all the 4 objectives of the workplan.

Feedback

US CDC – Chris Murrill

- It would be nice once the evaluation is complete that there is time spent to review those results and see how that can inform the development of the next work plan for 2024-2025 or make updates.

Country Engagement Updates (10 mins)

Update on engagement 2023-24

HDC Secretariat – Isabella Maina

- Based in Kenya. Recently joined the Secretariat as a consultant to support the scale up of HDC in the African region.
- Not new to the HDC – I was part of the steering group at inception back in 2016 and led Kenya as the pathfinding country then.
- Listed proposed target countries for engagement from now until 2025. This will also include any other countries who express interest.
- Have conducted a situation and analysis of each proposed country, including mapping investments in each region.
- Have started engaging with partners, academia and the countries themselves in region.
- In the African region, we have engaged Togo and Malawi. We are scaling up efforts in Botswana and Kenya.
- In the Asian region, we have started engaging Sri Lanka, Mongolia and others.
- We are creating demand by providing webinars about the HDC.
- Look forward to inputs from this team to scale up efforts, work together, and bring together partners and stakeholders for the benefit of countries.

HDC Secretariat – Pandula Siribaddana

- Based in Sri Lanka. Also recently joined to support the HDC in partner alignment and engagement with a focus on the Asian context.
- My background is in medicine and health informatics. I am engaged in the health systems in Sri Lanka and work with academia on health informatics and medical education.
- I have worked with the HISP team at the University of Oslo and health in the commonwealth region.
- Activities undertaken include identifying who and in what form partners are engaging from an HIS perspective (e.g., list of partners, types of contributions, level of engagement towards HIS needs, etc.), summarizing the current landscape for partner engagement against SCORE for countries in the Asian region, and developing an initial draft for a success matrix.

Questions/Feedback



Data and Digital Governance Working Group – Vikas Dwivedi

- In terms of the success matrix for HDC and the outcomes that have been proposed, confirm that we are saying that we will improve the outcomes (coordination and alignments, contextualization and capacity building) through advocacy, technical and finance resources? Is that correct?
- Keep in mind whether all these aspects are captured in the SCORE tool. There is no digital aspect captured in SCORE, or look at some other tool to capture the information.
- Regarding partner mapping, we should check whether there is in fact no USAID in Malawi. I was in Malawi a few weeks back, and there are ongoing investments made under USAID.

Community Data Working Group – Ana Scholl

- Agree with Vikas that there are significant investments in Malawi, including USAID and PEPFAR.
- Where is governance in this? The piece of integrating different working groups in technical areas that are interconnected is big task. I'm flagging this as it would be nice to have that fleshed out.

GAVI – Heidi Reynolds

- 3 thoughts:
 - I'm grateful for this as it is starting to fill gaps and operationalize the work at the country level and global level. It will be useful.
 - Socializing SCORE at some of the organizations would be useful, because it may not be the way we are organized for our investment. This might help with alignment at the country level.
 - Specific to GAVI, our investments are relatively minor compared to other donors in this area. It would have to be targeted towards immunization and information system strengthening. That means to ensure our investment are aligned to meet the larger HIS priorities in a country, that organization at the country level has to be in place so that when countries apply for grants, our resources can be targeted to fill in the gaps that align with our larger strategy. Continued ownership and alignment at the country level should flow into the immunization and health area programs.

PharmAccess – Maxwell Antwi

- I commend the team to attempt to put this together.
- Is it possible to map the investment from the local/domestic governments to give us a full picture?

In response

HDC Secretariat – Pandula Siribaddana

- The outcomes column is what the HDC is focused on through the theory of change. At the end of this, we should be able to see whether the defined outcomes of the HDC, in terms of country



engagement, has been met, what resources have been brought in, and what the focus is in a particular country.

- The outcomes outlined are a way for HDC to monitor progress.
- The partner mapping and review is an early version based on a desk review, so the next step is to share with partners to get the most up-to-date information in relation to country engagement.
- We have discussed governance and the matrix needs to be updated.

Isabella Maina

- We are working on tool to engage the countries and collection information on government investments. This will be used to update what Pandula has already. We will share this at subsequent meetings.

Working Group Updates (20 mins)

Review of workplans and deliverables

Update and next steps for RHIS investment case

HDC Secretariat – Carolina Futuro

- For information and discussion – we have noticed a loss in momentum from the lower attendance at these calls and in the way we are working towards the HDC goals.
- Formal recommendations for solutions to the challenges will be provided in September after the evaluation.

Feedback

LSHTM – Debra Jackson

- We will have to wait until the evaluation results come out, but I strongly object to renew every 6 months. At minimum, I think it would every 2 years. The working groups that I have been on is way longer than a 6-month process. I also don't think we want to do reviews every 6 months.
- Also, knowledge-brokering cannot be the only reason why a working group exists. I strongly object to this. If we are collaborative, we know what everyone is doing so we are not doing the same thing in 6 different places.
- Products emerge between donors and bilaterals because of HDC's working groups.
- Agree that we should have better plans and targets, but I object to the other 2 bulletin points.

Data and Digital Governance Working Group – Vikas Dwivedi

- Agree with Debra. The challenge with HDC and the working groups is that there are multiple organizations involved, so 6 months is not realistic, especially for a new group.



- I would challenge us to put in a financial indicator. E.g., number of proposed deliverables that were funded. Without funding, it is not possible to move things forward. Once we have this, we can look at timeframes and deliverables.

Communications and events (20 mins)

Update on Leadership event 2023

Discussion on plans for September SRG

HDC Secretariat – Carolina Futuro

- Background materials, report and recording from the event is available online.
- Leadership event next steps:
 - Supporting the health data governance framework, hopefully led by the Data and Digital Governance Working Group.
 - Country focus (what Isabella and Pandula are working on).
 - Advocacy and communications.
 - Capacity building for data governance and HIS.

HDC Secretariat – Mwenya Kasonde

- Planning for in-person SRG meeting in September.
- Hoping to host it in the African region, potentially Kenya as pathfinder country.
- Draft agenda to include results of the evaluation.
- Welcome your thoughts on this meeting in writing, such as meeting location, time and main objectives.

Feedback

Data and Digital Governance Working Group – Vikas Dwivedi

- Our working group discussed the leadership event and is looking for financial or technical support to help draft the framework and look for opportunities for feedback, validation and resources.

Next steps and AOB (20 mins)

No other business raised.