



# HEALTH DATA COLLABORATIVE

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## Health Data Collaborative News Update

October 2017

### 1. Update from technical working groups on Global Public Goods

Significant progress has been made across the TWGs on global public goods prioritized in the HDC [Operational Workplan 2016-2017](#). The Routine Health Information Systems Technical Working Group (TWG) presented an [update on progress](#) across the group's deliverables, including a Master Facility List Resource Package, harmonized data quality toolkit, and guides for analyzing facility data. Recognizing that some TWGs need to redefine priorities, while others are nearing completion of their workplans, it was agreed that the TWG leads should meet face to face to discuss the way forward. Objectives of the meeting would include reviewing progress, discussing emerging priorities and improving communication. The HDC Secretariat will organize a meeting of the TWG leads early next year.

### 2. Country updates

#### Kenya

Kenya's Ministry of Health is developing a **Kenya Health Observatory (KHO)** to improve the availability and use of health information. A prototype has been developed with support from partners including University of Nairobi, The Kenya Medical Research Institute (KEMRI), World Bank, UNICEF, CDC, Intellisoft, African Institute for Development Policy (AFIDEP), and WHO. The Kenya Health Observatory TWG will convene in Nairobi in November 2017 to further advance the work. The **CRVS TWG** has also made good progress in the implementation of planned activities. Currently, a study on mortality (the first mortality study in Kenya) is underway, supported by The Global Fund.

The Kenya HDC's M&E priorities and partner commitments focus on six areas: (i) building data analytics capacity; (ii) [a mid-term review of the Kenya Health Sector Strategic Plan](#); (iii) measurement of quality of care and performance improvement; (iv) operationalizing the Kenya Health Observatory; (v) improving civil registration and vital statistics; and (vi) capacity assessment of the rapid monitoring and evaluation system.

To reflect on the first year since the Kenya HDC launch in May 2016 and as part of a learning agenda to be shared with other countries, an **external evaluation of the HDC approach in Kenya** is planned for the beginning of 2018. This evaluation will also inform future implementation of activities, as well as guide other countries who wish to adopt the HDC approach. Please see attached draft concept note.

#### Tanzania

The Tanzania HDC launch in September 2017 resulted in the identification of six M&E priority areas: (i) addressing fragmentation of M&E and data systems; (ii) alignment of indicators and data collection processes; (iii) alignment of health facility assessments and surveys; (iv) joint and aligned investment in digital health information systems; (v) strengthening capacity for analysis and use of data; and (vi) improving dissemination and access to national health information.

At the launch, the Tanzania government and partners recognized the need for more coordinated and collaborative efforts of all stakeholders to unleash the full potential of its health information system as articulated in a [communiqué](#) issued at the meeting. At the launch, government and partners agreed to

collectively address the six M&E priority areas, and a **mapping of partners' investments** addressing these priorities is currently being finalized to prepare a common investment framework.

### Malawi

The Ministry of Health will host a **national multi-stakeholder HDC workshop**, led by the Chief of Health Services, on 28 November 2017 to validate a new HIS strategy and seek partner support and alignment of investments behind the M&E priorities. Invitations to HDC partners are being distributed (please see attached), and an agenda is being drafted. For more details, please contact Simon Ndira ([simon.ndira@giz.de](mailto:simon.ndira@giz.de)).

Malawi's Ministry of Health has adopted the HDC approach to address the following five M&E priorities: (i) develop the M&E component of HSSP II; (ii) develop a Common Investment Framework; (iii) strengthen institutional HIS/M&E capacities; (iv) reconfigure and expand DHIS2 functionalities; and (v) increase accountability of the Ministry of Health and health development partners by expanding the access of citizens, civil society organizations and other actors to high-quality health data.

## 3. Next wave of pathfinder countries

Currently, HDC work is focused on three pathfinder countries: Malawi, Kenya and Tanzania. To expand into additional countries, several factors need to be considered, including country demand, strong leadership, existence of multiple investments from multiple partners and a strong data culture. In order to improve awareness and understanding of the HDC approach by countries, it was agreed that a standard communication package should be developed. This can then be used by partners to distribute to country offices.

## 4. Updated governance paper

The HDC Management and Governance draft document has been reviewed by the HDC Co-Chairs and shared with the Steering Group for input.

## 5. Calendar of upcoming activities

28 November	Malawi HDC high-level forum / launch of HIS strategy (Lilongwe, Malawi)
13-17 November	Fourth Global Forum on Human Resources for Health (Dublin, Ireland)
November/December (date tbc)	HDC Technical Working Groups leads meeting (location tbc)
7-8 December	HDC Digital Health & Interoperability Working Group meeting (Washington, DC)
11 December	HDC Disease Surveillance WG meeting (Geneva, Switzerland)
13-14 December	Universal Health Coverage Forum 2017 (Tokyo, Japan)
January 2018	Kenya review of HDC approach (Nairobi, Kenya)
21-23 March	GPSDD Data for Development Festival (Bristol, UK)



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