

SEA-HSD-314
Distribution: General

Utilization of Health Information for Decision-Making

*Report of the Regional Consultation
Colombo, Sri Lanka, 16–18 June 2008*



**World Health
Organization**

Regional Office for South-East Asia

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Contents

	Page
1. Introduction	1
2. Inaugural session	1
3. Session I.....	2
3.1 Regional situation on utilization of health information for decision-making.....	2
3.2 Working paper presentation.....	3
4. Session II.....	5
4.1 Presentation of groups	5
5. Session III.....	5
5.1 Achieving health-related MDGs in the current situation in South-East Asia Region.....	5
5.2 Group work.....	6
5.3 Presentation of Group work	6
6. Session IV.....	6
6.1 Summary of action points and recommendations.....	6

Annexes

1. List of participants	9
2. Inaugural address by Regional Director, WHO South-East Asia Region	13
3. Provisional agenda	16
4. Programme	17
5. List of background papers and documents.....	21

1. Introduction

The Regional Consultation on Utilization of Health Information for Decision- Making was held in Colombo, Sri Lanka, on 16–18 June 2008. The overall objective of the consultation was to strengthening the capacity of countries for transforming data and statistics into viable health information for decision-makers. The specific objectives of the workshop were:

- (1) To review the availability and quality of data and its use in decision- making;
- (2) to promote harmonization of available data from varied sources; and
- (3) to demonstrate how data can be utilized by decision-makers.

The expected outcomes of the consultation were as follows:

- (1) Country action plans and recommendations for timely availability of quality data for decision-making;
- (2) processes of strengthening harmonization of available data from varied sources; and
- (3) recommendations on how to increase application of ICT for information generation; marketing of HIS product and utilization of information at decentralized system and at all levels; and increased use of research- based evidence on utilization.

Fifty participants (including the observers and the secretariat) from all Member countries of the World Health Organization's (WHO) South-East Asia (SEA) Region except from Myanmar, and from the Regional office and offices of the WHO Representatives to countries attended the consultation (*see list of participants in Annex 1*).

2. Inaugural session

Dr Samlee Plianbangchang, WHO Regional Director for the South-East Asia Region, in his inaugural address that was delivered by Dr Agostino Borra, WHO Representative to Sri Lanka, highlighted the various activities undertaken by WHO to strengthen the health information systems (HIS) of

Member countries since 2001. He emphasized the 10 strategic areas of strengthening of health information systems and informed that the consultation will discuss five of these areas which will help lead to better utilization of health information for decision-making. The Regional Director outlined the importance of health information systems and the role of the managers in providing timely, available, reliable, good quality and comprehensive data and information for decision-making. Despite significant achievements made in building national health information systems, some issues and challenges related to the use of health information for policy debate, decision-making and appropriate use of tools for transforming data into information need to be addressed, he said.

Information is the crux of overall building blocks of health systems strengthening and availability of information will enable health managers to utilize the same for better policy-making, planning, implementation, and monitoring and evaluation of health programmes. He re-emphasized regional strategies which advocate appropriate application of information and communication technology; strengthening of data-sharing, analysis and utilization at all levels; bolstering data collection and unitization in a decentralized system as well as supported by research evidence; and adequate marketing of HIS products. He also stressed on the harmonization information of different stakeholders at the national and sub-national levels and to avoid duplication of information. Timely availability of good quality information doesn't necessarily lead to good decisions, however, a culture and practice of evidence-based decision-making is what is required the most at all levels. Dr Samlee concluded by saying that the consultation is very timely as there was a wide-spread demand for such consultation to build consensus among Member countries on the utilization on information on public health management. (See Annex 2 for full text of address).

3. Session I

3.1 Regional situation on utilization of health information for decision-making

Dr Sunil Senanayake, Regional Adviser, Health Situation and Trend Assessment, (WHO/SEARO) briefly outlined the regional situation on the Strategic Area 4 (appropriate application of ICT); Strategic Area 7 (Strengthening of data sharing, analysis and utilization at all levels); Strategic

Area 8 (Strengthening of data collection and utilization in decentralized systems); Strategic Area 9 (Effective marketing of HIS products); and Strategic Area 10 (Strengthening the linkage between the national health information system and the national health research system). He presented the current situation in all Member states in different strategic areas and highlighted the areas which need to be sustained and further strengthening in order to utilize health information effectively for decision-making. *(Presentation available in attached CD).*

3.2 Working paper presentation

Strategic area 7 (Strengthening of data-sharing, analysis and utilization at all levels)

Dr Sarath M. Samarage presented the working paper on Sri Lanka's experience with Strategic Area 7. He presented existing sub-systems of health information; algorithm of transmission of information within and outside the health services; various examples of hospital information systems; various websites of health information sources of various departments and units of the MoH; and other databases. He pointed out that most of the information systems are paper-based; information systems of various vertical programmes are not integrated; flow of information is mostly in the upward direction; and the very limited feedback system. Finally, he highlighted the need for clear policy framework on information systems; need of comprehensive support of ICT; need to increase the sharing between public and private sectors and the need for an increase of trained human resources, *(Presentation available in attached CD).*

Strategic Area 8 (Strengthening of data collection and utilization in decentralized systems)

Dr Suartini Bambang presented the Indonesian experience on the above strategy. She briefly explained the decentralized set-up of the country and provided the snapshot of how the decentralized system is working. She presented the algorithm on district health information; hospital information system and health centre information system as well as the integrated existing reporting and recording system of various information sources. She highlighted the HIS constraints on data collection; inadequate human resource capacity; inadequate baseline information on population; inability

of HIS to respond to increasing demand; and lack of any control or authority over financing or budgeting of the programme. She suggested enhancing the monitoring and evaluation of HIS by focusing on essential districts, reviewing management practice, advocating to decision-makers and use of agreed indicators at all levels, (*Presentation available in attached CD*).

Strategic Area 9 (Effective marketing of HIS products)

Dr Supakit Sirilak presented Thailand's experience on the above strategy. He briefly described the various types of HIS products. They have five different types of publications, namely *Annual Public Health Statistics*, *Annual Health Resources Report*, *Annual Surveillance Report*, *Thailand Health Profile* and *Thai Health Report*. He explained about the coverage given to each health topic, their reliability/relevance, accessibility levels and marketing of the product. He pointed out the various limitations of the use of HIS products. He highlighted few strategies that can increase utilization of HIS products such as assessing existing HIS products, and their demands; increasing analyzing capacities of technical people; improving communication and dissemination according to various users; and finally the need of improvement for interpretation and utilization, (*Presentation available in attached CD*).

Strategic Area 10 (Strengthening linkage between the national health information system and the national health research system)

Dr Mahesh Kumar Maskey presented the Nepal's experience on above strategy. He briefly described about the background and formation of National Health Information System (NHIS) and the National Health Research Council (NHRC). He highlighted the linkages between NHIS and NHRC and explained how the NHRC is supporting or can support NHIS. He cited few examples of research findings which are directly related on health policy and can be utilized for decision-makings. He described the strengths and the weaknesses of the generating research based evidence for policy/decision makers for utilization. He cited few strategies which can be implemented on sustaining those strengths as well as addressing weaknesses. (*Presentation available in attached CD*)

4. Session II

This session was dedicated to the group work on five different strategic areas of regional strategies. The guideline for the group work was presented by Dr Sunil Senanayake and also provided in hard copy format to all participants. The group was randomly divided into four groups, namely: a) Group 1 – Issues related to data sharing, analysis and utilization at all levels; b) Group 2 – Issues on strengthening of data collection and utilization in decentralized systems; c) Group 3 – Issues on appropriate application of information and communication technology; and d) Group 4 – Issues on effective marketing of HIS products and strengthening linkage between the national health information system and the national health research system. Groups were facilitated by *Dr Mahesh K. Maskey, Dr Soewarto Kosen, Dr Y. C. Chong, Dr Nihal Singh, Dr Nirmal Kandel, Mr Sunil Nandaraj and Dr R. Keshavan.*

4.1 Presentation of groups

Each group presented the identified issues of the strategic areas according to the guidelines provided to them. The Groups 1, 2, 3 and 4 presented the problems identified and their possible solutions and recommendations for countries and WHO, (*Presentation available in attached CD*)., The action points and recommendations identified by all groups were summarized and presented at the end of the meeting.

5. Session III

5.1 Achieving health-related MDGs in the current situation in South-East Asia Region

Dr Sunil Senanayake his presentation by highlighting some of the health-related revised targets. He described the Regional Office's contribution towards health-related achieving MDGs at the regional and national levels. He briefly discussed the status of MDG reports of the Member states and enunciated a synopsis of the regional situation, according to which some countries are likely to achieve MDGs whereas some need further acceleration and strengthening of intervention and monitoring. He emphasized the importance of disaggregated data to implement or

introduce focus intervention for strategic planning and monitoring of progress and stressed on building more partnerships and mobilization of resources, (*Presentation available in attached CD*).

5.2 Group work

This session was dedicated to the group work on four different strategic areas of regional strategies. The guideline for the group work was presented by Dr Sunil Senanayake and also provided in hard-copy format to all participants. The work was randomly divided amongst four groups, namely: a) Group 1 – Measuring MDG progress, data sources and quality; b) Group 2 – Measuring MDG progress and data presentation and reporting periodicity; c) Group 3 – Measuring MDG progress and coordinating mechanisms within MoH and between ministries; and d) Group 4 – Measuring MDG progress and coordination between donors, external partners and private sectors. Groups were facilitated by *Dr Mahesh K. Maskey, Dr Soewarto Kosen, Dr Y.C. Chong, Dr Nihal Singh, Dr Nirmal Kandel, Mr Sunil Nandraj and Dr R. Keshavan*.

5.3 Presentation of Group work

Each group presented their assigned work according to the guidelines provided to them. The Groups 1, 2, 3 and 4 presented the identified possible issues, problems/constraints and their possible solution or recommendations. They also presented the role of countries and WHO on recommended solution for future country action plans and requested WHO for technical support in the respective areas. The action points and recommendations identified by all groups were summarized and presented at the end of the meeting.

6. Session IV

6.1 Summary of action points and recommendations

Dr Sunil Senanayake, *with the support of the WHO secretariat* presented the summary of action points and recommendations for countries and WHO for future action.

Action Points

For Member countries

- Based on country health development policies and the 10-point Regional Strategy for Strengthening Health Information Systems, develop country-specific strategies and action plans and its implementation for strengthening country HIS.
- Provide technical and logistics support to districts/provinces by the central ministries of health.
- Develop linkages and liaison between the health information system and research institutions and promote data/information sharing.
- Generate and present information for policy-makers in a regular and sustainable manner and market HIS products adjusted to the needs of policy-makers and other stakeholders.
- Sensitize health personnel and facilitate the use of modern information communication technology (ICT) for health information utilization converting inefficient manual systems to modern electronic systems.
- Strengthen online disease surveillance systems for instantaneous availability of information for prompt action/decision.
- Follow-up of recommendations of previous meetings/workshops/consultations such as the Regional Consultation on Mortality Statistics, April 2007; Regional Workshop on ICD-10, September 2007; and Regional Workshop on Health Statistics, September 2007.

Recommendations

For Member countries

- Allocate adequate resources, including human resources, required for HIS development in countries.
- Report progress of achieving MDGs annually and identify areas/population subgroups requiring special focus interventions by analyzing and presenting MDG indicators by age groups, sex, urban/rural, districts and other social determinant variables.

- Conduct periodic surveys on a regular basis to generate information (which is not available from routine data collection) required to monitor the progress of achieving MDGs.
- Improve and strengthen vital registration systems to provide better information on births and cause of deaths in countries.
- Implement simplified tools of Health System Performance Assessment in countries.

For WHO

- Develop a generic “Minimum Data Set” and share the same among Member countries.
- Assist Member countries to develop country capacity in data analysis, presentation, utilization and promoting a culture of evidence-based decision- making.
- Develop and maintain a website at the Regional Office to share best practices of utilization of health information for decision-making between Member countries.
- Assist Member States on promoting and facilitating use of ICD-10.
- Develop and provide simplified HSPA tools (as per the regional context/requirements) for Member countries to implement performance assessment of health systems at all levels.
- Set up a Regional Task Force on Health Information Management and Monitoring of Health-Related MDGs.

Annex 1

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Annex 2

Inaugural address by Regional Director, WHO South-East Asia Region (Read by WHO Representative – WHO Sri Lanka)

Distinguished participants, ladies and gentlemen,

At the very outset, I would like to extend a warm welcome to you all for attending the Regional Consultation on Utilization of Health Information for Decision-making.

You may recall that for the last several years, starting with 2001, WHO together with Member countries of the South-East Asia (SEA) Region has undertaken activities to strengthen the countries' health information systems or HIS. The need to have a good HIS became a priority because of the mandatory task of monitoring the health-related Millennium Development Goals or the MDGs. It was against this background that an Intercountry Consultative Meeting on Strengthening HIS was held in our Region in 2005. The meeting produced the regional strategy for strengthening health information systems. The regional strategy contains ten strategic areas of which five will be thoroughly discussed at this consultation. I am sure that discussions in this regard will lead to better utilization of health information for decision-making.

We all are aware that public health decision-making relies heavily on timely availability, reliability, good quality and comprehensiveness of data and information. The role of health information systems and the duty of health information managers is to collect, analyse and disseminate information comprising the above-mentioned qualities at the right time. As they say, "Making decisions without good information is like painting in the dark."

Although we have achieved progress in building national health information systems, there are some issues and challenges that a majority of countries in the SEA Region still face. I will give you few examples. Some countries have not been able to use health-related data effectively for policy debate and decision-making; appropriate tools for transforming data into information for decision-making are not always applied properly; disaggregated data are often not available in the form

required, by programme managers for day-to-day decision-making; and the countries' capacity in human and other resources is limited.

Ladies and gentlemen, today, health problems are much more complex than before. Many development partners have identified human development as being at the centre of all other developments. As such, investment in health is the key to development. Therefore, many development partners are nowadays working in the field of health with many different objectives. Even though global initiatives on health are increasing, unfortunately many partners sometimes require different information than what we already have.

The importance of a good health information system is depicted in the most recent WHO framework for strengthening health systems to improve health outcomes. The framework has six building blocks, namely (i) Service delivery; (ii) Health workforce; (iii) Information; (iv) Medical products, vaccines and technologies; (v) Financing; and (vi) Leadership and governance.

In fact, good-quality information is needed by the six building blocks of the health system to enable a health manager to properly utilize it for policy-making, planning, implementation, monitoring and evaluation of health programmes.

Ladies and gentlemen, we have an uphill task ahead of us. On the one hand, there is an increasing demand for a new range of health information to be dealt with immediately. On the other hand, there is the need to strengthen health systems to cater to the new demand for information. How can we overcome this challenge? Well, the regional strategy provides many answers to deal with this challenge.

We can start with appropriate application of information and communication technology. Thereafter we can strengthen data-sharing, analysis and utilization at all levels. Finally, we can strengthen data collection and utilization within a decentralized system.

There is limited harmonization of stakeholders at national and sub-national levels in data collection, analysis and presentation. This has generated inadequate, poor-quality and incomplete information. Very often different programmes of the same organization (or of the Ministry of Health) collect almost identical information from institutions thereby causing greater workloads at the data collection end. Such duplication also results in wasting of resources. Therefore, instead of running parallel health information systems, the parties concerned should gainfully utilize a harmonized information system.

We need to admit that availability of good-quality information does not necessarily lead to good decisions. What is actually needed are an “evidence-based decision-making culture and practice”. For this to happen, the health information system must be able to transform information into valid evidence. This is not an easy task. A massive capacity building effort is needed, supported by sound research.

I am happy to note that this regional consultation will look into important inputs that are needed to make evidence-based decisions, namely availability and quality of data, harmonization of data from various sources and a demonstration of how data can be utilized by decision-makers.

Ladies and gentlemen, the last two sessions of the Regional Committee for South-East Asia, as well as many other meetings held in the Region recently, highlighted the need for a regional consultation to build consensus among Member countries on utilization of information for public health management. In this context, I must say that the present consultation is very timely. It is important to use the same indicators, same data definitions and similar sources of information across the Region for better coordination and comparison, and for monitoring health outcomes.

In conclusion, I wish you all success in your deliberations and a very pleasant stay in Colombo.

Thank you.

Annex 3

Provisional agenda

- Review of regional situation of “utilization of health information for decision-making” and discussions.
- Country experience on each of the following Strategic Area of the 10-point Point Regional Strategy for Strengthening Health Information Systems in the South- East Asia Region:
 - Strategic Area – 4: Appropriate application of information and communication technology.
 - Strategic Area – 7: Strengthening of data-sharing, analysis and utilization at all levels.
 - Strategic Area – 8: Strengthening of data collection and utilization in decentralized system.
 - Strategic Area – 9: Effective marketing of HIS products
 - Strategic Area – 10: Strengthening linkages between the national health information system and the national health research system.
- Group work, followed by plenary, discussions and recommendations of the consultation on the above five Strategic Areas.
- Review of “progress of achieving health-related MDGs in the Region” and discussions.
- Group work, followed by plenary, discussions and recommendations of the consultation on SEA Region progress monitoring mechanism.

Annex 4

Programme

Day 1: Monday 16 June 2008

08:00 – 08:30 **Registration**

08:30 – 09:45 **Opening session**

- Welcome Address by Deputy Director General – Planning, Management Development and Planning Unit, MoH, Sri Lanka
- Address of Secretary, Health/Director-General, HS, Sri Lanka
- Regional Director’s Message and address by WR Sri Lanka
- Address of the Chief Guest (Hon. Minister of Health, Sri Lanka)
- Vote of thanks – Dr S. Puri, Focal Point of WCO, Sri Lanka
- End of opening ceremony
- Introduction of participants by RA – HST
- Confirmation of the agenda and the programme
- Announcements and Group Photograph

10:00 – 16:45 **Session 1: Country situation on “Utilization of health information for decision-making” – strengths, weaknesses, issues and constraints (Moderator: Ag. Director, HSD)**

10:00 – 10:20 Over-view of Regional situation on five strategic areas of consultation **RA-HST/SEARO**

10:20 – 11:00 Discussion on the presentation

TOPIC Strengthening of data-*sharing, analysis and utilization* at all levels:

11:00 – 11:10 Sri Lanka experience: **Dr Sarath Samarage**

11:10 – 12:30 Discussion

TOPIC Strengthening of data *collection and utilization in decentralized* system:

13:30 – 13:40 Indonesia experience: **Dr Suartini Bambang**

13:40 – 14:30 Discussions

TOPIC Use of appropriate application of *information and communication technology* (ICT):

14:30 – 14:40 Bangladesh experience: **Ms Nasrin Sultana**

14:40 – 15:30 Discussions

TOPIC Strengthening linkage between *national health information system and national health research system*:

15:45 – 15:55 Nepal experience: **Dr M Maskey**

15:55 – 16:45 Discussions

Day 2: Tuesday 17 June 2008

08:30–09:30 **Session 1 continued:**

TOPIC Effective *marketing of HIS products*;

08:30 – 08:40 Thailand experience: **Dr Supakit Sirilak**

08:40 – 09:30 Discussions

09:30 – 17:00 **Session 2: Group work and plenary
(Moderator: Ag. Director, HSD)**

- 09:30 – 09:45 Introduction to Group work – **RA, HST**
1. Group 1 – Issues related to data sharing, analysis and utilization
 2. Group 2 - Issues related data collection and utilization in decentralized systems
 3. Group 3 – Issues related to application of ICT
 4. Group 4 – Issues related to utilization of information from national health research system and marketing of HIS products
- 09:45 – 10:30 Group work
- 10:45 – 12:30 Group work (continued)
Presentation of Group work and finalized recommendations for action
- 13:30 – 14:30 Presentation – Group 1
- 14:30 – 15:30 Presentation – Group 2
- 15:45 – 16:45 Presentation – Group 3
- 16:45 – 17:45 Presentation – Group 4

Day 3: Wednesday 18 June 2008

- 08.30 – 15:15 **Session 3: Monitoring the progress of achieving health-related MDGs (Moderator: Ag. Director, HSD)**
- 08:30 – 09:15 Presentation “Achieving Health MDGs in SEA Region current situation” – **RA/HST**
- 09:15 – 09:45 Discussions
- 09:45 – 10:00 Introduction to group work on health-related MDGs

- 10:00 – 12:30 Group work on HMDGs
- Four groups will work on four aspects of MDG reporting
 1. Data sources and quality
 2. Data presentation and reporting periodicity
 3. Coordinating mechanism within MoH and between ministries;
 4. Coordination between donors, external partners and private sector
- 13:15 – 13:45 Presentation 1 and discussions
- 13:45 – 14:15 Presentation 2 and discussions
- 14:15 – 14:45 Presentation 3 and discussions
- 14:45 – 15:15 Presentation 4 and discussions
- 15:30 – 17:30 **Session 4: Recommendations and Conclusions**
(Moderator: Ag. Director, HSD)
- 15:30 – 17:00 Meeting recommendations and conclusions
- 17:00 – 17:30 Closing

Annex 5

List of background papers and documents

Country experiences

- (1) **Myanmar and Sri Lanka experience:** Strengthening of data-sharing, analysis and utilization.
- (2) **Indonesia experience:** Strengthening of data collection and utilization in decentralized health system.
- (3) **Bangladesh experience:** Use of appropriate application of Information and communication technology.
- (4) **Nepal experience:** Strengthening linkage between national health information system and national health research system.
- (5) **Thailand experience:** Effective marketing of HIS products.

Background papers

- (1) Data Management for Evidence-Based Decision-Making: Report of an Inter-country Workshop, 3-7 December 2001
- (2) Regional Workshop on Health Statistics Reporting: Report of an Inter-country Workshop, 25-27 September 2007
- (3) 10-point Regional Strategy for Strengthening Health Information Systems, 2006
- (4) 11 health questions about the 11 SEAR countries
- (5) Health Statistics 1-4
- (6) "Who Counts "- Lancet publication, 2007

The WHO Regional Office for South-East Asia developed a 10-point Regional Strategy for Strengthening Health Information Systems in Member Countries in 2006. WHO SEARO has since conducted three intercountry workshops to assist countries to streamline their national health information systems in accordance with regional strategies. The regional consultation on mortality statistics conducted in April 2007 focused on vital registration, and the Regional Workshop of Trainers on the International Classification of Disease (ICD) in September 2007 on the use of ICD-10 in morbidity and mortality coding in the Region. The third workshop conducted in September 2007 addressed the issues of health statistics reporting. This Regional Consultation on Utilization of Health Information for Decision-Making held at Colombo, Sri Lanka, from 16-18 June 2008 discussed five of the 10 strategies in relation to utilization of information for decision-making and has made recommendations for Member countries as well as for the Regional Office.



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