

# Africa Regional Workshop on Improving Routine Data for Child Health in National Health Information Systems

Summary 1<sup>st</sup> day

Johannesburg South Africa

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# Great country examples

- Score cards
- Dashboards
- Data for decision making

# Key points from questions

- Data quality
- Data security
- Use of data for quality assurance
- Denominators
- Reporting burden
- Involvement of health worker staff in developing indicators

# Child health programming in the SDG era

- Start the SDG era with a defined but unfinished agenda
- Emerging priorities (injuries, congenital anomalies, NCDs)
- Approach is now: Universal, Life course, Equity, Multi-sectoral approach
  - Child health program links with other sectors: education, agriculture etc
- Identify issues of inefficiencies in the health sector: coverage increased but mortality did not decrease
- Countries need to focus on their change in epidemiology.

# Issues

- **Reporting burden on health workers:** balancing the need for data and health workers ability to provide clinical services (need for data managers at lower levels was mentioned as an approach)
- **Human resource issues** (some linked to above), but also linked to training and supporting health workers on data capture,
- **Data quality** (this will be addressed more today)
- Balancing the need for harmonization and standardization and guidelines with need for more data
- **Denominators** – different questions for different indicators/scenarios
- **Harmonization** – Several of the global tracking indicators could be collected through routine systems – more work on harmonization is needed

# Work in progress

- RMNCH score cards – effective way to promote high level of accountability – promotes healthy spirit of cooperation
  - Need more guidance in terms of interpretation and implementation, next steps.
  - Uganda/Ethiopia good examples but more work is needed.
- Health data collaborative
  - Creating traction in countries in terms of indicators prioritization, M&E/HIS frameworks, DHIS2 reconfiguration, HIS policy, SoP (eg. Malawi, others)

# Work in progress

- Guidelines for nutrition indicators from HIS - developed by UNICEF
- Quality of care: indicators are not harmonized, outdated guidance
- Training package for analysis HMIS – developed by WHO/HDC
- RMNCAH HMIS module under development - need your inputs
- Need for child health expert group to harmonize indicators and provide tools and guidance for data collection and analysis