

# Pacific Health Information Network

## Strengthening Health Information Systems and Digital Health

### TECHNICAL DOCUMENT: 3.1 Health Islands Monitoring Framework 3<sup>rd</sup> Progress Report

#### 1. BACKGROUND

At 11<sup>th</sup> Pacific Health Ministers Meeting (PHMM) in 2015, Pacific health leaders agreed that a governance framework is necessary to ensure each Pacific Island countries and areas (PICs) are progressing towards the Healthy Islands vision. As such, the Healthy Islands Monitoring Framework (HIMF) was established and all PICs committed to biennial progress review to leverage the PHMM mechanism.

Tasked as joint secretariats of the HIMF, World Health Organization (WHO) and the Pacific Community (SPC) have collaborated with PICs to conduct two HIMF progress reports, [the first in 2017](#) and the [second in 2019](#). The reports concluded that improvements in healthcare resources, non-communicable disease (NCD) control, and maternal and child health, but were variable across the Pacific. Implementation of the HIMF to monitor progress was also a challenge due to limitations in existing health information systems and workforces in PICs, resulting in inconclusive evidence and information gaps.

Preparation of the third HIMF progress report was interrupted by the COVID-19 pandemic and resumed in Q3 2022. A brief update was presented at the 14<sup>th</sup> Pacific Heads of Health meeting in 2022 and the full report will be tabled at the 15<sup>th</sup> Pacific Heads of Health meeting in 2023. Ahead of this, we present here the key findings from the latest progress review for discussion with health information focal points in order to generate recommendations and action steps to strengthen implementation and use of HIMF.

#### 2. ACTION TAKEN

##### Methodology

In October 2022, a Pacific Health Information Network (PHIN) webinar was conducted to socialize the development of the 3<sup>rd</sup> HIMF progress report and the introduce the data collection and validation process with PHIN representatives. For each PIC, a compiled

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dataset was shared for data validation and there was an option to report updated data for 13 indicators selected based on data availability. Consultations were conducted with select PICs based on availability and technical support requested. 19 of 22 PICs responded and no focal HIMF points were identified in two PICs.

### **Key Findings**

Since establishment of the HIMF, each PIC has made progress toward the Healthy Islands vision. Based on data available, however, the pace, breadth and magnitude of progress differed widely across the Pacific.

In general, people across the Pacific are expected to live longer but may not be living longer with good health. Preventable deaths from injuries and among vulnerable populations have remain consistently low or reduced over time in most PICs. Pacific governments continued to demonstrate commitment to combat NCDs by endorsing NCD prevention and management polices, but progress has been stagnant and their impact on population health is inconclusive due to limited data on NCD outcomes as defined in HIMF. Consistently high coverage of essential healthcare services during the first year of life has been reported across the Pacific, except in a select few where access remains poor. To ensure children reaches adolescence in optimal growth and health, increased effort may be required to address elevated percentages of malnutrition, such as stunting and obesity, in select PICs.

Healthcare resources, both financial and human resources, had slow improvement over time and remained suboptimal for most PICs. Emergency preparedness remains a persistent challenge and PICs may not be ready for the next natural disaster. Inequitable access to safely managed drinking water or sanitation services and in the use of clean fuel persisted across the Pacific; with universal or near universal access in most PICs but low access with limited improvement over time in a select few. Despite heightened vulnerability to climate change, most PICs could not report country data for indicators under “Ecological balance is promoted” and there is limited evidence on how PICs progressed in this area.

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### Challenges

Over the course of developing this 3<sup>rd</sup> progress review, common challenges across PICs in generating, reporting and validating HIMF data emerged. First, instances where no data is reported for this progress review does not necessarily mean the PIC does not routinely monitor the indicator. For example, a PIC may prefer to exclude data points that are not nationally representative (e.g. data based on hospital records only) for regional monitoring activities such as HIMF but use such data from routine monitoring at the national level. Also, there may be minor differences in the indicator definitions or reporting standards (e.g. age range, sex-specific) between a PIC's national monitoring framework and HIMF, resulting in data being excluded in this report. Some PICs also reported to no longer routinely monitoring some HIMF indicators as they are not relevant for national programme planning, such as access to safely managed water and sanitation services or use of clean fuel in high-income PICs.

Another main challenge was the lack of adequate health information workforce. This may be the lack of HIMF focal point to coordinate the reporting process, the lack of HIS staff to conduct routine data collection and entry, or the lack of technical capacity to calculate indicators as defined in the framework. These factors contributed to poor data quality and significant delays in reporting. Through country consultations, there was an apparent need to clarify indicators requiring complex calculations, such as rates or age-standardization, and select indicators definitions. Some PICs also did not have the appropriate population size or projection, particularly age-disaggregated population size, to calculate the indicators as defined in HIMF.

### 3. CONCLUSIONS

While each PIC have made progress towards the Healthy Islands vision, the pace and area of improvement varied vastly across the Pacific. Inequitable access to basic healthcare services and safely management drinking water and sanitation services persisted, with universal or near universal access in most PICs and low access in a select few. Governments have responded to the growing NCD challenge by endorsing NCD prevention and management policies, but

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progress has stagnated and their health impact is unclear due to data limitations. Similarly, progress on attaining ecological balance cannot be drawn due to limited data.

Based on lessons learnt from this progress review and feedback by PICs, we propose to collaborate with each PIC to improve HIMF monitoring and data use. While the current focus is on HIMF, these HIS strengthening initiatives will be linked with broader HIS development goals for each PIC. In the immediate-term, we propose to conduct the following to improve the next round of HIMF review and to strengthen in-country capacity:

- 1. Develop intuitive and easy-to-use guidance material, such as data dictionary and indicator calculators.**
- 2. Establish a structured process for next HIMF review, tailored to country context, to enable countries to better coordinate data collection across multiple sources.**
- 3. Conduct hands-on capacity building activities related to indicator calculation, including population projections.**
- 4. Synthesize a list of recommended revisions to HIMF indicators, including changes in indicator definition and replacement of indicators based on modification in global reporting standards, advancement in programme areas and/or data reporting capacity in PICs.**
- 5. Develop a digital data collection tool, with embedded data validation and visualization capabilities to improve data quality.**