WEBINAR
Data Use in COVID-19 Response: Experiences from Bangladesh, Ghana, Kenya, and Philippines

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Session Moderator: Dr. Kamaliah Noh

Senior fellow at Results for Development with over 25 years' experience working at various levels of the public primary health care delivery system, at the district implementation level, the state policy level as well as heading the primary health care section of the Ministry of Health, Malaysia.
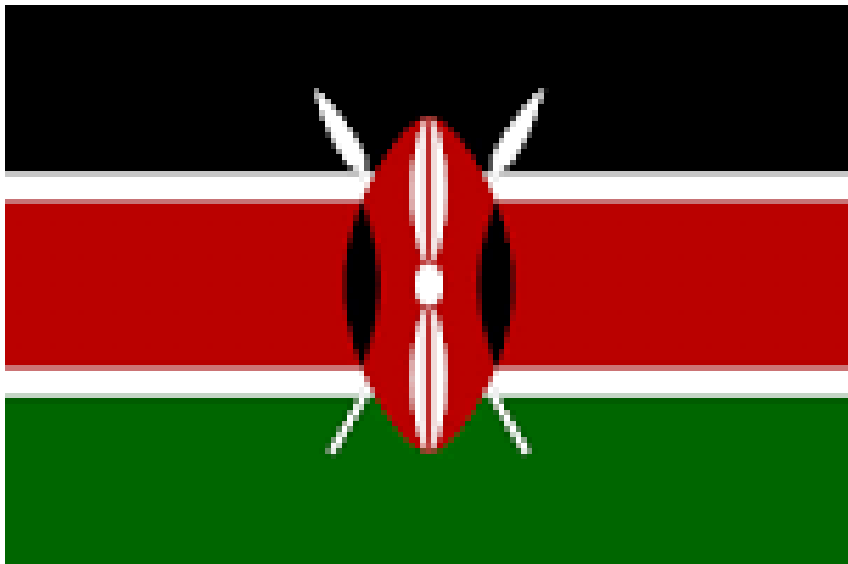
Session Panelists

Bangladesh

Dr. Shahadt Hossain Mahmud
Director General,
Health Economics Unit,
Ministry of Health and Family Welfare

Ghana

Dr. Anthony Ofosu
Deputy Director-General,
Ghana Health Service (GHS)

Kenya

Dr. Isabella Maina
Head of Healthcare Financing,
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Philippines

Dr. Mel Santillan
Medical Officer,
Philippine Health Insurance Corporation

Participants Feedback

Highlights of Panel Discussions

Bangladesh

Population: 163 million

First confirmed case: 8th March 2020

Confirmed cases: 553,000 (*as of 11th March 2021*)

- Shared data through various committees to ensure information is received by the appropriate decision makers
- Multisectoral forums were used to engage stakeholders and obtain feedback
- Used data to define criteria to zone cities and target different levels of restrictions and safety precautions by level of infections
- **Key lesson:** Use data to create a targeted response suitable to the local context
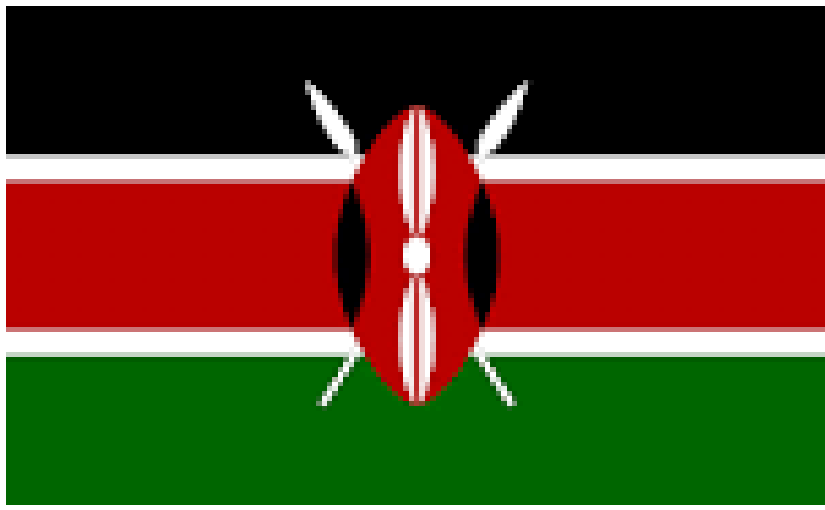
Ghana

Population: 30.42 million

First confirmed case: 12th March 2020

Confirmed cases: 86,737 (as of 11th March 2021)

- Data used to track the 6 objectives for the pandemic response
- Consolidated systems and deployed applications for contact tracing and case management
- Reviewed the regulatory environment to allow integration and interoperability
- Dashboards were used to coordinate data collection among different agencies under the leadership of MOH
- **Key lesson:** Utilize existing systems and build on capacity for improving its deployment.

Kenya

Population: 52.57 million

First confirmed case: 12th March 2020

Confirmed cases: 110,000 (as of 11th March 2021)

- Evaluated impact of COVID-19 on essential health services using routine data systems and developed strategies to ensure affected services are sustained

- Consolidated all data sources into a single platform for COVID-19 data analysis and dissemination to the public

- Worked with all stakeholders for consultation, co-operation and consensus building in coordinating COVID-19 response

- **Key lesson:** Strengthen and utilize routine data systems whilst encouraging more innovations

Accelerator

Philippines

Population: 108.1 million

First confirmed case: January 30th, 2021

Confirmed cases: 603,000 (*as of 11th March 2021*)

- Utilized existing data systems/sources for the design and costing of COVID-19 benefit packages

- Cost data was gathered from accredited and licensed facilities across the country

- Used DOH data to estimate projected expenses for COVID-19 payment

- **Key lesson:** Sharing COVID-19-related data among government agencies through existing data sharing systems.

Participants Feedback

Beyond COVID-19, how can process improvements and investments for strengthening data demand and use be applied across the health system?

Mentimeter

Inclusion of the private service delivery sector to allow for a whole of system response.

health insurance system data

comprehensive data capture including the private sector and improved data will be key
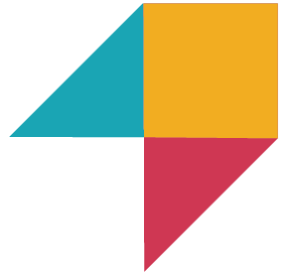
Ensuring that data is used to support strong governance.

Multisectoral involvement including private sector data & community data with good governance as well as stewardship.

evidence based analysis to policy improvements

Need for strong government stewardship.

predictive analysis from covid 19 data

We can generate digital platform for improvements and strengthening the data demand.

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Thank you and Goodbye