

Summary of the Conference on Measuring and Achieving Universal Health Coverage with ICT in Asia Pacific: Making a business case for strategic ICT Investments for quality health care for all

2–3 December 2014, ADB, Manila, Philippines

1. The conference was co-organized by the ADB, the World Health Organization (WHO), and the Asia eHealth Information Network (AeHIN). This Conference and the AeHIN 3rd General Meeting built on the September 2013 [Information Technology for UHC Conference \(IT4UHC\)](#), which spurred interest in ICT-enabled change in health services to achieve UHC goal (<http://bit.ly/uhcict>).

2. The Conference engaged government officials from multiple sectors (health, finance, planning, statistics, ICT), development partners and experts to share experiences and review the current evidence on cost-benefit and impact of various ICT-enabled health services and information systems. Approximately 290 participants from more than 25 countries (including 4 countries from Africa sponsored by the Joint Learning Network for UHC's IT Initiative) participated in plenary and panel discussions, parallel sessions, a meet-the-experts open forum, displays to discover critical issues related to monitoring and evaluation of UHC and role of ICT-enabled health information systems may play in it.

3. In his welcome remarks, ADB President Nakao emphasized the importance of UHC to quality of life, inclusive growth and sustainable economic development and the key role played by ICT in strengthening health systems. He provided examples of ADB's country engagement in ICT innovations, and reiterated ADB's commitment to increasing health investments in the coming five years. To set the stage for the following two days, Vinod Thomas, ADB's Director General, Independent Evaluation, moderated a panel on UHC with ICT in the sustainable development goals (SDG) agenda. David Evans (Director, Health Systems Governance and Financing department, WHO) Ali Ghufron Mukti (Vice Minister, Ministry of Health, Indonesia), and Vivian Lin (Director, Division of Health Sector Development, WPRO, WHO) shared their insights on how ICT can bridge the gap between UHC and health systems. Countries are moving towards UHC and are expressing a clear need for ICT solutions to help monitor and evaluate progress using innovative data visualization tools and managing the health sector.

A. Interactive knowledge sharing and country experiences

4. Two parallel sessions followed the opening session, one looking at the role of ministries of health, social protection agencies and eHealth experts, the other focused on ministries of finance, planning and ICT and development agencies. The health session declared ICT for achieving UHC a necessity and identified adequate infrastructure, sufficient capacity, and open collaboration as keys to success. The finance session discussed the importance of establishing an interoperable ICT infrastructure and using data for financing decisions.

5. The last panel session of the day discussed how to reach the next level of ICT for development to achieve UHC. Moderated by ADB's Lead Health Specialist, Patricia Moser, it drew on the experiences of a six-strong panel representing ministries, national agencies, the donor community and WHO. Key messages included the need to: (i) stay focused on what you are trying to achieve with ICT; (ii) be mindful of the need for a clear policy commitment to ensure ICT can fend off competing priorities; (iii) be prepared to try ideas that may fail, because innovation relies on being prepared to make mistakes; (iv) promote value of investment not return on

investment; and (v) make sure that the evidence you generate through the use of ICT is then incorporated into future planning cycles.

6. To help ensure regional initiatives have an impact at country level, Norway's development agency NORAD announced the financing support for AeHIN for a further two years.

7. An evidence and innovation market fair brought together experts and practitioners at 12 stations eager to share their successes and experiences with those keen to learn from them. Peer-to-peer support, and learning from successes and failures binds communities of practice. The presenters showcased the use of ICT in a variety of settings, from measuring ICT and introducing eHealth standardization and interoperability, to UHC monitoring dashboards, putting evidence into action, and developing health information exchanges. All of these are key to creating more effective health systems and better quality health service delivery to achieve UHC.

8. The second day's opening session brought together five panelists to discuss developing the investment case for ICT for achieving UHC. Xu Ke (Team Leader, Health Care Financing, WPRO, WHO) detailed the crucial role of ICT in healthcare financing where it can aid decision-making and enhance understanding for all stakeholders, including government, service providers, fund holders, communities and donors. Inge Baumgarten (Programme Manager, GIZ) looked at the lessons learned on the potential of ICT for UHC, the fundamental one being to ensure that ICT investments strengthen the health system. Much of the session was devoted to country experience. Tsolmongerel Tsilaajav (Policy Officer, Ministry of Health, Mongolia) introduced the strategic investments that the country has already made in ICT for health information analysis and decision-making. Nikunja Dhal (Joint Secretary, Department of Health and Family Welfare, India) explained what the country has been doing to further its e-Health agenda, while Alvin Marcelo (National eHealth PMO, Philippines) explained how a multi-sector approach was essential to target effective ICT for UHC in the Philippines. Using innovative crowd-sourcing tools, the panelists were able to answer the participants' most pressing questions which included how to unify ICT systems when most funding is silo-ed in vertical programs or driven by competing priorities; and how the three countries represented made the investment case for ICT investments for UHC.

B. Recommendations on the Way Forward

9. The second session ensured that all participants contributed to the discussion, through three separate working groups, one each for health, planning/finance and ICT. Small group discussions in each workshop hammered out their four priority actions needed to further the use of ICT in achieving UHC, and identified quick wins that can be achieved in the coming 12-24 months. The top ideas emerged from a voting process, and these became the '[iCTen Steps](#)': interventions with impacts for informing the upcoming ADB/WHO policy brief.

10. Photos, videos and presentations are available at: <http://128.199.188.62/conference-outcomes/>. We thank all participants for the active contributions and are looking forward to collaborating and coordinating with you in the future.