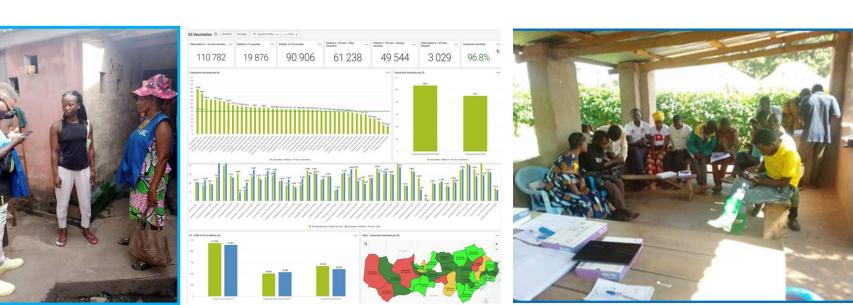
Integrating campaign platforms into the architecture of the national health information system



HISP

Sakibou Alassani, System Dev Lead, salassani@hispwca.org







Challenges

Best practices in collection platform integration

The benefits of digitization for unique program integration

Future opportunities





• Health programs were using various paper based tools or Excel for campaign data manageme



- Over the past decade, the approach has evolved to integrate use of proper data management software for campaign data management but in silos
- Gradually, it has emerged that collating data over years to enable longitudinal analysis becomes a serious challenge
- Moreover, the growing need for data analysis across various data sources for improved management has highlighted the need for integration across various data sources including campaign data
- Having been using DHIS2 as a plateforme for health data management, many countries have thus turned to it for the management of health campaign data

DHIS2 for campaign data management

Aggregate data

- Republic of Congo: Measles and Yellow fever Campaign
- Togo: HPV campaign

Household and individual level data

- Niger (2022 and 20223): SMC campaign
- Guinea
 - 2022: Bednet distribution campaign
 - 2023: SMC
- Togo (2023)
 - Bednet campaign
 - SMC
- DRC: Polio campaign

Approach to campaign digitalization



- Active involvement of stakeholders
- Discussions with stakeholders and beneficiaries to better understand their needs
- Digitalization of campaigns is different from digitalization of reporting tool
- Gradual development, feedback and improvement
- System development as opportunity to learn and improve
 - for the national team
 - o for the HISP team
 - opportunities to document some use cases and suggest new features for the core DHIS2 platform



Capacity Building: national DHIS2 team

Configuration

- System configuration done in a series of workshops with active involvement of national DHIS2 team: It contributed to:
 - further development of of their capacities (aggregate and tracker)
 - their understanding of the system configuration which in turn will help in maintenance

Implementation:

• Implementation of Mobile technology based reporting system



Cascade trainings: end users



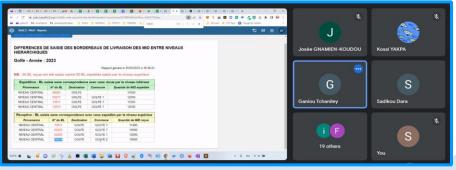
Ends users trainings

- Togo: combination of approaches
 - \circ ~ in person cascade trainings for end users
 - Online trainings for logistic officers from regional to district levels
- DRC:
 - Cascade in person training for end users
- Post-training follow-up

Materials

- User guides
- Video clips on specific topics such us how to sync data







Challenges

Main challenges



- The organisation unit regions, district, catchment areas etc hierarchy of campaigns differs from the routine one:
 - the campaign hierarchy often comprises unstable units that changes from one campaign to another
 - Don't always follow the administrative division and a campaign area can belong to two different district or catchment areas
 - The lowest level of intervention varies according to the campaign strategy even with the same health program: village, site, enumeration area etc.
- Campaign system users are often different from the routine HMIS users
- Some terminologies used during campaigns are also used in routine activities



3. Best practices in collection platform integration

Pulling campaign data into HMIS

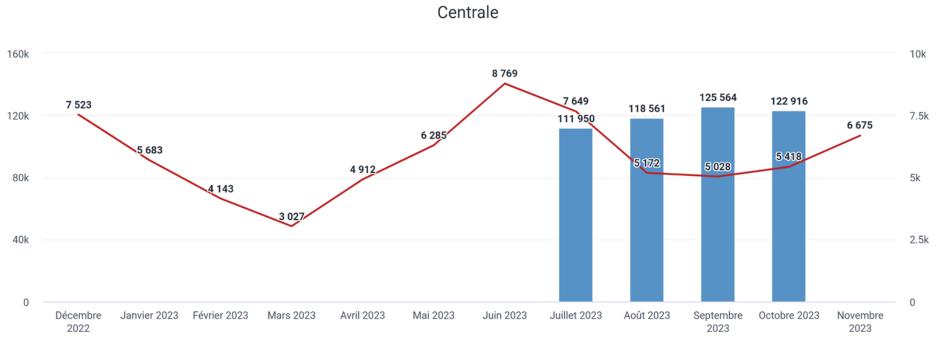


- Organisational: harmonize as much as possible the hierarchy from one campaign to another at least within one program
- ETL: extract, transform and load campaign data individual or aggregate into aggregate and load into the lowest level possible in the HMIS
- Use of various tools: Data transfer tool but ADEx app has been also released recently
 - Data transfer used in Togo
 - ADEX requires minimum 2.39 version of DHIS2



For data exchange between campaign instance and routine HMIS instance





CPS - Enfant traité — C_Ext - Nombre de cas de paludisme confirme au TDR/GE (simple et grave) Moins de 5 ans



4. The benefits of digitization for unique program integration



Benefits of digitization in the programs

- Make campaign key performance indicators available for all relevant users of the HIMS because only few stakeholders usually have access to the campaign instance
- Bring all data from various sources into one place
- Allow cross analysis of data
- Analysing effects of campaigns over time on disease trends

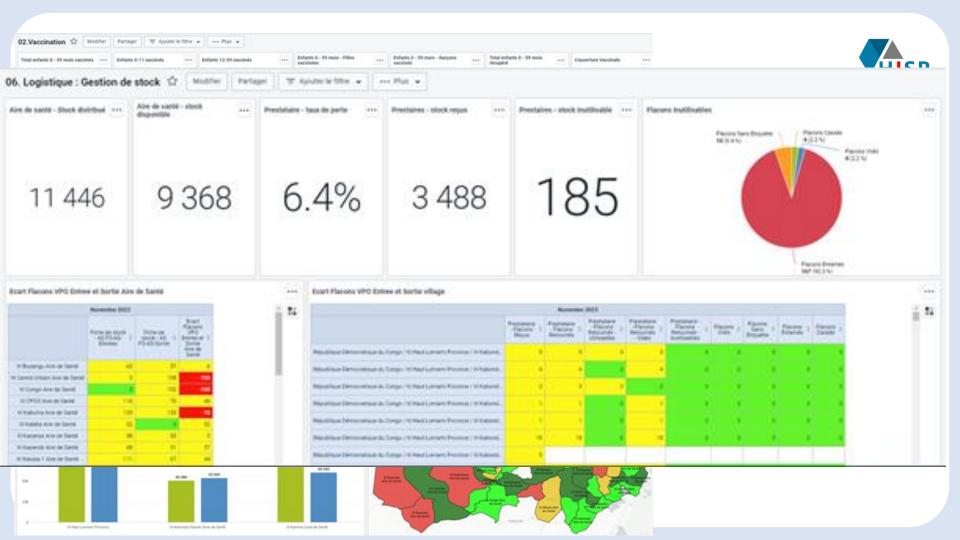
Moving forward and prospect: DRC



- Development of a single campaign platform in the country and integrate it with the national HMIS
- A stepwise approach dictated by the complexity of the work
- Collaboration between the country HISP WCA, HISP DRC and HISP centre to better document the use case and develop new features to better support campaign management
- So far the system has been configured for polio campaign and can be extended to support other immunization campaigns
- A specific dashboard app has been developed to better support campaign output

Moving forward and prospect: DRC





Conclusion



- Many countries are moving toward integrating campaign data into DHIS2
- So far this has been done through the creation of parallel DHIS2 instances leading to more complex architecture
- Campaign data in DHIS2 instances is now being integrated into DHIS2 based HMIS
- There is a need to explore and support the DRC approach and come out with a generic solution that can be adapted to other countries



info@hispwca.org

THANKS!