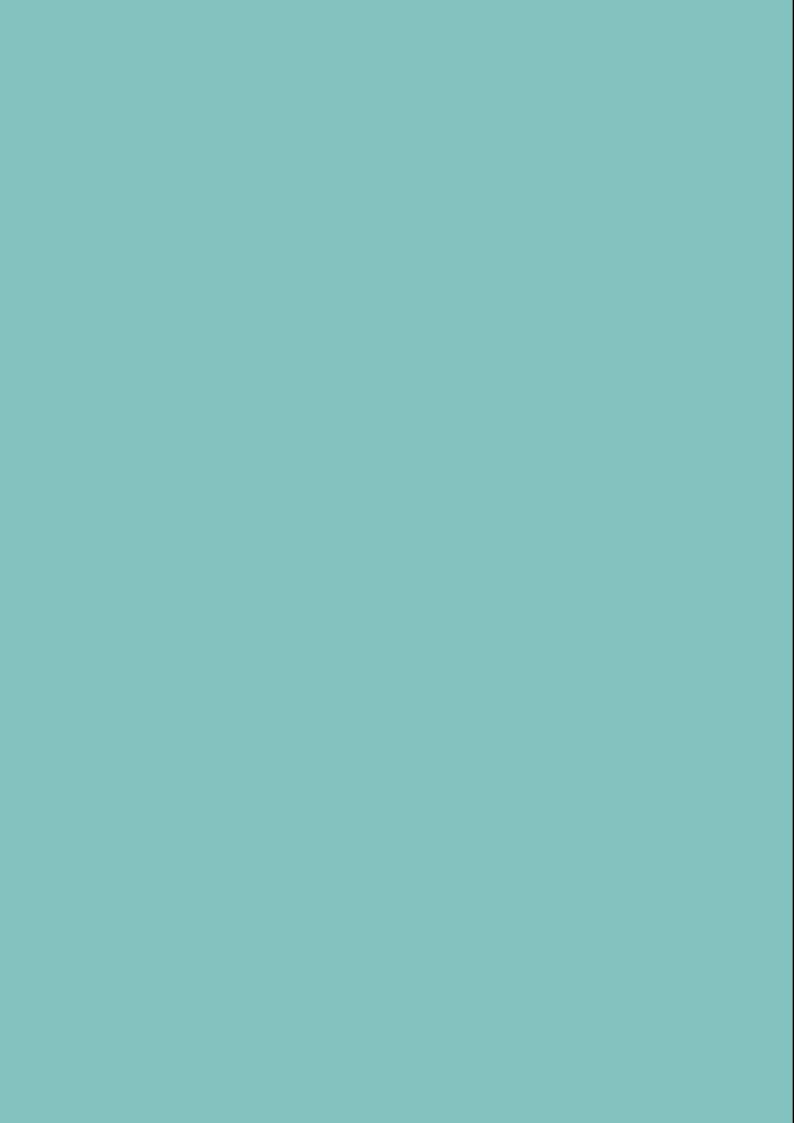


for **Health Data**Technical Package

## Global report on health data systems and capacity, 2020







# Global report on health data systems and capacity, 2020



SCORE for health data technical package: global report on health data systems and capacity, 2020

ISBN 978-92-4-001870-9 (electronic version) ISBN 978-92-4-001871-6 (print version)

### © World Health Organization 2021

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercialShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (http://www.wipo.int/amc/en/mediation/rules/).

**Suggested citation.**SCORE for health data technical package: global report on health data systems and capacity, 2020. Geneva: World Health Organization; 2021. Licence: <u>CC BY-NC-SA 3.0 IGO</u>.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

**Sales, rights and licensing.** To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

**Third-party materials.** If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

**General disclaimers.** The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

**Photo credits.** page 7: © WHO | Blink Media - Lisette Poole; page 49: WHO | Blink Media - Saiyna Bashir; page 57: © WHO | Ploy Phutpheng; page 77: © WHO | Blink Media - Saiyna Bashir

SCORE logo by Artifex Creative Webnet Ltd (ACW). Design and layout by Café.art.br

## **Contents**

Forew	<b>/Ord</b> by Dr Tedros Adhanom Ghebreyesus, WHO Director-General	IV
Forew	rord by Michael R. Bloomberg, WHO Global Ambassador for Noncommunicable Diseases and	Injuries <b>V</b>
Ackno	owledgements	vi
Acron	yms	viii
Summ	nary	<b>x</b>
Introd	luction	1
	Survey populations and health risks	8
	System of regular population-based surveys	10
	Surveillance of public health threats	16
	Regular population census	21
	Looking forward: policy implications	23
	Count births, deaths and causes of death	
	Full birth and death registration	
	Certification and reporting of causes of death	
	Looking forward: policy implications	35
	Optimize health service data	
	Routine facility reporting system with patient monitoring	
	Regular system to monitor service availability, quality and effectiveness	
	Health service resources: health financing and health workforce	
	Looking forward: policy implications	48
	Review progress and performance	
	Regular analytical reviews of progress and performance, with equity	
	Institutional capacity for analysis and learning	
	Looking forward: policy implications	56
	Enable data use for policy and action	58
	Data and evidence drive policy and planning	
	Data access and sharing	
	Strong country-led governance of data	
	Looking forward: policy implications	71
Data a	availability and global health priorities	72
Concl	usion	75
Annex	kes	78
Annex 1. S	SCORE Interventions, elements and indicators	79
Annay 2	SCORE Assessment maturity models for indicators included in scoring	8.4

## Foreword | WHO

The COVID-19 pandemic has highlighted the importance of strong data and health information systems that provide timely, reliable and actionable data. The grounding principle of WHO's transformation is to make a measurable impact in countries. WHO's Triple Billion targets – one billion more people benefitting from universal health coverage, one billion more people better protected from health emergencies, and one billion more people enjoying better health and well-being – is a pathway to achieve this vision.

Even before the pandemic, health systems were already over-stretched, and the world was not on track to meet the health-related Sustainable Development Goals (SDGs). COVID-19 has shown that even the most advanced and resilient systems have faced significant disruption across multiple sectors. We can only build back better with robust data and health information systems in every country and every community.

Despite progress in recent years, high-quality data are not routinely collected in all settings, major health challenges are not adequately monitored, and effective interventions are not directed to the right people, at the right time and at the right place. This impacts policies and programmes and consequently, the health of entire populations. Similarly, in order to meet the shared SDG commitment to "leave no-one behind", we need disaggregated data to ensure equitable health outcomes.

This means we must strengthen comprehensive data systems, collaborate with other sectors, and apply innovative digital technologies to collect, analyse and use data to make informed decisions and deliver impact.

The publication of the SCORE *Global report on health data systems and capacity, 2020* therefore comes at a particularly relevant time. As the first global assessment of the status and capacity of health information systems in 133 countries, covering 87% of the global population, it identifies gaps and provides guidance to precisely and rapidly improve the quality, availability, analysis, accessibility and use of data.

Using the innovative SCORE (Survey, Count, Optimize, Review, Enable) *Assessment instrument* to measure the status of data and health information

systems, the report highlights some important findings. It shows for example, that while 68% of countries have well-developed and sustainable capacity to detect public health threats, this varies between regions. Although there is good coverage of basic national level data, this is not the case in all countries. Similarly, there is high availability of data on immunization, tuberculosis and HIV; however, coverage of other critical health issues such as noncommunicable diseases, including mental health and cancer, is very limited.

The SCORE for Health Data Technical Package includes this report and its accompanying Assessment methodology, Assessment instrument and Online Data Portal along with the recently launched Essential interventions and Tools and standards. This is a unique, one-stop-shop of essential interventions, recommended actions, tools and resources. We encourage all countries and partners to use this global report and the SCORE Assessment instrument to urgently identify gaps, prioritize investments, and accelerate progress towards achieving the SDGs and the Triple Billion targets to promote health, keep the world safe and serve the vulnerable.

We would like to express our sincere gratitude to Member States for their engagement, to Bloomberg Philanthropies for funding this truly collaborative work, and to all Data for Health Initiative partners who played a role in bringing the SCORE global report and technical package to fruition.



Each Ash

**Dr Tedros Adhanom Ghebreyesus** 

Director-General, World Health Organization

## Foreword | Bloomberg Philanthropies

Good data is essential to good decision-making. Fortunately, for a growing number of governments around the world, "Follow the Data" is the motto driving their work to strengthen public health. With more timely and accurate data in hand – ranging from basic birth and death records, to detailed evidence on risk behaviours like tobacco use – policymakers can then make smart, targeted investments in improving public health and saving lives.

To help more countries do just that, Bloomberg Philanthropies teamed up with our longtime partner the World Health Organization and developed the SCORE package. SCORE is a set of essential, standardized tools, which boil down to: Survey, Count, Optimize, Review, and Enable. While there is still much work to be done, our results so far are encouraging.

Most significantly, this SCORE report is the first to gauge countries' progress in producing sustainable health data. The report's findings come from over 130 countries, representing nearly 90 percent of the global population. While no country has achieved perfect marks in each of SCORE's five categories, one important fact is clear now. All countries, across income levels, have the capacity to fill gaps in their health data. By pinpointing those gaps, we hope this report leads countries not just to produce more data, but to take policy action.

At Bloomberg Philanthropies, that kind of data-driven approach informs all our work to help protect and advance global public health. Whether we are responding to the urgent needs of the COVID-19 pandemic, or expanding our longstanding efforts to reduce preventable deaths

from noncommunicable diseases around the world, we search out the best data and use it to help our partners develop the most effective strategies for success. To cite one example: Since 2015, through our Data for Health programme, we have helped countries around the world strengthen their health data systems – and we look forward to enhancing our impact.

Together with the World Health Organization, we encourage our partners in government to continue following the data – and putting it to immediate use, in crafting policies that save and improve their residents' everyday lives.



Michael R. Bloomberg

WHO Global Ambassador for Noncommunicable Diseases and Injuries

Founder, Bloomberg LP and Bloomberg Philanthropies

## **Acknowledgements**

The WHO SCORE *Global report on health data* system and capacity, 2020 is the result of close collaboration between individuals within WHO, Member States and external partners, without whom this work would not be possible. This report was coordinated by the Division of Data, Analytics and Delivery for Impact at WHO.

We would like to thank all partner institutions, UN statistical division, participating Member States, WHO colleagues and leadership of WHO countries, territories and areas for their contributions and inputs to this report. We would also like to thank the Bloomberg Philanthropies Data for Health Initiative. WHO is a proud partner of the Bloomberg Philanthropies Data for Health Initiative which works with governments to strengthen their public health data to inform improved policy decisions and public health investments.

### **MEMBER STATES**

## **AFRICAN REGION**

Benin: Midodji Hervé Djossou; Botswana: Baile Moagi; Burundi: Anaclet Nahayo; Cameroon: Gnigninanjouena Oumarou; Côte d'Ivoire: Joseph Acka; Ethiopia: Biruk Abate; Ghana: Nana Kwabena Adjei-Mensah; Guinea: Sekou Conde; Guinea-Bissau: Orlando Lopes; Madagascar: Harisoa Julie Norovoahangy; Malawi: Issac Oambula; Namibia: Ben Nangombe; Nigeria: A.

Escoto; **Peru:** Elizabeth Zulema Tomas Gonzales; **Saint Kitts and Nevis:** Delores Stapleton Harris; **Saint Lucia:** Feix St. Hill; **Saint Vincent and the Grenadines:** Cuthbert Knights; **Trinidad and Tobago:** Asif Ali; **Venezuela:** Jose Manuel Garcia

## **EASTERN MEDITERRANEAN REGION**

Afghanistan: Attaullah Sayeedzai, Ahmad Nawid Shams; Bahrain: Safa Sayed Ali Majed; Djibouti: Saleh Banoita Tourab; Egypt: Ibtesam Mostafa Zakzouk; Iraq: Hisham Jasim Abed, Raoof Tareq Raoof; Jordan: Kareman Al-Zain; Lebanon: Hilda Harb; Libya: Mohamed Ibrahim Saleh Daganee; Morocco: El Marnissi Abdelilah; Oman: Omar Al Farsi, Halima Al Hinai, Ahmed Al Qasmi, Badar Awlad Thani; Occupied Palestinian territory, including East Jerusalem: Jawad Bitar; Saudi Arabia: Mawyah Alatassi; Somalia: Abdullahi Hashi Ali; Sudan: Amal Abass, Amal Alamin, Khalid Almardy, Wiam Bushra; United Arab Emirates: Sheikha Abdul Karim Abdoul, Hind Ali Al-Mulla, Alia Zaid Harbi

### **EUROPEAN REGION**

Austria: Jeannette Klimont; Belgium: Lieven De Raedt, Francoise Renard, Timmy Van Dijck; Cyprus: Vasos Scoutellas; Germany: Philip Wahlster, David Herr; Netherlands: Polanen Petel, Wendy Loorbach-van Zutphen, Bruin, A. de (Agnes), Mariken Tijhuis, Peter Achterberg; Poland: Karolina Konarzewska; Portugal: Jose

预览已结束, 完整报告链接和二维码如下:

https://www.yunbaogao.cn/report/index/report?reportId=5 24115

