Health systems convergence and universal health overage: role of health information systems and lessons learned from conflict-affected areas in Myanmar



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BACKGROUND

Over six decades of armed conflict between the Government of Myanmar (GoM) and Etnic Armed Organizations (EAOs) has impeded equitable access to healthcare in historically underserved and conflict-affected communities. Ethnic and community-based health organizations (ECBHOs), affiliated with EAOs, developed as parallel providers to fill gaps in primary healthcare coverage. After the signing of a nationwide ceasefire agreement between GoM and EAOs in 2015 paved the way towards convergence between state and non-state actors to move towards Universal Health Coverage (UHC) by 2030, including the alignment of health management information systems (HMIS) for effective, efficient, and coordinated planning.

OBJECTIVE

This is the case study aims to describe the lessons learned related to HMIS needs in conflict-affected settings to promote health systems convergence.

METHOD

Five in-depth interviews were conducted with HMIS managers and field staff from ECBHOs.

Documents review was done on both paper-based and electronic database.

FINDINGS



EHOs' HMIS System



Inconsistent definitions of health indicators



Software interoperability



MOHS's HMIS System

CONCLUSION

Standardization

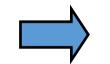


HMIS Training to all levels

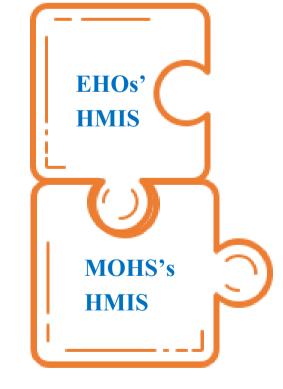


Interoperable data management software and IT Infrastructure





System Level Convergence



Data quality assurance mechanisms



Effective utilization of data for decision-making



RECOMMENDATION

These findings suggest a roadmap for engaging HMIS managers in the Ministry of Health and Sports (MOHS) and ECBHOs, as well as a prioritized agenda for upgrading and aligning HMIS systems to accelerate the progress towards UHC in contested areas of Myanmar.



