Digital Health Resource Portal

Feedback from a multi-stakeholder survey, August 2023

Introduction

In its report *Closing the digital divide: More and better funding for the digital transformation of health*, Transform Health highlighted the lack of publicly available information on current funding levels and gaps in domestic and external funding for digital health, particularly for low and lower-middle income countries.

As part of a new Global Initiative on Digital Health (GIDH), the development of a digital health resource portal is under consideration with the aim of optimising investment and alignment with country priorities. Working with WHO and the G20, Transform Health is facilitating a multi-stakeholder consultation to inform the development of the resource portal, including carrying out an online survey and key informant interviews to gather initial insights ahead of the final G20 Health Working Group and Health Ministers' meeting in August 2023. The online survey was circulated to stakeholders via digital health networks and social media to gather perspectives on the potential uses, audience, scope and functionality of the portal. A subset of partners were invited to participate in the structured key informant interviews.

A total of 34 organisations' views were captured through the consultation (see end for list of participating organisations), with 32 individuals completing the survey and nine individuals taking part in key information interviews. Respondents represented different constituencies, including civil society; implementing / technical partners; intergovernmental organisations; multilateral donor agencies; academia; and private foundations.

Further consultations will take place over the coming months to allow for in-depth discussions to help shape the portal, ensuring it responds to the needs of users and to build wide stakeholder buy-in.

Key perspectives

1. A portal to track investments in digital health will help to address several challenges
2. A range of users and uses must be considered for the portal and involved in its development
3. A portal should bring together information on different sources of investment in digital health transformation
4. Tracking investments in the foundational pillars of digital health transformation must be a priority
5. The portal should help to inform decision making
6. Data collection and verification challenges will need to be addressed

Summary of responses from the survey and key informant interviews

1. A portal to track investments in digital health will help to address several challenges

Stakeholders support the creation of a portal to track financial investments in digital health as part of the GIDH. Survey respondents and key informants felt that a portal—which builds on and aligns with existing tools and health investment tracking efforts—could help to address a range of challenges currently facing governments and other actors in the digital health ecosystem, including:

- Lack of transparency about current and projected levels of digital health financing.
- Missed opportunities to match available resources to funding needs and country priorities.
- Lack of knowledge about funding gaps for different areas of digital health transformation.
- Fragmentation and duplication in donor financing.
- Inconsistencies in tracking and reporting on digital health investments.
- Weak understanding of donor priorities, grant cycles and funding processes.

- Insufficient timely information to support future strategies, budgets and assessments (e.g. on unit costs, cost effectiveness, return on investment, impact of interventions, etc).

Survey respondents were invited to select from a list of potential uses for a portal and to suggest others. The most frequently selected potential use for the portal (selected by nearly all survey respondents) was "to publish and track current funding (and funding commitments) in digital health transformation from different funding sources - e.g. domestic funding, donor funding (bilateral, multilateral, philanthropic), private sector funding".

By making information about digital health financing more accessible, stakeholders believe that a portal will assist governments, donors and the private sector to make more impactful investment decisions and fill funding gaps. Publicly available information on government, donor and private sector funding, brought together in one place, will help to increase accountability and encourage action to improve methods for tracking both the level and impact of digital health investments.

2. **A range of users and uses must be considered for the portal and involved in its development**

Consulted stakeholders agreed that a portal will be of particular use to LMIC governments who are facing significant financial barriers to implementation of their digital health strategies. Representatives from LMIC governments and their partners should therefore play a major role in the design and testing of the portal.

In addition to governments, other potential users of the portal identified were civil society and communities; donors (bilateral, multilateral and philanthropic); the private sector; implementing partners; and research and academic institutions. Each stakeholder group is likely to have slightly different information needs and expectations from the portal. A fully inclusive process involving each of these groups in developing the portal—and other aspects of the GIDH—will help to ensure that these are met as far as possible. Involving as many stakeholders as possible will also enable lessons to be learned from previous efforts to track investments in other areas of health.

3. **A portal should bring together information on different sources of investment in digital health transformation**

When asked what kinds of information should be included in the portal, survey respondents indicated that they would be keen to see different types of information collected and presented, including:
- Government (domestic) funding commitments and allocations for digital health transformation

- Donor pledges / funding commitments and allocations for digital health transformation
- Detailed information about digital health transformation investments (e.g. programme descriptions, areas of investment)
- Compilation and summaries of costed national digital health strategies
- Details of available resources versus total funding needs to implement national digital health strategies (funding gaps)

Gathering information about the current and future financing situation at national and sub-national levels was considered by respondents to be the biggest priority. However, several respondents indicated that historical financing data would also be useful to help countries learn and monitor progress. Some stakeholders would also be interested in using the data for cross-country comparisons and assessing overall regional/global trends.

Many respondents expressed a desire to have a single online portal for the GIDH that brings together information on financial investments with information on countries' needs and country-enabling resources. It was suggested that a 'one-stop shop' would be helpful for both countries and development partners to better understand the environment and context for future investments and to learn from past investments.

4. **Tracking investments in the foundational pillars of digital health transformation must be a priority**

Many stakeholders expressed their desire for the portal to support countries in moving away from a project-based approach to digital health, towards implementing a more holistic and sustainable approach to digital health transformation. In addition to tracking investments in different types of digital health interventions, the portal should support better prioritisation, reporting and analysis of investments in the foundational building blocks for digital health transformation. This will help countries and donors identify opportunities to increase investment in these critical but often underfunded areas.

5. **The portal should be designed to help to inform decision making**

Respondents broadly agreed that a portal should be more than just a monitoring tool and include components to help with benchmarking, analysis and learning to inform future decision making and resource allocations.

In addition to tracking funding flows at national and sub-national levels, potential portal users wanted to be able to see how funds were used and what impact investments had. This kind of information would help stakeholders to better understand what works and what should be scaled up. Users should be able to put a country's financing information into context by cross referencing it with information about, for example, digital maturity and the broader health, economic and political landscape.

6. Data collection and verification challenges will need to be addressed

Whilst stakeholders were enthusiastic about a portal, many believed that it could be challenging to populate and maintain it. Digital health transformations are often invisible within programmes and there is currently no system for governments or donors to report on investments in digital health transformation (i.e. through National Health Accounts or the OECD-DAC).

Just 16% of survey respondents said their organisation has established a system to track funding in different areas of digital health transformation. More than one third of respondents said that their organisation does not track digital health investments separately from other areas. Donors who have begun tracking their digital health investments believe that any figures would be an underestimate as it is difficult to disaggregate digital health investments from other areas.

Respondents agreed that it will be important for governments, donors and other stakeholders to agree on a set of categories for investments in digital health transformation. The WHO/ITU eHealth building blocks and WHO classifications of digital health interventions were both considered as the ideal starting point for this exercise.

To ensure the portal is both effective and widely used, different stakeholders will need to be incentivised to share accurate and relevant information on a regular basis. Its value proposition will need to be clearly communicated and the data within it will need to be trusted and objectively verified.

Respondents agreed that contributing data to the portal should not place unnecessary burden on countries or donors. Several suggested that AI could be employed to automate information collection and population of the portal. To assure the quality of data in the portal, information should be curated and verified by an independent group of experts representing different constituencies.

Recommendations for the way forward

Transform Health recommends that G20 leaders, WHO and other partners incorporate the findings from this consultation into the next phase of the GIDH's development. Further perspectives on the resource portal and other pillars of the GIDH should be sought as soon as possible, particularly from constituencies and key partners, such as LMIC governments, bilateral donors and other multilateral partners, including development banks.

Looking to the longer term, governments and development partners should explore more routine and sustainable mechanisms for reporting on both domestic and external investments in digital health transformation. For example, expenditure categories for

digital health transformation could be included in the National Health Accounts and OECD-DAC reporting systems. Information from these sources could then be presented together in the digital health resource portal along with other relevant data.

Organisations represented in the consultation

1. Aidsfonds
2. ASE Health Australia
3. Clinton Health Access Initiative
4. Digital Square
5. ENDA Sante
6. eSHIFT
7. Father Muller Medical College
8. FIND
9. Fondation Botnar
10. GAIN
11. Global Fund
12. Grand Challenges Canada
13. HELINA
14. Jhpiego
15. John Snow International
16. Kati Collective
17. Kemri-Wellcome Trust
18. Medic Mobile, Inc.
19. The Medical Concierge Group
20. My Body My Body, Kenya
21. Novartis Foundation
22. OECD
23. PATH
24. PMNCH
25. PharmAccess Foundation
26. Recainsa
27. Research Advocacy Counselling Trust (reACT)
28. Terre des hommes
29. UNICEF
30. University of North Carolina Chapel Hill
31. University of Warwick
32. WHO
33. World Bank
34. Young Experts: Tech 4 Health