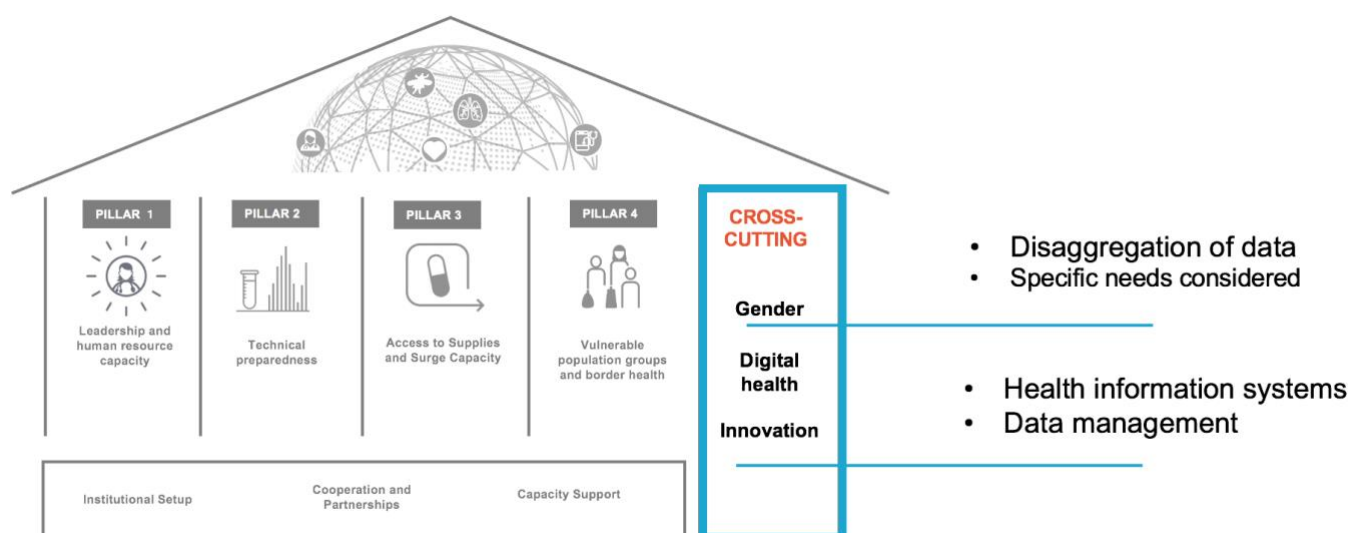# Cross Cutting Issues:
Gender, Digital Health, and Innovations

Key challenges to gender. Gender equality in the health sector requires much work in CAREC countries. Awareness of gender issues is rare.[1] The pandemic has even deepened challenges, which had been existing prior to the COVID-19 outbreak: accessing health services, unequal earnings and job opportunities, mental health issues and domes-tic violence.

Proposed actions. The CAREC Health Strategy 2030 will focus on achieving greater attention to the health needs of women and taking them into account in designing services and analyzing data.[2] Areas of intervention may include the following:

 (i)   Improve sex-disaggregation of data in the health sector of CAREC region, through the application of CAREC WGH program.
 (ii) Inform about gender concepts, meanings, gaps, and implementation options in health projects.
 (iii) Include specific needs of women in health planning and designing of services.

Key challenges for digital health. Digital health is a key innovation and has the capacity to revamp health care systems, both public health, health security and clinical services efficiency across the region. Key challenges in this domain with respect to the CAREC countries include the ethical aspects of medical data management, to meet international conventions on patient's human rights as well as challenges in terms of needed infrastructure, interoperability, governance, and leadership. CAREC countries are at differing stages of digital readiness and maturity. The pandemic has significantly stressed existing ICT resources in these countries and has shown the importance of creating a robust health IT infrastructure to enable maximum connectivity in these countries.

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1 UNDP. 2016. Gender assessments in Europe and Central Asia reveal pandemic's devastating impact on women; and World Bank. 2014. Why We Care about Closing Gender Wage Gaps in the South Caucasus; and UN Women. 2020. UN Women series: Women at the forefront of COVID-19 response in Europe and Central Asia: Voices of gender equality mechanisms on COVID-19.

2 ADB. 2021. *CAREC Gender Strategy 2030*: *Inclusion, Empowerment, and Resilience for All*. Manila.

The ability to keep tabs on hospital occupation, average bed days, and ICU occupation helps managers plan where and how to boost capacity to meet a surge in demand, as during a pandemic, and matching such electronic information to how interventions and mitigation efforts result or fail in "flattening the curve" are vital tools for health security and pandemic management. At the same time, personal rights to confidentiality and patient human rights need to be protected in how these electronic information systems are constructed and used.[3] Limited ICT network and interoperability, the need for strong commitment to the development of digital health human resource capacity, policies, and other ICT infrastructure to implement digital technologies does however remain a very real challenge.

To benefit from a wide variety of digital health tools and services, governments must decide about the sequencing of digital health development and implementation according to the needs of the country/region. In the circumstances of limited resources, the implementation of large-scale digital health projects that attempt to solve different medical, public health, health care financing and social care issues is not feasible. As a joint effort to improve structural instruments for digitalization, CAREC countries should seek opportunities to build shar-able resources for digital health. Those resources could include data security and privacy guidelines, policy for the digital identity of residents (incl. migrants), taxonomies and vocabularies for health data and data exchange, etc. In addition, a shared network of digital health training and education institutions would help in the capacity building of the CAREC region.

Proposed actions. The CAREC Health Strategy 2030 will focus on *strengthening health information systems*[4] in the CAREC region and *managing data jointly and more efficiently*. Areas of intervention may include:

  (i)   Identify willing CAREC member countries' digital health priorities and assess its digital health landscape as appropriate to suggest and support implementation of suitable digital health solutions.
  (ii)   In partnership with willing CAREC member countries, conduct gaps assessment for achieving graded stepwise health system data interoperability, e.g. identify gaps currently hampering the ability of different health sector IT systems to "speak to each other" including between laboratory devices and applications (systems such as patient records and encounter registers) so that data can be accessed, exchanged, integrated and cooperatively used in a coordinated manner, within and across organizational, regional and national boundaries, to provide timely and seamless portability of information to optimize health security.
  (iii)   Based on the gap analysis, propose health data exchange architectures, application interfaces and standards which enable data to be accessed and shared appropriately and securely across the complete spectrum of care in willing CAREC member countries and between when such sharing is decided to take place, within all applicable settings and with relevant stakeholders and provide necessary training.
  (iv)   Launch practical experimental initiatives for regionally unified coding of health data for willing CAREC countries, through CAREC-wide promotion of WHO recommended International Classification of Disease ICD-10 (and upcoming ICD-11) and International Classification of Primary Care, to help ensure cross-country compatible and comparable data in national health IT systems IT and databases.

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3 World Health Organization. 2012. *Legal Frameworks for e-Health: Global Observatory for e-Health series. Vol-ume 5.* Geneva.; WHO. 2017. *WHO Guidelines on Ethical Issues in Public Health Surveillance.* Geneva.; and Riso B, Tupasela A, Vears DF, Felzmann H, Cockbain J, Loi M, Kongsholm NCH, Zullo S, Rakic V. 2017. Ethical sharing of health data in online platforms - which values should be considered? *Life Sci Soc Policy.* 13(1). pp. 12.
4 ADB. CAREC Digital Strategy 2030. Unpublished.

(v)   Engage in regional policy dialogues and knowledge exchange where information on successful digital approaches and policies to address challenges can be exchanged and fostered between countries.

(vi)   Promote and strengthen capacity on standardized and interoperable health information systems to overcome separate vertical systems, and different overlapping sources of data.

(vii)   Improve data management and data capture mechanisms, including quality of captured data capacity, analytical capacity, and presentation skills in willing CAREC member countries.

(viii) Adopt methods to enable cross-border data sharing and use in willing CAREC member countries.

(ix)   Strengthen digital leadership and digital skills among the top-level decision makers.

(x)   Develop a sustainable and realistic regional action plan of digital health implementation for willing CAREC countries.

Key challenges for innovations. Even though innovative models were developed and implemented in some countries during the current pandemic, other countries were missing sufficient technical capacity for adopting, implementing, and scaling up innovative models and solutions.[5] Being able to rapidly adopt innovations is key to solving the current crisis and to prepare for future pandemics.

Proposed actions. The CAREC Health strategy will focus on *improving the* technical capacity for adopting, implementing, *and scaling up and sharing innovative models and solutions*. Areas of intervention may include the following:

(i)   Create awareness on existing national, regional, and global innovative solutions for mitigating health crisis like the current COVID-19 pandemic.

(ii)   Offer capacity building workshops and webinars on innovative solutions in the health sector to CAREC member countries.

(iii)   Explore the development of a fund for supporting innovations in health emergencies.

(iv)   Support creation of a regional innovations knowledge exchange platform to facilitate knowledge transfer and technical capacity building on health security

A full document of draft CAREC 2030 Health Strategy is available at
https://www.carecprogram.org/uploads/MC-2021-CAREC-Health-Strategy-2030-20211711-EN.pdf

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5 M. Merten. 2020. Public Health Innovations for COVID-19: Finding, Trusting and Scaling Innovation. *ADB Sustainable Development Working Paper Series* No. 70. Manila. Asian Development Bank