

The role of the digital ‘Commons’ in closing the gaps towards an equitable digital health transformation:

Key take aways from the World Health Organization Global Initiative on Digital Health and Assistive Technology, Member State and Partner co-organized side event during UNGA79 Summit of the Future, New York, NY 21 September 2024



Leading up to the [Summit of the Future](#), a high-level event bringing together world leaders to forge a new consensus on international cooperation, the United Nations Secretary-General convened two Action Days to generate additional opportunities to engage with actors such as Member States,

private sector, civil society and academia. During the second Action Day under the theme “A Digital Future for All”, the **Governments of Ireland, Estonia, the Global Disability Innovation Hub, the International Telecommunication Union (ITU), Transform Health and the World Health Organization (WHO) Departments of Digital Health and Innovation, and and Health Product Policy and Standards** hosted a 75-minute side event on the role of robust foundations in country-led national digital health transformation.

The side event “**Multistakeholder dialogue on investing in digital public infrastructure for equitable future health systems, with assistive technology as a use case**” which took place at the UN Headquarters in New York, on 21 September 2024, highlighted that we are at a juncture of critical history in digital health transformation with this year being the first time digital architecture is at the center of discussions on digital transformation during the UN General Assembly (UNGA). In support of moving away from a ‘solution mindset’ i.e. we have a problem and develop an application for this problem - governance, architecture and finance were highlighted as the three key pillars that drive digital transformation. To enable person-centered and inclusive health systems, governments need to demonstrate and be supported to execute a leadership that implements digital architecture through foundational and health-specific digital public infrastructure (DPI). Speakers frequently highlighted how building digital solutions does not transform a sector, architecture does.

Guided by the Global Strategy on Digital Health 2020-2025, more than 120 WHO Member States have articulated a digital health strategy, but have struggled to convert these into action. A proliferation of solutions exists as a result of donor-driven investments, while the

‘foundational’ elements needed for systematic digital transformation and implementation of these digital health strategies often remain neglected. The COVID-19 pandemic highlighted the importance of supporting governments to be the custodians of national transformation, enabling them to thoroughly guide and mobilize the resources necessary for development and maintenance of digital architecture.

Private and public sectors are very similar in their needs for digitalization and no one sector can afford to develop their own systems. We need to collaborate and leverage systems within and across borders. This is especially true for the health sector which is very dependent on an interconnected digital system as people continuously need access to person-centered and timely health services throughout their lives. Each of these touch points (e.g. primary health care clinics, dentist offices, hospitals) cannot have its own systems (e.g. patient registry). This will be very costly and ineffective, but also limit safety and quality of service for users of health services. To digitalize the health sector, governments and partners need to deploy decentralized systems which is done through three steps: (1) Enable interoperability, (2) Solve the issue of re-usability, (3) Create trust. All countries and sectors that manage to digitally transform, do these three things first.

A national digital architecture implemented through DPIs such as Digital Identity and Digital Payment is what drives digital transformation. Foundational DPIs are in turn leveraged by public- as well as private sectors putting people at the center and improving access to services. The health sector leverages foundational DPIs for domain specific DPIs such as canonical registries of health workers and persistent personal health records (e.g. International Patient Summary). Strong national governance and architecture have enabled country-led transformation in India, Kenya and Rwanda. There is a need to sustainably and intentionally fund these ‘Digital Commons’ - the modern-day roads and electricity infrastructure, because without these, countries will not be able to drive digital health transformation forward. We also need a vast improvement in the tracking and alignment of the available resources – improving the understanding of what needs to be funded, where, for a digital health transformation that is guided by a robust architecture and implemented through DPIs, is vital to the success of external and domestic digital health investments.

To support countries on the journey towards building a robust foundation for digital health transformation, WHO and ITU announced its new collaboration building a reference architecture for digital health transformation that will help guide countries on how to deliver person centered health services in the digital era. The audience was encouraged to join the working groups that will support the development of the reference architecture and to promote the understanding that DPI is not just a new buzzword, it is what drives digital

transformation, and we should all rally behind these efforts to support country-led and sustainable digital transformation of health systems.

With the understanding of the importance of robust foundations and the role of governance, architecture and financing in sustainable digital health transformation, assistive technology was then shared as a health service use case that will benefit from these efforts. Strengthening these three enablers can accelerate a person-centered and equitable approach for effective provision, safe and appropriate use of assistive technology supported by an appropriately trained and equipped work force for 2.5 billion people globally .

Ultimately, there was a call to action from all speakers for members of the digital health ecosystem to **collaborate, share and re-use**. As previously also highlighted by the Brazil G20 Presidency, ITU and WHO, the World Summit on the Information Society (WSIS) and GIDH are platforms we should all leverage to enhance these efforts.

For more information:

- **Recording of the session on UN Web TV:** [Multistakeholder Dialogue on National Digital Health Transformation \(Side Event, Action Day 2, Summit of the Future\) | UN Web TV](#)
- **Global Initiative on Digital Health:** [Global Initiative on Digital Health \(who.int\)](#)
- **Global Cooperation on Assistive Technology (GATE):** [Global Cooperation on Assistive Technology](#)
- **WHO Assistive Technology:** [WHO Assistive Technology technical pages](#)

Speakers: The session was opened by Nele Leosk, Ambassador-at-large for digital affairs at the Ministry of Foreign Affairs, Estonia; Shane Stephens, First Secretary, Permanent Mission of Ireland to the United Nation and Alain Labrique, Director Digital Health and Innovation, Science Division, World Health Organization. Speakers included Leah Ekbladh, Executive Director, Digital Square at PATH; Ambassador Alexandre Ghisleni, Head of the Special Office for International Affairs, Ministry of Health, Brazil; Lisa Lewis Person, Deputy Assistant Secretary for Technology Policy, Deputy National Coordinator for Operations, Chief Operating Officer, Office of the National Coordinator for Health IT, United States; Hani Eskandar, Head, Digital Services Division, ITU; Sean Blaschke, Senior Health Specialist, Digital Health & Information Systems Unit, UNICEF HQ and Mathilde Forslund, Executive Director, Transform Health; Kylie Shae, Team Lead, Access to Assistive Technology, World Health Organization; and Professor Malcolm MacLachlan, Co-Director, Assisting Living and Learning Institute, Maynooth University and Advisor to Irish Health Service. Closing remarks were shared by Vikram Pagaria (IRS), Director IT, National Health Authority, India.