



Asia Pacific Observatory
on Health Systems and Policies



WORLD BANK GROUP

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Landscaping PHC systems: Scanning digital horizons from the field

SMB301

29 January 2025

14:00- 17:30

Lotus Suite 1, FL. 22

Presentations: PHC Landscape in East Asia Pacific | Leveraging partnerships and research for PHC investments| Country stories from Thailand, Indonesia, Kyrgyzstan and India: How are we shaping the future of PHC in digital era?

Panel Discussion: Prioritizing actions and investments for greater PHC impact: Where do we go now?

This year's [Prince Mahidol Award Conference \(PMAC\) 2025](#) focused on the transformative potential of artificial intelligence (AI) and digital health technologies in creating a healthier, more equitable, and peaceful world. The multi-stakeholder event served as a robust platform to present, discuss and inspire actions on leveraging digital advancements to ensure equitable, affordable, and comprehensive access for all populations, especially in low- and middle-income countries.



PMAC SIDE MEETING: Primary Health Care in the Digital Health Era

For the past four decades since the Alma-Ata Declaration, information and communication technologies have evolved from being complex and costly to becoming integral to health services. By 2015, over 120 countries, including 14 from East Asia Pacific, had national digital health policies to shape the future of PHC towards the SDGs.

To tackle systemic and interrelated issues in realizing the envisioned PHC systems in digital era, APO and the World Bank East Asia Pacific convened experts and policy-makers in a side meeting session to explore country tailored strategies and reforms for a future-ready PHC.

Given this backdrop, the landscape of PHC status, policies and strategies in the region were presented which was substantiated by country stories in the field within and beyond Asia Pacific to capture diverse contexts; followed by discussions on harnessing digital technologies to drive disruptive reforms for healthier communities.

PRESENTATIONS



PHC landscape in East Asia and the Pacific | Ma-Ann Zarsuelo, Consultant, APO and the World Bank East Asia Pacific

The joint APO and the World Bank research generated evidence for the critical assessment of PHC systems in EAP, as part of the bigger strategy to stimulate dialogue and support ministries of finance and health to invest in PHC. PHC systems in 25 countries (4 high-income, 10 middle-income, and 11 Pacific island countries [PIC]) showed wide variety in terms of progress while challenges among MIC and PIC have similarities such as political dynamics, health system maturity and financing models that impacts effectiveness of interventions. Focused domains were accessibility, human resources for health (HRH), service delivery, financing and quality of care. Comprehensive findings of the collaborative project with country ministries of health and experts will be released in the upcoming PHC report by the World Bank this year.

Leveraging partnerships and research for sustainable PHC investments in digital era: What's new? | Nima Asgari, Director, APO

Investments in health policy and systems research (HPSR) continue to increase over time, with international funding accounting for approximately 45–69% of total funding in 16 countries globally, where the majority of institutions are universities (55.6%). In PHC research, the expanding PHC dedicated institutions and the integration of research and innovations into PHC strategies and frameworks spotlight its value in the health landscape. This has been central to APO's goal in supporting policy-makers and researchers by generating and brokering evidence on health policies through technical products, networking, and capacity building with multilateral and multistakeholder partners. Preliminary findings of PHC research in the Asia Pacific region provide an overview of what to look forward to in its upcoming publication, aimed at supporting decision-making in research investments.



APO role: what we do and for what?

Our Vision

Foster a culture of evidence-informed decision-making in health systems at regional, national, and subnational levels throughout the Asia Pacific region

Goal

Generate and broker knowledge of evidence on health systems and policies in partnership with governments, development partners, WHO and academic/policy institutes

Development and Government Partners



Asia Pacific Observatory on Health Systems and Policies

Research and Academic Institutes



Actions & Priorities

Bring policymakers and research institutions together to tackle policy questions, convene policy dialogues, develop policy briefs, comparative country analysis, journal articles, etc.

UHC and PHC

Health systems resilience including climate change and pandemic

Human Resources for Health

Digital health

Inequities in Health

Country Stories: Reshaping the future of PHC systems in digital era



Thailand: Upskilling Primary Care Health Workforces through Digital Technology | *Orawan Tawaytibhongs, Director, Khaoyoi Hospital & Deputy Director, The Division of Primary Care Support Ministry of Public Health*

While Thailand has achieved UHC in 2002, more needs to be done in HRH. Physicians, nurses and midwives stood at 35.7 per 10 000 population (2018), falling below the SDG target of 44.5. This particularly affects PHC workforce with persistent staff shortage; hence, the government rolled out policy interventions including mandatory rural health services, task shifting and the recent efforts of establishing hybrid and fully remote upskilling. Examples of free e-learning platforms are [Thai MOOC](#) (free open access courses), EWE platform (pay per course) and Paradiso Solutions (custom courses). Meanwhile, the Mor-Prom App is a mobile application that enables patients to access their information, latest health updates and other public health service units. While these initiatives were cost-efficient and generated initial user buy-in, it can be improved by investing in monitoring and evaluation, peer support/ mentorship and tailored training.

E-Learning for nurses to care for dementia

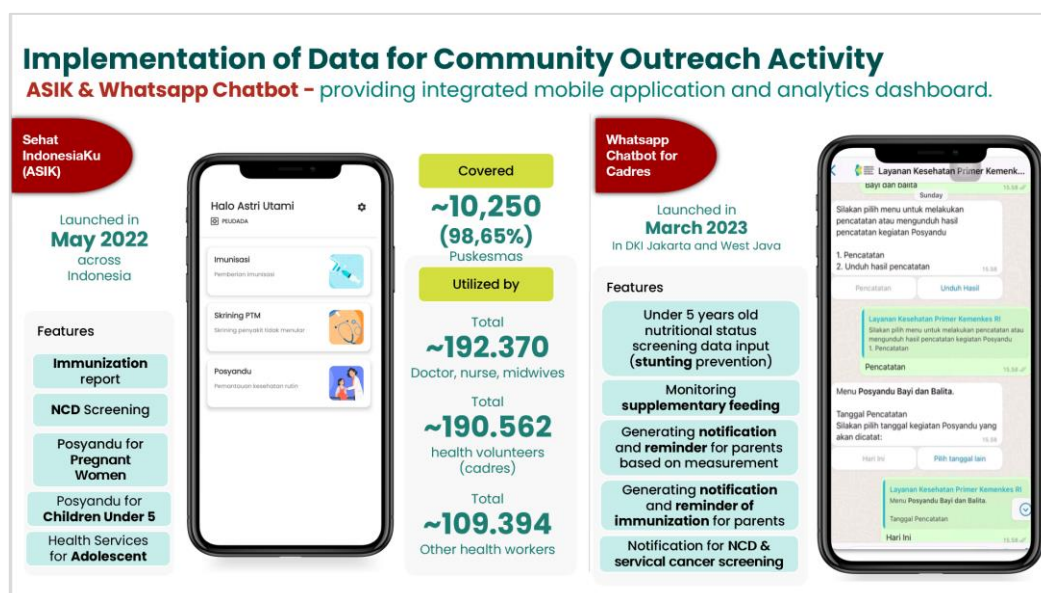
Basic course online for primary care doctors

E-Learning for digital health

Example of mobile applications

Indonesia: Strengthening Primary Health Care Resilience | Gregorius Bimantoro, Technical Advisor, Digital Technology Office, Ministry of Health Indonesia

Indonesia's journey in digital technology has made significant strides in the past years, with the well-established ICT structure and setting the bar high for other countries in terms of data collection and sharing of information across multiple platforms. This includes ASIK and WhatsApp for health centres, mobile app for the public and SIMPUs for healthcare workers. The *Satusehat* platform provides the ecosystem that connects and empowers the entire health system and the user. This has led to efficient flow of data on health facilities, patients, medical devices, medicines, financing, service and outcomes. Significant progress was noted in in monitoring and informing decisions in maternal health, immunization, community outreach activities and NCD screening, among others.



Kyrgyzstan: Journey in Digitizing immunization | Livi Verdasco, WHO Representative, Kyrgyzstan

Driven by the MOH eHealth authority, digitalization initiatives were scaled up to mitigate fragmentation of partnerships and uncoordinated pilot interventions, as well as to galvanize implementation strategies, tackle erroneous data input and clarify role delineation. Political dynamics and peer learning from other countries were crucial in sustaining momentum for this initiative. Actions that were taken by the team included reviewing digital and paper-based systems, identifying

enablers, and analyzing previous assessments in information systems. These led to the endorsement of a digitalization roadmap to coordinate national priorities in developing an immunization information system (IIS), engage partners, and mobilize resources.

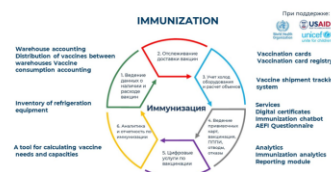
Outcomes and Learnings

Outcome

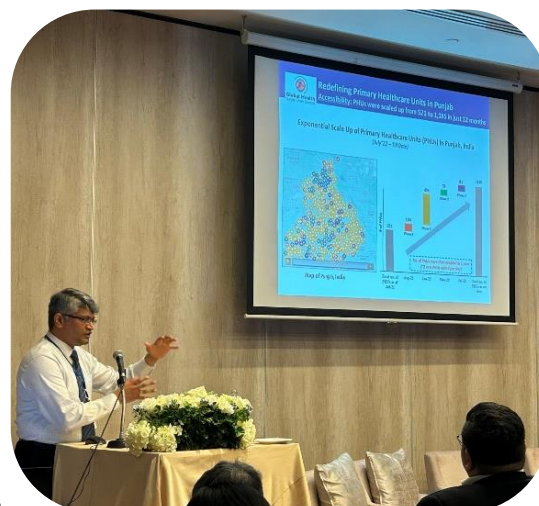
- MOH finalized and officially endorsed the digitalization roadmap
- Roadmap used to coordinate national priorities in development of IIS, engage partners for targeted support and financing, mobilize resources

Lessons learnt

- WHO convening role is paramount to drive coordinated approach to digitalization
- Collaboration between WHO Immunization and Digital health programmes, across RO and CO, enabled speaking as one voice and mobilizing resources from newer partners (EU funded project on immunization and digital health)
- Technical resources to support implementation of digitalization roadmap are not always readily available → critical lack of experts on business analysis and development of requirements
- Challenges in maintaining WHO in a position of stewardship and keep coordinated approach among partners



India: Using enterprise architecture to drive the comprehensive digital transformation of PHC services at scale | *Karthik Adapa, Regional adviser, Digital health, WHO SEARO and former Secretary of the Department of Health and Department of IT, Government of Punjab, India*



Last-mile delivery of essential drugs in Punjab focused on improving accessibility and availability, which are key factors for better affordability. In one year, PHC units doubled from 521 to 1 185, with approximately two units added per day; improving physical and HRH accessibility. The patient pathway from consultation to purchasing medicines was simplified, yielding more efficiency with significant reduced costs. It led to a 30% increase (from 3.3 to 4.3 million) in outpatient visits within a year and a reduced turnaround time for lab results from 80 to 96 hours, down to 48 hours. Further, the availability of medicines leaped from 48.1% to 100%, with zero out-of-pocket expenses for patients.

PANEL DISCUSSION

Prioritizing actions and investments for greater PHC impact: Where do we go now?



From the left: Nima Asgari, Gregorius Bimantori, Bakyt Dzhangaziev¹, Karthik Adapa, Ronald Mutasa², Orawan Tawaytibhongs, Dilipkumar Hensman³

¹ Bakyt Dzhangaziev, Technical Officer, Data Science and Digital Health, WHO Kyrgyzstan

² Ronald Mutasa, Practice Manager, Health Nutrition and Population, The World Bank East Asia Pacific

³ Dilipkumar Hensman, Coordinator, Health Information and Digital Health, WHO Regional Office for the Western Pacific

The discussion, stimulated by regional and country presentations, highlighted the interrelated issues in strengthening PHC systems. The complex nature of health systems requires policy and programmatic solutions that are multifaceted in approach and extend beyond the health sector. While engaging various stakeholders naturally brings vivid colours in political dynamics, identifying shared goals and sector interests can cultivate enabling ecosystem within and across governments, private sector, partners and the public.

While there is a misconception that the private sector can outperform public providers in digital health innovations given their agility and resources, healthy competition can be established if governments set equal standards and policies, regardless of who the provider is. These

collaborations can drive efficiency and sustainability of PHC programs. Furthermore, incentives must be carefully designed to focus on health outcomes, such as reducing maternal mortality, rather than mere output metrics like outpatient department visits.

Digital platforms open a plethora of alternatives in upskilling HRH, linking experts from all over the world and providing more flexibility. While the question lingers that AI might replace humans in the future, it remains to be support tool in healthcare. The nuanced and professional judgment of healthcare providers cannot be replaced by AI given the complexity of individual patients' health. Curricula, pre- and in-service training of health professionals need to stay ahead of the curve, anticipating future demands and opportunities.

Reforming PHC financing models entails a strategic dialogue between the ministries of health and finance that needs a compelling economic and development case. An example is shifting the focus of digital innovations from curative treatments to health promotion and disease prevention for cost-effective investments. While assessing effectiveness through health outcomes has been the default practice, it should go alongside economic impact assessments. In terms of digital technologies, are countries informed about what proportion has undergone health technology assessment? Gaps in these data need further research to inform policy actions.



The Secretariat of the Asia Pacific Observatory on Health Systems and Policies is housed in the World Health Organization Regional Office for Western Pacific, PO Box 2932, United Nations Avenue, 1000 Manila, Philippines

The Asia Pacific Observatory on Health Systems and Policies (APO), hosted by the WHO, is a collaborative initiative promoting evidence-informed decision-making in health systems across the Asia Pacific Region.

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