

# HISP Centre **Strategy Update 2026-2028**

UiO : **HISP Centre**  
University of Oslo





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## EXECUTIVE SUMMARY

For more than 30 years, the [HISP Centre](#) at the University of Oslo and the global [HISP network](#) that it coordinates—made up of 24 local HISP groups in Africa, Asia, the Middle East, Europe, and the Americas—have supported information system strengthening in low- and middle-income countries (LMICs), **helping revolutionize the availability and use of data for decision making in public health in LMICs**. This success is driven by the HISP approach to information systems, which emphasizes co-creation with local partners, development and sharing of globally adaptable and interoperable solutions, and strengthening capacity for full local ownership of systems and data.

A key outcome of this work is DHIS2, a free and open-source software platform developed by the HISP Centre and deployed as a locally owned system with HISP group support. DHIS2 now serves as the national system of record for health data in 75+ countries, covering more than 40% of the world's population (3.2+ billion people), and is recognized as a digital public good (DPG). DHIS2 is the world's largest health management information system, and has recently become the fastest-growing education management information system (EMIS) with 13+ countries adopting it for education data since 2019. Thanks to HISP's development of innovative tools like the DHIS2 Climate App and the Chap Modeling Platform for AI-enabled forecasting of climate-sensitive diseases, DHIS2 has also emerged as a leading global good for climate and health.

**This work—and the investments that have made it possible—have had a large impact on LMICs.** Local stakeholders can easily plan, budget, and monitor national programs, supporting improved health and learning outcomes. They have also been able to respond quickly and effectively to crises such as the Covid-19 pandemic, and the evolving needs of health systems, by leveraging existing local capacity and infrastructure—a cost-effective approach that reduces issues of siloed and fragmented data and supports long-term sustainability. This robustness, effectiveness, and adaptability demonstrates the advantages of the HISP approach and the utility of DHIS2. As a result, interest in DHIS2 adoption and partnerships with HISP continue to grow, including in sectors like health logistics and agriculture.

However, recent developments put this progress at risk. Post-Covid declines in global health financing and cuts in development assistance have created funding gaps for national DHIS2 systems and financing challenges for the core DHIS2 platform, while also revealing DHIS2 to be the essential component of LMIC health information architecture that many systems and processes depend on. At the same time, technological demands on national information systems in LMICs have increased, including calls to collect more granular data and to leverage emerging technologies like Artificial Intelligence (AI), resulting in demands to expand both DHIS2's functionality and its interoperability with other tools. There is thus an immediate need to “keep the lights on” and support existing DHIS2 systems while LMICs transition to country-led health funding, in line with [the Lusaka Agenda](#), while also ensuring ongoing financial support for DHIS2 core so that we can both maintain and innovate, and countries and partners can continue to benefit from coordinated investment in shared platforms.

Our strategy update for 2026-2028 responds to these challenges and opportunities, while also reaffirming our commitment to our foundational HISP approach and to our fundamental mission of strengthening information systems in LMICs, particularly for public health. In it, we lay out a vision for what we hope to achieve over these three years, as we continue to work in solidarity with our LMIC partners to ensure that they have robust, sustainable, and adaptable locally-owned information systems that help them achieve their development goals.

## OUR STRATEGY IS STRUCTURED AS ONE CROSS-CUTTING STRATEGIC GOAL SUPPORTED BY FOUR STRATEGIC OBJECTIVES:

### STRATEGIC GOAL

**Strengthen resilient, locally-owned information systems that empower data-driven decision making and meet country needs**

#### PRIORITY SECTORS:

Health System Strengthening, Health Emergency Preparedness, Climate & Health, Logistics, Education

#### KEY OUTCOMES:

Local stakeholders are empowered to use data, leveraging their DHIS2 systems and capacity to advance national priorities, improve public services, and respond to evolving needs.

- Countries demonstrate DHIS2/data use to meet goals in priority sectors
- Increased maturity of national DHIS2 implementations
- Improved capacity of national DHIS2 core teams

### STRATEGIC OBJECTIVES

**1**

**Reinforce and enhance DHIS2 as a durable, adaptable platform underpinning national information systems and enabling innovation across sectors**

**2**

**Fortify the HISP network and local capacity for information system strengthening**

**3**

**Enable effective country use of AI for better decision making**

**4**

**Institutionalize long-term sustainable financing models**



## KEY OUTCOMES

**LMIC governments continue to have access to an advanced platform that serves their needs; DHIS2 functions as a key component of national information infrastructure.**

- Improved functionality to maintain & sustain high quality DHIS2 implementations, including improved performance for large-scale systems
- Better support for interoperability, extensibility, and local innovation, including broader support for data collection extensions & FHIR integration
- Increased support for good systems architecture, bringing together datasets and making data available in a user-friendly way

**HISP groups are trusted local partners supporting sustainable information architectures and technologies and continuous strengthening of LMIC in-country capacity.**

- Mature HISP groups serve as key in-country partners on digital transformation
- HISP groups have strengthened core organisational and administrative skills
- Continental HISP hub model fully operational, increasing resource & innovation sharing
- HISP groups & hubs play a significant role in contributing to global DHIS2 activities
- HISP groups build complementary DPG capacity

**Countries leverage AI/ML in conjunction with DHIS2 to improve local data entry, data management, predictions, triangulation and overall data use**

- Promote ethical AI practices in the HISP network & DHIS2 community
- DHIS2/Chap becomes a leading platform for AI/ML-enabled predictive modeling
- Increased local capacity to implement AI-enabled information system solutions
- Enable the ongoing development of generative AI functionality for DHIS2
- Evaluate AI-enabled solutions for evidence & learning

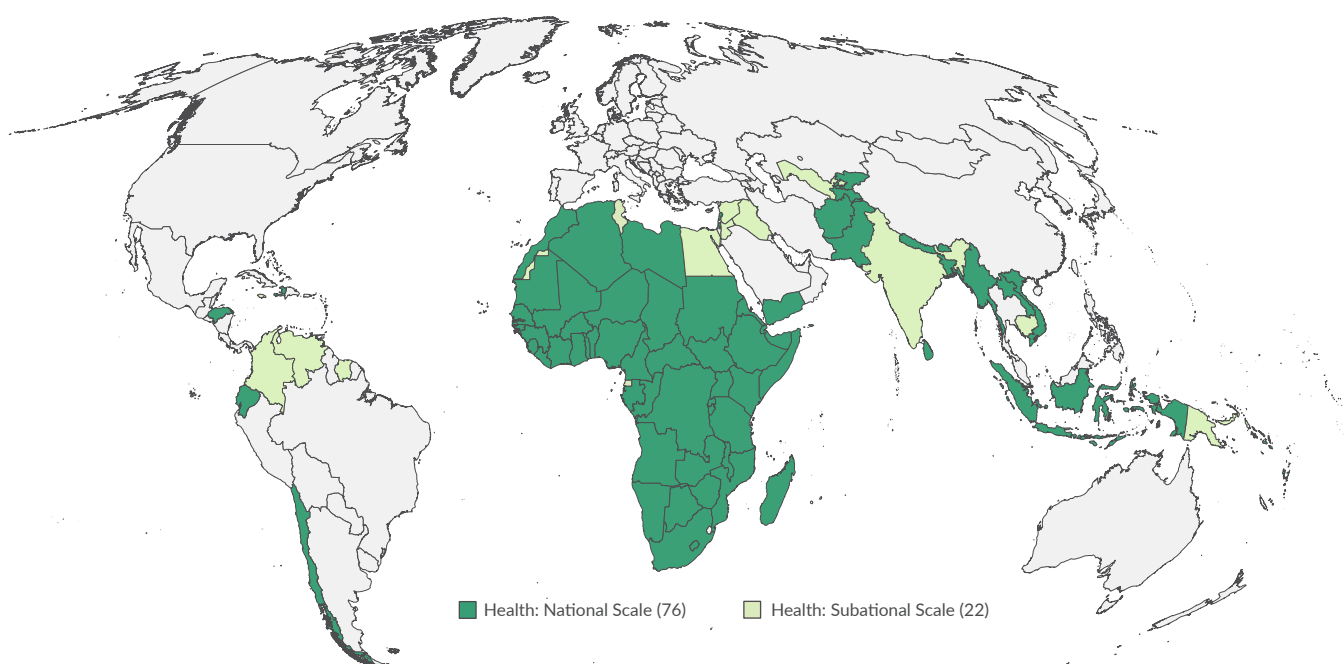
**The DHIS2 platform has a secure financial foundation based on diverse funding streams and partnerships, facilitating sustained DHIS2 systems in LMICs.**

- Introduction of DHIS2 Shared Service Fee in collaboration with partners
- Establish Contributing Partners Network
- HISP network supports other DPGs and complementary technologies
- Improved sustainability of the DHIS2 Online Academy
- Establish revenue generating service offerings from the HISP Centre

# 1.1 INTRODUCTION AND BACKGROUND

## 1.1 Introduction

Since 1994, the HISP Centre at the University of Oslo and the global HISP network have worked with global partners and stakeholders across the Global South on design, implementation, and capacity building for locally owned digital information systems, with an emphasis on health system strengthening in low- and middle-income countries (LMICs). A key component of this work has been the development and governance of the open-source DHIS2 software platform, a digital public good (DPG) that serves as the national system of record for health data in 75+ countries, covering a population of more than 3.2 billion people, making it the largest health management information system in the world. Through this work, we have contributed to the enormous global progress in improving health, strengthening pandemic preparedness, and protecting lives that has been achieved in the last two decades.



The widespread adoption of DHIS2 in the health sector, supported by the work of the HISP network, has helped build informatics capacity in LMICs. This led to increasing interest from countries in further expanding their DHIS2-based health information systems to support additional demands and emerging needs, and in leveraging DHIS2 for digital transformation in other sectors. Since 2019, the HISP Centre and HISP network have worked with local partners to adapt DHIS2 for education data management, and with logistics stakeholders to support last-mile supply chain data needs. With the onset of the Covid pandemic in 2020, HISP helped countries rapidly deploy DHIS2-based solutions for Covid surveillance and vaccination programs, contributing to effective pandemic response in 60+ countries. Our previous 2023-2025 strategy reflected this demand for DHIS2 as a cross-sector digital tool and the deepening use of DHIS2 as a critical component of national digital infrastructure in the public sector.

Much has changed since we published our last strategic update. Climate change has become one of the leading concerns in public health, inspiring the Wellcome Trust to invest in a groundbreaking DHIS2 for Climate & Health project that has already produced innovative solutions such as the DHIS2 Climate App and the Chap Modeling Platform to help countries identify and respond to climate-sensitive health risks. Chap represents the HISP Centre's first concerted effort with Artificial Intelligence (AI), an area that has rapidly come to dominate discussions on information technology, and which provides countless opportunities for enhancing DHIS2 systems that HISP groups and others in the global DHIS2 community have already begun



to explore. Finally, the post-pandemic years have seen a dramatic shift in the global health and development financing landscape, characterized by a sharp decrease in funding both for country-level programs and global digital public goods like DHIS2, and a growing emphasis on national agency and responsibility for health funding in LMICs.

Trend		Challenge		Opportunity
Climate Change	→	Changing risks to human health	→	Leverage DHIS2 systems and HISP network to aid response and LMIC climate resilience
AI & Emerging Technology	→	Increasing expectations for information systems	→	Strengthen DHIS2 and HISP network to support cutting-edge technology and interoperability
Funding Landscape	→	Decreasing global financing	→	Develop diversified funding model aligned with movement toward country ownership

The new HISP Centre Strategy for 2026-28 responds to these emerging trends, challenges and opportunities, while emphasizing our long-term focus on foundational country system strengthening. It charts a course for DHIS2 as a robust, cost-effective, and sustainable platform that will continue to adapt to meet future country needs, while reinforcing HISP's position as a leader in the global DPG ecosystem and digitalization field and strengthening the resilience of the global DHIS2 community.

## 1.2 HISP Vision and Mission

The HISP Centre's strategy is aligned with our longstanding vision and mission, which reflect our core values and commitment to collaboration with country-level partners to address local needs, and which have guided HISP's work since the beginning.

### VISION

**Low- and middle-income countries and country-level stakeholders have strong, sustainable information systems and architectures that support the achievement of national development goals.**

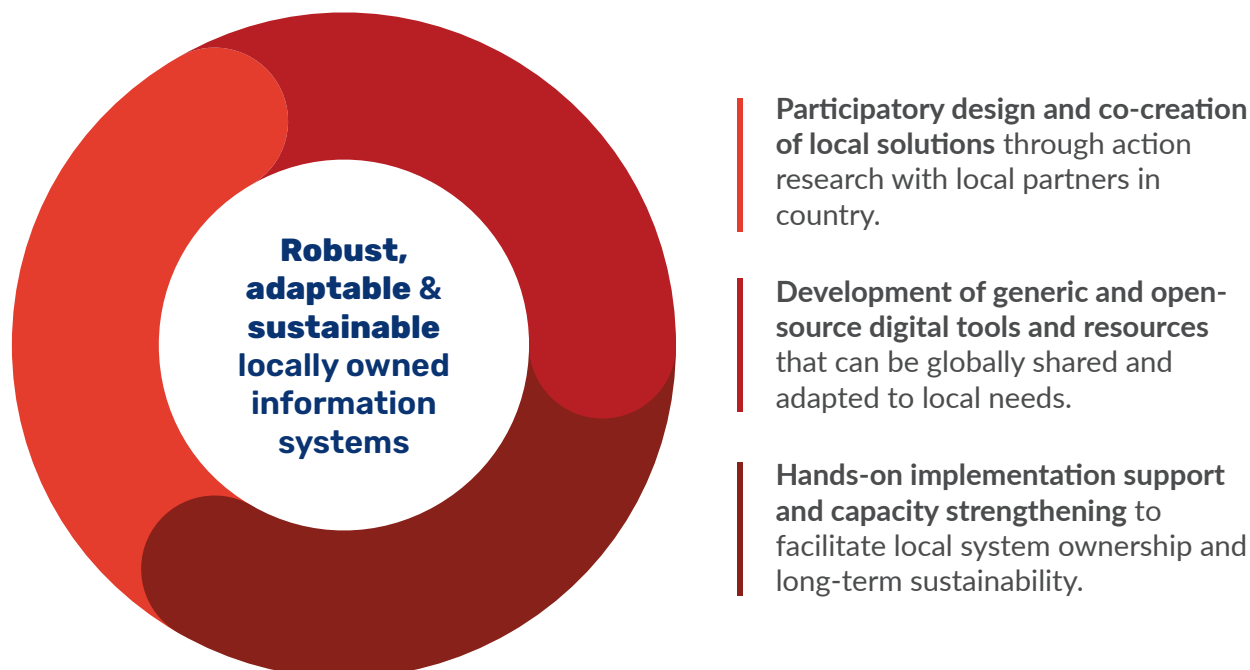
### MISSION

**Work in solidarity with countries to strengthen sustainable, locally governed information systems and digital infrastructure, empowering the public sector to make data-driven decisions that improve people's lives.**

### 1.3 Strategic Approach: The HISP Model

The HISP model is central to our way of working, and describes our overall strategic approach to digital transformation and information system design. The HISP model is based on three pillars that enable and contribute to each other:

#### THE HISP MODEL



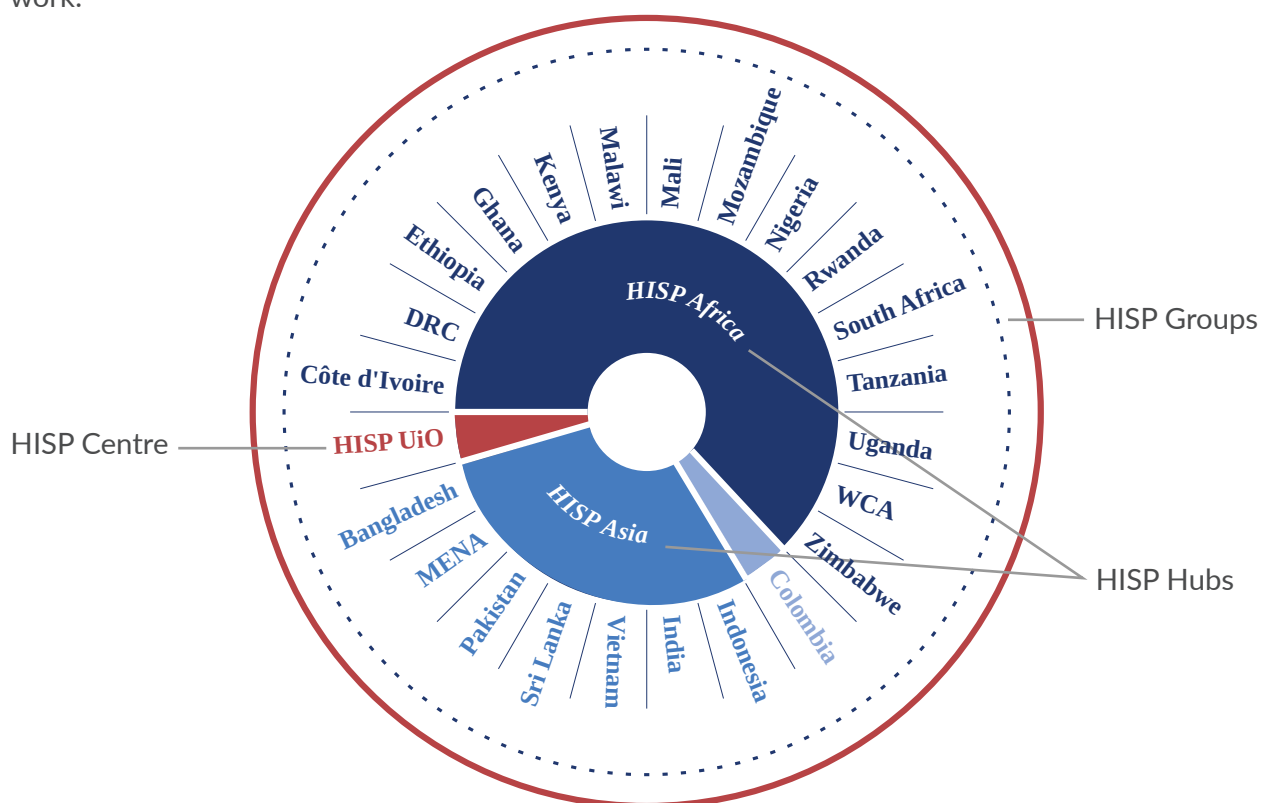
This approach—in which knowledge and solutions are generated, applied, and shared in iterative cycles—has been fundamental to the success and impact of HISP and DHIS2. By co-designing locally relevant and globally adaptable software tools and engaging in hands-on, long-term partnerships in country that facilitate local ownership and innovation, we have ensured that LMIC governments and stakeholders have access to robust and sustainable digital tools that provide data for effective decision making, and that they can build on to respond to the needs of the future.

This time-tested HISP model remains our foundational approach in our new strategic period, where its application to cutting-edge AI technologies and the interdisciplinary Climate & Health domain will help generate innovative solutions with our LMIC partners in these areas, while ensuring that the software and resources we produce remain grounded in real local needs and oriented toward local ownership.

### 1.4 The HISP Network: Local Collaboration at Global Scale

While the HISP Centre is located in Oslo, Norway, the focus of our work is in LMICs. Our collaboration with national and regional stakeholders in the Global South is carried out through a network of 24 local HISP groups based in Africa, Asia, the Middle East, and the Americas, known collectively as the HISP network. This network has grown organically over the past 30 years, driven both by the HISP PhD program (most HISP group leaders did PhD research at the HISP Centre) and local interest in adopting DHIS2, and is governed by a memorandum of understanding between each HISP group and the HISP Centre. This network is essential to delivering on our mission, as it ensures the continued relevance of our software tools and resources by connecting them with country needs, and supports their sustainability in country through long-term, local partnerships and capacity building.

The HISP network has a three-tiered organizational structure to facilitate our global and local work:



**HISP Groups (local):** HISP groups work on-the-ground with governmental partners and other organizations to support design, implementation, and capacity building for information systems and digital transformation projects. This includes the country where the group is based and other countries in their region and/or language community. They operate as independent entities, while also collaborating with the other groups in the HISP network.

**HISP Hubs (regional):** HISP hubs in Africa and Asia coordinate multi-country, regional, and continental projects, subcontracting with HISP groups across the region to draw on their resources and expertise.

**HISP Centre (global):** The HISP Centre is an interdisciplinary research centre at the University of Oslo. As coordinating body for the global HISP network, the HISP centre leads global initiatives and can coordinate country-level and regional projects through subcontracts with HISP hubs and HISP groups. The HISP Centre is the steward of the DHIS2 platform, and is responsible for the development and maintenance of the DHIS2 software and global resources, offers advanced DHIS2 support, and facilitates the global DHIS2 community of practice.

This document outlines the global strategy from the perspective of the HISP Centre. It informs the strategic direction of the HISP network in general, given the HISP Centre's role as a coordinating body of the network, while HISP hubs and HISP groups develop their own strategies at the regional and local levels. For more information on the HISP network, see Annex 1.

## 1.5 Value Proposition: Advantages of HISP and DHIS2

DHIS2 currently enjoys a leading position within digital health as the world's largest health management information system (HMIS), with established local policy support, infrastructure, and capacity in 75+ LMICs, many of which have been using DHIS2 as a fundamental component of their national information architecture for more than 10 years. This has contributed to concrete results ranging from increased vaccination rates; better detection and treatment of

diseases like malaria, tuberculosis and HIV; more rapid and effective response to outbreaks of diseases like Ebola, Marburg virus, and Mpox; improved nutrition outcomes; and reductions in student dropouts, among many others. The in-country presence of the HISP network has been essential to achieving this global footprint and impact.

Together, HISP and DHIS2 present countries and investors with a unique value proposition: the opportunity to build on what works. They can enhance and expand existing DHIS2 systems to support digitalization projects both within the health system and in other sectors—taking advantage of existing infrastructure and local technical capacity—to rapidly scale up digital solutions, with significant money and time savings compared to implementing new software systems. They can also leverage the HISP groups as local, trusted partners for digital transformation, training, and technical support.

We offer cost-effective solutions that put local needs first and support long-term sustainability, integration, and adaptability, instead of the siloed data and systems—and reliance on international consultants—that have long plagued digital development projects. This has been demonstrated by our work in the education sector, where DHIS2 for Education has gone from its beginnings in 2019 as a small research project to become the fastest growing education management information system (EMIS) in Africa, thanks to the ability to build on existing DHIS2 capacity and close HISP collaboration.

As the steward of one the most successful and widely adopted DPGs in DHIS2, and the developer of innovative new open-source solutions like the Chap Modeling Platform, the HISP Centre also offers partners a compelling form of return on investment: Updates and enhancements to the core DHIS2 platform and global resources and tools can be quickly shared through the HISP network and global DHIS2 community (with members from more than 160 countries), strengthening information systems around the world at a fraction of the cost of developing and implementing custom solutions per country.

### HISP & DHIS2 Advantages

- **Demonstrated ability to implement at scale** from the facility to the national level, in more than 75 countries.
- **Established long-term relationships** with Ministries of Health and other local, regional & global stakeholders.
- **Successful capacity building for local ownership**, with tens of thousands trained on DHIS2 configuration and use.
- **Cost-effective, sustainable solutions** that build on existing technology and local capacity and support interoperability.
- **Local co-creation and global sharing** of innovations and knowledge lowers development costs and reduces duplication of effort.
- **In-country footprint and worldwide reach**, with local HISP groups on the ground in Africa, Asia, the Middle East, Europe, and the Americas.

## 1.6 Situational Context: Financial Threats

Following a peak during the Covid-19 pandemic, when 60+ countries rapidly adapted their existing DHIS2 to help manage their Covid surveillance and/or vaccination programs—thanks in part to emergency funding from Gavi, the Global Fund, and Norad—funding for the HISP Centre began to decline in late 2024, leading us to reduce core staff by 15%. This is similar to the situation that many global health organizations and DPG stewards faced following the pandemic, and it has now been compounded by a general reduction in global health financing and official development assistance (ODA), including the sudden cut in US Government funding in early 2025. These reductions have already affected information systems at the country level, and put the long-term stability of these systems—and the core DHIS2 platform and HISP network—at risk.

We are now facing a challenging position in which we must navigate a smaller and more competitive funding landscape at the same time as country interest in DHIS2 adoption, local need for improved functionalities and performance, and digital security threats continue to increase, placing an ever-increasing burden on the staff at the HISP Centre and our HISP group partners. We believe that the strong, ongoing demand for DHIS2 and related services among LMICs and international organizations, our established network and partnerships, our leading position within the DPG community, and the work we began in 2024 on diversifying our funding models provide us with several potential pathways for navigating this new landscape and emerging as a stronger organization.<sup>1</sup>

We also recognize that many LMICs—as well as regional and global partners—see the global development funding crisis as an opportunity to accelerate the shift toward country-led financing and increased national agency and health system sovereignty outlined in [the Lusaka Agenda](#). We are committed to working with these partners in navigating this transition in a way that preserves the information system strengthening gains of the past decades and supports further development in a sustainable way. Both DHIS2 and HISP have key roles to play to help achieve this vision.

## 1.7 Technical Context: Evolving Technology & Changing Demands

The digital development and global health security ecosystems are also undergoing profound changes. There is an increasing emphasis on information system architecture that prioritizes scalability, interoperability, and sustainability. Countries are increasingly designing systems that can be reused, integrated, and extended across sectors. The rise of digital public infrastructure (DPI) exemplifies this shift, with its emphasis on foundational digital systems such as registries, identity platforms, payment systems, and data exchanges that enable public and private services at scale. Governments are increasingly adopting DPI frameworks to structure their national digital transformation strategies, and international actors view DPI as a key lever for sustainable development. However, this trend exists in tension with the continued appeal of proprietary software and bespoke solutions. As national digital health systems mature and demands for data and sophisticated tools continue to grow, more complex and specialized systems are adopted to cover some of the areas DHIS2 has traditionally supported. This has the potential to either reinforce a DPI approach or undermine it, leading to either greater system integration and effectiveness or greater fragmentation and unsustainability.

Rapid advances in AI are also bringing a range of new opportunities for data use and decision support, but also ethical risks that have sparked urgent debates around regulation, responsible

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<sup>1</sup> An informal survey conducted by the HISP Centre in Q1 2025 to document system status per country found that “while many project-funded or program-focused systems have been shut down, and while we have identified some disruptions in individual DHIS2 systems due to partial reliance on U.S. funding or seconded personnel, the trend we are seeing is that all national HIS systems remain online, supported by local staff, and that routine data collection and analysis continue, though with some disruptions and impending gaps depending on the local funding and staffing structures.” (<https://dhis2.org/invest-in-routine-systems/>)

AI, and ownership of models and data. This includes the use of generative AI for data acquisition, knowledge summarisation, end-user interaction, and more, as well as powerful machine-learning approaches for predictive modelling and decision-support across health, education, climate and logistics.

HISP is well positioned to respond to these challenges and opportunities. Through more than three decades of application of the HISP approach, DHIS2 and its extended technology suite have evolved as a modular, interoperable, and sustainable platform that is already recognized as a DPI “building block.”<sup>2</sup> Our ongoing work with the Chap Modeling Platform for machine-learning-enabled climate and health forecasting, and innovative AI applications developed by HISP groups have laid the groundwork for HISP to provide country partners with open, ethical, and locally-owned AI tools as well as capacity building on modeling and AI use. Finally, our status as a trusted, long-term partner in the health and development space—from the global to the country level—as well as in the DPG ecosystem and Information Systems communities, enables us to be a leading voice in discussions on how our communities can best adapt to this evolving context.

## 2. ENGAGING WITH OUR STRATEGY

### 2.1 Strategy Development

The HISP Centre developed this 2026-2028 strategy in collaboration with Vital Wave, Inc. This document has been shaped through a collaborative process with HISP group and HISP hub representatives, donors, and DPG partners. This process reflects the centrality of collaboration to the HISP approach, particularly the inclusion of perspectives from the Global South, and reflects our desire to create a strategy that reflects on and responds to global trends, priorities, and challenges.

### 2.2 Lessons Learned from our Previous Strategy

The 2026-28 strategy builds on lessons learned through the last three-year strategy. We retained the positive aspects of strategy development process and document structure from the 2023-2025 strategy, namely the inclusive involvement of stakeholders from across the HISP network and DHIS2 ecosystem, and the emphasis on contextualizing our short-term strategic goals within our long-term vision and approach. Our previous strategy was an effective resource for conveying our background and holistic way of working in detail. The way in which it mapped out cross-cutting activities and goals between different parts of our organization supported our creation of a new initiative-based model of working that has helped improve the linkage between the DHIS2 software development roadmap, the HISP strategy, and our in-country action research and implementation work. However, its complexity and broad scope made it difficult to operationalize and to quantify within a reporting framework. In response, our new strategy is written to be more concise, targeted, and actionable, to better communicate our highest priorities and goals within this strategic period to internal and external stakeholders, and to facilitate internal work planning and organizational structure as well as monitoring and evaluation of our results, without overwhelming the reader with detailed lists of proposed activities.

Our new strategy also reflects a shift from the previous period from exploration to one of prioritization. While the 2023-2025 strategy embraced the opportunities of DHIS2 as a cross-

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<sup>2</sup> GovStack has designated DHIS2 as *Building Block Software* in the *Digital Registries* category. This means that it meets GovStack’s functional and technical requirements for storing, managing and sharing structured data that is critical to government services, such as health records, education data, and administrative registries. See longer overview in: *DHIS2 News: DHIS2 is now listed on GovStack’s online GovMarket.*



sector platform broadly, our new strategy focuses more narrowly on the sectors in which we have had clear success, and in which we see the largest opportunities. Our intent is to show what we aim to achieve in these sectors and orient our strategic planning more clearly around them, while also remaining open to new opportunities that may arise where we can successfully leverage our technology and approach.

## 2.3 How to Read this Document

The purpose of this document is two-pronged: 1) to galvanize orchestrated efforts within the HISP Centre and the extended HISP ecosystem and 2) to share with the donor community what exactly its future contributions will support.

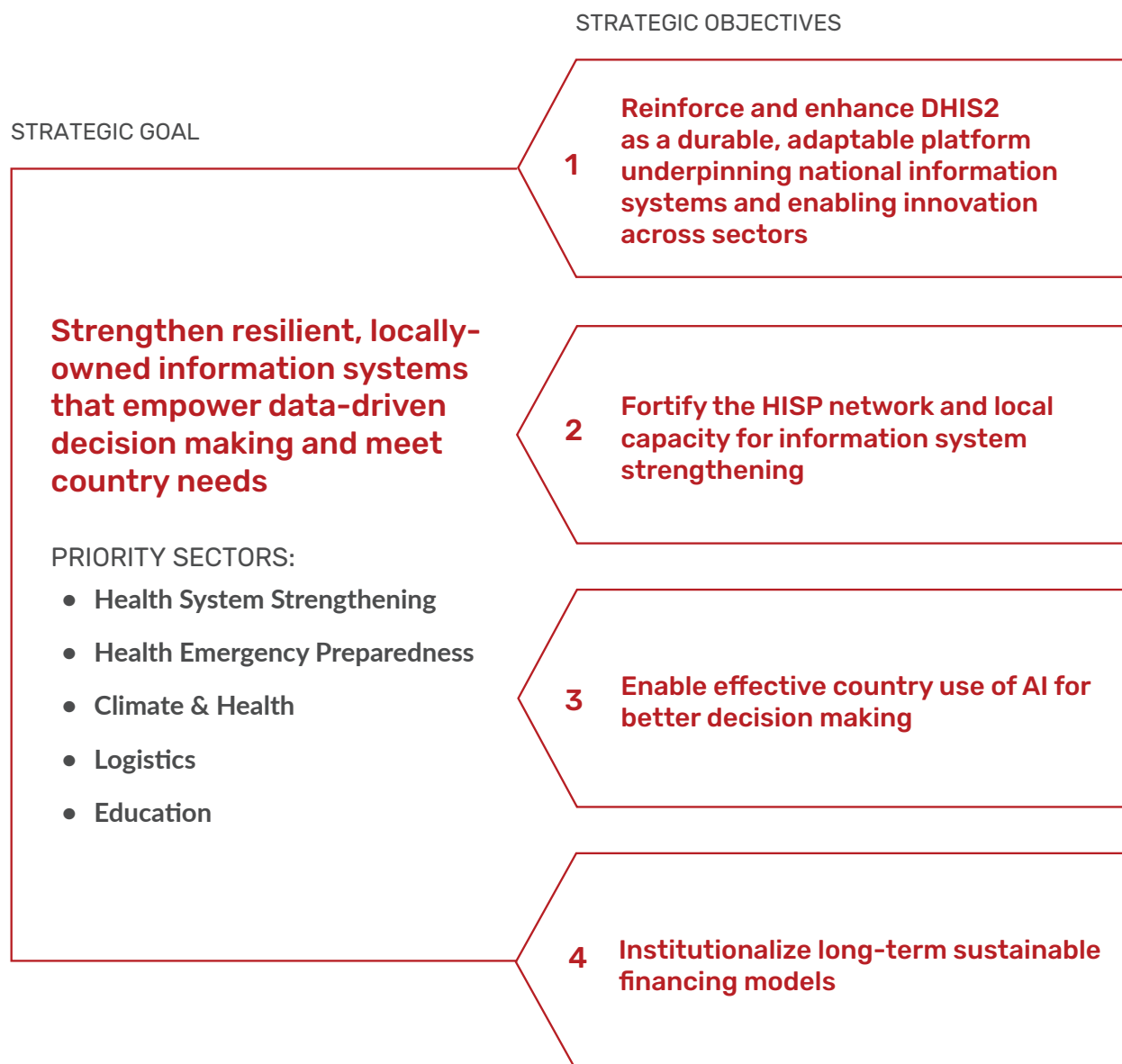
Section 3 presents a strategic framework featuring one overarching strategic goal supported by four strategic objectives. These are described in detail in subsections that include the following parts:

- **Key Outcomes:** What we aim to achieve by the end of this strategic period.
- **Description:** A concise explanation of the specific strategic goal/objective.
- **Current Status and Rationale:** What we have achieved so far in this area, the current context, and why it is significant for our strategy.
- **Approaches and Illustrative Activities:** What we will do to operationalize the goal/objective, including a non-exhaustive list of actions we intend to take.
- **Strategic Approaches to Priority Sectors (Section 3.1 only):** Describes what we are trying to achieve within these sectors in relation to our overarching strategic goal.

Finally, in Section 4, we present a high-level overview of how we plan to operationalize, monitor, and evaluate this strategy in the course of the three year period that it covers.

### 3. STRATEGIC FRAMEWORK

In recognition of the centrality of information system strengthening to our mission and vision, we have developed a strategic framework that emphasizes this as our central and ongoing strategic goal. This is supported by a set of focused strategic objectives that address current challenges and opportunities.



The structured pursuit of our strategic objective and goals will be carried out through the HISP model as described in Section 1.3 above. The subsections that follow will thus focus on aspects that are specific to each goal/objective, but will not restate the fundamental aspects of this strategic approach.

It is also important to note that our strategic goal/objectives are not sector-specific, but reflect our strategic thinking across our priority sectors: health, climate & health, education, logistics, agriculture and the DPG/DPI ecosystem. However, we also recognize that each of these sectors has its own specific contextual factors and technological demands and challenges that must be addressed in order for our approach to succeed. A brief overview of our strategic thinking on these sectors is included in Section 3.1. More information on our sector-specific strategies can be found in Annex 2.

### 3.1 Strategic Goal: Strengthen resilient, locally-owned information systems that empower data-driven decision making and meet country needs

#### Key Outcomes:

Local decision makers are empowered to use data, leveraging mature DHIS2 implementations and local capacity to advance national priorities, improve public services, and respond to evolving needs.

- Countries demonstrate and share the impact of local and subnational use of data and DHIS2 to meet key outcomes in the sectors we work in
- Increased maturity of national DHIS2 implementations, measured and supported by ongoing use of the DHIS2 Maturity Profile
- An increasing number of countries have improved capacity in their national DHIS2 core team (e.g., 'core positions' filled) to provide sustained support for the system

#### Domain specific goals:

- **Health System Strengthening:** Mature, country-led DHIS2 systems are incorporated into national information architecture and used to strengthen primary health care delivery and monitor progress toward universal health coverage
- **Health Emergency Preparedness, Response & Resilience:** DHIS2 as a national surveillance platform is leveraged to detect and respond to current and emerging disease outbreaks in an increasing number of countries; and proven versatile for detecting & responding to a diverse set of public health threats
- **Climate & Health:** DHIS2 implemented at scale and operationalized to support climate-informed decision making by the health sector in 6 countries
- **Logistics:** Countries have access to facility-level stock data and improve sub-national logistics management with DHIS2 as an interoperable, last-mile logistics data solution that is tightly linked with upstream LMIS systems
- **Education:** New countries achieve national scale with DHIS2 as an education management information system and demonstrate effective use for improving education system and student-level outcomes

#### Description:

Our overarching goal is to empower governments to use data and digital infrastructure to improve access and delivery of public services. Institutionalization of information systems and embedding routine data use into daily management practices requires a long-term vision, one that extends and sustains the value of these systems beyond short-term projects. We support this through collaborative design and implementation of interoperable, flexible, locally owned software solutions. Success will be determined by whether these information systems demonstrably help with real-world decision making.

**Health System Strengthening (HSS)** remains a primary area of focus where DHIS2 is already widely adopted and must continue to meet foundational country needs driven by local voices, while remaining relevant with global trends and evolving financial and technology landscapes. HSS focuses on improving health infrastructure, information systems, and service delivery to increase efficiency and resilience in national health systems; and is key to the Lusaka Agenda. HISP UiO is a WHO Collaborating Centre for innovation and implementation research in health information systems strengthening. We will leverage our WHO partnership, including close engagements with regional and country offices, to continue the development of joint technical products and country capacity building to increase uptake of data standards in national DHIS2 systems and improve data analysis and use. With strong support from traditional funders like the

Global Fund, Gavi, and Norad, DHIS2 serves as the backbone of routine health data systems in 75 countries and is broadly used for annual planning, resource allocation, operational decision-making at district and facility levels and individual-level registries that support continuity of care. Its modular architecture and flexible deployment has resulted in a much more diversified deployment of DHIS2 to serve various parts of health information management needs, from routine health facility and community data reporting to national-scale electronic registries and frontline healthcare worker solutions that function offline. As national health information architectures become more complex and the introduction of commercial and non-commercial EMRs continues to expand to hospitals in LMICs, there is an emerging gap in the information system landscape at primary health care centers. As an interoperable platform that is also capable of supporting longitudinal health records through tracker programs, we continue to see a critical space for DHIS2 to consolidate data sources for decision making and leave no primary health care delivery points behind during the scaling up of facility-based EMRs. We also seek to strengthen integration and data exchange with complementary digital health components.

The DHIS2 footprint in the global health space also encompasses **Health Emergency Preparedness & Response**, leaning into lessons learned from COVID-19 and the recommendations from WHO as part of its HEPR framework for resilient health systems. This work will see the HISP network continue to strengthen capacity for DHIS2 among national institutes of public health, alongside MoH counterparts; and increase country capacity to detect, notify and respond to infectious disease outbreaks following the 7-1-7 framework, helping enable detection of outbreaks with epidemic potential within seven days of their emergence. There is a clear need for outbreak response tools and reusable digital infrastructure for health emergencies in LMICs and high-income communities to support global health security. Strengthened collaborations with global and regional public health institutions such as the Pan American Health Organization (PAHO), Caribbean Public Health Agency (CARPHA), and the West African Health Organization (WAHO) will be key to advancing the global health security agenda. Through a new (2025) Norwegian-wide MOU, HISP will partner with Africa CDC in support of Africa's Health Security and Sovereignty (AHSS) Agenda, providing capacity building for strengthened national and continental surveillance systems and improving real-time information to detect and respond to disease outbreaks and health emergencies, including climate-related health risks.

The need for resilient health systems extends to our work in the **Climate and Health** space, where countries are implementing national adaptation plans and developing capacity within the health sector for climate resilience in the face of extreme weather and the impacts of climate change. This emerging domain is a high priority area for HISP to demonstrate effective use of DHIS2 with integrated climate data and the Chap Modeling Platform within operational country systems; and document the entry points for climate-informed health information systems that countries can institutionalize as part of national health adaptation plans. These efforts include a concerted focus on early warning systems for climate sensitive diseases and mitigating health impacts from extreme weather. The Wellcome Trust has provided seed funding for HISP to develop tools and approaches to respond to climate and health; and our focus for the strategic period will be to galvanize additional support for DHIS2 and climate and health data integration from in-country funding sources and reaching new core DHIS2 investors.

**Logistics** information systems are equally crucial for the health sector to achieve universal health coverage and access to essential medicines. With existing national DHIS2 deployments extending to the health facility level where users are trained and equipped to report health services, we can also help to close the visibility gap in "last mile" stock data. DHIS2 supports digitization of facility-level logistics tracking and inventory management, offering value through integration upstream and central level eLMIS. It is complementary to an eLMIS and warehousing-based information systems by extending data capture and analysis to the point of service delivery. Particularly now as externally funded, enterprise level eLMIS are collapsing in many countries due to withdrawal of funding support and eLMIS systems like Medexis and OpenLMIS are disappearing from the global goods landscape, there is a critical need to sustain last-mile visibility

of life-saving commodities data. However, we still lack core DHIS2 investment for supporting last-mile logistics functions, triangulation with health service delivery data, and improving end user functions for facility-level users in hard-to-reach areas with poor infrastructure and connectivity. Given the outsized cost of commodities in health program budgets and the enormous potential to avoid wastage and stock losses, the investment case for DHIS2 logistics support will be bolstered with country evidence about cost effectiveness and the importance of this data for ensuring universal access to essential medicines in LMICs.

**Education** management information systems (EMIS) enable Ministries of Education to monitor schools, students, staff, and learning outcomes. There is growing demand for this capability across LMICs driven in part by SDG 4 and national education equity priorities. However, many systems remain fragmented and lack comprehensive national coverage. DHIS2 for Education has already been adapted for use by district education offices and school administrators in 13 countries. No other existing EMIS tools offer the same combination of scalability, flexibility, and sustained local capacity development through the HISP Network. These tools will continue to be adapted and localized to meet core stakeholder needs in school monitoring, staffing, and student data management. We will continue to strengthen interoperability and integration with incumbent tools like StatEduc2, which provides a trusted entry point for DHIS2 as a more mature and dynamic EMIS. We will further leverage the proven strengths of DHIS2 in routine data management at scale, while fostering a growing community of education information systems experts that draws on HISP's long-standing experience in local capacity building across sectors. Over the next three years, we anticipate that DHIS2 for Education will continue to expand its footprint, with a focus on countries where health and education services intersect and existing capacity can be leveraged to maximize impact.

**Expansion into non-health sectors** such as agriculture will be based on country demand, suitability of DHIS2 and the HISP-supported suite of tools for the domain's needs and availability of funding to support DHIS2 core and its implementation in countries. Pathfinding countries like Malawi that have introduced DHIS2 as a national agricultural management information system (NAMIS) and Ethiopia as a cross-sectoral nutrition platform will serve as exemplars for other countries and inform what are the needs in this sector that DHIS2 and HISP are positioned to meet. Our work in these domains is grounded in organically grown partnerships, such as with the Food & Agricultural Organization (FAO) which may become formalized over the course of the strategic period. The agriculture and nutrition sectors require further scoping to define concrete use cases and entry points supported by key sectoral investment, with potential three-year development focusing on pilot implementations where health, climate, and agriculture intersect.

### **Current Status and Rationale:**

The HISP approach works in solidarity with countries, promoting and facilitating local ownership, autonomy and governance from the very beginning. Our approach is unique in that we work with local partners to build capacity first, and support them to design their own information systems within local infrastructure and under local governance structures; rather than "handing over" pre-built systems to MoH to support time-bound projects. As reliance on external funding decreases in LMICs, governments must mobilize domestic financing for the sustainability of these systems. Already in the health sector, DHIS2 has achieved national scale and institutionalization as part of national health information architecture by Ministries of Health in 75 countries—and many have sustained these systems at scale for more than a decade. Countries must ensure that their information systems continue functioning and supporting ongoing decision-making beyond the lifespan of individual funding cycles. The HISP network now comprises 24 local HISP groups supporting 89 countries, who are actively creating pipelines for informatics workforce development through partnerships with local universities and integrating DHIS2 into national training curricula. We have successfully applied lessons learned from more than 30 years of work in health information system strengthening to other sectors, including the introduction of DHIS2 as a national education information management system (EMIS) in 13 countries. Combined with emerging DPI approaches and

successful examples of DHIS2 being used as a platform for cross-sectoral collaboration and data sharing, we are confident that DHIS2 has a continued role to play in national information system architecture.

### Approaches and Illustrative Activities:

Our strategic goal will be achieved by bolstering the key components of the HISP model (as outlined in Section 1.3), with a targeted focus on supporting institutionalization of data use into routine government operations and achieving outcomes in countries. This approach combines:

- Action research & participatory design: Sustainable digital transformation is made possible only through close engagement and participatory design with end users and system owners. As facilitators of a global network of expertise and owners of one of the largest open-source software platforms for health in the world, HISP Centre recognizes both the opportunities and challenges in sharing solutions broadly for local adaptation and re-use. We will continue to use an action research approach to solve real-world problems at the local level through local innovations, with local expertise and capacity, while drawing on the DHIS2 platform and the body of knowledge, solutions, and best practices shared through the global DHIS2 community of practice.
- Local ownership & capacity strengthening: Local capacity strengthening stands at the core of what we do and the bedrock of sustainable information systems that empower local data use. The HISP network remains committed to helping governments become capable owners and managers of their own national systems by building local expertise and embedding data use into routine government operations. Local ownership is central to these efforts, empowering system owners, users and beneficiaries to shape DHIS2 over time to meet evolving needs.
- Open source & innovation sharing: We will continue to maintain and develop the DHIS2 platform—as well as new components of the DHIS2 ecosystem such as the Chap Modeling Platform—as a free and open-source digital public goods that can be fully owned, deployed and adapted by local system owners in LMICs to meet their needs in different sectors. We will also continue to support channels for sharing of local innovations, such as custom DHIS2 applications, configurations, and predictive models, with the global DHIS2 community to facilitate their adaptation and reuse in different countries and contexts.

Illustrative activities include:

- Engage in action research and participatory design to understand how countries are continuously evolving health information system architecture with DHIS2, EMRs, and other system components to serve the needs of health decision makers; document and share with regional, global and country-to-country mechanisms
- Amplify country experiences and local innovations through DHIS2 that have achieved impact and can be replicated in other countries and contexts through support for the global DHIS2 Community of Practice and our multi-faceted communications channels
- Contribute to national workforce development in informatics and digitalization through the DHIS2 Academy program, partnerships with local universities and access to a robust network of information systems researchers
- Expand the HISP Centre and HISP network capacity to support countries beyond DHIS2 and towards national architecture that recognizes the roles of complementary, interconnected, and interoperable systems.
- Support countries in their digital maturity progression by providing expert advice on how to incrementally and sustainably scale up national digital architecture.
- Continue to develop shared resources such as training material, user guides, additional developer resources on Github, and instructional videos for country stakeholders to use as guides when conducting custom country implementations of DHIS2.



- Invest in the DHIS2 community of practice so that country implementation owners can cultivate peer relationships and engage with support mechanisms.

### **3.2 Strategic Objective 1: Reinforce and enhance DHIS2 as a durable, adaptable platform underpinning national information systems and enabling innovation across sectors**

#### **Key Outcomes:**

Governments in LMICs continue to have access to an advanced, sustainable innovation platform designed around the needs of the public sector, with an emphasis on DHIS2 as a key infrastructural component of national information systems.

- Improved functionality to maintain & sustain high quality DHIS2 implementations (particularly in the core HMIS role), including improved performance for large-scale aggregate and tracker implementations, enhanced metadata management and integrity, and data model updates to support key sectors.
- Better support for interoperability, extensibility, and local innovation, including broader support for data collection extensions and standards-based integration of data from external individual-level data systems using FHIR.
- Increased support for good systems architecture, bringing together datasets and making data available in a user-friendly way, including integrated tracker-to-aggregate within DHIS2, better support for visualization and access to data.

#### **Description:**

This objective reinforces the DHIS2 platform's ability to provide countries with a resilient, adaptable, scalable, and secure architecture facilitating data use for decision making in the public sector. Interoperability with other tools will be a key focus, with improved guidance and tooling for enterprise architectural approaches alongside a wide array of complementary technologies. Resources will be invested to improve the platform while addressing technical debt and optimizing the system for current and future capabilities. The software roadmap and internal initiatives through 2028 will be based on this objective, with routine monitoring of progress. This focus on platform improvement has a particular emphasis on ensuring that DHIS2 continues to support its foundational role as a national-scale, aggregate data platform, such as an HMIS in the health context, while also responding to increasing data and technology demands. We will work to improve DHIS2's technical capabilities for individual-level (tracker) data to support applications across sectors including health, logistics in health, education, climate, and agriculture, with more potential use cases to be determined based on country needs. We will also accelerate efforts to integrate AI into DHIS2 to further enable adoption of predictive analytics, AI-assisted decision making, and AI-powered efficiency improvements across sectors, as described in more detail in Strategic Objective 3.

Through collaborative software development, platform-to-platform partnering, participatory design, and action research, we will enable local innovation and make DHIS2 a platform where partners, HISP group and third-party developers, and government stakeholders can co-create solutions tailored to their context. New contributions will be encouraged through clear governance processes, shared development infrastructure, and transparent prioritization mechanisms. We will leverage the HISP network's unique structure, and the global DHIS2 developer community, to promote feature development and integration with other technologies that benefit multiple sectors and country archetypes, with a focus on reusability and sustainability. Our focus on partnering with other platforms and technologies (such as through continuation of our working partnerships with MOSIP, ESRI/ArcGIS, and mSupply) will help provide countries with more integrated and comprehensive systems that can be more easily adopted and maintained in national architectures

As a result of this work, DHIS2 will not only remain the system of record for national health and education data but will grow as an innovation platform that helps countries respond to emerging challenges, maintain resilient systems, and reinforce their digital sovereignty.

### **Current Status and Rationale:**

The availability and reliability of the DHIS2 platform provides current and future country users with stability and continuity in their investments and national information architectures. Government implementations of DHIS2 have evolved from single HMIS databases to complex environments supporting multiple instances within a single ministry, and cross cutting data analytics between departments. Comparable data evolutions are now expected for DHIS2 for education deployments, and similar data management challenges apply when forecasting climate-sensitive disease behavior.

As governments face heightened responsibility for owning and maintaining digital systems amid uncertain funding and regulatory shifts, DHIS2 must continue to serve as a trusted, adaptable platform that supports locally owned information systems across sectors. We will strengthen the platform's core architecture to support evolving country needs and enable integration with other systems, DPGs, and as a component of DPI. Efforts will focus on ensuring DHIS2's readiness to support complex, multi-sectoral systems, especially as countries adopt national approaches to digital transformation that require data integration from many sources.

Continued improvement of DHIS2's performance is critical, along with increased capacity for scale, security assurance, and integration with other tools. Improved performance means faster response and lower latency when accessing data. Introducing AI and machine-learning to speed up internal functioning is necessary for DHIS2 to stay competitive and build sustainably on the decades of donor and country investments made thus far.

### **Approaches and Illustrative Activities:**

The HISP Centre will expand platform capabilities for extensibility and local innovation. DHIS2's interoperability capacity will be expanded further through both additional incorporation of standards and direct platform to platform collaboration. The HISP Centre will improve platform performance, including updates to further enable customization. As further discussed in Objective 3, DHIS2 will build on Chap's capabilities for AI-enabled analytics and forecasting.

Illustrative activities include:

- Security:
  - Documented compliance with security and interoperability requirements such as ASVS and (M)ASVS level 1 by the end of 2026.
  - Routine use of enhanced automated penetration testing
  - Implementation of CSRF prevention strategy
  - Android two-factor authentication
- Interoperability:
  - Establishment of platform-to-platform partnership approach, with corresponding development activities (e.g. MOSIP, OpenCRVS; OpenFN)
  - Improved tools to support integration, responding to identified need and limitations
  - Creating additional DHIS2 FHIR profiles, Questionnaires and Implementation Guides
  - Continued support of WHO DAK toolkits as they are published
  - Significant uptake of extensibility and interoperability tooling by external partners
- Performance:
  - Implement dedicated backend databases for analytics
  - Infrastructure to measure and compare performance between DHIS2 versions

- Initiative to improve tracker-to-aggregate exchange and analytics
- Usability:
  - New maintenance app added to continuous release with improved performance, usability and reinforcement of data- and metadata management best practices
  - Ensure that most problems in metadata are detectable with integrity checks, with corresponding tools to correct these problems through the UI, API or scripting
  - Enable most tracker-to-aggregate use cases to be set up without the use of scripts or code and to be maintained through the user interface
  - New application with improved user experience for integrated and simplified individual data analysis
  - Initiative to enhance the usability of maps by harmonizing with other analytics applications, layer configurations, data selectors, improving legends, etc.
- Innovation & Extensibility:
  - Improvements and extensions to CHAP as the modeling platform for DHIS2
  - Leveraging and supporting externally developed generative AI tooling
  - Extension points for bulk data entry and for custom forms in aggregate data entry
  - Enhancing extensibility tooling and documentation to support external development

### **3.3 Strategic Objective 2: Fortify the HISP network and local capacity for information system strengthening**

#### **Key Outcomes:**

HISP groups perform as trusted innovation partners locally, and increasingly provide support for digital technologies beyond DHIS2, enabling continuous development of in-country information systems expertise and DHIS2 capacity in LMICs.

- The larger and more experienced HISP groups are positioned as key strategic partners on digital transformation in countries and have a natural seat around the table when key priorities and investments are decided among ministries and partners
  - HISP groups are capacitated and fully engaged in innovations in new and emerging domains, including Climate & Health and AI, to enable them to support local capacity building in these areas (e.g. use of climate services and development of local models)
- HISP groups have strengthened core organisational skills in areas of administration, finance and communication, making them more attractive for partnerships and direct contracting
- The continental HISP hub model is fully operational and enables increased sharing of innovations and resources across HISP groups, bringing the full benefit of the HISP network to countries
  - HISP hubs submit joint proposals featuring coordination between multiple HISP groups
- HISP groups and hubs play a significant role in contributing to the DHIS2 core platform, the DHIS2 Academy program, and information systems research activities, leveraging the true potential of the collaborative network as well as the extensibility of the DHIS2 platform
- HISP groups actively participate in training on complementary DPG solutions, and leverage the DHIS2 Academy model to build country capacity on DPGs beyond DHIS2

#### **Description:**

The ability of local HISP groups to provide high quality information systems support and strengthen national capacity for sustainable ownership and effective use of information systems

is essential to achieving our mission and vision. This is especially true now, as the complexity of national information system architectures increases and the availability of external funding and technical support decreases. Under this objective, we will focus on strengthening the HISP network to empower local HISP groups, continental HISP hubs, and the HISP network as a whole to provide high-quality, cost-effective services across a range of technologies and sectors, and on facilitating increased sharing and reuse of local innovations across the network to hasten the adoption of best practices and strengthen the HISP network's value proposition. Ultimately, this will equip countries to use and adapt their information systems effectively to meet current and emerging local needs.

The HISP Centre will work with the HISP network to strengthen the capacity of HISP groups as digital transformation experts, including with DPGs and digital solutions beyond DHIS2, empowering them to support the design of and implementation of holistic national information system architectures and DPI approaches that support effective data use. This also involves strengthening the position and role of HISP groups as a partner to county governments in developing strategies and plans, promoting long term sustainability and continued investments in routine data systems as a critical backbone of management and decision-making at all levels. This will involve more targeted efforts from the HISP Centre in convening HISP groups and in-country donors and partners, supporting alignment of HIS and DHIS2 investments around country-owned plans.

To strengthen the position of HISP groups as a relevant partner to country governments, the HISP Centre will help to build sector-specific implementation and training capacity across the HISP network to enable HISP groups to better support information systems in our priority sectors, with a particular emphasis on our fastest-growing sectors, climate & health and education, as well as on the Chap Modeling Platform and other AI technologies. This will empower them to build local capacity in specialized areas such as predictive modeling, climate-health data integration and analytics tools, and the use of climate services.

Beyond the technical capacity building, the HISP Centre will continue to support the strengthening governance and organisational aspects of the HISP network. Organisational skills in areas of administration, finance and communication, and business development are critical in making HISP groups attractive for partnerships and direct contracting and to secure a sustainable business. We will work with HISP hubs and HISP groups on HISP network governance to ensure quality control for HISP-provided services, and explore organizational models that encourage greater specialization within and collaboration between HISP groups to improve network efficiency.

### **Current Status & Rationale:**

The growth and evolution of the HISP network have been central to DHIS2's success, with 24 local HISP groups providing hands-on DHIS2 implementation support and strengthening regional, national, and subnational information systems capacity in nearly 90 countries in Africa, Asia, the Middle East, Latin America, and Europe.<sup>3</sup> This has enabled DHIS2's global reach and sustained relevance in diverse country contexts. As the digital landscape in LMICs continues to evolve, governments are demanding more integrated, robust, and sustainable information systems—systems that they can maintain locally and operate cost-effectively, that leverage interoperability frameworks and standards to connect different systems and data sources, and that take advantage of cutting-edge technologies like AI.

At the same time, the rapid expansion of the HISP network—from 15 HISP groups in 2020 to 24 in 2025—has strained our traditional models of collaboration and governance. A review of the HISP model for supporting countries requested by The Global Fund and Gavi and carried out by health.enabled in 2023 identified some key weaknesses in the HISP network, including a lack

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<sup>3</sup> <https://dhis2.org/hisp-network/>

of standardized capacity and skills across HISP groups, unclear lines of accountability within the network, and economic insecurity due to HISP group reliance on short-term contracts. The report also pointed out the significant opportunities to leverage the network to support other open-source tools, and to reinforce the unique value that HISP groups offer as local, long-term digitalization partners in LMICs. Since the release of this report, the HISP Centre has initiated several measures within the HISP network to increase accountability and build internal capacity, including aiding in the formation and launch of continental HISP hubs in Africa and Asia that provide a locally-managed mechanism for inter-group coordination and collaboration and support increased professionalization, specialization, and sharing. Further strengthening of the HISP network is necessary to empower HISP groups to work effectively and cost-efficiently to support country needs, and help ensure that LMICs have a pipeline for the continuous development of informatics expertise to facilitate the long-term sustainability of locally-owned information systems.

### Approaches and Illustrative Activities:

Our approaches to achieving this goal will follow three broad and interconnected tracks. The first focuses on strengthening HISP network governance and capacity through structured collaboration and internal training coordinated by the HISP Centre. The second leverages the HISP PhD and Masters programs—which will continue to recruit students from HISP groups, national ministries, and other local partners—to generate local knowledge and innovations and support the development of national digitalization experts and future leaders. The third uses the DHIS2 Academy program, DHIS2 Community of Practice, and DHIS2 Developer Community as avenues for local and regional capacity strengthening, innovation sharing, and network building.

Illustrative activities include:

- HISP governance and capacity:
  - Work with global as well as in-country stakeholders from the DHIS2 investors group (eg. WHO, UNICEF) to do targeted country-specific coordination and resource mobilisation activities together with HISP groups; with the goal to promote integrated and donor-aligned strategic plans for DHIS2 strengthening and broader digitalisation efforts; and to position HISP groups as key strategic partners in country
  - Continue organising targeted HISP group training events (online and in-person) on advanced topics such as server management, data security, interoperability, metadata management, climate data integration, data modelling with CHAP, EMIS implementation strategies, DHIS2 for logistics, DHIS2 and AI, etc.
  - Strengthen organisational capacity of HISP groups by continuing the work with HISP hubs to assess and strengthen HISP groups admin and finance operations; and continuing targeted webinars and HISP mentorship programs in areas of communication and business development.
  - Continue and expand on the Dev champions program with HISP groups fostering more collaboration between HISP groups and HISP Centre on software development and usability of extensibility features and tools
  - Leverage DPG partnerships to train HISP groups on complementary DPGs.
  - Explore new approaches to quality assurance and certification of DHIS2 implementations; assessing the work of HISP groups and implementing partners
- HISP PhD, Masters & research
  - Additional PhD researchers embedded in HISP groups to support action research and generate knowledge in emerging domains while ensuring strong connection to country goals

- Recruit PhD/research candidates from national ministries and universities. These efforts will support action-research projects that directly contribute to country systems, including work with emerging areas such as AI technologies and modeling.
- Increased research collaboration and involvement of local universities
- DHIS2 Academy
  - HISP groups and HISP hubs take ownership of the regional DHIS2 Academy, and are able to maintain and deliver Academy courses sustainably at a high level of quality, as a complement to in-country trainings
- Increase HISP group visibility and engagement on the DHIS2 Community of Practice forum to facilitate greater sharing of experiences, best practices, and innovations.

### **3.4 Strategic Objective 3: Enable effective country use of AI for better decision making**

#### **Key Outcomes:**

Countries leverage AI in conjunction with DHIS2 to improve local data entry, data management, predictions, triangulation and overall data use

- Promotion and global network sensitization of ethical AI policies that ensure data protection, transparency, reliability and fairness
- DHIS2 becomes a leading platform for AI/ML-enabled predictive modeling
  - Chap and the DHIS2 Modeling App deployed and used at an operational level for climate-sensitive disease forecasting in several countries, and piloted in at least one additional domain to demonstrate flexibility
- Local capacity to implement AI-enabled health information system solutions and predictive modeling significantly increased
- Enable the ongoing development of generative AI functionality for DHIS2, with an emphasis on prompt engineering to facilitate data entry, data use, data quality, data management and specialized use cases (triage, etc):
  - Pilots conducted with partners in countries to generate quantitative and qualitative data for evaluating feasibility, accuracy, user acceptance, responsiveness & added value
- AI-enabled solutions evaluated through the lens of security, privacy and local ownership to generate evidence and learning

#### **Description:**

The HISP Centre and the HISP network will continue to fortify government-owned systems designed for local needs to expand DHIS2's role as an innovative data management platform enabling responsible AI adoption. We will promote, support and enable integration of AI into locally owned digital public infrastructure and strengthen capacity to facilitate ethical and effective use in countries to solve real-world challenges in the domains we work in. Participatory design and co-development of AI-enabled solutions with countries will be grounded in principles of co-creation, reusability, transparency, sustainability, and local ownership. We will support the effective country use of AI and machine learning tools—and help develop local expertise in related specialized skills like predictive modeling—through local capacity building activities carried out by the HISP groups, along with expert guidance from the HISP Centre.

The Chap Modeling Platform and DHIS2 Modeling App will continue to be developed and supported as part of the DHIS2 product portfolio, bringing the power of machine learning



solutions to DHIS2 systems. These products bring AI solutions and predictive modeling to the finger-tips of public health decision makers to enable enhanced forecasting, predictions, early warning systems and insights about future scenarios. The Chap platform will further refine modular AI components and accessible prediction models that can be tailored to local needs through collaboration with academic and technical partners.

We will also work with technology partners to expand the capabilities for incorporating generative AI, large language models (LLMs) and natural language processing (NLP) to overcome long-standing barriers to effective data use, including foundational challenges such as automating reporting into DHIS2 through non-traditional means (Chat bots, image and voice-to-text processing) and generating meaningful insights from routine data captured in DHIS2 for timely action (such as through natural language queries for data exploration), as well as to support work efficiency gains.

### **Current Status & Rationale:**

As AI rapidly reshapes digital transformation, governments are seeking to proactively adopt AI technologies in context-fit solutions to protect their sovereign interests and avoid reliance on external AI offerings. The global presence of DHIS2 infrastructure and capacity provides an outsized opportunity to rapidly scale global uptake of AI tools in LMICs. In the context of DHIS2, AI can help to overcome longstanding challenges and barriers for data analysis, data entry, decision-making, data quality, anomaly detection, metadata management, predictive modeling, and many more.

The developments emerging through the Chap Modeling Platform and a large variety of locally led, externally developed AI initiatives for DHIS2 are already starting to provide countries with a toolbox to leverage AI within their national data systems and on their own terms. These early AI projects have delivered promising results with metadata management, data entry, and configuration, among other areas. We expect these innovations to proliferate considerably during the next three years. To support the sharing of the growing number of DHIS2-based generative AI tools that are already being created within the global community, the core team will work with the creators of these tools to ensure ethical application; alignment with the HISP Centre's mission, and integration into sustainable methods of deployment, facilitating their wider visibility and adoption.

Integrating AI capabilities requires funding for data engineering, model development, and user interface design. DHIS2's modular architecture, existing specialized applications, and the rich country data in national DHIS2 systems provide a strong foundation for good return on investment. Developing ethical AI frameworks along with use cases is forward-looking and aligns with global trends in digital public goods. Ensuring data privacy, security, and national ownership will only become more essential, particularly as AI tools process sensitive data for health, education, climate, and other domains.

### **Approaches and Illustrative Activities:**

Our technical approach to facilitating country use of AI will include both HISP-led development of AI tools for DHIS2—including the continued development of the Chap modeling platform as a best-in-class, open source, and fully generic modeling platform for country-owned prediction models—and the development of extensions and tooling for DHIS2 that enable the creation and sharing of novel uses of AI by the DHIS2 community, contributing partners and HISP groups, including beyond climate and health. Capacity building and governance activities will also play a central role. The HISP Centre, together with local researchers and HISP groups, will use action research to support countries' integration of AI into the broader national digital infrastructure. To do this, HISP Centre will apply its expertise and PhD scholars/leaders in information systems research in LMICs to provide HISP groups with the knowledge to explore the role of AI in national digital transformation with countries. We will also support governance frameworks and open development processes to develop an ethical AI framework for the integration of AI with DHIS2, Chap and the larger national information architecture.

Illustrative activities include:

- Documenting and disseminating lessons on how AI adds value (and where it does not) to avoid technology-first approaches.
- Engaging closely with country pilots and implementations for implementing LLMs and AI-enabled data reporting: pilots conducted and co-evaluated in countries to provide quantitative and qualitative data for evaluating feasibility, accuracy, user acceptance, responsiveness & added value
- Expanding the Chap modeling platform to offer a larger array of open-source, adaptable prediction models and building out a version of the platform for high-demand use cases within and beyond the climate-health nexus.
- Establishing strategic partnerships with national and regional institutions that promote the ethical use of AI, sovereign ownership of data, and government-led development.
- Enhancing existing national health and education DHIS2 systems with AI-powered data insights and Model Context Protocols (MCPs). These tools are envisioned to generate real-time policy insights, support healthcare decision-making through a range of decision support tools, and unlock access to new sources of funding such as climate-linked finance.
- Developing frameworks for powering AI-generated insights based on country implementations of DHIS2. These frameworks could involve generative AI capabilities and would serve countries at different levels of digital maturity.<sup>4</sup>

### 3.5 Strategic Objective 4: Institutionalize Long-Term Sustainable Financing Models

#### Key Outcomes:

The long-term financial stability of the DHIS2 platform as a digital public good (DPG) has a secure foundation based on a mix of direct investment, partnerships, and revenue-generating activities, facilitating sustained locally owned DHIS2 systems in LMICs.

- Introduce the DHIS2 Shared Service Fee in collaboration with institutional partners and the DHIS2 implementing partners, both HISP and non-HISP, to provide organizations that rely on DHIS2 with a standardized and transparent mechanism for contributing to the core platform
  - Establish a contributing partners network of non-HISP DHIS2 implementers that include the shared service fee in their budgeting
  - Secure multiple high-income countries with DHIS2 implementations, paying the Shared Service Fee.
  - Aim to have 25% of DHIS2 core software development costs covered by Shared Service Fee and additional service offerings by 2027.
- Collaborative agreements or MoUs signed with DPG stewards and build capacity among the HISP network to deploy and support various DPGs and complementary technologies.
- Improve the sustainability of the DHIS2 Online Academy through funded partnerships with other organizations.
- Establish an implementation certification program, which can be accessed through the HISP groups and contributing partners

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<sup>4</sup> Countries will choose between investing in graphics processing units (GPUs) at national data centers, opting for cloud-based GPU services for less up-front investment, or using lightweight AI models that can run on central processing units (CPUs). These decisions will depend on national budgets and digital transformation strategies and will extend across domains.

## Description:

This objective focuses on developing sustainable funding models for DHIS2 as a digital public good based on collective action, where countries organizations that use and benefit from DHIS2 contribute financially to support the platform's development and maintenance through standardized mechanisms that are developed and refined in dialogue with our partners and stakeholders. It strengthens the role of the HISP network as owners in the governance model for the platform, and opens channels for more direct input from governments and organizations that rely on DHIS2, creating shared governance and resource sustainability—and supporting the Lusaka Agenda's goals of increased digital sovereignty and local ownership—by providing a fair and transparent cost-sharing system and leveraging mutually beneficial relationships between benefiting stakeholders.

The DHIS2 platform underpins national health information systems in more than 75 LMICs. While country-level implementations are funded through project budgets, the core global services—including software development, release management, documentation, interoperability frameworks, and network coordination—require a stable and predictable funding base. To ensure the long-term sustainability and coordinated governance of the DHIS2 platform, we will pilot a DHIS2 Shared Service Fee as a means for organizations to contribute to ongoing DHIS2 development and maintenance that is paired with a formalized partnership model promoting shared platform ownership. The Shared Service Fee concept has been developed in dialogue with our partners at the Global Fund and Gavi as a mechanism that can potentially be included as a budget line in country grants. It is also intended to be applicable to other DHIS2-related contracts, such as those negotiated by HISP groups, and to institutional agreements through the partner network described below. It is intended to ensure that each DHIS2-related investment contributes proportionally to these collective functions, reinforcing DHIS2's position as a trusted, sustainable, and community-driven digital public good.

We recognize that there is a great deal of sensitivity around introducing a fee structure to DHIS2, given our long history as a free and open-source software platform. In introducing this new mechanism, we will emphasize that it is not a license fee, but rather an opt-in contribution to support the platform, which also provides the benefits of collective ownership. The DHIS2 software will remain free to download and use as before. The piloting and rollout of the Shared Service Fee model is an experiment, and we will approach it in a highly consultative way, adjusting the model as needed to ensure that it remains aligned with our vision of sustainability and collective action without creating additional risks to the DHIS2 platform.

Complementing this new fee mechanism, we will also launch a Contributing Partners Network. Members of this network will pay a small annual fee, which includes a review of their capacity and portfolio of DHIS2 implementation, and commit to applying the Shared Service Fee as a line item in their budgets. This model will be piloted and refined over the coming strategy period, beginning in 2026. A key consideration during the pilot phase will be ensuring that establishing a wider partner network does not come at the expense of the HISP network, as the HISP groups remain critical to our strategic approach. Instead, we will strive for a model that complements the HISP network, strengthening the DHIS2 and information system support that is available to LMICs.

Beyond this, the HISP Centre will proceed with offering services of bundled activities, such as leveraging the DHIS2 Academy program to targeted funders and clients, and creating an implementation certification program which can be accessed through our new implementing partners network of HISP groups and non-HISP vendors. Academy programs will also be expanded to include curricula for complementary DPGs and software, providing additional opportunities for funding—and allowing other organizations to leverage the HISP network's global footprint and local capacity building experience—while promoting best practices for unified architecture within and across countries.

While our primary focus is on achieving sustainable financing models for DHIS2, we will also share these innovative approaches with other DPG stewards for their potential reuse, thus helping to support the larger DPG ecosystem.

## HISP Centre Mission Critical Activities

### Development and maintenance of the DHIS2 Platform and related global resources

- Security patches: high risk and vulnerability protection of country data
- Bug fixes: continuous release of DHIS2 applications with fixes and improvements
- Interoperability support: development of tooling and documentation, relationships with complementary technologies
- Provide critical/emergency support: responding to country system issues as needed
- Provide DHIS2 documentation and implementation toolkits

### Maintaining the HISP Network

- A global federation of regional teams that localize, support, and sustain DHIS2 implementations through long-term partnerships.

### Building Global Capacity

- Online and in-person training programs that build national capacity and enable countries to manage and scale DHIS2 independently.

### Leading the DHIS2 Community of Practice

- A global user and implementer network that shares knowledge, solutions, and feedback to drive continuous platform improvement.

### Fostering a network of Contributing Partners

- Entities that operationalize DHIS2 in-country and contribute financially, strategically, and technically to its evolution.

### Creating New Innovations: CHAP, EMIS, LMIS, App Platform

- Modular solutions that extend DHIS2's reach into community health, education, logistics, climate health, prediction and app-based innovation for broader impact

### Current Status and Rationale:

Since 2010, partners have collectively invested almost \$130 million in the DHIS2 platform, which has enabled governments to build more sustainable information systems at a fraction of the cost of bespoke solutions. These investments have been a significant development success, delivering impact far beyond what an individual donor could achieve alone.

LMIC information systems are at risk. Recent decreases in funding have impacted DHIS2 systems at the country level through cuts to personnel and infrastructure, threatening data security and availability. Meanwhile, potential budget reductions for the core DHIS2 platform based on medium-term projections will lead to declines in the stability and adaptability of the platform, ultimately weakening LMIC information systems.

Inaction has a significant cost. Major disruptions to DHIS2 systems will drastically reduce the ability of country stakeholders to use data for decision making and accountability at a time when data is desperately needed to prioritize scarce resources. This reduces countries' ability to deliver life-saving interventions and essential services, and respond to emerging public health threats. This jeopardizes the results of decades of investment in health and human development. If these systems collapse, the cost will far outweigh the cost of sustaining them.

At the same time as LMIC systems face funding challenges, high-income countries are increasingly adopting DHIS2 as a preferred health information platform, particularly for disease surveillance. However, these countries are typically supported by organizations outside of the HISP network, and generally do not have procurement practices in place that facilitate contributions to DPGs. This means that the use of DHIS2 in high-income countries has generally not translated to significant financial support for the DHIS2 platform.

Recognizing DHIS2 as a DPG, our approaches under this objective emphasize equitable cost-sharing, mutual accountability, and participatory governance. Contributing Partner agreements—covering both HISP groups and private implementers—operationalize a group of trusted DHIS2 vendors that support the mission of the HISP Centre and promote the Shared Service Fee model. These agreements are not merely transactional, but are grounded in a broader commitment to community values such as openness, local ownership, co-creation, and professional solidarity. The Shared Service Fee covers expenses for updating, patching, monitoring, security checks, troubleshooting, error correction, backup, recovery, assistance with scaling and optimization. They make transparent the cost of using such a platform, and make it easier for DHIS2 to be procured through typical tendering processes.

These models are designed to mitigate the risks of “free riding” and fragmentation by tying partner benefits—such as branding, strategic influence, and access to technical resources—to a sustainable funding model based on use. In alignment with collective action theory, the strategy mobilizes both domestic resources in LMICs (in line with the Lusaka Agenda) and coordinated donor contributions (e.g., Gavi and the Global Fund) to align local and global priorities. The Contributing Partner Network combined with the Shared Service Fee also enables the HISP Centre to benefit from high-income country use of DHIS2 by providing a financial mechanism that is in-line with standardized procurement practices.

Our strategy further explores targeted innovations (such as AI services), aiming to diversify revenue while reinforcing equity and inclusion. This ecosystem-based approach positions DHIS2 as not just software, but a living collaboration—where shared investment yields shared value, enabling global digital health infrastructure to evolve in step with the needs of countries and communities it serves.

Finally, it is important to note that the financial challenges described above are not unique to DHIS2, but are shared by many other digital public goods. The HISP Centre plays an active role in the DPG community, and has been encouraged by our donors and partners to leverage our position and network to support broader DPG and DPI approaches. To that end, we are actively collaborating with several DPG stewards and donors—including the DPG Alliance, UNICEF, the Gates Foundation, Co-Develop, and Norad—to define and promote a vision in which multiple DPGs work together to develop and maintain a sustainable and beneficial ecosystem model for LMICs. Partners are seeking funding to develop an ecosystem-wide curriculum that trains stewards on complementary solutions, integration strategies, and implementation approaches to support extensibility and growth. Within the HISP network, we will adapt the Contributing Partner model to accommodate funding and budgeting for this cross-DPG work.

### **Approaches and Illustrative Activities:**

The HISP Centre is working with key institutional partners to develop budgetary guidance in support of the Shared Service Fee. We will continue to operationalize the Shared Service Fee with our community of investors and institutional partners, seeking to make this a standard expectation for future projects. We will formalize our Contributing Partners Network through a

partnering agreement that includes support for the HISP Centre mission and values, a willingness to work with the HISP network when supporting LMICs, and a commitment to apply the Shared Service Fee—this model will be piloted and refined in dialogue with participating partners and the HISP network throughout this strategy period. We will also continue our work with the DPG Alliance along with various DPG stewards and donors to define and promote a collaborative model to support the larger DPG ecosystem, particularly through leveraging the HISP network, and formalize this through institutional agreements.

Within the HISP network, the HISP Centre will support HISP group capacity building for country-level resource mobilization and local financing discussions and introduce updated engagements with HISP groups in support of the Shared Service Fee model and the closer connection to other complementary technology providers, such as other DPG steward organizations. A key focus will be building governance structures that meet contributors' needs while avoiding mission drift. This work will also involve ongoing donor engagement to align with our new funding and collaboration models.

Illustrative activities include:

- Work closely with HISP groups and country governments to create awareness around sustainability of the DHIS2 platform, need for collective action, work with governments to mobilize donors to invest in core and pay shared service fees
- Deploy standardized budget guidance for Shared Service Fee through the Global Fund, Gavi and other partners
- Sign up first contributing partners members as of January 2026
- Coordinate with other DPG stewards and other relevant technology providers to develop capacity building for their platform within the HISP network.
- Establish platform-to-platform collaborations with relevant DPGs and other technologies focused on complementary functionality, interoperability, and advocacy.
- Pilot implementation certification model
- Institutionalize transparent cost accounting practices and more detailed financial monitoring; improve accountability and demonstrate value to both partners and funders. This will enable clear activity costing and support collaborative, data-driven strategic decision-making long term.



## 4. MONITORING & DOCUMENTING PROGRESS

The HISP Centre is committed to pursuing the goals and objectives outlined in this strategy, and will take several steps to help us operationalize it, monitor our progress, and report on our progress to our partners, investors, and key stakeholders. This will help provide transparency, and accountability, while also improving our ability to effectively deliver on our strategy. We will also publish outputs and learnings from our ongoing work and document our achievements and impact to help facilitate the sharing of knowledge and innovations and generate increased support for DHIS2 and HISP.

### 4.1 Strategy Operationalization & Accountability

To operationalize our strategic goal and objectives, we will continue with the approach we implemented in the last strategic period of using our strategy to directly drive our internal work planning—and particularly our software roadmap. We do this by developing concrete, cross-cutting initiatives that support our strategic goals and objectives—and foster collaboration between the HISP Centre and country stakeholders via the local HISP groups—which are broken down into tasks to be carried out by the respective teams involved. Several initiatives to support the strategic objectives outlined in this strategy are already underway.

To document our progress and facilitate follow-up, we have developed a formal results framework. This allows for monitoring and evaluation through key indicators that are based on this strategy document and reflect our goals and results in a quantifiable way. We will use this framework to report on our results annually to our key partners, as we did for our 2023-2025 strategy.

Our new Contributing Partner model will include several layers of accountability that will help ensure that our efforts—and the efforts of our partners—remain focused on our strategy. These include the formation of a Strategic Council, which will include representatives from all contributing partners and HISP groups. An annual meeting will be organized for this council, and there will also be biannual forums for discussion and reporting review. The HISP Centre and HISP hubs will collaborate on biannual reviews of governance and effectiveness of this program, and work together to ensure that it does not undermine the competitiveness and relevance of the HISP network.

Given that our ability to deliver on this strategy is contingent upon sufficient funding, we will work proactively to raise funds to support elements of the strategy that are underfunded. We will adjust our plans and targets throughout this period based on actual funding availability and investor input.

### 4.2 Documenting Results & Communicating Impact

Sharing the outputs and impact of our work is an important part of our strategy. The HISP Centre's communications strategy has two primary components: 1) Ensuring that DHIS2 tools, resources, and guidance are easily accessible by the global DHIS2 community and promoting their use in our priority sectors and 2) providing evidence of the real-world use, effectiveness, and impact of DHIS2, particularly through the perspectives of LMIC stakeholders. These components are complementary, as raising the visibility of new DHIS2 features, tools, and use cases helps generate interest in their potential use in early adopter countries, while showcasing real country experiences continues to be the largest factor driving their global uptake.

To operationalize this, we engage in several routine activities:

- **Promote software updates, use cases, tools, resources, and guidance** through our website (1.2+ million annual visits, available in English, French, Spanish, and Portuguese), monthly

newsletter and email campaigns (23,000+ subscribers), Community of Practice (12,000+ members from 190 countries), social media (10,000+ followers), and webinars (500-1,000 registrations per event).

- **Share examples of DHIS2 impact and effectiveness** through regularly published impact stories, case studies, and webinars co-developed by the HISP Centre with in-country partners.
- **Elevate local voices from the DHIS2 community** through solicitation of ministry/local stakeholder presentations at the DHIS2 Annual Conference, webinars, and other events; curated promotion of country-written research articles and CoP posts in our global communications channels, and video interviews with DHIS2 community members that provide them with a platform to speak directly about their experiences with and perspectives on DHIS2.
- **Highlight HISP network activities and added value** by working with HISP groups to build their communications capacity, and publishing announcements, regular updates, and monthly roundups of new projects, partnerships, activities, and impacts from the HISP network.

Through this work, we aim to show that DHIS2 is not only a useful tool in theory, but that it is actively and effectively used by countries around the world. This contributes to raising the profile of DHIS2 and HISP in countries, helps grow interest in DHIS2 use and HISP partnerships, and demonstrates to donors that their investments are generating results.

## 5. ANNEX

### 5.1 Annex 1: HISP Network Overview

An overview of how the HISP Centre and the regional HISP hubs and national HISP groups work together.

#### HISP Network Entities

##### HISP UiO

- Develops and distributes core software platform and implementation guidance
- Manages global tech team, which includes country implementation
- Provides Tier 2 (in-depth technical assistance) and Tier 3 (infrastructure-related DHIS2 support)
- Disseminates global communications
- Strengthens organizational and technical capacity at regional and country levels
- Conducts global research
- Develops online training material for DHIS2 community Academies
- Develops standard curricula for University of Oslo academic programming

##### HISP Regional Hub

- Promotes skills transfer and encourages member Groups to support growth and country implementation
- Purchases and manages consortium-based funding for regional support and implementation
- Coordinates, hosts, and manages regional DHIS2 Academies
- Supports development of Academy teaching curriculum

##### HISP Group

- Contributes to global implementation, innovation, and development
- Coordinates, leads, and supports country implementations
- Manages country implementation grants when a prime is needed
- Provides feedback on DHIS2 use and needs to HISP UiO
- Provides Tier 1 DHIS2 support
- Acts as a local trainer and point of contact for ministries

#### HISP Centre

- The HISP Centre coordinates the global HISP network. It leads the development of DHIS2 software features, supports global initiatives, and manages in-country implementation projects through subcontracts with HISP groups and regional hubs.

#### National HISP Groups

- Independent, non-profit organizations within the HISP network, legally registered in various countries.

- HISP groups provide localized support for DHIS2 implementation, customization, and capacity building, as well as critical ground truth and use feedback to the HISP Centre in support of ongoing product and software development.
- HISP groups work closely with Ministries of Health and other country stakeholders to ensure the effective use of DHIS2 and other DPGs for respective areas of expertise in their regions.
- **List of 24 local HISP groups (as of 2025):**
  - **Africa:** HISP Côte d'Ivoire, HISP DRC, HISP Ethiopia, HISP Ghana, HISP Kenya, HISP Mali, HISP Nigeria, HISP Rwanda, HISP South Africa, HISP Tanzania, HISP UNIMA (Malawi), HISP Uganda, HISP West & Central Africa (WCA, based in Togo), HISP Zimbabwe, Saudigitus (HISP Mozambique).
  - **Asia & Middle East:** HISP Bangladesh, HISP India, HISP Indonesia, HISP Middle East & North Africa (MENA), HISP Pakistan, HISP Sri Lanka, HISP Vietnam
  - **Americas:** HISP Colombia
  - **Europe & Central Asia:** HISP ECA

### Regional HISP Hubs:

- Continental associations of HISP groups in Africa and Asia, which facilitate collaboration, partnership, coordination, and cooperation in information system strengthening activities at the country and regional levels.
- HISP regional hubs were also designed to pursue and administer regional consortium-based funding arrangements, and efforts in this regard are a significant activity focus.

### Other Ecosystem Stakeholders

<b>Donor</b>	<ul style="list-style-type: none"> <li>• Provides funding</li> <li>• Uses DHIS2 data for impact analysis</li> <li>• Monitors implementation and outcomes</li> </ul>
<b>Country Government</b>	<ul style="list-style-type: none"> <li>• Owns country-level DHIS2 implementation</li> <li>• Defines national needs and priorities</li> <li>• Implements and customizes DHIS2</li> <li>• Uses sector-specific packages</li> <li>• Sets country goals</li> <li>• Uses DHIS2 data for public health research</li> </ul>
<b>Non-Government Implementing Partner (IP)</b>	<ul style="list-style-type: none"> <li>• Implements health programs on behalf of governments</li> <li>• Provides technical assistance</li> <li>• Supports local platform configuration</li> <li>• Contracts HISP UiO and HISP Groups for implementation support</li> </ul>
<b>Other Software User</b>	<ul style="list-style-type: none"> <li>• Uses DHIS2 independently for internal needs</li> <li>• Contributes to global network learnings</li> </ul>
<b>Researcher</b>	<ul style="list-style-type: none"> <li>• Utilizes available DHIS2 data for academic research</li> <li>• Publishes findings in journals</li> <li>• Applies data for multi-scale or multi-sectoral research</li> </ul>

## Key Ecosystem Stakeholders:

- Donors & Global Partners:
  - **Health:** Norad; The Global Fund to Fight AIDS, Tuberculosis, and Malaria; UNICEF; the U.S. Centers for Disease Control and Prevention (CDC); the Gates Foundation; Gavi, The Vaccine Alliance, Resolve to Save Lives (RTSL), Clinton Health Access Initiative (CHAI), the World Health Organization (WHO); the World Diabetes Foundation (WDF); the United Nations Population Fund (UNFPA), UNICEF, the World Bank/GFF.
  - **Climate and Health:** Wellcome Trust, GIZ, Save the Children, Green Climate Fund
  - **Agriculture, Food Security, Nutrition & One Health:** Food & Agriculture Organization (FAO), U.S. Centers for Disease Control and Prevention (CDC), UNICEF
  - **Logistics in Health:** The Global Fund, GAVI, UNICEF
  - **Education:** Norad, IDRC, GPE/KIX, UNICEF, UNESCO/UIS/IIEP, the Spix Foundation
  - **DPG/DPI:** Norad, DPGA, Co-Develop, United National Development Programme (UNDP)
- Regional partners:
  - **Africa:** African Union (AU IPED, AUDA-NEPAD, Africa CDC), West African Health Organization (WAHO), East African Community (EAC), Manu River Union (MRU), WHO AFRO
  - **Asia:** Asian Development Bank (ADB), WHO SEARO, WHO EMRO
  - **Americas:** Pan American Health Organization (PAHO), Caribbean Public Health Agency (CARPHA)
  - **Europe:** European CDC (ECDC)

## 5.2 Annex 2: Priority Sectors

As the HISP Centre pursues its five goals, we recognize that DHIS2's relevance and impact increasingly extend across a growing range of domains. In addition to its foundational role in health systems, DHIS2 will continue to support national priorities in areas such as climate resilience, logistics management, and education-system strengthening. Each of these focus areas are shaped by the platform's capacity for modular design, local adaptation, and cross-sectoral interoperability, as well as by the HISP model of scaled participatory design. The 2026-28 strategy's three-year timeframe offers a critical window to deepen and scale these contributions, guided by strong country demand and evolving global priorities. The primary focus of most sectors is on DHIS2 while the Climate and Health domain considers both DHIS2 and the Chap Modeling Platform. The following sections outline each domain's description and current state, DHIS2's value proposition, and key partners, donors and other details related to implementation.

### A. Health System Strengthening (HSS)

#### Domain Description, Size, and Addressable Market

Health System Strengthening (HSS) encompasses the improvement of core health infrastructure, information systems, service delivery, and governance to increase the efficiency, equity, and resilience of national health systems. It is a high-priority area for global donors such as the Global Fund, Gavi, and the World Bank. In LMICs, HSS efforts are often delivered through large, multi-year investments channeled via ministries of health, UN agencies, and implementation partners. Digital health management information systems (HMIS), data use for decision-making, and health workforce capacity building are key components. The addressable market for digital tools in HSS is broad, as most LMICs are in active stages of digital transformation and integration of national systems across disease programs and service areas.

## Value Proposition for DHIS2 and Competitive Landscape

DHIS2 is already widely used as a national HMIS platform in over 80 countries and forms the backbone of health reporting for routine services, disease surveillance, and monitoring and evaluation. Its modular architecture and ability to scale to national implementations make it a foundational tool for HSS in LMICs. DHIS2's open-source model, local customization through HISP groups, and metadata packages provide flexibility for governments to adapt to evolving needs. Competition varies by function; for example, commercial electronic health records (EHR) systems (e.g., OpenMRS, CommCare, or SmartCare) and disease-specific vertical tools (e.g., DATIM, eLMIS) may compete for attention and funding. However, few platforms offer the same level of national adoption, extensibility, and local capacity building. Continued focus is required to ensure DHIS2 remains aligned with donor agendas and integrates well with other digital health components.

## Key Partners, Donors, and Implementation Context

Key donors in HSS include the Global Fund, Gavi, the World Bank, and the World Health Organization (WHO). Major implementing partners include NGOs like John Snow Inc., PATH, and the Clinton Health Access Initiative (CHAI), as well as HISP groups that serve as long-term country support teams. In many contexts, the HISP Centre plays a coordinating or technical advisory role, particularly where ministries of health have designated DHIS2 as the national HMIS. Complementary software tools include openMIS (for health financing), OpenMRS (for clinical records), and iHRIS (for human resources). Close coordination is also required with digital health coordinators within ministries, digital transformation units, and partners overseeing system governance.

## B. Climate and Health

### Domain Description, Size, and Addressable Market

The intersection of climate and health is a growing priority globally, particularly in LMICs where the effects of climate-sensitive diseases, extreme weather events, and environmental degradation are most acutely felt. This domain extends beyond infectious disease forecasting to include heat-related illnesses, flooding impacts, air quality risks, and links to environmental surveillance and land use. The growing demand for triangulated insights, combining health, climate, and population data, is creating a new layer of need within health systems. Countries and donors are increasingly recognizing the urgency of climate-informed public health planning, and funders such as the Wellcome Trust, NORAD, and multilateral adaptation programs are channeling more resources toward integrated data systems. The addressable market includes countries with existing HMIS infrastructure, donors seeking tools that can scale across geographies, and institutions aiming to analyze population health using environmental inputs.

## Value Proposition for DHIS2 and Competitive Landscape

DHIS2 is already positioned with a suite of early-stage tools for climate and health, including the Climate App, Prediction App, and the Climate Health Analytics Platform (CHAP). These tools allow countries to harmonize and combine climate, population, and health data into one analytics interface. The platform supports geospatial layering, time series forecasting, and flexible data import, extending well beyond climate to include environmental variables such as land use, land coverage, and population density. Unlike competitors such as DiCRA, PRISM, or the Climate Health and Risk Tool, which are often sector-specific, limited in scale, or geographically constrained, DHIS2 offers a global, interoperable platform with deep in-country adoption and reusable software components. CHAP serves as a model for how health-focused machine learning and forecasting can be modular, open-source, and quickly deployable across different health domains—not just climate-related ones. Future uses of CHAP are already being explored for areas like family planning forecasting and other HMIS-linked services. DHIS2 does not model the weather directly and does not intend to but can integrate outputs from weather models for applied public health analytics.



## Key Partners, Donors, and Implementation Context

Strategic partners include the Wellcome Trust (funder of current CHAP development), WHO (alignment with climate-sensitive disease frameworks), and NORAD, which has expressed interest in a geospatial data repository linking land use, tenure, climate, and health data. Other actors such as academic institutions, JSI, and Cardiff University are active in climate-health intersections and could be partners for implementation or modeling. CHAP is also being explored as a research tool by universities and public health schools that currently lack access to high-performance analytics platforms. Positioning DHIS2 and CHAP for academic use could help scale awareness and generate new use cases across sectors. Countries with existing DHIS2 infrastructure and national adaptation plans are likely entry points for piloting CHAP-based forecasting. With increasing focus on environmental registers and triangulated data systems, there is also interest in integrating DHIS2 with broader digital public infrastructure (e.g., registries for land or environmental assets). Care should be taken in expanding into these adjacent areas; some may require significant new development or staffing. However, CHAP serves as a strong precedent for how modular innovation within DHIS2 can be quickly scaled across domains, offering a compelling value proposition for future grants, donor engagement, and country-driven climate-health initiatives.

## C. Logistics in Health

### Domain Description, Size, and Addressable Market

Health logistics refers to the planning, coordination, and delivery of commodities across the health system, covering forecasting and procurement to distribution, inventory tracking, and stock visibility. In many LMICs, logistics systems remain fragmented across programs and verticals, with most facility-level stock tracking still performed manually or outside formal eLMIS tools. The recent drawdown of USG funding has disrupted central LMIS providers and left significant coverage gaps across the logistics value chain. In many geographies, parallel supply chains remain unintegrated, while others lack visibility beyond the central warehouse. The addressable market includes ministries of health and medical stores, development partners funding disease-specific supply chains (e.g., Gavi, Global Fund), and implementing organizations facing increasing pressure to optimize commodity delivery amid shrinking budgets. With potentially thousands of systems in play globally for procurement and logistics, the market is highly fragmented, underscoring the need for integration and more reliable, scalable, last-mile tools.

### Value Proposition for DHIS2 and Competitive Landscape

DHIS2 is currently not a full-featured national eLMIS but is intended as a last-mile component in an integrated LMIS system, enabling facility-level stock tracking and providing a bridge to other systems via interoperability. DHIS2's offline functionality, national footprint, and trusted presence among frontline workers position it uniquely to fill visibility gaps that upstream eLMIS platforms often miss. Competitors like OpenLMIS and mSupply offer advanced forecasting and central inventory functions but have struggled with long-term sustainability or scale. OpenLMIS, for example, lost its core donor support and was transferred to a for-profit subsidiary; Medexis also lost its financial support; mSupply is undergoing a shift to open source and is seeking additional implementation support, including from the DHIS2 ecosystem. There is a growing opportunity for DHIS2 to help fill this gap through increasing partnership with the remaining actors in the eLMIS space, or, where strategic, by expanding its own micro-level logistics features. Notably, the logistics domain is also a potential entry point for AI and machine learning: predictive modeling for drug forecasting and budgeting is in high demand, especially in contexts where planning decisions are made outside existing LMIS due to trust or data issues. CHAP may offer a platform to develop such models, with existing interest in applying it to domains like family planning forecasting.

## Key Partners, Donors, and Implementation Context

One key partner is mSupply, which is interested in HISP-led implementation support and potential accreditation partnerships. JSI, Cardiff University, and other logistics stakeholders are open to collaboration, particularly as former USG-backed actors seek new partnerships in a resource-constrained environment. Donors such as Gavi (which has an ongoing extension with DHIS2

to explore logistics and AI use cases), the Global Fund, and UNICEF remain active funders in vaccine and drug supply chains. DHIS2 has long delivered what donors ask for at the last mile, but stronger linkages with centralized funding decision-makers and implementing agencies are now critical. A cross-platform, country-owned solution combining CHAP-based modeling, DHIS2 visibility, and integration with eLMIS could meet both donor expectations for innovation and governments' needs for unified system guidance. Further, integrating temperature and other environmental data (already under way in DHIS2) aligns with current donor demands. To move forward, DHIS2 and the HISP Network may need to formalize logistics partnerships and develop joint offerings that provide end-to-end capabilities across logistics tiers.

#### Objectives for 2026-2028

- Participate and support DHIS2-RTS implementation in 3 countries
- Continue collaboration with mSupply and further develop integrations (Master Product Catalogue, Master facility list)
- Develop “additional transactions” for DHIS2-RTS (increase versatility, allow stand-alone use including order receipt, propose order quantities, placing orders, giving and returning loans, indicating reasons for discard etc.)
- Develop batch number/expiry date functionality for DHIS2-RTS
- Develop EMS mobile app which allows to access, store, share and analyse temperature and performance data from EMS compliant appliances and data loggers (such as the Fridge-tag) in DHIS2
- Contribute to the development of various new DHIS2 features which will enhance the logistics functionality of DHIS2
- Based on the DHIS2 CHAP model, develop AI model which accesses monthly “aggregate” data in DHIS2 and automatically generates forecasts (collaboration with Cardiff university)
- Based on the DHIS2 CHAP model, develop AI model which accesses and analyses cold chain appliance data, identifies possible causes of technical faults and predicts appliance life item
- Use AI tools for building a DHIS2-RTS extension which allows users to record a stock transactions (such as a stock distribution) simply by dictating the product names and quantities which are automatically converted into a DHIS2-RTS transactions (for validation and further processing).

## D. Education

### Domain Description, Size, and Addressable Market

Modern Education Management Information Systems (EMIS) enable ministries of education to go beyond basic data collection, providing real-time, actionable insights on schools, students, teaching staff, and learning outcomes. These systems are interoperable, connecting with government and education platforms to reduce duplication and fragmentation. They support data-driven decision making at all levels (national, district and school), while tracking progress on enquiry, inclusion and Sustainable Development Goal 4 ([SDG 4](#)). The global market for EMIS includes national-level systems for census data and performance monitoring, as well as localized tools for assessment and planning. Despite increased digitization, many systems remain fragmented or lack full national coverage, creating a significant opportunity for integrated platforms that can operate at scale in resource-constrained settings.

### Value Proposition for DHIS2 and Competitive Landscape

DHIS2 has been adapted for use by school administrators and teachers through tools like the Student, Staff, and School Education Management System (SEMIS), which provides access to

individual level data. This shift enables the education sector to move beyond static annual reports to real-time, actionable insights including early warning systems for dropouts and GPS-mapped school directories. Additionally, a dedicated education metadata package aligns with UNESCO UIS and AU-IPED standards and indicators, reflecting clear demand from countries for broader implementation.

These tools meet core needs for education sector stakeholders, and offer a clear value proposition. DHIS2 for Education strengthens EMIS by providing a scalable, adaptable, and sustainable digital infrastructure that empowers ministries to deliver timely, actionable insights, align with global education goals, and respond dynamically to emerging challenges. With an average implementation cost of just USD 3,240 per school (and as low as USD 2,300 when leveraging health infrastructure) it offers a high-return, future-proof investment that delivers real results in classrooms and in national planning.

DHIS2's strengths in local customization, offline functionality, and support from in-country HISP teams give it a competitive advantage, especially in contexts where there is overlap between health and education services (e.g., school health programs). Within the DHIS2 community, there is demand for education-related AI use cases, ethical AI frameworks, and AI-driven decision support tools. Some EMIS targeting LMICs exist (e.g., OpenEMIS), but none have the scale or customization of DHIS2. Incumbent tools like StatEduc2 integrate with DHIS2, posing a trusted entry point for DHIS2 as a more mature and dynamic EMIS. None offer the local support and capacity building of the HISP Network. Rather than replacing these existing systems, we are really addressing long-standing EMIS challenges and weaknesses:

- Moving from static annual reports to real-time, actionable insights such as early warning systems for dropouts and GPS-mapped school directories.
- Decentralising data use, enabling district officials to respond quickly – as demonstrated by The Gambia's national rollout in just 11 months.
- Embedding sustainability through phased national budgeting and institutionalised training.
- Enabling integration with health, civil registration, and climate data, as seen in Uganda's EMIS link with the national disease surveillance system during COVID-19.

Our vision is to transform traditional EMIS into dynamic platforms that fosters innovation, interoperability, and cross-sector coordination. By equipping ministries, schools, and local authorities with scalable, cost-effective, and adaptable tools, DHIS2-Ed aims to strengthen national capacity, enhance data-driven planning, and advance global goals such as SDG 4 and the African Union's Continental Education Strategy for Africa (CESA). This vision is grounded in sustainability, local ownership, and inclusive, evidence-based education systems that respond to both national priorities and international standards.

### **Key Partners, Donors, and Implementation Context**

A key partner for us is the African Union, specifically AU-IPED, which holds the mandate for EMIS across the continent. Other partners include ministries of education and their digital service units, as well as implementing NGOs such as Save the Children (which we are already partnering with on implementations in Rwanda, Ethiopia, and Mozambique). Regional UNESCO offices are also important partners in this space.

Key donors include the World Bank (which funds large EMIS rollouts), the Global Partnership for Education, FCDO, GIZ, UNICEF, and private foundations focused on digital equity in education. HISP groups with prior education experience can serve as technical leads in national or sub-national deployments. Finally, integration with other government platforms such as national student ID registries or teacher payroll systems may also require close collaboration with DPI teams.

## E. Digital Public Infrastructure (DPI)

### Domain Description, Size, and Addressable Market

Digital Public Infrastructure (DPI) refers to foundational digital systems that enable secure, interoperable, and inclusive digital services across sectors. Core DPI components include digital identity, payments, and data exchange platforms (e.g., registries, APIs, interoperability layers). DPI is increasingly recognized as a critical enabler of service delivery and governance and has gained international support through efforts led by the World Bank, UNICEF, G20, the Digital Public Goods Alliance (DPGA), and national governments. DPI is cross-sectoral by design and represents a growing investment area, particularly in countries pursuing whole-of-government digital transformation. The addressable market for DHIS2 lies in its potential to function as a data system supporting the data exchange pillar of DPI and integrating seamlessly with solutions offering digital payment and identify services. DHIS2 would ideally be serving multiple sectors in this capacity and would be integrated into national DPI stacks, particularly in health and other service delivery areas.

### Value Proposition for DHIS2 and Competitive Landscape

DHIS2 is a widely adopted digital public good and is already positioned as a health sector anchor system within national digital ecosystems. Its interoperability features, including metadata exchange, APIs, FHIR compatibility, and registry integration, align well with DPI architecture principles. DHIS2's value in the DPI landscape comes from its maturity, national scale, and adaptability to interoperable use cases (e.g., integration with ID systems, civil registration, and facility registries). Unlike horizontal DPI layers (such as MOSIP for identity or OpenG2P for payments), DHIS2 offers deep domain-specific functionality that can demonstrate the value of DPI integration in real-world services. At the same time, DHIS2 is also a clear enabler of data exchange. With dedicated focus on seamless interoperability and new governance frameworks for the ethical use of AI, it can become a key contributor to the data exchange DPI building block. Competition exists in the form of vertical health platforms (e.g., OpenMRS or iHRIS), but these typically serve narrower use cases. DHIS2 may also face challenges when DPI strategies favor centralized, government-built platforms without long-term investment in open-source solutions.

### Key Partners, Donors, and Implementation Context

Key partners in the DPI space include the Digital Public Goods Alliance (DPGA), United Nations Development Program (UNDP), the World Bank (via the GovTech and ID4D programs), and UNICEF (supporting integrated service delivery platforms). Technical collaboration opportunities exist with other DPI-aligned digital public goods, such as OpenCRVS (civil registration), MOSIP (identity), and OpenIMIS (insurance/finance). The HISP Centre and HISP groups can position DHIS2 as a reference implementation for sector-level DPI integration, particularly by documenting success cases and demonstrating registry interoperability. Donors and governments prioritizing DPI, such as India, Sierra Leone, Ethiopia, and Bangladesh, may be strategic targets for partnership and demonstration. DPI initiatives, particularly country-led DPI approaches to national digital transformation, often involve coordination with ministries beyond health (e.g., information and communication technology (ICT), finance, or national planning), which may require new partnerships and modes of engagement.

## F. Agriculture (Early Sector Engagement)

### Domain Description, Size, and Addressable Market

Agriculture remains a key economic sector in most LMICs. This is especially true in sub-Saharan Africa and South Asia, where smallholder farmers dominate food production. Digital agriculture tools include platforms for crop monitoring, pest and disease tracking, input supply chain management, and climate-resilient planning. The sector has seen increasing donor investment, especially at the intersection of food systems, climate adaptation, and rural livelihoods. However, many tools remain project-specific or pilot-scale, and large-scale national platforms are less common. The addressable market for DHIS2 would likely focus on government agricultural

extension systems and program monitoring, particularly where data collection overlaps with health or climate sectors.

### **Value Proposition for DHIS2 and Competitive Landscape**

DHIS2 could be adapted to support routine monitoring of agricultural extension services, livestock surveillance, or community-level reporting on crop health, particularly in contexts where disease and nutrition intersect. The platform's configurability and offline data collection capabilities make it suitable for rural agricultural contexts. However, DHIS2 is not currently positioned as a leading digital agriculture solution. Competitors include specialized platforms such as DiCRA (for climate-resilient agriculture), Food and Agriculture Organization (FAO) tools (e.g., Hand-in-Hand Geospatial Platform), and proprietary agritech platforms tailored to crop or livestock productivity. In its current state, DHIS2's value lies in multi-sectoral applications that intersect with agriculture rather than stand-alone agricultural functionality.

### **Key Partners, Donors, and Implementation Context**

Potential partners include ministries of agriculture, national agricultural research organizations, and NGOs working on digital agriculture and food systems. Donors include the International Fund for Agricultural Development (IFAD), the Gates Foundation, FAO, and regional development banks with rural development portfolios. Collaboration opportunities exist in joint climate-health-agriculture efforts, such as zoonotic disease surveillance or nutrition-sensitive agriculture. Implementation could be pursued in countries where DHIS2 is already strong and agriculture is a development priority. As this is a stretch sector, further scoping is needed to define concrete use cases and identify entry points.







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