
Subject: DHS-8-PGSSC-Men_and_Women-Template
Posted by [PGSSC](#) on Mon, 04 Mar 2019 21:42:34 GMT

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Thank you for reviewing our proposal for new indicators within the Demographic and Household Survey (DHS) regarding emergency and essential surgical care. The collection of these indicators is a critical step towards the delivery of safe, affordable, equitable access to surgical services as a component of universal health coverage and we consider the DHS as the best forum to derive these data points.

The questions we propose are a product of the Lancet Commission on Global Surgery (LCoGS), a body of work spanning three years involving 25 commissioners and a diverse group of academic, governmental and civil society collaborators from 110 countries. Of the six indicators proposed by the LCoGS, four were published in the World Development Indicators by the World Bank and all six are included in the World Health Organization's Global Reference List of 100 Core Health Indicators. Nevertheless, there currently are no mechanisms in place to collect the data required for these indicators, creating a critical gap in knowledge for surgical care strengthening.

The new indicators in this proposal span four existing DHS modules. For clarity, they are listed in the table below. Of particular interest are the questions on out-of-pocket expenditure and household expenditure to enable the calculation of financial risk protection for all medical interventions captured by the DHS (both surgical and medical), a core component of Sustainable Development Goal 3.8. The remaining questions were taken from a successful pilot DHS survey in Zambia. In the development of this application, we have been fortunate to count on a number of international partners to provide expert review and the indicators proposed are a culmination of these consensus building discussions. Please refer to Appendix A for a full list of international stakeholders who support this application.

Proposed Indicators:

1. Surgical Unmet need
2. Surgical volume

Data Utility:

1. Inform and guide national surgical planning
2. World Bank: World Development Indicators

File Attachments

1) [DHS-8-PGSSC-Men_and_Women-Template.pdf](#), downloaded 672 times

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [taylorwurdeman](#) on Fri, 15 Mar 2019 00:11:19 GMT

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Data on unmet surgical need is sparse, as it requires a large statistical infrastructure to collect. DHS is well suited to these types of problems, and is likely the only way this data will be collected.

Through understanding unmet surgical need, better policy can be crafted to augment surgical systems.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Scott Corlew](#) on Fri, 15 Mar 2019 14:56:53 GMT
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Determining the unmet need as well as the actual usage of surgical care within the purview of Universal Health Care is critical for LMICs to be able to develop and implement initiatives that can improve access and quality. Current data regarding this are largely from the perspective of the health care system rather than that of the people who are actually affected. Consequently, unmet need is almost entirely currently found through modeled data. The human level at which DHS can learn about needed but not accessed as well as accessed surgical care as well as accessed care is a major step forward for LMICs in their pursuit of adequate UHC. The questions suggested here for DHS are well-crafted and should be included in the survey tool.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Peacemaker](#) on Fri, 15 Mar 2019 17:11:45 GMT
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Please see attachment for question flow

File Attachments

1) [DHS 8 questions 04.03.19 VSedits .xlsx](#), downloaded 645 times

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [djumbam](#) on Fri, 15 Mar 2019 18:31:39 GMT
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It seems to me that most of the data on unmet need of surgical care in the world we have right now is modeled. While this is helpful to get a sense of what the unmet need is, it is not enough. This is also true of surgical volume. These indicators go hand in hand and should be strongly considered for inclusion in the DHS work.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Aboatin](#) on Fri, 15 Mar 2019 18:57:50 GMT
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The DHS provides the best platform to systematically collect standardized data on surgical volume and unmet need. This is critically needed data to inform efforts to provide universal health care. I fully support the inclusion of these questions in the DHS

Adeline Boatin

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [dominiquevervoort](#) on Fri, 15 Mar 2019 19:05:26 GMT
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The poorest third of the world's population, according to estimates, only receives 6% of all surgical procedures. Understanding which populations and where are receiving which procedures allows us to intervene where needed: are people in need receiving life-saving or life-changing surgical care, for post-partum complications, congenital malformations, road traffic incidents, cancer, etc.? Integrating this component within DHS allows for properly helping the people in need by highlighting the exact areas and scope of need.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [ptruche](#) on Fri, 15 Mar 2019 19:08:32 GMT
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Data on unmet surgical needs is a core component of understanding the scope of noncommunicable diseases on developing countries. This would provide a broad indicator that would be useful for a variety of applications in health systems research and should be added to the DHS survey.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [anm156](#) on Fri, 15 Mar 2019 19:26:54 GMT
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Reliable epidemiological data on surgical care is sparse, and the data that does exist is often not collected in a standardized manner. DHS efforts to collect this data would go a long way to address this and create a systematic, widespread process to assess unmet surgical need around the world. In order to properly assess surgical systems, overall health systems, and ability of countries to achieve Universal Health Coverage, this data should be collected.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Vicente Gracias](#) on Fri, 15 Mar 2019 19:31:25 GMT
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Endeavors to better characterize overall surgical expenditures and their related effects, good and bad, are essential to better codify unmet needs of noncommunicable disease

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Jordan Pyda](#) on Fri, 15 Mar 2019 19:44:44 GMT

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The DHS provides the best approach for systematically collecting standardized data on surgical volume and and unmet surgical need. This is incredibly important data. I fully support the inclusion of these questions in DHS. Jordan Pyda MD MPH jpyda@bidmc.harvard.edu

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Adelina Mazhiqi](#) on Fri, 15 Mar 2019 19:44:47 GMT

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Data on surgical volume remains limited. Being closely related to unmet surgical need where data is mainly modeled the DHS can offer a solution in collecting accurate and representative data on these indicators. Subsequently, this information can be utilized for improving access to surgical services and prioritizing surgical health policy on national health agendas.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [RPatterson](#) on Fri, 15 Mar 2019 19:45:55 GMT

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Governments are currently limited in their ability to develop context-specific policy interventions and care delivery structures due to the paucity of surgical data in many countries. By supporting collection of surgical data through these questions, the DHS will be able to help international and national bodies to develop the most effective interventions to address areas with the highest unmet need.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [tjpease](#) on Fri, 15 Mar 2019 19:48:13 GMT

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Surgical system development is the next frontier of public health. Development must be driven by data, and the DHS program is uniquely able to supply necessary baseline data on surgical volume and need.

Tyler Pease

Medical Student

Rutgers - Robert Wood Johnson

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [ocahearn](#) on Fri, 15 Mar 2019 20:08:28 GMT

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Data on surgical volume and unmet need should absolutely be incorporated into the DHS survey in order to obtain internationally comparable data and improve access to safe surgical care.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [JohnMeara](#) on Fri, 15 Mar 2019 20:09:52 GMT

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It is absolutely critical to collect data on surgical volume and unmet need in order for countries to make strategic and tactical decisions around health system strengthening. I full support these indicators.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [rachelne](#) on Fri, 15 Mar 2019 20:10:34 GMT

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Indicators are necessary to have a common language, objectives and variables to discuss research and data that is collected. This is needed to further advance care

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [blakealkire](#) on Fri, 15 Mar 2019 20:16:50 GMT

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We cannot achieve UHC without surgery, anesthesia, and obstetrics, and thus we cannot know if UHC has been achieved if we cannot describe basic metrics such as unmet need for surgery.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Cstrader1](#) on Fri, 15 Mar 2019 20:19:27 GMT

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Unmet surgical need is an increasingly visible issue. Questions such as these are vital to inform and guide national surgical planning globally. As resources are finite, collecting this information will certainly help to allocate resources where they are needed most.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [shehnaz Alidina](#) on Fri, 15 Mar 2019 20:21:25 GMT

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I fully support these indicators:

1. Surgical Unmet need
 2. Surgical volume
-
-

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Haitham.Shoman](#) on Fri, 15 Mar 2019 20:26:34 GMT
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It is about time the right questions are being asked at the right time to the right people! Thank you everyone for bringing this on the table.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [cjuillard](#) on Fri, 15 Mar 2019 20:29:36 GMT
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I support the addition of these questions to help Ministries of Health and other agencies understand how to improve access to surgical care. These data will set the foundation for estimates of unmet need and other critical information necessary to strengthen surgical systems globally.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [kgarringer](#) on Fri, 15 Mar 2019 20:34:06 GMT
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Efforts by the DHS to collect data regarding surgical volume and unmet surgical need would be unprecedented. It is exciting to see both proposed as indicators, which both would impact policy decisions regarding UHC and surgery worldwide.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Cstrader1](#) on Fri, 15 Mar 2019 20:39:20 GMT
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Exactly right - we need to fix this!

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [AlexPetersMD](#) on Fri, 15 Mar 2019 20:43:07 GMT
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As a general surgeon and public health researcher, we currently have little data to truly understand the burden of surgical diseases and the surgical capacity in many countries around the world. We need to understand the surgical volume and unmet need in countries around the world in order to make effective policy and implementation decisions in line with WHA Resolution 68.15.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Cstrader1](#) on Fri, 15 Mar 2019 20:43:47 GMT

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So great to see medical students aware of this important issue. Education = improvement!

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Yves Jacket Nsavyimana](#) on Fri, 15 Mar 2019 20:45:09 GMT

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In the developing country, we miss a lot of data related to surgical care knowing that the demand for surgical care is increasing every year in the world. A DHS survey is so important.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [SebastianShu](#) on Fri, 15 Mar 2019 20:46:03 GMT

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Surgery is an essential component of health care. Despite this fact, there is not enough efforts. Data in regard surgical volume and unmet need is urgently needed to take action now.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [gmenon](#) on Fri, 15 Mar 2019 20:47:11 GMT

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Much of the surgical care, particularly in rural parts of LMIC's, is provided 'off the record'. Even less is known about those who never seek surgical care. Having accurate data on surgical volume and the unmet need is critical to planning sustainable interventions.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [Ulrick Sidney](#) on Fri, 15 Mar 2019 20:47:41 GMT

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Surgery is part and parcel of healthcare yet more than two thirds of the world's population does not have access to safe and affordable surgical care. Many obstacles to safe surgical care have been identified like out-of-pocket expenditure, low surgical volume and low surgical workforce density. What is tragic is that of the very small percentage that has access to surgical care, a considerable proportion either die, become poor or become poorer. This means that access to surgery alone is not enough but it equally needs to be safe and affordable. In order to make this possible we need to collect more data. This data can help us better comprehend the situation on a global, continental, regional, national and provincial level. This is important because we now have proof from Brazil and India that access to safe and affordable surgical care can vary tremendously

even at the national level. Getting this data will equally help us evaluate the impact of national and international public health policies. Why is this important? It is important because you cannot evaluate what you do not measure.

For these reasons, I believe that it is capital for the DHS program to incorporate global surgery related indicators. Fortunately, the Lancet Commission on Global surgery did an amazing job defining six indicators that equally have the benefit of falling in line with the sustainable development goals.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [SBari](#) on Fri, 15 Mar 2019 20:52:46 GMT

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These are very informative indicators that are important to collect regularly, systematically, and globally. DHS is a great fit.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [CLReddy](#) on Fri, 15 Mar 2019 21:17:28 GMT

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I fully support the inclusion of these survey questions and indicators into DHS 8. Surgical unmet need is currently based on modeled data. If we are going to make any progress on the global health goals, namely: UHC, improved PHC and the WHO's triple billion goals, we must be able to better quantify surgical unmet need if health systems are to be able to respond to the epidemiological shifts that come with "modernity".

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template

Posted by [PGSSC](#) on Fri, 15 Mar 2019 21:30:50 GMT

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We would like to thank everyone who have been supporting our submission. We have read all your replies and we are delighted to see such support and commitment from the Global Surgery and Global Health community.

Attached is a list of signatories who also have provided their support towards our submission:

1. Professor Chris Lavy - University of Oxford
2. Mr. Andrew Leather - Kings College London
3. Dr. Lars Hagander - Lund University
4. Dr. Hampus Holmer - Lund University
5. Dr. Martin Veller - University of Witwatersrand
6. Dr. Emmanuel Ameh - Abuja National Hospital
7. Dr. Margaret Kruk - Harvard TH Chan School of Public Health

The Program in Global Surgery and Social Change (PGSSC)
Harvard Medical School

File Attachments

1) [Signatories supporting PGSSC modules submission to DHS 8.pdf](#), downloaded 1729 times

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Rachel Koch](#) on Fri, 15 Mar 2019 21:33:20 GMT
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It is critical to collect data regarding surgical volume and the unmet need in order for governments to build stronger healthcare systems to meet the needs of their specific populations.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Kee Park](#) on Fri, 15 Mar 2019 21:49:10 GMT
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Surgical unmet need and volume inform the necessary workforce and service delivery gaps critical for policymakers and healthcare workers in planning for capacity building to sustainably meet the need.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Dr. Ernest Barthélemy](#) on Fri, 15 Mar 2019 21:51:01 GMT
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Unmet need for surgical care, and surgical volume, are both fundamental elements of health system performance. Including these two indicators in the DHS would empower health systems to collect and track data that will enable health system strengthening and development, especially in low- and middle-income countries. I fully support the inclusion of these indicators in the DHS.

PGSSC wrote on Mon, 04 March 2019 16:42 Thank you for reviewing our proposal for new indicators within the Demographic and Household Survey (DHS) regarding emergency and essential surgical care. The collection of these indicators is a critical step towards the delivery of safe, affordable, equitable access to surgical services as a component of universal health coverage and we consider the DHS as the best forum to derive these data points.

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Proposed Indicators:

1. Surgical Unmet need
2. Surgical volume

Data Utility:

1. Inform and guide national surgical planning
2. World Bank: World Development Indicators

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [LukeCaddell](#) on Fri, 15 Mar 2019 22:21:19 GMT
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I fully endorse this inclusion. These are key data elements that will help to guide the development of national and provincial surgical planning. As countries worldwide begin to undertake these measures, they need quality data that addresses the components of unmet surgical need and current surgical volume. The powerful mechanism of DHS is perfectly suited for capturing this data.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [LRoa](#) on Fri, 15 Mar 2019 23:13:42 GMT
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Unmet surgical need and surgical volume are not consistently tracked in most LMIC. In order to address diseases amenable to surgical management and avert mortality and morbidity it is essential to obtain data on number of surgical procedure done and unmet surgical need

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [hfooster](#) on Sat, 16 Mar 2019 00:13:03 GMT
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I support the inclusion of these indicators. Both indicators-surgical unmet need and surgical

volume- will help guide appropriate decisions regarding health system strengthening.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [vsanthirapala](#) on Sat, 16 Mar 2019 01:09:23 GMT
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Collection of surgical volume indicator is a key recommendation of the Lancet Commission on Global Surgery. With the provision of surgery, it is estimated 16.9 million deaths annually could be minimized owing to surgery's place as a core component of the healthcare system. Yet data to track surgical volume is woefully lacking. Unmet surgical need is essential for assessing the barriers to care which may be financial, social/cultural, geographical and so forth. The unmet need data set will enable ministries to strengthen their surgical system in a targeted fashion. The sheer magnitude of death and disability associated with not having a surgical system means it is entirely appropriate that these indicators are placed in the core modules.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Robert Riviello](#) on Sat, 16 Mar 2019 01:19:38 GMT
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Until we act as a global community to address holistic health needs of populations, we will not reach SDGs. An essential and long understudied (and likely underestimated) is the provision of surgical care. But we can't improve what we haven't measured. I support this addition to the DHS.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Jacob.Lepard](#) on Sat, 16 Mar 2019 01:46:34 GMT
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The indicators proposed in this module have huge implications for categorizing the global burden of surgical disease that is unmet. I strongly support their inclusion.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [IsaacWasserman](#) on Sat, 16 Mar 2019 02:27:16 GMT
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As powerful as modeling studies are, the only way to progress past the realm of the theoretical, and anchor ourselves in the realm of the real is to collect robust data. When surgery playing a role in nearly 1/3rd of all human disease, I can think of no better area to invest in better data collection. This will help evaluate ongoing projects, as well as steer new ones. Thank you for expanding into this important sphere.

Subject: Re: DHS-8-PGSSC-Men_and_Women-Template
Posted by [Emily Smith](#) on Sat, 16 Mar 2019 03:12:29 GMT
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The unmet surgical need is an integral metric needed to design targeted and strategic interventions in LMICs. Without measuring the burden quantitatively, rather than through modeling, the underlying epidemiological burden cannot be accurately assessed.
