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M Alazraqui
E Mota
H Spinelli

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Recommended Citation
Objective: To reflect on the use of health information systems (SIS in Spanish and Portuguese) and their impact on reducing inequalities in health care from the local administration.

Methodology: Analytical and interpretive.

Results: The authors identified limitations and difficulties in health information systems which indicate that the systems condition and restrict management because they are related to simple, stable concepts, giving them a static quality that follows strict obedience to standards. This means that the systems are "simple and closed." The rising volume of data and information on health also increases the difficulty of finding appropriate applications for this information.

Some of the problems that the authors highlight are, among others, unsystematic records, the absence of magnetic media, databases not formally institutionalized and overlap and inconsistency between similar databases.

For the authors, the information is only one set of data processed, while the production of knowledge consists of understanding the phenomenon and its relationship to the subject. Communication is the backbone linking the concepts to action. Local management must prioritize strategic actions and communication.

The hypothesis held in this work is that for a health information system to provide real support to the local management it must be conceived as an articulation of data, information, knowledge, communication and action (DICCA, in Spanish). This scheme is proposed as a guide to the production and implementation of health information at the local level.

Conclusions: For the authors, Health Information Systems (SIS), viewed as processes that articulate information and communication with action should support local management aimed at eliminating inequalities in health and in construction of an inclusive society.