





# Webinar Series: Cross Country Learning on Community Health System Integration and Financing

## Context

The COVID-19 pandemic has demonstrated the inequalities in health systems within and between nations. With nearly 200 million cases detected to date and over 4 million deaths globally, the pandemic has added additional pressure to underfunded health facilities and disrupted the provision of essential health services that could result in backtracking years of progress made.

Cognizant of the critical role community health systems play in the response to the pandemic, the *African Union Commission - Africa CDC* and the *Ellen Johnson Sirleaf Presidential Center for Women and Development* coordinated a Webinar series co-hosted by H.E. Ellen Johnson Sirleaf and Dr. John Nkengasong. The goal of the two-day event was to discuss the immediate role community health workers have in the health, economic and social recovery of Africa including the need for coordinated and integrated investments for robust community health systems that blend pandemic preparedness and response activities, and the continuation of essential health services beyond it. The webinar series also served to share experiences, triumphs and challenges with implementing and scaling Africa-CDC Partnership to Accelerate COVID-19 Testing (PACT) initiative.

"Now is the time for the world to think boldly. Now is the time to innovate and collaborate. It is a time to advocate for what is possible... is not about talking. It is about doing, and community health workers have made the way." - H.E. Ellen Johnson Sirleaf

H.E. Ellen Johnson Sirleaf, former President of Liberia, and Dr. John Nkengasong, Director of Africa CDC were joined by representatives from Cameroon, Democratic Republic of Congo, Egypt, Ethiopia, Ghana, and Uganda. The webinar -- translated into Arabic, English, French, and Portuguese -- was attended by over 800 participants from governments, implementing partners, and funding institutions as per the breakdown in annex 1.





# **Key Takeaways and Recommendations**

Based on the experiences shared by the African Union country representatives, a set of key takeaways and recommendations have been compiled below. The goal is to help stakeholders surge high-quality community-based programs, anchored in frontline health workers, as they respond to COVID-19 and work to achieve the universal health coverage agenda.

"Community health workers ... can truly be the nexus between universal health coverage and health security, as they can improve access and uptake of health services, sanitation and hygiene, and primary health care to the community and improve overall health outcomes." - Dr. John Nkengasong

## 1. Community health systems strengthening

- a. Leverage partnerships and coordinated efforts at continental, regional, and country-level
- Establish a database for the mapping of existing community health resources (e.g. number of community health workers, tools, partners) by type, geographic scope, and thematic area
- c. Countries need to evolve their health services model in accordance with the epidemiological context and introduction of new innovations
- d. Ministries of health, implementing partners, and donors must develop a comprehensive and streamlined approach to assess progress, impacts, and risks of their programs while creating feedback loops for system improvements
- e. Country cross-learning opportunities and platforms should be increased as they help in the sharing of real and practical (not theoretical) tips. Such opportunities include these webinars, country exchange programmes, and others.
- f. Professionalization and compensation of frontline health workers provide significant employment opportunities to vulnerable and rural communities while reducing gender inequities. It is and should be a top political priority

"The Community-based Health Planning and Services (CHPS) became a top national political priority. Irrespective of the government in power, political will and commitment remains high as community health workers provide a link between politicians and the people's needs." - Ghana Ministry of Health Representative

## 2. Integration of community health into national health systems

g. Integration of community health programmes into the broader national health system addresses the challenges of sustainability by ensuring high political commitment, coordination of national policies, and support from partners

- h. Mapping the different Community-Based Surveillance strategies and implementing partners in the country improves the coordination between stakeholders for maximum impact
- i. Ensure the continuity of Community-Based Surveillance activities by developing an action plan that ensures coordination of all stakeholders in its execution
- j. Strengthen the capacity of health district actors to assess the risks of a public health emergency

## 3. Digitalization of community health systems

- k. Develop a country roadmap to standardize and scale the integration of digital tools within community health systems, standardizing the use and functionalities of the digital tools while strengthening data use and reporting
- I. Explore offline digital tools as an alternative or preferred option to address connectivity challenges in remote areas

## 4. Compensation and sustainable financing of community health systems

- m. Investing in community health systems in Africa yields a return of up to \$10:1
- n. Advocacy is needed to prioritize, increase and accelerate the financial support for community health system strengthening
- o. Advocacy for increased and coordinated domestic and external investment in community health systems is required from all actors involved
- p. Consistent engagement and timely payment of community health workers, through employment or standardized stipends, is critical for motivation and impact
- q. Government domestic contributions to community programs should be secured, consistent, and increasing over time to eventually substitute donor contributions
- r. Consider alternative sources of financing for community health (e.g. health insurance)

# **Moving forward**

The cross-country webinar experience showcased the wide interest existing across the continent to make community health systems a top political priority. It also demonstrated the dire need to catalyze new and coordinated levels of investments to hire, train, protect and retain digitally empowered community health workers.

#### What is next?

## → Make community health systems a top national political priority

Panelists encouraged the audience to move from words to actions under the global efforts to mitigate the COVID-19 pandemic. This requires a whole-of-government approach that brings together funding institutions and implementing partners to support country-led strategies. Stakeholders must engage with government representatives, leveraging the African Union commitment to achieve 2 million community health workers and evidence-based resources, to make long-lasting commitments to prioritize, increasingly invest and uplift this crucial workforce that creates health, wealth, jobs, and security for everyone, everywhere.

## → Increase the level of investments for community health systems

Community health systems are as strong as the investments injected. To eliminate the \$4 billion funding gap community health is facing in Africa, COVID-19 funding from domestic and external resources must align to scale up community health workers for the pandemic response who can then be integrated into the routine public health system.

"Investing in community health systems is a smart investment" - Dr. Ahmed Ogwel Ouma

## **Annexes**

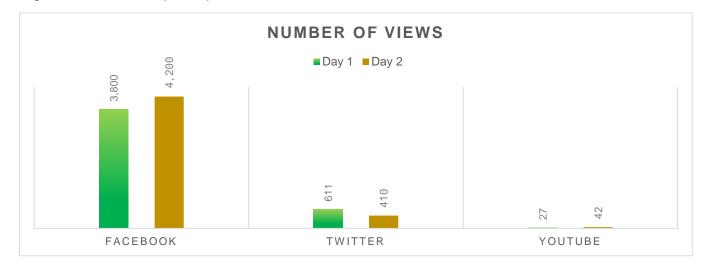
#### 1. The Attendance

Table 1: Number of participants on Zoom and their distribution by category

Schedule	Number of participants	Number of government representative	Number of partners
Day 1	385	76	266
Day 2	446	100	320
Cumulative total number of participants	831	176	586

Source: Africa CDC IT Department

Figure 1: number of participants in other social media



Source: Africa CDC IT Department

#### 2. Links to the Recorded session

<u>Day 1</u> (Password: 52I5\$4^^)
<u>Day 2</u> (Password: bBcQ&1!9)

#### 3. Links to the Presentations

#### Day 1:

 $\frac{https://docs.google.com/presentation/d/1kCo95XIRk7oAG1kmhKlusUQJqvNo2GGYtuVfF1HLgas/edit?usp=sharing}{}$ 

#### Day 2:

https://docs.google.com/presentation/d/1ILCm3cmt3RH-RR8aTNa3RgLvocPMCn0r6G-L-GyKn-0/edit?usp=sharing

#### 4. Poll summary

 $\underline{https://docs.google.com/presentation/d/1SKZ2w2AUsYFWemUKT5u5nFhZua5YuGMm5bu8sEN\_7hQ/edi}\\ \underline{t?usp=sharing}$