Institutionalizing Community Health: Ten Critical Principles

In March 2017, nearly 400 community health champions from 44 countries, representing multiple sectors, gathered in Johannesburg to share global and country specific evidence and lessons and identify opportunities and challenges – financial and human resources, programmatic, and socio-political – for institutionalizing community health as an integral component of primary health care in order to transform the future and ensure that every mother, newborn, and child not only survives but thrives in the Sustainable Development Goals era.

Champions of community health – including government officials, civil society and private sector leaders, policymakers, sub-national managers and practitioners, researchers, representatives of bilateral and multilateral organization and donors – outlined 10 critical principles that they recommend countries focus on to accelerate progress in health.   To ensure that progress is made towards strengthening community health systems, all community level actors/groups and social networks, formal and traditional systems as well as all sectors with effects on health, will need to join forces to achieve the promise of health for all.

1. Engage with and empower communities to build viable and resilient community health systems with strong links to health and other relevant sectors

A growing body of evidence and country experience supports the effectiveness of diverse roles of communities in strengthening health and other systems that improve health. Community actors/groups and social networks in both formal and traditional local systems should be empowered and engaged to contribute to systems strengthening through roles encompassing service delivery, oversight for delivery, social and behavior change, and social accountability. We commit to a bolder vision of health systems strengthening that embraces context-specific opportunities and challenges for integrating community actors/groups and social networks in health and other sectors and strengthening their linkages with the formal health system to improve outcomes.

2. Empower communities and civil society to hold the health system accountable

Global and national stakeholders need to recognize and address current power imbalances and support empowerment of communities and authentic citizen voice, capable of holding service providers, governments, NGOs, and others accountable. Constructive community accountability strengthens good governance, improves access to health services, and contributes to the standards for improving the quality of health services.

3. Build integrated, resilient community health systems based on recognized frontline health workers

Communities and civil society are the driving force for building a resilient and holistic health system. System strengthening should include activities and strategies that extend the health system elements and interventions to the community level. This includes strong leadership, supportive policies, effective systems for management of commodities, and an empowered, remunerated or incentivized, and supported frontline health workforce that includes community health workers, as well as empowerment of communities to provide support to community health workers and play an active role in improving their own health.

4. *Implement national community health programs at scale, guided by national policy and local systems context, to ensure impact*

Reaching the Sustainable Development Goal 3, Global Strategy for Women's, Children's and Adolescents Health, and Human Resources for Health targets requires that countries commit to scaling up evidence-based quality community health interventions to achieve and sustain effective coverage at scale.   Community health programs should focus on ensuring availability of a package of evidence based health interventions adapted to address local epidemiological priorities and implementation bottlenecks. Scale up should follow national policies and strategies, build on existing health and community systems, include a commitment to reaching vulnerable and underserved populations, and be phased and guided by local context.

5. *Ensure sufficient and sustainable financing for community health systems is based on national and international resources, includes the private sector, and contributes to reducing financial barriers to health*

Strengthening community health systems can be designed to be cost-effective and sustainable and is a smart investment in the country's social capital and human resources that can result in significant economic gains. Sustainable financing mechanisms, including a diverse range of investment sources across all sectors, are essential for community health programs to contribute to achieving and sustaining effective coverage at scale.

6. *Program to reduce health inequities and gender inequalities*

There needs to be a special focus on vulnerable and underserved populations. Policy makers must employ pro-equity approaches that mainstream women's and community engagement and empowerment if they are to achieve SDG 3 and SDG 5 targets. Pro-equity approaches can be more cost-effective than traditional approaches, and only by explicitly pursuing them are countries likely to achieve and sustain effective coverage at scale. Community health systems, designed with equity as a core principle, can significantly contribute to this goal.

7. *Ensure that communities facing humanitarian crisis receive essential healthcare, particularly at the community level*

In times of stability, strong community health systems, integrated in the primary health care system, build resilience and the ability to respond to humanitarian emergencies effectively and in a timely manner. During humanitarian emergencies there is an even more urgent need for a health system that is inclusive of well-functioning and robust partnerships with communities, and ensures that that essential preventive and curative interventions are made available at community level, using and strengthening existing community health systems and is fully part of the humanitarian response plan developed by the emergency health cluster.

8. *Invest in the development of inclusive partnerships to leverage and coordinate diverse civil society and private sector actors to support national acceleration plans and enable communities to shape and support the implementation of policies*

Inclusive and data driven multi-stakeholder partnerships are essential for global and national acceleration plans in health and should be designed to leverage and coordinate partners and communities in health and other relevant sectors while elevating community participation and voice in national policies and local systems. We commit to

Institutionalizing Community Health Conference
27-30 March 2017 | Johannesburg, South Africa

strengthening inclusive partnerships that mobilize a range of actors -- including representatives of governments, civil society (e.g. local and international NGOs, academia, professional associations, media), private sector, and underserved populations themselves-- with clearly defined, harmonized roles and measures of success to improve equitable outcomes at scale and promote mutual accountability.

9. Integrate community data into the health information system, including investment in innovative technologies

Health information systems should be integrated at all levels, with key indicators of community health activities included. This includes novel strategies and technologies, which can help countries make informed decisions, accelerate progress and tackle challenges to bring effective promotive, preventive, diagnostic and treatment services to communities.

10. Employ practical and participatory learning and research to identify, sustain, and scale up effective community interventions while providing opportunities for country-to-country lesson sharing and informing a shared global learning agenda

In order achieve the ambitious community health systems agenda embodied in these principles, there needs to be investment and engagement of implementers and researchers in real-time research, monitoring, evaluation, and learning.   This should include a focus on how to:

- Adapt and support proven community interventions to fit context, sustain and scale up effective approaches for engaging and empowering communities in diverse systems; and,
- Improve the coverage, quality, and equity of key community health services at scale.

Researchers, implementers, and policy makers need to develop and use novel methods to evaluate and build and use evidence for complex health interventions in dynamic, context specific systems and employ knowledge management approaches that position practitioners and communities at the center. The capacity for doing this research needs to be built not only at academic institutions within the countries concerned but also among implementers themselves.

This is the time for community leaders, policy makers and community health champions to lead this paradigm shift in health systems. Now we must build robust community health systems, supported by empowered and engaged communities, as a foundation of effective and comprehensive health systems that can accelerate progress towards ensuring healthy lives and promoting well-being for all, save lives of millions of children, adolescents, and women and provide opportunity for them thrive and transform the future.