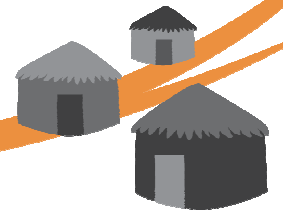
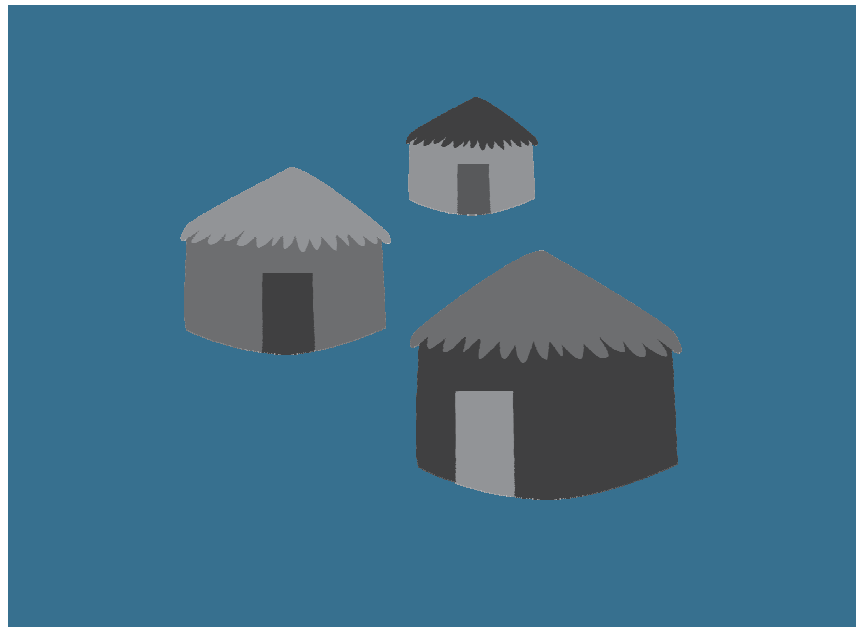


Institutionalizing Community Health Conference



27-30 March 2017 | Johannesburg, South Africa



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Joint Health-Community Systems Support to CHW Programs: Partner Insights from the Integrating Community Health Investment Platform

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OVERVIEW

In order to address the problem of poor health outcomes, especially in rural areas, the Liberian government committed to develop a comprehensive and robust community health program that connects remote communities to the public health system.

This presentation describes two key challenges:

- Developing the Revised Community Health Services Policy, that sets foundation for a national CHW program
- Moving from policy development to program design and implementation

We want to highlight how the Ministry of Health used multi-stakeholder, systems strengthening approaches to address both of these challenges, and how we aim to continue moving forward as Liberia's National Community Health Assistant Program launches.

THE PROBLEM: POOR NATIONAL HEALTH OUTCOMES

National Indicators	Liberia	Ethiopia	USA
Maternal Mortality per 100,000 live births	1,072	420	28
Under-5s Mortality per 1,000 live births	94	64	7
Infant Mortality per 1,000 live births	55	43	6
Neonatal Mortality per 1,000 live births	25	29	4
Malnutrition Prevalence (% of children under 5)	15%	25.2%	0.5%
Life Expectancy at Birth (years)	61	64	79



KEY FACTS

- Population: 4,195,666
- Unemployment: 85%
- Health expenditure per capita: \$46
- 1 health worker : 3,472 people

- Even prior to the Ebola outbreak, Liberia had the 3rd worst maternal mortality rate in the world – but had been making some significant gains child health, falling to 24th worst in under-5 mortality rates globally in 2013.
- Post-Ebola, the country is now working to rebuild and recover against expected further drops in its national health outcomes.

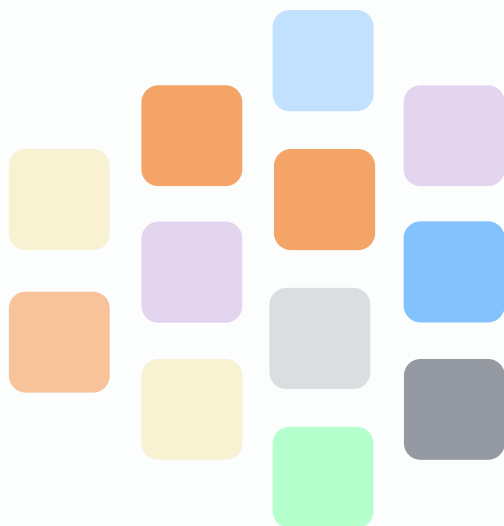
Source: World Development Indicators, (2013)

**Nearly 1.2 million Liberians live
outside the reach of any health
facility (beyond 5km)**



BUILDING A BETTER HEALTH SYSTEM

Fragmented community health
volunteer programs



A high quality, unified CHA
program



- Partner led, complicates MOH oversight
- Uneven incentives, training and service packages
- Varying quality and staff performance
- Difficult to measure impact due to differing M&E
- Unclear resource needs, difficult to sustain

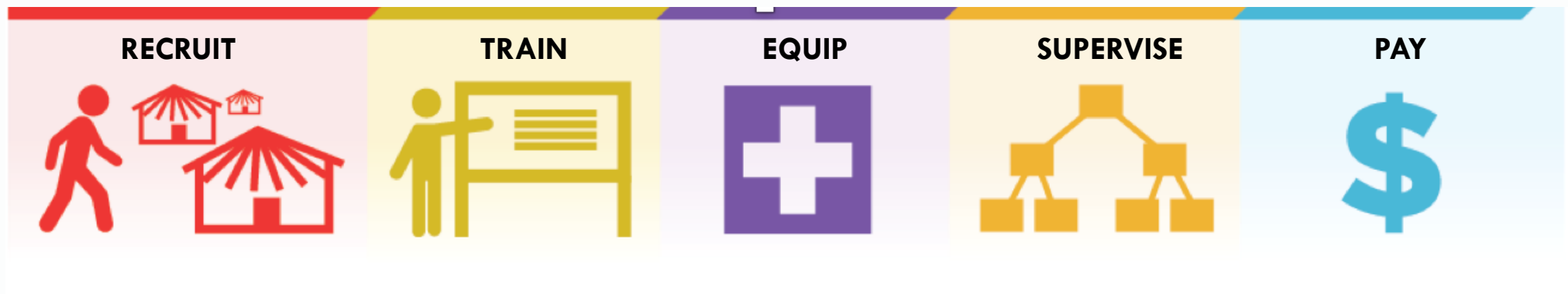
- MOH led, partner supported, streamlined oversight
- Standardized incentives, training and service packages
- Consistent quality and performance standards
- Consistent M&E data systems and indicators
- Transparent resource needs, economies of scale

PROPOSED SOLUTION

A national program to place a professional Community Health Assistant (CHA) in every remote community in Liberia

The Ministry of Health's **vision** for Liberia's National Community Health Services is a coordinated national community health care system in which **households have access to life-saving services and are empowered to mitigate potential health risks.**

Source: Revised National Community Health Services Policy



REVISING THE NATIONAL POLICY: THE MINISTRY BROUGHT EXPERTS AND PARTNERS TOGETHER TO PLAN AND LAUNCH THE NATIONAL CHA PROGRAM

Health Sector Investment Plan 2015-2021

The Ministry included the creation of a **National CHA Program** as part of a “fit for purpose” health workforce to build a resilient health system following the Ebola crisis.

Health Workforce Program

The **National CHA Program** was highlighted as an important priority in the Ministry’s effort to revitalize the health workforce.

National Community Health Services Policy

Ministry departments and technical partners came together to revise the community health policy to serve as a platform to launch the **National CHA Program**.

GOING TO SCALE: MAKING THE GOVERNMENT'S VISION FOR A NATIONAL COMMUNITY HEALTH ASSISTANT PROGRAM A REALITY

**4,000 CHAs serving 1.2 million people
living in Liberia's most remote communities
by 2021**

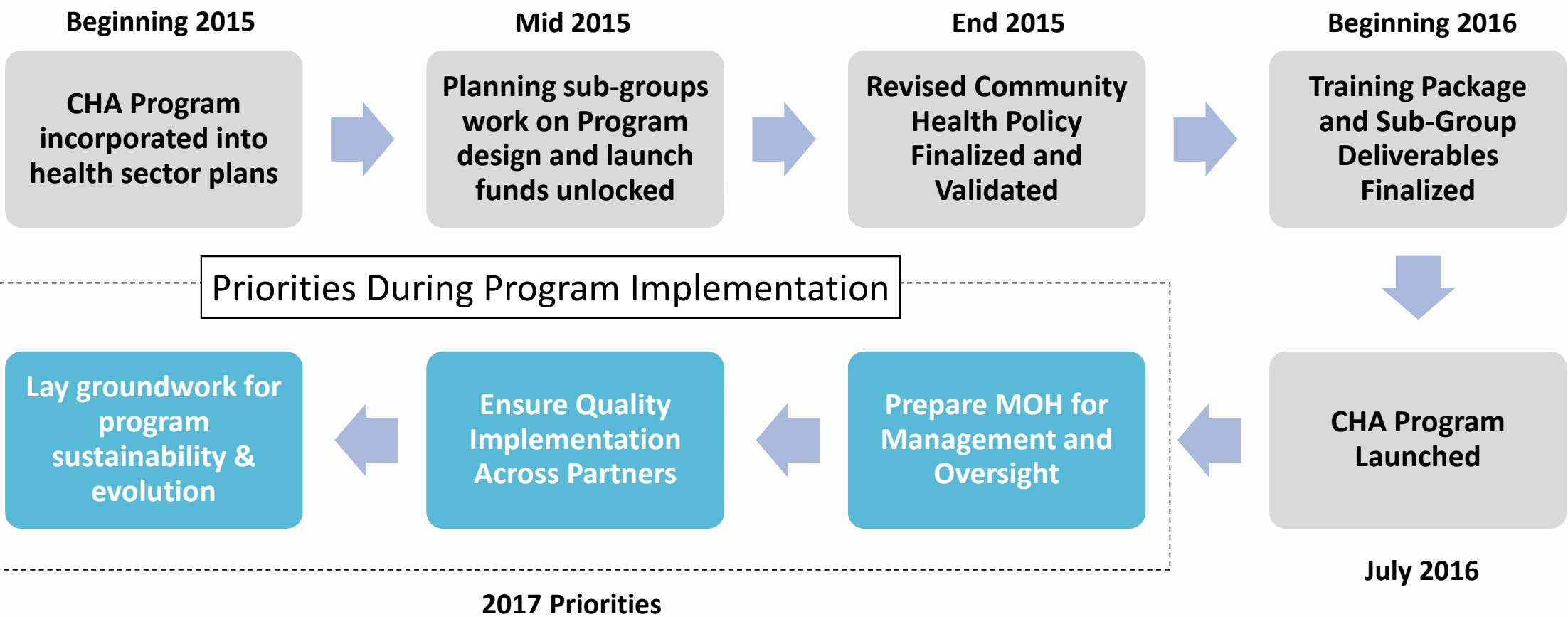
**Ambitious targets, strong network of
implementing partners**



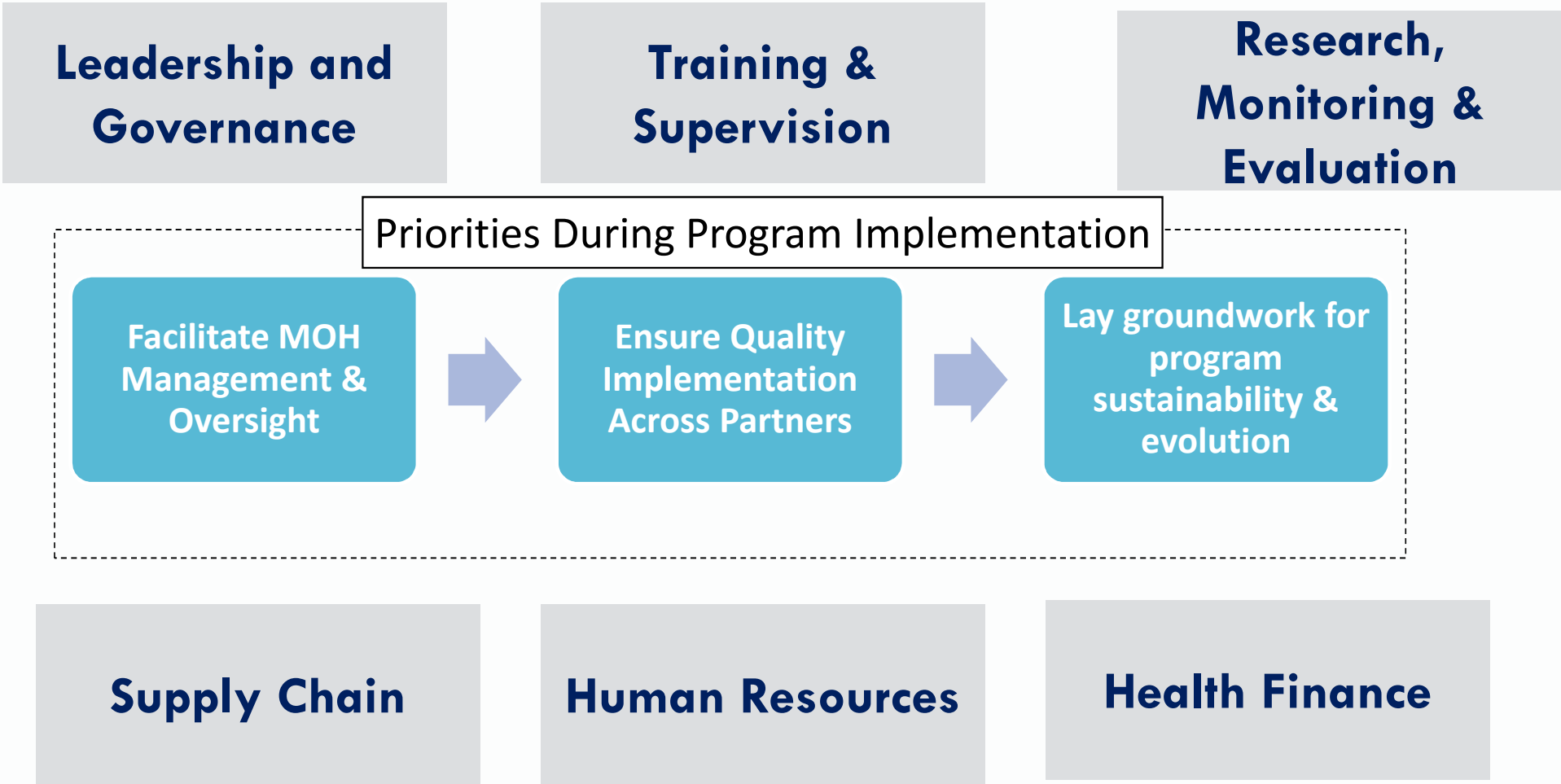
**Embedded within the public sector
health system**

**Strong evidence-to-policy focus with
a robust research strategy**

PROGRESS TO DATE & PRIORITIES



SYSTEMS SUPPORT NEEDED ACROSS THE PROGRAM





FROM POLICY TO PROGRAM

ICH PARTNER: LAST MILE HEALTH/ CHWS FOR ALL

Goal: Develop the capacity of the MOH and community-based stakeholders to oversee the **scaling up of a high-quality NCHA Program** that is informed by and accountable to the remote communities it has been designed to serve

Strategic Objectives:

1. Establish operational readiness at central and county levels for the introduction of the NCHA Program
2. Support the MOH to integrate and institutionalize the NCHA Program
3. Ensure continuous learning and quality improvement for NCHA Program implementation and accountability



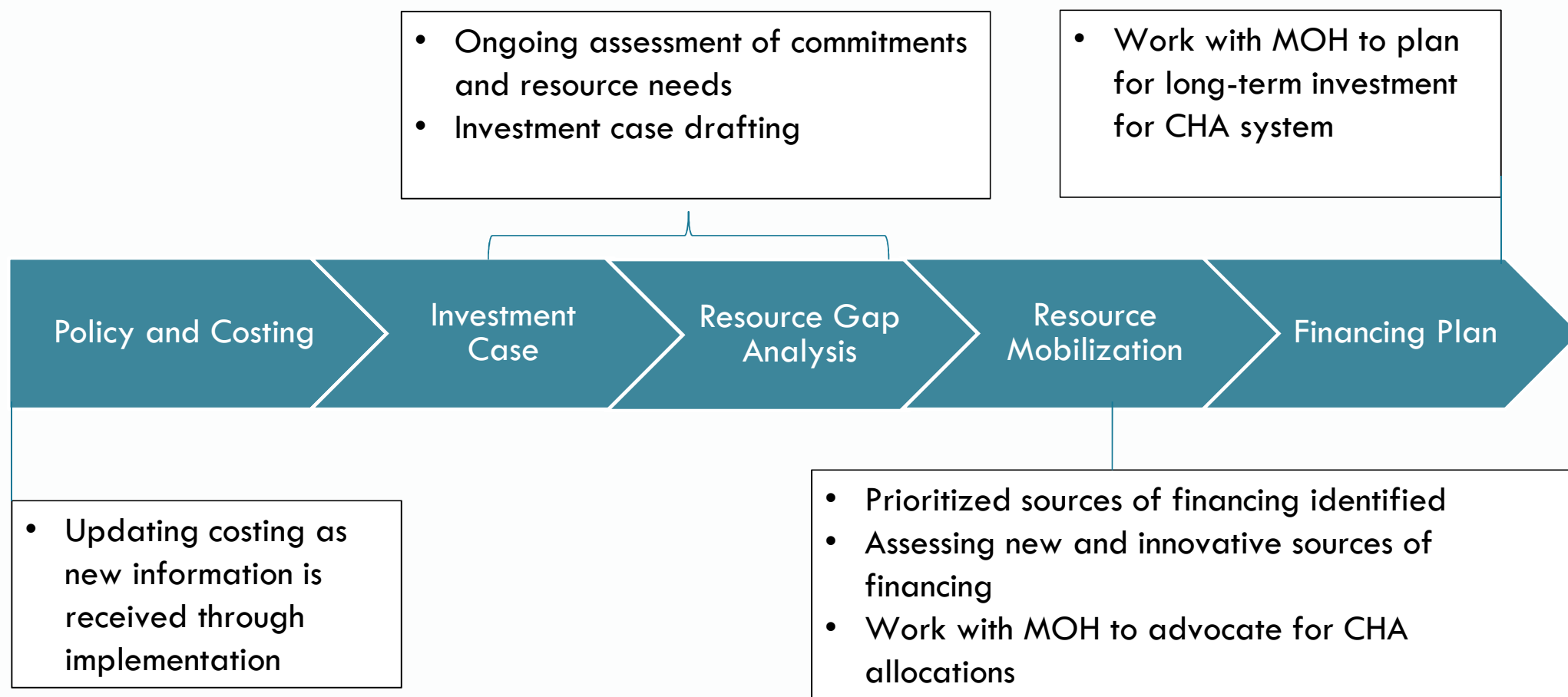
CHWS FOR ALL TECHNICAL ASSISTANCE

Last Mile Health's CHWs for ALL team is embedded across the MOH to help it realize its vision and address barriers to success. LMH targets its **technical support to cover all six health systems pillars**:

Leadership & Governance <ul style="list-style-type: none">• Executive Mansion• MOH Leadership• Other Ministries• CHSD• County Health Services	Service Delivery <ul style="list-style-type: none">• Technical Divisions/Programs (HIV, Nutrition, EPI)• Training Unit• Quality Management Unit	Health Financing <ul style="list-style-type: none">• Health Financing Unit• Office of Financial Management• Office of External Aid• Ministry of Finance
Human Resources <ul style="list-style-type: none">• HR & Personnel Departments	Supply Chain & Operations <ul style="list-style-type: none">• National Drug Service• Supply Chain Management Unit• Pharmacy Division	Research, M&E <ul style="list-style-type: none">• Health Monitoring Evaluation and Research Unit

LMH also serves as secretariat to the Community Health Services Technical Working Group and Steering Committee 14

HEALTH FINANCING SUPPORT FOR COSTING AND LONG TERM PLANNING



TRAINING, SUPERVISION AND QUALITY ASSURANCE

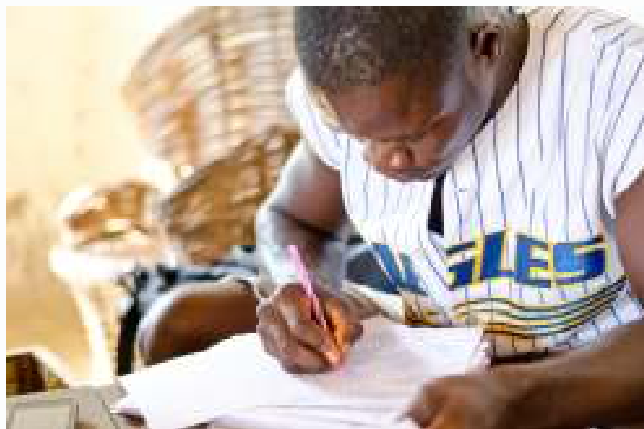


- Support Ministry of Health divisions to directly monitor training cascade for to assess and promote implementation fidelity
- Create a robust knowledge management platform for institutional knowledge retention/management
- Coordinate proposed technical assistance and capacity building support with relevant MOH units/divisions and other community health stakeholders, reviewing/developing capacity improvement plans
- Develop tools for monitoring visits and national reporting
- Conduct in-depth, on-the-job coaching at national and county levels
- Ensure feedback loops for data review and program quality improvements

RESEARCH, MONITORING & EVALUATION




- Strengthen **NCHA Program monitoring systems**
- Establishment of **Knowledge management** platform
Case study on lessons learned from implementation, with a focus on learnings around collaborative national policy engagement involving multiple stakeholders
- **Operational research study** on determinants of and barriers to program success and quality, from stakeholder perspectives at all levels
- **Continuous learning and improvement cycle** within the MOH through research and global learning activities





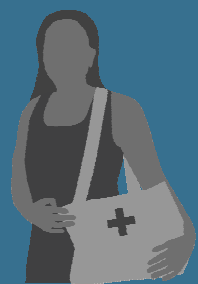
The Ministry of Health, and its
implementing partners are working
together to save lives in the world's
most remote villages



...by professionalizing community health workers – giving them the training, supervision, equipment and pay they need to perform.

“Community Health Workers play the most important and effective role in our fight against disease. It is they who have reached the most vulnerable, they who have been able to be the contact tracer, they who have been able without much training to take the risk to go out into the community and bring care.”

— Liberian President Ellen Johnson Sirleaf



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