Stories

from the field

60 SEC

summaries

UHC means that everyone, everywhere can access health services without experiencing financial hardship. The world was taking positive steps to deliver health for all by 2030 before COVID-19 fundamentally disrupted health systems, societies and economies. In less than a year, the pandemic has eroded the development gains achieved over the past 25 years.

The UHC Partnership, one of WHO's largest initiatives for international cooperation for UHC, is providing vital and timely support that is enabling countries to take advantage of the opportunity to emerge stronger from the pandemic. It is working to ensure that the investments made throughout the COVID-19 response will result in health system reforms that improve both health security and progress towards UHC.

Since 2020, WHO's UHC Partnership has been documenting how countries are reshaping their health systems amid one of the most devastating pandemics in history through a special series of stories from the field on COVID-19.

This publication of 60-second summaries from the published Stories from the field gives a flavour of the impact of work happening on the ground to achieve UHC.

Cover photo: A young Wayúu woman collects water to take to her community. ©PAHO/WHO/Karen González Abril.

Time is precious. Catch up on what you need to know in 60 seconds. Here are the short versions of our longer stories contained in the magazine **Stories from the field: special issue on COVID-19**.

About the Universal Health Coverage Partnership

The Universal Health Coverage Partnership promotes universal health coverage (UHC) by strengthening health systems through improving primary health care, governance, access to health products, workforce, financing, information and service delivery, and enabling effective development cooperation in countries.

The UHC Partnership's aim is to build country capacity and reinforce the leadership of ministries of health to build resilient, effective and sustainable health systems in order to make progress towards UHC. We aim to bridge the gap between global commitments and country implementation and are part of the UHC2030 global movement to build stronger health systems for UHC.

The UHC Partnership is funded by the European Union (EU), the Grand Duchy of Luxembourg, Irish Aid, the Government of Japan, the French Ministry for Europe and Foreign Affairs, United Kingdom - Foreign, Commonwealth & Development Office and Belgium.

Powered by the
Joint working team for UHC

Contents

Colombia responds to COVID-19 with an intercultural health model

FACT
During COVID-19, the Government of Colombia is using primary health care as one of the best strategies to both save lives and protect the customs and traditions of the Wayúu people who live in the remote Alta Guajira desert.

WHY IT MATTERS
In the spirit of the Sustainable Development Goals and universal health coverage, all countries should strive to 'leave no one behind' in health care and in responding to COVID-19. Reaching groups like the Wayúu is crucial.

IN PRACTICE
PAHO/WHO has supported and financed Alta Guajira health authorities to implement an intercultural health model with 16 indigenous community health workers who carry out surveillance and other essential health services.

EXPECTED RESULTS

The Wayúu people are able to access primary health care services and have the information they need to protect themselves and others against COVID-19 in ways that are aligned with their culture.

A nurse attends to a young patient at the ESE Hospital de Nazareth in Alta Guajira, Colombia. ©PAHO/WHO/Karen González Abril.

Donna Edwards, community health worker (CHW). ©Ministry of Health, Wellness and New Investment, Dominica.

Dominica's community health workers lead the fight against COVID-19

60 SEC SUMMARY

FACT
Dominica's health workforce has been overwhelmed due to staff shortages, increased demand post-hurricane Maria and the COVID-19 pandemic. So investing in community health workers is vital to strengthen the health system, provide essential health services and respond to COVID-19.

WHY IT MATTERS
Training community health workers helps bridge the gap in human resources for health. It increases the capacity to provide essential primary health care services and respond flexibly to community needs during the COVID-19 pandemic.

IN PRACTICE
Under the UHC Partnership, a cadre of community health workers received training in integrated people-centred care to provide essential PHC services. They have now adapted to provide COVID-19 education, quarantine, test and trace services.

EXPECTED RESULTS

Thanks to community health workers, people are better educated and empowered to care for aspects of their own health, adhere to public health messages, protect themselves against COVID-19 and help to prevent its spread. This saves lives.

Ethiopia prepared its health workforce for the COVID-19 Response

FACT

Ethiopia has increased its health workforce by recruiting 23,387 additional health workers to respond to the COVID-19 crisis and to ensure that essential health services are continued. It has also provided training to health workers to ensure safe and hygienic practices in all health settings.

WHY IT MATTERS

A solid response to COVID-19 depends on there being enough health workers at all levels, especially at community level, to ensure that people are optimally aware and protected against the virus and that they continue to access other essential health services.

IN PRACTICE

WHO has provided robust coordination and valuable technical support to assess and address additional health workforce requirements, and continues to provide strategic assistance for Ethiopia's national response to COVID-19.

EXPECTED RESULTS

Health services are available to all people nationwide, including in the rural areas, for both COVID-19 prevention and treatment and other essential health services.

Hospital staff at at Zewditu Memorial Hospital. ©WHO / Colin Cosie.

Georgia's experience during COVID-19 will inform its future primary health care approaches

FACT
Through the experience of tackling the COVID-19 pandemic, Georgia is learning that greater investment in rural infrastructure, telemedicine equipment and better communication systems is needed to reach all populations.

WHY IT MATTERS
Georgia was already committed to advancing primary health care (PHC) but the country's experience during COVID-19 has compelled the government to accelerated efforts to deliver accessible quality health services to all.

IN PRACTICE
WHO, through the UHC Partnership, is supporting the capacity building of organizations and individuals in Georgia to play a key role in shaping the strategic direction and implementation of PHC reforms and universal health coverage.

EXPECTED RESULTS
The revised design of PHC services envisions increased delivery of remote and digital services to improve access for rural populations, and ensure those services respond to people's needs and leave no one behind.

India From governance to community surveillance: Assam's 360 degree COVID-19 response

60 SEC SUMMARY

FACT
In the state of Assam, multi-pronged approaches, including strict quarantine measures, surveillance and activating a strong primary health care (PHC) network, have proved successful in managing the COVID-19 pandemic.

WHY IT MATTERS
PHC, at all times, particularly in times of crisis, is a solid way to engage the community and provide the health care services that people need. It is a crucial step towards achieving universal health coverage (UHC) and ensuring health for all.

IN PRACTICE
The National Health Mission of Assam has worked with WHO through the UHC Partnership to strengthen a network of PHC centres, and to ensure a flexible and responsive approach to tackling COVID-19.

EXPECTED RESULTS
Thanks to strong community engagement and surveillance, and access to testing, tracing and treatment and health care services, COVID-19 is being kept under control in Assam.

Islamic Republic of Iran
tackles COVID-19 by enhancing primary health care

FACT
The Islamic Republic of Iran is responding to the COVID-19 crisis through strengthening PHC as a foundation of UHC. This is done through an initiative called "Each home one health post" which is striving to empower families and communities to protect their health.

WHY IT MATTERS
A strong network of PHC centres and community health workers serve as the first point of contact for communities, strengthening national efforts to prevent, detect and treat COVID-19.

IN PRACTICE
The Islamic Republic of Iran's Ministry of Health and Medical Education is working with WHO and other partners to assess, analyze and implement changes to strengthen the PHC system to better respond to COVID-19.

EXPECTED RESULTS
Through the PHC initiative, the population can access information, treatment, care and follow-up on COVID-19. People better understand how to protect themselves and what to do if they feel ill, leading to a more effective emergency response.

Providing health service to elderly rural women at Afjeh Health House, Shemiranat District, Tehran. September 2020. ©WHO Iran

Lao PDR's confident health workforce strengthens health system and COVID-19 response

FACT

Lao PDR has introduced a system of licensing and registration to monitor and reinforce the skills of existing health workers and ensure high quality education and training for the coming generations of health workers.

WHY IT MATTERS

Health workers are qualified to provide good quality and safe health services, which also increases the public's trust in the country's health system.

IN PRACTICE

WHO, through the UHC Partnership, supported the Ministry of Health to reform the health sector and make progress towards UHC, with a focus on strengthening the regulatory system for human resources for health.

EXPECTED RESULTS

Health workers are qualified to provide good quality and safe health services, which also increases the public's trust in the country's health system.

COVID-19: LAO PDR - A nurse shows trainees how to use personal protective equipment (PPE) safely during a COVID-19 Intensive Care Unit (ICU) training at Setthathirath Hospital. ©WHO/Blink Media - Bart Verweij.

3 January 2018: A health worker, Majra Bibi, prepares to vaccinate a four-month-old baby in a primary health care centre in Nowshera District, Khyber Pakhtunkhwa province, Pakistan. ©WHO/Asad Zaidi.

Pakistan's drive to restore essential health services during COVID-19

FACT
Resources are being redirected away from essential services in Pakistan as rising cases of COVID-19 overstretch the country's health system. Services for many other health conditions have come to a halt.

WHY IT MATTERS
Disruption of essential services can have devastating consequences such as future outbreaks of vaccine-preventable diseases and increase in maternal mortality. The population could also lose trust in the health system and not take advice on infection control.

IN PRACTICE
WHO and partners prepared an action plan to support the Government in maintaining essential health services; a significant pillar in Pakistan's Preparedness and Response plan for COVID-19.

EXPECTED RESULTS
Pakistan is taking strategic decisions so that its limited resources can provide maximum health benefits to its people. Strengthening primary health care is a proven approach to ensure health for all, especially in times of crisis.

Papua New Guinea tackles the threat of COVID-19 with an all-of-government approach

FACT
Papua New Guinea (PNG) is on a state of high alert, tackling COVID-19 from community level all the way up to establishing new national legal mechanisms.

WHY IT MATTERS
To implement testing and preventative measures effectively it is important to strengthen health services and improve public understanding about COVID-19, especially in countries like PNG where communal living is so widespread.

IN PRACTICE
WHO is providing technical support to the Government in key areas such as primary health care, mental health, surveillance and legal reform to respond to COVID-19 and maintain essential health services during the pandemic.

EXPECTED RESULTS
Raising awareness of COVID-19 and maintaining essential health services through primary health care approaches will help protect the whole population during the pandemic and beyond.

Physical distancing being practiced during a community health awareness campaign for COVID-19 by the Western Highlands Provincial Health Authority in partnership with the Tambul-Nibilyer District Development Authority in Nibilyer, Western Highlands Province. ©Western Highlands PHA/Dannax Kupamu

Somalia Health for all is answer to COVID-19 and future threats to health

FACT

In Somalia, a commitment and strategic approach to universal health coverage (UHC) has been the bedrock for a strong response to COVID-19. Its UHC Roadmap included a strategy to prepare for emergency response and recovery.

WHY IT MATTERS

Life expectancy in Somalia is very low, and only 25% of people have access to essential health services. A strong health system and achieving UHC can transform this situation, improving people's overall health and saving lives during emergencies.

IN PRACTICE

WHO supported the government to develop a roadmap for UHC, and its emergency COVID-19 response with surveillance, case management, infection prevention and control, and strengthening laboratory capacities.

EXPECTED RESULTS

Although Somalia is a low-income country, the Government prepared a robust response to COVID-19 to control its spread, raise people's awareness and provide essential care to infected people.

©WHO/Somalia.

South Africa steps up hygiene in health facilities to protect against COVID-19

60 SEC SUMMARY
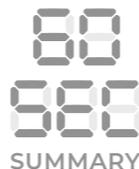
FACT
The Government of South Africa urgently approved and is now implementing its 'National Infection Prevention and Control Strategic Framework', a critical strategy underpinning responses to epidemics and pandemics.

WHY IT MATTERS
Effective infection prevention and control protects both patients and health workers, which is especially important when COVID-19 is spreading rapidly.

IN PRACTICE
WHO supported the development of the South African National Infection Prevention and Control Strategic Framework and its roll-out to provinces.

EXPECTED RESULTS
Strong infection prevention and control measures will help save lives among the 58 million people living in South Africa, especially in vulnerable populations. It has a direct impact on healthcare associated infections and the spread of COVID-19.
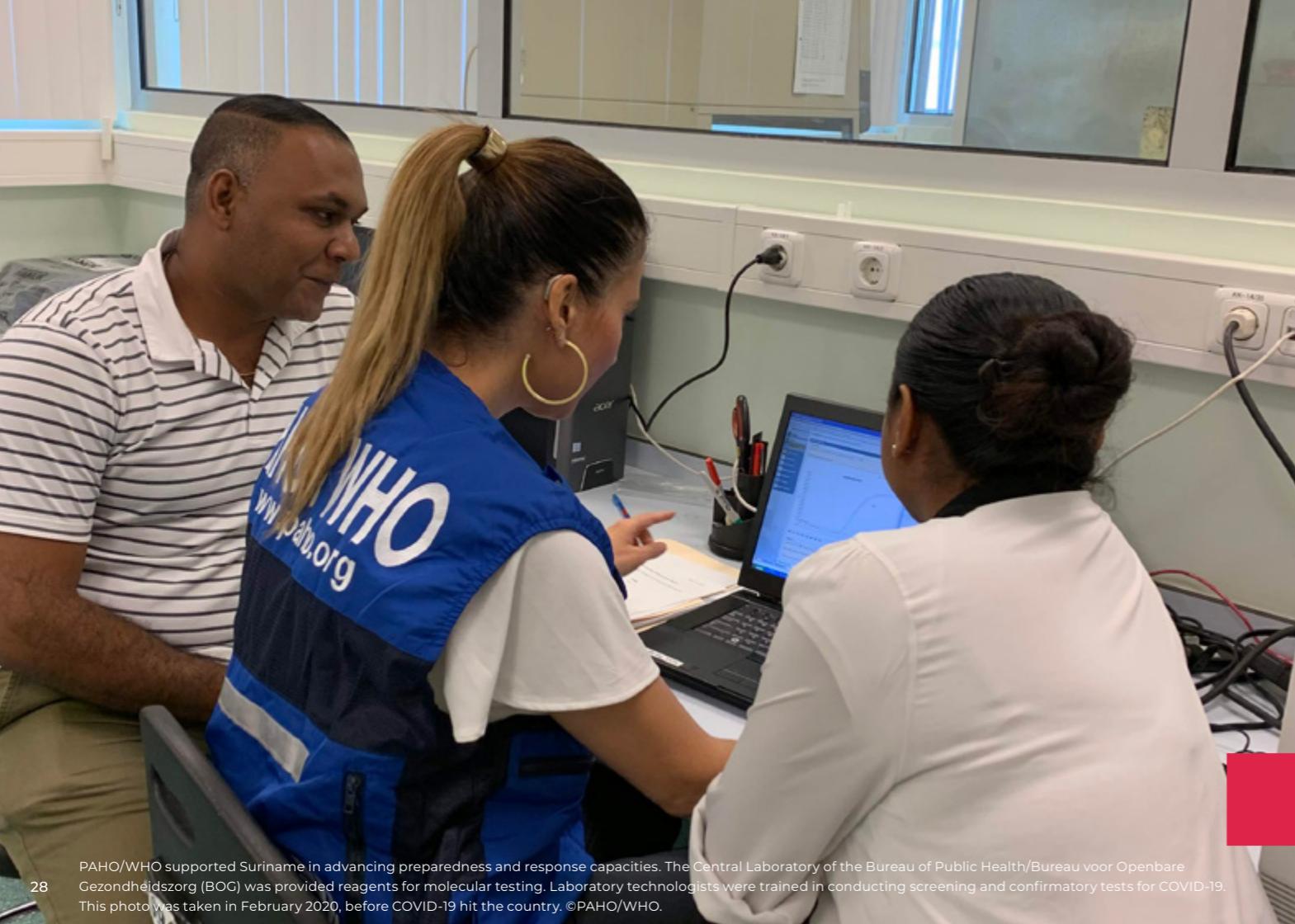
Suriname's COVID-19 response boosts health system

FACT
COVID-19 highlighted the urgent need to strengthen Suriname's health system. The Government is taking steps to ensure that the whole population can access essential health services during the COVID-19 pandemic and beyond.

WHY IT MATTERS
Suriname is seizing the opportunity to build a stronger health system that is more resilient to shocks so it can provide services to everyone, including the most remote and vulnerable populations.

IN PRACTICE
The Ministry of Health and PAHO/WHO have together developed strategies and guidelines in four main areas: saving lives, protecting health care workers, slowing the spread of the virus and strengthening epidemic intelligence.

EXPECTED RESULTS

The Government's strategic approach in responding to COVID-19 aims to save lives and address urgent needs while building a strong foundation to achieve universal health coverage.

PAHO/WHO supported Suriname in advancing preparedness and response capacities. The Central Laboratory of the Bureau of Public Health/Bureau voor Openbare Gezondheidszorg (BOG) was provided reagents for molecular testing. Laboratory technologists were trained in conducting screening and confirmatory tests for COVID-19. This photo was taken in February 2020, before COVID-19 hit the country. ©PAHO/WHO.

Timor-Leste's swift action prevents community transmission of COVID-19

FACT

Timor-Leste's quick and so far effective response to the COVID-19 crisis is a result of government leadership, supported by technical guidance from WHO and needs-based support from the UHC Partnership.

WHY IT MATTERS

Timor-Leste has a fragile health system, with limited capacity for managing critical cases, few functional isolation facilities and difficulties procuring timely medical supplies. If the COVID-19 virus spreads widely, the health system could be rapidly overwhelmed.

IN PRACTICE

WHO raised the alarm about the urgent need for COVID-19 preparedness and the UHC Partnership, along with other multi- and bi-lateral partners, provided critical technical, logistical and financial support for the COVID-19 response.

EXPECTED RESULTS

Timor-Leste has now increased its capacity to respond to COVID-19 and is better prepared than before to deal with the emergence and control of new cases.

Timorese health workers undergoing training on how to use PPE facilitated by WHO and other health development partners. ©WHO/Shobhan.

WHO field visit to Zhytomyr region, Ukraine, to strengthen prevention and infectious control programmes and increase the preparedness of facilities for the COVID-19 pandemic. (12 May 2020). ©WHO/Valerii Vodopianov.

Ukraine – Working towards universal health coverage while responding to COVID-19

60 SEC SUMMARY

FACT
Ukraine has acted quickly during the COVID-19 crisis to ensure that people do not have to pay for COVID-19 testing and treatment services. Its recent reforms in health financing played a key role in the process.

WHY IT MATTERS
Universal health coverage means that everyone can use health services when and where they need them, without experiencing financial hardship. Removing barriers to access is especially critical in a pandemic

IN PRACTICE
WHO, including through the UHC Partnership, has supported the Ukrainian Government to strengthen health system financing, service delivery and governance for a faster, more effective response to COVID-19 while accelerating progress towards UHC.

EXPECTED RESULTS
With a stronger health system and a foundation of effective primary health care, the whole population can safely and affordably access essential health services, including services related to COVID-19.

> "COVID-19 is not just a global health emergency, it is a vivid demonstration of the fact that there is no health security without resilient health systems, or without addressing the social, economic, commercial and environmental determinants of health. More than ever, the pandemic illustrates why investing in health must be at the centre of development.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General

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