

The Alliance for Health Policy and Systems Research work on Primary Health Care

Dr. Robert Marten

Scientist

Scaling new frontiers in Primary Health Care through research and partnership

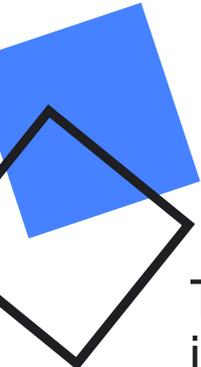
Virtual session: Primary Health Care Organization and models of care

17 February 2021



- 1. Background on the Alliance**
- 2. The Alliance's past work on PHC**
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1. Background on the Alliance



Background on the Alliance

The Alliance for Health Policy and Systems Research (the Alliance) works to improve the health of those in low- and middle-income countries by supporting the generation and use of evidence that strengthens health systems. As an international partnership hosted by the World Health Organization, we work together with organizations around the world to:

- Support institutional capacity for the conduct and uptake of health policy and systems research;
- Stimulate the generation of knowledge and innovations to nurture learning and resilience in health systems; and
- Increase the demand for and use of knowledge for strengthening health systems.

2. The Alliance's past work on PHC



The Alliance's Past Work on PHC

PRIMASYS

- Supported the development of twenty (20) case studies in selected LMICs

The Astana Declaration and the Operational Framework on PHC

- Particularly emphasizing the need for a focus on PHC research to inform and accelerate progress

BMJ Global Health Special Issue

- A September 2019 Special Issue focused on strengthening primary health care

Embedded PHC Research Consultation

- Embedded primary health care research priority setting to engage communities and build learning health systems

Achieving Health for all: Primary Health Care in Action

- Collection of case studies from LMICs

WHO Bulletin Theme Issue on PHC

- A Special Issue of the WHO Bulletin focused on Primary Health Care

PRIMASYS: Case studies in 20 countries

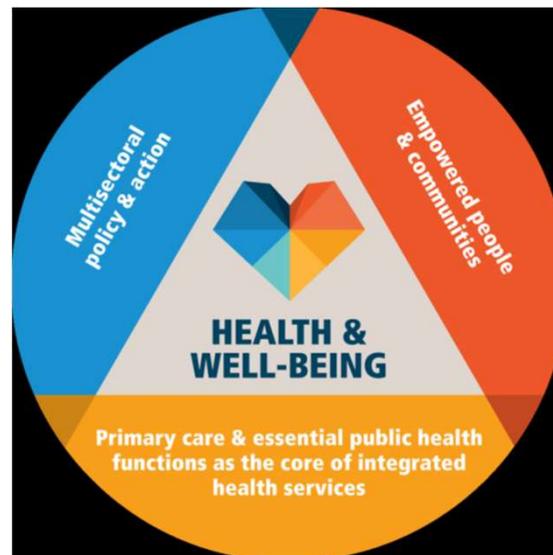


Bangladesh	Cameroon	Colombia	Ethiopia	Georgia
Ghana	Indonesia	Kenya	Lebanon	Mexico
Mongolia	Nigeria	Pakistan	Peru	Rwanda
South Africa	Sri Lanka	Thailand	Uganda	United Republic of Tanzania

- Analysis of primary care systems in twenty (20) countries
- Inform national health plans and health systems reforms
- Covers key aspects of primary care systems, including policy development and implementation

Astana Declaration and the Operational Framework on PHC

Technical series on primary health care





BMJ Global Health

Strengthening Primary Health Care Through Research: Prioritized knowledge needs to achieve the promise of the Astana Declaration (September 2019 - Volume 4 - Suppl 8)

Editorial

BMJ Global Health

Three-way partnerships fuel primary health care success

Abdul Ghaffar,¹ Soumya Swaminathan,² Anuradha Gupta,³
Stefan Swartling Peterson,⁴ David Bishai⁵

To cite: Ghaffar A, Swaminathan S, Gupta A, et al. Three-way partnerships fuel primary health care success. *BMJ Glob Health* 2019;4:e001579. doi:10.1136/bmjgh-2019-001579

Handling editor Seye Abimbola

Received 25 March 2019
Accepted 30 March 2019

In the summer of 1970, Drs Raj and Mabelle Arole finished their graduate public health studies in the USA and arrived in rural Maharashtra, India, searching for a community where they could make a difference. They had a primary health care (PHC) blueprint for community health improvement in rural India that had everything anyone could ask for. They envisioned a small hospital surrounded by subcentres, teams of nurses and paramedical workers, sanitation work, integration of prevention and cure and community participation. A community meeting with villagers in a potential site seemed like a textbook beginning. They described their first such

An opening arose. The people and their local politicians faced extreme drought in the early 1970s. Water security soon became a crisis and the Aroles convened collective action to drill wells. The first community groups that the Aroles were able to start in Jamkhed were not health groups; they were farmer's clubs to discuss best practices in agriculture. Later came women's groups called Mahila Vikas Mandal. The Aroles were slow and deliberate, always being sure to include local politicians and credit them. Once the farmer's clubs and women's groups were established, they were gradually transformed to include community participation in planning for health.

- Capturing the voices of policymakers, implementers and providers and researchers, collaborative and inclusive work of numerous institutions to inform and build a research consortium to address current and identify emerging priority knowledge needs

A priority setting exercise for embedded research on primary health care



Dr Soumya Swaminathan, WHO Chief Scientist, introduces the embedded primary health care synthesis consultation in July 2020.

- Regional consultations to prioritise research questions on PHC and develop action plan to advance embedded research on PHC



To cite: Swaminathan S, Sheikh K, Marten R, et al. Embedded research to advance primary health care. *BMJ Global Health* 2020;5:e004684. doi:10.1136/bmjgh-2020-004684

Received 7 December 2020
Accepted 9 December 2020

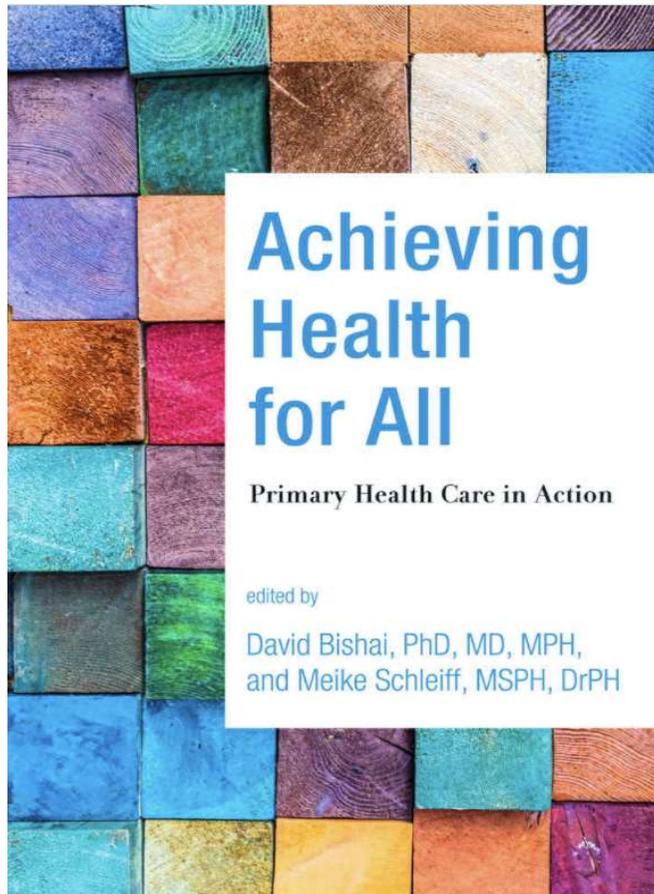
Realising renewed efforts to accelerate progress towards universal health coverage, manage health emergencies and create healthier populations requires integrated action on system-wide challenges. One of the best ways to do this is to focus on primary health care (PHC). Advancing PHC needs the support of a robust learning agenda—encompassing questions on how to improve both essential and emergency services, engage and empower communities and address the broader determinants of health through multisectoral action. Nowhere has the importance of learning been more compellingly exposed than during the ongoing COVID-19 pandemic, where the ability of countries to learn from experience has often determined the success or failure of their responses.

How research informs policy and action is variable, and in low- and middle-income countries the contribution of research to

on the philosophies of research coproduction and the institutionalisation of research both endorsed and advocated for in the WHO Strategy on Health Policy and Systems Research (2012) and the WHO World Health Report on Research for Universal Health Coverage (2015). Since these reports, this approach has grown in the scale of its application and achieved demonstrable impact.

Embedded research has strengthened efforts to improve PHC—from helping develop guidelines and support packages for village health committees in India³ to the creation of action plans in Nigeria for improving immunisation services in underserved areas. For example, immunisation coverage in parts of Nigeria increased from 61% to 91%.⁴ The current COVID-19 pandemic also exemplifies how countries focused on learning can improve their responses. For instance, Thailand's unprecedented investments in PHC and

Achieving Health for all: Primary Health Care in Action



- Collection of case studies from LMICs that embraced PHC
- Contributes to bridging the gap to support PHC policy making and PHC systems reforms
- Building on our commitment to knowledge generation and uptake for LMIC health systems strengthening

Special Issue of the WHO Bulletin

Volume 98, Number 11, November 2020, 725-820

Editorials

Advancing the science and practice of primary health care as a foundation for universal health coverage: a call for papers

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Primary health care: realizing the vision

Shannon Barkley,^a Robert Marten,^b Teri Reynolds,^a Edward Kelley,^a Suraya Dalil,^c Soumya Swaminathan^d & Abdul Ghaffar^b

Bulletin of the World Health Organization
<http://dx.doi.org/10.2471/BLT.19.2399>

Health systems face increasingly complex chronic noncommunicable diseases, antimicrobial resistance. These challenges from curative care to health promotion development of new models of service health care.

Global health stakeholders are pushing primary health care in the 21st century. The 2019 World Health Assembly adopted the role of primary health care in providing care throughout the life course, including palliative care.²

Primary health care is the cornerstone of a strong health system and accelerates progress towards universal health coverage (UHC) and the sustainable development goals (SDGs). A primary health-care approach includes primary care and essential public health functions at the core of integrated health services, empowered people and communities, and multisectoral policy and action. The global political commitment to this approach was codified in the 2018 Declaration of Astana and reiterated in the 2019 Political Declaration of the High-Level Meeting on Universal Health Coverage. In 2020, the coronavirus disease 2019 (COVID-19) pandemic demonstrates that gaps in primary health-care imple-

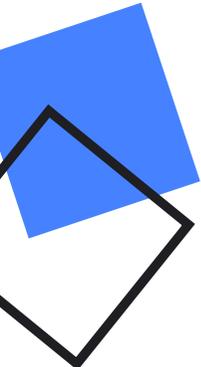
primary health care: an examination of the primary health-care approach after the Declaration of Astana and in the context of COVID-19,¹ the potential and limitations of primary health care to contribute to the SDGs,² the role of communities in primary health care and UHC,³ the role of primary health care in addressing the climate crisis,⁴ a call for global health donors to reorient their financial support towards primary health care⁵ and the testing of a monitoring framework for primary health care.⁶ The issue also highlights issues of integrated health service delivery, focusing on primary care: utilization patterns for health services that can be delivered in primary care,⁷ the role of pharmacists

connections between service delivery platforms, thus promoting early identification, safe referral and timely care for people affected by COVID-19 as well as enabling continuity of essential health services for acute and chronic conditions. Doing so reduces both direct morbidity and mortality from COVID-19 and indirect morbidity and mortality. A primary health-care approach emphasizes the complementary and interdependent roles of public health officials, health workers and communities in emergency preparedness and response. The emphasis of primary health care on multisectoral action for health promotes a multisectoral response in an emergency context.



Editorials

- The Alliance partnered with the Integrated Health Services Department to guest edit a theme issue of the WHO Bulletin - Primary Health Care: realizing the vision



Special Issue of the WHO Bulletin



“The COVID-19 pandemic has further underscored the essential primary health-care principle that protecting and promoting health requires a whole-of-government and whole-of-society approach”

*Dr Tedros Adhanom Ghebreyesus,
Director-General, World Health Organization*

Strengthening our resolve for primary health care, Bulletin of the World Health Organization, Volume 98, Number 11, November 2020

3. The Alliance's future work on PHC



The problem

- COVID-19 has challenged countries' health systems
- Countries have largely not used a primary health care approach to address COVID-19
- Countries have struggled to maintain essential services and manage emergency health services
- Critical gaps in knowledge on how best to develop, support and sustain meaningful engagement at all levels of the health system



What we will do?



Document and assess evidence on how existing efforts to advance PHC have been affected by the ongoing COVID-19 pandemic



Distill lessons learned and synthesize evidence on best practices to inform ongoing and future policy processes



Approach and Methodology

Revisit and use 20 PRIMASYS case studies as a baseline

Analyze across five themes developed from the Astana PHC framework

Adapt and apply to refresh the twenty case studies to understand how countries responded and are responding to the ongoing pandemic



Adapted Astana PHC Operational Framework for Analysis

01

Scaling up and managing critical emergency services

02

Maintaining essential services

03

Managing referral systems to ensure appropriate distribution of service load

04

Engaging and communicating with communities effectively and leveraging community resources;

05

Addressing broader health determinants and working multisectorally to improve health.

Thank you!



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