

# Recap of Day 2: Key Highlights

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**WHO AFRO CAH**

# **WHO guideline on health policy and system support to optimize community health worker programmes**

- **A WHO Guideline for CHW programme defines:**
  - **Selection**
  - **Training & certification**
  - **Supervision & health system links**
  - **Remuneration**
  - **Career ladder**
- **PHC agenda recognizes CHW as a vital component of PHC**
- **72<sup>nd</sup> World Health Assembly passed a resolution recognising the role of CHWs delivering quality primary health care services.**

# Remuneration

- **Provide a financial package commensurate with the job demands, complexity, number of hours, training and roles that CHWs undertake.**
- **Include financial resources for CHW programmes in health system resource planning.**
- **The CHW guideline is intended to be adapted by countries with flexibility to country contexts**

# Planning Handbook: Caring for Newborns and Children in the Community

- **Provides a framework for developing and managing an implementation plan built around key health system components**
  - **Organization, coordination and policy setting**
  - **Human resources**
  - **Supply chain management, service delivery and referral**
  - **Advocacy, sensitization, community mobilization**
  - **Supervision and quality assurance**
  - **Monitoring, evaluation and research**
  - **Costing, financing and budgeting**

**JUST USE IT!**

# WHO Community Engagement Framework

A working definition of community engagement for quality, people-centred, resilient health services:

“Community engagement is a process of developing relationships that enable stakeholders to work together to address health-related issues and promote well-being to achieve positive health impact and outcomes”

# Financing of ICCM

- 14 % of the \$3.8b GF funding was allocated to ICCM in 38 countries
- GF funds 7 out of 8 (**88%**) ICCM items except **Non-malaria commodities**
- In all 18 countries, iCCM funding was comprised of domestic allocations and contributions from development partners (GFF review).
- However, almost all of these countries continue to struggle to secure funding for the implementation of iCCM program at scale.
- No committed global financing mechanism or partner for non malaria commodities to ensure the full ICCM implementation to **maximize impact**

# The GFF

- **Multi-stakeholder partnership** to support efforts to tackle the greatest health and nutrition issues affecting women, children, and adolescents
- Support government-led platforms that **bring together key partners** to develop and implement a prioritized plan and **mobilize sustainable financing for health and nutrition.**
- **GFF is an opportunity for funding the non malaria commodities of ICCM.**
- Currently works in 36 countries

# SUMMARY

- There is a lot of investment in ICCM to strengthen the Community system but mostly using a parallel system.
- It is important to countries to prioritize their needs for funding by GFF, GF etc.
- How do we put government in the drivers seat to ensure effective coordination
- How do we use data to convince government to increase allocation of domestic resources to address the major killers of children.
- Local counsels have come up to support incentivization in a sustainable manner (Cameron).



# Supply chain management

- Stock out of medicines and supplies are the major impediments for ICCM implementation.
- 80% of the reasons for stockout: Finance, data, transportation and Human resources
- Improving visibility of stock balance is important to reduce stockouts
- **Accountability** for the medicines is key to reduce stockouts.
- SCM for ICCM should be part of the national SCM of the health System.
- Real time data is key for SCM

## Challenges:

- Lack of government ownership of ICCM as ICCM is not in the MoH plans
- Weak quantification
- Inadequate finance
- Poor distribution to last mile

# Summary of key points

- 80% of the 18 countries have national policies for ICCM
- All of the 18 countries have some level of domestic fund allocation for ICCM
- To institutionalize ICCM, it should be an integral part of the national health sector strategic plans, budget and operational plans, and **avoid parallel systems.**
- ICCM should be linked with a functional Health facility.
- Addressing the SCM and Financing is key for a successful ICCM imple.
- Remuneration and workload of CHWs should be addressed
- Need to fund non malaria commodities in order to maximize the impact of ICCM.**



**THANK YOU**