ACCELERATING COMMUNITY HEALTH SYSTEMS TO END TREATABLE AND PREVENTABLE DISEASES LIKE MALARIA



Health, like education, is among the basic capabilities that give value to human life and that create human capital, one of society's basic building blocks.

There has been a growing focus on the role of community health systems in preventing and treating infectious diseases old and new¹, further catalysed by the current COVID-19 crisis which has again thrown a spotlight on the central role of community health workers (CHW). These developments build on a wide foundation of learning and expertise on community health care established over recent decades at global, regional, national and sub-national levels, in which CHW programming has been widely shown to represent a very promising strategy to achieve universal health coverage, and end preventable maternal and child deaths by 2030² caused by diseases such as malaria as well as build the economic empowerment of women.

Over 70% of Kenya's population is at the risk of contracting malaria, and in some of the endemic areas, malaria contributes up to 40% of the outpatient and in-patient cases.

However, despite this critical role in addressing both existing diseases such as malaria and new pandemics, a clearly established investment case, support for community health remains underfunded and fragmented, leading to systems that are neither resilient nor sustainable.

Weaker health systems pose significant risks disrupting the provision of essential



health services at health facilities that could result in a staggering loss of life, reversing years of progress made through billions of Shillings of investment by the Kenya Government and its partners.

Prioritizing community-level interventions is also cost-effective means of reducing inequity through preferentially reaching the poorest³, ultimately creating a return on investment of up to 10 to 1.

¹ For example, ongoing Global Fund Strategy discussions, plans to include a new principle on the role of resilient health systems in updates to the WHO's Global Technical Strategy on Malaria, and the End Malaria Council's decision to convene its own working group on community health worker financing, all illustrate a growing focus on the importance of investments in health system strengthening, especially at the community level, as a key pillar of the fight against infectious diseases.

² See for example: <u>Chou et al. 2017</u>. *Expanding the population coverage of evidence–based interventions with community health workers to save the lives of mothers and children: an analysis of potential global impact using the Lives Saved Tool (LiST)* J Glob Health. 2017 Dec; 7(2): 020401.

³ Siekmans et al. 2013. Community case management of malaria: a pro-poor intervention in rural Kenya. International Health, Volume 5, Issue 3, September 2013, Pages 196-204

Evidence and experience demonstrate that community health is a critical component for recovering and building strong, resilient health systems – with CHWs as the backbone. Well-trained CHWs have the ability to support immediate COVID-19 response efforts, establish pandemic preparedness mechanisms, and set counties on a path to resiliency against future health threats across Kenya.

THE "WIN-WINS"

There is need to leverage partnerships and coordinate actions at country level to galvanize joint efforts and increase domestic investments. Indeed, this is a timely and important opportunity to bring together partners including the private sector community – to build a joint understanding of the steps needed to ensure effective and sustainable investments, that can offer a triple dividend by intensifying the imperative for progress against specific diseases, delivering lasting improvements in community health systems, and contributing to national health and economic security.



In 2018 the Investment Case for Community Health Services led by the Ministry of Health demonstrated a 9.4 to 1 return for investments in community health services and suggested that an annual 2% decrement in new malaria cases due to community health would lead to implied annual savings from malaria cases reduction of over US\$23million.

In addition to the benefits outlined above, scaling up support for community heath to deliver progress on malaria in Kenya will bring wider returns in areas including gender equality and health security.

The broader benefits to Kenya of investing in improving community health systems

There is a renewed awareness of the beneficial effects of investing in community health beyond the value that individuals place on health itself and for its effect on stimulating economic growth.

' The power of community health is far greater than any physician, clinic or hospital' Mark Hyman.

- Healthier people are more productive.
- Healthier children are more likely to attend school and have greater cognitive capacity for learning. Improved education is a powerful mechanism of income growth.
- A healthy nation is the means to poverty reduction, economic growth, and long-term economic development.
- Increased life expectancy is an incentive to save for retirement, which can expand the national savings rate, in return can expand investment and economic growth.
- Control of endemic diseases such as malaria can increase human utilization of land and other resources. ⁴

LOOKING TO THE FUTURE: RECOMMENDATIONS FOR MOVING FORWARDS

In order achieve this, at national and subnational there is need to; The value of community health workers (CHWs) cannot be overstated: they provide basic health care and health promotion within the communities. However, despite the gains made in scaling up support for community deliver heath to progress on communicable diseases, a lot of work still needs to be done to ensure robust, sustainable and equitable community health systems that can 'reach the unreached', and prevent, detect, diagnose, and treat malaria and other illnesses wherever they occur. Only by doing so will



Kenya pave a pathway towards elimination of this deadly yet preventable diseases.

In order achieve this, in Kenya there is need to;

- Increase domestic resources for community health and malaria programming, through public-private partnerships.
- Maximize on existing windows of opportunity and evidence to support and influence the allocation of resources needed in closing this funding gap.
- Tap into funding beyond the traditional sources: We must shift the national financing architecture to reflect and be responsive to realities on the ground. There is need for private sector action to explore innovative approaches and instruments for health.

Concerted effort and renewed focus is direly needed to establish a resilient health system that can reach every person with integrated services and eliminate old diseases such as malaria. This system will need resources from multiple stakeholders to be efficient, equitable, and sustainable.

Powered by: Community Health Coalition and the Zero Malaria Campaign Coalition

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