RESPONDING TO COVID-19

As COVID-19 transitions from a pandemic to a global security threat, URC continues to empower ministries of health, other government agencies, civil society, communities, and partners to implement response strategies. This includes continued support to country health systems and supply chains for an effective response at the patient, community, facility, and health system level.

ONGOING RESPONSES

Maintaining Essential Health Services

URC is ensuring continuity of essential services and integration of COVID-19 responses within infectious and chronic disease and primary health services. And we are supporting vaccine campaigns and vaccine uptake. Below is a sampling of our approaches ranging from the traditional “foot soldier” to use of the digital “WhatsApp” approach.

USAID Regional Health Integration to Enhance Services in Northern Uganda (RHITES-N, Acholi) Activity:

RHITES-N, Acholi has reached nearly 5,000 people thus far with integrated health messages that include COVID-19 prevention information. This has been accomplished by engaging with some 300 peer educators to conduct house-to-house peer mobilization for community outreach. The activity uses the mobile phone application WhatsApp to follow up with patients and staff.

USAID BARMMHealth, Philippines: URC launched the “Family Planning Services on Wheels” initiative with health workers traveling to clients by tricycle in 20 towns across five provinces. The workers also monitor COVID-19 cases.

USAID Cure Tuberculosis, Kyrgyz Republic: Together with John Snow, Inc., URC supported the Kyrgyz government to draft a policy on adapting TB services during emergencies to include COVID-19 in the Laboratory Data Management Information System, disseminate TB/COVID-19 information through social media, and re-purpose TB treatment facilities for COVID-19 use. URC developed and piloted a TB/COVID-19 combined diagnostic algorithm to standardize clinical decision making.

The USAID Philippines BARMMHealth Project ensures service continuity during COVID-19 through “Family Planning Services on Wheels.” Marie Lim, USAID-trained public health nurse provides counseling.
USAID TB Platforms, RenewHealth, and BARMMHealth: These URC-implemented projects in the Philippines support the Ministry of Health to ensure quality services in health areas other than COVID-19 remain accessible. The projects have: developed TB/COVID-19 guidance on adapting interventions for the COVID-19 response, mentored facilities to monitor supply chains and availability of personal protective equipment and conducted online health worker and volunteer trainings.

Infection Prevention and Control (IPC) and Facility-Based Quality Improvement (QI)
URC has used its expertise in QI and the capacity building of human resources for health to improve facility-level care provision while also mitigating risks posed by COVID-19. Across programs, URC has carried out IPC trainings on improved COVID-19 case management, containment, and mitigation. We expanded web-based platform use for trainings.

USAID Human Resources for Health 2030 (HRH2030), Mali:
URC supported provincial health authorities and facility managers to plan a COVID-19 response, activate response plans, and prevent cases at the facility and community levels. IPC measures, facility-based surveillance and response, case management, and training were all supported to address the evolving emergency.

USAID Regional Health Integration to Enhance Services in East Central Uganda (RHITES-EC) Activity, Uganda: In 2021, the Activity provided health care worker protection toolkits to all project supported district-based IPC committees (100% coverage). This Ministry of Health-designed package covers IPC, surveillance, contact tracing, case management, and referral. The Activity provides ongoing training and mentorship to support the rollout.

Supporting Behavior Change
URC couples health system strengthening with subnational efforts to improve COVID-19 prevention. We support the implementation of continued COVID-19 behavior change and risk communication through mass communication campaigns, targeted community outreach, and social mobilization efforts.

USAID BARMMHealth, Philippines: URC has scaled up bandilyo loudspeaker announcements made by health workers that go from town to town educating communities about COVID-19 prevention, coupled with family planning and maternal health education.

Supporting Vaccine Readiness/Distribution
URC is supporting the rollout of COVID-19 vaccination campaigns by offering evidence-based guidance to ministries of health with COVID-19 vaccine micro mapping, planning, coordination, resource mobilization, capacity building of vaccination teams, and social and behavior change campaigns to build vaccination confidence.

In Uganda, URC supports the COVID-19 vaccine rollout through the USAID RHITES-EC Activity and USAID RHITES-N, Acholi Activity through planning, priority setting, forecasting, logistics, reporting, distribution, as well as countering vaccine hesitancy.

EMERGING RESPONSES
As COVID-19 evolves, additional needs will emerge for:
• Supporting COVID-19 data management and reporting into health information systems;
• Strengthening surveillance and lab testing as COVID-19 mutates into new strains; and
• Using implementation science and shared learning of emerging data to inform the COVID-19 global response.

Immediate concerns include integration of mental and psychosocial health services, as well as gender-based violence programming into COVID-19 response plans. Through the global USAID Health Evaluation and Applied Research Development (HEARD) Project, URC supports implementation research on community-based psychosocial support approaches during COVID-19 in four countries.