Supporting Policy Approval of Uganda’s CHEW Strategy

At least 76% of Uganda’s population lives in rural areas and has very poor access to healthcare.¹ Despite the improvements in the health of Uganda’s population over the years, the country is still far from the goal of health for all. Current evidence unequivocally demonstrates that major health problems in Uganda are largely preventable.

The Government of Uganda has put in place several policies and strategies towards remedying the poor health situation. In 2001, the Ministry of Health (MoH) established the Village Health Teams (VHT) Strategy as an innovative approach to empower communities to participate in improving their own health, and to strengthen the delivery of health services at the community and household levels.

The VHT Strategy improved rural access to healthcare due to the mix of preventive and basic curative roles. However, the health status of Uganda’s population remains relatively poor with high morbidity and mortality from preventable causes due to gaps and challenges faced in implementation of the strategy. A national assessment of the VHT Strategy recommended a redesign of the strategy for improved functionality, sustainability and responsiveness for effective delivery of health services.

The National Development Plan II (NDPII), (2015/16-19/20) is aimed at contributing towards achieving Uganda’s Vision 2040, whose overarching goal is to propel the country towards middle income status by 2020 by strengthening competitiveness, employment and inclusive growth.

The Ministry of Health (MOH) plans to establish the National Community Health Extension Workers (CHEWs) Policy and Strategy. This globally-accepted approach to achieving Universal Health Coverage is also expected to help address existing and emerging health challenges of the VHT program.

In 2018, with critical technical assistance and financial support from Living Goods, the Ministry submitted a Regulatory Impact Assessment (RIA) - a new prerequisite in Uganda for evidence-based approval of any new policy, bill, or regulation – to Cabinet. MoH undertook a rigorous literature review, field work, and problem analysis and articulation to provide the context for regulation. With Living Goods’ support, MoH also submitted the CHEW Policy and other key supporting documents to Cabinet for consideration.

Establishing the CHEWs Policy and Strategy is expected to:

1. Provide the highest possible level of equitable access to preventive and promotive health care for all in Uganda;
2. Provide a framework for strengthening the community health system;
3. Build strategic partnerships for increased investments for the community health program;
4. Bring services closer to the community and ensure equitable distribution of basic community and household centered health care services; and
5. Improve cost-effectiveness by reaching large previously underserved populations with high-impact promotive and preventive health services at low cost.

I am very grateful to Living Goods for supporting Ministry of Health on the RIA that will provide policymakers with information on which to base their decisions and ultimately contribute to better governance for health”

Hon. Dr. Jane Ruth Aceng, Minister of Health, Uganda.

About Living Goods

Living Goods is a non-profit organization that seeks to drive lasting impact in community health through innovative approaches delivered in partnership with government. By leveraging cutting-edge technology and innovative approaches to transform the delivery of community health, Living Goods works to save and improve lives, particularly for mothers and for children under the age of five years. We partner with governments at different levels to transform access to essential healthcare by supporting the delivery of effective community health programs. Our approaches leverage the power of mHealth technology, including data-driven performance management, and motivated and compensated community health workers, to bridge critical healthcare gaps around some of the most easily treatable yet potentially deadly health issues for mothers and children including malaria, diarrhea, pneumonia, pregnancy and new-born care, family planning, undernutrition and immunization counseling. Since 2007, more than 8,700 Living Goods-supported community health workers in our counties of operation have reached nearly 7 million people with life-saving healthcare.

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