

COVID-19: Ensuring Continuity of Essential Health Services

In light of COVID-19, we have strengthened our commitment and support to the Ministry of Health (MOH) and district governments to build a stronger and more resilient community health system. We recognise that sustenance of effective community-based care is more important at this critical time than ever before, which is why we have adapted our programmes to ensure continuity of essential health service delivery in our 19 districts in which we operate.



CHW Rehema hanging a COVID-19 poster at a shop in her community in Mukono

Supporting MOH & Local Government Efforts

- We seconded two staff to MOH and more than a dozen Living Goods staff to support the COVID-19 call centres.
- Supported MOH to develop guidelines and information sheets that enable community health workers (CHWs)—known in Uganda as Village Health Teams—to play an effective role in national and local responses.
- Cascaded CHW operational guidelines to district leadership through online meetings.
- Supporting MOH to develop the National COVID-19 preparedness and response plan.

Protecting CHWs

- We are providing the CHWs we support (directly or through BRAC) with PPEs including gloves, masks, and sanitizers to safely support COVID-19 prevention work and other limited services. We're also advocating that the government includes CHWs in their PPE procurement calculations.
- Trained Living Goods-supported CHWs in “no-touch” protocols to safely continue their core work, and supervisors in remote performance management techniques.
- Increased compensation to the CHWs we support to reflect their increased workload and risk. We're also continuing our engagement with the government about the importance of compensating all CHWs.

Maintaining Essential Health Service Delivery

- We have provided the CHWs we support with free essential health commodities including ACTs, paracetamol, amoxicillin, and zinc/ORS in formulations appropriate for sick children.
- Increased cell phone data and airtime stipends to CHWs to facilitate remote communication with patients.

Our COVID Response in Uganda



7,800
CHWs supported with PPE



4,000
Litres of sanitiser donated to MOH



600,000
IEC materials distributed in 19 districts



12+
Living Goods staff supporting MOH COVID call centers



1,000,000+
SMS messages sent

Interrupting COVID Transmission

- We have trained Living Goods staff and the CHWs we support in COVID prevention, early case detection, reporting procedures, and personal safety measures.
- Implemented a two-way SMS service that allows for community-level disease surveillance by sending a specific message to the short code 8808. We are using the same platform to reach CHWs and other members of the public with COVID-related information.
- Integrated new COVID workflows into our existing SmartHealth app and adjusted existing workflows to support COVID response at the community level.
- Supported the development, printing and distribution of information, education and communication (IEC) materials for communities.

CHW Voices

CHW Cissy Nabasumba, Masaka District

“People in the community now bring children to our homes for treatment, and some still call us when their children are sick. Having free medicines has eased our work. When I’m assessing children, I use a mask, gloves and keep a distance. For example, when diagnosing pneumonia, I stand at a distance and ask the caretaker to help in counting the breaths of the child. Parents are happy about the support they have received in the form of free medicines for their children. Many cannot afford to buy medicine at this time of the lock down. The biggest challenge I have faced so far is that people do not easily change behaviours, so we have to keep sensitising and educating them about hand washing and maintaining a distance from other people. Additionally, when I call clients for follow up, their phones are sometimes off. But I shared the Ministry of Health helpline (which is on the COVID poster) at the start of the pandemic and three of the mothers I was giving antenatal care to called the number and were evacuated by ambulances to go to the hospital for delivery. It makes me proud that I have been able to help my community in such ways.”



CHW Ronald Kirribwa, Kalangala District

“I feel good that I’m a community health worker at this point in time. Before the pandemic, we used to make home visits and did not have to wear any PPE. But now everything has changed. We were given posters to sensitise communities about COVID, and to remind them to wash hands regularly. We have to put on masks and gloves when doing that. Parents have also been coming to my home to seek health services for their children. What worries me is that I no longer make home visits and some of my clients are far away and cannot easily come to me for services. Additionally, many cannot even afford to buy essentials like mama kits. But I’m thankful that you thought about us and provided free essential medicines for the children in our communities.”

