



HEALTH SYSTEMS STRENGTHENING

At IntraHealth, we believe that strengthening health systems is key to shifting power dynamics and boosting local actors' capacity to drive improved health outcomes in their countries.

In 2022 alone, we reached 174,067 health workers and provided 3,380 health facilities with customized, on-site supportive supervision, mentoring, and coaching — always working in tandem with local partners to ensure health workers have the skills, supplies, and support systems they need to deliver quality services.

Here's how we deliver results:

- Strengthening health systems to deliver life-saving services, including integrating service packages and enhancing clinical mentoring
- Improving health workforce development for quality care, including boosting health workers' retention via mental health support
- Supporting country-led responses to global health threats, including using existing data to model disease trends and health workforce needs for pandemic preparedness
- Catalyzing local ownership, including supporting dynamic civil society coalitions and assisting over 40 local partners to transition to direct USAID funding.

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In Rwanda, a nurse examines a newborn in an incubator at Kibungo Referral Hospital. Photo by Innocent Ishimwe for IntraHealth International, 2021.

OUR APPROACHES IN ACTION

Strengthening Health Systems to Deliver Life-Saving Services

Under the **INSPIRE project in West Africa**, IntraHealth supports Ouagadougou Partnership countries to deliver an integrated service package for family planning; maternal, newborn, and child health; and nutrition to reach more women and children with patient-centered care. We partner with national technical working groups to adapt the package for each level of the health system by creating job aids, providing on-site mentoring, and adding composite integration indicators to district health information systems (DHIS2) and data registries to prompt provider behavior change. Since 2019, INSPIRE's 11 Center of Excellence health facilities have increased postpartum family planning uptake by 133%, improved the percentage of postnatal baby wellness visits by 335%, and reported a 24% decline in malnutrition cases.

On the **Regional Health Integration to Enhance Services in Eastern Uganda (RHITES-E) activity**, IntraHealth coached Ministry of Health mentors to enhance their clinical mentoring techniques by using monthly performance data to customize hands-on assistance for health workers. By providing data-driven support to improve health workers' neonatal resuscitation skills, Ministry of Health mentors contributed to a 52% reduction in neonatal mortality across 173 facilities between 2018-2022.

On the **MOMENTUM Safe Surgery in Family Planning and Obstetrics project in Rwanda**, IntraHealth works with health workers and anesthetists to address gaps in safe obstetric surgery and anesthesia as part of their routine quality improvement cycles. By reinforcing infection prevention and control practices, such as chlorhexidine skin preparation, facility staff reduced the post-caesarean delivery infection rate by 44% between 2019-2022.

Improving Health Workforce Development for Quality Care

IntraHealth also partners with local governments and partners to use data — including from our open-source [iHRIS software](#) — and telehealth to optimize human resources for health (HRH) planning, distribution, and retention.

On the [Human Resources for Health Kenya Program](#), IntraHealth worked with 15 counties to conduct Workload Indicators of Staffing Need studies and identify HRH gaps by facility. Using these data, we helped counties develop costed recruitment plans to improve service coverage and increase health worker staffing by 46%. To promote gender parity and reduce female health worker attrition, IntraHealth advised the Ministry of Health on reinforcing gender mainstreaming at medical training institutes and making policy changes to reduce sexual harassment.

To boost health workers' retention and access to critical mental health support during the COVID-19 pandemic, the IntraHealth-led [HIV Care and Treatment project in Central America](#) provided health workers access to free telemedicine therapeutic sessions to help them mitigate anxiety and depression, enabling them to better deliver respectful services to their clients.



A health worker washes their hands before entering the hospital to combat COVID-19 in the Rwamagana District of Rwanda. Photo by Innocent Ishimwe for IntraHealth International, 2021.

Supporting Country-Led Responses to Global Health Threats

Drawing on IntraHealth's expertise in HRH planning, management, and information systems, we created a [Rapid, Remote Pandemic Preparedness Toolkit](#) that aids

governments to model disease trends, emerging health threats, and health workforce need. In Mali, use of this remote toolkit informed the government's COVID-19 preparedness plans, including the decision to reconsider cadres of health workers treating COVID-19 in advance of a surge in hospitalization of moderate cases.

On the [Rwanda Ingobyi project](#), IntraHealth supported the Ministry of Health's COVID-19 response by helping to conduct supportive supervision at 70 vaccination sites to ensure vaccines were distributed per the national protocol. We also worked with the Ministry of Health to increase preparedness for potential Ebola virus disease outbreaks, including enhancing the capacity of community health workers and facility providers in nine districts at risk of possible outbreaks, running simulations, and training emergency hotline workers.

Catalyzing Local Ownership and Transition to Local Entities

IntraHealth is a leader in local capacity-strengthening, supporting local partner-led and community-owned solutions to health.

As implementer of the [Accelerating Support to Advanced Local Partners \(ASAP\)](#) and [ASAP II](#) contracts, we have provided customized support to 110+ local organizations and government entities across 18 countries. Our approach takes local health partners through a collaborative assessment to identify gaps and assets, and then provides tailored coaching via local experts to build on partners' capacities and systems, rapidly positioning them to implement PEPFAR projects within 12-18 months. We also link local partners to global webinars, peer learning, and digitized resources in multiple languages. Using this model, we have supported 41 local partners to transition to direct USAID funding to date.

Our [Strengthening Civil Society Engagement for Family Planning in West Africa \(CS4FP\)](#) project supported dynamic civil society coalitions in Ouagadougou Partnership countries to influence family planning policy and hold governments accountable for national and regional commitments. By project end, CS4FP-supported coalitions and influencer networks contributed to a doubling in the number of female users of modern contraception in the region — adding an additional 3.8 million users — and raised five times the amount of CS4FP's funding to lead ongoing health initiatives.

CONTACT

intrahealth@intrahealth.org
www.intrahealth.org

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