

Review of Previous Lecture

Definition of Primary Health Care

Primary health care is:

- Essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain, at every stage of their development, in the spirit of self-reliance and self-determination.

PCH definition was arrived at during the:

International Conference on Primary Health care

Alma – Ata – USSR

1978

Conference was organised by WHO and UNICEF

Primary Health Care

- It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process.
- PHC concept provides an approach to health and health care in closing the gap between the “haves” and “have-nots”
- Equitable distribution of health resources

Guiding Principles of PHC

1. Equitable distribution
2. Focus on Prevention – of main health problems
3. Multi-sectoral collaboration / approach
4. Full community involvement and participation
5. Use of appropriate technology
6. Decentralisation – Devolution
7. Functional referral system

Components of PHC

- **Education:** concerning prevailing health problems and the methods of identifying, preventing, and controlling them;
- **Promotion** of food supply and proper nutrition;
- Adequate supply of **safe water**, and **basic sanitation**;
- **Maternal and child health care**, including family planning;
- **Immunization** against the major infectious diseases;
- **Prevention and control** of locally endemic diseases;
- **Appropriate treatment** of common diseases and injuries;
- **Promotion** of mental health;
- **Provision** of essential drugs – **WHO Essential Drug List – Kenya Essential drug List (2016)**



Republic of Kenya



Ministry of Health

Core List:

Represents the priority needs for the health-care system - current and anticipated future and their potential for safe and effective treatment

- Considered to be the most efficacious, safe and cost-effective for the relevant conditions
- Those which do not require specialist inputs
- Expected to be routinely available in health facilities (at the appropriately designated levels of care)
- Expected to be affordable to most of the population

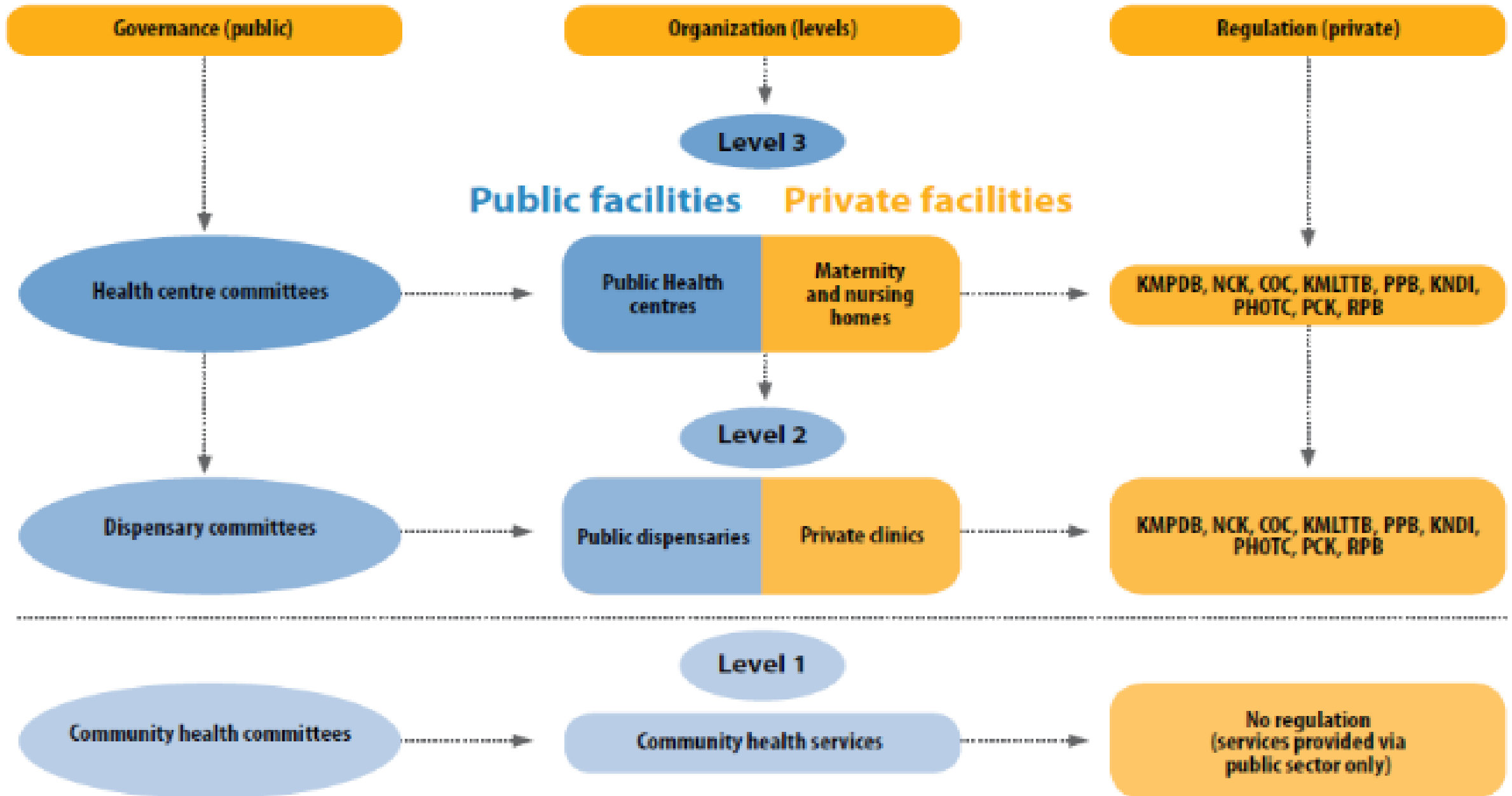
- <http://apps.who.int/medicinedocs/documents/s23035en/s23035en.pdf>

Discuss the guiding principles of PHC????

Guiding Principles of PHC

1. Equitable distribution
2. Focus on Prevention – of main health problems
3. Multi-sectoral collaboration / approach
4. Full community involvement and participation
5. Use of appropriate technology
6. Decentralisation – Devolution
7. Functional referral system

Figure 2. Structure and governance of PHC facilities and community units



Level 1 Health Services



- The **goal** of the strategy is to improve people's health and wellbeing through comprehensive, **participatory community programmes** that effectively address the determinants of health

Level 1 - Community Based Approach

- The community-based approach is the mechanism through which households and communities take an active role in health and health-related development issues
- It aims at building the capacity of communities to assess, analyze, plan, implement and manage health and health related development issues, so as to enable them to contribute effectively to the country's socio-economic development.
- To empower the communities to demand their rights and seek accountability from the formal system for the efficiency and effectiveness of health and other services.

Strategic Objectives of Community Strategy

- Strengthen the delivery of integrated, comprehensive and quality community health services for all cohorts
- Strengthen community structures and systems for effective implementation of community health actions and services at all levels
- Strengthen data demand and information use at all levels
- Strengthen mechanisms for resource mobilization and management for sustainable implementation of community health services

How can we strengthen delivery of Integrated and Comprehensive Quality services at the PHC / Community level?

- PHC facilities are able to provide a wide range of services at that level eg
 - Health education
 - General curative services
 - Essential investigations
 - Essential medicines
 - MCH
 - Reproductive health services eg FP, Adolescent sexual reproductive health services / Youth/Adolescent friendly services etc
 - Appropriate No of staff – well trained/with up to date information
 - Referral system in place

Level 1 – community level services

- Establishing a level 1 care unit to serve a local population of 5,000 people.
- Community-Health Volunteers (CHV), Community Health Workers (CHWs), Community Based Distributors (CBDs), Community Owned Resource Persons (CORPs) - provide level 1 services to 20 households
- Supporting every 25 CORPs with a Community Health Extension Worker
- Ensuring that the recruitment and management of CORPs is carried out by village and facility health committees

Level 1 – community level services - staff

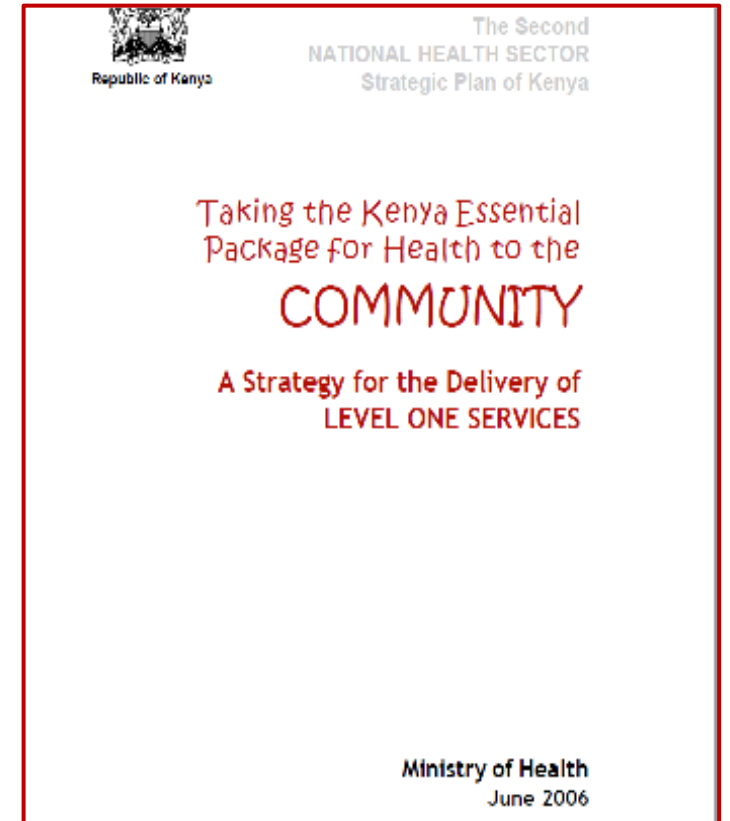
Community Health Extension Worker (CHEW)- Health care provider employed by the health system and attached to a dispensary or health centre

Community Health Worker (CHW): Local member of the community gone through a structured training

Community Own Resource Person: also a CHW, CBDs, TBAs etc

Level 1 – community level services

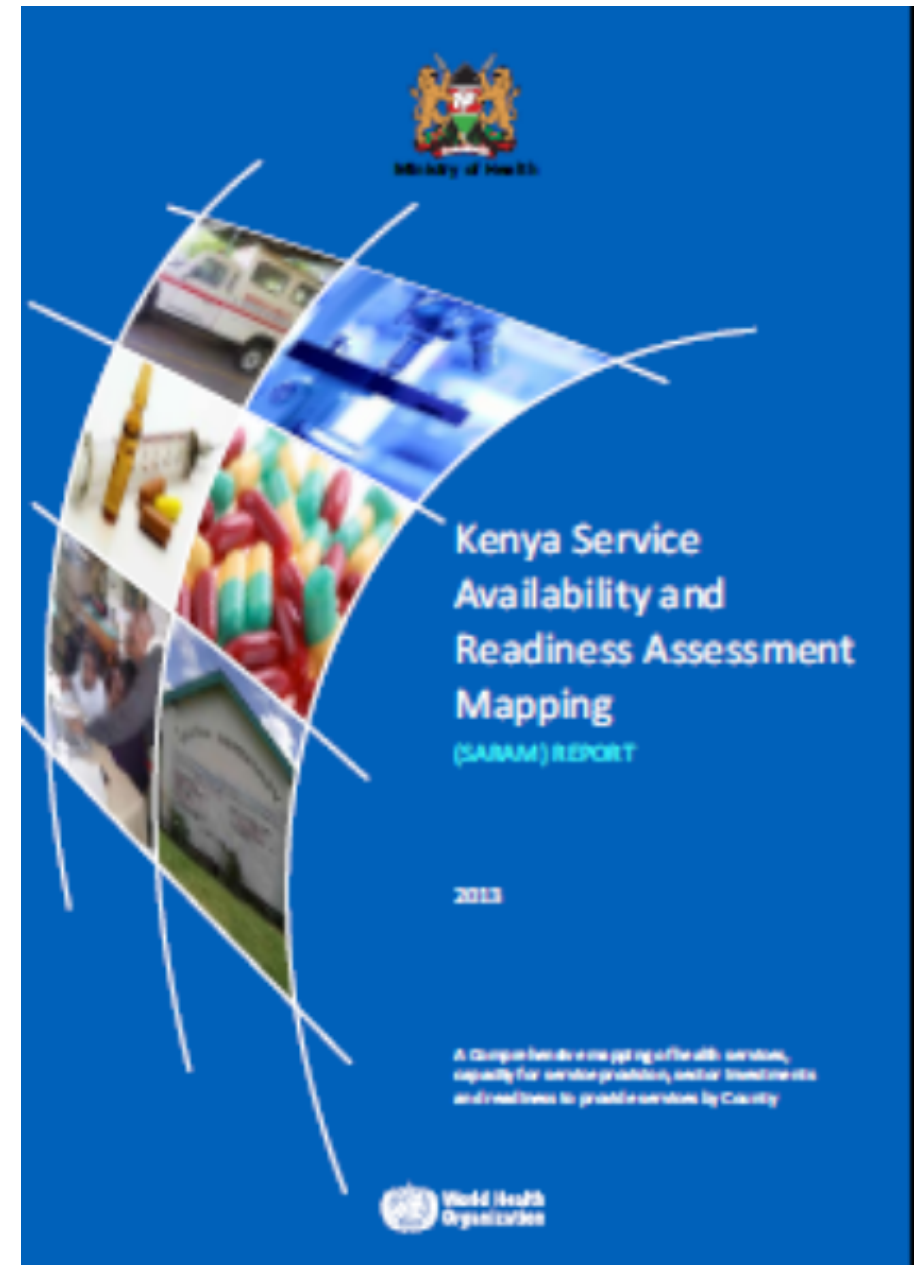
Based on KEPH and MOH guidelines, discuss the services that can be provided at Level 1 point of contact.



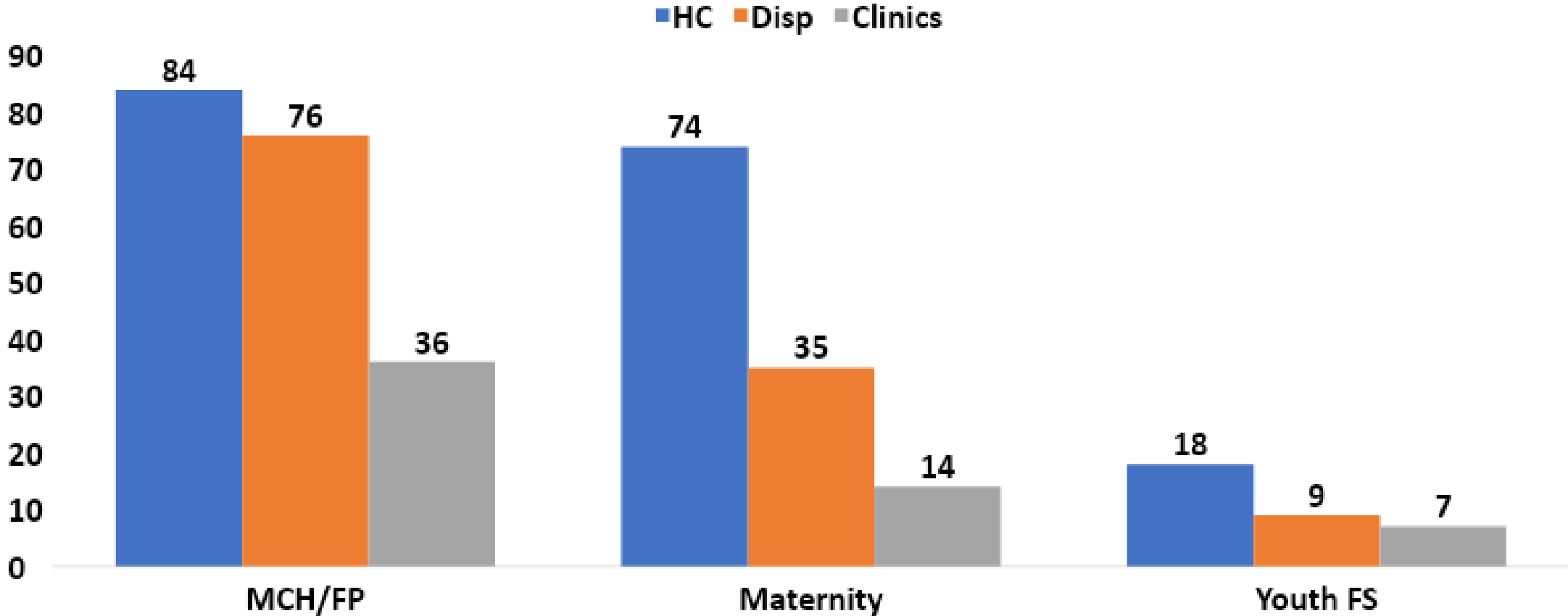
Indicators for Level 1 health services

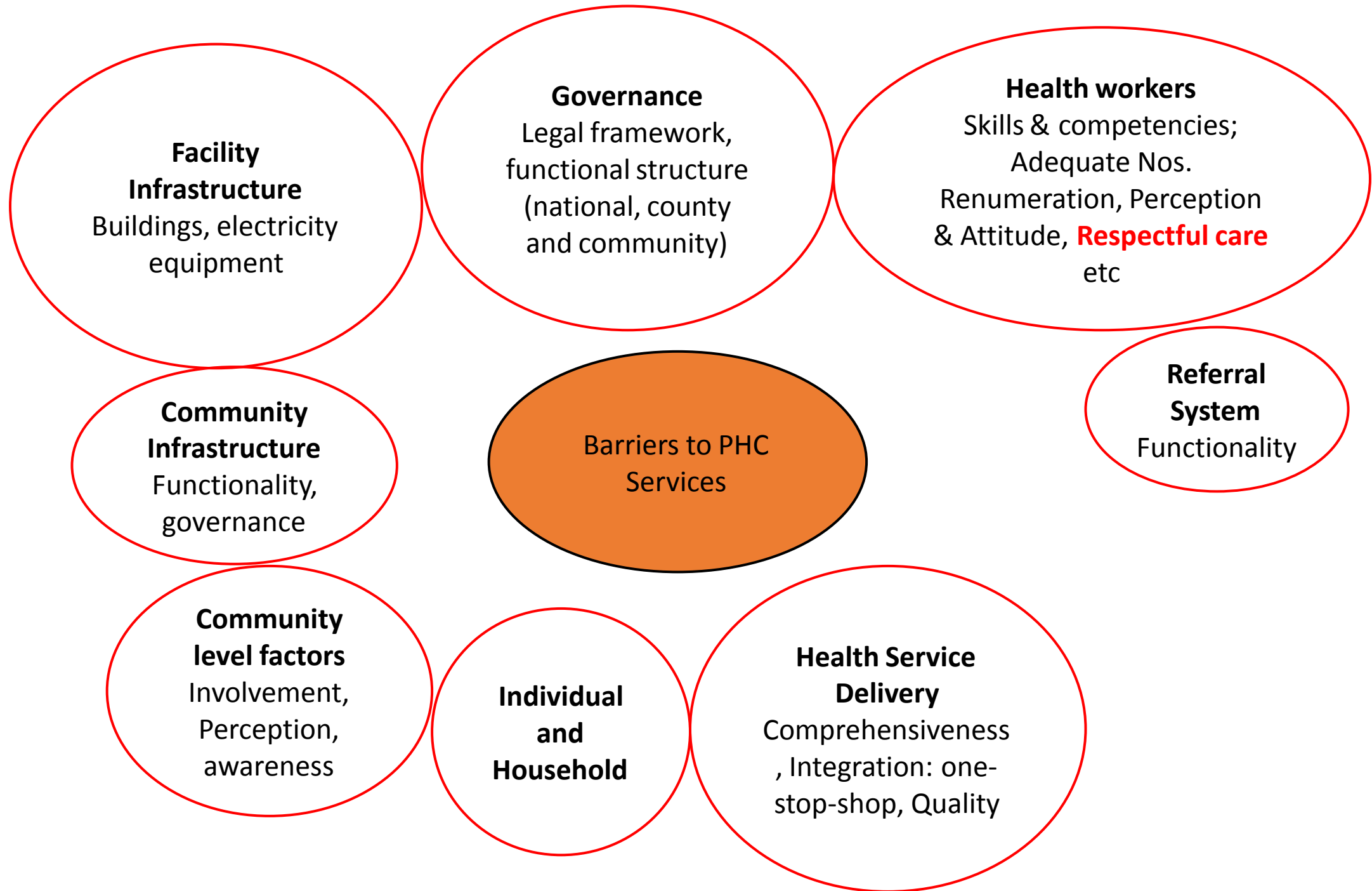
- New Community Health Units (CHU) established in underserved population and their Functionality
- Proportion of households aware of Community Health Services
- % increase in health services utilization by the community
- Number of referrals from the community to higher levels of care
- Number of level 1 one workforce recruited and deployed
- Proportion of community units with the recommended number of community health personnel (5 Community Health Extension Workers (CHEWS))

Kenya Service Availability and Readiness Assessment Mapping (SARAM report) 2013



Availability of KEPH services at PHC Facilities





Towards Universal Health Coverage (UHC)

Towards Universal Health Coverage (UHC)

- This is a visionary statement
- Where all people and communities have access to quality health services where and when they need them, without suffering financial hardship (WHO)

Towards Universal Health Coverage (UHC)

- Pooling of Funds from different sources
 - Government budgets
 - Mandatory/National Insurance Contributions
 - Employer prepayments for Health insurance
- The Pooled funds can be used to extend coverage to those individuals
 - to individuals who previously were not covered - **Population**
 - to services that previously were not covered - **Service**
 - to reduce the direct payments needed for each service - **Cost**

Towards Universal Health Coverage (UHC) - **WHO**

Next - Evaluation of PHC

Barriers and facilitators to provision of essential health benefits package within primary health care settings