Dear Partners,

Last Mile Health was founded on the values of truth, justice, and inclusion. The work of transforming systems to realize these values has never felt more important, as we face the dual pandemics of COVID-19 and systematic racism that have impacted each of us across the countries where we live and work.

In addition, we are committed to change and growth within. A year ago, we launched our 2020-2023 Strategic Plan, Within Reach, to build a global organization that could contribute to a growing movement to deliver quality primary healthcare to everyone, everywhere. Advancing that vision has required bringing more than 50 new members onto our team, developing new plans and systems, and launching new programs.

Though the past year has been filled with challenges that have tested us, it has also reinforced the importance of our mission: In addition to supporting countries to respond to COVID-19, the Last Mile Health team has reached incredible milestones:

- Supported community health workers in Liberia to conduct over 3 million household visits and screen or treat over one million children under five for malaria, pneumonia, diarrhea, and malnutrition.
- Established a country office in Malawi, recruited an incredible team, and completed INGO registration.
- Engaged 27,380 learners who have accessed the Community Health Academy’s Health Systems Leadership course.
- Launched the COVID-19 Digital Classroom
- Supported Ministries of Health in Ethiopia and Uganda to develop clinical education applications for community and frontline health workers.
- Published research in Exemplars in Global Health, in partnership with Gates Ventures, on countries that have made notable progress in establishing and scaling community health worker programs.
Looking to this new fiscal year, we are advancing the following bodies of work:

- **Diversity, Equity, and Inclusion** - Starting immediately, we are challenging our own practices and culture to ensure diversity, equity, and inclusion are better integrated into all aspects of our work. This will be a central priority across our organization moving forward.

- **Liberia Country Program** - We will continue to support over 4,000 community and frontline health workers to deliver high-quality healthcare through the full scale-up of the National Community Health Assistant Program.

- **Malawi Country Program** - Advance our goal of supporting the scale-up of Malawi’s National Community Health Strategy, and identify areas where we can improve the quality of systems and health services provided.

- **Community Health Academy** - Building on rapid and accelerating progress, we will launch 4-5 new Health Systems Leadership courses and clinical education modules for community and frontline health workers alongside partners in multiple countries.

- **New Country Engagements** - Continue providing advisory support to Ministries of Health in Ethiopia, Uganda, and Sierra Leone; deliver on our advocacy agenda; and evaluate our impact and publish key evidence from our work.

We are proud of how much we have achieved over the past year, even as we faced unprecedented challenges and complexity. We know that future progress will require honest reflection, discipline in decision making, and improved systems to advance our potential. We will rely upon each of you to help realize this vision. Together, we can continue to work towards a world where health is within reach of ALL.

Onward,

Lisha McCormick, President and COO
Raj Panjabi, CEO

It is important that contact tracers come from the communities they serve because they will already have an established relationship with their neighbors. This makes it easier for a tracer to move through the community, gather personal health information, and identify contacts. If the tracers don’t have the trust of the community, people will not disclose personal details, making their role very challenging.

Rachel Saykpah
Quality Assurance Officer

Read more from Rachel Saykpah on contact tracing and the importance of enlisting trusted community members to stop COVID-19.
COVID-19 Response

Around the world, COVID-19 poses a dual threat—infection and death from the virus itself, and a simultaneous reduction in access to primary healthcare services. To ensure patients can safely access the care they deserve, Last Mile Health’s response to COVID-19 is organized around three primary objectives: ensuring the continuity of primary healthcare services, limiting health worker infections, and eliminating transmission from known cases. These objectives underpin Last Mile Health’s partnerships with Ministries of Health in Ethiopia, Liberia, Malawi, and Uganda to support frontline health workers to keep safe and keep serving, and our global efforts to provide publicly accessible education and training content on COVID-19 and advocate for resilient health systems that prioritize frontline health workers.

Liberia: Ensuring Health Workers Can Keep Safe and Keep Serving

Well before the first case of COVID-19 was reported in Liberia in March, the government began taking swift, evidence-based measures to control the virus. As cases continue to grow, Last Mile Health is working with the Ministry of Health and partners to train and equip the country’s nearly 4,000 community and frontline health workers to safely respond to COVID-19, while providing essential primary healthcare in remote communities.

Table: Last Mile Health Supported Trainings of the COVID-19 Curriculum

<table>
<thead>
<tr>
<th>County</th>
<th>Government Health Officials</th>
<th>Clinical Supervisors</th>
<th>Community Health Workers</th>
<th>Community Health Volunteers</th>
<th>TOTAL</th>
</tr>
</thead>
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<tr>
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<td></td>
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<td>218</td>
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<td>133</td>
<td>192</td>
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<td>399</td>
<td>1,464</td>
</tr>
</tbody>
</table>

*The Ministry of Health is working with a coalition of partners to determine roles and responsibilities for the management of community health volunteers in Montserrado County prior to COVID-19 training.
Ministry of Health to provide community health workers with over two dozen instructional videos on infection prevention and control measures, as well as how to identify, refer, and monitor COVID-19 cases directly on their smartphones to ensure continued learning and training during a time of rapid change.

Effective infection prevention and control is the foundation of a strong COVID-19 response, ensuring the health and safety of both patients and health workers. Last Mile Health collaborated with the Ministry of Health and County Health Teams to conduct a baseline assessment on infection prevention and control measures in 88 facilities in Rivercess, Grand Gedeh, Grand Bassa, and Montserrado counties, which indicated an immediate need for training as well as personal protective equipment. As a result, infection prevention and control training was rolled out across the four counties, ultimately training 114 facilitators who then went on to train over 1,000 participants from 22 districts. This includes all health facilities in Rivercess, Grand Gedeh, and Grand Bassa, as well as 10 health facilities in Montserrado County. To further enhance infection prevention and control practices in primary care settings during COVID-19, Last Mile Health recruited and deployed four infection prevention and control specialists in Montserrado, Rivercess, and Grand Gedeh counties to supervise implementation of best practices and collect monthly data on adherence to inform recommendations for continued improvements in the targeted facilities.

Finally, Last Mile Health is working closely with the Liberia Ministry of Health to ensure health workers can keep safe and keep serving with personal protective equipment. As part of national-level COVID-19 response efforts, Last Mile Health and VillageReach collaborated with the Ministry of Health’s Supply Chain Management Unit to develop a quantification process and tool for estimating personal protective equipment needs. Subsequently, Last Mile Health

Staff at Kploh Clinic in Rivercess County receive infection prevention and control supplies. (Photo Credit: VillageReach/Koffa Tenbroh)

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**SCALE OF LIBERIA’S NATIONAL COMMUNITY HEALTH ASSISTANT PROGRAM**

*Cumulative from July 1, 2016 to June 30, 2020*

- **3,800+** Community and frontline health workers deployed*
- **3.6 Million** Home visits conducted
- **299,037** Pregnancy home visits conducted
- **1.1 Million** Cases of malaria, pneumonia, and diarrhea treated and malnutrition screenings conducted in children under five
- **186,788** Women with access to family planning
- **4,914** Potential epidemic cases reported
- **3,777** Digitally-empowered community and frontline health workers**
- **363** Community clinics staffed by frontline health workers

*Includes only formally trained and paid community health workers as part of the National Community Health Assistant Program, not inclusive of community health volunteers.

**New community and frontline health workers have been trained and deployed, however COVID-19 has prevented any further digital health distribution activities.
Malawian Training District Leaders and Procuring Protective Equipment

Last Mile Health continues to support community and frontline health workers as part of the Ministry of Health’s response by equipping district health leaders with operational knowledge to strengthen the response at the community level and procuring personal protective equipment to ensure the safe delivery of routine primary care.

In April 2020, Last Mile Health, alongside other key stakeholders, provided technical support to the Community Health Services Section of the Ministry of Health to develop the COVID-19 Community Health Worker Operational Guide, which prepares community health workers to prevent, detect, and respond to COVID-19. Last Mile Health printed 10,000 copies of the guide for the Ministry of Health to distribute to every Health Surveillance Assistant—a cadre of community health worker—in the country. Subsequently, Last Mile Health supported the Ministry of Health to train 45 district health leaders from eight of Malawi’s 28 districts as facilitators, who are responsible for training local community health workers on the operational guide. Key topics included a general overview of COVID-19, prevention and control measures, community case management, lastmilehealth.org | @lastmilehealth

secured emergency funding to source and procure over 1.5 million pieces of personal protective equipment from both domestic and international vendors, including gloves, masks, and face shields for community and frontline health workers across Liberia’s 15 counties. To date, Last Mile Health supported County Health Teams to distribute over 10,000 masks and 35,000 gloves in Rivercess, Grand Bassa, and Grand Gedeh counties. In addition to continuing to procure personal protection equipment, Last Mile Health is working to bolster the Ministry’s inventory management and distribution processes to ensure community and frontline health workers have the supplies they need to consistently prevent, detect, and respond to COVID-19.

NOWAI JOHNSON-GRAY ON THE ROLE OF DIGITAL HEALTH IN THE COVID-19 FIGHT

As the Senior Technical Coordinator for Digital Education, Nowai Johnson-Gray works closely with Liberia’s Ministry of Health to digitize the National Community Health Assistant Program curriculum—transforming traditional paper-based lessons into interactive content for use on smartphones. Since the onset of COVID-19, Nowai and her team are supporting the Ministry of Health to provide community health workers with over two dozen instructional videos on infection prevention and control measures, as well as how to identify, refer, and monitor COVID-19 cases directly on their smartphones. “In resource-constrained settings like Liberia, the use of mobile technologies are very effective and can improve the safety and quality of care,” says Nowai. “Empowering community healthcare workers with mobile phones will enable them to continue much of the necessary work they do.” Meet Nowai.

Peter Kamuloni, Senior Environmental Health Officer for Neno District, demonstrates proper personal protective equipment use during a training on the Malawi Operational Guidelines for COVID-19.
psychosocial education and support, monitoring and surveillance and importantly, community engagement strategies. A post-training evaluation indicated that the greatest areas of improved comprehension among participants were related to community case management of COVID-19—including supporting home-based care for mild cases, protecting health workers from infection during contact tracing, and the use of personal protective equipment.

To ensure Malawi’s community health workers can safely deliver primary healthcare, Last Mile Health has procured personal protective equipment—including masks, gloves, and gowns—for distribution in up to two districts, starting with Chikwawa District in the southern region of Malawi. Last Mile Health is also working with coalition partners to advocate for additional supplies for community health workers. Last Mile Health will continue to work with targeted districts to support community-level distribution of protective equipment and address gaps in training for community health workers.

The Community Health Academy Launches COVID-19 Digital Learning Tools

The Community Health Academy continues to deliver on its commitment to build the capacity of the health workforce globally. To respond to the needs of government partners working to rapidly respond to the COVID-19 pandemic, the Community Health Academy has accelerated its efforts to provide high-quality, evidence-based digital training and education content to support health workers and leaders on the frontlines of the pandemic.

The COVID-19 Digital Classroom

The Community Health Academy and four partners—CORE Group, Medical Aid Films, TechChange, and Translators without Borders—recently launched the COVID-19 Digital Classroom, which provides medically reviewed, multimedia training and education content for frontline health workers and local communities. Featuring the COVID-19 Library, the classroom is home to best-in-class resources from practitioners around the world as well as freely available content specifically designed for health workers operating in low-income countries. The Library, which includes animations and courses focused on building core skills in mitigating the public health effects of COVID-19, prevention and protection measures, and addressing the mental health impacts of the pandemic, is currently available in three languages, with plans to include more translations by the end of the year.

Smartphone-based Health Worker Training in Ethiopia and Uganda

To meet the urgent needs of country partners during the pandemic, the Community Health Academy is supporting Ministries of Health to deploy COVID-19 education and training for community and frontline health workers through text, video, and quiz content.

In Ethiopia, the Community Health Academy supported the Federal Ministry of Health and the Ethiopian Public Health Institute to develop and launch the COVID-19 Ethiopia app, which provides health workers with multimedia and quizzes on topics such as risk communication and community engagement, surveillance, case management, and infection prevention and control of COVID-19. Over 10,000 users downloaded the app in the first week.

Information for community-based health workers and local communities about Covid-19

An introduction

Three new animations available in the COVID-19 Library focus on building skills in mitigating the public health effects of COVID-19, prevention and protection measures, and addressing the mental health impacts of the pandemic.
In collaboration with Makerere University College of Health Sciences, Last Mile Health supported the Ministry of Health to launch the Uganda Capacity Building App, which contains modules with videos and quizzes that guide health workers on preventing, detecting, and responding to COVID-19. The Ministry of Health plans to expand the course offerings on this application and will institutionalize the use of this application in their national community health program.

“This capacity building app is a large boost to our endeavors to train health workers. We need everybody to be knowledgeable, not only about COVID-19, but also about the other essential services and the need for us to maintain the gains that we have made over the years.

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

Screenshots from the Community Health Academy-supported COVID-19 Ethiopia App (left) and the Uganda Capacity Building App (right).

GLOBAL CLASSROOM FOR HEALTH SYSTEM LEADERS

27,380
Learners have accessed the Community Health Academy’s first course for health system leaders

197
Countries or territories represented by enrolled learners

To date, over 27,380 learners from 197 countries have accessed the Community Health Academy’s first course for health system leaders, Strengthening Community Health Worker Programs to Deliver Primary Healthcare. To supplement learning opportunities for course participants, the Community Health Academy has hosted a series of webinars sharing insights about critical topics at the intersection of community health and the COVID-19 response. Now more important than ever, learners are applying their knowledge to strengthen community-oriented, primary healthcare systems that can pivot to COVID-19 response.

SECOND COURSE IN DEVELOPMENT ON HEALTH FINANCING

Production is underway for the Community Health Academy’s second online leadership course on health financing, developed in collaboration with the Financing Alliance for Health and slated for release later this year. Incorporating insights from stakeholders within ministries of health, ministries of finance, global health institutions, private sector organizations, and academia, the course will explore how different financing approaches have been utilized to implement and sustain national community health worker programs. Stay tuned for an enrollment announcement soon!
Launch of Exemplars in Global Health with Gates Ventures

Over the past three years, Last Mile Health has partnered with research institutions in Bangladesh, Brazil, Ethiopia, and Liberia to identify trends on establishing and sustaining high-performing national community health worker programs. Together, these countries offer valuable lessons that are documented in the newly-launched Exemplars in Global Health. These resources will help leaders, researchers, and funders more effectively design and strengthen community health worker programs.

Learn more about the Gates Ventures supported project.

Benjamin Killen is Last Mile Health’s County Supply Chain Specialist for Grand Bassa County in Liberia. Thanks to the generous support of the Eliza Forrest Kaye Bromfield Leadership & Development Fund, Ben has been taking a post-graduate diploma course in Global Health Procurement and Supply Chain Management from the Empower School of Health in collaboration with Kent State University. He says, “it has become my personal mission to work as hard as I can to make sure everyone in remote communities—starting with Grand Bassa County—has access to the drugs they need.” Learn more about how he is applying lessons from the course to strengthen Liberia’s supply chain.

**RECENT MEDIA**

- **The Lancet**: “COVID-19: Africa needs unprecedented attention to strengthen community health systems” by Lyudmila Nepomnyashchyi, Bernice Dahn, Rachel Saykpah & Mallika Raghavan
- **Exemplars**: “Community Health Programs and COVID-19: Understanding how countries are leveraging strong community health systems to prevent, detect and respond to the virus” by Danielle Boyda
- **Devex**: “Lessons from Liberia—what we learned from the fight against Ebola” by Marion Subah & Bernice Dahn
- **TIME**: “Dr. Raj Panjabi Warns of an Impending ‘Viral Apartheid’ If We Don’t Change Our COVID-19 Approach”
- **NPR**: “6 Pieces Of Advice From A Veteran Contact Tracer And A Newbie” with Rachel Saykpah
- **Forbes**: “Lessons From Ebola: It’s Not Enough To Fight One Disease Outbreak—you Have To Build Systems That Can Prevent The Next Ones” by Raj Panjabi and Olivia Leland