



Community health worker Abraham Browne counsels a mother on healthy behaviors during a patient visit in Grand Bassa County, Liberia.

Dear partners,

My first six months as Last Mile Health's Chief Technical Officer have been intense, energizing, and rewarding. I've spent time with our four country teams; settled into our growing office in Accra, Ghana; and immersed myself in our technical work. Among the projects I've worked on so far, I'm particularly excited to share the results of our Grand Bassa Impact Evaluation, a study our Liberia team conducted in partnership with the Ministry of Health to evaluate the impact of Liberia's National Community Health Program on children in Grand Bassa county, as well as to add to the existing evidence base that paid, professionalized community health workers are effective at delivering life-saving child health services.

With key support from Last Mile Health, the Liberian government launched its national program in 2016 to make primary healthcare universal by deploying community health workers to every rural and remote community in the country. The Grand Bassa Impact Evaluation design and implementation began in 2018—and five years later, the data show that **community health workers are effective** in the interventions they have been trained to deliver, especially for sick-child management. Often, in rural



Chief Technical Officer Divya Nair (second from left) with Last Mile Health staff and representatives from Malawi's Ministry of Health.

and remote communities, parents hesitate to take children to formal care providers due to lack of trust, but here we see direct evidence demonstrating how community health workers have built that trust. **A key statistic that illustrates this is that in 2022, community health workers were the foremost care providers for sick children, delivering 40-50% of treatment for acute respiratory infections, fever, and diarrhea, as well as providing appropriate care for malaria and diarrhea.** To put this in perspective, over the last three years, districts with the national program in Grand Bassa experienced **more than a 20 percentage-point increase in receiving care** for these major diseases



A community health worker and her child in Grand Bassa County, Liberia.

as compared with districts not yet implementing it. There's certainly room for improvement—for example, we must continue to think systematically to solve supply chain challenges and other obstacles that hamper progress in service coverage. But community health workers themselves are doing very well in addressing what's within their control: delivering quality primary care.

The results of the Grand Bassa Impact Evaluation are important—and the gathering and use of data itself is central to progress in the community health field. Without

data, we wouldn't know what's working and what's not. We wouldn't be able to make decisions on what to prioritize. Data must be high-quality, systematic, and reliable, and it must be used effectively to inform program improvements and change outcomes.

We now have data that tangibly shows the power and potential of community health workers, and also reveals where challenges exist. If you give them the tools they need, community health workers are really able to deliver, especially for sick children. Where they're less successful, it's often because they're lacking in the key conditions they need to succeed—which is why we continue our advocacy efforts at the national and global levels. Last month, our team attended the United Nations General Assembly, where we leveraged evidence like this to make the case for professionalized community health workers to be supported by global systems that prioritize and value them, that are less siloed, and that provide sustained financing so community health workers can work at their full potential. All this is especially challenging and critical in the rural and remote communities that are our focus.



Last Mile Health and partners, including Malawi Minister of Health Khumbize Chiponda, at UNGA.

As I reflect on my first six months with Last Mile Health, I have confidence in our mission. We're working to gather the right data. We aim to leverage it effectively. We're sharing it broadly. Looking ahead, I am heartened by the dedication of my colleagues and the passion of community health workers who provide lifesaving care. In the words of Serkalem Getachew, a community health worker from Ethiopia who spoke on our panel at the International Conference for Primary Health Care, **"Community health workers are the linkage to the health system for all patients in our communities. We are the most responsible in preventing maternal and child death in our communities. My message to health leaders and partners is that we must prioritize this."**

In partnership,

Divya Nair, Chief Technical Officer

GLOBAL NEWS

At the UN General Assembly, we advocated for paid, professionalized community health workers for the advancement of universal health coverage and pandemic response.

At the Clinton Global Initiative's annual meeting, Chelsea Clinton announced our new commitment with Integrate Health to support and strengthen gender-responsive community healthcare.

At the International Conference for Primary Health Care, we shared lessons from our blended learning training for Ethiopia's community health workforce in partnership with the Ministry of Health.

As part of our Africa Frontline First work, we are serving as the lead service provider on **Project BIRCH**, a targeted funding stream from the Global Fund that supports 11 countries in Sub-Saharan Africa to access financing for their community health priorities.

COUNTRY NEWS

In Ethiopia, our Extension Essentials app was featured at the **National Health Exhibition**, highlighting the power of technology in supporting community health workers to deliver quality care at the last mile.



Community health workers in Mchinji District, Malawi.



Chelsea Clinton announces Last Mile Health and Integrate Health's commitment to action at the Clinton Global Initiative.

With Liberia's Ministry of Health and partners, we developed and piloted the **electronic community-based information system** in three counties. eCBIS will support community health workers in reporting data, requesting supplies, and making clinical decisions.

We rolled out the **integrated Community Health Information System** in Mchinji District in partnership with Malawi's Ministry of Health. To date, iCHIS has been scaled to nine districts, helping standardize reporting and supporting community health workers in decision-making at the point of care.

In Sierra Leone, with the Ministry of Health and Gates Ventures, we **disseminated the results of key research** into the recruitment, training, and deployment of a new fully-integrated national cohort of community health workers.

LAST MILE HEALTH NEWS

We conducted an **organization-wide survey** to track our progress in our diversity, equity, and inclusion work—and we're leveraging the results to continue our journey toward greater equity and justice.

OUR IMPACT

AS OF SEPTEMBER 30, 2023

Together, Last Mile Health and our government partners supported:

13,015

community and frontline health workers to provide primary health services

14+ million

people with improved access to primary healthcare

Guided by our three-part Theory of Change, we work to realize our strategy by working to strengthen health systems, train health workers, and deliver primary healthcare.



STRENGTHEN

Total number of treatments delivered for malaria, diarrhea, and acute respiratory infections by community health workers to children under five years of age in Liberia

1,099,013

cumulative since 2016

Number of routine home visits provided by community health workers nationally in Liberia

11,693,840

cumulative since 2016



DELIVER

Percentage of children aged 12-23 months who have received all three doses of pentavalent immunizations over the past year

58%

in Rivercess County, Liberia

11%

in Grand Bassa County, Liberia

Percentage of children under five years of age who received treatment from a formal provider

69%

in Rivercess County, Liberia

54%

in Grand Bassa County, Liberia



TRAIN

Number of community and frontline health workers trained in health delivery content during the current fiscal year

804 in Ethiopia

FOOTNOTES:

- Strengthen figures are cumulative since 2016, which is when Liberia's national program was launched.

To learn more about our impact, visit our [website](#).