
**Strengthening Sexual Reproductive,
Maternal, New-born, Child, Adolescent
Health and Nutrition Services by
Implementing the WHO People-Centered
Health Services Model in Zambia**



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Authors:

Dr. Angel Mwiche	Director – Reproductive Health	Ministry of Health
Dr Patricia Bobo	Assistant Director – Child Health & Nutrition	Ministry of Health
Olatubusun Akinola	Associate Director	Clinton Health Access Initiative
Rabson Zimba	Program Manager	Clinton Health Access Initiative
Kutha Banda	Senior Program Officer – Learning & Evaluation	Clinton Health Access Initiative
Charity Moonga	Intern	Clinton Health Access Initiative
Dr. Nathan N Bakyaita	Country Representative	World Health Organization
Dr. Sarai B Malumo	National Professional Officer – SRHR/MNH	World Health Organization

1 Background

Achieving Universal Health Coverage (UHC), an important target of the SDG, requires that all people have access to the health services they need, when and where they need them, without financial hardship. The 69th World Health Assembly (1) held on 28 May 2016, noted that globally, more than 400 million people lacked access to essential health care (2) and where accessible, care was too often fragmented or of poor quality, and consequently the satisfaction with health services remained low in many countries.

Following this resolution, the World Health Organization (WHO) framework on Integrated People Centered Health Services (IPCHS), along with the support of the World Health Assembly 69.24 (WHA 69.24) resolution on strengthening IPCHS, was adopted by the sixty-ninth World Health Assembly.

The framework calls for a fundamental shift in the way health services are funded, managed, and delivered in supporting countries' progress towards universal health coverage (UHC).

Integrated People-Centered Health Services essentially mean putting the comprehensive needs of people and communities, not only diseases, at the center of health systems, and empowering people to play a more active role in their own health. The framework recognises “people-centred care” as an approach to care that consciously adopts individuals', carers', families', and communities' perspectives as participants in, and beneficiaries of, trusted health

What is IPCHS? An integrated and people-centred care system that brings health and social providers together in order to achieve(1):

Equity in access: For everyone, everywhere to access the quality health services they need, when and where they need them.

Quality: Safe, effective, and timely care that responds to people's comprehensive needs and meets the highest possible standard

Responsiveness and participation: Care is coordinated around people's needs, respects their preferences, and allows for people's participation in health affairs.

Efficiency: Services are provided in the most cost-effective setting with the right balance between health promotion, illness prevention, and inpatient and outpatient care, avoiding duplication and waste of resources

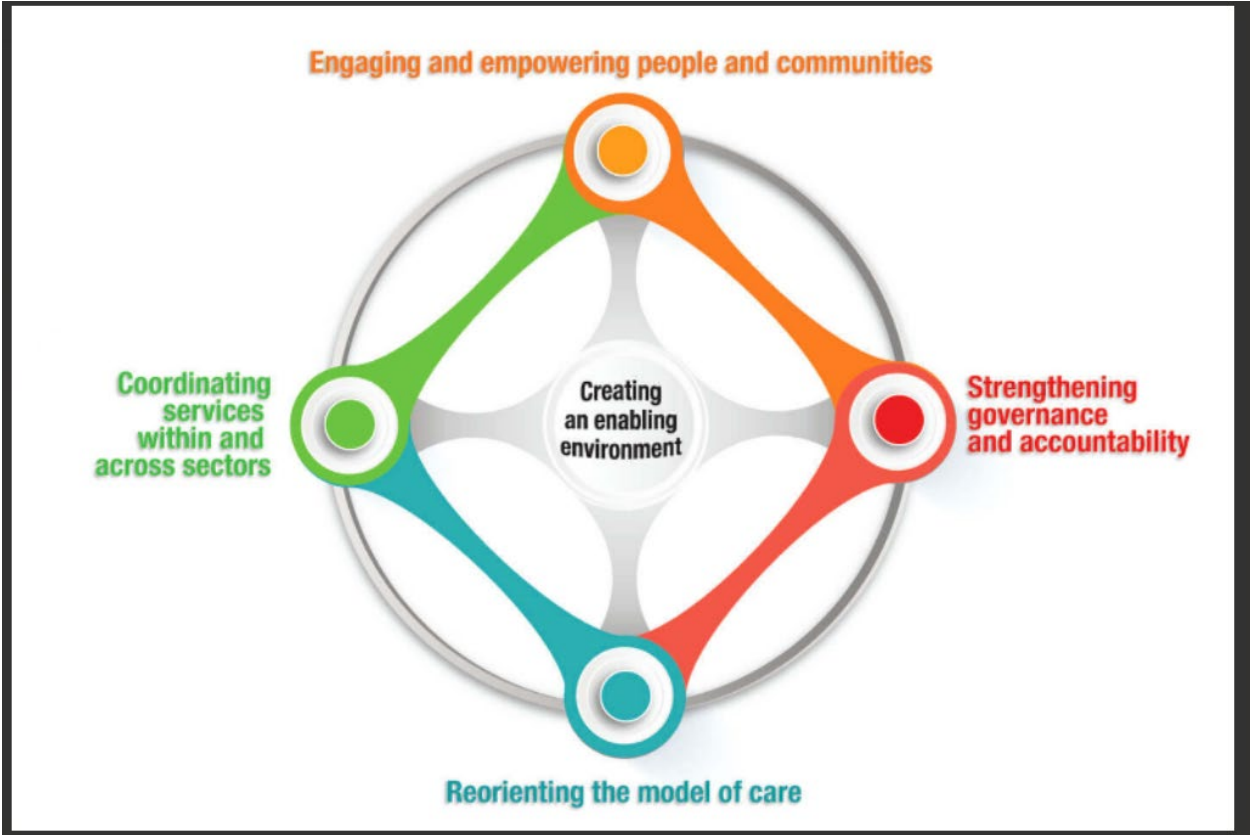
Resilience: Strengthening the capacity of health actors, institutions, and populations to prepare for and respond effectively to public health crises.

systems that are organised around the comprehensive needs of people rather than individual diseases, and respects social preferences.

People-centred care also requires that patients have the education and support they need to make decisions and participate in their own care and that carers can attain maximal function within a supportive working environment. Globally, health-care systems and organizations are looking to improve health system performance through the implementation of person-centered care (PCC) models (3).

To implement IPCHS, the WHO recommends five strategies, to be implemented to achieve equity in access, quality, responsiveness and participation, efficiency, and resiliency for health systems and health service delivery. The figure below shows the WHO IPCHCS framework.

Figure 1: WHO IPCHS strategies ([//www.integratedcare4people.org/ipchs-framework/](http://www.integratedcare4people.org/ipchs-framework/))



Source: ([//www.integratedcare4people.org/ipchs-framework/](http://www.integratedcare4people.org/ipchs-framework/))

2 Implementing IPCHS in Zambia

IPCHS is a new concept for Zambia and has been implemented in limited proportions. The WHO global strategy on IPCHS reported that in Zambia there is limited focus on integrated community case management for malaria, pneumonia and diarrhoea to reduce child mortality (4).

The Ministry of Health (MoH) in Zambia aims at attaining universal health coverage in which all Zambians have access to essential health services but despite the Zambian health sector implementing the Sexual Reproductive, Maternal, Newborn, Child Adolescent and Nutrition (SRMNCAH&N) services, the sector continues to face challenges and needs to continue devising solutions to address them.

In 2021 the embassy of Sweden in Zambia started supporting the MoH to implement the Placing people at the Centre (PeaCe) health program to run from 2021-2024 as a build-up from the RMNCAH&N program which was implemented from 2015 to 2021. To strengthen the delivery of SRMNCAH&N services in the country and ensure a robust and resilient health system that is critical for achieving universal health coverage (UHC) and the Sustainable Development Goals (SDGs), the MoH also adopted the WHO Integrated People-Centered Health Services (IPCHS) approach in 2021.

The Clinton Health Access Initiative (CHAI) is implementing the PeaCe Health program in Eastern and Southern provinces of Zambia. Under the IPCHS component, CHAI has supported MOH in developing need-based work plans for hospitals, districts and provincial health offices in Southern and Eastern provinces. CHAI also provided technical and financial support to the MOH to hold planning meetings for the Medium-Term Expenditure Framework (MTEF) for 2021. CHAI further supported MOH in conducting geospatial analysis to guide priority setting for infrastructure works to be done on the program. In 2021 CHAI collaborated with WHO to support MOH to develop the Integrated People-Centered Health Care Services (IPCHCS) guidelines and facilitator's training guide. This process was informed by the WHO IPCHCS framework. Several consultative meetings were held under the leadership of MOH to finalize

the document. MOH approved the guidelines in September, after which 800 guidelines and 200 facilitators guides were printed. Later, CHAI organized three trainings in October and November to establish a pool of IPCHS national and provincial level IPCHS approach trainers: 13 national-level trainers and 68 provincial trainers.

The WHO IPCHS approach is being implemented in the two provinces contributing to strengthening the delivery of SRMNCAH&N services.

The model is contributing to reducing the burden of disease through engagement and participation of both the key stakeholders, the Individual and the community who are being empowered with knowledge and skills to intelligently participate in planning for their health.

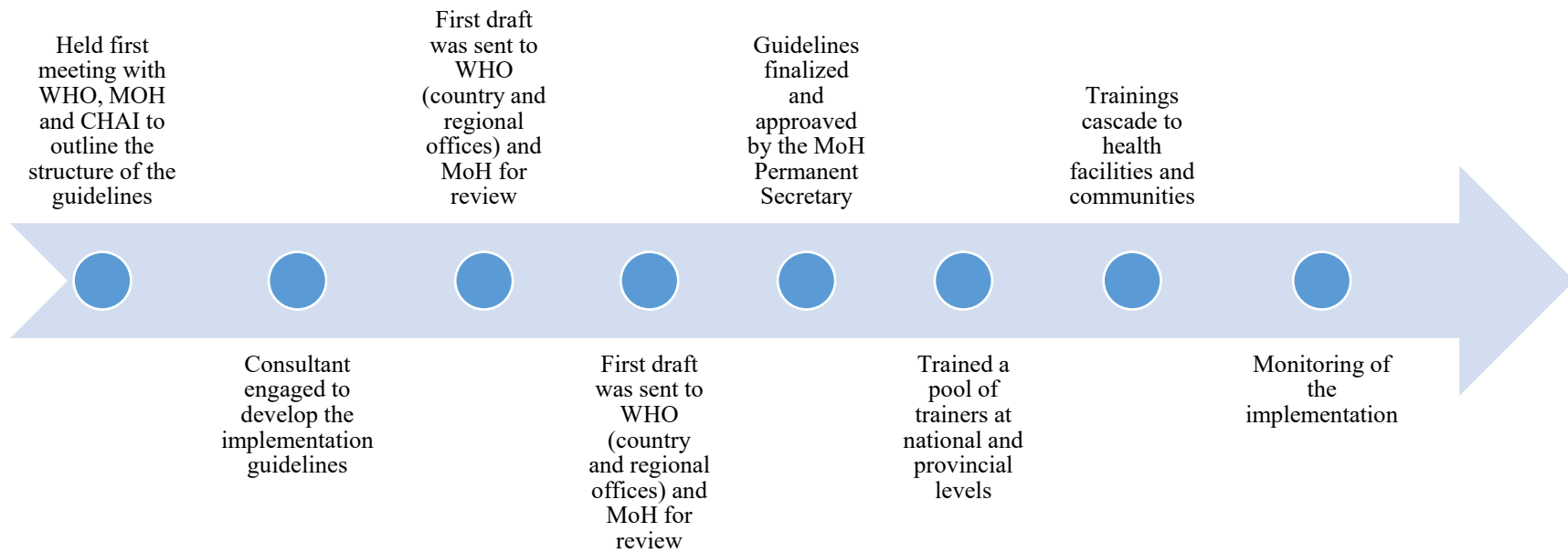
The IPCHS approach is critical for Zambia to progress towards attainment of universal health coverage and to achieve the Sustainable Development Goals (SDGs) by shifting from health systems designed around diseases and health institutions towards health systems designed around people and communities. The approach is also ensuring that services reach the hard to reach, vulnerable and marginalized populations to ensure that no one is left behind.

The MoH has put in place guidelines to improve SRMNCAH&N Service delivery through IPCHS.

The ministry employs interventions to strengthen processes and capacity at all levels of the health system, while enhancing access to and use of high-impact sexual, reproductive, maternal, newborn, child, adolescent health and nutrition (SRMNCAH&N) services. A strong interface exists between the health facilities and communities to encourage the use of SRMNCAH&N services by Zambians and their families.

The endorsement of the Placing people at the Centre of Health Systems (PeaCe) program by MoH in March 2021, formalized the commitment of the Ministry to advance the delivery of SRMNCAH&N services through the IPCHS approach. As part of the MoH agenda, guided by the national health strategic plan (NHSP) 2017 – 2021 (5) using a primary health care approach, the Ministry perceives IPCHS as a potential solution to the SRMNCAH&N gaps currently burdening the healthcare system in Zambia.

Figure 2: Process of implementing IPCHS SRMNCAH&N services in Zambia



3 Results thus Far

Working with the Ministry of Health (MoH) in Zambia and partners to implement the WHO IPCHCS approach, some of the results include developing the IPCHCS guidelines and facilitator's guide, printing 800 copies of the National IPCHCS guidelines and 200 copies of facilitators training guides: and training 13 national level officers and 68 provincial programme officers as Trainers of Trainers for the IPCHCS approach. CHAI trained 47 Healthcare workers in Eastern province and 186 Healthcare Workers (HCWs) in Southern Province on IPCHCS. CHAI also distributed 380 guidelines to Southern Province while 395 were distributed to Eastern Provinces. By the end of March 2022, 1,014 HCWs and 2,465 community-based volunteers across 450 facilities had been trained in the IPCHCS approach.

4 Looking to the Future

The implementation of IPCHS, which has started in Eastern and Southern provinces will eventually be rolled out to the rest of the country with MoH leadership. Through this approach, RMNCAHN program coordination, planning and stakeholder collaboration and partnerships will be strengthened to deliver people centered care and Zambia will move towards ensuring that all women, children, adolescents and their families have access to health services that are of high quality, safe and acceptable by the communities and that no one is left behind. These IPCHCS guidelines are an important tool in building capacity to sustainably plan, manage, and oversee high quality service delivery.

5 References

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