



Project Summary: 20% Reinvestment Initiative

A joint initiative of GlaxoSmithKline (GSK) and CARE, AMREF and Save the Children

Background

The World Health Organization has estimated that there is a shortage of 3.5 million health workers worldwide, and that millions of existing health workers — nurses, doctors, midwives and community health workers — lack the support, equipment, and training they need to provide quality care. This leaves hundreds of millions of people at risk of needless suffering, disability and death, and is a leading constraint to achieving the Millennium Development Goals.

To help meet this need, GlaxoSmithKline (GSK) committed in 2011 to reinvest 20% of profits made in the Least Developed Countries (LDCs) in which it operates, back into projects that strengthen the healthcare infrastructure in those countries.

CARE International UK (CIUK) was invited by GSK to be the implementing partner of the initiative in the Asia region, covering **Nepal, Bangladesh, Cambodia, Afghanistan, Myanmar** and **Laos**. Save the Children and AMREF were selected as the partners for the Africa region, covering Rwanda, Ethiopia, Democratic Republic of Congo, Yemen, Niger, Sierra Leone, Angola, and Zambia.

The **shared objective** of the investments is to improve health outcomes of the world's poorest by supporting frontline health workers who operate in these countries. Through programmatic, learning and advocacy efforts, the initiative hopes to galvanize additional national and international action and support to alleviate the critical health workforce shortfall.

Project Overview – Aisa Region

CIUK manages the relationship with GSK at a global level and is responsible for the management of grants and delivery of the program across the Asia region. CIUK is also working closely with the CARE USA Health Equity Unit and the various country office staff to develop and implement the program for the Asia region.

The overarching **vision** of the 20% Reinvestment Initiative in the Asia Region is to improve the health outcomes of marginalised people living in the world's poorest communities, especially women and children, by ensuring awareness, access and utilization of maternal and child health care services.

To achieve this, the project's investments focus on **strengthening the capacity of frontline community health workers (HWs)** by ensuring they are fully prepared, equipped and empowered to provide effective and responsive healthcare to vulnerable women and children in community contexts. Additionally, this project seeks to discover, develop and share innovative approaches to achieving lasting impact at a broad scale on underlying causes of poverty, and social and gender injustice.

While the context and specific objectives for each country's project varies, key **strategies** of the Asia region program include:

- Increase the numbers, capacity and effectiveness of HWs through enhanced training, provision of new skills, competencies and supplies, and improved supervision and monitoring;
- Strengthen local health governance structures;
- Enhance community health systems, with a goal of reaching the most vulnerable and marginalized women;
- Apply innovative techniques within programming such as community support groups, mobile applications and the Community Score Card (participatory governance tool);
- Expand community mobilization efforts and participation of community groups in support of MNCH;
- Seek and support government partnerships (ministries of health and local government);
- Leverage programs and funds to influence health care provision and governance in country through exploration of partnerships with private, public and NGO sectors;
- Build on existing GSK and CARE models and projects for replication and scale, including previous nutrition work and engagement with the consumer business of GSK;

- Develop a research agenda that will stimulate transformational change in the long term, to include research into the role of the private sector in health development;
- Measure impact and create an evidence base;
- Connect and share learning across the regions on how to improve HW effectiveness to augment impact on MNCH outcomes; and
- Enhance program visibility and communications, to include increased participation in global platforms.

CARE's Accomplishments

Through early investment funding, projects have been successfully underway in Bangladesh and Nepal since July 2011 and in Afghanistan since April 2012. Newer projects in Cambodia and Myanmar have already realized notable achievements, and a program in Laos is set to kick-off in early 2013.

NEPAL

- Since July 2011, CARE has helped train 1,736 Female Community Health Volunteers by providing them with refresher training and new skills to promote good governance and quality services that address rural women's most common reproductive health problems.
- Successfully developed the technical capacity of 413 Community Health Workers who have increased access to health services in rural areas for over 95 Health facilities in two districts.
- Renovated and equipped 22 local community health facilities so they are now able to conduct safe deliveries, upgrades included installation of water supply and essential equipment for safe delivery.
- Since July 2012, CARE has started a new phase of activities to train 2,200 Female Community Health Volunteers and 616 Community Health Workers reaching an additional 40,000 women and their families in rural areas in Nepal.

BANGLADESH

- To date, CARE has trained 120 Community Health Workers to provide essential health services reaching over 40,500 poor families. Trainings have introduced new skills that contribute to improved MNCH outcomes, such as antenatal and post natal care, essential newborn care and family planning counseling.
- Since July 2011, CARE has established a total of 46 Community Support Systems creating a positive environment for families to ensure services reach pregnant women during their pregnancy and to increase communities' knowledge on danger signs and other MNCH related issues.
- In 2012, CARE started a new phase of activities to train an additional 150 Community Health Workers reaching approximately 1.5 million more people in the poorest communities in Bangladesh.

AFGHANISTAN

- Since April 2012, CARE has recruited and provided initial training to ten Community Based Educators and recruited a further four Community Midwives.
- CARE will train additional Community Based Educators to disseminate information and messages on safe motherhood, infant care and birth planning to 3,000 women.
- CARE will also establish community support groups to raise community awareness on the danger signs of birth complications for mother and child and address the underlying reasons preventing women and their families from accessing quality health care.

CAMBODIA AND MYANMAR

- In late 2012, in Myanmar, CARE began training 175 Community Health Workers and upgrading facilities in seven rural health centers, which will reach a total of 174,993 women over a one year period.
- In Cambodia, CARE has begun training 41 Community Health Workers to reach nearly 9,000 beneficiaries in remote and marginalized villages of Cambodia. CARE is also supporting four health centers to improve planned outreach services for vaccinations and family planning.

For more information, please contact Christine Galavotti, Director for Sexual, Reproductive and Maternal Health at cgalavotti@care.org.