



health2go

HEALTH 2 GO

Progress Report through June 30, 2024

Finalized: September 10, 2024

Report prepared and reviewed by Cassandra Cowdell, MPH and Professor Stephen Alder, Ph.D., MBA

castapebble

 **ENSIGN GLOBAL**
COLLEGE

 **CENTER FOR BUSINESS,
HEALTH, AND PROSPERITY**
THE UNIVERSITY OF UTAH
DAVID ECCLES SCHOOL OF BUSINESS



Health 2 Go Program Overview

Health 2 Go (H2Go) is a community-based primary healthcare program that focuses on improving the health of communities. While the traditional model of healthcare requires people to go to facilities to access basic services, H2Go employs the approach of bringing the health system to the doorsteps of families. The program is designed to overcome obstacles that cause similar programs to fail and to support countries in reaching United Nations' Sustainable Development Goals (SDGs). Specifically, H2Go aims to contribute to SDG targets 3.2, which seeks to reduce child mortality, and 3.8, which aims to achieve universal health coverage.

Health 2 Go delivers the health system to communities:

- Builds community capacity through education and health promotion
- Manages basic illnesses in communities
- Bridges the gap between health system and communities
- Connects complicated illnesses to health facilities

Health 2 Go Mechanisms include:








- Appropriate use of the healthcare system
- Community Health Workers known as Community Based Agents (CBAs)
- World Health Organization (WHO)/UNICEF Integrated Community Case Management of Childhood Illness (iCCM)
- Children under age 5 → mothers → families → communities

Health 2 Go overcomes common challenges of community-based programs:

COMMON CHALLENGES

- Insufficient training
- Inconsistent access to equipment, medicines, and supplies
- Limited supervision structure
- Disengaged communities
- Disconnected from formal health system
- Poor emphasis on prevention
- Ineffective consumer branding

HEALTH 2 GO SOLUTIONS

-  Ongoing high-quality training
-  Consistent provision of durable equipment, medicines, and supplies
-  Regular supportive supervision
-  Continual community engagement
-  Clear integration into formal health system
-  Prevention, health promotion, and early treatment emphasized
-  Effective consumer branding

H2Go is currently implemented in two geographically diverse areas in Ghana. The overarching goals, which we are actively pursuing, are for H2Go to be scalable to a level that allows for country-wide implementation and to be able to adapt and expand this program to other countries.

Health 2 Go: Wawase CHPS Zone Pilot

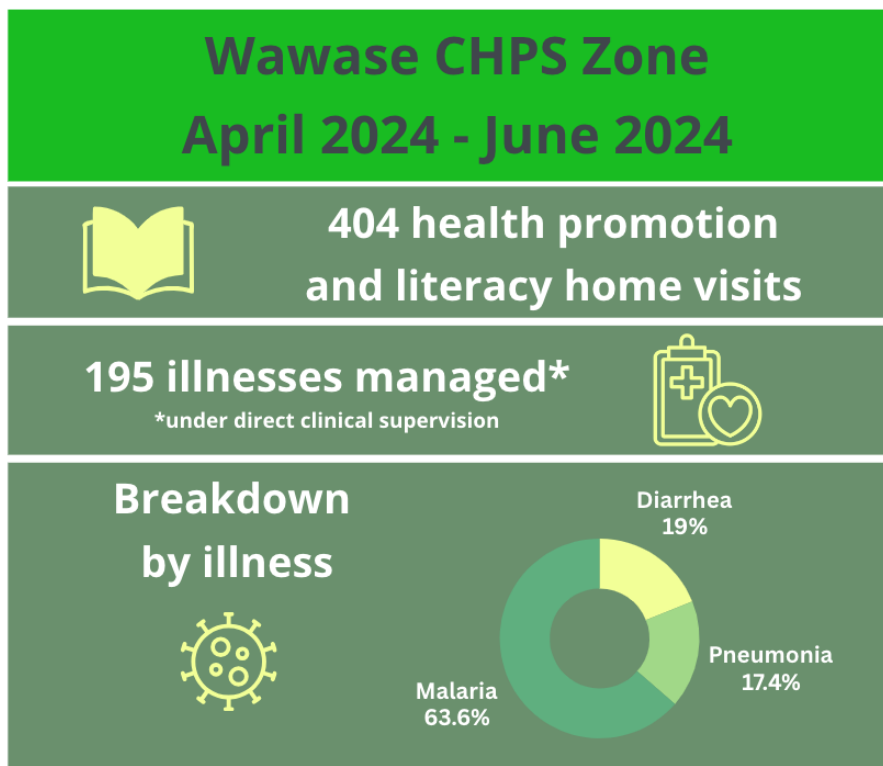
Implementation Overview

H2Go launched in six (6) small communities in the Wawase Community-based Health Planning and Services (CHPS) zone in the Kpong sub-district of the Lower Manya Krobo District in the Eastern Region of Ghana on October 24, 2016. Approximately 1,500 people in these communities are being served by 10 H2Go CBAs. A list and map of these communities is listed on page 8.

H2Go Wawase CHPS Zone Recent Activities

Among approximately 200 children under age 5 during the quarter Apr. 2024 – Jun. 2024:

- 195 illnesses managed in the community by H2Go CBAs
 - 124 malaria; 37 diarrhea; 34 pneumonia/Acute Respiratory Illness (ARI)
- 1 referral was made to health facilities for serious and life-threatening illnesses
- 404 home visits



The most recent refresher training occurred on March 21-22, 2024. The training was held at Ensign Global College in Kpong, Ghana, and was attended by a total of 15 participants. Participants included Ghana Health Service personnel trained as H2Go facilitators/managers and supervisors, H2Go Wawase CBAs, and H2Go team members, including Dr. Stephen Manortey, Ghana country H2Go Principal Investigator (PI), and Moselle Brown and Gideon Acheampong, Ghana country H2Go Project Coordinators.

Health 2 Go BCCDP Demonstration Project

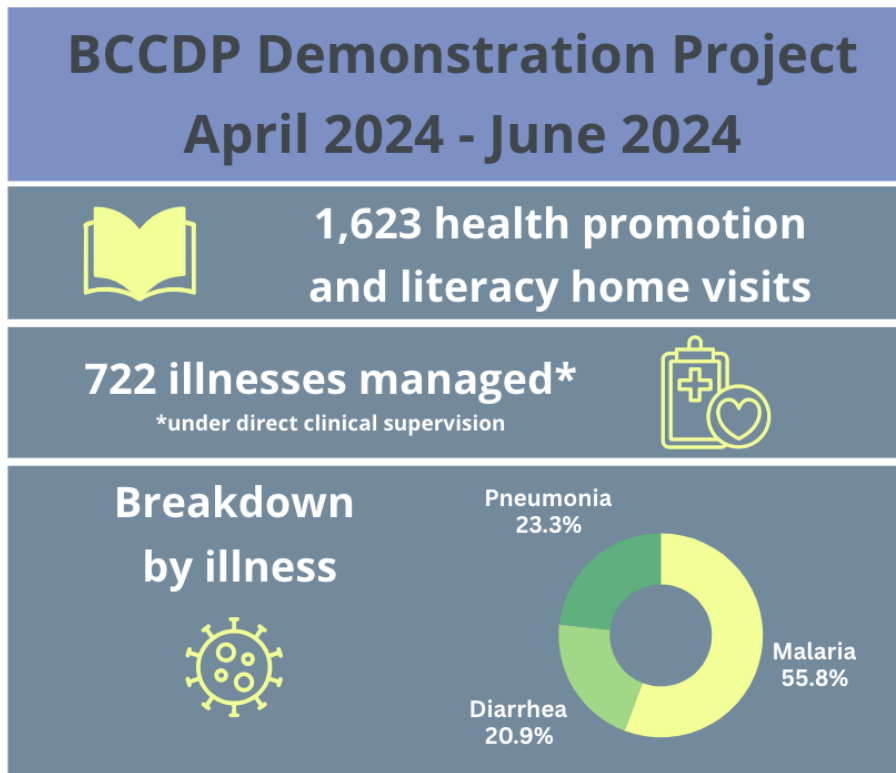
Implementation Overview

The expansion of H2Go into a larger demonstration project called the Berekuma Community Collaborative Development Program (BCCDP) follows the success of the Kpong Pilot, launched in May 2018. Approximately 20,000 people in 20 rural communities in the Atwima Nwabiagya North District near Kumasi in the Ashanti Region are being served by 28 H2Go CBAs. A list and map of these communities is listed on page 8.

H2Go BCCDP Recent Activities

Among approximately 2,200 children under age 5 during the quarter Apr. 2024 – Jun. 2024:

- 722 illnesses managed in the community by H2Go CBAs
 - 403 malaria; 151 diarrhea; 168 pneumonia/Acute Respiratory Illness (ARI)
- 48 referrals were made to health facilities for serious and life-threatening illnesses
- 1,623 home visits



The most recent refresher training occurred on May 30-31, 2024. The training was held at the Atwima Nwabiagya North Health Directorate in Kumasi, Ghana, and was attended by a total of 33 participants. Participants included Ghana Health Service personnel trained as H2Go facilitators/managers and supervisors, H2Go BCCDP CBAs, and H2Go team members, including Gideon Acheampong and Moselle Brown, Ghana country H2Go Project Coordinators.

Health 2 Go Project Results Since Inception

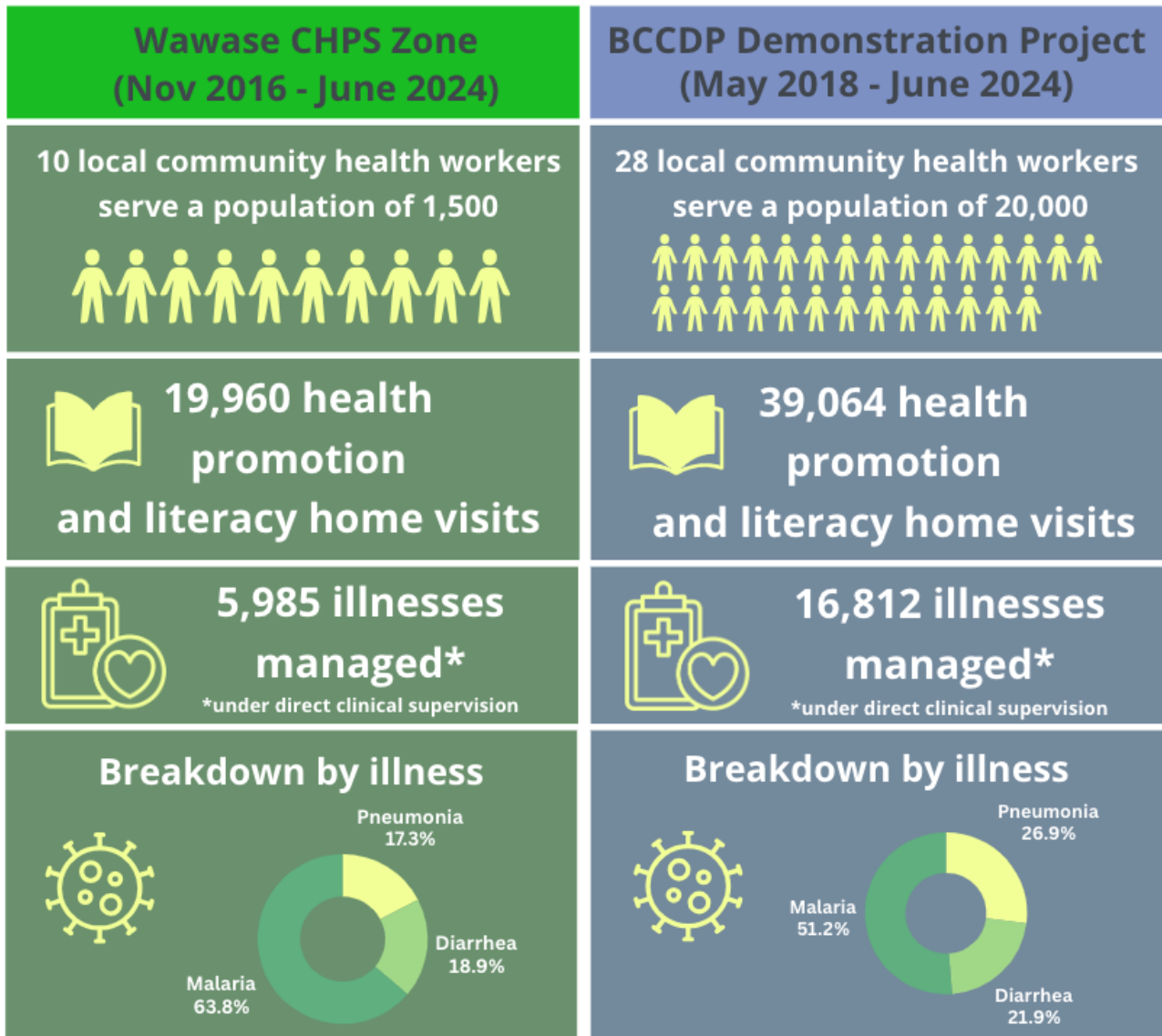
Results Overview

Wawase CHPS Zone: Among approximately 200 children under age 5, (November 2016 – June 2024):

- 5,985 illnesses managed; 3,818 malaria; 1,129 diarrhea; 1,038 pneumonia
- 211 referred to health facilities for serious and life-threatening illnesses
- 19,960 home visits

BCCDP Demonstration Project: Among approximately 2,200 children under age 5, (October 2018 – June 2024):

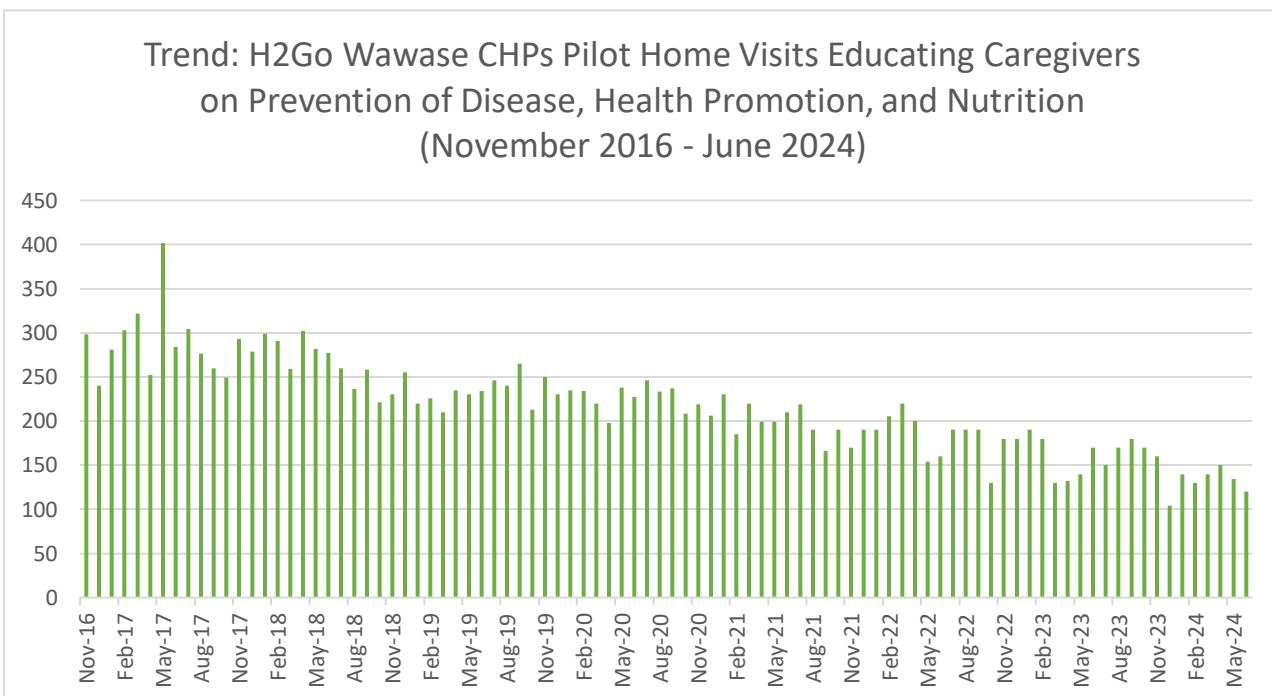
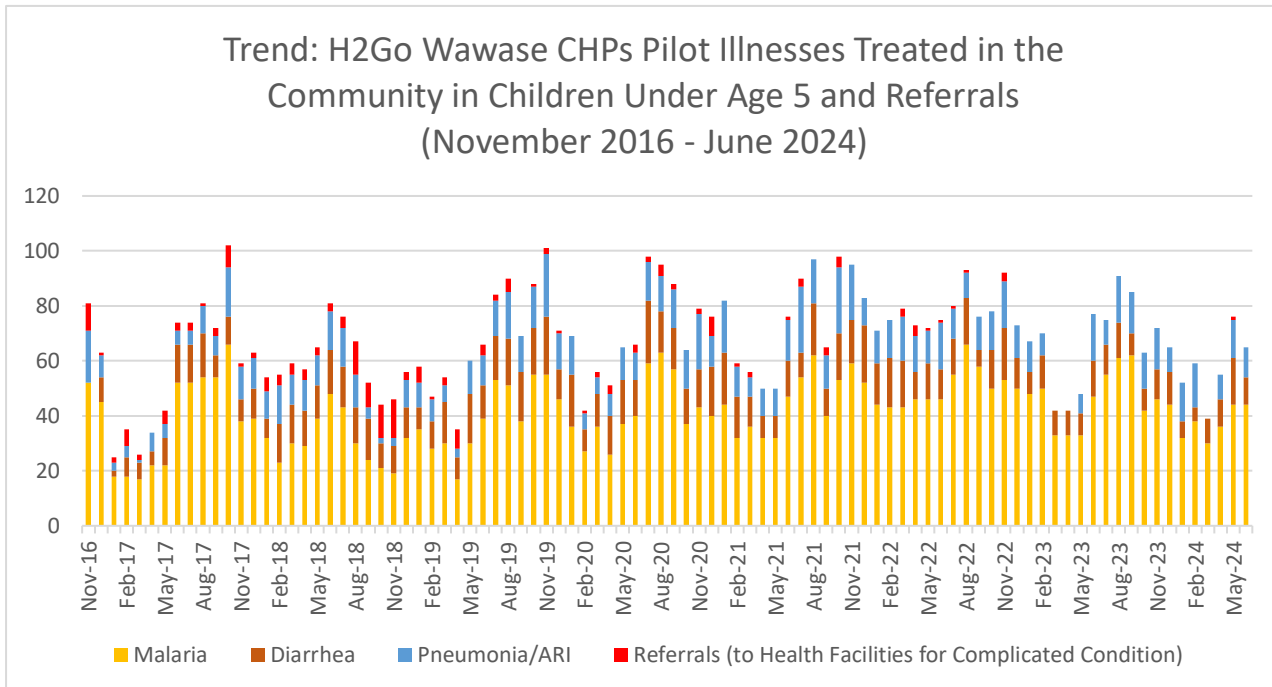
- 16,812 illnesses managed: 8,607 malaria; 3,675 diarrhea; 4,530 pneumonia
- 966 referred to health facilities for serious and life-threatening illnesses
- 39,064 home visits



Wawase CHPS Zone Trends to Date (November 2016 – June 2024)

Among approximately 200 children under age 5:

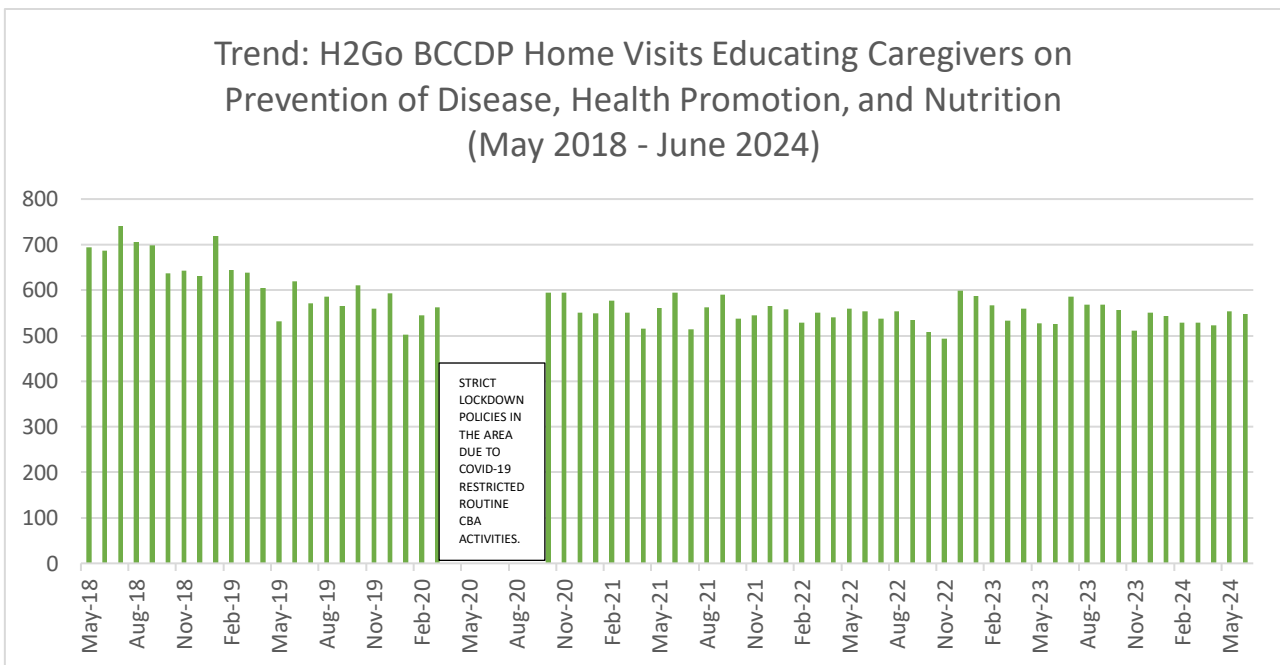
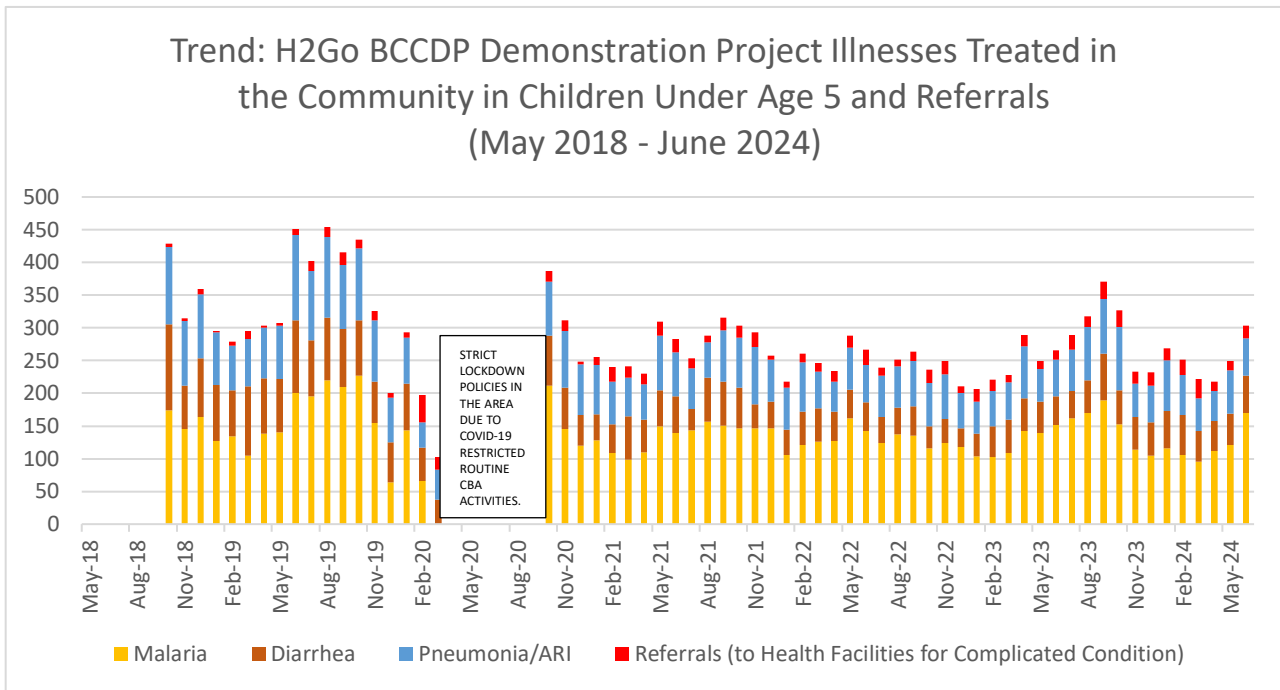
- 5,985 illnesses managed in the community by H2Go Wawase CHPS Zone CBAs
 - 3,818 malaria; 1,129 diarrhea; 1,038 pneumonia/Acute Respiratory Illness (ARI)
- 211 referrals for serious and life-threatening illnesses
- 19,960 home visits



BCCDP Demonstration Trends to Date (May 2018 – June 2024)

Among approximately 2,200 children under age 5:

- 16,812 illnesses managed in the community by H2Go BCCDP CBAs
 - 8,607 malaria; 3,675 diarrhea; 4,530 pneumonia/Acute Respiratory Illness (ARI)
- 966 referrals for serious and life-threatening illnesses
- 39,064 home visits



*CBAs did not have medicines until Oct. 2018, but began conducting home visits in May 2018

Appendix 1

Figure 1: Wawase CHPS Zone Communities

Communities include:

1. Aplah
2. Abobeng
3. Wawase
4. Piengua
5. Obelemanya
6. Atotorsi



Figure 2: BCCDP Demonstration Communities

Communities include:

1. Boahenkwa I
2. Boahenkwa II
3. Adegya
4. Worapong
5. Atramso
6. Sikayena
7. Achina
8. Atutuma
9. Kwame Marto
10. Ataase
11. Achiase
12. Abira
13. Berekesse
14. Marban
15. Fufuo
16. Barekuma
17. Aninkroma
18. Kumi
19. Adankwame
20. Esaaso

