



# HEALTH 2 GO

Progress Report through September 30, 2025

Finalized December 1, 2025

Report prepared and reviewed by Lydgia Jarvis, BS and Professor Stephen Alder, Ph.D., MBA



## 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

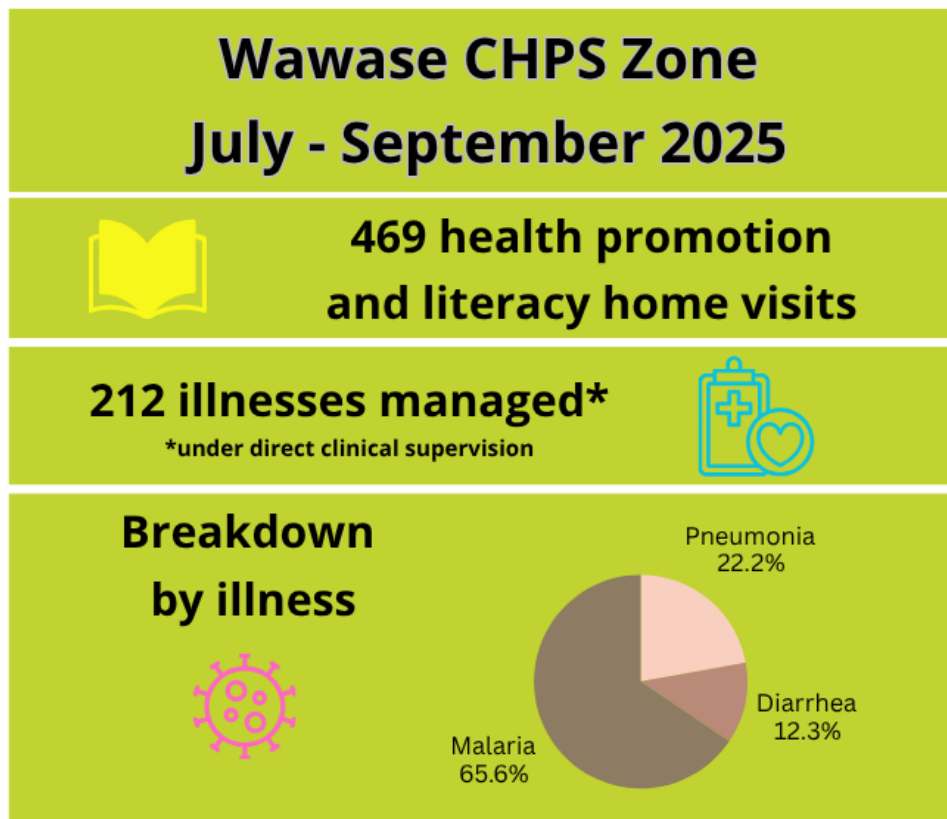
### Implementation Overview

H2Go launched in six (6) small communities in the Wawase CHPS (Community-based Health Planning Services) 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 July 2025 – September 2025:

- 212 illnesses managed in the community by H2Go CBAs
  - 139 malaria; 26 diarrhea; 47 pneumonia/Acute Respiratory Illness (ARI)
- 1 referral was made to health facilities for serious and life-threatening illnesses
- 469 home visits



The most recent refresher training occurred on November 11-12, 2025. The training was held at Ensign Global University in Kpong, Ghana, and was attended by a total of 30 participants. Participants included Ghana Health Service personnel trained as H2Go facilitators/managers and supervisors, H2Go Wawase CBAs, and H2Go team members, including Professor Stephen Manortey, PhD, MSc (Statistics) - Ghana country H2Go Principal Investigator (PI), and Moselle Brown, PA, MPH - Ghana Health2Go Project Coordinator.

## Health 2 Go Barekese Sub-District

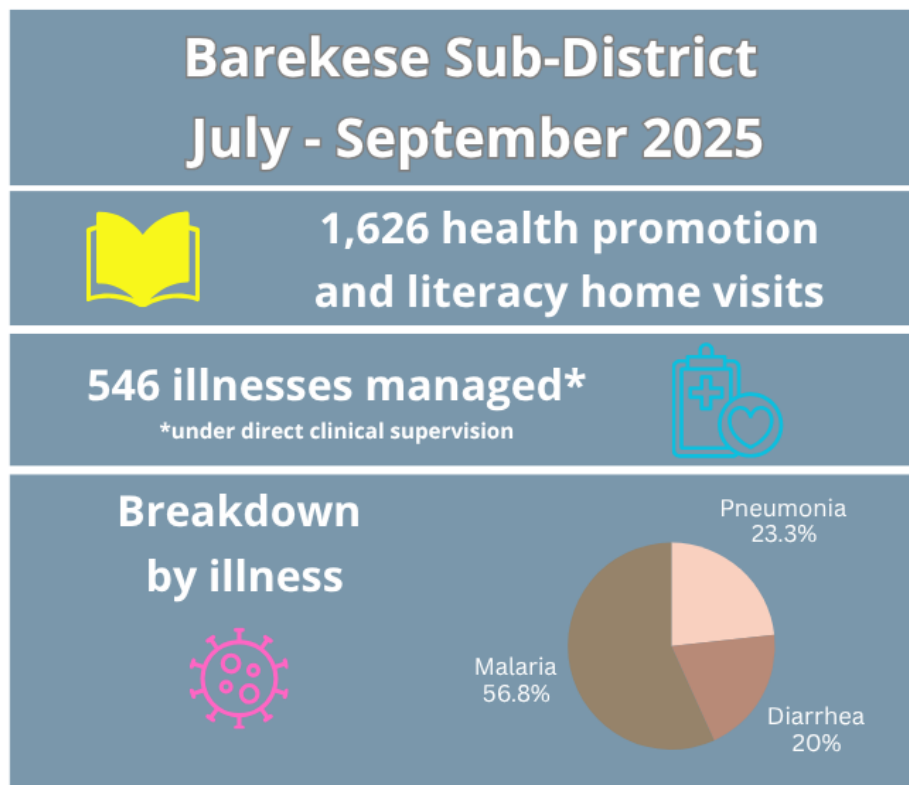
### Implementation Overview

The expansion of H2Go into the Barekese Sub-District, a larger demonstration project called the Barekuma 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 30 H2Go CBAs. A list and map of these communities is listed on page 8.

### H2Go Barekese Sub-District Recent Activities

Among approximately 2,200 children under age 5 during the quarter July 2025 – September 2025:

- 546 illnesses managed in the community by H2Go CBAs
  - 310 malaria; 109 diarrhea; 127 pneumonia/Acute Respiratory Illness (ARI)
- 42 referrals were made to health facilities for serious and life-threatening illnesses
- 1,626 home visits



The most recent refresher training occurred on March 13-14, 2025. The training was held at the Atwima Nwabiagya North Health Directorate in Kumasi, Ghana. Participants included Ghana Health Service personnel trained as H2Go facilitators/managers and supervisors, H2Go Barekese Sub-District CBAs, and H2Go team members, including Gideon Acheampong, MPH, BSc, and Moselle Brown, PA, MPH - Ghana Health2Go Project Coordinators.

# Health 2 Go Project Results Since Inception

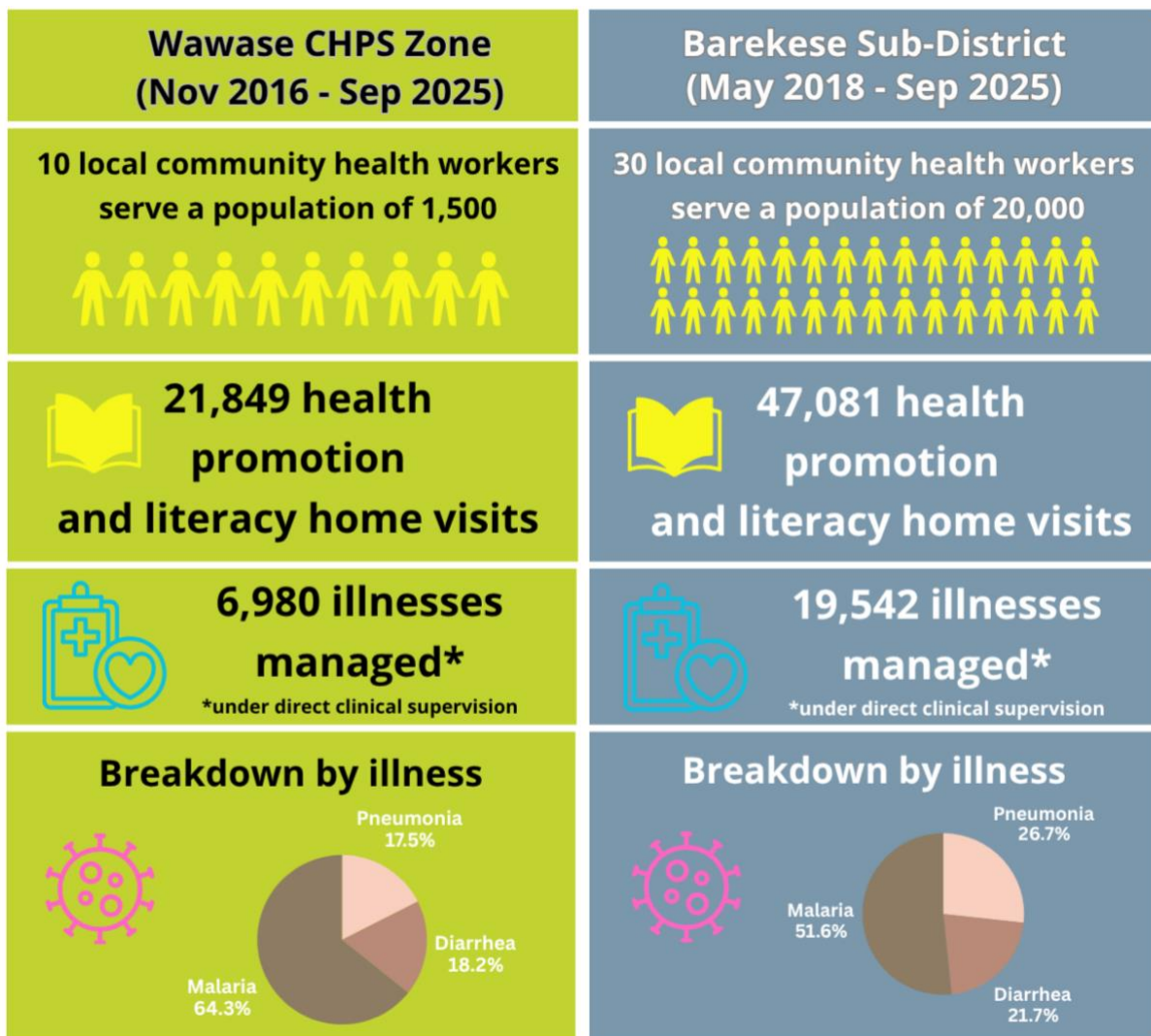
## Results Overview

**Wawase CHPS Zone:** Among approximately 200 children under age 5, (November 2016 – September 2025):

- 6,980 illnesses managed; 4,485 malaria; 1,271 diarrhea; 1,224 pneumonia
- 212 referred to health facilities for serious and life-threatening illnesses
- 21,849 home visits

**Barekese Sub-District:** Among approximately 2,200 children under age 5, (October 2018 – September 2025):

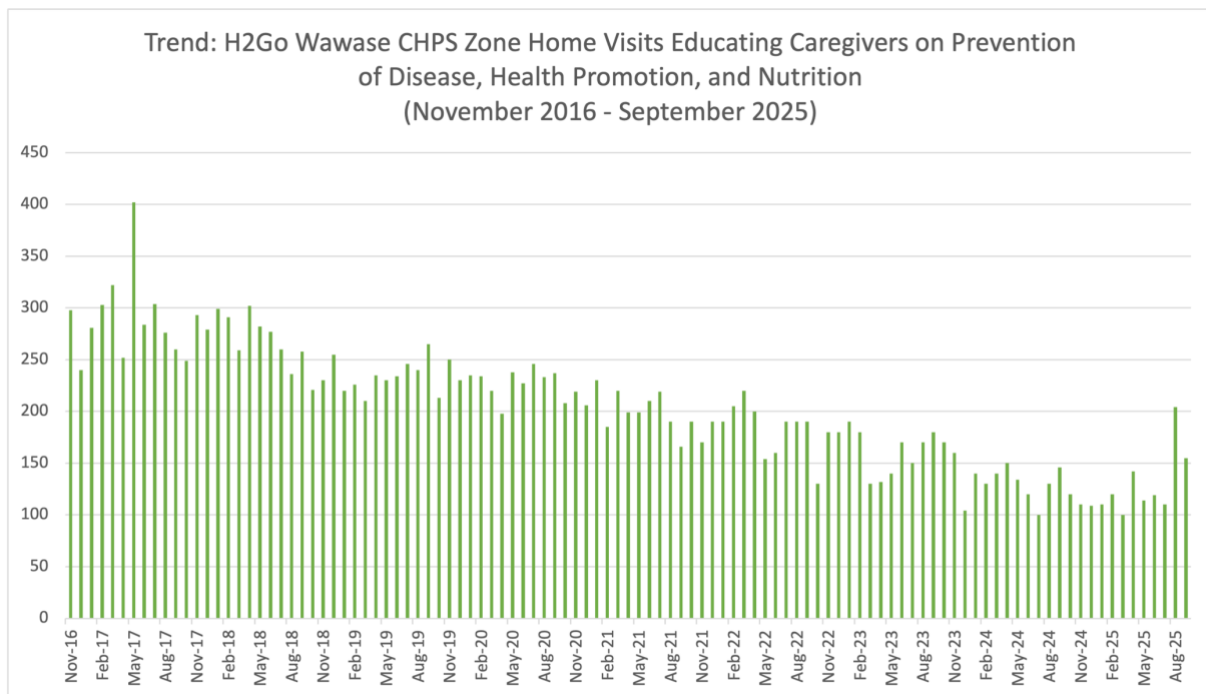
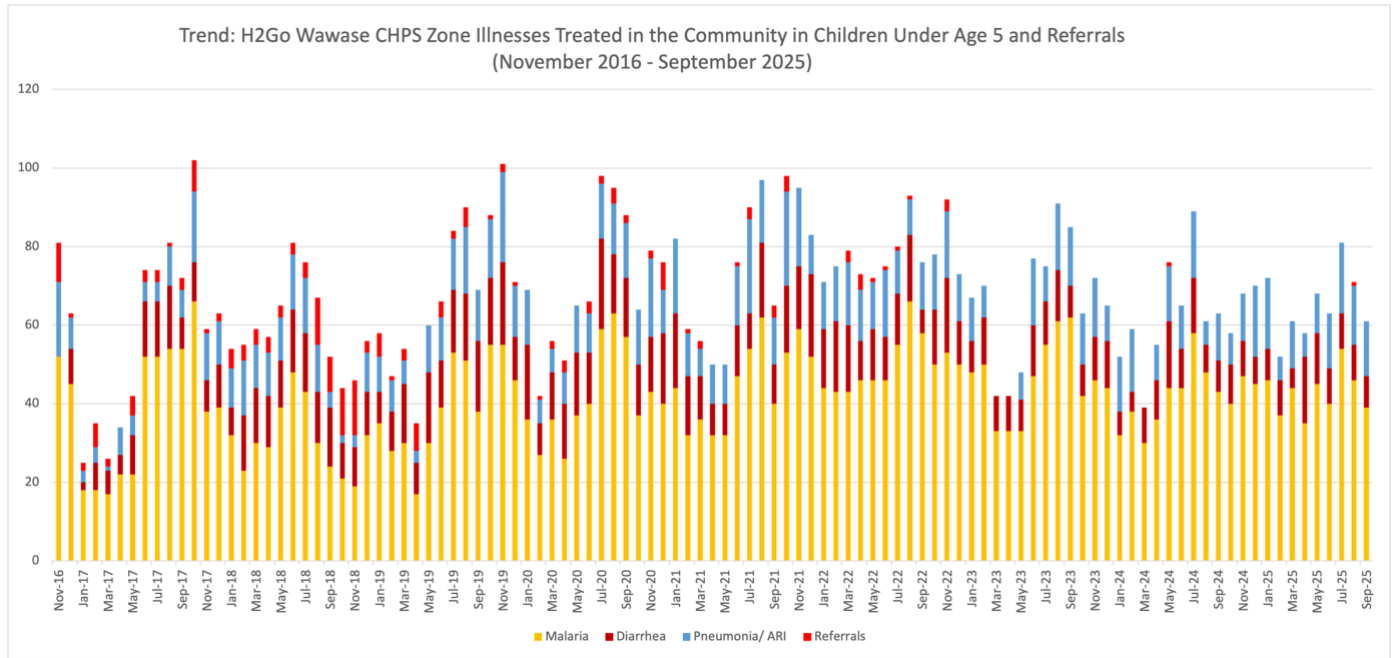
- 19,542 illnesses managed: 10,092 malaria; 4,232 diarrhea; 5,218 pneumonia
- 1,157 referred to health facilities for serious and life-threatening illnesses
- 47,081 home visits



# Wawase CHPS Zone Trends to Date (November 2016 – September 2025)

Among approximately 200 children under age 5:

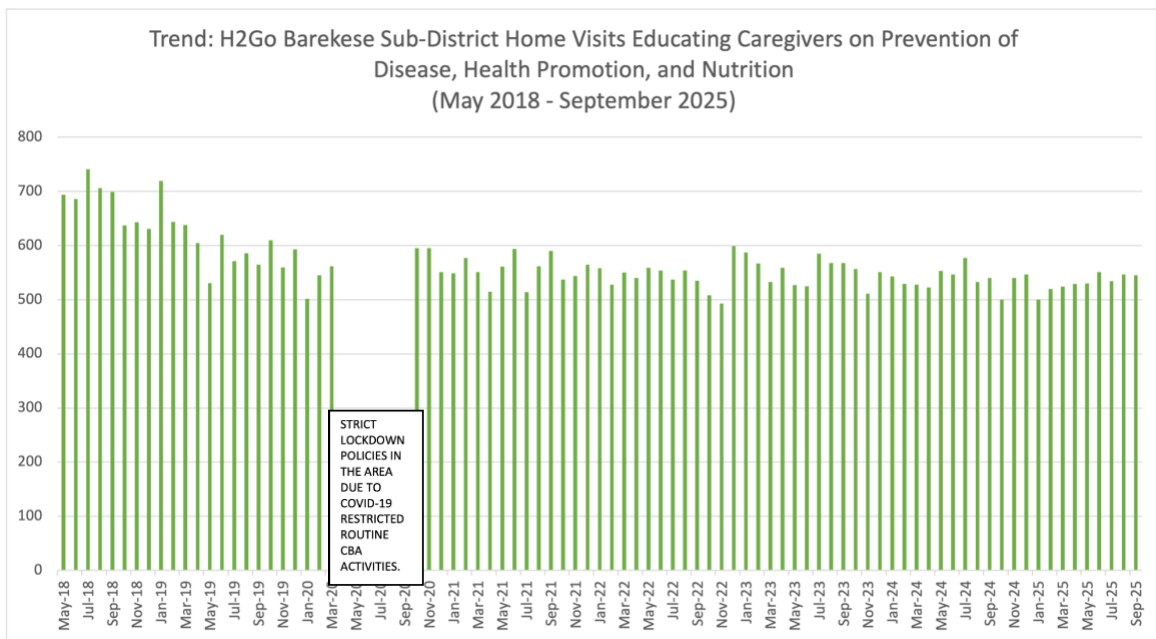
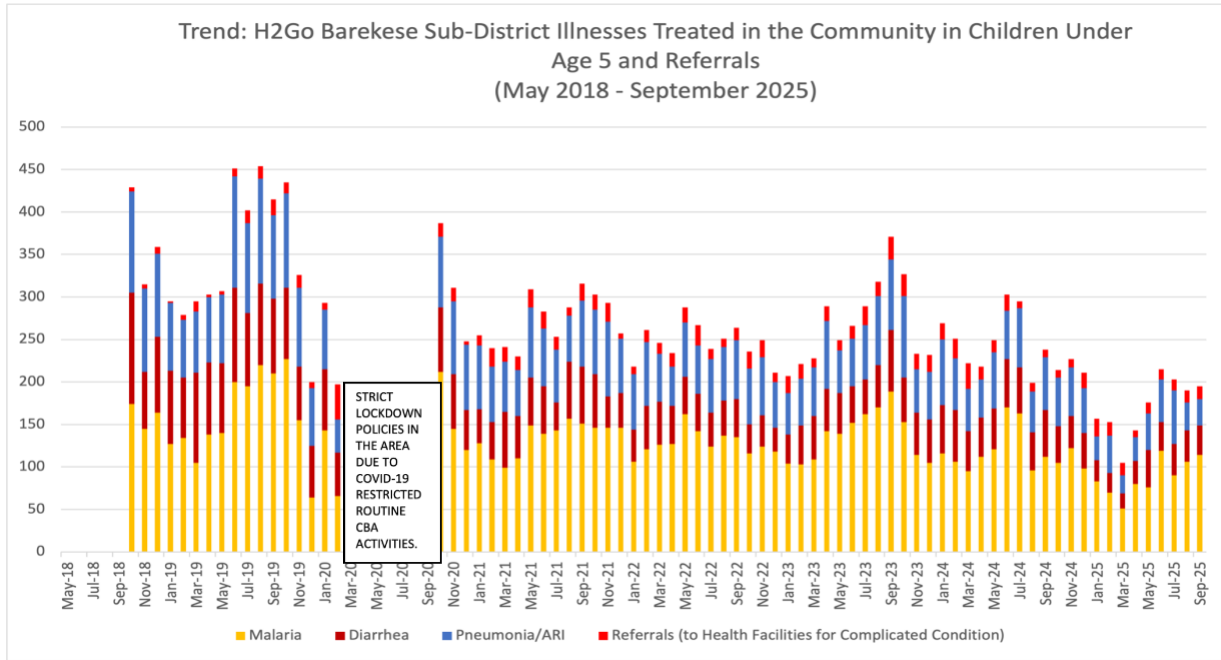
- 6,980 illnesses managed in the community by H2Go Wawase CBAs
  - 4,485 malaria; 1,271 diarrhea; 1,224 pneumonia
- 212 referred to health facilities for serious and life-threatening illnesses
- 21,849 home visits



## Barekese Sub-District Trends to Date (May 2018 – September 2025)

Among approximately 2,200 children under age 5:

- 19,542 illnesses managed in the community by H2Go Barekese CBAs
  - 10,092 malaria; 4,232 diarrhea; 5,218 pneumonia
- 1,157 referred to health facilities for serious and life-threatening illnesses
- 47,081 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. Obelemana
6. Atotorsi



**Figure 2: Barekese Sub-District 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. Achiasie
12. Abira
13. Berekesse
14. Marban
15. Fufuo
16. Berekuma
17. Aninkroma
18. Kumi
19. Adankwame
20. Esaaso

