Prior to COVID-19, there was growing commitment to strengthening primary health care systems, which are widely recognized as the most effective and efficient way to achieve equitable health for all. COVID-19 has shocked health systems and societies and put at risk progress toward global and national health goals including universal health coverage and the Sustainable Development Goals. Amid the COVID-19 crisis, it is critical that governments not only respond to the immediate health emergency—they must also take steps to maintain, adapt, and transform primary health care for the future.

COVID-19 has laid bare the need to invest adequately in health systems. Coronavirus has infected and killed people in nearly every country of the world. Others have suffered from job losses and other economic impacts as unprecedented mitigation measures have been put in place. Disruption of essential health services during the pandemic may result in an even larger magnitude of secondary deaths and illnesses than the disease itself. As the backbone of health systems, primary health care is where smart investments and improvements in accessibility, availability, and quality are direly needed—not only to prevent and manage COVID-19, but also to protect against future outbreaks and accelerate progress toward health for all. We must work across sectors to protect communities by maintaining essential health services, leveraging ingenuity and innovation to adapt primary health care, and ultimately building stronger, more resilient health systems.

Challenges PATH is seeing around the world

As PATH works in more than 70 countries, we have been able to closely monitor the impact of COVID-19 on essential health services such as maternal and newborn care, routine immunization, sexual and reproductive health services, and diagnosis and treatment of HIV, TB, malaria, and non-communicable diseases as well as on food supplies and nutrition. Even early in the pandemic, routine data collection revealed disruptions in service delivery across many countries: missed immunization visits, declines in TB diagnoses, interrupted medicine supply chains, and more. Early efforts to control coronavirus exposure by limiting movement inadvertently became a barrier to health system access; for example, in some countries pregnant women in labor faced hurdles accessing health centers to deliver their babies. Malnutrition rates are also on the rise. At the same time, PATH has seen some countries taking swift and strong stances to protect these vital services—carrying forward lessons from the 2014-2016 Ebola outbreak in West Africa, which showed the devastating consequences if services are not safeguarded.

Our response

PATH is partnering with governments and communities around the world to help reduce the impact of COVID-19 by building on our strong portfolio of pandemic preparedness work and our decades of experience advancing access to essential health services. We are not only addressing the acute effects of COVID-19 but also taking steps to mitigate worst-case scenarios of secondary deaths and illnesses, at the same time laying a foundation for more resilient health systems that are better prepared to withstand future emergencies. PATH brings together end-to-end product development, system innovation, and policy advocacy to help countries and multisector partners reimagine primary health care, during COVID-19 and beyond. We take a people-centered, data-driven approach that aims to give everyone a fair chance at health. To better coordinate and elevate these efforts, we have established an internal task team to share lessons across programs and geographies. We are also compiling and sharing resources and learnings with partners around the world. This brief highlights some of our current work.
**Advising and implementing guidelines**

PATH advises multilateral organizations and governments as they develop guidelines and operational plans to maintain essential health services during the pandemic. Leveraging the latest evidence, we work to prevent COVID-19 control policies from inadvertently harming essential health services, identify communities most at-risk from non-COVID causes, and evaluate alternative delivery models. PATH is advising governments, disseminating guidelines, and training health care workers in at least 15 countries. In partnership with WHO, we are working to set up an online dashboard that will improve visibility into guidelines governing essential health services across low- and middle-income countries.

**Equipping communities with information**

PATH partners with governments to ensure clear messages reach all communities—including the most remote and vulnerable—to provide information on COVID-19 and how to continue to access essential health services safely. To meet the needs of diverse communities, we deploy a mix of new and traditional methods including social media and messaging apps (such as WhatsApp, Facebook, and Tiktok) as well as radio, television, and print material such as posters and billboards.

**Adapting service delivery to meet community needs**

PATH partners with health system leaders to support locally-led approaches to adapting health service delivery to better protect communities and patients during COVID-19. This includes integrating health services to minimize visits to facilities, piloting telemedicine, advancing self-care options such as HIV self-tests and self-injectable contraceptives, and facilitating home delivery of multi-month supply of medicines for TB, HIV, and noncommunicable diseases.

**Leveraging data to innovate service**

PATH uses routine data and surveillance to identify communities and individuals at risk due to disruptions in essential health services and to target catch-up sessions, mobile clinics, and other adaptations. In Senegal and the Democratic Republic of the Congo, we integrate dashboards used by emergency operations centers and malaria control programs to track trends in near-real time. In Tanzania and Zambia, we use electronic immunization registries to schedule immunization visits to comply with distancing measures. In Kenya, PATH developed a tool to map geographic areas with high numbers of people living with non-communicable diseases, which has helped the national cancer program pinpoint areas with insufficient support.

**Advocating for continued investments**

PATH advocates with governments to continue making smart investments in primary health care during this crisis. In Uganda, our ongoing advocacy contributed to a 7% increase in the primary health care budget. In the DRC, PATH’s influence helped the government fulfill its co-financing for Gavi, the Vaccine Alliance, which ensures immunizations can continue amidst concurrent outbreaks of COVID-19 and Ebola.

**Opportunities ahead**

As we innovate in partnership with governments and communities to protect essential services, we are learning together. There is a need for rapid analysis and sharing across countries about what is working and what is not. This global moment is also an opportunity to explore how innovative approaches taken during this time can accelerate long-needed shifts toward more people-centered and responsive primary health care, systems that will last long past when this crisis abates. PATH is committed to ensuring that lessons from COVID-19 lead to more resilient health systems that not only protect against future threats—but also deliver health for all.

For more information, please contact Emma Korpi at ekorpi@path.org.

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**PATH is a global organization that works to accelerate health equity by bringing together public institutions, businesses, social enterprises, and investors to solve the world’s most pressing health challenges. With expertise in science, health, economics, technology, advocacy, and dozens of other specialties, PATH develops and scales solutions—including vaccines, drugs, devices, diagnostics, and innovative approaches to strengthening health systems worldwide.**

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