# TGHN Health Systems Working Group 2<sup>nd</sup> call Minutes COVID Hub

Date: 16/07/20 Location: Zoom

#### **Coordinating team:**

- Chair: Oscar Tapera Zimbabwe
- Julio Canario Dominican Republic
- Chinenyenwa Ohia Nigeria
- Saumu Lwembe Kenya/UK
- Grace Mzumara Malawi
- Mathildah Chithila-Munthali Malawi

#### Introduction

The ongoing establishment of 'COVID-19 working Groups' is addressing the discussion and consensus building around identified research gaps across low resource settings. All attendees of 'open workshops' have been invited to participate by completing a survey and expressing their interest in the 'COVID-19 working Groups'. The purpose of these groups is leading to the creation of communities of practice.

On the 16th of June, The Global Health Netwok supported the <u>first virtual team meeting</u> for the 'Health Systems Research Open Working Group'. The meeting was organised in response to questions raised in COVID HUB workshop which highlighted the need for greater discussion of the impact that COVID-19 pandemic might have on Health Systems around the world.

Team leaders then met on the 02/07/2020 and agreed that the best plan of action would be to identify 2 or 3 key topics for the WG to focus on and write protocols for. Using the themes identified in the report from the first meeting, a survey was disseminated asking the members of the Group to assert their areas of particular experience and interest. From this survey, which had 70 responses and a report of which can be found <a href="here">here</a>, the following topics were identified as the immediate priorities for the WG to work on:

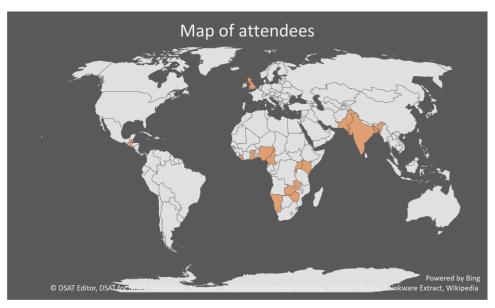
- Health worker capacities, attitudes and practices in the context of COVID-19
- COVID-19 impact on malaria, tuberculosis and HIV/AIDS interventions.
- COVID-19 impact on RMNCH as one (Child health services, including vaccinations)

On 16<sup>th</sup> July, The Global Health Network supported the second virtual meeting for the 'Health Systems open Working Group'. The purpose of this meeting is to introduce the members of the WG to the team leaders, relay the decisions made by the faciliatory group about the action plan for the Group to the other members, and discuss the next steps which the Group will take to develop protocols and apply for funding.

# **=====** THE GLOBAL HEALTH NETWORK

### **Attendees**

Over 70 people registered to attend from across Africa, Asia, Europe and Latin America. 39 unique viewers joined the call from 17 different countries, as shown on the map below:



TGHN team	Nicole Feune de Colombi, Jamie Parker, Adam Dale
Those who spoke	Oscar Tapera, Julio Canario, Mathildah Chithila, Ohia Dorothy, Saumu Lwembe
	Roseline Yah Trokpao Chesson, John Hongo, Joseph Mutale, Festus Rao, Bongomin
	Bodo, Sadia Zia, Shahanaz Choudhury, Haleema Sadia, Pranay Wal, Nkwan Jacob
	Gobte
Rest of	AAJA ALOSIOUS, Abdulwahab Sessolo, Adebayo Amao, Adeniyi Aderoba, Ali
Attendees	Kayongo, Azuka Ike, Brenda Oulo, Cecilia Oboge, Charles Bawate, Derrick Bary
	Abila, Dr Derrick LWANGI USUKI, Ikechukwu Chukwuocha, Mary Gorret Atim,
	Matilda Aberese-Ako, Michelle Gitau, Mogana Flomo, monica paz, Naima Nasir,
	Nkwan Jacob Gobte, PALLUKU HAMULI Roger, Regina Bhebhe, Resen Korboi,
	Robert Kaba Alhassan, Sangeetha Kasinathan, Susan Nabirye, Tresia Amugamapeni
	Watyapuwo, Viola Nampeera, WAMALWA DAVID, Welile Sikhondze

# Agenda:

- 1. Adoption of proposed agenda
- 2. Introductions by WG coordinators
- 3. Aim of the TGHN WG for Health Systems Research
- 4. Finalise on research priority areas
- 5. Discuss on the WG work plan and next steps

#### Summary

#### Aim of the TGHN WG for Health Systems Research:

Pull together our knowledge and experience in health systems and policy research to write protocols, conduct research and help mitigate any challenges faced by health systems in our respective countries.

This meeting aims to finalise the research priorities and set out a plan for this WG to progress forward.

## Research priority areas

3 key themes have been flagged as key priorities from the survey.

- Health worker capacities, attitudes and practices in the context of COVID-19
- COVID-19 impact on malaria, TB and HIV/AIDS
- COVID-19 impact on RMCNH as one (Child health services, including vaccinations)

<u>Saumu, on SS WG's priorities:</u> The SS WG will be meeting tomorrow, but at present there are 1 or 2 areas we will be looking at in more depth: Health seeking behaviours and KAP towards COVID-19 at the community level

**Shahanaz Choudhury:** 3 key topics are very interesting and important; In Bangladesh vaccination programs are struggling. Due to COVID-19 we are already at risk of having polio cases again due to the challenge due to the (previously very successful) vaccination programs. Discovering the challenges and barriers to vaccination programs will be very important

<u>Festus Rao: KEMRI in Kenya.</u> Contribution to the first topic: Could we have IPC assessed under this section as well? As most of the HCWs in LMICs have challenges relating to PPE etc.

**Bongomin Bodo: Uganda;** While the 3 topics are the priorities but I wanted to point out that around the first topic I would rather phrase it to look at the infrastructure and structural capacity to study the impacts on COVID-19

<u>Sadia Zia: Pakistan</u>; molecular biologist and policy public health planning. For the HS research I would say the 3<sup>rd</sup> key point is important. Due to COVID-19 there has been a significant change in the vaccination programs. Upstream processes: eradication and precautionary measures of ANY viral infection including COVID-19.

<u>Oscar:</u> On Bongomin's point (structural capacities): our themes are capable of having a component of structural capacity component. We have recently developed a protocol to measure the impact of COVID-19 on malaria control (will be shared to the rest of the coordinators to be used for this WG). Could include other countries. Included is a health facility survey looking at the infrastructure, commodities, information management. Also, a household survey, and secondary data analysis.

<u>Haleema Sadia;</u> Less HCW capacities – hospitals full of patients, forcing some to go to the private hospitals which are charging lots. HCWs can be included to improve the health services; many HCWs don't want to work in the COVID-19 wards. Involve the government – diagnostic facilities and PPE are also important. Population based studies on immune response of children are also important; gender-based studies on immune responses.

## **THE GLOBAL HEALTH NETWORK**

**Saumu:** Response to Bongo: infrastructure has to be looked at; experience tells me that within our topics, infrastructure will come into play.

Agree with Sadia – upstream protocol on vaccination programs. Supply and demand sides; Demand side will overlap with KAP of community (overlap with SS WG)

Oscar: Divide us onto 3 subgroups for the 3 themes? With the possible to be in more than one group.

**<u>Dorothy:</u>** within subgroups there will be overlap. Maybe 1 *primary* group for each person but can be in >1.

On Dr Bongomin's infrastructure: HCW capacity affected by whole HS, including infrastructure. Look at the barriers limiting the HCW capacity

**Mathildah:** Agree with splitting into 3 subgroups, with overlapping interests.

On Festus' contribution: IPC added to topic 1. Can remould topics within our subgroups.

Julio: 3 topics cover the many important things raised in the time of COVID-19

**Oscar:** a malaria protocol could be a starting point for topic 2?

Shahanaz: have to be more precise in our topics; pilot program can bring out the challenges.

## Call to action and next steps

#### Main outcomes of this meeting

- 1. Research priorities are agreeable to the members with some additions on health facility infrastructure assessment and infection control aspects
- 2. WG will be split into 3 sub-groups with each sub-group focusing on one research priority area
- 3. Each sub-group to be coordinated by at least one WG coordinator who will be announced to the members in due course
- 4. Draft protocols are developed by the sub-groups

#### Next steps

- 1. Members to select sub-groups to work on (out of the 3) depending on interests or country priorities
- 2. WG coordinators will be tuning the research topics based on inputs from today's meeting and develop some draft protocols for each topic
- 3. Members of each sub-group will be requested to contribute/discuss the draft protocols through a survey and sub-group Zoom meeting.
- 4. Draft protocols are expected by the end of July for inclusion in wider TGHN grant applications.

If you are involved in *Health Systems* research, please get in touch and share any relevant protocols, associated tools and your experience. You can either use the webpage for the Health Systems Working Group or get in touch here: <a href="mailto:info@theglobalhealthnetwork.org">info@theglobalhealthnetwork.org</a>