# HCE Coalition: Resources for Campaign Integration

*This slide deck is intended to provide an overview of the latest guidance and resources for planning and implementing integrated health campaigns*

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# Background: The Health Campaign Effectiveness (HCE) Coalition

**Founded in 2020, the HCE Coalition's Program Office is run by the Task Force for Global Health (TFGH)**

**The Coalition Leadership Team comprises global campaign funders, multi- and bi-lateral institutions, and country**

**Coalition members work around the world and across multiple disease domains (e.g., NTD, polio, VPDs, malaria, nutrition)**

**The Coalition seeks to identify best practices, reduce fragmentation, harmonize financing and strengthen collaboration amongst country leaders, funders, and implementers**

| Vision | **Country-led health systems** use a **strategic balance of targeted health campaigns in concert with regular health services to achieve and sustain health-related development goals** for all people |
| --- | --- |

# Background: What Do We Mean by Health Campaigns and Integration?

**Health campaigns** are **time-bound, intermittent activities** which are deployed to address specific epidemiologic challenges, expediently fill delivery gaps, or provide surge coverage for health interventions. They can be used to respond to **disease outbreaks**, **eliminate targeted diseases** as a public health problem, **eradicate disease** altogether, or **achieve other health goals.**

**Integration** covers a **spectrum of activities**, from collaboration, shared functionality or partial integration to full co-delivery of interventions where appropriate.

**5 major health campaign domains** identified as high-priority:

**Malaria**

**Polio**

**Immunization**

**Vitamin A**

**Neglected Tropical Diseases**

# Background: Examples of Key Research Projects and Their Promising Practices

*The following are 3 examples of HCE Coalition research studies that underpin the CAS and its recommendations. Additional research on planning and implementation, integration, M&E, and financing can be found on a dedicated repository on the [HCE Coalition website](#)*

| Research Theme | Summary | Country | Domains / Intervention | Promising Practices |
|---|---|---|---|---|
| M&E | A [mixed-methods study](#) examining the effectiveness of transitioning vitamin A supplementation to routine health care services across 28 districts in Côte d'Ivoire. | Côte d'Ivoire | Vitamin A Supplementation & Nutrition | • Create a **system for articulating and monitoring monthly** vitamin A supplementation coverage goals<br>• **Improve collaboration** with partners and across sectors |
| Collaborative Planning | A [process evaluation](#) of potential areas of collaborative planning of malaria interventions in Nigeria, conducted by Ibolda Health International Ltd, with the Nigerian National Elimination Programme. | Nigeria *Gombe and Jigawa States* | Malaria *Insecticide-treated nets (ITN) and seasonal malaria chemoprevention (SMC)* | • **Engage all stakeholders early** in the process.<br>• **Form a working group** to ensure coordination of campaign integration.<br>• **Involve community leaders and influencers** to promote community acceptance of the integrated campaign. |
| Campaign Implementation | A [study of participatory microplanning](#) for disease campaigns with indigenous communities of the River Cubiyú. | Colombia *Indigenous Communities of River Cubiyú, Vaupés* | Neglected Infectious Diseases Trachoma, Soil-Transmitted Helminthiasis(STH), Ectoparasitosis | • **Make campaign decisions in a participatory manner**; obtain endorsement by municipal and departmental health entities and authorities within the indigenous communities.<br>• Use **collaborative** data systems (e.g., **health information system)** to improve real-time monitoring. |

# What is the Collaborative Action Strategy for Campaign Effectiveness (CAS)?



Collaborative Action Strategy (CAS) for Health Campaign Effectiveness

December 2023

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Photo Credit: Brent Stirton / Getty Images for ITI | The Task Force for Global Health 2018

**Who:** The Collaborative Action Strategy (CAS)[1] for Campaign Effectiveness was **developed in 2023 by 48 global, regional, and country-level experts** representing major campaign funders, implementors, and country leadership.

**What:** The CAS is meant to <u>**shift ways of working amongst global, regional, and country level partners**</u> on key actions, roles, and coordinated approaches at the country level. It is designed to add **practical but transformative value to countries' existing campaign and health care efforts.**

**Vision:** The strategy seeks to guide partners toward a future state where programs collaborate effectively with each other and with corresponding health services to **maximize the impact of campaigns on health outcomes**, and ultimately aims to **catalyze stronger, more resilient country-led health systems** in the long term.

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# High-level Anticipated Outcomes For The CAS

**1**



**Reduced fragmentation, and ==increased coordination and/or integration==** between campaign stakeholders & public health programs

**2**



More **effective campaigns** and **efficient resource** use to address country health gaps and priorities, and optimally serve target populations and communities

**3**



==Streamlined== approaches to **measurement, monitoring, evaluation, and learning** that foster sharing of information on the effectiveness and ==benefits of interventions, coordination, and integration==

**4**



**Timely, ==harmonized funding processes and streams==** to decrease the burden on countries and implement more effective campaigns

**5**



**Progress toward transitioning health campaign interventions to the primary health care (PHC) system** in the long-term
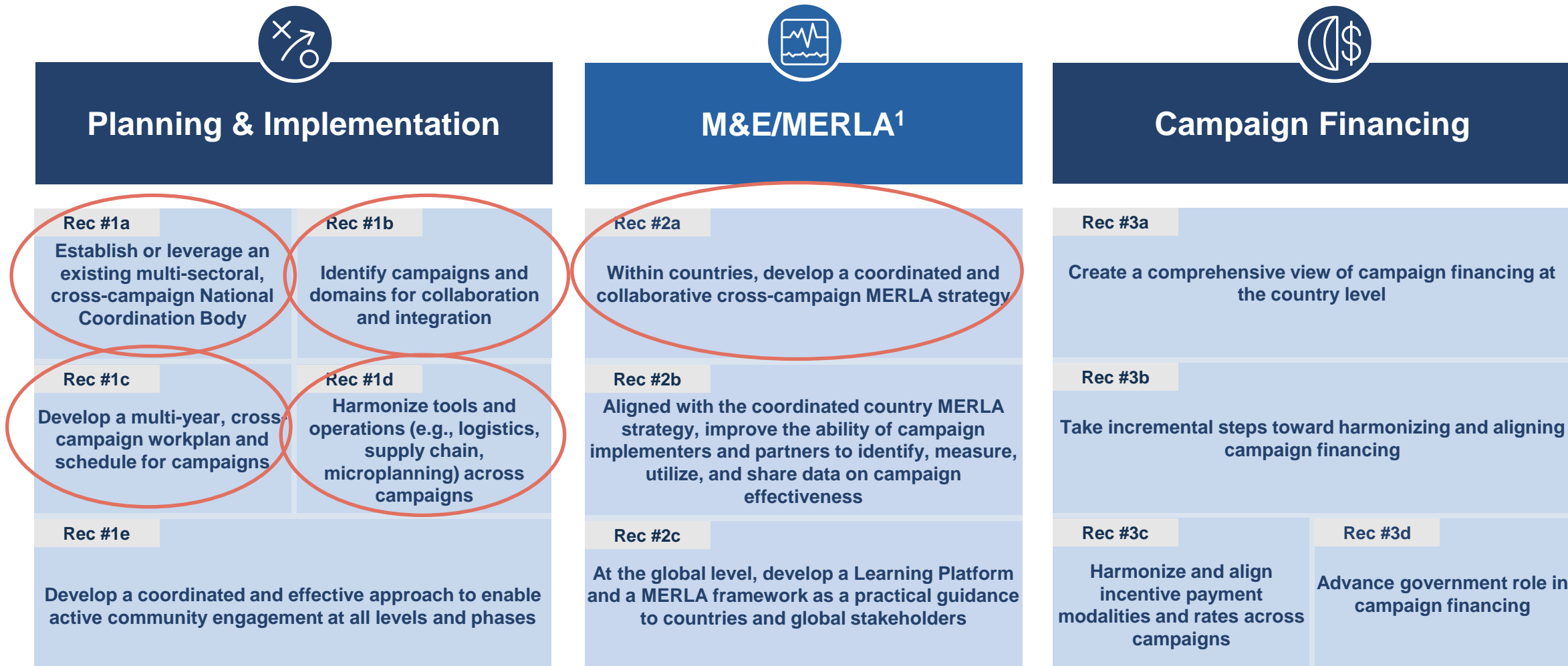
**6**



**High-quality, equitable, accessible and people-centered health services** via genuine community engagement throughout campaign phases, to meet multiple health needs

# 12 Recommendations were Developed to Enhance Country-Level Impact and Coordination

The CAS recommendations are intended to be **adaptable** and **flexible**, allowing for country specific decision-making. All recommendations will require **joint effort between countries, global funders and implementers**, with specific recommendations targeting funders (e.g., campaign finance), implementers (e.g., 1d), and MOHs (e.g., 1a).

## Planning & Implementation

**Rec #1a**
Establish or leverage an existing multi-sectoral, cross-campaign National Coordination Body

**Rec #1b**
Identify campaigns and domains for collaboration and integration

**Rec #1c**
Develop a multi-year, cross-campaign workplan and schedule for campaigns

**Rec #1d**
Harmonize tools and operations (e.g., logistics, supply chain, microplanning) across campaigns

**Rec #1e**
Develop a coordinated and effective approach to enable active community engagement at all levels and phases

## M&E/MERLA[1]

**Rec #2a**
Within countries, develop a coordinated and collaborative cross-campaign MERLA strategy

**Rec #2b**
Aligned with the coordinated country MERLA strategy, improve the ability of campaign implementers and partners to identify, measure, utilize, and share data on campaign effectiveness

**Rec #2c**
At the global level, develop a Learning Platform and a MERLA framework as a practical guidance to countries and global stakeholders

## Campaign Financing

**Rec #3a**
Create a comprehensive view of campaign financing at the country level

**Rec #3b**
Take incremental steps toward harmonizing and aligning campaign financing

**Rec #3c**
Harmonize and align incentive payment modalities and rates across campaigns

**Rec #3d**
Advance government role in campaign financing

1. Monitoring, evaluation, research, learning, and adaption

# CAS will support countries reduce campaigns and transition to the PHC

*The CAS will **directly contribute to a reduction in the number of campaigns through improved effectiveness, increased integration, and ultimate transition into the PHC system***

[Directional] Anticipated impact of the CAS on the # of Campaigns and on their integration into the PHC system

**1** *Increased integration:* The CAS will increase integration of campaigns (e.g., polio, malaria, NTDs) and their components thus, **reducing the number of overall campaigns**

**How will CAS achieve this?**
- By integrating campaigns (e.g., co-delivery) and / or elements of campaigns (e.g., microplanning), the CAS will reduce the overall number of campaigns on an annual basis

**Relevant examples of CAS interventions**
- Rec 1b & 1c: 3 year cross-campaign workplan and schedule for campaigns
- Rec 3b: Timely, harmonised funding processes and streams

*Assumption: The CAS will reduce the number of campaigns over time given the rationale (i.e., 1 & 2 on the left side), as these campaigns will either no longer be needed (given improved effectiveness) or have been transitioned to the RI / PHC system*

High

Medium

Low

Standalone Campaigns

Number of campaigns

CAS Implementation Time    Y0    Y1-Y3    Y3+

**2** *Increased Effectiveness:* The CAS aims to improve the efficiency of campaigns, which will **decrease the overall need for campaigns and the campaign-related strain on the PHC system***
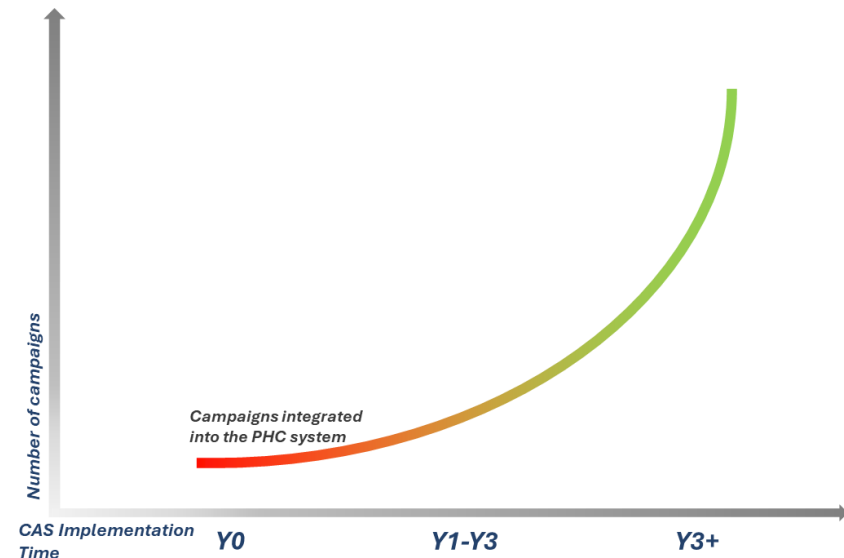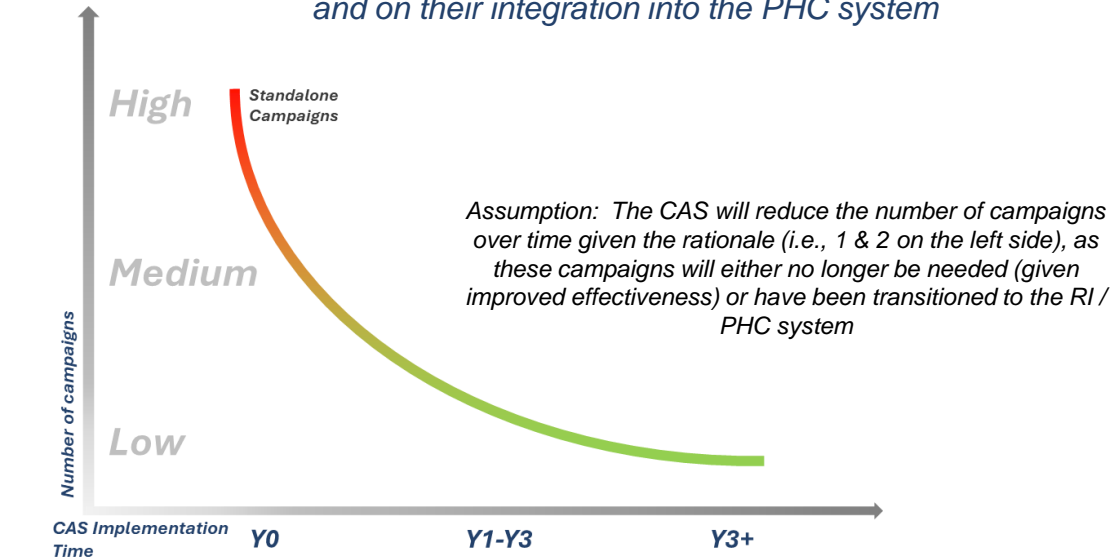
**How will CAS achieve this?**
- It will allow campaigns to meet their epidemiological thresholds & transition interventions to the PHC system

**Relevant examples of CAS interventions**
- Rec 1d: Highly coordinated and harmonised campaigns (and their logistics & tools)
- Rec 2a & 2b: Streamlined approaches to planning and MERLA

Campaigns integrated into the PHC system

Number of campaigns

CAS Implementation Time    Y0    Y1-Y3    Y3+

*\* The efficiency of campaigns will be measured in line with a renewed MERLA strategy. Existing targets (such as high coverage or decreasing the number of zero-dose children for immunisation activities) should remain ambitious and be achieved with a better use of resources.*

# CAS Implementation in Focus Countries - Ethiopia & Nigeria

## Progress to Date

- **CAS fully socialized at national and subnational levels with government and development partners (DPs)**
- **Context-specific draft CAS developed** by program leads (NTD, Immunization, Malaria, MCH units) at national and subnational levels in July (Nigeria) and August (August)
- Integrated campaign mapping developed for Nigeria and in progress for Ethiopia

## Wins

- **Full government ownership** of the HCE demonstrated by the State Minister's (Dr. Dereje) prioritization and investment of gov't resources into CAS implementation
- **CAS aligned strongly with government priorities for the health sector on health system strengthening**
- Donors and DPs **aligning resources to support CAS** implementation

## Next Steps

- **Develop campaign map** for Ethiopia to guide decision making processes towards integration by October 2024
- **Develop the implementation plan and subnational micro plans** for CAS rollout by November 2024
- Conduct official CAS launch with key stakeholders including the health minister, subnational program leads, DPs
- Leverage planned campaigns to **test/validate the implementation plan** by Q1 2025

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# CAMPAIGN MAPPING & INTEGRATION TOOL
## *A NEW TOOL TO SUPPORT NIGERIA'S CAMPAIGN GOALS*

The Campaign Mapping and Integration Tool supports Nigeria's efforts to **increase campaign efficiencies, promote integration and collaboration, and optimise use of resources to decrease the overall number of campaigns**

## The Campaign Mapping & Integration Tool

This tool is used to **map all health campaigns** happening in the country and identify **potential opportunities for integration** between campaigns.



*Nigeria Campaign Map*
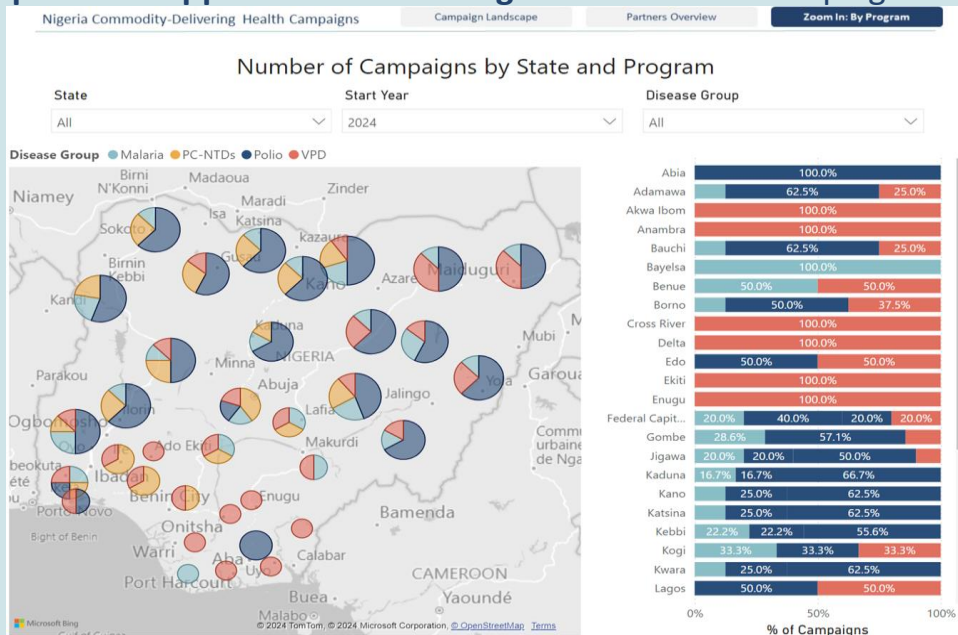
Currently, the tool can answer the following key questions:

1. ***What*** *campaigns are happening,* ***where****, and* ***who*** *are they targeting?*

2. *Who is* ***funding*** *the campaigns?*

3. *Which campaigns have* ***integration potential****?*

## Key Benefits of the Tool

The campaign mapping and integration tool will support countries to:

- **Bring together campaign plans and key campaign features** (e.g., geopolitical locations, delivery method) to enable more efficient and effective campaign planning across NP-SIAs, Polio, Malaria, Nutrition, and PC-NTDs
- Highlight where and when these campaign programs can **collaborate and integrate** to more effectively use health resources and health worker capacity
- Make decisions in reducing the number of campaigns and strengthening PHC systems

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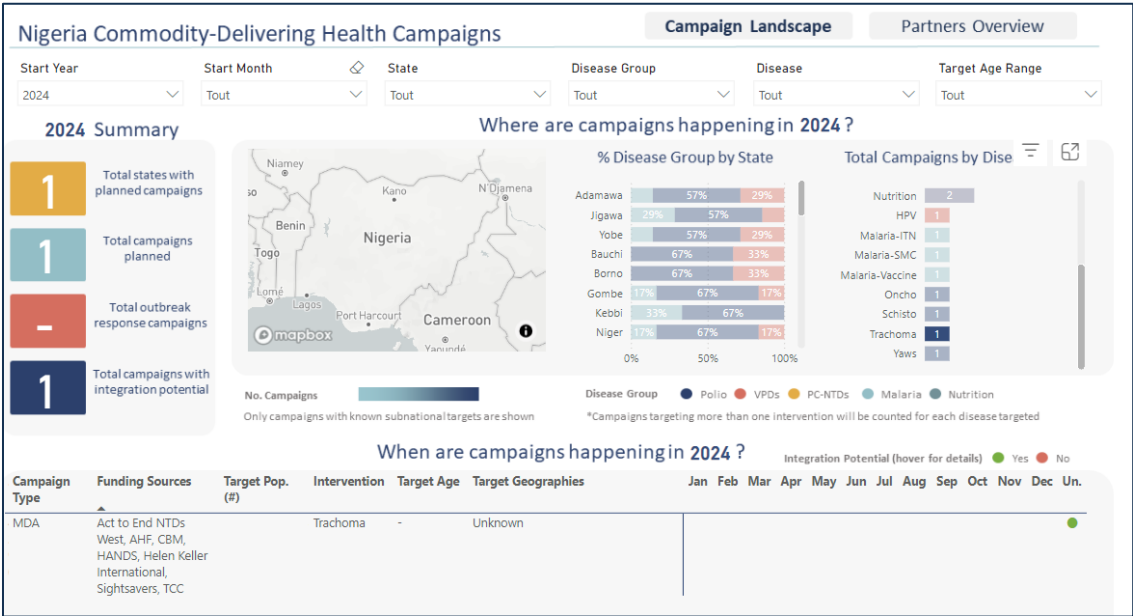A program of THE TASK FORCE FOR GLOBAL HEALTH

# CAMPAIGN MAPPING & INTEGRATION TOOL: ILLUSTRATION (1/2)

*The campaign mapping tool is an easy-to-use and interactive dashboard of planned and ongoing campaigns in Nigeria*



By default, the **dashboard gives a yearly summary** of campaigns, with a map of concerned states and a list of campaigns by disease…
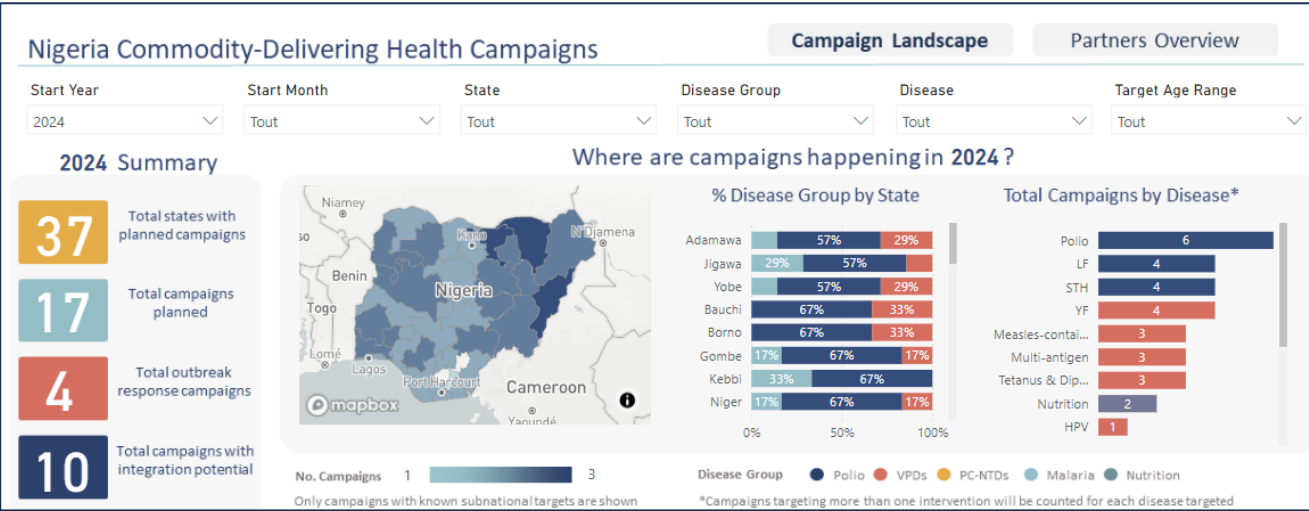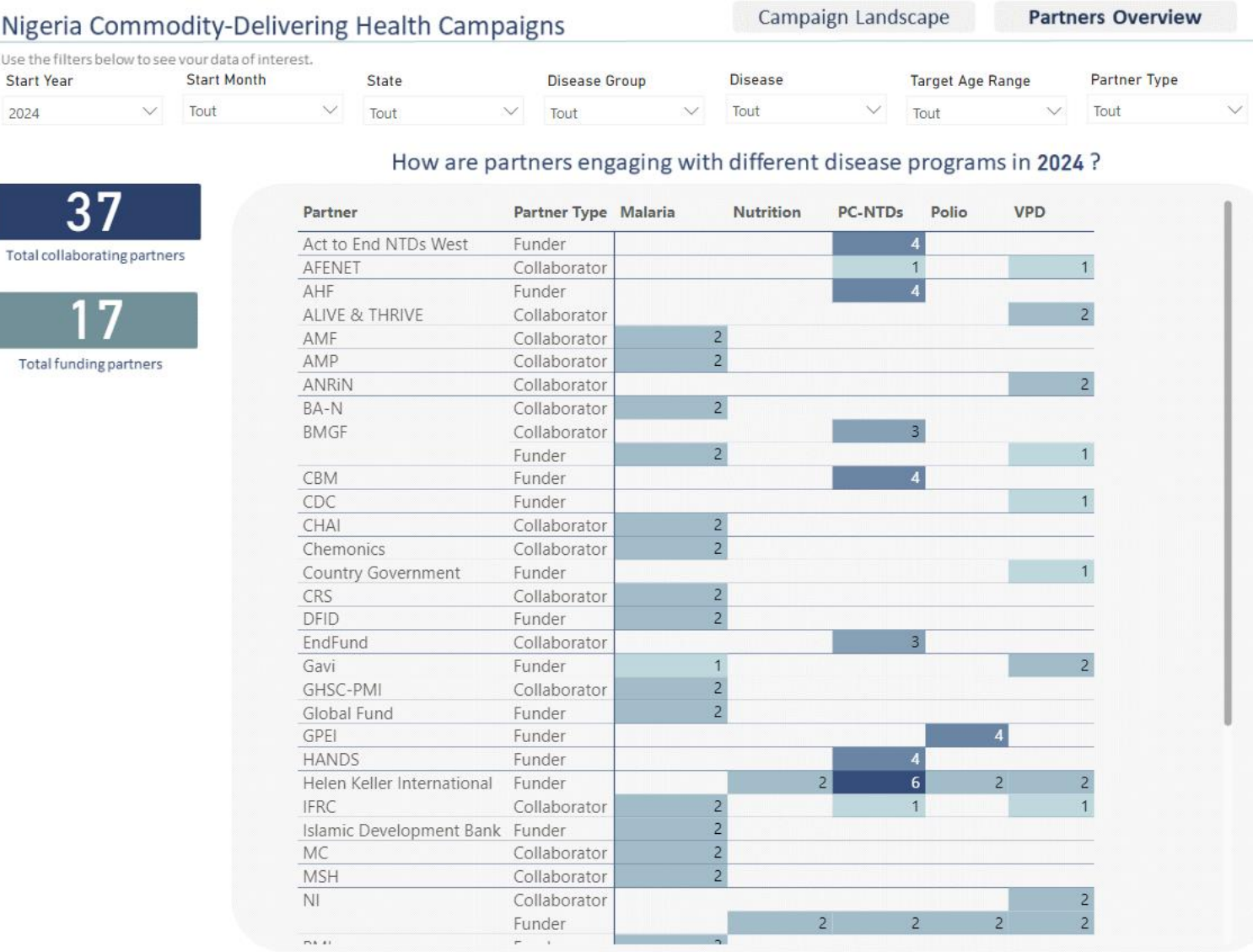
…which can **in one click be disaggregated** by state, disease type (e.g. here: trachoma), or timing

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*The campaign mapping tool is an easy-to-use and interactive dashboard of planned and ongoing campaigns in Nigeria*



The dashboard also offers a **partners overview** listing all partners (funders, and collaborators) and how they are engaging in the year.

# About the guide

## Implementing Integrated Health Campaigns: Decision-making and Planning Considerations

Aligns with the **Collaborative Action Strategy (CAS)** for Health Campaign Effectiveness[3]

Provides an **overview** of integrated campaigns

Outlines what is needed for a **high-level decision-making process** and developing a multi-year cross-campaign integrated workplan, and calendar of campaigns

**Summarizes key considerations** for before, during and after – an integrated campaign

[3] Collaborative Action Strategy (CAS) for Health Campaign Effectiveness. Health Campaign Effectiveness Coalition. 2023. Available online soon at https://campaigneffectiveness.org/
The CAS is designed with 12 concrete recommendations related to planning and implementation, monitoring, evaluation, research, learning and adaptation, and financing. They are primarily intended to improve collaboration amongst preventive health campaigns – but can also serve to guide integration with health emergency response efforts when relevant.

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Internal

# Guide Contents

**ABOUT** this guide

**PART 1:** **What are integrated health campaigns?**
- What do we mean by "integration"?
- Rationale for integrating health interventions during health campaigns
- Benefits and risks of integrating multiple interventions in health campaigns

**PART 2:** **Deciding and planning when to integrate health campaigns**

**PART 3:** **Key considerations**
- **BEFORE** implementing an integrated health campaign
- **DURING** an integrated health campaign
- **AFTER** an integrated health campaign

**Accompanying materials**
- Informational Video
- 2-page summary document
- Slide deck

## Status

- **Executive clearance** commencing week of July 15th
- **In parallel:** Accompanying materials and design

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# Example benefits and risks of integrating multiple interventions in health campaigns

| | | ✓ Benefits | ✗ Challenges |
|---|---|---|---|
| | Leadership and governance | Improved coordination | Lack of leadership |
| | Health systems financing | Cost-effectiveness | Inflexible or asynchronous funding streams |
| | Demand and community engagement | End-user satisfaction | Insufficient community engagement |
| | Service delivery | Increased coverage/impact | Safety |
| | Health workforce | Strengthened health system capacity | Loss of income by field-workers |
| | Health information systems | Improved systems performance | Duplication of health information systems |
| | Access to essential medicines | Better reach of missed children and communities | Logistical bottlenecks causing delays |

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# For more resources and information visit https://campaigneffectiveness.org/

## Contact us:

**General inquiries -** campaigneffectiveness@taskforce.org

**Chi Chi Amadi, Sr Associate Director for Health Policy -** camadi@taskforce.org

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