



# Accelerating Action on Universal Health Coverage: the role of Health Partnerships

Learning Paper

October 2023

THET's 2023 Annual  
Conference



# Introduction

This year's THET Conference took place at the end of October, following the UN General Assembly marking the midpoint of the Sustainable Development Goals (SDGs), and three High Level Meetings (HLM): on Universal Health Coverage (UHC), Pandemic Preparedness and TB. Rarely, have we met with such urgency.

With the world still recovering from the impact of the COVID-19 pandemic, a cost-of-living crisis, and confronting ever-rising challenges to health posed by climate change and conflict, it is perhaps unsurprising that progress towards the attainment of Universal Health Coverage (UHC) has stalled.

Director General of the WHO Dr Tedros Adhanom Ghebreyesus opened the conference by reminding us that, at present, half of the world's population lacks access to essential health services. With a projected shortfall of 10 million health workers by 2030, urgent and transformative action must be taken to address these obstacles and achieve UHC.

This year's conference allowed us to understand the context in which we are working as individuals and Health Partnerships, but it also gave grounds for optimism. Associate Professor of Public Health Helena Legido-Quigley, for example, argued that the COVID-19 crisis can act as a catalyst for promoting robust and resilient health systems. The Honourable Ugandan Minister of Health Dr Jane Aceng told us how, at their best, Health Partnerships provide a model for sharing ideas and learnings to accelerate action on UHC:



*Innovation and expertise are not the property of any one country. It is a commitment to learn from each other across borders that will make progress.*

Dr Jane Aceng, Minister of Health, Uganda

Hearing from the array of speakers present, all with unique insights into diverse health systems, a few things seemed very clear. The first, is that we must invest in our health workforce. We must listen to their voices, protect their wellbeing, and ensure they have safe and fair working conditions. The second, is that solutions to the polycrisis that we find ourselves in – of human and planetary health – must be multi-level, multi-sectoral and global, to truly address the intersections and drivers of crises. And third, is that we should leverage the power of Health Partnerships to share knowledge, expertise and learnings across institutions, health systems and borders to harness our collective abilities and advance progress on UHC.

This year's conference also showed that, together, we already have so much knowledge, experience, and expertise to address the challenges we face. We have the voices of diaspora health workers, whose experience of different health systems, low-resource settings, and health challenges can teach us so much about innovative solutions. We have examples of the power of technology in enhancing collaboration and maximising resource, like that of Proximie, the digital learning platform connecting surgeons with training and mentorship digitally.

Most importantly in the Health Partnership community, we have each other. The conference this year has proved that there is still so much to learn from one another, and how fruitful the conversations and collaborations between us are when we come together.

So, whilst we may be facing a unique set of difficulties in the global health sphere, it is also clear to me that there is much potential for Health Partnerships to tackle these head-on and push for advancement towards UHC.

I am immensely proud to be the CEO of an organisation that brings together health institutions from across the globe. I am so grateful for all the work we achieve together, and I thank all of you who contributed to the success of this year's conference.

**Ben Simms**

**Chief Executive Officer, Tropical Health and Education Trust (THET)**

# Conference in numbers

52

Speakers



465

Registrations



40

Countries



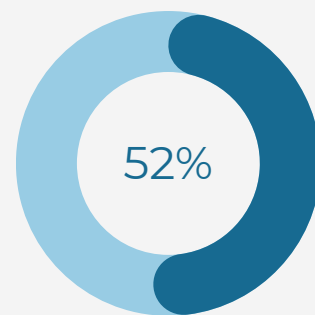
## Speakers

- Dr Tedros Adhanom Ghebreyesus | WHO
- Justin Ash | THET
- Dr Jane Aceng | Ugandan Ministry of Health
- Dr Zuhair Al-Qarrat | Idleb Health Directorate, Northwest Syria
- Professor Helena Legido-Quigley | Chatham House
- Elaine Green | THET
- Renzo Guinto | St Luke's Medical Center College of Medicine (Philippines)
- Edwin Panford-Quainoo | Liverpool School of Tropical Medicine (LSTM)
- Frances Garraghan | Commonwealth Pharmacists Association
- Louise McGrath | THET
- Dr Ahmed Mbayed | THET
- Dr Thinn Thinn Hlaing | THET
- Nura Aided Ibrahim | THET
- Dr Yoseph Mamo | THET
- Kokob Gebru Kidnau | Eldryd Parry Fellow
- Dr Matthew Harris | Imperial College London
- Zoe Gray | THET
- Dr Titilola Banjoko | NHS England
- Dr Ouma Oluga | Kenyan Ministry of Health
- Jim Campbell | WHO
- Dr Navina Evans | NHS England
- Professor Valerie Fleming | THET
- Professor Richard Adanu | Ghana College of Physicians and Surgeons
- Will Quince MP | UK Department of Health and Social Care

- Dr Amelia Latu Afuhaamango  
Tuipulotu | WHO
- Dorcas Gwata | THET
- Victoria Rutter | Commonwealth  
Pharmacists Association
- Dr David Musoke | Makerere  
University School of Public Health
- Evelyn Wesangula | East Central and  
Southern Africa Health Community
- Dr Idemudia Imonikhe Otaigbe |  
Babcock University Teaching Hospital
- Haggai Tirra | Leparua Clinic
- Andy Lockyer | Bristol Royal Infirmary  
and Great Western Air Ambulance
- Jude Jones | University of Salford
- Bala Rai | Nursing and Social Security  
Division, Department of Health  
Services (Nepal)
- Hamda Ali Abdillahi | King's  
Somaliland Partnership
- Eric Chisupa | Zambian Ministry of  
Health
- Dr Raman Bedi | King's College  
London
- Ben Simms | THET
- Amanda Daniel | IPC Primary and  
Community Care HARP
- Primrose Magala | Moorfields Eye  
Hospital
- Kokila Swamynathan | THET
- Richard Skone James | THET
- Dr Jamie Arberry | NHS Global  
Fellowship Programme
- Ciaran Barbour | THET
- Erin Ferenchick | Proximie
- Dr Becky Sandford | Guy's and St  
Thomas' NHS Foundation Trust
- Dr Doris Mbithi | Makueni County  
Referral Hospital
- Dr Michael Mwachiro | Surgical  
Society of Kenya
- Professor Peter Culmer | University of  
Leeds
- Dr Stephen Mwatha | Kenya  
Department of Health, Makueni  
County
- Dr Mustafa Musajee | Aga Kahn  
University Hospital
- Joanna Wardzinski | Amazon Web  
Services



Map showing the geographical distribution of LMIC participants



52%  
of participants coming  
from low- and middle- income  
countries

# Intersecting crises require holistic solutions

Intersecting health, climate, economic and geopolitical crises cannot be viewed in isolation – and neither can their solutions.

**Anti-microbial resistance, without urgent and coordinated action, will catapult us into a post-antibiotic era in which common infections can kill.** According to Dr David Musoke, Senior Lecturer at Makerere University School of Public Health (Kampala), AMR is another threat that requires multi-sectoral, integrated solutions: “AMR cannot be tackled from a purely human health perspective”. The interrelation between human and animal health is acutely relevant to the spread of AMR, and therefore a ‘One Health’ approach is necessary to ensure the challenge is accurately addressed.

*“We must employ an integrated, holistic approach to tackling pressing issues at the nexus of human and planetary health”*

Dr Renzo Quinto, Associate Professor of Planetary and Global Health, St Luke's Medical Centre

**Health Partnerships are an effective way to create these relationships between multi-level stakeholders across different sectors and disciplines.** Pharmacist and PhD student Edwin Panford-Quainoo, highlighted that the global threat posed by AMR requires a joined-up, collective response. Health Partnerships have the power to coordinate global efforts, break down silos and engage communities at the local level – where the impact of intersecting crises are truly felt.

## CASE STUDY

### Antimicrobial Stewardship in Northern Kenya

Community Health Nurse, Haggai Tirra, shared his work in the Dharura AMS partnership - an antimicrobial stewardship programme in Northern Kenya aiming to counter the misuse of antimicrobials among pastoralist communities.

Through a ‘One Health’ approach, Tirra assessed the human and animal health of the community, finding that there was widespread ungoverned use of antimicrobials on livestock, contributing towards growing antimicrobial resistance to common infections. The AMS partnership supported the development of community training and culturally appropriate education materials, training women elders as ‘antimicrobial community guardians’ to ensure sustainable and appropriate use of antimicrobials in the future.

# The Health of the Health Workforce

**A strong health workforce is crucial to facing the health challenges of the future. As Jim Campbell, Health Workforce Director WHO stressed: we must protect the people that protect us. Our workforce is in crisis and under attack.**

**If the current trajectory continues, there will be a shortfall of over 10 million health workers by 2030.** Commitment to government spending on health and ensuring decent work conditions, fair pay, and occupational health and safety – irrespective of political and economic conditions – is essential to strengthening this diminishing workforce. According to Dr Titilola Banjoko, not to do so is a political choice that risks the future of the global health workforce and thus the future of human health.



*If you don't have the people, you don't have the services to the people*

—  
Jim Campbell, Health Workforce Director, WHO



**Around the world, an increasing number of health workers operate every day under the threat of violence and conflict,** and in some cases health workers and facilities are specifically targeted with violence. Myanmar is one of these countries – recently recorded as the most dangerous place in the world to be a health worker. According to Dr Thinn Hlaing, THET's Myanmar Country Director, Health Partnerships can provide much-needed support to colleagues working in areas of conflict. Health Partnerships build bridges across national borders, and partner organisations can use their voices to show solidarity with their colleagues and advocate for international recognition of the plight of health workers under attack. Aside from amplifying the voices of their fellow health workers, Health Partnerships can provide technical, educational and moral support to colleagues working in conflict zones, helping to maintain health services under extreme pressure.

# SPOTLIGHT

## Launching the Eldryd Parry Fellowship

THET was born of Professor Sir Eldryd Parry's commitment to supporting and developing the capacity of the health workforce in low- and middle-income countries (LMICs). He was passionate about creating links between health institutions to ensure that health workers worldwide could continuously learn and develop. It is from his incredible legacy that THET can do the work it does.

To honour the loss of our founder and mentor in November 2022, THET established the Eldryd Parry Fellowship to continue his commitment to supporting early-career health workers to reach their potential. Kokob Gebru Kidnau, lecturer, clinician and researcher at Mekell University (Ethiopia) is the first recipient of the Eldryd Parry Fellowship award. With the award, Kokob will be developing a self-care guide for health workers aiding survivors of sexual and gender-based violence in a post-conflict setting in Tigray, Ethiopia. This handbook will support health workers to protect their mental health whilst working in a difficult setting.

**Support young health workers to develop vital health initiatives and keep Eldryd's memory alive by helping to fund the next fellowship.**

[Donate to the Eldryd Parry Fellowship](#)



## Experts In Our Midst: the power of diverse voices

**The health challenges faced both globally and in the UK are diverse and complex, and we can learn from our colleagues who have experience and knowledge of health systems around the world.**

Dr Navina Evans, NHS England Chief Workforce, Training and Education Officer, shared that **one in six health workers in the English NHS are internationally recruited**, bringing



Primrose and managers at Moorfields eye Hospital (c) Primrose Magala





Approximately

1 in 6

Health Workers in the NHS are internationally recruited



But make up only

8%

of Senior NHS Management

valuable experience and unique insights developed by working within more than one health system. The leadership of the NHS fails to reflect this, with people from an ethnic minority background making up less than 8% of senior NHS managers. Senior Ophthalmic Nurse Practitioner Primrose Magala asserted “if the diaspora voice can be recognised internationally, we have a lot to offer”.

THET is working to highlight the voices of the ‘Experts in Our Midst’, to showcase the expertise diaspora health workers bring to the NHS. THET will continue to call on leaders to recognise the value of the diaspora in the health sector and to ensure this is reflected in its leadership.

**Discussing his new book ‘Decolonising healthcare innovations – low-cost solutions from low-income countries’**

**Clinical Senior Lecturer Dr Matthew Harris** echoes Dr Navina Evans’ sentiments, arguing that health systems in the Global North are missing opportunities to improve by dismissing knowledge generated by health workers in LMIC health systems.

He contends that such dismissal is rooted in coloniality and the idea that Global North countries have nothing to learn from LMIC innovations, even though they are often developed at low-cost in low-resource settings and can provide great alternatives to higher-cost methods. As Dr Harris put it, “If the solutions work, they can work everywhere”. Health Partnerships play an important role in diffusing and translating knowledge developed in partner countries back into the NHS and generate opportunities for bilateral learning. Partnerships that span from individual to institutional relationships create linkages with bi-directional information flows, allowing knowledge from LMIC health systems to be mainstreamed and embedded back into the NHS in a way that benefits the UK health system.



*There’s no reason why education developed in one continent can’t be transferable to another.*

Professor Valerie Fleming, THET Trustee and Professor of women’s health

# Innovating healthcare through technology

**Innovations in digital technology can transform the delivery of health worker training and increase opportunities for learning across disciplines, institutions and national borders.**

In the THET conference session on digital innovations, Proximie showed a fantastic example of this. Proximie provides virtual training, consultation, mentorship, and live surgical collaboration to maximise opportunities for continuous

learning for health workers and to ensure quality improvement in clinical practice. Proximie demonstrates the power of digital training initiatives - increasing capacity by training health workers in places with few or no specialists.

As Dr Mustafa Musajee put it, with virtual training you can “replicate one surgeon twenty times” and share specialist knowledge with many more health workers, enhancing health workforce capacity and training on a wider scale.

## SPOTLIGHT

### Nursing and Midwifery

THET is prioritising its work with nurses and midwives across all of its work. In 7 countries across Africa we are partnering with NHS England to support the development of leadership skills through online groups, known as TALENT groups (Technically Assisted Learning and Education for Nursing and Midwifery Teams). Members of these TALENT groups participated in training, mentorship and bidirectional learning to enhance clinical knowledge and improve leadership skills.



The project established

**10**

TALENT groups



with participation from

**149**

nurses and midwives



in

**7**

countries

We would like to thank everyone who spoke, attended or supported the 2023 Annual THET Conference. We are proud to convene speakers of such expertise and authority on important issues of global health, and we are only able to do so with your support and input. If you would like to get involved or learn more about the work we do, please get in touch with us at [info@thet.org](mailto:info@thet.org).

## About the Tropical Health and Education Trust (THET)

Today, one billion people will never see a qualified health worker in their lives. For thirty-five years, THET has been working to change this, training health workers to build a world where everyone has access to affordable and quality healthcare. We do this by leveraging the expertise and energy of the UK health community and supporting health partnerships between hospitals, colleges, and clinics in the UK and those overseas.

From reducing maternal deaths in Uganda to improving the quality of hospital care for injured children in Myanmar, we work to strengthen local health systems and build a healthier future for all. In the past seven years alone, THET has reached over 84,000 health workers across 31 countries in Africa, the Middle East, and Asia in partnership with over 130 UK institutions

Find out more about our work at [www.thet.org](http://www.thet.org).

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