DIGITAL REACH INITIATIVE
A Novel Approach for Shaping the Future of Health and Development in East Africa

Gibson Kibiki, MD, MMed, PhD
Executive Secretary/CEO
EAST AFRICAN HEALTH RESEARCH COMMISSION
EAST AFRICAN COMMUNITY
<gkibiki@eahealth.org>
www.eahealth.org
www.eac.int
EAC PARTNER STATES

EAC a REC of 6 countries
Kenya, Rwanda, Burundi, S. Sudan, Uganda, Tanzania, etc.,
HQ in Arusha, Tanzania

- Pop ~200 Million (Worldometer); > 78% rural
- Young pop: <35 yrs ~ 80% (Awiti & Scott, EAI 2016)
- GDP >$160 Bil (UNECA, 2014)
- Fastest growing REC:
  - Hotspot for Tourism and investment
  - Use of mobile phones >80%

Mission: socioeconomic, and political integration
→ Free movement of people, business
  → Customs Union; Common market
    --> Monetary Union, Political Federation

Organization
EAC Secretariat
EA Legislative Assembly
EA Court of Justice
EAC Council of Ministers
EAC Summit/Presidents
EA Court of Justice

EAC decisions are legally binding to all Partner States

Specialised implementation institutions
EAHRC = Principal advisory body on health, generates evidence
Citizen-oriented Digital REACH Initiative

Digital Regional East African Community Health Initiative

Approved by the Presidents of the six EAC member countries

This is a new, ground-breaking initiative

Developed collaboratively by all EAC Partner States

To implement ICT across all dimensions of the health sector in EA

To transform health outcomes of millions of people across East Africa

Regionally coordinated to provide a robust enabling and investment environment, and to generate evidences through implementation of strategic regional DH programs

Brings together:
Governments of the EAC
Development partners
Private sector partners
and Other stakeholders
Vision 2028

Interconnected health systems for a healthy and prosperous East Africa.

Mission Statement

Maximise the power of digital health in East Africa by ensuring an enabling environment and by implementing scaled, coordinated, transformational, and innovative approaches.
<table>
<thead>
<tr>
<th>Application of Digital REACH Initiative</th>
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<tbody>
<tr>
<td><strong>Public Health Education &amp; Awareness</strong></td>
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<td>Enhance Public Health Education and Awareness</td>
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<td><strong>Diagnostic &amp; Treatment Support</strong></td>
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<tr>
<td>Optimise the Prevention, Diagnosis, and Treatment of Priority Health Conditions</td>
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<td><strong>Health Worker Training</strong></td>
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<tr>
<td>Improve Health Worker Education and Training</td>
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<td><strong>Data Collection &amp; Surveillance</strong></td>
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<td>Improve and Integrate Disease Surveillance and Response</td>
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<td><strong>Support Universal Access to Healthcare (UHC)</strong></td>
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<td><strong>Supply Chain Management</strong></td>
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<tr>
<td>Improve Supply Chain Efficiency</td>
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<td><strong>Resource Allocation &amp; Management</strong></td>
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<tr>
<td>Optimise Human Resource Allocation and Management</td>
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<td><strong>Population Health Status</strong></td>
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<td>Monitor Population Health Status</td>
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**TARGETED USER**
- Patients/Population
- Health Service Workers
- Health Officials
• Nine Workstreams
  • Run in parallel
  • Complement each other
  • Select priority activities

• The Health Programmes Workstream
  • Implementation of specific, strategic health programmes

• The seven Enabling Environment Workstreams
  • Creation of an enabling environment for the Initiative
  • Shared across the Partner States
  • Supports health programme implementations

• An overarching workstream for Initiative Management
  • Lead and manage the Initiative
Priority Health Programmes

- **HEALTH PROGRAMMES:**
  - Spanning all levels of the health sector

- **IMPLEMENTATION OF HEALTH PROGRAMMES WILL be prioritized based on:**
  - Resources
  - Opportunities to demonstrate quick implementation successes
  - Ability to mobilise more resource and to secure political support

### Level of Priority: High

#### TELEMEDICINE NETWORKS FOR EAST AFRICAN TERTIARY (NEAT) HEALTHCARE SERVICES
Implement telemedicine to link East African Centres of Excellence and specialised health care facilities across the region.

#### REGIONAL EAST AFRICA DISEASE SURVEILLANCE, CONTROL AND RESPONSE (READScoR)
Design a health alert and early warning system for disease outbreaks and epidemics in the region.

#### EAST AFRICAN ACADEMY FOR COMMUNITY HEALTH (EAACH)
Establish a community training and learning platform to improve health education and awareness, and train frontline workforce in the community leveraging digital technology.

#### EAC REGIONAL HEALTH OBSERVATORY (RHO)
Create a Regional Health Observatory to facilitate access to data, information, analyses, and empirical evidence for monitoring and evaluating regional health.

#### EAST AFRICA OPEN SCIENCE CLOUD FOR HEALTH (EAOSCH)
Utilise the EAOSCH to support health research and better understand health trends and outcomes in the region.

### Level of Priority: Low

#### REGIONAL HEALTH SERVICES
Implement programmes that strengthen cross-border and regional health by sharing data in priority cross-border communities and supporting portability of health insurance.

#### KNOWLEDGE MANAGEMENT AND PEER LEARNING
Support peer learning and the creation of reusable assets in the region through the implementation of knowledge management platforms.

#### REGIONAL TECHNICAL ASSISTANCE FOR DIGITAL HEALTH
Build digital health capacity in Partner States in areas that support the implementation of Digital REACH Initiative.

#### INNOVATIONS IN HEALTH
Design implementations with new digital technologies to support improved efficiencies and effectiveness in public health.
Quick Win: Regional Telemedicine

- Telemedicine Networks for East African Tertiary *(Telemed NEAT)* Healthcare Services
  - Connect established EAC regional CoE for specialized Healthcare services to provide advanced and specialised healthcare services and continuous medical education to health workers across the region

[Diagram showing connecting CoEs across the region and within partner states]

https://www.youtube.com/watch?v=XSGhoz8lcag

https://www.youtube.com/watch?v=f0bSHEXqjPM

Patients-per-Doctor ratio in Africa versus the rest of the world
Quick Win: East African Health Cloud

- **REAL-TIME REGIONAL DATA WAREHOUSE** for capturing, storing, retrieving, analysing, and managing national and regional health in East Africa.
- For the seamless **SHARING OF HEALTH DATA** and facilitating the tracking of KPIs
- **REAL-TIME SURVEILLANCE** of health threats, biosecurity, health emergencies, etc.
Implementation Approach

- Implementation of targeted regional digital health implementations while also creating the supportive foundations that will make those implementations and Partner State programmes successful.
- This is a ground-breaking dimension of this Initiative
- Makes it possible to identify evidence of impact, and to apply evidence to structure and drive work on the enabling environment and subsequent health programmes.

HEALTH PROGRAMMES

The Enabling Environment Workstreams provide the assets required for implementation of health programmes

Health Programmes drive the demand for assets created by Enabling Environment Workstreams using implementation science

Enabling Environment Workstreams

- INFRASTRUCTURE
- SERVICES AND APPLICATIONS
- LEADERSHIP AND ADVOCACY
- STRATEGY AND INVESTMENT
- LEGISLATION, POLICY, AND COMPLIANCE
- WORKFORCE
- STANDARDS AND INTER-OPERABILITY
## Resource Types and Potential Partners

### Resources for the Digital REACH Initiative

- Require a variety of sources
- Both financial and in-kind contributions

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<th>Resource Categories</th>
<th>Potential Partners</th>
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<tr>
<td>Financial contributions (e.g., grants and loans)</td>
<td>Development Partners</td>
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<td>Technical expertise</td>
<td>For-profit Private Sector</td>
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<tr>
<td>Political and public support and commitment</td>
<td>NGOs</td>
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<td>Civil society buy-in and engagement</td>
<td>Regional and Partner State Governments</td>
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<td>In-kind and direct financial contributions</td>
<td>Local Health Providers and Civil Society Groups</td>
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<td>Research Bodies and Universities</td>
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Strategic Approach to Resource Mobilisation

• Given the scope and timeline of this initiative it is understood that mobilising the necessary resources for implementation will be an ongoing and collaborative process.
• Some potential approaches for mobilising resources include:

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<th>Approach</th>
<th>Examples</th>
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<td>Target Phased Funding</td>
<td>• Take a phased approach to funding, starting with support to mobilise resources and set-up the Initiative and discreet, priority activities and quick-wins. This can be followed by funding for short-term and eventually longer-term activities</td>
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<td>Leverage Ongoing and Planned Activities</td>
<td>• Partner State commitments (OneHealth, GHSA)</td>
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<td>• Existing development partner activities in the region</td>
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<td>• Development partner principles</td>
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<td>Build Fundraising into Initiative Operations</td>
<td>• Allocate resources to support ongoing fundraising for the Initiative</td>
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<td>• Start with implementation of priority activities and use success from quick-wins and evidence generated to secure additional resources</td>
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<td>Align with Health Priorities</td>
<td>• Identify and articulate alignment with development partners’ and Partner States’ health agendas through the course of the Initiative to mobilise resources and tap into existing investments that can be leveraged</td>
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<td>Look for Partnerships with the Private Sector</td>
<td>• Identify private sector organisations that have aligned agendas and look for ways to structure PPPs and other partnerships</td>
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