Dear friends,

As the COVID-19 pandemic has swept across the world, it has forced country governments to respond quickly to an unprecedented health crisis. It has also reinvigorated discussions nationally and globally about the need for strong health systems that can both withstand health emergencies and deliver on universal health coverage (UHC). Across the five countries where ThinkWell is implementing the Strategic Purchasing for Primary Health Care (SP4PHC) project with support from a grant from the Bill & Melinda Gates Foundation, our country-based teams are contributing to the immediate COVID-19 response efforts and working to build more resilient health systems.
Pivot to the Pandemic
Over the past three months, our country teams have responded to requests from government agencies for real-time analytics, advisory services, communications support, and operational assistance related to COVID-19. The following points highlight some of our activities. Visit our website to learn more about our COVID-response.

- In Burkina Faso, we are supporting the Ministry of Health to explore mechanisms for rapidly channeling operational funds to frontline health providers.
- In Indonesia, we are analyzing the impact of the pandemic on access to high priority family planning and maternal health services.
- In Kenya, we are helping national agencies coordinate response efforts with sub-national governments.
- In the Philippines, we are supporting PhilHealth, the national health insurance agency, roll out COVID-related benefit packages.
- In Uganda, we are supporting the Kampala city government to coordinate response efforts with private providers.

Accelerating the Journey to UHC
It has been motivating to see how strategic purchasing has become an important tool in
responding to the crisis. As our teams work on the various health financing aspects of COVID-19, they are sharing insights and lessons as part of an evolving learning agenda. Below, I highlight some recent blogs that our teams have developed to document our learning:

- In **Kenya**, there is an urgent need for ensuring that COVID-19 resources mobilized by the national government and development partners' funds flow down to frontline providers, and that those facilities have the authority to spend those funds flexibly. This relates to long-standing issues around purchasing arrangements in Kenya, which we explore in a Social Health Protection Network (P4H) blog post. In a related piece, we discuss how Kenya has successfully removed financial barriers to health services for COVID-19 but the larger UHC agenda of removing user fees remains unfinished.

- In the **Philippines**, the COVID-19 response has called for a rapid adaptation of purchasing arrangements, which we explore in another P4H blog. The ongoing response is revealing the great benefits the country can derive from the Department of Health and PhilHealth working together while leveraging their comparative advantage.

- In **Uganda**, the team has been working with key stakeholders to explore ways the government can purchase health services from private for-profit facilities in Kampala and other urban areas, where the private sector accounts for a majority of the service delivery capacity. You can find more information in our blog post in Health Systems Governance Collaborative.

We will continue to share this learning with you in the coming months, and we invite you to share your comments, questions, and ideas with us.

Regards,

Nirmala Ravishankar, PhD
SP4PHC Program Director

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