The spread of COVID-19 has disrupted lives, communities, and economies worldwide. Leaders across all sectors of society must urgently act to minimize its impact on public health, safeguard foundational health system functions, prevent further disruption to lives and economies, and support recovery.

MSH’s global footprint, strong country and local relationships, and on-the-ground implementation experience ensure rapid support to governments worldwide for the immediate, coordinated actions needed to prepare, respond, and recover from COVID-19. Recognizing the critical role of strong leadership, we help leaders in government, the private sector, and communities work with urgency, decisiveness, and courage. Our collaborative approach relies on local talent and expertise, builds on national strengths, leverages the capabilities and resources of global and national partners, and rapidly develops the skills of both our partners and MSH’s own staff. MSH’s solutions focus on scaling up preparedness and response measures to solve urgent local challenges and on strengthening capacities and systems to ensure lasting impact and preparedness against future pandemics. Applying our established grant management systems and procedures, we make resources available to local actors to directly take on pandemic response responsibilities while improving their performance. We engage with rapid response teams to look across complex health systems, develop integrated plans that address interactions among human and animal health and their shared environment, and mobilize action at scale.

**MSH’S COVID-19 SOLUTIONS: PANDEMIC PREPAREDNESS, RESPONSE, AND RECOVERY**

As of May 2020, MSH is undertaking specific COVID-19 preparedness, response, and recovery interventions in 20 countries.

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MSH strengthens country health systems to meet the challenge of COVID-19, maintain essential health services, and prevent and prepare for future pandemics by:

- Strengthening leadership and management for better planning, risk communication, and execution of preparedness, response, and recovery
- Fortifying emergency supply chains to ensure access to medicines, equipment, and supplies where and when they are needed
- Strengthening infection prevention and control to prevent spread and protect health workers and patients
- Engaging communities in COVID-19 surveillance, control measures, and risk communication
- Targeting critical surveillance, diagnostic, and case management functions for rapid, direct impact
Leadership, coordination, and planning

- MSH builds effective leadership to set necessary direction, make informed policy and strategy decisions, and define, raise, and deploy the resources needed to prepare, respond, and recover from COVID-19. Our work supports leaders—from ministries of health to community health workers and local faith-based and private-sector partners—to work with urgency to develop and execute evidence-based plans, deliver quality services, and consistently govern health institutions.

- Our approaches and tools, including our flagship Leadership Development Program (LDP+), identify leaders across all levels of the health system and quickly build their skills for executive decision making, risk and crisis communication, and disaster management. Our support ensures that leaders take decisive action during the outbreak, effectively plan for recovery, and prepare against future threats.

- We help national and local authorities to remove restrictive policies and implement emergency measures that protect the most vulnerable, including protections against gender-based and domestic violence.

Emergency supply chain and commodity management

- As a global leader and innovator in pharmaceutical systems strengthening, we help countries address the unique challenges COVID-19 presents to supply chain systems, including unpredictable demand, global shortages of essential supplies, and complex and expensive resource requirements. We establish agile emergency supply chain and commodity management preparedness and response systems that can be adjusted based on the phases of an emergency, global availability of supplies, demand, and distribution networks.

- To support rapid decision making, we facilitate the use of real-time data and establish and adapt logistics management information systems, integrated with existing surveillance platforms. We engage the public and private sectors on pharmaceutical management and establish coordination and oversight mechanisms, such as medicines and therapeutics committees.

- Our support makes the rollout of health commodities faster and safer. We strengthen regulatory capacity and pharmaceutical-sector governance to protect the public from substandard and falsified products and work with national and regional public health institutes and academic institutions to ensure that protocols and pilot trials are set up and expedited for new treatments and vaccines. We work with country immunization programs to identify gaps in preparedness for a new vaccine, assess barriers to cold chains, strengthen distribution networks, develop prioritization schedules, and create public information campaigns to support vaccine and treatment acceptance.

PROTECTING ESSENTIAL HEALTH CARE AND SERVICES

Epidemics and other health emergencies can jeopardize delivery of essential health services and progress toward universal health coverage. This can leave unvaccinated children unprotected from infectious disease, mothers and newborns without pregnancy and childbirth care, and people with chronic diseases unable to access lifesaving medicines. MSH helps our local partners build resilient health systems that are ready to adapt to disease outbreaks, ensure continued service delivery, and keep families and communities safe. We prepare national, subnational, and facility decision makers to maintain high-priority services by rapidly and effectively establishing proper infection prevention and control measures, making difficult resource-allocation decisions, mitigating health-worker shortages, and building flexible systems that can cope with changing environments and unexpected emergencies.
Infection prevention and control

- MSH builds on proven strategies for effective infection prevention and control—protecting health care workers and patients from infection and allowing essential health services to continue.
- Our work allows for rapid identification and isolation of suspected cases, contact tracing, and safe clinical management in hospital and home settings. We help establish systems for triage of suspected cases and appropriate infection prevention and control protocols and guidance, such as the use of personal protective equipment, disinfection, and waste management.
- We prepare decision makers at national and subnational levels to rapidly and effectively establish proper infection control measures, maintain essential health services, and ensure enough flexibility to cope with changing environments and unexpected emergencies. We partner with health facilities to assess capacities and build skills in infection prevention and control, using e-learning technologies and peer-to-peer learning to ensure progress even when local travel is restricted.

Community engagement and risk communication

- MSH’s community-based surveillance systems are designed and adapted to operate within existing national information systems and can be deployed through smartphone-based applications for use by community watch teams. By putting community-level data in the hands of national authorities, our support enhances coordination and shortens response time when an outbreak is identified.
- We support our partners in establishing teams of local leaders and community health workers to educate the population on epidemics, disease symptoms, and the availability of testing and treatment; identify and isolate suspected cases; conduct contact tracing; and implement prevention and control measures. These teams—which draw on health, education, water and sanitation, and other government representatives and established local leaders—are linked with local health facilities and supported and overseen by district-level, multisectoral response teams.
- MSH rapidly establishes and trains COVID-19 hotline responders through blended learning, practical tools, and technical support, scaling up call centers to respond to an evolving epidemic with accurate information on transmission, prevention, testing, and treatment options available in local languages.

Surveillance, diagnostics, and case management

- MSH develops electronic integrated disease surveillance and response (IDSR) systems on national District Health Information Software (DHIS 2) platforms, and enhances them to include early warning notification, contact tracing, and outbreak management and reporting. We help surveillance teams to deploy applications at the community level to better identify hotspots and use data to mobilize rapid response.
- We apply our expertise in laboratory technologies through local partnerships to support countries in leveraging existing diagnostics, strengthening laboratory services and networks, adapting them to COVID-19 lab needs, and rapidly scaling up new testing technologies.
- We help facilities prepare surge capacity for a rapid influx of cases, support safe transport to hospitals when necessary, and ensure continuity of urgent and emergency care, such as obstetric and newborn services and care for patients with underlying conditions.
Our current response to COVID-19 includes:

From its inception, the MSH-led USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program was selected by USAID as a major partner under the Global Health Security Agenda. As the COVID-19 threat emerged, USAID turned to MTaPS to support countries’ emergency response, including through infection prevention and control and emergency commodity management interventions. MTaPS has initiated COVID-19 response activities in 12 priority countries—Bangladesh, Burkina Faso, Côte d’Ivoire, Cameroon, Ethiopia, Jordan, Kenya, Mali, Mozambique, the Philippines, Tanzania, and Uganda—where it is collaborating with national rapid response teams to assess capacities and strengthen policies, coordination, and management.

In Bangladesh: Through the UK Department for International Development-funded Better Health in Bangladesh Project, we support the National Control Room for COVID-19, established to guide and monitor the national response. We develop guidelines for the health workforce and help coordinate logistics, commodities, and risk communication and community outreach.

In Madagascar: Working with private-sector providers, the USAID Accessible Continuum of Care and Essential Services Sustained (ACCESS) Activity supports the COVID-19 hotline, which provides accurate information in local languages and makes referrals to qualified providers and testing facilities. Madagascar’s Ministry of Public Health has adopted the ACCESS program’s CommCare application to conduct community-based reporting, feeding directly into the national DHIS 2 health information system for routine disease surveillance. Over three months, use of the hotline increased from 21,000 calls per day to 145,000.

In Malawi: The Organized Network of Services for Everyone’s (ONSE) Health Activity, USAID’s flagship program for health service delivery in Malawi, strengthens local leadership and enables rapid coordination, monitoring, and decisive action. We collaborate with district health teams and local community and faith leaders to implement infection prevention and control interventions, risk communication activities, and to ensure meaningful community engagement and buy in.

MSH innovations: partnering with governments...

In West Africa: After the 2014 Ebola epidemic, MSH helped Benin, Guinea, Mali, and Sierra Leone establish logistics and monitoring systems, including dashboards for early warning and stock status monitoring.

In Rwanda: MSH updated the national surveillance and response system to monitor 24 priority diseases, track contact tracing, and improve outbreak reporting. The e-IDSR system is integrated with the national DHIS 2 platform, a configuration that has been adapted and implemented across other African countries with support from the US Centers for Disease Control and Prevention.

…and with the private sector

In Kenya: MSH’s independently run subsidiary, MedSource, aggregates the purchasing power of a large group of members, lowering costs, and ensuring that safe, quality medicines and commodities are purchased and distributed. MedSource’s catalog has been expanded to include personal protective equipment and features more than 10,000 products covering all therapeutic categories. MedSource offers a model for procuring supplies through the private sector when supply chains are disrupted.

In Tanzania: MSH’s innovative model for accredited drug dispensing outlets (ADDOs) combines government accreditation of private drug shops with capacity-building of shop owners and employees, improving access, demand, and quality of medicines and services in underserved areas that experience frequent drug shortages. More than 11,500 ADDOs—operating across the country without ongoing donor assistance—are critical actors in community-level surveillance and referral. MSH has introduced the approach in Bangladesh, Liberia, Nigeria, Uganda, and Zambia.

In Uganda: MSH developed an electronic portal for regular and emergency procurement and supply, and guidelines for selecting emergency commodities. We build the capacity of private not-for-profit facilities and other pharmaceutical system stakeholders in implementing the electronic system, pharmaceutical financial management, and data usage. The emergency logistics system has been critical for Uganda’s response to COVID-19.