

## HealthRise

Medtronic Foundation partners with governments and local organizations to improve access to quality chronic and acute care for underserved populations, especially for non-communicable diseases (NCDs) like cardiovascular disease and diabetes. As the pressure of NCDs grows, and the call for partnerships and new models of high-quality, efficient health care builds, Medtronic Foundation proactively builds its portfolio to leverage existing US Government (USG) and donor-supported investments in global health. Its strategic investments build capacity at all levels, and create evidence about what works to expand access and improve health outcomes for underserved populations, integrating with existing systems. Specifically, Medtronic Foundation partnerships strengthen health services, human resources for health, management capacity and health information systems, as well as patient and community empowerment. Many underserved communities in USG-supported focus countries experience high out-of-pocket expenditure, morbidity, and mortality due to NCDs. Building on successes in reproductive, maternal, newborn, adolescent and child health (RNMAACH) and infectious diseases like HIV and tuberculosis, creates better, more efficient outcomes for patients, and enables governments to better manage increases in NCD incidence and prevalence.

**HealthRise (South Africa):** Integration of NCD/diabetes and hypertension diagnosis and management in HIV/TB health services is a win – win to improve health outcomes and system efficiency in partnership with longtime PEPFAR partners, together with national and local Department of Health

**Intervention:** *Leverage HIV/TB health services and community systems to build integrated primary care – a core national Department of Health strategy – to expand diabetes and hypertension screening, diagnosis and management*

In partnership with Abt Associates and University of Washington, Institute for Health Metrics and Evaluation (IHME), and local partners, Medtronic Foundation supports HealthRise, a global five-year (2014-2018), \$17 million program focused on expanding access and improving efficiency of diabetes and hypertension detection, management, and control among underserved populations in Brazil, India, South Africa, and the United States.

Given South Africa's high HIV prevalence of 19% among the general population and nearly 40% in KwaZulu Natal, one of the program's target districts, HealthRise will integrate NCD care efforts with existing HIV prevention and treatment efforts at the community level.

Diabetes and Hypertension are among the highest prevalent conditions in the world, and are rising. Diabetes has increased 45% in the last decade, with some of the highest rates in low and middle income countries. Yet in most developing countries, these conditions are largely undetected and poorly controlled, leading to costly and tragic downstream consequences like amputation, heart failure, sudden cardiac arrest and stroke.

HealthRise South Africa's implementation is led by national partner Human Sciences Research Council (HSRC), a longtime PEPFAR partner for strategic information, HIV prevention, testing and treatment. Together with local partners, Expectra in Kwa Zulu Natal, and Project HOPE in the Northern Cape, HealthRise partners are working to empower patients to seek and maintain care for diabetes and cardiovascular disease while strengthening frontline health workers' ability to provide care and management services within an integrated primary care system.

For this integration to be successful, HealthRise is emphasizing strong connections between community health workers (CHWs) and health care teams in primary care centers, including linkages to supportive supervision for CHWs. This integration is essential to the Department of Health's national goal of re-engineering primary health care to improve access to and the quality of health services.

HealthRise teams in South Africa are working to expand and support the number of CHWs to supplement the government-funded CHWs, incorporating NCD care into their scopes of practice. As CHWs appear to be highly respected and liked by community members, they are well-positioned to complement the facility-based primary care system, in part by reducing patient load at facilities so facility-based care is available for patients in greatest need. Because many of these CHWs are already serving clients with HIV/AIDS or TB, the project will focus on the integration of NCD care with existing services delivered at the community level – leveraging the opportunity for CHWs to be a one-stop shop for patients by managing multiple conditions.

Through HealthRise, both government and partner-supported CHWs will be trained to screen for diabetes and hypertension during community screening campaigns and household visits, and to refer patients to clinical facilities to receive confirmatory diagnoses. CHWs will then follow up with patients to ensure they adhere to treatment regimens and appointment schedules, in addition to supporting patients with the ongoing challenges of living with chronic NCDs. Expectra will also equip CHWs with supplies like glucometers and blood pressure cuffs to facilitate NCD screening and monitoring, as well as bicycles so the CHWs can better follow up with patients. Furthermore, the organizations will establish patient support groups to encourage treatment adherence and healthy behaviors, while linking patients to support services within the Departments of Health and Social Development.

To ensure sustainability and coordination of the projects, HealthRise is guided by a Country Advisory Council, with representatives from the U.S. government, as well as local academic, NGO and private sector leaders. In addition, local partners are closely aligning their efforts with existing government priorities and strategies around comprehensive community-based health care broadly and NCD care specifically. South Africa was one of the first African countries to introduce an integrated chronic disease management (ICDM) approach in response to the double burden of HIV/AIDS and NCDs. HealthRise will conduct an impact evaluation through IHME in 2018 to contribute robust evidence toward this systematic integration.