

Newsletter February 2023

CHORUS (Community-led Responsive and Effective Urban Health Systems) is a 6-year (May 2020- March 2026) multi-country Research Program Consortium (RPC) working to build resilient urban health systems that address the needs of the poorest, with funding from UK Aid (Foreign, Commonwealth and Development Office).

The CHORUS research projects are responding to the practical challenges of delivering equitable health services in urban areas of 4 partner countries: **Bangladesh, Ghana, Nepal and Nigeria**, using an “embedded” approach of research working with stakeholders to identify issues, co-design interventions and catalyse uptake of the research into policy and practices.

CHORUS works with communities, local governments, policy makers and health providers to design and build health systems that respond to the needs of urban populations. We do this by addressing four key pillars (click for more information):



Linking a plurality of
Providers



Multi-Sectoral
Collaboration



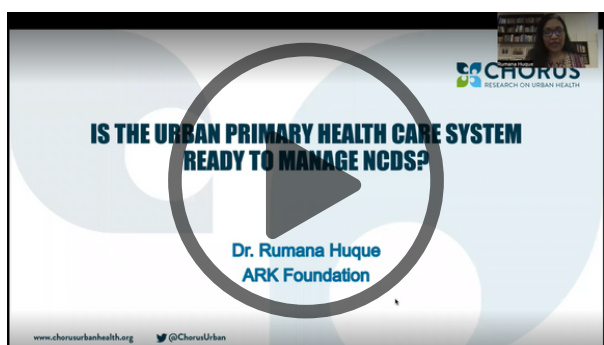
Responding to the double burden
(NCDs & CDs)



Reaching & Engaging the
Urban Poor



CHORUS Bangladesh: Strengthening the Urban Primary Healthcare System to Deliver NCD Care to the Urban Poor



Dr. Rumana Huque presents initial findings on how ready the Urban PHC system is to manage NCDs in Dhaka

In Bangladesh, CHORUS partner ARK Foundation aims to strengthen the management of NCDs within the urban primary health care system by integrating the PEN (Package of Essential Non-Communicable Diseases Interventions in Primary Care) and a newly developed Health Management Information System (HMIS). A needs assessment with stakeholders has been completed to understand how NCDs are treated in urban primary health centres and among poor urban residents, using Participatory Action Research, scoping reviews, data analysis and technical framing.



[Read more on the Bangladesh Project here.](#)

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CHORUS Nigeria: Developing health system linkages between the public and informal sectors

In Nigeria, CHORUS partners at the [Health Policy Research Group, University of Nigeria](#), focus on the critical issue of accessibility of comprehensive, quality health services in urban slums and among vulnerable groups. A lack of social health insurance and heavy reliance on out-of-pocket payments exacerbate access challenges for the poorest.

Informal health providers (IHPs), including village health workers, traditional birth attendants and healers, bone setters, amongst others, are a crucial source of health care in urban slums, essentially filling the gaps caused by the absence of formal providers. IHPs enjoy the patronage and confidence of the residents. However, the health services they provide are limited to their skills and capacities, and there are legitimate concerns about the quality of this health care provision. To ensure residents have access to a continuum of essential and quality health services, the plurality of healthcare providers in the urban slums are formally linked in the urban health system, with effective regulatory and monitoring mechanisms in place.

The CHORUS project will be implemented in the largest slums of Enugu and Onitsha states, and will build, support, and strengthen linkages between IHPs and the formal health system, to improve access to quality and affordable health services in urban slums. Interventions are being designed with stakeholders, including policy makers, health professionals, IHPs, community leaders and slum residents and health facility committees.

Read more on the findings from the stakeholder consultations in the presentation here:



[Read more on key urban health issues from the University of Nigeria's HPRG team here.](#)



CHORUS Nepal: Approaches needed to strengthen the service delivery of NCD programmes for the urban poor

In Nepal, evidence suggests that the health system is struggling with an undervalued health agenda within government priorities where essential medicines are out of stock and there are difficulties ensuring the quality of health care provision whilst the services undergo expansion.

Non-Communicable Diseases (NCDs) have emerged as a major public health concern and account for two-thirds of total deaths in Nepal. The double burden of infectious and non-communicable diseases has exacerbated the situation among the urban poor populations.



Evidence shows urgent action is needed to strengthen health systems, and to address the rising burden of NCDs among urban poor communities, who are often overlooked in the planning process due to a lack of evidence and data.

HERD International's CHORUS project seeks to understand the approaches needed to strengthen the service delivery of NCD care for the urban poor at the primary health care setting in Pokhara. The project aims to improve health and reduce inequities in health outcomes in urban communities.

The project needs assessment phase has explored the perceptions and priorities of the stakeholders at the federal, provincial and municipality levels and within the health facilities on NCDs and the associated risk factors as priority interventions.

Watch HERD International's video on strengthening the urban health system in Nepal here:



CHORUS Ghana: Linking communities, local government and health workers to support policies and services in poor urban neighbourhoods

Ghana adopted the Community Health Planning and Services (CHPS) concept as a national policy for the provision of primary health care (PHC) services, with a focus on ensuring that healthcare services are made accessible, equitable and efficient, and of good quality. This concept worked in rural areas but implementing CHPS in urban areas has seen many challenges due to different social networks, disease burdens and determinants of health in urban settings. Urban areas in Ghana experience rising NCDs, disparities in the wider determinants of health and poor collaboration between local government and communities, among other issues. There is a need for collaboration between all stakeholders to improve PHC and understand how CHPS can deliver health coverage in the poor urban areas.



UNIVERSITY OF GHANA

[Read more on the Ghana project here](#)



The University of Ghana project uses the Participatory Action Research (PAR) approach to collectively analyse problems and their solutions involving two communities (Ashaiman and Madina). Rich picture sessions and transect walks were held with relevant stakeholders from the local government, communities and healthcare facilities to examine the challenges faced.

The team is developing, co-producing, implementing and evaluating a package of interventions with stakeholders that enables the sustainable provision of life cycle health promotion and prevention programs and services at the household and community level for urban poor populations in Ghana.

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