



2023 – 2025
Strategic Plan

Leveraging Technology to Reach
Universal Health Coverage



Contents

Executive Summary	3
Medic and the Community Health Toolkit	5
Building on Progress Toward our Future	7
Measures of Success	11
Sustainability	14
Conclusion	15

Executive Summary

The devastation wrought by the COVID-19 pandemic has resoundingly demonstrated that underinvestment in health systems globally costs millions of lives each year. Nearly everything we know about the spread of COVID-19 and how communities were impacted – both directly by the virus and indirectly due to the resulting discontinuity of essential care – has come through data from facility-based care. Yet, **half of the world’s population cannot access even the most basic facility-based care** because doctors, nurses, and clinics are physically inaccessible, unaffordable, or under-resourced.

The result is the continued marginalization of the world’s poorest communities in places that have been impacted by legacies of colonization, structural adjustment, and systemic underinvestment. If we, as a global community, seek to achieve universal health coverage, then we must also seek to properly understand and resource the care that is provided at the household level by community health workers (CHWs), empowering

and expanding formal health systems while responsibly engaging communities in locally-led solutions.

Community health system strengthening and change are needed at unprecedented scale to ensure people can readily access the care they need and deserve. This is compoundingly true as climate change is anticipated to impact these same communities with outsized adverse effects¹, placing additional resource and humanitarian burdens on the world’s poorest countries and deeply impacting access and equity of care.

For over 10 years Medic has advanced equitable care and strengthened community health systems by building, innovating, applying, and scaling open-source, low-cost digital health tools in collaboration with communities, governments, and implementers. **The time is now to redouble our commitments and advance our work** to (1) enable the Community Health Toolkit (CHT) to be the leading fully open-source community health platform – including fully open-source software (OSS) frameworks and

applications and open-access resources – with a thriving global community of practice deploying and sustaining CHT apps; (2) ensure partners are well-supported to deploy, own, and scale the CHT on their path to universal health coverage; (3) incubate new technologies and discoveries to improve health impact and reimagine health systems; and (4), drive systems-level change that translates evidence and best practices into policy.



We believe that if health systems adopt community health information systems for care delivery that are human-centered, locally-owned, open-source, and interoperable, then digitally equipped community health workers, caregivers, and individuals are supported and empowered to advance universal health coverage and improve health outcomes in their communities.

¹https://apps.who.int/iris/bitstream/handle/10665/134014/9789241507691_eng.pdf



To advance our work, by 2025 Medic will:

6 → 10
governments

Increase, from 6 to 10, the number of governments that select the Community Health Toolkit as a tool of choice to scale national community health information systems through direct accompaniment and support.

99%
up-
time

Ensure 99% up-time for CHT-based apps, so that health workers always have access to the tools they need to serve their communities sustainably.

3 ×
users

Triple the number of users leveraging the CHT, from 40,000 to 120,000.

100 million
moments
of care

Enable health workers to support care an additional 100 million times through CHT workflows, matching the number of times care has been supported by the CHT in the previous nine years.



Medic and the Community Health Toolkit

Founded in 2010, Medic advances equitable health care and strengthens community health systems. We build, innovate, apply, and scale open-source, cost-effective digital health tools in collaboration with local, regional, and global partners.

We envision a world in which health workers, caregivers, and individuals are supported as they provide and access care in their communities; universal health coverage is a reality; and, health is a secured human right contributing to overall human well-being and flourishing.

Medic’s work is deeply grounded in social justice and equity, and cuts across two distinct ecosystems — technology and health — each with its own principles, guidelines, and frameworks. We are first and foremost a rights-based organization that works to democratize equitable access to digital public goods in order to improve health at the individual, family, and community level; and to contribute toward the United Nations Sustainable Development Goals.

Over the last decade, Medic and the CHT have supported more than 120 digital community health initiatives, bringing learnings from each to our global community of practice. Apps powered by the CHT are currently leveraged in 13 countries across Africa and Asia and are used by more than 40,000 health workers. To date, the CHT has supported care delivered by health workers more than 92 million times through in-app activities.

We strongly believe in the promise of a new model of care led by professionalized, paid, supervised, and digitally-enabled CHWs. Digital tools empower frontline workers, make work and progress visible, and increase the confidence of policymakers in the quality of care being delivered. We work alongside governments and other implementing and technical partners to support efforts to reimagine and professionalize CHW programs, demonstrate evidence of their impact on health outcomes, and leverage digital health innovations for frontline health worker motivation, retention, performance management, continued education, and career advancement.

Our work and impact are driven by three key enablers:

Our people and values

Our global team of 90+ teammates are our biggest strength. We live our organizational values of **Humanity, Solidarity, Openness, Creativity, and Initiative** in everything we do.

Diversity is our strength.

As a global team of 90+ teammates across 19 countries, we each live our organizational values. We infuse creativity and humanity when designing new features and building software, training new users, and telling the story of our work to the world. Our value of openness guides how we transparently communicate within our team and with our community, build and release quality code, and share and reuse ideas that work. We accompany CHWs in solidarity by locating our teams near the communities we serve, testing and iterating tools with partners and users, and strengthening community health systems together. From transforming community health systems, to promoting a learning culture internally and in our community, we take initiative to drive positive change.

Human-centered first

As a pioneer in human-centered design, we adopt a human-centered philosophy to everything we do, from building an open-source product to supporting our team, we start with people and focus on impact.

We don't start with technology, we start with people.

We apply human-centered principles as an underlying philosophy in all that we do – designing and building an open-source product, researching innovations, deploying digital tools for scale, building our team closest to the users and communities we serve, and supporting our team to thrive. People are at the center of our work. Through a continuous process of discovery, ideation and prototyping, testing, and iteration, we anchor ourselves and our work in real users' needs, experiences and motivations, and co-imagine solutions and digital tools for impact.

Grounded in evidence

Our innovation, learning, and data use efforts shape the evidence base for digital health, inform evidence based CHT features and improvements, help strengthen CHW performance, and build links within community health systems.

We champion quality data to inform decisions.

We continuously strive to strengthen digital health and community health systems through effective generation, use, and dissemination of insights, data, and evidence. A distinctive aspect of Medic's work is our role in shaping an emerging evidence base for digital health in lower-income settings through a commitment to rigorous science that spans global health, computer science, and human-centered design. We develop evidence-based use cases alongside our partners to ensure that CHWs can provide targeted, timely and effective care, and ensure health system data owners have trust in the data collected by CHWs and are empowered to effectively use their data for decision-making. We are not just building software, we are redesigning and evolving health systems.

Building on Progress Toward our Future

In 2020, Medic put forward a bold shift in strategy that relied upon open-sourcing our tools and resources as core components of the CHT, distributing our expertise to local solution providers, and carrying out R&D that is needed to move the field forward.

Through this strategy we evolved from a previous model of direct support for each new health system to the behind-the-scenes roles of technical steward, core contributor, capacity builder, and community manager. Medic's new approach was designed to address the opportunities for impact at scale – opportunities that are now materializing through thoughtful and diligent collaboration.

Leveraging key learnings from launching the CHT, onboarding more than 10 technical partners who are actively building and implementing on the platform to meet the needs of new and existing implementations, and supporting partners through the ravages of the COVID-19 pandemic –

all while continuing high-quality platform advancement and cutting-edge research – **Medic and the CHT are in the strongest position ever.**

By investing in the capacity and expertise of our team, we have both fostered a global community and directly accompanied governments and high-impact implementation partners. Through thoughtful and robust architectural initiatives and product innovation, we have advanced the capabilities and performance of the CHT platform. Medic-led research initiatives have applied methods such as data science and implementation science to improve data quality, reimagine consent in the community setting and prove the potential for influencing universal health coverage through human-centered digital tools.

This progress is made possible by Medic's commitment to radical collaboration, open innovation, and a deep community of like-minded implementing, research, technical, and funding partners.

Since the launch of our previous strategic plan, we have:

Increased CHT users by

50%

from 27,477 in 2019 to 41,216 at year end 2022



More than doubled the number of times care is supported by the CHT each year

Increased the number of governments selecting the CHT for national scale from

0 → 6



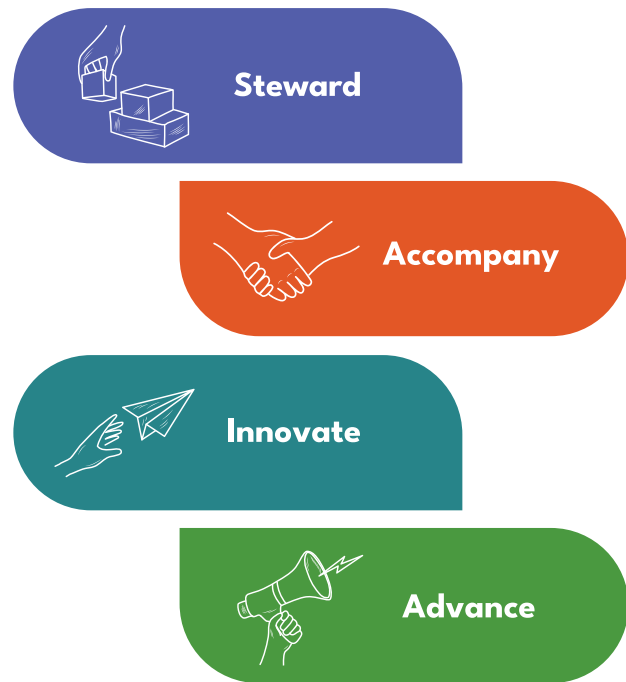
“
Progress is made possible by Medic's commitment to radical collaboration and open innovation
 ”



As we enter our next phase, we are invigorated by our progress over the last decade, and this pivotal moment of potential made possible by a re-galvanized movement for global health equity and national health system reforms.

In 2023-2025, we will center our work across four complementary pillars: **Steward - Accompany - Innovate - Advance.**

Strategic Pillars



Through this model, we aim to:



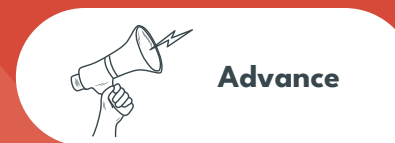
- Enable the CHT to be the leading fully open-source community health platform with a thriving global community of practice deploying and sustaining CHT apps;



- Ensure partners are well-supported to deploy, own, and scale the CHT on their path to universal health coverage;



- Incubate new technologies and discoveries to improve health impact and reimagine health systems; and,



- Drive systems-level change that translates evidence and best practices into policy.



Steward

Enable the CHT to be the leading fully open-source community health platform with a thriving global community of practice deploying and sustaining CHT apps

We build an open-source toolkit that makes it easier and faster for organizations to build, scale, and own community health information systems at low total cost of ownership and without vendor lock-in. We are committed to driving the sustainability of CHT deployments by advancing partner capacity to build and maintain locally owned CHT deployments.

To this end, Medic will:

Prove the breadth and flexibility of the CHT through product innovations, extensibility, and customization, while enabling standards and interoperability;

Invest in core CHT development that provides continued functionality, performance, scalability, and quality of future releases;

Continue to grow the CHT's community of practice through CHT education and accreditation, increased community engagement, and championing the community and platform across global stakeholders.



Accompany

Ensure partners are well-supported to deploy, own, and scale the CHT on their path to universal health coverage

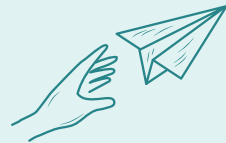
We demonstrate the value of the CHT at scale to achieve health impact with ongoing enhancements in quality, speed, and coverage of care with a focus on long-term local ownership and data stewardship. From design to implementation, capacity development, advocacy, scale-up planning, and resource mobilization, we offer partners deep accompaniment on their digital health journey that is necessary to ensure the long-term success of CHT-powered community health information systems (CHIS).

To this end, Medic will:

Provide direct accompaniment of up to eight Ministries of Health;

Support technical partners building and supporting active CHT deployments, and;

Provide direct accompaniment to up to five implementing partners.



Innovate

Incubate new technologies and discoveries to improve health impact and reimagine health systems

Alongside our partners, we accelerate innovation in health systems by co-creating and testing prototypes, and refining, scaling and replicating evidence-based, purpose-built solutions for improved health impact.

To this end, Medic will:

Conduct data science that strengthens the continuum of care to improve health outcomes;

Deepen interoperability research that expands linkages to the health system, and;

Execute implementation science that measures and plans for the scale-up of successful pilots to maximize coverage and impact.



Advance

Drive systems-level change that translates evidence and best practices into policy

CHISs need an enabling environment in which they can flourish, including clear and supportive regulatory frameworks and professionalized community health systems. We advocate with stakeholders to strengthen and advance these necessary health system and digital landscape building blocks, and ensure the adoption of best practices into policy, so that CHISs can thrive and sustain impact on health outcomes towards universal health coverage.

To this end, Medic will:

Engage in policy, thought leadership, and publications that shape and inform digital health policy setting, budgeting and implementation, and;

Advocate our varied ecosystems for the adoption of principles of digital development and CHW professionalization, including health worker pay.

Measures of Success

Medic is intentionally building and supporting implementations which, by design, place access to data in the hands of communities, rather than in our repositories. We comply with global standards such as the EU General Data Protection Regulation (GDPR) as well as national data governance requirements, and act in service of a future of data access that promotes individual rights and local ownership. While adhering to local data ownership limits the granularity with which Medic reports on the link between health outcomes and the demographics of individuals served by the CHT, this information is still available – but to the communities impacted by, and benefitting from, digitally-empowered community health systems. We believe that this shift is necessary in global health and in our digital ecosystem, and that in proactively advancing local data control and ownership, we are building a data architecture better aligned with our vision and values of humanity.

With this shift, we put forward a core set of measurements to gauge engagement with CHT-based tools, the quality of the tools, and the level of local ownership made possible by our global goods approach to scale.

Engagement

The CHT is poised for significant scale, with Ministry-led deployments already underway and on track for national adoption. From 2023-2025, we aim to triple the number of total users – from 40,000 to 120,000 – who will be leveraging the CHT to provide care in their communities. This growth is supported by MoH-approved scale roadmaps that give us an unprecedented confidence in their commitment to and pace of growth.

As we continue to build robust, multi-workflow apps to facilitate holistic care at the household level, we expect to enable health workers to support care 100 million times through CHT workflows, more than doubling the number of times care has been supported by the CHT since 2014.

To further measure engagement, we will establish baseline data and set ambitious annual targets in support of increasing the number and percentage of daily and monthly active users and the average number of times care is supported per active user.

We aim to triple the number of total users – from

40,000
↓
120,000

Enable health workers to support care

100
million times



Quality

The efficiency and reliability of the CHT platform is critical to the experience of the health workers and health system users who depend on consistent access to the apps they need. We are committed to working towards 99% up-time for CHT-based apps, ensuring health workers always have access to the tools they need to serve their communities. In support of this ambitious target, we will diligently monitor and reduce the number of outages experienced and the median live-site incident duration.

Ensuring that apps built on the CHT provide an empirical assessment of data quality and recommendations for remediation is critical in increasing trust and adoption of digitally enabled healthcare. Medic will track the number of implementations leveraging

the CHT Data Observation Toolkit – co-created with our partner, Datakind – to analyze health worker and health system data, introducing the tool in 2023.

Building holistic digital community health tools that are well integrated throughout the hierarchy of national health systems is critical to their sustainability and quality. To this end, we will demonstrate best practices for integrations and interoperability for at least three key workflows, as determined by a consensus of experts in the ongoing CHIS Interoperability Study. In alignment with our vision of enabling universal health coverage, we will monitor the number of UHC tracer intervention workflows per active deployment, setting a baseline in 2023.

99% up-time
for CHT
based apps

Interoperability
for at least

3 key
workflows

“ We will diligently monitor and reduce the number of outages experienced and the median live-site incident duration ”



Local Ownership

Our experience has shown that the road to government tool adoption is a long and often non-linear journey. Leveraging our existing momentum and performance, by 2025 we will increase the number of governments selecting the CHT as a tool of choice for national scale from six to ten through direct accompaniment and support to CHT partners. Knowing that digital tools are only one part of the puzzle to achieving national implementation of a community health system, we expect to achieve full national scale in at least one country by 2025.

Long-term sustainability of the CHT at national scale requires investment from the government at all levels. To this end, we will measure the number of countries allocating domestic financing, doubling from two countries in 2022 to four countries in 2025.

In every country where Medic provides direct accompaniment to the government, we commit to building local capacity of country-based technical teams, either within government, through partnering NGOs, or by onboarding CHT technical partners.

“
We commit to building local capacity of country-based teams
”



We will increase the number of governments selecting the CHT as a tool of choice for national scale from

6 → 10

We expect to achieve full national scale in at least one country by

2025

+ + **Doubling from two countries in 2022 to four countries in 2025**



Sustainability

This plan is designed to achieve and sustain growth where it is needed. In the long-term, we expect to grow and evolve the CHT community and the product, including core and peripheral CHT functionality as well as the tools that build tools. We aim to achieve new rates of growth for the delivery of care by digitally equipped health workers to increase the functionality and strength of entire health systems. In doing so, we are committed to achieving positive growth and equitable effects on health-care and the health of individuals in every community we serve. We are not optimizing for the growth of our budget or headcount, instead we are opting to right-size our organization to ensure we deliver what is needed during this next phase.

The distribution of expertise and power is at the core of an open source approach. This distribution will support new deployments and help maintain and strengthen current deployments. Healthy ecosystems in countries will include multiple partners who are willing and able to provide solutions

that rely on public goods, strengthen public systems, and advance the public's interests. In the medium-term, we expect technical partners to support new and existing systems. In the long-term, we expect technical partners and teams embedded within health delivery organizations to support systems.

In each major phase of our work, Medic will need to justify our existence and activities, play a compelling role, continually right-size our team structure aligned to strategy, and deliver tangible results for and with our community. We much prefer this reality to an alternative where incentives are misaligned with our mission. If successful, this strategy should attract funding partners who are interested in scale, innovation, and rights-based social movements. Over the next three years, we will find new partners, including institutional/multilateral donors and research institutions – these partners will play key roles in subsequent phases. Medic will continue to operate as a compelling and high-performing philanthropic venture.

Conclusion

Over the next decade, health systems around the world must rapidly evolve to meet growing and diverse care needs while also building resilience against challenges such as pandemics, climate change, and urbanization. We know that the status quo is unacceptable and that open-source, human-centered, interoperable, and locally-owned technology has the potential to strengthen health systems; empower CHWs, caregivers, and individuals; and improve health outcomes.

Vitalized by our progress in the last decade, and spurred by the urgency, scope and scale of the global challenges we now face, we are once again galvanized into action. We commit ourselves to stewarding the CHT as the leading open-source CHIS toolkit, accompanying and innovating with our partners on their digital health journeys, nurturing an open community of practice, and advancing the global digital health ecosystem towards UHC. Guided by our belief that health is a human right, and powered by our strongest asset, our global and diverse team, we walk in solidarity with our partners, CHWs, and patients to meet the challenges of this moment.



“

Together, we have an unprecedented opportunity to support a global movement that can benefit hundreds of thousands of health workers, and improve health for millions of families around the world.

2023 – 2025

Strategic Plan



Leveraging Technology to Reach
Universal Health Coverage

Global Remote • Nairobi • Kathmandu • Kampala • Dakar

hello@medic.org philanthropy@medic.org media@medic.org

