

**“Enhancing Interprofessional
Collaboration and Learning for
Strengthening Primary Health Care”**

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Title	PROVIDING SUSTAINABLE ACCESS TO HEALTHCARE IN MYANMAR'S CONFLICT-AFFECTED AREAS THROUGH THE STRATEGIC PURCHASING DURING COVID-19 PANDEMIC: LESSON LEARNED FROM PILOT PROJECTS
Type	Oral Presentation <i>What can we learn from your Primary Health Care Practice and Experiences?</i>
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Abstract N ^o	TUFH593
Content	<p>In the mountainous regions along the eastern borders of Myanmar, civil war's full impact has been exacerbated by a lack of growth driven by instability and aggression. This legacy has created a paradoxical allocation of government resources, with the populations most in need of healthcare among the least likely to have access to it. Given the small number of government clinics in conflict-affected areas and the skepticism of those clinics that exist, Ethnic Health Organizations (EHOs) have filled the gaps. EHOs offer health care in local languages, free of charge, to local residents. We started a strategic purchasing pilot to purchase services from four piloted clinics to improve the efficiency of ethnic health systems. Myanmar has faced the effect of the COVID-19 pandemic since March 2020. Myanmar faced two waves of the COVID-19 pandemic, the first wave in March and another wave in August of 2020. During the COVID-19 pandemic, the challenges faced in maintaining sustainable access to primary health care in four piloted clinics are collected for future analysis. Preliminary analysis of the total service utilization trend indicates a significant dip in the number of health services used by the population in the panic phase, 20 days following the pandemic's first and second waves. Still, the trend normalized after the panic phase and returned to an average after the panic phase. We learned that providing effective risk communication materials and training to primary healthcare workers improves our response to the pandemic.</p>