



A New World, a New Way to Work

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In-person participants joined trainers and other participants virtually in Bugisu Region, Uganda.

COVID-19 changed the world. Movement had to be limited to control spread of the virus. Organizations were forced to find savings as spending slowed and incomes waned. Cooperative Health Insurance became an important solution in Uganda where people could avoid catastrophic and unexpected health expenditures by prepaying a small amount directly to care providers in exchange for the care they need when they need it. HealthPartners trains care providers and helps cooperatives learn how to develop partnerships to offer and join affordable, health insurance. While COVID-19 made health insurance more important than ever, training new care providers and helping cooperatives connect with them to protect their members and increase resilience became even more challenging.

Like most cooperatives, from the first days of the pandemic, HealthPartners began adapting the way we do our work. We piloted telephone conferencing for training, scaled up communication through text messages, and provided training for staff and stakeholders on how to prepare for and lead Zoom meetings. We joined the Overseas Cooperative Development Organization to learn how to get the most out of WhatsApp communication and more. Every day we continue to learn new strategies to engage and support partners to advance their goals working together by staying apart.





At first, partners were reluctant to try new technology. We tried to keep virtual engagements as brief as possible. Active engagement is difficult to manage in person and far more difficult virtually. We led several two-way Risk Communication and Community Engagement surveys to learn cooperative needs and challenges while identifying opportunities, strategies and channels of communication that work for different partners.

An exciting breakthrough came in November 2020. The Provider Relations department conducted training for 36 health care providers from different regions in Uganda. Four twoday sessions were held with some participants joining in person following strict standard operating procedures to maintain social distance and safe interactions while those who had consistent internet connectivity zoomed in safely without travel. Sessions were organized to include several breaks and lunch. Participants spent time practicing new skills, sharing work with each other, discussing new ideas and how they might be applied in their organizations as part of the learning process.

Impossible you say? That is what we thought, until we tried it. Despite challenges like power and internet interruptions, proper planning and team work enabled us to achieve final practice results on par with results we've seen from in-person training. Participants are scheduled to report back two weeks after training to share progress they've made in preparing to offer health insurance at their health facility. So far, four of the first eight trained, reported back within one week.

While COVID-19 has been stressful, forcing people to find new ways of doing work, the unanticipated upside we found from working virtually is that time we used to spend traveling to providers is now spent on the telephone answering their questions and helping them to plan next steps. We've been able to work with more partners in less time and the lessons we continue to learn are helping us adapt to see more measureable outcomes from each investment.

How did we do it? Trainers were *trained to use Zoom* and they practiced leading several sessions before attempting a longer, two-day training. Facilitators in each region were trained to use Zoom and provided opportunities to practice. Facilitators were trained on standard operating procedures for social distancing to enable them to set up rooms and manage interactions safely.

Testing equipment. Information technology specialists were hired to work with facilitators to test connectivity in local hotel conference rooms a week ahead of time so they were prepared to ensure connectivity and to help participants trouble shoot when needed in each location.

Each of the four participant groups filled pre-session work to enable trainers to keep sessions shorter, spending time where practice was most needed. Participants attended training in their region of operation with several members joining virtually from their homes or health facilities. *Practice guides and handouts used during the sessions, were sent to participants ahead of time* in addition to being available on the day of training. This increased engagement and made it possible to screen share results for all participants during the sessions.

Our hearts and prayers go out to people all over the world who are struggling to find new ways to meet their needs. Cooperators have a significant advantage when it comes to our rapidly changing world. When we work together, we can find new ways to work and new ways to meet the needs of our members.







Participants in Gulu listening in to virtual trainers while following on a projector







About Nsiime Sarah Nagawa:



Ms. Nsiime Sarah is a team player who believes every other team member is equally important and there is no limit to what you can accomplish when work is about helping people help themselves. Working in the health care sector of Uganda is an opportunity that still gives me incredible lessons. It inspires me to be the change I want to see in the world.