Health workers are at the centre of what we do. Without them there is no health care.

Moments like these remind us of why we as a charity exist: to work in partnership to build stronger, more resilient, health systems around the world which are equipped to combat pandemics like COVID-19. This pandemic strengthens our conviction and determination to redouble our efforts.

It is becoming increasingly clear that we are only as strong as our weakest health system, and whilst those with the strongest health systems battle to overcome the effects of the pandemic, it is fragile health systems that will be hit the hardest. The devastating effects COVID-19 is having in the UK alone is a stark reminder of how this pandemic is bringing health systems around the world to their knees in a matter of weeks, even those who are seen to be the world’s most established. In countries where we have been working for over 30 years, the effects of this pandemic will be devastating. With little or no access to treatments, vaccines or sterile and safe hospitals and with populations without pre-existing immunity, the health challenges even before the pandemic strikes are countless.

With all THET staff now working from home, Health Partnership activities curtailed and many of our Trustees, Honorary Advisors and partners working on the frontlines to provide care to patients, we are focused on working to support our global community wherever we can.

We believe that Health Partnerships are well placed to provide the grass-roots support that clinicians in low- and middle-income countries (LMICs) will need.

We often describe Health Partnerships as a model for improving health through co-development between institutions from different countries, but they are so much more than that. At the heart of Health Partnerships are individuals united through a common purpose and a shared commitment to overcoming challenges that threaten health and wellbeing across the world. Over the lifetime of a partnership – which often last for many years – individuals from the UK and LMICs across Africa and Asia build connections and learn lessons through shared experiences that catalyse our progress towards achieving health for all. In the 30 years since THET was founded, we have witnessed thousands of individuals support one another to build stronger, more resilient, health systems around the world. The power of solidarity within and across borders is well-known to the Health Partnership community, not just during extraordinary times such as those the world is currently navigating, but always.

We stand with those on the frontlines of the fight against COVID-19. Will you stand with us?

EVERYONE EVERYWHERE HAS THE RIGHT TO QUALITY HEALTH CARE | HEALTH WORKERS MATTER | HEALTH FOR ALL
“As the world struggles to deal with the Coronavirus crisis, nurses and midwives in Somaliland are even more vulnerable as they have no resources, expertise, or experience on how to deal with an emergency of this magnitude. They have no masks, gloves, disinfectants, sanitizers, and have never even seen a respirator. All they have is the power of their hearts.” - Edna Adan Ismail, Founder, Edna Adan Hospital and University

“Our response to COVID-19, which involves local teams being supported remotely, has only been possible through the long-term development of Health Partnerships. We look forward, as soon as possible, to returning to a full programme of work and working together with others at this challenging time for us all.” - Marcus Wootton, Programme Manager, Royal College of Paediatrics and Child Health

“In this time of crisis when health services around the world are under unprecedented pressure, due to COVID-19, nurses and midwives can be relied upon to rise to the challenge. They put concerns about their own health aside and, with enthusiasm and compassion, tirelessly work with phenomenal colleagues to focus on caring for the sick and anxious. I am so proud of my profession.” - Judith Ellis, Chair of Trustees, THET

LIVES ON THE LINE: THE HEALTH WORKER ACTION FUND

Keeping health workers safe on the frontlines.

In recognition of the vulnerability of health workers to COVID-19, from both a physical and mental health perspective, THET has set up the Health Worker Action Fund. The key objective of the Fund will be to protect the health and well-being of as many LMIC frontline health workers as possible. Working to care for those on the frontlines, providing them with the training, equipment and support they need.

We believe that Health Partnerships are in a unique position to offer support at this time, drawing on strong ties of trust, collegiality and professional respect that sit at the heart of Health Partnerships developed over many years. The Fund will focus on countries where THET has an organisational presence to enable us to ensure coordination of efforts: Ethiopia, Myanmar, Tanzania, Somalia/Somaliland, Uganda and Zambia.

YOUR DONATION CAN PROVIDE...

1. LIFE SAVING EQUIPMENT, MATERIALS AND PROTECTION.

2. REMOTE TRAINING, MENTORSHIP AND ADVICE.

3. PSYCHOLOGICAL SUPPORT AND SOLIDARITY.

Kings College London and THET have been working in partnership with the Somaliland Ministry of Health and Development for over twenty years. Now focused on the supply of PPE following requests from the Ministry, the team has already begun to procure thermometers, masks and gloves and is working to distribute these to facilities and hospitals as quickly as possible.

THET is committed to directing 100% of any donations received in the next three months to our Health Worker Action Fund. If you would like to support this fund, please donate through one of the below channels.* Thank you for your generosity.

*At this time, we kindly ask you to turn to online donations where possible, as this will enable us to distribute funds to those in need most promptly.
Here in Myanmar, the first two positive cases were found only two weeks ago. As of 6th April, we have now reached 21 confirmed cases, and many hundreds of people are in community quarantine facilities under strict management by the Ministry of Health and Sports (MoHS). Almost all confirmed cases either came back from countries with high COVID-19 prevalence or had an exposure to those who came back from abroad. Myanmar faces an additional challenge at this time of year: Burmese New Year or Thingyan – a ten-day holiday period for the country, when people usually travel both within and back to Myanmar to celebrate with their families. In the past weeks, the country has been struggling to manage the return of almost 300,000 migrant workers from Thailand and beyond.

The government has responded to this pandemic proactively by providing extensive public education, using different media, on the importance of hand washing, social distancing and encouraging those who have come back from abroad to stay at home upon their return. In response to these measures, Yangon has seen more than a 90% reduction in traffic on the road in the last two weeks.

The MoHS is preparing to stock up on essential personal protective equipment (PPE) for its staff as well as additional ventilators and supplies of oxygen. The National Health Laboratory is the one and only COVID-19 testing centre and all tests are carried out manually, dramatically limiting the number of tests that can be offered each day. To date, only those who have symptoms or who are at quarantine facilities are offered testing and a total of around 1,500 tests have been carried out during the last six weeks.

Beyond these measures, the government are keen to avoid a situation of total lockdown, recognising the economic hardship this would bring on the poorest groups of our population. Myanmar, after all, does not have a social security system to support such populations. With the introduction of expected long-term restrictions on movement and social enterprises to stop the viral spread and having very restricted national reserves, Myanmar’s economy is bound to suffer and hence, the government will need innovative strategies and international support to outlast this.

With a very limited number of doctors and nurses per 100,000 patients, the pandemic will stretch all healthcare professionals in Myanmar to a level not witnessed before. In preparation for this, volunteers, doctors and nurses who do not work under the MoHS have been invited to join the workforce. Against all odds, it is overwhelming to see the heightened spirits of junior doctors and nurses working at the ground level. The MoHS must do all it can to protect our rare jewels of human resources by providing effective supplies and management to deliver the care that the people of Myanmar deserve.

Individuals and local NGOs have also joined hands by forming small groups in different townships, who go around each street with loudspeakers to enhance the MoHS’ COVID-19 education efforts. The religious leaders have offered their spacious meditation centres to be used as community quarantine facilities, providing accommodation for 4,000 people in Yangon alone. Volunteer doctors and nurses manage these facilities and catering is donated by pro-bono associations such as ‘I Love Yangon’.

The death rate is escalating each day, testing our stamina from all perspectives. As Myanmar prepares its best to face the peak of the virus, all I can say for now is we are united both nationally and internationally. With this unbreakable unity that we hold, I am convinced that the world will survive this historic battle and come out even stronger than ever before with many lessons learnt through this together.

Thank you,

Dr Thinn Thinn Hlaing,
Faces on the frontlines.

1. UGANDA
   - Grace, Midwife

2. SOMALILAND
   - Amina, Community Health Trainer

3. TANZANIA
   - Samwel, Community Health Worker

4. MYANMAR
   - Nurses, Yangon General Hospital

5. ETHIOPIA
   - Lamessa, GP & Quality Officer

6. ZAMBIA
   - Anaesthetists, University Teaching Hospital, Lusaka

Photographs © THET
The health workers featured in this appeal have given us their consent to use their image.