Bringing Health to Local Communities
Strategies from global health

G2L
GLOBAL TO LOCAL

*This overview summarizes some of the most effective interventions from global health and their potential applications to improve health in low-resourced US populations. The full report can be found at **globaltolocal.org/resources***
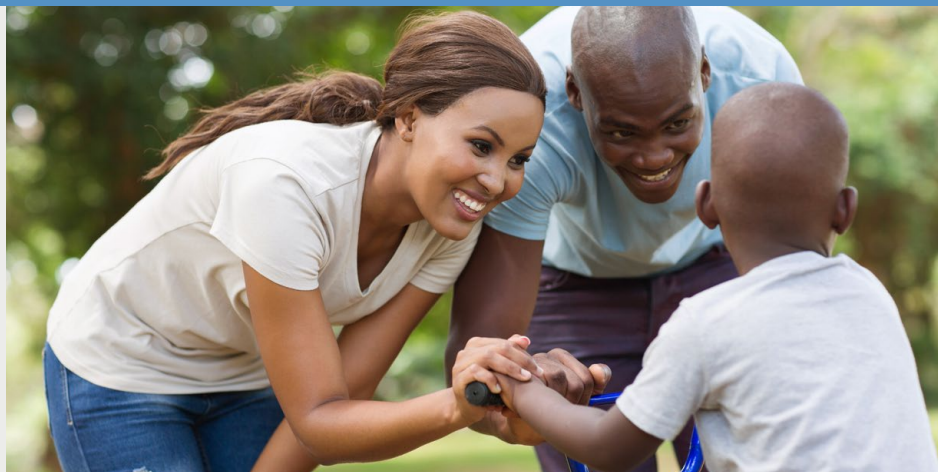
The Landscape Assessment

Across the United States, people face significant disparities in their access to and utilization of health services, leading to unequal health. Many of the root causes of these issues are related to health systems challenges: a fragmented health care system, inability to afford health care, and a mismatch between the health system and the needs of diverse or hard-to-reach populations. But these health systems and service-related factors are not the only drivers of poor health. "Social determinants of health" are just as important: a person's income and wealth; education; social and community context; and neighborhood and environment.

The cities of SeaTac and Tukwila, Washington, are within one of the wealthiest regions in the country. Yet SeaTac and Tukwila have twice as many people living below the federal poverty line and higher age-adjusted mortality rates than the national average. Solving health issues in these cities requires combining proven best practices with a dose of innovation. Since 2010, Global to Local, a SeaTac-based organization, has been identifying best practices from global health and implementing them in communities at home.

Why global health?

"Global health" refers to the study and practice of health in the global context, typically with a focus on low-income countries. With the expansion of international aid, there is a robust body of research on "what works" to improve the health of populations in settings where there are often not enough resources, where health systems are often not as integrated and effective as they could be, and where disparities related to income and empowerment pose important barriers. Many US communities face these same challenges.


Photo credit: PATH

How were the interventions chosen?

Interventions in this review were selected based on their (1) effectiveness and cost-effectiveness; (2) ability to have the greatest impact on the most disadvantaged populations (i.e., equity); (3) ability to address social determinants of health; and (4) transferability and feasibility in low-resource domestic settings. This resulted in a list of 11 interventions, which are summarized throughout this report.

Interventions in this review address multiple levels and determinants of health

Figure 1 shows how multiple levels influence an individual's health. It is well established that health is impacted more by the policy level and by social, economic, and environmental influences (i.e., "social determinants of health") than by individual or health systems factors. While many of the interventions in this review are centered on health providers and health care systems, we attempted to ensure that the interventions cross all levels and inputs of good health. The implementation of cross-cutting interventions is made possible by the presence of Global to Local (G2L) who acts as a bridge between clients, the community, health and social services, and the wider health system.

Figure 1. Levels and determinants of health

- Individual & Family
- Local Health & Care Services
- Health System
- Community
- Policies and Institutions
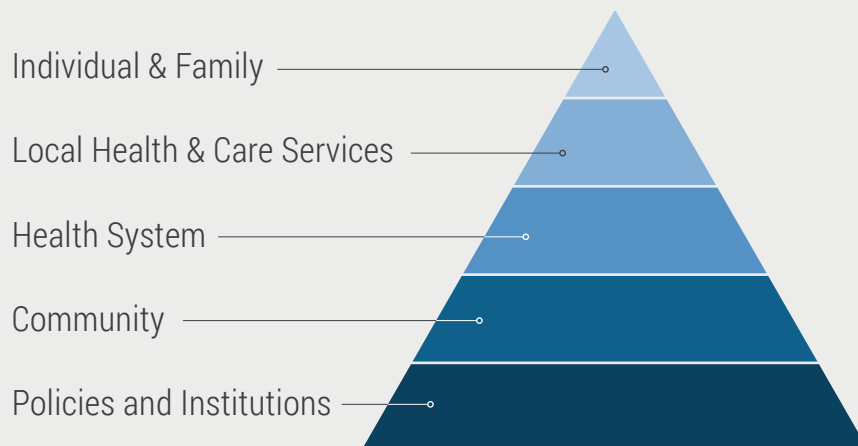
The Interventions: A Summary

We explored 11 effective and innovative global health interventions with potential transferability to low-resource domestic settings (Table 1).

Table 1. Global health interventions that can apply to domestic low-resource settings

Note: G2L= Global to Local; LMIC=low- and middle-income countries; NCDs=noncommunicable diseases.

Intervention	Level	Outcomes	Effective?	Transferable?	G2L Lessons Learned
1. Community health workers (CHWs)		• Promote and improve healthy behaviors • Increase access to and coverage of preventive and curative services • Reduce costs • Reduce inequities and disparities	Highly effective	Highly transferable	CHWs can be highly effective for providing low-cost, culturally specific support in a community setting.
2. Mobile health (mHealth)		• Increase treatment uptake and adherence • Strengthen health systems • Improve health service efficiency • Reduce barriers to care delivery and access	Potential for high effectiveness	Highly transferable	mHealth has the potential to provide high-quality care for lower cost, while reducing common barriers to access.

Intervention	Level	Outcomes	Effective?	Transferable?	G2L Lessons Learned
3. Social media and mass media health campaigns		• Promote and improve healthy behaviors • Increase access to and coverage of preventive and curative services • Reduce costs • Reduce inequities and disparities	Effectiveness depends on targeting; often not cost-effective	Transferable	Mass media campaigns are slowly transitioning towards social media campaigns in LMIC; with high cost and unclear causal mechanisms it remains unclear the amount of impact this intervention has on health outcomes.
4. Promote community asset building through community-based organizations		• Increase access and coverage to preventive and curative services • Reduce health inequalities and disparities • Coordinate community-based research production and use	Mixed evidence of effectiveness	Transferable with adaptations	Asset-based community development can promote well-being of communities through skills and confidence building, increasing community self-efficacy (van de Venter 2016).
5. Improving economic development and wealth		• Reduce health disparities • Improve health outcomes • Improve use of health services	Effective	Transferable	Improving access to income and income-generating opportunities can free up household wealth to invest in nutrition and health care, improving household well-being and health outcomes.
6. Linking primary care and public health		• Improve access to population and public health services • Increase access to social services • Reduce health disparities • Strengthen health systems	Effective	Transferability depends on local systems	Linking primary care with public health is effective at improving access and quality of services while reducing health disparities. However, depending on the health system, this can be a costly undertaking.
7. Community mobilization & community leadership development		• Reduce health disparities • Increase efficiency and cost-effectiveness of programs	Mixed evidence of effectiveness	Transferable	Community engagement as part of a multifaceted approach to health promotion may have positive impacts on health outcomes, reduced incidence and risk of NCDs, and has the potential to be cost-effective. Community engagement and empowerment is a critical component to broader health interventions.
8. Gender integration		• Improve health • Improve effectiveness of health providers • Strengthen health systems • Improve gender equality	Unknown effectiveness	Transferability depends on local context	The impact of these interventions depends on the specific outcome or behavior the intervention is aiming to address. One of the main limitations to gender and women's empowerment approaches is that they are vulnerable to whoever holds the power in those cultures and communities.
9. Coordinated and patient-centered primary care		• Improve the quality of health delivery • Improve quality of life and targeted health outcomes • Improve population health and reduce inequities • Increase efficiency and cost-effectiveness of health systems	Unknown effectiveness	Transferability depends on structure of current health system	Weak health systems serve as an impediment to improving health outcomes for individuals and households in both developed and developing countries. Implementing global health best practices and interventions through a cohesive and collaborative way will ultimately lead to enhanced institutional capacity and stronger health delivery systems.

Intervention	Level	Outcomes	Effective?	Transferable?	G2L Lessons Learned
10. Public-private partnerships (PPPs)		• Reduce health disparities • Increase efficiency and cost-effectiveness of services • Improve quality • Improve access to health services	Effectiveness depends on individual context	Transferable	PPPs are specific to context, culture, and their specific use, but have the potential to increase health system efficiencies, reduce barriers to access, and improve quality of services.
11. Relicensing foreign medical professionals		• Guide foreign medical professionals into productive practice in the US • Improve diversity and cultural approach of health care delivery • Strengthen health systems through expanded perspectives	Unknown effectiveness	Transferable within the US, however it is dependent on state specific laws, regulation, and licensing	CBOs can act as a navigator for foreign-trained medical professionals to become retrained and licensed within their states.

Lessons Learned

Throughout our research, several themes emerged as common factors and barriers to the success of established global health interventions. Interventions that demonstrated success often included the community in the intervention from the beginning, securing local buy-in and support. Communities tend to be involved in the needs assessments and program design and implementation. Incorporating a social-determinants approach to global health work has also demonstrated success, as seen in Section 5: Linking Economic Development Interventions to Improve Health Outcomes. Cultural sensitivity and appropriateness were also cited as critical considerations impacting a program's success. When possible, successful interventions could form partnerships to collect and share resources to achieve a common goal. It is critical that programs use SMART objectives (Specific; Measurable; Achievable; Realistic; and Time-bound) and collect and use data to inform program processes.

Barriers to success often center on lack of funding, political will, information sharing, and capacity. Lack of funding on the part of governments, donors, and organizations can inhibit the success of programs. There is also a need for this funding to be sustained to ensure a smooth exit from the target population. Lack of political will on behalf of funders and governments can deter investment in areas in which communities and nongovernmental organizations (NGOs) have expressed interest. Just as leveraging and sharing resources can bring success to a program or intervention, the lack of cross-sector collaboration and information sharing can be barriers to the success of programs. Limited capacity and infrastructure was by far the most common theme. Health systems and health professionals often lack the administrative and operational capacity, as well as funding, to take on the extra work of a policy, program, or intervention. It is necessary to provide leadership development and capacity-building for a program to demonstrate success. Limited infrastructure in rural and remote areas can also present barriers, inhibiting physical and technological access to these areas. G2L and other domestic organizations can take these lessons learned and apply them to their own programs.

The full Landscape Assessment and related resources are available for download at ***www.globaltolocal.org***