



LIFENET INTERNATIONAL

TRANSFORMING HEALTHCARE ACROSS AFRICA



More than 40% of healthcare services on the African continent take place in faith-based facilities. LifeNet's goal is to end preventable deaths in Africa by equipping all such health facilities to deliver high-quality, sustainable and compassionate care.

The LifeNet Impact: Strengthening all six WHO Health System Building Blocks



Service Delivery:

On-site mentorship and quality scorecards

Health Workforce:

Clinical and management training

Information Systems:

Facility-level data use

Medical Products:

Access to trusted suppliers

Financing:

Business planning and revenue growth support

Leadership and Governance:

Partnerships with dioceses and Ministries of Health

14,700* Newborn Lives Saved at Birth

10.5 Million Patient Visits Annually

Scale Goals, Current → 2030

Reach:

Health Facilities: 426 → 859

Annual Patient Visits: 10.5M → 19.5M

Healthcare Workers: 7K → 14K

Deliveries: 195K → 400K

Impact:

Lives Saved at Birth: 5,800 → 10,000

63.3 DALYs Averted/Beneficiary*

8,071* Mothers' Lives Saved at Birth

Outcomes in Quality Care From

15%

Ability to save a woman's life through proper treatment of postpartum hemorrhage

To 97%

11%

Implementation of proper clinical handwashing practices to reduce infections

92%

8%

Ability to save a newborn's life through proper resuscitation practices

95%

Target Market: Faith-Based Health Facilities

Current Footprint: Uganda, Malawi, Burundi, eastern DRC, Kenya, Ghana, Burkina Faso

Addressable Market in Footprint: 1360 facilities

Current Saturation of Market: 31%

Saturation in 2030: 63%

Avg. Cost/Beneficiary, 2024: \$0.49 USD (cents)

Published Assessments

Duke University: LifeNet improves maternal and neonatal healthcare ([LINK](#)).

CommonGood Marketplace and

Embedding Impact: 63.3 DALYs averted/beneficiary ([LINK](#))

World Economic Forum: verified SROI ([LINK](#)).

*Lives Saved counted from January 2020. DALYs from CommonGood Marketplace and Embedding Impact's Certification Report (HERE)

LIFENET INTERNATIONAL OVERVIEW

With the right training and tools, every primary healthcare facility in sub-Saharan Africa can transform their community's healthcare and save more lives.

Who We Are

LifeNet International's mission is to transform health facilities across Africa, to provide quality, sustainable healthcare and save lives. LifeNet pursues its mission primarily through partnerships with existing faith-based healthcare facilities in sub-Saharan Africa.

Equipped and empowered local healthcare providers are the answer to Africa's devastating healthcare crises. LifeNet partners with 444+ existing healthcare facilities in six countries, building healthcare worker capacity and improving care for more than 10.5 million healthcare visits annually.

Countries: Burundi, DRC, Ghana, Kenya, Malawi, Uganda, Burkina Faso

Facility partners: 444+

Patient visits improved annually: 10,500,000+

Avg. cost per beneficiary: <\$1 (USD)

Lives in 2024: 5,800 at birth

Transforming
African Healthcare.
Saving Lives.



What We Do

LifeNet works with Ministries of Health, Christian Health Associations, and other key stakeholders to identify and partner with healthcare facilities demonstrating a capacity for improvement in facility sustainability and healthcare quality. Facilities selected to work with LifeNet receive the following interventions, which double the facility's quality of care and management practices in just one year.

MEDICAL TRAINING: Five modules of clinical care training in high-impact practices addressing leading causes of preventable death and disease, including MNCH, infection prevention, disease care, and more.

MANAGEMENT TRAINING: Four modules of training in financial, human resources, and administrative best practices addressing leading causes of insolvency and equipping facilities to operate sustainably.

DIGITAL TOOLS: Includes a Moodle-powered learning platform, a WhatsApp chatbot, digital peer learning groups, and more.

EQUIPMENT SUPPLY: LifeNet seeks out opportunities to collaborate with third party equipment donors to provide subsets of healthcare facilities with essential medical equipment and supplies.

MONITORING, EVALUATION, AND LEARNING: Ongoing, rigorous monitoring and evaluation alongside all interventions, ensuring long-term behavior change. Includes regular quality assurance visits that serve to measure and evaluate success in meeting all project objectives and goals.

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PROBLEM

Deadly Health Outcomes from Poor Quality Healthcare

Vulnerable communities in sub-Saharan Africa face some of the most dire healthcare realities in the world. The region leads the world in rates of child death, maternal death, HIV infections, and Malaria.

Local faith-based healthcare facilities are responding to these needs. Unfortunately, like all facilities in the region, healthcare providers often lack the basic knowledge and tools to provide quality care for patients. This lack of knowledge, tools, and resources has deadly consequences—nearly 1 million lives are lost every year in the region as a direct result of patients accessing poor-quality healthcare (*Lancet*).

SOLUTION

Equip Existing Local Healthcare Facilities

Equipped and empowered local healthcare providers are critical to addressing the healthcare crises in sub-Saharan Africa. Faith-based healthcare facilities exist on the front lines of care for some of the most vulnerable and underserved people in the region—an estimated 40% of all healthcare services in the region are provided through faith-based facilities. Strategically, these networks of facilities present an innovative and underutilized lever for impact on health outcomes in the region.

LifeNet’s program targets existing networks of faith-based healthcare facilities in sub-Saharan Africa, equipping facilities with a suite of high-impact interventions including clinical training, management training, equipment, digital learning tools, supportive supervision, and monitoring, evaluation, and learning (MEL) processes. This package of interventions has proven effective in dramatically improving the quality and sustainability of healthcare at faith-based facilities through measurable changes in health worker knowledge and clinical and financial practice. These changes lead to improved outcomes among patients—saving and improving lives.

Measuring Impact

LifeNet’s main performance measurement tool is the LifeNet Quality Scorecard. The Scorecard draws upon a variety of sources—including direct observation of clinical practices, facility and equipment checks, and interviews with patients and service providers—to evaluate clinical and management quality. Prior to the implementation of LifeNet interventions, M&E specialists measure and record a comprehensive baseline quality score. Specialists then re-administer the Quality Scorecard after each module of training.

To successfully pass a module of training, facilities must score at least 80% on the Quality Scorecard metrics associated with that module. A facility failing to score 80% or above will receive additional training until they successfully meet our minimum quality standards.

Key management quality indicators include:

reduced stockouts of essential medicines, one month of operational cash available, increase in revenue, and more.

Key healthcare quality indicators include:

hygiene and sanitation protocols followed, newborn babies resuscitated, postpartum hemorrhages successfully treated, and more.

RESULTS

Transformed Healthcare Saves Lives

LifeNet partners dramatically improve their quality of clinical care and financial sustainability. In practice, this means that healthcare workers are now able to properly prevent infections, resuscitate babies, diagnose and treat infectious and noncommunicable diseases, manage postpartum hemorrhage, and save lives. Below is a sample of some of the improvement results we see across LifeNet partners (these numbers represent average baseline/endline quality scores for all healthcare facilities that have completed training in each area).



Facility implementation of accurate and effective daily and monthly **accounting practices improved from 10% to 91%**



Facility ability to save a woman’s life through managing and **treating postpartum hemorrhage has improved from 15% to 96%**



Facility implementation of proper clinical hand washing protocols to **reduce infection and save lives improved from 11% to 92%**



Facility ability to save a newborn life at birth through **infant CPR improved from 8% to 94%**



Facility implementation of best practices in **pharmaceutical stock management improved from 12% to 84%**



31% average revenue growth for health facilities between 2021 and 2022



34% average increase in patient volumes 4 years after joining the LifeNet network



Meet A LifeNet Partner Facility:

Buwaaya Health Facility

Quality Care. Facility Sustainability.

Buwaaya Health Facility is a LifeNet partner healthcare facility located in a rural area of Mayuge District in Eastern Uganda. The facility serves a catchment area of 11,600 people and typically provides care for 6,200+ healthcare visits every year, including care for mothers and infants in 180 births.

When Buwaaya first partnered with LifeNet, facility quality scores were low and best practices for financial sustainability were virtually non-existent. LifeNet's package of training and tools is transforming Buwaaya into a facility that provides high-quality, sustainable care.

Below are just a few of Buwaaya's improvements documented through LifeNet's rigorous Quality Scorecard:

Before LifeNet: \$0 in the bank
After LifeNet:

2

months of **operational cash in the bank**

63%

improvement in **newborn care quality**

69%

improvement in **maternal care quality**

256%

improvement in **infection prevention clinical practices**

90x

improvement in **financial sustainability practices**

210%

improvement in **pediatric care quality**



After LifeNet training in infection prevention and compassionate care, healthcare worker Harriet (pictured above) was excited to share with LifeNet trainers that facility staff had decided to save money and cut down trees to create two doors for their labor ward and examination room.

"This was because of the training from LifeNet," Harriet said. She told LifeNet that patients have expressed gratitude for the doors that now provide them privacy, particularly while laboring and giving birth.



“The death of the previous accountant had left our finance office in a chaos: lost documents, no handover information, and a hospital in mourning! It was during this difficult time that I entered the scene, still fresh from college. My first two months in office were terrible. I did not know where to start from or what to do. The LifeNet team found me in that state of despair. LifeNet management training was perfect timing! The accounting tools that were shared at the training became my springboard. Then, there was a two-month period of coaching and supervision. Now, I have managed to create an accounting system; and am able to produce management reports. LifeNet has been so supportive. I am so grateful LifeNet partnered with us at the right time.”

RUTH GALLETA, ASSISTANT ACCOUNTANT AT NTONDA COMMUNITY HOSPITAL, MALAWI

Research-Validated Impact

LifeNet’s impact on maternal and neonatal healthcare was validated in a 15-month longitudinal study conducted by Duke University’s Evidence Lab at Duke Global Health Institute. The study was conducted in a subset of LifeNet partner facilities in Uganda and according to the researchers “provides evidence that the LifeNet clinical training intervention significantly improved maternal and neonatal healthcare quality.” Study results included the following improvements as a result of LifeNet’s work with healthcare facilities.

545%

increase in adherence to **hand washing protocols**

238%

increase in adherence to **sterile cord clamping after birth**

66%

decrease in **observed infant mortality**

LifeNet’s Experienced, High Capacity Leadership Team

LifeNet’s implementing leadership team is made up of local women and men with decades of experience in building management and clinical capacity in the faith-based healthcare sector in Africa.

NADÈGE KABAGENZI Burundi Country Director, holds a degree in business administration and has 9+ years of experience managing health-related projects, with an emphasis on business management.

GÉRARD NSHIMIRIMANA DRC Country Director, holds a Master’s degree in Health Economics and a certificate in health systems strengthening. He has worked with LifeNet since 2013 and has extensive experience in improving management practices in healthcare facilities.

IDRIS BUABENG, MPH Ghana Country Director, has 15 years of experience in health systems development, specializing in social and behavior change.

AXEL MANAGURE Malawi Country Director, has 11 years of experience in business administration and management. He has worked with LifeNet since 2014.

JANNET OPIO, MPH Uganda Country Director, has 17 years of experience in international development. In addition to her Master’s of Public Health she also holds a post-graduate diploma in management and training. Jannet also oversees LifeNet operations in Kenya.

EDWIN NYAKAN Kenya Country Director with deep experience in monitoring and evaluation, program management, business development, and stakeholder engagement.



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