FREQUENTLY ASKED QUESTIONS
JANUARY 2022
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WHAT IS SELF-CARE?

Self-care is defined by the World Health Organization (WHO) as “the ability of individuals, families and communities to promote, maintain health, prevent disease, and cope with illness with or without the support of a healthcare provider.”

Self-care does not replace the health system but is complementary and integral to it. Self-care equips people to more efficiently access the health system. Self-care has the potential to transform healthcare, especially for vulnerable populations who have historically been excluded from the healthcare system. When individuals become informed and active agents in their health, this leads to improved health outcomes —ultimately paving the way towards universal health coverage (UHC).

WHAT ARE THE CORE PRINCIPLES OF SELF-CARE?

The global self-care movement relies on the following building blocks for any self-care policy, program, or initiative:  

- Self-care includes three areas of care: self-management, self-testing, and self-awareness. Each of these areas of self-care offers people ways to put healthcare in their own hands.
- Expanding access to devices, diagnostics, drugs, and digital tools that support people to more effectively practice self-care.
- Promoting health and body literacy and healthy behaviors, including coordination and integration with the formal health system and what to expect from the health system.
- Strengthening individual agency and rights—enabling people to make and implement healthy decisions for themselves.
- Encouraging robust grassroots engagement, ensuring self-care interventions are people-centered, community-owned, and acceptable for individual contexts.
- Fostering strong linkages—such as information and support—with the health system and providers to effectively facilitate uptake and practice of self-care.
WHY DOES IT MATTER?

FOR INDIVIDUALS
Self-care leads to a more inclusive, equitable, and people-centered approach to optimizing the health of individuals. Self-care allows individuals to exercise greater autonomy, power, and control over their health.³

FOR HEALTH SYSTEMS
Health systems are stretched beyond capacity and millions of individuals are unable to access essential healthcare. Self-care puts more power in the hands of individuals to manage select health interventions safely and effectively, which allows health workers to focus on those with the most critical needs. Safe and effective self-care practices have the potential to improve the equity and efficiency of the health system by allowing each actor to maximize their contribution.⁴ Self-care offers a path for health systems to achieve UHC.

FOR UHC
A growing number of self-care interventions can increase access to quality healthcare at the primary healthcare level if they are made available and affordable. This is done by serving as entry points into the health system.

FOR GLOBAL DEVELOPMENT
Self-care is critical to achieving global development objectives. Self-care improves access to health and well-being for all (Sustainable Development Goal 3, SDG3), advances gender equality by enabling women and girls to have more power over their bodies and health (SDG5), and reduces inequalities by making care more accessible to those who have historically faced stigma and discrimination or been excluded by the healthcare system (SDG10). It also helps expand access to family planning (Family Planning 2030); improves diagnosis and treatment of people living with HIV (UN 95-95-95); and helps the WHO meet its “triple billion” initiative at the heart of its five-year strategic plan.⁵

WHY IS SELF-CARE ESSENTIAL FOR ACHIEVING UHC?
The world has committed to achieving UHC by 2030. But meeting that goal will be challenging. Right now, 3.8 billion people—half the world’s population—do not have access to essential health services.⁶ 100 million people fall into extreme poverty each year due to health expenses.⁷ And, we will need 18 million additional health workers by 2030 to meet global health demands.⁸

Scaling up self-care is one practical way to reduce the stress on health systems. Widespread adoption of appropriate self-care practices can help alleviate pressure on healthcare workers and free them up for the most critical tasks. And, implementation of self-care has the potential to deliver safe, effective, high-impact, and affordable care to marginalized and vulnerable populations.

There is a critical opportunity to work towards UHC by strengthening the policy and regulatory environment for self-care interventions and ensuring it is included as an essential part of UHC policies, programming, services, and funding.
WHAT IS THE SELF-CARE TRAILBLAZER GROUP?

The Self-Care Trailblazer Group (SCTG) is a global coalition dedicated to expanding the safe and effective practice of self-care so that individuals can better manage their own health, health outcomes are improved, and health systems are better equipped to achieve UHC.

The SCTG brings together partners from all sectors to advance the conversation in three key areas:

- **Evidence & Learning**: Develops, and promotes analysis frameworks, and guidance to fill gaps in information needed to accelerate the policy and practice of self-care.
- **Global Advocacy & Communications**: Enhances support for and mitigates opposition to self-care by informing, engaging, and increasing partnerships with global and regional bodies.
- **National Advocacy & Accountability**: Provides opportunities for members to share advocacy and accountability practices and lessons learned to advance self-care at national and subnational levels.

WHAT IS THE WHO GUIDELINE ON SELF-CARE INTERVENTIONS FOR HEALTH AND WELL-BEING?

The WHO recognizes the need for and benefits of self-care. In 2019, WHO released the *first Consolidated Guideline on Self-Care*, promoting autonomy and agency as a vital component in safeguarding public health. This guideline laid a foundation for advancing self-care with a focus on vulnerable populations and areas with limited capacity and resources.

In 2021, the WHO expanded the guideline to incorporate new evidence and research. The guideline has a broadened scope, which includes recommendations for self-care interventions in antenatal, intrapartum and postnatal care, and noncommunicable diseases.

The updated version also includes new and adapted recommendations and good practice statements on implementation and programmatic considerations in addressing human rights, gender equality and equity considerations, and digital health interventions. The guidelines are a living document and will be updated regularly to incorporate new research.

The WHO Guideline calls for adoption of national policies—and builds the evidence base—to usher in this transformative era in healthcare and pave the road to UHC.
WHY HAS THE FOCUS ON SRHR SHIFTED TO UHC?

The SCTG was established in 2018 to support governments in institutionalizing self-care in sexual and reproductive health and rights (SRHR). SRHR are deeply personal topics that often are marred by social, cultural, and legal barriers to accessing support or services. **Self-care can improve autonomy, awareness, and decision-making in SRHR when made accessible and affordable.** Since then, self-care has advanced as a concept, practice, policy, and—particularly during the time of COVID-19—a necessity to meet the health needs of people across the globe. The SCTG is expanding beyond its initial focus on SRHR to other health areas in efforts to achieve UHC. This also is an opportunity to align with the changes in the new version of the WHO guidelines released in 2021, which also expanded beyond SRHR. The SCTG will engage with other global health movements to increase the power and relevance of self-care around the globe.

IS SELF-CARE FOR SRHR JUST CODE FOR ADVOCATING FOR SELF-ADMINISTRATION OF MEDICAL ABORTIONS?

The self-care movement can systematically contribute to health impact at all levels of the health system, not just SRHR. The practice of self-care leads to a more inclusive, equitable, and people-centered approach to optimizing health and well-being across the globe in an effort to achieve UHC. This encompasses the full range of SRHR services that can be safely administered through self-care, which includes safe medical/chemical abortion. **This movement is about championing self-care approaches and essential health services to support a health system that creates equitable, sustainable, and affordable access to care.** In the same way primary care isn’t about any one intervention, the same is true for self-care.
SELF-CARE IS NOT A NEW CONCEPT — WHY IS THERE INCREASED INTEREST AND ATTENTION TO SELF-CARE NOW?

That’s right. Self-care is not new. For millennia people have been taking measures to prevent disease, promote health, and cope with illness and disability with or without the support of a healthcare provider. But now is the time to invest more in self-care for two reasons.

First, self-care has the potential to alleviate the enormous strain that the health system is under today. Equipping people to meet their health needs through self-care is a key part of any successful strategy to weather the COVID-19 pandemic by reducing the strain on health systems. Expanding self-care offers the chance to go beyond reacting to transform the status quo towards a more sustainable and effective health system for all.

Second, while self-care has existed for ages, a growing understanding of the importance of self-care offers the opportunity for even more people to live a healthy life. There has been a proliferation of new technologies, approaches, and health literacy. This is transforming the way people interact with the health system and shows the untapped potential for people to take charge of their own health in ways never before possible. As a result, the WHO published the Consolidated Guideline on Self-Care and countries increasingly recognize that self-care can be a powerful tool in achieving UHC by 2030.

AREN’T WE SHIFTING THE RESPONSIBILITY AND BURDEN OF CARE FROM THE HEALTH SYSTEM TO THE INDIVIDUAL BY DRIVING THE SELF-CARE AGENDA FORWARD? WHERE DOES ACCOUNTABILITY LIE?

People already manage, protect, and promote their own health. Self-care interventions have the potential to increase choice and enable consumers to make informed decisions regarding their healthcare. Self-care is neither a replacement for quality primary care, nor a shortcut to UHC, but rather an integral and complementary component of overall health systems. An essential part of self-care is linking clients with the health system for follow-up and referral. This approach equips people to more appropriately access the health system and is good clinical practice by health workers in supporting and counseling clients.

Health workers already promote self-care with clients. With a deliberate, coordinated approach from the government, we can make their efforts safer and more effective. However, it’s important that as countries adopt self-care tools and approaches the costs aren’t shifted to individuals. Ultimately, governments are responsible for creating the enabling environments needed to support and uphold an individual’s right to quality, safe, and affordable healthcare.

The products, tools, and providers’ time does come with a cost and those costs need to be included in national health budgets, so they are not passed on to clients or health workers. Integrating self-care interventions at the policy and regulatory level adds value and makes strong economic sense for health systems.
People are discovering new ways to engage in self-care with the expansion of mobile phones, smartphone applications, internet access and artificial intelligence. Digital platforms facilitate and promote self-care that provide privacy for individuals who may otherwise be subjected to stigma and discrimination when seeking information, care, and services in the formal healthcare system. Ensuring the quality and standards of digital tools for promoting self-care is directly tied to human rights and safety. The user’s satisfaction, choice, and perceptions of quality care must also be taken into consideration in the design.

The WHO recently launched the first ever global guidelines on digital health and the Self-Care Trailblazer Group facilitated the development of a Digital Self-Care Framework highlighting the considerations needed to inform digital health policy and implementation in low- and middle-income countries. The digital self-care framework is intended to help partners integrate self-care interventions with strong links to healthcare services with qualified and trained professionals. It provides a checklist for design, implementation, and evaluation to support this process and ensure the quality and safety of digital self-care interventions.

With thoughtful design and investments in increasing health literacy, as well as the wide availability and promotion of trusted sources of self-care information, the threat of misinformation can be stymied.
HOW CAN SELF-CARE BE MADE MORE ACCESSIBLE WHEN PRICES OF DRUGS AND DIAGNOSTICS REMAIN HIGH?

Ensuring people are able to access drugs and diagnostics to self-manage and self-test is central to the self-care movement. We must ensure that self-care interventions have robust funding and strong government support to realize self-care’s potential to improve individual health and make healthcare more sustainable and equitable. That is why we are taking a holistic approach to ensure new diagnostics, devices, drugs, and digital health are included as an essential part of UHC policies, programming, funding, and services and made affordable and accessible.

WHY ARE WE DRIVING THIS AGENDA FORWARD WITHOUT PROPER RESEARCH WHEN THERE ARE SOME GAPS IN THE EVIDENCE-BASE?

Individuals around the world are effectively using self-care today and emerging evidence suggests there is tremendous potential in the power of self-care, especially for vulnerable populations. We need to continue to elevate the self-care agenda to help individuals access self-care measures consistently, safely, and effectively.

The WHO continues to update the Consolidated Guideline on Self-Care to ensure the newest and best research is integrated into the guidelines and that they are current and are evidence-based. The Guideline is regularly reviewed and updated through a broad consultative process with a range of partners and experts from diverse sectors. The Guideline Development Group considers the quality of evidence on health outcomes of self-care interventions, the balance of benefits and harms, the acceptability of self-care interventions to health workers and the communities they serve, resources to enable self-care, financial costs to vulnerable populations, and equity.
HOW CAN HEALTH WORKERS PROMOTE SELF-CARE?

Counseling clients about evidence-based self-care approaches is good clinical practice by health workers. Health workers can champion self-care by promoting self-care approaches with their clients and talking about the importance of self-care with peers, communities, and professional networks.

Health workers serve as vital advocates within a country’s health system. It is important for ministries of health to know that health workers are not opposed to self-care. Health workers can join the self-care movement and advocate for the adoption of national self-care guidelines, policies that integrate self-care approaches into health programming, and call for increased funding from governments for self-care interventions.

Health workers can also advocate within their professional associations to include self-care in the training curriculum while in school and provide training to members so that health workers can be informed about the full range of self-care approaches available to their clients and how they can partner with their patients so they can access them.

HOW CAN I LEARN MORE AND STAY CONNECTED?

Visit our website, and Follow us on social media!

JOIN THE #SELFCARe4UHC MOVEMENT

selfcaretrailblazers.org     secretariat@selfcaretrailblazers.org

@SelfCare4UHC

1 These vulnerable populations include but are not limited to women, girls, transgender individuals, people living with disabilities, adolescents and young people, and other people who face barriers to accessing healthcare such as poor and rural populations and those living in humanitarian situations.


6 https://www.who.int/health-financing/topics/financial-protection/en/

7 https://www.who.int/health-topics/health-workforce#tab=tab_1

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