

PROGRAM ON HEALTH SYSTEMS DEVELOPMENT

Enhancing Frontline Capacity

Lessons from the Philippine Primary Care Studies Training Interventions for Primary Care Providers

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Executive Summary

In rural and remote communities of the Philippines, nurses, midwives, and barangay health workers serve on the frontline of healthcare delivery. Despite their critical role, many have limited access to continuing professional development, resulting in persistent knowledge gaps and inconsistent quality of care. Findings from the Philippine Primary Care Studies (PPCS) (Pascual et al. 2025) demonstrate that even brief, single-session training workshops can significantly improve short-term provider knowledge across key health domains. This policy brief highlights how scalable¹ training interventions, when supported by digital tools, can help bridge competency gaps and strengthen universal health care (UHC) implementation.

The Training Gap in Primary Care

Primary care delivery in the Philippines relies on a decentralized workforce. In rural and remote settings, this workforce is composed mainly of nurses, midwives, and barangay health workers (BHWs), and often serves as the first and only point of contact for health care. While they manage health concerns across all life stages, many lack access to structured training, limiting the quality and consistency of care.

Why the status quo is no longer effective

- Knowledge gaps persist, especially among BHWs who lack formal medical education
- Only a fraction of providers adhere to clinical practice guidelines (Diaz et al. 2024; Ramoso et al. 2024)
- Inconsistent training infrastructure across diverse settings contributes to inequitable quality of care

- Technological and logistical barriers prevent equitable access to continuing education

From Knowledge Gaps to Gains

The PPCS program piloted training workshops on essential intrapartum and newborn care (EINC), integrated management of childhood illnesses (IMCI), noncommunicable diseases (NCDs), and geriatrics in remote- and rural-based primary care providers from 2018 to 2021 (Pascual et al. 2025).

Key Outcomes:

- All provider groups showed significant improvements in post-training knowledge
- Midwives showed the greatest gains in EINC and geriatrics
- BHWs improved across all modules despite having the lowest baseline scores
- Use of UpToDate enhanced learning for digital-literate participants

¹ Able to be expanded or replicated across multiple settings with minimal additional resources

Policy Responses to Training Challenges

The PPCS pilot training workshops were both encouraging and insightful, revealing key barriers that hinder long-term improvements in primary care delivery across rural and remote areas. To support UHC implementation and strengthen the frontline health workforce, table 1 presents the following policy levers that can be adopted to institutionalize and scale up training innovations tailored to local needs and capacities.

Table 1. Challenges and Solutions to Strengthen the Frontline Workforce

Challenges	Proposed Solutions
Training was short-term.	Regular Modular Training: Establish a national schedule for recurring, needs-based training sessions on evolving community health priorities with continuing professional development units or equivalent recognition to incentivize participation and formally acknowledge healthcare workers' learning.
BHWs struggle with medical jargon and digital unfamiliarity.	Lay Language Materials: Translate clinical guidelines into Filipino and simplify technical language to enhance comprehension and promote practical application in daily tasks.
Face-to-face training is logistically and financially demanding.	Blended Learning Models: Combine asynchronous online materials, offline materials, live virtual sessions, and face-to-face sessions to provide flexible and accessible learning opportunities, tailored to healthcare providers' needs, local resource constraints, and varying levels of digital access and literacy.
Clinical decision support tools like UpToDate are Western-centric and not localized.	Local Adaptation of Digital Tools: Adapt and contextualize content from platforms like UpToDate and integrate resources from the Department of Health's Compendium of DOH-Approved Clinical Practice Guidelines to align with Filipino healthcare needs, local practices, and resource availability.

The Path Forward

Regular modular training, supported by blended learning strategies and localized digital resources, offers a scalable and sustainable model for building primary care capacity. This hybrid approach ensures that learning remains accessible, contextually relevant, and resilient to geographic and resource constraints.

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