

# The Challenges and Opportunities of Building Pro-poor Gender Equitable Health Systems in Fragile and Conflictaffected Contexts: Human Resources for Health

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 $Developing \ policies \cdot improving \ practices \cdot transforming \ systems$ 

## Setting the scene: FCAS, health systems and HR





# • 1.5 billion people

- Lagging in MDGs
- health systems research neglected
- HRH as a systems lens

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# HR and FCAS: what does the literature say?





# • Workforce supply

# • Workforce performance

# Human resource management systems

Maternal health in post-conflict settings: what are the human resource issues and how are they being addressed in Sierra Leone?



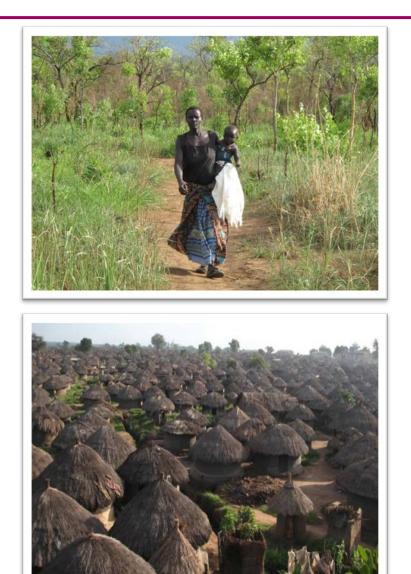


- Attracting, retaining and supporting health workers
- Building health worker skills and confidence
- Task shifting –TBAs to maternal health promoters

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# Selected HRH issues and NTDs in post conflict settings





- Leadership in establishing NTD programmes
- Withdrawal of NGOs at end of conflict
- The changing landscape of technology



Workforce supply Immediate vs longer term staffing mechanisms? Equitable distribution? Regularising ad hoc workforce?

## Workforce performance

What drives performance needed to support new health programmes? How can performance be sustained for volunteers in health programmes?

## Human resource management systems

Ways of integrating HR into health programme planning? How to support conflict-affected health workers?

## Acknowledgements







Institute for International Health & Development





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# The Gender & Health Group

Liverpool School of Tropical Medicine

Established in 1995



## College of Medicine and Allied Health Sciences, Sierra Leone





