



EMMANUEL D'HARCOURT, COURTESY OF PHOTOSHARE

A research programme to support health system development in Sierra Leone

In countries affected by conflict, health systems break down and emergency assistance provided by humanitarian organisations is often the main source of care. As recovery begins, so should the process of rebuilding health systems but we do not know enough about how effective different approaches are. Health systems research has tended to neglect post conflict contexts, because it may be more difficult to carry out studies in unstable environments and capacity is often weak. The ReBUILD Consortium has been created to address this challenge.

About us

The ReBUILD Consortium is a 6 year research partnership funded by the UK Department for International Development which began in February 2011. We are working in Cambodia, Sierra Leone, Uganda and Zimbabwe to explore how we can strengthen policy and practice related to health financing and staffing. In Sierra Leone research is being led by the College of Medicine and Allied Health Sciences. The purpose of this partnership is to generate robust, good quality evidence that responds to the challenges that policy makers are facing. We plan to engage with stakeholders from Government, academia and civil society throughout the research process to ensure that our work is relevant and that it is available and understood by those who need it.

Our partners

Biomedical Research and Training Institute, Zimbabwe
<http://www.brti.co.zw/>

Cambodia Development Resource Institute, Cambodia
<http://www.cdri.org.kh/>

Institute for International Health and Development, Queen Margaret University, Edinburgh
<http://www.qmu.ac.uk/iimd/>

International Health Group, Liverpool School of Tropical Medicine
<http://www.lstm.liverpool.ac.uk/research/academic-groups/international-health/health-systems-development>

Above

A community health worker in Sierra Leone counts the respiration of a young child to determine if she should receive antibiotics

Our focus

In Sierra Leone the National Health Sector Strategic Plan (NHSSP) identifies a number of problems in the health system that need to be rectified. These include; a significant shortfall in the number of human resources, poor distribution of health workers, difficult working conditions with weak management systems, a state of low morale and a high rate of attrition. As a result of this analysis the NHSSP proposes a range of new initiatives including putting in place a new strategic

framework, strengthening the human resources function in the Ministry of Health and Sanitation, strengthening training institutions and enhancing career paths and incentives for health workers. Our research will support the process of strengthening the role and position of human resources for health in Sierra Leone.

Sierra Leone has a particularly high share of out-of-pocket expenditure in relation to total health spending at around 70%. The NHSSP notes that approximately 50% of the population is excluded from health services by even modest fees. A package of free services for pregnant and lactating women and children under 5 was introduced by April 2010. This package is a Government initiative to address the financial burden placed on households because of payments for healthcare and commodities. Salary increases for health workers were also introduced and these have been supported with financing from donors. Our work aligns with this drive to improve access to healthcare. The aim of our work is to encourage the use of research evidence to reduce mortality and morbidity amongst the population, particularly in women and children.

One of the NHSSP's objectives is to promote research into human resources for health so that evidence is available to improve service provision. There is a commitment to create mechanisms to introduce research into human resource policy by 2013. The ReBUILD Consortium want to ensure that our research is used in policy and practice and so we welcome the opportunity to support this process.

Crucial questions

Understanding changes in health financing policy and poor households' expenditure on health

Our research will focus on understanding the impact of the free healthcare package, particularly in relation to the poorest households and gendered expenditure. Official and unofficial fees are a recognised problem in Sierra Leone and it is not clear how they will be affected by the free package policy. We will explore how poor households negotiate the plural health system in which private providers, non governmental organisations and herbalists are frequently accessed.

“ For many years, many, many pregnant women, breastfeeding mothers, and children under 5 have suffered and died because they simply could not pay fees for consultations, drugs and other services. Today we are taking the biggest step ever to end this unenviable position.”

President Ernest Bai Koroma, speaking at the launch of the free healthcare initiative

Exploring the development of health worker policy

We will research the effects of the pay increases provided to health workers to better understand how we can create incentive environments that support access to rational and equitable health services. This is particularly important in the light of proposed results and performance-based incentives which will shortly be introduced. Another area of interest is innovation in the contracting out of services and the relationship between Government and the non governmental sector.

Key policies

Our work is aligned with:

The National Health Sector Strategic Plan (2010-2015) which guides health system strategy. Among its priorities are health workforce development and management and strengthening of health care financing.

CONTACT OUR RESEARCH TEAM

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