Preparing for future shocks: Building resilient health systems

Bob Emrey, USAID

Jodi Charles, USAID

Temitayo Ifafore, USAID

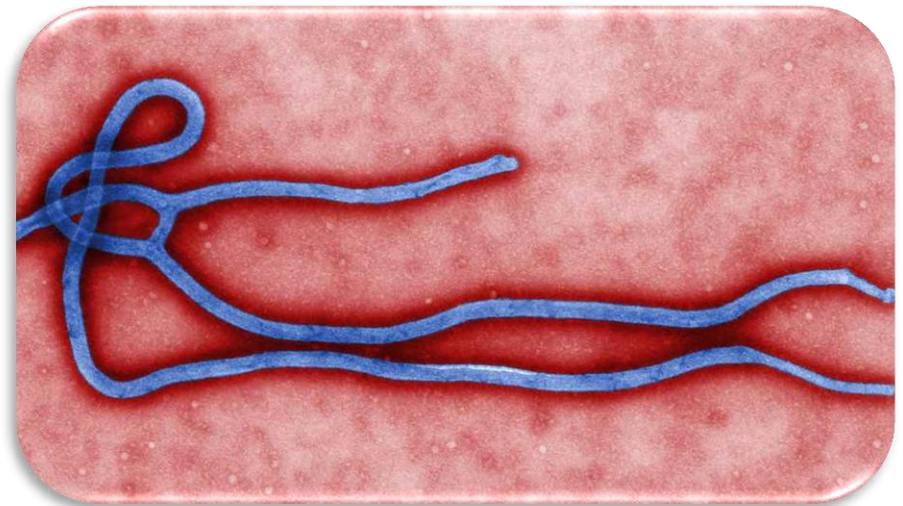Kate Greene, Health Finance & Governance Project

Global Health Mini-University, March 4, 2016

- What are resilient health systems?

- Features of resilient health systems

- Country case study exercise (small groups)

- Case study commentary and Q&A

Photo Credit: Glaxo Smith Kline

What is a Resilient Health System?

- Many disciplines have resiliency frameworks, including engineering and psychology

- One example: Rockefeller Foundation's City Resilience Framework (2014)

- Ebola outbreak spurred thinking about resilience and health systems (Kruk 2015)

- Health systems resilience is an evolving framework that needs further testing and research

What are resilient health systems?

"Capacity of health actors, institutions, and populations to:

- *prepare for and effectively respond* to crises;
- *maintain core functions* when a crisis hits; and,
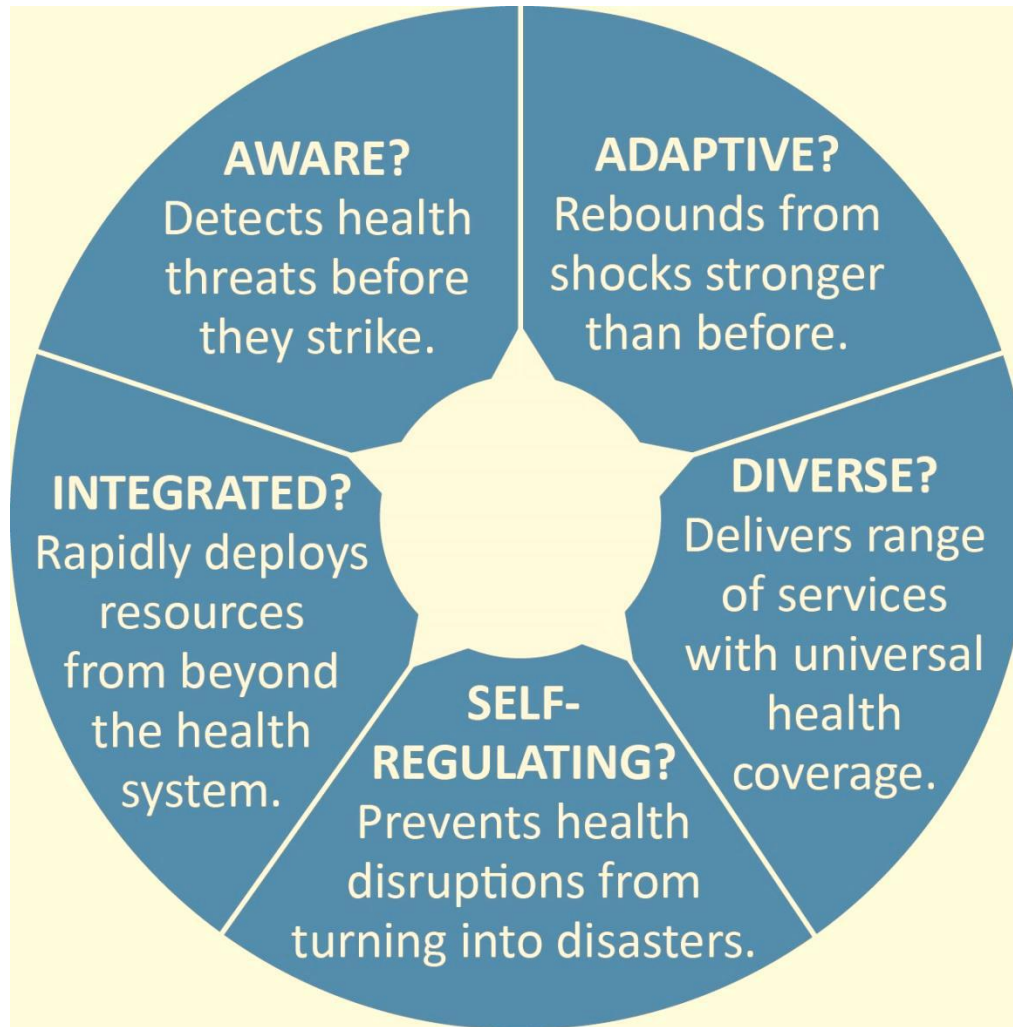- informed by lessons during the crisis, *reorganise if conditions require it.*"

--Kruk, et al., *Lancet*, 2015, 385: 1910-12

Photo Credit: NBC News

Credit: Rockefeller Foundation

Before a crisis strikes:

- Plan roles for the global health system
- Make laws and policies for response & accountability
- Develop a strong and committed health workforce
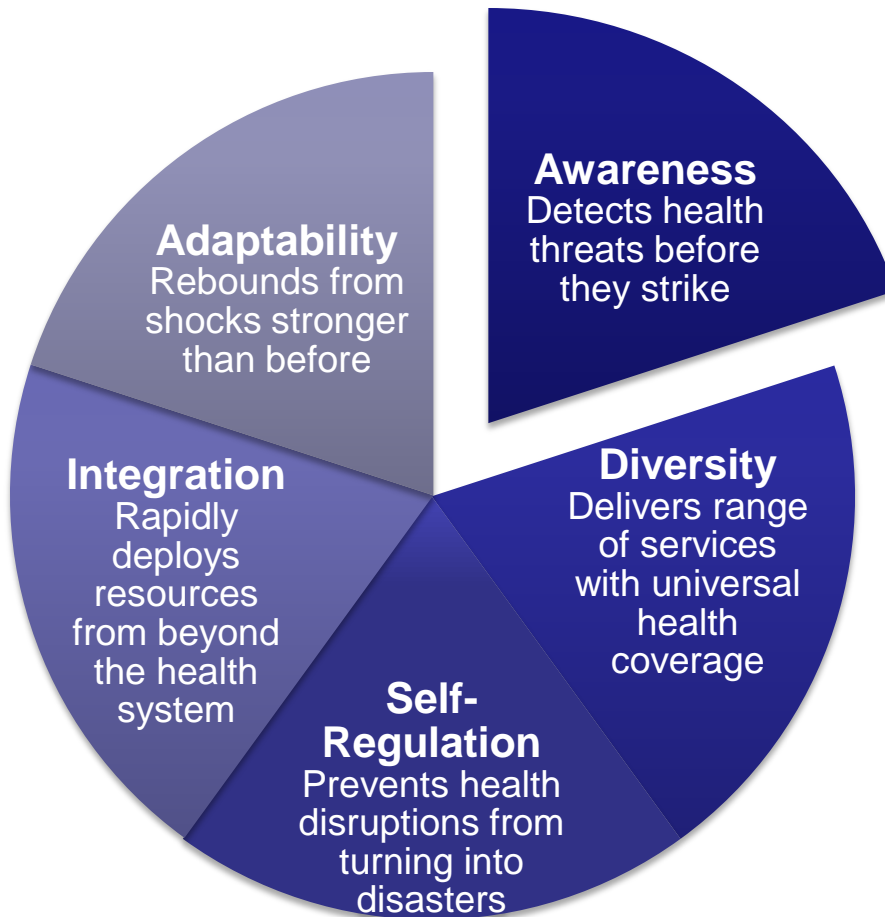
When a crisis strikes:

- Vigorous public health response
- Proactive health care delivery system

The Resilience Dividend:

- In times of crisis: Lives saved & livelihoods protected
- In times of calm: Healthier people & stronger nations

Awareness

- Up-to-date mapping of human, physical and information assets
- Strategic Information & Epidemiological Surveillance
- Inform planning

Building Awareness: Ebola in West Africa

Challenges:

- Lack of capacity to deal with public health threats
- Public health data/information not well-linked to national, social media

Investments:

- Building capacity of national and regional disease surveillance systems and response (IDSR)
- Strengthening routine data reporting and mapping
- Integrating mobile data platforms
- Building public awareness

Photo Credit: USAID

Adaptability
Rebounds from shocks stronger than before

Awareness
Detects health threats before they strike

Integration
Rapidly deploys resources from beyond the health system

Self-Regulation
Prevents health disruptions from turning into disasters

Diversity
Delivers range of services with universal health coverage

Capacity to address a broad range of health issues, often through a focus on primary care or UHC

Building Diversity: Post-conflict Afghanistan

Challenges:

- Low primary health care (PHC) coverage
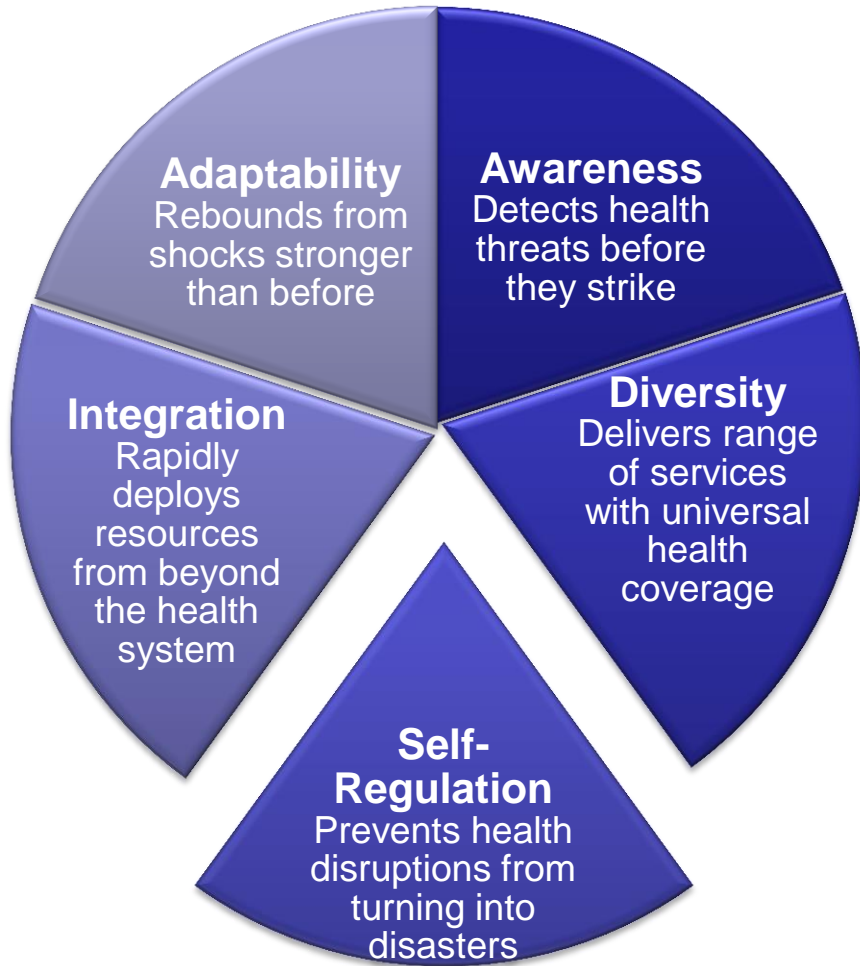- Frequent outbreaks of malaria, cholera, and other infectious disease

Investments:

- Partnerships to create diverse service delivery platforms that offer essential package of services and can respond to unexpected problems

Photo Credit: USAID

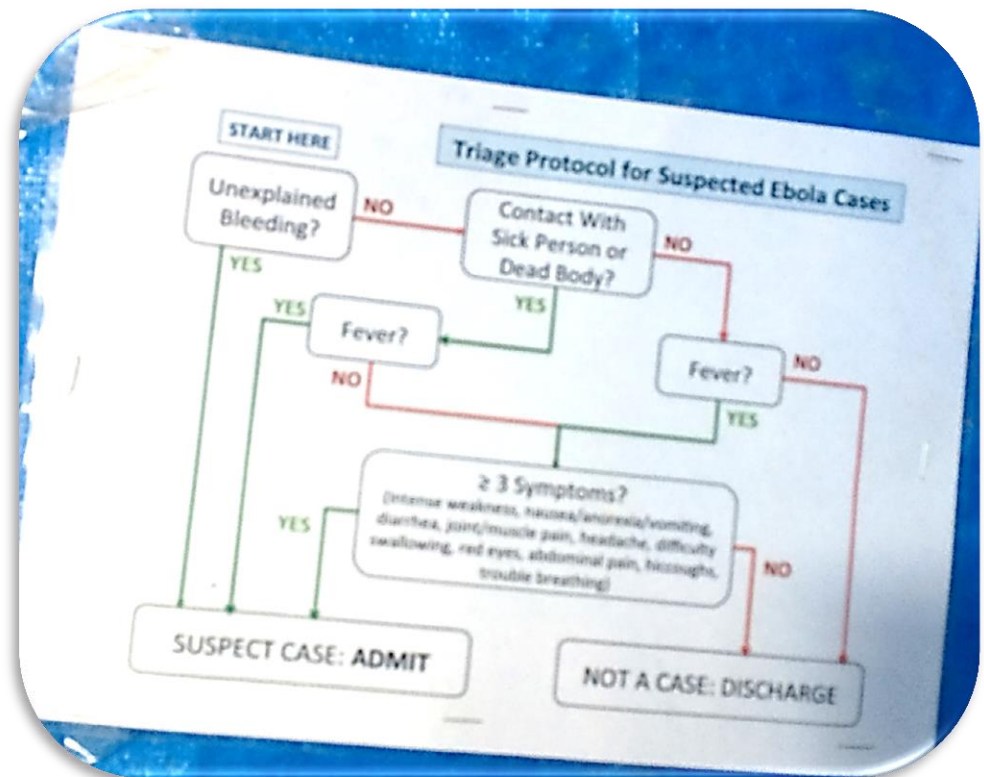Contain health threats while maintaining basic services and stability

Building Self-Regulation: Ebola in Liberia

Challenges

- Difficulties in donor and health system coordination
- Health worker retention
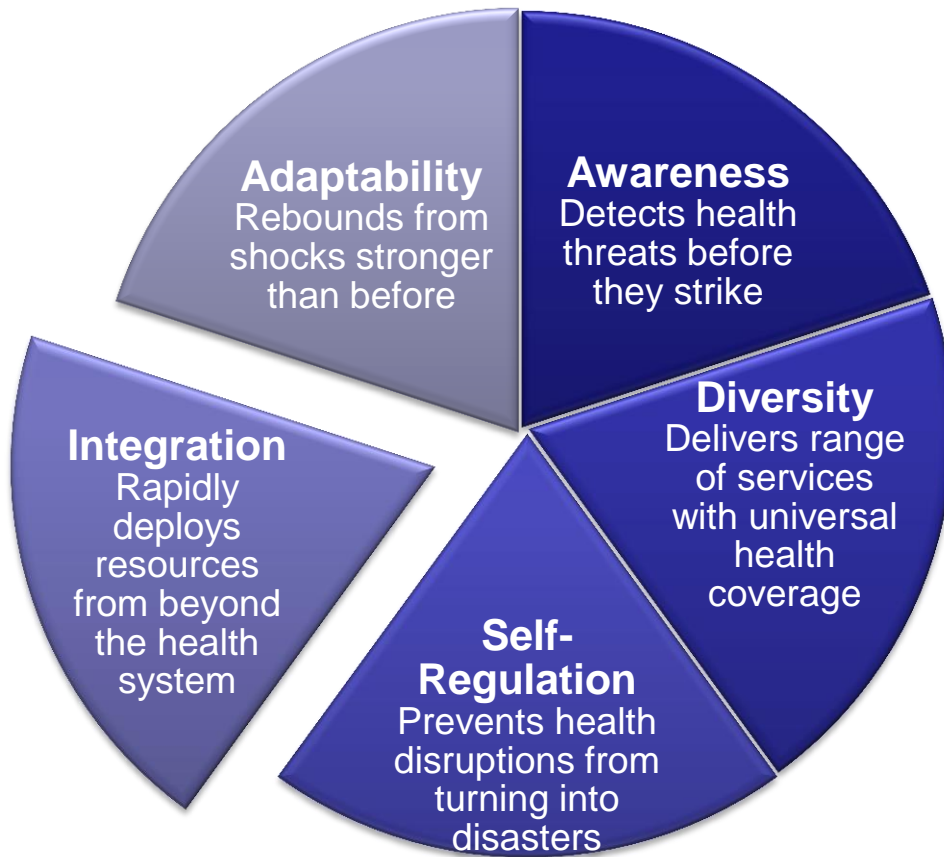- Health worker capacity to respond to health emergencies

Investments

- Mobilize and track resources during health emergencies
- Provide incentives to health workers involved in response
- Incorporate emergency response into pre-service, in-service and continuing education

Triage Protocol for Suspected Ebola Cases

START HERE — Unexplained Bleeding? — NO — Contact With Sick Person or Dead Body? — NO — Fever? — NO — NOT A CASE: DISCHARGE

Photo Credit: USAID

Multi-sector coordination and communication to prepare and respond to health crises
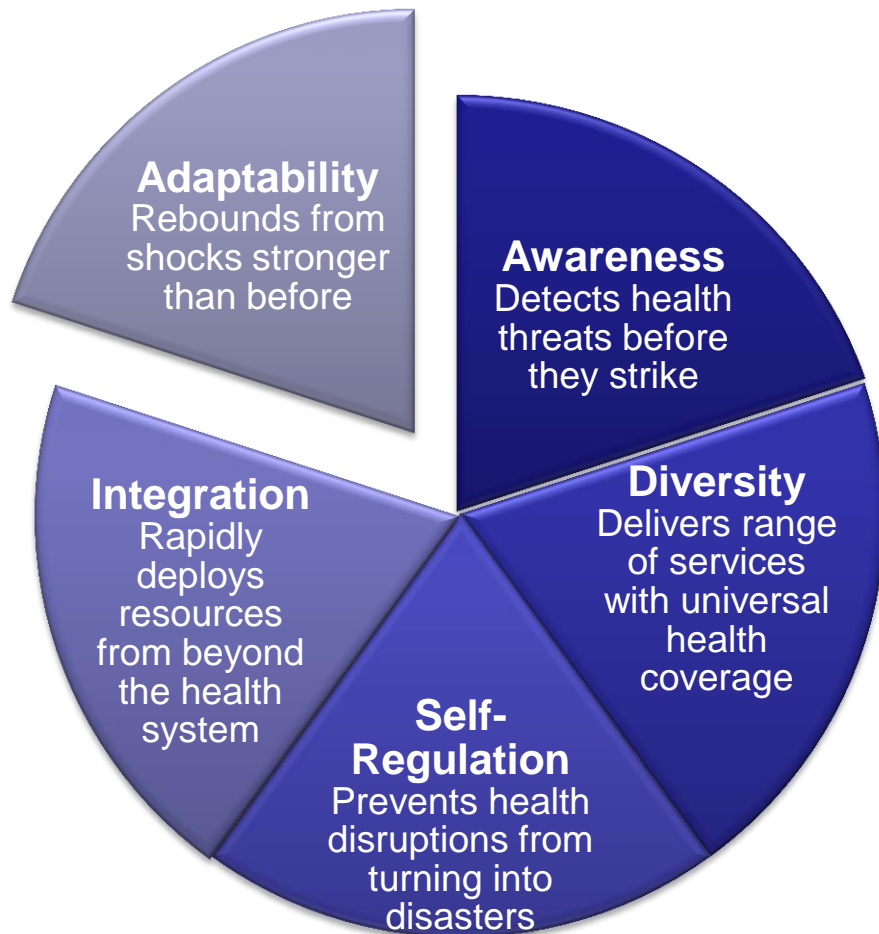
Challenges

- Coordination of different ministries in Ebola response

Investments

- Support collaboration between Liberia's Ministry of Health, Ministry of Education, Ministry of Public Works and Ministry of Finance to:

  - Restore services during outbreak

  - Re-engineer health facilities

  - Ensure medical supplies reached last mile

Adaptability
Rebounds from shocks stronger than before

Awareness
Detects health threats before they strike

Integration
Rapidly deploys resources from beyond the health system

Self-Regulation
Prevents health disruptions from turning into disasters

Diversity
Delivers range of services with universal health coverage

Capacity to respond to new health challenges brought about by changing epidemiology, demographics, natural disasters, conflict, and other adverse conditions

Challenges:

- Health infrastructure concentrated in Port-au-Prince

- Variation in nursing education quality, lack of standards

Investments:

- Business planning to strengthen hospitals outside capital

- Improved accreditation system for private nursing schools, called *reconnaissance*

Photo Credit: HFG Project

16

- Break out into small groups (8-10 people)

- Read case study individually

- Discuss questions and document recommended key investments

- Regroup to share recommendations

- What country was it?
- Which investments have been tried to make the health system more resilient?

Thank you!