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Bolstering the Healing Process: Continuous Health Care in Liberia



The Office of U.S. Foreign Disaster Assistance (OFDA) is the office within USAID responsible for facilitating and coordinating U.S. Government emergency assistance overseas. As part of USAID's Bureau for Democracy, Conflict, and Humanitarian Assistance, OFDA provides humanitarian assistance to save lives, alleviate human suffering, and reduce the social and economic impact of humanitarian emergencies worldwide. This article, authored by Taleen Vartan, is an excerpt from OFDA's 2007 annual report.

The transition from relief to development marks a critical period for a country recovering from conflict. Affected residents, who have depended on humanitarian assistance during years of civil strife, can suddenly face reduced access to basic services such as safe drinking water, adequate shelter, or health care. Oftentimes, post-conflict governments have limited capacity and resources to meet these needs.

The goal of humanitarian assistance—to provide life-saving support and meet immediate needs—differs considerably from that of development—to ensure a sustainable system where a community can independently provide for its own needs. Bridging the gap between the two has long been a challenge for

providers of both types of assistance. If development programs have not yet commenced as relief funding declines, an interruption in service provision could harm populations in critical need of assistance.

To minimize the potentially adverse impact for vulnerable communities in Liberia, OFDA is supporting the coordination of the post-conflict health sector transition. OFDA is working closely with USAID/Liberia and USAID's Bureaus for Global Health and Africa, enabling the Government of Liberia (GOL) to address urgent health needs while building capacity to restore vital, sustainable health services in a country emerging from 14 years of civil conflict.

The Dilemma: Liberia's Reliance on International Support for Health Care Provision

By 2003, which marked the end of Liberia's civil war, 95 percent of health facilities had been destroyed or rendered non-functional, and no more than 20 trained Liberian doctors provided clinical care.¹ In addition, merely 7 percent of people in rural areas maintained access to clean drinking water. Since FY 1990, OFDA has provided more than \$106 million to assist conflict-affected populations in Liberia. Together with international humanitarian response to the emergency, this assistance has helped restore basic services, alleviate extreme poverty, and reduce high rates of infant and maternal mortality.

While Liberia no longer faces immediate needs as a direct result of the conflict, the country confronts immense and ongoing challenges that could take years to offset. The Liberian Ministry of Health and Social Welfare (MOHSW) suffers from limited financial, material, and human resources, and NGOs still operated more than 70 percent of health facilities as of June 2007. As humanitarian agencies begin to reduce their activities, Liberia could face a gap in basic health services and a decline in overall funding, which together could result in further service disruption and reduced access to health care for Liberians. The transition gap, if unaddressed, could adversely affect 2.7 million Liberians, as only 36 percent of functioning health facilities have secured funding through the end of 2008.²

The Response: OFDA Assessment of the Transition Gap in Health Care

In FY 2007, OFDA, along with State/PRM and USAID/Liberia, funded the ongoing operation of 101 of the 300 NGO-supported health facilities in Liberia.³ As USG assistance transitions from humanitarian to long-term development, USAID is working with MOHSW to ensure the continuity of health service delivery and to support the development of a national health system. Setting the transition process into motion, OFDA supported two workshops in Monrovia, one in April 2005 and another in August 2006, which was co-hosted by USAID, MOHSW, and WHO. These workshops facilitated discussion about consolidating health services and improving the transition process and fostered collaboration among the various actors in the Liberian health sector, including USAID, U.N. agencies, NGOs, MOHSW, and health teams from all of Liberia's 15 counties.

Following the workshops, OFDA funded USAID's Basic Support for Institutionalizing Child Survival (BASICS) project to better determine the scope of the health transition gap and to provide coordination, technical assistance, and support for the transition process in Liberia. As part of the project, BASICS assisted MOHSW to develop Liberia's National Health Policy and Plan to guide the implementation of health services at the county level.

Setting the foundation for Liberians to continue accessing essential health services, the BASICS project used a novel

approach: a systematic survey, funded by OFDA, that assessed the relative public health impact of USG-funded clinics. The BASICS survey numerically ranked the public health significance of each USG-funded facility according to geographic location, population, service utilization, staffing patterns, services delivered, demand for services, equipment, medical supplies, infrastructure, and operating budget. Based in part on the survey results, OFDA, in conjunction with USAID/Liberia and implementing partners, decided where and how to continue funding health clinics during the transition. Correspondingly, since the results of BASICS' analysis indicated that each of the USG-funded facilities remained critical for Liberian families in need of health services, OFDA has ensured the continued funding of these health clinics through July 2008 and identified other donors to support previously funded OFDA clinics. As an outcome of the assessment, OFDA and our partners are shifting from funding individual clinics to supporting a broader health system at the county level.

Based on the results of BASICS' analysis, OFDA supported a series of workshops in June 2007 to build the capacity of county health teams and strengthen service delivery. Striving to develop human capacity and enhance partnerships, the workshops emphasized community involvement to build public confidence in Liberia's health system. These workshops played a pivotal role in encouraging county-level leadership and planning, preparing MOHSW and NGOs for the health transition, and supporting the implementation of the new National Health Policy and Plan.

The Next Steps: Moving Forward with Liberia's Health Transition

Through a process initiated during the emergency phase, OFDA and USAID/Liberia have formulated a strategy for transition to development funding that mitigates harm to vulnerable Liberians in urgent need of health care. By collaborating with the GOL and key stakeholders to systematize health care provision and create a basic package of health services, OFDA has helped to identify essential activities for continuation during the transition. In the future, OFDA plans to use the transition gap analysis in Liberia as a model approach for other post-conflict countries shifting from an emergency context to long-term development.

1. UNDP's 2006 Human Development Report
2. Based on BASICS' research as of October 2006.
3. Figures presented at the February 2007 Liberia Partners' Forum.