Health System Strengthening Programme Evaluation

Eritrea

Gavi provided funding for Eritrea's health system strengthening (HSS) programme from 2010-2014. The 2015 HSS support evaluation was commissioned by the Government of Eritrea and conducted by ECOSOC.

BACKGROUND

Recognising that achieving immunisation coverage is dependent upon strong service systems the Gavi Board took the first steps to widen Gavi support to HSS in 2005.

Countries are encouraged to use Gavi HSS funding to target the "bottlenecks" or barriers in the health system that impede progress in improving the provision of and demand for immunisation and other maternal and child health (MCH) services.

Eritrea's HSS programme focused on addressing barriers at three levels: (i) health policy level; (ii) health service delivery/facility level; and (iii) community level.

OBJECTIVES

The specific objectives of the evaluation study are to assess:

- the underlying factors in management, coordination, and financial mechanisms which support HSS implementation at the national, zoba and sub-zoba/facility levels in Eritrea
- the status of HSS support implementation using the performance indicators included in the funding application.

METHODOLOGY

Findings are based on qualitative and quantitative data collected through document review, questionnaires, field visits, and key informant interviews consulting a wide selection of individuals involved in the Gavi HSS process.

KEY FINDINGS

While results have been documented at the programme level, the HSS support appears to have been less effective at instigating systemic health delivery mechanisms at the national and regional levels.

Challenges in retaining health staff in general and senior and middle level health professionals in particular, need to be addressed. The prevailing salary scales and systems for motivation do not appear to have a significant effect on retaining skilled health staff.

The HSS grant was critical in supporting the production, skills upgrading, and increasing levels of motivation of health staff in general and senior and middle level staff in particular.

The evaluation found little evidence that the training given in Results Based Management (RBM) has been mainstreamed to help make informed decision making at the health facility level.

RECOMMENDATIONS

If the gains achieved thus far are to be sustained, Gavi should include in its forthcoming round of financing a sound exit strategy that would ensure sustained delivery by the health system.

Construct a simplified RBM procedure so grass roots health management committees can prepare their own periodic monitoring reports to help them in decision making at their level. Coupled with this, ensure sustained participation of health workers and health management teams/committees at different levels by providing continuous refresher courses in the main components of RBM, including data compilation, management and analysis, and small scale research.

Train health workers on proper recording on the health passport and strengthen the use of EPI Registers.

Conduct 'Data Quality Self Audit' and validate administrative data and records to iron out issues of recording and tallying.

Strengthen the organization and management capacity of the HSS programme. In order to provide Gavi with the timely reports it requires, core staff dedicated to the oversight and follow-up of the HSS programme is needed.

The report's final recommendations help inform the country and Gavi Board regarding future HSS proposals from the country.