



INVESTING IN PEOPLE: HEALTH

The people of Liberia face enormous challenges after 14 years of civil war (1989-2003). Communities lack basic infrastructure, including water and sanitation, electricity, roads, schools and health services – all of which contribute to the spread of disease and premature mortality through unhealthy practices and untreated ailments, making it critical for the Government of Liberia (GOL) and donors to quickly address the scarcity, uneven quality and inequitable distribution of health services.

There are 122 doctors in the country of which 51 are Liberian representing 1 doctor for every 28,000 Liberians. There are 668 nurses out of an estimated need for 4000. Half of the trained health workforce was displaced or fled the country. Only 41% of Liberians have access to health care, and 80% of that is delivered through emergency NGO relief programs. GDP per capita is among the lowest in Africa, and people's ability to pay for health care is extremely limited. The GOL as well as donors must find a way to fund both the health workforce needed to improve and expand essential services over the long run, but improve and expand services people need today.

HEALTH CARE CHALLENGES: MATERNAL AND REPRODUCTIVE HEALTH, MALARIA AND HIV/AIDS

Maternal mortality actually increased from an estimated 584 (1997-2000) to 780 (2004-2006) according to the Liberia 2007 DHS results. Increasing access to skilled birth attendants and developing sufficient emergency obstetrical care centers are essential to reducing maternal and newborn mortality; this requires a long-term strategy and investment in human as well as physical resources.

The single largest contributor to Liberia's dismal health rankings is malaria. According to the malaria indicator survey conducted in 2006, malaria accounts for 40% of clinic visits and the number one cause of hospital deaths, especially in children under five.



The 2007 Liberia Demographic Health Survey (LDHS) shows HIV/AIDS prevalence rates ranging from 1.2% for men to 1.8% for women. Prevalence rates are about three times higher in urban areas (2.5%) as in rural areas (0.8%). Young women are at the highest risk.

HEALTH SYSTEM CHALLENGES: HUMAN RESOURCE CAPACITY, FINANCING AND INFRASTRUCTURE

- Build up the capacity of the health sector while the GOL has meager resources in the National Treasury.
- Recruit, train and build a modern health workforce when schools and trainers are in short supply.
- Achieve rapid reform and establishment of health services capable of delivering the Basic Package of Health Services – in areas inaccessible to roads, lacking skilled health workers, and inhabited by people with little access to education or employment.
- Augment and unify donor engagement under the National Health Plan and Policy – to leverage limited government and donor funding for the greatest impact.

USAID HEALTH SECTOR PROGRAMS

In 2008, USAID assistance is gearing up, to take over from the receding emergency assistance, to reform and establish health care services the GOL National Health Policy and Strategic Plan states “aim at increasing the provision of the basic package of health services to at least 70 per cent [from the current 40%] of the population by 2010.”

This Plan calls for health care investments that:

- Reform the Health Sector to efficiently deliver health and social services that benefit all regions of the country equitably and achieve maximal health outcomes at the lowest possible cost.
- Decentralize management and control to give communities and county officials direct roles in oversight of resources and services under the national policy and health framework,
- Deliver a Basic Package of Health Services (BPHS) that is “affordable, sustainable interventions that have been chosen on the basis of their effectiveness in reducing morbidity and mortality”.

Assistance from USAID supports service delivery and the basic package with four areas of focus: Family planning and reproductive health, Maternal and child health, HIV/AIDS, and Malaria.

USAID funding supports some 80 clinics which are just over 20% of the total of 350 operating clinics in the country, serving at least 750,000 persons. This support includes: Africare’s Improved Community Health Project with 37 health clinics and training in safe delivery and birth preparation throughout the country; and EQUIP’s 7 primary health care clinics and “community health ambassador” training and outreach in northern Nimba County bordering Guinea. In 2008 Health sector program funding is over \$ 30 million USD.

HEALTH PROGRAM	
FY2008 ESTIMATES	US\$ (MILLIONS)
HIV/AIDS	3,421,000
Malaria	12,171,000
Maternal and Child Health	7,048,000
Family Planning & Reproductive Health	5,890,000
Water Supply and Sanitation	2,454,000

FROM RELIEF TO DEVELOPMENT: EXPANDING ACCESS TO ESSENTIAL SERVICES, BUILDING CAPACITY AND STRENGTHENING SYSTEMS (2008-2012)

Onwards from 2008, USAID/Liberia is working in close partnership with the MOHSW to double health sector support and programs in order to:

- Control malaria through the added resources of the President’s Malaria Initiative and the USAID DELIVER project. This includes purchase and handover of artemisinin-based combination therapies (ACT), rapid diagnostic kits, insecticide-treated bed nets along with training and technical support that promote the latest in malaria testing, treatment and prevention.
- Rehabilitate the Tubman National Institute of Medical Arts (TNIMA), Liberia’s only government-run training institution for non-physician health workers.
- Increase the MOH&SW’s management capacity at national and county levels.
- Maintain, expand and consolidate delivery of the basic package of services for as long as needed while investing in the renovation of infrastructure and building new systems and workforce capacity to achieve a sustainable system of national healthcare.

Key Partners in FY 2008

- Government of Liberia: Ministry of Health and Social Welfare
- World Health Organization/Liberia (Immunization)

Projects:

- AFRICARE and EQUIP: Primary health care and community outreach (2003-2008)
- BASICS Partnership for Public Health: Technical assistance to the MOHSW (2007-2009)
- AWARE: Regional West Africa Program on HIV/AIDS
- DELIVER: Malaria control and prevention (2008-2010)