Research for stronger health systems during & after crisis

Resources from ReBUILD's work on
gender and post-conflict health systems

Gender analysis has been a core theme running through all ReBUILD's research, but has also been a focus area of research in its own right. An overview with links to more detailed descriptions is given below. Key outputs are listed below, with hyperlinks. Further materials and more detailed project descriptions are available via the online links given to the ReBUILD website.

A full list of all ReBUILD's gender-related outputs can be found here.

For further information on ReBUILD's gender-related research, contact Sally Theobald (sally.theobald@lstmed.ac.uk) or rebuildconsortium@lstmed.ac.uk.

Research overview and resources:

- **Empirical research on the opportunities and constraints for building gender responsive health systems in post conflict contexts:** ReBUILD's collaborative work to explore the opportunities and challenges for building gender responsive health systems in post conflict contexts has been developed into the '**Building Back Better**' e-resource (online only) - a set of policy briefs, country case studies, academic papers and other materials which outline the particular problems and challenges and some ways forward and opportunities to better address gender in these contexts.

- **Key peer-reviewed outputs from this work**:
  - Percival, V., Richards, E., MacLean, T. and Theobald, S. (2014) Health systems and gender in post-conflict contexts: building back better? *Conflict and Health* 2014, 8:19
  - Percival, V., Dusabe-Richards, E., Wurie, H., Namakula, J., Ssali, S. and Theobald, S. (2018) Globalization and Health 14:90. Are health systems interventions gender blind? Examining health system reconstruction in conflict affected states.
  - Witter, S., Govender, V., Ravindran, S. and Yates, R. (2017) Minding the gaps: health financing, universal health coverage and gender. Special edition on gender and ethics, *Health Policy and Planning*.

- **Building Back Better briefing papers**:
  - How can humanitarian responses to health adequately take gender into account? http://www.buildingbackbetter.org/resources/how-can-humanitarian-responses-to-health-adequately-take-gender-into-account
  - How can health system reform after conflict support gender equity? http://www.buildingbackbetter.org/resources/how-can-health-system-reform-after-conflict-support-gender-equity
- **Building Back Better country case studies**:
  - **Bangladesh:** How Menstrual Regulation was introduced in post-conflict Bangladesh
  - **Cambodia:** Promoting women's leadership in the post-conflict health sector in Cambodia
  - **Mozambique:** Gender Blind: Rebuilding Health Systems in Conflict-Affected States – Mozambique
  - **Myanmar:** Gender Blind: Rebuilding Health Systems in Conflict-Affected States – Myanmar

- **Nepal**: After the earthquake: Nepalese women's understandings of health and ways to improve it
- **Sierra Leone**: Gender Blind: Rebuilding Health Systems in Conflict-Affected States – Sierra Leone
- **Timor Leste:** Gender Blind: Rebuilding Health Systems in Conflict-Affected States – Timor Leste
- **Northern Uganda:** Gender Blind: Rebuilding Health Systems in Conflict-Affected States – Northern Uganda
- **Zimbabwe**: How gender roles and relations affect health workers' training opportunities and career progression in post-crisis rural Zimbabwe

- Much of this learning has recently contributed to a collaboratively produced open access, online learning resource, developed with the European Commission's DEVCO B4 health team to help improve the considerations of gender in health systems strengthening work.
- ReBUILD is also a core partner in the RinGs Initiative - Research in Gender and Ethics: Building stronger health systems to galvanise gender and ethics analysis in health systems research and strengthening. RinGs focuses on: conducting and synthesising research on gender, ethics and health systems; coordinating research projects through a small grants programme; developing a range of outputs and supporting a learning platform to encourage mutual learning and the use of evidence. ReBUILD partnership here ensures that many of the processes and outputs include a focus on fragility. Key outputs include a special issue in Health Policy and Planning on Leaving no one behind: the role of gender analysis in strengthening health systems.

Gender and human resources for health

A number of journal articles and working papers on ReBUILD's work on human resources for health in conflict/crisis-affected settings have addressed gender issues:

- Witter, S., Namakula, J., Wurie, H., Chirwa, Y., So, S., Vong, S., Ros, B., Buzuzi, S. and Theobald, S; *The gendered health workforce: mixed methods analysis from four fragile and post-conflict contexts* Health Policy and Planning, 32, suppl 5, 1 December 2017 pp v52–v62, https://doi.org/10.1093/heapol/czx102

- Sarah N. Ssali, Sally Theobald, Justine Namakula and Sophie Witter (2016) *Building post-conflict health systems: a gender analysis from Northern Uganda.* Chapter 20 in the Handbook on Gender and Health, edited by Jasmine Gideon and published by Edward Elgar 27 May 2016. (Part of the International Handbooks on Gender series) ISBN: 9781784710859 DOI: http://dx.doi.org/10.4337/9781784710866

- Sarah Ssali and Sally Theobald (2016) *Using life histories to explore gendered experiences of conflict in Gulu District, northern Uganda: Implications for post-conflict health reconstruction.* South African Review of Sociology Volume 47, Issue 1, 2016 http://www.tandfonline.com/doi/abs/10.1080/21528586.2015.1132634

- Dhatt, S. Theobald, S. Buzuzi, et al. (2017) *The role of women's leadership and gender equity in leadership and health system strengthening.* Global Health, Epidemiology and Genomics (2017), 2, e8, page 1 of 9. doi:10.1017/gheg.2016.22