

## A summary of research themes, projects and related outputs

This summary document gives an overview of the projects and research themes which have made up ReBUILD's work.

It is a navigation tool to access all of ReBUILD's theme-specific resources lists and complete published outputs online.

### CORE RESEARCH THEMES AND OUTPUTS:

Specific research project outputs are listed first. [You can go directly to ReBUILD's synthesis, cross-cutting and general briefs material in health systems in conflict and crisis affected settings here.](#)

#### **A. HUMAN RESOURCES FOR HEALTH**

[List and links for specific outputs from ReBUILD's HRH work here.](#)

**Research overview:** This collection of research projects have looked at how the decisions made, or not made, in the post-conflict period can affect the longer term pattern of attraction, retention, distribution and performance of health workers, and thus ultimately the performance of the sector. [Details of all published outputs are on the index list on HRH resources on this memory stick.]

ReBUILD's work in this field includes:

- A large body of research on [health worker incentives](#), being carried out across all four ReBUILD partner countries.
- Research on [health worker deployment systems](#).
- A project on [The effects of the Ebola outbreak on health workers and the health system in Sierra Leone](#).
- A project on [Health workers' remuneration, incentives and accountability in Sierra Leone](#)
- An extension research project on [Understanding human resources for health recruitment and deployment in post-conflict settings](#)
- An extension research project on [Using community health workers in fragile and conflict affected settings](#)
- Another of ReBUILD's affiliate projects on [Health systems resilience in Côte d'Ivoire and northern Nigeria](#) has produced important findings relating to human resources for health.

#### **Core research outputs:**

- Overview brief: [Establishing a responsive and equitable health workforce post conflict and post crisis: lessons from ReBUILD research.](#)
- Comprehensive list of [Resources from ReBUILD's work on human resources for health in conflict-affected and post-conflict settings](#)

## B. HEALTH FINANCING:

[List and links for specific outputs from ReBUILD's health financing here.](#)

**Research overview:** ReBUILD's original research project in this area focused on **post-conflict access and equity for the poor** – how people have been paying for health care over their lifetimes and the effects of external events and of health sector policies on the level and nature of payments, and the effects those payments have had on their household economies.

An additional stream of research examined **contracting models in Cambodia** and how contracting arrangements have changed, identifying the drivers of changes, actors involved, the processes for realisation of the change and the implications for service coverage and equity in Cambodia.

During ReBUILD's extension phase additional projects have looked at:

- [Performance based financing \(PBF\) in fragile and conflict-affected settings](#), and how contextual factors influence adoption, adaptation, implementation and integration of PBF, and how PBF programmes could be improved and ultimately strengthen health systems in FCAS.
- [Demographic and distributional impacts of conflicts and implications for health systems](#). Building on the phase 1 research on health financing, this project aims to understand the implications of conflict-related demographic change for health financing and social protection policies intended to ensure access to healthcare without impoverishing effects.

### Core research outputs:

- Overview brief: [Health financing policy in conflict affected settings: lessons from ReBUILD research](#). Based on ReBUILD's phase 1 research.
- Comprehensive list of [Resources from ReBUILD's work on health financing in conflict-affected and post-conflict settings](#). (This includes outputs from the extension projects on performance-based financing and on demographic impacts).
- [Outputs from performance-based financing project](#) (This is a filtered list of project-related outputs on the ReBUILD website).
- [Outputs from the work on contracting models in Cambodia](#). (This is a filtered list of project-related outputs on the ReBUILD website).

## C. GENDER AND POST-CONFLICT HEALTH SYSTEMS:

[List and links for specific outputs from ReBUILD's work on gender in post-conflict settings here.](#)

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.

### 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 - 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.

- 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. We published a special issue in Health Policy and Planning on [Leaving no one behind: the role of gender analysis in strengthening health systems](#), the [editorial](#) & corresponding [podcast](#) refer to issues in fragile settings and ReBUILD/RinGs papers were included.
- Empirical research on **gender, human resources for health and fragility**. Research conducted through both ReBUILD and RinGs has been synthesised and shared through a number of papers and other outputs. (See section on Gender and HRH in the comprehensive resource list of [ReBUILD's work on human resources for health](#).)

#### D. GOVERNANCE AND AID EFFECTIVENESS IN A POST-CONFLICT SETTING:

**Research overview:** This project explores the link between governance and aid effectiveness in strengthening post-conflict health systems in Uganda. It is looking at aid relationships among actors at sub-national level, and uses social network analysis to look at the structure, size and function among organizations supporting the provision of health services.

##### Core research outputs:

[Outputs so far](#) include two papers and contributions to ReBUILD's overview materials on health systems ['Institutions' in conflict and crisis affected settings](#).

- [Application of social network analysis in the assessment of organization infrastructure for service delivery: a three district case study from post-conflict northern Uganda.](#)
- [Sub-national assessment of aid effectiveness: A case study of post-conflict districts in Uganda.](#)

#### E. HEALTH SYSTEMS RESILIENCE:

**Research overview:** *Health Systems Resilience: A Systems Analysis* was a ReBUILD affiliate research project which applied a systems dynamics approach to understand, predict and identify mechanisms that influence the resilience of health systems in contexts of adversity. ReBUILD has further explored the concept of health systems resilience in conflict and crisis affected settings through a short synthesis review and with other research consortia.

##### Core research outputs:

- Case study reports and other materials can be [accessed on this project page](#).
- An overview brief on [resilience of health systems during and after crisis](#) has also been produced by ReBUILD.

- A broader collaborative exploration of health systems resilience was also done as part of a workshop with other DFID-funded research consortia. [A briefing note on health systems resilience](#) on key questions for DFID advisors was produced as an output of that process.

## F. ADDITIONAL RESEARCH THEMES/PROJECTS

In addition to the two Affiliate research projects already referred to, three more such projects were conducted by ReBUILD Affiliate partners.

### **Psychosocial support and service provision for adolescent girls in post-conflict settings**

- This project, conducted by the [Overseas Development Institute](#), explored the extent to which services and other responses to mental health and psychosocial stresses in post conflict settings are informed by the context, by gender and by social-cultural norms.
- A description of the project with links to all outputs is [available here](#).

### **Building on our Assets - What works in Cambodia's obstetric referral system.**

- This project, conducted by the [University of Leeds](#), used Appreciative Inquiry to try to identify ways of improving health system performance through asking what is working in contemporary obstetric care within the public Cambodian health system (rather than focusing on gaps and deficits), and how these assets could be built on to achieve higher quality of care.
- A description of the project with links to all outputs is [available here](#).

### **Rebuilding the foundations for universal health coverage with equity in Zimbabwe**

- This research built on a wider body of work by ReBUILD's affiliate partner [TARSC](#), with the MoHCC and national and international partners, implementing research to support policy dialogue and decisions on the technical design around elements of equitable health financing. The work strengthened stakeholder mechanisms to analyse and review Zimbabwe's performance on equity in health, and to guide processes towards equity in universal health coverage within a comprehensive policy framework on health financing.
- The main findings and proposals from this work summarised in a policy brief [Evidence and proposals for advancing equity and universal coverage of health services in Zimbabwe](#).
- Project description with all research reports and other outputs are accessible [via the project page](#).

## B. OVERVIEW, SYNTHESIS AND CROSS-CUTTING MATERIALS:

In addition to the project-associated outputs, ReBUILD has produced a number of general and cross-cutting synthesis outputs on health systems in conflict and crisis affected settings, including two series of briefing papers.

An overview [video animation](#) of key themes from ReBUILD's research on health systems in post-conflict and post-crisis settings [can be viewed here](#).

### 1. Overview briefs:

The first set synthesises ReBUILD's research over its first phase, and the findings and recommendations around three 'themes' of [Communities](#), [Health workers](#) and [Institutions](#).

1. [The ReBUILD programme and emerging themes for health systems strengthening in post-conflict and post-crisis settings](#)
2. [Health financing policy in conflict affected settings - lessons from ReBUILD research](#)
3. [Establishing a responsive and equitable health workforce post-conflict and post-crisis - lessons from ReBUILD research](#)
4. [Institutions for strong and equitable health systems after conflict and crisis - lessons from ReBUILD research](#)

### 2. Issue briefs:

The second set of briefs draw both on ReBUILD's and wider research to address a number of key questions around health systems in conflict and crisis affected settings, identified through a research needs and challenges study carried out of the Health Systems Global Thematic Working Group on Health Systems in Fragile and Conflict Affected States.

1. [Resilience of health systems during and after crises – what does it mean and how can it be enhanced?](#)
2. [Developing inclusive health systems in crisis-affected settings](#)
3. [How to move towards universal health coverage in crisis-affected settings: lessons from research](#)
4. [How do different types of provider affect access to effective and affordable healthcare during and after crises?](#)
5. [The political economy of crisis-affected settings: what does it mean for investments in health systems?](#)
6. [Do health systems contribute to reduced fragility and state-building during and after crises?](#)
7. [Sustainability of health systems in crisis-affected settings: lessons for practice](#)
8. [Developing health system research capacity in crisis-affected settings: why and how?](#)
9. [What do we know about how to respond to humanitarian crises in ways that also contribute to subsequent stronger health systems?](#)

### 3. Cross-cutting and general health systems articles:

#### Journal articles and Working Papers:

- Raven, J. Baral, S. Wurie, H. Witter, S. Samai, M. Paudel, P. Subedi, H.N. Martineau, T. Elsey, H. Theobald, S. (2018) [What adaptation to research is needed following crises: a comparative, qualitative study of the health workforce in Sierra Leone and Nepal Health Research Policy and Systems](#)
- Martineau, T., McPake, B., Theobald, S., Raven, J., Ensor, T., Fustukian, S., Ssengooba, F., Chirwa, Y., Vong, S., Wurie, H., Hooton, N and Witter, S. (2017) [Leaving no one behind: lessons on rebuilding health systems in conflict and crisis-affected states](#). *BMJ Global Health* Jul 2017, 2 (2) <http://gh.bmj.com/content/2/2/e000327>
- Martineau, T, Woodward, A, Sheahan, K and Sondorp, E. (2017) [Health systems research in fragile and conflict affected states: a qualitative study of associated challenges](#). *Health Research Policy and Systems* 15:44 <https://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-017-0204-x> DOI: 10.1186/s12961-017-0204-x
- Woodward, A., Sondorp, E., Witter, S. and Martineau, M. (2016) [Health systems research in fragile and conflict affected states: a research agenda-setting exercise](#). *Health Research Policy & Systems*. 14:51. <http://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-016-0124-1>
- McPake, B., Witter, S., Ssali, S., Wurie, H., Namakula, J. and Ssengooba, F. (2015) [Ebola in the context of conflict affected states and health systems: case studies of Northern Uganda and Sierra Leone](#). *Conflict and Health*; 9; 23. <http://www.conflictandhealth.com/content/9/1/23>
- McPake, B., Witter, S., Ensor, T., Fustukian, S., Newlands, D., Martineau, T. and Chirwa, Y. (2013) [Removing financial barriers to access reproductive, maternal and newborn health services: the challenges and policy implications for human resources](#). *Human Resources for Health*, 11(1):46. <http://www.human-resources-health.com/content/11/1/46/abstract>
- Witter, S. (2012) Health financing in post-conflict states: what do we know and what are the gaps? *Social Science and Medicine*, vol. 75, p.2370-2377. <http://www.sciencedirect.com/science/article/pii/S0277953612006752>