Liberia Country Profile

Jhpiego in Liberia

Quick Facts
Estimated total population:1
4.5 million

Maternal mortality ratio:2
771 per 100,000 live births

Infant mortality rate:2
54 per 1,000 live births

Under-five mortality rate:2
94 per 1,000 live births

Total fertility rate:2
4.7

Contraceptive prevalence:2
19.1% (modern methods)
20.2% (all methods)

HIV prevalence:3
1.5%

Births with skilled provider:2
61%

Sources:
1 Population Reference Bureau
2015 World Population Data Sheet;
2 Demographic and Health Survey 2013 Preliminary Report;

Background
After the end of Liberia’s civil war in 2003, the country faced enormous challenges to rebuild the crippled health care system and provide adequate health care services for its people. These challenges included weak logistics, transportation and communications systems, as well as insufficient access to care and poor referral networks, particularly in remote rural areas. Guided by visionary leadership, in only a few short years Liberia took bold steps to transition from an emergency relief model to a functioning, decentralized health system. In 2014, the nation was hit by an outbreak of Ebola Virus Disease (EVD), which resulted, as of February 2016, in more than 10,600 cases and 4,800 deaths. Liberia was declared free of Ebola transmission in May 2015, followed by two re-introductions of the virus and a flare-up in November. In January 2016, the World Health Organization declared the end of the most recent EVD outbreak in Liberia. By then, the epidemic had overwhelmed the country’s health care system, with health care personnel disproportionately infected by the virus.

After a long hiatus from its original support to Liberia’s national family planning (FP) program in the 1980s, Jhpiego began providing assistance to the Government of Liberia through two initiatives. Under the first, Jhpiego worked from 2008 to 2013 as one of three partners, along with prime contractor JSI Research & Training Institute, Inc., on the Rebuilding Basic Health Services (RBHS) Project. Jhpiego’s main contribution to this project was to strengthen pre-service education at schools that train future health care providers. Under a second intervention, funded by the U.S. Agency for International Development (USAID) through the Maternal and Child Health Integrated Program (MCHIP), Jhpiego worked from 2010 to 2013 to strengthen the provision of FP services. MCHIP’s primary mission was to provide technical support to the Ministry of Health and Social Welfare (MOHSW) to train and build in-country capacity for service delivery, monitoring and training of clinic staff and community-based workers in FP and reproductive health (RH). MCHIP played an instrumental role in repositioning FP as an important service within postpartum care, improving the quality of FP service delivery and developing an integrated approach to FP. MCHIP also provided technical assistance to the MOHSW through interventions aimed at reducing postpartum hemorrhage and provided support to the MOHSW to help operationalize the national FP/RH Strategy and implement the Accelerated Action Plan to Reduce Maternal and Neonatal Mortality.

In response to the EVD outbreak, Jhpiego implemented a one-year, capacity-building intervention in 2015 that was funded by the Office of U.S. Foreign Disaster Assistance and designed to strengthen essential infection prevention and control (IPC) practices. Key areas of intervention included: 1) contributing to national-level coordination; 2) rolling out the MOHSW-approved Keep Safe, Keep Serving and Safe Quality Services training packages; 3) building local capacity and sustainability; and 4) providing intense supportive supervision through Jhpiego’s IPC specialists, who collaborated with IPC focal points at the county health team (CHT), district health team (DHT) and facility levels to ensure that appropriate systems were in place to reinforce IPC at all levels. Continual feedback and documentation were conducted to determine progress, challenges and lessons learned.
Currently, Jhpiego is being funded by USAID, the Wellcome Trust, United Nations Population Fund (UNFPA) and Korea International Cooperation Agency (KOICA). These projects are described in more detail below.

**Current Program Highlights**

**Restoration of Health Services in Liberia**

Under USAID’s Maternal and Child Survival Program (MCSP), Jhpiego is working to restore confidence in the health care system by upgrading IPC practices critical for fighting EVD and other infectious diseases, and ensuring restoration of integrated reproductive, maternal, newborn and child health (RMNCH) services in 77 target facilities in Grand Bassa, Lofa and Nimba Counties by June 2017. MCSP is working in collaboration with USAID/Liberia and the Government of Liberia and coordinating with other implementing partners on the following key activities:

- Provide support to 77 MCSP target health facilities (30 in Grand Bassa, 17 in Lofa and 30 in Nimba; 53 are public facilities and 24 private; 64 are clinics, 10 hospitals and three health centers)
- Provide support to implement outreach to increase service delivery access to routine immunization
- Train health workers and supervisors on: safe, high-quality services; effective teaching and supervision skills; integrated RMNCH, including routine immunization and youth-friendly services; Integrated Management of Neonatal and Childhood Illnesses and routine immunization services; comprehensive emergency obstetric and neonatal care; integrated FP and immunization; and postpartum FP as an extension of maternal and child health
- Provide support to strengthen IPC practices at all 77 target facilities
- Provide mentoring, coaching and supportive supervision to health workers, alongside CHTs and DHTs, to build capacity and improve performance of CHTs, DHTs and health workers
- Strengthen and support linkages between the CHTs, DHTs and health facilities
- Provide other support and resources (such as standards, job aids, supplies) as needed to improve the quality of health care services
- Coordinate with the USAID | DELIVER PROJECT to ensure adequate quantification, procurement, distribution and supply of necessary commodities, supplies and essential drugs and cold chain equipment and supplies at the 77 target health facilities
- Renovate and/or perform minor construction to improve the quality of services at 74 out of the 77 target health facilities
- Fill human resource gaps at 74 out of 77 target health facilities (via consultant agreements)

**Collaborative Support for Health System Strengthening**

The Collaborative Support for Health Program is a three-year, USAID-funded initiative being implemented in Liberia by Management Sciences for Health in collaboration with Jhpiego, Institute for Healthcare Improvement, Results for Development Institute and Development Innovations Group. The goal of the program is to strengthen Liberia’s health system to meet the daily needs of Liberians and strengthen institutions positioned to drive inclusive economic growth and poverty reduction. Jhpiego is supporting this program, which began in 2015, in the following areas: 1) strengthening leadership and governance of the MOHSW; 2) institutionalizing quality assurance/quality improvement initiatives for health care service delivery; and 3) strengthening human resources for health management.
Ethics Issues in Public Health Containment for Ebola and Other Infectious Outbreaks

With funding from Wellcome Trust, and in partnership with the Johns Hopkins Berman Institute of Bioethics, Jhpiego is supporting research in Liberia to answer the question: how can traditional public health containment measures be implemented during large-scale infectious disease outbreaks in low- and middle-income countries in ethically optimal ways? This research examines how to ethically implement prescriptive public health measures (isolation/quarantine, contact tracing, handling of bodies) in ways the public may find more acceptable and less threatening. Specifically, it looks at the perspective of survivors, family members and/or health care workers on such efforts and what may increase their willingness and ability to respond appropriately. Jhpiego’s role in this research is to focus on data collection and coordination as well as participation in the expert panel identifying ethical issues in public health containment and best practices.

Strengthening Essential Reproductive and Maternal Health Services in Liberia: Mano River Maternal Health Response

UNFPA is supporting Jhpiego to increase access to high-quality maternal, newborn and adolescent health (MNAH) services in Liberia. Jhpiego is building the capacity of health care facilities and CHTs to provide improved MNAH services, strengthening community health committees and supporting infrastructure needs at health facilities in Lofa, Gbarpolu and Grand Cape Mount Counties. Interventions include: 1) increasing the number of operational health facilities with fully functional maternities; 2) supporting the provision of high-quality sexual and RH services, MNAH services and EVD prevention and screening; and 3) collaborating with cross-border communities through joint health planning, programming and monitoring activities.

Medical Equipment Donation for Ebola Response in Liberia

KOICA is funding Jhpiego to increase the availability of safe, high-quality primary care services post-Ebola outbreak in target facilities in Bong, Grand Gedeh, Margibi and Maryland Counties. Jhpiego will do this by: 1) providing necessary medical equipment to two hospitals identified by the MOHSW (Redemption Hospital in Montserrat County and Jackson F. Doe Memorial Hospital in Nimba County) to improve their capacity to provide tertiary care in Montserrat and Nimba Counties; and 2) building health worker and health facility capacity for provision of safe, high-quality primary health care services in up to 174 facilities in Bong, Grand Gedeh, Margibi and Maryland Counties through mentoring and supportive supervision.

Key Accomplishments

The following accomplishments were achieved by Jhpiego under the RBHS project:

- Developed clinical standards for six components and 17 sub-components under the Basic Package of Health Services. Clinical standards from 10 of the areas were adapted by the RBHS and were used for quality improvement in the 112 project-supported facilities by CHTs and nongovernmental organizations in five counties. These standards were also adapted by the MOHSW for national use at public health care facilities for quality improvement.

- Developed competency-based curricula for five cadres of health workers (nurses, midwives, physician assistants, laboratory technicians and environmental health workers) after conducting a task analysis and updating and harmonizing the job descriptions and core competencies according to international standards, guidelines and competencies to meet national needs.

- Developed two Educational Development Centers and terms of reference for them.
Initiated a standards-based quality improvement process at schools and clinical sites, and assisted in creation of action plans for both schools. A follow-up assessment against the standards was conducted in October 2010 and revealed that 51% of standards had been met at the two schools—up from 39% 12 months earlier. Improvements were documented for classroom instruction, clinical instruction and institution management.

The following accomplishments were achieved by Jhpiego under MCHIP:

- Improved demand for FP by bringing information and services closer to the community, using already proven, effective and innovative approaches. MCHIP created awareness and spread health promotion messages and worked with market peer providers, barber shop and beauty salon workers, and religious leaders to reach their clients and congregations to discuss misconceptions, lack of FP knowledge (especially in the postpartum period), teenage pregnancy, and healthy timing and spacing of pregnancy.

- Developed national FP standards with the RH Technical Committee and introduced standards for pre-service and in-service training.

- In collaboration with UNFPA, the MOHSW and other partners, MCHIP played a key role in contributing to 10 strategies and training materials that are being used nationwide including: 1) National Community-Based Family Planning Training Materials, 2) Adolescent RH Strategy, 3) Accelerated Action Plan for the Reduction of Maternal and Neonatal Mortality in Liberia, and 4) Postpartum Hemorrhage Clinical Guidelines.

- Carried out a demonstration project on immunization and FP integration in selected facilities in Bong and Lofa Counties. This approach involved vaccinators providing a few short, targeted FP and immunization messages and same-day FP referrals to mothers to bring their infants to the health facility for routine immunization. This effort resulted in an increase in new contraception users by 90% in Lofa and 73% in Bong Counties, with a total increase of 1,323 new contraception users. This approach was approved by the MOHSW for expansion and scale-up.

- Conducted an initiative in Grand Bassa for the prevention of postpartum hemorrhage during facility and home deliveries. This introductory program was designed to increase use of uterotonics for all births. Misoprostol was distributed during antenatal care visits or by trained MOHSW clinical staff to women in the community who were at risk of not reaching the facility to give birth. Based on the data from this initiative, the MOHSW approved moving forward with the distribution of misoprostol at the community level as well as expanding this lifesaving initiative to additional communities in Liberia.

Partners and Donors

Jhpiego collaborates closely with the Government of Liberia through the MOHSW, as well as with the donors (USAID, UNFPA, Wellcome Trust and KOICA), other implementing partners and various local nongovernmental organizations.

References


