Integrated Management of Childhood Illness and health sector reform

Introduction

Health sector reform (HSR) is being considered or underway in many countries, with the objective of improving efficiency, equity, quality of care, effectiveness and sustainability of the health sector. Reform efforts are being reinforced by the shift in health development cooperation from project to sector support. Health sector reform strategies include identifying an essential package of health care services, decentralization of planning and management of health services to district level, strengthening management of public health care, improving the function of ministries of health, defining the role of private health care providers in the health system, designing alternative financing mechanisms and improving financial management of the health sector.

The health sector reform process involves the review and reorganization of the structure of the health system in a country, usually in collaboration with the World Bank and bilateral donors. It may include changes in the Ministry of Health (MoH) itself, in the organization of health care services, and reforms in health financing, which have implications for both the public and the private sector. Capacity building, essential health service packages and decentralization of management to district level are examples of strategies to reform ministries of health and to reorganize health care services. Changes in the general system of taxation used to finance government expenditures, the introduction of user fees, health insurance, or mechanisms for community participation in financing local health services, are examples of strategies to reform health financing.

The focus of reforms depends on the country. The first step in the process of introducing HSR is to review and revise existing national policies and strategies or, if necessary, to develop new policies and strategies. The emphasis may be on reforms in health financing or on the organization of health services, and reform may be extensive or limited, depending on the national situation.

Many aspects of health sector reform are relevant to, and consistent with, IMCI strategies and activities.
The role of IMCI in HSR

The IMCI strategy can play an important role in most aspects of health sector reform, in particular through:

- Improving the cost-effectiveness of essential child health care services
- Strengthening the capacity for decentralized management at district level
- Improving the quality of child health care
- Supporting the new role of the Ministry of Health
- Improving private health care provision for young children
- Cost saving
- Strengthening drug supply and management

IMCI will strengthen the capacity of first-level health facilities and improve the quality of care delivered. Thus, if applied in a large number of facilities, in particular in those where health care for children is delivered free of charge or at moderate fees, IMCI would improve access to quality care. Each of these components is described below.

More cost-effective essential health care services

Defining a basic package of essential health services is an important HSR strategy. The package consists of cost-effective interventions to prevent or control the health problems causing the highest burden of disease in a country. Prevention and reduction of mortality and morbidity from common childhood illness is a priority area for health services in all developing countries. And IMCI offers a cost-effective strategy to address the major causes of childhood deaths. The integrated approach of IMCI increases the efficiency of health care service delivery through rational use of drugs, time saved for caretakers, patients and health staff, and reduction of missed or incorrect classification of illnesses. The resources needed to implement IMCI – for example, drugs and supplies, human resources, and transport for referral – also overlap with those needed for other components of a basic package of health services. Including IMCI in the basic package of health services avoids the duplication in structure, organization and management of separate childhood disease control programmes, as well as addressing the health of the child in a holistic way.

Decentralization and management at district level

Decentralization in health sector reform involves delegating authority for planning, decision making, budgeting and monitoring of services and transferring accountability from central government to health care providers at district level. IMCI can strengthen this aspect of health sector reform in several ways. IMCI emphasizes district-level responsibility for implementation and district-level capacity building. The main responsibilities for IMCI training, supervision and monitoring, drug management, and organization of work at health facilities rest with the district health management team,
and linkages between first-level health facilities and community and referral care levels are also a district-level responsibility in IMCI.

**Improved quality of care**

IMCI improves quality of care through use of evidence-based clinical management protocols for the most common causes of childhood death and illness. Standard case management discourages inappropriate care, such as the overuse of antibiotics and other drugs.

The process of adapting the IMCI guidelines in a country provides an opportunity to review and revise national policies related to child health, for example, policies on immunization, vitamin A, deworming, nutrition, malaria case management, essential drug lists and drug management.

IMCI emphasizes improving case management skills at first-level health facilities and improving recognition of children requiring referral care and the provision of appropriate pre-referral treatment. Together, these can improve access to quality care.

Other aspects of IMCI that can contribute to better quality care of sick children include guidelines on home care and follow-up care, standards of care at referral level, and a focus on counselling and communication with caretakers.

**The new role of the Ministry of Health**

Health sector reform commonly results in a restructuring of the MoH. The new role of the MoH is often characterised by its reduced involvement in the management and delivery of health services, and an increased focus on policy formulation, strategic planning, setting standards, legislative and regulation mechanisms, multi-sectoral coordination, monitoring and controlling quality of health care. Successful implementation of IMCI requires all of these MoH functions to support delivery of IMCI services at district level.

The process of introducing IMCI in a country, which includes activities such as guideline adaptation, review of existing policy and essential drugs list, and planning a training strategy, would support and strengthen the new role of the MoH.

**Improving private health care provisions**

Health sector reform recognizes the private sector as a key partner in health care service delivery. Pre-service training in IMCI, which represents best practice in case management of sick children and is equally valid in the public and private sectors, could provide future health professionals with the same basic knowledge and skills.

**Health financing**

IMCI can potentially reduce health care expenditures, through more rational use of drugs, through the synergy of treating multiple conditions,
and through reducing missed opportunities for immunization or for the detection and treatment of malnutrition. The integrated approach of IMCI can deliver other preventive interventions, such as nutritional advice and vitamin A supplementation, in conjunction with curative care. The integrated approach to training, supervision, and distribution of essential drugs can also reduce costs to health services. Improvements in the quality of care, leading to greater caretaker satisfaction, are expected to lead to increased utilization of health services, making the investments in staff, clinics and equipment for health care delivery more cost-effective.

**Strengthening drug supply and management**

Health sector reforms are attempting to improve the availability of drugs at health facilities. Lack of access to drugs and irregular supplies are a problem in many countries, particularly in Sub-Saharan Africa. Distribution is often characterized by a public system in which drugs are free but not available, and a private system in which drugs are available but not affordable to most of the population. Access to and rational use of appropriate drugs are essential for successful implementation of a range of health interventions including IMCI, and efforts to improve the availability of drugs for IMCI will complement efforts to strengthen drug supply and management in the context of health sector reform. IMCI will contribute to approaches to improve the basic functions of drug management – selection, procurement, distribution and use – leading to sustainable systems that make essential drugs available at all levels.

**Linking IMCI and HSR**

The introduction of IMCI in every country should be coordinated with HSR efforts promoted by the government and donor agencies. The feasibility of coordination between the health sector reforms and IMCI must be assessed early, to ensure that plans are complementary and that IMCI will be sustained as reforms are put in place. Mechanisms to identify ways in which IMCI and HSR can complement each other can include information exchange or mutual participation in planning and review of policies, strategies and guidelines. IMCI also needs to be considered in the planning of larger health projects, both at the stage of identification and selection of key areas and interventions, and at the stage of pre-appraisal and preparation of an implementation plan. Public health specialists, health planners and paediatricians involved in this process need to be aware of and understand IMCI. This could be done through orientation meetings, joint planning exercises and participation in project identification, pre-appraisal and appraisal missions by individuals knowledgeable about IMCI.

IMCI can also be linked to HSR in other ways. For example, IMCI indicators could be used in the planning and implementation of reforms, and IMCI could play a key role in building capacity and strengthening functions at the district level through its planning, training, supervision and monitoring tools and activities.