



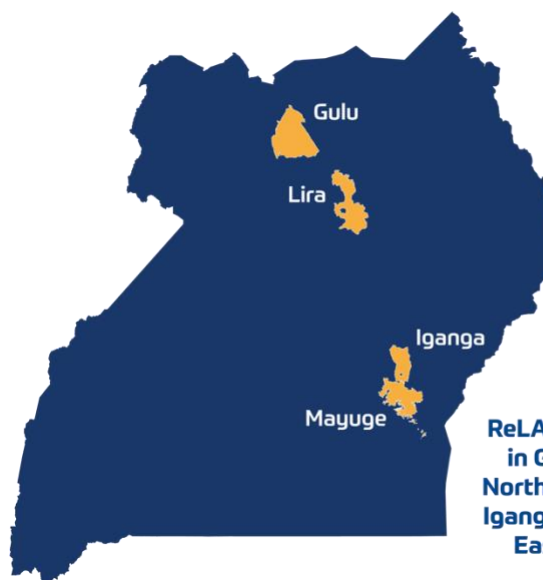
Learning, Acting, and Building for Rehabilitation in Health Systems (ReLAB-HS) – Uganda

Our goal is to support the strengthening of health systems that are responsive to the growing needs for rehabilitation across the lifespan.

The unmet need for rehabilitation and assistive technology (AT services) is urgent and growing, particularly for persons in vulnerable situations in low- and middle-income countries and countries affected by conflict. Funded by the United States Agency for International Development (USAID), Learning, Acting, and Building for Rehabilitation in Health Systems (ReLAB-HS) is a five-year global activity that supports the strengthening of health systems that are responsive to the growing needs for rehabilitation within populations. Uganda is one of two countries where ReLAB-HS is working to implement context-appropriate, innovative, comprehensive, and cost-effective interventions that strengthen health systems to provide rehabilitation and AT. ReLAB-HS focuses on integrating rehabilitation and AT services across all levels of care within health systems.

Context

The need for accessible rehabilitation and AT services in Uganda is clear despite limited available data to guide health policy. According to available



ReLAB-HS is working in Gulu and Lira in Northern Uganda, and Iganga and Mayuge in Eastern Uganda.

Rehabilitation is an essential health service along with prevention, promotion, treatment, and palliation. Rehabilitation focuses on the functioning of an individual and not the condition.



Rehabilitation professionals discuss how interprofessional collaboration can improve the management of a client with stroke. Photo courtesy of Physiopedia

data,¹ one in six people in Uganda have a health condition that could benefit from rehabilitation—this translates to 6.8 million people, with low back pain alone accounting for 1.5 million individuals in need of rehabilitation services. Similarly, according to the 2023 rapid Assistive Technology Assessment (rATA) for Uganda, 25.5 percent of Ugandans (12.4 million people) need one or more assistive products to support their functioning; yet, only 4.5 percent have access to the assistive products they need.

This growing need is attributed to unmanaged conditions resulting from infectious diseases, the epidemiological transition from infectious diseases to noncommunicable diseases and chronic conditions, the increased prevalence of injuries due to rapid urbanization and motorization, and increased life expectancy. However, the country's health system is under-resourced to adequately address this growing challenge, as rehabilitation and AT services are largely limited to tertiary levels of care (national referral hospitals, regional referral hospitals, and faith-based hospitals) and heavily dependent on development partners and the private sector. Furthermore, rehabilitation and AT

services are often separated from the “mainstream” health care system and inaccessible to many communities and individuals. Assistive products, when available, are often expensive, limited in variety, and of low quality. In addition, assistive products are often provided without accompanying services, including appropriate fitting, and training in use, repair, and maintenance, undermining the usefulness of the products.

The Government of Uganda has notably taken important steps to improve the accessibility and availability of rehabilitation and AT services. It is working to implement World Health Organization (WHO) recommendations for establishing rehabilitation and AT as important components of quality health services within the framework of universal health coverage, including increasing the number of rehabilitation professionals at the national, regional, and district levels. However, gaps remain in integrating rehabilitation and AT services into the health system to ensure that these services are accessible and affordable to all individuals when and where they need them.

Approach

ReLAB-HS is working with local actors to implement context-appropriate, innovative, and cost-effective service delivery models at the primary care level. Leveraging the use of technology and investing in local structures and human resources, ReLAB-HS aims to expand access to quality rehabilitation and AT services across the lifespan. ReLAB-HS has engaged with service users, including persons with functional limitations and civilian victims of conflict, various cadres of providers, and health system leaders and managers at all levels to co-design practical, feasible solutions.

¹ “Uganda key findings, 2019,” WHO Rehabilitation Need Estimator, Institute for Health and Metrics Evaluation, available from <http://ihmeuw.org/62x9>

ReLAB-HS is supporting the transformation of health systems in Uganda to integrate rehabilitation and AT, adapt to new challenges, share learnings, and support scale-up. Engaging stakeholders through a leadership institute, ReLAB-HS aims to inspire a new generation of rehabilitation leaders to strengthen strategic planning and effective governance within health systems. Gender equality and social inclusion serves as a cross-cutting theme to address marginalization and discrimination fueled by overlapping factors, such as gender, ethnicity, race, wealth, disability, age, and education. ReLAB-HS is engaging groups in vulnerable situations, including women and girls, in the design and delivery of local solutions. Through this inclusive approach, ReLAB-HS is playing an important role in promoting equal rights, opportunities, and respect for all.

Geographic Focus and Activities

In Uganda, ReLAB-HS is working closely with development partners such as the WHO to support the Ministry of Health to develop and implement plans to streamline the rehabilitation agenda at the national level. At regional and district levels, ReLAB-HS is focusing its efforts in the districts of Gulu and Lira in Northern Uganda, and in the districts of Iganga and Mayuge in Eastern Uganda. Since its inception, ReLAB-HS has consciously engaged with relevant stakeholders at district, regional, national, and global levels to introduce the activity, develop the foundation for collaboration, and strengthen Uganda's capacity to support the integration of rehabilitation and AT.

In close partnership with key stakeholders, ReLAB-HS has worked to achieve the following:

- Collaborated with the WHO to support the Government of Uganda to conduct the Systematic Assessment of Rehabilitation Situation (STARS), informing the development of the first-ever National Rehabilitation and AT Strategic Plan, which will guide and reinforce



Training participants observe practical demonstrations as part of the interprofessional clinical skills training for people with stroke. *Photo courtesy of Physiopedia*

efforts to enhance access to rehabilitation and AT services

- In collaboration with Makerere University, generated evidence on rehabilitation policy and prioritization by assessing the policy environment for rehabilitation, and on the feasibility of integrating rehabilitation at the community and primary care level
- Supported the Government of Uganda to conduct the rapid Assistive Technology Assessment (rATA) at the household level to estimate the met and unmet need for AT, barriers to accessing AT, and user satisfaction with AT, which is informing the development of the national strategic plan and will inform the development of the Priority Assistive Products List (APL) in collaboration with the WHO
- In collaboration with the WHO, assisted the Ministry of Health to integrate rehabilitation and AT-specific indicators in the national health management information system, allowing for the collection of critical data to measure health care workers' and health system performance, clients' health outcomes, and access to and use of rehabilitation services

- Supported rehabilitation professional associations and training institutions in using the International Rehabilitation and Education Training Toolkit to create plans that will strengthen professional regulation, academic and training programs, and continuing professional development to support the development of a skilled rehabilitation workforce in line with international standards
- Delivered an interprofessional clinical skills training program on stroke and AT to rehabilitation professionals through a blended learning approach of online courses and mentoring and in-person training
- Established four Networks of Care—district-level “networks” of public and private health care entities that are connected to support the integration of rehabilitation services within primary care and improve the coordination of care between different levels of the health system
- With local health and rehabilitation stakeholders in Gulu, Lira, Iganga, and Mayuge, co-designed a rehabilitation and AT service delivery model, inclusive of a clear referral mechanism, to support the integration of quality rehabilitation services into local health systems
- Identified priority areas of focus for integrating rehabilitation and AT into each district and developed corresponding action plans to enhance integration and the quality of care delivered
- Strengthened the capacity of community health care workers (village health teams and community health extension workers) to identify individuals in need of rehabilitation and AT services and refer them to primary care providers for detailed assessment, working to bridge the gap between communities and the primary care level

- Expanded the skill sets of primary health care providers in district-level health facilities to identify and refer individuals in need of rehabilitation and AT services, and to provide basic rehabilitation and AT services using the WHO’s Basic Rehabilitation Package Clinical Resource and the Training in Assistive Products
- Partnered with the Lira District Health Officer to establish an AT “hub” to store, manage, and distribute assistive products, enabling the provision of simple assistive products at primary health care facilities within communities

In Numbers

As a result of ReLAB-HS's contributions to date:

- Over **10,900** more people have improved access to rehabilitation and AT services.
- Over **7,380*** trainings on rehabilitation and AT have been completed.
- **18** rehabilitation and AT quality and integration processes have been strengthened in four local networks.
- **Eight** organizations have adopted the International Rehabilitation Education and Training Toolkit.

Implementing Partners

ReLAB-HS is led by the Johns Hopkins International Injury Research Unit at the Johns Hopkins Bloomberg School of Public Health. Other global partners include Humanity & Inclusion, Momentum Wheels for Humanity, the Nossal Institute for Global Health at the University of Melbourne, and Physiopedia. The consortium is working in close partnership with national, regional, and district actors to catalyze and strengthen the national agenda for rehabilitation in the health system.

ReLAB-HS Uganda Contact Details

relabhsconsortium@gmail.com

*Reflects the number of course completions, as trainees may have completed one or more courses

ReLAB-HS is made possible by the generous support of the American people through the United States Agency for International Development (USAID).

Our partners

