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ReLAB-HS

ReLAB-HS Closeout Brief: Burma

Background

Learning, Acting, and Building for Rehabilitation in Health Systems (ReLAB-HS) is funded by the United States Agency for International Development (USAID) and implemented by the Johns Hopkins University with partners Humanity & Inclusion, Momentum Wheels for Humanity, the University of Melbourne, and Physiopedia. The five-year activity supports the strengthening of health systems that are responsive to growing needs for rehabilitation across the lifespan. ReLAB-HS builds leadership and creates an enabling environment for lasting improvements in the integration of rehabilitation and assistive technology (AT) into health systems.

ReLAB-HS completed activities in Burma in September 2023. While working in a challenging setting affected by political instability and conflict, ReLAB-HS made important progress in advancing the rehabilitation agenda in Burma since its launch in June 2021. Working with local stakeholders, ReLAB-HS identified opportunities to strengthen rehabilitation and AT services in the country's informal health system and advocated for the inclusion of rehabilitation services in relevant plans and policies, laying a strong foundation for continued efforts.

The unmet need for rehabilitation and AT in Burma is high. According to available data, it is estimated that approximately [16 million people](#)—approximately 28 percent of Burma's population—could benefit from rehabilitation. As modern medicine increases the average life expectancy, the needs of the aging population will continue to grow. Additionally, there is an increasing prevalence of both noncommunicable diseases and injuries related to armed violence, which has led to growing rehabilitation needs within the population.

Through the National Health Plan (2017-2021), Burma recognized the need for integrative rehabilitation services and strived for universal health coverage, including strengthening rehabilitation as a crucial element. However, after the military coup in February 2021, [the country's health care system nearly collapsed](#). Political turmoil and the eruption of violence disrupted services at hospitals and rehabilitation centers, limiting access to services.

ReLAB-HS adapted implementation to these unexpected circumstances in Burma, focusing efforts on strengthening the rehabilitation sector in the informal health system, which is comprised of various nongovernmental organizations (NGOs) and community-based organizations providing health care services. Activities were concentrated in Kawkaireik Township in Kayin State, a remote area in

Southeast Burma that hosts a significant number of internally displaced persons and other communities in vulnerable situations. Different parts of Kawkaireik are controlled by different ethnic groups who created their own health organizations to serve the people in the area. Kawkaireik has a large presence of ethnic health organizations, providing ReLAB-HS the opportunity to form local partnerships, improving access to populations in remote or hard-to-reach areas not covered by the formal health system.

ReLAB-HS designed activities around the following objectives:

1. Improve delivery and demand of quality rehabilitation and assistive technology services at the community level
2. Develop the capacity of health system leaders, managers, and providers to deliver rehabilitation and assistive technology
3. Support the development and implementation of plans and policies for rehabilitation and assistive technology

Engaging local organizations and rehabilitation professionals within Kawkaireik, ReLAB-HS worked to strengthen health care workers' capacity to provide quality rehabilitation services in the township. At the national level, ReLAB-HS collaborated with the World Health Organization (WHO) and associated Health Cluster members to advocate for the inclusion of rehabilitation services in various plans and health care packages, including the Humanitarian Response Plan 2023.¹

Key Achievements

During implementation, ReLAB-HS contributed to strengthening rehabilitation and AT services within the informal health system of Kawkaireik Township, as well as other parts of the country, and made the following key achievements under the specific ReLAB-HS objectives.

Objective 1: Improve delivery and demand of quality rehabilitation and assistive technology services at the community level

ReLAB-HS implemented activities to support a better understanding of rehabilitation and AT in the Burmese context. To strengthen rehabilitation and AT service delivery, ReLAB-HS worked with local stakeholders to identify what works well and the challenges to overcome, promoted adoption of best practices among service providers, and supported local ownership to sustain efforts.

To better understand factors affecting access to and demand for AT services in Kawkaireik Township, ReLAB-HS interviewed key AT stakeholders, including AT users, service providers, and suppliers. Through these interviews, **ReLAB-HS identified the main challenges to access and provision of AT services and proposed recommended actions.** ReLAB-HS later consulted AT users, service providers, and suppliers to determine if the recommended actions were relevant to the local context and to consider challenges that might emerge in response to implementing these recommended actions. A report capturing interview findings and recommendations was produced and disseminated to stakeholders to support the design of the improved service delivery models in Kayin State.

¹ ReliefWeb. "Myanmar Humanitarian Response Plan 2023." ReliefWeb. January 25, 2023.
<https://reliefweb.int/report/myanmar/myanmar-humanitarian-response-plan-2023-january-2023#:~:text=In%20agreement%20with%20the%20development, support%20through%20programming%20focused%20on>

In Kayin State, there was no formal mechanism specific to rehabilitation to facilitate coordination between organizations providing rehabilitation services. To fill that gap, **ReLAB-HS supported local stakeholders in establishing a technical working group (TWG) to improve coordination between member organizations** (rehabilitation and AT-focused health care organizations). The TWG enables stakeholders to stay informed of each other's rehabilitation and AT-related activities to avoid duplication of efforts. This coordination mechanism is now in place to facilitate the effective allocation of resources, development of referral pathways, and effective service delivery to individuals and communities who greatly need them.

As part of ongoing efforts to support the integration of rehabilitation and AT into existing health care services, **ReLAB-HS identified good practices that improve access to rehabilitation and AT services**. Bearing in mind that many community organizations play important roles in the health system, especially where health services are disrupted, ReLAB-HS evaluated interventions by international and local NGOs and conducted interviews with community-based organizations in Kayin State. This work identified specific factors that led to the successful integration of rehabilitation services into the informal health system, such as raising awareness and forming trusted relationships among community members, and taking practical steps to improve service access. These key findings promote the importance of integrating rehabilitation into mainstream services and will guide local stakeholders and service users to support the design of future interventions that respond to this need.

ReLAB-HS conducted a series of webinars on rehabilitation and gender equality and social inclusion (GESI) to strengthen rehabilitation professionals' adoption of GESI practices in their service provision. Using the [Rehabilitation Community Platform](#), ReLAB-HS engaged rehabilitation professionals participating in the Rehabilitation Support Network online community of practice. The webinars improved rehabilitation professionals' knowledge of GESI, promoting the provision of inclusive rehabilitation services. The webinars also provided a space for rehabilitation professionals to share their knowledge and practices with each other, reinforcing the adoption of a GESI approach in their service provision.

Objective 2: Develop capacity of health system leaders, managers, and providers to deliver rehabilitation and assistive technology

Using available tools and resources, ReLAB-HS focused capacity building efforts on strengthening the skills of health care workers and rehabilitation providers. With its activities, ReLAB-HS created more opportunities for rehabilitation professionals, health care workers, and volunteers to develop their skills, strengthening and expanding the rehabilitation workforce.

Through its clinical skills training program, ReLAB-HS **strengthened the capacity of rehabilitation professionals in Burma**. The program, which employed a hybrid learning approach of online courses, virtual mentorship by international experts, and in-person training, included content curated specifically to the training needs and interests² expressed by the 17 rehabilitation professionals (physiotherapists and one prosthetist and orthotist) who participated in it. As a result of the training, assessments show that rehabilitation professionals demonstrated improved clinical skills and increased knowledge in early intervention and the management of patients who require rehabilitation, including conducting proper assessments and interviewing patients, setting goals, and designing treatment plans. In addition,

² Program topics included Gait Analysis and Training; Communication and the Medical Interview; Stroke; Family-Centred Developmental Skills Training in Early Intervention; and Physical Activity and the Community Setting.

they demonstrated a better understanding of and the ability to conduct more effective medical interviews, communicate effectively with patients, as well as to analyze gait patterns and [implement strategies to improve the condition](#). Importantly, these rehabilitation professionals now have a replicable model for delivering clinical skills training in a sustainable, scalable way using the Clinical Skills Training Tool (CSTT) of the [International Rehabilitation Education and Training Toolkit \(IRETT\)](#). With the CSTT, they will be able to develop relevant programs that they can deliver in their current work or community setting, further strengthening the rehabilitation workforce to deliver quality services.

By engaging rehabilitation professionals through the Rehabilitation Community Platform and relevant trainings, **ReLAB-HS has forged stronger connections between rehabilitation professionals across the country and increased access to learning opportunities**. Leveraging digital platforms and tools, ReLAB-HS has enabled rehabilitation professionals in Burma to have direct access to global standards of practice, sharing evidence-based practices and up-to-date resources via international mentors, [Plus](#) eLearning courses, and the [Rehabilitation Resource Repository](#). This has given rehabilitation professionals improved access to more learning and continuing professional development opportunities intended to strengthen the quality of rehabilitation services. Since ReLAB-HS activities ended in Burma, rehabilitation professionals have continued to engage on the platforms, with 21 members actively using the Rehabilitation Community Platform and 61 participants taking courses on Plus.

ReLAB-HS supported the integration of rehabilitation services into primary care in Kawkaireik Township by strengthening the capacity of health care workers to provide rehabilitation services. ReLAB-HS trained 20 doctors, nurses, and physiotherapists and 43 community health workers (CHWs) and volunteers on early rehabilitation interventions for injuries, including identification of needs, provision of basic health education, and early referral for rehabilitation. Additionally, ReLAB-HS trained 58 primary health care workers and volunteers on the identification and referral of adults with neurological conditions and children with developmental disabilities and conditions. ReLAB-HS prioritized these topics in response to high prevalence in the area of both noncommunicable diseases with associated neurological conditions among adults and developmental delays associated with nutrition and communicable disease among children. These health care workers and volunteers are now providing services to communities in vulnerable situations being reached by ethnic health organizations.

ReLAB-HS supported these same primary health care workers and volunteers to complete the World Health Organization's **Training in Assistive Products (TAP)**. The training provided them with the skills needed to identify needs for AT in their communities, provide basic AT services, and refer individuals with complex cases to specialized AT services. In coordination with the WHO, ReLAB-HS also supported translation of [TAP modules](#) into the Burmese language. Rehabilitation service providers in the country, including volunteers, now have access to useful resources to improve their knowledge of the provision of assistive products. Leveraging this training resource and supporting its adoption locally will improve the quality of services provided to service users in the community.

Through its training activities, ReLAB-HS strengthened the capacity of rehabilitation professionals, staff from ethnic health organizations, CHWs, and volunteers for the provision of quality rehabilitation and AT services. By expanding the knowledge and skills of both rehabilitation and non-rehabilitation health workers, ReLAB-HS supported the expansion of a skilled rehabilitation workforce that is more capable of responding to growing rehabilitation and AT needs in Kayin State.

Objective 3: Support development and implementation of plans and policies for rehabilitation and assistive technology

To support planning and policy development for rehabilitation and AT in Burma, ReLAB-HS collaborated with partners at both the local and international levels to advocate for the inclusion of services in relevant plans.

As part of a collaborative effort to develop a comprehensive response to humanitarian needs in Burma, ReLAB-HS successfully advocated for the **inclusion of rehabilitation and AT (and related indicators) in the [Humanitarian Response Plan \(HRP\) for 2023](#)**. The HRP is a guiding document designed to inform the implementation of priority activities that respond to expressed needs of populations in settings that require a humanitarian response. ReLAB-HS participated in Health Cluster meetings to advocate for the prioritization of rehabilitation as a health focus, providing feedback and input on the development of the HRP and emphasizing the need to focus on people in need of rehabilitation as key stakeholders in the design and delivery of health services. This achievement will support organizations to consider including rehabilitation activities in essential health care services provided to populations in vulnerable situations, especially those affected by conflict, and that rehabilitation-related activities receive a reasonable amount of funding.

At the local level, **ReLAB-HS co-developed with ethnic health organizations a guidance note with recommendations for how to incorporate rehabilitation and AT services into their strategies**. To support implementation of recommended actions, ReLAB-HS shared all training materials to enable organizations to carry out similar trainings or refresher trainings for the health workforce in Kayin State. The inclusion of rehabilitation and AT services in ethnic health organizations' strategies will foster integration of rehabilitation and AT services at the community level.

ReLAB-HS has made important progress in the effort to prioritize rehabilitation and AT services through the available health care delivery mechanisms. This work has important implication for strengthening the country's health system beyond Kawkaik Township, wherein health system actors start to consider rehabilitation as an integral part of health systems.

Recommendations

Further strengthen the capacity of health care professionals, CHWs, and volunteers on rehabilitation and AT in Kayin State.

- Building on progress thus far, there is an opportunity to continue capacity building efforts to strengthen rehabilitation and AT service delivery in the township. Future interventions should leverage these gains and work toward filling the gap in quality rehabilitation and AT services across the region. The people living in hard-to-reach areas in Kayin State have limited access to secondary- and tertiary-level health care facilities where rehabilitation services are available. They rely on CHWs and village-based volunteers to receive health care services. Expanding the capacity of that health workforce to include the provision of rehabilitation and AT services will mitigate access barriers to rehabilitation and AT services.

Continue to enhance coordination between different health service providers and rehabilitation service providers.

- In Kayin State, different service providers among public health care facilities, private clinics, international and local NGOs, and ethnic health organizations are providing health care and rehabilitation services. In this context, reliable coordination among these organizations is crucial for streamlined and effective service delivery. Future interventions should continue to strengthen the coordination mechanisms between service providers in the area.

Continue to advocate with policymakers for the integration of rehabilitation services into health care packages.

- Guidance available through resources such as the HRP define the activities to be prioritized and the resources required from different sectors to appropriately respond to emergency situations. The inclusion of rehabilitation services in such plans and policies can significantly improve the accessibility of those services by communities in vulnerable settings.
- Advocacy efforts should continue to engage the policymakers of ethnic health organizations. This will ensure that all people who need rehabilitation can receive quality services in a country with diverse health systems.

Increased funding and resources is necessary to improve the rehabilitation and AT services in the country.

- To make services available to people who need rehabilitation and AT, especially in remote parts of the country, and to improve the quality of those services, further funding and resources are necessary. Implementing organizations should advocate with ethnic health organizations, other local organizations, and development partners to include specific budget lines for rehabilitation and AT services, infrastructure of health care facilities, and assistive products procurement as part of their resource allocation process. Additionally, efforts should be made to coordinate resources according to identified priorities. Such strategic investments will expand access to quality services.

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Our partners

