

Strengthening the public sector to serve the poor: Haiti

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Lit review

- Very little literature examining this topic
- World Bank paper
- DFID review



World Bank Assessment

- Does the pursuit of universal coverage by free government services constitute the most promising way of meeting the needs of the most disadvantaged population groups?
- “Probably Not”
- “difficult to envisage the availability of adequate government funds to permit significant progress toward a universal coverage goal in most, if not all, developing and transitional economies



Are Free Government Health Services the Best Way to Reach the Poor? DR Gwatkin. September 2004. IBRD/World Bank



DFID Review

Major Strategies

- Ensuring the poor are covered by public health services
- Improving the access to, and quality of, personal health services
- Avoiding heavy expenditures by the poor on health care which exacerbates poverty



PIH Model of Care

- Access to primary health care
- Free health care and education for the poor
- Community partnerships
- Addressing basic social and economic needs
- Serving the poor through the public sector





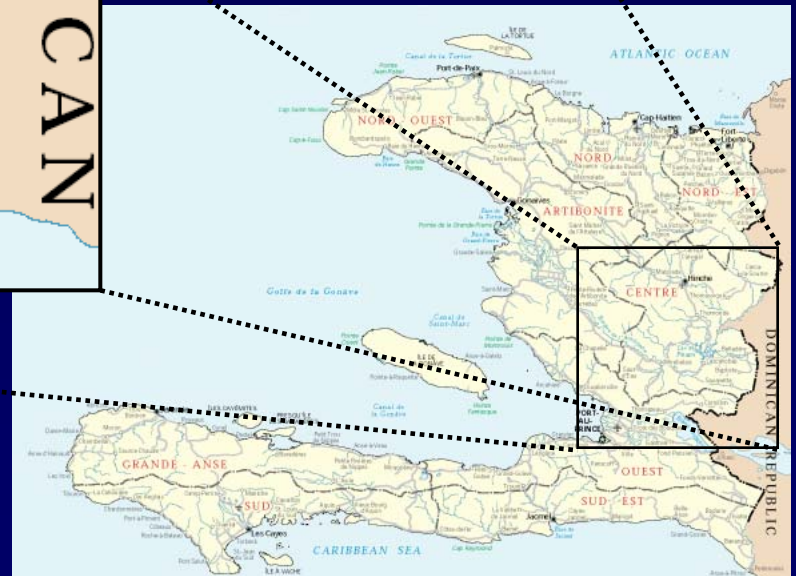
Seven Sites:

Cange

6 Communes:

Lascahobas,
Belladeres, Boucan
Carre, Thomonde,
Hinche, Cerca-la-
Source

DOMINICAN



Hinche

- Pop: 70,000, department capital
- 2003
 - VCT implemented: **43/year (25% +)**
 - **Clinic Visits: 10 per day**
 - **60-bed hospital averaged 3-6 patients**



Improving the MOH site

- Refurbished ward
- Built new TB ward
- Provide essential meds, supplies, power
- Improve telecommunications capacity
- Increased MOH staff; increased salaries and benefits
- CHW outreach to patients in community



Mukherjee, Joia. Testimony submitted to US House Committee on Foreign Affairs. September 25, 2007



Hinche today

- Clinic – 300 patients per day
- 600 HIV tests per month
- 2006 – 8,500 HIV tests done – 5% +
- 1000 HIV+ patients being followed (1/3 on ART)
- Over 400 patients treated for TB since 2004
- MDR-TB referral center



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Affect on General Medical Care

Number of Ambulatory Visits per Day

Site	Before July 02	End of 2003
Lascahobas	20	400
Belladere	0	150
Thomonde	10	250
Boucan Carre	10	250

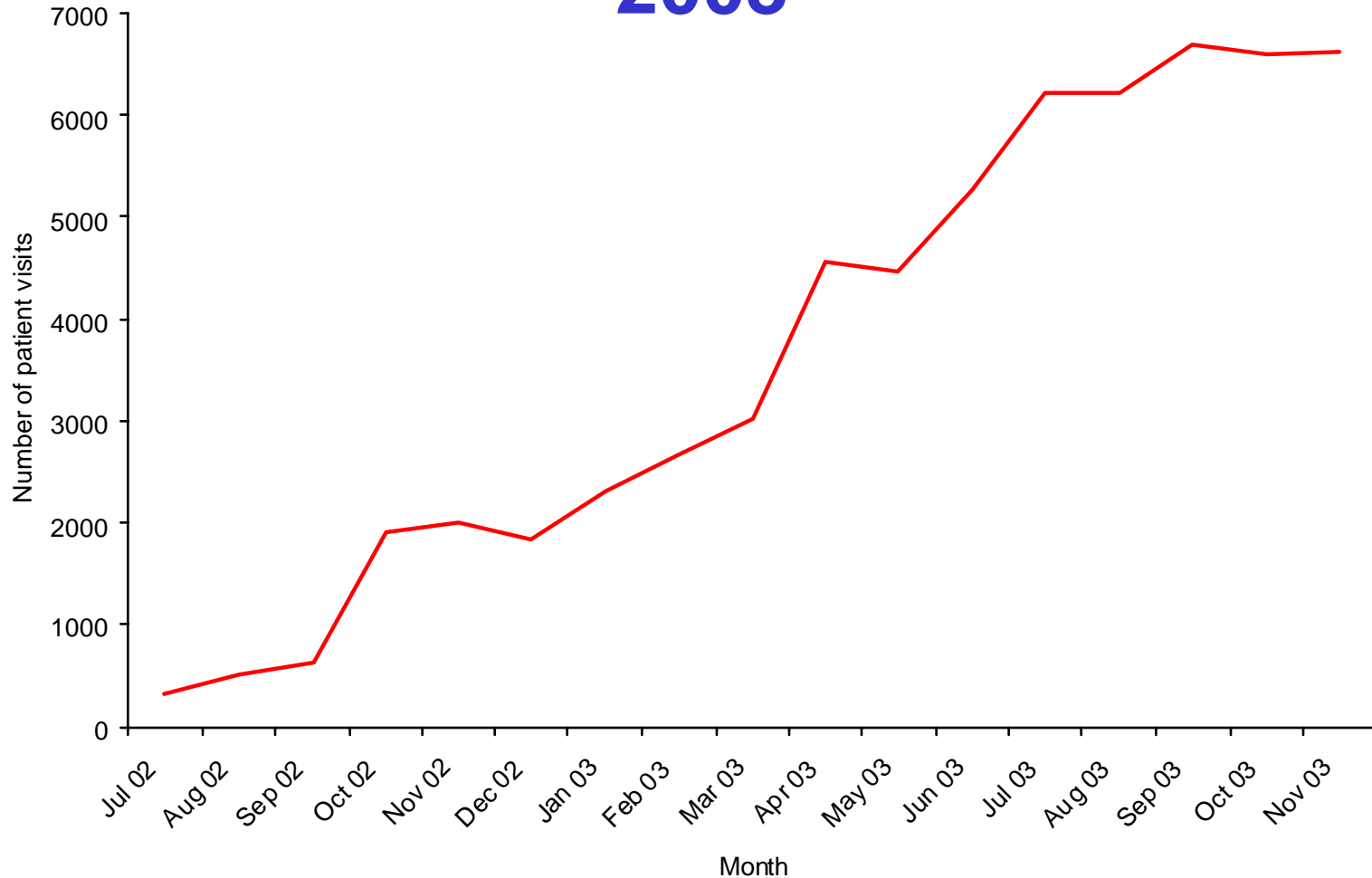


Boucan Carre



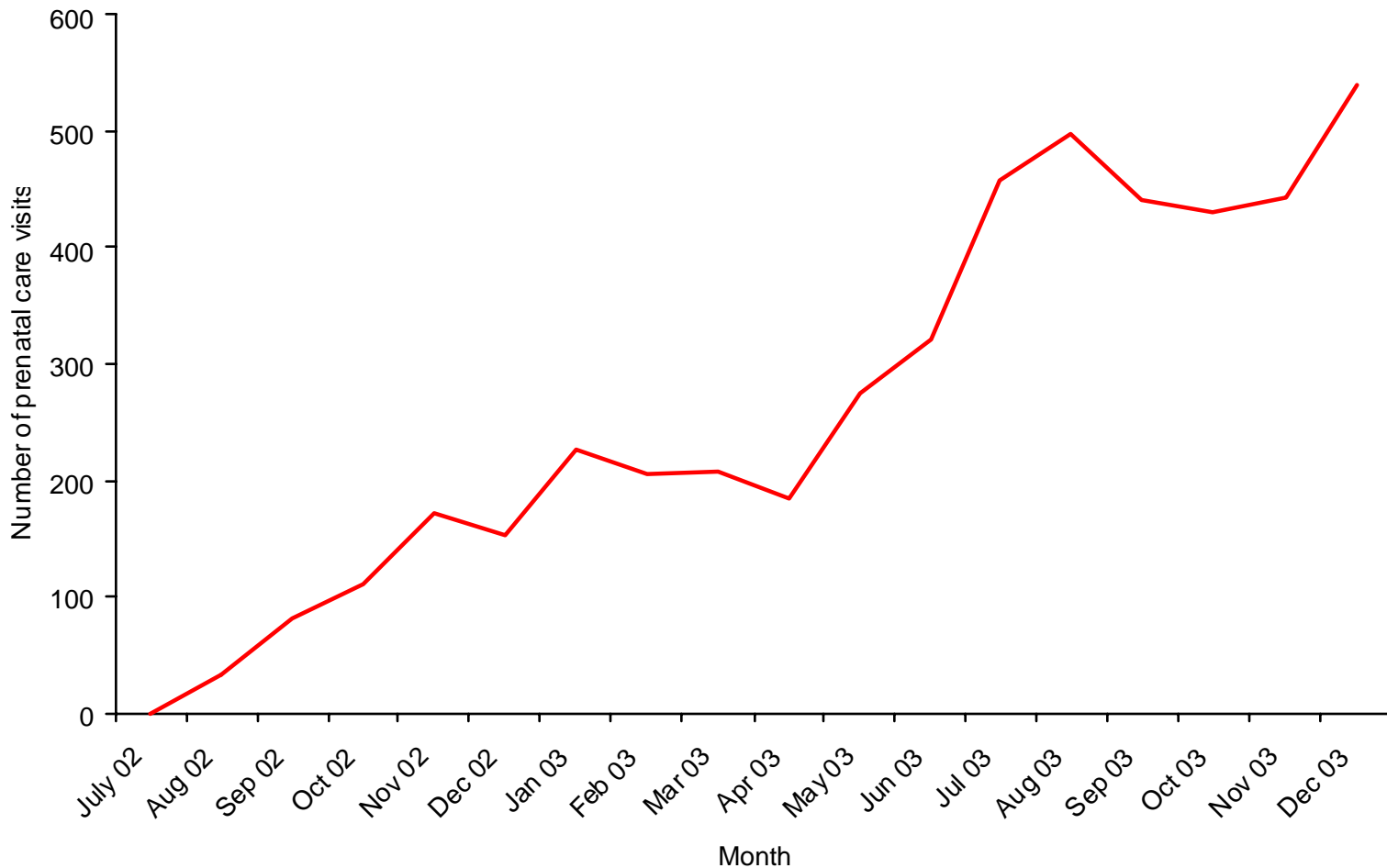
Patient visits

Lascahobas, July 2002 - November 2003



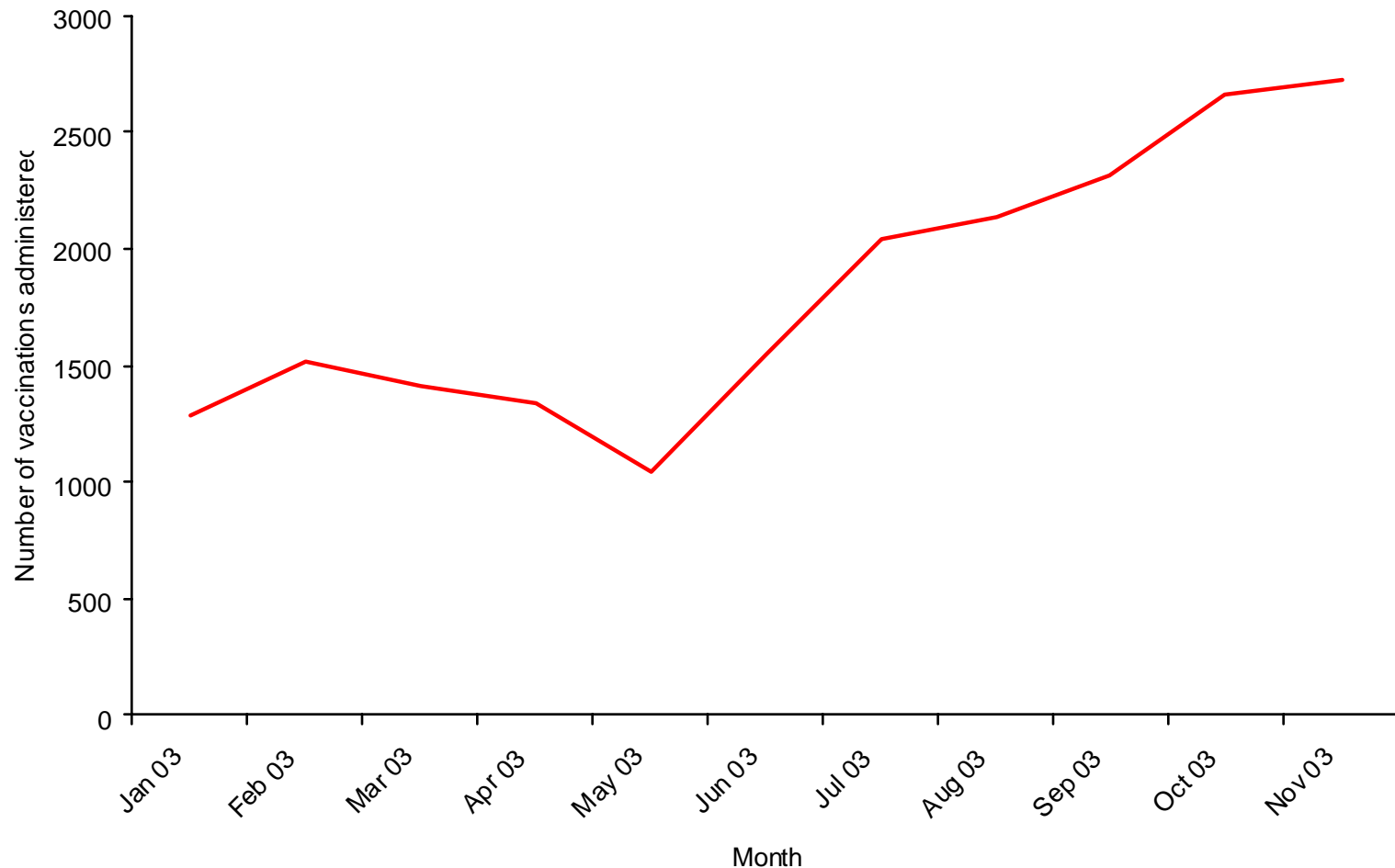
Lambert, W. Concentration Paper Title: How a Comprehensive HIV Program Strengthens Primary Health Care: New Hope for the Public Sector. MPH Thesis, May 2006

Prenatal care visits (LC) October 2002 - December 2003



Lambert, W. Concentration Paper Title: How a Comprehensive HIV Program Strengthens Primary Health Care: New Hope for the Public Sector. MPH Thesis, May 2006

Vaccine administration (LC) January 2003 - December 2003



Lambert, W. Concentration Paper Title: How a Comprehensive HIV Program Strengthens Primary Health Care: New Hope for the Public Sector. MPH Thesis, May 2006

Expansion Successes

- Over 9000 HIV-positive people being followed
- 2667 patients now being treated with directly observed HAART (2006)
- 6 public health clinics are operational in the central plateau now with over 1.5 million ambulatory visits per year



Strengthen PHC

- **Improving services cannot be done without a investment in health care workers**
- **Public health clinics stand empty because salaries are too low and working conditions are unacceptable**
 - **Salary increases and staff benefits**
 - **Full formulary**
 - **Lab and clinic equipment**
 - **Integrated services**



References

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- Lambert, W. Concentration Paper Title: How a Comprehensive HIV Program Strengthens Primary Health Care: New Hope for the Public Sector. MPH thesis. May 2006.

Gwatkin, DR. Are Free Government Health Services the Best Way to Reach the Poor? September 2004. IBRD/World Bank

Institute for Health Sector Development. Which Health Policies are Pro-Poor? DFID

Mukherjee, J. Testimony submitted to US House Committee on Foreign Affairs. September 25, 2007



Thank you

