

## Implementing and integrating NTD programmes in Liberia: Reflections from key stakeholders

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### Background

Liberia's health system is recovering following prolonged conflict and humanitarian crises including the Ebola epidemic. Strengthening the system is essential to ensure health and social protection for all and to support progress towards the Sustainable Development Goals.

NTDs are a particular health issue for Liberia, disproportionately affecting poor, rural and marginalised populations. Understanding how to reach these vulnerable communities with existing interventions is essential. Liberia's NTD programme targets onchocerciasis, lymphatic filariasis, soil-transmitted helminths and schistosomiasis using mass drug administration, but despite the 2012 World Health Organization (WHO) roadmap, aimed at 'accelerating work to overcome the global impact of NTDs', progress is slow and in many contexts there are significant implementation gaps (Hotez, 2015).

The COUNTDOWN consortium is conducting research into the implementation challenges affecting NTD control and elimination programmes in Liberia. The intention is to facilitate a programme that responds to Liberian priorities whilst managing the complex terrain of donor relationships and inter-sectoral partnerships. This study aimed to identify issues around ensuring a coordinated, collaborative and integrated approach to NTD programme delivery. A participatory stakeholder meeting was held, during which a variety of qualitative methods were used to elicit the views of stakeholders at all levels of the health system. The findings discussed in this brief draw only from key informant interviews completed at the different levels of the health system.

### Key messages

- Inter-departmental working within the Ministry of Health (MoH) for the control and elimination of NTDs is currently beneficial in Liberia, particularly in the sharing of technical information and in collaborative programme planning. At county level, ad hoc sharing of resources between programmes also supports the quality of implementation and reduces delays.
- Collaborations involving inter-sectoral or multi-sectoral partnerships are hindered due to competing priorities within and between sectors, as well as by demands for remuneration to attend cross-sector meetings by stakeholders.
- Donor priorities and the inflexibility of funding flows present challenges to the integration of NTD programme activities, and resource shortages and delays can lead to inequities in programme support and delivery. Bringing donors and implementing NGO partners together to align interests and funding flows is essential for the country ownership of programme delivery strategies.
- At the national level, NTD programme policies and strategies are well documented and aligned to those of the wider health systems. However, there is a need to improve the communication of policies and strategies to lower levels of the health system to ensure appropriate monitoring, support and reporting.

## How the study was conducted

This study was completed between January 2017 and January 2018 at the national level and in Maryland and Bong County, Liberia. Sites were selected for maximum variation in disease endemicity and prevalence, programme impact (measured by geographic and therapeutic coverage), literacy, wealth and geography.

Several qualitative methods were used to draw out the views of stakeholders engaged with the NTD programme at all levels of the health system. This brief deals with the outcomes of key informant interviews in relation to programme integration and implementation of which thirteen were conducted with purposively selected stakeholders at the national, county, district and facility levels. Only staff directly involved in the MDA aspect of the programme were involved, the intention being to explore the realities of MDA implementation from a health systems perspective and to identify what helps and hinders the programme. Specific reference was made to financing, health workforce, service delivery leadership and governance. Data was analysed using a thematic framework approach.

## Key findings

Key informants described that co-ordination and collaboration between departments within the Liberian MoH, as well as other sectors, is essential to ensuring scarce resources are used effectively. Informants described prioritising co-implementation and integration in the delivery of MDA, saying:

‘if we fragment our effort it will be difficult to collaborate effectively.’

**International level, NTD programme partner**

Some elements of co-ordination and collaboration have been successful and present learning opportunities, however, some important bottlenecks remain.

‘If you have a scarce resource and you integrate them it is believed that you are going to use less resources to get maximum output. So, we assumed that integrating will help us use the scarce resources to have a large output.’

**Ministry of Health, NTD programme staff**

## Strengthening intra-sector collaboration

Key informants at all levels described some level of collaboration with departments in the MoH. At the national level, this focused around technical information sharing and collaborative programme planning, whereas at the county and community levels informants described sharing between programmes when resources were scarce. Collaboration with other departments within the MoH was described by national and international informants as being facilitated by best practices, such as working group meetings that facilitate information sharing.

‘Other programmes, like the community Health Division, are responsible for all community health activities... we cannot divorce their work from ours. It is indispensable. Health promotion for example: they are responsible for developing health promotional materials... That work is also indispensable. There are other programmes that we cannot work without them being part of what we do.’

**National level, NTD programme staff**

Challenges remain for the NTD programme in establishing and maintaining multi-sectoral partnerships. For example, stakeholders from other sectors often demand financial remuneration to attend collaboration meetings, especially when it is known that international

donors/NGDOs are supporting activities. Sectors' conflicting priorities can also hamper engagement of stakeholders in decision-making positions.

Lack of collaboration and co-ordination can lead to resource wastage. For example, deworming activities, implemented through schools by the Ministry of Education, need to be aligned with MoH community-based deworming activities. Currently, there is limited co-ordination and collaboration between the two sectors at the county level, however, this needs to be strengthened at all levels to reduce duplication and provide technical and implementation support. Further research to understand how to foster effective collaboration could be beneficial.

### **Restricted and inflexible funding flows**

The NTD programme strongly depends on donor and/or NGDO support to implement its activities but this relationship is not always easy. In contrast to donors' responses, national informants described how the restricted, inflexible nature of funding can present challenges when trying to implement an integrated approach to NTD management. Donors/NGDO are often highly prescriptive about the approach to be taken, and national and county informants described disruption to meet these requirements, negatively impacting on the intervention delivery. Extensive reporting needs also added to programme staff workloads with implications for staff retention and motivation.

'The second thing that makes it difficult... funders are driven by their own passion or their own institutional policies and guideline. So you are winning fund from an institution that is fighting against onchocerciasis and they are looking at their onchocerciasis deliverables and they are setting targets that you have to achieve to get funding for onchocerciasis and you want to implement in an integrated approach, it can be a little bit challenging how you manage such fun.'

**National level, NTD programme staff**

National-level informants also described that the activities partners fund differs depending on their donors' requirements which can create friction among programme staff. For example, salary support for some health workers and not others leads to staff wanting to work on a specific disease(s) where salary support is attached, hampering effective integration. Also, alterations to budgets and resource availability was described as creating problems for programme reach and ultimately challenging equity in programme delivery.

'Some partners could have a vested interest in a specific strategy and not actually in line with Government policy or what the Government wants to do in line with...'

**National level, NTD programme staff**

### **Improve communication of key programme strategies**

National-level informants described receiving clear policies and strategies that document the way in which the NTD programme should be implemented. These link to overarching health systems policies, and participants felt that they had enhanced their importance within the MoH and could help facilitate interactions with other sectors. At county and facility levels, key informants described a lack of understanding or knowledge of such policies and programmes, and in some cases a lack of project reporting tools. Some of these informants said they would like a clearer understanding of programme policy and guidelines to support them in monitoring and supervising staff activities.

## Recommendations

- The continuation of working group meetings within the MoH is essential to ensuring ongoing cross-departmental planning and co-ordination. These working structures could also be explored to promote better inter-sectoral collaboration.
- Further work is needed to understand how to encourage a culture of mutual benefit for all stakeholders necessary to ensuring effective collaboration for NTDs. This could include representatives from education and agriculture. Examples of existing inter-sectoral collaboration could be considered as a learning model for understanding and developing best practices for inter-sectoral action.
- Lobbying and dialogue with international donors and NGDO partners is essential. This would encourage more flexibility and control by the NTD programme in the allocation of resources and programme delivery, aligning it with governmental priorities.
- Communicate policies and strategies guiding the implementation of the NTD programme to county and health facilities. This would support them in monitoring and supporting programme delivery.

## References

- World Health Organization (WHO). 2012. Accelerating work to overcome the global impact of Neglected tropical diseases roadmap for implementation. World Health Organization: Geneva.
- Hotez P.J. 2015. Blue Marble Health Redux: Neglected Tropical Diseases and Human Development in the Group of 20 (G20) Nations and Nigeria. *PLoS Negl Trop Dis.* 28; 9(7):e0003672. doi: 10.1371/journal.pntd.0003672
- World Health Organization (WHO). 2005. Generic framework for control, elimination and eradication of neglected tropical diseases. World Health Organization: Geneva.
- Thomas, B., Kollie, K., Koudou, B., and Mackenzie, C. 2017. Commentary: restarting NTD programme activities after the Ebola outbreak in Liberia. *Infectious Disease of Poverty.* 6:52

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