



Policy Brief

PROMOTING SOCIAL ACCOUNTABILITY FOR IMPROVED HEALTH SERVICE DELIVERY IN SIERRA LEONE

Executive Summary

This brief outlines the critical need for enhanced social accountability in Sierra Leone's health sector, focusing on improving RMNCAH and Nutrition services in five districts; including Bonthe, Falaba, Kailahun, Tonkolili, and Western Area Rural (WAR) by 2024. It highlights specific challenges in maternal health and staffing shortages, proposing targeted solutions to address high maternal mortality rates and improve service delivery outcomes. It is part of the project titled "**Promoting Social Accountability for Improved Health Service Delivery in Sierra Leone**" and the goal is to improve the health policy and funding landscape for RMNCAH+ Nutrition in Sierra Leone through social accountability processes, advocacy, dialogue, and collaboration between the government, private sector, and civil society organizations by 2024.

Maternal mortality remains a significant challenge in Sierra Leone, particularly in Bonthe District, where 17 maternal deaths occurred within 11 months in 2023 due to inadequate referral systems. Additionally, inadequate staffing in Tonkolili, Kailahun, Falaba, and the Western Area Rural Districts hampers the effectiveness of health services. Improving health service delivery and accountability is crucial to achieving better health outcomes for women, children, and adolescents. This policy brief addresses critical health service delivery issues in Sierra Leone, specifically maternal mortality in Bonthe District and staffing shortages in Tonkolili, Kailahun, Falaba, and Western Area Rural (WAR) Districts. The brief outlines the problems, evaluates current policies, and recommends actions to improve maternal and child health through enhanced social accountability, advocacy, and collaboration.

Key Objectives



- ❑ To strengthen social accountability processes in the health sector, focusing on RMNCAH+ Nutrition services in target districts.
- ❑ To advocate for improved health policies and increased funding for RMNCAH+ Nutrition programs at national and district levels.
- ❑ To facilitate dialogue and collaboration between government, private sector, and civil society organizations to enhance the delivery of primary healthcare services.
- ❑ To develop and implement a monitoring framework to track improvements in health policy implementation and funding allocation for RMNCAH+ Nutrition by 2024.



KEY ISSUES ACROSS TARGETED DISTRICTS

CASE STUDY OF BONTHE:

Bonthe District is divided into two areas, Mattru Jong, the mainland and Bonthe Island. The Island and other riverine communities have health facilities, but cannot handle referrals because referrals have to be made to UBC Hospital which is in the mainland of Mattru Jong. This means all cases of pregnancy have to come across the sea to seek ANC. Traditional Birth Attendants, traditional birth attendants (TBAs), have been hugely discouraged from carrying home deliveries and have been encouraged to come on board facilities and contribute positively in the health sector, but with the huge problem the district faces, successful referrals which is key to help reduce maternal deaths becomes impossible, which then paves the way for the increase of home deliveries and the increase in maternal deaths in the district.

Tihun Community Health Center, located on the mainland of Mattru Jong, recorded no maternal deaths between 2020 and 2023, demonstrating the importance of accessible referral systems.

KEY ISSUES/CHALLENGES

The entire Bonthe District does not have sea ambulances and local boats to make referrals to the mainland of Mattru Jong where UBC CHC which equipped to handle all kinds of referrals is situated. This challenge then poses a serious threat to the lives of pregnant women and their unborn babies, leaving them with high risks of maternal deaths.

Between January and November of 2023, referrals of pregnant women were a huge challenge which resulted in 17 maternal deaths in the district.

“We are having a district that is having an extremely difficult terrain; making it extremely hard for our people to receive emergency healthcare services when they need one. There is every need to support us with sea ambulance services so that no women or child dies.”

Civil Society Activist, Bonthe



TONKOLILI, KAILAHUN, FALABA, AND WESTERN AREA RURAL (WAR) DISTRICTS:

These districts face severe staffing shortages, with volunteers outnumbering paid health workers across all 11 facilities targeted. The irregular availability of volunteers strains the limited paid staff, leading to reduced service quality.

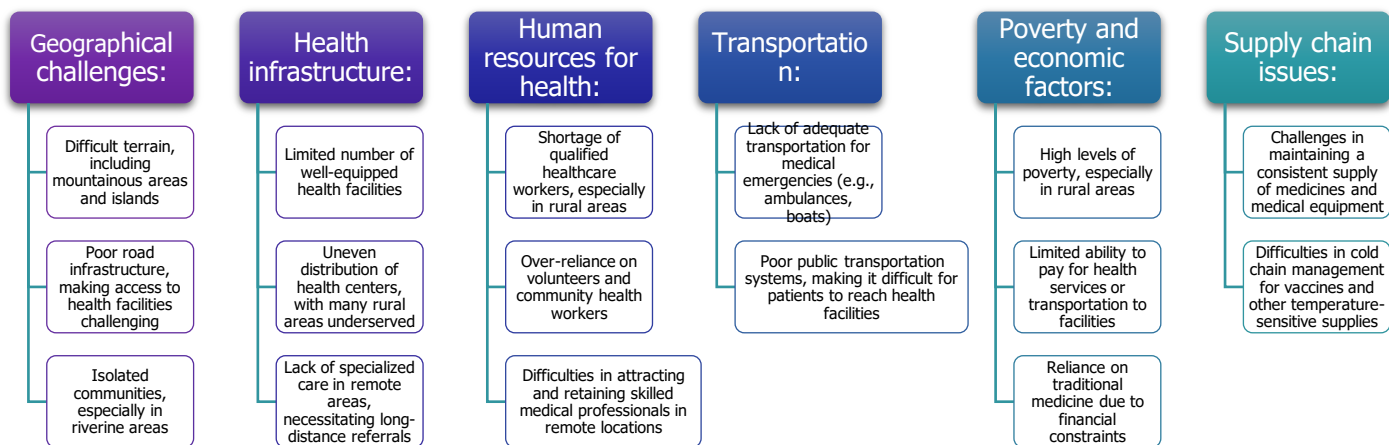
This situation has compelled health workers to demand payments before providing care, which deters pregnant women, lactating mothers, children, and adolescents from seeking essential health services.

Efforts to recruit and retain qualified health workers are essential to alleviate this burden and ensure consistent, trusted and quality healthcare delivery. Strengthening the workforce in these districts is critical to improving health outcomes and restoring trust in the health services. Immediate intervention is needed to address these staffing challenges and prevent further deterioration of health service delivery in these areas.



THE BROADER CHALLENGES HOLDING BACK PROGRESS

In the course of the implementation of the project, key issues stood out and informed Health Alert's social accountability work along with the following identified challenges in all five targeted districts.



KEY RECOMMENDATIONS



Enhance Emergency Transport Infrastructure: Procure sea ambulances and boats in Bonthe District to ensure timely and safe referrals for pregnant women and reduce maternal mortality.



Strengthen Health Workforce: Recruit and deploy qualified health workers in Tonkolili, Kailahun, Falaba, and WAR Districts to address staffing shortages and improve service quality.



Improve Financial Access to Care: Eliminate demands for payments before care by increasing the number of paid health workers and ensuring adequate funding for health services.



Secure Sustainable Funding and Resources: Obtain long-term funding and ensure equitable resource distribution to support critical health interventions and infrastructure improvements.



Develop Robust Monitoring and Accountability Mechanisms: Establish and strengthen systems for monitoring health service delivery and ensuring accountability through partnerships between government, civil society, and communities.



Promote Community Engagement and Social Accountability: Foster community participation in health service planning and monitoring, using tools like citizen scorecards to enhance transparency and responsiveness.