

Improving quality of care in fragile, conflict-affected and vulnerable settings

Shamsuzzoha Babar Syed,^a Sheila Leatherman,^b Matthew Neilson,^a Andre Griekspoor,^c Dirk Horemans,^a Mondher Letaief^d & Edward Kelley^a

Quality of care is central to population health. In recent years, several publications on quality of care have added to global knowledge^{1–4} and called for quality to be at the core of universal health coverage (UHC).

The term fragile, conflict-affected and vulnerable settings broadly describes situations of crisis. People living in such settings include all those experiencing humanitarian crises, prolonged disruption to critical public services, significant armed conflict, extreme adversity or acute, protracted or complex emergencies. The health service needs in such settings are significant. Estimates show that 60% of preventable maternal deaths, 53% of deaths in children younger than 5 years of age and 45% of neonatal deaths are in settings of conflict, displacement and natural disasters.⁵ Achieving UHC needs action across all countries, all settings⁶, as highlighted in the 2019 global monitoring report *Primary health care on the road to universal health coverage*.⁷

A range of constraints exist in such settings: breakdown in health systems, inadequate workforce, lack of safety and security including attacks on health care, alongside scarcity of resources.⁸ While the first priority is to restore service provision to save lives, all actors involved in provision of health services must also ensure quality of care. How can we plan for action in unstable settings?

The World Health Organization (WHO) is currently working with partners to address quality of care in fragile, conflict-affected and vulnerable settings. These efforts build on WHO's national quality policy and strategy initiative, on an emerging academic and experiential knowledge base, and on foundational efforts on quality health services from across the humanitarian and development sectors.^{9,10} This work

supports WHO's quality improvement task team that was recently created under the global health cluster, a network of partners that works in humanitarian emergencies.

The following eight interdependent elements are proposed as key considerations in developing a strategic approach to quality action planning in such settings.⁸

First, consideration of service priorities and quality goals reflects the need to align with existing health sector priorities, as well as identifying focus conditions and populations. Second, shared local understanding of quality across the many actors in such settings provides a common language for improvement efforts across the various quality domains. Third, stakeholder mapping and engagement, building on existing coordination mechanisms, allows collaborative efforts to advance a commitment to – and capacity for – quality. Fourth, situational analysis identifies context-specific challenges to delivery of quality care. Fifth, arrangements for governance and accountability should, at a minimum, identify processes and accountability for quality, leveraging existing humanitarian coordination platforms. Sixth, action plans require a pragmatic package of quality interventions across five intervention goals: assure access and basic infrastructure; shape the system environment; reduce harm; improve clinical care; and engage patients, families and communities.⁸ Seventh, health information systems provide the health-care data required to monitor improvement across the system. In settings where routine systems may not have been established or have been disrupted, the collection of suitable health data to support delivery of quality care is needed. Finally, improvement can be monitored and measured using

a pragmatic indicator set, taking care not to add undue measurement burden.

The challenge of addressing quality is compounded because fragile, conflict-affected and vulnerable settings do not represent a homogenous set of circumstances. Services provided may be directly supported or sometimes provided by humanitarian and development agencies. Over the past 20 years, the international humanitarian community acknowledged the need to ensure standards, such as through the Sphere project.¹¹ The formulation of the Core Humanitarian Standard on Quality and Accountability, technical guidelines and indicators adapted to such settings have all been proposed. Many of these initiatives address some of the eight elements mentioned above. Building on this foundation, the global health and humanitarian community should meet the challenge of delivering quality services that are effective, safe and people-centred. ■

References

Available at: <http://www.who.int/bulletin/volumes/98/1/19-246280>

^a Integrated Health Services Department, World Health Organization, avenue Appia 20, 1211 Geneva 27, Switzerland.

^b Gillings School of Global Public Health, University of North Carolina, Chapel Hill, United States of America.

^c Emergency Response Operations, World Health Organization, Geneva, Switzerland.

^d Department of Health System Development, World Health Organization Regional Office for the Eastern Mediterranean, Cairo, Egypt.

Correspondence to Shamsuzzoha Babar Syed (email: syeds@who.int).

References

1. Delivering quality health services: a global imperative for universal health coverage. Geneva: World Health Organization; 2018. Available from: <https://apps.who.int/iris/bitstream/handle/10665/272465/9789241513906-eng.pdf?ua=1> [cited 2019 Nov 8].
2. Crossing the global quality chasm: improving health care worldwide. Washington, DC: The National Academies of Sciences, Engineering, Medicine; 2018. Available from: <http://nationalacademies.org/hmd/Reports/2018/crossing-global-quality-chasm-improving-health-care-worldwide.aspx> [cited 2019 Nov 8].
3. Kruk ME, Gage AD, Arsenault C, Jordan K, Leslie HH, Roder-DeWan S, et al. High-quality health systems in the Sustainable Development Goals era: time for a revolution. *Lancet Glob Health*. 2018 11;6(11):e1196–252. doi: [http://dx.doi.org/10.1016/S2214-109X\(18\)30386-3](http://dx.doi.org/10.1016/S2214-109X(18)30386-3) PMID: 30196093
4. Ghebreyesus TA. How could health care be anything other than high quality? *Lancet Glob Health*. 2018 11;6(11):e1140–1. doi: [http://dx.doi.org/10.1016/S2214-109X\(18\)30394-2](http://dx.doi.org/10.1016/S2214-109X(18)30394-2) PMID: 30196096
5. Zeid S, Bustreo F, Barakat MT, Maurer P, Gilmore K. For every woman, every child, everywhere: a universal agenda for the health of women, children, and adolescents. *Lancet*. 2015 May 16;385(9981):1919–20. doi: [http://dx.doi.org/10.1016/S0140-6736\(15\)60766-8](http://dx.doi.org/10.1016/S0140-6736(15)60766-8) PMID: 26090626
6. Resolution A/RES/74/2. Political declaration of the high-level meeting on universal health coverage. In: Seventy-fourth United Nations General Assembly, New York, 10 October 2019. New York: United Nations; 2019. Available from: <https://undocs.org/en/A/RES/74/2> [cited 2019 Nov 8].
7. Primary health care on the road to universal health coverage. Geneva: World Health Organization; 2019. Available from: <https://www.who.int/docs/default-source/documents/2019-uhc-report.pdf> [cited 2019 Nov 8].
8. Leatherman S, Tawfik L, Jaff D, Jaworski G, Neilson M, Syed SB, et al. Quality health care in extreme adversity-an action framework. *Int J Qual Health Care*. 2019 Jul 11;mzz066. doi: <http://dx.doi.org/10.1093/intqhc/mzz066> PMID: 31294796
9. Syed SB, Leatherman S, Mensah-Abrampah N, Neilson M, Kelley E. Improving the quality of health care across the health system. *Bull World Health Organ*. 2018 Dec 1;96(12):799. doi: <http://dx.doi.org/10.2471/BLT.18.226266> PMID: 30505024
10. Handbook for national quality policy and strategy: a practical approach for developing policy and strategy to improve quality of care. Geneva: World Health Organization; 2018. Available from: <https://apps.who.int/iris/bitstream/handle/10665/272357/9789241565561-eng.pdf?ua=1> [cited 2019 Nov 8].
11. Sphere Handbook. Geneva: Sphere Association; 2018. Available from: <https://spherestandards.org/wp-content/uploads/Sphere-Handbook-2018-EN.pdf> [cited 2019 Nov 8].