Context

Colombia has a population of over 50 million inhabitants, many of whom live in rural areas. Over 10% of the population is elderly and disabled, and 20% of this population is covered by health insurances. Studies show that rehabilitation services are a major contributor to the health system outcomes, and why? What are lessons learned regarding planning for sustainability and achieving results at scale?

Learning Question 2: What conditions or factors successfully facilitate the institutionalization and/or implementation at scale of good practices that improve health system outcomes, and why? What are lessons learned regarding planning for sustainability and achieving results at scale?

PHYSICAL AND MENTAL REHABILITATION SERVICES

USAID's Victim Institutional Strengthening Program - VISP implemented by IOM COLOMBIA. Contact Mr. Camilo Leguizamu, Chief of Party. cleguizamu@iom.int

Activity Impact

The health care system has recognized the importance of the development and support of the rehabilitation department and the different community services. The implementation of the biopsychosocial model in health care will generate greater quality in the delivery of rehabilitation services, thus improving the quality of life for people who previously had to travel long distances to access health services.

Access to Rehabilitation:

Evidence

The project’s actions have had a direct impact on the health system by strengthening governance through the development of the technical and operational guidelines for the provision of rehabilitation services in Colombia. In addition, the project has supported the development of a training module on the provision of rehabilitation services, which has been successfully implemented in various health institutions, allowing the provision of rehabilitation services to people in remote or underserved areas.

Facilitators

• The articulation work with the Ministry of Health and Social Protection through the development of the project and policy developments facilitated the implementation of the project in the Ministry of Health.
• USAID’s Focus Center in Bogota was the key articulation point for stakeholder engagement in the development of the project.
• The University of California, San Francisco (UCSF) was the external technical support for the implementation and strengthening of rehabilitation services.

Challenges

• There was a lack of funding for the implementation of rehabilitation services on a national scale.
• The provision of rehabilitation services on a national scale was not a priority for the institutional leadership.

Lessons Learned

• Positive impacts on the health system are achieved by working in coordination with local and national health authorities. Building the rehabilitation needs of the population and the knowledge of local stakeholders is crucial for successful implementation.
• Strengthening the health system is essential for improving the quality of life for people who previously had to travel long distances to access health services.
• The implementation of rehabilitation services on a national scale is a priority for institutional leadership. Building the rehabilitation needs of the population and the knowledge of local stakeholders is crucial for successful implementation.