Organizational Infrastructure for Service Delivery:
A CaseStudy of Post-conflict Northern Uganda

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Background for the study

- A multitude of non-state agencies get involved in the health system especially in post-conflict setting:
  - International and local NGOs;
  - Private sector entrepreneurs;

- Challenge of state capacity to manage a pluralistic system:
  - The trust enjoyed by the state may be low
  - State capacity to coordinate is usually inadequate to deal with many powerful non-state players.
  - Negotiating a common vision for health system development requires capacity for governance development;
  - Rapid system development also requires that strategically positioned agencies can be identified and leveraged for quick action.

Main study questions

1. Which agencies support three key services?
   1. Maternal deriver
   2. HIV treatment
   3. Human resources inputs
2. How do the agencies link-up in each district to provide these key services?
   1. which agencies are central in service provision?
   2. How does the service provision networks differ across the study districts in post-conflict area?

Methodology: Social Network Analysis supplemented by qualitative interviews

## Collecting Data
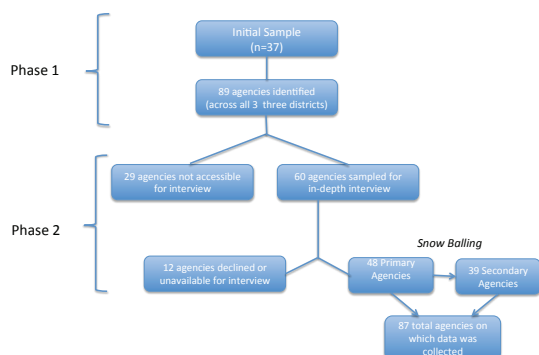
Selected Findings

Findings 1: Service Provision Networks and their descriptive information

Networks function	No. active agencies	Mean Degree	Std Dev
Maternal Services – Gulu Dist	52	3.5	5.0
Maternal Services – Kitgum Dist	34	2.5	4.5
Maternal Service – Amuru Dist	24	0.9	2.0
HIV Treatment Services – Gulu District	54	4.0	6.2
HIV Treatment Services – Kitgum District	39	2.7	4.4
HIV Treatment Services – Amuru District	24	0.8	2.0
HRH Services – Gulu District	23	0.9	2.0
HRH Services – Kitgum Distrit	24	0.9	1.9
HRH Service – Amuru District	18	0.5	1.2

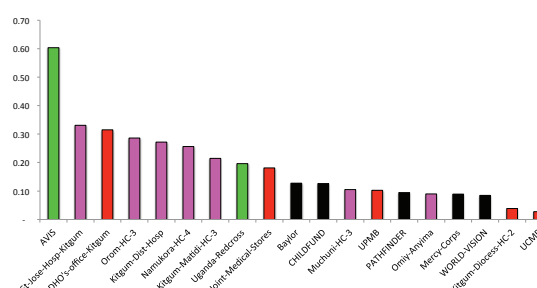**Findings 2: Service Provision Networks For HIV Treatment in the study districts**
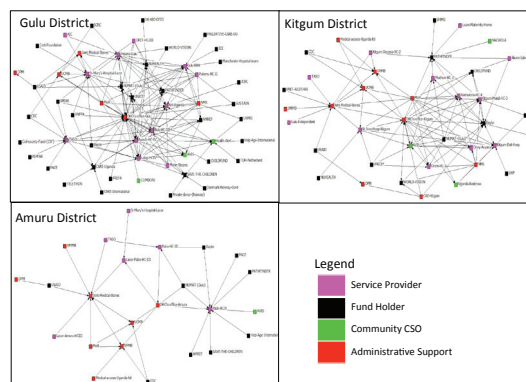
Findings 3: Agencies Central to Service Provision in Gulu District
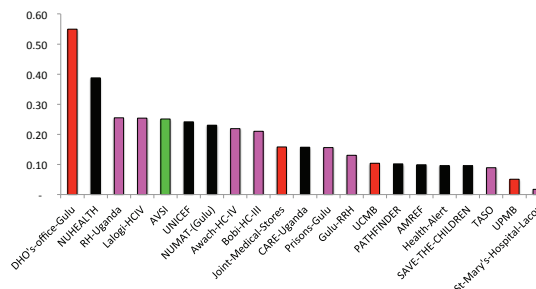
Core-Periphery Routine UCINET on Combined Service Networks

Findings 4: Agencies Central to Service Provision in Kitgum Distract

Core-Periphery Routine UCINET on Combined Service Networks

Key Messages

- The findings show that inter-agency collaborations are mostly focused on HIV treatment and least for workforce strengthening:
  - The networks for HIV treatment and maternal services were about 3 to 4 times more dense relative to the network for workforce strengthening.
  - The findings show that the Service networks mostly serve HIV treatment objectives (69% to 81%) Gulu and Kitgum.
  - In contrast, the network for workforce strengthening are least developed (6% and 10%).

- Social network analysis supports the identification of agencies in service delivery networks at subnational levels:
  - Central agencies can be leveraged to support efficient network mobilization and performance;
  - Information can be used to steer non state agencies to address inequalities in service network developments and Systems development at subnational levels.
  - This information may be most useful in post conflict health systems where the service network are constantly changing.