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POLICY BRIEF

LANDSCAPING OF DISTRICT HEALTHMANAGEMENT TEAMS (DHMT) GOVERNANCE AND MECHANISMS

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Executive Summary

The Rwandan government prioritizes achieving Universal Health Coverage (UHC) by strengthening health system components that includes the workforce, medical products, health information systems, and health financing. Despite achieving high health insurance coverage, challenges remain in equity, quality, and affordability of healthcare services. The Ireme initiative aims to enhance district health governance, focusing on leadership, planning, and management at the district level.

Background

Despite Rwanda's high health insurance coverage of 85.9% in 2021, issues persist in ensuring equitable access to quality and affordable healthcare. In this policy brief, the Ireme initiative seeks to understand and address challenges related to health governance by improving leadership, planning, and management at the district level.

Purpose

This policy brief presents key findings from an assessment of District Health Management Teams (DHMTs) and provides actionable recommendations to improve their governance and operational efficiency.

Methodology

A cross sectional study design using a descriptive qualitative-method approach was employed to assess DHMT operations, identifying strengths, weaknesses, and areas for improvement. The findings aim to inform leadership at both district and central levels, guiding better collaboration and coordination among health system actors.

Key Findings

1. DHMT Structure and Composition

- \circ There is a notable discrepancy in both composition and operational frameworks.
- Lack of induction training or awareness strategy hindering adherence to established guidelines among DHTMs members.

2. DHMT Roles and Responsibilities

- DHMTs are crucial for overseeing district health services, focusing on strategic planning, data analysis, and resource mobilization to tackle key health issues.
- Lack of legal instruments to support their roles and their implications to improve healthcare outcomes.

3. DHMT Operational challenges:

• Other challenges include staffing shortages, inconsistencies in monitoring and executing action plans, hindering effective governance.

4. DHMT Decision-Making Process

- A collective decision-making process is made transparently among all members of DHMTs and is guided by established regulations and health priorities.
- A collaborative approach involving multiple stakeholders is used, but challenges like insufficient documentation and inconsistent follow-ups limit effectiveness.
- Channels of escalation of emerging issues exist and are supported by the district authorities.

5. DHMT Interaction, Collaboration and Overlapping

• Regular meetings and communication efforts are in place, but challenges such as overlapping responsibilities and coordination gaps remain.

Recommendations

- 1. Strengthen Governance Framework and improve awareness and adherence to guidelines:
 - Revise guidelines to clearly define roles, responsibilities, and performance indicators.
 - Conduct regular training or awarness platforms to improve the use of evidence-based data for informed decision-making.
 - Encourage joint action plans with partners for better planning, evaluation, and reporting.
 - Strengthen a robust communication strategy to prevent effort duplication and ensure coordinated actions.

2. Implement Systematic Monitoring and Evaluation:

- Develop a structured framework for periodic evaluations and benchmarking.
- Document evidence-based processesses to assess the DHMTs impacts to the overall improvement of health outcomes.

3. Facilitate Annual Inter-District DHMT Meetings:

• Organize yearly meetings to share challenges, lessons learned, and best practices.

4. Secure Dedicated Budgets for DHMTs:

• Ensure financial empowerment to enable effective oversight and timely health service improvements.

Conclusion

The assessment underscores the pivotal role of DHMTs in enhancing health service delivery through a diverse and collaborative structure. While they have significantly improved district health governance, ongoing efforts are necessary to overcome challenges like duplication roles and complementarity across all health committees at the decentralized level.