

عنوان مقاله:

Generating Political Priority for the Health Needs of the ۲۱st Century : A Qualitative Policy Analysis on the Prioritization of Rehabilitation Services in Uganda

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خلاصه مقاله:

Background Few low- or middle-income countries (LMICs) have prioritized the expansion of rehabilitation services. Existing scholarship has identified that problem definition, governance, and structural factors are influential in the prioritization of rehabilitation. The objective of this study was to identify the factors influencing the prioritization and implementation of rehabilitation services in Uganda. **Methods** A case study design was utilized. The Prioritization of Rehabilitation in National Health Systems framework guided the study. Data sources included ۳۳ key informant interviews (KIIs) with governmental and non-governmental stakeholders and peer-reviewed and grey literature on rehabilitation in Uganda. A thematic content analysis and concept map were conducted to analyze the data. **Results** Rehabilitation is an unfunded priority in Uganda, garnering political attention but failing to receive adequate financial or human resource allocation. The national legacy of rehabilitation as a social program, instead of a health program, has influenced its present-day prioritization trajectory. These include a fragmented governance system, a weak advocacy coalition without a unified objective or champion, and a lack of integration into existing health systems structures that makes it challenging to scale-up service provision. Our findings highlight the interactive influences of structural, governance, and framing factors on prioritization and the importance of historical context in understanding both prioritization and implementation. **Conclusion** Our findings demonstrate challenges in prioritizing emerging, multi-sectoral health areas like rehabilitation. Strategic considerations for elevating rehabilitation on Uganda's policy agenda include generating credible indicators to quantify the nature and extent of the population's need and uniting governmental and non-governmental actors around a common vision for rehabilitation's expansion. We present opportunities for strengthening rehabilitation, both in Uganda and in similar contexts grappling with many health sector priorities and limited resources.

کلمات کلیدی:

Health Policy, Health Systems, Disability, Rehabilitation, Africa, Uganda

