

The complete RHIS curriculum is available here: <https://www.measureevaluation.org/our-work/routine-health-information-systems/rhis-curriculum>

**7.2.1**

**Some Common RHIS Resource Mobilization Challenges**

1. The routine health information system (RHIS) support system covers many disparate functions, subsystems, offices, and programs, with multiple budget structures and funding sources. This has both good and bad effects on resource availability.
2. Most human resource requirements for RHIS task performance must be fulfilled by staff whose primary role is the broader management and provision of health services and programs.
3. Relatively few staff are devoted full-time to RHIS development, operations, and management, and most of them are at the central level.
4. Much of the operating costs of RHIS, particularly at subnational levels, must be covered by broader facility and office budgets. Rarely is it possible to dedicate district and facility budget lines specifically to RHIS operations.
5. RHIS functions are often constrained by:
	1. Inadequate staff, staff attention, and staff capability for RHIS tasks
	2. Frequent shortages and stockouts of RHIS supplies
	3. Inadequate availability and maintenance of information and communications technology (ICT)/RHIS equipment
6. Donor projects often fund most aspects of new systems development and operations for the duration of the project. Once the donor project closes down, the government is expected to pick up these expenses, because the system must continue to function. Thus, many projects and their resulting system developments are unsustainable. (See also the case study in Handout 7.2.2.)

