Building Capacity for HSS: The Flagship Program Experience

Evolution
Strategy
Activities
Lessons Learned

R. Paul Shaw
World Bank Institute
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Origins & Motivating Factors

1. European donors requested WBI to develop a learning program on health sector reform and sustainable financing in 1995.

2. WBI was motivated to respond as the Bank’s new ‘learning arm’ to complement its ‘lending arm’.

3. Several demand assessments gave a green light.

4. Many partners engaged to develop materials.

5. First Flagship annual core course, 1996, 4.5 weeks long.
Program Objectives

- **Objective 1:** Facilitate the transfer of cutting edge knowledge on health sector reform and sustainable financing to developing countries;

- **Objective 2:** Empower country clients to implement policies and programs to render their national health systems more equitable, efficient, qualitative and financially sustainable;

- **Objective 3:** Strengthen the capacities of partner institutions and networks of professionals in Bank client countries to take the lead in designing, adapting, and sustaining Flagship learning programs in local areas and local languages.
<table>
<thead>
<tr>
<th>Learning Modality Type</th>
<th>Global Course</th>
<th>Regional Courses</th>
<th>National Courses</th>
<th>Video-Conferencing Via WBI’s Global Development Learning Network</th>
<th>e-Learning Courses</th>
<th>Occasional Senior Policy Seminars</th>
<th>Occasional Conferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contribution or role in overall capacity building strategy</td>
<td>Takes the lead in identifying new content areas, setting protocols and standards for training and evaluation</td>
<td>Takes the lead in prioritizing issues relevant to countries in their area and adapt training to local needs. Content feeds back to global course enriching its coverage of new developments.</td>
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<td></td>
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<td>‘Drill-down’ into issues of immediate relevance to a country tackling a particular health system issue or capacity gap. Content feeds back to global course enriching its coverage of new developments.</td>
<td>Best suited to short-term ‘just in time’ training on particular issues, as well as north-south and south-south networking.</td>
<td>Highly demanded and promising route to introducing participants to new tools, techniques, and paradigms while accommodating a more flexible time schedule.</td>
<td>Earmarked training event for national senior level policy makers on strategic issues of importance to the country.</td>
<td>Earmarked learning event to share and disseminate knowledge products on topics of national or international significance (e.g., latest research on health financing issues, latest policies on a communicable disease).</td>
</tr>
</tbody>
</table>
### Flagship Learning Activities & Participants, 1997-2007

<table>
<thead>
<tr>
<th>Activity</th>
<th># Activities</th>
<th># Participants</th>
<th>Average Training Days per Participant</th>
<th>Total Participant Training Days</th>
<th>% Share of Training Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Global Core Course</td>
<td>11</td>
<td>860</td>
<td>15</td>
<td>12,900</td>
<td>9.6</td>
</tr>
<tr>
<td>Regional Courses</td>
<td>132</td>
<td>5944</td>
<td>10</td>
<td>59,440</td>
<td>44.3</td>
</tr>
<tr>
<td>Country Specific Courses</td>
<td>125</td>
<td>6225</td>
<td>7.5</td>
<td>46,687</td>
<td>34.8</td>
</tr>
<tr>
<td>Video-Conference Courses</td>
<td>31</td>
<td>4008</td>
<td>2</td>
<td>8,016</td>
<td>6.0</td>
</tr>
<tr>
<td>Major conferences/workshops</td>
<td>10</td>
<td>1559</td>
<td>2</td>
<td>3,118</td>
<td>2.3</td>
</tr>
<tr>
<td>E-learning</td>
<td>9</td>
<td>813</td>
<td>5</td>
<td>4,065</td>
<td>3.0</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>319</strong></td>
<td><strong>19,409</strong></td>
<td><strong>--</strong></td>
<td><strong>134,226</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>
Learning Orientation

- **Flagship framework** diagnoses problems from the policy-makers viewpoint with emphasis on strategic, systemic change.

- Through country group work, participants prioritize health system outcomes and overcoming bottlenecks to achieve them.

- NO dissemination of World Bank strategy or priorities is involved.
Flagship Learning Framework

THE HEALTH SYSTEM
- Financing
- Payment
- Organization
- Regulation
- Behavior

Intermediate Performance Measures

TARGET POPULATION
- Health Status
- Customer Satisfaction
- Risk Protection

Performance Goals

Control Knobs
<table>
<thead>
<tr>
<th>Themes</th>
<th>Country or Region Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengthening Health Chapters in National</td>
<td>Sub-Saharan Africa</td>
</tr>
<tr>
<td>Poverty Reduction Strategies</td>
<td></td>
</tr>
<tr>
<td>Public-Private Partnerships</td>
<td>Pakistan, Burkina Faso, India, Lebanon</td>
</tr>
<tr>
<td>Decentralization</td>
<td></td>
</tr>
<tr>
<td>Public Health Challenges</td>
<td>Egypt, Turkey</td>
</tr>
<tr>
<td>Quality Improvements</td>
<td>Lebanon</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>Tunisia, Lebanon, Hungary</td>
</tr>
<tr>
<td>Provider Payments</td>
<td>Nigeria, Ghana, South Africa</td>
</tr>
<tr>
<td>Contracting</td>
<td>Philippines</td>
</tr>
<tr>
<td>Hospital Reform &amp; Financing</td>
<td>Senegal, Madagascar</td>
</tr>
<tr>
<td>Performance Based Contracting</td>
<td>Benin, Senegal, Mexico</td>
</tr>
<tr>
<td>Health Financing &amp; Targeting Public Subsidies</td>
<td>Mali</td>
</tr>
<tr>
<td>Health Systems Policy &amp; Management</td>
<td>Bangladesh</td>
</tr>
<tr>
<td>Public Policy &amp; the Private Sector</td>
<td>India</td>
</tr>
<tr>
<td>Immunization in Eastern Europe</td>
<td>China</td>
</tr>
<tr>
<td>Financing, Organization &amp; Primary Health Care</td>
<td>Hungary</td>
</tr>
<tr>
<td>Basics of Health Economics</td>
<td>Russia Oblasts</td>
</tr>
<tr>
<td></td>
<td>E-learning</td>
</tr>
</tbody>
</table>
Lessons Learned

1. Demand is strong from countries + donors
2. Capacity building strategy has worked well, with exceptions
3. Partnering arrangements are the key foundation stone
4. Pedagogy & learning style have worked well
5. Diversified faculty positive but demanding to manage
6. Links with Bank Operational Staff extremely valuable
7. Bank and other donor staff benefit from training alongside country participants
8. M&E of performance critical but not enough
9. Funding to re-tool, expand program in short supply
Technical Partners

- McMaster University, Canada
- Harvard School of Public Health, USA
- York University, England
- Capetown and Witwatersrand Universities, South Africa
- Chulalongkorn University, Thailand
- BASYS, Germany
- WHO, Geneva
- Management Sciences for Health, USA
- Bitran y Asociados, Chile
- Institute for Health Sector Development, UK
- Swiss Development Corporation, Switzerland
- Abt Associates, USA
- Health, Nutrition, and Population Hub, World Bank, USA
Implementation Partners

- **China**: The China Network of Training and Research on Health Economics and Financing (comprising 29 universities, research institute and professional journals), the Chinese University of Hong Kong, and the University of Hong Kong
- **Chile**: University of Alberto Hurtado, and Bitran Y Asociados
- **Thailand**: Chulalongkorn University
- **Philippines**: Department of Health, the Asia Institute of Management, the Development Academy of Philippines
- **Indonesia**: University of Gadjah Mada
- **Singapore**: National University of Singapore
- **Mongolia**: Mongolia Public Health Professionals Association (PHPA) and the School of Public Health (SPH)
- **India**: National Institute for Health and Family Welfare
- **Bangladesh**: International Center for Diarrheal Disease Research (ICDDR,B), BRAC
- **Sri Lanka**: National Institute of Health
- **South Africa**: Universities of Cape Town and of the Witwatersrand (HEU/CHP)
- **Senegal**: Centre Africain d’Etudes Superieures de Gestion (CESAG)
- **Lebanon**: American University of Beirut (AUB)
- **Egypt**: National Training Institute
- **Iran**: Ministry of Health
- **Yemen**: Ministry of Health
- **Hungary**: Semmelweis University (SOTE)
- **Russia**: Health Foundation, Moscow Medical Academy, and Higher School of Economics
- **Kyrgystan**: The Center for Health System Development (CHSD); The Chubakov Centre for Post-Graduate Medical Training (ChC), and The Kyrgyz State Medical Academy (KSMA)
- **Turkey**: School of Public Health, Ministry of Health
- **Ukraine**: School of Public Health, Kyiv Mohyla Acedemy
- The original six Flagship regional partner institutes are in italics.
Advisory & Financial Partners

- DANIDA, Denmark
- Ministry of Foreign Affairs, Netherlands
- Ministry of Foreign Affairs, Norway
- Ministry of Foreign Affairs, Belgium
- Ministry of Foreign Affairs, Finland
- Ministry of Foreign Affairs, France
- Swedish International Development Cooperation Agency (Sida), Sweden
- Swiss Agency for Development and Cooperation (DSC), Switzerland
- World Health Organization, Switzerland
- Department for International Development (DFID), UK
- Canadian International Development Agency (CIDA), Canada
- IrishAid, Ireland
- Ministry of Foreign Affairs, Singapore
- Multilateral Financial Institutions, Ministry of Economy and Finance, Spain
- Johnson and Johnson
- Deutsche Gesellschaft fur Technische Zusammenarbeit (GTZ), Germany
- Open Society Institute, Soros Foundation, Soros, NY, USA
- U.S. Agency for International Development, Department of State (USaid), USA
- Gulbenkian Foundation, Portugal
Concluding Remark

The Flagship Program is an instrument or vehicle that has demonstrated value-added and is available to the organizations here to help scale up efforts to strengthen health systems in low and middle income countries.