Re-imagining Technical Assistance

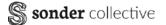
FMOH

### About this project

The Child Health Task Force teamed up with Sonder Collective, a human-centered design (HCD) firm, to support the ministries of health (MOH) in the Democratic Republic of Congo (DRC) and Nigeria use HCD to reimagine the current model of technical assistance (TA) for maternal, newborn, and child health (MNCH) and health system strengthening.

This initiative, supported by the Bill & Melinda Gates Foundation through JSI Research & Training Institute, Inc. (JSI), aims to strengthen local capabilities to implement integrated, evidence-based, MNCH and health system strengthening (HSS) interventions that will accelerate progress towards the 2030 Survive, Thrive, and Transform Vision.





### BILL& MELINDA GATES foundation









### Phase 1: Case studies: DRC & Nigeria



# What was our starting point?



It is estimated that 3-4 billion (US) dollars are spent annually on technical assistance – yet, the rate of reduction of maternal and neonatal mortality is slowing down or even, in some places, reversing.

Technical assistance has been criticized for being externally imposed, poorly coordinated, disempowering, short-sighted, self-interested and not holistic or systematic in solving for public health challenges.



#### WHAT DRIVERS ME

- Delivering on targets within set budget and timeframe
- Gaining visibility and a good reputation with donors, government and other partners
- Demonstrating impact in line with our mission and strategy

#### WHAT I NEED TO SUCCEED

- Predictable/consistent source of funding
- Alignment on priorities between key stakeholders
- Engagement and collaboration from all stakeholders
- Enabling environment for implementation (clear protocols and guidelines, supportive political climate, security)
- Reliable, knowledgeable workforce

## Implementing Partner (IP)

We work with FMOH and local governments to implement donor-funded initiatives. Our goal is to complete these initiatives within a set timeline & budget and to demonstrate the impact our work has had on health outcomes.

#### ROLES I PLAY IN TA



design plans

donors and gov to







Receive and manage funds

oordinate deliver TA

Track & report on outcomes

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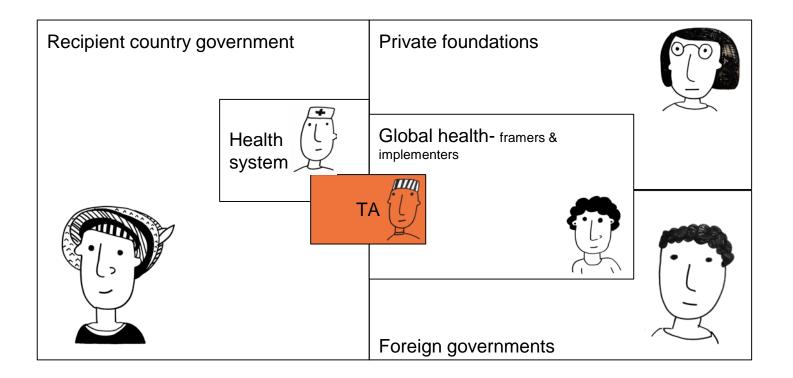
#### **CHALLENGES I CREATE**

- Take shortcuts, which deliver on shortterm targets but undermine the system in the long run.
- Accountable to the donors, so end up prioritizing their interests over those of other stakeholders.
- Tend to bring in external capacity as opposed to developing it locally.
- Don't always understand local context and needs.
- In competition with other IPs.

#### WHAT I STRUGGLE WITH

- Under pressure to deliver quickly, but working with the current system "the right way" takes time. Bureaucracy and protocols often cause delays.
- Taking on all accountability for how money is spent. Balancing responsibility to donors with pay-to-play attitude of stakeholders (participation incentives and requests that are outside program activities such as rent, vehicles, internet).
- Lack of donor flexibility to adjust to the needs and priorities on the ground.
- Lack of alignment on goals and priorities between the donors and the government.
- Lack of clear guidelines, procedures, policy, standards, and ownership from the government.
- Lack of a local skilled workforce.
- Lack of trust from local stakeholders.

### Technical Assistance is a complex system within systems...



INTRO

What do countries want and need from Technical Assistance?

# **TA critical shifts**

The 9 critical shifts outline the changes that will need to be made to transform the current TA system into a more ideal future state.

These shifts create a bridge between the challenges with the existing approaches uncovered by the Nigeria and DRC teams during research, and the vision of the ideal future state developed by the country co-creation teams.

FROM	то	SHIFT	
Donor driven	Country driven and owned	Shift away from a system where priorities are imposed on countries by donors, to one where governments take an active leadership role in setting the agenda and the coordination of TA activities.	
Creates dependencies	Cultivates Sovereignty	Shift away from a system that depends on continuous donor support for survival, to one which prioritizes sustainability and self-reliance.	
Lack of trust in institutions and individual motivations	Scales trust	Shift from a system which perpetuates mistrust in institutions and individual motivations to a more transparent, accountable environment which ensures credibility of its individual actors.	
Unaccountable	Accountable	Shift from a system where power structures and roles are vague and actions are rarely tied to consequences, to one where individual actors are held accountable for their actions.	
Fragmented	Considers the system as a whole	Shift away from siloed, uncoordinated projects to comprehensive, wholistic initiatives.	
Supply driven	Problem focused	Shift away from simply allocating available resources, to a system which first considers what resources are actually needed to solve the problems on the ground and works towards acquiring them.	
Short term	Build for sustainability (and resilience)	Shift away from investing in quick fixes, to a more patient centered system which prioritizes long term gains.	
Static	Learning, nimble, diverse	Shift away from a static system towards one which evaluates and quickly responds to data and iterates over time.	
Up rooted (global)	Contextualized	Shift away from a one size fits all approach to problem solving to a system which considers local context and has the flexibility to adjust.	

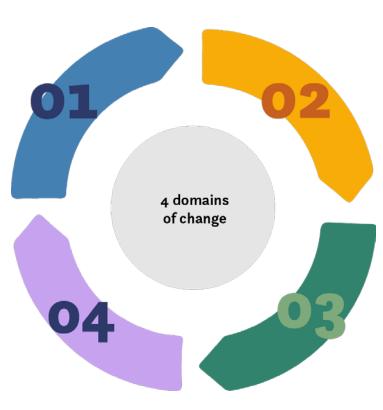
# A beginning DRC & Nigeria synthesis

# Focus on the system as a whole

Health issues can rarely be treated in isolation. TA in it's broad approach should shift away from investing in individual health verticals to strengthening the system as a whole by exploring partnerships for an integrated approach to problem solving, move away from the burden of diseases, distribute help equally, and be more multisectorial.

### Cultivate Trust

Shift from a system which perpetuates mistrust in institutions and individual motivations to a more transparent, accountable environment which ensures credibility of its individual actors. TA should invest in systems that keep their users accountable and leverage them to scale trust : develop platforms and procedures for stakeholders to collaborate and share knowledge with reciprocity.



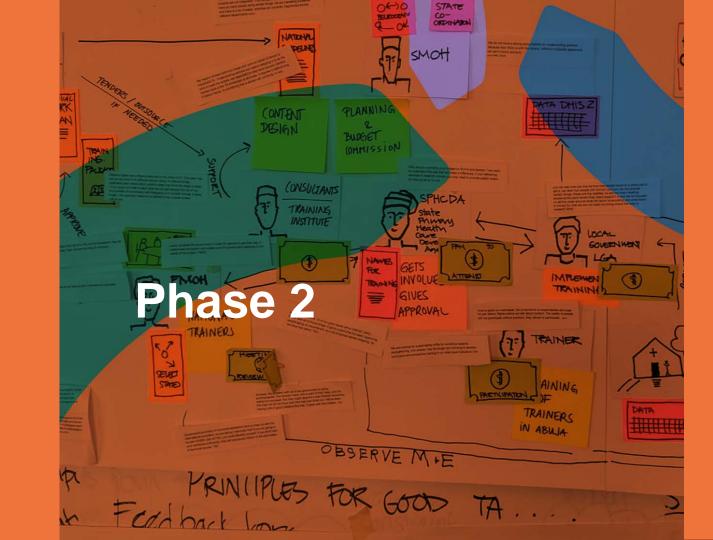
### Foster Strong Governance

Shift from implementing donor-driven initiatives to a country-led approach which is guided by local priorities. Ensure that the objectives and rules of engagement are common to all, and that the limits, roles and responsibilities of all TA actors are supporting, rather than executing, state responsibilities.

### Nurture the existing system

Shift away from quick-fixes that create unhealthy dependencies and sidestep challenges by generating parallel systems. For sustainable change, build on the existing infrastructure and optimize finances in the long term, promote government accountability even if it means sacrificing some immediate gains. .

<b>01</b> Focus on the system as a	<b>02</b> Foster strong governance	<b>03</b> Nurture the existing system	<b>04</b> Cultivate Trust
Whole 1.1 Start with a realistic, timely plan	2.1 Ensure the government is in the driver seat	3.1 Adjust budgets to reflect realities on the ground	4.1 Move from a competitive to a collaborative environment
1.2 Adapt a comprehensive, multi-sectoral approach	2.2 Balance external expertise with local knowledge	3.2 Prioritize sustainability and longer term thinking	4.2 Create space to iterate: learn from best practices and failures
1.3 Step up coordination to minimize gaps and duplicative efforts	2.3 Build local capacity	3.3 Strengthen state accountability mechanisms	4.3 Inform future priorities through community feedback loop
1.4 Ensure continuous funding to core priorities	2.4 Engage local stakeholders and avoid a one size fits all approaches	3.4 Invest in existing structures and make do with local resources	4.4 Build reciprocity in the evaluation
1.5 Rethink incentives structures to maximize overall impact	2.5 Follow local protocols adjust cadence accordingly	3.5 Move from donor dependence to a self- generating funding model	4.5 Change the culture of data



Phase 2

Reimagining Technical Assistance

# **Interagency Working Group on Capacity Strengthening**

### What and who?

- BMGF, USAID and World Bank
- IAWG Purpose: Align principles for capacity strengthening to improve service delivery and health outcomes; collectively investigate how programming of TA funding can be improved across donor partners; operationalize efforts in-country
- JSI is the Secretariat
- Co-creation process with IAWG, country representation

### Scope of work

### Phase 1: ~ 12 months

- Conduct a landscape review of CS initiatives draft findings 11.12.2020
- Articulate how current approaches support/hinder the proposed shifts and design principles
- Develop aligned definition and intended outcomes of CS
- Develop/review conceptual framework and diagnostic tool for investment in
- Develop principles for CS

### Discussion

### Instruction

Please rank the below four domains of change in order of difficulty to achieve in your country context

- 1. Focus on the system as a whole
- 2. Cultivate Trust
- 3. Foster Strong Governance
- 4. Nurture the existing system

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Please rank the four domains in order of difficulty to achieve for your project and country context (where 1 is most difficult)



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