ROLE OF UNIVERSITIES IN STRENGTHENING HEALTH SYSTEMS IN LOW-INCOME SETTINGS

Evaluating leadership, management, and governance capacity building in Rwanda

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Background: The Leadership, Management, and Governance (LMG) Project piloted the first Senior Leadership Program (SLP) at the National University of Rwanda School of Public Health (NURSPH) from January to June 2013. Participants included 30 district hospital medical directors and 5 NURSPH faculty members. In June 2013, 32 participants graduated with a Yale University certificate in Advanced Training in Leadership, Management, and Governance. The program was jointly designed and delivered by faculty from the Yale Global Health Leadership Institute and Management Sciences for Health in close collaboration with NURSPH. Objectives of the Senior Leadership Program were to enable participants to:

> Build individual and group capacity for effective leadership

> Perform strategic assessments of needs, resources, and constraints

> Conduct strategic problem solving to address key health and health care problems

> Obtain and apply data to guide and evaluate strategic responses to problems

> Employ fair and transparent decision making and enable accountable governance.

Structure/Method/Design: Six months following the completion of the training program, a mixed-method evaluation will be carried out in order to assess 1) outcomes of participants' field projects; 2) participant professional performance in leadership, management, and governance; and 3) NURSPH faculty capacity to deliver coursework in leadership, management, and governance. The evaluation will involve in-depth interviews with 10 program graduates as well as interviews with 1 to 2 immediate co-workers, and observation of their field projects. All 32 participants will be surveyed on their professional experience 6-month post-program including a self-assessment based on core competencies targeted by the curriculum.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): Management Science for Health, the Yale University Global Health Leadership Initiative, the National University of Rwanda School of Public Health, and funded by the US Agency for International Development.

Summary/Conclusion: Evaluation began in January 2014. Survey data will be analyzed to identify strengths and weakness in the program curriculum as well as participant-reported impact on professional performance. Interview transcripts will be analyzed using the constant comparative method to identify themes in professional growth from both participants' perspective and the perspective of their co-workers. Results will inform the role of universities in leadership curriculum development as well as evaluations of leadership development program in similar settings.

Funding the "organization" in civil society organization: Measuring organizational capacity in India and Ethiopia

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Background: Civil society organizations (CSOs) play a central role in delivering health services to communities and vulnerable populations. During the last decade, both bilateral and multilateral donors have emphasized country ownership, resulting in significant increases in funding to international nongovernmental organizations (INGOs) to provide capacity-building assistance to CSOs. However, capacity-building interventions often prioritize vertical service provision, leaving organizational development as an afterthought. At the same time, a lack of robust metrics to measure organizational development and evaluate change over time, limits accountability and an understanding of whether CSOs and their programs are benefitting from capacity building.

Structure/Method/Design: We developed a tool to measure organizational development across 11 domains (mission, governance, operational planning, strategic planning, financial security, financial management, quality management, human resources, data management, logistics, and communication). The tool was piloted in three CSOs in India (2011) and is being applied in a longitudinal study involving 44 CSOs in Ethiopia with annual data collection between 2012 and 2014. Data were collected through in-depth interviews with management staff, a staff survey, and a review of policies and practices to generate a score for each domain. Upon completion of the assessment, a detailed report with suggested capacity-building interventions, which could be completed internally or with external assistance, was provided to CSOs and INGOs to inform and prioritize capacity building.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): The application of the tool showed organizational capacity in India was influenced by donor priorities; financial accountability and a clear mission were highly developed at the cost of strategic planning. In Ethiopia, differences between high- and low-performing NGOs were seen across 11 domains ($P < 0.05$), most notably in the leadership and governance, strategic and operational planning, and financial security domains. The most significant organizational changes between 2012 and 2013 occurred in strategic and operational planning, and financial security—identified as priorities in the baseline assessment—suggesting study findings were used to effectively target capacity building.

Summary/Conclusion: This new methodology enables an assessment of the effect of capacity-building interventions on organizational development. A robust measure of organizational development allows CSOs, INGOs, and donors to better understand organizational-level bottlenecks and strengths in program implementation. Organizational assessments can also be used to improve the accountability of funds for capacity building, ensure capacity building is informed by organizational development data, measure change, and equip multiple stakeholders to evaluate and appropriately fund the "organization" in CSOs.

Improving the health care workforce: The role of academic institutions

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Background: This panel presents promising practices around building health care capacity through collaborative efforts with academic institutions. While there are many solutions to meeting the global need for health care workers, university partnerships have proven to be effective in building health care capacity.