Collaborating, learning, and adapting (CLA) have long been a part of USAID’s work. USAID staff and implementing partners have always sought ways to better understand the development process and USAID’s contribution to it, to collaborate in order to speed and deepen results, to share the successes and lessons of USAID’s initiatives, and to institute improvements to programs and operations. Through this case competition, USAID and its LEARN mechanism seek to capture and share the stories of those efforts. To learn more about the CLA Case Competition, visit USAID Learning Lab at usaidlearninglab.org/cla-case-competition.

Reinventing Global Health Assistance and Interventions through Real-Time Online Collaboration

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What is the general context in which the story takes place?

In my three decades of experience in healthcare working as a physician, international health care consultant, hospital manager, and health policy advisor in more than 40 countries, I kept seeing and experiencing the same problem. We had the medical knowledge and technology to save millions of lives, but we lacked an effective system to deliver care that used existing medical knowledge and technology appropriately.

So I established a new health consulting company in 2005, now known as Realizing Global Health (RGH), because I believed that health professionals held the key to improving how health systems deliver care and global health outcomes—making health for all possible. The goal of my company was to find a new way of global health consulting by providing health professionals in developing countries strategies to improve their effectiveness and become leaders in the field of improving health care delivery. In order to empower health care providers worldwide, I also needed to enlist the support and collaboration of all the stakeholders in the entire health care system including donors, program managers, governments, and academia.

What was the main challenge/opportunity you were addressing with this CLA approach or activity?

Because I believed health professionals held the key to enhancing how health systems work, I focused RGH’s mission on improving the way professionals were trained on the job. The old approach of massive and cascade training was ineffective to sustainably improve the quality and coverage of health care delivery and needed to be transformed by a more targeted approach.

Training health professionals was also expensive, as it often required travel. It interrupted health service delivery with a negative impact on the community. It was also difficult to translate classroom teaching to the reality of the field because traditional training included generic content and not enough opportunities to convert it into actionable knowledge relevant to each trainee’s situation. In most countries, supervision is inadequate, so what was learned was rarely reinforced applied or sustained. There had to be a better way to make training shorter, easier, cheaper, and results-driven.
Here’s how the CLA approach helped me find an innovative solution to this problem:

Collaborate: When I started coaching health professionals in 2005, I learned it was most effective when we collaborated to find the solution. Rather than giving them answers, I began asking questions that uncovered their strengths and inspired them to find the answer almost on their own. Resources are limited for health care professionals, so they need resourcefulness, creativity, and ingenuity to meet the challenges in their country. Collaboration was having a greater impact because my clients were developing their own abilities to solve health care delivery problems and do the work. They assumed full responsibility and took all the credit for the results.

Learn: I also observed that the health professionals who were able to learn what they needed to make tangible improvements were the ones that I coached regularly via email. I realized that with the increased availability of cell phones, email, Web-cameras, and other Internet-based communication tools, it was time to update the way training courses were held. Virtual training was the answer to provide ongoing, effective support and assistance in solving urgent health care delivery and case management problems. This real-time approach allowed for collective and concerted action to be taken by all parties affected by the problem at hand.

Adapt: Imagine if extraterrestrials gave us a UFO with advanced technology, a short training on how to use it, and then left us to our own devices. Even with the tools and training, most likely we’d fail at adapting to this superior technology without ongoing support. After working one-on-one with health care professionals, it became clear to me that understanding comes from applying knowledge. Knowing and not doing is equivalent to not knowing. To make a sustainable difference in global health, health professionals must adapt and apply the latest medical and health care management knowledge and best practices to their own circumstances. Only with ongoing support are they empowered to adapt the life-saving tools and strategies to their situation and have a far-reaching impact on realizing global health.

Describe the CLA approach or activity employed.

In order to meet the challenge of the health care professionals and help them make an immediate difference in realizing health for all in their community, I created the 7-Day Online Coaching Series. Since 2005, more programs were added and hundreds of health professionals have benefited from a simple, affordable, and powerful learning system. Theses programs combine training, the latest medical knowledge and best practices, action-oriented coaching, and experiential learning.

Because health care professionals are often overwhelmed, it was important to make the training courses feel doable. Seven days was an accessible timeframe for planning work and making significant changes on how to implement that work. Every day during the seven-day program, the client logs into our client portal and downloads a lesson. They read the lesson, think about it, and do something with what they learned. After completing the daily assignment, they send their report to their personal coach for feedback. The response is read by their coach, who through carefully targeted questions and tools helps the professional master the material and apply the basic principles to his or her unique public health project.

The coaching is based on contextualized case studies that are relevant to health professionals in developing countries to keep the overall context of where change needs to happen. The program is customized to give participants the specific clinical, project, program, or facility management training they need—from managing a maternal health or malaria program, a clinic, a pharmacy, or hospital, as well as other topics that are essential to improve the quality of health care in developing countries. The stories create a holistic scenario where participants can “see” where all the parts of the training and the health system improvement process fit. Training is not about a specific disease; it is about meeting a patient’s health needs in the most efficient way. One participant from Georgia explained, “I liked the form of its presentation: an illustrative example rather than dry instructions.”

Personal learning begins with the client identifying the facts of the case study and noting the lessons that can be applied personally. The case study contextualizes global health challenges and focuses on meeting the country’s
epidemiological trends and local community health needs. This problem-based approach helps clients answer questions such as, What challenges are presented in my situation? What behaviors and actions will affect results for me personally? Andrews Seglah, a participant from Ghana, said, “The way [the program] was more practical than theoretical is what I like best about it.”

Synthesizing and integrating what is learned occurs because the client applies their learning to the formulation and implementation of a global health improvement project that solves pressing problems in real-time. During the program, the participant is asked to formulate an improvement project that will help them improve their results and patient outcomes, despite limited resources, to ensure that they will be sustained by the local health system. The emphasis is on simple tasks that can achieve big impact and rapid success, thereby garnering more support from the community, local government, and private sector. Success breeds more success and opens up sources of funding that otherwise would not be available.

The improvement project plan is developed with the participant's personal coach and submitted to the coach for review and setting of accountability milestones. The coach will provide suggestions and work with the participant to further refine and implement it throughout the remainder of the program. The total length of program is 100 days, but most participants achieve results sooner because they have learned to apply the tools that will ensure their success.

Were there any special considerations during implementation (e.g., necessary resources or enabling factors)?

In the 10 years we've been conducting online training and coaching programs, we have encountered a few challenges. We quickly realized that although seven days was enough time for the participant to learn and apply the new material and sustain what they learned, in order for them to sustain the improvement in their current situation, they need more ongoing coaching. So we adapted the program to include up to three months of personal online weekly coaching sessions. Most participants complete and sustain the improvement that was the focus of the training in less than two months of online coaching, though.

Another challenge has been access. Although most participants have online access, the access can be intermittent with power outages. Also, YouTube is blocked in certain countries, which limits its use for online training. To meet these challenges we’ve worked to make more of the courses downloadable rather than streaming them so the participant can download the materials when it’s convenient and possible for them to do so.

We also saw the need to teach health care professionals the skills to enlist support from key stakeholders such as their coworkers, the local community, government officials, and NGOs in their improvement project. For example, millions in Malawi do not have access to clean water or sanitation facilities. James Lusuntha, a health program facilitator in Malawi, recognized that a lack of collaboration among stakeholders was contributing to this ongoing problem. In 2008, Mr. Lusuntha participated in RGH’s 7-Day MPH program and came to understand the importance of involving the community in the planning process, as they are the target and the recipient of the program services. He also involved stakeholders on water and sanitation—Water, Health, Education, Community Services, and NGOs—for an integrated approach. “Planning of activities has changed,” Mr. Lusuntha explains. “In the past I used plan as an individual, but now I involve other members of staff and stakeholders.” Before the training, he was able to build one latrine per week; after the training, the number went up to six or more per week.

This example illustrates that teaching health care professionals to collaborate with all members of the health system has been key to their success.

Another challenge has been funding all the motivated healthcare workers who apply for our online coaching programs but lack a sponsor. When a sponsor is found, applicants get scholarships and the sponsor is kept informed of the participants’ results.
What have been the outcomes, results, or impacts of the activity or approach to date?

Teaching health care professionals how to measure and evaluate results is a key element of our online coaching programs. We provide each participant with a personal scorecard with indicators to measure what he or she has achieved. This teaches them to measure their results and take progressive steps forward. For example, if they are working to improve vaccine rates, they measure how many newborns are getting vaccinated. Then they conduct a census to find out how many babies in their coverage area require the vaccine. Finally, they use this information to determine how they can increase the percentage of newborns who are vaccinated.

The numerous success stories of our participants show that the RGH coaching approach provides them the opportunity to effectively make the best of all their learning experience while making a bigger impact. For example, Africare, a frequent USAID partner, represents more than 2,500 projects in 36 countries throughout Africa. In September 2007, Dr. Kechi Anah, Africare’s Health & HIV/AIDs technical specialist, enrolled 16 program managers in the program.

Each program manager chose their own unique mission that gave meaning to their daily work. One of Africare’s program managers, Felicia Sakala, developed a program called the “GiNE Project” (Girls Need Empowerment). Through the 7-Day MPH Program, Felicia and her colleagues reached almost 1,300 community leaders and parents, as well as 1,400 girls, regarding access to community health services using existing resources. Another program manager, Elizabeth Ngoye, worked among the most vulnerable groups in the Bagamoyo, Tanzania. Her team recruited and trained 10 volunteers who went on to support the 130 children and 35 women on how to develop their own income-generating activities. All this was achieved making use of existing resources and through online coaching.

What were the most important lessons learned?

The biggest lesson in training hundreds of health professionals is the Power of One—that each of us can make a difference in realizing global health, but we have to learn to act differently. Health care is an overwhelming field, and new knowledge, approaches, and practices make the field of global health even more complex every year. I learned to approach coaching with this simple philosophy: Think Big and Achieve 1 Percent Every Day. I help clients take action every day so they achieve 100 percent of their goals by doing 1 percent a day.

The most distinctive feature of online coaching is that the response to the client’s needs is almost immediate, just an email or Skype call away. Problem solving can occur in real-time with instant application of new tools and strategies. The other advantage is the solution is provided in the context of a “partnership” between the coach and the client. This makes it particularly effective in development assistance, where ownership and sustainability are major concerns and dependence on foreign assistance needs to be avoided for a more sustainable solution. Since creating the 7-Day MPH online program that trained in the basic principles of public health programs, my company has gone on to create a full portfolio of online programs coached by health care professionals with field experience. I’ve been privileged to watch hundreds of clients empower their career and use best practice tools and strategies we teach to save more lives.

I’ve written a white paper that outlines the benefits of online training and coaching programs, how they add value by facilitating the analysis of problems, helping workers improve their performance, and assisting to design and implement improved systems and services. Each program includes all materials, a checklist of the tools needed to be successful, and a coach’s manual.

Is there any other critical information you would like to share?

The response from the health care professionals and their supervisors to the program has been entirely positive. Participants get positive results immediately, get motivated to try new approaches, tools, and practices, and are recognized for their progress. This motivates them to lead more changes and improvements in the way health care is delivered.
Everyone appreciates the convenience of online training with access to their own personal coach to support them. In traditional training, many people hesitate to ask questions because they are afraid of losing face in front of colleagues. Our program rewards and answers every question so that the student can apply what they learn in real-time and grow in self-confidence and motivation. Several of participants have gone on to become certified and coach and train others, replicating the success of the programs.

There is a need to think of alternative methods of delivering technical training and development assistance in global health beyond the traditional five-year projects. Online coaching has the potential of providing the right assistance at the right time for health care professionals to develop and sustain improvements their health system, as well as taking CLA to a global scale by training and supporting coaches in every country and region.