2023 CLA CASE COMPETITION

COLLABORATE • LEARN • ADAPT

Case Title:

USAID/Haiti uses Co-creation to Improve Health Service Delivery

Name:

Jdhymi Dulaurier Lida Fette Regie Masse Kelly Thoma

Organization:

USAID/Haiti

Summary:

To respond to the country's challenges and using the concept of Co-creation, the USAID/Haiti Health Office brought stakeholders together to collaboratively design solutions for the development challenges of an Improved Health Service Delivery (IHSD) program. From 2020 through 2022, USAID collaborated with internal and external stakeholders to revamp its IHSD program using a brand-new Co-creation approach. This approach addressed expanding access to health services to underserved communities through integrated facility and community health work. The Ministry of Health (MOH), private sector, local organizations, and faith-based organizations were all engaged to ensure local needs were represented while aligning with the most up-to-date research and best practices for delivering affordable and quality health services.

A health system requires the buy-in from the government, local leaders, communities, private sector, and more. USAID funds over 60 percent of health services in Haiti. This unsustainable model needs more local buy-in for the health system to operate beyond donor dependence. Collaborating, Learning and Adapting (CLA) and Co-creation approaches can empower local actors to drive USAID programming, ensure long term sustainability, and transition to local stakeholders.

Using all CLA subcomponents, in particular, collaborating and process, the Co-creation process led to two awards: the IHSD Integrated Health Resilience Activity project and the IHSD Partnerships for Equity in Health project. Both projects included new local partners and will increase local organizations' capacity and their transition to direct USAID funding as well as increase availability and quality of primary health care services in 170 health facilities throughout all 10 departments in Haiti.

1. **WHAT: What is the general context in which the case takes place? What organizational or development challenge(s) or opportunities prompted you to collaborate, learn, and/or adapt?**

Public health crises, inequality, poverty, and ongoing political struggles in Haiti have created a challenging environment for the operation and functioning of health services. In the midst of the COVID-19 pandemic, Haiti was struggling with the political aftershocks of the assassination of its president, increased insecurity and gang violence, an earthquake, rampant inflation, fuel shortages, and cholera. Within this context, the Health Office saw the need to be more adaptive and rethink its approach to the Health Service Delivery (HSD) program. USAID realized programming needed to better reflect the country's context, and work with more stakeholders to find solutions to a constantly changing environment.

The USAID/Haiti Strategic Framework (2020-2024) emphasizes a resilience-based approach and refocusing Government of Haiti engagement at the local level. Development is donor-driven, rather than country-led or community-owned, and USAID is interested in transitioning its direct support of health facilities to local actors. The Health Office believed that a shift in partner organizations would align the mission's desire for more local partnerships through co-creating the HSD project. Although Co-creation is not a new concept at USAID, the Health Office had used in the past the traditional approach with USAID in the main driver seat in the activity design process.

Co-creation emphasizes learning from each other, and better documents what has and has not worked in the past. Knowing that communities and local civil society may be best placed to answer these questions, as well as collaborating with the MOH and local organizations, helped shine a light on gaps in health programming and quality. By collaborating with external partners, USAID was able to determine that a programming focus on community-based care linked to primary health care (PHC) would place families and the most vulnerable groups at the center of the health system and achieve better health outcomes.

2. **What two CLA Sub-Components are most clearly reflected in your case?**

External Collaboration

Decision-Making

3. **HOW: What steps did you take to apply CLA approaches to address the challenge or opportunity described above?**

From 2020 to 2022, the USAID/Haiti Health Office collaborated with the Office of Acquisitions and Assistance (OAA), the Bureau for Policy, Planning and Learning (PPL), the Global Development Lab, and potential implementing partners to define the issues, identify solutions, build consensus and redefine how to move forward with the IHSD program. Beginning in 2020, USAID/Haiti staff had regular calls and meetings with counterparts at OAA, PPL and the Lab to identify different mechanisms and approaches for the design and implementation of IHSD activities. To anticipate the challenges of Co-creation with new partners, the USAID/Haiti Health Office engaged contracting and OAA agreement officers early to ensure Co-creation would not cause procurement issues. By December 2020, the team decided to launch a Co-creation approach.

In September 2020, USAID/Haiti requested concept paper submissions from groups that were interested in participating in the Co-creation retreat. Out of 17 submissions (among the highest number of participants in concept note request), USAID selected five concept papers that demonstrated understanding of the health system and context in Haiti, and suggested the most innovative solutions to respond to the constantly changing environment. USAID invited these groups, encompassing local and international partners, to the next step of the Co-creation process. When shifting to local partners, a challenge in Co-creation is finding the right balance of participants. USAID ensured a good balance of local partners and international partners committed to improving Haiti HSD to find local solutions to achieve better health outcomes. The retreat was facilitated in French with simultaneous English translation that allowed each organization to fully experience and participate.

Co-creation creates a more inclusive environment that breaks down silos that often impede our ability to design, implement, and oversee innovative, impactful, and locally driven health programs. Three facilitators from Collaborate-Up, a Global Health mechanism specialized in supporting Co-creation activities, ensured that all were able to participate, and all ideas were fully explored. Throughout the retreat, participants formed teams and worked together to combine their ideas and develop a possible vision for the future. USAID Haiti staff from various offices such as OAA, Economic Growth for Agriculture and Development (EGAD), participated in all the planning meetings, as well as the three-day co-creation retreat and were available to answer questions. USAID also collaborated on an open Questions and Answers document that was accessible to all participants.

All partners presented their concept papers. Participants were divided into groups based on three topics: reproductive, maternal, newborn, child health and nutrition; comprehensive HIV services to achieve epidemic control in Haiti; and resilient and sustainable community health systems through the promotion of quality of care, empowerment of communities, data for results, and resource optimization. General areas of work were agreed upon in each category, with possible concerns and solutions proposed.

USAID was intentional in making sure the early sessions did not focus on deliverables, and decided to use the time to build trust in a shared environment, think inclusively for future design proposals across partners and geographical zones in Haiti, as well as elevate proposed ideas to scale up programming with future budget constraints. By the end of 2022, the Co-creation process resulted in two new integrated service delivery projects.

4. RESULTS: Choose one of the following questions to answer.

We know you may have answers in mind for both questions; However please choose one to highlight as part of this case story

A. DEVELOPM ENT RESULTS

The Co-creation retreat was an opportunity to team up, develop and work on ideas to complete a vision on how integrated health service delivery could be achieved with USAID funding. Co-creation ensured innovative approaches to delivery quality health services, as well as engaging the private sector for sustainability and leveraging resources for a stronger health system. By including local stakeholders from the beginning of the decision making process, USAID/Haiti better positioned itself for long term sustainability, possibly increasing local ownership of USAID programming and decreasing programmatic risks.

Co-creation ensured that broader health objectives were not only discussed in terms of challenges and results, but also identified solutions to address programmatic risk. Co-creation developed two new IHSD projects that focus on facility based care in community settings, while strengthening the foundations for a continuum of care through the life cycle of the individual, with particular focus on primary health.

The first award, the USAID IHSD – Integrated Health Resilience Activity, implemented by IMA World Health, uses a community-based, facility-linked primary health care approach to increase the uptake and accelerate the equitable availability, access and use of quality essential health services. This five-year activity will harness the potential of new and underutilized local partners at all levels of the health system to increase the uptake and accelerate the equitable availability of quality essential health services.

The second award, the IHSD – Partnerships for Equity in Health and implemented by Health Equity International (a local organization) supports health facilities and strengthens the foundations for the continuum of healthcare services and across the life cycle in clinical settings, via outpatient services, and outreach, ensuring family and community care. This activity works to strengthen the health system at all levels and uses a community approach to reach underserved and hard-to-reach populations with limited access to health services.

5. **ENABLING CONDITIONS: How have enabling conditions - resources (time/money/staff), organizational culture, or business/work processes - influenced your results? How would you advise others to navigate any challenges you may have faced?**

USAID knew that they wanted to change their approach to health service delivery. The health team wanted to align to broader agency goals while maintaining innovative technical approach to improving health outcomes in Haiti. USAID put in the time over two years to ensure the project success.

By working with internal and external stakeholders, the health team knew the process would be slow, but worthwhile. The whole of mission approach to the activity ensured buy-in from other offices. Regular meetings with OAA and other offices kept teams aligned on the shared goal. Being patient ensures a more successful portfolio, and USAID was also able to shift its approach as different internal and external factors influenced the co-creation process. Additionally, the health team knew that co-creation would result in strong awards, and also encouraged more local actors to help shape the project design.