## **GH/HSS LEARNING AGENDA**

The MTE initiative establishes a learning agenda across technical areas for HSS within GH's OHS. Evidence of how HSS reforms and interventions affect the performance of health systems and contribute to sustained improvements in health outcomes is "scarce, scattered, and not widely disseminated," and these gaps hinder support from various stakeholders. GH's assistant administrator supported MTE's efforts to synthesize existing evidence and generate new knowledge. While learning is a key component of this effort, encouraging Congressional investment and other external financing for HSS also drove initial commitment for developing the learning agenda.

The learning agenda was developed by a staff of two using an inductive approach. The learning agenda team conducted a preliminary stocktaking exercise of HSS activities and categorized them according to three principal questions that were technical, methodological, and strategic in nature. They also created new questions to guide future knowledge-generating activities based on identified learning gaps. The process of developing this crosscutting agenda revealed significant barriers in GH's organizational culture, funding structures, and knowledge management systems to horizontally collaborate between offices on crosscutting issues such as HSS. Further efforts will aim to improve evidence gathering, dissemination, and feedback loops across GH offices and with Missions.

Status	<ul> <li>✓ Created learning agenda (ongoing)</li> <li>✓ Generating knowledge</li> <li>✓ Capturing/synthesizing knowledge (ongoing, across some activities)</li> <li>✓ Sharing knowledge (ongoing, across some activities)</li> <li>□ Applying knowledge (ongoing, across some activities)</li> <li>□ Updating/adapting learning (planned)</li> </ul>
Materials	MTE Status Report; MTE PPT
Key Learning Questions/Themes	<ul> <li>Three principal learning questions (developed inductively based on collection and review of evidence):</li> <li>1. What does the literature and experience tell us about the impact of HSS interventions on health outcomes?</li> <li>2. How can we prospectively monitor and evaluate country-level HSS interventions and initiatives?</li> <li>3. How can we ensure a coordinated, high-impact approach to health systems research?</li> </ul>
Key Learning Activities	Eleven learning activities organized by the three principal questions, including literature reviews, research, and product development
Timing	2014: Initiated by GH assistant administrator, implemented by senior research advisor in OHS 2016: Final report released in April
Steps in Process	<ol> <li>Gathered evidence about what works for HSS through investments in implementing partner activities, literature reviews, and calls for relevant evidence/experience within USAID</li> <li>Inductively developed learning questions and identified evidence gaps</li> <li>Prepared and disseminated MTE products, including Impact Policy Report, Health Systems Benchmarking tool, and Improving Quality of Care report</li> </ol>
Current Learning Agenda Work	Transitioning MTE portfolio to new staff in OHS Continuing and completing MTE activities that were ongoing in the April 2016 status report

Next Steps	<ul> <li>Close out ongoing activities and disseminate findings</li> <li>Possibly add new MTE activities based on specified criteria in current learning agenda</li> <li>Facilitate publication in peer-reviewed literature</li> <li>Engage USAID Missions in contributing to the HSS evidence base</li> </ul>
Strengths	<ul> <li>Successfully gathered scarce, scattered, and un-disseminated evidence on what works to strengthen health systems</li> <li>Received strong support from GH leadership (2014-2016)</li> <li>Good response rates from calls for evidence within USAID</li> </ul>
Challenges	<ul> <li>Very limited staff and few resources to implement the MTE initiative</li> <li>Organizational culture and structure were not supportive of focusing on this crosscutting issue</li> <li>New OHS staff and GH leadership may reprioritize this agenda and the investments</li> <li>Very little input from Missions or implementing partners at a country level due to resource constraints</li> </ul>
Promising Practices	<ul> <li>Used inductive learning agenda development process of gathering and synthesizing existing evidence first, then identifying the broad questions they answered</li> <li>Used evidence base to raise funds and advocate for HSS work</li> </ul>
Recommendations	<ol> <li>Understand and carefully navigate USAID's political economy in establishing a learning agenda</li> <li>Intentionally choose inductive or deductive approaches to agenda development</li> <li>Create broad-based participation in identifying and prioritizing questions so evidence will be relevant and used by many</li> <li>Hold as many listening sessions as possible to widen the discussion on how to prioritize the learning agenda going forward</li> </ol>
Points of Contact	Joe Naimoli, health systems research Advisor (from 2013 to retirement in 2016)  Bob Emrey, Lead Health Systems Specialist, GH/OHS (Starting in 2017)