

## “The Coaching Approach” – SPARC’s lessons from Burkina Faso using an alternative approach for Health Systems Strengthening

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### I. Background

African countries are designing and implementing health financing reforms to provide quality healthcare to their citizens while reducing financial hardship to households for health spending and achieve Universal Health Coverage (UHC).<sup>1</sup> Some countries have applied technical solutions, many times adopted from other settings, with little consideration of the local context or stakeholders.<sup>2</sup> Technical solutions such as user fees introduced with structural adjustment programs in the 1980s, or in more recent times, contributory social health insurance in low-income countries with a large informal sector, could be considered as key examples.<sup>3,4</sup> Moreover, local actors along with their technical and contextual expertise are often left out of the solution-generating equation.

More recently, there has been a growing recognition of the importance of factoring in politics and stakeholder relationships in designing and implementing health systems strengthening interventions. It is from that perspective of looking beyond the technical solutions to address health system issues, to collaboratively and inclusively define bottlenecks and identify potential solutions, that the Strategic Purchasing Africa Resource Center (SPARC)<sup>5</sup> intervened in Burkina Faso’s journey toward Universal Health Coverage (UHC).

Between 2014 and 2017, the World Bank funded the Reproductive Health Project (RHP),<sup>6</sup> in Burkina Faso, using a Performance-Based Financing (PBF) mechanism for purchasing<sup>i</sup> health care services for maternal and child health services.<sup>7</sup> In 2018, following the RHP, the World Bank launched the Health Services Reinforcement Project (HSRP) which had three main components.<sup>8</sup> Under the component of strengthening health system capacity there were three sub-components: 1) Establish the National Universal Health Insurance Fund (Caisse Nationale d’Assurance Maladie Universelle - CNAMU) with the aim of strengthening the pooling of financial resources for the purchasing of health services, 2) Strengthen and scale up strategic purchasing to improve the efficiency and effectiveness of the free healthcare scheme – the Gratuité program launched in 2016,<sup>ii</sup> and 3) Strengthen verification strategies and carrying out cross-cutting health financing support interventions.

Subsequently, the World Bank restructured the HSRP to improve the efficiency of purchasing by the Ministry of Health’s user fee exemption policy with a bigger focus on vulnerable and displaced groups. On the one hand, the World Bank was pushing for the restructuring of the HSRP as described while the Burkinabé government wanted a different direction, to pool the PBF funds in the Gratuité program to increase the reach of the program. Further, the definition of strategic purchasing, and the process of strengthening the strategic

### BURKINA FASO AT A GLANCE

- ▶ Population (2021): **22.1 million**
- ▶ GDP per capita (2019): **US\$893.08**
- ▶ Poverty headcount at \$1.90/day (2019): **41.4%**
- ▶ Life expectancy (2020): **60 years**
- ▶ Current health expenditure (CHE) per capita (2019): **US\$42**
- ▶ Public expenditure as % of CHE (2018): **43%**
- ▶ Private expenditure as % of CHE (2018): **42%**
- ▶ Out-of-pocket expenditure as % of CHE (2019): **35%**
- ▶ External expenditure as % of CHE (2018): **15%**

*Source: World Bank Databank*

<sup>i</sup> Purchasing is the transfer of pooled funds to healthcare providers for service delivery.

<sup>ii</sup> In 2016, the Government of Burkina Faso introduced Gratuité, a user fee replacement policy, to increase access to and use of health care services for women and children under 5 years of age.

purchasing functions within the Gratuité program, remained unclear for most stakeholders with significant ramifications.<sup>9</sup> Instead of reaching the proposed objective, the restructuring of the HSRP created a divide between the World Bank and the government of Burkina Faso, with local stakeholders divided between the two camps. This misalignment slowed down the restructuring process, and, in turn, delayed the design and implementation of the health financing reforms necessary to move the country further on its journey toward UHC.

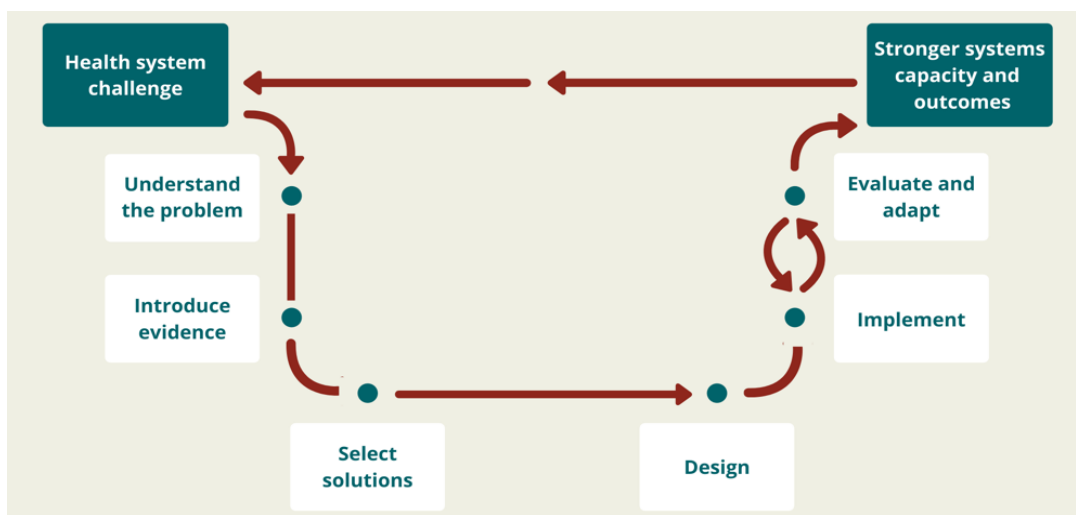
In an effort to remedy the situation, the Ministry of Health requested technical assistance from SPARC in 2020, to help operationalize strategic purchasing within Burkina’s health system and eventually close the ideological gap between the World Bank and the government of Burkina Faso. This brief describes how SPARC’s coaching approach was applied during this two-year process (2020-2022) and highlights some key lessons from this engagement.

## II. What is the “Coaching Approach”?

When countries are faced with health system challenges, they typically go through a series of steps to resolve the challenge. While these steps are not always linear, organized, or sequential as presented in Figure 1, they typically include some variation of the following:

- ▶ **Understand the problem or challenge.** Challenges can be surfaced in many ways, through routine monitoring, stakeholder voices, or sometimes political pressure.
- ▶ **Introduce evidence** to better understand the problem and identify options for solutions. In some cases, the evidence is rigorous, and other times it may be anecdotal experience or a combination of both.
- ▶ **Select a solution** from among different options, either through a systematic process or more informal processes driven by individuals and politics, or a combination of both.
- ▶ **Design and implement the solution**—whether it’s a policy, programmatic intervention, or some other solution. The solution may be implemented as a pilot, or at a larger scale.
- ▶ **Evaluate and adapt** by monitoring, evaluating, and learning from implementation through very informal and ad hoc to very rigorous and systematic evaluations.

Figure 1: SPARC’s Health System Change Process



The coaching approach,<sup>10</sup> is an approach to providing technical support that draws mainly on country and regional experts to “coach” and “mentor” national stakeholders as they go through the process of addressing health systems challenges. These coaches and mentors can be supported by global coaches and mentors as needed. This approach aims to provide technical support in a way that connects to, respects, and improves on country-led processes, but not bypassing existing country processes or operating in parallel to them.

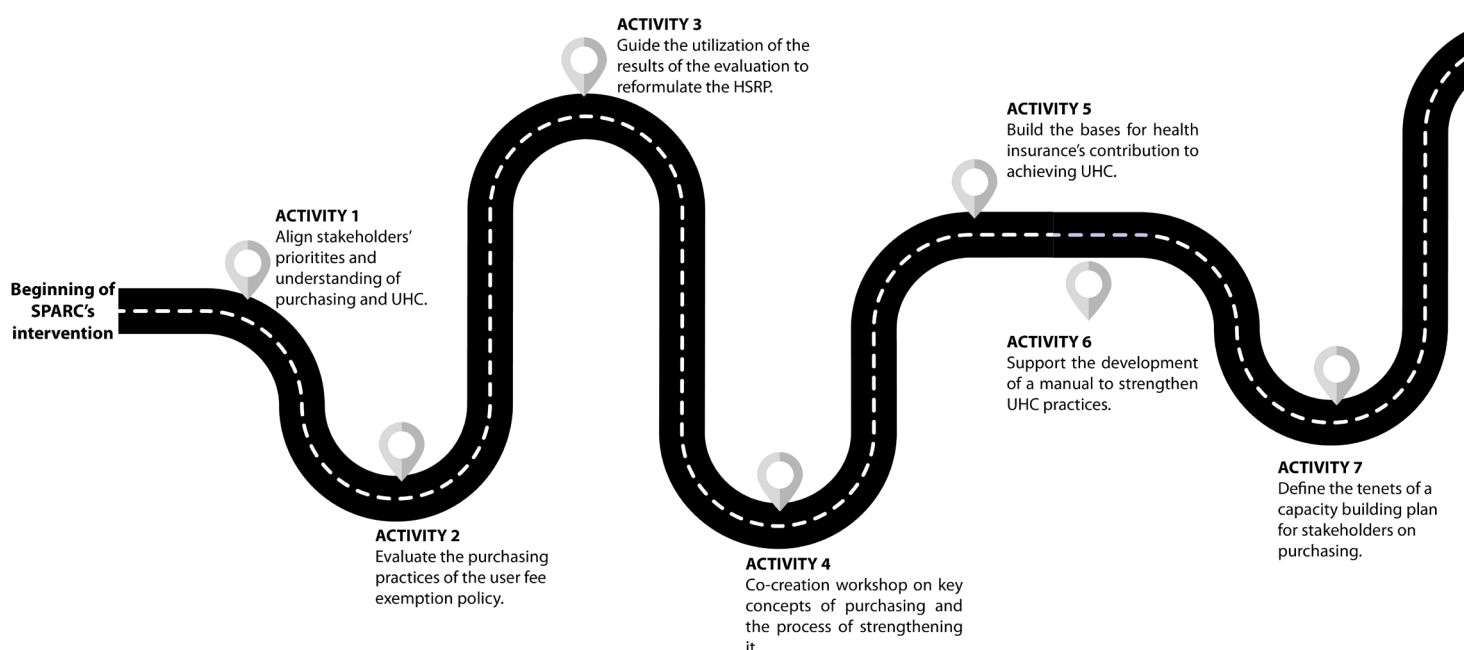
Through this approach, SPARC aims to create an inclusive environment conducive to meaningful collaboration where all stakeholders are given a seat and a voice at the decision-making table. The rationale behind the approach is that when stakeholders are included in defining the problem and identifying potential solutions, their sense of ownership facilitates the implementation of proposed solutions.

### III. Applying the Coaching Approach in Burkina Faso

After an initial scoping mission in November 2020, SPARC was requested by the Ministry of Health to facilitate multi-stakeholders dialogues to 1) Reach a consensus on a vision for a holistic approach to strategic purchasing of priority services to get the most value for money available for UHC in the country (both domestic and donor funds), 2) Develop a roadmap with a step-by-step approach to aligning strategic purchasing functions in the current coverage schemes (especially Gratuité and PBF) within the holistic vision, and 3) Provide recommendations to international partners on how they can align their support under the holistic vision and roadmap for strategic purchasing of priority services for UHC.

Based on this mandate, SPARC engaged a coach<sup>iii</sup> from Benin as a neutral facilitator for this multistakeholder engagement process. SPARC’s mandate in Burkina Faso was to: 1) Harmonize the understanding of strategic purchasing among stakeholders and 2) Develop a strategic purchasing roadmap for UHC and the implementation pillars (Figure 2).

Figure 2: SPARC’s activities in Burkina Faso



#### 1. Harmonize understanding of strategic purchasing among stakeholders

While Burkina Faso received significant funding to strengthen its health system through the four-year World Bank HSRP, there lacked a clear definition of strategic purchasing as well as a clear process for strengthening the strategic purchasing component in the country's Gratuité program. SPARC carried out the following activities to improve clarity and understanding among stakeholders.

##### Multi-Stakeholder Dialogue

SPARC began by mapping stakeholders' understanding, perspectives, influence, and expectations, as well as the contextual constraints and challenges faced by the HSRP. The SPARC coach facilitated an active consultative process through multiple stakeholder dialogues, each building on the previous session while building consensus on a shared vision and roadmap for strategic purchasing. The coach identified, from existing literature, a relatable way of framing strategic purchasing to ease engagement with the concept by various groups of stakeholders at different levels of the health system with diverse backgrounds and competencies.

##### Evaluation of existing strategic purchasing practices in Burkina Faso

Once stakeholders had a harmonized understanding of strategic health purchasing, SPARC conducted an evaluation of existing SHP practices within the user fee exemption to 1) demonstrate how strategic purchasing is not a foreign concept and is ongoing in the Gratuité program, 2) clearly identify the practices within the Gratuité Program that can be maintained and strengthened and improved, and 3) identify and

<sup>iii</sup> A coach is a person who provides technical guidance using contextual knowledge to guide policymakers on regular basis to achieve a specific goal. A coach acts as an advisor whose ideas/inputs are sought to inform a decision-making process.

implement progress monitoring practices for the Gratuité program. The shared understanding of strategic health purchasing among stakeholders, identification of the areas of improvement, and the progress monitoring framework that followed, were accepted by the stakeholders, including the World Bank when presented during the HSSP mid-term evaluation. Recommendations from the SHP evaluation were utilized to develop the Ministry of Health's HSSP work plan for 2021.

A retreat convened in Bobo-Dioulasso, facilitated by the coach, further strengthened the consensus among national stakeholders on strategic purchasing concepts and how strategic purchasing is crucial in the country's progress toward UHC. The retreat had a core group of stakeholders including HSRP managers, the Ministry of Health Technical Secretariat for UHC, the Directorate for Health Financing Partnership, and other development partners. Later in January 2021, the Ministry of Health organized a co-creation workshop on the concept of strategic purchasing with a larger group of stakeholders including civil society representatives to deepen the consensus among stakeholders on strategic purchasing.

## **2. Develop a strategic health purchasing roadmap for UHC**

A strategic purchasing roadmap was deemed necessary as a guide to steer the country's progress toward UHC by identifying the necessary actions to be taken, their sequencing and stakeholders to be involved. In collaboration with ThinkWell<sup>11</sup> and CNAMU, SPARC facilitated the development of a strategic purchasing roadmap for UHC and the pillars of its implementation. The development of the roadmap is ongoing.

# **IV. Lessons learned applying the Coaching Approach in Burkina Faso**

## **1. Simplify the complex to maximize stakeholder participation for progress**

When facilitating processes where different stakeholders with various levels of technical expertise interact, it is important to create an environment where all stakeholders involved are provided with the tools that they need to analyze, comprehend, and contextualize the health system challenges. This allows them to adequately participate in the identification and implementation of the strategies to align with the health system's objectives. As such, it is important to simplify technical analysis tools to facilitate easier understanding and utilization by all stakeholders.

## **2. Co-creation promotes systems thinking, accountability, and smooth implementation processes**

When stakeholders with diverse perspectives and roles in the health system co-create solutions, the issues are, viewed from different perspectives and thus analyzed in a more systemic manner. SPARC reduced duplication of efforts during this process by working collaboratively with key health financing stakeholders in the country including the MOH, ThinkWell, and the World Bank. SPARC facilitated a co-creation process that enabled consensus on the most urgent intervention areas as well as the most adequate way forward to resolve the identified problems. The collective identification of solutions ensures a holistic group of solutions is proposed and the implementation will be supported by a majority of the stakeholders included in the decision-making process. Finally, the collaborative nature of co-creation creates an environment for all stakeholders to access information that they need to keep each other accountable. In this process, stakeholders were brought into the co-creation process and provided all the information related to the restructuring of the World Bank's HSRP and made aware of the roles and responsibilities of each stakeholder which allowed them to compare results, and question unsatisfactory progress in the program.

## **3. Understand the political economy before intervening**

While technical solutions are necessary to resolve health system challenges, understanding the political economy of the context where they will be implemented is equally important. The political economy of the context dictates the focus of reforms as well as the appropriateness of the proposed solutions. In Burkina Faso, understanding the political economy of the context allowed SPARC to identify the most effective approach to respond to the request from the Ministry of Health.

However, Burkina Faso's strategic purchasing roadmap was developed in a context where the country was going through a tumultuous political process marked by insecurity and the COVID-19 pandemic. Moreover, the period was marked by a succession of leadership and management changes at the Ministry of Health leading to a change of SPARC interlocutors within the Ministry. It was, therefore, necessary to inform and explain, to each new leader and manager, the validity of the process of setting up the reforms to obtain their support for the process, which considerably slowed down SPARC's activities.

SPARC focused on an adaptive coaching approach, continuously holding dialogues with national stakeholders and being flexible with the support provided to the country towards reaching concrete health system change. The approach acknowledges that technical support, especially in the context of Burkina Faso, will not be sequential and the complexity of navigating the socio-political environment is what drives the process.

The roadmap is an important step towards achieving strategic purchasing in Burkina Faso, but SPARC recognizes that having the roadmap does

not necessarily mean that it will be implemented in full in the short term. Although the roadmap has not yet been fully validated, some of its components are being implemented by the current government. For example, a strategic purchasing task force has been created to steer the country's progress toward UHC through improved strategic purchasing.

#### **4. The presence of a competent and neutral broker could be valuable based on context**

The technical preparedness, integrity, and credibility of the coach are important to assure stakeholders of the quality of the assistance being provided. The institutional relationship between the different parties (coach and national stakeholders) can influence how the country receives the coach. The coach's responsibility is to keep stakeholders in the driver's seat of the country's reform process while making sure that all involved parties are given a platform to have their voices heard. As such, engaging an external coach with contextual knowledge of the country to navigate the intricacies of the system and build trust among stakeholders was a valuable addition to the success of the facilitation of the process. The coach demonstrated a good understanding of the subject matter, and an understanding of different stakeholders' perspectives, concerns, and objectives. Additionally, beyond technical expertise, the coach showed emotional intelligence to create a collaborative environment. Finally, the coach ensured neutrality at all times, which was crucial to building trust among the different groups of stakeholders.

## **V. What's next?**

Through SPARC's intervention and collaboration with other stakeholders, a compromise was found between the government and the World Bank, on the mechanisms for deploying strategic purchasing within the framework of the HSRP and beyond. In this newfound agreement, the World Bank's program contributed through the Gratuité program, resources for purchasing the benefits package in selected regions of the country, targeting vulnerable population groups such as displaced individuals. In the next phase of SPARC support to Burkina Faso, SPARC will build on the success of the past two years to complete the strategic purchasing roadmap. SPARC will continue to improve the coaching approach through these lessons in future country engagements as SPARC supports countries on their journey toward UHC.

## References

1. **WHO.** (2022). *Universal Health Coverage (UHC)*. World Health Organization. Retrieved March 27, 2023, from [https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc))
2. **Yazbeck, A. S., Soucat, A. L., Tandon, A., Cashin, C., Kutzin, J., Watson, J., Thomson, S., Nguyen, S. N., & Evetovits, T.** (2023). Addiction to a bad idea, especially in low- and middle-income countries: Contributory health insurance. *Social science & medicine* (1982), 320, 115168. <https://doi.org/10.1016/j.socscimed.2022.115168>
3. **Thomson, M., Kentikelenis, A., & Stubbs, T.** (2017). Structural adjustment programmes adversely affect vulnerable populations: a systematic-narrative review of their effect on child and maternal health. *Public health reviews*, 38, 13. <https://doi.org/10.1186/s40985-017-0059-2>
4. **Barasa, E., Kazungu, J., Nguhiu, P., & Ravishankar, N.** (2021). Examining the level and inequality in health insurance coverage in 36 sub-saharan African countries. *BMJ Global Health*, 6(4). <https://doi.org/10.1136/bmjgh-2020-004712>
5. **SPARC.** (2022). *Who we are*. Strategic Purchasing Africa Resource Centre (SPARC). Retrieved March 27, 2023, from <https://sparc.africa/who-we-are/>
6. **World Bank Group. Burkina Faso - Reproductive Health Project (English).** Washington, D.C. 2022 <http://documents.worldbank.org/curated/en/809741468019809981/Burkina-Faso-Reproductive-Health-Project>
7. **World Bank.** (2022). *Performance Based Financing: Inspiring New Approaches to public financial management in health and Education*. World Bank Blogs. Retrieved March 27, 2023, from [https://blogs.worldbank.org/governance/performance-based-financing-inspiring-new-approaches-public-financial-management-health#:~:text=Performance%20based%20financing%20\(PBF\)%20links,the%20use%20of%20these%20funds](https://blogs.worldbank.org/governance/performance-based-financing-inspiring-new-approaches-public-financial-management-health#:~:text=Performance%20based%20financing%20(PBF)%20links,the%20use%20of%20these%20funds)
8. **World Bank.** (2018). *Burkina Faso - Health Services Reinforcement Project*. World Bank. Retrieved March 27, 2023, from <https://documents.worldbank.org/en/publication/documents-reports/documentdetail/570511531107056406/burkina-faso-health-services-reinforcement-project>
9. **Gatome-Munyua, A., Sieleunou, I., Sory, O., & Cashin, C.** (2022). Why is strategic purchasing critical for Universal Health Coverage in sub-saharan africa? *Health Systems & Reform*, 8(2). <https://doi.org/10.1080/23288604.2022.2051795>
10. **Results for Development.** (2021). *The coaching approach*. Results for Development. Retrieved March 27, 2023, from <https://r4d.org/thecoachingapproach/>
11. **ThinkWell.** (2021). *Our story*. ThinkWell. Retrieved March 27, 2023, from <https://thinkwell.global/who-we-are/our-story/>