

Business as usual in a changing world?

Some illustrative stories

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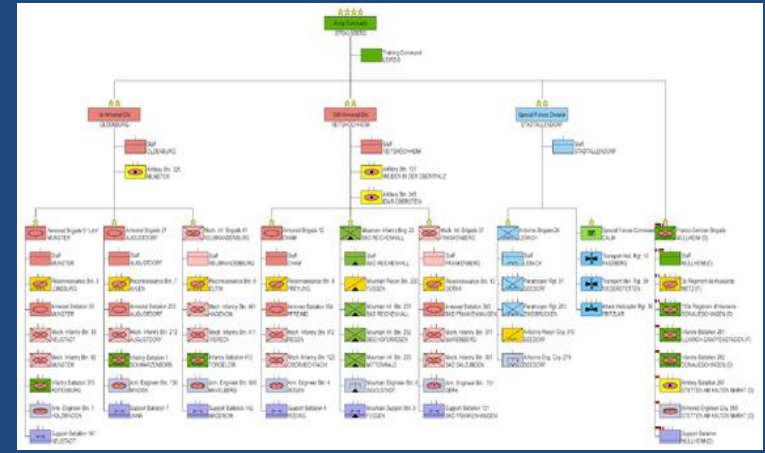
*The driving forces that keep
business as usual...*

Two worlds in equilibrium state

The world of ideas , policies and international declarations:
International arena, consultants, academics, declarations, ...



The world of action and service provision
norms, hierarchies, ...

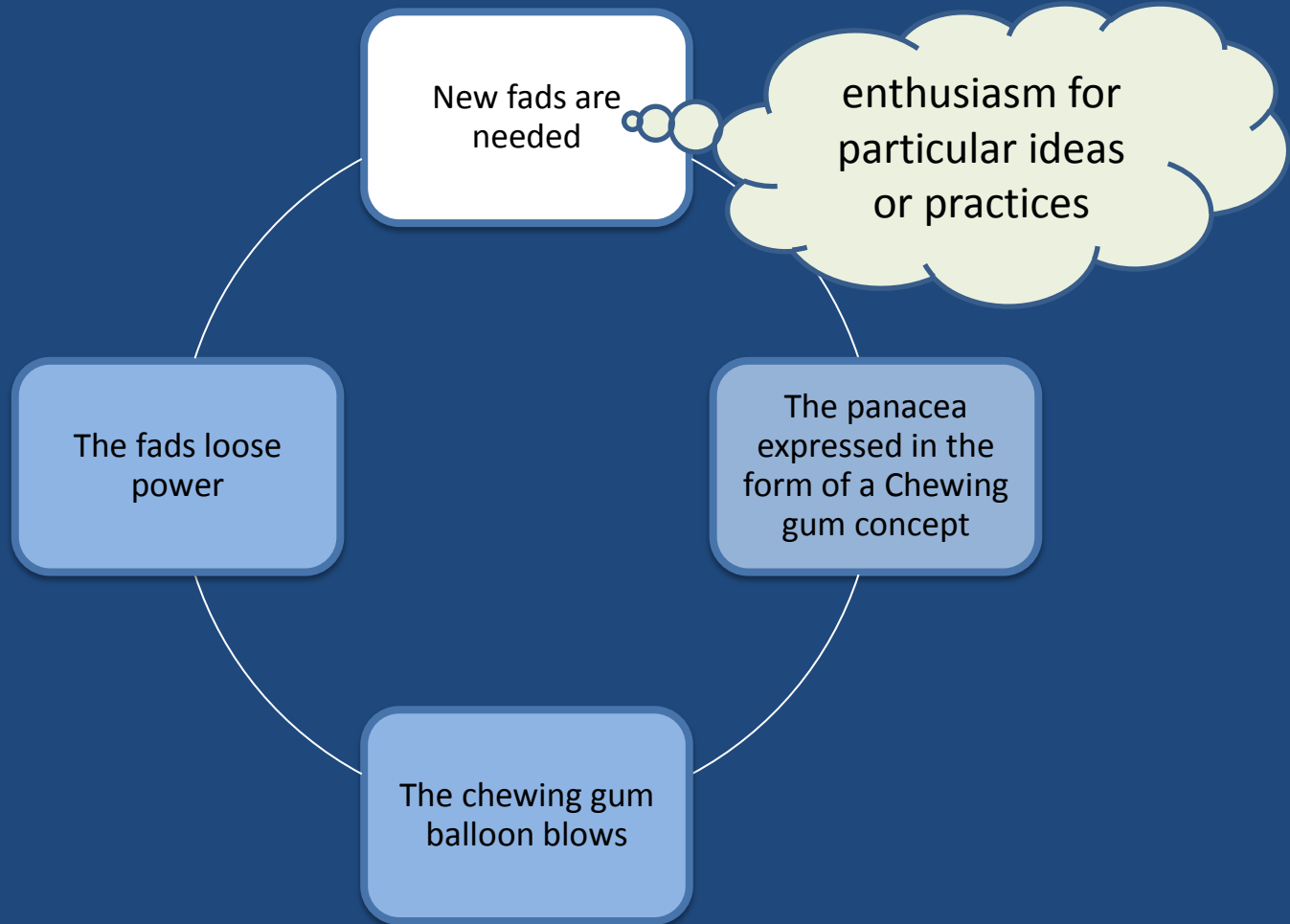


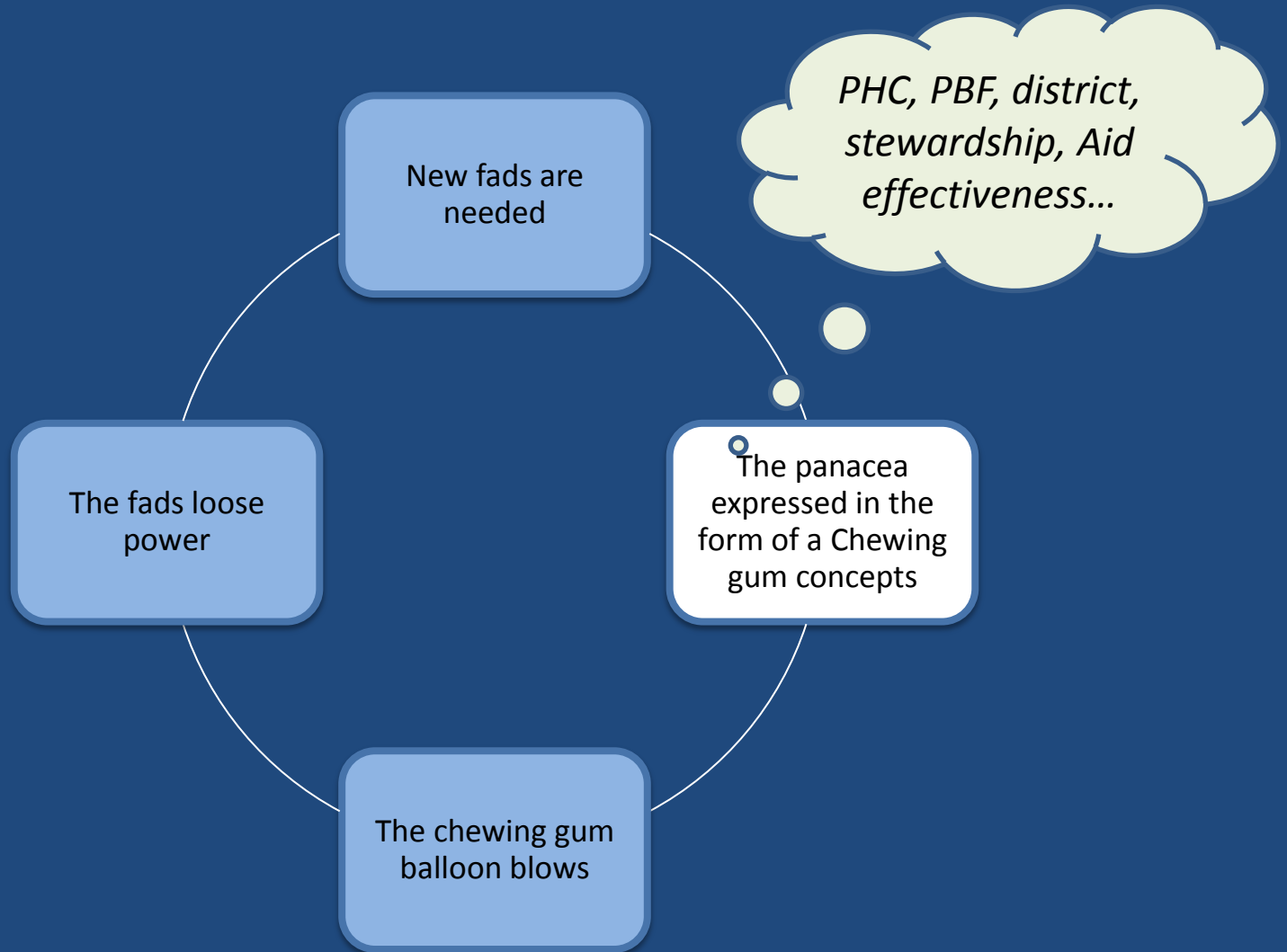
The world of ideas , policies and
international declarations:
*equilibriums through repeated “fad
waves ”*

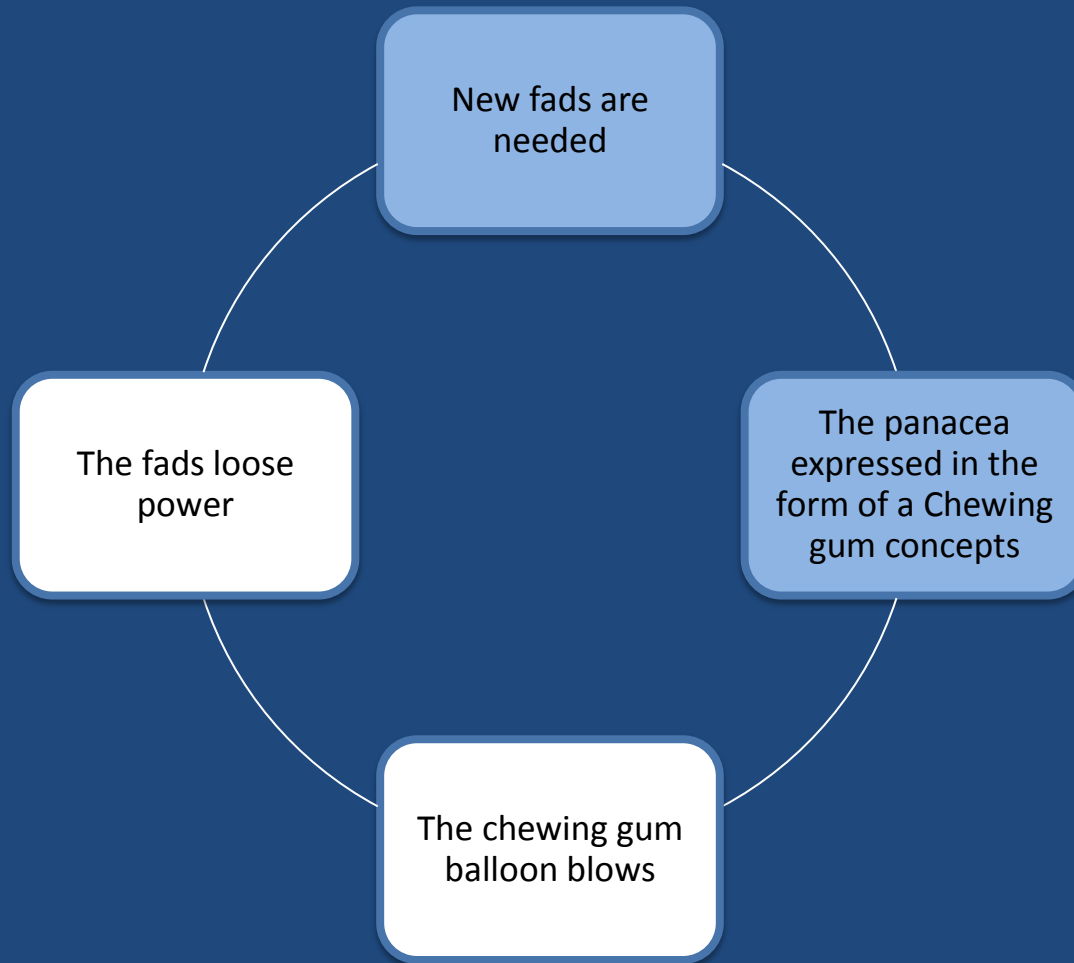
« fads kill fads »

AND

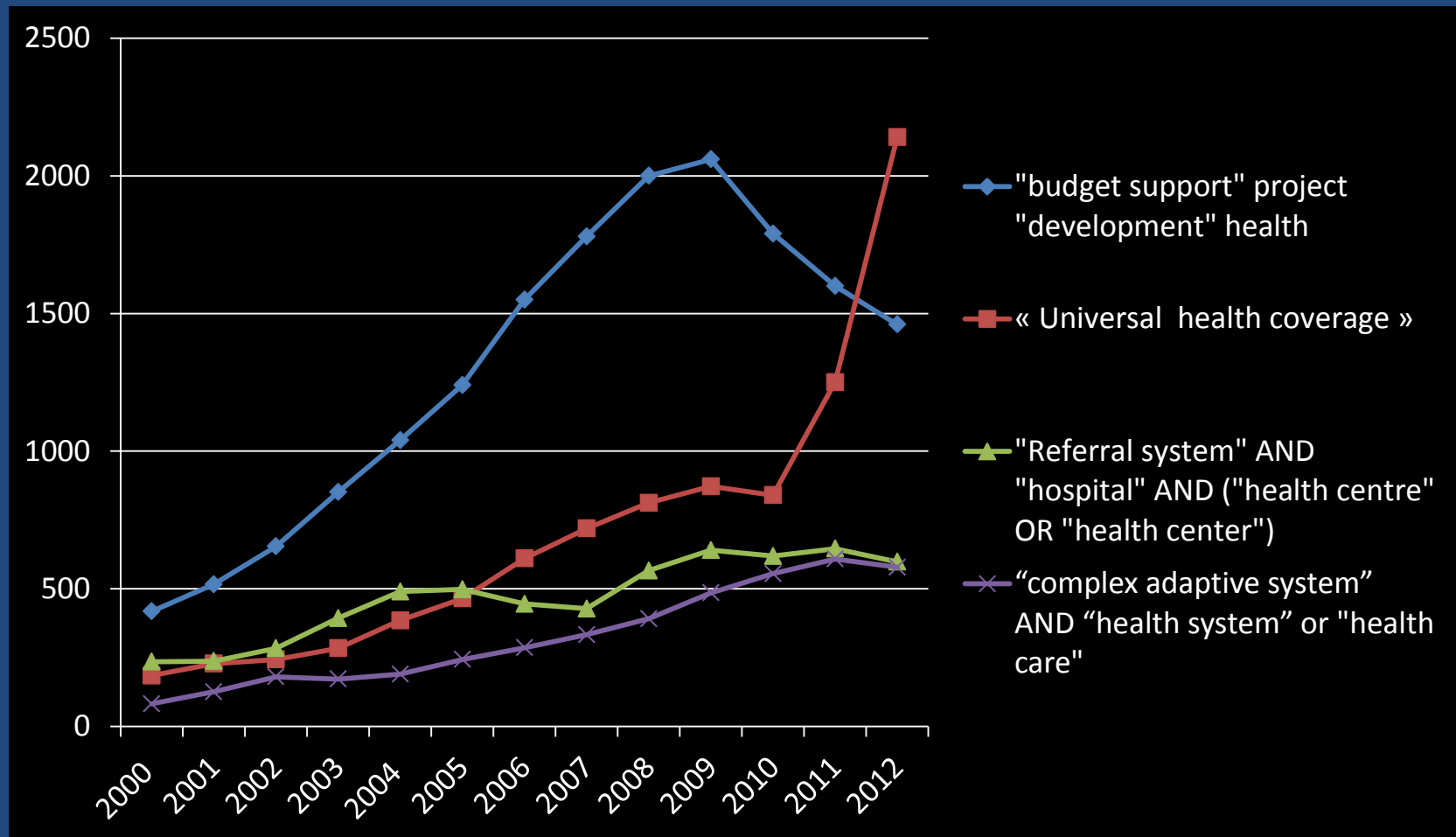
*« fads keep workshops, seminars,
international declarations and
academics alive »?*

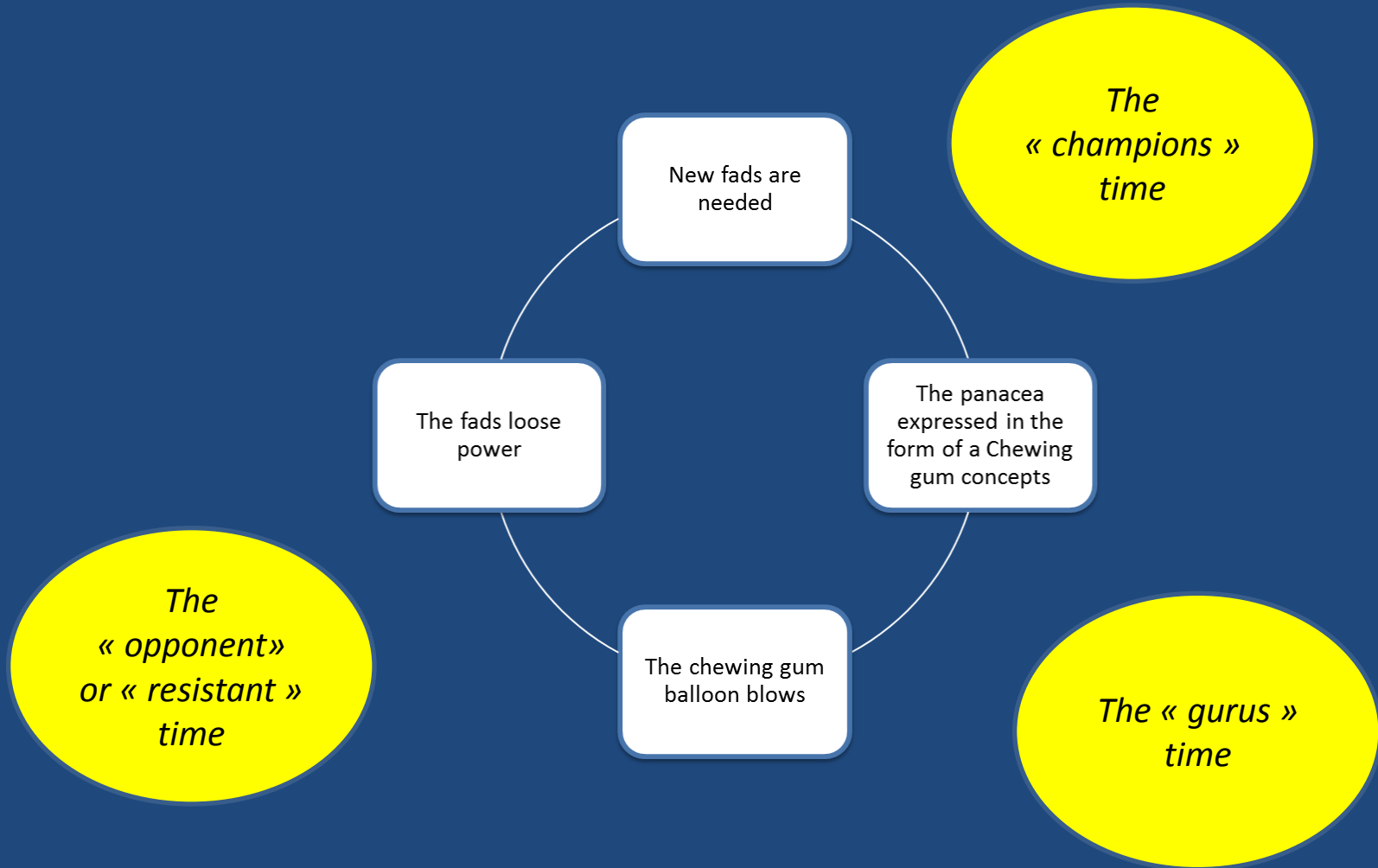






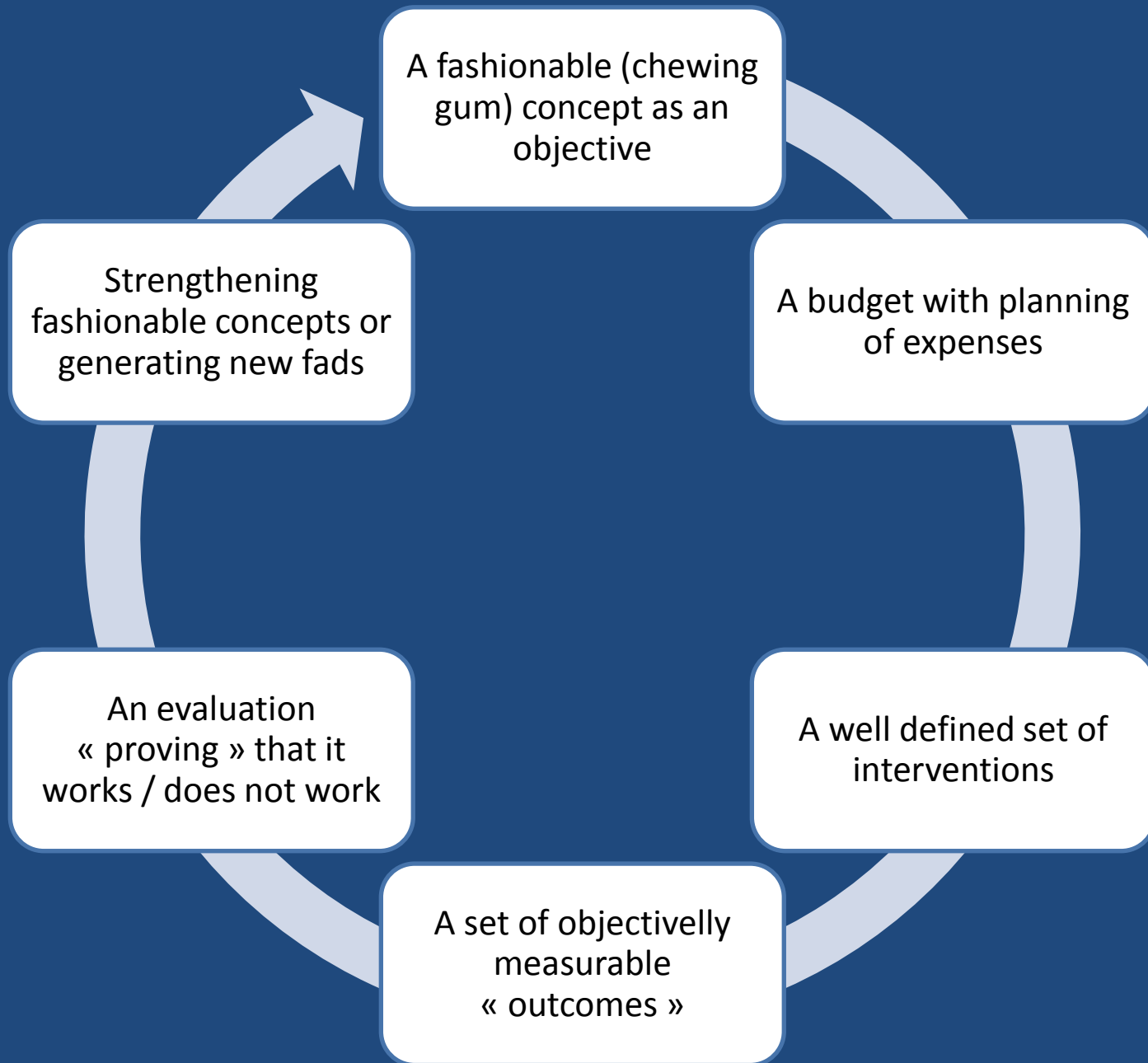
“Fads”...Number of article citations on google scholar

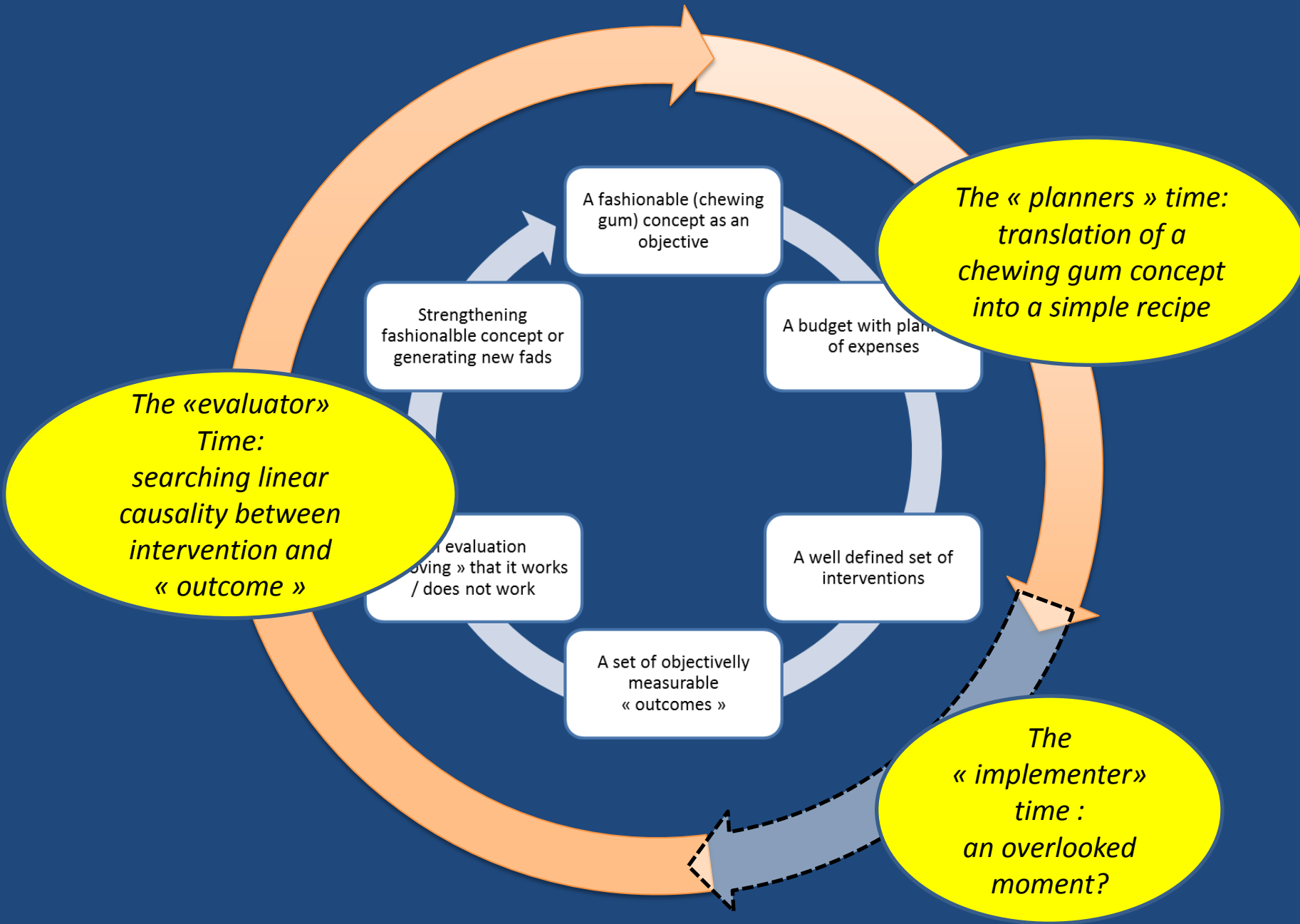




The world of action and service
provision:
*equilibrium through budget control,
quick and measurable results*

*Budget control, well defined
interventions, and objectively
measurable results*





*The « planners » time:
translation of a
chewing gum concept
into a simple recipe*

*The « evaluator »
Time:
searching linear
causality between
intervention and
« outcome »*

*The
« implementer »
time :
an overlooked
moment?*

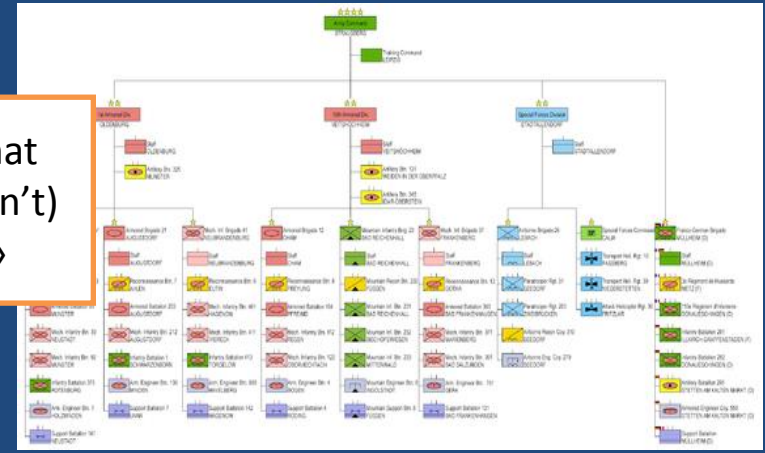
Two worlds in equilibrium but disconnected?

The world of ideas , policies and international declarations:
International arena, consultants, academics, declarations, ...

Chewing gum concepts

The world of action and service provision
norms, hierarchies, but also « politics » and « power struggle »

Prove that « it does(n't) work »



So, Business as Usual: the « nirvana »

Enthusiasm for particular ideas or practices that become a panacea...

....Translated through simple and well defined interventions...

....To reach objectively measurable results

So, Business as Usual: the « nirvana »

Enthusiasm for particular ideas or practices that becomes a panacea...

....Translated through simple and well defined



A fad

....To reach objectively measurable results

So, Business as Usual: the « nirvana »

Enthusiasm for particular ideas or practices that become a panacea...

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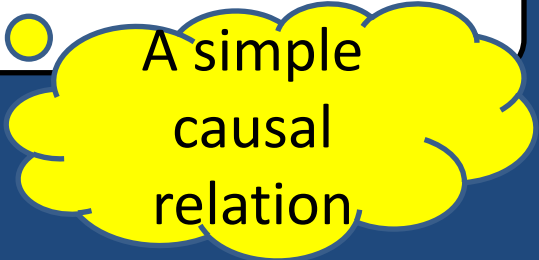
A simple
recipe

So, Business as Usual: the « nirvana »

Enthusiasm for particular ideas or practices that become a panacea...

...Translated through simple and well defined interventions...

...To reach objectively measurable results



A simple
causal
relation

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*Challenging the driving forces
that keep business as usually:
2 stories ...*

Business as Usual: referral system in Niger

Enthusiasm for particular ideas or practices that become a panacea...

- The referral system between HC and hospital is a key element of health care system

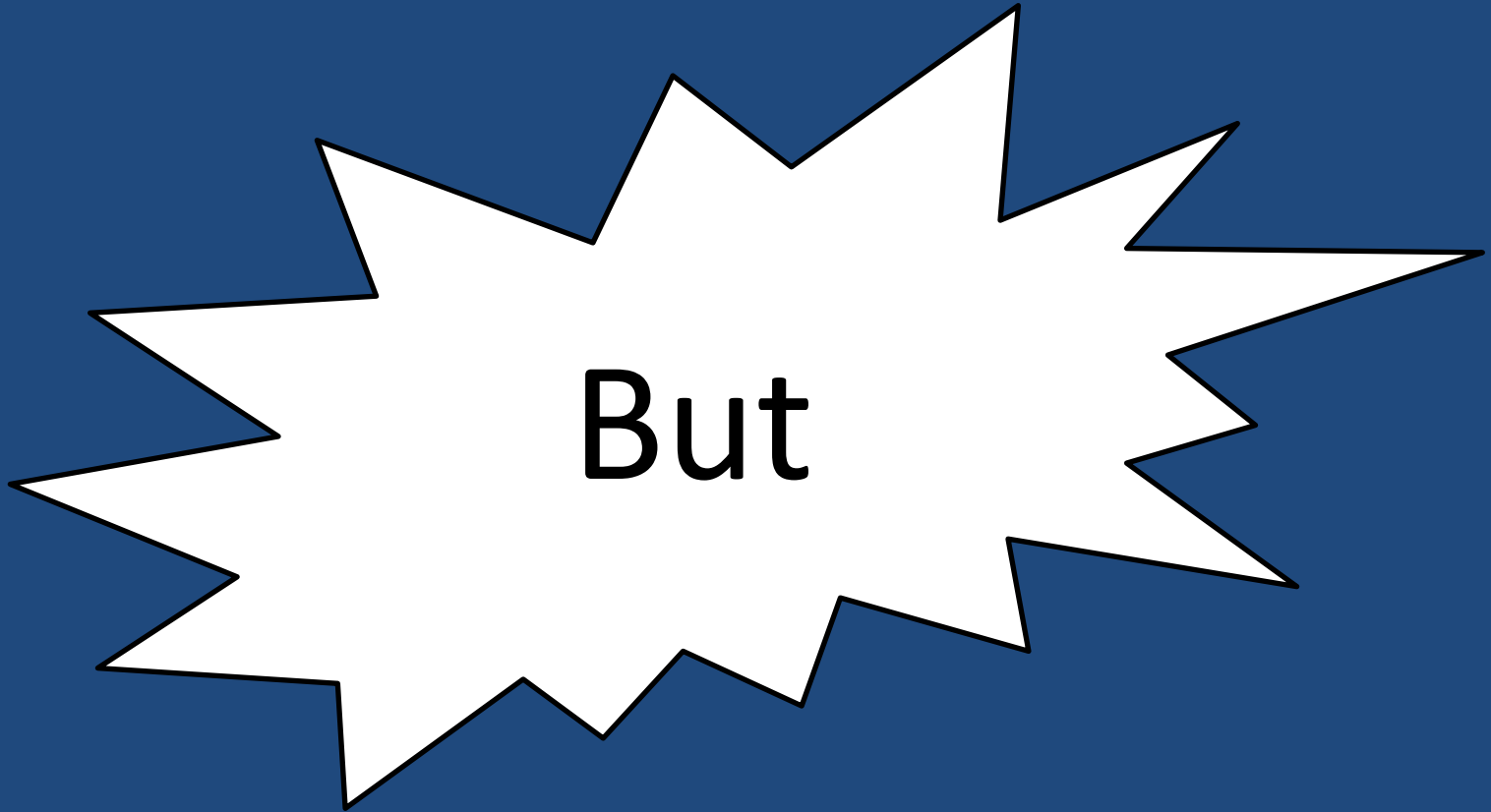
...Translated through a simple and well defined intervention...

- Radio communication system, ambulance vehicle, financing system
« fuel »-participation

...To reach objectively measurable results

- Number of evacuations

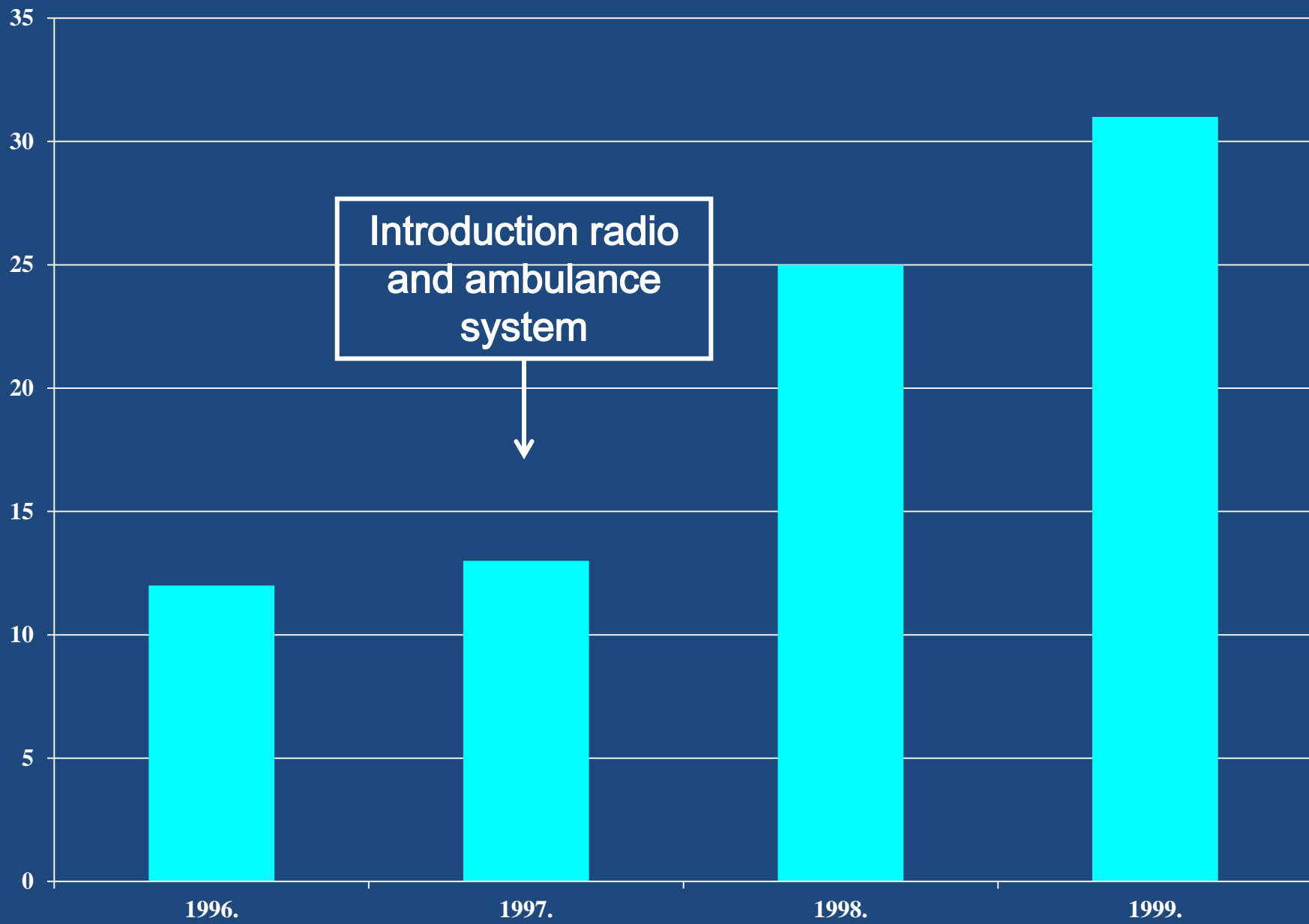
This should logically work!

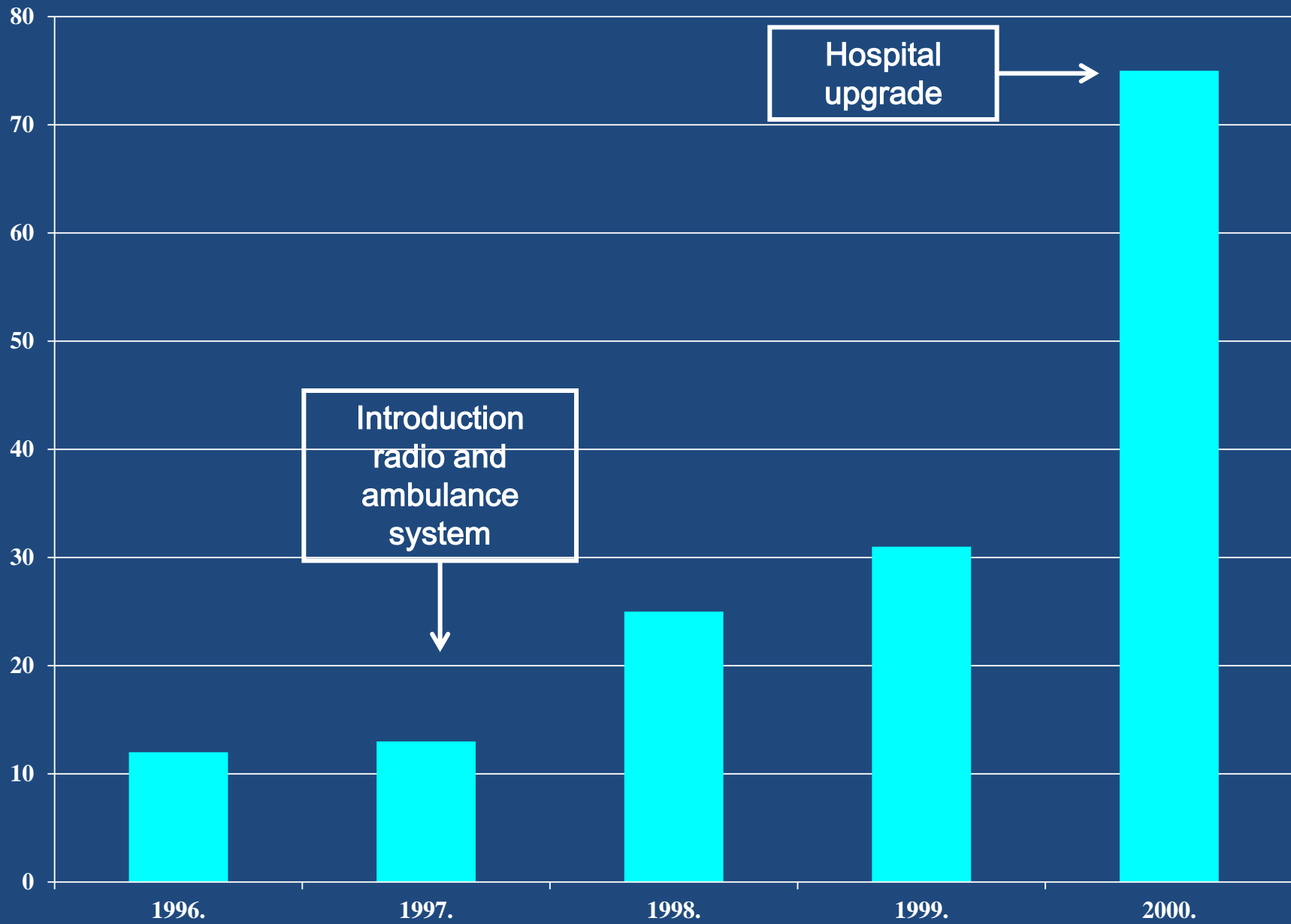


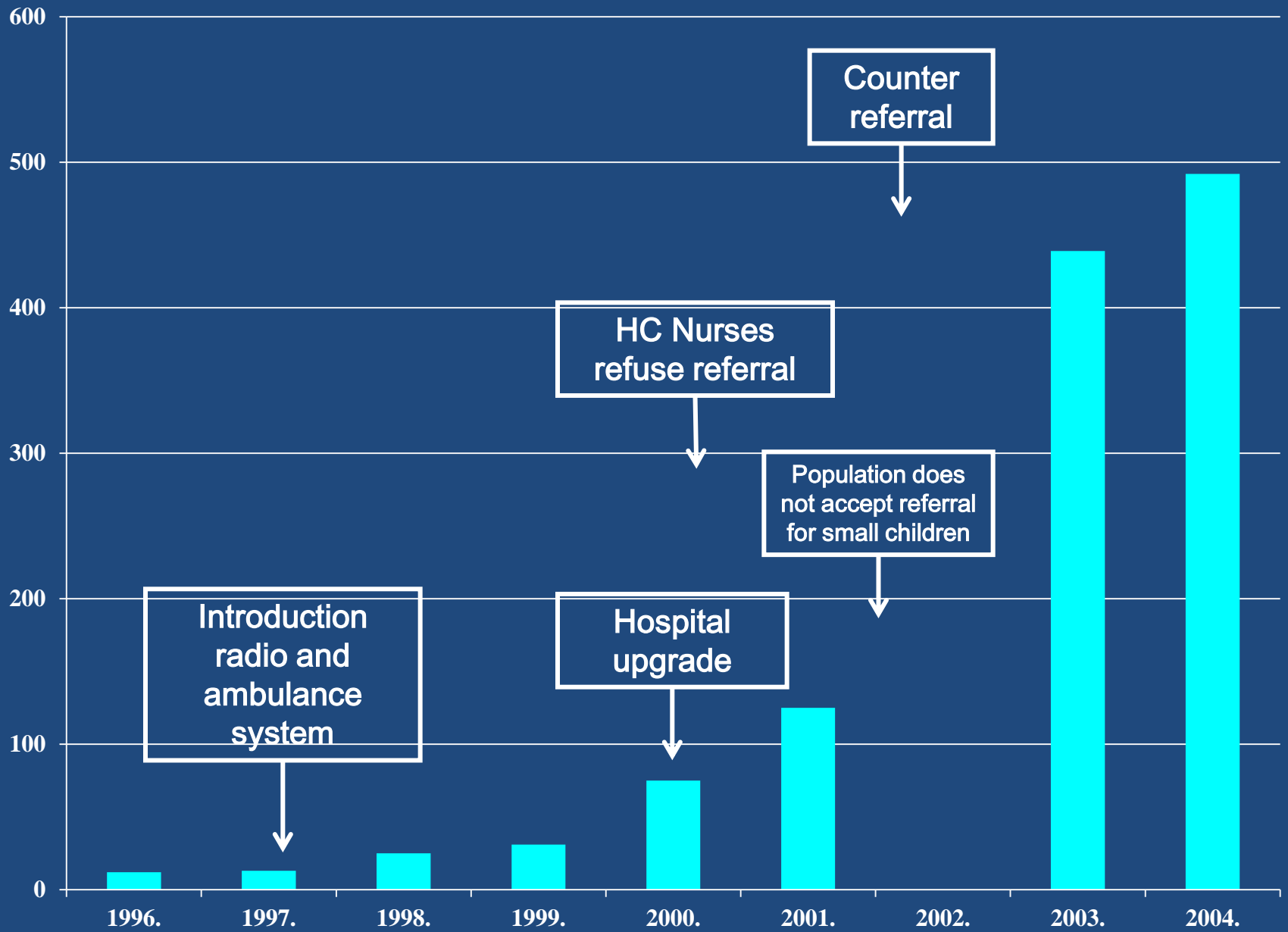
An emergency evacuation system: trivial and self-evident

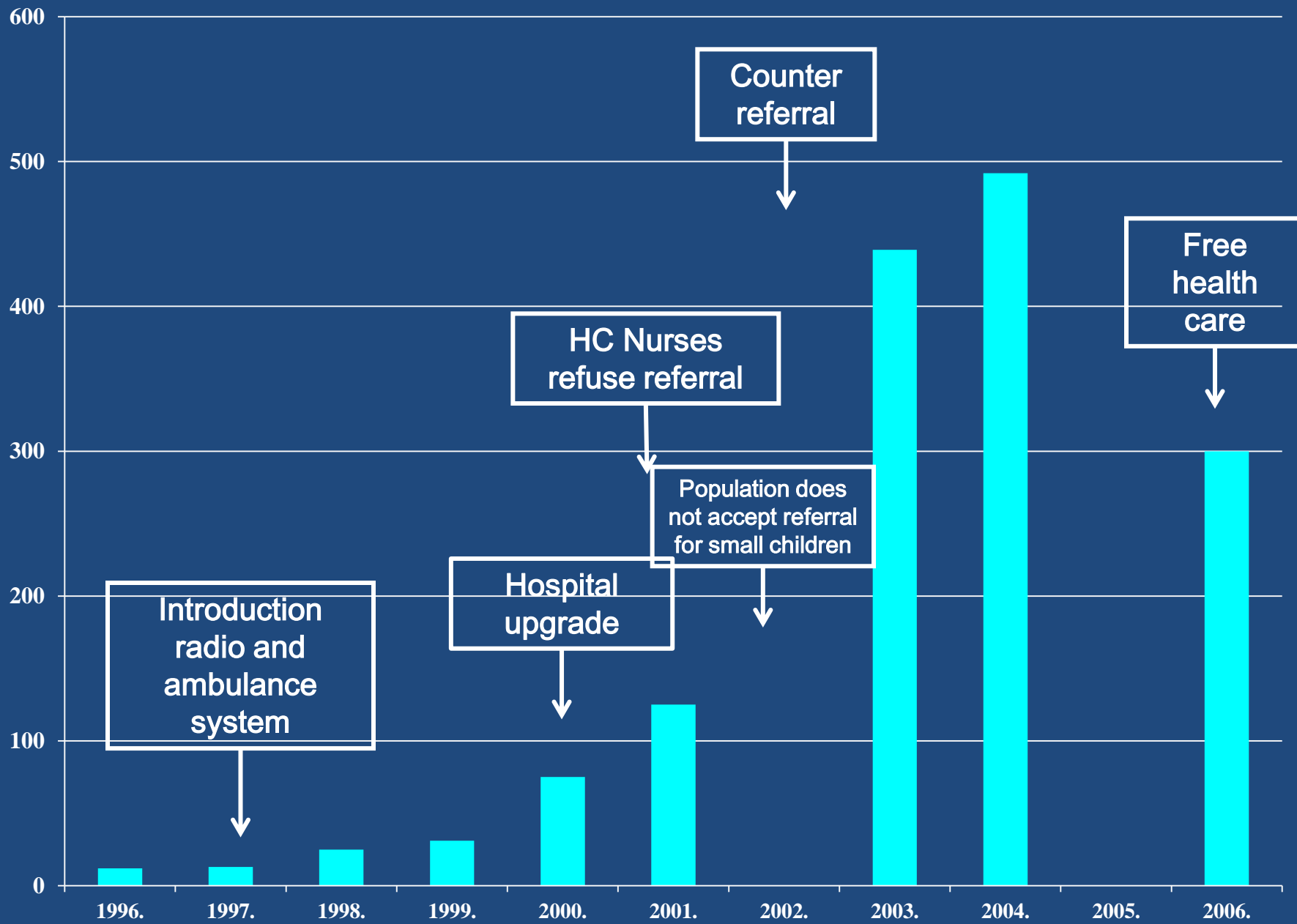
The initiative:

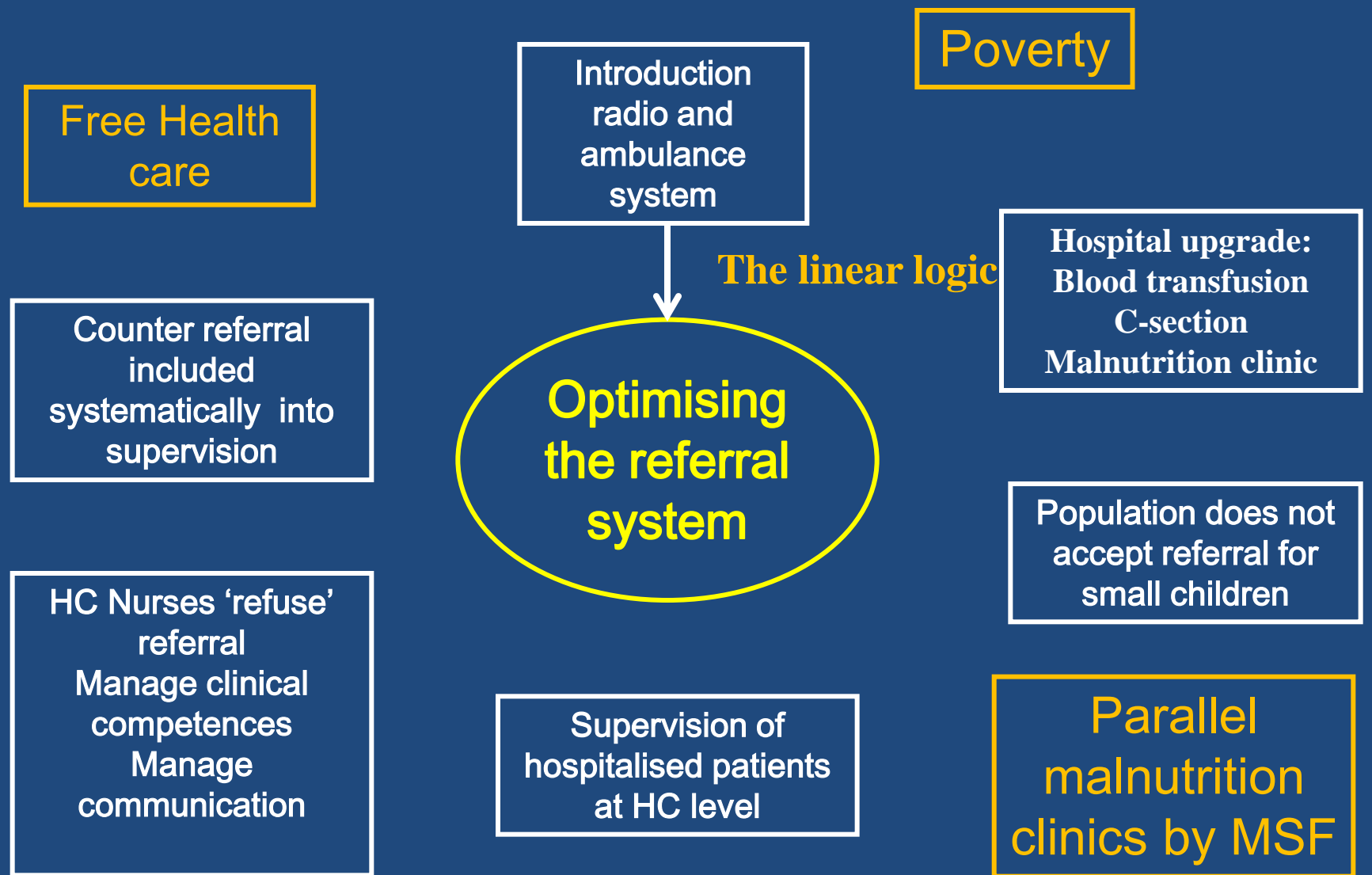
- First supervisory round: 2 maternal deaths in 2 days
- Empty hospital for 250.000 population
- Radio communication system, ambulance vehicle, financing system « fuel »-participation
- In a few years: from 12 to 75 evacuations; tremendous success !!??











Multi-causal, multi-actor, unexpected, all elements influence each other....

An emergency evacuation system: systems management

- Critical incidents make the system visible
- Ambulance + communication: necessary condition
- Management of the system: building evidence, understanding, decisions: « reflective action »
- Unpredictable: NOTHING was planned
- Different elements and complex interactions, multi-stakeholder
- Time: 8 years

Business as Usual: Changing a fee-paying system in Senegal

Enthusiasm for particular ideas or practices that become a panacea...

- Reaching universal coverage through de-commercialization of the hospital

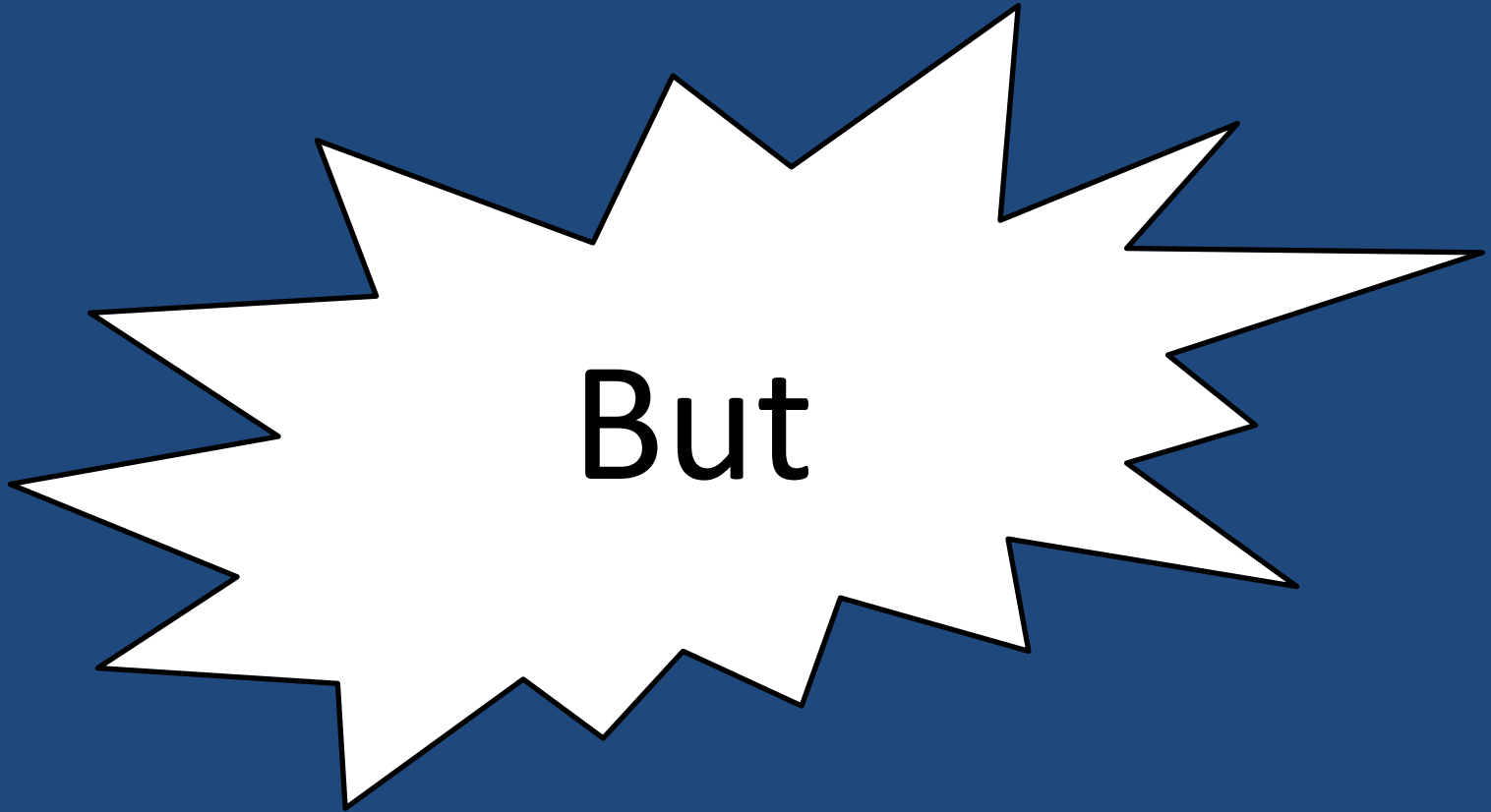
...Translated through a simple and well defined intervention...

- Change of the fee-paying system and introduction of third party payer

...To reach objectively measurable results

- Hospital production

This should logically work!



De-commercialisation of hospital care

Initial situation:

- Fee-paying per act causes inaccessibility and lack of transparency
- Experience from similar situation in DRC: flat fee payment schemes alter hospital performance

De-commercialisation of hospital care

After introduction:

- Drugs available, care accessible, hospital use increases
- But: a march on Dakar, local drug sellers with Imams
- Sudden danger for the complete system

De-commercialisation of hospital care

- Decisions are based on experience applied in similar situations
- Strategic entry points, short term consequences possible
- Sudden **perverse** effects: unpredictable
- Multi-stakeholder: opposite agendas: relativity of ownership
- Need for management, constant reflection, reflective action, building the system

Overall (theoretical) Lessons learned

- *Micro interaction explain macro behavior*
 - Health care systems are complex (adaptive) social systems
 - Understanding interaction between agents can sometimes explain the overall system behavior
- *« Observing » the Dynamic behavior of the system is the best way to understand it:*
 - Simple causality is NEVER the « rule »
 - Explanation of a phenomena (the behavior of the system) can only be understood backward

Overall (practical) Lessons learned

- Implementation process is central in evaluation
- Building the capacity of the system to manage uncertainty rather than controlling the intervention implementation, as it was planned

Build a well-functioning system : the project as an adaptive element in a system

