Memisa – ITM Antwerp: a model partnership between an NGO and an academic institution?

CASE STUDY: THE CASE OF A SOCIAL PROTECTION PROGRAM IN MAURITANIA

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### Context

#### ITM
- Academic institution with a mandate in 3 domains: research, training & service delivery
- Cross-fertilisation between the 3, especially in Dept Public Health
- Access to “the field” is essential
- Culture of research geared on decision-making and change

#### Memisa
- Medical NGO: “promote Health Care for the most underprivileged in the South”
- In search of quality & evidence in interventions
- MPH training as strategy to enhance capacity of local field staff

### EXISTING LINKS
- Founding Be-Cause Health, adherence to QUAMED charter, Memisa staff schooled in ITM, board of administrators...
Win – Win situation

ITM
- Expertise
- External eye
- Experience other contexts

Memisa
- Field experience/operational capacity
- Contact with population
- Logistics

Keep contact with reality:
- Feed teaching
- Identify & test hypoth.

TRUST
SHARED VALUES
EMPATHY

- “Sounding board”
- Evidence base for actions/decisions
- Enhance capacity & credibility of organization
Recognize and appreciate each others specificity
Strive for an optimum that is mutually acceptable
... implies that each partner “adds some water to the wine”
and accepts that there are also some difficulties / costs

**Academic Institution**
- Collaboration requires time
- Cost of collaboration is subsidised
- Slow pace of NGO work

**NGO**
- Financial investment
- Risk of instrumentalization
- Operational vs scientific objective
- Threat to partner in the field?
“RESEARCH”: different formats on continuum informal - formal

Informal
- Ad hoc exchanges, reflexivity...

Intermediate zone
- Evaluations, backstopping, consultancies...

Formal
- Formal research protocol
Collaborations between ITM and Memisa

Informal
- Ad hoc exchanges, reflexivity...

Intermediate zone
- Evaluations, backstopping, consultancies...

Formal
- Formal research protocol, publication output...

Existing
- Mauritania

Starting up
- India
- DRC
Collaborations worldwide: from disease control to health systems

India, West Bengal
Basic Health Care Support Program: Networking Project with local NGO’s, aiming at bringing healthcare closer to the people, and advising policy makers with experiences from the field.

Mauritania, Nouakchott and Bababé
*Strengthening the local health system and develop social protection arrangements:* Integrated Primary Health Care Program with CBHI and Equity fund attached to it.

DR Congo, Bandundu Province
*Integrated HAT control, a model district in DR Congo:* An operational research project aiming to develop a model for controlling sleeping sickness, fully integrated in the district health services.
Mauritania project

4 PHC centers in poor area of the capital:

• Integrated patient centered care, access to quality medicines
• Community Based Health Insurance
• Equity Fund with reintegration program

Added value:
Learning organisation
Training program
Model function
Influence policy
Mauritania project
Support to 11 health posts in rural area

- Assist Supervision
- Train nurses
- CBHI fund
- Innovative strategies (mobile nurses...)
The Mauritania project of Memisa: a history of 10 years of collaboration with ITM

Started with Memisa’s request for a consultancy to analyse a Community Based Health Insurance scheme... Led eventually to a range of other collaboration domains...

**Informal**
- Participation in feedback sessions on external evaluations;
- Reflection on strategic planning

**Intermediate zone**
- Initial consultancy on CBHI and follow up visits;
- Consultancy on equity fund;
- Consultancy on quality of care...

**Formal**
- Operational research on adherence to equity fund;
- Publication (monography)
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<tr>
<th>ITM</th>
<th>Memisa and local partner</th>
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<td>ó Improved insights in how to address social exclusion</td>
<td>ó Improved service delivery and organisational strategies in local project</td>
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<td>ó Publication of a monography (responding to institutional expectations); Mauritania case study in PhD on CBHI</td>
<td>ó Increased credibility towards local authorities in local project</td>
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<td>ó Lessons learned gradually integrated into teaching</td>
<td>ó Learning experience for local project staff</td>
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<td>ó Local networking on which can be built in the future</td>
<td>ó Learning experience for Memisa staff: institutional capacity building</td>
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Bart Criel, Abdoulaye Samba Bâ, Fatimatou Kane, Mathieu Noirhomme et Maria Pia Waelkens

Une expérience de protection sociale en santé pour les plus démunis : Le fonds d’indigence de Dar Naim en Mauritanie

Studies in Health Services Organisation & Policy, 26, 2010
Factors facilitating success

- Trust, good personal relationships, shared values, a common history,…
- Empathy and respect və́v the specific logic (and the constraints) of the partner
- Institutional back up for each partner in the collaboration
- Demand from the field / valuing of collaboration