

## **Leadership Management and Governance/Afghanistan Trip Report: Dr. Mahesh Shukla, Jessica Golden (October 17-November 13, 2013)**

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The Leadership, Management and Governance (LMG) Afghanistan program will further strengthen the capacity of the Afghan Ministry of Public Health (MoPH) to lead, govern and manage the scale of access to and quality of the Basic Package of Health Services (BPHS) and the Essential Package of Hospital Services (EPHS), particularly for those at highest health risk. The project will also continue to support capacity building of the Ministry of Education (MoE). The LMG Afghanistan program is an 18-month intervention starting in September 1, 2012 and extending to January 31, 2014. Total budget for the 18-month period is \$25,400,800. In collaboration with USAID-Kabul, LMG-Afghanistan has received an 8 month extension of the project, with associated additional funding of ~\$4 million for the additional months of activities.

Leadership, Management, Governance, Health Systems Strengthening, Ministry of Health,  
Afghanistan

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## **Trip Report**

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*October 17 – November 13, 2013*

### **Background:**

The Provincial Public Health Coordination Committee (PPHCC) and the District Health Coordination Committee (DHCC) governance guides were drafted through a consultative process in the month of December 2012. Pilot-testing of these guides began in 3 provinces and 11 districts on the first day of Sawr 1392 (21st April 2013) and ended on 30<sup>th</sup> of Mizan 1392 (20<sup>th</sup> October 2013). In April 2013, the PPHCC and DHCC teams from the provinces and districts participated in 2-day workshops, and spent first day doing group work on how to put four effective governing practices into operation in their area of work in the next six months, and second day carrying out self-assessment of their governing / decision-making practices in committee as a whole, subcommittees and at individual member level. Specific actions were identified by 3 PPHCCs and 11 DHCCs to be taken during the field-testing period of six months based on the contents of the PPHCC and DHCC governance guides. These actions were monitored on monthly basis by Provincial Liaison Directorate (PLD) of the Ministry of Public Health with the help of Afghanistan LMG Project's Provincial Health System Strengthening Program. Afghanistan LMG Project supported the pilot provinces and districts through its Provincial Health System Strengthening Consultants (PHSSCs) stationed in the USAID-supported provinces. The field test was completed on 20<sup>th</sup> October 2013. This gave us an opportunity to take stock of accomplishments in the field testing period. Post-test measurement workshops were planned in which PPHCC and DHCC members would assess their performance as a committee, and as individual members using the instruments given in the guide for this purpose. The guides will need to be adjusted based on the consultations with PPHCCs in 3 provinces and DHCCs in 11 districts and their experience during the pilot testing period. PPHCCs and DHCCs would have an opportunity to discuss the overall testing experience and applicability of the guides to their situation, and make specific recommendations. The PPHCC and DHCC governance guides will then be submitted to the Provincial Liaison Director and the decision making authorities within the MOPH for their approval to the guides and approval to national adoption of the guides.

The MOPH CBHC Director and National CBHC Coordinator Dr. Said Habib Arwal, his team of CBHC officials and consultants working with LMG, Afghanistan working with technical assistance have drafted health shūrā guidelines for community health shuras and facility health shuras. These guidelines were submitted to a panel of 15 health post shura and health facility shura members from 8 provinces (Kabul, Kapisa, Kunar, Logar, Nangarhar, Paktia, Panjshir and Parwan) in a full day workshop on 20 April 2013. Health shura draft guidelines for health post shuras and health facility shuras were further revised in the light of recommendations made by health post shura and health facility shura members. Upon revision, these guidelines were shared with a panel of Afghan and international reviewers. This panel has reviewed the health shura guidelines, and their recommendations were appropriately incorporated in the guidelines.

The guidelines once finalized by the MOPH CBHC Department will be translated in Dari and Pashto. The health shura guidelines have become ripe for field-testing in about 20-25 health post and health facility shuras. National CBHC Coordinator has desired that field-testing should begin soon after the guidelines become available in Dari and Pashto. There is a need to conduct training of the trainers on who in turn will orient the pilot testing health shuras on the health shura guidelines and manual.

The MOPH General Director for Human Resources Dr. Ihsanullah Shahir, MD had requested assistance of the LMG Afghanistan Project in development and delivery of orientation package for new MOPH staff, and L+M+G assessment of current MOPH staff. With USAID mission's concurrence, the LMG Afghanistan Project had positively responded to the MOPH request. Leadership and management orientation materials were pulled from the existing MSH publications and governance orientation materials were drafted anew. There was a need to integrate these materials for effective delivery of orientation package. Pilot testing of the Survey of L+M+G competencies among the existing MOPH staff is now complete and there is a need to plan the full administration of the survey.

**Destination:** Kabul, Afghanistan

**Purpose of Trip:** To support the LMG technical team in Afghanistan, the MOPH and its three provincial directorates and 11 districts at the conclusion of field-testing of the PPHCC and the DHCC governance guides, to help begin pilot-testing of CBHC health shura guidelines, and to advance the work on new employee orientation materials on governance and the L+M+G survey.

**Objectives, Activities, and Deliverables:**

Working with *the LMG Provincial Health System Strengthening team in Afghanistan, the MOPH and its three provincial directorates*

1. Working with the LMG Provincial Health System Strengthening team in Afghanistan, the MOPH and its three provincial directorates and 11 districts, take stock of the accomplishments in the field testing period, facilitate results measurement workshops, and adjust the governance guides in a consultative way based on the consultations with PPHCCs in 3 provinces and DHCCs in 11 districts and their experience during the pilot testing period.
2. Working with the MOPH CBHC Director and National CBHC Coordinator Dr. Said Habib Arwal, his team of CBHC officials and consultants, and LMG, Afghanistan experts, help begin field-testing of health shūrā guidelines for community health shuras and facility health shuras in 20 health shuras.
3. Working with the MOPH General Director for Human Resources Dr. Ihsanullah Shahir, MD and his organization development directorate and MLDD team, and the LMG Afghanistan Project, organize a MOPH workshop to discuss the report of L+M+G skills and competencies assessment survey and make recommendations on the next steps in respect of in-service training strategy on L+M+G skills and competencies.
4. Carry out integration of governance content in the new employee orientation package in a consultative way and make it ready for delivery to about new staff who join in the ministry at Kabul every month.
5. Submit a trip report, not to exceed 5 pages, before departure from Kabul.

**Major Trip Accomplishments:**

<i>Working with the LMG Provincial</i>	Three PPHCCs and eleven DHCCs evaluated their performance
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<p><i>Health System Strengthening team in Afghanistan, the MOPH and its three provincial directorates and 11 districts, take stock of the accomplishments in the field testing period, facilitate results measurement workshops, and adjust the governance guides in a consultative way based on the consultations with PPHCCs in 3 provinces and DHCCs in 11 districts and their experience during the pilot testing period</i></p>	<p>during the pilot-testing period in four 2-day workshops. PPHCC and DHCC re-assessed their governance performance as a committee and as individual members using the same instruments they had used at baseline before the pilot test began. Eleven focus group discussions were held with the three provincial and eleven district health coordination committee members to explore their successes and challenges during the pilot testing period, to discuss the applicability of the people-centred health systems governance guides to their situation, and to make specific recommendations to the MOPH. The results of the pilot were presented to the PLD Director Dr. Hakim Aziz and his full team on the last day of TDY. He is supportive of national adoption of the PPHCC and DHCC governance guides.</p>
<p><i>Working with the MOPH CBHC Director and National CBHC Coordinator Dr. Said Habib Arwal, his team of CBHC officials and consultants, and LMG, Afghanistan experts, help begin field-testing of health shūrā guidelines for community health shuras and facility health shuras in 20 health shuras.</i></p>	<p>A full-day consultation meeting was held with the MOPH CBHC Director and National CBHC Coordinator Dr. Said Habib Arwal and his full CBHC team of officials and consultants on piloting strategy for the health shūrā guidelines and manual. The CBHC team decided to pilot test the health shura guidelines and manual in 24 health shuras in eight provinces. The team will select two health facility shuras and one health post shura in a province. The piloting is expected to start in January 2014 when the guidelines are translated in Dari and Pashto. Meanwhile, I designed and delivered a 2-day Training of Trainers' Workshop for the full CBHC team who working in four sub-teams will orient the health shuras on the guidelines in 3-day workshops to be organized in the provinces. These teams will also be supporting the pilot health shuras throughout 6-9 months of the duration of pilot. The pilot study is expected to test the applicability and benefit of the guidelines to the health shuras and also suggest modifications to the content of the guidelines.</p>
<p><i>Working with the MOPH General Director for Human Resources Dr. Ihsanullah Shahir, MD and his organization development directorate and MLDD team, and the LMG Afghanistan Project, organize a MOPH workshop to discuss the report of L+M+G skills and competencies assessment survey and make recommendations on the next steps in respect of in-service training strategy on L+M+G skills and competencies.</i></p>	<p>Pilot testing of the Survey of L+M+G competencies among the existing MOPH staff is now complete and the full administration of the survey is in planning stage. I held a meeting with Dr. Jebran, Director, Organization Development Directorate (ODD) and the MLDD team to advance the work on the survey. The ODD decided to proceed with paper and pencil version of the survey as internet connectivity was found to be patchy in the pilot stage resulting in 15% response rate. We finalized a sampling strategy for sampling of Grade 5 to Grade 1 and above grade MOPH officials for the purpose of the administration of the survey on periodic basis. The GDHR included this topic in his presentation to the national health coordination conference to make the ministry leadership in the MOPH and the provinces aware of the L+M+G survey. The MLDD will invite HR focal points from the provinces and orient them in a 1-day workshop on the survey methodology who then will administer the survey.</p>
<p><i>Carry out integration of governance content in the new employee orientation package in a consultative</i></p>	<p>I designed and delivered a 2-day health governance orientation workshop to ten MOPH and MLDD officials, and Hospital Directors, Consultants and Training Managers to orient them on</p>

<p><i>way and make it ready for delivery to about new staff who join in the ministry at Kabul every month.</i></p>	<p>the four effective governing practices: <i>cultivating accountability, engaging with stakeholders, setting a shared strategic direction, and stewarding resources in a responsible way.</i> I also shared with them draft guides on these four practices. Dr. Gardiwal of the MLDD will use these materials to enhance the governance content of the Dari version of the MOPH Staff L+M+G Orientation Package.</p>
<p><i>Submit a trip report, not to exceed 5 pages, before departure from Kabul.</i></p>	<p>Trip report is prepared and submitted to the LMG, Afghanistan leadership for onward submission to the USAID mission at Kabul.</p>

**Next Steps:**

1. Three PPHCCs and eleven DHCCs, based on their experience during the six-month pilot testing period, have evaluated the applicability of the governance guides to their situation, and have recommended national scaling up of the guides. They have also made specific recommendations to the MOPH in these workshops to enhance the English, Dari and Pashto versions of the guide. The governance guides will be modified based on these recommendations. After the suggestions made by the pilot PPHCCs and DHCCs are appropriately incorporated, and *fluent* Dari and Pashto translations correctly translating public health terminology become available, the Provincial Liaison Director has agreed to submit the PPHCC and DHCC governance guides to the appropriate decision making bodies within the MOPH for their approval to the guides, and their national adoption. The pilot PPHCCs and DHCCs aspire to continue implementing the people-centred health systems governance approach and they should be supported to do so.
2. Health shura guidelines and manual for health post shuras and health facility shuras will be pilot tested in 24 health shuras in eight provinces. MOPH CBHC Director and National CBHC Coordinator Dr. Said Habib Arwal and his full CBHC team will be supported by Dr. Hedayatullah Mushfiq of Afghanistan LMG Project and Dr. Mahesh Shukla of the LMG Project in the pilot testing. Dr. Mushfiq has initiated a procurement procedure for translation of the draft guidelines in Dari and Pashto. The CBHC team has been trained to deliver orientation workshop on these guidelines. Dr. Shukla will draft a facilitator’s guide for the use of the CBHC trainers. They will deliver the orientation workshops to the health shura members at provincial centers of the pilot provinces, and support the shura members during the six to nine months of pilot testing.
3. The Organizational Development Directorate of the MOPH GDHR will invite HR focal points of the ministry for 1-day workshop on the administration of paper and pencil version of the L+M+G competencies assessment survey. The MLDD team will conduct this workshop. The initial and subsequent periodic administrations of the L+M+G survey will be supported by Dr. Naqibullah Hamdard of Afghanistan LMG Project and Dr. Mahesh Shukla of the LMG Project.
4. Dr. Gardiwal of the MLDD will use the draft governance guides on the four governance practices to enhance the governance content of the Dari version of the MOPH Staff L+M+G Orientation Package. Dr. Mahesh Shukla will support the MLDD team in effective integration of the governance content in the package and its delivery to the MOPH staff.

**List of Tables:**

1. Governance self-assessments of 3 PPHCCs and their members at baseline and at the end of six months

2. Governance self-assessments of 11 DHCCs and their members at baseline and at the end of six months
3. Progress of specific actions to implement governance guides by three PPHCCs and eleven DHCCs at the end of six months of pilot testing

**Documents attached:**

1. Day-to-day activity plan
2. Manuscript on provincial and district health governance for peer-reviewed journal submission
3. Health shura guidelines piloting checklist

**Key Contacts made:**

<b>MOPH:</b> Dr. Said Habib Arwal, MD, MA National CBHC Coordinator and Director, MOPH and his full CBHC team
Dr. Jebran, MD Director, Organizational Development Directorate of the GDHR Ministry of Public Health
Dr. Hakim Aziz, MD Director, Provincial Liaison Directorate Ministry of Public Health and his full PLD team
PPHDs of Wardak, Khost and Herat PPHCC members of Wardak, Khost and Herat
DHOs and DHCC members of Narkh, Jalriz, and Sayedabad districts in Wardak Province, Ismailkhail-Mandozai and Alisher districts in Khost Province, Istalaf and Qarabagh in Kabul Province, Eshkamish in Takhar Province, Garam Sir in Hilmand Province, Spin Bol dack in Kandahar Province, and Qaisar district in Faryab Province
<b>MSH:</b> Dr. Mubarakshah Mubarak, MD Chief of Party, Leadership, Management & Governance Project (LMG-AF)
Hedayatullah Saleh, MD, MPH Deputy Chief of Party & Technical Director Leadership, Management & Governance Project (LMG-AF)
Dr. Zelaikha Anwari, MD, MPH Program Manager for Health System Strengthening
Dr. Hedayatullah Mushfiq Program Manager for Community-Based Health Care (CBHC)
Dr. Ataullah Sayedzai HMIS and M&E Program Manager
Abdul Shakur Hatifie, MD Program Manager for in-service training, LMG
Dr. Mohammad Ismail Mayar Technical advisor, CHNE, LMG
Dr. Naqibullah Hamdard, Dr. Abdul Ali, Dr. Dad Mohammad Shinwary, Dr. Humayun Gardiwal, MLDD

October 19 – November 13, 2013

Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
19	20	21	22	23	24	25
Arrive at Kabul.	<ul style="list-style-type: none"> <li>■Security briefing;</li> <li>■Meetings with LMG leadership at Kabul (Drs. Mubarak, Saleh, Anwari); and</li> <li>■Half-day workshop with the PLD staff in the ministry of health. Discussion on results of testing of the governance guides</li> </ul>	2-day workshop with the <b>Wardak</b> PPHCC and select members of the three DHCCs: PPHCC and DHCCs take stock of their accomplishments during the field testing period, carry out end-of-pilot-testing governance measurements, review their experience during the pilot testing period and suggest modifications to be made in the governance guides Location: MSH Compound, Kabul		Workshop on 4 Governing practices for MOPH, MLDD, and Hospital Directors, Consultants and Training Managers	<ul style="list-style-type: none"> <li>■Meeting with CBHC team on testing of health shūrā guidelines and health shūrā manual</li> <li>■Processing and analysis of Wardak province health governance workshop data</li> <li>■Meeting with Dr. Hatifie, PM, IST</li> </ul>	
26	27	28	29	30	31	01
	2-day workshop with Dr. Hakim Noori and select DHOs and DHCC members: DHOs and DHCCs take stock of their accomplishments during the field testing period, carry out end-of-pilot-testing governance measurements, review their experience during the pilot testing period and suggest modifications to be made in the DHCC governance guide Location: MSH Compound, Kabul	Workshop with Dr. Mushfiq, Dr. Arwal and full CBHC team on testing of health shūrā guidelines and health shūrā manual	2-day workshop with the <b>Khost</b> PPHCC and select members of the two DHCCs: PPHCC and DHCCs take stock of their accomplishments during the field testing period, carry out end-of-pilot-testing governance measurements, review their experience during the pilot testing period and suggest modifications to be made in the governance guides Location: MSH Compound, Kabul		Processing and analysis of Khost and district health governance workshop data	
02	03	04	05	06	07	08
	Meeting with Organization Development Directorate and	2-day workshop with the <b>Herat</b> PPHCC and select DHOs: PPHCC takes stock of their accomplishments during the field testing period, carries		Travel to Kabul Workshop on 4 Governing practices	Processing and analysis of Herat province health governance	

	<p>MLDD team to discuss the progress made in <b>L+M+G skills and competencies assessment survey</b>, interim results and next steps and integration of governance in new employee orientation and in-service training</p> <p>Travel to Herat. Meeting with facilitators.</p>	<p>out end-of-pilot-testing governance measurements, reviews their experience during the pilot testing period and suggests modifications to be made in the PPHCC governance guide Location: PPHD Office, Herat</p>		<p>for MOPH, MLDD, and Hospital Directors, Consultants and Training Managers</p>	<p>workshop data</p>	
09	10	11	12	13		
<p>Training of Trainers Workshop for Health shura orientation on the health shūrā guidelines and health shūrā manual with Dr. Mushfiq, Dr. Arwal and his full CBHC team</p>		<p>Debriefing with LMG leadership</p>	<p>Debriefing workshop with the Provincial Liaison Directorate of the MOPH</p>	<p>Travel to DC</p>		

### PPHCC and DHCC Governance Self-assessments

Three PPHCCs (Wardak, Khost and Herat) and 11 DHCC did self-assessment of their governance practices at baseline and at the end of six months. The overall results are as follows.

Table 1: PPHCC governance self-assessments

#	Governance Self-assessment Scale	Maximum score	Wardak PPHCC			Khost PPHCC			Herat PPHCC			Overall Percent Point Change
			Pre	Post	Percent Point Change	Pre	Post	Percent Point Change	Pre	Post	Percent Point Change	
1	Overall performance of the PPHCC	450	256.5	308	11.44	255	351	21.33	300	331	6.89	13.2
2	Governance standards-based scale for the PPHCC	184	91.5	132	22.01	96.5	143	25.27	109	124	8.15	18.5
3	Chair	80	43	72	36.25	49	76	33.75	70	73	3.75	24.6
4	Individual member practice-based 30-item scale*	280	229	233	1.43	215	265.5	18.04	244	248	1.43	7.0
5	Individual member competency-based scale*	72	53	55	2.78	46	61	20.83	57	61	5.56	9.7

Table 2: DHCC governance self-assessments

#	Governance Self-assessment Scale	Maximum score	Wardak Province			Khost Province			Other Provinces			Overall Percent Point Change (Weighted average)
			Average of three districts			Average of two districts			Average of six districts			
			Pre	Post	Percent Point Change	Pre	Post	Percent Point Change	Pre	Post	Percent Point Change	
1	Overall performance of the DHCC	400	194	281	21.75	192	281	22.25	210	288	19.50	20.6
2	Chair	80	0	64	80	41	56	18.75	56	63	8.75	30.0
3	Individual member practice-based 30-item scale*	280	144	262	42.14	213	262	17.50	226	259	11.79	21.1
4	Individual member competency-based scale*	72	17	60	59.72	43	45.8	3.89	47	53	8.33	21.5

\*Average of individual scores of all members of a committee

Table 3: Progress on implementation of people-centred health systems governance action plans by three PPHCCs and eleven DHCCs at the end of six months of pilot testing

Governing practice	No. of actions	Percent completion					Sustain-ability* (no. of actions)	Sustain-ability (%)
		0%	1-25%	26-50%	51-75%	76-100%		
		Not started	Early stage	Intermediate stage		Near-complete or complete		
Wardak, Khost and Herat PPHCCs								
Engaging stakeholders	158	16	9	19	23	91	151	96%
Cultivating accountability	65	0	1	8	11	45	63	97%
Setting a shared direction	56	1	1	2	14	38	53	95%
Stewarding resources	93	7	10	8	25	43	91	98%
<i>Total number of specific actions</i>	372	24	21	37	73	217	358	96%
<i>Percentage of actions at various stages</i>		6.5%	5.6%	9.9%	19.6%	58.3%		
Eleven DHCCs								
Engaging stakeholders	588	98	58	71	97	264	488	83%
Cultivating accountability	274	7	30	44	63	130	246	90%
Setting a shared direction	127	7	5	25	38	52	97	76%
Stewarding resources	218	35	18	34	36	95	201	92%
<i>Total number of specific actions</i>	1207	147	111	174	234	541	1032	86%
<i>Percentage of actions at various stages</i>		12.2%	9.2%	14.4%	19.4%	44.8%		

\*Sustainability of an action indicates that the respective committee decided at the time of end-of-pilot measurement to continue it in future even after the end of pilot testing phase.