

**Program/Project Purpose:** The University of Rwanda, College of Medicine and Health Sciences (UR/CMHS) was established in September 2013, a result of merging seven higher learning institutions in the country with the goal of improving quality of teaching and research to promote excellence and efficiency in Rwanda. At the School of Public Health (UR/CMHS/SPH), one of the six schools under the UR/CMHS, challenges in meeting this goal include limited skilled academic staff (6 PhD-level and 6 Masters-level faculty in addition to 5 research assistants), a large number of degree programs (5 Masters, 1 MPhil and 1 PhD program), limited publications per capita and disproportionate student-supervisor ratio (15 students: 1 PhD faculty). The UR/CMHS/SPH has adopted innovative approaches to ensure academic success, despite these challenges.

**Structure/Method/Design:** Various strategies have been utilized by UR/CMHS/SPH to improve both education and research quality including: (1) partnerships with universities in developed countries to create joint supervision for advanced degrees offered to selected junior academic staff, (2) a repositioning of pay for performance system, an income linked to research and teaching outputs, (3) improved mandatory seminars that are linked to outputs (such as proposals or manuscripts) to develop faculty competences, and (4) linking grant funding with students' topics to create and stimulate research around global health.

**Outcomes & Evaluation:** Since 2010, 80% of junior faculty has enrolled in various academic programs in Rwanda and beyond. In 2013-2014, UR/CMHS/SPH graduated 63 Masters and 1 MPhil student. The number of manuscripts in peer-reviewed journals has increased from 20 in 2012 to almost 50 in each of 2013 and 2014. Of 14 grants submitted in the last quarter, 7 were awarded and the rest are under peer-review.

**Going Forward:** Improving academic and research quality is paramount for universities in resource limited countries. Overcoming the imbalance between demand and available resources is key for successful academic quality improvement. The UR/CMHS/SPH will continue to rely on in-country strategies and partnerships to grow faculty and activities to improve quantity and quality of outputs. Universities from developed countries can support these programs by better aligning their priorities to in-country needs. Government leadership, operational innovations and partnerships are key for effective and sustainable capacity building to achieve excellence in higher learning institutions in countries like Rwanda.

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### Working to strengthen orphans and vulnerable children (OVC) service provision by building capacity of local Zimbabwean partners

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**Program/Project Purpose:** The Vana Bantwana (VB) Capacity Building Initiative (CBI) is part of the USAID supported 5-year, World Education/Bantwana project that seeks to mitigate the impact of HIV/AIDS on Zimbabwe's orphans and vulnerable children (OVC). Working through local partners, VB's approach is rooted in the premise that CBO and NGO service providers must be equipped with the skills, tools, and systems that allow them to sustainably provide meaningful, high-quality services necessary for communities, caregivers, and OVC to thrive.

**Structure/Method/Design:** Since January 2013, with technical assistance from John Snow Inc. (JSI), the VB CBI has worked closely

with three levels of Zimbabwean civil society organizations along a capacity building continuum: 1) National level NGOs that have demonstrated technical expertise, influence at the national level, and proven capacity to manage sub-grants; 2) Regional sub-partners with a more localized and targeted reach and a strong record in providing core OVC services; and 3) Local CBOs smaller in size and offer one or two specific services. By the end of the five-year project, the national level NGOs and at least five of the sub-partners will have stronger finance and management systems, be able to offer an expanded basket of comprehensive services and be able to directly access and manage international donor funding. Recognizing that capacity building requires a modification of systems and structures, VB works directly with the sub-partners' leadership team who are key to ensuring the necessary changes for building more robust systems and stronger programming. The CBI team facilitates self-assessments for each partner to identify gaps and develop time-bound actions to address specific challenges using JSI's evidence-based assessment tools. The CBI team supports the partner with targeted technical assistance to complete the specific steps of their action plans.

**Outcomes & Evaluation:** Building on a year of intensive capacity building support, the three National level NGOs underwent a simulated audit, using the USAID Non-US Organization Pre-Award Survey tool that confirmed their readiness to receive direct funding. In July 2014, USAID conducted a formal assessment with the three NGOs, which demonstrated that they met performance milestones and were ready to transition to receive direct USAID funding support.

**Going Forward:** By the end of the second year, results show that the CBI interventions using the VB/JSI model, which actively engages leadership and staff in managing their own progress, is very effective. Participating NGOs demonstrated improved financial, HR, administrative and M&E systems, improved program management, quality standards and more functional boards. The VB Capacity Building process has now been rolled out to five regional sub-partners and has been adjusted for building the capacity of local CBOs.

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### A cooperative agreement for workforce development in vietnam: HIV-addiction technology transfer center (VH-ATTC)

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**Program/Project Purpose:** Vietnam is experiencing an HIV epidemic due, in large part, to the persistent problem of injection heroin use. There is an urgent need for workforce development in the areas of HIV and substance use disorders (SUD). Based at Hanoi Medical University (HMU), the Vietnam HIV-Addiction Technology Transfer Center (VH-ATTC) aims to provide a workforce that can deliver services to reduce the individual and societal impacts of HIV and SUD by (1) improving access to treatment and prevention services through systems linkage, and (2) increasing the capacity of the workforce to provide a wide range of evidence-based treatments. Phase I Project: 9/1/2011 – 8/31/2014 Phase II Project: 9/1/2014 – 8/31/2017

**Structure/Method/Design:** The overarching goals of this initiative are to disseminate evidence-based knowledge and skills; to adapt approaches to the Vietnamese culture; to monitor, support and encourage implementation of these practices; and to develop a Vietnam-based resource that will sustain these efforts in the future. HMU