Joint Learning Network for Universal Health Coverage

The Rockefeller Foundation’s Transforming Health Systems (THS) initiative seeks to improve health and health equity in low- and middle-income countries (LMICs) through activities that promote improved health systems performance and the expansion of universal health coverage (UHC). A key innovation under the initiative is the Joint Learning Network (JLN), which connects country practitioners from member countries across Africa, Asia, Europe, and Latin America to advance knowledge and learning about approaches to accelerate progress toward UHC.

The idea for the JLN emerged in 2009 from key discussions held by the Foundation and its partners with global and country leaders about factors facilitating and inhibiting progress on UHC reforms. These conversations brought to light a critical unexploited opportunity for advancing UHC – while several countries were engaged in health system reforms to achieve UHC, there were few platforms available to share experiences and exchange ideas and best practices.

The Rockefeller Foundation set out to address this gap in 2010 by launching the JLN, a global practitioner-to-practitioner learning network that facilitates joint problem-solving among LMICs tackling similar challenges on the pathway to UHC. The core learning vehicles under the JLN are technical initiatives, which facilitate knowledge-sharing and resource development around key levers for reaching UHC objectives, including: provider payment mechanisms, health information technology, primary health care, population coverage, quality improvement, and health financing innovations. To address country-specific learning needs, the JLN has also established a flexible funding pool, known as the “Joint Learning Fund” (JLF). The JLN is managed by a Network Coordinating Team of technical partners, which implement the strategic direction set by a global Steering Group of member countries, technical partners, and network funders. At the country level, country core groups (CCGs), comprised of staff at government agencies, organize and facilitate country participation in the JLN.

The information in this brief is drawn from a case study of the JLN conducted by Mathematica Policy Research in consultation with the THS team and the Evaluation Office of The Rockefeller Foundation. The study, completed in 2016, was undertaken to assess the extent to which the JLN had achieved its goal of becoming a country-driven, sustainable network helping to advance progress toward universal health coverage in low- and middle-income countries.
Since 2010, The Rockefeller Foundation has provided nearly $19 million in grant funding to JLN partner organizations, which has supported the design, launch, and coordination of the network, as well as the facilitation of cross-country and country-specific learning activities. As a founding funder, the Foundation has also worked to strengthen the JLN’s sustainability by building support for the network among other donors, including the Bill & Melinda Gates Foundation, the World Bank, and the German Society for International Cooperation (GIZ).

The approach and activities of the JLN have been independently assessed on two occasions. In 2012, the Pact Institute conducted a review, which found that the JLN was positively influencing knowledge, information sharing, and momentum around UHC in its member countries, but identified a need for greater country engagement in the network. These findings eventually informed a structural reorganization of the network aimed at strengthening country participation and leadership. In 2016, Mathematica Policy Research conducted a case study that built on Pact’s review. Presented below are key achievements and lessons highlighted in the case study.

**JLN achievements**

The JLN has grown into a large, highly valued global network through an iterative process that has been responsive to country needs. As more countries commit to UHC, demand for practical guidance on implementation of UHC reforms has grown. The JLN has responded effectively to this unmet need, adapting its approach over time to better serve the needs of LMICs. Reflecting the network’s high perceived value and a growing demand for the resources it provides, the JLN’s 2014 call for associate members resulted in expressions of interest from 40 LMICs across the globe, and the network grew from 6 to 27 members between 2010 and 2016.

The introduction of the country-led Steering Group and CCGs has increased country engagement in the network. Through the Steering Group, country representatives now proactively shape key decisions regarding country membership, technical priorities, and funding allocations. CCGs have also helped to increase member country engagement – by ensuring that practitioners in key government agencies meet regularly to discuss priority learning needs for their country and how to leverage the JLN to address those needs.

Technical initiatives and collaboratives have developed a large number of knowledge products and tools to support country reform efforts. Knowledge products have generally focused on documenting country reform experiences and learning. Tools have focused on providing practical guidance and templates to support data-driven reform processes. They have included guides to better define health system issues, manuals for conducting critical analytical exercises (such as costing of health services), simulation models to understand the implications of different reform options, and specifications for IT systems.

Member countries have used the JLF to support learning activities, but it remains an underused resource. Country members have used JLF funding to support their participation in workshops, study tours, and other learning activities. However, the volume and quality of applications for learning activities has been lower than expected. This is due, in part, to competing

### JLN partners and activities supported by THS

- **ACCESS Health**: Network coordination and management of the JLF and CCGs
- **Institute for Healthcare Improvement**: Facilitation of the Quality Technical Initiative in partnership with NICE International
- **PATH**: Facilitation of the Information Technology Technical Initiative in partnership with PharmAccess
- **Results for Development**: Network coordination, knowledge management, and facilitation of the Provider Payment Mechanisms Technical Initiative
- **World Bank**: Network coordination, strategic guidance for CCGs, and sustainability planning
demands on members’ time, but also to the requirement that the funds be used to address issues of common interest to multiple countries, which can be challenging for country-level practitioners to identify.

**Country practitioners in the network regularly draw on one another’s knowledge and experience to facilitate reform in their countries.** Practitioners often reach out to others in the network to brainstorm and troubleshoot issues and obtain models or templates for programs, standards, and processes. Informal interactions among country practitioners have also helped germinate policy ideas. Members are motivated to test new solutions to long-standing health system issues when they hear about approaches working in other countries.

**Countries have used JLN tools and resources to design, strengthen, and advocate for UHC-oriented programs and reform efforts.** Several member countries have drawn on JLN tools to collect comprehensive, reliable data needed to engage in evidence-based decision-making and reform. The tools

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**FIGURE 1. Key milestones in the formation and development of the JLN**

<table>
<thead>
<tr>
<th>Membership</th>
<th>Governance</th>
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<tr>
<td><strong>FEBRUARY 2010</strong></td>
<td><strong>MAY 2009</strong></td>
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<td>Delegations from the founding members – Ghana, India, Indonesia, the Philippines, Thailand, and Vietnam – convene for a pilot Joint Learning Workshop in Manesar, India.</td>
<td>Stakeholders from Ghana, India, Vietnam, and Thailand, and representatives from The Rockefeller Foundation, R4D, and other global development partners meet in Geneva to discuss the need for cross-learning among countries working towards UHC.</td>
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<td><strong>AUGUST 2011</strong></td>
<td><strong>NOVEMBER 2010</strong></td>
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<td>Kenya, Malaysia, Mali, and Nigeria join the network as full members.</td>
<td>A secretariat is formed to manage the JLN. It includes ACCESS Health, GIZ, the International Health Policy Program, Thailand, R4D, and the World Bank.</td>
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<td><strong>NOVEMBER 2014</strong></td>
<td><strong>DECEMBER 2012</strong></td>
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<td>13 new countries join the JLN as associate members: Bangladesh, Colombia, Egypt, Ethiopia, Japan, Kosovo, Mexico, Moldova, Mongolia, Morocco, Namibia, Senegal, and Sudan.</td>
<td>Pact is contracted to conduct an independent strategic review of the network.</td>
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<td><strong>NOVEMBER 2015</strong></td>
<td><strong>MARCH 2013</strong></td>
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<td>Bahrain and South Korea join the JLN as associate members.</td>
<td>Pact findings are reviewed in Bellagio, Italy, to develop a new vision and management structure for the JLN, which entailed the creation of a country-led Steering Group to oversee the secretariat (later known as the Network Coordinating Team), and country core groups.</td>
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<td><strong>APRIL 2016</strong></td>
<td><strong>MARCH 2014</strong></td>
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<td>Liberia becomes an associate member.</td>
<td>The JLN issues a call for associate members.</td>
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<td><strong>JULY 2016</strong></td>
<td><strong>JANUARY 2015</strong></td>
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<td>Peru and Yemen become associate members.</td>
<td>The JLN launches a deepened partnership with the World Bank, with seed funding from The Rockefeller Foundation to strengthen the Bank’s network coordination function and its work on network sustainability.</td>
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<td><strong>MARCH 2015</strong></td>
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<td>The JLN website launches a member portal, which allows members to connect with each other, contribute to discussions, access JLN resources, and retrieve information on JLN events.</td>
<td>The Bill &amp; Melinda Gates Foundation joins the Steering Group.</td>
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have helped members design new or strengthen existing policies, programs, and systems, such as health insurance policies, health protection schemes, and health insurance information systems. Data collected through JLN tools have also helped country representatives make their case to policymakers for new approaches or reform efforts.

While the network primarily aims to catalyze reform through learning, in a few cases it has also provided long-term technical assistance that has been effective in advancing reforms. In one example, the technical partner running the Provider Payment Mechanisms technical initiative spent six months in Vietnam helping practitioners design a pilot of evidence-based capitation models – the findings of which will inform implementation of the national health insurance law.

JLN lessons learned
The most successful technical initiatives are those that have embraced the network’s joint learning and co-creation approaches. The “bottom-up” approach that is common to most JLN technical initiatives focuses on listening closely to practitioners, understanding their challenges and constraints, facilitating cross-country dialogue on potential solutions to those challenges, and developing tools and resources to inform and facilitate reform. This approach ensures greater country ownership of reform processes than more traditional, “top-down” training and technical assistance approaches.

Technical initiatives that include steady engagement with a core group of practitioners, together with sustained, long-term external funding, have been most successful in developing useful tools for advancing UHC. Continuous engagement in a technical initiative by a dedicated group of practitioners builds strong relationships that enhance sharing and learning. Initiatives that had different people attending each of their events found it difficult to build momentum and generate the common knowledge and understanding needed to produce resources. Likewise, continuous, secure, and adequate funding was instrumental in helping technical initiatives maintain momentum and develop useful tools to inform UHC-oriented reforms.

Country participation in the JLN varies across member countries due to differences in the strength and performance of CCGs. Country participation in the JLN and the performance of CCGs have been influenced by a variety of factors. For example, CCGs have proven most effective when they involve agencies and individuals closely connected to a country’s UHC effort. They also operate more effectively if senior government officials within a country engage with the JLN and support and facilitate meaningful participation. Effectiveness of the CCGs is often hindered by high rates of turnover in participating government agencies and the limited bandwidth of individual participants. Finally, CCGs are more effective when they can engage all agencies with a stake in UHC, for instance, both the ministry of health and the national health insurance agency of a member country.

The Rockefeller Foundation’s role
The Rockefeller Foundation has played a catalytic role – as a founding funder and as a thought partner – in the development of the JLN. The Foundation’s early recognition of the need for accessible country-to-country learning and support, and its financial, strategic, and technical support over the years, has enabled the JLN to evolve into the dynamic and valued network it is today. In addition to investing substantial financial resources
in the development and expansion of the network, the Foundation helped design and refine the joint learning model, provided input on the JLN’s technical work, and took the lead on sustainability planning.

The Rockefeller Foundation’s flexible and collaborative approach allowed the network to evolve organically to address country needs. The Foundation intentionally kept the scope of work for its JLN grants relatively open and loosely defined. This allowed grantees the flexibility and creative space they needed to identify country priorities and knowledge gaps, and develop and iterate on appropriate strategies for addressing those needs.

Implications for other learning networks

Effective technical facilitation requires not only in-depth technical knowledge but also the ability to listen to and learn from practitioners’ experiences, elicit and synthesize lessons, and co-create useful knowledge products. The JLN approach to learning is distinct and differs from traditional knowledge sharing based on training. It emphasizes the importance of “co-creation” of knowledge, which requires technical experts to be good listeners, skillfully distill lessons from practitioners’ experiences, and use their technical knowledge to inform country-driven and crowdsourced solutions. This collaborative learning approach ensures that the tools produced are both useful to and used by member countries.

Country engagement has the greatest impact when senior government officials and all agencies with a stake in the relevant policy reforms are involved. Buy-in from senior officials can help ensure that mid-level technocrats can participate in network activities and increase the likelihood that network resources are used to effect policy change. However, strong country engagement also requires that the right mid-level officials (from the right agencies) are invited and agree to participate in network activities. Institutional diversity, which has been a challenge for the JLN, ensures that all key players are engaged in policy discussions and on board with proposed changes that emerge from network learning.

High turnover among government officials and poor coordination among government agencies often hinder country engagement, but can be addressed by providing local logistical support or integrating CCGs into existing government committees. Networks need to build in resilience to institutional challenges to ensure sustained, meaningful country engagement. High staff turnover, for example, can result in intermittent engagement. Another challenge is fragmentation of UHC efforts among multiple agencies that are not well coordinated. The JLN has attempted to address these challenges through designated “local learning coordinators” who help ensure regular meetings of the CCGs and coordinate across different agencies. It has also tried, where possible, to integrate the CCGs into existing government-run UHC coordination committees, since government bodies already working toward UHC are less susceptible to staff turnover and institutional friction than newly constituted CCGs.

Flexible funding, provided for targeted learning activities, can be useful for policy reform processes, but only if funding is used strategically for activities designed to achieve results. For many participating countries, the pool of untied funds made available through the Joint Learning Fund was one of JLN’s most
attractive features. Some member countries have been able to leverage JLF funds effectively to address emerging reform issues and questions. Others, however, have been unable to prepare goal-oriented proposals for JLF funding. A JLN coordinating partner now provides targeted technical assistance to countries on how to tie learning activities to policy objectives.

Collaborative learning can help spark ideas and generate resources for reform efforts, but it often needs to be supplemented with targeted technical assistance to ensure that learning is translated into policy action. The JLN approach has helped countries identify and frame priority issues, assess technical and organizational needs, gather ideas from the experience of other countries, and develop tools and resources tailored to their needs. However, as reform efforts are launched and implemented, countries may require more targeted, country-specific technical assistance. Proactively connecting countries to technical experts who can provide this type of tailored support may accelerate country-level change.

To ensure network sustainability, outreach to donors must begin early and should be intensive and far-reaching. The continuous operation of the JLN into the future will depend on marshaling funding from other donors. Networks need to ensure adequate, long-term funding by building relationships with a diversity of partners, including multilateral institutions, bilateral donors, private foundations, and other multi-country learning partnerships. The Rockefeller Foundation has provided nearly $19 million in grant funding to the JLN, about 70 percent of the network's total donor funding. With the end of the THS initiative, however, the JLN has sought to build partnerships with and bring in funding from new sources. In turn, the Bill & Melinda Gates Foundation, GIZ, and the World Bank have all stepped up their funding for key network functions. While these are positive steps, starting the outreach earlier might have ensured a stronger funding base to support the network's growing membership.

For more information, please see the full JLN case study available on The Rockefeller Foundation’s website, or contact the Foundation’s Monitoring and Evaluation Office at: rfevaluation@rockfound.org.