

Public Health Institutes of the World



BEST PRACTICE SERIES: PEER-TO-PEER VISITS CASE STUDY



The delegation of Pakistan's National Institute of Health with representatives from the Netherlands' RIVM and IANPHI

PAKISTAN'S NIH VISITS THE NETHERLANDS' RIVM NOVEMBER 2017

THE OPPORTUNITY

In 2016, the Pakistan Ministry of National Health Services, Regulations and Coordination (MoNHSRC) identified the Pakistan National Institute of Health (NIH) as the country's national public health institute (NPHI). Brigadier General (now Major General) Aamer Ikram became director in 2017. Shortly thereafter, IANPHI and the United States Centers for Disease Control and Prevention (CDC) suggested that the NIH visit an established NPHI as an early step in planning for a stronger NIH. When approached about hosting the NIH, the Netherlands' National Institute for Public Health and the Environment (RIVM) was extremely supportive, both because of its interest in expanding its global health efforts and its desire to support IANPHI and its members.

IDENTIFYING THE HOST NPHI

The visit to an NPHI was envisioned as one day of a five-day strategic planning effort for NIH. Because of barriers for some partners to travel to Pakistan, a decision was made to visit an NPHI in a city that could also host the strategic planning meetings.

IANPHI identified RIVM as a potential host for NIH's delegation for several reasons. Both NPHIs have a focus on infectious diseases, with RIVM also having established programs in areas such as environmental monitoring. RIVM operated within a well-established legal framework, whereas NIH was working to develop one. Although the Netherlands is much smaller in population and size, like Pakistan it has a decentralized public health system, so RIVM's experiences working with its subnational governmental organizations were also of interest and relevance.

Both NPHIs had strong, experienced directors who value good leadership and management practices. Dr. André van der Zande, director of RIVM, had been in his position six years, and Major General Ikram had more than 25 years of experience working in public health. Logistics also played a role in the selection of RIVM. Amsterdam is an international hub, making travel there relatively easy. Visas for Pakistani officials and other participants in the strategic planning were not difficult to obtain. Additionally, Pakistan and the Netherlands both use English as a business language.

Other considerations included the wide range of options for walking and dining in Amsterdam, including availability of halal food.

PLANNING FOR THE VISIT

The proposed agenda topics for the peer-to-peer visit were based on the current and likely future activities of NIH; issues identified in the International Health Regulations Joint External Evaluation and other assessments; and challenges the NIH faced in transformation to a high-functioning NPHI, such as the lack of a modern legal basis.

Careful thought went into the makeup of the visiting delegation. Major General Ikram chose to include representatives from all key sectors within NIH, as well as three from outside NIH – two from provinces and the deputy director of the Ministry of Health. Participants from RIVM included people with interests and experience in global health and those with leadership roles and expertise in areas of mutual interest to NIH and RIVM.

Trip logistics required creativity and great attention to detail. RIVM is located outside of Amsterdam's metropolitan area, which complicated lodging and transport arrangements. Scheduling of the trip required taking national and religious holidays into account.

Considerations in selecting the hotel included location in an area where it was safe to walk at night and proximity to halal food options. Advance work was needed to ensure visitors would have easy access to the RIVM campus.

THE VISIT

From the moment the delegation arrived on November 13, 2017, an engaging, supportive environment was established by Dr. van der Zande's warm welcome at the entrance to RIVM. In addition, Ms. Caroline van Maarseveen, who had assisted with logistics, was with the NIH team from the moment they arrived, staying with them throughout all the sessions. She provided continuity, ensuring that the visitors' questions were answered, arranging for side meetings, obtaining documents, and doing whatever she could to optimize the visitors' experience.

RIVM prioritized the perspective and interests of the NIH delegation in establishing the agenda. Sessions were led by subject-matter experts from RIVM, who had been given instructions to keep the formal presentations limited. Dr. van der Zande reflects that "up front, I said they must keep time for dialogue. I wanted conversation... to learn from each other." Examples of discussions that the NIH found most helpful included issues around leadership challenges and workforce development, the potential for including environmental monitoring in an NPHI, and issues around community involvement and preparedness.

The agenda included a small private meeting between the leaders of the two NPHIs. This provided an opportunity for frank discussion about issues such as the importance of scientific independence and the role of politics in public health, balancing among competing priorities, and the utility of a legal basis for an NPHI.

The agenda allowed for unstructured time, during which individuals from the two countries chatted over delightful Dutch snacks. Ms. Maarseveen had provided the Pakistani delegation in advance with short biographies and photos of key RIVM participants, which helped NIH visitors find people they were most eager to talk to.

SUCCESS FACTORS

Both Dr. van der Zande and Major General Ikram's personal involvement ensured that the right people participated, and that they remained fully engaged during the entire visit. Dr. van der Zande's coaching included guiding his staff "not to give their standard presentation but really look into the questions and the circumstances of the Pakistan delegation and to adjust their explanations of how we [operate] in the Netherlands, which is of course a different country and different culture... I think this is where we can do the best for our partner and to come out of our comfort zone to learn and to really dig deeper." The warm welcome, well-designed agenda, and structure of individual sessions helped to make the visit a success.

FOLLOW-UP AND LESSONS LEARNED

The NIH used the experiences and learning from the visit in a subsequent four-day strategic planning workshop and in subsequent efforts to develop a legal framework for the Pakistan NPHI. Follow-up work has led to the creation of new National Action Plans, simulation exercises, topical guidelines, and numerous training opportunities. Major General Ikram's inclusion of Ministry and provincial representatives in the visiting delegation has had long-lasting benefits in terms of Ministry support for NIH and national-subnational coordination.

RIVM leadership and staff were very pleased to be able to assist another NPHI. For RIVM, the visit provided an opportunity to demonstrate a contribution to global health to the Ministry of Health and the universities. Given limited funds for RIVM staff to work overseas, Dr. van der Zande noted that the visit provided a way to "bring the world to RIVM."

A suggestion to IANPHI from interviewees is that there be a more formal follow-up mechanism, for example, a simple report one month after the visit to allow for sharing individual plans for moving forward and lessons learned. The possibility of developing a longer-term bilateral exchange, potentially facilitated by IANPHI, should also be explored.

HOW WE GOT THE STORY

Thank you to IANPHI President André van der Zande (former director of RIVM), Pakistan NIH Director Major General Aamer Ikram, former CDC Pakistan Deputy Director Emaad Hassan, and IANPHI Senior Advisor Dr. Sue Binder for the generous donation of their time to help inform this case study. Information from interviews was supplemented via trip reports.