



Essay on Challenges of Implementing Results Based Financing Programs in Tanzania

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New Welfare Services–Sustainable Service Design as a driver for regional development

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Introduction

This essay aims at contributing to the existing knowledge about Result Based Financing (RBF) programs to poor and mid income countries. Results Based Financing (RBF) program may be referred to as an umbrella term referring to any program or intervention that provides rewards to individuals or institution after agreed-upon results are achieved and verified (URT 2015). The RBF program was introduced basing on challenges existing in implementation of interventions in areas such as health and social welfare services particularly in low income and developing countries. The increased demand of quality in health, education and social welfare services was seen as a driver for implementation of RBF. The program was perceived as a solution to new challenges that directly affect the quality of life of people with specific category such as aging society, people with disability, street children, orphans, children in conflict and in contact with the law including changes in family structure.

Statement of the Problem

In Tanzania, several programs and interventions have been introduced, one of the most recent was RBF in health sector. However, the program was not sustainable as was able to operate between 2015 up to 2020 and it collapsed.

Studies on sustainability of the Result Based Financing program (RBF) and if at all are sustainable in the context of low- and mid-income countries seem to be given little attention (Ifakara Health Institute (IHI) in 2021 and 2024). Recent studies in RBF have tried to illuminate more on the general causes of collapse of RBF as trying to answer why many of these programs are not sustainable (IHI, 2021). In studies done by IHI it is indicated that the sustainability of RBF programs in health and social welfare sector are facing many challenges due to inadequate consideration of sustainability mechanisms. However, few studies done in RBF have not adequately addressed the sustainability of the program in the context of the socio-economic conditions of Tanzania communities. In this regard, the proven and assumed effects of why RBF program was not sustainable, raise questions on the collapse if at all might have affected the livelihoods of people in these communities. Some of the questions that emerge are to examine whether design was careful enough to foresee the sustainability of RBF in the country and to what extent has brought positive effects to beneficiaries.

There is also grey knowledge on the extent to which the collapse of RBF has affected or changed the social welfare conditions of people in Tanzania.

It is in this context that this study has sought explanations for alternative answers to these questions as a way of adding new insight to the existing knowledge on the design of programs which ensures sustainability on health and social welfare in Tanzania.

Objectives of the Study

Main Objective

To analyse the factors led to collapse of RBF program in health and social welfare sector in Tanzania.

Specific Objectives of the Study

1. To analyse the factors considered during design of RBF in the context of social economic conditions of communities in Tanzania
2. To examine the degree to which the collapse of RBF program impacts the situation of vulnerable groups in Tanzania communities
3. To analyze the effectiveness of on-going government efforts in addressing programs sustainability.

Research Questions

1. How does the sustainability factor was considered during design of RBF in the context of social economic conditions of communities in Tanzania
2. To what extent have the collapse of RBF program impact about vulnerable groups in Tanzania communities.
3. How have the on-going government efforts in addressed programs sustainability.

Review of literature and the theoretical framework

The collapse of RBF as a program raised an alarming question on design and implementation and, whether the country has adequate sustainable management skills for running results-based financing program and ensure are sustainable.

Recent studies by Maliba *et al* and Binyaruka *et al* from Ifakara Health Institute (IHI) in 2021 and 2024 respectively shows that the challenges faced RBF program and especially to low- and middle-income countries (LMICs), are due to government's heavy reliance on donor funding for health services, a factor which was not taken into consideration during the RBF design, hence led in a fragmented funding landscape and multiple funding mechanisms. RBF challenges were further argued to contribute to service duplication, increased reporting burden, and disparities in affordable healthcare access.

Moreover, in addressing RBF challenges, Maliba and Binyaruka at different angles recommends additional efforts to strengthen health financing reforms saying, "Both RBF and other strategies such as Direct Health Facility Financing (DHFF-HBF) considered most of the strategic healthcare purchasing principles, but further efforts are needed to strengthen the alignment towards achieving the Universal Health Coverage (UHC)."

It is further argued that efforts may include further strengthening the data verification process and spending autonomy for DHFF-HBF, although it is important to contain costs associated with verification and ensuring public financial management around spending autonomy.

Sustainability in provision of health and social welfare services and demand for emerging health and social services has rapidly increased. The increased challenges to people with special needs such as aging, people with disability, street children, orphans, children in conflict and in contact with the law and changes in family structure hence requires a global attention.

That being the case, increased demand for health and social welfare services is reflected by the deepening of provision of quality health and social welfare services. Moreover, the rapid growth in the aging population in recent years in line with increase of non-communicable diseases makes the situation more critical (Mikyong Lee, Marko Majer and Boyoung Kim 2019).

While in some African countries like Tanzania where RBF was reported to fail some African countries are implementing PBF with success. Cordaid has recorded some of these success stories, for instance in Rwanda, Zimbabwe, and Ethiopia. PBF means being wise about every penny invested in health in fragile countries (<http://www.cordaid.org>).

The complexity demand for sustainability of results-based or "result based" program needs to be addressed broadly in other complex social programs such as the increasing divorce rate, suicide rate, gap between the rich and poor, as well as instability of labour and employment. Hence, the demand for sustainable results-based interventions to health and social welfare systems is important.

Analysis

RBF in Tanzania was introduced with the support by the World Bank and other partners (URT 2015). The program was under the government control with technical support from the World Bank. By design the program had the five guiding principles which were commonly known as pillars (URT 2015). The RBF pillars were;

- i. Purchaser
- ii. Fund holder
- iii. Verifier
- iv. Service provider
- v. Regulator

The five pillars were there to address the efficient of the program by the minimizing or eliminating conflict of interest.

Mikyong Lee, Marko Majer and Boyoung Kim (2019) on their analysis of sustainable success of social service system, argues that for any program or system to be sustainable it requires to have the key pillars as a prerequisite, these pillars are service delivery system, service administration and service network.

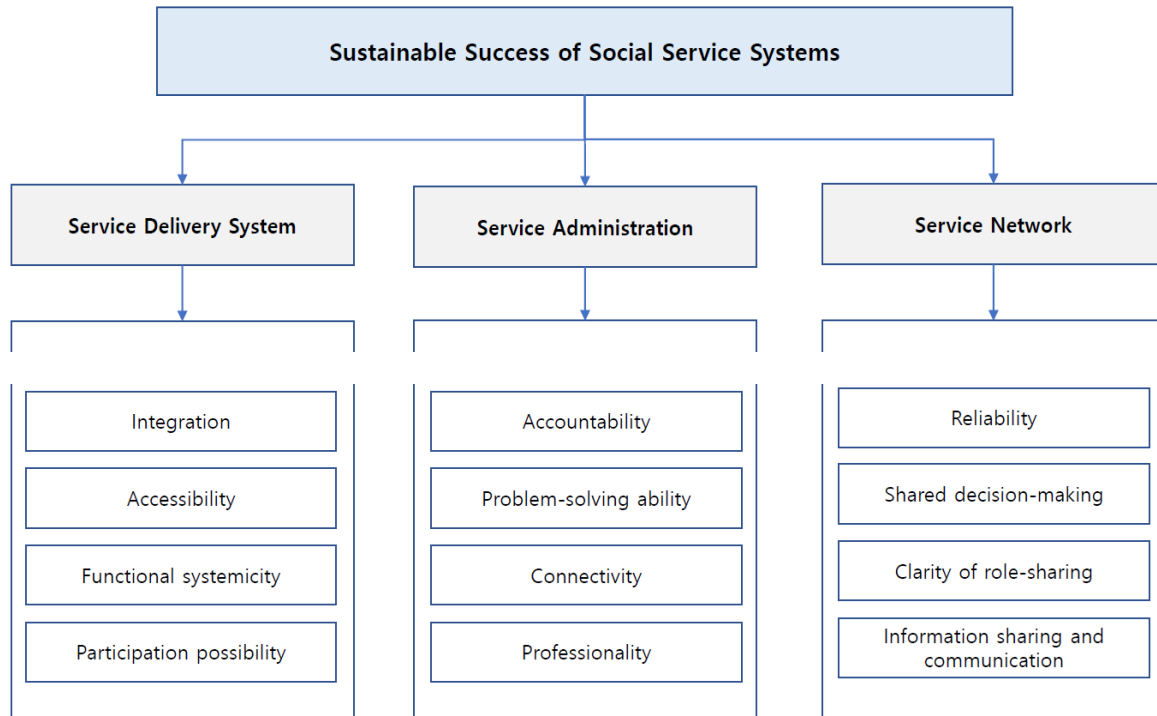
When one tries to answer the why RBF was not sustainable, the answer could be that RBF in Tanzania failed to work due to several factors, the most important ones were failure to consider the three pillars as have argued by Mikyong Lee, Marko Majer and Boyoung Kim (2019). In line to what (IHI 2024) is trying to argue in line with the experience it can further be discussed that the program did not consider the canons of program sustainability such as having in place the adequate service delivery system, service administration and service network.

The service delivery system to become sustainable it requires to have in place issues of integration, accessibility, functional systemicity and participation possibility. The RBF in Tanzania seems to be lacking issues of integration of provision of different services. For example, social welfare and other service like mother and child health indicators were working separately. Functional systematic and participation of different key actors at community level was not adequately addressed.

Moreover, service administration was seen to be a challenge in all time of implementation of the program. Key issues in service administration such as accountability, problem solving, connectivity and professionalism are seen to contribute to collapse of the program. As it has been argued by

Maliba and Binyaruka (IHI 2021&2024) RBF challenges were seen to contribute to service duplication, increased reporting burden, and disparities in affordable healthcare access.

The analysis of the sustainable services management can be summarized in the table below



Source: (Mikyong Lee, Marko Majer and Boyoung Kim, 2019).

The analysis made on the table above in line with existing literature on RBF programs in Tanzania’s experience during implementation of RBF, it can be argued that most of programs and intervention have short life due to inadequate skills and competence in terms of services delivery, services administration, and services network. As it has been summarized, for services to be sustainable it requires the implementers to have deep knowledge in three pillars which are services delivery, services administration and services network.

Basing on the table above, for services to be sustainable, one of the prerequisites is proper management of the service delivery system. To make sustainable issues of integration, accessibility, functional systems, and participation are well worked on.

Moreover, the experience from Tanzania RBF program shows that, for services to be sustainable it carefully requires management of pillar of services administration where some issues such as accountability, problem solving abilities, connectivity and professionalism could be well taken into consideration.

In addition to what has been experienced, services network is one of the factor to be considered in terms of sustainability of services provision, where factors such as reliability, shared decision-making, clarity of role sharing, information sharing and communication are clearly worked on.

In line with what has been presented and discussed and when I call back to the previous experience in Results Based Financing Program in Tanzania (URT:2015). The Result Based Financing (RBF) was established in 2015 and ended in 2020. The program survived for only five years. One may have a view that key pillars for sustainable success of social services system which are services delivery, services administration, and services network were not clearly worked on. The experience from the RBF program in health and social welfare sector shows that the program was piloted in Kishapu District in Shinyanga Region (URT:2015) followed with implementation in other eight regions including Shinyanga itself. However, factors such as integration of RBF program with other existing systems was not clearly addressed.

It could also be discussed that some key issues in administration such as accountability and problem-solving ability among the health facilities staff and management teams at council and region were not properly addressed. That being the case the RBF program met with technical challenges at all levels of implementation.

Results and recommendations

The experience, existing literature and discussion shows that for any service to be sustainable it must consider basics of management such as services delivery, services administration, and services network as prerequisite.

RBF as a program was not sustainable as it could not go deep on key issues for making a service or program sustainable which are services delivery, services administration and services network. Therefore in future if any institution or program want s to achieve a notable results, basic of management should be given a due consideration during the design and followed in steps and process of implementation of RBF Program.

Conclusion and lessons learned

The lesson learnt from RBF shows that it is obvious that intensive and deeper discussions are needed for insuring that public and private organizations are well equipped with skills that could make programs and interventions sustainable from design to implementation.

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