

Management Capacity Building Activities in Botswana

Background and Goals

The Centers for Disease Control and Prevention is working with several partners to enhance Botswana's organizational performance in HIV/AIDS programs and services by strengthening the leadership and management skills of mid-level public health managers in the country's public, private, and governmental sectors.

Funding and Partnerships

The program is a collaboration among the following:

- Botswana-USA (BOTUSA)
- Botswana Ministry of Health (MOH)
- Botswana Ministry of Local Government (MLG)
- Institute of Development Management (IDM)

Improving HIV/AIDS Program Work Processes

The Botswana program provides management development skills to HIV/AIDS managers. The goal is to help them learn and apply process improvement tools to public health program processes in order to improve the effectiveness and efficiency of operations.



Between 2003 and 2008, the program has graduated seven cohorts, with more than 184 HIV/AIDS program managers from governmental agencies, community-based organizations, and non-governmental organizations (NGOs) completing a 6-month applied management development program.

As part of the program, workshop participants and the team members they recruited from their worksites completed 131 applied management improvement projects which have

- Increased the percentage of women who were counseled and tested for HIV/AIDS with their partners (as opposed to by themselves) from 20% to 50% at the Eastern Military Garrison Clinic (Selibe Phikwe),
- Increased the percentage of tuberculosis (TB) patient contacts screened for TB from 0% to 98% (Tsamaya region),
- Increased the percentage of infants exposed to HIV/AIDS at birth who were put on treatment after the recommended time had lapsed from 60% to 0% at the Kang Clinic (Hukuntsi District),
- Improved the percentage of CD4 screening for HIV-pregnant women from 33% to 65% at the Boteti, Manga, and Gobojango Health Posts (Bobirwa District),
- Increased the percentage coverage of tetanus toxoid vaccine among pregnant women from 56% to 77% for the first dose and from 33% to 60% for the second dose (Letlhakeng Sub-District),

- Improved the percentage of TB contact tracing from 27% to 52% in the Masego, Lapologang, and Tshwaragano Clinics (Francistown), and
- Increased the percentage of Isoniazid Preventive Therapy clients remaining in follow-up activities from 22% to 97% at the Botshabelo Clinic (Selibe Phikwe).

National Conference

In 2007, alumni of the first five cohorts of the in-country workshops gathered at a national conference to share experiences and lessons learned and to participate in a continuous learning session on “Developing Learning Sessions.”

More than 60 alumni from IDM (a regional NGO that conducts training, consulting, and research in Botswana, Lesotho, and Swaziland to provide an avenue for in-country management capacity development) attended the conference, as did stakeholders from BOTUSA (a partnership between CDC and the Government of Botswana to help stop the spread of TB and HIV/AIDS in Southern Africa), Botswana MOH, Botswana MLG, and various NGOs. The second conference of workshop alumni and stakeholders will take place in August 2009.



Building Sustainability

To build sustainability, Botswana stakeholders have obtained preliminary accreditation for the program from the Botswana Training Authority (BOTA) as a Level 3 Certificate in Applied Public Health Management with academic credits that are accepted throughout the South African Development Community (SADC). Current goals are to finalize accreditation documentation from BOTA and to incorporate the program into the regular curriculum of program managers in the MOH and the MLG, in alignment with government reform efforts.

Strategic Focus

Several developments in Botswana have necessitated a shift in the focus of the program from process improvement to program planning and management. These developments include

- **Public Sector Reforms:** The MOH and the MLG are incorporating management capacity building into their reform efforts to improve performance within the civil service health sector,
- **Need for Program Impact:** In 2008, the program refocused its efforts to maximize impact on public health programs by targeting all matrons plus one additional clinic head from all districts, and all TB coordinators in all District Health Teams in Botswana, and
- **Botswana Management Capacity Building Program:** 2009 marks a strategic focus on sustainability. Graduates who have completed the six-month applied management development program are expected to collaborate to establish strategic public health improvements in Botswana and to develop new initiatives to improve organizational performance in strategic areas with focus on TB control, hospital-acquired infections, epidemiology, and Prevention of Mother to Child Transmission (PMTCT) uptake.

Consequently, SMDP’s Healthy Plan-It™ program planning and management program is being conducted for the first time in Botswana with a cohort of public health managers from the MLG.

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