



Strengthening the Health Care System through Nonprofit Sector Engagement, Multi-sectoral Policy Response, and International Collaboration

Proposal by Ivana Chapcakova, M.A.

Background

I am an independent consultant with over eight years of non-profit sector experience specializing in health program development and management, quality assurance systems and approaches, and gender based violence. Some of my international activities include training and consulting in domestic violence and crisis response for the Avahan India AIDS initiative of the Bill and Melinda Gates Foundation, and organizational capacity building for disabled people's organizations in Rwanda. Working at the intersections of poverty, gender and violence, my efforts have centered on creating conditions that promote equality, health and human rights.

I wish to apply my experience to help strengthen the health system in Slovakia through nonprofit sector engagement, cross- sector policy solutions and international collaboration and networking. My proposal is atypical in that I am an independent consultant without formal ties to an employer in Slovakia. However, I believe I could contribute significantly to the advancement of health services and care for women in Slovakia through the establishment of a not-for-profit health organization.

Many services addressing women's health issues continue to be inaccessible within public health care system in Slovakia. For example, health education and health promotion services, such as cervical cancer screening and HIV counseling and testing, are not integrated into the general services, and violence against women is not addressed by the health sector in any systematic way. The public health nonprofit sector can narrow this gap, and can have enormous influence on those who shape domestic health policies by applying effective advocacy, public education, and making available to the policymakers information on evidence-based interventions.

My project plan involves establishing a Slovak-based not-for-profit health organization of international scope. The fundamental aims of my project are: 1) to promote greater recognition of how psychological, social, behavioral, economic and environmental factors influence gender inequalities in health, 2) to translate into policy and practice the growing body of evidence that can lead to improving the health of women and girls, and 3) to build a multisectoral policy response to gender inequalities in health through health promotion and disease prevention, and documentation and dissemination of effective and gender sensitive policy interventions and programs. The organization will develop new collaborative linkages with partners in the United States and other countries thus strengthening global partnerships to better address health needs of women and girls worldwide.

To assume this leadership role in my community and successfully translate my project plan into effective action, I need additional training and exposure in global health leadership. With the support from the AFCSLS and help from my American partners, I will be able to address my professional development needs in the following areas: 1) health policy and management 2) health economics, and 3) executive management experience.

My project plan involves establishing a Slovak-based not-for-profit health organization of international scope. The fundamental aims of my project are: 1) to promote greater recognition of how psychological, social, behavioral, economic and environmental factors influence gender inequalities in health, 2) to translate into policy and practice the growing body of evidence that can lead to improving the health of women and girls, and 3) to build a multisectoral policy response to gender inequalities in health through health promotion and disease prevention, and documentation and dissemination of effective and gender sensitive policy interventions and programs. The organization will develop new collaborative linkages with partners in the United States and other countries thus strengthening global partnerships to better address health needs of women and girls worldwide.

To assume this leadership role in my community and successfully translate my project plan into effective action, I need additional training and exposure in global health leadership. With the support from the AFCSLS and help from my American partners, I will be able to address my professional development needs in the following areas: 1) health policy and management 2) health economics, and 3) executive management experience.

American Partner

Executive Training. New York University (NYU) is ranked as one of the top academic institutions in the world. The university's intellectual climate is fostered by a distinguished faculty of scholars, practitioners and researchers. NYU's newly re-designed and fully accredited MPH Program features a concentration in Global Health Leadership specifically designed to train individuals with prior graduate degrees for leadership roles in public health settings across the globe. In addition to the academic caliber of NYU courses, the program and the university provide an unparalleled opportunity for networking and collaborations with professionals across disciplines, and with top health institutions and organizations located in New York City.

Internship. In designing my internship, I had two main objectives - to engage in collaborative capacity-building with leading organizations, and to build lasting global partnerships:

- a. **Africare** - Africare is a leader among private, charitable U.S. organizations assisting Africa. Established in 1970 it is the oldest and largest African-American led organization in the field with programs in areas such as Health & HIV/AIDS, Water, Sanitation & Hygiene, and [Women's Empowerment](#). As a U.S.-based organization working internationally, Africare is a leader in promoting nonprofit engagement and international collaboration in health.
- b. **Naturopathic Medicine for Global Health** – NMGH is a nonprofit health care organization that seeks to promote Naturopathic Medicine as a feasible and cost effective means of healthcare. NMGH is global in scope and works to provide sustainable healthcare and humanitarian

assistance in developing countries, with special focus on women and children's health.

Both of my internships have been confirmed by the partner organizations.

Objectives

The overall program objective is to gain knowledge and practical experience that would enable me to integrate a nonprofit enterprise into the health system in Slovakia, and to strengthen multi-sectoral policy response, and international collaboration. The specific aims of the program are:

- a. To enhance my knowledge and skills in the formulation and evaluation of public health policies, and the use of economic tools in health policy analysis and development.
- b. To engage in collaborative capacity-building with international organizations, and to become familiar with the institutional settings for making national and international health policy.
- c. To expand my professional network of public health practitioners and global health partners, and to form linkages with experts who may be willing to serve on an advisory board.
- d. To connect health policy and issues affecting women's health in Slovakia to the global women's health strategies and solutions for improvement.

Detailed Description

Executive Training. I will take three courses during the Fall 2011 semester from the Global Health Leadership Program at NYU. The semester starts on September 6 and ends on December 16, 2011. My preferred courses are: Comparative Analysis of Health Systems: International Perspectives, Principles of Health Economics, and Health Policy and Management.

Internship Part I. I will accompany Africare senior staff to a country office in Liberia so that I could participate in international health program operation, and observe and work in a different health policy setting. I will be assisting with evaluation of health care services for sexual and gender based violence survivors to inform future Africare programming, and policy setting at the Ministerial level. My stay will be for approximately 2 months. The following 4 months will be spent in New York at the university and at NMGH.

Internship Part II. At NMHGH, I will shadow the Chief Executive Officer while assisting with the overall operations and development of NMGH's international programs.

These internships will provide me with an opportunity to receive executive management experience, shadow a CEO, and to learn the framework and the operation of an international health organization, and how it can influence health care delivery and policy formation.

Time Schedule

The program will commence in July of 2011 and conclude by December 23, 2011.

Activity	Start and End Dates
Internship I (Africare)	July 6 – Aug 28, 2011
Global Health Leadership Training (NYU)	September 6 – December 23, 2011
Internship II (NMGH)	September 1 – December 23, 2011

Program Cost

The total anticipated cost of the program is \$19,514. To demonstrate my serious commitment, I have agreed to contribute \$4,514 towards my program cost.

Item	Anticipated Costs (\$)
Executive training tuition and registration/service fee (for 9.5 points)	10,215
Internship	0
Administrative fees (visa fees, etc.)	140
International travel	2,600
Local transportation (\$104/mo. x 6 calendar mos.)	624
Medical insurance	635
Monthly maintenance (\$750/mo. x 6 calendar mos.)	4,500
Contingency	500
Supplies (office consumables, books)	300
Total	19,514

Program Benefits

Individual. This training program will equip me with the tools needed to lead a nonprofit healthcare organization and to design innovative, practical and affordable solutions to complex health problems. I will learn techniques for health policy analysis, and to understand the application of health economics in policy development for the delivery of health care.

Communities. The benefits of this program extend to the communities that my nonprofit organization will reach through health advocacy and health services not traditionally offered by the mainstream healthcare providers.

Partnerships. This program provides an opportunity to build deep and lasting partnerships with my American partners. It is my hope that the collaboration will continue after the program has ended and that we can establish exchange visits to train and conduct research together, and join efforts to address local and global health problems.

There is great community and societal value in nonprofit health care enterprises, which this program can help catalyze.

Risks

Nonprofit organizations play a critical role in the health policy formulation, financing and delivery of health care services in the United States. In Slovakia, however, the legislative framework and the government's attitude towards nonprofits create a less favorable climate. The integration of nonprofit sector into Slovak health care system is a slow incremental process. Possible risks include organizational and systems barriers to successful implementation and sustainable community benefit performance, and balancing the community's needs with financial capabilities. A strong partnership with international organizations may help overcome some of the challenges through technical assistance and collaborative problem-solving.

Financial sustainability and overreliance on donors is another potential risk. I will employ the sustainability model similar to social enterprise that will enable the organization generate capital by leveraging its expertise and skills in public health policy and gender mainstreaming to government entities, multilateral and bilateral development agencies, academic institutions, corporations and others. All revenue from these activities would then be re-invested into public health programs serving women in Slovakia and internationally.