WHO Learning Strategy

Dr Gaya Gamhewage

Head of Learning and Capacity Development WHO Health Emergencies Programme

Team: Christos Mylonas, Oliver Stucke, Dr Mohamed Mahmoud
Why did we need a Learning Strategy?

<table>
<thead>
<tr>
<th>1. Build on the Academy vision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capture and expand the vision by DG Tedros and President Macron for the WHOA to address the health challenges of our time and the future (GPW13, SDGs and beyond)</td>
</tr>
<tr>
<td>Support and provide a future-orientated framework to the on-going start-up tactical and operational plans for the WHO Academy, addressing operational, strategic and visionary direction for the next 10 years and more</td>
</tr>
<tr>
<td>Add further value to the innovation promised by the WHO Academy for delivering training, by expanding the focus on achieving health goals of individuals, communities, nations and the world</td>
</tr>
<tr>
<td>Help the Academy frame clearly its role in learning for health within a broader ecosystem</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Participation and empowerment of stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engage all relevant stakeholders, crowdsource the best ideas, gather evidence, case studies and consensus to co-create the frame that will define the future of learning for public health</td>
</tr>
<tr>
<td>Get buy-in from the widest possible range of stakeholders for the Academy through participatory processes</td>
</tr>
<tr>
<td>Nudge stakeholders to play their own role in contributing to revolutionizing learning for public health</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Align with WHO mandate and values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure equity in access to lifelong learning in health care and public health is firmly linked to equity in access to health</td>
</tr>
<tr>
<td>Align with other WHO transformation processes – Career development and Learning; Health Emergency Work Force learning; new ways of working with stakeholders; ensuring an evidence-based approach</td>
</tr>
</tbody>
</table>
The case for a WHO Learning Strategy

The case for a Global Learning Strategy for public health has many facets. Foremost amongst them are:

1. Almost all countries will **NOT** meet the SDG3 or related targets
2. Much WHO guidance takes more than a decade to reach the frontline
3. Socioeconomic and professional factors **exclude** millions from learning for health
4. Learning for health is focused on knowledge, skills and not competencies to meet health goals
5. **18 million shortage** of health care workers; and more than **100 million** will need reskilling and upskilling in the next decade
6. The **gap for public health** is not even assessed
7. Currently, old, outdated, ineffective **education models** are used
8. Education is a commodity, **not a global public good**
9. **Learning**, not education needed
10. **For health workforce**, current and future, **PLUS health literacy** of all people across the world

The big chasm we must cross
Move to competencies for action in the future
The future learner – priorities

Gen Y & Z

Women

Learners on the wrong side of the digital divide
The development of the WHO Learning Strategy

• A futurist framework for strategic planning that looks into the next decade or more.
• Using 4D Appreciative Inquiry model

Source: Amy Webb, Future Today Institute
What have we done?

- Implementation of LS
- LLL through an ecosystem approach and knowledge network
- Learning Organization (transformation)
- Evolution and renewal of the strategy

- **WHO LS Library** of 130+ documents shared by AG/UN learning group members
- **Literature review** on learning methodologies, in-service training and continuing professional development from 2000 to 2019
- **Literature review** of publications on learning, during the COVID19 pandemic (from December 2019 to August 2020)
- **External consultations** with 400+ experts, organizations, professional associations, youth groups and networks, from across the world
- **Big Idea survey**: 2600 people from all WHO regions shared their big ideas to create a world where lifelong learning, to achieve global, national and individual goals for good health, becomes the norm
- **Four Advisory Group meetings** were convened, bringing together +100 experts from WHO, UN entities, universities, associations, networks and donors
- **180 WHO personnel** representing all regions were consulted across six languages about their learning needs through a series of virtual focus group discussions
- Two staff perception surveys: **2019 WHO staff survey**

- The strategy aligns with the **SDGs** and **WHO’s Constitution, its Values, and the Organization’s 13th General Programme of Work**
- Transforms WHO into a **learning organization**
- **Online public consultation**
The Big Idea survey - six key themes

1. Improving health:
   Primary care as delivery

2. Learning Strategy:
   General

3. Online learning:
   Important to many

4. Access:
   Material access

5. Operationalization:
   Help offered and the need to value offers

6. Knowledge transfer:
   Adaptability and reflexivity

3. Online learning:
   Other methods still requested

4. Access:
   Social and cultural access

5. Operationalization:
   The need for specific aims that can be evaluated and assessed

6. Knowledge transfer:
   For long-term training
The socio-cultural shift to lifelong learning in public health

- Applying lifelong learning approach
- Introducing ecosystem model for LLL in public health
The lifelong learner

Lifelong learning includes the following dimensions:

- Learning is **active**, not passive
- Learning occurs in **formal** (school, universities), informal (courses and trainings) and **nonformal** (everyday life) settings
- People learn **with**, and from, **peers**
- People **integrate ideas from different fields**
- Learners locate and evaluate information from a **wide range** of sources
- People use **different learning strategies** as appropriate
- Learning addresses **real-life issues**
- The **process** of learning is as important as the content
- People identify, plan and monitor **their own learning**
- Learners engage in **reflection** and self-evaluation
- **Feedback** is critical for change and improvement
An ecosystem model for LLL in Health

• To create the massive cultural change to lifelong learning in health, at scale and ensuring equity requires nothing less than a social movement.
• An ecosystems approach enables a social movement to grow and thrive.
• Only if we all commit towards the common goal of learning in health (as well as learning in other key areas, such as environmental protection) will we see the changes that are required to achieve societal goals such as the SDGs.
• Only by broad participation and multidirectional learning in a LLL ecosystem will we be able share existing and acquire the new knowledge required to address the challenges of the 21st century.
<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited access to LLL for public health</td>
<td>Universal and fair access to LLL for public health based on core values including equity</td>
</tr>
<tr>
<td>Education is a commodity</td>
<td>Learning is a global public good</td>
</tr>
<tr>
<td>Dispersed learning initiatives</td>
<td>Learning movement orchestrated around values and organised into coalitions delivering learning adapted to local context and knowledge areas</td>
</tr>
<tr>
<td>Implementation of learning activities</td>
<td>Support for building of learning organizations</td>
</tr>
<tr>
<td>Primary focus on individual development of knowledge, skills and competencies</td>
<td>Sharing of knowledge and alignment of capacity development at individual, team, community, national, regional and global capacity to achieve health goals</td>
</tr>
<tr>
<td>Use of traditional techniques for education for public health</td>
<td>Boost public health education and lifelong learning by harnessing and facilitating access to innovation on a global scale and using Education 3.0</td>
</tr>
<tr>
<td>Knowledge flows from expert to learner and is dependent on a power gradient</td>
<td>Knowledge is increasingly democratized, less power-dependent, accessible, adaptable and flows in multiple directions including feedback loops to allow inputs of learners and practitioners to experts who codify new knowledge.</td>
</tr>
<tr>
<td>Learning is primarily based on educational (formal learning and informal learning) approaches of teaching</td>
<td>Learning incorporates and has ways to measure and accredit experience (on-the-job/ in daily life learning also known as non-formal learning) and exchange (social learning)</td>
</tr>
<tr>
<td>Learning approaches are didactic, based on pedagogy and teaching</td>
<td>Learning approaches are based on andragogy, heutagogy and draw on neuroscience, behavioural science, game theory, psychology and other relevant fields of science</td>
</tr>
<tr>
<td>Learning is geographically or institutionally isolated except for a few instances (accredited educational degrees or professional certification)</td>
<td>There is a conscious effort for establishing cross border, cross-intuitional accreditation and certifications systems</td>
</tr>
</tbody>
</table>
**Who Learning Strategy Objectives**

1. **Ensure Equitable Access to Learning in Health**
   
   Ensure fair and transparent access to Lifelong Learning LLL by removing barriers to learning and ensuring all persons working in public health, health care and associated disciplines access essential, high-quality, relevant, appropriate learning opportunities to help achieve strategic health goals and that the public benefit from enhanced health literacy.

2. **Build, Sustain and Energize Learning Ecosystems**
   
   Proactively shift to an ecosystems approach for establishing the norm of LLL for health by convening and supporting existing and new knowledge networks, institutions, partners, agents and other stakeholders from within and outside public health and education around a set of agreed values and ground rules and create an enabling and mutually respectful environment to further the big idea of LLL for achieving health goals.

3. **Transform into Learning Organizations**
   
   Proactively support relevant stakeholders to integrate lifelong learning into their organizational strategies as appropriate and work to evolve WHO into a learning organization so as to act as champion and multiplier of lifelong learning in public health, and support Member States, agencies, institutions, partners and other stakeholders to do the same.

4. **Use Science-based Approaches**
   
   Ensure learning activities and accreditation offered by entities that relate to the achievement of public health goals are based on the latest science, evidence and know-how.

5. **Ensure Ownership of Stakeholders**
   
   Enable stakeholders to act at the most immediate (or local) level yet supported by expertise and knowledge held at a different location and that stakeholders have reasonable opportunity as appropriate to voice their learning needs, prioritization, content development, learning delivery, learning evaluation, learning research and are given due recognition for their collaboration and inputs.

6. **Innovate Continuously**
   
   Promote, pilot, share and scale up innovations for learning for public health and ensure learners’ access without discrimination viewing learning for health as a global public good.
WHO Learning Strategy in numbers

1. Goal
To frame the contribution of learning to achieve global, national and individual goals for public health through the creation of a culture of lifelong learning for public health

2. Approaches
Massively and proactively expanding learning ecosystems and igniting a global movement for LLL in health

3. Foundations
- Aim for equity
- Design for competency
- Ability to scale

4. Groups of stakeholders
1. Health care workforce
2. Public health workforce
3. Health emergency reserve workforce
4. Individuals (health literacy)

5. Core values
Equity, capacity, transparency, participation and excellence

6. Objectives
1. Ensure equitable access to learning in health
2. Build, sustain and energize learning ecosystems
3. Transform into learning organizations
4. Use science-based approaches
5. Ensure ownership of all stakeholders
6. Innovate continuously
Thank you