

Civil Society Engagement in the Global Financing Facility: Analysis and Recommendations

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Table of Contents

Executive Summary	4
1. Introduction	6
2. Background	6
GFF History	6
Business Plan: GFF Governance	7
Business Plan: Multi-stakeholder Engagement	7
GFF Countries and Key Progress to Date.....	8
Analysis of Civil Society Engagement in the GFF	8
3. Key Findings	9
Civil Society Engagement in the Development of Front Runner Country Investment Cases	9
Efforts to Improve Civil Society Engagement in the GFF.....	15
Other Multi-stakeholder and/or Civil Society Platforms	18
4. Lessons Learned.....	22
5. Recommendations.....	25
6. Conclusion.....	30
Annex A: Study Methodology.....	31
Annex B: Minimum Standards.....	33
Annex C: Proposed/Draft AHBN Regional Scorecard for Minimum Standards.....	36
Annex D: Relevant Partner Documents.....	40

Acronyms / Abbreviations

A&AWG	Advocacy and Accountability Working Group (RHSC)
AFP	Advance Family Planning
AHBN	African Health Budget Network
CSA	Civil Society Alliance (SUN Movement)
CSN	Civil Society Network (SUN Movement)
CSO	Civil society organization
CCM	Country Coordinating Mechanism (for the Global Fund)
CCRDA	Consortium of Christian Relief & Development Associations (Ethiopia)
CORHA	Consortium of Reproductive Health Associations (Ethiopia)
CTMP	Comités Techniques Multisectoriels Permanents (DRC)
EWEC	Every Woman Every Child
FCI	Family Care International
Gavi	Gavi, the Vaccine Alliance
GFAN	Global Fund Advocates Network
GHC	Global Health Council
Global Fund	The Global Fund to Fight AIDS, Tuberculosis, and Malaria
GFF	Global Financing Facility in support of <i>Every Woman Every Child</i>
HPN	Health, Population, and Nutrition
HSTP	Health Sector Development Program (Ethiopia)
IBRD	International Bank for Reconstruction and Development
ICC	Interagency Coordination Committee
IDA	International Development Association
IHP+	International Health Partnership
IPPF	International Planned Parenthood Federation
INGO	International non-governmental organization
JCF	Joint Consultative Forum (Ethiopia)
JCCC	Joint Country Coordination Committee (Ethiopia)
MACS	Mobilizing Advocates from Civil Society (Coalition, Kenya)
MoH	Ministry of Health
MPTF	Multi-Partner Trust Fund (SUN)
PMNCH	The Partnership for Maternal, Newborn, and Child Health
RHSC	Reproductive Health Supplies Coalition
RMNCAH	Reproductive, maternal, newborn, child, and adolescent health
SRH	Sexual and reproductive health
SUN	Scaling up Nutrition
SUN CSN	Scaling up Nutrition Civil Society Network (global)
SUN CSA	Scaling up Nutrition Civil Society Alliances (national)
WHO	World Health Organization

Executive Summary

The Global Financing Facility (GFF) represents a critical contribution to global efforts to end preventable deaths of women, adolescents, children, and newborns by 2030 and improve their health and quality of life. The GFF aims to help close the funding gap for reproductive, maternal, newborn, child, and adolescent health (RMNCAH) by serving as “a facility that harnesses the strengths and financial resources of a wide array of partners.”

Civil society brings a wealth of unique knowledge, expertise, and access to a range of communities, which can and should be leveraged to make the GFF process and outcomes stronger. The GFF recognizes the value of engaging civil society in global and country level GFF processes and platforms, as is documented in the GFF Business Plan. However, civil society engagement and involvement in GFF countries to date has been varied, and often quite limited. There are important lessons to be learned from the experiences thus far in the front runner countries – **the Democratic Republic of the Congo (DRC), Ethiopia, Kenya, and Tanzania** – and from other global and national platforms, to strengthen engagement moving forward.

Findings and Lessons Learned

Each of the four initial countries is at a different stage in the process of developing and implementing their GFF Investment Cases and each has had varied success in their engagement of civil society. While there were significant challenges in identifying civil society representatives at the country level with knowledge of the GFF process, the authors were able to glean important and illustrative findings to inform recommendations for enhancing engagement going forward. In addition, lessons can be learned from the engagement of civil society in other initiatives such as the Global Fund to Fight AIDS, Tuberculosis, and Malaria (the Global Fund), Gavi, the Vaccine Alliance, and the Scaling Up Nutrition Movement (SUN).

Consistent and timely communication with civil society was weak across the four countries, but is an essential ingredient for ensuring meaningful engagement. Country level civil society organizations (CSOs) were largely uninformed about the GFF process in their respective countries. When civil society did receive information, it often came from international partners, or from personal relationships with the government and/or significant efforts on the part of civil society to seek out information. Interviewees also noted that the GFF process seemed rushed and often little advance notice was provided to CSOs about upcoming meetings; it is clear that **more time was needed to get the process right**. CSOs also noted **that adequate resources to support civil society engagement** are critical, and the lack of resources available to support their participation in consultations and their ability to organize and align priorities was a major barrier.

Diverse and balanced representation of civil society is important for inclusivity and leveraging the full range of CSO experiences and knowledge; but, it was clear from interviewees that the selection process for the inclusion of GFF consultations has not been systematic or transparent. Engagement in the GFF to date has been dominated by civil society representatives from international non-governmental organizations (INGOs) and those with prior relationships with government, with limited representation from local CSOs. The **roles and value-add of civil society** must be more clearly defined and recognized. It is clear from other successful **multi-stakeholder and civil society platforms** (e.g. the Global Fund Country Coordinating Mechanisms) that ensuring space, funding, and technical assistance for multi-stakeholder engagement within and across countries is a critical ingredient for building trust and establishing an effective, mutually beneficial relationship between the government and civil society.

Recommendations

Across all four countries, despite significant challenges, civil society has demonstrated interest and determination to meaningfully contribute to the GFF. There are clear opportunities to strengthen civil society engagement and more effectively leverage the value civil society is prepared to contribute.

This report highlights **four key recommendations for strengthening civil society engagement** in the GFF:

1. Implement and track minimum standards for RMNCAH country platforms in GFF countries

Greater clarity on the necessary components of meaningful engagement of diverse stakeholders is necessary in order to ensure valuable and timely contributions by civil society and other partners in the GFF process and outcomes. The proposed minimum standards outline detailed guidelines for inclusiveness and participation, transparency, and independence and accountability. The minimum standards should be adopted by the GFF Investor's Group and other relevant GFF governance bodies. Expectations for implementation of the minimum standards, and accountability for them, should be clearly communicated to country governments by the GFF Secretariat, with resources and technical assistance available to support countries in operationalizing them.

2. Ensure timely and transparent communications about the GFF and its processes

Across countries, the lack of clarity about GFF processes, and potential roles and entry points for civil society engagement, was a pervasive barrier. Providing widely and easily accessible, up to date information on the GFF priorities, processes, policies, and outcomes – at global, regional, national, and sub-national levels – is essential to foster meaningful engagement by civil society and other stakeholders. Recommendations include the development of a dedicated civil society web platform and communications strategy, and civil society participation on the GFF editorial group.

3. Establish and support platforms for civil society to engage in the GFF in a coordinated, representative, and streamlined manner

The absence of appropriately representative civil society focal points for GFF engagement has been a critical challenge to civil society engagement in the GFF process to date. The development of and support for multi-stakeholder and civil society platforms with meaningful civil society representation and participation will be necessary to ensure strategic civil society engagement in the GFF process – providing opportunities for information-sharing and participation, aligning around common priorities, and determining roles and potential contributions of various stakeholders.

4. Resource and support civil society engagement

Without resources to support civil society participation (i.e. communications, travel, and meetings) in the GFF process, there is little hope that they will be able to participate in a meaningful way. Particularly for indigenous CSOs that are located outside of capital cities where consultations typically take place, their representation is unlikely without support. A centralized GFF fund to support a global CSO Coordination Group should be established to ensure CSOs with limited budgets and staff bandwidth are able to participate and contribute their important and diverse perspectives; additional resources should be mobilized for civil society-led accountability efforts in support of the GFF.

Civil society has a critical role to play in bringing knowledge, expertise, and access to a range of communities, which can and should be leveraged to strengthen the GFF process and outcomes. This report highlights lessons learned from civil society engagement in the front runner countries and presents key recommendations to strengthen the GFF process to ensure increasingly strategic and substantive engagement of civil society in the future.

1. Introduction

The goal of the Global Financing Facility (GFF) is to contribute to collective efforts to end preventable deaths of women, adolescents, children, and newborns by 2030 and improve their health and quality of life. The GFF aims to help close the funding gap for reproductive, maternal, newborn, child, and adolescent health (RMNCAH) by serving as “a facility that harnesses the strengths and financial resources of a wide array of partners.” This includes improving efficiencies and mobilizing resources through three key sources: (1) a multi-donor GFF Trust Fund linked to the World Bank’s International Development Association (IDA) and International Bank for Reconstruction and Development (IBRD) low-interest loans, (2) domestic resources (public and private), and (3) additional donor resources (e.g. Gavi, the Vaccine Alliance; the Global Fund to Fight AIDS, TB, and Malaria; bilateral assistance).¹

Civil society has an important role to play in the GFF, bringing knowledge, expertise, and access to a range of communities, which can and should be leveraged to make the GFF process and outcomes stronger. The GFF recognizes the value of engaging civil society in global and country level GFF processes and platforms, as is documented in the GFF Business Plan. However, civil society engagement and involvement in GFF countries to date has been varied, and often quite limited.

To ensure robust civil society engagement in the GFF, and leverage the full contribution of civil society for the valuable resource that it brings, there are important lessons to be learned from the experiences thus far in the front runner countries, and from other global and national platforms.

2. Background

GFF History

The GFF was first announced at the United Nations General Assembly in September 2014 by the World Bank and the governments of Canada, Norway, and the United States. At that time, a business planning process was launched to outline a detailed plan for GFF operations, led by a multi-stakeholder business planning team and an oversight group. The business planning team and oversight group were comprised of a range of stakeholders, including several representatives from civil society (the full list of participating organizations can be found in Annex 1 of the GFF Business Plan). Alongside the business planning process, a series of stakeholder consultations were led by the Partnership for Maternal, Newborn and Child Health (PMNCH), in conjunction with consultations to inform the revised Every Woman Every Child (EWEC) Global Strategy 2.0, and the Global Health Council (GHC).

The GFF Business Plan was completed in May 2015 and the GFF was officially launched in July 2015 at the Financing for Development Conference in Addis Ababa, Ethiopia, with the announcement of additional donors including the Bill & Melinda Gates Foundation and the government of Japan. The Business Plan sets out a vision and structure for the GFF, including how it will be implemented and governed at the global and country levels.

¹ [GFF Business Plan](#), June 2015
[GFF Overview Presentation](#), June 2015

Business Plan: GFF Governance²

- **Global Level.** The main governing body for the GFF is the Investors Group, consisting of representatives from governments of participating countries (ministries of health and finance), bilateral donors, UNICEF, UNFPA, the World Health Organization (WHO), the World Bank, Gavi, the Global Fund, PMNCH, non-governmental organizations (NGOs), and the private sector. The Investors Group members are “senior representatives of governments and partners who bring the expertise required to ensure effective steering of a financing facility...For constituencies in which multiple institutions could participate (e.g. NGOs, the private sector), a transparent selection process will occur.”

Civil society is represented on the Investors Group by Dr. Joanne Carter, Executive Director of RESULTS and RESULTS Educational Fund, and Dr. Mesfin Teklu Tessema, Partnership Leader of Health and Nutrition, at World Vision International. The Investors Group is charged with “ensuring that the GFF succeeds in mobilizing complementary financing for Investment Cases and health financing strategies;” this includes facilitating institutional agreements among partners, building high-level support for the GFF, monitoring performance and ensuring accountability, and ensuring that the GFF is well understood by all relevant stakeholders. The GFF Trust Fund Committee is a subset of the Investors Group made up of donors who contribute to the Trust Fund; the Trust Fund committee is responsible for “ensuring that the GFF Trust Fund uses its resources to provide financing in ways that achieve results while being catalytic and driving sustainability.” The Investors Group and Trust Fund committee also coordinate with and are supported by the PMNCH Board, the World Bank Board, and the GFF Secretariat, as well as the country platform in each GFF country.

- **Country Level.** The GFF Business Plan does not dictate the composition or functioning of country platforms, but it encourages countries to build on existing platforms and ensure that they “embody two key principals: inclusiveness and transparency.” A set of minimum standards was included in the Business Plan to provide additional guidance for countries on how to implement those principals; a revised set of minimum standards has been developed by a group of civil society leaders and proposed to the Investors Group for adoption and implementation.

Business Plan: Multi-stakeholder Engagement³

The Business Plan explains that the GFF is meant to be driven by a multi-stakeholder process in country, that builds on IHP+ approaches, with national governments in the lead and “the involvement of the full set of RMNCAH stakeholders.” Each country develops an Investment Case and a health financing strategy to outline a clear roadmap for fully financed and scaled national RMNCAH plans. Country platforms are expected to give all RMNCAH constituencies the opportunity to contribute to the development and implementation of GFF-supported programming, including meaningful involvement in developing investment cases and

“This includes...ensuring that the full set of stakeholders is invited to consultations on the preparation of the Investment Case and health financing strategy, supplied with all of the relevant documentation needed to be able to contribute technically, and involved in finalizing the documents.”

GFF Business Plan

² [GFF Business Plan](#), June 2015

³ [GFF Business Plan](#), June 2015

health financing strategies, mobilizing resources, providing and coordinating technical assistance, and monitoring and evaluation.

With respect to monitoring and accountability, country platform partners are responsible for ensuring quality assurance of the investment case and health financing strategy (for example through a [Joint Assessment of National Health Strategies Process](#)) and they are tasked with monitoring progress on the targets outlined in the results framework of the Investment Case and targets on domestic resource mobilization.

GFF Countries and Key Progress to Date

Sixty-two countries are eligible to receive funding from the GFF Trust Fund. Of these, four “front runner” countries were identified as pilot countries for the GFF – the Democratic Republic of the Congo (DRC), Ethiopia, Kenya, and Tanzania – and they contributed to the development of the Business Plan in late 2014 and the first half of 2015. Eight countries were announced as “second wave” countries at the GFF launch in July 2015: Bangladesh, Cameroon, India, Liberia, Mozambique, Nigeria, Senegal, and Uganda.

The development of Investment Cases was slated to take place in the four front runner countries alongside the development of the Business Plan or shortly after (i.e. throughout 2015). However, this process has taken different forms and has operated at different paces in each country. Some of the initial experiences and processes in the development of Investment Cases in front runner countries were used to inform the development of the Business Plan (e.g. Tanzania and Kenya, profiled on p. 15 of the Business Plan). In the GFF Business Plan, the recommended steps for the development of Investment Cases include:

- (1) a country consultative process, informed by core analytics;
- (2) analysis and agreement on 2030 results, key obstacles, and priority interventions; and
- (3) costing.

Though the “consultative process” is not clearly defined in the GFF Business Plan, the Business Plan does indicate that “each of the constituencies in the RMNCAH response [should have] the opportunity to contribute fully to...the process of preparing Investment Cases and health financing strategies.”

A multi-stakeholder GFF Learning Workshop – held in Kenya from November 16 to 18, 2015 – was attended by representatives from nine of the twelve GFF countries. The workshop aimed to increase understanding of the GFF approach, discuss and reach consensus on how to best operationalize GFF processes at the country level, and review lessons learned to date from the front runner countries. A civil society pre-meeting was held in Nairobi the day before the Learning Workshop (see page 16 for more information).

Analysis of Civil Society Engagement in the GFF

To better understand the engagement of civil society in the GFF processes to date, RESULTS – a civil society representative to the Investors Group – commissioned Global Health Visions and Catalysts for Change to undertake an analysis of civil society engagement and consultation in the development of Investment Cases in the four GFF frontrunner countries. This analysis provides insights on successes and challenges in civil society engagement reported by key stakeholders to date, as well as lessons learned and recommendations for enhancing civil society engagement moving forward.

The research and analysis was conducted through a desk review and key informant interviews with 33 global, regional, and national level stakeholders, primarily from civil society. (For a complete description of the study methodology, see Annex A.)

3. Key Findings

Civil Society Engagement in the Development of Front Runner Country Investment Cases

Each of the four front runner countries were at different stages in the process of developing their GFF Investment Cases and in their engagement of civil society at the time interviews were conducted. However, the challenges the authors faced in identifying civil society representatives engaged in the process were indicative of the gaps in their engagement and representation overall. The authors were unable to find any centralized documentation of country civil society representatives or engagement, and it was equally challenging to find civil society representatives at the country level with any knowledge of the GFF process. Those who had been designated as representatives by GFF government point people often had little to no knowledge of the GFF process and few had made efforts to seek others' perspectives to contribute to the process. The processes and key barriers and gaps reported by interviewees are summarized for each of the four countries below: DRC, Ethiopia, Kenya, and Tanzania.

DEMOCRATIC REPUBLIC OF THE CONGO

Process for Civil Society Engagement in the GFF

- ❑ **Formal mechanisms for CSO engagement:** As of December 2015, only one GFF consultation had taken place in the DRC, in the summer of 2015. The meeting was comprised primarily of representatives from the Ministries of Health and Finance, the World Bank, several UN agencies, and key donors. One civil society representative attended the meeting, as the president of the multi-sector family planning working group, CTMP (see box below).
- ❑ **Informal mechanisms for CSO engagement:** Prior to the consultation, CTMP held a pre-meeting, supported by AFP, to align around key priorities for family planning within the GFF Investment Case. As a result, the Ministry of Health has recognized priorities from the National Family Planning Strategic Plan for the development of the Investment Case.

"GFF is viewed as a government thing; we are trying to open it up, but we are sometimes fighting to have a place."
DRC Civil Society Representative

Key Barriers and Gaps

- ❑ **Representation:** The only formal representative of civil society in the GFF meeting represented reproductive health and family planning, leaving the perspectives of other health areas under-represented.

- **Communications:** Interviewees noted that CSOs are generally not informed about the GFF broadly, nor the process in the DRC.
- **Weak history of civil society engagement at the policy level:** One interviewee noted that there is no explicit resistance to involving CSOs in the GFF process, but there is no precedent for negotiations between civil society and the government and the capacity of CSOs to do so is quite limited.

Summary

Since the summer consultation, the GFF Investment Case has been put on hold while the country focuses its attention on National Health Development Plan, PNDS (Plan National de Développement Sanitaire), scheduled for completion in the first quarter of 2016. However, following the November GFF Learning Workshop in Kenya, one interviewee noted “the government is starting to see the benefit of engaging NGOs.”

Multi-stakeholder Engagement: DRC’s Family Planning Working Group

The second National Conference on Repositioning Family Planning in the DRC was held in 2009. Following the conference, the Ministry of Health formed the Multi-sectoral Permanent Technical Committee (Comités Techniques Multisectoriels Permanents or CTMP). The CTMP – comprised of ministry leaders, together with local and national NGOs, and international partners – is a technical working group tasked with tracking progress on the recommendations that emerged from the conference.⁴

The explicit commitment of the Prime Minister and buy-in of key ministries, donors, and civil society has paved the way for the CTMP to be an effective platform to increase action and prioritization of family planning. According to interviewees, the CTMP values the contributions of all of its members, including civil society; civil society in particular plays a unique and critical role because of its independence in advocacy and accountability, especially budget tracking. Further, the CTMP has played an instrumental role in unifying financial and technical support from the donors and implementing agencies that have been consistently engaged in family planning in the DRC.⁵ Among its achievements to date, the CTMP played a key role in the development of the National Strategic Plan for Family Planning.

“Decision-making is done in plenary after exchange(s) by the members. The [CTMP] allows us to get many different, diverse opinions for a problem being discussed.”

DRC Civil Society Representative

⁴ *Family Planning, Pillar of socio-economic development in DR Congo*. Final Report on the 3rd National Conference on the Repositioning of Family Planning in DR Congo. December 3-5, 2014. Kinshasa.

⁵ Mukaba, Thibaut et al. *Family Planning Policy Environment in the Democratic Republic of the Congo: Levers of Positive Change and Prospects for Sustainability*. Global Health: Science and Practice 2015 | Volume 3 | Number 2.

ETHIOPIA

Process for Civil Society Engagement in the GFF

- **Formal mechanisms for CSO engagement:** Ethiopia is in the midst of developing the fifth phase of its Health Sector Development Plan, which includes RMNCAH. This phase – known as the Health Sector Transformation Plan (HSTP) – will cover the period 2015/16 – 2019/20, and will ultimately serve as the basis for the GFF Investment Case in Ethiopia. As the finalization of the HSTP has been the primary focus of the government and its key partners, engagement on the GFF process is still in early phases. At the time of writing of this report, one interviewee reported that a GFF consultation had recently been held by the World Bank (in January 2016) with members of the Health, Population, and Nutrition (HPN) development partners' group, which provided a forum for information sharing and discussion about the GFF. The HPN is made up of representatives of Ethiopia's major bilateral and multilateral donors, and includes two civil society representatives. An additional discussion about the GFF was slated to take place at the upcoming meeting of the multi-stakeholder Joint Consultative Forum (JCF) in early February 2016.

Ultimately, the GFF will utilize the JCF and its technical arm, the Joint Country Coordination Committee (JCCC), to support its implementation. The JCF consists of representatives from the government, multilateral and bilateral development partners, health professional associations, the Global Fund CCM, and the two leading civil society consortia – CCRDA and CORHA (which have approximately 360 and 100 NGO members, respectively).

- **Informal mechanisms for CSO engagement:** None to date

Key Barriers and Gaps

- **Space for policy dialogue in the JCF:** One interviewee indicated that civil society perspectives can sometimes take a back seat to those of the donors and government representatives in the forum and that there are limited opportunities for policy dialogue.
- **Limitations on advocacy and accountability:** Ethiopia has policies that limit advocacy by civil society. Additionally, the latest draft of the HSTP highlights a lack of accountability and governance of the Health Sector Development Program at large, as well as challenges with quality assurance and follow up on policy implementation. However, it is notable that this kind of assessment and documentation exists and is publically available.

"Most of the [JCF] agendas are focused on information sharing, not necessarily soliciting input... and feeding these inputs into a policy dialogue with the government."

Ethiopia Civil Society Representative

Summary

Ethiopia has solid structures and plans in place upon which the GFF can build without duplicating efforts. The JCF has a long history of bringing together different stakeholder groups to support implementation and monitoring of health sector plans, and serving as a joint forum for dialogue on policy issues between the government, development partners, and other stakeholders.

"I [have] heard other countries talking about problems they are having with the government, but we don't have those kind of problems."

Ethiopia Civil Society Representative

CCRDA and CORHA serve as powerful linkages between civil society, the government, and other stakeholders – sharing information from JCF meetings (and other multi-stakeholder groups in which they participate) and soliciting input from their member organizations to feedback to the JCF; this bodes well for ongoing civil society engagement in the GFF in Ethiopia. However, there are still opportunities to enhance that engagement and to explore additional approaches for soliciting input and improving communication with civil society.

KENYA

Process for Civil Society Engagement in the GFF

- **Formal mechanisms for CSO engagement:** An online survey about the investment case was sent out to a small number of CSOs early in the GFF process in Kenya. The Kenyan government then held three official civil society consultations on the GFF. The first was held in late January 2015 — with roughly 10-12 civil society representatives in attendance — most of which were international non-governmental organizations (INGOs). A follow up meeting to the initial country consultation was attended by about 50 civil society representatives. A final consultation was held in August 2015, where a draft of the Investment Case was presented and civil society was invited to submit feedback. Some CSOs also obtained draft copies of the Investment Case by email from the Ministry of Health (MoH) to review and provide input on.
- **Informal mechanisms for CSO engagement:** Civil society representatives with insight into the GFF process reported that they obtained information primarily through international partners (e.g. Reproductive Health Supplies Coalition's [Advocacy and Accountability Working Group](#) (RHSC A&AWG), International Planned Parenthood Federation (IPPF)) and through personal relationships with the Ministry of Health and/or World Bank country representatives. Aside from these individual connections, there was little information about the GFF made available to civil society more broadly, until they advocated extensively for their involvement in consultations. Early in 2015, very few civil society members were engaged in the GFF process. However, with support from international partners (e.g. IPPF, Family Care International (FCI), Advance Family Planning (AFP)), CSOs were able to organize themselves and successfully advocate for more civil society engagement in the GFF process, with FCI, AFP/Jhpiego, and HENNET taking the lead; this advocacy was instrumental in ultimately getting a range of CSOs invited to participate in the consultations. In September 2015, HENNET convened 16 CSOs (with funding from FCI) and conveyed recommendations back to the World Bank. With support from other civil society leaders and INGOs, HENNET has continued to lead on CSO collaboration and alignment around the GFF, including early thinking and development of a proposed accountability framework for the GFF in Kenya.

"There was a lot of silence... no one knew what was going on."
Kenya Civil Society Representative

Key Barriers and Gaps

- **Defining the GFF and related roles:** Interviewees reported a lack of clarity on what the GFF is, what is expected of the government and other partners, and how civil society will be involved.

- **Civil society outreach and representation:** Interviewees explained that outreach to engage civil society in the GFF process was primarily based on prior relationships (for example between the Ministry of Health and a handful of NGOs), rather than a systematic, inclusive, and transparent approach. INGOs were over-represented in consultations, with insufficient representation of county-level CSOs; this is a critical gap given Kenya's devolved government system.
- **Communications mechanisms:** Interviewees obtained most of their information about the GFF through international partners and by persistently reaching out to personal contacts at the Ministry of Health and/or World Bank. It is unclear how CSOs were selected to provide input via the online survey and/or the sharing of the draft Investment Case by email.
- **Feedback loops:** Civil society stakeholders reported a lack of follow up on their feedback and engagement, so they are unaware what was decided and how their input has been used.
- **Time and resources:** Interviewees noted that many CSOs (particularly local ones) do not have the resources to support staff time and travel costs for consultations. In addition, there was insufficient clarity and time given for civil society representatives to solicit and synthesize feedback from CSOs and then provide input at appropriate entry points in the process.

"There has been no communication to the citizens and very little communication to CSOs, so the government can operate at its own pace without being accountable."

Kenya Civil Society Representative

Summary

Although some steps were taken to engage and involve civil society in the GFF process, there is much to be learned about how to improve engagement moving forward. Civil society in Kenya is well-organized and has a history of successful advocacy and strong relationships with government. However, while civil society was able to organize themselves and secure some involvement in the development of the GFF Investment Case, they had to rely heavily on international partners and personal connections to do so and the process was not as inclusive or supportive of indigenous organizations as it could have been. One interviewee recently noted that key asks from civil society were ultimately incorporated into the Investment Case, including a recognition of the diverse roles that civil society should play in the GFF, from service delivery to accountability, and an articulation of the need for better transparency, governance, and accountability.

A final draft of the Kenya Investment Case is complete, and the corresponding health financing strategy is in process.

"We have a strong relationship with the government in Kenya, so I'm not sure what happened with the GFF...where the breakdowns happened."

Kenya Civil Society Representative

TANZANIA

Process for Civil Society Engagement in the GFF

- **Formal mechanisms for CSO engagement:** Tanzania completed its first consultation in April 2015, using the Sector Wide Approach (SWAp) coordination mechanism, with 30 participants from the Ministry of Health and Social Welfare, Bureau of Statistics, bilateral donors, and UN Agencies. The process for inviting civil society to participate in the initial meeting remains unclear and no civil society representatives were present. In July 2015, a second consultation was convened by the Ministry of Health and Social Welfare with a number of civil society representatives present, primarily INGOs, as well as representatives from UNICEF, UNFPA, and a representative of private sector service providers; interviewees reported that it was a brief meeting focused primarily on information sharing.
- **Informal mechanisms for CSO engagement:** One of the key CSO representatives engaged in the GFF in Tanzania relied primarily on her “own intelligence” and personal connections at the World Bank to get information and share it with other CSOs. Others were “completely unclear” about what the next steps and processes are going forward. The most relevant and timely information stakeholders relied on was through RHSC’s A&AWG and UN Commission on Lifesaving Commodities working groups (through UNFPA).

"When asked where the CSOs were at the table, there were a lot of blank faces."
Tanzania Civil Society Representative

Key Barriers and Gaps

- **Information sharing:** Interviewees noted that it was very challenging to obtain information on the GFF process without personal relationships with those organizations with connections to the government. Interviewees reported needing to “hunt down” information and “chase after policymakers” to get updated information on the GFF.
- **Civil society representation:** Several interviewees expressed that contributions by advocacy CSOs are undervalued and that preferential treatment was given for engagement with service delivery organizations. Additionally, a number of interviewees indicated that the technical language in meetings made it challenging for local CSOs to engage, and that the government primarily relies on input from INGOs. Finally, given the relative advancement of reproductive health and family planning organizations through the RHSC A&AWG, other health sectors remained under-represented.
- **Time and resources:** Stakeholders reported that most local CSOs do not have the bandwidth and resources to participate in consultations and network with relevant organizations, particularly those far from the main cities. CSOs received last minute invitations to consultations, with insufficient notice to have a representative present. To some, it was unclear if the absence of civil society representatives in the April 2015 meeting was “a deliberate omission or by default.”

"The process was pressured and rushed, and there weren't sufficient consultations because of that time frame."
Tanzania Civil Society Representative

Summary

The process and timeline for the development of the Investment Case and the engagement of civil society in that process remains somewhat unclear. Interviewees indicated that the process was rushed and there was insufficient time for meaningful consultations, perhaps due to pressure for Tanzania to have its Investment Case drafted in time for the Financing for Development Conference in July 2015. There is clear room for improvement, particularly in how local CSOs are informed, invited, and supported to participate in the process.

What has worked particularly well in the case of Tanzania is building on existing platforms and plans, rather than starting from scratch, though it is unclear how much civil society has historically been engaged in those. Tanzania utilized its One Plan II (the costed RMNCAH strategy for 2016-2020) as the basis for the GFF Investment Case and pulled relevant information from the drafted Health Sector Strategic Plan IV and the Big Results Now for Health Initiative. Tanzania has completed a final draft of its Investment Case and health financing strategy and is now focusing its efforts on implementation.

Though the experience of civil society engagement in the GFF has been different in each of the front runner country contexts, some common themes emerged around what has and has not worked well, to date. In Tanzania and Kenya, in particular, time constraints appeared to significantly inhibit the engagement of a broad range of stakeholders; the process seemed rushed, with little time for developing and implementing a strategic engagement plan that would add value to the development of GFF Investment Cases and country platforms. In each of the front runner countries, communication and information sharing with civil society was ad hoc at best (e.g. Kenya), and in some places virtually non-existent (e.g. DRC).

Several countries have clearly aimed to build on existing processes (e.g. Tanzania, Ethiopia), which has been recommended by the GFF to avoid duplicating or recreating systems; however, more care must be dedicated to assessing and improving the inclusivity and transparency of those processes. Finally, in some contexts, civil society successfully organized itself and advocated for representation and engagement in consultations (e.g. Kenya); however, representation focused primarily on the well-organized groups working on family planning and reproductive health in some countries, and often required support from international partners and persistent efforts to leverage personal connections.

Efforts to Improve Civil Society Engagement in the GFF

Since the announcement of the GFF, a number of civil society partners have made a concerted effort to utilize their existing civil society platforms and networks to support civil society engagement at the global and national levels, and to support enhanced information-sharing, alignment, cross-learning, and coordination among civil society at large. Additionally, several individual organizations (e.g. **RESULTS**) have volunteered their own resources to support civil society efforts and engagement in the GFF, such as the development of this report and the engagement of external consultants to support the CSO pre-meeting in Nairobi.

□ **Existing Civil Society Communications and Engagement Platforms**

As noted in the Kenya and Tanzania country summaries above, the **RHSC Advocacy and Accountability Working Group** (together with key INGO members including IPPF, PAI, and AFP) was an early leader in organizing and supporting in-country partners with GFF information, briefs, and aligned messaging and asks. INGO partners also conducted direct advocacy with the World Bank to encourage more civil society involvement and they provided modest funds to support the convening of advocates in-country. The Global Health Council has taken the lead on bringing advocates together with GFF colleagues from the World Bank and USAID to share information, ask questions, and provide input via a series of webinars and the organization of a civil society consultation on the sidelines of the Financing for Development Conference and GFF launch in Addis. The **African Health Budget Network** has leveraged its reach and connections to many national and local CSOs across the Africa region to facilitate information sharing and has developed several position papers in support of enhanced civil society engagement in the GFF. **PMNCH** led a series of multi-stakeholder consultations on the GFF in early 2015 together with consultations set up to inform the development of the Global Strategy 2.0. (See Annex D for a list of key documents developed by partners noted above.)

These partners and others have dedicated significant time and resources to improve information sharing and enhance civil society engagement with the GFF, amidst a fast-paced process that often lacked clear communication about next steps and entry points for stakeholder involvement. Without their efforts, civil society engagement may have been even more limited. Nevertheless, these partners and country level civil society stakeholders largely believe that these efforts have not been sufficient to ensure meaningful civil society engagement in the GFF front runner countries, and they have often been disjointed and reactionary, rather than strategic.

□ **GFF Learning Workshop – Civil Society Pre-Meeting in Nairobi, Kenya**

Prior to the GFF Learning Workshop on November 16-18, 2015, the GFF Investors Group civil society representatives, with support from the GFF Secretariat and PMNCH, convened a one-day pre-meeting on November 14 with 45 civil society representatives from 13 countries, including 10 of the 12 GFF countries. This meeting provided an opportunity for CSOs to share experiences and lessons learned and to develop key recommendations on best-practices for civil society engagement in country platforms, including minimum standards; a small number of civil society representatives then brought these recommendations to the broader GFF Learning Workshop.

□ **Minimum Standards for Country Platforms**

The GFF Business Plan included a summary of minimum standards for country platforms, focused on inclusiveness and transparency. However, a number of CSOs, led by the two civil society representatives to the Investors Group and informed by the November GFF civil society pre-meeting in Kenya, have developed a revised set of minimum standards that include more detailed and robust recommendations for inclusiveness and participation, transparency, and independence and accountability.⁶

Many of the challenges outlined by civil society stakeholders in GFF front runner countries (e.g. information sharing and representation) could be mitigated by adherence to a more robust set of

⁶ Recommended Minimum Standards for RMNCAH Country Platforms to Enhance Participation, Transparency, and Accountability (Annex B), building on: PAI and AHBN. 2015. Raising the Bar: Recommendations to Strengthen Global Financing Facility Minimum Standards to Country Platforms.

minimum standards. The set of standards proposed by civil society leave flexibility for countries to drive the development of their own country platform (or use an existing platform). However, they outline more detailed recommendations and expectations for the structure of country platforms to support the operationalization of key GFF priorities.

In order for countries to operationalize the key GFF principals of inclusiveness and transparency, while ensuring accountability for GFF implementation, civil society strongly recommends the adoption of this set of minimum standards by the GFF Investors Group and other relevant governing bodies. The standards, if adopted, will not only serve to facilitate enhanced civil society engagement GFF country platforms, but also engagement with a range of other key stakeholders (see Recommendations, section 5).

"If it is written in the framework for how to do this GFF process then [the government] will be obliged to follow those guidelines."

National Civil Society Representative

□ **GFF CSO Coordination Group**⁷

At the November civil society pre-meeting, civil society participants called for enhanced communication, coordination, networking opportunities, and support for civil society engagement in the GFF. To facilitate these improvements, civil society leaders are exploring the development of a CSO Coordination Group to:

1. Advocate for civil society priorities and interests
2. Coordinate GFF related civil society efforts to ensure efficient use of limited civil society resources
3. Promote access to information by civil society for optimal engagement in the GFF processes at all levels
4. Act as a resource group for the GFF civil society Investors Group representatives
5. Act as a pool of experts to work on various GFF related working groups
6. Disseminate and consult to broader networks on questions related to the GFF

The group will aim to develop and implement joint strategies for advocacy, support, and capacity strengthening for national civil society engagement efforts, networking, and information sharing. It will also advise the civil society representatives to the Investors Group. The coordination platform will include key global and regional organizations that have been substantively engaged around the GFF to date; civil society representation from Gavi and the Global Fund (which are also part of the GFF) to ensure alignment; and representatives from RMNCAH civil society platforms (or where not available, health or related coalitions) with nationwide representation from GFF countries.

⁷ Taken and adapted from: Draft Concept Note: Strengthening civil society Engagement in the GFF – GFF CSO Coordinating Group (PMNCH, with support from other partners, December 2015); and notes from the CSO Coordination Group Meeting, January 15, 2016.

Other Multi-stakeholder and/or Civil Society Platforms

Other multi-stakeholder and/or civil society platforms offer powerful examples of civil society engagement models that can help to inform future GFF engagement. There may also be existing engagement mechanisms that could be aligned with or leveraged to serve as platforms for addressing RMNCAH. While this report did not seek to conduct a comprehensive review of civil society engagement in other global mechanisms, below we highlight some key findings and lessons from the Global Fund to Fight AIDS, TB, and Malaria, the Scaling up Nutrition (SUN) Movement, and Gavi, the Vaccine Alliance.

□ Global Fund Country Coordinating Mechanisms

Civil Society Engagement in the Global Fund. Since its inception, the Global Fund has sought to establish strong mechanisms for civil society participation. Of 20 voting seats on the Global Fund Board, 10 are designated for “implementer constituencies” with three of these seats held by civil society members. Each board member is supported by a Communications Focal Point, who is “responsible for coordinating information sharing within the constituency.”⁸ Recognizing the critical role of all constituencies, and the particular challenges for “implementing constituencies” to engage at the board level (e.g. size, language diversity, distances between members), the Board designates funds annually to each of the “implementing constituencies” to support communications and meetings, as well as staff time and travel costs.⁹ However, the capacity of civil society Board member delegations to reach and liaise with their full constituencies of CSOs is still often limited by time and funding. According to interviewees, there remains a strong commitment at the highest level to ensure strong civil society engagement in Global Fund, but there is also recognition by the Secretariat and Board that it has room to improve.

At the country level, a set of guidelines drives the structure and operations of Country Coordinating Mechanisms (CCMs).¹⁰ These guidelines include: specific requirements that must be in place for a country to be eligible for funding (including transparent and inclusive elections of non-governmental CCM members and other processes); minimum standards for effective performance of CCMs; and additional standards and recommendations to help optimize CCM operations. Within these guidelines, the involvement of civil society and affected communities, and transparent and inclusive processes, are of paramount importance.

In some countries, the engagement of civil society in the CCM is quite strong, with a respectful relationship between civil society, government, and other stakeholders, as well as transparent communications and strong linkages to the rest of civil society (see box below on Ghana). However, in other countries, civil society engagement is weaker, with reports of CCM civil society representatives being hand-picked by the government and not readily accessible to the broader network of CSOs with an interest in Global Fund issues. One interviewee noted that there is an absence of a formalized system for supporting the CSO representatives to the CCMs, and a lack of knowledge about funding that is available to support CSO engagement and consultations. As a result, CSO

“CCM civil society representatives can apply for grants from the Global Fund to help them consult with a broader [network of] CSOs, but many CSOs don’t even know about this.”
Regional Civil Society Representative

⁸ The Global Fund. [How We Work: Board Constituencies](#).

⁹ The Global Fund, November 2009. [Constituency Funding Policy](#).

¹⁰ The Global Fund, November 2013. [Guidelines and Requirements for Country Coordinating Mechanisms](#).

representatives to the CCMs sometimes “find themselves incapable or ineffective in their roles.”

A recent report on the inclusion of civil society priorities in Global Fund concept notes assesses the impact of country-level civil society consultations on the concept notes submitted by eight African countries to the Global Fund.¹¹ The report findings indicate that those countries with the greatest inclusion of civil society priorities in Global Fund concept notes were those that were also strong on broader indicators related to: democracy, participation, and civic engagement; the ability of civil society to hold government and funding partners accountable; and the frequency of multi-stakeholder consultations and dialogue.

Engagement of Civil Society in the Global Fund: Lessons from Ghana

In Ghana, strong engagement of civil society with the Global Fund has been possible, according to interviewees, because of a robust and well-structured network of civil society coalitions. Civil society has always been well represented on the country’s CCM; the CCM currently has 10 civil society representatives (out of approximately 25 on the CCM) representing a range of constituency groups and affected populations. The CCM funding eligibility requirements are clearly documented online and include “processes for electing non-governmental members by their own constituencies, based on a documented, transparent process.”¹² In addition to strong mechanisms in place at the CCM-level, civil society representatives to the CCM are backed and supported by well-organized and coordinated civil society coalitions, such as the Ghana Coalition of NGOs in Health, Ghana HIV & AIDS Network (GAHNET), and Stop TB Ghana. As one interviewee explained, these CSO coalitions make it easier for the government and civil society representatives to the CCM to communicate with civil society. But, the government must also make it a priority to include civil society activities in the budget, and “donors must insist on collaborative planning,” so that civil society is part of the planning, not just invited to be part of the implementation.

“If we are not an organized group, it’s very difficult for the government, for the Global Fund, to engage with us... In Ghana we are well-organized.”
Ghana Civil Society Representative

□ SUN Movement and the SUN Civil Society Network

Overview of Civil Society Engagement in the SUN Movement. Multi-stakeholder engagement is a key principal of the original SUN strategy, and in all SUN countries national multi-stakeholder platforms have been established or are under development.¹³ Though some conversations suggested that SUN works primarily with governments and there is a need to improve engagement with civil society and other stakeholders, others suggest that civil society engagement has been core to the SUN model since the beginning. Like many initiatives, it is likely that the engagement of civil society varies from country to country. The SUN movement also provides an interesting model for funding civil society participation through the Multi-Partner Trust Fund (MPTF). The fund of over \$10 million USD was established through contributions by three donors: the Swiss Agency for Development and Cooperation, Irish Aid, and the UK Department for International Development. Funds from the MPTF

¹¹ EANNASO (East Africa National Networks of AIDS Service Organizations), August 2015. [Assessing the Inclusion of Civil Society Priorities in Global Fund Concept Notes](#): A desk review of concept notes submitted by Kenya, Malawi, Swaziland, Tanzania, Uganda, Zambia, Zanzibar, and Zimbabwe.

¹² CCM Ghana, [Eligibility Requirements](#).

¹³ SUN, February 2014. [SUN in Practice: Effectively Engaging Multiple Stakeholders](#).

are available to governments, civil society, UN agencies, and other partners who are working to strengthen national, multi-stakeholder participation in the SUN movement.¹⁴

One of the three work streams of the MPTF is “support for mobilizing of civil society to contribute to the goals of the SUN Movement.” Within this stream, there have been 23 funded projects to support civil society engagement to date.¹⁵ An independent evaluation of the MPTF, conducted in 2014, concluded that “the SUN Movement MPTF has played a catalytic role in the establishment and/or strengthening of Civil Society Alliances (CSAs) in 23 countries and the participation of civil society in SUN processes at the country level.”¹⁶

The SUN Civil Society Network. The SUN CSN is comprised of 2,100 CSOs engaged through national civil society alliances in 34 SUN Countries. The national CSAs are intended to support effective implementation of national nutrition plans through targeted advocacy, championing the inclusion of nutrition as a priority in national plans and financing, and holding leaders accountable for nutrition commitments. National CSAs are funded through the MPTF as well as other donors. The CSN is governed by an elected steering group and an operational oversight committee, appointed by the steering group. The secretariat is hosted by Save the Children (UK) and funded by the MPTF (through 2016), the Children’s Investment Fund Foundation, and the German government.

The primary purpose of the CSN is to support the national CSAs with capacity building support and connections to regional and global SUN Movement efforts; however, it also aims to align advocacy and messaging for nutrition at global and national levels.¹⁷ Currently, regional networks for the SUN CSN are also being established. In 2014, a Latin American Network was launched, with others to follow.

Engagement of Civil Society in the SUN Movement: Zambia’s Civil Society SUN Alliance

Zambia’s CSA has emerged as a leader in civil society advocacy and engagement in the SUN Movement at the national level, due to **strong leadership, consistent funding, and the development of a productive relationship with the government** and other stakeholders. As a member of the multi-stakeholder Food and Nutrition Commission, Zambia’s SUN CSA Coordinator ensures that the voices of civil society are heard amongst a government-selected panel of experts. The gradual development of a strong relationship with their government nutrition counterparts, means that the SUN CSA is viewed as a valuable and trusted partner by the government, for providing expertise, acting as nutrition champions, and holding the government accountable. “Our role is reminding the government about the commitments that they have made; but we have a relationship where we rely on each other, for improvement of nutrition in Zambia.”

“We stand to collapse in our activities if we don’t have the funding. The creation of the SUN CSA was essential to fulfilling the vision that SUN set out from the beginning to involve civil society.”
Zambia Civil Society Representative

¹⁴ SUN. [How is the Movement Supported: SUN Movement MPTF](#).

¹⁵ Kate Eardley, World Vision International, November 2015. Discussion note: Strengthening CSO and citizen engagement in national accountability (unpublished).

¹⁶ SUN Multi-Partner Trust Fund, 2014. [Annual Report](#).

¹⁷ SUN Civil Society Network, 2013: [Purpose and Priority Objectives](#).

□ **Gavi and the CSO Constituency Project**

Civil Society Engagement in Gavi. On the Board of Gavi, civil society is represented by an elected board member and alternate, who are supported by a broader CSO Constituency that is led by a CSO Steering Committee. The CSO Constituency was formally organized in 2010 when, as one interviewee noted, Gavi recognized the value add of civil society, particularly in accessing hard-to-reach populations, creating demand, and representing the voices of people on the ground. Globally, the Gavi CSO Constituency is comprised of more than 250 CSOs advocating for expanded access to health services and immunizations. The Steering Committee, comprised of 19 CSOs across 15 countries, guides the CSO Constituency in its organization and activities. The CSO Constituency has identified five key goals to increase access to vaccines at the country-level, along with advocacy recommendations to help tailor the five goals to different contexts. At the national level, Gavi-eligible countries must establish an Interagency Coordination Committee (ICC), which brings together stakeholders from the Ministry of Health, UNICEF, WHO, and civil society.

"Before the CSO Constituency Project there was hardly any involvement of civil society on ICCs... but this is where policy discussions are held, where decisions are made."

Regional Civil Society Representative

The Gavi CSO Constituency Platforms Project. The project was launched in 2011 to support national CSO platforms to work with governments and development partners, and mobilize communities around immunization issues. Managed by Catholic Relief Services with guidance from the CSO Steering Committee, the CSO Constituency Platforms Project operates in 24 countries.¹⁸ In some countries, the project was able to build upon existing civil society platforms focused on health, MNCH, or immunization, and in other countries, where none existed, they have supported the formation of CSO platforms. As one interviewee explained, the project has raised civil society awareness of the existence and importance of the ICC; and, with support behind them from a CSO platform and the Constituency Project, they can serve as an effective watchdog: "the most accountable countries [are] those where civil society [is] on the ICC." The CSO platforms support information flow from the national to the grassroots level and vice versa, and the alignment of CSOs around common positions on policy matters.

"The government says 'there are so many CSOs, we don't know who to engage with.' When we have a platform... there is a representative of civil society."

Regional Civil Society Representative

Engagement of Civil Society with Gavi: Malawi Health Equity Network (MHEN)

MHEN is a CSO health coalition, supported by the Gavi CSO Constituency Platforms Project, which has shown tremendous success in advocacy and accountability, and as a trusted partner in helping to expand the reach of the government's immunization program, for example reaching hard-to-reach communities with immunization training and demand-generation activities. MHEN brings together local CSOs and INGOs to organize, align priorities, and serve as a focal point for the government to engage with civil society. MHEN has a seat on Malawi's multi-stakeholder Health Sector Working Group, and the EPI (expanded program on immunization) sub-technical working group. Through its national steering committee, regional committees, and district focal persons, MHEN facilitates information sharing from the community to the national level and vice-versa; it also has served as the

¹⁸ [Gavi CSO Constituency Platforms Project](#)

recipient of Gavi Health Systems Strengthening (HSS) funds, which it then distributes to CSO members in the form of sub-grants, and provides oversight. The Gavi CSO Constituency Project has been critical for strengthening the capacity of MHEN to serve as an effective network of CSOs with the skills to engage in key government and multi-stakeholder platforms, representing the voice of civil society.

Among MHEN's advocacy successes was a significant budget increase for health in 2014, including \$2.1M in earmarked funds for immunization; MHEN had worked with parliament to provide data about budget shortfalls, and first-hand stories about the negative impact on children's access to critical health services at the community level.¹⁹

"What I have appreciated the most is the capacity building element; the [government] is able to respect us as an entity that knows what we are doing."
Malawi Civil Society Representative

Though this report only began to scratch the surface in terms of describing the full picture and nuances of civil society engagement in other major global initiatives (e.g. Global Fund, SUN, and Gavi), some common themes emerged across platforms and from the global to the national level. It is clear that civil society engagement is facilitated by **strong commitment at the highest level** (e.g. board level), **explicit guidance or requirements for civil society engagement**, and **systematic and consistent financial support and capacity strengthening for civil society platforms** at the global, regional, and national levels. Well-organized and supported civil society platforms appear to be crucial for facilitating alignment of civil society priorities, improving information sharing, and supporting more effective engagement with government and multi-stakeholder national platforms.

4. Lessons Learned

The GFF process in the four front runner countries and at the global level, as well as key examples of other civil society and multi-stakeholder platforms, offer important lessons about what has worked well and what could be improved to ensure more meaningful engagement of civil society in the future. Key themes that emerged from interviews and research echo the findings of numerous partner reports assessing the ingredients of meaningful civil society engagement in the GFF and other global and country processes (see Annex D for a list of several of these reports).

□ **Consistent, timely communication with civil society is required for meaningful engagement**

Some civil society leaders and members of GFF governance bodies have made concerted efforts to reach a range of stakeholders with communications about GFF processes, operations, consultations, and policies; these efforts have been critical to enhancing civil society engagement since the GFF was launched. However, according to interviewees, the reach and results have been inconsistent. Country-level civil society stakeholders were largely unaware and uninformed of the goals, plans, and timelines for the

"Information often trickled out in the early stages. We were trying to act as quickly and efficiently as possible but things evolved extremely rapidly and it was often not clear what the next steps would be."
Global Stakeholder

¹⁹ Gavi CSO Constituency, Catholic Relief Services, June 2015. *A National Challenge: Advocacy Pays Off Big in Malawi*.

GFF process in their respective countries. For those interviewees who were engaged in the GFF in some capacity, there was a lack of clarity about where the process stood and how their input was being integrated. In addition, communication with civil society by country focal points within the government or World Bank country offices was highly limited; when information about GFF processes and meetings was shared with civil society, it was mostly due to personal relationships and/or significant efforts on the part of civil society to seek out information.

□ **Adequate resources are necessary to support civil society engagement**

The absence of dedicated financial resources – to support local, indigenous CSOs to participate in the GFF consultations – was repeatedly highlighted as a barrier to their engagement in the GFF consultation process, and is supported by previous research indicating that it is a common challenge that must be addressed to ensure meaningful civil society engagement.²⁰ As participation in GFF consultations to date has been entirely voluntary, most local CSOs have not had the resources to cover the time and expense of sending a representative to participate in meetings, to stay updated on the evolving process, and to provide ongoing input. Larger, well-resourced INGOs – frequently headquartered in the capital cities – have been better represented in consultations, at least in part because they can incur the human and financial costs of participation. In addition, civil society pointed to the need for resources to organize themselves, facilitate information sharing, and align their key priorities and recommendations.

Civil society representatives engaged in other global initiatives at the national level also noted that financial resources and technical assistance to support them to organize and engage have been essential to ensure they do so effectively, and that they can ensure inclusiveness of a diverse representation of CSOs.

□ **More time is needed to get the process right**

Interviewees also noted that the GFF process seemed rushed and often little advance notice was provided to CSOs about upcoming meetings – sometimes just a day or two in advance – making it impossible for them to attend. The lack of adequate notice was particularly challenging for CSOs based outside of the major cities. This has resulted in underrepresentation of the voices of indigenous NGOs and sub-national CSOs. Interviewees also noted that they were generally given insufficient time to provide feedback on GFF documents, and/or to solicit and synthesize input from other civil society partners.

"With the rapid process, things were happening so quickly. They should have set principles that must have been implemented immediately, from the start."

National Civil Society Representative

□ **Diverse representation of CSOs and transparency in selection of CSO participants is critical**

Both global and country interviewees noted that the selection process for inclusion in the GFF consultations has not been systematic and there has been a lack of transparency around how and by whom civil society representatives are selected.

A number of interviewees noted that the selection of civil society representatives by country government officials has led to representation that has not been as balanced as desired. CSO representatives engaged in the GFF to date seem to be those with prior relationships with the

²⁰ CHESTRAD, June 2015. [*Institutionalize, Resource, Measure: Meaningful Civil Society Engagement in Global and Country Health Policy, Financing, Measurement and Accountability.*](#)

government or who have persistently sought out information or invitations to meetings, following tips from global partners. Both global and country interviewees emphasized the importance of having local civil society representatives – who can serve as “credible brokers” representing their communities – at the table for GFF in-country consultations. In addition to overrepresentation by INGOs, several interviewees noted that civil society representatives engaged in the GFF thus far have predominantly been service providers and implementing organizations, with insufficient representation of advocacy and accountability organizations.

□ **Multi-stakeholder and civil society platforms and learning opportunities are highly beneficial**

Some country civil society representatives indicated that the GFF Learning Workshop in Kenya was a turning point, helping facilitate greater dialogue between civil society and government representatives, helping government representatives understand the value of civil society engagement, and ‘planting the seed’ for future consultations with civil society in their countries.

In addition, it is clear from other successful multi-stakeholder and civil society platforms that ensuring space, funding, and technical assistance for multi-stakeholder engagement within countries is a critical ingredient for building trust and establishing a mutually beneficial relationship between the government and civil society. Civil society coalitions and platforms at the national level have been instrumental in ensuring strong civil society engagement in other initiatives and funding mechanisms such as Gavi and SUN. These civil society platforms are essential for coordinating capacity strengthening, and supporting message alignment and information sharing.

□ **Value-added of civil society must be clearly defined and recognized**

In order for the inclusion of civil society in government processes to be meaningful, the value of what civil society can contribute needs to be well articulated and understood. To date, civil society has perceived their inclusion in the GFF as “checking a box” to show that they were there, instead of a meaningful contribution that would make the process stronger.

Lessons from other multi-stakeholder and civil society platforms indicate that there is real potential for civil society to be treated as a trusted partner to the government, bringing unique perspectives and skills that contribute to meeting shared agendas. Mutual trust and respect between civil society and government is developed through frequent dialogue and takes time to establish; it is often found in those countries with a strong track record of democracy, accountability, and civic participation. However, it is possible in most settings – with resources, technical assistance, and guidelines – to establish and support multi-stakeholder dialogue and country platforms. Recognizing the contributions of civil society to key national, regional, and global processes – as well as defining and ensuring clear entry points for their engagement – has also been highlighted as critical in previous research.²¹

“It was a huge task to understand what the opportunities were for CSO engagement.”
National Civil Society Representative

In particular, country-level civil society interviewees expressed frustration and confusion over what opportunities and distinct role they have to play in the GFF process. The role of civil society in the GFF process has not been clearly defined or structured and multiple partners have called for a clearer and

²¹ CHESTRAD, June 2015. [*Institutionalize, Resource, Measure: Meaningful Civil Society Engagement in Global and Country Health Policy, Financing, Measurement and Accountability.*](#)

more formalized role for civil society in the GFF.²² There is an opportunity to strengthen civil society's participation in the GFF by clearly identifying entry points for engagement and clarifying the roles civil society can play.

5. Recommendations

The four key recommendations outlined below are drawn from the experiences of civil society in engaging with the GFF in the front runner countries, as well as inputs and priorities identified by global, regional, and national level stakeholders interviewed for this project, civil society representatives present at the Nairobi GFF CSO pre-meeting, and the civil society representatives to the Investors Group. The recommendations have been developed in order to strengthen the engagement of civil society in the GFF, with the goal of making the GFF as robust and successful as possible.

Civil society has a genuine interest in supporting the GFF to fulfill its goal to contribute to collective efforts to end preventable deaths of women, adolescents, children, and newborns by 2030 and to improve their health and quality of life. Civil society brings unique experience, skills, knowledge, and connections to communities, which are valuable assets that the GFF should leverage. Contributions that civil society can make to the GFF include:

- ✓ Technical assistance for implementation, especially serving hard-to-reach populations
- ✓ Enhancing communication and transparency with a broader network of stakeholders
- ✓ Presence at sub-national level for implementation and monitoring
- ✓ Representing citizen voices
- ✓ Advocacy and resource mobilization
- ✓ Independent accountability

"Civil society is critical to success... The GFF has an opportunity to get it right from the beginning."
Regional Civil Society Representative

Civil society has already made concerted efforts to organize itself and facilitate engagement in the GFF to date, despite significant barriers. However, the recommendations below will allow the GFF to more meaningfully and systematically engage and leverage civil society, as well as other non-governmental stakeholders. A robust multi-stakeholder process will ensure that the GFF can reach its full potential.

²² RHSC, November 2014. [GFF: All Hands on Deck. Advocacy and Accountability Working Group Position on the Global Financing Facility.](#)

AHBN, 2015. [AHBN Position Paper on the GFF.](#)

IPPF, August 2015. [Briefing on the GFF.](#)

Recommendations for Strengthening Civil Society Engagement in the GFF

- 1) Implement and track minimum standards for RMNCAH country platforms in GFF countries
- 2) Ensure timely and transparent communications about the GFF and its processes
- 3) Establish and support platforms for civil society to engage in the GFF in a coordinated, representative, and streamlined manner
- 4) Resource and support meaningful civil society engagement

1) Implement and track minimum standards for RMNCAH country platforms in GFF countries

Currently, responsibility for the selection and engagement of stakeholders in each country lies primarily with government representatives. Their understanding of how to maximize the value and contributions of non-governmental stakeholders varies, and even for those with experience engaging a range of stakeholders (e.g. Kenya), other pressures such as time constraints may inhibit the realization of best practices. Greater clarity on the necessary components of meaningful engagement – and accountability for those practices – are necessary in order to ensure valuable and timely contributions by civil society and other stakeholders in the GFF process and outcomes. The set of enhanced minimum standards developed by civil society outline detailed guidelines for inclusiveness and participation, transparency, and independence and accountability. They are designed to delineate concrete steps that can be taken to:

- Ensure that country platforms have strong representation from a range of non-governmental stakeholders (including civil society, the private sector, health care professional associations, UN agencies, and more); that those representatives are selected through a transparent, participatory process; and that they fulfill their responsibilities to speak for and communicate with the broader constituency that they represent.
- Mitigate challenges faced to date related to transparent, timely, and consistent information sharing.
- Ensure that an accountability strategy and working group are established to monitor implementation of the Investment Case, in alignment with other national accountability processes; that an independent review of adherence to country platforms' operational procedures is conducted at least every two years; and that a grievance mechanism be established to receive and facilitate concerns related to the minimum standards.

The minimum standards document should be endorsed and adopted by the GFF Investors Group, Trust Fund Committee, and Secretariat. Expectations for implementation of the minimum standards should be clearly communicated to country governments by the GFF Secretariat, with resources and technical assistance available to support countries in operationalizing them. The minimum standards should be incorporated into the GFF's annual Quality Assurance (QA) review. Finally, civil society has a critical, independent role to play in tracking adherence to minimum standards by countries (i.e. through country or regional scorecards – see AHBN proposed scorecard, Annex C) and publishing progress towards meeting those standards in an annual report.

Actions	Persons Responsible
<ul style="list-style-type: none">Commit to adopt proposed minimum standards for GFF country platforms	<ul style="list-style-type: none">GFF Investors Group, Trust Fund Committee, and Secretariat; country

government focal points	
<ul style="list-style-type: none"> Clearly communicate expectations for implementation of minimum standards to country governments and provide support for their operationalization 	<ul style="list-style-type: none"> GFF Secretariat
<ul style="list-style-type: none"> Incorporate minimum standards into annual QA review process 	<ul style="list-style-type: none"> GFF Secretariat
<ul style="list-style-type: none"> Implement minimum standards at the country level 	<ul style="list-style-type: none"> Country government in collaboration with non-governmental partners and support from GFF Secretariat
<ul style="list-style-type: none"> Track and report at least annually on progress implementing the minimum standards 	<ul style="list-style-type: none"> CSO Coordination Group with other non-governmental partners

2) Ensure timely and transparent communications about the GFF and its processes

The lack of understanding by non-governmental stakeholders about what the GFF is, how it is being implemented, and what mechanisms exist for them to engage in the process was a major barrier in the front runner countries. Broadly disseminated, publically available, consistently updated, locally relevant information on the GFF priorities, processes, policies, and outcomes – at global, regional, national, and sub-national levels – are critical to facilitate meaningful engagement by civil society and other stakeholders. Mechanisms and opportunities for engagement with civil society (and other non-governmental stakeholders) should be clearly communicated. Both INGOs and national/local CSOs should have an opportunity to shape and influence GFF strategies and platforms for communications to ensure that they will meet the needs of the full civil society constituency. This kind of open, transparent communication will facilitate greater ‘buy-in’ and participation in the GFF by a wide-range of stakeholders, which will ultimately serve to make the GFF stronger.

A civil society representative to the GFF editorial group should be selected by civil society, to provide guidance and input to the development of the GFF website and communications strategy; this person’s role would be part of a larger effort to comprehensively solicit input from the broader CSO constituency, and feed back decisions and other key information. In addition to a centralized GFF-run resource, civil society has highlighted the need for an independent, interactive, dedicated web platform for them to share information, tools, experiences, and lessons learned about the GFF.

Actions	Persons Responsible
<ul style="list-style-type: none"> Develop and implement a civil society communications strategy that is complementary to the GFF communications strategy and ensures clear input, feedback, information sharing, participation, and consultation with and by civil society , at global, regional, and national levels. 	<ul style="list-style-type: none"> CSO Coordination Group with support from the GFF Secretariat, and regional and national partners
<ul style="list-style-type: none"> Engage an appropriate civil society representative to participate on the GFF editorial group, to provide input into the GFF communications strategy and on the central GFF website. 	<ul style="list-style-type: none"> GFF Secretariat; CSO Coordination Group, and GFF civil society representatives to the Investors Group

- Develop and manage an independent, interactive, dedicated civil society web platform.
- CSO Coordination Group

3) Establish and support platforms for civil society to engage in the GFF in a coordinated, representative, and streamlined manner

One of the greatest barriers referenced by GFF representatives to their engagement with civil society was the lack of clearly identified civil society focal points for them to engage with during the GFF process; similar experiences were reflected by stakeholders engaged in other global initiatives. Civil society stakeholders who were interested in engaging with GFF processes faced challenges of a rushed process, with little advance notice given before consultations, and the availability of mechanisms for them to adequately engage in the GFF development process in country. The development of and support for multi-stakeholder and civil society platforms are critical to ensure meaningful and strategic civil society engagement in the GFF process, providing opportunities for information sharing and participation, alignment around common priorities, and the determination of roles and potential contributions of different players. Models and lessons learned from platforms utilized by the Global Fund, GAVI, the SUN movement will be important to consider in this process.

A CSO Coordination Group at the global level will help to streamline communications from the global to the regional and national levels, and vice versa. It will serve as a centralized body for coordinating the broader civil society constituencies, aligning civil society priorities and feeding them into the civil society representatives to the Investors Group. Additionally, a CSO Coordination Group can serve to support civil society coalitions and alliances at the national level by providing tools, facilitating technical assistance, helping ensure that their engagement is a GFF priority, and supporting the sharing of lessons learned across countries and regions.

Additional opportunities for cross-country multi-stakeholder dialogue – like the Kenya GFF Learning Meeting – should be supported with resources and technical assistance, providing opportunities not just for information sharing but also for stakeholders beyond government and development partners to provide input and lend their expertise to improve the GFF process. Civil society should have the opportunity to select its own representatives to participate in global and national multi-stakeholder platforms and cross-country learning meetings through a democratic and transparent process. At the same time, government capacity should be strengthened to implement and lead effective, multi-stakeholder platforms with meaningful participation from a range of stakeholders, in line with the minimum standards (Recommendation 2). This will lead to stronger Investment Cases and stronger multi-stakeholder implementation strategies and accountability mechanisms. Whenever possible, existing country platforms should be leveraged, and coordination among issue-specific groups should be made a top priority.

"When a multi-stakeholder platform is being put in place, you need to manage expectations about what the roles of different partners [are], why the platform is here and what benefit it brings to the country; same for civil society platforms - what are the roles and expectations of each of the partners."
National Civil Society Representative

Actions	Persons Responsible
<ul style="list-style-type: none"> Support the creation and operations of a CSO Coordination Group that includes representatives from GFF countries and other health-related civil society platforms (e.g. Gavi, Global Fund, SUN, FP2020) 	<ul style="list-style-type: none"> GFF Secretariat; CSO Coordination Group
<ul style="list-style-type: none"> Create and support opportunities for cross-country, multi-stakeholder learning (like Kenya GFF Learning Meeting) 	<ul style="list-style-type: none"> GFF Secretariat
<ul style="list-style-type: none"> Learn from, build upon, and align with existing national multi-stakeholder and civil society platforms (e.g. those utilized for Gavi, Global Fund, SUN, FP2020, and RMNCAH) 	<ul style="list-style-type: none"> GFF Secretariat; country governments; CSO Coordination Group; donors and agencies
<ul style="list-style-type: none"> Use the minimum standards to help ensure meaningful, representative, transparent engagement of civil society within country platforms 	<ul style="list-style-type: none"> Country governments; national civil society platform leads

4) Resource and support civil society engagement

Civil society representatives – particularly local CSOs in the GFF countries – often operate with minimal budgets and therefore lack the resources to engage in meetings and efforts beyond those that they are directly funded to carry out. Proper engagement in and representation of civil society takes time and resources for communications, travel, convenings, and staff time – particularly to ensure representation of stakeholders beyond the capital cities in GFF countries. An Investment Case for civil society engagement in the GFF countries should be developed, outlining benefits and costs of such engagement. Those with the resources to support such efforts need to recognize and fill this current gap, which is a prerequisite for meaningful civil society engagement in the GFF.

In order to ensure a coordinated and focused mechanism for donors to support civil society and for civil society to access such resources, a centralized GFF fund to support a global CSO Coordination Group should be established to support the recommendations in this report. An additional, non-GFF funded resource is also needed to support civil society's engagement in accountability efforts at the national level in coordination with other similar initiatives. If such funding were to be funneled through the country government, steps must be taken to preserve its independence and neutrality with regard to civil society beneficiaries.

"Things only get done, actual advocacy only takes place, when you have a budget with concrete deliverables."
National Civil Society Representative

Actions	Persons Responsible
<ul style="list-style-type: none"> Develop an investment case outlining support needed by civil society to engage in the GFF process. This case should clearly outline the benefits and contributions that result from strong civil society participation in national and global planning and policy analysis, implementation and technical assistance, and accountability. 	<ul style="list-style-type: none"> Consultant(s) hired by the GFF Secretariat in coordination with CSO Coordination Group

<ul style="list-style-type: none"> • Allocate GFF and other funds to support civil society engagement as outlined in this report 	<ul style="list-style-type: none"> • GFF Investors Group, GFF Trust Fund Committee, other GFF partners
<ul style="list-style-type: none"> • Allocate non-GFF resources to support civil society's critical role in ensuring accountability for the GFF and other similar initiatives 	<ul style="list-style-type: none"> • GFF Secretariat, country governments, CSO Coordination Group, donors and agencies

6. Conclusion

The GFF is a potentially powerful new component of the global health landscape, offering opportunities for greater resources and impact across the RMNCAH continuum. In order to achieve its stated goals, effective and consistent engagement by civil society will be crucial. While the GFF has recognized the value of civil society engagement in GFF processes, those efforts are still nascent and many steps can be taken to make those processes more representative, meaningful, and result in more effective outcomes in the future.

The minimum standards proposed by civil society stakeholders should be adopted and implemented, with adherence and outcomes supported and reported publicly. Civil society requires sufficient resources and support to create or build upon existing representative bodies and processes in order to engage with governments in a streamlined and effective manner.

Meaningful engagement of civil society and other non-state actors in the GFF will result in a more robust, informed, and accountable outcomes for all. The consideration of and action on the recommendations in this report by the GFF will be a critical step in this process.

Annex A: Study Methodology

Objectives

The project sought to achieve the following objectives:

1. Identify the primary mechanisms that have been used to engage civil society in the development of GFF Investment Cases in the four front runner countries.
2. Document the successes and challenges for civil society in engaging with the GFF to date in the front runner countries; explain how these successes and challenges have been supported (or not) by global and regional communications and engagement platforms.
3. Briefly identify other multi-stakeholder national platforms that have successfully engaged civil society, and document key lessons that can be learned from them.
4. Make recommendations to enhance civil society engagement in the GFF, including defining the value-add of civil society in GFF processes, and recommending standards, platforms, and/or accountability mechanisms for ensuring meaningful civil society engagement.

Methods

The authors' review and analysis included the following components:

1. **Desk research:** The authors completed a review of key documents and relevant reports and resources produced by the GFF, as well as resources developed by partners to support and inform civil society engagement in the GFF process, and/or to support meaningful civil society engagement writ large.
2. **Key informant interviews:** Between October 2015-January 2016, 33 in-depth, confidential interviews were conducted by phone or in-person with key informants.

Key Informants	
Global Stakeholders	12
Regional Civil Society Representatives	4
National Civil Society Representatives	17
TOTAL	33

Global, regional, and country level stakeholders were asked to share their perspectives on civil society engagement in the GFF process to date in the four front runner countries. Interviewees were asked to describe their own engagement with the GFF and to identify mechanisms or models of engagement that have been particularly successful. They were also asked about challenges and potential missed opportunities for civil society engagement, and to identify entry points or approaches to strengthen civil society engagement going forward. More broadly, interviewees were asked to consider the essential ingredients of and potential barriers to meaningful civil society engagement, and to provide recommendations on how to best mitigate challenges and leverage opportunities to strengthen civil society participation in GFF processes.

3. **GFF Learning Meeting – Civil Society Pre-Meeting in Nairobi, Kenya:** As noted earlier, on November 14, 2015, the GFF Investors Group civil society representatives, with support from the GFF Secretariat and PMNCH, convened a one-day meeting with civil society representatives. Its purpose was to provide a forum for civil society to share experiences and lessons learned, and to develop key

recommendations for the GFF Learning Meeting on November 16-18 on best-practices in civil society engagement in country platforms. The authors utilized this meeting as an additional opportunity to gather and document civil society engagement in the GFF to date, and perspectives and recommendations for enhancing engagement moving forward.

Limitations

The lessons learned and recommendations provided here were the result of a limited number of interviews in a small number of countries. It also should be recognized that the Business Plan for the GFF was being developed in parallel to the country engagement process, so clarity and expectations were not yet solidified or communicated. The authors did not interview the government or World Bank representatives who ran the country engagement processes, so this report does not reflect meetings or activities that took place of which the civil society representatives interviewed were unaware. The recommendations made here reflect perspectives and self-reports that were not verified.

Annex B: Minimum Standards

Recommended Minimum Standards for RMNCAH Country Platforms to Enhance Participation, Transparency, and Accountability

DRAFT 2/4/2016

The GFF requires that all RMNCAH country platforms in GFF countries embody two principles of the Business Plan: inclusiveness and transparency. To support countries to operationalize these principles, the GFF has established minimum standards that countries are expected to adhere to. These can be found in the GFF Business Plan Annex 6. “Minimum standards for country platforms”.

To strengthen the minimum standards, civil society organizations (CSOs) engaged in the GFF processes propose expanding on the existing principles of inclusiveness and transparency, and adding principles of independence and accountability. They provide below an enhanced list of Minimum standards for country platforms.²³

Proposed minimum standards for country platforms:

Inclusiveness and participation

1. Key constituencies for the country platform will include: government (both national and decentralised, as relevant); civil society²⁴; private sector; affected populations; technical agencies; multilateral, bilateral agencies and foundations; parliamentarians, and health care professional associations.
2. All platform members constituencies should be selected in a participatory and transparent manner. They should be identified by their own constituencies based on selection criteria developed and made public by existing broad, effective, and inclusive platforms, where possible covering the continuum of care. Given the diversity of civil society, country platforms should include at least two seats for CSOs, representing broad coalitions.
3. Terms of reference (TORs) of selected country platform representatives will include systematic consultation with groups within and outside their constituency for broader input. Constituency specific consultations and updates should be organized on an on-going basis and at regular intervals. The platform should optimally include financing for constituency engagement as required. If financing from the platform is not available, financing should be sought from the GFF Trustfund or partners.
4. A Stakeholder Engagement Plan (SEP) for engaging with a broader range of stakeholders that are not part of the country platform should be endorsed by the country platform. The draft of the SEP should be made public, and the country platform should seek the views of stakeholders that are not members of the country platform on its content and implementation. The SEP might include details on constituency specific outreach, but should go beyond to engage groups that might not be represented on the country platform.
5. Participation in the country platform implies full and active involvement of all constituencies, from the beginning of the process, including:
 - a. Preparing and implementing the Investment Case (IC) and the health financing strategy,

²³ The below recommendations result from the CSO Pre Meeting to the Global Financing Facility Learning Meeting, organized by the GFF Investors' Group CSO representatives, with support from the Partnership for Maternal, Newborn & Child Health on 14 November 2015 in Nairobi, Kenya. The list reflects perspectives from 45 representatives from 13 countries, including ten of the twelve GFF countries. It also builds upon: PAI and AHBN. 2015. Raising the Bar: Recommendations to Strengthen Global Financing Facility Minimum Standards to Country Platforms.

²⁴ Defined as not-for-profit non-governmental organizations, community-based organizations and faith-based organizations

- including active participation in meetings, receiving and contributing to the preparation of materials (reviewing and inputting on drafts, being part of planning processes, etc), determining the approach to quality assurance, review drafts, endorsing the final version and implementing activities as relevant.
- b. Agreeing to major changes to the IC and/or health financing strategy in the course of implementation.
- c. Agreeing to the approach to technical assistance and capacity building to support implementation of the IC and health financing strategy.
- d. Receiving and reviewing data about performance in the course of implementation.
- e. Reporting on implementation.
- f. Being fully engaged in development and operationalizing of accountability mechanisms for tracking implementation and financing flows.

Transparency

The following documents should be made publicly available on MOH and GFF websites and should be disseminated to a listserve (with voluntary registration) within the following timeframes; for documents approved by the country platform, within a month of approval; for meeting summaries and action points, within a month of the meeting; and for documents that are being tabled for discussion or review, at least two weeks before relevant meetings or deadlines:

1. Country platform operational procedures, including:
 - member selection processes, criteria, TORs, length and replacement of members;
 - current list of members (with names/designations, contact details, agreed roles/responsibilities);
 - frequency of meetings and timelines for provision of documents ahead of and after meetings;
 - voting rules including quorums and stakeholder engagement plan.
2. Updates on all meetings and opportunities for input, including:
 - minutes and attendees of meetings at which Investment Cases and health financing strategies were developed (including meeting attendees and documentation explaining decisions around the prioritization of particular interventions/approaches);
 - minutes and attendees of all further meetings, logging agreed actions following implementation reviews of the Investment Case, as well as responsible persons (including their functions- to allow follow up in case of turnover) and timelines; and
 - versions of investment cases and documents made available for input, with modality for input and timelines (for instance if placed online for a web-based consultation) – and updated versions including rationale for how input was included or why it was not.
3. The final Investment Case and health financing strategy, including results framework and costed implementation plan.
4. Agreements between financiers about which elements each will cover.
5. Disbursement data from each financier and budget analysis of government funds covering allocation, disbursement and utilisation/absorption.
6. Progress reports on the achievement of targets in the results framework, compiled using high-quality, referenced data and evidence from multiple sources (including independent sources).
7. Evaluation reports, compiled using high-quality, referenced evidence from different sources.
8. Quality and timely progressive reports with articulated evidence based results.


For all country platform meetings, ensuring:

1. All consultation meetings are posted at least 2 weeks in advance on the GFF and MOH websites and through email – including all documents, and a list of participants with emails so that representatives can be reached ahead of time
2. Where possible meetings are available live through webcast for those who want to listen.

Independence and Accountability

1. Country Platforms should align their accountability and monitoring processes with other national processes in order to strengthen national capacity for monitoring and reporting. In those countries that choose to do so annual health sector reviews should be used as a forum to jointly review Government- and independently-provided reports on GFF results, and should include all constituencies outlined under Inclusiveness and Participation above, otherwise other mechanisms to review reports on GFF results need to be put in place
2. An independent review of the adherence to the country platforms' own operational procedures should be conducted and made public at least every two years.
3. The country platform should propose and implement a grievance mechanism to receive and facilitate resolution of concerns and grievances from project affected parties related to the minimum standards. Should the country platform not respond to grievances in a timely manner, these should be directed to an ombudsman, according to a grievance mechanism and redress policy endorsed by the GFF Investors Group.
4. The country platform will create an accountability working group to develop an accountability strategy for the implementation of the investment plan. This strategy will take into account centralized and decentralized levels. It will prioritize national and local community-based accountability through the use of scorecards and citizens' hearings and will also include budget analysis and advocacy. The implementation of this strategy will be funded independently from the GFF.

Annex C: Proposed/Draft AHBN Regional Scorecard for Minimum Standards

SCORECARD TO TRACK IMPLEMENTATION OF RECOMMENDED MINIMUM STANDARDS FOR RMNCAH COUNTRY PLATFORMS IN GFF COUNTRIES IN AFRICA	COUNTRY PLATFORM INCLUDES ALL CONSTITUENCIES	NON-STATE REPRESENTATION CHOSEN IN TRANSPARENT & PARTICIPATORY PROCESS	STAKEHOLDER ENGAGEMENT PLAN IN PLACE & IN OPERATION	ALL CONSTITUENCIES INVOLVED IN RMNCAH INVESTMENT CASE & HEALTH FINANCING STRATEGY	GFF COUNTRY DOCUMENTS PUBLICALLY AVAILABLE	FINANCIAL INFORMATION RELATING TO GFF ARE PUBLICALLY AVAILABLE	ACCOUNTABILITY WORKING GROUP & ACCOUNTABILITY STRATEGY IN PLACE	INDEPENDENT ACCOUNTABILITY REPORT PRODUCED ANNUALLY & PUBLICALLY AVAILABLE	MECHANISM IN PLACE TO RESOLVE GRIEVANCES	<div>KEY</div> <div>MINIMUM STANDARDS MET</div> <div>MINIMUM PARTIALLY STANDARDS MET</div> <div>MINIMUM STANDARDS NOT MET</div> <div>THE SCORECARD TRACKS PROGRESS AGAINST THE RECOMMENDED MINIMUM STANDARDS FOR REPRODUCTIVE, MATERNAL, NEWBORN, CHILD AND ADOLESCENT HEALTH COUNTRY PLATFORMS IN GLOBAL FINANCING FACILITY COUNTRIES IN AFRICA.</div> <div>INDICATORS ARE BASED ON THE RECOMMENDED MINIMUM STANDARDS PROPOSED BY CIVIL SOCIETY ENGAGED IN THE GFF PROCESSES.</div> <div>THE AFRICA HEALTH BUDGET NETWORK WILL LEAD THE PROCESS OF DEVELOPING THESE REGIONAL SCORECARDS BI-ANNUALLY. THE SCORECARDS WILL BE COMPLETED USING INFORMATION GATHERED FROM GFF WEBSITES AND COUNTRY PARTNERS.</div> <div><div></div><div>AFRICA HEALTH BUDGET NETWORK</div><div>WEB: WWW.MAMAYE.ORG/BUDGET-NETWORK EMAIL: AHBN@EVIDENCE4ACTION.NET</div></div>
	DRC									
	CAMEROON									
	ETHIOPIA									
	KENYA									
	LIBERIA									
	MOZAMBIQUE									
	NIGERIA									
	SENEGAL									
	TANZANIA									
	UGANDA									

WE CALL ON

GOVERNMENT

TO ENSURE

INCLUSIVE

TRANSPARENT

INDEPENDENT

ACCOUNTABLE

RMNCAH

COUNTRY

PLATFORMS

Implementing the Scorecard

Scoring system for the proposed scorecard to track implementation of recommended minimum standards for RMNCH country platforms in GFF countries in Africa

The proposed regional scorecard is designed to track progress against the recommended minimum standards for RMNCAH country platforms in GFF countries in Africa. The indicators are based on the recommended minimum standards proposed by civil society engaged in the GFF processes. Africa Health Budget Network (AHBN) will lead the process of developing these regional scorecards bi-annually. The scorecards will be completed using information gathered from GFF websites and country partners. The table below outlines how the countries will be scored against each indicator.

	Green	Yellow	Red	Information Source
Is the country platform inclusive of all constituencies?	<ul style="list-style-type: none"> ✓ At least 2 CSO representatives; AND ✓ At least 1 representative of private sector practitioners; AND ✓ At least 1 representative of health care professional associations; AND ✓ At least 1 female representative. 	<ul style="list-style-type: none"> ✓ 1 constituency missing 	<ul style="list-style-type: none"> ✓ More than 1 constituency missing 	<ul style="list-style-type: none"> ✓ Details of members of country platforms; ✓ Minutes of country platform meetings.
Is the process of identifying constituency members participatory and transparent?	<ul style="list-style-type: none"> ✓ Constituency representatives identified by their self-identified constituency; AND ✓ Constituency representatives identified based on publically available selection criteria and selection process. 	<ul style="list-style-type: none"> ✓ Constituency representatives identified by constituency members; OR ✓ Constituency representatives identified based on publically available selection criteria and selection process. 	<ul style="list-style-type: none"> ✓ Constituency representatives <u>not</u> identified by constituency members; AND ✓ Selection criteria and selection process <u>not</u> publically available. 	<ul style="list-style-type: none"> ✓ Interview with constituency members.
Is the stakeholder engagement plan in place and in operation?	<ul style="list-style-type: none"> ✓ Draft SEP developed and endorsed by all constituencies of the country platform; AND ✓ The SEP includes plans to engage constituencies as well as groups not represented on the country platform; AND ✓ Funding is available for constituency engagement. 	<ul style="list-style-type: none"> ✓ Draft SEP developed and endorsed by all constituencies of the country platform; OR ✓ The SEP includes plans to engage constituencies as well as groups not represented on the country platform. 	<ul style="list-style-type: none"> ✓ The SEP has been developed but has not been endorsed by all constituencies; AND ✓ The SEP has been developed but does not include plans of how to engage constituencies or other groups; OR ✓ The SEP has not been developed; 	<ul style="list-style-type: none"> ✓ Stakeholder Engagement Plan
Have all constituencies	<ul style="list-style-type: none"> ✓ All constituency representatives 	<ul style="list-style-type: none"> ✓ All constituency representatives 	<ul style="list-style-type: none"> ✓ Constituency representatives did <u>not</u> 	<ul style="list-style-type: none"> ✓ Minutes of meetings;

contributed to the preparation and implementation of the RMNACH investment case and health financing strategy?	<p>contributed to the preparation of the investment case and health financing strategy by participating in meetings, reviewing and inputting on drafts and endorsing the final versions; AND</p> <ul style="list-style-type: none"> ✓ Once finalised, all constituency representatives contribute to the implementation of the investment case and health financing strategy, as relevant. 	<p>contributed to the preparation of the investment case and health financing strategy; OR</p> <ul style="list-style-type: none"> ✓ Once finalised, all constituency representatives contribute to the implementation of the investment case and health financing strategy, as relevant. 	<p>contribute to the preparation of the investment case or health financing strategy; AND</p> <ul style="list-style-type: none"> ✓ Constituency representatives did <u>not</u> contribute to the implementation of the investment case or health financing strategy. 	<ul style="list-style-type: none"> ✓ Final versions of documents; ✓ Implementation plans.
Are GFF country documents publically available?	<p>All of the following documents available online (e.g. MoH or GFF website) within one month of completion / approval or at least 2 weeks before relevant meeting:</p> <ul style="list-style-type: none"> ✓ Country platform operational procedures; ✓ Details of members of country platforms; ✓ Meeting reports/minutes; ✓ Final investment case including the results framework; ✓ Final health financing strategy; ✓ Progress reports by country platform. 	<ul style="list-style-type: none"> ✓ One of the documents not available on line; OR ✓ All documents available online but not within the specified time period (one month of completion / approval or at least 2 weeks before relevant meeting). 	<ul style="list-style-type: none"> ✓ More than one of the documents not available on line. 	<ul style="list-style-type: none"> ✓ MoH website ✓ GFF website
Is the financial information relating to GFF publically available?	<ul style="list-style-type: none"> ✓ Annual Breakdown of GFF finances allocated, disbursed and spent in line with the investment case is available on line (MoH or GFF website). 	<ul style="list-style-type: none"> ✓ Annual breakdown of GFF allocations available online but no information on disbursements or expenditure. 	<ul style="list-style-type: none"> ✓ Financial information not available. 	<ul style="list-style-type: none"> ✓ MoH website ✓ GFF website

Has an accountability working group been established and an accountability strategy in place?	<ul style="list-style-type: none"> ✓ Accountability working group established with wide constituency representation; ✓ Accountability strategy developed to monitor implementation of the investment plan; ✓ Funding secured for the implementation of the strategy. 	<ul style="list-style-type: none"> ✓ Accountability working group formed with wide constituency representation; AND ✓ Strategy not developed; OR ✓ Funding for implementation not secured. 	✓ Accountability working group not established.	✓ Accountability strategy
Is an independent accountability report produced annually and publically available?	<ul style="list-style-type: none"> ✓ Independent accountability report produced annually; ✓ Report has adequate level of detail; ✓ Summary of report shared in hard copy with key stakeholders (e.g. policy makers and media) 	<ul style="list-style-type: none"> ✓ Independent accountability report produced; AND ✓ Level of detail is inadequate; OR ✓ Summary of report has not been shared in hard copy with key stakeholders. 	✓ Independent accountability report not produced.	✓ Accountability report
Is a mechanism in place to facilitate resolution of grievances?	<ul style="list-style-type: none"> ✓ The country platform has proposed a grievance mechanism; AND ✓ The country platform responds to grievances in a timely manner. 	✓ There is a proposed grievance mechanism but is not operational.	✓ There is no grievance mechanism in place.	✓ Interviews

Annex D: Relevant Partner Documents

In addition to the resources developed by the GFF Secretariat,²⁵ the following is a list of resources developed by partners to support and inform civil society engagement in the GFF process, and/or to support meaningful civil society engagement broadly.

Author / Date	Document	Summary	Link
CSO Resources			
Reproductive Health Supplies Coalition (RHSC) (November 2015) and World Bank (December 2015)	Letter to World Bank President Jim Kim on accountability and CSO participation in the Global Financing Facility (GFF) process	In November 2015, the Advocacy and Accountability Working Group of the RHSC sent a letter to World Bank Group President Jim Yong Kim and the members of the GFF Investors Group, emphasizing the importance of rights-based investments in sexual and reproductive health as a key part of the country Investment Cases and service delivery under the GFF. In December, the World Bank – together with the GFF Investors Group – issued a response to the letter.	http://www.rhsupplies.org/fileadmin/uploads/rhsc/Global_Financing_Facility/Resources/Letter_and_response.pdf
RHSC (November 2014)	GFF: All Hands on Deck. Advocacy and Accountability Working Group Position on the Global Financing Facility	The Reproductive Health Supplies Coalition's Advocacy and Accountability Working Group developed this position paper to call for the GFF to include sufficient attention and dedicated financing to family planning and SRHR. The paper also calls for a formal role for civil society in the design and establishment of the GFF.	http://www.rhsupplies.org/fileadmin/uploads/rhsc/Working_Groups/Advocacy_and_Accountability/Documents/Advocacy_and_Accountability_Working_Group_Position_on_the_Global_Financing_Facility.pdf
PAI, African Health Budget Network (AHBN) (October 2015)	Raising the Bar: Recommendations to Strengthen the GFF Minimum Standards for Country Platforms to Enhance Participation,	This position paper provides recommendations for strengthening the minimum standards for country platforms. This paper has informed consultations with the Partnership for Maternal, Newborn, and Child Health (PMNCH) CSO constituency, the Reproductive Health Supplies Coalition, and online consultations with AHBN members.	http://pai.org/wp-content/uploads/2015/11/Raising-the-Bar.pdf

²⁵ Available here: <http://globalfinancingfacility.org/>

Transparency, and Accountability			
International Planned Parenthood (IPPF) (October 2015)	IPPF Briefing: The World Bank Group's funding for sexual and reproductive health	This briefing is intended to arm advocates and decision makers with up-to-date information on financing of SRHR by the World Bank Group. It provides a set of key recommendations aimed at multilaterals to achieve sustainable financing for SRHR. The brief expands on the concerns and recommendations provided in the August 2015 briefing document listed above.	http://www.ippf.org/resource/IPPF-Briefing-World-Bank-Group-s-funding-sexual-and-reproductive-health
AHBN (2015)	AHBN Position Paper on the Global Financing Facility (GFF)	<p>This position paper outlines the AHBN's set of recommendations to strengthen the GFF in three key areas to:</p> <ul style="list-style-type: none"> • Ensure that those who commit and spend GFF funds are accountable to the citizens of the countries in which the funds are spent. • Ensure full participation of civil society in the design of country plans at the country-level and in the coordination, governance, and oversight of the GFF at global level. • Ensure that national-level health budget advocacy efforts are fully supported to ensure a successful transition to sustainable domestic health financing. 	http://www.who.int/pmnch/media/events/2015/cso_ahbn_gff.pdf
IPPF, Advance Family Planning (AFP), RHSC (date unknown)	Global Financing Facility Country Consultations Fact Sheet: Lessons Learned from GFF Front Runner Countries – Kenya and Tanzania	This briefing paper highlights key lessons learned during the GFF country-level processes in Kenya and Tanzania. It provides a brief analysis of the process for CSO engagement in these two countries, key challenges to the approach, and “tips for successful CSO engagement.”	http://www.rhsupplies.org/fileadmin/uploads/rhsc/Working_Groups/Advocacy_and_Accountability/Documents/GFF-Country-Factsheet.pdf
International Planned Parenthood Federation	Briefing on the Global Financing Facility (GFF)	IPPF produced a set of key messages and recommendations intended to guide and inform government leaders and advocates in their discussions on financing of SRHR within the GFF agenda. The briefing articulates IPPF's concerns about the	http://www.ippf.org/sites/default/files/gff_briefing.pdf

<p>(IPPF)</p> <p>(August 2015)</p>		<p>ability of the GFF to increase funding for RMNACH and provides a number of key recommendations, including formalizing the role of civil society.</p>
<p><i>PMNCH Resources</i></p>		
<p>PMNCH</p> <p>(December 2014)</p>	<p>Consultations on Updating the Global Strategy for Women's, Children's and Adolescents' Health: Perspectives on the Global Financing Facility</p>	<p>PMNCH developed this report to provide feedback on the GFF business plan development process, in the context of the updated Global Strategy. Through the PMNCH-hosted consultation processes, more than 1,400 individuals and institutions provided their perspectives on the GFF. In addition to summarizing the diverse perspectives, this report provides strategic and operational recommendations to strengthen the GFF.</p> <p>http://www.who.int/pmnch/gff_report.pdf?ua=1</p>
<p><i>Other Helpful Resources</i></p>		
<p>Citizen's Hearings Coalition</p> <p>(Sept 2015)</p>	<p>Nothing About Us, Without Us: Citizens' Voices for Women's, Children's, and Adolescents' Health</p>	<p>The Citizen's Hearings on Women's, Children's, and Adolescents' Health provides a platform for community members to voice their concerns and recommendations to local and national leaders. The goal of the hearings is to provide citizens with a mechanism to hold their governments accountable for establishing priorities and commitments and delivering on the RMNCAH health agenda.</p> <p>http://whiteribbonalliance.org/wp-content/uploads/2015/09/Nothing_About_Us_Without_Us.pdf</p>
<p>CHESTRAD, Global Health Council</p> <p>(September 2015)</p>	<p>Amplifying Voices and Enabling Action: Stronger Accountability for Global Health in the Sustainable Development Goals</p>	<p>This report synthesizes consultations, research, and analysis of global health accountability processes, including: iERG, EWEC, PMNCH, IHP+, and the M4AHealth Summit. Further, country consultations from the One Voice Coalition fed into this report. The paper proposes a "pathway to mutual accountability and health development effectiveness" and recommends "priority actions" to enhance accountability for global health.</p> <p>http://globalhealth.org/wp-content/uploads/Amplifying-Voices-and-Enabling-Action-Key-msgs-and-action-points-fina-002.pdf</p>

Global Health Visions (September 2015)	Engendering Accountability: Upholding Commitments to Maternal and Newborn Health	This report reviews accountability processes for maternal and newborn health at the regional, national, and sub-national levels, with a focus on those led by or involving civil society. Included in the report are guiding principles of successful civil-society-led accountability campaigns.	http://globalhealthvisions.com/Engendering_Accountability_Full_Report.pdf
CHESTRAD (June 2015)	Institutionalize, Resource, and Measure: Meaningful Civil Society Engagement in Global and Country Health Policy, Financing, Measurement, and Accountability	Based on consultations with CSOs in the Global South – conducted by CHESTRAD international in 2014-15 under the One Voice Campaign – this document provides civil society perspectives on barriers and opportunities for engagement in the post-2015 era (including the GFF specifically) and a series of priorities and action items for meaningful civil society engagement going forward.	http://www.who.int/pmnch/media/events/2015/cso_institutionalize_resource.pdf
World Vision International (May 2015)	Grassroots to Global: Seven Steps to Citizen-Driven Accountability for the Sustainable Development Goals	The report outlines essential steps to ensure citizen-driven accountability in the post-2015 era, including key ingredients to foster an enabling environment and establish effective platforms for citizen participation, evidence generation, and reporting.	http://www.wvi.org/united-nations-and-global-engagement/publication/grassroots-global-seven-steps-citizen-driven

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