



ENGAGEMENT OF PMNCH MEMBERS

Issue:

A high-level review of PMNCH's approach to engaging its membership. The context is: (i) the 2008 evaluation of the Partnership; (ii) the agreement of the 2009-11 Strategy and Work plan; and (iii) Board concern (in 2008/09) that limited participation/ contribution by members could constrain the Partnership in achieving its objectives. The Partnership has carried out a number of initiatives to improved the engagement of its members. This paper therefore takes stock and considers possible areas for improvement.

Recommendations:

Improving engagement of existing members

Board members are asked to:

- 1. Agree that the Partnership should continue with and strengthen its existing approaches to engaging current members (see Section 2.3).
- 2. Agree that additional approaches to improving member contributions should be implemented in 2010 and 2011, including:
 - o establishment of focal point partner organisations for constituencies and provision of Secretariat (or member) support / resource to these individuals / institutions;
 - o use of time-limited advisory groups for specific issues relevant to PMNCH's activities; and
 - o use of secondments from member organisations to undertake specified tasks for Priority Actions.
- 3. Agree that the EC (supported by the Secretariat) should begin planning for a Forum meeting in 2010.
- 4. Agree that the Partnership should continue its practice of rotation of Board members in order to widen the number of organisations actively involved.

Expanding membership of the Partnership

Board Members are asked to:

- 5. Agree that the Secretariat continues its existing activities in relation to growing PMNCH's membership (see Section 2.1);
- 6. Agree that the Secretariat (with Board Member input) look to target institutions from the six constituencies who: (i) are willing and able to contribute to the Partnership and have not received adequate representation; (ii) provide particular perspectives that are relevant to the priority actions (PAs).

Financial implications:

The above activities are expected to be able to be covered from within the existing PMNCH 2010-11 budget – although members will be encouraged to share the costs of organising meetings and events.





I. INTRODUCTION

This paper presents a review of PMNCH's engagement of its members, and sets out for Board decision, potential ways in which member involvement might be strengthened towards achieving the Partnership's mission. The paper has been prepared with the support of Cambridge Economic Policy Associates (CEPA). It is based on desk-based research; as well as discussions with the Secretariat, a few Partners currently active in executing the PMNCH work plan, and a selection of PMNCH members who are presently not actively involved in PMNCH activities. In addition, consultations were held with other member-based Global Health Partnership (GHPs) to learn from their experiences.

1.1. Context for the need to facilitate greater member engagement

I.I.I. The need to engage members

Member engagement in a Partner-centric alliance

As set out in the 2009-11 Strategy and Workplan, PMNCH is a partner-centric alliance, whose role is to facilitate its member institutions, where either: (i) there is value added in Partners working together; and/ or (ii) the activities are beyond the manageable limits of the Partners in isolation.⁴ Thus, member participation is the very basis of the Partnership, and effective member engagement is essential to ensuring that the Partnership realises its full potential. Specifically, more effective engagements is key for the following reasons:

- It supports the creation of a wide network of individuals and institutions working along the continuum of care, at global, regional and national levels.
- It offers the opportunity for PMNCH to coordinate disparate institutions and individuals around core messages/ activities towards achieving MDGs 4 and 5.
- It enables PMNCH to 'beam out' messages about Partner and Partnership activities and about key developments that will contribute to the MNCH outcomes.
- It provides a broad and diverse group of institutions available to provide input on issues being worked on by Partners separately and through the Partnership.
- It widens the group of member institutions that may be able and willing to contribute to the PMNCH work plan, thereby increasing implementation rate of the activities, enhancing consensus on key issues among a broader member base; and increasing ownership of PMNCH.

It is taken as a given that there is value in expanding the number and range of organisations who are members and who are able to associate with the mission and objectives of the Partnership.

⁴ The Partnership's Framework for action and role (Section 2.2), 2009-11 PMNCH Strategy and Workplan

¹ CEPA is a London-based economic and financial policy firm. More details can be found at: www.cepa.co.uk

² In order to obtain a range of views, members were selected for the consultations from each of PMNCH's six constituencies. The focus was to select a few Partners actively involved in PMNCH activities, but also members that are not on the Board or involved in the PAs

³ A full list of consultations is provided in Annex 1.





Engaging with the wider membership

As with most GHPs, there is inevitably a greater level of engagement with member institutions that are represented on the Board. These are the institutions (and individuals) who are core to the achievement of the Partnership's work plan.⁵ The substance of this paper is therefore primarily about how PMNCH should engage with the wider group of its members beyond representatives of the Board.

Within this wider group, it is important to recognise that there are institutions who: (i) whilst not being on the Board, are active members of their constituencies; (ii) whilst very active in MNCH, are not currently significantly involved or maximizing on the added value that the PMNCH platform offers; and (iii) are less active in the MNCH community and may increase their return on investment by partnering more effectively within the PMNCH structure.

Improved engagement with these types of institutions is beneficial to both the members and the Partnership and is essential to help the global MNCH community achieve MDGs 4 and 5.

Of course, it is important to recognise that institutions will only wish to become and remain active as PMNCH members if they see value in their membership and involvement. Our expectation is that this varies both between and within constituency groups. However, possible benefits include increased opportunities to partner strategically in global MNCH activities with other key players to achieve better results, share and access knowledge, network, etc. This is discussed further in Annex 2.

1.1.2. Findings of the PMNCH external evaluation

The external evaluation of the PMNCH conducted in 2008 is another important element of context. The evaluation examined the issue of member engagement with the Partnership, and recommended the need for more effective engagement. The review noted there were marked differences in the level of engagement of different constituency groups and that members' understanding of PMNCH functions and work plan, as well as the expectations of them was limited, suggesting the need for more well-delineated plans, roles and responsibilities, and communication mechanisms.

The evaluation team recommended that more effective engagement could be facilitated through improved structuring of the partnership (more results oriented and less process oriented); delineation of roles and responsibilities (including functions of Partners and the Secretariat); clearer and more focused work plans; improved communication channels and internal advocacy to ensure consistency and coherence within the different constituencies, as well as some suggestions to structure the Partners Forum more effectively. More details are also provided in Annex 3.

1.2. Structure of paper

The paper is structured as follows:

- Section 2 provides PMNCH's current member composition and an assessment of engagement of members.
- Section 3 provides a discussion of possible approaches that PMNCH may use to strengthen its member engagement – recognising the inevitable challenges for a Partnership organisation of this sort.

⁵ In the language of the Strategy and Workplan document, these are the 'Lead and Contributing Partners'. Throughout this report, the term 'Partners' refers to these Lead and Contributing Partners, who are responsible for the implementation of the PMNCH Strategy and Workplan. The term 'members' refers to all organisations that have joined the PMNCH.



- Section 4 discusses the expansion of the PMNCH member base, including emphasising the need to orient new members.
- Section 5 provides summary conclusions.

The paper is supported with annexes on: the list of consultations (Annex 1); a discussion on the benefits for members for engaging with the Partnership (Annex 2); the findings of the 2008 external evaluation of the Partnership on member participation (Annex 3); an analysis of the growth in PMNCH membership (Annex 4); the key lessons learnt and approaches employed by other GHPs (Annex 5); the responsibilities of PMNCH members as noted in the member application form (Annex 6); factors impeding effective membership (Annex 7); and essential actions to improve member communications (Annex 8).

2. BACKGROUND AND ASSESSMENT

This section provides some background to the growth in PMNCH membership as well as its current composition. It also notes the current approaches to member engagement as well as provides a high-level assessment of whether the current engagement is effective, based on CEPA consultations.

2.1. Growth in membership

When PMNCH was established in September 2005, its membership comprised about 70-80 members from the three alliances that were merged to form the Partnership.⁶ Until early 2007 there were no systematic efforts to communicate with, revive, or expand the membership base. Several members may not even have been aware of the Partnership and their role in it. However, from around the time of the Forum meeting in April 2007, more systematic efforts have been made to expand the member base with:

- Developing an online application form to help facilitate wider member applications to the Partnership, including an elaboration on the responsibilities of member organisations⁷;
- Formalizing the processes for selection of members through the (then) Governance Committee with review of applications by the Secretariat; and
- Greater awareness building of the Partnership through active participation in public fora.8

As a result, there has been a significant growth in the membership base⁹, with the Partnership having 288 member organisations as of October 2009. Annex 4 provides more details on the evolution of the PMNCH member base. However, the Secretariat notes that its approach to member applications thus far has been more reactive (i.e. review of the application forms submitted by potential members), as against pro-actively seeking out new members to join the Partnership.

⁶ These are the Partnership for Safe Motherhood and Newborn Health, the Child Survival Partnership, and the Healthy Newborn Partnership.

⁷ The online application form was a basic form to begin with, but has since been expanded and is now more detailed.

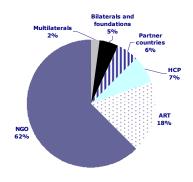
⁸ The Secretariat has noted that there has generally been a spike in applications after a major MNCH public event.

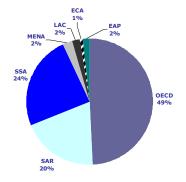
⁹ Between the period August 2007 - August 2008, an average of 5-7 member applications were received per month, with 10-12 applications received in some months.

2.2. Current composition of members

The PMNCH membership comprises six constituencies: (i) multilateral organisations; (ii) bilateral donor agencies and foundations; (iii) partner countries; (iv) health care professionals (HCP); (v) academic, research and training institutes (ART); and (vi) non-governmental organisations (NGO). Figure 2.1 presents the proportion of members by constituency and region.

Figure 2.1: Current composition of PMNCH member-base





Source: PMNCH Secretariat

[SSA Sub Saharan Africa, MENA Middle East and North Africa, LAC Latin America and the Caribbean, ECA Europe and Central Asia, EAP East Asia Pacific, SAR South Asia Region]

The figure on composition by constituency shows that the NGO constituency comprises more than 62% of the membership by number of organisations. While this may reflect the larger number of NGOs as compared to other constituencies, it is also likely that it reflects PMNCH's historic focus on advocacy. However, a similar composition is also observed in some other GHPs (e.g. Stop TB, which has around 60% NGO membership). Within these totals:

• 23 institutions sit on the Board/ Executive Committee and are involved in Priority Actions to a greater or lesser degree. Table 2.1 below sets out the composition of the Board and EC.

Table 2.1: Composition of the Board and the EC10

Constituency	Board	EC
Multilaterals ¹¹	4	I 12 (plus WHO)
Bilaterals and Foundations	513	I
Developing countries	4	I
HCPs	3	I
ARTs	3	I
NGOs	4	I
Total	23	7

 $^{^{10}}$ Note: One bilateral and one NGO seat on the Board are not filled.

 $^{^{11}\} The\ four\ multilaterals-UNICEF, WHO, UNFPA, The\ World\ Bank-are\ permanent\ Board\ members.$

¹² WHO serves on the EC as a non voting, ex officio member

¹³ 4 bilaterals and 1 foundation



- A number of other member institutions are active within their constituencies (i.e. attend Board and constituency meetings), and/or are Contributing Partners to the Priority Actions, and/or interact regularly with the Secretariat and Board members.
- As per the Secretariat feedback, at least 25% of the membership (i.e. 72 members or more) appear to play little if any role in the Partnership. However, most of these organisations are delivering MNCH services (at country or global level) to communities the rationale for their membership in PMNCH.

Almost half of the members are from OECD countries, with the balance being primarily from SSA and SAR. This regional distribution may reflect the global focus of the PMNCH activities, although as illustrated in Annex 4, it is interesting to note the particular acceleration in Africa based organisations post the Partners Forum in Tanzania in 2007.

2.3. Current approaches to engaging members

PMNCH does not have a written policy on the engagement of members. While the 'Conceptual and Institutional Framework' document of the Partnership highlights the selection criteria for membership, ¹⁴ as well as the functions and operations of the Partners Forum, it does not provide any further details on the overall policy for engaging members and the mechanisms/ approaches thereof. However, the member application form sets out a list of member responsibilities/ expectations – provided in Annex 6 for reference.

The approaches to engage members have been primarily through:

- A number of communication channels managed by the Secretariat including: regular updates of the website; email communication to focal and other contact persons in member organisations; ¹⁵ enewsletter¹⁶; etc.¹⁷
- Organisation of meetings of the member organisations whether for all members (such as the Partners Forum) or a subset of members (by constituency). However, the frequency and form of these meetings have varied, especially among constituency groups. For example, the bilateral/ foundation constituency has held meetings quarterly, sometimes along side Board meetings. The NGO constituency typically meets every six months or so, generally in Washington, DC. 18 The Partners Forum meeting in 2007 was attended by 300 participants, however, close to a third were from multilateral and bilateral organisations/ foundations 19 which is less than 10% of the membership.
- Some PA lead partners have tried to involve the PMNCH members by inviting them to meetings or approaching them through emails to explore possible areas/ forms of involvement and collaboration. For example, this was done under PA5, wherein advocacy related partners were invited to a meeting to

¹⁴ The PMNCH follows an open membership selection criteria, with the primary requirement being that the organisation is committed to MNCH. The other criteria for rejection of member applicants may be on account of the applicant being an individual (rather than an organisation); religious objectives; absence of a focal point, lack of response on emails etc.

¹⁵ A number of these mechanisms such as periodic email updates and emails to new members have been implemented this year, after the recent changes in the Partnership.

¹⁶ The number of subscribers to the e-newsletter has increased dramatically from 6 in 2006 to 189 in 2007, however thereafter declined to 127 in 2008. Majority of the current subscribers are based in North America. Further, we understand that there is no regular periodicity to mailing out the newsletter; it is usually sent after a major MNCH event or when there are developments to report.

¹⁷ In addition, the 'PMNCH Mailbox Report' notes that during the period August 2007-08, only 28 member contributions (in terms of news, reports, events and other information that members want to share) have been sent to the PMNCH mailbox.

¹⁸ This is usually organised by Family Care International and attended by the NGOs in North America (and sometimes wider).

¹⁹ Rough estimation from: http://www.who.int/pmnch/events/2007/lop300407.pdf



discuss the PMNCH work plan on advocacy as well as exploring possible areas of collaboration and involvement with the wider members.

2.4. Assessment of member engagement

CEPA consulted with PMNCH member organisations included a few Board members but also wider members, not currently active in the Partnership. However, whilst attempts were made to contact 3-4 members from each constituency, only I-2 members per constituency responded to our request.²⁰ In terms of constituencies, we received the highest response from the HCP organisations contacted – supporting the observation of the external evaluation on the engagement of this constituency (See Annex 3).

Most of the members consulted have engaged with the PMNCH at some stage – whether through their participation at the Tanzania Partners Forum meeting, or participating in some advocacy meeting, etc. That said, a majority of such engagements have been one-off, rather than regular and systematic involvement in and contribution to the Partnership's activities. All consultees however clearly expressed a strong interest in engaging better with the Partnership going forward.

The consultations highlighted some broader issues that have impeded effective member engagement. Some of the identified issues are as follows (and elaborated in Annex 7):

- Lack of awareness about PMNCH and its activities, and member expectations.
- Perceived lack of suitable opportunities for participation and not knowing how specifically to contribute to the Partnership activities.
- Limited financial/ human resources for engagement particularly an issue for NGOs, HCP and ART constituencies; as well as developing country members.²¹

3. APPROACHES TO IMPROVING MEMBER ENGAGEMENT

This section presents a series of options to engage members more effectively in the Partnerships' mission, objectives and activities, including a discussion on the expansion of membership.

The approaches to member engagement depend upon the nature/ extent of member involvement with the Partnership. At the highest level, members can engage with the Partnership in the following ways:

- general sharing of knowledge and information and networking; e.g. through the new PMNCH knowledge portal.
- providing advisory support by sharing views/ inputs on specific issues relevant to the Partnership e.g. through participating in advisory groups/ task teams; and
- actively participating in taking forward and implementing the PMNCH PAs e.g. playing the role of a Lead Partner for a PA.

²⁰ This reflects not only a lack of response from some of the members, but also the fact that the focal point in some of these organisations has moved on and updated contact details are not available with the PMNCH. This observation could however be specific to the sample organisations contacted, which were selected on a random basis.

²¹ For example, in the case of the ARTs, it is very difficult for them to obtain funding for participating in a meeting unless it is linked to a specific research output



These mechanisms represent different levels of involvement in the Partnership's activities, with general knowledge sharing and networking being an inherent part of all member engagement, and advisory and implementation roles reflecting a more direct and active level of participation. Members can play one or all of these roles.²²

The expectation is that in a Partnership of this sort, a majority of the members will engage with the Partnership through knowledge sharing and networking activities, as opposed to the more direct/ active levels of participation. For example, it is likely that several national NGOs can at best help spread PMNCH messaging (such as the continuum of care concept) in their country-based MNCH activities as against providing extensive implementation support.

Key to the engagement of members is for them to recognise the value-added of the Partnership generally, and where their organisation fits in/ benefits from active involvement specifically. There needs to be a defined strategy/ approach on how the members can contribute to the Partnership's activities and goals. Member responsibilities are communicated through the application forms/ websites.

As we discuss below, fostering member engagement through knowledge sharing/ networking mostly involves further developing communication channels between the members – some of which the Secretariat is seeking to do. We also provide a few additional recommendations to support other forms of member engagement. Some of these approaches are also being currently implemented by the Partnership, however may merit from greater emphasis going forward.²³

3.1. Facilitating member engagement through knowledge sharing/ networking

Through the PMNCH platform, members can share information and knowledge, whether specifically on the activities of the member organisation²⁴ or more general information on any issue relevant for MNCH. This may be through participation in meetings and conferences, providing access to their knowledge and information resources, including links to their organisation websites, etc.

The Partners Forum meeting is a platform to improve collaboration and networking, assuming there is wide member attendance and effective organisation of the meeting to exchange information and to strategise (possibly using break-out groups) on the Partnership's activities.²⁵ We understand that following the first Partners Forum meeting in 2007, the PMNCH has tentatively planned to organise the next meeting in 2010. The Forum meeting would present a useful and timely opportunity to inform members of the restructured Partnership as well as the new strategy and work plan (which was developed with input from a relatively small number of partners). It will also provide an important opportunity to expand membership. Next year, 2010, is a critical year for monitoring and taking stock of achievement towards MDGs 4 and 5 and there are as well significant shifts in the global health landscape that have major implications for the Partnership and its work.

As identified in Section 2.4, one of the main issues impeding member engagement is the lack of awareness of the PMNCH and its activities. The approaches described below help improve member awareness on the Partnership. Annex 8 provides a list of approaches to improve communication and thereby foster collaborative memberships. Most of these approaches, such as emails, newsletters etc. are already being carried out by the PMNCH, and hence may only require greater emphasis going forward. Thus, these approaches are essential 'quick-win' actions to continue to improve communications and information sharing with the membership. In addition, we provide

²³We have provided some recent examples where the Partnership has implemented a particular approach.

²² In addition, members may also play a governance role through their participation in the Board/ Executive Committee. Approaches to enhance member participation in the governance of the Partnership are considered outside the scope of this Paper.

²⁴ It was suggested that it may be useful for members to provide some form of communication/ updates on their activities. For example, the UN Global Compact requests a Communication in Progress (COP) on activities and engagement with the Compact through its principles – with members not actively communicating being excluded from the Compact

²⁵ The external evaluation suggests ways to increase effectiveness of the Forum meeting (as set out in Annex 5).



below some suggestions on specific approaches to encourage greater sharing of knowledge and networking, for consideration by the Board.

3.1.1. Interactive discussion forums

A useful approach is to develop web based/ live discussion forums on specific MNCH issues to share views, experience and best practise.²⁶ The purpose of these discussion forums would be to encourage debate, seek a range of views, and share knowledge. This approach could be used, for example, to solicit constituency members' views on issues before Board meetings enabling members to contribute to Board meeting Agenda items and for the Board members to present a more informed perspective. These can be developed using web-based discussion forums/ blogs²⁷ or by organising 'open mic events'.²⁸ At present, the PMNCH has organised 'Communities of Practise- EZcollab', which includes groups on advocacy, the Coogee Beach Group, costing tools review, some of which have e-forums moderated by the Secretariat.

It can be expected that these forums would be managed/ monitored by the Secretariat (or outsourced to a specialist agency working/ trained on MNCH issues), however, this could also be done by an interested Board member or any member organisation in partnership with the Secretariat.

The resource implications of such forums will depend on the exact approach adopted and whether the responsibility would sit with the Secretariat, but in general should not be considerable, especially if conducted via the internet. We understand that e-forums in practise earlier by the Working Groups, were not very successful/ widely used. One of the lessons learnt from PMNCH's earlier use of e-forums for its working groups was to keep access to and the technology of the platform simple, to encourage wider participation.

3.1.2. Organisation of constituency/ regional meetings

Another approach could be to organise meetings to bring together different members by:

- Constituency an example of this is the recent HCP meeting organised in South Africa, bringing together different members within each constituency to share knowledge and network with each other.²⁹ In our consultations with some of the HCP members, they noted that they would be very keen to meet with other groups of healthcare professionals to understand the type of activities they are involved in, at both the global and country level. We also understand that the North America based NGO constituency meets occasionally, usually in Washington, DC,³⁰ and that the bilateral/foundation constituency group also met regularly as a constituency.³¹
- Region consultations with developing country members specifically suggested the use of regional
 meetings to help coordinate their commitment to improved MNCH. These could be held as side
 meetings to existing events, with the Secretariat potentially playing a facilitation/ coordination role, or
 even organised as teleconferences/ videoconferences where suitable.

²⁶ We understand that these e-forums are being planned as part of the proposed MNCH knowledge portal.

 $^{^{\}rm 27}$ A number of other GHPs have followed this approach such as Roll Back Malaria.

²⁸ The Stop TB Partnership organises open mic events on a monthly basis for its advocacy group. Their experience has been fairly good in terms of about an average participation of 30 members per event, from diverse constituencies.

²⁹ Three HCP meetings have been organised earlier in Malawi, Bangladesh and Burkina Faso. Two more are being planned in Oman and Bolivia.

³⁰ Similar meetings could be organised to involve the South-based NGOs.

³¹ Similarly, Board members could also keep their constituency members informed about the activities of the Partnerships and key MNCH developments – as is being currently being practiced by the bilateral/foundation representatives on the Board



Such meetings can be organised by the Secretariat or an interested Board member organisation (for example, FIGO organised the recent HCP meeting in South Africa). This approach could be fairly resource intensive, especially if organised at a large scale. At the same time, resource requirements could be reduced if these are organised alongside existing meetings/ conferences. In the past, the PMNCH has invested time and raised external resources for these meetings, and one of the HCP organisations has co-hosted the event. Going forward, we understand that some of these meetings could possibly be sponsored from the PMNCH PA-4 budget (Strengthening HR for MNCH); for example, the budget available to strengthen national HCP associations. It was also suggested that the financial resources of the Partnership, especially a portion of pass-through funding, might be targeted to improve outreach and involvement of the wider membership, especially those in low-resource settings. Given the number and diversity of NGO members, including in developing countries, the feasibility of using some of these funds to engage them might be explored.

3.2. Facilitating member engagement through advisory support

Advisory engagement could be encouraged/ supported through a number of approaches as discussed below. These approaches create specific opportunities for member participation – an issue identified by members as impeding their engagement (Section 2.4).

3.2.1. Organisation of issue-based and time limited advisory groups

Advisory groups could be organised with a specific mandate for a limited period to provide focused advice/ strategic guidance on subjects of relevance to the PMNCH. For example, the GAVI Alliance has established a number of advisory groups to support their activities including the civil society task team, data task team, regional working groups, etc.

These groups would comprise a relatively small number of members and hence their meetings would not be too resource intensive (as against the constituency/ regional meetings discussed above). The meetings could also be organised by telephone/ videoconference or at the fringes of other larger meetings, if appropriate. Further, such groups are typically constituted for a limited period when a particular issue needs to be discussed/ addressed (as opposed to standing committees).

It is generally advisable for a Board member (if possible, the Lead Partner for the related PA) to be a member of every task team, to ensure continuity in incorporating useful task team outputs in the implementation of the Partnership's activities. The management of these meetings could be handled by task/ advisory group team leaders, with organisational support from the PMNCH Secretariat.

3.2.2. Member participation in Board meetings as observers

Interested members can be invited to attend the open sessions of the Board meetings as observers. At present, PMNCH already has a provision for this (as indicated in its Board Manual) and may be employed further to engage interested members.

Suggestions to invite specific members may come from Board members or the Secretariat – potentially including members who have expressed an interest to be more directly engaged in the Partnership's activities. The resource implications of this approach are not so extensive, especially when the potential member organisation can fund its own participation in the Board meeting.

3.2.3. Invitation of expert members to present to the Board



Expert members could be invited to present on specific and topical issues at the Board meetings. This would be useful to inform Board discussions/ decisions on relevant matters of interest. For example, the Public Private Infrastructure Advisory Facility (PPIAF)³² organises a half/ full day knowledge sharing workshop on topical issues alongside the Board meetings. The PMNCH had organised some guest speakers on 'Recent Developments in Global Health and Implications for the Partnership' at its Board meeting in February 2009, which was received positively by the Board and also helped foster collaboration. This practice could be continued drawing on the expertise of its wide member base, and selecting speakers/ topics of interest prudently.

The resource implications of this approach depend upon the length of the knowledge sharing workshops, and if member experts are able to cover their own expenses.

3.3. Facilitating member engagement through delivery of PMNCH strategy/ PAs

Active/ direct participation in implementing PA activities involves members taking responsibility and consequently devoting time/ resources (whether own or provided by the Partnership or other source) for the delivery of specific activities within the Priority Action Areas – for example, the role of the PA Lead and Contributing Partner organisations.

Some optional approaches to encourage contributory memberships are discussed below. These approaches create specific opportunities for member participation, as well as help provide resources (human/ financial) for engagement – as discussed below.

3.3.1. Contributing partner

Each of the PAs in the Partnership's workplan and strategy has Lead and Contributing Partners assigned to it. The role of the Contributing Partners has varied and has not been uniformly defined across the PAs – with some partners having played a substantial role in supporting the development of the PA and others have provided a lower level of support.

One option is to more formally recognise the role of Contributing Partners³³, such that they participate in the periodic PA update discussions with the Lead Partners and the Secretariat for as long as they are involved. This would allow them to more actively engage with the Partnership and take the implementation of the PA forward. Any new member interested in shaping and contributing to a specific activity/ output of a PA can do so. The Partnership would also like to engage more developing country based members as Contributing Partners, as appropriate.

Also, the Lead Partners could invite interested members from the broader membership base to contribute to shaping and implementing a PA.³⁴

3.3.2. Secondments

Secondments are a useful approach to involve member organisations extensively. It is unlikely to be relevant to engage members who are not actively involved in the Partnership's activities.

³² The PPIAF is a multi-donor infrastructure Technical Assistance facility and is set up as a World Bank Trust Fund.

³³ For example, White Ribbon Alliance, CARE, Columbia University, Save the Children, University of Southampton, University of Aberdeen as well as World Vision are actively supporting the Partnership on advocacy.

³⁴ An example of this is the recent meeting organized in London by the Lead Partners of PA5 and the PMNCH Secretariat to bring together different members working on advocacy related issues, in order to improve the strategic approach and agree on roles and responsibilities in taking forward the activities related to this PA.



The secondments could work both ways i.e. Secretariat staff could be seconded to the member organisation and vice versa. The former approach would be challenging in the short term, given the PMNCH's limited staff, but could help to advance the Partnership's mandate in the member organisation in the longer term. For example, the Health Metrics Network (HMN) has two full time paid staff seconded to the World Bank, one of whose role is advocacy and technical support to ensure that the Bank includes information system strengthening components in their projects, and the other to supervise/ carry out costing tools development and cost benefit analysis on information system investments.

Seconding staff from member organisations to the PMNCH Secretariat would enable the organisation to contribute expertise and human resources to the PMNCH.³⁵ A suggestion here is for an interested member organisation to depute a staff to the Partnership to take forward PA-6 on tracking progress and commitment towards MNCH.

The resource implications of secondments depends upon the nature of agreement between the two organisations – for example, it may be the case that the member organisation can provide part of/ entire cost of the secondee.³⁶ Alternatively, the PMNCH could share costs, especially if a member seconds staff to the Partnership for PA implementation (using the relevant PA budget).

3.3.3. Focal point for additional support

Focal points for additional support can help facilitate the engagement of members. The focal points can be at two levels, as discussed below.

Focal point as a lead in organising the constituency

Partner institutions (or individuals) can be nominated as focal points for taking the lead in organising and motivating their constituencies. These focal points would coordinate meetings of their constituency members, keep them updated of major PMNCH and other MNCH events, play an active role in orienting new members (see below), etc.

Given this role, it can be expected that these focal points would be selected from amongst the Board members.

Focal point as a supporting administrative resource

In addition, given the time resources that would be required in serving as a focal point as discussed above, it could be useful to designate another focal point as a supporting resource. The role of the focal point would be to summarise key MNCH developments and PMNCH activities/ events for these members, flag points for their contribution, and feedback member views/ information to the PMNCH. The focal point would need to work in close collaboration with the main constituency focal points as well as the PA Lead Partners.

This would be a particularly useful mechanism to engage developing country governments who have expressed the need for more support. GAVI has implemented this mechanism to support key developing country Board members. This approach helps support member capacity for participation in PMNCH.

³⁵ It is also possible (and indeed already prevalent) for member organisations to second staff to each other, with a staff being specifically deputed for supporting PMNCH Priority Actions, e.g. to a Lead Partner organisation.

³⁶ This would depend on the nature of member organisation (for example, it would be difficult for developing country organisations/ NGOs to share significant costs).

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The focal point could be from within the Secretariat, with dedicated time accorded to this responsibility. In addition, the focal point could also be selected from a suitable member organisation, which is able to volunteer a resource.

3.3.4. Rotation of Board members

Another approach to facilitate greater participation in PMNCH activities from a wider base of members is to ensure the timely rotation of Board members.

As per the Board Manual, the term of office for all Board members, apart from the permanent members, is two years, renewable once. The donor/ foundation constituency has rotating its representatives on the Board, with the expectation that other constituencies will also implement this approach.

3.4. Summary of options

This Board Paper has sought to identify suitable mechanisms for engaging current members effectively in the Partnership's mandate and activities. Table 3.1 provides a summary of these mechanisms and the key role of the different Partnership actors.

Table 3.1: Summary of recommendations

Member engagement	Approach	Role/ responsibility of Partnership actor	
Knowledge sharing/ networking	Continued focus on existing engagement through:	Primary role of the Secretariat,	
	• Communication channels such as regular updates of the website; sharing of news and information through newsletters, emails, etc.	but also Board Members, Lead and Contributing Partners	
	 Activities that enable communication such as maintaining an updated members contact database; updating changes in focal person. 		
	Participation in international conferences and seminars.		
	Engaging in informal channels of communications with members.		
	Interactive discussion forums	Secretariat (either directly or outsourced) or Board member	
	Organisation of constituency and regional meetings of members	Board member organisations and/ or Secretariat	
Advisory	Organisation of issue-based time limited advisory groups	Lead Partners	
	Member participation in Board meetings as observers	Selection by Secretariat, for approval by the Board	
	Invitation of expert members to present at Board meetings	Secretariat	
Delivery of PMNCH	Contributing partners participation in PA-related meetings and activities	Lead and Contributing Partners	
strategy/ PAs	Secondments between PMNCH and Partner organisation	Secretariat and member organisations	
	Focal resource for additional support to members (i) role as a lead for a constituency	(i) Board members, member organisations	
	(ii) supporting administrative role	(ii) Secretariat, member organisations	
	Timely rotation of Board members	Board Members	



Implementing the above forms of engagement is not expected to involve significant additional budget outlay for the Partnership.

- The communication/ outreach activities can be undertaken by existing PMNCH staff, with support from Board members where possible (e.g. orienting new members)
- The costs of some of the activities can be met from the existing PA budget, especially in the case of contributory engagement approaches (such as cost sharing for member secondment to PMNCH).
- Organising some of the meetings such as constituency/ regional meetings would involve additional costs, depending on the size/ scale of the event. Where possible, members should be encouraged to share costs or resources to organise and host the meeting. We also understand that the PA-4 budget for strengthening HR for MNCH can be drawn upon for some of these meetings, specifically for the health care professionals.

4. EXPANSION OF MEMBERSHIP

The focus of this paper has been on enhancing the engagement of existing members.

However, it is also important to consider the actions that can and should be taken by Board Members, Members and the Secretariat to continue to expand the numbers of organisations that associated with PMNCH and support its mission and objectives.

Role of the Forum

Section 2.1 (supported by Annex 4) provides details of the growth in PMNCH membership. It notes in particular the systematic efforts by the Secretariat to expand the membership after the first Partners Forum in 2007.

Our view is that the Partnership – supported by the Secretariat - needs to continue these activities to support member expansion. In addition, the experience of the first Forum meeting suggests that it is a very useful platform to increase awareness amongst the broader MNCH community and expand membership. Given this, it seems likely that a second Forum meeting in 2010 would be useful for expanding the membership, raising awareness of the aims and objectives of the work plan and strategy, bringing needed to attention to MNC issues in a region through national and regional media (as occurred with the Tanzania Forum), and improving engagement.

Targeting new members

Our discussions with the Secretariat suggest that, in addition to general membership recruitment activity, there may be value in strategically targeting institutions to be new members. In particular, the Secretariat (with Board Member input) could look to target institutions who:

- have a direct interest and experience in the PMNCH PAs. One example is that we understand that there
 are few if any members that have experience in tracking MNCH resource commitments. For example
 NGOs that focus on accountability (as opposed to technical aspects of MNCH), may be able to
 contribute to the implementation of PA 6 (tracking progress).³⁷
- are from the existing constituencies, but have not received adequate representation for example, we understand from the Secretariat, that a plateau has been reached with respect to new HCP members,

2.

³⁷ The implementation of PA 6 is yet to make progress, compared to other PAs.



however there may be potential members that can be added to the Partnership from the other constituencies such as ARTs, developing countries, foundations. For example, the Millennium Foundation is an important donor organisation that could be included in the Partnership.³⁸

Possible ways to bring in new members include referrals by existing members; targeted email invitations to join the Partnership or meetings with potential members to discuss scope for partnering;³⁹ word-of-mouth awareness building at conferences and seminars; informative website, including easy to access online application forms, etc.

Orientation of new members

It is a generally held view that the Partnership could do more to orient/ familiarise new members with the objectives/ activities of PMNCH and expectations from them as members. This may be done by:

- sending out welcome packs comprising brochures on the Partnerships, any of its key publications;
- organising a formal orientation meeting (either alongside another PMNCH meeting, or by telephone), and etc);
- Board member representing a particular constituency being responsible for welcoming a new member of the constituency⁴⁰ in order to implement this, the Secretariat would inform the relevant Board member and share the new member information with them on a timely basis. It is not expected that this should take any additional resources for the Partnership.

5. SUMMARY AND CONCLUSIONS

This paper has reviewed the way in which PMNCH has sought to engage with its members. It has involved speaking with a small number of Board members, other members and Secretariat staff.

The overall conclusions are as follows:

- Engagement of PMNCH's members is important for the Partnership to achieve its objectives. This was always the case, but is arguably greater in the context of a Partner-centric alliance.
- The Partnership is carrying out many of the activities that it should in order to engage with its members. However, more can be done and the recent revitalisation of the Partnership provides an obvious opportunity to increase amount of engagement with its members.

The paper sets out a long list of activities, (in Section 3), that are either currently underway, or could be added to improve activity. Our view is that most of these activities can and should be undertaken. However, we draw particular attention to the following

- establishment of focal point Partner organisations for constituencies and provision of Secretariat support / resource to these individuals / institutions;
- use of time-limited advisory groups for specific issues relevant to PMNCH's activities;
- and use of secondments from member organisations to undertake specified tasks for Priority Actions.

³⁸ We also understand that discussions are ongoing to include the UNDP as a multilateral member of the Partnership.

³⁹ For example, PMNCH has contacted the Millennium Foundation and the UNDP to join as members.

⁴⁰ The HCPs have done this voluntarily through their own ongoing networking, but there is no orientation process for other constituencies.





In addition, we also note that sustained expansion of membership is also important and recommend continued support of the mechanisms and approaches currently employed by the Secretariat. We particularly note the timeliness of conducting another Partners Forum meeting in 2010, especially given the experience of the previous Forum in attracting new members.

The Secretariat should also look to strategically expand membership, with inputs from the Board, to include MNCH organisations that (i) are willing and able to contribute the Partnership and have not received adequate representation thus far; and (ii) provide particular perspectives that are relevant to the PAs. Proper orientation of new members is key to ensuring their sustained engagement, and we provide recommendations on additional approaches that may be employed by the Partnership in this regard.

ANNEX I: LIST OF CONSULTATIONS

This annex provides a list of the consultations carried out in developing this Board Paper, including:

- PMNCH members (Table A1.1);
- Other Global Health Partnerships (GHPs) (Table A1.2); and
- Experts in the field (Table A1.3).

Table A1.1: List of consultations with PMNCH members⁴!

Constituency	Name of organisation	Person consulted with
Multilaterals	ILO	Dr. Xenia Scheil-Adlung
Bilaterals and	MacArthur Foundation	Erin Sines
foundations	NORAD	Helga Fogstad
Partner countries	Ethiopia	Dr. Medhin Zewdu, Director General, Office of the Minister, Ministry of Health
	Tanzania	Dr. Neema Rusibamayila, Ministry of Health and Social Welfare
Health Care Professionals (HCPs)	International Union Against TB and Lung Disease	Dr. Nils Billo
	FIP - International Pharmaceuticals Federation	Xuanchao Chan
	Obstetric Anaesthetist Association (OAA) and World Federation of Societies of Anaesthetics (WFSA)	Dr. Paul Howell
Researchers and academics	Centre for Global Health, Population, Poverty and Policy, University of Southampton, UK	Dr. Zoe Matthews
NGOs	Action Group on Adolescent Health (The Campaign Against Unwanted Pregnancy)	Boniface Oye-Adeniran, Executive Director
	Family Care International (FCI)	Ann Starrs (Partnership Co-chair)

⁴¹ Helga Fogstad and Ann Starrs provided detailed comments on a draft of this Board Paper.



Table A1.2: List of consultations with Global Health Partnerships

Name of organisation	Person consulted with	
Health Metrics Network (HMN)	Dr. Sally Stansfield, Executive Secretary	
TB Alliance	Melvin Spigelman, President and Chief Executive Officer	
Roll Back Malaria (RBM)	Thomas Teuscher, Partnership Development, Coordinator and Team Leader	
Measles Initiative	Andrea Gay, Executive Director of Child Health, UN Foundation	
International Union Against Cancer (UICC)	Isabel Mortara, Executive Director	
Stop TB	Louise Baker (Political Advocacy and Strategic Planning) and Giuliano Gargioni (Partnering and Social Mobilization)	

Table A1.3: List of consultations with other experts

Name of organisation	Person consulted with
Independent consultant	Bo Stenson



ANNEX 2: BENEFITS FOR MEMBERS IN ENGAGING WITH THE PARTNERSHIP

The PMNCH recognises that progress towards achieving MDGs 4 and 5 requires concerted action from a wide spectrum of stakeholders, and thus its mandate is to coordinate and consolidate the activities of individual stakeholders and agencies working along the continuum of care into a global alliance working towards the achievement of these goals. The PMNCH is not a funding or implementing agency, but one with a focus on supporting and facilitating the work of the Partners where either: (i) there is value added in Partners working together; and/ or (ii) the activities are beyond the manageable limits of the Partners in isolation. Thus, member participation is the very basis of the Partnership, and effective member engagement is essential to ensuring that the Partnership realises its full potential.

The potential benefits of effective member engagement are discussed below.

Benefits/ value added of the Partnership for the members

The benefits for members joining the Partnership are summarised below. This is based on the envisaged benefits identified by the PMNCH⁴², and also as suggested by some of the members through consultations with CEPA.

- Global collaboration/ coordination for the achievement of MDGs 4 and 5. The PMNCH presents a global/ international platform for coordination of multi-stakeholders'/ partners' efforts towards the achievement of MDGs 4 and 5 thereby also serving as a mutual accountability mechanism for the public and non-public actors. Member organisations note the close association of their objectives and activities with the PMNCH, as well as note the importance of collaboration being organised at the global level.
- Networking within and across constituencies, geographic regions and levels (global, regional national, and sub-national). An observed benefit is that PMNCH provides an opportunity for members to interact and associate with other stakeholders working in the MNCH space. For example, a developing country member noted the benefits of interaction with known stakeholders at the Partners Forum and other organised meetings/ conferences, but also the opportunities such meetings presented for better understanding the institutional landscape more generally and for meeting new partners.
- Access to information and knowledge sharing. The PMNCH provides a forum for sharing of knowledge and information. Although some consulted members have suggested that at present the PMNCH may not be their first port of call for MNCH information, this is may change as, for example, the development of the knowledge portal (PA I) progresses.
- Improved visibility of the members to the wider MNCH community. Members are listed on the PMNCH website and have an opportunity to share information of their activities with other members.

⁴² http://www.who.int/pmnch/members/join/en/index3.html



ANNEX 3: FEEDBACK ON MEMBER ENGAGEMENT AS PER THE EXTERNAL EVALUATION OF PMNCH

An external evaluation of the PMNCH was commissioned by the Board in December 2007, covering a review of the effectiveness and relevance of its activities, processes and structures. This annex summarises the key findings and recommendations of the evaluation team with respect to the PMNCH membership.⁴³

Key findings

The evaluation team pointed out the following issues with the membership structure and engagement processes:

- The contributions and obligations of the members to the PMNCH and the benefits they might derive from participation are not clear.
- There are marked differences in the level of involvement and engagement of different constituent groups.
- Members' understanding of PMNCH functions and work plan, as well as the expectations of them was limited, suggesting the need for more well-developed and systematic communication mechanisms.

On a positive note, there was broad agreement that the PMNCH has facilitated the alignment of perspectives and priorities among Health Care Professionals as a constituency, and that such internal advocacy can be extended to other constituencies as well.

Recommendations

The following recommendations were made to enhance the effectiveness of member/ partner engagement:

- Since it may not be possible to monitor whether all members, particularly the smaller ones, are committed to and working towards the goals of PMNCH, there should at least be a mechanism by which any member who appears to be promoting contrary principles is identified and the matter referred to the Chair of the Partnership.
- Regular internal advocacy and an improved website could facilitate sharing of information and experience;
 "beaming in" messages to ensure consistency and coherence within the different constituencies, members and partners of PMNCH. This could improve the coherence of external advocacy across members/partners.
- Better two-way communication channels with members need to be established. For example, the
 Secretariat could employ mechanisms such as e-bulletins, targeted mailing, updated website,⁴⁴ and e-fora
 on various interest areas. Further, some constituencies such as developing country partners may require
 support to be involved in consultation, learning and dissemination activities. Similarly, Board members can
 also reach to their constituency members (as some of them are already doing currently).
- A series of suggestions were also presented regarding the Forum:

 $^{^{43}}$ The evaluation was undertaken by HLSP and the final evaluation report was submitted in July 2008.

⁴⁴ The evaluation noted the need for greater transparency in sharing of information (such as the PMNCH work plans) to increase accountability of partners.



- The purpose and structure of future Forum meetings need to be defined clearly. It is important
 that the members find it meaningful to participate, both in terms of contributing to the agenda as
 well as sharing information, knowledge and networking.
- Greater outreach to members well in advance of the meeting will ensure a more balanced participation and increase the value and relevance of the meeting.⁴⁵
- There should be debate and discussion among the members on the new strategy of the Partnership, so that there is an understanding and buy-in of the rationalization of its priority activities.
- Opportunities should be provided for members to participate actively, through smaller focus group presentations, networking events etc.

⁴⁵ The first (and only) PMNCH Forum meeting so far in Tanzania in April 2007 attracted 230 members, of which 100 members were from North America and Europe, and the remainder from developing countries. Of the latter, over seventy were from Tanzania; and overall, fifty one attendees were employees of UN agencies.

ANNEX 4: GROWTH IN PMNCH MEMBERSHIP

This annex provides information on the growth in PMNCH membership since its inception in September 2005 to early 2009.

Figure A4.1 presents the overall increase in the membership over this period. As can be seen from the figure, the membership expanded considerably after the Partners Forum in April 2007, with the number of member organisations in Dec 2007 representing an 87% increase over that in December 2006.

Figure A4.1: Growth in PMNCH membership

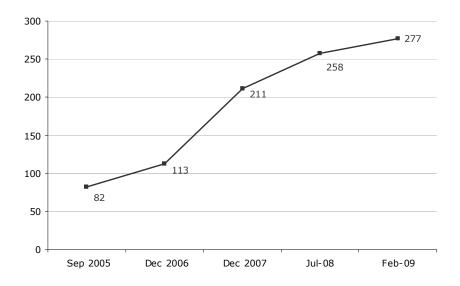
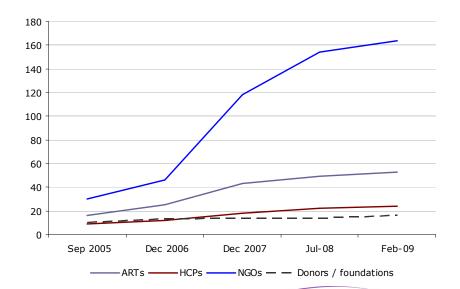


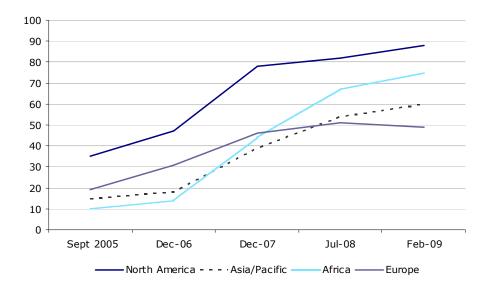
Figure A4.2 shows the break-up of the growth in overall PMNCH membership by constituency. The figure shows that most of the increase in the member base, especially after the Partners Forum was from NGOs. There has also been some increase in the ART member organisations. (Note that multilateral and partner country members are not shown in the graph below as have increased by only I-2 members each over this period).

Figure A4.2: Growth in PMNCH membership by constituency



Finally, figure A4.3 shows the growth in PMNCH membership by region. As presented in Section 2, organisations in OECD countries (primarily North America) represent the largest share of PMNCH members, however it is interesting to note from the figure, the particular acceleration in Africa based organisations between December 2006 to July 2008.

Figure A4.3: Growth in PMNCH membership by region





ANNEX 5: LESSONS LEARNT FROM OTHER GHPS

CEPA carried out desk-based research and structured interviews with select global health partnerships (GHPs) to understand how they engage with their members and any lessons thereof for the PMNCH.

Selection of case study GHPs

The case study GHPs were selected on the basis of broad similarity of the organisations with PMNCH in terms of their:

- activities (i.e. non-funding in nature);
- size (i.e. total funding contributions and activity expenditures) 46; and
- governance structure (i.e. broad and diverse group of Members from different constituencies).

The selected GHPs that we were able to contact are: the Health Metrics Network (HMN), the TB Alliance (TA), Roll Back Malaria (RBM), the Measles Initiative (MI) and the International Union Against Cancer (UICC). Table A5.1 over page provides some summary information of these GHPs, in terms of their focus and activities, total funding size and expenditure, as well as the number and type of constituency members.

⁴⁶ Larger health partnerships such as the GAVI Alliance and the Global Fund may have some lessons to offer in relation to how they involve/ manage their wider stakeholders. However, since these organisations are much larger in size than PMNCH and engage in funding activities, we do not propose to study them in detail.



Table A5.1: Summary information on the GHPs consulted

Name of GHP and objective	Indicative size ⁴⁷	Constituency members
Health Metrics Network (HMN) — to implement coordinated action against malaria by mobilising action and resources, and forging consensus amongst partners	Initial grant of \$50 m from the Bill & Melinda Gates Foundation	Eight constituencies including malaria-endemic countries, multilaterals, OECD donor countries, private sector, NGOs and community-based organizations, foundations, research and academic institutions and ex-officio members.
TB Alliance (TA) – to accelerate the development and discovery of new TB drugs that are affordable, widely adopted and available to those who need them	Total revenue in 2007: \$30m	Representatives from developing nations, governments, NGOs, professional organisations, academia, foundations and industry.
Roll Back Malaria (RBM) – to reduce malaria morbidity and mortality by providing a framework to implement coordinated action and mobilise action and resources	Board-approved budget for 2008: \$16m	Malaria-endemic countries, OECD donor countries, private sector, NGOs, multilateral development partners, foundations, research and academia and exofficio members.
Measles Initiative (MI) — to reduce measles deaths worldwide by providing technical and financial support to governments and communities in the conduction of vaccination campaigns and other interventions	The initiative has provided \$48 m in 2008 towards global measles mortality activities.	
International Union Against Cancer (UICC) – to connect, mobilise and support cancer organisations and individuals with knowledge and skills to be effective in eliminating cancer as a major life-threatening disease	Total expenditure in 2008: \$9m	Voluntary cancer societies, research and treatment centres, public health authorities, public health authorities, patient support networks and advocacy groups, ministries of health.
Stop TB – to realise the goal of eliminating TB as a public health problem by coordinating efforts of the partners involved	Total expenditure in 2008: \$70m	International organisations, Affected countries, Donors from the public and private sectors, Governmental and non-governmental organisations

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 $^{^{47}}$ All figures for size of partnership are as reported in the respective annual reports of the GHPs for the cited year.



A number of GHPs today are structured to include a wide member-base of interested stakeholders, following the general acknowledgment of the importance of involving different stakeholders in order to achieve greater potential for an organisation – most notably from the evolution of thinking on the structure of the Global Fund.⁴⁸ That said, our consultations highlighted that engagement of members has been challenging, not least due to the change of personnel within member organisations.

We first present below some general observations/ lessons learnt, followed by a more specific discussion on the areas of engagement of other GHP members (i.e. the question on 'what') and the different approaches/ processes employed (i.e. the question of 'how').

General observations/ lessons learnt

Some relevant feedback received during the consultations is discussed below.

- Important for the organisation to clearly communicate its goals and objectives to its members, and clarify the role they want their members to play. A widely held view was the need for the GHP to clearly communicate its defined goals/ objectives to all member organisations. Many consultees felt that key to the engagement of members is for them to recognise the value added of the Partnership generally, and where their organisation fits in/ benefits from active involvement specifically. Further, members should be made aware of the ongoing activities and successes of the Partnership. The organisation also needs to identify and communicate what exactly it wants from its members i.e. a defined strategy/ approach on how the members can contribute to the Partnership's activities and goals.
- Need to recognise that different stakeholders have different incentives that will determine their engagement. It is important to recognise the purpose and motivations of different member organisations to be able to best engage them. For example, academic organisations are mostly not-for-profit and do not have sufficient funding or time to participate extensively hence at best, they can be commissioned for some research work or participate in groups to contribute their knowledge/ expertise. Private corporate entities may have more funding and contribute through their Corporate Social Responsibility objectives. However, conflicts of interest need to be managed. These different incentives are important to define how different organisations may engage with the Partnership and consequently also to maintain realistic expectations on their level of engagement.
- Open criteria for membership. Most of the GHPs interviewed have open criteria for membership, i.e. any interested organisation can join as a member. Their experience has been that this is vital to enable the partnership/ alliance to really reach out, especially when the mandate of the organisation is related to advocacy, policy, and information sharing. However, the flip side of open membership is the challenges of informing and engaging with a large member base. To avoid this, some GHPs restrict their membership through selection/ application criteria, membership fees etc. 49
- Challenges of engaging a large and diverse group of members. The larger the number of members/ constituencies, the more difficult and expensive it is to (a) ensure an updated record of members' contact details, (b) keep them informed and interested in the GHP's developments and activities, and (c) involve

⁴⁸ As per Table A2.1 above, of the GHPs consulted, HMN, RBM and UICC have a particularly wide member base, with the other GHPs being relatively smaller in terms of their number of member organisations.

⁴⁹ Of the interviewed organisations, UICC was the only GHP with the requirement that member organisations should have people with a scientific background on their Boards, as well as a requirement for payment of membership fees. However, this is in keeping with the mandate of UICC and its funding structure. Also, an existing member has to provide a reference for a new joining member.





them meaningfully in the GHP's operations. The TB Alliance has limited its members to 40 through its bylaws – and yet they note that engaging members remains a challenge. In addition, some GHPs have experienced greater success in engaging certain member constituencies as against managing to engage all stakeholders. For example, HMN mentioned that they have been more successful in involving the donor community and technical experts as against civil society or the private sector; GAIN has been noted for its success in engaging the private sector; etc. It was noted that engaging with NGOs is particularly difficult as they are diverse in terms of objectives, operations and geographic spread. In general, GHPs should ease member participation so as to not impose greater bureaucracies and costs on them.

Areas of engagement of Members

Member organisations have been engaged with other GHPs in a number of different ways, including:

- Participation in the Board and its relevant committees. Members participate in the GHPs through the Board,
 Executive Committee and other committees of the Board.
- Participation in Working Groups. A number of GHPs have organised working groups that focus on specific
 aspects of the objectives and activities of the organisation. RBM, for example, has nine working groups
 (not all active at present) focusing on advocacy, communication, procurement, insecticide treated netting
 materials, etc that involve a diverse mix of interested members, including the members playing the role of
 'Chair' and 'Focal point' for these working groups. [RBM sub-regional networks]
- Direct participation/ implementation of activities. Members are also involved in the implementation of the
 activities of the GHP, whether by playing a role of a 'lead' in taking forward the priority activities, or
 through more of a contributory role. For example, UICC members are involved in a number of its
 activities including campaigns, mentorship, training, capacity building, fund raising, etc. The TB Alliance has
 contractual agreements with its partners for drug development and discovery, which forms the basis of
 their engagement.
- Participation in Member Forum (or equivalent) meetings. Other GHPs with a similar broad base of members
 also organise frequent meetings for their member organisations. RBM for example, has already organised
 five Partners Forum meetings thus far and has had a good experience with many members participating.
 Some other GHPs however have faced issues with low levels of member participation at these meetings.
- Provision of funding. Member organisations may provide funds for the overall pool of resources or for specific activities.
- General information and knowledge sharing/ networking. Member organisations generally welcome the opportunity to network and collaboratively share information by their participation in GHPs.

Approaches to Member engagement

Our consultations with GHPs identified a number of different approaches for greater Member engagement – both through their own experience as well as recommendations/ suggestions on what might work for PMNCH. These are discussed below.

Defining/ developing an activity to engage members – An option that was often suggested, was to break up
the members into smaller groups, with concrete deliverables. This could be structured in terms of the
implementation of specific activities or organising issue based meetings for a smaller subset of members.



For example, HMN has a Technical Advisory Group (TAG) that organises issue specific TAG meetings often wherein both TAG members and new interested/ relevant members are invited.

- Contracting external organisations to support activities and member engagement HMN has contracted a
 consortium led by John Snow International (JSI), managed by the Secretariat, to provide technical support
 on health information and aim to develop a network of experts in the area. This is an US\$11.5m activity,
 funded on a task by task basis. They started with five core partners from the developed countries and
 have now added 20-25 institutions from the developing world as well.
- Dedicating adequate staff time to deal with members Several GHPs have focused staff time for facilitating member engagement. HMN also has about 1.5 people working on governance structures and engaging the donors (who form 30 of their most important partners) as well as staff responsible for responding to enquiries from countries. UICC has a number of officers in charge of membership issues including recruitment and payment of fees, as well as other officers that are responsible for ongoing management/ sustaining membership. In addition, UICC also has a Membership Committee (that is a subset of the Board) to review membership applications.
- Seconding staff to member organisations An interesting approach followed by some GHPs is to second their staff to member organisations. This approach not only facilitates relationship building, but also helps advance the GHP's mandate in the member organisation more effectively. For example, we understand that HMN has paid staff working in the World Bank and the WHO to help them further their agenda in these organisations.⁵⁰
- Active role of Board members to engage the members of their respective constituency It was noted that Board members who are 'visible/ key' players in the space can help engaging the members. Board members that are known for their work in a particular area can help raise publicity in general and motivate other organisations to work more closely. This approach may however be particularly applicable for certain constituency leads such as NGOs or academic institutions. Some GHPs are represented at international conferences/ global forums by Board members, so as to increase visibility and impact. In addition, the GHP Secretariat staff may accompany their Board members to international conferences to provide support and to help publicise the role of the GHP amongst members/ potential members.
- Developing effective communication channels to update members There are a number of mechanisms employed by different GHPs, including:
 - Maintaining updated mailing lists of members for example, we understand that HMN has a strict policy on updating mailing lists after conferences.
 - Sending out weekly updates/ highlights there are mixed views as to the efficacy of this approach with some viewing passive mailing as not very effective, while others being of the opinion that frequent mailing ensures that at least once in a while, there is some information that a particular member organisation finds interesting/ relevant.
 - O Use of interactive websites/ online discussion boards a number of GHPs have employed this approach including RBM and HMN. In the case of HMN, as UN websites are prohibited from being interactive ('read only' websites), they have set up a website on 'the global health information network'. The website also enables them to send alerts to relevant members whenever new content is added in a particular interest area.

⁵⁰ HMN has two full-time paid staff at the World Bank, one of whose role is to ensure that the Bank includes information system strengthening components in their projects, and the other's is to carry out cost benefit analysis on information system investments.





ANNEX 6: MEMBERSHIP RESPONSIBILITIES

As set out in the member application form, PMNCH membership responsibilities include the following:

- Actively initiate and participate in collaborative activities to achieve MDGs 4&5;
- Support the implementation of The Partnership Work Plan and Ten-Year Strategy;
- Contribute resources to The Partnership's activities. Resources can include funding, technical expertise, staff time, and assistance with media and networking;
- Promote the principles and values of The Partnership;
- Advocate for the reduction of maternal, newborn and child mortality, and
- Share knowledge and information through various Partnership channels regarding lessons learned, success stories, case studies, program results and policy approaches that help to accelerate action towards maternal, newborn and child mortality reduction.

ANNEX 7: FACTORS IMPEDING EFFECTIVE ENGAGEMENT

This annex discusses some of the issues that have impeded effective member engagement including:

- lack of awareness about PMNCH and its activities;
- perceived lack of suitable opportunities for participation; and
- limited financial/ human resources for engagement.

These issues have been identified primarily through consultations with the PMNCH members, the Secretariat and some Board members; as well as through some of the broader issues highlighted during consultations with other GHPs.

These are discussed in turn below.

Lack of awareness about PMNCH and its activities

An important issue highlighted by a number of consultees is that they were not aware about a number of key aspects related to the PMNCH, including:

- Its objectives and strategy for example, most of the members consulted with are not aware of the 2009-I I Strategy and Workplan document.
- Understanding of member roles and expectations for example, a number of the consulted members were
 not aware that the Partners Forum was an opportunity to elect their constituency representatives to the
 Board. In addition, a number of members did not have an understanding of what the PMNCH expects
 from them.
- Communication channels and sharing information a number of members are not aware of who to contact, whether it be at the Secretariat or one of the Partners on matters ranging from obtaining information or sharing of their own updates and news.
- Organisation of meetings and conferences, including the Partners Forum meeting a number of the members
 consulted noted that they were not aware of the 2007 Partners Forum meeting or that there is a meeting
 planned for 2010.

There are a number of factors that have contributed to members' limited awareness about PMNCH. It is possible that PMNCH's recent re-organisation and changes in the Secretariat staffing has impacted the Partnership's ability to communicate with its members over the last year or so – although it is noted that the Partnerships', including the Secretariat's, communication capacity has improved considerably since the first evaluation in 2008, and hence this may be more of a reflection of the early stage of many of the measures for member engagement put in place by the Secretariat.

In addition, a number of member specific issues also contribute to lack of awareness, including:

- Limited time/ resources to read through PMNCH communication material/ website.
- Changes to personnel in the member organisations, with limited transfer of knowledge between old and new incumbents.
- Limited/ poor connectivity (internet/ telephone) an issue particularly relevant for some organisations in parts of Sub Saharan Africa.





Perceived lack of opportunities for participation

Some members noted that they would like to be more involved in the Partnership's activities, and that the Partnership mission and activities align with their organisation mandate and priorities. However, they are not aware of how they could potentially engage with and contribute to the Partnership activities.

With the recent adoption of the new 2009-11 PMNCH Strategy and Workplan in April 2009, the respective lead partners are at present developing the work under different PAs, to be taken forward over the next few years. Thus, the opportunities for engagement of members will also develop alongside the implementation of the individual PA workplans.

Another contributing factor is that many of the member organisations (for example, the NGOs, partner countries) operate at a national level. Given PMNCH's primarily global focus, it is expected that the nationally focused members will find it more difficult, not only to identify potential areas of collaboration, but also commit resources to contribute – an issue that closely links to the point below. However, they may be able to exchange common messages/ information on key MNCH issues based on national experience.

Limited financial/ human resources for engagement

A number of member organisations have noted that they do not have the requisite financial or human resources to engage/ contribute effectively to PMNCH activities.

Lack of financial resources is particularly an issue for NGOs, HCP and ART constituencies. For example, in the case of the ARTs, it is very difficult for them to obtain funding for participating in a meeting unless it is linked to a specific research output.

The partner countries also note the considerable financial and time constraints affecting their participation in international fora.





ANNEX 8: ESSENTIAL ACTIONS TO IMPROVE COMMUNICATION

Some of the potential approaches by the Secretariat and the Board to increase access to information are listed in Table A8.1. As mentioned in Section 3, some of these measures are already being carried out by the Secretariat and the Board, and may only require a greater degree of focus going forward.

Table A8.1: Potential role of different stakeholders

Responsible	Suggested list of actions
agency	Juggested list of actions
Secretariat	 Continue to update the PMNCH website regularly, potentially providing email alerts for new uploads/ information to solicit the interest of members, and encourage members to forward updates to their own websites.
	• Provide news and information on the activities and products (such as reports, publications, etc) of the PMNCH, as well as any news from the broader MNCH field, through newsletter(s), targeted emails and other relevant media (e.g. downloadable videos).
	Maintain updated contact information on member organisations.51
	• Provide members with updated information on the points of contact for different matters in the Secretariat as well as Board Members as appropriate.
	Provide new members with an information welcome pack.
	• Support Partners in participating in international conferences (by providing information on conferences/ forums organised by different organisations/ countries and where suitable, information relevant to the thematic areas of the conferences) to improve visibility, and use these opportunities to inform existing and possible new members of developments.
	• Maintain a MNCH Event calendar and distribute to all members so that they are informed on upcoming meetings, conferences and events.
	• Inform members of PMNCH's participation in conferences / seminars, inviting members who may also be participating to meet and exchange ideas during such events.
	Engage in informal channels of communication with members as appropriate.
Board members	• Keep the Secretariat and other Board members updated of the developments of different member organisations within their constituency.
	• Actively keep its constituency informed of developments in the PMNCH workplan, seeking support and involvement when appropriate.
	• Help in the welcoming/ orientation of new members from their constituency by sharing information on the Partnership.
	• Participate in global conferences to improve visibility and share information on PMNCH, where feasible, in addition to their own institutions.
	• Engage in informal channels of communication (such as meetings alongside Board meetings and MNCH events) with members as appropriate.

 $^{^{51}}$ We understand that the Secretariat has recently updated/ 'cleaned' their contacts database.