



CSO GFF Hub

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### Acronyms and Abbreviations

AHBN Africa Health Budget Network

CRHE Centre for Reproductive Health and Education

CEFOREP Centre Régional de Formation, de Recherche et de Plaidoyer en Santé de la Reproduction

CICODEV

L'institut Panafricain pour la Citoyenneté, les
Consommateurs et le Développement

CSCG Civil Society Coordinating Group for the Global Financing Facility

CSO Civil society organization

**CWGH** Community Working Group on Health

FÉNOS-CI Fédération Nationale des Organisations de Santé de Côte D'Ivoire

FP2020 Family Planning 2020

**GFF** Global Financing Facility

**HDT** Health Promotion Tanzania

The Hub Civil Society GFF Resource and Engagement Hub

MCP Multistakeholder country platform

**NESS** Niger Éducation Santé et Sport

RMNCAH+N Reproductive, maternal, newborn, child and adolescent health and nutrition

#### **About The Hub**

The Global Financing Facility (GFF) has the potential to catalyze improvements in health and quality of life for women, children and adolescents. The Civil Society GFF Resource and Engagement Hub (The Hub) is a multiyear initiative to amplify and support civil society advocacy organizations and coalitions to contribute to GFF country-level investment outcomes.

#### THE HUB'S MAIN FUNCTIONS ARE:

- 1. Delivering technical assistance, providing capacity strengthening and making engagement support grants available;
- 2. Supporting the development of resources and tools; and
- 3. Serving as a virtual forum for public information on the GFF via a dedicated website.

The Hub is independent from the GFF. We are a member of the Civil Society Coordinating Group for the GFF (CSCG), a global coalition that shares information and aligns resources and actions to promote meaningful engagement in the GFF at the international and national levels. We collaborate with the GFF Secretariat based in Washington, D.C. and foster partnerships between secretariat contacts and country-level GFF liaison officers and civil society.

The Hub is hosted at PAI, a civil society organization (CSO) that promotes universal access to sexual and reproductive health and rights through research, advocacy and innovative partnerships. Since 2015, our team has been working with CSOs in existing and prospective GFF countries on the full spectrum of reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH+N), including the social determinants of health — nutrition, water, sanitation, education, environment, social protection, child marriage, agriculture, governance and human rights. Our long history of engagement with CSO communities and our partner-driven approach to mobilizing political and financial support for RMNCAH+N at the country level provides us with unique access and potential for impact. As a result, we elevate country CSOs that can effectively engage in the GFF to drive transformational change for RMNCAH+N.



### The Value of Engaging Civil Society

In GFF countries, governments are championing efforts to improve the health of women, adolescents and children with support from bilateral and multilateral partners, the GFF Trust Fund and others. Many GFF countries have also started implementing health financing system reforms and strengthening primary health care to achieve universal health coverage. Despite these efforts, health systems are still struggling to operate optimally and meet the basic health needs of the populations they are designed to serve.

Lasting change for RMNCAH+N in GFF countries will remain out of reach without actively engaging CSOs. Civil society is integral to directing GFF Trust Fund investments where they are needed most. Through the GFF, CSOs also participate in setting national priorities, mobilizing resources and fostering mutual accountability across all actors, including the government. Civil society engagement in health sector policy and financing is a key ingredient for success in achieving sustainable domestic resource mobilization and utilization for health in GFF countries.

Amid the COVID-19 virus, civil society health coalitions in GFF countries are quickly mobilizing to support governments in navigating, planning and implementing an unprecedented pandemic response. CSOs are also working to ensure that communities are protected, engaged in the emergency response and that their access to essential health services is maintained. The Hub is adapting work plans and budgets to this new context with our civil society partners and facilitating South-South learning by connecting CSOs facing similar challenges across countries, especially those that lack experience in emergency preparedness and response to epidemics or pandemics.



### Civil Society Capacity and Financial Support Needs

The Hub's engagement is based on and driven by the expressed support needs of CSOs. In early 2019, we conducted a web-based survey to assess current capacities of GFF knowledge and skills, as well as the needs and challenges of GFF country CSOs to guide our grantmaking and technical assistance. The survey was developed in consultation with the CSCG Steering Committee and working groups and administered in both French and English to civil society in every GFF country. More than 135 respondents from 19 countries participated in the survey.

#### THE SURVEY YIELDED THREE PRIMARY FINDINGS:

1

CSOs working in the same countries have different and sometimes inadequate understandings of the GFF process. There is need for greater and more effective communication and coordination among country CSOs for meaningful engagement;

2

Transparency and accountability around the GFF at the country level are challenges for CSOs. There is need for greater transparency and open communication from the GFF around the process and actors involved, particularly decision-making in the multistakeholder country platforms (MCPs); and

3

CSOs demand increased capacity-strengthening opportunities to deepen their understanding of health financing and budget tracking, as well as the development of GFF accountability tools, such as scorecards. There is need for more South-South learning on these topics through the identification of local organizations and individuals who can provide support.

### Our Approach

### WE ARE DELIBERATE IN WHICH COUNTRIES WE CHOOSE TO ENGAGE.

We prioritize investing time and resources in countries where there are clear opportunities for civil society to participate and make important contributions to RMNCAH+N through the GFF. These openings must be matched by a civil society that has expressed desire to engage and potential CSO partners who have demonstrated the GFF's principles of engagement: inclusion, transparency and accountability at the country level.



# WE PROVIDE STRATEGIC SUPPORT BY TAILORING OUR COUNTRY-LEVEL ENGAGEMENT TO HAVE THE HIGHEST POTENTIAL IMPACT ON RMNCAH+N.



We initially analyze stakeholders and policies to assess a country's stage within the GFF process; identify the key actors, including government, CSO and development partners; and contextualize the broader policy and political environment in addition to health or development momentum.

We also coordinate with other international and regional civil society actors, as well as private foundations engaged in a country to understand their past, current or planned work and identify synergies.

### WE BUILD LONG-TERM RELATIONSHIPS WITH KEY COUNTRY AND REGIONAL PARTNERS.

CSOs have expressed a strong desire to learn from the GFF experiences of peers in other countries. We use our knowledge of civil society strengths and challenges to facilitate connections across countries and benefit similarly positioned CSOs in comparable GFF contexts. These relationships also help strengthen the capacity of our team to provide effective, strategic support.





## WE PRACTICE THE GFF PRINCIPLES OF INCLUSIVENESS, TRANSPARENCY AND MUTUAL ACCOUNTABILITY — AND WE EXPECT THE SAME OF OUR PARTNERS.

We work to emulate the principles and values of engagement that the civil society community has identified. This can involve naming existing power dynamics, like absolute respect for elders, and inviting typically marginalized voices, including youth, to share their experiences and priorities in civil society health coalitions. We rely on our knowledge, the insights of country CSO coalitions and the perspectives of our trusted strategic partners at the regional and country levels to inform our decisions.

### WE SUPPORT CIVIL SOCIETY COALITIONS TO WORK ACROSS SECTORS AND SOCIAL HEALTH DETERMINANTS.





#### WE ALIGN WORK ON THE GFF WITH OTHER GLOBAL INITIATIVES.



Through our contextual awareness, we ensure our country and global partners connect work on the GFF with broader efforts in health financing and development. We also seek input from country-level colleagues on global-level efforts to elevate their perspectives and experiences. We have supported CSOs to create health coalitions linking global health initiatives at the country level through the GFF; Gavi, the Vaccine Alliance; The Global Fund to Fight AIDS, Tuberculosis and Malaria; Universal Health Coverage 2030; Scaling up Nutrition; Family Planning 2020 (FP2020); and others.

#### WE PRACTICE MUTUAL RESPECT.

We value the different experiences of our partners and ground our work in an understanding and respect for local culture, language and customs. In this way, we prioritize local expertise and accessibility, such as publication translation, support partners to drive the pace of the work and turn to local organizations for guidance when responding to challenges.

#### **Progress Summary**

Governments and other GFF partners must meaningfully engage civil society and incorporate its contributions to meet our goal of having the greatest impact in RMNCAH+N. The factors necessary for CSOs to be best-positioned to contribute to the GFF include:

- 1. GFF knowledge;
- 2. Mechanisms for CSO coordination;
- 3. Designated representatives to engage on the government-led RMNCAH+N platform;
- 4. Identified and prioritized engagement opportunities; and
- 5. Mobilized adequate financial support to enable them to prioritize engagement and strategic technical support to help navigate the complex policy, advocacy and accountability landscapes.

These factors are the building blocks of CSO engagement in the GFF that are within the control of civil society. While an enabling environment at the country level is also necessary, this external factor is reliant on a government that invites and respects civil society contributions and gives them room to thrive.

In the first 18 months after our launch, The Hub provided CSOs in over half of the GFF countries with technical support or financial assistance combined with technical support (see Table 1). In doing so, we have contributed considerably to effective CSO engagement in the RMNCAH+N of GFF countries.

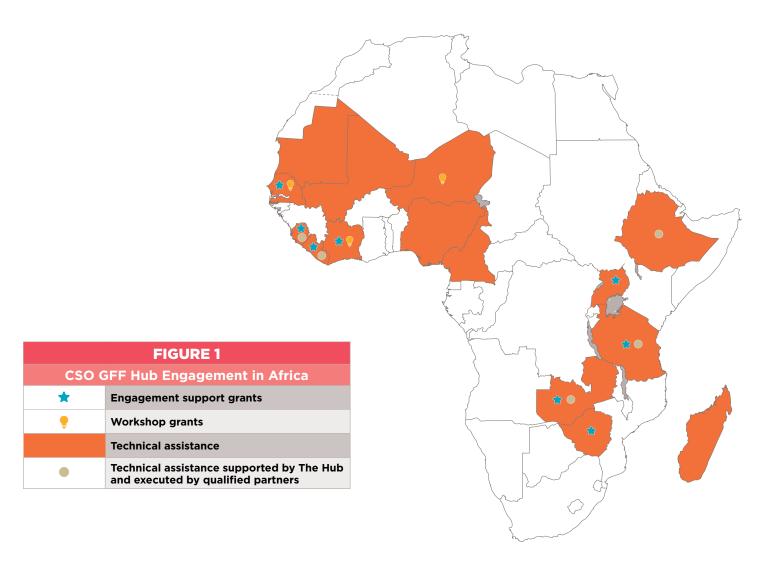
TABLE 1										
Progress Towards Meaningful Civil Society Involvement in the GFF (Nov. 2018-March 2020)										
	1. Knowledge		2. Governance	3. Representation		4. Engagement	5. Financial and Strategic Support			
COUNTRY	Civil society or CSO health coalition oriented on the GFF	CSOs connected with peers with relevant experience	CSO coalition building established, revitalized or strengthened	Two or more CSO representatives identified by civil society for MCP	Youth representative identified by civil society for MCP	Relevant advocacy and accountability priorities identified	Organization or coalition funded to implement work (The Hub grant)	Technical or strategic support to facilitate engagement and South- South learning		
Cameroon	N/A	X						x		
Côte d'Ivoire	X	X	x	x	x	X	X	x		
Ethiopia	N/A	X (@)						X (@)		
Liberia	N/A	X (@)	X			X	X	x		
Madagascar	N/A	X						x		
Mali	X	X						X		
Mauritania	х	Х						X		
Niger	х	X	X	x	X	_		x		
Senegal	х	X	X	X	X	х	х	X		
Sierra Leone	X (@)	X (@)					х	X (@)		
Tanzania	N/A	X (@)	X			X	х	x		
Uganda	N/A	X	x			х	х	x		
Zambia	X (@)	X	X	x	x	X	х	х		
Zimbabwe	X	Х	x	~	x	x	х	x		
^		ally met Outcor	(@) net Outcome supported by The Hub and executed by qualified partners			N/A Outcome is not relevant given the context				

### Technical and Financial Support

The Hub addresses the gaps identified by country-level civil society health coalitions, primarily through financial and technical support. We accept grants on a rolling basis throughout the year, and CSOs in any GFF country are eligible to apply. Our initial proposal requests were disseminated in April 2019 and after receiving 32 applications through that process, we issued 11 grants to CSOs working on the GFF (see Table 2).

We have built strategic relationships and maintain regular contact with nonfunded partners to share goals and approaches. The presence of these partnerships across GFF countries helps us to understand our partners' successes, needs and challenges. Given this knowledge, we can discuss ways to collaborate, make connections between colleagues doing similar work and identify country- or global-level advocacy and accountability opportunities.

The Hub also produces resources with relevant information, experiences or lessons for CSOs in GFF countries. These resources include our case study documenting the experience of civil society in Côte d'Ivoire engaging the GFF and our report assessing the functionality of government-led MCPs, the cornerstone of GFF implementation.



#### ENGAGEMENT SUPPORT

The Hub's grants are primarily for engagement support, including CSO orientation and coalition building; advocacy and accountability; and maintaining momentum (see Table 2).

#### ORIENTATION AND COALITION BUILDING

In new GFF countries, we have focused on providing orientations and facilitating CSOs working across health, nutrition and governance to form a coalition or multisectoral working group on the GFF. In Zambia, where civil society is organized and well connected with the government but also new to the GFF, we provided the Centre for Reproductive Health and Education (CRHE) with support to mobilize and coordinate with health-focused CSOs and engage in the investment case development process. With our support, CRHE hosted a technical assistance exchange with a Nairobi-based GFF expert who provided an overview of the GFF process and shared experiences. In Zimbabwe, we supported the Community Working Group on Health (CWGH) to kick-start CSO engagement in the GFF process and organize a coalition of health- and rights-focused civil society.

#### ADVOCACY AND ACCOUNTABILITY

In countries that have been part of the GFF for many years, we are focused on supporting civil society to evaluate the intended impact of governmental participation in the GFF for advocacy and accountability efforts. We are supporting a coalition in Liberia, a CSO in Uganda and a dynamic youth-led organization in Senegal to work with communities in priority regions to monitor implementation of the GFF-funded project. In Tanzania, our partner Health Promotion Tanzania (HDT) is strengthening its advocacy and accountability efforts through a comparative analysis of the GFF's performance report and the government-produced RMNCAH+N scorecard.

The Hub has been engaged in Côte d'Ivoire since our launch, building off the previous work of other members of the CSCG. Fédération Nationale des Organisations de Santé de Côte d'Ivoire (National Federation of Health CSOs in Côte d'Ivoire, FENOS-CI) is a well-established CSO health coalition, but with our support, it expanded upon the government-led GFF action plan by identifying CSO contributions, which were incorporated into the country's investment case. Civil society also had a strong presence in the National Dialogue on Health Financing, a pivotal moment in Côte d'Ivoire's engagement around RMNCAH+N. As a result, the vice president endorsed the CSO roadmap and the GFF-funded project included an investment in community monitoring. Together with FENOS-CI, we are now looking at ways to increase citizen engagement through social accountability mechanisms.

Community health facilitator Nzeba Roukiya discusses family planning methods with women at a mosque after prayers. (Democratic Republic of the Congo, Sept. 2016)



#### **MAINTAINING MOMENTUM**

In some GFF countries, the CSO health coalition hit a roadblock, despite strong latent capacity and potential for impact. In such cases, we provide behind-the-scenes technical support to help organizations adapt governance structures and work plans, renew dialogue with the ministries of health and take advantage of available resources.

In Uganda, the RMNCAH coalition was strong for years but had recently lost its energy. Our team engaged the coalition on updating its governance, identifying investment case and project monitoring priorities and — as the initial GFF-funded project comes to an end — preparing to contribute to the lessons learned. In Senegal, we have been working with the coalition to reinvigorate its governance structure and leadership and determine priority accountability actions moving forward. In Sierra Leone, the GFF process itself has been stalled for many years, with no funding having reached the country yet. With support from Abujabased Africa Health Budget Network (AHBN), we are supporting civil society in Sierra Leone to better understand the GFF context and how to overcome these challenges.

Before the COVID-19 pandemic, both Tanzanian and Liberian governments had begun planning for the next phase of the GFF. We are currently working with CSO colleagues in these countries to adapt their project work plans and budgets to the new context with restricted movement. We are confident that when social interaction resumes, CSO coalitions in these countries will be able to take advantage of the opportunity to review lessons from the first investment case and GFF-funded projects that should be addressed in the next iteration.

#### **GLOBAL GOODS**

The Hub funds global goods, or tools and resources, that are intended to benefit CSOs working on the GFF across countries. We have supported AHBN to produce the Spotlight on GFF, a guide for CSOs that highlights the essential aspects of the GFF in a particular country. This tool will be combined with peer-to-peer mentorship from AHBN to assist four country CSO coalitions — in Ethiopia, Liberia, Sierra Leone and Tanzania — in adapting the Spotlight for their own engagement. Throughout a country Spotlight production, CSOs also develop skills to analyze their country's investment case and health sector funding from the GFF and domestic resources.

#### WORKSHOPS

The Hub has cohosted two CSO orientation and capacity strengthening workshops. With our sponsorship, our CSO partners have held four additional convenings. We have also cofinanced one regional skills workshop as well as the annual CSO event around the GFF Investors Group meeting, supported by The Partnership for Maternal, Newborn & Child Health and the GFF Secretariat.

Our approach to technical support is illustrated by the August 2019 workshop for capacity strengthening and resource mobilization that we hosted in Dakar, Senegal with CSO representatives from 13 Francophone countries. For the event's logistics, we collaborated with L'institut Panafricain pour la Citoyenneté, les Consommateurs et le Développement (Pan-African Institute for Citizenship, Consumers and Development, CICODEV). This four-day workshop, facilitated by colleagues from Burkina Faso, Côte d'Ivoire and Senegal, included an orientation for civil society in Chad, Mauritania and Niger as new GFF countries. The workshop equipped participants with the basic inputs to design effective projects and develop proposals for funding. It also strengthened participants' capacity in strategic planning, particularly to develop a project logic framework linking objectives, activities and a budget. A donor roundtable with the Open Society Initiative



for West Africa and FP2020 provided the chance for several participants to discuss ways to better respond to funding opportunities for their specific areas of work.

On behalf of the CSCG, The Hub began developing CSO contacts in most of the nine countries that joined the GFF in July 2019. In January 2020, we responded to the invitation of participants from the Dakar orientation with a workshop in Niamey, bringing together CSOs working on health rights across Niger. We partnered with Niger Éducation Santé et Sport (Niger Education, Health and Sport, NESS) to provide logistics for the meeting and invited a colleague from Centre Régional de Formation, de Recherche et de Plaidoyer en Santé de la Reproduction (Regional Center for Training, Research and Advocacy in Reproductive Health, CEFOREP) to share their experience with the GFF process in Senegal. CEFOREP also co-facilitated the workshop to determine the best CSO health coalition steering committee and broader governance structure through an open and transparent process. In February 2020, our team also facilitated a workshop in Harare to help civil society identify coordination tactics and define priorities for Zimbabwe's fast-tracked investment case.

For each of these workshops, we worked with a local organizing team to develop a meeting agenda that is highly relevant and respects local protocols and customs, such as which official should preside over the opening ceremony and designating breaks or prayer time. We also invited CSO colleagues from the region — Kenya in Zimbabwe and Senegal in Niger — who practice the GFF principles of participation, transparency and accountability to co-facilitate the workshops and share their experience navigating within civil society and between CSOs and the government as part of the GFF process. Our approach, based on mutual respect, is critical to ensure positive workshop outcomes and build long-term partnerships.

These in-person workshops also serve as networking opportunities, which colleagues have used to build virtual knowledge and exchange platforms and to create synergies across countries and networks. CSOs are now collaborating through WhatsApp, including two Francophone groups and one youth group, to share opportunities, knowledge and useful information. We recognize that the impacts of this networking are difficult to measure, but through these exchanges, CSOs are forming lasting relationships.

TABLE 2							
The Hub Grants Issued as of March 2020							
CIVIL SOCIETY ORGANIZATION	COUNTRY	GRANT AMOUNT					
A. Engagement Support		\$257,368.00					
AHBN	Regional	\$30,000.00					
Alliance Nationale des Jeunes pour la Santé de la Reproduction et de la Planification Familiale (ANJ-SR/PF)	Senegal	\$30,000.00					
CRHE	Zambia	\$29,502.00					
сwgн	Zimbabwe	\$29,618.00					
FENOS-CI	Côte d'Ivoire	\$26,000.00					
Health Alert	Sierra Leone	\$10,000.00					
HDT	Tanzania	\$30,183.00					
Public Health Initiative Liberia (PHIL)	Liberia	\$27,540.00					
Rwenzori Center for Research and Advocacy (RCRA)	Uganda	\$30,000.00					
Uganda Youth Platform	Uganda	\$14,525.00					
B. Global Goods		\$10,000.00					
AHBN	Nigeria	\$10,000.00					
C. Workshops		\$150,818.69					
CICODEV	Senegal	\$89,702.05					
FENOS-CI	Côte d'Ivoire	\$41,000.00					
NESS	Niger	\$20,116.64					
	GRAND TOTAL	\$418,186.69					

#### Lessons Learned

Since the GFF's launch in 2015, civil society's ability to work through its partnership to contribute to RMNCAH+N outcomes has advanced considerably. Between 2016 and 2017, the GFF Secretariat partnered with the CSCG to develop a strategy and guidance for countries on how to maximize the value of civil society. With the advent of financial support for CSO engagement in 2018, through The Hub and other small grants mechanisms, this progress has accelerated.

### BELOW ARE THE LESSONS WE HAVE LEARNED OVER THE PAST FIVE YEARS:

1. Strategic and technical support for civil society engagement greatly enhances the value of funding for GFF country partners.

Our knowledge of the country and global contexts enables us to make connections between the work that our partners are currently doing and where they can expand or deepen engagement for greater impact. For example, we often challenge coalitions and partners at the early stages of the GFF process to go beyond the investment case and GFF funding, and use the GFF to build momentum in the health financing agenda and move countries closer to universal health coverage.

2. Well-functioning CSO coalitions require sustained effort and engagement.

When coalitions have the support of a neutral team aware of existing power dynamics to facilitate difficult conversations, together, they can review the ways of engaging in the GFF at the outset and reach a consensus. As the coalition engages and these dynamics evolve, this support shifts toward regular coaching with members. At different moments, coalitions request skilled, context-specific facilitation to assess their approach and develop strategies, both for engagement and resources. These objectives cannot be achieved in one workshop. Our team estimates that Senegal — which is often heralded as a model of CSO engagement — took at least five in-person workshops or facilitated conversations and ongoing coalition mentorship to achieve its early success. Afterward, when the coalition began facing additional challenges, a moderated dialogue helped to get them back on track.

3. Promoting the GFF's principles of engagement among civil society is challenging and rewarding.

Our approach to CSO engagement in the GFF must be driven by the civil society coalition itself based on skilled facilitation with knowledge of the country context and awareness of power dynamics. In the end, we are confident that the investments in CSO representation and internal accountability mechanisms within the coalitions will drive meaningful engagement in MCPs and contribute to the CSCG.



#### 4. Independent funding and operating structures have enabled a focus on civil society advocacy and accountability.

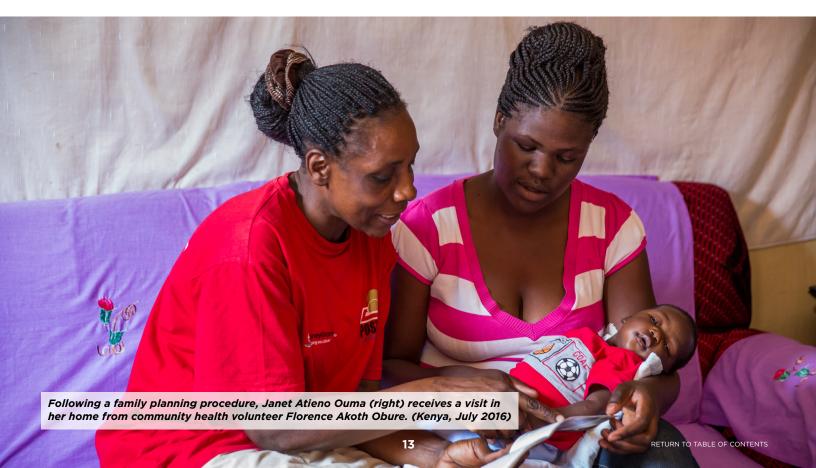
The separation between the governments and other partners setting the rules of engagement and civil society has enabled us to enhance CSO advocacy and accountability. The Hub is also able to more clearly balance interests, meet demands and set expectations due to independent funding. Our primary accountability is to the CSO coalitions we support and the funders who make this work possible. As a result, we are able to speak up when there are challenges that hamper civil society's ability to carry out its roles, while at the same time, linking country efforts to global advocacy to influence the GFF's guidance for governments.

#### 5. Country-level improvements will influence broader systemic change for maximum effect.

The Hub is active in half of the 36 GFF countries, and we are deeply invested in 11 of them. For the broader system of country representation to feed into global advocacy and learning, the majority of GFF countries need to have CSO coalitions that understand the GFF and have a defined governance structure and representation. Furthermore, there should be CSO representatives that are elected in a transparent and participatory country-driven process, as well as focal points who can bring their concerns and experiences to participate in the CSCG. The Hub is contributing to this effort but operates within a larger system for effective global advocacy and accountability, which requires a coordinated approach with the GFF Secretariat across countries to have the greatest impact.

#### 6. The Hub has supported many partners to accomplish great work, but our reach is limited by resource constraints.

More funding is needed to financially and strategically support CSO engagement in all 36 GFF countries. The Hub has received requests from civil society in Asia and Latin America, where CSOs are primed and ready for engagement. With additional, sustained financial support, our scale-up will be bolstered by network building, mentorship and South-South learning.



### Looking Ahead

Looking ahead, we are applying these lessons to our engagement. As the world is confronting COVID-19, we support CSOs advocating for governments to maintain essential RMNCAH+N services and involve communities in decision-making. A key piece of this work is our ongoing efforts to bolster civil society health coalitions, which are proving essential to coordinate CSO engagement in the GFF and emergency response. The Hub will continue supporting CSO health coalitions to adapt their internal work and external engagement with communities and policymakers while limiting physical contact.

As the GFF matures, we are observing the initial GFF Trust Fund investments in Uganda, Liberia, Tanzania and other countries conclude; reviewing progress achieved; and determining how to improve in the future. The Hub is working with partners in these countries to contribute to the review processes and ensure that lessons learned from the first phase are incorporated in continuation plans.

The true test of the GFF partnership is in its power to transform the lives of women, adolescents and children in the most vulnerable communities. The Hub is excited that GFF Trust Fund projects in Côte d'Ivoire, Senegal, Uganda and other countries are planning and budgeting for communities to play a social accountability role in monitoring the results of investments. We will continue supporting our partners to bring community experiences to national-level RMNCAH+N advocacy by documenting and sharing civil society social accountability guidance across different country contexts.

#### **About PAI**

At PAI, we are motivated by one powerful truth: A woman who is in charge of her reproductive health can change her life and transform her community.

Our mission is to promote universal access to sexual and reproductive health and rights through research, advocacy and innovative partnerships. Achieving this will dramatically improve the health and autonomy of women, reduce poverty and strengthen civil society.

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