

**Special Initiative  
Activity Plan**

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**The Role of Non-  
Governmental  
Organizations in  
Health Sector Reform**

*March 1998*



Partnerships  
for Health  
Reform



Abt Associates Inc. # 4800 Montgomery Lane, Suite 600  
Bethesda, Maryland 20814 # Tel: 301/913-0500 # Fax: 301/652-3916

*In collaboration with:*  
Development Associates, Inc. # Harvard School of Public Health #

## **Abstract**

This Activity Plan outlines proposed objectives and activities for PHR's Special Initiative on the Role of Non-Governmental Organizations (NGOs) in Health Sector Reform. The long-term goal of this activity is to improve the mix of public-private (including NGO) provision of priority health services (family planning, reproductive health, child health, and HIV/AIDS) to increase access to sustainable, quality, low-cost services, especially for the under-served. The specific objectives of this initiative are to: 1) increase collaboration between NGOs and governments in policy dialogue, policy formulation, and implementation for health sector reforms affecting priority services in applicable countries; and 2) increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs (e.g., performance contracts, subsidies, grants, etc.) for improved use of NGO resources affecting priority services in applicable countries. To meet these objectives, the Project will conduct a series of case studies on NGO influence and involvement in health policy changes; conduct an evaluation of the effectiveness of different implementing mechanisms/arrangements between governments and NGOs; develop a series of policy briefs, guidelines, and other tools and methodologies based on the above research in order to guide governments and NGOs in collaborating in policy dialogue, formulation, and implementation; and hold a series of workshops and conferences to build capacity in government/NGO collaboration and to refine and disseminate the research findings, tools, and methodologies developed under this initiative. Other information dissemination activities will include disseminating all reports, tools, and other products through PHR's Web site, and developing a final "lessons learned" document which summarizes the major findings of this initiative and their implications.

# Special Initiative Activity Plan

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## The Role of Non-Governmental Organizations in Health Sector Reform

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## Acronyms

<b>CA</b>	Cooperative Agency
<b>CEDPA</b>	The Centre for Development and Population Activities
<b>COTR</b>	Contract Officer’s Technical Representative
<b>EDI</b>	Economic Development Institute (World Bank)
<b>EPI</b>	Expanded Programme of Immunization
<b>FPMD</b>	Family Planning Management and Development Project
<b>FTP</b>	File Transfer Protocol
<b>GEM</b>	Global Excellence in Management Initiative
<b>LAC</b>	Latin America and the Caribbean
<b>MAR</b>	Major Applied Research
<b>MOH</b>	Ministry of Health
<b>MOST</b>	Management and Organization Sustainability Tool
<b>NGO</b>	Non-Governmental Organization
<b>PAHO</b>	Pan American Health Organization
<b>PDF</b>	Portable Document Format
<b>PHN</b>	Population, Health and Nutrition (Center)
<b>PHR</b>	Partnerships for Health Reform Project
<b>PROFIT</b>	Promoting Financial Investments and Transfers
<b>PVC</b>	Private Voluntary Cooperation Office of USAID
<b>PVO</b>	Private Voluntary Organization
<b>UNDP</b>	United Nations Development Program
<b>URL</b>	Universal Resource Locator
<b>USAID</b>	United States Agency for International Development



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# Executive Summary

The topic of non-governmental organizations and their role in health sector reform was selected by the United States Agency for International Development (USAID) and the Partnerships for Health Reform (PHR) Project as one of several PHR Special Initiatives, in which the Project will provide assistance to the Center for Population, Health and Nutrition (PHN) to achieve its “results” for global leadership. These results are: “improved policies and policy environment, increased capacity, and increased public and private resources available for family planning, reproductive health, child health, and HIV/AIDS services.” The PHR Special Initiative on NGOs will contribute to these results by informing and guiding thinking; developing and disseminating tools and methodologies; promoting the exchange of ideas and experiences; and demonstrating successful field approaches on the role of NGOs in health sector reform.

The purpose of this Special Initiative is to guide countries in determining and achieving the appropriate role of NGOs and to form effective government/NGO partnerships to advance health sector reform goals. The overall long-term **goal** defined for this initiative is “an improved mix of public-private (including NGO) provision of priority health services to increase access to sustainable, quality, low-cost services, especially for the under-served.”

PHR will approach this goal from two key aspects: 1) the potential influence or involvement of NGOs in health policy change, and 2) specific mechanisms governments can use to more effectively utilize NGO resources to deliver essential health services. The two specific **objectives** of this initiative are therefore to:

1. Increase collaboration between NGOs and governments in policy dialogue, policy formulation and implementation for health sector reforms affecting priority services (family planning, reproductive health, child health, and HIV/AIDS) in applicable countries; and
2. Increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs for improved use of NGO resources affecting priority services in applicable countries.

“Applicable countries” refers to countries where collaboration between the government and NGOs in the health sector is considered feasible and beneficial, since this will not be the case in all countries.

To meet these objectives, this initiative will conduct field research and develop and disseminate tools and methodologies that will center around the following issues and questions:

- ▲ Are there examples of NGOs in developing countries that have had an influence or played a direct role in designing and implementing national or local health policies? In which countries has this occurred, and what types of NGOs were involved?

- ▲ How did the NGOs influence or become involved in the development and implementation of health policy reforms? What specific issues were the NGOs most concerned with, and what types of policies did they have the greatest impact on?
- ▲ Are there examples of NGOs and governments dividing up roles and responsibilities to improve health services? How is this working?
- ▲ Has USAID or other donors played a role or had an influence in improving the policy environment for NGO advocacy and participation in the health sector? If so, what lessons can be learned from this experience?
- ▲ What were the environment factors, such as laws, policies, and regulations, that enabled or constrained NGO participation in health sector delivery and in health sector reform? How were these constraints overcome?
- ▲ What specific financing mechanisms or other arrangements (e.g., various types of government subsidies, contracting-out services, fund-holding mechanisms, non-financial incentives) did governments use to involve the NGOs in health service delivery and in the implementation of health sector policy reforms? What has been the impact of these mechanisms and arrangements between NGOs and governments on access, sustainability, and efficiency of health services? What effect have they had on the sustainability of the NGOs? Which of these mechanisms were most effective and why?

The main **activities** that this Special Initiative will conduct are:

1. Case studies on NGO influence and participation in the formulation and implementation of health sector policy reforms;
2. A comprehensive evaluation of different mechanisms/arrangements between governments and NGOs (e.g., performance contracts, subsidies, grants, fund-holding mechanisms) and their effectiveness in improving access, sustainability, and efficiency of priority health services;
3. Development and dissemination of guidelines, policy briefs and other tools and methodologies to guide governments and NGOs in collaborating in policy dialogue, formulation, and implementation;
4. Series of regional capacity-building workshops attended by government policy makers and NGO representatives to discuss research results and lessons learned, and to develop, test, and disseminate tools and methodologies in order to enhance their capacity to work effectively together in formulating and implementing health sector reforms; and
5. Information dissemination and capacity-building activities, including: national workshops to disseminate the findings of the research studies in each country; an NGO Web page on PHR's Website to disseminate research findings, PHR products, and updated information, and to allow NGOs world-wide to share information with each other; an international lessons-learned conference on the

role of NGOs in health sector reform; and a final “lessons learned” document which summarizes the major findings of the research and their implications.

The **intermediate results** of this initiative, which PHR hopes to achieve during the life of this project, are:

1. Tools and methodologies for more effective collaboration between governments and NGOs in policy dialogue, policy formulation and implementation (e.g., policy briefs, guidelines, options for laws and regulations) identified, developed, evaluated, and widely disseminated in a user-friendly format; and
2. Effective mechanisms and arrangements between governments and NGOs to further health sector reforms (e.g., performance contracts, operating grants, fund-holding mechanisms) identified and evaluated, and findings widely disseminated in a user-friendly format.

The activities and the corresponding objectives and results are summarized in *Figure 1* on *page 10*. The indicators to measure the success of this Special Initiative are shown in *Figure 2* on *page 28*.

This Special Initiative will be managed by a Program Manager/Analyst, who will devote half-time to this activity; a Technical Advisor with extensive NGO experience, who will devote approximately one-third time; and a Research Analyst and Project Assistant, both at one-third time. Many of the activities in the field will be carried out by consultants and by local firms and individuals from the countries or regions where the activities will take place. The estimated budget for this initiative is approximately \$1.6 million over a three-year period.

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# 1.0 STRATEGIC FRAMEWORK

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## 1.1 PHR Special Initiatives: Purpose and Role in Furthering PHN Center Global Leadership Results

Special Initiatives of the Partnerships for Health Reform (PHR) Project are designed to assist the Population, Health, and Nutrition (PHN) Center to achieve its objectives related to providing “global leadership” in key health and population areas. The PHN Center “results” for global leadership can be summarized as:

improved policies and policy environment, increased capacity, and increased public and private resources available for family planning, reproductive health, child health, and HIV/AIDS services.<sup>1</sup>

To contribute to these global leadership results in the area of health sector reform, the PHR Project uses the following strategies for its Special Initiatives:

- ▲ inform and guide discussions on critical health reform issues, concepts, and methods that individual countries and the international community are debating;
- ▲ provide information to advance knowledge and methodologies for developing, implementing, and monitoring health reforms and their impact;
- ▲ promote the exchange of ideas and experiences among donors, country policymakers, and other international health leaders about successful approaches to health policy management, financing, and service delivery; and
- ▲ demonstrate successful field approaches to health reform that result in meeting key PHN program objectives (e.g., improved access to higher quality health services, greater equity, and health service delivery arrangements that are affordable to a majority of people in a variety of country settings).

These initiatives, in contrast to technical assistance to specific countries, provide the opportunity to conduct cross-country research; develop, test, and disseminate tools, methodologies, and approaches in different countries; and bring people and groups from different countries and regions together to share experiences, ideas, and knowledge. Technical assistance to the countries and NGOs involved in the research and dissemination activities of the initiative will also be provided, as appropriate, while these activities are taking place. Follow-up technical assistance can also be provided in countries where PHR already has a technical assistance program; in fact, priority will be placed in selecting countries for the field

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<sup>1</sup>These four types of services are referred to as “priority services” throughout this Activity Plan.

activities where PHR is already working.

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## 1.2 Rationale for Selection of NGOs as the Focus of a PHR Special Initiative

As it is increasingly recognized that national governments in many less developed countries are struggling with limited resources to meet the basic health needs of their populations, especially given the trend of declining economic conditions and declines in government health expenditures, increased attention has been paid to the role of the private sector, including non-governmental organizations, in the delivery of health and population services. This increased attention to the role of health NGOs has also been a result of the growing trend in many countries towards the decentralization of health systems and other health sector reforms. Donors and the international health community often view NGOs as essential to achieve these reforms, since they often perceive NGOs as being able to provide higher quality services more efficiently and cost-effectively than governments, having strong links with local communities, being able to reach the poor, and being more innovative and flexible than governments.

As a result, donors have directed more technical assistance and funding in recent years towards indigenous NGOs working in the health and population sector. Half of the World Bank's projects implemented since 1994 involve the participation of local NGOs. USAID has created a number of NGO umbrella and co-financing projects (e.g., the Mali PVO Co-Financing Project and the SHARED Project in Malawi) that provide funding and institution strengthening to local NGOs, often through US-based PVOs. Many USAID bilateral health and population projects also support local NGOs, and some have even helped to create new NGOs, such as PROSALUD in Bolivia. In addition, there are a number of centrally funded projects that provide technical assistance and training to local NGOs to strengthen their planning, management, and technical capabilities, including the Family Planning Management and Development Project (FPMD) and the PROFIT Project which support NGOs working in family planning; and the PVO/NGO Initiatives Project (PIP), and the Global Excellence in Management (GEM) Initiative, both run out of USAID's Private and Voluntary Cooperation (PVC) Office. There are also efforts by multi-lateral organizations to strengthen the capacity of indigenous NGOs, including the Strategic Planning and Management for Francophone African NGOs run by the World Bank's Economic Development Institute (EDI), and the creation of NGO centers by the United Nations Development Program (UNDP).

Given the increased attention paid by donors and national governments to NGOs as key providers of health and population services, and even as players in the development and implementation of decentralization and other health sector reforms, the USAID COTR and PHR project management decided to develop a Special Initiative that focuses exclusively on NGOs and their actual and potential role in affecting health policy changes and reform. This topic is also appropriate for the PHR Project, because one of the nine core areas in the Project contract involves "private sector initiatives, strengthening public-private cooperation, and NGO management."

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## 1.3 Identifying and Selecting Topic Areas, Problems and Issues to Address under the NGO Special Initiative

### 1.3.1 Defining NGOs for this Initiative

Most of the NGOs that this initiative will focus on meet the following World Bank definition of NGOs: “groups and institutions that are entirely or largely independent of government and characterized primarily by humanitarian or cooperative, rather than commercial objectives...that pursue activities to relieve suffering, promote the interests of the poor, protect the environment, or undertake community development.”<sup>2</sup> We further define NGOs for the purpose of this initiative as non-profit-making organizations outside of state control.

Our focus will be on indigenous (“Southern”) NGOs that work in the health/population sector, and include both advocacy and service delivery organizations. The range of NGOs that will be covered by this Special Initiative include: organizations run by individuals, church- or religious-based organizations, membership organizations (e.g., milk cooperatives), umbrella or intermediary NGOs in developing countries (i.e., CCA-ONG in Mali), as well as grassroots organizations. They will also range in scope from localized (e.g., district-level) groups to national-level organizations, including umbrella or intermediary organizations.

Although the focus will be on indigenous NGOs, important lessons learned and experiences from “Northern” PVOs will also be included, where relevant.

### 1.3.2 Defining Health Sector Reform

PHR has defined health sector reform as: “a process that improves national policies, programs, and practices through changes in health sector priorities, laws, regulations, organizational structure, and financing arrangements. The goals are to improve the access, equity, quality, efficiency, and sustainability of health systems.”

In partnership with local stakeholders (which in this initiative will be NGOs, local and national government officials, and other policymakers), PHR promotes an integrated approach to health reform and builds capacity in the following key areas:

- ▲ policy formulation and implementation
- ▲ health economics and financing
- ▲ organization and management of health systems

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<sup>2</sup>World Bank. *Operational Directive on NGOs* (August 1989), cited in Matthias, A.R. and Green, A.T. (1994), “The Comparative Advantage of NGOs in the Health Sector— A Look at the Evidence.” *World Hospitals*, 30(1).

PHR advances knowledge and methodologies to develop, implement, and monitor health reforms and their impact, and informs and guides the exchange of knowledge on critical reform issues. The NGO Special Initiative will inform and promote policy dialogue between NGOs and governments to support health sector reforms that ensure equitable access to efficient, sustainable, quality priority health services. This initiative will also inform USAID Missions, Agency professionals, other donors and key actors involved in health reform of important lessons learned and effective and innovative approaches using NGOs to reach the PHN Center Global Leadership result of “improved policies and policy environment, increased capacity, and increased public and private resources available for priority services.”

### **1.3.3 Selecting Major Topic Areas**

In developing this Special Initiative, PHR has formed a panel of experts from both within and outside of PHR who have experience working with NGOs in developing countries. These experts are providing guidance to the Project in developing the goals and objectives of the initiative, and in planning specific activities. The panel first met to discuss the topic of NGO sustainability, which was the initial focus of this Initiative. (PHR had earlier developed a paper which reviewed the types of activities and approaches that indigenous NGOs are using to become sustainable and what donors and international agencies are doing to assist NGOs in achieving greater sustainability.) The panel and project management reviewed and discussed what PHR could contribute to the topic of NGO sustainability, in light of the work of other cooperating agencies and donors in this area (see *Section 1.3.7*), and the most appropriate role for PHR, given its focus on health sector reform. During these discussions, two major issues kept arising that participants felt were critical to the topic of NGO sustainability and which should be addressed as well. These are:

1. the relationship between NGOs and national governments, including any formal financing mechanisms and the role of NGOs in health policy development; and
2. the question of the actual contribution and effectiveness of NGOs in improving access, equity, efficiency, sustainability, and quality of health services, especially to the under-served.

Consequently, it was decided to broaden the topic of this Special Initiative to the role of NGOs in health sector reform, although the issue of sustainability would continue to be an area of focus. For the second panel meeting, a discussion paper was prepared, which outlined issues and activities under four possible topic areas: the two above, as well as: 1) increased exchange of information and experience among NGOs and governments concerning the role of NGOs in the health sector and in health reform; and 2) the relationship and role of USAID and other donors with indigenous NGOs. The panel selected the NGO/government link, and the issue of NGO effectiveness and contribution as the top priorities, but recognized as well the importance of information exchange and dissemination. The relationship between USAID and indigenous NGOs was accorded a lower priority by the panel, but will be addressed in all of the activities that the initiative will carry out.

### **1.3.4 Overall Long-Term Goal for this Initiative**

PHR has developed the following long-term goal of this initiative, which is the intended outcome after a five- to seven-year period in a number of USAID-assisted countries:

an improved mix of public-private (NGO) provision of priority health services to increase access to sustainable, low-cost, quality services, especially for the under-served.

### **1.3.5 Identifying Problems to Address**

There are a number of problems or obstacles to reaching the desired result of an improved public-private mix (including NGOs) in many countries. Many of these problems stem from the fact that, despite increased recognition over the last decade of the often important contribution that NGOs make in providing priority health services to under-served and vulnerable populations, governments and NGOs rarely collaborate to achieve health reforms and policies, expand health coverage, maximize scarce resources, improve efficiency, or resolve serious health problems. Some of the underlying reasons for this lack of collaboration include:

- ▲ Government officials and policymakers are often not sufficiently aware of either the scope of NGO activities nor the level of resources managed by NGOs in their countries;
- ▲ NGOs often tend to choose to work in isolation and may fear government interference in their activities at the national and local levels;
- ▲ Laws may exist that obstruct, prevent, or impede the successful implementation and expansion of priority health services by NGOs to under-served and vulnerable populations. An example is the national law in Brazil that prohibits any NGO from charging fees for health services;
- ▲ Financial, managerial and time constraints often prevent NGOs from participating in the health reform process and in expanding services to under-served populations;
- ▲ There may be insufficient recognition of the potential for NGOs to contribute to the health sector reform process, and/or lack of knowledge on how to facilitate their participation in the formulation of health policy reforms;
- ▲ Government officials and policymakers often lack knowledge regarding important experiences and lessons learned as well as tools and methodologies available from NGOs from within their countries, their regions, or internationally.

### **1.3.6 Identifying Issues and Research Questions**

Based on the selection of problems to address above, PHR staff and panel members identified the following specific issues and research questions for this initiative to address. These are as follows:

- ▲ Are there examples of NGOs in developing countries that have had an influence or played a direct role in designing and implementing national or local health policies? In which countries has this occurred, and what types of NGOs were involved?
- ▲ How did the NGOs influence or become involved in the development and implementation of health policy reforms? What specific issues were the NGOs most concerned with, and what types of policies did they have the greatest impact on?
- ▲ Are there examples of NGOs and governments dividing up roles and responsibilities to improve health services? How is this working?
- ▲ Has USAID or other donors played a role or had an influence in improving the policy environment for NGO advocacy and participation in the health sector? If so, what lessons can be learned from this experience?
- ▲ What were the environment factors, such as laws, policies, and regulations, that enabled or constrained NGO participation in health sector delivery and in health sector reform? How were these constraints overcome?
- ▲ What specific financing mechanisms or other arrangements (e.g., various types of government subsidies, contracting-out services, fund-holding mechanisms, non-financial incentives) did governments use to involve the NGOs in health service delivery and in the implementation of health sector policy reforms?
- ▲ What has been the impact of these mechanisms and arrangements between NGOs and governments on access, sustainability, and efficiency of health services? What effect have they had on the sustainability of the NGOs? Which of these mechanisms were most effective and why?

### **1.3.7 Identifying Related Activities of Other Projects and Organizations**

As part of the process of identifying the needs and gaps in knowledge in order to determine where PHR can best make a contribution, the project has conducted research and gathered materials on activities that other cooperating agencies and organizations are carrying out related to the problems and needs identified above. These activities are summarized in *Annex A*, which also shows how proposed activities for this initiative evolved from a list of possible activities proposed by the panel of experts and PHR staff.

Many USAID-funded projects, both bilateral and centrally funded, conduct capacity-

building activities for indigenous NGOs, including management assessments and training; training in technical areas; training in strategic and business planning, marketing, and related areas; advocacy training; and sustainability assessments and training. Many of these projects, which include PROFIT, OPTIONS II and POLICY, FPMD, and Initiatives, have focused primarily on family planning organizations and services. They have also developed a number of methodologies and tools for use by NGOs, such as FPMD's Management Development Assessment (MDA) and CORE (a cost-revenue analysis model for financial planning and budgeting), and guidelines and tools for assessment and improving sustainability (e.g., FPMD's Management and Organization Sustainability Tool (MOST), Enterprise's guidelines for "Achieving Financial Self-Reliance for Family Planning NGOs," and PROFIT's manual on "Endowments as a Tool for Financial Sustainability"). Case studies on sustainability of health/population NGOs have been conducted by the Ford Foundation in India and by the Initiatives Project. As mentioned above, capacity building for health NGOs – as well as other types of NGOs – is also carried out by several projects run by USAID's Private Voluntary Cooperation (PVC) Office, by umbrella and co-financing projects, and by initiatives of multi-lateral organizations, such as UNDP's NGO centers, and EDI's Strategic Planning and Management for Francophone African NGOs.

Concerning research into the role of NGOs in health policy changes and reform, some Cooperating Agencies and PVOs have begun to explore this area. The Aga Khan Foundation held a policy seminar on the role of NGOs in health sector reform in developing countries in June 1997 in Washington, DC, and plans a follow-up seminar in East Africa in 1998. The FPMD Project is also planning a conference in the LAC region on this topic for sometime in 1998. In addition, a collaborative research network on the public-private mix in health care, coordinated by the London School of Hygiene and Tropical Medicine, is investigating different public-private sector arrangements in several African countries, including contracting-out and other mechanisms with church-based NGOs. Other researchers, including Andrew Green and Lucy Gilson, have conducted some preliminary research on different government/NGO arrangements in the health sector. However, a more in-depth, cross-regional review of different ways in which NGOs have an influence on or directly stimulated policy change has yet to be done and could be very useful to countries and to NGOs as they plan health policy reforms.

Some work has also been conducted to evaluate the performance of NGOs in health care delivery and their comparative advantage over government services and for-profit private providers. This includes studies on efficiency of drug distribution, efficiency of NGO training programs, and studies in two Southern African countries of NGOs' perceptions regarding their efficiency, innovation, and relationships with communities. Another study by Thomas Carroll rated 30 Latin American NGOs working in the health sector on their effectiveness in the areas of service delivery, community participation, and ability to influence policy. What has not yet been examined in depth is the effectiveness of different types of implementation mechanisms involving NGO/government collaboration (e.g., performance contracts to NGOs, various types of subsidies, fund-holding mechanisms, etc.) on improving utilization of and access to services, efficiency and sustainability of service delivery, and/or the quality of health care.

The objectives and activities that PHR has developed for this Special Initiative build upon the efforts of others outlined above and attempt to fill current gaps in knowledge, information, and methodologies.

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## 1.4 Intended Objectives and Results of the NGO Special Initiative

From the overall goal of an improved mix of public-NGO provision of priority health services, PHR has formulated the two following sub-goals, which are the desired outcomes of PHR's activities in the long-term after the project has ended:

1. Health sector reform policies passed and programs implemented that improve NGO capacity to deliver priority health services to under-served populations in applicable countries; and
2. Improved mechanisms and arrangements between governments and NGOs in place for more effective use of NGO resources for priority health services in applicable countries.

“Applicable countries refers to countries where collaboration between the government and NGOs in the health sector is considered feasible and beneficial, since this will not be the case in all countries.

The **specific objectives** for this Special Initiative are to:

1. Increase collaboration between NGOs and governments in policy dialogue, policy formulation and implementation for health sector reforms affecting priority services (family planning, reproductive health, child health, and HIV/AIDS) in applicable countries; and
2. Increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs for improved use of NGO resources affecting priority services in applicable countries.

The **intermediate results** of this initiative, which PHR hopes to achieve during the life of this project, are:

1. Tools and methodologies for more effective collaboration between governments and NGOs in policy dialogue, policy formulation and implementation (e.g., policy briefs, guidelines, options for laws and regulations) identified, developed, evaluated, and widely disseminated in a user-friendly format; and
2. Effective mechanisms and arrangements between governments and NGOs to further health sector reforms (e.g., performance contracts, operating grants, fund-holding mechanisms) identified and evaluated, and findings widely disseminated in a user-friendly format.

The links between the objectives, results, and activities for this Special Initiative are shown in *Figure 1* (see page 10). The specific activities to achieve these results are described

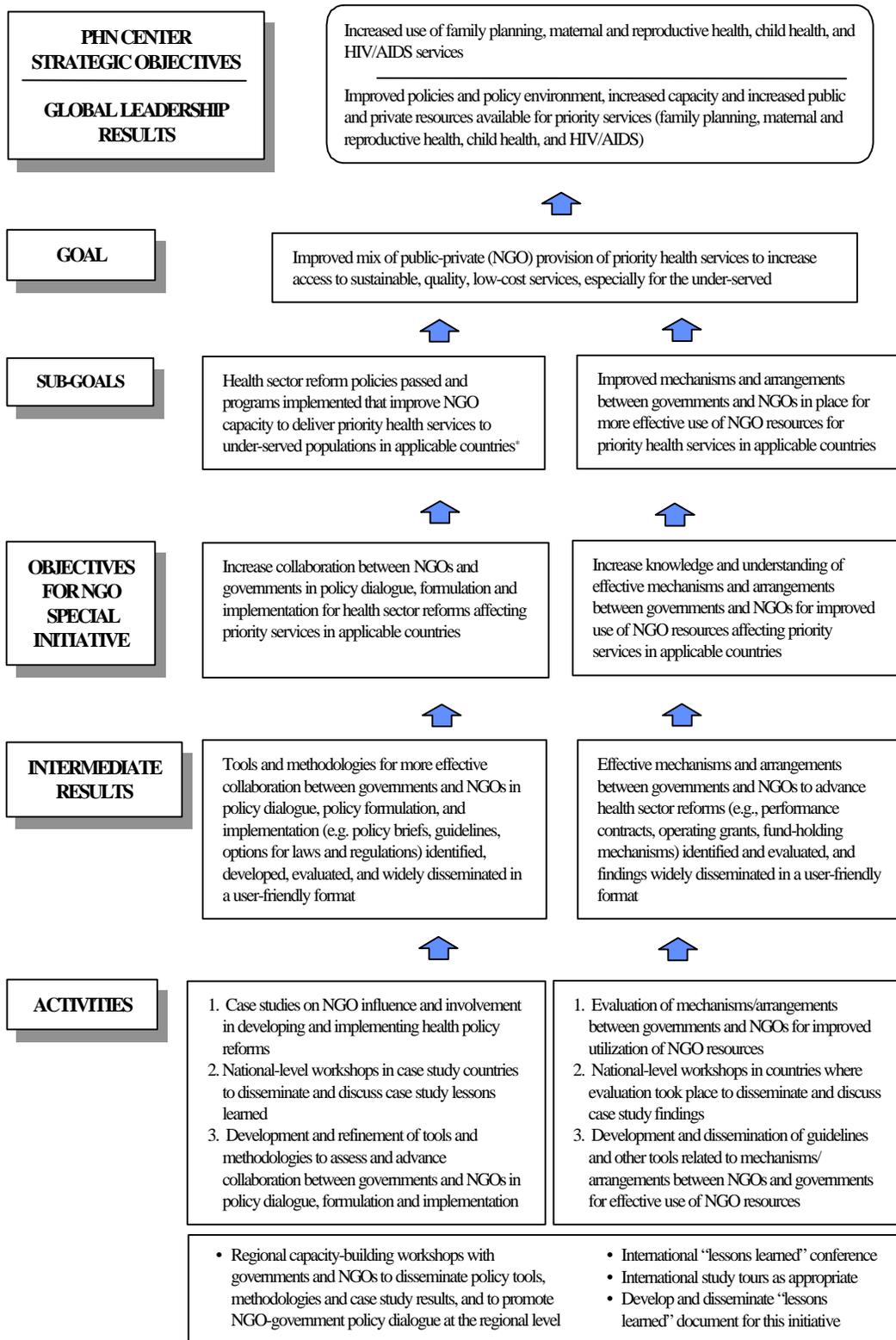
in *Section 2.0* and summarized in *Table 1* (see page 15). Indicators for the results and activities are shown in *Figure 2* in the *Section 4.0* (see Evaluation and Reporting Plan, page 28).

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## **1.5 PHR's Comparative Advantage in Meeting these Goals and Objectives**

Since PHR is the only USAID-funded project that deals with the broad context of health sector reforms, the project is better suited than other projects to examine the role of NGOs in health sector reform. The fact that PHR deals with national governments, as well as with indigenous NGOs, also places it in a strong position to examine effective strategies for collaboration between NGOs and governments in developing and implementing health sector reform, as well as the effectiveness of specific mechanisms for using NGO resources. Furthermore, since the Project's mandate is to contribute to all four PHN strategic objectives (related to maternal health, child health, family planning, and HIV/AIDS), PHR can more easily than other projects examine and work with NGOs involved in all of these areas, as opposed to being limited to NGOs that deal only with population or AIDS prevention. And, unlike regional or bilateral projects, PHR, given its involvement in all USAID regions, is well positioned to conduct cross-regional research, to disseminate information throughout the world, and to bring together NGOs from different regions of the world.

**Figure 1: Contribution of the NGO Special Initiative to PHN Center Global Leadership Strategic Objectives and Results.**



\* Applicable countries are those where NGO/government collaboration is deemed feasible and effective for the furthering of health sector reform goal.

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## 2.0 PROPOSED ACTIVITIES

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### 2.1 Strategy for Developing and Implementing Activities

Throughout this initiative, PHR will continue to call upon its NGO Special Initiative panel of experts for advice and information in planning specific activities, selecting countries and NGOs for the research activities, and conducting technical reviews of reports and other products. PHR will also solicit advice and information in planning and implementing specific activities from USAID Missions, relevant USAID offices, US-based PVOs, and others with expertise and knowledge in this area.

In addition, PHR will call together about once a year representatives from other Cooperating Agencies, PVOs, and USAID/Washington working on NGO issues to update each other on NGO-related activities, discuss PHR's NGO activities, discuss technical issues, and so forth.

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### 2.2 Description of Proposed Activities

Below is a brief description of proposed activities for each objective. A summary of the planned activities and expected outputs, grouped by objective and results, is presented in *Table 1* (see page 15).

#### 2.2.1 Overview of Proposed Objectives and Activities and Linkages between them

The proposed program of activities for this Special Initiative approaches the role of NGOs in health sector reform from two critical aspects or levels: 1) the level of policy, and 2) the implementation level. At the policy level, this initiative will examine the role of NGOs in influencing or participating in policy dialogue and formulation, and develop tools intended to improve collaboration between governments and NGOs in policy dialogue, policy development, and policy implementation in the context of health sector reforms. At the implementation level, we will evaluate specific mechanisms and arrangements (e.g., performance contracts, grants and subsidies, fund-holding mechanisms, non-financial incentives for providers) that governments have established as incentives for NGOs to participate in health service delivery and the effectiveness of each of these mechanisms/arrangements in improving access, efficiency, and sustainability of essential health services. Tools and guidelines to assist government policymakers, NGOs, and donors in selecting, designing, and implementing such mechanisms will also be developed.

These two sets of objectives and activities have been designed to complement each other and to create synergies between them. By providing information and tools that address both policy and implementation issues, this initiative will help to guide governments, NGOs, and donors in developing policies to facilitate effective NGO/government partnerships, as well as in designing and implementing the specific mechanisms to make these partnerships a reality.

In addition, each proposed activity in this plan builds upon and reinforces the other activities. The tools and methodologies developed under this initiative will be based on the research activities (policy case studies and an evaluation of government/NGO mechanisms and arrangements) to be carried out. All dissemination and capacity-building activities, including workshops and meetings, will provide a means of distributing the findings and lessons learned from the research activities, as well as developing and distributing the tools and methodologies.

## **2.2.2 Planning Activities and Developing Contacts**

As a first step in implementing this Initiative, PHR will develop additional contacts with USAID offices and missions, US-based PVOs, indigenous NGOs, and others in the international health community interested in the topic of NGO involvement in health sector reform. The Project will develop a one-page information brief to announce and explain this initiative to these contacts. PHR will use these contacts to help generate interest in and publicize this Special Initiative, to discuss and plan specific activities, and to help identify countries and NGOs for the research and other field-based activities. PHR will seek information and advice from them throughout the life of the project.

## **2.2.3 Objective 1: Increase collaboration between governments and NGOs in policy dialogue, policy formulation and implementation for health sector reforms in applicable countries**

**Sub-Goal:** Health sector reform policies passed and programs implemented that improve NGO capacity to delivery priority health services to under-served populations in applicable countries.

### **Intermediate**

**Result:** Tools and methodologies for more effective collaboration between governments and NGOs in policy dialogue, policy formulation, and implementation identified, developed, evaluated, and widely disseminated in a user-friendly format.

### **2.2.3.1 Rationale**

The activities proposed below involve advancing knowledge and developing tools and methodologies that are intended to increase and improve collaboration between governments and NGOs in developing and implementing health sector reforms. The rationale for conducting the proposed case studies on the influence and participation of NGOs in health policy changes

is that little information currently exists in the literature on this topic, despite the growing interest among donors, multi-lateral agencies, and NGOs themselves for increased collaboration between governments and NGOs. The purpose of these studies is to provide information and lessons learned concerning different approaches for successful government/NGO collaboration in health policy reform that other governments and NGOs can use in planning their own reform efforts. More widely available information on successful strategies and structures for NGO/government collaboration can contribute to increased policy dialogue between NGOs and governments, which in turn can lead to the sub-goal of new health reform policies and programs in place that better recognize the role of NGOs in service delivery and that improve their capacity to deliver health services in the context of health policy reforms.

National workshops or meetings to discuss the case studies in each country where they are conducted will be an important means of disseminating the information gained from the studies to policymakers and others who are in a position to act upon the studies' findings and recommendations. These workshops will therefore enhance the likelihood that the case studies will have an impact on the influence and participation of NGOs in policy development in the study countries, as well as in other countries.

The development of tools to facilitate policy dialogue and collaboration between NGOs and governments is also proposed because of the lack of such tools for developing country policymakers. These tools will be further developed and disseminated at the regional capacity-building workshops discussed in *Section 2.2.5*.

### **2.2.3.2 Activities**

#### **1. Case Studies on NGO Influence and Participation in Health Sector Policy Reform**

PHR will develop and document a series of case studies in three to four countries where indigenous NGOs have influenced or had a direct role in bringing about health policy reforms. The case studies will focus on the evolution of the NGOs' role in policy development and implementation; the process by which NGOs became involved in influencing, designing, and/or implementing health policies; as well as the structures used (e.g., informal contacts, regular meetings, establishment of coordinating bodies).

The case studies will examine factors such as:

- ▲ the types and characteristics of the NGOs that influenced or were involved in the policy process;
- ▲ the process by which NGOs played a role or influenced the development and implementation of health sector policies and the policy agenda;
- ▲ the specific policies or issues upon which they had the greatest impact;
- ▲ laws, regulations, policies, and other environmental factors that affected the participation of NGOs in developing and implementing health policy reforms;
- ▲ the way in which governments used NGOs effectively to initiate and implement the new policies;
- ▲ impact of the policy changes on the sustainability, scope, and mission of the NGOs;
- ▲ the impact of the NGOs' involvement on the resulting policies;
- ▲ how NGOs and governments have divided up their roles and responsibilities

- ▲ to improve health services; and
- ▲ the role or influence of USAID and other donors in improving the policy environment for NGO advocacy and participation in the health sector.

In selecting the examples for the case studies, PHR will chose countries where there have been innovative approaches or models of NGO/government collaboration. The selected examples are also likely to represent a variety of different strategies for NGO/government collaboration, different regions of the world, varying economic levels, and different types of health sector reform policies. PHR will also place priority on selecting countries where the Project or other cooperative agencies dealing with similar issues are actively working, so that follow-up technical assistance can be provided to further advance NGO/government collaboration, health sector reforms, and so forth.

The information for the case studies will be collected through document and literature reviews, and through interviews with Ministry of Health (MOH) representatives and other government officials, management and staff of the NGOs involved, and other key informants. The studies will also involve site visits to health facilities, and an examination of written policies, laws, and regulations related to private sector and NGO participation in the health sector.

## **2. National-Level Workshops/Meetings to Present Case Study Findings and Lessons Learned**

In each country where a case study takes place, PHR will hold a national-level workshop or meeting to bring together government policymakers, NGO representatives, donors, and other key players to discuss the findings and lessons learned from the case study, implications for future collaboration between the government and NGOs, recommendations for improvements, and related issues.

## **3. Development, Refinement and Dissemination of Policy/Advocacy Tools and Methodologies**

PHR will develop, produce, and disseminate broadly a series of tools and methodologies designed to assess, promote, and/or monitor policy dialogue and collaboration between governments and NGOs in the development and implementation of health sector reforms. Examples of such tools include:

- ▲ policy briefs or guidelines on how governments and NGOs can work together on health sector reforms, based on case study findings;
- ▲ a summary document or matrix outlining options for laws, regulations, and policies affecting NGO participation in the health sector;
- ▲ guidelines on developing a policy communications strategy;
- ▲ a checklist on how to organize a policy seminar;
- ▲ step-by-step guidelines on managing the policy process;
- ▲ guidelines on “health sector reform made simple”
- ▲ a primer on key health sector reform issues.

**Table 1: NGO Special Initiative: Summary of Objectives, Results, Activities, Outputs, and Target Dates**

Activities	Outputs	Target Date
<p><b><i>OBJECTIVE 1: Increase collaboration between NGOs and governments in policy dialogue, policy formulation, and implementation for health sector reforms affecting priority services (family planning, reproductive health, child health, HIV/AIDS) in applicable countries</i></b></p>		
<p><b><i>Sub-Goal: Health sector reform policies passed and programs implemented that improve NGO capacity to delivery priority health services to under-served populations in applicable countries</i></b></p>		
<p><b><i>Intermediate Result: Tools and methodologies for more effective collaboration between governments and NGOs in policy dialogue, policy formulation, and implementation (e.g., policy briefs, guidelines, options for laws and regulations) identified, developed, evaluated, and widely disseminated in a user-friendly format</i></b></p>		
<p>1. Conduct three to four country case studies of examples where indigenous NGOs have influenced or had a direct role in bringing about health policy changes or health reform to determine lessons learned from: 1) the process by which NGOs played a role in influencing, developing, and/or implementing health sector policy reforms; 2) the evolution of the NGOs' role; 3) the impact of government laws, regulations, policies, and NGO policies and practices on NGO influence and participation in the reform process; and 4) the impact of NGO involvement/influence on resulting policies, as well as the impact of policy changes on the NGOs' sustainability, activities, scope, etc.</p>	<p>Case studies completed.</p> <p>Summary report of findings and lessons learned from case studies completed and disseminated.</p>	<p>Nov 1998</p> <p>Jan 1999</p>
<p>2. Present findings and lessons learned from the case studies at national-level workshops or meetings in each case study country; disseminate case study findings and other relevant health reform information through normal PHR channels, PHR Website, and existing NGO/PVO networks interested in NGOs' role in health reform.</p>	<p>Workshops/meetings held in each case study country.</p> <p>Reports disseminated via post mail, PHR Website, and selected NGO/PVO communication networks.</p>	<p>Feb 1999</p> <p>Feb 1999</p>

Activities	Outputs	Target Date
3. Develop and refine tools and methodologies that assess, enhance, and/or monitor the policy environment and policy dialogue between governments and NGOs. Tools can include: policy briefs or guidelines on how governments and NGOs can work together on health sector reforms (based on case study findings); a summary document or matrix outlining options for laws, regulations, and policies affecting NGOs' ability to participate in the health sector; and various advocacy and policy tools and guidelines related to the policy process, developing policy communication and advocacy strategies.	Tools and methodologies developed, refined, and disseminated through workshops, meetings, PHR Website, NGO/PVO networks, and other channels.	May 1999
<b><i>OBJECTIVE 2: Increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs for improved use of NGO resources for priority health services in applicable countries</i></b>		
<b><i>Sub-Goal: Improved mechanisms and arrangements between governments and NGOs in place for more effective use of NGO resources for priority health services in applicable countries</i></b>		
<b><i>Intermediate Result: Effective mechanisms and arrangements between governments and NGOs to advance health sector reforms (e.g., performance contracts, operating grants, fund-holding mechanisms) identified and evaluated, and findings widely disseminated in a user-friendly format</i></b>		
1. Conduct a comprehensive evaluation in three to four countries of different mechanisms or arrangements between governments and NGOs and their impact on access, sustainability, and efficiency of priority health services. These mechanisms/arrangements can include: bed grants, operating grants, shared staff, performance contracts, fund-holding mechanisms under decentralization, and non-financial incentives for providers.	Draft evaluation report completed.	Sept 1999

Activities	Outputs	Target Date
2. Present results of the evaluation at national-level workshops and/or meetings in each country, and disseminate the findings through PHR channels and existing NGO/PVO networks.	Workshops/meetings held in each country where study took place.  Evaluation report and summary of findings and lessons learned disseminated via post mail, PHR Website, NGO/PVO networks and other channels.	Sept 1999  Dec 1999
3. Develop guidelines, policy briefs, and other user-friendly tools to assist governments and NGOs to develop and refine effective mechanisms/arrangements aimed at improving access and sustainability of priority health services.	Guidelines, policy briefs and other tools developed and disseminated widely through mail, PHR Website, workshops and conferences, NGO/PVO networks, and other channels.	March 2000
4. Revise and finalize summary document on NGO sustainability in the health sector.	Document finalized and disseminated.	May 1998
<b><i>Information Dissemination and Capacity-Building Activities Covering Both Objectives</i></b>		
1. Conduct regional capacity-building workshops to discuss research results and lessons learned, and to develop, test, and disseminate tools and methodologies to strengthen the capacity of NGOs and governments to work together in policy dialogue, formulation, and implementation to advance health sector reform.	Minimum of three regional workshops conducted.	Oct 1999 - Mar 2000
2. Organize and conduct study tours with participants from one or more countries to another country if/when this is considered the best means of transferring lessons learned on NGO/government collaboration.	One or more international study tours completed.	TBD
3. Organize an international “lessons learned” conference to disseminate and share information and lessons learned about effective approaches on how NGOs and governments can work together to develop and implement health sector reforms.	“Lessons learned” conference held, and proceedings widely disseminated via post mail, PHR Website, NGO/PVO networks and other channels.	June 2000

<b>Activities</b>	<b>Outputs</b>	<b>Target Date</b>
4. Produce and disseminate a summary “lessons learned” document which includes major findings and implications of the field research, tools and methodologies developed, and implications for USAID and other donor support to NGOs in the health/population sector.	Document produced and disseminated via post mail, PHR Website, NGO/PVO networks and other channels.	August 2000

Several of these tools will be adapted from and build upon existing materials developed by other projects working in population and other sectors. These tools and methodologies will be developed, refined, and disseminated at the national workshops/meetings described above, as well as at the regional capacity-building workshops discussed below, and other appropriate fora. The tools will also be disseminated in hard copy via mail, and electronically via the PHR Website and PVO/NGO communication networks to government policymakers, PVOs, indigenous NGOs, cooperative agencies, USAID missions, offices, and bureaus, and other donors.

*Outputs:*

1. Summary report on the overall findings and lessons learned from the case studies;
2. National-level workshops or meetings in each case study country to disseminate and discuss findings;
3. Series of policy briefs, guidelines, and other tools and methodologies designed to assess, promote, and/or monitor policy dialogue and collaboration between governments and NGOs in the development and implementation of health sector reforms.

## **2.2.4 Objective 2: Increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs for improved use of NGO resources for priority health services in applicable countries**

**Sub-Goal:** Improved mechanisms and arrangements between governments and NGOs in place for more effective use of NGO resources for priority health services in applicable countries.

**Intermediate**

**Result:** Effective mechanisms and arrangements between governments and NGOs to advance health sector reforms (e.g., performance contracts, operating grants, fund-holding mechanisms) identified and evaluated, and findings widely disseminated in a user-friendly format.

### **2.2.4.1 Rationale**

To meet this objective, PHR proposes to evaluate mechanisms and arrangements that governments have developed with NGOs as incentives to provide essential health services. Guidelines and other user-friendly tools will also be developed based on the findings of the evaluation. This activity is especially timely and relevant, given the increased need for such arrangements between governments and NGOs, especially as health sectors decentralize and as other health reforms are implemented, and given that a comprehensive evaluation of these mechanisms has not yet taken place. The policy briefs, guidelines and other tools developed from this activity should assist governments and NGOs in designing effective and sustainable collaborative arrangements.

## 2.2.4.2

### Activities

#### 1. Evaluation of Mechanisms and Arrangements between Governments and NGOs

PHR will conduct an evaluation of various mechanisms/arrangements between governments and NGOs, which include: performance contracts to NGOs; sharing staff between the government and NGO sector; various subsidies, such as bed grants and operating grants; fund-holding mechanisms as part of decentralization reforms; and non-financial incentives for providers. The evaluation, which will take place in three or four countries where these mechanisms have been in operation for some time between the government and NGOs, will assess the effectiveness of these mechanisms in improving access to essential health services, increasing efficiency, and improving sustainability of health services, as well as of the NGOs. The study will also examine the factors and conditions affecting the success or failure of these various approaches.

The evaluation will assess:

- ▲ the institutional arrangements and management requirements for each mechanism/arrangement;
- ▲ the size, scope of coverage, and financial status of the NGOs;
- ▲ the role of the government/NGO mechanisms/arrangements in relation to financing mechanisms and organizational arrangements in the health sector as a whole;
- ▲ the role of NGOs in relation to other private providers;
- ▲ the impact of these mechanisms on the NGO's ability to increase access, equity, efficiency, sustainability, and/or quality of health services; and
- ▲ the impact of these mechanisms/arrangements on the public and private health care markets.

In selecting countries for the evaluation, an effort will be made to choose examples from different parts of the world, ones where different health financing and delivery models are in place, and ones that represent varying socio-economic levels. Priority will also be placed in selecting countries where PHR or another cooperating agency can provide follow-up technical assistance, if requested.

The information for the evaluation will be collected through document and literature reviews, and through interviews with MOH representatives and other government officials, management and staff of the NGOs involved, and other key informants. The evaluation will also involve site visits to health facilities.

In each country where the evaluation takes place, PHR will organize, with local partners, a national-level workshop or meeting to present and discuss the findings, lessons learned, and recommendations with government policymakers, NGOs, donors, and other key players. PHR will also produce and disseminate a report on the evaluation as well as a summary of the major findings and lessons learned.

## 2. **Development and Dissemination of Guidelines and other Tools Related to NGO/Government Collaborative Mechanisms**

In addition to the evaluation report and summary of findings, PHR will develop user-friendly guidelines, policy briefs, and other tools based on the evaluation to guide government policymakers, NGOs, donors, and others in developing countries to select, design, and implement effective mechanisms and arrangements between governments and NGOs. These tools will be discussed, refined, and disseminated at the regional workshops discussed below, and at other appropriate fora. They will also be disseminated broadly by mail and via the PHR Website to USAID Missions, offices, and bureaus; PVO/NGO networks; cooperative agencies; indigenous NGOs; and others.

## 3. **Summary Document on NGO Sustainability in the Health Sector**

PHR will revise a report drafted last year that provides an overview of selected NGO efforts in the health sector to become more sustainable. The report will add new examples and will be turned into a more user-friendly document, which outlines various options, with examples and conditions, to improve the financial and institutional sustainability of NGOs working in the health sector. The document will be disseminated broadly both on hard copy and electronically.

### *Outputs:*

1. Report on the evaluation of mechanisms/arrangements between governments and NGOs;
2. Nation-level workshops or meetings in each country where the evaluation took place to disseminate and discuss findings;
3. Summary report on the findings and lessons learned from the evaluation;
4. Policy briefs, guidelines, and other tools related to mechanisms/arrangements between governments and NGOs, based on the evaluation findings and lessons learned; and
5. Summary document on NGO sustainability in the health sector.

## 2.2.5 **Information Dissemination and Capacity-Building Activities Covering Both Objectives**

Several information dissemination and capacity-building activities will also take place under this Special Initiative that cut across both objectives. These are:

1. **Regional capacity-building workshops.** Three or more workshops at the regional level (e.g., LAC, Africa) will be held to disseminate and discuss the research results and their implications, to test, refine, and disseminate the tools and methodologies developed under this initiative, and to build the capacity of participating governments and NGOs to collaborate on the development and implementation of health policy reforms. Participants at the workshops will be government and NGO policymakers from countries involved in the research activities as

well as from other countries in the region that can potentially benefit from the research findings and tools. The guidelines and other tools discussed during the workshops will be revised and finalized based on participants' reactions. It is envisioned that country action plans will be drafted during these regional workshops for NGO/government collaboration, as appropriate.

If a workshop takes place in the LAC region, it will be conducted in collaboration with PHR's LAC Bureau Initiative on NGOs (see *Section 2.3* below).

2. **International or regional study tours.** PHR will organize one or more study tours when they are deemed to be the most effective method of advancing NGO/government collaboration and where field support funds are available for them. The study tours will involve participants from one or more countries visiting another country where there is an effective model of NGO/government collaboration. These study tours will be funded primarily with Mission funding.
3. **International “lessons learned” conference.** Towards the end of the Project, PHR will hold a two- to three-day international conference to bring together NGOs, governments, cooperative agencies, and other key players from different regions of the world to disseminate and share information and lessons learned concerning effective approaches for using NGOs in the delivery of health services and in the development and implementation of health sector reforms.
4. **“Lessons learned” document.** PHR will produce and disseminate broadly a user-friendly document summarizing the major findings and lessons learned from the research activities (both policy case studies and evaluation of implementing mechanisms/arrangements) of this initiative. This document will include implications of the research findings on how USAID and other donors relate to and support NGOs. It will also include a descriptive list of all of the tools and documents produced under the initiative. Government officials and NGO representatives from the countries that participated in the regional capacity-building workshops will contribute to this document.

## 2.2.6 Related Research and Technical Assistance Activities

PHR will undertake under this initiative other technical assistance and research activities related to NGOs in the health/population sector at the request of USAID. One proposed activity is to provide technical assistance to Aga Khan Health Services in India and Pakistan to improve the financial sustainability of their health services. The knowledge and experience gained from these assignments will contribute to the tools, guidelines, and other documents that will be produced under this initiative.

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## 2.3 Coordination with Other PHR Activities

In conducting the proposed activities for this Special Initiative, the NGO team will coordinate with other PHR activities and initiatives, and work together, as appropriate, to enrich each other's work and to avoid duplication. Two activities in particular tie in with this Special Initiative: the LAC Bureau Initiative's NGO activity and the Major Applied Research activity on "Using Private Providers to Extend Coverage of Priority Services."

PHR's LAC Bureau Initiative is currently in the process of planning its NGO activities, in close collaboration with the NGO coordinator from PAHO and the FPMD Project. The NGO Special Initiative team is participated in these planning meetings to ensure that activities are coordinated and to benefit from the knowledge and experience of the NGO Special Initiative team in planning the LAC Initiative NGO activities. While the LAC plans are still being developed, some of the proposed activities are: development of an inventory of NGOs engaged in health sector reform in the LAC region; development of tools and methodologies to build NGO capacity to engage in policy dialogue; and exchanges between the public and NGO sectors to strengthen partnerships and dialogue on health sector reform, including a LAC regional conference. The NGO Special Initiative team will collaborate on activities, as appropriate, including, for example, any regional capacity-building workshop in the LAC region.

The purpose of the MAR "Using Private Providers to Extend Priority Services" is to develop and apply a theoretical model to help governments assess under what circumstances it makes sense to expand provision of priority services through strategies such as demand stimulation, financing private provision, quality improvements and regulation, rather than by expanding public provision. A theoretical model will be developed, and selected USAID experiences in working with the private sector (including NGOs) will be analyzed. The model developed under this MAR can be one of the tools that the NGO Special Initiative demonstrates and distributes during workshops, meetings, and conferences. The lessons learned from the analysis of USAID experiences working with NGOs can also be incorporated into the policy briefs and other tools that this Special Initiative will develop. All funding for the development of the model will be covered under the MAR.

Other PHR MARs also have the potential to provide useful tools and information that can be used and disseminated by the NGO Special Initiative. These include: "Analyzing the Process of Health Finance Reform," "The Impact of Alternative Provider Payment Systems," and "Equity of Health Sector Revenue Generation and Allocation Patterns."



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## 3.0 Information Dissemination Plan

PHR will use a three-pronged approach to disseminate and share information, tools, reports, and other products developed under this initiative. These three methods are: 1) distribution of “hard copy” reports, tools and other documents to a range of clients, PVOs/NGOs, and others in the international health community; 2) electronic dissemination and information sharing through PHR’s Website; and 3) information dissemination and sharing via workshops, meetings, and conferences.

Existing NGO and PVO networks, including electronic networks, will be an important vehicle for broadly disseminating information produced by this initiative to a potentially large, interested audience. PHR will hook up with these networks to disseminate documents and research findings both in paper form and electronically, as well as to share health reform-related information and experiences among NGOs from different regions. PHR will also use these networks to publicize and solicit participation in workshops and conferences that will be carried out under this initiative.

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### 3.1 Distribution

All reports, tools, and other products developed under this initiative will be disseminated via mail (and E-mail, as appropriate) to a range of organizations and individuals. These include USAID missions, offices and bureaus; PVOs and NGOs; other USAID cooperating agencies and projects; international agencies (e.g., World Bank, PAHO, WHO); other donors; and other members of the international health community.

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### 3.2 Electronic Dissemination and Networking

To send and share information, tools, and other documents electronically, PHR will establish a page on our world wide Website (<http://www.phrproject.com>) that will be devoted to the NGO Special Initiative. In addition to providing updates on the Special Initiative’s progress on an on-going basis to a worldwide audience, the page will include electronic hot links to participating NGOs, PVOs, and relevant CAs, so that anyone visiting the site can immediately go to the home page of these organizations by clicking on the universal resource locator address (URL). As the Special Initiative progresses, PHR will continue to expand its list of key NGOs, PVOs, and CAs by adding their URL hot links and short (two-sentence) descriptions to the PHR Website. To allow NGOs and PVOs to share information with each other directly, PHR will also set up a “listserv” (an electronic bulletin board to exchange information) that they can choose to join and unjoin free of charge on our Website. These groups will be able to send a single E-mail and reach all the other organizations on the list at once. This method provides an inexpensive means by which far-flung organizations can communicate with each other. As the NGOs/PVOs themselves will be exchanging news and documents, the cost to PHR is small after the initial setup.

The Website will also be used to disseminate relevant materials from this initiative via electronic transmission such as text-only version of publications using file transfer protocol (FTP) for downloading and printing by individual users. PHR will also make its entire resource collection available to NGOs by electronically mounting the database on the Website. All resources relevant to NGOs and PVOs in the PHR Resource Center will be keyworded so that users will be able to locate relevant documents electronically, read the abstract to determine their level of interest, and find the source for ordering the publication if they wish.

In sum, the electronic or on-line products for this Special Initiative will include:

- ▲ A useful, dynamic Web page for the NGO Special Initiative on the PHR Website;
- ▲ A successful listserv that will enable NGOs, PVOs, and others to directly share information, assist each other, and query one another;
- ▲ Expanded URL hot links to key NGOs and PVOs through PHR's Website;
- ▲ PDF and FTP access to all NGO Special Initiative products via PHR's Website; and
- ▲ Connectivity link established among existing electronic networks to share resources, consultants, and information.

In addition, the print products for this Special Initiative will include:

- ▲ Case studies and summary reports
- ▲ Policy briefs
- ▲ Technical reports
- ▲ "Lessons learned" document

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### **3.3 Workshops and Conferences**

As mentioned above, several workshops and other fora will take place under this initiative. These include: 1) three to four in-country workshops or meetings to discuss and disseminate findings from the research activities in each country where they take place; 2) at least three regional capacity-building workshops to develop and disseminate tools and methodologies, share experiences, and discuss research findings and implications; and 3) an international "lessons learned" conference towards the end of the Project. All of these fora will bring together government policymakers, NGOs, relevant PVOs and CAs, and other key players to disseminate and share information and lessons learned on effective approaches for using NGOs in the development and implementation of health sector reforms.

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## 4.0 Evaluation and Reporting Plan

The progress and success of this Special Initiative will be measured against the indicators listed in *Figure 2* (see page 28).

Three levels of indicators are listed on the chart: 1) indicators for the sub-goals; 2) indicators for the objectives; and 3) indicators for the intermediate results. The sub-goals and their indicators will not be met during the life of the PHR Project, but instead indicate the ultimate desired outcomes of the activities proposed for the Special Initiative. PHR is responsible, however, for meeting the objectives and intermediate results and their corresponding indicators during the three remaining years of the project.

PHR management will internally review the progress of the NGO activities each quarter with the Special Initiatives team and will make adjustments, as necessary, to the timing or the design of planned activities. PHR will also review progress of the overall initiative and of specific activities with the COTR team on a regular basis. As mentioned earlier, we will also call upon the panel of NGO experts periodically to review and adjust, as necessary, plans for specific activities, as well as to review products and results of specific activities.

PHR will report on the progress of this special initiative in each PHR quarterly report, and on the financial status of the initiative monthly to the COTR. PHR will also produce and disseminate final reports for each of the major activities, including the research studies and conferences and workshops.

**Figure 2: Proposed Indicators for the Special Initiative on the Role of NGOs on Health Sector Reform**

<b>OVERALL GOAL:</b>	Improved mix of public-private (NGO) provision of priority health services to increase access to sustainable, quality, low-cost services, especially for the under-served
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**SUB-GOAL:**

<p>Health sector reform policies passed and programs implemented that improve NGO capacity to deliver priority health services to under-served populations in applicable countries</p> <hr/> <p><b>INDICATORS:</b></p> <ul style="list-style-type: none"> <li>• Health sector reform policies passed and programs implemented that improve NGO capacity to deliver priority health services to under-served populations in at least one country in the LAC, Africa, and ANE regions</li> <li>• Programs implemented by at least 5 NGOs to promote health reforms/health policy changes in the LAC, Africa, and ANE regions</li> </ul>	<p>Improved mechanisms/arrangements between governments and NGOs in place for more effective use of NGO resources for priority health services in applicable countries</p> <hr/> <p><b>INDICATORS:</b></p> <p>Improved mechanisms/arrangements between governments and NGOs in place for more effective use of NGO resources for priority health services in at least one country in the LAC, Africa and ANE regions</p>
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**OBJECTIVES:**

<p>Increase collaboration between NGOs and governments in policy dialogue, formulation and implementation for health sector reforms affecting priority services in applicable countries</p> <hr/> <p><b>INDICATORS:</b></p> <ul style="list-style-type: none"> <li>• Action plans drafted for NGO/government collaboration for countries participating in regional workshops</li> <li>• Meetings held between NGOs and governments in specified target countries</li> <li>• Advocacy/policy tools and methodologies developed by this Special Initiative utilized in specified target countries</li> <li>• Government officials and NGO representatives from countries participated in workshops and contributed to development of final lessons learned document</li> </ul>	<p>Increase knowledge and understanding of effective mechanisms and arrangements between governments and NGOs for improved use of NGO resources affecting priority services in applicable countries</p> <hr/> <p><b>INDICATORS:</b></p> <ul style="list-style-type: none"> <li>• Action plans drafted during regional workshops include plans for using collaborative mechanisms/arrangements between NGOs and government based on the evaluation findings</li> <li>• Government officials and NGO representatives from countries participated in workshops and contributed to development of guidelines and other tools related to collaborative mechanisms</li> <li>• Government officials and NGO representatives from countries participated in workshops and contributed to development of final lessons learned document</li> </ul>
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**INTERMEDIATE RESULTS :**

<p>Tools and methodologies for more effective collaboration between governments and NGOs in policy dialogue, policy formulation, and implementation identified, developed, evaluated, and widely disseminated in a user-friendly format</p> <hr/> <p><b>INDICATORS:</b></p> <ul style="list-style-type: none"> <li>• 3-4 case studies completed in at least one country in each of the LAC, Africa and ANE regions</li> <li>• Summary report of case study findings/lessons learned developed and widely disseminated among policymakers, NGOs, PVOs, and other key players in the LAC, Africa, and ANE regions through report distribution, PHR Website, NGO/PVO networks and other channels</li> <li>• 3-4 national-level workshops held to present findings/lessons learned in study countries</li> <li>• Series of tools and methodologies developed, refined and widely disseminated</li> </ul>	<p>Effective mechanisms/arrangements between governments and NGOs to advance health sector reforms identified and evaluated, and findings widely disseminated in a user-friendly format</p> <hr/> <p><b>INDICATORS:</b></p> <ul style="list-style-type: none"> <li>• Summary document on NGO sustainability finalized and widely disseminated</li> <li>• Effective mechanisms and arrangements between governments and NGOs to advance health sector reforms identified and evaluated in at least one country in the LAC, Africa and ANE regions</li> <li>• Evaluation report on financing mechanisms for NGO/government collaboration produced and disseminated</li> <li>• 3-4 national-level workshops/meetings held to present evaluation findings in study countries</li> <li>• Series of guidelines, policy briefs and other tools related to mechanisms/arrangements produced and widely disseminated among policy makers, NGOs, PVOs, and other key players in the LAC, Africa, and ANE regions through report distribution, PHR Website, NGO/PVO networks, other channels</li> </ul>
<p><b>INDICATORS:</b> At least 3 regional capacity-building workshops held to present, refine and disseminate tools, research results, etc. • International lessons learned conference held • Summary “lessons learned” document produced and disseminated broadly</p>	

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## 5.0 Management Plan

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### 5.1 Personnel

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The personnel and management team for this Special Initiative will consist of the following personnel:

- ▲ *A Program Manager/Analyst (at fifty percent time)*, who will be responsible for the day-to-day management of this program and for ensuring that activities take place on schedule and on budget. S/he will take a lead in making contacts with Missions, NGOs, and others to solicit interest in this initiative and to obtain information. S/he will also be responsible for lining up appropriate staff, consultants, and/or local institutions to carry out the specific activities and will take part in implementing them as well, when appropriate. S/he will also coordinate and participate the process of reviewing all reports and products. Qualifications for this position include: extensive program management experience on USAID-funded health and population projects; experience managing subprojects and subcontracts; and experience in designing, conducting, analyzing and writing up the results of field research studies.
- ▲ *A Technical Advisor (at thirty-three percent time)* to provide technical guidance on all aspects of the program, including the development of plans for specific activities; identifying appropriate countries and NGOs for the case studies, as well as key contacts; identifying personnel and firms to carry out the activities in the field; conducting technical reviews of reports and other products; and monitoring the program's progress. This person should have extensive field experience working with indigenous NGOs in the health/population sector in developing countries.
- ▲ *A Research Analyst (at thirty-three percent time)*, who will assist in conducting literature searches and collecting background information for the research activities, developing and maintaining links with existing NGO electronic networks, updating and maintaining the NGO Web page and listservs, and taking part in the analysis and report writing for the research studies, as appropriate.
- ▲ *The Program Assistant (at thirty-five percent time)* for the Special Initiatives, who will provide administrative and research support for this activity.

Many of the actual field activities will be carried out by consultants and local organizations from the countries or regions where they will take place, and, as needed, by staff from within the project and from PHR's partner firms. Other outside specialists will be hired as consultants, as needed. All major products, including the policy briefs and other tools, will also be reviewed by members of the panel of experts assembled for this Special Initiative. As mentioned above, PHR will also call upon the panel or individual panel members periodically for advice and information to plan and implement the various activities involved in this initiative.

Overall oversight and guidance for this initiative will be provided by the Special Initiatives Coordinator, PHR's Technical Director, and the Deputy Director for Operations. The team for this initiative will also work closely with the Information Dissemination group for all connectivity-related activities.

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## 5.2 Partners and Collaborators

In planning and implementing the activities of this Special Initiative, PHR will work with a number of partners and collaborators in planning activities, disseminating information, and in some cases, implementing activities. These partners and collaborators include:

- ▲ Local firms and consultants, with whom PHR will subcontract to conduct much of the field research for the policy case studies and evaluation of NGO/government collaborative mechanisms, as well as to help organize in-country and regional workshops;
- ▲ Other cooperating agencies with relevant NGO experience, including the FPMD Project, the POLICY Project, CEDPA, and BASICS, which the PHR NGO team will consult with for special activities, keep abreast of what we are doing, and tap into their dissemination/connectivity networks to distribute information, tools, and other products. (PHR is already collaborating with the FPMD Project in defining its NGO activities under the LAC Initiative);
- ▲ PVOs, such as Aga Khan, CARE, etc., which can provide advice and information that will be helpful in designing and selecting countries for the research activities, as well as in disseminating tools and products developed under this initiative through their networks;
- ▲ Multi-lateral agencies, including PAHO, WHO, and the World Bank for information, advice, and help with dissemination. This initiative will coordinate closely with PAHO's NGO-Government Collaborative Initiative for all activities in the Latin America and Caribbean region.

As mentioned in *Section 2.1*, several of the above groups will be invited to participate in a joint meeting about once a year to update each other on our respective

NGO-related activities and to discuss findings and technical issues.

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## 6.0 Proposed Schedule

The proposed schedule of activities is shown in *Figure 3*. The timing of specific activities will likely be modified over time as the program gets underway.

**Figure 3: Proposed Schedule of Activities for PHR's NGO Special Initiative**

Activities/Steps	1998				1999				2000		
	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept
<b>Planning activities and developing contacts</b>											
1. Develop additional contacts with USAID missions and offices, US-based PVOs, indigenous NGOs, and others.											
2. Send information brief on this initiative to contacts (via mail, E-mail, NGO Web page, etc.).											
<b>Objective 1: Policy case studies and development of tools</b>											
1. Conduct research for selection of countries for case studies.											
2. Three to four countries are selected.											
3. Identify and recruit staff, consultants, and firms to conduct field work for case studies.											
4. Develop case study design and methodology jointly with selected researchers.											
5. Conduct field research and analyze data.											
6. Conduct in-country workshops/meetings to present findings in case study countries.											

Activities/Steps	1998				1999				2000		
	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept
7. Prepare and disseminate a summary report on all case studies.											
8. Develop, refine and disseminate guidelines, methodologies, and other tools related to this activity.											
<b>Objective 2: Evaluation of mechanisms/arrangements between governments and NGOs</b>											
1. Identify and select countries for the evaluation.											
2. Identify and recruit researchers for field work.											
3. Design study methodology jointly with field researchers.											
3. Conduct field research.											
4. Conduct analysis and prepare draft evaluation report.											
5. Hold in-country workshops/ meetings in each country where evaluation takes place.											
6. Complete and disseminate evaluation report.											
7. Develop and disseminate summary document on findings and lessons learned from the evaluation.											
8. Develop and disseminate other tools related to this activity, including policy briefs, guidelines for designing and implementing mechanisms, etc.											
<b>Dissemination and capacity-building activities covering both objectives</b>											

**Figure 3.0 Proposed Schedule of Activities**

Activities/Steps	1998				1999				2000		
	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept	Oct - Dec	Jan - Mar	Apr - June	July - Sept
1. Set up Web page for NGO Special Initiative on PHR Website (including hot links).											
2. Develop listserv on Website and send out bulletins and other information through it on a regular basis.											
3. Disseminate reports and other products from this initiative in hard copy and electronically via Website.											
4. Conduct regional capacity-building workshops.											
5. Conduct study tours (as appropriate). (TBD)											
6. Hold international "lessons learned" conference on role of NGOs in health sector reform.											
7. Produce and disseminate "lessons learned" document.											

## 7.0 Proposed Budget

Below is the estimated budget and level of effort for this initiative for the period of January 1998 to September 2000:

Budget Category	Year 1	Year 2	Year 3	Total	Total LOE*
Total Labor (loaded)	\$ 138,010	\$ 139,869	\$ 114,327	\$ 392,206	727
Consultants	46,312	29,031	7,718	83,061	227
Travel	127,480	63,932	0	191,412	
Other Direct Costs	99,248	110,343	147,661	357,251	
Subcontractors:					
URC	16,424	17,245	13,580	47,249	
DA	22,346	23,464	18,478	64,287	
Local firms	<u>44,000</u>	<u>16,000</u>	<u>0</u>	<u>60,000</u>	
Total	<u>82,770</u>	<u>56,709</u>	<u>32,058</u>	<u>171,537</u>	730
General & Administrative	80,445	66,195	51,047	197,687	
Fixed Fee	11,485	9,322	7,056	27,863	
Allocable Cost (15%)	87,863	71,310	53,980	213,152	
Total	\$ 673,613	\$ 546,708	\$ 413,846	\$1,634,167	1,684

\* Level of Effort (person-days)



**Annex A: Decision-Making Matrix to Develop NGO Special Initiatives Focus Areas**

Suggested Topic Area or Activity	Appropriate for PHR SI?	Work in Area by Other Groups		Decision, Comments	Activities Selected
		Description of Work	Group		
<b>1. NGO Sustainability:</b>					
Develop and field test tools and models to plan public-private mix of services; plan, project level of sustainability; etc.	Yes	<ul style="list-style-type: none"> <li>Private sector Economic Model</li> <li>MOST tool</li> <li>CORE (Cost Recovery Assessment Tool) (spreadsheet) for NGOs</li> <li>Target-Cost Model for family planning service requirements and costs</li> <li>COPE (Client-Oriented Provider Efficiency Tool) (for planning and quality assessment)</li> <li>Contraceptive Market Model</li> </ul>	Options II FPMD FPMD  Options II  AVSC  Options II	Tools mainly focus on family planning. Experience shows limited use of existing tools. The most useful tools tend to be very sophisticated and difficult to use, so few countries have applied them. Decision: Put project resources elsewhere	
Develop handbook/summary documents outlining different approaches to NGO sustainability.	Yes	Several documents, such as “Achieving Financial Self-Reliance: A Manual for Managers of NGOs Involved in Family Planning”; “Improving NGO Effectiveness and Sustainability”; “Promoting Sustainability: The Lessons of Enterprise”; Manual for NGOs on “Endowments as a Tool for Sustainability”	Enterprise Project; JSI; PROFIT	Review paper by D. DeRoeck being revised and finalized.	<p><b>Produce review document on NGO sustainability in the health/pop. sector.</b></p> <p>(Guidelines or policy document on effectiveness of implementation mechanisms on sustainability could be developed from the evaluation of these mechanisms)</p>

Suggested Topic Area or Activity	Appropriate for PHR SI?	Work in Area by Other Groups		Decision, Comments	Activities Selected
		Description of Work	Group		
Conduct country case studies on NGO involvement in health care delivery and efforts to improve sustainability.	Yes	<ul style="list-style-type: none"> <li>Series case studies on costs, financing and sustainability of Indian health NGOs</li> <li>Case studies series on management and sustainability of private (and NGO) health organizations</li> <li>Sustainability assessment of 30 Nigerian NGOs</li> <li>PROSALUD case studies</li> </ul>	<p>Ford Foundation/ India; Initiatives Project</p> <p>Initiatives Project various</p>	Given number of similar case studies and PHR's focus on health reform, focus was shifted to the role of NGOs in influencing or formulating policy change; and specific implementing mechanisms to engage NGOs in service delivery (see below).	
Conduct comparative review of government policies, regulations, and practices to: a) determine their impact on NGO sustainability and the provision of health care, b) identify policies, procedures that best meet government and NGO needs.	Yes	<p>Reviews of private health sector development in several African countries included review of legal/regulatory framework</p> <p>Series of legal, regulatory assessments focusing on family planning and follow-up TA (Egypt, Guatemala, Ghana, etc.)</p>	<p>DDM and HFS</p> <p>OPTIONS, SOMARC, others</p>	Experience shows that reviews are mainly effective if follow-up TA is provided in each country. Decision: make examination of laws, regulations, etc. affecting NGOs an important part of case studies on policy process and case studies on implementing mechanisms.	(Legal/regulatory reviews are part of both case studies on policy process and case studies on implementation mechanisms.)
<b>2. NGO/Government Partnerships</b>					
Assess and develop models and mechanisms to increase NGOs' role in advocacy and involvement in the political process.	Yes	<p>TA, workshops to train NGOs in the policy process</p> <p>Workshops, etc. to strengthen collaboration between NGOs and governments</p>	<p>POLICY Project</p> <p>POLICY Project; PAHO (NGO-Government Collaborative Initiative)</p>	Focus has been in LAC region. Given PHR's ties with governments and NGOs, this is appropriate topic area. Decision: conduct case studies on influence or direct involvement of NGOs in policy progress, where this has or is occurring.	<b>Case studies on role and influence of NGOs in policy/health reform process</b>
Strengthen the potential of NGOs to participate in policy dialogue by working with selective NGOs.	Yes	Same as above	Same as above	Considered most appropriate for PHR to bring NGOs and governments together to discuss policy, collaboration, etc. Also ties in with work under PHR's LAC Initiative.	<b>Capacity-building workshops on NGO/government collaboration in policy formulation and implementation</b>

Suggested Topic Area or Activity	Appropriate for PHR SI?	Work in Area by Other Groups		Decision, Comments	Activities Selected
		Description of Work	Group		
Assess, develop and test government mechanisms for contracting-out services to NGOs in selected countries.	Yes	Case study examining contracting-out in El Salvador to local community  Overview of contracting-out to church missions in some African countries	PAHO  London School	Activity refined to evaluate effectiveness of contracting-out and other “implementation mechanisms” for use of NGO resources in improving access, sustainability, equity, quality, etc. (see below)	Evaluation of implementation mechanisms (see below)
<b>3. Increasing Dissemination and Communication among and with NGOs</b>					
Increase networking among indigenous NGOs through connectivity efforts.	Yes	ERC (FPMD); AFRO-NETS; Internet in Africa; HealthNet (Africa)	FPMD, others	This will be part of our information and connectivity strategy for this initiative.	<b>Set up Web page on NGO initiative</b> to disseminate documents and announcements, allow information exchange among NGOs through listservs and “hotlinks”, etc.
Conduct regional or national conferences to exchange information, strengthen dialogue between NGOs and governments, present case studies, etc.	Yes	Initial regional seminars in LAC on NGO-Government Collaboration  Workshops on health financing in the voluntary sector  Others: TBD	PAHO  VHIA/Ford Foundation	Decision: to make workshops and conferences an essential means of information dissemination and capacity-building for this initiative.	Capacity-building workshops on NGO-government collaboration (see above)  <b>Workshops in each case study country to present and discuss findings</b>  <b>Final international “lessons learned” conference</b>
Work with local institutions in selected countries to build NGO directories.	No (more appropriate for TA, not SIs)	PAHO is mapping out NGOs in health/pop. in several LAC countries  World Bank is building NGO directory (not very detailed for health NGOs)	PAHO  World Bank	Not very appropriate for global-funded Special Initiative (more appropriate as part of in-country TA)	

Suggested Topic Area or Activity	Appropriate for PHR SI?	Work in Area by Other Groups		Decision, Comments	Activities Selected
		Description of Work	Group		
<b>4. NGOs' Role in Health Service Delivery (Implementation, Sustainability, Tools)</b>					
Develop and test models of NGO involvement in health service delivery.	Yes (if in country where PHR is providing TA)	Several bilateral CA/donor projects experimenting with models for NGO involvement (e.g., CARE in Ecuador)	Various CAS, PVOs, donors	Given that there are probably enough existing "natural experiments," decision was made to examine existing models through case studies of implementation mechanisms. Also developing and testing models (e.g., franchising model in Zambia) can be part of PHR's TA work in countries.	<b>An evaluation of mechanisms/ arrangements between NGOs and governments and their effectiveness in improving access, equity, sustainability, quality, etc.</b>
Evaluate effectiveness of NGOs to improve access, quality, equity, sustainability and efficiency of health services, especially for the under-served.	Yes	Some limited work on perceptions of NGO strengths in Southern Africa and on effectiveness of health NGOs in Latin America in community participation, service delivery and ability to influence policy	Mburu, T. Carroll	Focus was sharpened: to evaluate effectiveness of various implementation mechanisms (e.g. contracting-out) in meeting these outcomes.	
Work with umbrella organizations and NGOs to identify and test more appropriate and sustainable mix of funding sources.	Yes (if in country where PHR is providing TA)	Several CAs and others provide TA in this area, especially for family planning organizations	FPMD, Enterprise, Initiatives, PROFIT, others	PHR is providing this type of assistance as part of its TA work in several countries, including Bolivia (assisting with financial planning for PROSALUD) and Zambia (assessed feasibility of franchising model).	
Finalize/expand draft report on review of indigenous health NGO's efforts to become sustainable.	Yes			Paper will be revised, made more user friendly	Produce revised document (see above)

Suggested Topic Area or Activity	Appropriate for PHR SI?	Work in Area by Other Groups		Decision, Comments	Activities Selected
		Description of Work	Group		
<b>5. Relationship between USAID and National NGOs</b>					
Conduct review of principal mechanisms used by donors to establish NGO partnerships; conduct a field evaluation of NGO-USAID relationships that have reportedly worked well.	Questionable	TBD	TBD	Feeling by panel is that an evaluation of USAID's ways of working with NGOs is not appropriate for a USAID-funded project. Activity was dropped, but both the case studies on policy process, and on implementation mechanisms will examine the role of USAID and other donors.	