



Waci Health
Championing Health for ALL in Africa

Improving Health. Achieving Equity in Health

Strategic Plan: 2016-2020



Contents

3	Note from the Executive Director
4	Summary note on the strategy
6	Introduction
8	Vision Mission
9	Core values
10	Situational analysis
12	Internal-External Analysis Strengths
13	Weaknesses, Opportunities, Threats
14	Key Lessons
15	Strategic priorities & approach Strategic approach and goals
16	Objective 1: Increased resources for health
18	Objective 2: Policies that will improve health and achieve equity in health
20	Objective 3: Accountability in health governance and delivery
22	Monitoring and evaluation Implementation of the M & E plan
23	The M & E process
24	Organizational Structure

Improving Health. Achieving Equity in Health

Strategic Plan: 2016-2020

Note from the Executive Director:

This strategic plan is our road map towards delivering on our commitment and contribution towards improving health and achieving equity in health for all in Africa.

Since 1997, WACI Health, then known as World AIDS Campaign, has championed the end of life threatening epidemics through policy engagement, advocacy strategies and civil society mobilization. This strategy endeavours to consolidate gains and sharpen ways of our work within the changing global health landscape.

This is our first strategy in our new identity- WACI Health. In our transition from World AIDS Campaign International to WACI Health, we will continue to focus on political advocacy for health, through evidence-driven civil society voice and action. We will take deliberate steps to strengthening our visibility in the policy influencing spaces. We remain committed to deepening accountability not only as a watchdog in health governance and delivery but also at various levels within our organization.

In 2017, WACI Health will celebrate her 20th anniversary. We have come a long way in civil society advocacy in Africa. Particularly, in HIV work, we are proud to have been part of the pioneers in powerful advocacy on the continent. We are immensely grateful to all our partners.

We are optimistic that this 2016-2020 strategic plan will take us further into achieving even greater milestones.

Together, we will get there, and your support makes all of our work possible.

Thank you.

Rosemary Mburu
Executive Director

1. Summary Note on the Strategy

- 1. A New Strategy:** The strategy endeavours to consolidate gains and sharpen ways of our work within the changing global health landscape. Following the end-term review process of the previous strategic plan 2012- 2015, we had the opportunity to reflect on what is working well and needs scaling-up and what is not, with a view to re-positioning the organization to remain effective and relevant as a civil society actor in the rapidly evolving socio-political landscape.
- 2. Health:** This document re-asserts our commitment towards a society free of HIV and also recognizes that a society free of HIV will be realized if a range of other health and human rights issues are adequately responded to.
- 3. Africa Regional Focus:** The strategy takes cognizance that over the last two (2) years, the organization has undergone a range of institutional and leadership transitions. From a global organization founded and headquartered in Europe, working in various geographical regions, such as Europe, Africa, Asia, Middle East and North Africa, to an organization that presently has a regional focus on Sub-Saharan Africa.
- 4. Centrality of civil society in Africa's health response:** In this strategy, We take deliberate action to strengthen Africa civil society's engagement and meaningful participation in a coordinated health response in Africa. This is by strengthening movement building and anchoring civil society's voice at the centre of our interventions. Our engagements will be centred on accountability-led, and people's power processes through political education and social mobilization of Civil Society.
- 5. Promoting deeper and mutual accountability:** Being accountable is a value that we will continue to practice in all relationships. In particular, we will ensure accountability to members of the Africa

Civil Society Platform by developing and reviewing our plans and strategies together, sharing information and setting up feedback mechanisms, promptly acting on and addressing the issues raised/ received through active feedback mechanisms. Our accountability practice will enable civil society to organize more effectively to claim from us and ultimately from duty bearers, towards improved health outcomes in Africa.

6. **Strengthening partnerships:** Our primary partnerships will be with groups of civil society organizations and communities that organize around improved health outcomes. These would also include movements, community based organizations and civil society organizations committed to fighting poverty and injustice using the rights-based approach. Our partnership and relations will be founded on mutual respect, transparency and accountability. Further, we stress our facilitative and catalytic role in the pursuit of equitable access to health services by all.
7. **Campaign work:** Through this strategy we will take deliberate steps to strengthen our visibility in the policy influencing spaces. Our campaigning work will be informed by key principles including: People's Power; Community-led campaigning connected at different levels; and Connection with people most affected.
8. **Focus on a strong performance oriented organizational culture:** We are committed to deepening accountability at various levels within the organization by strengthening staff induction processes, performance management and nurturing leadership styles.
9. **Human rights-based approach:** WACI Health is committed to asserting the indivisibility and inter-connectedness of the rights of all people.

2. Introduction

Through this strategy, we welcome a new phase of strategic transition in our new identity as WACI Health. It is a new era for us where our work is defined by the realities not only in the global AIDS response but also in broader health and equity issues.

We started out as World AIDS Campaign (WAC) in 1997, out of UNAIDS, to focus on raising public awareness on specific issues on the global AIDS response. This was achieved by working to support and strengthen campaigning on HIV accountability among diverse civil society constituencies worldwide.

WAC was also tasked to lead the planning and observance of the International World Aids Day. In 2004, became an independent NGO based in the Netherlands.

In 2008, the organization undertook a strategic shift that would lead to the registration of World Aids Campaign International (WACI) in South Africa. Over the following (4) years, WACI would see a range of institutional and leadership transitions. From a global organization, founded and headquartered in Europe, working in various geographical regions, including: Europe, Africa, Asia, Middle East and North Africa, to an organization that is today based and focused on Africa.

The organization's deliberate shift to focus on Africa was guided by the need to be more conscientious, more innovative and even more accountable and streamlined in our approaches as we continued to ensure that the organization maintained her pivotal role in the global AIDS response, while continually embracing and incorporating the broader health development agenda into her work.

After seven (7) years as WACI, we are renaming the organization WACI Health. In our transition from World AIDS Campaign International to WACI Health, we will continue to focus on political advocacy, through evidence-driven civil society voice and action. With this transition, WACI Health will seek to impact three areas of global health work:

1. **Resources for health:** We will focus on urging national governments and international agencies to step up their investments in health through transparent investments.
2. **Research and Development:** We will focus on supporting health research and development with an aim to see that its application and delivery results to better health for the people most in need.
3. **Civic Engagement:** We will strive to support stronger civil society voice and action, focusing on civic engagement by working with communities to improve access to health for people who are most in need.



VISION

Health for All in Africa

MISSION

WACI Health exists to champion the end of life-threatening epidemics and improved health outcomes for all in Africa by influencing political priorities through an effective, evidence-driven Pan-African civil society voice and action.

CORE VALUES

Equity focused

Our impact and contribution to the global goals is undermined by prevailing inequities. We focus on pragmatic ways of addressing inequities and ensuring that no one is left behind, particularly, those with the least ability to access and/or afford health care.

Human Rights is embedded within our work to help ensure the protection, promotion and fulfilment of universal human rights, particularly right to health.

Participation and Collaborations

We take our lead from those that have limited access to health services as well as those living with and most affected by diseases of poverty. We are a reflective and learning organisation that develops partnerships at all levels, driven by those most in need and those that can contribute to the biggest impact of our work.

Diversity

We seek to work in a culturally sensitive way, embracing diversity and demonstrating an understanding of health inequalities, working in solidarity with communities that have limited access and those most in need.

Accountability

As an institution we strive to be a credible and accountable institution. On the other hand, we do not falter in holding duty bearers accountable as well as civil society for their fair share of responsibility towards ensuring equitable access to health in Africa.

3. Situational analysis

Pivotal moment- historic opportunity to completely control major epidemics:

Just 10 years ago, the African continent was plagued by a terrifying spread of HIV and AIDS, at the same time that malaria was still killing millions of children under the age of 5, and tuberculosis was threatening as well. With life expectancy falling, and education and economy taking a tremendous hit, these diseases were having a terrible impact. Today, thanks to initiatives such as the Global Fund, we have the scientific tools and the implementation experience needed to defeat these three major killers. It gives us an historic opportunity to completely control these three major killers. The world has succeeded in turning the tide of these epidemics, and now, new investments can have a transformative impact. We must seize this opportunity.

Health financing: Health financing context is continuously evolving. Recent studies highlight a number of important and complex transitions at play in the SDG era: the changing epidemiological and demographic landscape, rapid economic growth in implementing countries with many expected to transition from low to middle-income status over the coming years, the emergence of new donors and new sources of health financing and the plateauing of external resources for health after the period of exponential growth during the last decade or so. Almost all studies also note that existing financing resources dedicated to health fall short of the current need, and that even more significant resources will be required post-2015 to sustain the health gains made to date, to achieve universal health coverage and to address emerging health challenges.

Health inequities and disparities: At present, significant inequities and disparities exist in key health indicators, such as infant mortality rates, life expectancy and rates of disease. These are a reflection of the persistent barriers to health that exist in the African society. Recognizing the relationship between health disparities and health inequity, there is need to advocate for policies and strategies that achieve health equity by eliminating health disparities and socially determined barriers to positive health outcomes. These Health inequities exist among groups based on factors such as: poverty, income, education, disability, geographic location, gender, and

sexual orientation.

Post 2015, and Sustainable Development Goals: Fifteen years ago, the Millennium Declaration articulated a bold vision and established concrete targets for improving the existence of many and for saving the lives of those threatened by disease and hunger. Much was accomplished through the concerted and focused efforts of all, saving and improving the lives of many people, but the agenda remains unfinished. The post-2015 development agenda intends to carry on the work of the MDGs and integrate the social, economic and environmental dimensions of sustainable development.

Africa Civil Society organizing and leadership in advocacy: There is growing demand for an African led civil society voice (by Africans, with Africans, for Africans). Effecting Africa's civil society's ability to organize and engage is critical in accountability on policy agenda setting processes, implementation and accountability within the health sector. This includes the management and administration of policies and resources in health, including processes for health systems strengthening. At present, there is a vibrant civil society working on health advocacy in Africa but would require improvement in organizing in a coordinated manner.

4. Internal-External Analysis

The strategic priorities and objectives are entrenched in the core strengths, weaknesses, opportunities and threats (SWOT) drawn from the organization's structure, partnerships, working relationship and external environment.

STRENGTHS

- Ability to influence policy
- Ability to build capacity to hold leaders to account
- Long-standing role as a trusted civil society partner working across Africa and with multiple stakeholders
- A large regional network and a core coordination function for Africa Civil Society platform on Health (CISPHA) and Global Fund Advocates Network (GFAN) Africa.
- Strong working relationship with African Union Commission
- Our organization draws on the legacy of World AIDS Campaign including mobilizing around major global themes in HIV work. History with World Aids Day.
- Engaged on global level platforms and/or partnerships. For example, ACTION Global Health Partnership, Global HIV taskforce on post 2015 agenda, GAVI, Civil Society Steering Committee, Global Fund Advocates Network (GFAN)
- Effective civil society organizing. WACI Health has extensively worked on building and strengthening civil society networks and platforms on HIV and health advocacy and campaigning in Africa. This includes national, Leadership through Accountability (LTA) platforms in Kenya, Tanzania, Ethiopia, Zambia, Malawi, Senegal and South Africa. At the regional level, WACI Health hosts and

provides secretariat services to the African Civil Society Platform and GFAN Africa.

WEAKNESSES

- Declining core funding
- Low online presence and general visibility
- Inadequate documentation and sharing our achievements and successes

OPPORTUNITIES

- Africa is rising with many opportunities for partnership with private sector
- Broader health and development agenda, aligned to SDG 3, as opposed to HIV specific agenda provides an avenue to play in a bigger space with broader partnerships in a more effective manner.
- Scientific breakthroughs and technological advancements in health are expanding. Our organization has an advocacy opportunity to see that these are translated into health products and technologies.

THREATS

- Our work is majorly donor dependent. Change in focus and priorities by donors would mean a shift in resources.

KEY LESSONS

Important lessons emerge from the end-term review of the previous strategic plan that point to the need to rationalize our ambition and capacity and continually strive to deepen impact by:

- Effectively coordinating the Africa Civil Society platform on health and strengthening feedback and communications mechanisms.
- Reclaiming visibility in policy influencing spaces by clearly mapping spaces and developing substantive and shared agenda, including cultivating and building more strategic partnerships at national, regional and global levels for influencing.
- Strengthening technical support to national platforms and national level campaigns
- Ensuring that the organization's work encourage and deliberately seek for a coordinated Pan African Civil Society response.
- Strengthening evidence generation/research by boosting staff efforts on monitoring and evaluation, research and documentation for accountability and to influence policy and practice.
- Strengthening synergy across the region to ensure cost-effective operations that deepen impact.
- Deepening staff and partners' capacity and conceptualization of Human Rights Based Approach, and joint monitoring to effectively track outcome of our work and hold State institutions to account for promised made and delivery of basic health services.
- Harnessing the energy and enthusiasm of young people on social media for mobilization

5. Strategic Priorities & Approach

STRATEGIC APPROACH AND GOALS

WACI Health galvanizes the African Civil Society voice and facilitates the inclusion and leadership of African Civil Society towards defeating life-threatening epidemics while recognizing the importance of promoting broader health issues and human rights. Our approach is based on our theory of change, which is made up of three core strategies:

- 1. Policy analysis and advocacy:** Policy analysis for strategic input and accountability at global, regional and national levels. Through political advocacy, we will seek to influence perceptions, views and decisions of those in positions of power. We will continually seek to achieve improved tools for data analysis and evidence for advocacy. We will input into negotiations that shape and manage the global policy environment for health.
- 2. Civil society capacity strengthening for advocacy:** Strengthening capacity of Civil Society to engage as strong advocates for health in Africa. We will support realization of appropriate civil society capacity for utilization of tools, and knowledge to apply evidence in advocacy. We will seek to strengthen civil society and community organizing for health advocacy.
- 3. Civil society mobilization and engagement:** Building a civil society movement in Africa in order to raise a critical mass of people whose voices and action will be core to ending the epidemics and improving health for all in Africa. We envisage a movement that will broadly contribute to health equity, human rights and gender equality. We see this strengthening/empowerment not only as a process in health advocacy but also an end in itself where empowerment contributes to sustainability beyond specific processes.

The theory of change is dynamic and interactive, with all of the strategies working together to impact 3 areas of Global Health work, which broadly point to our strategic Objectives.

1. **Increased Resources for health:** We will advocate for investments by urging governments and international agencies to step up their investments in health.
2. **Policies that will improve health and achieve equity in health:** We will use our experience and expertise about political systems, policy options, and proven health interventions to push for policy change
3. **Accountability in health governance and delivery:** We will strive to ensure that investments and policies translate into practice, and into health impact.

Objective 1: Increased resources for health

CONTEXT, RATIONALE AND ACTIONS:

The last fifteen years of the Millennium Development Goals (MDGs) have led to unprecedented gains in global health and economic development. Africa has seen marked improvements in health outcomes during the past decade. There has been a considerable decline in child, maternal and adult mortality rates, and substantial decreases in the burdens of several diseases, HIV most notably. The last few years have also witnessed critical scientific breakthroughs, which have brought the promise of effective new diagnostic and preventive technologies, including HIV Prevention technologies. The economies of many low-income countries (LICs) are growing rapidly, but the impact is not equitably felt across populations. While country income may be growing rapidly, achievements in health often lag behind.

World leaders have committed themselves to ambitious global targets. African Union member States have huge responsibilities and obligations towards improved HIV and health outcomes. Civil Society and communities have a crucial role to play in making this happen.

1.1: Identify priority commitments and create entry points for advocacy:

We will identify priority commitments by African and World leaders to engage on and identify or create the most strategic entry points for advocacy.

1.2: Catalyse advocacy action to hold African governments and the international community to their commitments:

We will ensure that civil society partners at country level have adequate technical and political support to demand that their governments and the international community achieve health related targets and commitments. These include commitments in current national disease plans, African Union instruments, and funding commitments (domestic, bilateral and multilateral)

1.3: Monitor and document performance and progress on commitments:

In her watchdog role, WACI Health will monitor implementation of commitments and track progress in efforts to ensuring that advocacy is evidenced based. This will also facilitate identification of best practices, challenges and lessons learnt in implementation of commitments.

Objective 2: Policies that will improve health and achieve equity in health

CONTEXT, RATIONALE AND ACTIONS:

At present, significant inequities and disparities exist in key health indicators, such as infant mortality rates, life expectancy and rates of disease. These are a reflection of the persistent barriers to health that exist in the African society. Recognizing the relationship between health disparities and health inequity, WACI Health will advocate for policies and strategies that achieve health equity by eliminating health disparities and socially determined barriers to positive health outcomes. WACI Health recognizes that Health inequities exist among groups based on factors such as: poverty, income, education, disability, geographic location, gender, and sexual orientation.

- 2.1: Identify relevant policies and strategies that can achieve health equity and create strategic advocacy entry points:** WACI Health will help identify relevant policies and advocacy opportunities, focusing on those entry points to optimize civil society and community input into health policies and strategies. This includes ensuring that civil society and community advocates are aware of entry points and opportunities at country, regional level, and global levels, as well as working with advocates to engage with national, regional and global policy forums. This engagement can either be direct or through a coordinated joint civil society approach.
- 2.2: Provide information, analysis and tools to support civil society engagement, leadership and advocacy:** WACI Health will strengthen her role as a provider of timely, accessible information, analysis and tools to civil society actors on identified policy issues.
- 2.3: Identify capacity gaps and seek out opportunities for skills building and capacity strengthening:** Effecting civil society's ability to organize and engage in policy and advocacy action on health is an important ingredient for effective health responses. Through appropriate partnerships for technical support, WACI Health will actively seek to identify and address capacity gaps among

Africa civil society. We will work to develop CS capacities in policy research, campaigning and advocacy work. This will be through training, offering technical assistance, mentorships, and strengthening partnerships.

Objective 3: Accountability in health governance and delivery

CONTEXT, RATIONALE AND ACTIONS:

Effecting civil society's ability to organize and engage is critical in accountability on policy agenda setting processes, implementation and accountability within the health sector. This includes the management and administration of policies and resources in health, including processes for health systems strengthening. To play a strong leadership role in this effort, WACI Health will foster and maintain accountability at subnational, national, regional and global levels to ensure that investments and policies translate into practice, and into health impact. We will seek to be at decision-making tables where we can input or question decisions that affect how health is governed and delivered.

3.1: Develop accountability tools and mechanisms to support civil society in both the watchdog and representation role

We will work with civil society partners and technical assistant providers to develop better skills, tools and evidence to engage with decisions and performance by duty bearers towards positive health outcomes. Accountability will also mean functional communication and feedback mechanisms among civil society for effective representation in governance structures of key global health institutions e.g. The Global Fund, UNITAID, Stop TB Partnership, UHC2030, the Global Financing Facility (GFF).

3.2: Strengthen structures within WACI Health and externally, for effective African civil society mobilization and leadership.

There is growing demand for an African led civil society voice (by Africans, with Africans, for Africans). To contribute to this demand WACI Health will take deliberate steps towards: (1) Raising WACI Health's leadership visibility in the relevant policy influencing spaces. (2) Strengthening the structures and effectiveness of the Africa Civil society Platform on Health and Global Fund Advocates Network (GFAN). (3) ECOSOC accreditation to strengthen Africa

Civil society's consultative status with UN and its many subsidiary bodies, the various human rights mechanisms of the United Nations, as well as special events organized by the President of the General Assembly. (4) Memorandum of Understanding with African Union Commission to strengthen Africa Civil society's formal engagement with the AUC.

3.3: Expand partnerships

Besides nurturing long-term partnerships, and developing new alliances, WACI Health will also work towards maintaining close ties to a broad range of networks, organizations and advocates. Our advocacy work will be informed by key principles including: People's Power; Community-led campaigning connected at different levels; and Connection with people most affected WACI Health will continue to develop requests for funding to support her work.

6. Monitoring and Evaluation

WACI Health will strengthen mechanisms for constant tracking and regular observation of the implementation of planned interventions and take note of factors and determinants that influence the attainment of identified strategic objectives and successful execution of planned activities. The success of the Strategic Plan is seen as the achievement of the envisaged results/outcomes as well as realizing positive impact within the scale of allocated resources. Monitoring and systematic reporting is a standard operating requirement for all activities.

IMPLEMENTATION OF THE M & E PLAN

There are a number of elaborate mechanisms through which progress in the implementation of the strategic plan will be reviewed.

- **Monthly technical review meetings:** Each week on Mondays, program/project managers will meet to review implementation progress and agree on actions to be taken to address issues raised.
- **Quarterly programme reviews:** every three months, formal program reviews will be held to review progress towards the achievement of quarterly, bi-annual and annual targets. Possible appropriate actions to overcome implementation challenges will be recommended.
- **Annual program review meeting:** Each year, an evidence-informed review meeting will be held to assess progress against the 2015-2020 Strategic Plan results framework. A comprehensive review of each strategy and an overall assessment of resource needs will be done to address implementation challenges and identify priority areas for the coming year
- **Midterm Review:** In 2018 WACI Health will conduct a Midterm Review to examine the accomplishments and gains made over the first two years against expected results. The Midterm Review will provide an indication of the areas of WACI Health's Strategic

Plan that need to be adjusted in line with the post-2015 Sustainable development goals

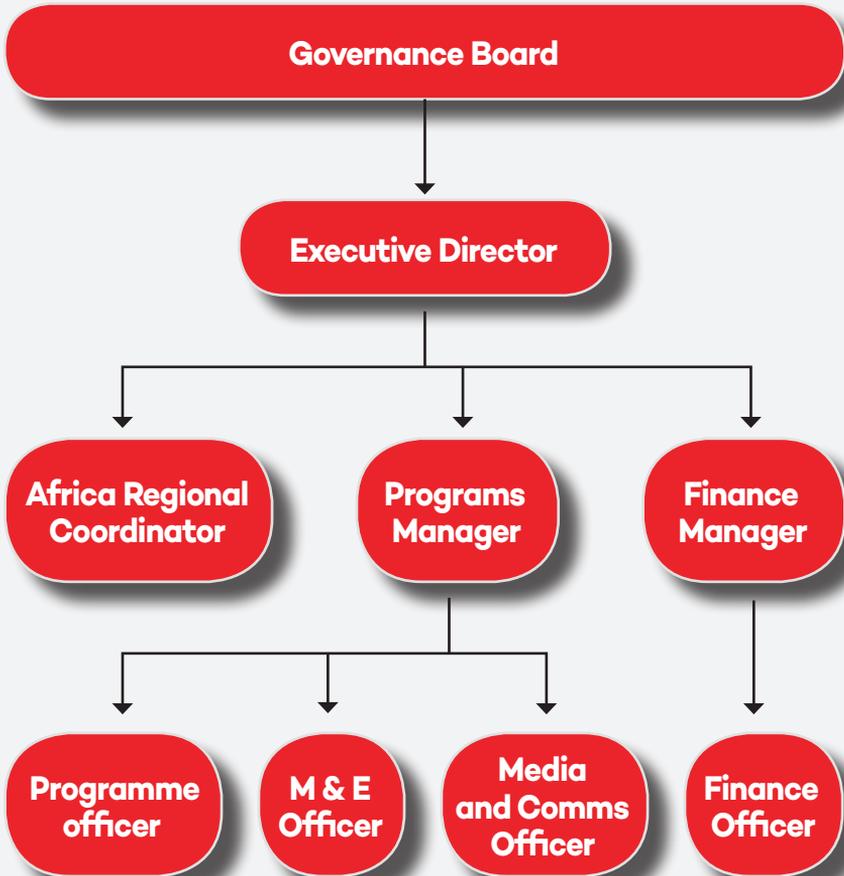
- **End of Term Evaluation:** WACI Health will conduct a comprehensive End of Term Evaluation of its strategies to measure results against goals and objectives. It will also identify any unintended impact and provide a fresh strategic review for the planning of the 2020-2025 Strategic Plan.
- Other evaluation/reviews may be conducted as required by donors/supporting institutions.

THE M&E PROCESS

The following processes will be applied in the on-going M&E of the implementation of the Strategic Plan:

- Tracking of all interventions by WACI Health staff and partners on a quarterly basis
- Information/data collection, including - but not limited to – needs assessments, case studies, photos and video clips
- Data analysis and synthesis
- Staff and management reflection meetings for learning
- Progress Reports
- Activity Reports
- Regular meetings with partners and stakeholders
- Narrative reporting
- Financial reporting
- Sharing of good practice through various communication products

7. Organizational Structure





Waci Health

Championing Health for ALL in Africa

www.wacihealth.org



Nairobi, Kenya

rosemary@wacihealth.org

Tel: +254 711 308 858

Cape Town, South Africa

tabeth@wacihealth.org

Tel: +27 (71) 4939690

Addis Ababa, Ethiopia

info@africahealthplatform.org

Tel: +251 912 623 935