

**SCALING-UP REFERENCE GROUP (SuRG)
VIDEOCONFERENCE
Tuesday 5 February 2008**

NOTE FOR THE RECORD

Present: WHO, GAVI, Global Fund, World Bank, UNICEF, UNFPA, UNAIDS, Bill & Melinda Gates Foundation

PEPFAR and USAID-PMI (President's Malaria Initiative): Feedback from recent meetings

Francis Omaswa from the Global Health Workforce Alliance (GHWA) reported on the recent meeting in Addis Ababa (10-11 January) between PEPFAR, NORAD, DfID, and GHWA. Participants included representatives from Kenya, Ethiopia, Mozambique and Zambia. (A report on the meeting is attached). The World Bank also had a meeting with USAID-PMI and PEPFAR in January, 2008, where commonalities between IHP+ and USAID-PMI and PEPFAR were discussed. PEPFAR gave examples of how they are moving to support wider systems strengthening activities, including establishing health clinics for general health services in many countries. Whilst USAID-PMI and PEPFAR cannot formally 'sign up' to IHP+ compacts, they are able to contribute to health systems strengthening, especially at the country-level. Follow up will be on a country by country basis.

Action: PEPFAR has been invited to Lusaka, and to partner VCNs

Common M&E Framework

Ties Boerma (WHO-MHI) gave an overview of the January 10-11, 2008, M&E Framework meeting, which involved eight countries; countries were very supportive. In discussing how to take this forward in a few countries, it was emphasized that there is already a lot of work ongoing among development partners, thus it should build on existing processes. Whilst there is an awareness of a need to avoid placing too great an additional burden of data collection on countries, there are also big gaps in data which need to be filled in order to conduct effective evaluations. The interface between the M&E work, results-based financing, and national plans and strategies will be discussed in the Lusaka and at the next SuRG meeting. It was noted that reproductive health is missing from the framework.

Action: IHP+ Core Management to address harmonization linkages and the interface between the different IHP+ technical work streams for next SuRG videoconference.

Lusaka Meeting

The draft agenda was discussed and various suggestions made on how to strengthen it. Good facilitation will be key. Whilst the meeting is not expected to end in a pledging session, the hope is that development partners will show commitment to successful country compacts. It is important to be clear on the outcomes to be achieved and it needs to be useful for countries who are progressing towards compacts. Questions were asked about the level of participation, both by countries and donors; as well as senior members of country teams and government, good donor representation at the global level is key to a successful meeting,

since most countries are sending their senior planning staff. It was proposed that a side meeting of HHA and SuRG should be organised towards the end of the meeting.

Action: Finalise agenda and identify facilitators and chairs of sessions
Ensure good bilateral participation. After the Lusaka meeting, IHP+ Core Team to follow-up with bi-laterals. IHP+ Core Team to circulate finalized participant list, outcomes and agenda for Lusaka meeting.

CSO Consultative Group

A draft paper on the proposed CSO Consultative Group was discussed. It was agreed that CSO involvement in the IHP+ is very important, and concerns were expressed about the desirability of creating what appears to be a parallel structure for CSO representation. It is unclear how this structure will link with the work of SuRG. GAVI emphasized that mechanisms for CSO involvement in GHPs such as GAVI and Global Fund are already in place, and IHP+ should link up with these.

It is important that CSO engagement and input is real and has influence.. Better communications and transparency are needed. Global Fund suggested consulting with their three CSO constituencies who have well organised networks, and possibly using GHP Board meetings for outreach IHP+ meetings, to minimise the number of global meetings. Work at country level is most important.

There is a concern among some CSOs that IHP+ will draw resources and aid away from HIV/AIDS; many CSOs recognise the need to engage more broadly in health but will strongly resist any dilution of support for HIV/AIDS programmes. There is also concern amongst some CSOs that IHP+ equates with government control and will marginalise CSO input and influence.

It was suggested that a meeting around the World Health Assembly be organized to inform and engage CSOs on IHP+. It was requested that other IHP+ partners help in the development and organization of this meeting.

Action: CSO Policy paper to be finalised and circulated. Global Fund to link IHP+ Core Team with its 3 CSO board members.

Next Meeting: Tuesday 18 March, 16.00-17.30 hrs Geneva Time