

**REPRODUCTIVE HEALTH SUPPLIES COALITION STRATEGIC PLAN**  
(October 2005 Version)

1. The Reproductive Health Supplies Coalition (RHSC) comprises a range of governmental, non-governmental, public, and private agencies dedicated to achieving the MDGs by ensuring access to a choice of quality reproductive health supplies. Established in 2004, this evolving partnership is now prepared to indicate formally its commitment, as separate organizations and as a coalition, to the objectives of promoting adequate quantities and sustainable financing of reproductive health supplies. While concern among members over the increasing shortfall of commodities provided the immediate impetus for establishment of the RHSC, the coalition believes that its proposed program of action can play an important role in promoting a more coordinated and structured response to the long-term issue of reproductive health supplies security at all levels: global, regional, country, and community.
2. The Reproductive Health Supplies Coalition has prepared the present Strategic Plan to explain why members have established the coalition, what they intend to do both collectively and individually, how they have decided to work together to realize their objectives, and which measures they have selected to monitor and evaluate their contributions. The list of current Coalition members subscribing to the overall orientations and specific actions of this Strategic Plan may be found in Annex 1.

**I. Context for the Establishment of the RHSC and the Preparation of a Strategic Plan**

3. **A worsening situation for reproductive health supplies.** Both the International Conference on Population and Development (ICPD) and the Millennium Development Goals (MDGs) target significant improvement in the health status of the world's population by 2015: The ICPD mandates a series of actions to achieve universal access to reproductive health care, while the MDGs call for drastically reducing maternal and child mortality, reversing the spread of HIV/AIDS, and markedly improving the health of the poor.
4. Neither the ICPD goals nor the MDGs are achievable, however, without rapid improvement in the availability of reproductive health supplies security so that individuals are able at all times to obtain and use the commodities they require. As UN Fund for Population Activities (UNFPA) states, "securing the supply of reproductive health essentials ... requires systems to get everything right: the *right* quantities of the *right* products in the *right* condition in the *right* place at the *right* time for the *right* price. These six *rights* add up to one more: the fundamental human right to reproductive health care."
5. But the case for investing in reproductive health supplies goes beyond human rights to include significant health and economic benefits. Health benefits result from preventing unintended pregnancy as well as sexually transmitted infections (STIs), including HIV/AIDS. According to UNFPA:
  - spacing births is critical to improving maternal health and reducing the infant mortality rate (by up to 45% when births are spaced more than two years apart); and
  - actions to prevent HIV (and specifically condoms) are 28 times more cost effective than treatment.

Economic benefits stem from increased productivity, higher savings and reduced poverty. UNFPA has noted that family planning programs produce tangible savings (for example, in Egypt \$1 invested saved \$31) and that falling fertility rates in low income countries are correlated with a decline in poverty.

6. These demonstrated benefits of adequate reproductive health care are increasingly jeopardized by severe shortages of needed commodities resulting from a number of factors:
  - increased worldwide demand for contraceptives: Demand is projected to increase more than 40% between 2000 and 2015, due to a surge in the number of women and men of reproductive age, the success of family planning programs, and the threat of HIV and other sexually transmitted infections.

- insufficient financial support for reproductive health commodities: The proportion of donor funding has decreased (from 44% of the annual amount needed for sexual and reproductive health commodities in 1996 to 29% in 2002), and government financing has not increased proportionately.
- inadequate management capacity: A lack of timely and accurate information, poorly organized market segmentation, insufficiently coordinated global supply chains, and weak in-country logistics systems have exacerbated the availability of supplies.

The RHSC seeks to translate an independent analysis of the factors which limit or enhance prospects for sustainable RH commodities (particularly in resource-constrained settings) and a clear commitment to the achievement of secure RH supplies as a public health priority into an appropriate programmatic response comprising politically, technically, and financially feasible objectives.

7. **An evolving partnership to address the crisis.** Securing the continuous supply of condoms, contraceptives, and other RH medicines and commodities to meet the increasing demand is a complex responsibility shared by national governments, international agencies, non-governmental organizations (NGOs), and the private commercial sector. The RHSC represents an effort on the part of these concerned participants to provide a coordinated response to a number of critical issues including:

- insufficient access to evidence-based tools, materials and strategies for identifying effective programs and current best practices in resource-constrained settings;
- limited opportunities to share critical information with local and international partners on current supplies and projected needs for reproductive health commodities;
- costly duplication of efforts to improve existing systems and inadequate development of alternative approaches to ensure adequate resources for reproductive health supplies security; and
- lack of a coordinated and consistent message to governments and concerned agencies on the need for enhanced political and financial commitment to reproductive health supplies.

8. These issues are not recent. In 1994, the ICPD in Cairo focused on the objective of universal access to reproductive health care by 2015, including RH supplies. In 2001, UNFPA and other agencies initiated a "Call to Action" to help achieve RH supplies security, and participants at a global meeting on contraceptive security in Istanbul (i) adopted a strategic objective for "collective action by, among, and between implementing and funding partners guided by country, regional, and global strategic plans" and (ii) recommended that "a revitalized donor coordination council should be supported with human and financial resources to ensure that the principal funders of supplies are working together, sharing information, and helping to solve this looming crisis."<sup>1</sup>;

9. Concurrently, a group of four organizations (John Snow Inc., Population Action International, Program for Appropriate Technology in Health and the Wallace Global Fund) came together as an Interim Working Group (IWG) in an effort to raise awareness. Following on the IWG's work, the International Initiative on Reproductive Health Supplies (IIRHS) was established and expanded to nine organizations (April 2002); the IIRHS was an extensive plan for tackling all of the major causes of the crisis as identified at Istanbul: advocacy, national capacity building, financing, and donor coordination. The Supply Initiative was established in 2003 to implement the first phase of this plan: addressing priority issues at the global level through the RH Interchange; the RH Supplies Partnership; and the development of a plan for Resource Mobilization, Global Awareness and Communications.

10. Based on the results of these initiatives and on the perceived need to enlarge participation in the debate on common issues and potential solutions, the RHSC was established in 2004. It has subsequently evolved through a series of general meetings (in April and November 2004 and in May and October 2005), the establishment of three formal working groups, and the creation of ad hoc task forces (primarily to draft the terms of reference defining the guiding principles and operating practices of the Coalition).

---

<sup>1</sup> Population Action International. *Meeting the Reproductive Challenge: Securing Contraceptives and Condoms for HIV/AIDS Prevention: Report of a Meeting, November 2001.*

11. The RHSC has developed during a period marked by the emergence of global partnerships and alliances for vaccines (GAVI), for AIDS/TB/Malaria (GFATM), for TB drugs (GDF), and for maternal, newborn and child health. Recent evaluations of these efforts have indicated some of the potential benefits and pitfalls of the partnership approach, and the RHSC has incorporated many of these findings into its terms of reference. In particular, the Coalition intends over the next few years: (i) to develop a shared strategic vision and consensus on policies and programs for ensuring the security of RH supplies; (ii) to raise both the profile and the political commitment to RH supplies through awareness-raising at international and national levels; and (iii) to coordinate partner efforts to build capacity at national level. Over the longer term, the Coalition aims to strengthen its partners' efforts to align, mobilize, and allocate financing, goods, and services for improved RH supplies security.

12. **A growing consensus on the potential contributions of the RHSC.** Coalition members have been acutely aware of the constraints they face both as individual agencies and organizations and as Coalition members. The Coalition has confronted a number of such issues, including:

- the diversity of mandates and priorities among its partners and the consequent need for members to work by consensus towards common goals and without renouncing their independence;
- the implications of changing the way members have traditionally operated given that: (i) increased financial resources, though necessary, are unlikely to be available and do not solve all problems; and (ii) technical assistance, though essential, cannot substitute for building national capabilities; and
- the importance of clearly defining the relationships and responsibilities of governments, agencies, and organizations involved in reproductive health supplies while acknowledging the crucial role of civil society in the supply issue.

13. Past meetings of the RHSC have resulted in agreement on a number of common concerns and issues as a basis for moving forward; members have agreed on:

- the need to: (i) emphasize the critical role of reproductive health supplies for the attainment of all of the MDGs; (ii) combine a better understanding of what is happening at the country level with the challenge of forecasting demand worldwide; and (iii) address both short-term supply issues and longer-term institutional capacity issues;
- the belief that: (i) each partner working in this field has a unique role and comparative advantage; (ii) all partners must work together to expand their efforts on global and national levels to achieve the reproductive commodity/supply security goals of ICPD; and (iii) the success of all the various partners can be maximized only through government leadership of coordinated efforts at national level; and
- the recognition that: (i) traditional approaches to RH supplies at national level must take into account new methods (SWAps, PRSCs, etc.) for ensuring the complementarity of assistance related to critical RH supplies; and (ii) greater government responsibility for RH commodities is compatible with and will benefit from enhanced mechanisms to promote constructive exchanges on priority issues.

14. Of principal concern to members has been the issue of the value which the RHSC could bring to the problem of reproductive health supplies security and sustainability. Members are encouraged by the initial positive results of the Coalition and have agreed that the potential value added by the RHSC would include:

- offering a regular forum for technical cooperation (in an often politically charged environment) to share information, knowledge, and experience;
- strengthening the efficient and effective use of existing resources through improved coordination and harmonization of RH supply programs;
- increasing global awareness of RH supply issues and influencing country commitments to serve the RH needs of poor and vulnerable populations;
- promoting innovation and collaboration among the public, private, and commercial sectors to expand markets for RH supplies; and

- providing a joint advisory and accountability mechanism for collecting data, monitoring progress, and evaluating the impact of increased RH supplies.

## II. Vision, Mission, Goals, Objectives, and Measures of Achievement Adopted by the RHSC

15. **Vision and mission.** Members of the RHSC share a common vision of protecting people's health and improving their livelihoods by ensuring sustained access to a choice of quality reproductive health supplies. Consequently, the RHSC's mission is to ensure that every person is able to obtain and use RH supplies.

16. **Goals.** In furtherance of its mission, the Coalition has adopted the following goals which members seek to advance both by individual organizational efforts and by collaborating on a global level through the RHSC:

- improve access to and choice of RH supplies for low- and moderate-income consumers through public, private, and commercial sectors;
- increase political commitment and financial resources and their more effective use to serve the RH needs of poor and vulnerable populations;
- strengthen global, regional, and country systems for reliable and predictable supply of quality RH supplies;
- improve coordination and use of global, regional, and country-level information, knowledge, best practices, and lessons learned; and
- formulate other strategic responses as needed to address the future demand for RH supplies.

17. Three Working Groups have currently been established to address the issues of: (i) Total Market Development; (ii) Resource Mobilization and Awareness; and (iii) Systems Strengthening. Mindful of previous research showing the dangers of not having a detailed operating plan in place, the Working Groups have proposed activities and budgets for the next three years and agreed on measures for monitoring the success of the collaboration. Draft medium-term plans have been proposed by each of these Working Groups; they are summarized below and presented in detail in Annex 2.

18. **Objectives and measures of achievement.** Building on their individual and combined strengths, members of the RHSC have agreed on overall objectives and specific measures of achievement, both to focus the coalition's efforts and to ensure the efficiency of its operations.

19. To improve access to and choice of RH supplies for low and moderate income consumers through public, private, and commercial sectors, the RHSC will: (i) synthesize and share existing knowledge to provide the base for development of models and actions; (ii) develop, test, and validate models for fully commercial markets that meet the needs of lower income consumers; and (iii) develop a supportive environment, based on information and coordination at all levels, to further the goal. Principal responsibility for these objectives has been assigned to the Market Development Approaches Working Group (MDAWG).

20. The MDA working group will initially focus on developing the knowledge base for future work by: (i) analyzing existing experience, evidence, lessons etc. regarding models, tools; (ii) rationalizing approaches to generic manufacturers to determine how existing or planned work can serve the working group's needs; and (iii) preparing a country typology to match potential models to the individual country's institutional situation and economic environment. The working group will then address its other assigned objectives for testing models and developing a supportive environment. Over time, measurement of the achievement of this goal will be based on:

- progress achieved in the targeting and in the availability of RH supplies;
- monitoring increases in the proportion of all contraceptives provided by the commercial sector; and

- progress in achieving financial sustainability for the local commercial sector participants in the distribution and retail sectors.

21. To increase political commitment and financial resources and their more effective use to serve the RH needs of poor and vulnerable populations, the RHSC will: (i) promote strategic international support for RH supplies and dependable funding flows; and (ii) facilitate increases in domestic financing of RH supplies. Principal responsibility for these objectives has been assigned to the Resource Mobilization and Awareness Working Group (RMAWG).

22. To promote strategic international support for RH supplies and dependable funding flows, the RMA working group will: (i) collaborate with and coordinate among Coalition members to ensure that concern for RH supply remains on the global development agenda; (ii) initiate relationships with other potential allies and new strategic entry points; (iii) develop dialogue among members on messages and advocacy strategies; and (iv) improve the exchange of information between donors and recipient countries.

To facilitate increases in domestic financing of RH supplies, the RMA working group will promote and monitor the effects of: (i) including RH in the World Bank guidelines for Poverty Reduction Strategy Programs (PRSPs); and (ii) securing a budget line item for financing RH supplies based on WHO's List of Essential RH Medicines. The working group will also identify selected countries and support capacity building to remove political/legal barriers regarding provision of supplies at country level and reduce barriers impeding the commercial sector.

23. Measurement of the achievement of these objectives will be based on:

- monitoring the inclusion of RHS-related items in PRSPs and medium-term expenditure frameworks; and
- the availability of adequate financing of RH supplies through improved mobilization of additional financing and better coordination of existing funds.

24. To strengthen global, regional, and country systems for reliable and predictable supply of quality RH supplies, the RHSC will: (i) improve joint efforts for timely access to and use of standardized information to align financing and reproductive health (RH) product flows to meet country requirements; (ii) develop solutions to increase the reliability, predictability, and efficiency of public financing for RH supply needs, especially for poor and vulnerable populations; and (iii) identify and support supply chain improvements for effective and efficient delivery of quality assured RH supplies. Principal responsibility for these objectives has been assigned to the Systems Strengthening Working Group (SSWG).

25. To achieve the objective of improving timely access to and use of standardized information to align financing and reproductive health (RH) product flows to meet country requirements, the SS Working Group will: (i) advise and monitor the progress of the RH Interchange to assess the quality, analysis, dissemination, and use of information; (ii) assess the status of country logistics management information systems (LMIS) and propose recommendations to RHSC for improving priority areas and countries; and (iii) improve access to indicators and measures for use by the RH community to monitor country RH supply security.

26. To increase the reliability, predictability, and efficiency of public financing for RH supply needs, especially for poor and vulnerable populations, the SS Working Group will: (i) support development of the "Global Programme" with analytical support for a possible "buffer/stability" fund; and (ii) monitor and address emergency supply needs through the Countries-at-Risk Group (CAR).

27. To identify and support supply chain improvements for effective and efficient delivery of quality assured RH supplies, the SS Working Group will: (i) document best practices and emerging issues in supply chain management and advise the RHSC on the potential for replication/scale-up of best practices and on areas for new research, analysis, and innovation; and (ii) monitor progress to increase the availability of and demand for quality-assured supplies through the use of essential medicines lists and standardized prequalification of supplies and suppliers.

28. Measurement of the achievement of these objectives will be based on:

- the effectiveness of the global system in place for estimating supply levels and flows through the use of the RH Interchange; and
- the development of country-level LMIS, including the use of commodity/supply security indicators (CPR, unmet need) as a measure of MDG progress;
- a reduction in the frequency and duration stockouts as well as the quantities of RH supply losses.

29. Each of the working groups will also address the common goals of: (i) improving the coordination and use of global, regional, and country-level information, knowledge, best practices, and lessons learned; and (ii) formulating other strategic responses as needed to address the future demand for RH supplies.

Indicative measures of the achievement of these objectives may include:

- expanded country access to and use of evidence-based tools, materials, and strategies;
- progress achieved in simplifying and harmonizing procurement guidelines, procedures, and planning; and
- the effectiveness of coordinating mechanisms among suppliers and between suppliers and country supply managers.

30. Each of the Working Groups is expected to establish a baseline situation for its respective indicators and, with the assistance of the Secretariat, to monitor them and report back periodically to the other RHSC members. In the long-term, the RHSC expects its impact to be felt at the individual level by ensuring each person's right to obtain and use reproductive health supplies. More realistically, the coalition envisions medium-term results and outcomes at country, regional and global levels from: (i) promoting measures adopted by the Coalition; (ii) coordinating technical support in selected areas as agreed on by the Coalition; and (iii) monitoring changes in specific indicators of RH supplies as identified by the Coalition. At the level of outputs, the Coalition will focus on the effective operations of the organization and in particular its secretariat and working groups.

### **III. Guiding Principles, Organizational Measures, and Operational Arrangements for Achieving the RHSC's Objectives**

31. **Guiding principles.** The RHSC is committed to achieving a sustainable supply of affordable, quality reproductive health supplies in low and middle income countries. To this end:

- The RHSC understands that to achieve its vision, it must: (i) maximize public and private resources to optimally serve the "total market" of people's needs for RH supplies; and (ii) utilize a multisectoral approach to improve RH behaviors. Since increased country ownership is fundamental for achieving its goals, the RHSC will work through national governments to develop supportive policies, plans, resource commitments, and capacities.
- The RHSC understands as well that to be effective the coalition must complement the actions of its individual members as well as those of private industry; it will therefore (i) concentrate on areas where no one partner can work effectively alone to leverage their different comparative strengths; (ii) commit to strengthening harmonization and coordination of partner activities; and (iii) implement a cooperative, problem-solving approach to ensure the focus of both industrialized and developing country manufacturers on providing and delivering quality reproductive health supplies.

The RHSC's internal organizational measures and its operational arrangements at the individual country level reinforce these principles.

32. **Internal organizational measures.** As well as having agreed on clear goals and specific performance indicators, the RHSC has taken note of the fact that the most successful international health alliances have addressed essential institutional issues related to: (i) the value added of cooperation; (ii) the

structure of the alliance; (iii) the balance between encouraging consultation and participation while ensuring responsiveness and effectiveness; and (iv) the need for full-time, permanent staff whose main objective is the Coalition's success.

33. The current proposal for the RHSC envisions: (i) the full coalition, led by a Chair who also leads the Executive Committee; (ii) the Executive Committee; (iii) the Secretariat, headed by a full-time Director and staff; and (iv) Working Groups, established by the Executive Committee on the basis of need and interest. An organizational chart indicating the relationships of these structures may be found in Annex 3; the TORs and operational directives for the various components of the RHSC may be found in Annex 4; they will be further developed by the future director and staff of the RHSC Secretariat.

34. RHSC. The RHSC comprises representatives of organizations and constituencies with a significant (programmatic and/or financial) stake in RH commodity/supply security and provides a forum for members: (i) to share information, publications, data, and research findings to advance RHSC strategic priorities; (ii) to constructively raise, discuss, and seek resolution to problems that impede progress toward RH commodity/supply security at the country level; and (iii) to formulate a set of strategic priorities and work in concert to achieve them through agreed-upon activities, the implementation of which are member-sponsored through financial, in-kind, and technical commitments.

35. Executive Committee. To support the operations and enhance the decision-making of the RHSC, the Executive Committee: (i) provides guidance, oversight, and approval of the RHSC's strategic planning, work planning, and budgeting processes, including the Secretariat's sustainability strategy; (ii) approves monitoring and evaluation plans and periodically reviews RHSC progress against goals and objectives; (iii) assists the Chair and the Secretariat in the preparation of full RHSC meetings and in the identification and approval of new members; and (iv) ensures transparency as well as the avoidance/resolution of conflicts of interest.

36. Secretariat. The Secretariat would have multiple responsibilities in the areas of: (i) planning and budgeting; (ii) monitoring and evaluation; (iii) preparation, conduct, and follow-up of RHSC meetings; (iv) representation; and (v) administration.

- Planning and budgeting. The Secretariat: (i) monitors the external environment and makes recommendations to the Executive Committee on RHSC direction; (ii) develops, in collaboration with the Working Group leaders, for Executive Committee approval RHSC Strategic Priority Framework (including milestones, indicators, etc.) and the comprehensive three-year work plan (Secretariat and Working Groups); (iii) develops for Executive Committee approval the RHSC communications plan and funding strategy; (iv) finalizes and disseminates the RHSC strategic framework after full RHSC and Executive Committee deliberations; and (v) develops the Secretariat budget for approval by the Executive Committee.
- Monitoring and evaluation. The Secretariat: (i) develops, in collaboration with the Working Group leaders, for Executive Committee approval the monitoring and evaluation plan; (ii) regularly monitors progress against strategic priorities and reports to the Executive Committee; (iii) prepares and disseminates (on behalf of the Executive Committee) to the full RHSC membership a semi-annual summary of progress against the RHSC strategy plan; and (iv) in collaboration with RHSC members and based on the evaluation approach, documents successes arising from the RHSC.
- Preparation, conduct, and follow-up of RHSC meetings. The Secretariat: (i) works with the Chair and Executive Committee to manage all aspects of RHSC meetings, including identification of issues, agenda preparation, and finalizing meeting dates and locations; prepares correspondence with members; retains the meeting facilitator; drafts and disseminates reports of meetings and teleconferences and a brief written progress report on past RHSC decisions for each meeting; and (ii) documents and reports Executive Committee meeting outcomes, recommendations, and decisions to the full RHSC.
- Support to the Working Groups. The Secretariat: (i) assists and supports the Working Groups, as appropriate, in developing and implementing their action plans; and (ii) facilitates RHSC fundraising activities, under the direction of the Executive Committee, by serving as a clearinghouse to ensure fundraising by different Working Groups is not at cross purposes.

- **Representation.** The Secretariat: (i) communicates priorities and progress of the RHSC within the larger RH community; (ii) represents the RHSC at relevant international and national forums and with various partners, including the commercial sector; and (iii) manages the RHSC website, if one is created.
- **Administration.** The Secretariat: (i) provides overall cohesion to the RHSC and helps ensure the attainment of Coalition priorities; (ii) facilitates internal communications among RHSC members; (iii) facilitates the new member nomination process; and (iv) maintains RHSC archival files.

37. **Working Groups.** The Working Groups advise on critical directions and priorities and serve as the implementation and technical arms of the RHSC strategy; as such, they plan, coordinate, implement, and monitor actions, which build on the mandates, interests, resources, and comparative strengths of members, and represent core partnership activities. They will: (i) identify activities in support of the RHSC strategic plan and assign roles and responsibilities within the Working Group; (ii) coordinate with other Working Groups to ensure synergy of activities; and (iii) develop basic monitoring and evaluation plans and assume accountability for outcomes.

38. **Operational arrangements at country level.**

Paragraph to be developed when operational modalities at the country level are determined.

**IV. Costs and Benefits for Members of the RHSC**

39. **Benefits.**

- Accessibility: *right* quantities of the *right* products in the *right* place
- Quality: in the *right* condition at the *right* time
- Cost: for the *right* price

40. **Costs.** The estimated costs of the RHSC comprise the direct costs of the Secretariat, the indirect costs of members in carrying out the plans adopted by the RHSC, and opportunity costs for all members but especially for those from developing countries.

41. The proposed costs of the Secretariat are estimated at approximately US\$ 3.3 million over the period 2006-2008 and are expected to be financed (at least initially) by grants. Members of the RHSC are now contributing to and will be expected in future to finance the operations of the Coalition: (i) by directly funding the secretariat staff, its operations, and the organization of the meetings; and (ii) by donating additional staff time and office space, meeting related costs, and other expenses necessary to accomplish RHSC business.

**Annex 1: List of Member Organizations of the Reproductive Health Supplies Coalition**  
(as of September 30, 2005)

Low/Middle Income Country Governments<sup>2</sup>

- China / Shanghai Institute of Planned Parenthood Research
- India / Ministry of Health and Family Welfare
- Paraguay / Ministry of Health
- Romania / Ministry of Health
- Uganda / Ministry of Finance, Planning and Economic Development

Multilateral Organizations

- United Nations Population Fund
- World Health Organization / Essential Drugs Management Unit
- The World Bank

Donors

- European Commission
- United Kingdom / Department for International Development
- Germany / BMZ/KfW Development Bank
- Netherlands / Ministry of Foreign Affairs
- United States / Agency for International Development

Private Donors

- The Bill & Melinda Gates Foundation
- United Nations Foundation
- Wallace Global Fund<sup>3</sup>

Nongovernmental Organizations

- International Planned Parenthood Federation
- Partners in Population and Development
- PROFAMILIA/Colombia<sup>4</sup>
- Supply Initiative

Social Marketing Organizations<sup>5</sup>

- Ghana Social Marketing Foundation
- Population Services International

---

<sup>2</sup> Two-year term.

<sup>3</sup> Representing other private foundations with an interest in RH supply security.

<sup>4</sup> Two-year term (2004–2006).

<sup>5</sup> Two-year term (2004–2006).

## Annex 2: Work Plans of the RHSC Working Groups

### Market Development Approaches Working Group Work Plan

**Objectives:**

- Synthesize and share existing knowledge to provide the base for development of models and actions
- Develop, test, and validate models for fully commercial markets that meet the needs of lower income consumers
- Generate information and coordinate at all levels to develop a supportive environment to further the goal.

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
Synthesize existing experience, evidence, lessons etc. regarding models, tools	Lead: J. Darroch Contributors: L. Chinery, B. Light, C. Stokes		Consultant TOR: 11/05  Final report: 1/06	Team charged with identifying funding		Report, resource list Basis for identifying
Rationalize approaches to generic manufacturers, avoid duplication, seek to ensure existing or planned work can serve WG objectives: Identify how to move forward, identify gaps, avoid duplication	Lead: P. Hall Contributors: J. Hutchings, J. Robertson, L. Chinery, C. Stokes	David Smith Sophie Logez	1/06	No external funding required		Guidance to the group on next steps and available resources (including ongoing work)
Country typology	Lead: C. Stokes Contributors: M. Verwijk, A. Banful		1/06	No external funding required		Discussion piece on matching models to country and institutional situations and environments
Planning in London 1	B. Light and other WG members		1/06	No external funding required		Multi-year work plan

### Resource Mobilization and Awareness (RMA) Working Group

**Objectives:**

- Collaborate with and coordinate among Coalition members to ensure RH and RH supplies remain on the global development agenda.
- Increase and strengthen advocacy for RH supplies in country- and regional-level programs.
- Mobilize additional resources by developing a comprehensive, multi-annual program that takes into account regional and innovative activities.

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
<b>Promote strategic international support</b>						
<p>Ensure representation and messaging at strategic “calendar” events; identify strategic entry points and prioritize events for advocacy activities.</p> <ul style="list-style-type: none"> <li>• Review Calendar at each Coalition Meeting in RMA Working Group and coordinate who is attending which meetings and could represent the RHSC. For example: Toronto HIV/AIDS meeting</li> <li>• Transition keeping Calendar to new RHSC Secretariat via the future RHSC website</li> </ul>	<p>SI Phase II: PAI/DSW/Network, Working Group Leader, Secretariat (Lead)</p>		<p>Next 3-6 months</p>		<p>Minimal cost</p>	<p>Up-to-date calendar of events, indicating Coalition Member participation</p>
<p>Develop relationships with strategic entry points (new allies, health forums, etc.)</p> <ul style="list-style-type: none"> <li>▪ Support regional initiatives such as WAHO</li> <li>▪ Identify and pursue potential working relationships with Global Alliances (Newborn Partnership, others from other development sectors such as refugees, Rotary Initiatives (Initiative on Population and Development), etc.)</li> <li>▪ Make use of EU Presidencies as an entry point: Austria, Finland, Germany, Greece</li> </ul>	<p>USAID</p> <p>Working Group Members, Lead: Lead of working Group, SI Phase II: PAI/DSW/Network</p> <p>All, lead: SI Phase II: PAI/DSW/Network</p>		<p>On-going</p> <p>Next 3-6 months and beyond</p> <p>2006-08</p>	<p>Need info</p> <p>SI Phase II: PAI/DSW/Network</p> <p>SI Phase II: PAI/DSW/Network</p>	<p>Need info</p> <p>\$15,000</p> <p>\$20,000 subgrants to NGOs</p>	<p>WAHO is funded and has an RH supplies plan of action Meeting held to determine interest and willingness to work on RH supplies</p> <p>Presidency will build upon previous positions around RH and in particular RH supplies.</p>
<p>Hold an open dialogue to determine a clearly agreed-upon “ask” and advocacy strategy towards stable funding flows (for example: the “ask”</p>	<p>SI Phase II: PAI/DSW/Network to hold a meeting of RMA Working Group</p>		<p>First Quarter of 2006</p>	<p>SI Phase II: PAI/DSW/Network</p>	<p>\$25,000</p>	<p>Meeting document describing agreed upon messages including guidance on use of</p>

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
might be: need for stable funding flows, need to identify new donors and bring them into the coalition, need a buffer/stability fund, message around the UNFPA Global Program, need to increase the commitment of government donors, etc.)	Members with NGO Network and donors					messages (for example, information on intended audience)
Develop and support country feedback – seek ways to strengthen the feedback loop from countries to donors.	All RHSC members with field presence or southern partners. Lead: USAID		2006	Individual RMA members	Part of core activities	Clear communication to field offices and staff on RHSC goals and activities.
Report on UNFPA monitoring (three indicators: existence of budget line, coordination mechanism, present on national essential drug list).	Lead: UNFPA.		1st quarter of 2006	UNFPA, SI	UNFPA – need info	A paper presented at the April RHSC meeting presenting the results of the UNFPA survey.
Package for advocacy the above results	SI Phase II: PAI/DSW/Network		2nd quarter 2006	SI Phase II: PAI/DSW/Network	\$3,000	Factsheet for advocacy using the results of the UNFPA survey.
Expand dissemination of information on supply emergencies to global advocacy.	Supply donors, SI, RHI and CAR members		Next 3-6 months	SI Phase II: PAI/DSW/Network	Need info	Information disseminated via SupplyNews and SI Phase II website
<b>Facilitate increases in domestic financing</b>						
Ensure that highest priority is given in national budgets, sector-wide approaches, country strategy papers, and poverty reduction strategies to RH supplies.						
Promote inclusion of RH into PRSPs. <ul style="list-style-type: none"> <li>▪ Publicize the World Bank’s new PRSP guidelines.</li> <li>▪ Support UNFPA completion of guidelines</li> <li>▪ Support USAID completion of report on PRSPs</li> <li>▪ Review guidelines for presence of and role for civil society</li> </ul>	WB  UNFPA  USAID  SI Phase II: PAI/DSW/Network		After WB completion Next 3-6 months Next 3-6 months 2nd quarter 2006	WB, SI Phase II  UNFPA  USAID  SI	Minimal Costs Core UN FPA activity Core US AID activity \$6,000 est.	WB guidelines disseminated UNFPA guidelines available USAID report published  Recommendations for civil society involvement
Use the List of Essential RH						

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
Medicines to secure budget line item and financing for supplies Donors to send a letter/ communication to countries encouraging the use of the RH essential drug list, similar to the letter that goes out from WHO and UNFPA	RHSC Members with country offices, e.g. USAID, DFID, KfW, IPPF, EU, UNFPA		Next 3-6 months	N/A	Minimal cost	Letters from USAID, DFID, KfW, IPPF, and others to field offices, EU letter to member states/Africa Region.
Conduct strategic mapping of donor activities to facilitate prioritization and targeting of a group of focus countries in collaboration with the System Strengthening Working Group who is compiling an inventory of tools and information sources.	PAI with Coalition member input		Next 3-6 months	PAI	\$2,000 est.	List of focus countries based on Coalition member activities, interest, and other indicators
Collaborate in selected countries identified during process above with the goal of strengthening and supporting capacity building with a specific focus on:  <ul style="list-style-type: none"> <li>▪ supporting countries to remove political/legal barriers regarding provision of supplies at country level including reducing barriers for heightened activity of the commercial sector</li> </ul>	All Working Group Members  RMA Working Group Members, IPPF, SI Phase II: PAI/ DSW/Network		3rd quarter 2006-2008  3rd quarter 2006-2008	TBD  TBD	TBD  TBD	Joint strategic action will be discussed at the next RMA Working Group Meeting to: <ul style="list-style-type: none"> <li>▪ Determine materials and strategies</li> <li>▪ Determine roles and responsibilities</li> <li>▪ Implement the activity</li> </ul> Political/legal barriers identified and removed

### Systems Strengthening Working Group

**Objectives:**

- Improve joint efforts for timely access to and use of standardized information to align financing and reproductive health (RH) product flows to meet country requirements
- Develop solutions to drive increased reliability, predictability, and efficiency of public financing for RH supply needs, especially for poor and vulnerable populations.
- Identify and support supply chain improvements for effective and efficient delivery of quality assured RH supplies.

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
<b>RH Interchange</b>						
Serve as the Management Group for the RH Interchange (see footnote for details regarding the SSWG's responsibility vis-à-vis the RH Interchange). <sup>6</sup> Activities endorsed by the SSWG and that it will direct/monitor are: <ul style="list-style-type: none"> <li>▪ Add projections of RH supply needs (to 2015) to the RH Interchange.</li> <li>▪ Complete minimum data requirements from UNFPA, IPPF in order to monitor procurement, shipping, and distribution plans.</li> <li>▪ Establish a standardized approach for reliable, 1-3 year forecasts of country RH supply requirements.</li> <li>▪ Incorporate and use standardized 1-3 year forecasts for country programs in the RH Interchange.</li> <li>▪ Develop and pilot country functionality of the RH Interchange to strengthen country forecasting, financing,</li> </ul>	SSWG, A. Bornbusch		2006-08			
	UNFPA, J. Upadhyay; RH Interchange, M. Whitehouse		2006			
	UNFPA, J. Upadhyay; IPPF, L. Chinery; RH Interchange, M. Whitehouse		2006			
	SSWG, A. Bornbusch RH Interchange, M. Whitehouse		2006			
	SSWG, A. Bornbusch RH Interchange, M. Whitehouse		2006-08			
	SSWG, A. Bornbusch RH Interchange, M. Whitehouse		2007-08			
SSWG, A. Bornbusch RH Interchange, M. Whitehouse		2006-08				

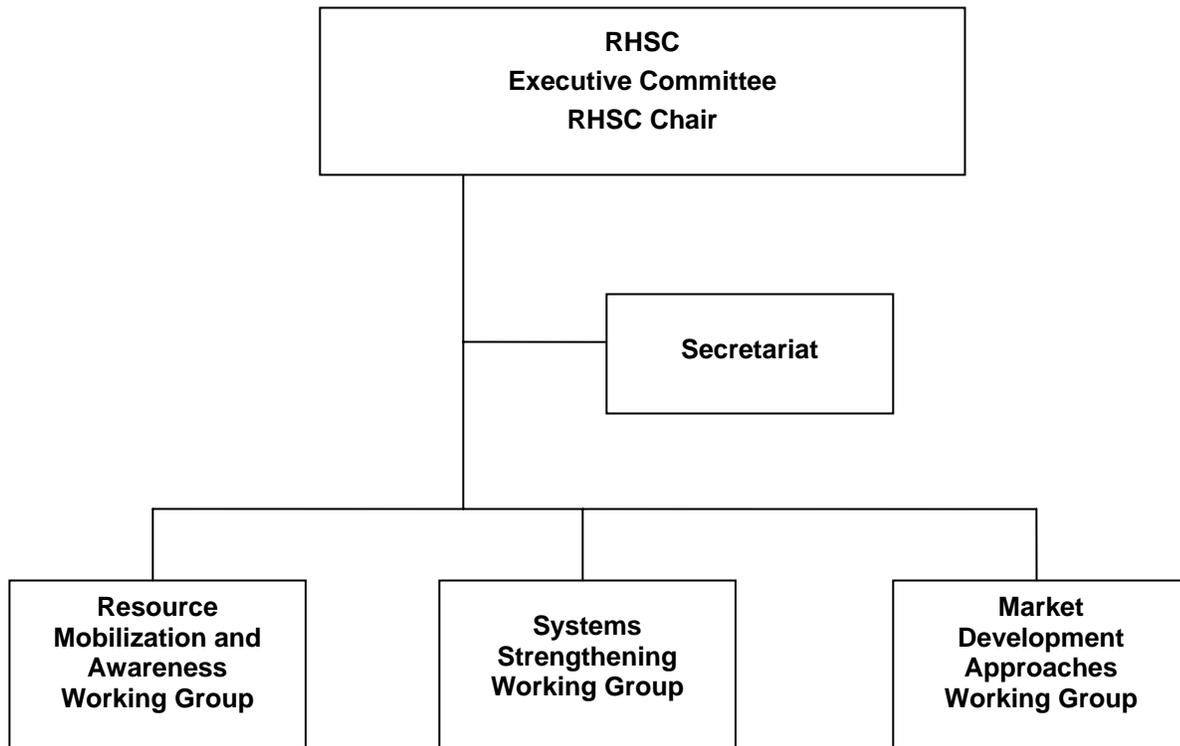
<sup>6</sup> The SSWG has direct responsibility for jointly directing RH Interchange development and monitoring its progress. "Directing" means involvement in assessing the quality of information, analysis, dissemination, use, and any future projects to advance the RH Interchange to meet needs for better information and environmental changes. "Monitoring" means review of partners' progress to commitments made to the RH Interchange, with reporting to the RHSC. This monitoring function forms the basis for the working group to serve as the forum for accountability of RH Interchange participants and implementers for specific activities the achievement of which is their responsibility.

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
<p>procurement, monitoring, and management of RH supply flows.</p> <p>Continue to advise/support implementation of additional expansion options for the RH Interchange.</p>	SSWG					
<b>Country LMIS</b>						
<p>Strengthen logistics management information systems (LMIS) for country-level supply chain management:</p> <ul style="list-style-type: none"> <li>▪ Develop common LMIS standards, guidelines, and assessment methodologies.</li> <li>▪ Assess status of country LMIS systems and their forecasting capacities.</li> <li>▪ Develop recommendations to RHSC on priority areas and countries for LMIS improvements.</li> </ul>	<p>SSWG, A. Bornbusch</p> <p>SSWG, A. Bornbusch</p> <p>SSWG, A. Bornbusch</p>		<p>2007-08</p> <p>2007</p> <p>2007-08</p> <p>2007-08</p>			
<b>Global Monitoring</b>						
<p>Identify existing indicators/measures for monitoring countries RHCS status and survey where the data is housed.</p> <p>Compile these indicators/measures into a single global platform.</p>	<p>RH Interchange, M. Whitehouse</p> <p>RH Interchange, M. Whitehouse; RHSC Secretariat</p>		<p>2006</p> <p>2006-07</p>			
<b>Global Financing</b>						
<p>Support development of the "Global Programme" with analytical support for a possible "buffer/stability" fund:</p> <ul style="list-style-type: none"> <li>▪ Determine demand for and potential uses of a "buffer/stability" fund for RH commodities.</li> <li>▪ Identify shortcomings in existing global financing mechanisms</li> </ul>	SSWG, A. Bornbusch		2006			

Current and Potential Activities	Responsibility Within WG	Responsibility Outside WG	Timing	Funding Source	Estimated Cost	Deliverable
<p>for RH commodities.</p> <ul style="list-style-type: none"> <li>▪ Compile good/promising practices in existing global/regional financing mechanisms for health commodities.</li> <li>▪ Based on (a-c) provide technical design options for a “buffer/stability” fund.</li> </ul>						
<b>Countries-at Risk</b>						
<p>Continue Countries-at-Risk Group (CAR) to monitor and address country emergency supply needs.</p> <ul style="list-style-type: none"> <li>▪ Convene monthly conference calls of CAR members.</li> <li>▪ Develop metrics to monitor CAR.</li> <li>▪ Report twice-yearly to RHSC on CAR activities, results, and assessment of effectiveness.</li> </ul>	<p>UNFPA, J. Abraham</p> <p>CAR, J. Abraham</p> <p>SSWG, A. Bornbusch</p>		<p>2006-08</p> <p>2006-08</p> <p>2006</p> <p>2006-08</p>			
<b>Country Supply Chains</b>						
<p>Document best practices and identify emerging issues in country supply chain management – e.g., supply chain efficiencies, information and communication technologies, quality assurance, coverage of underserved areas, impact of product/brand proliferation.</p> <p>Advise on replication/scale-up of best practices, and on areas for new research/innovation.</p> <p>Advise on analytical needs to identify trends in unmet needs and model impact of improvements in supply access on them.</p>	<p>JSI, C. Hart</p> <p>JSI, C. Hart</p> <p>UNFPA, Jagdish Upadhyay</p>		<p>2006</p> <p>2006-08</p> <p>2006 (?)</p>			
Model List of Essential Medicines						



**Annex 3: Proposed organizational structure for the RHSC**



## Annex 4: Internal Organizational Measures

### I. RHSC Operations

#### Functions of the RHSC<sup>7</sup>

1. Comprising representatives of organizations and constituencies with a significant (programmatic and/or financial) stake in RH supply security, the RHSC provides a forum for members: (i) to share information, publications, data, and research findings to advance RHSC strategic priorities; (ii) to constructively raise, discuss, and seek resolution to problems that impede progress toward RH supply security at the country level; and (iii) to formulate a set of strategic priorities and work in concert to achieve them through agreed-upon activities, the implementation of which is member-sponsored through financial, in-kind, and technical commitments.

2. In overseeing the work of the Coalition, the RHSC will endeavor: (i) to be participant driven in its strategy, implementation, and governance; (ii) to be committed to working collaboratively and effectively to use new and existing resources and expertise to resolve supply problems and ensure long-term RH supply; (iii) to foster and strengthen, as appropriate, broader constituency participation in activities designed to secure the strategic objectives of the RHSC; and (iv) to objectively measure the success of the alliance as well as of its specific activities.

#### Membership

3. Composition of the RHSC. RHSC membership is drawn from key sectors engaged in the "total market" for contraceptive and other RH supplies. RHSC membership criteria include: (i) commitment to and financial investment in RH (currently with a contraceptive emphasis) supply security; and (ii) capacity to contribute to the RHSC objectives through relevant skill, experience, or access to resources.

4. Members participate on both a renewable and rotating basis. Rotating members serve two-year terms, but may renew their participation with approval of the full RHSC membership. Current Members include:

##### Low-/Middle-Income Country Governments<sup>8</sup>

- Africa region
- Asia region (two members)
- Eastern Europe and Central Asia
- Latin America and Caribbean region

##### Multilateral Organizations

- United Nations Population Fund (UNFPA)
- World Health Organization (WHO)/Essential Drugs Management Unit
- The World Bank

##### Donors

- European Commission
- Germany/BMZ/KfW Development Bank
- Netherlands/Ministry of Foreign Affairs
- United Kingdom/Department for International Development (DFID)
- United States/Agency for International Development (USAID)

##### Private Donors

- Bill & Melinda Gates Foundation
- United Nations Foundation

---

<sup>7</sup> As needed and as resources allow, the RHSC may undertake to host a broader RH supplies community forum. The forum would be an open participation assembly. The forum would serve to:

- Identify problems and new challenges in attaining RH supply security.
- Serve as a mechanism for exchanging experiences and best practices.
- Consolidate and increase community members' commitment to the objectives of the RHSC.
- Identify and create opportunities for advocacy, communications activities, and social mobilization.
- Advance the RHSC strategic plan.

<sup>8</sup> Two-year term.

- A private foundation representing other foundations with interest in RH supply security<sup>9</sup>
- Nongovernmental Organizations
- International Planned Parenthood Federation (IPPF)
  - Partners in Population and Development (PPD)
  - An NGO from a low/middle-income country<sup>10</sup>
  - Supply Initiative (SI)<sup>11</sup>
- Social Marketing Organizations (SMOs)<sup>12</sup>
- An SMO from a low-/middle-income country
  - An SMO with international reach

5. Member selection and tenure. The Executive Committee recommends for RHSC approval, new members to replace those rotating out of the RHSC. The developing-country members will include representation of a range of economic levels and a range of levels of RH self-sufficiency. In addition, the Executive Committee may recommend for RHSC approval, adjustments in membership as circumstances and priorities dictate. Current RHSC members may recommend new members to the Executive Committee.

6. RHSC visiting participants. RHSC members may recommend representatives of developing countries, donors (private and governmental), technical organizations, NGOs, or other institutions such as commercial manufacturers or distributors, to participate in RHSC meetings on a temporary basis. Visiting participants bring needed expertise to discussions and may advance specific issues or agenda items. Temporary participation of these experts may be limited to one meeting or may extend over several meetings depending on their contribution and RHSC needs.

7. RHSC members forward names, expertise, and anticipated length of participation of recommended visiting participants, or refer interested organizations to an Executive Committee member or to the Secretariat. Names of visiting participants must be submitted no later than 20 days prior to the next meeting. Suggestions received after that deadline will not be considered. The Chair will make decisions within ten days of receiving a suggestion. Recommending RHSC members will support visiting participants as needed and appropriate. The Chair may also invite visiting participants independently.

### **RHSC Chair**

8. Chair tenure and selection. The Chair serves a two-year term that is staggered with the Executive Committee terms; the Chair has a one-time option to renew for another two-year term, with approval of the RHSC. One of the RHSC meetings shall be organized to coincide with the expiry of the Chair's term.

9. Before the term of the Chair is to expire, the Secretariat will invite members to nominate a new Chair. The Secretariat will follow up with nominated candidates. Nominees must: (i) be a member of the RHSC; (ii) be willing to fulfill the commitments of the Chair, including its representative role; and (iii) devote time and effort to enhance the Coalition; and (iv) have good oral and written communication skills, including fluency in English.

10. In the event of more than one candidate, the Secretariat will announce a vote to select a Chair on the basis of one vote for each RHSC member institution. The vote will be conducted by secret ballot and will take place at one of the semiannual RHSC meetings. RHSC members unavoidably unable to attend may notify the Chair of their vote in writing or through a proxy. The vote must be received in advance of the election. The Secretariat will oversee the voting process, provide facilitation as necessary, and advise the RHSC members of the outcome of the selection.

11. The incoming Chair-elect selected at an RHSC meeting overlaps and works with the existing Chair (who fully completes his/her term) before assuming full responsibilities (approximately six months).

12. Functions of the RHSC Chair. The Chair carries out the following responsibilities: (i) convenes and chairs the full RHSC meeting as well as the Executive Committee meetings; (ii) invites new members, upon recom-

---

<sup>9</sup> Two-year term.

<sup>10</sup> Two-year term.

<sup>11</sup> Contingent membership of the SI will be reviewed according to the initiative's future scope.

<sup>12</sup> Two-year term.

mentation of the Executive Committee, and visiting participants to attend meetings; (iii) prior to the meetings, identifies and secures meeting space, with assistance from the Secretariat, and oversees preparation and distribution of summaries of progress on RHSC activities; (iv) during meetings, encourages frank discussion and brings the group to consensus-based, action-oriented decisions; and (v) signs off on full RHSC meeting reports.

13. As deemed necessary by the Executive Committee, the Chair will issue press releases on behalf of the RHSC. The Chair will also conduct a brief orientation with the new chair (for the following meeting), especially for any follow-up actions to be taken.

### **Organization of RHSC Meetings**

14. Frequency and attendance. Meetings are scheduled to occur twice yearly. Members will identify at least one consistent representative to attend RHSC meetings, come to meetings fully briefed and prepared to speak on all agenda topics, and participate in phone conferences as needed. Members will also support the costs of the organization's participation in the RHSC. Developing-country members may request assistance from the Secretariat to help defray the costs of their participation in RHSC meetings.

15. Preparation of the meeting agenda and accompanying documentation. The agenda and documentation for the RHSC meetings will be prepared in accordance with the following steps:

- The Secretariat solicits agenda topics from the RHSC membership eight weeks prior to the meeting, requesting a ten-day response time. With guidance from the Executive Committee, the Secretariat prepares a provisional agenda that is submitted to the RHSC membership for comment no later than five weeks prior to the meeting, with a five-day response time. The Secretariat sends the revised agenda to the Executive Committee for approval three weeks prior to the meeting requesting a five-day response time. The final agenda is sent to the RHSC membership ten days prior to the meeting.
- The Secretariat, working with members submitting agenda items, prepares a concise summary highlighting issues (one-page maximum), their implications (including resource implications where appropriate), and recommends action(s) required of the RHSC. The Secretariat and members also recommend and provide additional relevant background material as necessary.
- RHSC members submit all presentation materials to the Secretariat no later than ten days prior to the meeting.

Documents for each meeting also include an update on RHSC activities and action plans. The Secretariat provides this as part of the pre-meeting packet so as to focus meeting time on issues for discussion rather than debriefing on informational issues.

16. Conduct of the meetings. The Chair oversees RHSC meetings assisted by other Coalition members or an expert facilitator, if needed. At the end of each agenda point, the facilitator provides a short summary of the discussion and of the decisions reached in order to gather clarification and recheck consensus among participants. The Secretariat documents meetings in the form of meeting minutes and action plans.

17. Follow-up of the results of the meetings. RHSC decisions are made on a consensus basis by a group consisting of one lead individual representing each member organization. Decisions by the RHSC are not considered binding upon member organizations and will not override their respective governing bodies.

## **II. Executive Committee Operations<sup>13</sup>**

### **Functions of the Executive Committee**

18. The RHSC has an Executive Committee to provide broad guidance, oversight, and approval functions to support its operations and enhance decision-making.

---

<sup>13</sup> The Steering Committee was added to the RHSC in late 2004. In 2005 it was renamed the Executive Committee. After 12 months of operation (April 2006), the Executive Committee members facilitated by the Secretariat, will review the Executive Committee's role, functions, composition, and tenure, and recommend changes, as necessary, to the full RHSC.

19. Planning and budgeting. The Executive Committee: (i) guides and approves overall direction of the RHSC's strategic planning, work planning, and budgeting processes; (ii) provides programmatic oversight to RHSC fundraising activities as appropriate; (iii) approves comprehensive work plans and the communication strategy (both internal and external, including website); (iv) reviews the Secretariat's budget<sup>14</sup> and sustainability strategy, and (v) facilitates RHSC fundraising activities by serving as a clearinghouse to ensure fundraising by different working groups is not at cross purposes.

20. Monitoring and evaluation. The Executive Committee: (i) approves monitoring and evaluation plans, (ii) provides periodic priority review of RHSC progress against goals and objectives, and (iii) makes recommendations to the Secretariat.

21. Preparation, conduct, and follow-up of RHSC meetings. The Executive Committee: (i) provides guidance to the Chair and Secretariat on preparation of full RHSC meetings and provides final agenda approval; (ii) attends and actively participates in full RHSC meetings, and (iii) acts as a check-in point on how implementation of working group action plans are accomplishing the RHSC mission.

22. Governance. The Executive Committee: (i) assists in identifying new members; (ii) approves membership recommendations; and (iii) provides oversight to help ensure transparency and avoid/resolve conflict of interest.

## **Membership**

23. Executive Committee Chair. The RHSC Chair serves as chair of the Executive Committee.

24. Composition of the Executive Committee. Membership will consist of both renewable and rotating members. Renewable members are: UNFPA, USAID, IPPF, World Bank, and the EC. One rotating member will serve a two-year term with options for consecutive terms by approval of the Executive Committee from each of the following groups: (i) civil society (such as organizations that represent an independent voice and that may have a watchdog function), (ii) foundations, and (iii) low-/middle-income governments.

25. Member selection and tenure. A determination will need to be made on when this new composition of the Executive Committee will become effective, as it involves some current Steering Committee members relinquishing their seats (i.e., at the October 2005 meeting).

## **Organization of Executive Committee Meetings**

26. Frequency and attendance. The Committee meets four times a year to review RHSC progress and address emerging issues and in the interim as needed. Members' time and travel costs for participation in meetings are assumed by their institutions.<sup>15</sup> For members unable to attend meetings but who want to participate, the Secretariat will identify "virtual" participation options.

27. Preparation of the meeting agenda and accompanying documentation. The Secretariat prepares meeting agendas and background documents in consultation with the RHSC Chair and Executive Committee members.

28. Conduct of the meetings. The Committee makes decisions by consensus. Two-thirds of full Executive Committee membership is considered a quorum for meetings. The Secretariat prepares minutes of meetings and documentation of decisions, distributes them to the broader RHSC, and follows up of the results of the meetings.

## **V. Secretariat Operations**

### **Functions of the Secretariat**

29. The RHSC Secretariat: (i) coordinates, monitors, and facilitates all RHSC components, including the Chair, Executive Committee, and working groups and (ii) provides institutional continuity in the following areas:

---

<sup>14</sup> Budget review will need to be undertaken in concert with the institution hosting the Secretariat and the funders supporting the Secretariat.

<sup>15</sup> In the case of developing-country members, support to defray costs of participation may be available through the Secretariat.

30. Planning and budgeting. The Secretariat: (i) monitors the external environment and makes recommendations to the Executive Committee on RHSC direction; (ii) develops, in collaboration with the working group leaders, for Executive Committee approval, RHSC strategy (including milestones, indicators, etc.) and the comprehensive three-year work plan (Secretariat and working groups); (iii) develops for Executive Committee approval the RHSC internal and external communications plan and funding strategy for transition and sustainability of the Secretariat; (iv) finalizes and disseminates the RHSC strategy; and (v) develops the Secretariat budget for approval by the Executive Committee.

31. Monitoring and evaluation. The Secretariat: (i) develops, in collaboration with the working group leaders, for Executive Committee approval, the monitoring and evaluation plan; (ii) regularly monitors progress against strategic priorities and reports to the Executive Committee; (iii) prepares and disseminates (on behalf of the Executive Committee) to the full RHSC membership a semiannual summary of progress against the RHSC strategy plan; and (iv) in collaboration with RHSC members and based on the evaluation approach, documents successes arising from the RHSC.

32. Preparation, conduct, and follow-up of RHSC meetings. The Secretariat: (i) works with the Chair and Executive Committee to manage all aspects of RHSC meetings, including identification of issues, agenda preparation, and finalizing meeting dates and locations; prepares correspondence with members; retains the meeting facilitator; drafts and disseminates reports of meetings and teleconferences and a brief written progress report on past RHSC decisions for each meeting; and (ii) documents and reports Executive Committee meeting outcomes, recommendations, and decisions to the full RHSC.

33. Support to the working groups. The Secretariat assists and supports the working groups, as appropriate, in developing and implementing their action plans.

34. Representation. The Secretariat: (i) communicates priorities and progress of the RHSC within the larger RH community; (ii) represents the RHSC at relevant international and national forums and with various partners, including the commercial sector; and (iii) manages the RHSC website, if one is created.

35. Administration. The Secretariat: (i) provides overall cohesion to the RHSC and helps ensure the attainment of Coalition priorities, (ii) facilitates internal communications among RHSC members, (iii) facilitates the new member nomination process, and (iv) maintains RHSC archival files.

### **Organization of the Secretariat**

36. Staffing. The Secretariat is led by a full-time Director and is staffed by program and support staff. The selection of the Director is subject to approval of the Executive Committee. The Director is responsible for the performance of the Secretariat and supervision of its staff.

37. Financing. It is anticipated that RHSC Secretariat operations will be financially underwritten on an interim basis (approximately 2006–2008) by grant funding. After this transition period, and assuming the RHSC is deemed by members as a useful mechanism for advancing RH supply security and beneficial to their work, Secretariat financial support will be provided through an RHSC member-approved funding mechanism based upon recommendations and options presented by the Director and Secretariat. (This may consist of member dues, grant funding, in-kind contributions, or a combination of these and other revenue streams.)

## **VI. Working Group Operations**

### **Functions of the Working Groups**

38. The working groups advise on critical directions and priorities and serve as the implementation and technical arms of the RHSC strategy; as such, they plan, coordinate, implement, and monitor actions, which build on the mandates, interests, resources, and comparative strengths of members, and represent core partnership activities. They will: (i) identify activities in support of the RHSC mission and goals and assign roles and responsibilities within the working group, (ii) coordinate with other working groups to ensure synergy of activities, and (iii) develop basic monitoring and evaluation plans and assume accountability for outcomes.

## **Organization of the Working Groups**

39. Creation and dissolution. Any member of the Coalition, the Executive Committee, or the Secretariat can recommend the establishment of a working group. Recommendations are subject to Executive Committee approval and must be accompanied by a clear articulation of need for the group, technical objectives, and proposed linkages with other working groups' activities. The Executive Committee has the responsibility of determining when/if a working group should be initiated, restructured, or dissolved. Facilitated by the Secretariat, the Executive Committee will carry out an annual review of all working groups, including their progress and continued need. However, working groups are limited to the term of the RHSC strategy with an automatic sun-setting clause, subject to review of relevance and efficacy for the next strategy.

40. Currently the RHSC has three working groups: (i) Resource Mobilization and Awareness, (ii) Systems Strengthening, and (iii) Market Development Approaches.

41. The RHSC Chair, Executive Committee, or working groups may also convene task forces for ad hoc tasks or activities that do not require direct and continuous RHSC engagement. Participation in task forces is voluntary and the task force is accountable to the convener.

42. Membership. Membership in working groups is open to all RHSC members, based on their institutional mandates and interests. RHSC member institutions may serve on multiple working groups.

43. Organization of the work of the working groups. The working groups will: (i) meet as needed and make decisions by consensus and (ii) recommend, as appropriate for specific topics, that external experts be invited to participate in deliberations and provide guidance. Among its members, the working group will identify a leader who will: (i) convene the working group as needed or agreed and (ii) serve as the focal point and informal secretariat of the group, preparing meeting agendas and minutes and documenting decisions.

44. The working group leader is responsible for: (i) facilitating the development of a working group work plan to be submitted via the Secretariat to the Executive Committee for review and approval; (ii) identifying the roles and responsibilities of members and ensuring that activities are implemented and regular communication maintained with working group members; (iii) gathering monitoring and evaluation data; and (iv) providing written progress updates (at least twice annually) to the Executive Committee and the full RHSC via the Secretariat on progress, constraints, and assistance required.

45. Activities are supported by either participating working group organizations or through funds raised by the working group. The Secretariat may allocate modest financial support to working group leaders to cover expenses, as needed.