

A Strategic Vision for IANPHI

2017-2022

IANPHI Secretariat

July, 2017

1. Background

IANPHI was formally chartered as a membership organization for the directors of national public health institutes (NPHIs) in 2006, during its first annual meeting in Rio de Janeiro, Brazil. During this meeting, founding members drafted and approved a constitution and elected IANPHI's first Executive Board (EB) and its founding President and Vice-President. An operational structure that included a main Secretariat office at the Finnish National Institute of Health and Welfare and a sub-office at Emory University's Global Health Institute was developed. Organizational objectives — including developing policy and advocacy on the importance of NPHIs, fostering NPHI development (particularly in low-resource countries), and developing a robust network of NPHI directors - were agreed to. From these objectives, a five-year strategic plan was developed by the EB in 2006 and revised in 2011. A member survey and planning discussions that took place in Tanzania in 2012 informed the 2013 strategic plan that included the transition of the Secretariat to the National Institute of Public Health of Mexico. This plan was further revised when the Secretariat moved to Public Health France in 2016.

In 2016, coinciding with IANPHI's 10th anniversary, the IANPHI Secretariat proposed to assess IANPHI's past progress and to conduct stakeholder interviews and a strategic visioning session to inform its future planning. Led by volunteer experts from the Norwegian National Institute of Public Health, in partnership with IANPHI's President, Secretary General, Paris Secretariat Director and U.S. Office Director, a one-year timeline for reviewing and revising IANPHI's strategic objectives and work plan was developed including:

- A member survey (August-September, 2016)
- A comprehensive stakeholder assessment (August September, 2016)
- A strategic visioning session during the IANPHI annual meeting for the IANPHI EB and key invitees, including representatives from partnership organizations such as WHO (October, 2016)
- Follow-up administrative and planning meetings between the Paris Secretariat and the U.S.
 Office in Atlanta and the development of a draft list of proposed activities (February, 2017)
- Summary of strategic visioning meeting results and draft activities presented to the Executive Board (March 2017 teleconference)
- Draft strategic outline and activities finalized by the IANPHI Secretariat (July 2017) and shared with and revised by the IANPHI President and Vice President (August 2017)
- o Draft strategic outline and activities to be presented to the IANPHI EB (September 2017)
- EB revision and approval of the EB of the final strategic outline and activities; presentation to and discussion with the general membership during the 2017 Annual Meeting (October 2017)

The IANPHI Secretariat would like to share our profound thanks to the Norwegian NPHI team (Anne Bergh, Therese Øgaard, and Bjorn Iverson) for contributing their expertise to this effort. Their leadership and generosity is highly appreciated.

2. Key findings: stakeholder assessment and survey conducted by the Norwegian NPHI

A survey of members was conducted and qualitative interviews were held by telephone with key informants, including IANPHI members, donors, partners and other stakeholders. The Norwegian NPHI team compiled and assessed results from the member survey and key informant interviews and presented these during the October 17 meeting as follows:

IANPHI's major strength is the uniqueness and of the network:

- Meaningful relationships: people get to know each other: that is the essence of the meetings
- Growing number of member institutes and their diversity
- o Informality of the network it is less political than other multi-national public health organizations
- Equitability/fairness: IANPHI is a platform where institutes meet on equal terms, all leaders are on the same level and everyone profits from collaboration

Stakeholders recommended the following areas of focus:

Strengthening internal linkages within the IANPHI network:

- There are huge resources and competencies within the IANPHI membership; bringing them together to help and share with each other has the greatest potential for IANPHI
- o IANPHI should use the combined intelligence of IANPHI members to address major common issues and could consider creating interest groups around particular topics.

Strengthening members through capacity building

- o IANPHI should encourage members to identify joint areas of interest and provide an independent, non-political platform for collaboration between NPHIS
- Capacity-building at NPHIs is a key element of IANPHI's success, its twinning work (between NPHIs) should be a model, whether long-term or short term (e.g. mentoring)

Strengthening sustainability

- There should be more focus on advocacy, communication and partnership within and between the membership and with external stakeholders
- o IANPHI should explore supporting groups of NPHIs for cross-cutting technical or policy issues
- The legal framework of the IANPHI Secretariat, Foundation and U.S. Office is not well understood and should be explained and perhaps revisited for maximum effectiveness

3. Key findings, High-level strategic planning meeting: Shanghai, October 17, 2016

The meeting included 18 high-level experts from 12 countries representing IANPHI's members and key stakeholders

Participants:

Mauricio Hernandez-Avila, IANPHI President
Jean-Claude Desenclos, IANPHI Secretary General
Mwele-Malecela, IANPHI Vice President
Pekka Puska, IANPHI Foundation, Chair, and immediate past –IANPHI president, Finland
Camilla Stoltenberg, Norwegian Institute of Public Health
Siddika Mithani, Public Health Agency of Canada (PHAC)
Reinhard Burger, Robert Koch Institute, Germany
Martha Lucía Ospina Martínez, National Institute of Health, Colombia
Naima El Madaghri, Pasteur Institute of Morocco
Tsogtbaatar Byambaa, Public Health Institute of Mongolia
Mohammed Hassar, former Director Pasteur Institute of Morocco
Oni Idigbe, Nigerian Institute of Medical Research
Jeff Koplan, IANPHI co-founder and past – IANPHI president, USA
Rudiger Krech, World Health Organization (WHO), Switzerland

The Norwegian Institute of Public Health team included Bjorn Iversen, Anne Bergh (who facilitated the meeting) and Therese Øgaard (who captured and compiled comments). Participants from the Secretariat included Courtenay Dusenbury (Director, U.S. Office), Anne-Catherine Viso (Director, Secretariat Main Office) and Tek-Ang Lim (Secretariat Main Office).

Following a presentation and discussion of the Key Findings noted on page 3, a SWOT (strengths, weaknesses, opportunities and threats) analysis was conducted to inform strategic priority-setting. Several strong and common themes for strategic priorities emerged from this discussion including:

A. Support and strengthen each other

IANPHI's uniqueness is recognized and appreciated. It is a global network of agencies linked to government but aiming for scientific/technical independence to inform policy. The shared vision of IANPHI is strong: we want to help each other and to support low and middle-income countries in developing and strengthening NPHIs. IANPHI has a clear mission and strong technical expertise; we take a long-term perspective (vs short term for policy makers) and contribute to decision-making by providing evidence-based knowledge.

IANPHI's network is diverse but we share common goals and values; there is mutual respect and trust among members and the ability to share similar issues and experiences. Despite the variation in our members there is a strong synergy, especially around the issues of development and testing of tools and best practices and other activities that allow us to known NPHIs in depth (e.g. evaluations). We have had successful achievements in many countries, working together, and volunteerism is at the heart of our organization.

IANPHI should foster and collaborations and advocacy on specific issues across the membership. IANPHI members could choose topics for joint engagement (AMR, climate change, etc.) and working groups, annual meeting sessions and/or case studies could be developed on these topics. To be relevant,

IANPHI should always ensure its activities are linked to international initiatives (sustainable development goals, etc.).

We should use our existing tools and develop new ones. IANPHI tools that build capacity should be regularly used and discussed. More efforts should be made to support members' capacity building (expert exchange, internships, etc.)

The network is strong and there are many opportunities to improve perceptions about the value it adds to members including strengthening brand identity, informing members about added value through various channels including the annual meeting. However, communication, both internal and external, can be improved. The Secretariat and EB receive limited feedback from members, who do not always respond to surveys or other requests for information.

B. Build resources and sustainability through partnership and advocacy

Resources to support IANPHI remain the major issue. The U.S. Office is 100% supported by grant funds, which may not be sustainable. If U.S. - based grants do not contribute to the annual meeting costs and to supporting the communications team, the current level of dues paid is not sufficient to meet Secretariat costs (staff and the annual meeting) over the long term. IANPHI should focus on developing new partnerships and advocacy strategies that raise funds and raise IANPHI's profile. IANPHI could be more visible with non-U.S. donors and international organizations. IANPHI's donors and partners recognize our effective and efficient delivery of services; new opportunities should be sought to be a key player with new initiatives on the international level. Because of the status of NPHIs within or working under the ministries of health, which often represent national interests in international fora, IANPHI is not always at the table when heads of state or ministers discuss global health issues. Advocacy and partnerships can help to strengthen our organization's position and reputation.

C. Develop and implement policies related to governance, membership, dues and other issues

Over the long term, the current level of dues collected will not be enough to support the organization (main office, annual meeting, and membership activities). Not all members pay dues. Many NPHIs operate in a challenging financial environment (budget cuts, staff reductions, etc.), which can potentially impact future contributions. Anti-globalism and border issues may reduce the amount of funds available to NPHIs from their governments for partnership work. There is a risk of losing members if they do not perceive that IANPHI adds value. The turnover of directors requires the development of strong institutional relationships that go beyond the director. There is also a need to build strong relationships with new directors and members to ensure their participation and to identify and understand their expectations.

Issues about the IANPHI Secretariat and Office's legal status, and their relationship vis-à-vis the IANPHI EB, the IANPHI Foundation and the IANPHI Foundation EB, are not always easily understood, may hamper efficiency and should be resolved. A consultant should be hired to prepare options for the optimal legal and organizational structure and functioning of IANPHI as a whole.

4. Secretariat Action and Strategic Plan Development

Following the compilation of feedback and comments from the member survey, stakeholder interviews and October 17 discussion, the Secretariat met in Atlanta, USA to develop a strategic outline with

supportive activities. From the three major areas identified by stakeholders, specific strategies and activities were developed as follows:

OVERVIEW OF KEY GOALS, STRATEGIES AND INITIATIVES

Focus area/Goal	Strategy	Initiatives
A. Support and strengthen each other	Strategy 1.1: Institutionalize the IANPHI Framework, tools and leading practices into all aspects of the organization; measure and assess impact and value	Initiative 1.1.1: Expand the use of tools, engaging members in activities (Atlanta for projects, Paris for EU) Initiative 1.1.2: Promote IANPHI's tools within the Association and with others
	Strategy 1.2: Seek opportunities to provide technical assistance, training, and other services to members	Initiative 1:2.1 Use a range of approaches to ensure that NPHIs receive needed technical assistance Initiative 1.2.2: support NPHIs in their efforts to advocate for the importance of NPHIs
	Strategy 1.3: Strengthen and enhance the internal network	Initiative 1:3.1 Ensure the annual meeting strengthens the network and its work
		Initiative 1.3.2: Encourage and support member-led working or policy groups on key topics of interest
		Initiative 1.3.3: Strengthen internal communications to enhance relationships with and among IANPHI members
2: Increase external advocacy, partnership and fundraising	Strategy 2.1: Execute comprehensive communications strategy	Initiative 2.1.1: Develop and expand communications messaging, products and pathways
	Strategy 2.2: Increase resources to support priority activities of the IANPHI network and its members	Initiative 2.2.1: Increase sustainability through U.S. Office partnership and fundraising strategy
		Initiative 2.2.2: Increase sustainability through Main Office partnership and fundraising strategy
3: Promote efficient and	Strategy 3.1: Resolve pending governance and policy issues:	Initiative 3.1.1: Resolve governance issues:
effective governance and policies to ensure member satisfaction and sustainability of IANPHI		Initiative 3.1.2: Resolve policy issues:

Strategic Outline with activities 2017-2020

Goal 1: Support and strengthen each other: add value to the IANPHI network and member NPHIs through high-quality resources and activities

Strategy 1.1: Institutionalize the use of the IANPHI Framework, tools and leading practices into all aspects of the organization; assess impact and value

IANPHI tools, developed by the membership, are unique to national public health institutes. These tools help members to define the functions of an NPHI, assess current capacity and plan for the future, benchmark against others and advocate for additional resources.

<u>Initiative 1:.1.1 Expand the use of tools, engaging members in activities</u>

Link tools to annual meeting sessions; disseminate leading practices and get feedback

- Update and revise the Framework and the Core Attributes (2019)
- Continue to develop and test the Best Practices series
- Use the SDT widely, including in middle- and high-income countries: train and engage member NPHIs as facilitators
- o Finalize new tools and refine existing ones, engaging members
- o Coordinate up to three peer-to-peer evaluations per year

<u>Initiative 1.1.2: Promote IANPHI's tools within the Association and with others</u>

Facilitate other public health systems-strengthening groups to use IANPHI tools

Demonstrate and report on the tools' impact (including case studies)

Use the tools for branding, marketing, and network-strengthening efforts

o In collaboration with Africa CDC, adapt the peer-to-peer tool for use in Africa

Strategy 1.2: Seek opportunities to provide technical assistance, training, and other services to and between members

IANPHI members can support and link with each other to solve common problems, to provide technical advice and to benchmark and partner on capacity-building projects. The network's potential is huge to help members develop common areas of interest. All NPHIs need strategies for advocating on the importance of public health, and NPHIs, to government, the public, donors and other stakeholders. IANPHI can provide information on tactics and tools for advocacy.

Initiative 1:2.1 Assist member NPHIs in linking or identifying sources for technical assistance

 Help make linkages between NPHIs and organizations (NPHIs and others) that can provide support and assistance routinely and during emergencies

Identify members' priority training needs (e.g., leadership, financial, grant writing/fundraising, communications) and target audiences (e.g., executive team, emerging leaders), and link them with other NPHIs that can provide priority training via webinars or in-person

- o Support peer-to-peer and South-South linkages between IANPHI members to obtain external funding for priority activities
- Help NPHIs conduct stakeholder mapping and engage with donors in country as part of peer-to-peer and SDT assessments

Initiative 1.2.2: Support NPHIs in their efforts to advocate for the importance of NPHIs

Provide advice to NPHIs in demonstrating their value and advocating for resources

- Help members to be able to measure and communicate impact:
 - Use the SDT for benchmarking or to measure progress toward advanced or leading edge stages
- Provide case studies, best practices and materials that can be used by NPHIs to advocate
- Provide training on communication and advocacy during annual meeting
- Create fully functional websites for NPHIs as part of U.S.-based project work, when feasible

Strategy 1.3: Strengthen and enhance the internal network

The annual meeting, working groups and regional efforts are important ways to strengthen peer-to-peer learning through the unique platform of IANPHI. Members can work together to solve problems of mutual of interest, to learn about innovative solutions and to strengthen their position through regional collaborations.

Initiative 1:3.1 Ensure the annual meeting strengthens the network and its work

- o Link to specific IANPHI tools and best practices for many of the sessions
- Invite rising leaders if feasible and essential partners?
- o Review options for making meeting more cost-effective

Initiative 1.3.2: Encourage and support member-led working or policy groups on key topics of interest

Topics brought forth during the planning session included how to develop partnerships with other sectors, disease-specific efforts, IHR, global health security and others.

 Define new ways of supporting directors and their leadership team (IANPHI support teams, mentoring, advising), in particular with regards to planning and positioning the NPHI in time of creation, merger or transition.

Initiative 1.3.3: Encourage and promote the success of regional networks

 $\label{lem:communication} \mbox{Develop strong working relationships and communication with IANPHI Secretariat}$

Exchange information with regional networks to help them identify resources

 Promote regional success stories on IANPHI website and elsewhere to show the value of the network

Assist the IANPHI-Africa network in work with the Africa CDC, including capacity assessment Support network interaction as feasible (e.g. teleconferences, list-serves, etc.)

<u>Initiative 1.3.4 Strengthen internal communications to enhance relationships with and among IANPHI</u> members

- Use varied approaches to acknowledge and honor members
- o Maintain open-ended and more regular and substantive communication with members

Annual report that shows roles/responsibilities and added value derived from IANPHI membership Implement a buddy system for new members during the annual meeting

Encourage and facilitate NPHI directors to promote IANPHI within their organizations

Engage sub-director levels as feasible

Goal 2: Increase external advocacy, partnership and fundraising activities to build and sustain IANPHI

Strategy 2.1: Execute comprehensive communications strategy that brands IANPHI as unique and the preeminent, 'go-to' organization for NPHI development and global public health strengthening

Initiative 2.1.1: Develop and expand communications messaging, products and pathways

- o Identify and engage with key influencers
- o Increase awareness and understanding of the terms "NPHI" and "IANPHI"
- o Foster and increase understanding that IANPHI's work is based on an international standard
- Stake out more ground and engagement on the issue of data to action/health systems strengthening
- Publish/report on key accomplishments of NPHIs and the network (peer-reviewed publications, letters to the editor, popular media, NPR)
- o Demonstrate value and impact through communications efforts (e.g., videos, stories, statistics, Wikipedia, social media); update and revise IANPHI-branded publications
- o Participate or support members to participate in global meetings of other organizations as representatives of and advocates for IANPHI and NPHIs (Paris and Atlanta)
- o Identify other groups that focus on public health systems strengthening and promote IANPHI through their policy dialogues and networks; Participate in global or regional policy discussions (e.g., at WHO) to increase credibility of and recognition for the network

Strategy 2.2: Increase resources to support priority activities of the IANPHI network and its members

Sustainability remains a serious issue for IANPHI that will require careful deliberation and planning. Fundraising and partnership in the U.S., Europe and elsewhere is crucial to augment resources raised by member dues.

Initiative 2.2.1: Increase sustainability through U.S. Office partnership and fundraising strategy

- o Implement U.S. strategy with focus on large multi-year grants: Gates, Bloomberg, etc.
- Explore opportunities for engagement with Africa CDC/regional centers/national NPHI development

Second five-year grant from US congress to CDC/IANPHI for NPHI work

- Explore the possibility of branding IANPHI as a consulting group with services offered for payment to intergovernmental organizations and donors
- Conduct NPHI peer-to-peer evaluations and stakeholder mapping on a fee-for-service basis
- Ensure that IANPHI receives some resources when providing technical assistance for high-resource member projects (funded by bilaterals)
- o Identify ways in which CHAMPS can support IANPHI priorities
- o Better link the U.S. Office efforts to the IANPHI Foundation

Initiative 2.2.2: Increase sustainability through Main Office partnership and fundraising strategy

Survey members about their needs and develop ideas for consultancies

 Develop and strengthen relationships with WHO, WHO Europe: active participation in the coalition of partners for public health services strengthening in particular for countries facing public health or health systems reforms.

- Develop and strengthen relationship with the European Commission to represent the views of IANPHI for large health initiatives (e.g. European Health Information System) to support countries and their NPHIs.
- Develop partnerships with WAHO and link IANPHI efforts in West Africa with efforts led by the U.S. Office, the Africa CDC and its regional centers, and RIPOST.
- o Coordinate 3 peer-to –peer evaluations through RIPOST (2 in 2018, 1 in 2019)
- Develop relationship with ECDC
- Facilitate the participation of IANPHI in EUPHA conference and other major public health fora in Europe.

Goal 3: Promote efficient and effective governance and policies to ensure member satisfaction and sustainability of IANPHI

Strategy 3.1: Resolve pending governance and policy issues:

Initiative 3.1.1: Resolve governance issues:

- Prepare terms of reference for a consultant to develop 2-3 models for the IANPHI (secretariat, network and foundation) legal status and organizational operations (2017- to be considered by the EB Spring 2018)
- Decision made by the EB (October 2018)
- Resolve IANPHI Foundation issues: consider increasing the Foundation representative work time
 to monitor expenses and revenues from projects; give the Main Office team the ability to see
 the figures from the IANPHI Foundation account.
- Update the responsibilities of the IANPHI offices, the Foundation and the Host of the annual meeting in accordance with the budget available. Main Office should focus on core activities: dues collection, new members, EB support and General Assembly. US Office should focus on communication, advocacy and fundraising from US –based donors in particular.
- Develop strategies to increase engagement and efforts of the EB and President and support the EB and its leadership to deliver on action items in a timely way.

Initiative 3.1.2: Resolve policy issues:

Clarify the definition of an NPHI; limit membership to and increase membership of NPHIs that meet the definition

- Develop policy on public-private partnership for IANPHI for projects and activities
- Develop a new policy on member dues/payment
- Review and revitalize current partnerships, including WHO MOU, WFPHA, IARC, others

Define criteria for and roles of an IANPHI partner and develop mechanism/procedure to formalize the partnership relationship