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This ESD workshop in Tanzania was a forum for NGOs and businesses to network and identify new ways to work together.

The Extending Service Delivery (ESD) Project, funded by USAID's Bureau for Global Health, is designed to address unmet need for family planning (FP) and increase the use of reproductive health and family planning (RH/FP) services at the community level, especially among underserved populations, in order to improve health and socioeconomic development. To accomplish its mission, ESD strengthens global learning and application of best practices; increases access to community-level RH/FP services; and improves capacity for supporting and sustaining RH/FP services. ESD works closely with USAID missions to devise tailored strategies that meet the RH/FP service delivery needs of specific countries. A five-year Leader with Associate Cooperative Agreement, ESD is managed by Pathfinder International in partnership with IntraHealth International, Management Sciences for Health, and Meridian Group International, Inc. Additional technical assistance is provided by Adventist Development and Relief Agency International, the Georgetown University Institute for Reproductive Health, and Save the Children.

# Transferring Knowledge and Skills: An Effective Approach for Promoting Public-Private Partnerships in Reproductive Health and Family Planning

This paper describes the promise and limitations of a strategy that uses training workshops to help non-governmental health organizations, governments and businesses to understand public-private sector partnerships in health and to provide them with tools for developing effective collaborations.

## BACKGROUND

The Extending Service Delivery (ESD) Project capitalized on the expertise of one of its partners, Meridian Group International, Inc., which has extensive experience organized training workshops in Latin America and South Asia, to spur new NGO-corporate partnerships in reproductive health and family planning and to build partnership skills among NGOs, businesses and governments.

In 2006, ESD replicated this workshop design in East Africa by partnering with the Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC), a U.S.-based business association that helps its members take action in the workplace against HIV/AIDS and other diseases. GBC has a regional office in Nairobi, Kenya, where it was able to encourage businesses in East Africa to participate in the workshop. With GBC's help, ESD recruited business, NGO, and government participants, mainly from Tanzania and Kenya, but also from Ethiopia, Uganda and Zambia. The three-day training workshop took place in October 2006 in Dar es Salaam, Tanzania, with 65 participants and began with a half-day business symposium where leaders from all sectors described their experiences with public-private partnerships.

## PROBLEM ADDRESSED

Public, private and NGO sectors have difficulty partnering with one another because each sector speaks a different language, operates differently, and tends to distrust each other. Miscommunication and misunderstandings are major barriers that are well-documented. Beyond these issues, a major barrier to realizing the promise of public-private partnerships is that governments and NGOs tend to view private companies as "cash cows." Even when governments and NGOs have overcome their mistrust of business, they still fail to see the full range of opportunities that partnerships offer beyond a new source of funding.

This situation challenges the general consensus that health needs in developing countries can only be met through cooperation, collaboration and partnerships among the sectors. The sectors find it difficult not only to work together, but also to develop partnerships that use each other's resources and strengths effectively.

ESD's training workshop, which applies principles of corporate social responsibility (CSR) is one piece of a strategy to remove these barriers, transfer knowledge and build partnership skills. (For more information on CSR, please read the companion legacy paper: *Integrating*



Participants at a 2006 workshop organized by ESD that brought together NGOs, governments and businesses.

*Family Planning/Reproductive Health in the Private Sector through Health Systems Strengthening in Manufacturing and Agriculture*). Designed to help participants create channels of communication, develop trust, and learn techniques for identifying potential partners and developing sustainable partnerships, the workshop's goal was to build the foundation for new partnerships, with follow-up technical assistance and facilitation from ESD.

## SUMMARY OF INTERVENTION STRATEGIES

### Business Symposium

In a half-day symposium of business, government and NGOs, workshop participants from Tanzania, Ethiopia, Kenya, South Africa and Uganda discussed the wide range of ways the three sectors could better work together on health issues. Speakers emphasized the following points:

- Public-private partnerships and CSR should focus primarily on strategic relationships, and not just on philanthropy or charitable donations.
- CSR is a strategic part of a company's work that meets core organizational interests. NGOs must understand those strategic interests if they want to develop win-win relationships for all partners.
- Companies need NGOs to bring them creative ideas for health projects, as corporations rarely have expertise in health programs.

### Training Workshop

The Business Symposium, which provided an overall context for CSR to participants, was followed by a three-day workshop.

Successful CSR workshops depend on having a diverse group of participants exposed to perspectives from each sector. In Tanzania, ESD was able to recruit a core group of private sector and business participants who could devote several days or more to the workshop. These included Debeers; General Motors East Africa; Unilever Tea Tanzania; Becton, Dickinson and Company; and Lafarge; and private medical and business associations. The other participants represented religious organizations, public health officers, health service delivery groups, foundations and USAID representatives.

The workshop led participants through a series of participatory exercises and skills-development sessions that culminated with the development of action plans for each participant. The technical content of the sessions included:

- Techniques for identifying company interests in health, aligning organizational goals, analyzing strengths and weaknesses, and creating collaborations.
- The idea of CSR as a sustainable approach for accessing multiple resources rather than simple philanthropy.
- An action planning process embedded in the workshop sessions.

## RESULTS

Immediate workshop results showed that:

1. NGO participant attitudes shifted perceptibly from seeing businesses as philanthropists to seeing businesses as partners. Participants began acting on this new understanding through action plans.
2. The workshop was an effective forum for NGOs and businesses to network and identify new ways to work together:
  - Several organizations began developing collaborative plans for addressing mutual needs.
  - Twelve Tanzanian NGOs came together as the Social Investment Coalition (SIC) to promote corporate

partnerships that would address key health issues. Although the SIC held meetings, appointed a chairperson, and developed goals and proposals, it was unable to raise funds for activities and disbanded after a year.

The workshop's longer term results came from partnerships ESD developed directly with workshop participants. ESD formed three partnerships in the region linked to each organization's interests in addressing health needs in reproductive health, family planning and HIV/AIDS. These partnerships leveraged more than \$100,000 in organizational resources and reached hundreds of thousands of people through local outreach, and included:

**1. Unilever Tea Tanzania Ltd (UTTTL):** ESD and UTTTL piloted the Healthy Images of Manhood (HIM)—one of the first workplace “male engagement” programs in the region (see the legacy document: *Healthy Images of Manhood Approach*). This partnership began by training 29 male UTTTL peer health educators in new communication and gender skills focused on persuading men to use health and HIV services and adopt healthier behaviors. ESD also trained the clinical staff in family planning best practices, which can be integrated into HIV/AIDS services. HIM led to increased use of HIV/AIDS services, increased demand for family planning, reduction in stigma, and better worker-supervisor relations at the company. The program's success led UTTTL to initiate scale-up activities to a second group of 52 peer educators, with an aim of ensuring all 175 company peer health educators are trained in HIM. Also, UTTTL's sister company, Unilever Tea Kenya, decided to replicate the male involvement approach in its peer education program.

## **2. The Medical Women Association of Tanzania**

**(MEWATA):** ESD partnered with MEWATA to address safe motherhood in Tanzania through the promotion of Healthy Timing and Spacing of Pregnancy (HTSP). The partnership started as a few educational activities on the importance of women spacing their pregnancies to protect their health and that of their children. The partnership eventually expanded and established MEWATA as the Tanzanian HTSP secretariat, responsible for disseminating research findings on the benefits of HTSP and key messages to health clinics, health officials, and the public. (For more information on the

partnership, please read the companion legacy paper: *Promoting HTSP through Pharmaceutical Partnerships and Professional Associations*).

**3. Global Business Coalition:** ESD partnered with the GBC and other Kenyan organizations to replicate ESD's HIM approach in their workplace health programs, building on ESD's pilot at UTTTL. ESD focused on helping these partners strengthen the impact of their health education activities in companies by incorporating a tested male engagement approach. This included facilitating a Training of Master Trainers workshop for representatives of GBC, Nairobi Women's Hospital, the Kenya Federation of Employers, the Kenya HIV/AIDS Business Council and the National Organization of Peer Educators. More than 26 companies have requested that HIM be incorporated in their workplace. As of June 2010, 138 peer educators have been trained in the HIM approach at 16 companies with 5,000 workers.

“At best, corporate social responsibility is 50 percent effective in Tanzania. CSR in Tanzania is centered around donations – the least effective form of CSR.”

Hemen Shah, CEO, Standard Chartered Bank Tanzania

## **CHALLENGES & LESSONS LEARNED**

The CSR training workshop is an effective approach for generating public-private partnerships in Africa—optimally, if the workshop is followed up with in-country technical assistance and support. Even without the support, the workshop resulted in several important new partnerships, although several partnership opportunities were missed for lack of support.

### **ESD learned these lessons:**

- *Multi-sector workshops on forming partnerships have great potential for creating public-private partnerships.* NGOs, business and government rarely have opportunities to interact in a structured way on how to build partnerships. Clearly, a three-day workshop is not enough to enable NGO and other participants to form immediate partnerships, but can help propel an overall strategy or program of partnership development.
- *The training workshop strategy requires a mechanism*

for follow-up technical assistance and seed funding to achieve long-term impact. An especially strong model for implementing new activities after a workshop was the “Scaling-Up Best Practices” technical meeting ESD organized in Bangkok in 2007 and reconvened in 2010 (see the legacy paper: *Scaling-Up Best Practices to Achieve Millennium Development Goals*). There, country teams developed proposals and competed for grants, while ESD guaranteed all grantees follow-up technical assistance. This model could easily and inexpensively be replicated for CSR-themed workshops in Africa, since USAID has an existing infrastructure of private sector staff and the seed funding costs would be relatively low. However, when ESD tried to make an agreement with a local Tanzanian foundation to provide funding for the participant action plans, long-distance logistics made this unworkable. Specifically, participants needed help with developing their ideas into fundable proposals—a process ESD could not support effectively and the Tanzanian foundation was not committed or ready to support. Had seed funding been available for the SIC, for example, it would have been more likely to have gotten off the ground.

- It is most effective to have workshops focused on “partnerships in health” rather than narrowly tailored to reproductive health and family planning. Many companies are wary of reproductive health and family planning even though they sponsor workplace programs to prevent and treat HIV/AIDS. A broader health focus enabled ESD to speak with companies about reproductive health and family planning and partner with organizations like GBC that might not have otherwise been interested in the workshop.
- A critical mass of participants from each sector is required for success. The workshop was most useful for participants from Kenya and Tanzania, which were well represented. There was less opportunity for networking and post-workshop follow-up for the few participants from Ethiopia, Uganda, and Zambia. Logistically and programmatically, it makes more sense to hold workshops for many participants representing one or, at most, two countries.

As USAID/Washington continues to promote public-private partnerships through the Global Development Alliances, USAID missions should be involved in the promotion through specific directives and technical recommendations, including training workshops.

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This publication was made possible through support provided by the Office of Population and Reproductive Health, Bureau for Global Health, U.S. Agency for International Development, under the terms of Award No. GPO-A-00-05-00027-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the U.S. Agency for International Development.

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