

IBP Consortium & HIP Meeting Report

June 29, 2017

Introduction

The IBP Initiative and HIPs Partnership held their **First Joint IBP Consortium and HIP Partners Meeting**, convening over 90 members from more than 35 [partner organizations](#) for a one-day meeting on June 29, 2017. [The IBP Initiative](#) is a unique international partnership dedicated to scaling up what works in family planning (FP) and other areas of reproductive health. Its more than 45 member organizations include donors, international technical assistance organizations, and regional and national partners. [The HIP Partnership](#) is made up of experts in FP research, program implementation, policy makers and representatives from donor agencies that work together to build consensus around our current understanding of what works in FP. The partnership develops and endorses documentation of high impact practices (HIPs) that can improve FP access, quality, and related health outcomes.

The objective of a joint meeting was to strengthen collaboration and identify opportunities to leverage each platform more effectively to support country programs. Together, partners from both platforms reflected on the meeting theme “**Galvanizing Commitment in Family Planning to Achieve Development Goals**”, focusing on the value of partnerships and strategic engagement to increase commitment to FP as a core component of, and effective investment to meet, broader development goals. Participants shared meeting highlights on twitter using [#IBPInitiative](#), [#HIPs4FP](#), and [#FamilyPlanning](#). The meeting agenda, list of participants and copies of the presentations can be found on the IBP Knowledge Gateway [library](#)¹.



The IBP Secretariat, housed at the [World Health Organization's Department of Reproductive Health and Research \(WHO/RHR\)](#), as well as [USAID](#) and [UNFPA](#), and current IBP Chair, the [Public Health Institute \(PHI\)](#), worked with the HIP Partnership leadership from [USAID](#), [FamilyPlanning2020](#), and [IPPF](#), to plan the meeting, which was moderated by PHI and held at Chemonics International headquarters in Washington D.C. The report below spotlights main discussions and takeaways from the meeting.

The meeting materials and presentations can be found on the IBP [Knowledge Gateway](#).

¹ Meeting documents available at: <https://knowledge-gateway.org/global/ibpmembers/library>

Meeting Summary

Opening remarks were offered by Esther Tahrir on behalf of PHI as Chair as well as IBP Secretariat Lead, Nandita Thatte, USAID Lead for the HIPs Partnership, Shawn Malarcher, and Chemonics International Global Health Division Vice President, Michelle Gardner. In addition to welcoming participants to the first joint meeting of the IBP and HIP partners, they raised the importance of the **specific objectives of the convening:**

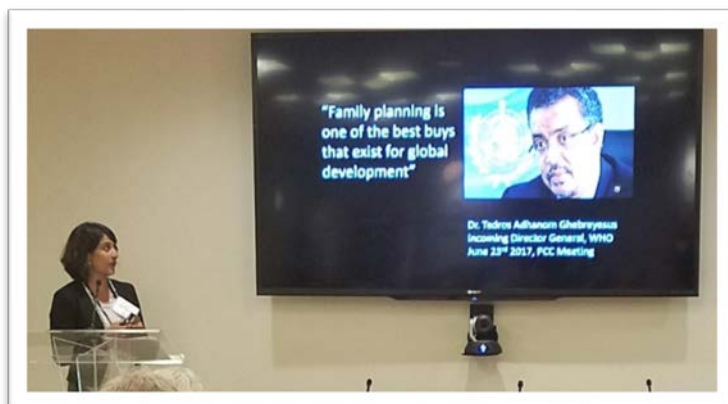
- Update partners on IBP and HIP activities
- Share ideas on strengthening linkages between HIPs, IBP, FP2020 and other global partnerships
- Provide opportunities to network among IBP and HIP partners
- Knowledge exchange and commitment to utilization of Tools/Resources

Taking the stage to frame the day's discussions was guest speaker **Duff Gillespie of JHSPH**. Gillespie gave an engaging **Keynote Address on the topic of "Galvanizing Commitment for Family Planning: Should There Be a Paradigm Shift?"** He walked participants through a series of key moments that drove major fluctuations in U.S. support for international FP over the last four decades,



to contextualize the current political and funding realities. Gillespie noted how individual leaders in any given administration largely influence FP policies and budget negatively or positively, and that these ups and downs will continue into the future; thus, the urgency of rethinking how to adapt FP funding trends and mechanisms to more effectively respond to FP need. Key approaches should include sustained advocacy at every level -global, regional, national, and sub-national-, capital investments in FP innovations, and local ownership over priorities, implementation and resources.

The new IBP Secretariat Lead at [WHO/RHR](#), Nandita Thatte, presented **key updates on the IBP Strategy and Vision** moving forward, in the context of the [2016-2020 IBP Strategic Plan²](#) and larger global development goals. Priorities include moving toward greater regional and country level



engagement to support dissemination, use and scale-up of WHO Guidelines and [High Impact Practices](#), improving monitoring and evaluation and documentation efforts, and diversifying its communication platforms. Thatte invited the IBP membership to actively engage in these efforts to increase the IBP Consortium's impact in these priority areas. Shawn Malarcher and Caitlin Thistle

² IBP Strategic Plan 2016-2020: <http://www.who.int/reproductivehealth/topics/countries/IPB-strategic-plan2016.pdf>

of USAID provided an **overview of the High Impact Practices (HIPs) and Technical Advisory Group (TAG) Update**, with an interactive game to inform partners on key aspects of the updated HIP products, and new focus areas and thematic priorities moving forward. These include a [new HIP website](#), new [HIP Evidence Briefs](#) on Mass Media, Immediate Postpartum FP, and Digital Health for Health Systems to be published in 2017, as well as new Briefs on Interpersonal Communication and Client Side Digital Health and a guide on Decision-making in Humanitarian Settings planned for 2018.

The second half of the morning consisted of a **High Level Panel featuring global partners that are supporting partnerships like IBP and HIPs**. Featured speakers included Ellen Starbird of USAID, Ian Askew of WHO/RHR, Martyn Smith of FP2020, Jennie Greaney of UNFPA, and Brendan Hayes of the Global Financing Facility (GFF) Secretariat based at the World Bank. In the format of a Talk Show hosted and moderated by Jay Gribble of Palladium, these founding partners and sponsors of IBP, HIPs and other global collaborative FP initiatives spoke to the importance of getting collaboration right, and the need to support FP programs within a larger global development agenda.

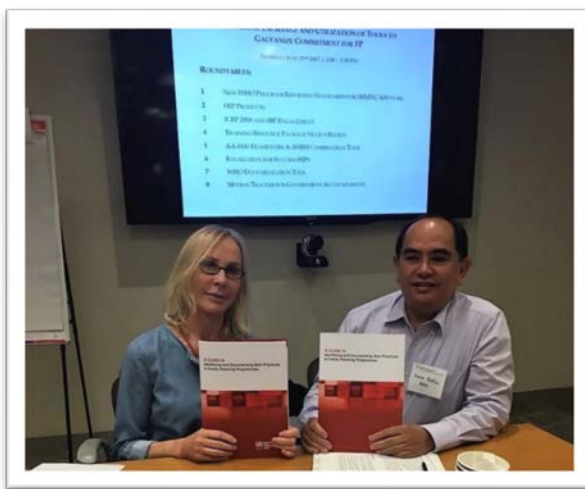


The five guest speakers provided an overview of how their high-level institutions plan to galvanize commitment for FP in light of the current context:

- FP champions at **USAID** are working hard to keep FP on the agenda, linking it to the agency's overarching priority of child and maternal mortality prevention and framing the 17 SDGs as "17 good reasons to support FP". Making a case for FP financing as an effective and efficient investment for global development is proving key to this advocacy. Starbird also emphasized the need to increase incentives for organizations to engage in strategic collaborative partnerships to accelerate progress.
- In the lead-up to the London Family Planning Summit 2017, Smith highlighted how **FP2020** has been focusing on strengthening their Country Support Model, working with focal points that serve as critical partners in achieving the FP2020 goals in each commitment-making country. This renewed approach looks promising for the advancement of FP progress within and across national contexts.
- With universal access to sexual and reproductive health, reproductive rights and the reduction of material mortality at the core of **UNFPA's** new Strategic Plan, FP continues to be a key priority for the agency. As they face new limitations on resources, UNFPA is focusing on strengthening partnerships as a primary strategy to meet their goals, particularly with national governments in order to encourage domestic and innovative financing, as well as with donors, and the private sector and by supporting in-country partnerships.

- The **GFF**, which serves as the financing arm of *Every Woman Every Child* and was set up to close the funding gap for RMNCAH and Nutrition, recently released its [first Annual Report](#) as a contribution to tracking progress towards the SDG targets. The GFF represents a new financing model that seeks to increase country ownership and leadership based on a country prioritization process, in which participating countries develop investment cases that help to mobilize complementary funding from international donors and private sector to achieve “smart, scaled and sustainable financing” for women’s and children’s health.
- **WHO/RHR** is galvanizing commitment to FP by framing their activities within the *Global Strategy for Women’s, Children’s and Adolescents’ Health* to contribute to the SDGs, strengthening collaboration among relevant WHO departments to ensure FP integration, and enabling regional and country offices to facilitate country adaptation of key WHO Guidelines, as well as engaging in new partnerships to broaden the FP community’s capacity to meet its goals. Askew emphasized the importance of SDG 5 for gender equality and women’s empowerment if we are to achieve SDG 3 for healthy lives and well-being, and called for the prioritization of a rights-based approach going forward.

The remainder of the meeting centered around a highly **interactive and informative Knowledge Exchange Session** facilitated by **Sara Mazursky of JHU-CCP and K4Health** on the utilization of tools to galvanize commitment to FP. This session featured eight tables led by facilitator teams that shared new tools and useful updates about existing tools, which addressed a range of topics from adolescent health, FP documentation, and public sector financing, to resources such as the TRP, HIPs products, and the ICFP. Discussions centered on the background, scope, aim, and utilization of the resources, particularly how they have been and/or can be used to galvanize commitment to FP. Participants provided input regarding perceived strengths and weakness of the



tools/resources, and made concrete commitments on behalf of their organizations to utilize them to promote FP commitments amongst key stakeholders. The facilitators shared highlights from each table in a group report-back session, which were then summarized by the moderator. As moderator, Mazursky also emphasized that she implemented the practice of making commitments -which themselves will be revisited in a future partners meeting- as a strategy to foster the culture of accountability in FP. The table summary list, including links to the resources, and the list of commitments that participants made are available [here](#)³.

³ Meeting documents available here: <https://knowledge-gateway.org/global/ibpmembers/library>

Prior to closing the meeting, incoming IBP Chair IPPF joined the IBP Secretariat and outgoing Chair PHI for a **ceremonial handover of the IBP drum from PHI to IPPF**. To mark the handover, Esther Tahrir and Susanna Moore of PHI reflected on their organization's contributions and lessons learned as Chair, which included three main areas that PHI promoted during its term: adolescent and youth FP/RH, greater integration of the Latin American and Caribbean region into IBP, and drawing global-domestic linkages in FP. Yilma Melkamu and Sarah Onyango of IPPF shared their vision as incoming Chair, highlighting their organization's commitment to this new role in the Consortium, and their intention to contribute their global perspective, reach, and partnerships in over 160 countries, and keep a rights-based approach front and center.



Other announcements included an introduction of the **two newest IBP member organizations** attending the meeting: [Promundo](#) and the [Association of Reproductive Health Professionals \(ARHP\)](#), both of which received a warm welcome and are long-time allies or partners of many IBP member organizations.

Concluding the meeting, **WHO/RHR Director, Ian Askew** shared closing marks reflecting on the dynamism and natural synergy in joining the HIPs and IBP partnerships, particularly the interactive discussions on how to collaborate effectively and frame FP in the larger global development agenda to foster commitment. Additionally, Askew underlined the importance of continuing to leverage the synergies and partnerships shared by HIPs and IBP to further the knowledge around evidence-based practices for FP and effective implementation.

Key Messages

- The IBP Consortium and the HIP Partnership should continue to coordinate efforts, in order to ensure that evidence-based practices identified through the HIP work can be disseminated, implemented and scale up through the IBP network.
- The IBP Consortium provides a complementary platform to other global FP partnerships (like FP2020, RHSC, OP) and should continue to strengthen these linkages to ensure that the voice of implementing partners is well represented in global and regional FP forums.
- An emphasis on monitoring and evaluation and strengthening the engagement of regional and country level partners will be important as IBP moves forward in the implementation of its new 2016-2020 Strategy.

All meeting presentations and materials are housed on the IBP [Knowledge Gateway](#).

Annexes

- I. Meeting Agenda
- II. Meeting List of Participants

For more information please contact: Nandita Thatte, IBP Secretariat, World Health Organization, Avenue Appia, CH 1211 Geneva 27, Switzerland email: thatten@who.int

This report was compiled by PHI, IBP Chair 2015-2017.

IBP CONSORTIUM & HIP PARTNERS MEETING

THURSDAY, JUNE 29TH 2017

Location: Chemonics International, 1717 H St. NW #1, Washington, D.C. 20006

Theme: Galvanizing Commitment in Family Planning to Achieve Development Goals

Objectives:

- Update partners on IBP and HIP activities
- Share ideas on strengthening linkages between HIPs, IBP, FP2020 and other global partnerships
- Provide opportunities to network among IBP and HIP partners
- Knowledge exchange and commitment to utilization of Tools/Resources

08:30 - 09:00	Registration & Breakfast	
09:00 - 09:15	Welcome	<i>Michelle Gardner, Chemonics Esther Tahrir, PHI (Chair)</i>
09:15 - 09:30	Review of Objectives and Purpose of Combined Meeting	<i>Shawn Malarcher, USAID Nandita Thatte, WHO/IBP</i>
09:30 - 10:00	Keynote Address	<i>Duff Gillespie, JHSPH</i>
10:00 - 11:00	Update on IBP Strategy and Vision	<i>Nandita Thatte, WHO/IBP</i>
	Overview of HIPs and TAG Update	<i>Caitlin Thistle, USAID Shawn Malarcher, USAID</i>
11:00 - 11:30	Break & Networking	
11:30 - 13:00	Commitment and Partnership in FP to Achieve Development Goals	<i>Jay Gribble, Palladium</i>
	<ul style="list-style-type: none"> • FP2020 • UNFPA • USAID • World Bank • WHO 	<i>Martyn Smith Jennie Greaney Ellen Starbird Brendan Hayes Ian Askew</i>
	Discussion	
13:00 - 14:00	Lunch Break	

14:00 - 15:30	<p>Knowledge Exchange and Utilization of Tools to Galvanize Commitment for FP</p> <ul style="list-style-type: none"> • New WHO Program Reporting Standards for SRMNCAH work • HIP Products • ICFP 2018 and IBP Engagement • Training Resource Package Status Review • AA-HA! Framework & ASRH Combination Tool • Foundation for Success HIPs • WHO Documentation Tool • Motion Tracker for Government Accountability 	<p><i>Sara Mazursky, JHU-CCP</i></p> <p><i>Stephanie Levy, USAID</i></p> <p><i>Debbie Dickson, JHU-CCP & Ados May, IBP</i></p> <p><i>Kellie Welborn, Gates Institute</i></p> <p><i>Pauline Lee, Chemonics</i></p> <p><i>Jill Gay, What Works Association & Nandita Thatte, WHO/IBP</i></p> <p><i>Shawn Malarcher, USAID & Laura Raney, FP2020</i></p> <p><i>Asa Cuzin-Kihl, WHO</i></p> <p><i>Alyson Lipsky, RTI</i></p>
15:30 - 16:00	Break & Networking	
16:00 - 16:30	Report Back from Knowledge Exchange and Partner Commitments to using tools	<i>Sara Mazursky, JHU-CCP</i>
16:30 - 16:45	IBP chair 2017-2019: IPPF	<i>Esther Tahrir, PHI</i> <i>Susanna Moore, PHI</i> <i>Sarah Onyango, IPPF</i> <i>Yilma Melkamu, IPPF</i>
16:45 - 17:00	Closing and Way Forward	<i>Ian Askew, WHO</i>
17:00 - 18:15	Reception Location: Chemonics International (adjacent to meeting room)	



USAID
FROM THE AMERICAN PEOPLE



World Health Organization



IPPF International Planned Parenthood Federation



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IBP Consortium & HIP Partners Meeting

June 29th 2017 | Washington D.C.

List of Participants

First Name	Last Name	Affiliation
Ominde	Achola	EngenderHealth
Yilma Melkamu	Alazar	IPPF
Lutaf	Ali	Aman Foundation
Marianne	Amoss	Gates Institute
Ian	Askew	WHO
Rita	Badiani	Pathfinder International
Lynn	Bakamjian	Independent Consultant
Martha	Brady	PATH
Lindsay	Breithaupt	Jhpiego
Fabio	Castano	Independent Consultant
Elaine	Charurat	Jhpiego
Nora	Connors	Public Health Institute
Carmela	Cordero	EngenderHealth
Liz	Creel	JSI
Laurette	Cucuzza	Independent Consultant
Asa	Cuzin	WHO
Peggy	D'Adamo	USAID
Nana	Dagadu	Institute for Reproductive Health
Debra	Dickson	JHU-CCP
Ellen	Eiseman	Chemonics
Mario	Festin	WHO
Fariyal	Fikree	PATH
Michelle	Folsom	Independent Consultant
Beth	Fredrick	JHSPH
Michelle	Gardner	Chemonics
Jill	Gay	What Works Association
Natko	Geres	Promundo - US
Duff	Gillespie	JHSPH
Angelina	Gordon	Public Health Institute
Jennie	Greaney	UNFPA
Jay	Gribble	Palladium
Karen	Hardee	Population Council

Mark	Hathway	Jhpiego
Brendan	Hayes	World Bank
Silvia	Holschneider	URC
Laura	Hurley	Palladium
Roy	Jacobstein	IntraHealth
Victoria	Jennings	Institute for Reproductive Health
Amanda	Kalamar	PSI
Mihira	Karra	USAID
Robin	Keeley	PATH
Eckhard	Kleinan	HRH 2030 Program
Pauline	Lee	Chemonics
Stephanie	Levy	USAID
Candace	Lew	Pathfinder International
Alyson	Lipsky	RTI
Anna	Mackay	Marie Stopes International
Ron	Magarick	Jhpiego
Shawn	Malarcher	USAID
Erika	Martin	USAID
Ados	May	IBP Initiative
Sara	Mazursky	JHU-CCP
Maeve	McKean	URC
Erin	Mielke	USAID
Susanna	Moore	Public Health Institute
Dani	Murphy	Chemonics
Elizabeth	Murphy	Jhpiego
Reshma	Naik	Population Reference Bureau
Maureen	Norton	USAID
Sarah	Onyango	IPPF
Emily	Peca	URC
Nancy	Pendarvis Harris	JSI
Elisa	Pinto de Magalhaes	IPPF
May	Post	Abt Associates
Walter	Proper	JSI
Shannon	Pryor	Save the Children
Laura	Raney	FP2020
Laura	Reichenbach	Population Council
Eva	Ros	FP2020
Sharon	Rudy	Public Health Institute

Abdulumumin	Saad	USAID
Lois	Schaefer	USAID
Jim	Shelton	GHSP, JHU
Wayne	Shields	ARHP
Andrei	Sinioukov	Overseas Strategic Consulting
Martyn	Smith	FP2020
Julie	Solo	Independent Consultant
John	Stanback	FHI 360
Ellen	Starbird	USAID
Linda	Sussman	USAID
Esther	Tahrir	Public Health Institute
Nandita	Thatte	WHO
Caitlin	Thistle	USAID
Terri-Ann	Thompson	Ibis Reproductive Health
Kellie	Welborn	Gates Institute
Elizabeth	Westley	MSH/ICEC
Kate	Wilson	MSH
Leigh	Wynne	FHI 360