### SDA Partnering initiatives at country level

<table>
<thead>
<tr>
<th>Stop TB Strategy Sub components/ Service Delivery Area</th>
<th>Activities to be budgeted</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>SDA Partnering initiatives at country level</td>
<td>1 exploration component</td>
<td>1) Mapping of resources completed;</td>
</tr>
<tr>
<td></td>
<td>2 building component</td>
<td>2) a shared national TB plan agreed by partners and roles and responsibilities of each partner outlined;</td>
</tr>
<tr>
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<td>3 maintenance component</td>
<td>3) a partnering agreement including vision, goal and objective, and governance structure signed off by all partners.</td>
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<td></td>
<td>Staff, training and technical assistance included in Human Resources Development SDA Monitoring and evaluation included in M&amp;E SDA Activities implemented by partners included in the context of other SDAs</td>
<td></td>
</tr>
</tbody>
</table>

This SDA encourages the applicant country to engage a wider group of partners and expand activities beyond its usual practice. The rationale of this approach is that the social aspect of TB and the operational challenges of TB control call for the joint effort of several and varied actors. The national TB control programme (NTP) as well as multiple organizations currently deal with TB control in the country, and they could gain from each other's work towards the same common goal: a country free of TB.

Partnering initiatives at country level could offer an **inclusive platform** to all stakeholders working on TB prevention, care and control in the country. Organizations from different sectors of society (public, civil society, private/business sector) could decide to come together in a voluntary alliance to develop and implement a **shared national TB plan** to achieve the objectives of TB prevention, care and control.

In coordination with the NTP, a partnering initiative would support the national TB plan by harnessing the **contributions of all partners**. Being an inclusive platform, organizations working under various service delivery areas (from DOTS expansion and enhancement to MDRTB and TB/HIV) could sit around the same table and discuss how to better address the national TB plan taking into account the services/competences/resources they could provide in different geographic areas.

The nature of partnering initiatives would necessarily be **country-specific**, expressing typical cultural and organizational diversity. Depending on the local situation, countries might decide to build upon already existing forms of collaboration/coordination, such as the Interagency Coordination Committee, and start a partnering initiative.

If the initial partners (institutions, such NTP or WHO Country Office, or other actors from the civil society and private/business sector) decide it is worth to create a partnering initiative, they could take on a **partnering process**. This is a dynamic process based on three continuously evolving components: partnership exploration, building and maintenance. The partnership exploration component includes: building
a common vision, identifying and starting a dialogue with all relevant partners, mapping resources (not only financial, but also human and technical). The partnership building component includes: jointly preparing an operational plan, agreeing on a partnering agreement, designing a governance structure, setting up the basic secretariat and launching the initiative publicly. The partnership maintenance component relates to the implementation of the activities for which the partnership has been established, including monitoring and evaluation.

For each of the three components, activities to be budgeted have been identified. This SDA could, therefore, include costs related to 1) activities to start up the partnering initiative (exploration and building components) and 2) activities of the NTP plan which can be implemented by partners and budgeted in the context of other service delivery areas (maintenance component).

**PARTNERING INITIATIVES ACTIVITIES**

- **1 Partnership exploration:**
  - Hold an exploratory workshop inviting all partners from different sectors of society (civil society, public, private/business sector) working on TB prevention, care and control in the country. This workshop could be helpful to build the vision, identify and dialogue with partners and conduct a mapping of resources. Partners could decide whether technical assistance from a broker/facilitator is needed to run this workshop.
  - Hold follow up meetings with the partners, if the time of the exploratory workshop was not enough to finalize the mapping of resources.

- **2 Partnership building:**
  - Network, continue dialogue with partners, hold meetings to prepare the operational plan, the partnering agreement and the basic structure of the partnering initiative and circulate the drafts among the wider group of partners.
  - Set up the secretariat of the partnership and maintain basic communication functions between secretariat and partners (start small e.g.: executive secretary and administrative assistant).
  - Launch the partnership publicly.
  - Hold partner engagement meetings and set up a communications platform.

- **3 Partnership maintenance:**
  - Activities implemented by partners in the context of other service delivery areas are identified and budgeted under the correspondent service delivery area, and detailed in the operational plan of the partnering initiative. In addition, under each service delivery area, applicants could consider identifying and budgeting capacity building activities addressed to the staff employed by the partner organizations.
  - Within this SDA, activities implemented by partners not included under other service delivery areas (e.g. psychological support to patients, training of trainers for community leaders), as well as capacity building activities related to the partnering process and the management of the partnership.
  - Hold meetings of the governing bodies (e.g. the plenary body where all partners are represented once a year).
  - Hold workshops of staff employed by partner organizations on the implementation of the operational plan according to each service delivery area. Partners could decide whether technical assistance from a broker/facilitator is needed to run this workshop.
  - Monitoring and evaluation of:
    - the activities implemented by partners is under the correspondent service delivery area.
    - the partnership itself is under this SDA and could include: situation assessment, learning by sharing good practices/lessons learned, evidence-building and research, knowledge management, identifying and documenting key information.
  - Institutionalize the partnership, if partners decide to have it registered as an independent not for profit organization.

**Useful web links:**
- Stop TB Partnership website on partnering initiatives at country level:
  http://www.stoptb.org/countries/partnerships/