

Guidance Note

Transnational Collaboration for Better Health

Priorities & Advocacy Strategies in the African Context



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BACKGROUND AND PURPOSE

The purpose of this guidance note is to synthesize existing topical information, share key initiatives and lessons, and inspire adaptive action. It is not a description of the COVID-19 Transparency and Accountability Project (CTAP) activities or accomplishments, but rather a toolkit with frameworks and ideas that can be applied in any context. Nevertheless, this is not an exhaustive or instructive guide, but rather a snapshot of comprehensive findings that are related to our collective objectives for health accountability in Africa.

We hope that this guidance note is helpful for CTAP leads, partners in our network, and anyone interested in strengthening health systems in Africa, as they push for transparency and accountability across all levels, from grassroots communities to national governments. For lessons specifically focused on CTAP activities and accomplishments thus far, see the lesson report reflecting on the first phase, visit the CTAP website to see the latest outputs, and stay tuned for the final report soon.

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About CTAP

COVID-19 Transparency and Accountability Project (CTAP) is an initiative that seeks to promote accountability and transparency through the tracking of COVID-19 intervention funds across 9 African countries: Cameroon, Ghana, Kenya, Liberia, Malawi, Nigeria, Senegal, Sierra Leone, and Zimbabwe.

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Introduction

The COVID-19 pandemic has put a serious strain on health systems across the world. The consequences on our economies, governments, and societies are yet to be fully realized and understood. We know that the need for a quick response to COVID-19 has put a considerable burden on the existing institutional structures for accountability and service delivery.

Hastily appropriated funds within weak procurement systems have been misused and often ended up in the pockets of corrupt individuals instead of financing health services and vaccines for citizens. The resulting strain on public health institutions further undermines government's capacity to deliver services, limits access to vital healthcare, and thus seriously affects citizens' trust in the government. COVID-19 has exacerbated existing inequities and exposed institutional weaknesses, but there is a visible way forward through advocacy, accountability, and collaboration.

Across Africa, leaders who design and implement policies have been working with international and regional organizations to help them address health sector challenges during COVID-19 response. As a result, many health sector decisions are shaped by discussions that take place in global and regional spaces, such as the United Nations (UN), World Health Organization (WHO), and the African Union (AU). Common tools and agendas are one way to tackle complex problems brought by the pandemic, with a caveat for observed variance between different country contexts.

Accountability and effectiveness on the ground depend on transparent and accessible decision-making and policy discussions at the transnational level that are inclusive of stakeholders at the national, sub-national, and community levels. Unfortunately, these stakeholders often bear the burden of getting a seat at these high-level conversations to advocate for change and take collective action to increase their visibility and amplify citizen voices.

Transnational health accountability is needed to increase connections and trust among various stakeholders. To accomplish this, advocacy activities should emphasize network facilitation and knowledge exchanges as central components. The COVID-19 Transparency and Accountability in Africa project (CTAP)ⁱ is a great example of this

approach because it supports transnational health accountability rooted in knowledge-sharing and strong networks. It augments the emergence of sustainable solutions to complex health sector challenges, such as equitable vaccine distribution, adequate resource allocation, and institutionalization of transparency, accountability, and participation (TAP) – with the opportunity for organizations in different countries to learn from each other.

These solutions have the power to mobilize mechanisms to address and prevent corruption in primary healthcare centers and enable the delivery of quality health services. An intentionally established path of multi-stakeholder collaboration around complex health challenges paves the way for better policy design and implementation.

Guidance Note Structure

In this note, we build on a blend of experiences from multilateral organizations and stakeholders facilitating and fostering technical cooperation on participation and advocacy strategies, highlighting current global and regional policy agendas. The note expands on global and regional opportunities and offers some direction for effective regional advocacy, participation, and cooperation with global and regional institutionsⁱⁱ to strengthen and accelerate results in health.

This review provides some key lessons for civil society organizations (CSOs) to adapt to their contexts and make progress toward addressing complex health sector challenges. It proposes important takeaways and guidelines to encourage meaningful and active participation of CTAP partners, adjacent grassroots organizations, and local coalitions in national, regional, and global co-creation and collaboration processes by:

- Incorporating new ideas and evidence to explain health issues and regional advocacy and participation in health accountability mechanisms.
- Mapping advocacy spaces and institutions, including the nature of their relationships, roles, policies, interests, and incentives, to engage in activities that aim to initiate coordinated public health action to improve citizens' well-being.
- Including lessons on how to meaningfully engage with regional and global multi-stakeholder institutions on issues concerning health policy and service delivery.

The following section is a brief overview of various agendas that define global and regional health priorities. Although this is not an exhaustive list, it is a useful framework

of how the UN, AU, and OGP have approached overcoming COVID-19. The next section takes theoretical commitments into more practical application and outlines opportunities for participation and advocacy at the regional and global levels. The final section of this guidance note shares a summary of key lessons for participation opportunities.

Current Global and Regional Policy Agendas in the Health Sector

The COVID-19 pandemic exposed multiple ways governments, global health institutions, and the general public were unprepared to respond and fund a health emergency of such magnitude. As a result, we have seen unprecedented interest in improving public health and public procurement systems across the globe. While transnational institutions have mostly spent the last two years focused on the pandemic, they are now beginning to use some lessons learned to address other health priorities and strengthen preparedness for future crises.

Knowing what global and regional actors are focused on is a good starting point for engaging with them. For CSOs, elevating national and local community voices to help further influence the direction of transnational policy is of particular importance. To shape such policies, CSO actors often have to show how their work aligns with those priorities while raising awareness about real issues. Pushing for practical solutions rooted in sound theories of change and global goals is a promising way forward.

Global Agendas

Health priorities are framed by the UN's Sustainable Development Goals (SDGs)ⁱⁱⁱ, [Goal 3](#) in particular.^{iv} That means the focus is primarily on the following:

- Reducing and ending premature and preventable deaths from various causes (communicable and non-communicable diseases, maternal and infant mortality, traffic accidents, substance abuse, pollution, etc.).
- Achieving universal health coverage and access to quality essential health services, vaccines, and medicines.
- Substantially increasing health financing and building up the health workforce in developing countries.
- Strengthen the capacity of countries for early warning, risk reduction, and management of national and global health risks.

Through their Regional Office for Africa, the WHO has focused on these areas:

- Achieving [universal health coverage](#).^v

- Ensuring [equitable access](#) to quality medical products and health technologies.^{vi}
- Consolidating skilled [national health workforces](#).^{vii}
- Strengthening national public health [surveillance and response systems](#).^{viii}
- [Revamping](#) the region's health systems in the wake of COVID-19.^{ix}

Together with the World Bank, the WHO has also developed schemes to track the progress toward universal health care by monitoring the population accessing essential quality health services and household income spending on health.

Regional Agendas

On a regional level, the [African Union](#)^x (AU), particularly through a specialized technical institution called [Africa CDC](#)^{xi}, plays an important role in supporting public health initiatives in AU member states. Africa CDC is further subdivided into [Regional Collaborating Centres](#)^{xii}, with physical offices in each region.

Africa CDC works in the following [strategic areas](#)^{xiii}:

- Disease control and prevention
- Emergency preparedness and response
- Laboratory systems and networks
- National public health institutes and research
- Public health information systems
- Surveillance and disease intelligence

Its objectives are creating and synchronizing early warning and response systems and supporting member states in health emergency response, building member states' public health capacities, and promoting partnership and collaboration among member states, which it does through various programs and projects. For example, they created the [Africa Medical Supplies Platform](#)^{xiv} to create easy access to medical supplies from trusted sources for healthcare providers, thus supporting effective and transparent procurement practices.

Throughout the COVID-19 pandemic, the Africa CDC has played a pivotal role in coordinating the African Union's response to the pandemic across the continent, but its ambitions for a new public health order in Africa go even further. Its [vision](#)^{xv} includes creating strong regional health institutions, investing in the public health workforce across the continent, local production of vaccines and medicines to bring down costs,

strong high-level partnerships between stakeholders, and a greater role for regional organizations in pandemic governance.

In addition, the member states of the African Union (AU) own a self-monitoring mechanism called the African Peer Review Mechanism (APRM). The APRM offers the opportunity to comprehensively review Africa's governance response to COVID-19 as a cross-cutting theme using specific indicators to assess preparedness for response to and recovery from COVID-19 among AU member states. The APRM has published several studies ([here](#)^{xvi} and [here](#)^{xvii}) to assess and map disaster management and international health regulation policy coordination and strategy implementation.

Open Government Partnership

The Open Government Partnership (OGP) is a platform that advances priorities at the national and (increasingly) local level. Its members have a varied approach to health issues. Most of the [180 OGP](#)^{xviii} commitments in healthcare center around data publication and [patient outcomes](#)^{xix}, while others focused on citizen participation in healthcare decision-making. OGP's [2019 Global Report](#)^{xx} outlines three general categories of approaches to open government in health – data on health inputs and outcomes, information on the policy process, and participation and accountability – in four specific health areas: health facilities and inputs, universal health coverage and primary care, quality of care, and reproductive health.

While there is some overlap between the UN and WHO in priority areas, OGP focuses more on data, transparency, monitoring, and civic participation, which aligns more closely with CTAP priorities. However, OGP is primarily a platform for country-level commitments, representing a parallel track toward progress on the SDGs that can be taken in addition to engaging with the institutions setting global agendas.

During the COVID-19 outbreak, OGP launched a [campaign](#)^{xxi} to advance the COVID-19 response to recovery. The Open Renewal, Recovery, and Response campaign promoted events, shared [guides](#)^{xxii}, [tools](#)^{xxiii}, and showcased cases from OGP countries. OGP has also developed a [skeptic's guide](#)^{xxiv} to convince others to take an open government approach when implementing reforms. The guide includes easy-to-grasp evidence on the impacts of some of the most popular open government approaches based on current research in each policy area.

Opportunities for Participation and Advocacy at the Regional and Global Levels

COVID-19 exposed the need for greater preparedness to manage the next crisis. [Corruption](#)^{xxv} has prolonged the COVID-19 health challenges, as siphoned funds from unaccountable procurement practices stifled critical service delivery. Investigative journalists have found about a [network of cartels](#)^{xxvi} in Kenya and [rampant impunity](#)^{xxvii} in South Africa.

This problem was truly global in scope. For example, in the UK, some [contracts](#)^{xxviii} related to purchasing personal protective equipment (PPE) were awarded to firms as part of a special “VIP lane.” Every country was affected by COVID-19, and while many approached it with varied degrees of response, many lessons are translatable and ongoing.

These patterns of corruption continue to appear worldwide and require a fundamental rethinking of public health systems. Effective collaboration between public, private, and CSO stakeholders could help develop adequate mechanisms to promote accountability, coordination, and risk-sharing – and enable greater access to expertise and learning.

Global Level

At the global level, there are opportunities for working with other stakeholders. The [United Nations \(UN\) Global Compact](#) mobilizes companies and stakeholders to align strategies and operations with anti-corruption principles, emphasizing collaboration and innovation to advance broader societal goals, including the SDGs.^{xxix} To advance health, the UN Global Business Coalition for Health (GBC Health) incentivizes stakeholders to work towards a sustainable and inclusive future. It is a step forward in strengthening Corporate Social Sustainability (CSR) worldwide and changing the way more responsible practices can develop solutions to address challenges such as poverty and inequality and support goals such as education, health, and peace. Learn how to take part [here](#).^{xxx}

Another mechanism to promote accountability to save lives and protect people's health is the GAVI Alliance. An initiative where CSOs have a seat on the [board](#)^{xxxi}. They pledge to increase the fair and sustainable use of vaccines alongside with public and private

sectors partnered to protect people's health. Participation is a key element of this initiative. The wider [Gavi CSO Constituency](#)^{xxxii} is a broad network of over 4,000 CSOs from across the globe. The Gavi CSO Steering Committee, a group of 19 civil society organizations, guides its work. To learn more, you can [register](#)^{xxxiii} to take part and receive updates about their task teams.

Regional Level

There are similar approaches at the regional level across Africa. The African Business Coalition for Health (ABC Health) set goals to build an enabling environment for African businesses and philanthropists committed to working together. However, a well-functioning healthcare sector in Africa is a challenge; no single government or organization can solve it alone. So, they are [building a coalition](#)^{xxxiv} and using social media to connect with wider audiences through their advisory service and knowledge hub.

The World Health Organization (WHO) Regional Office for Africa is strengthening partnerships. They want to support [countries](#)^{xxxv} by scaling up proven public health interventions by granting [participation](#)^{xxxvi} opportunities to non-state actors to receive technical support and participate in regional committee sessions. This is so they can oversee and contribute to regional policies.

About advocating and supporting policy health agendas, the African Union (AU) is committed to a long-term development trajectory for Africa by promoting [Agenda 2063](#)^{xxxvii}. The plan is to transform Africa into a global powerhouse of the future with adaptive development practices.^{xxxviii}

This can be accomplished through ongoing structural transformations, renewing economic growth, and social progress with more people-centered development, gender equality, and youth empowerment. emerging development and investment opportunities in agri-business, health, and education are some of the approaches to reaching this agenda.

The three main streams of work related to health that the AU focus on:

- For a regional health agenda, the AU Social Affairs Department provides support for the implementation of member states' policies on labor, employment, population, health, and

migration^{xxxix}, promoting evidence in the areas of health and nutrition in the Department of Health, Humanitarian Affairs and Social Development (HHS).^{xl}

- To support the implementation of social development, labor, and health policies and programs, the [Pan-African Parliament Committee](#)^{xli} on Health, Labour, and Social Affairs works on regional and international cooperation strategies. It is involved in discussions and decision-making of the continent's problems and challenges.
- The [Citizens and Diaspora Directorate \(CIDO\)](#)^{xlii} handles implementing the AU's people-oriented vision. It is a driven organization based on a partnership between governments, civil society, and diasporas. It mainstreams civil society contributions through aspects of AU principles, policies, and programs. Encouraging dialogue in forums. They encourage effective participation by organizing relevant workshops on understanding the African Union and promote consultation in various African partnership processes^{xliii} to reinforce the development agenda.

Stories of Multi-Stakeholder Collaboration at the National, Regional, and Global Levels

The principal mechanism to generate policy demands is through mobilization and participation. Stakeholders' common demands on preferred policy options allow them to get involved and develop strategies for management in the government's agenda-setting. There are coalition-based advocacy and accountability initiatives to improve CSOs' ability to advocate with government and district officials to ensure a “test and protect” approach to health system challenges and spark collaboration efforts.

African civil society organizations advocate influencing political priorities through effective evidence-driven approaches. Multiple organizations (list [here](#)^{xliv}) have pledged to ensure humanitarian responses help resolve root causes of need and vulnerability, to build peaceful contexts where people can thrive, tackle inequality, and support development, and to humanitarian planning and decision-making and work alongside all humanitarian actors and accountability to people in need of humanitarian assistance.

Pan-African Civil Society's voice and action are informing discussions that are part of a long-term policy and relationships framework. The [WACI Wealth Africa](#)^{xlv} and the Civil Society Platform for Health (CISPHA) have joined the conversation with the AU and the European Union (EU) and focused on the health pillar. Using CISPHA's Pan-African non-for-profit advocacy platform of civil societies working on health, they want to mobilize and utilize evidence to advocate for increased domestic resource mobilization for health at national levels. So, they developed a joint civil society [paper](#)^{xlvi} to highlight the health concerns of Africa and focus on the health pillar to inform the roadmap toward achieving the desired long-term health outcomes. These CSOs are working to increase and sustain advocacy to hold AU member states accountable, especially on the outcomes of the Africa Leaders Meeting on Health, the AU-EU relations, and the Tokyo International Conference on African Development ([TICAD](#)^{xlvii}).

Coalitions are relevant to amplify community voices and to ensure immunization remains a core intervention to deliver the existing global health goals. These are some relevant cases of inspiring partnerships

1. The Gavi CSO Steering Committee (GCSC) and [Amref Health Africa^{xlviii}](#) alliance. Since April 2022, Amref has been offering [strategic advisory^{xlix}](#) services to Gavi's steering committee and supporting capacity-building efforts across the CSO constituency for county-led engagement and implementation. Amref opened the door to mobilize and support civil society organizations working to strengthen health systems and deliver immunization services to underserved communities.
2. The Coalition for Health Promotion and Social Development ([HEPS-Uganda](#))ⁱ joined efforts with other local CSOs and Community-Based Organizations (CBOs), local communities, the National Ministry of Health, and UNICEF to boost access and uptake of COVID-19 tests and treatments. This is a multi-stakeholder assessment of vaccine access and an equity-developed landscape focused on financing, procurement, and supply chain for COVID-19 to gauge public awareness of tools and attitudes around COVID testing, treatment, and vaccination. The work has led to changes in community empowerment by providing healthcare consumers with skills and knowledge about their health rights and responsibilities. They are generating opportunities for health policy advocacy by conducting policy analysis and research to inform advocacy initiatives at the national and district levels through coalition building, partnership creation, and sensitization.
3. The Citizens' Platform for Strategic Monitoring of Health Policies in Niger, the Civil Society Global Network for Malaria Elimination ([CS4MEⁱⁱ](#)), and the Global Fund Advocates Network Africa ([GFAN AFRICAⁱⁱⁱ](#)) partnership for advocacy in health. They organized a [strategic meeting^{liii}](#) to advocate for increased mobilization of domestic resources for health in Africa, with 40 civil society organizations (CSOs) from 15 francophone countries.

In addition, strengthening the capacity and capability of Africa's public health institutions with different program frameworks is an opportunity for work. This area can help to detect and respond effectively to disease threats and outbreaks. Two cases are worth mentioning:

1. The Africa Frontline First ([AFF^{liv}](#)) has built a robust community for health infrastructure. For the delivery of efficient and fair care. AFF is a coalition of members, including [Last Mile Health^v](#), the [Finance Alliance for Health](#),¹ and the

¹ <https://financingalliance.org/>

[Community Health Acceleration Partnership^{lvi}](#), among others. Assembled with diverse partners—including governments, with multilateral institutions, regional political organizations, health sector experts, and donors— to build strong [community health systems^{lvii}](#) in 10 African countries.

2. The Amref partnerships have proved that training communities in preventative actions could detect potential disease threats quickly. The [Amref Health, Ministry of Health, and CDC^{lviii}](#) case strengthened systems monitoring^{lix} diseases in communities. They trained 669 community health volunteers and 132 CHWs^{lx} intending to improve alert systems to raise public awareness of disease outbreaks and protection against them.^{lxi}

Conclusion

This guidance note summarized key lessons for participatory policymaking opportunities at different levels. While global health priorities are still primarily shaped in traditional international institutions, non-state actors play an increasingly important role in influencing global and regional health policy. Foundations, multinational corporations, multi-sectoral partnerships, and CSOs are all making their presences felt in the health sector across the African continent, providing even more opportunities than the traditional actors for citizens, grassroots organizations, and local CSOs to have their voices heard and participate in the framing of global health priorities. The less rigid structures of these actors create additional points of entry for actors at the local level.

There are several strategies actors at the local or national level can use to engage transnational actors, whether state or non-state, to shape transnational advocacy efforts. Before getting into the strategies, It is important to note that engagement can take many forms:

- **Multiple membership models** - This includes joining coalitions or alliances that work together on transnational advocacy and to grant opportunities for transnational participation and advocate for people's health systems.
- **Collaborative relationships or strategic partnerships** - This is the most traditional form of engagement involving direct partnerships with transnational actors on projects or initiatives.
- **Knowledge-sharing** - This involves commenting on content and engaging with outputs released by transnational organizations, helping to mobilize and encourage dialog and create an enabling environment for stakeholders to participate in larger conversations.

Different forms of engagement may involve different strategies. Joining a coalition, for example, is a different process entirely from sharing knowledge and will have different points of entry that need to be identified before engaging. For this, it is important to do a good amount of research on the transnational work organizations are doing, identifying where the gaps are in their work where you can add value. While we provided an overview of different initiatives and structures in the transnational health space, new opportunities arise all the time. Keeping tabs on the various institutions in the space is essential to identifying opportunities and points of entry.

However, a common factor across all types of engagement is the importance of demonstrating value to stakeholders by being a problem solver and showing them an understanding of the focus issue. This can be done by proactively mapping the root causes of the problem and the various stakeholders and opportunities in the system and coming up with potential solutions.

Another aspect to remember when engaging with global actors is the asymmetric power dynamic. Demonstrating expertise and institutional competence is one way to balance out the dynamic, as is working in partnership with other organizations as a coalition or alliance.

Successful engagement by local and national organizations with transnational institutions and actors, where local voices are heard, is an important step towards creating health systems that center citizens and their needs. This is what makes them resilient in times of crisis. Hopefully, by the time the next health emergency hits, we will be able to rely on health systems that are not only responsive and adaptive to multiple challenges but also accessible and equitable for all people.

End Notes

ⁱ The COVID-19 Transparency and Accountability in Africa project (CTAP) was created early on during the pandemic as a civil society-led effort to demand Transparency and Accountability (T&A) about the use of public resources in response to COVID-19 Africa and to advocate and advance the reforms needed by governments in the region to ensure effective use of public resources and quality service delivery for citizens. One of the major goals of the second phase is co-creating suitable solutions to complex health challenges through multi-stakeholder institutions mechanisms.

ⁱⁱ Institutions such as the United Nations, African Union, Open Government Partnership, and World Health Organization, among others.

ⁱⁱⁱ The Global Partnership for Sustainable Development Data (Open Data Watch) outlines the importance of open data for the SDGs: https://opendatawatch.com/wp-content/uploads/2016/09/ODW-GPSDD_IOCC.pdf and provides several tools and case studies for using open data to monitor SDG progress: <https://opendatawatch.com/wp-content/uploads/2016/10/IODC16-NSO-Outcomes-Paper-from-Workshop.pdf>

^{iv} Goal 3: Ensure healthy lives and promote well-being for all at all ages:

<https://www.un.org/sustainabledevelopment/health/>

^v World Health Organization. African Region. "Universal Health Coverage".

<https://www.afro.who.int/health-topics/universal-health-coverage>

^{vi} World Health Organization. African Region. "Progress Report on the implementation of the technical paper on reducing health inequities through inter-sectorial action on the social determinant of health in the African Region". <https://rb.gy/yhl5qc>

^{vii} World Health Organization. African Region. "Universal Health Coverage".

<https://www.afro.who.int/health-topics/universal-health-coverage>

^{viii} World Health Organization. Regional Committee for Africa. "Progress Report on the implementation of the regional strategy for integrated disease surveillance and response, 2020-2030. <https://rb.gy/mfaosj>

^{ix} World Health Organization. African Region. "Transforming Africa's health system in wake of COVID-19 pandemic". <https://www.afro.who.int/news/transforming-africas-health-system-wake-covid-19-pandemic>

^x African Union "Promoting Health and Nutrition". <https://au.int/en/promoting-health-nutrition>

^{xi} Africa for Disease Control and Prevention – Africa CDC. <https://africacdc.org/>

^{xii} Africa for Disease Control and Prevention regional collaborating centres.

<https://africacdc.org/regional-collaborating-centres/>

^{xiii} Africa for Disease Control and Prevention regional work. <https://africacdc.org/our-work/>

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- ^{xiv} Africa Medical Supplies Platform categories and diagnostics. <https://amsp.africa/>
- ^{xv} International Monetary Fund. "A new Public Health Order for Africa". <https://www.imf.org/en/Publications/fandd/issues/2021/12/Public-Health-Order-Africa-Nkengasong>
- ^{xvi} African Governance Report. "Africa's governance Report to Covid-19". <https://www.aprm-au.org/publications/africas-governance-report-to-covid-19/>
- ^{xvii} African Governance Report. <https://www.aprm-au.org/wp-content/uploads/2022/08/APRMCovid13-01-22web2.pdf>
- ^{xviii} Open Government Partnership. Policy Areas: Health. <https://www.opengovpartnership.org/policy-area/health-nutrition/>
- ^{xix} Open Government Partnership. "Why Open Budgets contracts and ownership are critical to delivering public services in Africa". <https://www.opengovpartnership.org/stories/why-open-budgets-contracts-and-ownership-are-critical-to-delivering-public-services-in-africa/>
- ^{xx} Open Government Partnership. "Global Report on Health". https://www.opengovpartnership.org/wp-content/uploads/2019/08/Global-Report_Health.pdf
- ^{xxi} Open Government Partnership. "Open Renewal". <https://www.opengovpartnership.org/campaigns/open-renewal/>
- ^{xxii} Open Government Partnership. "Guide to Open Government and the Coronavirus". <https://www.opengovpartnership.org/documents/a-guide-to-open-government-and-the-coronavirus/>
- ^{xxiii} Open Government Partnership. "Tools and Guidance". <https://www.opengovpartnership.org/resources-sub-groups/tools-and-guidance/>
- ^{xxiv} Open Government Partnership. "Skeptics guide to open government (2022)". <https://www.opengovpartnership.org/skeptics-guide-to-open-government-2022-edition/>
- ^{xxv} Anti-Corruption Resource Centre. "Covid-19 corruption in 2021: the pandemic rages on". <https://www.u4.no/blog/covid-19-corruption-in-2021-the-pandemic-rages-on>
- ^{xxvi} The cartels are mostly made up of corrupt officials at the Ministry of Health, selling donated COVID-19 vaccines. From All Africa portal. "Kenya: Inside Top Secret Covid-19 Vaccine Smuggling Racket". <https://rb.gy/gc7cvc>
- ^{xxvii} Daily Maverick News. "Blooming impunity: Update on PPE irregular expenditure and graft". <https://www.dailymaverick.co.za/article/2021-11-17-blooming-impunity-update-on-ppe-irregular-expenditure-and-graft/>
- ^{xxviii} Anti-Corruption Resource Centre. "Covid-19 corruption in 2021: the pandemic rages on". <https://www.u4.no/blog/covid-19-corruption-in-2021-the-pandemic-rages-on>

^{xxix} The program offers companies of all sizes a blueprint for contributing towards achieving the 2030 Agenda for Sustainable Development and the Paris Agreement. They incorporate ten principles covering human rights, labor rights, the environment, and anti-corruption – into their practices. From: United Nations Global Compact Program. “The Ten Principles of the Global Compact?”. <https://www.unglobalcompact.org/what-is-gc/mission/principles>

^{xxx} GBC Health Portal. <https://www.gbchealth.org/why-how>

^{xxxi} Gavi – Vaccine Alliance. <https://www.gavi.org/our-alliance/governance>

^{xxxii} Gavi CSO Constituency for immunization and stronger health systems. “How we work?”. <http://www.gavi-cso.org/About/how-we-work>

^{xxxiii} Gavi CSO Constituency. “Become a member”. <http://www.gavi-cso.org/become-a-member>

^{xxxiv} ABC health. “Get Involved”. <https://abchealth.com/partners-members/#register>

^{xxxv} World Health Organization. Countries of the African Region. <https://www.afro.who.int/countries>

^{xxxvi} World Health Organization. “Granting accreditation to regional non-state actors not in official relations with WHO to participate in sessions of the WHO regional Committee for Africa.” <https://rb.gy/rpeffv>

^{xxxvii} African Union. “Agenda 2063: The Africa We Want”. <https://au.int/en/agenda2063/overview>

^{xxxviii} It is the strategic framework for delivering on Africa’s goal. A manifestation of the pan-African drive for unity, self-determination, freedom, progress, and collective prosperity. Pursued under African Renaissance for inclusive and sustainable development. More here in World Health Organization. <https://www.afro.who.int/countries>

^{xxxix} HHS hosts the secretariat of the Africa CDC, and the division of health systems, diseases, and nutrition which respond to vital generic health issues related to health policy and delivery systems, nutrition, and other related public health issues and challenges that require a concerted and coordinated approach at a continental level. The access contact is here in the African Union Portal. <https://au.int/en/contact>

^{xl} African Union Portal. “Health, Humanitarian Affairs & Social Development (HHS)”. <https://au.int/en/hhs>

^{xli} Pan-African Parliament. <https://pap.au.int/en>

^{xlii} African Union. Diaspora & Civil Society Engagement. <https://au.int/diaspora-civil-society-engagement>

^{xliii} Partnerships that encourage the support for inter-continental consultation partnerships (AU-European Union, Forum on China–Africa Cooperation (FOCAC), among others.

^{xliv} Pledge by African Civil Society, for the African Union Humanitarian Summit (May, 2022).

<https://charter4change.files.wordpress.com/2022/05/civil-society-pledge-to-africa-final-1.pdf>

^{xlvi} WACI Health portal. <https://wacihealth.org/about-us/>

^{xlvii} Aids Watch Africa. "AU-EU Strategy – Joint Civil Society Paper On Health Ahead Of The Leaders' Summit". <https://aidswatchafrica.net/au-eu-strategy-joint-civil-society-paper-on-health-ahead-of-the-leaders-summit/>

^{xlviii} Tokyo International Conference on African Development (TICAD) Portal.

<https://www.jica.go.jp/TICAD/en/ticad/whats/index.html>

^{xlix} Amref Health Africa is headquartered in Kenya. It is the largest Africa-based International Non-Governmental Organisation (INGO) with a focus on increasing sustainable health access in over 35 countries in Africa. With lessons learned over 60 years of engagement with governments, communities, and partners. More here: <https://amref.org/>

^{li} Relief Web. "Amref Health Africa appointed by Gavi as the new Civil Society Organisation (CSO) host". <https://reliefweb.int/report/world/amref-health-africa-appointed-gavi-new-civil-society-organisation-cso-host>

^{li} A total of 21 organizations with a diverse range of healthcare experts have been selected for funding. It is part of the Access to COVID-19 Tools Accelerator (ACT-Accelerator), which is a global collaboration of leading public health agencies working with governments, civil society, and industry to accelerate the development and equitable distribution of tests, treatments, and vaccines – and the strengthening of health systems – that the world needs to fight COVID-19. More here: <https://twitter.com/hepsuganda>

^{lii} Civil Society for Malaria Elimination Portal. <https://cs4me.org/>

^{liii} The Global Fund Advocates Network Africa (GFAN Africa).

<https://www.globalfundadvocatesnetwork.org/about/gfan-africa/#:~:text=The%20Global%20Fund%20Advocates%20Network,HIV%2C%20tuberculosis%20and%20malaria%20as>

^{liiii} The Global Fund Advocates Network Africa (GFAN Africa) Portal. 33rd African Union Summit: Civil Society Organizations in French-speaking Africa advocate for a significant increase in domestic resources allocated to health. <https://cs4me.org/events-resources/archives/33rd-african-union-summit-civil-society-organizations-in-french-speaking-africa-advocate-for-a-significant-increase-in-domestic-resources-allocated-to-health/>

^{liv} AFF members are: Financing Alliance for Health, Community Health Impact Coalition, Community Health Acceleration Partnership, and Last Mile Health. They support ten countries in Sub-Saharan Africa to build high-functioning, resilient, country-led community health service delivery. These systems include an expanded and institutionalized workforce of 200,000 community health workers across ten countries by 2030. More here:

<https://www.africafrontlinefirst.org/>

^{lv} Last Mile Health Portal. <https://lastmilehealth.org/>

^{lvi} Community Health Acceleration Partnership Portal. <https://chap.health/>

^{lvii} Africa Frontline First Initiative. "Fact Sheet". https://www.africafrontlinefirst.org/wp-content/uploads/2022/03/AFF_Fact_Sheet.pdf

^{lviii} Amref health Africa. "Expanding disease protection". <https://amrefusa.org/what-we-do/expanding-disease-protection/>

^{lix} It improves disease data collection, analysis, and communication between communities and health facilities, making treating and preventing outbreaks easier.

^{lx} CHVs are also trained to provide referrals to nearby clinics and health facilities for treatment, and to report disease cases to trained health workers like nurses.

^{lxi} Health workers like nurses are trained to identify diseases and provide improved treatment to patients, and record and report cases of diseases that will be collected at both local-level and national-level databases.