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The South African Institute  
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Kilimanjaro Centre for Community Ophthalmology



SAFE MOTHERHOOD HEALTHY CHILDREN





The RMR Programme cohort with IDRC and Inyathelo staff at the final workshop in Tanzania, June 2015. Photo by Emmanuel Ochola

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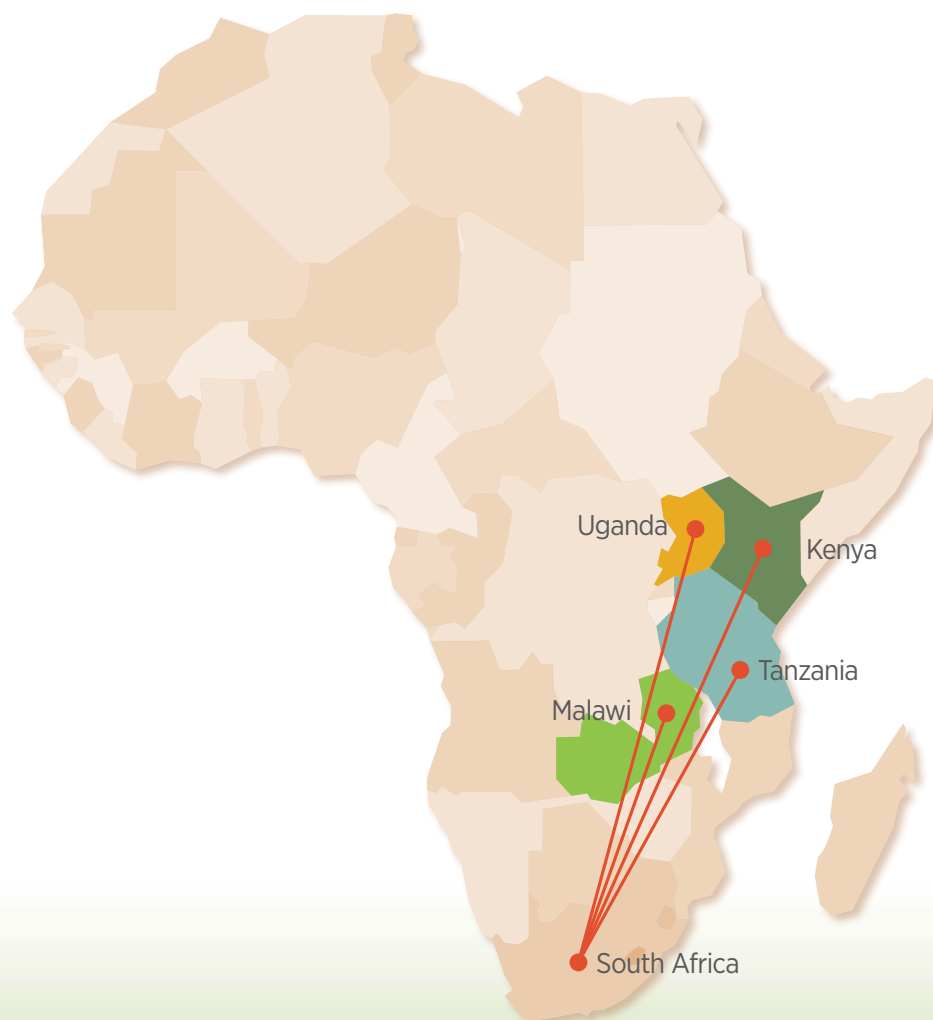
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## A MESSAGE FROM THE INTERNATIONAL DEVELOPMENT RESEARCH CENTRE (IDRC)

To contribute to lasting development solutions, research organisations need funding strategies that support their vision and goals over the long-term. IDRC's Resource Mobilisation for Research (RMR) programme helps grantees to lay the foundations for financial sustainability and organisational performance. During an 18 month period (2013-2015) the IDRC's Resource Mobilization Program supported the advancement of a cohort of four health research organisations in East Africa: Kilimanjaro Centre of Community Ophthalmology (*Tanzania*); Maternal, Newborn and Child Health Institute (*Uganda*); Africa Mental Health Foundation (*Kenya*); and Research for Equity and Community Health Trust (*Malawi*). To learn more about the IDRC and its work, please visit: [www.idrc.ca](http://www.idrc.ca).



## ABOUT INYATHELO AND THE ADVANCEMENT APPROACH

Inyathelo works to sustain and strengthen civil society organisations and grow local philanthropy in support of a vibrant democracy in South Africa. To achieve its goals in working to strengthen civil society, Inyathelo has pioneered the concept and practice of Advancement in the South African non-profit sector. We encourage organisations to build and maintain strong relationships with key external constituencies, including the state, beneficiaries, media, their supporters and the communities in which they operate in order to bring about long-lasting social change; invest in and develop social capital and social cohesion and to promote a culture of social giving. To learn more about Inyathelo and its work, please visit [www.inyathelo.org.za](http://www.inyathelo.org.za).

Inyathelo was brought on board by the IDRC to work alongside the participating organisations as they implemented their RMR grants. The IDRC's approach was therefore twofold: it provided an opportunity for organisations to expand their capacity by providing financial resource – the grant, and by providing the services of a capacity building organisation – to mentor. The programme unfolded over the course of 18 months and the primary means of support was via remote interaction, bookended by two sets of site visits – in 2013 and 2015, and an opening capacity building workshop – using the Advancement framework as an anchor - in 2014 and a concluding writeshop in 2015.

Refer to the RMR Project Timeline on page 7 to see the series of activities and interactions over course of the programme duration.

Inyathelo used the Advancement approach as the entry point to its capacity building interventions with the cohort.

# THE ADVANCEMENT APPROACH

Inyathelo defines Advancement as a systematic and integrated approach to building and managing external relationships with key constituencies in order to attract support.

## In other words, Advancement is about:

- The organisational cohesion of institutions in terms of their planning, fundraising, marketing and communications, and relationship-building functions;
- The strategic use of specialised technical functions, including prospect research, relationship-building strategies, targeted proposal writing, and donor recognition;
- Strong and accountable institutional leadership and high-level leadership commitment to Advancement;
- The alignment of fundraising efforts with the strategic priorities and long-term development plans of the institution;
- A shift from a charitable paradigm to one of positioning for investment and attracting support;
- Ethical and professional standards for fundraising that hold the Advancement operation accountable both to the institution and to donors.

## The Ten Elements of Advancement





## ABOUT THIS PUBLICATION

For this particular RMR programme, the IDRC created the space for organisations to share their capacity building journeys. The rationale for the reflective approach was to give the cohort the opportunity to evaluate their organisational development and to articulate their journey as a change story – all of which assists organisations in strategically positioning themselves.

The change stories are centred on capacity building milestones – informed by the Advancement framework – agreed to at the first workshop. They reflect the activities made possible by the RMR grant to achieve the said milestones and share the learnings encountered during implementation. The content was scripted by the organisations using suggested guidelines shared by the IDRC. The drafts of these reflective pieces were refined through a facilitated process at the final writeshop which included dialogue, peer review, and editing.

Each of the organisations have very particular sustainability goals given their respective environments and work challenges. The thread that runs through each is the passion these organisations have for their work and the resilience they've developed through the seasons.

This collection of experiences is an homage to their important and influential work and to their resilience.

In the original change story drafts, each of the organisations expressed their gratitude to the IDRC and to Inyathelo for this important yet rare opportunity to access capacity building support. We'd like to formalise those sentiments with this collective note of acknowledgement to the IDRC. Inyathelo would also like to add its voice to that gratitude given this is its first opportunity to work in East Africa.

Inyathelo acknowledges all the organisations and their staff who contributed to this report, for their tenacity in drafting and redrafting.

Inyathelo would also like to acknowledge Emma Levy for the stellar editing and Michael Daries for the inspiring graphic design and layout.

## ABBREVIATIONS

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<b>IDRC</b>	International Development Research Centre
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<b>Inyathelo</b>	Inyathelo: The South African Institute of Advancement
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<b>RMR Project</b>	Resource Mobilisation for Research Project
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<b>AMHF</b>	Africa Mental Health Foundation
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<b>REACH Trust</b>	Research for Equity and Community Health Trust
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<b>MNCHI</b>	Maternal Newborn and Child Health Institute
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<b>KCCO</b>	Kilimanjaro Centre for Community Ophthalmology
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<b>POs</b>	Participating Organisations
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<b>XOVA</b>	Excellence in Ophthalmology Vision Award
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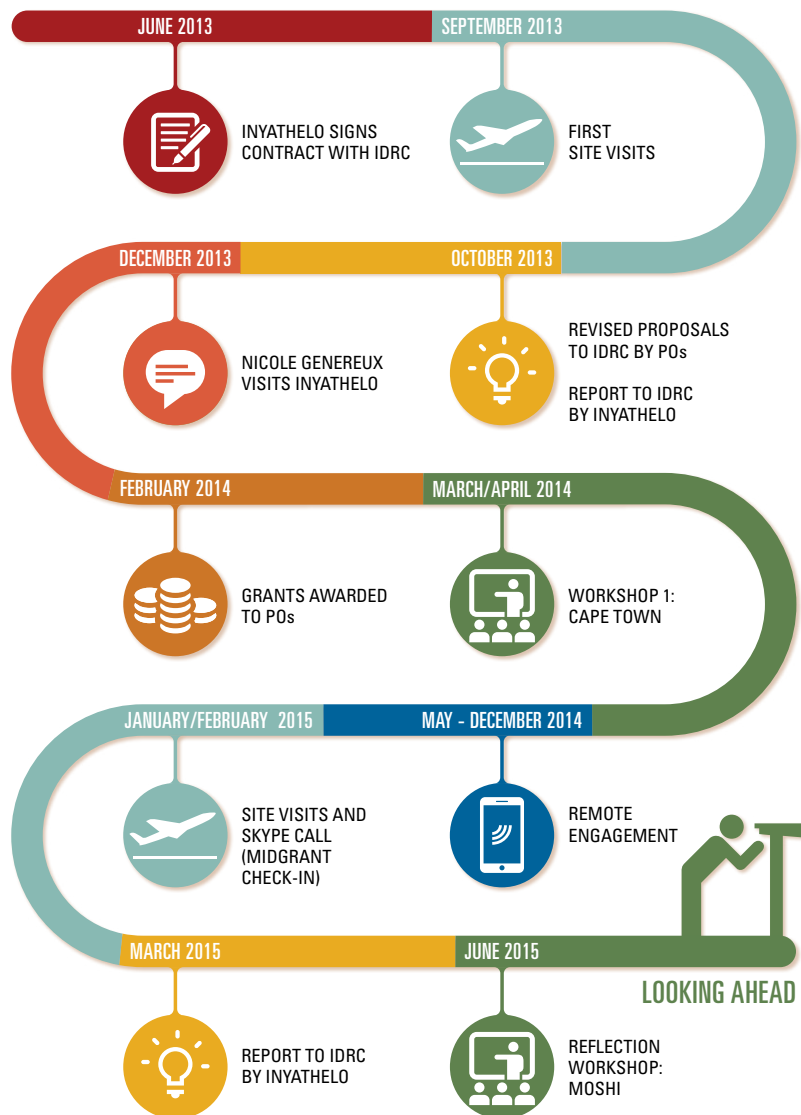
<b>ISO</b>	International Organization for Standardization
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# THE IDRC RESOURCE MOBILISATION FOR RESEARCH PROJECT **TIMELINE**

SEPTEMBER 2013 TO JUNE 2015





## KILIMANJARO CENTRE FOR COMMUNITY OPHTHALMOLOGY (KCCO)

# STRENGTHENING LEADERSHIP AND GOVERNANCE FOR IMPACT

Edson Mwaipopo and Peter Kileo

### KEY MESSAGES

- A change in leadership provided the impetus for new appointments, shifts in portfolios, and training opportunities to further strengthen organisational capacity – particularly at the leadership level.
- Governance has been identified as a critical building block for continued organisational sustainability. An expanded board has been established for KCCO Tanzania and new members orientated in line with KCCO's strategic objectives.
- The financial management system of the organisation's three offices (in Tanzania, America and South Africa) has been streamlined and integrated with the appointment of a financial assistant trained in both accounting and the centre's work.

## Overview

The Kilimanjaro Centre for Community Ophthalmology Tanzania used the 18-month Resource Mobilisation Research grant to strengthen its leadership, governance and financial management system.

These capacity building interventions enhanced KCCO's capacity to engage with partners. Six additional funders were secured within the last quarter of 2014; this success can in part be attributed to the enhanced capacity within the organisation.

Important leadership transformation also took place. The KCCO Tanzania deputy director was mentored to take over the role of director in the Tanzania office – effective February 2015, with the former director – also a founder – relocating to South Africa in June 2012 to become the centre’s international director.

## **The Kilimanjaro Centre for Community Ophthalmology**

The Kilimanjaro Centre for Community Ophthalmology (KCCO) was established in 2001 with the assistance of the Good Samaritan Foundation of Tanzania (in response to the Vision 2020 initiative) to:

- strengthen the capacity of local workers involved in disease control,
- develop human resources,
- build local infrastructure.

KCCO’s focus is therefore: capacity building, research, planning, facilitation and change implementation. It has offices in three countries - South Africa, Tanzania and the United States. The centre has undergone structural change since its inception. After signing a letter of intent with the Good Samaritan Foundation of Tanzania, it entered into a three-year tripartite memorandum of understanding (MoU) with Kilimanjaro Christian Medical College and Kilimanjaro Christian Medical Center referral hospital. In 2012 the organisation went through further structural and managerial transformation: rationalising the role of each of its offices.

It now has three centres performing different functions. KCCO Tanzania Limited is based in Moshi and manages programmes across Africa. KCCO International is based in Cape Town, South Africa - at Grooter Schuur Hospital - and is mostly involved with research and administration. KCCO US - in the United States - focuses solely on fundraising for the centre’s programmes. Even though KCCO US’s role is dedicated to fundraising, this does not preclude the other offices from raising funds. As mentioned earlier, six grants were secured towards the end of 2014 - these were secured by KCCO Tanzania over and above the project and programme implementation it does.

## **Challenges**

Three challenges identified within the organisation included the financial management system of KCCO overall, governance at KCCO Tanzania, and leadership of the KCCO Tanzania office.

### **Financial management**

Given the growth of the organisation's staff complement, scope of work and funding, a coherent financial management system became critical. Historically KCCO had three different accountants - one in Tanzania, one in South Africa and one in the United States, each using their own systems. This posed a challenge for compiling and integrating reports and also presented a number of management difficulties. This problem was compounded when the founder director of KCCO Tanzania, who had worked as chief accounting officer, relocated to South Africa.

### **Governance at KCCO Tanzania**

Since 2012, the KCCO Tanzania board consisted of two founder members and one executive – all of whom were involved with KCCO Tanzania's operations and programme work. Given the growth of the organisation, its work and stakeholder base, expanding and diversifying the board became a priority. The key challenge has been to engage recommended governance practice and in parallel to that process, identifying, engaging and on-boarding new board members.

### **Strengthening leadership of KCCO Tanzania**

The former KCCO Tanzania director relocated to South Africa to establish the KCCO International office, and the KCCO Tanzania deputy director took over as director. The former director is also a founder and was the chief accountant. His departure created the impetus for additional capacity to be developed at various levels within KCCO Tanzania – particularly at the leadership level. The organisation recruited an assistant director to support the new director and both needed to be mentored, oriented and capacitated in their new positions.

## **The approach**

### **Financial management**

A financial assistant – with a background in economics – was hired by KCCO in October 2014 to integrate the organisation's accounting systems. The recruitment process was led by consultants from Canada and a rigorous orientation programme was put in place to develop his understanding of KCCO's work and incorporate him into the team. On Inyathelo's recommendation, a freelance consultant from Cape Town also provided him with further accounting and software specific training, viz. Quick Books. This additional training took place in December 2014.

In May 2015, he received additional training at C Masters Development Services (in Cape Town, South Africa) on recommended practice and procedures for non-profit organisations to further strengthen the centre's integrated financial management system.

### **Governance at KCCO Tanzania**

During a site visit in January 2015, Inyathelo provided the KCCO directors with training on board recruitment and the roles and responsibilities of board members. The session focused on selection, recruitment and orientation. Relevant resources such as the Independent Code of Governance and an induction manual was provided, so as to guide the process KCCO Tanzania would undertake.

As a result, the new KCCO board members were systematically identified and engaged. The choice of board members was a strategic one, in terms of the expertise and networks they would bring into the organisation.

Two of the new members are Tanzanian, and three American. Their areas of expertise vary considerably, from management to research to ophthalmology. Their selection was based on their capability to advocate, advise and provide technical assistance to KCCO. The first board meeting will take place before the end of 2015.

In addition, the new director attended a short course on governance at the Danish Training Centre for Development Cooperation in Eastern and Southern Africa – an institute based in Arusha, Tanzania. This enhanced the perspective and expertise on how to constitute, engage and manage the board.

## **Strengthening leadership of KCCO Tanzania**

In January 2014, an assistant director was appointed to support the KCCO Tanzania director designate. The assistant director's portfolio would also include a programme coordination role. From the outset, the assistant director was mentored – which is a strength within the KCCO model – and he has been afforded the opportunity to attend various workshop and training.

Training was conducted by Inyathelo (in Cape Town in 2014 and Moshi, Tanzania in January 2015), Lions Aravind Institute for Community Ophthalmology, India and Blantyre Institute of Community Ophthalmology, Malawi. The training was financed by the IDRC through the RMR grant.

The assistant director has taken over some of the projects the new director used to be involved with and also provides assistance to the director in terms of some oversight and management. The reduced time on programme work has meant that the director is able to focus on the organisation's strategy, new opportunities, issues relating to human resources, scope of work and fundraising. During this particular project period, it mean that the director could dedicate more time to writing and reviewing of proposals which led to additional funds being secured.

## **Lessons learnt**

- Implementation of important changes in an organisation requires resources, commitment and time.
- In terms of financial resources, it cost KCCO more than USD40,000 to implement the necessary changes. Without the RMR grant this would not have been possible.
- Technical support comes from various services providers and from both local and international sources. During this grant period, technical assistance came from Tanzania, South Africa and Canada.
- Effective change takes time. It has taken almost two years for the organisation to make these important transformational changes.

- Organisational development is worthwhile and important to sustainability. KCCO secured several new funders in 2014 and this in part can be attributed to the strides in organisational development that were achieved.

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## AFRICA MENTAL HEALTH FOUNDATION

# ADVANCING MENTAL HEALTH

## BUILDING A SUSTAINABLE AFRICAN CENTRE OF EXCELLENCE

Victoria Mutiso, Catherine Ng'etich, Rhodah Mwangi, and David Ndeti

### KEY MESSAGES

- Identify the areas of work that need to be strengthened and the goals to be achieved.
- Leadership drives organisational sustainability, cultivating staff commitment.
- Exploration and innovation is a continued priority.

## Overview

Africa Mental Health Foundation (AMHF) seeks to provide appropriate, accessible and affordable mental health services to all people regardless of their socio-economic status - from the individual to the family to the entire community. It seeks to achieve this goal through evidence-based research and advocacy work that informs practice and influences policy in Kenya and across Africa.

The Resource Mobilisation Research (RMR) grant funded by the International Development for Research Centre (IDRC) offered capacity building mentorship from Inyathelo: the South African Institute for Advancement (Inyathelo) to strengthen its organisational systems and build capacity for sustainable growth.

## Challenges

Using the Advancement framework as a lens, AMHF found that its prioritised areas of challenge included governance, financial management, voice and visibility, and resource mobilisation.

It also became clear that relevant governance structures and policies needed to be developed in order to engage various stakeholders more effectively – including internal stakeholders. In terms AMHF's governance specifically, it was found that the organisation would benefit from the additional support and oversight that a governing body could bring to its leadership. Effective governance would provide additional strategic perspective for its sustainability and growth.

The financial management system needed improvement to more effectively facilitate the tracking and analysis of AMHF's overall budgeting and spending. AMHF also recognised that its brand could be rejuvenated; for 10 years the brand had been activated and presented in much the same way and was in need of revitalisation. Also, the organisation relied on a small number of donors and had no additional streams of income. The limited funding composition created uncertainty.

## The approach

With the RMR funding from the IDRC and mentorship from Inyathelo, AMHF appointed a resource mobilisation officer to steer the Advancement process. A resource mobilisation strategy was developed and the officer started to coordinate and implement the Advancement model.

At the first RMR workshop in Cape Town (2014), it was brought to AMHF's attention that it could join the Research Africa platform as it had direct links to the University of Nairobi which is a subscriber. Through active prospect research using this critical fundraising tool, the organisation obtained up to 10 grants during the RMR period while its resource mobilisation strategy was still being developed. Having access to Research Africa meant that a few processes could take place in parallel: AMHF could actively and consistently prospect for funding and submit applications while developing a resource development plan.

As part of its programme work, AMHF also hosted the Annual Pan-African PCAF Psychotrauma Conference - Africa's only multi-disciplinary conference on psychological trauma in war and conflict-torn societies. Though the conference is a key part of AMHF's programme work, it was also an effective medium to enhance its (AMHF's) voice and increase its visibility.

The conference, developed and funded by the Peter C. Alderman Foundation (PCAF), serves as a unique forum for mental health professionals and other health practitioners to receive training and share evidence-based information on trauma-related mental disorders in the region.

AMHF convened the 8th cycle of the international conference, a three-and-a-half day event for approximately 600 delegates from more than 10 countries. Participants included world experts in mental health, health care professionals, university staff, postgraduate students and other organisations working in mental health from within and outside Africa. This conference took place in July 2015.

In line with the Advancement approach to organisational sustainability, AMHF obtained additional financial and logistical support from other institutions for this conference. The collaboration succeeded on two levels. Not only did it increase the visibility of AMHF's work but it also forged future partnerships to advance the organisation's research endeavours, mission and goals.

During the grant period, a valuable partnership with the county government of Makueni for the fully funded scale-up project by Grand Challenges Canada was achieved. This collaboration boosts both the growth and sustainability of AMHF's work in the project site as well as presenting an exciting opportunity for uptake by local government of the organisation's research findings at policy level.

In addition, AMHF re-engaged the ISO 9000:2008 quality management systems process to ensure that all necessary policies and procedures are clearly documented and in place for all departments and organisational processes.

At the same time, AMHF also identified new board members who have subsequently been assessed, approached and instituted. The board members are professionals with strong records of achievement in the fields of law, business development, education, funding and mental health.

A new financial management system, *QuickBooks*, has been installed and the finance team trained in its use. Finally, in terms of further strengthening its voice and visibility, AMHF also formulated a communications strategy – the implementation of which is in progress.

## Lessons learnt

AMHF has learnt that the Advancement approach requires commitment across the organisation and is a long-term approach to sustainability. Advancement, through consistent application, becomes one of the precursors for building the resilience of the organisation.

Leadership is essential to organisational development. The organisation's sustainability goals need to be led by the executive leadership, in conjunction with the board, and the approach used is to be filtered throughout the organisation. Leaders are to share the vision, provide relevant information, and create an environment conducive to achieving various objectives - whether programmatic and / or related to Advancement and resource mobilisation. This way the approach to organisational sustainability is organically embedded throughout the organisation.

Networking and building relationships opens up vast opportunities for learning and support - that cannot be accessed when working in isolation. It brings far more than just financial support.

AMHF recognises that there are greenfields for it to explore in the area of mental health, e.g. research in genetics and ways in which it can innovate in delivering on its mission, like integrating mental health in primary health care system. This exploration needs to remain a priority. This in turn also creates possibilities for new and different partnerships and presents AMHF with an increased impetus to engage the external environment to attract resources.

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## MATERNAL NEWBORN AND CHILD HEALTH INSTITUTE (MNCHI)

# STRENGTHENING CAPACITY FOR RESOURCE MOBILISATION AT MNCHI

Jerome Kabakyenga and Sheila Niinye

### KEY MESSAGES

- The external environment in which MNCHI operates has changed, with socio-political factors impacting on the funding landscape in particular. The institute has recognised the importance of diversifying its relationships and funding mix.
- The institute needs to find alternate ways of adapting its organisational development – through consistent resource mobilisation in parallel with the coordination of activities to strengthen its innovations.
- Increased visibility through online presence e.g. the institute's new website, and convening capability e.g. MNCHI's international symposium, has been a worthwhile approach to building the institution's profile.

## Overview

The Maternal Newborn and Child Health Institute (MNCHI) in Uganda seeks to strengthen maternal newborn and child health service delivery through training of health workers, conducting research and strengthening service delivery. While it has recruited a co-ordinator, reviewed its strategic plan, and developed a case for support, its Advancement journey remains a complex one. Established in 2012 by Mbarara University of Science and Technology (MUST), the institute operates in a very challenging internal and external environment. Constant changes have impacted upon its Advancement plans.

At the outset, the institute lacked human resources, relevant policies and guidelines for its organisational development.

Despite considerable challenges, it has expanded its organisational capacity through resource mobilisation. It has also increased its voice and visibility through the development of its own website and by hosting an international symposium.

## **Background**

From 2002 until 2012, the Medical Faculty of Mbarara University of Science and Technology (MUST), the University of Calgary and other Canadian partners implemented innovative maternal and child health interventions through the Healthy Child Uganda (HCU) partnership. During this period, a number of projects targeted the improvement of health of mothers and children in southwestern Uganda.

One such noteworthy project was the training and facilitating of community health workers, known as Village Health Teams (VHTs) who worked on a voluntary basis. These volunteers empowered their communities through health education, community development and the promotion of self-reliance. The work significantly reduced the numbers of child illnesses and deaths in project areas and benefitted enormously from the high retention rate of community volunteers the project was able to engender. Maternal Newborn and Child Health Institute (MNCHI) was subsequently established in 2012 to sustain and increase HCU's community health interventions and innovations.

Training and research are key to the institute's work. MNCHI focuses on training health workers, conducting research and publicising its findings in order to influence policy decisions.

To provide these services on a larger scale, however, MNCHI needs to strengthen its organisational capacity through effective resource mobilisation.

## **Challenges**

MNCHI is a young organisation with limited human resources. It needed to update its strategic plan, set up governance structures and develop a case for support to drive its resource mobilisation efforts.

**Human resources:** The institute had one permanent staff member (the founding director) and 15 project (contract) staff. There was an urgent need to recruit more full-time staff to build the organisation's capacity.

**Strategic plan:** The institute's first strategic plan was developed to facilitate its formal establishment by MUST. However, it then needed to review the plan to align itself with the changing local and international environment. The institute's approval by the university in June 2012, coincided with a process at MUST to change three of its key leadership positions. This change management process has so far seen a new vice-chancellor assume office as the chief executive of the university.

**The external environment:** As well as these internal changes, MNCHI needed to establish a roadmap to guide its operations so that it meets its objectives. With the world's focus shifting away from the Millennium Development Goals (MDGs) to the proposed Sustainable Development Goals, the institute has had to align its priorities accordingly. In addition, Uganda was removed from several grant opportunities because of changes in the socio-political landscape which impacted directly on the funding environment. As a result, MNCHI acknowledged the need to quickly diversify its stakeholder relationships and funding mix, and find alternate ways of adapting its organisational development.

**Case for support:** At its inception, the strategic plan was the institute's only Advancement tool. A case for support was needed for MNCHI to define what it is, what it does and to identify priority areas for its future work. The three key pillars of the institute are currently defined as training, research and outreach programmes. The priority areas for MNCHI's own development include strengthening its capacity for sustainability through human resources and the development of infrastructure.

**Governance structure:** In its early stages of development, MNCHI lacked a steering committee and advisory board to guide its operations. It has since developed a steering committee to oversee the institute's activities and is responsible for policy formulation, leading resource mobilization, accountability and advocacy. The advisory board guides its management on national, global and technical issues relating to maternal newborn and child health.



## Approach

The institute recruited a coordinator in April 2014 to manage the advancement of the organisation as a whole. The coordinator has since overseen a review of MNCHI's strategic plan, developed a case for support and implemented a number of training and research activities. The coordination role therefore operated across the organisational and programme objectives.

A revised five-year strategic plan now spells out the institute's tiered governance structure, strategic activities and budget. It also takes into account the significant internal and external environmental changes that have taken place.

In terms of resource mobilisation, the institute continues to position itself to attract potential funders and stakeholders. It has developed a clear case for support – the documentation of which forms the basis of key messaging to be used in cultivating various relationships.

It has now articulated its strategic direction, clear management and governance structures, programmes, plans for human resource development and a financial overview. As mentioned earlier, the three key pillars of the institute are currently defined as training, research and outreach programmes.

As part of this development process, the institute held an international symposium in partnership with HCU entitled “Saving mothers and children: Functionalizing community-based MNCHI programmes” (in Mbarara, Uganda, on 11 June 2014).

At least 140 participants attended including: donors, policy-makers, Ministry of Health officials, local government staff, MUST staff, practitioners, the research community, non-government officials (local and international), donors and partners. The conference attracted international participants from Tanzania, South Sudan, the United Kingdom and Canada.

During the symposium, the institute's website was officially launched. The symposium itself and the organisation's online presence have been instrumental in raising the organisation's visibility amongst stakeholders and has subsequently provided opportunities for networking and the prospect of collaboration.

The symposium provided the perfect opportunity to meet with a number of funders with a view to nurturing existing - and cultivating new relationships for partnership. Meeting such as these resulted in for example, the United Nations Children's Fund (UNICEF) offering a grant to increase community health worker interventions in Ntungamo District in southwestern Uganda.

## Lessons learnt

Key documents are important for resource mobilisation. Documentation has provided an opportunity for MNCHI to express the value and rationale of its focus on improving the health of mothers and children. The institute has been able to identify potential donors and respond to calls for additional grants; this work continues.

Resource mobilisation skills are important for institutional development. The institute is better positioned to conduct prospective research, cultivate relationships for funding, prioritise, plan, implement, monitor and effectively utilise its resources.

Succession planning needs to be foregrounded. Changes in MUST's senior leadership may affect the institute's advancement. After 25 years of leadership by pioneers, MUST is undergoing a period of transition with new leaders filling senior positions. Two of the four senior executive posts have been filled with two remaining. This process has impacted on MNCHI's growth. For example, these changes directly delayed the establishment of the MNCHI steering committee and advisory board.

The external environment in which MNCHI operates has changed, with socio-political factors impacting on the funding landscape in particular. Some countries have rearranged their funding priorities and the geographies in which they fund; this has impacted MNCHI negatively. The institute has recognised the importance of diversifying its relationships and funding mix, and the value of doing so timeously. Consequently, it plans to intensify its resource mobilisation efforts by strengthening its Advancement capability to attract resources.

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RESEARCH FOR EQUITY AND COMMUNITY HEALTH TRUST (REACH TRUST)

## MOVING TOWARDS AN EFFECTIVE AND SUSTAINABLE HEALTH RESEARCH INSTITUTION

Ireen Namakhoma, Martina Mchenga, Angella Maganga, Harris Nantikwa, and Grace Bongololo-Mbera

### KEY MESSAGES

- Organisational capacity development grants help facilitate sustainable and effective research organisations.
- Successful organisations require committed staff who coordinate integrated Advancement activities.
- Effective mobilisation of resources increases an organisation's capacity to develop and reach its goals.

### Overview

Local research institutions are important because their work is relevant to the needs of the people and priorities of the country. This is case for REACH Trust's work in Malawi. Capacity to increase organisational voice and visibility is often a challenge and can impact on the ability to attract potential stakeholders – particularly funders.

Reach Trust has therefore embarked on an Advancement journey to build its voice (to make the issues it deals with heard) and visibility (to raise the organisation's profile) to attract support and strengthen its fundraising capacity. Organisational development is key for the trust to fulfil its mission and to achieve its goals – to promote equal access to healthcare in Malawi, particularly among the most vulnerable and disadvantaged in society.

## The challenge

- Reach Trust has relied on the same limited number of donors for many years. However, increased competition for scarce resources, has made it harder for it to secure funding.
- Without a resource mobilisation strategy in place or dedicated time and resource to identify potential funders, partners and collaborators, the trust's funding mix remain unchanged and increasingly vulnerable.
- Communication with existing stakeholders, important for effective stewardship, was poor. Limited initiatives in terms of the trust's voice and visibility further impacted on Reach's ability to attract new funders or potential collaborating partners.
- There was no communication plan in place nor material resources available, further exacerbating the problem with connecting with current and potential stakeholder through effective messaging.
- Reach's website was not regularly updated and there was no annual report to share the trust's work with present and potential partners and donors.
- There was a general need to strengthen the organisation's accountability structures – especially its strategic oversight mechanisms.

**Note:** Reach also recognised that its financial management systems required urgent attention; this was addressed through a separate intervention – not through the RMR grant.

## The approach

With the assistance of the International Development Research Centre (IDRC) in Canada and the guidance of Inyathelo in South Africa, the trust introduced a series of activities looking at its institutional Advancement.

An existing staff member was identified to co-ordinate resource mobilisation activities and to build a strong team. A communications officer was appointed and the IT officer's role was expanded to include participation in the team looking at Reach's Advancement capability.

The goal of the new team was to lead and garner support from other staff members to implement activities that enhanced the voice, visibility and fundraising activities of the trust.

**Activities included:**

- Developing a resource mobilisation plan to ensure a clear, coordinated approach to grant applications; establishing a database of past, present and potential donors. The plan guides the trust's intention to diversify its funding composition, with a view to securing funds from various trusts and foundations and even local garnering support from local corporates where applicable.
- Developing a communication and research strategy to maximise the uptake of the trust's health work; strengthens its voice and visibility with present and future stakeholders, including potential donors.
- The trust now takes a proactive approach to its website and redesigns and updates its contents regularly. The site aims to inform stakeholders, partners and donors about its work and highlight its impact on society.
- In addition, for the first time, the trust is producing an annual report for 2014/2015 headed 'Innovating community health'. Its contents reflect the revitalised mission, vision and goals of the strategic plan. The report will be widely distributed to key stakeholders, including donors, policy-makers, collaborators and partners. The trust plans to make this an important annual tradition.
- To increase its voice and visibility, the trust has also produced a documentary to show the impact of informal health providers in increasing access to tuberculosis and HIV diagnosis and treatment. This has already been shown on local television.
- In recent months, the organisation has also finalised the restructuring of its board of trustees and recruited new members. The board now includes policy-makers, researchers, human resource and finance managers as well as legal experts.

## Lessons learnt

### **Institutional capacity grants and training support are key to achieving organisational success.**

For a long time, the trust was aware that it needed to strengthen its resource mobilisation capacity. However, it did not realise that its previous attempts to do so, had tackled merely the effects not the underlying causes that limited its success.

With training and guidance from Inyathelo on Advancement, it now realises that successful resource mobilisation must be holistic. It is essential that everyone in the organisation operates in an integrated way, linking seemingly separate areas of work - including strong financial management, effective governance structures and practices, and strong internal and external relationship building.

Few donors, however, are willing to support organisational development. The opportunity therefore of a grant allocated entirely to Advancement, enabled the trust to start to embed the elements of Advancement into its resource mobilisation strategy and facilitate plans for its long-term effectiveness.

### **Resource mobilisation requires time, monetary resources and appropriate skills.**

Without dedicated staff who can co-ordinate resource mobilisation activities, it is difficult to build the necessary momentum for success. The Advancement framework guided the trust in identifying its organisational weaknesses and action and the RMR grant allowed for some areas of work to commence.

As a result, the trust identified the areas it needed to strengthen, particularly with regard to communication, and appointed a dedicated communications officer. The trust realised that it could increase capacity by extending existing roles of staff within the trust to include certain aspects of the Advancement approach and resource mobilisation work. That these members of staff already know the organisation and its work would be an additional advantage.

The continued production and dissemination of audio-visual materials is dependent however upon the availability of resources and requires of the trust to be creative in how it implements its plans around voice and visibility in particular.

However, it also found that factors conducive to organisational Advancement do not have huge (additional) monetary costs, such as staff commitment and creativity.

Linked to this is staff understanding about this particular approach to sustainability and recognising how their existing work and inputs link to resource mobilisation and Advancement overall. Their work isn't isolated and existing outputs and approaches can be utilised in achieving organisational sustainability.

Staff buy-in to new approaches takes time however. This could be seen in the work on voice and visibility where internal contributions for various online platforms have only trickled in. The trust's informational technology officer stepped in to produce content but this also meant that he needed to improve his writing skills. Internal contributions are still being pursued and through write-shops, capacity to create content is being developed within the organisation.

Finally, staff resilience has also been built over time. This mettle has especially been tested where grant applications have been unsuccessful. Lessons have been internalised and gained knowledge through these processes, and the organisations continues to forge ahead.

### **Audio visual materials are a powerful tool for increasing visibility.**

After the documentary was shown on local television, a number of staff said that they had received comments from different people about the programme. They said that it had enhanced public understanding of the trust's work and awareness of the impact it had in society. Going forward the challenge is to find ways to effectively repurpose and showcase this powerful audio visual material.



## Managing a resource mobilisation plan

Effective implementation of the resource mobilisation plan can be challenging as sometimes staff members are reluctant to take ownership of the process. Infrequent meetings, due to pressure of work and travel, were also a setback to the active participation of all staff members. It is therefore important to make resource mobilisation part of broader programming for the trust and not as a standalone activity. Resource mobilisation is no longer about grantwriting only but includes the amplification of Reach's voice and visibility in its external environment. To this end, the trust has developed a communications plan to, in tandem, strengthen these two elements of Advancement.

Furthermore, the trust's board is increasingly engaged and is growing in its understanding of its relationship building role with key stakeholders.

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For this Resource Mobilisation for Research programme, the IDRC created the space for organisations to share their capacity building journeys. The rationale for the reflective approach was to give the cohort the opportunity to evaluate their organisational development and to articulate their journey as a change story – all of which assists organisations in strategically positioning themselves.