

THE GLOBAL NETWORK OF PEOPLE LIVING WITH HIV

FAST-TRACK CITY CONFERENCE 2019 LONDON, UNITED KINGDOM

MODERNIZING STAKEHOLDERS **ENGAGEMENT IN** THE HEALTH RESPONSE

### WHAT HAVE CHANGED?

### **Communications and information sharing becomes:**

- Faster: information shared in real time (as-it-is happening)
- More intense: people use more time in 24 hours to share information and process them
- More density: network of information sharing not only expand in size, but also in density. For example, more topics discussed within the network

### People's appetite for information have dramatically increased

- The appetite increased in frequency: for example, in how often they want an update of an activity
- And in terms of quality: in how elaborate and descriptive they want the information to be



### WHAT HAVE CHANGED? (CONT.)

1. 30

### We know better what worked

- Peer-to-peer approach is critical
- People-centered service model increased effectiveness
- Engagement of communities-health service providers-policy maker ensure effective policies and programs

### Health policy conversations shifted

- Focus on single disease now evolve to health for all
- From mortality to quality of life
- Interlinkages between health and sectors beyond health

### This caused significant changes in modern civil society activism

Organizing a movement and activism used to rely on heavy planning

But now a single tweet, a single Facebook post can trigger a massive cross-sectoral movement

Fundamental organizational and CS engagement tool such as operational plan, strategic plan, partnership plan – seems to be becoming too "static and rigid" for modern days



## MODERN CS ENGAGEMENT

All of the technological progress on how information is shared and processed presented new opportunities and new ways of engagement

It is important to note that <u>civil society is</u> <u>not a homogenous entity</u> and therefore there is a wide-spectrum of civil society advocacy agenda

In the past, it is impossible to meaningfully engage EVERYONE but now it is not only that it is possible, it is THE NORM



# FUNDAMENTAL **COMPONENTS OF** STAKEHOLDERS ENGAGEMENT FOR

E. F.

### • COLLECTIVE THINKING

- DIGITAL ENGAGEMENT ALLOWS FOR MORE DIVERSE STAKEHOLDERS TO ENGAGE IN POLICY MAKING, PROGRAM DELIVERIES AND MONITORING IMPACT AND RESULTS
- NOT ONLY THE USUAL SUSPECTS
- MINIMALIZE GATE KEEPERS
- TRANSPARENCY IS CRITICAL. PUBLICLY ACCESSIBLE INFORMATION IS IMPORTANT TO MAKE SURE EVERYONE ENGAGED WITH THE SAME LEVEL OF INFORMATION
- THE DAYS OF HEALTH SYSTEM IS OVER. IT IS TIME FOR "SYSTEMS FOR HEALTH". INTERCONNECTEDNESS IS THE KEY TO EFFECTIVE PERFORMANCE AND SUSTAINABLE RESULTS
- ENSURING COMMUNITY ADVOCACY PROPERLY SUPPORTED (FINANCIALLY AND POLITICALLY) MEANS THAT THE ENTIRE HEALTH RESPONSE GOVERNANCE COMMITTED TO CONTINUOUSLY IMPROVE THE QUALITY OF POLICIES AND PROGRAMS
- LEAVE NO ONE BEHIND IS NOW ENTIRELY POSSIBLE. THE QUESTION IS THE POLITICAL COMMITMENT.

-