



AFRICAN COLLABORATIVE  
FOR HEALTH FINANCING  
SOLUTIONS

# Analysis of the partnership model between Results for Development (R4D) and its African Institutional Partners

January 2022

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*This report is made possible by the support of the American People through the United States Agency for International Development (USAID). The contents of this report are the sole responsibility of Results for Development, Duke, Feed the Children, Amref, Synergos, RAME, RESADE, CERRHUD, and UHF and do not necessarily reflect the views of USAID or the United States Government.*

## Acknowledgements

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RESADE ([www.resade.org](http://www.resade.org)) research team would like to thank all those who have assisted or contributed to the realization of this work. We would particularly like to extend thanks to:

- colleagues from the ACS project namely those involved in the development of partnerships and the implementation of “*Research and Learning*” activities for the technical and operational support they have provided to this study;
- All of our key informant for their availability and their kindness in responding to our questions/solicitations.

## Acronyms

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ACS	African Collaborative for Health Financing solutions
AMREF	African Medical and Research Foundation
AfDB	African Development Bank
CERRHUD	Research Center for Human Reproduction and Demographics
CoP	Community of Practice
COVID-19	Coronavirus disease 2019
UHC	Universal Health Coverage
HHA	Harmonization for Health in Africa
JICA	Japan International Cooperation Agency
WHO	World Health Organization
UNAIDS	Joint United Nations Program on HIV/AIDS
AIP	Local African Partner Organization
R4D	Results for Development
RAME	Network for Access to Essential Medicines
RESADE	Research for Health and Development
SPARC	Strategic Purchasing Africa Resource Centre
UHF	Uganda Healthcare Federation
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

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# I. Context and justification

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The African Collaborative for Health Financing Solutions (ACS) platform is a five-year project funded by USAID and implemented by *Results for Development* (R4D). This project spans the 2017-2022 period and provides assistance to countries in Sub-Saharan Africa to stimulate progress towards Universal Health Coverage (UHC). Aware that UHC is a long and complex process, and that its achievement can only be attained through the leadership of African countries, R4D forged partnerships with African experts with sound knowledge of these countries' healthcare systems to implement its activities, working hand-in-hand with local African organizations. This approach, fundamental to the ACS project, also forms part of R4D's strategic vision of providing technical assistance in a different way. Rather than reproducing the traditional piecemeal assistance "fly-in fly-out" model, with a heavy focus on delivering discrete, and non-holistic technical solutions through individual projects, R4D seeks to support solid and inclusive processes led by the countries themselves, by investing in capacity building of local institutions and individuals.<sup>1</sup>

As the end of the ACS project (March 2022) draws near, it seems appropriate to take stock of these partnerships between the African Institutional Partners (AIP) and R4D, by systematically examining their implementation process as well as their strengths and weaknesses. The results of the study are useful in several regards. Firstly, they allow for lessons to be drawn and recommendations to be made, which other organizations who wish to use a similar approach can now use to develop and support partnerships with local organizations. Moreover, this study also contributes to the debate on decolonizing global health for which the main objectives, according to the Washington University International Center for Clinical Research, are: i) to undertake equitable collaborations, ii) to focus activities on local priorities, iii) diversification of leadership, and iv) promoting respectful and collaborative interactions and language/tone in all communications.<sup>2</sup> Finally, this study is timely because it occurs at a time where the donor, USAID, is in a process of reflection around strategies for local capacity development, whereby local actors will devise their own agendas, develop solutions and bring the necessary capacity, leadership and resources to implement these solutions.<sup>3</sup> The results of this study will therefore contribute to enrich reflections around this issue.

## II. Objectives

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### 1. General objective

Analyzing R4D partnership model with the AIPs as part of the ACS project.

### 2. Specific objectives

- Describe the development process of the partnerships between R4D and the AIPs.
- Identify the challenges and difficulties encountered, the conducive factors as well as lessons learned from setting up and working through these partnerships.

## III. Methodology

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### 1. Type of study and data collection period

This was a descriptive and analytical study, using a qualitative approach. The data was collected between December of 2021 and January of 2022.

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<sup>1</sup> 3 shifts are needed in the global health community's support for health financing to advance UHC. Disponible à : <https://r4d.org/blog/three-shifts-role-global-health-financing-support-advance-uhc-r4ds-two-new-initiatives-sub-saharan-africa-2/>

<sup>2</sup> Decolonizing Global Health Toolkit. Available at: [https://globalhealth.washington.edu/sites/default/files/ICRC%20Decolonize%20GH%20Toolkit\\_20210330.pdf](https://globalhealth.washington.edu/sites/default/files/ICRC%20Decolonize%20GH%20Toolkit_20210330.pdf)

<sup>3</sup> [https://www.usaid.gov/sites/default/files/documents/What\\_is\\_Locally\\_Led\\_Development\\_Fact\\_Sheet.pdf](https://www.usaid.gov/sites/default/files/documents/What_is_Locally_Led_Development_Fact_Sheet.pdf)

## 2. Data collection

### a) Data collection techniques and tools

Data was collected by way of a desk study and from key informants. The data from the desk study was collected using survey forms and the documents used included concept notes, minutes of meetings and email exchanges related to the setting up of partnerships between R4D and the AIPs. The data from key informants was collected according to their preferences, either through individual deep interviews using interview guides, or through self-administered questionnaires with the assistance of the same interview guides.

### b) Selection of organizations to survey

The study included R4D (who is the Prime contractor for the ACS project) as well as the five AIPs with whom R4D has signed contracts or partnerships as part of the project. Namely:

- African Medical and Research Foundation (AMREF) Health Africa, based in Kenya
- Research Center for Human Reproduction and Demography (CERRHUD), based in Benin
- Network for Access to Essential Medicines (RAME), based in Burkina Faso
- Research for Health and Development (RESADE), based in Burkina Faso
- Uganda Healthcare Federation (UHF), based in Uganda

### c) Selection of key informants

The key informants were selected from within R4D and the AIPs, within the leadership and core team of the ACS project at R4D and amongst the leaders and collaborators responsible for the implementation of project activities within the AIPs. All these key informants played a crucial role and/or were strongly involved in the implementation of partnerships. In total, 18 key informants were interviewed, of which 5 were from R4D and 13 from the AIPs.

## 3. Data analysis

The data collected was transcribed in a Word file and a thematic analysis was manually carried out.

## 4. Ethical and deontological considerations

Due to time constraints, it was not possible to develop a comprehensive protocol and submit it to a National or institutional Ethics Committee. However, all necessary measures were taken by the team in charge of conducting the study, to protect the confidentiality of the data collected. As such these were analyzed and presented in this report while preserving the anonymity of key informants.

# IV. Results

## 1. Process of setting up the partnerships between R4D and AIPs

### a) Genesis of partnerships

During the implementation of the ACS project, R4D entered into partnership with six AIPs in five countries: UHF in Uganda, RAME and RESADE in Burkina Faso, AMREF Health Africa in Kenya, CERRHUD in Benin and Synergos in Namibia. In most cases, these partnerships were established on the basis of former relationships and/or collaborations between R4D staff and the various AIPs, which resulted in the parties' willingness to enter into a sustainable collaboration. For example, in the past, members of certain AIPs and members of the ACS project had worked together as part of the Communities of Practice of the *Harmonization for Health in Africa* (HHA CoP)<sup>4</sup> initiative on issues pertaining to health financing, health information systems and local healthcare systems. There is also the case of AMREF Health Africa that was already in partnership with R4D as part of the *Strategic*

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<sup>4</sup> Harmonization for Health in Africa (HHA) is a mechanism enabling member agencies to work together to strengthen health systems in Africa. Partners are: The AfDB, JICA, UNAIDS, UNICEF, UNFPA, USAID, the World Bank and WHO. The main HHA CoPs include: financial access to health services, performance-based funding, provision of health services. For additional information on HHA CoPs, Consult: <http://www.santemondiale.org/2015/01/08/edito-les-communautes-de-pratiques-de-harmonization-health-africa-hha-des-smart-organisations/>.

*Purchasing Africa Resource Centre (SPARC) initiative*<sup>5</sup>. Therefore, partnership as a foundational aspect of the ACS project was to some extent an extension of preexisting collaborations, especially since the SPARC initiative shared certain ACS values – for example reinforcing and highlighting local and regional expertise in the service of African countries – and also partnered with some of the same AIPs. This proximity between members of R4D and the AIPs allowed for mutual trust to be built and facilitated the onset of informal discussions regarding the contribution that each actor, in an individual or institutional capacity, could bring to the implementation of the ACS project.

For certain AIPs, the partnership with R4D as part of the ACS project began with individual consultancy contracts, which gradually evolved into institutional partnerships. In concrete terms, R4D that requested each AIP develop a concept note on the possible areas of collaboration, according to their context and the areas covered by the ACS project. Cocreation meetings then took place between R4D and the AIPs to define the objectives and orientation of the partnership. Before the effective signing of institutional contracts and the commencement of activities, R4D provided technical support to certain AIPs to help them adapt and strengthen their administrative and financial procedures as well as their governance model to be in line with the requirements of Local Governments and those of USAID, as the ACS project funder.

However, it should be noted that beyond existing relations between members of AIPs and R4D, the ACS project had defined a certain number of criteria that the AIPs needed to meet in order to be considered. These criteria included:

- Sharing the vision, values, and approach of the ACS project
- Being an established local institution in countries supported by ACS, having sound knowledge of the local context and being able to identify the priorities and strategies of these countries in terms of UHC
- Having established relationships with UHC stakeholders and enjoying a sound reputation and legitimacy amongst UHC actors
- Being present in multiple countries receiving support from the ACS project and/or having the necessary capacity or experience to work and collaborate with actors in other countries/zones of the continent, to promote the sharing of experiences and knowledge
- Having proven expertise in at least one area of activity of the ACS project, in a complementarity perspective with other AIPs, to form a consortium enjoying technical, political and social competencies in relation to UHC within these countries.

#### **b) Factors which facilitated the setting up of partnerships**

Previous collaborations and the resulting mutual trust between R4D and the AIPs greatly facilitated the establishment of partnerships. Indeed, these preexisting collaborations were pivotal for R4D to target the AIPs or resource persons within the AIPs to involve them in ACS project activities. The various actors, through events such as workshops and conferences, slowly built solid relationships based on trust and a strong willingness to work together through the ACS project. This has facilitated the harmonization of vision and objectives, as well as the priority activities to be implemented as part of the project. Whenever a challenge appeared, the cocreation approach was taken to learn, identify the bottlenecks and set up new methodologies or strategies to overcome them.

#### **c) Challenges and difficulties identified in the process of setting up the partnerships**

Certain AIPs, owing to their preexisting links with R4D, their significant experience in managing USAID funded projects and the existence of solid administrative financial procedures and a governance model adapted to such requirements, did not encounter any particular difficulties in the process of setting up their partnership with R4D. By contrast, there were other relatively young AIPs or those that were not equipped with a governance model compliant with USAID requirements to allow them to receive funds from this donor. The main challenge therefore for these AIPs was to put in motion the necessary procedures, lengthy at times, to comply with USAID requirements – for which they benefitted from substantial technical support from R4D.

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<sup>5</sup> <https://sparc.africa/fr/>

From R4D' side, the major challenge was a lack of experienced human resources to facilitate and speed up the drafting of contracts with the AIPs. Indeed, certain R4D staff involved in the contracting process were new and had not fully understood the desired partnership model, which differed from traditional transactional partnerships. It was necessary to continuously coach these new team members so that they could quickly acquire the necessary experience to properly set up and monitor the partnerships between R4D and the AIPs. Furthermore, the differences in terms of procedures, internal organization methods, languages, and time zones with the AIPs have sometimes given rise to communication difficulties.

This lack of experience of the actors, when combined with the stringency of USAID requirements and the multitude of AIPs, have sometimes lengthened the contracting process, which ranged from six months to a year.

## **2. Expectations and spinoffs of the partnership for stakeholders**

### **a) Understanding the terms of the partnership by the AIPs**

Overall, the terms of the partnership were well understood and accepted by the AIPs and by R4D. In fact, many members of the AIPs already had some consultancy experience with R4D, which gave them an idea of the content of the contracts. For every document pertaining to the contract, R4D sent a draft so that the AIPs could make amendments and/or comments on the technical, administrative, and financial aspects. If needed, there were also exchanges via email, online meetings or via informal channels (WhatsApp, phone calls) through which the different parties had discussions to clarify the points needing further explanation. However, certain Francophone members of the AIPs who were interviewed had reservations as to whether they perfectly understood the terms of the contracts because the related documents are often written in English without a French translation. For these AIPs, the Francophone partners stated that they completely understood the terms of the partnerships, which did not exclude the possibility that certain details linked to the specific subtleties of legal jargon and the English language could have eluded them. It should also be noted that during the implementation, some questions on the strategic adjustments and/or the operational conduct of one or another activity or sub-activity did arise at times.

### **b) Expected benefits/obtained benefits**

#### ***On the AIPs' side***

From a personal and institutional standpoint, three main expectations emerged on the side of AIPs and pertained to: i) learning and capacity building, ii) the acquisition of additional financial and material resources, and iii) the extension of the partnership network.

#### *o Regarding learning and capacity building*

This expectation was linked to the fact that the majority of AIPs were young and/or did not have sufficient capacities in terms of administrative and financial governance to respond to the requirements of USAID, and to contend with competition in their quest for funding. R4D's assistance and support allowed many AIPs to improve their governance model in order to meet USAID requirements and to strengthen their operational capacities. Certain AIPs for example, benefitted from training sessions on how to manage USAID funds as the main recipient or subrecipient of funding. Furthermore, certain AIPs lacked knowledge in at least one activity area of the ACS project, which was gradually improved thanks to numerous exchange meetings and learning among AIPs and between R4D and the AIPs, both during physical and virtual workshops.

#### *o Regarding the acquisition of additional financial and material resources*

Certain AIPs, young and/or relatively small, did not possess the necessary financial means to recruit human resources and/or acquire certain material or logistical resources for their proper operation and expansion. The funding obtained through the ACS project, although relatively modest and at times acted as "seed money", allowing these AIPs to bridge these gaps, even if only by a small margin.



- *Regarding the expansion of the partnership network*

Many AIPs, through their partnership with R4D, were seeking recognition in terms of UHC at the local, regional and even global level, and also to expand their collaboration networks. Thanks to the activities and the experience gained during the ACS project implementation, nearly all the AIPs acknowledged that they had achieved these objectives. They have reinforced their local and regional position and legitimacy in the UHC domain. They have acquired increased credibility and have gradually entered into contracts with local governments and decision makers, as well as with other technical and financial partners that work in the UHC space. In the same way, the partnerships between different AIPs generated through the ACS project, have allowed them to get better acquainted and expand their collaboration network.<sup>6</sup> AIPs now envisage building long-term collaboration with each other beyond the ACS project, further strengthening and bringing to the fore African institutional expertise in the health systems.

### **On the R4D side**

Overall, R4D's expectations were identical for each AIP. However, depending on their context and areas of expertise, slight differences existed between one AIP and another. Here are the main R4D expectations:

- Building the institutional memory to carry ACS project approaches forward in the country in a sustainable way, to facilitate activities and to structure and strengthen a multi-sectoral dialogue on UHC through inclusive dialogue fora.
- Serving as technical lead in the development and implementation of accountability strategies and activities and communicating on the effectiveness of activities and approaches promoted through the project (for example the collaboration between the public sector and civil society organizations to advance UHC) by relying on their collaboration networks at the national and regional levels.
- Documenting the activities and approaches promoted by the ACS project, thanks to a thorough methodological approach, in order to produce evidence of their effectiveness and broaden their use.
- Establishing a source of learning for the R4D team and share their experiences with them.
- Putting in place a spirit of collaboration based on regular communication and the willingness to innovate.
- Strongly committing to the ideals pursued by the ACS project.
- Producing excellent quality deliverables within the set timeframes.
- Developing a consortium of AIPs where mutual learning and collective action is the norm, with long-term collaboration prospects (beyond the ACS project).
- Reinforcing institutional and technical capacities at the end of the ACS project.

Upon completion of the ACS project implementation, R4D had an overall appreciation of the achievements made thanks to the deep local partnerships of the consortium. In fact, R4D learned a great deal from the AIPs through the various interactions, training sessions and sharing of experiences. Moreover, the AIP's rate of implementation of ACS activities was satisfactory. This was facilitated by their sound knowledge of local contexts and their geographic proximity with the governmental actors. In addition, the leadership that local actors brought to the fore in the implementation of the ACS project constituted a source of efficiency for R4D. In fact, the R4D team was able to coordinate the implementation of the ACS project in several countries simultaneously, while making very few physical trips that would have required additional resources. Certain AIPs even hosted part of the R4D team through office space, thus bringing them closer to countries involved in the project but also fostering and reinforcing institutional collaboration.

However, some deficiencies were noted. This concerns low levels of participation and insufficient ownership of certain project activities by certain AIPs, which has thus required a larger (and unexpected) involvement than planned from the R4D team in the activities led by these AIPs. Also,

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<sup>6</sup> These partnerships among different AIPs are also the subject of study within a separate report.

certain AIPs sometimes seemed to give ACS project activities low priority, while prioritizing activities of other projects, which led to delays in the production of certain deliverables.

### **c) Sustainability of benefits or gains**

Sustainability remains a significant challenge for projects such as ACS, funded over a relatively short period. However, R4D as well as all of the AIPs believe that the ACS project leaves behind a very rich legacy such as the reinforcement of capacities and the provision of knowledge/evidence, tools and procedures, amongst others. In order to sustain and even build on this legacy, the ACS project has supported a process of formalizing the consortium made up of the AIPs. This will culminate in the signing of a Memorandum of Understanding, which was been drafted collectively. It is thus now incumbent on the AIPs to keep up their collaboration beyond the ACS project. Three elements in particular favor the sustainability of the gains of the ACS project.

The first element is the fact that UHC remains a priority issue for African governments. As it turns out, the various AIPs involved in the ACS project have made a name for themselves at the national and even regional level, on the subject of UHC, positioning them well as potential counterparts for decision makers and partners in the debates over UHC at the national and sub-regional level. Therefore, the resources and tools developed as part of the ACS project can continue to help guide the debate and inform decisions and support to speed up the countries' journeys towards UHC.

The second element, linked to the first, is the creation by the AIPs of UHC resource hubs to host the resources, knowledge products and tools generated by the ACS project. These resources could be updated and enriched on an ongoing basis, according to the needs of the various countries, with the aim of informing the development of programs and policies to speed up the process towards UHC. Furthermore, it would be desirable for these hubs to form a network, to eventually complement one another.

The third element is the reinforcement of institutional and individual capacities acquired thanks to the ACS project. The ACS project created many exchange and learning fora which allowed the different AIPs and R4D to share their expertise and experiences, and also to learn from one another. Also, R4D enabled many AIPs to set up a governance model meeting donor requirements, in addition to strengthening institutional capacity both in terms of material and human resources. The AIPs should make use of these acquired capacities, skills, and experiences to speed up their institutional development and to grow their partnerships and funding.

## **3. Balance within the partnerships between R4D and the AIPs**

Overall, R4D and AIP collaborators interviewed indicated that they found their partnerships as part of the ACS project to be balanced. However, certain challenges or difficulties that could shift this balance to the disadvantage of AIPs were identified.

### **a) Factors conducive to balanced partnerships**

The balance of the partnerships between R4D and AIPs stems primarily from the very vision of the ACS project, articulated around capacity building of African countries through a cocreation approach in order to speed up their advancement towards UHC. To this end, activities of the ACS project were generally defined in a collaborative manner between R4D and the AIPs, characterized by a large amount of flexibility in their implementation – horizontal collaboration was always prioritized as opposed to an imposed top-down approach. Previous collaborations between members of R4D and the AIPs, as well as mutual trust amongst them, made it possible for them to freely express their opinions and to demonstrate 'creativity' in a convivial atmosphere characterized by mutual respect.

### **b) Obstacles to a balanced partnership**

A few AIPs members highlighted the power imbalance deriving from a resource transfer-based relationship that is illustrated by "the hand receiving is always slightly below the hand which gives". As the prime contractor for ACS, R4D, naturally, is in a position of strength in relation to the AIPs, since

certain major decisions, notably of a financial order, would be submitted directly to the AIPs without any real margin for amendments.

This situation was confirmed by R4D who recognizes that, at times, there has been a lack of equity in the distribution of resources to the AIPs. Indeed, the allocation of resources was not always commensurate with the workload of each AIP. This was largely due to USAID rules that inherently favor certain AIPs based on criteria such as their years of experience, overheads, or their size. However, R4D highlights that efforts were made to make budgetary adjustments up or down to adapt the AIPs budget as much as possible to their activities.

#### **4. Communication among actors during the partnership**

##### **a) Quality of communication (level of interaction among the players)**

Quality of communication between R4D and the AIPs was very high, regular, clear, efficient and open, as stated by most surveyed actors. Before the advent of the Covid-19 pandemic, actors were able, in addition to remote (or virtual) meetings, to hold physical meetings to discuss strategic orientations and/or assess the ACS project, a process which contributed to the strengthening of their mutual trust and friendship. In the context of Covid-19, all physical meetings were suspended, and remote communication was used exclusively to maintain efficient communication. “Pause and Learn” workshops, whether physical or virtual, were an opportunity for open and candid discussions and for evaluating the ACS project in order to identify what worked well, but also bottlenecks, in order to clear them and to facilitate and improve ongoing project implementation.

In fact, there were no obstacles to communication since each party was free to contact the other should the need arise, via formal or informal communication channels. To ensure progress on ongoing implementation of activities, R4D agreed on a regular update meeting with each AIP, weekly, monthly or bi-monthly depending on the needs. At times, the R4D team sent reminders, always courteous, when it realized an activity was not implemented within the initially agreed timeline.

This high-quality communication contributed to the early detection of bottlenecks at all levels of the partnership and to seeking to rectify them collectively.

##### **b) Communication means/mechanisms put in place/utilized**

Communication channels used by R4D and the AIPs were diverse and included, in addition to face-to-face interactions, e-mails, online meeting platforms such as Zoom and Skype, WhatsApp, as well as standard telephone calls. Efforts were also made, during important meetings, to systematically provide an interpretation service between English and French.

#### **5. Strengths and weaknesses of the partnership between R4D and the AIPs**

##### **a) Strengths of the partnership**

A major strength of the partnership between R4D and AIPs as part of the ACS project was the cocreation approach when defining and implementing activities, which afforded the AIPs the opportunity to adapt them to local contexts and fostered a feeling of shared responsibility in achieving results. This approach, boosted by mutual trust and respect, made it possible to break down classic hierarchical relationships that exist between a technical and financial partner and a local organization. In this regard, the ACS project was a conducive framework for bi-directional exchanges and learning and mutual enrichment for all stakeholders. From R4D’s standpoint, the varied profiles of AIPs constituted a rich source of complementarity to provide the multifaceted technical assistance that the ACS implementation countries needed. As such, the AIPs were made up of research and/or academic institutions, NGOs and CSOs based in Anglophone and Francophone Africa, all working in synergy to produce quality products.

### **c) Weaknesses of the partnership**

Resources mobilized as part of the ACS project were relatively limited, which hindered the capacity of AIPs to always invest sufficient time on the project's activities. In fact, it came out of interviews that overall, the workload was too high for the AIPs in relation to the budget each received, sometimes accumulating overtime days while working on ACS. It is likely that this situation was due to an underestimation of the time and financial resources required to carry out these activities. This sometimes led to lower involvement in the ACS project where certain tasks were entrusted to junior personnel with less experience.

Another highlighted weakness relates to the means implemented to overcome the linguistic barrier during exchange and learning meetings. Indeed, when surveyed, certain respondents stated that translation/interpretation services weren't always available to enable them to have access to the same level of information.

Also, the signing of partnerships between R4D and some AIPs, in particular the last ones to be involved in the ACS projects, was not always preceded by proper clarification, and understanding of mutual expectations as set out in the work plan, which sometimes led to difficulties in the implementation of certain activities.

Finally, the Covid-19 pandemic with the various restrictions it caused, limited inter-personal interactions across the partners and decreased their motivation. Indeed, physical meetings involving actors from various backgrounds tend to foster intermingling, a higher level of concentration during brainstorming sessions, and a higher level of motivation for engagement. Virtual meetings were not as successful in drawing the full attention and productive participation of across the AIPs.

## **V. Lessons learned**

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- Relationships based on trust and shared engagement among various partners are key assets for the success of partnerships such as those between R4D and the AIPs. They facilitate exchanges to harmonize visions and approaches used to carry out activities.
- Clear communication and understanding of respective expectations are essential prerequisites for an efficient collaboration and successful implementation of activities as part of a multi-institutional partnership, such as that between R4D and the AIPs.
- The cocreation approach is both innovative and an asset to facilitate a strong commitment of the various partners, to ensure the successful implementation of activities as part of endeavors such as the ACS project.
- Financial, time, human and technological resources required to reach the goals of the partnership, need to be properly estimated and taken into account to ensure the successful completion of the activities each partner is leading.
- The specificities pertaining to each AIP in terms of vision, size, organizational culture, internal processes or internal decision-making processes, have to be analyzed and factored in at the outset of partnerships, in order to take them into account in the allocation of resources and to better specify expectations and support to setting up the partnership.

## **VI. Recommendations**

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In order to improve the effectiveness of such partnerships, the following recommendations can be implemented:

- Foster relations based on trust by maintaining frequent interactions between the various stakeholders in order to increase the effectiveness of partnerships.
- Set up a sound strategy of communication and regular monitoring to ensure that every actor carries out their tasks in line with their mandate.
- Promote a cocreation approach while putting particular emphasis on balanced and equitable partnerships.

- Grant adequate funding to AIPs that reflects their actual engagement and workload in order to keep them motivated and for a greater effectiveness of the partnerships.
- Ensure that the partners possess a governance model and/or adapted infrastructure that will enable them to be successful in the partnership. If needed, set in motion early on a process to ensure continuous support, to identify hurdles to favor seamless implementation.
- Make sure that all stakeholders properly understand the vision, as well as the terms of the partnership, before committing to it.

# Annexes

## Annex I – Interview guide R4D ACS Project managers

### The process of setting up partnerships between R4D and local African institutional Partners (AIP)

1. How many local African Institutional Partners (AIP) in total have you entered into partnership with over the implementation of the ACS project (*specify the name, the host country and the partnership duration*)?
2. How did you make contact with the AIPs? Which criteria did you use to select with whom you entered into partnership?
3. For each of the AIPs with whom you have entered into partnership, what are the major challenges and difficulties you have encountered during the process of setting up the partnership?
4. For each of the AIPs with whom you have entered into partnership, which factors facilitated the setting up of this partnership?

### Implementation of partnerships between R4D and the AIPs

5. What were your expectations from each AIP you entered into partnership with?
6. Were your expectations fulfilled? What are your grounds for satisfaction? Explain and/or provide examples.
7. For each of these partnerships, what are the main benefits for the ACS project and R4D that you can think of? (Including any positive outcomes which you did not expect)?
8. For each of these partnerships, what are the main benefits for the AIPs that you can think of (Including the positive outcomes which you did not expect)
9. For each of these partnerships, what are the main deficiencies that you can think of (including weaknesses or deficiencies which you did not expect)?
10. In particular, is the partnership which R4D signed with each AIP equitable or balanced according to you (i.e.: does not favor R4D over the AIPs)? Explain and/or provide examples.
11. What are the factors which fostered a balanced partnership between RD and each of the AIPs as part of the ACS project?
12. What could the obstacles to a balanced partnership between R4D and each of the AIPs be? How were these obstacles prevented or mitigated?
13. How would you rate communication between R4D and each of the AIPs throughout the implementation of each of these partnerships?
14. In particular, which mechanisms were developed or put in place by R4D to take into account the viewpoints, insights, expectations and concerns of the AIPs? How do you rate their effectiveness? Explain and/or give examples.
15. For instance, were decisions to be implemented always the result of consultations? Did you sometimes have to impose or dictate certain things in order for activities to be carried out? Explain and/or provide examples
16. Which major lessons can you draw from these partnerships? What in your view gave good results or worked well and would deserve to be replicated for similar partnerships? What in your view didn't work as well and would deserve greater attention in future for similar partnerships?
17. In your view, what is it which overall, was lacking in order for the partnerships between R4D and each AIP to be even more effective, in relation to your expectations?
18. What would you propose therefore, to make future partnerships such as those R4D entered into with each of the AIPs more effective in relation to your expectations?

## **Annex 2 – Interview guide for Local African Institutional Partners (AIP)**

### **The process of setting up Partnerships between R4D and the AIPs**

1. Can you explain how you came into contact and entered into partnership with R4D as part of the ACS project?
2. What are the highlights which punctuated the process which led to the setting up of this partnership?
3. In particular what are the major challenges and difficulties you have encountered during the process of setting up this partnership?
4. Which factors facilitated the setting up of this partnership?

### **Implementation of Partnerships between R4D and the AIPs**

5. Are the terms of the partnership (Or contract) which your organization signed with R4D as part of the ACS project clearly understood by all the members of your organization involved in the project? Explain and/or provide examples.
6. Which benefits did you expect when you entered into partnerships with R4D as part of the ACS project, both from a personal as well as an organizational point of view?
7. Were your expectations fulfilled? What is it in your view that was missing to make the partnership between your organization and R4D, as part of the ACS project, even more effective in relation to your expectations? Explain and/or provide examples
8. What are the main benefits/gains that you have drawn from this partnership with R4D as part of the ACS project, both from a personal and organizational point of view? (Including benefits/gains which you did not expect)?
9. What are your grounds for satisfaction? Which comparative advantages do you see in relation to similar types of partnership (i.e.: what is the difference between this partnership and other partnerships)
10. How would you rate the sustainability of these benefits/gains? Explain and/or provide examples.
11. In your view, is this partnership your organization signed with R4D as part of the ACS project, equitable or balanced (i.e.: does not favor R4D over your organization)? Explain and/or provide examples. (Survey, dialogue, transparency, respect).
12. What are the factors which contributed to a balanced partnership between your organization and R4D as part of the ACS project?
13. What have the obstacles been to a balanced partnership between your organization and RD as part of the ACS project? In your view, how were these obstacles prevented or mitigated?
14. How would you rate communication between R4D and your organization throughout the partnership implementation?
15. More specifically, did R4D put mechanisms in place to take into account your viewpoints, insights, expectations, and concerns? At which stages? If so, how would you rate their effectiveness? Explain and/or provide examples.
16. More specifically, were decisions always the result of consultation? Did you have the feeling that the goals/ activities were defined together and not dictated or imposed by R4D? Did you have the feeling of being on equal footing? Did you always have the capacity of saying no? Explain and/or provide examples.
17. Overall, which main lessons can you draw from this partnership with R4D as part of the ACS project?
18. In particular, what in your view worked well and would deserve to be replicated in future for similar partnerships?
19. Also, what are the main weaknesses or deficiencies you can identify regarding this partnership with R4D as part of the ACS project? What did not work so well?
20. What would you propose to ensure that in future, partnerships such as those between R4D and your organization as part of the ACS project are even more effective in relation to your expectations?