STOP TB PARTNERSHIP PRIVATE SECTOR CONSTITUENCY (PSC)

Progress report on PSC Business Engagement Strategy implementation and financing structure April 2010

1. Introduction

The Private Sector Constituency has been part of the Stop TB Coordinating Board since October 2004, and was supported by a Secretariat based at the World Economic Forum until 2009. The Coordinating Board has discussed the future direction and engagement with the private sector at its meetings in Bagamoyo (Oct. 2008), Rio (Apr. 2009) and most recently in Geneva (Nov. 2009), where it endorsed the proposed PSC Business Engagement Strategy and action plan¹, and recognised the need to fund a Focal Point (1 FTE for 12 months based at WHO Secretariat) to ensure the implementation of the PSC strategy. In order to provide support for the follow up on implementation of specific action items, the Secretariat engaged a short-term consultancy project to facilitate the process.

2. Objective of the consultancy

The consultancy was commissioned by the Private Sector Constituency (PSC) with funding from the Stop TB Partnership Secretariat to provide support for the implementation of recommendations outlined in the PSC Business Engagement Strategy and the 17th Coordinating Board meeting decision 2.09-7.0.

In particular, it focused on

- Implementing a tiered funding structure for PSC members who have expressed an interest in the new membership structure
- Ensuring the PSC Core Group is constituted as per the Board decision
- Providing a service to the PSC members while the contributions are received for the management of the constituency.

The consultancy was carried out between March and May 2010.

3. Proposed tiered financing structure

The Private Sector Constituency (PSC) of the Stop TB Partnership presented its strategy during the 17th Coordinating Board meeting held in Geneva on 5-6

¹Business Engagement Strategy for the Stop TB's Private Sector Constituency, available at http://www.stoptb.org/assets/documents/about/cb/meetings/17/2.09-07.1%20PSC%20strategy%20paper%2025oct09.pdf

November 2009².

The decision of the Board was to endorse the strategy and mandate the Partnership Secretariat to allocate a proportion for the first year of the funding to have a fully dedicated staff member as the focal person for the PSC. In order to fund the staff person, it was also agreed to develop a sustainable contribution scheme which would allow members of the PSC to get more involved and also benefit more from its activities.

In order to ensure sustainable financing for one full-time equivalent (FTE) staff person, member companies were asked to contribute either 10,000 USD or 5,000 USD per year. This tiered contribution scheme allows companies to determine what level of involvement they wish to take, and in return benefit from services provide by the Focal Point.

- 1. Members contributing 5,000 USD per year will benefit from having a dedicated staff member serve as a match-maker, networking contact and receiving information on the latest initiatives and opportunities for collective action in the fight against TB.
- 2. Members contributing 10,000 USD per year will benefit from having a seat on the Core Group of the PSC of the Partnership. The Core Group will be the decision making body which will decide on the strategic direction in which the constituency should go. The Core Group will also decide on the implementation of the strategy and work plans of the constituency, including specific projects and proposed initiatives with other corporate partners.

In order to streamline and optimise efficiencies, the number of Core Group members is limited to 10 (companies and business or trade associations).

In addition to the above structure, the role of business coalitions in coordinating the efforts of their member companies is recognised as key in engaging new companies in the Stop TB movement. It was decided to provide an opportunity for business coalitions, which are not for-profit corporate partners, to be able to participate in the Core Group of the PSC.

Business coalitions are able to become Core Group members if they engage at least 5 new companies to become members of the PSC and these companies agree to make the annual contributions of at least 5,000 USD per year. In the event that a company has already signed up individually, the business coalition will not be able to count this towards the 5 new companies that have been brought in as new members.

² http://www.stoptb.org/cb/meetings/20091105%5FGeneva%5FSwitzerland/

In particular, the crucial role that the Global Business Coalition for HIV/AIDS, TB and Malaria (GBC), World Economic Forum (WEF), and International Business Leaders Forum (IBLF) can play in encouraging their members to dedicate resource and focus on addressing TB was acknowledged. Views from these groups have also helped shape the strategic direction of the PSC during the recent changes, and future collaboration with them should be a priority for the PSC.

4. Viability of company contributions

In order to analyse the viability of the proposed tiered membership structure, the consultant carried out a comprehensive review of the current PSC membership base as identified by the Private Sector Constituency, Stop TB Secretariat and the previous Focal Point coordinator, World Economic Forum.

In addition, private sector representatives who have participated in the Stop TB Partners Forum in Rio in 2009 and recent TB-related events organised by the Global Business Coalition for HIV/AIDS, TB and Malaria (GBC) as well as individuals who attended the Pacific Health Summit, were included in the initial analysis of potential companies to be approached and who would be in a position to provide funding to the Secretariat.

In total, 214 individual representatives from approximately 140 private sector organisations were approached as part of the consultancy. Almost one in four individuals were not reachable because they had either moved on, were no longer involved in TB-related activities or their companies were no longer operating or actively involved in TB. In addition, some 45 individuals were included in the PSC through their affiliation with the India Business Alliance³, a coalition of local Indian companies involved in efforts to fight TB in India, which was previously coordinated by the World Economic Forum.

Another observation about the private sector partners listed on the Stop TB Partnership directory is that many of them have never been involved in any PSC activity in the past, and tend to either participate in Working Group activities that are relevant to their core business, or have not made further contact after obtaining membership. This issue was further discussed in the original business engagement strategy⁴ which also included some specific recommendations on how to engage these partners in the future.

After consultation with the PSC Board representatives, the consultant decided to

³ India Business Alliance to Stop TB (IBA), led by Dr Shaloo Puri Kamble, World Economic Forum, Global Health Initiative, http://www.weforum.org/pdf/India/IndiaBA.pdf

http://www.stoptb.org/assets/documents/about/cb/meetings/17/2.09-07.1%20PSC%20strategy%20paper%2025oct09.pdf

prioritise a group of 30 multinational or regional companies (see Annex 1) that have current involvement in TB, either as a healthcare company (e.g. discovery, development and distribution of TB treatments) or non-healthcare company (e.g. workplace policies and practices, community involvement), and which have the potential to make an impact on the PSC efforts on a broader scale.

In addition, follow-up conversations have been scheduled with the two main business coalitions GBC and WEF to determine what level of engagement and collaboration can be envisaged with them. For example, the WEF may continue to play a role in engaging local Indian companies through its existing connections, and GBC has significant regional activity and contacts in place in Africa and China, and would be a valuable partner in efforts to engage private sector companies in these regions.

5.1. Progress to date – cost-sharing exercise

By April, a core group of nine companies is involved, with additional 20 who have indicated strong interest but are not in a position to contribute financially in 2010. Some of these companies are already contributing significant resource (either direct dollars or in-kind donations) to global health, through organisations such as Global Fund, or indeed directly to the Stop TB Partnership.

As a result, the level of cost-sharing requested by the Coordinating Board has been achieved, and a new Core Group of companies has been established. This group held its initial meeting in April and has started to discuss ways to implement a set of priority actions and discuss priorities for 2010.

At the time of writing, discussions with some companies are still ongoing, so the final number of companies is expected to increase as the PSC starts to implement its engagement strategy.

5.2. Progress to date – other action items

The PSC Business Engagement Strategy, as approved by the Coordinating Board, included a number of recommendations that were developed as part of the original consultancy. These ideas and frameworks were developed to address the challenges identified in the strategic plan, and were proposed as ways to continue engagement of current and potential new members.

Following the discussions at the Coordinating Board, the main focus of the PSC and the previous Core Group has been on resolving outstanding issues around the Focal Point. It was recognised that significant progress on other action items can only be made once a Focal Point is in place. However, a small number of companies, under the leadership of the elected Board Representatives have worked to progress other action items that were prioritised following the Board

meeting in November 2009. In particular, the principles of engagement are currently being revised, and the value proposition is being developed following feedback from PSC members.

The priority for the current PSC team is to create a re-energised organisation with a focal point ahead of the upcoming PSC elections in autumn of 2010, as well as have a strategy in place with concrete action items which can be delivered during this year.

Table 1 – Action items and recommendations arising from PSC Business Engagement Strategy

Action item	Progress to date and comments	Timeframe
Resolve the PSC Focal Point issue	 Coordinating Board approved cost- sharing for Focal Point initially for 12 months Companies have agreed to contribute towards Focal Point New core group established 	Sept 2009 – Mar 2010
Improve information flow and communication	Feedback from Board decision has been communicated to existing PSC members	Nov 2009 – Mar 2010
	 Regular teleconferences continued with previous Core Group until Jan 2010 	
	 Consultant has contacted PSC members to engage them in delivery of PSC strategy 	
Develop financing strategy	Tiered financing strategy devised to target companies and business associations	Starting Nov 2009
	 Feasibility of company contributions explored with current PSC members 	
Campaign for new members	Comprehensive review of current PSC membership completed	Jan – Dec 2010
	Value proposition piloted with current PSC members	
Draft and adopt	Partners Charter exists in draft	Mar – Sept 2010

PSC Principles of Engagement and a Partners Charter	format	
Maximise PSC representation strategically	 Current involvement in working groups has continued, but further engagement needs to take place once Focal Point is recruited 	Mar – Sept 2010
Engage members, evaluate proposals	First core group meeting held to discuss priority areas of action	Mar – Dec 2010
Document private sector contributions	 Not yet started – waiting for Focal Point 	Starting Mar 2010

6. Value proposition

In addition to resolving the issues around Focal Point, defining the value proposition should be a priority as a number of companies have asked specific questions during the consultancy on value they can bring, and expect, to and from the Stop TB Partnership.

The reasons for companies to engage in the Stop TB Partnership are explored and discussed fully in the PSC engagement strategy, but some of the specific issues that have been raised during this consultancy are referred to below.

Specifically, there seems to be a need to develop a collective value proposal that meets the needs of the broad range of companies that are involved in the Stop TB Partnership, including both health and non-health companies.

In addition, each company will have a more specific rationale or set of drivers for getting involved, and it should be the role of the Focal Point to make sure that these are identified, discussed and potential benefits for each company are delivered on a sustainable basis. This will, in turn, ensure that companies remain engaged in the Partnership and contribute to its success on a longer term basis.

Value proposal for companies - expectations:

- Access to networks, information and knowledge
- Information and support in implementing workplace programmes or employee health initiatives
- Value for CSR initiatives and programmes
- Tangible recognition to take back to headquarters
- Provide opportunities for future collective actions and collaborative initiatives

Potential solutions from the Focal Point:

- Advocacy materials for private sector
- Increased access and referrals to networks, meetings, experts in Stop TB
- Acceptable levels of recognition, acknowledgement, public relations criteria
- Investing in logging and recognition of PSC contributions
- Match-making of companies and projects/initiatives

7. Further engagement of PSC

The Stop TB Partnership has suggested 2010 as the year of innovation which was one of the themes used for advocacy around the World TB Day in March 2010. Private Sector, by its nature, succeeds or fails from innovation, and the PSC intends to use the momentum to stimulate the creativity and resourcefulness of its members in the fight against TB. The Core Group and the Focal Point will play a central role in determining which actions the Private Sector Constituency will take in the coming months.

Finding and funding of the Focal Point is a crucial element in carrying forward and implementing the recommendations contained in the PSC Business Engagement Strategy. A dedicated Focal Point will be able to take on the responsibility of further developing the Private Sector Constituency into a dynamic and valued vehicle for business engagement in the Stop TB Partnership.

Specifically, the PSC Focal Point is to carry out the following responsibilities:

- acting as secretariat and first point of contact for members of the PSC;
- coordinate constituency and core group meetings;
- further define the collective and individual value propositions for companies;
- manage the PSC (including elections of PSC representatives to the Coordinating Board);
- serve as a match-maker for members of the constituency;
- help implement activities of the strategy.

In addition, the support of the PSC leadership – the two elected representatives and members of the Core Group – will be crucial while the PSC engagement strategy continues to be implemented, and while future funding commitments are sought beyond the initial 12-month period.

8. Conclusion

Great potential exists to strengthen the partnership base in the Private Sector Constituency, and much has already been achieved. The Stop TB Partnership

looks to the PSC to provide needed input on existing and new tools, to contribute know-how and resources, and to help engage more companies that are willing to contribute in the fight against TB through their core competencies and comparative advantages in their industry/trade.

However a key driver for further engagement is development of a clear value proposition and how to engage existing and new members, and how to provide specific actions items and ways for further engagement to companies who are committing their resources to tackle TB.

Annex 1 – Private Sector Constituency Core Group, April 2010

Company	Main representative(s)	Contact email
AstraZeneca	Dr Aileen Allsop	Aileen.allsop@astrazzeneca.com
Becton- Dickinson	Detlef Siewert	Detlef Siewert@europe.bd.com
Cellestis	Paul Lebeau	plebeau@cellestis.com
Chevron	Ernesto de la Torre	EDeLaTorre@chevron.com
Heineken	Dr Herbert Schilthuis	herbert.schilthuis@heineken.com
Institute Merieux	Dr Christine M'Rini	Christine.mrini@institut- merieux.com
Kempinski Hotels	Anne Marie Bettex	Anne- Marie.Bettex@kempinski.com
Roche	Dr Marcel Gmuender	marcel.gmuender@roche.com