



Strategic Plan

2006 – 2011

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I

Introduction

1.1 The global health landscape has changed dramatically in recent years. The health of the world's growing population is increasingly influenced by globalization, the emergence of new pandemics, an exponential rise in regional and ethnic conflicts and widening inequalities in health and socio-economic status. Organizations like the Canadian Society for International Health (CSIH) must understand and adapt to these remarkable global shifts in order to maintain their ability to improve health in the international arena. They must reconsider both *what* they are doing, and *how* they are doing it.

1.2 In the face of these tremendous changes, CSIH recognized a need to reflect on its internal structure and its organizational approach so that it may operate strategically in the future. CSIH staff, members of the Board and members of the Executive were involved in a wide series of internal and external consultations to assess organizational strengths and weaknesses, to identify competition and opportunities and to draw on the collective wisdom and experience of various leaders in global health.

1.3 This strategic plan is the result of that effort. It outlines an exciting and compelling future for CSIH, building on past experience and calling for an expanded vision and a re-focused mission. It is a plan that prepares CSIH for a stimulating period of renewal and growth.

II

Historical Context

2.1 CSIH was founded in 1977 by a group of tropical medicine specialists. They were responding to a need for medical advice and treatment for Canadians traveling and working in tropical areas. Initially, the organization was known as the 'Society for Tropical Medicine' and was part of the Canadian Public Health Association. In 1988, the Society became an independent organization and changed its name to CSIH. Between the early 1990s and 2005, CSIH grew from 3 staff and 100 members to 24 staff and over 600 members. Today, CSIH's membership includes individuals and organizations representing a broad range of disciplines from health and the social sciences to economics and law. Since its creation, CSIH has relied heavily on the work of volunteer members for its Board of Directors, technical advisory committees, annual conference planning, administrative activities and for general support of its projects. Members also help link CSIH with other organizations in Canada and abroad.

2.2 Over the years, CSIH has consistently supported Canadian organizations in their work as promoters of international health and development. The Society has also implemented and managed its own projects around the world, encouraging capacity building and health sector reform. Its partner countries have included Armenia, Azerbaijan, Bolivia, Croatia, Georgia, Guyana, the Philippines, and Ukraine.

III

Identity and Values

3.1 CSIH is a registered, Canadian, not-for-profit organization and is not surprisingly a values-driven organization. Its membership comprises individuals and organizations from across Canada and around the world, all sharing an interest in and commitment to global health. Common values, beliefs and guiding principles motivate the members, inspire relationships and also shape the work of CSIH in terms of *what* it does and *how* it does it. These shared values, beliefs and principles include:

- 3.1.1 the belief that health is a fundamental human right;
- 3.1.2 the belief that solidarity guides our actions in the international arena;
- 3.1.3 the belief that synergy of effort, strategic partnerships and well defined objectives are critical ingredients to achieving sustainable change;
- 3.1.4 a shared understanding of the importance of "organizational learning"- that is, systematically building on previous experience in the continuous pursuit of excellence;
- 3.1.5 a commitment to social justice and equity;
- 3.1.6 perceiving diversity as an asset;
- 3.1.7 basing collaboration and partnerships on transparency, integrity, and reciprocity.

3.2 CSIH members experience these core values, beliefs and guiding principles together and accept the ongoing challenges faced in translating these into daily practice.

IV

Vision

4.1 CSIH envisions a world in which Canada and other members of the international health community fully embrace their ethical obligations to effectively use knowledge for the reduction of health inequities and to increase social justice globally.

V

Mission

5.1 CSIH's mission is to lead the Canadian and international mobilization of knowledge and resources to facilitate innovation and excellence in global health.

VI

Strategic Niche

6.1 *Facilitation and enablement* have emerged as the new strategic foci for CSIH. They will be the heart of CSIH in coming years as the Society becomes the meeting point, the inter-section for various communities of practice, interest and concern across Canada that are engaged in matters of global health.

6.2 While developing this strategic plan, the involved parties sought to understand and articulate CSIH's strategic niche given its history, current programs, core-competencies and membership. What contribution is CSIH best suited to make to distinguish it from other Canadian NGOs involved in global health? Two factors contributed to the decision to move towards facilitation and enablement:

6.2.1 The success of CSIH's annual Canadian Conference on International Health (CCIH) pointed to the possibility of CSIH engaging in facilitation and enablement services. The achievement of this international event is largely the unique breadth of the attending membership and their increasing use of the conference as a meeting place to discuss crosscutting global health issues; with such varied contributors, the conference is truly one-of-a-kind.

6.2.2 CSIH already promotes a collective agenda rather than that of a single NGO. Its broad constituency brings a multi-disciplinary focus to global health issues and further facilitation of this dialogue seems like a natural fit for the Society.

6.3 CSIH's vision for the growth and expansion of its facilitation/enablement services is therefore a logical addition, considering what is already being done at the CCIH and similar CSIH networking activities. The concept of further work in this area is highly compelling- there is great potential for innovating and expanding CSIH's ability to bring together, facilitate and enable its membership and the broader international health community both in Canada and around the world.

VII

Services

7.1 In the next five years, CSIH will strategically organize its services into two broad categories:

7.1.1 Facilitation/Enablement Services

7.1.2 Project Implementation/Technical Assistance

7.2 Facilitation/enablement and project implementation/technical assistance will be linked by a strong feedback loop in that lessons learned, models, tools, and best practices generated by the

facilitation/enablement activities will be used in CSIH's own projects after being compiled, compared, analyzed and discussed. In a way, CSIH projects will become opportunities to 'double check' lessons learned via facilitation/enablement so that they may then be permanently included in a common body of knowledge (a formal document of lessons learned). Conversely, lessons learned, models, tools, and best practices that are developed and tested in the project implementation/technical assistance sphere will feed facilitation/enablement activities as part of the same body of organizational knowledge.

7.3 Facilitation/Enablement Services

7.4 Facilitation, networking and public dialogue are not new to CSIH, as evidenced in the CCIH. However, much of CSIH's previous facilitation work was an "add on" to project work, which has become the core and almost exclusive work of the CSIH, in large part as a result of funding needs. A shift to more facilitation/enablement work will allow CSIH to engage in a more effective exchange of information, as well as learning via collaboration and the fostering of strategic alliances and partnerships. By mobilizing and facilitating deeper and stronger linkages between and across the international health communities in Canada, exciting opportunities will emerge for shaping a more coherent and effective Canadian voice in global health.

7.5 Therefore, CSIH will shift its organizational focus to the following 5 types of facilitation services:

- 7.5.1 meetings, special events and networking
- 7.5.2 public dialogue
- 7.5.3 information gathering and dissemination
- 7.5.4 capacity strengthening through education, learning and knowledge translation
- 7.5.5 mentoring and enabling the involvement of individual Canadians in global health issues

7.6 For each of the services above, CSIH will design programs and activities to target the following groups across Canada who have a vested interest in global health issues:

- 7.6.1 NGOs
- 7.6.2 academic and research institutions/centers
- 7.6.3 national and provincial bodies and professional associations
- 7.6.4 federal, provincial and local ministries of health and health agencies/institutions
- 7.6.5 individual Canadians

7.7 CSIH's success in facilitation/enablement will be measured by the extent to which it bolsters a collective Canadian voice for global health, the degree to which the capacities of individuals and organizations engaged in global health are strengthened and the extent to which information relevant to global health is captured and disseminated. In short, it will succeed to the extent that it enables others to succeed both in Canada and around the world.

7.8 Project Implementation and Technical Assistance:

7.9 CSIH has a formidable record in planning and implementing health sector projects overseas and it intends to build on this record in the coming years.

7.10 CSIH's overseas projects will continue to target the following groups in Low and Middle Income Countries (LMICs):

- 7.10.1 ministries of health
- 7.10.2 NGOs
- 7.10.3 public and private health institutions
- 7.10.4 academic and training institutions
- 7.10.5 community based organizations, associations of health care workers, and other health sector partners

7.11 CSIH will continue to implement overseas projects, but it intends to bid more selectively on these projects in the coming years. It will pursue endeavors that emphasize knowledge transfer, the application of best practices, and projects in which CSIH can apply its past lessons learned.

VIII

Strategic Goals

8.1 Strategic goals help to guide the course of organizational changes and they also play a role in monitoring the progress of implementation. The strategic goals for the two focal points of CSIH are set forth below.

8.2 Strategic Goals for Project Implementation/Technical Assistance Services:

8.3 The strategic goals for all CSIH projects will continue to be:

- 8.3.1 building capacity- especially that of project partners, by helping them to understand, adapt to and apply an evidence-based approach in their projects
- 8.3.2 innovation and learning- with an emphasis on exploring and documenting best practices in various areas of global health.
- 8.3.3 knowledge translation- documenting lessons learned and translating these into action

8.4 Strategic Goals for each of the 5 Facilitation/Enablement Services:

8.5 Information gathering and dissemination goals

- 8.5.1 strengthen the global health community in Canada via a significant increase in the quantity and quality of global health information exchanged
- 8.5.2 increase the efficiency and effectiveness of CSIH members as a result of improved access to useful information (such as a comprehensive Canadian database of projects, tools and training modules)

8.6 Meetings, special events and networking goals

- 8.6.1 more frequent national and regional meetings of the international health community in Canada in order to exchange information, raise public awareness and dialogue, and explore opportunities for collaboration, strategic partnerships and alliances
- 8.6.2 promote and enable greater synergy of effort across sectors (i.e. NGO, academic/research) and reducing duplication of effort

8.7 Capacity strengthening through education and knowledge translation

- 8.7.1 build and enhance the capacity and competency of members and affiliates through CSIH-sponsored and facilitated training courses, educational events, publications, and online resources
- 8.7.2 offer the international health community an opportunity for self-reflective analysis, including examination of the conceptual and theoretical issues that inform global health
- 8.7.3 collect, organize, package and disseminate the learning, best practices and “tools” of the international health community in a way that not only builds capacity, but also encourages the translation of knowledge into practice

8.8 Public Dialogue

- 8.8.1 Through a process of facilitated dialogue with its membership, the CSIH will identify one or two critical global health issues every 2 – 3 years to serve as the focus for collective efforts over the proceeding 2-3 years. Doing so will allow for a more targeted and focused agenda which will, in turn, allow the global health community in Canada to speak with a consistent and coherent voice. In essence, these issues would be the “agenda” for 2 – 3 years.
- 8.8.2 The Canadian government will increasingly recognize the CSIH as a valued partner and as a point of reference when shaping global health policy; this will result from CSIH's representational and technical abilities.

8.9 Mentoring and enabling the involvement of individual Canadians in international health goals

- 8.9.1 Inform and actively engage a growing number of young Canadians regarding issues related to international health
- 8.9.2 Engage a growing number of Canadian professionals in activities at home and abroad, related to global health

8.10 By facilitating the mentoring of young Canadians, CSIH will groom global health leaders and CSIH members for the future. Additionally, involvement of Canadians overseas not only strengthens Canada's voice in international health, but also promotes greater public engagement, passion and commitment for Canada's unique role in global health.

IX

Strategic Priorities

9.1 Roughly 95% of CSIH resources are currently allocated to project implementation and technical assistance, largely because the CSIH budget is comprised almost entirely of project-specific, designated funding. The Society has very little discretionary funding for other priorities. CSIH intends to change this in the next five with the intention that a projected 60% of CSIH resources will be allocated to facilitation services (see: Appendix A). In order for this to happen, CSIH will need to grow its base of discretionary, or “core” funding. It will also need to mobilize new funds specifically for facilitation services.

9.2 Projects will continue at CSIH while the organization grows and expands its facilitation services both in Canada and abroad. This prioritization of facilitation services represents perhaps the most important organizational re-alignment in this strategic plan. It is CSIH's hope and expectation that this shift in focus will lead to fundamental changes in *what* the Society does and *how* it does it.

9.3 Targets for resource mobilization and resource allocation will be set on an annual basis for each of the services mentioned in Section VII. Management planning will reflect this prioritization. Fundamentally, CSIH plans to fuel the growth and expansion of its facilitation stream through the mobilization of new resources; a mechanism will be put in place at the Board level to drive this process forward. Facilitation and public dialogue efforts will not continue to be “add on” activities taken on by overextended staff; they will be the expanding centre of what CSIH does.

9.4 Inherent in this strategic plan is the assumption that CSIH will make membership services a high priority in the coming years. This will require a fundamental re-thinking of the Society's relationship with its membership. A new relationship will likely involve improving benefits and the perceived “value added” associated with being a member of the CSIH, having more substantial membership engagement, and providing expanded services to the members. Hopefully, this will in turn contribute to a renewed and expanded membership base.

X

Critical Success Factors

10.1 Critical Success Factors are steps that *must* be taken in order to successfully implement this new strategic plan. The issues may change over time, but the following factors are essential as a starting point:

10.1.1 Gain full understanding and “buy-in” by the Board, the Executive Director and the CSIH staff for the strategic plan.

10.1.2 Broker clear understanding by the Board, Executive Director and staff about the difference between a strategic plan and an “operational” plan, including who is responsible for each and how they are to be used.

- 10.1.3 Agree on a *Plan for Operationalizing the Strategic Plan* as well as timelines and tools for monitoring and evaluating its implementation. (see: draft Plan for Operationalizing the Strategic Plan).
- 10.1.4 Prepare a 5-year financial plan to accompany and support the implementation of the strategic plan; the financial plan should enable CSIH to achieve greater financial stability and sustainability. Among other things, it will make provisions for:
- A) diversifying and expanding CSIH's funding base, thereby reducing dependency on one specific funding agency
 - B) encouraging entrepreneurial approaches in the development and marketing of CSIH tools, events and services to provide cost recovery and potentially income generation
 - C) establishing private sector partnerships, including funding partnerships
 - D) broadening and expanding the membership base
- 10.1.5 Mobilize a minimum of \$200,000 in new funding over the coming 2 years, and designate it to growing and expanding the facilitation/enablement services outlined in this strategic plan.
- 10.1.6 In order to accomplish numbers 4 & 5 above, the Board must establish a Joint (Board/Staff) Financial Task Force mandated to:
- A) prepare a 5-year financial plan for the Society
 - B) prepare and implement a resource mobilization plan that enables CSIH to secure the funds required to fuel new growth
- 10.1.7 Negotiate and mutually agree upon a realignment of the Board/Executive Director relationship to ensure clear lines of authority and responsibility regarding implementation of this strategic plan. This will likely include:
- A) realignment of the time and energy that the Executive Director invests in the new facilitation division, resulting inevitably in decreased involvement in the projects division
 - B) preparation of annual operational/management plans by the Executive Director and management staff; these will align with and support the strategic priorities of the Board as set out in this Strategic Plan
 - C) increased attention by the Board to matters of governance
 - D) greater responsibility by the Board for securing the financial resources required for implementing this strategic plan.
- 10.1.8 Review and revamp the existing standing committee structure of the Board, taking into consideration the strategic priorities outlined herein.
- 10.1.9 Pursue strategic alliances and partnerships both nationally and internationally, that will allow CSIH to take advantage of new and emerging opportunities consistent with the strategic priorities outlined herein.
- 10.1.10 As resources become available, engage new staff and/or expand the existing competencies of CSIH staff and re-configure the organizational chart. It is understood that the new directions and tasks outlined herein cannot simply be

given to the existing staff for implementation. Successful implementation of this plan requires recruiting and/or reinforcing the following competencies:

- A) an in-house health expert
- B) an information technology specialist
- C) a human resources manager
- D) communications expertise (media, web promotions)
- E) conference and special events coordination
- F) resource mobilization (fund development, grants, foundations)
- G) expertise in protocols for knowledge transfer (internal and external)

XI

Monitoring the Strategic Plan

11.1 Strategic plans are dynamic and not static. Therefore, this plan will be revisited and revised annually by the Board towards the end of each year, in advance of Management preparing their annual operating plan for the up-coming year.

11.2 Indicators will be developed for each of the strategic goals herein, in order to measure the degree to which CSIH is moving towards the fulfillment of this strategic plan. The Board understands that it is their responsibility to ensure that an up-to-date strategic plan exists, and to monitor its implementation.

11.3 In the future, management reports to the Board will focus primarily on performance as it pertains to each of the strategic goals. In this way, the organization will ensure that there is correlation between the Board's strategic plan and the organization's annual operating/management plans. Disconnects between the two will be identified and addressed at an early stage.

XII

Conclusion

12.1 CSIH exists in a time of tremendous change and great need, but also a time of tremendous opportunity. Canada is one of the world's leading middle powers and for decades has maintained an international reputation as a peacemaker/peacekeeper and an international facilitator for addressing, brokering and implementing solutions to global health crises.

12.2 Given this historical context, Canada is in fact positioned to take a stronger, proactive and more effective leadership role in addressing disparities in global health. Canadians must recognize their moral responsibilities in this realm and seize the opportunity before them to take a stronger stand.

12.3 CSIH can facilitate this process by providing public dialogue to broker a clearer national consensus about where and how Canada can lead most effectively in the global health arena. CSIH must bring together Canada's stakeholders in the field of global health: NGOs; academics and researchers; policy makers; health care workers; private sector, health related industries and technologies; pharmaceutical companies; politicians and governments.

12.4 CSIH is well suited and well positioned to facilitate this process. This represents CSIH's strategic niche for the future and points the Society in an exciting direction.

Appendix A: Shifting the Focus

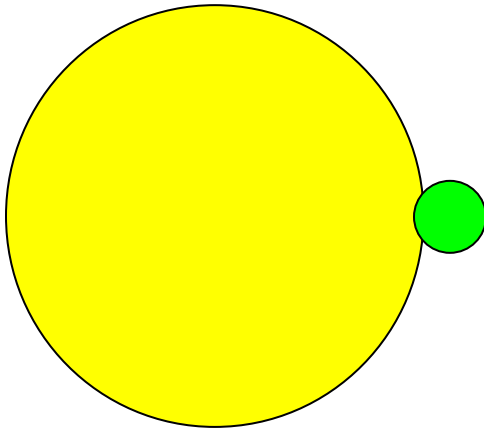
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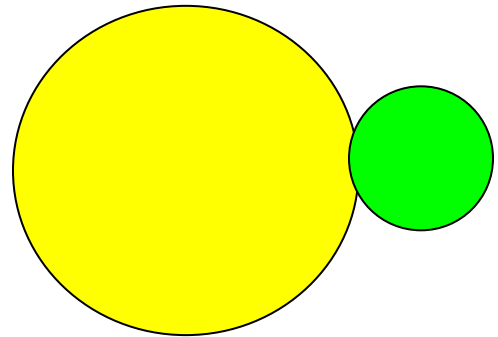
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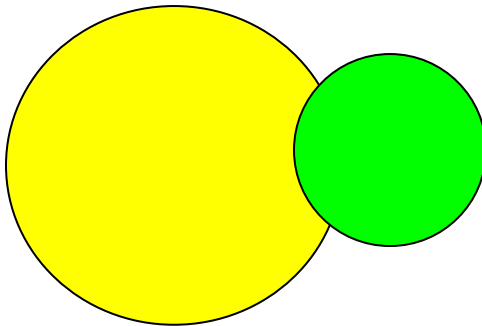
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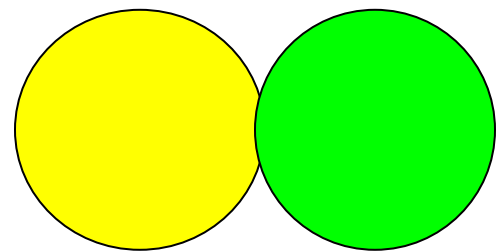
Year 2:



Year 3:



Year 4:



Year 5:

