



Aligning to **country driven** priorities & decisions

Shift from a system where priorities, models, and structures are imposed on countries by donors/funders, to one where communities and governments own and lead the agenda-setting and coordination of health programming. In this way, donors/funders are playing a complementary, supportive role, listening and responding to local needs and priorities.



Respecting **sovereignty & fostering independence**

Shift from a system that depends on continuous donor/funder support for survival to one that builds on existing local governance and structures, leverages in-country capacity, and prioritizes sustainability through local resources and expertise.



Collaborating on **the basis of trust & mutual accountability**

Shift from a system that perpetuates power structures and mistrust in institutions and individual motivations to one that fosters mutual understanding of differing cultural norms and power dynamics, and promotes accountability across different levels and stakeholders (funders, government, implementers, etc.).



Driving **strategic & coordinated investments** across the system for long term change

Shift from funding siloed, fragmented, and piecemeal efforts to investing in long-term gains and system-based approaches that align with country priorities. Allocate or mobilize the resources necessary to meet the true cost of the health challenge.



Using approaches that **contextualize & respond** to the needs of the problem

Shift from predefined and uprooted solution-driven approaches (e.g., 'one-size-fits-all', 'best-practice-led', 'cookie-cutter-solutions') to approaches that seek to understand the local context and adjust to suit local needs. Understand why past projects succeed or fail before scaling or discontinuing them and to inform new program design.



Designing programs that are **adaptive, iterative & foster innovation**

Shift from a system driven by static, inflexible, and standardized program design (i.e., timelines, activities, metrics, etc.) to one that emphasizes monitoring, evaluation, research and learning, and supports programs designed for flexibility and agility to navigate unprecedented challenges and innovate unprecedented solutions focused on making sustainable impact.



Strengthening **capacity of individuals, institutions and the entire system**

Shift from a system that presumes capacity gaps in TA/CS recipients to one that recognizes the need for institutions, structures, and all stakeholders involved in TA/CS to synergistically improve their capacity to enhance impact efficacy.



Fostering systems that **promote equity in gender & power**

Shift from taking actions that are blind to gender and power inequities and perpetuate hierarchical structures driven by privilege and power to recognizing the role and importance of gender equity in health outcomes. Create a conscientious ecosystem, driving towards greater equity in gender, power, and other forms of inequity.



Promoting **feedback & learning** between communities & donors/funders

Shift from systems that are closed to community-driven feedback or dissent to drive systems that foster feedback and learning across multiple levels (e.g., communities, implementers, governments, and donors/funders). Decouple funding power with the right to evaluate and enable all stakeholders to contribute to decisions and evaluation.