



CanWaCH

Canadian Partnership for
Women and Children's Health

Canadian Partnership for Women and Children's Health

*Policy Review and Analysis of Member Submissions to the Government of
Canada's International Assistance Review Consultations*

May 31, 2017

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Acknowledgements

The Canadian Partnership for Women and Children’s Health would like to acknowledge the instrumental role of its Members and Allies in successfully completing this research project. In particular, the Partnership would like to thank those who shared their submissions to the Government of Canada’s International Assistance Review Consultation for this analysis.

Acronym List

This report makes use of several acronyms that are common in international development discourse, listed below.

Acronym	Usage
ASRHR	Adolescent Sexual and Reproductive Health and Rights
CanWaCH	Canadian Partnership for Women and Children’s Health
ECE	Early Childhood Education
EWEC	Every Woman, Every Child
FGM/C	Female Genital Mutilation/Cutting
GAC	Global Affairs Canada
GoC	Government of Canada
GNI	Gross National Income
HSS	Health System Strengthening
IAE	International Assistance Envelope
IAR	International Assistance Review
MNCH	Maternal, Newborn, and Child Health
NGO	Non-Governmental Organization
ODA	Official Development Assistance
RMNCAH	Reproductive, Maternal, Newborn, Child, and Adolescent Health
SDG	Sustainable Development Goals
SGBV	Sexual and Gender Based Violence
SRHR	Sexual and Reproductive Health and Rights
UHC	Universal Health Care
WASH	Water, Sanitation, and Hygiene

Take Home Messages

A summary of what we heard from Member and Ally submissions to the IAR

Interventions for Women, Adolescent and Children’s Health

- RMNCAH is a central policy focus area
- SRHR was highly integrated into RMNCAH discussions and focused on education and advocacy among youth
- Adolescent health was a prominent focus area and had strong linkages to SRHR
- Access to safe abortion care and services, and FGM/C were rarely discussed
- ECE and nutrition received minimal messaging

Equity Driven Approaches

- Analysis showed unanimous and enthusiastic support for an equity driven approach to development that makes gender equality a top priority
- There was contention regarding terminology in equity driven approaches, such as the use of terms like “feminist lens” and “feminist foreign policy,” and “gender transformative approaches,” which came across as convoluted language
- Objectives of a gender transformative approach were advocated for across the majority of submissions
- UHC and HSS were broadly discussed as key drivers behind equity and equality

Fragile Contexts

- Analysis revealed the importance of investing in fragile settings and a close connection between fragile settings and climate change
- Challenges associated with mental health and illness were rarely discussed nor were the linkages between mental well-being and fragility recognized

Innovative, Participatory, and Accountable Practices

- Analysis showed ardent support for participatory and innovative approaches to development
- Data was not a central point of focus from documents analyzed, but when discussed submissions supported the need for disaggregated data and advocated for the value of robust data management

Funding Processes

- Member submissions drew attention to inequitable programming requirements and application procedures for government funding
- Members urged the GoC to meet its ODA targets as a stepping stone towards efficient and effective funding processes
- Submissions critiqued Canada for fostering competition rather than collaboration and innovation amongst NGOs

Word Cloud:

Nvivo Analysis revealed the fifty most cited words



Word Cloud: Nvivo content analysis revealed the fifty most cited words across all submissions, summarized below in a word cloud

Introduction

The Canadian Partnership for Women and Children's Health (CanWaCH) is a unique and innovative Canadian multi-stakeholder partnership that includes over 100 Canadian NGOs, academic institutions and health professional associations working together to improve the lives of women, adolescents and children in the world's poorest countries. CanWaCH Members offer a diverse range of experiences and innovations in their pursuit of implementing and driving results for the hardest to reach. In this report we seek to examine Members' and allies'¹ responses to the IAR, with a special focus on points of both convergence and divergence from CanWaCH policy drivers. With that said, the Secretariat is pleased to present this brief analysis of Member submissions to the Government of Canada's (GoC) International Assistance Review (IAR) consultations.

Overview of the International Assistance Review

The GoC invited all Canadians and international stakeholders to participate in the IAR Consultations between May and July 2016. The review aimed to amass knowledge and insight from a diverse set of Canadian and international stakeholders to inform the establishment of an international assistance policy and funding framework. At the core of the consultations was a [discussion paper](#) released in May 2016 by Global Affairs Canada (GAC). The discussion paper described the current global context and key challenges to international assistance, which were addressed vis-à-vis five policy focus areas, namely: the health and rights of women and children; clean economic growth and climate change; governance, pluralism, diversity and human rights; peace and security; responding to humanitarian crises and the needs of displaced populations, and a delivering results framework. Across the five policy focus areas, an overarching emphasis was set on placing women and girls at the heart of Canada's international assistance, helping the poorest and most vulnerable and supporting fragile states, while advancing the implementation of the Sustainable Development Goals (SDG) Agenda. GAC released a "[What we heard](#)" document in December 2016 that provided an analysis of key messages received through the IAR consultation process. At time of writing, GAC is finalizing the outcome policies from this consultation, and it is anticipated that a report detailing outcomes of the consultations will be released by Summer 2017.

CanWaCH's participation in the IAR

In July 2016, the Canadian Partnership for Women and Children's Health² submitted a consultative report to the International Assistance Review. In response to the discussion paper, CanWaCH made five policy recommendations to the Government of Canada, namely that an international assistance policy and funding framework should: (1) apply an equity-driven approach to rights-based development; (2) invest in integrated and comprehensive interventions; (3) focus investments in fragile settings; (4) adopt a gender transformative approach and; (5) promote innovation, participation and accountability (**See Annex A**). To inform policy recommendations to the IAR, CanWaCH held consultations with Members, the Stakeholder Engagement Working Group, and the Board of Directors. As well, international allies were engaged through being sent key messages and being encouraged to make individual submissions to the IAR consultations.

Objectives of this research project

Following the conclusion of IAR consultations, CanWaCH conducted a desk-based analysis of thirty-nine Member and ally³ submissions to the IAR. These include submissions from thirty-three Members and six domestic and international allies (**see Annex B**). The research project sought to better understand and illuminate the input around policy focus and priority areas in women and children's health from the international development and humanitarian sector. Further, CanWaCH's detailed review of submissions aims

¹ CanWaCH is proud to work with our Members across Canada, as well as other Canadian and international allies who contribute to the international development and humanitarian sector

² CanWaCH submitted a consultation report to the IAR under the former organizational heading of the Canadian Network for Maternal, Newborn and Child Health (CAN-MNCH)

³ Member and ally submissions will be herein referred to as Members

to uncover points of convergence and divergence between submissions and between CanWaCH policy focus areas. This report, at best, infers member policy priorities in relation to the IAR as determined through the outlined methodology, and cannot be taken as a direct correlation to member policy priorities.

Methodology for Data Collection and Analysis

This research project integrated methodological traits and data collection tools ascribed to both scoping reviews and content analyses. Scoping reviews aim to rapidly map the key concepts underpinning a research area in significant detail whilst a content analysis is a method for summarizing any form of content by counting various aspects of the content. An integrated methodology that was both complementary and mutually reinforcing of rigorous analysis was implemented with the objective of creating unique opportunities for study.

All of the submissions were analyzed using both a Policy Extraction Tool (PET) as well as Nvivo qualitative data analysis software. The PET is a data collection and analysis tool that is supportive of a scoping review methodology while an Nvivo analysis software allowed researchers to conduct a simultaneous content analysis. To note, a Nvivo reference means that a passage of text was manually coded by the researcher as discussing a certain node, and not quantity of instances a word was mentioned (See Annex C for a detailed description of data collection tools and methodology).

Members' submission overview

Submissions were gathered between September 2016 to November 2016 through a three-pronged approach, including: an open call in CanWaCH newsletters; internet searches using Google; and bilaterally reaching out to Members and allies, including international stakeholders. Despite these efforts to inclusively engage and gather all Member and ally reports submitted, it is possible that not all Member submissions have been captured in this analysis. All organizations that made available their submission were included in the analysis process.

Findings and Analysis

Below is the account of findings and analysis of submissions across five prominent themes, namely: 1) Women, Adolescent and Children's Health Interventions; 2) Equity Driven Approaches; 3) Fragile Contexts; 4) Innovative, Participatory and Accountable Practices; and 5) Funding Processes. For a summary of visual findings, see Annex D.

Women, Adolescent and Children's Health Interventions

The centrality of women and children's health was evident across all of the analyzed Member submissions. Content analysis revealed that the node "RMNCAH," which also encompassed references related to MNCH and RMNCH, was the most frequently coded node, accounting for nearly one hundred references from more than thirty sources.

Although CanWaCH recognizes MNCH and SRHR as mutually reinforcing, and that interventions that target underserved areas of SRHR should be additive, this same policy focus was not always echoed in Member submissions. Indeed, SRHR was regularly not included in Members' discussions of RMNCAH international assistance policy goals. For instance, whereas RMNCAH was the most coded node, SRHR accounted for significantly fewer

"Stigma and taboos surrounding sex, pleasure, adolescent sexuality, among other issues, given that they involve women's and young people's control over their own bodies, are seen as fundamentally problematic. SRHR is a thematic area that surfaces deeper issues of sexism and gender inequality. As a result, SRHR is often ignored, neglected, or actively written out of government policies, which is typically justified by a seeming lack of consistent public support for SRHR or the controversial nature of elements within the SRHR agenda."
—Action Canada for Sexual Health and Rights

references, almost half, at fifty-seven across all submissions. When Members discussed SRHR it was, for the most part, in relation to changing attitudes concerning the sexual and reproductive rights of women and adolescents through education and advocacy efforts, as well as improving access to protection and contraception methods for men and women. In rare instances (three submissions), Members explicitly advocated for legalization of and access to safe and legal abortion care as part of SRHR.

Analysis also revealed that FGM/C was seldom included within RMNCAH and SRHR discussions. Indeed, Nvivo coding results produced twelve references to FGM/C from a total of four sources (10% of submissions). Minimal messaging around FGM/C indicated a slight divergence from CanWaCH. Its absence could speak to Member RMNCAH policy priorities that come across as narrower than CanWaCH policy objectives.

Adolescent health was well integrated within Member discussions, cited in nearly four hundred instances across twenty-seven sources (69%) and the Nvivo node for “Adolescents” captured forty-three references across seventeen sources (44%). Adolescent health was most integrated in the context of SRHR education and advocacy, with Members urging for Canada’s further commitment to develop a robust adolescent-centered SRHR program. Moreover, many submissions explicitly demonstrated their commitment to adolescent inclusion in health interventions such as by using the acronym RMNCAH and in one instance, a submission differentiated between SRHR and adolescent-centered SRHR (ASRHR). This routine acknowledgment demonstrates the importance of this policy focus area to Members and is a convergence with CanWaCH’s adolescent health policy priority area. On the other hand, there was minimal reference to adolescent health as related to nutrition or safe pregnancy, which is a divergence from CanWaCH policy. There was no specific reference to adolescents as a vulnerable and target population for mental health interventions.

“Investing in WASH is essential to fulfilling basic human needs and realizing the health and rights of women and girls. Canada can demonstrate its leadership by advancing the human right to water and sanitation and supporting women and girls as key actors in the WASH sector and decision-making process. Furthermore, Canada can promote a blend of innovative and evidence-based WASH solutions for building climate-resilient health systems, economies, and delivering essential services for all, and by prioritizing access for the poorest and most vulnerable.”- Water Aid Canada

Regarding other interventions for women and children’s health, discussions routinely prioritized HIV programming and support; HIV was cited 402 times across eighteen sources (46%). This finding is not unusual, however, as HIV interventions have been a core health focus of international efforts in recent history. In some instances, adolescents were mentioned as a key demographic for HIV education and interventions to target.

WASH was cited 334 times across eleven submissions (28%) and the Nvivo WASH node

was coded twenty-seven instances across nine sources (23%), indicating that Members value policy objectives that prioritize these interventions. Despite the fact that WASH was a highly coded node, in the context of RMNCAH these conversations were rarely related to menstrual hygiene management, which was only cited seventeen times across six sources (15%).

ECE received minimal messaging and there were only twelve references from seven sources (18%) for the Nvivo ECE node. It is possible, however, that discussions of education (i.e., at the secondary and post-secondary level) more broadly could have skewed the results regarding the low significance of ECE across Member submissions. In other words, the low visibility of ECE does not mean that Members do not highly value education more broadly. Still, this shows a divergence with CanWaCH as ECE is linked to Child health and wellbeing, a secondary policy focus area.

Similarly, although a text query found that twenty sources mentioned nutrition, the Nvivo node for nutrition found it to be a medium policy priority, with nutrition being discussed in depth in eight sources, and

malnutrition specifically being discussed in four sources. The relative absence of a Member focus on nutrition may indicate that this is a policy priority area that was effectively absorbed into more general discussions regarding women and children’s health. Moreover, the data in this section was particularly sparse, which challenges the legitimacy of generalizable analyses of this topic. Still, this finds a divergence with CanWaCH’s policy priorities.

Around implementation frameworks, member submissions called on the GoC to support the implementation of UHC and HSS at the community level, where the greatest impact on children and women’s lives can be realized; the nodes for UHC and HSS were referenced a combined total of twenty-two times from twenty different sources (51%). Members also wanted to ensure that the needs of women, adolescents, and girls are included in approaches to health (beyond maternal health and family planning) and incorporate water and sanitation solutions to address the key root cause of mortality and morbidity in infants and children.

Taken together, Member submissions emphasized the complexity and all-encompassing nature of women, adolescent and children’s health, and called for an international assistance framework that recognizes this complexity and furthermore seeks to integrate interventions across the continuum of care while working with diverse stakeholders. To summarize, the data analysis revealed that RMNCAH was a key policy priority across all IAR submissions. Members highlighted the importance of several interventions related to strong RMNCAH policy, like HSS, SRHR, access to clean water and sanitation, and a moving beyond MNCH to also include adolescent health broadly. At the same time, Members were less vocal in regards to nutritional programming, ECE, and menstrual hygiene management within WASH and very rarely discussed issues related to access to safe abortion care and FGM/C.

Summary of Policy Priorities in Member Submissions ⁴ : Women, Adolescent and Children’s Health Interventions		
High Policy Priority	Medium	Low Policy Priority
<ul style="list-style-type: none"> ○ RMNCAH ○ SRHR 	<ul style="list-style-type: none"> ○ WASH ○ HSS ○ Nutrition ○ HIV ○ Adolescents (Adolescent health & Adolescent-centered) 	<ul style="list-style-type: none"> ○ FGM/C ○ ECE ○ Abortion (Access to safe abortion care) ○ Menstrual hygiene management

Equity Driven Approaches

Member submissions reflected a strong alignment with CanWaCH policy objectives in regards to gender equality, gender equity and gender transformative approaches, where submissions called for an integrated approach and urged Canada to see gender equality as a crosscutting priority. Indeed, the node for “Gender

⁴ The number of Members referencing a node determined the policy priority, wherein each node represents a policy focus area. When more than 50% of Member submissions referenced a node, the issue was considered a high priority. When 20%-49% of Members references a node, the issue was considered a medium priority. When less than 20% of Members references a node, the issue was considered a low priority. In some instances, policy focus areas emerged in Member submissions that were not captured by Nvivo coding. In this case the researcher used findings from qualitative analysis conducted vis-à-vis the PET as well as text frequency to determine the relative priority of certain issues.

*Note, see **Annex D** for differentiation between policy focus issues that were quantitatively determined by nodes and those that were qualitatively determined by the PET; *italicized* policy priorities denote qualitative rather than quantitative placement.

Equality” was the second most coded node overall with a total of eighty-three references from twenty-nine sources (74% of submissions). Similarly, when taken together the nodes for “Gender Transformative”, “Gender Equity” and “Equity Driven” amassed one hundred and sixteen references from more than thirty sources.

Many submissions made direct reference to going beyond rights-based approaches to development through the use of a gender transformative approach. Although there were divergences with the use of “gender transformative approach” terminology, the objective of gender transformative approaches—namely the need to address social and cultural norms that perpetuate inequality in all forms as a way to empower women and girls—was advocated for across the majority of submissions. Connected to this objective was the node coding for “Boys and Men” which garnered twenty-two references from thirteen sources (33%) and highlighted references that discussed the role of boys and men in changing and challenging harmful social and cultural norms. This is in alignment with CanWaCH priority areas.

“The adoption of a feminist foreign policy requires that gender equality be established as a standalone policy pillar, as well as a cross-cutting theme in the Government of Canada’s new international assistance frameworks. Programs must be driven by long-term theories of change, focussed on efforts to reorient social attitudes, norms and behaviours. This entails measures to ensure that the most marginalized members of the communities receiving Canadian assistance are involved in processes affecting their opportunities, livelihoods and wellbeing.”
 - CARE Canada

Around the use of terminology, there was apprehension among a minority of submissions regarding terms like “feminist lens” and “feminist foreign policy”. These Members did not reject the tenets of a feminist lens itself, but rather the categorization of an approach to development as categorically “feminist”. Members underlined the need for GAC documents to be simple and consistent with the international human rights system and discourse. As well, some Members found “gender transformative approaches” terminology to also be cumbersome, yet still embraced the pillars of this approach (e.g., including boys and men in breaking down harmful practices). The introduction of new language, Members posited, can lead to confusion and misunderstanding if terms are not clearly and consistently defined. Instead terms that were felt to be more accessible to audiences, such as more generally speaking about equality based and human rights based approaches to development, were used. Issues regarding terminology were not anticipated within CanWaCH’s submission, but may signal the need for the explicit alignment of terms across policy documents.

To summarize, Member submissions unanimously and enthusiastically supported an equity driven approach to development that makes gender equality a top priority. More specifically, Members called on Canada to be mindful of terminology and to integrate gender equality and equity mechanisms within every facet of international assistance.

Summary of Policy Priorities in Member Submissions: Equity Driven Approaches		
High Policy Priority	Medium Policy Priority	Low Policy Priority
<ul style="list-style-type: none"> ○ Gender Equality ○ Gender Equity ○ Gender Transformative Approaches 	<ul style="list-style-type: none"> ○ Boys and Men ○ Feminist lens 	<ul style="list-style-type: none"> ○ Universal Health Care ○ Defining terminology that describe policy approaches

Fragile Contexts

Challenges complicit with fragile contexts (i.e., natural disasters, acute undernutrition, and conflict) as well as investing in fragile settings were a significant focus across all Member submissions and a key policy objective, as evident by the high use of the node “fragility” which garnered more than sixty references from twenty-four submissions (62%).

Further analysis revealed that “fragility” was often cross-referenced with the node for “climate change,” which accounted for forty-one references from fifteen sources (38%). The majority of Member submissions asserted that addressing climate change is the most important policy pathway to combatting fragility and emphasized the likelihood of climate change to reverse recent development gains. Canada was urged to make sustainability a cross-cutting priority domestically and in the countries where Canada operates. This shows a slight divergence from CanWaCH policy priorities, where climate change policy focus is currently not overtly the most important policy pathway to combatting fragility.

“A holistic response to global climate change includes support for climate adaptation and mitigation initiatives that help minimize the costs and consequences of climate impacts. Specific attention and financial resources should support adaptation strategies, plans, and actions at the local level while strengthening civil society and national governments ability to respond to the threats and risks of global climate change.”
– CUSO International

Qualitative analysis of the “fragility” references revealed the importance of investing in and financing interventions in fragile settings as a policy priority. This node was also widely cross-referenced with “ODA and Financing,” as Members called for fit for purpose approaches and multi-year funding in order to combat fragility. The importance of flexible funding in fragile contexts is in alignment with CanWaCH policy.

In discussing fragile contexts, Members often noted the importance of multi-input approaches and recognized the various and diverse facets contributing to fragility. In other words, fragility is not produced by a singular force, but rather a plethora of challenges; the node for “multi-input approaches” garnered a notable twenty-five references from fifteen different submissions (64%). In other words, investing in fragile settings requires an all-encompassing or multi-input approach to reach stability.

Further analysis revealed that while “fragility,” “climate change,” and “multi-input approaches” received considerable coverage across Member submissions, the node “mental health” accounted for a mere five references from three sources (8%). Mental health was usually referenced in the context of violating human rights and Members who did speak about this urged for further investment in a global mental health strategy

“Global Affairs Canada should prioritise global mental health, an area of Canadian strength and focus, as part of a comprehensive strategy to help the poorest and most vulnerable and integrate it across all six policy issues.”
–Grand Challenges Canada

to combat stigma and include those with mental health issues as part of vulnerable groups. Member submissions did not reflect the role of mental health in fragile settings, evident by the minimal discussion surrounding this particular challenge. This is a slight divergence from CanWaCH, who recognizes the changing nature of contexts in which development takes place and considers the complex interplay of physical, mental, and social factors as key areas in addressing fragility.

The issue of SGBV was rarely addressed in Member submissions. A text frequency search revealed that there were only fourteen uses of the acronym “SGBV” and thirty-six uses of “Sexual and Gender Based Violence” from a total of seven Members. Further, only the Canadian Red Cross developed a full discussion to address

SGBV. In CRC’s submission, SGBV was included as a policy priority in fragile contexts, where the issue is exasperated by war and conflict. The absence of SGBV in Member submissions is a divergence from CanWaCH’s focus on the farthest to reach, and deep-rooted detrimental effects of SGBV particularly in the context of fragility.

In sum, Member submissions revealed the importance of investing in fragile settings, while at the same time closely relating fragility to forces of climate change. Members called for multi-input approaches to investing in fragility that situates sustainability and stability as a cross-cutting theme in future policy pillars. Conversely, Members rarely discussed challenges associated with SGBV or mental health, nor recognized the linkages between mental well-being and fragility.

“Gender-based violence involves power imbalances where, most often, men are the perpetrators and women the victims. We know that women and children bear the brunt of the impacts and as humanitarian and development actors, it is our urgent responsibility to prevent, address and bring accountability to victims. The risk of SGBV is compounded in times of humanitarian crises, conflicts or disasters where self directed and interpersonal violence increase. In these contexts, victims are rarely supported with adequate access to essential services and access to justice.” – Canadian Red Cross

Summary of Policy Priorities in Member Submissions: Fragile Contexts		
High Policy Priority	Medium Policy Priority	Low Policy Priority
<ul style="list-style-type: none"> ○ Fragility ○ Investing in fragile settings 	<ul style="list-style-type: none"> ○ Climate Change ○ Multi-Input Approaches ○ Developing multi-input approaches to address fragility 	<ul style="list-style-type: none"> ○ Mental Health ○ SGBV

Innovative, Participatory and Accountable Practices

Members highly valued innovative and participatory practices in international assistance, which were often cross-referenced. The Nvivo node for “participation” accumulated forty-four references from twenty-two

sources (56%). Around participation, Members focused on supporting local capacities and local actors as a way to create long lasting and durable solutions to fragility. In particular, Members discussed supporting local community structures and ensuring community members, especially women, have a voice in advocating for services and programs that respond to the of their community. Members supported the essential role of participatory policy development and programming initiative that include children and youth; submissions routinely recognized the importance of youth educating others as a way to create intergenerational change. Indeed, Members

*“Innovation helps actors to work smarter, faster and more efficiently, which is essential for bold and transformative action to happen. Canada’s international assistance needs to be informed by the best evidence and cutting-edge tools, reflect local needs and priorities, benefit from dynamic collaboration between Canadian and international actors, and drive the most cost-efficient models to deliver development innovation and impact.”
–Grand Challenges Canada*

unanimously agreed that participation of local communities is essential to implementing sustainable programming. This is in alignment with CanWaCH policy.

Innovation was a strong focus area with a relatively high word count including its stem words⁵ across all Member submissions. The Nvivo node for “innovation” represented twenty-fives references from fourteen

⁵ The word count for “innovation” including its stem words (e.g., innovates, innovating, innovations, innovative, innovatively, innovator, etc.) was 673.

different Member submissions (39%). Members were very vocal in encouraging, supporting, and proposing diverse and creative innovative approaches to development work. The diversity of innovative approaches offered to the IAR by Member submissions demonstrates the dynamism of current CanWaCH partnerships.

Accountability received low to moderate coverage across a much narrower scope of submissions and came up in the context of improving reporting mechanisms and aggregating data sets. The node for “accountability” accumulated seventeen references from only seven sources (18%) and the word count for “accountability” and its stem words⁶ was less than half of that for “innovation”. It is possible; however, that discussions surrounding accountability were folded into more thoroughly coded nodes, like “Funding Processes” and “ODA and Financing”.

“A more collaborative, holistic approach to dealing with the development, climate and humanitarian challenges we face, is no longer optional, it is necessary. Collaboration requires that traditional and new development actors work across sectors while keeping a clear line of sight on accountability to each other and most importantly to those we seek to serve.” –Save the Children

*“Canada needs to support global efforts at increasing amount and quality of data, prioritizing disaggregated data that measures equity”
–RESULTS Canada*

Specific to disaggregated data, although referenced in twenty-seven sources, meaningful mention was only made to: six sources around sex disaggregated data; four sources around age disaggregated data; and one source around disability disaggregated data. Disaggregated data as a low policy priority is a divergence from CanWaCH's core pillar of measuring results.

To summarize, Members ardently support participatory and innovative approaches to development; the role of community and involvement was a thematic priority across the vast majority of submissions. Accountability, on the other hand, received moderate to low messaging.

Summary of Policy Priorities in Member Submissions: Fragile Contexts		
High Policy Priority	Medium Policy Priority	Low Policy Priority
<ul style="list-style-type: none"> ○ Participation ○ Cultivating partnerships and local participation ○ Amplifying the voices of vulnerable populations in local programming 	<ul style="list-style-type: none"> ○ Innovation ○ Supporting innovation in development policy ○ Situating innovation as a cross-cutting theme in policy 	<ul style="list-style-type: none"> ○ Accountability ○ Revising accountability measures to be less cumbersome for organizations with limited resources ○ Introducing new modes of measuring impact and program success ○ Collect aggregated data to support programming

Funding Processes

Despite the fact that GAC’s discussion paper did not specifically consult about the process around calls for international assistance funding, the vast majority of Member submissions provided a critique of current processes. It is perhaps not surprising that the node for “ODA and Financing” was amongst the most highly coded nodes where thirty submissions (77%) discussed and critiqued the current ODA framework and development financing, more broadly. Members, above all else, urged the GoC to meet ODA goals as a stepping-stone towards sustainable funding for international programming. It is imperative, submissions

⁶ The word count for “accountability” and its stem words (e.g., account, accountabilities, accountable, etc.) was 307.

echoed, that Canada commit to predictably and transparently growing its international assistance envelope to reach 0.7% ODA. Only when these initial goals are met can Members begin to develop programming with the necessary funding to sustain change.

The “Funding Processes” node included references from sixteen submissions (41%). Perhaps the most prominent criticism of current funding processes was the lack of it being flexibility entrenched within current application procedures. Member submissions drew attention to the inequitable programming requirements and application procedures, which do not always suit the level of resources of various organizations and can foster competition rather than collaboration amongst NGOs. Members explained that under the current model of program-based accountability, all organizations are required to use the same detailed, complex and burdensome reporting procedures, which results in significant resources being diverted away from impactful program activities. Members consistently problematized current accountability measures as only serving to undermine accountability and hamper sensible reporting and evaluation. Indeed, Members called on Canada to develop accessible, flexible, and predictable funding mechanisms in order to better align with the reality of many NGOs and promote innovation rather than competition. Conversely, CanWaCH did not have a strong position on funding processes for calls for proposals in their IAR submission.

“There is a need for Canada to conduct a review of its proposal application process and accompanying support services. In the past five years I have worked on three larger responses to Call for Proposals - two from the Canadian Government (CIDA, and then DFATD), and one from the European Union (EU). The two Canadian submissions had relatively short windows for response, and thus were both developed under duress, over a few months. Both completely overtook and detracted from regular work, and compelled large amounts of overtime. In the end, both submissions were unsuccessful.” –University of Alberta

Summary of Policy Priorities in Member Submissions: Funding Processes		
High Policy Priority	Medium Policy Priority	Low Policy Priority
<ul style="list-style-type: none"> ○ ODA and Financing ○ Improve flexibility within funding processes ○ Foster collaboration amongst NGOs rather than competition 	<ul style="list-style-type: none"> ○ Funding Processes ○ Improve funding process transparency to applicants ○ Improve crisis funding mechanism 	<ul style="list-style-type: none"> ○ Integrate gender equality funding requirements ○ Increase funding applications deadlines

Conclusion

This analysis and report illustrates CanWaCH Member priority areas as assessed through submissions to GoC’s IAR consultations. Findings from this report also support knowledge exchange between members, including where there are convergences and divergences in approaches to policy priority areas. CanWaCH looks forward to using these findings as a reflective guide to engage with and support the membership around policy focus areas.

Appendices

Annex A: Summary of CanWaCH Recommendations to IAR

Summary of Recommendations

1. Apply an equity-driven approach to rights-based development

- a. GAC should clearly emphasize addressing inequality as the central premise of its renewed approach to delivering international assistance, in alignment with Canada's commitment to implementing the SDGs. As such, Canada's development strategy needs to be strengthened by:
 - i. Adopting an equity-driven approach across all the thematic areas of the International Assistance Review; and
 - ii. Clearly align GAC's international assistance policy and funding framework to specific SDGs, EWEC targets, and international human rights standards.

2. Invest in integrated and comprehensive interventions

- a. To realize the health and rights of women, adolescents and children, and in line with the Global Strategy, we recommend sustained Canadian commitment to continued investment in a comprehensive package of health and nutrition interventions across the continuum of care. This includes mutually reinforcing RMNCAH and SRHR interventions and working with a range of actors, including civil society.
- b. We recommend that Canada's development framework explicitly name its commitment to health system strengthening as a critical component to the realization of the right to health.
- c. Canada's international assistance policy and funding framework should commit to supporting comprehensive programming across populations, therefore prioritizing the unique health, nutrition and SRHR needs of adolescents.

3. Focus investments in fragile settings

- a. Given the high burden of mortality and morbidity for women, children and adolescents in fragile settings, we recommend Canada continue to support the 'survive' agenda by investing in reaching the hardest to reach.
- b. Given Canada's commitment to reaching the most vulnerable, investing in fragile settings, including those impacted by conflict and climate change, should be clearly stated as a key objective. This should be done through promoting flexible and long-term programming models and fit for purpose approaches that recognize the diversity and changing nature of the contexts in which development takes place together with the complex interplay of physical, mental and social factors.
- c. Given the health consequences of climate change in fragile settings, particularly with under-five children, undernutrition, and hygiene and sanitation, investing in mitigating its effects and building healthier and more sustainable societies should be clearly stated as a key objective.

4. Adopt a gender transformative approach

- a. GAC should pursue a feminist foreign policy within a rights-based framework that is not just gender sensitive, but gender transformative. This means placing an intentional priority on addressing social and cultural norms that perpetuate inequality throughout policy and programming.

5. Promote innovation, participation, and accountability

- a. Canada should continue to investment in innovative approaches and technologies, and leverage existing innovations that are proven to work.
- b. Canada should support community participation, in particular the voices of boys and girls including youth, to inform good programming, promote accountability and realize human rights.
- c. Canada should continue to invest in addressing global data gaps that reinforce disaggregated measures and in approaches for measuring the impact of GAC development programs.

Annex B: Member and Ally Submissions Analyzed

CanWaCH Members (x 33)

Action Against Hunger
Action Canada for Sexual Health and Rights
Adventist Development and Relief Agency (ADRA)
Aga Khan Foundation Canada
Canadian Red Cross
CARE Canada
Carrefour de solidarité internationale
Centre for Affordable Water and Sanitation Technology (CAWST)
The Centre for International Cooperation in Health and Development (CCISD)
Canadian Society for International Health
CUSO International
Dignitas International
Effect:hope (The Leprosy Mission Canada)
Grand Challenges Canada
Handicap International
Hope International Development Agency
Interagency Coalition on AIDS and Development (ICAD)
International Council Of Aids Service Organizations (ICASO)
Nutrition International (formerly Micronutrient Initiative)
Partners in Health Canada
Plan International Canada
The Primate's World Relief and Development Fund (PWRDF)
Oxfam Quebec
RESULTS Canada
Save the Children
Simon Fraser University
The Society of Obstetricians and Gynaecologists of Canada (SOGC)
UNICEF Canada
University of Alberta
University of Manitoba
World Renew
World Vision Canada
Water Aid Canada

CanWaCH Allies (x6)

Canadian Council for International Cooperation (CCIC)
Global Polio Eradication Initiative (GPEI)
Ipas
ONE International
Orchid Project
Rotary International

Annex C: Data Analysis and Methodology

Scoping Review

In general terms, scoping reviews (or studies) adopt a methodological framework that allows researchers to develop both in-depth and broad results. In this way, the scoping review process is not linear but iterative, requiring the researcher to engage with each stage of data collection in a reflexive way and, where necessary, repeat steps to ensure literature is covered in a comprehensive way (Arksey & O'Malley, 2005).

Policy Extraction Tool

An essential stage in conducting a scoping review consists of charting the data. In this stage the researcher charts key items of information obtained from the primary data being reviewed. Charting describes a technique for synthesizing and interpreting qualitative data by sifting, organizing, and sorting material according to key issues and themes (Arksey & O'Malley, 2005: 15). In order to sufficiently chart data from thirty-nine Member submissions under review, researchers developed a Policy Extraction Tool (PET) in the Microsoft Excel application. The PET consisted of several columns aimed at capturing key aspects of Member submissions. Member submissions were charted through a variety of headings, namely:

- Summary of policy recommendations;
- Alignment with CanWaCH recommendations to the IAR;
- Focus on process or delivery mechanisms;
- Alignment with Global Affairs Canada's IAR policy focus areas;
- Summary of Nvivo coding results;
- Commentary, and;
- Quality of submission

Content Analysis

Buttolph and Reynolds (2005) define a content analysis as deriving numerical measures from a non-numerical written record, which enables a researcher to "take a verbal, non-quantitative document and transform it into quantitative data" (p. 223). This is done through constructing mutually exclusive and exhaustive categories that can be used to analyze documents, and record the frequency with which each of these categories is observed within documents selected for study.

Nvivo Qualitative Data Analysis Software

Nvivo is software that supports qualitative mixed methods research. Nvivo is designed to help the researcher organize, analyze and find insights in unstructured, or qualitative data like: interviews, open-ended survey responses, articles, social media and web content. For this research project, Nvivo software was used to analyze thirty-nine Member submissions made to the Government of Canada's International Assistance Review.

Central to Nvivo qualitative data analysis software is the creation of nodes, which are used in the coding process. A node is a collection of references about a specific theme, place, person or other area of interest. You gather the references by coding the source documents. In this case, the source documents were made up of IAR Member submissions. The researchers prepared an open list of nodes, which were used to code (i.e., gather references and measure the frequency related to each node) the IAR Member submissions. If the policy priority area is not indicated in the node list, it was analyzed using the PET.

The node list included:

Abortion	Fragility	ODA and financing
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Accountability	Funding processes	Participation and innovation
Adolescents	Gender equality	RMNCAH/MNCH/RMNCH
Boys and men	Gender equity and equity driven	SRHR
Climate change	Gender transformation	Terminology
Early childhood education	Health system strengthening	Under/malnutrition
Every woman, every child	Mental health	Universal health care
Feminist	Multi-input approaches	WASH
Female genital mutilation or cutting	Nutrition	

Nvivo qualitative coding software also enables the researcher to track the frequency of word use and create visualizations of the qualitative data. For this research project, we were concerned with our Members' use of terms related to women's health and reproductive, maternal, newborn, children, and adolescent health (RMNCAH). Research revealed that within the top ten most cited words across all submissions analyzed were terms like women's health, gender, rights, Canada, children, and policy

Annex D: Visual Summary of Findings

Word Frequency Summary in Member Submissions

Word	Total Count
Health	1,914
Women	1,657
Global	1,144
Rights	1,042
Humanitarian	993
Children	946
Gender	903
Girls	823
Canadian	810
Water	711
People	536

Summary of Nvivo Findings

Node	# of References (out of 895)	% of total References	#of Sources (out of 39)	% of total Sources
RMNCAH	94	10%	33	85%
Gender Equality	83	9%	29	75%
ODA and Financing	75	8%	30	77%
Gender Transformation	68	7%	25	64%

Fragility	61	6%	24	62%
SRHR	57	6%	21	54%
Participation	44	4%	22	56%
Adolescents	43	4%	17	44%
Gender Equity	43	4%	20	51%
Climate Change	42	4%	15	38%
Funding Processes	36	3%	16	41%
Feminist	36	3%	14	36%
WASH	27	3%	9	23%
Innovation	25	2%	14	36%
Nutrition	24	2%	8	21%
Multi-Input Approaches	22	2%	15	38%
Boys and Men	22	2%	13	33%
Accountability	17	2%	7	18%
Abortion	17	2%	3	8%
Health System Strengthening	12	1%	8	21%
FGM/C	12	1%	3	8%
ECE	12	1%	7	18%
Universal Health Care	10	1%	3	8%
Terminology	5	0.5%	4	10%
Mental Health	5	0.5%	3	8%

Summary of Member Policy Priorities⁷

Summary of Member Policy Priorities		
High Policy Priority	Medium Policy Priority	Low Policy Priority
<ul style="list-style-type: none"> ○ RMNCAH ○ Gender Equality ○ ODA and Financing ○ Gender Transformative Approach ○ Fragile Contexts ○ SRHR ○ Participation ○ Gender Equity ○ <i>Cultivating partnerships and local participation</i> ○ <i>Amplifying the voices of vulnerable populations in local programming</i> ○ <i>Investing in fragile settings</i> ○ <i>Improve flexibility within funding processes</i> ○ <i>Foster collaboration amongst NGOs rather than competition</i> 	<ul style="list-style-type: none"> ○ Adolescents ○ Climate Change ○ Funding Processes ○ Feminist Lens ○ WASH ○ Innovation ○ Nutrition ○ Multi-Input Approaches ○ Boys and Men ○ Health System Strengthening ○ <i>Supporting innovation in development policy</i> ○ <i>Situating innovation as a cross-cutting theme in policy</i> ○ <i>Developing multi-input approaches to address fragility</i> ○ HIV ○ Adolescent health ○ Adolescent-centered ○ <i>Improve funding process transparency to applicants</i> ○ <i>Improve crisis funding mechanism</i> 	<ul style="list-style-type: none"> ○ Accountability ○ Abortion ○ FGM/C ○ ECE ○ Universal Health Care ○ Terminology ○ Mental Health ○ <i>Revising accountability measures to be less cumbersome for organizations with limited resources</i> ○ <i>Introducing new modes of measuring impact and program success</i> ○ <i>Collect aggregated data to support programming</i> ○ SGBV ○ <i>Access to safe abortion care</i> ○ <i>Menstrual hygiene management</i> ○ <i>Integrate gender equality funding requirements</i> ○ <i>Increase funding applications deadlines</i>

Reference List

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Buttolph, J., Reynolds, H.T. (2005). Political Science Research Methods. Fifth Edition. CQ Press.

Global Affairs Canada. (2016, May 6). International assistance review: Discussion paper. Retrieved from <http://international.gc.ca/world-monde/development-developpement/iar-consultations-eai/document.aspx?lang=eng>

⁷ The table presents a summary of Member policy priorities by number of sources (i.e., Member submissions) per corresponding node. The *Italicized* priorities denote use of the PET to determine level of policy priority.

Global Affairs Canada. (2016, December 21). *2016 International assistance review: What we heard*. Retrieved from <http://international.gc.ca/world-monde/development-developpement/iar-consultations-eai/report-rapport.aspx?lang=eng>