



Organizing Cross-Government Collaboration Briefing Note

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Prepared for the Harvard Ministerial Leadership Program by:

Nicholas Masada, Ed.M., Harvard Graduate School of Education

Reviewed and Edited by:

Dr. Karima Ladhani, Assistant Director, Program Research & Development

Dr. Michael Sinclair, Executive Director

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EXECUTIVE SUMMARY

Inter-ministerial collaboration can take a number of forms, varying greatly in commitment and scale. A ministry’s commitment to collaboration can range from informal to formal and the scale of collaboration can range from bilateral to whole-of-government.

Commitment		
Informal	Intermediate	Formal
Unofficially Recognized, Non-Binding	Officially Recognized, Non-Binding	Officially Recognized, Legally Binding

Scale		
Bilateral	Sectoral	Whole-of-Government
Cooperation of 2 ministries	Cooperation of 3+ ministries (with related interests)	Cooperation of many ministries to implement a coordinated national strategy aimed at achieving a major national goal

Why Collaborate?

There are significant advantages to working across ministries in various situations, but inter-ministerial collaboration defies the traditional silo organization of government. Changing the way government usually works is not easy and should be deliberately planned and diligently managed if it is to be effective.

Benefits	<ul style="list-style-type: none"> • Optimize use of public resources • Combine and amplify related skills and capacities • Welcome a wider inclusion of perspectives into the policymaking process and increase the degree to which policies reflect the will of the public by involving previously unheard perspectives • Increase clarity surrounding roles, responsibilities, goals, and mission • Increase the satisfaction of constituents and enthusiasm of staff
Barriers	<ul style="list-style-type: none"> • Challenging to ensure shared ownership for inter-ministerial collaboration • Overlapping jurisdiction between ministries • Unwillingness of some ministers and other government officials to relinquish and share power over decision-making and agenda-setting processes • Lack of clearly operationalized collaboration plans

When to Collaborate:

Ministers should be routinely on the lookout for opportunities to advance their specific policy goals or national priorities through closer collaboration with other ministries or government agencies. Such opportunities may be relatively modest, focusing on one particular part of a bigger undertaking, or it could be jointly implementing a major complex program. In evaluating opportunities for inter-ministerial collaboration, ministers should consider the following key factors:

Considerations	<ul style="list-style-type: none"> • <i>Length of goals to be achieved:</i> Opportunity to formalize medium to long term engagement between ministries towards a common goal • <i>Level of information sharing required:</i> Opportunity to integrate, share, and better validate data from different sources • <i>Level of existing collaboration:</i> Opportunity to build on existing institutional relationships • <i>Required budgetary resources:</i> Opportunity to consolidate resources to be used more efficiently • <i>Required skills and capacity:</i> Opportunity for peer learning and knowledge sharing across ministries • <i>Required political capital:</i> Opportunity to break through the status quo and accomplish meaningful institutional and sectoral change but sufficient risk tolerance needed
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How to Collaborate:

The sustainability and success of a collaborative partnership fundamentally depends on the amount of time and effort invested in setting up the partnership, instituting the most practical organizational structure to oversee and implement the initiative, and consistent ministerial leadership. Clear lines of responsibility and accountability are essential. The following are key factors for the success of inter-ministerial collaboration:

Enabling Factors	<ul style="list-style-type: none"> • Existence of <i>strong and sustained ministerial initiative</i> to drive process • <i>Detailed, inclusive planning</i> before implementation • <i>Clear roles, routines, and lines of accountability</i> for all parties • <i>Relentless consultation</i> to ensure inclusive input and generate cultural buy-in • <i>Downstream collaborative routines and structures</i> at regional levels when required • <i>Designated budgetary resources</i> pooled and allocated to a singular plan
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1. WHY COLLABORATE? EVIDENCE FOR INTER-MINISTERIAL COLLABORATION

“...collaboration is capable of addressing complex social problems more effectively than ever before, achieving more and better outputs and outcomes for individuals and their families, empowering communities to be more self-reliant, and creating a more inclusive and coordinated public sector.”

-Debiprosad Majumdar, Social Policy Journal of New Zealand (2006)

As collaborative efforts in countries of varying cultural, historical, and economic backgrounds have gained more recognition, common learnings have emerged. This section sets out the evidence about inter-ministerial collaboration regarding varied approaches, benefits, and barriers for consideration by government leaders regardless of their country’s governance system or size of government.

Approaches to Inter-Ministerial Collaboration

Inter-ministerial collaboration can take a number of forms, varying in **commitment** and **scale** (Dill & Kopsick, 2017; Colgan, Kennedy, & Doherty, 2014). A ministry’s **commitment** to collaboration can range from the informal to the formal as outlined in Table 1. The **scale** of inter-ministerial collaboration ranges from bilateral to whole-of-government as outlined in Table 2.

Commitment		
Informal	Intermediate	Formal
Unofficially Recognized, Non-Binding <i>E.g. Unscheduled, periodic sharing of information</i>	Officially Recognized, Non-Binding <i>E.g. Memorandum of understanding</i>	Officially Recognized, Legally Binding <i>E.g. Collaboration enshrined in law</i>

Table 1. Levels of commitment in inter-ministerial collaboration
Adapted from Dill and Kopsick, 2017

Scale		
Bilateral	Sectoral	Whole-of-Government
Cooperation of two ministries	Cooperation of three or more ministries (typically those with related interests)	Cooperation of many ministries to implement a coordinated national strategy aimed at achieving a major national goal

Table 2. Levels of scale in inter-ministerial collaboration

There is no single way to collaborate effectively. Ministers can select the form of collaboration – with regards to level of commitment and scale – that is most appropriately suited to their goal. As an example, Table 3 outlines multiple forms of inter-ministerial collaboration across the spectrums of scale and commitment that could be implemented by a government looking to improve its youth health outcomes.

Scale	Whole-of-Government	In their inaugural address, the Prime Minister asks ministry leaders to prioritize sharing of data related to youth health across ministries	The government submits a proposal soliciting international funding that will be used to create an integrated, cross-government data platform to better monitor youth health outcomes and other relevant data across all sectors	The Prime Minister declares improvement of youth health to be a national priority in the country's national economic development plan and ties significant national-level funding to one inter-ministerial plan to improve youth health indicators
	Sectoral	The Ministries of Education, Health, and Housing grant respective Deputy Ministers access to data focused on youth health	The Ministries of Education, Health, and Transportation draft and sign a non-binding agreement to share responsibility in ensuring youth have physical access to affordable healthcare	The Ministries of Education, Health, Sport, and Agriculture are required by legislation to contribute representatives to a taskforce aimed at reducing rates of childhood obesity
	Bilateral	The Ministry of Education agrees to exchange student health data with the Ministry of Health on a quarterly basis	The Ministry of Education signs a MOU with the Ministry of Health to create a taskforce and conduct research on the integration of healthcare services into schools	Parliament passes a law mandating collaboration between the Ministry of Health and the Ministry of Education to improve youth health, requiring monthly reports detailing the outcomes
		Informal	Intermediate	Formal
Commitment				

Table 3. Example Demonstrating Various Forms of Inter-Ministerial Collaboration to Improve Youth Health Outcomes

Benefits of Inter-Ministerial Collaboration

When implemented with sufficient ministerial commitment and a clearly operationalized collaboration plan, the benefits of inter-ministerial collaboration can significantly bolster existing ministerial efforts and create long-lasting institutional change. Effective collaboration between ministries can achieve numerous benefits as outlined below:

- *Optimize use of public resources:* Given the interrelated nature of most human development challenges, a key benefit of collaboration is its ability to use budgets for intersecting programs that overlap, allowing for more efficient use of public funding. Furthermore, improving returns on investment can motivate greater investment for future programs, from both domestic and international sources (Majumdar, 2006).
- *Combine and amplify related skills and capacities:* Collaboration across ministries requires ministry officials to plan and implement together, prompting learning about each other's sectoral considerations and developing intersectoral capabilities that support more effective and comprehensive programs (Wanna, 2008).
- *Welcome a wider inclusion of perspectives into the policymaking process, thereby increasing the degree to which policies reflect the will of the public:* Inter-ministerial collaboration forces decision makers to hear varying perspectives and weigh costs and benefits beyond their sector – this is a decision-making process that better reflects human development and societal interactions (Wanna, 2008).
- *Increase clarity surrounding roles, responsibilities, goals, and mission:* Tasks are more likely to be accomplished when the path to completion is reached together, when lines of accountability are rigid, and when communication plans are clear among all collaborating parties (Majumdar, 2006).
- *Increase the satisfaction of constituents and enthusiasm of staff:* Ministry staff feel pride in delivering services in a more efficient way while constituents notice and appreciate integrated public services and effective public spending (Roberts & O'Connor, 2007).

Barriers to Inter-Ministerial Collaboration

Inter-ministerial collaboration has the ability to expand the quality and reach of government services. To achieve this potential, however, ministers must be prepared to identify and address complex challenges.

Even the most well-intentioned collaborative effort can fall victim to these common barriers:

- *Ensuring shared ownership for inter-ministerial collaboration can be challenging:* While effective inter-ministerial collaboration requires clear leadership and lines of accountability, there is also a need for shared ownership to ensure that collaborative efforts are prioritized and ministerial obligations are met. Sharing credit among ministries is critical to ensure shared reward but also shared responsibility for collaborative implementation.
- *Presence of conflicting jurisdictions between ministries:* Government ministries are built to operate in silos and yet often have highly interrelated or even overlapping mandates. For example, more than 50 percent of Sub-Saharan African countries and over 70 percent of West and Central African countries education systems are represented by two to four ministries, representing a challenge in establishing integrated goals and policies that will allow them to reach Sustainable Development Goal 4 (Neyestani-Hailu & Reuge, 2018).
- *Some ministers and other government officials are unwilling to relinquish and share power over decision-making and agenda-setting processes:* Ministerial commitment is paramount to effective collaboration. However, many inter-ministerial initiatives exist within the context of other competitive political and financial forces. Ministers must be on board to sacrifice some amount of independent control for collective gain.
- *Lack of clearly operationalized collaboration plans:* Collaboration in theory is insufficient. Ministers must agree to clear lines of accountability, communication routines, and chains of implementation at the outset of collaboration.

2. HOW TO COLLABORATE? APPLIED EXAMPLES OF INTER-MINISTERIAL COLLABORATION

“Public sector performance is fundamentally about governments being able to deliver on their policy commitments for the benefit of their citizens... However, many countries adopt sensible policies that do not result in better healthcare, education, sanitation, infrastructure management or reduced crime... Improving public sector performance therefore entails closing [implementation] gaps.”

-2018 World Bank Report on Public Sector Performance

Once ministers have the intention to collaborate, they must ensure that they have a plan to do so. Just as “policy without implementation is worse than no policy at all,” the intention to collaborate without a plan to operationalize it can actually obstruct progress (Majumdar, 2006). Thus, in order to effectively implement a collaborative initiative, ministers should clearly identify the following for each participating ministry:

- **Programmatic Role**
 - What programs and/or elements of the collaborative initiative is this minister and ministry responsible for implementing? What are the key actions that they will take to do so? What is the timeline associated with each of these key actions?
- **Political Role**
 - How can this minister and ministry use their political capital to support the collaborative initiative? How can they generate support with the President and/or Prime Minister, other ministers, constituents, and other stakeholders?
- **Collaborative Role**
 - What is this minister and ministry’s role in communicating, liaising, holding others’ accountable to support effective collaboration? Who is the lead ministry? What lines of accountability will be drawn between ministries and what communication routines are expected? What is the chain of implementation?
- **Budgetary Information**
 - How will fiscal space be created to support the cost of this collaborative initiative?

This section includes examples of collaborative initiatives that showcase collaboration at different levels of commitment and scale, examine how each initiative was operationalized, and the pitfalls and successes that resulted. Table 4 highlights where these case studies appear within the spectrum of scale and commitment.

Scale	Whole-of-Government		A. Moldova	B. Ethiopia,
	Sectoral			C. Brazil
	Bilateral		D. Kenya	
		Informal	Intermediate	Formal
Commitment				

Table 4. Case Studies in Inter-Ministerial Collaboration

A. Collaborating to Improve the Livelihoods and Promote the Rights of Persons with Disabilities in Moldova

Ministries/Agencies Involved:	Ministry of Education	National Bureau of Statistics	Ministry of Labor, Social Protection and Family	Ministry of Health
Programmatic, Political, and/or Collaboration Roles:	Prioritized funding of project; Code of Education modified to be more inclusive of students with disabilities; national curriculum on inclusive education created and used to train hundreds of teachers	Began measuring information related to inclusive education and reformed their data collection process to promote accurate monitoring of project progress	Worked with organizations representing persons living with mental disabilities to reintegrate unnecessarily institutionalized persons back into their communities	During the writing and implementation of a national health initiative, ensured that community mental health centers were established in every district of the country
Budgetary Information:	The Ministry of Education prioritized funding intended to ensure children with disabilities had access to mainstream education services; supplemented with international funding			
Successes:	Reduced traditionally siloed nature of ministries; collective strategy was carefully designed before the intervention began; society’s understanding of the rights of persons with disabilities increased; the project planning teams involved persons who would be affected by its implementation; capacity of local health authorities increased; judges’ understanding of legal rights of persons with mental disabilities improved; new admissions to mental health institutions was reduced and there was an increase in the reintegration of former institution residents into original communities			
Pitfalls:	Collaboration limited to singular funding proposal, not institutionalized to support future collaborative efforts			

From 2005 to 2015, the number of citizens with disabilities in Moldova had increased by 20% (UNDG, 2015). Access and quality of treatment for those with mental and intellectual disabilities was of particular concern for the government, as they are some of the most common types of disability in Moldova and these persons “are more vulnerable to exploitation, violence, and abuse and other losses of human rights” (UNDG, 2015). A welcome invitation arrived in 2012 when the government of Moldova was encouraged to submit plans for funding aimed at advancing the rights of its citizens with disabilities to the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD). Leaders created a plan that involved the high-level collaboration of many segments of the Moldovan government which was eventually accepted and, following financial and logistical support from the UN, implementation began in January 2013 (UNDG, 2015).

Moldova’s national campaign to improve the standard of living for their citizens with disabilities utilized the whole-of-government approach. The plan submitted to the UN required that ministers and leaders of national bodies reform their respective areas of the government in a collective march towards a society more inclusive and informed of disability rights. Three of the core goals of the plan were to increase the capacity of city and regional authorities to support Moldovans with disabilities locally, deinstitutionalize persons whose disabilities did not require hospitalization, and increase the inclusivity of education systems. Each ministry had clearly defined responsibilities for implementation within their sector. The Ministry of Education developed a new national curriculum that emphasized inclusivity, taught practitioners how to

effectively instruct all types of students, and ensured that their schools were inclusive. With the goal of accurately monitoring the implementation of inclusive practices in schools, the National Bureau of Statistics began to measure information related to inclusive education and reformed the framework related to their data collection process. The Ministry of Labor, Social Protection and Family introduced the *National Strategy and Action Plan on Adult Deinstitutionalization* to ensure that mental healthcare became covered under primary healthcare plans and that community health centers were opened in every region of Moldova. Finally, the Ministry of Health created the *National Mental Health Programme*, a nationwide medical strategy that resulted in the opening of community mental health centers in all districts of Moldova starting in January 2014.

B. Collaborating under the Seqota Declaration to Eliminate Stunting in in Ethiopia

Ministries/ Agencies Involved:	Ministry of Health	Ministry of Agriculture and Natural Resources	Ministry of Livestock and Fisheries	Ministry of Water, Irrigation, and Energy	Ministry of Education	Ministry of Labor and Social Affairs
Programmatic Political, and/or Collaboration Role:	Lead ministry; brought on board Deputy Prime Minister and Regional Presidents of critical regions to show support; improved delivery of direct nutrition interventions through the public health system; improved WaSH education and behavior	Increased production and consumption of locally available, nutrient dense crops; Co-Chair coordinated multisectoral committees	Increased small-scale livestock ownership	Expanded irrigation potential to improve water-use efficiency and extend growing seasons; improved quality and increased quantity of water in households, health facilities, and schools; improved access to hygienic sanitation facilities	Included school health and nutrition strategies in education programs to improve related services for school-age children; Co-Chair coordinated multisectoral committees	Expanded existing social safety net program to improve child protection, women’s empowerment, gender equity, and economic access
Budgetary Information:	Despite limited initial funds, strong guidance and commitment by government leaders effectively developed political will and led to increased financial investment; supported by international funding					
Successes:	Leaders’ effective use of political pressure yielded funding from donors that would otherwise not have been available; reduced traditionally siloed nature of ministries; clear organizational structure for collaboration					
Pitfalls:	Weak accountability between collaborating ministries; effectiveness of coordination varies at regional levels of government					

Ethiopia has long identified stunting as a serious, intersectoral concern impeding its human capital development efforts. Children who are stunted have, on average, lower academic performance, reduced wages as adults, and a potentially heightened risk of nutrition-related chronic illnesses later in life (WHO, n.d.). Early efforts to collaborate with regards to nutrition led to the development of the National Nutrition Coordinating Body (NNCB) and the National Nutrition Technical Committee (NNTC) as part of the National Nutrition Program I (NNP I, 2008-2015) (HMLP, 2019). The NNCB involves 13 government sectors and is led by the Minister of Health with the Ministers of Agriculture and Education as co-chairs. It meets every six months and develops an annual work plan to ensure that various sectors are mainstreaming nutrition activities into detailed sector-specific plans, allocating budget to nutrition interventions, and assigning focal persons to work on nutrition. The NNTC, which also involves 13 government sectors and nongovernmental stakeholders, has three steering committees on program management, food fortification, and monitoring and evaluation. These two national entities have different goals as the NNCB is responsible for providing policy and strategic decisions related to the NNP. However, the NNTC works under the NNCB, and is responsible for the technical work related to the federal level NNP coordination. At the regional level, there is a similar structure, known as the RNCB and RNTC.

Multisectoral coordination as part of the NNPI was able to demonstrate some improvement in outcomes, but was not fully effective in creating the intended outcomes. Interventions in agriculture, health, and other sectors were not properly contextualized and everyone in government acted separately without keeping an eye on what was actually necessary to get the job done. The Minister of Health knew that incorporating nutrition goals and actions into existing programs across sectors could enhance said programs' nutrition sensitivity and thus their likelihood of improving nutrition outcomes. Thus, in July 2015, the government initiated the Seqota Declaration, a high-level whole-of-government commitment to end stunting in children under two years by 2030. The Declaration was accompanied by the launch of the National Nutrition Program II (NNP II, 2016-2020) and the National Nutrition-Sensitive Agriculture Strategy (2016-2020). The Seqota Declaration builds on and supports the implementation of NNP II which highlights the "Five Building Blocks of Effective Nutrition Governance" as consensus building and coordination, political commitment, financing, service delivery capacity, and transparency and accountability (HMLP, 2019).

The Seqota Declaration has ten multisectoral strategic objectives and is implemented by six federal sectors (Ministry of Health; Ministry of Agriculture; Ministry of Water, Irrigation and Energy; Minister of Labor and Social Affairs; Ministry of Education; Ministry of Women, Youth, and Children). In addition to these six ministries, development partners and community organizations are also involved. To ensure stakeholders were correctly envisioning collaboration in practice, they adopted a clear collaboration framework known as the "Three Ones" which meant that there was "one goal, one plan, and one monitoring and evaluation system" in place for better coordination across sectors (HMLP, 2019). The "Three Ones" collaboration framework dictates that all nutrition-related monitoring and evaluation activities be assessed under one integrated and unified system. The different sectors involved in the Seqota Declaration each have a list of key performance indicators for which they are responsible. These indicators cut across

sectors where relevant. For example, key WaSH indicators illustrated that the MOH needed to more effectively promote hygiene and sanitation practices by collaborating with the MOE during targeted interventions at school. Routine service and administrative records collected through sectoral information systems were used to provide information for timely monitoring, supervisory visits, and review meetings. Currently, the FMOH and UNICEF are working together on a pilot Unified Nutrition Information System (UNISE), a performance management tool that allows all sectors and partners to upload their targets and results so as to generate scorecards at the federal, regional, zonal, and woreda levels. This unified system is extremely important for progress towards meeting Seqota Declaration goals as it facilitates robust and continuous nutrition data management and becomes useful when seeking further investment.

In the past, there had been concerns about issues related to the bureaucracy of government, which limited intersectoral coordination mechanisms to exist only horizontally at federal and regional levels. In order to achieve the goals of the Seqota Declaration, it was necessary to establish entities with people from different sectors that would be fully dedicated to the initiative. These entities were realized with the creation of three Program Delivery Units (PDUs), a tangible “embodiment of intersectoral government” (HMPLP, 2019). PDUs are small teams of multisectoral experts placed in the federal, Amhara, and Tigray President’s offices to secure higher-level political commitment to regional nutrition activities, to ensure accountability to the highest level of the regional government, and to provide technical leadership and performance management support.

Approximately two years into the implementation of NNP II and the Seqota Declaration, it is clear that the NNCB has played an important role in bringing together various ministries. However, ongoing challenges with accountability and ownership continue – there is a persistent perception that nutrition is primarily a Ministry of Health issue and a lack of accountability across ministries represents a barrier to successful multisectoral coordination. Even as nutrition has grown in national importance and public awareness, ministry staff feel that with no cross-ministry reporting structures, there has been a lack of ownership and clarity about responsibilities for nutrition outcomes. A key component of accountability is the clear delineation of roles and responsibilities for all stakeholders. However, defining a role for each sector is a challenge when it comes to nutrition: Deciding where the work of one ministry starts and ends and how it interfaces with other ministries at the national, regional, and local levels is a dynamic process with implications for political interests, leadership, budgeting, and accountability.

C. Collaborating under Criança Feliz to Improve Early Childhood Development in Brazil

Ministries/ Agencies Involved:	Ministry of Citizenship	Ministry of Education	Ministry of Human Rights and Culture	Ministry of Health
Programmatic Political, and/or Collaboration Role:	Lead ministry; coordinated efforts through Secretariat for Promotion of Human Development; established home-visiting budget	Accommodated children found to have learning disabilities during home visits	Ensured that home visits under the program included culturally relevant activities for all children	Improved the health conditions of children found to be ill during home visits
Budgetary Information:	Each ministry contributed financially to the program; the National Management Committee, the main coordinating agency, determined the overall funding that the inter-ministerial team would allocate to the program; the Ministry of Social Development determined the home-visiting budget			
Successes:	Led by a passionate and persistent minister; scientific evidence supported the initiative; civil society coalition organized as a formal network; parliamentary coalition with representatives from all political groups was formed; shared management structures were constructed; implemented by a coordinating body comprised of diverse stakeholders			
Pitfalls:	On-the-ground implementation was highly variable due to unreliable levels of local preparation; some families resisted this new program fearing they would lose benefits from existing social programs			

In October 2016, Brazil had 15 million children under the age of four and high rates of poverty (HMLP, 2019). Economic progress had been made through cash transfer programs, but they were not enough to break the cycle of poverty and overcome the long-term challenges of violence in the country. Thus, Brazil’s Ministry of Social and Agrarian Development (now Ministry of Citizenship) introduced a collaborative early childhood development intervention called the Criança Feliz Program (PCF). PCF is a program that involves regular home visitations as the basis for multisectoral support of early childhood development. *Primeira Infância Melhor* (PIM), a predecessor program to PCF, established the expectation that the division of ministry roles during home visits be widely recognized. For example, the discovery of a medical issue would require the Ministry of Health to act; the presence of a child with a learning disability automatically prompts action from the Ministry of Education; the Ministry of Human Rights and Culture is obliged to ensure that the government visitors brought culturally appropriate materials with them to the homes.

The introduction of PCF was only possible due to the significant groundwork laid by Minister of Citizenship Osmar Terra that established early childhood care as a national priority: Minister Terra launched a cross-sector alliance of child advocacy stakeholders in 2003, formed another far-reaching coalition in 2007 that united actors from across government ministries, civil society organizations, and businesses, and later led the charge to create a collection of representatives from ministries that sought to enact a federal law instituting a national legal framework guaranteeing the rights of children across varying public policy domains. PCF began as a direct consequence of this federal law.

The Ministry of Citizenship coordinates the efforts through the Secretariat for the Promotion of Human Development and management committees exist at the national, state, and municipal levels. The National Management Committee houses representatives from the Ministries of Education, Health, Human Rights, Culture and Social Development in what they call the “inter-ministerial government space” (HMLP, 2019). This is a place in which all involved parties have previously agreed to uphold the mission of implementing PCF; as a result, it serves as a place to coordinate and solve technical issues, rather than argue about objectives. This intersectoral committee was created by presidential decree, giving it the formality and gravitas to ensure that each ministry prioritizes it appropriately. The management committee has high-level representation from each ministry, and it is therefore a place for decision-making, rather than day-to-day collaboration. To get things done, there is also the Technical Group, under which a number of inter-ministerial working groups coordinate efforts.

An example of collaboration that has been achieved by the Technical Group and the National Management Committee is the redesign of the notebook that mothers receive after they give birth. Traditionally, the Ministry of Health would provide such mothers a notebook that included general child health tips. Now, since the creation of the National Management Committee, these notebooks include information about child development milestones and cultural specificities contributed by other ministries. Other examples of collaboration include a guide for visitors for children with disabilities and the development of training materials and workshops for both visitors and families.

The general duties of the National Management Committee are to strengthen the intersectionality of the program, to approve training and program resources, to make decisions about the stages of the program, and to agree on regulatory instruments that distribute responsibilities for different policies. One especially important responsibility, though, is to set the intersectoral budget.

As coordinator of the program, the Ministry of Citizenship sets the home-visiting budget, which it distributes to the municipalities through the National Fund of Social Assistance. Its leaders decided to organize this fund so that the resources would flow directly from the ministry to each municipality, avoiding intermediaries and countless individual contracts. However, a budget for home-visiting is inadequate to ensure the success of PCF. It was important that each ministry allocate funds in order to effectively address the intersectoral needs that emerge from the visits. The National Management Committee is the place where the ministries negotiate the allocations that each ministry will contribute to PCF.

At the state level, similar Management Committees exist, but are composed of representatives from State Secretariats. The role of Secretariats is to monitor the implementation and to give technical assistance to the municipalities. To achieve this goal, Secretariats hire *multiplicadores*, professionals who are educated by national-level trainers. In turn, they go on to train local coordinators, who train local visitors. This modality of waterfall training has led to a number of implementation problems; however, it was the only way that Brazil could scale the program to over 2,000 municipalities in just one and a half years.

At the municipal level, Municipal Management Committees are much more operational in scope. They discuss, support, and approve operational issues of the program. For instance, they identify the beneficiaries of home visits, hire and organize local training for visitors, follow up with different sectoral responses on the demands that they identify, and coordinate with local NGO networks. At the municipal level, intersectoral collaboration is often informal and they escalate any challenges to the state level.

A final component of Brazil’s inter-ministerial implementation effort is its integrated information system, *Cadastro Único*, which allows different ministries to identify families and work from the same data. This has been an important tool because without it, the registries of potential beneficiaries housed by each ministry would vary, thereby leading to coordination problems and leaving people unattended. This has also allowed for more effective monitoring and evaluation of implementation across ministries.

Today, after almost three years, PCF has survived a change of president in Brazil and it grows day by day as more and more municipalities voluntarily sign up for the program. To date, PCF has made it possible for nearly 500,000 children and 85,000 pregnant women in Brazil to receive home visits every week, a total of almost 2.4 million visits a month in over 2,000 municipalities (HMLP, 2019).

D. Collaborating Through a Zoonotic Disease Unit (ZDU) to Improve Public Health Outcomes in Kenya

Ministries/Agencies Involved:	Ministry of Health	Ministry of Agriculture, Livestock and Fisheries
Programmatic, Political, and/or Collaboration Role:	Contributed one medical epidemiologist to ZDU; created and supported county-level One Health teams; advocated for and coordinated funding	Contributed one veterinary epidemiologist to ZDU; created and supported county-level One Health teams; advocated for and coordinated funding
Budgetary Information:	Each ministry contributed financially to the ZDU and supplemented ZDU funds by engaging multilateral and bilateral agencies and partners, local and international research institutions and universities working on zoonosis in Kenya Error! Bookmark not defined.	
Successes:	Reduced traditionally siloed nature of ministries and sectors; strengthened capacity for surveillance and reporting in the animal health sector; foundation of effective national coordinating office	
Pitfalls:	Implementation gaps continued at the local level; unequal financial capacity of participating ministries prevented full realization of plan; change in government structure required modification of strategy	

A recent global movement called *One Health* recognizes the connection between the health of people, animals, and the environment and seeks to employ a collaborative, multisectoral approach to achieve improved outcomes for each. Kenya is one country that utilizes the One Health approach. On August 2, 2011, the Ministry of Health (MoH) and Ministry of Agriculture, Livestock and Fisheries (MALF) signed a Memorandum of Understanding agreeing to collaborate by jointly administering the ZDU (Republic of Kenya, 2014). The ideal structure and mission of the

ZDU was investigated and debated for four years before being finalized and the divide in power and responsibility between ministries was clearly specified before the collaboration began. The MoH and MALF maintain equal authority over the ZDU, each contributing financially and periodically staffing the unit with one senior epidemiologist who ultimately returns to their respective ministry to report updates (Republic of Kenya, 2014; Mbabu et. al, 2014). Through the ZDU, the ministries co-author human and animal health studies, create and support county-level One Health teams, and advocate for and coordinate funding (Mwatondo et al., 2017). The national One Health coordination office was tasked with improving the prevention, monitoring, and control of zoonotic epidemics. While the ZDU is a primarily a bilateral approach to collaboration, the team is empowered to collaborate with experts affiliated with both government and private sectors from veterinary health, public health, wildlife health, and information communication and technology, among others.

Relatedly, forward-looking changes were made to the education and on-the-job training of veterinary and medical fields. Since 2004, veterinarian and medical students have had the option to lead teams comprised of both fields through a zoonotic outbreak investigation as part of their training in order to develop a One Health-ready workforce (Mwatondo et al., 2017). This joint training approach has removed long-standing boundaries between the education systems and replaced them with collective networks. This collaboration continues into their professional lives, when medical specialists from the MoH and veterinary specialists from the MALF are trained in unison, allowing members from each ministry to acquire a deep understanding of the other (Munyua et al., 2019).

Since its foundation, the ZDU and its partners have discovered new pathogens key to improving readiness for zoonotic disease prevention; widened and improved national programming that increases public awareness of zoonotic disease prevention; developed and updated evidence-based prioritization of zoonotic diseases critical to public safety; incorporated the reporting of zoonotic diseases into the general disease surveillance system, ensuring prioritized zoonotic diseases are no longer neglected; and developed the *Strategic Plan for the Elimination of Human Rabies in Kenya 2014-2030* (Munyua et al., 2019; Octaria et al., 2018).

3. SUCCESSFUL TAKEAWAYS: A DECISION-MAKING GUIDE

This section synthesizes the previous information into a decision-making manual that can guide policymakers through the process of launching collaborative efforts across ministries.

Determining the Optimal Level of Commitment

Collaboration between ministers spans a spectrum of commitment ranging from the informal to the formal. The characteristics of a given intervention that spurs inter-ministerial collaboration can provide helpful insight into determining the ideal level of commitment for that endeavor.

Leaders of an intervention would want to advocate for **informal** collaboration if:

- The intervention involves short-term goals (Majumdar, 2006);
- The intervention would be better supported by the *occasional* sharing of information or sharing of limited resources because the initial process of completely intertwining budgets and/or significant resources would be too time-consuming relative to the goals; and/or
- Existing collaboration between stakeholders is weak or nonexistent and it seems unlikely that coordination will be mandated by law anytime soon.

Alternatively, an intervention should be coordinated and implemented through **formal** inter-ministerial collaboration if:

- The intervention seeks to generate substantial, long-term change (Majumdar, 2006);
- The intervention would benefit from deeply connected budgets and in-depth deliberation on every aspect of the process and has the initial time to devote to this process; and/or
- The political will exists to enshrine collaborative principles between stakeholders in law.

Determining the Optimal Level of Scale

Inter-ministerial collaboration can occur between two ministries (bilateral), three or more ministries of related focus (sectoral), or involve all or most government ministries (whole-of-government). When concluding which of these three avenues of scale is most appropriate for a given collaboration, it is most important to consider the number, demographics, and needs of the targeted constituents. Consider the following examples.

- ***Bilateral collaboration:*** The Ministry of Veterans Affairs is interested in improving the lives of military service members after the conclusion of their service. It has been determined that by far the most pressing challenge for former military service members is meeting the expected qualifications of new jobs as they transition into new sectors. Thus, increasing the accessibility and quality of veteran job training programs will be the primary focus of their intervention. As this is a specific group of citizens and a single issue has been identified as the focus, the Minister of Veteran Affairs has decided to collaborate with the Ministry of Labor under a bilateral agreement to carry out this intervention.
- ***Sectoral collaboration:*** The Ministry of Housing is attempting to drastically reduce the rate of homelessness among youth in its country. Upon examination, it becomes clear that the

housing status of parents (and subsequently their youth) is strongly associated with the level to which parents have access to quality education and healthcare. Realizing that providing housing to homeless youth will require dedicated support from these related sectors, the Ministry of Housing enlists the Ministry of Education and the Ministry of Health to develop a plan and collaborate throughout its implementation.

- *Whole-of-government collaboration:* A Prime Minister is dedicated to reforming the way in which their country consumes energy. They have pushed for and achieved the passing of legislation that requires every ministry to submit a plan for approval that demonstrates how they will shift their operations to be run on primarily green energies by 2030. The Prime Minister and each ministry head then collaborate to develop best practices and reasonable benchmarks, collectively reassessing progress every six months and making changes when necessary.

Enabling Factors for Successful Inter-Ministerial Collaboration

- *Existence of strong and sustained political leadership:* The preliminary political backing of at least one senior official is vital to launching and sustaining collaborative efforts. If such an official is not involved, stakeholders interested in installing a collaborative intervention should prioritize enlisting one. The government leader should be “technically skilled and politically savvy, as well as close to the chief executive” and should be adept at forming and maintaining productive relationships (UNDG, 2015).
- *Detailed, inclusive planning occurred before implementation:* Inter-ministerial interventions operate with shared elements of responsibility and accountability and any lapse in understanding of the daily objectives or overall mission threatens to derail the efficacy of the initiative. One effective way to prevent such lapses is to develop robust collaboration plans that clearly outline, roles, routines, and the chain of implementation.
- *Significant emphasis placed on the creation of buy-in and changing of culture:* It is likely that there will always be some level of pushback when collaboration begin. Collaborative efforts that were most successful anticipated this and responded by uniting the curriculum of students who will eventually support the intervention, hosting communal training sessions of stakeholders, and soliciting the assistance of top-level leaders (UNDG, 2015).
- *Coordinating offices established at different regional levels:* Particularly when an intervention requires collaboration across significant geographic boundaries, the installment of coordinating offices across a country at regional and municipal levels is helpful in ensuring constant and clear communication between stakeholders and to support downstream implementation of collaborative efforts.

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