**Monitoring implementation and progress of the Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea**

This guidance is provided to help you consider the steps required to monitor the implementation and progress of the Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD) recommendations in your country. This guidance is designed to complement the *Actions for Advocacy* document to enable you to track and monitor progress in relation to the implementation of the GAPPD in your national context.

**Working in Coalition:**

- The steps outlined below to monitor implementation of the GAPPD recommendations can and should be undertaken in coalitions wherever possible.

- Before beginning work around the GAPPD, determine what the existing child health working group (WG), taskforce, coalition, or mechanism is in your country. Engage with the existing WG and attend relevant meetings to ensure discussions focus on integrating the recommendations of the GAPPD into broader national child health strategies.
  
  - Form a subgroup only if the existing WG will not be advocating for or mobilising around the GAPPD framework. Identify other WGs and coalitions (maternal, reproductive health, malaria, family planning, integrated or community case management).
  
  - Engage with other WGs to identify areas of similar work and coordinate plans and activities to eliminate duplication of interventions and outreach.

**Monitoring the implementation of the GAPPD framework can be divided into a four step process:**

1. Undertake a ‘mapping’ exercise for monitoring implementation of the government’s commitments to the GAPPD:
   a. Who are the key stakeholders relevant to the GAPPD?
      i. Identify relevant policymakers and decision-makers at all levels of government. Consider what actions the respective stakeholders should take.
   b. Determine what progress has already been made relating to the treatment and prevention of pneumonia and diarrhoea:
      i. Talk to different partners—other civil society organizations (CSOs), nongovernmental organizations (NGOs), ministry of health representatives—to find out what is happening, and where there may be gaps in policies or programmes.
      ii. Consider what activities will work to overcome those gaps, and by when. Develop a map of the actions the government intends to take, or has undertaken.
   c. Based on this information, prepare a strategy to monitor the implementation of the recommendations in partnership with other stakeholders.
      i. Identify the key partners or decision-makers responsible for implementing these commitments (including specific individuals within relevant institutions) and monitor their efforts and progress to see if they are on track, facing challenges, or simply not delivering on their stated commitments.
ii. Develop and disseminate integrated messaging that highlights the importance of the GAPPD to key decision-makers, influencers and community stakeholders. Highlight how the GAPPD can help support their commitments to child health, and specifically pneumonia and diarrhoea.

iii. Hold meetings with relevant policymakers and decision-makers to discuss child health and to further promote the adoption of the GAPPD recommendations. Find out how the government intends to commit to the GAPPD recommendations and to determine in which areas it may require additional advocacy support (for example, through the identification of relevant policy gaps that prevent adequate coverage of diarrhoea and pneumonia related interventions).

2. Monitor what is happening in relation to the GAPPD implementation:
   a. Once the GAPPD protect, prevent, treat recommendations have been adopted and integrated into national child health strategies, monitor if stakeholders are delivering against their commitments.
   b. Follow up through phone calls, meetings, or engagement with key stakeholders or colleagues who can provide information on the progress—such as government officials, media, NGOs, CSOs, political parties, health professionals, trade unions, private sector representatives. Where possible, embed this monitoring process into existing dialogue or monitoring processes, such as health joint sector reviews, technical WGs, committees, etc.

3. Identify problems leading to delays or blockages in implementation:
   a. Analyse the actions taken by the main stakeholders and compare with the monitoring strategy for implementation of the GAPPD developed by the coalition.
   b. Note any delays or problems and revise the strategy according to the impact on the process. Causes of delays and lack of progress should be identified in order to develop a solution and the key stakeholders responsible for delivering on the solution.

4. Advocate to and engage with key stakeholders in the process:
   a. Once you are clear on the solutions needed and who is responsible and accountable, identify the best way for the stakeholders to take action. Advocate for the desired change with the stakeholders.
   b. Remind key decision-makers that their progress is being tracked and that they are being held accountable for their commitments.
   c. Continue to identify any discrepancies against commitments: monitor and evaluate, acknowledge where the government has made progress in delivering on its stated commitments to the GAPPD recommendations, as well as where it needs to do more.