

MIDDLE EAST AND NORTH AFRICA HEALTH POLICY FORUM
(MENA HPF)
INSTITUTIONAL CHARTER

Preamble

1. The initiative to create an independent non-governmental forum to address issues related to health policy in the Middle East and North Africa region is a response to:
 - i) Scarcity of systematic research and analysis of health development challenges in the region,
 - ii) Inadequate capacity to conduct applied health policy research in the region,
 - iii) Lack of mechanisms to share experiences within the region and those of other countries in the world,
 - iv) Weak links between research and policymaking,
 - v) Inadequate data to support policy analysis at both national and regional levels.

2. The initiative furthermore reflects a broad recognition of the critical importance of health policy in the fulfilment of social justice and economic development in a region where the health systems tend to exhibit:
 - i) Inefficiency in the provision of health services and the prevention of illness,
 - ii) Social inequity arising from misallocation of resources and inadequate risk protection,
 - iii) Implementation failure, in instances where good health policies are adopted,
 - iv) Lack of readiness to meet new challenges, especially as the population begins to age and non-communicable disease becomes more prevalent.

3. In responding to these challenges, the following understandings about health outcomes and health policies are salient:
 - i) Determination of health outcomes is multi-faceted, implicating not only the health system, but also education and social policies, and the wider environment;
 - ii) Some health problems have a regional dimension, and can be fruitfully tackled comparatively or collectively (e.g. procurement of trained health workforce and pharmaceuticals);

- iii) Health policy reforms require collective action to overcome resistance to change by vested interests, both commercial and professional;
- iv) The presence of strong independent critique can be a catalyst for change, especially when the critique is sensitive to the factors that have inhibited good policy making and effective implementation in the past.

Mission Statement

4. The aim of the Middle East and North Africa Health Policy Forum is to contribute to the development, particularly in the low and middle income countries of the region, of effective, efficient, equitable and sustainable policies that improve health and/or that mitigate adverse consequences of ill health, particularly for those who are most disadvantaged.

Avenues of Impact

5. The Forum will seek to have an impact upon policy formulation by undertaking the following activities:
 - supporting the development of accessible data sets to conduct comparative analysis of health policy issues and to monitor the effectiveness of health policy reforms,
 - supporting the building of analytical and policy making capacity in the region (through works hops, seminars, occasional internships),
 - commissioning and disseminating high quality original research and analysis of health policy questions,
 - publishing various policy relevant papers, newsletters, and other publications as necessary,
 - providing a venue for networking and for exchange of ideas and experience amongst those with interest in health policy,
 - supporting through partnership related academic and research institutions in the region,
 - establishing a website with Forum papers, resources and links.
6. The Forum will prioritise its research agenda giving weight to the following criteria :

- impact on achieving the Forum’s mission, tackling problems that affect a large segment of the population, focusing upon those that appear susceptible to solution,
 - policy relevance, focusing in particular on problems that can be addressed by policymakers, and
 - breadth of regional coverage and importance.
7. The Forum will ensure quality of the research and policy analysis that it endorses or sponsors by:
- i) establishing a quality assurance process involving independent peer reviews both at the proposal and final-draft stages of the process, and
 - ii) directly commissioning papers by known experts in the field, in addition to the usual competitive tender of papers among regional researchers.
8. The Forum will ensure the relevance and impact of the research and analysis that it endorses or sponsors by:
- i) being sensitive to the political economy determinants of decision making,
 - ii) actively engaging policy makers at an early stage of project development to integrate their concerns and priorities (though without compromising independence and integrity) and to gain access to relevant data ,
 - iii) taking into account in the course of conducting research and policy analysis such dimensions as:
 - distributional issues,
 - political calculus (winner/loser analysis; political sustainability),
 - alternative policy options,
 - implementation issues, and
 - budgetary implications and affordability.
9. The Forum will employ various dissemination routes and techniques to maximise the impact of its work, including:
- i) holding conferences, workshops and seminars that involve all relevant stakeholders: ministers and other government officials, parliamentarians,

- representatives of professional associations, health insurers, self-help groups, NGOs, charities, and international agencies ,
- ii) issuing press releases and directly interacting with the media as appropriate ,
 - iii) publishing its research and policy analysis in the form of:
 - newsletter (paper/electronic),
 - working papers,
 - books, and/or
 - policy positions (endorsed by a two-third majority of the Board),
 - iv) creating a Forum website , and
 - v) creating affiliated country chapters (at a later stage).

Membership of The Forum

10. Forum Members will be selected with the objective of strengthening the ability of the Forum to achieve its mission. To that end, the Forum will seek academics, policy-makers and practitioners with:

- i) expertise in the areas of health management and planning, economics, statistics, public health, sociology of medicine and political economy;
- ii) experience with health policy issues, nationally, regionally and/or internationally;
- iii) commitment to participate in forum meetings and to contribute to the solution of health policy problems.

11. Members have the following rights:

- To participate in the activities organised by the Forum,
- To receive information about the activities organised by the Forum ,
- To participate in the Annual General Meeting,
- To submit papers for publication by the Forum or for presentation in Forum events (subject to the Forum's quality assurance procedures).
- To receive all publications by the Forum if they contribute a certain annual fee to be determined by the Board of Trustees guided by the cost of production.

- 12.** Members are expected actively to participate in the Forum.

- 13.** Membership is personal rather than institutional.

- 14.** A candidate for Forum Membership must be nominated by two Forum members.

- 15.** Candidates for Membership are reviewed by the Advisory Committee that is appointed by the Board of Trustees, which then submits its recommendations to the Board for approval.

- 16.** The Advisory Committee will review the candidates for membership according to the criteria stated above. The review will be based on the recommendations made by Forum members, the candidate's CV, publications, qualifications and other information available to the Committee.

- 17.** The Advisory Committee will also have responsibility to seek and to recommend to the Board additional members to achieve independent-mindedness, innovativeness, a balance of skills, geographical and gender representation, and to maximise the impact of the Forum.

- 18.** Members have voting rights unless they are for the time being:
 - government officials,
 - individuals who have no connexion to the region, by dint of residence, upbringing or nationality,
 - employees of commercial organisations.

The Board will exercise its judgement in case of dispute.

19. Five years after appointment, Members must have their membership renewed, following the same procedure as for new candidates , save that nomination is assumed.

20. Membership can be terminated by a two third majority of the board, on the recommendation of the advisory committee, for the following reasons:
 - seeking to derive a commercial profit from the activities of the Forum,
 - seeking to promote approaches of questionable benefit to the maintenance or improvement of health,
 - behaviour that has the potential to compromise the Forum’s achievement of its mission in any other way.

Organisational Form and Governance

21. As an institution, the Middle East and North Africa Health Policy Forum (**MENA HPF**) comprises a **Board of Trustees**, a secretariat headed by an **Executive Director**, and a body of **Forum Members** . Their functions are described below.

22. The Board of Trustees has the following responsibilities:
 - i) to oversee and to enforce the application of this Institutional Charter,
 - ii) to appoint, evaluate and if necessary replace the Executive Director , using objective criteria ,
 - iii) to appoint the Advisory Committee and other committees as it sees fit,
 - iv) to raise funds for the Forum ,
 - v) to represent the Forum ,
 - vi) periodically to evaluate the Forum’s activities and impact
 - vii) to select External Financial Auditors,
 - viii) to approve the annual financial statements and budget of the Forum , and
 - ix) to take other actions as required to meet the Forum’s mission.

- 23.** The Board comprises a maximum of thirteen Trustees drawn from the Members of the Forum. In order to guarantee their objectivity, none of the Trustees can simultaneously hold an Executive Officer position.
- 24.** The Board of Trustees may form an Executive Committee from amongst themselves to which it delegates some of its powers.
- 25.** Board members can serve for a maximum of two terms of four years' duration.
- 26.** Up to seven Trustees are elected by voting Members from amongst voting members every four years according to the following procedures. A list of candidates is compiled by the Director that includes two parts : (i) the current Board of Trustees' proposed list of seven candidates for the new Board, which may include renewals of current Board members , (ii) a list of additional candidates, each nominated by at least two voting Members. The intention is to give the current Board the opportunity to make a proposal that may be accepted if voting Members are satisfied with the Forum's current direction. Each voting Forum Member has a number of votes equal to the number of Trustees to be elected and these votes must be attributed to different candidates. The seven candidates who receive the largest number of votes become Trustees.
- 27.** Two additional Trustees should be selected by the Member-elected Trustees to ensure regional, professional and gender balance and otherwise to serve the Forum's mission.
- 28.** In addition, four Trustees can represent each of the four largest Forum Donors in the most recent five-year period, if they wish to be represented, subject to the approval of a majority of the member-elected Trustees.
- 29.** In case of a Trustee vacancy, the rest of the Board will elect on an interim basis a new Trustee until a new election is held.

- 30.** All Board decisions, except amendments to the Charter, are made by simple majority vote, with a minimum quorum of seven Trustees, of whom a majority should not be donor-representatives. In the case of a tie, the Chair has the casting vote.
- 31.** Members are admitted and renewed by the Board of Trustees.
- 32.** The Board will appoint both an Advisory Committee of up to six members and in addition its Chairperson, drawn from Forum members, each to serve for a maximum of two terms of three years' duration, and charge it with the following tasks:
- i)** to review and to propose nominations for membership of the Forum
 - ii)** to advise the Board on technical matters related to the selection of health policy themes and issues worthy of focus,
 - iii)** to advise the board on the criteria and processes required to assure the quality of the Forum's output,
 - iv)** to recommend actions by the Board in furtherance of the Forum's mission,
 - v)** carry out other assignments that may be decided by the Board
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- 33.** The Advisory Committee should comprise experienced, knowledgeable professionals selected to achieve balance where possible in terms of areas of specialization, geographical representation and gender.
- 34.** Advisory Committee members who fail to attend three consecutive meetings or who otherwise fail to carry out their duties, are subject to dismissal by a two-third majority of the Board.
- 35.** The Board will elect a Chairperson, a Deputy-Chairperson and a Treasurer from amongst its members.
- 36.** The Chairperson has the following duties:
- to represent the forum officially and legally,
 - to call and to head the meetings of the Board,

- to sign a contract with the Executive Director,
- to sign contracts for premises and make similar commitments on behalf of the Forum, and
- to accept endowments on behalf of the Forum.

37. The Deputy-Chairperson has the following duties:

- to assume the duties of the Chair when he/she is absent; and
- to assist the Chair in carrying out his/her duties.

38. The Treasurer has the following duties:

- to liaise with the Executive Director on the financial management of the Forum's endowment, cash flows and financial statements,
- to report to the Board on any important developments that require Board attention/decision, and
- to co-sign cheques with the Executive Director for amounts exceeding a sum to be stipulated by the Board.

39. All members of the Board must:

- Advise the Chair and Deputy Chair, and assist them in their functions;
- Participate regularly in Board meetings;
- Inform the Board and the Forum of their activities on behalf of the Forum.

40. Trustees who fail to attend three consecutive board meetings or otherwise fail to carry out their duties are subject to dismissal by a two-third majority by the remaining Board members.

41. The Executive Director is responsible for the prosecution of the Forum's mission and for the application of this Charter. Assisted by officers and staff, he/she is responsible for all executive functions of the Forum: activities, fund-raising, administrative and financial management, selection and appointment of officers and staff, etc. More specifically, the Executive Director will:

- prepare an annual work plan with associated budget for the Board's approval,

- draft an operating manual, to be approved by the Board,
- ensure that an Annual General Meeting of Forum Members is convened, to be chaired by the Chair of the Trustees ,
- inform the Board and the Annual General Meeting of the Forum’s activities in the previous year, including by the preparation of the Forum’s annual report,
- manage the activities and the general administration of the Forum, according to the instructions of the Board,
- sign cheques on behalf of the Forum, jointly with the Treasurer for amounts exceeding a sum to be stipulated by the Board,
- ensure that an appropriate record of accounts is maintained (where all incomes and expenses , properties and capital are registered correctly in appropriate detail),
- facilitate the fulfilment by the Board of its functions ,
- present a final report at the end of his/her mandate, detailing the situation of the Forum at the time, and providing all necessary information to his/her successor .

42. The Executive Director is appointed for up to three years. Appointments can be renewed, but overall tenure cannot exceed nine years. He/she chooses all other executive officers, and is the only executive directly accountable to the Board of Trustees.

43. The Board of Trustees should seek as Director an experienced and qualified leader, and accord her/him broad discretion to carry out her/his vision for the Forum.

Affiliation of National Health Policy Fora

44. The Board is charged in due course to sponsor the development of national health policy fora, with aims and constitutions consistent with those of the MENA HPF.

45. The Board is charged with constructing terms of affiliation for such fora, so as to support the building of local capacity for analysis, and as a means of realising the Forum's vision.

Amendments to Charter

46. The power to modify this charter will rest with voting Members. Amendments to the Charter must be formulated by the Board of Trustees or signed by ten percent of the voting Members and submitted to voting Members for adoption. Amendments are adopted with a two-thirds majority vote of all voting Members.

Legal Status and Location

47. The Forum is a non-profit, non-governmental, association. The precise legal structure and place of incorporation that best serve its goal will be decided upon by the Board of Trustees. The Board will also select a location for its secretariat.

Funding

48. The Board and the Executive Director on its behalf should seek funding necessary to realise the Forum's mission.

49. Funding proposals and/or donations should be subject to approval by the Board. The approval will be guided by the following principles in the interest of ensuring the credibility and sustainability of the Forum:

- i)** diversification of the funding base; and
- ii)** avoidance of Funding sources that might compromise the perceived independence of the Forum's policy prescriptions.

Founding Members and the First Board of Trustees

50. The Cairo meeting of September 2005 of the parties interested in establishing a regional health policy forum elected eight participants as a Task Force charged

with drafting this Charter and taking the necessary steps towards the establishment of the Forum, including the organisation of a founding meeting of a Forum.

51. The founding meeting of the Forum in Damascus during February 2006 constituted its participants as members of the Forum.
52. The members in turn appointed the members of the Task Force as an Interim Board of the Forum, with the full powers of the Board of Trustees by this Charter, subject to the Charter's endorsement by the members.
53. The term in office of the Interim Board is two years from the endorsement of this Charter by the Forum members.
54. After this initial two-year period, Trustees will be elected by Full Members according to the regular procedure.

20th June 2006

Founding Members :

1. Dr Musa Ajlouni
Senior Technical Adviser
Abt Associates
PHRplus
Amman
2. Dr Waleed Al Faisal *
Assistant Professor
Department of Community Health, Faculty of Medicine
Damascus University
3. Dr Samir Al-Jorf
World Health Organisation
Cairo
4. Dr Raeda Al-Qutob *
Assistant Dean and Researcher, Faculty of Medicine
Jordan University
Amman
5. Dr Ragui Assaad
Regional Director
West Asia and North Africa Office
Population Council
Cairo

6. Dr Mary E Deeb *
Faculty of Health Sciences
American University of Beirut
7. Dr Fadi El-Jardali
Assistant Professor,
Department of Health Management and Policy
Faculty of Health Sciences
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8. Dr Donald Franklin **
Senior Economic Adviser
UK Department of Health
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9. Dr Ahmed Galal**
World Bank
Cairo
10. Dr Zaid Hamzeh
Former Minister of Health, Jordan
11. Dr Najib Harabi
Professor of Economics ,
School of Economics and Business
University of Applied Sciences of N.W. Switzerland
12. Dr Rafeek Hosny
Senior Policy Adviser,
ECTAT
Cairo
13. Dr Umaiye Khammash
Population and Public
Health Advisor
Palestinian Health Policy Forum
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14. Mr Mounir Kharma
Chief Executive Officer, MEDNET
Beirut
15. Professor Marwan Khawaja
Assoc Professor and Director
Center for Research on Population and Health
Faculty of Health Sciences
American University of Beirut
16. Dr Nabil M Kronfol
President
Health Systems and Health Manpower Development
Lebanese HealthCare Management Association
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17. Dr. Anne Johansen *
Senior Health Specialist, Middle East and North Africa Region
World Bank
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18. Dr Mohamed Lahouel *
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19. Dr Azmi Mahafzah
Deputy Dean for Faculty Affairs
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Jordan University
20. Prof. Barry McCormick
Director and Chief Economist
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21. Dr Salwa Najjab *
Reproductive Health Advisor
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22. Dr Walid Nammour
Director, Centre for Continuing Education
Birzeit University
Ramallah
23. Prof. Heba Nas sar
Professor of Economics and Vice Dean
Cairo University
24. Dr Belgacem Sabri *
Director of Health Systems and Services Development
Eastern Mediterranean Regional Office
World Health Organization
25. Dr Hassan Salah
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Egypt Health Sector Reform Programme,
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26. Dr Hania Sholkamy
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Social Research Centre
American University of Cairo
27. Mr Walter Seidel
Health Sector
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European Commission
Brussels
28. Dr Sameen Siddiqi
Regional Adviser, Health Policy and Planning
World Health Organisation (WHO), EMRO

* Interim Trustee

** Interim Trustee, Coordinator

Secretariat : Clare MacIver, Assistant Economist, UK Department of Health, London