

**Practitioners convening opening remarks
July 18, 2011**

- On behalf of the Accountability and Monitoring in Health Initiative, a warm welcome to our Indaba on community monitoring for accountability in health. Appropriately, we have gathered at a place called Indaba, which means “a council or meeting of indigenous peoples of southern Africa to discuss an important matter.” We can usefully appropriate the meaning, I think, for what we will be trying to do in the next 2.5 days. Auspiciously too, perhaps, we begin on Mandela’s birthday!
- Let me briefly share with you why we have asked you to join us here for the next 2.5 days.

AMHI, a project of the Open Society Foundation’s Public Health Program (PHP), supports civil society groups to effectively and strategically use budget and community monitoring as **one** mechanism for promoting greater government accountability and transparency in health care to its citizens. As one of 10 projects or initiatives within the PHP that works to **create health-related policies and practices based on inclusion, human rights, justice, and evidence**, we believe that community monitoring is one of a complementary set of approaches to advancing health rights, including of socially marginalized groups.

From our own reflections, consultations and research, we have realized that community monitoring for accountability in health is an evolving field and that there are too few spaces and opportunities for practitioners to collectively share and reflect on their experiences and think creatively and critically about the field and its future. This understanding was endorsed by many practitioners we consulted with, including in particular at the First Global Symposium on Health Systems Research in Monteux in November 2010. The idea for this convening to support the advancement of the field and to begin addressing the gaps was solidified at that time.

Through this convening, we believe we have brought together experienced practitioners of community monitoring for accountability in health for 3 purposes:

1. **To share practical experiences and synthesize lessons about how we are thinking, how we are doing, and what impact we are having**
2. **To support and enhance the existing practice**
3. **To establish where we can go from here to better link practice, learning and documentation in mutually reinforcing ways**

We very much hope that by the end of our time together, we will have:

1. An enhanced understanding of the current contexts, concepts and designs for and practices of community monitoring for accountability in health

2. Identified gaps for effective practice and use of community monitoring for accountability in health
3. Begun developing a community of practitioner-learners interested in advancing the field

We are privileged to have four experienced practitioners from around the world who advised us through the preparation of this convening and whom I would like to invite to share their interest in the work we are doing here and to explain some of the background work they have been involved in leading up to the convening.

Before I invite Rene, Abhay, and Walter to come up, I would like to end by inviting and encouraging you all to participative fully and actively in the discussions as this is what will help us achieve the objectives we have set out.