Supplementary file 3. Stakeholders

Name	Role	Phase of engagement	Involvement	Influence	Incentives / disincentives	Additional notes
Organizatio	Role specifically related to collaboration	1. Getting started 2. working together 3. sustaining across sectors	High, medium, low level of involvement e.g. in terms of time, resources	High, medium, or low & positive or negative	Incentives or disincentives related to the collaboration	Examples and explanation
Concern Worldwide	Hosted innovations challenge. Contracted VillageReach to pilot the successful idea of CCPF. Funded for first year. After pilot funded the expansion to Nkhotakota, Mchinji (plus continuity in Balaka). Still funding 2 expansion districts to date.	1,2,3 (2011- present)	High at start Low since 2016	High and positive in the districts they work. Low influence on national ownership transition.	Health outcomes especially MNCH – NGO priority agenda, plus working already in focal districts.	Invited to Steering Committee and do attend.
Ministry of Health	Hosted innovations challenge. DHMT strong partner during pilot. National ownership responsibility and leadership e.g. steering committee. Sustainability in the future. Departmental specific governance.	1, 2, 3 (2011- present)	High – different individuals and departments along the timeline but throughout MoH has had HIGH level of involvement.	High and positive. MoH leadership has influenced other partners to become involved. Brings legitimacy.	Health outcomes – priority Government agenda, SDGs, and health systems strengthening.	
VillageReach	Implemented CCPF programme. Funding mobilization and relationship with partners, negotiations with MoH, M&E, and sustainability drive e.g. toolkit and assessment. Hire of most staff. Tech oversight and upgrades. Advocacy at national and global level.	1, 2, 3 (2011- present)	Highest. Throughout	High and positive. Leading implementation. Influencing focus on sustainability.	Health outcomes, health system strengthening, inline with VR mission statement to develop innovations at the last mile, and scale-up.	
The Baobab Health Trust	Early tech partner, designed the software system. Maintenance of the system. Involved in transition to government and tech upgrades (2018).	1, 2, 3 (2011- present)	High at start. Medium after 2011. It has varied according to tech requirements.	Medium and positive.	CCPF pay Baobab for their services. Health outcomes feature in their mission statement. CCPF is an opportunity for Baobab to promote their own software, and enhance their product.	Some small glitches and difficulties with Baobab's technology, and resolving issues takes some time, but the tone of collaboration is positive and strong.
mHealth Alliance & Advisors: Hopkins, WHO & GSMA	mHealth Alliance – funding through the Innovation Working Group (IWG) to support scale up to additional districts (Ntcheu, Mulanje) and support for ongoing work in Balaka after pilot funding ended. Supported a business case analysis to inform the scale up and sustainability strategy for CCPF.	2, 3 (2013-2015)	High during grant period (mHealth) Medium (Advisory role period)	HIgh and Positive – provided global visibility for CCPF and credibility for the program on a global scale.	Success of mHealth initiatives, global recognition	mHealth Alliance was later absorbed into the UN Foundation.

	Connected CCPF to mHealth advisors for mentoring and consulting, as well as first introductions to GSMA					
GSMA	Initially engaged through an advisory role (IWG) and then helped to broker the relationship with Airtel and provided funding for the nutrition work (added nutrition focused messaging to the mobile messages).	2, 3	Medium	HIgh and positive – provided credibility for the program within mobile communications field.	Relationships with mobile network operators, advancing mHealth and mobile network operators' interests.	
Clinton Health Access Initiative	Supported maternal and neonatal health component of the hotline through development of new messaging (for Tips and Reminders) and facilitating follow-up services for MNCH at community level. Supported the development of messages for maternal and neonatal health, and also linkages with Health Surveillance Assistants to follow up on pregnant women and mothers with neonates.	1 (2014-2015)	Medium	Medium and positive. The support lasted a short period of time, but was instrumental in developing messages for tips and reminders	Health outcomes (maternal, neonatal and child health)	The support lasted a short period of time.
Airtel	Tech partner, providing telecoms infrastructure to implement the hotline and text messaging service. Funding incoming calls (since 2015) and SMS promotional blasts.	2, 3 (2015- present)	High from 2015 (zero- rating calls) High during transition (marketing SMS blasts, helping with training of hotline staff, participate in SC meeting)	High and positive. Most significant form of support is funding the calls and SMS blasts. A positive influence, and essential for national ownership.	Corporate Social Responsibility (CSR). Airtel already had existing CSR initiatives in public health. Opportunity to utilise Airtel's own platform for CSR.	
GIZ (FNSP)	Nutrition component - developed the module & recruited nutrition specialists. Provided funding for additional hotline nutritionists at central level. Community mobilization in focal districts (funding radio programmes etc.)	2, 3 (2015 - present)	High – especially focusing on nutrition and in their focal districts.	High and positive - expansion to nutrition was their priority aim	Health outcomes especially nutrition – NGO priority agenda, plus working already in focal districts.	
Johnson & Johnson	Funding. Has provided unrestricted funding for a number of key areas to support the scale up and transition of hotline to the Ministry of Health. Many areas of funding support, for example; development of reference and professional training materials for the hotline, transition planning including support for the Ministry of Health's CCPF Steering Committee, secondment of a Technical Adviser to Ministry of Health to support transition planning, and branding.	2, 3 (2015 - present)	High. Provided funding for the critical period of scale up and transition to the Ministry of Health. Has supported branding of the hotline (a very important activity during the transition to the Ministry of Health)	Positive and high. Funding has supported many areas that other donors were not funding. It has been instrumental in terms of transition planning and scale up (promotion of the hotline in districts not covered by other partners)	CSR combined with objectives to address the following areas: maternal, neonatal and child health; TB, and HIV and AIDS	
Vitol Foundation	Funder since 2015. Has supported the CCPF scale up project to additional districts. Has contributed funding for program (including technology) and administrative costs to run the hotline.	2, 3 (2015- present)	High. Provided funding during the critical scale up phase when the CCPF was expanding to additional districts.	High and positive. Their funding supported key program (including technology) and administrative/ operational costs	Objectives to focus on health and Universal Healthcare Access - improving equitable access to quality primary healthcare.	

Seattle International Foundation Project Concern International (USAID's NJIRA	Funding. Supported the expansion of health topics for the hotline as well as transition planning through secondment of a Technical Assistant to the Ministry of Health Recruited 2 nurses for the hotline and funded expansion to Machinga. Technology support to MNCH nutrition topics. Equipment funding (2	2 (2015-2016) 2 (2016-2017)	High, from December 2015 to September 2016 Medium from 2016- 2017.	Medium and positive. Assisted the hotline at a critical stage of scaling up (topics and geography) and transition planning Medium and positive. Short time frame, one district. Invited to	Joint objectives to improve health and eradicate poverty. Health outcomes especially MNCH- NGO priority agenda, plus	Are not fully engaged in transition phase, unlike other partners.
Project)	stations).			Steering Committee and sometimes attended.	working already in focal district.	
United States President's Emergency Plan for AIDS Relief through the DREAMS Innovation Challenge	Provided funding for the development of the Adolescent sexual and reproductive health module, training of hotline workers in youth friendly health services, as well as for hotline promotion activities in 2 districts- Machinga and Zomba (promoting the hotline as a youth friendly service). Also worked with another DREAMS partner, FHI360, to develop messages for the tips and reminders (for adolescents and youths).	2, 3 (2016- present)	High from October 2016. Funding for development of module, training of hotline workers, and hotline promotion activities	High and positive.	Focusing on health outcomes—reducing incidence of HIV amongst adolescent girls and young women, and the hotline is instrumental as one of the sources of counselling/advice on SRH	Support has been key to make the hotline a youth friendly service, and many youths will benefit as the hotline scales up to the rest of the districts
USAID's Organized Network of Services for Everyone's Health Activity	Support to 16 districts, and funding for national transition phase (salaries, costs for hotline which means water electricity etc. and follow-up calls for referral tracking), and relocation of hotline and refurbishing of building. Technology upgrades, community mobilization in focal districts. Equipment in new hotline building.	1, 3 (2016 - present)	High	High and positive. Member of Steering Committee. Supported the move of headquarters from Balaka which is key milestone Refurbishment funding is hard to come by.	Objectives to improve health outcomes (FP, nutrition, malaria, MNCH, WASH) – NGO priority agenda, plus working already in focal districts. Health system strengthening and government strengthening/capacity.	Key partner. Timely partnership to support transition process.