The **Power**of **Partnership**



Uniting for women, children and adolescents



2018 ANNUAL REPORT (WHO/FWC/NMC/19.1)

© World Health Organization 2019

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

Suggested citation. Suggested citation. The Partnership for Maternal, Newborn & Child Health 2018 Annual Report: The Power of Partnership: Uniting for women, children and adolescents. Geneva: World Health Organization; 2019 (WHO/FWC/NMC/19.1). Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Printed in Switzerland.



Forewords



Executive Director, PMNCH

In April 2018, following the successful global kick-off event announcing that the Partners' Forum would take place in New Delhi in December, amazing artists from Pipli (a village in India) began hand-stitching hundreds of conference bags, banners and posters to be displayed and distributed at the main event. The banners adorned the walls, their distinctive appliqué style adding vibrant colour and energy. I had the pleasure of meeting these artists, women who had carefully sewn every image, every letter, every rivet onto the banners and to the bags we gave to more than 1,600 participants who joined us in New Delhi. Each bag depicted one of the six focus areas of the Every Woman Every Child movement, representing the hopes and aspirations of women, children and adolescents, everywhere. Many of you took a bag home, and whichever theme you carry as you go about your daily lives, I hope it is an inspiration to you to play your part in making our shared vision come true.

Collective visions are meaningful only if we work together to achieve them. One of the Forum's key themes was the importance of multistakeholder and multisectoral collaboration, supported by our 12 county case studies published in *The BMJ*. The studies, launched and discussed at the Forum, showcase how diverse sectors are deliberately finding new ways of collaborating and devising unique strategies to achieve shared goals. The studies give us real-world examples and lessons to incorporate into our work as we support progress towards the objectives of the Global Strategy for Women's, Children's and Adolescents' Health and the Sustainable Development Goals.



Developing the case studies was also an exercise in partnership in itself. More than a year in the making, the published studies, chosen from a pool of over 300 submissions, were prepared by dedicated country teams and involved over 500 participants from the 12 countries. This huge project required a great deal of coordination: teams in countries, here at the Secretariat and at *The BMJ* all made it happen.

2018 also saw a milestone in planning and strategizing. We finalized our 2018-2020 Business Plan, honing in on better ways of operationalizing our mandate and partnership-centric approach to ensure active partner engagement, connectedness and coherence across all our work.

This annual report is a slimmed down version of our deliverables for the year, but I hope it offers more than a glimpse of the coordination, collaboration and sheer determination our partners have provided to get the work done so that every woman, child, newborn and adolescent — in every setting — realizes their right to physical and mental health and well-being.

I invite you to read the report, noting areas where you feel you can help push us to do more or do better and sharing your thoughts with us. We are all part of this vision, powered by partnership as we move forward with unbounded creativity, energy and commitment.

Mrs Graça Machel

Founder, Graça Machel Trust and Member, High-Level Steering Group for Every Woman Every Child; Former PMNCH Board Chair

In 2018 I passed the baton of PMNCH Board Chair, a position I held with great pleasure for five years, to former President of Chile Michelle Bachelet. As we look back over the achievements of 2018 highlighted within this annual report, we can do so with immense pride at the strength and depth of our impact.

Over the past five years we brought together diverse voices to contribute to the development of the Global Strategy 2016-2030 and to advocate for the inclusion of women, children and adolescents in the post-2015 agenda. We spearheaded the political advocacy, messaging and commitment gathering for the Every Newborn Action Plan, ensuring a World Health Assembly resolution in support of the Action Plan by 197 Member States. We committed to meaningfully engaging young people through the creation of an adolescent and youth constituency; and finally, we focused our efforts on supporting countries, encouraging them to lead and take their rightful place as owners of their own futures.



There are many great achievements to look back on, but also many more challenges ahead. Our aim is to end the preventable deaths of women, children and adolescents. There is significant progress in meeting this mandate, but the pace is slow in relation to the magnitude of what we need to achieve. We cannot afford to reach 2030 and tell women, children and adolescents that — despite having so much knowledge, capacity and financial resources — we have failed.

In parting, I urge our partners and stakeholders to build upon the excellent platform PMNCH provides to bring together the experiences and knowledge of this community with increased vigour and commitment to create a bright and healthy future for the millions of children, adolescents and women of the world.

"COLLECTIVE
VISIONS ARE
MEANINGFUL ONLY
IF WE WORK TOGETHER
TO ACHIEVE THEM."

Helga Fogstad

"THERE ARE MANY GREAT ACHIEVEMENTS TO LOOK BACK ON, BUT ALSO MANY MORE CHALLENGES AHEAD."

Mrs Graça Machel



Dr Michelle Bachelet

United Nations High Commissioner for Human Rights; Former PMNCH Board Chair

At the end of my tenure as President of Chile in early March 2018. I became Chair of the PMNCH Board that same week. I took on my important role with passion and vigour. The Partnership's vision unites and motivates more than 1,000 partners who are part of this unique entity, to come together and find solutions that improve the lives and protect the rights of women, children and adolescents, everywhere. As a paediatrician, prioritizing women's, adolescents' and children's issues and championing the most vulnerable is always at the heart of what I do. In the Partnership, I found a kindred spirit. Now more than ever we must come together to ensure women's, children's and adolescents' health and well-being receives the global community's attention. Working in partnership is critical to our ability to share knowledge, define areas in which we can make a difference and unite under shared goals and a common understanding. Only then can we strengthen the discourse and put ourselves on the path to success and to realizing the Sustainable Development Goals.

In my role as PMNCH Board Chair, I could see the added value of PMNCH as an orchestrator of key partners at global and regional levels for impact at country level. I was eager to put in place a political engagement vision that would enable PMNCH to leverage its potential to influence agendas, policies and practices to accelerate achieving the objectives of the Global Strategy.

Becoming the United Nations High Commissioner for Human Rights meant that I needed to step down as Chair of the Board in September, but I will continue to stay connected through my role as Chair of the Global Women Leaders Network. This Network, made up of global and regional champions, will bring critical and priority issues related to women's, children's and adolescents' health to the forefront as well as mobilize for increased and better aligned political and financial commitments. I look forward to operationalizing this important role.

"WORKING
IN PARTNERSHIP
IS CRITICAL TO OUR ABILITY
TO SHARE KNOWLEDGE."

Dr Michelle Bachelet

"TOGETHER WE CELEBRATED SUCCESS STORIES AND LEARNED FROM OUR EXPERIENCES, INCLUDING MISSTEPS."

Ms Preeti Sudan



Ms Preeti Sudan

Acting Board Chair, PMNCH and Secretary, Department of Health and Family Welfare, Ministry of Health and Family Welfare, Government of India

At the end of 2018, we experienced the real power of partnership when the Government of India and PMNCH organized the Partners' Forum in New Delhi, India. The two days in December were a culmination of months of preparation, planning and collaboration, bringing together a huge machinery comprised of the PMNCH Secretariat, partner organizations, a dedicated team within the Government of India's Ministry of Health and Family Welfare, creative, logistics and event management experts and many more people along the way.

Together we celebrated success stories and learned from our experiences, including missteps. When all was said and done the message was clear: to transform societies, to achieve health and reduce mortality and to empower women, girls and

communities to reach their fullest potential, we need collective action, concrete commitments and partnership to drive the agenda. India is committed to women, children and adolescents. Their health and well-being remain at the heart of the government's policies, as reiterated by the Honourable Prime Minister of India, Mr Modi at the Forum. The Indian government is also committed to PMNCH and will continue to put its strength behind the Partnership and work closely to move the needle on health for women, adolescents and children.

Looking forward to the next two years, I am optimistic that if we can apply the knowledge, the research and all we have learned, the 2018 Partners' Forum will prove to be a true game-changer.

Acronyms and abbreviations

AYC Adolescent and Youth Constituency

CLAC Citizen-Led Accountability Coalition

CSOs civil society organizations

ECD early childhood development

EWEC Every Woman Every Child

FP2020 Family Planning 2020 (FP2020)

GFF Global Financing Facility

Global Strategy Global Strategy for Women's, Children's and Adolescents' Health

H6 UNAIDS, UNFPA, UNICEF, UN Women, WHO and the World Bank Group

IAP Independent Accountability Panel for Every Woman, Every Child, Every Adolescent

IYAFP International Youth Alliance for Family Planning

NCF Nurturing Care Framework

OAY Organization for African Youth

PMNCH/Partnership Partnership for Maternal, Newborn & Child Health

QED quality, equity and dignity

RMNCAH reproductive, maternal, newborn, child and adolescent health

SDGs Sustainable Development Goals

SRHR sexual and reproductive health and rights

UHC universal health coverage

UN United Nations

UNAIDS Joint United Nations Programme on HIV/AIDS

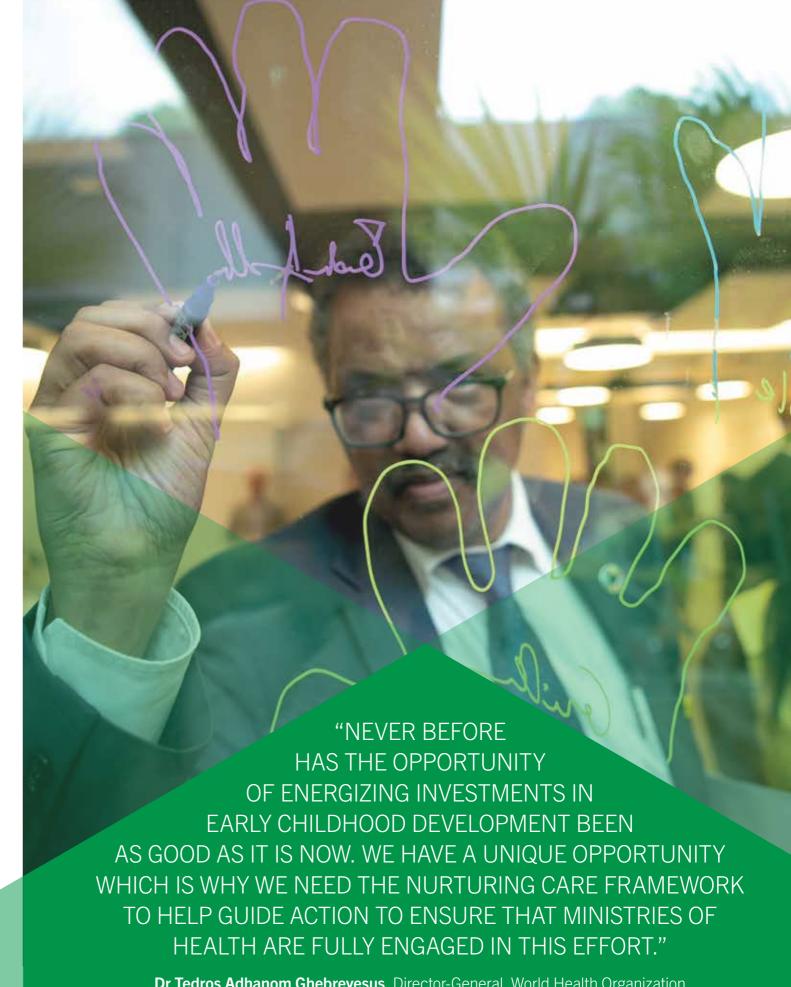
UNFPA United Nations Population Fund

UNICEF United Nations Children's Fund

UN Women United Nations Entity for Gender Equality and the Empowerment of Women

WCAH women's, children's and adolescents' health

WHO World Health Organization



Dr Tedros Adhanom Ghebreyesus, Director-General, World Health Organization At the launch of the Nurturing Care Framework

Year in review









JANUAR\

Michelle Bachelet agrees to become PMNCH Board Chair in March, at the end of her term as President of Chile.

MARCH

PMNCH is named as one of 10 high-scoring organizations in a new report from Global Health 50/50, based on a comprehensive review of the gender-related policies of 140 major organizations working in and/or influencing the field of global health.

PMNCH and the Inter-Parliamentary Union commit to working together to strengthen the capacity of parliaments to improve accountability for resources, results and rights for women's, children's and adolescents' health.

Indian Prime Minister Narendra Modi agrees to become patron of the PMNCH Partners' Forum during a global kick-off event.

APRIL

The selection of 12 country case studies on "success factors" in multisectoral collaboration, out of more than 300 proposals from around the world, is announced during the Partners' Forum kick-off event.

AUGUS1

The Government of Sweden hosts a PMNCH Board retreat in Stockholm to focus on the highlevel strategic implementation of the PMNCH 2018-2020 Business Plan

PMNCH launches Partners'
Forum website marking the start
of the official registration process,
including applications for sideevents and travel scholarships for
young people and journalists.



2018 in numbers

23,000 Twitter followers

400,000 website visitors

16 newsletters

13 webinars

40+ events

85 news articles

1,000+ Facebook followers

Twitter followers increased by almost 4,000

OCTOBER

PMNCH, International Youth Alliance for Family Planning and Family Planning 2020 spearhead the development of a Global Consensus Statement on Meaningful Adolescent and Youth Engagement. By the end of 2018, 170 organizations had endorsed the Consensus Statement; many more are expected to do so in 2019.

PMNCH announces new Acting Board Chair: the Government of India, represented by Preeti Sudan, following the departure of Michelle Bachelet to take up the role of United Nations High Commissioner for Human Rights.

NOVEMBER

PMNCH organizes a two-day advocacy workshop ahead of the Global Financing Facility (GFF) replenishment conference in Oslo, bringing together over 65 civil society organizations from 22 of the 27 GFF countries. The workshop marks the beginning of a youth movement around the GFF.

PMNCH launches the Virtual Partners' Forum, a series of five webinars relating to the themes of the Partners' Forum plenary sessions.

DECEMBER

1,600 participants from 85 countries attend the 2018
Partners' Forum in New Delhi where Prime Minister Narendra Modi pledges to invest US\$ 100 billion in improving health services in India by 2025.

Several reports are launched during the Partners' Forum, including an updated version of the Advocating for Change for Adolescents! toolkit refining the content based on experiences in five countries and setting out how young people can engage in the GFF process at country level.

The BMJ publishes a series proposed and supported by PMNCH which includes 12 country case studies offering real-world examples of what works, as well as the challenges involved, in collaborating across sectors for health and sustainable development.

MAY

World Health Assembly

The Quality, Equity and Dignity Advocacy Working Group, formed by PMNCH, hosts an event highlighting best practices in advancing action and accountability to improve both access to and quality of care for women, children and adolescents around the world.

Outgoing PMNCH Board Chair Mrs Graça Machel is honoured at a special reception hosted by PMNCH to mark the end of her five-year tenure.



PMNCH, WHO and the World Bank Group co-host a high-level briefing focused on women's, children's and adolescents' health in humanitarian and fragile settings in Muslim-majority countries and on how PMNCH could support efforts to improve outcomes in the region of the Organization for Islamic Cooperation.



Report of the Guttmacher-Lancet Commission on Sexual and Reproductive Health and Rights, presented in Geneva at a sideevent co-hosted by PMNCH, lays out essential interventions and an evidence-based, forward-looking vision crucial to the achievement of health and human rights for all.



Nurturing Care Framework for Early Childhood Development is launched by WHO, UNICEF and the World Bank Group, in collaboration with PMNCH and the Early Childhood Development Action Network, making a case for investments in the early years to ensure no child is left behind.

SEPTEMBER

United Nations General Assembly

Commitments to the Global Strategy for Women's, Children's and Adolescents' Health (2016-2030) is launched. This report, commissioned by PMNCH in collaboration with the Every Woman Every Child (EWEC) Secretariat and Family Planning 2020, tracks the implementation of commitments made between September 2015 and December 2017.



PMNCH hosts its annual
Accountability Breakfast at
which more than 300 participants
share new evidence and ideas on
how to strategize commitments
to and improve accountability
for the implementation of the
Global Strategy.



PMNCH, the Government of India and the EWEC Secretariat host "Uniting for Every Woman Every Child", gathering leaders and partners to highlight the political momentum around the EWEC movement, underscoring the important role of high-profile global leaders and influencers.

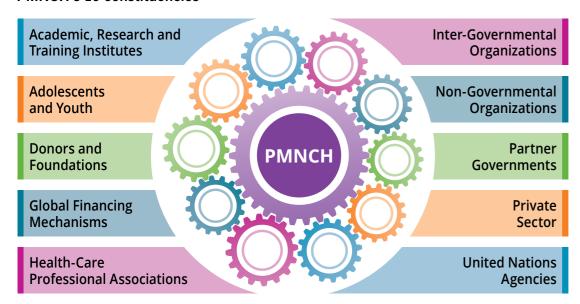


The Independent Accountability Panel, hosted by PMNCH, launches *Private Sector: Who Is Accountable?* This report presents five recommendations and calls for stronger regulation of the private sector to ensure accountability for women's, children's and adolescents' health.

10



Figure 1. PMNCH's 10 constituencies



Analysis:



Through its members and supported by the Secretariat, PMNCH synthesizes, translates and makes accessible vital research results and evidence on

WCAH, focusing particularly on high-impact interventions and innovations capable of driving WCAH outcomes. This evidence guides policy and programming decisions, and is used to track progress towards global, regional and national goals.

Alignment:

PMNCH brings partners together in its 10 constituencies to exchange information, discuss

challenges and opportunities, and agree on policy, advocacy and evidence-based priorities for WCAH. All work is undertaken within the framework of the Global Strategy for Women's, Children's and Adolescents' Health (Global Strategy) and in support of the Sustainable Development Goals (SDGs) and universal health coverage (UHC). PMNCH enables diverse partners to work together in a structured, focused and effective way, generating deep and broad commitment to the achievement of global goals for WCAH.



Advocacy:

PMNCH helps to forge consensus on priority issues for WCAH, working through its constituency structure, Board meetings, online consultations and periodic Partners' Forums

to unite its members around clear policy priorities and common advocacy messages. PMNCH provides resources and platforms to equip, connect and amplify the voices of its partners. Amid the many issues and priorities competing for wider public and political attention nationally and globally, PMNCH helps sustain focus on meeting the needs of women, children and adolescents.



Accountability:

Through its members and constituency groups, PMNCH tracks commitments to the Global Strategy's "survive, thrive

and transform" objectives and summarizes progress towards the related SDG targets. Its multi-constituency nature, including a growing focus on collaboration with parliamentarians and the media, promotes constructive, open and inclusive dialogue. PMNCH also supports the Independent Accountability Panel for Every Woman, Every Child, Every Adolescent (IAP), a group of 10 experts who report regularly to the United Nations (UN) Secretary-General's High-Level Steering Group for Every Woman Every Child (EWEC).

PMNCH IS THE WORLD'S LARGEST ALLIANCE FOR WOMEN'S, CHILDREN'S AND ADOLESCENTS' HEALTH. No other partnership working for WCAH has the breadth, depth and diversity of PMNCH. From governments to private sector businesses, from health-care professionals to grassroots activists: the Partnership's work connects the smallest village to the UN General Assembly, and vice versa.

PMNCH is directed by a diverse Board (Annex 1) including representation from all its member constituencies and supported by a small Secretariat (Annex 2) hosted by the World Health Organization (WHO) in Geneva.

PMNCH's governing bodies

In 2018, the Board and the Executive Committee developed, reviewed and adopted the PMNCH 2018-2020 Business Plan. It clearly defines the Partnership's contribution to the 2020 EWEC Partners' Framework targets, the Global Strategy and the SDGs and will guide the Partnership's work until the end of 2020.

At a retreat in Stockholm in August 2018, the Board focused on defining the strategic framework and key workstreams for the Business Plan and oversaw preparations for the 2018 Partners' Forum. The 22nd Board meeting took place in December in New Delhi, at the conclusion of the successful Partners' Forum.

Leadership of the Board underwent two transitions in 2018. PMNCH welcomed Dr Michelle Bachelet, former President of Chile, as the new Board Chair following Mrs Graça Machel. When Dr Bachelet was appointed UN High Commissioner for Human Rights in September, Ms Preeti Sudan, Secretary of India's Ministry of Health and Family Welfare, stepped in as Board Chair ad interim.

PMNCH is proud to have been headed by three outstanding women leaders in 2018 and extends heartfelt thanks to Mrs Machel and Dr Bachelet, and to Ms Sudan, with gratitude for her continuing leadership as Board Chair ad interim.

This report presents highlights of PMNCH's activities in 2018 – an extraordinary year for the Partnership, with the diversity of its work being showcased at the 2018 Partners' Forum (see Spotlight 1 for details). Other achievements described below represent the Partnership's work in a number of EWEC focus areas (Chapter 2), country engagement (Chapter 3), accountability (Chapter 4), political engagement (Chapter 5) and resource mobilization (Chapter 6). All the publications and events in which PMNCH was involved are listed in Annex 3.





Heads of State, global champions, ministers of health and finance and parliamentarians were among the 1,600 participants from 85 countries who attended the fourth Partners' Forum, co-hosted by the Government of India in New Delhi on 12-13 December 2018. The Forum also engaged a large online audience throughout the two days.

Narendra Modi, Prime Minister of India, delivered the opening address to a standing-room-only audience. The opening ceremony used film, music and animation to highlight the voices of women and girls, a theme which continued throughout the two-day event.

The Forum's objectives were to achieve greater consensus and alignment among PMNCH's partners on priorities, strategies and technical approaches to accelerate implementation of the Global Strategy and progress towards UHC and the SDGs.

The Forum's four plenary and numerous concurrent sessions covered political leadership, multisectoral collaboration, accountability and the power of partnership. The sessions brought together voices from all levels and constituencies, including governments, parliamentarians, the private sector,

academics, civil society and young people, to discuss and highlight achievements and remaining gaps in the global endeavour to improve WCAH. The bustling interactive Marketplace provided numerous additional opportunities for delegates to engage with each other.

Addressing delegates during the final session, Helga Fogstad, Executive Director of PMNCH, said: "We have come together because of a common vision: to ensure that every child survives, to thrive in their childhood and beyond, and to ensure that we all work together to transform the health and well-being of everyone everywhere, so that no woman, no child, and no adolescent is left behind. This cannot be done in isolation. The scale of the task requires us all to commit to this vision to create a better world, to stand accountable for our commitments, and to leverage the immense power of partnerships across organizations and sectors in order to shape a more prosperous and sustainable future."

In the <u>Forum communiqué</u> the PMNCH community committed to placing people at the centre of its agenda, affirmed the need to engage in multisectoral action and collaboration, and confirmed its belief in the power of partnership.



PMNCH made a significant investment in communications for the Forum, implementing a robust digital and traditional media strategy that supported activities in the lead up to and during the two-day event. Social media were key for promoting the Forum's messages and expanding reach. On the first day of the Forum #EWECisME was trending in the sixth spot. The official Forum hashtag #2018PMNCHLive generated 18,700 mentions and 36,600 likes and shares and garnered 464.4 million impressions (compared to 94.4 million during the 2014 Forum) with a total of 5,000 unique participants (up from 3,700 in 2014).

Virtual Forum:

PMNCH developed a virtual programme to engage a much larger and more diverse audience. Five pre-Forum webinars reflecting the plenary session themes drew 300 participants from 80+ countries. During the Forum, plenary sessions were live-streamed and supported by a live Facebook-moderated discussion.

Partnership with the media:

PMNCH in collaboration with the International Center for Journalists facilitated participation in the Forum of 50 journalists from around the world. Close to 100 interviews were conducted, including with the *Financial Times* and CNN, and more than 85 stories were published in 20 countries.

Sexual and reproductive health and rights (SRHR):

A call to action on SRHR as a core pillar of UHC was shared with Forum participants for feedback and sign-on (see Chapter 2 for details).

Ministerial conclave:

28 ministers and other government representatives took part in this closed session which focused on country-specific priorities and actions to accelerate progress on improving WCAH. Countries and partners pledged to strengthen and expand health systems, including improvements to information systems for effective planning and monitoring, as well as training and deployment of skilled and motivated health-care professionals. Another of its key agreements was to draw on PMNCH's support for improving multisectoral collaborations and aligning partnerships around national health strategies to scale up effective, people-oriented innovations to improve efficiency, impact and reach.

Parliamentary conclave:

Held on the day before the Forum, 23 parliamentarians pledged to act as champions for WCAH in their respective countries, to establish or use existing structures to increase focus on and oversee the implementation of the Global Strategy, and to discuss progress at the Inter-Parliamentary Union Assembly in Qatar in April 2019 during a three-hour workshop on WCAH in UHC. Efforts are also ongoing to revise the WCAH Handbook for Parliamentarians in close collaboration with the Inter-Parliamentary Union Secretariat.



EWEC commitments:

19 commitments were made during the Forum, led by Indian Prime Minister Narendra Modi, who announced a US\$ 100 billion investment in health for the people of India by 2025. World Vision International pledged to mobilize US\$ 7 billion for women's, children's and adolescent's health; and a US\$ 65 million addition to previous pledges was made by Laerdal Medical Foundation.







Publications launched during the Forum:

- Making Multisectoral Collaboration Work: special Partners' Forum issue published by The BMJ
- India's Strategy for Women's, Children's and Adolescents' Health (I-Wach) 2018-2030: India's adaptation of the Global Strategy
- Proven Paths for Women's, Children's and Adolescents' Health: A compendium of best practices for WCAH in India
- Guidelines for midwifery services in India
- <u>Advocating for Change for Adolescents!</u> A practical toolkit for young people to advocate for improved adolescent health and well-being
- A Guide for Implementing the Global Strategy for Women's, Children's and Adolescents' Health in Latin America and the Caribbean
- Survive and Thrive: Transforming care for every small and sick newborn

More information about the Forum is available at: https://www.who.int/pmnch/about/governance/partnersforum/2018/en/.

2. EWEC focus areas

A significant portion of the Partnership's work in 2018 concerned the six thematic priorities of the EWEC Partner's Framework 2020: SRHR; adolescent health and well-being; early childhood development (ECD); quality, equity and dignity in health services to improve WCAH; empowerment of women, girls and communities; and WCAH in humanitarian and fragile settings.

A key achievement for the Partnership in 2018 was the publication of 12 country case studies in a special series of *The BMJ* — two case studies concerning each focus area (see Spotlight 2 for details). Other developments relating to the EWEC focus areas are described in this section.

Sexual and reproductive health and rights

The Partnership played an important role in ensuring that SRHR, including family planning, is defined as a key element of the life course approach as outlined in the Global Strategy. Building on this background and the committed engagement of various PMNCH Board members, the Partnership intensified its role in the global promotion of SRHR during 2018. PMNCH's Executive Director is an active member of the Advisory Group for the Guttmacher-Lancet Commission on SRHR, providing critical input, advice and guidance. PMNCH worked with the Guttmacher Institute, UNFPA and WHO to plan and co-host the Geneva launch event for the Commission's report in May 2018, achieving high-level representation (including WHO's Director-General and the French and Swedish Ambassadors for Global Health), more than 250 participants and significant media coverage. A strong call was made at the event to define SRHR as a central pillar of the UHC movement.

This call was taken up at the Board retreat in Stockholm in August 2018, where a number of strategic action areas for SRHR were identified. Following the retreat, PMNCH worked with the Swedish International Development Cooperation Agency, Global Health Strategies and other partners to produce a "key messages" document summarizing the human rights and economic arguments for promoting SRHR interventions as core elements of an essential UHC service package. This document has been shared with more than 50 partners as a resource and reference for blogposts, speeches and strategy documents.

This effort is being expanded significantly in 2019. A revised call to action, incorporating feedback from a range of partners, is being shared for sign-on, targeting 250 or more institutional endorsements.

Sessions or panels on SRHR and its place within UHC are planned for major events in 2019, including the Inter-Parliamentary Union 140th Assembly (Qatar, April), the World Health Assembly (Geneva, May) and the High-Level Political Forum (New York, September). The aim is to secure high-level political support for defining SRHR as a crucial element of UHC and for the inclusion of SRHR interventions in the forthcoming WHO "menu" of UHC interventions. In addition, PMNCH will work with and support civil society organizations (CSOs) to carry out focused advocacy in five countries, calling for the inclusion of SRHR in national UHC action plans and budgets.

Adolescent health and well-being

Global consensus on meaningful youth engagement

Developed by PMNCH, the International Youth Alliance for Family Planning (IYAFP) and Family Planning 2020 (FP2020), the Global Consensus Statement on Meaningful Adolescent and Youth Engagement was launched in 2018 at both the International Family Planning Conference in Kigali in November and the Partners' Forum in New Delhi in December. In addition, the French version was presented at the Ouagadougou Partnership meeting in December. The Consensus Statement was informed by a series of consultations which gathered recommendations from 30 youth-led and youth-serving organizations worldwide. It defines the phrase "meaningful adolescent and youth engagement" and identifies key principles to ensure such engagements enable young people to play a central role in matters that affect them.

By the end of 2018, over 170 organizations, including UN agencies, CSOs and donors, had endorsed the Consensus Statement. Many more are expected to sign on in 2019 as mobilization efforts and wider dissemination continue. In addition, the Partnership, IYAFP and FP2020 will host a series of consultations, including a webinar, showcasing how endorsing organizations are engaging adolescents and young people meaningfully in policies and programmes. The webinar will also serve as a starting point for discussions with partners about next steps and for developing an accountability system for the Consensus Statement.



Mentorship programme

Launched in 2017, the Adolescent and Youth Constituency (AYC) mentorship programme involves a year-long commitment by mentors to their mentees. In 2018, 50 mentors were engaged in this pilot programme, working with their mentees, for example through virtual channels or in person at key meetings/ conferences. The PMNCH Secretariat and the AYC also developed an online resource hub for young professionals concerning priority topics, including EWEC focus areas, resource mobilization, entrepreneurship and monitoring and evaluation. Over 50 key resources and tools were shared with programme participants and the wider AYC. The Partnership will conduct a survey in early 2019 to assess the AYC including the mentorship programme and will work with AYC members to develop a proposal for future digital capacity-building initiatives.



Following the launch of the toolkit *Advocating for* Change for Adolescents! by PMNCH and Women Deliver in May 2017, AYC members in Cameroon, India, Kenya, Malawi and Nigeria received small grants to support the adaptation and roll-out of the toolkit in those countries. The aim is to expand and build the capacity of the youth movement in advocacy and accountability at national and subnational levels. Between March and August 2018, national toolkits were developed in collaboration with each country's Ministry of Health and with youth-led and youthserving organizations. Across the five countries, more than 2,500 young people and adolescents and approximately 150 decision-makers (including policymakers, government officials and community and faith leaders) were directly engaged in 2018.

The national toolkits are being used in a variety of ways, including: advocating for continued, increased and ring-fenced resources for adolescent health and well-being; lobbying for the removal of legal barriers that prevent access to services by adolescents and young people; and strengthening the mutual accountability of all stakeholders.

An updated version of the global toolkit, launched at the 2018 Partners' Forum, includes five country case studies showcasing successes and challenges in adapting and using the toolkit, as well as information on how youth leaders and youth-led organizations can engage in the Global Financing Facility (GFF) process at country level. Launched in 2015, the GFF is a country-driven, government-led financing partnership aiming to accelerate efforts to end preventable maternal, newborn, child and adolescent deaths by 2030 (see Chapter 3 for more information about how PMNCH supports the GFF).

The Partnership has renewed its grants to the five youth-led organizations and, following an impact evaluation exercise, aims to roll out the toolkit in five more countries in 2019. Girls Globe, a youth-led organization, will coordinate the next phase of activities. The toolkit will also be translated into Spanish to enable its implementation in Spanish-speaking countries.



Supporting coordination and engagement of youth organizations and networks

After a consultation in July 2017 revealed that the youth movement in Malawi was highly fragmented, PMNCH issued a small grant to the AYC country coordinating organization to support the coordination and engagement of youth organizations and networks to enable their meaningful participation in district and national WCAH technical committees. By the end of 2018, young people from three districts (Rumphi, Karonga and Chitipa) were equipped and trained to effectively represent their interests on District Area Development Committees. Seventy people aged 10-30 years participated in an advocacy and empowerment training session for rural youth-led organizations in the three districts. In collaboration with Health Policy

Plus and the National Youth Council, they are working to enhance their engagement with the National Youth Policy and to improve youth-friendly health services. In 2019, PMNCH will continue to support Malawi's AYC country coordinating organization and the project will be expanded into at least four additional countries in order to strengthen coordination for organized, collective, youth-led advocacy and accountability at national and subnational levels.



Early childhood development

The Partnership increases the coordination and alignment of actions, policies and resources in the context of nurturing care, including through contributing to the development, dissemination and implementation of a Nurturing Care Framework (NCF) for ECD. Nurturing care is vital for healthy growth and development; it encompasses young children's needs for good health, optimal nutrition, security and safety, opportunities for early learning and responsive caregiving. Launched by WHO, UNICEF, the World Bank Group, PMNCH and the Early Childhood Development Action Network during the World Health Assembly in May 2018, the NCF makes the case for investments in and consolidates guidance on practical approaches to support families. The NCF is designed to enable the health sector to deliver results while strengthening national multisectoral programming. In this way, it helps guide countries in their decisions to scale up effective interventions, mobilize resources and monitor progress.

The Partnership's contributions to the NCF in 2018 can be broadly categorized as follows.

Promoting multisectoral collaboration and harmonization

PMNCH facilitated extensive consultations with partners and governments from all WHO regions to shape the content, dissemination and implementation of the NCF. PMNCH received over 1,000 contributions from 111 countries. There were two global online consultations and eight in-person national and regional consultations between July 2017 and March 2018. PMNCH also facilitated agreement among partners on the essential nurturing care interventions that need to be integrated into broader WCAH essential interventions packages in high-burden countries and into national development plans.

Managing knowledge and evidence

PMNCH helped to establish the nurturing care website, www.nurturing-care.org. This knowledge hub increases access to evidence on multisectoral operations and delivery of effective nurturing care interventions. It includes best practice country case studies, publications, training materials and partner toolkits. In 2018, PMNCH also provided technical support for the development of an evidence brief summarizing the findings of Ending Violence in Childhood, the 2017 report published by Know Violence in Childhood, an independent global learning initiative.



PMNCH took a lead role on advocacy, social media communications and launch events for the NCF at the 2018 World Health Assembly and supported the development of a Nurturing Care Toolkit. PMNCH also led on developing and implementing long-term, evidence-based advocacy campaigns that enable EWEC High-Level Steering Group champions, partners and government leaders to advocate for an increased focus on, and an integrated multisectoral approach to, nurturing care.

Tracking and reporting

PMNCH supported the integration of NCF-related processes into existing Global Strategy accountability frameworks, to enable monitoring and reporting of progress and reduce duplication of efforts. PMNCH disseminated widely the Countdown to 2030 Country ECD profiles, which were developed by UNICEF and the Centre of Excellence in Human Development at South Africa's University of the Witwatersrand. These profiles, a first step towards a global monitoring and accountability system for ECD, were launched alongside the NCF in May 2018.

In 2019, PMNCH's ECD work will focus on expanding political will and increasing investments in an integrated multisectoral approach to support nurturing care provision in at least five countries. PMNCH will also: work with partners to develop a joint plan of action for implementing the NCF, including in humanitarian and fragile settings; track progress of ECD commitments and outcomes; and promote the use of ECD country profiles.



The Global Strategy recognizes the need to safeguard women, children and adolescents in humanitarian and fragile settings and to uphold their human rights, even in the most difficult circumstances. In the current humanitarian and development landscape, cross-sectoral coordination remains a challenge, especially for the WCAH continuum of care.

Additionally, the health and well-being of women, children and adolescents, often the most vulnerable people in humanitarian and fragile settings, are frequently overlooked in conflicts, emergencies and disasters. Complementary and coordinated actions by humanitarian and development agencies are critically needed, and present a major challenge.

In 2018, PMNCH established a Humanitarian and Fragile Settings Working Group to oversee this work in line with the PMNCH Business Plan. Members include key partners from different constituencies and sectors. The Working Group is exploring how to strengthen coordination of WCAH in such settings. Their work will build on existing structures and will link mechanisms to connect health and health-enhancing sectors.

The Working Group is taking a phased approach, starting with in-depth mapping and analysis to better understand gaps and duplications, and to identify how PMNCH could help address these challenges.

In May 2018, PMNCH, WHO and the World Bank Group co-hosted a high-level briefing in Geneva on WCAH in humanitarian and fragile settings. The event focused on Muslim-majority countries in crisis situations, based on the findings of a *Lancet* study, and on how PMNCH could support efforts to improve health outcomes for women, children and adolescents in the region of the Organization for Islamic Cooperation. The event affirmed the need for advocacy and coordination and for alignment of resources, knowledge, expertise and initiatives within the region. The value of PMNCH's continued engagement in promoting collaboration between partners and sectors was highlighted.



Spotlight 2: Country case studies on making multisectoral collaboration work

In December 2018, *The BMJ* published a special series proposed by PMNCH providing real-world examples of what works, as well as the challenges involved, in collaborating across sectors for health and sustainable development. The series' 12 country case studies were selected from over 300 responses to PMNCH's global call for proposals. Supported by the PMNCH Secretariat and a Steering Committee, the analysis and writing of the case studies was conducted over a year by dedicated country teams and involved over 500 participants.

The 12 case studies showcase how diverse sectors, such as health, education, nutrition and social services, are shaping new ways of collaborating and learning, using "business not as usual" strategies to achieve shared goals. The case studies relate to the six thematic priorities of the EWEC movement (see list below) and illustrate diversity in terms of country income level, region, and sectors and stakeholders engaged. By shedding light on what works and why, and on how to address the challenges of collaborating across sectors, the series aims to inspire dialogue and collective learning, as well as political interest in and further research and action for multisectoral collaboration.

The series also includes an editorial, a synthesis paper and two opinion pieces, one by Jagat Prakash Nadda, Union Minister for Health and Family Welfare, Government of India, and Nikolai Astrup, Minister of International Development, Government of Norway.

A social media campaign was supported by a podcast and e-blast to announce the launch at the Partners' Forum on 12 December 2018, and by a short animated film summarizing the series' findings, first shown at the plenary session on multisectoral collaboration. Both *The BMJ* and PMNCH hosted pages dedicated to the series on their websites. The PMNCH Secretariat also produced a document summarizing the 12 case studies and an e-book containing 19 project summaries that were not selected.

In 2019, PMNCH will analyse the country case study methods, including the multistakeholder dialogue process, in order to assess what worked and to identify areas that could have been strengthened.

The 12 case studies

Adolescent health and well-being

Indonesia: a school-based multisectoral collaboration to improve adolescent girls' nutrition and to prevent anaemia

USA: a multisectoral collaboration to accelerate policy changes to promote healthy weight for all children and adolescents in the United States

ECD

Chile: lessons learned from scaling up an ECD programme through a national multisectoral approach to social protection

Germany: improving psychosocial services for vulnerable families with young children by strengthening links between health and social services

SRHR

Malawi: the benefits of multisectoral collaboration in scaling up a toll-free hotline staffed by trained health workers to provide age-appropriate information on sexual and reproductive health, nutrition and other issues

Malaysia: improving coverage of human papillomavirus immunization of adolescent girls through multisectoral collaboration





Empowerment of women, girls and communities

Guatemala: a community-led multisectoral collaboration to make the health system more responsive to indigenous women

South Africa: a multisectoral, government-led campaign tackling HIV by empowering adolescent girls and young women

Humanitarian and fragile settings

Afghanistan: a multisectoral collaboration scaling up primary health services for improving reproductive, maternal and child health in a conflict setting

Sierra Leone: a multisectoral collaboration to promote children's health, education and human rights after a humanitarian crisis by redesigning an education project for child-friendly radio broadcasts

Quality, equity and dignity

Cambodia: how the national poverty identification system, IDPoor, has provided a nexus for different sectors' contributions to maternal and child health among the poor

India: lessons learned from Intensified Mission Indradhanush, a cross-sectoral systems strengthening strategy to improve vaccination coverage

3. Country engagement

Facilitating the broader and more effective collaborations needed to improve WCAH at the country level requires the engagement of constituencies not traditionally involved in setting policy priorities, developing plans and monitoring implementation (e.g. CSOs, adolescents and young people, academics, health-care professional associations, and the private sector). PMNCH encourages cross-constituency engagement and consultation in two ways: working through its network of in-country partners to strengthen government-led national multistakeholder platforms, and providing catalytic grants to strengthen constituency-specific coalitions, building their capacities to develop joint advocacy and accountability plans and engage meaningfully in the national planning and implementation processes.

Recognizing that strong, unified national and subnational coalitions are more effective in advocating for WCAH than individual organizations, work commenced in 2018 to implement PMNCH's partnership-centric approach and support in-country efforts to better harness and align the contributions of the wide array of actors engaged in WCAH. This chapter uses three country examples to illustrate the scope of PMNCH's support to countries in 2018. Spotlight 3 provides an overview of PMNCH's work relating to the GFF Civil Society Coordinating Group. In 2019, PMNCH will accelerate efforts to strengthen constituency-based coalitions to support its broader efforts to strengthen national multistakeholder platforms for increased and improved focus on WCAH in UHC.

STRONG, UNIFIED NATIONAL AND SUBNATIONAL COALITIONS ARE MORE EFFECTIVE IN ADVOCATING FOR WCAH THAN INDIVIDUAL ORGANIZATIONS.

India

In 2018, the Government of India and key in-country partners, with support from PMNCH, revived the RMNCAH Coalition. The Coalition comprises 134 partner organizations at national and subnational levels and across constituencies (including states and allied ministries). This group of policy and programme leaders is committed to raising awareness, fostering collaboration and advocating for improved programmes to achieve national WCAH goals. Its mission is to facilitate inclusive multistakeholder engagement to galvanize efforts, build momentum and scale up innovative solutions to improve WCAH.

In 2018, through a consultative process that included four multistakeholder dialogues, the Coalition identified four priority areas of action: early childhood development; quality, equity and dignity; adolescent health and well-being; and urban health. Each action area is supported by a working group whose mandate is to provide actionable recommendations based on a situational analysis of their respective areas, in line with global best practices. Under the guidance of the Government of India, the Coalition also developed India's Strategy for Women's, Children's and Adolescents' Health, 2018-2030, informed by the Global Strategy.

In parallel, PMNCH supported the youth-led YP Foundation's efforts to advocate for and build the capacity of young people to participate in the design and delivery of WCAH programmes and policies that affect them. Achievements in 2018 included: creating platforms for young people to engage with other stakeholders (e.g. policy-makers, health officials, service providers and community and faith leaders);

developing a cadre of 15 young advocates with the knowledge and skills to advocate effectively for adolescent health and increase engagement with decision-makers; and developing an India-specific adolescent health advocacy and accountability toolkit and interactive advocacy resources.

As a result of PMNCH's support, the YP Foundation and its youth networks are now connected to the national RMNCAH Coalition and are a part of the national planning and implementation process. In 2018, YP's cadre of trained advocates and network of 45 youth-led and youth-serving partners worked with 22 decision-makers to organize national and subnational consultations which contributed to a position paper on adolescent health and well-being (led by the RMNCAH Coalition) as well the revision of Rashtriya Kishor Swasthya Karyakram, India's national adolescent health and well-being programme.

In 2018, India also hosted the PMNCH Partners' Forum, during which Prime Minister Narendra Modi pledged US\$ 100 billion to improve WCAH in India and Minister of Health and Family Welfare J P Nadda launched three key reports (see Spotlight 1 for details).

Kenya

In GFF countries such as Kenya, government-led multistakeholder platforms agree on country priorities for WCAH, develop investment cases, mobilize resources, and support the implementation and monitoring of the investment cases. GFF guidance emphasizes the importance of formal CSO representation on these platforms and the vital role that civil society plays in the implementation of and accountability for the investment cases.

In 2018, through PMNCH's GFF CSO catalytic grant, CSOs in Kenya strengthened their organizational capacity, increased membership of the Health NGO Network, mapped members at the county level and developed an engagement strategy to guide CSO efforts in support of the investment case. They also supported the government in strengthening the national platform with a view to rendering it more transparent and inclusive. This included advocacy for youth representation on the platform as well as additional civil society and technical partner representation. In addition, CSOs issued a 2018 scorecard to track progress on implementing the investment case and monitor the GFF process. Data from the first scorecard revealed delays in paying out funding in 2017, partly due to the elections. CSOs cited these when calling on the government to disburse the funds. They also called for some of the funds to be used to fill the 60% funding gap for family planning commodities. Both calls were successful: funds were disbursed between November 2017 and January 2018 to all 47 Kenyan counties, and the GFF now provides 25% of funding for family planning commodities. Results of the 2018 scorecard will inform advocacy in 2019.

PMNCH also supported the Kenyan branch of the Organization of African Youth (OAY), a non-governmental organization established in 2009 and operating in 11 African countries, to advocate for and improve implementation of the Adolescent Sexual and Reproductive Health Policy in Kenya. In 2018, OAY worked collaboratively with the government and other stakeholders to develop youth-friendly, evidence-based information, education and communication materials, including on how to prevent pregnancy and HIV infection. OAY also worked with their extensive network to build the capacity of 20 youth-led and youth-serving organizations to advocate for increased access by adolescents to health and well-being services and information in Kenya. PMNCH connected OAY to broader civil society and other stakeholders to promote meaningful adolescent and youth participation in relevant SRHR policies and to increase access to SRHR services. Approximately 1,200 young people and adolescents and 100 decision-makers (policy-makers, government officials, and community and faith leaders) participated in these dialogues.



Cameroon

In Cameroon, PMNCH's support focused on social accountability, helping national CSOs build the capacity of 20 community-based data collection agents to track the GFF investment case's agreed indicators in health centres in three regions. Coverage and quality of services were assessed in 69% of health centres in those regions, focusing on antenatal care services, prevention of mother-to-child transmission of HIV, and family planning services. The data collection report formed the basis for advocacy to health centres, local governments (including regional offices of the national programme to fight child mortality) and development partners. The findings were also presented to religious and traditional leaders, who play an important role in community mobilization, and to administrative authorities.

CSOs also prioritized information sharing. Thirty peer educators received training on the availability of WCAH services in the three GFF regions, the importance of increasing demand for WCAH services and behavioural change communication. These peer educators conducted outreach activities in 60 health centres and surrounding communities, reaching 1,785 men, 4,363 women and 360 young people.

Outreach to men focused on why accessing WCAH services is important, because many women need their husband's permission to leave the home.

Dialogues with women and young people about increasing demand for services revealed a general lack of knowledge about available services.

In parallel, PMNCH supported the Advocating for Change for Adolescents Project of the Cameroon Agenda for Sustainable Development, which aims to accelerate accountability for adolescent health and well-being in Cameroon. In 2018, the Project: launched a national advocacy toolkit for adolescent health and well-being; designed a new toolkit for the collection of additional and disaggregated data on adolescent health and well-being; and advocated for the adoption of the new toolkit to accompany the comprehensive sexuality education programme for secondary schools. The Project developed eight advocacy tools and engaged more than 630 young people and adolescents as well as 16 decision-makers (policy-makers, government officials, and community and faith leaders) with the aim to improve access to sexual and reproductive health information and services for adolescents in secondary schools.



Spotlight 3: GFF Civil Society Coordinating Group

PMNCH manages the GFF Civil Society Coordinating Group, which coordinates civil society engagement in the GFF at global, regional and country levels. It includes a Steering Committee and working groups on accountability, health financing, and capacity building and country support.

Following the development of the GFF Civil Society Engagement Strategy and Implementation Plan in 2017, PMNCH support to the Coordinating Group in 2018 included: developing and disseminating quarterly updates; organizing eight consultative webinars in French and English to garner civil society perspectives ahead of the GFF Investors' Group meetings; and mapping activities in 18 countries to inform CSOs of points of engagement.

The Coordinating Group also developed the Adolescent and Youth addendum to the GFF Civil Society Engagement Strategy and issued small grants to CSOs in Cameroon, Kenya, Nigeria and Sierra Leone to strengthen civil society engagement in GFF processes. In November 2018, PMNCH and the GFF launched a small grants mechanism hosted by Management Sciences for Health, a global nonprofit organization working with partners to build resilient and sustainable health systems.

A highlight of the year was a two-day advocacy workshop in Oslo in November, just prior to the GFF replenishment meeting. It was attended by over 65 representatives from 22 of the 27 GFF countries and marked the beginning of a youth movement around the GFF, a milestone which was reflected in the joint communiqué.



4. Accountability for results, resources and rights

In order to achieve the Global Strategy's targets by 2030, mutual accountability must be strengthened so that all partners can be held accountable for their commitments and actions. As mandated by the UN Secretary-General, the Partnership supports and fosters unified, independent and mutual accountability processes and platforms through a multistakeholder Unified Accountability Framework, helping countries drive results, secure adequate resources and uphold rights. PMNCH and its partners apply three functions to strengthen accountability: monitoring (determining whether progress towards the targets is on track); reviewing (fostering independent reviews and calls to action); and remedy (advocating for evidence-based decision-making and action).

In 2018, PMNCH achieved great progress in building and strengthening accountability by bringing together key partners to share the latest evidence and lessons and to catalyse improvements for WCAH.



Tracking progress at the global level

Reporting on commitments to EWEC

In March 2018, PMNCH resumed its leading role in reporting on progress in the implementation of commitments made by non-state actors to the Global Strategy. For the first time, this process also included FP2020 commitment-makers supporting EWEC. Nonstate commitment-makers were able to report on their progress via an online questionnaire, which was designed and managed by PMNCH in close partnership with the EWEC Secretariat and FP2020.

An analysis of the progress reported by non-state commitment-makers was incorporated into a report on commitments to the Global Strategy, and into detailed analyses of commitments in humanitarian and fragile settings and commitments for adolescent health and well-being. All three reports were launched at the PMNCH Accountability Breakfast during the UN General Assembly in New York on 23 September 2018. The Accountability Breakfast brought together governments, parliamentarians, media, non-governmental organizations, youth groups, the private sector, UN agencies, donors, academics and others to discuss accountability for WCAH. Its three panels (on social, financial and performance accountability) emphasized effective national/regional accountability mechanisms and partnership processes, and focused on how those mechanisms and processes complement and are complemented by evidence from global monitoring and review reports.



Improving the tracking of financial resources for official development assistance

In May 2018, PMNCH and Countdown to 2030 established the Joint Technical Working Group for the Tracking of Financing for Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health. The Working Group's mandate is to increase alignment of and reduce duplication by all stakeholders, to create more robust tracking processes overall, and to inform better use of resources for WCAH at the centre of UHC.

Achievements in 2018 included the development and endorsement of an improved method of estimating official development assistance for WCAH, "Muskoka 2", which was presented at a meeting of the OECD Development Assistance Committee in Paris in November 2018. In 2019, the Working Group, supported by PMNCH and the Bill & Melinda Gates Foundation New Venture Fund, will agree on an agenda for domestic financial tracking and will pilot the Muskoka 2 methodology with interested donor countries.

Tracking progress at the country level

Strengthening country capacity to track and validate EWEC commitments

Since 2017, PMNCH has implemented an online questionnaire to enable non-state commitmentmakers to report progress towards their EWEC commitments. However, a gap exists in tracking the progress being made by governments. In August 2018, PMNCH began supporting the Samasha Medical Foundation, a non-governmental organization based in Uganda, to use the Foundation's methodology to track and validate FP2020 and EWEC commitments by governments in four pilot countries (Nigeria, Tanzania, Uganda and Zambia). The Motion Tracker© framework enables stakeholders to work with governments to develop, implement and report on commitment-related indicators, thereby keeping commitments visible, highlighting progress and addressing any bottlenecks. This has also fostered partner participation and engagement and wider stakeholder ownership for country-led improvements in WCAH. The pilot is partly funded by the Bill & Melinda Gates Foundation, with PMNCH filling the funding gap to implement this work. In October 2018, PMNCH engaged a consultant to evaluate the methodology and its implementation in the pilot countries. This evaluation will help to inform future plans to expand the pilot into 14 additional countries.



Bridging evidence, experience and action

accountability mechanisms

On 10 and 11 December 2018, PMNCH and the organizations of the Citizen-Led Accountability Coalition, also known as CLAC (International Planned Parenthood Federation, Save the Children, White Ribbon Alliance and World Vision International), jointly organized the Social Accountability Symposium for WCAH in New Delhi, just before the Partners' Forum. This event marked an important milestone in the advancement of knowledge and best practices relating to social accountability for improving WCAH and nutrition. It served as a platform for knowledge exchange, including on current actions in countries, and for discussion of policy implementation at different levels. Live graphics recordings broadcast each session's key messages to a wider online audience.

In 2019, PMNCH will work closely with CLAC and other partners, including the CORE Group and WHO, to share the latest evidence, successes and best practices to increase the practice of social accountability. This will be achieved through various platforms, including the World Health Assembly, citizens' hearings and consultations, and the PMNCH Accountability Breakfast during the UN General Assembly.

Using data for action

PMNCH has been working closely with partners and the H6 (UNAIDS, UNFPA, UNICEF, UN Women, WHO and the World Bank Group) to strengthen accountability mechanisms and to engage more systematically and effectively with national and regional accountability mechanisms. One example is a UNAIDS-led approach supporting better use of health data at country level. The Country Health Situation Room initiative, implemented in seven countries in sub-Saharan Africa, uses health data from different sources to create powerful graphics illustrating progress towards key health targets, updated at regular intervals. A core objective of the Health Situation Room is greater data transparency, in order to ensure that the best available data reach national decision-makers and to strengthen social accountability and civil society's efforts in monitoring progress. In 2018, PMNCH helped to ensure that WCAH-related norms and standards were included in the Situation Room concept. PMNCH also commissioned From data and reporting to impact and accountability: a case study on the Country Health Situation Rooms. The findings show success in some countries (e.g. Kenya and Zambia) in translating data into decision-making about WCAH.



The Independent Accountability Panel

The Partnership hosts the IAP Secretariat and provides financial support for its activities. The IAP is an autonomous group of <u>internationally recognized</u> experts and leaders in the field. It was mandated by the UN Secretary-General to produce the only annual report that tracks progress towards the Global Strategy's 2030 targets through the specific lens of accountability.

Following the *Transformative Accountability for Adolescents* report, issued in 2017, the IAP's third report *Private Sector: Who is Accountable?* was launched at a high-level event co-hosted by the Governments of Finland and South Africa during the UN General Assembly in New York in September 2018 and officially submitted to the High-Level Steering Group for EWEC. The report's content was informed by responses to a public call for evidence, exchanges with key informants, multistakeholder consultations and a dedicated session with private-sector representatives hosted by the World Economic Forum.

The IAP issued five recommendations on: access to services and the right to health; the pharmaceutical industry and equitable access to medicines; the food industry, obesity and noncommunicable diseases; the UN Global Compact and the EWEC partners; and donors and business engagement in the SDGs.

A <u>summary of the recommendations was published in</u> the five UN languages.

Stakeholders strongly welcomed the IAP's findings and recommendations, including ministers, CSOs, women's and young people's rights activists, the global funds, academics and senior-level UN representatives. Articles about the findings were published by *The Lancet*, allAfrica.com, Devex and IISD/SDG Knowledge Hub.

In following up on its reports, the IAP proactively identifies opportunities for reaching strategic stakeholders, and disseminates its recommendations at global, regional and country levels. In 2018, these activities included: a national launch in Georgia; a dedicated side event with parliamentarians at the Inter-Parliamentary Union Assembly and similar events at regional meetings; distributing copies of the report to all UN Missions and capitals; discussing follow-up with H6 heads; and engaging with relevant stakeholders during the PMNCH Partners' Forum, the Global Symposium on Health Systems Research, the International Federation of Gynecology and Obstetrics conference and an Open Society Roundtable, among others.



in the current shifting political and development landscape. To ensure that no one is left behind in the implementation of the SDG 3 agenda, it is imperative that WCAH is a central part of global health initiatives such as the UHC movement, primary health care and the Human Capital Project. PMNCH's role of convening, orchestrating and advocacy can influence agendas, policies and practices, as well as promoting better synergies, coordination and effective engagement. Political engagement needs to reflect and promote global, regional and national efforts to support change at national and community levels.

The Board requested the Secretariat to develop a PMNCH Political Engagement Strategy aiming to engage leaders and champions at all levels to mobilize for more and better aligned political and financial commitments to the achievement of the Global Strategy objectives. The structures, relationships and activities that will constitute the Engagement Strategy will leverage and support existing networks, key partners, PMNCH governing bodies, its 10 constituencies and other champions, as well as exploring opportunities to establish networks where they are applicable and needed.

Women Leaders Network

Dr Bachelet, having stepped down from the PMNCH Board Chair after her appointment as UN High Commissioner for Human Rights in September 2018, agreed to convene and chair the Women Leaders Network. The Network will cut across regions, constituencies and sectors to highlight neglected issues and lead on WCAH priorities. The Network will function within the context of PMNCH's Political Engagement Strategy and by leveraging other networks at global, regional and country levels. PMNCH and the Women Leaders Network will facilitate the establishment of regional networks where none exist and empower national and community leaders.

On 23 September 2018, Dr Bachelet invited women leaders and champions for WCAH to an informal preparatory meeting to discuss and brainstorm on establishing the Women Leaders Network. The group agreed that this initiative is timely and critically necessary.

6. Resource mobilization

In 2018, the Partnership's Secretariat worked closely with its Board, the membership at large and with the Donors and Foundations Constituency to ensure that sufficient resources were available for PMNCH to deliver on its aims and objectives. Despite the very challenging and uncertain global financial climate, this collective effort paid off, ensuring a strong funding base for PMNCH to achieve its deliverables.

PMNCH's work in 2018 was funded through grants from 17 donors:

- nine governments: Canada, Germany, India, the Netherlands, Norway, Sweden, Switzerland, the UK and the USA;
- six private foundations: Bernard van Leer Foundation, Bill & Melinda Gates Foundation, Botnar Foundation, Children's Investment Fund Foundation, Ford Foundation and MacArthur Foundation;
- one private sector company: Merck Sharp & Dohme Corp.; and
- one multilateral initiative: the GFF.

Of those donors, the Government of Switzerland, the Bernard van Leer Foundation, the Ford Foundation, Merck Sharp & Dohme Corp. and the GFF all supported the Partnership's work for the first time.

PMNCH met all its reporting requirements in 2018, which saw the Partnership interact with its donors through 35 reporting instances.

PMNCH secured grants totalling US\$ 11 million for 2018. This was sufficient to meet the needs of its Essential Budget (US\$ 10 million), although it fell short of the ambitions set out in the Board's US\$ 15 million Comprehensive Budget for 2018. More details on the Partnership's financial position are presented in its financial reports, available on the PMNCH website (www.who.int/pmnch).

In addition to financial support from donors, the partnership-centric model of operations has resulted in ongoing contributions of time and effort from many PMNCH members, without which 2018's achievements would not have been possible.

In 2019, the Partnership continues to face the challenge of ensuring that the Board's ambitions, as set out in the 2018-2020 Business Plan, are supported by sufficient financial resources. This challenge is heightened by the fact that many important multi-year grants came to an end in 2018. Concerted efforts will be required by all PMNCH members to ensure that existing donors renew their support, and to identify and secure new sources of funding. The Board's newly established Strategy and Finance Committee, supported by the PMNCH Secretariat, will play the important role of overseeing work to mobilize resources in 2019. The aim will be to secure at least the US\$ 10 million required for the Essential Budget; the ambition will be to enable the Partnership to deliver on all the value-adding activities included in the US\$ 15 million Comprehensive Budget.



PMNCH 2018 Annual Report Power of Partnership: Uniting for women, children and adolescents

Annex 1. PMNCH Board Members

Academic, Research and Training Institutes

- Baylor College of Medicine Children's Foundation Malawi Dr Peter Kazembe
 Executive Director
- BIRDEM and Ibrahim Medical College, Diabetic Association of Bangladesh

Professor Kishwar Azad Project Director, Perinatal Care Project and Professor of Paediatrics

Barcelona Institute for Global Health (ISGlobal)
 Dr Núria Casamitjana Badia
 Director of Training and Education

Adolescents and Youth

President

 African Youth and Adolescent Network on Population and Development (AfriYAN) Tikhala Itaye

Gogontlejang Phaladi Pillar of Hope Project (GPPHP)
 Gogontlejang Phaladi
 Founder and Executive Director

Donors and Foundations

UK <u>Department for International Development (DFID)</u>
 Gillian Turner
 Health Advisor
 Will Niblett
 Head, Sexual and Reproductive Health and Rights

• The Norwegian Agency for Development Cooperation (NORAD)

Lars Grønseth
Senior Advisor
Health, Education and Research

Health, Education and Research

<u>US Agency for International Development (USAID)</u>
 John Borrazzo
 Deputy Director, Office of Maternal, Newborn, and Child Health and Nutrition

Bureau for Global HealthSwedish Ministry for Foreign Affairs

Anders Nordström Ambassador for Global Health

Bill & Melinda Gates Foundation
 Nosa Orobaton
 Deputy Director, Maternal, Newborn and Child Health



Global Financing Mechanisms

Gavi, the Vaccine Alliance
 Anuradha Gupta
 Deputy Chief Executive Officer

Health-Care Professional Associations

• International Confederation of Midwives
Franka Cadée
President

• International Federation of Gynaecology and Obstetrics (FIGO)

C N Purandare President Elect FIGO and Dean Indian College of Obstetricians and Gynaecologists, Purandare Hospital

The Hospital for Sick Children (SickKids)
 Zulfiqar Bhutta
 Robert Harding Chair in Global Child Health and Policy
 Co-Director, Centre for Global Child Health
 Peter Gilgan Centre for Research and Learning

Inter-Governmental Organizations

 International Federation of Red Cross and Red Crescent Societies (IFRC)
 Elhadj As Sy Secretary General

 Inter-Parliamentary Union Martin Chungong Secretary General

Non-Governmental Organizations

• <u>Save the Children</u> Thiago Luchesi *Advocacy Advisor, Child Survival and Health*

• White Ribbon Alliance
Betsy McCallon
Executive Director

Swasti Health Resource Centre
 Angela Chaudhuri
 Director

• PATH David Fleming Vice President

Partner Governments

• Government of Indonesia
Dr Nila Moeloek
Minister of Health

Government of Tanzania

Ummy Mwalimu
Minister of Health, Community Development, Gender,
Elderly and Children

Government of Nigeria
 Prof Isaac Adewole

 Federal Minister of Health

Government of India

Preeti Sudan (board vice-Chair, acting Chair as of 1 November) Secretary, Health and Family Welfare Ministry of Health and Family Welfare

Private Sector

Merck Sharp & Dohme (MSD) for Mothers
 Mary-Ann Etiebet
 Executive Director

Royal Philips

Jan-Willem Scheijgrond
Vice President
Global Head of Government & Public Affairs

United Nations Agencies

• United Nations Population Fund (UNFPA) (permanent seat)

Natalia Kanem

United Nations Under-Secretary-General and Executive Director of UNFPA

• United Nations Children's Fund (UNICEF) (permanent seat)

Ted Chaiban

Director of Programme Division

World Health Organization (WHO) (permanent seat)
 Princess Nothemba (Nono) Simelela

Assistant Director General

Family, Women's and Children's Health

World Bank Group (permanent seat)
 Timothy G Evans
 Senior Director, Health, Nutrition and Population
 Global Practice



Annex 2. PMNCH Secretariat

Javier Arina-Iraeta	Administration and Finance Officer	Nebojsa Novcic	Strategy and Finance Officer
Magda Babinska	Project Officer (August – December)	Miriam Sabin	Accountability Manager
Olive Cocoman	Project Officer (April – August)	Abir Shady	Governance and Board Relations Manager
Beverly Conway	Programme Assistant	Mehr Shah	Technical Officer
Andrea Gros	Technical Officer (joined in September)	Kadi Toure	Technical Officer
Anna Gruending	Project Officer (January – August)		
Tammy Farrell	Assistant	Veronic Verlyck	Technical Officer, Communication
Helga Fogstad	Executive Director	IAP Secretariat	
Rachael Hinton	Technical Officer	Maria Jose Alcala	Director
Lori McDougall	Coordinator	Ilze Kalnina	Project Manager
Anshu Mohan	Country Engagement Manager, Partners' Forum Coordinator	Harry Lacsamana	Programme Assistant

Annex 3. Publications and events in 2018

PMNCH-supported publications

Calls to action

Global consensus statement on meaningful adolescent and youth engagement English:

https://www.who.int/pmnch/mye-statement.pdf

https://www.who.int/pmnch/mye-statement-fr.pdf

Sexual and reproductive health and rights: An essential element to achieving universal health coverage https://www.who.int/pmnch/media/news/2018/pmnch-call-to-action-SRHR.pdf

Reports

The BMJ series: Making multisectoral collaboration work https://www.bmj.com/multisectoral-collaboration

Partnership for Maternal, Newborn & Child Health and Women Deliver. Advocating for change for adolescents! A practical toolkit for young people to advocate for improved adolescent health and well-being.

 $\frac{https://www.who.int/pmnch/knowledge/publications/}{advocacy_toolkit.pdf}$

Partnership for Maternal, Newborn & Child Health and Family Planning 2020. Partnership for Maternal, Newborn & Child Health Report: Commitments to the Every Woman Every Child Global Strategy for Women's, Children's and Adolescents' Health (2016-2030).

https://www.who.int/pmnch/activities/advocacy/globalstrategy/2016_2030/commitments-report-2015-2017.pdf

Family Planning 2020 and Partnership for Maternal, Newborn & Child Health. Commitments to the Every Woman Every Child Global Strategy for Women's Children's and Adolescents' Health (2016-2030): Commitments in support of humanitarian and fragile settings, 2015-2017. https://www.who.int/pmnch/activities/advocacy/globalstrategy/2016_2030/commitments-humanitarian-fragile-settings-2015-2017.pdf

Family Planning 2020 and Partnership for Maternal, Newborn & Child Health: Commitments to the Every Woman Every Child Global Strategy for Women's Children's and Adolescents' Health (2016-2030): Commitments in support of adolescent and young adult health and well-being, 2015-2017.

https://www.who.int/pmnch/activities/advocacy/globalstrategy/2016_2030/commitments-adolescent-young-adult-health-2015-2017.pdf

Independent Accountability Panel for Every Woman, Every Child, Every Adolescent. 2018 report: Private sector: who is accountable? for women's, children's and adolescents' health.

http://iapreport.org/#downloads

World Health Organization, United Nations Children's Fund, World Bank Group. Nurturing care for early childhood development: A framework for helping children survive and thrive to transform health and human potential.

https://apps.who.int/iris/bitstream/hand

le/10665/272603/9789241514064-eng.pdf

PMNCH-supported events and consultations

Nurturing Care Framework Phase I consultation 24 January- 6 February, online

8th Africa Conference on Sexual Health and Rights: Adolescent and Youth Constituency breakaway session 12 February, Johannesburg, South Africa

Adolescent and Youth Constituency leadership retreat 26-27 February, Geneva, Switzerland

QED Advocacy and Communication Strategy Planning 6-7 March, Geneva, Switzerland

PMNCH/EWEC workshop on digital redevelopment 8-9 March, Geneva, Switzerland

Nurturing Care Framework Phase II online consultation 14-28 March, online

Roll-out of the global "Advocating for Change for Adolescents!" toolkit

23rd March, Kilifi County, Kenya

Ensuring accountability and oversight for adolescent health 27 March, Geneva, Switzerland

Partners' Forum global kick-off event

11 April, New Delhi, India

Partners' Forum creative workshop

12-13 April, New Delhi, India

PMNCH Executive Committee face-to-face meeting 18 April, Washington, D.C., USA

GFF Civil Society Coordinating Group face-to-face meeting 20 April, Washington, D.C., USA

Partners' Forum creative workshop

26 April, London, UK

PMNCH/Countdown consultation on financial tracking for women's, children's and adolescents' health

10-11 May, London, UK

Geneva launch of the Guttmacher-Lancet SRHR Commission's report

21 May, Geneva, Switzerland

Global surgery: a powerful strategy for advancing women's health

21 May, Geneva, Switzerland

Roundtable on improving women's, children's and adolescents' health in humanitarian and fragile settings 22 May, Geneva, Switzerland

Why women, children, adolescents and youth are central to advancing universal health coverage, quality, equity and dignity, and sexual and reproductive health and rights 23 May, Geneva, Switzerland

Launch of the Framework on Nurturing Care for Early Childhood Development

23 May, Geneva, Switzerland

EWEC Innovation Marketplace Breakfast – **Partnerships** to scale health innovations

23 May, Geneva, Switzerland

Quality, equity, dignity and universal health coverage: learning from best practices across sectors and constituencies

24 May, Geneva, Switzerland

Digital Resources Partner Workshop 26 June. Geneva. Switzerland

1st meeting of the PMNCH and Countdown Technical Working Group on Financial Tracking

27-28 June, London, UK

BRANCH Consortium Meeting

17-19 August, Dubai, United Arab Emirates

PMNCH Board Retreat

28-30 August, Stockholm, Sweden

PMNCH 2018 Accountability Breakfast

23 September, New York, USA

PMNCH Women Leaders Network — First meeting

23 September, New York, USA

Launch of 2018 IAP report *Private Sector: Who is Accountable?*

27 September, New York, USA

Uniting for Every Woman Every Child — High-level reception 28 September, New York, USA

2nd meeting of the PMNCH and Countdown Joint Technical Working Group on Financial Tracking 18 October, Geneva, Switzerland

Global Financing Facility CSO Workshop (meeting during GFF Replenishment)

3-4 November, Oslo, Norway

Social accountability symposium for women's, children's and adolescents' health: bridging evidence, experience and practice

10-11 December, New Delhi, India

RMNCH+A's achievements, lessons and innovations 10 December, New Delhi, India

Take care of yourself! Consultation on reaching adolescents and young people through self-care interventions for health (sci4h)

10 December. New Delhi, India

Multisectoral partnerships for child health: accelerating progress towards the SDGs

10 December, New Delhi, India

Leaving no woman, no child behind: what evidence on inequalities in RMNCH is needed to advocate and act? 11 December. New Delhi. India

Bridging the quality chasm: ensuring universal access to quality RMNCAH services with equity and dignity 11 December, New Delhi, India

Spotlight on the many voices of the early childhood workforce

11 December, New Delhi, India

PMNCH Partners' Forum Parliamentarian Conclave: Driving change for women, children and adolescents 10 December, New Delhi, India

PMNCH Partners' Forum Ministerial Conclave: Accelerating progress on women's, children's and adolescents' health in the SDG era 12 December, New Delhi, India

4th Partners' Forum. The Power of Partners: Uniting for women, children and adolescents 12-13 December, New Delhi, India

PMNCH 22nd Board meeting 14 December, New Delhi, India Photo credits

Page 2-3: FIA Foundation & Child Health Initiative

Page 4: PMNCH

Page 5: Oliver O'hanlon

Page 6: Oliver O'hanlon

Page 7: PMNCH

Page 9: Oliver O'hanlon Page 12: Axelundfoto

Page 12: Axelundioto

Page 14: European Parliamentary Forum

Page 15: PMNCH

Page 16: PMNCH

 $\textbf{Page 17} \ (\textbf{left to right}) : \textbf{PMNCH}, \textbf{European Parliamentary Forum, PMNCH}$

Page 18-19: Every Woman Every Child

Page 20: Girls Globe

Page 21: PMNCH

Page 23: Oliver O'hanlon

Page 27: PMNCH

Page 28: OA Youth Page 29: OA Youth

Page 29: UA Youth

Page 31: PMNCH

Page 33: Melanie Einzig Photography

Page 35: Melanie Einzig Photography

Page 36: Axelundfoto

Page 37: FIA Foundation & Child Health Initiative

Page 38: PMNCH

Page 40: Oliver O'hanlon

Back cover: Lily Kak

Writing and editing Joanne McManus

Design

Annovi Design





The Partnership for Maternal, Newborn & Child Health

c/o World Health Organization 20 Avenue Appia, CH-1211 Geneva 27, Switzerland

pmnch@who.int www.pmnch.org

twitter.com/pmnch facebook.com/pmnch